



STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
LANSING

RICK SNYDER
GOVERNOR

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September 26, 2011

The Honorable Bruce Caswell, Chair
Senate Appropriations Subcommittee on DHS
Michigan State Senate
Lansing, MI 48933

The Honorable David Agema, Chair
House Appropriations Subcommittee on DHS
Michigan House of Representatives
Lansing, MI 48933

Dear Senator Caswell and Representative Agema:

Section 523(1) of 2010 Public Act 190 (Enrolled House Bill No. 5882) requires the Department of Human Services (DHS) to report during budget hearings on prevention programs for which money is appropriated to the Department. The attached excerpt from Michigan's Child and Family Services Plan specifically addresses the information required by this Section.

If you have any questions about the information contained in this report, please contact Michael Foley, Director of the Michigan Children's Trust Fund at (517) 335-1938.

Sincerely,

A handwritten signature in black ink that reads "Susan Kangas".

Susan Kangas,
Chief Financial Officer

cc: Senate and House Appropriations Subcommittees
Senate and House Fiscal Agencies
Senate and House Policy Offices
State Budget Director

Enclosure: Prevention of Abuse and Neglect – Children's Trust Fund of Michigan

I. Prevention of Child Abuse and Neglect

Children's Trust Fund of Michigan

The Children's Trust Fund (CTF) serves as Michigan's source of permanent funding for the statewide prevention of child abuse and neglect. Established by the Michigan Legislature as an autonomous agency by Public Act 250 of 1982, CTF does not receive state general funds for operations. CTF was designated by Governor Granholm to serve as the state lead agency to receive and administer the federal Community Based Child Abuse Prevention (CBCAP) grant.

The United States Congress mandates that states receiving federal Child Abuse Prevention and Treatment Act funding develop and utilize a minimum of three Citizen Review Panels. In 1999, CTF assumed responsibility for overseeing the Michigan Citizen Review Panel for Prevention (CRPP). CTF is working in conjunction with the DHS to strengthen this role in the coming five years.

CTF hired a new executive director in the summer of 2009. The executive director will be responsible for overall operations of CTF finances, staff and local council activities, developing productive relationships with state legislators, state department personnel and the Board of Directors. He will also be responsible for developing and overseeing fundraising activities. The director will also lead CTF in the development of a strategic plan that is built upon the FY2010-FY2012 strategic plan outlined in the 2009 CTF biennial report.

To serve Michigan's families and protect Michigan's children, CTF works with an extensive network of local prevention organizations. CTF provides funding for direct service programs and local child abuse and neglect prevention councils (hereafter referred to as "local councils"). By statute, local councils develop and facilitate collaborative community prevention programs. Councils also conduct local needs assessments and provide public awareness and other prevention services based on community needs. CTF supports its community-based prevention programs through training and technical assistance, evaluation assistance, Child Abuse Prevention Month resources, and other support activities.

CTF is also the administrator of a Prevention Pilot initiative funded by the Department of Human Services (DHS). The Prevention Pilot has been designed to give priority for activities and services to Children's Protective Services (CPS) Category III and IV cases for families with one or more children under 18 years of age. In addition, families that have three (3) or more of the identified child abuse and neglect risk factors, but who may not have yet come to the attention of CPS, are also eligible for these services. In the coming year the service array will be expanded to include post-adoption support services for families that adopt children who had been in the child welfare system. The services are targeted to high-need areas of four major urban centers in Michigan.

Service Description

In FY 2009, CTF local councils were in their second year of a three-year grant cycle. Local council allocations are awarded based on compliance with the CTF designation agreement and tier criteria. Most local councils serve a single county, but several northern Michigan councils serve two or three counties. In addition to developing collaborative community prevention programs, councils provide non-direct service prevention activities based on identified community needs.

By statute, local councils have as their primary purpose the development and facilitation of a collaborative community prevention program. Local councils are also charged with conducting local needs assessments and increasing public awareness, and they provide a wide array of additional services based on specific community needs. Activities include providing information and referrals, implementing public awareness campaigns, distributing prevention information, organizing Child Abuse Prevention (CAP) Month activities, providing prevention leadership on local committees, developing local resource directories and providing educational workshops and in-service trainings such as Shaken Baby Syndrome, body safety, parent/child nurturing, and mandated reporting.

Direct service grants fund prevention programs and services to promote strong, nurturing families and to prevent child abuse and neglect. Direct service programs are designed to meet identified needs based on community assessments. They provide services to families who do not have an active CPS case (for example, CTF does not fund tertiary or crisis intervention programs).

Expanding and strengthening the range of services

A priority for CTF for the coming five years is to evaluate the most effective ways to implement best practices into our grantees' programs and services. Specific areas that CTF will address are the inclusion of evidence-based and evidence-informed practices (EBP/EIP), improved evaluation processes among grantees, improved reporting on outcomes, and the increased use of logic models. CTF will provide trainings and technical assistance to help grantees develop and implement programs and processes that align with these priorities. Additional goals are as follows:

Local Councils: The four local council work groups – Standards, Capacity Building, Designation Agreement, and Education – developed an overarching guiding body, the Local Council Work Group, in March of 2008. During the coming five years, CTF plans to continue this work group and to explore ways to implement stronger peer review, possibly via “tier mentoring”, regional meetings or site-to-site visits.

CTF will also provide outreach and technical assistance to any councils struggling with evaluation or sustainability issues. Starting with the FY 2010 application renewal process, all councils will be required to submit logic models with their prevention plans. CTF will continue to provide training and technical assistance to help strengthen councils' evaluation and outcome activities. In particular, CTF will support the Tier I and Tier II local councils that often do not have the capacity or staffing of the Tier III

councils. CTF will also explore ways to help support program areas such as Safe Sleep and Mandated Reporting; in addition to working with federal partners to identify evidence-informed primary prevention services, outcomes and evaluation tools.

Goals for FY 2010-2014:

1. Assist local councils in sustainability, capacity building, and best practices efforts.
 - a. Objectives:
 - i. Councils will move positively along the continuum of evidence-informed programs and practices.
 1. **Measurement:** FY 2013-FY 2015 prevention plans will incorporate stronger logic models, expected outcomes, and measurements.
 2. **Measurement:** FY 2013-FY 2015 prevention plans will include incorporation of a greater number of research- or evidence-based programs and practices than FY 2010-FY 2012 plans.
 - ii. CTF will provide logic model and outcomes trainings prior to the new grant renewal period (for FY 2013-2015).
 - iii. CTF and local councils will increase their collaborative efforts.
 1. **Measurement:** Feedback from the monthly local council work group.
 2. **Measurement:** Feedback from the annual satisfaction and needs survey.
 - iv. Councils will develop stronger partnerships with local initiatives (for example, Great Start Collaboratives, CTF direct service grantees, etc.).
 - v. CTF will continue to fund 72 local councils at the current level of funding.
 1. **Measurement:** Total grant allocations.
 - vi. CTF will bring Lenawee County, the only county currently without a prevention council, into the CTF-funded network.
2. Provide leadership for Child Abuse Prevention Month.
 - a. Objectives:
 - i. CTF and councils will implement a coordinated, statewide CAP Month initiative.
 - ii. CTF will provide adequate resources to councils for CAP Month.
 1. **Measurement:** CAP Month survey.
3. Incorporate continuous quality improvement principles through a formal peer review process.
 - a. CTF will create a best practices work group in FY 2010 to discuss peer review in local councils and identify viable options for peer review.

- b. CTF will implement a formal peer review process with the new three-year council application in FY 2013.

Goals for FY 2010-2011:g

- Pilot a local council peer review process.
- Review survey results from Child Abuse and Prevention Month 2009 and use them to determine plans and direction for future activities.

Goals for FY 2012-2014:

- Implement a statewide peer review process for local councils.
- Develop a survey or measurement tool to measure the impact of the peer review process.
- Provide logic model and outcomes trainings prior to the new grant application renewals (for FY 2013-2015).

Direct Service Programs: CTF will refine the criteria and outcome expectations of direct service programs to implement a more data-driven system. A major change for FY 2010 grants will be the required use of the FRIENDS Protective Factors Survey, a valid and reliable tool developed by the University of Kansas, for any family or parent support programs. Use of the PFS will allow CTF to collect more comprehensive, outcome-based evaluation data from its direct service grantees.

In the APSR for 2009, it was noted that the direct service RFP process underwent significant revisions in FY 2008 to strengthen services and improve outcomes. These changes remain in place for 2010, including:

- The requirement that programs minimally meet the “Emerging Programs and Practices” level as defined by the federal CBCAP Program Assessment Rating Tool (PART) guidelines.
- The inclusion of the five protective factors as identified by FRIENDS, and the requirement that grant applicants state how their proposed service(s) will promote one or more of the protective factors.
- Stronger emphasis on parent involvement and leadership.
- A standard form distributed by CTF to report on parent/client satisfaction. This will help CTF more cohesively evaluate client satisfaction and will ensure that grantees are actively incorporating client feedback into their programs.

Peer Review: Over the coming five years, CTF will develop a formal peer review model for the CBCAP-funded programs.

It is important to DHS to engage the grantees in developing a viable peer review model. This ensures that grantees have ownership of the process and view it as a positive vehicle to discuss prevention goals and challenges, share resources and review their practices and procedures. There are many peer review models in existence for various programs. During the coming five years, CTF will develop a preferred model and then implement that model to assure continuous quality improvement.

MSU Partnership: Under our prior five-year plan, CTF awarded a grant to Michigan State University for the creation of a coordinated media campaign, entitled Children's Central, that explores the various aspects of child abuse and neglect prevention. The mission of Children's Central is to broaden the definition of child abuse and neglect, and subsequent prevention activities, include negative effects of media, effect social change for the more ethical practice of advertising and media targeted to children, work toward the protection of families and generate recognition of violence by or against children. Children's Central will also be involved in examining social marketing and branding strategies that would be most effective for CTF and CTF grantees, particularly local councils. In addition, CTF is currently working with MSU staff to hold a joint conference in November 2009 (FY 2010) that will feature the CTF annual training as well as the MSU conference entitled "Consumer Culture and the Ethical Treatment of Children: Theory, Research, and Fair Practice."

Goals for FY 2010-2011:

1. Provide training, public awareness, and educational resources/activities to support the work of CTF and our prevention partners.
 - a. Objectives:
 - i. MSU Children's Central will develop and operate a conference on consumer culture and its effects on children.
 1. **Measurement:** Completion of conference and evaluations from attendees.
 - ii. MSU Children's Central will contribute to the development of a special issue of the Spring 2010 issue of *Journal of Advertising*, devoted to advertising and its possible connection to violence and abuse in children and families.
 - iii. MSU advertising faculty will develop and present research studies at national and international conferences with appropriate recognition to CTF.
 1. **Measurement:** Quarterly reports to CTF.
 - iv. MSU advertising faculty and students will participate with CTF in the development of a public awareness and/or marketing campaign by the completion of the contract period expiring September 30, 2011.

Parent Leadership: Building on the work of the Parent Leadership in State Government Advisory Board and the CTF Parent Leadership Work Group, CTF will continue to support parent leaders, both directly and through our funded programs. In 2010, CTF will identify the key ways in which parent leaders can be provided the tools they need to success in the community. For example, based on feedback from the Parent Leadership Work Group, CTF provided reimbursements (for appropriate costs) for parent leaders to attend Prevention Awareness Day in March 2009. In FY 2010, CTF will work to expand parent leaders among our funded programs as well as the activities we directly administer, such as the Citizen Review Panel for Prevention.

Two CTF staff served on the Advisory Board for Parent Leadership in State Government (PLSG). The board was established in December 2006 to equip parents to be partners at the policy table and it is funded via an interagency agreement between the DCH, MDE and DHS. At least 51 percent of board members must be parents of children ages 0-18 who have been or are eligible to use specialized public services (such as disability, social services, special education, early childhood intervention, or mental health). Additional goals of the PLSG in FY 2010 will be to help place parents and caregivers in policy-making bodies so they can influence and have a voice in decision-making.

CTF also initiated a collaborative meeting with the Early Childhood Investment Corporation and a Zero to Three parent leader to discuss parent leadership. This joint meeting took place in September 2008. The group met again in December 2008, and plans to meet quarterly in FY 2009.

Goals for FY 2010-2014:

1. Strengthen parent leadership in CTF-funded programs.
 - a. Objectives:
 - i. 2010: CTF will increase the parent leadership line item in the budget from \$10,000 in FY 2009 to \$20,000 in FY 2010.
 - ii. 2010: CTF will explore options for implementing stronger parent leadership, including parent leadership training and/or scholarships for parents to attend developmental leadership opportunities.
 1. **Measurement:** If trainings occur, receive feedback via evaluation from participating parents.
 - iii. 2012: CTF will explore implementing the FRIENDS “Parent Leadership Development Self-Assessment” tool with new direct service grantees.

Research, evaluation, management information systems, and/or quality assurance systems that will be updated or implemented in FFY 2010.

Moving toward greater knowledge and use of evidence-based and evidence-informed programs and practices (EBP/EIP) and evaluation, continues to be a high priority for CTF. CTF is working with grantees to achieve this goal. CTF will continue to provide trainings for and monitoring of quarterly and year-end reporting. CTF has made it a priority to help educate our grantees and other stakeholders about the importance of evaluation and outcome accountability, and to provide training and technical assistance in the process.

Program Evaluation: A major change expected for FY 2010 is the implementation of the Protective Factors Survey for direct service grantees. Another change will be the increasing expectation that local councils set measurable objectives in their prevention plans, even for primary prevention activities. As in years past, direct service and local council grantees are required to provide quarterly reports to CTF via EGrAMS. Increased training in program data collection and evaluation has significantly increased the quality of grantees’ reporting. Therefore, CTF plans to continue to provide a high

level of EGrAMS/data collection training and technical assistance to support these evaluation activities.

Goals for FY 2010-2014:

1. Move toward greater implementation of evidence-based and evidence-informed programs and practices.
 - a. Objectives:
 - i. 2010: CTF will form a Best Practices Work Group to examine EBP/EIP for primary prevention and other local council activities.
 - ii. CTF will form a Direct Service Work Group, which will include discussion around EBP/EIP, model fidelity, evaluation, peer review, and other best practices.
 - iii. CTF will take the PART EBP/EIP information into account when making direct service grant awards.
 - iv. CTF will educate grantees and other community partners about PART and EBP/EIP via training and TA opportunities.
2. Move toward greater implementation of outcomes-based evaluation.
 - a. Objectives:
 - i. 2010: Grantees will receive training from CTF to implement the Protective Factors Survey.
 - ii. 2011: Client satisfaction in direct service programs will be assessed in a more comprehensive way, using the standardized CTF client satisfaction form.
 - iii. 2011-2014: CTF will create a year-end protective factors report, based on data compiled from grantees using the Protective Factors Survey.
 - iv. 2013: CTF will create a year-end report highlighting outcome results from each direct service grant program, using the Washington Council for Children and Families as a model.
3. Meet the federal reporting requirements for Program Assessment Rating Tool (PART).
 - a. Objectives:
 - i. CTF will provide data on the amount of CBCAP funding used to support EBP/EIP.
 - ii. CTF will continue to educate new direct service grantees about EBP/EIP and PART goals and requirements.
 1. Measurement: Training provided on PART at the direct service RFP training session.
 2. Measurement: Training provided, as needed, to direct services grantees to re-evaluate their PART level.
 - iii. Minimally, all new direct service grantees will have a logic model and meet the other “emerging” level requirements as defined by CBCAP.
 - iv. CTF will determine infrastructure costs associated with supporting evidence-based and evidence-informed programs and practices.

Program Assessment Rating Tool (PART): In FY 2010, CTF will meet the federal reporting requirements for the PART. Specifically, CTF will provide data on the amount of CBCAP funding used to support EBP/EIP. CTF staff will continue to educate grantees (especially new grantees) about EBP/EIP and PART goals and requirements. Each year, CTF provides training on PART at the CTF annual training and via a teleconference prior to the PART submission deadline.

Goals for FY 2010-2014:

- Minimally, all new direct service grantees will have a logic model and meet the other emerging level requirements as defined by CBCAP.
- To determine infrastructure costs associated with supporting evidence-based and evidence-informed programs and practices, CTF will evaluate costs related to training and technical assistance, evaluation and data collection, network development and collaboration, and grants management and monitoring.

Zero to Three: Zero to Three programs are more uniform than CTF direct service programs, and outcomes are categorized by legislative requirements. Zero to Three grantees are required to describe their evaluation process, including identified, measurable performance objectives for each time-oriented outcome, how they will be measured, and how they integrate with the Zero to Three Secondary Prevention indicators. Outcomes are measured using three main data collection tools, quarterly data collection forms, the Adult Adolescent Parenting Inventory-Bavolek (AAPI-2), and an analysis of CPS involvement. The Zero to Three Initiative has found these evaluation activities to be highly effective in demonstrating the return on investment and effectiveness of these prevention programs.

Goals for FY 2010-2014:

1. Assist Zero to Three programs in providing home visitation services to at-risk families that foster positive parenting skills, improved parent/child interactions, promote access to needed community services, improve school readiness, increase local capacity to serve families at risk, and support health family environments that discourage alcohol, tobacco and other drug use.
 - a. Objectives:
 - i. Maintain and expand levels of service for Zero to Three prevention programs.
 - ii. Provide training and TA to support Zero to Three grantees.
 1. Evaluation results from biennial Supporting Families conference as well as training and technical assistance provided via contracts with Children's Charter and the Michigan Public Health Institute.
2. Zero to Three grants will demonstrate positive outcomes for program participants.
 - a. Objectives:
 - i. Ninety-five percent of participants will report that they were satisfied with services.

1. **Measurement:** Individualized (program-specific) client satisfaction tool. Aggregate data is compiled at the state level.
- ii. Ninety percent of participants will report improved parenting skills.
 1. **Measurement:** Zero to Three Data Collection Form (DCF).
- iii. The average number of risk factors will decrease after services are provided.
 1. **Measurement:** AAPI-2 and DCF.
- iv. Ninety-five percent of children served and exiting services (after caregivers' full completion of services) will not have a Category I or II CPS disposition at the end of the fiscal year for the year being measured.
 1. **Measurement:** Query of all children (ages birth through three) using the DHS data warehouse for CPS substantiations.
- v. Ninety percent of children served are up-to-date with age-appropriate immunizations.
 1. **Measurement:** DCF.