West Virginia Department of Health and Human Resources

COMMUNITY-BASED CHILD ABUSE PREVENTION PROGRAM

Combined 2013 Annual Report and 2014 Application

Karen L. Bowling, Cabinet Secretary

Nancy N. Exline, Commissioner Bureau for Children and Families

Lead Agency Identifying Information

Agency: West Virginia Department of

Health and Human Resources One Davis Square, Suite 100E Charleston, West Virginia 25301 Telephone: (304) 558-0684

Fax: (304) 558-1130

E-mail: dhhrsecretary@wv.gov

Employer Identification #: 55-6000771

DUNS #: 148040327

Program Specialist: Regan S.M. McGahan

Program Manager I,

Division of Children and Adult Services

350 Capitol Street, Room 691 Charleston, West Virginia 25301 Telephone: (304) 356-4566

Fax: (304) 558-4563

E-Mail: regan.s.m.mcgahan@wv.gov

Fiscal Officers: Melissa Rosen

Deputy Commissioner for Finance and Administration

350 Capitol Street, Room 730 Charleston, West Virginia 25301 Telephone: (304)356-4544

Fax: (304) 558-6646

E-mail: Melissa.D.Rosen@wv.gov

Warren Keefer

Deputy Secretary for Administration One Davis Square, Suite 300

Charleston, West Virginia 25301 Telephone: (304) 558-3987

Fax: (304) 558-1003

E-mail: Warren.D.Keefer@wv.gov

TABLE OF CONTENTS

	Page
LEAD AGEN	CY AND LEADERSHIP ACTIVITIES4
ACTIONS TO	O ADVOCATE FOR SYSTEM CHANGE6
COLLOBOR	ATION AND COORDINATION8
NEEDS ASS	ESSMENT & CRITERIA FOR FUNDED PROGRAMS10
OUTREACH	ACTIVITIES AND CULTURAL COMPETENCE17
PARENT LE	ADERSHIP AND FAMILY INVOLVEMENT19
	SUPPORT, TRAINING, TECHNICAL ASSISTANCE AND EVALUATION EL
CHILD ABUS	SE PREVENTION MONTH ACTIVITIES25
Appendices	
Appendix A	In Home Family Education Statement of Work
Appendix B	Starting Points Family Resource Center Statement of Work
Appendix D	Partners in Prevention Statement of Work
Appendix D	WV Family Survey Final Report January 2014
Attachments	
Budget	
Leveraged Cla	aim Forms
Lead Agency	Designation Letter from the Governor
State Chief Ex	xecutive Officer's Assurance Statement
State Lead Ag	gency Assurance Statement
Certification R	Regarding Lobbying
Disclosure of Lobbying Activities	
Certification Regarding Environmental Tobacco Smoke	

LEAD AGENCY AND LEADERSHIP ACTIVITIES

Reported Activities:

The West Virginia Department of Health and Human Resources (WVDHHR) is a large public agency responsible for many programs and services. The agency includes five bureaus: Public Health, Children and Families, Behavioral Health and Health Facilities, Child Support Enforcement, and Medical Services. The Bureau for Children and Families (BCF) manages the activities funded by the Community-Based Child Abuse Prevention (CBCAP) funding.

The mission statement of the Bureau for Children and Families is to provide an accessible, integrated, comprehensive quality service system for West Virginia's children, families and adults to help them achieve maximum potential and improve their quality of life.

The vision statement of the West Virginia Department of Health and Human Resources is:

Our children and families will be safe.

Our children will have a strong, permanent connection with family and community.

While reunification, adoption, and legal guardianship are ultimate goals, all children will have caring adults in their lives

Our children and families will be successful in their lives and have enhanced well-being.

Our children and families will be mentally and physically healthy.

Our children and families will be supported, first and foremost, in their home and communities and by receiving the appropriate services to meet their needs.

Our child-serving systems will be transformed to meet the needs of children and families.

Staff is located in every county in West Virginia. BCF staff located in the county offices is responsible for the day-to-day delivery of services such as child and adult protective services, foster care, adoption, financial assistance, and food stamps. The staff in the BCF central office is responsible for program and policy development, regulation of child welfare and child care facilities, finance and management, research and evaluation, and other similar administrative activities. Staff at all levels engage parents and partner with others to develop and implement programs and services.

One of the primary responsibilities of BCF is the administration of child welfare services, including the management of federal funds and programs for this population. The Five-Year Child and Family Services Plan process has afforded us the opportunity to consolidate and improve planning and program development. Participation in the Child and Family Services Plan (CFSP) process involves much collaboration at local, state and federal levels. This collaboration includes committees composed of staff representing both the state office and field staff within WVDHHR. In addition, there are

a number of planning initiatives that are partnerships which include WVDHHR staff, community agencies, providers, and families.

The BCF is also responsible for coordination activities under both the federal Child Care and Development Fund and state law mandating universal Pre-K. These efforts are guided by the Early Childhood Advisory Council (ECAC). This group includes representatives from education, WVDHHR, and Head Start. This group also plays a significant role in the state's Maternal Infant Early Childhood Home Visiting (MICHEV) program.

In an effort to cement the public private partnership with BCF and the community, the Prevention Leadership Council (PLC) was created in November 2011. This arose from attempts to streamline the various advisory groups centered on child abuse prevention such as the Strengthening Families state leadership team, Partners in Prevention advisory team, and the desire to have an overall CBCAP advisory council. The WVDHHR worked closely with Prevent Child Abuse WV to convene and coordinate the group. It is exciting to report that this inaugural, multi-disciplinary group has been working very well together and emits enthusiasm and energy for the "cause" of prevention in West Virginia. The group currently has 23 members representing parents, adult survivors of child abuse, the faith community, a representative from each of the CBCAP funded grantee groups, the WV Injury Prevention program, the Early Childhood Comprehensive Systems (ECCS) and MIECHEV, community representation, the Division of Family Assistance that administers the state's TANF and SNAP program. and leadership in prevention programming. This group has grown in knowledge and strategic planning concepts that affect program priorities, needs, and addressing crosssystem issues that affect child safety, permanency and well-being. Members are committed and have shown a unified and strength-based approach to prevention framework and strategies that will improve outcomes for children and families. The Prevention Leadership Council continues to strengthen its work by incorporating fully the Strengthening Families Protective Factor Framework.

The WVDHHR has adapted the CBCAP conceptual framework. This allows for WV's child abuse prevention activities to reflect the Children Bureau's vision, objectives, and outcomes.

The WVDHHR funds and supports three child abuse prevention program areas that are funded with CBCAP funds, state appropriations, and private funds. The programs are considered an integral part of the child welfare continuum in that they all work towards increasing the nationally recognized protective factors that enable parents and families to nurture and parent appropriately, thereby keeping families out of the child welfare system. The four program areas are Starting Points Family Resource Centers, In Home Family Education Programs, and Partners in Prevention.

Planned Activities:

Leadership has been increased and amplified as the CBCAP State Lead and the MIECHV Lead strengthen their collaborative partnership to operate the Parents as Teachers state office which was transferred to BCF in April 2012. This collaborative partnership has allowed for the further development of a continuum of family-centered, holistic, preventive services through the joint involvement of the Prevention Advisory Council, Early Childhood Advisory Council, and the WV Home Visitation Stakeholders Group.

ACTIONS TO ADVOCATE FOR SYSTEM CHANGE

Reported activities:

During FY 2009, the WVDHHR completed the second round of the Child and Family Services Review (CFSR). The CBCAP Lead served on the well-being committees of the CFSR Program Improvement Planning committee and on the IV-B five year planning committee. This allowed for input and collaboration on these two very important child welfare program documents. The Program Improvement Plan was approved in late 2010 and West Virginia completed this plan in 2012.

The CBCAP State Lead chaired a workgroup to explore alternative use of IV-B Part II Family Support funds that complements CBCAP activities. The work of this workgroup has been completed and resulted in the funding of 15 Family Resource Centers (FRC) beginning with SFY 12 (June 2011- July 2012). These FRC centers have had a successful second year.

The IV-B funded Family Resource Centers are almost identical to the CBCAP funded Starting Points Family Resource Centers. This deliberate attempt to strengthen prevention and engage in strategic, systemic systems change requires centers to use evidence-informed programs and practices as well as participate in structured continuous quality improvement activities such as peer review. Incorporating these elements will hopefully result in measurable outcomes and subsequent increased investment. Family Resource Centers were evaluated in state fiscal year 2012 and results show an improvement in all five domains measured on the WV Family Survey. The Family Resource Centers have enhanced collaboration among local families and parents and service providers that has improved family functioning through social support programs.

Involvement with the MIECHV grantee is an exciting piece of the systematic change we have experienced. Beginning with the initial grant and subsequent development grant application, true collaboration and coordination have occurred. Through the support of the WV Home Visitation Program (the MIECHV grantee), CBCAP funded In Home Family Education grantees have received numerous trainings and programmatic support. The collaboration has grown beyond the inclusion of each lead on each other's group to a true joint partnership. This joint partnership has resulted in, among other

wonderful outcomes, the decision to apply for and coordinate the Parents as Teachers (PAT) state office. BCF was awarded the application in April 2012, and all decisions have been made jointly with the WV Home Visitation Program Director.

Involvement with the Early Childhood Planning Task Force (that was created by Governor Earl Ray Tomblin in May 2013) to produce a Development Plan for Early Childhood in West Virginia will create actions that can be taken immediately and in the future to improve childhood outcomes for West Virginia's children and their families. The Task Force partnered with the Early Childhood Advisory council and others to complete the plan. BCF provided information, attended meetings, and other forms of collaboration for this effort. The complete report can be found at: http://www.wvecptf.org/.

Strengthening Families has been a huge piece of the systematic changes. Through a joint partnership with our ECCS program and Prevent Child Abuse WV (PCA-WV), we rolled out the formal branding of Strengthening Families West Virginia. This effort included guide for home visitors. which can be found at: http://www.strengtheningfamilieswv.org/pdfs/TEAM-IN_HOME_WEB.pdf and activities with our Early Childhood Council. The CBCAP State Lead and the WV Home Visitation Director have been working closely with PCA-WV to coordinate these activities in 2013.

Planned Activities:

West Virginia participated in a national video about the importance of child abuse prevention (<u>CBCAP</u>: A <u>Success Story Video</u> at http://friendsnrc.org). We were one of three states, WV, MD, and VA, who had a two-minute spot. The video was produced by the Children's Bureau, a division of the US Department of Human Services, Administration on Youth, Children, and Families and Blue Sky Films. West Virginia will use this video to strengthen and promote the important work of child abuse prevention.

The CBCAP state lead was selected to participate in a new child abuse prevention internal workgroup (Bureau of Public Health and Bureau of Children and Families Child Abuse Workgroup) that was initiated by the new Cabinet Secretary and included membership from all five of the Department's bureaus. This group regularly reported to the Cabinet Secretary and has developed a cross bureau inventory of programs and services that affect child abuse prevention. Future participation by the CBCAP State Lead is an enhancement opportunity for collaboration across DHHR bureaus that house the majority of child abuse prevention activities.

This state's ongoing priority is to continue to effectively engage all community partners, parents, advocates, special populations, schools, health programs, and other partners to sustain their roles over time and to bring about a strong unified front in child abuse prevention.

Fiscal Leveraging:

West Virginia uses CBCAP funds to partially support the state's network of Starting Points Family Resource Centers and In Home Family Education Programs. These networks are the primary building blocks for family resource and support programs in the state. In addition, CBCAP funds are used to support the Partners in Prevention and Circle of Parents initiatives. West Virginia will continue to work to maximize resources, including both public and private dollars.

COLLABORATION AND COORDINATION

Reported Activities:

Sharing goals of improved child development and parenting skills with child maltreatment goals will significantly help West Virginia families understand the needs of their children, learn about support programs for concrete needs or parenting challenges, and create a positive forum for engaging parents as leaders and partners to educate and provide for the healthy development for their children. BCF does not exist in isolation, and the collaboration and coordination efforts are two activities in which BCF has excelled in. Because of the state's size and resources, collaboration and coordination come quite naturally.

The Department's designation as the lead agency for the CBCAP program is a prime example of the strong commitment to collaboration. The CBCAP program specialist has linkages to the child welfare program specialists within the Bureau of Children and Families; public health program specialists with the Bureau of Public Health; maternal child and family health program specialists with the Office of Maternal Child and Family Health; program specialists with the Division of Early Care and Education and Division of Family Assistance. Through collaboration with the WV Home Visitation Program, linkages have been strengthened to include the WV Coalition Against Domestic Violence and the WVDHHR Violence and Injury Prevention program. Linkages to outside agencies including the Department of Education, the courts, service providers, and others is facilitated by the Commission to Study Residential Placement of Children.

Efforts to include the Service Array project with child abuse prevention have proven to be an important boost fully implementing a continuum of care. While the Service Array project and the accompanying System of Care state steering team focus on children in out of home placement, it also serves as an opportunity to constantly remind the intervention field of the importance and priority prevention efforts that should hold. An exciting result of this collaboration has resulted in the Family Advocacy, Support, and Training (FAST) project which utilizes the Circle of Parents approach to mutual parent support. FAST empowers families to participate in the planning, management and evaluation of their children's treatment and service needs. The FAST Circle of Parents group will focus on parents of school-age children with mental health/behavioral needs. The following link can explain the FAST program: http://www.lawv.net/fast. Also a new initiative to the FAST program is Youth M.O.V.E. WV, a national organization that is

devoted to improving systems and services that support positive growth and development by uniting the voices of youth who have living experience in various systems including juvenile justice, child welfare, mental health and education. The Youth M.O.V.E. WV website can be accessed at www.youthmovewv.com. This is a way to give youth a voice.

The WVDHHR CBCAP Lead also participates in the planning and composition of the Annual Progress and Services Report (APSR).

Planned Activities:

The WVDHHR works closely with a number of statewide groups and organizations to establish networks of prevention-focused family resource and support programs. Key partners include Prevent Child Abuse West Virginia, the Early Childhood Advisory Council, the West Virginia Alliance for Sustainable Families, and the West Virginia Early Intervention Coordinating Council.

The CBCAP State Lead has co-chaired a subcommittee of the Early Childhood Advisory Council concerning parent engagement. This group completed a parent engagement survey and will be responsible for making recommendations concerning parent engagement in early childhood programs. These recommendations will directly impact and inform the parent engagement efforts of grantees as well as Strengthening Families best practices. These recommendations can be found at:

http://www.wvecptf.org/docs/Family%20Engagement%20survey%20report%20ECAC%202013.pdf.

BCF's prevention efforts are anchored to and connected with a multitude of other efforts and initiatives. Linkages with the state's Healthy Families Healthy Children Coalitions are played out at the local level. Cross system efforts with the Division of Early Care and Education connect our divisions with the knowledge and skills around brain neuroscience and the impact early experiences can have.

Due to increased collaboration with MIECHV, trainings, information, and activities were provided to ensure improvement in children's and families' health; increase awareness of injury prevention, neglect or maltreatment prevention; child abuse; and number of ER visits.

Our Strengthening Families efforts involve multiple systems. Primary efforts have been co-led with the CBCAP State Lead, Early Care and Education, the ECCS State Lead, the WV Home Visitation Program director, and Prevent Child Abuse WV. Efforts in the coming year will be focused on engaging multiple system partners under the direction of the Prevention Leadership Council.

NEEDS ASSESSMENT & CRITERIA FOR FUNDED PROGRAMS

Reported Activities:

West Virginia's needs assessment has been performed through the Comprehensive Statewide Service Array Project. Collaboratives have completed their Resource Capacity and Development (RCD) Plans. These plans can be located at http://www.wvsystemofcare.org/ServiceArray/ServiceArrayReportsArchive/tabid/677/Default.aspx. Most of the RCD plans identified several prevention strategies.

On the state level RCD Plan, parent mutual support was identified as strategy # 22 in the year one strategic plan. During the present state fiscal year, BCF allocated Children's Trust Funds to our Prevent Child Abuse WV (PCAWV) chapter and began the process of becoming a Circle of Parents state. PCAWV officially launched Circle of Parents in WV in September 2012. Circle of Parents is a national network of parent-led, self-help groups where parents and caregivers share ideas, celebrate successes, and address the challenges surrounding parenting.

West Virginia is strongly committed to an array of community based prevention-focused programs. West Virginia used a blend of CBCAP dollars, Children's Trust Fund dollars, and state appropriations, to fund grants in three programmatic areas. The programs are Starting Points Family Resource Centers, In Home Family Education, and Partners in Prevention. Please see appendices A - C for program descriptions and grant requirements.

During the past year, programs have continued to focus on evidence-informed and evidence-based programs and practices.

Criteria:

Programmatic changes implemented in the previous year have led to all CBCAP funded programs being able to be classified as evidence-informed. The Starting Points Family Resource Centers are all now **emerging** because they submit logic models with outcomes and participate in the pre- and post- WV Family Survey. The Parents as Teachers (PAT) programs are rated as a **promising** approach. The Maternal Infant Health Outreach Worker (MIHOW) program is an **emerging** program. The WV Home Visitation Program is funding a Randomized Control Trial study of MIHOW, and after submitting this program to the federal MIECHV analysts, we anticipate it will be classified as higher in the next few years. Healthy Families America is rated as **promising**. Family Leadership First does not provide direct services; however, it did submit a logic model and participated in the one-time event version of the WV Family Survey. The Partners in Prevention teams are classified as **emerging** as they have developed logic models with outcomes and utilize the WV Family Survey both one-time version and pre- and post-version.

Starting Points Family Resource Centers:

Several changes occurred during the previous year for the Starting Points Family Resource Centers. In an effort to integrate them more fully with other prevention programs, they have completed logic models that focus on the protective factors as outcomes. They have also increased the target population they serve. Taking into consideration their input and the breadth of programming provided, as well as the desire to align them with the other Family Resource Center grants, they now serve families with children up to age 18.

Starting Points FRCs have completed the second year of a more structured peer review process than they previously participated in. Using the recently revised FRIENDS NRC Peer Review tool, they have been scheduled on a bi-annual basis to participate in a self-assessment. They have also been asked to choose an additional area of assessment that they want more information about. They have a structured site visit form and agenda to use and provide their community partner information for a survey to be sent from BCF. This structured, multi-dimensional assessment helps provide a well-rounded picture of the Starting Points Family Resource Center programs.

In Home Family Education Programs:

In Home Family Education programs are community-based prevention programs that receive technical assistance and support from BCF staff. These home visiting programs are sometimes attached to the Starting Points Family Resource Centers and are in other cases provided by local agencies. The 13 In Home Family Education Programs were developed from one of three resource-based early childhood visitation models: Parents as Teachers; Healthy Families America; or the Maternal and Infant Health Outreach Workers program.

In Home Family Education Programs promote healthy early childhood growth and development by:

- Systematically assessing families' strengths and needs and making service referrals as needed.
- Enhancing family functioning by building trusting relationships, teaching problem solving skills, providing information and improving the families' support systems.
- Promoting positive parent-child interaction.
- Achieving the outcomes of healthy development and health care services for children; positive child development; preservation of the family unit; and seamless, comprehensive, and easily accessed network of services.

In Home Family Education Programs can select from three different national models:

1. <u>Healthy Families America</u> is a national program model designed to help expectant and new parents get their children off to a healthy start. Families participate voluntarily in the program and receive home visiting and referrals from trained staff. Healthy Families America programs offer voluntary home visiting services to parents facing multiple challenges (e.g., elements that would add stressors to any home: single parent status, low income, substance abuse problems, victim of abuse or domestic violence, etc.) so that they have the support they need to better care for their children.

Services are initiated prenatally or within two weeks of birth. Healthy Families America uses a standardized assessment tool to systematically identify families who are most in need of services. Services are comprehensive, focusing on supporting the parent as well as supporting parent-child interaction and child development. Services are voluntary and use positive outreach efforts to build family trust; are offered to participating families over the long term (three to five years); are culturally competent; and link families to a medical provider and additional services.

The critical elements of Healthy Families America represent the most current knowledge about how to implement successful home visitation programs. Programs must be intensive, comprehensive, long-term, flexible, and culturally appropriate.

- 2. <u>Maternal and Infant Health Outreach Workers (MIHOW)</u> is a community-based education and outreach program that improves health and child development in low-income, rural families. Each MIHOW program is sponsored by a local grassroots agency that recruits local mothers as paraprofessional outreach workers. After training, these professional outreach workers become paid visitors to expectant mothers and families with young children providing:
 - Health and child development education;
 - Support for healthy lifestyles;
 - Positive parenting models; and
 - Advocacy with health and social service systems.

MIHOW provides *prenatal home visits* to answer questions; help understand baby's development and body changes; provide information about nutrition; help prepare for labor and delivery; and provide support.

Postnatal home visits are provided to answer questions; help with parenting concerns; provide infant and child development information; share ideas about

enjoying the parenting experience; share the joy of watching baby's development; offer family planning information; help determine appropriate medical care; provide opportunities to meet other parents; and to provide support.

Mother/toddler groups are offered to provide opportunities for parents to meet; encourage socialization of preschoolers; discuss parenting issues; provide safety and relevant programs to parents; build a network of parents; and encourage parent/child interaction through activities.

Parents as Teachers (PAT): The Parents as Teachers program is an evidence-based early childhood home visiting framework that builds strong communities, thriving families, and children who are healthy, safe and ready to learn. Formed in 1981, Parents as Teachers today holds to its original vision – that all children will learn, grow, and develop to reach their full potential, and those parents are their earliest and best teachers. Parents as Teachers aims to realize this vision by helping parents positively impact their children's development, beginning before they are born, so that by the time they reach school age, they will be fully ready to learn. Parents as Teachers are certified parent educators who implement the program and emphasize parent-child interaction, development centered parenting and family well-being in their work with families. Components of the program include:

- Home visits to help parents discover that simple, everyday activities are opportunities to develop their child's basic skills and strengthen their relationships.
- Group meetings to gain new insights and share experiences, common concerns and successes.
- Screening of overall development, language, hearing and vision to provide early detection of potential problems to prevent difficulties later in school.
- Resource network to help families link with providers of special services beyond the scope of PAT.

Previously, PAT programs were asked to identify 80% of their new families prenatally. The requirement came about for several reasons. Research tells us that the most effective prevention interventions yield the best outcomes when initiated prenatally. BCF and the WV Home Visitation Program have also discovered that there will be difficulty in meeting the benchmark reporting with the current population being served. However PAT programs have had difficulty meeting the 80% requirement. BCF and the WV Home Visitation Program have worked to overcome this problem by conducting planning meetings, having work groups that encompass all members, and sharing information and resources. Shared meetings with key players from PAT, OMCFH, In Home Visitation and BCF are held to discuss key strategies to work cross programs to meet the 80% criteria.

The In Home Family Education Programs identified and met their communities' needs in a variety of ways, depending upon the type of program offered. Programs offer assistance to families and communities based upon their particular program's curricula and standards.

Partners in Prevention:

CBCAP and Children's Trust Fund monies were used by **Partners in Prevention** (PIP) to award child abuse prevention grants to local community organizations. The Partners in Prevention approach promoted leveraging of private foundation support through collaboration to support child abuse and neglect prevention in communities across the state. Claude Worthington Benedum Foundation funds were also obtained to support these efforts. Funding from the Claude Worthington Benedum Foundation initiated four additional teams to the PIP network bringing the total to 44 PIP teams statewide.

Partners in Prevention Community Teams were selected using a request for proposals process where local community groups were invited to form local teams and receive support to become officially recognized Partners in Prevention Team. The application and notice of its availability were sent to potentially interested organizations and agencies, including faith-based organizations. It was also posted on the Prevent Child Abuse WV website. The mini-grants were awarded to local community organizations to support child abuse prevention projects which included:

- Parenting education classes, groups, and related activities;
- After school programs, summer projects and programs, and youth empowerment projects; and
- Family support activities, public awareness, outreach and education.

Public awareness materials developed by Prevent Child Abuse West Virginia (PCAWV) were used in the Partners In Prevention network of 44 Partners in Prevention community teams. These team leaders are affiliated with recipients of the Partners In Prevention mini-grants. More information on the Partners in Prevention initiative can be found at http://www.preventchildabusewv.org.

The Partners in Prevention initiative continued to use and develop public awareness materials and presentations. The public awareness campaign is entitled *Good Beginnings Last a Lifetime*. This campaign originated in West Virginia and has been adopted by several other states through the Prevent Child Abuse America and National Alliance of Children's Trust & Prevention Funds networks. West Virginia has also been recognized as a national leader in efforts to utilize reframed messages for child abuse prevention.

Circle of Parents:

Circle of Parents is a national network of parent-led, self-help groups where parents and caregivers share ideas, celebrate successes and address the challenges surrounding parenting. PCAWV officially launched Circle of Parents in West Virginia in September 2012.

Numbers Served:

The following data is for SFY 2013 which runs from July 1, 2012 to June 30, 2013. FFY information is not available due to SFY quarterly reporting requirements.

Total Number of Children who received preventative direct services:

Starting Points Family Resource Centers – 7,427

Partners in Prevention – 5,069

In Home Family Education – 2,257

Total: 14,753

Total Number of Families who received preventative direct services:

Starting Points Family Resource Centers – 6,078

In Home Family Education – 815

Total: 6,893

Total Number of Adults with Disabilities who received direct preventative services:

Partners in Prevention - 43

Starting Points Family Resource Centers – 325

In Home Family Education – 59

Total: 427

 Total Number of Children with Disabilities who received direct preventative services:

Partners in Prevention - 260

Starting Points Family Resource Centers - 215

In Home Family Education – 120

Total: 595

Total Number of Individual (both children and adults) who received public education and awareness services:

Partners in Prevention – (reported as education and services) – 61,531

Starting Points Family Resource Centers – 19,706

In Home Family Education - 7,216

Total: 88,453

Planned Activities:

- Starting Points Family Resource Center grants to sustain family resource centers offering multiple services at a single location.
- In Home Family Education Program grants to sustain nationally recognized parent education programs serving families with children up to age five.
- Partners in Prevention grants to continue the collaborative effort with Prevent Child Abuse WV to support local child abuse prevention projects and provide technical assistance with network grantees for peer-to-peer support and capacity building.

Community level grantees, Starting Points Family Resource Centers, In Home Family Education Programs, and Partners in Prevention Projects report regularly on progress and outcomes. Starting Points Family Resource Centers and In Home Family Education Programs report quarterly on prescribed indicators, and Partners in Prevention grantees submit a narrative report on the funded project. These reports are considered in funding decisions for the next state fiscal year.

General decisions regarding the renewal of grants are based on:

- Funding availability for SFY 15.
- Statement of Work for SFY 15 and impact of work in SFY 14.
- Quarterly financial and program reports.
- Additional grant renewal information.

Decisions about the Department's SFY 15 grants will be made in June 2014.

In addition to the CBCAP funded activities, BCF will continue to work with BPH and the WV Home Visitation Program to strengthen all of the in home family education programs. Discussions are currently underway about possibilities for the application of the MIECHV expansion grant. BCF will be involved in these discussions as ongoing programmatic decisions are made about the CBCAP funded in home family education programs as well as the future of the Parents as Teachers State Office.

Help Me Grow (http://www.helpmegrownational.org/) is a centralized information sharing system that is currently in 17 states, with West Virginia as the newest affiliate. Children at risk for developmental and behavioral problems are too often eluding early detection. Experts agree: early detection and connection to services lead to the best outcomes for children with developmental or behavioral challenges. However, families, child health care, early care and education, and human service providers often have difficulty recognizing early signs of developmental or behavioral concerns. Even when needs are identified, finding programs designed to address those needs can be confusing and time-consuming. Help Me Grow (HMG) is a simple solution that builds on existing resources. HMG is a system that assists in identifying at-risk children, and then helps families find community-based programs and services, including the above programs. Through a centralized information and referral center, families are linked with needed programs and services. Ongoing data collection and analysis helps identify gaps in and barriers to the system.

The federally funded MIECHEV grantee, the WV Home visitation program, and with collaboration of BCF kicked off the *Help Me Grow* initiative in West Virginia. BCF serves as a point of contact for establishing relationships with BCF funded Family Resource Networks which assist the initiative in the community outreach portion of the program.

The *Help Me Grow* West Virginia leadership team includes membership from Early Intervention Part C, Infant, Child and Adolescent Health Division, Bureau for Children and Families, Office of Maternal Child and Family Health, Pediatric Advisory board, United Way 211, and the Early Childhood Advisory Council. The statewide launch of *Help Me Grow* took place on March 15, 2013. *Help Me Grow* can be reached at 1-800-642-8522 or 1-800-642-9704.

OUTREACH ACTIVITIES AND CULTURAL COMPETENCE

Reported Activities:

The Starting Points Family Resource Centers worked with other community partners such as Family Resource Networks, Head Start or the Health Department. They supported the development of a continuum of services by offering direct services, based on local community need, to the whole family. They linked families to both formal and

informal resources and developed parental skills and encouraged parental leadership for meaningful community involvement.

Children with disabilities and their families were invited to participate in any Starting Points Family Resource Center sponsored or initiated activity. More specific services for families with children with disabilities included:

- Working collaboratively with community agencies to provide developmental screening services to young children and their families to identify those who may be in need of further evaluation.
- Providing information and referral services to families, including those families whose children have disabilities.
- Working collaboratively with their local Boards of Education to provide the "Understanding Special Education" workshops in their communities.
- Providing inclusive preschool education services, sponsored collaboratively with either the local Board of Education or Head Start agency.
- Children with disabilities and their families participating in playgroups and/or attending child care offered through Starting Points Family Resource Centers.
- Families of children with disabilities participating in workshops offered through Starting Points Family Resource Centers.
- Parents are an integral part of a Starting Points Family Resource Center. The centers base their operation on family support principles involving families in a variety of opportunities to make decisions and direct programs. The Starting Points Advisory Councils have parent representation as a required component. Parents are asked to participate in the revised peer review process.

Local Starting Points Family Resource Centers also conducted community outreach with regard to their services. They received input on regular services through focus groups and informal surveys. This information was used to build advisory councils and committees to engage in outreach to the community to build awareness of Starting Points Center services and to tailor services to community needs.

Partners in Prevention community teams typically involve five to ten diverse community organizations in their work, as well as people representing the populations they are attempting to reach through their projects. They engage these individuals and organizations by inviting them to:

- Serve as team members;
- Help plan and implement specific projects;

- Respond to surveys and participate in focus groups;
- Participate in direct services offered through the project;
- Provide feedback and suggestions on services and training provided; and
- Participate in statewide and local training opportunities.

The In Home Family Education Programs identified and met their communities' needs in a variety of ways, depending upon the type of program offered. Programs offered assistance to families and communities based upon their particular program's curricula and standards. All In Home Family Education Programs receive culturally competent training as well.

During the past year, trainings on engaging the unaccompanied homeless youth and domestic violence populations occurred. Activities include educating the Family Resource Centers on emergency shelter options; training for the Partners in Prevention teams on Project Safe Place; and continuation of the domestic violence curriculum for home visitors in the In Home Family education programs. Due to the collaboration with OMCFH, additional training for all In-Home Family Education Programs and FRCs on homelessness, human trafficking, parent education and support, working with Special Needs Children, and developmental screenings were held.

PARENT LEADERSHIP AND FAMILY INVOLVEMENT

Parents play an essential role in improving the quality of services. Families experience the system from a unique perspective as consumers. Their observations, insights and ideas are powerful tools for enhancing the quality of the services provided to consumers. The involvement of parents also helps to ensure that the design of programs and the services offered actually meet the families' needs. When families are participants in planning and decision making, the likelihood of developing effective, responsive services is greatly increased.

Reported Activities:

West Virginia takes family involvement and shared leadership very seriously. BCF and Prevent Child Abuse WV jointly convened a Prevention Leadership Council in 2011 with an inaugural meeting on November 11, 2011. This Council oversees and advises on the numerous prevention initiatives including CBCAP; serves as the Strengthening Families state leadership team; and Partners in Prevention advisory panel and the Leadership Institute. Both parents and adult survivors of child sexual abuse serve on the Council. In fact, the parent voice was a mobilizing factor in moving the Circle of Parents Initiative forward. In the upcoming year, this Council will be participating in strategic planning and thinking around engaging the special populations included in the CBCAP legislation.

A diverse representation of families was involved in the design, operation, and evaluation of the Starting Points Family Resource Centers. They are required to have a local Advisory Council that has representation and involvement from consumers/parents, providers, and community members. Local Starting Points Family Resource Center Advisory Councils advised and fully participated in decision-making regarding the mission, implementation, and evaluation of the Starting Points Family Resource Centers.

In Home Family Education Programs involved parents in a unique way. Often former recipients of services become providers of services. In Home Family Education Programs often have parents organize and lead group socialization activities.

Partners in Prevention teams were sponsored by local agencies already established in the communities. Often those organizations have parent involvement through advisory councils and boards of directors. Team leaders themselves are often parents. Partners in Prevention mini-grant recipients have received parent leadership training and were required to address parent involvement on their mini-grant applications last year and ongoing.

A recent evaluation of parent involvement efforts through the Early Childhood Advisory Council demonstrates our Family Resource Centers and In Home Family Education Programs as doing a great job! Both providers and parents provided responses on similar questions adapted from the FRIENDS NRC Parent involvement readiness survey. Ninety-eight percent (98%) of parents agree that Family Resource Centers value parent involvement and 100% of parents agree that the In Home Family Education program they were involved with values parent involvement. The full report is available at http://www.wvecptf.org/docs/Family%20Engagement%20survey%20report%20ECAC%202013.pdf.

Planned Activities:

West Virginia holds the unfortunate statistic of having one of the highest teenage pregnancy rates in the country. Teenage pregnancy is closely associated with a multitude of social issues, including persistent poverty, school failure and child abuse and neglect, health and mental issues and poor educational outcomes. In addition, children of teen mothers bear the greater burden of teen pregnancy and are at significantly increased risk for a number of economics, social and health problem. Teen fathers also experience many of the same adverse effects as teen mothers. With this research in mind, our above programs work closely with teen mothers and fathers. We have begun conversations with the WV Family Planning Program to work closely and collaborate in areas that will help teen parents through the above problems and detriments.

BCF and grantees will continue the activities above and expand services to include the following:

 The Prevention Leadership Council will be taking a closer look at and expanding information; training; projects around Human Trafficking; exploration of how to become involved in the WV State Dental program; and exploring outreach to women, men, teens, homelessness, and service families.

- Team for West Virginia Children contracted with the Center for Health and Safety Culture of Montana State University to apply the Center's Positive Community Norms framework to reducing child maltreatment in West Virginia. As a critical step in this process, the Center conducted a survey to measure actual and perceived norms among West Virginia parents to support efforts to reduce and prevent child maltreatment and promote positive outcomes for children. The survey examined parenting norms supporting safe, stable, and nurturing relationships; creating safe sleeping environments and behaviors; and reducing shaken-baby syndrome. While this survey revealed many positive norms among West Virginia parents, there are also many opportunities to grow these norms and thereby improving positive outcomes for West Virginia children. Correcting the misperceptions revealed in this survey is one component of a comprehensive effort (http://www.mostofus.org/mou_projects/reducing-and-preventing-child-maltreatment-in-west-virginia/).
- BCF will continue the work began this year as co-chair of the parent education and engagement committee on the Early Childhood Advisory Council.
- Through the increased use and recognition of the Protective Factors framework and parent involvement as a critical lever for change, West Virginia has begun and will continue to address parent leadership. Curriculum from the Parent Leader Ambassador Training (PLAT) will be implemented at grantee meetings. In Home Family Education Programs and Starting Points Family Resource Centers report quarterly on parent involvement efforts and concerns and issues are addressed by program specialists. Partners in Prevention grantees report yearly on their parent involvement efforts and receive training. Parent involvement and shared leadership will continue to be reinforced through our Circle of Parents efforts and trainings.
- In Home Family Education and FRC/Starting Points centers focus on feedback gathered from the annual WV Family Survey to assure the needs of their families and parents are being met. The final report from the WV Family Survey is Attachment A.

PLAN FOR SUPPORT, TRAINING, TECHNICAL ASSISTANCE AND EVALUATION ASSISTANCE

Technical Assistance

Reported Activities:

Technical Assistance provided to CBCAP grantees continues to grow and expand. Through the use of site visits, regional trainings, and collaboration with others, programs

continue to grow in quality. Quality has been a focus with all of our programs this past year and will continue to be in the upcoming year.

The PAT state office developed and conducted training on the topics of continuous quality improvement and model fidelity. A lot of time and effort has been spent on improving the quality of the Parents as Teachers programs and helping them to develop processes and policies to address the new quality endorsement process that National Parents as Teachers has developed. BCF has also worked with the WV Home Visitation Program to co-sponsor trainings on evaluation, funding diversification, specific topics that included substance abuse, domestic violence, boundaries, cultural competence, as well as emerging topics of importance.

BCF has also worked with the WV Home Visitation Program to provide technical assistance on the topics of fidelity, parent leadership, and the six protective factors. BCF also participates and helps coordinate yearly meetings with Partners in Prevention teams and the Starting Points Family Resource Centers that have replaced the Prevention Leadership Institute. BCF also provides opportunities for grantees to participate in cross training with community partners.

Starting Points Family Resource Centers are required to participate in monthly conference calls with the BCF State Lead.

Through joint funding and efforts, a large in-state Parents as Teachers foundation and supervisors training occurred for both BCF and OMCFH funded programs. Additional trainings that collaboratively took place included Ages and Stages Questionnaire; Depression Screening; Birth Spacing; Life Skills Progression; home visitor safety; Healthy Families America core training; Home Inventory Training; and others.

Planned Activities:

West Virginia will be revising and re-introducing the Making A Difference: Mandate to Report, Responsibility to Prevent training on a blackboard format in the upcoming year. The training will incorporate the new sexual abuse reporting requirements passed by the state legislature during the 2012 legislative session. BCF will also work with FRIENDS NRC to schedule Parent Leadership Ambassador Training for Family Resource Networks and other CBCAP grantees to involve parents, caretakers, and the community on how to move forward with planning and implementation of parent leadership and development.

For the upcoming year, BCF will continue to provide a high level of training and technical assistance to CBCAP grantees. There will be continued training and technical assistance to In Home Family Education Programs through the Development Grant that the WV Home Visitation Program received. The Starting Points Family Resource Centers and Partners in Prevention Teams will have a joint training in the Spring as well as monthly conference calls and Family Resource Center meetings quarterly.

Evaluation

Reported Activities:

The Department will comply with the reporting requirements of the Program Assessment Rating Tool (PART) developed by the Office of Management and Budget. All grantees report regularly to the WVDHHR on both grant expenditures and programmatic activity. Reporting requirements and evaluation methodology vary depending on the initiative.

The WV Family Survey, adapted from the Protective Factors Survey developed by the University of Kansas, was rolled out statewide with new SFY in July 2011. Which modules to use are determined by the type of prevention program. The survey has a pre- and post-test component as well as a module to capture one-time events. The WV Family Survey meets the family survey requirements of home visiting models as well as the desires of the Starting Points Family Resource Centers to capture family satisfaction. The survey is available online as well as in paper. Surveys are administered at intake and every six months, usually during April and October. Results are demonstrated at the following website:

http://www.wvdhhr.org/bcf/children adult/cabuseprev/resourcesCG.asp#WVFamilySurvey.

Starting Points Family Resource Centers

The Starting Points Family Resource Centers are all unique. Although all must address some of the core services, the centers and programs look very different. The requirement of logic models was implemented in October 2011 which helped programs to determine what sorts of outcomes they were affecting, particularly in terms of the Protective Factors. Centers report quarterly on their progress toward their logic model and outcomes as well as receiving yearly feedback from Hornby-Zeller Associates (HZA) on the WV Family Survey.

Evaluation strategies used in assessing Starting Points Family Resource Centers include:

- A quarterly report is submitted on services and numbers of families served within specified focus areas; and
- Bi-annual structured peer review process that includes a community survey about the center.

In Home Family Education

Quarterly reports were submitted by the In Home Family Education Programs which were used to analyze the programs. In addition, quality assurance and evaluation were also conducted on each program by their program affiliates – Parents as Teachers, Healthy Families, and Maternal Infant Health Outreach Workers. Programs also participate in the WV Family Survey and will receive yearly results from HZA. BCF also implemented procedures to ensure that all programs, regardless of being funded by

MIECH, were working towards the federal benchmarks. Additional funding was provided from the WV Home Visitation Program to in home family education programs to help them with these increased reporting requirements.

Family Leadership First

Family Leadership First reports quantitative service data and financial data on a quarterly basis. This program also participates in the WV Family Survey one-time event version.

Partners in Prevention

The evaluation and peer review plan for the Child Abuse Prevention Grants consists of the following:

Analysis:

- Quantitative All grant recipients must track the number of people they serve through their mini-grant program as well as the number of media spots and speaking engagements they coordinate.
- Qualitative Midway through their grant period, Partners in Prevention and Innovation grant recipients must turn in a detailed report of their activities in their communities and the effect they feel these activities had on the prevention of child abuse and neglect. Good Beginnings Mini-Grants (\$1,000) recipients submit their report at the conclusion of their grant activities.
- Peer Consultation: Once per year, all mini-grant recipients participate in peer consultation. This is done with assistance from staff from Prevent Child Abuse WV and other mini-grant recipients. They receive training and coaching on this process to develop a strategic plan for the following year.
- Evaluation: Prevent Child Abuse WV routinely shares information about promising practices and using evidence to support efforts to strengthen families with grantees and works to assist grantees in their efforts to collect and analyze data.

As a Chapter of Prevent Child Abuse America, there is a comprehensive chartering process that each chapter completes every three years that includes a self-assessment with nine criteria areas, identification of TA needs, and a site visit by PCA representatives and another state chapter peers. PCA-WV's re-chartering occurred in October 2008. No improvement plans were required; all information was supplied; and the chapter was successfully re-chartered. This process occurred again in 2012 with no improvement plans implemented.

Grant requirements were changed for SFY 2011 to require mini-grant recipients to report on the logic model that will be submitted as a part of their application packet to TEAM for WV Children. Outcomes were added in SFY 2012 and the use of the WV Family Survey required unless delivering an education program to agencies.

Planned Activities:

BCF will continue to work with the WV Home Visitation Program to evaluate outcome data collected for MIECHV federal benchmarks. BCF will also collaborate with the WV Home Visitation Program to create statewide and local CQI teams for each IHFE program. BCF will continue with the second year of the more structured peer review process for Family Resource Centers. Revisions of the process will be made at the conclusion of the first full round at the end of SFY 13.

The WV Family Survey will be revised based on feedback and continuing collection efforts. Grantees will receive a less confusing format so that better data collection can occur. BCF will continue to coordinate with the WV Home Visitation Program concerning the ongoing random control trial of the MIHOW program.

Efforts mirroring the CQI process created by FRIENDS NRC will be implemented for the Family Resource Networks which bolster the efforts of the CBCAP funded programs and initiatives. BCF will continue to collect quarterly reports identifying qualitative and quantitative evaluation and process outcomes.

CHILD ABUSE PREVENTION MONTH ACTIVITIES

Reported Activities:

For Child Abuse Prevention month in 2013, the CBCAP State Lead distributed the Prevention Month Guide produced by the Children's Bureau, a prevention month packet produced by TEAM for WV Children, and a copy of the Governor's Proclamation to every CBCAP grantee as well as the Family Resource Networks and Community Service Managers in the WVDHHR District Offices. The guides are utilized each year throughout various initiatives including Strengthening Families trainings. WVDHHR will also collaborate with Prevent Child Abuse WV and the WV Children's Trust Fund to continue to promote family stability and make the public aware of child abuse and neglect prevention activities. Strategies such as the generation of media spots, distribution of materials, direct services, and training were used.

Planned Activities:

Throughout the upcoming year and into April 2014, work will continue on the statewide "Our Babies: Safe and Sound" campaign focusing on safe sleeping and coping with crying. Advertising in the form of radio and TV public service announcements will occur as well as professional-to-family sharing of the materials using home visitors and contact with pre-natal and new families in a variety of settings with other professionals.

Campaign materials and information can be found at www.safesoundbabies.com. Building on the success on incorporating the Period of Purple Crying into four birth hospitals this year, work will continue to add more hospitals and community partners. Prevent Child Abuse WV is also hoping to implement a safe sleep program in the hospitals similar to the format of Period of Purple Crying. A video and webinar for nurses and medical professionals are being developed in the upcoming year to complement the Period of Purple Crying efforts.

BCF will continue work on the new human trafficking section of the prevention website which can be located at http://www.wvdhhr.org/bcf/children_adult/cAbusePrev/resourcesCG.asp#human_trafficking.

BCF, with collaboration with OMCFH, provided human trafficking training provided by FBI agent Tessa Cooper at the 2013 WV Home Visitation Conference.

BCF will also continue efforts to promote the Pinwheels for Prevention theme in cooperation with Prevent Child Abuse WV and plans to institute a pinwheel garden media event at a local park near the WVDHHR office will be pursued next year. BCF and community partners will also explore the Pause for a Child for further activities and events to bring awareness of child abuse and prevention. Detailed planning and coordination will be utilized by the Prevention Leadership Council in the coming year to address issues, concerns, and strategies to combat child abuse.