

House District 14, 15, 16

Senate District 7

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

Log No: 12-0

For Legislature's Use Only

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):

HUMAN SERVICES

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:

Child and Family Service

Db:

Child and Family Service

Street Address:

2970 Kele Street, Suite 203, Lihue, HI 96766

9878 Waimea Road, Waimea, HI 96796

4-1112 Kuhio Highway, Kapaa, HI 96746

Mailing Address:

91-1841 Fort Weaver Road

Ewa Beach, HI 96706

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name KAREN TAN

Title Vice President of Programs

Phone # 681-1460

Fax # 681-5280

e-mail cfscontracts@cfs-hawaii.org

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 SERVICES AT THE FAMILY CENTERS ON THE ISLAND OF KAUAI.

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

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

7. AMOUNT OF STATE FUNDS REQUESTED:

FY 2012-2013: \$151,391.00

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 \$ \_\_\_\_\_

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

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

PRIVATE/OTHER \$ \_\_\_\_\_

HOWARD S. GARVAL, PRESIDENT AND CEO  
NAME & TITLE

1-31-12  
DATE SIGNED

## Application for Grants and Subsidies

### I. BACKGROUND AND SUMMARY

In October 2011, CFS was notified that the Title IVB funding for the family centers was being eliminated as of November 30, 2011. The closing of Nana's House and Hale Ho'omalulu would adversely affect the approximately 200 needy families who come to the family centers each month for food, clothing and basic needs. It would terminate case management, counseling and parent education for the 40 involved families and end the ability of families in crisis to walk into their community family center to talk about the stresses that they are experiencing and receive information, referral, support with accessing community resources and other necessary services to maintain a safe and stable home for their children. CFS, the families and their communities came together to find emergency short-term funding to keep the doors at Nana's House and Hale Ho'omalulu open with a reduction of hours. However, the 2012-13 GIA request is necessary to maintain these community-based family center services which are essential in helping strengthen and support families in crisis or at-risk of child abuse and neglect.

#### *1. A brief description of the applicant's background*

Since 1899, 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, older adults, individuals, and families in need benefit from these services. CFS's programs are responsive, flexible, and focused on positive outcomes. Services are provided in homes, schools and in the community as well as CFS's 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's strengths lie 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 island and communities it serves.

CFS has been providing family support services on Kauai since 1982 and has developed extensive experience in engaging at-risk families and supporting their growth and development. CFS has been providing community-based Family Center Services at Nana's House since its inception in 1996. Building on these experiences and working with the Title IV B Regional Planning Committee, CFS expanded Family Center Services to Kapa'a, Hale Ho'omalulu, in 2002. Both of the centers have been well utilized by area families, DHS and other community organizations since their openings. Nana's House and Hale Ho'omalulu continue to modify or expand their services to meet the changing needs of the community.

The services provided at Nana's House and Hale Ho`omalua not only fit with the CFS mission but are also administered and conducted in accordance with the family-centered, strengths/needs-based practice principles of the Child Protective Services Division. Our strong relationship with the Kauai Child Protective Services Division is based on our providing effective family support services to reduce the incidence and recurrence of child abuse and our ability to work collaboratively with other community organizations. CFS tries to contact all of the families who completed services at the Family Center for follow-up at 3 and 6 months after leaving the programs. We have consistently met the contract required outcomes of 90% of the families having no new reports of child abuse or neglect at 3 months and 95% of the families reached at 6 months after services were completed having no new reports of child abuse or neglect. The Family Centers are guided by community Advisory Boards so that the services provided at each center continue to reflect the changing local environment and the needs/strengths of the families in each community.

The Family Centers on Kauai provide the full spectrum of services to support at-risk families within their local communities. Both Nana's House and Hale Ho`omalua provide the same core services that meet contract requirements: access to basic needs through their "food pantries" and "clothing closets"; information and referral; outreach; case management and counseling; parenting classes; and child care while parents are engaged in services. In addition, each Family Center has additional services which address the particular needs and partnerships within its own community.

The Family Centers also function as a home for other CFS program services. Staff from the Tobacco Cessation, Enhanced Healthy Start, Independent Living Services and Perinatal Support Services programs are all housed at Hale Ho`omalua. At Nana's House, staff from the Comprehensive Counseling and Support Services, Voluntary Case Management and Teen Pregnancy Prevention Services are on site. Partnerships with Legal Aid, DOH Nutrition, SNAP workers, Ho'ola Lahui and other Kauai agencies bring additional vital services to the Family Centers. This greatly improves access to services for families, especially those with limited transportation. Both centers provide a warm and welcoming place for Ohana Conferences, Youth Circles and supervised visitations for families in the CPS system and host many community meetings.

The Family Centers provide a safe, nurturing environment for families at-risk of child abuse and/or neglect or in crisis. The centers embrace values of empowerment, families as partners, cultural appreciation, community involvement and participation, pro-social activities and the ability of individuals to make positive choices for themselves and their children. Nana's House and Hale Ho`omalua have helped many families to develop and maintain a safe and stable home for their children. Just as importantly, the continued presence of the Family Centers in these communities has also strengthened the community by increasing the involvement of the business and faith-based organizations in supporting local families.

2. *The goals and objectives related to the request*

The goals of the service are the safety and permanency of children and child and family well-being.

Objectives include:

- 1) To prevent child maltreatment among families at-risk through the provision of supportive family services.
- 2) To assure children's safety within the home and preserve intact families in which children have been maltreated when the family's problems can be addressed effectively.
- 3) To address the problems of families whose children have been placed in foster care so that reunification may occur in a safe and stable manner in accordance with the Adoption and Safe Families Act of 1997.
- 4) To support adoptive families by providing support services as necessary so that they can make a lifetime commitment to their children.

3. *State the public purpose and need to be served*

The need for services on Kauai is well documented; high unemployment and a lack of resources continue to create stress for Kauai families. Traditionally, the majority of available family support services have been located in and around Lihue, the economic and administrative hub of the island. For the last 15 years, the family centers have been providing support to at-risk families on the east and west sides of the island where the services are more easily accessible to families. Kauai Regional Planning Committee identified East and West Kauai as having high-risk populations, particularly because of high unemployment and underemployment. The purpose of providing Family Centers for families with children in these areas is to strengthen and preserve families at-risk for child abuse and neglect or in crisis.

In October 2011, CFS was notified that the Title IVB funding for the family centers was being eliminated as of November 30, 2011. The closing of Nana's House and Hale Ho'omalulu would adversely affect the approximately 200 needy families who come to the family centers each month for food, clothing and basic needs. It would terminate case management, counseling and parent education for the 40 involved families and end the ability of families in crisis to walk into their community family center to talk about the stresses that they are experiencing and receive information, referral, support with accessing community resources and other necessary services to maintain a safe and stable home for their children. CFS, the families and their communities came together to find emergency short-term funding to keep the doors at Nana's House and Hale Ho'omalulu open with a reduction of hours. However, the 2012-13 GIA request is necessary to maintain these community-based family center services which are essential in helping strengthen and support families in crisis or at-risk of child abuse and neglect.

The Family Centers provide a safe, nurturing environment for families at-risk of child abuse and /or neglect or in crisis. The centers embrace values of empowerment, families as partners, cultural appreciation, community involvement and participation, pro-social activities and the ability of individuals to make positive choices for themselves and their children.

We believe that family support services must be community-based and fully integrated into the life of the community. The Family Centers work in partnership with the community at many different levels. Community citizens on the Ohana Advisory Board meet monthly to provide input on local needs and keep abreast of ongoing activities and services at the centers. Community volunteers regularly help staff with the daily tasks of keeping the office running and the food pantry and clothes closet stocked. The services at Nana's House and Hale Ho`omalua are closely coordinated with (and often provide space to) other community services and increase opportunities for families. In addition, we can link families with supports available through other CFS programs on Kauai.

Most importantly, the Family Centers provide positive family activities and parenting classes that are open to all families in the area. This approach broadens the range of families that come to the centers and allows families at-risk or in crisis to be more comfortable coming for help since there is no shame or stigma attached to a visit to Nana's House or Hale Ho`omalua. Several of the Family Center staff are bilingual (e.g. Ilocano, Tagalog, and Spanish). For those families with limited English who need additional support, the program has and will continue to use language interpreters. Independent contractors and services through the Bilingual Access Line will continue to be utilized for these families.

An underlying program assumption is the likelihood of child abuse will be reduced with the improvement of family functioning, the promotion of positive parent-child interaction, the enhancement of parental life skills and the reduction of family stress. It takes a wide variety of program, community and social supports for at-risk families to gain and maintain these improvements.

4. *Describe the target population to be served*

The Family Centers are open to families who are in need of family support services who live in the target areas. The population for the proposed services is families (1) who are referred by Child Welfare Services, other professional agencies or are self referred, (2) whose children are victims of or are at-risk of child abuse and/or neglect, or (3) who are in crisis. Many of these families are also impacted by domestic violence, substance abuse or are in need of basic food, clothing and supplies. Families referred by Child Welfare Services are given priority when service availability is limited.

5. *Describe the geographic coverage*

The Family Centers serve the Island of Kauai, specifically the Westside (Koloa to Mana) and the Eastside of Kauai (Hanamaulu through Anahola).

## II. SERVICE SUMMARY AND OUTCOMES

1. *Describe the scope of work, tasks and responsibilities*

The Kauai Family Centers provide a broad array of services to at-risk families on the Westside and Eastside of the island. In addition, the centers provide a community-based site for other family services and community meetings. They are gathering places that are dedicated to supporting strong, safe and stable families. Over the years the centers have become a very integral part of their communities and have created a more positive community atmosphere for families and children.

Service Activities include:

### 1) **Information and Referral Service**

One of the most utilized services at Nana's House and Hale Ho'omalua is information and referral. The Family Centers are known throughout their community as a resource that families can use for any of their problems or issues. Although the Family Centers are not able to address all of the family requests directly at the center, they are able to help the family get to the service they need.

All of the staff and volunteers are provided training so that they know how to respond to families requesting information. The Program Manager is usually the first person that the family meets with and she is able to listen carefully to the families concerns and help them refine their concerns into specific needs that can be addressed. Once the family's need is described, the staff have knowledge of the eligibility requirement for many programs and can help screen the families so that they are referred to appropriate services. Staff are also able to help with applications, transportation and translating formal documents into language that families can easily understand.

Once a family is given a referral for service they are asked to return and let the staff know if they were able to make the connection. If not, then the staff will help the family to schedule the appointment from the Family Center office.

The Family Centers have a strong knowledge of the economic, health, mental health, educational, vocational and social services available on the island. Nana's House also has a partnership with the Westside Ministers Association and can screen families for eligibility for the Minister's Kokua fund for one time crisis monetary gifts. This can help a family to pay a utility bill before service is turned off, or rent if they are in danger of being evicted.

Information and referral is often a gateway into more directive services: families using the Kokua fund or coming in for food are given information on the Family Center budgeting classes and encouraged to attend so that they can manage their current resources more effectively; families with small children using the clothing closet are informed about the Head Start services and provided help in filling out the application; or families who are struggling with their children's behavior while at the Family Center are invited to the parenting classes.

## **2) Provision of Mediation, Family, and Relationship Counseling**

As noted above, many families come to the Family Centers for basic needs or information and referral and are then encouraged to become more involved in services to address their family relationship issues and improve their parenting skills. At other times, families are referred by community agencies or CPS specifically for the counseling and parent education services that are provided at the Family Centers.

The Specialist IIs at both centers have extensive experience and expertise in working with families, individually and in parenting classes. In the parenting classes they can modify their curriculum to meet the needs of the individual families. The Family Centers can also provide specific services to help families who have teens, or target families with small children. For more intensive family support, the Mental Health Specialist is available for family, couple and individual counseling. Because of limited funding, the counseling sessions are designed to be problem focused and of a short duration. If a family is in need of longer term counseling, they are referred to a community resource. The staff will work with the family and the referral source to ensure that the family makes a smooth transition.

## **3) Resources to Meet Basic Needs**

Over the past two years, we have seen a dramatic rise in the number of families coming into the Family Centers for basic needs. On average, 200 + individuals come in for food each month at each center. A similar number of families visit the center clothing closets. The food and clothing bring in families and give the staff an opportunity to talk with them about their current circumstances. The food and clothing are a natural bridge to working with families who are struggling with many issues and may be at-risk for child abuse.

Families that come in for food are screened for eligibility for SNAP services and other possible financial supports. Families are also encouraged to enroll in the budgeting and nutrition classes. As they become more familiar and comfortable at the Family Centers, they often discuss other family issues and become involved in services through intake and assessment.

#### **4) Collaboration with Other Service Providers**

Both of the Family Centers have extensive networks with other agencies, local businesses and community organizations as well as the faith-based organizations. The Family Centers are open to all other service providers in the community and the centers are especially proud of being the meeting place for many of the CPS Ohana meetings and Youth Circles. The centers are used for supervised visits during the week and on most Saturdays.

On any given evening, you might find the Grandparents Raising Grandchildren support group, a Legal Aid presentation or a community drug prevention coalition meeting happening in the Family Center living rooms. The Family Centers are well integrated into the community and have reciprocal referral networks with many other service providers.

#### **5) Advisory Board and Volunteer Recruitment**

Each of the Family Centers have an Advisory Board. The Board members reflect a cross section of the community for each center. The Nana's House Ohana Advisory Board has been in existence since 1996 and members represent health services, mental health, Kauai Community College, faith community, local elementary and middle schools, early childhood education, parents and community members. Several of the members are also former clients at Nana's House. The Hale Ho`omalulu Advisory Board has been meeting since its beginning in 2002. Membership includes similar representation from the Kapa`a area: early childhood education, Hawaiian organizations, elementary school, business, social service, faith community and parents.

In addition to individuals who volunteer at the Family Centers, Nana's House and Hale Ho`omalulu also have partnerships with Alu Like, Work Wise and the County Area Agency on Aging to provide work site, training and supervision for their volunteer workers. At this time Hale Ho`omalulu and Nana's House each have six volunteers working at the centers.

Volunteers are trained and screened and given responsibilities that match their abilities and talents. More information on volunteer screening and training is in the Work Plan.

#### **6) Outreach Services to the Target Group**

The Family Centers are involved in two types of outreach: 1) community outreach to inform the community of services and for staff to introduce themselves to family members who are in the target population, and 2) individual outreach services to engage target families in services.



The Family Center staff participate in many community events where they are able to reach a large number of families and potentially engage families to come to the centers.

The Program Managers and Specialist IIs at the Family Centers are usually the staff that engage in the individual outreach to families to try and engage them in services. The most common form of individual outreach happens right in the Family Centers as the Program Manager engages with the families coming in for basic needs or information and referral. The Program Manager will then include the family by providing information on new services, calling to remind them of a budgeting or nutrition class, and generally reaching out to include them in the daily life of the Family Center. The Specialist II is more likely to make the home visits to families that are struggling with many issues and invite them to the activities at the center or help with a community referral. The Specialist II will also provide transportation or the center will help with a bus pass to ensure that the family knows about available services and has access to reach them. The individual outreach or relationship building is an integral part of the work of the centers to help at-risk families feel comfortable sharing their situation and accepting help.

## **7) Child Care**

Both of the Family Centers have a children's playroom and provide child care for parenting, counseling, case management or other classes as needed. This assures that no parents miss services due to a lack of child care. Since the child care is provided in the Family Center at the same time the parents are there, it does not fall under DHS licensing requirements.

## **Work Plan**

The following Work Plan details service activities and program requirements, specific tasks, responsible staff and backup staff, and the timeline/schedule.

A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
1. Contract specific policies and procedures, including:			
<ul style="list-style-type: none"> <li>Initial Referral &amp; Engagement Process</li> </ul>	<p>The Family Centers are open to all families who live in the target area and are in need of family support services. The target population includes families who are (1) referred by CPS, other agencies or self referred, (2) whose children are victims or at-risk for child abuse and/or neglect, or (3) who are in crisis.</p> <p>Families referred by Child Welfare Services are contacted within 24 hours of referral and given priority when service availability is limited.</p> <p>All staff members at the Family Centers answer the phones or greet families who walk in. They give families information about the center services and provide information and referral as needed.</p> <p>Families who are only interested in receiving food or clothing sign in on the log and are shown to the food pantry or clothing closet and assisted with their requests. They receive information on the dates and times for the food pantry, are given any additional information that they might need and are made aware of other resources available at the Family Center and within the community. Families seeking food are screened to see if they are eligible for the SNAP program or other food or financial assistance.</p> <p>Families who are requesting additional services such as outreach, case management, parenting classes or counseling meet with the Specialist II and are scheduled for an intake appointment and receive a complete assessment.</p> <p>At the intake appointment, demographic information is obtained from the family and they participate in a</p>	<p>Program Manager, Specialist II Backup: Program Director I or II</p> <p>All Center Staff</p> <p>Program Manager Backup: Specialist II, trained volunteers</p> <p>Specialist II Backup: Mental Health Specialist</p> <p>Specialist II and/or Mental Health Specialist</p>	<p>Contact attempted within 24 hours of referral</p> <p>At initial contact</p> <p>At first visit</p> <p>Within one week if the family is available or later if at the family's request</p> <p>Within one week if there are openings for case</p>

A	B	C	D
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	<p>comprehensive family assessment. The assessment and family history incorporates information about any potential risk to the children as well as the family strengths, values, resources, needs and concerns. Based on the assessment the family and staff decide on the type of service(s) needed. An Individual Family Support Plan (IFSP) defining family goals is created with the family.</p> <p>If case management services are indicated, the Specialist II works with the family to help them address their family goals. The Program Manager may also be assigned to provide the family with information, referrals, and help with applications and/or scheduling appointments with community resources.</p> <p>If counseling services are needed and there are openings, the family will be scheduled an appointment with the Mental Health Specialist.</p>	<p>Backup: Program Director I or II</p> <p>Specialist II, Program Manager</p> <p>Mental Health Specialist Backup: Program Director I or II</p>	<p>management or counseling</p> <p>At next scheduled group for parenting classes</p> <p>Case management and counseling services can begin as soon as scheduling permits</p>
<ul style="list-style-type: none"> <li>• Creating and Managing Waiting Lists</li> </ul>	<p>If there are no available counseling appointments, families are put on a wait list pending an opening. The Family Centers follow the CFS and the Family Center policy regarding wait lists. Families are notified regularly about their status on the waitlist, estimated time before receiving services and other services in the community they may be eligible for. CPS referrals are given priority for counseling services and the referring CPS worker is notified if there is going to be a delay in providing services.</p> <p>Families waiting for counseling services are also offered outreach and case management services. The Specialist II and Program Manager can help the family build a support network with other community groups or service providers. The Specialist II can also provide home visits, transportation and brief, informal counseling on issues that may arise in crisis situations.</p>	<p>Program Manager, Specialist II Backup: Program Director I or II</p> <p>Specialist II, Program Manager Backup: Program Director I or II</p>	<p>Outreach and case management services can begin immediately</p> <p>At time of intake</p>
<ul style="list-style-type: none"> <li>• Termination of Services/</li> </ul>	<p>Discharge planning is integrated into the Individual Family</p>	<p>Specialist II, Mental Health</p>	<p>At time of intake,</p>

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Discharge Criteria	<p>Support Plan so that the family is included in determining the criteria for terminating services.</p> <p>The aftercare planning process begins during the service period. At case closure a final discharge plan is completed as well as a complete aftercare plan with the family and a copy is provided to them.</p>	Specialist Backup: Program Director I or II	assessment and treatment planning
<ul style="list-style-type: none"> <li>Serving Clients with Limited English and Physical Disabilities</li> </ul>	<p>Families are assessed at first contact with the Family Centers for any accommodations that need to be made for clients with limited English and/or physical disabilities. The Program Manager will arrange for any accommodations necessary to provide clients with needed services. Services can include obtaining an interpreter, arranging for services to be provided in the home, coordinating with paratransit (Kauai bus), and modifying curriculum/activities. The staff will also link the family to any disability services that the family does not currently have as applicable.</p> <p><b>Limited English:</b> If a family has limited English speaking skills, the staff try to locate someone at the Family Center or CFS Kauai office to assist with interpretation services. CFS staff on the other islands can also be utilized through our VTC capabilities. The Specialist II can also work with other service providers on Kauai to utilize interpretation services. Translated intake paperwork and other documents are provided for the family if available. Several intake documents are already translated into various languages that are most frequently spoken on Kauai.</p> <p><b>Physical disabilities:</b> Both of the Family Centers and the Kauai CFS office are ADA compliant and can accommodate clients with most physical disabilities. Family Center services can also be provided to families in their homes or at a place in the community that is convenient for the family and safe for both the family and program staff. Program staff can provide</p>	<p>Program Manager Backup: Specialist II</p> <p>Program Manager, Specialist II Backup: Program Director I or II</p> <p>Specialist II, Mental Health Specialist, Program Manager Backup: Program Director I or II</p>	Upon referral or at first contact

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	transportation and will also help clients to use the paratransit transportation system on Kauai. Other accommodations can be made when needed.		
<ul style="list-style-type: none"> <li>Case Reporting, Documentation, and Coordination with CPS</li> </ul>	<p>Reporting and documentation includes client consent forms, CFS Comprehensive Basic Assessment, Individual Family Support Plan (IFSP), progress notes, quarterly case summaries, discharge summaries, after care plans, Quarterly Activity Reports (QARs), Client Eligibility List (CEL) and other documentation necessary to monitor and evaluate the quality, quantity and timeliness of the services provided. The written reports are in a Department approved format.</p> <p><b>Documentation:</b> Each and every contact, attempted contact and phone message with a family, referral source or other entity involved with a particular case is documented in a progress note and placed in the file within 24 hours of the activity per COA standards.</p> <p>When referrals are received at the Family Center from a CPS worker, the Program Manager reviews the referral and assigns the family to the Specialist II or Mental Health Specialist for the intake assessment depending on the services requested by the CPS worker. The Specialist II or Mental Health Specialist will attempt to contact the family within 48 hours and will contact the CPS worker if they have any questions regarding the referral or if they can't contact family with information given.</p> <p>For families who are referred to the Program by CPS, the Family Center work will contact the CPS worker when the family is contacted, if the family does not accept services, or if the Program is unable to locate them.</p> <p><b>Case reporting:</b> For families referred to the Family Centers by CPS who accept services and provide consent to release</p>	<p>Specialist II, Mental Health Specialist, Program Director I or II Backup: Neighbor Island Administrator</p> <p>Specialist II, Mental Health Specialist Backup: Program Director I or II</p> <p>Specialist II, Mental Health Specialist</p>	<p>Ongoing throughout the contract</p> <p>From the beginning of service to termination and follow-up</p> <p>Ongoing from beginning of service through termination</p>



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	<p>CPS. As with the DHS, the Family Centers are deeply concerned about the safety, permanency and well-being for the children and families.</p> <p>The Family Center staff have long standing relationships with the CPS section staff in their areas. The staff work together in committee meetings and on individual case consultation and coordination. The CPS staff are welcome to visit the Family Centers at any time and can meet clients there, hold Ohana conferences, supervised visitation or Youth Circles at the Centers. The staff meet informally and formally to identify ways to improve communication, coordination and expectations for program services.</p> <p>Referral source surveys are sent to the CPS Social Workers and management staff at the CPS Division level at least twice a year to obtain additional feedback about services. CFS continues to be flexible to accommodate CPS needs and concerns and will participate in quality assurance/improvement projects as requested by DHS for research and evaluation purposes.</p>	<p>Program Director I or II Backup: Neighbor Island Administrator</p>	<p>Twice a year</p>
<p>2. Services for Families, including:</p>			
<ul style="list-style-type: none"> <li>• Information and Referral</li> </ul>	<p>Information and referral is provided throughout a family's participation at the Family Center.</p> <p>Any family calling or walking in to a center is given information about services at the Family Centers as well referrals to other community services that may be beneficial to them. Staff will help families understand eligibility guidelines, help with application forms and schedule appointments for them if needed.</p> <p>When necessary, staff will provide transportation to medical, housing or other essential services.</p>	<p>Program Manager, Specialist II, trained volunteers Backup: Program Director I or II</p>	<p>At first contact and for as long as needed</p>

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SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p>The worker will follow up with the family to see if they made contact with the referral and received requested services or help. When the family is an active case the referral outcomes will be noted on the progress notes and/or Individual Family Support Plan. For families who are no longer active, the outcomes will be tracked through the 3 and 6 month follow-up forms.</p>	<p>Specialist II Backup: Program Manager</p>	<p>Throughout services and at 3 and 6 months after the end of services</p>
<ul style="list-style-type: none"> <li>Provision of Mediation, Family, and Relationship Counseling</li> </ul>	<p>Families requesting counseling services participate in an intake session and the comprehensive assessment noted in Service Activity #1. The Mental Health Specialist and the family agree on the type of counseling needed (individual, family, couple) based on the family's initial reason for requesting services, the information gathered in the assessment of the family's level of risk of child abuse, and their strengths and outside support. Depending on the level of need for counseling services, family members may be seen weekly or less frequently.</p> <p>In some circumstances, the Family Centers will work with the families to include additional family members or work with the DHS staff to support an Ohana Conference.</p> <p>If there is a crisis and the Mental Health Specialist is not available, the Program Director II will provide necessary services.</p> <p>Depending on the assessment, participation at parent education classes may be included in the Individual Family Support Plan or may be a sufficient level of service for the family by itself.</p>	<p>Mental Health Specialist Backup: Program Director I or II</p> <p>Mental Health Specialist Backup: Program Director I or II</p> <p>Program Director I or II Backup: Neighbor Island Administrator</p> <p>Specialist II Backup: Mental Health Specialist</p>	<p>Within one week of initial call if family is available</p> <p>As needed</p> <p>As needed</p> <p>As needed</p>
<ul style="list-style-type: none"> <li>Provision of Resources to Meet Basic Needs</li> </ul>	<p>Both Nana's House and Hale Ho`omalulu provide families with easy access to emergency food and clothing. Using funds from community donations CFS buys food from the Food Bank in Lihue for the Family Centers' Food Pantries.</p>	<p>Program Manager, trained volunteers Backup: Specialist II</p>	<p>Available as needed</p>



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SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p>Families on the Westside and Kapa'a areas then have easy access to emergency food. The Centers also receive donations of adult and children's clothing, which they then make available to families in need.</p> <p>The availability of food and clothing brings many homeless and high-risk families into the centers where they can then become familiar with other available support services.</p> <p>Every family coming into the Family Centers that needs food and/or clothing is helped by the Program Manager. The names and ages of the family members are obtained and the Program Manager helps the families to feel welcome and comfortable at the Centers and develops a relationship with them.</p> <p>Nana's House also has a partnership with the Westside Ministers Association that allows families to request emergency funds for other basic needs (utility bills, housing deposits, etc.) through the workers at Nana's House.</p> <p>Staff at both centers are knowledgeable about emergency assistance resources available in the community and will work with any family in need to try and find necessary help.</p>	<p>Program Manager Backup: Specialist II, Program Director I or II</p>	<p>Available as needed</p>
<ul style="list-style-type: none"> <li>• Collaboration with Other Service Providers</li> </ul>	<p>The Family Centers are a result of a collaboration between CFS, the Title IVB Regional Planning Committee, and local community partners. The success of the Centers is directly related to their connections to a broad array of services to families.</p> <p>Each center has a local community Advisory Board, which oversees the coordination of Family Center services, advises the center staff of community needs and opportunities for collaborations and partnerships.</p>	<p>Program Manager, Program Director I or II Backup: Neighbor Island Administrator</p> <p>Program Manager Backup: Program Director I or II, Neighbor Island Administrator</p>	<p>Ongoing</p> <p>Meeting held every other month</p>

A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p>Each Family Center makes State Employment Service job listings available, and keeps community service brochures and flyers of community activities posted for families. Family service programs are co-located at both centers: a Comprehensive Counseling and Support Services (CCSS) Parent Educator and a Voluntary Case Management Specialist work out of Nana's House. The Independent Living Services Specialist, Perinatal Support Services worker and an Enhanced Healthy Start Family Support Worker have their work space at Hale Ho'omalū. Workers from all CFS programs and many other community programs know that they can bring their families into the centers and learn about the services available to them.</p> <p>The centers are also a regular meeting place for community meetings and are often used for Tobacco Cessation groups, budgeting education groups, Grandparent Supporting Grandchildren support groups and other services specific to CPS clients (supervised visitation, Ohana Meetings and Youth Circles). Partnerships with the Boys and Girls Club and the Community Health Clinics helps families to access after school activities for their children and get medical, dental and behavioral health services, especially if they are un or under insured.</p> <p>The Family Center staff have close working relationships with direct service staff at Public Health Nursing, WIC, Food Stamp and Medicaid Offices, DOE counselors and PCNC staff. Over the years the Family Centers and community and state agency staff have created a strong referral network.</p> <p>The Family Center and other CFS staff are members of numerous community collaborations, committees, boards and task forces.</p>	<p>Program Manager, Specialist II Backup: Program Director I or II</p> <p>Program Manager, Specialist II, Program Director I or II Backup: Neighbor Island Administrator</p> <p>Program Manager, Program Director I or II Backup: Neighbor Island Administrator</p>	<p>Available at all times</p> <p>As scheduled</p> <p>Ongoing</p>

A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
<ul style="list-style-type: none"> <li>Advisory Board and Volunteer Recruitment</li> </ul>	<p>Both of the Family Centers have a community Advisory Board made up of representatives from local service providers, county and State departments, businesses, the faith community and consumers. The Advisory Boards meet regularly and provide community input and oversight into Family Center activities and future plans. The meetings also offer a forum for members to learn about other upcoming projects, family activities and services.</p> <p>Volunteers are recruited through community meetings, health fairs and community gatherings where the Family Centers may be providing program information. Potential volunteers are screened and trained to support activities at Nana's House and Hale Ho'omalua. Partnerships with Alu Like, County Area Agency on Aging and Work Wise provide a stable source of volunteer help while the workers learn important work skills at the Family Centers. Volunteers currently perform routine clerical work and assist the staff with setting up and maintaining the food pantry and clothes closet. Volunteers with experience and training working with children may also provide child care while the parents are in sessions at the center. All volunteers receive training in confidentiality, HIPAA requirements and community resources as well as specific training to do their job.</p> <p>Volunteers to the Family Center must comply with all of the same CFS Human Resources and DHS screening requirements as a regular employee in this program.</p>	<p>Program Manager, Program Director I or II Backup: Neighbor Island Administrator</p> <p>Program Manager, Specialist II Backup: Program Director I or II</p> <p>Human Resources Department, Program Manager Backup: Program Director I or II</p>	<p>Every other month</p> <p>As needed</p> <p>As needed – completed before starting work at Family Center</p>
<ul style="list-style-type: none"> <li>Outreach to the Target Group</li> </ul>	<p>The Family Centers routinely provide community outreach to find families in need and individual family outreach to help families receive needed services. All CFS staff talk about the services available at the Family Centers whenever they are out in the community or meeting individually or in groups</p>	<p>All Family Center Staff, all CFS Kauai staff Backup: Program Director I or II</p>	<p>Daily basis</p>

A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p>with families and individuals.</p> <p>The Family Center staff are involved in a wide variety of community activities to make sure that community families know about the services available at Nana's House and Hale Ho'omalua. Staff participate in local community events, family activities at the schools in their communities and broader island wide activities such as health fairs and family activities at the shopping center. The Family Center staff are found at any local function where families gather.</p> <p>The Family Center brochures are placed throughout the community and family classes are advertised in the newspaper. The Family Centers are well known in their communities.</p> <p>All families who visit or phone the centers on their own or are referred by another agency are eligible to receive outreach/case management services. Staff provide information and referral and help the family build a support with other groups or service providers. The Specialists keep ongoing contact with the families through home visits, phone calls and appointments at the Family Centers. Through these visits the workers are able to help the families reach personal goals and are able to assess the progress of the family and their home and family environment.</p> <p>Transportation is provided to families who need help getting to and from appointments for housing, job interviews, medical appointments and other essential services.</p> <p>All families receive a follow up call or visit three and six months after services end.</p>	<p>Specialist II, Program Manager Backup: Program Director I or II</p> <p>Program Manager Backup: Program Director I or II</p> <p>Specialist II Backup: Program Director I or II</p> <p>Specialist II Backup: Program Manager</p> <p>Specialist II Backup: Program Manager</p>	<p>As scheduled</p> <p>On an ongoing basis</p> <p>Active clients are contacted/visited at least once every two weeks or more frequently if needed</p> <p>As needed</p> <p>At 3 and 6 months after end of service</p>

A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
<ul style="list-style-type: none"> <li>Child Care</li> </ul>	<p>Child care is provided for scheduled services at the Family Centers. This can include parenting classes, individual/family case management or counseling appointments or support groups.</p> <p>Each of the Family Centers has a children’s playroom that is equipped with age appropriate activities, books and art supplies. The parents are always in the Family Center when their children are provided care so the Family Centers are never taking full responsibility for the children. There are no licensing requirements for this short-term care with parents in the next room.</p> <p>Child care provides an opportunity for the staff to see the parents and children interact and to assess the status of the child.</p>	<p>Specialist II, Program Manager, trained volunteers Backup: Program Director I or II</p>	<p>Scheduled as needed</p>
<p>3. Development of protocols, including those regarding:</p>			
<ul style="list-style-type: none"> <li>Criminal History and CPS Registry Personnel Checks</li> </ul>	<p><b>Criminal history background checks:</b></p> <p>Once an employment offer is tendered and accepted, a criminal history check is conducted via the Hawaii Criminal Justice Data Center for all new direct service employees. A printed report of each criminal conviction record check is maintained in the employee’s personnel record. An offer of employment is withdrawn or the position of a direct service provider is terminated when a prospective or current direct service provider has a criminal conviction as indicated as follows:</p> <ul style="list-style-type: none"> <li>The criminal conviction occurred within the last 10 years; and</li> <li>The crime for which there is a conviction has a rational relationship to a direct service provider’s position.</li> </ul>	<p>Human Resources (HR) Employment Assistant and Program Director I or II Backup: HR designee and Neighbor Island Administrator</p>	<p>Upon hire; then 12 months later; then thereafter every 2 years</p>

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SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p><b>CPS Registry checks:</b></p> <p>Once an employment offer is tendered and accepted, a check is conducted via the Protective Services Central Registry for all new direct service employees. A printed report of each record check is maintained in the employee's personnel record. A check is completed upon initial hire, twelve months later, and thereafter, every two years.</p> <p>Unfavorable findings do not necessarily result in the employee's dismissal and are reviewed on a case-by-case basis with the following criteria:</p> <ul style="list-style-type: none"> <li>• The nature and gravity of the offense</li> <li>• The amount of time that has passed since the offense</li> <li>• The nature of the position in question</li> </ul>	<p>HR Employment Assistant and Program Director II Backup: HR designee and Neighbor Island Administrator</p>	<p>Upon hire; then 12 months later; then thereafter every 2 years</p>
<ul style="list-style-type: none"> <li>• Quality Assurance and Evaluation Specifications</li> </ul>	<p><b>Quarterly Activity Reports (QAR)</b> are completed and submitted by the Program Director I or II to DHS. They contain: information on program progress that quarter from the indicators on Forms A, B, C; major accomplishments that quarter; training provided using Title IVB, Subpart 2 funds; problems encountered and corrective actions taken; staff changes; plans for the next quarter; referral sources; and other significant information about the Program for that quarter.</p> <p>Results from the Parenting Class pre- and post-tests and client progress on their Individual Family Support Plan goals also help the program evaluate its effectiveness.</p> <p><b>Discharge Summaries</b> are completed by the Specialist or Mental Health Specialist if the primary staff involved with the family. The summary documents the client's progress during the length of the case. An aftercare plan is included which identifies the continuum of other services needed or desired</p>	<p>Program Director I or II Backup: Neighbor Island Administrator</p> <p>Specialist II, Mental Health Specialist, Program Manager Backup: Program Director I or II</p> <p>Specialist II, Mental Health Specialist Backup: Program Director I or II</p>	<p>Due to POS Monitor within 30 days of end of fiscal quarter</p> <p>Progress on goals is reviewed as part of the discharge summary</p> <p>Discharge Summaries are entered in the client's record no later than 30 days following discharge</p>

A	B	C	D
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	<p>by client, and which specifies the nature and frequency of follow-up or aftercare contact by CFS (if needed). These results also help the Program evaluate its effectiveness. Changes are made to the Program based on how clients are doing at discharge.</p> <p><b>Client Satisfaction Surveys</b> are distributed to clients by the Program Manager. Returned surveys are reviewed by the Program Directors and the Neighbor Island Administrator and sent to the CFS QA and Training Department on Oahu. Additionally, client satisfaction is discussed during quarterly Family Center PQI meetings.</p> <p><b>Referral Source Surveys</b> are distributed by the Program Manager to the referring CPS social workers, supervisors and Kauai CWS Section Administrator; and other referral agencies in order to provide a formal opportunity for stakeholders to express their views with regard to designing, reshaping, and redefining existing services. Additionally, stakeholders are encouraged to identify barriers that prevent access to any group of individuals. Feedback from stakeholders is aggregated and utilized to improve management strategies and service delivery practices. Referral source surveys are sent twice a year.</p> <p>The feedback from the surveys is shared and discussed with program staff during supervision, annual reviews, staff meetings, and during the CFS quarterly PQI process. Sharing this important information allows the Family Center staff members to self evaluate and take ownership for program improvements.</p> <p><b>Consumer Satisfaction Phone Calls</b> are conducted quarterly by the Program Directors. Phone calls are made randomly to both closed and open cases. The information gathered from</p>	<p>Program Manager Backup: Program Director I or II</p> <p>Program Manager Backup: Program Director I or II, Neighbor Island Administrator</p> <p>Program Director I or II Backup: Neighbor Island Administrator</p>	<p>Given to clients at discharge</p> <p>Distributed at the end of each series of parent classes; during the first quarter and at the end of case management and counseling services</p> <p>Given to referral sources twice a year</p> <p>Calls made quarterly to three clients</p>

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	<p>the client satisfaction phone calls is used to identify program strengths and weaknesses as indicated by program consumers. Information from this survey is compiled into one report and shared during staff meetings with the entire staff. Information is also provided to individual team members and is used during their annual performance reviews. Areas of strengths or improvements needed are summarized in the Quarterly Manager's Report for review by the PQI committee.</p> <p>Similar to the referral source satisfaction surveys, the feedback from client phone calls and surveys is shared and discussed with program staff during supervision, annual reviews, staff meetings, and during the CFS quarterly PQI process.</p> <p>Documented individual supervision and group supervision on shared cases is completed at a minimum, twice monthly and prior to case closure. Group supervision may be done. During supervision as well as throughout each week, the client database and all case files, daily and weekly tracking logs/charts, calendars and schedules are discussed and reviewed to ensure proper service delivery, documentation, reporting, outcomes and tracking. The quarterly case supervision is detailed and identifies the status of progress with service goals for the family as well as any action plan needed to be taken by staff. The Program Directors and the Neighbor Island Administrator are also available twenty four hours a day seven days a week for case consultation or for crisis situations.</p> <p><b>Care Record Reviews</b> are conducted quarterly as part of the PQI process with other CFS programs which assists with the identification of areas of success and areas in need of improvement. Through this process as well as through staff meetings and individual supervision, goals are established</p>	<p>Program Director I or II Backup: Neighbor Island Administrator</p> <p>All CFS program staff review peer records. Reviewed by Program Director I or II. Backup: Neighbor Island</p>	<p>Supervision is conducted at a minimum twice a month</p> <p>Peer case record reviews and PQI are done quarterly</p>



A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p>with action plans for areas of improvement and are reported to upper management quarterly. These action plans are reviewed during the following quarter and reported on as well.</p> <p>The Family Center staff will work with the Department and will be prepared for annual contract monitoring that may include site visits with comprehensive evaluation of several areas of performance. Staff will ensure that the program services conform to standard contractual requirements, accounting practices, and case record keeping.</p> <p>The Family Center staff will also participate in quality assurance/improvement projects as requested by the Department for research and evaluation purposes. Staff will complete one (1) Hawaii Child and Family Services Review (CFSR) per year, per qualified staff as requested and arranged by the Department. Other quality assurance/improvement activities include data collection and other future requests related to current Department initiatives, activities and programs.</p>	<p>Administrator</p> <p>Program Director I or II or assigned staff Backup: Neighbor Island Administrator</p>	<p>May be done annually</p>
<ul style="list-style-type: none"> <li>Outcome and Performance Measurements</li> </ul>	<p><b>Program Outcomes</b> are used for program evaluation. These include:</p> <ul style="list-style-type: none"> <li>% of families completing service plan; 90%</li> <li>% of families completing service plan who have established and implemented a child safety plan at case closure; 95%</li> <li>% of families completing service plan who have no new report of child abuse or neglect at 3 month follow-up; 90%</li> <li>% of families completing service plan that have no new report of child abuse or neglect at 6 month follow-up 95%</li> </ul> <p>DHS reporting requirements: Quarterly reports are sent to the POS monitor on the progress of the families, program</p>	<p>The Program Manager is responsible for the data collection and tracking Backup: Program Director I or II</p> <p>The Program Director I or II is responsible for the</p>	<p>Ongoing</p> <p>Quarterly</p>

A	B	C	D
SERVICE ACTIVITIES & PROGRAM REQUIREMENTS	SPECIFIC TASKS	TITLE OF RESPONSIBLE STAFF (& BACKUP)	TIME LINE / SCHEDULE
	<p>statistics, and areas of concern or highlights in a formal report. In addition, narratives and individual success stories are shared in these reports. Some of this information is also shared at the CFS PQI meeting and with the Family Center Advisory Boards. Precautions are taken to ensure information that can identify a client is not disclosed so that HIPAA laws are followed.</p>	<p>Quarterly Reports and analysis of program data. Backup: Neighbor Island Administrator</p>	
<p>4. <u>Grievance</u> procedures &amp; <u>dispute resolution</u> for both clients &amp; DHS staff when disagreements arise about actions or decisions of the provider.</p>	<p>At time of intake all families are informed of their client rights and responsibilities as well as the client grievance procedure. Clients sign that they have received the procedures and are given a copy to take with them.</p> <p>If there is a disagreement between DHS and the Family Center staff, CFS will set up an informal meeting with the DHS staff and the Family Center staff to see if the issues can be clarified and an agreement reached. If this is not successful, the disagreement will be taken up with the Supervisors of both programs or if necessary the Neighbor Island Administrator or State level staff. CFS recognizes that if the disagreement cannot be settled, the Department will prevail.</p>	<p>Specialist II, Mental Health Specialist Backup: Program Manager, Program Director I or II</p> <p>Program Director I or II Backup: Neighbor Island Administrator</p>	<p>At Intake</p> <p>First meeting within one week of disagreement</p>

2. *The applicant shall provide a projected annual timeline for accomplishing the results or outcomes of the service*

The Family Centers will operate from July 1, 2012 to June 30, 2013. Because the Centers continue to operate with minimal staff hours, the families and community partners are still connected to the centers. Consequently, direct services can begin immediately with no start up time required. The specific timelines for service activities are outlined in the work plan in section 1 above.

3. *The applicant shall describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results*

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.

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 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.

### **The Family Center Program – Nana’s House and Hale Ho`omalulu**

The quality assurance and evaluation process within the Family Center Program consists of several approaches to ensure consistent, thorough and high quality delivery of services to families, collaborating service providers and the Department of Human Services Child Protective Services (CPS) Division. Satisfaction surveys are sent to referral sources annually and to families while they are participating in the program. Quarterly telephone surveys are conducted by the Program Director I and Program Director II (Program Directors) with three families per worker chosen randomly. The Program Directors contacts families to discuss services and obtain feedback. All satisfaction survey results are compiled by the Program Directors and the information is relayed to Family Center staff and also documented in CFS quarterly management reports and DHS quarterly activity reports. Data from the quarterly telephone surveys is shared with the Neighbor Island Administrator and any issues and problems that arise are addressed through program or individual training and supervision. The feedback received from both the satisfaction surveys and the telephone calls is used to evaluate and improve services. The Program Directors and Family Center staff review the survey information quarterly and integrate it into program action plans. As a result, several improvements have been made over the years. For example, at Nana’s House the weekly schedule has been revised to better accommodate late afternoon and evening parenting and counseling sessions in response to comments raised in client satisfaction surveys. Hale Ho`omalulu increased the number of volunteers working at the center to improve communication and decrease the time it took to respond to family requests. The quality assurance and evaluation process is further detailed in the service delivery section of this proposal.

Supervision with staff is another means of quality assurance and evaluation. Direct staff members receive individual supervision at a minimum of twice a month to review professional and personal goals as well as receive case supervision to review the status of families’ goals and their progress. Case files are reviewed and the supervisor documents, in detail, the needs and status of progress for the family as well as any needed case file improvements such as signatures or missing dates. Various tracking methods are utilized by staff, and reviewed by the supervisor in order to accurately monitor outputs, outcomes, client hours and documentation requirements. The Program Director also attends Family Center monthly staff meetings to maintain communication and service coordination at the center and improve service delivery.

All CFS Kauai programs participate in peer case record reviews on a quarterly basis as explained in the previous section. The staff members who review the Family Center cases note any discrepancies from CFS and contract requirements and return them to the Family Center Program Directors. The Program Directors oversee the corrections and note whether or not the corrections indicate a program wide problem that needs to be addressed. The case record reviews are reviewed by the Neighbor Island Administrator to

evaluate whether or not there are office wide concerns that need to be addressed with the Program Directors or require additional staff training. All case record reviews are then sent to the Director of Quality Assurance and Training for further review and are included in the aggregate data for the PQI committee. The Clinical Coordinator also reviews random program client files for compliance as needed. Staff develop actions plans to address areas of improvement that are needed and timelines to review for completion.

The Family Center Program will be prepared for annual contract monitoring that may include site visits with comprehensive evaluation of several areas of performance. The Family Centers will ensure that the Program is in conformance with standard contractual requirements, organization files, accounting practices, and case record keeping. The Clinical Coordinator is responsible for reviewing the Program's processes and files for contract and accreditation requirements. If discrepancies are discovered, action plans are created and progress toward completion is monitored.

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	Program Directors	Quarterly
Case Record Review (CRR)	Peer review of client case records	Program Directors	Quarterly
Pre- and Post-Tests	Confirms client service outcomes	Program Managers	With each parenting class
Client satisfaction surveys	Indicates quality of service experience	Program Managers/Program Directors	At the end of classes, within first quarter of counseling or case management services and at case closure
Referral Satisfaction Surveys	Indicates quality of service from referrals source perspective	Program Directors	Twice a year
Staff Supervision	Review of service and client outcomes	Program Directors	Twice a month
Program PQI Meetings	Review of service numbers, population data and program outcomes	Program Directors	Quarterly
Quarterly Report Review	Review of program data and outcomes	Program Directors Neighbor Island Administrator	Quarterly

The success of the Family Center program is determined by effectively utilizing the program information gathered from all of the tools and review processes. Data must be examined from all levels of the service: individual feedback from the client, outcome data received through pre- and post-tests, individual accomplishments on the service plan goals; client satisfaction surveys; monthly and quarterly aggregate client outcome data;

and, referral satisfaction surveys. This information is then reviewed, analyzed and discussed with Family Center staff, Program Managers, Program Directors, Neighbor Island Administrator, and the CFS PQI and Management Team to support the positive results, define any barriers affecting the program and take corrective actions as needed. The Quarterly Reports are also shared with our Family Center Advisory Boards. This ongoing process has been integral in keeping the Family Center services at both Nana's House and Hale Ho'omalua effectively meeting client and community needs while fulfilling contact requirements and outcome measures for the past 15 years.

4. *The applicant shall list the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.*

### **Performance Outcomes/Output Measures**

#### People to be Served

- 1) 96 Adults will receive direct services.
- 2) 72 Families will receive direct services.
- 3) 84 Children will receive direct services.
- 4) 400 family members will receive indirect services (food pantry, clothing closet, etc.)

CFS has a strong monitoring system that ensures adequate and accurate tracking of client contact and services. Staff accurately track the number of referrals that the Family Centers receive at each center as well as the numbers of people coming in for basic needs such as food and/or clothing. Most referrals to the Family Centers are self referrals or come from other community agencies. Referrals directly from CPS Division are tracked separately. CPS referrals have priority for services at the Family Center. Referrals sent to the Family Centers by CPS are recorded on the client database by the Program Managers. At the end of each quarter or as requested by the CPS Social Worker, an update on client goals and progress will be sent to the CPS Social worker for all open CPS cases. For all families (self referred, referred from other community organizations, CPS referrals), data on the number of families, adults and children will be indicated on a quarterly report.

#### Service Activities

- 1) 160 individuals will receive information and referral services.
- 2) 45 adults and children will receive counseling and support services.
- 3) 25 individuals will complete parenting classes.
- 4) 120 adults and families will receive outreach services (home visits, transportation services, parenting education, budgeting information, nutrition information).
- 5) 20 adults will receive child care.

Tracking ongoing services is an integral part of the quality assurance system for the Family Centers. Accurate tracking acts as an ongoing needs assessment of the clients being served. For example, by tracking the number of families being referred to housing support services, the Family Centers become aware if there is an increase in clients in need of housing. Training for staff and supports to clients can be modified to ensure the most up-to-date information is available. In order to track accurately, all service data is recorded over time for each client utilizing a client spreadsheet at each Family Center. A quarterly worksheet is also utilized for tracking purposes. The tracking data is reviewed during supervision and worksheets are reviewed quarterly by the Program Directors and consolidated for inclusion in the quarterly report. The quarterly report is reviewed by the Neighbor Island Administrator and discussed with the Program Directors so that program corrections can be made if indicated. All service activity information will be reported quarterly.

### Outcomes

- 1) 90% of families will complete service plans.
- 2) 95% of families who complete service plans will establish and implement a child safety plan at case closure.
- 3) 90% of families who complete service plans will have no new report of child abuse or neglect at 3 month follow-up.
- 4) 95% of families who complete service plans will have no new report of child abuse or neglect at 6 month follow-up.

Outcome data provides information to understand the effectiveness of the Program. For example, it speaks to whether or not the Program is meeting programmatic goals for each client. Tracking of program outcomes is accomplished at each of the Family Centers. This information is tracked in a client database at each center as well as aggregated in quarterly reports and various service/client worksheets. The information is reviewed as part of the organization's PQI process and trend data and recommended responses are made to ensure the highest quality of program services possible.

The client outcomes are based on several tools used throughout the Family Center Program. For example, there is a pre- and post-test given to each participant in the parent education classes. These tests give the Family Centers direct information on the parent's level of comprehension of the principles presented in the classes as well as examples of how the parent might apply these principles in various family scenarios. Other outcomes are measured through the family's accomplishments on their treatment plans or if they have set up a safety plan to address any health and safety issues affecting their children. All of the outcomes address the family's ability to maintain the safety of the child. The client satisfaction surveys give the clients a chance to reflect on the quality of the service that they received. The Family Center utilizes these tools to review program effectiveness.

### III. FINANCIAL

#### Budget

1. See attached budget forms regarding the detailed costs of the Family Centers.
2. *Anticipated quarterly funding requests for the fiscal year 2012-2013.*

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$37,847.75	\$37,847.75	\$37,847.75	\$37,847.75	\$151,391.00

3. *The applicant shall provide a listing of all other sources of funding that they are trying to obtain for fiscal year 2012-2013.*

CFS was able to obtain community foundation funding in December 2011 to keep the Family Center doors open. The G.N. Wilcox Foundation awarded the Family Centers \$10,000 to support the food pantry service. CFS also received \$50,000 from Hauoli Mau Loa Foundation to support Family Center operations. Most of these funds will be expended by the beginning of the 2012-13 fiscal year. For the 2012-13 fiscal year, CFS is planning to apply to the G.N. Wilcox Foundation in April for \$20,000 and by July 1 to the Annie S. Knudsen Foundation for \$10,000. The CFS Board of Directors, the Kauai CFS Guild and the Family Center Advisory Board are also working to increase donations for the Family Centers from community members and businesses.

4. *State and Federal tax credits.*

Not applicable.

### IV. EXPERIENCE AND CAPABILITY

#### A. Necessary Skills and Experience

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.

CFS has taken an active role in the prevention, intervention and treatment of child abuse and neglect. Working with the Department of Human Services to increase the safety of children is a major commitment that CFS takes very seriously. As early as the 1940's, CFS provided advocacy for legislative change and counseling to families and children impacted by child abuse/neglect. CFS has implemented programs throughout the State in



collaboration with DHS to provide quality services to the families and children impacted by child abuse/neglect.

CFS has been providing Family Center services on Kauai since Nana's House opened in 1996. Over the past 15 years CFS staff have become highly accomplished in the organizational and clinical skills necessary to manage a successful community-based Family Center. Our staff have demonstrated skills in creating and maintaining community partnerships, building strong community relationships, and successfully engaging and working with families at-risk of child abuse. The staff at the Family Centers have worked at either Nana's House or Hale Ho'omalulu for an average of 9 years with a range between 5 and 15 years. As a result the staff are highly trained and have the skills, abilities and knowledge necessary to help families build a safe, healthy and stable home environment for their children.

The Family Center staff are experienced in creating a warm and inviting environment for families. Staff are always available at Nana's House and Hale Ho'omalulu for families who drop in or come in for basic necessities as well as family educational classes (budgeting, nutrition, ukulele, etc.). As a result, there is no stigma attached to coming to the Family Centers. Staff are skilled at engaging with these families to address any additional needs that they may have and are trained in utilizing the CFS Comprehensive Basic Assessment and weaving it into a well thought out Individual Support Plan with the family. Families can then be linked to other community resources or to Family Center staff with more clinical skills (Mental Health Specialist) if more intensive services are indicated.

Our staff members come from diverse and unique backgrounds, both culturally and socio-economically and are representative of the many cultures on Kauai. This allows the staff to share during informal and formal meetings with each other and to learn about different cultures and approaches with our referred families. They are very sensitive to cultural differences and needs. For example, our Hale Ho'omalulu Program Manager was born on Kauai and raised on the Eastside of the island. She has very strong community ties and works closely with our Hawaiian families and organizations. The Specialist II at Hale Ho'omalulu has strong ties in the Kauai Filipino community and also speaks the language. She brings not only her knowledge of the Filipino community but also an awareness of the needs and resources available to immigrants on Kauai. At Nana's House the Program Manager has lived in and raised her family in the Waimea community for many years. Her knowledge of local families, Hawaiian family traditions and community resources helps to strengthen the Family Center's connection to the community. All of the Family Center staff add to the rich cultural mix at Nana's House and Hale Ho'omalulu and share their knowledge to strengthen our family services. CFS also has translated documents, subcontractors and numerous bilingual staff who assist with interpretation in order to ensure service delivery is not delayed.

Since CFS has been providing services to families and children on Kauai for over 25 years and 15 years in the Family Center Program, we have developed an extensive network of community resources. The Family Centers are available to all area families for

information and referral services so a strong network of resources and agency relationships is essential. Because the staff at the Family Centers work each day listening to families issues and linking them to services, the resource listing at the centers is always up-to-date and staff are very experienced in connecting families directly to needed services. Staff are also knowledgeable about the eligibility requirements and application processes for many services so that families are helped to access the most appropriate services for their situation.

Finally, CFS management, the Family Center staff, and their Advisory Boards have demonstrated their skill in creating an ongoing self-monitoring system to continually assess if the program services are meeting the needs of the community families. During the past 15 years, there have been major shifts in the economic and employment opportunities on Kauai. Nana's House experienced its first major economic shift with the closing of the last sugar mill on the Westside of the island and the end of the sugar based economy. Several years later, there were a few years of low unemployment followed by the most recent painful recession and a dramatic rise in unemployment. As these shifts occurred on the island, the Family Centers have had to reassess the services that they provide and shift priorities and staff to address the current community and family needs. Due to the strong community knowledge of our staff members, they have the ability to be flexible and adaptable to the various changing needs in the different communities we serve. For example, during this most recent economic decline, the Family Centers saw a substantial increase in the number of people coming in for food and other basic needs. As a result, CFS sought additional funding for our food pantry and created a budgeting program at both centers in order to meet the increased need for food and to help families manage their resources more effectively. In addition, the center staff partnered with the DOH Nutrition project and provided cooking and nutrition classes for the parents who come in for food. These classes taught inexpensive ways to eat healthy foods using many of the items they could obtain in the food pantries at Nana's House and Hale Ho'omalua.

### **15 Years of Experience in Providing Family Centers**

CFS has been providing community based Family Center Services to families at-risk of child abuse at Nana's House since its inception in 1996 and has developed extensive experience in supporting their growth and development. Building on these experiences and working with the Title IV B Regional Planning Committee, CFS opened the Kapa'a Center, Hale Ho'omalua in 2002. Both of the centers have been well utilized by area families since their openings. Nana's House and Hale Ho'omalua continue to modify or expand their services to meet the changing needs of the community while consistently meeting all contractual requirements.

CFS was one of the original members of the Kauai Title IVB Regional Planning Committee. This committee was responsible for the Kauai Needs Assessment that described the severe lack of family support services on the Westside of Kauai and in the Kapa'a area. In response to that assessment, CFS proposed to create a Family Center on

the Westside of Kauai. The Committee planned to support the creation of a second center in the Kapa'a area once the Westside center was well established.

CFS worked with the local Waimea community to find a suitable house for the center and decide upon the specific services Westside families wanted in their community. Nana's House opened its doors in October 1996 and over the years has become a treasured part of the Waimea community. The core group of services that form the base for the Family Center – information and referral, outreach and case management, access to food and clothing, individual and family counseling – have remained the same over the years. However, the auxiliary services available at Nana's House have evolved as the needs of the community have changed. One of the original services available at Nana's House was women's health exams provided by Kauai Medical Health Center staff. As these medical services became available at other places in the community, Nana's House stopped providing them. As the community became concerned with the problem of drug abuse, Nana's House was asked to partner with the Kauai Business Association and provide space and support for the community drug prevention worker. Currently, Nana's House is hosting regular sessions with the Legal Aid worker to bring legal services to low income Westside families and partnering with Queen Lili'uokalani Children's Centers for monthly support groups for grandparents raising grandchildren. Our experience at Nana's House has reinforced the need for the Family Center services and partnerships to be flexible to meet the ever changing needs of the community families.

The success of Nana's House was contingent on the Family Center becoming a welcoming place for all Westside families, not just those "in trouble". To foster that feeling of inclusion for all families, Nana's House developed a series of classes open to all Westside families. These classes teaching ukulele, sewing, cooking and quilting not only opened the doors to families, but also brought productive and enjoyable families activities into the community. Nana's House is seen as a safe place where families can learn and have fun together. As the classes grew in popularity, the number of families participating in Nana's House counseling, parenting classes and other basic services also increased.

In 2001, the Title IV B Regional Planning Committee decided that it was time to begin the work towards establishing the Family Center in the Kapa'a area. Because of our successful experience establishing and maintaining Nana's House, CFS was requested to write the proposal and establish a center in the Kapa'a area. The planning committee helped find a suitable house for the center and developed additional resources to support the start-up of the center.

Hale Ho'omalulu had its official opening in October 2002. However, in response to community demand, parenting classes started in an unfurnished living room of the house during the previous summer months. Fifteen adults and fourteen children showed up for the first parenting class with child care. Since 2002, quarterly parenting classes at Hale Ho'omalulu have remained well attended and with high client satisfaction. Pre- and post-tests at the parenting classes indicate that the more than 90% of the participants learned

basic parenting skills and were able to implement them with their children. Hale Ho`omalulu began with these parenting classes, and additional services were added in response to the families' needs until all of the basic service components were established.

Each Family Center was developed in response to the local community. CFS's experience at the two centers has reinforced the belief that services must be adapted to the unique characteristics of the community. At Nana's House, the classes and access to basic food and clothing were what brought families into the center in the beginning. In the Kapa'a area, the parenting classes and counseling services were requested from the opening and the center developed its food pantry and clothing closet later. The rapid acceptance of the Family Center in Kapa'a was facilitated by the experiences learned at Nana's House, the flexibility of the staff to vary the opening of the services in response to the families' requests and the strong reputation that had been built through Nana's House. Services at the centers continue to evolve. This year budgeting and nutrition classes were added to help families coping with the poor economic situation on the island. In addition, a partnership was developed with Ho`ola Lahui to facilitate closer relationships between the Family Centers and the community health clinics in Waimea and Kapa'a.

CFS has the proven experience in providing quality Family Center services. Hale Ho`omalulu and Nana's House provide the full complement of Family Center services and have been meeting or exceeding contract requirements. Both centers provide access to basic food and clothing, parent education, skill building classes, case management, information/referral and counseling services. The Family Centers not only provide the core required services to families on Westside and in the Kapa'a area but have also become a catalyst for bringing new resources to the area. There has been a steady increase in local business and faith-based organizations supporting family services through donations and volunteer opportunities to the centers in both communities. The Family Centers are not only supporting families individually but also developing community support for families.

As an example, this year the Family Centers have seen a tremendous increase in the number of families that have been coming in for food. Working with the Family Center Advisory Boards and calling on local partners, Nana's House and Hale Ho`omalulu have increased the amount of food donations to the centers and the Wilcox Foundation doubled their annual grant to CFS to support the food pantry at Nana's House. The local businesses have also pitched in to support this need.

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

CFS's extensive experience working with families at-risk of child abuse over the past 15 years has helped to develop substantial skills and abilities to provide Family Center services. Following is a comprehensive list of verifiable experience with projects and contracts pertinent to the proposed services for the most recent two years, including performance outcomes. It demonstrates CFS's breadth, experience, and institutional

knowledge of issues impacting at-risk families in a community-based setting. Those services provided in Kauai are highlighted:

Title of Service/Brief Description of Service	Contracting Agency, Contact Person, Phone Number, Email Address, and Mailing Address	Contract/Project Identification Number	Service Period	Performance Outcomes
<p><b>Specialized Substance Abuse Treatment Services for Pregnant &amp; Parenting Women &amp; Children</b> E Ala Hou provides specialized substance abuse treatment services for pregnant and parenting women and children.</p>	<p>Department of Health Alcohol and Drug Abuse Division Terri Nakano (808) 692-7511 terri.nakano@doh.hawaii.gov Kakuhihewa Building 601 Kamokila Blvd., Room 360 Kapolei, HI 96707</p>	<p>ASO Log No. 10-086</p>	<p>7/1/2009-6/30/2011</p>	<ul style="list-style-type: none"> <li>• 18% of women enrolled have completed treatment. (Target: 75%)</li> <li>• 100% of pregnant women receiving services have continuous prenatal services (at least 6). (Target: 50%)</li> <li>• 100% of women enrolled have received case management services and are referred or linked to appropriate services. (Target: 100%)</li> </ul>
<p><b>Baby S.A.F.E. – A Specialized Substance Abuse Outreach and Early Intervention Service for Pregnant Women on Kauai</b> Provides substance using pregnant and parenting women with outreach, support case management, referrals to community resources, and drug and alcohol screening.</p>	<p>Department of Health Alcohol and Drug Abuse Division Terri Nakano (808) 692-7511 terri.nakano@doh.hawaii.gov Kakuhihewa Building 601 Kamokila Blvd., Room 360 Kapolei, HI 96707</p>	<p>ASO Log No. 04-038</p>	<p>7/1/2003-6/30/2009</p>	<ul style="list-style-type: none"> <li>• 74% of clients reduced their use of alcohol or other substances or remained abstinent during their pregnancy and after. (Target: 80%)</li> <li>• 36% of clients participated in substance abuse treatment. (Target: 80%)</li> <li>• 57% of clients participated in early prenatal care. (Target: 80%)</li> <li>• 86% of newborns were born into a substance free environment. (Target: 80%)</li> </ul>
<p><b>Independent Living Services for Youth Program</b> Provides individual and group counseling to youth, ages 12-21 who are living in out-of-home-care on Kauai. The program provides learning opportunities to develop the skills needed to manage the transition to a productive and self-sufficient adult life.</p>	<p>Department of Human Services Clayton Higa (808) 586-5697 chiga@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813</p>	<p>DHS-04-POS-1843</p>	<p>7/1/2003-6/30/2011</p>	<ul style="list-style-type: none"> <li>• 100% of youths' emotions/mood have improved or remained unimpaired. (Target: 80%)</li> <li>• 100% of youth have reduced risk of alcohol/substance abuse or remain abstinent. (Target: 80%)</li> <li>• 97% of youth have demonstrated increased independent living. (Target: 75%)</li> </ul>
<p><b>Permanency Support Services</b> Provides adoptive, legal guardian and permanent custody families with supportive, therapeutic, prevention, and intervention service, which includes home based intervention, parent education, skill based workshops, counseling, therapy and advocacy.</p>	<p>Department of Human Services Clayton Higa (808) 586-5697 chiga@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813</p>	<p>Oahu DHS-04-POS-1884  Kauai DHS-04-POS-1884</p>	<p>7/1/2003-6/30/2011  7/1/2003-6/30/2009</p>	<ul style="list-style-type: none"> <li>• 100% of clients have learned new parenting strategies such as becoming more skilled at setting limits with their child(ren). (Target: 75%)</li> <li>• 100% of clients are more skilled at setting limits with their child(ren). (Target 75%)</li> <li>• 100% of clients are more satisfied with their child-parent interactions. (Target: 75%)</li> </ul>

Title of Service/Brief Description of Service	Contracting Agency, Contact Person, Phone Number, Email Address, and Mailing Address	Contract/Project Identification Number	Service Period	Performance Outcomes
<p><b>Comprehensive Counseling and Support Services and Voluntary Case Management</b> Provides a broad array of services to meet the needs of children and their families including: counseling, outreach services, parenting education classes, supervised visitation and voluntary case management for families referred by the Department of Human Services.</p>	<p>Department of Human Services Rachel Thorburn (808) 586-5245 rthorburn@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813</p>	<p>Maui DHS-04-POS-1855  Kauai DHS-04-POS-1855</p>	<p>7/1/2003-6/30/2011  7/1/2009-6/30/2011</p>	<ul style="list-style-type: none"> <li>• 85% of families have shown improvement in their ability to problem solve including meeting the needs of their child(ren). (Target: 80%)</li> <li>• 90% of families with children under age 5 have not generated any substantiated report of harm/threatened harm while participating in the program. (Target: 90%)</li> <li>• 92% of families have shown improvement in their ability to protect their children and not generate reports of harm/threatened harm while participating in the program. (Target 80%)</li> </ul>
<p><b>Comprehensive Counseling and Support Services</b> Provides a broad array of services to meet the needs of children and their families including: counseling, outreach services, parenting education classes, and supervised visitation for families referred by the Department of Human Services.</p>	<p>Catholic Charities Darlene Beatty (808) 524-4673 beattyd@catholiccharitieshawaii.org Clarence T.C. Ching Campus 1822 Keeaumoku Street Honolulu, HI 96822</p>	<p>Oahu DHS-04-POS-1889</p>	<p>7/1/2003-6/30/2011</p>	<p>Same as above.</p>
<p><b>Family Strengthening Services</b> Provides short term outreach services to enhance coping, parenting skills, and prevent or reduce family stress to families that are referred by the Department of Human Services, Child Welfare Services (CWS) who are not active with CWS.</p>	<p>Department of Human Services Rachel Thorburn (808) 586-5245 rthorburn@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813</p>	<p>Hilo DHS-04-POS-1845  Kauai DHS-04-POS-1846  Oahu DHS-04-POS-1848</p>	<p>7/1/2003-6/30/2011  7/1/2003-6/30/2011  7/1/2003-6/30/2010</p>	<ul style="list-style-type: none"> <li>• 98% of families have not generated any substantiated report of harm/threatened harm while participating in the program. (Target: 90%)</li> <li>• 97% of families have shown improvement in their ability to maintain the safety of the home. (Target: 80%)</li> </ul>
<p><b>Healthy Start Home Visiting</b> Serves families with children prenatal to five years of age, with emphasis on children prenatal to three years of age, who have been assessed at-risk for child abuse and neglect.</p>	<p>Department of Health Maternal and Child Health Division Cindy Hirai (808) 733-9042 Cindy.Hirai@fhsd.health.state.hi.us 741-A Sunset Avenue, Room 204 Honolulu, HI 96816</p>	<p>Waianae DOH 94-02  Central DOH 96-085  Central and Waianae ASO Log # 02-071  Leeward</p>	<p>7/1/1988-8/15/2009  7/1/1989-8/15/2009  7/1/2003-8/15/2009</p>	<ul style="list-style-type: none"> <li>• 98% of all the target children of families engaged in the Healthy Start services achieved age-appropriate developmental milestones or are in process of referral for remedial service. (Target: 90%)</li> <li>• 99% of participating families maintained a safe living environment for their child/children. (Target: 95%)</li> </ul>

Title of Service/Brief Description of Service	Contracting Agency, Contact Person, Phone Number, Email Address, and Mailing Address	Contract/Project Identification Number	Service Period	Performance Outcomes
		ASO Log # 04-153  Kauai – including EID ASO Log #06-118	7/1/1989-6/30/2011  7/1/1989-8/15/2009	
<b>Enhanced Healthy Start</b> Serves families with children prenatal to five years of age, with emphasis on children prenatal to three years of age, who have been referred to Child Welfare Services.	Department of Human Services Rex Shilo (808) 587-3168 rshilo@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813	Oahu DHS-06-POS-3129  Kauai DHS-06-POS-3130	7/1/2005-6/30/2011  7/1/2005-6/30/2011	<ul style="list-style-type: none"> <li>100% of all the target children of families engaged in Healthy Start services achieved age-appropriate developmental milestones or are in process of referral for remedial service. (Target: 90%)</li> <li>98% of participant families have no new confirmed report of child abuse. (Target: 95%)</li> </ul>
<b>Head Start</b> Provides comprehensive services to low-income and age eligible children including pre-school education, health program, empowering families to be self-sufficient, and programming for children with severe special needs.	U.S. Department of Health and Human Services Laura Candeloro (415) 437-8653 Laura.candeloro@acf.hhs.gov 90 7 <sup>th</sup> Street, 9 <sup>th</sup> Floor San Francisco, CA 94103	09CH9054  Head Start Main Head Start Expansion	7/1/2000-6/30/2010  7/1/2010-6/30/2011 10/1/2010-9/30/2011	<ul style="list-style-type: none"> <li>83% of parents met their goal to assist their children with school readiness, such as reading, naming colors, etc. (Target 80%)</li> <li>98% of families have a designated medical home. (Target: 95%)</li> <li>98% of special needs children were referred and received services. (Target 90%)</li> </ul>
<b>Family Center Services Title IVB/2</b> Nana's House and Hale Ho'omalua offer family support centers with the primary goal of increasing availability and accessibility of services to reduce family violence, and child abuse and neglect.	Department of Human Services Clayton Higa (808) 586-5697 chiga@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813	DHS-98-DDS-6326 Nana's House Hale Ho'omalua	7/1/1996-6/30/2011 7/1/2002-6/30/2011	<ul style="list-style-type: none"> <li>100% of client families have identified other resources outside the community center. (Target: 75%)</li> <li>100% of client families have reduced the risk for child abuse and neglect. (Target: 75%)</li> </ul>
<b>Parenting Education and Support Through the Parent Line and Home Reach</b> Provides phone support on parenting education, referrals and support services and a home visiting model to families of young children.	Department of Health Maternal & Child Health Branch Lyn Niitani (808) 733-4054 Lyn.Niitani@fhds.health.state.hi.us 741-A Sunset Avenue, Room 204 Honolulu, HI 96816	Statewide ASO Log No.10-128	1/1/2010-6/30/2012	<ul style="list-style-type: none"> <li>100% of parents calling the Parent Line received information on child development relative to their age of their child. (Target: 80%)</li> <li>100% of families served through Home Reach promoted nurturing and facilitated emotional attachments with their children. (Target: 90%)</li> <li>100% of parent educational resources were updated and distributed throughout that included concrete information regarding parenting. (Target: 100%)</li> </ul>
<b>Domestic Abuse Shelters and Support Services</b> Offers four domestic violence shelters and 24-hour crisis hotlines	Department of Human Services Clayton Higa (808) 586-5697 chiga@dhs.hawaii.gov	Oahu DHS-11-POS-415 DHS-04-POS-1850	10/1/2010-6/30/2012 7/1/2003-9/30/2010	<p><b>Oahu</b></p> <ul style="list-style-type: none"> <li>81% of clients have an increased knowledge of community resources. (Target: 75%)</li> <li>69% of single adults and families have moved from</li> </ul>



Title of Service/Brief Description of Service	Contracting Agency, Contact Person, Phone Number, Email Address, and Mailing Address	Contract/Project Identification Number	Service Period	Performance Outcomes
for victims of domestic violence and their children in Leeward Oahu, Honolulu, West Hawaii and East Hawaii.	810 Richards Street, Suite 400 Honolulu, HI 96813	<p>Hilo DHS-11-POS-416 DHS-04-POS-1900</p> <p>Kona DHS-11-POS-417 DHS-04-POS-1844</p>	<p>10/1/2010-6/30/2012 7/1/2003-9/30/2010</p> <p>10/1/2010-6/30/2012 7/1/2003-9/30/2010</p>	<p>the shelter to a non-abusive home environment. (Target 60%)</p> <ul style="list-style-type: none"> <li>• 96% of clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b>Hilo</b></p> <ul style="list-style-type: none"> <li>• 98% of clients have an increased 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>• 81% of clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul> <p><b>Kona</b></p> <ul style="list-style-type: none"> <li>• 99% of clients have an increased knowledge of community resources. (Target: 75%)</li> <li>• 43% of single adults and families have moved from the shelter to a non-abusive home environment. (Target 60%)</li> <li>• 98% of clients in shelter have completed a Safety Plan for themselves and their children. (Target: 90%)</li> </ul>

## **B. Facilities**

### **Child & Family Service 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 Family Center Program Facilities – Nana's House and Hale Ho`omalua**

Nana's House is located at 9875 Waimea Road in Waimea and serves families on the West Side of Kauai from Koloa to Mana. Hale Ho`omalua is located at 4-1112 Kuhio Highway in the Kapa'a area and serves families from Hanamaulu through Anahola. Home visits and transportation are offered at both sites to make it possible for families to easily

access services. There is ample parking at Nana's House and Hale Ho`omalua and both are located close to a bus stop.

Both Nana's House and Hale Ho`omalua are located in plantation style houses. They are furnished and decorated to create a home like environment where families feel comfortable. Nana's House contains a large living room, a kitchen, a dining room and four smaller rooms. Hale Ho`omalua has a living room, three smaller rooms, a kitchen and a dining area. At both houses the living room is used for meetings; smaller rooms that are being utilized as a "Clothes Closet" which is available for families who need clothing; a counseling room; a children's playroom; and, a small office workspace. The kitchens are used for cooking classes and for the Food Pantry, which are food distribution sites for families in need. The community has donated most of the furnishings at Nana's House and Hale Ho`omalua.

At Nana's House the dining room functions as the office. It is equipped with desktop computers, a copier and a fax machine. At Hale Ho`omalua a former front bedroom serves as the office area and is also equipped with computers, fax machine and a copier. Both centers are connected to the main organization-wide CFS computer network through a high-speed connection.

The administrative staff that supports the Family Centers is housed in the CFS Kauai main office at 2970 Kele Suite, Suite 203 in Lihue. Our office is centrally located and near to the Department of Human Services and other state, county and private provider offices.

Nana's House, Hale Ho`omalua and the Lihue Office are ADA compliant and open daily during regular business hours and evenings and weekends by appointment. There is a bus stop adjacent to each of the Family Centers and the Lihue office. This is a big asset because the bus is often used by our families who do not own a car or can't afford the cost of gas. All facilities are equipped with computers, telephones, VCR and DVD players, meeting rooms, parking, resource libraries of media, and first aid kits.

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

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

#### **1. Proposed Staffing**

The Family Centers are sufficiently staffed to maintain the viability of the proposed program services as well as the administrative infrastructure needed to support timely delivery of services. The Program is fully staffed and consists of a Director of Program Services, Clinical Coordinator, Neighbor Island Administrator, Mental Health Specialist and Program Secretary with a Program Director, Program Manager and Specialist II at each center. While none of these positions are full time to this proposed contract, they have sufficient FTE dedicated to the program to fulfill the

contract requirements and meet program outcomes. The Program anticipates receiving approximately 7-10 referrals a month for case management, information and referral, and counseling services. A much larger number of individual and families come into the centers each month (approximately 200+) for food and clothing. The case loads will vary from 6-10 families in case management or parenting classes per site and 1-4 families receiving counseling services. The case load varies at any given time due to the specific needs of the families receiving services and the length of time that they have been in the program. In the event of illness, vacation, vacancies, or other situations the Program Directors and/or Neighbor Island Administrator will provide coverage. The Program Directors and Neighbor Island Administrator have the qualifications, training and experience to provide all services available at the Family Centers.

The Program recruits through various methods such as posting internally with CFS, advertisements in the Garden Island Newspaper, announcements at community meetings/events and through emails and word of mouth to other community social service providers. Multilingual applicants that meet the requirements are highly encouraged to apply. Seeking educated, trained and experienced candidates from communities served by the Family Centers is essential for engaging the families successfully. The Family Centers choose applicants who are identified to be dedicated and passionate about strengthening families and are willing to go above and beyond (within the boundaries) to achieve success for not only for the families but for the community as a whole.

Staff retention and longevity has been a strategic priority of CFS for several years. The Family Centers have been especially successful with retaining quality staff. All staff members have been with the Family Centers for more than four years. The average length of time that Family Center staff have worked with CFS on Kauai is more than nine years. The two Specialist II staff members have each been working in family support programs at CFS for over 15 years. The staff at each of the Family Centers has become a cohesive team. Accountability, support and a passion for working in their community has been key to their success.

The lines of supervisory authority and program responsibility are clearly defined. The Neighbor Island Administrator is supervised by the Vice President of Programs. The Director of Program Services coordinates with the Neighbor Island Administrator to assure quality and Best Practices across all child abuse/neglect and family support programs. The Director of Program Services reports to the Vice President of Programs. The Neighbor Island Administrator has direct supervision over the Program Directors and the Program Secretary. The Family Center programs each have a Program Director (PDI and PDII) since the centers are located at different sides of the island. Having only one Program Director for both centers made it difficult to maintain the level of support, and knowledge of the community that is optimal for a successful community-based Family Center. Therefore, each Family Center has a

Program Director who oversees the work of the Program Manager, Specialist II and Mental Health Specialist at their site.

The following chart shows the proposed staffing positions and the full-time equivalency (FTE), client to staff ratio, caseload capacity for each position, and justification for the FTE. This Staffing pattern is sufficient to serve the number of people and level of service activities required.

<b>Job Title / FTE</b>	<b>Client/ Staff Ratio</b>	<b>Caseload Capacity</b>	<b>Justification</b>
<p><b>Director of Program Services</b></p> <p>Nana's House 0.0045 FTE</p> <p>Hale Ho'omalu 0.0045 FTE</p>	N/A	N/A	<p>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 (&gt;25 employees) usually through lower level supervisor. Has responsibility for selecting, training, and disciplining employees.</p>
<p><b>Neighbor Island Administrator</b></p> <p>Nana's House 0.0200 FTE</p> <p>Hale Ho'omalu 0.0200 FTE</p>	N/A	Provides coverage in event of staff illness, vacation or vacancies.	<p>Provides oversight and leadership for all programs on the Island of Kauai. Supervises the Program Directors at least monthly with frequent check-ins. Develops, implements, and monitors Kauai program goals, objectives, and outcomes including monitoring the quality and quantity of services and compliance with contract, accreditation, and regulatory requirements. Identifies problem areas and develops solutions with other management staff. Represents CFS in the Kauai community.</p>

Job Title / FTE	Client/ Staff Ratio	Caseload Capacity	Justification
			Provides community leadership through networking with community leaders, funders, and advocacy groups. Provides 24 hour clinical and administrative support to Program staff.
<b>Clinical Coordinator</b>  Nana's House 0.0250 FTE  Hale Ho`omalu 0.0250 FTE	N/A	N/A	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.
<b>Program Director I</b>  Nana's House 0.0700 FTE  <b>Program Director II</b>  Hale Ho`omalu 0.0700 FTE	N/A	Provides backup or coverage for all Family Center direct service workers as needed. Handles client crisis and support on busy days.	Direct management of the Family Centers. Provides support and backup for all direct services. Provides clinical and program supervision for all staff at each Family Center.
<b>Program Manager</b>  Nana's House 0.7000 FTE  Hale Ho`omalu 0.7000 FTE	Varies depending on service provided.	Up to 10 clients a day per center.	Direct client contact for information and referral, food distribution and clothing closet. Greets all visitors to the Family Centers, screens for needs, provides information, community referrals or transfers to Specialist II for more formal assessment.
<b>Specialist II</b>  Nana's House 0.1375 FTE  Hale Ho`omalu 0.1500 FTE	8: 1	Case load varies between 4 and 10 according to the complexity of the families' needs.	Direct client case management services. Assessment and individualized family plan determines case load size. Conducts home or office visits, and provides transportation when needed. Conducts parenting groups.
<b>Mental Health Specialist</b>	4: 1	Case load can vary based on the number of sessions per	Provides individual and family counseling. Coordinates with other service providers.

<b>Job Title / FTE</b>	<b>Client/ Staff Ratio</b>	<b>Caseload Capacity</b>	<b>Justification</b>
Nana's House 0.0500 FTE  Hale Ho`omalu 0.0500 FTE		week. Family/individual session frequency based on need.	
<b>Program Secretary</b>  Nana's House 0.0800 FTE  Hale Ho`omalu 0.0800 FTE	N/A	N/A	Provides clerical support for all aspects of the Family Centers (case files, data collection, program materials, brochures, reports and letters, etc.)

## 2. Staff Qualifications

The Family Centers have staff with appropriate qualifications and necessary training to provide the proposed services and activities and who demonstrate knowledge, capacity, skills and experience in working with the families at-risk of child abuse and neglect. The proposed funding level for the Family Centers does not allow for staff to be employed at full-time positions. Their part-time positions at the Family Centers are often paired with other part-time positions in other programs at CFS. The time and responsibilities are clearly defined and tracked for each program separately. However, staff knowledge and experience at the Family Center is increased by this sharing of positions and expertise between Family Center staff and also staff from other programs co-located at the Family Centers. This allows CFS to deliver the maximum amount and highest quality of services at the level of funding provided.

All Family Center positions require the level of experience, education and training that is necessary to provide high quality services to families at-risk of child abuse and neglect. The safety of the child is the paramount concern at CFS and the organization demands that staff have the skills necessary to address the family issues that might jeopardize the safety and health of the child. The Family Center services are designed to help the families make the necessary changes to create and maintain a safe and stable home for their children.

All applicants are screened for compliance with necessary requirements before they are interviewed. The applicant selected through the interview then goes through a very thorough reference checking process and verification of their education and experience. Criminal history and child abuse and neglect checks are also obtained so that all staff hired for the Family Centers are fully qualified to work with children and families.

All of the current staff have the experience and skills to work with at-risk families in a Family Center setting and in close coordination with other agencies. They are trained in the problems that commonly interfere with family growth: substance abuse, child abuse and neglect, domestic violence, economic hardship and the lack of basic resources for food, housing, clothing and employment. Our direct service staff bring extensive knowledge, training and experience to the Family Centers and the families. They are supervised and provided training by the Program Directors, both of whom have clinical education, training and experience to provide excellent supervision to their staff. They are also trained in how to work with clients that may present with safety issues.

The Family Center staff receive regular individual supervision that covers review of cases, clinical issues and professional development. The Program Directors also help staff with any client or program issues that may have been noted in the program data or client satisfaction surveys. When indicated, corrective action plans may be implemented. The Program Directors also attend the staff meetings that both of the centers hold monthly. These meetings give all of the workers located at the Family Center the opportunity to coordinate services, share information and strengthen the overall functioning of the Program.

The Program Directors meet quarterly with each of their staff to work on a personal goal and review their progress. Individualized training plans are also created to help the staff with professional development.

The Program Directors are supervised by the Neighbor Island Administrator at individual meetings at least once a month. The individual meetings focus on program outcomes as well as professional development. Group meetings with all of the supervisors at CFS Kauai are held once a week. These meetings focus on issues that may be common to several programs, upcoming training opportunities and community events as well as brief training on fiscal or programmatic skills.

The following chart shows the positions, responsibilities/service activities, backup staff for direct service positions, minimum qualifications, and current qualifications for proposed staff positions in the Family Center program.

Job Title Incumbent Name	Backup Staff (for Direct Service Staff)	Minimum Qualifications (Education and Experience)	Incumbent Qualifications/ Meets Qualifications/ Exceeds Qualifications/ Internal Waiver/ Waiver from Funder
Director of Program Services Angie Doi	N/A	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, over 12 years post Master's experience in management, supervision and administration, and 16 years experience in domestic violence. <b>Exceeds qualifications.</b>



Job Title Incumbent Name	Backup Staff (for Direct Service Staff)	Minimum Qualifications (Education and Experience)	Incumbent Qualifications/ Meets Qualifications/ Exceeds Qualifications/ Internal Waiver/ Waiver from Funder
Clinical Coordinator Susan Richard	N/A	Master's Degree in Human Services from an accredited school. One year supervisory experience required. Knowledge of and experience with quality improvement activities required.	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>
Neighbor Island Administrator Lucille Calderon	Program Directors	Master's Degree in Human Services and five years post Master's supervisory and administration experience in community or social services settings.	Master's Degree in Counseling Psychology. Over 20 years supervisory experience, and over 28 years of direct service and administrative service. <b>Exceeds qualifications.</b>
Program Director II Hale Ho`omalu Novelyn Hinazumi	Program Manager, Specialist II and Mental Health Specialist	Master's Degree in the Human Services area. Over four years, up to and including six years. Three years experience, including two years of administrator and supervision.	Master's Degree in Counseling Psychology. Licensed Marriage and Family Therapist. Nationally Certified Counselor. Over 10 years administrative and clinical experience. Six years supervisory experience. <b>Exceeds qualifications.</b>
Program Director I Nana's House Joyce Spinden	Program Manager, Specialist II and Mental Health Specialist	Master's Degree from a school accredited by a recognized accrediting agency. Requires knowledge of an advanced type. Over two years, up to and including four years. Over three years experience, including two years of administration and supervision.	Master's Degree in Counseling. Over six years administrative and clinical experience. Over four years supervisory experience. <b>Exceeds qualifications.</b>
Program Manager  Nana's House Anna "Momi" Machado  Hale Ho`omalu Dory Farias	Program Directors	Bachelor's Degree in Health, Human Services or related field preferred. Five years directly related experience might be substituted for Bachelor's Degree.	Momi Machado: High School Diploma. Over 12 years experience providing direct service to families and children. Over 10 years experience managing Nana's House.  Dory Farias: High School Diploma. Over seven years experience providing direct service to families and children. Over three years experience managing Hale Ho`omalu.  <b>Waivers from Funder:</b> Waivers for the Bachelor's Degree were approved by DHS based on Dory Farias and Momi Machado's extensive experience and training.

Job Title Incumbent Name	Backup Staff (for Direct Service Staff)	Minimum Qualifications (Education and Experience)	Incumbent Qualifications/ Meets Qualifications/ Exceeds Qualifications/ Internal Waiver/ Waiver from Funder
Mental Health Specialist Margaret Smith	Program Directors	Master's Degree in counseling, psychology, marriage and family therapy, or social work from an accredited school and over two years, up to and including four years experience.	Master's Degree in Counseling. Licensed Marriage and Family Therapist. Substance Abuse Professional. Over 25 years experience as a licensed therapist working with adults, children and families <b>Exceeds qualifications.</b>
Specialist II  Nana's House Nancy Golden  Hale Ho`omalu Aida Pascual	Program Managers	Bachelor's Degree in Human Services and four years experience or more with domestic violence, substance abuse, and child abuse and neglect.	Nancy Golden: Bachelor's Degree in Early Childhood Education. Over 18 years experience in the field and child abuse and neglect. <b>Exceeds qualifications.</b>  Aida Pascual: Bachelor's Degree in Elementary Education. Over 25 years experience in the field of child abuse and neglect. <b>Exceeds qualifications.</b>
Program Secretary Lehua Cristobal	N/A	High School Diploma and business training and over two years, up to and including four years of experience. Able to use computer with one to two years experience.	High School Diploma plus college courses in office administration. Over four years experience. <b>Meets qualifications.</b>

### Background Checks

**Criminal history background checks:** Once an employment offer is tendered and accepted, a criminal history check is conducted via the Hawaii Criminal Justice Data Center for all new direct service employees. A printed report of each criminal conviction record check is maintained in the employee's personnel record. An offer of employment is withdrawn or the position of a direct service provider is terminated when a prospective or current direct service provider has a criminal conviction as indicated as follows:

- The criminal conviction occurred within the last 10 years; and
- The crime for which there is a conviction has a rational relationship to a direct service provider's position.

**CPS Registry checks:** Once an employment offer is tendered and accepted, a check is conducted via the Protective Services Central Registry for all new direct service employees. A printed report of each record check is maintained in the employee's personnel record. A check is completed upon initial hire, twelve months later, and thereafter, every two years.

Unfavorable findings do not necessarily result in the employee's dismissal and are reviewed on a case-by-case basis with the following criteria:

- The nature and gravity of the offense
- The amount of time that has passed since the offense
- The nature of the position in question

**Driver's Abstract:** Once an employment offer is tendered and accepted, a Driver's Abstract is requested from the new hire who is required to drive, as determined by their job description. A check is completed upon initial hire and annually upon anniversary date. The document obtained by the employee is maintained in the employee's personnel record. Employees are required to have a satisfactory Driver's Abstract. Satisfactory is described as:

- No more than one moving violation in the past three years, and
- No DUI convictions within the past three years.

### 3. Supervision

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. The supervisor determines how frequently supervision sessions need to occur based on accreditation and contract standards as well as a staff member's education and experience level. The immediate supervisor is responsible for ongoing supervision of staff.

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.

### **Accountability and Adherence to the Service Model and Performance Standards**

The Neighbor Island Administrator meets weekly with the Kauai supervisory team. This meeting includes the Family Center Program Directors, Program Managers and supervisory staff from all of the other CFS Kauai programs. These meetings encourage communication and sharing across program lines and provide an opportunity for the Neighbor Island Administrator to discuss any management decisions, changes in program, PQI findings or other pertinent information directly with the supervisory staff. These meetings are brief but the supervisors are encouraged to add their ideas and concerns to the agenda. In addition to the weekly meetings, the Neighbor Island Administrator meets with the Program Directors individually at least once a month. In these more formal supervisory sessions, the staffs' progress on personal and professional goals are discussed and the program data from their programs is reviewed. These meetings also give the Program Directors the opportunity to discuss any program concerns (e.g. personnel, fiscal, community relations, and client incidents).

The Neighbor Island Administrator has the education, program and community experience to thoughtfully manage the Kauai programs. Her management style encourages creativity but also conveys high expectations for quality program services to the families, strong coordination with community partners, and family and program outcomes that are consistently high. CFS Kauai staff functions (staff meetings, holiday parties, birthday celebrations, etc.) are well attended and help to encourage communication and cooperation among staff.

For each of the Family Centers, hourly individual supervision sessions are held at least twice monthly for staff. The Program Director and staff discuss individual cases, program and personnel issues such as trainings, resources, documentation and client chart reviews. General personnel issues like standards of conduct and schedule for holidays and/or vacations, reviewing of agency code of ethics or program training requirements are also reviewed at these meetings. Specific individual supervisory disciplinary concerns such as timeliness or adherence to attendance rules are discussed in one-on-one sessions and action plans with follow-up dates are documented and created with staff.

Because the families are often involved in more than one service at the Family Centers, group supervision is also provided to facilitate a coordinated approach for each family. Staff meetings are held once a month at each of the Family Centers. These meetings not only include the specific Family Center staff but also other program staff who work out of Nana's House or Hale Ho'omalua. These staff meetings allow staff from the difference programs to collaborate together, discuss the overall status of the Family Center, share concerns and provide input, review House rules and procedures, discuss scheduling issues, and share information on program and community resources.

Additional meetings are scheduled as needed between the supervisor and staff members. A strengths-based positive approach is utilized to support the staff in all individual and group supervision sessions. Regular follow-up is provided by the Neighbor Island Administrator to ensure that staff receive the knowledge, skills, and tools they need to succeed. Both of the Family Center Program Directors have experience as a supervisor and extensive training in supervisory skills as is evident in their ability to motivate and train the staff. The Program Managers at Nana's House and at Hale Ho'omalulu were both originally hired at the centers as outreach workers. The Program Directors noted their personal qualities, intelligence and eagerness to learn and provided them with the training and opportunities to take on new community and center responsibilities. Each year, they added new responsibilities at the Family Centers or out in the community: public speaking, managing the Food Pantry, or learning new computer skills. Soon the staff had acquired the necessary skills, experience and confidence to be promoted to Program Managers. The organization is committed to supporting their success and assisting staff with challenges.

The staff members at the Family Centers have clearly defined roles. However, the program has a tremendous amount of flexibility in meeting the needs of the families. The staff work together to ensure the families receive all of the support that they need but without any duplication of services. Each Family Center works as a team to assist the families with whatever request that brings them into the house. The most essential first outcome is that the family feels that they are welcome at the Family Center and know that there are caring and knowledgeable staff available. All of the staff and volunteers have specific functions but they are also cross trained so that a family can be immediately assisted no matter who is at the Family Center on any given day.

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. Professional Development Plans for each staff keep commitments to growth and skills improvement among staff from managers to direct service staff. Supervision procedures have been developed to maintain quality delivery of services and provide for systematic ongoing monitoring of staff.

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

CFS is committed to increasing staff knowledge and skill development through its training program. 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's 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 Family Center Program will provide orientation to the program within 30 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>Program Specific Orientation – within 30 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 data forms, and timelines for submission of reports
• Review of referral process and community resources
• Review of administrative policies and procedures, confidentiality and HIPAA

<b>Program Specific Orientation – within 30 days of employment</b>
• 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
• 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, computer network drives, timekeeping system, and databases

<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

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.

The staff at the Family Centers see an amazingly broad range of family and community issues on a daily basis. Since the Centers are open to the community, families walk in with new issues, questions and requests each day. Staff are encouraged to take the opportunities offered in the community and through CFS training to gain information, skills and knowledge in many different areas. Individualized training plans are utilized and are very helpful in building staff knowledge and confidence. These plans are reviewed and updated on a regular basis.

The Family Centers have an open door policy and many families and individuals come into the centers for food, clothing, information and referral. As a result, there are occasions when individuals come into the center who are disagreeable, angry or threatening. The Family Center staff are trained annually in verbal de-escalation as well as CPI, which is a non-violent crisis prevention and intervention training that follows the guidelines of the Crisis Prevention Institute. CPI promotes the care, welfare, safety and security for staff as well as those in their care. The Hale Ho`omalulu Program Director II is a certified trainer in CPI and often gives brief refreshers and tips to the staff. Whenever there is an incident at the Family Centers, the involved staff are debriefed and safety measures are reviewed. The incident is discussed by the respective Program Director with the staff to ensure that staff are trained and experienced in handling a potentially dangerous situation. Any safety concerns that can be corrected by changes in procedure or additional training are implemented.

Topics for ongoing training include but are not limited to:

<b>Training Focus</b>	<b>Trainings</b>
Program Philosophy	<ul style="list-style-type: none"> <li>• DHS Guiding Principles</li> <li>• Protective factors for families</li> <li>• Child abuse and neglect dynamics, prevention and intervention strategies</li> </ul>
Risk, Legal and Regulatory Requirements	<ul style="list-style-type: none"> <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> <li>• CPI</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> </ul>



<b>Training Focus</b>	<b>Trainings</b>
Service Delivery Basics	<ul style="list-style-type: none"> <li>• Documentation</li> <li>• Client advocacy</li> <li>• New referral resources in the community</li> <li>• Case management/collaboration/ coordination</li> <li>• Child development</li> <li>• Basic health and medical needs of the service population to include special needs</li> <li>• Service provision through home visiting and community-based settings</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>• 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> <li>• Domestic violence</li> <li>• Parent education</li> <li>• Child development</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; administration, human resources, supervision and 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, domestic violence, mental health, and substance use and abuse.

## **B. Organization Chart**

All CFS programs are supported organizationally by management staff who oversee and monitor the quality and integrity of the community-based services.

The proposed service team for the two Family Centers consists of the Program Director II at Hale Ho`omalulu and the Program Director I at Nana's House. Each Center has a Program Manager, Specialist II and Mental Health Specialist. These staff members implement or supervise the direct services provided at the Family Centers. The Mental Health Specialist carries a counseling case load of 1-4 clients at each center. The Specialist IIs each carry a caseload of 10 -12 families. The use of part-time staff allows for an increase in the number of people working at the centers using the same number of

hours from previous years. This allows for more flexibility in providing program services and availability of staff during regular work hours to welcome families. The Program Directors provide clinical supervision to each of the Family Centers. This improves the consistency and quality of services provided to the families.

The Family Center staff are supported by the Neighbor Island Administrator, Program Secretary, Clinical Coordinator and Director of Program Services. The service team members are CFS employees; no subcontracting is anticipated for this contract at this time.

The lines of supervision are delineated on the program organization chart. The Neighbor Island Administrator provides backup supervision whenever the Program Director(s) is on leave or if the position becomes vacant.

CFS provides the infrastructure and support to manage programs effectively. This support is provided through a number of mechanisms including direct supervision and guidance from the Vice President of Programs, Director of Program Services, Quality Assurance and Training Department, strategic planning process, CFS communication plan, and senior management.

The statewide CFS organization chart is attached. In addition, the CFS Kauai Organization chart highlights where Nana's House and Hale Ho'omalulu fit within the organizational structure and illustrates the reporting structure. The organizational charts for Nana's House and Hale Ho'omalulu highlight positions and minimum qualifications at each center.

## **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 CFS, Jointly and Severally

Case No. CV05-00810 DAE KSC, filed in the United States District Court for the District of Hawaii.

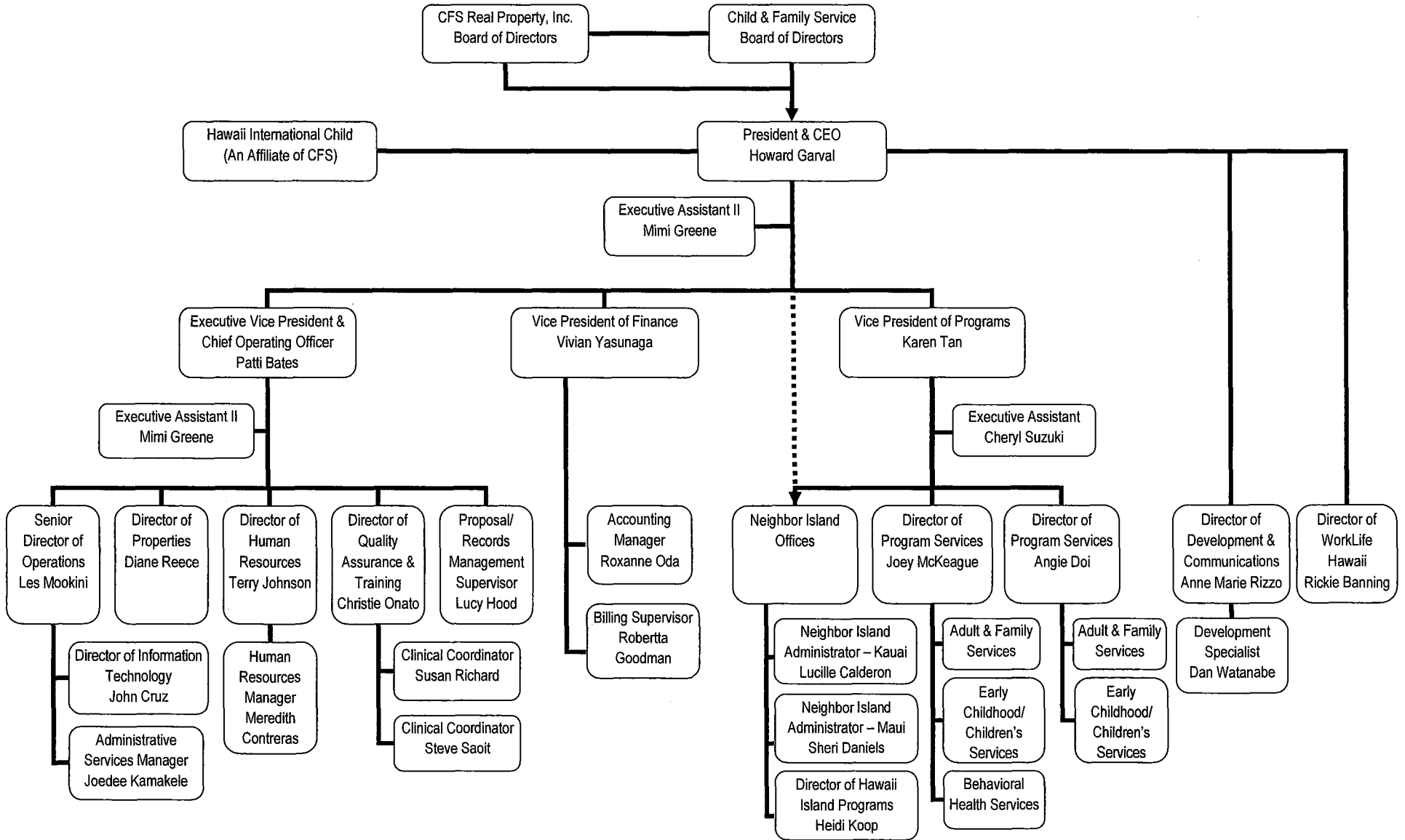
CFS was named in a complaint filed on December 28, 2005 with CFS filing an answer on June 2, 2006. On April 29, 2008 the Federal District Court granted CFS and Clark's Motion for Summary Judgment. Trial as to the remaining parties was stayed pending disposition of an appeal filed by the Karen Duty and 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.

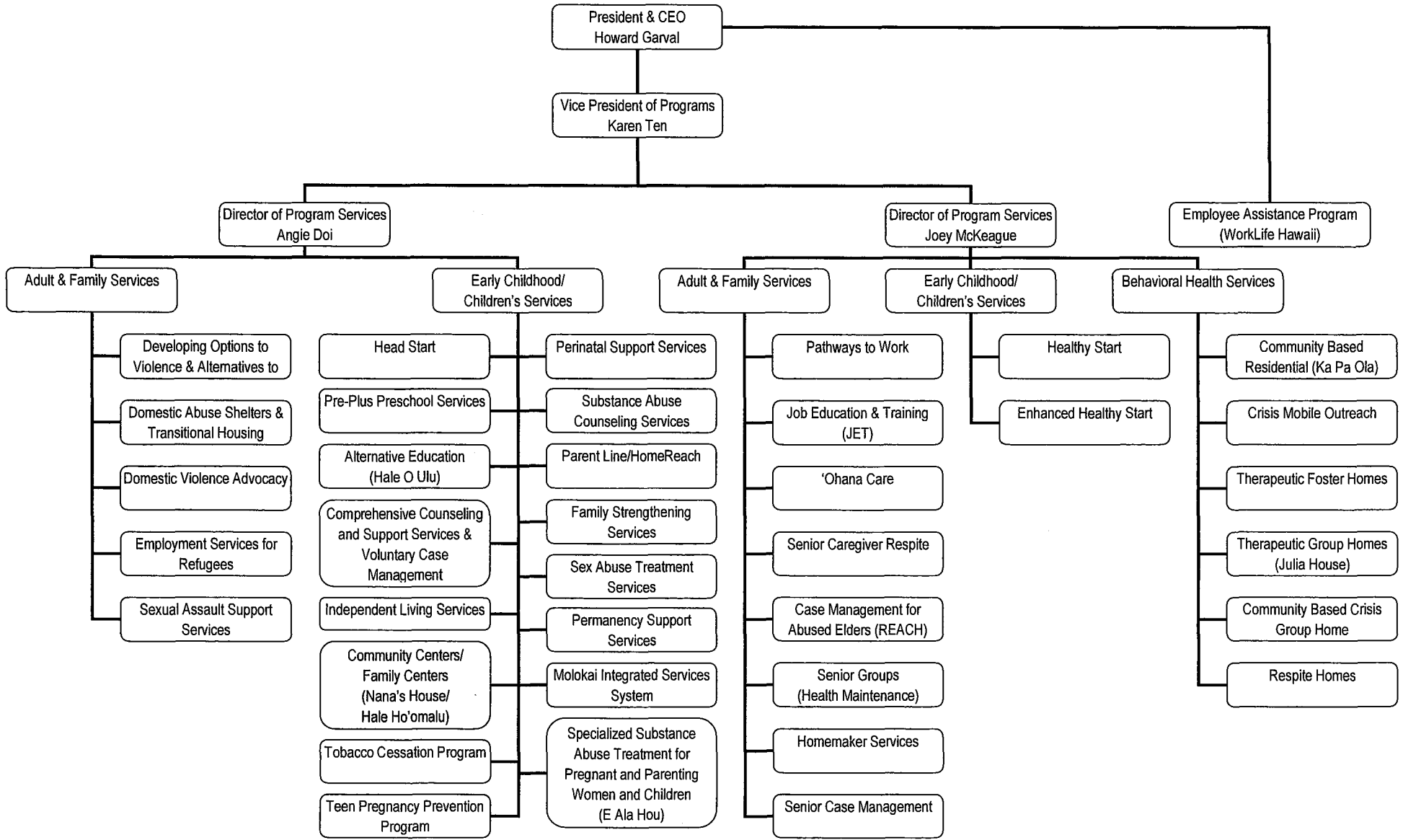
**B. Licensure or Accreditation**

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.

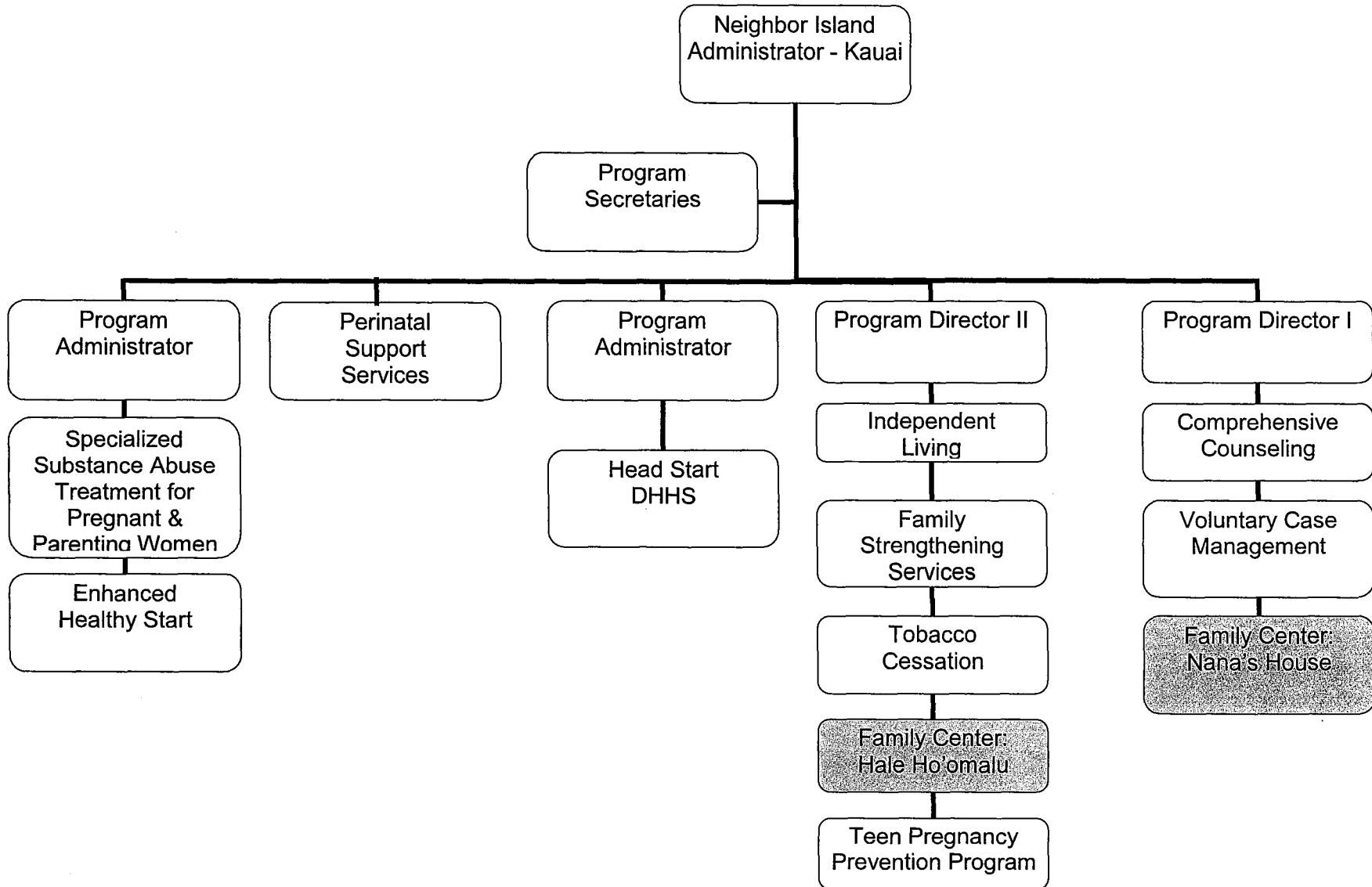
# Child & Family Service Organization Chart



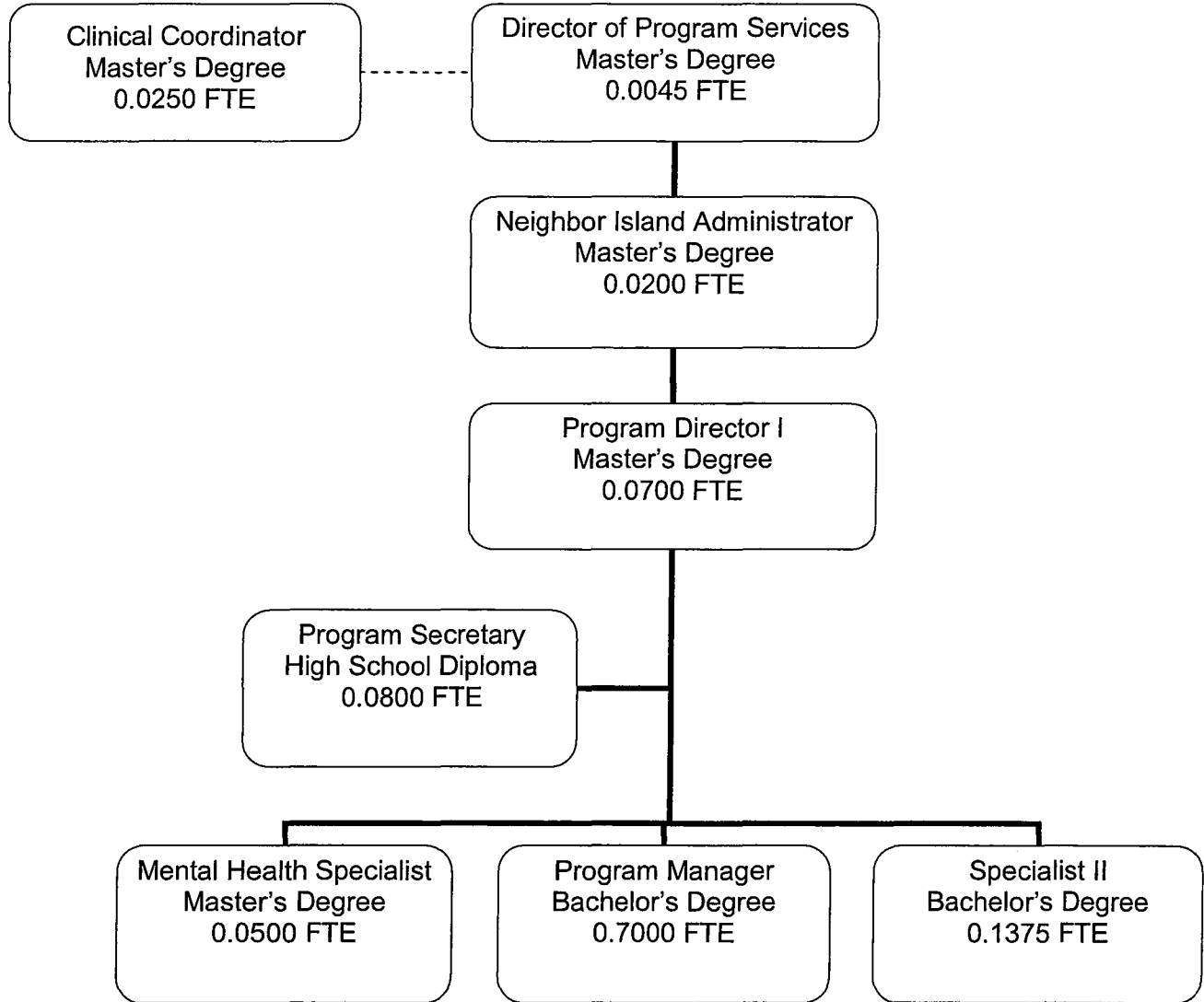
# Child & Family Service Organization Chart



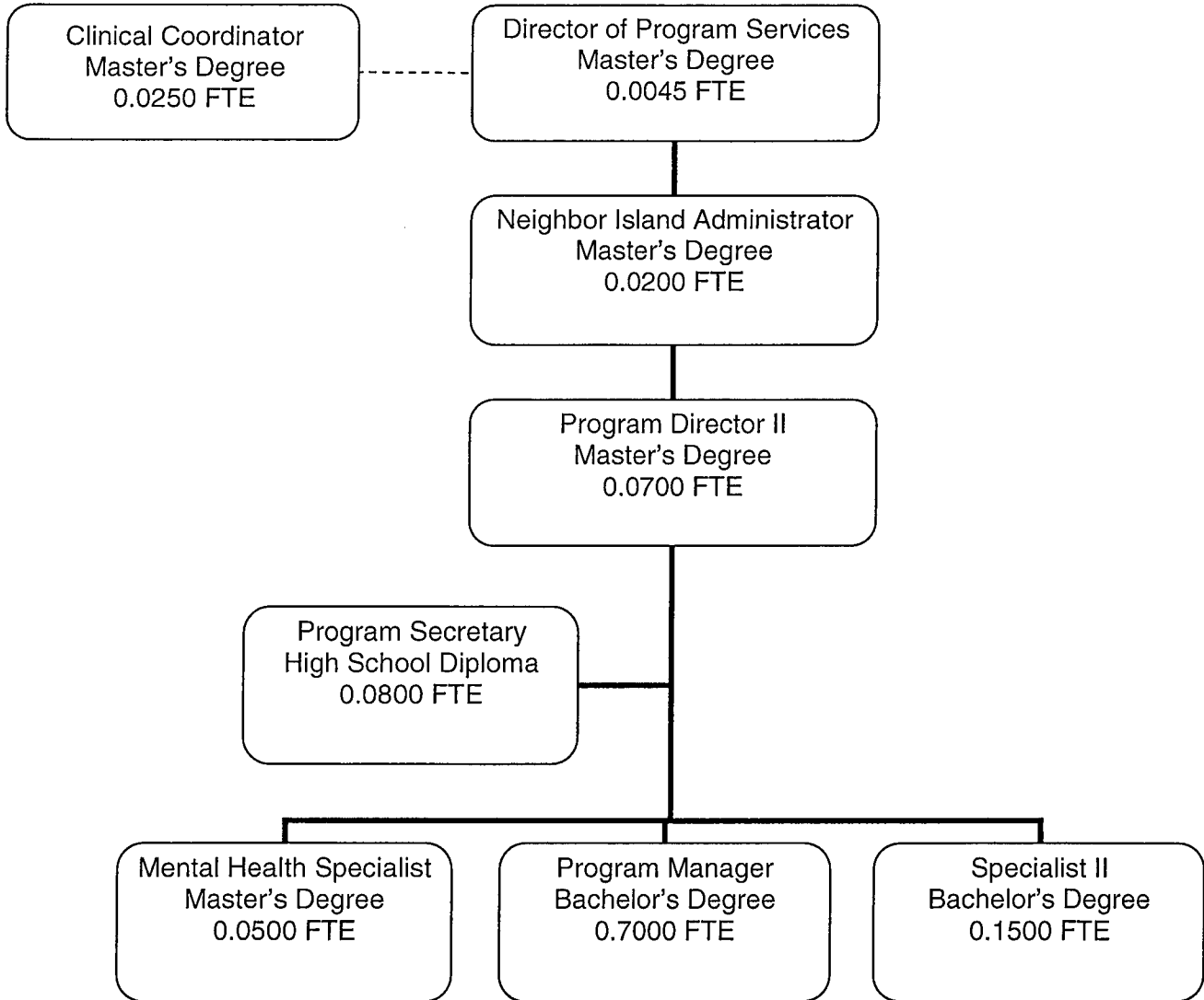
# Child & Family Service Kauai Office Organization Chart



Child & Family Service  
Family Centers – Nana’s House  
Organization Chart



Child & Family Service  
Family Centers – Hale Ho`omalulu  
Organization Chart





**BUDGET REQUEST BY SOURCE OF FUNDS**  
(Period: July 1, 2012 to June 30, 2013)

Applicant: Child & Family Service- Community Centers

<b>BUDGET CATEGORIES</b>	<b>Total State Funds Requested (a)</b>	<b>(b)</b>	<b>(c)</b>	<b>(d)</b>
<b>A. PERSONNEL COST</b>				
1. Salaries	81,475			
2. Payroll Taxes & Assessments	11,223			
3. Fringe Benefits	11,502			
<b>TOTAL PERSONNEL COST</b>	<b>104,200</b>			
<b>B. OTHER CURRENT EXPENSES</b>				
1. Audit Services	378			
2. Insurance	2,331			
3. Lease/Rental of Equipment	1,200			
4. Lease/Rental of Space	11,345			
5. Mileage	2,700			
6. Postage Freight & Delivery	240			
7. Publication and Printing	120			
8. Repair & Maintenance	1,920			
9. Supplies	1,802			
10. Telecommunication	2,460			
11. Utilities	1,500			
12. Other: Administrative Support	21,195			
<b>TOTAL OTHER CURRENT EXPENSES</b>	<b>47,191</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>151,391</b>			
<b>SOURCES OF FUNDING</b>		<b>Budget Prepared By:</b>		
(a) Total State Funds Requested	151,391	Rachel Desrochers, Budget Monitor II		
(b)		808-681-1405		
(c)		Name (Please type or print)		
(d)		Phone		
		01/27/12		
		Date		
<b>TOTAL BUDGET</b>	<b>151,391</b>	Name and Title (Please type or print)		



## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Child & Family Service- Community Centers

Period: July 1, 2012 to June 30, 2013

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
<b>TOTAL:</b>				
<b>JUSTIFICATION/COMMENTS:</b>				
N/A				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
<b>TOTAL:</b>				
<b>JUSTIFICATION/COMMENTS:</b>				
N/A				

## BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: Child & Family Service- Community

Period: July 1, 2012 to June 30, 2013

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: 2010-2011	FY: 2011-2012	FY:2012-2013	FY:2012-2013	FY:2013-2014	FY:2014-2015
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
<b>TOTAL:</b>						
<b>JUSTIFICATION/COMMENTS:</b>						
N/A						

**DECLARATION STATEMENT  
APPLICANTS FOR GRANTS AND SUBSIDIES  
CHAPTER 42F, HAWAII REVISIED 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 & Family Service  
(Typed Name of Individual or Organization)



1-31-12  
(Date)

Howard S. Garval, President and CEO  
(Typed Name (Title))