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*National Evaluation of the  
Safe Kids/Safe Streets Program:  
Final Report*

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**Volume II  
Case Studies of the  
Safe Kids/Safe Street  
Demonstration Sites**

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**December 30, 2004**

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## List of Acronyms

ACFS	Anishnabek Community and Family Services
BHF	Building Healthy Families
BSNAF	Building Strong Native American Families
CAC	Children’s Advocacy Center
CASA	Court Appointed Special Advocate
CATF	Lucas County Child Abuse Task Force
CWLA	Child Welfare League of America
CPC	Child Protection Center
CPS	Child Protective Services
CPT	Child Protection Team
CUSI	Chittenden Unit for Special Investigations
DFS	Division of Family Services
DHR	Department of Human Resources
EOWS	Executive Office for Weed and Seed
FCAPC	Family and Child Abuse Prevention Center
GAL	guardian ad litem
HAUW	Heart of America United Way
HFA	Healthy Families America
HFLC	Healthy Families Lucas County
HSCB	Human Services Collaborative Body
IEL	Institute for Educational Leadership
KCPD	Kansas City Police Department
LCCS	Lucas County Children’s Services
LINC	Local Investment Commission
MC3	Madison County Coordinating Council for Families and Children
MDT	multidisciplinary team
MIS	management information system
MSCA	multisystem case analysis
NCAC	National Children’s Advocacy Center
NCL	National Civic League
OJJDP	Office of Juvenile Justice and Delinquency Prevention
OJP	Office of Justice Programs
OVW	Office on Violence Against Women

## List of Acronyms

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PSA	public service announcement
PSP	Public Sector Partners
SAMHSA	Substance Abuse and Mental Health Services Administration
SAO	State's Attorney's Office
SITTAP	Systems Improvement Training and Technical Assistance Project
SK/SS	Safe Kids/Safe Streets
SRS	Department of Social and Rehabilitative Services
TA	technical assistance
VNA	Visiting Nurses Association

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## 1. Introduction

The Safe Kids/Safe Streets (SK/SS) program, sponsored by the U.S. Department of Justice's Office of Justice Programs (OJP), was designed to help communities reduce juvenile delinquency and other problem behaviors by adopting comprehensive, communitywide strategies to combat child abuse and neglect.

Five sites were selected to implement the SK/SS program, which began in 1997. The sites are varied, ranging from mid-sized cities (Huntsville, Alabama; Kansas City, Missouri; and Toledo, Ohio) to rural (Burlington, Vermont) and Tribal (Sault Ste. Marie, Michigan) areas. Initial awards for the first 18 months ranged from \$425,000 for the rural and Tribal sites to \$800,000 for Huntsville and \$923,645 for Kansas City. Unlike the other sites, Toledo received only "seed money"—an award of \$125,000 intended to encourage promising activities already underway in the community. After the first 18-month period, sites were expected to receive four more awards of about the same amount, each covering a year. Sites spent their awards at different speeds, however, so the program lasted beyond the 5½ years originally envisioned for it.

Volume I in this series of reports contains detailed information about the SK/SS framework and the goals, objectives, and expectations of OJP. However, we recapitulate a few key points about the initiative here:

- Sites were expected to develop broad-based local collaboratives to plan and carry out the SK/SS project. These collaboratives were expected to include agencies from the justice, child welfare, family service, educational, health and mental health systems, along with nontraditional partners such as religious and charitable organizations, community organizations, the media, and victims and their families.
- OJP required the sites to develop and obtain approval for an Implementation Plan during their first award period. Because Toledo only received "seed money," it was exempted from this requirement. Sites updated their plans each time they applied for continued funding.
- The site plans were required to cover four key elements: system reform and accountability, a continuum of services to protect children and support families, data collection and evaluation, and prevention education and public information.

## Introduction

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- Three offices within OJP funded and managed the sites. The Office of Juvenile Justice and Delinquency Prevention (OJJDP) provided overall coordination and funded Huntsville and Toledo. The Executive Office for Weed and Seed (EOWS) funded Kansas City. The Office on Violence Against Women (OVW) funded Burlington and Sault Ste. Marie.<sup>1</sup>
- Starting in 1998, OJP involved a training and technical assistance (TTA) team to work directly with the sites and manage a pool of funds that sites could tap to secure other TA. Under this arrangement, each site had a Systems Improvement, Training, and Technical Assistance Project (SITTAP) consultant to focus on system reform issues at the site. OJP also held cross-site “cluster conferences” about twice a year.

## This Volume

This volume, Volume II of the Final National Evaluation Report, consists of case studies of the development and implementation of SK/SS at all five sites from 1997 through June 2003. As of June 2003, all sites were still in operation. Kansas City and Sault Ste. Marie were still spending the fourth of the five awards originally planned (although Kansas City’s award size had been cut). Burlington, Huntsville, and Toledo were close to the end of their fifth awards, but were each slated to receive supplemental awards of \$125,000 to ease the transition from non-Federal sources of support.

The case studies that follow draw upon multiple sources of information collected throughout the national evaluation of the SK/SS Initiative, including project documents, on-site process interviews and observations conducted about twice a year since the program began, and several surveys. The surveys include: three rounds of Stakeholder Surveys; two rounds of Key Informant interviews, and a Survey of Agency Personnel. The other volumes of this report provide additional information about these efforts. Appendices relating to each of the case studies include detailed charts listing strategies, activities, and outcomes of project efforts and logic models mapping the theory of change for each site.

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<sup>1</sup> Recently, the Office on Violence against Women was reorganized and is no longer a part of OJP, though it continues to work closely with different components of that office. For almost all of the SK/SS Initiative, OVW was under OJP, so that is the structure referred to in this document.

## 2. KidSafe, Burlington, Vermont

KidSafe is a project of the Community Network for Children, Youth and Families (“The Community Network”), a not-for-profit organization whose mission is to reduce child maltreatment in Chittenden County, Vermont. The Community Network received its first Safe Kids/Safe Streets (SK/SS) award of \$425,000 in March 1997, to cover 6 months of planning and 12 months of implementation. The award came from the Office on Violence Against Women (OVW), one of three SK/SS funders in the Department of Justice’s Office of Justice Programs (OJP). As planned, KidSafe received four more awards of \$425,000 each. The last of these awards was made in August 2002 and was expected to support the project into July 2003.

In spring 2003, OJP invited KidSafe to submit one last application for a \$125,000 supplement, to cover another year of activities focused on sustaining what the collaborative had begun. This transitional funding will bring the total OJP funding for the life of the project to \$2, 250,000.

### Project Setting

#### Characteristics of the Community

KidSafe is located in Chittenden County, Vermont’s largest county, which contains a mix of urban, suburban, and rural areas. In 2000, the county had 146,571 residents, 39,000 of whom lived in Burlington, the state’s largest city. While more affluent than the rest of the state, Chittenden County has concentrations of poor residents in Burlington and pockets of poverty elsewhere. Racially, the area is relatively homogeneous, with 95 percent of the residents identifying themselves as White.<sup>2</sup> Ethnic diversity is increasing, however, as a result of the county’s status as one of 25 refugee resettlement communities in the United States. From 1989-1998, 2,150 refugees moved to the area—the majority coming from Southeast Asia and Eastern and Central Europe, especially Vietnam and Bosnia. Many of these newcomers are in need of public and private social services.<sup>3</sup>

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<sup>2</sup> U.S. Census Bureau. (2002). *City and county data book: 2000*. Washington, DC: U.S. Government Printing Office.

<sup>3</sup> KidSafe Collaborative. (2002). *Safe Kids/Safe Streets year 5 continuation application*. Burlington, VT: Community Network for Children, Youth, and Families.

## KidSafe, Burlington, Vermont

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Vermont has no county-level government, so the state and 18 municipalities are the primary providers of public services in Chittenden County. The county also is home to many private providers of services for children and families.

When KidSafe began in 1997, Vermont was still emerging from the recession of the early 1990s, which had led to cutbacks in many human service programs. Local informants reported that Chittenden County did not have a strong history of interagency collaboration because of the competition for scarce resources, the sheer number of agencies, and the lack of county government. However, there had been partnerships around child abuse and neglect issues for many years. Moreover, state, Federal, and private funders had increasingly encouraged or required collaboration as a condition of support.

Despite the recession, Vermont policymakers had a strong record of supporting prevention and early intervention for families, including home visiting, parent education, and related initiatives. They had also backed intervention and treatment for batterers, sex offenders, and child victims of abuse. State officials believed these investments had helped produce significant improvements in child and family welfare, reflected in statistics on infant mortality, injuries to children, teen pregnancy, and delinquency.<sup>4</sup> In 1997, statewide figures showed that the number of substantiated victims of child abuse and neglect had declined by 29 percent between 1992 and 1996.<sup>5</sup>

Nonetheless, there were disturbing trends in Chittenden County. In 1995, reports of child abuse and neglect in Chittenden County had begun climbing after 3 straight years of decline; in fact the rate of reports, 18.1 per 1000, was identical in 1992 and 1996.<sup>6</sup> Out-of-home placements of children spiked in 1996, hitting a 5-year peak of 11.8 per 1000 children.<sup>7</sup> The

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<sup>4</sup> On July 23, 1997, *The Burlington Free Press* wrote that Vermont had made major reductions in child abuse and neglect while spending only \$2.7 million yearly (\$68 per child) on prevention and intervention programs designed to benefit children and families. Local observers suggested another contributing factor—the state’s emergence from recession during the same period.

<sup>5</sup> Vermont Department of Social and Rehabilitation Services. (1997). *Vermont child abuse and neglect 1996*. Waterbury, VT: Author.

<sup>6</sup> Telephone communication from Planning Division, Vermont Department of Social and Rehabilitation Services, November 1997.

<sup>7</sup> Data provided to Burlington KidSafe by Vermont Department of Social and Rehabilitation Services, as of June 1998.



county's delinquency rate also had increased substantially and was much higher than elsewhere in the state.<sup>8</sup>

## The Formal Child Protection System

In Vermont, public responsibility for child protective services is assigned to the State Department of Social and Rehabilitation Services (SRS), which has a district office serving Chittenden County. SRS's jurisdiction covers child abuse and neglect committed by a parent or another caretaker, such as a guardian, foster parent, or staff member of a school or day care setting. In Vermont, child abuse also includes sexual abuse of a child by anyone, not just a caretaker. While anybody can report suspected child abuse and neglect, health and mental health professionals, social workers, school, day care, and camp personnel, police, and probation officers are legally mandated to do so. If police answer a call involving child abuse and neglect, they notify SRS.

SRS is responsible for screening referrals of child abuse and neglect, investigating the referrals that meet the screening criteria (called "reports"), and providing services where abuse or neglect has been substantiated. Many substantiated cases are not "opened" for continuing supervision and services. A case is opened only if SRS (or sometimes the Family Court) believes the child remains at risk of harm.<sup>9</sup>

SRS has one other role in the overall public system of child protection. As the probation agency for juvenile delinquents in Vermont, SRS supervises juveniles placed on probation for sexual abuse of a child. Normally, SRS obtains a pre-sentence assessment for sex offenders to assist the Family Court in deciding whether probation or some other type of sentence would be most appropriate.

Besides SRS and local police departments, several other agencies may be involved in following through on reports of child abuse and neglect in Chittenden County.

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<sup>8</sup> Vermont Agency for Human Services. (1996). *Community profile: Chittenden county*. Waterbury, VT: Vermont Agency for Human Services, Planning Division.

<sup>9</sup> In a substantiated case of child sexual abuse, for example, SRS may conclude that the child is not at continuing risk because the perpetrator is a stranger or has no further access to the child.

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- **The Chittenden Unit for Special Investigations (CUSI)**, a countywide law enforcement unit, investigates child sexual abuse, child homicide, and serious physical abuse, plus sexual assaults on adults. Formed in 1992 to reduce disparities in handling of such cases across police departments, CUSI is staffed by the Burlington Police Department, the State Police, and several smaller municipal police departments. Cases involving child victims are co-investigated with SRS.
- **The State’s Attorney’s Office (SAO)** handles the cases in Family Court when SRS petitions to remove a child from his/her home or wants other Court intervention to ensure a child’s safety. The SAO also prosecutes criminal cases of child abuse and neglect referred by CUSI and other law enforcement agencies.
- **The Family Court** hears child abuse and neglect cases brought by SRS, petitions for termination of parental rights (TPRs), and delinquency cases, including sex offenses committed by juveniles. The Court is always involved if SRS removes a child from the home, determining if and when the family may be reunited. Family Court also handles juvenile unmanageability and domestic actions such as divorce, custody, paternity, and child support. Whenever child custody is at issue, the Family Court appoints a guardian ad litem (GAL) for the child, from a list of trained volunteers.<sup>10</sup>
- **The District (Criminal) Court** tries criminal cases stemming from child abuse and neglect if the accused is an adult or a juvenile transferred for prosecution as an adult.<sup>11</sup> A parent or guardian faced with criminal charges in a child abuse case may simultaneously be involved in child abuse and neglect proceedings in Family Court.
- **The Office of the Defender General**, the public defender agency, represents the children in cases where custody is at issue. If the office already represents an indigent adult who is involved in a particular case, the Court appoints a private contract attorney for the children.

Except for CUSI, all the agencies mentioned are state agencies.

Since the advent of the SK/SS project, there has been one addition to the complement of agencies that intervene in cases of suspected child abuse and neglect—the **Children’s Advocacy Center (CAC)**. CAC development will be discussed in more detail below, as part of the story of KidSafe implementation.

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<sup>10</sup> There is no GAL agency. The guardians are trained and coordinated by the Court Administrator’s Office.

<sup>11</sup> Juveniles in Chittenden County are rarely prosecuted as if they are adults, however, unless they are at least 16.

## ***Treatment and Accountability***

In cases that are not opened by SRS or prosecuted, SRS or CUSI's victim advocate may recommend that families take advantage of various services in the community. The families are not obligated to follow through. In cases opened by SRS, however, families can be required to participate in services such as substance abuse assessment, counseling, parent training, or drug treatment. SRS contracts for services to meet many of these needs.

Convicted sex offenders, including those who are incarcerated, are required to obtain treatment. Conviction rates in sex offense cases are high, in the 85-90 percent range, according to local informants, and significantly better than in the pre-CUSI era.<sup>12</sup> Juvenile sex offenders may be placed in a residential facility or put on probation.

## ***The Role of Multidisciplinary Teams (MDTs)***

At KidSafe's inception, SRS, CUSI, and the SAO consulted each other informally on serious cases of child abuse and neglect. However, there was no formal multidisciplinary team and the informal communication between agencies has been described as "fragmented."<sup>13</sup> Meanwhile, the KidSafe grantee was responsible for chairing two Child Protection Teams (CPTs)—one generic and one specializing in child sexual abuse—but their function was not investigative. These CPTs met sporadically in response to referrals from school-based staff, SRS, or other providers, focusing on cases that seemed to be "falling through the cracks." Attendees included SRS, other state agencies, medical personnel, schools, and other service providers, plus a family member, if possible. However, referrals to the CPTs had dwindled by the time KidSafe began, and SRS workers had stopped participating. Local observers variously attributed this to lack of results ("nothing changed"), an anti-SRS bias, or insufficient publicity about the CPTs.

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<sup>12</sup> Clements, W.H., Shtull, P., & Bellow, H. (1999). *Evaluation of the Chittenden Unit for Special Investigations: Phase I findings*. Montpelier, VT: Vermont Center for Justice Research.

<sup>13</sup> Shtull, P. (2002). *Assessment of the multi-disciplinary team in Chittenden County*. Montpelier, VT: Vermont Center for Justice Research.

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### ***Information Sharing Among Public Agencies***

As KidSafe began, there were no cross-agency linkages among the databases maintained by SRS, the SAO, the court system, and police agencies. CUSI and the CPTs had formal protocols covering sharing of information, but otherwise, information was shared on an informal, “need-to-know” basis around specific cases. Although state-level efforts were underway to link all law enforcement agencies and the courts, and to link data across state human service agencies, these efforts were not expected to culminate in time to affect the KidSafe project (and they did not).

### **Prevention and Early Intervention System**

Public and private agencies were providing a wide array of prevention and early intervention services in Chittenden County when KidSafe began. Several programs are particularly relevant to child abuse and neglect, including:

- The Healthy Babies Program, which provided home visiting and other support for Medicaid-eligible pregnant women and babies up to age one. Private providers, such as the Visiting Nurse Association (VNA), delivered most of the services under contracts with the Vermont Department of Health.
- Three Parent-Child Centers, part of a statewide system of support for pregnant women and families. Two centers were freestanding, and a third was based in an elementary school.
- School-based social workers, placed in the majority of the 40 public schools by the local community mental health agency. Services covered Medicaid-eligible children from preschool to grade 12 with emotional, behavioral, or learning problems. Many of these children were affected by child abuse, according to program managers. In addition, most schools had guidance counselors who worked with children and families on school-related problems and tried to help youth in crisis.
- First Call, a 24-hour hotline service, designed to assist families or children in crisis and also coordinate emergency after-hours services for children and their families.
- Several domestic violence programs partially supported by the Federal Violence Against Women Act. They included outreach and services for rural battered women; education for batterers; and enhanced investigation, prosecution, and victim assistance in domestic violence cases.

## ***Public Education and Training***

When KidSafe began, the Community Network was the main provider of public education and cross-agency professional training on issues related to child abuse and neglect and other family issues—mainly through monthly, low-cost seminars. Many other agencies also sponsored periodic presentations. In addition, organizations such as Prevent Child Abuse-VT! worked to educate the public about child abuse and neglect through mass media and other outreach.

## **Changes Over Time**

As described in later sections, over the years KidSafe actively promoted many changes in Chittenden County’s approach to child safety. However, some changes in the project environment occurred independently but are significant to understanding KidSafe’s history and future prospects.

- **A child fatality in Chittenden County.** In 1999, a child died of “shaken baby” syndrome—the first local death from abuse in many years. The event shocked the community and brought new scrutiny to SRS, which had been contacted about the family but had not investigated. As a result, SRS made several policy and procedure changes. SRS broadened its definition of “risk of harm,” thereby expanding the number of cases considered for investigation. SRS also upgraded its management information, by: (1) agreeing to electronically exchange information with the Department of Corrections about the offender status of individuals in SRS cases and (2) within the District Office, computerizing child abuse referrals that are not investigated so that workers can check those records easily.<sup>14</sup> SRS also replaced the district director, although the process took about a year. The new director was extremely supportive of working with the community on child protection issues and became very active in KidSafe, eventually co-chairing its Collaborative Council.
- **Other changes at SRS.** Midway through the SK/SS initiative, SRS embarked on other system changes statewide that were in tune with KidSafe objectives. Vermont was one of the first states to undergo a *Child and Family Service Review* and adopt a Program Improvement Plan, as required by the Adoption and Safe Families Act (ASFA). As a result, in 2002 SRS adopted a new system to monitor performance in achieving safety, permanency, and well-being for children in out-of-home care. The District SRS Director began routinely sharing the quarterly monitoring reports from the new system with the KidSafe Council. SRS also began to implement

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<sup>14</sup> In SRS terminology, a “referral” becomes a “report” if it passes initial screening criteria for investigation.

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Structured Decisionmaking, a research-based method for conducting consistent assessments of children in the child welfare system.

- **The Family Court Permanency Planning Project (PPP).** As KidSafe implementation got underway in 1998, Vermont’s court system was starting its own demonstration in Chittenden County.<sup>15</sup> The PPP sought to resolve cases and achieve permanent placement for dependent children more consistently and rapidly, through improved scheduling, keeping the same judge and attorney involved throughout a case, and “frontloading” services for families who would accept them early in the court process. Like KidSafe, the PPP was collaborative. The coincidence of the two new initiatives offered a natural opportunity to forge stronger relationships between the court and the Community Network. KidSafe staff began serving on the PPP committee and its evaluation subcommittee. Soon, the Family/District Court manager joined the KidSafe Collaborative Council. The Family Court judge who first headed the PPP and his successor were both supportive of KidSafe; the latter became a Council member. In 2002, the PPP began implementing Vermont’s new court protocol for children ages 0-6 in SRS custody—another part of Vermont’s Program Improvement Plan under ASFA. This protocol, which establishes detailed expectations for the timing and content of court proceedings, is designed to reunify children with their families within 1 year, or if reunification is not possible, to achieve adoption or another permanent placement within 2 years.
- **Significant leadership turnover in the formal child protection agencies.** Over the course of the project, the Family Court judge and SRS district director changed twice; the director of CUSI changed three times; and the state’s attorney changed once. Inevitably these leadership transitions meant that some KidSafe plans were put on hold. On balance, however, most turnovers were neutral or positive for the project, as new leaders were sometimes more in tune with KidSafe objectives than their predecessors. The most recent leadership change, in April 2003, cost KidSafe the SRS director who had been a strong supporter. As of July, however, KidSafe was pleased to learn that the director of the Winooski Family Center, an active participant in KidSafe and beneficiary of its financial support, had been selected to fill the SRS post.

Overall, KidSafe staff proved adept at recognizing the opportunities inherent in these situations. Following the child fatality, for example, the Community Network built its credibility by convening a community meeting to discuss ways to prevent future deaths and by doing a radio interview. The KidSafe director was later invited to join the selection committee for a new SRS director and served on the most recent selection committee as well. Whenever agency leaders changed, staff worked to bring them into the collaborative. Where other collaborations emerged with complementary goals, KidSafe volunteered or was invited to join.

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<sup>15</sup> The initiative is now well beyond its pilot phase.

Some of the biggest changes in the KidSafe environment still present challenges, however.

- **A worsening economy.** Early in 2001, Vermont began to feel the effects of the nationwide economic downturn, reflected in shrinking state and foundation resources. Conditions worsened in the wake of September 11 and deteriorated further throughout 2002. Expecting severe revenue shortages, the governor announced state budget cuts and imposed a hiring freeze. Although SRS caseworkers were exempt from the freeze, the district deputy director's position was eliminated, and the substitute care budget was cut. Early in 2003, SRS reported signs that the budget crunch was taking its toll, including a turn for the worse in first-quarter case outcomes, loss of some foster care parents, and closure of a local residential treatment program for adolescent sex offenders.
- **New state leadership.** With a new governor in office as of 2003, there is considerable uncertainty about how he will handle the state's economic crisis and its impact on human services. He has directed Vermont's Agency for Human Services (AHS)—the umbrella agency for SRS, the Health Department, and other agencies—to reorganize to provide more holistic, comprehensive, and resource-efficient services to Vermonters. The effort began with a definition of new "policy clusters" that cut across traditional agency lines. It is too early to gauge the implications for Chittenden County, but AHS plans to schedule policy forums to solicit ideas from local communities. KidSafe expects to be involved in these discussions.

## Introduction to the Project

The Community Network for Children, Youth and Families originated in 1978, with a grant from the National Center for Child Abuse and Neglect for a "Community Service Improvement Network." United by their interest in reducing child maltreatment, the original partners included SRS, the Visiting Nurse Association, the local community mental health center, Spectrum Youth & Family Services, the local hospital, and a home for teenage mothers. The group formed an Interagency Board in 1981 and incorporated as a nonprofit agency in 1986. By the time of the SK/SS application, membership in the Community Network had expanded to 22, including several other private providers of services to children and families, the Family Court, and the State Departments of Health, Social Welfare, and Corrections.

The Community Network's Board was composed of the executive directors of the member agencies or their designees. Member agencies paid dues of \$200 a year. Although formal membership was limited to agencies, the Community Network welcomed participation

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of law enforcement officers, physicians, parents, educators, attorneys, businesspeople, and other community members in the agency's teams, task forces, and workshops.

The Community Network provided no direct services, but rather served as coordinator, advocate, and educator around issues of child abuse and neglect. It was the designated convener of Vermont's statewide Child Fatality Review Committee and the county's CPTs (described above). It also sponsored monthly workshops for professionals and parents, an annual conference, and other educational activities. In 1995-96, the Community Network also convened a planning process to help develop "Community Partnerships." The Vermont AHS saw such partnerships as potential vehicles for giving localities more control over human service funding decisions. In Chittenden County, this planning process gave birth to the Champlain Initiative—a group of community teams that meet regularly to address diverse aspects of community health and well-being.<sup>16</sup>

Over the years, the Community Network experienced ups and downs in its funding. In 1994, the Community Network lost its funding from the United Way, which decided to support direct services only. Thus, other outside support was essential to maintain a paid staff. At the time of the SK/SS application, the Community Network's annual budget was \$29,000, derived primarily from member dues and two small grants. This budget supported a part-time Network Coordinator, working in donated space, and a contract bookkeeper. Local interviewees report that at this point, the Community Network's future seemed uncertain.

## Development of the Safe Kids/Safe Streets Proposal

The Community Network first learned about the SK/SS initiative from one of its member agencies in August 1996, less than a month before the Federal deadline for proposals. Because the Board did not normally meet in August, the Network Coordinator quickly consulted a few members, who agreed that SK/SS's collaborative emphasis and its focus on child maltreatment made it appropriate for the Community Network to apply.

Given the short timeframe, the coordinator developed the application without the benefit of any formal meetings. He managed, however, to survey more than 50 Community Network members and other agencies about their perceptions of current needs and resources.

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<sup>16</sup> The Champlain Initiative was officially designated as a Community Partnership by AHS, but it does not have decisionmaking authority over AHS resources. AHS funded the United Way to staff the Initiative.



Ultimately, 33 agencies signed off on the SK/SS proposal, including all members of the Community Network.

According to the application, Community Network staff would carry out the project, working with a communitywide collaborative. This collaborative would extend beyond Network members, to include other social service agencies, attorneys, judges, police, corrections and Family Court staff, medical providers, educators, parents, clients, and community leaders.

The target area would be Chittenden County. The application cited the recent upturn in child abuse and neglect figures for the county, and particular problems in Burlington, where reported physical abuse was triple the statewide rate and teen pregnancy and delinquency were twice the state average. Too many families were still “falling through the cracks.”<sup>17</sup> Drawing upon the quick community survey, the Community Network provided a long list of objectives, to be refined during the planning phase of the project.

The Community Network requested the full amount available for rural applicants—\$425,000. Although the OJP solicitation had specified an allocation of \$75,000 for planning, the Network proposed a split of \$100,000 for planning and \$325,000 for implementation. In keeping with the Network’s historical tradition of abstaining from direct services and thereby avoiding competition with member agencies, the proposal budgeted \$198,000 of the implementation funds for subgrants to local service providers. Priorities for the subgrants were to be identified during the planning phase. To support SK/SS, the Community Network planned to expand its part-time staff to 1.6 full-time equivalents (FTEs) in the planning phase and 2.4 FTEs when implementation began. Some funds were also set aside for Management Information System (MIS) consultation and for administrative expenses. Although the Program Solicitation mandated a local evaluation effort, nothing was budgeted for local evaluation.

The Community Network application was submitted in September 1996.

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<sup>17</sup> Community Network for Children, Youth and Families. (1996). *Application for Safe Kids/Safe Streets*. Burlington, VT: Author.

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### **The Award**

OJP notified the Community Network of its selection for SK/SS in March 1997. Federal responsibility for funding and overseeing the project would rest with OJP's Office on Violence Against Women.

To secure the award, the Community Network would have to conform to the solicitation by cutting the planning budget to \$75,000 and reallocating the other \$25,000 to the implementation phase. Network members, who had had little time to review the original application before submission, suggested additional changes. Some members were uncomfortable with creating a large Community Network operation, because of the agency's erratic funding history, or felt that some management and administrative tasks could be done at less cost. And given the area's recent recession and funding cutbacks, there was strong sentiment for investing as much as possible in services. As a result of the Federal and local input, the final budget proposed to hire a temporary facilitator for the planning process rather than hire a project director immediately. The Community Network also would contract out the fiscal management. The net effect of the revisions was to cut the planning budget as OJP required and to expand the pool of subgrant funds. The subgrant allocation grew from \$198,000 to \$290,000—representing more than two-thirds of the total award and 80 percent of the implementation budget.

Later, OJP began to express reservations about the project's heavy investment in service subgrants. However, this budget revision was approved.

### **The Planning Phase: May 1997 - August 1998**

#### **Overview of the Planning Phase**

Planning for KidSafe began in earnest in May 1997, following approval of the revised project budget and an introductory meeting for SK/SS sites in Washington, DC. Development of an Implementation Plan—required before release of the implementation funds—took until March 1998, about 10 months. It took another 5 months to complete the cycle of Federal reviews, comments, and KidSafe revisions to the Plan, culminating in final approval in August 1998. Federal project officers approved some implementation expenditures earlier, however, so the planning and implementation phases actually overlapped.

## Local Perceptions About Needs and Issues

The Community Network's SK/SS application highlighted several problem areas for the community, including:

- Gaps in treatment services for victims and perpetrators;
- Lack of long-term followup and case management for families;
- Inadequate communication and coordination of effort among Family Court, SRS, law enforcement, corrections, and service agencies around interventions and services for abusers, victims, and families;
- Service barriers for cultural/ethnic minorities (primarily Asians and Central European immigrants) and those with mental health or cognitive limitations; and
- Inadequate representation of children and families in Family Court, because of high caseloads and limited training.

Interviews conducted by the evaluator in October 1997 elicited several other concerns from staff, Community Network members, and other stakeholders. These included:

- Lack of prevention and early intervention services for families with problems not severe enough to trigger SRS intervention, or problems not conventionally defined as child abuse (mainly, domestic violence);
- Lack of “user-friendly” services and lack of family involvement in case planning;
- Lack of hardware and software support for interagency information sharing; and
- A general shortage of public funding for child and family services, which had led agencies to protect their “turf.”

These issues and concerns formed the backdrop for KidSafe planning activities.

## The Planning Process

For the planning phase, the Community Network hired a part-time consultant to facilitate the process and a half-time secretary. The facilitator began work in August 1997. Counting 12 hours a week of support from the Network Coordinator, staffing for the planning

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phase amounted to 1.8 FTEs. The project also received some in-kind support from the director of the Vermont Center for Justice Statistics, a state statistical analysis center (SAC) supported by the U.S. Department of Justice.<sup>18</sup>

The planning effort began to take shape in June 1997, with a widely advertised kickoff meeting to introduce the project and recruit members for planning committees. As a result of this initial publicity, KidSafe attracted 30 or more programs and groups beyond the Network members. The participants volunteered for four teams, whose focus corresponded roughly to four required SK/SS program elements:

- The Information Systems and Evaluation (ISE) Team (covering the Data Collection and Evaluation element);
- The Training, Education, and Outreach (TEO) Team (covering the Prevention Education/Public Awareness element, plus professional training issues);
- The Strategic Planning and Finance Team (SPT) (in practice, focusing mostly on enhancing the Continuum of Services); and
- The Systems Change and Implementation Team (SCT) (covering the System Change and Accountability element).

Teams met through the summer and brought their plans and recommendations to a second public meeting, in October 1997. The committee plans were not data-driven, but drew mostly on the participants' opinions and experience. It appears that few data bearing on the project concerns were readily available.

At the October meeting, the attendees adopted a staff proposal to create a permanent governing body for KidSafe, called the Management Council. The Council was to have 20 members—including two representatives appointed by the Community Network Board and at least four from each of the following sectors: (1) the justice and child protective services systems; (2) school, child care, and medical providers; (3) prevention, intervention, and treatment providers; and (4) parents and other community members. These requirements expanded upon the standards for agency representation included in the SK/SS solicitation.

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<sup>18</sup> The Center had applied for and received a 1-year, \$20,000 supplement that was available to SACs who were willing to provide support to the KidSafe project in their area. Part of the funds covered the SAC director's participation in the Information Systems and Evaluation Team and some other project meetings. The rest of the funding supported several research activities that were not directly related to KidSafe, although they had a common focus on children and youth.

Interested parties were asked to volunteer for the Council. KidSafe had to actively recruit members from the parent/community sector, but had no trouble filling the other slots.

The initial Council included the district director of SRS, the state’s attorney, a school superintendent, the director of the community mental health agency for children and families, the director of CUSI, heads of three local youth programs, and the director of the area’s child care referral agency. There were also senior staff from Children’s Legal Services, the Family Court, the Vermont Office of Alcohol and Drug Abuse Prevention, the VNA, Women Helping Battered Women, and a school guidance counselor, a pediatrician, and four community members. Members agreed to serve for a year.

The Council began meeting monthly in November, taking responsibility for policy and funding decisions. By this point, some of the committees had already made substantial progress.

The SPT had identified five strategy areas, with specific priorities under each, and had reached a consensus on how much subgrant funding should be allocated to each strategy. Under the “Abuse Intervention” strategy, for example, the priorities included long-term case management and support, supervised visitation for noncustodial parents, parent education for batterers, services for parents with special needs (e.g., mental health problems), and services for child witnesses of domestic violence.

Meanwhile, the SCT was developing a broader vision for system improvement. This vision linked two approaches—the CAC model and the “Family Advocate model,” both of which would be new to Chittenden County. In the committee’s view, the CAC could provide multidisciplinary assessment, case management, and some degree of “one-stop shopping” in child abuse cases, probably by co-locating services with the existing CUSI program. The other important innovation, the family advocates, would consist of trained volunteers providing family-friendly, long-term case management. Many details of these plans were not fleshed out, including the kinds of cases to be targeted. However, the committee saw this structure as the best hope for addressing many gaps in the current system.

Using input from the teams, the Management Council approved the subgrant allocations shown in Table 2-1. The largest allocations went to abuse intervention (32%) and prevention/early intervention (28%), followed by systems change and accountability (23%).

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<b>Strategy Area</b>	<b>Budget</b>	<b>Percent</b>
Identification and assessment	\$19,716	7%
Prevention & early intervention	81,090	28
Abuse intervention	94,128	32
Treatment issues	27,666	10
Systems change and accountability	67,426	23
<b>All areas</b>	<b>\$290,026</b>	<b>100%</b>

Reflecting on these allocations, one SCT member later observed that it had been a mistake to separate discussions of system change from strategic planning. In effect, while SCT members were conceptualizing a new and better system, the SPT had been dividing up the funding to fill service gaps. The SPT had not exactly ignored system issues—but it had come up with a different agenda, which did not leave much money for investment in the SCT’s ambitious model. (Unintentionally, the SK/SS program announcement—with its division of project effort into four elements—may have contributed to this result, since KidSafe structured its committees along the same lines.) In any case, this appears to have been a minority view. However, it may shed some light on both the overall resource allocations and the fact that some parts of the SCT vision—mainly the family advocate component—were later dropped.

Once the Management Council had agreed upon the subgrant priorities and allocations, staff began to prepare a formal RFP (Request for Proposals). Their idea was to issue the RFP and select subgrantees in time to include them in the Implementation Plan. Throughout this period, staff spoke regularly with their Federal project officer at OVW, who reviewed the draft RFP and suggested a few changes. The project officer’s main misgiving was that it was premature to select subgrantees before Federal approval of the Implementation Plan. KidSafe staff were determined to proceed according to the original timeline, however. The project had generated a lot of enthusiasm and now had a momentum of its own. Having failed to discourage the RFP process, the project officer strongly cautioned staff not to commit subgrant funds until their Implementation Plan had been approved.

KidSafe released its RFP on schedule in December 1997. In January, Management Council members split into subgroups to review the 27 proposals received, then reported to the full group. In the end, the Management Council accepted 15 proposals from 13 providers—in some cases after some negotiation. The grants, ranging from \$3,000 to \$50,000, totaled

\$263,747. The Community Network itself was awarded two of the subgrants, totaling \$20,000, neither of them for direct services. Most other subgrants focused on direct services, however. No proposal was accepted under “Culturally Competent Services.” After negotiations with the sole applicant failed, the Council decided to rebid this priority later.

One proposal was accepted that did not address issues on the original list of priorities. This was a proposal from the SAO to develop a Juvenile Justice Unit and expand training for handling delinquency and child abuse cases. Reviewers agreed that this would be an important avenue for systems change, given that the SAO then had insufficient staff to dedicate to these cases.

Six of the successful proposals came from organizations with a member on the Management Council. Membership on the Council did not guarantee success, however. One proposal from a Council member’s agency was rejected, and some Network Board members also were turned down. By and large, informants interviewed by the evaluator felt that the decisionmaking process had been fair.<sup>19</sup> Letters informed the subgrantees of their selection, stating that all funding would be contingent upon the Federal government’s acceptance of the Implementation Plan.

## **The Draft Implementation Plan**

Staff frequently spoke with their Federal project officer while developing the written Implementation Plan. They also participated in monthly conference calls and two face-to-face “cluster” meetings of the SK/SS sites and OJP, which provided additional information about OJP requirements and expectations. One of the meetings occurred in tandem with a national conference on management information system (MIS) issues, which OJP required the sites to attend.

KidSafe staff shared a preliminary draft of the Implementation Plan with OJP in January 1998, followed by the final draft in March. This final draft incorporated the results of the RFP process. It also refined the Community Network’s original proposal with respect to goals, target population, and governance. The revised KidSafe goals were to:

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<sup>19</sup> Staff did not foresee one potential conflict of interest when they assigned proposals to the review teams, and some hard feelings resulted in this instance. In later years, review procedures were refined, and there were no further complaints about conflict in the RFP decisions.

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- Increase community awareness and reporting of child abuse;
- Refer families identified as having multiple risk factors for child abuse and neglect to effective prevention and early intervention services before crises develop and strengthen the capacity of these services overall;
- Increase the capacity and timeliness of intervention and treatment services for abused children and their families; and
- Strengthen effectiveness and accountability of child protection systems through improving front-end communication and ongoing collaboration between the agencies responsible for ensuring child safety and the service providers and community members who support families where child abuse and neglect is present.

The primary target populations would be: (1) “those children whose abuse and neglect are invisible to our community because it’s never reported to begin with, or because it’s reported but insufficiently treated”; and (2) “families with multiple known risk factors. . . , especially those related to a history of family violence.”<sup>20</sup>

The management structure for KidSafe would remain relatively unchanged from the planning phase, except that a permanent project director would be hired in place of a facilitator. The Management Council would remain the policymaking and monitoring body for KidSafe, with the Network Board signing off on some decisions. Three of the four original committees would also continue, along with a new Operations Team consisting of the subgrantees. While the Council met OJP’s requirements for representation, KidSafe saw the collaborative as much broader than the Council and recognized that some types of stakeholders had been underrepresented during planning. Therefore, the project would work to bring in parents and youth with experience in the child protective system, the media, nontraditional groups such as business and civic leaders, and more professionals in the court, legal, and medical fields.

The KidSafe subgrants were expected to be the primary vehicle for carrying out most of the project objectives. Nine subgrants would expand or enhance direct services for families at risk, victims, and/or offenders—running the gamut from treatment for adolescent sex offenders and young victims of sexual abuse to home visiting for high-risk families to community-based support for parents and grandparents. Three of the service subgrants would

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<sup>20</sup> KidSafe Collaborative. (1998). *Implementation plan: 1998-2003*. Burlington, VT: Community Network for Children, Youth, and Families.



focus on families in conflict—supporting a new supervised visitation center, parent education for batterers, and a therapeutic program for child witnesses of domestic violence. Two organizations would provide education about child abuse, one focusing on elementary school children and the other on abusers, their family, and the public. The SAO would improve its capacity to handle dependency and delinquency cases. Meanwhile, the Community Network would use its two subgrants to coordinate development of the CAC and to promote professional training and public awareness.

The plans for the data collection and evaluation element of SK/SS were sketchy. The ISE had met regularly, but had just a handful of active members and only one with expertise in evaluation and management information issues (the director of the Vermont Center for Justice Statistics). KidSafe would immediately develop a reporting system and common intake forms for its subgrantees, but broader MIS plans were left open—to be studied further with the help of a consultant. Staff seemed somewhat overwhelmed after attending a national MIS conference at OJP’s behest. The Network Coordinator and some stakeholders saw a large gulf between what OJP appeared to expect in this area and what seemed possible, given the project budget and the fact that public MIS were almost entirely a state responsibility.

## **Negotiating the Final Implementation Plan**

While awaiting OJP’s review of the Implementation Plan, KidSafe and the Community Network moved forward in several areas. A permanent project director was hired and began work in March 1998. Two new teams began meeting, an Operations Team composed of prospective subgrantees and a CAC Task Force. New proposals also were solicited for the Cultural Competency strategy, but once again, the Council decided to pull back after considering the only bid<sup>21</sup>—this time, to conduct a needs assessment and do more outreach to refugee groups.

Meanwhile, the successful subgrantees were eager to get started, especially those who needed to hire staff or gear up for summer programs. KidSafe staff reminded them that if they spent anything before OJP reviewed and approved the Plan, they would do so at their own risk. However, some subgrantees decided to take the risk. Staff, too, thought the risk was small and expected a quick turnaround for their Plan.

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<sup>21</sup> This was not the same bidder as in the first round.

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They were mistaken. Oral comments from the project officer, received in late April, seemed mostly favorable. However, written comments from the full SK/SS management team at OJP arrived early in May and raised the possibility of significant delays. OJP was particularly concerned about: (1) the need to broaden the collaborative membership; (2) the lack of baseline data against which to measure progress and the need to quantify many project objectives; and (3) the lack of detailed training/education, evaluation, and MIS plans. KidSafe was asked to respond to these concerns (plus many narrower issues and comments) and to provide training, evaluation, and MIS plans prior to final approval of the Implementation Plan.

The Management Council directed staff to respond as quickly as possible. The fact that the subgrantees were anxiously awaiting funding, and some had already started work, was a major concern. So was the loss of momentum. Council members and staff felt that several of OJP's issues and suggestions, while reasonable, could only be addressed through longer term work. KidSafe immediately responded to a number of the comments and described plans for addressing the others. After some negotiation, OJP released first-quarter implementation funds, in exchange for promises that KidSafe would deliver additional materials, including a training and education plan, over the summer. KidSafe complied, and OJP formally approved the Implementation Plan on August 29, 1998—5 months after submission of the final draft. Funding for the MIS and evaluation components was still withheld pending approval of plans, however.

The approved Implementation Plan did not differ dramatically from the earlier version, although it was more detailed. However, these early interactions between OJP and KidSafe colored some of the subsequent project history. On the project side, stakeholders felt that OJP had been unclear about its expectations and insensitive to the constraints of small, low-budget programs. On the Federal side, program managers felt that KidSafe had precipitated its own crisis by ignoring their advice and moving too quickly with the subgrant process.

A timeline depicting the key events of KidSafe's planning phase appears in Table 2-2.

**Table 2-2. Timeline for KidSafe’s Planning Phase**

<b>Date</b>	<b>Event</b>
<b>1996</b>	
August	The Community Network begins developing SK/SS application
September	Application submitted
<b>1997</b>	
March	SK/SS award notification
May	Kickoff cluster meeting for sites in Washington, DC
June	Local kickoff meeting for KidSafe (first stakeholders meeting)
July	Four planning teams organize and begin meeting
August	Consultant hired to facilitate the planning phase
September	OJP technical assistance meeting on technology/MIS
October	Second stakeholders meeting
November	KidSafe Management Council holds first meeting
December	RFP for subgrants issued
<b>1998</b>	
January	<ul style="list-style-type: none"> <li>▪ Management Council selects subgrantees</li> <li>▪ Preliminary Implementation Plan submitted to OJP</li> <li>▪ Third stakeholders meeting</li> </ul>
March	<ul style="list-style-type: none"> <li>▪ Project director starts work</li> <li>▪ Implementation Plan submitted to OJP</li> <li>▪ OJP cluster meeting on team-building and accomplishments</li> </ul>
April	Subgrantees begin meeting as Operations Team
May	<ul style="list-style-type: none"> <li>▪ OJP provides written comments on Implementation Plan/requests additions</li> <li>▪ KidSafe responds to comments and negotiates revision schedule</li> <li>▪ OJP releases first quarter implementation funding for KidSafe grantees</li> <li>▪ Subgrantees begin work officially</li> </ul>
June - August	KidSafe expands Implementation Plan, adding detailed plan for Training, Education, and Outreach
August	<ul style="list-style-type: none"> <li>▪ Implementation Plan approved</li> <li>▪ Revised Training, Education, and Outreach plan submitted to OJP</li> </ul>

## **Project Implementation**

### **Overview of Implementation Phase and Turning Points**

Implementation of KidSafe effectively began in May 1998, with OJP’s partial release of implementation funds, although the plan was not officially approved until the end of that summer. Thereafter, KidSafe submitted continuation applications every year to qualify for renewed funding. The applications for the third, fourth, and fifth grants included updates of the approved Implementation Plan.

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Through 2000 (covering the original award and two continuations), KidSafe proceeded mostly according to the original plans, with some adjustments for staff turnover and responding to new local opportunities. The project continued to invest heavily in subgrants, most of which were refunded each year. These subgrants came to be known as the “Partner Projects.” The small project staff supported the KidSafe Council and various committees and oversaw the Partner Projects. The balance of staff time was devoted to training, public education, and working collaboratively with other groups, such as the Family Court’s PPP. As KidSafe implementation proceeded, the Community Network Board began to discuss agency reorganization—in large part, to recognize and accommodate the changes that KidSafe was bringing to the agency’s mission, responsibilities, and structure. This reorganization got underway in 2000.

In early 2001, KidSafe began to significantly shift its emphasis, mainly as a result of OJP’s response to its fourth funding application. In essence, OJP staff wanted KidSafe to spend fewer resources on the Partner Projects—which were primarily service expansion efforts, in OJP’s view—and more on staffing broader system change initiatives.<sup>22</sup> OJP had raised these concerns the previous year and believed that the fourth grant application, which reduced subgrant funding by 5 to 10 percent, had not gone far enough to address them. KidSafe staff and stakeholders were especially alarmed by this response, because the RFP decisions had already been made for the coming year, and subgrantees were eagerly awaiting their annual renewals. OJP staff were equally dismayed by what they saw as a replay of the first year—KidSafe had made subgrant notifications (albeit with the caveat that awards were contingent upon OJP approval) while major concerns about project plans were still unresolved.

Early negotiations with OJP over the plans for the fourth grant led to a strategic planning session involving OJP, the Network Board, and key project stakeholders, convened at OJP’s insistence. The meeting, which took place in Burlington in May 2001, was a turning point. By all accounts, it was a tense, difficult session. Many stakeholders had trouble grasping OJP’s criticisms. They thought KidSafe *had* been changing the system and were surprised to find that they were not meeting expectations. In contrast, OJP felt that its concerns were long-standing, and perceived that staff had failed to share them. Despite the tensions, by the end of the meeting, the group had begun to understand OJP’s expectations more clearly and outline more expansive system change plans. Negotiations over the details of the KidSafe plan

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<sup>22</sup> Coincidentally, these discussions came just as the departure of the Network coordinator was announced—this was the first change of leadership at the Community Network since KidSafe implementation had begun.

continued off and on for the remainder of 2001, with OJP releasing funds in increments. This allowed some new initiatives to begin and let ongoing subgrant projects proceed, although with some uncertainty about their ultimate funding. Substantial cuts in the Partner Projects did not occur until the fifth grant period.

Thus, KidSafe implementation can be usefully understood as having two phases—before and after the Grant 4 negotiations. Although some project efforts were relatively unaffected, these events stimulated several new initiatives and changed overall resource allocations. Temporarily, however, the negotiations diverted a good deal of the project director's time from other planned activities.<sup>23</sup>

## Budget

Table 2-3 demonstrates the shift in emphasis, based on project budget allocations for three time periods—Grant 1 (the combined planning/initial implementation phase, 1997-98), Grant 2 (early implementation, 1999), and Grant 5 (late implementation, 2002-03). As shown, between Grant 2 and Grant 5, KidSafe increased allocations for system reform efforts considerably and decreased the allocations for continuum of service activities. This is true whether we look at spending as a percentage of the overall budget or actual dollar allocations. In fact, the data in the table almost certainly understate the magnitude of the shift that occurred, for two reasons. First, the table assigns management and administrative staff to a separate category because we lack precise documentation for how they allocated their time. However, we know from our own observation and interviews that KidSafe management staff were spending much less time on continuum of services activities (mainly subgrant monitoring and support) in 2002 than in 1999, and correspondingly more time on system reform activities. Second, the direct service subgrants that made up the continuum of services budget always included some secondary activities, such as cross-training, public education, and data collection, that supported other program elements. And over time, KidSafe encouraged the subgrantees to spend more time on such activities.

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<sup>23</sup> A more complete discussion of the chain of events surrounding the Grant 4 application can be found in Gragg, F., Cronin, R., Schultz, D., & Eisen, K. (2002). *Year 4 status report on the implementation of the Safe Kids/Safe Streets program*. Rockville: MD: Westat.

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**Table 2-3. Comparison of KidSafe Budget Allocations, Grants 1, 2 and 5: Percentage Distribution<sup>a,b</sup>**

Category	Grant 1 4/1/97-12/31/98		Grant 2 1/1/99-12/31/99		Grant 5 4/1/02-3/31/03		Percent change in allocations, Grant 2- Grant 5
<b>Program Elements</b>							
System reform and accountability	\$ 49,630	12%	\$ 57,670	14%	\$ 98,462	23%	+71%
Continuum of services	201,396	48	204,899	48	131,773	31	-36
Data collection and evaluation	—	0	12,580	3	21,694	5	+72
Prevention education/public information	17,695	4	20,175	5	26,012	6	+29
Unallocated subgrants <sup>c</sup>	31,160	7	4,534	1	—	0	—
<i>Subtotal: Program components</i>	<i>299,881</i>	<i>71</i>	<i>299,858</i>	<i>71</i>	<i>277,941</i>	<i>65</i>	<i>-7</i>
<b>Staffing and Administrative</b>							
Management and administrative staff <sup>d</sup>	101,743	24	98,436	23	112,647	26	+14
Administrative expenses	22,870	5	26,200	6	36,436	9	+39
<i>Subtotal: Staffing and administrative</i>	<i>124,613</i>	<i>29</i>	<i>124,636</i>	<i>29</i>	<i>149,083</i>	<i>35</i>	<i>+20</i>
<b>Total</b>	<b>\$424,494</b>	<b>100%</b>	<b>\$424,494</b>	<b>100%</b>	<b>\$427,024</b>	<b>100%</b>	<b>+1</b>

<sup>a</sup> All figures are based on Westat analyses of the Grant 1 project budget dated 9/9/97 (\$424,494), the Grant 2 project budget dated 1/21/99 (\$424,494), and the Grant 5 project budget labeled "Revision 3" (\$427,024).

<sup>b</sup> Subgrant activities were allocated according to their primary purpose. However, all subgrants cut across the program elements. For example, all subgrantees were required to provide data for local evaluation and nearly all providers of direct services assisted with cross-training other professionals, a system reform activity.

<sup>c</sup> In Grants 1 and 2, some funding had been set aside for subgrants, but not yet allocated. Therefore, it was not assigned to a program element.

<sup>d</sup> In Grants 1 and 2, all staff time (for the project director, the Network Coordinator, and office manager) was allocated to this category. In Grant 5, only the project director's and officer manager's time was allocated to this category. The assistant project director and the cultural diversity coordinator's time was allocated to the system reform element, based on their defined responsibilities. The training and outreach coordinator's time was divided equally between the system reform and the prevention education/public information element.

Budgets for the data collection/evaluation and prevention education/public information elements has not changed nearly as much in terms of absolute dollars. The fact is that these activities accounted for small proportions of budget allocations in all 3 years. However, even modest dollar increments between Grants 2 and 5 translate into large percentage increases.

### Staffing and Management

Throughout KidSafe, the project has been located in downtown Burlington, where the Community Network leased new quarters as KidSafe implementation began. Previously staffed only by the part-time coordinator, the Community Network added a KidSafe project director to work about 80 percent time and an office manager to work 75 percent time. The

Network Coordinator was also budgeted to spend half-time on the project, bringing total staffing to just over two full-time equivalents (FTEs). With minor variations, this remained the staffing level through April 2001, when the Network Coordinator resigned.

At that point, the KidSafe project director took over management of the Community Network and the project. Since KidSafe represented the bulk of the Community Network's activity, this made sense organizationally. However, KidSafe added staff to offset the additional burden on the project director and meet OJP requirements for Grant 4. A nearly full-time assistant project director joined the project in fall 2001, followed by a half-time multicultural coordinator and a quarter-time TEO coordinator in 2002.<sup>24</sup> Thus, KidSafe entered its final year of full funding with its largest staff ever—about 2.5 FTEs.

In addition to the core project team, the project has had a local evaluation consultant since the summer of 1999. The project also briefly had a VISTA worker, but when she resigned unexpectedly, the position was lost due to cuts in the local VISTA program. The project also weathered several changes of officer manager and two changes of TEO coordinator. However, project leadership was extremely stable. The original project director has overseen KidSafe since the beginning of the implementation phase. The Network Coordinator, who had written the original proposal, remained on board for 4 years. The assistant project director hired in 2001 was a longtime participant in KidSafe and a former co-chair of the Council. According to some stakeholders, the leadership changes that did occur were positive, since they had not been satisfied with the Network Coordinator's performance. (Westat evaluators independently observed that KidSafe initiatives assigned to the coordinator were especially prone to fall behind schedule.)

## **Project Governance and the Collaborative**

To date (June 2003), the governance structure for KidSafe has remained much the same as when the "KidSafe Management Council" first met in November 1997. Now known as the KidSafe Collaborative Council (or KidSafe Council, for short), the group meets monthly to make decisions about KidSafe policy and resource allocations, strategize about issues related to child and family well-being, and share information. The Council is now somewhat larger than

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<sup>24</sup> The assistant project director was hired full-time, but 5 percent of her time was assigned to other Network responsibilities. The multicultural coordinator's time was obtained through a contract with the community mental health center, which supported the other half of her time.

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it was originally (about 25 members versus 20) and no longer formally allocates members across four sectors.<sup>25</sup> However, the group remains committed to diverse representation and includes a cross-section of formal child protection, service provider, and community perspectives. There are no membership requirements other than a commitment to serve at least a year. Co-chairs are drawn from the membership and change every year or two. The district director of SRS and the allocations director for the United Way took over as co-chairs in fall 2001. The United Way representative has been serving alone on a temporary basis since the district director left her SRS post in April 2003.

Many agencies have been represented on the Council for years, but the range of agencies has expanded, and in particular, participation by schools increased over time. The Family Court also became a much more active presence. Changes in 2002 and 2003 included the addition of the Burlington School District's diversity/equity coordinator and a new parent representative. While the Council membership is more varied than that of the original Network Board, most members are human service professionals. The Council has had only limited success in attracting "nontraditional" members and has never had business or faith-based representation. One parent representative with consumer experience in the child protective system has remained committed to KidSafe long-term. However, in several other instances, staff succeeded in recruiting community or parent representatives, only to have them drop out after a few meetings.<sup>26</sup>

While its own structure remained constant, the Council's place in the larger organization gained importance, as a result of the agency restructuring that began 3 years into the project. The old Community Network was a membership organization of two dozen agencies, mostly direct service providers, whose representatives all sat on the Board and functioned much like a professional association or interest group. Through a strategic planning process, the Community Network shifted to a more traditional nonprofit organizational structure. The Community Network no longer has "members." A small Network Board handles agency oversight, personnel, and finances, and—in a departure from previous practice—the Board also has assumed formal responsibility for fund-raising. At the same time, the KidSafe Council acquired an expanded mission as the agency's permanent forum for "visioning" and policy setting about child abuse and neglect. The transition was marked by

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<sup>25</sup> Staff of both U.S. Senators are also invited to participate and occasionally do so.

<sup>26</sup> Transportation and child care do not seem to have been the issue. KidSafe had budgeted subsidies for these purposes, but no one ever used them.



some awkwardness, particularly in the first couple of years, as new Network Board members struggled to define their roles and integrate their activities with those of the Council. The governance structure continues to evolve. In 2002-03, the Network Board added new members, including three business representatives. Recognizing that KidSafe has become the agency's primary identity, the Community Network also filed for permission to do business as the "KidSafe Collaborative," and this will become the agency's name.

Besides the Council, the KidSafe collaborative relies on working committees to carry out its agenda. Most committees have involved a mix of participants, including Council members, line agency staff, subgrantees, and others who are simply drawn to the topic at issue. Four new committees began in 2001 and continued to meet in 2002 and 2003. These include the Policy Committee, the Sustainability Committee, the Multisystem Case Analysis (MSCA) Work Group, and the restructured CPT. Two older committees carried over from earlier years—the Operations Team, composed of the lead staff on the Partner Projects, and the Grants Oversight Committee, a joint committee of the Council and the Network Board. However, the Operations Team discontinued meeting early in 2003 when KidSafe funding for Partner Projects ended. Some Operations Team members then joined the KidSafe Council. Several other committees existed over the course of the project, but disbanded when participants felt that their work was complete, or occasionally, because of lack of participation or staff support.

While committee and Council members represent the most active collaboration members, KidSafe also defines its collaborators to include individuals who attend its community forums and other events. Since its inception, the project has made regular use of widely publicized community meetings—typically one or two a year—to tap community concerns and conduct more targeted discussions of key issues. These open forums have often turned occasional participants into active collaborators, especially when the forums spawned working committees. For example, a forum about the future of the Community Network's CPTs led to formation of a CPT Steering Committee, which spent nearly a year developing plans and procedures to revitalize the approach. As a result, a new CPT began operating in 2001, under the joint supervision of KidSafe and the Network Board.

Besides supporting its own Council, committees, and forums, KidSafe staff actively participated in other collaborative efforts, which typically involved some of the same agencies and partners as KidSafe. The oldest of these collaborations is the Family Court PPP, which began about the same time as KidSafe implementation. Staff have also served on the

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Domestic Violence Task Force, the Community Placements Management Team (which focuses on reducing out-of county/state placements of children), and the Vermont Refugee Resettlement Program's (VRRP) Interpreter Access Task Force, among others, and on short-term collaborations to develop proposals.

KidSafe staff invest considerable effort in keeping collaborative members informed about project activities, including opportunities for cross-collaboration. They routinely send announcements of community meetings and other events to a large mailing list, co-sponsor events with other groups, and occasionally produce a newsletter. Council agendas are mailed in advance and minutes for the Council meetings and most other committees are distributed regularly. The project director also forwards important e-mail communications from OJP to the Council and Network Board, besides discussing their contents at Council meetings. This practice was adopted in 2001, after OJP complained that stakeholders had not been fully informed of its concerns about system change. To celebrate contributions and accomplishments, the Community Network honors local professionals and other community members who have contributed to children's welfare. In 2003, the awards were presented at a luncheon that also recognized the culmination of the SK/SS grant.

### **Strategic Planning and Sustainability**

KidSafe and the Community Network have periodically engaged in broader strategic planning since developing the original Implementation Plan. The most concentrated planning efforts occurred in 1999 and then in 2001 and beyond. The 1999 efforts included a System Reform Vision Summit for KidSafe and several meetings concerning the reorganization of the Community Network. As a byproduct of the Summit, KidSafe routinely began using the expression "gray area families" to talk about its target population of families "falling through the cracks." This term became widely understood and used in the KidSafe community to describe families whose problems placed their children at risk, but were not sufficiently recognized or severe enough to trigger SRS intervention.<sup>27</sup>

In 2001, the negotiations with OJP over Grant 4 continuation forced KidSafe to return to strategic planning around system change, resulting in several new program initiatives

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<sup>27</sup> The SCT actually developed a more elaborate definition showing a progression of levels of risk and contact with the child protection agencies, with corresponding data to suggest the number of families at each level. Several levels corresponded to the "gray" zone.

(described below). In addition, for the first time the collaborative began to plan systematically to sustain the collaborative itself and its overall agenda.<sup>28</sup> At its first meeting of 2001, the KidSafe Council reached a strong consensus that the collaborative itself was *worth* sustaining. Members agreed that it provided a unique, valuable forum for interdisciplinary work around child safety and well-being child maltreatment—and it was *the* place to look at the “big picture.”

One immediate result was that KidSafe approached the Champlain Initiative, a state-designated “community partnership,” about the possibility of affiliation. This partnership, staffed by the United Way, had 10 teams working on community health and well-being, but none focusing on child abuse and neglect. In May 2001, the Champlain Initiative voted to accept the KidSafe Collaborative as an affiliate. The long-term consequences of this move are still unclear, but local observers say that the partnership influences the public agenda at both the state and local levels, although it does not directly control any state funds. In the short term, affiliation has earned KidSafe a small subsidy from the United Way (\$1,200), given KidSafe a voice in Initiative meetings, and paved the way for some joint efforts in training and public education.

KidSafe also formed a small Sustainability Committee in fall 2001. At a joint retreat early in 2002, the Network Board and KidSafe Council formally recommitted to sustaining the KidSafe Collaborative. This was a bigger step than it might first appear—the old Community Network Board might well have objected to such a course, for fear of diverting resources from its member agencies. Around the same time, the Sustainability Committee held a Funders Forum, where private foundations and state agencies discussed their priorities with KidSafe participants and learned more about the collaborative’s efforts.

In 2002, the Network Board itself established a Fund Development Committee, which developed a target budget of \$60,000 to \$100,000 to sustain the core activities of the Community Network and the KidSafe Collaborative. The Board also debated affiliating or merging with another agency or collaborative to enhance sustainability. None of the potential partnerships seemed to have compelling advantages, however, and there was considerable

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<sup>28</sup> For the individual partner projects, KidSafe had set the expectation quite early that they would eventually need to be self-sustaining; subgrant proposals were required to include sustainability plans. In their applications for the last year of KidSafe funding (4/02-3/03), applicants were required to present a budget for that year *and* the year thereafter.

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sentiment for maintaining KidSafe’s independent identity. By the end of 2002, the Board and KidSafe had made some progress toward their financial goals. They expected to raise at least \$40,000 from diverse sources, including foundations, the United Way, a funding campaign, voluntary dues, and most significantly, a contract with SRS. The latter contract, for \$15,000, would help support the work of the CPT and engage KidSafe in developing a new Community Advisory Board for SRS. The United Way, which had not supported the Community Network for many years (based on its policy of supporting services, not organizations), also indicated that KidSafe would be eligible to apply for funds for FY04-05.

Late in 2002, KidSafe also took advantage of an opportunity offered by the Vermont Community Foundation to obtain low-cost training and technical assistance on sustainability for itself and eight other nonprofits (including four of the Partner Project agencies). This training, which included homework, 3 training days, and two individual agency consultations, took place in 2003. The experience taught Board and Council members that KidSafe needed to more clearly articulate the value of its work to potential funders. Around the same time, a team of graduate students assessed KidSafe’s organizational development and marketing needs, recommending that KidSafe needed a 5-year strategic plan and more vigorous efforts to promote public awareness of the collaborative. The students also strongly recommended clarifying the agency identity as “KidSafe.”

In April 2003, KidSafe staff were delighted to learn that the project was eligible for a final sustainability grant of \$125,000, usable for staffing and expenses related to governance, service coordination, policy and fiscal work, family involvement, and evaluation. If awarded (as seems likely), these funds will greatly ease the transition to non-Federal support, assuring sufficient staffing to develop a 5-year strategic plan and build on several initiatives already underway. A fall retreat for Council and Board members, focusing on sustainability issues, is in the planning stages.

### ***The Role of OJP-Sponsored Technical Assistance (TA)***

The TA and training provided by OJP helped support KidSafe’s efforts to implement and sustain the collaborative at several junctures. The system reform consultant assigned to KidSafe helped plan and facilitate Vision Summits in 1999 and 2000 and assisted with some of the later forums, including the 2002 retreat. In 2000, the system reform consultant made a key presentation on system change to the Council, just before members reviewed the

latest round of subgrant proposals. According to some observers, the ensuing reviews placed much more emphasis on the system change potential of subgrants than ever before. In addition, the consultant periodically advised staff on organizational and governance issues, including the reorganization of the Community Network, the system change plans for Grant 4, and sustainability.<sup>29</sup>

Besides help from the system reform consultant, KidSafe received a technical assistance subsidy for the sustainability training from the Vermont Community Foundation. From time to time, KidSafe also tapped the technical assistance funding pool to send staff and stakeholders to conferences, while using regular project funds to send teams to all the SK/SS cluster conferences. Staff say that the conferences proved important, not just for their training content, but because the informal contacts among attendees often fostered stronger working relationships. As an example, staff cited the cluster meeting of spring 1999, focusing on system reform, which was attended by the project director, the fairly new Family Court judge, the state's attorney, the heads of CUSI and SRS, and the Council co-chairs (representing mental health and domestic violence agencies).<sup>30</sup> They recall it as the point when the KidSafe initiative really began to take off. Among other things, the meeting was partly responsible for the decision to hold KidSafe's first Vision Summit. Also, following informal discussions at the meeting, the judge and the director of the mental health center for children and families began planning to place a clinician at the Family Court, to expedite assessments of parents who might need substance abuse or other treatment. This became one of the first major successes of the Family Court PPP.

KidSafe's key activities and accomplishments in governance, community involvement, strategic planning, and sustainability are summarized in Appendix Table A-1, which covers the full gamut of implementation activities from 1997 through June 2003.

## **Activities Implemented During the Safe Kids/Safe Streets Initiative**

In this section, we discuss activities that fall under the four required program elements defined by OJP—System Reform and Accountability, Enhancing the Continuum of

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<sup>29</sup> The same individual served as system reform consultant throughout.

<sup>30</sup> OJP had suggested the categories of attendees, and Burlington was very successful at attracting high level participation.

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Services, Data Collection and Evaluation, and Prevention Education and Public Awareness. Because these activities were so numerous and diverse, the text will focus on the highlights of the project history and initiatives emphasized from January 2002 through June 2003.<sup>31</sup> (See Appendix Table A-1 for more detail.)

Many of KidSafe's implementation activities were supported by subgrants, listed in Table 2-4. As noted earlier, KidSafe used a formal RFP process to select subgrantees. The first year there were 15 grants, ranging from \$3,000 to \$50,000. Once funded, most grantees reapplied year after year. The subgrant process was re-opened to new applicants once, in 2000. Three new awards were made then, and some original grantees were awarded additional money, making 2000 the peak year for subgrants. In 2001 and 2002, KidSafe had planned to scale back the subgrants by 5 to 10 percent, but plans changed radically after the Grant 4 negotiations with OJP. Although most grantees suffered only a 5 percent decrease in their fourth year of funding, on average grantees took cuts of 34 percent in their fifth and final year.<sup>32</sup> Fifth-year awards ranged from \$3,540 to \$31,507.

### System Reform and Accountability

KidSafe began implementation in 1998 with a fairly well-defined system reform agenda. It included four main components, to be supported primarily by subgrants, two of which were awarded to the Community Network itself:

- Improving the capacity of the SAO, which then lacked the resources for a special child abuse/delinquency unit, by augmenting prosecutor staff and training for investigators and prosecutors;
- Development of a CAC, to bring multidisciplinary assessment, family-friendly case management, and long-term followup to families where child abuse or neglect was an issue;
- Professional development and training for service providers and other professionals who could identify children and families at risk or help them get necessary services; and
- Development of cultural competency initiatives, the specifics which were not spelled out until much later.

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<sup>31</sup> Additional information on earlier work can be found in previous evaluation reports and in Table 2-4 of this report.

<sup>32</sup> Three agencies with small subgrants in 2001-02 chose not to reapply for 2002-03.

**Table 2-4. KidSafe Subgrants to Partner Projects: 1998-2003<sup>1</sup>**

Grantee	Program	No. of Awards	Duration	Total Awards	Award for 2002-2003
<i>System Reform and Accountability</i>					
The Community Network (Grants 1-3)	Children's Advocacy Center development	5	1998-2003	\$53,027	\$7,262
CUSI (Grants 4-5)					
State's Attorney's Office	Juvenile Justice Unit	1	1998-2003 <sup>3</sup>	32,200	0
The Community Network <sup>2</sup>	Professional development and training	3	1998-2001	12,520	0
Child Care Resource	Curriculum for child care providers serving children of parents with mental illness	2	2000-2002	7,800	0
<i>Continuum of Service: Prevention and Early Intervention</i>					
Visiting Nurse Association (VNA)	Home visiting for 10 high-risk families Parent support services at VNA Family Room	5	1998-2003	229,007	31,507
Winooski School District	Parent support services at Winooski Family Center	5	1998-2003	112,857	19,107
Milton Family Community Center	Grandparents as Parents Support Group Training & consultation	5	1998-2003	50,332	6,908
Committee on Temporary Shelter (COTS)	Case management and support for homeless families	3	2000-2003	30,358	7,497
Lund Family Center	Nurturing Parent Programs for incarcerated fathers and single women Community calendar	2	2000-2002	14,013	0
<i>Continuum of Service: Intervention and Treatment</i>					
Family Connection Center	Supervised visitation and exchange	5	1998-2003	172,007	19,380
Baird Center for Children and Families	Adolescent sex offender treatment	5	1998-2003	116,696	18,234
Women Helping Battered Women	Therapeutic playgroups for child witnesses to domestic violence	5	1998-2003	94,800	13,035
Spectrum Youth & Family Services	Parent education curriculum for batterers Dad' Safe Program Young Men's RAPP	5	1998-2003	85,655	9,228
Baird Center for Children and Families	STEP program for treatment of sexually reactive children	5	1998-2003	51,551	8,007
YMCA	Clinical support for summer day camp	4	1998-2002	11,850	0

**Table 2-4. KidSafe Subgrants to Partner Projects: 1998-2003 (continued)**

<b>Grantee</b>	<b>Program</b>	<b>No. of Awards</b>	<b>Duration</b>	<b>Total Awards</b>	<b>Award for 2002-2003</b>
<i>Prevention Education and Public Information</i>					
Stop It Now! VT	Public education and outreach Cultural competency training (Grant 3 only)	5	1998-2003	\$48,296	\$6,296
Kids on the Block-Vermont	Prevention puppet shows for children	5	1998-2003	26,000	3,540
The Community Network <sup>2</sup>	Prevention education and public awareness	3	1998-2001	12,520	0
<b>Totals</b>				<b>\$1,161,489</b>	<b>\$150,001</b>
<sup>1</sup> Subgrants are categorized according to their primary activity. <sup>2</sup> The Community Network subgrant for TEO is evenly split between two categories, System Reform and Prevention Education/Public Awareness, reflecting the fact that it was intended to cover both professional training and public education. After the third grant, these activities were absorbed into KidSafe's core budget. <sup>3</sup> The SAO was allowed to carry the first-year award over for 5 years.					



KidSafe’s system reform agenda grew considerably as the years passed.

- Late in 1999, KidSafe began working to make its subgrants—particularly the direct service subgrants—more effective agents of system reform. This included revamping the grant review criteria to assign more importance to cultural competence, family involvement, cross-agency collaboration, and sustainability of effort. Staff also placed more emphasis on system reform issues in Operations Team meetings.
- In 2000, following up on the Vision Summit of 1999, KidSafe began work on revitalizing the CPTs, which were convened by the Community Network.
- In 2001, following up on the new system change plans negotiated with OJP, KidSafe created a Policy Committee to examine and improve policies and protocols for reporting and intervening in child maltreatment.
- In 2001, KidSafe also created the Sustainability Committee, to work on sustaining the KidSafe collaborative itself and its mission.
- Beginning in 2001, KidSafe began working more aggressively to educate legislators and other policymakers about the needs of children and families at risk.

In addition, KidSafe committed staff support to other collaborative efforts in the community that had the potential to effect system reform and reduce child maltreatment. The first of these was the Family Court PPP. Over time, KidSafe also became a regular participant in the Domestic Violence Task Force, the Community Placements Management Team, and others.

KidSafe’s earliest system reform initiatives got off to a slow start, for varied reasons. However, all eventually gathered momentum. Later initiatives seemed to proceed more smoothly, no doubt profiting from KidSafe’s growing credibility and experience. From 2001 onward, KidSafe benefited from staffing changes, specifically the addition of the assistant director (who worked with the Policy and Sustainability Committees), the training and outreach coordinator, and the multicultural coordinator. Uniting the KidSafe director and Community Network Coordinator positions also helped bring system reform to a central position in the agenda.

Below, we summarize the status and accomplishments for KidSafe’s most significant system reform and accountability efforts.

## KidSafe, Burlington, Vermont

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### ***Establishment of a Juvenile Justice Unit***

The SAO's subgrant, although fairly generous compared to most of the others, was not sufficient to fund even one new prosecutor. Little happened in the first year while the SAO looked for additional support. In 1999, however, using KidSafe's backing as leverage, the State's Attorney persuaded the Vermont Legislature to increase her staff. By January 2000, the Juvenile Unit was fully operational, with two attorneys. The direct effect was to provide prosecutors more time to prepare cases and increase their access to training.<sup>33</sup> Equally important, however, the SAO now had the time to take a stronger leadership role in many areas related to child abuse, neglect, and delinquency. Prosecutors now meet regularly with law enforcement officials and SRS to discuss cases involving juveniles and have participated actively in CAC development, in the MDT established at CUSI, and other local committees. The SAO also was a key player in implementing a new and apparently effective truancy prevention project with the Family Court and the Burlington School District. In 2002, the SAO developed a new protocol for the investigation of all child deaths, in consultation with local law enforcement, SRS, and the medical examiner.

### ***Establishment of the Children's Advisory Center***

The CAC story is a long one, characterized by gradual steps forward and some stumbles. The CAC Task Force began meeting without a clear model in mind, although there was a general sense that the CAC should somehow integrate its services with CUSI, the law enforcement unit responsible for criminal investigations. The Community Network Coordinator was responsible for staffing the effort, but a history of poor relationships with some segments of the child protection system probably reduced his effectiveness.<sup>34</sup> The CAC's first foray into services, in 1999, was short-lived. A CAC case manager was hired to work out of CUSI and provide support for "gray area" families, but after a year of lagging referrals, the services were discontinued pending further program development. Ultimately, the Task Force deciding to focus on "deeper end" cases (those with CUSI and SRS involvement), following the practice at most other CACs.

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<sup>33</sup> The fact that KidSafe had recognized the need for a Juvenile Unit and backed it financially was the important thing in obtaining legislative support. As a result, the SAO never had to use the KidSafe dollars for staffing, and stretched its initial 1-year award to support investigative and prosecutorial training for 5 years.

<sup>34</sup> Several informants reported particular dissatisfaction with his conduct of the original CPT, finding them ineffective and adversarial—so much so that SRS workers became unwilling to participate.

About the same time, a consultant from the Northeast Regional Children's Advocacy Center flagged several issues that might hinder certification by the National Children's Alliance (NCA), the national organization charged with this responsibility. Some of these issues, including lack of clarity about the governance structure and the relations between the CAC and CUSI, seemed difficult to resolve. Even so, the CAC initiative had made progress by 2000. The local hospital had dedicated space for sexual assault exams, and the protocols, equipment, and training for sexual assault nurse examiners (SANE) were improved. The hospital also began paying SANE nurses to be on-call. During its first 3 years, KidSafe and the CAC Task Force also managed to raise more than \$66,000 for program development and training, in addition to the KidSafe subgrant.

In January 2000, biweekly MDT meetings began at CUSI to review sexual assaults and other incidents involving severe harm. Regular attendees included SRS, the SAO, and CUSI. Procedures were put in place for consulting others (mainly medical or mental health personnel) as needed. In 2001, SRS placed an intake worker/investigator at CUSI. About the same time, KidSafe transferred lead responsibility and funding for CAC development to CUSI. CUSI continued to work toward CAC certification, after an initial application to NCA was turned back. In 2002, a CAC director was hired with foundation support. The new director worked out the governance issues, obtaining agreement from the CUSI Policy Board to oversee the CAC and paving the way for a 501(c)3 application. Space at CUSI was renovated to accommodate the CAC and some mental health services that the new director hoped to attract. Early in 2003, separate therapy groups for parents, teens, and children began meeting on site. The CAC received its formal NCA certification in June 2003.

An outside evaluation conducted in 2002 revealed strong support for the MDT process among the participants, although they had several suggestions for refinements. Several respondents wanted to see stronger involvement from health and mental health experts.<sup>35</sup> A mental health clinician began participating regularly in MDT meetings in 2002. A continuing obstacle to greater clinical participation in the CAC is the lack of funding to compensate clinicians for time lost from their regular profession while they attend MDTs. The CAC director has not yet succeeded in finding support for such costs.

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<sup>35</sup> Shtull, 2002, *op. cit.*

## KidSafe, Burlington, Vermont

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### ***Revitalization of the Child Protection Team***

KidSafe organized a CPT Steering Committee in 2000 to analyze the existing process, which was used infrequently, and recommend improvements. Historically, CPTs had been convened when a concerned school or service provider referred a child or family who appeared to be “falling through the cracks.” The committee felt that the CPT should continue to fill this special niche—essentially, providing a case management team for troubled families who needed one. It should not provide emergency or crisis intervention, however, or substitute for child protective services. Based on the committee’s work, in 2001 the KidSafe Council approved a new mission statement, protocols, and procedures to make the CPT more family-focused, more effective at followup, and more accessible to outlying areas. The new, improved CPT began accepting cases in spring 2001, with the KidSafe project director serving as coordinator. The CPT now has about 15 members and handles just over one case per month. Parents are always invited, unless there is a danger of retaliation against the child, and they often participate. Feedback on the CPT has been extremely positive,<sup>36</sup> and in some instances SRS, which regularly attends the CPT, has become more formally involved in a case as a result. SRS also has referred “gray area cases” to the CPT. In 2002, SRS awarded a small contract to KidSafe to help support the process. The CPT also has received some private funding. Impressed by KidSafe’s work with the CPT, the Health Department asked KidSafe to convene and facilitate the MDT for the Women and Children at Risk Project, which works with substance-abusing pregnant and parenting women. KidSafe began doing so in May 2003.

### ***Program and Service Coordination Efforts***

The CAC and CPT represent the largest KidSafe efforts around program and service coordination. However, improving coordination was an objective of many other KidSafe activities, such as the Building Bridges Workshops (see “Professional development training” below). KidSafe also convened ad hoc groups to collaborate on proposal opportunities and co-hosted community meetings on pressing service concerns. Perhaps more significant was the way that KidSafe used the subgrants to promote greater coordination—by making it a criterion for funding and then reinforcing it with regular Operations Team meetings for the subgrantees. As a result, several partnerships between grantees emerged, resulting in numerous instances of cross-training, delivery of services at partner locations, and mutual referrals.

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<sup>36</sup> Evidence for this comes from Westat’s process interviews in 2002 and a report completed by KidSafe’s local evaluator.

## ***Model Policies and Protocols for Reporting Child Maltreatment***

KidSafe's new Policy Committee convened three community forums in 2002 to discuss policies and protocols around child abuse reporting and intervention. Lively discussion at the first meeting led to a consensus that the group should work first on issues related to mandated reporting. Several participants followed through on a homework assignment—to meet with colleagues and discuss their own agency's protocols.<sup>37</sup> At the second meeting, the group agreed to work on developing a video and a training kit containing model policies for mandated reporters. The plan was soon expanded to include statewide distribution of the materials, which helped raise outside funding—eventually covering \$27,000 of the \$30,000 budget. A subcommittee, staffed by the Training and Outreach coordinator, completed the video/toolkit in June 2003. SRS and Health Department district directors both served on the subcommittee, and many other local stakeholders are excited about the project. However, some worry that SRS will lack the staff to handle a sharp increase in reports, should the new materials have that effect. Distribution of the video and toolkit is scheduled for summer 2003.

## ***Professional Development and Training***

While the mandatory reporter video/toolkit took center stage in 2002, KidSafe has supported other training efforts at some level, even when staffing for them was limited. Since 1999, KidSafe—typically in concert with CUSI or SRS—has conducted mandated reporter training upon request for local child care providers and various service agencies. In 2001, a statewide training for school nurses was conducted using interactive TV. KidSafe has also supported several efforts to make professionals more aware of the community resources available, including regular publication of a communitywide events calendar, development of a *Family Services Directory*, and presentation of a resource education session for judges. The Building Bridges workshop series, begun in 2002, involves a visit to and a presentation by a different agency each month. Several interviewees praised this series, which is intended to promote interagency relationships and better resource coordination.

The KidSafe subgrants supported more specialized types of training. The SAO's grant was devoted to purchasing training for prosecutors, SRS and CUSI investigators, and

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<sup>37</sup> Three participants reported to the Westat evaluator that this exercise alone had been valuable for their own agencies. Two were already making some improvements, and a third expected to make changes once the Policy Committee had completed its work.

## KidSafe, Burlington, Vermont

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others involved in the legal process. The Baird Center (the area's mental health center for children), the Milton Family Community Center, and Stop It Now! VT all offered professional training or consultation, although it was not the primary focus of their subgrants. Child Care Resource developed a specialized curriculum for childcare providers who work with children of mentally ill parents, covering a significant gap in provider training. This three-credit course was given twice at Champlain College and will be offered again periodically.

### ***Education of State Legislators and Other Policymakers***

In the early years, this area received little attention. The KidSafe Council did alert its members to significant legislative or policy changes, but a Legislative Advocacy Committee formed in 2000 withered away after just a few months. In 2002, however, several new venues opened up for affecting state policy. KidSafe was invited to serve on two advisory committees for state agencies—a Health Department committee providing input on violence prevention and an SRS committee looking at policies for cases where domestic violence and child abuse co-occur. (The former was close to completing a draft of a new SRS policy as of June 2003.) Also in 2002, KidSafe co-sponsored a public policy forum with Vermont Children's Forum, the state's leading child advocacy group. Subsequently, KidSafe's assistant director joined the Forum's Policy Board and successfully advocated for adding a separate section on child maltreatment to the group's policy agenda. KidSafe also co-sponsored a legislative candidate's forum with the Domestic Violence Task Force (DVTF) in fall 2002. KidSafe and DVTF followed up by co-sponsoring monthly legislative breakfasts for local legislators during the 2003 session, where legislators and community members exchanged views on family and child welfare issues. Staff believe these activities contributed to recent legislation that added clergy to the list of mandated reporters and also required improvements in protocols and training for mandated reporters and their co-workers.

### ***Cultural Competency***

This was another area that got off to a slow start. After twice failing to find a lead agency for this effort through the RFP process, KidSafe funded a cultural competency needs assessment in 1999. The results suggested, among other things, that the needs in Chittenden County were much bigger than KidSafe could tackle alone. In 2000, KidSafe began working closely with the VRRP, promoting training on interpreter use and helping to staff a 24-Hour Interpreter Access Committee. Unfortunately, constant turnover at VRRP made it difficult to

build on those efforts. Although the Interpreter Access Committee developed a proposal to pilot a 24-hour access program, VRRP put it on indefinite hold. In 2003, KidSafe reallocated funds set aside for this effort to fund three minigrants for translation of materials at local agencies. KidSafe also supported cultural competency training—including two sessions on cross-cultural issues in child sexual abuse, for medical personnel and other service providers, respectively, and a 2-day training to help 21 providers become diversity resources for their own agencies. The sexual abuse training was provided by a subgrantee, Stop It Now! VT, while KidSafe hired an expert consultant to deliver the other training.

KidSafe did not have in-house support for cultural competency efforts until 2002, when the multicultural coordinator was hired. She then began recruiting a diverse group of “multicultural liaisons”—informal representatives of minority and ethnic cultures—to serve as a resource pool for KidSafe and other groups that were trying to increase cultural competence. Meanwhile, several groups had begun working to develop a community multicultural center. Gradually, the multicultural coordinator shifted her effort to community networking in support of this effort. KidSafe staff observed that the multicultural center offered an alternative to the liaison model, which would likely have needed refinement and more resources to succeed.

### ***Family and Community Involvement in Services and Policymaking***

For most of KidSafe’s history, the subgrants were the primary vehicle for promoting family and community involvement in services and policymaking at the agency level. Subgrantees were rated on this element when reapplying for funds, and most of the private agencies could claim some community or consumer representation on their Boards from the outset. By 2002, however, almost all the direct service providers had adopted procedures for gathering client feedback, through methods such as surveys or focus groups. The KidSafe subgrants to neighborhood centers were particularly effective at involving consumers. The Winooski Family Center, which got its start through KidSafe, created a Steering Committee with active parent participation and also lent support to the Winooski Network, a broader community group working to improve programs for children and families. The Community Cultural Night program, which emerged at the VNA’s Family Center, actively engaged parents in planning the activities. Members of the Grandparents Group at the Milton Community Family Center planned their own programs and, in their fifth year, began advocating for public policies supportive of grandparents and other non-parent relatives who serve as caretakers.

## KidSafe, Burlington, Vermont

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### ***Analysis of Funding for Child Abuse and Neglect***

From 2000 onward, OJP had promoted the concept of “blended” funding—that is, strategies that tap multiple funding resources—as a way to sustain initiatives related to children’s welfare. KidSafe staff and key stakeholders seemed somewhat perplexed about how to respond, noting that Vermont had been a pioneer in this area and many KidSafe subgrants already relied on blended funding. In 2001, however, as part of the revised system change plan, KidSafe’s new Sustainability Committee began looking more closely at funding issues. To get a better grasp of the overall picture, the group decided to survey local agencies about their funding and expenditures for prevention, intervention, and treatment. KidSafe patterned the survey after one conducted by the SK/SS site in Huntsville and contracted the work to the University of Vermont’s Rural Studies Department. Technical assistance funds from OJP and the United Way are subsidizing the survey, which was mailed in mid-2003. Staff hope to use the findings for local planning and to inform discussions with state leaders who are overseeing the AHS reorganization.

### ***Participation in Other Collaborations***

As noted earlier, KidSafe staff regularly participated in several other local collaborations, typically along with some of the KidSafe Council members and partner agencies. It is hard to say what these collaborations would have produced without KidSafe involvement. Nevertheless, some of their accomplishments (see Appendix Table A-1) are impressive. Several local interviewees mentioned that KidSafe staff brought a particular perspective to other collaborations that was valuable and ensured that children’s interests were never forgotten. Regarding the PPP, several stakeholders credited contacts through KidSafe with stimulating some of the Family Court innovations—including the decision to place mental health personnel at the court, changes in the role of the Probate Court judge, and expanded involvement of the VNA in court hearings. In Winooski, it seems likely that KidSafe’s subgrantee, the Winooski Family Center, has facilitated SRS’s effort to develop its child protection partnership with the community. From the outset of the Winooski Pilot Project, KidSafe staff encouraged the Family Center to play an active role and to support involvement by the community-based Winooski Network as well. In 2002, the Council awarded extra funding to the Family Center to reinforce its role in this community development effort.



## Continuum of Services

Throughout the project, subgrants were the primary vehicles for expanding prevention, intervention, and treatment services. March 2003 was the last month of KidSafe funding for most of these projects, so it is still not certain how well they will weather the transition. However, most appeared committed to sustaining services, and expected only modest cutbacks.

The largest single “Partner Project” (\$229,000 over 5 years) was conducted by the VNA. This subgrant covered intensive home visiting for at-risk families lacking other payment sources—up to 10 families at a time—and was always fully utilized. As KidSafe support ended, the VNA expected to maintain this service because of increases in state support for home visiting in the past few years. Staff also credited informal contacts made through KidSafe with the VNA’s expanded presence in Family Court. VNA nurses are now almost always involved, and involved early, when the judge is considering removal of a child from the home. The VNA subgrant also subsidized parent education and support at its parent-child center in Burlington, including the popular Community Culture Night program mentioned earlier. These activities are continuing.

KidSafe also funded neighborhood-based family supports in Winooski and Milton. The Winooski Family Center (WFC) received another of the large KidSafe grants (\$110,322 over 5 years). Founded with support from KidSafe, the Winooski Housing Authority, and the Winooski School District, this Center grew and thrived. It now provides or hosts multiple services, including preschool programs, parent education, case management, a summer lunch program, and case management. As noted above, WFC has gone beyond direct service provision to support the Winooski Pilot Project and the Winooski Network in their community development efforts. Although KidSafe was the Center’s largest funding source for 5 years, WFC gradually diversified its funding. The Baird Center, the children’s mental health agency, became a key partner. In 2001, WFC won foundation support of \$25,000 a year for 3 years. Of great importance, at least symbolically, the Center also became a \$1,000 line item in the Winooski city budget. Meanwhile, a smaller KidSafe grant helped the Milton Family Community Center create and nurture the only grandparent support group in Chittenden County. Over the years, group members became increasingly active in defining their own agenda, recently expanding it to advocacy. The grandparent group transitioned to alternate funding early in 2002.

## KidSafe, Burlington, Vermont

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Two early intervention programs addressed the group that KidSafe called “special needs” parents. One subgrant provided case management services for homeless families, through COTS, the local homeless shelter. The other funded Nurturing Parent groups for incarcerated fathers, through the Lund Family Center. Both subgrants were first awarded in 2000, and both encountered obstacles. The COTS project had to contend with two shelter moves, and at one point, limited shelter capacity. However, case management services were deemed valuable and are now continuing with other sources of support.<sup>38</sup> In the case of Nurturing Fathers, the Lund Center never successfully adapted the Nurturing Parents Program to the short-term correctional setting. Staff did run three groups, but found it hard to recruit participants, deliver the curriculum, and keep men involved under conditions of constant inmate turnover and limited access to program participants. In the end, KidSafe and Lund staff concluded that it would be more effective to refer inmates who were completing their incarceration to programs offered by Prevent Child Abuse VT. The Lund Center then offered a community-based group for single mothers to help fulfill its subgrant obligations, but did not reapply for funds in 2002.

In the intervention and treatment area, three subgrants supported services for families in conflict—all for a full 5 years.<sup>39</sup> The largest of these three and the second largest of all the KidSafe subgrants (\$174,039 for 5 years) helped start the Family Connection Center (FCC), the area’s first supervised visitation program. Here, noncustodial parents could see their children in a monitored setting, or where appropriate, parents could transfer their children for a visit without meeting face-to-face. Over the years, the program struggled with a number of issues, including housing, security (especially, a shortage of off-duty police officers following September 11), and most importantly, generating referrals. By fall 2002, however, the program had built solid relationships with SRS and Family Court and was close to full capacity. It also had developed three tiers of on-site supervision (protective, supportive, and therapeutic) and earned a contract from SRS for supportive (teaching) supervision. Finances were still shaky, however, and FCC temporarily suspended services in June 2003, while awaiting word on a pending Safe Haven application. The FCC had already secured bridge funding from another

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<sup>38</sup> When KidSafe’s local evaluator interviewed local agencies about their referral practices in 2000 and again in 2003, the main change she observed was a marked increase in reported referrals to COTS and other housing resources. It seems likely that the KidSafe subgrant was a factor, along with COTS’ involvement on the KidSafe Council, which began the same year. (See Livingston, J.A. (2003). *KidSafe collaborative of Chittenden County local evaluation: Agency structured interview, second round report*. Hinesburg, VT: Flint Springs Consulting.)

<sup>39</sup> The intersection between domestic violence and child abuse and neglect was a recurring topic at the SK/SS cluster conferences. However, KidSafe’s interest in this area dated from its original Implementation Plan.

source, but those funds could not pay for security—an essential and costly part of the operations.

The second domestic violence grant went to Spectrum Youth & Family Services, which began by developing parent education modules for the existing court-ordered batterer education program. Once the modules were incorporated in the curriculum, this effort required no further KidSafe support. Spectrum then moved on to develop two new groups for men with violence and control issues—Dad’ Safe, for parents, and Young Men’s RAPP, for teenagers (whose violent behavior was often directed at their mothers). As of 2002, the latter was fully funded by other sources, including SRS. Dad’ Safe proved more difficult to implement, in part because of its closed format (members all have to start together). The program also had to adjust to an increasing proportion of involuntary referrals. Although designed as voluntary, by 2002, the court, the SAO, and Corrections had begun requiring some men to participate, sometimes following the batterer education program. Dad’ Safe receives some fee income and is expected to continue, although other funding supports have not been determined. Looking at the bigger picture, Spectrum credits KidSafe with improving its relationships with SRS and others. Staff are now working with SRS on protocols for referring domestic violence offenders who are also implicated in child abuse and plan to schedule on-site intake at SRS. They are also working with Women Helping Battered Women to develop partner contact protocols.

The final domestic violence subgrant enabled Women Helping Battered Women to offer therapeutic playgroups for child witnesses of domestic violence, mostly at area schools. Staff also worked to expand services for women and children in its shelter, creating a Peer Mentor Program that involved former residents. After KidSafe, Women Helping Battered Women expected to fund most of its direct services for children through other sources. To ensure sustainability, however, in 2002, staff trained a large group of school social workers in therapeutic playgroup methods, so that the program would not depend exclusively on Women Helping Battered Women for continuation. Two trainees later co-facilitated groups.

One other intervention subgrant—the smallest award of all (less than \$12,000 over 4 years)—provided clinical support for a YMCA day camp serving many SRS-referred children. The agency did not reapply in 2002 because so little money was available, but indicated that it would continue the service.

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In the treatment area, there were two subgrants to the Baird Center, making Baird the recipient of the third highest KidSafe funding (\$168,247 for both grants over 5 years). According to local observers, when KidSafe began, few therapists were engaged in counseling either sex offenders or their victims because both referrals and funding were unstable. To address these gaps, Baird established one program for adolescent sex offenders and another for younger children who exhibit inappropriate sexual behavior as a result of victimization. Formal evaluations identified positive outcomes for both programs. During the KidSafe years, the adolescent treatment program gained substantial support from SRS, and both treatment programs earned participant fees. Baird expected to sustain both programs at close to their former levels after KidSafe.

### **Data Collection and Evaluation**

Data collection and evaluation got off to a slow start at KidSafe, and never became a strong emphasis. No funds were allocated for this element in KidSafe's first grant period, and by Grant 5, it accounted for only 5 percent of the budget. In part this reflected the KidSafe's overall tendency to concentrate on services and initially, perhaps, unrealistic expectations about the role of the Vermont Center for Justice Statistics. The fact that all the key public databases are maintained and administered at the state level also discouraged local efforts. Nonetheless, there were several efforts worth noting.

#### ***The Local Evaluation***

KidSafe had not budgeted for a local evaluator originally and did not find a suitable evaluation consultant until midway through 1999. Working with an Evaluation Committee, the new evaluator helped refine quarterly progress reporting forms for KidSafe subgrants and laid out a modest evaluation agenda for 2000 onward. The agenda *had* to be modest, because KidSafe did not plan to spend more than \$10,000 a year for it. However, the local evaluation would include three main elements: two rounds of interviews with KidSafe partners and other local agencies; collection of readily available community-level indicators of progress; and case tracking and structured interviewing with a sample of "gray area" families. Because of funding limitations, the evaluator would not routinely participate in or observe KidSafe Council meetings or other project activities.

By 2002, the local evaluator had completed reports on the first round of agency interviews and the community indicators. A report on the second round of interviews, addressing changes over time, was prepared in 2003. However, the third element of the local evaluation plan—the study of the “gray area” families—was abandoned because it had proved impossible to recruit enough families to participate. Instead, KidSafe had reallocated the local evaluator’s time to a new effort—the MSCA.

### ***Multisystem Case Analysis***

MSCA is a methodology for examining performance of the formal child protection system by tracking child abuse and neglect cases across agencies. The Child Welfare League of America, which had developed the methodology for another project, first introduced it to SK/SS sites at a cluster conference in 1999. Two SK/SS sites were immediately interested in the approach, and OJP later began urging it on the others, promising some support for technical assistance from the Child Welfare League of America. KidSafe held back, believing the effort would only make sense in collaboration with the Family Court PPP. But the timing was bad, since the state was already engaged in a PPP evaluation. By 2001, however, both the state and the local Family Court seemed amenable to considering an MSCA. With technical assistance support from OJP, Child Welfare League of America made two visits to Vermont, to orient state and local officials to the MSCA model and help a joint KidSafe/PPP task force define its objectives. By year’s end, the MSCA Task Force had agreed to track sample cases that had entered the family court in 1998 and 2000, with 1998 representing a sort of baseline. For each case, they also planned to track the family’s prior experiences with the child protection system.

With support from the local evaluator, the Task Force completed the design and the instruments in 2002. The evaluator then trained the data collectors and they started work. KidSafe paid the data collectors for SRS and Family Court, while the SAO, CUSI, and Burlington Police Department donated staff time.<sup>40</sup> Despite careful efforts to forecast the resources needed, KidSafe seriously underestimated the magnitude of the data collection effort required. First, it proved difficult to match up the court cases with records from other agencies, because there were no common ID numbers across systems, and the workgroup had agreed not to use names. Eventually, the Family Court prepared a master list of the children involved in

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<sup>40</sup> The SRS data collectors were case reviewers contracted by SRS for its quality assurance program. The Family Court reviewers were a court officer and a volunteer GAL. All had the advantages of being familiar with the files of the agency in question and were already authorized to view confidential file information.

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the sample cases. Even so, the list was not helpful in locating arrest and prosecution files for perpetrators whose names were different from their child victims. Also, the SRS files were huge and hard to review. Disappointingly, they often lacked documentation about what services the families had received and when—and timing was of considerable interest, given the PPP's attempt to frontload services. The whole effort was scaled back from 150 cases to 100 because costs were outrunning the budget. The local evaluator was still preparing a report on the results in June 2003. If the transitional funding award is approved, KidSafe plans to bring Child Welfare League of America back to consult on extending the analyses and presenting and using the findings. Whatever the outcomes, staff noted that the MSCA process had exposed some serious limitations of current data systems.

### ***MIS/Information System Development***

Confronted with a (non)system of multiple and independent statewide databases, KidSafe initially had trouble deciding how to proceed. At OJP's insistence, staff attended a technology conference in 1997 (held in tandem with a mini-cluster meeting), but came home convinced that the project had neither the money nor the clout to undertake the kinds of database efforts they had heard about. Early discussions in the Operations Team about developing a common database or intake form for "KidSafe clients" also went nowhere. There was considerable resistance to the idea, and it involved more than concerns about confidentiality or reluctance to be scrutinized. In fact, the services provided by the Partner Projects were extremely diverse, and it was hard to imagine an intake form that would serve them all well. Ultimately, therefore, subgrantees agreed on a quarterly reporting format that requested aggregate data, rather than information on individual clients.

Meanwhile, however, KidSafe hired a subcontractor to study the capabilities of the MIS systems used locally and make recommendations. This report, completed in 1999, essentially suggested that KidSafe consider modest goals, centered on building the information capabilities of CUSI and the CAC, while making its voice heard in statewide initiatives to promote greater database integration. This is pretty much how KidSafe proceeded thereafter. Staff suggested to state officials that SRS should join the state's criminal justice integration team, and this occurred. Where opportunities arose, KidSafe staff also contributed to database discussions—regarding indicators of domestic violence in law enforcement records, for instance. At CUSI, KidSafe supported installation of a new case tracking system, which made

CUSI records accessible on-site to SRS and the SAO.<sup>41</sup> In 2002, KidSafe purchased a new computer for the SRS worker stationed at CUSI, so that she could access CUSI and SRS databases more easily.

One other MIS development may be at least partly attributable to KidSafe. In 1999, the District SRS Office implemented a simple local database to capture information on child abuse and neglect reports that are not accepted for investigation. The immediate and most important impetus for this change was a child fatality. But, KidSafe had raised general awareness of information gaps in this area somewhat earlier, when one of its committees tried to gather statistics about “gray area” families from SRS. Now the statistics that were so inaccessible are readily available. SRS’s relatively new system for monitoring outcomes in child protection cases, implemented under ASFA, also has been beneficial. While KidSafe can take no credit for the system itself, SRS has readily shared the results and used the KidSafe Council as a forum for discussing community responses. Several stakeholders observed that such sharing would never have happened years ago and was probably not happening now in most areas of the state.

### ***Special Studies***

Besides the assessment of MIS capabilities, KidSafe undertook two other special studies that were discussed earlier—the cultural competency needs assessment, also done in 1999, and the funding analysis, which is still underway.

### ***Subgrantee Monitoring and Assessment***

As already noted, KidSafe subgrantees were required to submit regular quarterly progress reports, including statistics on services rendered. As time went on, these reports were considered in annual refunding decisions, although they did not change the outcome in any major way. Perhaps the more important aspect of the process was that it built agency capacity to some extent. Many subgrants were small, and agency capabilities to gather and interpret data varied considerably. However, with assistance from Vermont’s Agency for Human Services, KidSafe sponsored a training session on outcome-oriented evaluation (also referred to as

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<sup>41</sup> KidSafe purchased CUSI’s first case tracking software—a package widely recommended for CACs. After a brief trial, CUSI purchased a different software program that better met its needs.

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results-based accountability) for subgrantees and other interested providers.<sup>42</sup> The annual RFP process also placed increasing emphasis on how the subgrants were serving longer term KidSafe goals. Several subgrantees told us that this had affected the way they measured their success. Perhaps the most dramatic example involves the VNA, where the Maternal and Child Health Division completely revamped its assessment procedures with help from outside consultants. Staff concede that this change would have come sooner or later, but credit their KidSafe involvement with making it much sooner. Several subgrantees also undertook formal evaluations, on their own, or after urging from KidSafe. One subgrantee commented that she “hated doing those [quarterly] reports,” but the format worked well for other sponsors and she would continue to use it.

### Prevention Education and Public Information

Prevention education and public awareness, like data collection and evaluation, did not receive a heavy investment of project funds. Responsibility for these activities was split between subgrantees and project staff, with subgrantees doing more of the prevention education.

KidSafe funded two main subgrants in this area.

- Stop It Now! VT is part of a national organization dedicated to making prevention of child sexual abuse a priority. It attempts to break the “conspiracy of silence” about such abuse, by reaching out to abusers, their families, and associates and enlisting their help in stopping it. Through KidSafe funding, Stop It Now continued and expanded its public information program, which included panels, workshops and conferences, dissemination of written materials, media appearances, and public service announcements.
- Kids on the Block-Vermont provided free puppet shows for hundreds of elementary school children each year, in multiple schools. The programs were designed to promote awareness of physical and sexual abuse, not just among their child audiences, but among the parents and school staff, who were provided with advance information.

In addition, several of the prevention and early intervention subgrants (see above) also covered some prevention education for parents or children.

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<sup>42</sup> The following year, participants in the spring SK/SS cluster conference heard a similar, but shorter, presentation on the same material. This topic was revisited periodically at subsequent cluster conferences.



Both Stop It Now! VT and Kids on the Block received 5 years of funding. Stop It Now's national organization is seeking funds to continue the Vermont program, but has committed to maintaining a part-time coordinator for another year. Kids on the Block will need to raise additional funding to continue free performances, but will offer programs for a fee in the interim. (Because the program typically has free shows available on other subjects, these can provide a foot in the door for paid performances.) In the area of parent education, some KidSafe partners formed a "think tank" in 2002 to examine parent education opportunities in the community and strategize about improvements. KidSafe staff participate.

While subgrantees did much of the prevention education, KidSafe staff took responsibility for most of the broader public awareness activities, including efforts to publicize the collaborative. This is the part of the KidSafe agenda that was hardest hit by staff turnover, and it often fell behind schedule. In any case, there was never any "grand design" for public awareness. However, there were many discrete activities over the years worth noting. For example, following the child fatality in 1999, the Community Network convened a communitywide meeting that reportedly helped channel community concerns in a positive direction and also built the organization's credibility. KidSafe also held a Family Services Expo in 1999 and routinely participated in community fairs, Kids Days, and other local events every year. Periodically, KidSafe updated its brochures or issued a newsletter. The most widely disseminated product, however, was a comprehensive *Family Services Directory*, developed in 2000. The United Way and others supported the effort, and the directory was later incorporated into the *Kids VT Family Resources Book*. Two years later, the directory was updated and disseminated to a target population of pregnant women and new parents, again with outside support. It was also widely distributed to local agencies, including SRS and Family Court.

In the past year, there also were indications that a more coordinated public awareness strategy was emerging, as KidSafe focused on sustaining the collaborative. The project produced a Fact Sheet and an annual report suitable for widespread distribution. The long-promised KidSafe web site also was introduced, with help from the training, education, and outreach coordinator. Continuation of all these public awareness activities is tied to the future of the KidSafe Collaborative itself. KidSafe also used footage from the mandated reporter training video to produce a public service announcement that was aired widely on Vermont TV stations.

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### Implementation Timeline and Logic Model

Table 2-5 provides a simplified project timeline for the implementation phase, focusing on highlights and major program initiatives. Additional detail about the timing of many activities can be found in Appendix Table A-1.

A comprehensive logic model for the KidSafe program appears in Appendix Figure A-1. This diagram reflects the complex web of activities that evolved over the course of the KidSafe project and their relationships to expected results. Results incorporate immediate outcomes (such as improvements in ability to recognize child abuse and neglect), intermediate outcomes (such as increased reporting of child abuse and neglect), and long-term impacts (such as reduced child victimization), along with the logical links among them. The earliest versions of the KidSafe logic model were far simpler, particularly with respect to the system change efforts described in Sections B (Coordinated Case Planning, Investigation, and Prosecution) and E (Other System Initiatives). Section C (Policy Analysis) was completely new in 2001. These elaborations reflect the shift in emphasis toward system change that gathered momentum in the fourth grant period.

### Results

From the forgoing, it is evident that KidSafe carried out a multitude of activities in Chittenden County, engaging a wide array of agencies and individuals. While many activities might deserve more intensive assessments of their own, the national evaluation aimed to look at the SK/SS initiative from a broader perspective and if possible, draw conclusions about its results at each participating site. In this section, therefore, we address several “big picture” questions regarding KidSafe and its efforts in Chittenden County, Vermont:

- In terms of structure and process, how faithful was KidSafe to OJP’s vision for the SK/SS initiative?
- To what extent did KidSafe produce system reform—that is, enduring changes in the statutes, policies, procedures, and routines that affect the prevention, intervention, and treatment of child abuse and neglect? What other enduring changes resulted?
- Is there evidence that the project has had longer term impacts on the incidence of child abuse and neglect?

**Table 2-5. Timeline for KidSafe’s Implementation Phase**

<b>Date</b>	<b>Event</b>
<b>1998</b>	
March	<ul style="list-style-type: none"> <li>▪ Project director starts work</li> <li>▪ Some subgrantees start work at their own risk</li> </ul>
April	Subgrantees begin meeting as Operations Team
May	<ul style="list-style-type: none"> <li>▪ Subgrantees are officially authorized to begin work</li> <li>▪ Family Connection Center (supervised visitation) opens with KidSafe support</li> </ul>
June	Grant 2 application is submitted
July	Winooski Family Center opens with KidSafe support
November	OJP cluster meeting on systems change, administrative requirements, accomplishments
<b>1999</b>	
February	<ul style="list-style-type: none"> <li>▪ Grant 2 is approved by OJP</li> <li>▪ Community Network begins strategic planning process</li> </ul>
March	First child abuse fatality in many years shocks the community
April	<ul style="list-style-type: none"> <li>▪ KidSafe convenes community meeting to discuss child fatality</li> <li>▪ KidSafe brings key agency leaders to SK/SS Cluster Conference on system change</li> <li>▪ Subgrants begin second year of funding</li> <li>▪ OJP cluster meeting on resources, practices, and planning for system change</li> </ul>
June	CAC hires case manager for “gray area” cases
July	<ul style="list-style-type: none"> <li>▪ KidSafe Vision Summit</li> <li>▪ Cultural Competence needs assessment is completed</li> <li>▪ Local evaluator joins KidSafe team</li> </ul>
October	<ul style="list-style-type: none"> <li>▪ Grant 3 application is submitted</li> <li>▪ MIS/Information System Review is completed</li> </ul>
November	OJP cluster meeting on intervention in domestic violence and building cultural, consumer, and community competencies
December	State’s Attorney’s Juvenile Justice Unit established (with KidSafe support)
<b>2000</b>	
April	<ul style="list-style-type: none"> <li>▪ New governance structure for the Community Network is implemented</li> <li>▪ KidSafe Management Council becomes the KidSafe Collaborative Council, the Community Network’s policymaking body</li> <li>▪ First Community Forum on Child Protection Teams</li> <li>▪ Original subgrants begin third year of funding</li> <li>▪ Two new subgrants begin</li> </ul>
May	<ul style="list-style-type: none"> <li>▪ OJP cluster meeting on results-based accountability and facilitative leadership</li> <li>▪ Grant 3 application approved, with conditions</li> </ul>
June	Second Community Forum on Child Protection Teams
Summer	CAC services cease, pending further program development
November	<ul style="list-style-type: none"> <li>▪ KidSafe Vision Summit II</li> <li>▪ OJP cluster meeting on sustainability</li> </ul>
December	Grant 4 application is submitted

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**Table 2-5. Timeline for KidSafe’s Implementation Phase (continued)**

Date	Event
<b>2001</b>	
April	<ul style="list-style-type: none"> <li>▪ OJP notifies KidSafe of dissatisfaction with Grant 4 implementation plans</li> <li>▪ KidSafe affiliates with Champlain Initiative, a state-designated regional partnership</li> <li>▪ KidSafe begins convening a revised, family-friendly CPT</li> <li>▪ Network Coordinator resigns; KidSafe project director takes over agency and project leadership</li> <li>▪ OJP cluster meeting on cultural competence</li> </ul>
May	<ul style="list-style-type: none"> <li>▪ OJP releases partial Grant 4 funding, enabling subgrants to continue</li> <li>▪ OJP convenes joint strategic planning meeting with KidSafe and the Community Network Board</li> <li>▪ KidSafe co-sponsors two-part Forum on Heroin &amp; Young Women</li> </ul>
June	Revised System Reform Plan and Grant 4 budget are submitted
August	<ul style="list-style-type: none"> <li>▪ OJP requires KidSafe to add more staff</li> <li>▪ Child Welfare League of America provides orientation on MSCA</li> </ul>
October	<ul style="list-style-type: none"> <li>▪ Assistant director for policy and sustainability joins KidSafe team</li> <li>▪ OJP cluster meeting on team building, collaboration, and leadership</li> </ul>
<b>2002</b>	
January	<ul style="list-style-type: none"> <li>▪ Grant 5 application is submitted</li> <li>▪ Building Bridges Workshops begin</li> <li>▪ First Policy Forum held</li> </ul>
February	<ul style="list-style-type: none"> <li>▪ KidSafe Funders Forum</li> <li>▪ KidSafe Collaborative Retreat</li> </ul>
March	Westat meeting for national and local evaluators and project directors
April	<ul style="list-style-type: none"> <li>▪ OJP approves Grant 4</li> <li>▪ Subgrantees begin final year of KidSafe support</li> </ul>
May	<ul style="list-style-type: none"> <li>▪ Training and Outreach coordinator joins KidSafe team</li> <li>▪ Second Policy Forum held</li> <li>▪ OJP cluster meeting on data-based decisionmaking, information sharing/integration, and youth asset mapping</li> </ul>
June	Multicultural coordinator joins KidSafe team
July	Data collection for MSCA begins
Summer	CAC coordinator hired
August	Grant 5 funding approved
September	<ul style="list-style-type: none"> <li>▪ “KidSafe” adopted as agency name</li> <li>▪ Third Policy Forum held</li> </ul>
October	KidSafe co-sponsors Legislative Candidates’ Forum
November	KidSafe co-sponsors Public Policy Forum
December	CAC certified by National Children’s Alliance
<b>2003</b>	
January	SRS contracts with KidSafe for: <ul style="list-style-type: none"> <li>▪ Community Advisory Board</li> <li>▪ Child Protection Teams</li> </ul>
March	<ul style="list-style-type: none"> <li>▪ Last month of KidSafe support for subgrants</li> <li>▪ OJP cluster meeting on lessons learned and sustainability</li> </ul>
April	<ul style="list-style-type: none"> <li>▪ KidSafe holds Awards Luncheon recognizing end of grant</li> <li>▪ KidSafe notified by OJP of opportunity for supplemental funding</li> </ul>

**Table 2-5. Timeline for KidSafe’s Implementation Phase (continued)**

Date	Event
<b>2003 (continued)</b>	
May	KidSafe completes sustainability training from Vermont Community Foundation
June	<ul style="list-style-type: none"> <li>▪ Family Connection Center suspends services, pending further fundraising</li> <li>▪ KidSafe submits supplemental application for \$125,000 to OJP</li> <li>▪ Video and toolkit for mandated reporters completed</li> </ul>

- What factors facilitated project efforts and what were the obstacles?
- What is the future for KidSafe?

We begin by discussing how project participants and other local observers view the accomplishments of KidSafe and its prospects, drawing upon several sources of interview and survey materials. Next, we present state and local data bearing on trends in the reported incidence of child abuse and neglect and other indicators. We then summarize our own perspectives on the KidSafe experience.

### **Perspectives From Project Participants and Other Local Observers**

This section draws particularly upon several sources of information about local perspectives on KidSafe, collected by the national evaluation team during 2002 and 2003.

These include:

- **Personal interviews with 19 “key informants,” conducted during a fall 2002 site visit.** They included two project staff, the local evaluator, and senior personnel from a cross-section of public and private agencies that participated in KidSafe. These interviews allowed for open-ended responses and discussion, in contrast to the two surveys mentioned next.
- **A Stakeholder Survey conducted early in 2003, the third in a series.** This mail survey targeted subgrantees and members of the KidSafe Council, committees, and teams—current or past—who had any project involvement in the previous two years. There were 71 respondents.<sup>43</sup>
- **A Survey of Agency Personnel conducted in 2002.** This mail survey targeted individuals in a position to observe the child protection system (broadly defined)—including volunteer GALs and supervisory and line staff

<sup>43</sup> The Stakeholder Survey was previously administered in 1998 and 2001. It is not a longitudinal survey, however, as new stakeholders were added each time and inactive stakeholders were eliminated. A detailed summary of the 2003 survey methodology, response rates, and results for all sites can be found in Volume III of this report.

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from child protective services, law enforcement agencies, and schools. There were 85 respondents.<sup>44</sup>

Besides our own data, we also cite findings from the local evaluation—specifically, a report on face-to-face interviews with 15 agencies.<sup>45</sup> It compared interview results from spring 2003 with those in spring 2001.

### **Findings**

By and large, KidSafe participants appeared very satisfied with both the collaborative process and its results so far. Everyone who had been around long enough to voice an opinion believed that the Community Network for Children, Youth, and Families had been the right choice to lead the KidSafe project. They noted that the agency had relationships with many key players at the outset; it was a neutral party (neither a provider nor a public agency); and its mission was a good match to the SK/SS initiative. Several respondents acknowledged that there had also been drawbacks—primarily the Community Network’s small size, lack of other funding, and initially, a concern that it just was not up to the task. The KidSafe experience had since eradicated qualms about the Network’s capabilities, if not the disadvantages of small size.

Key informants agreed about the project’s mission and its importance. When we asked respondents to describe the mission, we uncovered no significant discrepancies or misunderstandings. Enhancing child safety and bringing about system change or reform were consistent themes across the board.

Respondents to the 2003 Stakeholder Survey awarded KidSafe high marks on several aspects of the implementation process. “Project leadership” was awarded an average rating of 4.5 on a 5-point scale (where 5 represented “extremely satisfied”), satisfaction with the decisionmaking process received a 4.1, and two measures of decisions made were each rated 4.2 on average. Comparing successive ratings in 1998, 2001, and 2003, we also noted a steady increase in satisfaction with implementation over time. In the most recent survey, 82 percent of stakeholders rated KidSafe 4 or 5 on its openness to different points of view (for an average

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<sup>44</sup> A detailed summary of the survey methodology, response rates, and results for all sites can be found in Volume IV of this report.

<sup>45</sup> Livingston, 2003, *op. cit.*

rating of 4.2). Most stakeholders also reported that they had substantial influence over its goals and objectives. Again, ratings of openness and influence were higher than in 2001.

Although the typical stakeholder was happy with the implementation process, the 2003 survey reveals a few areas of concern. Fifty-eight percent of respondents felt that there had not been enough resources available in the previous year—perhaps a reaction to recent cuts in subgrant funding.<sup>46</sup> The same proportion felt that there had been insufficient cultural diversity among project participants and 44 percent said there had been insufficient community involvement. Many key informants echoed these concerns, acknowledging that the project had not been as successful at involving the community and system clients as it had been in some other endeavors. However, dissatisfaction in these areas had been even higher in the 2001 Stakeholder Survey, so at least the trend was positive.

When it comes to overall accomplishments, 70 percent of stakeholders were very satisfied, awarding ratings of 4 or 5 on a 5-point scale. Another 22 percent were somewhat satisfied (a rating of 3). When asked about the effects of KidSafe on their own organizations, just 24 percent said that it had significantly affected their *overall* operations—a tall order, perhaps, given that some of the organizations were large. However, four out of five reported significant effects on their organizations in specific areas.<sup>47</sup> The most frequently reported effects were: improved communication with other organizations (68% of respondents), improved communication with community members (59%), an expanded scope of services (51%), and improved training/professional development (46%).

The vast majority of stakeholders (94%) reported that KidSafe had significantly affected the community in some way, and over half said it had significantly affected their organization's clients. The most frequently reported community effects were: improved cooperation/communication among those who deal with child abuse and neglect (83% of respondents), improvements in multiagency responses to children affected by domestic violence (68%), improved information sharing and case tracking across agencies (66%), and expanded prevention programs (63%). For almost all community effects, the proportion of stakeholders reporting them increased in 2003. There were particularly large increases for the three least

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<sup>46</sup> Average rates of dissatisfaction with resources were higher than at the other sites and also considerably higher than Burlington rates in 2001.

<sup>47</sup> We defined significant effects as those receiving a rating of 4 or 5 on a 5-point scale, where "1" signified no effect at all and "5," "a great deal" of change or "a major effect."

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frequently reported effects in 2001—reaching underserved rural areas, making professionals and services more culturally sensitive, and involving grassroots organizations and other nontraditional groups—although these effects were still reported less often than most others. There were also large increases in the proportion reporting improved information sharing and case tracking.

About two out of three stakeholders thought that improving cooperation/communication was one of the *most* important KidSafe accomplishments. Other popular choices included: improving services for children/families that might “fall through the cracks” (23% of respondents), improving information sharing and case tracking across agencies (18%), improving case management and followup for families (18%), and expanding prevention programs (15%).<sup>48</sup>

Key informant interviews were broadly consistent with these findings. Most respondents told us that KidSafe had met their expectations, and several said it had exceeded them. Like the survey respondents, about two-thirds considered improvements in collaboration and coordination across agencies one of KidSafe’s most important outcomes. About half listed other system changes. Several mentioned better integration of responses to child abuse and neglect across agencies—sometimes highlighting specific improvements, such as stronger connections between Family Court and providers or stronger partnerships with SRS. Several respondents spoke of how important these changes had been to their own agencies.

One-third of the key informants listed the KidSafe subgrants as among the project’s most important accomplishments. In fact, nearly all the key informants praised the service subgrants at some point during the interview, and most were fairly optimistic that the new services would continue without project funding, probably with some modest reductions. Often, informants reeled off a list of service subgrants that they considered valuable, the most frequently mentioned of which was the supervised visitation program. Perhaps respondents cited it so often because they recognized that it was in financial straits. Anyway, as noted above, the service was temporarily suspended in June 2003.

Several respondents cited other initiatives among KidSafe’s most important accomplishments, including the mandated reporter training video and toolkit (still in progress),

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<sup>48</sup> Total percentages exceed 100 because respondents were asked to select the two most important accomplishments.



the MSCA (also underway), the Building Bridges workshops, the creation of a viable CPT, and the cultural awareness activities. Although they did not list them among the *most* important accomplishments, other respondents often mentioned these activities later in our interviews. Except for the CPT, all dated from 2001 or after and were part of KidSafe’s revised system change plan. Older activities that were frequently mentioned included the development of the CAC and the MDT.

A few respondents mentioned changes in awareness around child abuse and neglect, prevention, or domestic violence among KidSafe’s most important accomplishments. They were referring to awareness in the professional community rather than the public at large. No one cited changes in public awareness. Nor did anyone mention improvement in MIS capabilities. Elsewhere in the interview, however, nearly all respondents told us that more data were now available concerning child abuse and neglect. They attributed this partly to KidSafe, because it had raised consciousness about information limitations and created a forum for to sharing information, especially from SRS.

The local evaluator’s findings are largely consistent with our own surveys and interviews. Comparing results from agency interviews in 2003 with those 2½ years earlier, Joy Livingston concludes:

I. “[T]he child protection system continued to improve, and KidSafe efforts were an important part of the changes. . . . Overall, KidSafe was credited with improving communication, understanding and cooperation among agencies and providers. . . because of both KidSafe activities (e.g., meetings, workshops, partner projects) and the Director, Sally Borden’s leadership. . . . By 2003, providers saw cooperation and collaboration as integral to doing business. . . .<sup>49</sup>

The other major contribution attributed to KidSafe was the re-invigoration of the CPT.”

Livingston also credits KidSafe with improving service coordination; increasing training for investigators, prosecutors, and mandated reporters; adding several services that were likely to be sustainable; and making significant progress in educating professionals about culturally competent services.<sup>50</sup> Most agencies were now engaged in improving their cultural

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<sup>49</sup> Livingston, 2003, op. cit.

<sup>50</sup> Ibid.

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competence, she noted. They also generally showed a broader understanding of the issues than in 2000—no longer framing the problem solely in terms of language translation or staff training.

Livingston notes some other changes in which KidSafe may have played a part. First, in stark contrast to the earlier interviews, agencies now “felt that their services and mandates were understood by others in the system.”<sup>51</sup> Second, COTS and other housing agencies were now frequently reported to be part of agency referral networks. (COTS had been a fairly new KidSafe partner at the time of the previous interviews.) Finally, agencies had made progress in providing family-centered services, citing more efforts to involve families in identifying their own needs. Livingston did not find any significant changes in formal protocols and strategies for information-sharing, however. She also found that local agencies were extremely concerned about resource issues, reporting that most services were at full capacity and had waiting lists.<sup>52</sup>

Our Survey of Agency Personnel targeted a slightly different population from the other surveys and interviews cited, including many line staff. Most questions did not ask directly about KidSafe, because we were not sure that respondents would know the project. In fact, 24 percent of the Burlington respondents had *not* heard of KidSafe, and another 42 percent said they had heard of it, but were not familiar with its efforts. Of those who had heard of KidSafe, 65 percent said they did not know whether it had helped improve the child protection system or declined to answer. About half of those who felt KidSafe had improved the system mentioned improvements in collaboration, networking, or communication. Two or three respondents mentioned improvements in services/resources, training/education, or public awareness.

When asked about their own agency and its relationships to others, about 75 percent of the agency personnel reported increased contact with other agencies in the past 2 years. Mostly they attributed this to closer relationships with the staff of the other agencies or to increased knowledge of whom to contact. Most said that other agencies understood their agency very well (52%) or at least somewhat (46%). However, over 70 percent felt that the community’s child protection system had stayed the same or gotten worse over the past couple of years. Most respondents did acknowledge that certain procedures or activities had

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<sup>51</sup> Ibid.

<sup>52</sup> Ibid.

improved—especially, cross-agency coordination (reported by 19%), reporting of child abuse and neglect (13%), and identification of at-risk families, knowledge of resources, and professionals’ recognition of abuse (11% each). Overall, it appears that agency personnel see less change than other pools of respondents, although some differences might derive from differences in the questions, not just the respondents. For example, the survey of agency personnel asked about changes in the “child protection system,” while stakeholders were asked about KidSafe effects on the “community.”

The Stakeholder Survey and the key informant interviews also shed some light on how participants viewed the obstacles to KidSafe. When stakeholders were asked about eight challenges sometimes encountered by collaboratives, the majority rated only two challenges as significant currently—limited resources, mentioned by 92 percent, and keeping up the momentum, mentioned by 53 percent. Significant minorities also flagged some other current challenges, including understanding/meeting the expectations of funders (44%), turf issues/conflicting philosophies (43%), and lack of participation from key agencies or groups (42%). The majority thought most of the challenges on our list had been significant at some point in the collaborative’s history, if not now. There was one striking exception, however. Fifty-six percent of stakeholders said that “ineffective leadership” had *never* been a problem, and 39 percent said it had been significant earlier, but not now.

When we asked the key informants about the most difficult aspects of collaboration, they highlighted somewhat different issues from the Stakeholder Survey respondents. The vast majority said that the collaboration had been surprisingly conflict-free. Although there had been differences of philosophy and difficulties communicating clearly across disciplines and personal backgrounds, any disagreements that occurred had been respectful. Several commented that system change was simply hard work—it challenges traditional assumptions and ways of doing business and becomes even harder when resources are short. A few mentioned that working with Federal sponsors had been difficult—citing that crucial meeting in May 2001, when the collaborative got the message that OJP thought it was falling short. Beyond that, respondent views were fairly diverse. When we asked if there had been blind alleys or disappointments, the majority said yes, but just two specific areas were mentioned by more than one respondent. Three key informants felt that the MIS efforts had been stymied, probably because original expectations about data integration had been unrealistic. Three other respondents mentioned the cultural competence efforts. Two noted that

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they had been slow to develop, and the other was disappointed that efforts to work with the refugee community and increase interpreter access had not borne fruit.

Whatever the difficulties, KidSafe participants seemed fairly optimistic about the future. Key informants generally felt that the collaborative itself would be sustained in some form, or failing that, at least the communication and relationships established would continue informally. A couple of respondents were pessimistic about the future, unless the collaborative maintained *some* staffing. And nearly everyone said that staffing was eminently desirable. Sixty percent of the respondents to the Stakeholder Survey also saw the KidSafe collaborative as likely to continue. And 60 percent expected to be personally involved in KidSafe in the coming year, up from 49 percent when we asked the question in 2001. (Note that all this information was collected before OJP announced its intention to ease the transition to non-Federal support with a supplemental award.)

### ***Trends in Reporting of Child Abuse and Neglect and Other Indicators***

The ultimate goal of KidSafe is to reduce child abuse and neglect and other related problem behaviors. We did not expect to observe such reductions during the term of the KidSafe initiative, however, for several reasons. First, we assumed that it could take many years even for highly effective and appropriate system reforms and service improvements to significantly reduce child maltreatment. Second, we recognized that the rates of child abuse are influenced by economic conditions and other factors that are well beyond the control of KidSafe. Third and most important, it seemed likely that in the shorter term, KidSafe could actually increase referrals and reporting of child abuse and neglect, the best indicators we have of child maltreatment. This would occur if KidSafe succeeded in improving public perceptions of the child protection system, raising awareness of child abuse, and encouraging more people to report suspected abuse. Such increases in reporting could mask the effects of any reductions in abuse brought about by other project efforts.

In fact, child abuse and neglect referrals and reports (referrals that were accepted for investigation) did climb, as shown in Table 2-6, and far beyond what one would expect from increases in the child population.<sup>53</sup> A particularly sharp jump in referrals and reports occurred in 2000. However, local observers attributed this mostly to the highly publicized child fatality

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<sup>53</sup> Census figures indicate that the population of children under 18 increased about 8 percent from 1996-2000.

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**Table 2-6. Trends in Child Abuse and Neglect: Chittenden County, Vermont, 1996-2002<sup>a,b</sup>**

Year	Referrals to intake	Reports investigated	Substantiated victims	Children taken into custody	Children placed
1996	*	612	230	279	264
1997	*	649	279	299	281
1998	About 1,800	690	331	334	317
1999	About 2,300	761	301	332	318
2000	3,253	902	329	311	297
2001	3,379	904	285	347	316
2002	3,464	972	364	362	337
% change 1996-1998	*	+13%	+44%	+20%	+20%
% change, 1998-2002	+92%	+41%	+10%	+8%	+6%

\* Data not available.

<sup>a</sup> Sources: For referrals: KidSafe Project and Department of Social and Rehabilitation Services, Chittenden County District Office. For other statistics: Vermont Agency of Human Services, SRS.

<sup>b</sup> Referrals and reports may involve duplicated counts—more than one referral or report for the same victim. Also, events in any given case can overlap years. For instance, a report may be investigated in one year and the child taken into custody the following year.

that occurred in 1999 and the subsequent broadening of SRS’s criteria for “risk of harm,” which caused more cases to be accepted for investigation.

The other statistics in the table show a somewhat different picture. While the number of substantiated victims, children in custody, and placements increased somewhat during the years of KidSafe implementation, 1998-2002,<sup>54</sup> there were far bigger increases in the years immediately preceding KidSafe, 1996-1998. For example, the number of substantiated victims had increased 44 percent from 1996 through 1998, but just 10 percent from 1998 through 2002. Increases in children taken into custody and children placed were even smaller (8% and 6% respectively). While the pattern is interesting, we cannot trace it to the KidSafe initiative, although project efforts may well have played some role.

## Overall Assessment of the KidSafe Initiative

In this final section, we consider our key questions, in light of 6 years of observations, our review of project documents, and the survey and interview data cited above.

<sup>54</sup> Data for 2003 are not yet available.

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### **How Faithful Was KidSafe to OJP's Vision?**

On balance, the evidence suggests that KidSafe was extremely faithful to OJP's vision. Through KidSafe, the Community Network reinvented its structure—establishing a vibrant, working collaborative, with members from diverse sectors of the community. Collaborative members developed a common vision and shared important decisions about resources and priorities, in an atmosphere that was open to different points of view. In 2001, KidSafe bounced back from what many considered a confrontation with OJP to tackle more difficult system change issues, including sustainability. And some of the new activities were embraced with great energy and enthusiasm.

The KidSafe collaborative fell short of OJP's vision in just one area. It had limited success in engaging representatives from nontraditional sectors, including the business, media, and faith communities, grassroots community organizations, and consumers. KidSafe participants were concerned about these shortcomings, but other priorities took precedence. Judging from the evidence, more intensive efforts were needed. However, SRS recognized KidSafe's commitment in this area by contracting with KidSafe to develop and convene the District's Community Advisory Board. It will be interesting to see if this new venture opens up greater avenues to involving the community and consumers in the collaborative.

### **To What Extent Did KidSafe Produce System Reform?**

KidSafe made impressive progress on system reform and helped bring about many significant changes that are likely to endure. Perhaps the most dramatic change is that collaboration has become the normal way of doing business in the community. No doubt there have been other forces at work, but opinion is close to unanimous that KidSafe deserves a large share of the credit. This is particularly important, because in our experience, once the collaboration process takes hold, it is hard to turn back—even though specific collaborations may come and go. This seems particularly true for the KidSafe community, where collaboration has spread way beyond the KidSafe collaborative itself and is occurring at many levels.

Other significant system changes in which KidSafe played a substantial role include:

- Establishment of the CAC at CUSI;
- Establishment of an MDT and upgraded capabilities for electronic case-tracking and information-sharing at CUSI;
- Revitalization of a family-friendly CPT for addressing the needs of “gray area” families;
- Establishment of the Juvenile Justice Unit within the SAO;
- Integration of Family Court with the child protection community, with better coordination of responses among SRS, Family Court, and key service providers;
- Better integration of responses to domestic violence between SRS and the domestic violence provider community;
- Establishment of new or expanded services for children and families, including home visiting, a grandparent program, case management for homeless families, therapeutic programs for child witnesses, treatment for sexually reactive children, and neighborhood-based services at Family Centers in Winooski, Milton, and Burlington’s North End;
- Expansion of sustainable programs for offenders, including treatment for adolescent sex offenders and counseling/education for violent males;
- Improved facilities and staffing for forensic examination of sexual assault victims;
- Improvements in educational curricula for batterers and child care providers; and
- Increased use of outcome-oriented evaluation by some service providers, including the VNA.

It was too early to judge the results of several other KidSafe initiatives when we completed our observations. Certainly the mandated reporter training video and toolkit, designed for statewide distribution, have system-changing potential. So does the MSCA, to the extent that it can inform next steps in the policy and practice arena.

Note that almost all of the service programs developed or expanded through KidSafe appear likely to be sustained at some level, even in Vermont’s uncertain economic climate. The project has filled gaps in the continuum of services that previously hindered effective responses to the needs of children and families. The fact that these services are being sustained also implies some realignment of resources for child protection, although we cannot quantify it. The supervised visitation program, which KidSafe helped to start, is a worrisome

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exception, considering that most key informants are convinced of its value. The program's future was in doubt as of June 2003, although it had attracted some additional backing.

At the state level, KidSafe did not affect resource allocations in any major way, although there may be more opportunity to do so as the AHS reorganization moves forward, and the funding analysis is completed. (OJP also began providing additional technical assistance to all the SK/SS sites around issues of unified financial planning in 2003.) The collaborative's legislative activities were late in developing. If sustained, they may have a greater payoff down the line.

In other areas, KidSafe did valuable work, but we cannot say how enduring it will be. Right now, there are few structures in place to continue promoting public awareness, prevention education, cultural competency, and family-centered practice—unless KidSafe itself finds the resources for them. There are signs that commitments to cultural competency and family involvement are increasing within agencies, but we are not confident that they will continue without reinforcement.

### **Is There Evidence That the Project Has Had Longer Term Impacts on the Incidence of Child Abuse and Neglect?**

Substantiated cases of child abuse, child custody by SRS, and child placements by SRS have not increased as rapidly during the project years as they did in the years preceding the project. It is possible that KidSafe efforts to reduce child maltreatment played some role. There were sharp increases in referrals to SRS and investigated reports, but these are most likely attributable to increased publicity about child abuse and to changes in SRS policies governing investigations. KidSafe may have contributed to the former, but was not responsible for the latter.

### **What Factors Affected Project Success and Progress?**

Several factors facilitated project efforts and appear significant in explaining KidSafe's largely positive results. These include:

- **A favorable community climate.** The target area, Chittenden County, and the State of Vermont as a whole appeared to be “prevention-oriented” even as the project began. There had been other well-publicized state and local



initiatives aimed at primary prevention or early intervention for children and families. Also, there was some initial level of awareness and acceptance that domestic violence and child abuse were linked.

- **A capable and appropriate lead agency.** The Community Network had a track record of working on child protection issues, represented many of the public and private agencies, and was perceived as a neutral party—without allegiances to any specific agency. Although some community members initially harbored doubts about the agency’s ability to handle such a large project, even they were impressed and grateful that it had won the award.
- **Stable, skillful, and committed leadership.** KidSafe was fortunate to have the same project director throughout, and she has come to be well known and highly regarded in the Chittenden County community. Over the years, we have heard many examples of the project director’s skill at nurturing relationships across agencies. The project director also personally facilitates the CPT, one of KidSafe’s most widely praised initiatives. At the Council level, KidSafe has also attracted committed members and co-chairs—typically from the highest levels of local agencies.
- **Early and continuing use of open community meetings to attract members and shape priorities.** Drawing on experience as a community organizer, the Community Network Coordinator set the pattern in the planning phase—of widely advertised community meetings, followed by formation of work groups to follow up on priorities. During the implementation phase, KidSafe continued to hold public forums at the rate of at least one or two a year, and they spawned some of the project’s most popular initiatives, such as the mandated reporter video/toolkit and revitalization of the CPT. We believe that this approach has contributed to the perception that KidSafe welcomes different viewpoints, has attracted new participants, and kept up members’ enthusiasm. The Council itself is not “exclusive,” relying on volunteers who are willing to contribute their time to regular meetings.
- **Attention to the mechanics of collaboration.** KidSafe staff were extremely attentive to communication with collaboration members. Meetings were announced well in advance and minutes of most key meetings were prepared and distributed. This meant that no one was “out of the loop” unless they opted out. In fact, we never heard anyone complain that the project had failed to keep them informed.
- **Pressure from OJP and from training and technical assistance consultants to focus more on system reform.** While OJP had been encouraging greater emphasis on system reform for years, it did not exert significant pressure on KidSafe to move more in line with OJP’s vision until the project submitted its fourth grant application. Although that negotiation was painful for all parties, we believe the result was largely positive. KidSafe was challenged to take its efforts to a new level and did so—attending less to service strategies and investing more heavily in cross-cutting reforms. Earlier training and technical assistance, including that delivered at

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the cluster conferences, was also important at some junctures. Most notably, the system reform training for Council members, provided by SITTAP in 2000, helped Council members focus more attention on how service subgrants could serve system reform goals. The cluster meetings also created an opportunity to cement relationships among collaboration members in attendance, apart from their content.

On the other hand, there were some obstacles.

- **Preoccupation with service strategies and resources.** This is not an uncommon feature of collaborative programs, but was accentuated by the fact that the Community Network was primarily an organization of service providers at the outset. Many of its members had lost funding during a recent recession and saw KidSafe as a partial solution to this problem. This in turn shaped the initial approach, which committed the project to passing through the lion's share of the funding to local agencies. And this remained the basic approach until 2001. We believe that the subgrants *did* contribute to system reform—but in view of OJP's vision for SK/SS, the balance was tilted too heavily toward services in earlier years.
- **Inadequate core staffing.** This obstacle is closely related to the preceding one. Had less money been invested in service subgrants, more would have been available to staff other activities. Although KidSafe accomplished a lot with a small team, the advantages of a larger one became apparent in late 2001, when many new initiatives were launched. It is hard to say what other activities might have been undertaken with more staff support, but the training, education, and outreach activities that *were* planned would likely have benefited. Core staff might also have been able to purchase more evaluation and MIS support and invest more time in engaging nontraditional partners.
- **Lack of clarity about OJP expectations and timetables.** The reasons are debatable, but several times, KidSafe seemed caught off guard by the time it took to obtain approvals for applications or other requests or by the content of the feedback from OJP. The Grant 4 negotiations represent the most striking example. In the early years, KidSafe staff also seemed uncertain about what OJP expected in the MIS area and what investments the project should make in local evaluation.
- **The limitations of public management information systems.** Nearly all MIS systems in Vermont are statewide, and there is little or no cross-system integration. Also, because these systems are maintained elsewhere, technical expertise in how to use or improve them was lacking at the local level. This affected KidSafe in two ways. First, it was reluctant to tackle any system integration efforts on its own. Second, for most of its history, KidSafe relied mainly on expert judgment and anecdotal information to identify problems and determine project priorities. (Public agencies did routinely publish child welfare indicators for the county, but these provided only gross guides to planning.) This situation began to change somewhat for SRS data in 2001.

However, KidSafe got a close-up look at the barriers to tracking cases across agencies during its MSCA project. This effort has taken twice as long as expected and was still not done when we completed our observations.

## **What Is the Future for KidSafe?**

We are cautiously optimistic about KidSafe's future—and would have been so, even without the prospect of an OJP transitional award. Admittedly, the challenges are substantial because most of the organization's recent funding has come from the KidSafe award and once again, Vermont is going through lean times. We are impressed by agency's determination to continue the KidSafe legacy, however, and by the continuing commitment of individual stakeholders, many of them long-term participants. Although staff worry about losing momentum at the Council level, during our last visit local informants seemed quite invested in several recent KidSafe initiatives—including the policy forums, the video/toolkit, and the MSCA effort. KidSafe has also made significant strides in raising funding for the collaborative. Going into 2003, KidSafe had commitments from private foundations, SRS, and the United Way to cover some KidSafe activities and was expecting a small contract from the Health Department as well. Staff were planning for a much smaller operating budget than under the KidSafe project, although the transitional award would change that considerably. KidSafe also intends to develop a 5-year strategic plan and make more concerted efforts to publicize its work. These activities are all hallmarks of organizations that last.

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## **APPENDIX A**

### **Overview of Implementation Activities and Logic Model**

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 - 2003<sup>1</sup>**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability</b>					
Collaboration Development	Develop governance structure for KidSafe, representing broad cross-section of stakeholders	The Community Network & KidSafe	Chittenden County	3/97-present	<ul style="list-style-type: none"> <li>▪ KidSafe Management Council and supporting committees established (1997)</li> <li>▪ Management Council became the KidSafe Collaborative Council, the Community Network’s policymaking body (2000)</li> <li>▪ KidSafe affiliated with Champlain Initiative, the area’s state-designated “regional partnership” (2001)</li> <li>▪ Network Board held joint retreat with Council to improve role definitions and coordination; merged positions of KidSafe director and Network Coordinator (2001)</li> <li>▪ “KidSafe Collaborative” replaced “Community Network” as the primary organization name (2003)</li> </ul>
Client and Community Input in the Collaboration	Recruit community and consumer participants for collaborative	KidSafe	Consumers, parents, & community	3/97-present	<ul style="list-style-type: none"> <li>▪ At least 1 consumer/parent representative on Council since its inception; 2 parent representatives and one representative of a grassroots community organization as of 2003</li> <li>▪ Broadened range of community-based agencies involved in Council and committees over time</li> </ul>
	Promote family and community involvement at service and policy levels	KidSafe	Subgrantees, consumers, parents, & community	11/99-present	<ul style="list-style-type: none"> <li>▪ Subgrantees adopted procedures for getting consumer feedback on direct services</li> <li>▪ Most subgrantees had family involvement on boards or committees</li> <li>▪ KidSafe provided training scholarships for parents to attend conferences and co-sponsored a 20-week Leadership Training program; supported several other parent education opportunities through the subgrant process</li> <li>▪ KidSafe was awarded SRS contract to develop and convene a Community Advisory Board for the District, with majority consumer representation (2002); 1<sup>st</sup> meeting planned for summer 2003</li> </ul>
Strategic Planning	Refine vision and long-term action plans for KidSafe	The Community Network & KidSafe	Chittenden County	11/98-present	<ul style="list-style-type: none"> <li>▪ Held 2 Vision Summits (1999 &amp; 2000)</li> <li>▪ Held 2 large meetings (one w/OJP) and developed new System Change Plan (2001)</li> <li>▪ Held Community Network/KidSafe Council retreat (2002); planning another retreat for fall 2003</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Strategic Planning (continued)	Develop resources to sustain the collaborative and its vision	The Community Network, KidSafe, & subgrantees	Chittenden County	8/98 -3/03	<ul style="list-style-type: none"> <li>▪ All subgrant activities had multiple funding sources</li> <li>▪ Subgrantees had to include sustainability plans and demonstrate leveraging in their proposals; in 2002, funding decisions placed high priority on sustainability beyond SK/SS</li> <li>▪ Most subgrantees expect to sustain their efforts, with only modest reductions in service levels (2002-3)</li> </ul>
		KidSafe Sustainability Committee & Community Network Fund Development Committee	Chittenden County	10/01-present	<ul style="list-style-type: none"> <li>▪ Held Funders Forum for state and private funders, KidSafe subgrantees, and other community agencies (2002)</li> <li>▪ Won low-cost sustainability training for KidSafe and 8 other agencies through a local foundation; received 3 days of training and 2 individual agency consultations (2002-03)</li> <li>▪ Participated in AHS conference on financing (2002)</li> <li>▪ Contracted with University of Vermont for survey of children’s services funding in the county (2002); partially supported by United Way (\$1,500)</li> <li>▪ Grad students analyzed KidSafe’s marketing and outreach; recommended development of 5-year strategic plan and more vigorous public awareness campaign (2002-03)</li> <li>▪ KidSafe raised funds for collaborative operations from several sources, including \$5,000 from the Vermont Community Foundation, \$15,000 through a new annual campaign, and \$1,200 to support its role in Champlain Initiative (2002-3) (support for specific activities is listed elsewhere)</li> <li>▪ Developed proposal for OJP transitional funding (2003)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Multidisciplinary Teams	Develop Children’s Advocacy Center*	Initially: The Community Network & CAC Task Force  Later: CUSI	Initially: “Gray area” cases  Later: Victims of serious child abuse & neglect	9/97-present	<ul style="list-style-type: none"> <li>▪ Won more than \$66K from National Children’s Alliance (NCA), Ronald McDonald Charities, and a private foundation to support CAC program development and training (1998-2000)</li> <li>▪ Began services to “gray area” families (1999); discontinued after decision to return to program development (2000)</li> <li>▪ New protocol and facilities established for sexual assault exams at hospital; hospital started paying SANE nurses for on-call time (2000)</li> <li>▪ Bi-weekly MDT established to review cases of child sexual abuse and serious physical abuse (2000); regular mental health participation added (2002)</li> <li>▪ SRS worker stationed at CUSI (2001)</li> <li>▪ CUSI space renovated for CAC staff, mental health and victim support services (2002)</li> <li>▪ Obtained 1-year funding for CAC director through Children’s Justice Act (2002)</li> <li>▪ Therapy groups began on site (2003)</li> <li>▪ NCA certification obtained (2003)</li> </ul>
	Revitalize multi-disciplinary Child Protection Team (CPT)	KidSafe CPT Steering Committee	Victims of child abuse & neglect & children at risk	4/99-present	<ul style="list-style-type: none"> <li>▪ Revised mission statement and guidelines for CPT developed and approved by Council (2001)</li> <li>▪ New CPT brochure and information packet disseminated to 72 schools (2001)</li> <li>▪ Revised CPT implemented, with family-friendly format (4/2001)</li> <li>▪ Won funding support from a private foundation, the Champlain Initiative, and SRS (2002)</li> <li>▪ Based on CPT success, Health Dept. asked KidSafe to facilitate MDT for Women and Children at Risk Project. [see Program/Service Coordination, below]</li> </ul>



**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Program/Service Coordination	Promote inter-disciplinary and interagency coordination	KidSafe Operations Team (OT)	KidSafe subgrantees	3/99-3/03	<ul style="list-style-type: none"> <li>▪ Met monthly to share information, improve interagency coordination, and identify system change issues</li> <li>▪ Several partnerships developed between subgrantees, resulting in cross-trainings, delivery of services at partner locations, mutual referrals, and coordination of procedures</li> </ul>
		KidSafe	Local agencies & service providers	1999-present	<ul style="list-style-type: none"> <li>▪ Presented resource education program for judges, in collaboration with Champlain Initiative (2000)</li> <li>▪ Convened several ad hoc groups to explore opportunities/develop proposals (1999-2002)</li> <li>▪ Helped convene 2 meetings on needs of young women (2001)</li> <li>▪ Helped convene 2 forums on improving parenting education options for providers and referrers and helped with survey of parent education services (2002); smaller workgroups are following up</li> <li>▪ Began Building Bridges Workshops, held at a different agency each month (2001-2003)</li> <li>▪ Began convening MDT for the Women and Children at Risk Project, targeting substance-addicted pregnant and parenting women; Health Dept. contract to support this work is pending (2003)</li> </ul>
Training and Professional Development	Train/inform mandated reporters and other professionals about child abuse and neglect and reporting*	Initially: The Community Network & the Training, Education & Outreach Team  Later: KidSafe, CAC/CUSI, & SRS	Mandated reporters & other professionals	3/98-present	<ul style="list-style-type: none"> <li>▪ Updated mandated reporter training format and materials (2000)</li> <li>▪ Locally, trained 138 local child care providers (1999-2002); 12 probation and parole workers (1999); 34 medical providers (2000); 40 service providers (2002); 14 community college students (2002)</li> <li>▪ Presented statewide training for school nurses, using interactive TV format (2001)</li> <li>▪ Developed mandated reporter training video and toolkit to be disseminated to 3000 workplaces statewide (2002-2003)</li> <li>▪ Supported publication of comprehensive event calendar, through Lund Family Center (1999-2002)</li> <li>▪ Developed and disseminated Family Services Directory, with assistance from United Way and others (2000-2003)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development (continued)					<ul style="list-style-type: none"> <li>▪ Developed/facilitated workshops or presented at state conferences on several occasions</li> <li>▪ Provided training subsidies for several conference attendees</li> </ul>
	Provide consultation and training re: children and families at risk*	Subgrantees	Mandated reporters & other professionals	3/98-3/03	<ul style="list-style-type: none"> <li>▪ Several subgrantees delivered professional training through their subgrants, e.g.,                             <ul style="list-style-type: none"> <li>- Baird Center for Children and Families: trained service providers and made conference presentations on adolescent sex offending (1999 &amp; 2002)</li> <li>- Milton Family Community Center: provided regular clinical consultation to staff of center-based programs and local educators</li> <li>- Stop It Now! VT: regularly conducted trainings for supervised visitation monitors (1999-2002); also trained staff/volunteers from Kids on the Block (1999), child care providers and parents (2000); trained 15 providers on media advocacy (2001); presented to SRS staff (2002)</li> <li>- Women Helping Battered Women: trained Baird Center staff in domestic violence (2000 &amp; 2001); trained staff at homeless shelter and supervised visitation program (2002)</li> </ul> </li> </ul>
	Improve investigation and prosecution of child abuse and neglect*	SAO, <sup>2</sup> CUSI	Law enforcement, prosecutors, & SRS investigators	3/99-3/03	<ul style="list-style-type: none"> <li>▪ Prosecutors attended advanced training at conferences and American Prosecutors Research Institute (APRI) (2000-2001)</li> <li>▪ Multidisciplinary team of law enforcement and SRS investigators, prosecutors, and medical professionals attended APRI training on child fatalities and physical abuse (2002)</li> <li>▪ CUSI staff attended several trainings and conferences (2001-2002)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Cultural Sensitivity/ Competency Efforts	Increase cultural competency of local agencies and service providers*	KidSafe & subgrantees	Local agencies & service providers, subgrantees	11/97-present	<ul style="list-style-type: none"> <li>▪ Did not fund responses to RFPs in 1997 and 1998 because they did not match objectives</li> <li>▪ Cultural competency needs assessment completed and presented to Council (1999); used as a resource by other groups working on same issues</li> <li>▪ Subgrant applicants were required to demonstrate cultural competency efforts (1999-2002)</li> <li>▪ Stop It Now! VT coordinated 2 trainings on cross-cultural issues in child sexual abuse, one for medical professionals and one for other service providers (2001)</li> <li>▪ VNA Family Center started Community Cultural Nights (2000); now-weekly program remains very popular; spurred parent involvement in revision of Family Center guidelines to make them more culturally sensitive (2002)</li> <li>▪ Began participating in Refugee and Immigrant Services Provider Network (2001)</li> <li>▪ Provided 2-day training for 21 social services providers, to help them become diversity resources in their own agencies (2002); 2 participants co-presented a multi-agency diversity training workshop</li> <li>▪ Developed panel of “multicultural liaisons” (2002)</li> <li>▪ Helped Burlington High School develop ways to better serve African-American students and families through parent forum, group for teenage girls, and training video developed by the teens (2002-2003)</li> <li>▪ Supported grass roots women’s organization in efforts to collaborate with Health Dept. on health promotion in hard to reach populations (2002)</li> <li>▪ Worked with various other groups to increase resources for minority populations, increase cross-cultural understanding, meet needs (2002)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Cultural Sensitivity/ Competency Efforts (continued)	Increase access to interpreters and non-English written materials	KidSafe & Vermont Refugee Resettlement Program (VRPP)	Local agencies & service providers, linguistic minorities	7/00-present	<ul style="list-style-type: none"> <li>▪ KidSafe surveyed community agencies about interpreter needs (2000)</li> <li>▪ Helped VRRP staff 24-Hour Interpreter Access Committee and develop proposal for pilot project (2001); proposal on hold due to agency turnover and lack of support from VRRP's parent agency (2002)</li> <li>▪ Helped organize, promote VRRP training on interpreter use</li> <li>▪ Issued RFP and awarded minigrants for translation of brochures or other written materials to Family Court, CUSI, and Early Childhood Connection/Child Care Resources (2003)</li> </ul>
Other System Reform and Change Projects	Develop a Juvenile Justice Unit* <sup>2</sup>	SAO	Serious delinquency & child abuse cases	Early '99-present	<ul style="list-style-type: none"> <li>▪ Legislature funded prosecutor and support person for Juvenile Justice Unit (1999)</li> <li>▪ Unit became fully operational (2000)</li> <li>▪ Began regular meetings with SRS and law enforcement agencies; active involvement in CAC Task Force, MDT, and other local committees (2000)</li> <li>▪ Developed a truancy prevention project with Family Court, Burlington Schools, and Champlain Initiative (2000); project has been highly effective reducing truancy at elementary school level, somewhat effective at other levels</li> <li>▪ Developed new protocol for child death investigations, in consultation with chiefs of police, SRS, law enforcement investigators, and medical examiner (2002)</li> </ul>
	Develop model policies/ protocols for reporting and intervening in child maltreatment	KidSafe Policy Committee	Abused or neglected children, children at risk	11/01-present	<ul style="list-style-type: none"> <li>▪ Convened 3 Policy Forums on child abuse reporting (2002); planning a another for 2003</li> <li>▪ Developed video and toolkit on reporting child maltreatment for statewide distribution; includes model reporting protocol (2002)</li> <li>▪ Raised 80% of the funding from outside sources (2002)</li> <li>▪ Video and toolkit release planned for summer 2003</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Change Projects (continued)	Educate policymakers about child welfare resources and needs and advocate improvements	KidSafe	State legislators & other policymakers	7/00-present	<ul style="list-style-type: none"> <li>▪ Formed Legislative Advocacy Committee; disbanded after a few meetings (2000)</li> <li>▪ Reviewed and commented on juvenile justice bill (2001) and proposed SRS budget cuts (2002)</li> <li>▪ Co-sponsored public policy forum with Vermont Children’s Forum, the state’s leading child advocacy group; joined VCF Policy Board and successfully advocated for a separate section on child maltreatment in the policy agenda (2002)</li> <li>▪ Served on statewide Health Dept.’s Violence Prevention Advisory Committee (2002) and SRS Domestic Violence and Child Maltreatment Advisory Board (2002-3)</li> <li>▪ Co-sponsored legislative candidate’s forum, with Domestic Violence Task Force (2002); followed up with monthly legislative breakfasts for the Chittenden County delegation during the legislative session (2003)</li> <li>▪ Helped inform legislators of needs for mandated reporter training statewide, plus training for other providers; legislature passed bill requiring SRS to develop model protocols and training, with elements for providers who employ both mandated and non-mandated reporters (2003)</li> <li>▪ Legislature included clergy as mandated reporters (2003)</li> </ul>
	Support other collaborations with system change objectives	KidSafe	Chittenden County	Spring ‘98-present	<p>Staff actively participated in several other collaborations, e.g.,:</p> <ul style="list-style-type: none"> <li>▪ <i>Family Court Permanency Planning Project</i></li> <li>▪ Family Court instituted substance abuse and mental health assessments on-site (1999) (outgrowth of informal contacts through KidSafe)</li> <li>▪ State funded pilot counseling project for parents facing TPR, through Vermont Children’s Aid (2000-01) (KidSafe helped with proposal)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Change Projects (continued)					<ul style="list-style-type: none"> <li>▪ Court implemented new family visitation policy and protocol, expedited TPR process for older pending cases, and put greater emphasis on kinship placements (2001)</li> <li>▪ Court implemented Family Treatment Court for substance-addicted mothers of young children, with Federal, state, and private support (2002)</li> <li>▪ Probate Court judge agreed to hear post-TPR permanency hearings where adoption is planned (2002) (followup from KidSafe retreat)</li> <li>▪ VNA now routinely involved in most Family Court cases where children are at risk of removal (2002-2003) (outgrowth of contacts at KidSafe meetings)</li> <li>▪ Court now implementing new statewide protocol for children ages 0-6 (2002-2003)</li> </ul> <p><i>Winooski Pilot Project</i></p> <ul style="list-style-type: none"> <li>▪ KidSafe publicized plans for SRS community/child protection partnership and encouraged involvement by Winooski Family Center (a KidSafe subgrantee) (2000)</li> <li>▪ SRS office designated a Winooski team and plans to base it in Winooski, but location is still unresolved</li> <li>▪ U. of VT-Social Work Dept. and Casey Family Services became active partners in the project (2001)</li> <li>▪ Engaged Winooski Network, an informal community group, and held community forums to plan youth programs (2000-2002)</li> <li>▪ Community began summer lunch/recreation programs (2000) with Winooski Family Center as one site; Armory building reopened to house youth programs (2002); group now planning a Community Center to house youth programs and the Winooski Family Center (2002)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Change Projects (continued)					<p><i>Domestic Violence Task Force</i></p> <ul style="list-style-type: none"> <li>▪ KidSafe promoted greater contact between SRS and Domestic Violence Task Force (2000)</li> <li>▪ KidSafe advocated for incorporating section on children in domestic violence protocols (2001)</li> <li>▪ KidSafe serves on Protocol subcommittee, which is updating current DV protocols and developing protocols for child witnesses (2002-2003)</li> </ul> <p>KidSafe also participates regularly in <i>Community Placements Management Team, Parents with Disabilities Group, and Juvenile Justice Team</i></p>
<b>Continuum of Services</b>					
Prevention and Early Intervention Activities	Provide center-based parent education & support*	Winooski School District & Baird Center for Children and Families	Families in Winooski	7/98-present	<ul style="list-style-type: none"> <li>▪ Winooski Family Center established, equipped, and operating with growing range of programs on site and multiple sources of funding (1999-2003)</li> <li>▪ Established Steering Committee with active parent involvement</li> <li>▪ Active in the Winooski Network, a community group working on broader community needs</li> <li>▪ Working with SRS, Casey Family Services, and U. of VT to develop Winooski Pilot Project, an SRS/community partnership (2000-03)</li> <li>▪ 3-year foundation grant will partially offset the loss of SK/SS funds</li> </ul>
		Visiting Nurse Association	At-risk families in North Burlington neighborhood	3/98-present	<ul style="list-style-type: none"> <li>▪ Family Advocate provided service coordination, case management, and referrals in the Family Center and the home</li> <li>▪ Established popular Community Culture Night program, with client input (2000)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)		Milton Family Community Center	Grandparents & other relatives serving as parents in Milton & surrounding areas	3/98-present	<ul style="list-style-type: none"> <li>▪ Established the only grandparent group in the region; meets weekly, with concurrent children’s group</li> <li>▪ Expanded geographically to hold 1 meeting per month in Winooski (2001)</li> <li>▪ Group members active in training, publicity, and outreach; hosted a legislative forum and developed an advocacy agenda in support of kinship placements and grandparent/relatives’ rights (2002)</li> <li>▪ As of 4/02, program funded by Vermont Agency on Aging (2002); group also received funding for its newsletter and is applying for \$1,500 to fund legal services for group members (2003)</li> </ul>
	Provide intensive-home visiting*	Visiting Nurse Association	High-risk families ineligible for other programs	3/98-present	<ul style="list-style-type: none"> <li>▪ Provided 10 families (at a time) with intensive home visiting; expansion of state coverage for home visiting (2000 and 2002) will cover continuation after KidSafe</li> <li>▪ VNA now routinely involved with Family Court cases where there is risk of removal of child, especially where substance abuse is an issue (2002)</li> </ul>
	Develop programs for special needs parents*	KidSafe Workgroup on Child Abuse/ Neglect & Parents with Mental Illness	Parents with mental illness & their children	9/98-2000	<ul style="list-style-type: none"> <li>▪ Developed goals and plans, provided input to Early Child Connection grant proposal (1999)</li> <li>▪ Reviewed pilot curriculum for child care providers working with children of mentally ill parents (2000)</li> </ul>
		COTS (Committee on Temporary Shelter)	Homeless & newly housed families	4/00-present	<ul style="list-style-type: none"> <li>▪ Provided case management for homeless families and those who had recently obtained housing</li> <li>▪ Consistently achieved goal of keeping all children in school and attending regularly</li> <li>▪ Continued to expand on-site and support services through collaborations with other agencies (2002)</li> </ul>



**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)		Lund Family Center	Incarcerated fathers, SRS-referred families	10/00-3/02	<ul style="list-style-type: none"> <li>▪ Ran 3 Nurturing Parent groups for men incarcerated in Regional Correction Facility (2000-2001)</li> <li>▪ Added group for SRS-referred families in the community (2001)</li> <li>▪ Did not apply for funds in 2002, and discontinued services due to multiple implementation barriers in short-term correctional setting</li> </ul>
		Child Care Resource	Child care providers, parents with mental illness	4/00-present	<ul style="list-style-type: none"> <li>▪ Developed and tested curriculum for child care providers who serve children with mentally ill parents (2000-01)</li> <li>▪ Piloted 3-credit course at Champlain College (2001)</li> <li>▪ Final version of course offered fall 2002, with 10 enrollees; will be offered periodically, supported by fees</li> </ul>
Intervention and Treatment Activities	Provide services and treatment for families in conflict*	Family Connection Center	Families involved in domestic conflict	3/98-present	<ul style="list-style-type: none"> <li>▪ Started the only supervised visitation program in the area</li> <li>▪ Worked on referral protocol with SRS, Family Court, Baird Center, and KidSafe (2001); increased referrals from SRS and Family Court, many of them “gray area” cases (2002)</li> <li>▪ Implemented 3 tiers of supervision, “protective,” “supportive,” and “therapeutic”; added clinical support to enable “therapeutic supervision” (2002)</li> <li>▪ SRS contracted for “supportive (teaching) supervision” for up to 7 families weekly, plus emergency contact for children just taken into custody (2002)</li> <li>▪ Achieved close to full capacity but suspended services due to lack of funds for security while awaiting results of another grant application (2003)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Intervention and Treatment Activities (continued)		Domestic Abuse Education Project (DAEP), at Spectrum Youth and Family Services	Male batterers; other males with violence & control issues	3/98-present	<ul style="list-style-type: none"> <li>▪ Developed new parent education modules and integrated them into existing court-ordered batterer education program (DAEP) in 1999; curriculum adopted by 2 other counties; self-sustaining after development phase</li> <li>▪ Developed Dad' Safe, new parenting education group for men with histories of violent or controlling behavior toward partners (1999); received March of Dimes Distinguished Health Professional Award (2000); originally voluntary, but now often ordered by court, SAO, or Corrections, sometimes after DAEP (2002); drop-off in referrals (late 2002); future funding unresolved</li> <li>▪ Developed Young Men's RAPP, a new group program for abusive youth, ages 13-18 (1999); as of 4/02, completely funded by non-KidSafe sources, including SRS</li> <li>▪ Working with SRS on protocols for referral of domestic violence offenders; planning to schedule on-site intake at SRS</li> <li>▪ Working with Women Helping Battered Women and others to develop partner contact protocols</li> </ul>
		Women Helping Battered Women	Child witnesses of domestic violence & their families	4/98-present	<ul style="list-style-type: none"> <li>▪ Provided therapeutic playgroups and follow-up support to families in several schools and at domestic violence shelter</li> <li>▪ Enhanced support for parents and children in the domestic violence shelter; began a Peer Parent program involving former residents (2002)</li> <li>▪ Trained school-based social workers in therapeutic playgroup methods (2001); school social workers co-facilitated 2 groups (2002)</li> <li>▪ Services continuing at reduced level with other support (2003)</li> </ul>
	Provide summer day camp support for families & staff*	YMCA	Children referred to camp by SRS Camp staff	6/98-3/02	<ul style="list-style-type: none"> <li>▪ Hired behavioral specialist to work with children and support/train camp staff in addressing children's behavioral and emotional problems</li> <li>▪ Did not reapply for 2002; agency planned to continue through other funding</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Intervention and Treatment Activities (continued)	Treat juvenile sex offenders and victims*	Baird Center for Children and Families & SRS	Sexually reactive victims of sexual abuse, ages 6-12	3/98-present	<ul style="list-style-type: none"> <li>▪ STEP groups and individual therapy are regularly available</li> <li>▪ Expanded from 2 to 3 groups in 1999; developed a maintenance/transition group</li> <li>▪ Services continuing with other support, including SRS (2003)</li> </ul>
		Baird Center for Children and Families	Adolescent sex offenders	3/98-present	<ul style="list-style-type: none"> <li>▪ Initial assessments, group and individual treatment are regularly available</li> <li>▪ Formed special group for youth with developmental delays (1999)</li> <li>▪ Staff meet monthly to coordinate services with SRS and Spectrum Youth and Family Services (2002)</li> <li>▪ Received additional funding from SRS beginning in 2000; services continuing with SRS and other support (2003)</li> </ul>
<b>Data Collection and Evaluation</b>					
Local monitoring and evaluation	Subgrant progress reporting and monitoring	KidSafe Evaluation Team & Operations Team	KidSafe subgrantees	4/98-3/03	<ul style="list-style-type: none"> <li>▪ Subgrantees regularly submitted quarterly progress reports on performance and outcomes (used in refunding decisions)</li> <li>▪ KidSafe sponsored outcome-oriented evaluation training for subgrantees and other interested agencies (1999)</li> <li>▪ Several subgrantees implemented formal evaluation components (Baird, VNA, Spectrum, CUSI); VNA, Spectrum, and others made internal assessments more outcome-oriented</li> </ul>
	Local evaluation*	KidSafe Evaluation Team & local evaluator	Chittenden County	3/98-present	<ul style="list-style-type: none"> <li>▪ Local evaluator hired (1999)</li> <li>▪ Structured agency interviews conducted (2000 &amp; 2003)</li> <li>▪ Substituted MSCA effort for study of “gray area” families, due to barriers recruiting families (2001)</li> <li>▪ Assembled communitywide indicators for inclusion in annual reports and project publicity (2002-2003)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
MIS development/ information-sharing	Increase ability to access and exchange information on child abuse and neglect cases*	KidSafe, CUSI	Formal child protection agencies	Early '99-present	<ul style="list-style-type: none"> <li>▪ Subcontractor completed audit of current MIS capabilities (1999)</li> <li>▪ Following audit recommendation, SRS joined statewide criminal justice integration team(1999)</li> <li>▪ Local SRS implemented new data system for non-investigated cases (1999)</li> <li>▪ CUSI installed new case-tracking system, accessible on-site to SRS and SAO ((2000)</li> <li>▪ KidSafe purchased a computer to help SRS worker at CUSI access CUSI and SRS databases (2002)</li> <li>▪ Provided input to other database projects underway at state level</li> </ul>
Multisystem Case Analysis (MSCA)	Examine process and outcomes of child abuse and neglect cases in the formal child protection system	MSCA Work Group (KidSafe & Family Court) & local evaluator	Children & families in the formal child protection system	July 2001-present	<ul style="list-style-type: none"> <li>▪ Held orientation meetings for stakeholders (2001)</li> <li>▪ Developed design, instruments, and procedures (2001-2002)</li> <li>▪ Collected and analyzed data on 100 cases from court, SRS, law enforcement files (2002-03)</li> <li>▪ Report in progress (2003)</li> </ul>
<b>Prevention Education/Public Information</b>					
Public education	Inform public about child abuse and neglect and available resources*	The Community Network & KidSafe	Community members, parents	3/98-present	<ul style="list-style-type: none"> <li>▪ Convened Community Meeting and did radio interview after “shaken baby” death (1999)</li> <li>▪ With Champlain Initiative, met several times with editorial staff of Burlington newspaper (2001)</li> <li>▪ Produced several brochures, occasional newsletters, a KidSafe fact sheet, and in 2002, an annual report</li> <li>▪ Coordinated 1<sup>st</sup> Family Services Expo (1999); participated in community fairs, annual Kids Days, Million Moms March, and other community events</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

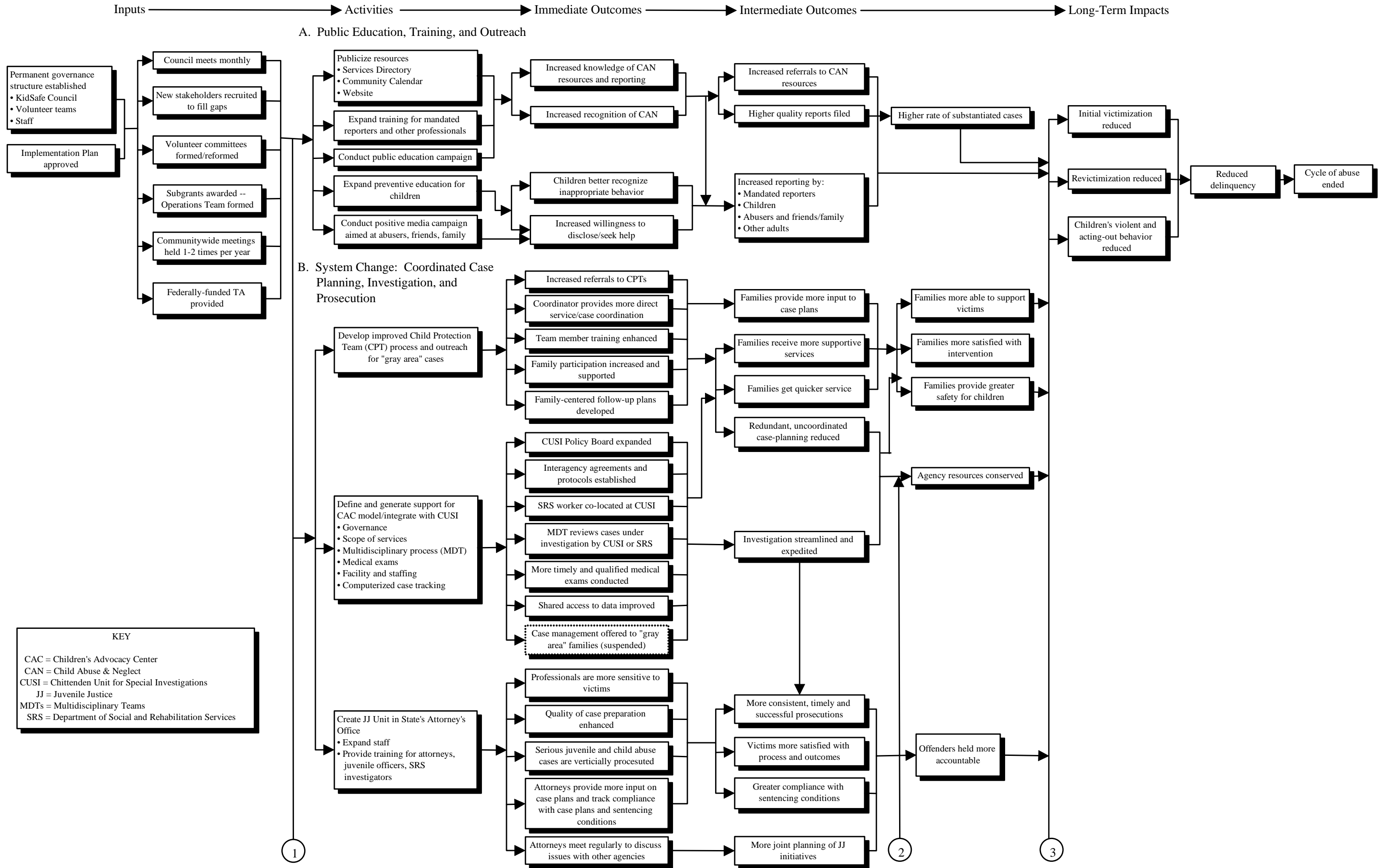
Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information (continued)</b>					
Public education (continued)					<ul style="list-style-type: none"> <li>▪ Implemented KidSafe web site (2002)</li> <li>▪ Funded parent education through subgrants; participated with several KidSafe partners in “think tank” on parent education (2002-2003)</li> <li>▪ Developed, updated, and widely disseminated a <i>Family Services Directory</i>, with support from United Way and others ; incorporated it into Kids VT Family Resources Book for wider distribution</li> <li>▪ Supported publication of comprehensive event calendar, through Lund Family Center (1999-2002)</li> </ul>
	Inform children about physical and sexual abuse, domestic violence*	Kids on the Block-Vermont, Women Helping Battered Women, CUSI/CAC	Elementary school children	3/98-3/03	<ul style="list-style-type: none"> <li>▪ Kids on the Block presented free puppet shows promoting physical and sexual abuse awareness at multiple schools (1998-2003); numerous disclosures of abuse linked to this program (although some were not new)</li> <li>▪ Women Helping Battered Women playgroup staff co-facilitated 11 workshops on bullying and teasing</li> <li>▪ CUSI/CAC provided personal safety education (2001-02)</li> </ul>

**Table A-1. Overview of Implementation Activities for Burlington KidSafe: 1997 – 2003 (continued)**

(\*Indicates activities supported by KidSafe subgrants or subcontracts)

Activity Category	Activity	Lead Agency/ Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information (continued)</b>					
Public education (continued)	Provide outreach and public education for abusers and their associates*	Stop It Now! VT	Abusers, family members, friends, public	3/98-3/03	<ul style="list-style-type: none"> <li>▪ Regularly sponsored panels, workshops and conferences; appeared on TV, radio, and in print media; distributed educational materials and widely aired public service announcements</li> <li>▪ Sponsored parent attendance at conferences and involved parents in developing materials</li> <li>▪ National program cited as a model by Centers for Disease Control and Prevention (2000)</li> <li>▪ Seeking continuation funding from CDC (2002-03); national office committed to fund part-time local coordinator for another year (2003)</li> </ul>
<p><sup>1</sup> Note that many activities and accomplishments cut across more than one category. We chose a “primary” category for them rather than repeat the information in several places. For instance, cultural diversity training for service providers was listed under “Cultural Sensitivity/Competency Efforts,” but would also qualify as “Training and Professional Development.”</p> <p><sup>2</sup> The SAO received just one subgrant, in 1998. This award was intended to help create a Juvenile Justice Unit and was budgeted mostly for staffing. When the SAO succeeded in leveraging permanent state support for juvenile justice staffing, the subgrant funds were reallocated to professional training and were still being used through 2002.</p>					

**Figure A-1. Logic Model for Burlington KidsSafe - Implementation Phase**

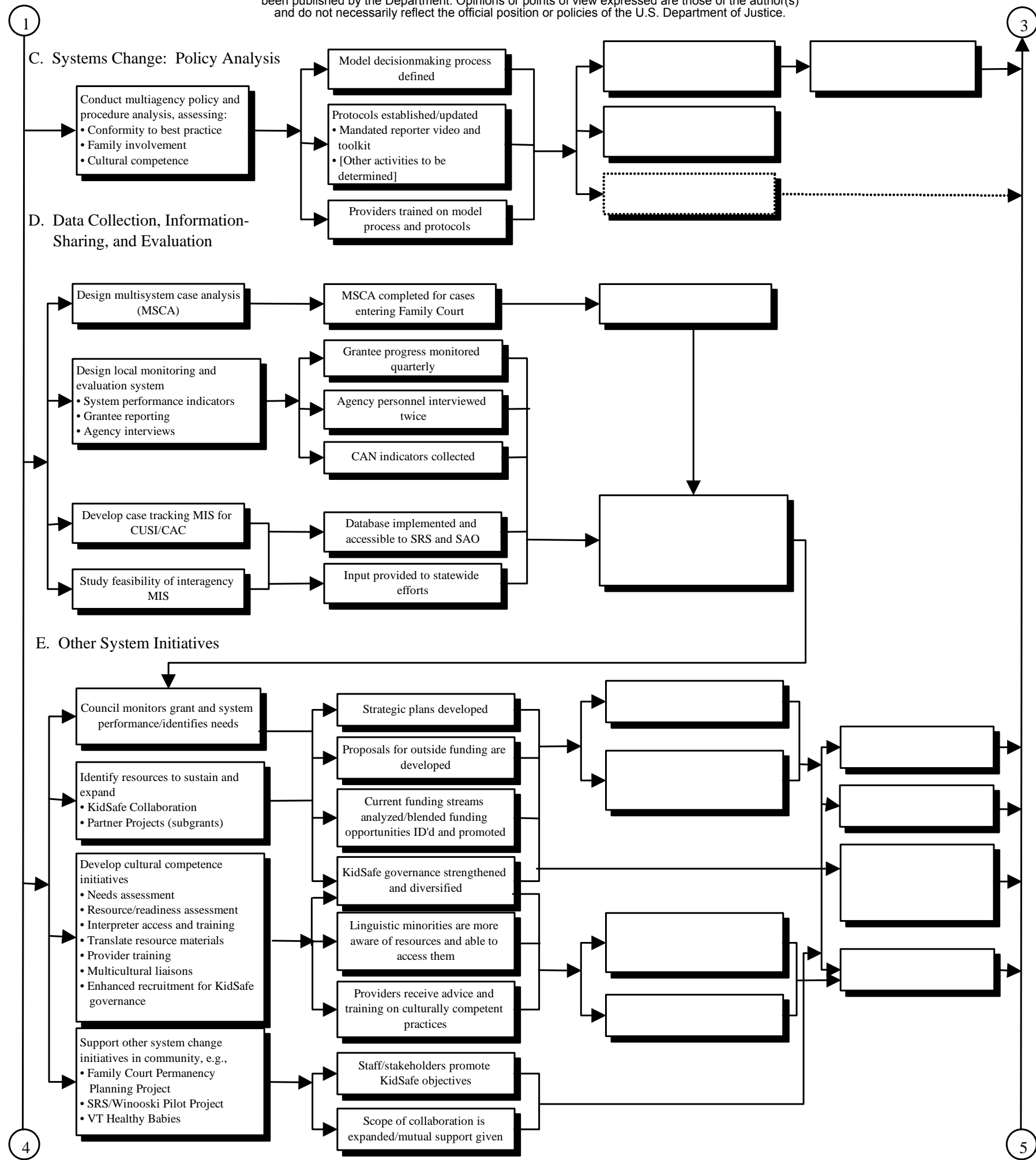


**KEY**  
 CAC = Children's Advocacy Center  
 CAN = Child Abuse & Neglect  
 CUSI = Chittenden Unit for Special Investigations  
 JJ = Juvenile Justice  
 MDTs = Multidisciplinary Teams  
 SRS = Department of Social and Rehabilitation Services

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### **3. One by One, Madison County, Alabama**

A coalition led by the National Children’s Advocacy Center (NCAC) in Huntsville, Alabama, received the initial Safe Kids/Safe Streets (SK/SS) award in March 1997. The project, One by One: A Safe Kids/Safe Streets Initiative, built on the strengths of the community in addressing child abuse and neglect issues and took on the task of building a collaborative around these issues. The NCAC received five awards of \$800,000 each. The first grant was expended over a 2-year period from March 1997 through April 1999. Subsequent awards were received annually and will take the project through September 2003. In 2003, OJJDP provided funds for an unexpected sixth grant (\$125,000) to support system reform and sustainability efforts through December 2004. Total funding from OJJDP for the Huntsville program was \$4,125,000.

#### **Project Setting**

##### **Characteristics of the Community**

The One by One project, based in Huntsville, Alabama, targeted all of Madison County. The county varies from surrounding counties, the State, and the nation in several significant ways. (See Table 3-1.) Madison County is a well-educated, moderately wealthy community, primarily because of Redstone Arsenal, a NASA installation, and the supporting aerospace industry that operate out of Huntsville. However, approximately 44 percent of the land in Madison County is farmland, as opposed to 26 percent statewide.

The county population grew 16 percent (compared to 10% in Alabama overall and 13% in the United States) between 1990 and 2000. In 2000, the racial composition of Madison County continued to be similar to statewide breakdowns for three racial categories: 71 percent white, non-Hispanic; 23 percent African-American; and less than 1 percent American Indian, Native Hawaiian/Alaskan Native, or other race. Hispanic and Asian residents make up a small proportion of the county population (1.9 percent and 2.3 percent, respectively). Over 5 percent of Madison County residents use a language other than English in the home.

## One by One, Madison County, Alabama

**Table 3-1. Characteristics of Madison County, Alabama, and U.S. in 2000<sup>a</sup>**

<b>Characteristics</b>	<b>Madison County</b>	<b>Alabama</b>	<b>United States</b>
Population	276,700	4,447,100	281,421,906
Percentage change in population 1990-2000	16%	10%	13%
Percentage of persons under 18 years old	26%	25%	26%
Percentage of persons 25+ with a high school diploma	85%	75%	80%
Percentage of persons 25+ with a BA or higher	34%	19%	24%
Median household money income, 2000	\$43,239	\$34,135	\$41,994
Per capita money income	\$23,091	\$18,169	\$21,587
Percentage of persons below poverty, 2000	11%	16%	12%
Percentage of children below poverty, 2000	15%	22%	17%
Percentage of single parent households, 2000	23%	30%	28%

<sup>a</sup> U.S. Census Bureau. (2003). *State and county quick facts*. [www.quickfacts.census.gov](http://www.quickfacts.census.gov).

Huntsville is the largest city in Madison County and the fourth largest city in the state (population 158,216 in 2000). Madison City, also located in the county (population 29,329), is the fastest growing city in the state; it grew by nearly 100 percent between 1990 and 2000.

Although Madison County is wealthier than other counties in Alabama, 10.9 percent of its total population and 15 percent of its children live in poverty. Nearly one-fourth (23%) of the households with children are single-parent homes.

### **Rates of Child Abuse and Other Risk Factors**

In the years immediately prior to the SK/SS award, reports of child abuse and neglect to the Madison County Department of Human Resources (DHR) were declining—going from 1,436 in 1994 to 1,178 in 1997. DHR estimated that in 1997 these reports represented 1,683 children, and approximately 55 percent were substantiated. Additionally, DHR reported that 15 percent of the children with substantiated cases in FY1996 and FY1997 had a previously substantiated case.

Community risk factors for youth varied. Rates of teen pregnancy, a risk factor for abuse and neglect, were nearly 10 percent for girls ages 10 to 19 in 1994 through 1996; the percentage of births to unwed teenage mothers was slightly increasing during this time (from 9.2% to 9.6%). Dropout rates in Huntsville City and Madison County schools were 2.6 percent

## One by One, Madison County, Alabama

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and 2.7 percent, respectively, in 1995-96. Juvenile arrest rates ran at 182 violent crimes per 100,000 in 1996 for youth ages 10 to 17, slightly down from the 1993 high of 209 arrests per 100,000. Teen, child, and infant death rates were on the decline. Reports of child abuse and neglect were also slightly down at the time the SK/SS proposal was written (1,285 reports in Madison County in 1996 versus 1,436 reports in 1994). The number of women served in domestic violence shelters increased by 30 percent between 1995 and 1997; the number of children served in these shelters increased by 50 percent during that time period. These increases possibly reflect improved outreach to victims of family violence, rather than dramatic increases in the incidence of domestic violence.

### The Formal Child Protection System

Intervention in child abuse and neglect in Madison County involves a variety of agencies, including the Department of Public Health; the DHR Division of Adult, Child, and Family Services; law enforcement; the Mental Health Center of Madison County; the District Attorney's (DA) Office; the NCAC; the Municipal, District, and Circuit Courts; the Juvenile Probation Department; and several private and public advocacy and support groups. In addition, several public and private service providers are responsible for treatment and early intervention, prevention, and training services. The NCAC is an important player within this system, partnering with many of the different agencies above by facilitating the multidisciplinary team (MDT) and maintaining the Children's Advocacy Center (CAC). In some ways, the child protection system in Huntsville was already well along in developing a coordinated community response to child abuse before the SK/SS grant was awarded. However, as discussed later, there were still deficits that SK/SS could help the community address.

The child protection system addresses child maltreatment as defined by Alabama law. Statutory definitions of child abuse and neglect have remained the same in Alabama since the project was initiated, encompassing non-accidental physical or mental injury, sexual abuse, sexual exploitation, and neglect of individuals less than 18 years of age.<sup>55</sup> Perpetrators of child maltreatment are defined as parents (natural, step, and adoptive), legal guardians, or any person responsible for the care or custody (either temporary or permanent) or the supervision of the child.

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<sup>55</sup> National Clearinghouse on Child Abuse and Neglect Information. (2002). *Compendium of law reporting laws: Definitions of child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services, p. 9.

## One by One, Madison County, Alabama

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Mandatory reporters in Alabama include health care, mental health, social work, educational, child care, and law enforcement professionals; individuals providing substitute care (including foster parents); as well as “any other person called upon to render aid or medical assistance to any child.” Beginning in March 2003, a new Alabama law (P.L. 2003-272) added members of the clergy, except where the information was gained through confidential communication. All of the above individuals are required to report when the child they are aiding is known or suspected to be a victim of child abuse and neglect. The only exception to reporting is that associated with attorney/client privilege. Oral reports are required immediately with written reports to follow (timeframe not specified). DHR shares investigation with law enforcement (as defined by a Memorandum of Understanding at the county level); however, law enforcement is specifically tasked with investigations of corporal punishment in schools and those facilities operated by state agencies. DHR can assist in these investigations.

### ***Department of Human Resources***

The Division of Adult, Child, and Family Services within DHR is responsible for protecting both children and adults from abuse and neglect.<sup>56</sup> The program is state-run and county-administered. As the lead agency for addressing child abuse and neglect involving parents and other caretakers, DHR has primary responsibility for receiving referrals/reports of child abuse and neglect, screening reports, investigating cases of abuse, and referring for service.<sup>57</sup> DHR refers families with unsubstantiated cases to other services, but there are limited services available unless the families are Medicaid-eligible. During the first round of site visits in 1997, DHR caseworkers and supervisors identified lack of services for families with unsubstantiated cases as a barrier to addressing child abuse and neglect.

DHR also has responsibility for assuming custody of children whom the District Court has identified as seriously abused. Caseworkers maintain oversight for children in custody and foster care and work toward adoption in appropriate cases.

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<sup>56</sup> The Division of Adult, Child, and Family Services was created from two separate divisions, Adult Services and Family and Children’s Services, in July 1996.

<sup>57</sup> For more detailed information on the operations of DHR in Madison County, see Gragg, F., Cronin, R., Myers, T., Schultz, D., & Sedlak, A. (1999). *An examination of the Safe Kids/Safe Streets planning process: Year 1 final report for the national evaluation of the Safe Kids/Safe Streets program*. Rockville, MD: Westat.

## One by One, Madison County, Alabama

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The impetus for reform in child welfare in Alabama originated primarily with the 1991 settlement of *R.C. vs. Hornsby*. The settlement involved agreement to a set of principles for reforming child welfare in the state.<sup>58</sup> One of the primary principles required developing community partnerships. A county-by-county implementation strategy was developed. In Madison County, a Quality Assurance Committee (QAC), composed of service providers, DHR staff, community representatives, and consumers, was developed. The QAC, established in spring 1996, meets at least quarterly and reviews all aspects of a sample of DHR cases (approximately 23 per quarter). A new state division of DHR, Conversion and Compliance, was created in July 1996 to expedite the conversion to the Consent Decree system of care. Principles for improving or “converting” service delivery in DHR included ensuring community input, providing adequate staff training, conducting appropriate investigations, supervising cases, reducing staff workloads, and creating a more responsive system. Conversion to the new system of care occurred in Madison County in 2003.

The Consent Decree had an enormous impact on the environment of the One by One project. First, as a close partner with DHR through its CAC and MDT functions, the NCAC had already begun helping DHR think through best practices for working with abused children. Second, the community (both individuals and agencies) had some initial exposure to the concept of community involvement in child protection. Third, DHR was beginning to open itself to change and more community involvement. Other factors, including 12 years of experience with the MDT and the CAC, may have fostered this openness. Regardless, One by One found an environment receptive to change and a willing partner in DHR.

Significant changes have occurred in the Madison County DHR during the life of One by One, some of which were directly related to the SK/SS initiative (these changes are discussed in more detail in *Results*). Others stemmed from the conversion of care, Federal legislation, influences at the state level, or an ongoing search for improvements. Some of the non-SK/SS changes include:

- Reorganization of the state DHR;
- Installation and development of a new DHR computer system (ASSIST);

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<sup>58</sup> Brazelton Center for Mental Health. (1998). *Making child welfare work: How the RC lawsuit forged new partnerships, to protect children and sustain families*. Washington, DC: Author, p. 6.

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- Establishment of caseload standards for case workers—18 cases for foster care workers, 21 to 24 for ongoing workers, and 12 to 15 for child abuse and neglect investigators;
- Hiring new caseworkers and decreasing caseload size to meet state standards (staffing levels in DHR went from 58 in 1997 to 87 in 2003);
- Family input in individualized service plans;
- Establishment of Child Death Review panels;
- Establishment of an Adoption Unit;
- Development of a 90-day mentoring program for new caseworkers to reduce burnout and develop skills before assigning a full caseload;
- Home visitation by therapists to conduct assessments;
- Increased educational advocacy; and
- Faster case processing and permanency planning to meet requirements of the Adoption and Safe Families Act.

### ***Law Enforcement***

Felony child abuse and neglect cases are handled by three jurisdictions within Madison County: the Madison County Sheriff's Department, the Madison City Police Department, and the Huntsville Police Department (HPD). The Sheriff's Department handles felony child abuse and neglect cases for the smaller municipalities in Madison County, such as New Hope and Gurley. One Sheriff's investigator and two HPD investigators specialize in child abuse and neglect cases. In addition to the child abuse and neglect investigators, HPD has four officers who specialize in domestic violence.

### ***District Attorney's Office***

The Madison County DA's Office handles all felony child abuse cases for Madison County and works closely with the Huntsville Municipal Court, which handles misdemeanors in the city. When One by One began, the DA's office had one attorney dedicated to child abuse and neglect and a second attorney whose primary assignment was domestic violence, but who also tried child maltreatment cases. In 1999, the DA created a Family Violence Unit to coordinate the responses to both child abuse and domestic violence. As part of the SK/SS project, attorneys, investigators, and victim/witness staff for the unit were located at the NCAC.

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The two attorneys chair the MDT meetings. During the 6 years of program operation only four attorneys have served in these positions. The same DA has served for the entire time.

### ***Court System***

Three courts play a role in Madison County's child protection system. The Municipal Court handles misdemeanor child abuse and neglect and consists of two full-time judges and one part-time judge. The District Court, with three judges, handles: (1) misdemeanor criminal cases, as well as felony examinations and preliminary hearings, including those that involve criminal charges of child abuse; (2) delinquency cases; and (3) dependency cases—custody hearings for abused and neglected children, foster care hearings, and permanency planning to determine if the child can be returned to the home or if parental rights should be terminated. The Circuit Court, comprising six judges, hears civil cases, such as divorce, and felony criminal cases, including felony domestic violence and child abuse and neglect.

Two of the current District Court judges and one of the Circuit Court judges are former prosecutors, who specialized in child abuse and neglect cases. Beginning in August 1997, the judges reorganized how cases were assigned to ensure that all cases regarding a single family are heard by the same judge. This assignment system has its flaws (especially when siblings have different last names); however, it has improved coordination of the cases involving the same family.

Two recent laws have a direct bearing on actions in the District Court. First, Alabama recently enacted a law automatically certifying juveniles who commit a Class A violent felony (homicide, forcible rape, forcible sodomy, or sexual torture) as adults. Second, in 1998, the State Attorney General made the interpretation that the Sex Offender Notification Act applied to both adult and juvenile sex offenders. This act requires notifying residents and limiting accessibility of such offenders to schools and other gathering places for children. As a result, judges are faced with the problem of where to place, or what to require of, such juvenile offenders if they cannot be in schools or around other children. This created problems for one of the One by One programs, the Juvenile Sex Offender Program, which was dependent on adjudications for referrals.



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Other changes in the court since the project started include:

- In 2000, the Alabama Administrative Office of Courts determined that the District Court caseload was sufficient to warrant another judge; funding for that judge has not yet been allocated.
- Also in 2000, video arraignments were initiated, which minimized the time spent transporting detained youth from the detention center to court.
- A full-time referee was employed to help with shelter and detention hearings.
- A dependency investigator was contracted to provide support to the District Court.

### ***National Children’s Advocacy Center***

The NCAC is one of the largest non-profit agencies in Madison County. Begun in 1985, the development of the NCAC was largely the result of the efforts of the DA, who now represents the area in the U.S. House of Representatives. In addition to the DA’s Office, the county director of DHR, the chief of the HPD, and the Madison County sheriff were actively involved in the development of the new agency, supporting interagency protocols for addressing the investigation of sexual and serious physical child abuse.

Alabama law supports the CACs through several legislative initiatives:

- A 1985 law (26-16-50) that directed DHR to work with the DA, law enforcement, the schools, mental health and health service providers, social service agencies, and local members of the legal community;
- A 1985 law (16-16-13) that required state agencies and law enforcement agencies to share information about suspected child abuse and neglect; and
- A 1995 law to fund MDTs and CACs throughout the state. Funding fluctuates based on services provided. In fiscal year 2003, the NCAC in Huntsville received \$125,000.<sup>59</sup>

The mission of the NCAC is “to model and promote excellence in child abuse response and prevention.” Three key elements of the NCAC are (1) an MDT approach, (2) a child-friendly environment and resource center (known as “the Little House”) for victims and their families, and (3) the provision of training and information for professionals. The NCAC

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<sup>59</sup> This funding was reduced in FY2004 to \$87,000.

## One by One, Madison County, Alabama

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supports a wide range of programs to further this mission, including prevention programs (e.g., Stop Child Abuse and Neglect and Healthy Families North Alabama), community outreach, treatment services, and training programs, particularly the annual National Symposium on Child Abuse and the CAC Training Academy for CAC and MDT professionals, as well as community awareness efforts.

In addition to providing a child-friendly environment to interview victims of child abuse and neglect and do forensic examinations, the NCAC provides a range of treatment services for abused children, ages 3 through 17, and nonoffending parents:

- Therapy for abused children;
- A Resiliency Group for teenage girls, which also trains “graduates” as peer mentors;
- Male and female parenting classes for nonoffending parents;
- Group therapy for teen mothers who are survivors of sexual abuse; and
- Paraprofessional family advocates for non-offending caregivers of sexually abused children.

The NCAC has also built a reputation for developing and coordinating training for professionals in the child abuse and neglect community. The NCAC conducts an annual Symposium on Child Abuse, which provides both technical training for CPS workers, lawyers, law enforcement officers, and service providers and more general programs on how to identify child abuse and neglect, the role of the community in reporting child abuse and neglect, and other topics. Many professionals earn continuing education credits. The NCAC also conducts a training academy for developing and maintaining an effective CAC and MDT and provides other on-site customized training programs. In the past, the NCAC also provided access to national satellite videoconferences on child abuse and neglect, juvenile delinquency, and child welfare issues, and currently, it provides access to workshops via the Internet.

### ***Multidisciplinary Team***

The Madison County MDT was established in 1986. As defined in the 1999 investigative protocol, the team is composed of prosecutors, supervisors from the three largest law enforcement agencies (HPD, Madison County Sheriff’s Office, and Madison City Police

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Department), DHR, NCAC, and the Health Department. This core is supplemented on an “as needed basis” with investigators, therapists, service providers, and others who can contribute information on specific cases, such as CAJA volunteers. The MDT meeting is chaired by one of the two assistant DAs handling family violence cases. The team meets weekly at the NCAC to review both existing cases and new referrals for child abuse and neglect. On average, MDT meetings are attended by 10 to 15 agency representatives.

Co-locating offices of MDT members was one of the first efforts undertaken by One by One. Team members now on-site include two assistant DAs, four DHR investigators, two HPD investigators, a Madison County Sheriff’s Office investigator, a DA investigator, a team coordinator, and a victim service officer.

### ***Other Supporting Agencies***

Three other agencies provide support to the child protection system, particularly in relation to the District Court. Two groups—court-appointed juvenile advocates (CAJA)<sup>60</sup> and guardians ad litem (GALs)—provide independent representation for the child in dependency proceedings. CAJA volunteers are specially trained, assigned to child abuse and neglect cases by District Court judges, and conduct intensive fact finding investigations of the juvenile’s home and school, medical, and DHR records. CAJA volunteers monitor the court case and attend meetings within DHR that focus on the child. GALs are attorneys assigned to represent the best interests of the child. In Madison County, GALs are not part of an organized program; rather, they sign up for court appointment.

In juvenile delinquency cases, the Juvenile Probation Office is responsible for preparing a social data sheet for the District Court that gives demographic data on the involved youth, family background, and the youth’s problems—such as learning disabilities, behavior problems, and physical disabilities. Probation also works with youth in detention and training schools to identify and address past or current maltreatment problems.

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<sup>60</sup> In most jurisdictions, this program goes under the name Court Appointed Special Advocate (CASA); however, this acronym applied to an elderly program in Madison County and therefore the juvenile program was changed to CAJA.

## ***Treatment System for Families Involved in Child Abuse and Neglect***

Treatment for families involved in child abuse and neglect generally begins with DHR staff, although law enforcement, the DA's Office, and the courts may also refer or mandate treatment services as the case progresses through the system. Service availability also depends on whether a case is formally recognized as child abuse and neglect. A variety of public and private service providers are available in Madison County and Huntsville.<sup>61</sup> Their services are highlighted below.

### ***Services for Nonsubstantiated Cases***

Even though child abuse and neglect may not be substantiated, the need for services may become evident during the investigation or even the initial report. Services such as housing, parenting information, employment counseling, and other counseling may be needed to avert subsequent, more serious problems. Few resources are available for these types of services. In DHR, the Homemakers Program serves families that do not have a case opened in the agency but that have problems which, if not addressed, could escalate into child abuse and neglect. Families are referred to other agencies; teenage mothers are frequently referred to the Girls, Inc. program. Additionally, the NCAC provides a number of services for such cases, as described above, including Family Advocates. Frontline workers refer families to the Family Welfare side of DHR, often walking families through to ensure that there is a smooth transition.

### ***Services for Substantiated Cases***

Significantly more services are available for victims and their families once an allegation has been substantiated. DHR frontline staff provide case management for services received from a variety of resources, determining that the child's safety is secured before terminating involvement. The Foster Care Unit evaluates whether the family can be reunited or whether termination of parental rights and adoption should be considered. Regardless of which agency is providing services, the availability of services often depends on Medicaid eligibility. When the family is not Medicaid-eligible, treatment is more limited or less timely, as individuals are placed on waiting lists. Below, we describe services provided through different community providers.

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<sup>61</sup> NCAC treatment services were discussed previously, under *The Formal Child Protection System*.

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### ***Mental Health Center of Madison County (MHCMC)***

This center provides treatment services in cases of substantiated child abuse, focusing on both the offending and nonoffending caretakers of maltreated children. Many of these services are provided through the substance abuse treatment program, New Horizons. For clients requiring detoxification or inpatient services, an inpatient program is available, although DHR does not pay for it.<sup>62</sup> The majority of those assessed are put into an outpatient program, lasting a minimum of 10 weeks. Graduation from the program requires sobriety, consistent attendance, the required number of 12-Step meetings, and completion of homework assignments. Upon graduation, clients are encouraged to continue in weekly group therapy at no cost for an unlimited amount of time.

### ***Family Services Center***

Family Services Center is a private treatment facility that provides a variety of programs on a sliding-fee scale. Funding for the Center comes from the Children's Trust Fund, other grants, and donations. Services include substance abuse counseling; family, individual, and group therapy; therapy for domestic violence victims; and adoption counseling. Much of the therapy at the center focuses on family preservation and reunification.

### ***Prevention and Early Intervention System***

In addition to the Stop Child Abuse and Neglect and Healthy Families programs conducted by the NCAC, several other prevention programs operate within Madison County, most of which were or became partners in the SK/SS effort.

### ***Domestic Violence/Hotline Programs***

Crisis Services of North Alabama was created in 1999, when two agencies—HELpline and Hope Place—merged. The agency operates a community crisis hotline for crisis intervention, rape response, and suicide prevention; makes referrals; and keeps the community informed about resources through a resource directory and an Internet-based agency database. It also operates two women's shelters (one in Madison County and one in Morgan County) that

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<sup>62</sup> The inpatient program is located in Birmingham. The lack of a local inpatient facility was a frequently cited deficit throughout the One by One project.

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serve five counties in northeast Alabama with a variety of services for victims of domestic violence, including support groups, a children's program, legal assistance, and van service to and from the shelter.

### ***Male/Fatherhood Support Programs***

The Coalition on At-Risk Minority Males (COARMM) operates an educational enrichment program in eight locations, targeting minority males, especially third through seventh graders. In addition to its tutoring programs, COARMM has expanded to offer job coaching, programs to bring employers and minority males together, dropout prevention programs, GED classes, and night basketball. In 2000, the Alabama Children's Trust Fund began funding the NCAC Fatherhood Initiative, which aimed to ensure that noncustodial fathers were active in their children's lives. The NCAC targeted the program to noncustodial fathers of families involved in the Healthy Families Program.

### **History of Collaboration**

Prior to SK/SS, collaboration around child abuse and neglect in Huntsville centered primarily on the NCAC and the MDT. The DA's Office, the sheriff, the chief of police in Huntsville, DHR, and the NCAC had established interagency protocols for working together and sharing information on a case by case basis both for MDT members and professionals using Little House resources, such as specialized therapists for forensic interviews. The NCAC Board of Directors included broad representation, similar to that called for by the SK/SS solicitation. Also, the Quality Assurance Committee, convened before the SK/SS proposal was written, pulled together a variety of community and agency representatives to address the problems of child abuse and neglect and DHR's response.

During Westat's first site visit to Huntsville, stakeholders and program personnel often cited the NCAC and the MDT as the key strengths of the current system for handling child abuse and neglect. Some individuals also felt that collaboration was the strength of the community, although the MDT was the primary example cited. Some informants did speak of turf issues and problems with interagency communication. In short, key stakeholders began SK/SS with a perception that Madison County was already collaborating well.

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### Other Aspects of the One by One Environment

Before discussing how the project developed and was implemented, it will be useful to highlight some of the other environmental factors (state elections, administrative changes, and economic issues) that were in play between 1997 and 2003.

State elections were held in 1998 and 2002. Both elections resulted in new governors (supported by different political parties). Also in 2000, a new chief justice was elected to the Alabama Supreme Court, which led to changes in personnel at the Administrative Office of Courts.

Numerous leadership changes within the community also occurred. New heads of DHR were appointed in 1998, 2001, and 2002. In the first two cases, the retiring director was replaced by a local DHR assistant director. In 2002, after the death of the assistant director, an interim director was named, and then an individual outside of Madison County was selected to head the agency. Huntsville City Schools changed school superintendents three times. Madison County changed its school superintendent once. In 1998, Madison City, which had previously been part of the county school system, established a separate school district. In 1999, the presiding judge of the Juvenile Court moved to the Circuit Court, and a Municipal Court judge was appointed to the District Court. A new presiding District Court judge was named who became very active in the One by One project. The Madison County sheriff retired in 2002 and was replaced by one of his chief deputies. The executive director of the NCAC also resigned in 2000 and was replaced by the director of the clinical staff for the NCAC.

Such changes are part of the natural order of business life. However, each had the potential to disrupt One by One and meant that the project needed to resell ideas and concepts on a continuing basis. When the newest director of DHR was appointed in 2002, she became an active participant in the One by One project, serving as a co-chair of the Madison County Coordinating Council for Children and Families (MC3), which the project facilitates and administers.

In addition to personnel changes, other organizational changes were occurring in partner agencies. The HPD restructured its operation to a precinct-based program. The District Court initiated a small claims mediation program (in 2000) and hired a full-time referee. DHR employed domestic violence professionals to work with child maltreatment workers. Beginning

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in 2002, the District Court began implementing a Family Drug Court without additional funding.

Another critical change was the shift in the economy in 2000. When the project began, money appeared to be available to support a range of efforts identified by One by One and the community. As the project progressed, the economy shifted, unemployment increased, and service providers and community-based organizations began to lose dollars. For example, Crisis Services of North Alabama, a key partner in the SK/SS collaborative, had to close a shelter in neighboring Marshall County in 2002 because of state budget cuts. The NCAC also lost significant state funding in 2003.

### **Introduction to the Project**

#### **Grantee**

As discussed above, the NCAC plays an important function in Madison County's child protection system. It is governed by a 34-member Board of Directors and run by an executive director. For eight members of the Board, the appointment is determined by the position held. The positional members include the sheriff of Madison County, the director of DHR, the chiefs of the Huntsville and Madison City police departments, the school superintendents of the Huntsville and Madison County schools, the Madison County DA, the Mayor of Huntsville, and the Chairman of the Madison County Commission. The NCAC has 58 full-time and 12 part-time staff (including staff of the One by One project), plus a cadre of volunteers. The current executive director has been with the NCAC since 1995.

The funding levels for the NCAC nearly tripled over the course of the SK/SS project, from over \$2 million in 1997 to over \$6 million in 2002 (Table 3-2). Some of the revenue increase resulted from a capital campaign for a new headquarters, which was completed in 2003. Most funds come from state grants through DHR, Alabama Children's Trust Fund, and the Alabama Department of Economic and Community Affairs. Other funding sources include United Way, Children's Charities of America, Huntsville Hospital Foundation, and miscellaneous other sources. Two of the largest grants come from the Department of Justice, one for SK/SS and the other for the Southern Regional Children's Advocacy Center. Service fees (sliding scales are used for therapy), product sales, conference and training fees, honoraria,



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**Table 3-2. Revenues for the National Children’s Advocacy Center FY1996-FY2003**

Fiscal years	Revenue Sources						
	SK/SS awards	SK/SS allocations	Other grants/ allocations	Total grants/ allocations	Program services	Public support	Total revenues
1996	\$0	\$0	\$1,510,536	\$1,510,536	\$611,112	\$304,577	\$2,426,225
1997	88,525	88,525	998,214	1,086,739	731,153	317,355	2,135,247
1998	340,061	340,061	1,024,905	1,364,966	598,542	368,207	2,331,715
1999	1,171,414 <sup>a</sup>	505,127	1,027,050	1,532,177	940,874	1,221,421 <sup>b</sup>	3,694,472
2000	800,000	736,352	1,189,428	1,925,780	997,820	1,057,879 <sup>c</sup>	3,981,479
2001	800,000	690,105	1,519,389	2,209,494	1,039,271	842,820	4,091,585 <sup>d</sup>
2002	800,000	798,968	3,295,723	4,094,691	1,173,547	868,971	6,137,209 <sup>e</sup>
2003	125,000	471,394 <sup>f</sup>	NA	NA	NA	NA	NA

<sup>a</sup> These funds reflect the release of the remainder of Grant 1 funds (\$371,414) and the new Grant 2 award.

<sup>b</sup> Includes \$1,053,512 in capital donations.

<sup>c</sup> Includes \$812,674 in capital donations.

<sup>d</sup> Includes \$760,405 of capital revenue.

<sup>e</sup> Includes \$2,045,150 of capital revenue.

<sup>f</sup> Through June 30, 2003.

and symposium receipts support approximately 75 percent of all program services. Other revenues are the result of donations, membership fees, special events, and proceeds from thrift stores.

### Development of the Safe Kids/Safe Streets Proposal

The NCAC identified the SK/SS solicitation as part of its routine checks for Federal funding. Staff believed the project would allow the NCAC, in collaboration with its partners, to address significant deficits in the community protection system. Specifically, they included:

- Limited prevention outreach to families;
- High reports of child abuse and neglect;
- Ongoing conflicts among agencies serving the same population;
- Lack of knowledge of services among professionals and the community;
- Gaps in the continuum of services;

## One by One, Madison County, Alabama

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- Constraints in resources (time, knowledge, and funding) to ensure adequate investigations.<sup>63</sup>

The proposal was developed with input from NCAC staff, focus groups, and senior representatives from each system required in the solicitation. The focus groups were composed of members of the QAC, which primarily included upper- to mid-level supervisory agency staff and service providers involved in child abuse and neglect. These groups were used to develop consensus on community priorities, identify the general types of programs needed in the community, and suggest the service providers to be involved in each program. Senior input was obtained through a newly formed Stakeholders Council of agency directors. The Stakeholders Council expanded on the NCAC's usual collaborations with the DA, sheriff, chiefs of police, and DHR, adding school superintendents and the directors of the Health Department and the Mental Health Center. The expanded Council mirrored the NCAC's own board. The proposal was written by NCAC staff and approved by the Stakeholders Council. Based on interviews with service providers and individuals from agencies outside of NCAC during fall 1997, there was little question within the community that the NCAC should act as the lead agency.

### The Project Vision

The NCAC viewed the SK/SS initiative as a means of addressing the deficits identified above and pulling together existing efforts to increase its own effectiveness and fill program gaps within the existing system. The grant would also allow NCAC to take a fresh look at its current efforts, re-examine its approach to child sexual abuse and serious physical child abuse, and expand its collaboration. The vision guiding the proposed program called for:

- A public aware of the seriousness of child abuse and neglect;
- Media, public officials, and professionals constantly seeking to improve the response to the needs of the children;
- Utilization of prevention programs;
- A well-informed and well-financed professional community aware of all services available in the community and able to refer and treat children appropriately; and

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<sup>63</sup> NCAC. (1996). *Safe Kids/Safe Streets, community approaches to reducing abuse and neglect and preventing delinquency*. Application to OJJDP.

## One by One, Madison County, Alabama

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- A multidisciplinary approach to investigating cases of child abuse and neglect and providing services to children.

Much of the proposal called for expanding current NCAC activities. For example, the proposal emphasized support for the MDT; funding the assistant DA, team assistant, and sheriff's deputy; and co-locating members of the team in a single building. Based on input from the focus groups, the NCAC also proposed expanding the current Healthy Families program, adding a therapist for Little House, and providing support to the current training program and to Stop Child Abuse and Neglect (SCAN).

New initiatives would include an adolescent sex offender program, a program to make early contact with families involved in domestic violence, a prevention program for new minority fathers, and an MIS. However, each of these proposals would be reexamined based on a needs assessment conducted at the beginning of the project.

The governing structure for the proposed project would be two-tiered. The Stakeholders Council, composed of the senior officials from the collaborating agencies, would establish program priorities and grant final approval for program activities and expenditures. The QAC would recommend activities and areas of program emphasis.

The proposed budget was \$925,000, allocated in the following manner:

- \$373,166 to the NCAC.
- \$347,650 to county and city agencies such as the DA's Office, law enforcement agencies, DHR, and the court system.
- \$204,184 to providers such as Crisis Services of North Alabama, COARMM, the Mental Health Center, and Family Services Center.

From this budget, \$89,883 would be spent on program planning. The planning activities were to include the design of the local evaluation and a public opinion survey. These two tasks would be contracted out for a combined total of \$13,729. The NCAC also proposed to leverage over \$900,000 to support the project from the NCAC and the public agencies.

## Notice of Grant Award

SK/SS sites were notified of their selection in March 1997. Funding for the Huntsville program was provided by OJJDP. Huntsville was required to submit a revised budget for \$800,000, instead of the \$925,000 requested.<sup>64</sup> To comply, funding for two staff positions was reduced. Additional adjustments included shifting the training needs assessment to NCAC funding, reducing the number of trips to Washington, DC, and to CACs across the country to identify best practices, eliminating funding for an additional DHR investigator (alternate funding was identified), and reducing the cost of the public opinion survey.

## Timeline for Grant 1

OJP designed the first grant period to be broken into two phases—planning and initial implementation. During the first 6 months, programs were to develop an Implementation Plan; \$75,000 was designated for this planning period. After approval of the plan, OJP would then release the remaining Grant 1 funds for implementation. As it turned out, Huntsville’s money was released in five separate allocations—two for planning and three for implementation. The first implementation funds were released in March 1998 and overlapped planning efforts. Additional implementation funds were released in May 1998 and January 1999. As a result, Grant 1 covered 2 years, from March 1997 through April 1999.

## The Planning Phase

The Implementation Plan was developed in two distinct phases. The first occurred between April and August of 1997, at which time the original Implementation Plan was submitted. The second phase occurred between November 1997 and September 1998, when a revised plan was submitted for approval by OJJDP. OJJDP permitted the Huntsville program to reallocate \$83,749 from implementation to planning so it could address the questions raised by OJJDP and broaden its planning efforts. Along with the original \$75,000 planning grant, this brought the total planning budget to almost \$159,000.

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<sup>64</sup> OJJDP decided to direct \$125,000 of its total allocation for SK/SS to Toledo, OH, in order to provide seed money for the SK/SS efforts there.

## One by One, Madison County, Alabama

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### Development of the First Implementation Plan

Right after notice of the award, the NCAC began developing the Implementation Plan. This was possible because the NCAC had established the governing structure for the grant while preparing the proposal. The first step the NCAC took was to reevaluate the consensus on priorities, since 9 months had elapsed between proposal submission and notification. The members of the QAC and the Stakeholders Council were given a checklist of the proposed priorities and asked to rank them again. The consensus in April 1997 was similar to before. The Juvenile Sex Offender Program and the Substance Abuse Program received the highest priority ratings.

Using members of the QAC, the NCAC established workgroups for each program/activity to be implemented under SK/SS. Service providers and staff who would implement the activity were also part of the workgroups. These groups recommended how the activity should be conducted and which clients should be served. Efforts focused on identifying new services needed (e.g., offender services, services for children who witness violence), improving current services, and reviewing programs in other parts of the country that could serve as models. Minimum and ideal budgets were submitted with each activity proposal. The SK/SS planning staff reviewed the proposals and budgets submitted by subgrantees to determine if they coincided with the proposed budget and the SK/SS goals.

Data for the planning effort were limited to findings from the focus groups held during the proposal process, with the updated priority rankings, and findings from a series of seven site visits conducted to CACs around the country. A local evaluator was identified, but no evaluation plan was included in this original Implementation Plan.

Many of the NCAC staff who worked on the Implementation Plan had been involved with the proposal. Their current NCAC responsibilities were adjusted to enable them to focus on the Implementation Plan development. Staff participating in this effort included the SK/SS project director, the MDT director, the systems manager, the NCAC executive director, finance director, the grants administrator, the training manager, and support staff. The project director spent over 50 percent of her time on the Implementation Plan during these months. Additionally, the NCAC began turning its attention to early implementation efforts. Support staff for the team were hired. The systems consultant, who was brought on board when the grant was awarded, began evaluating hardware and connectivity issues.

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The first Implementation Plan was a direct outgrowth of the original proposal. However, the QAC took a more active role in developing the plan, making decisions on how activities would be carried out, specifying target populations, and eventually, reviewing a draft Implementation Plan. This feedback was used to update the plan, which was then submitted to the Stakeholders Council for final approval.

Approximately 20 activities were proposed in the first Implementation Plan. They were designed to fill gaps in treatment and prevention programs—providing a substance abuse program for caregivers, supervised visitation programs, a Juvenile Sex Offender Program, a Minority Fathers Program, and a First Responder Program.<sup>65</sup> MDT enhancements and public information activities were to begin immediately (and in some cases had already begun). Other activities would be implemented gradually. NCAC staff reported that one of the positive aspects of the process was the willingness of partners slated to receive SK/SS funding to support this phased approach.

There was little consultation with the OJJDP program office during this time, although NCAC staff shared written updates and reports about planning activities. Questions directed to OJJDP were primarily technical or financial. The plan was submitted in August 1997.

In early October, OJJDP notified the NCAC by telephone that substantial changes in the plan were required. The OJP program staff met with the executive director to discuss these changes in Washington in mid-October, following up with a letter in mid-November. OJJDP required the Huntsville team to: (1) develop a community-wide initiative, rather than expand the NCAC; (2) specify both programs and goals in more detail (i.e., identify target populations, number of people to be targeted, how activities would be implemented, how progress would be measured, how programs and goals were linked); and (3) include a local evaluation plan. Operational issues that needed to be addressed included:

- Expanding/enhancing participation in the collaboration by the courts and the CAJA program;

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<sup>65</sup> The First Responder Program involves domestic violence advocates accompanying police officers on domestic violence calls. The responders work with the victim and any children present, providing them with resource information and referrals.

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- Examining the role of different agencies (e.g., law enforcement) and professions (e.g., medical profession);
- Expanding the project to address issues of neglected children and unreported or at-risk children;
- Expanding the MIS plan to address information sharing and confidentiality issues among agencies;
- Enhancing the description of current programs and providing a rationale for the selection of certain programs and activities; and
- Re-examining the linkages between cultural issues and child abuse and neglect intervention practices.

### Revising the Implementation Plan

The process for revising the Implementation Plan was fundamentally different from the efforts undertaken for the first plan. First, a Steering Committee was established. This Committee was seen as a subset of the Stakeholders Council, with stakeholders sitting on the Committee themselves or appointing members. This Committee, at the OJJDP program officer's encouragement, was chaired by the presiding judge of the Juvenile Court. Such active involvement by District Court judges in One by One was new. In addition to Council representatives (or their appointees), additional agencies were represented. The judges requested participation from CAJA and the Juvenile Probation Department. The Municipal Court, a minor player during the development of the first Implementation Plan, became a very active participant in revising the plan. Other new players were representatives from Huntsville Housing Authority, a DHR client, and representatives from the business and faith communities.

Second, a five-step process was initiated for revisions: (1) assessment, (2) identification, (3) dialogue, (4) summit meeting, and (5) plan development. The first step, assessment, involved pulling together community concerns and ideas from as many sources as possible. Again, Huntsville used focus groups. Internal focus groups were held in eight agencies involved with child abuse and neglect. They included DHR staff, educators/school personnel, law enforcement, service providers (e.g., CAJA, Healthy Families staff), MDT members, Youth Services Council representatives, and Stop Child Abuse and Neglect volunteers). Nine focus groups were held with community members throughout Huntsville, such as the Meadow Hills community group, detention home residents, DHR clients, Healthy Families clients, public housing residents, and members of the African American, Hispanic, and Asian communities.

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These meetings and focus groups were held in restaurants, schools, churches, and community recreation centers. The goal of these meetings was to maximize input and to identify the universe of issues that a community response to child abuse and neglect should consider.

The second step, identification, required data. Auburn University, Montgomery, conducted a telephone survey in December 1997 and January 1998. The sample of 400 was composed of male and female heads-of-households, 18 years of age or older, residing in Madison County. The purpose of the survey was to assess the opinions of county residents about child abuse and neglect and, to a lesser extent, to assess their knowledge of agencies active on this issue.

The results of the survey, the focus groups, and aggregated data (such as domestic violence, child abuse, and juvenile delinquency rates), were presented to the Steering Committee in an all-day retreat. From them, the committee culled seven critical issues:

- Improve the communication/collaboration among agencies, and address confidentiality issues;
- Work effectively to link informal and formal systems;
- Determine and plan for the education and training needs of professionals, agencies, and families;
- Increase community awareness of child abuse and neglect issues, focusing on two-way communication;
- Explore the economic and business supports required to effectively prevent and intervene in child abuse and neglect;
- Determine the service needs of the community and plan for the services and resources to meet those needs; and
- Ensure effective multicultural service delivery.

Participants in the retreat also were asked to identify the agencies responsible for prevention, services to higher risk perpetrators, reporting, investigation, assessment, protection, and treatment.

Step 3 in the new planning process, dialogue, involved a variety of activities associated with the seven issues identified above. Various media—newspapers, radio, television, brochures, and flyers—publicized the seven issues, the Vision Summit, and how to



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become involved in the planning process. Meetings were held with frontline workers, community residents, and pediatricians to get input on both problems and solutions. Project staff did one-on-one outreach to members of the community that could inform them about the issues. A survey was conducted of the current resource capabilities of the community and estimated future needs. Additionally, staff from agencies such as DHR, Juvenile Probation, the Mental Health Center, and law enforcement were encouraged to have in-house discussions on these issues. These discussions ranged from formal all-day sessions to informal conversations.

Step 4, the Vision Summit, was an all-day meeting in May 1998. Its mission was:

“To fundamentally reexamine the design and operation of the system of preventing and responding to child abuse and neglect, as it exists in Huntsville/Madison County, and create a vision of the system as it evolves and grows into the next century. The Vision should reflect the best of what we are today, the best of what we aspire to be today, and the most innovative thinking about what we can be tomorrow.”

The event received local media coverage and was attended by more than 100 community residents and agency staff, including DHR workers, representatives of the faith community, service providers, community residents, program clients, and representatives of the business community. The task assigned to the Summit participants was to review four broad categories of issues developed as a result of the dialogue—Prevention and Family Support, Public Awareness, Informal Systems, and Communication and Collaboration. Participants were to determine if other issues should be included, prioritize the issues, and identify ways the community could best address them. Two strategic planners, who volunteered their time, had worked with the Steering Committee on the Summit and had identified and trained facilitators to lead small group discussions.

This process resulted in recommendations of 88 different activities to comprehensively address child abuse and neglect, as well as risk factors for abuse. The activities recommended ranged from improving public transportation to increasing services for abused children.

Step 5, revising the Implementation Plan, required extensive effort. The Steering Committee met to prioritize the activities recommended by the Summit participants. The Committee decisions in turn were reviewed by Summit facilitators and then by the Stakeholders

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Council, which made only minor changes. Next, to continue involvement by the community, NCAC staff sent letters to Summit participants outlining the activities and asking for volunteers to work on those areas of interest to them. About 10 to 15 percent of the attendees responded. Staff and volunteers began describing the activities that would be developed. NCAC staff sent drafts of different sections to their OJJDP program officer throughout the summer for feedback and direction. The second plan was submitted in September 1998.

Concurrent with the planning activities, the NCAC also began implementing efforts about which there was strong community consensus—hiring additional MDT staff, co-locating the MDT members, hiring the community information and resource coordinators, implementing the Juvenile Sex Offender Program, and funding the Family Strengthening Education Program. OJP approved incremental funding for these activities (\$87,259 in March 1998 and \$40,900 in September 1998).

### Overview of the Revised Implementation Plan

The revised Implementation Plan differed from the original plan in several significant ways. First, the governing structure became three-tiered, incorporating the Steering Committee that had been established to direct the visioning process. The final structure for One by One as proposed and implemented included:

- A 13-member Community Stakeholders Council composed of the chief executive officers of county and city law enforcement, school systems, public health, mental health, justice, and human resources agencies. It would be chaired for the first 2 years by the Madison County DA.
- A 24-member Steering Committee, which would function as the operations committee of the Council and include representatives appointed by each member of the Council (usually a deputy who worked closely with the stakeholder) and representatives of community agencies and programs, business leaders, and consumers. The committee was to be chaired by the presiding District Court judge.
- The QAC, which would act as an advisory council for One by One. One by One would make presentations at QAC meetings, and the QAC would provide feedback.<sup>66</sup>

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<sup>66</sup> The QAC asked for a reduced role following its extensive involvement in developing the first Implementation Plan. It felt that it needed to focus on its primary mission, reviewing cases for DHR and resolving issues outlined in the Consent Decree.

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Second, the revised plan included a great deal more detail than the original. It included a four-pronged local evaluation plan, described in more detail in a later section.

Third, the plan was informed by the community, through an iterative process of data collection—through focus groups, the public opinion survey, and identification of priorities from the Summit meeting. As a result, the revised plan took a more expansive view of child abuse and neglect, rethinking activities in terms of community needs rather than how to improve current NCAC efforts, and it included a focus on risk factors for child abuse and neglect. Although nearly all of the activities included in the first Implementation Plan were also included in the second, some were restructured. For example, plans for expanding the Healthy Families Program were refocused to address community needs, placing a support worker in a designated community, with early input sought from that community. Supervised visitation would also be expanded to identify where DHR needed the most help and would identify neighborhood centers where visits could occur.

The new plan also outlined several new initiatives that became hallmarks of the One by One project, including:

- Business and community training, aimed at neighborhood workers—postal carriers, sanitation workers, and utility workers—as well as churches;
- Cultural sensitivity and competency programs, including a language bank for non-emergency uses and examination of cultural differences that might influence child abuse and neglect reporting and understanding;
- A community-wide, comprehensive family-strengthening program, to help develop Parents As Teachers in the community and identify (and develop as necessary) resources for parent education, stress and anger management, and discipline information;
- Increased emphasis on information/resource sharing through a community calendar and newsletter;
- Faith-based programs and partnerships;
- Improved support for DHR, by developing methods to reduce burnout of frontline workers, improving DHR facilities and publications to make them more client-friendly, and developing a community relations program to address negative stereotyping of DHR; and
- Initiatives to support neighborhood development, such as the neighborhood granny program, the block party weekends, and family resource centers.

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The plan was submitted in September 1998. One by One submitted responses to OJP's comments on the revisions in December 1998. One by One received additional comments in April 1999, which were then addressed. The remaining Grant 1 funds were released following submission of a revised budget.

### **Project Implementation**

This section of the report discusses the implementation of the SK/SS project. The discussion is divided into six sections:

- An overview of program implementation and strategies used to accomplish the work,
- Factors that influenced the project,
- Staffing and management,
- The collaborative structure and process,
- An overview of the activities undertaken, and
- A summary of significant events and turning points.

In each segment of the implementation we focus on general trends and broad initiatives.

### **Overview of Implementation Phase**

As discussed above, the revised planning process significantly changed One by One, resulting in an approach that was much more expansive and community driven. Most of the activities recommended in the Vision Summit were developed and implemented by One by One in cooperation with its partners. Other activities either fell outside of the purview of One by One (such as improvements in public transportation) or could not be connected to a lead group (that is, no one wanted to be responsible for it). Regardless of what action was taken on these community needs, One by One took responsibility for tracking the progress of each. This additional role was also important because it shifted the focus of the Stakeholders Council from overseeing a Federal program to that of ensuring that issues identified by their community were being addressed.

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Appendix Table B-1, provides a detailed listing of the individual activities that were undertaken by One by One or its partners as part of the SK/SS initiative. These activities are divided according to the four SK/SS program elements and common subcategories that cut across all five SK/SS sites.

Appendix Table B-2 shows the community needs that were identified in the original Vision Summit and not undertaken by One by One, although project staff were accountable for tracking them. Some were met through other initiatives (e.g., Welfare-to-Work, Project Launch, Christian Women’s Job Corps), while others were directly addressed by individual agencies (HPD moved to precinct-based service delivery; Family Services Center won a grant to finance cars for low-income families). Still other initiatives have not yet been addressed (e.g., crisis or respite nurseries, residential treatment for severely emotionally disturbed youth).

Besides focusing more on community-driven priorities, One by One shifted its emphasis more toward system reform as implementation progressed. OJP emphasized the primacy of system reform directly and through the technical assistance that was initiated in 1998. OJP intended SK/SS to be a system reform effort, supported by filling gaps in the continuum of services, data collection and evaluation, and prevention education.

### **Budget**

The shift in emphasis by One by One is demonstrated by comparing its budgets across different grant periods. Table 3-3 shows the budget allocations for Grants 1, 2, and 5. As shown in the table, system reform efforts showed the largest increase, both in terms of budgeted dollars and percentages. The growth in system reform efforts began late in 1999 and continued in subsequent years, reflected in programs such as MC3, LEADERSHIP *Social Services*, and The Circle Project, which are described below. The largest decrease was in administrative staff. In part this reflects the early emphasis on planning, which required a great deal of administrative time. It also reflects a reduction in time by the project director, who later apportioned her time across multiple projects. Note that much of the work of the project director was associated with system reform activities (particularly the three mentioned above), so that these figures somewhat understate the emphasis on system reform.

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**Table 3-3. Comparison of One by One Budget Allocations, Grants 1, 2 and 5: Percentage Distribution<sup>a,b</sup>**

Category	Grant 1 3/17/97-3/31/99		Grant 2 4/1/99-3/31/00		Grant 5 4/1/02-9/30/03		Percent change between Grant 2- Grant 5
<b>Program Elements</b>							
System reform and accountability	\$204,612	26%	\$191,419	24%	\$294,900	37%	+54%
Continuum of services	94,489	12	275,132	34	272,691	34	-1
Data collection and evaluation	43,458	5	40,684	5	28,789	4	-29
Prevention education/public information	58,056	7	50,345	6	38,854	5	-23
<i>Subtotal: Program components</i>	<i>400,615</i>	<i>50</i>	<i>557,580</i>	<i>70</i>	<i>635,234</i>	<i>79</i>	<i>+14</i>
<b>Staffing and Administrative</b>							
Management and administrative staff <sup>c</sup>	165,702	21	186,249	23	98,432	12	-47
Administrative expenses <sup>d</sup>	233,684	29	56,172	7	66,334	8	+18
<i>Subtotal: Staffing and administrative</i>	<i>399,386</i>	<i>50</i>	<i>242,421</i>	<i>30</i>	<i>164,766</i>	<i>21</i>	<i>-32</i>
<b>Total</b>	<b>\$800,000</b>	<b>100%</b>	<b>\$800,000</b>	<b>100%</b>	<b>\$800,000</b>	<b>100%</b>	
<p><sup>a</sup> All figures are based on Westat analyses of proposal budgets for Grants 1, 2, and 5.</p> <p><sup>b</sup> Subgrant activities were allocated according to their primary purpose. However, many subgrants cut across the project elements. For example, subgrantees provided data for local evaluation, and many participated and contributed to cross-training other professionals, a system reform activity.</p> <p><sup>c</sup> This category was reserved for the project director and for staff or consultants who provided mainly management and administrative support for the project. While the project director was involved in many different activities, no attempt was made to allocate her efforts across components. In Grant 1, the majority of planning dollars were assigned to the staff and administrative categories. Other staff and consultants were allocated on the basis of program areas they were working in. For example, the Resource, Training, and Faith and Neighborhood coordinators were assigned to the system reform category. The Community Information coordinator was assigned to prevention education.</p> <p><sup>d</sup> These expenses include items such as travel, rent, supplies, telephone, staff development, and indirect charges.</p>							

Investments in the Continuum of Services were constant from Grant 2 to Grant 5.

One by One originally envisioned moving activities off the SK/SS budget once it felt they were proven and useful. However, it ran into difficulty getting other funders to pick up these programs while SK/SS money was still coming into the community, because some funders were opposed to supplanting current support for these efforts. Therefore, One by One supported these services throughout the life of the project.

The low allocations for the other two program elements—data collection and evaluation and prevention education—to some extent reflect early decisionmaking on how funds should be expended. Once set in the first and second grants, it was difficult to adjust the SK/SS budget to accommodate the growing interest and need for work in these components.

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One by One was successful in raising additional monies to support these components from other sources. Accessing the money set aside by another OJP agency (the Bureau of Justice Statistics) for support of SK/SS, One by One used two grants of \$20,000 each to collect data and conduct evaluations of the First Responder Program and the Healthy Families neighborhood-based worker efforts. In the prevention education area, One by One coordinated efforts with other grants in the community to make the best use of resources.

The project timeline (Table 3-4) also emphasizes this growing focus on system reform activities and the overlap in planning, implementation, and sustainability. Sustainability, which OJP discussed with sites early on, was particularly stressed beginning in 2001. Additionally, the table shows the range of events going at any one time. While we only show when efforts began, for the most part activities continued, and many had long planning timelines before a kickoff event. Appendix Table B-1 provides additional information about the breadth and duration of program efforts.

A comprehensive logic model for One by One appears in Appendix Figure B-1. This diagram reflects the complex web of activities that evolved over the course of the project and the linkages to expected immediate outcomes (reduced duplication of effort, increased resources), intermediate outcomes (reduced trauma to child abuse victims, shared accountability for child abuse, strengthened neighborhood infrastructure), and long-term outcomes (improved community response to child abuse, reduced community tolerance of child abuse, reduced risk behavior). The earliest versions of the One by One logic model were far simpler, particularly with respect to system change. Also, activities under data collection and public awareness grew significantly. These elaborations reflect the shift in emphasis toward system change that gathered momentum during Grant 3. In the next section, we discuss some of the factors that influenced program direction.

### ***Factors Influencing the Project***

Several factors influenced the development of the One by One initiative. These include turnovers in agency directors and changes in governors and Supreme Court justices, which resulted in changes in state personnel. Although these changes did not derail the project in any sense, they did delay certain efforts until new staff were brought up to speed or until new staff were in place. Overall these changes resulted in personnel who were equally or more supportive of the project than their predecessors.

## One by One, Madison County, Alabama

**Table 3-4. Timeline for One by One, Madison County, Alabama**

Date	Event
<b>1997</b>	
March	<ul style="list-style-type: none"> <li>▪ NCAC is notified of its selection</li> <li>▪ Planning monies made available</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ First cluster meeting to introduce program resources, administrative issues, and the evaluation</li> <li>▪ Stakeholders Council designated</li> <li>▪ Quality Assurance Committee designated as advisory committee</li> <li>▪ Site visits conducted to identify best practices of other CACs</li> <li>▪ Workgroups complete recommendations for the Implementation Plan</li> </ul>
July-September	<ul style="list-style-type: none"> <li>▪ Stakeholders Council approves Implementation Plan</li> <li>▪ First Implementation Plan submitted to OJJDP</li> <li>▪ OJP technical assistance meeting on technology/MIS</li> </ul>
October-December	<ul style="list-style-type: none"> <li>▪ OJP comments on the plan submitted to NCAC</li> <li>▪ Presiding judge of District Court recruited to head Steering Committee</li> <li>▪ Survey of community residents initiated</li> <li>▪ Steering Committee assembled for revised planning process</li> </ul>
<b>1998</b>	
January-March	<ul style="list-style-type: none"> <li>▪ Second planning grant awarded</li> <li>▪ Focus groups with community clients/agency staff held</li> <li>▪ OJP released some implementation and additional planning monies</li> <li>▪ Report on community resident survey published/used to set priorities</li> <li>▪ Supported updating and publishing Resource Pocket Guides</li> <li>▪ Change in DHR director</li> <li>▪ OJP technical assistance meeting on team building/accomplishments</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ Meetings/focus groups held with agency staff and community residents</li> <li>▪ Survey of community resources and needs completed</li> <li>▪ First Vision Summit held</li> <li>▪ Child Abuse Prevention Month campaign developed</li> <li>▪ OJP released additional implementation funds</li> <li>▪ Adolescent sex offender group initiated</li> <li>▪ Expanded clinical services for child abuse and neglect victims and nonoffending parents</li> <li>▪ Steering Committee meets to recommend priorities</li> <li>▪ Priorities reviewed by Stakeholders Council</li> <li>▪ Began supporting First Responder Program</li> </ul>
July-September	<ul style="list-style-type: none"> <li>▪ Second Implementation Plan developed/submitted</li> <li>▪ Family Strengthening Education Program initiated</li> </ul>
October-December	<ul style="list-style-type: none"> <li>▪ Presentation on the project at Breakfast Meeting of Chamber of Commerce (speakers Ernie Allen from the National Center for Missing and Exploited Children and Robert “Bud” Cramer, U.S. Congressman from Huntsville)</li> <li>▪ Verbal comments received/revisions requested</li> <li>▪ Verbal approval given to the Implementation Plan</li> <li>▪ Research began on establishing Family Resource Centers</li> <li>▪ First Cookie Swap held</li> <li>▪ State election, resulting in new governor</li> <li>▪ OJP technical assistance meeting on systems change, administrative requirements, accomplishments</li> </ul>



## One by One, Madison County, Alabama

<b>Table 3-4. Timeline for One by One, Madison County, Alabama (continued)</b>	
<b>Date</b>	<b>Event</b>
<b>1999</b>	
January-March	<ul style="list-style-type: none"> <li>▪ Second Vision Summit held</li> <li>▪ Change in District Court judges, presiding District Court judge moved to Circuit Court, Municipal Court judge appointed to District Court. New presiding judge appointed, and the third District Court judge took over as new chair of Steering Committee</li> <li>▪ Final Grant 1 funds released</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ The substance abuse work with the Mental Health Center initiated</li> <li>▪ OJP released full implementation funds</li> <li>▪ Second SK/SS award made</li> <li>▪ OJP technical assistance meeting on resources, practices, and planning for system change</li> <li>▪ Conducted first training on cultural competency</li> <li>▪ First <i>Streetwise</i> newsletter published</li> </ul>
July-September	<ul style="list-style-type: none"> <li>▪ Began Stretching Dollars Network</li> <li>▪ Domestic violence advocate (coordinator for First Responder) added to the MDT</li> <li>▪ Family Violence Unit formed in the DA Office</li> <li>▪ Diversity Schoolhouse designed and initiated</li> <li>▪ Program for noncustodial fathers developed</li> </ul>
October-December	<ul style="list-style-type: none"> <li>▪ Planning initiated for more comprehensive community council</li> <li>▪ ADECA funded second HPD investigator for Family Violence Unit</li> <li>▪ First Family Friendly Business Awards applications submitted</li> <li>▪ OJP technical assistance meeting on intervention in domestic violence and building cultural, consumer, and community competencies</li> <li>▪ Community demographic and neighborhood research began</li> <li>▪ Added neighborhood-based Healthy Family worker</li> <li>▪ In-home supervised visitation program began</li> </ul>
<b>2000</b>	
January-March	<ul style="list-style-type: none"> <li>▪ Began developing MC3 bylaws</li> <li>▪ Conducted funding survey of child abuse and neglect</li> <li>▪ HPD reorganizes into precincts</li> <li>▪ DHR Community Liaison Program started</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ Third Vision Summit held</li> <li>▪ Third SK/SS award made</li> <li>▪ OJP technical assistance meeting on results-based accountability and facilitative leadership</li> </ul>
July-September	<ul style="list-style-type: none"> <li>▪ First meeting of MC3</li> <li>▪ First Friends 'N Faith Clubs held</li> <li>▪ TOP grant awarded to Crisis Services of North Alabama for HELPNet Program</li> </ul>
October-December	<ul style="list-style-type: none"> <li>▪ Planning and implementation of First Steps, hospital visitation program</li> <li>▪ Councill Court Family Resource Center established</li> <li>▪ OJP technical assistance meeting on sustainability</li> <li>▪ New chief justice of the Alabama Supreme Court elected</li> <li>▪ New executive director of NCAC</li> </ul>

## One by One, Madison County, Alabama

<b>Table 3-4. Timeline for One by One, Madison County, Alabama (continued)</b>	
<b>Date</b>	<b>Event</b>
<b>2001</b>	
January-March	<ul style="list-style-type: none"> <li>▪ Election of consumer/community representatives to MC3</li> <li>▪ Funding through One by One began for the Supervised Visitation Center</li> <li>▪ Support withdrawn from Council Court FRC</li> <li>▪ Formally assessed cultural competency within NCAC</li> <li>▪ First trip to Jacksonville to examine neighborhood-based services</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ Fourth Vision Summit held</li> <li>▪ Summer computer classes held at Lincoln Park FRC</li> <li>▪ Fourth SK/SS award made</li> <li>▪ OJP technical assistance meeting on cultural competence</li> <li>▪ DHR director retires</li> </ul>
July-September	<ul style="list-style-type: none"> <li>▪ LEADERSHIP <i>Social Services</i> initiated</li> <li>▪ Friends 'N Faith Backyard Clubs held</li> </ul>
October-December	<ul style="list-style-type: none"> <li>▪ Assistant DHR director dies</li> <li>▪ Followup site visit to Jacksonville</li> <li>▪ The Circle Project Steering Committee established</li> <li>▪ First Steps initiated</li> <li>▪ New CAJA director on board</li> <li>▪ Substance Abuse Summit held</li> <li>▪ OJP technical assistance meeting on team building and leadership</li> </ul>
<b>2002</b>	
January-March	<ul style="list-style-type: none"> <li>▪ BUILDING CommUNITY campaign initiated</li> <li>▪ Madison County Report Card on Families and Children released</li> <li>▪ Evaluation cluster meeting to discuss community indicators and Multisystem Case Analysis</li> <li>▪ Supervised Visitation Summit held</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ Drug Court initiated</li> <li>▪ Technical assistance site visit conducted by The Finance Project</li> <li>▪ Fifth SK/SS award made</li> <li>▪ OJP technical assistance meeting on data-based decisionmaking, information sharing/integration, and youth asset mapping</li> </ul>
July-September	<ul style="list-style-type: none"> <li>▪ New DHR director appointed</li> <li>▪ First HELPnet kiosk installed in WalMart Super Center</li> </ul>
October-December	<ul style="list-style-type: none"> <li>▪ New governor elected</li> <li>▪ Majority of project subcontracts ended</li> <li>▪ Received final approvals for the RC Consent decree</li> <li>▪ Special social services pages published in phone book by BellSouth</li> </ul>
<b>2003</b>	
January-March	<ul style="list-style-type: none"> <li>▪ Elections for MC3 leaders and new members</li> <li>▪ Volunteer Language Bank Kickoff</li> <li>▪ The Circle Project pilot program began providing social services</li> <li>▪ OJP technical assistance meeting on lessons learned and sustainability</li> </ul>
April-June	<ul style="list-style-type: none"> <li>▪ Health Department and Mental Health Center HELPnet kiosks installed</li> <li>▪ MC3 and Children's Policy Council executive committees meet</li> <li>▪ Client Board Bank Kickoff event</li> <li>▪ Technical assistance on integrated information sharing</li> </ul>

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Another factor was the introduction by OJP of a separate training and technical assistance component, Systems Improvement Training and Technical Assistance Project (SITTAP), in 1998. SITTAP provided direct technical assistance and support for developing the SK/SS concept of system reform outlined by OJP. Technical assistance providers also helped One by One personnel identify what other support was needed and appropriate providers for it. These technical assistance contracts underwrote technical assistance and training provided at the site. Additionally, there were semi-annual “cluster” meetings for project staff and stakeholders from all sites. (These meetings and topics are indicated in the timeline.) These meetings allowed sites to share their experiences as well as get information from different providers on best practices for meeting program requirements.

The two meetings in 1999 particularly helped focus the One by One project. The first meeting emphasized the range of resources available to sites through the OJP technical assistance network. One by One was proactive in identifying technical assistance needs. Once introduced to the breadth of support available, project staff were able to recognize applications to the wide range of community needs identified in the Vision Summit. In fact, the technical assistance provided in this way helped to develop programs such as the Drug Court.

The second cluster meeting addressed cultural competency and collaboration issues. This technical assistance helped One by One to reexamine where they were and what they needed to do within their program and within the lead agency.

The changing economy in 2000 and 2001 reduced funding to partners, which in turn affected the project. For example, The Volunteer Center, dependent on contributions, ran into funding difficulties in 2000 just as it was expected to begin working on cultural competency issues through the Volunteer Language Bank. It was unable to participate until 2002, when it resolved some of those problems and moved forward with the Language Bank and Client Board Bank.

### **Staffing and Management**

The staffing structure for One by One can be divided into broad categories—staff hired by NCAC to work specifically on the project, staff hired to work on subcontracts within NCAC, and staffing on other subcontracts. One by One established eight positions to

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implement the project. Additionally, it had two consultant agreements—for the local evaluator and MIS advisor. Table 3-5 shows which positions were created and when. Several positions changed as the project evolved. For example, initially there were separate faith/neighborhood and family resource coordinators, hired at 50 percent time. When the first family resource coordinator left, the faith/neighborhood and family resource slots were combined. This proved an effective strategy, uniting efforts to develop neighborhood-level efforts with the strongest organized group in the neighborhoods, the churches. However, with development of The Circle Project in 2002, the positions were split again. The training and technical assistance coordinator took over the responsibilities of working with the faith community.

While the positions themselves changed somewhat, there was remarkably little turnover in the staff filling these positions, which allowed these staff to become recognized community resources. The project director, an employee of NCAC, took over grant responsibilities as soon as the grant was awarded in March 1997. She had helped develop the original proposal in concert with the executive director. The local evaluation consultant came on board at the same time and had also been involved in the proposal. Three other positions—community information coordinator, program assistant, and resource coordinator—were put in place in the first year of operation. Initially the project director believed that she could take charge of training. When the project expanded its focus in the second Implementation Plan, the need for training and technical assistance and faith/neighborhood and family resource coordinators became evident, and those positions were filled in 1999.

NCAC also supported the grant by contributing other staff at the NCAC, but at significantly lower percentages of time. These included the finance director (25%), the executive director (20%), the marketing director (5%), and the grants administrator (25%). The executive director, who was active in building the collaboration and restructuring the project for the second Implementation Plan, had been with the NCAC since 1995. When he took another position in 2000, he was replaced with the NCAC director for clinical services, who had also participated in some of the project planning. This transition was smooth and did not have negative effects on the project.

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<b>Position</b>	<b>Percentage of salary covered by SK/SS</b>	<b>When first person hired for position</b>	<b>Turnover in this position?</b>
Program manager <sup>a</sup>	90%	March 1997	No
Community information coordinator	100% <sup>b</sup>	May 1998	No
Program assistant <sup>c</sup>	50%	July 1998	Yes, current staff hired in 2001
Resource coordinator <sup>a</sup>	90%	July 1998	No
Training and technical assistance coordinator	100% <sup>b</sup>	October 1999	No
Faith/neighborhood coordinator	90%	June 1999	Yes, current staff hired in October 1999
Family resource coordinator	100%	February 2000	Yes, position combined as Faith/Neighborhood Coordinator in 2001
Research/evaluation assistant	40%	November 1999	No
Local evaluation consultant		May 1997	No
MIS consultant		May 1997-December 1999	No
<p><sup>a</sup> In July 1, 2001, the program manager reduced her time on the project, taking on the role of project director at 55 percent time. The resource coordinator took on the program manager responsibilities in July 2002, continuing coverage at 90 percent time for SK/SS.</p> <p><sup>b</sup> Reduced time to 85 percent in 2001.</p> <p><sup>c</sup> This position was upgraded to an administrative coordinator position in 2001.</p>			

Table 3-6 shows the subcontracts for the One by One project.<sup>67</sup> Four of the subcontracts were with NCAC. Three of these—Stop Child Abuse and Neglect, Healthy Families Neighborhood Worker, and Therapy Program—expanded existing programs within the NCAC. The Parents as Teachers program was a new effort that built on the Healthy Families Program and combined funding from SK/SS and the Children’s Trust Fund. The relationship between NCAC subcontract and SK/SS project staff was very close and supportive.

<sup>67</sup> Note that this chart does not include very short-term contracts, such as contracts to conduct a single workshop or to provide technical assistance.

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<b>Table 3-6: Subcontracts for the One by One Project</b>			
<b>Subcontracts</b>	<b>Agency</b>	<b>When funding began</b>	<b>When funding ended/will end</b>
<b>System Reform and Accountability</b>			
MDT enhancements	DA's Office Madison County Sheriff HPD	May 1997	December 2002
Community liaison program	Girls, Inc.	March 2000	June 2003
LEADERSHIP <i>Social Services</i>	Private Consultant	January 2001	September 2004
Volunteer Language Bank/Client Board Bank	The Volunteer Center	September 2002	September 2003
The Circle Project	MCMHC/Big Brothers/Big Sisters	2003	September 2004
<b>Continuum of Services</b>			
Juvenile Sex Offender Program	Psychologist	May 1998	December 2002
First Responder	Crisis Services of North Alabama	1998	December 2002
Parents as Teachers	NCAC	September 1998	December 2002
Stop Child Abuse and Neglect	NCAC	September 1998	December 2002
Supervised visitation (center)	Family Services Center	January 2001	December 2002
Healthy Families worker	NCAC	June 1999	December 2002
Therapy Program	NCAC	1999	December 2002
Substance Abuse Program	New Horizons, MCMHC	June 1999	December 2002
Parent and teen mentor	Big Brothers/ Big Sisters	July 1999	September 1999
Man-to-Man	COARMM	August 1999	March 2001
Supervised visitation (home)	Harris Home	November 1999	December 2002
<b>Data Collection and Evaluation</b>			
Community assessment	Auburn University, Montgomery	December 1997	May 1998
Evaluation component 1- community mapping	University of Alabama Institute for Social Science Research	May 1999	October 2001
Evaluation component 2- neighborhood research	University of Alabama Institute for Social Science Research/Evaluation Consultant	May 1999	September 2004
<b>Prevention Education/Public Information</b>			
Pocket guides	Crisis Services of North Alabama	1998	May 2000, 2003

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The remaining 16 subcontracts were with programs outside the NCAC. While there were subcontracts for all four of the required program elements, the vast majority of subcontracts (11 of them) fell under the continuum of services component and represented the partnerships envisioned in the original proposal. These contracts were initiated relatively early, between May 1998 and November 1999. Subcontracts in the area of System Reform and Accountability were initiated throughout the life of the project. One of them—LEADERSHIP *Social Services*—will continue through September 2004 with the transitional funding from OJP and another, for The Circle Project was added in 2003.

These subcontractors—particularly Crisis Services of North Alabama, Family Services Center, DA’s Office, Sheriff’s Office, HPD, and New Horizons—were strong partners in the One by One collaborative. They were regular participants in the Stakeholders Council, the Steering Committee, and workgroups, and actively supported the annual vision summits. Other groups, such as Big Brothers/Big Sisters, were involved in the early years and then were not active again until the late stages of implementation. The Volunteer Center, which was identified as a partner early on, had some difficulties participating until the later years. COARMM, which was active initially, had financial difficulties that limited involvement in later years.

Subcontracts were phased in for three reasons. First, the planning process took longer and cost more than originally budgeted, thereby reducing implementation funds. This primarily affected programs under the continuum of services component. Second, activities were delayed because of difficulty identifying an appropriate lead agency or resources. This occurred with some of the evaluation efforts. Third, as One by One evolved, new activities or strategies were identified or grew out of earlier efforts. This was particularly true of subcontracts within the system reform and accountability component. LEADERSHIP *Social Services* grew out of efforts to sustain both the collaborative spirit and increase understanding of how different agencies within Madison County work.

One by One had difficulty locating adequate technical support for the local evaluation and data collection component in the Huntsville area. Consequently, it pieced together support from Auburn University, Montgomery; the University of Alabama, Birmingham; the University of Alabama, Tuscaloosa; and an evaluation consultant in New Mexico. A research assistant was hired to support these efforts, first under contract with the University of Alabama and later as a direct employee of the project. The Auburn subcontract

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was a stand-alone effort of limited duration. The University of Alabama contract was terminated when the University completed its work on community mapping, and the work on neighborhood research was taken over by the evaluation consultant and the research assistant.

### **Project Governance and the Collaborative**

The concept, structure, and process of collaboration expanded during the life of the SK/SS initiative. In the Year 1 Report, Westat identified three levels of interaction and collaboration.<sup>68</sup>

- Level 1—High-level managers and agency directors participating in the governing council, which makes decisions on policies, project direction, and spending;
- Level 2—Mid-level managers (and a few agency directors and community representatives) sitting on supporting committees and program workgroups, providing recommendations on program direction;
- Level 3—Individuals at all levels of agency responsibility participating intermittently in community meetings, forums, and limited projects.

These levels were envisioned as concentric circles, with members moving in and out of each circle as the project developed. In Huntsville, there continue to be three levels of stakeholder involvement, but each level has expanded its membership and responsibilities and changed interaction.

During the first planning process, Level 1 consisted of the Stakeholders Council; Level 2 consisted of the QAC and program workgroups; and Level 3 included people who came to meetings about the project and participated in focus groups. During the second planning process and initial implementation, Level 1 continued to be the Stakeholders Council. Level 2 became the Steering Committee, developed for the Vision Summit, but kept in place to serve as a recommending body for the Stakeholders Council. This Committee was expanded to include the presiding judge of the District Court, representation from CAJA, the Juvenile Probation Department, the business community, and increased involvement from the Municipal Court. The QAC moved to Level 3 alongside participants in the Vision Summit, which included members of the business and faith communities. During implementation, Level 2 expanded to

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<sup>68</sup> Gragg, Cronin, Myers, Schultz, & Sedlak. 1999. *op. cit.*



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include various workgroups, such as the Family Strengthening Education Workgroup, the Faith and Neighborhood Workgroup, Family Resource Center resident councils, and the Public Education and Awareness Workgroup. Many of the workgroups took on more leadership and decisionmaking roles. It is important to note that on an individual level, several community residents and representatives also took on more active roles, participating with ever-increasing frequency. Participation of community residents, mid-level supervisors, and new agency personnel in Level 1 was facilitated as the result of the development of the Madison County Coordinating Council for Families and Children (MC3), which replaced the Stakeholders Council in 2000. A discussion of that transition is outlined in the next section.

Below we discuss the structural elements of collaboration, including the governing councils, steering committees, and work groups.

### ***Governing Council***

The Stakeholders Council outlined in the original proposal was designed as the governing council. Beginning the pattern set during the second planning stage, and reinforced by early technical assistance from the National Center for State Courts and the National Council of Juvenile and Family Court Judges, judges played an important role. They increased the visibility of the Council and brought other groups—CAJA and the Juvenile Probation Department—to the collaborative.

The initial role of the Stakeholders Council was to direct and oversee the activities associated with the Federal initiative. When the Vision Summit broadened the scope of the project, the view of the Stakeholders Council broadened as well, making these stakeholders accountable for the comprehensive array of needs identified by the community for children and families.

Beginning in 2000 (the third grant period for the project), the project began examining and addressing two governance issues. The first issue, raised by OJP and the technical assistance providers, was the need to include community residents and agency clients in the governing council (Level 1) and increase their involvement at the other levels. One by One conducted a training program for community residents about participating on boards, such as the Stakeholders Council. Agency mentors were assigned to trainees to provide one-on-one support. This training was conducted in advance of a third Vision Summit, so that participants

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could then use their new skills at the Summit, working with their mentors and other agency professionals. In 2003, One by One initiated the Client Board Bank, which identified, recruited, and trained former social service clients to participate on agency boards.

The second issue involved both the expanded role of the Council (from overseer of Federal program to addressing community needs) and the competing and expanding requirements placed on stakeholders by other collaborative projects within the county. The demanding schedule of the Stakeholders Council (five times a year plus subcommittee meetings) resulted in reduced attendance at meetings. In Westat surveys conducted in 1998 and 2001, stakeholders reported spending over 5 hours a month on meetings for SK/SS in both years, but the average number of meetings went from 2.2 in 1998 to 8.9 in 2001.<sup>69</sup> Making this kind of commitment across multiple projects resulted in a significant burden on some stakeholders. Also, projects overlapped in terms of efforts and missions. The presiding judge, the NCAC executive director, two chiefs of police, sheriff, and DA, as well as other stakeholders, began to discuss the development of an overarching committee to meet the needs of multiple projects, as well as the Madison County community.

From this, MC3 emerged. MC3 evolved by building on the efforts of America's Promise (sponsored by Teledyne Brown), Future Search (sponsored by Boys and Girls Clubs), and Peace It Together (sponsored by Lockheed Martin Missiles and Space) and expanding the One by One Stakeholders Council. One by One provided staff and SK/SS-funded technical assistance to develop bylaws. The mission of MC3 was to build a stronger and safer community by enhancing coordination, communication, and collaboration; reducing duplication of effort; emphasizing prevention; and building consensus—all consistent with SK/SS goals.

MC3 had two types of representation. Nineteen members were agency representatives, selected by virtue of their office:

- The DA;
- Presiding judges of the District, Circuit, and Municipal Courts;
- The directors of DHR, the Mental Health Center of Madison County, the Health Department, and the Huntsville Housing Authority;

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<sup>69</sup> Cronin, R., & Gragg, F. (2002). *Implementation of the Safe Kids/Safe Streets program: Report on the stakeholder survey, year 3*. Rockville, MD: Westat, p. 13.

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- Superintendents of the Huntsville City, Madison City, and Madison County school systems;
- Chiefs of police from the Huntsville and Madison City Police Departments and the sheriff of Madison County;
- Representatives of the Huntsville and Madison City Councils and the Madison County Commission;
- The vice president of the Community Investment Division of United Way; and
- The commanding general of Redstone Arsenal.

Fifteen members were selected from five different communities (three representatives from each group):

- Business (with members recommended by the Chamber of Commerce),
- Higher education (recommended by the MC3 Executive Committee),
- The Faith Community (recommended by the Interfaith Mission Service),
- The Civic Community (recommended by the MC3 Executive Committee), and
- Consumers (recommended by the MC3 Executive Committee).

Additionally, five representatives were selected to represent nonprofit service providers (recommended by The Volunteer Center).

The MC3 structure expanded upon the community representation from the Stakeholders Council. It also brought some previously peripheral stakeholders, such as the presiding judge of the Circuit Court, representatives from higher education, and the director of the Huntsville Housing Authority into more active roles. The first meeting of MC3 was held in September 2000, followed by election of officers in January 2001. At that time, the Stakeholders Council became defunct, and the supervision of One by One was transferred to the Steering Committee. The second election of MC3 members and officers was held in February 2003.

MC3 was designed to ensure coordination of effort, share information among agencies and the community, and reduce competing demands on key stakeholders. However, it

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is important to note that during the planning meetings to create MC3, participants decided to remove all funding decisions from the group.

In the first years of its existence, MC3 worked to establish itself as a viable organization, identifying roles and responsibilities for Council members, receiving training on collaborative decisionmaking, establishing priorities, developing a business plan, and addressing its own sustainability once SK/SS funding ended. Because of the expansive mission statement, working out roles and responsibilities took more time than expected. To determine how the community was doing on a broad range of issues, MC3 decided to develop a Community Report Card. The purposes of the Report Card were to: (1) provide a benchmark for measuring progress, (2) help all members of the collaboration better understand their roles, (3) increase public awareness of the status of children, and (4) establish priorities. An ad hoc committee was formed, chaired by two members from MC3 and staffed by representatives from several agencies—United Way, One by One, the Chamber of Commerce, CAJA, and the schools. The committee had to select community indicators and find appropriate data for each. The committee and MC3 also had to consider how to grade performance on the different indicators and the consequences of bad and good grades. For example, would good grades mean that no additional monies were needed in that area?

The Report Card was released in January 2002, and Madison County received a C overall. Specific indicators helped MC3 identify the four issues that needed their attention most: teen pregnancy, runaways, divorce rate, and domestic violence.

During 2002, MC3 focused on making structural adjustments to the Council, developing a business plan, and establishing itself as an independent nonprofit organization (a 501(c) 3 agency). To reduce the heavy demands on the Executive Committee, several additional standing committees were set up, including: (1) the Education Committee, responsible for advocacy to legislative bodies; (2) the Communications Committee, responsible for developing a media plan for the general public, and (3) the Nonprofit Collaboration Committee, responsible for ensuring that agencies worked together. These committees joined the ad hoc committees, such as the Report Card Committee, and broadened input and participation from community members.

The business plan, completed in fall 2002, more fully outlined the MC3 goals by detailing marketing plans and assigning tasks to the new standing committees. The plan

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specified September 2003 for incorporating as a 501(c) 3 agency. It appeared that MC3 was ready to take off. However, conflict, overlap, and confusion between MC3 and a second council held up progress.

In 1999, the Alabama legislature mandated that each of the state's 67 counties form a Children's Policy Council, responsible for reviewing the needs of children ages 0-19, reviewing agency responsibilities, identifying duplication of effort, submitting a needs assessment, and developing a resource guide for accessing local services. Twenty-eight members were specified to serve, based on agency affiliation, and an additional 11 at-large members represent nonmandated social service agencies and community residents. The Council, chaired by the presiding District Court judge, meets quarterly. Many of its members overlap with MC3—judges, DHR, Mental Health Center of Madison County (MHCMC), school systems, the Public Health Department, the DA, state legislators, and the county commissioner. Not surprisingly, members of both councils have expressed confusion over their respective roles. The Executive Committees of both bodies have met, but no resolution had emerged by mid-2003.

### ***The Steering Committee***

The role of the Steering Committee changed in concert with changes to the governing council. Initially set up to conduct strategic planning for the revised Implementation Plan, the committee soon moved into the role of advisory committee for the Stakeholders Council. Then when MC3 was established, One by One needed additional support in some areas that had previously been handled by the Stakeholders Council, such as budget approvals and overall project guidance. The Steering Committee took on these tasks, as well as responsibility for sustainability planning. In the latter area, the Committee was responsible for prioritizing efforts, identifying resources and methods for sustaining and advancing program initiatives, as well as directing existing Federal monies to newer efforts such as LEADERSHIP *Social Services* and continued support of MC3.

The Steering Committee also took charge of promoting better coordination of substance abuse and supervising visitation programs, setting up Summits for each of these issues. Participation in the Substance Abuse Summit (attended by 60 people) in November 2001 was greater than expected. As a result, the Substance Abuse Solutions Network was set up and began addressing the most critical need (adolescent services). The Supervised Visitation

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Summit, held March 2002 (attended by 21 people), began identifying some of the challenges—coordination among providers, sharing resources, and gaps in existing services. One of the key problems is that supervised visitation is perceived primarily as a DHR requirement. It is not generally ordered by judges. Key informants in Huntsville reported that some attorneys are not aware that supervised visitation is an option for their clients. Coordination of these providers did not “take off” the way it did for the substance abuse treatment providers; some participants felt another Summit was needed.

### ***Project Workgroups and Other Collaborative Efforts***

Project workgroups were a third device used to involve the community in program activities. These workgroups developed in different ways. Several workgroups acted as advisory panels to project staff working on single activities, such as the public awareness campaign, neighborhood development, Family Strengthening Education, and faith community involvement. These committees varied in size from 30 participants involved in the Faith and Neighborhood Workgroup to 14 participants on The Circle Project Steering Committee.

Pre-existing Resident Councils were utilized as governing councils for the Family Resource Centers, tasked with conducting needs assessments for the community, prioritizing needs, and providing input into program development. These councils had decisionmaking authority, determining which programs were best for their centers, such as parent literacy, GED classes, entrepreneur classes, reading rooms, and computer classes.

A third type of workgroup developed out of training conducted in 2000 to educate clients on how to participate in collaborations and agency boards. One of the topics addressed was how to best publicize which agencies were responsible for what service. Mothers participating in the Family Advocate and Healthy Families Programs and several professional partners felt that special pages could be developed for the phone book, comparable to the blue pages that list government services. These pages would have a distinctive color (the group advocated purple, and became known as the Purple Pages Workgroup) and categorize information by type of need. The workgroup developed the concept and presented it to BellSouth, which in turn published the first listing in January 2003. (BellSouth chose a bright blue edge rather than purple.) The data were put together by Crisis Services of North Alabama and checked by the Youth Services Council. Both have volunteered to handle future updates.

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The various workgroups provide a training ground for participation in the broader governing council, aside from their direct roles in programming. The sustainability of these groups is tied to the activities themselves. The Family Strengthening Education Workgroup has merged with the Youth Services Council's governing board. The Circle Project Steering Committee will continue, at least for the next year, with transitional OJJDP funds. The other workgroups are identifying future roles and responsibilities.

In addition to the workgroups, One by One staff members sit on a range of committees to ensure they have information about what is happening across the community. Members are routinely invited to the table by other collaboratives, suggesting the increased recognition of the project as a key player in Huntsville. Staff participate in the Children's Policy Council, Weed & Seed committees, the Youth Services Council, Partnership for a Drug Free Community, the Alabama Cooperative Extension System, the Alabama State Employment Service, the North Alabama Center for Education Excellence, the Alabama Institute for the Deaf and Blind, the Better Business Bureau of North Alabama, and groups convened by private technology firms.

### **Activities Implemented During the Safe Kids/Safe Streets Initiative**

One by One activities fall under the four broad program elements identified by OJP—system reform and accountability, continuum of services, data collection and evaluation, and prevention education and public information. In fact, many activities cut across categories. This happened increasingly as One by One began to understand the connection among the four elements. Training is the most common category in which this occurs. Training often supports other activities such as collaboration development, cultural competency, resource development, and community involvement. We assigned specific activities to the category that seemed to fit best.

Appendix Table B-1, shows the activities that were undertaken. In this section, we highlight signature activities for each program component and discuss the evolution of efforts within these four categories. (Collaboration development, a subcategory of system reform, was discussed above.)

## **System Reform and Accountability**

The primary focus in 1997 and 1998 was on planning. The need for more strategic planning was recognized following the submission of the first Implementation Plan; consequently, the Steering Committee was developed with support from two volunteer strategic planners from the business community. These volunteers were critical to helping move the thinking “outside of the box,” and beyond enhancing existing efforts. This early strategic planning, coupled with the input from OJP, shifted the focus to the community. Annual summits from 1998 to 2001 kept people informed of progress on the identified community needs and allowed continuing input from the community. In 2002, MC3 meetings became the locus of strategic planning for the community.

### ***Enhancing the Multidisciplinary Team***

Early implementation in the system reform arena centered on efforts identified before the second Implementation Plan was developed, but supported by the stakeholders and focus group participants. These activities included enhancements to the MDT, including co-locating team members, hiring team assistants, connecting team members to home agency computers, linking members by e-mail, and establishing video linkages between the team offices and the CAC. In 1999, the MDT expanded to include domestic violence investigators and the First Responder coordinator. The DA also established a Family Violence Unit, which united attorneys for child abuse and neglect and domestic violence. The domestic violence staff were then co-located with the MDT. One by One provided team-building training to enhance the functioning of the expanded team.

### ***Professional Development and Training***

One by One also began some training programs in 1997, particularly through the provision of satellite programs. One by One provided a downlink and publicized the programs through flyers and e-mail, also identifying a co-host agency to support the training and help expand attendance. Building on NCAC’s strong history as a training resource, One by One introduced programs for a wide range of participants, pushing past the traditional boundaries. In 1998, One by One co-hosted training with the Interfaith Mission Service for 40 members of the clergy in Madison County, covering what constitutes child abuse and neglect, how and where reports should be made, and how reports are subsequently investigated and handled by



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DHR, law enforcement, and the legal system. Training on what happens after a report is made was later developed using a mock trial scenario and site visits to DHR offices for school counselors, substance abuse staff, private service providers, PTAs, and foster parents.

Also in 1998, Huntsville reached out to new groups in the community, such as privately employed sanitation workers, to outline the basic elements of child abuse and how to report. Other trainings were held with school counselors; day care workers; Healthy Families workers; DHR caseworkers; substance abuse professionals; private service providers; summer camp counselors; Huntsville utility workers; law enforcement officers; staff of the Alabama Bureau of Investigation; and emergency room, pediatric, and family practice nurses. These trainings—coupled with training specific to the different professional disciplines and trainings on specialized topics such as program evaluation, collaboration, family violence, and working with social service clients—provided a wealth of information to the community. Some programs, such as *Resources 101*, have become ongoing efforts supported by non-SK/SS funds. One by One routinely exceeded its training targets. One by One estimates that it trained over 6,000 people between 1999 and 2002, including:

- 1,246 individuals from business and civic groups;
- 2,725 professionals who attended professional development training; and
- 230 agency professionals who received scholarships to the annual National Symposium on Child Abuse.

Training topics, methods, and targets were creative. For example, preservice trainings conducted in 2001 and 2002 introduced new nurses and social work majors to both the problems and the resources of the community. LEADERSHIP *Social Services* training, modeled after a Chamber of Commerce program for CEOs and directors of local businesses, was designed to ensure that collaboration continues among social service agencies. It trains directors, mid-level managers, and board members on how different agencies operate and how collaboration can enhance those operations. LEADERSHIP *Social Services* also enhances camaraderie among members of social service agencies. Additionally, in 2001, One by One set up a training program for GALs in conjunction with the District Court. It was attended by 27 lawyers.

## ***Cultural Competence***

Cultural diversity efforts began as a multiday training cosponsored by the Alabama Cooperative Extension System and the Youth Services Council. Other cultural competency activities grew from this training. Diversity Schoolhouse was perhaps one of the best known. It began simply—with monthly brown bag lunches to discuss differences in a wide range of groups—and was targeted to agency professionals. Attendance at these presentations averages about 28 people per session. Topics have included Jewish, Chinese, Islamic, Hispanic, Seventh Day Adventist, African American, Native American, Indian, Korean, and Middle Eastern families. Diversity Schoolhouse has also included programs about individuals with mental and/or physical disabilities and same-sex parents. The program is now regularly attended by Healthy Families, DHR, and NCAC staff and is being marketed in other communities. Four communities—Memphis, TN; Twin Falls, ID; Fairbanks, AK; and Mercer County, WV—have initiated similar programs.

Other cultural competency activities included child abuse and neglect training in Spanish (1999), Spanish classes for social service providers (2002-03), a formal assessment of the NCAC's cultural competence (2001), and creation of the Volunteer Language Bank (2002). Some of the efforts, such as Spanish classes, were identified as the project developed. The 2000 Census confirmed community members' belief that the Hispanic community in Madison County had grown (from 1% of the population in 1990 to 2% in 2000).

## ***Community and Consumer Involvement***

In 2000, One by One began developing and improving client/community input and participation in the collaborative. As noted earlier, the governance structure had been dominated by agency representatives. Although consumers had participated in workgroups, focus groups, and event planning, it was difficult to sustain their participation. Using information from technical assistance provided through SK/SS, One by One focused on this issue in several ways. First, it trained former clients of social service agencies to participate on boards.

Second, the DHR Community Relations Program was initiated. Jointly run by DHR and a community-based organization, One by One provided funds to hire a former DHR client as a liaison, responsible for helping families understand DHR's role in child protection

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and for identifying problems with DHR's performance from the community's perspective. By 2001, the program's target area had grown from one to five ZIP Codes, and the liaison had established ongoing methods for communication (riding the bus serving the DHR building, making presentations at community events). In addition, the community liaison successfully addressed several immediate problems in the community, with support from DHR or other partners in the SK/SS initiative. For example, she was instrumental in establishing a Community Resource Bank for items such as high chairs and baby bottles to meet immediate family needs. She also helped link community groups within the target area. As a result, nine churches provided school supplies to Title I schools that had been placed on a caution alert because of low test scores. Unfortunately, in spite of the strong, positive feedback on this program, it has not been picked up by other funding as of this writing. The liaison has moved to work in The Circle Project pilot program, using many of the same skills.

As part of its resource coordination activities, One by One initiated a series of trainings on grant writing and resource development, called Stretching Dollars. This program enhanced the capacity of nonprofit agencies to write and manage grants and also promoted collaboration in proposal writing. The quarterly training sessions, initiated in July 1999, were cosponsored by United Way and the public library, and attracted approximately 44 people per session.

### ***Other System Reform Efforts***

One of the District Court judges began developing a Family Drug Court as a result of training received through SK/SS. This effort involved DHR and the MHCMC. Drug Court is held three Mondays a month. The first session was held in April 2002. Response from all participants, including defense attorneys, has been positive. They anticipate that the Substance Abuse Solutions Network will soon become involved in the Court.

### **Continuum of Services**

At the beginning of the One by One project, service needs dominated most of our early interviews with stakeholders, agency personnel, and project staff. Initially, these service needs mirrored those discussed in the original proposal—including the need for a Juvenile Sex Offender Program, expanded clinical services (for adolescent victims of sex abuse, nonoffending parents, and traumatized victims) within the NCAC, additional support for Stop

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Child Abuse and Neglect, the Parents as Teachers Program, First Responder, supervised visitation, a substance abuse program for families involved with DHR, and a program targeting minority, noncustodial fathers.

The first five programs were implemented in 1998, with the first release of implementation monies during the second planning period. (First Responder actually began before the proposal was funded, but One by One supported it with the first implementation funds.) The other programs were implemented in mid-1999.

In June 2003, most of the programs were still operational. Several had been sustained by other funding or were actively seeking support. The program for noncustodial fathers continued, but in a different form. Brief descriptions of these programs are provided below.

- The Juvenile Sex Offender Program targeted youth 11 to 15 years old, who were required to enroll for 2 years, stay drug and alcohol-free, and attend all meetings. Initially participants were referred by the District Court; however, beginning in 1999, referrals were accepted from DHR, Juvenile Probation, and other agencies working with youth. Thirty juveniles were enrolled between 1998 and 2002, with 11 graduates and 6 youth dismissed for noncompliance with program rules. Only one participant committed another sex offense while involved in the program. The Finance Project, which was contracted through SITTAP to provide technical assistance for One by One, met with One by One, the lead therapist, and several stakeholders to attempt to identify ways to fund this program. As of June 2003, this program had not been sustained.
- The First Responder Program, in which volunteers accompany police officers on domestic violence calls, engages volunteers to (1) intervene in domestic violence problems early, (2) identify children at risk and who witness violence, and (3) provide support and information to the victim(s) while the police deal with the perpetrator and the crime investigation. When the program was initiated in September 1997, it operated 5 nights a week during the second and third shifts, targeting a specific section of Huntsville and calls involving injuries. Volunteers then reviewed all police reports to make appointments with additional victims. By May 1998, the program was city-wide, covering domestic violence calls in which no injury occurred, and was headquartered within the HPD. By 1999, it was covering 24 hours a day, 7 days a week, all shifts, and the police chief of Decatur, AL, had requested full-time coverage for his department. Also, First Responders were officially added to the MDT as part of the development of the Family Violence Unit in the DA's office, and the coordinator and the investigators were co-located with the MDT. In 2002, the program was recognized as an "Exemplary Partnership" by the Police Executive Research Forum. First Responder is

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currently sustained with funding from Crisis Services of North Alabama and the Alabama Department of Economic and Community Affairs.

- Parents as Teachers expanded on the Healthy Families program by working with families with children past the age of 3 and emphasizing child development and school readiness. Resource guides were developed that identified programs and other resources available for children and parents. To support these efforts, the Family Strengthening education coordinator staffed an active workgroup and developed connections with the faith community. The program temporarily ceased in 2003, but was revived and expanded through Early Learning Opportunities Act funds.
- The Little House was able to increase the number of therapists, thereby enabling the NCAC to reduce waiting lists for services for children and families and increase the use of therapists to conduct initial interviews with children under age 6. The Adolescent Girls Group, designed to reduce the trauma related to sexual abuse, and programs for nonoffending parents were also expanded. These programs were continuing through alternate NCAC funding.
- Additional funding was provided to Stop Child Abuse and Neglect to develop a preschool program and increase the number of sessions held for older children. This program was continuing with NCAC funds.
- Two supervised visitation programs were initiated. The first was center-based and operated by the Family Services Center. It grew throughout the project's duration and added services, such as mediating visitation with noncustodial fathers. It is sustained through funding from the Children's Trust Fund, United Way, and service fees. The second program was an in-home visitation program operated by Harris Home. This program was much smaller, working with two to six families at a time. It is being sustained through DHR funding.
- The New Horizons substance abuse program received referrals from DHR in cases when parents involved in child abuse had substance abuse problems. The program coupled an intensive counseling program with a caseworker to support the participant and ensure completion of the program and parenting classes. The program had 19 graduates. One important accomplishment of this program, aside from the individual successes, was greater awareness and improved communication between New Horizons and DHR.
- Support for noncustodial minority fathers was developed in conjunction with COARMM, which had a history of developing programs for minority males. The program provided in-home visitation to support noncustodial fathers and ensure their involvement in their children's lives. The program moved from the COARMM offices to the NCAC in August 1999 and began targeting noncustodial fathers in Healthy Families cases. The caseworker is currently sustained with Alabama Fatherhood Initiative funding from the Children's Trust Fund.

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These programs—several of them implemented during the “swirl” of planning and replanning—gave One by One the credibility and visibility to move forward on the system reform agenda. Following the first Vision Summit, the project began to focus more on prevention, neighborhood building, and satellite service delivery. This became a critical shift for the project. Huntsville/Madison County did not have a strong neighborhood infrastructure on which to build, although a few community-based organizations and revitalization efforts existed, such as the Meadow Hills Initiative. To begin to develop such an infrastructure, participants at the first Vision Summit recommended supporting a neighborhood-based Healthy Families worker, block parties, a Neighborhood Health Clinic, and Family Resource Centers, as well as tapping community resources, such as recruiting elderly residents to tutor local children. One by One embraced this approach. It supported existing efforts, such as the school-based health clinic at Lincoln School, and participated in workgroups to support a similar clinic in the Terry Heights area. It cosponsored one block party weekend and identified other sources to continue them. It adjusted plans to add a Healthy Families worker and began to develop the concept for a neighborhood-based worker. When problems arose over locating the worker in one community agency, the worker was brought back to the NCAC offices for over a year until another location could be identified.

The development of neighborhood centers was seen as particularly critical to achieving the community’s vision—providing an opportunity to link system reform goals involving coordination of services to service delivery at a neighborhood level. Consequently, One by One began examining research-based models for Family/Neighborhood Resource Centers (FRCs), which could help develop neighborhoods and support satellite delivery of services. These programs had the added attraction that state grant money was available for them. A number of locales were identified as possible targets; two public housing developments were selected. Existing resident councils were used to assess community needs, prioritize them, and serve as oversight committees for the project. Programs developed for the FRCs included GED classes, entrepreneur classes, parent literacy classes, summer computer classes, and a reading room. Arrangements were made for DHR staff to set up office hours on site several days a week. The Housing Authority provided space for the centers and external fiscal agents were required in both cases.

A number of problems were encountered. Given the lack of neighborhood infrastructure, the level of effort required to support the centers was very high. Also the project was unsuccessful in acquiring additional grants for setting them up. One by One had to

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withdraw its support from the Council Court Center when the resident council required that money be funneled through a specific organization, which the project did not feel met fiscal requirements.

One by One continued to explore satellite service delivery, however. Jacksonville was identified as a good model at one of the technical assistance meetings. In 2001, One by One organized two field trips to the city, with 17 and 20 participants, respectively. Participants were assigned data/information collection responsibilities for different Jacksonville programs (e.g., full-service schools, a substance abuse facility, a youth crisis center, and a neighborhood network center). The full-service school model particularly interested the participants and resulted in the second trip 6 months later. Following that trip, The Circle Project Steering Committee was established by One by One, in conjunction with the three school systems in Madison County and other collaboration members. The group's first effort was to submit a Federal grant application, showing the cooperation of the entire collaboration. That funding did not materialize, so the Steering Committee moved forward on a pilot program in each of the school systems, using SK/SS funds.

The neighborhood work underlined the need to have ongoing support from the faith community. In 1998, major churches in the community and the Interfaith Mission Service were participants in the first Vision Summit. As already mentioned, One by One co-hosted an Interfaith Mission Service meeting and made presentations to pastors across a range of denominations. In June 1999, One by One hired a part-time faith/neighborhood coordinator and established a Faith and Neighborhood workgroup to help identify ways the faith community could play a role in the collaborative efforts. The coordinator turned out to be an important link for a number of activities, including the DHR Community Relations program and the Family Strengthening Education program. The workgroup also addressed the lack of summer programs for Madison County youth. In 2000, the workgroup coordinated expanded vacation bible schools, so that youth outside the congregation participated. From 2001 through 2003, the group took programs directly to youth, adding several types of support programs for youth. These programs affected 831 youth. As of June 2003, the workgroup was considering how to maintain these programs past SK/SS funding.

## Data Collection and Evaluation

The third element of the project, data collection and evaluation, was approached in two primary ways—through subcontracts with experts in evaluation, outcome measurement, and data collection and through ad hoc projects taken on by project staff. For the local evaluation, One by One subcontracted with a University of New Mexico (UNM) professor who already had a working relationship with the NCAC. He provided input to the original proposal and was aware of project activities during the planning process. OJP faulted the first Implementation Plan because of its lack of a community needs assessment and an evaluation design. One by One then contracted with Auburn University, Montgomery, to conduct a public opinion survey, which became an integral part of the second planning process. The UNM consultant developed an evaluation design for inclusion in the second Implementation Plan.

The proposed evaluation design was ambitious and comprised four components:

1. Community mapping and offense monitoring, designed to track a wide range of community indicators—from child abuse and neglect reports, teen pregnancy rates, and infant mortality, to economic factors and crime data;
2. Neighborhood research to examine in depth the impact of SK/SS among residents in targeted neighborhoods, including interviews with agency caseworkers assigned to the neighborhood as well as residents;
3. Intra-organizational monitoring and data-driven decisionmaking, to examine agency changes and needs that intersected with this initiative; and
4. Clients, agency response, and outcome tracking through service agencies to examine individual client outcomes in relation to agency involvement.

The local evaluation design ran into difficulties early on when trying to identify staff or consultants to carry out the evaluation. The plan also failed to realistically budget the proposed work. A subcontract was issued for a research analyst, who began working on the first and second components. When she moved out of the area, One by One had to find a replacement. A subcontract with the University of Alabama to conduct these components was signed in 1999. When the limited funding for that subcontract ran out in 2001, Component 1 was complete, and the work for Component 2 was moved to the evaluation consultant and a research assistant. Note that the mapping side of Component 1 was dropped because of cost constraints. However, data collected under this component were used frequently for proposals and provided an important baseline for the Community Report Card effort undertaken in



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conjunction with MC3. The resource coordinator continued to collect data after this point and serve as an informal clearinghouse by providing data to collaborative partners. Data for Component 2 were complete as of June 2003, but the findings report was not yet available.

Component 3 was carried out by requiring subcontractors to submit monitoring data and training them and other members of the collaborative to identify, collect, and interpret data for outcome measurement. An all-day training session, conducted jointly by the local and national evaluators, was held in May 1999 and attended by 13 agency representatives.

The fourth evaluation component was initiated in 2000 and dovetailed with OJP technical assistance presented by the Child Welfare League of America at a 1999 technical assistance meeting. This component, implemented by the local evaluator and the research assistant, tracked 1997 MDT cases. Agency responses to these cases were tracked through MDT, DHR, law enforcement, District Court, Circuit Court, CAJA, and Crisis Services of North Alabama. The findings had not been released by June 2003.

As part of the original collaboration within OJP, the Bureau of Justice Statistics earmarked funding for SK/SS grantees. Huntsville applied for and won two grants to implement formal evaluations of the neighborhood-based Healthy Families worker and the First Responder program. These evaluations were conducted in 2002 and 2003, respectively, but findings were not available as of this writing. The evaluation consultant was responsible for the First Responder evaluation, and the University of Alabama conducted the Healthy Families evaluation.

Project staff were responsible for less formal and scientific data collection that was important in guiding project activities. Aside from holding focus groups during the proposal and planning stages, staff routinely solicited evaluations from participants in all trainings. This was done both immediately after training and several months later to determine if training met workplace needs. Surveys were conducted to glean input from agencies, clients, and community representatives regarding agency performance, environment, and unmet community needs. Other surveys were used to develop a workshop on effective strategies for making environments more client friendly. Needs assessments for the Family Resource Centers identified programs and services to be operated out of those centers.

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In 2000, the resource coordinator began a series of three funding surveys of community agencies to identify the level and sources of funding in the community to address child abuse and neglect (2000), domestic violence (2001), and substance abuse (2002). The surveys also identified gaps in sources (i.e., untapped monies) and examined how funding was aligned with community needs (i.e., were monies concentrated on certain issues and not on others?).

The most recent research effort came out of a recommendation by OJP that the project conduct policy analyses of critical community issues. SITTAP technical assistance was provided in support of this analysis. The first issue selected was supervised visitation, where little progress had been made since the special Summit on this topic. The policy analysis was deemed a good approach to further examine some of the problems associated with the service, including:

- Poor coordination among providers (for services and training);
- Limited knowledge of the service by both judges and lawyers;
- Resistance to fee-based service provision.

This issue was reconsidered when all the agencies providing supervised visitation failed to return a survey due to time constraints. Currently, One by One is working with SITTAP to develop a Madison County Children's Budget.

The project also made efforts to develop a management information system (MIS). OJP urged the SK/SS sites to examine issues related to MIS and had required them to attend a national conference on MIS issues in September 1997. One by One felt that developing a unified multiagency data system was beyond its capability, given other requirements. Eventually, the project decided to focus on: (1) linking MDT members electronically to their home agency computers and to each other via e-mail; (2) developing a database for the MDT, bringing in data from each of the participating agencies; and (3) identifying barriers to information-sharing across agencies. The latter was seen as a way to begin the discussions for a cross-agency database. The first task was handled by the MIS consultant relatively early in the project. Linking staff with their home agency computer reduced travel between the home office and the MDT office and, for those in the new offices, reduced their sense of isolation from colleagues. It also increased the communication among team members in the same office. Software for the MDT database was identified early in the project, though implementation

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progressed slowly. One by One continues to investigate legal barriers to information sharing and how to overcome them.

Recognition of the value of evaluation and data collection increased as the project matured. In the early stages, the local evaluation was seen simply as a requirement to be fulfilled. It would be done to satisfy OJP, but it was not envisioned as supporting project development. Program decisions were largely informed by anecdotal evidence or community input from the Vision Summits, focus groups, or simple surveys. However, the project began to see the value of scientific-based research early as a result of the public opinion survey conducted by Auburn University, Montgomery. Information on community indicators collected through the community mapping component, the resource coordinator, and the Community Report Card committee was also used extensively. Particularly in the case of the Report Card, stakeholders began asking themselves more questions about the availability, reliability, and comparability of community data and began grappling with what the data really indicated about the community. More data were also needed to develop winning proposals to sustain SK/SS efforts. Prospective funders wanted more than anecdotal information and testimonials.

Given some of the problems experienced with finding research assistance in the community, the NCAC decided to establish its own research division midway through the project. It advertised for research staff locally and nationally, through universities and professional organizations. It took almost 2 years to get staff on board. Currently, NCAC has a research department of three full-time and three part-time staff.

### **Prevention Education and Public Information**

The prevention education/public awareness element also began as a stand-alone effort, mostly unconnected to the other SK/SS components. Early efforts focused on simple, direct messages about child abuse and neglect, publicizing Child Abuse Prevention Month through school art and essay contests, billboards, story time at the public library, and publicizing program events, such as trainings and meetings.

One continuous theme during implementation has been publicizing resource information. This too started relatively simply with publication of Pocket Resource Guides, Youth Yellow Pages (targeted both for agencies and youth), and a Family Strengthening Resource Guide. The effort snowballed. Building on One by One's record of collaboration, the

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community won a Technology Opportunities Program (TOP) grant from the Department of Commerce. Under the leadership of Crisis Services of North Alabama, this grant was used to expand the HELPnet database of community resources and make it Internet compatible and interactive. By June 2003, 23 information kiosks as well as 27 dedicated computer workstations were set up throughout Madison County. They provide information on services available and allow people to connect to the required agency. As of June 2003, eight kiosks were operational in the Social Security Administration building, Councill Court Public Housing, WalMart, the public library, DHR, the Public Health Department, and the Mental Health Center. Other successful efforts included:

- Development of special resources pages for the phone book;
- The *Streetwise* newsletter for agency personnel, which introduces new staff, showcases different agencies, and publishes the community calendar of agency and community events, activities, trainings, and meetings;
- “On the road” customized presentations to police roll calls, PTAs, special education coordinators’ meetings, and other community meetings;
- Cookie swaps where agencies, private providers, and community-based organizations exchange information for cookies (attendance has grown from 30 agencies/75 people to 44 agencies/165 people); and
- *Resources 101*, a monthly orientation for new agency staff on community resources for children and families.

The success of these programs can be measured in a variety of ways—including increased usage/attendance, media coverage (cookie swaps now receive a full page ad announcing the event), and participation. *Resources 101* is required training for new DHR and Healthy Families workers. Program attendees have included the Huntsville Hospital Dialysis Unit, substance abuse professionals, representatives of the Girls Scouts, social service agencies, informal community groups, pastors and lay employees of the churches, colleges, and parents of special needs children.

In 1999, One by One began targeting local business through the Family Friendly Business Awards. The project developed criteria and identified business practices that supported families in meaningful ways. Awards were presented at banquets, the most recent of which had 200 attendees. These awards and banquets also garnered significant media attention. The project conducted workshops on family-friendly business practices and the way those

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practices pay off in recruiting, retaining, and maintaining more productive employees. Seven of the 14 winners to date have also won state awards.

In 2002, a unified prevention education campaign (BUILDING CommUNITY) was implemented, cosponsored by Crisis Services of North Alabama, MC3, and One by One. This campaign included public service announcements, billboards, newspaper articles, and television news segments. The campaign covered the Community Report Card, both Child Abuse and Sexual Assault Prevention Months, the Women’s Expo, Victim’s Rights Week, Take Back the Night, community resources, and the upcoming kiosks.

Several factors strengthened the public information/prevention education component. First, the project director was experienced at public relations. Second, One by One included the media as a partner, developing relationships with media personnel responsible for covering these issues. Third, the NCAC contracted with a public relations expert to support these efforts as needed. Last, the project was creative in approaching the task, identifying clever themes for training and using “catchy” phrases to promote meetings.

*Streetwise*, the community calendar, and *Resources 101* have been sustained through alternate funding. Efforts are underway to sustain the Family Friendly Business Awards (through the Chamber of Commerce and North Alabama Society for Human Resource Management) and the other information-sharing strategies.

### Summary of Significant Events

It is worthwhile to summarize One by One’s approach to implementing three activities—facilitating community input, developing a collaboration, and coordinating service delivery. These efforts provide good illustrations of how the project moved toward the development of the SK/SS vision with direction from OJP and support from the technical assistance providers.

The first objective was ensuring that community input was the basis of the project. This was operationalized through the Vision Summits and the attendant work that went into acquiring community input in preparation for them (particularly the first one)—strategic planning, focus groups, Steering Committee retreat, and review of input. The Vision Summit broadened the scope of work beyond fine-tuning the NCAC and the MDT. It also changed the

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responsibilities of both project staff and the governing council. Staff and the Stakeholders Council now became caretakers of the ideas put forth during the initial and subsequent summits. Annual Vision Summits helped ensure that ongoing community input was garnered.

The second objective—collaboration building—is related to the first. There were four important stages in developing the collaboration:

- **Ensuring active participation of District Court judges.** As with some other sites, OJJDP stepped in early in the process to ensure the active involvement of judges. All judges in the District Court became active, taking on leadership in the governing council, the Steering Committee, and the substance abuse and supervised visitation Summits. All judges participated in training offered by One by One. Based on training received through SK/SS, one judge was able to implement a Family Drug Court in April 2002, putting everything together without additional money from any source.
- **Mobilizing nontraditional groups in the collaborative.** Huntsville recognized the need to involve religious leaders, business representatives, higher education institutions, and civic and neighborhood organizations early (at the first Vision Summit). Representation from a broad spectrum of agencies and neighborhoods grew throughout the project.
- **Engaging community residents and consumers of services beyond their participation in the Vision Summits.** One by One developed workgroups, special training programs in conjunction with the Vision Summit, mentors, and the Client Board Bank to develop this area. While this was an important step, it has had only limited success to date.
- **Recognizing and developing an overarching collaborative council.** MC3 evolved as the competition for time among community leaders and a wide array of programs grew. MC3 addressed issues beyond SK/SS and focused on children and families involved in the cycle of violence that is often initiated with child abuse and neglect. It required a broad membership, including community residents; allowed for rotating leadership; and incorporated the goals of SK/SS in its mission. However, one limitation of MC3 was the initial refusal to put budget issues on the table. Technical assistance to help the collaborative address unified fiscal planning was scheduled for the fall of 2003.

The third objective was coordinated service delivery. The need for neighborhood-level services was identified in the first Vision Summit. This was a particularly difficult issue in Huntsville, which had few existing neighborhood organizations and little public transportation. As early as 1998, One by One began identifying ways to encourage neighborhood development (block parties, neighborhood health clinics). The project also

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approached one of the few neighborhood organizations—the Meadow Hills Initiative—to house a neighborhood-based Healthy Families worker. These efforts met with limited success. One by One then turned to Neighborhood (or Family) Resource Centers as a way to support neighborhoods and move services closer to residents. Two neighborhoods were identified, resident councils used, and services and programs established, but both sites failed. One by One then identified cities where neighborhood-based services had succeeded and began again. This time the program was operated through the schools, and pilot programs are running in each of the three school districts in Madison County.

In pursuing this effort, One by One followed the path outlined by OJP and showed how sites can use demonstration programs to identify what works in a specific community. One by One (1) identified a community need (with community input), (2) researched best practices for addressing the need, and (3) worked through the options to find the right fit for the community.

## Results

In the previous section, we highlighted successful activities and strategies implemented by One by One, as well as some of the problems and failures. In this section, we discuss the results of the project more broadly. Specifically, we address the following questions:

- In terms of structure and process, how faithful was One by One to OJP’s vision for the SK/SS initiative?
- To what extent did One by One produce system reform—that is, enduring changes in the statutes, policies, procedures, and routines that affect the prevention, intervention, and treatment of child abuse and neglect? What other enduring changes resulted?
- Is there evidence that the project has had longer term impacts on the incidence of child abuse and neglect?
- What accounts for these results? What factors facilitated project efforts and what were the obstacles?
- What is the future for One by One?

## Perspectives From Project Participants and Other Local Observers

Data bearing on these questions come from a variety of sources. First, Westat asked questions, made observations, and reviewed progress reports and other local documentation during the 6 years of the process evaluation. The questions were largely addressed to project personnel and key partners. Second, three mail surveys—in 1998, 2001, and 2003—were conducted with individuals defined as project stakeholders for the 2 years preceding each survey.<sup>70</sup> We will focus on findings from the most recent survey, which asked stakeholders about results.<sup>71</sup> Third, Westat conducted a mail survey, in fall 2002, of mid-level and frontline workers from law enforcement, DHR, schools, CAJA, and other agencies, such as the DA's Office.<sup>72</sup> Fourth, data were collected from key informants in 2000 and 2002. Key informants were defined as individuals who played key roles in the child protection system or were well-placed to observe its operations. Fifth, data were collected on community indicators, such as child abuse reporting, teen pregnancy, child deaths, and crime rates. Finally, we include assessments we as national evaluators have made based on the above data sources.

Stakeholders represent those individuals throughout the community who have been most active in the One by One project (absent project staff within the lead agency). They are also the individuals most likely to incorporate and foster SK/SS goals and accomplishments past Federal funding.

We asked stakeholders to identify the effects of SK/SS on three levels: personal, organizational, and community. Stakeholders in 2003, similar to those in the 2001 survey, were most likely to report that SK/SS had helped them personally:

- Make new contacts in the child abuse and neglect field (73%);
- Receive new training (63%); and
- Increase their ability to do their job (56%).

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<sup>70</sup> For the purposes of this survey, stakeholders were defined as all collaboration members who had served on project task forces, councils, or committees, and representatives of program subgrants. Sixty-six percent of the Huntsville stakeholders responded to the survey in 2003.

<sup>71</sup> A detailed summary of findings from the 2003 survey can be found in Volume III of this report.

<sup>72</sup> A detailed summary of findings from this survey can be found in Volume IV of this report.



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When asked to rate changes in their organization resulting from SK/SS, a majority of Huntsville stakeholders identified six changes:

- Improved communication with other organizations (66%);
- Improved training/professional development (64%);
- Improved communication with community members (60%);
- Increased amount/quality of information available for making decisions (55%);
- Change in how agency communicates with other agencies (50%); and
- Improved communication with clients (50%).

Similar improvements, particularly in terms of communication, were reported by mid-level and frontline staff in the Survey of Agency Personnel, suggesting that communication among agencies was not limited to those at the top. The majority of respondents (79%) from this survey reported that they had increased contact with other agencies. The two primary reasons given for increased contact were (1) improved knowledge of whom to contact (46%) and (2) a closer relationship with staff in other agencies (41%). The respondents also reported that communication and information sharing has improved because they know who to talk to in other agencies (54%).

Stakeholders were asked to rate the effects of SK/SS on the community, using 19 program objectives listed in the original solicitation. A majority of stakeholders reported “strong” effects<sup>73</sup> for 17 of the 19 objectives. Stakeholders were then asked to list the two most important accomplishments. The five most frequently selected accomplishments were:

1. Improving communication/cooperation among those who deal with child abuse and neglect (42%);
2. Making professionals/services more sensitive to the ethnic and cultural backgrounds of the children and families they serve (25%);
3. Improving multiagency responses to children affected by domestic violence (19%);

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<sup>73</sup> Strong effects have been defined as having a rating of 4 or 5 on a scale ranging from 1, “no effect at all,” to 5, “a major effect.”

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4. Educating community residents, including parents, about child abuse and neglect (15%); and
5. Decreasing community tolerance for child abuse and neglect (13%).

Mid-level and frontline workers in the Survey of Agency Personnel were asked to indicate any improvements in the child protection system within the last 2 years. The five improvements considered most important were:

- Timely provision of services (14%);
- Cross-agency coordination (12%);
- Reporting child abuse and neglect (11%);
- Knowledge of child abuse resources (10%); and
- Identification of at-risk families (10%).

Few frontline workers could attribute change to SK/SS. The majority of respondents (67%) chose “Don’t Know” when asked “Do you feel that the SK/SS Program has helped improve the child protection system in your community?” Thirty percent felt the project had improved the system, and 3 percent responded it had not. Ways listed in which the system had been improved included public awareness (10%), increased services/resources (6%), collaboration/networking/communication (4%), and training/education (4%).

Open-ended interviews with key informants in 2002 suggest similar accomplishments. We asked them “What was the most important outcome of the SK/SS project?” Of the 17 respondents asked the question, 13 considered improved or increased collaboration as the most important outcome. It is important to note that the citation of collaboration included improvements in terms of both formal collaborative structures (such as MC3), as well as the collaborative process (e.g., different agencies working together). In many instances, key informants reported other accomplishments flowing from improved collaboration. For example, they said that:

- Taking advantage of the opportunities to collaborate through SK/SS resulted in increased knowledge of grant making, which in turn increased the capacity to serve children.
- Having all players at the table resulted in a better response from the state legislative delegation.

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- Including new partners moved the community beyond the MDT.
- Developing a sense of safety and power in collaboration ensured a willingness to release turf.
- Increased collaboration changed the way agencies do business, from identifying what a single agency should do to identifying who the partners (agencies and clients) are for any given effort.

In several instances, key informants credited the collaboration with improving communication, specifically citing improvements between DHR and the Mental Health Center, schools and police, and improved reporting of child abuse to DHR. These respondents also emphasized that collaboration has simply helped people know each other, which has improved both the number and speed of referrals and the sharing of information. In the Survey of Agency Personnel, staff were most likely to report improvements in communication and information sharing with DHR (38%), elementary and secondary schools (34%), and domestic violence programs (32%).

Key informants were also asked to identify specific strategies and activities that were One by One's biggest successes. The respondents continued to emphasize collaboration, though the specifics were more wide-ranging. Establishing MC3 and providing training were the most common successes cited, by three respondents each. Additional responses included:

- Expanding the MDT;
- Cultural competency awareness;
- Multifaceted approaches used to bring people together (e.g., Vision Summits, collaborating over funding);
- Building trust and cutting through turf issues; and
- Commitment from agency leaders.

Key informants were also asked what the biggest surprises were about One by One. While 7 of the 17 respondents reported no surprises, six identified some aspect of collaboration development, ranging from the amount of time private citizens contributed, the degree of collaboration achieved, how hard collaboration is, to the number of things that can be accomplished by just "getting together."

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Key informants were asked specifically whether One by One affected how much information is available. Nearly three-fourths (N=13) responded yes, providing examples such as the Community Report Card (N=8) and increased community information (N=7) through vehicles like the newsletters, community calendar, resource directories, and HELPnet kiosks. Note that over two-thirds of stakeholders in the 2003 survey believed that SK/SS had a strong effect on improving information sharing and case-tracking across agencies (69%) and on evaluating local practices and outcomes (70%).

### **Overall Assessment of the Safe Kids/Safe Streets Initiative**

#### **How Faithful Was One by One to OJP's Vision?**

One by One succeeded in developing a program in line with the requirements outlined in the original RFP. However, developing that program as intended (particularly integrating the four program elements) took years, repeated clarification from OJP, and technical assistance. At the end of the planning process, One by One had expanded its vision beyond enhancing the NCAC. By the end of 1999, One by One had realigned efforts (and budgets) to emphasize system reform, begun addressing diversity training (through Diversity Schoolhouse), and increased data collection to support decisionmaking. By 2001, a coordinated prevention education program completed the integration of program components.

One by One used its strengths, such as training, to promote the development of cross-agency understanding and interaction. It moved beyond its "comfort zone" and widened the collaborative circle. In the case of judges, this expansion occurred in response to the urging of OJP. In the case of business, faith, and higher education leaders, this was through the initiative of staff and stakeholders.

At this stage it is too early to tell whether other aspects of OJP's vision will be realized. The survival of The Circle Project and MC3, both ambitious efforts to change routine ways of service delivery and decisionmaking around family and children's welfare, are still in doubt. The development of MC3 was initiated through efforts of the stakeholders, though supported by project resources. MC3 expanded collaborative decisionmaking beyond a single Federal grant, attempted to institutionalize broad representation, and prioritized issues for action based on the best data available. If it is sustained, and if it takes on even greater challenges—

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especially those related to community resources and budgets, it will have more than fulfilled OJP's vision.

However, MC3 stalled when faced with the state-mandated Children's Policy Council, had difficulty finding external funds, and its members are weary from extended work on the MC3 business plan. If the Council (or some hybrid with comparable goals and membership) does not survive, it will be a major disappointment.

Another part of the SK/SS vision involves ongoing involvement by community members and clients in governance, as well as ensuring some mechanism for the community to voice its needs and desires. Huntsville's Vision Summits gave community members a new way to be involved and voice their needs. Unfortunately, these Summits ended with the establishment of MC3. At the time, it was thought that the MC3 meetings would be a good substitute. However, MC3 meetings did not elicit the same open forum as the Summits, and are mainly attended by agency staff. The workgroups offered another avenue for community participation, and, as mentioned above, several will continue. Three other project efforts still underway—The Circle Project, Faith and Neighborhood Program, and Client Board Bank—may also help to fulfill this need, if they can be sustained. For example, each of The Circle Project's schools has a community advisory committee to identify needs for that area.

### **To What Extent Did One by One Produce System Reform?**

Many changes initiated through SK/SS promise to endure. These include:

- The Family Violence Unit within the DA's Office, which unites domestic violence and child abuse attorneys and investigators.
- Enhancements to the MDT, including the addition of domestic violence representatives, co-location of MDT members, enhanced computer connectivity, working toward an MIS, the use of shared protocols for the investigation of child abuse and neglect, and special forensic interviewers for children under age 6.
- Cross-agency and community collaboration and cooperation through informal agency networks, improved access to information (*Streetwise* newsletter, community calendar), and new practices (such as checking with other agencies when writing proposals).
- Cross-agency training sustained by the NCAC, Crisis Services of North Alabama, Family Services Center, and United Way.

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- Diversity Schoolhouse, currently funded with supplemental funds, but expected to be picked up by the NCAC.
- Increased use of data-driven decisionmaking by the NCAC and MC3.
- Implementation of Family Drug Court.

Senior agency directors from DHR, HPD, and the DA's Office have voiced strong support and commitment for ensuring that the first two reforms continue past Federal funding. Community and cross-agency collaboration is reflected (according to key informants and stakeholders) in how people now routinely do their job (and how they train others). Cross-agency training has become a standard. The success and interest generated by Diversity Schoolhouse has ensured that money will be available to continue it. As a result of funding surveys, evaluations, and the Community Report Card, there is greater understanding of data and an increased demand for information (beyond anecdotes) to inform policy decisions. The NCAC now also has its own Research Department, which can support the agency, new grants, and, most likely, the wider community.

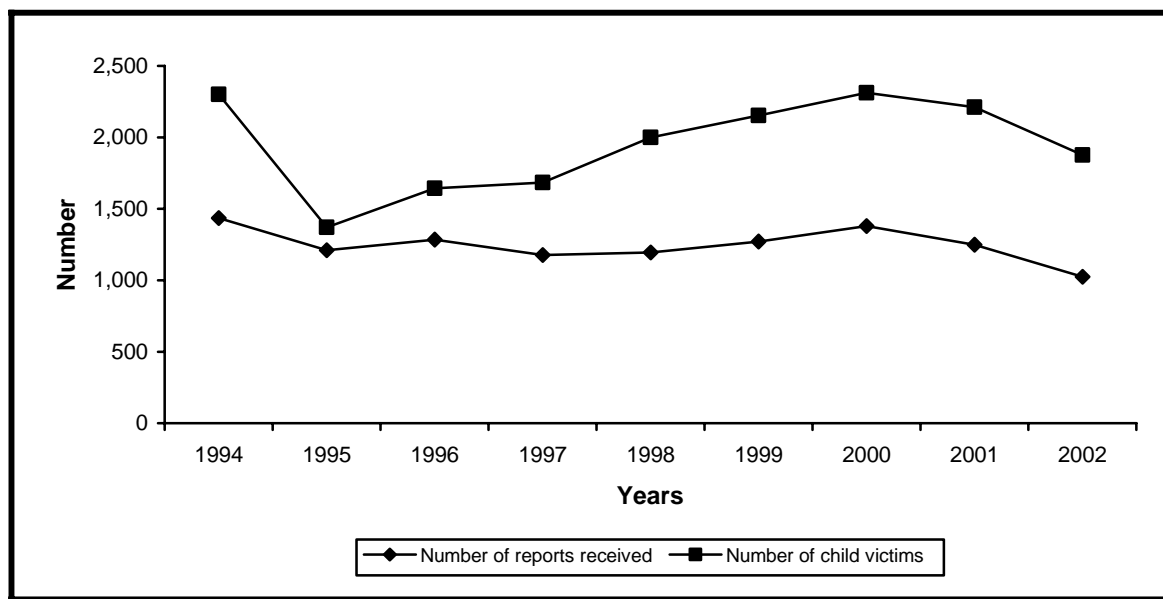
The implementation of Drug Court has more to do with the tenacity of the judge than SK/SS, but illustrates how a small investment (in this case, for training) can spawn a large effort. It took several years, but using training supported by SK/SS, the judge was able to implement Drug Court in 2002.

### **Is There Evidence That One by One Has Had Longer Term Impacts on the Incidence of Child Abuse and Neglect?**

The basis for the entire SK/SS project and a primary goal for One by One is the reduction in the incidence of child abuse and neglect. As shown in Figure 3-1, the number of reports of child abuse in Madison County actually rose slightly with the initiation of the project, before beginning to fall in 2000. It is important to note that changes in the rates of child abuse and neglect cannot be causally linked to the project. Changes in rates can be affected by a number of factors, such as economic conditions, adjustments made in response to the RC Consent Decree, or publicity regarding a child death. At best we can only look at such administrative data to see if change coincides with these efforts. The slight increases in reporting were expected, resulting from SK/SS public education efforts and increased training for mandated reporters. The initial declines shown in the figure are hopeful indicators of what may be

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**Figure 3-1. Number of CAN Reports and Child Victims From 1994 to 2002 in Madison County**



happening in part as a result of SK/SS; however, additional data are needed to determine if child abuse and neglect is truly on the decline.

Table 3-7 gives more detail on the number and types of reports of child abuse and neglect during the time the One by One project was being implemented. As a point of comparison, percentage changes for the same time period for Alabama have been included. The number of reports and number of child victims declined between 1998 and 2002 for both Alabama and Madison County; however, the declines for the state were larger in both categories (reports declined by 19.6 percent in the state versus 14.3 percent in Madison County, while the number of child victims fell by 25.8 percent for the state versus 6.2 percent in the county). The change in the number of child victims by category of abuse—physical, sexual, and emotional—declined both in the county and in the state overall. It is interesting to note that the number of child victims of neglect, the most common type of maltreatment, actually showed an increase in Madison County between 1998 and 2002 (11.5%) and a decrease statewide (-35.9%). Finally, the number of child victims whose cases had a finding of "indicated" or "reason to suspect" declined more precipitously in Madison County (42.7%) than in the state (27.3%). Although the project activities may have played some role in these patterns, we cannot determine that from the evidence we have available.

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**Table 3-7. Child Abuse and Neglect Statistics for Madison County and Alabama, 1998 to 2002**

Indicators	Years					% Change 1998-2002 Madison County	% Change 1998-2002 Alabama
	Madison County						
	1998	1999	2000	2001	2002		
Total reports received	1,196	1,272	1,379	1,248	1,025	-14.3%	-19.6%
Number of child victims	2,000	2,152	2,312	2,210	1,877	-6.2	-25.8
Physical abuse	871	828	922	969	697	-20.0	-15.3
Sexual abuse	186	242	252	207	156	-16.1	-7.9
Emotional abuse	51	72	69	45	29	-43.1	-71.6
Neglect	892	1,010	1,069	989	995	11.5	-35.9
Number indicated/reason to suspect	492	467	337	342	282	-42.7%	-27.3%

Source: Department of Human Resources, Madison County. *Summary data for NCANDS*. Faxed June 11, 2003.

### What Factors Affected Project Success and Progress?

Many factors influenced program development and progress. In some cases the same factor both hindered and helped the project in moving toward its ultimate goal. The following factors were largely positive:

- **The expertise of the NCAC.** Program staff used the strengths of the agency—in managing large Federal programs, working with many of the core agencies that were part of the collaborative, and providing extensive training—to develop early and ongoing victories in program implementation. These helped them sustain collaborative members through the delays, setbacks, and lengthy implementation of other strategies. Project staff were creative and opportunistic in taking advantage of other community efforts that could promote the goals of SK/SS, reducing the strain on resources. For example, given the cost of MIS development and the early emphasis of Federal program officers on this issue, One by One staff began developing separate grant applications to support this focus. It is important to mention that the NCAC is perhaps the largest nonprofit agency in the Huntsville community. In the early years, there was some concern that NCAC would be the “elephant in the living room,” leaving little room for other nonprofit agencies to participate. However, as program implementation progressed, NCAC increasingly shared leadership with other community groups.
- **Community climate.** Madison County was receptive to change, although initially One by One staff and stakeholders tended to focus on “improving” existing efforts rather than “changing” systems. In part, the climate for change was fueled by the RC Consent Decree. DHR was in the middle of



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responding to the requirements of the RC Consent Decree at the time SK/SS was awarded. The goals for both were parallel. DHR embraced the efforts of One by One to support changes required for the Consent Decree. DHR was a critical ally, open and supportive of the collaborative as well as individual efforts—training programs, the community relations program, revised protocols, and relocation of MDT staff.

- **A strengthened relationship between the primary domestic violence organization and One by One.** Crisis Services of North Alabama and the NCAC had a good relationship prior to the SK/SS award. But that relationship blossomed as they worked together on the First Responder Program and developed the Technology Opportunities Program (TOP) grant to improve resource information for the community.
- **Commitment of agency leaders for the duration of the project.** Agency directors and supervisors stuck with this program from the beginning. Many were involved in the proposal stages and were actively involved in both planning periods. This commitment helped support new directors and supervisors in the collaborative when turnover did occur. Although support and attendance ebbed and flowed at different points in the project, the leaders came back to the table as new system reform issues were negotiated and solutions considered.

The next group of factors had a mixed effect on One by One's progress. In some cases the same factor facilitated some aspect of program development while hindering another. These included:

- **History of collaboration.** Most of the previous collaboration in Huntsville had centered on the MDT, and in fact, the MDT was often used as a synonym for collaboration. This meant that key agencies of the child protection system came readily to the table to develop the proposal and conduct the planning for the project. It also meant that others in the community, such as board members of the NCAC, were familiar with the concept and willing to expand the collaborative model. On the negative side, it meant that certain groups that had not been involved in the MDT or CAC development had a history of exclusion. In general, the historical members of the collaboration were open to expanding the membership. But it took several years for One by One to convince those who felt excluded in the past that this was a new way of working and they were welcome.
- **Breadth of the demonstration program.** The demonstration program, as outlined by OJP, was an enormous endeavor. The solicitation outlined a large number of strategies for sites to undertake. Additional strategies were identified through technical assistance as the project developed and as participants learned more about best practices. Also, OJP gave sites considerable flexibility in adapting SK/SS to their communities and did not dictate any optimum allocation of resources for varying efforts. The sheer

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size of the initiative program made it difficult to decide what to do first or next or even when to shift priorities.

- **Communication between OJP and One by One.** OJP saw itself in the role of partner to the sites. This was a new role, both from the perspective of OJP and local sites, and was difficult for Huntsville to grasp. Problems with communication began during the first planning phase and continued well into implementation. One by One staff and some stakeholders felt that OJP had not clearly stated its expectations while the first planning effort was underway. Rather, OJP took the site by surprise, reacting negatively once a document had been developed and the time and money spent. Huntsville admittedly sought little input from the project officer during the development of the first Implementation Plan, but OJP did not aggressively promote communication/interaction either, assuming that the program solicitation provided sufficient guidance. However, the flexibility of OJP, particularly in the early release of implementation funds during the lengthy planning period, mitigated these tensions.
- **The economy.** One by One began at the top of the economic boom. Early efforts were welcomed and commitments made by agencies and organizations to do a broad range of efforts. Huntsville got support from the local business community in a number of ways, from volunteers and use of meeting facilities, to small grants. In the public sector, expectations were high that proposed services and programs could be maintained. Midway through the project, however, the downturn in the economy saw cuts for all collaborative partners, particularly those reliant on state budgets. Efforts to run a lottery to support education in the state failed. While it is too early to tell how the economy will ultimately affect the sustainability of many of the efforts of One by One, some programs will likely be lost to budget cuts. On the positive side, key informants told us that the economic situation actually promoted the collaborative approach taken to grant writing.
- **Ability to engage consumers and community members in the collaborative.** Keeping consumers active in the governing council has been difficult for One by One. The project succeeded in bringing in a number of different perspectives and even more people to the Vision Summits, task forces, and activity-specific workgroups (e.g., the Purple Pages). However, it was harder to secure their ongoing participation in the governing council. There are a couple of explanations for this. First, the Stakeholders Council and the subsequent MC3 were top-down collaborations. Second, it can be costly to support community members in such collaboratives—through training, ongoing support, mentoring, and subsidies. One by One was unsure where to get such resources or what other SK/SS programs to cut in order to fund them. To its credit, the project was aware of this deficit and continues to attempt to solve the problem.

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### What Is the Future for One by One?

Many of the activities that One by One undertook will continue. In addition to the system reform efforts listed earlier, activities that appear likely to be sustained include:

- Stretching Dollars,
- Diversity Schoolhouse,
- Client Board Bank,
- Volunteer Language Bank,
- Parents as Teachers,
- First Steps,
- Father support programs,
- Little House treatment programs,
- Supervised Visitation Center,
- In-home supervised visitation,
- Resources 101,
- The *Streetwise* newsletter and community calendar,
- First Responder Program, and
- Substance Abuse Case Management Program.

Programs for which new funding has not been identified may yet be absorbed by other partners or incorporated within other endeavors. For example, Faith and Neighborhood clubs may be taken on by the Interfaith Mission Service. To date, however, there has been little attempt to restructure existing budgets to take on SK/SS efforts. This may occur once agencies realize that the Federal funds are disappearing.

One by One continues working on sustainability. Its success in sustaining three of its signature efforts will more fully define the legacy of SK/SS in Huntsville.

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- The development of MC3 was a remarkable achievement and suggested a true shift in the paradigm of collaboration. Huntsville significantly improved the community's response to child abuse and neglect in many areas. However, moving the community to a new level will depend on whether a community collaborative can be sustained independently of SK/SS. As of mid-2003, several problems plagued MC3 and called into question its continued operation: (1) the overlap with the Children's Policy Council and resultant confusion over roles, (2) the failure to locate non-SK/SS funds for staff support, and (3) lethargy resulting from the lengthy time spent on the MC3 business plan. One by One continues to seek support for staffing for MC3 and to get technical assistance on further developing the MC3 concept.
- The pilot for LEADERSHIP *Social Services* holds great promise for supporting ongoing collaboration among social service providers in Madison County. Its business plan emphasizes fees for enrollment as the means of program continuation, which in turn may rest on the economy and state budgets. Interest in this concept among agencies within the county is high; however, whether that interest can survive budget cuts is yet to be demonstrated.
- The third effort, The Circle Project, is also dependent on state budgets. The pilot program will continue, using funds from the Federal SK/SS transitional grant and other funds from OJP. The commitment for the pilot in each of the three school districts was important and suggests a relatively strong interest in the project. Funding through Federal, state, and local sources is being sought. Whether that interest can be maintained without external funding in the face of deficits in school budgets is unclear.

Regardless of what happens to this project, we expect to see collaborative efforts continue, in part because the new linkages that have been forged throughout the community will not disappear overnight. One by One has established linkages with churches, child-serving agencies, and the media. The media can be particularly helpful in sustaining the effort by continuing to ask important questions, such as where does Huntsville rate now compared to the previous Report Card. Such probing by the media can hold stakeholders accountable for the SK/SS goals. Groups such as the QAC are being sustained through DHR funding and support the cross-agency approach, community input, and information sharing that are hallmarks of SK/SS.

In some cases, the community has gotten accustomed to an improved way of doing things. For example, the resource directories, training opportunities, and improved referrals will likely create their own demand. Additionally, the surveys and the Community Report Card have generated the expectation that data will be available on child abuse reports,

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substantiations, teen pregnancy, domestic violence, child deaths, available dollars, etc. Community demand may ensure these efforts are maintained.

What we have learned from the Huntsville One by One experience is that even in an environment which has an established MDT and CAC, taking collaborative decisionmaking to a new level (beyond the current comfort zone) requires at least three factors: (1) time to build an atmosphere in which collaboration can occur; (2) a significant level of commitment from stakeholders; and (3) financial resources. One by One has shown that it, too, is aware of these needs and is currently attempting to address each of them as it deals with the issues of sustaining programs and goals, with the support of OJP and technical assistance providers, to maximize the long-term effects of the SK/SS initiative.

## **APPENDIX B**

### **Overview of Implementation Activities and Logic Model**

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability</b>					
Collaboration Development	Established governing council*	One by One	Madison County	March 1997-August 2000	<ul style="list-style-type: none"> <li>▪ Stakeholders Council, outlined in the proposal, was set up with input from existing QAC. This structure operated in the first 9 months of the project.</li> <li>▪ During the second planning process, the Council was expanded to include District Court judges. A Steering Committee was added.</li> <li>▪ As a result of District Court judges' involvement, new groups—CAJA and Juvenile Probation Office were included in the collaboration.</li> <li>▪ The QAC took a reduced role in SK/SS after the first planning process.</li> </ul>
	Developed/ administered a county-wide collaborative (Madison County Coordinating Council-MC3)*	One by One	Madison County	February 2000-September 2004	<ul style="list-style-type: none"> <li>▪ Established MC3 by combining four collaboratives, including the Stakeholders Council.</li> <li>▪ Established in 2000, under the direction of the presiding District Court judge and organizing committee (with TA from OJP), and established bylaws and a membership structure.</li> <li>▪ The MC3 mission included “enhanced coordination, communication, and collaboration among community partners.” MC3 has broader responsibilities than SK/SS oversight and broader membership than the Stakeholders Council.</li> <li>▪ Membership included DA; judges; chiefs of police; sheriff; school system superintendents; directors of DHR, Health, Mental Health, and Housing Authority; representatives of Huntsville City Council, Madison City Council, and Madison County Commission; vice president of United Way; Commander Redstone Arsenal (added a bit later); three representatives each from business, faith, higher education, civic, and consumer/client community; and five representatives from the nonprofit service providers.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Collaboration Development (continued)					<ul style="list-style-type: none"> <li>▪ MC3 developed a 5-year business plan and is looking to establish itself as a 501(c) 3 organization with a director and staffing.</li> <li>▪ Confusion over roles of MC3 and Children’s Policy Council mandated by Alabama legislature have delayed recent progress. Executive committees of both meeting to work out issue.</li> </ul>
	Established/ coordinated Steering Committee*	One by One	Madison County	December 1997- September 2004	<ul style="list-style-type: none"> <li>▪ Steering Committee provided project-level oversight, budget approval, and sustainability planning.</li> <li>▪ Committee created an opportunity for mid-level staff across agencies to get to know each other and collaborate on project issues.</li> <li>▪ Steering Committee will continue its work on sustainability planning through supplemental funds.</li> </ul>
	Participated in other community committees to address SK/SS goals*	One by One	Madison County	1997- Ongoing	<ul style="list-style-type: none"> <li>▪ Program staff sat on the Terry Height Weed &amp; Seed Committee and served on a committee to get a second Weed &amp; Seed site.</li> <li>▪ Program staff also sat on the Youth Services Council board and the Peace It Together collaborative.</li> <li>▪ Participation on boards of other organizations has provided connections that have further broadened the collaborative (e.g., agencies that serve people with disabilities).</li> </ul>
	Established workgroups for major program elements*	One by One	Madison County	1998-2003	The project set up a number of workgroups to advise the implementation of program strategies, e.g., Family Strengthening Education, Public Education and Awareness, Friends and Neighborhood, Purple Pages, The Circle Project, and FRC advisory councils for 2 sites. The Family Strengthening Education Workgroup merged with the Youth Services Council in March 2001.



**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Client and Community Input and Participation in the Collaboration	Ensured involvement of community members in collaboration*	One by One The Volunteer Center	Madison County	June 2000-2003	<ul style="list-style-type: none"> <li>▪ Elected 3 community representatives to MC3 in Jan 01, and community members remain on MC3.</li> <li>▪ Provided training to community representatives who were then partnered with agency directors or supervisors as mentors.</li> <li>▪ Established Client Board Bank for which The Volunteer Center identified, recruited, and trained former social services clients to serve as nonprofit board members and linked them with agencies. The Center developed a brochure and training manual.</li> </ul>
	Developed/supported DHR community relations program*	DHR Girls, Inc.	Madison County	March 2000-June 2003	<ul style="list-style-type: none"> <li>▪ Program expanded from one to five ZIP Codes in the first year.</li> <li>▪ Liaison established a community Resource Bank, linked community groups (e.g., churches and schools) to meet resource gaps, and addressed client communications problems in DHR.</li> <li>▪ Liaison made presentations on child abuse and neglect (CAN) to day care centers, schools, churches, public housing resident councils, and community groups.</li> <li>▪ Liaison initiated a program in which she rode the Huntsville Shuttle Bus to discuss DHR and address problems raised by riders. DHR now requires new caseworkers to accompany the liaison on the shuttle bus to acquaint them with the community.</li> <li>▪ The liaison became a recognized resource for information between the community, DHR clients, and DHR social workers and mid-level staff.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Strategic Planning	Developed inclusive community planning process and investigated data availability to establish data-driven, 5-year goals in conjunction with MC3*	One by One Representatives of the faith and business communities Agency partners	Madison County	December 1997-2003	<ul style="list-style-type: none"> <li>▪ Annual Vision Summits were held to ensure community input, priority settings, and information sharing on current activities. The 1998 Summit identified the breadth of issues to be addressed by One by One (N=125 participants). The 1999 Summit set annual priorities (N=100 participants). The 2000 Summit focused on family partnerships. The 2001 Summit prioritized program efforts for working through sustainability (N=64).</li> <li>▪ MC3 meetings, open to the public, are used to get public input on an ongoing basis.</li> <li>▪ Supported strategic planning process of the Huntsville City Schools.</li> </ul>
Multidisciplinary Team	Enhanced MDT through co-location of team members, the addition of staff, equipment (computers, videotaping equipment), computer connectivity, team building, and expanded team membership*	DA's Office One by One Crisis Services Huntsville Police Department (HPD) Sheriff Department DHR Madison City Police Department	Madison County	March 1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Hired investigators (for CAN and domestic violence).</li> <li>▪ Team members attended training on collaboration between domestic violence and CAN professionals.</li> <li>▪ Connected all co-located team members with home office computers to allow equal access to home agency as well as team members.</li> <li>▪ Initiated videotaping of victim interviews as a training effort and continued it as part of routine part of case documentation. MDT members can critique and improve interviewing skills and reduce re-interviewing of and trauma to victims.</li> <li>▪ Enhancements are being maintained, post-SK/SS funding, by home agencies.</li> <li>▪ Improved relations among team members and improved understanding in roles of different staff and agencies, resulting in improved interactions and performance.</li> <li>▪ Domestic violence investigators and First Responders added in 1999; CAJA volunteers added in 2000, SANE nurses added in 2002.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Multidisciplinary Team (continued)					<ul style="list-style-type: none"> <li>▪ Team members reported increased understanding of overlapping problems in domestic violence and child abuse and neglect cases and earlier identification of problems.</li> <li>▪ Sustained by team agencies.</li> </ul>
	Enhance resources for victims*	NCAC	Madison County	2000-Ongoing	<ul style="list-style-type: none"> <li>▪ Employed a specially trained therapist to interview young victims or victims with developmental delay (sustained through alternate funds).</li> <li>▪ Law enforcement reported increased use of therapist for initial interviews and improved victim information for investigation.</li> <li>▪ Added support groups for nonoffending parents.</li> <li>▪ Added session for adolescent girls traumatized by sex abuse.</li> <li>▪ Reduced therapy waiting lists for victims.</li> </ul>
	Established a shared protocol for investigating CAN and coordinated development of a standard protocol for reporting and investigating child maltreatment in schools*	DA's Office NCAC DHR HPD Sheriff's Office Madison City Police Department	Madison County	June 1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Protocol developed and established as the standard operating procedure for team members.</li> <li>▪ Protocol users reported that the tool allowed a more thorough CAN investigation.</li> <li>▪ DHR workers assigned as liaisons to the 3 school systems conducted annual training sessions with school personnel on how to report and how CAN is investigated.</li> </ul>
Program/Service Coordination	Researched/organized two Family Resource Centers (FRCs)*	One by One Huntsville Housing Authority, Councill Court Pub. Housing, Lincoln Park Pub. Housing, Family Services Center	Madison County	October 1998-2002	<ul style="list-style-type: none"> <li>▪ Councill Court FRC organized (2000).</li> <li>▪ Furniture, equipment, books donated.</li> <li>▪ GED classes, entrepreneur classes and parent literacy classes (ParentRead) held.</li> <li>▪ In May 2001 partnership with Councill Court ceased.</li> <li>▪ Lincoln Park FRC organized (2001).</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Program/Service Coordination (continued)					<ul style="list-style-type: none"> <li>▪ Connected Lincoln Park FRC with faith community resulting in Friends ‘N Faith Backyard Club, stocking of food pantry, Thanksgiving and Christmas food baskets, and Christmas party with gifts for children.</li> <li>▪ Domestic violence materials made available.</li> <li>▪ Computers donated, installed and computer classes offered to children in summer and adults in fall.</li> <li>▪ Established a reading room, with books donated by churches.</li> <li>▪ One by One support for Lincoln Park ended in 2002 when efforts to coordinate services through FRC were refocused to The Circle Project initiative (see below).</li> </ul>
	Investigated and piloted The Circle Project (neighborhood-based services in schools)*	One by One DHR NCAC Big Brothers/Big Sisters Mental Health Center of Madison County Huntsville City Schools Madison City Schools Madison County Schools	Madison County	2002-2004	<ul style="list-style-type: none"> <li>▪ Established a steering committee to determine the viability of a full-service schools program.</li> <li>▪ Established a pilot program in one elementary school in each of the three school systems.</li> <li>▪ Established 3 local advisory committees responsible for identifying student, family, and school needs and making programming recommendations.</li> <li>▪ Developed operations policies and procedures, confidentiality agreements, intake forms, consent to share information forms and staff training procedures.</li> <li>▪ Hired project assistants.</li> <li>▪ Churches donated office furniture and carpeting and volunteers to paint offices.</li> <li>▪ Specified six core service areas—on-site mental health counseling, in-school mentoring, school-based DHR financial assistance, parent workshops, referral and assistance in locating community services.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Program/Service Coordination (continued)					<ul style="list-style-type: none"> <li>▪ Began providing services—mentoring (N=41), mental health counseling, case management, referral for services (e.g., food, assistance, eyeglasses)—in January 03.</li> <li>▪ Conducted 2 field trips to Jacksonville, FL, (N=17, 20 attendees) and 1 to Louisville, KY (N=25). Field trips were made by project staff and agency and community partners.</li> <li>▪ Task force on The Circle Project established after second field trip and determined that pilot programs in each of the 3 school systems should be set up.</li> <li>▪ One by One will use supplemental funds to evaluate the program, broaden support for the program, develop a sustainability plan, and support development of the advisory councils.</li> </ul>
	Investigated better coordination of supervised visitation programs around the county*	One by One Family Services Center Harris Home Crisis Services DHR DA's Office	Madison County	1999-2003	<ul style="list-style-type: none"> <li>▪ Conducted/supported training for DHR and Family Services Center workers and facilitated sharing information about supervised visitation.</li> <li>▪ Held a Summit in 2002 chaired by District Court judge. (N=21 attendees)</li> </ul>
	Coordinated substance abuse programs*	One by One	Madison County	November 2001- Ongoing	<p>Held the Substance Abuse Treatment Options summit resulting in:</p> <ul style="list-style-type: none"> <li>- Establishment of Substance Abuse Solutions Network (1<sup>st</sup> meeting attended by 60 providers);</li> <li>- Representative of the substance abuse community appointed to The Circle Project Steering Committee;</li> <li>- Established an ad hoc committee on adolescent services.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Resource Development	Identified/coordinated resources for conducting activities identified at the Vision Summit and for continuing the programs initiated under SK/SS*	One by One	Madison County	1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Developed Stretching Dollars Network.</li> <li>▪ Developed Market Place network.</li> <li>▪ Identified resources/RFPs for agencies within Madison County.</li> <li>▪ Coordinated SK/SS with other grants (TOP, Byrne ADECA) to support program goals.</li> </ul>
	Developed/staffed/sustained a resource information network (Stretching Dollars)*	United Way One by One Huntsville/Madison County Public Library	Nonprofit agency managers, grant writers, grant administrators	July 1999-Sept. 2004	<ul style="list-style-type: none"> <li>▪ Quarterly meetings established with service agencies to discuss ongoing proposals, identify resources available, provide training (e.g., budget development, collaboration, grant writing, networking with elected officials for grant funding, developing a social services business plan, evaluation and outcome management).</li> <li>▪ Attendance averages 44 people per meeting.</li> <li>▪ New networking forum evolved to focus on marketing issues associated with nonprofit agencies modeled on Stretching Dollars (sponsored by One by One, Family Services Center, and United Way).</li> <li>▪ Will continue under One by One direction through supplemental funds. It is anticipated that the program will be sustained by United Way and the public library.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development <sup>73</sup>	Conducted training on CAN (identifying, investigating, reporting)*	One by One	School counselors, day care workers, Healthy Families workers, DHR case workers, New Horizons workers, private service providers, sanitation workers, clergy, faith community, Camp Success staff, staff of Boys and Girls clubs, Huntsville utility workers, law enforcement officers, AL Bureau of Investigation, YMCA summer camp counselors, ER nurses, pediatric and family practice nurses, AL Post-Adoption Connections	1998-2003	<ul style="list-style-type: none"> <li>▪ A breadth of groups and individuals received training on CAN from business and civic groups (N=1,246) to agency staff (N=2,725).</li> <li>▪ YMCA formulated and implemented its first formal policy dealing with discipline and CAN reporting procedures.</li> <li>▪ One by One investigated agencies' interest in supporting a cross-agency training coordinator.</li> </ul>

<sup>73</sup> Some training activities are listed under other related activities (see Cultural Competency and Public Awareness).

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development (continued)	Developed/ conducted training on CAN resources, agency responsibilities, and the steps in processing CAN cases*	One by One Coalition Against Domestic Violence	School counselors, Healthy Families workers, DHR case workers, New Horizons workers, private service providers, CAJA, foster parents, Huntsville PTAs	1998-2003	<ul style="list-style-type: none"> <li>▪ Conducted workshops on resources.</li> <li>▪ Developed an all-day training program on resources and actions of different agencies (<i>Resource Safari</i>, N=67 participants).</li> <li>▪ Developed an all-day training on what happens to a case <i>After You Report</i> (N=168).</li> <li>▪ <i>Point of Contact</i> program (N=76).</li> <li>▪ Some efforts sustained under alternate funding.</li> </ul>
	Conducted/ supported training for professional skills development*	One by One	Guardians ad litem, police, judges, prosecutors, DHR caseworkers, teachers, probation officers, staff from community organizations, project staff	1998-2003	<ul style="list-style-type: none"> <li>▪ Topics included working with sex offenders, improved court practices, prosecuting CAN, accounting for grants, effective interventions in domestic violence and child maltreatment, providing quality customer service, interviewing/supporting child crime witnesses, supervisory skills for child welfare supervisors, violence in the workplace, dealing with bullies (N=3,005 participants).</li> <li>▪ Some programs were certified and could be counted as continuing education units.</li> <li>▪ Training partnerships were forged with a number of old—DHR, District Court, DA’s Office—and new—Municipal Court, Administrative Office of Courts—partners for both developing workshops and combining staff for cross-agency training.</li> </ul>
	Conducted preservice training*	One by One	College students in Madison County	2001-2002	<ul style="list-style-type: none"> <li>▪ Conducted training for social work majors at Oakwood College.</li> <li>▪ Conducted training for graduate nursing students.</li> </ul>



**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development (continued)	Developed and conducted training for leadership program for social service agencies (LEADERSHIP <i>Social Services</i> )*	One by One	Nonprofit, social service providers (mid-level supervisors, program managers, and board members)	Sept 2001-Sept 2004	<ul style="list-style-type: none"> <li>▪ Pilot program established March-June 2002 (N=10).</li> <li>▪ Full program established Sept 2002-May 2003 (N=15).</li> <li>▪ Participants reported increased cross-agency communication for class members.</li> <li>▪ Program will continue using supplemental funding.</li> <li>▪ Sustaining the program beyond Federal support may require establishing a sliding fee scale for agencies.</li> </ul>
	Working with the Media (effective use of media, crisis communication, family violence and the media)*	One by One	Nonprofit agencies	1999-2002	Trained 63 people.
	Provided scholarships for National Symposium on Child Abuse*	One by One	Police, prosecutors, DHR caseworkers, therapists	1998-2003	Provided 230 scholarships in support of professional development.
	Developed/ conducted programs on working with social service clients involved in crises*	Better Business Bureau One by One	Initial contact personnel from agencies that serve children and families	1999-2000	<ul style="list-style-type: none"> <li>▪ Four workshops were developed, on making the first agency contact, working effectively with clients, working with difficult people, and making the agency a welcoming place.</li> <li>▪ Trained 122 people.</li> </ul>
	“On the road” presentations on resources available for children and families*	One by One	Agencies in Madison County	2000-2003	<ul style="list-style-type: none"> <li>▪ Presentations at law enforcement roll calls, special education coordinators meetings, PTAs, technical college, child care providers, and other meetings in the county.</li> <li>▪ Facilitated access to resource information by frontline workers.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development (continued)	Hosted satellite video conferences/ teleconferences	One by One Crisis Services Healthy Families DHR Neaves Davis Center	Madison County	1997-Ongoing	Downlinked satellite conferences covering a range of topics, publicized them, and enlisted agencies to co-host programs to improve attendance.
	<i>Academy Online</i>	NCAC University of Alabama, Huntsville	Professionals working with children	September 2002-Ongoing	<ul style="list-style-type: none"> <li>▪ Uses Internet2 to provide information, such as profiling the child molester, developmental and medical effects of domestic violence on children, impact of domestic violence on children.</li> <li>▪ Sustained through other DOJ funding.</li> </ul>
	Other workshops and trainings*	One by One MC3 CAJA NCL Huntsville Association of Pastoral Care AL Cooperative Extension System HPD	Madison County	1998-2003	<ul style="list-style-type: none"> <li>▪ Trained approximately 300 people.</li> <li>▪ Topics included violence in the workplace, collaboration and evaluation, public policy, public/private ventures, stress reduction.</li> <li>▪ Presenters met with MC3 members to discuss local policy issues.</li> <li>▪ Continuing education units provided for training.</li> <li>▪ Faith and Neighborhood Workgroup hosted Mission Possible I and II (attended by 64 and 68, respectively).</li> </ul>
Cultural Sensitivity/ Competency Efforts	Implemented a volunteer language bank for non-emergency uses and expanded existing language bank for emergencies*	The Volunteer Center One by One	Madison County	2002-Ongoing	<ul style="list-style-type: none"> <li>▪ Training manual developed.</li> <li>▪ 74 volunteers trained who speak 21 languages.</li> <li>▪ 43 translation requests processed from nine agencies.</li> <li>▪ Program sustained with alternate funds.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Cultural Sensitivity/ Competency Efforts (continued)	Cultural diversity training*	Alabama Cooperative Extension System Youth Services Council One by One	Youth-serving agencies in Madison County	May 1998-2002	<ul style="list-style-type: none"> <li>▪ Held multiday trainings on cultural competency and best practices in working with CAN and domestic violence victims.</li> <li>▪ Trained 246 people.</li> </ul>
	Provided ongoing education on different cultural practices through Diversity Schoolhouse*	One by One NCAC Interfaith Mission Service	Open to everyone, but generally attended by agency staff workers	Sept 1999-Sept 2004	<ul style="list-style-type: none"> <li>▪ Trained 886 people (average attendance 28).</li> <li>▪ Attendance now required by DHR, Healthy Families, and NCAC staff.</li> <li>▪ Provided information on program to jurisdictions outside the state and developed marketing kits to share information (and solicit some ongoing support for program).</li> <li>▪ Program initiated in Twin Falls, ID; Memphis, TN; Fairbanks, AK; Mercer County, WV.</li> <li>▪ Program will continue another year using supplemental funds.</li> </ul>
	Assessed the cultural practices/ readiness within the lead agency	NCAC	NCAC	February 2001-Ongoing	<ul style="list-style-type: none"> <li>▪ Assessed NCAC's cultural competency.</li> <li>▪ Developed action plans to address needs.</li> <li>▪ Formulated plans to conduct similar assessments in other social service agencies, but were unable to identify funding source.</li> </ul>
	Provided training on CAN in Spanish*	One by One	Madison County	1999-2003	<ul style="list-style-type: none"> <li>▪ Provided a training on what constitutes CAN, age of consent, how to report, resources for victims, and alternative methods of discipline.</li> <li>▪ Facilitated two radio broadcasts on these subjects.</li> </ul>
	Provided job-specific Spanish classes for professionals*	One by One Crisis Services	Social service agencies Domestic violence professionals	2002-2003	<ul style="list-style-type: none"> <li>▪ Presented Spanish language video learning program (<i>Destinos</i>) 3 times a week in 2002. Weekly attendance ranged from 15 to 40.</li> <li>▪ Incorporated new lesson book, <i>Spanish for Social Services</i>, which covers common social service interactions, such as filling out forms, seeking a job, and finding assistance for basic needs.</li> <li>▪ Conducted a more advanced class in 2003, meets twice a week. Average attendance 24.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Accountability Projects	Implemented Family Drug Court	District Court	Madison County	2000-Ongoing	<ul style="list-style-type: none"> <li>▪ Supported training to judges on Drug Courts.</li> <li>▪ Local initiative established to investigate implementing a Drug Court.</li> <li>▪ Drug court implemented in April 2002. New court implemented by re-allocating existing funding streams among the agencies involved.</li> </ul>
	Worked toward establishing a Model Court and a Family Court	District Court CAJA	Madison County	1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Attended training on Model Courts.</li> <li>▪ Petitioned AOC for 4<sup>th</sup> judge.</li> </ul>
	Established Family Violence Unit in DA's Office	DA's Office	Madison County	1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Merged attorneys supporting domestic violence and CAN.</li> <li>▪ Added domestic violence professionals to MDT.</li> </ul>
<b>Continuum of Services</b>					
Prevention and Early Intervention Activities	Established and supported neighborhood development programs, such as neighborhood-based Healthy Families worker*	One by One NCAC Meadow Hills Initiative	Madison County	November 1999-2003	<ul style="list-style-type: none"> <li>▪ Added a Healthy Families worker, who was outbased for about 7 ½ months. Due to financial difficulties with host agency, worker moved back to NCAC, but continued supporting families (N=19) in designated neighborhood.</li> <li>▪ Identified another neighborhood church in November 2001 from which the worker operated.</li> <li>▪ Sustained by alternate funds.</li> </ul>
	Establish countywide Neighborhood Block Party Weekend to build a sense of neighborhood*	One by One Annual March for Jesus	Madison County	1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Held block parties in 1998.</li> <li>▪ Activity taken over by a faith-based group in 2001.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)	Support Neighborhood Health Clinic*	One by One	Lincoln Park neighborhood Terry Heights neighborhood	1999-Ongoing	<ul style="list-style-type: none"> <li>▪ One by One supported the clinic by providing patient charting software. In the first year, the clinic had 2,500 patient visits, with patients ranging in age from 2 weeks to 72 years old.</li> <li>▪ Dental services added in 2000.</li> <li>▪ Second clinic in Weed &amp; Seed neighborhood opened August 2001.</li> </ul>
	Support school-based curriculum on child abuse* <ul style="list-style-type: none"> <li>▪ Expand school-based personal safety program to all grades and increase the frequency of delivery</li> <li>▪ Expand preschool personal safety programs and supporting education programs</li> </ul>	NCAC	Madison County	1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Number of sessions expanded for grades K, 1, 3, 5, 7.</li> <li>▪ Supported development of preschool program.</li> </ul>
	Developed Family Strengthening Education Program*	NCAC	Parents of preschool children in Madison County	September 1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Home visitation program established for Healthy Families graduates and families referred by an elementary school (Parents as Teachers (PAT)).</li> <li>▪ Supports child development and school readiness programs.</li> <li>▪ Program supported approximately 28 families.</li> <li>▪ Developed/distributed a Resource Guide for Families brochure and Family Strengthening Resource Guide (for professionals).</li> <li>▪ Set up a Speakers Bureau.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)					<ul style="list-style-type: none"> <li>▪ In March 2002, PAT initiated monthly visits to 25 families through Even Start.</li> <li>▪ PAT sustained through Early Learning Opportunities Act and continuing as part of The Circle Project.</li> <li>▪ Workgroup supported life skills information and training to counselors. Safe Listening Program developed.</li> </ul>
	Supported First Responder Program to reach domestic violence victims earlier*	Crisis Services HPD One by One DHR	Madison County	1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Program designed during SK/SS proposal preparation.</li> <li>▪ Program expanded from 5 days/2 shifts to a 24/7 operation, based out of the HPD.</li> <li>▪ Responders contact on average 400 domestic violence victims and 125 children a month.</li> <li>▪ HPD reported a 10% reduction in repeat calls in 1999.</li> <li>▪ Developed programs for children exposed to violence and early referrals for children traumatized by domestic violence.</li> <li>▪ First Responders also handed out 911 bags—containing child safety plan brochure, a coloring book, crayons, and a stuffed animal—and information packets.</li> <li>▪ Program expanded to Decatur, AL.</li> <li>▪ Selected as an “exemplary partnership” by Police Executive Research Forum.</li> <li>▪ Sustained with Crisis Services and ADECA funds.</li> </ul>
	Established Man-to-Man parent training for young males in culturally effective ways*	COARMM NCAC Family Services Center	Madison County	August 1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Program initiated with COARMM to provide programs (therapy, parenting classes, GED classes) for noncustodial fathers.</li> <li>▪ Program integrated with Healthy Families at NCAC.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)					<ul style="list-style-type: none"> <li>▪ Support worker now provides home visitation to fathers of children ages 0-3 enrolled in Healthy Families; ensures children are up-to-date with exams, immunizations, and screenings; and provides references to fathers for GEDs, classes, and other services (caseload varied from 2 to 17).</li> <li>▪ Added a Nurturing Fathers Workshop curriculum with Children’s Trust Funds conducted by Family Services Center (N=36).</li> <li>▪ Sustained through funding from AL Fatherhood Initiative to continue work.</li> <li>▪ Trained all Healthy Family workers on <i>Dads Making a Difference</i>.</li> </ul>
	Developed mentoring support for parents of newborns (First Steps)*	NCAC Huntsville Hospital Women’s Center	Madison County	2000- Ongoing	<ul style="list-style-type: none"> <li>▪ Developed new parents' information packets.</li> <li>▪ Identified and trained 28 volunteer mentors for First Steps hospital visitation program.</li> <li>▪ Developed volunteer handbook, addressing communication, infant development, child abuse, parenting, and role as volunteer.</li> <li>▪ Served 203 families.</li> </ul>
	Supported development of mentoring program for African American youth	Big Brothers/Big Sisters Huntsville City Schools The Volunteer Center 100 Black Men of America, Huntsville Chapter	Huntsville	2003	<ul style="list-style-type: none"> <li>▪ Identified African American mentors for single parents and children by networking with churches, businesses, and associations through The Circle Project.</li> <li>▪ Established Wednesday night programs using high school and college students.</li> <li>▪ Established Breakfast Buddies program.</li> <li>▪ Worked with Channel 31 on a regular Friday night news segment, <i>Making a Difference</i>.</li> </ul>
	Increased involvement of youth in civic and service activities	The Volunteer Center Red Cross	Youth in Madison County	2000	<ul style="list-style-type: none"> <li>▪ Matched 529 youth with volunteer opportunities. Number doubled in 2001.</li> <li>▪ Developed Pocket Guide to Youth Services.</li> <li>▪ Established online service to facilitate connections.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)	Established Friends 'N Faith Backyard Club Summer Programs*	Churches throughout Madison county One by One	Low-income children	2000-2003	<ul style="list-style-type: none"> <li>▪ 5 churches expanded vacation Bible schools to children outside the host church (2000).</li> <li>▪ 12 churches held week-long summer programs in 10 neighborhoods serving 681 children and families. (2001, 2002)</li> <li>▪ Developed a brochure that highlights community and school-related projects that congregations can implement.</li> <li>▪ A Faith and Community Consortium spearheaded by the Madison County Commission was established.</li> <li>▪ Planned a program for fall school break (2003).</li> <li>▪ Planned two summer weeklong clubs (2003).</li> <li>▪ Developed a training brochure for Friends 'N Faith Backyard Clubs to support continuation.</li> <li>▪ Program sustained through Interfaith Mission Service.</li> </ul>
Intervention and Treatment Activities	Expanded and supported clinical services for CAN victims and nonoffending parents*	NCAC	Madison County	1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Expanded Adolescent Girls Group (resolving trauma related to sex abuse).</li> <li>▪ Expanded Nonoffending Care Givers Group.</li> <li>▪ Supported therapy to traumatized victims.</li> <li>▪ Sustained by alternate funds.</li> </ul>
	Implemented supervised visitation program (Both Parents)*	Family Services Center District Court	Madison County	June 1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Recruited and trained volunteers, developed evaluation instruments.</li> <li>▪ Established Memorandum of Understanding with DHR and Crisis Services.</li> <li>▪ Developed brochure on appropriate resources</li> <li>▪ Provided services to 50 families in first year, recommended for expansion in subsequent years by Steering Committee.</li> <li>▪ Added new service—mediating visitation with noncustodial fathers through the AL Fatherhood Initiative.</li> <li>▪ Sustained with funding from Children's Trust Fund, United Way, service fees.</li> </ul>



**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Intervention and Treatment Activities (continued)	Implemented in-home supervised visitation program*	Harris Home DHR	Madison County	November 1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Six families provided with in-home supervision.</li> <li>▪ Sustained with DHR funds.</li> </ul>
	Initiated/supported substance abuse program for caretakers in homes where CAN has been identified*	New Horizons	Madison County	June 1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Created dedicated team for families where substance abuse and CAN were present.</li> <li>▪ 19 individuals graduated; 17 were continuing after SK/SS ended.</li> <li>▪ DHR and New Horizons initiated regular meetings between staff.</li> <li>▪ Implemented parenting skills classes for recovering substance abusers.</li> <li>▪ Participants reported reduced stress and more positive home life.</li> <li>▪ Sustained by DHR funds.</li> </ul>
	Established/supported adolescent Sexual Offender Program*	Private therapist	Madison County	May 1998-December 2002	<ul style="list-style-type: none"> <li>▪ 30 juveniles enrolled over life of program.</li> <li>▪ 11 graduates.</li> <li>▪ 6 dropouts or dismissed (nonattendance or noncompliance); 1 recidivist.</li> <li>▪ 12 enrolled at end of program.</li> <li>▪ Not currently sustained.</li> </ul>
	Supported Options Program, a mentoring program in juvenile delinquency facility	Neaves Davis Center	Female juvenile offenders (who are also dependent)	1999-2000	<ul style="list-style-type: none"> <li>▪ 3 requested mentors.</li> <li>▪ Training program for volunteers established.</li> <li>▪ 18 females participated in group session.</li> </ul>
<b>Data Collection and Evaluation</b>					
Local Monitoring, Data Collection, and Evaluation	Conducted public opinion survey*	Auburn University, Montgomery	Madison County	December 1997-March 1998	<ul style="list-style-type: none"> <li>▪ Conducted a telephone survey of 400 heads of households in Madison County.</li> <li>▪ Findings shaped the Vision Summit that outlined One by One plans.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
Local Monitoring, Data Collection, and Evaluation (continued)	Conducted community mapping (Study 1)*	University of Alabama, ISSR Local evaluator	Madison County	November 1999-2001	<ul style="list-style-type: none"> <li>▪ Collected demographic, economic, mortality, crime, risk factors, and education data for 1995-2000.</li> <li>▪ Dropped plan to map data in the community; software too expensive.</li> <li>▪ Data used for proposals.</li> <li>▪ Annual indicator data collected by project director and shared with partners as needed.</li> </ul>
	Conducted Neighborhood Research Study (Study 2)*	Local evaluator	3 Neighborhoods in Madison County described as (1) high risk/stable, (2)high risk/little stability, (3) medium risk/stable	November 1999-2004	Research designed to target impact of SK/SS on neighborhood level. Interviews conducted with residents and frontline workers from churches, schools, Housing Authority, community organizations, social service agencies, DHR, NCAC, Crisis Services.
	Conducted First Responder evaluation	One by One Local evaluator	Madison County	January 2001-2004	Funded by BJS in support of SK/SS.
	Conducted Healthy Families evaluation	NCAC University of Alabama, School of Social Work	Meadow Hills families	December 2002-2003	Funded by BJS in support of SK/SS.
	Conducted “client-friendly” reviews of social service facilities (including telephone services, physical environment, client opinions, and publications)*	One by One Better Business Bureau The Volunteer Center	Clients of social service agencies	2000-2003	<ul style="list-style-type: none"> <li>▪ Conducted surveys with three agencies to identify strengths and weaknesses.</li> <li>▪ Developed and presented information and recommendations on effective strategies in a workshop.</li> <li>▪ Linked one agency with a university to help address weakness identified in review.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
Local Monitoring, Data Collection, and Evaluation (continued)	Conducted needs assessment of residents of area targeted for Family Resource Centers <ul style="list-style-type: none"> <li>▪ Councill Court</li> <li>▪ Lincoln Park</li> </ul>	One by One	Residents of Councill Court and Lincoln Park Public Housing	2000  2002	Based on findings from door to door survey, several agencies agreed to provide services at FRC at Councill Court FRC.  In door-to-door survey, Lincoln Park residents identified interests in educational opportunities, job training, and programs for children. Also indicated basic needs for clothing and food.
	Conducted training on developing measurable outcomes*	One by One Local evaluator National evaluator	Nonprofit agencies, agencies serving children and families	1999	Held all-day training program (N=13).
	Conducted funding surveys on <ul style="list-style-type: none"> <li>▪ CAN</li> <li>▪ domestic violence</li> <li>▪ substance abuse*</li> </ul>	One by One	Agencies serving children and families	December 1999-2004	<ul style="list-style-type: none"> <li>▪ Identified sources, amounts, and gaps in funding.</li> <li>▪ Identified new grant resources.</li> <li>▪ Identified overlaps in agency funding.</li> </ul>
	Conducted survey of religious leaders on family strengthening needs in the community*	NCAC	Church leaders in Madison County	1999	Identified training needs and church resources available.
	Developed a Community Report Card*	MC3	Madison County	2001-2002	<ul style="list-style-type: none"> <li>▪ Developed an MC3 subcommittee of 12 people representing 10 agencies.</li> <li>▪ Report Card emphasizes measurable results in improving children’s lives. Indicators included health, social and economic well-being, safety, early child care and development, status of teens, education, and mental health.</li> <li>▪ Data were provided on local, state, and national levels.</li> <li>▪ Community gave itself a C rating and MC3 used data to set priorities.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
Local Monitoring, Data Collection, and Evaluation (continued)	Conducted Client Leadership Survey*	One by One The Volunteer Center	Social service agencies in Madison County	June 2002	Sent to ascertain opinions and experiences with clients serving on agency boards. Findings used by The Volunteer Center to develop training and work with agencies for placement.
	Conducted Policy Analysis*	One by One	Madison County	2003-2004	<ul style="list-style-type: none"> <li>▪ Tried to survey 10 agencies about their policies (administrative, intake, referrals, records, confidentiality, service provision, security, staff, and training) , but they did not respond due to funding cuts and staffing cuts.</li> <li>▪ Rethinking how to approach this activity.</li> <li>▪ Working with MC3 to develop a cross-agency Children’s Budget.</li> </ul>
	Conducted Interagency Communications Survey*	One by One NCAC	Social service agencies in Madison County	2003	Ten agencies surveyed; respondents included executive and frontline staff. Findings anticipated for fall 2003 and will be used to develop a plan to improve interagency communication.
MIS Development/ Information Sharing	Develop case tracking system for the MDT	One by One NCAC Crisis Services	MDT members/agencies	2000-Ongoing	<ul style="list-style-type: none"> <li>▪ Purchased software for handling MDT cases.</li> <li>▪ Received TA through One by One to develop cross-agency case management system.</li> <li>▪ Conducted technology inventory.</li> <li>▪ NCAC developing a CAC case management system.</li> </ul>
	Identify barriers to information sharing*	Legal Services Crisis Services NCAC HPD	MDT members/agencies	1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Legal Services reviewed legislation.</li> </ul>
Multisystem Case Analysis	Conducted analysis of 1997 MDT cases across agencies*	Local evaluator	Law enforcement DHR DA’s Office CAJA District Court Circuit Court Crisis Services	2000-2004	Conducted analysis of MDT cases, collecting information from all agencies involved in the case (DHR, law enforcement, MDT, Circuit Court, District Court, CAJA, and Crisis Services). Findings not available as of June 2003.

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information</b>					
Prevention Education/Public Awareness	Expand community knowledge of services/resources available*	One by One Crisis Services	Madison County	1998-2003	<ul style="list-style-type: none"> <li>▪ Published Youth Yellow Pages in two versions, one for students grades 7-12 and one for professionals working with youth.</li> <li>▪ Purple Pages workgroup developed a concept voiced at a Vision Summit to present information on service agencies in the phone book. BellSouth accepted the idea and published the phone books with new pages in January 2003. Youth Services Council verified the data for inclusion. Crisis Services and Youth Services Council are responsible for future updates. Newspaper and television coverage heralded the first publication.</li> <li>▪ <i>Resources 101</i> developed to introduce new agency staff to community resources. Program provides a mini-library of resource materials, a demonstration of the Crisis Services web page, and review of the community calendar. DHR and Healthy Families workers required to take class as part of new employee training. Program is now held monthly. Other attendees include Huntsville Hospital Dialysis Unit, substance abuse professionals, day care centers, representatives of Girl Scouts, social service agencies, informal community groups, Oakwood social work students, DHR, representatives of the faith community, colleges, support group for parents of children with developmental delay, local nurses association. Effort sustained through alternate funding.</li> <li>▪ Conducted Teen Think Tank with Community Partnership for Youth.</li> <li>▪ Developed programs/campaigns to support Child Abuse Prevention Month.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information (continued)</b>					
Prevention Education/Public Awareness (continued)		Crisis Services		1998-Ongoing	<ul style="list-style-type: none"> <li>▪ Established Internet linkages.</li> <li>▪ Set up information kiosks/computer centers for accessing resource data. Kiosks are currently open in Social Security Administration building, Council Court Public Housing, a WalMart, public library, Public Health Department, and Mental Health Center. 17 more kiosks (by December 2003) and 27 dedicated computer workstations (by April 2004) will be located in grocery stores, DHR, and other public housing communities.</li> <li>▪ Kiosks registered 58,099 hits in the first months of operation.</li> </ul>
	Develop/implement an annual awards program for family-friendly businesses*	Huntsville Times Chamber of Commerce NCAC One by One Teledyne Brown Engineering Lockheed Martin Space Systems North Alabama Chapter of the Society for Human Resource Management	Businesses within Madison County	1999-2004	<ul style="list-style-type: none"> <li>▪ Developed criteria for awards.</li> <li>▪ First awards made in 2000. 17 nominations in 2000, 21 in 2001, 35 in 2002, and 24 in 2003.</li> <li>▪ In the first 4 years of the program, 7 of the 15 winners have also won state awards.</li> <li>▪ Award banquets receive a great deal of publicity and have increased in attendance from 100 to 200 people.</li> <li>▪ Began developing criteria for a family friendly business designation.</li> <li>▪ Conducted workshops on developing family friendly businesses.</li> <li>▪ Developed workshops that emphasize how implementing family friendly policies pays off in recruiting, retaining, and maintaining more productive employees.</li> </ul>

**Table B-1. Overview of Implementation Activities for Huntsville One by One Program (continued)**

(\*Indicates activities supported by One by One Resources)

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information (continued)</b>					
Prevention Education/Public Awareness (continued)	Establish information-sharing strategies*	One by One Crisis Services AL Cooperative Extension System AL A&M University	Staff and volunteers of agencies that serve children and families in Madison County	November 1998-Ongoing	<ul style="list-style-type: none"> <li>▪ One by One publishes <i>Streetwise</i> newsletter and community calendar. Increased circulation from 250 to 500 agency professionals and community activists.</li> <li>▪ Made newsletter and calendar accessible on a number of local web sites as well as that of the NCAC and Crisis Services.</li> <li>▪ Efforts sustained through alternate funding.</li> <li>▪ Developed cookie swap concept in which cookies are swapped for information.</li> <li>▪ Attendance grew from approximately 30 agencies/75 people to 44 agencies/165 people.</li> <li>▪ Effort received good newspaper coverage including full page ads which increased attendance.</li> <li>▪ Public service announcements developed, and radio and TV interviews conducted.</li> </ul>
	Implement public information campaign “BUILDING CommUNITY”*	MC3 Crisis Services NCAC	Madison County	2001-2002	<ul style="list-style-type: none"> <li>▪ Efforts coordinated among Crisis Services, MC3, and One by One for a single publicity campaign on resources, the Report Card, Child Abuse Prevention Month, Sexual Assault Prevention Month, the Women’s Expo, and Victim’s Rights Week/Take Back the Night, information kiosks.</li> <li>▪ Animated public service announcements between March and June (in movie theaters and on TV).</li> <li>▪ Radio public service announcements developed.</li> <li>▪ 20 billboards publicized the message.</li> <li>▪ Distributed safety tips through the SCAN program.</li> <li>▪ Co-sponsored by Children’s Trust Fund.</li> </ul>

**Table B-2. Community Needs Identified at Vision Summit but Outside the Scope of One by One**

Community Need	Implementing Agency	When Initiated	How the Need Was Addressed
<b>Needs Addressed Through Other Programs</b>			
Provide adequate public transportation, including expanding city school bus service	Family Services Center Huntsville School System	1999-Ongoing	<ul style="list-style-type: none"> <li>▪ Workgroup was established and developed a list of funding priorities that was provided to local officials.</li> <li>▪ Family Services Center began helping low-income people secure cars through a Ways to Work grant through USDOT. Low interest loans are granted to individuals to buy cars or trucks. Case managers are assigned to families receiving loans to help ensure payment of the loan (N=86 loans).</li> <li>▪ Family Services Center also manages a program giving donated cars to needy families (N=31).</li> <li>▪ Beginning spring 2003, one Huntsville elementary school had bus service provided on a trial basis. Depending on response, the program may be expanded.</li> </ul>
Independent Living Program	DHR	1999-Ongoing	DHR has an ILP that has approximately 30 slots available in any year.
Introduce a Family Coaching program	New Futures	1999	New Futures began a family coaching program, but it closed due to lack of volunteers.
Establish alternate educational opportunities, with structured individualized education plan. Create basic standard of education for all persons, with flexible means of meeting that standard	Huntsville City School System NCAC	1999-2000	Huntsville City School System established a Strategic Planning Project, creating a system for making individualized achievement plans as one of 10 strategies. NCAC participated on the project committee.
Expand community policing	Huntsville Police Department	2000-Ongoing	The police department addressed this need in part by moving to a precinct-based system.
DHR-driven followup program for agencies and professionals involved with families	NCAC	2000	The Multisystem Case Analysis is expected to inform this issue, providing information on feedback to agencies and success of child placement. No other activity in this area has occurred.



**Table B-2. Community Needs Identified at Vision Summit but Outside the Scope of One by One (continued)**

Community Need	Implementing Agency	When Initiated	How the Need Was Addressed
<b>Needs Addressed Through Other Programs (continued)</b>			
Develop adequate housing for low-income families, particularly teen mothers and their children	Downtown Rescue Mission	2001	<ul style="list-style-type: none"> <li>▪ A shelter for homeless women and their children was completed in 2001. Space for 100 families was available.</li> <li>▪ Huntsville Housing Authority renovated several public housing communities.</li> <li>▪ Habitat for Humanity and faith-based groups offered housing programs for low-income families.</li> </ul>
Expand/initiate Early Head Start and Even Start Programs	Huntsville School System NCAC Huntsville/Madison County Adult Education Community Action Agency Alabama A&M University	2002	Huntsville City School System started an Even Start family literacy program. The program is housed in three elementary schools. Parents as Teachers, initiated by One by One, was a partner serving the families.
Training for unemployed/underemployed youth	Chamber of Commerce Madison County Commission Alabama Career Center Christian Women’s Job Corps	2002	<ul style="list-style-type: none"> <li>▪ Project Launch was initiated to address this community need. The program targets out-of-school youth ages 16 to 21 and offers (1) one-on-one counseling to develop emotional and social skills, (2) information resources, (3) job coaching, and (4) job matching services.</li> <li>▪ Welfare-to Work initiative (US DOL).</li> <li>▪ North Alabama Skills Center.</li> </ul>
Conduct a job readiness survey		2002	Not deemed necessary as of 2000 because of work ongoing with Welfare-to-Work programs.
Provide therapeutic foster care	AGAPE Therapeutic Programs	1999	Two agencies provide therapeutic services to emotionally and behaviorally challenged foster children.
Build welfare reform programs into general support service for low-income families seeking independence	Madison County Commission	2002	Welfare-to-Work Initiative

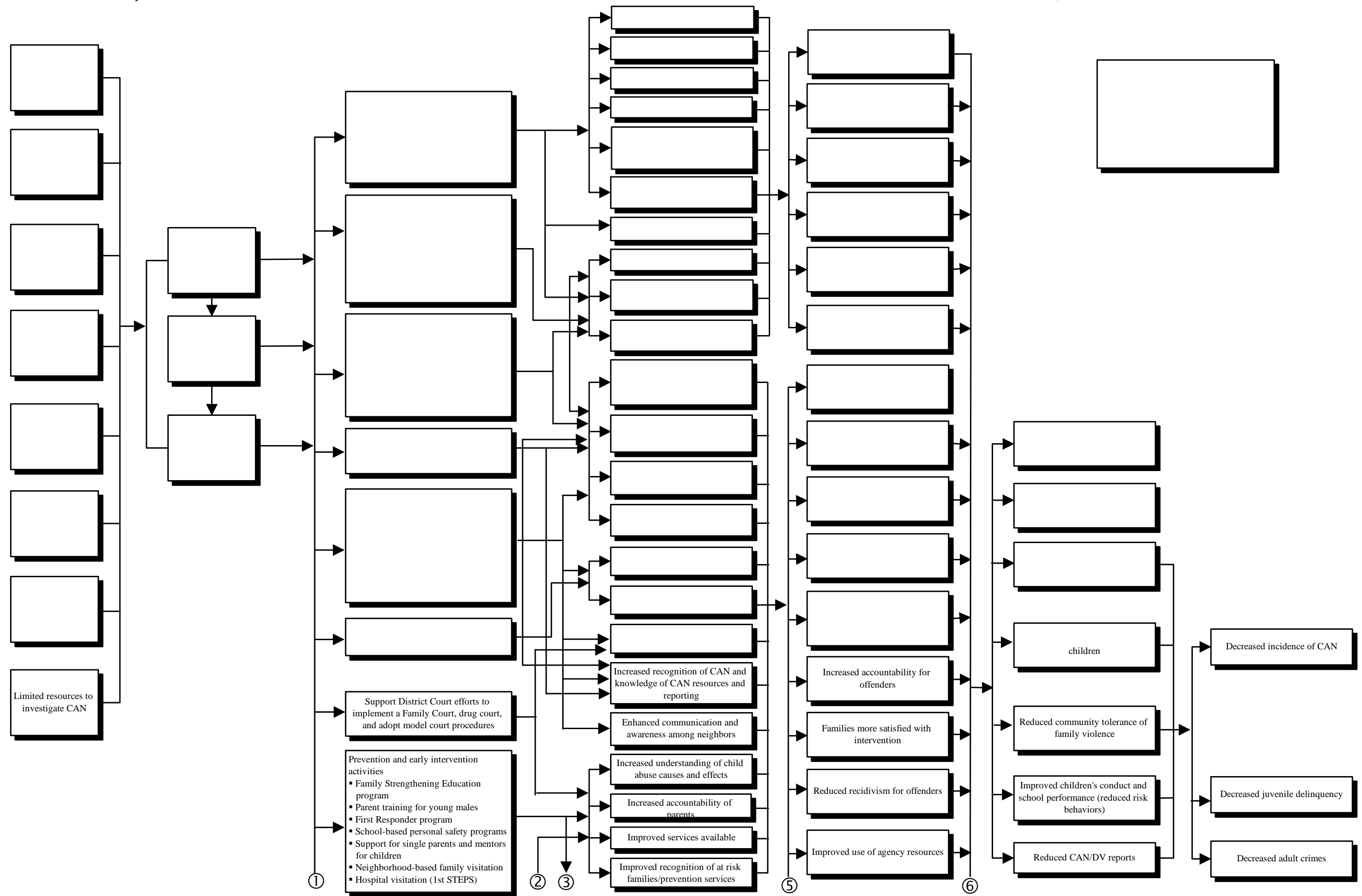
**Table B-2. Community Needs Identified at Vision Summit but Outside the Scope of One by One (continued)**

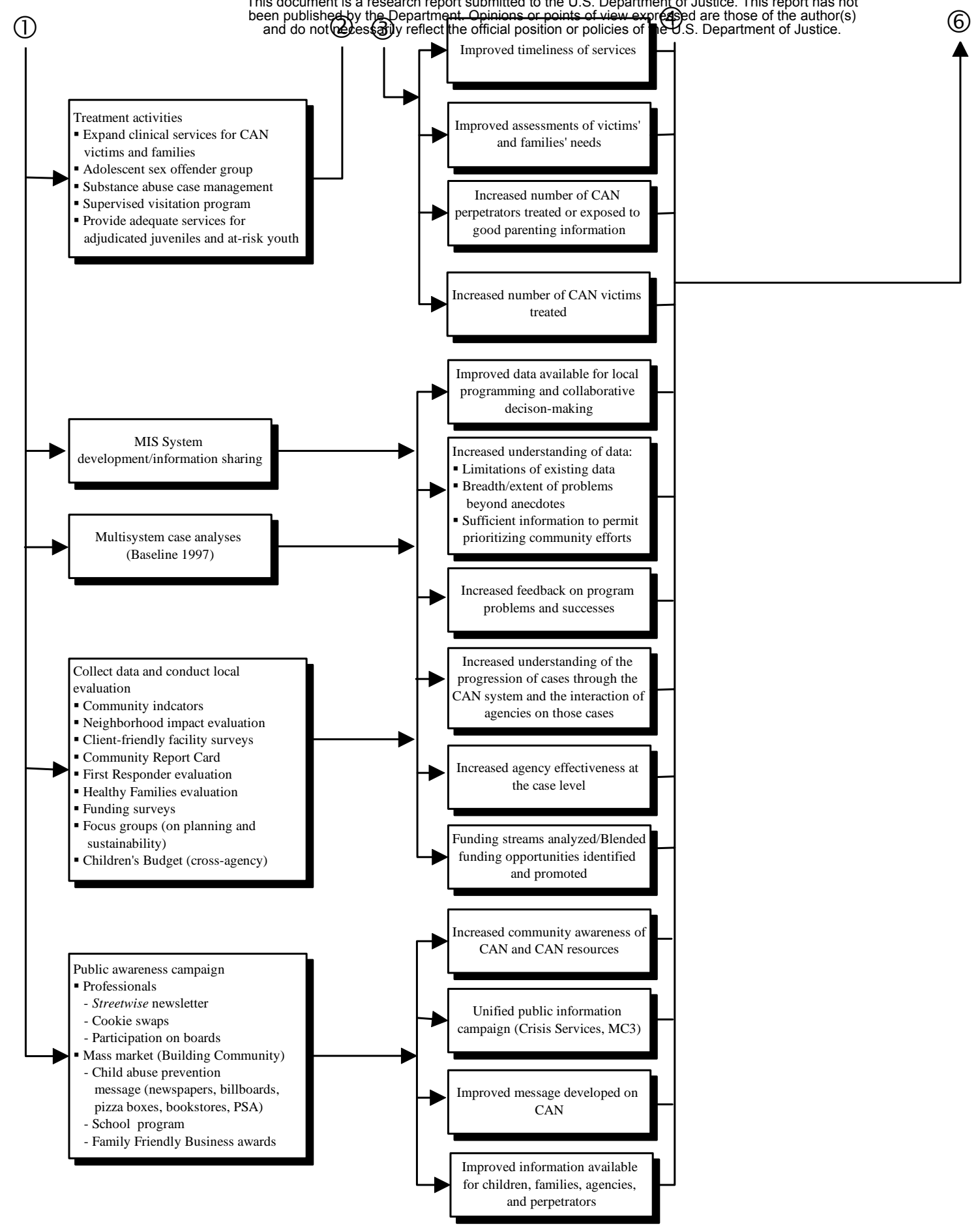
Community Need	Implementing Agency	When Initiated	How the Need Was Addressed
<b>Needs Addressed Through Other Programs (continued)</b>			
Provide flexible funds to support families separated by child abuse and neglect and other forms of violence	DHR Neaves-Davis Center	2002	Ad hoc committee set up to examine ways to address this issue.
<b>Needs Referred to the State</b>			
Variable response model of child protection	State DHR		The responsibility for such an undertaking rests with the state. One by One made recommendations for changes and provided input, but did not feel that other efforts fell in their realm. State DHR study group established.
<b>Needs for Which No Lead Agency Was Identified</b>			
Crisis or respite nurseries			No lead agency identified to take this effort on.
Identify and support members of the community to work with at-risk families, focusing on neighborhoods with high rates of truancy and child abuse (Neighborhood Granny Program)			No lead agency identified for this effort.
Specialized clinical services for children/youth with serious emotional disturbance	Chi-Ho Mansion		Implemented a program to address this need, but the program closed October 2001 in part because of high cost of residential care. No other lead agency found to take on this effort.
Family advocate program			No lead agency found to take on this effort.
Residential treatment for severely emotionally disturbed youth			No lead found to take on this effort.
Family group conferencing			No lead agency found to take on this effort.

<b>Table B-2. Community Needs Identified at Vision Summit but Outside the Scope of One by One (continued)</b>			
Community Need	Implementing Agency	When Initiated	How the Need Was Addressed
<b>Needs for Which No Lead Agency Was Identified (continued)</b>			
Create a local residential program for substance abusing parents and children			No lead agency identified. Drug Court has also identified this as an issue and continues to look for alternatives and options.

**Figure B.1. Huntsville Logic Model Implementation Phase**

Inputs → Activities → Immediate Outcomes → Intermediate Outcomes → Long-Term Outcomes





## **4. KIDSAFE, Kansas City, Missouri**

The Kansas City Safe Kids/Safe Streets site is a project of the Heart of America United Way (HAUW) that targeted specific ZIP Codes in Kansas City, Missouri. The initial grant, funded through the Office of Justice Program's (OJP) Executive Office for Weed & Seed (EOWS), totaled \$923,645. Through five grant periods spanning 8 years, the project has received a total of \$3,347,290. KIDSAFE is currently in its fifth grant period, with the expectation that the project will end on September 30, 2004. Locally, the project is known as KIDSAFE, and that is how it will be referenced in the remainder of this report.

### **Project Setting**

#### **Characteristics of the Community**

The KIDSAFE target area falls within the larger community of Jackson County, Missouri. In 2000, Jackson County's total population reached 654,880, with about one-quarter of this population under the age of 18.<sup>74</sup> Jackson County is more racially and ethnically diverse than the rest of Missouri. Its population is 23 percent African American and 5 percent Hispanic population.<sup>75</sup> Jackson County is predominantly urban and suburban. In 2000, single females headed 9 percent of all families in Jackson County.<sup>76</sup> In 1999, 12 percent of all persons lived below the poverty line.<sup>77</sup>

#### ***Child Abuse and Juvenile Crime Statistics***

Since 1998, reports of alleged child abuse and neglect remained steady in Jackson County. In 1998, 11,360 children were reported as abused or neglected. Through 2002, the annual number of children reported usually stayed above 11,000. However, the number of children substantiated with a probable cause determination declined markedly. In 1998, the maltreatment of just over 2,000 children resulted in a probable cause determination, indicating that the child

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<sup>74</sup> Census 2000, U.S. Census Bureau.

<sup>75</sup> *State and County QuickFacts*, U.S. Census Bureau.

<sup>76</sup> *Profile of General Demographic Characteristics, Census 2000*, U.S. Census Bureau.

<sup>77</sup> *State and County QuickFacts*, U.S. Census Bureau.

## KIDSAFE, Kansas City, Missouri

had been a victim of child abuse and neglect. A downward trend in probable cause determinations started in 1999 when Missouri adopted a dual track system for child abuse and neglect reports. Instead of automatically investigating every report, reports were evaluated and the more serious allegations assigned to the investigation track and the less serious allegations assigned to the family assessment track. As a result of this dual track system, the number of probable cause determinations declined to around 1,200 per year. At the same time, the availability of a formal family assessment track resulted in a dramatic increase in the number of children reported in this category. In 1998, just over 1,000 reported children received family assessments. By 2002, the number had climbed to over 6,800. (See Table 4-1.)

	<b>1998</b>	<b>1999</b>	<b>2000</b>	<b>2001</b>	<b>2002</b>
Reported children (total)	11,360	10,189	11,238	11,532	11,140
Reported children (per thousand)	67.4	60.4	67.2	68.3	66.0
Probable cause children (total)	2,222	1,281	1,323	1,274	1,182
Probable cause children (per thousand)	13.2	7.6	7.9	7.6	7.0
Family assessment children	1,043	5,794	7,216	6,815	6,873
Family assessment children with services needed	333	2,419	3,278	3,145	3,002
Child fatalities	7	8	5	2	11

Source: *Missouri Child Abuse/Neglect 1998-2002 Annual Reports*, Missouri Division of Family Services.

Juvenile crime declined in Jackson County during the late 1990's before leveling off. The total number of family court referrals for juveniles went from 8,278 in 1997 to 6,351 in 2001, a decline of 23 percent. Included in the total number of referrals are those for abuse, neglect, or custody issues. These referrals declined by 41 percent from 2,210 in 1997 to 1,308 in 2001. (See Table 4-2.)

	<b>1997</b>	<b>1998</b>	<b>1999</b>	<b>2000</b>	<b>2001</b>
Total family court referrals	8,278	7,368	6,417	6,376	6,351
Total law violation referrals	4,807	4,243	3,955	3,736	3,940
Total status offense referrals	1,261	1,078	1,000	1,045	1,070
Total abuse, neglect, and custody referrals	2,210 (27%)	2,047 (28%)	1,462 (23%)	1,595 (25%)	1,308 (21%)

Source: *Missouri Juvenile Court 1997-2001 Annual Reports*.

## **The Formal Child Protection System**

The mandate for the child protection system in Jackson County comes from state law. The Missouri child abuse statute defines child abuse as “any physical injury, sexual abuse, or emotional abuse inflicted on a child other than by accidental means by those responsible for the child’s care, custody, and control.” The neglect definition includes the “failure to provide, by those responsible for the care, custody, and control of the child, the proper or necessary support, education as required by law, nutrition, or medical, surgical, or any other care necessary for the child’s well-being.” The statute requires mandated reporters to report to the state hotline when they have reasonable cause to suspect child abuse or neglect or when they have observed conditions that would reasonably result in child abuse or neglect. The statute specifies different categories of professionals as mandated reporters, including health care, mental health, social work, education/child care, and law enforcement professionals. Further, the statute requires any persons with responsibility for the care of children, Christian Science practitioners, probation/parole officers, commercial film processors, and Internet service providers to report.

The formal system that handles reports of child abuse and neglect in Kansas City comprises four major agencies: the Division of Family Services (DFS, now called the Children’s Division), the Family Court, the Kansas City Police Department (KCPD), and the Jackson County Prosecuting Attorney’s Office (PAO). Jackson County also has a Child Protection Center (CPC) that plays an important role in the handling of certain cases. The following section provides a brief explanation of the role and structure of each of these agencies.

### ***Division of Family Services (now called the Children’s Division)***

At the state level, DFS operates a statewide 24-hour central hotline for all reports of suspected child abuse and neglect. All calls are then forwarded from the hotline to the appropriate area office. In Jackson County, the area offices are structured geographically, meaning that the ZIP Codes targeted by KIDSAFE are all served by the same area office. Shortly after the KIDSAFE award, a legislative initiative set up the dual-track system for child abuse and neglect reports. The new system requires DFS to investigate reports of abuse or neglect when criminal charges might be filed but allows a Family Assessment/Family Intervention Determination in reports that would not be considered a criminal violation if they were true. The new system then tailors the DFS response to a referral depending on the assigned track:



## KIDSAFE, Kansas City, Missouri

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- **Investigation track.** Reports on the investigation track receive intensive investigation before a probable cause determination is made. For sexual abuse cases, DFS investigators are mandated to work with the police on the investigation. In other cases, DFS workers use their discretion to call in law enforcement if it appears that criminal conduct was involved.
- **Assessment track.** Reports on the assessment track are assigned to a worker who conducts an assessment of the situation before deciding whether services are needed.

DFS pilot tested the new dual track system starting in May 1998 in the area office that serves the KIDSAFE target area. The system went statewide later that year.

In Jackson County, DFS faces special challenges related to a lawsuit filed in the late 1970s on behalf of children in DFS custody. Since 1983, the Jackson County DFS has operated under a Consent Decree. In order to exit the Consent Decree, the Jackson County DFS must meet certain requirements related to caseloads, service provision, planning, placement, licensing and certification, adoption, MIS, and other areas. As part of the effort to fulfill the requirements, HAUW's vice president for community initiatives (and the KIDSAFE lead manager) convenes the Jackson County Consent Decree Problem Solving Forum that meets periodically to discuss issues related to exiting the Consent Decree.

During the KIDSAFE project, the Jackson County DFS underwent a number of structural changes in response to pressure to reform the agency after notable incidents like child fatalities. In May 2000, the Family Services Division and the Income Maintenance Division merged under the same director. This restructuring was later abandoned, and the two Divisions were again placed under separate directors in May 2001. With each change came a new local DFS director. The director was replaced again in July 2002 and once more in August 2003. The frequent turnover in the leadership of the Jackson County DFS office made KIDSAFE's work particularly challenging. With each new director, the project had to explain the project and its goals and secure the director's commitment to actively participate.

At the state level, the Department of Social Services (DSS), of which DFS is a part, also experienced administrative changes, including the resignation of the DSS director in December 2002 and the appointment of a new director in February 2003. In late 2003, the state DFS office underwent reorganization in response to the death of a child in foster care the preceding year. Specific changes included the creation of a separate Children's Division and the establishment of an ombudsman position in the Office of Administration.

### ***Child Protection Center***

Jackson County's Child Protection Center (CPC) was designed to provide a coordinated approach to investigating child maltreatment while remaining sensitive to the emotional needs of the children. By providing a central place for interviewing children, the CPC reduces the number of interviews needed. After receiving a referral, a team that consists of a DFS investigator, a police detective, and the CPC social worker conducts a joint interview of the child and then works together to coordinate the investigation and prosecution of the case. Originally, the CPC only received referrals of child maltreatment reports alleging sexual abuse and of child witnesses to homicides. Complementing the reorganization of DFS service delivery under the dual track system in May 1998, the CPC expanded its caseload to accept all sexual abuse and serious physical abuse cases from the Jackson County area.

When KIDSAFE began, the CPC worked out of Children's Mercy Hospital. Partway through implementation, the Family Court became the fiscal agent for the CPC. Around that time, the parties involved formed a Governance Group to provide oversight to the CPC on policy and programming issues. The Governance Group meets quarterly and consists of representatives from DFS, Family Court, KCPD, and the PAO. The CPC responds to the broader community through a separate Advisory Council that meets periodically to provide input to the Governance Group. KIDSAFE's lead manager chairs the Advisory Council. The Governance Group appoints other members of the Advisory Council. Recently, the CPC budget suffered cutbacks resulting from the statewide budget crisis. At the same time, demand for CPC services continues to grow. Starting with the fourth grant period, KIDSAFE earmarked \$20,000 from the project's budget to cover sexual abuse assessments and forensic interviewer training. KIDSAFE's contribution to the CPC helped leverage funds from local foundations and other sources.

### ***Family Court***

The Family Court (part of the Jackson County Circuit Court) has jurisdiction to hear child abuse and neglect cases. The Family Court also handles juvenile delinquency, status offenses, and termination of parental rights (TPR), in addition to domestic relations, child support, and protection orders.

## KIDSAFE, Kansas City, Missouri

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The Family Court system in Missouri is unusual in that the court has a “juvenile officer” who is responsible for prosecution of dependency cases, status offenses, and juvenile delinquency. The juvenile officer or the Children’s Division can file TPR petitions. In Jackson County, the juvenile officer delegates responsibility to a legal services unit composed of attorneys. In dependency cases, the staff attorneys from this unit review DFS referrals to Family Court to determine whether there is sufficient evidence to prosecute. When requested by the Children’s Division, the staff attorneys also determine whether there is sufficient evidence to authorize temporary protective custody. If the juvenile officer has placed the child into temporary protective custody and the staff attorney files a petition, a judge determines whether there is sufficient probable cause to enter an ex parte order of protective custody. The judge bases this decision on the DFS investigation and other information the attorney presents to the court. If the child is removed from the home and taken into custody, then Family Court involvement continues with a protective custody hearing within 14 days of removal, an adjudication hearing within 60 days of removal, and a dispositional hearing within 90 days of removal. If the petition is sustained, the Court enters a dispositional order placing the child in the custody of the Children’s Division. The Court then holds regularly scheduled reviews to discuss case status and permanency planning.

The Family Court’s Office of the guardian ad litem (GAL) provides representation for dependent children in Family Court. In addition, a Court Appointed Special Advocates (CASA) program and a pool of private attorneys handle a small number of cases. The guardians make recommendations about placement, services, and visitation once probable cause to keep the child in custody has been established. For juvenile delinquency cases, the Family Court also maintains a staff of deputy juvenile officers who provide assessment and treatment services for children already on probation or in residential treatment programs. The Court operates two large residential treatment facilities and several group homes. The Court also has prevention and diversion services to identify and refer at-risk children for voluntary services. Recently, the Court started a voluntary Truancy Court Program in cooperation with the PAO, the judges of the Sixteenth Judicial Circuit, and several school districts.

Like, DFS, DSS, and the CPC, the Family Court underwent organizational changes during KIDSAFE’s implementation. Starting in 2002, the Family Court designed and implemented a judicial case management system to expedite the processing of dependency cases. The system went on-line in January 2003, and early indicators showed a marked decrease in the number of cases open for lengthy periods. In 2003, the Family Court took over responsibility for

processing juvenile apprehensions by the KCPD Juvenile Section. The Family Court accomplished this by installing a computerized booking system that allowed it to book and do intake on juvenile arrestees at its facility. The new arrangement eliminated duplicate intake processes at the two agencies and freed KCPD detectives to focus on child maltreatment cases (see the following section for more information on KCPD's reorganization).

### ***Kansas City Police Department***

The KCPD is divided into five police precincts. The three ZIP Codes targeted at the beginning of the KIDSAFE project all fell within the East Patrol Division. When the target area expanded to encompass the Weed & Seed project area, the new territory fell within the Central Patrol Division. Within each division, community police officers work at Community Action Network centers or serve as Community Action Team officers assigned to other specific areas.

KCPD's Family Violence Unit and Juvenile Section serve all five police precincts. At the beginning of the project, the Family Violence Unit was divided into a Sex Crimes Section and a Domestic Violence Section, with the Sex Crimes Section responsible for cases of child sexual abuse. The Juvenile Section handled cases involving juvenile and adult perpetrators of other types of child abuse and neglect. Starting in 2003, the Juvenile Section began handling all child maltreatment cases. By moving all child maltreatment cases under the same unit, KCPD hoped to improve communication between agencies, to allow detectives to learn special skills related to investigations involving children, and to reduce the caseload of detectives in the Sex Crimes Section. With the shift in responsibility, the Juvenile Section moved under the Family Violence Unit (which was then renamed the Special Victims Unit).

Once KCPD receives a call about child abuse and neglect, a patrol officer is dispatched to the scene to take a report. At this time, the officer makes a decision about whether to file state- or municipal-level charges. Felony-level offenses are always state cases handled by the Jackson County prosecutor. For state charges, a detective from the Juvenile Section responds to the scene and handles the ongoing investigation. With misdemeanors, officers have discretion to opt for city prosecution and handle the case themselves.

KCPD and DFS are required to coordinate activities for all calls alleging child maltreatment. The law enforcement co-investigation checklist states, "all suspected child abuse cases reported to law enforcement will be reported to the DFS." The checklist also details the

## KIDSAFE, Kansas City, Missouri

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nature of each agency's involvement in the investigation with specific steps to be followed for each case.

### ***Jackson County Prosecuting Attorney's Office***

The Sex Crimes Unit of the Jackson County PAO handles the majority of adult criminal cases involving physical or sexual abuse of a child, including all child homicide and other felonies. As noted earlier, some of the less serious cases bypass the PAO because the police may file general ordinance summons in Municipal Court. Once the PAO receives a case, an attorney files a complaint and issues a warrant. After the defendant's arrest, a judge presides over an initial arraignment to set the bond. At this point, the case is ready for a preliminary hearing. The case is then sent to the Grand Jury unless the defendant waives his/her right to a preliminary hearing. Upon an indictment from the Grand Jury, the case is placed on the trial docket at the Circuit Court.

During the project, the prosecuting attorney position turned over three times.

### ***The Formal Treatment System***

The formal treatment system in Jackson County provides a number of services for victims of child maltreatment investigated by DFS. For example, victims of sexual abuse receive treatment in Jackson County through not-for-profit providers as well as private contractors. Children receiving attention through the DFS assessment track are also routinely offered services through the formal treatment system.

For juvenile sex offenders, the juvenile officer established a Sexual Offender Response Team. This multidisciplinary team, comprising law enforcement, attorneys for the juvenile officer, a member of the CPC, a victim services representative, and members of the Family Court's sexual offender treatment program, reviews all sexual offenses referred by law enforcement before or just after the filing decision. In all filed sexual offense cases, the Family Court's Pathways Program provides in-depth social and risk assessments, probation services, and residential treatment for adolescent sex offenders. The Pathways Program refers juveniles not requiring residential treatment to community mental health agencies and private mental health providers. The formal treatment system also includes some private providers. The Metropolitan Organization to Counter Sexual Assault (MOCSA) offers 24-hour crisis intervention. In addition,

MOCSA runs a number of support and therapy groups for rape victims, sexually abused children and their families, and adult survivors of sexual abuse.

### ***Prevention and Early Intervention System***

A number of prevention and early intervention efforts exist in Jackson County and the KIDSAFE target area. The Family Court maintains a staff of deputy juvenile officers who are stationed in all middle schools in Jackson County. These officers identify at-risk children and refer them to community-based programs for services. Another key part in the prevention system is the Caring Communities program funded by the Local Investment Commission (LINC), a statewide initiative to support citizen-driven community collaborative efforts in the areas of children and families, aging, health care, housing, school-linked services, welfare reform, and business development. The Caring Communities program represents a multiagency approach to serving children and families by responding to community needs, pooling resources, and integrating services across education, health, mental health, and social services agencies. There are several Caring Community sites in KIDSAFE's target area. An advisory committee at each site works to develop activities for students and families. The Caring Community sites offer a number of services for families, including pregnant teen programs and caregiver training. Kansas City also has a dedicated sales tax for drug abuse prevention, prosecution, and treatment. The tax revenue funds grants to nonprofit treatment agencies and crime-prevention organizations. As described later, the project worked to expand the services available through the prevention and early intervention system.

### **Changes Over Time**

As described above, the agencies involved in the formal child protection system changed structurally and organizationally during the course of the KIDSAFE project. In addition, events in the community affected the project's environment. In particular, a rash of child fatalities in 1999 (including the deaths of two triplets in the KIDSAFE target area) shocked the community and increased the pressure to expedite improvements in child protection. KIDSAFE played an important role in how these efforts unfolded.

In the immediate aftermath of the fatalities, the state DFS director attended a KIDSAFE Council meeting to share the steps that DFS was taking in response to the fatalities. Following this presentation, the Council agreed that KIDSAFE could play an important role in

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strengthening the child protection system by reviewing the statutes, policies, and procedures of agencies directly involved in investigating and assessing child abuse and neglect. Subsequently, the Governor charged LINC with developing a plan for the community's response to the fatalities. A third entity, the Jackson County Child Fatality Review Panel, chaired by KIDSAFE's lead manager, had a statutory role to play in responding to the child abuse fatalities.

Initially, having all three entities involved in reforming the system proved awkward, as each group attempted to define its role. After some conflict and confusion, the groups agreed to have KIDSAFE and the Child Fatality Review Panel tackle the formal system issues while LINC focused on community involvement. KIDSAFE's response resulted in the formation of several committees, including one to look at revisions to the screening criteria for the dual track system, one to review draft legislation, and one to create a document outlining a philosophy for the community child protection system.

The work of the first two committees helped shape new state legislation passed during 2000 that changed in the policies and procedures governing how DFS investigates child abuse and neglect cases. Meanwhile, the committee working on the philosophy for a community child protection system agreed to develop a Jackson County Abuse Neglect Response Team to coordinate efforts across the different agencies. The planning group for the Response Team originally hoped to co-locate assessment, investigation, and prosecutorial staff from the key public sector agencies so that they could jointly develop and implement community standards for handling child abuse and neglect. By mid-2000, problems arose as DFS, with the support of LINC, withdrew from the Response Team planning group. To help ease some of the resultant tensions around the planning, KIDSAFE stepped back from its leadership role and allowed key players from the public agencies to drive the planning effort.

Subsequently, the planning group backed new legislation passed in August 2000, which authorized a Jackson County pilot project that required community-based public and private organizations to jointly formulate a community response to child abuse and neglect, including hotline investigations, assessments, and dispositions. By formalizing the Response Team in a statute, the planning group aimed to ensure DFS' involvement. Following passage of the legislation, the planning and implementation proceeded slowly with a somewhat narrower vision and, for a period, without DFS. Rather than working toward co-location and joint decisionmaking, the Response Team decided to focus on information sharing. By the end of

2000, all of the agencies except for DFS had agreed to begin case conferencing early the next year.

To help spur further progress in changing the community child protection system among the various groups, KIDSAFE invited the Family Court's juvenile officer and director of family court services and the LINC commissioner to the Safe Kids/Safe Streets (SK/SS) cluster conference in Washington, DC, in November 2000. After this experience, the LINC leader returned to Kansas City and convened a group of key agency personnel and community representatives to examine how agencies that respond to child maltreatment interface with each other and the community. At the time, some of the participants expressed concern about the purpose of the group and how it fit into other efforts (including the planning group for the Response Team). Regardless, before anything substantive was accomplished, DFS experienced another change in leadership. Since the new DFS director had no prior relationship with LINC, the joint SK/SS-LINC effort fell apart. LINC no longer played a significant role in this particular effort to reform the local child protection system. Further, the Response Team and the CPC became the vehicle through which the community planned to drive changes in the system. Eventually, DFS, KCPD, PAO, and the Family Court all actively participated in the Response Team. Details on the implementation of the Response Team are described below as part of the discussion of KIDSAFE's system reform activities.

## **Introduction to the Project**

### **Grantee**

The HAUW is the largest of five United Way agencies serving the greater Kansas City area. In 2003, these agencies formed a regional alliance, and the annual campaign became a collective effort that raised more than \$8 million for health and human services in the six-county area. These funds support more than 180 agencies.

HAUW has a long history of involvement in child maltreatment issues. Prior to KIDSAFE, its primary child abuse initiative was the Metropolitan Child Abuse Network created in 1981. This group facilitated regular contact among all of the major stakeholders in child abuse and neglect issues. The Network was the central planning, coordinating, networking, and advocacy body on child abuse issues for the metropolitan area. It had a large council that set organizational policy. HAUW also established a partnership with the Kansas City Community



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Foundation to sponsor the Partnership for Children, a 10-year initiative focused on advocacy in the areas of health, child care, safety and security, and education. HAUW continues to serve as the facilitator and mediator for the Consent Decree under which the Jackson County DFS operates.

### **Development of the Safe Kids/Safe Streets Proposal**

HAUW's Metropolitan Child Abuse Network submitted the proposal. The HAUW convened its first planning meeting in March 1996, after noting the SK/SS initiative in the Office of Juvenile Justice and Delinquency Prevention's (OJJDP) proposed program plan. HAUW invited the four Jackson County agencies with formal responsibility for child abuse and neglect cases, later known as the Public Sector Partners (PSP), to join the collaboration: DFS, the Family Court, the PAO, and the KCPD. HAUW also included a cross-section of other agencies, community groups, and foundations with an interest in child welfare.

The initial collaboration divided into five task groups, involving about 75 people: target area selection, systems reform, management information systems, training and professional development, and multicultural considerations. The systems reform group operated as a de facto steering committee to develop the proposal.

### **The Original Vision**

The planning group proposed HAUW as the lead agency for the KIDSAFE project. As such, HAUW would hire the project director, provide fiscal management for the project, and facilitate the collaborative effort among the partner agencies. While HAUW already had a child abuse collaborative in the Metropolitan Child Abuse Network, it decided to form a separate collaborative for the KIDSAFE effort because KIDSAFE differed from the work of the Network in two key ways. First, the target area for KIDSAFE would be much smaller than the area covered by the Network. Second, it would be necessary to involve different types of agencies and people in the planning process, including community residents and neighborhood groups from the target area.

While all members of the Metropolitan Child Abuse Network were invited to join the new collaboration and the proposal listed more than 35 organizational partners, membership in the collaboration began with the directors of the four PSP agencies (DFS, KCPD, Family

Court, and the PAO). The new collaboration expected to work through the multi-agency planning groups outlined above, which would continue as project advisory committees. These committees would include everyone who participated in the proposal planning plus others who would represent the target community. HAUW also proposed convening a KIDSAFE Council to govern all aspects of the project.

As stated in the original proposal, the KIDSAFE implementation strategy encompassed five objectives:

- Create standard case protocols among the mandated public agencies;
- Share case information;
- Change community norms;
- Train staff and residents; and
- Focus existing prevention and intervention resources.

These objectives targeted the community-wide problems defined by the collaboration during the proposal planning process. The most notable of the identified problems included a lack of communication among the four agencies with responsibility for child abuse and neglect cases; a separation between those four agencies and the health, mental health, youth, and employment sectors; a lack of parenting skills; and a lack of training on identification of child abuse. To address these problems, KIDSAFE envisioned a two-pronged initiative that consisted of community-based services to provide prevention and early intervention for at-risk families coupled with system reform efforts to change the way cases that enter the formal child protection system are handled. These efforts would be complemented by training and public education to improve the identification and assessment of child maltreatment by agencies and the community.

The collaboration selected the three target area ZIP Codes because of their high numbers of child abuse and neglect reports. Twenty-four percent of all substantiated reports of child maltreatment in Jackson County in 1996 came from these three ZIP Codes. The three ZIP Codes were diverse racially but tied together by poverty. Each ZIP Code contained several neighborhoods, but the populations had decreased in recent years. Other problems in the target area included a large percentage of rental properties and issues with slumlords and drug houses. There were a number of recreation centers in each of the ZIP Codes, but no formal recreation

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sites such as bowling alleys or movie theaters. Each ZIP Code had active neighborhood associations and numerous churches.

The initial KIDSAFE grant request totaled \$924,485. Local cash and in-kind contributions in the amount of \$296,553 brought the total project budget to just over \$1.2 million for the first grant period. Less than one-third of the project budget was earmarked for project staff; almost two-thirds of the project budget was directed toward subcontracts and consultants. This latter part of the budget included money for a “Prevention, Intervention, and Treatment” fund to contract for services, professional development and training activities, a management information system, and the local evaluation. The proposed budget allocated \$85,000 for the local evaluation, which would be contracted to the Institute for Human Development at the University of Missouri, Kansas City.

### **Waiting for a Decision**

In October 1996, HAUW learned that OJP had received hundreds of proposals and informed the planning group that the chances of an award were slim. Nonetheless, the group decided to continue meeting. Members realized that with or without Federal dollars, the collaborative approach offered significant hope for systems change. Thus, while waiting for a decision on the proposal, the agencies involved took some significant steps inspired in part by the KIDSAFE proposal. These included supporting DFS’ application to make the area office serving the target area (Uptown Office) a pilot site for the state's new dual-track system and the placement of two outbased workers in the Uptown area to provide prevention services. In addition, this time period saw reorganizations at PAO and Family Court that were supported by KIDSAFE collaborators.

### **Notice of Grant Award**

HAUW received notification of its selection in March 1997. Federal officials required only minor changes to the proposed budget, resulting in a final award of \$923,645. As in the other SK/SS sites, \$75,000 of the award was allocated to planning. Within the Department of Justice, responsibility for monitoring and funding the project was assigned to EOWS. EOWS already funded a regular Weed & Seed initiative in Kansas City, through a \$125,000 grant to the KCPD.

Prior to the award, EOWS contacted HAUW to discuss the requirement that the target area for the proposed SK/SS project overlap with the target area of the existing Weed & Seed project. As described earlier, the ZIP Codes targeted for the SK/SS project had a high incidence of child abuse and neglect; the existing Weed & Seed project did not cover these ZIP Codes, nor did the actual Weed & Seed target area correspond to areas of highest need on available indicators. Further, the request to change the target area was politically awkward, as there had already been some outreach to the target communities.

Discussions of the issue continued for months among HAUW, EOWS, and KCPD, extending well into the planning phase. Meanwhile, however, the KIDSAFE award documents were signed. They made no mention of the target area or any other requirements unique to Weed & Seed.

## **The Planning Phase**

### **Overview of Planning Phase**

Formal planning for KIDSAFE began in late spring 1997, shortly after Kansas City received notice of its selection. Staff originally envisioned an 8-month planning process, culminating in submission of an Implementation Plan on February 1, 1998. Although KIDSAFE met this schedule, the Federal review process took months longer than expected, largely because of negotiations on integrating local Weed & Seed efforts. Prior to granting formal approval, however, OJP released a small portion of the implementation funds in the summer, allowing the project to begin recruiting the staff needed for implementation.

KIDSAFE obtained formal approval on September 30, 1998, after discussions and correspondence between Weed & Seed and project staff. Despite the delays, Kansas City had begun many implementation activities that could be initiated without project funding. This makes the distinction between the planning and the implementation phases somewhat arbitrary for KIDSAFE. Table 4-3 shows the project timeline from proposal planning through approval of the Implementation Plan.

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**Table 4-3. Timeline of Events During Planning Phase**

<b>Time</b>	<b>Event</b>
<b>1996</b>	
March	HAUW convenes proposal planning meeting
September	HAUW submits proposal
<b>1997</b>	
March	HAUW receives notification of grant award KIDSAFE names PAO and Family Court Liaisons
May	OJP holds kickoff meeting
July	KIDSAFE hires project director
August	EOWS conducts site visit on Weed & Seed issues Committees convene for planning process
September	OJP technical assistance meeting on technology/MIS
<b>1998</b>	
February	KIDSAFE submits draft Implementation Plan
March	OJP technical assistance meeting on team building/accomplishments EOWS conducts site visit on Weed & Seed issues
May-July	OJP and KIDSAFE correspond about draft Implementation Plan
June	OJP releases portion of implementation funds for project staff
July	EOWS consultant conducts site visit on Weed & Seed issues
August	KIDSAFE submits MIS plan, training plan, and interim evaluation report KIDSAFE convenes first Council meeting
September	KIDSAFE hires community coordinator EOWS approves Implementation Plan
November	OJP technical assistance meeting on systems change, administrative requirements, accomplishments

### Structure and Process for Planning

To plan the project, HAUW reconvened the collaborators in August 1997 and reactivated three of the proposal development committees—those covering Systems Reform, MIS, and Professional Development/ Public Awareness—and added a fourth planning committee on evaluation. As before, the core group consisted of the PSP agencies. A representative from each PSP agency sat on each committee, with the System Reform Committee acting as the de facto steering committee to which other committees reported.

Although the project planning committees did not involve agency heads, many participants held relatively senior positions with significant responsibilities in their agencies—heading up offices or divisions. In addition to the members from the four principal agencies, the committees included representatives from the GAL, CASA, CPC, the Departments of Health and Mental Health, LINC, Caring Communities, local foundations, and several private providers of

direct services for children and families. KIDSAFE welcomed anyone with an interest in the project to participate.

Staff originally intended to hold a kickoff event in the target ZIP Codes to introduce the project and enlist the community's involvement in the planning phase. KIDSAFE deferred this plan initially because of ongoing discussions with EOWS over the proposed target area. Later, KIDSAFE abandoned this approach entirely based on the advice of several organizations already active in the target community. They warned KIDSAFE that previous Federal projects (including Weed & Seed) had raised false expectations and alienated many residents. Instead, they suggested that KIDSAFE downplay publicity and recruitment until it received approval of the Implementation Plan and defined the community strategy. Following this advice, the new project director relied heavily on one-to-one outreach to community leaders and organizations during the planning phase.

Through most of the planning period, the committees met about once a month. For the most part, participants viewed the KIDSAFE committee meetings as very productive. During the planning phase, KIDSAFE also met with representatives of nonprofit and grassroots organizations, developed a resource directory, and prepared a training directory for KIDSAFE collaborators. While developing the Implementation Plan, the planning committees drew on information compiled or collected by the local evaluator. As part of a community needs assessment, the local evaluator surveyed professionals and grassroots organizations. To further identify community concerns, the local evaluator also distributed a survey for community residents.

Local reaction to the planning process was very positive. The project had brought together the stakeholders in an open forum, facilitated dialogue among agencies that did not usually interact, and kept everyone informed of progress. Over 150 public and private agency staff had been involved. None had received any KIDSAFE funding during the planning process despite the heavy investment of time from some agencies. Bringing the agencies together at regular committee meetings had already been a catalyst for a number of new initiatives such as creation of a specialized liaison position in the PAO, pilot testing of DFS' dual track system, and expanding the role of the CPC.

The national evaluation team visited twice during the planning phase. A contractor selected by OJP also visited during the planning period to assess the project's general technical

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assistance needs. Staff also participated in monthly all-site conference calls and three face-to-face meetings of the sites and the OJP team.

### Special Issues During the Planning Phase

The Kansas City site faced unique challenges related to the need to coordinate the KIDSAFE project with the local Weed & Seed effort. During the extended planning process, the Federal project officer made two visits and a Weed & Seed consultant made one visit to Kansas City. These visits were primarily aimed at reconciling the Weed & Seed target area with the KIDSAFE target area and bringing the Weed & Seed strategy into the KIDSAFE project. By the time the Implementation Plan was submitted, KIDSAFE believed that EOWS had agreed on how to handle the discrepancy between the KIDSAFE and Weed & Seed target areas. Rather than change the target ZIP Codes defined in the original KIDSAFE proposal, the existing Weed & Seed project would expand into the East Patrol Division to include these areas. For its part, KIDSAFE stuck with its chosen target area in the East Patrol area. However, the planned KIDSAFE Council would include representatives from both areas, and the system wide reform activities would address the needs of both.

During the planning process, the KIDSAFE project director forwarded all minutes of committee meetings to EOWS and had numerous telephone conversations with the Federal project officer, during which she was assured that the project was on track. In other respects, KIDSAFE staff did not seek or receive OJP input on policy and project directions while developing the draft Implementation Plan.

### From Draft Implementation Plan to Final Implementation Plan

After pulling together and incorporating the work of the committees, HAUW's managing director of child welfare initiatives and the project's MIS consultant wrote and submitted the Implementation Plan on February 1, 1998. Locally, the members of the KIDSAFE Council signed off on the Implementation Plan. As described in the plan, the major elements of the KIDSAFE project included:

- **Governance.** As envisioned during the planning phase, a 25-member KIDSAFE Council would govern the project. The plan listed the categories of stakeholders to be represented, a diverse group that included public and private agencies, foundations, businesses, the faith community, neighborhoods, and

youth. A representative of the Weed & Seed project would serve on the Council to maintain a close relationship between the two projects. KIDSAFE planned to convene the Council quarterly to provide guidance for specific project activities.

- **Staff.** In addition to the current staff and consultant team, KIDSAFE planned to add three new full-time positions, a community coordinator, a DFS liaison, and a KCPD liaison. KIDSAFE also planned to subsidize 75 percent of the salary for the PAO liaison, a position filled by the PAO's lead representative to KIDSAFE. The Family Court agreed to fully fund the KIDSAFE representative to work on project activities.
- **System reform and accountability.** The Implementation Plan focused heavily on activities that would change how the formal system handles child maltreatment. Some of the planned activities included conducting multidisciplinary case reviews, developing new policies and procedures for handling certain cases, supporting professional development efforts, and improving communication and information sharing across agencies. Some system reform changes required KIDSAFE support rather than direct outlays of KIDSAFE funds, including the expansion of the scope of cases sent to the CPC, the establishment of a Family Court Drug Court for drug-abusing parents, and the implementation of the new dual track system at DFS. In fact, some of these were already under way by the time KIDSAFE submitted the Implementation Plan.
- **Continuum of services.** Complementing these system reform activities, the Implementation Plan described a major effort to involve the target ZIP Code areas in planning for their own needs and creating better bridges to the formal system. At least three neighborhood hubs would be established in the designated target area and provided with grant funds to initiate prevention, intervention, and treatment services organized and run through these hubs.
- **Data collection and evaluation.** KIDSAFE's Implementation Plan named the local evaluator, and the budget allocated considerable resources to this component. KIDSAFE also outlined plans for improving capabilities for electronic information sharing among PSPs.
- **Prevention education and public information.** The Implementation Plan also included plans for prevention and public awareness activities.

There were some missing pieces, however. The Implementation Plan noted that the project lacked clear roles for the Department of Mental Health and the domestic violence community. Many collaborators also acknowledged the limited involvement of neighborhood residents during the planning process. Although they understood and accepted the reasons for initially downplaying the community component, collaborators felt eager to involve the community in planning the project activities.



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KIDSAFE received the first written comments on the draft Implementation Plan in early May, followed by an expanded set of comments later in the month. Overall, the feedback was much more substantive and detailed than the team expected. The majority of the comments requested more information about the various plans or more background on the current situation. Other comments contained specific directives on components to add to the plan.

KIDSAFE found the extensive comments related to Weed & Seed the most troubling. KIDSAFE thought that the Weed & Seed issues had been resolved during the planning phase with the plans for reconciling the target areas. The comments on the draft Implementation Plan suggested otherwise. Among other things, EOWS asked KIDSAFE to (1) show integration of the governance structure into the Weed & Seed strategy and (2) provide a plan and timeline for implementing a Weed & Seed strategy in the KIDSAFE target area. By this time, KIDSAFE had also learned that a separate KCPD application for Weed & Seed funds, which was expected to support KIDSAFE-related police training in the target area, had been rejected. If KIDSAFE wanted to do special police training around child abuse and neglect issues, then the funding needed to come from the project budget.

At this juncture, it became clear to the KIDSAFE team that it had never fully understood EOWS' requirements. Nonetheless, the project director faxed a response to the initial draft of questions that attempted to show the compatibility of KIDSAFE's approach with Weed & Seed and answered the other specific questions. This letter also stated that the project would seek alternate funding for the police training plans that EOWS had disapproved.

OJP sent another letter in mid-June with its formal comments on the Implementation Plan. Once again, EOWS asked the project to integrate a Weed & Seed strategy into KIDSAFE and to complete a timeline describing the steps that would be taken to implement the strategy. This letter also expressed concern over the neighborhood services aspect of the project. KIDSAFE responded on July 1 with a memo identifying the members of the KIDSAFE Council, describing the Council's roles and responsibilities and outlining the timeline for convening the Council and selecting the neighborhood hubs. The memo underscored the role of the neighborhood hubs as the focal point of KIDSAFE's Weed & Seed strategy. To satisfy EOWS concerns about the governance structure, KIDSAFE planned to merge the previous Weed & Seed Steering Committee with the KIDSAFE Council.

KIDSAFE received another letter in July that asked it to address some further issues. For example, EOWS asked the project to put together a training plan and to submit an interim evaluation report describing progress on process measures and specific plans for conducting the local evaluation. At about the same time, OJP sent a Weed & Seed consultant to Kansas City to help resolve the confusion over a suitable Weed & Seed strategy. In fact, this added more confusion, because the consultant recommended against the plan to merge the KIDSAFE and Weed & Seed Councils.

KIDSAFE responded to the July letter in August, enclosing its MIS and training plans and its interim evaluation report. In this letter, KIDSAFE also responded to two specific issues, explaining how the project would identify and treat youth in the justice system who had been victims of child abuse and reiterating the KIDSAFE neighborhood-services strategy. KIDSAFE later informed EOWS that it expected to follow the Weed & Seed consultant's advice regarding governance; the project planned to proceed with forming a KIDSAFE Council with Weed & Seed representation but would not form a joint council.

While all of these issues were being addressed, KIDSAFE requested and received preliminary implementation funding for two of the liaison positions (DFS and KCPD) and for the community coordinator position included in the Implementation Plan.

KIDSAFE received final approval for its Implementation Plan on September 30, 1998. At the time, OJP was still reviewing the training and MIS plans and withheld approval to expend \$100,000 until these had been approved. To some extent, EOWS' concerns about KIDSAFE's integration with Weed & Seed extended into implementation. However, the project managed to move forward with fewer obstacles once the Implementation Plan was approved.

## **Project Implementation**

### **Overview of Implementation Phase**

#### **Budget**

For KIDSAFE, official authorization to expend implementation funds came during the summer with the release of the first \$75,000 for staffing. This was followed by approval to spend all but \$100,000 of the remaining dollars in September. In reality, though, there was no

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sharp line between “planning” and “implementation.” As mentioned earlier, the KIDSAFE collaborators proceeded with many activities long before getting the Federal go-ahead because they did not need the project money to do them and saw no reason to wait.

Implementation funding from Grant 1 carried the project through September 1999. For the project’s second grant, spanning the period from October 1999 to June 2001, KIDSAFE received another \$923,645. Starting with the third grant period in July 2001, the KIDSAFE award was reduced to \$500,000 per year with two additional awards in that amount coming in July 2002 (Grant 4) and July 2003 (Grant 5).

The budget cut implemented by EOWS in 2001 proved to be a major development for KIDSAFE. As KIDSAFE staff prepared the reapplication for the third round of funding, EOWS informed them that its grant award would be cut by almost half. According to EOWS, KIDSAFE’s total grant award would not be reduced, but rather the project period would be extended beyond the original 5 years. In making the change, EOWS noted that KIDSAFE had not expended all of its funds for the previous grant periods and still had carryover funds.<sup>78</sup>

In fact, KIDSAFE had expected to accelerate spending in subsequent years. The budget cut forced KIDSAFE to reevaluate its plans and refocus its priorities. Table 4-4 shows KIDSAFE’s project budget allocations for three time periods—Grant 1 (the combined planning/implementation phase), Grant 2 (early implementation), and Grant 5 (late implementation). From the beginning, KIDSAFE’s budget demonstrated the project’s commitment to the system reform component. KIDSAFE’s allocation to this component rose from 20 percent in Year 1 to 33 percent in Grant 2. By Grant 5, KIDSAFE’s system reform activities represented 42 percent of the total project budget. Part of this increase stems from the project’s fixed salary costs for the liaison staff in the PSP agencies, who worked on the system reform component. Despite the Federal grant reduction, KIDSAFE retained the liaisons, but they now represented a larger proportion of the budget.

The effects of the reduction in KIDSAFE’s Federal grant are also apparent in the allocations for the different program elements. After the budget cut, the project largely preserved core staffing and system reform activities, while the percentage allocated to the other program elements decreased dramatically. The allocation for the continuum of services component

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<sup>78</sup> It is also worth noting that the size of the SK/SS grant was unusually large for EOWS.

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**Table 4-4. Comparison of KIDSAFE Budget Allocations, Grants 1, 2 and 5: Percentage Distribution<sup>a,b</sup>**

	<b>Grant 1</b> 3/1/97-9/30/99		<b>Grant 2</b> 10/1/99-6/30/01		<b>Grant 5</b> 7/1/03-6/30/04		<b>Percent change</b> <b>in dollar</b> <b>allocations</b> <b>Grant 2 -</b> <b>Grant 5</b>
<b>Program Elements</b>							
System reform and accountability	\$184,979	20%	\$303,805	33%	\$209,648	42%	-31%
Continuum of services	141,887	15	204,653	22	39,000	8	-81
Prevention education/public information	91,202	10	94,173	10	39,157	8	-58
Data collection and local evaluation	190,219	21	117,437	13	71,940	14	-39
<i>Subtotal: Project elements</i>	<i>608,287</i>	<i>66</i>	<i>720,068</i>	<i>78</i>	<i>359,745</i>	<i>72</i>	<i>-50</i>
<b>Staffing and Administrative</b>							
Staff	262,888	28	133,467	14	109,720	22	-18
Administrative	52,470	6	70,110	8	30,535	6	-56
<i>Subtotal: Staffing and administrative</i>	<i>315,358</i>	<i>34</i>	<i>203,577</i>	<i>22</i>	<i>140,255</i>	<i>28</i>	<i>-31</i>
<b>Total</b>	<b>\$923,645</b>	<b>100%</b>	<b>\$923,645</b>	<b>100%</b>	<b>\$500,000</b>	<b>100%</b>	<b>-46%</b>

<sup>a</sup> All figures are based on Westat analyses of the Years 1 and 2 project budget labeled “Years 1 and 2 Combined” (\$934,645 for each year) and the Year 5 project budget labeled “Budget Justification for the Period of July 1, 2003 to June 30, 2004” (\$500,000).

<sup>b</sup> Subgrant activities were allocated according to their primary purpose. However, all subgrants cut across the project elements. For example, all subgrantees were required to provide data for the local evaluation and many subgrantees participated in professional training, a system reform activity.

<sup>c</sup> In Years 1 and 2, the salaries of the project director, managing director, grants officer, administrative assistant and finance associate were allocated to this category. The community coordinator’s time was allocated to the continuum of services component; the training/public awareness manager’s time was allocated to the prevention education and public information component, and the PAO, DFS, and KCPD liaison’s time was allocated to the system reform component. In Year 5, the staff time of the project director, managing director, administrative assistant, and finance associate were allocated to this category. The PAO, DFS, and KCPD liaison’s time was allocated to the system reform component, along with the professional development coordinator’s time.

decreased 81 percent from Grant 2 to Grant 5. At the same time, the budget allocation for prevention education and public information decreased by 58 percent, and the allocation for data collection and local evaluation declined by 39 percent.

However, Table 4-4 does not reflect KIDSAFE’s total budget picture because it only shows the allocation of the Federal grant. With the reduction in grant award beginning with the third grant period, KIDSAFE stepped up efforts to leverage local resources for project activities. Starting with Grant 3, HAUW contributed funds for the Neighborhood Services Initiative (NSI). In addition, KIDSAFE tapped the anti-drug tax proceeds and used funds from the Children’s Trust Fund for prevention education and public awareness activities. These contributions significantly increased KIDSAFE’s overall budget, adding \$145,000 in Grant 3 (increasing the

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total dollars by 29%), \$120,100 in Grant 4 (increasing the total by 24%), and \$63,250 in Grant 5 (increasing the total by 13%).

As reflected in the budget allocations, KIDSAFE's project strategy involved a strong focus on system reform efforts while building a presence in the community through services, public awareness activities, and training. KIDSAFE worked on all four elements as articulated in the Implementation Plan. KIDSAFE's system reform activities focused on changing the way the system handles child maltreatment cases. The continuum of services effort involved a series of grant awards for community-based services in the target area. KIDSAFE's local evaluator began documenting the project during the initial proposal process and continued to implement the local evaluation design throughout implementation. The public education component of the project began by providing information and resources at community events and expanded to include a community grant program.

### Staffing and Management

KIDSAFE staff remained fairly stable over time although there were some shifts in responsibility. KIDSAFE started with a project director and community coordinator both reporting to HAUW's managing director of child welfare initiatives, who served as the KIDSAFE lead manager. During 2000, the project reorganized somewhat by creating two leadership positions: director of administration and director of programs. The former project director continued to serve in a managerial capacity as the director of administration, while the former community coordinator was promoted to director of programs. During 2002, the director of administration resigned. At that time, the director of programs took over her responsibilities with support from the lead manager (HAUW's vice president of community initiatives, formerly the managing director of child welfare initiatives).

KIDSAFE staff also included formal KIDSAFE liaisons for DFS, KCPD, and PAO, housed within those agencies. Originally, the Family Court designated a staff person to act as the Family Court liaison, but that arrangement ended in 1999. The PAO liaison was named in December 1998 and remains with the project. The PAO covered 25 percent of the PAO liaison's salary, while the project fully supported the DFS and KCPD liaisons. The DFS liaison came on board in November 1998; a replacement took over the following year in September. The application and interview process for the KCPD liaison position took longer than expected, so that position was not filled until May 1999.

The project viewed the liaison positions as part of KIDSAFE's system reform agenda. The liaisons provided the agencies with a communication link to other PSP agencies and collaboration members, took responsibility for communication and coordination of services, participated in cross-agency meetings, served on KIDSAFE committees, and assisted with multidisciplinary training. Further into the project's implementation, the DFS and KCPD liaisons moved into more neighborhood-based community-building work, with increased involvement in the NSI and supervision of grantees under the Community Grant program. When the director of programs assumed the project director responsibilities in 2002, the DFS liaison started spending part-time at HAUW to further assist with the community work. From the beginning, the PAO liaison focused her work on the system reform component of the project. Her position as an existing prosecutor from the agency allowed her to retain responsibilities for prosecuting cases and gave her credibility with her superiors. She directed KIDSAFE's involvement in several initiatives and facilitated dialogue between the other PSP agencies. While KIDSAFE originally envisioned the DFS and KCPD liaisons playing a similar role within their respective agencies, the individuals were hired specially for the project and did not have the same authority or responsibility within their agencies to change policies or procedures.

The project relied on its staff and consultants to implement most project activities. However, at various stages of the project, KIDSAFE also retained consultants to assist with specific activities. After helping write the original proposal, the MIS consultant remained with the project during the planning phase. In July 1999, KIDSAFE hired a consultant to serve as the professional development/public awareness coordinator. The following year, since the community coordinator handled most of the public awareness activities, this position narrowed to focus only on professional development and training. By 2002, the responsibilities for this position shifted again when the national technical assistance advisor contracted with KIDSAFE's professional development coordinator to provide locally based technical assistance in support of KIDSAFE's 2002 Training and Technical Assistance Plan.<sup>79</sup> This arrangement continued during the last year of the project.

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<sup>79</sup> Beginning in 1998, OJP funded systems reform technical assistance to each of the SK/SS sites. Originally, the KIDSAFE lead consultant for system reform TA was located in Washington DC, but eventually, at the site's request, the provider contracted with the local consultant who was already working as the project's professional development coordinator.

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### **Project Governance and the Collaborative**

While KIDSAFE involved representatives from key agencies during the planning phase, the formal governing body did not convene until after submission of the draft Implementation Plan in August 1998. In its Implementation Plan, KIDSAFE proposed a governing Council with high-level representatives from all key stakeholder groups to oversee subsequent work. Once established, the membership of the KIDSAFE Council closely followed what the project had proposed by including high-level decisionmakers from public and private agencies, foundations, and community groups. In addition to representatives from the four PSP agencies, the mental health agency and the school district participated. Directors from community and neighborhood groups located in or serving the target ZIP Codes also served on the Council. During the fifth grant period, the Council was co-chaired by the former chair of the Metropolitan Child Abuse Network (who served in this capacity since the project's inception) and by the Mayor's neighborhood advocate (who has served since October 2001 and also represents the Mayor on the Weed & Seed Steering Committee).

Despite some turnover in the individual representatives, there were no major changes in the agencies and organizations with seats on the Council. As gaps were identified, some new members were added to the Council. For example, while a representative from the school district attended the Council meetings, for a long time no one was officially designated to serve on the KIDSAFE Council. This changed in March 2001 when the school district named the director of communications to represent the school district. Likewise, the City Prosecutor's Office was identified as an agency that should have been at the table from the beginning. In January 2001, KIDSAFE staff began efforts to bring this agency into the collaborative.

Within the large and diverse Council, the PSP agencies and the CPC took leadership roles. The Council met quarterly with KIDSAFE staff, and the Council co-chairs set the agenda. Council meetings were largely seen as broad strategy sessions focusing on the project's goals and objectives. The meetings usually involved reports from committee chairs or project staff on the progress of certain activities. KIDSAFE staff used the Council as a vehicle for sustaining connections between key agencies and groups, exchanging information, and advising the project staff. The project also asked the Council for input into the yearly implementation plans and budgets.

KIDSAFE staff engaged the Council in decisionmaking through working committees. Some committees originally formed during the grant application and planning process still functioned and provided direction in the first few years of implementation. The Professional Development Committee helped revise the training plan submitted with the KIDSAFE Implementation Plan and then continued to meet to discuss training priorities and activities. The MIS Committee worked to allow cross-agency access to agency-specific databases. The project also formed new committees when needed. To support KIDSAFE's NSI, project staff formed a Funding Oversight Committee to review grant proposals and make funding recommendations. This committee met whenever decisions about the NSI grantees were needed.

Planning and strategizing for KIDSAFE occurred through monthly Management Team meetings attended by KIDSAFE staff and liaisons as well as key staff from the KCPD, the PAO, Family Court, and DFS. The meetings allowed those involved in the project to share information, present problems, and maintain their focus. The Management Team set up strategies and timelines for project activities. To help with strategic planning, KIDSAFE held periodic retreats to allow the Management Team to identify issues related to accomplishing the goals and objectives of the four SK/SS elements. Most KIDSAFE stakeholders agreed that the Management Team rather than the KIDSAFE Council described below drove the decisionmaking process for the project.

### ***Interfacing With Weed & Seed***

The KIDSAFE Council's primary interface with other initiatives came through the KCPD's Weed & Seed project. As described earlier, both the KIDSAFE project and the Weed & Seed project received funding from EOWS and were linked formally through the Weed & Seed Steering Committee. One of the KIDSAFE Council co-chairs served in a leadership capacity with the Weed & Seed Steering Committee, and KIDSAFE staff also sat on that Committee as well as several of its subcommittees. After meeting initially in June 1999, the Weed & Seed Steering Committee convened sporadically. The negotiations with EOWS to coordinate the two projects resulted in expansion of Weed & Seed's responsibilities and enlargement of the Weed & Seed site to cover the KIDSAFE target area. Subsequently, KCPD requested an additional \$100,000 grant from EOWS as well as official recognition for the expanded Weed & Seed area. By February 2000, the Kansas City site had been officially recognized as a Weed & Seed site and the additional grant application approved.



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Throughout the early implementation phase of the KIDSAFE project, Weed & Seed lacked a permanent coordinator, making it difficult to blend the two projects. For the most part, KIDSAFE integrated Weed & Seed into the project by coordinating with community activities. Late in 2001, KIDSAFE participated in meetings to discuss the designation of a new fiscal agent for the Weed & Seed grant and the need to find a new Weed & Seed coordinator. The grant application was completed in June 2002, naming a community group in the target area as the fiscal and coordinating agency. At the same time, a newly retired KCPD major assumed the role of Weed & Seed coordinator.

### **Sustainability Planning**

KIDSAFE's planning for the future of the project began in fall of 2001. In September, KIDSAFE hired a consultant to convene meetings with the PSP agencies and the community to develop specific plans for sustaining the KIDSAFE project. KIDSAFE incorporated the feedback from these meetings into a draft plan, the "KIDSAFE Legacy Plan." The Legacy Plan originally called for the creation of a countywide commission that would include the department head for each of the four PSP agencies. The commission was viewed as a means to institutionalize the collaboration between the agencies and to periodically review the vision for a community response to child protection. The Legacy Plan also outlined the CPC's role as the primary vehicle to implement the vision and sustain KIDSAFE's system reform efforts.

KIDSAFE presented the Legacy Plan to the Council in early 2002. At that meeting, the Council agreed on the value of a body comprising the heads of the PSP agencies to address policy, procedures, and planning for the child protection system. However, many Council members had concerns about the political ramifications of convening a formal county commission. Instead, the Council agreed to form a Governance Group for the CPC that would oversee the operations of the Investigative Collaborative and the CPC. After the Council meeting, KIDSAFE put the larger sustainability planning process on hold while the CPC governance issues were resolved (see the discussion below for more detail on the CPC Governance Group and the Investigative Collaborative).

Once the CPC Governance Group made headway, KIDSAFE's legacy planning process returned to looking at the larger collaboration and child welfare system issues. After nearly a year spent discussing the appropriate vehicle for looking at the broader child welfare

system, KIDSAFE decided to use the Jackson County Community Quality Assurance (CQA) Committee, formed as part of the exit plan for the Jackson County Consent Decree, as the formal body. This Committee, operating since August 2000, was set up to provide independent, community-wide advice and advocacy to ensure that DFS uses best practices to achieve positive outcomes for children and families. KIDSAFE's lead manager chairs the CQA Committee, and KIDSAFE allocated \$10,000 from the Year 5 budget to support a coordinator for the group. In addition to the CQA Committee, the partners established a Problem Solving Forum in 1995 to work on specific issues related to DFS' plans to exit the consent decree. The forum holds bimonthly meetings, also chaired by KIDSAFE's lead manager.

The Legacy Plan also looked at supporting the child protection system by strengthening the individual agencies. These efforts would encompass structured decisionmaking and child welfare accreditation within DFS as well as retaining the KIDSAFE liaison positions within the PSP agencies. The economic climate and budget issues have changed dramatically since the plan was written, however, making it difficult to plan for the future. While the agencies voiced support for retaining the KIDSAFE liaison positions after the grant ends, ultimately, this will depend on agency budgets.

In terms of the continuum of services component of KIDSAFE, the Legacy Plan noted how the project hopes to build the neighborhood services and public awareness aspects of KIDSAFE into HAUW's new strategic plan, which involves an issue-based resource management system. To sustain professional development technical assistance, KIDSAFE focused on helping develop the skills of community partners through such activities as the technical assistance offered to the NSI grantees and the Primer's Training curriculum for grassroots organizations.

Overall, KIDSAFE stakeholders commended the Legacy Plan for laying out realistic and attainable goals and using a community-driven process with input from many perspectives. The planning process helped those involved understand the roles and responsibilities of each agency. While some KIDSAFE stakeholders questioned the commitment of the individual agencies to the Legacy Plan, others noted that all four agency heads were at the table and involved in the planning process.

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### **Activities Implemented During the Safe Kids/Safe Streets Initiative**

Throughout implementation, KIDSAFE worked on all four SK/SS elements. However, the emphasis shifted somewhat over time. The project began with a strong focus on system reform activities. While this area remained prominent as implementation continued, KIDSAFE expanded the services component through the NSI and strengthened the public awareness component through the Community Grant program. From the beginning, KIDSAFE undertook a comprehensive local evaluation. The following sections summarize the most important and enduring activities under each component. Table C-1 in the Appendix provides details on each of KIDSAFE's implementation activities, including a description of the activity along with its target population, duration, and status and accomplishments.

#### **System Reform and Accountability**

After starting several activities in the area of system reform during the extended planning period, KIDSAFE continued to emphasize this project component throughout implementation.

#### ***Multidisciplinary Team Development***

Even before receiving approval of its Implementation Plan, KIDSAFE convened a multidisciplinary Case Review Team to review investigative track cases from the target area. These meetings, chaired by the director of the CPC, brought together representatives from KIDSAFE, the four PSP agencies, and the GAL program. The original purpose of the Case Review Team was twofold: (1) to allow for an exchange of information about particular cases among all of the agencies currently or prospectively involved in the case and (2) to provide a place for systemic problems and procedural obstacles to be identified and addressed. Initially, KIDSAFE encountered difficulties staffing the reviews with the appropriate personnel from the agencies, given the dual purposes. This issue was most problematic for DFS. When the DFS program managers attended, they did not have the case-level information needed to allow the Team to make decisions about the case. However, when the DFS investigators attended, they did not have the authority to change policies or procedures identified by the group. As the meetings continued, concerns also arose over the lack of followup on the cases and the fact that DFS workers often felt that their work was being criticized.

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To address these issues, KIDSAFE convened a retreat in June 1999 to review and clarify the case review process and progress. Later in 1999, the team developed procedures to formally address system reform issues that arose from the bimonthly case review team meetings. Under the new procedures, the Case Review Team identified and prioritized system reform issues that emerged. Separately, a system reform task force made up of senior agency personnel then reviewed the list of issues and recommended actions to address them.

As described earlier, the child fatalities in Jackson County in 1999 prompted a number of efforts to reform the child protection system, including planning for the Jackson County Abuse Neglect Response Team. Formal planning for the Response Team began early in 2000. At the same time, the problems with KIDSAFE's case review process reached a critical level, despite the efforts that came out of the retreat to improve the process. With a new team under development, KIDSAFE agreed to suspend its Case Review Team in mid-2000.

In February 2001, the Response Team began daily staffings at the CPC with representatives from the Family Court, KCPD, and PAO. A few months later, DFS workers began participating on a trial basis, and by the middle of the year, DFS became a full partner. Since then, the Response Team (renamed the Investigative Collaborative) has met regularly to share information and decide how to proceed with the cases. KIDSAFE has continued to play a facilitation role, helping the Investigative Collaborative develop new policies and procedures for bringing cases to the group and for following up on information requests. Over time, the case conferences have evolved into a forum for the involved parties to get information and support from each other and provide a more coordinated approach to investigations. The case conferences also help ensure more thorough and timely investigations by police and DFS and encourage discussion about who is going to do what.

As part of the Legacy Planning process described earlier, the KIDSAFE Council supported the formation of a Governance Group to guide the Investigative Collaborative and the CPC. The Governance Group drafted a Memorandum of Understanding signed by each of the PSP agencies that outlined the purpose and scope of the Investigative Collaborative. The group then developed guidelines for referring cases to the Investigative Collaborative and updated the DFS-law enforcement co-investigation checklist to guide how DFS investigators and law enforcement detectives work together to investigate child maltreatment cases.

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KIDSAFE remains involved with the Investigative Collaborative through the KIDSAFE PAO liaison, who attends the staffings representing her agency and the Governance Group. Further, the CPC Advisory Council, which receives reports on the Investigative Collaborative from the Governance Group, is now chaired by HAUW's vice president for community initiatives (also KIDSAFE's lead manager). More informally, KIDSAFE's work with the participating agencies on other activities allows the project to keep abreast of the Investigative Collaborative's progress and provides opportunities for the key players to interact with each other.

### ***Program/Service Coordination***

To further the project's system reform efforts, KIDSAFE staff served on related committees and task forces in the community. They engaged in such activities as:

- KIDSAFE's lead manager participated in a statewide task force to develop practice standards for the child welfare system (the Best Interest of the Child Task Force).
- KIDSAFE's project director served on a task force to improve services and outcomes for individuals paroled from the Department of Corrections in the target area (Project Connect).
- KIDSAFE's PAO liaison chaired the Task Force for Children, a group that brought agencies together to work on a multidisciplinary approach to children exposed to domestic violence.
- KIDSAFE staff worked with the School Neighborhood Advisory Councils at the Caring Communities sites in the target area to provide prevention materials and participate in awareness fairs.
- KIDSAFE's KCPD liaison began working with the Fighting Back Coalition to reduce substance abuse by youth in Kansas City.
- KIDSAFE staff worked with a community coalition led by Heart of America Family Services to bring the Adults and Children Together (ACT) Against Violence Program to the community. This program provides public awareness of the effects of violence exposure on children.

KIDSAFE plans to continue involvement in all of these efforts during the fifth grant period.

## ***Enhancements to Agency Assessment, Decisionmaking, and Case Processing***

As part of the project's efforts to improve case assessment and decisionmaking, KIDSAFE completed an Educator's Handbook for use by the Kansas City School District. The impetus for this handbook came after the Case Review Team identified some serious problems with mandated reporting by school officials. The Handbook outlines the roles of the educator in child maltreatment and defines responsibilities, policies, and procedures. After a lengthy development period, the school district finally accepted the Handbook. Starting in late 2000, the KIDSAFE PAO liaison conducted training on the Educator's Handbook with counselors, principals, nurses, and individual schools in the Kansas City School District. KIDSAFE made this a higher priority in 2001 based on recommendations of the community, KIDSAFE Council, and staff. To demonstrate the project's renewed commitment, the PAO liaison continued to seek opportunities to train school district staff. Throughout implementation, changes in leadership at the Kansas City School District made it difficult to continue this activity. Nonetheless, KIDSAFE plans to continue offering training to the school district as requested during the fifth grant period.

Another activity in the systems reform arena attempted to change how police handled less serious child maltreatment cases in the target area. Starting in April 1999, KIDSAFE supported the training of several patrol officers to assist detectives from the sex crimes section in investigating less serious child abuse and neglect cases (generally those filed as misdemeanors). Beyond the training, KIDSAFE earmarked some project funds to pay the officers overtime to conduct the investigations. A year into this activity, the project realized that the officers involved were handling fewer cases than originally envisioned. At that time, KIDSAFE negotiated a new contract with KCPD that involved recruiting officers from the entire department with a focus on those already accepted as detectives. The new contract also required that the officers work out of the Sex Crimes Unit and devote a certain percentage of their time each month to the investigations. After another year, the local evaluator surveyed the participating detectives and found that they did not find the investigation assistance from the trained patrol officers useful. As a result, KIDSAFE discontinued this activity in December 2001 and reallocated the funding to other parts of the project.

KIDSAFE worked to make changes in other agencies as well. In October 1999, the PAO liaison began tracking all misdemeanor charges of child abuse and neglect filed in Municipal Court for the target area. This activity stemmed from concerns about these cases

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“falling through the cracks.” The tracking effort revealed that many misdemeanor child maltreatment cases ended in dismissal. After KIDSAFE intervened, the judge who presided over domestic violence cases in the Municipal Court agreed to hear all child abuse and neglect cases as well. In addition, KIDSAFE was instrumental in getting the City Council to vote to support a full-time victim advocate for child abuse and neglect cases in Municipal Court. The KCPD liaison continues the tracking function, keeping a list of Municipal Court cases from the KIDSAFE target area.

### ***Professional Training and Staff Development***

KIDSAFE started looking at professional development during the planning phase. At that time, the local evaluator conducted a training survey to assess the communities’ training resources. KIDSAFE used the survey results to publish its first training directory in early 1998. KIDSAFE periodically updated the training directory throughout implementation and distributed it as a resource for agencies and service providers in the area.

Once implementation officially got underway, the Professional Development Committee met to develop a list of training topics later submitted as the KIDSAFE Training Plan. Following that, the KIDSAFE training agenda remained on hold until the project hired a professional development/public awareness coordinator in July 1999. The coordinator worked with the Professional Development Committee to prioritize the training topics in the original training plan. By the end of the year, the Committee’s work had narrowed KIDSAFE’s professional training agenda to four key priorities—PSP roles and responsibilities, medical aspects of child abuse and neglect, investigation and prosecution of child abuse and neglect, and relationship building with the domestic violence community. KIDSAFE submitted a revised training plan in February 2000 that reflected these priorities. While KIDSAFE reviewed and updated its training plan annually thereafter, the project remained focused on the four priority areas.

In mid-2000, the professional development/public awareness coordinator’s responsibilities were narrowed to focus only on professional development activities. Meanwhile, KIDSAFE merged responsibility for the public awareness activities with the NSI under the leadership of the director of programs. With these shifts, KIDSAFE hoped to strengthen the activities in both areas. As noted above, in early 2002 the coordinator also became KIDSAFE’s lead consultant for the system reform technical assistance that OJP funded for each SK/SS site.

Despite the budget issues described earlier, the professional development coordinator helped KIDSAFE make substantial progress in the four priority areas.

Work on the first priority area, the PSP roles and responsibilities, started in fall of 1999 when the Professional Development Committee began to develop brief video presentations for each of the PSP agencies. The videos included a presentation from the KIDSAFE liaison on the roles and responsibilities of the agency, as well as questions and answers from a studio audience. Late in 2001, KIDSAFE made the completed videos available to the PSP agencies and other interested organizations to provide cross training of new and existing staff. KIDSAFE's professional development coordinator created a training kit to accompany the videos. Currently, the coordinator tracks agency usage of the video presentations.

The second priority area involved training on the medical aspects of child abuse and neglect for DFS staff. Working with Children's Mercy Hospital in late 1999, KIDSAFE facilitated the development of a curriculum that includes 24 hours of training over a 2-year period. Once the curriculum was completed, DFS assumed a leadership role by coordinating the training that began in January 2000 and mandating the multi-session curriculum for its staff. Children's Mercy Hospital provided the instructors. During 2001, DFS opened the training to community members and other interested parties. KIDSAFE's local evaluator documented the positive feedback from the training through surveys. After completing the full training series in November 2002, Children's Mercy, DFS, and KIDSAFE decided to repeat the series beginning in January 2003. KIDSAFE plans to continue supporting this training by providing the evaluation component.

The third portion of KIDSAFE's training agenda involved the investigation and prosecution of child abuse and neglect. To meet this priority, KIDSAFE focused on the police department and the prosecutor's office, with:

- Training for all officers in the KCPD East Patrol Division on the identification of child abuse and neglect, the characteristics of sex offenders who abuse children, the roles of the four PSPs in handling abuse and neglect, and the goals of KIDSAFE.
- Development of special training sessions for the American Prosecutors Research Institute's annual spring seminar on interviewing child witnesses, using medical evidence, and prosecuting child abuse and neglect cases. KIDSAFE also sponsored individuals from the PSP agencies to attend the conference and special training sessions.



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- Quarterly training sessions at KCPD's police academy on basic child maltreatment issues, the roles and responsibilities of different agencies involved with child abuse and neglect cases, and the interface between law enforcement and these agencies in the investigation and prosecution of these cases.
- Orientation sessions for KCPD East Patrol officers on the various grassroots organizations and service providers in the target area.

For its fourth priority area, KIDSAFE worked to establish links and build relationships with the domestic violence community with the goal of developing a multiagency response to domestic violence. This activity began in 1999 when the KIDSAFE PAO liaison chaired a task force that convened to design a multidisciplinary approach to children exposed to domestic violence. The Task Force for Children initially identified the need for cross-disciplinary training to encourage relationships between agencies. KIDSAFE then made this area a training priority.

Until 2001, this training priority moved more slowly than anticipated partly due to the turnover at DFS, which resulted in a suspension of any new training. Once the situation at DFS resolved, the Professional Development Committee outlined training objectives, identified workshop content, and hired a local organization to develop the curriculum and conduct a workshop. The November 2001 workshop was very well attended by staff from a variety of agencies, including DFS, KCPD, the PAO, Family Court, domestic violence shelters, and Children's Mercy Hospital. Workshop participants identified several action steps and established work groups to continue the effort. Since then the work groups have made substantial progress.

One work group put together and submitted a DIVERT grant proposal to the Violence Against Women Office. While the proposal was not funded, the participants agreed that the collaboration and cooperation necessary to complete the proposal would not have been possible prior to KIDSAFE.

A second work group focused on the Green Book recommendations, a national model initiated by the U.S. Department of Health and Human Services to create a coordinated and consistent response to co-occurrence of child abuse and domestic violence. During summer of 2002, the work group sponsored a series of brown bag lunches to encourage widespread discussion of the Green Book Initiative and held follow-up working lunches to prioritize the Green Book recommendations into short- and long-term goals. The KIDSAFE PAO liaison led

this effort by chairing the Green Book Steering Committee. Starting in fall of 2002, the group worked with a strategic planning facilitator to plan a Green Book Initiative Leadership Team and committee structure to address the recommendations. KIDSAFE supported this effort by contracting with a local consultant to establish the Leadership Team, using funds from the national SK/SS technical assistance coordination contract. The efforts of this work group have emerged as a major activity for both KIDSAFE and the larger community. During Year 5, KIDSAFE plans to continue as a strong supporter and facilitator of these activities.

The third work group focused on addressing ways for domestic violence shelters to collaborate in pursuing professional development and technical assistance in the areas of diversity awareness and cultural competency. As part of this effort, KIDSAFE met with one of the domestic violence shelters to discuss and share training curricula and cultural competency self-assessment resources. The shelter conducted a self-assessment in fall of 2002 to help develop culturally competent services and promoted culturally competent programs and services in its annual strategic plan. Through this work group, KIDSAFE partnered with the Women's Mosaic Network (a coalition of domestic violence agencies) to sponsor a conference on responding to the needs of women from culturally diverse backgrounds. KIDSAFE anticipates further work in this area through the continued efforts of the Green Book Initiative.

KIDSAFE's commitment to the priority areas outlined in its training plan went beyond local training. Throughout implementation, KIDSAFE provided financial support for PSP agency staff to attend regional and national conferences to improve their knowledge and skills. Toward the end of the project, KIDSAFE shifted focus from professional training to community training. These efforts are described later under the prevention education and public information component.

### ***Changes in Agency Policies, Guidelines, or Procedures***

A big part of KIDSAFE's efforts in the area of systems reform involved working on policy and procedural changes in specific agencies.

- **Family Court Drug Court.** Early in the implementation phase, the Family Court KIDSAFE liaison helped establish a Drug Court within the Family Court. The specialized court provided treatment to drug-addicted parents whose behavior harmed their children. Child dependency cases remain an integral part of Drug Court and represent the vast majority of all filed cases.

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Throughout implementation, the PAO liaison filed drug-exposed-infant cases in the Drug Court. After successful completion of the treatment program, the cases were dismissed. If parents did not follow the treatment plan, then the case was referred to the PAO for criminal prosecution.

- **PAO Restitution Therapy Program.** KIDSAFE worked to change how the PAO handled certain sexual abuse cases by supporting the Restitution Therapy Program. The program offered intensive restitution therapy as part of the perpetrator's probation in an effort to divert some perpetrators from prison into long-term treatment. KIDSAFE originally funded the Restitution Therapy Program as part of the NSI. Since the program related more to case processing than neighborhood services, KIDSAFE moved it under the system reform budget in 2001. Despite repeated efforts by the PAO liaison to train prosecutors on the benefits of restitution therapy for qualified individuals, the program continued to experience problems getting enough referrals. When funding for the project ended in June 2002, KIDSAFE decided not to renew its financial support.
- **DFS structured decisionmaking.** Early in 2001, KIDSAFE supported two system reform efforts within DFS. After the state DFS director approached KIDSAFE about contributing to a structured decisionmaking project in Jackson County, the KIDSAFE Council agreed to allocate \$10,000 to the effort. In addition, KIDSAFE requested and received an additional \$10,000 through the SK/SS national TA coordination grant. This effort resulted in new procedures and policies related to two critical points in the system: handling hotline calls and screening reports on child maltreatment. KIDSAFE actively participated on the statewide task force that developed and tested the tools. After the DFS staff were trained, the tools were implemented in Jackson County in fall of 2002, with statewide implementation completed the following year.
- **DFS child welfare accreditation.** Also in 2001, KIDSAFE provided \$13,000 to help with the state's ongoing effort to receive child welfare accreditation. The goal of the accreditation process is to create high-quality best practice standards for child welfare agencies. DFS needed financial assistance to continue this effort after a state budget shortfall. KIDSAFE's contribution supported a site visit to Jackson County by the state-level individuals involved in the accreditation effort. After state budget cuts, additional site visits were suspended, and the timeline for receiving accreditation was significantly delayed.

KIDSAFE also worked to develop multidisciplinary responses to certain types of cases through the development of protocols or practice guidelines, including:

- A protocol for child abuse investigations that involved school staff;
- A protocol for the co-investigation of child sexual abuse cases;
- Procedures for filing charges in drug-exposed-infant cases;

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- Procedures for DFS workers assigned to KCPD's Drug Abatement Response Team;
- A protocol for children found in methamphetamine sites;
- Procedures for juvenile offenders to be transferred from the police department to Family Court;
- Guidelines for the evaluation of suspected child abuse and neglect by pediatric condition falsification (often referred to as Munchausen's syndrome by proxy); and
- Procedures for handling parental kidnapping, child abduction, and interference with custody cases.

### **Continuum of Services**

The major thrust of KIDSAFE's efforts in the services area came with the NSI. KIDSAFE designed this initiative to provide services for at-risk families in the target area. After building a presence in the community by participating in neighborhood events, KIDSAFE formalized its effort through a request for proposals from service providers in the target area. The KIDSAFE Council formed a Funding Oversight Committee to oversee the process and make the final selections. KIDSAFE involved the community in the selection process by recruiting representatives from community-based agencies and neighborhood residents to serve on grant review teams. During the grant review process, the Funding Oversight Committee realized that KIDSAFE had received more good proposals than it could afford to fund as part of the initiative. Members of the committee worked to secure additional funding from local sources to support more programs. In the end, KIDSAFE made awards to 14 NSI grantees as of September 1999 (supported by KIDSAFE, HAUW, the Community Backed Anti-Drug Tax, and a local foundation).

The grantees provided a wide range of services. One of the most active programs was a grandparent program operated by the local children's hospital, which provided support, training, and resources for grandparents and relatives caring for children. Five other community centers in the target area received grants to provide services to neighborhood residents. The specific activities at these centers included counseling and support groups for children and parents, presentations on child maltreatment and domestic violence, academic tutoring, parenting classes, and youth activities. One of the grantees was a collaborative of five agencies that together offer therapy and treatment for children and adults exposed to violence. All of the services were

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offered in the KIDSAFE target area. Grants ranged from \$20,000 to \$50,000 and extended through June 2001.

During 2000, KIDSAFE established a monitoring system to help oversee the NSI. The DFS and KCPD liaisons began supervising the grantees to systematically track their progress and activities. As a side benefit, this arrangement enabled the KIDSAFE liaisons to facilitate referrals and share information about available resources with the staff from their own agencies. For the grantees, the liaisons responded to budget questions and other issues and served as troubleshooters and trainers as needed. The liaisons also organized quarterly meetings of the NSI grant recipients to share information and network with each other. Besides serving as a resource and information exchange, the meetings allowed the agencies to identify and address issues and service needs.

In July 2001, KIDSAFE refunded 8 of the 14 original grantees. KIDSAFE also enlarged the NSI target area to incorporate the two Weed & Seed ZIP Codes. In deciding which grants to refund, KIDSAFE reviewed findings from client and community surveys, looked at the quarterly tracking data from grantees, and considered prospects for sustainability. The refunded grantees were asked to document any changes to their programs or scope of work and to submit new budgets covering a 12-month timeframe.

Late in 2001, KIDSAFE released another request for proposals for a second round of NSI grants targeting youth development, prevention and awareness, family support, and treatment and intervention. KIDSAFE used the same process for soliciting proposals as in the first round. The project offered technical assistance in preparing and writing the proposals and established groups of community volunteers to review the completed proposals and make recommendations to the Funding Oversight Committee. While eight proposals were selected at the end of 2001, the awards were held up pending the outcome of a supplemental grant request that EOWS had encouraged KIDSAFE to submit at the same time.

By April 2002, the supplemental funds had failed to materialize, and the July 2001 grants neared completion. The Funding Oversight Committee met to discuss the NSI grants given the project's overall budget cut and the lack of supplemental funds. The Committee reviewed the current grantees as well as those selected under the second RFP. Shortly thereafter, the Committee selected nine grantees for 1-year awards beginning in July of 2002. The grants included three new programs and six refunded programs with grants totaling \$172,000. This new

round of grants added some direct youth services in an attempt to address a recognized gap. The services were well-utilized, with four of the programs expending their funds prior to the end of the contract period. KIDSAFE's final grant budget included 6 months of funding for eight of the programs to cover the period from July to December of 2003.

KIDSAFE partners also worked on building community-service linkages in the target area. Even before the SK/SS grant, DFS allowed several workers to spend part of their time in the community, based at low-income housing complexes or the police department. While on location to build relationships, the workers did crisis intervention and connected families to services and resources. KIDSAFE's involvement expanded through the liaison staff. The KIDSAFE DFS liaison helped identify the appropriate sites, community partners, resources, and training for this effort. KIDSAFE maintained contact with the outbased workers through the Community Services Team, composed of DFS supervisors, the outbased workers, and KIDSAFE staff. The Team met monthly to discuss service needs and resources in the target area. After receiving requests from the community for more DFS outbased workers, KIDSAFE helped identify additional sites by facilitating community meetings. In the end, unfortunately, severe budget constraints at DFS prohibited the assignment of additional outbased workers. By 2002, only one outbased worker remained in KCPD's East Patrol Division. From KIDSAFE's perspective, the program had problems because the outbased workers volunteered for the assignments while carrying a regular caseload, and the workers lacked formal agreements with sites describing their roles and the scope of their work. Partly because of these problems, KIDSAFE has no plans to pursue community placements.

Another part of KIDSAFE's community service strategy involved neighborhood hubs in the target area. When implementation started, KIDSAFE identified two hub sites and also designated them as Weed & Seed Safe Havens. Early in implementation, these hubs received a modest amount of funding to provide neighborhood residents with an opportunity for involvement, decisionmaking, and support. Once the NSI grants started, the project abandoned the hub strategy. Instead, KIDSAFE focused on coordinating with the Weed & Seed Safe Havens. Weed & Seed provided \$20,000 for two Safe Havens located within existing organizations in the target area. With their designation as Safe Havens, these organizations hired staff, continued existing programming, and developed new programs in the areas of family support and youth development. Starting in 1999, KIDSAFE supported programming at the Safe Havens through the NSI and Prevention Grant program (described below). During the third grant period,

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KIDSAFE also supported the Safe Havens with \$2,500 each. The allocation for the Safe Havens was cut entirely after EOWS cut KIDSAFE's budget.

Overall, KIDSAFE viewed the Safe Havens as lacking clearly defined roles in the community. This made it difficult for KIDSAFE to link with the Safe Havens. In 2001, EOWS awarded the Weed & Seed project a mobile police station to circulate throughout the target area. KIDSAFE took this opportunity to reach more community residents by supplying the van with prevention materials and by informing community organizations about its availability. Early in 2003, KIDSAFE stepped up efforts at the Safe Havens by sponsoring local students to attend training sessions on leadership and by collaborating to provide summer programs for youth at the sites.

## Data Collection and Evaluation

### *Local Monitoring and Evaluation*

KIDSAFE's partnership with a local evaluator when submitting the original proposal helped make the data collection and evaluation component of the KIDSAFE project strong from the beginning. While KIDSAFE waited for approval of the draft Implementation Plan, the local evaluator completed a needs assessment of the target area to identify the strengths and weaknesses of its child abuse and neglect prevention and intervention services. In December 1998, KIDSAFE submitted a formal Evaluation Plan. The Evaluation Plan outlined how the local evaluation would gather information on each major component of the project. In the area of system reform, the local evaluation monitored changes in agency policies and procedures on an ongoing basis and in 2001, surveyed participants from different systems to look at relationships between the agencies and possible improvements. Until the termination of the case review meetings, the local evaluator maintained a database that contained information on the demographic characteristics of the victims, allegations, investigation findings, and the involvement of different agencies in all cases reviewed. She produced periodic reports based on this information.

Despite these efforts, KIDSAFE considered the Multisystem Case Analysis (MSCA) the part of the local evaluation that really addressed system reform. Starting in 1999, KIDSAFE began planning an MSCA that would track the handling of cases across agencies, using a model presented by the Child Welfare League of America at one of OJP's cross-site cluster conferences.

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This research activity started quickly with the KIDSAFE local evaluator designing data collection forms, identifying sample cases, and beginning to collect the data on a sample of sexual abuse cases by early 2000. The data collection covered a baseline and a comparison period. For the baseline period, the local evaluator identified data on 40 sexual abuse cases from the target area in 1998. She identified another 40 sexual abuse cases from the target area for the comparison period (2000). After the fast start, KIDSAFE's yearly progress slowed considerably due to problems locating files for the identified cases, resolving incorrect ZIP Codes in the case records, finding enough cases in the timeframe, and determining how to handle the unexpectedly high number of unsubstantiated cases in the sample. Eventually, KIDSAFE decided to review both probable cause and substantiated cases and extend the time period as long as necessary to reach a target sample size of 30 cases. The local evaluator completed data collection in early 2002 and by the end of year had entered all data into a database. The local evaluator then prepared and circulated a draft report in spring 2003. Before finalizing the report, KIDSAFE plans to get feedback from the Management Team and the Child Welfare League of America to help interpret and present the data.

Another important component of the local evaluation was the evaluation of each training session and workshop funded by KIDSAFE. The local evaluator prepared brief surveys for each training session and summarized the results in training reports. The information included demographic information on training participants and their reactions to the quality and content of the training. KIDSAFE used the reports to measure success and look at future need. The local evaluation also did some followup with training participants. For example, in the summer of 2002, the local evaluator sent a followup evaluation to all DFS workers who participated in the Medical Aspects of Child Abuse and Neglect training series.

For the NSI, the local evaluator processed the quarterly reports submitted by the grantees. From these, she produced periodic reports showing the number and types of services provided and the demographic characteristics of the individuals served. These reports helped KIDSAFE assess the effectiveness of the NSI programs and revise the process for the second round of grants. For example, after reviewing one set of quarterly reports, the local evaluator found that many grantees had difficulties finding clients for their services. To address this concern, KIDSAFE helped all of the grantees produce brochures and information sheets for distribution to the community. KIDSAFE also used the quarterly report data to identify service gaps. These findings and a consumer satisfaction survey of the clients of each grantee in 2002 were used to tailor subsequent requests for proposals to the specific needs of the target area. For



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example, prior to funding the second round of NSI grants, KIDSAFE staff looked at the evaluation data and noted that the target area lacked services for teens. This allowed them to select new grants that focused on this population.

The evaluation of the prevention grants (described below) involved documenting the number of attendees, describing the specific activities, and discussing the perceived impact in the target area. In 2001, the local evaluator also conducted a Community Impact Survey that gathered resource information on the agencies providing services in the target area and the types of services available. At the same time, the local evaluator fielded a Community Agency Survey of agencies in the target area to assist KIDSAFE in developing priorities for new initiatives.

Overall, KIDSAFE used its comprehensive local evaluation to identify successful activities, guide programs, and influence funding decisions. As noted above, the project also used survey results to determine whether to continue with certain activities.

### ***MIS Development and Information Sharing***

KIDSAFE worked on developing an MIS even before formal approval of the Implementation Plan. In February of 1998, a Family Court judge issued an order expanding the information shared among agencies. Later that year, KIDSAFE's MIS consultant submitted a plan for a communal database for PSP agencies that included e-mail capability and an integrated case management system. KIDSAFE soon discovered that the collaborative did not have the capacity or desire for a system that would integrate data across agencies. During the next few years, KIDSAFE downscaled this MIS plan to focus on inter-agency access to databases and e-mail. These efforts progressed under the leadership of the Family Court director and a Family Court judge who worked to overcome several obstacles to better integration between the DFS and Family Court systems. KIDSAFE helped organize training for PSP agency staff on using the databases and prepared protocols for accessing them. By the end of 2000, KIDSAFE had helped make the electronic databases of DFS, Family Court, and the PAO accessible to each other's staff. In addition, KIDSAFE facilitated improvements in the e-mail capabilities of DFS staff.

While these efforts removed some of the barriers to information sharing, KIDSAFE's agency partners reported that staff did not use the cross-agency access to databases. At this point, the KIDSAFE Council expressed renewed interest in a broader MIS. In response, KIDSAFE submitted a formal request to the SK/SS national technical assistance coordinator for

over \$50,000 to develop an integrated MIS for the PSP agencies. OJP agreed to fund this effort in phases. The first phase involved hiring a consultant to help with planning activities. The consultant presented at the KIDSAFE Council meeting in December 2002 and then met with representatives of the PSP agencies in March 2003 to determine the interest and commitment to building an integrated MIS. The participants also discussed whether to wait for state-level MIS efforts from the State Court Administrator to reach Jackson County or to proceed with more modest plans locally. After the collaborative partners agreed to move ahead, KIDSAFE convened additional working sessions. These meetings resulted in each public agency completing a technology assessment to identify data elements available for sharing and those desired from other agencies. The group also collected existing agreements about information sharing and reviewed the range of MIS methodologies available. This effort was ongoing in June 2003.

## Prevention Education and Public Information

KIDSAFE's efforts in the area of prevention education and public information started on a small scale with the project's participation in community and neighborhood events. From the outset, KIDSAFE's community coordinator participated in community-wide activities like Protect Your Child Day and Child Abuse Prevention Month and distributed materials at numerous neighborhood events. While these efforts helped build the project's reputation in the target area, KIDSAFE initially lacked the staff to pursue a more comprehensive public education agenda. The Implementation Plan called for assigning this responsibility to a part-time training and public education coordinator, who was not hired until the summer of 1999. Once hired, however, most of the coordinator's time was spent on the training and professional development component. Recognizing the need to strengthen this component, KIDSAFE reallocated responsibility for public awareness activities from the professional development coordinator to the director of programs. This restructuring provided a more natural fit since the director of programs actually conducted most of the activities.

Following the shift in staff responsibilities, KIDSAFE undertook a new activity in the area of prevention education and public information—a community grant program with two components:

- The first component, **Grassroots Capacity Grants**, helped grassroots organizations develop internal capacity to design programs and leverage funding. Early in 2002, six pilot programs received \$5,000 to design and operate a prevention program. One grantee, a neighborhood association,

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sponsored youth and neighborhood development activities like cleanups and health fairs. Another grantee, a community center, provided programming at a housing project to promote positive child and parent interactions. Half of the grant was earmarked for startup costs with the other half contingent on fiscal reports and program descriptions. KIDSAFE hoped that this process would give the grantees a better understanding of outcome measures and data collection to help them leverage additional resources. The DFS and KCPD liaisons monitored the grant recipients. The programs operated for 6 months from March to August 2002. Following that, KIDSAFE reviewed new proposals and selected four to begin in January 2003. With the second round of grants, the KIDSAFE DFS liaison assumed responsibility for supervising this activity. KIDSAFE plans a third round of grants during the fifth grant period.

- The second component, **Prevention Grants**, provided small awards for community groups to conduct prevention activities using the proceeds from the Children's Trust Fund's license plate sales. During 2001, KIDSAFE issued two RFPs for prevention grants to community groups. The community responded positively to the opportunity to plan activities and to expand into new areas. In subsequent years, KIDSAFE continued the small grant programs, funding two or three per year. With each new RFP, KIDSAFE asked for proposals from a mailing list of over 350 organizations that included schools, churches, community centers, neighborhood associations, and service organizations. Activities conducted by grantees included health screenings, discussion groups, carnivals, and back to school events. The KIDSAFE management team selected the grantees after reading the applications and exchanging feedback. The team paid close attention to the ZIP Code and the type of organization to try and get a mix of programs. To encourage the grantees to be creative and to base their proposals on community needs, KIDSAFE designed the grant program with few requirements.

While the mid-project budget cut forced the project to scale back some of its plans in this area, KIDSAFE found additional ways to offer training and technical assistance to community agencies and grassroots groups. In 2001, KIDSAFE partnered with the local Council on Philanthropy in developing a series of Primer's Training sessions for grassroots groups. KIDSAFE identified topics from the results of a training needs survey sent to grassroots organizations in the target area. KIDSAFE's professional development coordinator then worked with the Council on Philanthropy's volunteer trainers to develop a curriculum on the three areas the survey identified as priorities: collaboration, fund-raising, and grant-writing. KIDSAFE's local evaluator offered outcome evaluation as a fourth session. All of the grantees under the Grassroots Capacity Grants were required to attend the Primer's Training series, while all of the NSI grantees were invited to participate. The local evaluator found that participants viewed the training sessions as very practical and useful. However, the sequence and topics needed adjustment. Using this information, the Council on Philanthropy reconfigured the curriculum into

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a certification program for emerging programs. KIDSAFE agreed to have subsequent grantees receive technical assistance through the revised Primer's Program.

As part of its community-based prevention agenda, KIDSAFE also supported community trainings. Starting in 2000, KIDSAFE conducted a series of informal training and public awareness activities at sites in the target area. The activities focused on child safety and protection issues:

- KIDSAFE sponsored prevention fairs at three sites in the target area to educate the community on the services offered by the NSI grantees.
- The KIDSAFE DFS liaison conducted a workshop for pastors and community members to address signs of child abuse, mandated reporting requirements, and DFS roles and responsibilities.
- The KIDSAFE KCPD liaison undertook a series of orientation sessions during roll calls at East Patrol to update the patrol officers on various grassroots organizations that promoted public awareness and community protection and providing prevention services.
- KIDSAFE sponsored workshops on legislative advocacy and the public policy process for community agencies.
- KIDSAFE partnered with the ACT Against Violence Program to improve parental involvement in public education and prevention activities. The KIDSAFE liaison staff received training to serve as ACT facilitators or trainers and worked with the ACT program to sponsor a countywide prevention campaign in conjunction with Child Abuse Awareness Month.

### **Significant Events During Project Implementation**

As the preceding section described, KIDSAFE undertook a broad range of activities that covered each of the SK/SS elements. Table 4-5 provides an overview of the significant events that occurred during KIDSAFE's implementation. The implementation phase of the project's first grant period focused on staffing the liaison positions, establishing the KIDSAFE Council, supporting system reform activities in a number of areas, and integrating the local evaluation into project activities. In terms of services and prevention, KIDSAFE began to slowly build relationships in the community to ensure that specific activities responded to the community-identified needs.

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**Table 4-5. Timeline of Events During Implementation Phase**

<b>Time</b>	<b>Event</b>
<b>1999</b>	
April	OJP technical assistance meeting on resources, practices, and planning for system change
May	Hired KCPD liaison
July	Began working with CWLA to conduct a Multisystem Case Analysis Hired professional development/public awareness coordinator
September	Launched NSI Hired DFS liaison
October	Received second round of funding
November	Collaborated with Jackson County Multidisciplinary Response to Child Protection in response to child fatalities OJP technical assistance meeting on intervention in domestic violence and building cultural, consumer, and community competencies
<b>2000</b>	
January	Started first round of medical aspects of child abuse and neglect training for DFS staff Started planning for Investigative Collaborative (formerly Jackson County Abuse/Neglect Response Team)
May	Community coordinator promoted to director of programs OJP technical assistance meeting on results-based accountability and facilitative leadership
June	Organized Management Team retreat
July	Narrowed professional development/public awareness coordinator position to focus on professional development activities Shifted supervision of KIDSAFE liaisons and public awareness activities under the leadership of the director of programs
November	OJP technical assistance meeting on sustainability
<b>2001</b>	
February	Convened Investigative Collaborative
March	Notified of budget cut
April	Launched community grant program with two components: Grassroots Capacity Grants and Prevention Grants OJP technical assistance meeting on cultural competence
July	Received third round of funding at reduced level
September	Started sustainability planning process with series of stakeholder and community meetings
October	OJP technical assistance meeting on team building and leadership
November	Completed PSP role and responsibilities video presentations Sponsored workshop on multi-agency response to domestic violence through relationship building
<b>2002</b>	
May	OJP technical assistance meeting on data-based decisionmaking, information sharing/integration, and youth asset mapping
July	Received fourth round of funding
<b>2003</b>	
January	Started second round of Medical Aspects of Child Abuse and Neglect training for DFS staff
March	OJP technical assistance meeting on lessons learned and sustainability
July	Received fifth round of funding

Near the beginning of the second grant period, KIDSAFE launched its NSI. This effort brought much-needed services to the target area and expanded KIDSAFE's presence in the community. At the same time, the project's system reform agenda moved ahead, albeit with considerable time and resources spent navigating the system's response to the child fatalities in the fall of 1999. KIDSAFE participated in this response by providing a forum for communication between the involved agencies and community partners. With the prevention and public education component, the turning point came toward the end of this grant period when KIDSAFE devised a strategy to bring the prevention efforts to the community through a Community Grant Program with two components. The Prevention Grant program gave small awards to numerous community organizations to conduct a prevention or public education event. The Grassroots Capacity Grants provided program support to small grassroots agencies to provide prevention programming in the target area in addition to technical training designed to increase the capacity to identify and obtain other funding sources.

By the end of the project's extended second grant period, KIDSAFE had made steady progress in implementing changes in each of the SK/SS elements and building its reputation in the community. Unfortunately, this directly coincided with EOWS's budget cut, which left KIDSAFE with half of the Federal resources expected for the third grant period. With only a few weeks to revise its Implementation Plan, KIDSAFE attempted to reconcile the need to support activities already underway with new efforts outlined in the plan. The project's professional development agenda and NSI suffered the greatest cutbacks.

Despite the impact of the budget cut, KIDSAFE made considerable progress during the third and fourth grant periods. KIDSAFE worked to maximize its resources by relying on its staff and community partners to contribute to different project activities. For example, KIDSAFE's continued support of the Investigative Collaborative used KIDSAFE staff but not KIDSAFE dollars. At the same time, the project leveraged local resources to supplement the reduced budgets for the NSI and the Grassroots Capacity and Prevention Grant Programs.

The KIDSAFE logic model demonstrates the scope and depth of the overall project (Figure C-1 in the Appendix). The logic model groups the activities into different areas such as collaboration development, system reform, continuum of services, prevention education and public information, data collection information sharing, and evaluation and then shows the pathways from these activities into immediate, intermediate, and long-term outcomes. Throughout implementation, the logic model was updated to reflect new activities and priorities.

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Overall, the logic model shows that KIDSAFE pursued a balanced blend of activities across the SK/SS elements.

### Results

The preceding section outlined KIDSAFE's implementation activities, the target audience, and the status and outcomes. This discussion revealed that KIDSAFE carried out a broad range of activities in the target community. While the project's local evaluation examined many of these activities, Westat's national evaluation looked at the overall SK/SS initiative from a broader perspective and attempted to draw conclusions about its results at each participating site. In this section, after discussing the local perspective on KIDSAFE's accomplishments, we address several overarching questions regarding KIDSAFE and its efforts:

- What are the project's accomplishments?
  - In terms of structure and process, how faithful was KIDSAFE to OJP's vision for the SK/SS initiative?
  - To what extent did KIDSAFE produce system reform—that is, enduring changes in the statutes, policies, procedures, and resources affecting the prevention, intervention, and treatment of child abuse and neglect? What other enduring changes resulted?
  - Is there evidence that the project has had longer term impacts on the incidence of child abuse and neglect?
- What factors facilitated project efforts and what were the obstacles?
- What is the future for KIDSAFE?

### Perspectives From Project Participants and Other Local Observers

Westat's national evaluation plan included several sources of information that gave a local perspective on the project. During the fall 2002 site visit, Westat conducted interviews with 17 key informants, including project staff, the local evaluator, senior administrators from the PSP agencies, and leaders of several community-based agencies. At about the same time, Westat completed a Survey of Agency Personnel that targeted frontline workers in different agencies to get their view on changes in individual interactions, agency operations, and the overall child protection system. Early in 2003, Westat conducted a Stakeholder Survey that asked KIDSAFE

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Council and committee members for their perspective on the project. Together, the findings from these evaluation efforts help clarify the local response to the KIDSAFE project.

Overall, these information sources revealed that the project is credited for providing a forum for dialogue among the PSP agencies. By bringing key stakeholders to the table, the project facilitated communication and networking and worked to establish trust among the different players. Local stakeholders also felt that KIDSAFE provided a responsible and respected voice for children, fostered collaboration within the community, and created an environment for efforts to ripen and grow. As the coordinating body of the collaborative, the KIDSAFE Council proved to be a neutral, approachable, and welcoming entity that played a mediating role in addressing child protection issues. The Council brought organizations to the table in a real working way and helped build a sense of shared responsibility for issues related to child abuse and neglect. The KIDSAFE project, and the collaboration it fostered, served as a catalyst for changes in the system.

Findings from the Stakeholder Survey reinforce these impressions:

- Sixty-eight percent of respondents said that KIDSAFE had a notable affect on improving communication and cooperation among those who deal with child abuse and neglect.
- Fifty-eight percent credited KIDSAFE with improving multiagency responses to domestic violence.
- Fifty-four percent felt that KIDSAFE had improved how public and private agencies leveraged resources to support children and families.
- Fifty-three percent of respondents named improvements in communication and cooperation among those who deal with child abuse and neglect as one of the most important project accomplishments.

The key informants also noted specific results stemming from the collaborative process that KIDSAFE facilitated. For the system reform component, the various KIDSAFE activities played an important role in building relationships between staff at the PSP agencies and encouraging them to share information and coordinate their actions on specific cases. On a formal level, KIDSAFE helped develop new policies, procedures, and guidelines for how the partner agencies handle specific types of cases. Thirty-four percent of respondents to the Stakeholder Survey said that KIDSAFE significantly affected operations within their own organization. Forty-



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four percent of respondents said that their involvement with KIDSAFE resulted in notable improvements in their own agency's communication with other organizations.

More informally, the KIDSAFE collaboration improved working relationships so that agency personnel had contacts with their counterparts in other agencies. Seventy-five percent of respondents to the Stakeholder Survey made new contacts in the child abuse and neglect field, and 59 percent made new contacts in the juvenile justice field, as a result of participating in KIDSAFE. Further, 45 percent of the stakeholders reported increased ability to do their job effectively as a result of participating in KIDSAFE. With new access points to other agencies, those involved with child abuse and neglect had the ability to share information and discuss problems or plans as needed. For example, 50 percent of the respondents to the Survey of Agency Personnel thought that communication and information sharing had improved. These same respondents cited knowing whom to talk to in other agencies as the most important reason for improved communication and information sharing.

From a local perspective, KIDSAFE's greatest successes came with its unique efforts to connect with the community through services, prevention programs, and public awareness activities. The NSI added services, fostered collaboration and networking between service agencies, helped service agencies understand the roles and responsibilities of the PSP agencies, and involved community and agency staff in funding decisions. The Community Grant Program put money for prevention programs directly into the community, by providing resources and assistance to small agencies or groups that did not typically receive grants. Through both of these efforts, KIDSAFE brought the grantees and community partners together in an environment where they felt comfortable talking and working together.

Again, the Stakeholder Survey findings highlight KIDSAFE's accomplishments in this area. A majority of respondents said that KIDSAFE had a notable affect on expanding prevention programs (60%), educating community residents about child abuse and neglect (57%), and involving grassroots organizations in supporting children and families (52%). Moreover, some respondents viewed expanding prevention programs (22%) and involving grassroots agencies and community-based organizations (27%) as KIDSAFE's most important accomplishments.

Even though the key informants acknowledged KIDSAFE’s accomplishments in various areas, some local stakeholders viewed the project outcomes as falling short of expectations. These individuals had hoped that KIDSAFE would be a “true” collaborative effort and avoid problems with personalities or resistance to change. Some expressed frustration at the length of time it took and the difficulties that arose when working on different structural or procedural changes at the agency level. Others viewed the progress as more incremental and less systemic because certain things, such as co-location of agency staff, were not achieved. Some people perceived the governance structure as too large and unwieldy, noting that a steering committee or executive council might have better set the larger community goals and then guided the process. Nonetheless, many key informants acknowledged that while they had expected the project to make more progress, they now realize and appreciate how much KIDSAFE accomplished in changing and improving the child protection system. In fact, more than one-quarter (27%) of respondents to the Stakeholder Survey were extremely satisfied with KIDSAFE’s accomplishments with an additional 38 percent very satisfied.

## **Overall Assessment of the Safe Kids/Safe Streets Initiative**

### **How Faithful Was KIDSAFE to OJP's Vision?**

The KIDSAFE collaborative, anchored by the four PSP agencies, brought together a broad spectrum of agencies and organizations that come into contact with maltreated children. The KIDSAFE Council, the formal governing body that guided the project, worked first to shape the Implementation Plan and then to guide the project. Almost everyone invited to join the Council agreed to serve, indicating that the formal system and the community were committed to the project and its goals. Furthermore, KIDSAFE maintained the collaborative’s interest and enthusiasm despite the long wait for approval of the Implementation Plan and the later budget cut. KIDSAFE’s accomplishments included stimulating discussion and relationship-building among the diverse agencies involved with child abuse and neglect in Jackson County. KIDSAFE broadened the scope of work to extend beyond individual institutions. Together, the KIDSAFE Council and the individual program activities continued to provide a forum for the agencies to get to know each other and work together. Overall, KIDSAFE understood and remained faithful to OJP’s vision of a collaborative project that balanced the four SK/SS elements.

The variety and scope of KIDSAFE’s implementation activities produced some changes in the routines, policies, and procedures that affect the identification, intervention, and

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treatment of child maltreatment. Starting during KIDSAFE's planning phase, a number of agencies in the formal child protection system undertook reorganizations or structural changes to improve how they handled child abuse and neglect cases. These efforts included the implementation of a dual track system for DFS, the expansion of cases seen at the Child Protection Center, initiation of a Drug Court in Family Court, and the creation of a new unit within KCPD to handle all child abuse and neglect cases. These efforts cannot be attributed primarily to the KIDSAFE intervention; no doubt many of them would have come to pass eventually, with or without the project. But it seems clear that the collaboration among PSP that KIDSAFE facilitated created a fertile climate for such changes. The initiatives benefited from the constant interaction of KIDSAFE collaborators and the new insights they developed about system needs and problems.

KIDSAFE's system reform agenda also involved identifying and responding to policy and procedural issues identified by partners as weaknesses in the formal child protection system. Through the project's collaborative network of agencies and organizations, KIDSAFE staff played an important role in the development of numerous formal protocols and guidelines as well as more informal procedures for multiagency responses to specific types of cases. These changes in structures, routines, and policies affect both the identification of child abuse and neglect and subsequent interventions.

The overall SK/SS initiative emphasized the development of multidisciplinary teams to bring together staff from different agencies to share information and to make joint decisions. KIDSAFE's approach to multidisciplinary case reviews of specific child abuse and neglect cases evolved as implementation progressed. The project started with a case review process that looked only at cases in the target area and involved only one agency providing most of the information. Despite numerous modifications, this team never really provided the level of information sharing and joint decisionmaking originally envisioned. When the community came together to respond to the child fatalities in 1999, KIDSAFE's prior experience proved invaluable to the planning of a new multidisciplinary team, later named the Investigative Collaborative. The success of the Investigative Collaborative stemmed from the group's formalization through a Memorandum of Understanding with the participating agencies, specific procedures for referrals and information sharing, and a focus on constructive discussions about how to proceed with specific cases. Besides informing partner decisions in individual cases, the staffings allow team members to flag policy or procedural problems. While many of these problems are not amenable to quick solutions, KIDSAFE views the Investigative Collaborative as a powerful tool for system change.

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Throughout implementation, KIDSAFE's professional training agenda remained a strong piece of the project's system reform agenda. KIDSAFE's ability to focus on key priority areas allowed the project to greatly expand the training opportunities for agency professionals in the formal child protection system. Overall, the professional development activities reached frontline workers and managers in the public sector agencies as well as community groups and service providers. The local evaluation found that participants viewed the training sessions positively and enthusiastically. For the most part, the agencies involved were cooperative and receptive. Further, KIDSAFE was successful in getting other agencies or groups to take ownership of the different training activities in an effort to sustain the training curricula after the KIDSAFE project ends.

The project also made progress on system reform through the efforts of the agency liaisons. The liaisons worked within their respective agencies to forge communication links, share resources, and provide training on agency operations and the KIDSAFE project. Later the liaison staff helped advance KIDSAFE's reputation in the community through their involvement in the NSI and community grant program. The project's recognition as an important player in community efforts to improve the well-being of children and families led to staff involvement in other related projects and programs.

KIDSAFE's NSI increased the project's presence in the target area through new and expanded services to fill gaps identified by the community. Service providers in the target area responded enthusiastically to each RFP from KIDSAFE. While it took some time to work through startup issues related to staffing, finding referrals, and developing curriculum, the grantees resolved these problems and then focused on delivering services. The grantees found the services well utilized, in many cases expending their KIDSAFE budgets before the end of the grant period. For the grantees, the project also provided training and technical assistance to improve staff skills in grant writing, recordkeeping, outcome measurement, and evaluation. Besides improving the availability of services, the NSI also fostered relationships throughout the community. In addition to the NSI, KIDSAFE built a presence in the community through the work of the liaison staff, the coordination of the Community Services Team for DFS outbased workers, and the support of the Weed & Seed Safe Havens.

KIDSAFE's public education efforts started with modest activities such as bringing prevention materials and resource information to community and neighborhood events. Part way through implementation, KIDSAFE greatly expanded efforts on this project element through a

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community grant program that included Prevention Grants to community groups and Grassroots Capacity Grants to grassroots organizations in the target area. Starting in 2001, KIDSAFE issued several RFPs each year for the Prevention Grant program. This program enabled neighborhood organizations to provide localized public information and prevention materials. The Grassroots Capacity Grants gave targeted assistance to small grassroots agencies for program development and implementation. The accompanying Primer's Training sessions enabled grantees to develop skills asking for money and looking for resources. KIDSAFE's move to a locally based grant program resonated with the community. The strategy of providing small grants to organizations in the target area proved to be empowering and confidence-building for the participants.

As described earlier, the project's local evaluation systematically collected data on all of the project's activities. The comprehensive evaluation plan meant that each activity had an evaluation component to provide feedback to KIDSAFE staff and partners. Within the project, the careful examination of activities helped KIDSAFE staff understand things that worked, guide program development, make funding decisions, and identify needs in the community. KIDSAFE also used information from the local evaluation to guide the collaborative in devising a response to the child fatalities and to inform administrators and policymakers about community issues related to child protection. Overall, KIDSAFE's local evaluation proved to be a legitimate effort to provide good feedback to both the staff and the community. The forthcoming findings from the MCSA should provide further information about project outcomes.

### Factors That Affected Project Success

Several factors appear to have contributed to the success of KIDSAFE efforts:

- **Selection of the lead agency.** HAUW enjoyed recognition and credibility in the community as a facilitator of collaborative efforts on children's issues. HAUW's track record in child welfare and ability to bring resources to the table made it easier for KIDSAFE to garner respect and commitment from the collaboration. HAUW's leadership helped keep child protection issues in the forefront as a community problem that needed attention. Further, HAUW's neutrality allowed it to navigate territorial issues and defuse some of the political issues that arose.
- **Commitment from the four PSP agencies.** From the early stages, these agencies acknowledged that problems in the child abuse and neglect system were significant and worthy of investment. The PSP agencies sent representatives to all of the committee meetings and in some cases, supported staff that spent substantial amounts of time on KIDSAFE activities.

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- **Systemic thinking of the collaborative.** From the outset, KIDSAFE collaborators seemed to agree that the solutions to child abuse and neglect problems would have to involve changes in structure, policy, and procedures and better deployment of existing resources. The emphasis on system reform among public sector agencies is noteworthy.
- **Response of the community to neighborhood initiatives.** Individuals, agencies, and organizations within KIDSAFE's target area responded enthusiastically to the project's community initiatives. The level of participation in the community grant opportunities demonstrated a willingness to tackle child abuse and neglect issues with limited resources.

KIDSAFE also faced some challenges while implementing the project. Initially, the obstacles related to KIDSAFE's status as the Weed & Seed-funded site. KIDSAFE's original proposal made only passing reference to Weed & Seed and did not suggest that it would combine KIDSAFE with the Weed & Seed activities in Kansas City. Yet, its selection as the Weed & Seed-funded site meant that EOWS had certain expectations about blending the two projects. For the first two grant periods, project staff struggled to integrate Kansas City's vision for KIDSAFE with the requirements of EOWS. While EOWS worked with HAUW, the KCPD, and the U.S. Attorney's Office to satisfy the Weed & Seed requirements, KIDSAFE conceded that it had great difficulty understanding these requirements and, in hindsight, could have used more technical assistance earlier in the process. In the end, KIDSAFE worked to formalize the child protection strategy within Weed & Seed and coordinate the efforts of the two initiatives.

KIDSAFE's system reform agenda faced obstacles along several fronts. The administrators of the PSP agencies turned over frequently during KIDSAFE's implementation. Each change in leadership meant starting over to build support and commitment to the project. While such turnover is standard for some of the agencies, it slowed progress on KIDSAFE's planning and implementation. At one point, the new DFS leadership at the county level meant that some old political and turf issues resurfaced and stalled progress on some fronts.

More broadly, it was difficult to forge collaboration among the PSP agencies. Overall, the collaborative members had trouble giving up historical stances and getting past a sense of territory. Agencies were protective of information and fearful of working together. The conflict with LINC over control of the community response to child fatalities stalled progress on the project's system reform efforts. Despite KIDSAFE's efforts, conflicts arose when the collaborative partners failed to understand the roles and responsibilities of other agencies. While some viewed the conflicts as painful, others saw them as a natural byproduct of collaboration.

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Regardless, KIDSAFE learned how to deal with change and carefully navigate both personalities and politics during the course of implementing the project.

We agree with local informants that the system, with DFS at its core, was overworked and dysfunctional. The sheer scope of the systemic problems meant that the collaborative never really addressed underlying causes, but instead dealt with problems as they arose. KIDSAFE, working within this environment, needed key partners to help engage the community in making children's issues a priority. Instead, the project worked to continually refocus the community on child protection and the larger child welfare issues, making it difficult to define as a group what they were trying to do.

Like other communities, Jackson County faced a serious economic downturn during the life of the project. Statewide budget cuts hit the community particularly hard at the same time that local funding dwindled. Overall, the lack of money placed constraints on the PSP agencies and local service providers. All of this coincided with EOWS' budget cut, meaning that the community had even fewer resources to devote to child protection issues. Locally, the project's stakeholders echoed these concerns. The vast majority (85%) considered limited resources as a significant challenge to carrying out the project's goals and objectives.

### **What Is the Future of KIDSAFE?**

KIDSAFE started planning for the future during the project's third grant period (July 2001-June 2002). Over the following 2 years, the KIDSAFE Council considered several alternative structures to sustain the collaborative vision and goals. While community stakeholders showed little interest in creating a new structure to continue the effort, there was consensus that some type of organizational body was needed. Forty-three percent of the respondents to the Stakeholder Survey thought that the collaborative KIDSAFE developed would continue in some form. Further, 53 percent of them expected to be personally involved in the project over the coming year.

However, rather than maintain the KIDSAFE Council, the project plans to institutionalize KIDSAFE activities within existing community organizations, including the CPC, the Community Quality Assurance Committee (CQAC), the Council on Philanthropy, and HAUW. Under this plan, KIDSAFE will no longer exist as a separate entity following the end of federal funding in September 2005. Instead, the project's efforts will be folded into the work of

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these organizations that already share the project's vision, members, and certain goals for professional development and information sharing. Without a separate and independent group, the community will lose the leadership, direction, and oversight that the KIDSFE Council provided. Nonetheless, this plan builds the KIDSAFE activities into existing structures to carry on the SK/SS mission.

The CPC will be the primary vehicle for carrying out the project's vision for system reform. KIDSAFE is providing funds for staff support at the CPC with a focus on strategic planning, development of outcome measures, fiscal sustainability plans, and revising mission, roles, protocols and procedures at the child and family, system, and community levels of the child protection system. The Governance Group set up to monitor and direct the Investigative Collaborative hosted by the CPC includes members from each of the PSP agencies. The Governance Group reports to the CPC Advisory Council, now chaired by HAUW's vice president for community initiatives (KIDSAFE's project manager). The public sector partners will continue to coordinate, communicate, and conduct joint planning through the CPC to ensure efficient co-investigation of referred cases. The CPC will also work on efficiently moving referred families and their children through the process of advocacy and referrals to treatment in a culturally competent manner.

At the same time, KIDSAFE is providing staff support to the CQAC to further advance the project's system reform efforts. The CQAC is navigating the Children's Division's exit from the Consent Decree and will help ensure independent community advice, advocacy, and accountability for the broader child protection system utilizing the same outcome measures as the Federal Child and Family Services Reviews.

While the PSP agencies have informally committed to absorbing the KIDSAFE liaisons into their departments and budgets, it is not clear that this will be possible given the economic climate. While the liaison staff gave the project an identifiable person to coordinate contact across agencies, KIDSAFE's vision for system reform may be better served by focusing on sustaining other system reform efforts. Since the liaisons worked at different levels within each of the PSP agencies, they did not have the same ability to affect change within their agency. Further, the presence of agency liaisons prevented to some degree the broader institutionalization of working relationships between agencies. Rather than encouraging agency staff to communicate with each other, the liaisons served as the agency resource and contact.



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Like other localities, the Kansas City community began to feel the strain arising from the economic downturn and related budget concerns as implementation progressed. Individual agencies and the funding community experienced budget cutbacks that made sustainability planning more difficult. These cutbacks could prevent KIDSAFE from finding the financial resources to sustain some of its activities in the community. However, KIDSAFE managed to sustain the project's community efforts when EOWS cut the project budget by nearly half. At that time, KIDSAFE leveraged some local resources to maintain the NSI and the community grant program.

Currently, KIDSAFE plans to rely on HAUW and the Council on Philanthropy to sustain the prevention and intervention services. HAUW has initiated an Issue Based Resource Investment process which gathers programs, volunteers, and issue area experts together for purposes of planning, leveraging resources, and funding programs that best serve the needs and goals of the community. KIDSAFE activities fall under the Families and Neighborhoods Issue Team whose vision is a community where families are strong, healthy and live in safe, viable neighborhoods. KIDSAFE staff and Council members provided assistance to this issue team and participated in the development of their three-year Investment Plan. Further, KIDSAFE's partnership with the Council on Philanthropy focused on improving the skills of grassroots organizations through training and technical assistance. These efforts continue to enhance the ability of these agencies to develop and run programs as well as to pursue other resources. While the KIDSAFE dollars will surely be missed, the project's efforts to build capacity in the community make it more likely that some of the services and prevention programs will continue.

## **APPENDIX C**

### **Overview of Implementation Activities and Logic Model**

**Table C-1. KIDSAFE Implementation Activities**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability</b>					
Collaboration Development	KIDSAFE Council	KIDSAFE	Jackson County	8/1998-ongoing	Convened representatives from all key stakeholder groups.
	Weed & Seed Steering Committee	KIDSAFE	Weed & Seed target area	6/1999-ongoing	Participated on committees to guide KCPD's Weed & Seed program.
	Jackson County's multidisciplinary response to child protection	KIDSAFE Council	Jackson County	11/1999-6/2000	<ul style="list-style-type: none"> <li>▪ Reviewed and revised screening criteria for dual track system.</li> <li>▪ Reviewed and supported new legislation.</li> <li>▪ Initiated development of Jackson County Abuse Neglect Response Team (JCANRT).</li> <li>▪ Supported planning of JCANRT.</li> </ul>
Client and Community Input and Participation in the Collaboration	KIDSAFE Council	KIDSAFE	Jackson County	8/1998-ongoing	Included representatives from neighborhood and community groups in the target area.
	Review committees for NSI and Grassroots Capacity grantees	KIDSAFE	KIDSAFE target area	4/1999-ongoing	Included representatives from neighborhood and community groups in the target area.
Strategic Planning	KIDSAFE retreat	KIDSAFE Management Team	KIDSAFE Management Team	6/2000	Discussed progress and problems with project's efforts to address each of the program components.
	Community and stakeholder meetings on sustainability issues	KIDSAFE	Public Sector Partners and Jackson County	9/2001-1/2002	<ul style="list-style-type: none"> <li>▪ Brought community and PSP agencies into sustainability planning process.</li> <li>▪ Drafted KIDSAFE Legacy Plan.</li> <li>▪ Formed Governance Group for the CPC.</li> <li>▪ Named KS lead manager as chair of CPC Advisory Council.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Strategic Planning (continued)	Jackson County Community Quality Assurance Committee	DFS	Jackson County	???-ongoing	Served on committee to ensure that DFS uses best practices. Allocated \$10,000 to support a coordinator position.
Multidisciplinary Team	Case Review Team	KIDSAFE	DFS investigative track cases in the KIDSAFE target area	11/1997-6/2000	<ul style="list-style-type: none"> <li>▪ Brought agency staff together to discuss specific cases.</li> <li>▪ Identified policy and procedural issues.</li> </ul>
	Investigative Collaborative (formerly Jackson County Abuse Neglect Response Team)	CPC	DFS investigative track cases in the KIDSAFE target area	2/2001-ongoing	<ul style="list-style-type: none"> <li>▪ Allowed information sharing and joint decisionmaking on specific cases.</li> <li>▪ Provided a forum for policy and procedural issues to be discussed.</li> </ul>
Program/Service Coordination	Best Interest of the Child Task Force	KS Lead Manager	Jackson County	1999-2001	Developed a resource guide for improved decisionmaking regarding the best interest of the child.
	Task Force for Children	PAO liaison	Agencies working with children exposed to domestic violence in Jackson County	1999	<ul style="list-style-type: none"> <li>▪ Brought different agencies and groups together to work on a multidisciplinary approach to children exposed to domestic violence.</li> <li>▪ Identified need for cross-disciplinary training.</li> <li>▪ Supported development of legislation on domestic violence.</li> <li>▪ Facilitated discussion between DFS and shelters to encourage more collaboration.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Program/Service Coordination (continued)	Caring Communities School Neighborhood Advisory Councils	KIDSAFE	KIDSAFE target area	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Provided prevention materials.</li> <li>▪ Participated in awareness fairs.</li> </ul>
	Project Connect	KS project director	Children and families of parolees in the KIDSAFE target area	2000-ongoing	Expanded services for parolees and their families.
	Fighting Back Coalition	KCPD liaison	Youth in the KIDSAFE target area	2002-ongoing	Served on committee to address substance abuse among youth in Kansas City.
Resource Development	Neighborhood Services Initiative	KIDSAFE	KIDSAFE target area	4/1999-ongoing	Found other resources from local foundation and other sources to fund additional grantees.
	Emergency Assistance Fund	KIDSAFE	KIDSAFE target area	12/1999-7/2001	Coordinated with Children’s Trust Fund to use proceeds from license plate sales to address physical needs of at risk and DFS-involved families.
	Prevention Grants	KIDSAFE	KIDSAFE target area	4/2001-ongoing	<ul style="list-style-type: none"> <li>▪ Coordinated with Children’s Trust Fund to use proceeds from license plate sales to fund community groups to conduct child abuse and neglect prevention activities.</li> <li>▪ Plan to continue relationship with Children’s Trust Fund.</li> </ul>
	Primer’s Training	KIDSAFE	Grassroots organizations in the KIDSAFE target area	2002-ongoing	Collaborated with Council on Philanthropy to provide training on grant writing, fundraising, collaboration, and outcome measurement to grassroots organizations in target area.

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development	Training directory	KS local evaluator	Community agencies and service providers in the KIDSAFE target area	1998	<ul style="list-style-type: none"> <li>▪ Listed training resources.</li> <li>▪ Updated periodically and distributed as a resource for community organizations.</li> </ul>
	Training videos on PSP roles and responsibilities	Professional Development Committee	PSP agency staff	1999-2001	Produced agency-specific training videos for use in cross-disciplinary training of PSP agency staff.
	Training on medical aspects of child abuse and neglect	Professional Development Committee	DFS staff and staff from other agencies in Jackson County	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Developed in-depth curriculum on the medical aspects of child abuse and neglect.</li> <li>▪ Educated all DFS staff over a 2-year period.</li> <li>▪ Initiated 2nd round of training.</li> <li>▪ Plan to continue supporting and evaluating this training.</li> </ul>
	Training on the investigation and prosecution of child abuse and neglect	Professional Development Committee	Patrol officers in the East Patrol Division	3/1999-6/1999	Educated patrol officers on recognition and reporting child abuse and neglect. Distributed community resource directory.
	Training on the investigation and prosecution of child abuse and neglect	Professional Development Committee	PSP agency staff	12/1999-6/2000	Developed training curriculum focused on child abuse and neglect for prosecutors.
	Workshop on multi-agency response to domestic violence through relationship building	Professional Development Committee	Agencies working with children exposed to domestic violence in Jackson County	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Conducted workshop to bring agencies together and to develop working relationships.</li> <li>▪ Formed cross-agency work groups.</li> <li>▪ Submitted DIVERT grant proposal.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development (continued)					<ul style="list-style-type: none"> <li>▪ Introduced community to Green Book initiative.</li> <li>▪ Prioritized Green Book recommendations into short- and long-term goals.</li> <li>▪ Created Leadership Team and Work Groups to address specific Green Book recommendations.</li> <li>▪ Plan to continue supporting work on the Green Book recommendations.</li> </ul>
	Training on the investigation and prosecution of child abuse and neglect	PAO liaison	KCPD officers attending the Police Academy	3/2001-ongoing	<ul style="list-style-type: none"> <li>▪ Developed training curriculum on child abuse and neglect for police officers.</li> <li>▪ Conducted quarterly training sessions at the Police Academy.</li> <li>▪ Plan to continue training sessions.</li> </ul>
	Supplemental training through regional and national conferences	KIDSAFE	KIDSAFE and PSP agency staff	1998-ongoing	Provided financial support for PSP agency staff to attend conferences.
Cultural Sensitivity/Competency Efforts	Conference on the needs of immigrant women who are being abused or at risk of harm through domestic violence	KIDSAFE	Agencies working with immigrant women in Jackson County	11/2001-ongoing	Collaborated with coalition of domestic violence agencies to sponsor a conference on the needs of immigrant women who are being abused or at risk of harm through domestic violence.

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Change Projects	Educator's Handbook	PAO liaison	Kansas City School District staff	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Revised and distributed Educator's Handbook that explains the roles and responsibilities of educators in child maltreatment and describes the policies and procedures.</li> <li>▪ Provided technical assistance to officials from the Kansas City School District.</li> <li>▪ Conducted training sessions on Educator's Handbook, DFS reporting procedures, and school district guidelines to school staff.</li> <li>▪ Plan to continue offering training as requested.</li> </ul>
	Patrol officers assistance with investigations	KCPD	Child abuse and neglect cases in the KIDSAFE target area	4/1999-12/2001	<ul style="list-style-type: none"> <li>▪ Trained patrol officers to assist detectives with the investigation of low level child abuse and neglect cases.</li> <li>▪ Discontinued after survey revealed that detectives did not find assistance useful.</li> </ul>
	Municipal Court case tracking	PAO liaison KCPD liaison	Child abuse and neglect cases in the KIDSAFE target area	10/1999-ongoing	<ul style="list-style-type: none"> <li>▪ Established a victim advocate position for child abuse and neglect cases at the Municipal Court.</li> <li>▪ Facilitated changes in Municipal Court that allow all child abuse and neglect cases to be heard by the same judge.</li> </ul>



**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Change Projects (continued)	Family Court Drug Court	Family Court	Jackson County	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Established Drug Court with Family Court to ensure treatment for drug addicted parents.</li> <li>▪ Filed drug-exposed infant cases.</li> </ul>
	Protocols for child abuse and neglect investigations	KC School District DFS  KCPD	Jackson County	1998-99	<ul style="list-style-type: none"> <li>▪ Developed protocol for child abuse and neglect investigations that involve school staff.</li> <li>▪ Developed protocol for DFS and Sex Crimes Unit detectives to co-investigate all sexual abuse cases.</li> <li>▪ Developed protocol for children found in methamphetamine sites.</li> </ul>
	Procedures for Drug Abatement Response Team (DART)	DFS KCPD	Jackson County	1999	<ul style="list-style-type: none"> <li>▪ Assigned DFS workers to DART to assure safety of children.</li> <li>▪ Developed DART checklist to track these cases.</li> </ul>
	Procedures for transfer of Municipal Court child abuse and neglect cases to Family Court	Family Court KCPD	CAN cases in Kansas City	1999	Developed a referral process for KCPD to transfer Municipal Court cases to Family Court.
	Restitution Therapy Program	PAO liaison	Child sexual abuse perpetrators in Jackson County	10/1999-6/2002	<ul style="list-style-type: none"> <li>▪ Trained prosecuting attorneys and DFS staff on program.</li> <li>▪ Identified, screened, and served appropriate clients.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform and Change Projects (continued)	Guidelines for pediatric condition falsification	PAO liaison	Jackson County	2000	<ul style="list-style-type: none"> <li>▪ Developed guidelines for evaluation of suspected child abuse and neglect by pediatric condition falsification.</li> <li>▪ Arranged MOA signed by all public agencies to follow the guidelines.</li> </ul>
	Structured decisionmaking	KIDSAFE Council	DFS	2/2001-2/2003	<ul style="list-style-type: none"> <li>▪ Served on task force that developed structured decisionmaking tools for hotline and dual track decisions.</li> <li>▪ Prepared policy and procedures manual and conducted training.</li> <li>▪ Piloted tools in Jackson County.</li> <li>▪ Implemented tools statewide.</li> </ul>
	Child welfare accreditation	KIDSAFE Council	DFS	2/2001-2002	<ul style="list-style-type: none"> <li>▪ Supported accreditation site visit to Jackson County.</li> <li>▪ Stalled due to statewide budget crisis.</li> </ul>
	Procedures for drug exposed infants	PAO liaison	Jackson County	2001	Developed procedures for filing these cases with Family Drug Court.
	Procedures for missing children	PAO liaison	Jackson County	2002	Developed procedures for handling these cases across different agencies (DFS, KCPD, Family Court, and GAL).

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services</b>					
Prevention and Early Intervention Activities	Neighborhood Services Initiative	KIDSAFE	KIDSAFE target area	4/1999-ongoing	<ul style="list-style-type: none"> <li>▪ Funded grantees to perform services in the target area such as parent support programs, grandparent support programs, youth programs, and community prevention programs.</li> <li>▪ Increased referrals and participation in services.</li> </ul>
	DFS Outbased Workers and Community Initiative Team	KIDSAFE DFS liaison	KIDSAFE target area	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Identified appropriate sites in the target area.</li> <li>▪ Discussed resource needs and shared information with outbased workers through monthly meetings of Community Services Team.</li> </ul>
	Emergency Assistance Fund	KIDSAFE	KIDSAFE target area	12/1999-7/2001	<ul style="list-style-type: none"> <li>▪ Provided funds to address physical needs of at risk and DFS-involved families.</li> <li>▪ Discontinued due to lack of referrals.</li> </ul>
	Mobil Community Outreach Police Station	KIDSAFE	KIDSAFE target area	2002-ongoing	Provided child abuse and neglect information and resources.
	Safe Havens (formerly Neighborhood Hubs)	KIDSAFE	KIDSAFE target area	2001-ongoing	<ul style="list-style-type: none"> <li>▪ Continued and initiated programming in areas of family support and youth development.</li> <li>▪ Purchased equipment for youth activities.</li> <li>▪ Awarded NSI grant.</li> <li>▪ Awarded Prevention Grants.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Intervention and Treatment Activities	Neighborhood Services Initiative	KIDSAFE	KIDSAFE target area	4/1999-ongoing	<ul style="list-style-type: none"> <li>▪ Funded grantees to perform services in the target area such as home visitation, case management, crisis referral, and therapy.</li> <li>▪ Increased referrals and participation in services.</li> </ul>
	DFS Outbased Workers and Community Initiative Team	DFS liaison	KIDSAFE target area	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Identified appropriate sites in the target area.</li> <li>▪ Discussed resource needs and shared information with outbased workers through monthly meetings of Community Initiative Team.</li> </ul>
	Heart of America Family Services	KIDSAFE	KIDSAFE target area	2/2001-ongoing	Started new services such as tutoring, wellness and self esteem programs for youth under the Family Empowerment Program.
<b>Data Collection and Evaluation</b>					
Local Monitoring and Evaluation	Needs assessment	Local evaluator	KIDSAFE target area	5/1998	<ul style="list-style-type: none"> <li>▪ Completed needs assessment of the target area that described the community and its strengths and weaknesses in child abuse and neglect prevention and intervention services.</li> <li>▪ Used results to guide NSI.</li> </ul>
	Evaluation Plan	Local evaluator	KIDSAFE	12/1998	Laid out plans for gathering information on each program component.

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
Local Monitoring and Evaluation (continued)	Case Review Team database and reports	Local evaluator	KIDSAFE target area	11/1997-6/2000	Produced quarterly reports providing descriptive information on reviewed cases.
	NSI process evaluation	Local evaluator	NSI grantees	4/1999-ongoing	Produced quarterly reports on grantees with information on population served and activities performed.
	Community agency survey	Local evaluator	Community agencies in the KIDSAFE target area	2001	Surveyed community agencies in the target area to develop priorities for new training and service initiatives.
	System survey	Local evaluator	Agencies in the KIDSAFE target area	2001	Surveyed participants from different systems to examine relationships among agencies to guide cross-agency training efforts.
	Community impact survey	Local evaluator	Service providers in the KIDSAFE target area	2001	Assessed resources by listing service providers and types of services available in target area.
	Prevention grant evaluations	Local evaluator	Prevention grantees	4/2001-ongoing	Described the activities, documented the number of attendees, and discussed the perceived impact of each prevention grantee.
	Consumer satisfaction survey	Local evaluator	Clients of NSI grantees	2002	Surveyed clients of NSI grantees to determine their satisfaction with services received.
	Training evaluations	Local evaluator	Training session participants	1999-ongoing	Surveyed participants at each training session conducted or supported by KIDSAFE to guide future training efforts.

**Table C-1. KIDSAFE Implementation Activities (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
Multisystem Case Analysis	Multisystem child abuse survey	KIDSAFE	PSP agencies	7/1999-ongoing	<ul style="list-style-type: none"> <li>▪ Developed survey forms to collect data on sample of 40 cases in each of two different time periods.</li> <li>▪ Collected data and prepared report of findings.</li> <li>▪ Prepared draft report on findings.</li> </ul>
MIS Development and Information Sharing	Electronic access to agency databases	KIDSAFE	PSP agencies	2/1998-2001	<ul style="list-style-type: none"> <li>▪ Facilitated judicial orders authorizing information sharing among agencies.</li> <li>▪ Supported efforts to provide agency staff with access to each other's databases.</li> <li>▪ Trained PSP agency staff on how to use other agency databases.</li> <li>▪ Prepared protocols for accessing DFS and Family Court databases.</li> </ul>
	E-mail access for agency and liaison staff	KIDSAFE	PSP agencies	11/1998-2000	Ensured that PSP agency staff have access to e-mail.
	Integrated information systems	KIDSAFE	PSP agencies	8/2002-ongoing	<ul style="list-style-type: none"> <li>▪ Received technical assistance support to plan the development of an integrated information sharing system for the PSP.</li> <li>▪ Convened planning meetings with PSP agencies.</li> <li>▪ Expect to develop a plan for system.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

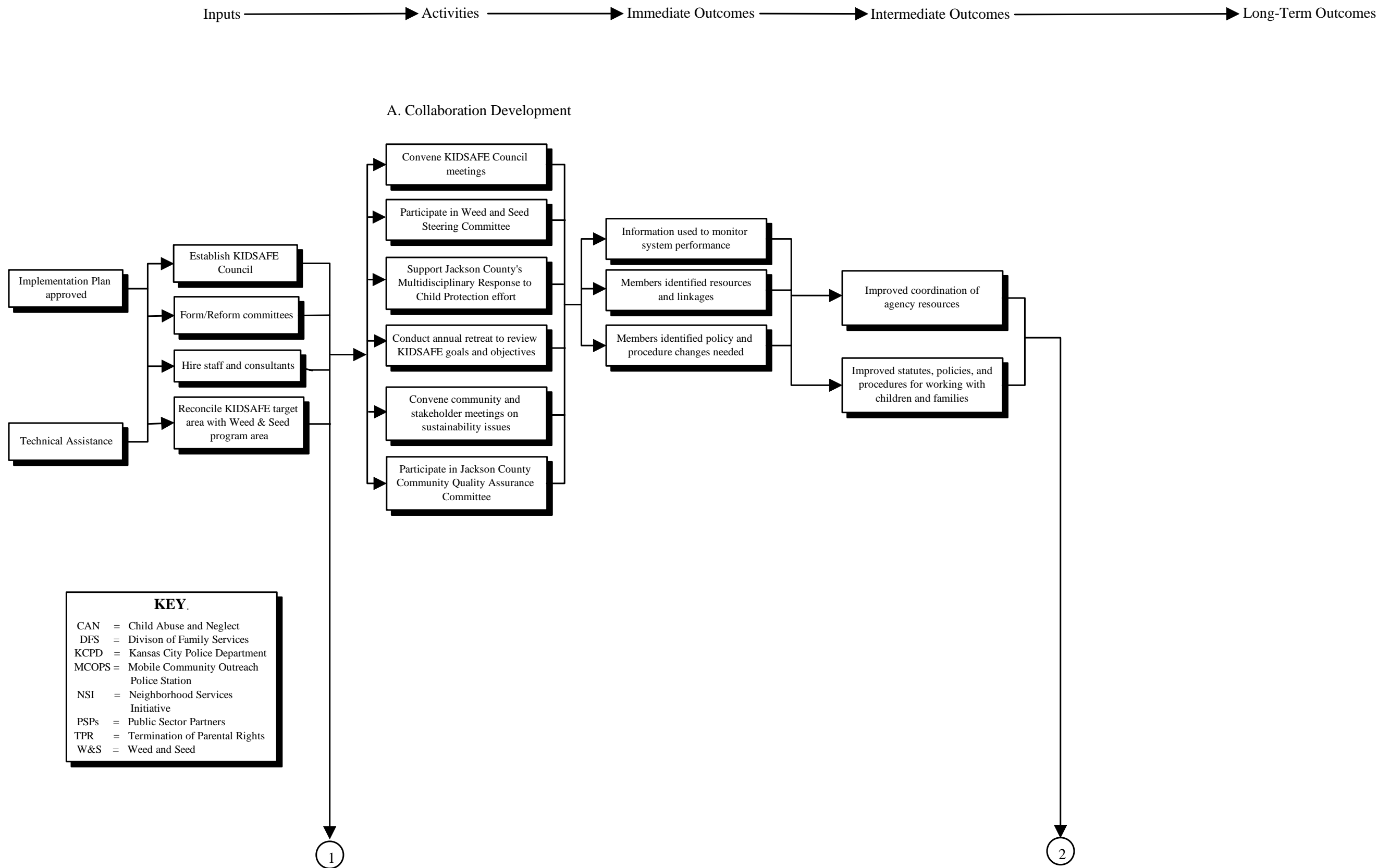
Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information</b>					
	Protect Your Child Day activities	KIDSAFE	Jackson County	June 1998-ongoing	Educated community on child safety and protection issues with informational fliers and brochures.
	Child Abuse Prevention Month activities	KIDSAFE	Jackson County	April 1999-ongoing	<ul style="list-style-type: none"> <li>▪ Disseminated information about child abuse prevention to community members.</li> <li>▪ Sponsored community prevention events.</li> </ul>
	Community and neighborhood events	KIDSAFE	KIDSAFE target area	1999-ongoing	Distributed prevention and resource information to community at numerous events (block parties, community fairs, back to school events, etc.).
	Community training/public awareness program	KIDSAFE	Jackson County	2/2000-ongoing	<ul style="list-style-type: none"> <li>▪ Educated community on child safety and protection issues.</li> <li>▪ Shared resource information with the community.</li> </ul>
	Prevention Grants	KIDSAFE	KIDSAFE target area	4/2001-ongoing	Funded community groups to conduct child abuse and neglect prevention activities.
	Grassroots Capacity Grants	KIDSAFE	Community agencies in the KIDSAFE target area	3/2002-ongoing	<ul style="list-style-type: none"> <li>▪ Funded grassroots organizations to design and operate a prevention program.</li> <li>▪ Built capacity of grassroots organization to respond to run programs</li> </ul>
	Primer's Training	KIDSAFE	Community agencies in the KIDSAFE target area	2001-ongoing	<ul style="list-style-type: none"> <li>▪ Provided training on grant writing, fundraising, collaboration, and outcome measurement to grassroots organizations in target area.</li> </ul>

**Table C-1. KIDSAFE Implementation Activities (continued)**

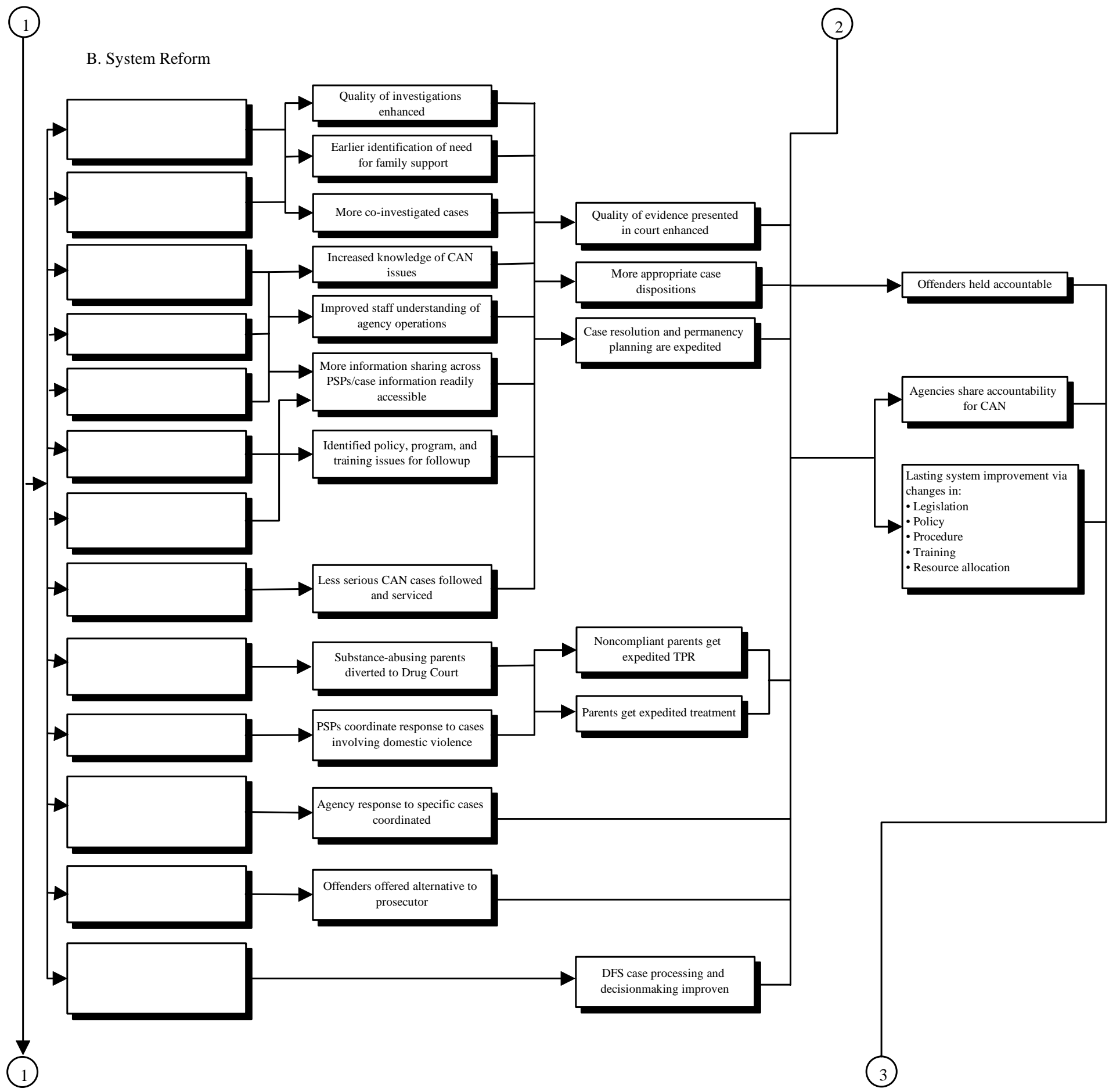
Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information (continued)</b>					
	Training on parental involvement in public education and community prevention	KIDSAFE	Jackson County	7/2002-ongoing	<ul style="list-style-type: none"> <li>▪ Trained KS staff to work as facilitators and trainers of the ACT Against Violence Program.</li> <li>▪ Plans to sponsor training workshop during Child Abuse Prevention Month.</li> </ul>
	Training on public policy and legislative advocacy	KIDSAFE	Community agencies in the target area	9/2002	Conducted workshop on understanding and effecting public policy process for community partners.
	Training on KIDSAFE neighborhood initiatives and grassroots organizations	KIDSAFE	KCPD East Patrol officers	9/2002	Educated East Patrol officers on the public awareness, prevention, and service activities of grassroots organizations in the target area.

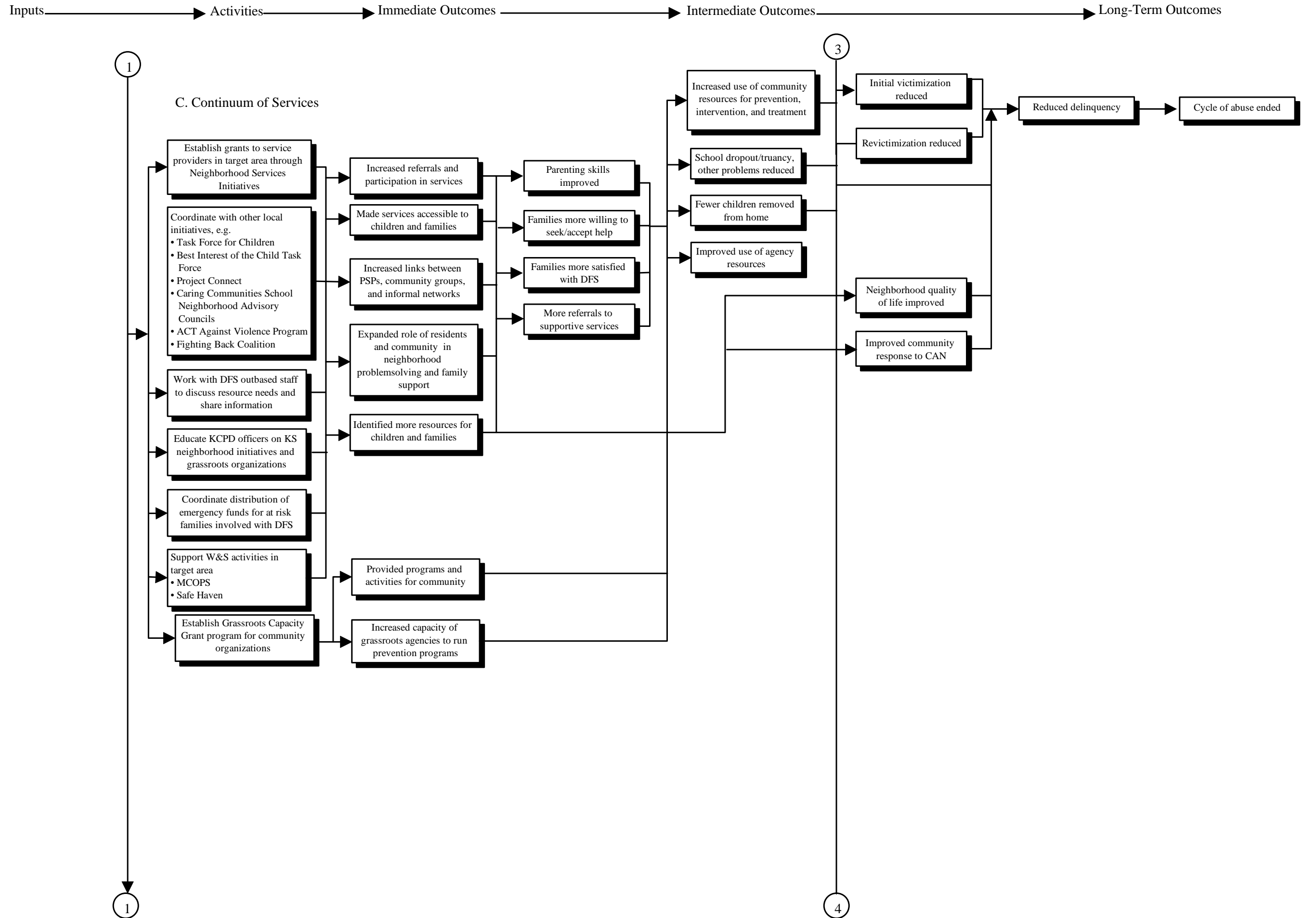


**Figure C-1. Logic Model for Kansas City KIDSAFE: Implementation Phase**

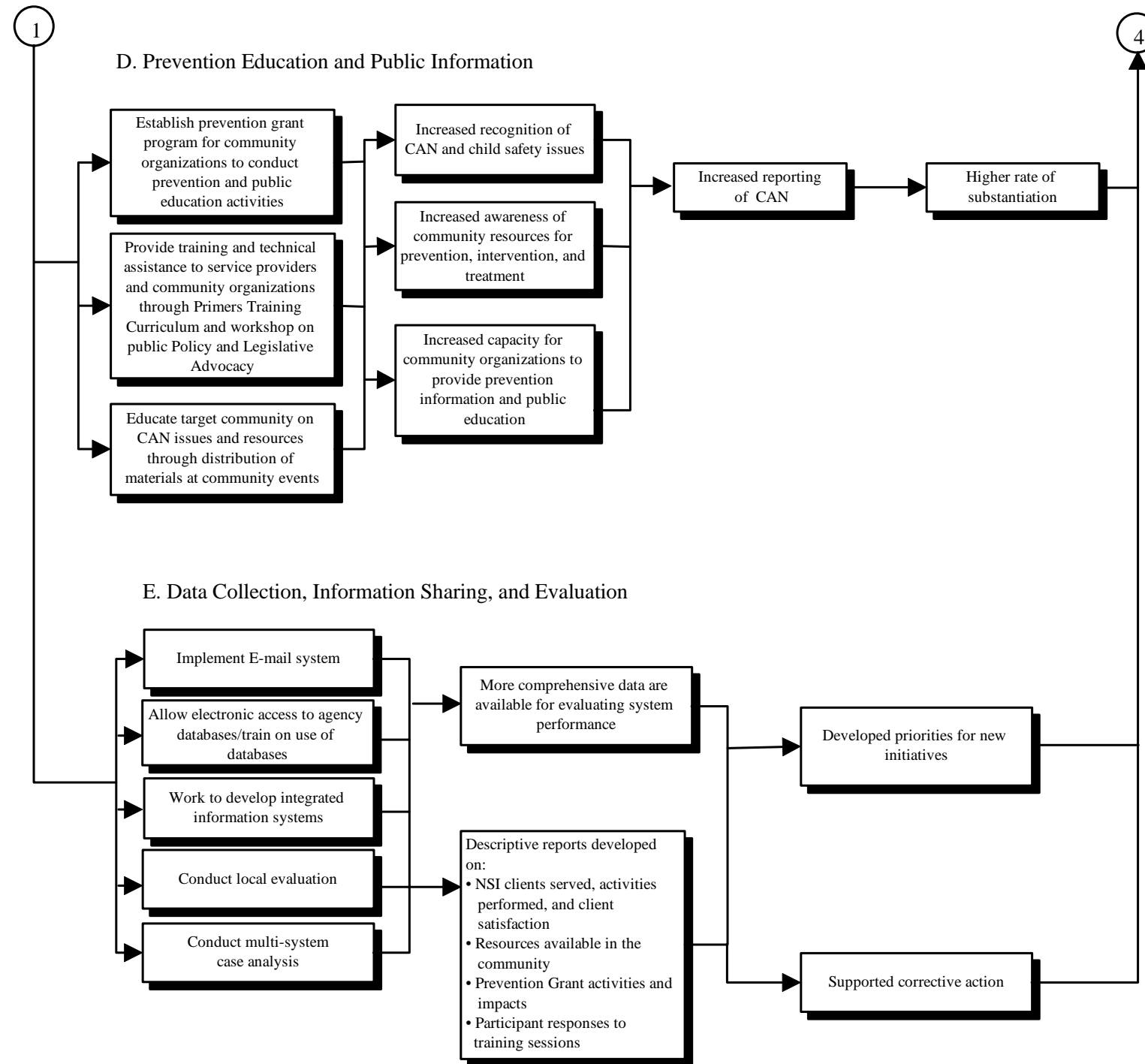


Inputs → Activities → Immediate Outcomes → Intermediate Outcomes → Long-Term Outcomes





Inputs → Activities → Immediate Outcomes → Intermediate Outcomes → Long-Term Outcomes



## **5. Safe Kids/Safe Streets, Sault Ste. Marie, Michigan**

Anishnabek Community and Family Services (ACFS), a Tribal social service agency, was the lead agency and grant fiduciary for the Sault Ste. Marie Safe Kids/Safe Streets (SK/SS) project. The project focused on preventing child abuse and neglect in families that are members of the Sault Ste. Marie Tribe of Chippewa Indians located in the Eastern Upper Peninsula of Michigan. The project—Building Strong Native American Families (BSNAF)—was awarded five grants of \$425,000 from 1997 until 2003; however, it did not expect to start using its fifth grant until September 2003. It is anticipated that the Office of Justice Programs (OJP) will invite the project to submit an application for a sixth transitional grant (\$125,000) to support sustainability efforts.

Funding for the program was provided by the Office on Violence Against Women (OVW) within OJP. The project also took advantage of support provided through OJP's technical assistance network, including help from the National Center for State Courts, the Child Welfare League of America (CWLA), American Indian Development Associates, the National Civic League, and Fox Valley Technical College. Additional efforts to address one of the goals of the program, developing a Tribal Children's Advocacy Center (CAC), was supported through a \$30,000 planning grant from the National CAC Training Center.

### **Project Setting**

#### **Grantee**

ACFS provides many social service programs to members of the Sault Ste. Marie Tribe of Chippewa Indians. Its mission is “to promote, advocate, and develop programs that will maintain individual dignity, support family life, promote personal growth with our cultural and spiritual heritage.”<sup>80</sup> Providing child protective services—investigating reports, monitoring families involved in child abuse and neglect, and placing children when needed—is one of the agency's many functions. ACFS is one of several agencies that provide services to Sault Tribe members and is a division of the Sault Tribe government. Other Tribal service agencies include Education, Health, Housing, and the Tribal Court.

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<sup>80</sup> The Sault Ste. Marie Tribe of Chippewa Indians *2002 Annual Report*.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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ACFS was founded in 1978 with one employee and now employs more than 80 people. Funding is provided primarily by the Tribal government and Federal and state grants. The total budget has increased significantly since SK/SS was originally awarded, due, in part, to successful grant applications to the Substance Abuse and Mental Health Services Administration (SAMHSA), OJP, and the Bureau of Indian Affairs (BIA). Table 5-1 displays the total ACFS budget from 1997-2002.

1997	\$4,727,840
1998	5,796,940
1999	5,584,232
2000	7,092,451
2001	7,412,218
2002	7,538,744

### **Characteristics of the Community**

The target area for BSNAF consists of the seven counties in the Eastern Upper Peninsula of Michigan. Project activities initially focused in Chippewa and Mackinac Counties, where there is a higher concentration of Tribal members. Later, as planned, they expanded to Schoolcraft County, located in what is commonly referred to as the Western service end. The seven-county area is rural and sparsely populated. It is approximately 90 miles wide and 225 miles long, with a population density of 20.6 persons per square mile. The Tribal population density overall is estimated at only 1.33. The area also includes several islands in the Great Lakes that are accessible only by ferry.

### ***Target Population***

The target population is families who are members of the Sault Tribe of Chippewa Indians and live in the seven counties in the Upper Peninsula. The Tribe is a federally recognized Indian Tribe, headquartered in Sault Ste. Marie (Chippewa County), and is a sovereign nation. The Tribe has approximately 27,700 members. It is estimated that less than half live permanently in the seven-county area. The Tribe does not live on a contiguous land base or reservation; therefore, the vast majority of Sault Tribe families with children live off trust/reservation land, which brings them into frequent contact with county and state governmental agencies. The original target Tribal population included 2,763 families in Mackinac County and Chippewa County, of which 2,496 lived off of trust/reservation land.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

These two counties, the primary focus of the SK/SS project in the first several years, are located in the easternmost portion of the catchment area. They are within easy physical reach of the ACFS main service building, based in Sault Ste. Marie, the economic hub of the seven-county area. Selected characteristics of the Tribal population are displayed in Table 5-2 below.

<b>Table 5-2. Sault Ste. Marie Tribe of Chippewa Indians Population and Population Density by County<sup>a</sup></b>							
<b>County</b>	<b>Total population</b>	<b>Sault Tribe population</b>	<b>Sault Tribe families with children under 18 on Trust Land</b>	<b>Tribal families with children under 18 off of Trust Land</b>	<b>Square miles</b>	<b>Total population density</b>	<b>Sault Tribe population density</b>
Chippewa	34,604	5,565	168	1,271	1,561	22.2	3.57
Mackinac	10,674	2,678	41	552	1,021	10.56	2.62
Luce	5,763	346	17	70	903	6.4	0.38
Alger	8,972	487	9	102	918	9.8	0.53
Marquette	70,887	668	2	136	1,821	39.0	0.37
Schoolcraft	8,302	802	15	173	1,178	7.0	0.68
Delta	37,780	878	15	192	1,170	32.3	0.75
<b>Total</b>	<b>176,982</b>	<b>11,424</b>	<b>267</b>	<b>2,496</b>	<b>8,572</b>	<b>20.6</b>	<b>1.33</b>

<sup>a</sup> Data are from BSNAF Implementation Plan, February 1999.

The BSNAF project was motivated by perceived shortcomings of the local social services delivery systems and other child welfare concerns. Results of a survey of Tribal members attending the August 1997 Sault Tribe’s National Assembly revealed significant concerns about child and family functioning. Respondents (N=170) identified child abuse (69%), child neglect (66%), lack of parenting (61%), lack of family values (61%), and substance abuse (62%) as significant problems facing Sault Tribe families. Respondents recommended that Tribal service providers improve their attitudes towards families (53%) and provide “one stop shopping” for accessing services (38%) as ways of making the child welfare system more responsive to the needs of Tribal families.

In the past, a major source of problems was the lack of employment opportunities and consequent financial stress. The development of the Tribal gaming industry and other Tribal enterprises has reduced this problem to a degree. In fact, the Tribe has become an economic force in the region, serving as the largest employer in the Upper Peninsula. Data presented in Table 5-3 indicate a significant increase in the median income from 1990 to 2000 (over 40%).

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

**Table 5-3. Selected Demographic Characteristics Comparing Chippewa and Mackinac County, Michigan, and U.S.<sup>a,b</sup>**

<b>Characteristics</b>	<b>Mackinac County</b>	<b>Chippewa County</b>	<b>Michigan</b>	<b>United States</b>
Population total (2000)	11,943	38,543	9,983,444	281,421,906
Population percent change 1990-2000	11.9%	11.4%	6.9%	13.1%
Percentage of population under 18 (2000)	22%	21%	26.1%	25.7%
Median income				
1990	\$19,397	\$21,449	N/A	N/A
2000	\$28,367	\$30,477	\$44,667	\$41,994
Percentage change	46%	42%	N/A	N/A
Percentage of persons below poverty level (2000)	10.5%	12.8%	10.5%	12.4%
Percentage of children below poverty level				
1990	22%	21%	N/A	N/A
2000	14%	16%	13.9%	17%
Percentage change	-36%	-23%	N/A	N/A
Percentage of children in single-parent families				
1990	19.4%	20%	N/A	N/A
2000	22%	28%	21.9%	24.5%
Percent change	+13%	+39%	N/A	N/A
Percentage of students receiving free and reduced price lunches (2000)	44.3%	37.2%	31.3 %	N/A
Percentage of high school dropouts (ages 16-19)				
1990	9%	9%	N/A	N/A
2000	12%	8%	11%	
Percent change	+24%	-11%	N/A	
High school graduates, percentage of persons age 25+	82.5%	85.4%	83.4%	80.4%
Bachelor's degree or higher, percentage of persons age 25+	14.9%	15.0%	21.8%	24.4%

<sup>a</sup> U. S. Census Bureau. (2003). *State and County Quick Facts*. <http://www.quickfacts.census.gov>

<sup>b</sup> *Kids Count* data online. <http://www.aecf.org>

However, many jobs still pay low wages, and many of the families are “working poor.” According to the BIA Labor Force Report of 1997, 22 percent of the employed Tribal population was still below the poverty level.



## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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Other problems include high rates of alcoholism, rural isolation, and poor parenting skills. Poor parenting skills may reflect the legacy of Federal policies that forced Native American families to send their young children away from home to either government-run or Christian-run boarding schools. This system, which was in practice from the 1880s through the 1960s, severely damaged the transmission of tribal culture (e.g., boarding schools prohibited children from speaking their native languages) and disrupted childrearing and the adoption of healthy parenting practices. In addition to the boarding school phenomenon, an “Indian Adoption Era” occurred in the 1960s, when the CWLA cooperated with the BIA in an “experiment” that resulted in hundreds of Native American Indian children being removed from their homes and placed for adoption in non-Indian families. Other policies over the past century generally supported the deculturation and assimilation of Native American Indians and resulted in family separation, disruption, and historical trauma.<sup>81</sup> The Sault Tribe is currently experiencing a cultural renaissance and is very actively engaged in restoring many of the Native cultural practices that were lost as a result of this history. The SK/SS project played a significant role in the reculturation process.

Table 5-3 shows some selected characteristics of Chippewa and Mackinac Counties compared to Michigan and the nation as a whole. Several changes from 1990 to 2000 are worth noting. The percentage of children living in poverty significantly decreased (by 36% in Mackinac County and 23% in Chippewa County). The reduction of child poverty may be related to the more than 40 percent rise in the median income in both counties, although income remains lower than the state and national medians in 2000. The reduction in child poverty is particularly interesting considering that the proportion of children living in single parent families increased significantly in Chippewa County (by 39%) and increased somewhat in Mackinac County (by 13%). Also of note was an increase in the high school dropout rate in Mackinac County (33%) and a reduction in the high school dropout rate in Chippewa County (13%). The data in this table reflect the total population, as specific data for the Tribal population were not available.

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<sup>81</sup> Bilchik, S. , Transcript of CWLA Apology Speech given at the National Indian Child Welfare Association National Conference, Anchorage, Alaska, April 23-25, 2001; and

Halverson, K., Puit, M.E. & Byers, S.R., "Culture Loss: American Indian Family Disruption, Urbanization, and the Indian Child Welfare Act," *Child Welfare*, 81(2), 2002.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

### ***Rates of Child Abuse and Neglect***

Child abuse and neglect were another result of historical trauma and other stressors on Sault Tribe families and children. According to the project’s original grant application, between 1991 and 1996, ACFS child protective services workers handled 154 substantiated reports, with 342 children placed out-of-home. In 1997, ACFS reported it received 54 reports of suspected maltreatment for children on trust/reservation land. Eighteen were substantiated, and 12 of these cases resulted in Tribal Court dependency proceedings; however, very few substantiated maltreatment cases led to the criminal prosecution of the perpetrators. Additionally, the SK/SS proposal indicated that 157 juveniles came under the jurisdiction of the Tribal Court between 1994 and 1996. Specific child welfare indicators, including county data on child abuse and neglect, are discussed in the results section of this report; additional data appear in Appendix Table D-1.

### ***Child Abuse Definitions and Mandated Reporters***

Table 5-4 displays the definitions of child abuse according to the Tribal code, the Indian Child Protection and Family Violence Act, and Michigan.

<b>Table 5-4. Definitions of Child Abuse, Sault Ste. Marie, MI</b>	
Saulte Ste. Marie Tribe of Chippewa Indians <sup>a</sup>	Abuse means the infliction of physical or mental injury including the failure to maintain reasonable care and treatment to such an extent that the child’s health, morals, or emotional well-being is endangered.
Indian Child Protection and Family Violence Act <sup>b</sup>	Child abuse includes- A) any case in which 1) a child is dead or exhibits evidence of skin bruising, bleeding, malnutrition, failure to thrive, burns, fracture of any bone, subdural hematoma, soft tissue swelling, and 2) such condition is not justifiably explained or may not be the product of an accidental occurrence; and B) any case in which a child is subjected to sexual assault, sexual molestation, sexual exploitation, sexual contact, or prostitution.
State of Michigan <sup>c</sup>	Child abuse means harm or threatened harm to a child’s health or welfare by a parent, legal guardian, or any other person responsible for the child’s health or welfare or by a teacher or teacher’s aide that occurs through nonaccidental physical or mental injury; sexual abuse; sexual exploitation; or maltreatment.
<sup>a</sup> Tribal Code 30.304, 1981, revised 2003. <sup>b</sup> Indian Child Protection and Family Violence Prevention USC: Title 18, Section 1169. <sup>c</sup> Child Protection Law, Act No. 238, Public Acts 1975, as amended, Section 722.621.638, Michigan Compiled Laws.	

## Child Abuse and Neglect System<sup>82</sup>

The Tribal and non-Tribal investigation and intervention systems for child abuse and neglect cases among Tribal families are guided by the Indian Child Welfare Act (ICWA) passed in 1978. ICWA established roles and responsibilities for Federal, state, and Tribal governments and was designed to:

“protect the best interests of Indian children and to promote the stability and security of Indian tribes and families by the establishment of minimum Federal standards for the removal of Indian children from their families and the placement of such children in foster or adoptive homes which will reflect the unique values of Indian culture, and by providing assistance to Indian tribes in the operation of child and family service programs”.<sup>83</sup>

In addition, the Indian Child Protection and Family Violence Prevention Act of 1990 (P.L. 101-630) established mandatory reporting requirements for child abuse and neglect on Indian reservations as well as required background investigations for Federal or Tribal employees who interact with children; however, the bill was never sufficiently funded to implement the policies and procedures outlined, and regulations were not adopted. A U.S. Senate bill to amend the Act was proposed in 2003 and is currently in the Committee on Indian Affairs.<sup>84</sup>

Due to ICWA, the case flow for child abuse and neglect for Sault Tribal members differs depending on where the child lives. For the most part, in cases of adoption or custody, the state system does not have jurisdiction over Native American Indian children who live on a reservation, and tribes have jurisdiction over proceedings involving any Indian child who is a ward of the Tribal Court, regardless of where the child lives.<sup>85</sup> In Sault Ste. Marie, child abuse and neglect cases that involve a victim who lives on reservation/trust land are investigated

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<sup>82</sup> The following discussion of the case flow of child abuse and neglect cases is based on interviews with key informants, a review of the Sault Ste. Marie Tribe of Chippewa Indians Tribal Child Welfare Code (accessed at: <http://www.saulttribe.org/law/childwelfare.html>), the BSNAF Implementation Plan of February 1999, and review of the Tribally Specific Protocol for Child Abuse and Neglect, Sault Tribe Multidisciplinary Team, 1995, Updated November, 2002.

<sup>83</sup> Public Law No. 95-608, 25 U.S.C.A. §§ 1901-1963.

<sup>84</sup> Legislative Update, United States Senate Committee on Indian Affairs 108th Congress, accessed on the Internet at: [http://indian.senate.gov/108\\_leg.htm](http://indian.senate.gov/108_leg.htm) and Earle, K.A., *Child Abuse and Neglect: An Examination of American Indian Data*, National Indian Child Welfare Association, Casey Family Program publication, 2000.

<sup>85</sup> Earle, K.A., & Cross, A., *Child Abuse and Neglect Among American Indian/Alaska Native Children: An Analysis of Existing Data*, National Indian Child Welfare Association, Casey Family Program publication, 2001.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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through Sault Tribal systems and governed by the Child Welfare Code of the Tribe.<sup>86</sup> However, sexual abuse cases that occur on reservation/trust land or involve a child who lives on reservation/trust land are co-investigated with the Federal Bureau of Investigation and prosecuted in Federal Court. The Michigan system, including the Family Independence Agency (FIA) and local police, investigate cases that involve Tribal children who live off reservation. In some cases, if the parent does not object, cases can be transferred from state to Tribal Court.

### ***Child Abuse and Neglect Cases On Reservation/Trust Land***

ACFS has been involved in issues related to child abuse and neglect since its founding. The agency works with the Tribal Court and the Tribal Child Welfare Committee in child welfare matters involving Sault children who live on trust/reservation land. ACFS conducts child abuse and neglect investigations, provides services to children and their families when a case of abuse has been alleged and/or substantiated, and supervises out-of-home placements for Sault Tribe children. In addition, ACFS works with the state child welfare system in providing foster care services to Sault Tribe children who reside off trust/reservation land.

### ***Intake and Investigation***

Allegations of child abuse/neglect are investigated based on where the child lives. When cases involve a child who lives on trust/reservation land, the investigation must begin within 24 hours. This requirement can be waived to a maximum of 72 hours with a supervisor's approval. An ACFS casework supervisor conducts a review of all referrals. S/he can either screen the case out and require no further action; recommend voluntary participation in services because the family is under stress or otherwise in need of services; or assign the case to a caseworker for further investigation.

The ACFS protective services worker (PSW) has 21 days to complete an investigation. The PSW can screen out the case within 48 hours, taking no action but offering

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<sup>86</sup> “The Tribal Children’s Court shall have exclusive and original jurisdiction of all child welfare proceedings when the subject child is a resident of or domiciled upon the trust lands of the Sault Ste. Marie Tribe of Chippewa Indians. The Tribal Court shall have concurrent jurisdiction in proceedings involving a child who is a member of the Sault Ste. Marie Tribe of Chippewa Indians or who is eligible for membership and is the biological child of a Tribal member. The Tribal Court shall also have jurisdiction over child welfare proceedings transferred pursuant to the Indian Child Welfare Act.” From the *Child Welfare Code of the Sault Ste. Marie Tribe of Chippewa Indians*, accessed at: <http://www.saulttribe.org/law/childwelfare.html>.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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voluntary services with the approval of the casework supervisor or Family Support Services program manager. If the case is not screened out, the PSW must further investigate in order to determine if the abuse allegation can be substantiated. If the case is substantiated, the PSW develops a treatment plan that includes a social history, identified needs of the family as a whole and of individual family members, and service goals that would help individuals and the family improve in functioning. The goal in the overwhelming majority of substantiated cases is to provide remediation services so that the family can stay together.

Substantiation of a child abuse/neglect allegation does not mean that the case will go to court or the child will be removed from the home. The PSW has three options that can be implemented depending on the severity of the case and the cooperation provided by the parents and/or primary caretaker.

The first option allows the child to remain in the home, with no petition filed to request Tribal Court intervention. In this case, ACFS and other Tribal organizations provide services consistent with the severity of the case and the needs of the family and/or individual family members. The PSW arranges services, monitors the family's functioning, and makes unscheduled weekly visits. These in-person contacts are designed to continue the assessment of the family's situation. Services are provided continuously, with quarterly re-evaluations until problems are resolved and service goals have been achieved.

The second option for a substantiated child abuse/neglect case allows the child to remain in the home, with the Tribal Court monitoring service compliance. In this instance, services similar to those described above are provided. The Court then conducts quarterly re-evaluations to determine if problems have been resolved and/or service goals have been achieved.

A final option for substantiated child abuse/neglect cases is to remove the child from the home and file a petition with Tribal Court. The casework supervisor, Family Support Services program manager, and ACFS division director work with the PSW in making this recommendation. ACFS immediately notifies Tribal Court and seeks alternative placement for the child(ren). Children can be placed with relatives (first choice), the home of another Native American family (second choice), or in a non-Native home (third choice). There is also a Tribal Child Welfare Committee that reviews and makes recommendations to the Court regarding continued jurisdiction. The committee is responsible for:

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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- Monitoring placement of children in all child custody proceedings;
- Making recommendations to the Tribal Court concerning adoptions, guardianship, or termination of parental rights, and the appropriate disposition of any child in need of care;
- Establishing Tribal policies and priorities regarding implementation of ICWA, and creating exceptions to such policies; and
- Making recommendations regarding intervention in state court proceedings and transfers to Tribal Court.<sup>87</sup>

### ***Prosecution and Court Process***

The Tribal Court, created in 1983, consists of one chief judge and four associate judges appointed by the Tribal Board of Directors. The court has jurisdiction over the Sault Tribe reservation land. There is a Tribal prosecutor assigned to child abuse and neglect cases. As of 2002, defense attorneys have been assigned to represent families through an indigent defense program. The Indian Civil Rights Act limits the Tribal court's sentencing ability; it may impose only a 1-year term of imprisonment and/or a \$5000 fine. Tribal courts also do not have full jurisdiction over non-Indians even if they commit crimes on reservation/trust land, although they can impose civil jurisdiction and mandate treatment services for the victim and/or family. In serious abuse cases (such as sexual abuse) and other major crimes, investigation may be shared with non-Tribal agencies; however, prosecution falls under the jurisdiction of the U.S. Attorney, and cases are tried in Federal Court.

When removal of children from the home is necessary, Tribal Court procedures are immediately activated. A preliminary hearing is held within 48 hours of the child's removal. Options in Tribal Court are similar to those in local jurisdictions: (1) dismiss the petition if there are insufficient grounds for intervention; (2) refer for disposition if the perpetrator admits; or (3) hold a trial if the alleged perpetrator disputes the charge. Very few cases go to trial. Guilty findings are referred to the Tribal judge for disposition. Disposition involves providing services to the family, the alleged perpetrator, and the child, with quarterly review hearings conducted by the Tribal Judge. When sufficient progress has been made, the child can be returned to the home, with 3 months of aftercare supervision. Cases are closed if continuing risk to the child is sufficiently reduced. If progress has been insufficient, parental rights of the perpetrator can be terminated and the child placed for adoption or long-term foster care. The

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<sup>87</sup> Sault Ste. Marie Tribe of Chippewa Indians, Tribal Court 30.1207.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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Tribal Child Welfare Committee also reviews the case to ensure that appropriate services are being provided.

The Court initiated a Tribal court-appointed special advocate (CASA) program in 2000, but struggled with recruiting enough volunteers for it to be sustainable.

### ***Multidisciplinary Team***

The Sault Tribe uses a multidisciplinary team (MDT) in the investigation of child abuse and neglect cases for all referrals of alleged serious physical and sexual abuse that occurs on trust/reservation land. The MDT coordinates and plans the investigation of these cases to reduce trauma to the child victim. The MDT is facilitated by the Tribal Prosecutor and includes representatives from ACFS Family Services, Sault Tribe Public Safety (i.e., law enforcement), Tribal Community Health, Tribal Medical Personnel, ACFS Mental Health, and Sault Tribe Tribal Court, including a Victim Advocate. The U.S. Attorney and Federal Bureau of Investigation (FBI) agent assigned to the Upper Peninsula also sit on the MDT. In addition, a Child Protection Team (CPT) reviews referrals for further investigation of suspected child abuse and neglect that occur on trust/reservation land. Members of the CPT include direct service professionals with knowledge of child abuse and neglect (e.g., psychiatric social workers, caseworkers, therapists, etc.).

### ***Law Enforcement***

The Sault Tribe Public Safety Office (law enforcement) becomes involved in cases of child abuse and neglect by directly responding to a call or, in cases of severe physical abuse or sexual abuse necessitating investigation, by referral from the Sault Tribe prosecuting attorney. In such cases, it is their responsibility to conduct a preliminary investigation and contact the BIA criminal investigator or FBI special agent when co-investigation is warranted. There are no specialized or dedicated child abuse officers. Tribal Law Enforcement also has responsibility for investigations (and arrests if necessary) of both adult and juvenile criminal activity. As a result of SK/SS, a juvenile officer was hired. Additionally, a new 24-bed Tribal Youth Offender Center is scheduled to open in Mackinac County in March 2004.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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### ***Off-Reservation Child Abuse and Neglect Cases***

#### ***Intake and Investigation***

Child abuse/neglect cases that occur off trust/reservation land are investigated by Michigan's Family Independence Agency (FIA), which also acts as the Tribe's agent when child abuse and neglect allegations are made after hours. In these cases, FIA transfers the case to ACFS on the next working day. Procedures used by FIA are similar to those described above. Child abuse/neglect allegations are first entered into FIA's computer system. Cases are assessed based on the risk of immediate danger or potential harm or injury to the child. Cases are then either screened out because the allegation is invalid or the incident does not rise to the level of abuse or neglect, or the case can be referred for investigation.

When FIA requests an out-of-home placement for the child victim of abuse/neglect, it notifies the Tribe through ACFS and the Tribal prosecutor. The Tribe can let FIA continue the adjudication and disposition of the alleged perpetrator in state court. In this case, it would become "party to the case" with the right to make recommendations regarding disposition. The Tribal Child Welfare Committee makes recommendations for Tribal involvement in these off-trust/reservation land cases.

The Sault Tribe has established an agreement with FIA that allows Tribal children to be placed in the Tribe's state-certified residential group home through the Binogii Placement Agency. Foster care services at Binogii are supervised by ACFS. In addition, the Sault Tribe has established a policy to become involved in all child welfare cases involving Sault Tribe children anywhere in the United States.

#### ***Prosecution and Court Process***

When FIA decides to place a child out-of-home, the agency secures a temporary order from a Family Court judge, who also schedules a preliminary hearing before a referee. The judicial referee has 24 hours to recommend continuance of the case or dismissal. A continuance requires that FIA develop a treatment plan for the child victim and other members of the family, outline a reunification plan, and assist with court preparation. During the Family Court hearing, the prosecutor can (1) amend the charge or (2) leave it as is. The alleged



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perpetrator then has the option of (1) requesting a trial or (2) pleading guilty and requesting disposition of the case.

Disposition allows both FIA and the Sault Tribe to monitor the case via quarterly reviews. The Tribe monitors cases through the Child Welfare Committee and ACFS. The child victim is continued in out-of-home placement until goals of the reunification plan have been achieved. Substantiation of a child abuse/neglect allegation does not mean the case will go to court or that the children will be removed from the home. The FIA's policy is similar to that adopted by Tribal agencies and is guided by Michigan's Family Preservation Program. This program seeks to provide remediation services to help families achieve healthy functioning, imposing court sanctions only for the most severe cases or when the family seems unwilling to cooperate with its prescribed intervention program.

### ***Multidisciplinary Teams***

Suspected child abuse and neglect teams in both Chippewa and Mackinac County meet routinely to review all protective services referrals that FIA has accepted for investigation. These teams also discuss and recommend potential resources for the family. The teams include representatives from human services agencies, mental health professionals, school personnel, and healthcare workers. Mackinac County has also established both a Coordinated Investigative Team that develops and reviews protocols for investigating allegations of child abuse and neglect and a Comprehensive Review Team that reviews and manages cases of severe physical and sexual abuse. The Coordinated Investigative Team includes representatives from the County Prosecutor's Office, FIA, law enforcement, medical personnel, mental health professionals, and the ACFS Family Services program manager. The Comprehensive Review Team includes representatives from human services agencies, mental health professionals, school personnel, and healthcare workers.

### ***Tribal Treatment System for Families Involved in Child Abuse and Neglect***

Both Tribal and non-Tribal systems have adopted a philosophical position to provide remediation services in the vast majority of cases and seek criminal prosecution only for cases involving severe physical and/or sexual abuse. Through the Tribe, the child victim, perpetrator, and family have access to a full range of treatment and other intervention services,

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most of which are directed at helping families stay together. Specific treatment programs administered by the Tribe are outlined in Table 5-5.

<b>Type of service</b>	<b>Agency offering service</b>	<b>Services provided</b>
Mental health services	ACFS Behavioral Health	Outpatient mental health treatment Substance abuse treatment Crisis intervention Case management/wraparound case coordination
Court services	Tribal Court Victim Services Program S.T.O.P. Violence Against Native American Women Program	Crisis intervention Information referral Court advocacy and legal assistance Men’s Education Group Women’s Gathering Lodge Custody exchange Women’s Talking Circle support group
	Tribal Drug Court (Gwaiak Miicon)  Tribal Court Probation Services	Alternative sentencing Substance abuse counseling and referral Pre-sentence investigation Referral monitoring
Child Protective Services	ACFS Child Placement Services	Monitor protective services cases according to ICWA  ACFS Binogii Placement Agency: Foster home licensing, foster care, and adoption services  ACFS Endahyon Group Home: Culturally based therapeutic residential group care

### ***Prevention and Early Intervention System***

Prior to SK/SS, the BSNAF target area lacked coordinated or sustained efforts to identify families at risk of child maltreatment. A number of different groups conducted outreach efforts to community members, mandated reporters, and other individuals and families to provide education, secure referrals, and provide followup counseling and other needed services to individuals and families at risk of child maltreatment. SK/SS has helped to coordinate prevention efforts. The Tribal prevention and early intervention services are outlined in Table 5-6 below.

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**Table 5-6. Child Abuse and Neglect-Related Prevention and Early Intervention Services Provided by Tribal Agencies<sup>a</sup>**

<b>Type of service</b>	<b>Agency offering service</b>	<b>Services provided</b>
Family Support	ACFS Family Support Services	Child and family advocacy Tribal Social Services Intensive home-based services Reunification services for children removed from a home
Head Start and Early Head Start	Tribal Head Start and Early Head Start	Comprehensive child development programs Parent involvement Family financial, food, medical, and transportation assistance
Child care	ACFS	Licensed child care Child care assistance payments Child care licensing and/or certification
Youth	Tribal Youth Education and Activities	Tribal Youth Council After school programs Summer programs Anishnabe future leaders program Circle of Life program
	Tribal Housing Authority	Culture Camps Youth Center Drug Elimination Program
	Tribal Public Safety/Law Enforcement	Juvenile Law Enforcement Officer Jr. Police Academy
Education and outreach	Safe Kids/Safe Streets	Family Fun Nights Winter wear giveaways Culturally specific activity wheel
Spiritual	ACFS	Men's and women's spiritual gatherings

<sup>a</sup> Many of the prevention activities are jointly sponsored by two or more Tribal agencies and also include participation by staff from the Tribe's Cultural Division.

### ***Public Education and Professional Training on Child Abuse and Neglect***

Prior to the SK/SS project, training was primarily agency-specific, duplicative, and not coordinated by any regional body. BSNAF sought to improve both the type and the nature of training offered to both child welfare professionals and members of the Tribal and non-Tribal public. In addition, it hoped to improve the cultural sensitivity and cultural relevancy of the training provided to non-Tribal service providers who have frequent contact with Tribal members living off trust/reservation land. BSNAF's prevention education and professional training on child abuse and neglect are discussed further under Project Implementation.

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### History of the Project

#### Proposal Development

ACFS developed the grant application with no input from other agencies. The Family Support Services program manager/deputy director, the Child Placement Services supervisor, and the Behavioral Health program director authored the proposal, with input from the ACFS division director. It was initiated because of perceived shortcomings in the local services delivery system that negatively affected Sault Tribe families. These shortcomings included:

- A crisis-focused and reactive services delivery system;
- Inadequate attention to cultural values in the development of services;
- A highly fragmented services delivery system;
- Inefficient use of client information across agencies; and
- Resistance on the part of clients to voluntarily access services.

BSNAF was designed to focus on “early prevention with the goal of a seamless service delivery system.” The funding application was authorized by the Tribal Board of Directors and submitted to OJP in September 1996. The grant application included letters of support from many of the agencies that would later become part of the collaboration, although these other groups played no role in developing the proposal.

#### The Program Vision

BSNAF was designed as a service delivery program. The proposed program was consistent with the lead’s agency “vision,” which is:

“To develop an integrated, seamless and multidisciplinary service delivery system that provides for appropriate, culturally sensitive services. It shall be designed for the prevention and early identification of child abuse and neglect. Services shall be client oriented, easily accessible, and focused toward measured positive client outcomes.”

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Consistent with this vision, ACFS outlined a series of program goals and objectives that would improve the provision of services to Tribal families at risk for, or confronted with, issues of child maltreatment.

The ACFS proposal also recognized the importance of teaming with other organizations—Native and non-Native—in providing services to Sault Tribe members. The proposal detailed the agency’s history in working with other service providers and also highlighted Tribal involvement with a variety of state and county agencies and initiatives. However, other than as prospective recipients of the planned cultural education program and (potential) beneficiaries of the public awareness campaign, the proposal did not specify a role for non-Tribal organizations. Among Tribal agencies, the project expected to work primarily with representatives from Tribal Head Start, the Tribal Youth Sports Program, the Tribal School, the Tribal Community Nurse, Indian Health Services, and the Tribal Child Care Center. They were to participate in the processes of reforming the child abuse and neglect system, working under the leadership of ACFS.

ACFS had considerable experience in the field of child maltreatment and, as described in the proposal, played a prominent role in the investigation of child abuse and neglect allegations. This experience seems to have motivated the choice of both the objectives for the SK/SS program and the other Tribal agencies that were listed as partners.

ACFS submitted a budget request of \$425,000 for the first grant year. No monies were specifically budgeted for evaluation, and none of the personnel included in the budget had this responsibility. OJP notified the site of its selection in March 1997. OJP requested no substantive changes to the application except for clarification of and additional information on some proposed budget expenditures.

## The Planning Phase

### Overview

Planning for the program was led by a Stakeholders Advisory Group, which included a wide range of Tribal and non-Tribal agencies and representatives. The Stakeholders Advisory Group was responsible for setting program policies and prioritizing program activities. In addition, BSNAF developed topical subcommittees to plan project activities.

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Supported by ACFS staff, these groups began work following a kickoff meeting in September 1997. BSNAF submitted its Draft Implementation Plan on December 1, 1997. After reviewing the plan and obtaining additional information from BSNAF, OJP decided to provide more direction and technical assistance, in an effort to increase Tribal participation in the planning and restore a Tribal focus to the collaboration. As a result of this input, BSNAF submitted a revised Implementation Plan in November 1998. OJP approved this plan in May 1999.

### The Planning Collaborative

In Sault Ste. Marie, the grantee agency began involving others in the planning process after the program award. A project director and project facilitator, hired in 1997, staffed the planning efforts. In August 1997, the project began vigorous outreach to a diverse set of organizations. The project facilitator visited and called dozens of these organizations, explaining the project goals and objectives and planned activities. She also actively encouraged their participation in the collaboration or stakeholders committee, beginning with a large kickoff meeting on September 4, 1997.

The program envisioned by BSNAF at this point was broad, encompassing both Tribal and non-Tribal agencies. Although the original proposal had described a collaboration built around a small group of Tribal agencies, staff decided that a more expansive approach was needed. Project staff believed that this was expected because early contacts with OJP, including the first cross-site cluster meeting, emphasized the need to make collaborations comprehensive. As a result, the BSNAF planning collaborative was significantly larger than anything outlined in the proposal.

The September kickoff meeting included Tribal and non-Tribal representatives from agencies serving families involved with child abuse and neglect and community members.

The structure for developing the program and the Implementation Plan emerged from this meeting. A Stakeholders Advisory Group was established, which had primary responsibility for approving all program activities. Topical subgroups were set up to develop specific program activities, and then submitted all recommendations to the Stakeholders Advisory Group for final approval. BSNAF envisioned adding additional subcommittees at later stages in the project. Table 5-7 describes the subcommittees and their respective roles. Except

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**Table 5-7. Stakeholder Advisory Group Committee Structure**

Committee	Tasks
Information Systems	Charged with researching and developing an MIS to track cases of child abuse and neglect across both Tribal and non-Tribal systems. Specific tasks included conducting a needs assessment, examining options for an information management system, securing technical assistance, reviewing available public domain software, developing “system scenarios,” choosing a system for implementation, and testing and implementing the chosen system.
Kids Involvement	Designed to secure consumer input into the program development process and to recommend ways of ensuring that children’s perspectives were brought into the planning process.
Paradigm Issues	Designed as the “think tank” for BSNAF, it focused on ways to improve interactions between Native American families and individuals and agencies involved in the child abuse and neglect system. Issues included implementing appropriate systemwide protocols, formulating strategies to mobilize communities in new ways, aligning philosophical perspectives, mobilizing key leaders, enhancing local ownership of prevention initiatives, building a comprehensive knowledge/information response to abuse/neglect, developing a needs-driven services/support system, changing community perception of effectiveness, developing a sense of total community responsibility for issues, having a holistic approach to services, gaining community consensus, and fostering communitywide communication and citizen involvement.
Services Coordination	Charged with developing a “Community Capacity Inventory” to assess the nature and range of services provided by social service and other family support agencies in Chippewa and Mackinac Counties. Other tasks included defining problems/needs from the capacity inventory, advocating for families/clients/community, coordinating and/or developing resources, identifying barriers, developing risk-reduction activities, enhancing prevention activities, developing tools and implementing systems of comprehensive assessment and referral, enhancing family/parent accountability, identifying adjudication options, addressing underlying causes of stress that lead to abuse/neglect, recommending amendments to policies/procedures identified as barriers to objectives, and researching and recognizing natural networks in services delivery.
Strategy	Designed to serve as the organizational body of the Stakeholders Committee. Tasks included reviewing results from the Capacity Inventory and providing recommendations based on results, providing overall grant planning for new initiatives, developing structure and policies for the Stakeholders Group, leveraging project resources, reviewing the Implementation Plan, conveying support during the entire project, developing collaborative commitments, and following-through on project initiatives, reviewing the evaluation, and monitoring program outcomes.
Training and Education	Charged with reviewing extant training efforts and developing new training and educational activities for BSNAF. Tasks included enhancing the cultural relevance of programs; coordinating communication of healthy beliefs and clear standards; developing and promoting a public awareness and understanding campaign; expanding the community’s ability to help parents and families meet their responsibilities; enhancing cultural sensitivity of providers; strengthening leadership to address cultural issues; developing a training curriculum on cultural values, norms, and parenting practices of Native Americans; identifying resources for information on abuse/neglect; investigating nonstigmatizing risk identification mechanisms; and strengthening professionals’ ability to respond to abuse/neglect.

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**Table 5-7. Stakeholder Advisory Group Committee Structure (continued)**

Committee	Tasks
Ad-Hoc Legal Issues <sup>a</sup>	Charged with reviewing results from the Capacity Inventory to determine their relevance for the legal system and the courts; reviewing SCAN, CPT, and MDT protocols to improve communication with collateral services; reviewing multisystem investigations, processing and preparation of child abuse/neglect cases and educating relevant disciplines on the ICWA; improving information flow and establishing/maintaining consistent reporting practices; defining system needs and making recommendations for providing better quality investigations; developing recommendations for inclusion of the court system in cultural competency training; assessing training needs of the various MDTs and identifying needed resources; reviewing “At-Risk Factors” and “Reasonable Cause to Suspect Indicators” and discussing how to include them in policy and community standards; assessing needs and developing mechanisms for increasing community awareness of legal aspects of child abuse and neglect; assessing the overall effectiveness of the judicial system in dealing with child abuse and neglect cases; ensuring sensitive treatment of child victims and family members throughout the investigation and adjudication processes; identifying information to be entered/shared through electronic linking of agencies; reviewing legal procedures to ensure compliance with the ICWA; and reviewing and making recommendations for the Tribe to pursue and gain full membership as a CAC.
<p><sup>a</sup> Activated earlier than planned (April 1998) as a response to OJP comments on the initial Implementation Plan. The initial intention was to hold off convening the Ad Hoc Legal Issues group until July 1998, when implementation was underway.</p>	

for the Ad Hoc Legal Issues subcommittee, all were initiated in October 1997. The intention was to hold off convening the Ad Hoc Legal Issues group until July 1998, when implementation was underway.

The result was that members of the BSNAF collaboration represented the largest and most diverse body of community members that had ever been assembled in the Eastern Upper Peninsula to address child welfare issues. Representatives from Tribal and state governmental departments, local governmental agencies, Federal agencies, and private, nonprofit agencies all were involved.

Tribal agencies represented on the Stakeholders Advisory Group and its subcommittees included:

- ACFS,
- The Tribal Education Department,
- The Tribal Board of Directors,



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- Sault Tribe Law Enforcement,
- Endyon Group Home,
- Tribal MIS,
- The Tribal Legal Department,
- The Tribal Court,
- Tribal Community Health,
- Tribal Child Care,
- Sault Tribe Housing, and
- The Tribal Health Center.

Local, non-Tribal representatives on BSNAF organizing committees included:

- FIA,
- County commissioners,
- Area hospitals,
- Local colleges,
- Area school districts,
- Local prosecutors,
- Family Court judges,
- Area law enforcement,
- City government representatives, and
- Local social service providers.

Representatives from the Federal Bureau of Investigation, BIA, and the Intertribal Council of Michigan also served on BSNAF committees.

The Stakeholders Advisory Group included high-level managers and program directors with decisionmaking authority. Subcommittees included a mixture of frontline workers and managers/program directors. ACFS was very successful in getting participation by a diverse group of agencies, many of whom were committed to the goals of the project and who

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foresaw community benefit from their involvement. Members regularly attended monthly meetings of the Stakeholders Advisory Group, and some also attended other biweekly or monthly subcommittee meetings. BSNAF was less successful in getting direct involvement from representatives of nontraditional groups in its planning coalitions. Representatives of the Tribal Board of Directors were the only business entity involved in the project. Consumers were not directly represented on the Stakeholders Advisory Group or its various subcommittees, although the project solicited consumer input via its survey of Tribal members at the annual National Assembly in August 1997 and focus groups that were conducted with area children. The project did secure involvement of the faith community during Summer 1998, from the pastor of the Catholic Mission Church for the Sault Tribe, and a Tribal member who was an Ojibway priest and medicine man.

Stakeholders were involved throughout the planning process. However, as discussed below, the planning process turned out to be very lengthy, continuing for over 1 year, which caused many to lose some interest. Most of the agencies involved had provided letters of support for ACFS' grant application. Many reported feeling frustrated that their commitment and investment in the project had not resulted in a tangible product other than the Implementation Plan.

Committees with representatives from Tribal and non-Tribal organizations were used to encourage the community buy-in needed to successfully implement the planned activities. For example, the project planned to identify cases in need of preventive services from diverse Tribal and non-Tribal sources; it also wanted to coordinate the provision of services across multiple Tribal and non-Tribal agencies. The project also realized that it would require input from several sources to shape the planned activities.

Each committee was assigned tasks consistent with project objectives. Some of the tasks were clear, direct, and well-defined. Others were more vague and esoteric. Subcommittees also added tasks as programs took shape.

### **Draft Implementation Plan**

The work of the Services Coordination Subcommittee was most crucial in shaping the initial Implementation Plan. This committee worked with BSNAF staff to develop a Community Capacity Inventory that catalogued resources provided by agencies in a two-county

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service area. Topics included services integration, agency funding and resources, cultural context, role of families, local barriers to collaboration and services integration, state barriers to collaboration and services integration, and indicators of system change. Data from the Capacity Inventory were used to identify services currently available for children and families dealing with child abuse and neglect and also to identify gaps in the current system.

The initial project director and the project facilitator wrote the Implementation Plan based on project goals and objectives and findings from the Capacity Inventory. It was reviewed by members of the Strategy Subcommittee and approved by the Stakeholders Advisory Group.

The Implementation Plan was relatively consistent with the goals and objectives outlined in the original proposal, although the objectives were further refined. The major changes were the inclusion of more agencies in the project collaboration and a decreased role for ACFS in planning and implementing project activities. Instead of limiting the collaboration only to those Tribal agencies with a direct role in service provision for child abuse and neglect cases, the Implementation Plan included a significantly larger grouping of individuals and agencies, both Tribal and non-Tribal. Thus, the original proposal specified eight Tribal agencies who would collaborate with BSNAF, while 33 Tribal and non-Tribal agencies/organizations were listed in the Implementation Plan. This expansion of the Stakeholders Group was viewed as a significant positive outcome of the SK/SS planning process by project staff and indicative of the level of commitment and support the project expected from decisionmakers in the two-county service area.

The work of the larger collaboration also resulted in a change in the role of ACFS. The original proposal called for ACFS to lead a small group of Tribal agencies in improving the Sault Tribe's child abuse and neglect system. The Implementation Plan put greater emphasis on involving members of the Tribal and non-Tribal communities in reviewing existing programs, developing new programs, and implementing a public education campaign and shared information system for service providers.

BSNAF envisioned a program that would continue using the Stakeholders Advisory Group and its subcommittees to plan, develop, and implement project activities. This approach was viewed as especially important for implementing some of the proposed systems-change activities. The Implementation Plan did not describe most of the proposed activities in

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detail. In fact, some activities read more like goals or objectives. Presumably, members of the Stakeholders Advisory Group and project subcommittees needed more time to develop specific activities responsive to the needs of individuals and agencies active in the Upper Peninsula.

The plan called for the project director and the project facilitator to continue as the lead staff during the implementation phase. Like the original proposal, the Implementation Plan did not call for local evaluation support.

### **OJP Comment Process**

OJP provided two sets of comments to BSNAF on its Implementation Plan. The project received its first set of comments late in February 1998 and responded in March 1998. It received a second set of comments on April 21, 1998.

OJP's concerns focused on the following:

- The current and future role of the court (both Tribal and state) in a reformed child abuse and neglect system;
- The effect of existing laws on current and planned information sharing;
- The role of the police and prosecutor in the investigation and adjudication of child abuse and neglect cases;
- Training efforts in the Upper Peninsula;
- The role of the Kids Involvement Subcommittee in the project's structure;
- Involvement of local county commissioners in the project;
- Identification of children and families at-risk for child abuse or neglect and the role of various players (e.g., doctors, hospitals, schools, etc.);
- Development of at-risk indicators;
- Background information on agencies involved in the BSNAF collaboration;
- Ways of dealing with families who refuse to participate in services provision;
- The implementation timeline for the Plan's prevention component;
- Access to electronic information on the services information system; and

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- The role and purposes of the local evaluation.

When OJP reviewed the Implementation Plan, staff had been surprised by what they perceived as a major change in the orientation of the project, particularly the inclusion of non-Tribal agencies. Also, they felt the plan did not adequately address the role of the court in the system and saw this as a major gap in the project. OJP required that the Ad Hoc Legal Issues Subcommittee, scheduled to convene in the implementation phase, be activated immediately to respond to some of the comments. Justice and law enforcement staff, who were slated to participate in the subcommittee, represented required collaboration members according to the original Program Announcement, and OJP wanted them to have a say in the planning. As a result, the subcommittee was established in April 1998, 3 months ahead of schedule.

### **Rethinking the Planning Collaborative and the Program**

OJP arranged a technical assistance (TA) site visit by the American Indian Development Associates (AIDA) in May 1998. OJJDP asked AIDA to assess and identify ways to increase both participation and visibility of the Tribal Court and Tribal Law Enforcement in addressing BSNAF goals. AIDA staff were also asked to assess the level of participation by Tribal members in BSNAF. Their report, submitted to OJJDP in July 1998, provided a set of recommendations for improving BSNAF and specific recommendations for improving the role and function of the Tribal Court, Tribal probation, the victim-witness advocate, Tribal prosecution, and Tribal Law Enforcement. The recommendations also suggested ways in which the Tribal Court and law enforcement system could work more collaboratively with BSNAF and recommended ways of improving these systems beyond the general issues of child abuse and neglect or the specific goals of the SK/SS project. The AIDA report noted that few Tribal members had participated in the project. It asserted that Tribal agencies were represented on the planning committees, but their representatives were mostly employees of the Tribe who were not Tribal members.

The project was not altogether pleased with the AIDA report. Members viewed the TA visit as nonvoluntary, and they were surprised that an assessment of the broader Tribal justice system was part of the TA agenda. Also, in essence, the project staff and the TA provider had very different perceptions about the type of collaborative and planning process necessary to realize OJP's vision. The project staff thought that the level of involvement from agencies during the planning process was consistent with OJP's expectations. Non-Tribal justice

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agencies were represented, and Tribal agency representatives had attended stakeholders meetings and voted on the project presented in the Implementation Plan.

OJP program officers conducted a follow-up site visit to Sault Ste. Marie in July 1998. The OJP team met with members from the Stakeholders Advisory Group and with representatives from the Sault Tribe's S.T.O.P. Violence Against Native American Women program, the Tribal Court, and the Tribal Board of Directors. Following this visit, BSNAF staff report that they were asked to (1) temporarily discontinue their planning process, (2) increase involvement by the Tribal Board of Directors in program planning, (3) increase the connection between BSNAF and the STOP Program, and (4) schedule a site visit from another TA provider.

OJP arranged a second TA site visit from a new TA provider in October 1998 to assist with strategic planning. The new TA provider facilitated a "Visioning Experience" with the Tribal chairman and members of the Board of Directors, Tribal Court, law enforcement personnel, Tribal social service agency representatives, Tribal education representatives, BSNAF staff, and two OJP program officers. The Visioning Experience focused on clarifying the Tribe's vision of its future and the role that BSNAF could play in achieving that vision. Members were also asked to brainstorm specific ideas that would help the SK/SS project achieve its goals.

This second TA visit was designed to increase involvement by Sault Tribal agencies and stakeholders in BSNAF's development and ensure that BSNAF was a product of the Tribe, rather than ACFS alone. The Visioning Experience had the effect, at least in part, of getting BSNAF staff and Tribal agencies and officials more focused on changing the child welfare system to benefit Sault Tribe children and families. OJP officials observed that the site visit increased awareness of issues/needs and increased buy-in by uninvolved or underinvolved participants.

This visit also coincided with the hiring of a new project director for BSNAF. The previous one was replaced because she could not meet the time demands of the project along with her other responsibilities at ACFS. Fortunately, the new project director was one of the authors of the original proposal and was familiar with the project's intent and OJP's interest. He actively involved Tribal Court personnel in the BSNAF collaboration, inviting the Tribe's

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victim’s advocate and a probation officer to become subcommittee members. He also established a more formal connection to local domestic violence agencies in the area.

During the Visioning Experience, four components of an overall strategic direction were identified. Specific goals for each of the four components are listed in Table 5-8 below. Participants also brainstormed about specific activities that the Tribe and its members could undertake to move in the new direction.

<b>Table 5-8. BSNAF Original and Revised Goals and Objectives</b>	
<b>Original project goals and objectives</b>	<b>Revised strategic goals and objectives</b>
Developing a seamless service delivery system inclusive of multiple systems that will emphasize prevention, early intervention, and coordinated services	Strategic Planning To Ensure a Tribal Future <ul style="list-style-type: none"> <li>▪ Developing quality resource planning procedures</li> <li>▪ Using appropriate technical resources</li> <li>▪ Implementing Tribal mission statement within programs</li> </ul>
Providing non-Native service providers with information and training regarding cultural norms and practices, especially parenting and family values and norms	Working Together To Build a Strong Community <ul style="list-style-type: none"> <li>▪ Building trust and teamwork</li> <li>▪ Increasing the value of open communication</li> </ul>
Implementing a public awareness campaign to educate the community on available services and the need for early intervention to ensure that all children are provided a safe and nurturing environment in which to grow	Revitalizing Our Traditional and Spiritual Values <ul style="list-style-type: none"> <li>▪ Creatively integrating Anishnabe values</li> <li>▪ Respecting individual spirituality</li> </ul>
Developing a coordinated service delivery system that includes ACFS, Sault Tribe community health nurses, the Sault Tribe Head Start program and the Sault Tribe Bahwating School. Researching, recommending, purchasing and installing a provider-accessible services information system	<ul style="list-style-type: none"> <li>▪ Strengthening Anishnabe Families</li> <li>▪ Strengthening partnerships with parents</li> <li>▪ Developing a Binogii first program</li> </ul>
Break the cycle of child maltreatment and Improve the functioning of children and families	
Prevent delinquency and crime by fostering strong nurturing families at the earliest possible stage	

### Revised Implementation Plan

BSNAF submitted its revised Implementation Plan to OJP in November 1998. This revised plan was based on feedback from OJP and incorporated results from the Visioning Experience. The new project director and project facilitator authored the revised Implementation Plan. It was reviewed by members of the Training Subcommittee and approved by the Stakeholders Advisory Group.

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The goals and objectives in the revised Implementation Plan were consistent with those outlined in the original proposal. From the previous Implementation Plan, it retained the notion of a larger collaborative body and a reduced role for ACFS. However, it made a number of significant changes. First, it added new Tribal agencies to the collaborative, including the Court and Tribal Law Enforcement. Second, at OJP's insistence, it reconfigured the broad collaboration to one focused on Tribal agencies, representatives, and Tribal members. So instead of a two-county program that involved leaders in Tribal, state, county, and city government and private services agencies, BSNAF would be a reservation/trust-focused program that involved leaders in Tribal agencies only. Third, the revised plan included a local evaluation description.

The revised Implementation Plan also substantially changed the key activities proposed for meeting project objectives, reflecting the work of the Stakeholders Advisory Group and other subcommittees to date. There were more specific "Action Steps." The Action Steps were organized to address system reform and accountability, continuum of services, training needs, and program evaluation. Action Steps for a case management information system and a prevention/public education campaign were also included, as were program goals, areas of focus, and specific activities. The listed activities mixed both concrete actions and more vaguely defined goals/objectives. For example, under systems reform the plan listed several goal-like activities, such as "*the Tribe will promote the revitalization of spiritual values and traditions.*" This contrasted with more specific activities listed under training (e.g., "*Staff will be trained in the development of informal, cross-agency networking techniques*"). Appendix Table D-2 displays the original and revised SK/SS activities planned.

The project received approval from OJP for this Implementation Plan in May 1999.

### **Revisions to the Collaborative**

In 1999, the governance and committee structure of the project changed dramatically in keeping with the revised Implementation Plan and the Visioning Experience of 1998. To embody the new Tribal focus, the Tribal chairman and Board of Directors authorized



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the creation of a Tribal Human Services Collaborative Body (HSCB).<sup>88</sup> The Tribal HSCB replaced the larger Stakeholders Advisory Group and took over primary responsibility for approving program activities and setting program policy. The Tribal HSCB met first in May 1999. As the role of the Tribal HSCB increased, that of the larger Stakeholders Advisory Group decreased. Ultimately, stakeholders from non-Tribal agencies stopped participating, and the advisory group disbanded by the end of 1999.

Project staff spent considerable time and resources organizing the HSCB. The group needed its own planning process to identify activities and review and set program policies. Initially the project staff themselves developed a training and technical assistance (TTA) plan; however, OJP required its TTA consultants to develop and submit their own plan. With support from a SITTAP TA provider, a new TTA plan was developed in March 1999. The plan emphasized professional skills development, cross-agency training, cultural competency, and public awareness. During a site visit from the SITTAP TA provider in June 1999, the plan was presented to HSCB members for feedback, and their suggestions for new resources and TA providers were added. During this meeting, HSCB members expressed support for BSNAF, made commitments to stay involved, and prioritized project activities.

Another TA site visit, in September 1999, resulted in a TTA plan for systems improvement. A strategic planning and systems reform consultant provided by OJP conducted a 2-day training and technical assistance workshop to increase the commitment and involvement of Tribal stakeholders, help HSCB members think through the system reform efforts, and plan the overall TTA for system improvement efforts in the Sault. A process mapping activity was used, organized around the seven elements of reform identified in the Together We Can framework.<sup>89</sup> Representatives from the FIA, the Sault Tribe Health Center, Sault Tribe Community Health, Sault Tribe Youth Education, the Tribal Court, the Chippewa County Commissioner, ACFS Behavioral Health, the local evaluator, and project staff from SK/SS were all involved in this workshop.

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<sup>88</sup> In 1995, a state report, *Systems Reform for Children and Their Families*, recommended that each community have or develop a multipurpose collaborative body as a decisionmaking body to coordinate human services within the community. As a result, a multipurpose body (MPCB) was developed in Chippewa County, and a human service collaborative body (HSCB) was developed in Mackinac County. The Tribal HSCB was modeled, in part, on this approach.

<sup>89</sup> Together We Can is a National leadership development and capacity building initiative developed by the Institute for Educational Leadership, Washington, DC.

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### Project Implementation

This section of the report discusses the implementation of the SK/SS project. The discussion is divided into six sections:

- Budget overview,
- Technical assistance,
- Staffing and management,
- Collaborative structure and process,
- Overview of the activities undertaken for the project, and
- Significant events.

Implementation of project activities did not begin in earnest until the extended planning phase was completed in 1999. However, a few minor activities, such as Family Fun Nights, were implemented as early as 1998. A timeline of key project activities is provided in Appendix Table D-3.

### Budget

The program received five grants of \$425,000. A growing emphasis on prevention education and public information is demonstrated by comparing budget allocations over three time periods, Grant 1 (planning and implementation), Grant 2 (early implementation) and Grant 5 (late implementation). Table 5-9 shows that the most dramatic shifts in funding occurred between Grants 2 and 5. The project more than doubled its budget allocation for prevention education and public information and significantly increased spending on system reform. In contrast, nonstaff administrative expenses and allocations for data collection and evaluation were reduced. Management and administrative staff allocations were reduced slightly.

### Technical Assistance

OJP provided TA and training to all of the SK/SS sites. Sault Ste. Marie had access to SITTAP consultants as well as a training TTA coordinator who worked with the project to identify TA needs and appropriate TTA providers and to negotiate cost sharing for TA. As discussed in previous sections, the project received TA to assist with the development of the

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**Table 5-9. Comparison of Budget Allocations, Grants 1, 2 and 5 Percentage Distribution <sup>a</sup>**

Category	Grant 1 3/1/97-6/30/99		Grant 2 7/1/99-12/31/99		Grant 5 08/2003 (projected)		Percent Change: Grant 2 compared to Grant 5
	Amount budgeted	Percent	Amount budgeted	Percent	Amount budgeted	Percent	
<b>Program Elements</b>							
System Reform and Accountability	\$36,251	9%	\$37,604	9%	\$56,900	13%	+51%
Continuum of Services	\$118,563	28%	\$112,366	26%	\$134,841	32%	+20%
Data Collection and Evaluation	\$48,437	11%	\$53,401	13%	\$39,005	9%	-27%
Prevention Education/Public Information	\$18,245	4%	\$23,421	6%	\$51,804	12%	+121%
<i>Subtotal: Program Components</i>	<b>\$221,496</b>	<b>52%</b>	<b>\$226,793</b>	<b>54%</b>	<b>\$282,550</b>	<b>66%</b>	<b>+25%</b>
<b>Staffing and Administrative</b>							
Management and Administrative Staff	\$107,838	25%	\$96,364	23%	\$90,411	21%	-6%
Administrative expenses	\$95,667	23%	\$97,097	23%	\$52,039	12%	-46%
<i>Subtotal: Staffing and Administrative</i>	<b>\$203,505</b>	<b>48%</b>	<b>\$193,462</b>	<b>46%</b>	<b>\$142,450</b>	<b>34%</b>	<b>-26%</b>
<b>Total</b>	<b>\$425,001</b>	<b>100%</b>	<b>\$420,256</b>	<b>100%</b>	<b>\$425,001</b>	<b>100%</b>	

<sup>A</sup> All figures are based on Westat analyses of the Grant 1 project budget and the Grant 2 & 5 project budgets.

project's Implementation Plan and the revisioning process that occurred from 1998-99. Cluster conferences held twice a year for SK/SS project staff and stakeholders also served as a forum for TTA. The project was able to share the knowledge and expertise of the other SK/SS sites, and it was also exposed to national experts on various topics.

TA efforts for the project stalled significantly after the project redefined its focus and direction. The TTA plan developed in late 1999 was not approved by OJP for over a year. From 2000-03, there also was significant staff turnover in the SITTAP consultants for the site as well as in the site's TTA coordinator. The project had to orient several new consultants. There appeared to be little sharing of information by outgoing TTA consultants with the new ones, making the transition even more difficult. The site did work with various TTA and SITTAP

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consultants to develop a SITTAP plan as well as a capacity building and strategic planning proposal for the HSCB in 2001; however, much of the planned TTA did not actually come to fruition until 2003.

The site ultimately benefited from TTA from national organizations and leading consultants in the field. A \$15,000 planning grant from the National Children's Alliance enabled several law enforcement officers, CPS workers, and medical staff to receive training at the National CAC Training Center. The project also had several site visits from the regional CAC consultant. In 2003, several types of on-site technical assistance and training were planned or provided, including:

- Wrap Around Services, provided by Vroom Van den Berg (May 2003);
- MDT development provided by Fox Valley (June 2003);
- Multisite Management, to be provided by Padgett-Thompson National Seminars (September 2003);
- Results-Based Accountability, to be provided by Mark Friedman (November 2003); and
- Positive Native Parenting, to be provided by the National Indian Child Welfare Association (March 2004).

Earlier in the project, staff attended model court training at the National Center for State Courts. The site also benefited from a readiness assessment conducted by the Council Oaks Training and Evaluation and TA from the CWLA on data for child protective services case tracking.

### **Staffing and Management**

A full-time project facilitator and an administrative assistant have consistently staffed the BSNAF project. Funding for the project director varied from 50 percent in the first 4 years of the project to nothing in the last 2 years when his contribution to the project was provided "in kind" by ACFS. The project also employed a special project assistant who works primarily on the public awareness and media campaign and two case managers, responsible for coordinating services for families in Chippewa and Mackinac County and for the Western service end. It also employed on a part-time basis an accounting assistant, a utilization facilitator, a juvenile law enforcement officer, and evaluation support staff.

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The project used subcontracts and consultants to staff some activities. The largest subcontract was with two consultants from Sovereignty Associates and the Southwest Healing Lodge, who facilitated the Community Healing Process over several years (described below). Smaller subcontracts with Tribal agencies facilitated web site development (e.g., YOOPERAID), MIS efforts, and the public awareness and media campaign. A 1-year contract with Great Lakes Behavioral Health provided an evaluator to collect case tracking data. When this agency folded, the evaluator joined ACFS, working primarily on the Children's Mental Health project, but providing some input to the BSNAF project. The project initially thought it would need to hire a full-time MIS specialist; however, it was able to coordinate efforts with the Inter Tribal Council, utilize Tribal MIS resources, and hire outside consultants when needed.

There has been some staff turnover. As noted earlier, the original project director left in 1998 and the current project director took over that October. There has also been turnover in the case manager for the Western Service end and in the juvenile law enforcement officer; however, this did not significantly affect project activities. Staffing and subcontracts for the project are displayed in Tables 5-10 and 5-11.

### **Project Governance and the Collaborative Structure and Process**

The project has always been managed by ACFS, but was moved from the Behavioral Health Division to the ACFS executive director's office in 2000 (although the head of the Behavioral Health division remained the project director). This change was intended to increase both the visibility and influence of the project as well as reinforce its focus on systems reform.

Throughout the project, the official governing body for all Tribal activities, including those of the SK/SS project, was the 13-member Tribal Board of Directors. The Board is elected by the general membership and must approve all policy statements, budgets, and strategic plans. While the Tribal Board represented the first tier of governance for the BSNAF project, there was a second tier, whose identity and membership composition changed significantly over time. During the planning phase, the Stakeholders Advisory Group held this position. As described above, it was replaced by the Tribal HSCB in 1999, during early implementation. A third group, the Tribal Leadership and Management team (TLM), took over in 2001. Table 5-12 summarizes the key differences and similarities among the three different

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**Table 5-10. Staffing for the Sault Ste. Marie Safe Kids/Safe Streets (SK/SS) Program<sup>a</sup>**

<b>SK/SS staff position</b>	<b>Percentage of salary covered by Safe Kids/Safe Streets</b>	<b>Year staff position established</b>	<b>Year current staff member hired</b>
Program director <sup>b</sup>	0% - 50%	1997	October 1998
Project facilitator	100%	1997	June 1997
Administrative assistant <sup>c</sup>	100%	1997	October 1999
Special project assistant	100%	2001	July 2002
Caseworker/wraparound	100%	2000	August 2000
Caseworker/wraparound – Western service area	100%	2001	March 2003
Juvenile law enforcement officer <sup>d</sup>	50%	2001	June 2002
Accounting assistant	10%-25%	1998	September 2002
Utilization facilitator	20%	1999	July 2002
Evaluation staff	20%-50%	1998	1998

<sup>a</sup> The percentage of SK/SS-funded staff salaries was determined by reviewing the project's Implementation Plan, proposed budgets, and continuation applications for Grant years 1 (1997-1998), 2 (1999), and 5 (2003-2004).

<sup>b</sup> The project director was funded at 50 percent for funding years 1998-2001. In 2002, SK/SS funds were no longer provided for the project director, and his participation became an in-kind contribution.

<sup>c</sup> Funding cut to 50 percent in 2003.

<sup>d</sup> Funding cut to 25 percent in 2003.

collaborative councils. The Tribal HSCB and the TLM are discussed below, as is community involvement in the collaborative.

### ***Tribal Human Services Collaborative Body***

The HSCB intended to serve as a Tribal coordinating and policymaking body for children and family services. As originally envisioned, it was to have representatives from all the major Tribal agencies. In practice, it had difficulty attracting their commitment and participation. It was successful in recruiting representatives from ACFS, Tribal Head Start, Tribal Youth Education and Activities, Tribal Human Resources, the Tribal Court, Chi Mukwa (the recreation agency), and Tribal Strategic Planning and Development. Other youth and family-serving Tribal agencies were invited to participate in monthly meetings but were less involved.

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**Table 5-11. Subcontracts and Consultants for the Sault Ste. Marie Safe Kids/Safe Streets (SK/SS) Program<sup>a</sup>**

<b>SK/SS SUBCONTRACTS AND CONSULTANTS</b>			
<b>Program/activity</b>	<b>Agency</b>	<b>Year funding began</b>	<b>Year funding ended</b>
Evaluation	Great Lakes Behavioral Health	2000	2001
Management information systems	Sault Ste. Marie Tribe of Chippewa Indians MIS Division	2000	Ongoing
Website construction	Northernway	2000	2002
Media/public awareness	Sault Ste. Marie Tribe of Chippewa Indians Video Productions	2001	Ongoing
Community healing	Sovereignty Associates, Southwest Healing Lodge	2000	2003

<sup>a</sup> SK/SS-funded subcontracts were identified from the project's Implementation Plan, proposed budgets, and continuation applications for Grant Years 1 (1997-1998), 2 (1999), and 5 (2003-2004).

The HSCB struggled with obtaining solid commitments from many participants to attend meetings and participate in planning on a regular basis. Few, if any, agency or division directors came to meetings. For the most part, those who attended did not have any authority or power to make major decisions, and information from meetings was not effectively disseminated within departments. By the end of 2000 and in the first half of 2001, attendance had become extremely poor. Key Tribal agencies such as Tribal Courts, Tribal Law Enforcement, Family Support Services, Children's Placement Services, and Tribal Administration did not participate.

Despite its limitations, however, the Tribal HSCB did help BSNAF with its early strategic planning and implementation of activities such as training and public education. It also increased involvement and buy-in from some Tribal agencies and members in the development of the project and helped ensure that the project reflected the needs of the Sault Tribe members, rather than the larger non-Tribal community.

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**Table 5-12. Key Features and Activities of Collaborative Structures**

Collaborative structure	Key features	Key activities
<p><b>Stakeholders Advisory Group</b></p> <p>1997-2000</p>	<p><b>Goal:</b> To set BSNAF program policies and prioritize program activities</p> <p><b>Target Population:</b> Tribal families in Chippewa and Mackinac counties</p> <p><b>Leadership:</b> ACFS, BSNAF Project</p> <p><b>Membership:</b> Tribal, state, county, and city government and private services agencies (N=unspecified)</p> <p><b>Participation:</b> High-level agency managers and program directors with decisionmaking abilities. Subcommittees include a mixture of frontline workers and managers/program directors. Tribal and non-Tribal agencies</p> <p><b>Subcommittees:</b> Strategy, Paradigm Issues, Kids Involvement, Information Systems, Services Coordination, and Training and Education. Legal Issues Subcommittee added in 1998</p>	<ul style="list-style-type: none"> <li>▪ Planned project activities</li> <li>▪ Recruited stakeholder participation</li> <li>▪ Reviewed Tribal service coordination plans</li> <li>▪ Conducted capacity inventory</li> <li>▪ Participated in visioning experience</li> </ul>
<p><b>Tribal Human Services Collaborative Body (HSCB)</b></p> <p>1999-2001</p>	<p><b>Goals:</b> To identify, monitor, and coordinate all elements of the Tribe and divisions that pertain to the prevention or treatment of child abuse, neglect, or delinquency and provide ongoing strategic planning and direction to the BSNAF project</p> <p><b>Target Population:</b> All tribal families in seven-county service area</p> <p><b>Leadership:</b> ACFS, BSNAF Project</p> <p><b>Membership:</b> Tribal agencies only (N= 22)</p> <p><b>Participation:</b> Attendance started out with good representation from key agencies, but became increasingly sporadic and primarily made up of direct service workers with limited senior management involvement</p> <p><b>Subcommittees:</b> None</p>	<ul style="list-style-type: none"> <li>▪ Refocused SK/SS BSNAF activities to Tribal agencies only</li> <li>▪ Coordinated with Tribal strategic planning efforts</li> <li>▪ Planned America’s Promise project</li> <li>▪ Coordinated with Chippewa and Mackinac County collaborative bodies <sup>1</sup></li> <li>▪ Developed thematic planning for prevention activities among agencies</li> </ul>
<p><b>Tribal Leadership and Management</b></p> <p>2001-2003</p>	<p><b>Mission:</b> TLM is an inclusive planning body of key Tribal team members combining resources to develop and implement Tribal plans and programming for the benefit of the membership and community</p> <p><b>Target Population:</b> All Tribal families in seven-county service area.</p> <p><b>Leadership:</b> Tribal deputy executive director and ACFS administrative director</p> <p><b>Membership:</b> Division directors of all key Tribal agencies invited and expected to participate. (N=18 Tribal divisions )</p> <p><b>Participation:</b> Attendance became more consistent among key agencies</p> <p><b>Subcommittees:</b> None</p>	<ul style="list-style-type: none"> <li>▪ Conducted assessment of strengths, weaknesses, opportunities and threats (SWOT)</li> <li>▪ Developed mission and vision and presented committee structure to Tribal Board of Directors</li> <li>▪ Identified program priorities</li> <li>▪ Identified technical assistance and training priorities</li> </ul>

<sup>1</sup> In 1995, a state report, *Systems Reform for Children and Their Families*, recommended that each community have or develop a multipurpose collaborative body as a decisionmaking body to coordinate human services within the community. An HSCB in Mackinac County and a MPCB in Chippewa County serve this function.



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### ***Tribal Leadership and Management***

By the middle of 2001, ACFS and the Tribal chairman decided to reorganize and put the collaborative under the joint leadership of the administrative director of ACFS and the deputy executive director of the Tribe. The reorganized structure was ultimately renamed Tribal Leadership and Management. The TLM was designed to serve as a mechanism for coordinating the strategic plans of various agencies involved with children, youth, and families. It also planned to monitor and provide ongoing strategic planning and direction to BSNAF. The new TLM reexamined the membership issues and attempted to make attendance required. Also, membership of the collaborative was elevated to division directors. Program-level supervisors from child placement services, mental health, and substance abuse services were not invited participants but were represented by their division directors, including the Behavioral Health Division director and the two co-chairs. Several Tribal agencies/divisions that had stopped attending HSCB meetings, such as Tribal Administration and Planning, the Tribal Court, Tribal Police, Tribal Legal, and Tribal Health, were re-invited and expected to attend. Some new agencies not involved in the former HSCB were asked to participate as well, including the Tribal Cultural Division, Tribal Education, and Tribal Elder Care.

These changes, along with the expectation of attendance, immediately elevated the importance and power base of the TLM within the Tribal community. The new group revisited the vision, mission, goals and procedures adopted by the HSCB to ensure that they were current and meaningful. They developed a new vision and mission statement. The TLM was to be an inclusive planning body of key Tribal team members, combining resources to develop and implement Tribal plans and programming for the benefit of the membership and community.

The TLM had responsibilities beyond monitoring progress on the SK/SS action plan, including:

- Identifying potential service duplication and encumbrances;
- Formulating the most appropriate response for service delivery and operational efficiency; and
- Identifying, monitoring, and coordinating all elements of Tribal divisions that pertained to the prevention or treatment of child abuse, neglect, or delinquency.

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The BSNAF project facilitator helped orient new TLM members by providing presentations on the history and accomplishments of the HSCB and the BSNAF project. According to plans developed in collaboration with the TA team, BSNAF was to receive TA in collaboration, team building, and action planning. The overall goal of the TA was to assist with restructuring and strengthening the newly formed TLM, so that it functioned optimally as the collaborative decisionmaking body, developed a comprehensive strategic plan, and implemented an effective structure for delivering child, youth, and family services for the Tribe. On-site TA was initially postponed until 2002 in order to allow more preparatory time for the new co-chairs and members. A document, *Capacity Building and Strategic Planning Proposal for the HSCB* outlined issues, process, and stages of implementation and was developed by the SITTAP consultant; however, the specific team building TA for the TLM never materialized.

The TLM worked hard during 2002 to develop its new mission and goals, conducted a SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis, and prioritized activities and technical assistance needs. They presented to the Tribal Board of Directors in the hopes of ultimately becoming a permanent advisory group run out of the administrative office of the Tribe.

While the TLM got off to a good start, it hit challenging times as a result of significant political strife within the Tribe. One TLM co-chair left his senior management position in the Tribe (and the TLM) in 2003. Other political uncertainty within the Tribe's Board of Directors combined to significantly stall TLM efforts and constrain decisionmaking abilities. In the future, the group will be reconvened by the new executive director of the Tribe and meet bimonthly. There will be no formal leadership from BSNAF, although the project will provide administrative support to the TLM.

The political situation makes the future of the TLM uncertain. However, key changes introduced when the TLM was developed—particularly the executive level (e.g., Tribal Board of Directors) involvement and the requirements for high-level agency participation—were expected to help the collaboration survive beyond the Federal SK/SS funding. In particular, sustainability plans called for making the TLM a permanent committee of the Tribal Board of Directors. So far, that has not happened.

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### ***Community Involvement in the Collaborative***

The collaborative did not reach agreement on appropriate mechanisms for parent, community, and/or consumer participation in the HSCB or the TLM, and their integration into the collaborative structure was not widely supported as a separate goal. There was strong sentiment among many of the agency professionals involved that they are community members and, in some cases, consumers of services as well, and therefore able to represent that perspective in the collaborative. Collaboration leaders point out that Tribal members are able to voice concerns at quarterly Tribal Board of Directors meetings, which are open to the public, tape-recorded, and broadcast over the radio, and this is the appropriate mechanism for community involvement.

### **Activities Implemented During the Safe Kids/Safe Streets Initiative**

BSNAF conducted activities under each of the four program elements required for the SK/SS initiative: system reform and accountability, continuum of services, data collection and evaluation, and prevention education/public information. Many of the activities—training programs, for example—cut across categories. This occurred particularly as the program evolved and recognized the interaction of the four program elements. We have assigned activities to the category that provides the best fit.

Implementation for the project began in earnest in 2000. For the most part, 1997-99 was spent developing a plan and organizational structure for the program. The major activity implemented during this time was to hire the Tribal juvenile officer. This was done in part, to facilitate the buy-in and involvement of the Tribal chief of police who also served on the Tribal Board of Directors. BSNAF also implemented several prevention activities during its planning years, including developing a summer activity guide for youth and implementing “Family Fun Nights,” designed to encourage positive family functioning.

The full listing of activities undertaken by BSNAF is provided in Appendix Table D-4 and the logic model that guided program activities is provided in Appendix Figure D-1. Below we highlight some of the most significant activities under each program element. Most activities are expected to continue with full funding until August 2004.

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### **System Reform**

The project focused on several system reform efforts, which are described below.

**Community Healing process.** A major systems change effort for the project was the Community Healing process. The process was based on a vision of “*building a real community, a spiritual place where people care and protect each other.*” Its primary objective was “*To train a core group of community members with information and skills they can utilize to assist others to heal and grow in the knowledge, culture and traditions and spirituality of Bahwating Anishnabe people.*”<sup>90</sup> The process aimed to promote the ongoing “cultural renaissance” and revitalization of spiritual values and traditions in the community. The Community Healing Process was also expected to foster sharing of cultural resources across ACFS and other programs, thereby sustaining a “cultural foundation” for each program and Tribe-wide, and ultimately incorporate cultural practices throughout the service delivery and treatment system. The process used a community capacity-building approach, training local leaders who in turn would train others in the community.

The process was sanctioned by the Tribal Board of Directors, and a percentage of work time for Tribal employees was designated for their participation. In 2000, a training curriculum and strategic plan were approved by BSNAF and an orientation session presented to interested participants. The Community Healing process was fully underway by 2001. The process targeted both community residents and professionals. Themes included bridging the gap between non-Native clinical providers, Native traditional providers, and spiritual leaders; building an understanding of the effects of violence and reducing violence and abuse in the community; promoting the ongoing cultural renaissance and revitalization of spiritual values and traditions; and incorporating cultural practices into a Western-oriented service delivery and treatment system.

Three training modules of the Community Healing process, involving 42 training days, were completed over 2 years. The first module, *What Was Never Told*, lasted 18 training days and was designed to establish a common understanding of the community and its history. The second module, *Ethnostress*, took 8 training days and addressed internalized oppression and its impact on the cultural, social, and behavioral environment. The third module, *Community*

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<sup>90</sup> Community Healing Process vision and mission as presented in a seven-part brochure series, *The People Shall Continue, Community Healing in Bahwating*, developed to educate others about specific concepts.

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*Building*, consisted of 18 training days. The fourth and final module (expected to be completed by December 2003) *Indigenous Ways of Helping/Healing*, consists of 36 training days. The fourth model was structured to meet monthly for a year and focus on community development and specific skill development using a train-the-trainer format. This module was also approved for continuing education credits for substance abuse counselors. After the second module, 32 participants received certificates of completion, and 22 others received certificates of participation in a ceremony and community dinner held with the Tribal Board of Directors. The BSNAF project facilitator also gave a presentation on community development from the perspective of Community Healing to the Board.

In preparation for the last two modules, BSNAF convened a steering committee to review ways to assess and evaluate the Community Healing process. The committee drafted core knowledge elements and skills to be incorporated into a training needs assessment and evaluation survey. The Cultural Division developed a knowledge database of “Indian Information.” For example, it provided information about different books to teach Native languages for different age groups. Additionally, the SK/SS project coordinator published a journal article about the process.<sup>91</sup>

As part of the replication efforts of the Community Healing Process, participants developed a detailed seven-part series of educational brochures and mini-curricula. They held educational sessions on topics of special interest (e.g., clan structure, creation story) that were open to the community and presented part of the Community Healing curriculum to various health-related support groups and teen wellness groups. They also participated in the Anishnabe Future Leaders youth camp and women’s spiritual gatherings. In the future, the Community Healing workshops are expected to be offered in a more condensed form by the staff of the Cultural Division. Complementing the work of the Community Healing process, the cultural specialist at ACFS coordinated regular cultural trainings for staff and worked to integrate traditional and spiritual values into ACFS programs.

**Child abuse and neglect system training.** The project’s major goals in the area of professional development include standardizing the training curriculum for mandated reporters of child abuse and neglect, reaching a broad spectrum of service providers, and incorporating the cultural values, norms, and practices of Native Americans into all training

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<sup>91</sup> McBride, B., "Aspects of Community Healing: Experiences of the Sault Ste Marie Tribe of Chippewa Indians, *Alaska Indian and American Indian Mental Health Research Journal*, 11(1), November 2003: 67-83.

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curricula. The Capacity Inventory completed early in the project indicated there was not a shared understanding of the risk factors for abuse and neglect or shared definitions even among social service professionals. This variation in information resulted in a pervasive lack of understanding of what was appropriate to report as child abuse and neglect. In response, the project polled the provider community, identified specific risk factors and indicators of abuse and neglect, and published a brochure entitled “*At Risk Factors and Reasonable Cause to Suspect Indicators.*”

In 2002, the project coordinated two large interdisciplinary training sessions on the Continuum of Community Responses to Child Abuse and Neglect that drew a large audience, including Tribal and non-Tribal service providers. The project ultimately developed a self-administered tutorial for mandated reporters available on a CD. Mandated reporter training is now given to all new Tribal employees in coordination with Tribal Human Resources.

**Other professional training and education.** BSNAF was able to build on training that was already offered by agencies and organizations in the community. These training activities targeted professional agency staff, clients, and community residents who work with children and families, and parents of special needs children. The format for training varied from large workshops held in the evenings and open to the entire community to brown bag seminars to didactic sessions that were targeted to professional staff and held during the day at the ACFS building. Training topics included:

- Asset Building Community Development;
- Effects of Violence on Children;
- Parenting for ADHD and Other Special Needs Children;
- Brain Development and Developmental Concerns and Disclosure for Children Witnessing Violence;
- Anxiety and Stress;
- Mental Health and the School;
- Suicide Awareness;
- Behavior Management in Recreational Settings; and
- Medications Affecting Behavior and Brain Development.

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A complete list of training topics is provided in Appendix Table D-4.

**Tribal Children’s Advocacy Center.** Another key system reform effort was the development of a Tribal CAC, for which BSNAF received a \$15,000 planning grant from the National Children’s Alliance. Several law enforcement, CPS, and medical staff received training at the National CAC Training Center on child abuse and on basic and advanced forensic interviewing. The CAC was opened in 2002 at the ACFS office in Kincheloe. CAC staff began developing interagency agreements and protocols and started to provide forensic interviews, therapy, family visitation, and intake and referral on site. The Tribe’s existing MDT, which coordinates and plans investigations of child maltreatment, also started to meet at the CAC. On-site training conducted by Fox Valley Technical College helped the MDT to initiate strategic planning encompassing vision, mission, goals, and objectives, to strengthen CAC efforts.

**Other collaborations.** BSNAF spearheaded collaborations with several other agencies, including Tribal Head Start and Youth Education and Activities. Together they developed a Tribal America’s Promise program that aimed to encourage volunteerism and enhance services to youth. One VISTA volunteer was hired for this program; however, complete funding was never released from the National AmeriCorps office for the planned five AmeriCorps fellows, and the project was abandoned.

Project staff were important participants in the Mackinac County HSCB and the Chippewa County MPCB, and they were part of the Chippewa MPCB’s development of the Pre-Birth to Age 5 Strategic Plan. SK/SS participation in these groups helped to increase communication with service providers in the non-Tribal communities. In addition, BSNAF project staff facilitated the Tribal Children and Youth Network in Chippewa County, a network made up of supervisory and frontline staff who work with youth. It provided a forum for interagency communication and organized interagency activities such as the Winter Wear Giveaway.

**Western end empowerment group.** BSNAF also initiated efforts to develop a cross-Tribal planning body to enhance services in the Western service end. BSNAF worked with ACFS service providers in the Manistique office to select priorities and identify leadership.

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### ***Continuum of Services***

BSNAF's primary service activities were the design and implementation of the Family Service Team/Wraparound Program, staffed by SK/SS-supported caseworkers and a juvenile police officer in the Tribal school, also partially supported by SK/SS funds.

**Family service team.** The family service team caseworkers worked in the Behavioral Health Division in tandem with the SAMHSA-funded Children's Mental Health Initiative. BSNAF hired two caseworkers, one in Chippewa County and one who worked out of Manistique in Schoolcraft County. The second position enhanced collaboration and expanded services in the underserved and more rural Western service area.

ACFS trained staff internally on service coordination and also used a national expert to train staff in the wraparound model. The family treatment team model was implemented in 2002 with teams that included the client, supportive individuals identified by the client, and service providers necessary for families with multiple needs, including families with substantiated cases of child abuse and neglect and those at risk. The family service teams had worked with over 30 families by mid-2003. This new mode of operating also helped to include non-Tribal agencies (such as the state CPS, courts, and schools) in the treatment planning process for Tribal members. This is important because it is estimated that nearly half of the child abuse and neglect cases served by the Tribe are initially identified by the state CPS system.

**Juvenile law enforcement officer.** The project supported a part-time Tribal juvenile law enforcement officer who is stationed in the Tribal elementary school. Activities included developing a safety patrol network, classroom safety training, participation in Family Fun Nights, conducting an annual Junior Police Academy camp, and other youth-oriented activities.

### ***Data Collection and Evaluation***

The project has struggled with developing a coordinated data collection and evaluation system from the time of its initial grant application. BSNAF had hoped to examine the effectiveness of the Family Service/Wraparound model by piggybacking on the evaluation



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of the Children's Mental Health Initiative, but ultimately this did not work out. The project did complete some independent data collection efforts, including:

- During 1997, the project conducted a survey of Tribal members who visited the SK/SS booth at the Tribal National Assembly (N=170). The results of the survey became a "defacto needs assessment" and helped to give the project direction on program priorities.
- During early implementation, the Stakeholders Advisory Group conducted a Capacity Inventory which guided activities such as the development of community-defined risk factors and indicators of abuse and neglect.
- The project held focus groups with youth to solicit their input on community issues.
- In 1998, BSNAF undertook a community readiness evaluation, conducted by the Council Oaks Training/Tri-Ethnic center to assess the readiness for a Tribal CAC. In 2002, they sent an ACFS staff member to be trained to conduct a subsequent community readiness assessment to measure progress.

**Multisystem case analysis.** Another data collection effort for the project was a case tracking analysis patterned after the Child Welfare League of America's model. The effort was designed to examine performance of the formal child protection system by tracking child abuse and neglect cases across agencies. The project collected baseline data on 1998 cases from Child Placement and Protective Services, and it planned to collect data from other agencies such as law enforcement, mental health, and the courts. The project also planned to collect data for a follow-up year in order to identify changes resulting from system reforms implemented under the SK/SS grant. The site requested assistance from CWLA after the initial data from Child Placement and Protective Services were already collected. In 2002, a TA consultant provided an initial analysis of these data, described the MSCA model, and presented findings from the analysis. While the CWLA support was intended to assist BSNAF in moving forward to collect data from other agencies and to complete the analysis, the project stalled, and as of June 2003, no further work on case tracking had been done.

**Management information systems.** The project envisioned the creation of a standardized format for data collection usable across multiple agencies and available electronically via an MIS. Although it did not realize this ambitious goal, in collaboration with the Inter-Tribal Council the project has supported the development of a shared clinical record for substance abuse clients that will be available in an MIS across multiple divisions of ACFS and across different agencies.

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### ***Prevention Education and Public Awareness***

BSNAF was very successful in carrying out its prevention education and public awareness efforts. A campaign was developed and coordinated with other agencies around a synchronized calendar based on four seasonal themes built around the Native American Medicine Wheel.

**Media campaign.** In response to the need for more public education on child maltreatment identified in the Capacity Inventory, BSNAF launched a culturally appropriate, comprehensive, and coordinated multimedia campaign to increase awareness, identify at-risk children, and increase access to services. The campaign used culturally specific public service announcements on television and radio using the four seasonal themes representative of traditional Native American beliefs: *Life Balance* (December, January, February); *Planting the Seeds of Greatness* (March, April, and May); *Healthy Bodies, Healthy Minds* (June, July, and August); and *Honoring the Family* (September, October, and November). Over 20 public service announcements were developed and shown on local TV. The project also produced activity cards, bookmarks, and other handouts with culturally specific education and social service resource information for multiple audiences. A new colorful ACFS logo was also developed. These products were distributed throughout the community through Family Fun Nights, spiritual gatherings, etc.

**Prevention education and outreach.** Prevention education included the distribution of materials such as educational brochures and informational flyers on parenting, child abuse and neglect, and SK/SS contact information. The project participated and distributed materials at community fairs and events, such as Family Fun Night and potluck dinners. To attract both children and adults, ACFS developed a “spinning wheel” game, which displayed animals and clans on a board. In this activity, the child spun and received a “collector card” with the picture and the Ojibway word for the image. While children were engaged in the game, the idea was that their parents could peruse literature and other materials on an information table.

Other prevention education projects included the distribution of coffee cups imprinted with violence prevention information resources to every beauty shop in the seven-county area in collaboration with Victim Services during October, Domestic Violence Awareness Month. BSNAF also produced an educational CD on the impact of substance abuse

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on children. The CD was available for ACFS clients to view and was also played in the waiting room at the Tribal Court.

The Community Healing process, discussed previously, also served as a form of prevention education for the general public because the process included both community residents and professional participants. It was implemented to facilitate the reclamation and relearning of traditional Native values that do not include violence. The process educated health professionals, spiritual leaders, and community members on the causes of violence in the community from a culturally specific perspective and developed teaching tools and skills to assist them in providing support and treatment to families.

As noted earlier, BSNAF also implemented several prevention activities during its planning phase, including Family Fun Nights and distribution of a Summer Activity Guide for area youth. The guide included information on summer employment, leisure time activities, volunteer opportunities, and hotline information and web sites. All children (Native and non-Native) attending Chippewa and Mackinac area schools received the guide.

**YOOPERAID on-line service directory.** In 2002, the project implemented YOOPERAID,” a user-friendly, on-line services directory that allowed easy access to resource information, sources for assistance, and maps of the seven-county service area. Event calendars were accessible on the system. SK/SS special project assistants also developed a membership services directory, which is also available on the Internet.

**National recognition.** The project competed with over 100 other entries and received four ECCO awards for its prevention education and public education efforts in 2002. The awards were sponsored by the Comprehensive Mental Health Services for Children and Their Families Program of the Center for Mental Health Services, SAMHSA. A bronze medal was awarded for “Professional Outreach,” specifically the Child Abuse and Neglect Mandated Reporters Training VHS tape; a silver medal was awarded for “Community Partnership” and the YOOPERAID online service directory; another silver medal was awarded for “Community Reach for Children and Youth” for the Fun Wheel (cultural spinning game); and a gold medal was awarded for “Communications Planning” for the Sault Tribe public awareness campaign and public service announcements plan.

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### ***Sustainability***

Sustainability planning for BSNAF was subsumed under the strategic planning efforts of both ACFS and the Tribe. Tribal-wide strategic planning efforts were significant, and BSNAF was largely credited by a variety of stakeholders for laying the groundwork that started the process for the Tribe overall and for sustaining its momentum in the community. The SK/SS project facilitator was the ACFS representative to the Tribal Strategic Planning Committee which developed the mission, vision, and values statement. The SK/SS project facilitator also sits on the Tribal Communications and Census committees, which were working to develop an accurate Tribal census and improve communication to all Tribal members.

ACFS developed its own strategic plan, “Foresight Anishnabek 2005.” The ACFS plan included feedback from a client satisfaction survey and a staff analysis of the strengths, weaknesses, and opportunities of ACFS and its programs. BSNAF also was actively involved in developing the Tribal Communication Plan. Ten subunits of the Tribe, including the project’s lead agency, also completed strategic planning efforts, and BSNAF worked on developing a cross-walk of strategic planning goals between agencies.

Despite these significant strategic planning efforts, the project, and ACFS overall, relied on successful grant applications to continue many of its activities. ACFS and other Tribal agencies were successful in obtaining several Federal grants that will benefit SK/SS’s target population, including a collaborative grant between ACFS, the Tribal Courts, and Youth Education and Activities. Additionally, BSNAF is working to make some of the services of the family service caseworkers reimbursable by public insurance. This will require ACFS to complete an accreditation process, however.

### **Changes in the Community**

One of the changes that positively affected the cultural competency efforts within the community was the creation of a Cultural Division by the Tribal Board of Directors in 2001. The Cultural Division provided an administrative “home” for activities pertaining to the revitalization of spiritual values and traditions in the community and also served to enhance collaboration in these areas. Activities of the division included coordination of cultural activities, culture camp for youth, Native language instruction, repatriation of Tribal remains, and the protection of Native burial grounds.

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Another major change was projected to have a significant influence on the community at large. Late in 2000, the Tribe experienced a significant change in its business environment with the opening of the Greektown Casino in Detroit. The casino is expected to dramatically increase Tribal revenues, and it is hoped that ultimately the Tribe can become financially self-sufficient. However, this business venture, combined with the national economic downturn, had some negative short-term effects due to the tremendous cash outlay that was necessary to purchase the casino. The Tribe had to cut costs and review budgets more carefully. Certain Tribal employee benefits were reduced—for example, the amount of time employees had to wait to be eligible for employer-sponsored health insurance was lengthened significantly. In addition, during the time the new casino was in the planning and approval stages, the Tribal Board of Directors had to spend considerable time responding to a series of negative articles attacking Tribal sovereignty, including an article in the Detroit press.

Another significant change was the recent tax agreement between the Tribe and Michigan. The agreement provides resident Tribal members in a specified area an exemption from paying state income tax for non-business income and an annual “sales and use” refund check.<sup>92</sup>

Finally, there was a significant amount of political strife within the Tribe in the past several years. In 2003, a Tribal Board member was impeached, resulting in public airing of grievances and accusations in the Tribal newspaper over several months, a formal trial, and a midterm election, something that had never happened before. At the same time, two Board members (including the one who was impeached) were terminated from their posts as deputy executive director and executive director of the Tribal government. It is not clear exactly how this has affected the community at large; however, it significantly affected the SK/SS project since the deputy executive director of the Tribe had been facilitating the TLM, and the executive director of the Tribe had administrative responsibility for ACFS activities and services.

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<sup>92</sup> According to documentation from Paul Shagen, Senior Tribal Attorney, the goal of tax negotiations with the state was to extend tax exemptions beyond the limited trust land. Specific exemptions from state taxes were extended to a larger “agreement area” that consists of approximately 10 survey townships (215,000 acres).

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### Results

The BSNAF project carried out many activities in Sault Ste. Marie, involving a variety of agencies and individuals. While many of these activities might deserve more intensive assessments of their own, the national evaluation looked at the SK/SS initiative from a broader perspective and, if possible, drew conclusions about its overall results at each site. In assessing success in Sault Ste. Marie, it is important to note that BSNAF only moved into full implementation in 2000 and as of June 2003 still had full funding to carry it through most of 2004.

The previous section focused on the successes in implementing specific activities, as well as some of the problems and failures. In this section, we discuss the results of the project more broadly. Specifically we address the following questions:

- In terms of structure and process, how faithful was SK/SS in Sault Ste. Marie to OJP's vision for the SK/SS initiative?
- To what extent did the project produce system reform—that is, enduring changes in the statutes, policies, procedures, and routines that affect the prevention, intervention, and treatment of child abuse and neglect? What other enduring changes resulted?
- Is there evidence that the project has had longer term impacts on the incidence of child abuse and neglect?
- What factors facilitated project efforts and what were the obstacles?
- What is the future for the project?

We begin by discussing how project participants and other local observers viewed the accomplishments of the BSNAF and its prospects, drawing upon several sources of interview and survey materials. We then summarize our own perspectives for each of the key questions.

### Sources

Data to respond to these questions come from a variety of sources. This sections draws upon several of national evaluation data:

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- Interviews conducted and observations made during the 6 years of the process evaluation. The interviews focused on project personnel and key partners in the effort and the collaborative. We also made limited observations of interactions among community partners and of community participation.
- Structured interviews with several “key informants,” conducted during the course of fall 2000 and 2002 site visits. Key informants were defined as individuals who play key roles in the child protection system or are well-placed to observe its operations. They included project staff, the local evaluator, and senior personnel from a cross-section of public and private agencies that participated in the SK/SS project. We emphasize responses from the 2002 key informant interviews, which focused on accomplishments and outcomes.<sup>93</sup>
- Three mail surveys with individuals defined as stakeholders in the project. These mail surveys targeted current or past members of the Tribal HSCB, TLM or other committees who had had any project involvement in the previous 2 years. We emphasize findings from the most recent survey (conducted in 2003), which included questions on results and outcomes. In Sault Ste. Marie, there were 55 respondents.<sup>94</sup>
- A Survey of Agency Personnel conducted in 2002. This mail survey targeted individuals in a position to observe the child protection system (broadly defined)—including supervisory and line staff from child protective services, law enforcement agencies, and schools. There were 32 respondents.<sup>95</sup>

We begin by discussing how project participants and other local observers viewed the accomplishments of the SK/SS project and its prospects, drawing upon the above-referenced material. We then summarize our own perspectives for each of the key questions.

### **Perspectives From Project Participants and Other Local Observers**

By and large, SK/SS participants appeared satisfied with both the collaborative process and its results so far. Nearly all key informants believed that ACFS was the most appropriate and natural choice to lead the project due to its experience and sensitivity to child welfare issues. While recognizing that ACFS was the right choice to lead the project, some informants also said that there was some community perception of the agency as “too assertive”

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<sup>93</sup> Results of the 2000 Key Informant survey can be found in Gragg, F., Cronin, R., Schultz, D., and Eisen, K. (), *Year 3 Status Report on the Implementation of the Safe Kids/Safe Streets Program*, Rockville, MD: Westat, 2001.

<sup>94</sup> This stakeholder survey was the third in a series, with previous administrations in 2001 and 1998. A detailed summary of the 2003 survey methodology, response rates, and results for all sites can be found in Volume III of this report.

<sup>95</sup> A detailed summary of the 2002 Survey of Agency Personnel methodology, response rates, and results for all sites can be found in Volume IV of this report.

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and “overpowering.” Thus, the BSNAF affiliation with the lead agency had some disadvantages.

**Implementation and adequacy of investments in SK/SS.** Respondents to the 2003 Stakeholder Survey awarded BSNAF high marks on several aspects of the implementation process. “Project leadership” was awarded an average rating of 3.8 on a 5-point scale (where 5 represented “extremely satisfied”), and two additional measures of leadership and communication, “communication between project staff and other SK/SS participants” and “communication and advance notice for meetings” were rated 3.7 and 3.8, respectively. Over half (53%) of respondents in this survey, slightly less than the 65 percent of respondents in the 2001 survey, indicated that “the amount of resources available to SK/SS” was “about right.”

Although the typical stakeholder was fairly happy with the implementation process, the 2003 survey reveals a few areas of concern.

- A significant number of respondents (44%) reported there was “not enough community involvement.”
- Twenty-eight percent indicated that there was “not enough data available to guide decisions.”
- Twenty-seven percent felt there had been “more than enough effort spent on strategic planning.”
- Respondents in Sault Ste. Marie were more likely than respondents from other sites to say they had contributed “not enough” time to the project (43%), although this was a significant drop from the 60% who said this in the 2001 survey.

**Dimensions of system reform.** The Stakeholder Survey asked respondents to rate eight different dimensions of system reform in terms of importance to their community. In Sault Ste. Marie, the majority of respondents rated seven of these dimensions as very important (“4” or “5” on a 5-point scale, where “5 = Extremely important”).

- Increasing family involvement in decisionmaking (71%),
- Increasing the availability of data on which to base decisions (67%),
- Increasing cultural competency of agencies and staff (66%),
- Improving cross-disciplinary training and skills (66%),



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- Increasing citizen and neighborhood involvement (64%), and
- Making the court process work more effectively (62%).

Respondents were less enthusiastic about the dimension labeled “reforming policies and procedures (44% saw it as very important), although some degree of policy and procedural reform seems integral to several of the higher-rated system reform dimensions.

**Overall outcomes and accomplishments.** The 2002 Key Informant Survey asked respondents “What was the most important outcome of the SK/SS project?” Most of the informants considered improved communication and collaboration between agencies as the most important outcomes. Many comments focused on increased collaboration between agencies that traditionally did not work together, for example ACFS and Victim Services, Law Enforcement, and the Tribal Court. Other comments referred to improved communication between the lead agency and the Tribal Board of Directors. Several key informants reported specific activities as important outcomes. These included the Community Healing process, the public awareness and education campaign on child abuse and neglect, and YOOPERAIID.

The key informant responses on accomplishments and outcomes are supported by the results of the 2003 Stakeholder Survey, which asked respondents related questions. First we asked the effect of the SK/SS project on a long list of specific community conditions. Second, we asked respondents to pick the two most important accomplishments from that list.

Respondents in Sault Ste. Marie indicated strong community effects for:<sup>96</sup>

- Educating community residents, including parents, about child abuse and neglect (41% rated this one of the two most important accomplishments).
- Making professionals/services more sensitive to the ethnic and cultural backgrounds of the children and families they serve (32% rated it one of the most important accomplishments, 62% rated it a strong effect of the SK/SS project).
- Improving communication/cooperation among those who deal with child abuse and neglect (29% rated it one of the most important accomplishments, 62% rated it a strong effect of SK/SS project).

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<sup>96</sup> Strong effects are defined as stakeholders rating the goal 4 or 5 on a scale ranging from 1 = “no effect at all,” to 5 = “a major effect.”

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Other strong effects of BSNAF reported by the majority of stakeholders in the survey include improved delivery strategies and services for families:

- Improving multiagency responses to children affected by domestic violence (61%),
- Improving needs assessment for children/families (51%),
- Improving case management and follow up for families (51%).
- Expanding prevention programs (50%), and
- Reaching underserved rural areas (51%).

Compared to stakeholder responses in 2001, there were particularly big increases in the proportion reporting effects on "Improving multiagency responses to children affected by domestic violence" (from 30% in 2001 to 61% in 2003) and "Improving case management and follow up for families" (from 27% to 51%).

**Information and data availability.** Both key informants and stakeholders were asked questions about information availability and data. In the key informant interviews, we specifically asked whether the SK/SS project had affected how much information is available. The Stakeholder Survey asked related but slightly different questions. Respondents in Sault Ste. Marie gave the lowest rating of all five sites to SK/SS's effect on data collection and evaluation activities. Specific stakeholder questions asked if BSNAF had an effect on:

- "Improving information-sharing and case tracking across agencies" (just 40% considered it a strong effect),
- "Evaluating local practices and outcomes" (26%), and
- "Standardizing data collection across agencies" (18%).

Key informants mentioned a lack of data and inability to report numbers served by BSNAF funded activities.

**Organizational changes and personal benefits.** The Stakeholder Survey asked respondents about both organizational and personal benefits resulting from BSNAF. The average number of large organizational effects indicated as a result of BSNAF involvement

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increased from 2.1 in 2001 to 3.0 in 2003 in Sault Ste. Marie. Stakeholders in 2003 were most likely to report significant organizational changes in these areas:

- Improved communication with community members (42%),
- Agency more accessible to cultural /ethnic minorities (41%), and
- Improved communication with other organizations (38%).

Compared to respondents from 2001, the biggest change in stakeholder reports of organizational effects occurred for *Improved communication with community members* (increasing from 26% to 42% in 2003).

A majority of respondents also reported a personal benefit of receiving new training (53% in 2003, up from 35% in 2001). Additionally, 49 percent report the benefit of making new contacts.

**Results from the Survey of Agency Personnel.** The Survey of Agency Personnel targeted a slightly different population from the other surveys and interviews and included many line staff.<sup>97</sup> Interestingly, more than half of the respondents (56%) were from the school/education system.

The Survey of Agency Personnel echoed results mentioned by other sources. Most questions did not ask directly about the BSNAF project. However all respondents had heard of SK/SS, another 41 percent had attended meetings, and 34 percent had attended training conducted by the program. The system improvements most often attributed to BSNAF were improvements in collaboration, networking, or communication. Several respondents also mentioned improvements in services/resources and public awareness. Agency personnel were also asked to evaluate changes in the child protection system over the past 2 years. Most (43%) reported that things had stayed the same; over a third (37%) stated that things had improved; 3% felt things had gotten worse; and 17% reported some things had improved, while others had worsened. Of those who had heard of BSNAF, more than half (56%) said they did not know whether it had helped improve the child protection system, and 41 percent said that it did.

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<sup>97</sup> It should be noted that there was some overlap between recipients of the stakeholders survey participants in the Survey of Agency Personnel. Due to their small numbers, many staff in Sault Ste. Marie have multiple functions and wear many “different hats.”

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When asked about their own agency and its relationships to others, many of the agency personnel reported increased contact with other agencies in the past 2 years. Respondents attributed this to “increased knowledge of whom to contact” (63%) and to “closer relationships with the staff of the other agencies” (58%). Most respondents also said that “other agencies understood their agency very well” (56%) or at least somewhat (38%). Most respondents said that certain procedures or activities had improved—especially, “cross-agency coordination” (reported by 28%).

Overall, it appears that agency personnel saw less change than other pools of respondents, and almost one-quarter (22%) reported no improvements. Some differences might derive from differences in the questions, not just the respondents. For example, the Survey of Agency Personnel asked about changes in the “child protection system,” while stakeholders were asked about BSNAF’s effects on the “community.”

**Challenges and surprises.** The Stakeholder Survey shed some light on how participants viewed obstacles to the BSNAF project. When asked about eight specific challenges sometimes encountered by collaboratives, many stakeholders rated two as significant currently, including:

- “Keeping up the momentum” (79%), and
- “Limited resources” (73%).

At least half of the respondents also flagged some other current challenge including “lack of participation from key agencies or groups” (59%), which was also mentioned by several key informants, “understanding/meeting the expectations of funders” (53%), and “defining a realistic agenda” (50%). Almost half of respondents rated “turf issues” (46%) as a significant challenge now. Key informants also mentioned “developing a clear framework, concept, and goals” as a challenge.

The majority of respondents thought most of the 8 challenges on our list had been significant at some point in the collaborative’s history, even if not now. There were two striking instances where respondents were almost evenly split between the “never significant” and “significant now” ratings. These splits centered on leadership and staffing issues as follows:

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- “Ineffective leadership” was rated by 46 percent of respondents as significant now and by 43 percent as never significant.
- “Leadership and staff turnover in key agencies” was rated by 46 percent of respondents as significant now and by 41 percent as never significant.

**Future expectations.** SK/SS key informants were very optimistic about the future of collaborative efforts and mentioned plans to incorporate the TLM collaborative body into the formal Tribal governmental structure, although this had not yet happened. When respondents to the stakeholder survey were asked about sustainability after Federal funding ends and their own future involvement:

- Fifty-four percent said the collaborative is likely continue,
- Fifty-one percent said they were likely to be personally involved in SK/SS in the coming year, and
- Thirty-one percent said that their level of involvement is likely to increase.

It should be noted that at the time of the Key Informant and Stakeholder Surveys, the Sault Ste. Marie SK/SS project still had 2 full years of funding left, which may have influenced some of their responses around sustainability.

### **Overall Assessment of the Safe Kids/Safe Streets Initiative**

In this final section, we consider key questions in light of observations over more than 6 years, our review of the documentary evidence, and the survey and interview data cited above.

#### ***How Faithful Was Safe Kids/Safe Streets Project to OJP’s Vision?***

As stated earlier, the BSNAF project was not complete by June 2003, and had full funding to carry it through most of 2004 and possibly beyond, if transitional funds are available. In addition, political strife within the Tribe had stalled progress on system reform efforts. On balance, however, the current evidence suggests that the Sault Ste. Marie BSNAF project was faithful to OJP’s vision, although developing the program as intended (particularly integrating the four program elements) has taken years, repeated clarification from OJP, and technical assistance.

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The project focused most successfully on the elements of prevention education and public awareness and system reform. It also was able to address expanding the continuum of service. To date, however, the project has faltered in the area of data collection and evaluation.

The original Stakeholders Advisory Group developed a committee structure and established a working collaborative with members from diverse sectors of the community. After the project switched to an exclusively Tribal focus, the new collaborative of top agency directors developed a common vision and strategic plans. In the past 2 years, the collaborative was able to actively engage representatives from key Tribal agencies such as the Courts, Health, and Cultural division. The collaborative also made sustainability plans. Current plans to have the group facilitated by the executive director of the Tribe should solidify its sustainability and influence on policy decisions.

It is too early to tell whether OJP's vision for community participation has been realized. Certainly, BSNAF did engage community members in the Community Healing process, but community members had little or no direct role in governance, except insofar as the agency professionals involved were themselves members of the Tribe. This assessment is supported by evidence from the 2003 Stakeholder Survey, in which a significant number of respondents (44%) reported there was "not enough community involvement." Perhaps, a governance committee that was still working out its own structure and conflicts was not an appropriate place to gain consumer input; however, the project could have looked to focus groups or a community advisory board as alternate mechanisms. The collaborative was also unsuccessful in recruiting sustained participation from law enforcement, a key agency in the child welfare system.

The survival of the TLM is still in doubt. If sustained, it will definitely go a long way to meeting OJP's vision for SK/SS. The TLM has already expanded collaborative decisionmaking beyond a single Federal grant, attempted to institutionalize broad representation, and prioritized issues for action. If the TLM lasts, it may well take on even greater challenges—especially those related to Tribal agency resources, budgets, and strategic plans.

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### ***To What Extent Did Safe Kids/Safe Streets Produce System Reform?***

The SK/SS project made impressive progress on system reform and helped bring about many significant changes that are likely to endure. Perhaps the most dramatic change affecting the entire spectrum of child abuse and neglect is that collaboration has become the normal way of doing business among many Tribal agencies, and many stakeholders and other key informants felt that BSNAF deserved a large share of the credit for that. This is particularly important, because in our experience, once the collaboration process takes hold, it is hard to turn back—even though specific collaborations may come and go. In the same vein, the Community Healing process has infused new perspectives and approaches into many aspects of Tribal life and practice. Both of these movements have changed the community climate in ways that would be difficult to reverse.

Although it was too early to judge the results of several other SK/SS activities when we completed our observations, there were other activities that appear likely to endure, such as the Community Healing process and the family service caseworkers. Significant system changes in which the project played a substantial role include:

- Development of the TLM committee to coordinate the human service efforts of the Tribe and to oversee the agency's strategic plans;
- Implementation of the Community Healing process, including the development of educational brochures and mini-curriculums as well as ongoing sessions expected in the future;
- Enhancement of coordinated responses for child victims of sexual abuse and severe physical abuse through an interdisciplinary communitywide training curriculum and monthly child abuse and neglect training in collaboration with human resources, which is open to all Tribal employees;
- Development of interdisciplinary family service treatment teams that facilitate coordination of services and encourage family and client participation. Insurance reimbursement for many of those services is expected in the future;
- Development of a Tribal CAC, although it is still in its early stages of implementation.

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### ***Is There Evidence That the Project Has Had Longer Term Impacts on the Incidence of Child Abuse and Neglect?***

It is difficult to determine whether BSNAF affected the incidence of child abuse and neglect in the Tribal community, but we did not expect significant reductions over the life of the SK/SS project for many reasons. First, we assumed that it could take many years even for highly effective and appropriate system reforms and service improvements to significantly reduce child maltreatment. Second, we recognized that the rates of child abuse are influenced by economic conditions and other factors that are well beyond the control of SK/SS. Third, it seemed likely that in the shorter term the BSNAF project could actually increase referrals and reporting of child abuse and neglect, the best indicators we have of child maltreatment. An increase in reporting would occur if BSNAF succeeded in improving public perceptions of the child protection system, raising awareness of child abuse, and encouraging more people to report suspected abuse. Such increases in reporting could mask the effects of any reductions in abuse brought about by other project efforts.

In fact, when examining child maltreatment data from Chippewa and Mackinac counties overall, reports of child abuse and neglect increased beyond what one would expect from increases in the child population, as shown in Table 5-13 below. A dramatic increase in reports occurred in Chippewa County in 1997 and in Mackinac County in 1998, and remained at these levels thereafter. Perhaps this is due, in part, to the early emphasis BSNAF put on reaching mandated reporters, the Capacity Inventory conducted in 1997, and the publication and distribution of the educational brochure *At Risk Factors for Child Abuse and Neglect and Reasonable Cause to Suspect Indicators* in 1999.

### ***What Factors Affected Project Success and Progress?***

Many factors facilitated project efforts and activities, as described below.

- **Tribal leadership support.** The BSNAF staff had the support of the Tribal chairman and members of the Board of Directors. This support was evident in the willingness of the Tribal chairman to appoint the executive director to chair the TLM collaborative. The project earned credibility in the Tribal community, and awareness of project efforts increased enormously due to Tribal strategic planning activities, the Community Healing process, the media campaign, and the Tribal HSCB.



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**Table 5-13. Mackinac and Chippewa County, Michigan  
Reports of Child Abuse and Neglect 1992-2002 <sup>1</sup>**

Reports of child abuse and neglect (per 1,000 children)	Mackinac County, MI	Chippewa County, MI
1992	48.0	68.0
1993	66.7	76.6
1994	62.6	77.4
1995	60.4	68.3
1996	64.8	56.1
1997	69.5	101.0
1998	87.9	101.4
1999	82.1	101.9
2000	88.8	102.5
2001	*	*
2002	83.1	107.6

<sup>1</sup> Data from *Kids Count* in Michigan, Michigan League for Human Services.  
\* Not available.

- **Committed and experienced staff.** BSNAF had a core group of staff who were committed to the success of the project and very solicitous of input from collaboration members. This responsiveness to collaboration members allowed the project to successfully involve a wide variety of agencies/organizations in program planning.
- **Lead agency.** The lead agency for BSNAF had credibility in the community regarding child abuse and neglect issues. The agency played a central role in the investigation of child abuse and neglect cases for Tribal members living on trust/reservation land. Moreover, it had excellent relationships with state agencies in investigating and providing treatment for Tribal members who live off trust/reservation land.
- **Commitment to revitalization of cultural and spiritual values and traditions.** The Community Healing process provided an integral source of critical knowledge and personal growth for the participants and provided a strong basis for the project’s goal of permanently incorporating cultural practices and values into the foundation of all Tribal programs. The project used the process to draw participation from the Tribe’s various geographic areas and include both employees and community members learning side by side with traditional practitioners and spiritual leaders. The train-the-trainer format and mixed professional/community participation helped to share an awareness and understanding of healing from violence with the community at large.
- **Nature of the OJP framework.** While OJP required the implementation of activities across four program elements and the inclusion of specific agency partners—law enforcement, the courts, and child protective services—a specific program model was not dictated. BSNAF approached

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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implementation in the way that made the most sense for the local community. The cooperative agreement also allowed for flexibility in program activities.

There also were some challenges for the project:

- **Involvement of Tribal justice system agencies and personnel.** Justice was a required partner, and relationships with the Tribal Courts and Tribal Law Enforcement needed strengthening. Additionally, the introduction of defense attorneys into a relatively young Tribal Court system required a lot of adjustment by the judge, prosecutor, and child protection workers. As a result of the newly formed TLM in 2001, involvement of the Tribal Court increased somewhat, but not Tribal Law Enforcement. The CAC and new Tribal Detention Center may provide avenues for more collaboration and integration of services among these groups.
- **Maintaining momentum.** The collaboration lost momentum at various times, in part as a result of the refocusing to a Tribal-only collaborative. Some stakeholders reported frustration with the amount of time spent on planning. The collaboration was not able to produce enough tangible products for stakeholders, which had a negative effect on levels of commitment and enthusiasm from key agencies.
- **Evaluation capacity.** ACFS had limited experience with program evaluation, and no one on staff had all of the appropriate training or experience. The project's solution was to assign staff members part-time to carry out the evaluation and collect data. The project was reluctant to hire a consultant to develop an integrated, sustainable evaluation plan or to analyze existing data once they were collected. Thus, the project lacked ongoing feedback to the project on its progress and potential problems. Longer term, an evaluation could have described and assessed the extent to which the project met process and outcome objectives. Understanding these purposes and translating them into plans and action had not been accomplished when we completed our data collection.
- **Data reporting.** The Tribe as whole does not have any systemic ability to report data on Tribal members, other than the number of members and their age and sex distribution. Thus, the project lacked information on basic indicators of child well-being such as reports of child abuse and neglect, incidence of child abuse and neglect, rates of juvenile delinquency, rates of Tribal high school dropouts, employment, and poverty. Although some data were cited in the project grant application and in subsequent reports, there was no automated mechanism for collecting or reporting them routinely.
- **Service orientation.** It was difficult to overcome the services orientation of ACFS and other agencies that generally expected direct services from grants. It was difficult to educate the community and other agencies on the system reform approach of BSNAF. It was also difficult to overcome negative perceptions of the agency that came from individual experiences with nonvoluntary services, such as child protective services.

## Safe Kids/Safe Streets, Sault Ste. Marie, Michigan

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- **Management turnover in child placement services.** Unlike the other SK/SS sites, in Sault Ste. Marie child placement services was not a significant partner. Their collaboration was hampered by a lack of stable leadership in the division, as CPS had three different division directors over the life of the SK/SS project and was without a director for significant periods of time.
- **Clear OJP expectations and technical assistance timetables.** At times the project seemed uncertain about what OJP expected or how to interpret feedback. The project was also unprepared for the time it took to approve its Implementation Plan and the major program changes that were required of it. In fact, these changes were substantial and required the project to completely redesign its collaborative. The project was also unprepared for the time it took to facilitate technical assistance and implement requested training. Sault Ste. Marie suffered disproportionately from turnover in its technical assistance consultants, which meant that needed TTA was stalled for a period of time. The delays affected the successful implementation of activities and impeded stakeholder participation in the collaborative.

### What Is the Future for Safe Kids/Safe Streets?

We are impressed by the commitment to SK/SS by the lead agency and individual stakeholders, many of whom have been long-term participants in the project. The majority of respondents to the Stakeholder Survey (51%) reported that they expected to be personally involved in the coming year. Some stakeholders expressed concern about losing momentum and the collaborative languishing at point. However, the TLM is expected to help focus efforts in the future. Regardless of what happens to the project, we expect to see collaborative efforts continue in part because of new linkages forged throughout the community.

BSNAF still needs to complete several activities, including further analysis and distribution of the results of the case tracking study so that information can be used in a meaningful way to influence programming. The project also needs to consider expanding its data collection and other evaluation activities to document the impact of BSNAF in the community. The project is actively working to strengthen the Tribal CAC and solidify buy-in from Tribal Law Enforcement and the Tribal prosecutor. The development of the CAC and a Tribal juvenile detention center may provide avenues for more collaboration and integration of services. Last, the TLM and its new leadership will have to keep its member agencies involved and develop mechanisms to communicate its progress back to program-level and line staff, as well as to the community at large to ensure continued support.

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## **APPENDIX D**

### **Overview of Implementation Activities and Logic Model**

**Table D-1. Child Welfare Indicators for Mackinac and Chippewa County, Michigan**

Characteristics	Mackinac County, MI	Chippewa County, MI
Reports of child abuse and neglect (per 1,000 children) <sup>1</sup>		
1992	48.0	68.0
1993	66.7	76.6
1994	62.6	77.4
1995	60.4	68.3
1996	64.8	56.1
1997	69.5	101.0
1998	87.9	101.4
1999	82.1	101.9
2000	88.8	102.5
2001	*	*
2002	83.1	107.6
Substantiated victims (per 1,000 children) <sup>1</sup>		
1992	5.1	13.6
1993	18.8	11.5
1994	11.7	14.0
1995	9.7	10.5
1996	13.2	10.1
1997	6.6	9.9
1998	11.2	10.9
1999	8.6	12.0
2000	11.7	9.3
2001	10.2	10.2
2002	10.6	13.9
Out-of-home placements (per 1,000 children) <sup>1</sup>		
1992	7.6	8.5
1993	8.9	8.9
1994	8.5	8.6
1995	5.7	6.0
1996	7.2	5.4
1997	*	*
1998	*	*
1999	*	*
2000	*	*
2001	*	*
2002	*	*

## Appendix D.

<b>Table D-1. Child Welfare Indicators for Mackinac and Chippewa County, Michigan (continued)</b>		
Characteristics	Mackinac County, MI	Chippewa County, MI
Child death rate per 100,000 ages 1-14 <sup>2</sup>		
1994	*	*
1995	25	25
1996	25	25
1997	24	24
1998	23	23
1999	22	22
2000	*	*
Infant (Less than 1 year old) death rate per 1,000 <sup>2</sup>		
1994		
1995		*
1996		5
1997		6
1998		5
1999		6
2000		5
2001		*
Juvenile violent crime arrest rate per 100,000 persons 10-17 <sup>2</sup>		
1992	*	*
1993	*	*
1994	216	319
1995	*	*
1996	347	246
1997-2002	*	*
Teen pregnancy rate per 1,000 females 15-17 <sup>2</sup>		
1994	*	29.8
1995	*	*
1996	26.8	23.8
1997	*	29
1998	26	40
1999	26	17
2000	17	20
2001	*	*
<sup>1</sup> Data obtained from Michigan Family Independence Agency * Data not available in the category for this year. <sup>□□</sup> Kids Count Michigan data did not calculate the rates for these because the event numbers were too small (less than 6).		

**Table D-2. Original and Revised Activities Planned**

Original Activities Planned	Re-Visioned Activities Planned
<b>Systems Reform and Accountability Activities</b>	
<ul style="list-style-type: none"> <li>▪ Develop a Capacity Inventory to identify current resources, current strengths, systematic shortcomings, area needs, and barriers to meeting those needs</li> <li>▪ Develop standardized protocols to be used in the provision of services</li> <li>▪ Assess and include the practical and theoretical aspects of providing essential services to Native American families within cultural and institutional contexts</li> <li>▪ Summarize the Capacity Inventory results relative to the strengths and weaknesses of the current system</li> <li>▪ Develop a process that allows for a review of the courts to assess ways to improve the ability of courts to productively adjudicate cases relating to child abuse and neglect</li> <li>▪ Develop steps to improve communication among citizens, police, protective services workers, and others dealing with abuse in court</li> <li>▪ Investigate nonstigmatizing risk-identification mechanisms for Tribal Head Start, Child Care Center, Head Start Programs, and Child Care Centers.</li> </ul>	<ul style="list-style-type: none"> <li>▪ System development and service planning will be accomplished on a communitywide, collaborative basis</li> <li>▪ The Sault Tribe will institute strategic planning to ensure the future of the Tribe</li> <li>▪ The Tribe will promote the revitalization of spiritual values and traditions</li> <li>▪ Communication will be improved among citizens, police, protective services workers, and others dealing with the courts</li> <li>▪ Court personnel will be fully involved in various aspects of SK/SS program implementation</li> <li>▪ The Legal/Court Subcommittee will identify and utilize creative sentencing options to promote reduction in child abuse, neglect, juvenile delinquency, and treatment services</li> <li>▪ There will be greater accountability for perpetrators</li> </ul>
<b>Continuum of Services Activities</b>	
<ul style="list-style-type: none"> <li>▪ Utilize results of the Capacity Inventory to identify gaps in services provision</li> <li>▪ Develop, initiate, and expand needed services, especially in the areas of prevention and intervention</li> <li>▪ Develop a process to address the underlying sources of stress leading to abuse/neglect</li> <li>▪ Develop and implement plans to expand the delivery of services to underserved and rural areas</li> <li>▪ Review and re-deploy current services and resources to support at-risk children</li> <li>▪ Amend policies/practices identified as barriers to program objectives</li> <li>▪ Identify and utilize natural networks in the assessment and delivery of services</li> </ul>	<ul style="list-style-type: none"> <li>▪ Communitywide assessment of assets and identification of needs and gaps</li> <li>▪ Ongoing resource development</li> <li>▪ Parent and family education</li> <li>▪ Intervention with families at risk of, or experiencing, child abuse and neglect</li> </ul>



Appendix D.

<b>Table D-2. Original and Revised Activities Planned (continued)</b>	
<b>Original Activities Planned</b>	<b>Re-Visioned Activities Planned</b>
<b>Training Activities</b>	
<ul style="list-style-type: none"> <li>▪ Develop a curriculum to strengthen professionals’ capabilities to respond to abuse/neglect, thereby enhancing their sensitivity to ethnic and cultural backgrounds of children and families</li> <li>▪ Provide training to policymakers, administrators, and stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>▪ All persons working with children and families are knowledgeable about child abuse and neglect</li> <li>▪ The capabilities of professionals at all levels in the agencies responding to child abuse and neglect will be strengthened</li> <li>▪ The community’s policymakers, agency and program administrators, and especially its practitioners will be sensitive to the ethnic/cultural background of Native American families and apply appropriate cultural values in assessment and decisionmaking, ensuring integration of cultural values along all points of the service continuum</li> <li>▪ Training will be provided to minimize “re-victimization”</li> <li>▪ Natural systems will be identified, and additional training will be provided in how to use such systems in the provision of services</li> <li>▪ Staff will be trained in the development of informal, cross-agency networking techniques</li> <li>▪ A cultural competency training program will be developed that will provide for integration of cultural values and norms along all points of the service continuum</li> <li>▪ Communitywide, comprehensive, culturally sensitive plan will be developed in order to ensure multidisciplinary cross-training on the issues related to the prevention, identification, and treatment of child abuse and neglect</li> </ul>
<b>Program Evaluation Activities and Cross-Agency Information System Activities</b>	
<ul style="list-style-type: none"> <li>▪ Develop and implement a local evaluation</li> <li>▪ Cooperate with the national evaluation</li> </ul>	<ul style="list-style-type: none"> <li>▪ To conduct a local evaluation of progress and outcomes, including development of a logic model and measurements of services</li> <li>▪ To collaborate on the national evaluation that will permit measurement of process and outcomes</li> <li>▪ Development of a computerized case management system to improve information sharing and case flow</li> <li>▪ Effective data collection for reporting and resource development</li> <li>▪ Enhanced information available to the service continuum, including law enforcement and the courts, affording greater accuracy and completeness of case planning</li> </ul>

**Table D-2. Original and Revised Activities Planned (continued)**

<b>Original Activities Planned</b>	<b>Re-Visioned Activities Planned</b>
<b>Prevention Education and Public Information Activities</b>	
	<ul style="list-style-type: none"> <li>▪ Develop a broad-based multimedia public awareness and information campaign on child abuse and neglect</li> <li>▪ Ensure the existence and effectiveness of non-stigmatizing, community mechanisms for identifying and delivering services to victims of child abuse and neglect, domestic violence, and to those at risk of either being abused or abusing;</li> <li>▪ Strengthen families and cultural/community enhancement activities</li> <li>▪ Develop a plan for enhanced community information/awareness about the SK/SS project</li> <li>▪ Plan, incorporate, and implement a Tribal “America’s Promise” commitment campaign</li> </ul>

## Appendix D.

**Table D-3. Timeline for Building Strong Native American Families, Safe Kids/Safe Streets, Sault Ste. Marie, MI.**

<b>Date</b>	<b>Event</b>
<b>1996</b>	
September	Proposal submitted to OJJDP
<b>1997</b>	
March	ACFS is notified of its selection as a SK/SS project site
May	Project orientation, Washington, DC
June	Project facilitator hired
September	Kick-off meeting held
	Stakeholders Advisory Group and subcommittees formed (Tribal and non-Tribal agencies)
	Technology conference, San Diego, California
October-November	Capacity Inventory developed, administered, and results tabulated
December	Implementation Plan submitted to OJP
<b>1998</b>	
February	First set of comments received from OJP.
March	BSNAF provides a response to OJP's concerns
	Cluster meeting on team building and visioning, Huntsville, AL
April	Second set of comments received from OJP
	BSNAF requests site visit from OJP
	Ad-Hoc Legal Issues Subcommittee activated
May	TA site visit from AIDA
June	Summer Activity Guide for youth distributed
July	AIDA submits TA report to OJP
	OJP conducts site visit
October	TA site visit from Asa Begaye; OJP visits
	Visioning Experience held
	New project director hired
November	Revised Implementation Plan reviewed and approved by Stakeholders group
	Revised Implementation Plan submitted to OJP
	First Distinguished Youth Award presented
	Family Fun Nights initiated
	Cluster meeting on Federal expectations and review, Cincinnati, OH
<b>1999</b>	
March	Preliminary approval of new Implementation Plan
	New project director hired
April	Cluster meeting on resources, practices and system reports, Washington DC
May	Revised budget, training plan, and draft local evaluation plan submitted
November	Cluster meeting, Kansas City, MO
	Project changed focus from two-county program involving Tribal and non-Tribal agencies to a reservation/trust focused program involving Tribal agencies
	Tribal HSCB formed to govern project activities, and stakeholders advisory group disbanded
	First conviction for child abuse and neglect in a Tribal Court proceeding
	Bid to build Greektown casino in Detroit won
	Part-time juvenile law enforcement officer hired to work in Tribal school
	Strategic planning TTA workshop and draft systems improvement TTA plan developed
	Planned Tribal America's Promise program

**Table D-3. Timeline for Building Strong Native American Families, Safe Kids/Safe Streets, Sault Ste. Marie, MI. (continued)**

Date	Event
<b>1999 (continued)</b>	
November (continued)	Developed <i>At risk factors for child abuse and neglect and reasonable cause to suspect indicators</i> brochure Standardized background checks with Tribal Human Resources department
<b>2000</b>	
May	Cluster meeting on facilitative leadership and results-based accountability, Burlington, VT
August	Full-time family service team caseworker hired
November	Cluster meeting on sustainability, Washington, DC Initiated data collection for case tracking
December	Planning grant submitted to National Children’s Alliance for Tribal CAC Cultural division created Tribal Drug Court funded Greektown casino opened Participated in developing Tribal Strategic Plan SK/SS project moved from Behavioral Health Division to ACFS executive director’s office Community Healing process and training initiated Culturally specific wraparound service delivery charts developed Public education campaign committee formed YOOPERAID planning initiated Cross-deputized intake workers at Victim Services and ACFS Implemented CASA program
<b>2001</b>	
March	Community Healing Process, Phase 1, <i>What was Never Told</i> completed
April	Cluster meeting on cultural competency, Albuquerque, NM
October-December	Cluster meeting on teambuilding, sustaining collaborations and leadership development, Washington, DC Developed, conducted, and analyzed an ACFS customer satisfaction survey Developed ACFS division strategic plan Received funds for substance abuse treatment strategic planning Started implementing project management approach within ACFS Received funds for HIV/AIDS strategic planning Received funds to plan for Native American CAC Developed shared client intake/assessment form within ACFS Collaborated with Youth Education and Activities and received grant for mental health service funds Enhanced behavioral health (substance abuse) services through funds from Inter Tribal Council of Michigan Begin utilizing a standardized training curriculum for mandatory reporters via a self-training tutorial MDT participated in NCAC training Developed culturally specific activity wheel and collector cards that teach language and culture Started providing staff training and work toward integration of spiritual values and language via cultural specialist at ACFS Developed service caseworker protocols Hired service caseworker for Western service area

Appendix D.

**Table D-3. Timeline for Building Strong Native American Families, Safe Kids/Safe Streets, Sault Ste. Marie, MI. (continued)**

Date	Event
<b>2001 (continued)</b>	
October-December (continued)	Revised HSCB with new senior leadership and starting reworking vision mission, goals, and procedures for collaborative
<b>2002</b>	
March	National and local evaluation meeting, Washington, DC
May-December	Cluster meeting on integration of information systems, Sault Ste. Marie, MI
	Community Healing Process, Phase 2 <i>Ethnostress</i> and Phase 3, <i>Community Building</i> completed
	Changed HSCB to TLM committee to coordinate the human service efforts of the Tribe and to oversee the agency strategic plan
	Implemented interdisciplinary treatment teams
	New CPS director hired
	MSCA preliminary data analysis presented
	Human resources started utilizing standardized mandatory reporter training
	Continuum of Community Responses to Child Abuse and Neglect workshops held in two counties
	Started providing public defenders to juveniles and families in Tribal Court
	Multimedia public awareness campaign initiated via television, radio, and media ads
	Substance Abuse: Impact on Children video developed
	Received four ECCO awards (Excellence in Community Communications and Outreach) from the Center for Mental Health Services, SAMHSA for different aspects of the multimedia public awareness campaign
	COA training and certification process initiated
	Started planning in Western service area-Western Region Empowerment
CAC opened	
YOOPERAID, on-line service directory implemented	
<b>2003 (through June)</b>	
January	Phase 4 of Community Healing, <i>Indigenous Ways of Helping/Healing</i> initiated
March	Cluster meeting on achievements and lessons learned, Washington, DC
May	Wraparound TTA training conducted
June	Fox Valley MDT training conducted
	TLM leadership moved from ACFS to the executive director of Tribe
	Developed Community Healing educational brochures/mini curriculums

**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup>**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability</b>					
Collaboration Development	Developed governance structure for BSNAF, representing broad cross-section of stakeholders.	ACFS	Seven-county service area	1997-99 1999 1999 2000-03	<ul style="list-style-type: none"> <li>▪ Stakeholders Advisory Group and supporting committees established (1997).</li> <li>▪ Held a Visioning Summit to define vision for BSNAF.</li> <li>▪ Tribal HSCB developed to replace Stakeholders Advisory Group as the BSNAF collaborative.</li> <li>▪ Held meetings/workshops (with SITTAP TTA consultants) and developed System Change Plan.</li> <li>▪ Revised Tribal HSCB with new senior leadership- renamed TLM.</li> <li>▪ Developed new vision, and mission, and prioritized goals, for TLM collaborative.</li> <li>▪ Moved leadership of TLM to Tribal Executive Office for leadership.</li> <li>▪ Developed Western end empowerment group to energize and empower Western end staff in the collaborative activities.</li> </ul>
	Supported other collaboratives with system change objectives	ACFS, Hiawatha Behavioral Health	Chippewa and Mackinac Counties	1998-2001 1998-2002 1998-2001	<ul style="list-style-type: none"> <li>▪ Participated in Chippewa County Multi-Purpose Collaborative Body.</li> <li>▪ Participated in Mackinac County HSCB.</li> <li>▪ Assisted in the development of the Pre-birth to five strategic plan for Chippewa County.</li> </ul>
	Supported other collaborative efforts	ACFS, Youth Education and Activities	Chippewa and Mackinac Counties	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Participated and planned activities with Chippewa County and Mackinac County Children and Youth Networks.</li> <li>▪ Participated in Tribe wide joint planning for events.</li> </ul>
Client and Community Input and Participation	Encouraged diverse participation in Community Healing Process	ACFS	Tribal members in the seven county service area	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Engaged community participation in Community Healing process.</li> <li>▪ Developed cultural events that engaged community residents (Drum Social, Clan Gathering, etc.).</li> <li>▪ Held “Honoring Parent Involvement” dinner for parents.</li> <li>▪ Held “Honoring Child Advocacy” breakfast for CASA and other volunteers.</li> </ul>

**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Strategic Planning	Supported development of strategic plan for the Tribe	Tribal Administration and Planning	Sault Ste. Marie Tribe of Chippewa Indians	1999-ongoing	<ul style="list-style-type: none"> <li>Served on strategic planning committee for the Tribe and developed vision, mission, and goals.</li> <li>Participated in Tribal strategic plan committees (communications, data base).</li> </ul>
	Supported development of ACFS strategic plan	ACFS	Seven-county service area	2000-ongoing	<ul style="list-style-type: none"> <li>Implemented ACFS strategic planning efforts in coordination with Tribal strategic plan.</li> <li>Developed ACFS division strategic plan, "Foresight Anishnabek 2000."</li> <li>Developed "project charters" to implement the objectives of the strategic plan.</li> <li>Implemented "project management" approach within ACFS to track progress on projects according to strategic planning goals.</li> </ul>
	Supported strategic planning for substance abuse treatment	ACFS	Seven-county service area	2002-03	<ul style="list-style-type: none"> <li>ACFS received funds for substance abuse treatment strategic planning, conducted needs assessment survey, and presented results.</li> </ul>
Multidisciplinary Teams	Strengthened and revitalized MDT	ACFS	Victims of child abuse and neglect	2002 2003 2003	<ul style="list-style-type: none"> <li>Supported training by Fox Valley Technical College for MDT members.</li> <li>MDT initiated strategic planning, and developed vision, mission, and goals.</li> <li>Updated MDT interagency protocol.</li> </ul>
	Improved investigation and prosecution of child abuse and neglect	ACFS	Victims of child abuse and neglect	2002-ongoing	<ul style="list-style-type: none"> <li>Sent MDT members to training at the National CAC training institute.</li> <li>Initiated forensic interviewing at CAC.</li> </ul>

**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
	Developed Tribal CAC	ACFS	Seven-county service area	2001 2001 2003-ongoing	<ul style="list-style-type: none"> <li>▪ Applied and received funding to develop a Native American CAC.</li> <li>▪ Identified suitable location for CAC.</li> <li>▪ Developed protocols for CAC.</li> <li>▪ Moved MDT to CAC<sup>1</sup></li> <li>▪ CAC opened in 2002, providing forensic interviewing, therapy, family visitation, and making referrals</li> </ul>
Program/Service Coordination	Promoted interdisciplinary and interagency coordination	ACFS, Tribal Court	Seven-county service area	2001-ongoing	<ul style="list-style-type: none"> <li>▪ Cross-deputized Victim Services and Behavioral Health staff to reduce duplication in intake process.</li> <li>▪ Coordinated service and training efforts with Tribal Victim Services program.</li> <li>▪ Jointly supervised mental health staff working with the courts.</li> </ul>
	Established linkages with Head Start and Youth Education and Activities (YEA)	ACFS, Head Start, YEA	Seven-county service area	1999-2000	<ul style="list-style-type: none"> <li>▪ Developed Tribal America's Promise program in collaboration with Head Start and YEA using AmeriCorps and VISTA volunteers (note funds were never released from AmeriCorps).</li> </ul>
Resource Development	Identified funding for caseworker services	ACFS	Seven-county service area	2003	<ul style="list-style-type: none"> <li>▪ Identified specific services of caseworkers as insurance billable.</li> <li>▪ Initiated accreditation process for ACFS which will facilitate insurance reimbursement for specific services.</li> </ul>
	Shared program resources with other ACFS programs	ACFS, Tribal Court, YEA	Seven-county service area	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Shared program resources (e.g., staff, training, education) with another federally funded initiative, the Children's Mental Health Initiative.</li> <li>▪ Collaborated with Tribal Court, victim services, and youth education and activities and received funds for mental health services.</li> </ul>



**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
	Located other grants and funding	ACFS	Seven-county service area	2001	<ul style="list-style-type: none"> <li>▪ Received Indian Health Service, BIA, and state child welfare funds to offset costs in behavioral health, child placement, and general assistance.</li> <li>▪ Received funds from Inter Tribal Council to augment behavioral health services (primarily substance abuse treatment) in Western service area.</li> </ul>
Training and Professional Development	Provided consultation and training on children and families at risk	ACFS	Seven-county service area	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Provided trainings as follows: asset building community development; effects of violence on children; parenting for ADHD and other special needs children; brain development and developmental concerns and disclosure for children witnessing violence; anxiety and stress; mental health and the school; suicide awareness; behavior management in recreational settings; medications affecting behavior and brain development; five love languages of children; how parent stress affects children; sibling rivalry; six thinking hats; parenting styles: healthy relationships: all stressed up and nowhere to blow; sports and nutrition for children.</li> <li>▪ Continuing of community responses to child abuse and neglect workshops</li> </ul>
	Trained mandated reporters and other professionals about child abuse and neglect and reporting	ACFS	Seven-county service area	2002-03	<ul style="list-style-type: none"> <li>▪ Standardized training curriculum for mandatory reporters and developing a self-training tutorial.</li> <li>▪ Implemented communitywide training on the Continuum of Community Response for Child Abuse and Neglect.</li> <li>▪ Developed brochure, At Risk Factors and Reasonable Cause to Suspect Indicators.</li> </ul>
	Increased cultural competency of local agencies and service providers	ACFS	Seven-county service area	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Implemented Community Healing Process training and community capacity-building training.</li> <li>▪ Provided staff training on integrating spiritual values and traditional language via cultural specialist at ACFS.</li> </ul>

**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Cultural Sensitivity/Competency Efforts	Institutionalized cultural efforts	Tribal Administration and Board of Directors	Sault Ste. Marie Tribe of Chippewa Indians	2000-ongoing	<ul style="list-style-type: none"> <li>Supported creation of new cultural division, including traditional and spiritual leaders.</li> </ul>
	Community Healing process	ACFS	Tribal members in the seven -county service area	2000-ongoing	<ul style="list-style-type: none"> <li>Completed four modules of CHP training.<sup>1</sup></li> <li>Trained community members and agency staff.</li> <li>Developed educational brochures on community healing process themes.<sup>1</sup></li> <li>Participated in the Anishnabe Future Leaders youth camp and women’s spiritual gatherings.</li> <li>Supported cultural training series for ACFS staff.</li> </ul>
	Documented cultural skills and knowledge	Tribal Cultural Division	Sault Ste. Marie Tribe of Chippewa Indians	2003	<ul style="list-style-type: none"> <li>Supported the development of a database of Indian awareness, knowledge, and skills.</li> </ul>
	Educated children on cultural values and traditions	ACFS	Seven-county service area	2002	<ul style="list-style-type: none"> <li>Developed culturally specific “activity wheel” and collector cards that teach language and culture.</li> <li>Participated in Future Anishnabe Leaders camp.</li> </ul>
Other System Reform and Change Projects	Provided children with court appointed advocates	Tribal Court	Chippewa and Mackinac counties	2001-03	<ul style="list-style-type: none"> <li>Implemented CASA program.</li> </ul>
	Developed options to the prosecution of juveniles	Tribal Court, ACFS	Chippewa and Mackinac counties	2003	<ul style="list-style-type: none"> <li>Started development of a Peacemaker Court for first-time juvenile offenders.</li> </ul>
	Supported families in child abuse and neglect proceedings	Tribal Court	Seven-county service area	2002-ongoing	<ul style="list-style-type: none"> <li>Supported the provision of public defenders to juveniles and families seen in Tribal Court.</li> </ul>
	Expanded options to the prosecution of substance abuse offenses	Tribal Court, ACFS	Seven-county service area	2001-ongoing	<ul style="list-style-type: none"> <li>Supported implementation of Tribal Drug Court.</li> </ul>

**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services</b>					
Continuum of Services	Provided prevention services to children	ACFS, Tribal Police	Children attending Tribal School	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Supported juvenile law enforcement officer to work with youth in the Bahwating Tribal school.</li> <li>▪ Supported Junior Police Academy.</li> </ul>
	Provided outreach to parent advocacy groups	ACFS	Parents of special needs children	2000-03	<ul style="list-style-type: none"> <li>▪ Provided support to Parent Advocacy Group for parents of special needs children.</li> </ul>
	Provided wraparound case management for families with multiple problems	ACFS	Seven-county service area	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Developed family service team caseworker program, developed protocols, etc.</li> <li>▪ Implemented interdisciplinary treatment teams.</li> <li>▪ Encouraged use of natural networks in assessment and treatment.</li> <li>▪ Hired service caseworker in Western service area.</li> <li>▪ Expanded service to Western service area by hiring caseworker, implementing family service teams in Western service area, and hiring clinical supervisor.</li> </ul>
	Provided family activities	ACFS, YEA, Recreation	Chippewa and Mackinac counties	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Held annual “winter wear giveaway” to provide needed clothing and other resources to families.</li> <li>▪ Implemented Family Fun Nights to provide activities for families and provide resource material on services to parents.</li> <li>▪ Developed youth summer activity guide.</li> </ul>
<b>Data Collection and Evaluation</b>					
Local Monitoring and Evaluation	Collected data on the needs of Tribal members and their program ideas	ACFS	Seven-county service area	1998-2000	<ul style="list-style-type: none"> <li>▪ Conducted survey of Tribal members at Tribal National Assembly.<sup>1</sup></li> <li>▪ Conducted Capacity Inventory.<sup>1</sup></li> <li>▪ Conducted focus groups with youth.<sup>1</sup></li> <li>▪ Conducted readiness assessment for Tribal CAC.<sup>1</sup></li> <li>▪ Developed, conducted, and analyzed an ACFS customer satisfaction survey.</li> <li>▪ Collected family stressor data from welfare and WIC recipients and developed top 10 stressors list.</li> <li>▪ Developed survey for Community Healing process and sent out to all participants.</li> </ul>

**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
MSCA	Initiated MSCA on child abuse and neglect cases	ACFS	Chippewa County	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Collected case tracking data.</li> <li>▪ Developing plan to complete case tracking analysis.</li> </ul>
MIS Development and Information Sharing	Supported sharing of information	ACFS	Seven-county service area	2001-ongoing	<ul style="list-style-type: none"> <li>▪ Conducted MIS needs survey.</li> <li>▪ Developed shared client intake/assessment form within ACFS.</li> <li>▪ Developed shared interagency clinical records.</li> </ul>
<b>Prevention Education/Public Awareness</b>					
Prevention Education/Public Awareness	Informed public about child abuse and neglect and available resources	ACFS	Seven-county service area	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Implemented joint planning process for prevention education and public awareness.</li> <li>▪ Developed brochure <i>At-Risk Factors for Child Abuse and Neglect and Reasonable Causes to Suspect</i>.</li> <li>▪ Coordinated prevention education topics with other agencies around a synchronized calendar (with four quarterly/seasonal themes) built around the Native American Medicine Wheel concepts.</li> <li>▪ Developed comprehensive media/communication plan and multimedia public awareness campaign. Won four ECCO awards for this campaign.</li> <li>▪ Developed multiple public service announcements that aired on television and radio.</li> <li>▪ Produced multiple “products” (such as activity cards, bookmarks, etc.) that provided culturally specific education and social service resource information for multiple audiences.</li> <li>▪ Provided prevention education and public information in coordination with other agencies for Child Abuse Prevention Month.</li> <li>▪ Provided information packets and resources to beauty shops throughout seven-county area during Domestic Violence Awareness Month; supported purple ribbon campaign.</li> </ul>

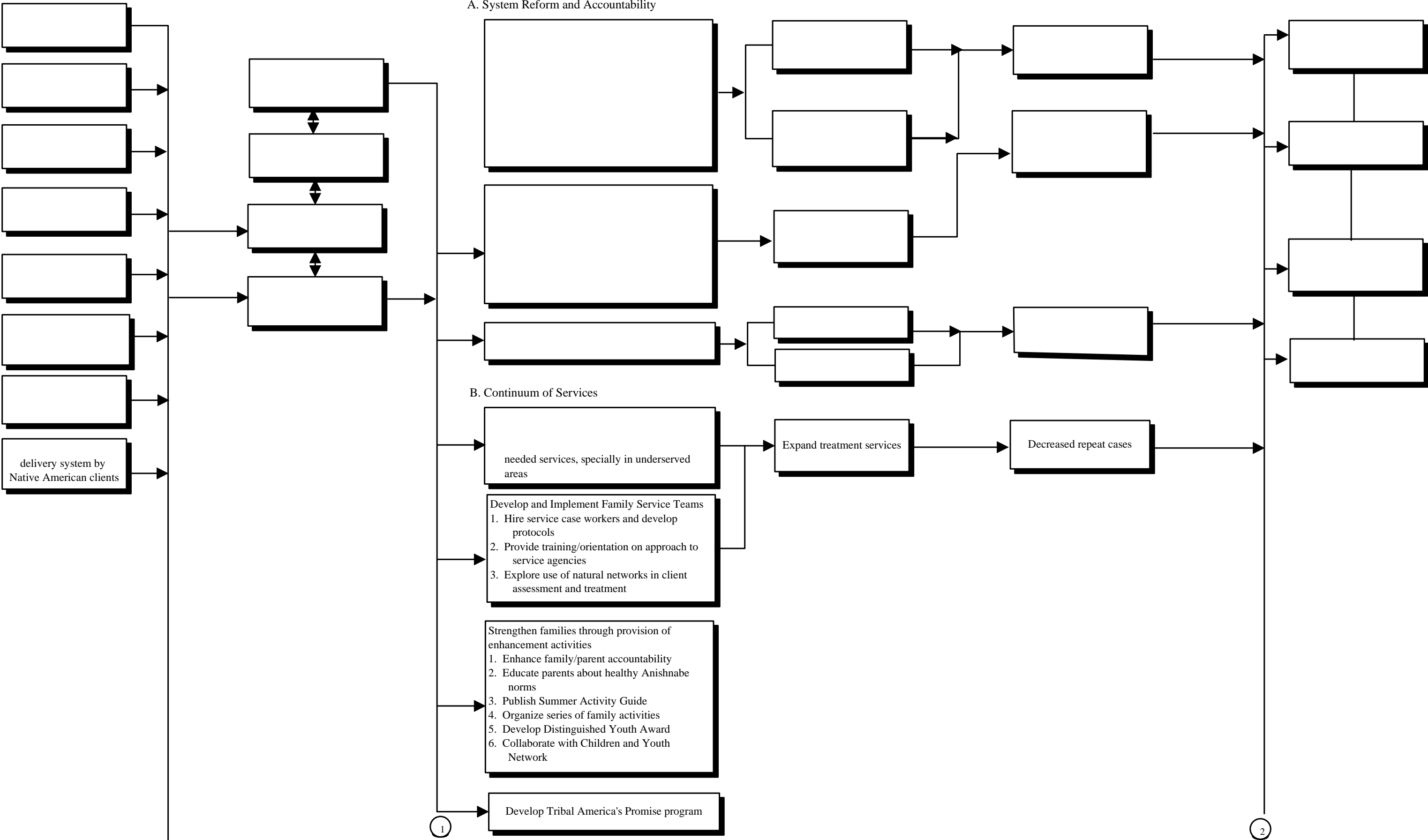
**Table D-4. Overview of Implementation Activities, 1997-2003<sup>1</sup> (continued)**

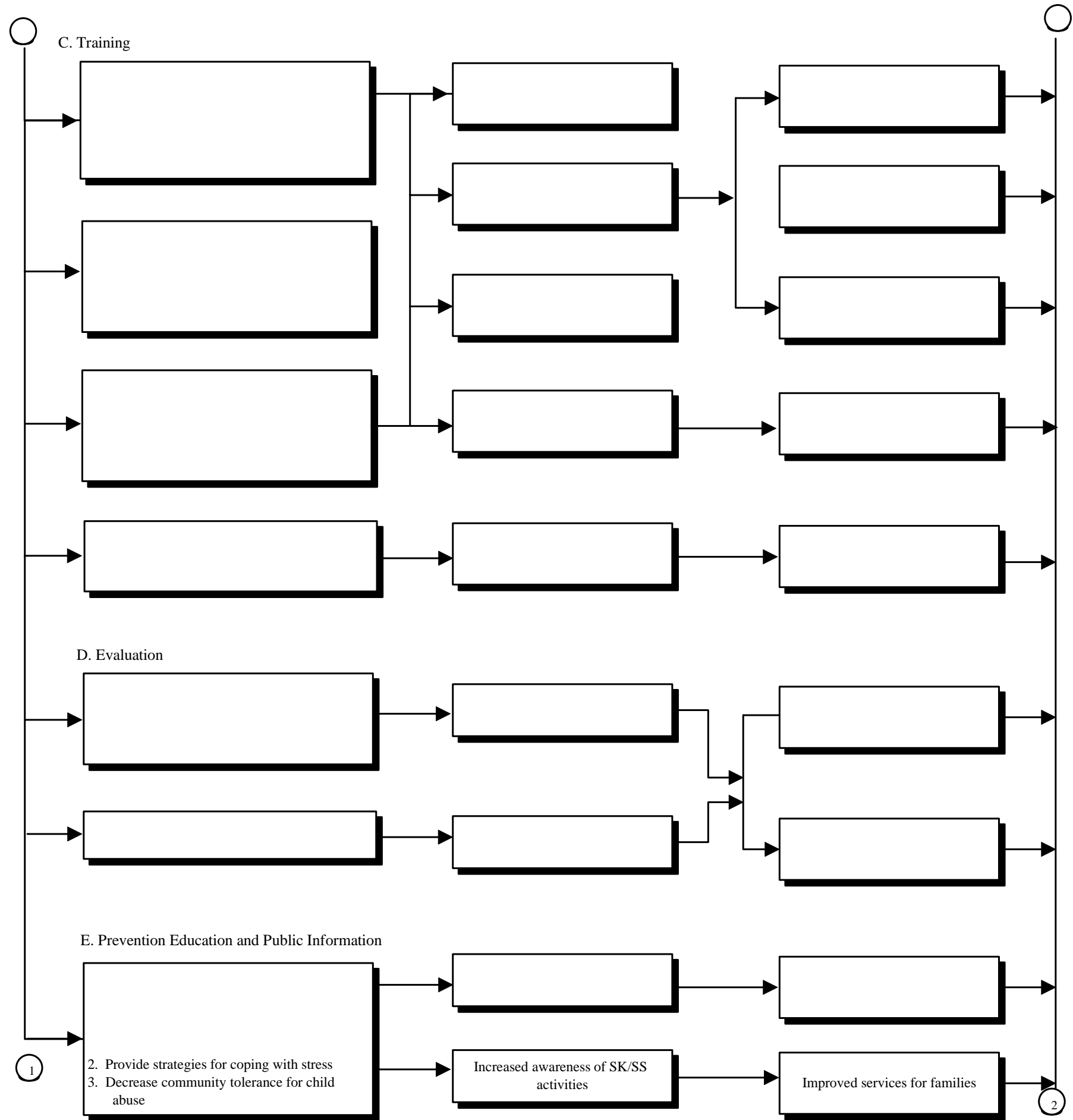
Activity Category	Activity	Lead/Agency Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Awareness (continued)</b>					
Prevention Education/Public Awareness (continued)					<ul style="list-style-type: none"> <li>▪ Distributed mugs imprinted with information to local law enforcement, emergency room personnel, and schools in seven-county service area, which included SK/SS, developed pamphlet, <i>A Parent's Guide to Children's Problems</i>.</li> <li>▪ Developed video on Substance Abuse Affects on Children.</li> <li>▪ Sponsored dinner honoring volunteers who have worked with victims (in collaboration with victim services and CASA).</li> <li>▪ Developed Distinguished Youth Award.</li> <li>▪ Participated in quarterly spiritual gatherings.</li> </ul>
	Provided central repository of resource information	ACFS	Seven-county service area	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Developed web-based community resource directory, YOOPERAID.</li> </ul>

<sup>1</sup> Note that many activities and accomplishments cut across more than one category. We chose a "primary" category for them rather than repeat the information in several places.

**Figure D-1. Logic Model for Sault Ste. Marie: Implementation Phase**

Inputs → Activities → Immediate Outcomes → Intermediate Outcomes → Long-Term Outcomes





## **6. Lucas County Safe Kids/Safe Streets, Toledo, Ohio**

The Family and Child Abuse Prevention Center (FCAPC), a nonprofit, community-based education, public awareness, and direct services agency based in Toledo, Ohio, is the lead agency for the Safe Kids/Safe Streets (SK/SS) program. The Lucas County Child Abuse Task Force (CATF), which is coordinated by FCAPC, functions as the SK/SS governing council. The Toledo Hospital serves as the fiduciary agent for the program. The Lucas County SK/SS program is unique because it was awarded only “seed funding” from the Office of Justice Programs (OJP). The program received five grants of \$125,000 from 1997 until 2003; OJP invited the project to submit an application for an unexpected sixth grant (\$125,000) to support sustainability efforts. This transitional grant will support key program efforts through September 2004 and bring total OJP funding for the Toledo program to \$750,000.

The SK/SS initiative was also supported by a number of OJP agencies that were not involved in actually monitoring the program. Toledo took advantage of this additional support, receiving \$10,000 from the Bureau of Justice Statistics for one of the activities partially funded under the grant. It also took advantage of support provided through the OJP technical assistance network, including help from the National Center for State Courts, the Child Welfare League of America, and the American Prosecutors Research Institute.

The first section of this report discusses the project setting, including broad demographic characteristics of the community and rates of child abuse and neglect. Next, we present an overview of the site's child protection system, its treatment system, its prevention and early intervention system, and its public education and professional training on child abuse and neglect. The last section discusses significant factors in the project's history. Timelines showing key events are also provided. Note that the project does not have a formal name other than SK/SS. It is referred to both as the Lucas County SK/SS project and the Toledo SK/SS project in this report.



## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

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### Project Setting

#### Characteristics of the Community

The target area for the Toledo SK/SS project is Lucas County, Ohio. At implementation, the county was heavily urban (66%), with a mixture of suburban (22%) and rural (12%) areas. There has been little change in the demographics of Lucas County. The predominant racial/ethnic groups remain white (75%) and African American (17%). Children living in Lucas County make up 26.3 percent of the population.<sup>98</sup>

Table 6-1 shows some selected demographic characteristics of Lucas County, compared to the State of Ohio and the Nation. Children in Lucas County are more likely than children in Ohio and nationwide to live in poverty and in single parent households.

<b>Characteristics</b>	<b>Lucas County</b>	<b>Ohio</b>	<b>United States</b>
Total population	455,054	11,353,140	281,421,906
Population under age 18	26.3%	25.4%	25.7%
Median household money income, 1999	\$38,004	\$40,956	\$41,994
Percentage of persons below poverty, 1999	13.9%	10.6	12.4%
Percentage of persons under 18 below poverty, 1999	20%	14.4%	16.6%
Percentage of population living in neighborhoods where 20% or more of the population is below poverty	29.0%	14.8%	20.4
Percentage of single parent households with own children	31.6%	24.6%	23.3%

<sup>a</sup> U.S. Census Bureau. (2003). *State and County Quick Facts*. [www.quickfacts.census.gov](http://www.quickfacts.census.gov).

#### Rates of Child Abuse

Lucas County experiences a high rate of child abuse and neglect. According to the SK/SS grant application, in 1992, the county ranked fifth in the incidence of child abuse and third in referral rates for child abuse in the state of Ohio. The application also noted that Lucas County Children's Services (LCCS), the agency responsible for investigating child abuse,

<sup>98</sup> U.S. Census Bureau. (2003). *State and County Quick Facts*. [www.quickfacts.census.gov](http://www.quickfacts.census.gov).

## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

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reported referral rates of 35 per 1,000 children in the county. In 1995, LCCS investigated 4,011 referrals for child abuse and neglect, including 1,675 investigations for neglect, 1,321 investigations for physical abuse, 1,001 investigations for sexual abuse, and 13 for emotional abuse. Importantly, some 25 percent of the referrals to LCCS in 1995 were for child sexual abuse, significantly exceeding the 16 percent reported nationally by the National Center on Child Abuse and Neglect in 1990.

Lucas County also reported significant concern about juvenile sex offenders. According to the SK/SS grant application, almost one-third of the offenders identified reported a history of childhood sexual victimization. Lucas County officials were well aware that identified juvenile sex offenders were a small proportion of the juveniles who engaged in sexual misconduct with younger children, and prosecuted cases were thought to represent only 30 percent of all child sexual reports received by the county. At the time of the original grant application, one-third of the cases received by LCCS for investigation were unsubstantiated, and an additional one-third were substantiated but did not result in a prosecution. According to the grant application, this occurs when the child victim is too young to testify or the victim's family wants to spare the child the potential re-victimization of a court process. Child maltreatment data for selected years are presented later in Table 6-9, and additional data on child welfare indicators are presented in Appendix A, Table E-1.

### **The Formal Child Protection System**

The formal child abuse and neglect system in Lucas County is governed by a "Lucas County Memorandum of Understanding." This agreement outlines the responsibilities of various agencies in reporting and investigating child abuse and neglect. The MOU is subscribed to by the presiding judge of the Court of Common Pleas, the presiding judge of the Juvenile Court, the Lucas County sheriff, all chief municipal police officers, all township police officers within the county, the Lucas County prosecuting attorney, the Toledo law director, the director of law for each city within the county, village solicitors, and the executive director of the LCCS.

## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

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### ***State Statutes***

There has been little change in the Ohio statutes governing child abuse and neglect since the project was initiated. Table 6-2 outlines current definitions of child abuse and neglect. Mandatory reporters for Ohio include anyone who is an:<sup>99</sup>

- Attorney;
- Physician, including a hospital intern or resident, dentist or podiatrist;
- Registered nurse, licensed practical nurse, visiting nurse or other health care professional;
- Licensed psychologist;
- Speech pathologist or audiologist;
- Coroner;
- Administrator or employee of a child day-care center;
- Administrator or employee of a certified child care agency or other public or private children services agency;
- School teacher, school employee or school authority;
- Social worker;
- Licensed professional counselor; or
- Person rendering spiritual treatment through prayer in accordance with the tenets of a well-recognized religion.

### ***Intake and Investigation***

The Lucas County child welfare system is administered by LCCS. Allegations of child abuse or neglect can be received by telephone, in person, or in writing and can be made to law enforcement or to LCCS. Once an allegation is received, LCCS screens it and if warranted, initiates an investigation. All referrals that allege life-threatening situations are investigated within 1 hour of receipt by an LCCS assigned caseworker. Investigations begin within 24 hours for all other cases. The agency tries to conduct joint investigations with law enforcement

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<sup>99</sup> The Ohio Revised Code Section 2151.421, accessed from <http://www.co.lucas.oh.us/LCCS/report.asp>.

## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

**Table 6-2. Ohio State Definitions of Child Abuse and Neglect<sup>a</sup>**

Abuse <sup>b</sup>	<p>An abused child includes any child who:</p> <ul style="list-style-type: none"> <li>▪ Is the victim of sexual activity</li> <li>▪ Is endangered as defined in the statute concerning endangering children,</li> <li>▪ Exhibits evidence of any physical or mental injury or death, inflicted by other than accidental means, or an injury or death which is at variance with the history given of it</li> <li>▪ Because of the acts of his parents, guardian or custodian, suffers physical or mental injury that harms or threatens to harm the child's health or welfare</li> <li>▪ Is subjected to out-of-home care child abuse</li> </ul>
Neglect	Defined as an act of omission or a pattern of care which fails to meet the minimum level of a child's basic physical needs when such failure harms a child or places a child at risk of harm
Sexual abuse	Defined as any acts of a sexual nature upon or with a child. The act may be for gratification of the perpetrator or of a third party, or the child is the victim of "sexual activity" as defined under Chapter 2907 of the Ohio Revised Code, where such activity would constitute an offense under that chapter, except that the court need not find that any person has been convicted of the offense in order to find that the child is an abused child (Ohio Revised Code: 2151.031)
Sexual exploitation	Conduct or activities related to pornography depicting minors, promoting prostitution by minors, and/or forcing child to watch sexual activities of others
<p><sup>a</sup> U.S. Department of Health and Human Services, National Clearinghouse on Child Abuse and Neglect Information. (2002) Compendium of Laws. Reporting Laws: Definition of Child Abuse and Neglect.</p> <p><sup>b</sup> Operational Definitions of Child Abuse and Neglect supplied by Lucas County Children's Services, 2003.</p>	

agencies whenever practicable, and crisis counseling for victims and families is provided or scheduled as soon as possible. These efforts have been greatly enhanced by the development of the Children's Advocacy Center (CAC), which opened in 1997.

The process for taking initial referrals is designed to solicit as much information as possible. Intake workers record all information on an "Intake Log Sheet," which includes identifying information on the child victim and family members. Intake workers also solicit information on any previous involvement with LCCS, using the agency's computerized recordkeeping system as a check. Information on collateral resources is also gathered (e.g., involvement of other professionals in the case, identification of witnesses). A risk assessment is conducted, and any efforts made to decrease the risk are documented. This information is used to determine priority ratings for investigation.

## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

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Intake specialists make the decision to either screen the case in for further investigation or screen it out. Cases are screened out if: (1) they do not meet the guidelines for accepting a referral and do not involve providing other mandatory services, (2) do not fall within LCCS' jurisdiction, or (3) are invalidated from objective information obtained. In these instances, families are referred to services within the community for intervention, if necessary. The intake specialist has to provide a written rationale for the decision, which is reviewed and approved by the intake supervisor.

If a case is accepted for investigation, the intake specialist completes a report form as soon as possible or within 2 hours of the decision to screen the case in. This report is forwarded to a supervisor, and a caseworker is assigned for further investigation. Unit supervisors must assign the case within 3 working hours of the decision to screen the case in for investigation. Caseworker investigations include the completion of a "Risk Assessment Field Worksheet" and after completing their investigation, a "Case Disposition" form. Cases can be determined as substantiated, indicated, or unsubstantiated.

Unsubstantiated cases are closed; however, the family is given referrals for services if necessary. Indicated and substantiated cases can receive a range of services, including medical and physical care, parent education, mental health counseling and support groups, substance abuse counseling, job and family services, and protective day care. Custody is pursued through the Lucas County Family Court when children's safety cannot be maintained in the home.

### ***Changes in Intake and Investigation***

LCCS has undergone several changes throughout the life of the SK/SS program. It expanded its staff to have someone available on call 24 hours a day. The agency reorganized and decentralized the sexual abuse intake unit. It separated service delivery from investigation responsibilities and instituted geographic assignment of case workers. This created a more diverse caseload for LCCS workers and required additional training. Other changes at LCCS include hiring a new assessment supervisor, who coordinates LCCS cases presented at the Children's Advocacy Center (CAC) and co-facilitates the multidisciplinary team (MDT) meetings. A substance abuse assessor and a domestic violence consultant also were hired to enhance the risk assessment process for reported cases that are screened in for assessment or

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investigation. These two positions enabled a more thorough assessment and treatment referral process.

### ***Law Enforcement***

The Toledo Police Department (TPD) and Lucas County Sheriff's Office are actively involved in cases of child abuse and neglect. Cases are screened by a sergeant in the TPD for possible assignment to a detective. Once law enforcement begins an investigation, LCCS is contacted to arrange for a joint interview whenever possible. Joint interviews are generally conducted at the CAC. LCCS faxes all cases of suspected child sexual abuse to the TPD Personal Assault Unit, and there is a similar process with the Sheriff's Office.

The TPD restructured in 2000 and established a centralized personal assault unit that redeployed staff from three units into one. The unit comprises five investigators and one sergeant who report directly to the lieutenant in charge of the Crimes Against Persons section. This restructuring had a positive effect on the efforts of the project. Previously, two detectives who specialized in dealing with child abuse and neglect were physically stationed at LCCS. As a result, these detectives were assigned the majority of child abuse cases. However, any overflow cases went out to the police district substations, and hence to officers with varying levels of expertise and training in how to handle child abuse and neglect cases. In 2000, the two specially trained detectives were relocated from the LCCS building to the Central District Police Station and assigned to a new Personal Assault Unit. While this transfer deprived LCCS of on-site detectives, once fully implemented it increased coordination of child abuse investigations among LCCS, the TPD, and the CAC. It also provided opportunities for more centralized training on the MDT approach and "best practices" in child abuse investigations. However, some of the positive gains were offset by the restructuring of LCCS in 2001 that broke up its sexual abuse unit. Now the special TPD officers interact with a greater diversity of LCCS workers, many of whom are less experienced with sexual abuse cases.

### ***Prosecution and Dependency Hearings***

The Juvenile Division of the Lucas County Court of Common Pleas handles all cases involving children under 18 years of age and all cases that deal with child abuse and neglect. It has jurisdiction in adult cases that involve child abuse as well as visitation and custody matters. In conjunction with LCCS, this Court monitors the progress of treatment for

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both for the child and parent, oversees visitation requirements, and ensures that all required treatment has been provided. When the perpetrator is a parent or guardian, all are efforts made to provide counseling and other services. If the abuser's treatment is determined to be unsuccessful, additional treatment and supervision can be ordered by the Court. If the abuser's treatment continues to be unsuccessful, and it is determined that the parent is unable or unwilling to protect the child, parental rights may be terminated. This process generally occurs within 1 year; however, state statute allows an extension of two 6 months. Termination of parental rights (TPR) frees the child to be placed for adoption, and the protective case is closed. The Court can also order that the child be placed in a temporary care setting until the family is provided services and can be re-united. The child and family can be Court-ordered to receive a number of services available through LCCS or other community agencies.

Cases are sent for criminal prosecution after the police investigation is completed and an allegation of child abuse or neglect is substantiated. Criminal charges are filed by law enforcement and prosecuted by the county prosecutor's office. Depending on the age of the perpetrator, the case is handled either in adult Common Pleas Court or in the Juvenile Court. In adult cases, the Lucas County prosecutor will present the case to the grand jury. If the grand jury elects to bring charges, an arraignment is held, pre-trial motions are filed, and a trial is held. The prosecutor has added staff and assigned the child abuse and neglect prosecutor to work in partnership with senior trial attorneys, who specialize in interviewing and preparing victims and witnesses for trial. SK/SS provided funding support for a victim-witness professional who assists the prosecutor.

There is also a mediation program that can be scheduled any time from pre-adjudication to post-disposition. This program has been successful and has a high settlement rate for cases referred for mediation. Successful mediation results in a legal settlement. The program is well supported by the courts, guardians ad litem (GALs) and LCCS.<sup>100</sup>

SK/SS was an important catalyst for court reform and permanency planning efforts. The Juvenile Court worked diligently to meet Federal requirements for permanency planning, including shorter gaps between proceedings and increased use of mediation. Delinquency and dependency magistrates were cross-trained, and intake staff increased. A new permanency planning protocol outlining reforms in the process was implemented. Attorneys are

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<sup>100</sup> Juvenile Division of the Lucas County Court of Common Pleas, *2001 Annual Report*.

## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

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now available for appointment to qualified individuals who are appearing for emergency shelter care (removal) hearings in child protection cases. In 2003 the court was designated as a model court by the National Council of Juvenile and Family Court Judges. It is one of only 25 model courts in the country.

Court reform and permanency planning efforts dovetailed nicely with the new Drug Court implemented in Toledo, a collaborative effort between the courts, LCCS, and substance abuse treatment providers. The Drug Court is designed to handle cases of drug addicted parents in a sensitive and effective manner. Drug Court gives them the option of treatment and direct contact with the judge instead of jail time.

### ***Multidisciplinary Team (MDT)***

The Lucas County MDT was initiated in 1994 by the Lucas County Child Abuse Task Force (CATF) to review cases of serious child physical abuse and sexual abuse, in order to promote a team approach and plan multidisciplinary interventions.<sup>101</sup> The group meets weekly to review existing cases and new referrals and to coordinate interventions. The MDT is involved in the investigation of all sexual abuse and serious physical abuse cases. The team decides which cases should be prosecuted and provides input into the mental health and other social service needs of the child and family. The team also makes decisions on the need for forensic evaluation or other investigation. The MDT includes representatives from law enforcement, medicine, mental health, criminal and juvenile justice, and victim advocacy programs; LCCS; and other service providers who can contribute information on specific cases. Meetings are co-facilitated by a CAC staff member and LCCS.

### ***Court-Appointed Special Advocate (CASA)***

The court-appointed special advocate (CASA) and GAL program was implemented in Lucas County in 1980. It was the third such program in the Nation and the first in Ohio. Volunteers who are sworn officers of the court provide legal advocacy to abused and neglected children in the juvenile court system to help them find safe and permanent homes. The program includes a program director, a staff attorney/case manager, a part-time recruitment/training coordinator, and over 150 volunteers.

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<sup>101</sup> Draft Child Abuse Task Force Brochure, 2003.



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### ***Treatment System for Families Involved in Child Abuse and Neglect***

Lucas County offers a number of treatment programs for children and families involved in child abuse and neglect. LCCS staff often initiate services, although other agencies can refer or mandate services depending on how the case progresses through the court system. The major service agencies and programs are described below.

#### ***LCCS***

LCCS pays for a wide-range of services to child victims and families, including counseling, parenting education, day care, referrals for substance abuse treatment, and homemaker services. During the course of the SK/SS project, LCCS moved to providing more neighborhood-based services, including supervised visitation at the local family resource centers. In 2002, LCCS added several new services, including parent mentoring that focuses on peer mentors to help parents with substance abuse problems, substance abuse prevention for the children of substance abusers, and services for youth at risk of delinquency. LCCS also added domestic violence and substance abuse consultants who provide assessments and referrals.

#### ***Juvenile Court Services***

A new Lucas County Juvenile Justice Center opened in 2001. The new building houses the Juvenile Court and a 125-bed juvenile detention center. There are several courtrooms and office space for CASA, the victim-witness program, mediation, the county prosecutor, and public defender. The court has a Sexual Offender Treatment Program (SOT) for adjudicated youth. This program provides comprehensive services for youth and their families, directed at reducing recidivism. The program is well regarded in the community and has a high completion rate for referred youth. However, the SOT program is limited in that youth can only access its services after they have been adjudicated, and no followup services are provided. Approximately one-third of juvenile sex offenders with substantiated sexual offenses are never prosecuted and therefore do not have access to the SOT. The court does not have a similar program for nonadjudicated sex offenders or youth displaying other at-risk behaviors.

The Juvenile Court also implemented a new a Family Drug Court in 2000 whose primary goals are timely permanency for children in a safe environment and reducing the number of days that the children of substance-abusing parents are in temporary, out-of-home

## Lucas County Safe Kids/Safe Streets, Toledo, Ohio

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foster care.<sup>102</sup> Participants are referred to substance abuse treatment, educational services, mental health counseling, and parenting classes. Each participant's case treatment plan is reviewed during a pre-court "staffing" that includes representatives from all of the agencies involved in the treatment plan.

### ***Mental Health***

Many private mental health treatment services are available in Lucas County. Two of the biggest providers are Unison Behavioral Health and Harbor Behavioral Healthcare. These providers, as well as many others, were affected by Ohio's move to a managed care system of mental health benefits, which provides block grants to county mental health boards and allows them to prioritize benefits and set funding levels. The goal of this effort was, in part, to make funding decisions more reflective of local needs and priorities. In 1998, the Lucas County Mental Health Board, working with limited resources, decided to fully fund services only for adults with serious and persistent mental disorders and children with serious emotional disturbances. Lucas County Medicaid recipients presenting with any other problems receive a maximum of six counseling sessions each year. This has meant that many treatment services, like day treatment and parenting education, which were previously reimbursable under Medicaid, no longer receive funding. This policy change led to increasing concern about the ability of at-risk children and families to receive needed services.

Unfortunately, this policy precluded mental health funding for two of the Lucas County SK/SS project's original priorities—prevention-oriented services for young children and their families and aftercare for youth involved in juvenile sex offender treatment and their families. Working with area service providers and public agencies, the project tried to get the Mental Health Board to broaden the types of services eligible for reimbursement; however, their efforts were not successful.

Nonetheless, there were some positive developments. Mental health services for children affected by child abuse and neglect were significantly enhanced with the implementation of the Children's Trauma Practice Center (The Cullen Center) at Toledo Hospital, with funding from the Substance Abuse and Mental Health Services Administration (SAMHSA). The Cullen Center was established to provide mental health services to children

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<sup>102</sup> Juvenile Division of the Lucas County Court of Common Pleas, 2001, op. cit.

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who have experienced trauma, including child abuse. The center combines the treatment capabilities of Toledo Children's Hospital and the front-end delivery services of the CAC. Services include individual, group, and family counseling and advocacy.<sup>103</sup> The advent of the Cullen Center addressed the lack of accessible mental health services for families without insurance or other resources, and the center plans to provide assessment and treatment for court-referred juveniles with trauma issues. Staff believe this grant was awarded, in part, because of the breadth and scope of existing community collaboration that was supported and developed through SK/SS.

### ***Children's Advocacy Center***

The CAC opened in 1997 as a project of the CATF to provide child-friendly, comforting, support and crisis services to children and families who are coping with child sexual and physical abuse. The CAC started serving clients in March 1997; interagency protocols were signed in November 1997. The CAC provides a neutral, trauma-reducing place where child victims can be interviewed by LCCS, law enforcement, and other professionals who are conducting the child abuse investigations. There are facilities for multiple parties to observe and tape interviews.

Originally, the CAC was envisioned as a site where a number of staff would be co-located. The Child Abuse Investigation Unit of the Lucas County Sheriff's Office would station officers there alongside LCCS staff and the county prosecutor who handles child abuse and neglect cases. Changes in key personnel at LCCS and at the Prosecutor's Office altered this plan. Currently, neither agency houses personnel at the CAC, although the new director of LCCS is very supportive of the CAC. Instead, the CAC houses therapists who work with child victims and families and provide crisis intervention and referral services.

The CAC has always encouraged joint interviews (LCCS, law enforcement, and prosecution), with mixed results. A high profile child pornography incident in 2002 resulted in the Mayor, the chief of Toledo Police, and director of LCCS publicly endorsing a joint approach to child abuse and neglect. They stressed a more aggressive investigation of misdemeanor offenses, joint interviews at the CAC, and law enforcement notification to LCCS of all children who witness domestic violence. Officials from the CAC, LCCS, TPD, and the Prosecutor's

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<sup>103</sup> Information gathered from National Child Traumatic Stress Network website located at <http://www.nctsn.org/nccts>.

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Office committed to meeting quarterly to discuss coordination of services for child victims of sexual abuse, including increased utilization of the CAC. Efforts to more consistently engage the prosecutor in the MDT and encourage joint interviews include faxing the daily joint interview schedule to the Prosecutor's Office so that she can plan when to be present or when to participate in a teleconference with investigative staff immediately after an interview. Using transitional funding under grant 6, SK/SS plans a feasibility study on expanding and improving services of the CAC, including the option of relocating to a larger facility in order to operate a "one-stop shop" for prosecution, law enforcement, and LCCS.<sup>104</sup>

The CAC's staff had to work hard to educate staff at LCCS and in the Prosecutor's Office on the important role it can play in minimizing further pain to victims and their families. The CAC remains a central focus of the SK/SS project, and enhancements to the center, including the Children Who Witness Violence project, are discussed below in the implementation section of this case study.

### ***Prevention and Early Intervention System***

Lucas County also offers a number of prevention and early intervention services to children and families. The Lucas County Family Council, a collaborative network of social service agencies and community agency partners, administers Federal and state grants to fund early intervention services.<sup>105</sup> During 2000, there was a breakdown between the Family Council, the Department of Mental Retardation and Developmental Disabilities (MR/DD), and the Collaborative Network, the primary service provider for home visitation. Ultimately, the Family Council became the centralized intake and central data repository for all Early Start programs using temporary assistance to needy families (TANF) dollars to fund services.<sup>106</sup>

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<sup>104</sup> Toledo Children's Hospital and Family Child Abuse Prevention Center. (2003, June). *OJP application for sustainability funding*.

<sup>105</sup> The Family Council was established by Ohio state statute and has mandated participation by public agencies, such as the Juvenile Court, Head Start, and the Department of Human Services, as well as at least three individuals whose families receive services from council agencies. The council was designed to address the problems of children with multiple service needs, cutting across a variety of agencies. Toledo has opened up the Family Council to include private service providers.

<sup>106</sup> Early Start is the early intervention program in Lucas County and includes prevention, home visitation, and early intervention services. It is a compilation of the following programs: Right from the Start, Welcome Home, Early Start, Help Me Grow, and Building Healthy Families.

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SK/SS provides prevention and early intervention services through the FCAPC's Building Healthy Families (BHF) program discussed in the implementation section below.<sup>107</sup>

Lucas County also has a network of community-based organizations called Family Resource Centers that provide early intervention services. An example is the Nathan Hale Center, based in a predominantly African-American neighborhood in the county, which provides tutorial services, culturally competent counseling, information and referral, outreach services, a clothes closet, parenting support groups, and an employee assistance program. LCCS has greatly increased its use of these centers to provide neighborhood-based services.

### ***Public Education and Professional Training on Child Abuse and Neglect***

Lucas County offers both public education and professional training on child abuse and neglect. FCAPC runs a child abuse prevention program (CAPP) and a sexual abuse prevention project (SAPP). The CAPP, developed in 1999, provides education on child abuse and neglect recognition, seeking help, and safety skills and is geared toward preschool and early elementary school children. The SAPP, developed in 1983, teaches adults and children about problem-solving skills, ways to recognize inappropriate sexual behavior, and how to reporting abusive sexual behavior. Speakers also present to a variety of community groups and organization on topics related to family violence.

FCAPC also provides training for professionals involved in the child abuse field. The agency provides continuing professional education to social workers and counselors throughout the year. Topics have included child abuse, domestic violence, dating violence, elder abuse, and family-centered MDT approaches to providing social services. The SK/SS initiative has fostered more collaboration in training and education throughout the child welfare system. In 2001, the local CASA, in collaboration with SK/SS, sponsored a "Judges Series" of related workshops to increase community support for permanency planning and to provide training and education to professionals. The Judges Series is designed to provide education to court staff, attorneys, mental health and medical providers, CASA/GAL, citizen review board volunteers, child welfare workers, and the public on the special needs of children served by the child welfare and juvenile justice system.<sup>108</sup> Additionally, LCCS provides routine public education

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<sup>107</sup> The Building Healthy Families program at FCAPC was originally called Healthy Families Lucas County. It is part of the Early Start consortium of services, administered by the Family Council.

<sup>108</sup> Juvenile Division of the Lucas County Court of Common Pleas, 2001, op. cit.

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through the use of public service announcements, advertisements on billboards, and presentations at schools and other service agencies, clubs, and organizations.

### **Significant Factors in Project's History**

Many factors helped to set the stage for the SK/SS project and played a role in the development of the project. Several significant factors have already been mentioned. Another factor was the existence of the Comprehensive Strategies program.

This OJJDP-funded initiative predated SK/SS and provided a data-based planning framework that resulted in significant collaboration between the Juvenile Court, social services, and community-based agencies. Comprehensive Strategies provided Lucas County with \$50,000 plus technical and training assistance to develop a program that improves the juvenile justice system, provides first-time offenders with structured programs and services, and offers appropriate prevention methods to children, families, and communities. It was initially headed by the presiding judge of the Juvenile Court and included many key public agency leaders who were only tangentially involved in SK/SS at the beginning of the SK/SS project. While the original focus of Comprehensive Strategies was juvenile delinquency and violence among juvenile offenders, the two initiatives have worked together to achieve complementary goals. The SK/SS project was able to dovetail its efforts and focus on early intervention and child abuse and neglect. The Ohio Family and Children First Council has adopted the Comprehensive Strategies planning framework statewide under a new name, Partnerships for Success. It remains a data-driven comprehensive approach to building capacity at the county level to prevent and respond effectively to problem behaviors of juveniles while promoting positive youth development.

### **Introduction to the Project**

The FCAPC has been involved with child abuse prevention since 1974. It provides a range of programs that focus on domestic violence prevention and advocacy, child and sexual abuse prevention, early intervention, professional training, and community education. The agency has also coordinated a number of multidisciplinary workgroups, including the Lucas County CATF, the Lucas and Wood County Domestic Violence Task Forces, the Joint Hospital Team (Lucas County), the Lucas County Multidisciplinary Team, the Wood County Sexual Abuse Prevention Project, and the Collaborative Violence Against Women Act Team. FCAPC

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also provides supervision for the Building Healthy Families program and manages the CAC, which was under development at the time the SK/SS proposal was written.

FCAPC was founded through the efforts of Dr. Bernard Cullen, who developed an ad hoc committee to research available services for child abuse and neglect in Lucas County. An education body grew out of this committee. The first Board of Trustees meeting occurring in September 1974. This meeting led to the establishment of the Greater Toledo Area Center for the Prevention and Treatment of Child Abuse and Neglect. In 1977, the name changed to the Child Abuse Prevention Center, and in 1983 it became the Family and Child Abuse Prevention Center. The FCAPC is a United Way agency and receives the majority of its funding through United Way allocations. Other funding comes from local, state, and Federal grants. Program service fees contribute a small amount annually.

The CATF, which was to take the lead for FCAPC in implementing SK/SS, was made up of staff from various health and social service agencies that played leadership roles in Toledo's development of the Interagency Lucas County Plan of Cooperation and Protocols, a 1987 plan that defined the roles in the child abuse and neglect service continuum. The CATF also worked to establish the CAC. FCAPC provided management and staffing to the Task Force.

The next section of the report discusses the development of the SK/SS proposal and implementation timeline.

### **Development of the Safe Kids/Safe Streets Proposal**

A representative from Children's Hospital presented the OJP solicitation for SK/SS to the CATF. The Task Force authorized her to draft a proposal that would list FCAPC as the lead agency and Children's Hospital as the fiduciary agent. The proposal was pulled together very quickly, with input from nine other agencies, and was submitted to OJP in mid-August 1996.

### **The Project Vision**

The SK/SS program in Lucas County was designed originally as a service delivery program. Specifically, it was to fill gaps in the service delivery system by providing

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“individualized intensive child abuse prevention services to stressed families needing support to stop the escalation of behaviors leading to abuse.”<sup>109</sup> The program was designed to have a direct effect on up to 75 percent of the estimated 4,000 children and families referred to child protective services or the court system. In addition, the program targeted at-risk adolescent girls who become mothers each year. A separate pool of high-risk families with children was also targeted to receive preventive services over the course of the project.

Initially, the program focused most intently on expanding the Healthy Families America program, which had already been implemented in several sites in Lucas County. This focus was consistent with the goals of the lead agency, FCAPC, whose mission is:

“To provide high quality, innovative services through coordinated, community-based education, public awareness and direct intervention programs to prevent violence to children and families.”

Consistent with this vision, the Lucas County SK/SS program outlined goals and objectives that would improve services to families at risk of child maltreatment. The six primary goals outlined in the proposal were:

- Child abuse victims and their families will receive assessment and comprehensive support, service delivery, and advocacy at a child-friendly, non-stigmatizing location where all other agencies necessary to investigate, prosecute, and adjudicate a child sexual abuse case can coordinate their activities.
- Families who have participated in treatment and intervention will complete their therapy and be restored to a higher functioning level due to improved followup.
- Families will be identified and assessed for support needs at the earliest point and at-risk families will be referred for intensive long-term followup, enabling them to have the most chance of positive parenting, stress reduction, and high family functioning, thereby reducing the risk and ultimately the incidence of child abuse and neglect.
- Lucas County will improve its ability to document needs and improve services through use of uniform data collection and sharing data through common databases.
- Agencies in Lucas County involved in child abuse prevention and intervention will use appropriate outcome and process objectives in all

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<sup>109</sup> Lucas County Child Abuse Task Force. (1997). *Safe Kids/Safe Streets: Lucas County*.



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intervention/prevention programs to document program effectiveness and impact in reducing the incidence of child abuse and neglect, thereby presenting a compelling case for new and continued program funding.

- The broad community in Lucas County will have less tolerance for child abuse, will recognize child abuse and neglect and report it appropriately, and will recognize positive parenting techniques as reducing the risk for child abuse and neglect.

The project's long-term goals were to:

- Reduce the incidence of child abuse; and
- Improve the prevention and intervention services that enable families to use their strengths to restore positive family functioning.

The Lucas County program originally included only a tangential role for the juvenile justice system. No role was outlined for the adult Criminal Court. Juvenile Court was seen as a signatory to an "Interagency Agreement and Protocol" for the referral of child sexual abuse cases to the CAC. The project envisioned Juvenile Court officials working with mental health staff to provide assessment and followup services to youth involved in the court system and their families. In short, in the beginning, Juvenile Court officials were to be involved only to the extent that services were needed by court-involved youth and their families.

The SK/SS budget request included \$74,253 for a 6-month planning phase, and \$848,172 for the first 12 months of operation. Children's Medical Center of Northwest Ohio at the Toledo Hospital promised in-kind support for personnel costs related to the fiscal management of the grant.

### **Waiting for a Decision**

CATF members continued operating as normal while awaiting a decision from OJP on the SK/SS grant. They continued developing the CAC, which was primarily seen as a system reform effort, and implementing Healthy Families Lucas County, which was a prominent part of its services agenda. After 6 months with no word from OJP, Task Force staff assumed that the proposal would not be funded.

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### Notice of Grant Award and Post-Award Adjustments

OJP awarded the grant to the project in March 1997. However, OJP that outlined a series of concerns with the project's initial proposal. The gist of the feedback was that the site was not far enough along in its collaborative efforts to receive full funding. Specific issues outlined were as follows:

- The Criminal Court was not involved in the proposed efforts, as required;
- The system reform efforts were overly focused on child sexual abuse cases;
- The focus on child sexual abuse was one indication that the applicant is in an early stage of development with respect to cross-agency collaboration;
- There was evidence of excellent collaboration among the public agencies that are involved with abuse and neglect but little engagement of community-based organizations, consumers, and other non-traditional stakeholders; and
- The applicant's experience and plans for community prevention education were thin and sparsely detailed.

Also, the proposal reviewers had outlined a series of desirable enhancements to the grant application, including:

- Development of an ongoing outreach mechanism for involving underrepresented stakeholders, particularly within the multicultural community;
- Development of a more comprehensive resource directory;
- More description of the intended planning process and major activities. (How will the plans build on/fit within current and past community-wide planning processes?);
- Detailed description of plans to develop required products;
- Explanation of how the project would address multi-ethnic, multi-cultural, and gender-specific considerations for meeting needs of abused and at-risk children, adolescents, and their families; and
- Explanation of how the project would work with the national evaluator and evaluate project efforts.

A revised SK/SS proposal, timeline, and budget were submitted. The goals and objectives of this revised proposal were essentially the same as those listed for the planning

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phase in the original proposal, but were restated as goals for both planning and implementation. The only other change was to make the development of a management information system a long-term goal, rather than a short-term objective. The project agreed to develop a plan for data-sharing and uniform data collection necessary for and consistent with its local evaluation needs.

This revised proposal was accepted by OJP in June, 1997, however, the project was informed that they would only be awarded \$125,000 in seed funding.

### **Project Implementation**

This section discusses the implementation of the SK/SS project. The discussion is divided into seven sections:

- Overview of program implementation,
- Budget overview,
- Technical assistance,
- Staffing and management,
- Collaborative structure and process,
- Overview of the activities undertaken for the project, and
- Significant events and turning points.

### **Overview of The Implementation Phase**

The SK/SS program in Lucas County is unique in several ways. Primarily, the project was not required to have a discrete planning period or develop the formal implementation plan required of the other four SK/SS sites. Instead, the project was provided with limited funding (\$125,000 per year) to encourage the development of its collaboration and local prevention programs. However, the project did implement activities for all of the four SK/SS program elements. Table 6-3 below presents the program elements and major activities undertaken in Toledo.

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<b>SK/SS program element</b>	<b>Major activities</b>
System reform and accountability	Collaboration development
	Partnership with other collaboratives
	Strategic planning
	Multidisciplinary team (MDT)
	Children’s Advocacy Center (CAC)
	Training and professional development
	Cultural sensitivity and competency
	Client and community involvement in the collaborative
	Permanency planning
Continuum of services	Early identification and standard risk assessment of at-risk families
	Shared resources/central intake for Help Me Grow clients
	Neighborhood resource center-based services
Data collection and evaluation	Local evaluation
	Multisystem Case Analysis (MSCA) with agencies involved in child abuse and neglect system
	Consumer input tool for CAC
Prevention education and public information	SK/SS newsletter
	Public education campaign
	SK/SS web site

Appendix Table E-2 provides more detail about the individual activities that were undertaken by the SK/SS project and its partners as part of the initiative.

**Budget**

The program received five grants of \$125,000 from 1997 until 2003, and OJJDP was expected to award funds for a 6th transitional grant (\$125,000) to support sustainability efforts.<sup>110</sup> This grant will support key program efforts through September 2004. A growing emphasis on system reform activities is demonstrated by comparing budget allocations over three time periods, Grant 1 (planning and implementation), Grant 2 (early implementation) and Grant 5 (late implementation). Table 6-4 shows that the most dramatic shifts in funding allocations occurred between Grants 2 and 5. The project reduced funding for continuum of services by 61 percent and more than tripled its funding for system reform and accountability activities. Allocations for management and administrative staff, which received no SK/SS funding in the first year of the project, more than tripled.

<sup>110</sup> OJJDP offered transitional funds to the three SK/SS sites whose funding was ending in 2003. All three sites were to receive the same amount (\$125,000), although for Toledo, this amount equaled its previous award level.

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Lucas County SK/SS made a larger commitment to data collection and evaluation than Table 6-4 indicates, because of the grant budget years chosen for comparison across sites. In Toledo, the Grant 3 budget included a \$30,000 allocation for local evaluation that was spent over a 3-year period, at a rate of about \$10,000 per year. Because the funds were carried over, they do not appear in the Grant 5 budget. Also, some data collection and evaluation activities were funded from sources other than the SK/SS award. These sources included \$10,000 from the Bureau of Justice Statistics to support evaluation efforts during the Grant 2 period, plus substantial assistance through the SK/SS TA contract for a Multisystem Case Analysis (MSCA) to track case handling and outcomes across several agencies.

### Technical Assistance

OJP provided technical assistance and training to all of the SK/SS sites. Toledo had access to system reform training and technical assistance (SITTAP) consultants as well as a training and technical assistance (TTA) coordinator who helped the project identify TTA needs and appropriate providers and negotiate cost-sharing for TA.

In 1999, the SITTAP consultants provided invaluable guidance to the project and helped it affiliate with the existing Comprehensive Strategies initiative in Toledo. This maximized the connections between juvenile delinquency, child protective services, public safety, and child and family issues, and enabled the SK/SS project to focus its efforts on issues affecting children ages birth to 3 and their families. Joining the Comprehensive Strategies planning committee provided the SK/SS project and its parent agency a “seat at the decisionmaking policy table” along with LCCS, law enforcement, and the courts. The lead agency for SK/SS, FCAPC, also became an active participant in the Family Council.

The project also used TTA from national organizations. The National Center for State Courts provided on-site and off-site workshops to support permanency planning efforts and performance measurement in Juvenile Court. The American Prosecutors Research Institute's National Center for the Prosecution of Child Abuse provided training on forensic interviewing to support the MDT and the CAC, and the Child Welfare League of America continues to provide ongoing support for the MSCA.

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**Table 6-4. Comparison of Budget Allocations, Grants 1, 2 and 5: Percentage Distribution<sup>a</sup>**

Category	Year 1 4/1997-12/1998		Year 2 1/1999-12/1999		Year 5 1/2001-12/2003		Percent change: Year 2 compared to Year 5
	Amount budgeted	Percent	Amount budgeted	Percent	Amount budgeted	Percent	Percent
<b>Program Elements</b>							
System reform and accountability	\$12,750	10%	\$16,005	13%	\$58,479	47%	+ 265%
Continuum of services	95,180	76	85,351	68	33,582	27	- 61%
Data collection and evaluation <sup>b</sup>	6,200	5	6,000	5	0	0	—
Prevention education/public information <sup>c</sup>	0	0	0	0	6,710	5	—
<i>Subtotal: Program components</i>	<i>114,130</i>	<i>91</i>	<i>107,356</i>	<i>86</i>	<i>98,771</i>	<i>79</i>	<i>- 8%</i>
<b>Staffing and Administrative</b>							
Management and administrative staff	0	0	6,759	5	22,859	18	+ 238%
Administrative expenses	10,870	9	10,885	9	3,012	2	- 72%
<i>Subtotal: Staffing and administrative</i>	<i>10,870</i>	<i>9</i>	<i>17,644</i>	<i>14</i>	<i>25,871</i>	<i>21</i>	<i>+ 47%</i>
<b>Total</b>	<b>\$125,000</b>	<b>100%</b>	<b>\$125,000</b>	<b>100%</b>	<b>\$124,642</b>	<b>100%</b>	

<sup>a</sup> All figures are based on Westat analyses of the project budgets for Grants 1, 2 and 5.

<sup>b</sup> Figures do not include funding from other sources, including the Bureau of Justice Statistics (BJS) and the SK/SS training and technical assistance program. BJS provided a \$10,000 grant for an evaluation contract during the Grant 2 period. A second evaluation contract (approximately \$30,000) was supported by Grant 3, with funds carried over into succeeding grant periods. The Grant 5 budget does not include these carryover funds.

<sup>c</sup> In years 1 and 2, Prevention Education and Public Information efforts focused primarily on a citizen survey about child abuse attitudes, the first step in planning a subsequent media campaign. Funding for the survey came from BJS, not the SK/SS award.

Cluster conferences held twice a year for SK/SS project staff and stakeholders also served as a form of TTA. The project was able to share the knowledge and expertise of the other SK/SS sites, and hear from national experts on various topics. The April 2001 cluster conference held in Albuquerque, NM, and the October 2001 cluster conference in Washington, DC, had particular impact on the Toledo SK/SS project. Cultural competency presentations and exercises at the spring meeting served as the major catalyst for LCCS to actively recruit and

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engage parent participation on their agency board. A Parents Anonymous presentation at the fall cluster meeting helped reinforce the project's commitment to engaging citizens and consumers in the collaborative and provided a beginning framework for planning efforts.

### **Staffing and Management**

The relatively small management staff of SK/SS experienced several changes in leadership over the years. SK/SS activities were not negatively affected, however. Many former SK/SS staff (both management and direct service) remained involved with CATF and SK/SS efforts, working from their new positions outside of the parent agency. The staffing of the SK/SS project is detailed in Table 6-5.

SK/SS did not initially fund management staff and the position of project director was provided "in kind" by the FCAPC during the first year. A major change occurred during 1997 (Grant 2) when, for the first time, project funds were used to support the project director. The first project director left in June 1999, and was replaced by the director of the CAC. This transition was relatively smooth, as the CAC director had been involved with SK/SS and the CATF since its inception. The new project director was later promoted to associate director of FCAPC. A second major change in project leadership occurred in 2001 when the CEO of FCAPC retired. The SK/SS project director assumed many of the CEO's duties while still functioning as the SK/SS project director. In 2002, the agency hired a new CEO with significant experience in the domestic violence community. The SK/SS project director resigned shortly thereafter to take a position as the project director of the Cullen Center, the new mental health and trauma center for children. She remains active in the SK/SS project and the CATF. A new SK/SS project director was hired in 2002.

Aside from management staff, the project originally funded several BHF assessment and support workers, a BHF supervisor, a victim advocate, and supervisory, training and mental health treatment staff at the CAC. Most of these staff remained stable throughout the project, except for the BHF staff, whose roles and support from SK/SS changed significantly. From 1997 to 1999, the project funded a part-time BHF supervisor, who also served part time as the first SK/SS project director. Two other BHF staff were assessment and support workers (funded at 50% each), and were involved primarily in direct services. The project also helped

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**Table 6-5. Staffing for the Toledo Safe Kids/Safe Streets Project**

<b>Position<sup>a</sup></b>	<b>Percentage of salary covered by SK/SS</b>	<b>Year first funded by SK/SS project</b>	<b>Year current staff member hired</b>
Project director <sup>b</sup>	25%-50%	1997	2002
Building Healthy Families assessment trainer (TCH)	20%	2000	2000
Building Healthy Families assessment supervisor <sup>c</sup>	17%-25%	1997	2000
Building Healthy Families support worker (TCH)	50%	1997	Position funded outside of SK/SS starting in 2000
Building Healthy Families support worker	50%	1997	Position funded outside of SK/SS starting in 2000
Children’s Advocacy Center case manager	25%	1997	2003
Children’s Advocacy Center program supervisor	40%	2002	2003
Children’s Advocacy Center crisis counselor	40%	2002	2003

<sup>a</sup> All positions are at the parent agency, FCAPC, with the exception of two positions for which the employer is Toledo Children’s Hospital (indicated TCH). Because TCH administers the SK/SS grant, these two positions are not considered subcontracts.

<sup>b</sup> The CEO of FCAPC initially served as "in-kind" project director and received no SK/SS funds. Late in 1997, 25 percent of a "project coordinator’s" salary was funded. In 2000, this was increased to 50% and the title changed to project director.

<sup>c</sup> Initially, the project coordinator filled this position (with an additional 20% time funded). It became a separate position (funded 25% by SK/SS) with a new staff member in 2000.

fund (via subcontract) additional BHF workers in the neighborhood-based Family Resource Centers.

During 2000, SK/SS shifted its focus from funding direct services to funding supervisory, training, and collaboration coordination positions to support all of the BHF programs throughout the county. The SK/SS project stopped funding the assessment support workers, whose salaries were picked up by TANF and other state and Federal monies. SK/SS funds were redirected to funding a supervisor to oversee the Help Me Grow Supervisors Committee,<sup>111</sup> a new collaboration of several agencies that included all BHF and Early Start workers. Funds were also provided (partially via subcontract) to supplement an assessment supervisor and a mental health consultant. The mental health consultant also provides training

<sup>111</sup> This group was originally called the BHF Collaborative and at a later point, the Help Me Grow Contract Providers Committee.



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for direct service workers. SK/SS also provided funds to supplement a CAC program supervisor, intake coordinator, and case manager positions. This funding for the CAC helped supplement CAC services when other funds were lost.

Several subcontracts with partner agencies were awarded to meet program objectives. The subcontracts are outlined in Table 6-6. Initially, the project subcontracted for direct services in the BHF program, and it continued to subcontract for training and consultant services. Subcontracts were also awarded for evaluation activities. These activities were conducted in two phases, and thus two separate subcontracts were awarded. The project also supported a specialized victim advocate to assist the Prosecutor's Office with child abuse and neglect cases and to help LCCS and the TPD with training.

### **Project Governance and the Collaborative**

The CATF was designated as the collaborative for the SK/SS project. FCAPC provided management and staffing support to the Task Force. The Task Force had already played a key leadership role in Toledo by developing the Interagency Lucas County Plan of Cooperation and Protocols in 1987. This plan of cooperation defined the roles in the child abuse and neglect service continuum and roles in working to establish the CAC.

The Task Force included professionals representing a variety of public and private agencies that originally came together to address the growing problem of child sexual abuse. The Task Force expanded under SK/SS to address child abuse and neglect more broadly to include children who witness violence. The Task Force comprised primarily program directors and front-line staff. At various times, it included representatives from the Prosecutor's Office, law enforcement, hospitals, health departments, mental health providers, housing authority, Juvenile Court, juvenile probation department, family resource centers, YWCA, and CASA. As a result of SK/SS outreach efforts, several new groups joined, and other agencies became more active. These changes are discussed later in this section.

The CATF and SK/SS governance structure evolved throughout the project. In 1998, the Task Force developed three subcommittees (Advocacy, Prevention, and Research; Service Coordination; and Support and Treatment) to help achieve its mission of reducing child abuse and neglect. In 2000, the CATF reorganized, developed a new SK/SS steering committee, and changed the name of the Advocacy, Prevention, and Research Committee to the Evaluation

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**Table 6-6. Toledo Safe Kids/Safe Streets Subcontracts**

<b>Program</b>	<b>Agency</b>	<b>Year funding began</b>	<b>Year funding ended</b>
Evaluation <sup>a</sup>	University of Toledo (Dr. Carter Wilson) Lucas County Family Council	1999	2003
Evaluation/media consultant	University of Toledo (Dr. Jim Price)	1997	1999
Cross-agency training specialists	Lucas County Children’s Services Toledo Police Department	1997	2003
BHF mental health consultant and trainer	Harbor Behavioral Health	1997	2003
BHF support worker	Friendly Center Family Resource Center	1997	Position funded outside of SK/SS in 1999
BHF support worker	Nathan Hale Family Resource Center	1997	Position funded outside of SK/SS in 1999
Specialized victim advocate	Lucas County Prosecutor’s Office	1997	2003
<sup>a</sup> The MSCA effort was led by a Child Welfare League of America consultant paid through a separate subcontract with OJP.			

Committee. At this time, the Service Coordination Committee took the lead on the SK/SS project newsletter, a new effort in 2000. Among other projects, the Treatment and Support Committee explored gaps in mental health services for child abuse victims, their families, and offenders and submitted a report to the Mental Health Board that included professional recommendations on mental health service needs. In 2003, a new Education and Training Committee was formed, and it planned to develop a core curriculum and training manual for cross-training professionals on the CAC interagency protocol, forensic interviewing, and related issues.

While public agencies were active in SK/SS activities, management of the Task Force by a single agency, FCAPC, was not conducive to fostering lasting joint agency participation or ownership of issues. Thus, in 2000, the CATF decided that to foster shared “ownership” of the CATF collaborative, each year a different agency would provide leadership and facilitation. During 2001-02, LCCS and the Child Assessment Team of Mercy Hospital provided the leadership of the Task Force, and during 2002-03, Toledo Children’s Hospital provided the leadership.

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### ***Agency Involvement in the Collaborative***

The CATF worked consistently to expand its membership, especially around strengthening involvement of community-based organizations and expanding diversity. The Task Force now includes representatives from the Nathan Hale Family Center and the Open Door, both neighborhood-based Family Resource Centers. CATF also worked hard to engage “nontraditional” partners and recruited a faith-based organization. The Junior League was an important addition to the CATF during 2000. The League provided SK/SS with funding and volunteer staff to work with the CAPP, a school-based prevention education program, and also provided funds for a publication explaining changes at the Juvenile Court.

The Task Force had mixed success keeping the required partners consistently involved in the collaborative.<sup>112</sup> With the advent of SK/SS, the CATF made collaboration with other partnerships and initiatives throughout the county a priority. It integrated its efforts into Comprehensive Strategies and connected with the Community Prevention Partnership Coalition for Youth Enrichment. The Family Council, charged with implementing Comprehensive Strategies, saw SK/SS’s strategies as critical to accomplishing objectives related to child abuse and included SK/SS and FCAPC staff on various committees. High-level Lucas County government officials (e.g., the county prosecutor, the Juvenile Court judge, LCCS director) were not active participants in the CATF; although they did maintain some representation.

The CATF did not successfully connect with domestic violence initiatives. The existing domestic violence collaborative in Lucas County started to falter when it transitioned from the FCAPC to the Sheriff’s Department. It then moved to the Prosecutor’s Office and ultimately became defunct. Integrating with domestic violence efforts recently became a higher priority however, in part because of recent research and attention to children who witness violence and in part because both the latest SK/SS project director and the FCAPC's new CEO had significant expertise in domestic violence issues. To revive attention to domestic violence, a major kick-off conference featuring former attorney general Janet Reno was held in 2003. The SK/SS project director, along with several SK/SS partner agencies, presented on expanding and strengthening existing collaboratives. As of mid-2003, SK/SS was exploring expanding the

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<sup>112</sup> The OJP grant solicitation for SK/SS required the grantees to engage multiple systems as stakeholders (including justice, child welfare, family services, medical, mental health, and education).

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MSCA to include domestic violence cases and sponsoring training on the Greenbook Initiative.<sup>113</sup>

In addition, FCAPC recently won a Federal grant from the Centers for Disease Control and Prevention (CDC), administered by the Ohio Domestic Violence Network. This project aims to lay the groundwork for a coordinated community response to intimate partner domestic violence.

### ***Community Involvement in the Collaborative***

Toledo, like many of the other SK/SS sites, had difficulty engaging nontraditional stakeholders from the faith and business communities and parent or consumer representatives. FCAPC involved parents of child abuse victims and business representatives in their annual fundraising effort; however, maintaining their ongoing involvement in the CATF has been more challenging. Prior to SK/SS, two business representatives on the Task Force had joined as a result of personal connections with other members. However, they left the CATF, as did several other agency representatives, because the Task Force faltered in its focus and direction, and tangible results became less evident.

The Task Force began seriously examining the inclusion and participation of community residents and agency clients, with encouragement from OJP and the TTA providers and after exposure to relevant presentations at two SK/SS cluster conferences. After several months of discussion, and drafting a formal policy paper, in 2003 the CATF voted to incorporate citizens. CATF began by recruiting an adult survivor of childhood abuse to serve on the SK/SS steering committee. As of mid-2003, the Task Force was also developing an orientation packet and training materials for citizen participants, and it expected to approve nominations for three citizen participants in 2004. Additionally, the Family Council has a history of citizen and consumer involvement and asked the SK/SS project director to join the newly formed Parent Advocate and Leadership Training Committee. The goal of this committee is to develop a training curriculum for citizens and parents and to train professionals on the

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<sup>113</sup> The Greenbook Initiative is a collaboration among eight Federal offices within the Department of Justice (DOJ) and the Department of Health and Human Services (HHS), as well as the David and Lucille Packard Foundation and the Edna McConnell Clark Foundation. These agencies fund six communities to address the co-occurrence of child maltreatment and domestic violence in child welfare agencies, the courts, and domestic violence service programs.

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value of citizen involvement. Technical assistance is scheduled from Family Support America to assist in this process.

### **Sustainability of Collaboration Structure and Governance**

As already discussed, the CATF has more than a 20-year history in Toledo, with a history of success in strategic planning, developing a countywide plan of cooperation for child abuse and neglect, and implementing the CAC. However, when these goals were met, it became necessary to revisit the original goals and objectives in order to maintain participation and a meaningful focus. Thus, in 2003, with the aid of SK/SS TTA funds, the CATF brought in an outside facilitator and held a retreat focused on strengthening the Task Force and looking at its future direction and the sustainability of the SK/SS initiative. Ultimately, the Task Force decided to make the SK/SS steering committee the steering committee for the CATF.

As of June 2003, the Task Force was evaluating whether to incorporate as a formal subcommittee of the Lucas County Family Council. The Family Council has moved from United Way to the Office of the County Commissioner and now functions as a department of the county. The Family Council has a broad membership that includes all of the major public agency executive directors and leaders with the authority to act directly on system and policy changes and recommendations developed by CATF. At the same time, the Family Council has a history of active grassroots, parent, and consumer leadership. Incorporating into the Council would give the Task Force more direct access to agency executive directors and leaders, as well voting rights on the Council and a small budget for community awareness events.

### **Activities Implemented During the Safe Kids/Safe Streets Initiative**

The Lucas County SK/SS project was initially conceived of as a service delivery program to address the deficits in prevention of child abuse and neglect identified by OJP. Gradually, it broadened its vision as a result of contacts with OJP, the other SK/SS sites, and other local initiatives. The program maintained a service and training focus throughout most of 1999, focusing on the CAC and BHF program. In 2000, the project increased its involvement with the OJJDP-funded, Comprehensive Strategies for Serious, Violent and Chronic Juvenile Offenders, to further develop its collaboration and change the way the system responds to child abuse and neglect and juvenile delinquency. It also started working with the Juvenile Court on

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permanency planning. Starting in 2001 and continuing into 2003, data collection and evaluation became a high priority, as did strengthening and sustaining the collaboration. During 2002, the MSCA (described below) was a priority as were increasing consumer participation in the project and connecting to domestic violence efforts.

The following sections summarize the major efforts undertaken during the project. Activities fall under the four broad program elements of system reform and accountability, continuum of services, evaluation and data collection, and public education and prevention education. There were many project activities, and here we focus primarily on the highlights as well as activities conducted during the last full funding year of the project.<sup>114</sup> A detailed activity table can be found in Appendix Table E-2.

### **System Reform and Accountability**

The project focused on six system reform activities, described below.

#### ***Children’s Advocacy Center and Multidisciplinary Team***

The CAC was the centerpiece of system reform activities for the Lucas County SK/SS project. A major goal of the SK/SS project included updating the CAC protocol, developing strategies to increase awareness and utilization of the CAC, and ultimately, creating a “one-stop shopping” center where child abuse victims and their families can receive sensitive, coordinated, and culturally competent service delivery and advocacy. SK/SS was also committed to regularly evaluating CAC processes and effectiveness. The project implemented a client satisfaction survey and a survey of professionals who use the CAC; the local evaluator developed a database and a report format for the CAC. Over time, the SK/SS project increased financial support for staff positions at the CAC, expanding to include services for children who witness violence, parenting classes for men and women at an adult correctional center, and services for children experiencing trauma from a variety of sources- the latter in coordination with the Cullen Center, the SAMHSA-funded Children’s Trauma Practice Center. Additionally a support network was established for professionals who work with victims of abuse.

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<sup>114</sup> The last full funding year of the project covered January through December 2003.

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The CAC struggled with fluctuating numbers of referrals, clients served, and joint investigative interviews, as well as a lack of coordination between the MDT process and the CAC. Rates of joint investigative interviews have fluctuated from 40 percent to 75 percent of cases over time despite the public commitment and even mandate by key governmental leaders and agency directors to conduct all investigative interviews at the CAC.<sup>115</sup> Some of these changes represent fallout from significant organizational and personnel changes in key agencies such as LCCS and the Toledo Police. To address this problem, CAC staff engaged in intensive training sessions with LCCS staff, and LCCS started to track specific cases that require a 72-hour response time to ensure that caseworkers were following through with conducting joint interviews.<sup>116</sup>

Improving the MDT remained a shared goal of the SK/SS project and its partner agencies. The biggest frustration with the MDT was that not all case decisions were made at formal MDT meetings as planned. Results of key informant interviews conducted in fall of 2000 revealed significant conflict surrounding the MDT decisionmaking process and its actual outcomes.<sup>117</sup> Several respondents saw the lag time between the initial LCCS agency investigation to the actual presentation of the case at MDT as a serious barrier to consensual decisionmaking. In their view, the case decisions had already been made by the time that the case was brought to the MDT. Respondents fell into four groups: (1) those who reported that only the prosecutor made decisions; (2) those who reported that group decisions were made, but not unanimously; (3) those who reported that few decisions were ever made at the MDT and the MDT just “rubber stamped” decisions made prior to the meeting; and (4) those who reported that joint decisionmaking occurred with the benefit of input from all parties present.

In response to ongoing difficulties with the CAC and MDT, the SK/SS project sponsored key trainings. In 2003, the American Prosecutors Research Institute’s National Center for the Prosecution of Child Abuse conducted a 2-day forensic interview training which was well received by MDT members. In addition, in the same year, the Midwest Regional CAC conducted development training and identified critical issues for the Lucas County CAC and MDT. Several MDT members also attended a development training held by the Ohio Network

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<sup>115</sup> Percentages are based on statistics reported in Toledo SK/SS Progress Reports to OJP, 1998-2003.

<sup>116</sup> A primary objective of the SK/SS project is for LCCS to schedule at least 70 percent of its child sexual abuse cases that require a 72 hour response time at the CAC for investigative interviews.

<sup>117</sup> A full discussion of key informant interview results is found in Gragg, F., Cronin, R., Schultz, D., & Eisen, K. (2001). *Year 3 Status Report on the implementation of the Safe Kids/Safe Streets Program*. Rockville, MD: Westat.

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of CACs (ONCAC). These events reenergized MDT members and spurred monthly strategic planning sessions. Through these strategic planning sessions the MDT has more clearly defined its mission, goals, case presentation criteria, and operating procedures. Additional forensic interview training in the Childhood Trust Model (the model adopted by ONCAC) is scheduled for the Toledo Police. The MDT is considering implementing a small team of dedicated forensic interviewers at the CAC. A new supervisor at LCCS now co-facilitates the MDT, which has also provided positive leadership.

### ***Children Who Witness Violence Project***

The SK/SS project, along with the Ohio Attorney General, Toledo Children's Hospital, LCCS, the YWCA, Lucas County Sheriff's Office, and the TPD, was instrumental in the planning and collaboration involved with the Children Who Witness Violence project (CWWV), initiated in 2000. The project funds a crisis response service for children at the CAC. Along with the Open Door Family Resource Center, it sponsors a school-based outreach program that provides counseling to children who witness violence. In addition, Byrne Memorial grant funding allowed the implementation of Project Omega, which provides free, home-based, and group mental health services for children who witness violence. In 2003, SK/SS was able to secure start-up funds to provide in-home crisis counseling services to children living in homes where there is domestic violence.

### ***Court Reform/Permanency Planning***

SK/SS was an important catalyst for another significant system reform activity, the court reform and permanency planning efforts, led by the Juvenile Court Dependency Division and LCCS. Representatives from these agencies, along with the local defense bar, CASA, the Mental Health and Mental Retardation Board, and the Addictions Service Board formed the planning and implementation committee.

To kick off court reform efforts, the SK/SS project coordinator, a magistrate from the Juvenile Court Dependency Division, and an LCCS attorney attended a symposium at the National Center for State Courts, using SK/SS funds. The symposium focused on outcomes for victims of child abuse and neglect who are involved in the court system. The magistrate and the LCCS attorney subsequently visited two model court systems in Oregon and Virginia. The National Center for State and Local Courts conducted training in Toledo on performance



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measurement for the planning committee and other individuals. These activities were all sponsored by SK/SS. The judge of Juvenile Court and the executive director of LCCS maintained strong support for this effort and the committee still plans to develop a data collection and outcome measurement system within the court. SK/SS assisted in developing proposals, identifying measurable outcomes, seeking funding, and linking the initiative to other community efforts and coalitions. In addition, the local CASA, an SK/SS partner, sponsored a Judges Series of related workshops entitled Permanency for the Abused and Neglected Child in 2001 to increase community support for permanency planning and to provide professional training and education. The presenters included a judge who had developed a model court in another state, a child abuse survivor from the local community, a panel of local professionals, and a leading psychologist in the field. Over 1,000 people attended.

In 2003, a new permanency planning protocol outlining reforms in the process was implemented. The court realized legal representation was needed early in child protection cases and facilitated permanency for children. Attorneys are now available for appointment to qualified parties appearing for emergency shelter care (removal) hearings in child protection cases. Also in 2003, the Juvenile Court was designated as a model court by the National Council of Juvenile and Family Court Judges.

### ***Pediatric Sexual Assault Guidelines (PSAG)***

Due to its strong connection to the Toledo Hospital system, SK/SS and the FCAPC facilitated the development of pediatric sexual assault guidelines (PSAG) for medical personnel. The guidelines were finalized and distributed to six emergency medical centers in 2000, and extensive training was conducted. Also in the same year, the State Attorney General's Office announced a plan to start paying for child sexual assault medical exams as long as they met the American Academy of Pediatrics Guidelines. In 2001, the pediatric sexual assault exam guidelines were distributed to all local hospitals. SK/SS staff assisted in drafting a survey to assess hospital professionals' knowledge and understanding of the guidelines as well as to identify training needs. In addition, emergency medical centers agreed to report the number of pediatric sexual assault exams to the CAC. A separate questionnaire was developed to measure the need for training emergency medical center staff and assess whether the guidelines were actually put into practice. The survey was implemented in 2002, and the results were shared with the pediatric sexual assault exam guidelines committee as well as the CATF. The project has not been involved in any ongoing training or evaluation of the guidelines, however.

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### ***Training and Professional Development***

Training has been a large component of SK/SS. In collaboration with LCCS, efforts have focused on training professionals on the CAC protocol, the MDT process, child abuse and neglect identification, reporting, the importance of the multidisciplinary approach to child abuse and neglect, family violence, and its effects on children who witness violence. Agency-specific training was provided to the Toledo Police and the Family Resource Centers. Cross-disciplinary training is provided regularly on the PSAG. In addition to sponsoring training, SK/SS and other staff attended several trainings sponsored by the Midwest Regional CAC and the Ohio Department of Human Services, part of which focused on children who witness violence.

SK/SS also focused on cross-agency training for the SK/SS BHF program. As discussed earlier, the SK/SS project originally funded several BHF workers, later shifted to funding supervisory and training staff. A BHF Collaborative was developed and subsequently restructured in order to incorporate the Early Start home visiting program. The collaborative is now known as the Help Me Grow Supervisors Committee. Training and library resources are now shared among collaborating agencies, with partial funding by SK/SS. The project also developed a cross-agency training plan for social service professionals and the home visitation staff. In addition, all early intervention home visitation programs in Lucas County now use a standard curriculum, which equips participants to become the trainers for other staff within their own agencies. The curriculum includes the use of the Family Development Matrix System, a state-mandated assessment tool, used by all home visitation programs in Lucas County.

### ***Cultural Competency***

Overall, the Toledo SK/SS project was slow to address issues of cultural competency. In 2002, TTA providers assisted the lead agency, FCAPC, in conducting a cultural competency self-assessment as a first step toward addressing these issues. Additionally, LCCS instituted a series of six cultural diversity workshops and mandated all staff to attend.

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### Continuum of Services

#### ***Building Healthy Families (BHF)***

The SK/SS project focused on prevention and early intervention. The original plans called for filling gaps in service delivery. The program wanted to provide a “community-wide primary prevention program of individualized family assessment and intensive home visitation support services for at-risk families.” SK/SS's original vehicle for primary prevention and early intervention activity was the Healthy Families Lucas County (HFLC) program, which provided long-term services for at-risk families through home visitation and parental role modeling. During its initial period of operation, HFLC staff were trained in risk assessment and home visitation methodology and began to use common assessment tools, including the Home Observation Measurement of the Environment (HOME), the Denver Developmental Scale, and the Kempe Center Family Stress Checklist.

The SK/SS program reevaluated its use of the HFLC model and curriculum in 1999. The program had experienced significant growth, increasing the number of sites served from two to five, integrating Family Resource Centers into its services system, serving more families, and providing support for local staff to become Healthy Families America (HFA) trainers. The reevaluation of the HFA model ultimately concluded that it was too expensive, particularly because of strict criteria related to the number of home visits, maximum caseload for workers, and enrollment immediately after birth. These requirements could not be met with the monies allocated from SK/SS and other sources. In addition, HFLC experienced serious financial problems in 1999 that extended into 2000. These problems arose out of conflicts between the Family Council, the funding conduit for home visitation programs countywide, and the Collaborative Network, the primary provider of home visitation services countywide, which resulted in the loss of program funds for over 6 months. In 2000, the funds were released, and there was increased collaboration between the programs.

In 1999, the Toledo SK/SS project made major changes in its allocation of funds for direct services. The project ultimately developed the Building Healthy Families (BHF) program, a less intensive and less expensive model than the HFLC program. The SK/SS project also decided to fund collaborative, supervisory, and training positions for BHF countywide in lieu of funding direct service positions, and helped locate alternative and more permanent sources of funding for direct services. This BHF program was ultimately supplemented with

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funding made available through the TANF program and the Ohio Department of Health, both of which are also viewed as long-term sources of financial support. These programs have doubled their capacity to reach families because of funding through the Federal Early Start program.<sup>118</sup>

Shortly after SK/SS transitioned to the BHF program model, the Family Council developed the Help Me Grow plan. SK/SS worked closely with this new initiative and served on the information system committee. The Ohio Department of Health and the Ohio Department of Human Services mandated the close coordination of services and a centralized intake system. The Family Council added a coordinator to its staff who focused on centralizing the intake and client data from all programs in the collaborative in order to: provide countywide data on referrals, acceptance rate, and outcomes; allow for more efficient tracking of clients; and help clients access the continuum of services more effectively. All providers now use a best practice model for a common curriculum and a common assessment tool, the Family Development Matrix System. This tool includes indicators of functioning in 13 domains, such as social/emotional health, family relations, child safety, transportation, and shelter. It assesses both the strengths and unmet needs in these domains, rates the degree to which a family is meeting its needs, and identifies the areas where assistance is needed. The program has experienced high acceptance rates by clients and a low referral rate to LCCS.

### ***Other Direct Services***

Legislation in Ohio mandated the availability of a “Safe Haven for Newborns” by April 2001 and SK/SS participated in this new initiative from planning to implementation. The initiative, led by the Prosecutor’s Office, aims to prevent the loss of life of abandoned babies and is especially targeted to adolescent and young adult women. “Safe havens” are locations where parents can drop off unharmed newborn babies within 72 hours of delivery without facing criminal charges. After the infant is medically cleared, custody is given to LCCS for placement. The CAC is a major resource in this effort, providing crisis phone coverage, and the courts, hospital systems, and law enforcement are also involved. SK/SS staff worked on the community awareness campaign.

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<sup>118</sup> The early intervention programs in Lucas County had several different names. Early Start now refers to the early intervention programs in Lucas County and includes prevention, home visitation, and early intervention services. It is a compilation of several programs: Right from the Start, Welcome Home, Early Start, Help Me Grow and Building Healthy Families. The FCAPC still calls its individual program BHF.

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The Lucas County SK/SS program also wanted to create a follow-up support program for juveniles who had completed the sexual offender treatment program and their families. The program was never developed because funding constraints posed a significant barrier. The county's local Mental Health Board, which determines the priority of funding for state-supported mental health sources in Lucas County, decided to fully fund only programs for children with serious emotional disturbance and adults with severe and persistent mental illness. Other individuals needing counseling would only receive a maximum of six therapy sessions per calendar year, which was viewed as insufficient for juvenile offenders. The SK/SS project ultimately decided that it would be better to address the service needs of juvenile sex offenders through the Comprehensive Strategies initiative.

### **Data Collection and Evaluation**

The SK/SS project conducted a modified evaluation, implemented the MSCA, and collaborated on management information system (MIS) efforts. These activities are described below.

#### ***Safe Kids/Safe Streets Evaluation***

SK/SS significantly scaled back its local evaluation plan when the program received only seed funding for its grant application. The project initially decided to focus its local evaluation only on the potential impact of the planned community education/media campaign. The evaluation was to consist of two surveys—a telephone survey of adults in Lucas County to measure community perceptions of child abuse and a school-based survey of junior high youth to assess the incidence of child abuse and its relationship to high risk behaviors engaged in by youth. The original idea was to conduct a baseline and a follow-up version of each survey. However, the school-based survey did not receive approval from local education officials. The project did, however, secure funding from the Bureau of Justice Assistance to conduct the telephone survey of adults. The local evaluator worked with volunteers from the Toledo Junior League and later contracted with a survey research firm to conduct the assessment using random digit dialing. The survey assessed community knowledge about child abuse and neglect, including how to report suspected abuse. The survey found significant deficits in the knowledge of child abuse and neglect among respondents. An article based on the

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findings was published in the *Journal of Community Health*.<sup>119</sup> The follow-up survey of community attitudes was never conducted, however, because as described below, the planned mass media campaign was not implemented.

During 2001, SK/SS renewed local evaluation efforts through a subcontract with the Family Council director and a professor at the University of Toledo. The main purposes of the subcontract were to build the internal capacity of the SK/SS project and that of its collaborators for ongoing evaluation and to develop a structure that would create stakeholder ownership of evaluation efforts. The long-range plan was to phase out the external evaluators, leaving an internal evaluation team in place for ongoing evaluation efforts. The evaluators established a local evaluation committee made up of representatives from the CAC, the Prosecutor's Office, the Toledo Police Department, LCCS, Toledo Children's Hospital, FCAPC, and the SK/SS project director. They had originally expected the evaluation committee to participate in all aspects of the evaluation, including developing a logic model and identifying indicators and measures. In 2002, this approach was modified due to the complexity of the tasks, and a new committee structure was created, breaking the evaluation team into two committees, a policy committee and an evaluation committee.

The SK/SS evaluation effort addressed research questions related to the CAC, BHF, and system-level issues. The evaluation questions are outlined in Table 6-7.

The Evaluation Policy Committee took responsibility for reviewing and interpreting data findings and developing policy recommendations. Its members worked with administrators at the key agencies who are responsible for the investigation, prosecution, and treatment of child abuse and neglect and who are in a position to change the way the system responds. The Evaluation Committee became responsible for the ongoing data collection issues and worked diligently on streamlining the CAC data collection. It solicited input from LCCS, law enforcement, and the Prosecutor's Office to increase the accuracy and comparability of data elements across these key agencies. The evaluators also reviewed demographic data and outcome statistics that had been collected by the CAC since 1998 but not used effectively. They discovered numerous inconsistencies and changes in coding over time. The evaluators worked with these data to identify trends and measure the implementation of the multidisciplinary approach to child abuse and neglect. They progressed in designing and implementing strategies

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<sup>119</sup> Price, J.H., Islam, R., Gruhler, J., Dove, L., Knowles, J., & Stults, G. (2001). Public perceptions of child abuse and neglect in a midwestern urban community. *Journal of Community Health, 26(4)*, 271-284.

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**Table 6-7. Lucas County Safe Kids/Safe Streets Evaluation Questions<sup>a</sup>**

Children's Advocacy Center	<ul style="list-style-type: none"> <li>▪ Does receiving coordinated, sensitive, and culturally competent services result in a reduction of secondary emotional trauma and enhance protection of the victim-child and other potential victims?</li> <li>▪ Does a multi-system coordinated approach to working with sexually abused children result in an increase of convictions of the perpetrators?</li> <li>▪ Do the victims perceive that services are in fact “coordinated, sensitive, and culturally competent?” Is this also the perception of the persons involved in the case from the various systems/agencies?</li> </ul>
Building Healthy Families and Early Start	<ul style="list-style-type: none"> <li>▪ Are both the BHF and Early Start programs having an impact on reducing child abuse and neglect for those families participating in the programs?</li> <li>▪ Are the programs working well at coordinating services?</li> <li>▪ Are the programs reaching more families?</li> <li>▪ Is the level of interprogram collaboration increasing over time?</li> </ul>
Systems	<ul style="list-style-type: none"> <li>▪ Is the level of intersystem/agency collaboration increasing over time?</li> <li>▪ How has intersystem capacity increased?</li> <li>▪ How has capacity increased for shared data collection?</li> <li>▪ How has intersystem capacity increased in measuring outcomes?</li> </ul>
<p><sup>a</sup> Wilson, C., Folkes, P., &amp; Kontur, D. (2002, January). <i>Safe Kids/Safe Streets Toledo-Interim evaluation report.</i></p>	

to centralize data collection, storage, processing, and analysis at the CAC. Case disposition statistics are now forwarded to the CAC by LCCS, and the CAC is now able to report complete outcome statistics for clients. Evaluation results were also shared with the CATF.

The evaluators also revised and implemented a new client satisfaction survey and developed a survey for professionals who refer clients to the CAC. The team was especially excited by the findings from a focus group held with CAC clients, which were included in the first evaluation report.<sup>120</sup> The evaluation results showed that CAC clients were very satisfied with the services, followup, and their own treatment progress; however, they also mentioned a lack of effective communication and coordination between agencies.

### **Multisystem Case Analysis**

MSCA is a methodology for examining performance of the formal child protection system by tracking child abuse and neglect cases across agencies. The Child Welfare League of America (CWLA) developed the methodology for another project and introduced it to SK/SS sites at a cluster conference in 1999. More than half way through the initiative, OJP began to

<sup>120</sup> Wilson, C., Folkes, P., & Kontur, D. (2002, January). *Safe Kids/Safe Street Toledo-Interim evaluation report.*

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strongly urge the SK/SS project to initiate a MSCA, promising support for CWLA's involvement. Initially, the Lucas County SK/SS project did not seriously consider the idea, in part because they saw their evaluation efforts as sufficient and, more importantly, they could not envision funding data collection and analysis with their limited Federal funds. After many discussions and negotiations with OJP, additional support for CWLA consultation to the site was awarded. The CWLA consultant took on responsibilities for tasks that the local evaluator in other SK/SS sites generally performed (e.g., database construction and analysis) in addition to the usual orientation and technical assistance functions.

The SK/SS project, the CATF, and other key agencies involved in Comprehensive Strategies, including LCCS, the Juvenile Court, and the Family Council, began exploring the CWLA model for MSCA in 2001. Little formal data or information sharing occurred across Lucas County agencies involved in the investigation of child abuse and neglect cases. LCCS, local police departments, and the Common Pleas and Juvenile Courts all maintain separate databases, although all cases of suspected sexual abuse are forwarded to the personal assault unit at the TPD. Information commonly is shared only in reviews by the MDTs, and usually in the form of verbal reports. SK/SS and its partner agencies were hopeful that, along with the newly implemented Family Development Matrix, the MSCA effort would stimulate interest in a multi-agency database to support greater information sharing. The Family Council and a key judge in the Juvenile Court agreed to lead the effort. They thought the MSCA could evaluate the most recent countywide service coordination plan developed by the Family Council, although ultimately this did not happen.

The MSCA in Lucas County was structured to answer the following five research questions:

- Does the MDT team work?
- What are the system gaps?
- Do we have a true continuum of services in Lucas County?
- When interventions occur, are they timely and effective?
- Are offenders and families receiving treatment?

Cases for study were pulled from 2001, the first year that automated systems were thought to exist for all participating agencies. Data collection was completed in 2003, and at the time of



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writing this case study, data were being analyzed. In the future, the project is considering expanding the MSCA to include cases of domestic violence and children who witness violence.

The SK/SS project hopes that MSCA efforts will ultimately be integrated into the Family Council's countywide data and evaluation network. The goal of this evaluation network is to determine the effectiveness of services provided to children and families, including child victims of abuse, to specify data to be collected routinely, and to report findings to partner agencies and the community at large via a "community report card." The network will be enhanced by the experience of extracting and sharing data by partner agencies participating in the MSCA. SK/SS plans to use transitional sustainability funds to install a computer network server to facilitate data transfer.

### ***Management Information Systems***

Given its small budget, SK/SS in Toledo did not pursue an expansive MIS. However it was involved with the MIS efforts of partner agencies, participating in the development of a database on child abuse and neglect for emergency medical centers. Using funds from the Ohio Department of Health and Toledo Hospital, this project developed a comprehensive database for emergency medical centers, law enforcement, the courts, and social service providers. The database tracks the experiences of domestic violence, child abuse, and sexual abuse victims from the initial emergency room contact through the series of contacts with other agencies. Additionally, the database is able to identify children who may have witnessed violence.

MIS and data coordination efforts also focused on the BHF program. All families receiving services are now tracked, although intervention efforts still cannot be linked to changes in child abuse and neglect reporting. This MIS/data coordination effort is part of the implementation of the Family Development Matrix tool by all early intervention service providers in Lucas County. In 2002, SK/SS worked with a consultant from the Community Prevention Partnership to develop a database for Building Healthy Families so that BHF would be able to provide data for the communitywide database once it is fully operational. The community-wide database is developing a web-based data entry system.

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### **Prevention Education and Public Information**

A public education media campaign was envisioned early in the SK/SS project, building on the citizen survey of child abuse attitudes described earlier. SK/SS developed a public education campaign called SHOCK (Silence Hurts Our Community and Kids). Members of the Ad Club of Greater Toledo, who adopted SK/SS as their 1997-1998 pro bono project, developed the campaign. The campaign included public service announcements for radio and television, brochures, and billboards. No funding for the public education campaign was included in either of the first two SK/SS budgets, and SK/SS was never able to secure other funding for this program.

The project did develop a SK/SS brochure that was distributed throughout the county. The project, in collaboration with the CATF service coordination committee and the Toledo Hospital, also developed a SK/SS newsletter and distributed it approximately three times a year to over 500 individuals and agencies. The newsletter highlighted a different community coalition in every issue and provided updates on SK/SS project activities, including the national evaluation and other CATF activities. Toledo Hospital agreed to continue funding the printing costs for the newsletter after SK/SS funds are expended. Finally, the project also developed a web site for FCAPC that includes a section on SK/SS and links to partner agencies. FCAPC will support this web site after SK/SS funding ends and hopes to use the transitional OJP funds to add cross-agency training schedules and a list of best practices and curricula being used in training in 2004.

### **Implementation Timeline and Logic Model**

Table 6-8 provides a simplified project timeline for the implementation phase, focusing on highlights and major program initiatives. A comprehensive logic model for the Lucas County SK/SS program appears in Appendix Figure E-1. This diagram reflects the complex web of activities that evolved over the course of the project and their relationships to expected results. Results incorporate immediate outcomes (such as improvements in ability to recognize child abuse and neglect), intermediate outcomes (such as increased reporting of child abuse and neglect), and long-term impacts (such as reduced child victimization), along with the logical links among them.

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**Table 6-8. Timeline for Toledo Safe Kids/Safe Streets Project**

Date	Event
<b>1996</b>	
	Application submitted to OJJDP
<b>1997</b>	
January	Healthy Families Lucas County program started
February	CAC opened
March	Notified of selection for seed funding by OJJDP
May	OJJDP project orientation meeting, Washington, DC
June	Revised SK/SS proposal approved by OJJDP (\$125,000)
September	OJJDP Technology Conference, San Diego, CA
November	CAC interagency protocol signed
<b>1998</b>	
January	Project coordinator hired
March	OJJDP cluster meeting, Huntsville, AL
November	Visit by OJJDP director Shay Bilchik and OJJDP program manager
	OJJDP cluster meeting, Cincinnati, OH
<b>1999</b>	
April	OJJDP cluster meeting, Washington, DC
May	New project coordinator hired
November	OJJDP cluster meeting, Kansas City, MO
	Baseline assessment of public attitudes towards child abuse and neglect conducted
	SHOCK public education campaign developed
	Reductions in state mental health funds result in dropping plans to implement aftercare for youth involved in juvenile sex offender treatment and prevention-oriented services for young children and their families
	SK/SS project starts collaborating with OJJDP-funded Comprehensive Strategies initiative
	<i>Toledo Blade</i> newspaper publishes a negative article about Lucas County Prosecutor's Office, focusing on domestic violence prosecution, cases dismissals, lack of accountability for the citizen mediation, and the failure of treatment programs
	Pediatric sexual assault guidelines (PSAG) developed
	CAC starts using medical school interns as volunteers
	Breakdown between the Family Council and the Collaborative Network, result in the loss of program funds through Early Start expansion for over 6 months
<b>2000</b>	
May	TPD restructured, and detectives are relocated from LCCS to newly developed Personal Assault Unit
May	OJJDP cluster meeting, Burlington, VT
Summer	SK/SS, LCCS, and Juvenile Court attend National Center for State and Local Courts symposium, visit model courts, and begin court reform/permanency planning efforts
November	OJJDP cluster meeting, Washington, DC
	CATF starts rotating facilitation among member agencies
	Evaluation plan developed and local evaluator contracted
	Changed direct service approach from funding front-line workers (BHF) to supporting supervisory positions and BHF Collaborative. Direct line positions get funding through TANF

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**Table 6-8. Timeline for Toledo Safe Kids/Safe Streets Project (continued)**

Date	Event
<b>2000 (continued)</b>	
November (continued)	CATF expanded membership to include representatives from neighborhood-based Family Resource centers
	CATF reorganized subcommittees and added a SK/SS steering committee
	SK/SS becomes part of LCCS planning and implementation committee
	Toledo Hospital awarded a planning grant from Ohio Attorney General’s Office for children who witness violence programming
	Drug court established in Toledo
	PSAG finalized and distributed to six emergency medical centers
	Cross-agency training begins for all BHF and Early Start agencies
	LCCS starts to forward case disposition statistics to CAC, enabling more complete outcome statistics on CAC and MDT cases
	SK/SS participates in development of a medical center database on child abuse and neglect
	SK/SS newsletter developed
	Multidisciplinary approach to child abuse training conducted
	CAC expands services to provide art therapy, parenting classes at correctional center, and support groups for professionals
<b>2001</b>	
January	LCCS began reviewing all police reports related to domestic violence to see if child was present in home
February	Started planning for CWLA MSCA implementation – developed work plan with CWLA consultant
April	Statewide law enacted allowing birth parent to give up custody of newborn child without facing any legal consequences. CAC start planning for Safe Haven for Newborns initiative
	Collaborative network becomes central intake and coordinating site for Help Me Grow (includes BHF) to track number of families served
May	Client focus group at CAC conducted
	CAC client satisfaction survey conducted
	OJJDP cluster meeting, Albuquerque, NM
June	Evaluation committee formed
July	Started using Client Satisfaction Survey at CAC
June-December	CAC survey for professionals conducted and results analyzed
September	SAMHSA children’s trauma center grant received to establish Cullen Center
October	OJJDP cluster meeting, Washington, DC
November	Updated mission statement of CATF
December	Funding for crisis responder for Children Who Witness Violence program obtained
	Began participation in other collaboratives such as the Prevention Partnership and the Domestic Violence Task Force
	CATF broadened membership to include new agencies (Juvenile Court, domestic violence community, Family Council, etc.)
	FCAPC formally joined Family Council
	Developed survey for professionals who use the CAC
	Implemented common assessment tool (adapted from Family Development matrix) for all BHF/Help me Grow providers
	MDT added co-facilitator

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**Table 6-8. Timeline for Toledo Safe Kids/Safe Streets Project (continued)**

Date	Event
<b>2001 (continued)</b>	
December (continued)	“Judges Series” workshops held to increase support for permanency planning efforts
	Recruited faith-based organization to CATF
<b>2002</b>	
March	New project director hired
	National and local evaluation meeting, Washington, DC
	CATF completes strategic planning and developed work plan. Develop policy paper on consumer/citizen participation
May	OJJDP cluster meeting, Sault Ste. Marie, MI
July	MSCA workgroup formed
	High profile child pornography case in Toledo
August/September	LCCS met with Toledo police chief and Toledo Sexual Assault Unit; agreed to schedule joint interviews at CAC whenever possible
August	National Center for State Courts provided performance measurement training to Juvenile Court
December R	Forensic interview training conducted
	National Civic League conducted cultural competency assessment with FCAPC
	Family Council created data and evaluation network to bring public agencies together around data collection and community report cards
	LCCS disabled specialized sex abuse unit and began assigning cases according to geographical areas in the county
	MDT revised case criteria
	Drug court expansion grant received
	BHF database developed at FCAPC
	SK/SS web site developed
	CATF drafts policy statement on incorporating citizen participation
	Citizen recruited to serve on SK/SS steering committee
<b>2003</b>	
January	Regional CAC training held
March	OJJDP cluster meeting, Washington, DC
April	Juvenile Court designated model court by National Council of Juvenile and Family Court Judges
	MDT initiated strategic planning
May	CATF held a strategic planning retreat and started considering incorporating into Family Council
	CAC database installed
	New program supervisor for CAC hired
	SK/SS project notified of availability of \$125,000 sustainability funding
Spring	SK/SS participates in countywide domestic violence conference
June	Magistrates begin to appoint counsel from the bench at shelter care hearings
	MDT members attend Ohio CAC MDT training
	CASA training on prostitution held
	MSCA data collection begins

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### Results

From the previous discussion, it is evident that the SK/SS project carried out a multitude of activities in Lucas County, engaging a wide array of agencies and individuals. While many of these activities might deserve more intensive assessments of their own, the national evaluation looked at the SK/SS initiative from a broader perspective and drew conclusions about its overall results at each participating site. This section focuses on Toledo's successes in implementing specific activities, as well as some of the problems and failures. Specifically we address the following questions:

- In terms of structure and process, how faithful was SK/SS in Lucas County to OJP's vision for the SK/SS initiative?
- To what extent did the project produce system reform—that is, enduring changes in the statutes, policies, procedures, and routines that affect the prevention, intervention, and treatment of child abuse and neglect? What other enduring changes resulted?
- Is there evidence that the project has had longer term impacts on the incidence of child abuse and neglect?
- What factors facilitated project efforts and what were the obstacles?
- What is the future for the project?

We begin by discussing how project participants and other local observers viewed the accomplishments of the SK/SS and its prospects, drawing upon several sources of interview and survey materials. We then summarize our own perspectives for each of the key questions.

### Perspectives From Project Participants and Other Local Observers

Data to respond to these questions come from a variety of sources. This sections draw particularly from several sources of information about local perspectives on SK/SS, including:

- Interviews and observations made during the 6 years of the process evaluation. These interviews focused on project personnel and key partners in the effort and the collaborative. We also made limited observations of interactions among community partners and community participation.

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- Structured interviews with several “key informants,” conducted during the course of Fall 2000 and 2002 site visits. Key informants were defined as individuals who played key roles in the child protection system or were well-placed to observe its operations. They included project staff, the local evaluator, and senior personnel from a cross-section of public and private agencies that participated in the SK/SS project. We emphasize responses from the 2002 key informant interviews, which focused on accomplishments and outcomes.<sup>121</sup>
- Two mail surveys of individuals defined as stakeholders in the project in 2001 and 2003. These mail surveys targeted current or past members of the CATF or other committees that had had any project involvement in the previous 2 years. We emphasize findings from the most recent survey, which included questions on results and outcomes. In Lucas County, there were 31 respondents.<sup>122</sup>

### ***Satisfaction with Implementation***

By and large, SK/SS participants appeared very satisfied with both the collaborative process and its results so far. Nearly all key informants believed that the FCAPC had been the right choice to lead the project. They noted that the agency had experience in child abuse and neglect, and it was seen as a neutral party compared to the public agencies.

Respondents to the 2003 Stakeholder Survey awarded SK/SS high marks on several aspects of the implementation process. “Project leadership” was awarded an average rating of 4.3 on a 5-point scale (where 5 represented “extremely satisfied”), and two additional measures of leadership and communication, “communication between project staff and other SK/SS participants” and “communication and advance notice for meetings” were each rated 4.3 on average. Over half (63%) of the respondents in this survey, about the same proportion as in 2001, indicated that “the amount of resources available to SK/SS” was “about right.”

Although the typical Stakeholder was happy with the implementation process, the 2003 survey reveals a few areas of concern. Over half of the respondents (58%) reported there was “not enough community involvement,” and 41 percent indicated there was “not enough cultural diversity.” In both cases, these proportions represent increases over 2001 survey results. Almost half of the respondents (44%) indicated that there was “not enough guidance

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<sup>121</sup> Results of the 2000 Key Informant survey can be found in Gragg, Cronin, Schultz, & Eisen, 2001, op. cit.

<sup>122</sup> Lucas County was included in the 2001 and 2003 Stakeholder Survey, but not the survey conducted in the other four sites in 1998. A detailed summary of the 2003 survey methodology, response rates, and results for all sites can be found in Volume III of this report.

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and technical assistance from the Federal sponsors.” Thirty-seven percent, a significant increase from 19 percent in the 2001 survey, indicated that there was “not enough data available to guide decisions.” This may reflect dramatic increases in the stakeholders’ understanding and appreciation for data-based decisionmaking, especially since embarking on the MSCA process and the data evaluation network.

### ***Overall Outcomes and Accomplishment***

The 2002 Key Informant Survey asked respondents “What was the most important outcome of the SK/SS project?” Over half considered improved or increased collaboration between agencies as the most important outcome. Many of the comments focused specifically on outcomes related to the lead agency, while others commented more generally on collaboration between agencies that traditionally did not work together. For example respondents pointed out that:

- The lead agency, FCAPC, got a seat at the Family Council table with other public agency executives and decisionmakers and became an active participant.
- FCAPC was empowered to be part of the child protective services community and enhance systems change.
- Agencies are talking and working together. Service agencies that had nothing to do with child abuse and neglect or juvenile delinquency are now “playing in the same sandbox.”
- Multiple agencies across systems and private/community stakeholders are taking steps to try to change how they do business.

Key informants also credited improved collaboration with improving communication, citing improvements between specific agencies such as LCCS and the Toledo Police and the Prosecutor’s Office. In some instances, key informants reported changes within their own agency that flowed from improved collaborations between agencies, for example:

- Improved communication and expanded communication avenues within the agency; and
- Bringing more people into the SK/SS project from within the agency such as associate director, assessment supervisors, etc., some of whom were also able to attend SK/SS cluster meetings.



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Several key informants cited specific system reform activities as the most important outcome. These reforms included:

- The MSCA effort (N=6);
- Permanency planning in the court (N=4);
- The CAC (N=4); and
- The MDT's new efforts and direction (N=4).

Five respondents reported technical assistance and other local training as one of the most important outcomes, and two reported that SK/SS facilitated successful bids on other Federal grants.

The key informant views of accomplishments and outcomes are supported by the results of the 2002 Stakeholder Survey. The survey asked respondents to indicate the two most important accomplishments of the project from a list of 19 possibilities. Three items were selected most often:

- “Improving information-sharing and case tracking across agencies” (selected by 48%);
- “Improving communication/cooperation among those who deal with child abuse and neglect” (39%); and
- “Standardizing data collection across agencies” (30%).

### ***Improvement in Information and Data Availability***

Both key informants and stakeholders indicated that the SK/SS project had a positive effect on information availability and data. In the key informant interviews, we specifically asked whether the SK/SS project affected how much information is available. Respondent comments focused on increased awareness of the importance of data collection, identifying and tracking outcomes, and evaluation in general. Two respondents mentioned that data are more public, and two specifically mentioned the court’s efforts in making data collection a priority. The 2002 Stakeholder Survey asked related but slightly different questions, and results support the SK/SS project’s positive influence. Stakeholders were asked if SK/SS had any effect on:

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- “Improving information-sharing and case tracking across agencies?” A total of 41 percent of respondents checked 5 and 34 percent checked 4 on a 5-point scale (where 5 represented “a great deal”).
- “Standardizing data collection across agencies?” One-quarter of respondents checked 5 and 36 percent checked 4 on a 5-point scale (where 5 represented “a great deal”).
- “Increased the amount or quality of information available for making decisions?” Almost one-quarter (22%) checked 5, and 22 percent checked 4 on a 5-point scale (where 5 represented “a great deal”).

### **Organizational Changes**

Perhaps the strongest statements attributing significant changes to the SK/SS project come from the Stakeholder Survey. In response to whether SK/SS had “significantly affected operations within their own organization” over half of the respondents (54%) checked 4 or 5 on a 5-point scale (where 5 represented “a great deal”). In response to whether SK/SS “significantly impacted children and families served by their organization,” 75 percent of respondents checked 4 or 5 on a 5-point scale.

### **Challenges and Surprises**

The Stakeholder Survey also shed some light on how participants viewed obstacles to the SK/SS project. When asked about eight specific challenges sometimes encountered by collaboratives, the majority of stakeholders rated three as currently significant, including:

- “Limited resources” (81%),
- “Turf issues/conflicting philosophies” (56%), and
- “Keeping up the momentum” (52%).

Significant minorities also flagged some other current challenges, including “understanding/meeting the expectations of funders” (48%) and “leadership and staff turnover in key agencies or groups” (44%). The majority thought most of the challenges on our list had been significant at some point in the collaborative's history, if not now. There was one striking exception, however, in that 65 percent of stakeholders indicated that “ineffective leadership” had *never* been a problem.

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When we asked the key informants about the most difficult aspects of collaboration, they highlighted a few other issues. Many stated that the collaborative got off track, languished, or did not have a meaningful focus at times. Conflict and resistance to citizen participation in the collaborative were also mentioned as very challenging. We also asked key informants which, if any, issues were the biggest surprises and if any activities were, in hindsight, not worth pursuing or “blind alleys.” The majority of key informants reported no surprises or blind alleys. The only comments received focused on surprises related to understanding the Federal partnership and process in the SK/SS initiative, such as confusion over the process for obtaining TA and the length of time it took to actually implement training.

### ***Future Expectations***

Lucas County SK/SS participants seemed fairly optimistic about the future. Key informants generally felt that the collaborative itself would be sustained, Sixty percent of the respondents to the Stakeholder Survey also saw the SK/SS collaborative as “likely to continue.” Seventy-five percent also “expected to be personally involved in SK/SS in the coming year,” a significant increase from 50 percent when we asked the question in 2001. (Note that all of these data were collected before OJP announced its intention to assist the transition to non-Federal support with a sixth funding award.

## **Overall Assessment of the Safe Kids/Safe Streets Initiative**

In this final section, we consider our key questions, in light of observations over more than 6 years, our review of the documentary evidence, and the survey and interview data cited above.

### **How Faithful Was the Lucas County Project to OJP’s Vision?**

On balance, the evidence suggests that the Lucas County SK/SS project was extremely faithful to OJP's vision. Through the project, the CATF reengineered its committee structure and established a working collaborative with members from diverse sectors of the community. It was able to engage nontraditional partners, including faith-based organizations, community-based organizations, and ultimately, a few citizens. Collaborative members developed a common vision and strategic plans. The collaborative also confronted sustainability issues and is currently considering formal changes in its affiliation in order to solidify its

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sustainability and influence on policy decisions. If the Task Force is sustained, and if it takes on even greater challenges—especially those related to agency resources, strategic plans, and data-based decisionmaking—it will have more than fulfilled OJP's vision.

The SK/SS collaborative fell short of OJP's vision of increasing cultural diversity within the collaborative. The collaborative was also unsuccessful in recruiting participation from the public mental health agencies.

### **To What Extent Did the Lucas County SK/SS Project Produce System Reform?**

The Lucas County SK/SS project made impressive progress on system reform, given its limited “seed” funding, and helped bring about many significant changes that are likely to endure. Perhaps the most dramatic change—affecting the entire spectrum of child abuse and neglect—is that collaboration has become the normal way of doing business for many agencies in the community. There have been other dynamics at work in the community; however, many stakeholders and other key informants believe that the SK/SS project deserves a large share of the credit for this shift toward collaboration. This is particularly important because, in our experience, once the collaboration process takes hold, it is hard to turn back—even though specific collaborations may come and go. This seems particularly true for the Lucas County community, where collaboration between agencies began on a limited basis with the Comprehensive Strategies initiative, and has spread beyond the SK/SS collaborative itself to many levels within private and public agencies.

A second significant and enduring system change is the Permanency Planning Protocol. The protocol is based on best practices that include reforms to coordinate services at the beginning of the permanency process and to collect data to evaluate progress. The implementation of the new protocol represents specific policy and practice changes at the court, in the approach to timely permanence for children under the court's jurisdiction.

Last, in close collaboration with the Family Council, the project successfully accessed blended funding (local, state, and Federal funds) to support early intervention services, standardized assessment, and statewide data collection through the Help Me Grow system. This is a major accomplishment that increases the resources available for the prevention and early intervention of child abuse and neglect in Lucas County.

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Although it was too early to judge the results of several other SK/SS activities when we completed our observations, the project played a substantial role in:

- Enhancing early intervention services, by creating a BHF coordinator position, central coordinating intake site, and coordinating training for all BHF/HMG workers;
- Establishing the CAC and interagency protocols;
- Enhancing medical center responses to child victims of sexual abuse through the development and distribution of the PSAG;
- Enhancing coordinated responses for child victims of sexual abuse and severe physical abuse by improving the MDT, and supporting forensic interviewing training and a memorandum of agreement for the joint investigation process;
- Enhancing treatment services for child victims and witnesses of abuse through the establishment of the Children’s Trauma Center (the Cullen Center) and the Children Who Witness Violence project;
- Improving the integration of responses to domestic violence and child witnesses of violence across LCCS, the police, and the provider community.
- Establishing an emergency medical center database and information sharing system for domestic violence, child abuse, and neglect cases;
- Developing multi-agency commitments to electronic case-tracking, information-sharing, and identifying the outcomes of services for children and families;
- Establishing sustainable electronic data collection and user-friendly data reports for the CAC and BHF programs;
- Getting commitments to obtain ongoing consumer and professional feedback via client and professional satisfaction surveys for the CAC;
- Improving information sharing about child abuse and neglect and other collaborative initiatives through the SK/SS newsletter and web site;
- Improving the visibility of child abuse and neglect issues and the influence of the CATF by affiliating with the Comprehensive Strategies Initiative and Family Council; and
- Supporting the Juvenile Court in becoming a model court, recognized by the National Council of Juvenile and Family Court Judges.

## **Is There Evidence That the Project Has Had Longer Term Impacts on the Incidence of Child Abuse and Neglect?**

Significant reductions in the incidence of child abuse and neglect were not expected over the life of the SK/SS project for several reasons. First, we assumed that it could take many years even for highly effective and appropriate system reforms and service improvements to significantly reduce child maltreatment. Second, we recognized that the rates of child abuse are influenced by economic conditions and other factors that are well beyond the control of SK/SS. Third, it seemed likely that in the shorter term SK/SS could actually increase referrals and reporting of child abuse and neglect, the best indicators we have of child maltreatment. This would occur if the project succeeded in improving public perceptions of the child protection system, raising awareness of child abuse, and encouraging more people to report suspected abuse. Such increases in reporting could mask the effects of any reductions in abuse brought about by other project efforts.

In fact, the overall number of child abuse investigations increased in Lucas County. LCCS reported a sharp increase in reports of suspected emotional child abuse. This rise is likely a result of a decision in 2002 to consider any incident report containing domestic violence as emotional maltreatment. The rise in reports could also be related to an increase in public awareness of child abuse and neglect. Public awareness campaigns in Toledo have encouraged calling LCCS for help in managing parenting problems before abuse takes place. Many cases of suspected child abuse are not substantiated; however, stressors and other issues in the household are identified during the course of the assessment and investigation. Families are referred to community supports, including the Help Me Grow program, for ongoing prevention home visits. Table 6-9 displays the number of investigations of child abuse and neglect by type. More detailed data depicting indicators of child welfare are presented in Appendix Table E-1.

Since the start of the SK/SS program, the number of reports of child sexual abuse has fluctuated without any clear trend. However, sexual abuse has declined as a proportion of all child abuse and neglect reports—reaching 17 percent in 2001 and 2002 (compared to 25% in 1996 and 21% in 1997). The number of substantiated victims of sexual abuse up through 2002 remained fairly constant.

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	1995	1996	1997	1998	1999	2000	2001	2002
Neglect	1,676	1,537	1,670	1,737	1,952	2,008	2,395	1,980
Physical abuse	1,321	1,164	1,115	1,119	1,139	1,322	1,522	1,341
Sexual abuse	1,001	881	738	725	777	831	784	796
Emotional maltreatment	13	13	23	22	36	39	41	572
Total investigations	4,011	3,595	3,546	3,603	3,904	4,200	4,742	4,689

<sup>a</sup> Accessed from Lucas County Children's Services web site: <http://commissioners.co.lucas.oh.us/LCCS/stats.asp>.

Table 6-10 presents the rates of overall reports and substantiations of child abuse and neglect.<sup>123</sup>

### What Factors Affected Project Success and Progress?

Several factors facilitated project efforts and appear significant in explaining the results of SK/SS in Toledo.

- Alliances and collaboration with other organizations.** The SK/SS project was able to tie its efforts into Comprehensive Strategies, an OJJDP effort, which was led by the Juvenile Court and adopted as a planning framework by the Family Council. The LCCS team included many of the key leaders who initially were only tangentially involved with the SK/SS effort (e.g., the presiding judge of the Juvenile Court, county prosecutor, LCCS director). By 1999, the collaboration between the two initiatives provided important linkages among frontline professionals, agency executive directors, and the juvenile justice system. The goals of SK/SS were integrated into the broader goals and objectives of the Comprehensive Strategies effort, and this provided a way for the project to work on changing the systems response to child abuse and neglect and juvenile delinquency. The two efforts shared many committee members and activities, and ultimately SK/SS, the CATF, and the FCAPC become a presence at the “decisionmakers table” where previously they had no input. Additionally, the project benefited from the vision of the chief Juvenile Court judge, who was an active member (and now serves as the current president) of the National Council of Juvenile and Family Court Judges, a center of leadership and visioning on juvenile justice and child welfare issues nationwide. Although it took some time to get all of the SK/SS stakeholders to buy into the system reform focus of the project and understand the Federal vision, there was already a basic understanding of system reform concepts, data-based decisionmaking, and the significance of OJP demonstrations due to the experience with Comprehensive Strategies in Lucas County.

<sup>123</sup> Recent child abuse statistics in this section are from Toledo Children's Hospital and Family Child Abuse Prevention Center, OJP Application for Sustainability Funding, June, 2003 and data obtained from Lucas County Children's Services web site <http://commissioners.co.lucas.oh.us/LCCS/stats.asp>.

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<b>Table 6-10. Child Abuse and Neglect Reports and Substantiations<sup>a</sup></b>		
<b>Indicator</b>	<b>Year</b>	<b>Rate per 1,000 children</b>
Reports of child abuse and neglect	1992	35.80
	1993	36.25
	1994	34.90
	1995	33.92
	1996	30.38
	1997	29.97
	1998	30.45
	1999	33.04
	2000	35.50
	2001	40.07
	2002	39.64
Substantiated victims	1992	22.74
	1993	23.22
	1994	21.12
	1995	18.78
	1996	18.62
	1997	18.02
	1998	17.85
	1999	19.14
	2000	20.15
	2001	22.16
	2002	23.53

<sup>a</sup> Data from Lucas County Children’s Services.

- **Strong lead agency.** Another significant factor in the development of the SK/SS project was the experience of the lead agency, FCAPC, in child abuse and neglect—with a track record of coordinating the CATF, developing the CAC, and supporting the MDT. Although the Task Force was primarily an informal collaborative without any formal authority, it successfully implemented child abuse and neglect protocols at member agencies throughout Lucas County. Staff turnover within the Task Force, the SK/SS project, and the CAC did not deter project activities but rather brought new energies and excitement to focus on system reform efforts, data coordination, the MSCA, and bringing domestic violence issues into the work.

There were some challenges for the project as well.

- **Limited funding.** Surprisingly, the restriction to “seed” funding had both positive and negative effects on the Lucas County SK/SS program. From a negative perspective, SK/SS was unable to fully fund the major programs outlined in its original proposal. Stakeholder expectations had to be adjusted accordingly. On the positive side, the Toledo SK/SS program was not required to go through a protracted planning process like that of the other sites. Toledo was able to move comparatively quickly into developing its prevention program.



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Also as a result of reduced funding (and good strategic planning on the part of the CATF), the SK/SS project successfully linked with Comprehensive Strategies, which leveraged of resources far beyond the \$125,000 annual awards. Reduced funding also required the program to target activities more toward system reform and to identify sustainability possibilities very early on.

- **Consistent support from key agency executives.** The project struggled to maintain consistent executive-level support from some of the major agencies, including the Prosecutor's Office and at varying times, from the Chief of Police. SK/SS is hopeful that results of the MSCA effort will quantitatively highlight key gaps in the system of response for child abuse and neglect and pressure agency executive directors to engage in ongoing collaborative efforts.
- **Lack of clarity about OJP expectations and technical assistance timetables.** At times the project seemed uncertain about what OJP expected and unclear how to interpret feedback received from OJP. The negotiations surrounding the MSCA represent the most striking example of this. In the end, the MSCA was embraced by the project and its stakeholders, in part because OJP funded a consultant to lead the effort.

The project was also unprepared for the time it took to get approval for technical assistance and to implement requested training. The delays affected the implementation of some activities and Stakeholder confidence in the SK/SS project. For example, the project waited nearly 2 years to implement forensic interview training, and this slowed any movement forward on MDT and CAC strategic planning. This may have influenced stakeholders in the 2003 Stakeholder Survey who reported that there was not enough guidance and technical assistance from the Federal sponsors.

### What Is the Future for Safe Kids/Safe Streets in Lucas County?

We are impressed by the determination of FCAPC and individual stakeholders, many of them long-term participants in the project, to continue SK/SS. Although some stakeholders expressed concern about losing momentum and felt the collaborative languished at points, the CATF, led by the SK/SS steering committee, has engaged in strategic planning at several points to revitalize its mission. One of the goals of the transitional funding grant is for the CATF to expand its impact on child abuse issues by exploring a formalized governance structure under the Family Council.<sup>124</sup> Affiliating with the Family Council should

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<sup>124</sup> Toledo Children's Hospital and Family Child Abuse Prevention Center. (2003, June). *OJP application for sustainability funding*.

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institutionalize the role of the CATF, as well as increase its influence across the spectrum of prevention, intervention, and treatment of child abuse and neglect.

Future goals for the project include:

- Strengthening relationships among community stakeholders and developing new partnerships to assist children and families;
- Completing the MSCA to determine how well the various systems are working together, identify gaps in services, and identify other areas for improvement;
- Developing a forensic interview protocol and assisting in ensuring that professionals conducting forensic interviews are adequately trained;
- Developing a core curriculum training manual for all professionals who work with child abuse victims;
- Engaging the CAC in strategic planning and developing a plan to strengthen its funding base and explore co-location of services;
- Improving integration of services for victims of child maltreatment and domestic violence;
- Increasing community awareness of child abuse;
- Developing mini-grants to neighborhood, grassroots, and cultural organizations, to help them develop educational materials and to host meaningful child abuse awareness events;
- Assisting organizations serving children and families in understanding the value of partnering with parents as they work to improve programs and services;
- Educating community professionals on ways to more effectively provide culturally competent services;
- Strengthening the CATF in its work to sustain SK/SS goals and objectives; and
- Assisting the CATF in setting up a structure that promotes productive, mission-focused activities.

The project made significant strides in securing long term funding for services such as BHF. In addition, it has also secured funding for other services, such as the Children Who Witness Violence Project, the Children's Trauma Center, and CAC therapists. However,

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SK/SS has yet to secure these services long-term or develop blended funding for them. We are optimistic that plans to use OJP transitional funds to conduct a CAC co-location feasibility study and develop a business plan for ongoing funding, including pooled or blended funding, will lead to sustained support for the CAC.

## **APPENDIX E**

### **Overview of Implementation Activities and Logic Model**

Reports of child abuse and neglect (per 1,000 children) <sup>a</sup>	
1992	35.80
1993	36.25
1994	34.90
1995	33.92
1996	30.38
1997	29.97
1998	30.45
1999	33.04
2000	35.50
2001	40.07
2002	37.11
Substantiated victims (per 1,000 children) <sup>a</sup>	
1992	22.74
1993	23.22
1994	21.12
1995	18.78
1996	18.62
1997	18.02
1998	17.85
1999	19.14
2000	20.15
2001	22.16
2002	23.53
Not indicated/Not substantiated (per 1,000 children) <sup>a</sup>	
1992	36.32
1993	36.24
1994	29.52
1995	35.13
1996	31.31
1997	30.3
1998	29.35
1999	32.9
2000	35.4
2001	42.63
2002	40.35
Child protective services custody <sup>a</sup>	
1992	1,540
1993	1,434
1994	1,403
1995	1,520
1996	1,570
1997	1,420
1998	1,456
1999	1,430
2000	1,305
2001	1,346
2002	1,442

## Appendix E.

Out-of-home placements (actual number of children) <sup>a</sup>	
1992	567
1993	595
1994	673
1995	804
1996	778
1997	720
1998	803
1999	691
2000	650
2001	763
2002	782
Length of time in custody (number of days) <sup>a</sup>	
1992	559
1993	602
1994	568
1995	552
1996	534
1997	553
1998	538
1999	522
2000	571
2001	537
2002	505
Juvenile violent crime court referral rate ages 10-17 (actual number of referrals) <sup>b</sup>	
1992	176
1993	184
1994	157
1995	165
1996	195
1997	164
1998	100
1999	74
2000	69
2001	83
2002	107
<sup>a</sup> Data from Lucas County Children's Services.	
<sup>b</sup> Data from Lucas County Juvenile Court.	

Teen pregnancy rate per 1,000 females 15-19 <sup>c</sup>	
1994	*
1995	*
1996	36
1997	36
1998	31
1999	29
2000	28
2001	*
2002	*
Infant (Less than 1 year old) death rate per 1,000 <sup>c</sup>	
1994	8.2
1995	8.7
1996	7.5
1997	6.2
1998	4.9
1999	10
2000	7.3
2001	8.1
<sup>c</sup> Data from KidsCount County-City-Community Level Information on Kids.	

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003<sup>a</sup>**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability</b>					
Collaboration Development	Developed partnership with Comprehensive Strategies Initiative.	FCAPC, SK/SS, Family Council	Lucas County	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Supported Family Council-adopted Comprehensive Strategies Planning framework.</li> <li>▪ Augmented efforts of Comp Strategies instead of working at dual purposes.</li> <li>▪ Served on Planning and Policy Committee.</li> </ul>
	Strengthened CATF.	FCAPC, SK/SS	Lucas County	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Held a CATF retreat.</li> <li>▪ Developed CATF logo.</li> <li>▪ Updated CATF mission and vision.</li> <li>▪ Developed CATF orientation materials.</li> <li>▪ Developed strategies to increase political strength of CATF.</li> <li>▪ Recruited new collaboration members.</li> <li>▪ Developed SK/SS steering committee.</li> </ul>
	Provided outreach on SK/SS to other collaboratives.	FCAPC, SK/SS	Lucas County	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Presented SK/SS and CATF to other community coalitions.</li> <li>▪ Provided descriptions of other collaborations regularly in SK/SS newsletter.</li> </ul>
	Broadened membership of CATF.	FCAPC, SK/SS	Lucas County	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Recruited CATF representatives from Juvenile Court, sex offender treatment network, domestic violence community, Lucas County Family Council, Family Resource Centers, etc.</li> </ul>
	Increased SK/SS visibility and influence with public agencies.	FCAPC, SK/SS, Family Council	Lucas County	2000	<ul style="list-style-type: none"> <li>▪ SK/SS lead agency became a member of Family Council giving them a seat at the same table as major public agency executives.</li> </ul>
	Supported other collaborative efforts.	FCAPC, SK/SS	Lucas County	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Participated in the following collaborative initiatives:  <ul style="list-style-type: none"> <li>Corporation for Effective Government,</li> <li>Community Prevention Partnership-</li> <li>Coalition for Youth Enrichment,</li> <li>Domestic Violence Task Force.</li> </ul> </li> </ul>



**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Client and Community Input and Participation in the Collaboration	Engaged community representative in lead agency, Family Council, and SK/SS projects.	FCAPC, SK/SS, Family Council, Juvenile Court, LCCS	Lucas County	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Recruited community representative to serve on lead agency Board of Directors.</li> <li>▪ Elected parent representative vice chair of Family Council.</li> <li>▪ Recruited CAN system survivor to serve on Family Court’s permanency planning committee.</li> <li>▪ Recruited CAN survivor to serve on SK/SS steering committee.</li> <li>▪ Developed policy statement on consumer and parent membership in the CATF.</li> <li>▪ Engaged parent leader institute and parent representative in CATF.</li> <li>▪ Participated in Parent Advocate and Leadership Training Committee run by Family Council.</li> </ul>
	Collected feedback from clients of child abuse and neglect (CAN) system.	SK/SS	Lucas County	2000-2003	<ul style="list-style-type: none"> <li>▪ Conducted focus groups with clients of CAN system.</li> <li>▪ Institutionalized client satisfaction survey at CAC.</li> </ul>
Strategic Planning	Participated in strategic planning with other agencies involved in CAN system.	SK/SS, FCAPC	Lucas County	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Collaborated with Comprehensive Strategies and Family Council strategic planning efforts.</li> <li>▪ Initiated strategic planning with CATF.</li> <li>▪ Explored linking CATF efforts to domestic violence efforts.</li> <li>▪ Planned a feasibility study to expand and improve services of the CAC, including the option of relocating to a larger facility to operate a “one-stop shop” for prosecution, law enforcement, and LCCS.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
MDT	Restructured and strengthened MDT.	SK/SS, LCCS	Lucas County	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Added co-facilitator to MDT.</li> <li>▪ Revised case criteria for MDT.</li> <li>▪ Developed working group to examine MDT functioning, effectiveness, evaluation, etc.</li> <li>▪ Received consultation from Midwest Regional CAC.</li> </ul>
	Improved investigation and prosecution of child abuse and neglect.	SK/SS, LCCS, TPD	Lucas County	1997-ongoing	<ul style="list-style-type: none"> <li>▪ Collaborated with personal assault unit at Toledo Police and LCCS to enhance intake and investigation of child sexual abuse.</li> <li>▪ Offered on-site forensic interview training for MDT members and other CAN professionals.</li> <li>▪ MDT members attended the Midwest Regional CAC training on the multidisciplinary approach to child abuse and neglect, including interviewing techniques for child victims and alleged perpetrators and children who witness violence.</li> <li>▪ Midwest Regional CAC provided on-site MDT training.</li> <li>▪ MDT members attended Ohio Network of Children’s Advocacy Centers (ONCAC).</li> </ul>
Program/Service Coordination	Promoted interdisciplinary and interagency coordination.	SK/SS, FCAPC	Lucas County	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Implemented BHF Collaborative.</li> <li>▪ Shared program resources with all BHF programs.</li> <li>▪ Reviewed protocols and interagency agreements for CAC.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Resource Development	Accessed a diversity of funds to help pay for services.	FCAPC	Lucas County	1999-ongoing	<ul style="list-style-type: none"> <li>▪ Accessed Early Start Expansion funds and TANF to pay for services.</li> <li>▪ Obtained funds (Jamie Farr/Kroger Classic) for the CAC.</li> <li>▪ Used student interns from a variety of schools to provide support and advocacy services at the CAC.</li> </ul>
Training and Professional Development	Provided consultation and training to multiple audiences on CAN and children and families at risk.	FCAPC, SK/SS, LCCS, CASA	Lucas County	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Collaborated with LCCS to provide training about the MDT approach and interviewing techniques to LCCS workers.</li> <li>▪ Developed and implemented cross-agency training plan (core training curriculum) on CAN and domestic violence and shared educational resources for all Lucas County BHF/Early Start/Help Me Grow workers.</li> <li>▪ Trained MDT staff on children who witness violence.</li> <li>▪ Trained staff in TPD's personal assault unit in CAC and MDT protocols, agency missions, services, offices, and roles as they relate to child abuse investigation, treatment, and advocacy.</li> <li>▪ Trained Family Resource Center staff on CAC protocols.</li> <li>▪ Implemented training for PSAG.</li> <li>▪ Trained Red Cross staff in CAN.</li> <li>▪ Collaborated with Cullen Center to provide CAC staff with trauma and loss specialist training.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Training and Professional Development (cont.)	Supported training on legal aspects of CAN system and issues closely related to CAN.	Juvenile Court, Prosecutor’s Office, FCAPC, SK/SS	Lucas County	1998-2003	<ul style="list-style-type: none"> <li>▪ Collaborated with CASA in developing “Judges Series” workshops “Permanency for the Abused and Neglected Child” to increase support for permanency planning efforts.</li> <li>▪ Collaborated with CASA and other agencies to provide a community-wide training on prostitution and implications for families.</li> <li>▪ Supported and participated in American Prosecutors Research Institute’s National Center for Prosecution of Child Abuse conference.</li> <li>▪ Participated in Adolescent Sex Offenders conference.</li> <li>▪ Supported and participated in “model court” training at National Center for State and Local Courts.</li> <li>▪ Supported training on performance measurement for the Juvenile Court.</li> </ul>
Cultural Sensitivity/ Competency Efforts	Explored avenues to increase cultural diversity and cultural competency within SK/SS, FCAPC, and CATF activities.	FCAPC, SK/SS, National Civic League	Lucas County	2001-ongoing	<ul style="list-style-type: none"> <li>▪ Recruited new representatives from neighborhood-based Family Resource Centers for the CATF.</li> <li>▪ Recruited faith-based organization to CATF.</li> <li>▪ Conducted cultural assessment of FCAPC.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>System Reform and Accountability (continued)</b>					
Other System Reform Efforts	Played a significant role in other collaborative projects with system change objectives to enhance services and CAN system.	FCAPC, SK/SS, Toledo Children’s Hospital, Juvenile Court	Lucas County	1997-ongoing	<ul style="list-style-type: none"> <li>▪ Developed PSAG.</li> <li>▪ Explored developing exam/investigation guidelines for other forms of child abuse and domestic violence.</li> <li>▪ Collaborated with Toledo Children’s Hospital on implementing newly funded Cullen Center-Children’s Trauma Practice Center.</li> <li>▪ Collaborated with multiple agencies to implement Children Who Witness Violence Initiative.</li> <li>▪ Participated in designing Model Court PPP in Juvenile Court.</li> <li>▪ Supported efforts of alternative sentencing via the “Drug Court.”</li> </ul>
<b>Continuum of Services</b>					
Prevention and Early Intervention Activities	Provided CAN prevention and early intervention services to children.	FCAPC, SK/SS,	Lucas County	1997-ongoing	<ul style="list-style-type: none"> <li>▪ Developed BHF program.</li> <li>▪ Funded BHF supervisory position and staffed collaborative.</li> <li>▪ Provided central intake for BHF and Early Start.</li> <li>▪ Received funding to pilot Right From the Start program to expand BHF to include children ages 3-5.</li> <li>▪ Collaborated with Junior League on School-Based Prevention Program.</li> <li>▪ Participated with Prosecutor’s Office in “Safe Haven for Newborns” initiative.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Continuum of Services (continued)</b>					
Prevention and Early Intervention Activities (continued)					<ul style="list-style-type: none"> <li>▪ Received funding to implement Domestic Violence Prevention Enhancement Leadership Through Alliances (DELTA) project and initiated monthly domestic violence Brown Bag Series.</li> </ul>
Intervention and Treatment Activities	Provided intervention and treatment to victims of CAN and their families.	FCAPC, Prosecutor's Office	Lucas County	1997-ongoing	<ul style="list-style-type: none"> <li>▪ Expanded treatment at CAC to include art therapy, support groups in correctional facilities, etc.</li> <li>▪ Expanded services to children who witness violence.</li> <li>▪ Collaborated with Cullen Center to expand mental health treatment for child victims of CAN.</li> <li>▪ Provided funding for Victim Assistance Advocate to provide court support.</li> </ul>
<b>Data Collection and Evaluation</b>					
Local Monitoring and Evaluation	Designed and implemented a local evaluation.	SK/SS	Lucas County	1999-2003	<ul style="list-style-type: none"> <li>▪ Conducted baseline data assessment of public attitudes on CAN.</li> <li>▪ Developed, implemented, and analyzed customer satisfaction tool to measure consumer input on their experiences with the CAC.</li> <li>▪ Conducted focus group with CAC clients.</li> <li>▪ Developed outcome statistics report for CAC.</li> <li>▪ Streamlined CAC data collection process and common data definitions.</li> <li>▪ Developed and implemented survey for professionals who utilize CAC.</li> </ul>
	Supported other evaluation efforts.	SK/SS, CATF	Lucas County	1999-2001	<ul style="list-style-type: none"> <li>▪ Drafted survey to assess knowledge and training needs for PSAG.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Data Collection and Evaluation (continued)</b>					
MSCA	Implemented MSCA for CAN cases.	SK/SS, Juvenile Court, LCCS, TPD, Prosecutor's Office	Lucas County	2002-ongoing	<ul style="list-style-type: none"> <li>▪ Designed and implemented MSCA data collection and preliminary analysis.</li> <li>▪ Developed structure to review and utilize data to enhance system reform by presenting evaluation data to local agency administrators.</li> </ul>
MIS Development and Information Sharing	Supported development of MIS and information sharing systems with other agencies.	SK/SS, FCAPC, Family Council	Lucas County	1997-ongoing	<ul style="list-style-type: none"> <li>▪ Participated in development of emergency medical center database and information sharing system for domestic violence, CAN, and sexual assault cases.</li> <li>▪ Implemented common assessment tool for all BHF and Early Start workers adopted from Family Development Matrix system.</li> <li>▪ Developed database for prevention and early intervention data to enhance data sharing.</li> <li>▪ Began tracking BHF/Early Start/Help Me Grow clients.</li> <li>▪ Supported development of Data Evaluation Network.</li> </ul>
<b>Prevention Education/Public Information</b>					
	Developed communication and outreach methods for SK/SS and CAN awareness.	SK/SS, CATF	Lucas County	2000-ongoing	<ul style="list-style-type: none"> <li>▪ Published SK/SS newsletter.</li> <li>▪ Published and distributed SK/SS brochure.</li> <li>▪ Developed SK/SS web site.</li> </ul>

**Table E-2. Overview of Implementation Activities for Lucas County Safe Kids/Safe Streets: 1997 – 2003 (continued)**

Activity Category	Activity	Lead Agency/Team	Primary Target Population	Duration	Status and Accomplishments
<b>Prevention Education/Public Information (continued)</b>					
	Developed public awareness campaign.	SK/SS, CATF	Lucas County	1998-ongoing	<ul style="list-style-type: none"> <li>▪ Developed materials for SHOCK public awareness campaign including information cards on how to report CAN.</li> <li>▪ Planning implementation of a public awareness campaign on CAN.</li> <li>▪ Published article on children who witness violence and are developing poster.</li> </ul>
	Provided CAN education and awareness to multiple audiences.	SK/SS, FCAPC	Lucas County	1997-ongoing	<ul style="list-style-type: none"> <li>▪ Provided education on CAN in schools via the CAPP.</li> <li>▪ Collaborated with Toledo repertoire theatre to teach personal safety to children.</li> <li>▪ Provided education on CAN to agencies, community groups, correctional facilities, medical professionals, parent groups, community fairs, and local businesses.</li> <li>▪ Participated in domestic violence conference sponsored by the University of Toledo.</li> </ul>
<p><sup>a</sup> Note that many activities and accomplishments cut across more than one category. We chose a "primary" category for them rather than repeat the information in several places.</p>					



**Figure B-1. Logic Model for Toledo Safe Kids/Safe Streets Program: Implementation Phase**

