

**FY 2011 – 12 Human and Social Services  
Community-Based Organization Funding  
Request for Proposal (RFP No. 0411)**

**INTRODUCTION**

Funds are available to support countywide criminal justice-related services and/or programs for youth populations as identified, discussed, and recommended by the Miami-Dade County Youth Crime Task Force (YCTF) and the Dade-Miami Criminal Justice Council (DMCJC). Youth-related priority areas include family and community-focused juvenile delinquency prevention/intervention; youth gang prevention/intervention; and selected best practice models targeting chronic juvenile offenders. It is the intent of these funding priorities to provide juvenile delinquency prevention/intervention programming throughout Miami-Dade County where there is a demonstrated need. In the event that not all geographic areas with juvenile delinquency prevention/intervention needs are not covered by proposals, those organizations with successful proposals for areas with sufficient programming may be asked, during negotiations, to provide services in places where there is less or limited programming.

In compliance with Florida Statutes, all provider agency personnel working directly with children must have a completed Level 1 background screening response from the Florida Department of Law Enforcement that indicates no prior involvement in any of the disallowed conditions before beginning work directly with client youths. Level 2 background screenings must also be initiated prior to beginning work directly with clients. Level 1 screenings can be accomplished electronically online with the Florida Department of Law Enforcement at [www.fdle.state.fl.us/CriminalHistory/](http://www.fdle.state.fl.us/CriminalHistory/).

All client youths in funded juvenile crime prevention/intervention programs must complete and sign an information release form that permits the program, the County, or the independent evaluator to obtain information from Miami-Dade County Public Schools, the Department of Juvenile Justice, and the juvenile court system. Individuals under age 18 must have their parent/guardian sign the information release form.

The criminal justice priority areas included in this Request for Proposal (RFP) are:

1. Family Empowerment Programs (FEP)
2. Improving Community Control (ICC)
3. Girls Intervention Program (GIP)
4. Juvenile Weapons Offender Program (JWOP)
5. Family Intervention Services: FUNCTIONAL FAMILY THERAPY (FFT)
6. Family Intervention Services: MULTISYSTEMIC THERAPY (MST)
7. Family Intervention Services: BRIEF STRATEGIC FAMILY THERAPY (BSFT)
8. Family Intervention Services: MULTI-DIMENSIONAL FAMILY THERAPY (MDFT)
9. School Advocacy and Mentoring Services (SAMS)
10. 12 and Under Project - SNAP™
11. Serious Habitual Offender Siblings (SHO Sib)
12. Gang Prevention and Intervention Program
13. Juvenile Drug Court Support: Assessment and Case Management

An independent evaluation will be conducted for all programs and will at a minimum, assess the extent to which program performance standards and participant outcomes are met. In addition, the independent evaluator will aid in the process of implementation and provide evaluation instruments, related training, and technical assistance.

## **PROGRAM FUNDING PRIORITY AREA: Family Empowerment Program (FEP)**

### **GENERAL INTRODUCTION**

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC identified Family Empowerment Programs (FEP) as a funding priority area. The County intends to grant awards to programs strategically located in areas of greatest need as demonstrated by juvenile arrest data.

Family Empowerment Programs include services and/or activities designed specifically to reduce the impact of familial risk factors that contribute to delinquency, as well as involving the family in the overall delivery of needed services. Programs must support family and individual empowerment aimed at re-offense prevention. These programs will operate year-round and must address a full range of activities. The most effective prevention programs include several types of activities rather than a single activity or strategy.

Priority will be given to programs managed by organizations with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency and their families including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders.

Proposers must describe how they will adapt the goals and objectives of the program to the needs of the youth the project will serve. The program design should constitute a logical, sequential, and effective approach to meeting the goals and objectives of this program. The proposer should present, in detail, the activities and tasks that will be accomplished to meet these goals and objectives during the period of this grant. The proposer must also demonstrate that it has solid infrastructure capable of fully implementing the program. It is anticipated that up to a maximum of five (5) strategically located Family Empowerment Programs will be funded through this initiative. **Cost per client/family: \$1,800**

### **PROGRAM MODEL**

The proposer shall adopt a research-based, modularized curriculum that involves referred arrested youth and their parents that emphasizes parental involvement, intensive supervision, family and child advocacy, case management, and outreach to family members not directly involved in the referred case.

At least twelve (12) modules addressing "family development" should be included in the curriculum. Applicants must be able to implement the curriculum in modularized structured learning groups for youth, for parents, and for youth and parents together.

In addition, the three curricula (i.e., youth, parent, and youth-parent) must be interactive and coordinated, so activities and subject matter in the youth group will correspond to the exercises occurring in the parent group and in the joint group.

Parent-structured learning groups, youth-structured learning groups, and the joint child/parent groups must be modularized, so that families may enter at any point in the intervention and graduate when all requirements of the program are complete. Program content shall be age and culturally appropriate.

Note: Interventions and program activities determined by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the U.S. Department of Health & Human Services (DHHS), etc., to be more harmful than helpful or generally ineffective shall not be funded. Examples are: “scared straight” approaches, boot camps, jail tours, groupings of arrested youth with different levels of criminal justice involvement, and younger with older teen programs.

The proposer should present in outline form the curricula to be used in the three groups, indicating the source of the curricula, and whether the curricula is considered a research-based model deemed appropriate and effective for the targeted population. The proposer should also describe the schedule of services (what and when) that will be delivered each week. Proposers must submit a timeline that shows what steps are needed to implement the program and when the program can begin to serve clients.

The successful proposer(s) must identify the activities and resources necessary to assure that the proposed program model is implemented as intended, and that the youth participate to the fullest extent possible. Strategies that may need to be addressed include: transportation from school to the program site and from the site to children’s homes; refreshments and/or meals for after school or weekend activities; and the donation of reduced price entry fees, free tickets to events, and art supplies for special projects.

### **Targeted Participants**

These programs target juvenile offenders, ages 13-17, and their families.

### **Participant Referrals/Recruitment**

Referrals to the program come from case managers in the Miami-Dade Juvenile Services Department Diversion Programs, police departments, and the Juvenile Court System. Families referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list, or if services to the family cannot begin within two (2) weeks.

The successful applicant(s) is responsible for obtaining referrals by maintaining regular contact with relevant case managers and by attending all diversion program staffing meetings. Funded programs should promote themselves with the diversion case managers and administrators, and other juvenile court system professionals, such as the Public Defender, the State Attorney, Judges, etc.

### **Participant Enrollment and Program Completion Requirements**

Youth and families who successfully participate in the program are expected to be involved in no less than twelve (12) weeks of intensive intervention programming, which would include all program activities related to desired outcomes. However, the actual length of participation of each child and family may be more intensive dependent upon the child’s performance in the program.

### **Staffing**

The program should identify a position with primary responsibility for the management and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives. Program staff should have at least one year of relevant experience in dealing with culturally and ethnically diverse delinquent youth and their families.

Oversight of clinical service staff must be provided by a person with at least a Master's degree. Direct service staff must hold at least a Bachelor's degree in social work, psychology, mental health counseling, family therapy, or other helping professions and have at least one (1) year of relevant experience in dealing with culturally and ethnically diverse delinquent youth and their families.

### **FAMILY EMPOWERMENT PROGRAMS** **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

Services must be designed to reduce the impact of familial risk factors that contribute to delinquency. Services must include:

1. Enrollment of youth and families in no less than twelve (12) weeks of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of attendance, pre-test, and requisite consent forms are submitted to the independent evaluator. (All required forms will be provided by the independent evaluator).

2. Provide modularized structured learning groups involving each youth that emphasize cognitive behavior modification strategies and focusing on behavioral interventions and social skills development. Group sessions will address the risk factors of anti-social behavior, school performance, anger management, achievement motivation and attitude toward conflict/violence, and family conflict.

Performance standard: Each youth is involved in a 60-minute modularized structured learning group twice (2) a week, documented in case file and attendance records.

3. Provide modularized structured learning groups involving parents/caregivers that address the risk factors of family management problems, family conflict, and early and persistent anti-social behavior by their children. Parent learning groups consist of group counseling sessions that are psycho-educational in form and function, and combine the use of various didactic, instructional, and audio-visual techniques to train parents in family management, family communication, and other parenting skills in which they may be deficient. Parental participation is required.

Performance standard: Involve at least one parent/caregiver of each youth in no less than one (1) weekly, 60-minute parent modularized structured learning group, documented in case file and attendance records.

4. Provide modularized structured learning groups involving youth and their parents together in experiential learning activities. These sessions will provide an opportunity for youth and adults to discuss common topics/themes from their respective structured learning groups. The focus will be on how effectively the family unit has been able to develop and apply new competencies on a day-to-day basis.

Performance standard: Involve each child and at least one parent/caregiver of each child in no less than one (1) weekly, 60-minute joint modularized structured experiential learning group, documented in case file and attendance records.

5. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of youth and family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standard: Provide on-going case management and/or individual counseling services as needed, including:

- One (1) initial home visit to assess living conditions as it relates to the client's success in the program.
- Provide interagency referrals to any family member with identified needs. All referrals should be documented and followed up to facilitate service delivery. Referrals for services should be part of the service report provided to the referring agency.

6. Provide intensive mental health and substance abuse services as needed.

Performance standard: A Memorandum of Understanding, and/or a documented process for referring youth and families to Family Intervention Programs (FIP) or other appropriate community resource(s) should be in place.

7. The program staff serves as liaison and advocates for families by working with schools. Special emphasis shall be placed on assisting in the development of cooperative relationships between the school and parents.

Performance standard: Within the first thirty (30) days of program participation, the staff should facilitate a parent meeting with school personnel and assist youth and families to develop a plan to improve the child's attendance, effort, and conduct in school, unless the client's academic success is well-documented in the case file. The plan should be signed by the child's parent and the child and maintained in the client-child's case file.

8. The program is required to help eliminate obstacles to clients/families participation.

Performance standards:

Provide transportation for clients/families in situations where they would not be able to participate without transportation support.

- Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoon for non-employed parents; evening and/or weekends for employed parents).
- Provide activities (childcare) to younger siblings who may represent an obstacle to program participation.
- Provide incentives to participation (e.g., offer useful information, snacks, etc.).

9. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at mutually agreed upon times.

10. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in thirty (30) days or less by temporary or permanent staff.

### **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for Family Empowerment Programs, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

Funded providers are expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator.

The expected outcomes identified below are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

<b>EXPECTED PARTICIPANT OUTCOMES</b>	<b>INDICATOR</b>
90% of youth/families enrolled in the program will complete FEP requirements for successful closure.	# and % of referred youth and at least one parent/caregiver who have participated in a minimum of 12 weeks of intervention programming; documented by youth and parent enrollment and program attendance records.
Youth and parents who complete the program will enhance their communication skills and relationships.	# and % of youth who complete the program report improvement in family bonding and communication on pre and post-test measures.  # and % of parents/caregivers who report improvement in family communication and relationships on pre and post-test measures.
Family conflict will decline.	# and % of youth who complete the program report improvement in family conflict behavior on pre and post- test measures.  # and % of parents/guardians will report improvement in family conflict behavior on pre and post-test measures.
Youth who complete the program will improve their achievement motivation, attitude toward	

<p>conflict resolution, and attitude toward school.</p>	<p># and % of youth who improve their achievement motivation on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward conflict/violence on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward school on pre and post-test measures.</p>
<p>Youth who complete the program will improve their school attendance and conduct.</p>	<p># and % of youth who improve their school attendance on pre and post school reports.</p> <p># and % of youth who improve their school conduct on pre and post school reports.</p>
<p>90% of youth who complete the program will not be re-arrested during program participation.</p> <p>80% of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.</p>	<p># and % of youth who are not re-arrested while participating in the program.</p> <p># and % of referred youth who are not re-arrested within six (6) months or more of program completion.</p>

## OTHER REQUIREMENTS

### Documentation

Monthly feedback on each client's progress in the program should be provided to the referring agency, or more frequently, as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc., must be documented in each client-child's case file and supported by participant sign-in sheets, where appropriate.

## **PROGRAM FUNDING PRIORITY AREA: Improving Community Control (ICC)**

### GENERAL INTRODUCTION

In an effort to prevent and reduce delinquent and violent behavior and reduce the number of youth placed in detention due to "pick-up orders" among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC are seeking proposals from experienced and qualified community-based organizations (CBOs), to develop and implement select strategies that improve community control by supporting client's efforts to accomplish their dispositional court orders and plan for each child's opportunity for success. The County intends to grant awards to programs strategically located in areas of greatest need as demonstrated by juvenile arrest data.

Improving Community Control (ICC) programs include services and/or activities designed to improve the compliance rate with court-ordered sanctions by children under State Department of Juvenile Justice Community Control supervision and to provide intensive monitoring and case management. These programs will operate year-round and must address a full range of activities. The most effective prevention programs include several types of activities rather than a single activity or strategy.

Priority will be given to programs managed by organizations with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency and their families including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders.

Proposers must describe how they will adapt the goals and objectives of the program to the needs of the children the project will serve. The program design should constitute a logical, sequential, and effective approach to meeting the goals and objectives of this program. The proposer should present, in detail, the activities and tasks that will be accomplished to meet these goals and objectives during the period of this grant. It is anticipated that up to a maximum of three (3) strategically located Improving Community Control programs will be funded through this initiative. **Cost per client/family: \$1,500**

#### **PROGRAM MODEL**

The proposer shall adopt a research-based curriculum that implements behavioral management strategies among adjudicated youth. The proposed model should include strategies that will result in completing court-ordered sanctions and services. The model should also incorporate areas most often ordered by the courts for adjudicated youth (e.g., conflict resolution, anger management, and pro-social life skills training).

The proposer should present in outline form the curricula to be used, indicating the source of the curricula, and whether the curricula is considered a research-based model deemed appropriate and effective for the targeted population. Example sources include: 1) Giving Back - Introducing Community Service Learning – Improving Mandated Community Service for Juvenile Offenders by OJJDP, CRFC, CRF, Department of Education, ([www.training.youthcourt.net/publications/Alpha.htm](http://www.training.youthcourt.net/publications/Alpha.htm)) and 2) Too Good for Violence by SAMHSA's National Registry of Evidence-based Programs and Practices.

Note: Interventions and program activities determined by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), the U.S. Department of Health and Human Services (DHHS), etc., to be more harmful than helpful or generally ineffective shall not be used. Examples are: “scared straight” approaches, boot camps, jail tours, groupings of arrested youth with different levels of criminal justice involvement, and younger with older teen programs .

The proposer should also describe the schedule of services (what and when) that will be delivered each week. Proposers must submit a timeline with the proposal that shows what steps are needed to implement the program and when the program can begin to serve clients.

The successful proposer(s) must identify the activities and resources necessary to assure that the proposed program model is implemented as intended, and that the youth participate to the fullest extent possible. Strategies that may need to be addressed include: transportation from school to the program site and from the site to youths' homes; refreshments and/or meals for after school or weekend activities; and the donation of reduced price entry fees, free tickets to events, and art supplies for special projects.



## **Targeted Participants**

ICC programs target juvenile offenders' ages 13-17 years who have been adjudicated delinquent or have had adjudication withheld, and are under the supervision of the Juvenile Court and the Florida Department of Juvenile Justice Community Control Program.

## **Participant Referrals/Recruitment**

Referrals to the program come from the Department of Juvenile Justice (DJJ). Youth referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list, or if services to the family cannot begin within two (2) weeks.

The successful applicant(s) is responsible for obtaining referrals by maintaining regular contact with relevant Juvenile Probation Officers. Programs should promote themselves and the ICC concept among the Juvenile Court Judges, Assistant Public Defenders, and Assistant State Attorneys so the requirement to attend an ICC can be included in the JPO's Pre-Dispositional Report for juvenile court.

## **Program Completion Requirements**

All enrolled clients must complete an 8-week core curriculum that includes anger management, conflict resolution, and pro-social life skills training. Program completers will participate in all program activities agreed upon. When court orders are fulfilled, the core curriculum completed, and the youth is released from Community Control, cases may be closed successfully. However, participation of each youth may be more intensive dependent upon their performance in the program.

## **Staffing**

The program should identify a position with primary responsibility for the management and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives. Direct service staff should have at least one year of relevant experience in dealing with culturally and ethnically diverse delinquent youth and their families.

A Masters degree level human services worker will conduct psychosocial assessments, social service interventions, supervise case managers, and oversee the preparation of treatment plans.

Direct service staff must hold at least a Bachelor's degree in social work, psychology, mental health counseling, family therapy, or other helping professions and have at least one (1) year of relevant experience in dealing with delinquent youth and their families.

## **IMPROVING COMMUNITY CONTROL (ICC)** **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

Services are designed to reduce recidivism, support court-ordered sanctions and services, and empower participants to recognize their ability to improve their quality of life and nurture their potential. Services must include:

1. Enroll youth in an 8 week community-based intensive supervision and intervention program based on a curriculum that emphasizes anger management, conflict resolution, and pro-social life skills training.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks attendance, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of the youth and their family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standards: Provide on-going case management and/or individual counseling services as needed, including:

- One (1) initial home visit to assess living conditions as it relates to the client's success in the program.
  - Provide interagency referrals to any family member with identified needs. All referrals should be documented and followed up to facilitate service delivery. Referrals for services should be part of the service report provided to the referring agency.
3. Provide intensive mental health and substance abuse services as needed.

Performance standard: A Memorandum of Understanding, and/or a documented process for referring youth and families to Family Intervention Programs (FIP) or other appropriate community resources should be in place.

4. Provide advocacy for clients with respect to their court-ordered sanctions.

Performance standard: Program staff will attend court hearings with clients, report on the youth's progress in the program to the court, and document these activities in the youth's case file.

5. The program staff serves as liaison and advocates for families by working with schools. Special emphasis shall be placed on assisting in the development of cooperative relationships between the school and parents.

Performance standard: Within the first thirty (30) days of program participation, the staff should facilitate a parent meeting with school personnel and assist youth and families to develop a plan to improve the child's attendance, effort, and conduct in school, unless the client's academic success is well-documented in the case file. The plan should be signed by the youth's parent and the youth and maintained in the client-youth's case file.

6. Involve participant's parents/caregivers in program activities and provide them with feedback regarding the progress of their child in the program.

Performance standard: Conduct at least one face-to-face meeting with parents/caregivers of each enrollee, and facilitate a monthly educational workshop or other activity for parents.

7. The program is required to help eliminate obstacles to clients/families participation.

Performance standards:

- Provide transportation for clients/families in situations where they would not be able to participate without transportation support.
- Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoon for non-employed parents; evening and/or weekends for employed parents).
- Provide activities (childcare) to younger siblings who may represent an obstacle to program participation.
- Provide incentives to participation (e.g., offer useful information, snacks, etc.).

8. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at mutually agreed upon times.

9. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in 30 days or less by temporary or permanent staff.

**PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for Improving Community Control programs, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

Funded providers are expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator. The expected outcomes identified below are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

<b>Expected Outcome</b>	<b>Indicator</b>
90% of enrolled youth should complete the program and their court-ordered sanctions and services.	# and % of referred youth who have participated in a minimum of 8 weeks of intervention programming; documented by youth enrollment and program attendance records.
Youth who complete the program will improve their pro-social attitudes including: achievement motivation, attitude toward	# and % of youth who improve their achievement motivation on pre and post-test measures.

Expected Outcome	Indicator
conflict resolution, and attitude toward school.	<p># and % of youth who improve their attitude toward conflict/violence on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward school on pre and post-test measures.</p>
Youth who complete the program will improve their school attendance and conduct.	<p># and % of youth who improve their school attendance on pre and post school reports.</p> <p># and % of youth who improve their school conduct on pre and post school reports.</p>
<p>90 % of youth who complete the program will not be re-arrested during program participation.</p> <p>80% of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.</p>	<p># and % of youth who are not re-arrested while participating in the program.</p> <p># and % of referred youth who are not re-arrested within six (6) months or more of program completion.</p>

## OTHER REQUIREMENTS

### Program Documentation

Monthly feedback on each client's progress in the program should be provided to the referring agency or more frequently, as required. All program activities, structured learning groups, home visits, referrals to other agencies for services, school meetings, etc., must be documented in each client-child's case file and supported by participant sign-in sheets, where appropriate.

### PROGRAM FUNDING PRIORITY AREA: Girls Intervention Program (GIP)

#### GENERAL INTRODUCTION

In an effort to prevent and reduce the arrests for delinquent and violent behavior among girls in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified the Girls Intervention Program (GIP) as a funding priority area.

The successful proposer(s) must provide an evidence-based, comprehensive, female-focused and developmentally appropriate program for girls who have been arrested on a non-violent delinquency charge. These programs will operate year-round and must address a full range of activities. The most effective prevention programs include several types of activities rather than a single activity or strategy.

Priority will be given to programs managed by organizations with experience and a proven track record of success in the provision of multiple services to girls at high-risk for delinquency and their families including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders.

Proposers must describe how they will adapt the goals and objectives of the program to the needs of the children the project will serve. The program design should constitute a logical, sequential, and effective approach to meeting the goals and objectives of this program. The proposer should present, in detail, the activities and tasks that will be accomplished to meet these goals and objectives during the period of this grant. It is anticipated that up to a maximum of two (2) strategically located programs will be funded through this initiative. **Cost per client/family: \$2,000**

### **PROGRAM MODEL**

The proposer shall adopt a research-based curriculum designed to address the special psychosocial needs of girls in the juvenile justice system. The program model should incorporate behavioral management strategies that include behavioral monitoring, reinforcement of school and program attendance, progress toward completing court-ordered sanctions, and pro-social behavior interventions.

Additionally, the proposed program(s) should have the capacity to meet the individual needs of girls in the areas of mental health and substance abuse, trauma experiences, high-risk sexual behavior, parenting skills, and family functioning. Program activities should provide girls with opportunities to develop bonds with pro-social adults and institutions.

Note: Interventions and program activities determined by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), the U.S. Department of Health and Human Services (DHHS), etc., to be more harmful than helpful or generally ineffective shall not be used. Examples are: “scared straight” approaches, boot camps, jail tours, groupings of arrested youth with different levels of criminal justice involvement, and younger with older teen programs.

The proposer should present in outline form the curricula to be used in the three groups, indicating the source of the curricula, and whether the curricula is considered a research-based model deemed appropriate and effective for the targeted population. The proposer should also describe the schedule of services (what and when) that will be delivered each week. Proposers must submit a timeline with the proposal that shows what steps are needed to implement the program and when the program can begin to serve clients.

The successful proposer(s) must identify the activities and resources necessary to assure that the proposed program model is implemented as intended and that the girls participate to the fullest extent possible. Strategies that may need to be addressed include: transportation from school to the program site and from the site to children’s homes; refreshments and/or meals for after school or weekend activities; childcare; and other incentives for participation.

### **Targeted Participants**

This program targets female juvenile offenders, ages 13-17, and their families. This program is intended to address the psychosocial needs of arrested girls except for those charged with weapon offenses.

### **Participant Referrals/Recruitment**

Referrals to the program come from case managers working with arrested girls in the Miami-Dade Juvenile Services Department Diversion Programs and the Department of Juvenile Justice. Girls referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list, or if services to the family cannot begin within two (2) weeks.

The successful applicant(s) is responsible for obtaining referrals by maintaining regular contact with relevant case managers and by attending all diversion program staffing meetings. Funded programs should promote themselves with the diversion case managers and administrators.

### **Program Completion Requirements**

Girls who successfully complete the program are expected to be involved in no less than twelve (12) weeks of intensive intervention programming and complete all program activities agreed upon. However, participation of each girl may be more intensive dependent upon her performance in the program.

### **Staffing**

The project should identify a position with primary responsibility for the management and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives. Program staff should have at least one year of relevant experience in dealing with culturally and ethnically diverse delinquent youth and their families.

Oversight of clinical service staff must be provided by a person with at least a Master's degree. Direct service staff must hold at least a Bachelor's degree in social work, psychology, mental health counseling, family therapy, or other helping professions and have at least one (1) year of relevant experience in dealing with delinquent youth and their families.

## **GIRLS INTERVENTION PROGRAM (GIP)** **SCOPE OF PROGRAM SERVICES AND PERFORMANCE STANDARDS**

Services are designed to reduce recidivism, support court-ordered sanctions and services, and empower participants to recognize their ability to improve their quality of life and nurture their potential. Services must include:

1. Enroll girls in no less than twelve (12) weeks of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of attendance, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. A research-based, modularized curriculum is implemented and addresses the risk factors of early and persistent antisocial behavior, anger management, family conflict, cognitive behavior modification strategies, and school performance.

Performance standard Each girl is involved in a 60-minute modularized structured learning group twice (2) a week, documented in case file and attendance records.

3. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of the girls and their family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standards: Provide on-going case management and/or individual counseling services as needed including:

- One (1) initial home visit to assess living conditions as it relates to the client's success in the program.
- Provide interagency referrals to any family member with identified needs. All referrals should be documented and followed-up to facilitate and determine service delivery. Referrals for services should be part of the service report provided to the referring agency.

4. Provide intensive mental health and substance abuse services as needed.

Performance standard: A Memorandum of Understanding, and/or a documented process for referring girls and families to Family Intervention Programs (FIP) or other appropriate community resources should be in place.

5. The program staff serves as liaison and advocates for families by working with schools. Special emphasis shall be placed on assisting in the development of cooperative relationships between the school and parents.

Performance standard: Within the first thirty 30-days of program participation, the staff should facilitate a parent meeting with school personnel and assist girls and their families to develop a plan to improve the child's attendance, effort, and conduct in school, unless the client's academic success is well-documented in the case file. The plan should be signed by the child's parent and the child and maintained in the client-child's case file.

6. Provide opportunities for girls to acquire and practice new skills and be recognized for their achievement.

Performance standard: At least two (2) recognition events are held during the 12-month program year.

7. Incorporate a mentoring component involving medical students and other health care professionals.

Performance standard. Documented process for recruiting, assigning, and involving mentors.

8. The program is required to help eliminate obstacles to clients/families' participation.

Performance standards:

- Provide transportation for clients/families in situations where they would not be able to participate without transportation support.
- Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoon for non-employed parents; evening and/or weekends for employed parents).
- Provide activities (childcare) to younger siblings who may represent an obstacle to program participation.
- Provide incentives to participation (e.g., offer useful information, snacks, etc.).

9. Involve participant’s parents/guardians in program activities and provide them with feedback on the progress of their child in the program.

Performance standard: Conduct at least one face-to-face contact with the girl’s parent(s). Facilitate a monthly educational workshop or other activity for parents.

10. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at agreed upon times.

11. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in thirty (30) days or less by temporary or permanent staff.

### **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for the Girls Intervention Program, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

Funded providers are expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator. The expected outcomes identified below are consistent with the overall goal of this service, together with indicators used to track funded providers’ success in attaining those outcomes. These outcomes and indicators must be included in the applicant’s program plan. Applicants can include additional outcomes and/or indicators.

<b>EXPECTED PARTICIPANT OUTCOMES</b>	<b>INDICATOR</b>
90% of girls enrolled in the program will complete GIP requirements for successful closure.	# and % of referred girls who have participated in a minimum of twelve (12) weeks of intervention programming; documented by youth enrollment and program attendance records.
Girls who complete the program will improve attitudes related to future ambitions.	# and % of girls who improve their attitudes related to their future ambitions on pre and post-test measures.
Girls who complete the program will improve their pro-social attitudes including: achievement motivation, attitude toward conflict, interpersonal violence, and attitude toward school.	# and % of girls who improve their achievement motivation on pre and post-test measures.  # and % of girls who improve their attitude toward conflict/violence on pre and post-



EXPECTED PARTICIPANT OUTCOMES	INDICATOR
	test measures.  # and % of girls who improve their attitude toward school on pre and post-test measures.
Girls who complete the program will have less acceptance related to attitudes toward couple/domestic violence.	# and % of girls who report less acceptance of couple/domestic violence on pre and post-test measures.
Family relations will improve for girls who complete the program.	# and % of girls who improve their family relations.
Girls who complete the program will improve their school attendance and conduct.	# and % of girls who improve their school attendance on pre and post school reports.  # and % of girls who improve their school conduct on pre and post school reports.
90 % of girls who complete the program will not be re-arrested during program participation.  80% of the girls who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.	# and % of girls who are not re-arrested while participating in the program.  # and % of referred girls who are not re-arrested within six (6) months or more of program completion.

## **OTHER REQUIREMENTS**

### **Program Documentation**

Monthly feedback on each client's progress in the program should be provided to the referring agency or more frequently, as required. All program activities, structured learning groups, home visits, referrals to other agencies for services, school meetings, etc., must be documented in each client-child's case file and supported by participant sign-in sheets.

## **PROGRAM FUNDING PRIORITY AREA: Juvenile Weapons Offender Program (JWOP)**

### **GENERAL INTRODUCTION**

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified the Juvenile Weapons Offender Program (JWOP) as a funding priority area. The successful proposer must provide an evidence-based, comprehensive, and developmentally appropriate program for at-risk youth adjudicated delinquent on weapons possession

charges and similar non-violent weapons charges, and put on Community Control. The County is seeking proposals from qualified community-based, non-profit organizations who have partnered with a hospital, medical schools, or other entity to provide a six-month program, in an appropriate court-ordered weapons, violence, and victimization education program conducted in a medical rehabilitation environment.

The JWOP will involve juvenile weapons offenders in an intensive education and intervention program conducted in a medical rehabilitation environment that provides them with information and first-hand exposure to the consequences of weapons violence. Priority will be given to programs managed by organizations with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency and their families including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders.

Proposers must describe how they will adapt the goals and objectives of the program to the needs of the children the project will serve. The program design should constitute a logical, sequential, and effective approach to meeting the goals and objectives of this program. The proposer should present, in detail, the activities and tasks that will be accomplished to meet these goals and objectives during the period of this grant. It is anticipated that only one (1) program will be funded through this initiative. **Cost per client/family: \$4,000**

### **PROGRAM MODEL**

The program model should incorporate behavioral management strategies that include behavioral monitoring, reinforcement of school and program attendance, progress toward completing court-ordered sanctions, and pro-social behavior interventions.

Program activities should provide youth with opportunities to develop bonds with pro-social adults and institutions. Additionally, the program model should have the capacity to meet the individual needs of youth in the areas of mental health, substance abuse, and family functioning.

Note: Interventions and program activities determined by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), the U.S. Department of Health and Human Services (DHHS), etc., to be more harmful than helpful or generally ineffective shall not be used. Examples are: “scared straight” approaches, boot camps, jail tours, groupings of arrested youth with different levels of criminal justice involvement, and younger with older teen programs.

The proposer should present in outline form the curricula to be used in the groups, indicating the source of the curricula, and whether the curricula is considered a research-based model deemed appropriate and effective for the targeted population. The proposer should also describe the schedule of services (what and when) that will be delivered each week. Proposers must submit a timeline that shows what steps are needed to implement the program and when the program can begin to serve clients.

The successful proposer must identify the activities and resources necessary to assure that the proposed program model is implemented as intended and that the girls participate to the fullest extent possible. Strategies that may need to be addressed include: transportation from school to the program site and from the site to youth’s homes; refreshments and/or meals for after school or weekend activities; childcare, and other incentives for participation

## **Targeted Participants**

This program targets juvenile weapons offenders, ages 13-17, and their families. This program is intended to address the needs of youth adjudicated as delinquent on weapons possession charges or non-violent weapons offenses and determined to be in need of a long-term, intensive intervention.

## **Participant Referrals/Recruitment**

Referrals to the program come from the Department of Juvenile Justice (DJJ) and the Juvenile Court System. Youth referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list, or if services to the family cannot begin within 2 weeks.

The successful applicant is responsible for obtaining referrals by maintaining regular contact with relevant Juvenile Probation Officers (JPO). The funded programs should promote itself among the Juvenile Court Judges, Assistant Public Defenders, and Assistant State Attorneys so the requirement to attend a JWOP can be included in the JPO's Pre-Dispositional Report for juvenile court.

## **Program Completion Requirements**

Youth who successfully complete the program are expected to be involved in no less than six months of intensive intervention programming and complete all program activities agreed upon. However, participation of each youth may be more intensive dependent upon their performance in the program.

## **Staffing**

The program should identify a position with primary responsibility for the management and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives. Program staff should have at least one year of relevant experience in dealing with culturally and ethnically diverse delinquent youth and their families.

Direct service staff must hold at least a Bachelor's degree in social work, psychology, mental health counseling, family therapy, or other helping professions and have at least one (1) year of relevant experience in dealing with delinquent youth and their families.

A Master level human services worker will conduct psychosocial assessments, social service interventions, supervise case managers, and oversee the preparation of treatment plans.

## **JUVENILE WEAPONS OFFENDER PROGRAM (JWOP)** **SCOPE OF PROGRAM SERVICES AND PERFORMANCE STANDARDS**

Services are designed to reduce recidivism, support court-ordered sanctions and services, and empower participants to recognize their ability to improve their quality of life and nurture their potential. Services must include:

1. Enroll youth in no less than six months of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of attendance, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. A research-based, modularized curriculum is implemented and addresses the risk factors of early and persistent antisocial behavior, anger management, family conflict, cognitive behavior modification strategies, and school performance.

Performance standard Each youth is involved in a 60-minute structured learning group no less than twice (2) a week, as documented in the case file and attendance records.

3. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of the youth and their family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standard: Provide on-going case management and/or individual counseling services as needed including:

- One (1) initial home visit to assess living conditions as it relates to the client's success in the program.
- Provide interagency referrals to any family member with identified needs. All referrals should be documented and followed up to facilitate service delivery. Referrals for services should be part of the service report provided to the referring agency.

4. Provide intensive mental health and substance abuse services as needed.

Performance standard: A Memorandum of Understanding, and/or a documented process for referring youth and families to Family Intervention Programs (FIP) or other appropriate community resources should be in place.

5. The program staff serves as liaison and advocates for families by working with schools. Special emphasis shall be placed on assisting in the development of cooperative relationships between the school and parents.

Performance standard: Within the first thirty (30) days of program participation, the staff should facilitate a parent meeting with school personnel and assist youth and families to develop a plan to improve the child's attendance, effort, and conduct in school, unless the client's academic success is well-documented in the case file. The plan should be signed by the child's parent and the child and maintained in the client-child's case file.

6. Provide opportunities for youth to acquire and practice new skills and be recognized for their achievement.

Performance standard: At least two (2) recognition events are held during the program year.

7. Establish and maintain a peer counseling intervention component.

Performance standard. A documented process for recruiting, assigning, and involving peer counselors.

8. Incorporate a mentoring component involving medical students and other health care professionals.

Performance standard. A documented process for recruiting, assigning, and involving mentors.

9. The program is required to help eliminate obstacles to clients/families participation.

Performance standards:

- Provide transportation for clients/families in situations where they would not be able to participate without transportation support.
- Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoon for non-employed parents; evening and/or weekend for employed parents).
- Provide activities (childcare) to younger siblings who may represent an obstacle to program participation.
- Provide incentives to participation (e.g., offer useful information, snacks, etc.).

10. Involve participant's parents/guardians in program activities and provide them with feedback on the progress of their child in the program.

Performance standard: Conduct at least one face-to-face contact with the youth's parent(s). Facilitate a monthly educational workshop or other activity for parents.

11. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at agreed upon times.

12. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in 30 days or less by temporary or permanent staff.

## **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for the JWOP Program, but rather, provides a sample of the kinds of information that will be provided to the successful proposer when full cooperation with the independent evaluator occurs. The funded provider is expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator.

The expected outcomes identified below are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
90% of enrolled youth should complete the program and their court-ordered sanctions and services.	# and % of referred youth who have participated in a minimum of six months of intervention programming; documented by youth enrollment and program attendance records.
Youth who complete the program will improve their pro-social attitudes including: achievement motivation, attitude toward conflict, interpersonal violence, and attitude toward school.	<p># and % of youth who improve their achievement motivation on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward conflict on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward interpersonal violence on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward school on pre and post-test measures.</p>
Youth who complete the program will improve their attitudes related to future ambitions.	# and % of youth who improve their attitudes related to their future ambitions on pre and post-test measures.
Youth who complete the program will have less acceptance related to attitudes toward couple/domestic violence.	# and % of youth who report less acceptance of couple/domestic violence on pre and post-test measures.
Family relations will improve for youth who complete the program.	# and % of youth who improve their family relations.
Youth who complete the program will improve their school attendance and conduct.	<p># and % of youth who improve their school attendance on pre and post school reports.</p> <p># and % of youth who improve their school conduct on pre and post school reports.</p>

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
<p>90 % of youth who complete the program will not be re-arrested during program participation.</p> <p>80% of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.</p>	<p># and % of youth who are not re-arrested while participating in the program.</p> <p># and % of referred youth who are not re-arrested within six (6) months or more of program completion.</p>

### OTHER REQUIREMENTS

#### Documentation

Monthly feedback on each client’s progress in the program should be provided to the referring agency or more frequently, as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc., must be documented in each client/child’s case file and supported by participant sign-in sheets, where appropriate.

### PROGRAM FUNDING AREA: Family Intervention Services: Functional Family Therapy (FIS/FFT)

#### GENERAL INTRODUCTION

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified Family Intervention Services (FIS) as a funding priority area. FIS are provided by organizations that are certified in a clinical intervention as specified and have the capacity to provide intensive, family focused, evidence-based clinical interventions to referred families assessed by the referring entity to be in need of these services. Information on this model can be found in the following site: <http://www.fftinc.com/>.

FIS programs include services and/or activities designed specifically to reduce the impact of familial risk factors that contribute to delinquency, as well as involving the family in the overall delivery of needed services. Programs must support family and individual empowerment aimed at re-offense prevention. It is anticipated that only one (1) program will be funded through this initiative. **Cost per client/family: \$1,350 - \$3,770**

#### **Functional Family Therapy (FIS/FFT)**

The County is seeking proposals from non-profit organizations certified to provide Functional Family Therapy and case management to the target population. Priority will be given to projects managed by organizations with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency and their families including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders.

## **PROGRAM MODEL**

Functional Family Therapy (FFT) is geared to help youths, age 13–17, and their families, who are at risk for, or are engaging in, delinquent behavior such as violence and substance abuse or who have been diagnosed with conduct disorder, oppositional defiant disorder, or disruptive behavior disorder. The intervention consists of 8-12 hours of direct service for mild cases (26-30 hours for more serious cases) and is delivered in several phases, as supported by the national FFT organization.

### **Participant Referrals/Recruitment**

Referrals to the program come from case managers working with arrested youths in the Miami-Dade Juvenile Services Department Diversion Programs, from Improving Community Control programs (ICC) and from other YCTF/DMCJC-funded programs, as may be designated, where youth have significant family dysfunction.

Families referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list, or if services to the family cannot begin within two (2) weeks.

The successful applicant is responsible for obtaining referrals from the Juvenile Services Department Diversion Programs by maintaining regular contact with relevant case managers and by attending all diversion program staffing meetings. The funded program should promote itself with diversion case managers and administrators.

### **Participant Enrollment and Program Completion Requirements**

Youth and families who successfully participate in the program are expected to be involved in no less than eight (8) sessions/weeks of intensive intervention programming, which would include all program activities related to desired outcomes. However, the actual length of participation of each youth and family may be more intensive dependent upon the youth's performance in the program.

### **Staffing**

The individuals involved in the project must have the experience and knowledge necessary to successfully complete the project. Therapists are required to have the necessary FFT training and prerequisite qualifications to carry out the central practice of the project.

Proposers should discuss how they will assure that certified program staff will be available to implement FIS/FFT services, and receive necessary training to continuously improve services and outcomes for clients.

The program shall identify a person with primary responsibility for the coordination, management, and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives.

## **FAMILY INTERVENTION SERVICES/FUNCTIONAL FAMILY THERAPY** **(FIS/FFT)** **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

Services must be designed to reduce the impact of familial risk factors that contribute to delinquency. Services must include:



1. Enroll youth and families annually in no less than eight (8) sessions/weeks of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of participation, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of the youth and their family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standard: Provide on-going case management services as needed, including:

- Provide interagency referrals to any family member with identified needs and document referrals and related follow-up actions in the client/child's case file. Referrals for services should be part of the service report provided to the referring agency.

3. The program is required to help eliminate obstacles to clients/families participation.

Performance standard: Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoons, evenings and/or weekends).

4. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at mutually agreed upon times.

5. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications as specified above. Staff vacancies are filled in 30 days or less by temporary or permanent staff.

## **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for Family Intervention Services Programs, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

The funded provider is expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator. The expected outcomes identified below are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
95% of youths/families enrolled in the program will complete FIS/FFT requirements for successful closure.	# and % of referred youth/families who have participated in a minimum of eight (8) sessions/weeks of intervention programming; documented by youth and parent enrollment and case notes.
Youth and parents will improve their communication skills, relationships, and overall functioning.	# and % of youth who report improvement on standardized FFT pre-post measures.  # and % of parents/guardians who report improvement on standardized FFT pre-post measures.
Youth who complete the program will improve their school attendance and conduct.	# and % of youths who improve their school attendance on pre and post school reports.  # and % of youths who improve their school conduct on pre and post school reports.
90 % of youth who complete the program will not be re-arrested during program participation.  80 % of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.	# and % of youths who are not re-arrested while participating in the program.  # and % of referred youths who are not re-arrested within six (6) months or more of program completion.

### **OTHER REQUIREMENTS**

#### **Documentation**

Monthly feedback on each client's progress in the program should be provided to the referring agency or more frequently, as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc. must be documented in each client/child's case file and supported by participant sign-in sheets, where appropriate.

### **PROGRAM FUNDING PRIORITY AREA: Family Intervention Services: Multi Systemic Therapy (FIS/MST)**

#### **GENERAL INTRODUCTION**

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified Family Intervention Services (FIS) as a funding priority area. FIS will be provided by organizations that are certified in a clinical intervention, as specified, and have the

capacity to provide intensive, family-focused, evidence-based clinical interventions to referred families assessed by the referring entity to be in need of these services.

FIS programs include services and/or activities designed specifically to reduce the impact of familial risk factors that contribute to delinquency, as well as involving the family in the overall delivery of needed services. Programs must support family and individual empowerment aimed at re-offense prevention. It is anticipated that only one (1) program will be funded through this initiative. **Estimated unit cost per client/family (with training costs): \$7,000**

### **Multi Systemic Therapy (FIS/MST)**

The County is seeking proposals from non-profit organizations certified to provide Multi Systemic Therapy (MST) and case management services to the target population. Priority will be given to projects managed by organizations with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency and their families including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders.

### **PROGRAM MODEL**

MST is an intensive family and community-based treatment intervention that addresses the multiple determinants of serious antisocial behavior in juvenile offenders. The MST approach views individuals as being nested within a complex network of interconnected systems that encompass individual, family, and extra familial (peer, school, neighborhood) factors. Intervention may be necessary in any one or a combination of these systems. MST targets chronic, violent, or substance abusing male or female juvenile offenders, ages 13 to 17, at high-risk of out-of-home placement and the offenders' families.

The major goal of MST is to empower parents with the skills and resources needed to independently address the difficulties that arise in raising teenagers and to empower youth to cope with family, peer, school, and neighborhood pressures. Within a context of support and skill building, the therapist places developmentally appropriate demands on the adolescent and family for responsible behavior. Intervention strategies are integrated into a social ecological context and include strategic family therapy, structural family therapy, behavioral parent training, and cognitive behavior therapies.

MST is provided using a home-based model of service delivery. This model helps to overcome barriers to service access, increases family retention in treatment, allows for the provision of intensive services (i.e., therapists have low caseloads), and enhances the maintenance of treatment gains. The usual duration of MST treatment is approximately sixty (60) hours of contact over four (4) months, but frequency and duration of sessions are determined by family need.

*(this background information was taken directly from:*  
<http://www.colorado.edu/cspv/blueprints/model/programs/MST.html>*).*

### **Targeted Participants**

The FIS/MST program targets juvenile offenders ages 13-17 and their families, who are at high risk for, or are engaging in antisocial behaviors including violence and substance abuse or who have been diagnosed with conduct disorder, oppositional defiant disorder, or disruptive behavior disorder.

### **Participant Referrals/Recruitment**

Referrals to the program come from case managers working with arrested youths in the Miami-Dade Juvenile Services Department Diversion Programs, from Improving Community Control programs (ICC), and from other YCTF/DMCJC funded programs, as may be designated, where youth have demonstrated significant family dysfunction.

Families referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list or if services to the family cannot begin within two (2) weeks.

The successful applicant is responsible for obtaining referrals from the Juvenile Services Department Diversion Programs by maintaining regular contact with relevant case managers and by attending all diversion program staffing meetings. The funded program should promote itself with diversion case managers and administrators.

### **Participant Enrollment and Program Completion Requirements**

Youth and families who successfully participate in the program are expected to be involved in no less than eight (8) sessions/weeks of intensive intervention programming, which would include all program activities related to desired outcomes. However, the actual length of participation of each youth and family may be more intensive dependent upon the youth's performance in the program.

### **Staffing**

The individuals involved in the project must have the experience and knowledge necessary to successfully complete the project. Therapists are required to have the necessary MST training and prerequisite qualifications to carry out the central practice of the project.

Proposers should discuss how they will assure that certified program staff will be available to implement FIS/MST services, and receive necessary training to continuously improve services and outcomes for clients.

The program shall identify a person with primary responsibility for the coordination, management, and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives.

## **PROGRAM FUNDING PRIORITY AREA: Family Intervention Services:**

### **Multi Systemic Therapy (FIS / MST)**

#### **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

Services must be designed to reduce the impact of familial risk factors that contribute to delinquency. Services must include:

1. Enroll youth and families annually in no less than eight (8) sessions/weeks of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of participation, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of the youth and their family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standard: Provide on-going case management services as needed, including:

- Provide interagency referrals to any family member with identified needs; document referrals and related follow-up actions in the client/child's case file. Referrals for services should be part of the service report provided to the referring agency.

3. The program is required to help eliminate obstacles to clients/families participation.

Performance standard: Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoons, evenings and/or weekends).

4. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at mutually agreed upon times.

5. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in 30 days or less by temporary or permanent staff.

## **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for Family Intervention Services Programs, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

The funded provider is expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator. The expected outcomes identified below are consistent with the overall goal of this service, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

<b>EXPECTED PARTICIPANT OUTCOMES</b>	<b>INDICATOR</b>
95% of youth/families enrolled in the program will complete FIS/MST requirements for successful closure.	# and % of referred youth/families who have participated in a minimum of eight (8) sessions /weeks of intervention programming; documented by youth and parent enrollment and case notes.

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
Youth and parents will improve their communication skills, relationships, and overall functioning.	<p># and % of youth who report improvement on standardized MST pre-post measures.</p> <p># and % of parents/guardians who report improvement on standardized MST pre-post measures.</p>
Youth who complete the program will improve their school attendance and conduct.	<p># and % of youth who improve their school attendance on pre and post school reports.</p> <p># and % of youth who improve their school conduct on pre and post school reports.</p>
<p>90 % of the youth who complete the program will not be re-arrested during program participation.</p> <p>80% of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.</p>	<p># and % of youth who are not re-arrested while participating in the program.</p> <p># and % of referred youth who are not re-arrested within six (6) months or more of program completion.</p>

## OTHER REQUIREMENTS

### Documentation

Monthly feedback on each client’s progress in the program should be provided to the referring agency or more frequently, as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc., must be documented in each client/child’s case file and supported by participant sign-in sheets, where appropriate.

### **PROGRAM FUNDING AREA: Family Intervention Services: Brief Strategic Family Therapy (FIS/BSFT)**

### GENERAL INTRODUCTION

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified Family Intervention Services (FIS) as a funding priority area. FIS are provided by provider organizations that are certified and have the capacity to provide intensive, family focused, evidence-based clinical interventions to referred families assessed by the referring entity to be in need of these services.

FIS programs include services and/or activities designed specifically to reduce the impact of familial risk factors that contribute to delinquency, as well as involving the family in the overall delivery of needed services. Programs must support family and individual empowerment aimed at re-offense prevention. It is anticipated that only one (1) program will be funded through this initiative. **Estimated cost per client/family: \$2,000 (plus training consultation costs)**

### **Brief Strategic Family Therapy (FIS/BSFT)**

The County is seeking proposals from non-profit organizations certified to provide Brief Strategic Family Therapy and case management services to the target population. Priority will be given to projects managed by organizations with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency and their families, including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders. Information on this model can be found at the following site: <http://www.bsft-av.com/>.

### **PROGRAM MODEL**

Brief Strategic Family Therapy (BSFT) is a short-term, problem-focused therapeutic intervention, targeting adolescents that attempt to improve youth behavior by eliminating or reducing drug use and its associated behavioral problems and that change family members' behaviors that are linked to both risk and protective factors related to substance abuse. The therapeutic process uses techniques of:

- Joining – forming a therapeutic alliance with all family members
- Diagnosis – identifying interactional patterns that allow or encourage problematic youth behavior
- Restructuring – the process of changing the family interactions that are directly related to problem behaviors

### **Targeted Participants**

The FIS/BSFT programs target juvenile offenders ages 13-17 and their families, who are at high risk for, or are engaging in anti-social behaviors including violence and substance abuse or who have been diagnosed with conduct disorder, oppositional defiant disorder, or disruptive behavior disorder.

### **Participant Referrals/Recruitment**

Referrals to the program come from case managers working with arrested youths in the Miami-Dade Juvenile Services Department Diversion Programs, from Improving Community Control programs (ICC), and from other YCTF/DMCJC funded programs as may be designated where youth have demonstrated significant family dysfunction.

Families referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list or if services to the family cannot begin within two (2) weeks.

The successful applicant is responsible for obtaining referrals from the Juvenile Services Department Diversion Programs by maintaining regular contact with relevant case managers and by attending all diversion program staffing meetings. The funded program should promote itself with diversion case managers and administrators.

## **Participant Enrollment and Program Completion Requirements**

Youth and families who successfully participate in the program are expected to be involved in the BSFT required intensive intervention programming, which would include all program activities related to desired outcomes. However, the actual length of participation of each youth and family may be more intensive dependent upon the youth's performance in the program.

## **Staffing**

The individuals involved in the project must have the experience and knowledge necessary to successfully complete the project. Therapists are required to have the necessary BSFT training and prerequisite qualifications to carry out the central practice of the project.

Proposers should discuss how they will assure that certified program staff will be available to implement FIS/BSFT services and receive necessary training to continuously improve services and outcomes for clients.

The program shall identify a person with primary responsibility for the coordination, management, and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of the program goals and objectives.

## **PROGRAM FUNDING AREA: Family Intervention Services: Brief Strategic Family Therapy (FIS / BSFT) **SCOPE OF SERVICES AND PERFORMANCE STANDARDS****

Services must be designed to reduce the impact of familial risk factors that contribute to delinquency. Services must include:

1. Enroll youth and families in the BSFT required hours of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of participation, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of the youth and their family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standard: Provide on-going case management services as needed, including:

- Provide interagency referrals to any family member with identified needs and document referrals and related follow-up actions in the client/child's case file. Referrals for services should be part of the service report provided to the referring agency.



- The program is required to help eliminate obstacles to clients/families participation.

Performance standard: Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoons, evenings and/or weekends).

- Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at mutually agreed upon times.

- The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in thirty (30) days or less by temporary or permanent staff.

### **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for Family Intervention Services Programs, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

The funded provider is expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator. The expected outcomes identified below are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

<b>EXPECTED PARTICIPANT OUTCOMES</b>	<b>INDICATOR</b>
95% of youth/families enrolled in the program will complete FIS/BSFT requirements for successful closure.	# and % of referred youth/families who have participated in a minimum BSFT required hours of intervention programming; documented by youth and parent enrollment and case notes.
Youth and parents will improve their communication skills, relationships, and overall functioning.	# and % of youth who report improvement on standardized BSFT pre-post measures.  # and % of parents/guardians who report improvement on standardized BSFT pre-post measures.

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
Youth who complete the program will improve their school attendance and conduct.	<p># and % of youth who improve their school attendance on pre and post school reports.</p> <p># and % of youth who improve their school conduct on pre and post school reports.</p>
<p>90 % of the youth who complete the program will not be re-arrested during program participation.</p> <p>80 % of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.</p>	<p># and % of youth who are not re-arrested while participating in the program.</p> <p># and % of referred youth who are not re-arrested within six (6) months or more of program completion.</p>

### OTHER REQUIREMENTS

#### Documentation

Monthly feedback on each client's progress in the program should be provided to the referring agency, or more frequently as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc. must be documented in each client/child's case file and supported by participant sign-in sheets, where appropriate.

### PROGRAM FUNDING AREA: Family Intervention Services: Multi Dimensional Family Therapy (FIS / MDFT)

#### GENERAL INTRODUCTION

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified Family Intervention Services (FIS) as a funding priority area. FIS will be provided by organizations that are certified in a clinical intervention, as specified, and have the capacity to provide intensive, family-focused, evidence-based clinical interventions to referred families assessed by the referring entity to be in need of these services.

FIS programs include services and/or activities designed specifically to reduce the impact of familial risk factors that contribute to delinquency, as well as involving the family in the overall delivery of needed services. Programs must support family and individual empowerment aimed at re-offense prevention. It is anticipated that only one (1) program will be funded through this initiative. **Estimated unit cost per client/family: \$3,000**

#### **Multi Dimensional Family Therapy (FIS / MDFT)**

The County is seeking proposals from non-profit organizations certified to provide Multi Dimensional Family Therapy (MDFT) and case management services to the target population. Priority will be given to projects managed by organizations with experience

and a proven track record of success in the provision of multiple services to youth at high risk for delinquency and their families, including the ability to provide clinical interventions for mental health, substance abuse, and co-occurring disorders. Information on this model can be found in the following site: [http://www.strengtheningfamilies.org/html/programs\\_1999/10\\_MDFT.html](http://www.strengtheningfamilies.org/html/programs_1999/10_MDFT.html).

### **PROGRAM MODEL**

Multidimensional Family Therapy (MDFT) is a comprehensive and flexible family-based program designed to treat substance abusing and delinquent youth. MDFT is a multi-component and multi-level intervention system that assesses and intervenes with the:

- Adolescent and parent(s) individually
- Family as an interacting system
- Individuals in the family, relative to their interactions with influential social systems (e.g., school, juvenile justice) that impact the adolescent's development

MDFT interventions are solution-focused and strive to obtain immediate and practical outcomes in the most important individual and transactional domains of the adolescent's everyday life. MDFT can operate as a stand-alone outpatient intervention in any community-based clinical or prevention facility. It also has been successfully incorporated into existing community-based drug treatment programs, including a hospital-based day treatment program. Treatment length is four (4) to six (6) months.

MDFT studies have been conducted at numerous wide-ranging geographic locales with African-American, Hispanic/Latino, and White youth between the ages of 11 and 18 in urban, suburban, and rural settings. Outcomes show that marijuana use decreases more rapidly and depression, anxiety and delinquent acts are greatly reduced during MDFT as compared to other treatment modalities.

### **Targeted Participants**

The FIS/MDFT programs target substance abusing juvenile offenders, ages 13-18 and their families.

### **Participant Referrals/Recruitment**

Referrals to the program come from case managers in the Miami-Dade Juvenile Services Department Diversion Programs, from the Juvenile Drug Court (JDC), from Improving Community Control programs (ICC), and from other YCTF/DMCJC funded programs, as may be designated where youth have demonstrated significant substance abuse issues.

Families referred for services should be contacted within 48 hours. The referral agency should be immediately notified if the program has a waiting list or if services to the family cannot begin within two (2) weeks.

The successful applicant is responsible for obtaining referrals by maintaining regular contact with relevant case managers and by attending all diversion program staffing meetings. The funded program should promote itself with diversion case managers and administrators.

### **Participant Enrollment and Program Completion Requirements**

Youth and families who successfully participate in the program are expected to be involved in no less than twelve (12) sessions/weeks of intensive intervention programming, which would include all program activities related to desired outcomes. However, the actual length of participation of each child and family may be more

intensive dependent upon the child's performance in the program. Programs are expected to enroll youth and families over the twelve month program year.

### **Staffing**

The individuals involved in the project must have the experience and knowledge necessary to successfully complete the project. Therapists are required to have the necessary MDFT training and prerequisite qualifications to carry out the central practice of the project.

Proposers should discuss how they would assure that certified program staff would be available to implement FIS/MDFT services and receive necessary training to continuously improve services and outcomes for clients.

The program shall identify a person with primary responsibility for the coordination, management, and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives.

## **PROGRAM FUNDING AREA: Family Intervention Services: Multi Dimensional Family Therapy (FIS / MDFT)**

### **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

Services must be designed to reduce the impact of familial risk factors that contribute to delinquency. Services must include:

1. Enroll youth and families in no less than twelve (12) sessions/weeks of intervention programming.

Performance standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of participation, pre-test, and requisite consent forms are submitted to the independent evaluator (all required forms will be provided by the independent evaluator).

2. Implement a case management component that begins at program intake and includes the development of an individual program plan that addresses the needs of youth and family. Plans shall be updated on at least a monthly basis and more frequently, as required.

Performance standard: Provide on-going case management services as needed, including:

- Provide interagency referrals to any family member with identified needs and document referrals and related follow-up actions in the client/child's case file. Referrals for services should be part of the service report provided to the referring agency.

3. The program is required to help eliminate obstacles to clients/families participation.

Performance standard: Provide flexible working hours for staff to ensure that program activities are available at times/days convenient for clients, (e.g., late afternoons, evenings and/or weekends).

4. Contractors must fully cooperate with the independent evaluator.

Performance standard: Provide completed enrollment forms on time, completed pre-test and post-tests at appropriate times, and have staff available for evaluator consultation at mutually agreed upon times.

5. The program is fully staffed by appropriately trained personnel.

Performance standard: Staff meets the qualifications specified above. Staff vacancies are filled in thirty (30) days or less by temporary or permanent staff.

### **PARTICIPANT OUTCOMES AND INDICATORS**

The following list does not constitute all data possibilities for Family Intervention Services Programs, but rather, provides a sample of the kinds of information that will be provided to successful proposers when full cooperation with the independent evaluator occurs.

The funded provider is expected to collect and track individual participant data for each indicator in collaboration with the independent evaluator. The expected outcomes identified below are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

<b>EXPECTED PARTICIPANT OUTCOMES</b>	<b>INDICATOR</b>
95% of youth/families enrolled in the program will complete FIS/MDFT requirements for successful closure.	# and % of referred youth/families who have participated in a minimum of twelve(12) sessions/weeks of intervention programming; documented by youth and parent enrollment and case notes.
Youth and parents will improve their communication skills, relationships, and overall functioning.	# and % of youth who report improvement on standardized MDFT pre-post measures.  # and % of parents/guardians who report improvement on standardized MDFT pre-post measures.
Youth who complete the program will improve their school attendance and conduct.	# and % of youth who improve their school attendance on pre and post school reports.  # and % of youth who improve their school conduct on pre and post school reports.

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
<p>90 % of the youth who complete the program will not be re-arrested during program participation.</p> <p>80% of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-completers.</p>	<p># and % of youth who are not re-arrested while participating in the program.</p> <p># and % of referred youth who are not re-arrested within six (6) months or more of program completion.</p>

### **OTHER REQUIREMENTS**

#### **Documentation**

Monthly feedback on each client’s progress in the program should be provided to the referring agency or more frequently, as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc. must be documented in each client/child’s case file and supported by participant sign-in sheets, where appropriate.

### **PROGRAM FUNDING AREA: School Advocacy and Mentoring Services (SAMS)**

#### **GENERAL INTRODUCTION**

In an effort to prevent youth who have committed a criminal and/or delinquent offense from dropping out of school or being re-arrested, the Miami-Dade YCTF and the DMCJC have identified the Student Advocacy and Mentoring Service (SAMS) as a priority funding area. The County intends to fund programs strategically located in Miami-Dade County Public Senior High Schools with greatest needs as documented by juvenile arrest data. The objective of the SAMS program is to prevent school failure among youth who have been arrested and are under the supervision of the Florida Department of Juvenile Justice.

Priority will be given to programs managed by organizations with experience and a proven track record of success in the provision of intensive community/school-based services to arrested/adjudicated youth and their families.

The SAMS program includes services and/or activities designed specifically to reduce the impact of individual and familial risk factors that contribute to delinquency and school failure among arrested/adjudicated youth. Programs must support individual empowerment aimed at academic achievement and re-offense prevention. These programs will operate year-round and must address a full range of activities.

All proposers must submit with their application the following:

- Documentation that the targeted public senior high school warrants the implementation of a SAMS program by submitting current juvenile arrest data and other current information gathered from school and/or governmental sources.

- Documentation that sufficient numbers of targeted youth are expected to attend the high school to be served.
- Letter of Agreement from the school principal to document that the SAMS program will be allowed to operate at the school and that office/meeting space will be provided to the program at the school. Only schools that provide the SAMS *Advocate/Mentor* a program office/student meeting space are eligible for services from a SAMS program.
- A description on how the proposer will adapt the goals and objectives of the program to the needs of the youth they will serve. The program design should constitute a logical, sequential, and effective approach to meeting the goals and objectives of this program.
- A detailed list and description of year-round activities and tasks that will be accomplished to meet the goals and objectives of the program during the grant period.
- Documentation that the proposer's organization has a solid infrastructure capable of fully implementing the program.
- A description of activities, incentives, and resources necessary to assure that youth participate to the fullest extent possible in year-round activities that will improve their academic achievement (e.g., tutoring, mentoring, employment, etc.). Strategies that may need to be addressed include: transportation to and from school; participation in after school or weekend activities; donation of reduced price entry fees for special activities, and free tickets to events.

**Note:** Interventions and program activities determined by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), the U.S. Department of Health and Human Services (DHHS), etc., to be more harmful than helpful or generally ineffective shall not be used. Examples are: “scared straight” approaches, boot camps, jail tours, groupings of arrested youths with different levels of criminal justice involvement, and children 12 and under with older teen programs. It is anticipated that up to a maximum of five (5) strategically located programs (i.e., schools) will be funded through this initiative. **Cost per client: \$1,500**

### **PROGRAM MODEL**

SAMS programs are intended to be an intensive individualized intervention to prevent youth who have committed a criminal and/or delinquent offense from dropping out of school or being re-arrested.

#### **Targeted Participants**

SAMS programs will serve youth placed on Community Control by the Florida Department of Juvenile Justice and who attend a public Miami-Dade County senior high school.

#### **Participant Referrals/Recruitment**

Referrals for the SAMS programs must be made by a Florida Department of Juvenile Justice Probation Officer. The providers will screen referred children to determine their appropriateness for the program based upon their demonstration of three of the following risk factors correlated with dropping out of school:

- High absenteeism
- Over-age for their grade by two or more years
- Low functioning in basic skills
- Low grade point average due to significant disciplinary problems
- Placement in English for Speakers of Other Languages (ESOL) for five or more terms

- Exceptional education designation

Each successful applicant(s) is responsible for obtaining referrals by maintaining regular contact with relevant probation officers. Each funded program should promote itself with the juvenile probation officers and their supervisors. The referral agency should be immediately notified if the program has a waiting list, or if services to the youth cannot begin within two (2) weeks.

### **Participant Enrollment and Program Completion Requirements**

Enrollment in the program will consist of completion of pre-enrollment activities and submission by the SAMS Advocate/Mentor of the required documents and forms to the independent evaluator. Providers will maintain a caseload of **25 to 30 youths** (enrollments will be based upon students being enrolled a majority of the days in the month). When students complete the program or drop out, another referred student must take his/her place. Youth who successfully complete the program are expected to satisfy court-mandated sanctions, be promoted to their next grade level, or graduate. Youth may remain in the program until the end of the school year in which they complete their probation. Follow-up support activities should be offered for youth who complete the program.

### **Staffing**

A full-time, SAMS Advocate/Mentor on-site at the school will implement and conduct the program activities. The SAMS Advocate/Mentors' functions are to coordinate activities and provide case management services to referred youth including: counseling, advocacy, and facilitation of social services interventions, as needed.

The project should identify a position with primary responsibility for the management and execution of all grant activities. The individual must devote sufficient time and possess the educational and/or practical experience and commitment to assure the successful achievement of program goals and objectives.

Program staff must hold at least a Bachelor's degree in education, social work, psychology, or a similar discipline and have a minimum of two (2) years relevant experience in dealing with delinquent youths and their families.

## **PROGRAM FUNDING AREA: School Advocacy and Mentoring Services** **(SAMS)**

### **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

Services are designed to reduce recidivism, support court-ordered sanctions and services, and empower participants to remain in school and obtain a high school diploma

Services must include:

1. Enrollment of **25 to 30 youths** at a minimum of two consecutive school grading periods.

Performance Standard: A client is officially counted as enrolled when a completed enrollment record, documentation of two (2) weeks of attendance, pre-test, and

requisite consent forms are submitted to the independent evaluator. (All required forms will be provided by the independent evaluator).

2. Individual achievement plans are prepared to improve the child's attendance, effort,



and conduct in school unless the client's academic success is well-documented in the case file. The plan should include a case management component that addresses the needs of the youth and family.

Performance Standard: An individual achievement/case management plan is developed for all enrolled youth. Within 30 days of enrollment, the SAMS Advocate/Mentor will schedule a meeting at the school with parents and school personnel to review the achievement plan. The plans should be reviewed and signed by the youth and the parent/caregiver and be maintained in the case file.

Referrals for services and follow-up activities for youth and family members are documented in the case file. Referrals for services and outcomes should be part of the service report provided to the referring agency.

3. Year-round services are provided to program participants.

Performance Standard: A plan for year-round services is developed and participants' involvement is documented. During the summer months, youths will be contacted at a minimum of once a week.

4. SAMS Advocate/Mentor will maintain contact with parents and caregivers throughout the enrollment period of each participant.

Performance Standard: Each family of a referred youth will receive a minimum of one (1) home visit by the SAMS Advocate/Mentor within the initial intake period. A home visit or face-to-face visit will be conducted at the end of every report card grading period to review the grades for the participant with parent/caregiver. Additional home visits or face-to-face meetings with parents/guardians shall be scheduled more often, as needed.

5. SAMS Advocate/Mentors will provide a range of academic support activities that enhance academic achievement.

Performance Standard: SAMS staff will conduct the following activities:

- A process is developed and implemented to have monthly teacher feedback for each student
- Identification and coordination of tutoring services for program participants
- Identification and documentation of employment and training opportunities for program participants

6. SAMS Advocate/Mentors will provide a range of academic support activities that enhance school attendance.

Performance Standard: SAMS staff will conduct the following activities:

- A process is developed and implemented to monitor daily attendance
- Upon any two consecutive day absence, the student and parent/caregiver is contacted via telephone or home visit

7. Provide face to face counseling for each youth participant on a regular basis.

Performance Standard: SAMS staff will document a minimum of 15 minutes of counseling on a bi-weekly basis.

8. For youths enrolled in the program and who subsequently move to other schools, every attempt should be made to make referrals to similar programs and services in

the new school.

Performance Standard: The SAMS Advocate/Mentor will maintain an updated list of all the SAMS Advocate/Mentors and their respective schools.

9. The program staff serves as liaison and advocates for families by working with schools. Special emphasis shall be placed on assisting in the development of cooperative relationships between the school and parents.

Performance Standard: In conjunction with Miami-Dade County Public Schools, the families should be provided an orientation and training regarding the school system. The orientation should include an overview of school-based resources available to youths and their families, the rights and responsibilities of children and parents, professional development, and volunteer training opportunities.

10. The program is required to help eliminate obstacles to the participation of students and their caregivers.

Performance standard:

- Provide transportation options for participants in situations where they would not be able to participate without transportation support
- Provide flexible working hours for staff to engage and contact youth, parents/caregivers at times/days convenient to them (e.g., daytime for non-employed parents; evening and/or weekend for employed parents)
- Provide incentives to participation and academic improvement

11. The SAMS staff serves as advocate for the youth.

Performance Standard: SAMS Advocate/Mentor attends court hearings and attends or monitors any relevant court-mandated activity that will lead to successful completion of probation requirements.

12. Provide activities and opportunities for participants to be recognized for their achievement in improving attendance and/or grades and for being promoted to the next grade or graduating.

Performance standard: At least two (2) recognition events are held during the 12-month program year.

13. The program is fully staffed by appropriately trained personnel.

Performance Standard: Staff meets the qualifications specified above. Vacancies are filled in thirty (30) days or less by temporary or permanent staff.

## **PARTICIPANT OUTCOMES AND INDICATORS**

Identified below are expected outcomes that are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators. Funded providers are expected to collect and track individual participant data for each indicator.

Expected Outcomes	Indicators
Youths who complete the program will improve their school attendance and conduct.	<p># and % of youth who improve their school attendance on pre and post school reports.</p> <p># and % of youth who improve their school conduct on pre and post school reports.</p> <p># and % of referred youths who reduce their school suspensions on pre and post school reports.</p>
Youths who complete the program will improve their academic achievement in math and reading.	<p># and % of youth who improve their reading grade on pre and post school reports.</p> <p># and % of youth who improve their math grade on pre and post school reports.</p>
Youths will remain in school and be promoted to the next level, or graduate.	<p># and % of referred youths who complete the school year.</p> <p># and % of referred youths who are promoted to the next grade.</p> <p># and % of referred youths who graduate from high school.</p>
Youth who complete the program will improve their pro-social attitudes including: achievement motivation, attitude toward conflict, interpersonal violence, and attitude toward school.	<p># and % of youth who improve their achievement motivation on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward conflict on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward interpersonal violence on pre and post-test measures.</p> <p># and % of youth who improve their attitude toward school on pre and post-test measures.</p>
<p>90% of youth who participate in the program will not be re-arrested during program participation.</p> <p>80% of the youth who complete the program will have fewer re-arrests after six (6) months or more, than non-</p>	<p># and % of youths who are not arrested during program participation.</p> <p># and % of youths who are not arrested within six (6) months of program</p>

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**OTHER REQUIREMENTS**

**Documentation**

Monthly feedback on each client’s progress in the program should be provided to the referring agency or more frequently, as required. All program activities, home visits, referrals to other agencies for services, school meetings, etc. must be documented in each client/child’s case file and supported by participant sign-in sheets, where appropriate.

**PROGRAM FUNDING PRIORITY AREA: 12 and Under Project - SNAP™**

**GENERAL INTRODUCTION**

The Miami-Dade County YCTF and the DMCJC, through the 2011-12 funding initiative are soliciting proposals to identify an agency that can provide services to high-risk boys who have been assessed at the Juvenile Assessment Center (JAC) and identified as a boy 12 years old and under with “special issues and needs.” This project will be a part of a National Demonstration Project with the U.S. Department of Justice utilizing proven research methods in the reform of an active, functioning juvenile justice system, working with all kinds of juvenile offenders in order to strategically apply interventions that will ultimately reduce the juvenile crime rate in a major urban area.

This request is designed for qualified/certified agencies interested in creating a contract agreement to adopt, implement, and replicate an empirically-based model intervention: SNAP™ Program, developed by Child Development Institute, Toronto, Canada, designed specifically for boys under 12 years of age in conflict with the law and their families. The selected applicant agency will work closely with project researchers and SNAP™ Program developers to make sure the intervention is being implemented in accordance with the program manuals (to ensure treatment fidelity and integrity). The successful applicant agency will enter into a formal licensing agreement with Child Development Institute, Toronto, Canada to obtain a SNAP™ License. Funding after the first year will be contingent on the agency’s fidelity to the model and attainment of expected outcomes. Information about this model can be found at the following site: <http://www.stopnowandplan.com/>.

**Service Description**

The SNAP™ Program is a gender specific multi-component and multi-systemic intervention that teaches social skills, problem-solving techniques, self-control strategies, and cognitive self-instruction to boys with disruptive behavior problems and their parents. Based on an assessment of their unique treatment needs utilizing the Early Assessment Risk List for Boys: EARL-20B (Augimeri, Koegl, Webster, & Levene, 2001), the boys and their families will access a range of ten possible treatment components. The two core components offered to all boys and their families are:

1. A 12-week SNAP™ Children’s Group called the Transformers Club -- a structured after-school group that takes place once a week for 1.5 hours. It focuses on teaching boys cognitive-behavioral self-control and problem-solving techniques developed at the former Earls court, called SNAP™ (Stop Now And Plan) (Goldberg & Legget, 1990; Earls court Child and Family Centre, 2001a); and

2. A 12-week concurrent SNAP™ Parent Group that focuses on teaching parents effective child management skills (Earls court Child and Family Centre, 1990; 2001b).

Additional components offered to boys and their families based on level of risk and need include:

3. Family counseling based on SNAPP (Stop Now And Plan Parenting) (Levene, 1998);
4. Academic tutoring (homework club);
5. School advocacy and teacher consultation;
6. Victim restitution;
7. Individual befriending, which links boys with a worker or trained volunteer to strengthen skill-building and to become involved in structured community-based activities;
8. Monday Night Club, a continued care component involving an evening club for high-risk boys who have completed the SNAP™ Children's Group;
9. Problem-solving groups for parents who have completed the SNAP™ Parent group; and
10. The Arson Prevention Program for Children (TAPP-C) for children with fire-specific problems.

### **Proposal Selection Criteria**

Performance Measures: - All applicant agencies will be assessed using the following performance measures that the selected proposer must emphasize: (a) compliance with the County's mental health standards; (b) a reputable track record of connectedness and high regard/trust within the community; (c) demonstrated sound fiscal budget management; and (d) expertise working with children with disruptive behavior problems and their families using an ecological-based approach.

### **Records, Reporting, and Monitoring**

The qualifying agency must agree to the following contract requirements:

1. To maintain complete and accurate records pertaining to clients served in the SNAP™ Program;
2. To provide the project researchers with designated reports and tracking performance measures on an ongoing basis; and
3. To allow designated outside project staff access to inspect and/or audit the SNAP™ Program files/records at its discretion and on an ongoing basis.

### **Confidentiality of Client Information**

The qualifying agency will need to have in place a written confidentiality policy to ensure the confidentiality of all client information (e.g., cannot disclose or make use of information concerning any client or family member except in the course of performing the agency's official business – except in instances required by law, such as suspected child abuse, neglect, or criminal activity).

### **Additional Requirements**

That the qualifying agency is able to demonstrate that they have active and written policies regarding parent involvement, cultural competence, privacy of personal information, client complaints, benefits and concerns about participating in treatment, ending services, and client feedback mechanisms.

## **Agency Orientation**

Provides services to at-risk children and their families with the following orientation:

- Social Learning Model (with a cognitive-behavioral focus)
- Client-centered
- Family-focused
- Client advocacy
- Timely service (no wait list)
- Outreach (e.g., flexible service delivery hours)
- Eco-systemic (e.g., ability to work collaboratively with schools, child welfare, and other service providers)
- Research and quality assurance/improvement (demonstrated practice participating in outcome evaluation/research)

Staffing should be configured as follows:

- Senior staff with administrative and clinical skills to oversee the program and provide leadership (“program champion”)
- Dedicated program-specific staff:
  - Family Worker/Parent Group Leader (F/T)
  - Child Worker/Children’s Group Leader (F/T) - male designated position
  - Child Group Co-Leader (P/T)
- Trained staff who are able to engage high-risk children and their families by demonstrating:
  - group facilitation skills (parent and child - as set out in the SNAP™ Group Manuals)
  - adherence to program manuals
  - access to community resources

## **Cooperation**

Qualifying agencies must have a strong track record of cooperating with social service and other relevant stakeholders. The SNAP™ Program will require specific alliances, including:

- The Juvenile Assessment Center (referral source)
- Miami-Dade County Schools Police Department
- Child Development Institute (program developer) for:
  - Training
  - Consultation
  - Onsite support
  - Offsite (e.g., teleconferencing, videoconferencing, reviewing clinical tapes)
  - Program Integrity and Fidelity Checks
  - Research and Evaluation (in collaboration with the National Demonstration Project)
  - Child Welfare, Law Enforcement, Fire Services, and other relevant service providers
  - State Attorney’s Office for Circuit XI
  - Florida Department of Juvenile Justice
  - Miami-Dade County Youth Crime Task Force Staff

## **Program Continuation**

The qualifying agency will receive a site license to provide SNAP™ Program services. Continuation of funding is contingent upon:

- (1) Implementing the program with documented integrity and fidelity (assessed by the Child Development Institute), and
- (2) Achieving expected outcomes from implementing SNAP™ Program services, as determined by the National Demonstration Project evaluation.

### **Physical Requirements/Location**

- Centrally located or agencies that have multiple sites within Miami-Dade County
  - Accessible via public transportation
  - Child/family friendly environment
  - Physical space to conduct intervention
    - Child friendly group room (minimum space required approximately 14' x 16')
    - Round table that seats 9 individuals (2 adults and 7 children)
    - Chalk board and Whiteboard with markers
    - Wall space to post program materials
    - T.V. and VCR
    - Video camera
    - Preferable – observation/video capabilities to observe or, minimally, video tape the group sessions
    - Parent friendly group room
    - Adequate number of chairs and space for participating parents

### **SCOPE OF PROGRAM SERVICES AND PERFORMANCE STANDARDS**

Services are designed to reduce recidivism, support court-ordered sanctions and services, and teach children 12 and under to recognize their ability to improve their destructive behavior and nurture their potential. Services must include:

1. Enroll children 12 and under in the prescribed intervention programming following the standards set by the SNAP model.

Performance standard: A client is officially counted as enrolled when a completed enrollment record and documentation of attendance and other SNAP model enrollment requirements are completed.

2. Provide Case Management to program participants.

Performance standard: Provide a minimum of two hours of home visit, one hour of school visits, and twelve hours of coordination referrals and linkages.

3. Conduct family visits.

Performance standard: Each family will receive one home visit to gather and complete assessment information.

4. Conduct school visits.

Performance standard: Each child will receive one school visit for academic support as needed.

5. Provide psycho-educational learning groups as prescribed by the SNAP model.

Performance standard: Children will be involved in 90-minute structured psycho-educational learning groups each week for twelve weeks.

6. Facilitate parent(s) involvement as prescribed by the SNAP model.  
Performance standard: Parents will be involved in 90-minute structured psycho-educational learning groups each week for twelve weeks.
  
7. Complete a Pre & Post Behavior Assessment System for Children (BASC).  
Performance standard: Each child enrolled will complete a Pre & Post Behavior Assessment System for Children (BASC – self report interview).
  
8. Complete a Pre & Post Behavior Assessment System for parents.  
Performance standard: Each parent will complete a Pre & Post Behavior Assessment System (BASC – parent rating scale).
  
9. Complete the parent Pre & Post Early Assessment Risk List (EARL).  
Performance standard: Each parent will complete a Pre & Post Early Assessment Risk List EARL).
  
10. Periodic submission of progress reports.  
Performance standard: Progress reports will be submitted monthly to any referring Juvenile Services Specialist to update on the progress of the client/family.

**PROGRAM FUNDING PRIORITY AREA: 12 and Under Project - SNAP™**

EXPECTED PARTICIPANT OUTCOMES	INDICATOR
<p><b>Process Outcome:</b></p> <p>85% of youth/families enrolled in the program will complete SNAP® requirements for successful closure.</p>	<p># and % of referred youth/families who have: participated in a minimum of eight (8) SNAP® Children’s Group sessions and SNAP®; Parent Groups---documented by youth and parent admission and attendance records/tracking sheets; and all (100%) noted/suggested treatment recommendations are met.</p>
<p><b>Treatment/Intervention Child Outcomes:</b></p> <p>Youth will show evidence of <u>improved emotional regulation: Use SNAP®</u> (self-control and problem solving technique).</p> <p><u>Increased social competence.</u></p>	<p># and % of children who report improvement on SNAP® pre-post measures/assessments -- - documented by Case File Notes, Post SNAP® Children and Parent Group Evaluation (i.e., Client Satisfaction Questionnaires – child and parent), Post SNAP® Group Treatment Reviews.</p> <p># and % of children who report improvement documented by standardized SNAP® pre/post</p>



EXPECTED PARTICIPANT OUTCOMES	INDICATOR
	measures (e.g., BASC, EARL-20B or EARL-21G).
<p>Children will show evidence of <u>decreased antisocial behavior.</u></p> <p><u>No further police contact.</u></p>	<p># and % of children who report improvement documented by standardized SNAP® pre/post measures (e.g., BASC, EARL-20B or EARL-21G).</p> <p># and % of youth who are not re-arrested while participating in the program; who are not re-arrested within six (6) months; within one (1) year; or more of program completion.</p>
<p><b>Treatment/Intervention Parent/Caregiver Outcomes:</b></p> <p><u>Improved child management strategies.</u></p> <p><u>Enhance problem-solving skills and coping abilities.</u></p>	<p># and % of parents who report improvement documented by Post SNAP® Parent Group Evaluation Reports and/or Client Satisfaction Questionnaires, Case File Notes, Treatment Reviews, pre/post EARL risk assessment and standardized measures (e.g., Parenting Stress Index – PSI, EARL-20B or EARL-21G).</p>

**PROGRAM FUNDING PRIORITY AREA: Serious Habitual Offender Siblings (SHO Sib)**

**SHOSib Background**

“SHOCAP” is an acronym for the “Serious Habitual Offender Comprehensive Action Program” which was established in 1983 by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) in the U.S. Department of Justice (DOJ). As the name implies, the SHOCAP initiative encouraged communities to develop coordinated and integrated plans for serving, monitoring, and sanctioning youth who had been deeply involved in the juvenile justice system and were at risk to become career criminals as adults. The choice of SHOCAP siblings as a high-risk, target population for prevention services seems intuitively clear. These siblings are exposed to most, if not all, of the same risk factors that may have contributed to delinquent behavior of the SHO youth. Younger siblings are at risk of modeling the negative behaviors of the older SHO youth and his/her antisocial peers, and difficulties in school or neighborhood may result in the siblings’ gravitation to antisocial youth in their own peer age group.

**The SHOSib Program**

The Juvenile Assessment Center (JAC) National Demonstration Project (NDP), SHO Siblings Project, produced a Family Associates (FA) manual of services designed to assist families in which there is a SHO youth and one or more younger siblings (ages 9-

14 years) in the home who have been arrested. FA services are grounded in a social-ecology model that recognizes the multiple family, neighborhood, and community factors that may place a youth at risk for delinquency, and these services are focused on the family unit as the focus of intervention. Based largely on intervention principles that have been highly successful with a variety of adolescent populations in other contexts, the FA program is designed to provide services to SHOCAP families over potentially prolonged periods – from the time a younger sibling of a SHO youth is arrested until the family demonstrates reduced dysfunction and members are involved in positive life endeavors.

Although the clinical procedures and activities identified in the FA manual are well-grounded in theories and principles that have worked well in other contexts, the FA program has not previously been implemented elsewhere. Thus, it is inevitable that there will be a “growing period” during which, in the face of challenges and practical limitations to implementation, the FA program procedures and interventions will evolve toward a stable and reliable service that fits within the demands of the local context. Therefore, the successful proposer should demonstrate an organizational ability to easily adapt to changes within the program.

Training of the FA Supervisor and FA staff is required prior to service delivery. The FA program was designed in the context of the NDP specifically for implementation in Miami-Dade County. Both the diversity and potential intensity of services anticipated require that extensive and ongoing training be provided to ensure adequate implementation of the FA program. A lead consultant from the JAC NDP SHO Siblings project has been contracted to provide the required training.

**Project/Clinical Personnel:** One (1) Family Associate Supervisor and six (6) Family Associates distributed as follows:

Lead Agency

One (1) Family Associate Supervisor (Licensed Clinician, Full time, LCSW or equivalent in related field)

Two (2) Family Associates (Bachelor Level, Case Manager, Full time, experienced in family counseling or relevant equivalent)

Participating agency(ies)

Two (2) Family Associates for each of two participating agencies (Bachelor Level, Case Manager, experienced in family counseling or relevant equivalent)

**SCOPE OF PROGRAM SERVICES AND PERFORMANCE STANDARDS**

Services are designed to provide wrap-around support and linkage services to the siblings and families of Serious Habitual Offenders throughout Miami-Dade County, to engage the families in pro-social activities, and to reduce the likelihood of future delinquent activity. Services will include:

1. Conduct family education regarding juvenile justice system.

Performance standard: Seventy five (75) families enrolled in the program will receive training on the juvenile justice system in Miami-Dade County. Parents will be informed about the processes of the court.

2. Participation in court appearances by staff.

Performance standard: Family Associates (i.e., staff) will accompany parents and youth to court appearances.

3. Provide vocational training to improve the likelihood of improving job placement.

Performance standard: A minimum of seventy five (75) parents and children will receive vocational training to improve the likelihood of job placement. This might include training such as English language skills and computer skills training.

4. Establish Mentoring linkages.

Performance standard: Link families (where appropriate) with mentors.

5. Conduct outreach to public schools.

Performance standard: Program supervisor or lead will provide a minimum of thirty (30) informational sessions to Miami-Dade County Public School staff regarding program services.

6. Conduct parent assistance services training.

Performance standard: A minimum of one hundred parents will receive training in completing personal income tax forms and training related to applying for college aid.

7. Conduct school visits.

Performance standard: Staff (i.e., Family Associates) will complete at least one school visit per family to inform the school of program services.

8. Provide parents with additional linkages to services.

Performance standard: Staff will provide linkage to families for assessed needs for additional services such as Medicaid, Food Stamps, Youth Groups, medical needs, etc.

9. Program staff must be available to parents for assistance.

Performance standard: Staff (i.e., Family Associates) are on call 24 hours per day, 7 days per week. Services are provided seven days per week.

**PROGRAM FUNDING PRIORITY AREA:**

**Serious Habitual Offender Siblings (SHO Sib)**

<b>EXPECTED PARTICIPANT OUTCOMES</b>	<b>INDICATOR</b>
SHO-Sib youth will increase their	Number of participants who will increase their academic performance. Goal is 30 for

academic performance.	the year reported at case closing only (70%).
SHO-Sib youth will participate in volunteer community service.	Number of participants who will participate in at least two hours of volunteer community service per week. Goal is 30 (70%) for year.
SHO-Sib youth will avoid arrest while in the program.	Number of participants who avoided arrest. Goal is 40 per year (95%).
SHO-Sib youth will participate in mentorship.	Number of participants who participated in mentorship. Goal is 30 per year (70%).
SHO-Sib youth will be assessed for case management needs and linked to identified services.	Number of participants who were assessed for further case management needs and were linked to identified services. Goal is 42 (100 %) for the year.

**PROGRAM FUNDING PRIORITY AREA: Gang Prevention and Intervention Program**

**GENERAL INTRODUCTION**

In an effort to prevent youth from joining youth gangs and to reduce gang activity, the Miami-Dade YCTF and the DMCJC have identified the Gang Prevention and Intervention Program (GPIP) as a priority funding area.

As a result of the recommendations developed for the “Blueprint Report: Miami-Dade County Responds to Youth Gangs” from the 2003 Youth Gang Summit, as well as all updates from subsequent Youth Gang Summits, the Miami-Dade Youth Crime Task Force and the Dade-Miami Criminal Justice Council is providing funding for a Gang Prevention and Intervention Program (GPIP).

Proposers must describe how they will adapt the goals and objectives of the program in order to serve all of Miami-Dade County. The program design should constitute a logical, sequential, and effective approach to meeting the goals and objectives of this program. The proposer should present, in detail, the year-round activities and tasks that will be accomplished to meet these goals and objectives during the period of this grant.

Priority will be given to organizations with experience and a proven track record of success in the provision of community outreach, training and community education on high-risk youth and delinquent activity to the community at-large. The proposer must demonstrate that they have a solid infrastructure capable of carrying out the goals, objectives, and tasks for the successful implementation of the program. It is anticipated that only one (1) program will be funded through this initiative.

## **PROGRAM MODEL**

The Gang Prevention and Intervention Program will be a community education and engagement initiative that will provide Miami-Dade County with a clearinghouse for gang-related data and materials, training for youths and adults, and a coordinated community awareness campaign on youth gang prevention and intervention strategies.

The Gang Prevention and Intervention Program will be the central source of information on all current best practice initiatives at the local and national level that address the youth gang issue.

The information and materials maintained by the Gang Prevention and Intervention Program will be made accessible to parents/guardians, community organizations, youth groups, churches, and schools in the form of educational materials and staff presentations that could be adapted to different target groups.

### **Targeted participants**

The primary target group is the community at-large which will be engaged through a variety of awareness and engagement activities, such as:

- Trainings for youths and adults;
- Forums for neighborhoods with high levels of gang activity;
- An Annual Youth Gang Summit and neighborhood forums involving service providers and law enforcement; and
- Youth Gang Web Site.

### **Recruitment**

To facilitate the participation of individuals, community groups, and stakeholders, the GPIP will conduct an ongoing community outreach campaign that will promote program activities, and access to services and materials.

### **Participation requirements**

All participants attending trainings, forums, and the annual Youth Gang Summit will be provided with a satisfaction survey to measure knowledge gained at all activities and events.

### **Minimum staffing**

A Gang Prevention and Intervention Program Coordinator will manage and implement the project. The Coordinator must hold at least a Bachelor's degree in social work, public administration, anthropology/sociology, criminology, or a similar discipline. Experience in prevention/intervention programming is necessary and experience with youth gangs would be of significant benefit in the selection process. The Coordinator should have knowledge and experience with planning and coordination of community education campaigns as well as experience collecting and analyzing a range of data and materials for dissemination among diverse groups.

## **PROGRAM FUNDING PRIORITY AREA: Gang Prevention and Intervention Program**

### **SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

1. Compile and maintain a comprehensive listing of prevention/intervention gang services in Miami-Dade County.

Performance Standard: A list will be compiled within the first two months of the

program year and distributed to stakeholders. Once the website is operational the list should be accessible online.

2. Conduct a survey of gang services providers to ascertain the types of materials/resources that they need.

Performance Standard: Survey will be distributed and results compiled within the first three months of the program year.

3. Create a Gang Prevention and Intervention Program advisory committee.

Performance Standard: Recruit and select stakeholders to form a Gang Prevention and Intervention Program advisory committee that will review program activities and which shall be convened at a minimum on a quarterly basis. Inclusion and participation of key criminal justice agencies represented in the membership of the Dade-Miami Criminal Justice Council should be considered for participation.

4. Develop and maintain a website for youth gang prevention/intervention services in Miami-Dade County, and for the request of materials/services from the Gang Prevention and Intervention Program.

Performance Standard: Web site to be operational within six months of the program year. On a monthly basis a report will be submitted to the independent evaluator on the number of "hits" on the web site, and requests for services/materials received through the website.

5. Organize, promote, and conduct an annual Youth Gang Summit that includes all appropriate agencies and community members and offers a regional forum in which to share information on prevention/intervention services.

Performance Standard: Conduct the Youth Gang Summit within the program year. Prepare and distribute to the community at-large a report on the recommendations and highlights of the event.

6. Organize and implement eight stakeholder forums in neighborhoods with documented high levels of youth gang activity/membership.

Performance Standard: Conduct two forums quarterly. For each forum sign-in sheets will be kept and satisfaction surveys will be distributed and collected from the participants.

7. Participate in key Youth Gang collaborations (e.g., Attorney General's Gang Reduction Task Force, MAGTAF (upon invitation), US Attorney's Office, etc).

Performance Standard: Monthly reports should document participation.

8. Develop a youth gang training curriculum for youth and another for adults.

Performance Standard: Within two months of the start of the program year the curriculums for youth and adults will be developed.

9. Provide education and community awareness to schools, youth groups, neighborhood groups, and faith-based organizations concerning gangs, including information on all current prevention/intervention strategies and services.

Performance Standard: Provide, at a minimum, one weekly education and

community awareness event. Monthly reports will document the number of events and types of organizations attending. For each event sign-in sheets will be kept to document attendance and satisfaction surveys will be distributed and collected from the participants.

10. Provide comprehensive and gang-related training for youth workers and service providers on the nature and dynamics of gang membership.

Performance Standard: Provide, at a minimum, one bi-weekly weekly education and community awareness event. Monthly reports will document the number of events and types of organizations attending. For each event sign-in sheets will be kept to document attendance and satisfaction surveys will be distributed and collected from the participants.

11. Advocate for gang prevention/intervention related services.

Performance Standard: Monthly reports will document the Gang Prevention and Intervention Program activities that advocate for the creation and implementation of new or expanded gang prevention/intervention related services and/or resources.

12. The program is fully staffed by appropriately trained personnel.

Performance Standard: Staff meets the qualifications specified above. Vacancies are filled in thirty (30) days or less by temporary or permanent staff.

### **PARTICIPANT OUTCOMES AND INDICATORS**

Identified below are expected outcomes that are consistent with the overall goal of this service priority, together with indicators used to track funded providers' success in attaining those outcomes. These outcomes and indicators must be included in the applicant's program plan. Applicants can include additional outcomes and/or indicators.

Funded providers are expected to collect and track individual participant data for each indicator.

Expected Outcomes	Indicators
Trainings - Increase the knowledge of attendees on youth gangs and prevention/intervention strategies	90% of completed surveys will report increased knowledge of youth gangs and prevention/intervention strategies
Forums - Increase the knowledge of attendees on youth gangs and prevention/intervention strategies	90% of completed surveys will report increased knowledge of youth gangs and prevention/intervention strategies
Youth Gang Summit - Increase the knowledge of attendees on youth gangs and prevention/intervention strategies	90% of completed surveys will report increased knowledge of youth gangs and prevention/intervention strategies
Web Site - Website information will be useful to users	90% of completed online surveys will report that the information and materials accessed through the website was useful to them

**PROGRAM FUNDING PRIORITY AREA: Juvenile Drug Court Support:  
Assessment and Case Management**

**GENERAL INTRODUCTION**

In an effort to prevent and reduce delinquent and violent behavior among youth in Miami-Dade County, the Miami-Dade YCTF and the DMCJC have identified support services for the Miami-Dade County Juvenile Drug Court (MJDC) as a funding priority area. The County intends to fund a program strategically located in the Eleventh Judicial Circuit of the State of Florida Juvenile Drug Court Program.

The Juvenile Drug Court Support program activities are designed specifically to increase participation of arrested juveniles who are identified as having a substance abuse disorder in community-based substance abuse intervention and treatment services. The goal of the Program is to reduce juvenile recidivism rates by providing offenders with the necessary tools and community support to assist them in curbing their substance abusing behavior that may be putting them at risk of further delinquent behavior.

Priority will be given to an organization with experience and a proven track record of success in the provision of multiple services to youth at high-risk for delinquency, particularly substance abuse intervention and treatment. Proposers must describe how they will adapt the goals and objectives of the program to the needs of the youth that the project will serve. The program design should constitute a logical, sequential, and effective approach that will require daily interaction and close working relations with staff from the Eleventh Judicial Circuit of the State of Florida Juvenile Drug Court Program. The proposer should present, in detail, the activities and tasks that will be accomplished to meet these goals and objectives during the period of this grant. The proposer must also demonstrate that it has a solid infrastructure capable of fully implementing the program. It is anticipated that only one (1) program will be funded through this initiative.

**Cost per client: \$2,000**

**PROGRAM MODEL**

The proposer shall embrace an alternative therapeutic approach rather than a traditional and adversarial process. The MJDC is a six to twelve-month, court-supervised program for non-violent offenders who suffer from alcohol and/or drug abuse. The program is comprised of four levels that include frequent court appearances and other services for youth placed on probation. All program participants are mandated to complete an outpatient substance abuse program. Program participants must also demonstrate positive progress in school, maintain court-imposed curfew, maintain daily contact with their juvenile probation officer (JPO), and test negative for drugs and alcohol. Juveniles are referred to the program through recommendations based on current delinquency charges, prior non-violent/delinquent history, and comprehensive assessments.

**Targeted Participants**

This program targets juvenile offenders, ages 13-17, arrested and identified as having a substance abuse problem.

**Staffing**

The program should identify two positions with primary responsibility for the assessment and case management of the juvenile client population. Program staff should have at least one year of relevant experience in dealing with culturally and ethnically diverse delinquent youth (i.e., substance abusing youth offenders).



Direct service staff must hold at least a Bachelor's degree in social work, psychology, mental health counseling, family therapy, or other helping professions and have at least one (1) year of relevant experience in dealing with culturally and ethnically diverse substance abusing juvenile delinquents.

**PROGRAM FUNDING PRIORITY AREA: Juvenile Drug Court: Assessment and Case Management**

**SCOPE OF SERVICES AND PERFORMANCE STANDARDS**

1. Enroll youths, ages 13-17, identified as having a substance abuse problem.

Performance standard: Enrollment of 60 youths between the ages of 13-17 that have been identified at the Miami-Dade County Juvenile Services Department, Juvenile Assessment Center as having a moderate to severe substance abuse problem.

2. Conduct comprehensive assessments of program participants.

Performance standard: Conduct comprehensive assessment/evaluation on all referred juveniles and their guardians to determine program intervention appropriateness.

3. Participate in Miami Dade Juvenile Court team activities.

Performance standard: Weekly participation in meetings with the MDJC team consisting of representatives from the State Attorney's Office, the Public Defender's Office, Miami-Dade County Public Schools, Juvenile Probation Officers from the Department of Juvenile Justice, etc.

4. Participate in court appearances.

Performance standard: Participate in all Court-mandated appearances with juvenile offender clients, as required.

5. Place juvenile clients in aftercare services as appropriate.

Performance standard: Assess and place juvenile clients in the appropriate aftercare program upon completion of juvenile drug court mandates.

6. Refer families for services.

Performance standard: Assess and document all necessary referrals for ancillary services.