

House District \_\_\_\_\_

Senate District \_\_\_\_\_

THE TWENTY-SIXTH LEGISLATURE  
HAWAII STATE LEGISLATURE  
APPLICATION FOR GRANTS & SUBSIDIES  
CHAPTER 42F, HAWAII REVISED STATUTES

Log No: 11-0

For Legislature's Use Only

REC'D JAN 28 2011

Type of Grant or Subsidy Request:

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

SUBSIDY REQUEST

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Subsidy" means an award of state funds by the legislature, by an appropriation to a recipient specified in the appropriation, to reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

"Recipient" means any organization or person receiving a grant or subsidy.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN):

THE JUDICIARY

STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN): \_\_\_\_\_

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:

Child and Family Service

Dbas:

Child and Family Service

Street Address:

91-1841 Fort Weaver Road, Ewa Beach, HI 96706

Mailing Address:

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2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name ANGIE DOI

Title Director of Program Services

Phone # 681-1494

Fax # 681-5280

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3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION
- FOR PROFIT CORPORATION
- LIMITED LIABILITY COMPANY
- SOLE PROPRIETORSHIP/INDIVIDUAL

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

Funding for critical gaps in the Domestic Violence Intervention Services on the Island of Oahu.

4. FEDERAL TAX ID #: \_\_\_\_\_

5. STATE TAX ID #: \_\_\_\_\_

7. AMOUNT OF STATE FUNDS REQUESTED:

FY 2011-2012: \$ 112,161

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
- EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ 446,500

FEDERAL \$ \_\_\_\_\_

COUNTY \$ \_\_\_\_\_

PRIVATE/OTHER \$ 25,000

AUTHORIZED SIGNATURE

PATTI BATES, CHIEF OPERATING OFFICER  
NAME & TITLE

1/27/11  
DATE SIGNED

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JAN 28 REC'D



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January 28, 2011

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ACCREDITATION

Council on Accreditation

AFFILIATIONS

Alliance for Children  
and Families

Hawaii Island

United Way

Maui United Way

Kauai United Way

Senate Committee on Ways and Means  
State Capitol, Room 215  
Honolulu, HI 96813  
Attn: Roderick Becker

Child & Family Service is pleased to submit to the Senate Committee on Ways and Means our Grants-in-Aid Application for **Domestic Violence Intervention Services (Oahu)**. This request is related to the Judiciary.

Enclosed is one original for your review and consideration. One copy has also been submitted to the House Committee on Finance.

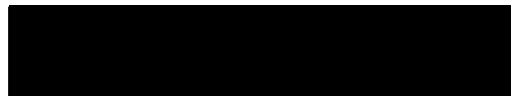
Child & Family Service continues to build positive working relationships with our funders and the various organizations in the community. We remain very committed to partnerships with each of our funders to deliver services of the highest quality that meet the needs of the people of Hawaii. If you ever have any concerns about our working relationship or services, do not hesitate to contact me at 681-1418.

We give careful consideration to all proposals we are submitting for funding in order to deliver services that support our mission of **"Strengthening families and fostering the healthy development of children."** The attached proposal is consistent with a thorough review that we conducted to determine which requests for proposals we would pursue. In addition to the importance of a fit with our mission, we also make decisions to pursue funding for programs and services that we believe we can provide in a high quality manner consistent with the RFP requirements.

Every four years our national accrediting body, the Council on Accreditation, conducts an extensive reaccreditation site visit and reviews all of our programs, our quality assurance and risk management systems, all administrative areas, and our board functioning. In our most recent review in September 2009, I am pleased to report that we did not have a single citation that needed a response! We are very proud of this result and it serves as a validation of the importance we place on being a high quality organization with high quality programs.

On behalf of our Board of Directors and all of the staff at Child & Family Service we look forward to working with you to provide services that will meet the needs of our community.

With Warm Aloha,



Howard S. Garval  
President and CEO



Aloha United Way

*Our Mission: Strengthening Families and Fostering the Healthy Development of Children*

**Grants-in-Aid Application  
Domestic Violence Intervention Services (Oahu)  
Developing Options to Violence Program  
Proposal  
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## Application for Grants and Subsidies

### I. BACKGROUND AND SUMMARY

#### 1. Brief Description of Child & Family Service's Background

Since 1899, Child & Family Service (CFS) has dedicated its efforts to its mission of **“Strengthening families and fostering the healthy development of children.”** CFS has 37 programs statewide that offer an array of effective and culturally relevant services to Hawaii's residents in need. The broad spectrum of services provided by CFS include: domestic violence intervention, case management, residential group homes, alternative education for alienated youth, prevention and treatment of child abuse, and family, school, and community-based counseling related services for children and their families. Infants, children, adolescents, young adults, immigrants, older adults, individuals, and families in need benefit from these services. CFS' programs are responsive, flexible, and focused on positive outcomes. Services are provided in homes, schools and in the community as well as CFS' offices throughout the State. CFS provides services through 35 sites throughout the State, on the islands of Oahu, Hawaii, Kauai, Maui, Molokai, and Lanai. CFS' strength lies not only in its size and ability to share expertise and resources statewide, but also in its ability to adapt services so that they are unique and appropriate to the islands and communities it serves.

CFS is requesting Grant-In-Aid funds to support critical staffing gaps in our Developing Options to Violence (DOV) Program. These service components include groups for domestic violence offenders, support services to victims/survivors. The services offered to offenders include groups for batterers who are abusive in intimate relationships and those who are abusive in non-intimate relationships. Offender services are available to adjudicated adults and juveniles who are referred to the Program by Family Court. The Victim/Survivor Support Services include information and referral, crisis counseling, support counseling, case management, and safety planning to those adults and juveniles.

CFS Domestic Violence Programs continuously review research and Best Practices in the field of corrections and domestic violence to provide effective and measurable interventions. These interventions are aimed at increasing safety for victims/survivors, children, and others, as well as holding the offenders accountable and reducing the offender's level of risk and use of violence. The Domestic Violence Intervention Services include the following:

- Offer Domestic Violence Intervention Services to adult and juvenile offenders and victims/survivors.
- Complete a thorough assessment, which includes an evaluation of risks, need and strengths.
- Provide individual and group services to victims and offenders.

- Address the co-existence of substance abuse and domestic violence.
- Expand services to victims.
- Continue to be sensitive to cultural matters, gender relevant issues and potential barriers that clients may experience.
- Increase the Program evaluation components and practices to address gaps that can be useful in holding batterer programs accountable for violence prevention efforts.
- Increase batterers' knowledge of the effects of domestic violence on children.
- Provide outreach services to the community including community education and collaboration.
- Provide follow-up activities designed to enhance each client's ability to sustain success outside of the Program when applicable.
- Participate in the planning of the Family Justice Center and potential staffing for victims and children's services.

Through CFS' efforts to break the cycle of violence, the community will be strengthened. The DOV Program will continue to offer services to men, women, adolescents and children who are affected by domestic violence, family violence and/or community violence.

While the GIA funding will not support this entire Program, it will allow the Program to meet the increased demand of high wait lists as a result of recent funding cuts.

## **2. Goals and Objectives Related to the Request**

The overall goal of the DOV program is to increase safety for victims/survivors, children, and others, as well as to hold the offenders accountable, and reducing the offender's level of risk and use of violence.

## **3. Public Purpose and Need to be Served**

The public purpose of these services is to increase public safety through intervention and education. The need for these services is high, with ever increasing wait lists for this program.

## **4. Target Population to be Served**

The target population to be served includes offenders (adults and juveniles), and victims of domestic violence. The offenders are primarily court ordered to services by the court system. The victims and child/youth witnesses are usually self-referred.

## 5. Geographic Coverage

The DOV Program will offer services for the Island of Oahu. The Program will give priority to Judiciary referred/contracted clients and accepts volunteers as space is available.

## II. SERVICE SUMMARY AND OUTCOMES

### 1. Scope of Work, Tasks and Responsibilities

The DOV Program's focus is to engage its clients in services by recognizing that people can make positive changes in their lives. In our domestic violence programs the staff convey the message that violence is not okay and that people need to feel safe in their home and community. The Program staff members communicate to clients that people make choices that are not always positive and these choices often hurt people they care about. They clients are offered hope in that the Program can help them through these tough times, keeping in mind that change is a process and takes a lifelong commitment to better oneself. Time is also needed in building back trust in relationships that may have been harmed.

The clients that experience domestic violence often feel overwhelmed, and are unsure what to do and where to turn for help. Many clients have given up hope. The staff ask the hard questions about what brings a client to services in a safe, caring, nonjudgmental environment thus engaging the client in the initial change process.

The DOV Program proposes to provide a comprehensive range of Domestic Violence Intervention Services aimed at increasing victim safety, and minimizing effects of violence on victims.

One client recently shared their experience while attending the Batterer Intervention Program:

*"The understanding of my triggers, self awareness and the emotional ways of being abusive were an eye opener for me. The staff were very professional and inspirational which earned my respect for the curriculum and gave me the hope to change. The program helped me a great deal and gave me skills to use."*

### Outputs/Units of Service

The DOV Program proposes the following units of service for each fiscal year:

Population	Number of Unduplicated Clients to be Served Each Fiscal Year	Additional Number Served by GIA Funds
Domestic Violence Intervention and Violence Control Services	250-300	100
Juvenile Offender Services	20	10
Victim Services	80-110	50

**Batterers Intervention Program**

The DOV Program will use a combination of CFS-developed cognitive based curriculum for offenders. The Program continues to explore existing models that use a cognitive behavioral approach; however to date, there are limited resources on available curriculums for domestic violence that are solely using cognitive behavioral intervention services. While a cognitive behavioral model is effective for offenders, it is also important to address areas of power and control, personal responsibility and male socialization for domestic violence offenders. Staff have participated in training opportunities relating to Domestic Violence, Cognitive Behavioral Therapy, Post Traumatic Stress Disorder, Trauma Informed Care, and Motivational Interviewing. Staff were invited to attend a training conducted by Harvey Milkman several years ago and CFS continues to maintain contact with individuals who can provide consultation and assist in the development of Cognitive Behavioral approaches. In addition the Program is exploring piloting other models that appear to be cognitive in nature with close supervision and monitoring as well as client follow-up. For victims/survivor services, the DOV Program has developed a curriculum based on DAP (Domestic Abuse Project), Duluth Model principles and Patterns Changing curriculum. The curriculum outline is detailed in this section. The DOV Program staff continually search for the most up-to-date information on working with domestic violence and revise the curriculum as needed. The Program is very active in tailoring curriculum and concepts to address the multi-cultural environment of Hawaii.

- **Risk Assessment and Identification**

Current research in the field of corrections confirms that in order to reduce an offender’s chance of re-offending, a thorough risk assessment must be done that identifies the dynamic and static risk factors and provide services that are aimed at changing or reducing them. Therefore, each offender participating in services at DOV Program will undergo a comprehensive psycho-social assessment that identifies risk factors such as legal history, lack of support system, criminal associates, etc. and develop a service plan that is aimed at reducing these risk factors. Adjunctive tools will be used to provide additional information regarding an offender’s current risk factors; these include a substance abuse survey, mental health screening, and identification of aggressive beliefs inventory. This information along with information that may be obtained from probation such as verification of legal history, DVSI score, SARA and LSI-R score for each offender will be used to determine assignment to a

low-, medium- or high-risk category. The offender will then be placed in services that appropriately address their level of risk.

- **Low-, Medium-, and High-Risk Services**

Current research indicates that mixing batterers who have different levels of risk is not recommended because the low-risk offenders could potentially become high-risk offenders. The DOV Program will continue to explore the feasibility of separating offenders into low-, medium-, high-risk categories based on information obtained from the assessment, Probation Officers and other sources. The DOV Program is proposing to designate a staff person to work closely with the Probation Officers that are monitoring high-risk offenders and those under HOPE supervision. The Program will continue to work with Adult Client Service Branch on obtaining results of the risk assessment administered by probation and will implement ongoing risk assessment to assess dynamic risk factors.

- **Motivational Enhancement and Barrier Reduction Strategies**

Offenders entering services are often very resistant to fully cooperating and participating in Program services. In order to reduce barriers that offenders may have when entering the Program, services are designed to address the individual's level of motivation, and learning style. An attempt is made to match the offender with staff members who offer them the best opportunity to learn and successfully complete the Program.

### **Victim/Survivor Support Services**

Increasing safety and support for victims/survivors while decreasing the sense of isolation that they often feel is a primary goal for the Program and is addressed primarily through support groups, education, safety planning, and referrals to other appropriate domestic violence services within CFS or in the community. Outreach to victims/survivors, children and their families will also be provided. The proposed Program Supervisor I will be overseeing the victim/survivor and children's services. The proposed Program Supervisor I will also be involved with the Family Justice Center on Oahu and assist with the co-location of staff. For those victims/survivors who have partners participating in domestic violence interventions services, routine safety checks are provided to assist them with safety and protection planning and referrals as appropriate. The DOV Program regularly refers to CFS' Domestic Abuse Shelters, the Domestic Violence Action Center, the Legal Aid Society of Hawaii and the PACT Puuhonua.

To address the area of trauma, CFS has incorporated a Post-traumatic Stress Disorder Reaction Index, a trauma screening tool endorsed by the Department of Health's Child and Adolescent Mental Health Division (CAMHD). Proper copyright approval has been obtained to utilize this instrument. CFS has also begun to implement a new evidenced-based Trauma Informed Care approach and curriculum with staff, called *Risking*



*Connections.* This curriculum provides a basis for understanding the Trauma Framework and what effects trauma has had on the lives of clients. It also provides specific task-oriented processes to work with individuals who have gone through trauma. The ultimate goal of this approach is to improve how staff understand abuse and trauma and to increase the effectiveness of service delivery with surviving clients. CFS will be providing training in the spring of 2011 for the programs that work with clients that have experienced trauma. CFS anticipates making additional changes in its services to incorporate Trauma Informed Care.

## **SERVICE ACTIVITIES**

### **Assessment and Service Planning**

Prior to participating in services, clients are scheduled to attend an individual comprehensive psycho-social assessment (CFS Comprehensive Basic Assessment) so that an individualized Service Plan can be developed.

During the comprehensive assessment, the following information is gathered:

- Presenting problem/need for services
- History of violence, current and past, risk assessment
- Degree and severity of abuse
- Safety issues
- Basic needs
- Legal history including arrest record, CPS involvement, criminal justice involvement
- Family history to include abuse, exposure to violence
- Mental health/substance abuse history
- Medical history to include head injury/trauma
- Current and past relationship history
- Work/social history
- Past use of services (domestic violence, anger management, substance abuse)
- Motivation to change
- Current risk factors (criminogenic needs)
- Strengths, resources, and support systems
- Cultural characteristics
- Special needs

Additional tools such as the Alcohol and Substance Abuse Screen Survey, Mental Health Screen, and the Identification of Aggressive Behavior Inventory are used to provide additional information regarding a client's level of risk and used as a pre-test. Once an assessment is completed, a service plan is developed based on the client's risk factors, individual needs, court ordered requirements and the individual's ability to meet goals. Any relevant consent to release or obtain confidential information is completed, including the victim safety contact release as appropriate, Program contract, fee

agreement, and consent to services. The client is notified of the CFS Client Rights and Responsibilities and Grievance Procedures. If the individual is deemed appropriate for service, group attendance is scheduled. Those clients with severe mental health or substance abuse problems may be referred to other resources for services prior to participating in the Program if they are not appropriate or if the Program is not able to meet their needs. Brief individual and/or group sessions may be made available to those clients who need help and stabilization to fully participate in group services.

Another Best Practices standard is rapid entry into the Program. This is essential in motivating clients to engage in services. Most clients attend group within 10 days of initial contact. Over the past two years the average length of time from the initial telephone call to first office visit has been seven days. Groups are conducted in an open format allowing clients to receive services immediately and to avoid wait lists.

The primary service modality for the Program is a group format. The groups are gender specific. Best Practices indicate that groups are an effective method of assisting clients in making changes and can provide a supportive structure that makes it easier for clients to break the denial, blame and minimization and to facilitate offenders' accountability. Best Practices also recommend that groups for offenders should be staffed by facilitators of both genders in order to role model appropriate male and female interaction, communication and encourage gender equality. Offender groups in the DOV Program are staffed with both male and female Group Facilitators whenever possible. Group support services to victims/survivors and children witnesses are important to reduce isolation, increase support and provide safety planning. Other services may include a combination of group and or individual as well as outreach to victims/survivors and the families of the offenders.

## **Batterer Intervention Program**

### **Orientation**

Adult offenders referred to attend Domestic Violence Intervention or Violence Control Services attend an initial orientation session prior to attending their comprehensive assessment. During orientation, facilitators use motivational enhancing statements and strategies to open up communication about the change process and introduce clients to the Program's structure, rules and expectations. All other clients are given an initial orientation to the Program during their comprehensive assessment and/or prior to attending the first group session.

Clients are not permitted to use any type of violence, drugs or alcohol while participating in group. They are expected to respect staff and other clients, maintain confidentiality of other Program clients, actively work on service plans and goals, report to Probation Officers as instructed and complete assignments. Clients are expected to show up for

scheduled appointments and groups unless otherwise excused. Clients who fail to follow Program guidelines risk termination of services.

Clients who are referred to services for intimate partner violence are placed in the Domestic Violence Intervention Groups. Clients who are referred to services for a violent incident unrelated to an intimate partner are placed in the Violence Control Group.

<b>Domestic Violence Intervention Education Group Phase (Batterer Intervention Program) (10 sessions minimum)</b>
This service is offered to batterers involved in intimate partner violence. The program consists of a minimum of 25 sessions. The curriculum consists of an Educational and Process Phase. The Educational Group Phase is 10 sessions.
<b>Session 1: Thoughts and Feelings I</b> <ul style="list-style-type: none"><li>• ABC Model</li><li>• Thinking Errors</li><li>• Belief Systems</li></ul> <b>Session 2: Thoughts and Feelings II</b> <ul style="list-style-type: none"><li>• Ways to Change, Selecting Change Targets/Beliefs</li></ul> <b>Session 3: Changing Our Behaviors</b> <ul style="list-style-type: none"><li>• Role of Behaviors in the Change Process</li><li>• Stages of Change</li></ul> <b>Session 4: How to Start the Change Process</b> <ul style="list-style-type: none"><li>• Negative/Positive Thoughts</li><li>• Change Problem Solving</li></ul> <b>Session 5: Anger</b> <ul style="list-style-type: none"><li>• Primary, Secondary Feelings</li><li>• Anger/Abuse Process</li><li>• Types of Abuse</li><li>• Stress/Violence</li></ul> <b>Session 6: Socialization, Dominance</b> <ul style="list-style-type: none"><li>• Self-Control Skills</li><li>• Prevention/Intro to Self-Care Skills</li><li>• Cost and Payoffs</li><li>• Power and Control</li></ul> <b>Session 7: Trust, Intimacy</b> <ul style="list-style-type: none"><li>• Equality</li><li>• Respect</li></ul> <b>Session 8: Basic Communication</b> <ul style="list-style-type: none"><li>• What is Communication</li><li>• Types of Communication</li></ul>

<p style="text-align: center;"><b>Domestic Violence Intervention Education Group Phase (Batterer Intervention Program) (10 sessions minimum)</b></p>
<p><b>Session 9: Empathy</b></p> <ul style="list-style-type: none"><li>• Victim Impact</li></ul> <p><b>Session 10: Conflict Resolution</b></p> <ul style="list-style-type: none"><li>• Types of Conflict</li><li>• Negotiation Skills/Problem Solving</li></ul>

<p style="text-align: center;"><b>Domestic Violence Intervention Process Group Phase (10 sessions minimum)</b></p>
<p>Prior to completing the Education groups, the client will be scheduled for the Process Group Phase. The goal of the process groups is to move the client to real sustainable change. The skills learned in Education Group Phase I are put to the test during these process groups. A more confrontational, stressful environment is created so that clients can demonstrate the ability to exercise new non-violent behaviors. The process phase consists of a minimum of 10 weekly two-hour group sessions. The groups accommodate 12 to 15 clients.</p> <p>Throughout the process phase, clients complete the following assignments either written or verbally (if limited reading and writing ability): cue plan, time-out plan, stress management self-care plan, taking responsibility and ending violence, and controlling behavior plan. As part of accepting accountability, clients present assignments to the group. Staff is available to assist on an individual basis as needed.</p>

<p style="text-align: center;"><b>Domestic Violence Intervention Maintenance Group Phase (5 sessions minimum)</b></p>
<p>After completing the process phase the client may be moved to the Maintenance Group Phase. In Phase III, batterers bring their real life struggles in changing to the group, and are given additional opportunities to practice skills and share successes. The clients attend a minimum of five sessions over a two-month period. The clients complete a maintenance plan to demonstrate how he will continue a life style of non-violence.</p>

<p style="text-align: center;"><b>Violence Control Groups (15 sessions minimum)</b></p>
<p>Adult offenders in non-intimate relationships attend violence control groups. Following completion of intake assessments, the Violence Control component consists of a minimum of 15 weekly two-hour group sessions. Clients may also be required to attend a maintenance phase of 5 sessions. This service uses a cognitive behavioral approach in working with offenders who are demonstrating difficulty in controlling their anger and lack of</p>

empathy for their victims. Interventions are focused on the offenders restructuring their thinking, learning new ways of acting, and developing empathy for victims. The groups accommodate 12 to 15 clients. The curriculum consists of the following units:

**Unit 1: What Triggers Violent Behaviors? (5 sessions)**

- I. Stress and Anger
- II. Myths About Anger
- III. Feelings
- IV. Self Esteem
- V. Violence and Powerlessness

**Unit 2: Where does violent behavior come from? Why do we act the way we do? (3 sessions)**

- I. Belief Systems
- II. Anger Cues, Reducers and Self-Control Plan

**Unit 3: How do violent behaviors affect relationships? (3 sessions)**

- I. Effects of Violence on Relationships
- II. Blame, Minimization, Denial verses Responsibility
- III. Impact on Victim(s)

**Unit 4: What can be done to change violent behaviors? (4 sessions)**

- I. Communication
- II. Listening
- III. Conflict Resolution
- IV. Promoting Good Health and Self Care

Clients complete the following assignments: cue plan, time-out plan, stress management self-care plan, taking responsibility and ending violence, and controlling behavior plan.

### **Juvenile Offender Services**

Juvenile services consist of two components: dating relationship violence and violence control for non-intimate relationships.

For juveniles ordered by Family Court, groups are held for a minimum of 10 weekly sessions for 1-1/2 hours. There are two types of groups available, depending on the relationship to the victim. When possible, brief individual or family sessions (one to three sessions) are provided to engage the parents in supporting the juvenile in sustaining non-violence.

### **Juvenile Domestic Violence Intervention Groups**

Juvenile offenders in intimate relationships attend groups that incorporate cognitive behavioral concepts into educational and skill building sessions. The sessions are aimed at developing skills in the offenders so that they can identify the issues, thoughts, and beliefs that have led them to violence in the past with their intimate partner, learn violence reduction skills, and accept responsibility for their past behavior. Once they are able to master these skills, the emphasis shifts to motivating them to use the skills and change their aggressive patterns. Groups cover the following topics:

<p><b>Unit 1. Violence Awareness (2 sessions)</b></p> <ul style="list-style-type: none"><li>I. Recognizing Abusive and Controlling Behavior</li><li>II. Cycle of Violence</li><li>III. Cost and Payoffs</li><li>IV. Impact on Victims (Empathy)</li></ul> <p><b>Unit 2. Roots of Violence (2 sessions)</b></p> <ul style="list-style-type: none"><li>I. Gender Roles and Socialization</li><li>II. Power and Control</li></ul> <p><b>Unit 3. Self Control Skills (3 sessions)</b></p> <ul style="list-style-type: none"><li>I. Recognizing Cues</li><li>II. Belief Systems</li><li>III. Denial, Blame, and Minimization Versus Responsibility</li><li>IV. Taking a Time Out</li><li>V. Self Care</li></ul> <p><b>Unit 4. Skill Building to Healthy Relationships (3 sessions)</b></p> <ul style="list-style-type: none"><li>I. Communication Skills</li><li>II. Listening Skills</li><li>III. Conflict Resolution</li><li>IV. Self Concept</li></ul>
<p>This insight oriented approach helps the young offender recognize how their learned behaviors are preventing them from achieving the intimate relationship that they had hoped for. Special emphasis is placed on helping the offenders recognize the role that culture and family patterns play in their behavior. Later in the sessions the emphasis shifts to learning new skills and then helping the offenders integrate them into their social repertoire.</p>

<p style="text-align: center;"><b>Juvenile Violence Control Groups (10 sessions minimum)</b></p>
<p>Juvenile offenders in non-intimate relationships attend groups that incorporate cognitive behavioral concepts into educational and skill building sessions. The sessions are aimed at developing skills in the offenders so that they can identify the problems, thoughts, and beliefs that have led them to violence in the past, learn violence reduction skills, and accept responsibility for their past behavior. Once they have mastered these skills, the emphasis shifts towards motivating them to use the skills and change their aggressive patterns of behavior. Groups cover the following:</p>
<p><b>Unit 1. Violence Awareness (2 sessions)</b></p> <ul style="list-style-type: none"><li>I. Defining Abuse</li><li>II. Cost and Payoffs</li><li>III. Roots of Violence</li><li>IV. Impact on Victim(s)</li></ul> <p><b>Unit 2. Self Control Skills (3 sessions)</b></p> <ul style="list-style-type: none"><li>I. Recognizing Cues</li><li>II. Belief Systems</li></ul>

III. Denial, Blame and Minimization Versus Responsibility IV. Taking a Time Out <b>Unit 3. Communication Skills (2 sessions)</b> I. Types of Communication II. Listening Skills III. Conflict Resolution <b>Unit 4. Violence Prevention (3 sessions)</b> I. Healthy and Unhealthy Interpersonal Relationships II. Reducing Risk of Future Violence III. Self Concept IV. Self Care
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### **Victim/Survivor Support Services**

Adult victims/survivors of both genders, including same sex partners, are offered support services, group and/or brief individual services. Victim safety checks are provided for those partners of batterers participating in Domestic Violence Intervention (DVI) services. Referrals for victim services may come through Family Court Adult Services Branch, Criminal Misdemeanor Unit or through a temporary restraining order. Other referrals may come from the community and from victim safety checks.

<b>Victim Support Groups (15 sessions)</b>
Victim support groups provide education and support to those individuals who are in, or have been in, abusive intimate relationships. The purpose of the group is to provide information about how to be safe and develop a safety plan; to help clients understand what has happened through education about the dynamics of domestic violence; assist clients in understanding their anger; improve problem solving skills and increase social support; and identify and remove barriers to safety and decrease isolation. The groups use the Pattern Changing for Abused Women curriculum.
There are two phases of group services for victims, and individuals participate according to their particular needs and situation. <b>Phase I</b> <b>Unit 1. Understanding Abuse (4 sessions)</b> I. Impact of Abuse II. Family Roles and Abuse: Why is it so hard to leave III. Boundaries and Good- Byes to Old Patterns <b>Unit 2. Abuse and You (4 sessions)</b> I. Feelings: Grief, Fear and Guilt II. Feelings: Anger III. Leaving the Abuse/Sustaining Separation <b>Phase II</b> <b>Unit 3. Boundaries Setting (4 sessions)</b> I. Using Assertiveness Skills Myth and Reality

<b>Victim Support Groups (15 sessions)</b>
<ul style="list-style-type: none"><li>II. Using Assertiveness Skills Techniques</li><li>III. Using Assertiveness Skills Requests and Authority Figures</li><li>IV. Using Assertiveness Skills Practice</li></ul> <p><b>Unit 4. Self Care (3 sessions)</b></p> <ul style="list-style-type: none"><li>I. Setting Realistic Goals</li><li>II. New Pattern of Decision Making</li><li>III. Healthy and Unhealthy Relationships</li><li>IV. Changing Patterns</li></ul>
<p>One or both phases may be completed depending on what is most appropriate for the victim's current situation. During victim services, a pre- and post-test is administered to measure increased knowledge regarding the dynamics of domestic violence. Each phase consists of weekly sessions or a total of 15 weekly sessions for both phases.</p>

<b>Additional Services to Victims/Survivors of Offenders Referred to Services</b>
<p>Staff make every effort to contact the victims/survivors of the offenders referred or who are participating in our services. Staff provide information about offender services and any other relevant information within the guidelines of confidentiality. To overcome some of the barriers that prevent victims from making contact, the Program's staff will be available to meet with the victim at a neutral location that is safe. Then concerns such as the victim's and children's needs, and impact of violence on them will be addressed. Staff will provide brief counseling, linkage and referral if indicated. Information about the offender services, warning signs, support groups and other community referrals, and safety planning can also be provided.</p>

<b>Women's Domestic Violence Intervention Groups (20 sessions)</b>
<p>Some women have both victim and offender concerns that need to be addressed. The victim offender groups consist of 20 weekly two-hour sessions. These services address acting out behavior as a result of frustration and anger rather than power and control tactics. The clients are encouraged to develop insight into the dynamics that influenced them to become abusive. They are taught skills to control their anger, and are guided in seeking new patterns for expressing their fears and frustrations. Knowing that the effects of their abuse are going to be long-term, the emphasis shifts to the tools needed for healing. The curriculum will consist of the following units:</p>
<p><b>Unit 1. Foundations of Abuse (3 sessions)</b></p> <ul style="list-style-type: none"><li>I. What is Domestic Abuse</li><li>II. Cultural Influences</li><li>III. Gender Issues</li><li>IV. Anger and Depression</li></ul>
<p><b>Unit 2. Self Management Skills (5 sessions)</b></p> <ul style="list-style-type: none"><li>I. Responsibility</li><li>II. Taking a Time Out: Managing Behavior</li></ul>



<b>Women's Domestic Violence Intervention Groups (20 sessions)</b>
<ul style="list-style-type: none"> <li>III. Stress Management</li> <li>IV. Setting Boundaries</li> <li>V. Self-esteem and Self Care</li> <li>VI. Self-Talk, Beliefs, Our Identity</li> </ul> <p><b>Unit 3. Communication Skills (4 sessions)</b></p> <ul style="list-style-type: none"> <li>I. Types of Communication</li> <li>II. I Messages</li> <li>III. Feelings</li> <li>IV. Conflict Resolution</li> </ul> <p><b>Unit 4. Intimacy Issue (4 sessions)</b></p> <ul style="list-style-type: none"> <li>I. Intimacy</li> <li>II. Understanding Love</li> <li>III. Understanding and Meeting our Needs</li> <li>IV. Healthy and Unhealthy Relationships</li> </ul> <p><b>Unit 5. Family Issues (4 sessions)</b></p> <ul style="list-style-type: none"> <li>I. Family Album</li> <li>II. Domestic Violence and Children</li> </ul>

<b>Additional Program Components</b>
<p><b>Services to Limited English Speaking Clients</b></p> <p>The DOV Program will attempt to provide group or individual services to clients in Ilocano, Tagalog, Korean, Thai, Laotian, Mandarin, Cantonese, and Vietnamese as staff is available. The Program has interpreters in these languages, as this appears to be the areas of greatest need. The groups, which are scheduled for 20 to 24 week duration, are co-facilitated by an interpreter and by an experienced domestic violence facilitator.</p>
<p><b>Extension Phase</b></p> <p>After completing the minimal number of sessions, clients may be extended if they struggle with the concepts, exhibit inconsistent use of skills, continue to use violent and controlling behavior, and/or fail to complete assignments. The purpose of the extension is to provide maximum opportunity to learn non-violent skills and behavior. Modifications to the service plan will be made with the client as appropriate.</p>
<p><b>Program Fees</b></p> <p>There is a charge for attending the groups, however, CFS has a no turn away policy for clients who are unable to pay. Program fees are based on a sliding fee scale. For the offenders' services, the DOV Program charges a fee and makes a payment agreement with the client, presenting the opportunity for the client to accept responsibility for his/her actions. It has also been the experience of our DOV Program that when people pay for services, they feel that services are more valuable, and they work harder to make needed changes when there is a cost involved. Offenders' balances will be reported on proof of compliance or non-compliance report. The Program provides services at no charge for many victims who are unable to pay, as economic abuse is common among this population.</p>

<b>Additional Program Components</b>
<p><b>Aftercare</b></p> <p>Once clients have completed any of the DOV Program components, they are offered the opportunity to continue to participate with the Program for additional support. If a client wishes to continue, the program staff will review the client's individual goals and set up a contract for continued services.</p> <p>If a client wishes to return to the Program at a later date, a re-assessment of the situation prior to placement into appropriate services is recommended. Clients are provided with information on other resources to link them with appropriate services. Victims are encouraged to report further episodes of domestic violence and to return for support when needed.</p> <p>As part of the aftercare, Program staff will make efforts to follow up with clients once they have completed services.</p>
<p><b>Exit Interview and Follow-up</b></p> <p>All clients that complete the Program receive an exit interview within 30 days of completion of services. A post-test is administered, goal achievement reviewed, and outcome measurements documented. A follow-up plan is developed with the client, and to the extent possible, partner contacts are included.</p>

**2. Annual Timeline for Accomplishing the Results or Outcomes for DOV**

<b>Task</b>	<b>Activity</b>	<b>Timeline</b>
Recruitment of Staff	Post positions	2 weeks
	Gather applications	2 weeks
	Conduct interviews	1 month
	Hire staff	45 days
Train staff	Develop Training Plan	30 days
	Schedule training	60 days
Domestic Violence Intervention Services	Offer additional services to clients	90 days and ongoing thereafter
Victim/Survivor Services	Offer additional services to clients	90 days and ongoing thereafter

**3. Quality Assurance and Evaluation Plan**

**Child & Family Service – Commitment to a Responsive and Comprehensive Approach to Performance and Quality Improvement**

CFS is dedicated to providing quality services to the individuals and families it serves, and to be accountable to those who fund the services. CFS has well established Performance and Quality Improvement (PQI) mechanisms. PQI is an ongoing process that occurs daily as staff members strive to improve the service they provide internally

and externally. On a quarterly basis, the organization-wide committees meet to review aggregate data, and program and administrative staff review their outcome data, identify their strengths, discuss compliance issues, and troubleshoot areas of concern.

The PQI structure is overseen by the Quality Assurance and Training Department and the PQI Committee. The committee receives and evaluates reports from the PQI Subcommittees, which includes departments and programs, for significant trends, and determines whether services meet pre-determined expectations of quality and outcomes. The PQI Subcommittees include Safety and Risk Management, Outcomes, Internal and External Reports, Case Record Review, Clinical Risk Management, and Training. Systematic evaluation of effectiveness and efficiency of services includes review of incident reports, client complaints and grievances, internal and external monitoring reports, client satisfaction surveys, outcomes, case record/utilization reviews, quarterly performance indicators and program accreditation review reports. Once a quarter the PQI Committee reports to management on the quality assurance activities, summarizing the important improvement areas identified in their data analysis, and identifying specific training areas needing emphasis. Quarterly, the Director of Quality Assurance and Training compiles a summary of the organization's strengths and areas for improvement, which is provided to the Executive Leadership Team and the Board of Directors.

Highlights of the PQI process include:

<b>Cultural Diversity Task Force</b>	A critical component of the PQI structure. Its goal is to strengthen cultural competency and develop awareness and an appreciation of cultural diversity. The task force is responsible for: reviewing compliance with the national standards on Culturally and Linguistically Appropriate Services in Health Care (CLAS), providing recommendations on cultural trainings and facilitating cultural events for the organization. The task force meets by videoconference and has neighbor island representation.
<b>Clinical Coordinators</b>	Provide support and guidance to program management to maintain accreditation standards, contract compliance, and use of Best Practices. The Clinical Coordinators conduct a review of client records, fiscal audits, clinical supervision notes, and program procedures in preparation for contract monitoring and reaccreditation. The Clinical Coordinators have developed a comprehensive chart compliance checklist to evaluate each program, identify areas of strengths and opportunities for improvement. The review tool is a combination of COA requirements and contractual requirements where applicable. To facilitate accreditation readiness, the Clinical Coordinators maintain program specific COA work plans which identify program related standards and evidence to meet the requirements. The Clinical Coordinators make quarterly site visits to the neighbor island offices to review program charts.
<b>Clinical Risk Management (CRM) Committee</b>	Evaluates and reviews organizational practices with clients that involve risk or limit freedom of choice, issues related to medications, effectiveness of risk prevention measures trend analysis on manual restraints, crisis plans, and research involving clients. The CRM Committee may also review specific high-risk clients through an interdisciplinary approach to assure that service delivery utilizes the least restrictive interventions and adheres to Best Practices standards. The

	<p>CRM Committee meets by videoconference and has neighbor island representation.</p> <p>Through the guidance of the CRM Committee, CFS has implemented statewide meetings for all CFS Registered Nurses to ensure consistency in following the policies and procedures and training for all staff who make medications available to clients. The CRM Committee was tasked with revising the Administrative Policies and Procedures and working with the Nurses to ensure compliance with state laws for delegation, and for COA and contract requirements.</p> <p>In 2008, the CRM Committee convened a subcommittee to compare Pro-ACT and CPI to identify a method that best suits CFS' programs and needs. The subcommittee which involved internal trainers of CPI and Pro-ACT, supervisors of different program areas and direct service staff recommended that CFS use only CPI methods for all programs. The Administrative policies and procedures on behavior management were revised and updated for COA standards.</p> <p>In addition the CRM Committee evaluates Administrative policies and procedures on clinical risk issues and makes recommendations on training and process implementation.</p>
<p><b>Quality Assurance and Training Department</b></p>	<p>Conducts quarterly trainings in the organization-wide COA required trainings. These trainings are geared for direct service staff and supervisors. The trainings cover documentation, client advocacy, therapeutic rapport, special needs, child abuse and neglect, needs of individuals and families in crisis, communication barriers and public assistance. Training is offered via videoconference so that neighbor island staff can participate.</p>
<p><b>Council on Accreditation</b></p>	<p>In 2009, CFS successfully completed reaccreditation with the Council on Accreditation, and in that review, CFS did not have a single citation that needed a response. The reviewers commended CFS on having one of the best PQI systems in place with clear and precise reports and a strong PQI committee structure.</p>

The Performance and Quality Improvement Plan and a flow chart are available upon request.

As part of the PQI process, programs are asked to identify how they monitor, measure and collect data on performance measures and outcomes. Each program completes the Quarterly Manager's Report (QMR) that identifies quality indicators which include:

- Number of clients served (unduplicated)
- Client outcomes
- Case record reviews
- Utilization review
- Client satisfaction
- Referral source satisfaction
- Client grievances
- Supervision
- Training

- Accomplishments and strengths
- Progress on any action plans

The data gathered for this report is reviewed with staff members by the supervisor during regular staff meetings. The trends identified are discussed and an action plan is developed. This process allows all staff to participate in the PQI process and provides accountability that the expected outcome is achieved. The QMR form is available for review upon request.

The QMR is a tool for programs to track and validate effectiveness of the activities or services provided. The tool identifies trends, strengths and areas for improvement. It allows programs to identify and resolve problems, make improvements to the program development plans, and identify staff roles and responsibilities.

CFS has extensive policies and procedures in place which guide staff in the above PQI process. Administrative policies and procedures and program specific procedures are available for review at each program site.

### **The Developing Options to Violence (DOV) Program**

The DOV Program's performance and quality improvement process consists of a number of approaches to provide quality services in our community. These quality improvement processes incorporate feedback from many different sources including clients, funding sources, referral sources, staff and community partners that work with CFS. The following chart outlines the Program specific tasks and timelines.

<b>PQI Event</b>	<b>Description</b>	<b>Responsible Staff</b>	<b>Frequency</b>
Quarterly Managers Report (QMR)	Identifies quality indicators and trends for the Program such as outcomes and clients served	Program Supervisor I Program Director I	Quarterly
Peer Case Record Review (CRR)	Review of client case records	Program Supervisor I Program Director I	Quarterly
Staff Supervision	Supervision on cases, group and professional development. Review of case records	Program Supervisor I Program Director I	Bi-monthly or monthly depending on the staff's expertise and number of client contacts (groups and hours worked per week)
Annual Program Planning (APP)	Review and development of Program goals	Program Supervisor I Program Director I	Annually
Client and Referral Source Surveys	Surveys are distributed	Program Supervisor I Program Director I	Quarterly At discharge
Quarterly and Annual Reports to the Funder	Data collected on unduplicated clients	Program Supervisor I Program Director I	Quarterly and Annually

PQI Event	Description	Responsible Staff	Frequency
	served, outcomes, accomplishments, problems encountered		

The QMR is described in detail in the prior section. As part of the QMR, program outcomes are collected and reported on a quarterly basis to track Program effectiveness. These outcomes are developed based on contract requirements and goals. Standardized tools are utilized when applicable and necessary according to the Program need in order to provide consistent objective data. Outcomes that are not being met or that are no longer appropriate are reviewed and changed to more effectively measure Program effectiveness.

The DOV Program staff participate in quarterly peer case record review with other CFS programs. This review identifies case record strengths as well as areas in need of improvement. Through this process, staff meetings, and individual supervision, goals are established with action plans for areas of improvement and are reported to senior management quarterly.

Supervision with staff is another means of quality assurance and evaluation. Staff members receive monthly or bimonthly individual supervision to review professional and personal goals as well as case supervision to review the status. Staff are also monitored on the adherence to the Hawaii Batterers Intervention Program Standards.

An Annual Program Plan (APP) is developed each year by the DOV Program and identifies those goals and objectives necessary to consistently meet client needs in the best way possible. The plan outlines what each goal is, what area of need it meets, and also its anticipated date of accomplishment. The CFS strategic plan is used as a guide in the development of the APP.

Surveys are distributed to clients and referral sources quarterly. The client surveys give clients opportunities to provide feedback both while receiving services and at completion of services. The information is collected and reported on a quarterly basis and shared with the Program staff. These surveys are anonymous and provide information on satisfaction with current services and also identify areas of improvement and Program strengths. Clients consistently report satisfaction with services and acknowledge that the Program made them feel comfortable and provided them with tools to make changes in their lives. Many clients report they would refer others to services at CFS. Any findings, positive or negative, are documented and improvement work plans are developed to address any problem areas. The survey results are also reported to CFS' PQI Committee.

Monthly, quarterly and annual reports are completed as required by Judiciary. The reports provide data on the number of unduplicated clients served, achieved outcomes,

as well as accomplishments and problems encountered. The report also provides expenses to date as well as any changes in staffing.

As described in the prior section, the Clinical Coordinator conducts internal monitoring to review Program compliance with contracts, outcomes, and COA standards. The Clinical Coordinator offers support to the program to assist for preparation of an external monitoring, as well as compliance with the Hawaii Batterers Intervention Program Standards, and Program assessment by the Correctional Program Checklist.

**4. Measures of Effectiveness**

<b>Batterer Intervention Services</b>		
<b>Percentage</b>	<b>Outcome</b>	<b>Measurement Tools</b>
75%	Clients completing batterer intervention services shall have remained violence free for no less than twenty (20) consecutive weeks prior to discharge.	Client self report Victim reports Police report Confirmation with Probation Officer
75%	Clients completing batterer intervention services have taken responsibility for their violent behavior; ceased to blame the victim for the violence; and recognize the adverse effects of their violent acts.	Client self report Facilitator written evaluation
100%	Clients completing batterer intervention services will complete a written individualized, practical plan to maintain non-violent behavior and will present that plan to the group for feedback.	Copy of plan in client file Facilitator written evaluation
75%	Clients completing batterer intervention services will improve their understanding of the nature and effects of domestic violence by 50%.	Pre- and post-test in client file Facilitator written evaluation
60%	Clients completing batterer intervention services will demonstrate the knowledge, skill and attitudes/ values necessary for the maintenance of non-abusive behavior in intimate relationships which includes learning non-violent conflict resolution and non-aggressive communication skills.	Client self report of use of Equality wheel (e.g. negotiation skills, communication skills) Progress notes Facilitator written evaluation
100%	Clients completing batterer intervention services will significantly increase their knowledge of the effects of domestic violence on children.	Pre- and post-test in client file Client self report Progress notes Facilitator written evaluation
80%	Clients completing batterer intervention services will demonstrate an increase in their development of empathy for others affected by their violent behavior.	Case notes, written assignment, self and facilitator written evaluation

<b>Victim Services</b>		
<b>Percentage</b>	<b>Outcome</b>	<b>Measurement Tools</b>
80%	Clients completing services will complete a personalized safety plan.	Safety plan in chart Client feedback

<b>Victim Services</b>		
<b>Percentage</b>	<b>Outcome</b>	<b>Measurement Tools</b>
80%	Clients completing services will be able to demonstrate an increased knowledge of effects that violence has on themselves and their children.	Client report Facilitator evaluation Post-test

<b>Juvenile Services</b>		
<b>Percentage</b>	<b>Outcome</b>	<b>Measurement Tools</b>
80%	Youth completing services will be able to demonstrate knowledge of positive coping skills, such as self time-outs, positive communication with their parent, and drawing out their feelings.	Client Self Reports, DVS observation and evaluation
80%	Youth completing services will increase their knowledge and understanding of the nature and effects of violent or aggressive behaviors.	Client Self Reports, DVS observation and evaluation
80%	Youth completing services will demonstrate empathy for others affected by their abusive and/or violent behaviors.	Client Self Reports, DVS observation and evaluation
60%	Youth completing services have taken responsibility for their abusive and/or violence behaviors.	Client Self Reports, DVS observation and evaluation

### III. FINANCIAL

#### Budget

##### 1. Submission of Budget Forms

See attached budget.

##### 2. Anticipated Quarterly funding requests for FY 2011-2012.

<b>Quarter 1</b>	<b>Quarter 2</b>	<b>Quarter 3</b>	<b>Quarter 4</b>	<b>TOTAL Grant</b>
\$30,290.25	\$30,290.25	\$30,290.25	\$30,290.25	\$121,161.00

##### 3. Listing of All Other Sources of Funding for FY 2011-2012

The following is a list of all other sources of funding the CFS DOV Program is trying to obtain for fiscal year 2011-2012. Application is still pending.

<b>Name of Funding Source</b>	<b>Amount Requested</b>
The Judiciary	\$610,000



#### IV. EXPERIENCE AND CAPABILITY

##### A. Necessary Skills and Experience

###### **The Developing Options to Violence Program- Demonstrated Skills, Abilities and Knowledge**

The DOV Program team has many dedicated staff that have been with the Program for 10 years or longer. In alignment with evidence-based practice and the Hawaii Batterers Intervention Program Standards the Program staff operate from the following premises:

- Offenders can change their attitudes, beliefs, and behaviors by learning positive non-violent skills that promote relationships as equal partnerships.
- Safety of the victims/survivors and children and holding the offenders accountable for their behavior are the ultimate goals.
- Offering Domestic Violence Intervention Services can eliminate or greatly reduce physical, emotional and sexual abuse.
- Domestic violence services are specialized and research around effectiveness depends on the study requiring programs to continually be up-to-date on Best Practices.
- Domestic violence offenders are at-risk of recidivism without appropriate domestic violence intervention services in collaboration with the criminal justice system and other domestic violence providers.
- A coordinated community response is the most effective intervention and batterers intervention services are a critical component.
- Domestic violence is predominately male to female battering resulting from power and control. The Program primarily considers interventions and practices that have been recommended for Hawaii Batterers Intervention Program Standards.
- Abuse can happen in the forms of male to male, female to female and female to male therefore additional groups and services may be conducted to address the specific needs of these relationships.
- Training, supervision and quality assurance guidelines are necessary to comply with standards.

The Developing Options to Violence (DOV) team is committed to our mission and continues to support Best Practices strategies in working with those experiencing domestic violence.

CFS has a number of domestic violence services that are overseen by the Director of Program Services (DPS), Angie Doi, who has over 17 years experience in domestic violence and who is recognized for building a strong team of staff who are loyal and committed to increasing safety in our community. The DOV Program team members understand the importance of bringing organizations together that have contact with victims/survivors and perpetrators of domestic violence, therefore CFS has been active in the community and participates with meetings, task forces, and focus groups that

share the common goal of reducing domestic violence and increasing safety for the families in Hawaii. The DPS is active with the Oahu Domestic Violence Task Force and is working with the quality assurance committee which includes the Domestic Violence Action Center, Parents and Children Together and a community participant who is a survivor of domestic violence. The committee is reviewing the current services available to victims/survivors, the referral and intake process, as well as the accessibility of services.

The DPS also participates with the Domestic Violence Oversight Body Committee and with the Batterers Intervention Subcommittee to plan the implementation of the Hawaii Batterers Intervention Program Standards statewide in an effort to increase the accountability of batterer programs. The DPS is a member of the Family Justice Center Executive Committee as well as the Steering Committee. The DPS was also the Chair for the Hawaii State Coalition Against Domestic Violence for over 10 years.

Program staff are sensitive to the dynamics of domestic violence and the importance of safety and protection of those who are experiencing abuse. The large number of years of service experience with offenders and victims/survivors of domestic violence and dedication to the goals of the Program ensure a team that has vast knowledge. They have also demonstrated the ability to be flexible and adaptable to the various changing needs of offenders and victims/survivors in their respective communities on Oahu. Staff members come from diverse and unique backgrounds and experience both culturally and socio-economically, which allows them to share during informal and formal meetings with each other and to learn about different cultures and approaches for the victims/survivors and offenders of domestic violence. The DOV Program staff are very familiar and knowledgeable about the local dialects and unique qualities of each community, and experienced in working with a variety of people from different ethnic and language backgrounds. These skills are reinforced through training they receive. This helps facilitate the engagement process and support for the clients.

The DOV Program team's experience in working with those who have committed acts of domestic violence is demonstrated through the ability to show empathy and understanding in a non-judgmental way yet hold the offender accountable. The staff are able to recognize when offenders use defense mechanisms and manipulation and are still able to engage them in developing realistic goals and being open to change. The staff help the offenders recognize the power and control tactics that they have used and to recognize triggers and how to de-escalate.

Each employee is competent in verbal and written communication. Successful communication is critical to Program operations. Staff members have strong interpersonal skills and have the ability to support and inspire clients to participate in the services and seek out support. They have a keen sensitivity and awareness of the clients and their cultures. Skilled at teamwork, they work in a professional manner together and perform well individually. They each possess strong analytical skills and

can assess a situation quickly and with objectivity. They are able to gather information and identify key issues that need to be addressed with skillful and professional competence. Strong problem-solving skills are key to their success with their clients. Workers are taught to have good planning and organizational skills. Their ability to design, plan, organize, and implement their work in specific timeframes are skills they've continued to develop to meet the Program's goals.

CFS has over 100 years of experience in providing quality services to the people of Hawaii. CFS currently provides services at 35 locations statewide, operating 37 programs in three major areas including: early childhood and children's services, behavioral health services, and adult and family services. The spectrum of CFS programs builds on the strengths of individuals and families to address the many human challenges. The organization's comprehensive array of services has allowed CFS to develop many areas of expertise. Cross-training and consultation strengthens all programs.

### **Projects and Contracts Pertinent to the Proposed Services**

CFS' extensive experience working with perpetrators and victims of domestic violence over the past 29 years has helped to develop substantial skills and abilities to provide domestic violence services. Following is a comprehensive list of verifiable experience with projects and contracts pertinent to the proposed services. It demonstrates CFS' breadth, experience and institutional knowledge of issues impacting those individuals and families who experience domestic violence.

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
<p>Domestic Abuse Shelter and Support Services – Leeward, Honolulu, West Hawaii and East Hawaii</p> <p>Department of Human Services            John Walters            810 Richards Street, Suite 400            Honolulu, HI 96813            jwalters@dhs.hawaii.gov            (808) 586-5675</p> <p>CFS operates four domestic violence shelters and 24-hour crisis hotlines for victims of domestic violence and their children.</p>	<p>10/1/2010-9/30/2011            7/1/2003-9/30/2010</p> <p>10/1/2010-9/30/2011            7/1/2003-9/30/2010</p> <p>10/1/2010-9/30/2011            7/1/2003-9/30/2010</p>	<p>Oahu  <i>Contract No. Pending</i>            DHS-04-POS-1850</p> <p>Hilo  <i>Contract No. Pending</i>            DHS-04-POS-1900</p> <p>Kona  <i>Contract No. Pending</i>            DHS-04-POS-1844</p>	<p><b><u>Oahu</u></b></p> <ul style="list-style-type: none"> <li>• 81% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>• 69% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> <li>• 96% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b><u>Hilo</u></b></p> <ul style="list-style-type: none"> <li>• 100% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>• 71% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> <li>• 83% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b><u>Kona</u></b></p> <ul style="list-style-type: none"> <li>• 99% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>• 47% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> <li>• 99% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul>

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
<p>U.S. Department of Housing and Urban Development Supportive Housing Program – Oahu</p> <p>Rebecca Borja                      500 Ala Moana Blvd., Suite 3A                      Honolulu, HI 96813-4918                      rebecca.c.borja@hud.gov                      (808) 522-8180 x265</p> <p>Supportive services and counseling are provided to the Domestic Abuse Shelters and Transitional Apartment Program on Oahu.</p>	<p>10/01/2010-09/30/2011                      10/01/2009-09/30/2010                      10/01/2008-09/30/2009                      10/01/2007-09/30/2008                      10/01/2006-09/30/2007                      10/01/2005-09/30/2006</p>	<p>HI0020B9C010802                      HI0020B9C10801                      HI08B70-1012                      HI08B601-006                      HI0813B601006                      HI108B401007</p>	<p><b><u>Domestic Abuse Shelters</u></b></p> <ul style="list-style-type: none"> <li>81% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>69% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> <li>96% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b><u>Transitional Apartments Program</u></b></p> <ul style="list-style-type: none"> <li>92% of the clients have reduced their level of stress. (Target: 70%)</li> <li>92% of the clients have increased self-sufficiency. (Target: 70%)</li> <li>100% of the clients have completed/have a Safety Plan for themselves and their children. (Target: 90%)</li> </ul>
<p>Department of Human Services Benefit, Employment, Support Services Division                      Domestic Violence Advocacy                      Oahu, Hilo, Kona &amp; Maui</p> <p>Ginet Hayes                      820 Mililani Street, Suite 606                      Honolulu, HI 96813                      ghayes@dhs.hawaii.gov                      (808) 586-7088                      (808) 586-5744 fax</p> <p>Oahu, Hilo, Kona and Maui provide</p>	<p>7/1/2010-6/30/2011                      7/1/2009-6/30/2010                      7/1/2007-6/30/2009                      7/1/2004-6/30/2007</p>	<p>DHS-08-BESSD-5048                      DHS-08-BESSD-5048                      DHS-08 BESSD-5048                      DHS-05-BESSD-2069</p>	<p><b><u>Oahu</u></b></p> <ul style="list-style-type: none"> <li>27% of the clients have completed their goals within 6 months and moved into First to Work (FTW) or obtained employment. (Target: 10%)</li> <li>83% of the clients have completed their goals within the 12-month period and move into FTW or obtained employment. (Target: 75%)</li> <li>36% of the clients were able to simultaneously engage in employment activities and domestic violence counseling/services. (Target: 60%)</li> </ul> <p><b><u>Hilo</u></b></p> <ul style="list-style-type: none"> <li>32% of the clients have completed their goals within 6 months and moved into FTW or obtained employment. (Target: 10%)</li> </ul>

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
<p>support, advocacy, and counseling for those who are receiving Temporary Assistance to Needy Families (TANF) and Temporary Assistance to Other Needy Families (TAONF) to overcome barriers to self- sufficiency.</p>			<ul style="list-style-type: none"> <li>• 77% of the clients have completed their goals within the 12-month period and move into FTW or obtained employment. (Target: 75%)</li> <li>• 53% of the clients were able to simultaneously engage in employment activities and domestic violence counseling/services. (Target: 60%)</li> </ul> <p><b><u>Kona</u></b></p> <ul style="list-style-type: none"> <li>• 32% of the clients have completed their goals within 6 months and moved into FTW or obtained employment. (Target: 10%)</li> <li>• 100% of the clients have completed their goals within the 12-month period and move into FTW or obtained employment. (Target: 75%)</li> <li>• 89% of the clients were able to simultaneously engage in employment activities and domestic violence counseling/services. (Target: 60%)</li> </ul> <p><b><u>Maui</u></b></p> <ul style="list-style-type: none"> <li>• 47% of the clients have completed their goals within 6 months and moved into FTW or obtained employment. (Target: 10%)</li> <li>• 85% of the clients have completed their goals within the 12-month period and move into FTW or obtained employment. (Target: 75%)</li> <li>• 83% of the clients were able to simultaneously engage in employment activities and domestic violence counseling/services. (Target: 60%)</li> </ul>

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
<p>Department of Attorney General                      Victims of Crime Act (VAWA)                      Oahu &amp; Maui</p> <p>Kathy Mitchell                      235 South Beretania St., Suite 401                      Honolulu, HI 96813                      kathleen.m.mitchell@hawaii.gov                      (808) 586-1389</p> <p>Oahu offers support and counseling to the Transitional Housing component of the House of Hope.</p> <p>Maui offers assistance in filing Temporary Restraining Orders.</p>	<p>10/01/10-11/30/10                      7/1/2009-6/30/2010                      7/1/2008-6/30/2009                      7/1/2007-6/30/2008                      7/1/2006-6/30/2007                      7/1/2005-6/30/2006</p>	<p>06-WF-22                      07-WF-16                      07-WF-14                      06-WF-08                      05-WF-11                      03-WF-10</p>	<p><b><u>Oahu</u></b></p> <ul style="list-style-type: none"> <li>92% of the clients have reduced their level of stress. (Target: 70%)</li> <li>92% of the clients have increased self-sufficiency. (Target: 70%)</li> <li>100% of the clients have completed/have a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b><u>Maui</u></b></p> <ul style="list-style-type: none"> <li>79% of victims participating in support services identified at least 3 personal safety skills. (Target: 80%)</li> </ul>
<p>Housing and Community                      Development Corporation of Hawaii                      Emergency Shelter Grant Program                      East and West Hawaii</p> <p>Judy Ishida                      1002 North School Street                      PO Box 17907                      Honolulu, HI 96817                      judy.y.ishida@hawaii.gov                      (808) 832-5930</p> <p>Emergency Shelter Grant Program – East and West Hawaii supports operational cost (utilities, repairs and maintenance).</p>	<p>10/1/2008-9/30/2009                      10/1/2007-9/30/2008                      10/1/2006-9/30/2007                      10/1/2005-9/30/2006</p>	<p>S-08-DC-15-0001                      S-07-DC-15-0001                      S-06-DC-15-0001                      S-05-DC-15-0001</p>	<p><b><u>Hilo</u></b></p> <ul style="list-style-type: none"> <li>100% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>71% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> <li>83% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b><u>Kona</u></b></p> <ul style="list-style-type: none"> <li>99% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>47% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> </ul>

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
<p>City and County of Honolulu            Department of Community Services            Emergency Shelter Grant Program</p> <p>Gabe Naeole            715 South King Street, Suite 311            Honolulu, HI 96813            gnaeole@honoluu.gov            (808) 768-7715            (808) 768-7793 fax</p> <p>Supports operational cost (utilities, repairs and maintenance).</p>	<p>4/1/2009-5/1/2010            4/1/2007-5/1/2008            4/1/2005-4/30/2007</p>	<p>CT-DCS-0900038            F61637            F33205</p>	<ul style="list-style-type: none"> <li>99% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> <li>81% of the clients have an increase in knowledge of community resources. (Target: 75%)</li> <li>69% of single adults and families have moved from the shelter to a non-abusive home environment. (Target: 60%)</li> <li>96% of the clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul>
<p>State of Hawaii Judiciary            Family Court, First Circuit,            Interventions</p> <p>Maureen Kiehm            PO Box 3498            Honolulu, HI 96811-3498            maureen.n.kiehm@courts.state.hi.us            (808) 539-4406</p> <p>Developing Options to Violence – Oahu provides Domestic Violence Intervention Services for batterers, teenagers and victim support groups.</p>	<p>7/1/2007-6/30/2012            7/1/2003-6/30/2007</p>	<p>FCJ07-030            FCJ04-062</p>	<ul style="list-style-type: none"> <li>77% of the clients completing batterer intervention services demonstrated the knowledge, skill and attitudes necessary for maintenance of non-abusive behavior, which includes learning non-violent conflict resolution and non-aggressive communication. (Target: 60%)</li> <li>77% of the clients completing batterer intervention services significantly increased their knowledge of the effects of domestic violence on children. (Target: 100%)</li> <li>84% of victims participating in support services identified at least 3 personal safety skills. (Target: 80%)</li> </ul>



Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
<p>State of Hawaii Judiciary Family Court, Second Circuit</p> <p>Kim Cuadro 2145 Main Street, Suite 206 Wailuku, HI 96793-1679 kim.s.cuadro@courts.state.hi.us (808) 244-2779</p> <p>Developing Options to Violence – Maui provides Domestic Violence Intervention Services for batterers, teenagers and victim support groups.</p>	<p>7/1/2007-02/28/2010 7/1/2003-6/30/2007</p>	<p>FC J07-030 FC J04-035</p>	<ul style="list-style-type: none"> <li>• 89% of the clients completing batterer intervention services demonstrated the knowledge, skill and attitudes necessary for maintenance of non-abusive behavior, which includes learning non-violent conflict resolution and non-aggressive communication. (Target: 60%)</li> <li>• 100% of the clients completing batterer intervention services significantly increased their knowledge of the effects of domestic violence on children. (Target: 100%)</li> <li>• 79% of victims participating in support services identified at least 3 personal safety skills. (Target: 80%)</li> </ul>
<p>State of Hawaii Judiciary Family Court, Third Circuit</p> <p>Zachary Higa Third Circuit Court 1045 Kilauea Avenue Hilo, HI 96720 Zachary.I.Higa@courts.state.hi.us (808) 961-7611</p> <p>Alternatives to Violence – Hilo and Kona provide Domestic Violence Intervention Services for batterers, teenagers and victim support groups.</p>	<p>7/1/1986-6/30/2011</p>	<p>J07-030 (Hilo and Kona)</p>	<p><b>Hilo</b></p> <ul style="list-style-type: none"> <li>• 100% of the clients completing batterer intervention services demonstrated the knowledge, skill and attitudes necessary for maintenance of non-abusive behavior, which includes learning non-violent conflict resolution and non-aggressive communication. (Target: 60%)</li> <li>• 100% of the clients completing batterer intervention services significantly increased their knowledge of the effects of domestic violence on children. (Target: 100%)</li> <li>• 86% of the child and adolescent witnesses demonstrated knowledge of basic feelings such as anger, sadness, confusion, and happiness. (Target: 80%)</li> <li>• 88% of Victims participating in support services identified at least 3 personal safety skills. (Target: 80%)</li> </ul>

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
			<p><b><u>Kona</u></b></p> <ul style="list-style-type: none"> <li>• 100% of the clients completing batterer intervention services demonstrated the knowledge, skill and attitudes necessary for maintenance of non-abusive behavior, which includes learning non-violent conflict resolution and non-aggressive communication. (Target: 60%)</li> <li>• 100% of the clients completing batterer intervention services significantly increased their knowledge of the effects of domestic violence on children. (Target: 100%)</li> <li>• 92% of victims participating in support services identified at least 3 personal safety skills. (Target: 80%)</li> </ul>
<p>Office on Violence Against Women U.S. Department of Justice</p> <p>Kristin Weschler 800 K Street NW, Suite 920 Washington, DC 20001 Kristin.Weschler@usdoj.gov (202) 305-2713</p> <p>Oahu and Hilo - Provides transitional housing for victims of domestic violence.</p>	<p>7/1/2005-6/30/2008</p> <p>7/1/2009-6/30/2012</p> <p>7/1/2008-6/30/2011</p>	<p>2005-WF-11</p> <p>Oahu 2009-EH-S6-0054</p> <p>Hilo 2008-WH-AX-0084</p>	<p><b><u>Oahu</u></b></p> <ul style="list-style-type: none"> <li>• 92% of the clients reduced their level of stress. (Target: 70%)</li> <li>• 92% of the clients increased self-sufficiency. (Target: 70%)</li> <li>• 100% of the clients completed/have a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b><u>Hilo</u></b></p> <ul style="list-style-type: none"> <li>• 100% of the clients reduced their level of stress. (Target: 70%)</li> <li>• 100% of the clients increased self-sufficiency. (Target: 70%)</li> <li>• 100% of the clients completed/have a Safety Plan for themselves and their children. (Target: 90%)</li> </ul>

Contracting Agency, Contact, Address, Email/Phone Description of Contract	Service Period	Contract Reference	Performance Outcomes
State of Hawaii Department of the Attorney General Crime Prevention and Justice Assistance Division  Helena Manzano 235 S Beretania Street, Suite 401 Honolulu, Hawaii 96813 (808) 586-1164  Victim services for adult female victims of domestic violence, dating violence, sexual assault, and stalking at the transitional housing.	5/1/2010-3/31/2011          5/1/2010-3/31/2011	House of Hope (Leeward Oahu) 09-EF-03   Victim Support Services (Big Island) 09-EF-02	Same as above.

## **B. Facilities**

### **CFS is Accessible Statewide**

CFS maintains facilities throughout the State which are equipped and appropriately furnished to deliver the full range of services.

Headquarters: The corporate office is located at 91-1841 Fort Weaver Road, Ewa Beach, Hawaii. CFS maintains 35 sites throughout the State, on the islands of Hawaii, Kauai, Maui, Molokai, and Oahu.

ADA Accessibility: CFS sites meet accessibility requirements of the Americans with Disabilities Act (ADA).

Communication Accessibility: CFS maintains a Wide Area Network (WAN) to provide data, resource sharing and connectivity between its' seven main offices and 27 satellite offices on five islands using frame relay technology. Home based and mobile staff are connected either through remote access (RAS) or web-based access (OWA). Staff members are issued desktop or laptop computers equipped with current, up-to-date technology. The application systems available to staff include a full suite of productivity tools, enterprise email, a windows-based accounting system, an applicant tracking system, a statewide correspondence tracking and records management system, a human resources/personnel system, a time and attendance system, and a client tracking system.

The organization is well equipped and resources are shared throughout. Resources include:

- Video monitors, DVD players and VCRs for showing educational tapes.
- Portable audio and video/DVD recorders for use in clients' homes for the purpose of showing educational material and to record family interactions for playback to clients. This helps them observe their interpersonal behavioral patterns.
- An extensive library of print and electronic material covering topics such as parenting skills, self-esteem, family systems, and family preservation.
- Videoconferencing capability is available at the Vineyard and Ewa sites on Oahu and at each neighbor island office. This facilitates communication between sites and creates more opportunities for training.

### **The Developing Options to Violence Program Facility**

The DOV Program's main office is located at 200 North Vineyard Boulevard. The site consists of two office areas for staff, including private offices, and three group/meeting rooms. There are separate waiting areas for offenders and victims/survivors. This site meets the requirements of the Americans with Disabilities Act (ADA) and is easily accessible by both public and private transportation. There is parking for the clients on

the upper parking deck as well as free parking along Vineyard Boulevard. Groups are held at other locations, as space is available, offering multiple locations and meeting times for easier access. Currently groups are offered in Kaneohe, Waipahu and at the Vineyard location. Administrative office hours are Monday through Thursday, 8:30 a.m. to 6:00 p.m., and 8:30 a.m. to 12:00 noon on Fridays. Services are available to clients at various times throughout the week including evenings. Groups are held during the morning, afternoon and evening to offer the clients flexibility depending on their work schedules or other obligations. For after-hour emergencies, clients are instructed to call the Suicide and Crisis Line or the 24-hour Domestic Abuse hotline.

Other CFS programs are located at the Vineyard location. This co-location has provided the DOV Program staff with information and access to other CFS programs that are of benefit to the DOV Program clients.

During regular business hours, there is at least one person on the premises who is certified in First Aid and CPR. All staff are trained in both First Aid and CPR to ensure compliance.

## **V. PERSONNEL: PROJECT ORGANIZATION AND STAFFING**

### **A. Proposed Staffing, Staff Qualifications, Supervision and Training**

CFS proposes a service team of highly qualified and experienced staff to provide quality Domestic Violence Services on an ongoing basis. Approximately seventy-five percent of the service team staff members have a Master's Degree or higher in counseling psychology, social work, or other related fields. This enables the Program to work with clients with complex needs.

Staff members working with both offenders and victims/survivors are carefully recruited and selected based on how well they are aligned philosophically to the Program and organization mission, vision, and goals. Selection is also based on their ability to effectively communicate with others; set appropriate boundaries/limits; and model positive pro-social coping skills. Once hired, staff are trained and supervised on a regular basis to ensure the ongoing provision of quality services to clients and continuous adherence to the Hawaii Batterers Intervention Program Standards.

The DOV Program service team is made up of a combination of full and part-time staff which has several benefits. This allows for a team that has diversity, commitment, and flexibility. Many of the part-time and hourly staff have other work experience including mental health, substance abuse, corrections, cultural diversity and working with at-risk youth. Program oversight, development, and success are maintained through teamwork and cooperation between the Program Director I and Program Supervisor I with support from the Director of Program Services and the Clinical Coordinator.

CFS is proposing additional staffing for the DOV Program. These positions were added to provide a number of improvements to the program: to enhance services to victim/survivors and children; and be available for crisis calls and to quickly schedule an appointment and complete the assessment within 48 hours. The Program Supervisor I will be involved with the planning and implementation of the services that DOV Program will offer to the Family Justice Center. The Program will expand to include one full-time Domestic Violence Specialist who will be assigned to work with the Probation Officers monitoring the HOPE probationers and those assessed as high-risk.

A centralized tracking system is operated and maintained by the Program's administrative support staff. These support staff members are responsible for promptly scheduling client appointments, tracking client attendance and participation in services, and providing information regarding a client's current status in the Program to Probation Officers on an ongoing basis. The full-time staff also have access to the system so they can have information available immediately and can also provide information to Probation Officers in a timely manner and can discuss case status.

The following chart shows the proposed staffing positions and the full-time equivalency (FTE), client to staff ratio and caseload capacity for each position, and justification for the FTE.

Job Title / FTE / Client/Staff Ratio and Caseload Capacity	Justification
Director of Program Services 0.02 FTE Caseload: N/A May provide back-up support as needed. Supervises the Program Director I at least bi-monthly, with frequent check-ins as needed. Provides support and overall oversight for the program, with back-up coverage as needed, 24/7.	Under the direct supervision of the Vice President of Programs. Primary oversight responsibility for services and statewide programs. Member of the Senior Leadership Team, being a part of the overall management team. Implements and develops performance-based measurement. Exercises all normal supervisory functions for their direct reports. Provides input to the VP of Programs on programmatic issues. Attends CFS Board of Directors meetings. May be selected to participate in Committees and Task Forces throughout CFS, as determined by the VP of Programs. Provides general supervision of program/department (>25 employees) usually through lower level supervisor. Has responsibility for selecting, training, and disciplining employees. Supervises Program Director I.
Clinical Coordinator 0.02 FTE Caseload: N/A Quality Assurance checks with program and staff range from once a month, quarterly to every six months.	Under supervision of the Director of Quality Assurance and Training the Clinical Coordinator is responsible for assisting in the planning and implementation of the organization's accreditation activities. Assists the Program staff in quality improvement endeavors and implementing program contract requirements. Reviews program charts/manuals/documents to evaluate adherence to PQI, internal and external requirements, safety, and Best Practices.
Program Director I 1.00 FTE	Provides direct oversight for the program and is responsible for implementing and monitoring program goals and objectives, monitors program expenditures, prepares quarterly reports, supervises staff. Primarily

<b>Job Title / FTE / Client/Staff Ratio and Caseload Capacity</b>	<b>Justification</b>
<p>Program Director I will be responsible for coverage and back up.</p>	<p>oversees the Batterer Intervention Program (BIP) service delivery.</p>
<p>Program Supervisor I</p> <p>1.00 FTE</p> <p>Program Supervisor I will be responsible for coverage and back up.</p>	<p>Plans, organizes, coordinates, monitors, and evaluates services. Day to day operations, referrals and assessments, participates with the Family Justice Center Implementation and oversees victim/survivor and children's services.</p>
<p>Domestic Violence Specialist I and II</p> <p>2.00 FTE</p> <p>Each full-time (1.0 FTE) position provides six to seven intakes per week and three to four groups weekly. Each group has approximately 12 to 14 clients.</p>	<p>Conducts assessments, service plans, and discharge planning. Facilitates groups. Responsible for conducting ongoing victim safety checks and monitoring. Documents client attendance and progress. Conducts exit interviews and follow-up.</p>
<p>Domestic Violence Specialist II</p> <p>2.05 FTE</p> <p>Each full-time (1.0 FTE) position provides six to seven intakes per week and three to four groups weekly. Each group has approximately 12 to 14 clients.</p>	<p>Conducts assessments, service plans, and discharge planning. Facilitates groups. Responsible for conducting ongoing victim safety checks and monitoring. Documents client attendance and progress. Conducts exit interviews and follow-up.</p>
<p>Group Facilitators II, IIA, III, and IV (7 to 9 hourly staff)</p> <p>1.42 FTE</p> <p>Each group has approximately 12 to 14 clients. The facilitators are hourly employees and some facilitate one group per week and some up to five groups per week.</p>	<p>Provide weekly group facilitation with limited individual services for clients when applicable. Responsible for tracking client attendance, progress and case notes, quarterly reports, exit interviews and discharge paperwork.</p>
<p>Program Secretary</p> <p>1.00 FTE</p> <p>N/A</p>	<p>Provides administrative support in scheduling, tracking of client attendance and reporting, greets clients coming in to see staff for appointments.</p>
<p>Administrative Secretary</p> <p>0.30 FTE</p> <p>N/A</p>	<p>Provides administrative and clerical back up support to program. Provides coordination between support staff and the program. Schedules intake assessments, and updates client attendance. Oversees the maintenance of client records and facilitates communication with internal and external sources.</p>
<p>Interpreter (5 to 6 hourly staff)</p> <p>0.24 FTE (3 staff at 0.08)</p> <p>On call as needed. Assist with language interpretation as needed.</p>	<p>Provides direct written and spoken interpretation and translation services for clients in the program who have been identified as having English as a Second Language as a barrier.</p>

The staff are skilled at being flexible, adaptable and can manage multiple assignments and tasks. Daily, they must set priorities and adapt to changing conditions and work assignments. They are able to be self-motivated and also encourage each other on a regular basis. Of equal importance to these skills, the DOV Program staff offer strong professional values of honesty, integrity, dedication, dependability, reliability, loyalty, positivity, and a strong work ethic. Highlighted below are the DOV Program staff members and their skills, abilities, and knowledge.

**Staff Qualifications**

The following chart shows the position, current staff name, minimum qualifications, education and experience for the position, and qualifications, education and experience of current staff for this proposal. Job descriptions for each position are available upon request.

<b>Job Title Incumbent Name</b>	<b>Minimum Qualifications, Education and Experience</b>	<b>Incumbent Qualifications, Education and Experience</b>
Director of Program Services Angie Doi	Master's Degree in Human Services and six years post Master's experience in supervision and administration with strong leadership skills.	Master's Degree in Counseling Psychology and 12 years post Master's experience in management, supervision and administration. <b>Exceeds qualifications.</b>
Clinical Coordinator Susan Richard	Master's Degree in Human Services, two years experience in human services and one year supervisory experience.	B.A. in Public Administration. Over four years experience working in the Quality Assurance and Training Department. Five years supervisory experience. <b>Internal waiver.</b>
Program Director I Vacant	Master's Degree in Human Services related field and 3 years post Master's experience in the human service field, including 2 years of administration and supervision. Experience in dealing with a variety of areas including but not limited to domestic violence, child abuse and neglect, and substance abuse. Willing to work with families that present these safety issues.	Vacant
Program Supervisor I Vacant	Four-Year College Degree from a school accredited by a recognized accrediting agency and 2-4 years experience with domestic violence including 1 year of supervisory experience. Experience in dealing with a variety of areas including but not limited to domestic	Vacant



Job Title Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
	violence, child abuse and neglect, and substance abuse. Willing to work with families that present these issues.	
Domestic Violence Specialist I or II (three and a quarter positions)  Gina Sanico  Coran Kekipi  Jacy Campbell	Four-Year College Degree from a school accredited by a recognized accrediting agency and 2-4 years experience with domestic violence, substance abuse, and child abuse and neglect. Willing to work with families that present these safety issues.	Gina Sanico joined the DOV Program team in 1997. She has an Associate's Degree in Human Services and experience in domestic violence and substance abuse. <b>Exceeds qualifications.</b>  Coran Kekipi joined the DOV Program in 2008. She has over 2 years of experience in group work, substance abuse and sex abuse treatment. <b>Meets qualifications.</b>  Jacy Campbell joined the DOV Program in August of 2010. She has a Master's Degree in Marriage and Family Therapy and is also a Certified Substance Abuse Counselor (CSAC). She has over two years of work experience in mental health and substance abuse. <b>Exceeds qualifications.</b>
Domestic Violence Specialist II (2.05 FTE)	Four-Year College Degree from a school accredited by a recognized accrediting agency and 2-4 years experience with domestic violence, substance abuse, and child abuse and neglect. Willing to work with families that present these safety issues.	Vacant
Group Facilitators II, IIA, III, and IV (7 to 9 hourly staff)  Chris Leong  Carl Jones  Shawn Manini  Justine Lee  Jamie Roman  Garrett Takahashi  Megan Ichiryu  Lynda Vilwok-Biaquis	Bachelor's Degree in human services or related field with domestic violence experience. Experience can be substituted in lieu of degree. Positions levels are for Bachelor's Degree, Master's Degree and Doctoral Degrees.	Currently, one of our staff has a Doctoral Degree, five staff have a Master's Degree, and two staff have a Bachelor's Degree.  Chris Leong has a PhD in Cross Cultural Psychology. He has been employed with the DOV Program since 1993. <b>Exceeds qualifications.</b>  Carl Jones has an MSW and has been employed with the DOV Program since 1995. He also has experience working with family advocacy for the military. <b>Exceeds qualifications.</b>  Shawn Manini has an MSCP in Criminal Justice and has been employed with the DOV Program since 1997. He has experience working in probation and corrections. <b>Exceeds qualifications.</b>  Justine Lee has a BA in Human Services and has been employed with the DOV Program since 1999. She has experience in working with the

Job Title Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
		<p>courts and the Department of Education. <b>Exceeds qualifications.</b></p> <p>Jamie Roman has an MSW and has been employed with the DOV Program since 2002. She has experience working in mental health and sex assault. <b>Exceeds qualifications.</b></p> <p>Garret Takahashi has a BA in Sociology and has been employed with the DOV Program since 2002. He has experience working in probation, corrections and mental health. <b>Exceeds qualifications.</b></p> <p>Megan Ichiryu has an MSW and has been employed with the DOV Program since 2003. She has experience working in substance abuse and mental health. <b>Exceeds qualifications.</b></p> <p>Lynda Vilwok-Biaquis has a Master of Science Degree in Counseling Psychology and has been employed with the DOV Program since 2004. She has experience working with youth, substance abuse and mental health. <b>Exceeds qualifications.</b></p>
Administrative Secretary Lacie Kenolio	High School Diploma with 2 years experience	Lacie Kenolio has a High School Diploma and has been with CFS since 2004. <b>Exceeds qualifications.</b>
Program Secretary Edith Bustamente	High School Diploma with 2 years experience	Edith Bustamente has a High School Diploma and has been with the DOV Program since 2006. <b>Exceeds qualifications.</b>
Interpreter (5 to 6 hourly staff)  Allan Miu  Yoon Hoon  Lyma Costa	High School Diploma with 6 months experience. Speaks fluently in a minimum of two languages including English.	<p>Allan Miu has been with the DOV Program since 2000. He holds a Master's Degree and is fluent in Mandarin and Cantonese. <b>Exceeds qualifications.</b></p> <p>Yoon Hoon has been with the DOV Program since 1998 and holds an Associate's Degree. He is fluent in Korean. <b>Exceeds qualifications.</b></p> <p>Lyma has been with the DOV Program since August 2010. She is fluent in Tagalog and Ilocano. <b>Exceeds qualifications.</b></p>

### Supervision and Training

#### Focus on Supervision Organization Wide

CFS has well established procedures and expectations for supervision. The process of supervision holds individual staff accountable for appropriate performance of their assigned duties and responsibilities, ensures the quality of client services, and provides

a mechanism for professional development. One of the major goals of the supervisory process is to provide direct line staff with the knowledge and support to remove barriers to accessing services and achieving outcomes with their cases.

The supervisory ratios do not exceed one direct service supervisor to seven full-time direct service staff. Supervision will occur one to two times per month depending on the number of groups provided and number of hours staff members work. The immediate supervisor is responsible for ongoing supervision of staff. Supervision may occur more frequently for staff with less experience. The Program Director I is responsible for supervising the staff that work with the offenders. The Program Supervisor I is responsible for supervising the staff that work with the victims/survivors and children's services. The Program Director I and Program Supervisor I are responsible for training, scheduling supervision and adherence to the Hawaii Batterers Intervention Program Standards.

The staff team members work with the Program Director I and Program Supervisor I to support each other in co-facilitation and professional development. The Program Director I and Program Supervisor I are responsible for documenting trainings and supervision. Less experienced staff and interns will receive training, mentoring, and be offered opportunities to work with various other staff to learn different styles and techniques in the area of group counseling. Quarterly staff meetings are scheduled for training, performance quality indicator review, peer discussion and any program issues that need to be discussed.

The availability of the supervisors is important for after hours when specific cases present with issues that may be high-risk due to concerns of possible reabuse, substance abuse, mental health problems, as well as suicidal or homicidal issues that need immediate attention.

Supervisory sessions may be provided in individual or group format as defined by contract, accreditation standards and/or professional practice. All supervisory sessions are documented in an individual supervisory file, maintained by the supervisor. The supervision notes document the session dates, issues discussed, and related action plans. During the supervisory session, the supervisor reviews case record documentation to ensure that the documentation:

- Complies with the organization and program policies and procedures.
- Reflects implementation of direct practice principles within the scope of the program philosophy and/or method of service/treatment.

CFS provides client-centered supervision which enhances the quality of client services and provides a mechanism for professional development. Client-centered supervision includes the following:

- Evaluation of the client's progress toward achieving his/her service/treatment goals.
- Review of the appropriateness of the service/treatment plan.
- Review of case record documentation.

The Program has written position descriptions and procedures for recruitment, selection, and training for qualified staff that help build dynamic and well-rounded teams to work with children, individuals and families. Procedures for clear communication and lines of authority are established along with guidelines and clear statements of responsibility for job functioning. Job performance/evaluation reviews are conducted annually. The reviews specify areas of strength and needs for improvement for individual staff. Individual Professional Development Plans maintain staff commitment to growth and skill improvement. Supervision procedures have been developed to maintain quality delivery of services and provide for systematic ongoing monitoring of staff.

### **Training – Enhancing Skills and Knowledge**

CFS is committed to increasing staff knowledge and skill development through its training program. In a survey, CFS employees identified the ability to learn and develop their skills as an important reason they work for CFS. The organization has invested considerable resources in training and the development of training modules, as well as videoconferencing capacity. This enables CFS staff on all islands to receive standardized information.

To promote excellence in supervision, CFS provides extensive supervisory training. New hires receive a supervisory orientation that includes organization overview and structure, staff management, financial management, program development, risk management, and a communication overview. Supervisors are provided with the procedures and tools for each of these processes. Within the first year of employment, supervisors attend advanced sessions focusing on human resources, fiscal, and administration. In addition, CFS requires supervisors to attend a clinical supervision training module. This module covers topics such as assessing staff strengths, defining supervisory styles, core components of supervision, and understanding the dynamics of change.

CFS has developed internal training modules for direct service staff and supervisors on Child Abuse and Neglect, Substance Abuse, Engaging Challenging Families, Positive Behavior Supports, and Medication Management. In addition to these training modules, the CFS Quality Assurance and Training Department developed PowerPoint trainings on Case Management, Client Advocacy, Reportable Criminal Behavior, Stress Management, Case Documentation, Maintaining Professional Boundaries, Therapeutic Rapport, Communication Barriers, Family Violence, Emergency Response Practice and Safety in the Field, and Community Based Practice – Psychosocial Approach. These trainings are available and accessible to all staff via the CFS computer network.

CFS' Training Committee has established requirements for orientation and ongoing training at an organization wide level. These requirements include those topics that are mandated for the organization to meet accreditation standards. In addition, each program has identified specific requirements for orientation and training that meet contract requirements and accreditation standards. All CFS staff receive announcements of upcoming training opportunities, both internal and external, through the Quality Assurance and Training Department.

**Orientation to the Program and the Organization**

CFS provides orientation for both the Program and the organization. The DOV Program will provide orientation to the Program within 60 days of an individual's employment. In addition, CFS requires all new hires to attend an organization wide orientation within 60 days of employment. The lists below highlight some of the topics covered in these orientations.

<b>Organization Orientation – within 60 days of employment</b>
• Mission, vision and values of CFS
• Organization structure and overview, including communication plan and strategic planning
• Performance and Quality Improvement process
• Safety program and purpose, including worker's compensation overview
• Information technology, including computer network access and usage
• Overview of behavior management policy, State and Federal laws on confidentiality including HIPAA
• Overview of philosophy of person and family centered services, cultural competency, client participation in planning and delivery of services, strengths based client assessment and services, collaboration with other agencies/partners
• Client rights and responsibilities, client grievances and complaints process and client satisfaction

<b>Program Specific Orientation – within 60 days of employment</b>
• Review of job description
• Review of program training plan
• Program service hours and work schedule, phone contact list, emergency contact form
• Review of program and ethical standards
• Review of documentation requirements, including client-related forms, client files, service provision records, quarterly report forms, and timelines for submission of reports
• Review of referral, referral process and resources
• Review of administrative policies and procedures, confidentiality and HIPAA
• Review of program specific policies and procedures, COA and contract requirements
• Review of assessing risk and safety of persons served and mandated reporting
• Techniques for handling emergencies
• Orientation to the establishment of rapport and responsive behaviors
• Orientation of the collaboration with other disciplines and community services in meeting the needs of the persons served
• Review of appropriate coordination with mental health, law enforcement, and other professionals

<b>Program Specific Orientation – within 60 days of employment</b>
• Orientation of the basic health and medical needs of the service population
• Orientation on the needs of families in crisis, including needs of victims of violence, child abuse and neglect, and family members
• Orientation on the procedures for working with foreign language speakers and persons with communication impairments and the use of interpreters
• Orientation on public assistance programs
• Review of personal and client safety issues
• Review of supervision procedure and schedule, program and department staff meetings, and training plan
• Orientation on email, CFS network, shared computer drives, timekeeping system, and databases
• Orientation on Hawaii Batterers Intervention Program Standards

By the end of the first quarter of employment, employees receive training in:

- Cultural competency/cultural approaches with various populations
- Personal safety and appropriate behavior management techniques
- Awareness of special needs populations
- HIPAA Policies and Procedures

### **Ongoing Training**

Once an employee completes orientation, ongoing training opportunities are provided. An individualized training plan is developed between the supervisor and staff. The plan identifies areas that need further development. The supervisor tracks the staff development as an integral part of regular supervision.

Training topics for ongoing training include but are not limited to:

<b>Training Focus</b>	<b>Trainings</b>
Program Philosophy/ Service Delivery Techniques	<ul style="list-style-type: none"> <li>• Cognitive Behavioral Theory and Techniques</li> <li>• Trauma Informed Care</li> <li>• Power and Control</li> <li>• Cultural, societal, and gender issues related to domestic violence</li> <li>• Hawaii Batterers Intervention Program Standards</li> <li>• Motivational Interviewing</li> <li>• Dialectical Behavior Therapy (DBT) for pilot group</li> </ul>
Group Training	<ul style="list-style-type: none"> <li>• Dynamics of groups</li> <li>• Special consideration in working with domestic violence</li> <li>• Co-facilitation</li> </ul>

<b>Training Focus</b>	<b>Trainings</b>
Domestic Violence	<ul style="list-style-type: none"> <li>• Overview of domestic violence</li> <li>• Dynamics of power and control</li> <li>• Impact of violence on victims/survivors</li> <li>• Effects on children and other household members</li> <li>• Cultural and gender issues</li> <li>• Victim safety and offender accountability</li> </ul>
Risk, Legal and Regulatory Requirements	<ul style="list-style-type: none"> <li>• Safety and rights of victims</li> <li>• Professionalism and ethics</li> <li>• Mandatory reporting</li> <li>• DHS statutory mandates under 45 CFR 1340; Hawaii Revised Statutes 346, 350, and 587; and Hawaii Administrative Rules and Departmental procedures</li> <li>• Reportable criminal behavior</li> <li>• Review of risk management/ reporting standards</li> <li>• Behavior management (CFS policy and procedures) including nonviolent crisis intervention</li> <li>• CPR and First Aid</li> </ul>
Assessment and Service Planning	<ul style="list-style-type: none"> <li>• CFS Comprehensive Basic Assessment</li> <li>• Identifying family and individual strengths</li> <li>• Service planning</li> </ul>
Service Delivery Basics	<ul style="list-style-type: none"> <li>• Documentation</li> <li>• Client advocacy</li> <li>• Referral resources in the community</li> <li>• Case management/collaboration/ coordination</li> <li>• Basic health and medical needs of the service population to include special needs</li> <li>• Working with clients with communication barriers</li> </ul>
Clinical Knowledge and Skills	<ul style="list-style-type: none"> <li>• Professionalism/boundaries</li> <li>• Mental health basics and common diagnoses</li> <li>• Building therapeutic rapport</li> <li>• Basic counseling skills</li> <li>• Needs of individual and families in crisis; to include suicide precautions</li> <li>• Substance use and abuse</li> </ul>
Quality Assurance	<ul style="list-style-type: none"> <li>• Program outcomes development and measurement</li> <li>• Integration, coordination and monitoring of service quality standards</li> </ul>
Supervisory	<ul style="list-style-type: none"> <li>• Tracking and supervisory tools</li> <li>• Supervisory training (Module 1-Administration; Module 2-Human Resources; Module 3-Supervision; and Module 4-Fiscal)</li> </ul>
Cultural Competency	<ul style="list-style-type: none"> <li>• Values and beliefs of the various cultures in Hawaii</li> </ul>

Additional training needs are determined through the quality improvement process, through information on Best Practices models or are identified by staff members and

their supervisor during individual supervision. In order to be cost effective, CFS programs are able to utilize other programs within the organization for training on child development, mental health, and substance use and abuse.

Details of all topics can be found in the CFS Training Plan, Program Training Plan, and Program Orientation Checklist which are available for review upon request.

### **Commitment to Diversity**

All CFS staff members are required to attend annual Cultural Competence training. The training is intended to increase knowledge of diverse cultural groups and develop skills that result in positive client outcomes. Some of the topics covered in this training include understanding and being aware of one's own cultural values; being aware of, accepting and understanding cultural differences; understanding the client's culture; and respecting differences.

In October 2009 and again in August 2010, the CFS Cultural Diversity Taskforce hosted a showing of the video "Life in These Islands." This video speaks to the cultures, beliefs and values of the people in Hawaii, focusing on how we need to work together and take responsibility to make positive changes in our State. Staff watched this video and then participated in a "talk story" session which provided an opportunity to share their reactions to the video and focus on how CFS can move forward in this process.

CFS conducted a two-part cultural sensitivity training on February 2 & 8, 2010. Haunani Rae Kanaka`ole Joaquin, Program Supervisor I for our Hilo Alternatives to Violence Program, focused on understanding where you come from, what your name means and genealogy. The training involved hands on activity, questions and answers, and an opportunity to work in groups on each island. Participants completed their own genealogy and shared together as a group. The training received positive feedback from the staff who attended.

On March 1, 2010, 'Iokepa De Santos, Hawaiian Cultural Specialist with Partners in Development provided training on Hawaiian Culture for CFS. He shared about his cultural heritage, and what respect means. He provided staff with suggestions on how to provide culturally sensitive services to the individuals and families we serve.

In September and October 2010, CFS conducted a two-part videoconference training on the Lesbian, Bi-Sexual, Gay, Transgender, and Questioning (LBGTQ) population. Laura Acevedo, a Specialist with our Hilo Sex Abuse Program, and Flavia Francesquini, a Specialist with our Parentline Program, provided an overview of the LBGTQ population, how to respond to someone who could be questioning their sexuality, and resources for clients and families.



The Cultural Diversity Task Force continues to provide opportunities for staff to grow in the area of cultural competency. Every year this committee hosts a statewide Taste of Culture event, where staff members focus on specific cultures, learning about their roots, beliefs, languages and food. Overall it is a wonderful opportunity to learn and grow in the area of cultural competency.

### **Clinical Enhancement Program**

CFS has developed a Clinical Enhancement Program for staff members who are interested in developing their clinical skills with clients. This program is mandatory for all licensed clinicians, but is also open to any CFS staff members that provide direct service and want to strengthen their clinical skills. Every month, the group meets to discuss difficult cases, brainstorm alternative approaches, and validate clinical responses. The Clinical Enhancement Program is led by a Clinical Psychologist with over 30 years of clinical experience. The ultimate goal is to provide staff with an opportunity to learn evidenced-based clinical responses for working with children, youth, individuals and/or families. A secondary goal is to provide a safe, confidential environment where difficult cases can be discussed and alternative clinical responses explored. CFS staff members have reported that this program is very helpful in their day-to-day work with clients.

### **Videoconferencing**

In August 2003, CFS launched the *Mehana Project*, a videoconferencing initiative that provides videoconferencing capability to CFS sites on Oahu, Kauai, Maui, Hilo and Kona. CFS was able to secure funding from private foundations to implement this project. Videoconferencing is an innovative and cost effective way to meet organization and community training needs throughout the State. It is also a significant tool in providing "Best Practices" service and clinical service delivery training to CFS staff and others in the non-profit community. Some of the ways CFS utilizes videoconferencing technology include:

- Standardized training modules. In order to provide quality training, there is a need for standardization in course content, instructor delivery, visual aides and distributed materials (handouts). CFS has developed modules in substance abuse, domestic and family violence, child abuse and neglect, behavior modification, documentation/legal issues, and professional boundaries.
- Staff case-conferencing of complex family issues. Staff located at remote sites can work together to discuss issues and accomplish goals for families and children in treatment. This level of case-conferencing is applicable to any clinical issue, but is especially helpful for programs requiring specific clinical expertise.
- Best Practices discussions at the program level. Regular opportunities are provided for program standardization for similar services on different islands. Technology creates the opportunity to share common and unique approaches among

geographically defined programs, discussing clinical care pathways (what works best for certain types of clients), and discussing emerging trends.

- Training opportunities for staff at the national and international level. Provides new opportunities to bring Mainland and global expertise to Hawaii's human service industry.

CFS is committed to providing additional educational opportunities for the community. The implementation of videoconferencing allows CFS to reach more individuals on the neighbor islands.

## **B. Organization Chart**

The CFS organization chart and the DOV Program organization chart are attached.

## **VI. OTHER**

### **A. Litigation**

CFS is a party in the following lawsuit:

- Haldeman, et al. vs. University of Nations Pre-School; The University of Nations; Hawaii County Police Department; Child Protective Services; Department of Human Services; and Child & Family Service, Jointly and Severally  
Case No. CV05-00810 DAE KSC, filed in the United States District Court for the District of Hawaii.

Child & Family Service was named in a complaint filed on December 28, 2005 with CFS filing an answer on June 2, 2006. On April 29, 2008 the Federal District Court granted CFS and Clark's Motion for Summary Judgment. Trial as to the remaining parties was stayed pending disposition of an appeal filed by the Karen Duty and Donald Cupp (State of Hawaii case workers) as to the Court's denial of their Motion for Summary Judgment. CFS is not a party to this appeal. The District Court denied Plaintiff's motion to enter final judgment on Plaintiffs' claims against CFS and other defendants who were dismissed upon motion for summary judgment. No trial date has been scheduled on the remaining claims.

### **B. Licensure or Accreditation**

The Council on Accreditation (COA) has accredited CFS since 1980. As a member of COA, CFS maintains the highest standards in organization management and program delivery. CFS has also been a member of the Alliance for Children and Families since 1986. Because of its accreditation status and membership in national organizations, CFS has access to current research data and Best Practices models.


In its most recent review in September 2009, CFS did not have a single citation that needed a response! This result validates the importance CFS places on being a high quality organization with high quality programs.

Attachment 1  
**PROPOSED BUDGET**

## BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2011 to June 30, 2012)

Applicant: **Child & Family Service Domestic Violence Intervention (DOV Oahu)**

BUDGET CATEGORIES	Total State Funds Requested (a)	(b)	(c)	(d)
<b>A. PERSONNEL COST</b>				
1. Salaries	73,568			
2. Payroll Taxes & Assessments	10,336			
3. Fringe Benefits	10,594			
<b>TOTAL PERSONNEL COST</b>	<b>94,498</b>			
<b>B. OTHER CURRENT EXPENSES</b>				
1. Airfare, Inter-Island				
2. Insurance	175			
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	1,281			
5. Staff Training				
6. Supplies				
7. Telecommunication				
8. Utilities				
9. Audit	284			
10. Administrative Support	15,923			
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
<b>TOTAL OTHER CURRENT EXPENSES</b>	<b>17,663</b>			
<b>C. EQUIPMENT PURCHASES</b>				
<b>D. MOTOR VEHICLE PURCHASES</b>				
<b>E. CAPITAL</b>				
<b>TOTAL (A+B+C+D+E)</b>	<b>112,161</b>			
<b>SOURCES OF FUNDING</b>		Budget Prepared By:		
(a) Total State Funds Requested	112,161	Bobbi Goodman	681-1441	
(b)		Name (Please type or print)	Phone	
(c)			1/27/11	
(d)		Signature of Authorized Official	Date	
<b>TOTAL BUDGET</b>	<b>112,161</b>	Vivian Yasunaga, Vice President of Finance		
		Name and Title (Please type or print)		



## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: **Child & Family Service Domestic Violence Intervention (DOV Oahu)**

Period: July 1, 2011 to June 30, 2012

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
<b>TOTAL:</b>			\$ -	
<b>JUSTIFICATION/COMMENTS:</b> No anticipated equipment purchases.				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
<b>TOTAL:</b>			\$ -	
<b>JUSTIFICATION/COMMENTS:</b> No anticipated motor vehicle purchases.				

## BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: **Child & Family Service Domestic Violence Intervention (DOV Oahu)**

Period: July 1, 2011 to June 30, 2012

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2009-2010	FY: 2010-2011	FY:2011-2012	FY:2011-2012	FY:2012-2013	FY:2013-2014
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
<b>TOTAL:</b>						
<b>JUSTIFICATION/COMMENTS:</b> Not applicable.						



Attachment 2  
**DECLARATION STATEMENT**

**DECLARATION STATEMENT  
APPLICANTS FOR GRANTS AND SUBSIDIES  
CHAPTER 42F, HAWAII REVISED STATUTES**

The undersigned authorized representative of the applicant acknowledges that said applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to section 42F-103, Hawaii Revised Statutes:

- (1) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
- (2) Comply with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant or subsidy.

In addition, a grant or subsidy may be made to an organization only if the organization:

- (1) Is incorporated under the laws of the State; and
- (2) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.

Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

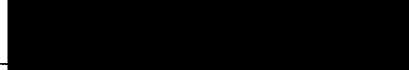
- (1) Has been determined and designated to be a non-profit organization by the Internal Revenue Service; and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

For a grant or subsidy used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant or subsidy used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Child and Family Service

(Typed Name of Individual or Organization)



(Signature)

1/27/11  
(Date)

Patti Bates

(Typed Name)

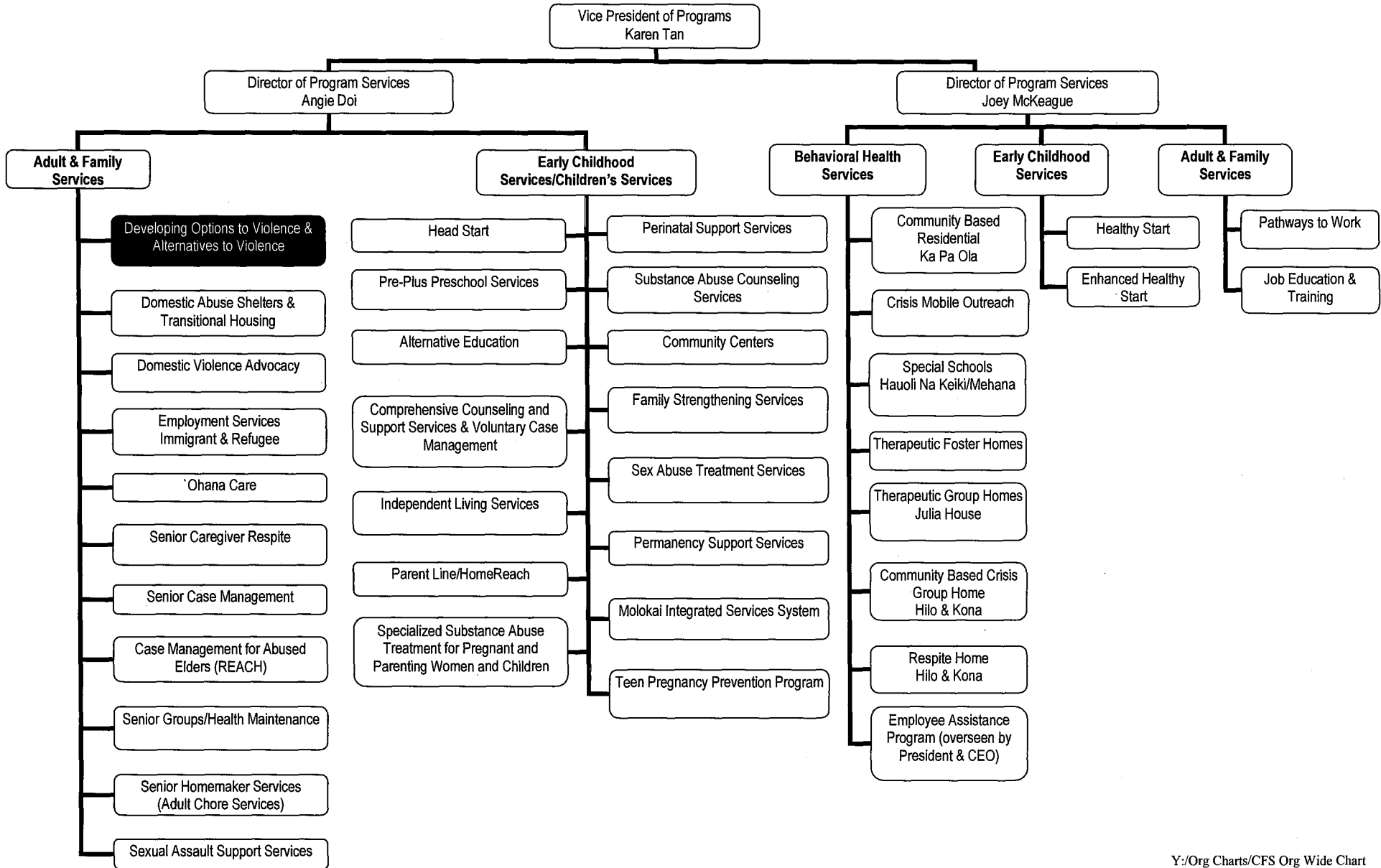
Chief Operating Officer

(Title)

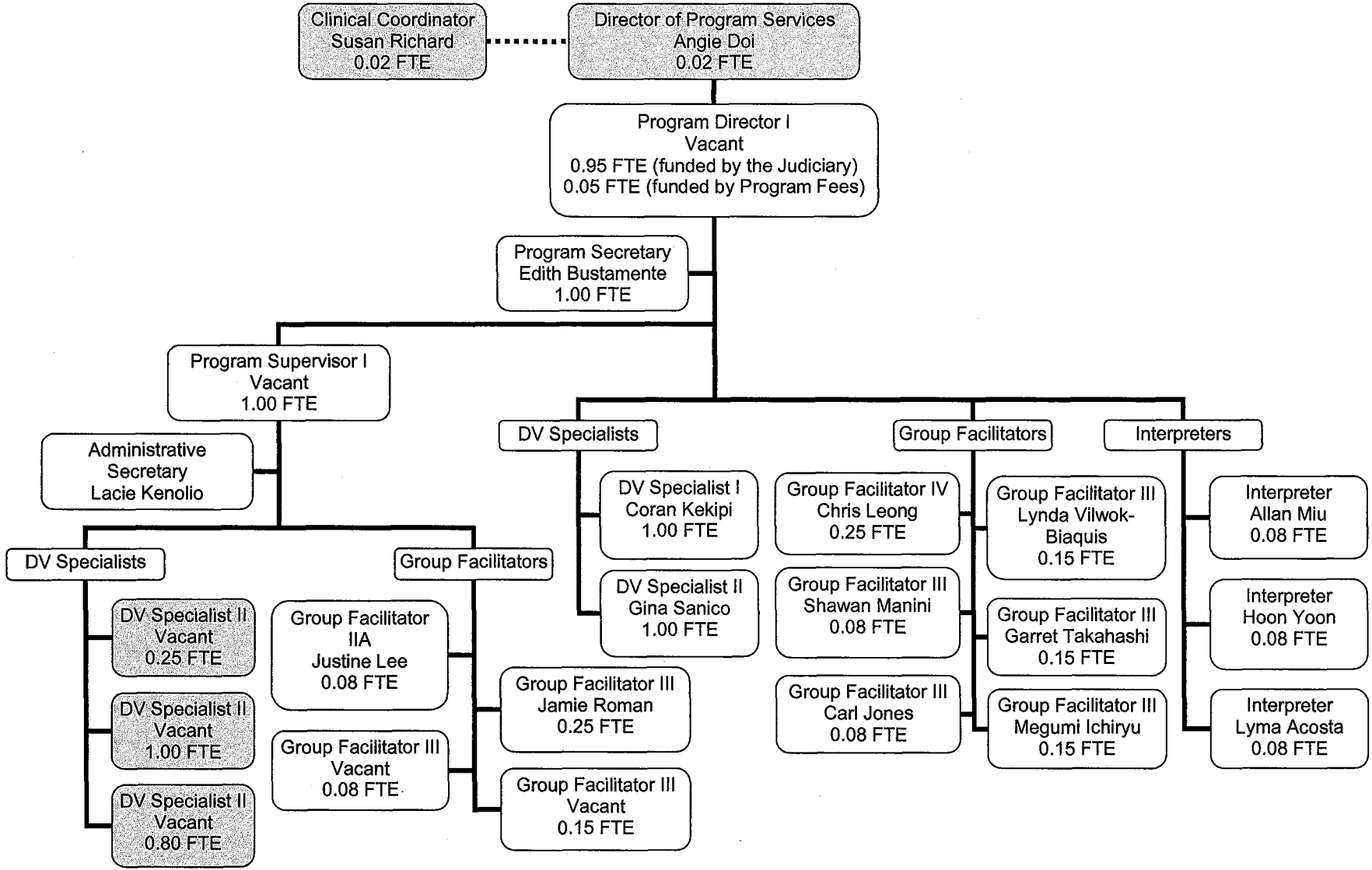
Attachment 3  
**ORGANIZATION CHART**



# Child & Family Service Organization Chart



**DEVELOPING OPTIONS TO VIOLENCE  
Organization Chart**



\*Shaded Boxes indicate positions to be added or funded by GIA funds.