g. List assessment instruments to be used for selected target population and how they will be used to screen youth:

After determining the offending youth meets the criteria for referral to FFT and it is deemed appropriate by the judge, a standard written consent form will be presented to the parents whose agreement and must be secured for enrollment in FFT. Parent/guardian orientation addresses expectations, family and youth rights, and grievance procedures. Intake forms and needs assessments are both obtained in order for a youth to be fully enrolled in the program.

## 4. Methods and Procedures

a. Service Delivery

State the proposed primary curriculum or evidence-based interventions that will be employed during this grant period. Describe how this will be implemented.

**Functional Family Therapy (FFT)** 

FFT focuses on treating youth aged 11-18 ranging from at-risk preadolescents to youth with very serious problems such as conduct disorder, violent acting-out, and substance abuse. Few youth are ineligible for FFT services other than primarily youth with severe mental or physical handicaps. The FFT clinical model identifies specific treatment phases that organize the intervention in a coherent manner so that clinicians maintain focus in the context of family and individual disruption.

FFT will be implemented in-person or virtually using telecommunication technologies.

State and describe any other developmental activities program participants will receive in addition to the curriculum or intervention listed above. Explain how each of these developmental activities will be implemented.

N/A

b. Describe the overall format and design of the program, addressing the following:

**Program Type: Functional Family Therapy (FFT)** 

The Court will continue to partner with EBA and Community Solutions Inc. (CSI), to continue providing FFT for youth and families deemed to be at-risk of commitment to DJJ and or STP, or short term program admission.

FFT focuses on treating youth aged 11-18 with very serious problems such as conduct disorder, violent acting-out, and substance abuse. The FFT clinical model identifies specific treatment phases that organize the intervention in a coherent manner so that clinicians maintain focus in the context of family and individual disruption.

The FFT clinician serves between 8-12 youth and families at one time. Interventions range from 15-20 1-hour, intensive therapy sessions for mild cases to up to 30 sessions for more