

Serving children with families with Substance Use Disorders

Case Study



The Client

Kentucky Department of Community Based Services

The Project

Using the Title IV-E waiver to expand START services in Kentucky

The Challenge

Substance use disorder (SUD) has been on the rise in Kentucky. One of the many social consequences of SUD is an increase in the number of children and families involved in the foster care system. Kentucky's child welfare agency, the Department of Community-Based Services (DCBS), needed an intervention for these families that really addressed the SUD issue at hand. The agency sought a better way to offer meaningful and impactful treatment for these families, focusing on keeping children in the home (when safe and appropriate) and building stronger families to keep kids with their own families, rather than being placed in foster homes.

The PCG Approach

Public Consulting Group (PCG) worked side-by-side with DCBS to apply for and implement a Title IV-E waiver in Kentucky. Our team conducted a needs assessment, analyzed qualitative and quantitative data, reviewed the DCBS service array, ultimately identifying the gaps in DCBS' service provision. Our needs assessment showed that the service array was very limited for a specific population: young children with family risk for SUD. Our needs assessment also showed that the Sobriety Treatment and Recovery Teams (START) program, already offered in a few Kentucky counties, would meet this need.

The Title IV-E waiver allows child welfare agencies to receive a capped allocation of Title IV-E funds to be used flexibly, rather than just room and board maintenance reimbursements for out-of-home placements that traditional Title IV-E reimburses. PCG guided DCBS through the application, approval, and implementation process, allowing DCBS the opportunity to spend their Title IV-E dollars on prevention and in-home services, like the START model. PCG's guidance in taking a comprehensive overview of the Title IV-E waiver opportunity made it possible for Kentucky to offer this proven SUD intervention to more children and families in their communities, with the goal of reducing the number of children in out-of-home placements in Kentucky.

The Results

PCG identified the target population in need of increased service options, identified the appropriate intervention (START), and guided DCBS in creating a funding model that allowed them to offer the program to more children and families in Kentucky.

PCG's work allowed DCBS to receive an increased Title IV-E capped allocation for four years, even including a list of "triggers" which, when met, give DCBS leverage to negotiate a further increase in their annual Title IV-E allocation. Now, more families in Kentucky are being served with the successful START intervention. Studies of the START program have statistically shown that the intervention increases the likelihood of reunification and decreases the likelihood of repeat maltreatment. The START intervention in Kentucky is currently being evaluated in a random control trial (RCT); results will be available in 2019.