

House District _____

Senate District _____

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

Log No: 13-0

For Legislature's Use Only

Rec'd JAN 28 2011

Type of Grant or Subsidy Request:

GRANT REQUEST - OPERATING

GRANT REQUEST - CAPITAL

SUBSIDY REQUEST

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

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

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

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

THE JUDICIARY

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

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:

Child and Family Service

Dbas:

Child and Family Service

Street Address:

East Hawaii: 1266 Kamehameha Avenue, Suite A-5
Hilo, Hawaii 96720

West Hawaii: 81-6587 Mamalahoa Highway, Bldg. C
Kealahou, HI 96750

Mailing Address:

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

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name ANGIE DOI

Title Director of Program Services

Phone # 681-1494

Fax # 681-5280

e-mail adoi@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 gaps in the Domestic Violence Intervention Services on the Island of Hawaii.

4. FEDERAL TAX ID #: _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FY 2011-2012: \$170,492

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 \$485,499

FEDERAL \$ 42,803

COUNTY \$ 20,000

PRIVATE/OTHER \$ 66,722

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

PATTI BATES, CHIEF OPERATING OFFICER
NAME & TITLE

1/27/11
DATE SIGNED

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JAN 28 REC'D



January 28, 2011

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ACCREDITATION

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AFFILIATIONS

Alliance for Children
and Families

Hawaii Island

United Way

Maui United Way

Kauai United Way

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

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

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

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

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

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

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

With Warm Aloha,



Howard S. Garval
President and CEO



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

**Grants-in-Aid Application
Domestic Violence Intervention Services (Big Island)
Proposal
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Application for Grants and Subsidies

I. BACKGROUND AND SUMMARY

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

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

CFS is requesting Grant-In-Aid funds to support our Alternatives to Violence (ATV) Program. The ATV Program on the Big Island has been in operation for 24 years. In 1986, Turning Point for Families, Inc. started the ATV Program in East Hawaii continuing with the expansion to West Hawaii in 1988. In 1999, Turning Point for Families, Inc. collaborated with other partners in the community and the state to develop a curriculum based on Hawaiian culture and values. Although the full curriculum is no longer offered by CFS due to a lack of funding, it was the experience of this project that enabled the staff to develop strong cultural competencies on the island of Hawaii. CFS has incorporated some of the concepts of this curriculum into its current ATV Program.

To ensure the continuation of comprehensive domestic violence services on the island of Hawaii, CFS agreed to a merger with Turning Point for Families, Inc. which came into effect on January 1, 2008. The combination of existing experiences in Domestic Violence Intervention Services, the merger with Turning Point for Families, Inc. and the leadership of CFS enhanced the continuum of services for Domestic Violence Intervention Services across the island of Hawaii significantly. Despite the added significant fiscal responsibilities, CFS has continued to be committed to support community populations that present with increasingly complex problems and situations and to be at the forefront of developing the skills, knowledge, and service models to address these needs.

The Grant-In-Aid proposal describes CFS' ATV Program for the County of Hawaii which provides Domestic Violence Intervention Services to adults, juveniles and children. These services include a Batterers Intervention Program, Victim Support Services and services to children who experience domestic violence in their families. The Batterers Intervention Program offers services to adjudicated adults and juveniles who are referred to the Program by Family Court and Victim Supportive Services. For those adults, juveniles, and children who are being physically or emotionally abused and/or are in danger of being abused, the Victim Support Services includes the preparation of Temporary Restraining Orders (TRO's), advocacy and assistance with court related services, information and referral services, crisis counseling, support counseling, case management, safety planning and child care. Domestic Violence Intervention Services are based on current research and Best Practices in the field of corrections and domestic violence, and are designed to provide effective and measurable interventions aimed at increasing safety for victims, children, and others; reducing the offenders' levels of risk and use of violence; and minimizing any effects that victims and their children may be experiencing as a result of being exposed to domestic violence. Service activities include the following:

- Offer Domestic Violence Intervention Services to adult and juvenile offenders as well as adult and children witnesses.
- Complete a thorough assessment which includes an evaluation of risk, need and strengths.
- Provide individual and group services to victims and offenders.
- Address the co-existences of substance abuse and domestic violence.
- Expand services to victims of the offenders to increase safety and support.
- Continue to be sensitive to cultural backgrounds and beliefs of clients, gender relevant matters and potential barriers in clients benefiting and receiving services.
- Increase the Program evaluation components and practices to address gaps that can be useful in holding batter programs accountable for violence prevention efforts.
- Increase offenders' knowledge of the effects of domestic violence on children.
- Provide outreach services to the community including community education and collaboration.
- Provide follow-up activities designed to enhance each client's ability to sustain success outside of the Program when applicable.
- Participate in the Family Violence Interagency Council.

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

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

2. Goals and Objectives Related to the Request

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

3. Public Purpose and Need to be Served

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

In December 2009, the Third Circuit Court appointed a judge to the Family Court in Waimea. Until then, all TRO hearings for the north of the Big Island were either heard in Hilo or Kona court. Due to limited funding, the ATV Program has not been able to support victims of domestic violence during their TRO hearings in Waimea. During the last years, the ATV Program has offered weekly DVI groups to batterers in Waimea by West Hawaii staff. To support the rural area of the northern part of the island, CFS would like to increase its staffing to offer TRO services, Court Advocacy, Women's Support Group and additional DVI services in Waimea.

4. Target Population to be Served

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

5. Geographic Coverage

The ATV Program offers services for the island of Hawaii. Geography on the island of Hawaii poses a challenge to clients who sometimes have to travel long distances to access services. The geographic area to be served includes all nine districts of the county of Hawaii which include the districts of Puna, South Hilo, North Hilo, Hamakua, North Kohala, South Kohala, North Kona, South Kona and Ka'u. With unemployment above 9% on the island of Hawaii, Hawaii residents face significant challenges to financial stability and security such as:

- 25% of Hawaii County Households live in asset poverty;
- 25% of Hawaii County Households are enrolled in the Supplemental Nutritional Assistance Program (SNAP);
- 54% of Hawaii County Residents have subprime credit scores;
- 49% of Hawaii County homeowners are cost burdened (pay more than 30% of their income); and
- Hawaii has one of the lowest annual wages and highest living costs in the nation.

Since transportation is often a barrier to access services in remote areas due to the economic conditions and geographic distances, the intention is to offer services in multiple locations on the island if additional funding is available. The Program operates primarily out of the Hilo and Kona offices, but with additional funding, plans to offer services and groups in Waimea and additional groups in Kailua-Kona and Kea'au/Pahoa.

II. SERVICE SUMMARY AND OUTCOMES

1. Scope of Work, Tasks and Responsibilities

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

The clients that experience domestic violence often feel overwhelmed, are unsure what to do and where to turn for help. Many times they have given up hope. The staff engages the clients through a combination of asking hard questions such as what brings them to services and offering a safe, caring, non-judgmental environment to engage the clients in the initial steps of the change process.

The ATV Program proposes to provide a comprehensive range of Domestic Violence Intervention Services aimed at increasing victim safety, minimizing effects of violence on victims, and reducing the offender's level of risk and use of violence. These services will be provided to adult and juvenile offenders, ordered by Family Court, as well as victims, and child and adolescent witnesses to violence. Clients of both genders, including same sex partners, are accepted for services. The Program will give priority to Judiciary referred/contracted clients and accepts volunteer clients as space is available.

Service models are based on current practices and research on Best Practices.

An example of a client's feedback of the Program follows:

I just want to thank everyone for making me the man who I am today. I always knew I was a great guy under the anger, but I couldn't reach it. To finally become who I was searching for all these years, it's very emotional for me. I'm just proud of myself for telling myself "I can change", and I have never been so happy in my life. When I start my new family, I'm gonna be proud to stop the cycle of violence! Change is Great!! Never thought I'd say that, but what can I say? I love it! Thank you all again...

Outputs/Units of Service

The overall ATV Program provides the following units of service each year:

Population	# of Unduplicated Clients to be Served Each Fiscal Year	# of Unduplicated Clients to be Served Each Fiscal Year as a result of GIA funds
Domestic Violence Intervention Services	120-170	80
Juvenile Services	30	n/a
Victim Services (including TRO's)	1,240-1,740	260
Children and Adolescent Support	30-50	n/a

Batterers Intervention Program

The ATV Program will use a combination of CFS-developed cognitive based curricula for offenders. The Program continues to explore existing models that use a cognitive behavioral approach; however to date, there are limited resources on available curricula for domestic violence that are solely using cognitive behavioral intervention services. While a cognitive behavioral model is effective for offenders, it is also important to address areas of power and control, personal responsibility and male socialization for domestic violence offenders. In addition, CFS is exploring piloting other cognitive models with close supervision and monitoring as well as follow-up. For victims/survivors services, the ATV Program has developed a curriculum based on DAP (Domestic Abuse Project), Duluth Model principles and the Patterns Changing curriculum. The curricula outlines are detailed in this section. The ATV Program staff continually search for the most up-to-date information on working with domestic violence and revise the curriculum as needed. The program is very active in tailoring curriculum and concepts to address the multi-cultural environment of Hawaii.

- **Risk Assessment and Identification**

Current research in the field of corrections confirms that in order to reduce an offender's chance of re-offending, a thorough risk assessment must be done that identifies the offender's dynamic and static risk factors and provides services that are aimed at changing or reducing them. Therefore, each offender participating in

services at the ATV Program will undergo a psycho-social assessment (the CFS Basic Comprehensive Assessment) that identifies risk factors such as legal history, lack of support system, criminal associates, etc. and will develop a service plan that is aimed at reducing these risk factors. Adjunctive tools will be used to provide additional information regarding an offender's current risk factors. These include a substance abuse survey, mental health screening, and identification of aggressive beliefs inventory. This information along with information that may be obtained from probation such as verification of legal history, DVSI score, SARA and LSI-R score for each offender will be used to determine assignment to a low, medium or high-risk category. The client will then be and placed in services that appropriately address their level of risk.

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

Current research indicates that mixing batterers who have different levels of risk is not recommended because the low-risk offenders could potentially become high-risk offenders. The ATV Program will continue to explore the feasibility of separating offenders into low, medium, high-risk categories based on information obtained from the assessment, Probation Officers and other sources. The Program will continue to work with the Probation Department on obtaining results of the risk assessment administered by probation and will implement ongoing risk assessment to assess dynamic risk factors.

- **Motivational Enhancement and Barrier Reduction Strategies**

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

Victim/Survivor Support Services

Increasing safety and support for victims/survivors while decreasing the sense of isolation that they often feel is a concern and primary goal for the service. This is addressed primarily through Temporary Restraining Order (TRO) application assistance, support groups, education, safety planning, and referrals to other appropriate domestic violence services within CFS or in the community. For those victims/survivors who have partners participating in Domestic Violence Interventions Services, routine safety checks are provided to assist them with safety and protection planning and referrals as appropriate. The ATV Program regularly refers to CFS' Domestic Abuse Shelters, Domestic Violence Advocacy programs and the Legal Aid Society of Hawaii.

To address the area of trauma, CFS has incorporated a Post-Traumatic Stress Disorder Reaction Index, a trauma screening tool endorsed by the Department of Health's Child

and Adolescent Mental Health Division (CAMHD). Proper copyright approval has been obtained to utilize this instrument. CFS has also begun to implement a new evidenced-based Trauma Informed Care approach and curriculum with staff, called *Risking Connections*. This curriculum provides a basis for understanding the trauma framework and what effects trauma has had on the lives of clients. It also provides specific task-oriented processes to work with individuals who have gone through trauma. The ultimate goal of this approach is to improve how staff understand abuse and trauma and to increase the effectiveness of service delivery with surviving clients. CFS will be providing training in the spring of 2011 for the programs that work with clients that have experienced trauma. CFS anticipates making additional changes in its services to incorporate Trauma Informed Care.

SERVICE ACTIVITIES

Assessment and Service Planning

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

During the comprehensive assessment, the following information is gathered:

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

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

victim safety contact release as appropriate, program contract, fee agreement, and consent to services. The client is notified of CFS Client Rights and Responsibilities and Grievance Procedures. If the individual is deemed appropriate for service, group attendance is scheduled. If during the assessment, the staff identifies severe mental health and/or substance abuse problems, the staff works with the client and the Probation Officer identifying additional services in the community to ensure that client can be successful with ATV Program services. Brief individual sessions may be made available to those clients who need help and stabilization to fully participate in group services.

Quick entry into the Program is essential in motivating clients to engage in services. Over the past two years the average length of time from the initial telephone call to first office visit for intake has been two to three weeks. When the client keeps his or her scheduled appointment he/she is often attending group within 10 days of intake. Most groups are conducted in an open format allowing clients to receive services immediately and to avoid wait lists. During the last two years, the ATV Program has not had the need to put clients on a wait list. If the number of clients rise significantly, wait lists may be utilized to ensure that clients are admitted to the groups according to their place on the wait list.

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

Batterers Intervention Program

Orientation

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

Offenders are not permitted to use any type of violence, drugs or alcohol while participating in group. They are expected to respect staff and other participants, maintain confidentiality of other program participants, actively work on service plans and goals, report to Probation Officers as instructed and complete assignments. The offenders are expected to show up for scheduled appointments and groups unless otherwise excused. Offenders who fail to follow program guidelines risk termination of services.

Domestic Violence Intervention
This service is offered to batterers. The program consists of a minimum of 25 sessions.
<p>Session 1: Thoughts and Feelings I</p> <ul style="list-style-type: none"> • ABC Model • Thinking Errors • Belief Systems <p>Session 2: Thoughts and Feelings II</p> <ul style="list-style-type: none"> • Ways to Change, Selecting Change Targets/Beliefs <p>Session 3: Changing Our Behaviors</p> <ul style="list-style-type: none"> • Role of Behaviors in the Change Process • Stages of Change <p>Session 4: How to Start the Change Process</p> <ul style="list-style-type: none"> • Negative/Positive Thoughts • Change Problem Solving <p>Session 5: Anger</p> <ul style="list-style-type: none"> • Primary, Secondary Feelings • Anger/Abuse Process • Types of Abuse • Stress/Violence <p>Session 6: Socialization, Dominance</p> <ul style="list-style-type: none"> • Self-Control Skills • Prevention/Intro to Self-Care Skills • Cost and Payoffs • Power and Control <p>Session 7: Trust, Intimacy</p> <ul style="list-style-type: none"> • Equality • Respect <p>Session 8: Basic Communication</p> <ul style="list-style-type: none"> • What is Communication • Types of Communication <p>Session 9: Empathy</p> <ul style="list-style-type: none"> • Victim Impact <p>Session 10: Conflict Resolution</p> <ul style="list-style-type: none"> • Types of Conflict • Negotiation Skills/Problem Solving

Domestic Violence Intervention Phase II
After completing the education groups, the client is scheduled for Phase II – Process Groups. The goal of the process groups is to move the client to real sustainable change. The skills learned in

Domestic Violence Intervention Phase II

Phase I are put to the test during these process groups. A more confrontational, stressful environment is created so that clients can demonstrate the ability to exercise new non-violent behaviors. The process phase consists of a minimum of 10 weekly two-hour group sessions. The groups accommodate 12 to 15 clients.

Throughout the process phase, clients complete the following assignments either written or verbally (if limited reading and writing ability): cue plan, time-out plan, stress management self-care plan, taking responsibility and ending violence, and controlling behavior plan. As part of offender accountability, clients present assignments to the group. Staff is available to assist on an individual basis as needed.

Domestic Violence Intervention Phase III

After completing the process phase the client may be moved to Phase III-Maintenance Groups and begin to gradually phase out of the program. In Phase III, offenders bring their real life struggles in changing to the group, and are given additional opportunities to practice skills and share successes. Clients attend a minimum of five sessions over a three-month period and complete maintenance plans to demonstrate how they will continue a life style of non-violence.

Victim/Survivor Support Services

Adult victims/survivors of both genders, including same sex partners, are offered Temporary Restraining Order (TRO) application assistance, Court Advocacy, support services, group and/or brief individual services, safety planning, safety checks, information and referrals as indicated. Should a minor seek TRO application assistance, the parent or guardian of the minor child or children would represent them on behalf of the minor child or children.

Temporary Restraining Order Application Process

Oftentimes, the first step for victims/survivors of domestic violence in becoming safe is through obtaining a Temporary Restraining Order (TRO). This process is often the first legal option for victims/survivors to use. This document is legally binding and helps to protect them by legally preventing the perpetrator from having any or limited contact with them. Because this process can feel overwhelming, CFS provides assistance and guidance through a Domestic Violence Specialist (DVS) staff member. DVS staff are available during normal business hours to explain the process, assist in completing the TRO application, and provide support to victims/survivors as needed.

Initially, a brief interview is conducted in a private office. During this initial encounter, the DVS is screening to determine if the TRO is one that falls within Family Court or District Court. If the TRO is a District Court one (involves a non-family person), the applicant is referred to District Court. If the TRO is a Family Court one (involves a family member, as defined by the Family Court), a more detailed interview commences to determine if the applicant's situation meets the definition the Court has determined as the basis for domestic abuse.

If the applicant's report does not seem to meet the Court's definition, the DVS reviews the criteria with the applicant and provides the necessary information in order for him/her to make a decision on whether or not to proceed with the TRO. It is important to note that the DVS assists any client with a TRO Application for Family Court should they feel they want to pursue a TRO even if his/her reason for an application does not meet the Court's definition of domestic abuse. The DVS does not make the determination if a TRO application is going to be granted; the task is to inform the applicant about the court definition of Domestic Abuse and to provide guidance and support. The DVS staff are not trained to provide legal advice but are trained by the Court regarding the definition of domestic abuse the Court will accept.

Once it is determined that a TRO Application will be initiated, the DVS begins an intake with the applicant. During this process, several consent forms are signed and an Abuse Behavior Inventory is conducted regarding the alleged offender. Additionally, a more detailed interview is conducted by the DVS regarding time and place of any incidents involving abusive behaviors and the effects of these behaviors on the applicant.

During this interview, the DVS records the applicant's answers to the questions on the TRO application. However, the applicant is asked to complete the statement which includes critical information about the abuse, dates and effect on him/her from the incident(s). The DVS reviews every statement to ensure that the client has included all the information that is relevant to the Court. If the applicant omitted information that was discussed in the interview, the DVS encourages him/her to add that information. The DVS clarifies that the applicant is making the final decision on any changes to their original statement.

Next, the DVS ensures that the applicant reviews the entire TRO Application to identify any errors he/she can detect, especially regarding the spelling of names and locations, or information that is not accurate. If the applicant is satisfied with the information, he/she initials each page of the application and signs the document. A copy of the TRO Application is made to include in the client's case record and the applicant is given the original TRO Application to submit to the Family Court.

The DVS then gives the client written information that provides an overview detailing what to expect during a Family Court TRO Hearing. The DVS also invites the applicant to call should there be any questions before the hearing and/or should the TRO Application be approved for Hearing. It is explained that one of the ATV Program staff will provide court advocacy to the applicant for any hearing unless the applicant is retaining legal counsel. Should the applicant retain legal counsel, the DVS will remain in Court during the hearing to record the outcome of the hearing(s) only.

The client is directed to the location of the Family Court to submit their TRO Application for Judicial Review and instructed on what they will receive should their TRO be granted.

The service of the TRO to the Respondent named in the TRO is the responsibility of the Police Department.

It is important to note that during this entire process, the DVS encourages the applicant to discuss safety and to review aspects of a Safety Plan. The DVS can provide and review a general safety plan with the applicant and strongly encourage the applicants to contact the DVS for a more individualized Safety Plan. In addition, resources that are available to the client are reviewed as needed. These resources include the Women's Pattern Changing Program and Support Group for women that have experienced abuse in their relationships. Applicants are informed that these groups are provided at no cost.

Family Court Advocacy

Barring the applicant having retained legal counsel for their TRO Hearings, the DVS provides Court Advocacy at Family Court TRO Hearings. The DVS receives the Family Court TRO Hearing Calendar weekly before the hearing date. The DVS reviews the client's TRO application and meets the client at the Family Court. Often a short meeting occurs to make sure the client knows what to expect in the hearing and to confirm that applicant still wants to pursue the TRO. The DVS and the applicant attend the TRO Hearing. The DVS staff is available to the applicant to make him/her aware of Court procedures and answer any questions about when and who to address during the Court Hearing. Additionally, the DVS acts as a buffer, sitting between the applicant and the respondent. This greatly assists the applicant to focus more on the Court Hearing than on what the respondent is doing.

The DVS can address the Court regarding questions the applicant has when he/she indicates they are feeling anxious due to the Court Hearing and the Court allows staff to speak for the applicant. The DVS does not provide the applicant any legal advice. The Domestic Violence Specialist's role is to facilitate the applicant's awareness of the Court Hearing procedures and provide support in a potentially stressful environment. Should a Contested Hearing be scheduled, the DVS encourages the applicant to contact him/her should there be any questions about what is expected during the Hearing. In addition, the DVS offers the applicant the opportunity to participate in Victim Support Groups.

Support Services

If a victim/survivor of Domestic Violence would like to participate with Support Services, the curriculum and the goal of the Victim Support Group is being explained to the applicant. Referrals for victim services may come through Family Court Adult Services Branch, Criminal Misdemeanor Unit or through Temporary Restraining Order Hearings. Other referrals may come from the community and from victim safety checks. Victim safety checks are provided for those partners of offenders participating in Domestic Violence Intervention (DVI) services.

Victim Support Groups

Victim support groups provide education and support to those individuals who are in, or have been in, abusive intimate relationships. The purpose of the group is to provide information about how to be safe and develop a safety plan; to help clients understand what has happened through education about the dynamics of domestic violence; assist clients in understanding their anger; improve problem solving and social support; identify and remove barriers to safety and decrease isolation. The groups use the Pattern Changing for Abused Women curriculum.

There are two phases of group services for victims, and individuals participate according to their particular needs and situation.

Phase I

Unit 1. Understanding Abuse (4 sessions)

- I. Impact of Abuse
- II. Family Roles and Abuse: Why is it so hard to leave
- III. Boundaries and Good-Byes to Old Patterns

Unit 2. Abuse and You (4 sessions)

- I. Feelings: Grief, Fear and Guilt
- II. Feelings: Anger
- III. Leaving the Abuse/Sustaining Separation

Phase II

Unit 3. Boundaries Setting (4 sessions)

- I. Using Assertiveness Skills Myth and Reality
- II. Using Assertiveness Skills Techniques
- III. Using Assertiveness Skills Requests and Authority Figures
- IV. Using Assertiveness Skills Practice

Unit 4. Self Care (3 sessions)

- I. Setting Realistic Goals
- II. New Pattern of Decision Making
- III. Healthy and Unhealthy Relationships
- IV. Changing Patterns

One or both phases may be completed depending on what is most appropriate for the victim's current situation. During victim services, a pre- and post-test is administered to measure increased knowledge regarding the dynamics of domestic violence. Each phase consists of weekly sessions or a total of 15 weekly sessions for both phases.

Additional Services to Victims/Survivors and Children of Offenders Referred to Services

Staff make every effort to contact the victims/survivors of the offenders who are referred or are participating in services. Staff provide information about offender services and any other relevant information within the guidelines of confidentiality. Thereafter, concerns such as the victim's and children's needs, and impact of violence on them are addressed. Staff provide brief counseling, linkage and referral if indicated. Information about the offender services, warning signs, support groups and other community referrals, and safety planning can also be provided.

Women's Domestic Violence Intervention Groups

Some women have both victim and offender concerns that need to be addressed. The victim offender groups consist of 25 weekly two-hour sessions. These services address acting out behavior as a result of frustration and anger rather than power and control tactics. The clients are encouraged to develop insight into the dynamics that influenced them to become abusive. They are

Women's Domestic Violence Intervention Groups

taught skills to control their anger, and are guided in seeking new patterns for expressing their fears and frustrations. Knowing that the effects of their abuse are going to be long-term, the emphasis shifts to the tools needed for healing. The Curriculum includes the following units:

Unit 1. Foundations of Abuse (2 sessions)

- I. What is Domestic Abuse
- II. Cultural Influences
- III. Gender Issues
- IV. Anger and Depression

Unit 2. Self Management Skills (5 sessions)

- I. Responsibility
- II. Taking a Time Out: Managing Behavior
- III. Stress Management
- IV. Setting Boundaries
- V. Self-esteem and Self Care
- VI. Self-Talk, Beliefs, Our Identity

Unit 3. Communication Skills (4 sessions)

- I. Types of Communication
- II. I Messages
- III. Feelings
- IV. Conflict Resolution

Unit 4. Intimacy Issue (4 sessions)

- I. Intimacy
- II. Understanding Love
- III. Understanding and Meeting our Needs
- IV. Healthy and Unhealthy Relationships

Unit 5. Family Issues (4 sessions)

- I. Family Album
- II. Domestic Violence and Children

Additional Program Components

Services to Limited English Speaking Clients

The ATV Program makes every effort to accommodate clients who have limited English speaking skills.

Extension Phase

After completing the minimal number of sessions, clients may be extended if they struggle with the concepts, exhibit inconsistent use of skills, continue to use violent and controlling behavior, and/or fail to complete assignments. The purpose of the extension is to provide maximum opportunity to learn non-violent behavior and skills. Modifications to the service plan are made with the client as appropriate.

Additional Program Components
<p>Program Fees</p> <p>There is a charge for attending the groups; however, CFS has a no turn away policy for clients who are unable to pay. In addition, when appropriate, the ATV Program offers a work exchange for fee payment. For the offenders' component, the ATV Program charges a fee and makes a payment agreement with a client. This is a part of accepting responsibility for one's actions. It has also been the experience of the ATV Program that when people pay for services they feel that services are more valuable. It is our belief that clients will work harder to make needed changes when there is a cost involved. The Program provides services at no charge for many victims who are unable to pay, as economic abuse is common among this population.</p>
<p>Aftercare</p> <p>Once clients have completed any of the ATV Program components, they are offered the opportunity to continue to participate with the program for additional support. If a client wishes to continue, ATV Program staff will review the client's individual goals and set up a contract for continued services.</p> <p>If a client wishes to return to the Program at a later date, the program recommends a re-assessment of the situation prior to placement into appropriate services. Clients are provided with information on other resources to link them with appropriate services. Victims are encouraged to report further episodes of domestic violence and to return for support when needed.</p> <p>As part of the aftercare, Program staff will make efforts to follow up with clients once they have completed services.</p>
<p>Exit Interview and Follow-up</p> <p>All clients that complete the program receive an exit interview within 30 days of completion of services. A post-test is administered, goal achievement reviewed, and outcome measurements documented. A follow up plan is developed with the client, and to the extent possible, partner contacts are included.</p>

2. Annual Timeline for Accomplishing the Results or Outcomes of the ATV Program

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

3. Quality Assurance and Evaluation Plan

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

CFS is dedicated to providing quality services to the individuals and families it serves, and to be accountable to those who fund the services. CFS has well established Performance and Quality Improvement (PQI) mechanisms. PQI is an ongoing process that occurs daily as staff members strive to improve the service they provide internally and externally. On a quarterly basis, the organization-wide committees meet to review aggregate data, and program and administrative staff review their outcome data, identify their strengths, discuss compliance issues, and troubleshoot areas of concern.

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

Highlights of the PQI process include:

<p>Cultural Diversity Task Force</p>	<p>A critical component of the PQI structure. Its goal is to strengthen cultural competency and develop awareness and an appreciation of cultural diversity. The task force is responsible for: reviewing compliance with the national standards on Culturally and Linguistically Appropriate Services in Health Care (CLAS), providing recommendations on cultural trainings and facilitating cultural events for the organization. The task force meets by videoconference and has neighbor island representation.</p>
<p>Clinical Coordinators</p>	<p>Provide support and guidance to program management to maintain accreditation standards, contract compliance, and use of best practices. The Clinical Coordinators conduct a review of client records, fiscal audits, clinical supervision notes, and program procedures in</p>

	<p>preparation for contract monitoring and reaccreditation. The Clinical Coordinators have developed a comprehensive chart compliance checklist to evaluate each program, identify areas of strengths and opportunities for improvement. The review tool is a combination of COA requirements and contractual requirements where applicable. To facilitate accreditation readiness, the Clinical Coordinators maintain program specific COA work plans which identify program related standards and evidence to meet the requirements. The Clinical Coordinators make quarterly site visits to the neighbor island offices to review program charts.</p>
<p>Clinical Risk Management (CRM) Committee</p>	<p>Evaluates and reviews organizational practices with clients that involve risk or limit freedom of choice, issues related to medications, effectiveness of risk prevention measures trend analysis on manual restraints, crisis plans, and research involving clients. The CRM Committee may also review specific high-risk clients through an interdisciplinary approach to assure that service delivery utilizes the least restrictive interventions and adheres to Best Practice standards. The CRM Committee meets by videoconference and has neighbor island representation.</p> <p>Through the guidance of the CRM Committee, CFS has implemented statewide meetings for all CFS Registered Nurses to ensure consistency in following the policies and procedures and training for all staff who make medications available to clients. The CRM Committee was tasked with revising the Administrative Policies and Procedures and working with the Nurses to ensure compliance with state laws for delegation, and for COA and contract requirements.</p> <p>In 2008, the CRM Committee convened a subcommittee to compare Pro-ACT and CPI to identify a method that best suits CFS' programs and needs. The subcommittee which involved internal trainers of CPI and Pro-ACT, supervisors of different program areas and direct service staff recommended that CFS use only CPI methods for all programs. The Administrative policies and procedures on behavior management were revised and updated for COA standards.</p> <p>In addition the CRM Committee evaluates Administrative policies and procedures on clinical risk issues and makes recommendations on training and process implementation.</p>
<p>Quality Assurance and Training Department</p>	<p>Conducts quarterly trainings in the organization-wide COA required trainings. These trainings are geared for direct service staff and supervisors. The trainings cover documentation, client advocacy, therapeutic rapport, special needs, child abuse and neglect, needs of individuals and families in crisis, communication barriers and public assistance. Training is offered via videoconference so that neighbor island staff can participate.</p>
<p>Council on Accreditation</p>	<p>In 2009, CFS successfully completed reaccreditation with the Council on Accreditation, and in that review, CFS did not have a single citation</p>

	that needed a response. The reviewers commended CFS on having one of the best PQI systems in place with clear and precise reports and a strong PQI committee structure.
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The Performance and Quality Improvement Plan and a flow chart of the PQI committee structure are available upon request.

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

- Number of clients served (unduplicated)
- Client outcomes
- Case record reviews
- Utilization review
- Client satisfaction
- Referral source satisfaction
- Client grievances
- Supervision
- Training
- Accomplishments and strengths
- Progress on any action plans

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

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

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

The Alternatives to Violence (ATV) Program

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

Program Specific PQI Timeline

PQI Event	Description	Responsible Staff	Frequency
Quarterly Managers Report (QMR)	Identifies quality indicators and trends for the Program such as outcomes, clients served	Program Supervisor I Director of Hawaii Island Programs	Quarterly
Outcomes	Data is collected on program and contract outcomes	Program Supervisor I Director of Hawaii Island Programs	Quarterly
Peer Case Record Review (CRR)	Review of client case records	Program Supervisor I CFS Peers	Quarterly
Staff Supervision	Supervision on cases, group and professional development. Review of case record	Program Supervisor I Director of Hawaii Island Programs	Bi-monthly or monthly depending on the staff's expertise and number of client contacts (groups and hours worked per week)
Annual Program Planning (APP)	Review and development of program goals	Program Supervisor I	Annually
Client and referral surveys	Surveys are distributed	Program Supervisor I Director of Hawaii Island Programs	Quarterly At Discharge
Monthly, Quarterly and Annual Reports to the Funder	Data collected on unduplicated clients served, outcomes, accomplishments, problems encountered	Program Supervisor I Director of Hawaii Island Programs	Quarterly and Annually

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

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

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

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

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

Monthly, quarterly and annual reports are completed as required by the Judiciary. The reports provide data on the number of unduplicated clients served, achieved outcomes, as well as accomplishments and problems encountered. The report also provides expenses to date as well as any changes in staffing.

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

4. Measures of Effectiveness

Batterer Intervention Services		
Percentage	Outcome	Measurement Tools
75%	Clients completing batterer intervention services shall have remained violence free for no less than twenty consecutive weeks prior to discharge.	Client self report Victim reports Police report Confirmation with Probation Officer

Batterer Intervention Services		
Percentage	Outcome	Measurement Tools
75%	Clients completing batterer intervention services have taken responsibility for their violent behavior; ceased to blame the victim for the violence; and recognize the adverse effects of their violent acts.	Client self report DV Specialist written evaluation
100%	Clients completing batterer intervention services will complete a written individualized, practical plan to maintain non-violent behavior and will present that plan to the group for feedback.	Copy of plan in client file DV Specialist written evaluation
75%	Clients completing batterer intervention services will improve their understanding of the nature and effects of domestic violence by 50%.	Pre- and post-test in client file DV Specialist written evaluation
60%	Clients completing batterer intervention services will demonstrate the knowledge, skill and attitudes necessary for maintenance of non-abusive behavior, which includes learning non-violent conflict resolution and non-aggressive communication.	Client self report of use of Equality wheel (e.g. negotiation skills, communication skills) Progress notes DV Specialist written evaluation
100%	Clients completing batterer intervention services will significantly increase their knowledge of the effects of domestic violence on children.	Pre- and post-test in client file. Client self report Progress notes DV Specialist written evaluation
80%	Clients completing batterer intervention services will demonstrate an increase in their development of empathy for others affected by their violent behavior.	Case notes, written assignment, self and DV Specialist written evaluation

Victim Services		
Percentage	Outcome	Measurement Tools
80%	Clients completing services will complete a personalized safety plan.	Safety plan in chart Client feedback
80%	Clients completing services will be able to demonstrate an increased knowledge of effects that violence has on themselves and their children.	Client report DV Specialist evaluation Post-test

III. FINANCIAL

Budget

1. Submission of Budget Forms

See attached budget.

2. Anticipated Quarterly Funding Requests for FY 2011-2012

Quarter 1	Quarter 2	Quarter 3	Quarter 4	TOTAL Grant
\$42,623	\$42,623	\$42,623	\$42,623	\$170,492

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

The following is a list of all other sources of funding the CFS ATV Program on the Big Island is trying to obtain for fiscal year 2011-2012.

Name of Funding Source	Amount Requested
The Judiciary	\$485,499
County of Hawaii	\$35,000

Both applications are still pending.

IV. EXPERIENCE AND CAPABILITY

A. Necessary Skills and Experience

The Alternatives to Violence Program – Demonstrated Skills, Abilities and Knowledge

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

- Offenders can change their attitudes, beliefs, and behaviors by learning positive non-violent skills that promote relationships as equal partnerships.
- Safety of the victims/survivors and children and holding the offenders accountable for their behaviors are the ultimate goals.
- Offering Domestic Violence Intervention Services can eliminate or greatly reduce physical, emotional and sexual abuse.
- Domestic violence services are specialized and research around effectiveness depends on the study requiring programs to continually be up-to-date on Best Practices.

- Domestic violence offenders are at-risk of recidivism without appropriate Domestic Violence Intervention Services in collaboration with the criminal justice system and other domestic violence providers.
- A coordinated community response is the most effective intervention and batterers intervention services are a critical component.
- Domestic violence is predominately male to female battering resulting from power and control. The Program primarily considers interventions and practices that have been recommended for Batterers Intervention Services.
- Abuse can happen in the forms of male to male, female to female and female to male therefore additional groups and services may be conducted to address the specific needs of these relationships.
- Training, supervision and quality assurance guidelines are necessary to comply with standards.

The ATV Program teams in East and West Hawaii are committed to our mission and continue to support Best Practice strategies in working with those experiencing domestic violence. CFS has a number of domestic violence services that are overseen by the Director of Hawaii Island Programs who has over 10 years experience in social services including six years in domestic violence. She is recognized for building a strong team of staff who are dedicated and committed to increasing safety in our community. The Director of Hawaii Island Programs participates with the Interagency Council, Child Welfare Services Council, and the Purchase of Service meeting in Hilo. The supervisors have also been active with the Hawaii State Coalition Against Domestic Violence since 1996.

Each employee is competent in verbal and written communication. Successful communication is critical to Program operations. Staff members have strong interpersonal skills and have the ability to support and inspire clients to participate in the services and seek out support. They have a keen sensitivity and awareness of the clients and their cultures. Skilled at teamwork, they work in a professional manner together and perform well individually. They each possess strong analytical skills and can assess a situation quickly and with objectivity. They are able to gather information and identify key issues that need to be addressed with skillful and professional competence. Strong problem-solving skills are key to their success with their clients. Workers are taught to have good planning and organizational skills. The ability to design, plan, organize, and implement their work in specific timeframes are skills they've continued to develop to meet the Program's goals.

The ATV Program service team has a large number of years of service experience with perpetrators and victims/survivors of domestic violence and they are very dedicated to the goals of the Program. They have also demonstrated the ability to be flexible and adaptable to the various changing needs of offenders and victims in their respective communities of East and West Hawaii. The ATV Program staff members come from diverse and unique backgrounds, both culturally and socio-economically, which allow

them to share during informal and formal meetings with each other and to learn about different cultures and approaches for the victims/survivors and offenders of domestic violence. The ATV Program staff are very familiar and knowledgeable about the local dialects and unique qualities of each community, and experienced in working with a variety of people from different ethnic and language backgrounds. These skills are reinforced through training they receive at CFS and the community. This helps facilitate the engagement process and support for the victims and offenders.

The ATV Program team understands the importance of bringing organizations together that have contact with victims/survivors and perpetrators of domestic violence. Therefore, CFS has been active in the community and participates with meetings, task forces and focus groups that share the common goal of reducing domestic violence and increasing safety for the families in Hawaii.

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

Projects and Contracts Pertinent to the Proposed Services

CFS' extensive experience working with offenders and victims of domestic violence over the past 29 years statewide, and 24 years on the Big Island, has helped to develop substantial skills and abilities to provide domestic violence services. Following is a comprehensive list of verifiable experience with projects and contracts pertinent to the proposed services. It demonstrates CFS' breadth, experience and institutional knowledge of issues impacting those individuals and families who experience domestic violence.

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

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

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

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

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

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

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

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

B. Facilities

CFS is Accessible Statewide

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

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

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

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

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

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

The Alternatives to Violence Program Facility

The CFS office in East Hawaii is located at 1266 Kamehameha Avenue, Suite A-5 in Hilo. This site serves all of East Hawaii and houses the administrative and program staff. The office includes consulting/therapy rooms, a play therapy room for children, two group/meeting rooms, professional staff offices, support staff workstations, networked

computer systems, videoconferencing equipment, fax, voice mail, and telephone systems. Administrative office hours are Monday through Friday, 8:00AM to 4:30PM. Services are available to clients at various times throughout the week. Groups are held during the morning, afternoon and evening to offer the clients flexibility depending on their work schedules or other obligations. For after-hour emergencies, clients are instructed to call the Suicide and Crisis Line or the 24-hour Domestic Abuse hotline. The Hilo office meets the requirements of the Americans with Disability Act (ADA) and is easily accessible. The office building has an elevator and generous parking is available for clients and staff. Multiple rooms provide opportunities for closed door consultation to protect client identity and ensure adherence to HIPAA guidelines. In addition to the Hilo office, groups are also held in Kea'au for easier access for the clients in the Puna and Kea'au district.

The CFS office in West Hawaii is located 81-6587 Mamalahoa Highway in Kealahou. The office includes consulting/therapy rooms, two group/meeting rooms, professional staff offices, support staff workstations, networked computer systems, videoconferencing equipment, fax, voice mail, and telephone systems. The West Hawaii office houses the administrative staff and the program staff. Administrative office hours are Monday through Friday, 8:00 AM to 4:30 PM. Services are available to clients at various times throughout the week. Groups are held during the mornings, afternoons and evenings to offer the clients flexibility depending on work schedules or other obligations. For after-hour emergencies, clients are instructed to call the Suicide and Crisis Line or the 24-hour Domestic Abuse hotline. This site meets the requirements of the Americans with Disability Act (ADA) and is easily accessible. The office is on the ground floor and generous parking is available for clients and staff. Multiple rooms provide opportunities for closed door consultation to protect client identity and ensure adherence to HIPAA guidelines.

In addition to the current location in Kealahou, the ATV Program in West Hawaii plans on continuing a weekly Batterers Group in Waimea at Saint James Episcopal Church at 65-1237 Kawaihae Road in Kamuela. This location was selected to offer easier access to services for clients who come from the Hamakua, North Kohala and South Kohala districts. If funds become available, the Program plans to either co-locate or identify an additional small office in Waimea to offer TRO services and court advocacy to serve the new North Kohala court in Waimea.

East Hawaii and West Hawaii Offices

Other CFS programs are located at both main CFS offices in East and West Hawaii. This provides the ATV Program staff with information and accessibility to other CFS programs that are of benefit to the ATV Program clients.

During regular business hours, there is at least one person on the premises who is certified in First Aid and CPR.

V. PERSONNEL: PROJECT ORGANIZATION AND STAFFING

A. Proposed Staffing, Staff Qualifications, Supervision and Training

For this proposal, CFS has put together a service team of highly qualified and experienced staff to provide quality Domestic Violence Intervention Services on an ongoing basis. Ranging from Master's Degrees in Social Work, Bachelor's Degree of Science in Psychology to High School Diploma, the current team has a solid educational foundation and a long history of working in the social service field. This enables the Program to work with clients with complex needs.

Staff members working with both offenders and victims are carefully recruited and selected based on how well they are aligned philosophically to the Program's mission, vision, and goals. Selection is also based on their ability to effectively communicate with others; set appropriate boundaries/limits; and model positive pro-social coping skills. Once hired, staff are trained and supervised on a regular basis to ensure the ongoing provision of quality services to clients and continuous adherence to the Hawaii Batterers Intervention Program Standards. Clinical supervision of Domestic Violence Specialists who facilitate groups based on the current Hawaii Batterers Intervention Program Standards, will be provided by the Director of Hawaii Island Programs and the Domestic Abuse Specialist IV.

The ATV Program service team is made up of a combination of full- and part-time staff. This mix of staff allows for staff to work in remote areas in their community and not have to travel long distances to cover the island of Hawaii. Program oversight, development, and success are maintained through teamwork and cooperation between the Program Supervisor I's with support and supervision from the Director of Hawaii Island Programs, the Director of Program Services and the Clinical Coordinator. A centralized tracking system is operated and maintained by the Program's administrative support staff. These staff members are responsible for promptly scheduling client appointments, tracking client attendance and participation in services, and providing information regarding a client's current status in the Program to Probation Officers on an ongoing basis.

This Grant-In-Aid will fund the following additional positions for the ATV Programs in East and West Hawaii:

East Hawaii ATV Program

1.5 FTE – Domestic Violence Specialists II (DVS II). These positions will provide services to the victims/survivors component. They will assist in managing the number of Temporary Restraining Order applications, provide court advocacy and case management.

0.5 FTE – DVS II. The DVS II will provide case management and facilitate the men’s Domestic Violence Intervention groups.

West Hawaii ATV Program

1.0 FTE DVS II. The DVS II will provide case management and facilitate the men’s Domestic Violence Intervention groups. They will assist in managing the number of Temporary Restraining Order applications, provide court advocacy and case management.

The following chart shows the staffing positions for the overall ATV program and the full-time equivalency (FTE), justification for the FTE, client to staff ratio and caseload capacity for each position. The positions funded by this Grant-In-Aid application are shaded.

Job Title / FTE / Client/Staff Ratio and Caseload Capacity	Justification
Director of Program Services 0.02 FTE	Under the direct supervision of the Vice President of Programs. Primary oversight responsibility for services and statewide programs. Member of the Senior Leadership Team, being a part of the overall management team. Implements and develops performance-based measurement. Exercises all normal supervisory functions for their direct reports. Provides input to the VP of Programs on programmatic issues. Attends CFS Board of Directors meetings. May be selected to participate in Committees and Task Forces throughout CFS, as determined by the VP of Programs. Provides general supervision of program/department (>25 employees) usually through lower level supervisor. Has responsibility for selecting, training, and disciplining employees. Supervises Program Director I.
Director of Hawaii Island Programs 0.02 FTE May provide backup or coverage as needed and handle client crisis.	Provides oversight and leadership for all programs on the Island of Hawaii. Supervises the Program Supervisor I's at least bi-monthly with frequent check-ins. Provides clinical supervision to the Domestic Violence Specialists who facilitate groups at least monthly and as needed. Develops, implements, and monitors Big Island 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 Big Island community. Provides community leadership through networking with community leaders, funders, and advocacy groups. Provides 24 hour clinical and administrative support to Program staff.
Clinical Coordinator 0.02 FTE	Under supervision of the Director of Quality Assurance and Training the Clinical Coordinator is responsible for assisting in the planning and implementation of the organization's accreditation activities.

Job Title / FTE / Client/Staff Ratio and Caseload Capacity	Justification
	Assists the Program staff in quality improvement endeavors and implementing contract requirements. Supports direct service staff in accreditation and quality improvement activities and outcomes. Reviews charts/manuals/documents to evaluate adherence to PQI, internal and external requirements, safety, and Best Practices.
<p>Program Supervisor I 3.00 FTE</p> <p>2.00 FTE East Hawaii 1.00 FTE West Hawaii</p> <p>Provides backup or coverage as needed and handles client crisis. Conducts groups and carries a caseload (depending on the volume of cases).</p>	<p>Provides direct oversight for the Program and is responsible for implementing and monitoring goals and objectives and day to day operations, referrals and assessments.</p> <p>Two supervisors are needed for Hilo due to the volume of clients filing for TROs.</p>
<p>Domestic Violence Specialist IV 0.50 FTE</p> <p>Provides 3 to 5 intakes per week and 2 groups weekly. Each group has approximately 12 to 14 clients.</p>	Responsible for providing comprehensive psychosocial assessment, identifying moderate to severe mental health and substance abuse issues. Provides case management and facilitation of groups and responsible for conducting ongoing victim safety checks, monitoring and tracking client attendance and progress, and providing exit interviews and follow up. Provides clinical supervision to the Domestic Violence Specialists who facilitate groups at least monthly and as needed.
<p>Domestic Violence Specialist II 3.00 FTE</p> <p>Provides 6 to 7 intakes per week and 3 to 4 groups weekly.</p>	Provides case management, conducts assessments, service plans, and facilitates groups. For the women's component, responsible for conducting ongoing victim safety checks and outreach to victims, assistance with TRO application, court advocacy, monitoring and tracking client attendance and progress, and providing exit interviews and follow up. For the men's component, provides case management, responsible for running groups, and maintaining service plans.
<p>Domestic Violence Specialist I or II 7.00 FTE</p> <p>Each full-time (1.0 FTE) position provides 6 to 7 intakes per week and 3 to 4 groups weekly. Each group has approximately 12 to 14 clients.</p>	Provides case management, conducts assessments, service plans, and facilitates groups. Responsible for conducting ongoing victim safety checks and outreach to victims, monitoring and tracking client attendance and progress, and providing exit interviews and follow up.
<p>Child Care Worker 0.75 FTE</p> <p>Each group has approximately 8 to 10 children.</p>	Responsible for providing age appropriate activities and supervision to children. Assists in the preparation and set-up of group activities that support the children who have experienced domestic violence in their homes.

Job Title / FTE / Client/Staff Ratio and Caseload Capacity	Justification
Office Manager II 0.02 FTE	Responsible for preparing, coordinating and processing of all personnel documents, maintaining and overseeing administration of office funds, overseeing all purchasing and records. Provides administrative support in tracking of monthly, quarterly and annual reports and other data. Supervises Program Secretary.
Program Secretary 0.60 FTE	Provides administrative support in tracking appointments, answers telephones and greets clients coming in to see staff for appointments.

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

Staff Qualifications

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

Job Title/Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
Director of Program Services Angie Doi	Master's Degree in Human Services and six years post Master's experience in supervision and administration with strong leadership skills.	Master's Degree in Counseling Psychology and 12 years post Master's experience in management, supervision and administration.
Director of Hawaii Island Programs Heidmarie Koop	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 Social Work, Clinical Licensed Social Worker and 9 years post Master's experience in management, supervision and administration.
Clinical Coordinator Susan Richard	Master's Degree in Human Services, two years human service and one year supervisory experience.	B.A. in Public Administration. Over four years experience working in the Quality Assurance and Training Department. Five years supervisory experience.
Program Supervisor I (three positions)	Four-Year College Degree from a school accredited by a recognized accrediting	Michelle Keiki joined the ATV Program team in 2006 with Turning Point for Families (TPFF). She has a Bachelor's Degree in

Job Title/Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
<p>Michelle Keiki (1.00 FTE) East Hawaii</p>	<p>agency and 2-4 years experience with domestic violence including one year of supervisory experience. Experience in dealing with a variety of areas including but not limited to domestic violence, child abuse and neglect. Willing to work with families that present these issues.</p>	<p>Sociology and 6 years of extensive experience providing direct services to victims of domestic violence and abuse and their children and perpetrators of Domestic Violence. As a Program Supervisor I since 2009, she has one year and 9 months of supervisory experience, and has provided outreach to the community about Domestic Violence Awareness. Michelle is an active member of the Family Violence Interagency committee and is a member of the statewide Domestic Violence Task Force representing Hawaii Island for the implementation of the Domestic Violence Strategic Plan.</p>
<p>Haunani Joaquin (1.00 FTE) East Hawaii</p>		<p>Haunani Joaquin joined TPF as a cultural consultant and continues to hold this role with CFS/ATV Program. Haunani became the case manager in 2002 for the ATV Program and Program Supervisor I for the Men's component in 2006. She has over 9 years of experience with direct service to victims of domestic violence and abuse, their children, as well as domestic violence offenders. She has promoted Domestic Violence Awareness to many community groups on Hawaii Island. She provides positive leadership, motivation and direction to her staff.</p>
<p>David Saindon (1.00 FTE) West Hawaii</p>		<p>David Saindon has 14 years experience working with victims and perpetrators of domestic violence. David has been a supervisor since 2001 for the ATV Program. He is certified as a Domestic Violence Instructor by the Federal Law Enforcement Training Center, a component of the Department of Homeland Security. He is a member of the statewide Domestic Violence Task Force representing Hawaii Island for the implementation of the Domestic Violence Strategic Plan and was grandfathered in when CFS merged with TPF.</p>

Job Title/Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
<p>Domestic Violence Specialist IV Jodi Mercier (0.50 FTE) West Hawaii</p>	<p>Master's Degree in Human Services and a combination of domestic violence and mental health and/or substance abuse experience is preferred.</p>	<p>Jodi Mercier joined the ATV Program team in 1998 and has been facilitating DVI groups since then. She has 25 years experience providing case management, 17 years experience facilitating groups and 13 years experience in the area of domestic violence.</p>
<p>Domestic Violence Specialist I or II</p> <p>Stan Canio (1.00 FTE) East Hawaii</p> <p>Roger Harris (1.00 FTE) East Hawaii</p> <p>Keshia Adolpho (1.00 FTE) East Hawaii</p> <p>Karla Garcia (1.00 FTE) West Hawaii</p>	<p>Four-Year College Degree from a school accredited by a recognized accrediting agency and 2-4 years experience with domestic violence, substance abuse or child abuse and neglect. Willing to work with families that present these safety issues.</p>	<p>Stan Canio joined the ATV Program team in 1995 and has been providing case management and facilitation to the Men's DVI Program. Stan also assists clients with their TRO applications to the Family Court and provides alleged victims with Court Advocacy during TRO hearings.</p> <p>Roger Harris joined the ATV Program team in June 2010 and provides facilitation to the Men's DVI groups. He has a Bachelor's Degree in Business Administration. Roger has had 3 years experience working with domestic violence offenders in the Fifth Circuit Family Court as a probation officer prior to coming to CFS/ATV Program.</p> <p>Keshia Adolpho joined the ATV Program team in June 2009 and provides case management and facilitation to the victim support groups and juvenile offender groups. She has a Bachelor's Degree in Political Science and Administration of Justice. Keshia assists alleged victims of domestic violence or abuse with their TRO application to the Family Court and provides Family Court advocacy during TRO hearings.</p> <p>Karla Garcia joined the ATV Program team in January 2008. With over 2 ½ years of experience working with victims and offenders of domestic violence and abuse she assists alleged victims with their TRO applications and provides Family Court advocacy in TRO hearings. She provides case management and facilitation to the Women's Domestic Violence Intervention program and juvenile offenders groups. She has an Associate's Degree in Liberal Studies.</p>

Job Title/Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
<p>Aurora Delaries (1.00 FTE) West Hawaii</p> <p>Shannon Migliori (0.25 FTE) West Hawaii</p> <p>Vacant (1.00 FTE) West Hawaii</p> <p>Vacant (0.75 FTE) East Hawaii</p>		<p>Aurora Delaries joined the ATV Program team in July 2008. With over 2 years of experience working with victims and offenders of domestic violence and abuse, she assists alleged victims with their TRO applications to the Family Court and provides Family Court advocacy in TRO hearings. She provides case management and facilitation to the victim support groups and the Women's Domestic Violence Intervention Program. She has an Associate's Degree in Liberal Arts.</p> <p>Shannon Migliori joined the ATV Program team in January 2008 and provides facilitation to both the Men's and Women's DVI Programs. She has 5 years of extensive experience working with offenders of domestic violence and abuse. She has a Bachelor's Degree in Psychology.</p> <p>Staff that do not meet qualifications in regards to the desired degree, have had extended experience in the field of social services with the emphasis on domestic violence. All DVS I/Is have demonstrated excellent skills in their respective responsibilities.</p>
<p>Child Care Worker Vacant (0.25 FTE) West Hawaii</p> <p>Vacant (0.50 FTE) East Hawaii</p>	<p>High School Diploma and six months experience.</p>	<p>Vacant</p>
<p>Office Manager II</p> <p>Terrie Martins (0.01 FTE) East Hawaii</p>	<p>High School Diploma and 1-2 years experience. One year supervisory experience preferred.</p>	<p>Terrie Martins has a High School Diploma and 9 years of experience providing administrative and clerical support for human service programs in East Hawaii. She started as a Program Secretary in September of 2008 for TPF and moved into the position as the Office Manager II for CFS in East Hawaii in February of 2009. In addition to her administrative duties, she provides supervision to the Program Secretary. Born and raised in East Hawaii, she understands</p>

Job Title/Incumbent Name	Minimum Qualifications, Education and Experience	Incumbent Qualifications, Education and Experience
<p>Dona McVay (0.01 FTE) West Hawaii</p>		<p>the local culture and the diversity of people which allows her to easily communicate and engage with families.</p> <p>The Office Manager II, Dona McVay, has a High School Diploma and over 40 years of experience providing administrative assistance. She has been the Office Manager II for the CFS West Hawaii Office for 20 years and has been with CFS since 1987. In addition to her administrative duties, she provides supervision to the Program Secretaries in West Hawaii. Dona is instrumental in developing database program data tracking systems and coordinating program reporting for the island of Hawaii.</p>
<p>Program Secretary</p> <p>Amy Hinton (0.50 FTE)</p> <p>Catherine LaMarco (0.10 FTE)</p>	<p>High School Diploma and clerical experience.</p>	<p>Amy Hinton has a High School Diploma and two years of secretarial experience. She has been a Program Secretary for Child and Family Service in West Hawaii since March of 2009.</p> <p>Catherine LaMarco has a High School Diploma and five years of secretarial experience. She has been a Program Secretary for Child and Family Service in West Hawaii since April of 2008. Born and raised in West Hawaii, she understands the local culture and the diversity of people which allows her to easily communicate and engage with families.</p>

Supervision and Training

Focus on Supervision Organization Wide

CFS has well established procedures and expectations for supervision. The process of supervision holds individual staff accountable for appropriate performance of their assigned duties and responsibilities, ensures the quality of client services, and provides a mechanism for professional development. One of the major goals of the supervisory process is to provide direct line staff with the knowledge and support to remove barriers to accessing services and achieving outcomes with their cases.

The supervisory ratios do not exceed one direct service supervisor to seven full-time direct service staff. At a minimum, each staff is provided with one hour of supervision per

month by their immediate supervisor. If the Domestic Violence Specialists (DVS) facilitates groups, supervision includes monthly documented assessment of the DVS' adherence to the Hawaii Batterers Intervention Program Standards and quarterly monitoring of the groups sessions. In addition, the supervisor determines if additional 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 individual sessions or group sessions as defined by contract, accreditation standards and/or professional practice. All supervisory sessions are documented in an individual supervisory file, maintained by the supervisor. The supervision notes document the session dates, issues discussed, and related action plans. During the supervisory session, the supervisor reviews case record documentation to ensure that the documentation:

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

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

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

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

Training – Enhancing Skills and Knowledge

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

videoconferencing capacity. This enables CFS staff on all islands to receive standardized information.

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

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

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

Orientation to the Program and the Organization

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

Program Specific Orientation – within 60 days of employment
• 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

Program Specific Orientation – within 60 days of employment
• Review of documentation requirements, including client-related forms, client files, service provision records, quarterly report forms, and timelines for submission of reports
• Review of referral process and resources
• Review of administrative policies and procedures, confidentiality and HIPAA
• Review of program specific policies and procedures, COA and contract requirements
• Review of assessing risk and safety of persons served and mandated reporting
• Techniques for handling emergencies
• Orientation to the establishment of rapport and responsive behaviors
• Orientation of the collaboration with other disciplines and community services in meeting the needs of the persons served
• Review of appropriate coordination with mental health, law enforcement, and other professionals
• Orientation of the basic health and medical needs of the service population
• Orientation on the needs of families in crisis, including needs of victims of violence, child abuse and neglect, and family members
• Orientation on the procedures for working with foreign language speakers and persons with communication impairments and the use of interpreters
• Orientation on public assistance programs
• Review of personal and client safety issues
• Review of supervision procedure and schedule, program and department staff meetings, and training plan
• Orientation on email, CFS network, shared computer drives, timekeeping system, and databases
• Orientation on Hawaii Batterers Intervention Program Standards

Organization Orientation – within 60 days of employment
• 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.

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

Training Focus	Trainings
Program Philosophy/ Service Delivery Techniques	<ul style="list-style-type: none"> • Cognitive Behavioral Theory and Techniques • Trauma Informed Care • Power and Control • Cultural, societal and gender issues related to domestic violence • Hawaii Batterers Intervention Program Standards • Motivational Interviewing
Group Training	<ul style="list-style-type: none"> • Dynamics of groups • Special consideration in working with domestic violence • Co-facilitation
Domestic Violence	<ul style="list-style-type: none"> • Overview of domestic violence • Dynamics of power and control • Impact of violence on victims • Effects on children and other household members • Cultural and gender issues • Victim safety and offender accountability
Risk, Legal and Regulatory Requirements	<ul style="list-style-type: none"> • Safety and rights of victims • Professionalism and ethics • Mandatory reporting • DHS statutory mandates under 45 CFR 1340; Hawaii Revised Statutes 346, 350, and 587; and Hawaii Administrative Rules and Departmental procedures • Reportable criminal behavior • Review of risk management/reporting standards • Behavior management (CFS policy and procedures) including nonviolent crisis intervention • CPR and First Aid
Assessment and Service Planning	<ul style="list-style-type: none"> • CFS Comprehensive Basic Assessment • Identifying family and individual strengths • Service planning
Service Delivery Basics	<ul style="list-style-type: none"> • Documentation • Client advocacy • Referral resources in the community • Case management/collaboration/coordination • Basic health and medical needs of the service population to include special needs

Training Focus	Trainings
Clinical Knowledge and Skills	<ul style="list-style-type: none"> • Working with clients with communication barriers • Professionalism/boundaries • Mental health basics and common diagnoses • Building therapeutic rapport • Basic counseling skills • Needs of individual and families in crisis; to include suicide precautions • Substance use and abuse
Quality Assurance	<ul style="list-style-type: none"> • Program outcomes development and measurement • Integration, coordination and monitoring of service quality standards
Supervisory	<ul style="list-style-type: none"> • Tracking and supervisory tools • Supervisory training (Module 1-Administration; Module 2-Human Resources; Module 3-Supervision; and Module 4-Fiscal)
Cultural Competency	<ul style="list-style-type: none"> • Values and beliefs of the various cultures in Hawaii

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. Details of all topics can be found in the Program Training Plan which is available upon request.

Commitment to Diversity

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

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

CFS conducted a two-part cultural sensitivity training on February 2 & 8, 2010. Haunani Rae Kanaka`ole Joaquin, Program Supervisor I for our Hilo Alternatives to Violence Program, focused on understanding where you come from, what your name means and genealogy. The training involved hands-on activity, questions and answers, and an

opportunity to work in groups on each island. Participants completed their own genealogy and shared together as a group. The training received positive feedback from the staff who attended.

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

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

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

Clinical Enhancement Program

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

Videoconferencing

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

others in the nonprofit community. Some of the ways CFS utilizes videoconferencing technology include:

- Standardized training modules. In order to provide quality training, there is a need for standardization in course content, instructor delivery, visual aides and distributed materials (handouts). CFS has developed modules in substance abuse, domestic and family violence, child abuse and neglect, behavior modification, documentation/legal issues, and professional boundaries.
- Staff case-conferencing of complex family issues. Staff located at remote sites can work together to discuss issues and accomplish goals for families and children in treatment. This level of case-conferencing is applicable to any clinical issue, but is especially helpful for programs requiring specific clinical expertise.
- Best Practices discussions at the program level. Regular opportunities are provided for program standardization for similar services on different islands. Technology creates the opportunity to share common and unique approaches among geographically defined programs, discussing clinical care pathways (what works best for certain types of clients), and discussing emerging trends.
- Training opportunities for staff at the national and international level. Provides new opportunities to bring Mainland and global expertise to Hawaii's human service industry.

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

B. Organization Chart

The CFS organization chart and the ATV Program chart are attached to this proposal.

VI. OTHER

A. Litigation

CFS is a party in the following lawsuit:

- Haldeman, et al. vs. University of Nations Pre-School; The University of Nations; Hawaii County Police Department; Child Protective Services; Department of Human Services; and Child & Family Service, Jointly and Severally

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

Child & Family Service was named in a complaint filed on December 28, 2005 with CFS filing an answer on June 2, 2006. On April 29, 2008 the Federal District Court

granted CFS and Clark's Motion for Summary Judgment. Trial as to the remaining parties was stayed pending disposition of an appeal filed by the Karen Duty and Donald Cupp (State of Hawaii case workers) as to the Court's denial of their Motion for Summary Judgment. CFS is not a party to this appeal. The District Court denied Plaintiff's motion to enter final judgment on Plaintiffs' claims against CFS and other defendants who were dismissed upon motion for summary judgment. No trial date has been scheduled on the remaining claims.

B. Licensure or Accreditation

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

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

Attachment 1
PROPOSED BUDGET

BUDGET REQUEST BY SOURCE OF FUNDS
(Period: July 1, 2011 to June 30, 2012)

Applicant: **Child & Family Service Hawaii Island - Alternatives to Violence Program**

BUDGET CATEGORIES	Total State Funds Requested (a)	(b)	(c)	(d)
A. PERSONNEL COST				
1. Salaries	108,609			
2. Payroll Taxes & Assessments	15,260			
3. Fringe Benefits	15,640			
TOTAL PERSONNEL COST	139,509			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Insurance	1,812			
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	9,600			
5. Staff Training				
6. Supplies	600			
7. Telecommunication				
8. Utilities	1,000			
9. Audit	294			
10. Mileage	1,200			
11. Administrative Support	16,477			
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
TOTAL OTHER CURRENT EXPENSES	30,983			
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	170,492			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	170,492	Vivian Yasunaga 681-1441		
(b)		[Redacted] Phone		
(c)		[Redacted] 1/27/11		
(d)		[Redacted] Date		
TOTAL BUDGET	170,492	Patti Bates, Chief Operating Officer Name and Title (Please type or print)		

BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Applicant: Child & Family Service Hawaii Island - Alternatives to Violence Program

Period: July 1, 2011 to June 30, 2012

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Domestic Violence Specialist II	1.00	\$34,653	100.00%	34,653
Domestic Violence Specialist II	1.00	\$34,653	50.00%	17,326
Domestic Violence Specialist II	0.50	\$34,653	50.00%	17,326
Domestic Violence Specialist II	1.00	\$34,653	100.00%	34,653
Director of Hawaii Island Programs	1.00	\$72,779	2.00%	1,456
Director of Program Services	1.00	\$72,779	2.00%	1,456
Office Manager II	1.00	\$33,283	1.00%	333
Office Manager II	1.00	\$33,283	1.00%	333
Clinical Coordinator	1.00	\$53,685	2.00%	1,074
				-
				-
				-
				-
				-
TOTAL:				108,609
JUSTIFICATION/COMMENTS:				
Salaries are based on a Market median study to maximize recruitment and retention.				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Child & Family Service Hawaii Island - Alternatives to Violence Program
 Period: July 1, 2011 to June 30, 2012

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

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

BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: Child & Family Service Hawaii Island - Alternatives to Violence Program

Period: July 1, 2011 to June 30, 2012

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

Attachment 2
DECLARATION STATEMENT

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

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

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

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

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

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

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

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

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

Child and Family Service

(Typed Name of Individual or Organization)

[Redacted Signature]

(Signature)

1/27/11
(Date)

Patti Bates

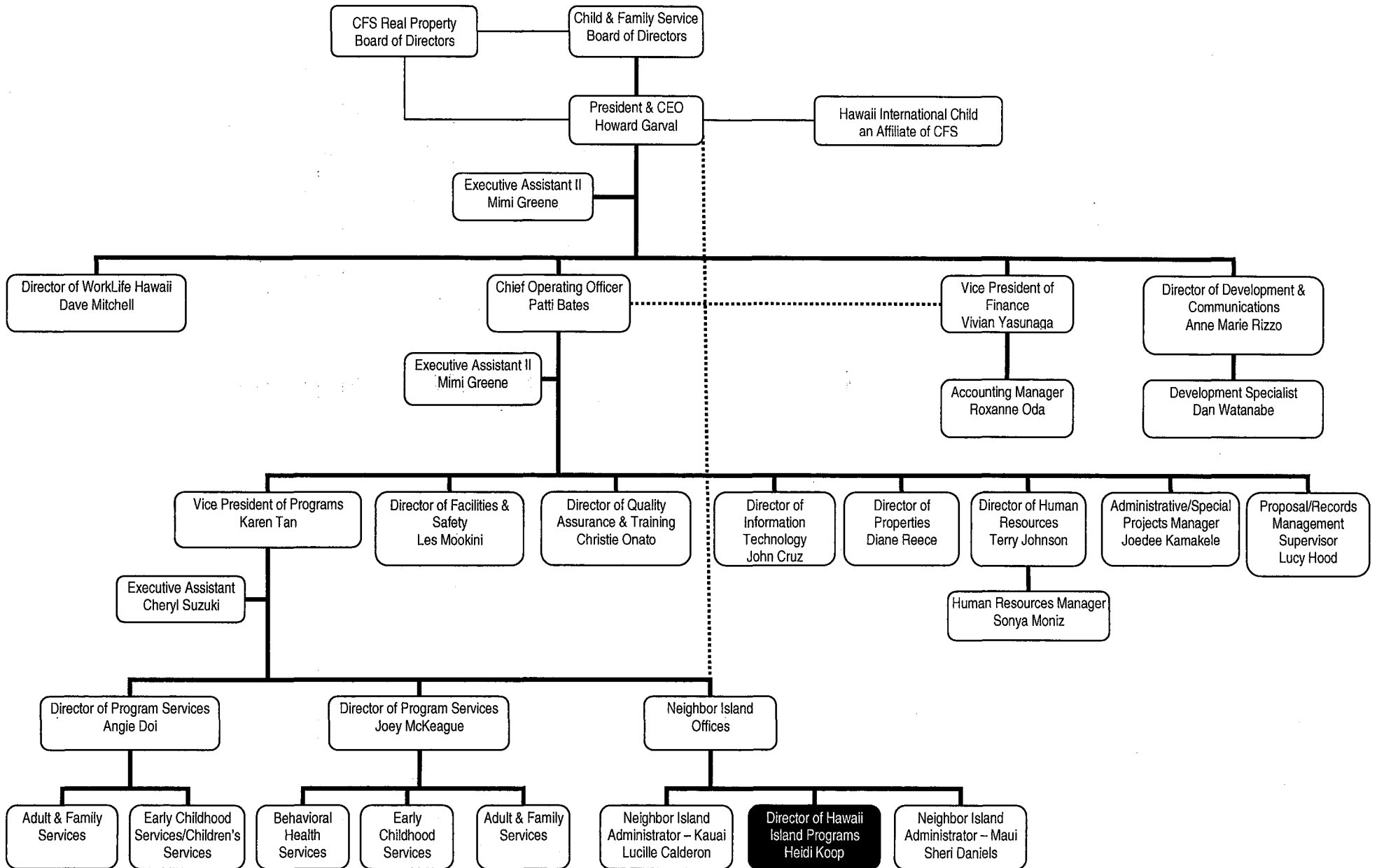
(Typed Name)

Chief Operating Officer

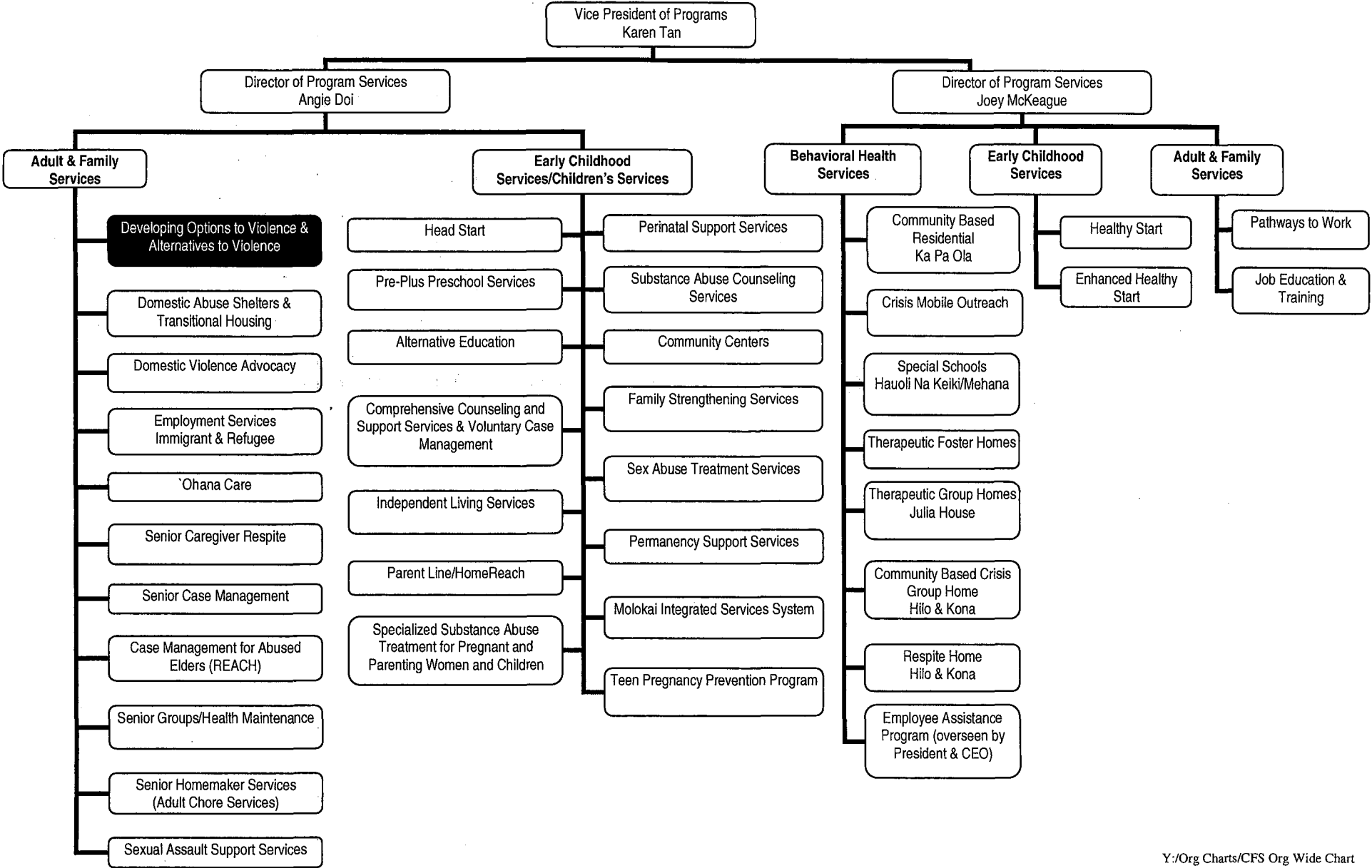
(Title)

Attachment 3
ORGANIZATION CHARTS

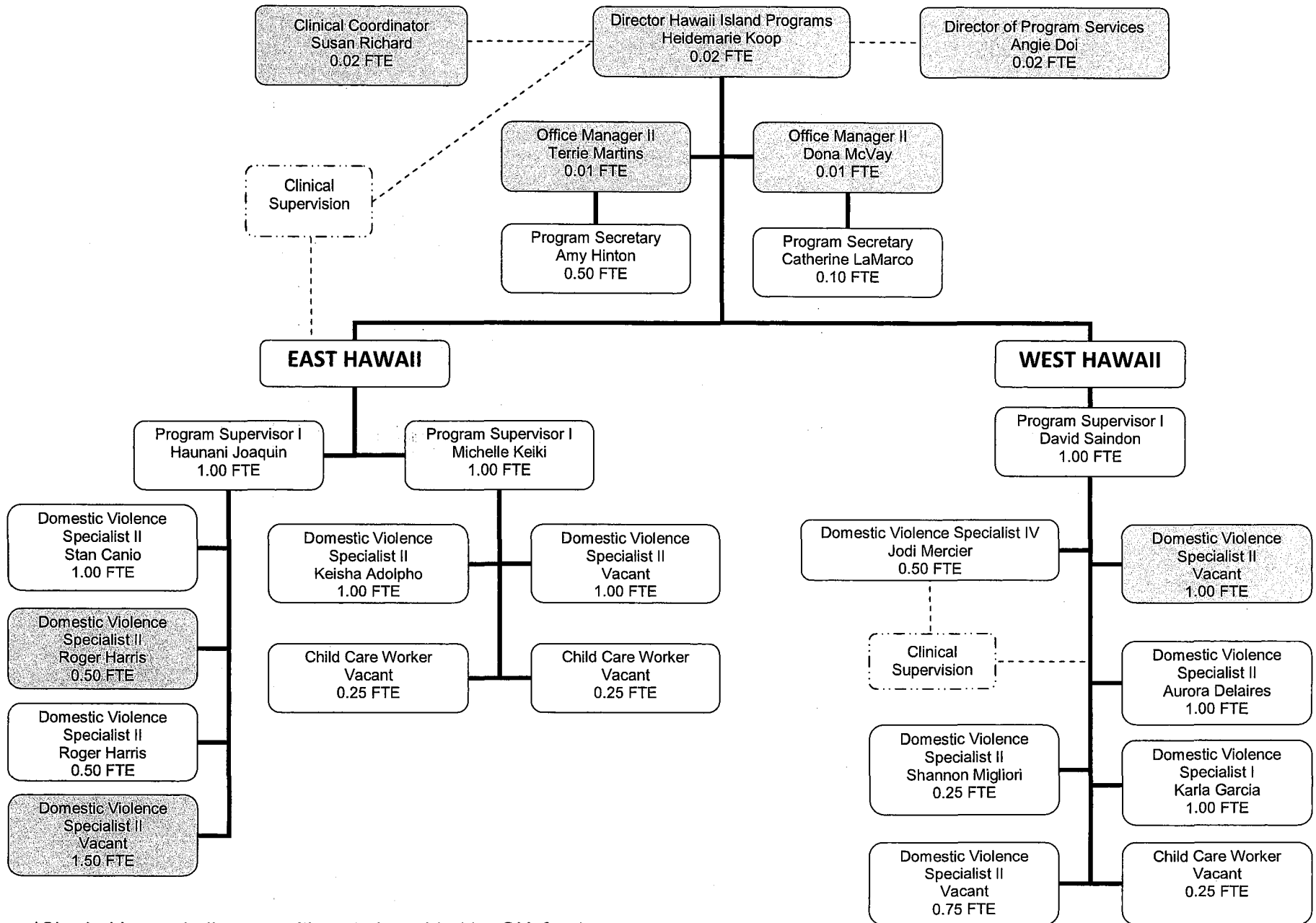
Child & Family Service Organization Chart



Child & Family Service Organization Chart



**Child & Family Service
Alternatives to Violence
Organization Chart**



*Shaded boxes indicate positions to be added by GIA funds.