

# New Mexico Children, Youth and Families Department

Community Based Child Abuse Prevention Program

Combined FY2014 Annual Report and FY2015

Application Submission

#### LEVERAGED FUNDS WORKSHEET for FFY 2014 APPLICATION

STATE: New Mexico LEAD AGENCY: Children, Youth & Families Department Page 1 of 1

AMOUNT OF CLAIM	DATE(S) FUNDS WERE RECEIVED AND BUDGETED BY LEAD AGENCYBUDGETED/SPENT		SOURCE OF FUNDS BEING CLAIMED	PURPOSE FOR WHICH FUNDS WERE BUDGETED AND SPENT
\$500,000.00	Monthly Installments - October 2013 to September 2014	October 2014	State Appropriation	For early childhood development and family support; parent training programs.
\$5,000,000.00	Monthly Installments – October 2013 to September 2014	October 2014	State Appropriation	To provide Domestic Violence services and resources to families who have experienced domestic violence situations in order to strengthen the family.
\$				

INCENTIVE CLAIM ASSURANCE: All amounts figured into this claim are non-Federal monies that have been leveraged by the State, directed through the CBCAP lead agency submitting the application, and budgeted and spent in FFY 2014 (i.e. 10/1/13 – 9/30/14) to support community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect, as defined in the legislation, that coordinate resources among a range of existing public and private organizations for the purposes defined under this Title. No funds claimed here have been claimed to leverage any other source of Federal funds. State and non-federal funds that are being used to meet the maintenance of effort, match or other cost-sharing requirements for other Federal funding are not eligible to be claimed.

TOTAL CLAIM \$5,500,000.00	PREPARED BY: Concrete frames (Fiscal Agent) (Date) 5/19/15
	SUBMITTED BY: 5/19/2015 (Lead Agency Authority) (Date)

#### 1. Budget

#### **Annual Report Narrative:**

The Community Based Child Abuse Prevention (CBCAP) grant has provided the state of New Mexico with the opportunity to support direct service delivery programs, training and public awareness activities focused on child abuse and neglect prevention. The Children, Youth and Families Department (CYFD) expended a total of \$492,274.40 for CBCAP funded programs which includes \$98,454.88 in state general fund match and \$393,819.52 charged to the CBCAP grant. The funding was expended as follows:

- Fatherhood Programs (Contractual Services) \$165,144.15
- Family Support Services Programs (Contractual Services) \$242,254.44
- Training for CBCAP Funded Programs (Contractual Services) \$35,426.00
- Public Awareness Campaign (Contractual Services) \$47,365.00
- Travel for 1 staff to attend Annual Grantees Meeting & National Child Abuse Conference (Out of State Travel) - \$2,084.81

#### Application Narrative:

The CBCAP grant will continue to be administered by the state lead agency, Children, Youth and Families Department (CYFD). In an effort to support the preventative services that are available to the children, youth and their families of New Mexico as well as minimize duplication of services and efforts, CBCAP funds are utilized to develop and strengthen the state's community based service provider network. CYFD anticipates receiving approximately \$200,000.00 in CBCAP funds and will match the grant by 20% in state funds. CYFD continues to use state domestic violence, early childhood development and family support funds to leverage the Community Based Child Abuse Prevention grant. CYFD anticipates spending the \$200,000.00 as follows:

- Family Support Services Programs (Contractual Services) \$132,000.00
- Public Awareness Campaign Materials (Contractual Services) \$3,500.00
- Training for CBCAP Funded Programs (Contractual Services) \$60,000.00
- Evaluation of CBCAP funded programs (Contractual Services) \$1.500.00
- Travel for 2 staff to attend Grantees Meeting & National Child Abuse Conference (Out of State Travel) - \$3,000.00

#### Lead Agency Description and Leadership Activities in State Prevention Activities

#### **Annual Report Narrative:**

The Children, Youth and Families Department (CYFD) has served as the lead state agency for the Community Based Child Abuse Prevention (CBCAP) grant in New Mexico for nineteen (19) years and continues to serve as the designated lead agency for the state. CYFD is charged with the responsibility of safeguarding the lives of children and youth in New Mexico as well as provide services to families that assist and support them in creating and providing a safe, stable, productive and nurturing

environment for their children. The agency strives to achieve this through the partnering and collaboration between the five service areas that comprise CYFD and follow the agency's vision, mission and principles.

#### Vision

The Children, Youth and Families Department partners with communities to strengthen families in New Mexico to be productive and self-sufficient.

#### Mission

CYFD believes in the strengths and resiliency of families who are our partners and for whom we advocate to enhance their safety and well-being. We respectfully serve and support children and families and supervise youth in a responsive, community-based system of care that is client-centered, family focused and culturally competent.

#### **Principles**

CYFD believes that children and families should receive:

- Services that promote and build individual and family strength.
- Early identification intervention services to address problems as they emerge.
- Access to a comprehensive array of services that are individualized, community based, and whenever possible, in-home, to meet the unique needs and potential of each child and family.
- Full participation and choice in all aspects of the planning and delivery of services.
- Services that are provided in the least restrictive setting and most normative environment, are integrated and linked, both within and with other child serving agencies; and which use peers, family and natural supports.
- Culturally competent services delivered without regard to race, ethnicity, religion, natural origin, gender, sexual orientation or disability.
- The most effective services that are based on evidence of promising or emerging practices, to achieve positive outcomes.
- Services that ensure smooth transactions to adult service systems.

The basic foundation and tenets of service within CYFD is that all children, youth and families have strengths and are capable of making changes that promote and foster the safety and well-being of their children. CYFD recognizes that it is the family who is the expert in their own strengths and needs and should be included in the decisions made about their children and family. The services the agency provides are child centered and family focused; this practice is based on the belief that it is the family who is the principal member of the team and that they are crucial to the process of identifying their family's unique strengths, resources and needs. CYFD is committed to providing

opportunities for families to implement changes within their family towards developing and sustaining a living environment where their children are protected and their well-being is nurtured. In addition to a family focused, child centered standard of practice for service delivery, it also serves as the basis for the agency's community outreach efforts and program development.

CYFD recognizes that each community within the state is unique and is the most knowledgeable about its own strengths, resources and areas of need. The agency also recognizes that child maltreatment affects everyone in the local community and the state as a whole. As a result, the agency remains committed to partnering with local community stakeholders to support and increase the accessibility of services to families that best meet their unique family needs. In addition, CYFD focuses its efforts on collaborating with its partners on the shared goal of facilitating change within individual families and local communities thus helping to promote the safety, permanency and well-being of all New Mexico children and youth.

As demonstrated through a common vision and a framework for practice as established through the agency's guiding principles, CYFD recognizes that effective protection of vulnerable children and at-risk youth requires the combined efforts of local, tribal, state and federal governments with individuals, community based service providers and organizations, advocates, faith communities and other public and private community partners. Such a framework provides agency staff with guidance and also highlights the importance of early intervention as a strategy for the prevention of child abuse and neglect. In addition, it acknowledges the vital role that partnerships with stakeholders play in the building and supporting of healthy families. Furthermore, it supports the tenant that successful and effective service delivery requires partnership and coordination across departmental and agency boundaries as well as across county and city lines so that there is an array of services available to everyone. CYFD continually strives to engage its partners towards this goal so that services are provided based upon individual and family specific needs rather than upon race, ethnicity, religion, national origin, gender nor disability.

#### Organizational Structure

The Children, Youth and Families Department (CYFD) began operating in 1992, following passage of the Children, Youth and Families Act by the New Mexico State Legislature in 1991. The Act described the agency purpose as follows:

- To administer all laws and exercise all functions formerly administered and exercised by the youth authority, as well as administering certain functions related to children, youth and families that were formerly administered by other departments or agencies of the state.
- To assist in the development of state policies and plans for services to children, youth and families, including policies and plans that endeavor to strengthen client self-sufficiency and that emphasize prevention without jeopardizing the necessary provision of essential treatment and early intervention services.

- To advocate for services for children, youth and families as an enduring priority in New Mexico.
- To provide leadership to other agencies that serve children, youth and families to ensure a coordinated and integrated system of care and services for children, youth and families.

The executive leadership of CYFD is centrally located in Santa Fe and headed by the cabinet secretary. The executive team guides and directs practice for each of the divisions to carry out the agency's vision, mission and principles. Each division has a director who reports to the cabinet secretary. The cabinet secretary reports directly to the governor. Each division is responsible for implementing the programs authorized by the state legislature.

#### CYFD Overview

The Children, Youth and Families Department divisions, programs and services focus on the safety, permanency and well-being of children and youth of New Mexico as well as their families. As noted above, CYFD's executive team is led by the cabinet secretary and the delivery or administration of prevention, intervention and support services is designated to the Office of Community Outreach and Behavioral Health Programs as well as the Early Childhood Services, Protective Services, Juvenile Justice Services and Administrative Services divisions. The agency's priority is ensuring that each program and service within all divisions furthers its mission to serve and support New Mexico's children, youth and families in a manner that is responsive, culturally competent, community based and family focused.

The Office of Community Outreach and Behavioral Health Programs includes Community and Behavioral Health Services, Systems of Care and Licensing and Certification. Through its behavioral health services component, CYFD actively supports the development and implementation of behavioral health services for infants, toddlers, children, adolescents and transition age youth. Through the Systems of Care component, the agency seeks to improve the functioning of the state's children, youth and families at the individual and family level as well as at the broader policy and systemic level. Through Licensing and Certification, CYFD certifies compliance with state and federal regulations for an array of children/youth Medicaid behavioral health services operated by in-state Medicaid providers by reviewing and assessing compliance with active treatment, quality of care, health and safety, personnel requirements and other service delivery regulatory standards. In addition, Licensing and Certification licenses Medicaid facility-based providers as well as non-Medicaid Children's Crisis Shelters that operate in New Mexico.

The Early Childhood Services Division includes the Office of Child Development and is responsible for the provision of the NM Pre-K Program and home visiting as well as the administration of the family nutrition program and child care services which include child care assistance and child care provider licensing and regulation. In addition, the Early

Childhood Services Division provides a centralized child care resource and referral service, training and technical assistance to early childhood care and education staff as well as professional development through facilitated learning opportunities.

The Juvenile Justice Services Division is responsible for providing programs and services for youth at all levels of involvement in the justice system from early intervention and informal supervision and probation through facility custody, supervised release and transition back into the community. The Juvenile Justice Services Division is tasked with the administration of the state's juvenile secure and reintegration facilities, supervised probation and aftercare services, community corrections and youth in transition services.

The Protective Services Division is responsible for the provision of child protection services and other child welfare services in New Mexico. The Protective Services Division is charged with receiving reports and conducting investigations of alleged child abuse and neglect by the child's parent, guardian or custodian and is also responsible for foster care, adoptions, emancipation services, community based child abuse prevention services and domestic violence services. The child abuse prevention activities within the agency fall within the Community Services Bureau of the Protective Services Division which provides direct oversight of the Promoting Safe and Stable Families Grant, the Community Based Child Abuse Prevention Grant, the Children's Trust Fund, the Children's Justice Act Grant and the Access and Visitation Grant. The Protective Services Division is also designated to administer the Stephanie Tubbs Jones Child Welfare Services Program, the Child Abuse Prevention and Treatment Act, Title IV-E, the Chafee Foster Care Independence Program and the Education and Training Voucher Program.

The Administrative Services Division, Human Resources, Information Technology Services and the Academy for Training and Professional Development provide support for CYFD's programs and services. The Administration Services Division includes budget, accounting, financial management, procurement and contract development, audit and support services. Human Resources includes personnel and employee relations services as well as department-wide quality assurance. Through its Information Technology Services, agency staff are provided with applications, operations and technical support. The Academy for Training and Professional Development is tasked with the responsibility of training CYFD staff to carry out the agency's goal of facilitating the safety and well-being of New Mexico's children, youth and their families.

In addition, CYFD is a key member of and plays a critical role in the Children's Cabinet. The Children's Cabinet was created in 2003 and focuses on improving the lives of children by ensuring that state government at every level is meeting the health, education and growth needs of all New Mexico children. The following state agencies are represented on the Children's Cabinet: CYFD, Public Education, Human Services, Health, Workforce Solutions, Corrections, Economic Development, Finance and

Administration, Public Safety, Aging and Long Term Care, Indian Affairs and Cultural Affairs. Membership also includes the Governor and Lieutenant Governor; the cabinet members elect either the Governor or the Lieutenant Governor to serve as chairperson each year. Under its current organization, the Children's Cabinet has focused on studying and making recommendations for the design of programs that promote the well-being of the children of New Mexico. In the 2014 Report Card, the Children's Cabinet focused on early childhood development, health and nutrition, child welfare and public safety and education.

In addition to continuing its focus on identifying ways that agencies and departments can work together to make New Mexico a safer and healthier place for children and their families, the Children's Cabinet has identified several specific next steps as part of the overall goal of improving the lives of New Mexico children; some of those include:

- increase the number of providers/programs to the CYFD FOCUS on Young Children's Learning system;
- expand the Health Kids Healthy Communities multi-sector coalition model to more communities;
- increase Basic Service Pre-K and pilot Extended Day Pre-K; and
- expand Child Advocacy Centers throughout the state.

In addition to playing a key role in ensuring the safety, permanency and well-being of New Mexico's children and youth, the Children, Youth and Families Department also assists in providing a structure for community-based organizations to strengthen families and provide for the healthy physical, mental and emotional development of children and youth. In order to do so, CYFD partners with myriad organizations to provide technical assistance, operational support and funding to establish, implement and maintain programs that are specifically focused on reducing and preventing child abuse and neglect in New Mexico. Furthermore, CYFD continues to emphasize its agency wide strategy to partner with communities to develop and foster systems of care to address the needs of at risk families as well as support CYFD's frontline staff with the resources necessary to meet the needs of the children, youth and families they serve. Through its family support programs administered through the Office of Child Development as well as the Children's Trust Fund, CYFD provides assistance and support to community based programming. These programs include the Home Visiting Program, the Child Care Services Bureau, the New Mexico Pre-K Program, and the Family Nutrition Bureau.

The Office of Child Development was created in New Mexico state statute in 1989, funded July of 1990 and became operational in November of 1990. The seven member Governor-appointed Child Development Board has oversight of the Office of Child Development. The mission of the Child Development Board is that all New Mexico children, from birth through age eight and their families have access to a quality child development system.

Home Visiting is a service provided by qualified professionals within the home to parents, prenatally and/or with children birth to age three to provide parents with support to enhance the child-parent relationship. Home Visiting programs seeks to create opportunities of support for New Mexico families in their efforts to raise resilient children and to create an environment that positively impacts a child's social and emotional development. Home Visiting includes assisting families in identifying informal support networks; providing referrals to community resources as necessary; providing information on prenatal health, newborn care and child development; conducting post-partum visits to include assessment of the mothers' well-being, specifically: physical, emotional, social supports, and concrete needs; and guiding families, caregivers and adoptive parents through child developmental curricula.

In addition, New Mexico's Home Visiting Accountability Act, which was signed by Governor Susana Martinez in 2013, has become a model for states who are seeking to formalize support for their Home Visiting System as well as establish uniform goals and measures. New Mexico's Home Visiting System is in its early stages of development and implementation. Over the last two years, the focus has been on building a system that includes both the infrastructure and program capacity that is needed to provide universal, voluntary access to pregnant women, expectant fathers, and parents and caregivers of children from birth to entry into kindergarten. The services provided through Home Visiting are expected to be research based, grounded in best practices and linked to the following six overarching goals: babies are born healthy; children are nurtured by their parents and caregivers; children are physically and mentally healthy; children are ready for school; children and families are safe; and families are connected to formal and informal supports in their communities. CYFD is currently focusing on supporting existing home visiting programs, launching new ones and ensuring that all programs meet standards for service delivery, screenings and data reporting.

The Child Care Services Bureau administers the federal and state programs that provide child care assistance to eligible families, establishes and enforces child care licensing standards to ensure the safety and health of children in childcare, oversees the licensure and registration of child care centers and providers and serves as a centralized child care resource and referral service for parents. Child care has been increasingly viewed as not only a social service that enables parents to work or attend school but also as an opportunity to enhance the growth, development and education of young children. The state of New Mexico remains committed to building the quality of the child care system in an effort to support and foster the good health and the skills children need to be successful. New Mexico also continues its commitment to assuring that children from low income families have equitable access to high quality programs. In collaboration with CYFD's Office of Child Development and Family Nutrition Bureau, the Child Care Services Bureau plans and coordinates quality child care services and works to build child care capacity statewide.

Also through the Office of Child Development, a variety of training opportunities to early care and education staff, parents and interested community members are made available at the eight regional Training and Technical Assistance Programs which are located throughout the state. Program staff provides on-site consultation through the FOCUS tiered quality rating and improvement system for the early childhood care and education programs that are licensed by the state. The training and technical assistance staff also works closely with child care licensing staff to determine the quality of licensed child care programs statewide in order to assign the appropriate number of stars toward the program's license. In addition, the staff works with pediatricians, child care centers and libraries to provide early childhood education/public awareness services.

In addition to the Training and Technical Assistance Programs, the Office of Child Development is responsible for organizing and managing a professional development system with state-issued licensure and certification that is based on coursework through higher education for all individuals working with children from birth through age eight. The Early Childhood Higher Education Task Force oversees the formal education aspect of the Professional Development system. The system also includes facilitated learning opportunities which are less intensive than college credit courses, are more informal and are based in practice. Attendees typically include teachers' assistants, teachers and directors from programs such as Head Start, Pre-K and child care.

New Mexico Pre-K is a voluntary program created by the Pre-Kindergarten Act of 2005 and is jointly administered by the Children, Youth and Families Department and the Public Education Department. New Mexico Pre-K services are provided through both community programs and public schools with the goal of closing the achievement gap amongst students and to help meet the broader vision of an education system that begins in pre-kindergarten and continues through higher education. The overall purpose of the program is to ensure that every New Mexico child has the opportunity to attend a high quality early childhood program prior to entering kindergarten and aims to increase access to such programs, provide developmentally appropriate activities for children, focus on school readiness, expand early childhood community capacity and support linguistically and culturally appropriate curriculum. In June 2014, New Mexico Pre-K served 3,096 children throughout the state through CYFD.

The Family Nutrition Bureau administers two USDA Child Nutrition Programs which provide funds to participating organizations to begin as well as maintain non-profit food service programs for eligible children and adults. The Family Nutrition Bureau helps to ensure eligible children and adults receive nutritious meals through administration of a statewide Child and Adult Care Food Program (CACFP) and Summer Food Service Program (SFSP) that provides nutritional meals for children and adults and nutrition education training for childcare providers and families. In addition, the Nutrition Education and Training staff of the bureau provides training and technical assistance to CACFP and SFSP sponsors to assist them in improving the quality of the meals served beyond the minimum standards for participation in the food programs.

As the behavioral health authority for all children in New Mexico, CYFD actively supports and encourages the ongoing development and implementation of effective behavioral health services for infants, toddlers, children, adolescents and transition age youth. CYFD provides an array of behavioral health services for children and youth in partnership with the state's Behavioral Health Collaborative which include infant/early childhood mental health services as well as behavioral health services for youth who are involved with juvenile justice or protective services, tribal social services, or who are at risk of involvement in these services and are not eligible for Medicaid. Through the Systems of Care/Communities of Care initiative, CYFD has focused on improving outcomes for children and youth with serious behavioral health challenges through a network of services, supports and relationships. The three primary goals are that: children, youth and families are engaged and better able to function in home, school and the community; system level policies and financial strategies are in placed that support local community Systems of Care; and local community Systems of Care are implemented statewide. Through Infant/Early Childhood Mental Health Treatment Services, there is an array of developmental as well as therapeutic services designed to reduce behavioral, social and emotional disorder and disruptions in the relationship between a child and their parent or primary caregiver.

The Domestic Violence Program oversees the Family Violence Services Prevention Act. These programs include education, shelter and support services. The Domestic Violence Program works closely with the New Mexico Domestic Violence Coalition with an emphasis on services to families experiencing domestic abuse with expanded services and reduction of negative impacts.

The Promoting Safe and Stable Families (PSSF) program provides many services to families including Family Support Services for families who are at high risk of experiencing child maltreatment as well as family support services to foster and adoptive parents. Other PSSF services include In-home Services which is provided to families who have come to the attention of Protective Services due to allegations of abuse or neglect, Time-limited Reunification services which are provided to families in an effort to expedite the reunification of children who are placed in out of home care and adoption support services which are provided to those families who have adopted children. Community based providers provide these services in many communities throughout the state through contracts which are procured through a formal request for proposal process.

During this reporting period, CBCAP funds were used to fund Family Support Service programs utilizing the Circle of Security and Triple P parent education curricula. These family support programs provide direct services to parents of children 0-5 including life skills assessment and development, parenting education, home visiting and groups for participants where networking and skill building opportunities are provided to parents. These groups have also been utilized to create parent leadership opportunities as well as community level child abuse awareness events and activities.

The Children's Trust Fund's primary mission is to prevent child maltreatment by funding programs and projects that provide primary or secondary services to prevent child abuse and neglect. During this reporting period, the Children's Trust Fund was used to fund the following programs:

- Taos Health Systems Holy Cross Hospital is helping to build a community of care for young children and their families in an effort to reduce isolation, facilitate understanding of child development and build parent resiliency in order to decrease the risk of child maltreatment.
- Las Cumbres Community Services, Inc. is working to develop a screening tool
  and referral protocol for primary care givers to use to identify at-risk children and
  link them to early childhood/infant mental health services and to reduce the risk
  factors associated with child abuse and neglect for children ages birth to 6 years
  of age within Rio Arriba County by providing interventions that improve the
  parent-child relationship and the primary caregiver's reflective capacity.
- PB&J Family Services provide support to immigrant fathers' through culturally appropriate group support sessions in an effort to help prevent child abuse and neglect by improving protective factors and preparing families to help their children succeed developmentally and academically.
- Socorro General Hospital Community Based Program provides educational activities and peer support groups that promote the parent/child bond and attachment in an effort to reduce the incidence of child abuse and neglect.
- Sexual Assault of NW New Mexico provides free, immediate, compassionate, culturally sensitive and comprehensive services along with education and a primary prevention curriculum in an effort to meet the needs of the sexual assault survivor.

#### **Application Narrative:**

As the lead agency for the CBCAP Grant, CYFD will continue its efforts to lead the state in the coordination and collaboration of child maltreatment prevention activities throughout the state. CYFD will continue these efforts through strategic partnering and collaboration with local, county and state government agencies, schools, community organizations, faith-based organizations and service providers in addition to parents, children and youth. In addition, CYFD will continue to partner with communities by promoting systems of care in an effort to successfully address the identified needs of children, youth and families and support the agencies frontline staff with the services and resources beneficial to the children, youth and families they serve.

The CBCAP funds will continue to be used to provide training to CBCAP funded service providers as well as for child maltreatment prevention awareness campaign efforts and family support services. CYFD specifically utilizes CBCAP funds to provide evidence based family support programs for families with children 0-5 utilizing evidence based

and evidence informed parent education curriculum. These programs use the CBCAP Conceptual Framework (attachment 1) as the logic model for providing services. The main purposes of the CBCAP programs are:

- To support community-based efforts to develop, operate, expand, enhance and where appropriate, to network initiatives aimed at the prevention of child abuse and neglect;
- To support networks of coordinated resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect; and
- To foster understanding, appreciation and knowledge of diverse populations in order to effectively prevent and treat child abuse and neglect.

#### **ACTIONS TO ADVOCATE FOR SYSTEMIC CHANGE**

#### **Annual Report Narrative:**

The New Mexico Children, Youth and Families Department has been actively engaged in statewide systemic change efforts throughout the years utilizing various activities and strategies. For example, a shared goal amongst State of New Mexico employees is the provision of coordinated support services focused on and designed to strengthen families in order to help create a better quality of life for the children and youth living in the state. This is achieved through shared responsibilities among state employees which include: the provision of training and technical assistance to community residents working in funded agencies and organizations; the evaluation of programs; assistance aimed at enhancing service delivery and outcomes for families; and a desire to meet the needs of families seeking assistance. Furthermore, family representation and active participation is sought at meetings of boards, commissions and task forces, on local community organizations and within agency advisory boards.

Some examples of this type of collaboration and partnering include the participation of stakeholders in the third round of the Child and Family Services Review (CFSR) statewide self-assessment. The stakeholders included youth, families, foster and adoptive families, tribal partners, community based organizations and service providers, judicial system partners, local and state government entities and CYFD staff from every level of the organization. The CFSR statewide assessment focused on the topics of child and youth safety, permanency and well-being as well as other systemic factors that affect children, youth and their families.

In 2009, New Mexico was awarded a federal implementation center project to develop a Child Welfare Practice Model. Through the collaborative effort with the Mountains and Plains Child Welfare Implementation Center (MPCWIC), Protective Services Division established, launched and implemented the Piñon Project. As a result, PS has successfully established a practice model that creates the basic framework for how PS staff engages and works together with children, youth, families and stakeholders to create an environment that focuses on the safety, permanency and well-being of

children and youth. Although funding through MPCWIC ended September 30, 2012, the Practice Model has been scaled out to all counties statewide and is integrated into the daily work of the Protective Services Division staff.

Also in 2009, CYFD was awarded a six year SAMHSA grant focused on building networks of community services and supports that can be easily navigated and "wrapped around" children, youth and their families in an effort to identify and meet their needs in a more streamlined and effective manner. Many of the agency's children and youth with behavioral health challenges are involved with multiple public and private systems such as the educational system, behavioral health system, juvenile justice and protective services; however, services and supports have often lacked coordination. As a result, the services and supports in place were inconsistent or even in conflict at times. The primary project goals have been and continue to be to:

- ➤ Embed Systems of Care (SOC) philosophies in the statewide children's behavioral health system;
- ➤ Foster cross-agency collaboration through the project steering committee and Local Collaborative SOC Subcommittees;
- Expand community capacity to serve children and adolescents with SEDs and their families;
- > Enhance the State's behavioral health workforce; and
- Integrate a Continuous Quality Improvement (CQI) framework.

During the initial phase, the New Mexico System of Care (NMSOC) project management team completed its planning phase and began service implementation in two of the three anchor sites. Through the CYFD Office of Community Outreach and Behavioral Health Programs, NMSOC's efforts to expand capacity and sustain beyond the grant as well as support local communities in the development of a Community of Care for serving and supporting children, youth and their families included providing local communities with this framework for a Community of Care and the self-assessment tool to determine their current stage of development of a Community of Care as well as hosting summits to provide training, tools and experiences designed to support communities at various stages of development and providing no-cost follow-up training and technical assistance to communities who commit to further development of their Community of Care.

During subsequent phases of the project, the SOC grant has supported the development and implementation of a New Mexico practice model through the Communities of Care Framework "NM Wraparound CARES (Comprehensive, Accessible, Responsive, Effective, and Strengths-Based)." The Wraparound CARES process is committed to keeping youth and children with their families and in their communities and to provide youth and family-driven care in a coordinated, team-based manner. In this model, it is the youth and family who identify team members, create their family team and lead the development of plans of care. Teams are facilitated by members specifically trained in this work such as a protective services caseworker, a juvenile justice probation officer or another service partner. As a result, NMSOC has

been clear to define a "Community of Care" not as an agency or program but rather as a network of services, supports and relationships built by committed people who have a stake in improving outcomes for children and youth with serious behavioral health challenges.

In addition, a Certified Family Specialist initiative is being rolled out through the NMSOC. The Certified Family Specialist is a peer to the parent that is being supported and is parenting or has parented a child who is experiencing emotional, behavioral, mental health and/or substance use disorders and is able to convey an understanding of the experience. The focus of this service is to empower parents and caregivers as well as to provide assistance and support to families who are navigating multiple agencies and systems. This is a strengths based initiative and the goal of services is to:

- promote wellness, trust and hope;
- increase communication and informed decision making and self-determination;
- · identify and develop advocacy skills; and
- increase access to community resources and the usual of formal and natural supports in order to reduce isolation family members experience and the stigma of emotional, behavioral, mental health and substance use disorders.

CYFD also collaborated with the New Mexico Human Services Department in the Core Service Agency (CSA) Implementation. Every county has a CSA which Protective Services Division staff refers children and youth to for assessments prior to adjudication so that the needs of children and youth in custody have their needs identified early and the provision of services is not unduly delayed.

As noted previously, CYFD Protective Services Division administers the Title IV-B Part 2 Promoting Safe and Stable Families (PSSF) Program. The PSSF Program is focused on assisting and supporting families within the state who are in crisis or at risk of child maltreatment. These programs are specifically focused on providing support services in communities throughout the state. The continuum of services funded through the Title IV-B Part 2 PSSF Program are complemented by other services provided to families by CYFD funded with state general funds and through other sources. Protective Services Division earmarks 20% of the PSSF Services for each of the four allowable services: Family Support Services, Family Preservation Services, Time-Limited Reunification Support Services and Adoption Promotion and Support Services. Additionally, 10% is earmarked for administrative costs which include the salaries and operating costs of program managers who are administering the delivery of these services statewide. The remaining 10% is earmarked for planning, training and evaluation of the community based services. An RFP for these services was issued in 2012 and CYFD subsequently entered into four year contracts with community based providers throughout the state for the delivery of the services. CYFD provides guarterly training to all contract providers as well as technical assistance as needed. In addition, the service providers are afforded the opportunity to attend CYFD sponsored trainings and meetings to further strengthen and enhance collaboration and service delivery.

Through the PSSF Program, CYFD provides Family Support Services (FSS) to families with a children age 0-5 who are at risk of abuse and neglect and to foster or adoptive families who have been referred by CYFD and have one or more foster or adoptive children age 0-18 placed in their home using Title IV-B Part II funds. Family Support Services are designed to strengthen foster and adoptive families and provide support to ensure placement stability. FSS is also designed to strengthen and support families in an effort to reduce the risk of child maltreatment. These services are delivered through Family Support Service contractors that provide services throughout the state in the following counties: Bernalillo, Chaves, Doña Ana, and Lea. This service is a strengthsbased support service provided to families and includes many components such as in home visits, evidence based parent education, information and referral, crisis intervention, life skills development, transportation, education and training and mentoring. FSS contractors also actively seek to increase the general knowledge within their community about child abuse and neglect prevention through quarterly events with particular emphasis in April which they host a child abuse prevention community event in collaboration with CYFD Protective Services Division staff. In addition, FSS contract agencies implement activities and training to enhance parent participation and leadership within their FSS program.

Family Preservation Services are non-legal intervention services that are designed to enhance the family's ability to function independently of Protective Services, improve safety for the children, create stability within the home and develop healthy and supportive ongoing community relationships by increasing parental protective capacities. Family Preservation Services are provided for a maximum of 180 days. Family Preservation contract providers have been trained in the CYFD In-Home Services model which is an integrated, comprehensive approach to strengthening and preserving families who are at risk for or who are currently experiencing problems in family functioning. Family Preservation Services are provided using IV-B funds in the following counties: Bernalillo, Chaves, Doña Ana, and Lea. Additionally, CYFD delivers In-Home Services in 21 of 33 counties throughout the state through direct service from CYFD Protective Services Division staff. IHS is provided to families with children assessed to be conditionally safe and the risk of child maltreatment has been determined to be moderate or high; or the child has been determined to be unsafe and the risk of child maltreatment has been determined to be very low, low, moderate or high. Families whose children are in the legal custody of CYFD Protective Services (PS) are ineligible for IHS; however, there is no limit to the number of IHS interventions per family.

When a child cannot be safely maintained in the home and the child enters foster care, time-limited reunification services are offered through community based providers in the following counties of the state: Bernalillo, Doña Ana, Lea, and Sandoval. Time Limited Reunification (TLR) services are time limited intensive home based programs to support families in reunifying their children in CYFD custody with their parents by assisting parents with their court ordered treatment plan and working intensely with parents and

CYFD Protective Services Division to assist in reunifying families in an expedited timeframe (no more than four months from the date of referral) and within 12 months of the most recent removal from the home. TLR services are available to families twenty-four hours a day, seven days a week and the services are multi-faceted in nature. TLR services may include safety planning and monitoring, increasing parent's protective capacities, case management services, visitation planning and coaching, transportation, skill building, support and education in order to increase parental knowledge as well as reduce the risk of child abuse and/or neglect. TLR services are inclusive of the birth family, foster parents, children and youth when appropriate for their inclusion, PS staff and other community service providers who are interested and deemed appropriate for inclusion. In addition, CYFD utilizes ancillary support services provided by other program areas and other state agencies such as childcare, substance abuse intervention, mental health services, domestic violence services and employment assistance.

CYFD has continued to offer mediation services for biological and pre-adoptive families who are considering open adoption and Post-Adoption Contract Agreements. This service is funded through Title IV-B funds and is provided by the Administrative Office of the Courts. The service is available in every county of the state. CYFD also provides post-decree services to all families who have an adopted child either through CYFD or private adoption. These services are provided through a statewide contract with an agency that has developed community based family contacts in every region of the state and provides services in every county. These services include family networking activities, information, education, support, training, warm line, adoptive family mentors and parent leadership activities.

Despite the continued efforts made by CYFD to strengthen and improve the system as well as the notable changes that have been implemented towards that effort, the agency also recognizes that there will always be more that can be done to prevent child maltreatment within the state. In FY 2013, approximately 32,930 reports of child maltreatment were made to SCI. Of those, 18,179 were screened in and investigated with 7,788 resulting in a substantiation of child abuse and/or neglect. Of the total substantiated reports of child maltreatment, 74.7% were for physical neglect, 22.7% for physical abuse, and 2.6% for sexual abuse. Also in FY 2013, the average number of children in care was 1,779. In FY 2014, approximately 35,856 reports of child maltreatment were made to SCI. Of those, 21,129 were screened in and investigated with 5,531 resulting in a substantiation of child abuse and/or neglect with the percentage of substantiated reports of child maltreatment remaining fairly consistent for physical neglect, physical abuse, and sexual abuse from the prior year. In addition, the average number of children in care during FY 2014 was 1,872 which was an increase from the prior fiscal year. CYFD continues to partner with communities to provide prevention services to enhance families' abilities to provide safety, permanency and well-being for their children.

## **Application Narrative:**

During this next fiscal year, CYFD will continue to collaborate with stakeholders to support and enhance the service array as well as to develop resources for the children, youth and families of New Mexico. Though there have been many notable accomplishments achieved by CYFD in the past year, the Department remains committed to the on-going efforts necessary to improve the programs and services that it operates and administers.

In the area of improving the Child Welfare System in New Mexico, PSD will continue our work by:

- reviewing and revising division policies and procedures as necessary to ensure they are reflective of the agency's and divisions vision, mission and values;
- identifying training and skills development needs to support agency staff as well as CYFD partners and system stakeholders in the delivery of services; and
- continuing to partner with our stakeholders such as parents, foster parents, foster & emancipated youth, the Corinne Wolfe Children's Law Center, judges, respondent attorneys, youth attorneys, Guardians ad Litem, the Administrative Office of the Courts, Court Appointed Special Advocates, Citizen's Review Board, educational and tribal partners, Title IV-B Service providers and sister agencies.

PSD will also continue to utilize the Adaptive Leadership framework as one of its primary tools for implementing and fully integrating system change initiatives throughout the division. Through the "Office Hours" process, PS staff is provided with the opportunity to identify and consider which practices are limiting progress and which practices are promoting progress towards achieving Protective Service's mission. The Adaptive Leadership approach to system change also helps staff recognize the difference between technical and adaptive challenges and that the response to each is distinctly different. Furthermore, it encourages and challenges staff to critically evaluate the status quo, look at personal, division and agency challenges in a proactive manner and ultimately asks staff to adapt in a meaningful and effective way within the highly dynamic environment of the child welfare system.

In the area of CBCAP, CYFD will continue its efforts towards strengthening and supporting the state's prevention network and helping to ensure that prevention is incorporated into plans, programming and initiatives. CYFD will continue to work with the UNMH Child Abuse Prevention Program, New Mexico's Prevention Child Abuse Chapter, to partner and collaborate around delivery of community based preventative services. CYFD also strives to leverage the family support programs funded by CBCAP to continue to strengthen the prevention network in those communities that are funded through partnering with Promoting Safe and Stable providers, Children's Trust Fund providers, home visiting providers and early childhood providers. In addition, CBCAP

will be involved in the CFSP planning process, the IV-B planning process and the home visiting process.

Below is a list of the priority systems change efforts that CBCAP Lead Agencies are involved in:

*IV-B Plan, CFSP, APSR* - The Protective Services Division within CYFD continues to serve as designated state child welfare agency. PSD is charged with oversight of the CFSP, APSR and IV-B Plan and the responsibility of administering the programs funded by the CBCAP grant and the IV-B Subpart II is within the same Bureau. Bureau staff is actively involved in writing and executing these plans which sets the stage for the CFSP, APSR, IV-B Plan, round three of CFSR and PIP and remains centered on family focused, child and youth centered, strengths based, culturally competent and trauma informed practice. The agency will continue to use these plans to guide practice throughout the entire system and will continue to work diligently to ensure that CBCAP and prevention activities are enhanced.

Early Childhood efforts – CYFD continues its effort to improve the quality and accessibility of early childhood care and education programs statewide. This includes efforts to increase statewide access to Pre-K programs which provide developmentally appropriate activities and focus on school readiness. Through the Race to the Top/Early Learning Challenge Fund award, the Early Childhood Services Division of CYFD will continue to assist in the agency's efforts to reform and align early childhood learning systems so that all children, especially those most at risk for school failure, are prepared for kindergarten. CBCAP, Home Visiting, Promoting Safe and Stable programs and the Children's Trust Fund has and will continue to partner to provide training and technical assistance to providers across all program areas located throughout the state in the Circle of Security (COS) parent education curriculum. In addition to the training, monthly networking activities will also remain available to ensure collaboration and support amongst these programs regarding COS.

Home Visiting - The State of New Mexico continues to increase its investment in Home Visiting Services. CYFD serves in a key role in providing core funding for these services and will continue to explore the availability of home visiting program support within all Medicaid programs and specifically within the Medicaid managed care organizations (MCOs). Since prevention as an effort to enhance well-being and minimize what are often more expensive "downstream" health costs is one of the basic tenets of managed care, Home Visiting is a particularly valuable service towards this effort and specifically in preventing child abuse and neglect. CYFD will continue to increase the percentage of mothers participating in home visiting who are identified as having symptoms of post-partum needs and will continue its commitment and efforts to train providers on utilizing the Edinburgh Postpartum Depression Screen in order to identify those mothers who might benefit from home visiting services. CYFD is committed to providing home visiting to parents and hopes to encourage those with positive screens to seek more formal services. In addition to training providers, CYFD

will continue to provide training to any home visitor interested in recognizing when a mother may be stressed and to provide the supports correlated with a reduction in stress.

CBCAP, Home Visiting and Promoting Safe and Stable programs will also continue their collaborative efforts to provide training and technical assistance to providers across all program areas located throughout the state the Circle of Security parent education curriculum. Networking activities will also remain available to ensure collaboration and support amongst these programs.

**Statewide prevention plan efforts** - CYFD continues to make prevention planning a focus of service delivery and its service array. CYFD partners with multiple agencies to ensure that there is a statewide and comprehensive prevention plan and will continue to collaborate and coordinate efforts with the Department of Health, the Children's Trust Fund of New Mexico and UNMH CAPP. CYFD is divided into five regions and each region is tasked with strategically addressing prevention activities and efforts by working with the regional/statewide behavioral health collaborative, community based agencies and organizations and other key stakeholders.

**Domestic Violence** - CYFD remains the lead agency for the state of New Mexico in providing services to address the needs of those families affected by Domestic Violence. CYFD is committed to partnering with the Domestic Violence Coalition, HSD and community based agencies to continue to improve its approach to domestic violence services offered to families who have been affected by domestic violence. CYFD will provide training to all CBCAP, PSSF and Children's Trust Fund providers in topics related to family violence.

**Tribal Programs** - CYFD remains firmly committed to working collaboratively with the 22 tribes located in New Mexico, as well as those tribes whose members come into the care of the agency. Through the Native American Liaison Program, CYFD has collaborated and consulted with tribes to identify barriers to service delivery, serve as a conduit for the major issues and concerns expressed by the tribes regarding services for children and families and to provide a bridge with the tribal governments to support and foster a cooperative working relationship with the state. CYFD also continues to identify compliance with the Indian Child Welfare Act (ICWA) as a high priority area for PS thus ICWA requirements are included in PSD policies which includes an extensive section in Legal Services as well as specific references and requirements within Investigation, Permanency Planning and Adoption Act Regulations. The New Mexico Children's Code also incorporates the provisions of ICWA into state law and the 90 minute E-learning ICWA module is required for all new employees and all existing staff is encouraged to participate in the training. This training includes a historical background of the ICWA and describes the requirements as well as the practice implications of those requirements for PSD field staff when working with an ICWA eligible child or youth. In addition to staff training, CYFD continues to work to ensure

compliance with ICWA through supervision, Quality Assurance reviews and ongoing meetings with tribal and Bureau of Indian Affairs representatives.

The following eleven (11) tribes and pueblos have Title IV-E Joint Powers Agreements (JPAs) with the State of New Mexico: Navajo Nation, Jicarilla Apache Tribe, and Taos, Picuris, Zuni, Acoma, Santa Ana, Cochiti, Nambe, Santa Clara and Pojoaque Pueblos which allows tribal social services to be reimbursed with federal Title IV-E funds for the care and support of eligible children in foster care in tribal custody. CYFD provides the required match for those federal funds and provides assistance to tribes with eligibility determinations as well as training and technical assistance on IV-E requirements in order to increase their utilization of IV-E funds.

In addition, American Indian children in the custody of the state are eligible for and receive the same services under the Chafee Foster Care Independence Program and the Education and Training Voucher program as other children in the custody of the state. The PSD's Youth Services Bureau Youth Transition Specialists will work with tribal youth to assist them in accessing these services and benefits and PSD staff will continue to meet with BIA Social Services and tribal representatives to discuss New Mexico's Chafee Plan and consider ways to improve access to Chafee/ETV services for tribal youth.

As the lead agency for the CBCAP Grant, CYFD will continue to collaborate with its partners and system stakeholders to advocate for statewide systemic change with the focus remaining on supporting those community based efforts geared towards the prevention of child maltreatment. CYFD will also continue to work with its partners to advocate for coordinated support services that strengthen families and create better lives for children and youth living within the state of New Mexico. CYFD remains committed to working with its partners to support and enhance current programs as well as expand new programs for families and increase availability of family support services to all families. In addition, the department will continue to work on those activities outlined in the CBCAP conceptual framework.

#### **COLLABORATION AND COORDINATION**

#### **Annual Report Narrative**

CYFD continues to remain committed in its efforts to making positive changes in the provision of services. In order to impact the provision of child maltreatment prevention programs and services, CYFD must partner with staff members from local and federal agencies, consumers and community based agencies and organizations. CYFD also strives to strengthen existing family-support programs, reduce the incidence of child abuse and neglect and increase the development and accessibility of new family-support programs and services throughout New Mexico. CYFD has consistently worked with other state agencies and community based service organizations to coordinate programs and projects in an effort to achieve these goals. In an effort to do, program information about how services are identified and the delivery of services can be

streamlined, how barriers to service delivery and accessibility are addressed and how existing partnerships can be strengthened and new partnerships developed are openly shared across agencies.

CBCAP grant funds were focused on improving the quality and provision of services as well as resources available to families that are aimed at preventing and reducing the incidence of child abuse and neglect in New Mexico. Employees of CYFD provide assistance and support to the current family-support programs operating within the state, serving on task force committees, inter-agency planning groups and program advisory boards. In addition, CYFD and the CBCAP Lead partnered and collaborated with the entities listed below to continue strengthening and supporting programs, projects, initiatives and services provided throughout New Mexico:

- Statewide Child Welfare System
- Public health/maternal health/child health
- Education and special education
- Early Childhood Comprehensive Systems (ECCS)
- Child Care Programs and Services
- Head Start Programs
- Pre-K Programs
- Home Visiting Programs
- Infant/Early Childhood Mental Health Programs and Services
- Early Intervention Programs through IDEA, Part C
- Child Support Enforcement Access & Visitation Programs
- Temporary Assistance to Needy Families (TANF)
- Tribal Government

#### **Application Narrative**

The CBCAP Lead plan to continue the collaboration and coordination efforts with the agencies listed below during the upcoming year towards the overall goal of continued improvement of the quality and accessibility of services delivered to families in New Mexico:

- Statewide Child Welfare System
- Public health/maternal health/child health
- Education and special education

- Early Childhood Comprehensive Systems (ECCS)
- Child Care Programs and Services
- Head Start Programs
- Pre-K Programs
- Home Visiting Programs
- Infant/Early Childhood Mental Health Programs
- Early Intervention Programs through IDEA, Part C
- Child Support Enforcement Access & Visitation Programs
- Temporary Assistance to Needy Families (TANF)
- Tribal Government

CYFD will continue to utilize CBCAP funds to partner with community based organization to deliver child maltreatment prevention services through family support services programs. CYFD is currently in the process of procuring family support service contracts through a formal request for proposal as the current contracts are scheduled to terminate at the end of the state fiscal year. CYFD will work with the contracted services providers as follows:

- Arrange for and provide training for all CBCAP funded family support resource centers staff and mentors on topics such as child development, child maltreatment prevention, sexual health and contraception and identification of domestic violence.
- Arrange for and provide training to all program participants on child development, prevention of child abuse and neglect, anger management, prevention of domestic violence, sexual health and contraception, and other related topics.
- Ensure the implementation of a peer review assessment program.
- Provide technical assistance and training for personnel, site coordinators and family support mentors working in the family support service centers.
- Provide consultation, in-service education, legislative presentations and community workshops about the family support service programs around the State.
- Provide educational/training programs and classes for all parents participating in the family support service programs in the State.

Contracted services will also continue to be provided in the following areas through the Children's Trust Fund:

- Building a community of care for young children and their families to reduce isolation, facilitate understanding of child development and build parent resiliency in order to decrease the likelihood of child abuse & neglect. It is anticipated that service participants will have an increased understanding of the nature of the parent/child attachment, its importance in the care and safety of children and how to build a basis for ongoing positive interactions.
- Development of a screening tool and referral protocol for primary care givers to use to identify at-risk children and link them to early childhood/infant mental health services and to reduce the risk factors associated with child abuse and neglect for children ages birth to 6 years of age by providing interventions that improve the parent-child relationship and the primary caregiver's reflective capacity.
- Provide support to immigrant fathers' through culturally appropriate group support sessions in an effort to help prevent child abuse and neglect by improving protective factors and preparing families to assist their children succeed developmentally and academically.
- Provide educational activities and peer support groups that promote the parent/child bond and attachment in an effort to reduce the incidence of child abuse and neglect.
- Provide free, immediate, culturally sensitive and comprehensive services along with education and a primary prevention curriculum in an effort to meet the needs of the sexual assault survivor.

#### **CRITERIA FOR FUNDED PROGRAMS**

#### Annual Report Narrative

New Mexico completed the CFSR statewide self-assessment in 2014. In order to complete a comprehensive assessment, the following seven systemic factors were evaluated:

- Service Array
- Agency Responsiveness to the Community
- Staff Training
- Foster and Adoptive Parent Licensing, Recruitment and Retention
- Quality Assurance System
- Case Reviews in the Legal System
- Statewide Information Systems

Utilizing continuous quality improvement principles, PSD conducted stakeholder meetings to obtain information regarding the strengths, challenges and barriers as well as ideas for system improvement. In addition, Quality Assurance and SACWIS data was utilized to frame the discussions and helped to shape the agency's CFSP and plan for improvement. CYFD identified the following four goals as part of its plan for improvement:

- improve placement stability for children in PSD custody;
- decrease repeat maltreatment;
- improve assessment of parents and legal guardians needs, including absent and incarcerated parents or guardians, and address the lack of provision of services to meet those needs; and
- increase recruitment and retention of PSD field staff.

During this reporting period, CBCAP funds were largely utilized to fund evidence based family support service programs. These programs provide direct services to parents of children 0-5 and include life skills assessment and development, parenting education, home visiting and groups for participants where networking, skill building and parent leadership opportunities are provided to parents. In addition, a portion of the funds was utilized to provide program development, training in the Circle of Security parent education curriculum and a bilingual prevention awareness campaign that focused on the topics of safe sleep, shaken baby and not leaving children in an unattended car, particularly during the hotter months of the year.

#### **Application Narrative**

CYFD will continue to serve families who are at high risk of child maltreatment who are parenting a child between the ages of birth to 5 through family support programs utilizing CBCAP funds. CYFD will continue to fund these programs for prevention services. The goals of these programs will be to initiate and strengthen evidence-based programs aimed at primary and secondary child abuse and neglect prevention. Primary prevention programs are programs comprised of activities or services directed to the general population, to the community at large and to families or children to prevent child maltreatment. Secondary prevention programs are programs comprised of activities or services directed at identifiable populations at high risk of abusing or neglecting their children unless specialized services are provided. These programs intervene prior to or during the early warning signs of family stressors that can lead to child abuse and neglect and include:

- education and early, comprehensive support services to assist parents in acquiring parenting skills;
- reduction of inappropriate or unrealistic expectations parents have of children by increasing knowledge of child development and appropriate child rearing/child management skills, and by enhancing parent/child interaction, communication and bonding;

- increase parent's capacity to cope with added stress when caring for children with special needs;
- develop self-help groups and other needed services to prevent family dysfunction, isolation, and to increase peer support;
- utilize early developmental screening of children to assess the needs of children and to identify the types of supports to be provided; and
- provide outreach services, community referral services, and follow-up services as part of prevention program.

The desired high level outcome is the reduction of child abuse and neglect in New Mexico and the interim outcomes include:

- · improved parent-child interaction;
- improved parenting knowledge and behavior;
- increased parental knowledge of and ability to meet child's developmental needs and ensure safety; and
- increased general knowledge within the community of abuse/neglect indicators, community resources, best practices and current issues.

Approximately 65% of the CBCAP funding will be used to support these family support programs, 25% on a statewide prevention awareness campaign and the remaining CBCAP funds for program development, training, evaluation and mandatory attendance at the national conference.

#### **OUTREACH ACTIVITIES FOR SPECIAL POPULATIONS**

#### **Annual Report Narrative**

New Mexico is a large state geographically which includes sparsely populated rural or frontier areas and many of the programs listed below in the "Inventory of Services and Support" are available only in the large or medium-sized areas of the state with outreach and referral services offered in rural communities. In an effort to fully assess child and family needs and the availability and accessibility of supports and services to meet those needs, agency staff work with local community based service providers, agencies and organizations, local faith based communities and organizations, schools, public health providers and other government entities to identify gaps in services or programs in their communities. Some resource programs that are located near a city or larger communities provide services to rural or frontier areas with referrals to local agencies. Due to the locations of rural areas, several of the services listed in the "Inventory of Services and Support" do not have a sufficient number of consumers to remain functional or operational. Since federal funding is based in-part on target population size, funds available for many programs do not provide coverage for the

expenses needed to support the provision of comprehensive services in the state's rural and frontier areas. All services, however, are available to families using referral services that are centrally located in the larger communities of the state.

#### Inventory of Available Services and Support Activities

- For children with disabilities, a network of childcare facilities has been developed in some childcare centers which are licensed and monitored by the State. These centers provide assistance to other facilities making services available and accessible to disabled children.
- Respite care is provided by the Protective Services Division for foster and adoptive parents and respite services are funded by Department of Health in some larger communities around the State.
- Crisis nurseries are operational in some cities in the State; however, these services are not available in all communities, particularly in rural areas.
- Crisis counseling and support services are available on a statewide basis.
- Community-Based Family-Support Centers, primarily serving adolescent teen parents, are funded at the community-based school district level.
- Many community centers, operated by the Public Health Offices (Department of Health), Income Support Offices (Human Services Department), or One-Stop Employment Offices (Department of Workforce Solutions) provide information and resource referrals to adolescents and young parents.
- The NM Mortgage Finance Authority administers both state and federal programs that assist adults and children experiencing homelessness or at risk of homelessness.
- Programs and services funded by the CYFD Child Care Services Bureau; offices
  of the Child Care Services Bureau are located statewide with allocations for
  childcare openings provided to each county and community within New Mexico.
- New Mexico also operates Head Start and Early Head Start Programs. These
  programs provide services to many communities and are available in most Native
  American communities.
- Programs providing parenting skills development or training are available to families through public and private sponsorships. The need and importance of improved parenting skills to increase awareness and child abuse and neglect prevention is recognized and underscored throughout the State. Consequently, parent education opportunities are offered through churches, schools, childcare centers, universities and community colleges, to incarcerated youth in juvenile detention facilities and home visitation programs in all areas of New Mexico.

 Early childhood development classes and seminars are sponsored statewide in many communities and peer counseling services are offered by many local community hospitals, centers or agencies.

Through the state's Children's Cabinet, all state government agencies support the efforts made statewide that encourage and support effective partnerships amongst community and State agencies with the goal of increasing the availability of resource referrals and the accessibility of support services and programs to children and their families in new and innovative ways.

Outreach activities are also available to members of the following special populations: families experiencing drug and alcohol use disorders to include parents with an infant born drug affected and/or with fetal alcohol syndrome; children with disabilities; children with a disabled parent; members of Native American communities; and families with incarcerated family members. As the lead agency, CYFD requires all sub-grantees to provide services to all client populations requiring specialized programming. The Family Support Services program provides services to these specialized populations as this population constitutes a large percent of the families served in New Mexico. Specialized populations targeted for inclusion are those families affected by substance use disorders, families with children who have disabilities, members of Native American communities and families with members in prison or detention facilities.

# **Application Narrative**

CYFD plans to continue many of the activities listed above. CYFD anticipates using approximately 65% of the CBCAP funding to provide family support service programs located in various communities throughout the state. CYFD continues to emphasize the importance of reaching out to those families who are underserved including racial and ethnic minorities, children and adults with disabilities, homeless families and those at risk of homelessness, unaccompanied homeless youth and adult former victims of child maltreatment and/or domestic violence. The programs will be charged with ensuring they are serving all populations identified above. CYFD will continue to work with providers on strategic planning as a method of assisting them in their efforts to reach out to and serve these target populations within their community.

In addition to providing direct services, CYFD will be using 10% of CBCAP funding to continue to increase the quality of services delivered in New Mexico through program development, training, evaluation and attendance at the national meeting. CYFD has contracted with New Mexico State University (NMSU) to provide training to the CBCAP grantees and a small portion of the grant will be utilized to enhance the statewide child abuse prevention campaign in collaboration with the other prevention partners in the state.

#### PLAN FOR PARENT LEADERSHIP AND FAMILY INVOLVEMENT

#### **Annual Report Narrative**

During the reporting period, the CBCAP funding was used to fund family support service programs throughout the state and these programs solicited involvement of the parents in the development and enhancement of the services and activities provided through the community based programs. Unfortunately, parent leadership has continued to be an on-going challenge. Despite active and concerted efforts to establish an active and functioning parent involvement/leadership program, all family support service programs have had difficulties achieving the goal. In an effort to engage parents and obtain their feedback and input, surveys are administered to parents receiving CBCAP funded services either through the family support service programs twice annually. The overall goal is to then utilize their input in the development of the activities and services delivered through the programs. These surveys also ask the parents to evaluate the specific services they are receiving and then this feedback is used by the funded programs in their program review and continuous quality improvement process.

#### **Application Narrative**

During the upcoming grant year, CYFD will continue its efforts towards engaging parents and developing active parent leadership councils who can advise CYFD on the services being provided using the CBCAP grant. CYFD will continue to work with parents to get their input into the community based programs being funded by CBCAP and will focus on assisting in the creation of local parent advisory councils who can be involved in the local collaborative to ensure parent participation across all community based mental and behavioral health services being delivered. The Protective Services Division Practice Model that has been implemented throughout the state and integrated into daily practice across all service areas promotes the inclusion of parents, foster parents, community based service providers, and other partners in the ongoing planning and implementation of services. Assistance with the development of stronger parent leadership within our present program structure does, however, continue to be needed.

The current RFP and the subsequent contracts procured through that RFP will continue to have language that requires parent leadership, parent involvement and partnership. CYFD also added language to the most recent PSSF Family Support Services RFP and the contracts procured through that RFP which supports parent advisory councils. Although it is anticipated that this requirement will help to encourage and promote the development of a statewide structure which supports parent advisory councils, CYFD also recognizes that parent leadership continues to be a challenge and an area needing improvement.

# PLAN FOR SUPPORT, TRAINING, TECHNICAL ASSISTANCE AND EVALUATION ASSISTANCE

# **Annual Report Narrative**

All CBCAP funded agency staff members are required to attend quarterly meetings and trainings that are facilitated and/or approved by the CBCAP program manager. The focus of these meetings and trainings are on program improvement through information sharing, education, skills development and peer supports. These meetings provide an opportunity for agency staff members to listen to and discuss common problems and solutions with one another. These meetings also provide a format for receiving targeted education, training and resources not otherwise available to CBCAP funded agency staff. For example, the materials provided by FRIENDS continue to be important and useful resources to the contracted agency staff. Technical assistance has focused on designing quarterly community events and activities which are geared towards increasing awareness of child abuse and neglect and emphasize the importance of community engagement in the prevention of child maltreatment. CYFD Protective Services Division, in collaboration with the other CYFD divisions, also continues to focus training and technical assistance efforts on the Circle of Security (COS) Parent education curriculum. CYFD Protective Services Division also continued to partner with New Mexico State University to coordinate training for CBCAP providers.

As noted previously, CYFD Early Childhood Services Division oversees the Child Care Services Bureau which administers the Child Care and Development Fund in addition to the Child Care Licensing Programs in the State. The Early Childhood Services Division staff has continued to expand the availability of prevention focused resources to parents and service providers, including CBCAP funded agencies, through education, training and literature. The Early Childhood Services Division has also continued to increase statewide training opportunities on the topics of awareness and prevention of child abuse and neglect. The Child Care Services Bureau continues to provide a comprehensive resource and referral system that facilitates and conducts training for providers and parents based on the needs identified for each community.

In addition, the Office of Child Development is tasked with the responsibility of administering licensure requirements as well as policies and procedures for child care and early childhood education. They also provide funding for innovative early childhood programs and conducts a 45-hour entry-level "Foundations in Early Care, Education and Family-support" training course. The course is offered free of charge to any local community based program and is delivered by a trained facilitator. Training is also provided to parents, caregivers and service providers on the skills needed to care for children safely and teaches participants how to cope with everyday demands in a healthy manner. In addition, the Child Care Licensing Bureau provides statewide training and technical assistance focused on creating and maintaining safe environments within the childcare centers and facilities.

The CYFD Early Childhood Services Division Family Nutrition Bureau oversees all of the nutrition programs within the state. The bureau conducts an education and training nutrition program focused on current nutrition and health guidelines and information. The trainers from the Family Nutrition Bureau have expertise in training, conference coordination and technical assistance and are an important resource to providers and families throughout New Mexico.

The Children, Youth and Families Department continues to serve as the coordinating agency for the network of statewide family-support programs and continues to collaborate with other state agencies and community based programs to increase the availability of family-support services and resources to all communities. The department also works with foundations, federal grants, community based agencies, private non-profit programs and community members to improve the availability and accessibility of family-support programs to families in need of the services. Although funding is received from federal and state general funds, it is only through collaborative funding and the utilization of all available resources that the network of programs has continued to exist. The staff from all agencies and organizations noted above continued to work together during the reporting year to reduce the incidence of child abuse and neglect among families living in New Mexico.

The following training and/or technical assistance topics conducted during the reporting period:

X	Prevention programs and family support
Χ	Promoting protective factors and reducing risk factors
Χ	Marketing, messaging and public awareness
_	Cultural competence, disproportionality
Χ	Collaboration and partnerships for prevention
	Fiscal leveraging
_	Research on prevention and child maltreatment
Χ	Evidence-based and evidence-informed programs and practices
Χ	Home visiting
_	Evaluation and data management
_	Program monitoring and continuous quality improvement
Χ	Grant reporting requirements
	Other (specify)

## **Application Narrative**

All of the activities included in the above section will be continued during FY2016. During FY2016, the Children, Youth and Families Department will work with CBCAP funded programs to provide programmatic support, educational training, technical assistance and evaluation assistance in order to develop and enhance knowledge about models, methods and interventions that are most effective in the prevention of child abuse and neglect. Programmatic support and educational training will also focus on activities designed to assist in the development, operation, expansion and enhancement of the services and programs offered throughout the state.

Staff from CYFD and other state level agencies as well as members of community based programs and agencies routinely share strategies and techniques for assessing, identifying and implementing current and relevant methods for addressing programmatic problems, challenges and/or critical issues. Education and support programs for agency staff will continue to include topics such as the development of evaluation plans that include both quantitative and qualitative factors.

CYFD will focus on the following items for the CBCAP programs this year:

- Training on enhancing Protective Factors
- Training on implementing and sustaining evidence-based and evidence-informed parent education programs and curricula
- Circle of Security training and peer networking
- Training on peer review program/process
- Program evaluation and data management
- Program monitoring and continuous quality improvement
- Marketing, messaging and public awareness

The development, implementation and support of parent leadership and parent advisory councils continues to be a significant training and technical assistance need. Program evaluation, monitoring and continuous quality improvement are also topics requiring targeted training and technical assistance.

#### **EVALUATION PLANS**

#### **Annual Report Narrative**

A Client Satisfaction Survey questionnaire is issued twice each year within the CBCAP funded programs. Each participant in the family support programs funded through CBCAP is asked to complete the satisfaction survey questionnaire in March and October. One section of the Client Satisfaction Survey questionnaire asks the participant to discuss the positive benefits and outcomes of the program based on individual needs. It also asks the participant to discuss any negative aspects of the

program and/or their experience with the program. In addition, program participants are asked to identify unmet needs or services within the program. When completed, survey responses have been positive overall but individual programs have also received useful feedback about services and concerns regarding staff. The use of the client satisfaction surveys has provided important information to agency staff and has served as a useful tool for clients to communicate their concerns in a confidential manner. Staff has indicated that the information gathered through the surveys provide useful feedback as well as suggestions for and new ideas for program improvement and enhancement.

The program manager, along with other CYFD staff, provides technical assistance as requested or needed to CBCAP funded agencies with an emphasis placed on educating contract staff members about the integration and application of evidence-based and evidence-informed programming as well as assistance on how to establish and maintain program goals and the agency's ability to the develop, expand or enhance existing programming to create a stronger, overall program in the community.

#### **Application Narrative**

The family support service contracts that will be procured through the current RFP requires that a Client Satisfaction Survey questionnaire be developed and administered twice each year to all program participants and that completed survey questionnaires are reviewed by agency staff. In addition to this requirement, the client satisfaction surveys will also be reviewed as part of the peer review and/or annual site visit process. Programs will continue to be encouraged to use the data gathered through the client satisfaction surveys as one of the methods for continued practice improvement and enhancement of services delivered through their programs.

Peer reviews of the agencies awarded funding through the current RFP will be conducted every other year at minimum. CYFD believes the peer review process helps strengthen each individual program, builds capacity and helps all contract staff better respond to the specific needs of individual participants as well as their local community.

CYFD is committed to continuous quality improvement and the continuous improvement of long term outcomes related to the safety, permanency and well-being of children. CYFD Protective Services Division Community Services Bureau staff will also provide technical assistance to each contracted agency and staff will visit more frequently if technical assistance and support are requested or needed. The Community Services Bureau program managers consistently monitor contract compliance for each contracted agency utilizing tools such as monthly programmatic and fiscal reports. In addition, site visits of contractors are conducted by CYFD and on-site evaluations consists of a review of the following:

- Agency Capacity
- Program Development
- Outcomes for clients

- Case review of sampled cases
- Interviews with clients served
- Review of client satisfaction surveys

The CBCAP program manager will meet regularly with all community-based, prevention-focused agency staff members to provide programmatic support, training, technical assistance and evaluation assistance. It is anticipated that the majority of the discussion will focus on the agency's ability to further develop, expand or enhance existing programming in order to create a stronger, overall program within the community.

Due to the distinct and diverse population of the state, CYFD recognizes that one of the critical aspects of strong service delivery and the evaluation process is the development, implementation and support of culturally sensitive programming. CYFD will continue to work with community based organizations and service providers to gather feedback from program participants about how service delivery and communication methods can be improved within the context of their ethnic, family and community culture. CYFD and contracted service providers have typically found the information gathered through the client satisfaction surveys to be useful information thus client satisfaction surveys will continue to be required of all CBCAP funded programs as part of the evaluation process.

In addition to site-visits and peer reviews, CYFD staff will meet with providers to provide technical assistance and focus on educating the CBCAP funded program staff about the logic model of CBCAP, evidence-based and evidence-informed programming, the importance of parent leadership, evaluation, and collaboration and coordination with the community.

# PLAN FOR CHILD ABUSE PREVENTION MONTH AND PUBLIC AWARENESS ACTIVITIES IN 2016

#### **Annual Report Narrative**

CYFD has continued to move forward in its efforts for creating a basis for a statewide awareness and prevention campaign. As part of the process, agency staff have identified critical issues impacting child maltreatment and key content concerning those issues in an effort to further develop an overarching campaign theme. In addition, a child abuse and neglect prevention awareness campaign theme and brand were established.

One of the critical aspects of the public awareness campaign is the work each regional manager has engaged in with each of their county office managers and field staff around county based prevention awareness events and activities that are held during child abuse prevention month. For example, come of the regions partnered with their local education and health systems to collaborate and coordinate activities that promote

public awareness regarding child maltreatment within their respective agencies and larger community. During the month of April, every office county office is required to provide at least one community event which highlights child abuse awareness and prevention. During this reporting period, staff from the Bernalillo and Santa Fe counties joined in the nationwide Million March against Child Abuse event for the second consecutive year and partnered with their local CASA, law enforcement, judicial partners, service providers and other community based partners for the event.

The programs funded by the CBCAP grant actively participate in and help coordinate events and activities during the month of April. Child abuse prevention events were facilitated and hosted by members of the family support service programs in local community based centers, educational settings and public community events. In addition, CBCAP funded programs help organize and host several child abuse and neglect prevention and awareness events and activities that are held throughout the year during months other than April. In the communities of each of the CBCAP funded sites, four (4) education programs focusing on the prevention of child maltreatment are required during the fiscal year with the expectation that at least one presentation is conducted during the month of April. These child abuse prevention programs are offered in local community centers and/or other public venues such as schools and are provided free of charge to the community. In addition, education and training activities are provided to the public via exhibits and the distribution of prevention awareness literature that highlights local prevention programs and services.

# **Application Narrative**

During the upcoming year, CYFD will continue to move forward with its efforts towards promoting and fostering a broad child abuse prevention awareness campaign that includes education and positive parenting messages focused on strengthening parents' knowledge of protective factors and early child development. It is anticipated the following activities will take place: full integration of key content on the identified critical topics with the campaign theme and brand; refining the campaign materials used in association with the prevention awareness campaign to ensure it reflects the campaign theme in a way that is most impactful. CYFD will continue to utilize the #SAFE Campaign to encourage individuals throughout the state to report suspected child abuse and/or neglect.

CYFD is also focusing on better integration of prevention awareness activities and media campaigns across all divisions. The agency level strategy will continue to include positive messaging around protective factors, parent involvement in early childhood development, and positive parent/child interactions as an important component of preventing child abuse and neglect. CYFD will also continue collaborating with all of the partners of the state's prevention network to foster and support child abuse and neglect prevention awareness activities. Specifically, CYFD will continue to utilize CBCAP funds to assist the CBCAP and Promoting Safe and Stable Families providers in hosting their community based child abuse and neglect prevention awareness events. CYFD also remains committed to its partnership with the state's Department of Health and the

UNMH-CAPP to increase and expand prevention efforts during the upcoming year through joint planning, coordination and facilitating of events and activities.

#### AREAS FOR TECHNICAL ASSISTANCE

## **Annual Report Narrative**

As the lead agency for the CBCAP grant, CYFD continues its efforts to work with other governmental entities as well as with community based organizations and agencies to support, improve and expand current programs and to increase the availability and accessibility of family support services to parents and children.

CBCAP funded programs as well as the parents, caregivers and family members who participate in the programs are encouraged to provide input and feedback to CYFD about the effectiveness of family-support services and have been provided various opportunities to do so. The establishment of parent leadership and parent advisory councils, however, has continued to be an on-going and significant challenge for programs. In an effort to provide support and networking opportunities for contract providers, the CBCAP and Promoting Safe and Stable Families (PSSF) funded programs have been encouraged to share resources for developing and encouraging parent leadership. Both CBCAP and PSSF funded programs have parent leadership and parent advisory councils incorporated into their contracts and CYFD has made efforts to provide technical assistance to contractor staff specifically regarding parent engagement and leadership.

CYFD recognizes that the provision of parent education and training is a critical aspect of raising awareness about child abuse and neglect and effective ways for preventing child maltreatment. As a result, agency funds were utilized to provide education and training opportunities to childcare staff, medical and mental health professionals, parents and community based service providers statewide. Informational packets, training materials, pamphlets, brochures and program outreach were also provided to professionals and the general public at local community health fairs and public meetings. The CBCAP program manager continued to work with the Children's Trust Fund, Promoting Safe and Stable Families, UNMH CAPP and various councils to strengthen the current child abuse prevention and awareness materials.

Unfortunately, the rural and frontier areas of the state as well as significant challenges due to poverty have made it particularly difficult for families to access services. Often times, the services needed do not exist in a family's home community. Although the services may exist in other locations throughout the state, the distance between communities are often quite significant and families frequently lack transportation and other resources necessary to travel to cities that have more services such as Albuquerque and Las Cruces.

### **Application Narrative**

CYFD will continue its work on all of the activities identified in the section above. The prevention of child abuse and neglect remains at the forefront of the minds of the staff of state departments and agencies as well as community based agencies and organizations who are working throughout the state to prevent and reduce the incidence of child maltreatment. As children, youth and families continue to experience extreme challenges due to mental health and substance use disorders, it has become increasingly necessary to provide family support services, programs and education awareness to parents, caregivers and professionals in innovative and accessible ways.

Opportunities exist within the current funding for on-going collaboration and coordination with our partners to enhance and expand primary and secondary child abuse and neglect prevention programs and services. In the coming year, CYFD will continue to partner with stakeholders to foster and improve existing programs and services in addition to increasing the availability and accessibility of family support services to parents and caregivers in an effort to reduce the incidence of child maltreatment in New Mexico. In order to do so, technical assistance in the area of program improvement through continuous quality improvement will be critical to achieving this goal.

### **Attachment 3: CBCAP Annual Report Numbers Guidelines**

# CBCAP Annual Report Participant Numbers Reporting Guidelines DATA CHARACTERISTICS Table I. Children, Parents/Caregivers and Families Who Received Preventive Direct Services From the State During the Year - FY2014 Community-Based Child Abuse Prevention Program (CBCAP) Grant

### **SUMMARY DATA DEFINITION**

Preventive direct services under CBCAP are beneficial activities aimed at preventing child abuse and neglect. Such activities may be directed at the general population or specific populations identified as being increased risk of abusing or neglecting their children. The primary focus of these activities are to better strengthen and support families by increasing protective factors and reducing the risk factors that can reduce the likelihood of abuse or neglect. The six primary protective factors to be increased by the preventive direct services include: nurturing and attachment, parental resilience, knowledge of parenting and of child and youth development, social connections, concrete supports for parents, and social and emotional competence of children. The primary risk factors that may be addressed include caregiver problems with mental health, substance abuse, and family and community violence, and other negative conditions in the child and family's life situation. Ultimately, the goals of these activities are to increase the strength and stability of families, to increase parents' confidence and competence in their parenting abilities, to afford children a stable and supportive environment and to increase the safety, permanency and well-being of children and families. Such activities do not include information and referral, one-time public education events, or public awareness campaigns.

### **INSTRUCTIONS / ERROR CONDITIONS**

This is the number of children and number of families who received services aimed at preventing child abuse and neglect during the year. These services may be directed at specific populations identified as being at increased risk of becoming abusive or they may provide direct services to the general population. Direct services means that the services must be provided to an individual or family and the <u>planned</u> duration of the services should be more than a one-time event. Some examples of preventative direct services include: voluntary home visiting, parenting programs, parent mutual support, respite care, family resource centers, or other family support programs. If the participant only attends the direct service for one-time and drops out, they should still be counted in this category since the planned duration was for more than one-time.

The data should reflect recipients of direct services funded by the CBCAP program. Direct services funded by CBCAP should reflect the Federal CBCAP funds plus the amount for the State's required 20% match as reflected in their application for this year's funding. (Note: Some States include more than a 20% match in their application). Since a number of States blend the CBCAP with other Federal, State and local funding, these States will need to indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of the total.

The data should not include recipients of information and referral services, one-time public education events, and other public awareness campaigns. The recipients of these activities should be counted <u>separately</u> as part of Public Awareness Activities (see Table III).

The items in this section request data on recipients of preventive direct services under the CBCAP program. Data on the number of children, parents and the number of families receiving these services is requested. The three possibilities are provided since some programs report by "family," "parent/caregiver" and others report by "child". In answering these questions, to the extent possible, you should NOT duplicate your counts.

This is the number of children, parents/caregivers, and families who received services aimed at preventing child abuse and neglect during the year funded by a Community-Based Child Abuse Prevention Program (CBCAP) Grant. The total number should also include the number of adults/children with disabilities who are receiving direct services.

### STATE DATA

Can the State provide data for this item? (Y=Yes, N=No) [ Y ]

Total Number of Children who received preventative direct services: 199

Total Number of Parents/caregivers who received preventative direct services:110

Total Number of Families who received preventative direct services: 110

### STATE COMMENTARY / CONSTRUCTION LOGIC

The State should provide additional information about the numbers being reported above and the primary source of the data. If multiple funding sources are included in the recipient numbers, please indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of that total. If no data is available, the State should provide an explanation why the data cannot reported.

	CBCAP Annual Report Participant Numbers Repor	ting Guidelines
	DATA	CHARACTERISTICS
Table	Children, Parents/Caregivers with Disabilities Who Received Preventive Direct Services	
II.	From the State During the Year - FY2014	
	Community-Based Child Abuse Prevention Program (CBCAP) Grant	

Preventive direct services under CBCAP are beneficial activities aimed at preventing child abuse and neglect. Such activities may be directed at the general population or specific populations identified as being increased risk of abusing or neglecting their children. The primary focus of these activities are to better strengthen and support families by increasing protective factors and reducing the risk factors that can reduce the likelihood of abuse or neglect. The five primary protective factors to be increased by the preventive direct services include: nurturing and attachment, parental resilience, knowledge of parenting and of child and youth development, social connections, concrete supports for parents, and social and emotional competence of children. The primary risk factors that may be addressed include caregiver problems with mental health, substance abuse, and family and community violence, and other negative conditions in the child and family's life situation. Ultimately, the goals of these activities are to increase the strength and stability of families, to increase parents' confidence and competence in their parenting abilities, to afford children a stable and supportive environment and to increase the safety, permanency and well-being of children and families. Such activities do not include information and referral, one-time public education events, or public awareness campaigns.

### **INSTRUCTIONS / ERROR CONDITIONS**

This is the number of children and adults/caregivers with disabilities who received services aimed at preventing child abuse and neglect during the year. These services may be directed at specific populations identified as being at increased risk of becoming abusive or they may provide direct services to the general population. Direct services means that the services must be provided to an individual or family and the <u>planned</u> duration of the services should be more than a one-time event. Some examples of preventative direct services include: voluntary home visiting, parenting programs, parent mutual support, respite care, family resource centers, or other family support programs. If the participant only attends the direct service for one-time and drops out, they should still be counted in this category since the planned duration was for more than one-time.

The data should reflect recipients of direct services funded by the CBCAP program. Direct services funded by CBCAP should reflect the Federal CBCAP funds plus the amount for the State's required 20 percent match as reflected in their application for this year's funding. (Note: Some States include more than a 20 percent match in their application). Since a number of States blend the CBCAP with other Federal, State and local funding, these States will need to indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of the total.

The data should not include recipients of information and referral services, one-time public education events, and other public awareness campaigns. The recipients of these activities should be counted <u>separately</u> as part of Public Awareness Activities (see Table III).

The items in this section request data on recipients (adults/children) of preventive direct services under the CBCAP program who also have a disability. The definition of a person with disability has the same meaning for a child or adult with disability under the Individuals with Disabilities Education Act (IDEA) Parts B and C.

Data on the number of children and/or parents with disabilities receiving these services is requested. The numbers for Table II should be a subset of the total numbers from Table I.

This is the number of children and/or parents/caregivers with disabilities who received direct services aimed at preventing child abuse and neglect during the year funded by a Community-Based Child Abuse Prevention Program (CBCAP) Grant.

### STATE DATA

Can the State provide data for this item? (Y=Yes, N=No) [ N ]

Total Number of Children with disabilities who received preventative direct services: Does not collect this data

Total Number of Parents/ caregivers with disabilities who received preventative direct services: Does not collect this data

### STATE COMMENTARY / CONSTRUCTION LOGIC

The State should provide additional information about the numbers being reported above and the primary source of the data. If multiple funding sources are included in the recipient numbers, please indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of that total. If no data is available, the State should provide an explanation why the data cannot reported.

### **CBCAP Annual Report Participant Numbers Reporting Guidelines** DATA CHARACTERISTICS Table Individuals Who Received Public Awareness or Public Information Activities III. From the State During the Year - FY2014 Community-Based Child Abuse Prevention Program (CBCAP) Grant **SUMMARY DATA DEFINITION**

Public awareness or public education activities under CBCAP are beneficial activities that focus on the healthy and positive development of parents and the promotion of child abuse and neglect prevention activities. These activities can include public education and outreach, information and referral regarding community and social services that are available for families, and public awareness campaigns. Such activities are usually directed at the general population but may also be targeted for specific populations or communities identified at increased risk of abuse or neglect. The primary focus of these activities are to better strengthen and support individuals, families, the community and society by providing information about available family support an prevention resources in the community, increasing the public understanding of the importance of the prevention of child abuse and neglect and increasing community ownership and involvement in prevention activities. Over the long term, it is anticipated that these activities contribute to increasing the safety, permanency and well-being of all children and families.

### **INSTRUCTIONS / ERROR CONDITIONS**

This is the number of individuals received public awareness or public education activities aimed at preventing child abuse and neglect during the year. These services may be directed to the general population or at specific populations identified as being at increased risk of abuse or neglect. These activities may be a one-time event or a series of public education and information sessions. These activities may also include provide information and referral to the community through the telephone, in-person, or through a mail out or website. Some examples of public awareness, public education or information and referral activities include: Blue Ribbon or other Child Abuse Prevention Month campaigns, conducting a public information fair at a local festival, presenting information about child abuse prevention to various agencies or the general public, television or radio ads, newsletter mailing, parent support hotlines, information and referral websites, etc.

The data should reflect the individuals who received or were exposed to the public awareness or public education activities funded by the CBCAP program. Direct services funded by CBCAP should reflect the Federal CBCAP funds plus the amount for the State's required 20 percent match as reflected in their application for this year's funding. (Note: Some States include more than a 20 percent match in their application). Since a number of States blend the CBCAP with other Federal, State and local funding, these States will need to indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of the total.

The items in this section request data on recipients of public awareness or public education activities conducted under the CBCAP program. Data on the number of individuals receiving or exposed to these activities is requested. Since it is difficult to provide an exact number of individuals who may have received the public awareness or public education activities, States are advised to provide the most accurate estimate based on the number of participants that reasonably received these activities. For example, the total can include the number of participants in public education session or workshop, the number of newsletters mailed out, the number of individuals who called a parent support line, the number of people exposed to the television or radio ads, etc.

This is the number of individuals who received public awareness and/or public education activities aimed at preventing child abuse and neglect during the year funded by a Community-Based Child Abuse Prevention Program (CBCAP) Grant.

### STATE DATA

Can the State provide data for this item? (Y=Yes, N=No) [N]

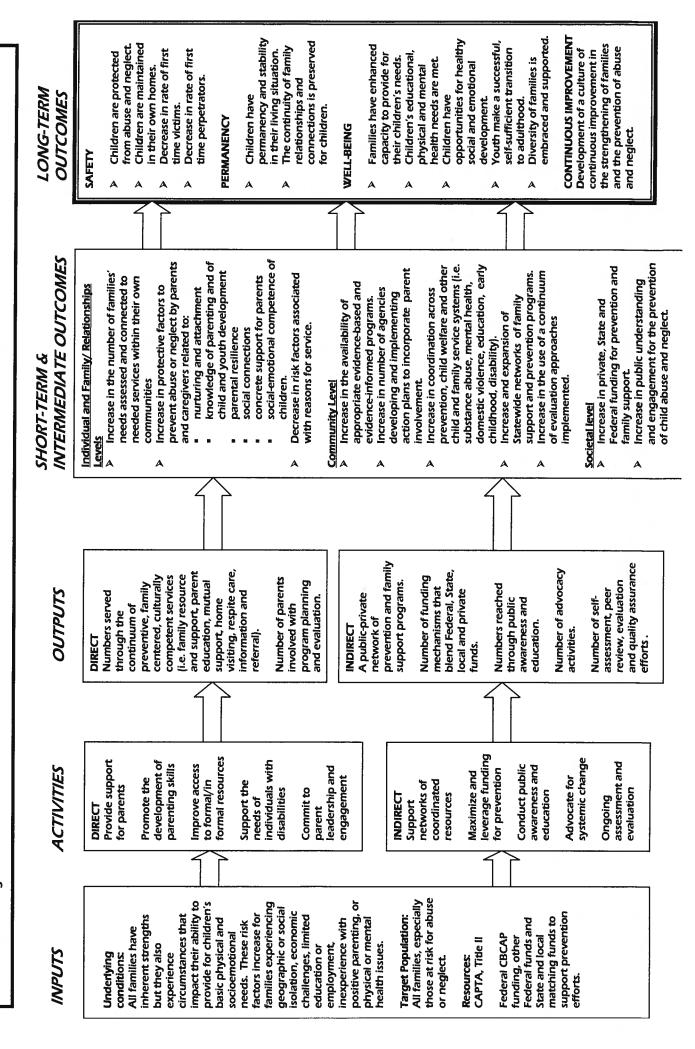
Total number of individuals who received or were exposed to public awareness or public education activities: Does not collect this data

### STATE COMMENTARY / CONSTRUCTION LOGIC

The State should provide additional information about the numbers being reported above and the primary source of the data. If multiple funding sources are included in the recipient numbers, please indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of that total. If no data is available, the State should provide an explanation why the data cannot reported.

# ATTACHMENT 1: CBCAP CONCEPTUAL FRAMEWORK

likelihood of child abuse and neglect; and (2) to foster understanding, appreciation and knowledge of diverse populations in order to effectively prevent and treat The purposes of the CBCAP program are: (1) to support community-based efforts to develop, operate, expand, enhance, and coordinate initiatives, programs, and activities to prevent child abuse and neglect and to support the coordination of resources and activities to better strengthen and support families to reduce the child abuse and neglect.



# CBCAP EVIDENCE-BASED AND EVIDENCE INFORMED<sup>1</sup> PROGRAMS AND PRACTICES CHECKLIST

Directions: Review the documentation and information regarding the program/practice being considered and place a check mark for each item under YES or NO. Programs/ practices must receive a YES answer for <u>every</u> item in order to be categorized as Evidence-based or Evidence-informed for the CBCAP PART Efficiency measure.

Name	of Pro	gram/Practice being evaluated: FSS (Utilizing Triple P)
<u>Revie</u>	wed by	: Delphine Trujillo Date: 05/28/2015
<u>EME</u>	RGING	G PROGRAMS AND PRACTICES
		PROGRAMMATIC CHARACTERISTICS
YES	NO	The program can articulate a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u> . This is represented through a program <u>logic model</u> or <u>conceptual framework</u> that depicts the assumptions for the activities that will lead to the desired <u>outcomes</u> .
		The program may have a book, manual, other available writings, training materials, OR may be working on documents that specifies the components of the practice protocol and describes how to administer it.
		The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		Programs and practices have been evaluated using less rigorous <u>evaluation</u> designs that have with no <u>comparison group</u> , including <u>"pre-post"</u> designs that examine change in individuals from before the program or practice was implemented to afterward, without comparing to an <u>"untreated" group</u>
		OR an <u>evaluation</u> is in process with the results not yet available.

<sup>&</sup>lt;sup>1</sup> These categories were adapted from material developed by the California Clearinghouse on Evidence-Based Practice in Child Welfare and the Washington Council for the Prevention of Child Abuse and Neglect.

The program is committed to and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities.

### PROMISING PROGRAMS AND PRACTICES

### PROGRAMMATIC CHARACTERISTICS

YES	NO	
		The program can articulate a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u> . This is represented through presence of a program <u>logic model</u> or <u>conceptual framework</u> that depicts the assumptions for the activities that will lead to the desired <u>outcomes</u> .
		The program may have a book, manual, other available writings, and training materials that specifies the components of the practice protocol and describes how to administer it. The program is able to provide formal or informal support and guidance regarding program model.
		The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving services child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	
		There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		At least one study utilizing some form of <u>control or comparison group</u> (e.g., <u>untreated group, placebo group, matched wait list</u> ) has established the practice's <u>efficacy</u> over the <u>placebo</u> , or found it to be comparable to or better than an

At least one study utilizing some form of control or comparison group (e.g., untreated group, placebo group, matched wait list) has established the practice's efficacy over the placebo, or found it to be comparable to or better than an appropriate comparison practice, in reducing <u>risk</u> and increasing <u>protective factors</u> associated with the prevention of abuse or neglect.. The <u>evaluation</u> utilized a <u>quasi-experimental</u> study design, involving the comparison of two or more groups that differ based on their receipt of the program or practice. A formal, independent report has been produced which documents the program's positive <u>outcomes</u>.

The local program is committed to and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities. Programs continually examine long-term <u>outcomes</u> and participate in research that would help solidify the outcome findings.

The local program can demonstrate adherence to model <u>fidelity</u> in program or practice implementation.

### SUPPORTED PROGRAMS AND PRACTICES\*

YES	NO	PROGRAMMATIC CHARACTERISTICS
		The program articulates a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u> . This is represented through the presence of a detailed <u>logic model</u> or <u>conceptual framework</u> that depicts the assumptions for the <u>inputs</u> and <u>outputs</u> that lead to the <u>short, intermediate and long-term outcomes</u> .
		The practice has a book, manual, training, or other available writings that specifies the components of the practice protocol and describes how to administer it.
		The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		The research supporting the <u>efficacy</u> of the program or practice in producing positive <u>outcomes</u> associated with reducing <u>risk</u> and increasing <u>protective factors</u> associated with the prevention of abuse or neglect meets at least one or more of the following criterion:
		<ul> <li>At least two rigorous <u>randomized controlled trials</u> (RCTs) in highly <u>controlled settings</u> (e.g., university laboratory) have found the practice to be superior to an appropriate comparison practice. The RCTs have been reported in published, <u>peer-reviewed</u> literature. OR</li> <li>At least two between-group design studies using either a <u>matched comparison</u> or <u>regression discontinuity</u> have found the practice to be equivalent to another practice that would qualify as supported or well-supported; or superior to an appropriate comparison practice.</li> </ul>

### **SUPPORTED PROGRAMS AND PRACTICES\* (continued)**

### RESEARCH & EVALUATION CHARACTERISTICS

ÆS	NO	
$\checkmark$		The practice has been shown to have a sustained effect at least one year beyond the end of treatment, with no evidence that the effect is lost after this time.
		Outcome measures must be <u>reliable</u> and <u>valid</u> , and administered consistently and accurately across all subjects.
		If multiple outcome studies have been conducted, the overall weight of evidence supports the <u>efficacy</u> of the practice. [If not applicable, you may skip this question.]
		The program is committed and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities.
		The local program can demonstrate adherence to model <u>fidelity</u> in program implementation.

\*Note: For purposes of OMB PART reporting, programs and practices at Supported Program and Practices and Well Supported Programs and Practices will be given the same weight.

### WELL SUPPORTED PROGRAMS AND PRACTICES\*

### PROGRAMMATIC CHARACTERISTICS

YES	NO	The program articulates a theory of change which specifies clearly identified outcomes and describes the activities that are related to those outcomes. This is represented through the presence of a detailed logic model or conceptual framework that depicts the assumptions for the inputs and outputs that lead to the short, intermediate and long-term outcomes.  The practice has a book, manual, training or other available writings that specify components of the service and describes how to administer it.
		children and their parents/caregivers receiving child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	Multiple Site Replication in Usual Practice Settings: At least two rigorous randomized controlled trials (RCT's) or comparable methodology in different usual care or practice settings have found the practice to be superior to an appropriate comparison practice. The RCTs have been reported in published, peer-reviewed literature.
		There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		The practice has been shown to have a sustained effect at least one year beyond the end of treatment, with no evidence that the effect is lost after this time.
		Outcome measures must be <u>reliable</u> and <u>valid</u> , and administered consistently and accurately across all subjects.
		If multiple outcome studies have been conducted, the overall weight of the evidence supports the <u>effectiveness</u> of the practice.

### WELL SUPPORTED PROGRAMS AND PRACTICES\* (continued)

		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	The program is committed and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities.
		The local program can demonstrate adherence to model <u>fidelity</u> in program implementation.

\*Note: For purposes of OMB PART reporting, programs and practices at Supported Program and Practices and Well Supported Programs and Practices will be given the same weight.

### PROGRAMS AND PRACTICES LACKING SUPPORT OR POSITIVE EVIDENCE/ UNDETERMINED/ HARMFUL

Programs or practices that do not meet the threshold for Emerging and Evidence-informed will be counted in this category for purposes of reporting for the CBCAP Efficiency measure.

### PROGRAMMATIC CHARACTERISTICS

The program is not able to articulate a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u>.

The program does not have a book, manual, other available writings, training materials that describe the components of the program.

### **RESEARCH & EVALUATION CHARACTERISTICS**

Two or more <u>randomized</u>, <u>controlled trials (RCTs)</u> have found the practice has not resulted in improved <u>outcomes</u>, when compared to usual care.

OR

If multiple outcome studies have been conducted, the overall weight of evidence does NOT support the <u>efficacy</u> of the practice.

OR

No evaluation has been conducted. The program may or may not have plans to implement an evaluation.

# CBCAP EVIDENCE-BASED AND EVIDENCE INFORMED<sup>1</sup> PROGRAMS AND PRACTICES CHECKLIST

Directions: Review the documentation and information regarding the program/practice being considered and place a check mark for each item under YES or NO. Programs/ practices must receive a YES answer for <u>every</u> item in order to be categorized as Evidence-based or Evidence-informed for the CBCAP PART Efficiency measure.

Name	of Pro	gram/Practice being evaluated: Fatherhood & Two FSS Programs (Utilizing Circle of Security)
Revie	wed by	Delphine Trujillo Date: 05/28/2015
<u>EME</u>	RGING	PROGRAMS AND PRACTICES
		PROGRAMMATIC CHARACTERISTICS
YES	NO	The program can articulate a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u> . This is represented through a program <u>logic model</u> or <u>conceptual framework</u> that depicts the assumptions for the activities that will lead to the desired <u>outcomes</u> .
		The program may have a book, manual, other available writings, training materials, OR may be working on documents that specifies the components of the practice protocol and describes how to administer it.
		The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		Programs and practices have been evaluated using less rigorous <u>evaluation</u> designs that have with no <u>comparison group</u> , including <u>"pre-post"</u> designs that examine change in individuals from before the program or practice was implemented to afterward, without comparing to an <u>"untreated" group</u>
		OR an <u>evaluation</u> is in process with the results not yet available.
		examine change in individuals from before the program or practice was implemented to afterward, without comparing to an "untreated" group

<sup>&</sup>lt;sup>1</sup> These categories were adapted from material developed by the California Clearinghouse on Evidence-Based Practice in Child Welfare and the Washington Council for the Prevention of Child Abuse and Neglect.

The program is committed to and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities.

### PROMISING PROGRAMS AND PRACTICES

### PROGRAMMATIC CHARACTERISTICS

YES	NO	The program can articulate a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u> . This is represented through presence of a program <u>logic model</u> or <u>conceptual framework</u> that depicts the assumptions for the activities that will lead to the desired <u>outcomes</u> .
		The program may have a book, manual, other available writings, and training materials that specifies the components of the practice protocol and describes how to administer it. The program is able to provide formal or informal support and guidance regarding program model.
		The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving services child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		At least one study utilizing some form of control or comparison group (e.g.,

At least one study utilizing some form of control or comparison group (e.g., untreated group, placebo group, matched wait list) has established the practice's efficacy over the placebo, or found it to be comparable to or better than an appropriate comparison practice, in reducing risk and increasing protective factors associated with the prevention of abuse or neglect.. The evaluation utilized a quasi-experimental study design, involving the comparison of two or more groups that differ based on their receipt of the program or practice. A formal, independent report has been produced which documents the program's positive outcomes.

The local program is committed to and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities. Programs continually examine long-term <u>outcomes</u> and participate in research that would help solidify the outcome findings.

The local program can demonstrate adherence to model <u>fidelity</u> in program or practice implementation.

### SUPPORTED PROGRAMS AND PRACTICES\*

YES	NO	PROGRAMMATIC CHARACTERISTICS
		The program articulates a <u>theory of change</u> which specifies clearly identified <u>outcomes</u> and describes the activities that are related to those <u>outcomes</u> . This is represented through the presence of a detailed <u>logic model</u> or <u>conceptual framework</u> that depicts the assumptions for the <u>inputs</u> and <u>outputs</u> that lead to the <u>short</u> , intermediate and <u>long-term outcomes</u> .
		The practice has a book, manual, training, or other available writings that specifies the components of the practice protocol and describes how to administer it.
		The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		The research supporting the <u>efficacy</u> of the program or practice in producing positive <u>outcomes</u> associated with reducing <u>risk</u> and increasing <u>protective factors</u> associated with the prevention of abuse or neglect meets at least one or more of the following criterion:
		<ul> <li>At least two rigorous <u>randomized controlled trials</u> (RCTs) in highly <u>controlled settings</u> (e.g., university laboratory) have found the practice to be superior to an appropriate comparison practice. The RCTs have been reported in published, <u>peer-reviewed</u> literature. OR</li> <li>At least two between-group design studies using either a <u>matched comparison</u> or <u>regression discontinuity</u> have found the practice to be equivalent to another practice that would qualify as supported or well-supported; or superior to an appropriate comparison practice.</li> </ul>

### **SUPPORTED PROGRAMS AND PRACTICES\* (continued)**

### RESEARCH & EVALUATION CHARACTERISTICS

YES	NO	
		The practice has been shown to have a sustained effect at least one year beyond the end of treatment, with no evidence that the effect is lost after this time.
		Outcome measures must be <u>reliable</u> and <u>valid</u> , and administered consistently and accurately across all subjects.
		If multiple outcome studies have been conducted, the overall weight of evidence supports the <u>efficacy</u> of the practice. [If not applicable, you may skip this question.]
		The program is committed and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities.
		The local program can demonstrate adherence to model <u>fidelity</u> in program implementation.

\*Note: For purposes of OMB PART reporting, programs and practices at Supported Program and Practices and Well Supported Programs and Practices will be given the same weight.

### WELL SUPPORTED PROGRAMS AND PRACTICES\*

### PROGRAMMATIC CHARACTERISTICS

ZES	NO	The program articulates a theory of change which specifies clearly identified outcomes and describes the activities that are related to those outcomes. This is represented through the presence of a detailed logic model or conceptual framework that depicts the assumptions for the inputs and outputs that lead to the short, intermediate and long-term outcomes.  The practice has a book, manual, training or other available writings that specify components of the service and describes how to administer it.  The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.
		RESEARCH & EVALUATION CHARACTERISTICS
TES	NO	Multiple Site Replication in Usual Practice Settings: At least two rigorous randomized controlled trials (RCT's) or comparable methodology in different usual care or practice settings have found the practice to be superior to an appropriate comparison practice. The RCTs have been reported in published, peer-reviewed literature.
		There is no clinical or <u>empirical</u> evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.
		The practice has been shown to have a sustained effect at least one year beyond the end of treatment, with no evidence that the effect is lost after this time.
		Outcome measures must be <u>reliable</u> and <u>valid</u> , and administered consistently and accurately across all subjects.
		If multiple outcome studies have been conducted, the overall weight of the evidence supports the <u>effectiveness</u> of the practice.

### WELL SUPPORTED PROGRAMS AND PRACTICES\* (continued)

		RESEARCH & EVALUATION CHARACTERISTICS
YES	NO	The program is committed and is actively working on building stronger evidence through ongoing <u>evaluation</u> and continuous quality improvement activities.  The local program can demonstrate adherence to model <u>fidelity</u> in program implementation.

\*Note: For purposes of OMB PART reporting, programs and practices at Supported Program and Practices and Well Supported Programs and Practices will be given the same weight.

### PROGRAMS AND PRACTICES LACKING SUPPORT OR POSITIVE EVIDENCE/ UNDETERMINED/ HARMFUL

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### PROGRAMMATIC CHARACTERISTICS

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The program does not have a book, manual, other available writings, training materials that describe the components of the program.

### RESEARCH & EVALUATION CHARACTERISTICS

Two or more <u>randomized</u>, <u>controlled trials (RCTs)</u> have found the practice has not resulted in improved <u>outcomes</u>, when compared to usual care.

OR

If multiple outcome studies have been conducted, the overall weight of evidence does NOT support the <u>efficacy</u> of the practice.

OR

No evaluation has been conducted. The program may or may not have plans to implement an evaluation.