| House District <u>14, 15, 16</u>  | THE TWENTY-SI<br>HAWAII STAT         |  | Log No:    |                                |
|---|--------------------------------------|--|------------|--------------------------------|
| Senate District   | APPLICATION FOR GRANTS & SUBSIDIES   |  |            |                                |
|   | Chapter 42F, Hawaii Revised Statutes |  |            | For Legislature's Use Only     |
| Type of Grant or Subsidy Request:   |                                      |  |            |                                |
| ☐ GRANT REQUEST – OPERATING   | ☐ GRANT R                            | EQUEST CAPITAL   | ☐ Subs     | IDY REQUEST                    |
| "Grant" means an award of state funds by the le<br>the community to benefit from those activities.  | gislature, by an appropriati         | on to a specified recipient, to support the  | ne activit | ies of the recipient and permi |
| "Subsidy" means an award of state funds by the incurred by the organization or individual in prov   |                                      |  | ropriation | n, to reduce the costs         |
| "Recipient" means any organization or person re   | eceiving a grant or subsidy.         |  |            |                                |
| STATE DEPARTMENT OR AGENCY RELATED TO THIS HUMAN SERVICES   |                                      | unknown):  |            |                                |
| STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNO  | OWN):                                |  |            |                                |
| 1. APPLICANT INFORMATION:   |                                      | 2. CONTACT PERSON FOR MATTERS IN APPLICATION:  | VOLVIN     | G THIS                         |
| Legal Name of Requesting Organization or Indiv Child and Family Service   | idual:                               | Name Karen Tan   |            |                                |
| Dba:<br>Child and Family Service  |                                      | Title Vice President of Programs   |            |                                |
| Street Address:<br>2970 Kele Street, Suite 203, Lihue, Hi 96766   |                                      | Phone # <u>681-1460</u>  |            |                                |
| 9878 Waimea Road, Waimea, HI 96796<br>4-1112 Kuhio Highway, Kapaa, HI 96746   |                                      | Fax # <u>681-5280</u>  |            |                                |
| Mailing Address:  |                                      | e-mail cfscontracts@cfs-hawaii.org   |            |                                |
| 91-1841 Fort Weaver Road<br>Ewa Beach, HI 96706   |                                      |  |            |                                |
| 3. Type of business entity:   |                                      | 6. DESCRIPTIVE TITLE OF APPLICANT  | 'S REQUE   | ST:                            |
| <ul> <li>☑ Non Profit Corporation</li> <li>☐ For Profit Corporation</li> <li>☐ Limited Liability Company</li> <li>☐ Sole Proprietorship/Individual</li> </ul> |                                      | FUNDING FOR CRITICAL SERVICES AT THE<br>KAUAI.   | E FAMILY   | CENTERS ON THE ISLAND OF       |
| 4. FEDERAL TAX ID #:  |                                      | 7. AMOUNT OF STATE FUNDS REQUEST   | ED:        |                                |
| 5. STATE TAX ID #:  |                                      |  |            |                                |
|   |                                      | FY 2014: \$300,000.00  |            |                                |
| 8. STATUS OF SERVICE DESCRIBED IN THIS REQUES  NEW SERVICE (PRESENTLY DOES NOT EXIST)  EXISTING SERVICE (PRESENTLY IN OPERATION)                              | SPECIFY THE AI                       | MOUNT BY SOURCES OF FUNDS AVAILABLE THIS REQUEST: STATE \$ FEDERAL \$ COUNTY \$ PRIVATE/OTHER \$ | =          |                                |

# **Application for Grants and Subsidies**

#### I. BACKGROUND AND SUMMARY

In October 2011, CFS was notified that the Title IVB funding for the Family Centers was being eliminated as of November 30, 2011. Without this funding, the communities were faced with losing both Nana's House and Hale Ho'omalu. The closure of these Family Centers would adversely affect the approximately 200 needy families who come to the Family Centers each month for food, clothing and basic needs. It would terminate case management, counseling and parent education for the 40 involved families and end the ability of families in crisis to walk into their community Family Center to talk about the stresses that they are experiencing and receive information, referral, support with accessing community resources and other necessary services to maintain a safe and stable home for their children. CFS, the families, their communities and the legislature came together to find emergency short-term funding to keep the doors at Nana's House and Hale Ho'omalu open through June of 2013. During this period, CFS has worked to increase community grants and donations, co-locate programs at the centers and build a partnership with Blueprint for Change to try to create a stable funding base. However, while we complete these more permanent funding strategies, the 2013-14 GIA request is necessary to maintain these community-based Family Center services which are essential in helping strengthen and support families who are in crisis or at-risk of child abuse and neglect.

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

Since 1899, CFS has dedicated its efforts to its mission of "Strengthening families and fostering the healthy development of children." CFS has 38 programs statewide that offer an array of effective and culturally relevant services to Hawaii's residents in need. The broad spectrum of services provided by CFS include: domestic violence intervention, case management, residential group homes, alternative education for alienated youth, prevention and treatment of child abuse, and family, school, and community-based counseling related services for children and their families. Infants, children, adolescents, young adults, older adults, individuals, and families in need benefit from these services. CFS's programs are responsive, flexible, and focused on positive outcomes. Services are provided in homes, schools and in the community as well as CFS's offices throughout the State. CFS provides services through 44 sites throughout the State, on the islands of Oahu, Hawaii, Kauai, Maui, Molokai, and Lanai. CFS's strengths lie not only in its size and ability to share expertise and resources statewide, but also in its ability to adapt services so that they are unique and appropriate to the island and communities it serves.

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

House and Hale Ho'omalu continue to modify or expand their services to meet the changing needs of the community. For example, in 2012 Nana's House and Hale Ho'omalu became SNAP outreach centers for Kauai, housed the Healthy Start Home Visiting staff and partnered with Legal Aid and Ho'ola Lahui to bring legal consultation and support for MedQuest applications directly to the Family Centers to support the families who come for food, clothing and other basic needs.

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

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

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

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

children. Nana's House and Hale Ho'omalu have helped many families to develop and maintain a safe and stable home for their children. Just as importantly, the continued presence of the Family Centers in these communities has also strengthened the community by increasing the involvement of the business and faith-based organizations in supporting local families.

# 2. The goals and objectives related to the request

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

# Objectives include:

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

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

The need for community-based family support services on Kauai is well documented; high unemployment and a lack of resources continue to create stress for Kauai families. Traditionally, the majority of available family support services have been located in and around Lihue, the economic and administrative hub of the island. For the last 16 years, the Family Centers have been providing support to at-risk families on the east and west sides of the island where the services are more easily accessible to families. Kauai Regional Planning Committee identified East and West Kauai as having high-risk populations, particularly because of high unemployment and underemployment. The purpose of providing Family Centers for families with children in these areas is to strengthen and preserve families at-risk for child abuse and neglect or in crisis.

In October 2011, CFS was notified that the Title IVB funding for the Family Centers was being eliminated as of November 30, 2011. The closing of Nana's House and Hale Ho'omalu would adversely affect the approximately 200 needy families who come to the Family Centers each month for food, clothing and basic needs. It would terminate case management, counseling and parent education for the 40 involved families and end the ability of families in crisis to walk into their community Family Center to talk about the stresses that they are experiencing and receive information, referral, support with accessing community resources and other necessary services to maintain a safe and stable home for their children. CFS, the families, their communities and the legislature came together to find emergency short-term funding to keep the doors at Nana's House and

Hale Ho'omalu open through June of 2013. During this period, CFS has worked to increase community grants and donations, co-locate programs at the centers and build a partnership with Blueprint for Change to create a stable funding base. However, the 2013-14 GIA request is necessary to maintain these community-based Family Center services which are essential in helping strengthen and support families in crisis or at-risk of child abuse and neglect while we complete these more permanent funding strategies.

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

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

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

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

# 4. Describe the target population to be served

The Family Centers are open to families who are in need of family support services who live in the target areas. The population for the proposed services is families (1) who are

Applicant: <u>Child & Family Service</u> (Family Centers)

referred by Child Welfare Services, other professional agencies or are self referred, (2) whose children are victims of or are at-risk of child abuse and/or neglect, or (3) who are in crisis. Many of these families are also impacted by domestic violence, substance abuse or are in need of basic food, clothing and supplies. Families referred by Child Welfare Services are given priority when service availability is limited.

### 5. Describe the geographic coverage

The Family Centers serve the Island of Kauai, specifically targeting the Westside (Koloa to Mana) and the Eastside of Kauai (Hanamaulu through Anahola). However, all Kauai families are welcome at the Family Centers.

### II. SERVICE SUMMARY AND OUTCOMES

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

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

Service Activities include:

#### 1) Information and Referral Service

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

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

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

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

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

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

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

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

### 3) Resources to Meet Basic Needs

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

Families that come in for food are screened for eligibility for SNAP services and other possible financial supports. Families are also encouraged to enroll in the

budgeting and nutrition classes. As they become more familiar and comfortable at the Family Centers, they often discuss other family issues and become involved in services through intake and assessment.

### 4) Collaboration with Other Service Providers

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

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

### 5) Advisory Board and Volunteer Recruitment

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

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

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

### 6) Outreach Services to the Target Group

The Family Centers are involved in two types of outreach: 1) community outreach to inform the community of services and for staff to introduce themselves to family

members who are in the target population, and 2) individual outreach services to engage target families in services.

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

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

# 7) Child Care

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

### 8) Work Plan

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

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS             | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)                    | TIME LINE /<br>SCHEDULE  |
| Contract specific policies and procedures, including: | ·  |  |  |
| Initial Referral &     Engagement Process             | The Family Centers are open to all families who live in the target area and are in need of family support services. The target population includes families who are (1) referred by CPS, other agencies or self referred, (2) whose children are victims or at-risk for child abuse and/or neglect, or (3) who are in crisis.  |  |  |
|   | Families referred by Child Welfare Services are contacted within 24 hours of referral and given priority when service availability is limited.   | Center Manager, Specialist II Backup: Program Director I       | Contact attempted within 24 hours of referral                                  |
|   | All staff members at the Family Centers answer the phones or greet families who walk in. They give families information about the center services and provide information and referral as needed.  | All Center Staff   | At initial contact   |
|   | Families who are only interested in receiving food or clothing sign in on the log and are shown to the food pantry or clothing closet and assisted with their requests. They receive information on the dates and times for the food pantry, are given any additional information that they might need and are made aware of other resources available at the Family Center and within the community. Families seeking food are screened to see if they are eligible for the SNAP program or other food or financial assistance. | Center Manager Backup: Specialist II, trained volunteers       | At first visit   |
|   | Families who are requesting additional services such as outreach, case management, parenting classes or counseling meet with the Specialist II and are scheduled for an intake appointment and receive a complete assessment.  | Specialist II Backup: Clinical Specialist Specialist II and/or | Within one week if the family is available or later if at the family's request |
|   | At the intake appointment, demographic information is obtained from the family and they participate in a   | Clinical Specialist Backup: Program Director                   | Within one week if there are openings for case                                 |

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|   | comprehensive family assessment. The assessment and family history incorporates information about any potential risk to the children as well as the family strengths, values, resources, needs and concerns. Based on the assessment the family and staff decide on the type of service(s) needed. An Individual Family Support Plan (IFSP) defining family goals is created   | I   | Management or counseling  At next scheduled group for parenting classes         |
|   | with the family.  If case management services are indicated, the Specialist II works with the family to help them address their family goals. The Center Manager may also be assigned to provide the family with information, referrals, and help with applications and/or scheduling appointments with community resources.  If counseling services are needed and there are openings, the family will be scheduled an appointment with the Clinical  | Specialist II, Center Manager  Clinical Specialist Backup: Program Director | Case management and counseling services can begin as soon as scheduling permits |
| Creating and Managing     Waiting Lists         | Specialist.  If there are no available counseling appointments, families are put on a wait list pending an opening. The Family Centers follow the CFS and the Family Center policy regarding wait lists. Families are notified regularly about their status on the waitlist, estimated time before receiving services and other services in the community they may be eligible. CPS referrals are given priority for counseling services and the referring CPS worker is notified if there is going to be a delay in providing services. | Center Manager, Specialist II Backup: Program Director I                    | Outreach and case<br>management services can<br>begin immediately               |
|   | Families waiting for counseling services are also offered outreach and case management services. The Specialist II and Center Manager can help the family build a support network with other community groups or service providers. The Specialist II can also provide home visits, transportation and brief, informal counseling on issues that may arise in crisis situations.   | Specialist II, Center<br>Manager<br>Backup: Program Director<br>I           | At time of intake   |
| Termination of Services/     Discharge Criteria | Discharge planning is integrated into the Individual Family Support Plan so that the family is included in determining the   | Specialist II, Clinical<br>Specialist                                       | At time of intake, assessment and treatment                                     |

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|  | criteria for terminating services.  The aftercare planning process begins during the service period. At case closure a final discharge plan is completed as well as a complete aftercare plan with the family and a copy is provided to them.  | Backup: Program Director I  | planning                          |
| Serving Clients with     Limited English     Proficiency and Physical     Disabilities | Families are assessed at first contact with the Family Centers for any accommodations that need to be made for clients with limited English proficiency and/or physical disabilities. The Center Manager will arrange for any accommodations necessary to provide clients with needed services. Services can include meeting with bilingual staff, obtaining an interpreter, arranging for services to be provided in the home, coordinating with paratransit (Kauai bus), and modifying curriculum/activities. The staff will also link the family to any disability services that the family does not currently have as applicable.  | Center Manager<br>Backup: Specialist II   | Upon referral or at first contact |
|  | Limited English: If a family has limited English proficiency, the staff try to locate someone at the Family Center or CFS Kauai office to assist with interpretation services. Several of the Family Center staff are bilingual (e.g. Ilocano, Tagalog, and Spanish) and we hired an hourly worker who is fluent in Marshallese to help with the growing number of Marshallese families who are coming to the Family Centers. CFS staff on the other islands can also be utilized through our VTC capabilities. The Specialist II can also work with other service providers on Kauai to utilize interpretation services. Translated intake paperwork and other documents are provided for the family if available. Several intake documents are already translated into various languages that are most frequently spoken on Kauai. | Center Manager, Specialist II Backup: Program Director I Interpreter/Translator   |                                   |
|  | Physical disabilities: Both of the Family Centers and the Kauai CFS office are ADA compliant and can accommodate clients with most physical disabilities. Family Center  | Specialist II, Clinical<br>Specialist, Center Manager<br>Backup: Program Director |                                   |

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|   | services can also be provided to families in their homes or at a place in the community that is convenient for the family and safe for both the family and program staff. Program staff can provide transportation and will also help clients to use the paratransit transportation system on Kauai. Other accommodations can be made when needed.  | I   |  |
| <ul> <li>Case Reporting,         Documentation, and             Coordination with             Referring Agencies.     </li> </ul> | Reporting and documentation includes client consent forms, CFS Comprehensive Basic Assessment, Individual Family Support Plan (IFSP), progress notes, quarterly case summaries, discharge summaries, after care plans, Quarterly Activity Reports (QARs), Client Eligibility List (CEL) and other documentation necessary to monitor and evaluate the quality, quantity and timeliness of the services provided. The written reports are in an approved format.   | Specialist II, Clinical Specialist, Program Director I Backup: Director of Kauai Programs | Ongoing throughout the contract                            |
|   | <b>Documentation:</b> Each and every contact, attempted contact and phone message with a family, referral source or other entity involved with a particular case is documented in a progress note and placed in the file within 24 hours of the activity per COA standards.   | Specialist II, Clinical<br>Specialist<br>Backup: Program Director<br>I                    | From the beginning of service to termination and follow-up |
|   | When referrals are received at the Family Center from a CPS worker or other referring agency, the Center Manager reviews the referral and assigns the family to the Specialist II or Clinical Specialist for the intake assessment depending on the services requested by the agency worker. The Specialist II or Clinical Specialist will attempt to contact the family within 48 hours and will contact the agency worker if they have any questions regarding the referral or if they can't contact family with information given. |   |  |
|   | For families who are referred to the Program by CPS, the Family Center work will contact the CPS worker when the family is contacted, if the family does not accept services, or if the Program is unable to locate them.   |   |  |

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|   | Case reporting: For families referred to the Family Centers by CPS or other referral agency who accept services and provide consent to release confidential information, the Family Center staff will provide case updates and will also inform of any significant changes especially regarding critical incidents or non-participation in the mutually agreed upon program plan. The Family Center staff can provide updates on the family's progress on goals, attendance at appointments or parenting sessions or other updates as requested by the CPS worker.  | Specialist II, Clinical<br>Specialist<br>Backup: Program Director<br>I               | Ongoing from beginning of service through termination and follow-up |
|   | CPS will be immediately notified if the worker becomes aware of any concerns, events or conditions that threaten the safety of the child.   |  |   |
|   | The case discharge report and outcomes for the client/family can be shared with the CPS worker at the time of case closure.   |  |   |
|   | The number of families referred by CPS will be tracked and reported to DHS on the quarterly activities report.  |  |   |
|   | Coordination with CWS: The ultimate goal of the Family Center is to support safe and stable families and prevent the abuse and neglect of children. The focus of the Family Center services is on supporting families who are at-risk of child abuse and neglect so that they can make the changes necessary to stabilize their families, eliminate some of the risk factors and keep their children safe and healthy in their own family home. The Family Center services can also be used to support the families who are already in the CPS system by helping them with basic needs, parenting classes, information and referral and other supportive services. These same services are also very important for parents who are transitioning out of the CPS system. The Family Center can continue to support the family with needed services and | Center Manager, Specialist II, Program Director I Backup: Director of Kauai Programs | Ongoing throughout the contract                                     |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)                                  | TIME LINE /<br>SCHEDULE                    |
|   | partner with CPS to ensure continuity of care when a case is transferred or closed by CPS. As with the DHS, the Family Centers are deeply concerned about the safety, permanency and well-being for the children and families.   |  |  |
|   | The Family Center staff have long standing relationships with the CPS section staff in their areas. The staff work together in committee meetings and on individual case consultation and coordination. The CPS staff are welcome to visit the Family Centers at any time and can meet clients there, hold Ohana conferences, supervised visitation or Youth Circles at the Centers. The staff meet informally and formally to identify ways to improve communication, coordination and expectations for program services. |  |  |
|   | Referral source surveys are sent to the CPS Social Workers and management staff at the CPS Division level at least twice a year to obtain additional feedback about services. CFS continues to be flexible to accommodate CPS needs and concerns and will participate in quality assurance/improvement projects as requested by DHS for research and evaluation purposes.  | Program Director I Backup: Director of Kauai Programs                        | Twice a year                               |
| 2. Services for Families,                 |  |  |  |
| including:  Information and Referral      | Information and referral is provided throughout a family's participation at the Family Center.  Any family calling or walking into a center is given information about services at the Family Centers as well referrals to other community services that may be beneficial to them. Staff will help families understand eligibility guidelines, help with application forms and schedule appointments for them if needed.  | Center Manager, Specialist II, trained volunteers Backup: Program Director I | At first contact and for as long as needed |
|   | When necessary, staff will provide transportation to medical, housing or other essential services.   |  |  |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS                           | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)                    | TIME LINE /<br>SCHEDULE   |
|   | The worker will follow up with the family to see if they made contact with the referral and received requested services or help. When the family is an active case, the referral outcomes will be noted on the progress notes and/or Individual Family Support Plan. For families who are no longer active, the outcomes will be tracked through the 3 and 6 month follow-up forms.  | Specialist II Backup: Center Manager                           | Throughout services and at 3 and 6 months after the end of services |
| Provision of Mediation,     Family, and Relationship     Counseling | Families requesting counseling services participate in an intake session and the comprehensive assessment noted in Service Activity #1. The Clinical Specialist and the family agree on the type of counseling needed (individual, family, couple) based on the family's initial reason for requesting services, the information gathered in the assessment of the family's level of risk of child abuse, and their strengths and outside support. Depending on the level of need for counseling services, family members may be seen weekly or less frequently. | Clinical Specialist Backup: Program Director II                | Within one week of initial call if family is available              |
|   | In some circumstances, the Family Centers will work with the families to include additional family members or work with the DHS staff to support an Ohana Conference.  | Clinical Specialist Backup: Program Director I                 | As needed   |
|   | If there is a crisis and the Clinical Specialist is not available, the Program Director I will provide necessary services.   | Program Director I Backup: Director of Kauai Programs          | As needed   |
|   | Depending on the assessment, participation at parent education classes may be included in the Individual Family Support Plan or may be a sufficient level of service for the family by itself.   | Specialist II<br>Backup: Clinical Specialist                   | As needed   |
| Provision of Resources to<br>Meet Basic Needs                       | Both Nana's House and Hale Ho'omalu provide families with easy access to emergency food and clothing. Using funds from community donations CFS buys food from the Kauai Independent Food Bank and the Hawaii Food Bank in Lihue for the Family Centers' Food Pantries. Families on the Westside and Kapa'a areas then have easy access to  | Center Manager,<br>trained volunteers<br>Backup: Specialist II | Available as needed   |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS      | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)                           | TIME LINE /<br>SCHEDULE        |
|  | emergency food. The Centers also receive donations of adult and children's clothing, which they then make available to families in need.   |   |                                |
|  | The availability of food and clothing brings many homeless and high-risk families into the centers where they can then become familiar with other available support services.  |   |                                |
|  | Every family coming into the Family Centers that needs food and/or clothing is helped by the Center Manager. The names and ages of the family members are obtained and the Center Manager helps the families to feel welcome and comfortable at the Centers and develops a relationship with them. | Center Manager<br>Backup: Specialist II,<br>Program Director I        | Available as needed            |
|  | Nana's House also has a partnership with the Westside<br>Ministers Association that allows families to request<br>emergency funds for other basic needs (utility bills, housing<br>deposits, etc.) through the workers at Nana's House.  |   |                                |
|  | Staff at both centers are knowledgeable about emergency assistance resources available in the community and will work with any family in need to try and find necessary help.  |   |                                |
| Collaboration with Other     Service Providers | The Family Centers are a result of a collaboration between CFS, the Title IVB Regional Planning Committee, and local community partners. The success of the Centers is directly related to their connections to a broad array of services to families.   | Center Manager, Program Director I Backup: Director of Kauai Programs | Ongoing                        |
|  | Each center has a local community Advisory Board, which oversees the coordination of Family Center services, advises the center staff of community needs and opportunities for collaborations and partnerships.  | Center Manager Backup: Program Director I, Director of Kauai Programs | Meeting held every other month |
|  | Each Family Center makes State Employment Service job listings available, and keeps community service brochures and flyers of community activities posted for families. Family   | Center Manager, Specialist II Backup: Program Director                | Available at all times         |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS    | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)  | TIME LINE /<br>SCHEDULE |
|  | service programs are co-located at both centers: a Comprehensive Counseling and Support Services (CCSS) Parent Educator, Healthy Start Family Support worker and a Voluntary Case Management Specialist work out of Nana's House. The Independent Living Services Specialist, Perinatal Support Services worker, Teen Pregnancy Prevention worker and an Enhanced Healthy Start Family Support Worker have their work space at Hale Ho'omalu. Workers from all CFS programs and many other community programs know that they are always welcome to bring their families into the centers and learn about the services available to them. | I  |                         |
|  | The centers are also a regular meeting place for community meetings and are often used for Tobacco Cessation groups, budgeting education groups, Ohana Caregiver (Grandparent Supporting Grandchildren) support groups and other services specific to CPS clients (supervised visitation, Ohana Meetings and Youth Circles). Partnerships with the Boys and Girls Club and the Community Medical Clinics helps families to access after school activities for their children and get medical, dental and behavioral health services, especially if they are under or uninsured.  | Center Manager, Specialist II, Program Director I Backup: Director of Kauai Programs | As scheduled            |
|  | The Family Center staff have close working relationships with direct service staff at Public Health Nursing, WIC, Food Stamp and Medicaid Offices, DOE counselors and PCNC staff. Over the years the Family Centers and community and state agency staff have created a strong partnerships and a broad referral network.  | Center Manager, Program Director I or II Backup: Director of Kauai Programs          | Ongoing                 |
|  | The Family Center and other CFS staff are members of numerous community collaborations, committees, boards and task forces.  |  |                         |
| Advisory Board and     Volunteer Recruitment | Both of the Family Centers have a community Advisory<br>Board made up of representatives from local service  | Center Manager, Program<br>Director I  | Every other month       |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS | SPECIFIC TASKS  | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)                                      | TIME LINE /<br>SCHEDULE   |
|   | providers, county and State departments, businesses, the faith community and consumers. The Advisory Boards meet regularly and provide community input and oversight into Family Center activities and future plans. The meetings also offer a forum for members to learn about other upcoming projects, family activities and services.  | Backup: Director of Kauai<br>Programs  |   |
|   | Volunteers are recruited through community meetings, health fairs and community gatherings where the Family Centers may be providing program information. Potential volunteers are screened and trained to support activities at Nana's House and Hale Ho'omalu. Partnerships with Alu Like, County Area Agency on Aging and Work Wise provide a stable source of volunteer help while the workers learn important work skills at the Family Centers. Volunteers currently perform routine clerical work and assist the staff with setting up and maintaining the food pantry and clothes closet. Volunteers with experience and training working with children may also provide child care while the parents are in sessions at the center. All volunteers receive training in confidentiality, HIPAA requirements and community resources as well as specific training to do their job. | Center Manager, Specialist II Backup: Program Director I                         | As needed   |
| -   | Volunteers to the Family Center must comply with all of the same CFS Human Resources and funder screening requirements as a regular employee in this program.   | Human Resources Department, Center Manager Backup: Program Director I            | As needed – completed<br>before starting work at<br>Family Center |
| Outreach to the Target     Group          | The Family Centers routinely provide community outreach to find families in need and individual family outreach to help families receive needed services. All CFS staff talk about the services available at the Family Centers whenever they are out in the community or meeting individually or in groups with families and individuals.  | All Family Center Staff, all<br>CFS Kauai staff<br>Backup: Program Director<br>I | Daily basis   |
|   | The Family Center staff are involved in a wide variety of   | Specialist II, Center  | As scheduled  |

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

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|    | OGRAM REQUIREMENTS  SPECIFIC TASKS  RESPONSIB (& BAC  |   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)   | TIME LINE /<br>SCHEDULE  |
|    |   | Each of the Family Centers has a children's playroom that is equipped with age appropriate activities, books and art supplies. The parents are always in the Family Center when their children are provided care so the Family Centers are never taking full responsibility for the children. There are no licensing requirements for this short-term care with parents in the next room.   | Backup: Program Director I  |  |
|    |   | Child care provides an opportunity for the staff to see the parents and children interact and to assess the status of the child.  |   |  |
| 3. | Development of protocols, including those regarding:  |   |   |  |
|    | Criminal History and CPS<br>Registry Personnel Checks | Criminal history background checks:  Once an employment offer is tendered and accepted, a criminal history check is conducted via the Hawaii Criminal Justice Data Center for all new direct service employees. A printed report of each criminal conviction record check is maintained in the employee's personnel record. An offer of employment is withdrawn or the position of a direct service provider is terminated when a prospective or current direct service provider has a criminal conviction as indicated as follows:  • The criminal conviction occurred within the last 10 years; and  • The crime for which there is a conviction has a rational relationship to a direct service provider's position. | Human Resources (HR) Employment Assistant and Program Director I Backup: HR designee and Director of Kauai Programs | Upon hire; then 12 months later; then thereafter every 2 years |
|    |   | CPS Registry checks: Once an employment offer is tendered and accepted, a check is conducted via the Protective Services Central Registry for all new direct service employees. A printed report of each record check is maintained in the employee's personnel   | HR Employment Assistant<br>and Program Director I<br>Backup: HR designee and<br>Director of Kauai Programs          | Upon hire; then 12 months later; then thereafter every 2 years |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS          | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)  | TIME LINE /<br>SCHEDULE   |
|  | record. A check is completed upon initial hire, twelve months later, and thereafter, every two years.  |  |   |
|  | Unfavorable findings do not necessarily result in the employee's dismissal and are reviewed on a case-by-case basis with the following criteria:  • The nature and gravity of the offense  |  |   |
|  | <ul> <li>The nature and gravity of the offense</li> <li>The amount of time that has passed since the offense</li> <li>The nature of the position in question</li> </ul>  |  |   |
| Quality Assurance and<br>Evaluation Specifications | Quarterly Activity Reports (QAR) are completed and submitted by the Program Director I to funding agency. They contain: information on program progress that quarter from the indicators on Forms A, B, C; major accomplishments that quarter; training provided using funds; problems encountered and corrective actions taken; staff changes; plans for the next quarter; referral sources; and other significant information about the Program for that quarter.  | Program Director I<br>Backup: Director of Kauai<br>Programs                            | Due to POS Monitor within 30 days of end of fiscal quarter  |
|  | Results from the Parenting Class pre- and post-tests and client progress on their Individual Family Support Plan goals also help the program evaluate its effectiveness.   | Specialist II, Clinical<br>Specialist, Center Manager<br>Backup: Program Director<br>I | Progress on goals is<br>reviewed as part of the<br>discharge summary  |
|  | Discharge Summaries are completed by the Specialist or Clinical Specialist if the primary staff involved with the family. The summary documents the client's progress during the length of the case. An aftercare plan is included which identifies the continuum of other services needed or desired by client, and which specifies the nature and frequency of follow-up or aftercare contact by CFS (if needed). These results also help the Program evaluate its effectiveness. Changes are made to the Program based on how clients are doing at discharge. | Specialist II, Clinical<br>Specialist<br>Backup: Program Director<br>I                 | Discharge Summaries are entered in the client's record no later than 30 days following discharge  Given to clients at discharge |
|  | Client Satisfaction Surveys are distributed to clients by the Center Manager. Returned surveys are reviewed by the   | Center Manager<br>Backup: Program Director   | Distributed at the end of each series of parent   |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS | SPECIFIC TASKS  | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)                           | TIME LINE /<br>SCHEDULE  |
|   | Program Director and the Director of Kauai Programs and sent to the CFS QA and Training Department on Oahu. Additionally, client satisfaction is discussed during quarterly Family Center PQI meetings.   | I   | classes; during the first<br>quarter and at the end of<br>case management and<br>counseling services |
|   | Referral Source Surveys are distributed by the Center Manager to the referring CPS social workers, supervisors and Kauai CWS Section Administrator; and other referral agencies in order to provide a formal opportunity for stakeholders to express their views with regard to designing, reshaping, and redefining existing services. Additionally, stakeholders are encouraged to identify barriers that prevent access to any group of individuals. Feedback from stakeholders is aggregated and utilized to improve management strategies and service delivery practices. Referral source surveys are sent twice a year.                                       | Center Manager Backup: Program Director I, Director of Kauai Programs | Given to referral sources<br>twice a year  |
|   | The feedback from the surveys is shared and discussed with program staff during supervision, annual reviews, staff meetings, and during the CFS quarterly PQI process. Sharing this important information allows the Family Center staff members to self evaluate and take ownership for program improvements.  |   |  |
|   | Consumer Satisfaction Phone Calls are conducted quarterly by the Program Director. Phone calls are made randomly to both closed and open cases. The information gathered from the client satisfaction phone calls is used to identify program strengths and weaknesses as indicated by program consumers. Information from this survey is complied into one report and shared during staff meetings with the entire staff. Information is also provided to individual team members and is used during their annual performance reviews. Areas of strengths or improvements needed are summarized in the Quarterly Manager's Report for review by the PQI committee. | Program Director I Backup: Director of Kauai Programs                 | Calls made quarterly to three clients  |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS | SPECIFIC TASKS   | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)  | TIME LINE /<br>SCHEDULE                             |
|   | Similar to the referral source satisfaction surveys, the feedback from client phone calls and surveys is shared and discussed with program staff during supervision, annual reviews, staff meetings, and during the CFS quarterly PQI process.  Documented individual supervision and group supervision on shared cases is completed at a minimum, twice monthly and prior to case closure. Group supervision may be done. During supervision as well as throughout each week, the client database and all case files, daily and weekly tracking logs/charts, calendars and schedules are discussed and reviewed to ensure proper service delivery, documentation, reporting, outcomes and tracking. The quarterly case supervision is detailed and identifies the status of progress with service goals for the family as well as any action plan needed to be taken by staff. The Program Director and the Director of Kauai Programs are also available twenty four hours a day seven days a week for case consultation or for crisis situations. | Program Director I<br>Backup: Director of Kauai<br>Programs  | Supervision is conducted at a minimum twice a month |
|   | Care Record Reviews are conducted quarterly as part of the PQI process with other CFS programs which assists with the identification of areas of success and areas in need of improvement. Through this process as well as through staff meetings and individual supervision, goals are established with action plans for areas of improvement and are reported to upper management quarterly. These action plans are reviewed during the following quarter and reported on as   | All CFS program staff<br>review peer records.<br>Reviewed by<br>Program Director I or II.<br>Backup: Director of Kauai<br>Programs | Peer case record reviews and PQI are done quarterly |
|   | well.  The Family Center staff will work with the funding Department and will be prepared for annual contract monitoring that may include site visits with comprehensive evaluation of several areas of performance. Staff will ensure   | Program Director I or<br>assigned staff<br>Backup: Director of Kauai<br>Programs   | May be done annually                                |

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| SERVICE ACTIVITIES & PROGRAM REQUIREMENTS   | SPECIFIC TASKS  | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)  | TIME LINE /<br>SCHEDULE |
|   | that the program services conform to standard contractual requirements, accounting practices, and case record keeping.  |  |                         |
|   | The Family Center staff will also participate in quality assurance/improvement projects as requested by the funding Department for research and evaluation purposes. Other quality assurance/improvement activities include data collection and other future requests related to current Department initiatives, activities and programs.   |  |                         |
| Outcome and Performance<br>Measurements   | <ul> <li>Program Outcomes are used for program evaluation. These include:</li> <li>% of families completing service plan; 90%</li> <li>% of families completing service plan who have established and implemented a child safety plan at case closure; 95%</li> <li>% of families completing service plan who have no new report of child abuse or neglect at 3 month follow-up; 90%</li> <li>% of families completing service plan that have no new report of child abuse or neglect at 6 month follow-up 95%</li> </ul>     | The Center Manager is responsible for the data collection and tracking Backup: Program Director I                                | Ongoing                 |
|   | Funding Departments reporting requirements: Quarterly reports are sent to the POS monitor on the progress of the families, program statistics, and areas of concern or highlights in a formal report. In addition, narratives and individual success stories are shared in these reports. Some of this information is also shared at the CFS PQI meeting and with the Family Center Advisory Boards. Precautions are taken to ensure information that can identify a client is not disclosed so that HIPAA laws are followed. | The Program Director I is responsible for the Quarterly Reports and analysis of program data. Backup: Director of Kauai Programs | Quarterly               |
| 4. Grievance procedures & dispute resolution for both clients & Department staff when disagreements arise about actions or decisions of | At time of intake all families are informed of their client rights and responsibilities as well as the client grievance procedure. Clients sign that they have received the procedures and are given a copy to take with them.  | Specialist II, Clinical<br>Specialist<br>Backup: Center Manager,<br>Program Director I or II                                     | At Intake               |

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| SERVICE ACTIVITIES & SPECIFIC TASKS PROGRAM REQUIREMENTS |  | TITLE OF<br>RESPONSIBLE STAFF<br>(& BACKUP)  | TIME LINE /<br>SCHEDULE  |
| the provider.  |  |  |                          |
|  | If there is a disagreement between the funding Department      | Program Director I Backup: Director of Kauai | First meeting within one |
|  | and the Family Center staff, CFS will set up an informal       |  | week of disagreement     |
|  | meeting with the Department staff and the Family Center        | Programs                                     |                          |
|  | staff to see if the issues can be clarified and an agreement   |  |                          |
|  | reached. If this is not successful, the disagreement will be   |  |                          |
|  | taken up with the Supervisors of both programs or if           | Į  |                          |
|  | necessary the Director of Kauai Programs or State level staff. |  |                          |
|  | CFS recognizes that if the disagreement cannot be settled, the |  |                          |
|  | Department will prevail.                                       |  |                          |

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

The Family Centers will operate from July 1, 2013 to June 30, 2014. Because the Centers continue to operate, the families and community partners are still connected to the centers. Consequently, direct services can begin immediately with no start up time required. The specific timelines for service activities are outlined in the work plan in section 1 above.

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

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

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

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

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

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

# The Family Center Program - Nana's House and Hale Ho'omalu

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

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

All CFS Kauai programs participate in peer case record reviews on a quarterly basis as explained in the previous section. The staff members who review the Family Center cases note any discrepancies from CFS and contract requirements and return them to the Family Center Program Directors. The Program Director oversee the corrections and note whether or not the corrections indicate a program wide problem that needs to be addressed. The case record reviews are reviewed by the Director of Kauai Programs to evaluate whether or not there are office wide concerns that need to be addressed with the Program Directors or require additional staff training. All case record reviews are then sent to the Director of Quality Assurance and Training for further review and are

included in the aggregate data for the PQI committee. The Clinical Coordinator also reviews random program client files for compliance as needed. Staff develop actions plans to address areas of improvement that are needed and timelines to review for completion.

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

The following chart outlines the program specific tasks and timelines.

| PQI Event                          | Description  | Responsible Staff                                   | Frequency   |
|------------------------------------|--|---|---|
| Quarterly Managers<br>Report (QMR) | Identifies quality indicators  | Program Director I                                  | Quarterly   |
| Case Record Review (CRR)           | Peer review of client case records                                       | Program Director I                                  | Quarterly   |
| Pre- and Post-Tests                | Confirms client service outcomes   | Center Managers                                     | With each parenting class   |
| Client satisfaction surveys        | Indicates quality of service experience                                  | Center<br>Managers/Program<br>Director I            | At the end of classes, within first quarter of counseling or case management services and at case closure |
| Referral Satisfaction<br>Surveys   | Indicates quality of service from referrals source perspective           | Program Director I                                  | Twice a year  |
| Staff Supervision                  | Review of service and client outcomes                                    | Program Director I                                  | Twice a month   |
| Program PQI<br>Meetings            | Review of service<br>numbers, population<br>data and program<br>outcomes | Program Director I                                  | Quarterly   |
| Quarterly Report<br>Review         | Review of program data and outcomes                                      | Program Director I<br>Director of Kauai<br>Programs | Quarterly   |

The success of the Family Center program is determined by effectively utilizing the program information gathered from all of the tools and review processes. Data must be examined from all levels of the service: individual feedback from the client, outcome data received through pre- and post-tests, individual accomplishments on the service plan goals; client satisfaction surveys; monthly and quarterly aggregate client outcome data; and, referral satisfaction surveys. This information is then reviewed, analyzed and discussed with Family Center staff, Center Managers, Program Director I, Director of Kauai Programs, and the CFS PQI and Management Team to support the positive results,

define any barriers affecting the program and take corrective actions as needed. The Quarterly Reports are also shared with our Family Center Advisory Boards. This ongoing process has been integral in keeping the Family Center services at both Nana's House and Hale Ho'omalu effectively meeting client and community needs while fulfilling contact requirements and outcome measures for the past 16 years.

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

# Performance Outcomes/Output Measures

# People to be Served

- 1) 120 Adults will receive direct services.
- 2) 80 Families will receive direct services.
- 3) 100 Children will receive direct services.
- 4) 400 family members will receive indirect services (food pantry, clothing closet, etc.)

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

#### Service Activities

- 1) 120 individuals will receive outreach services and case management (e.g. information and referral, home visits, transportation, parenting education, budgeting or nutrition classes)
- 2) 45 adults and children will receive counseling and support services.
- 3) 25 individuals will complete parenting classes.
- 4) 20 adults will receive child care while participating in program services.

Tracking ongoing services is an integral part of the quality assurance system for the Family Centers. Accurate tracking acts as an ongoing needs assessment of the clients being served. For example, by tracking the number of families being referred to housing

support services, the Family Centers become aware if there is an increase in clients in need of housing. Training for staff and supports to clients can be modified to ensure the most up-to-date information is available. In order to track accurately, all service data is recorded over time for each client utilizing a client spreadsheet at each Family Center. A quarterly worksheet is also utilized for tracking purposes. The tracking data is reviewed during supervision and worksheets are reviewed quarterly by the Program Director I and consolidated for inclusion in the quarterly report. The quarterly report is reviewed by the Director of Kauai Programs and discussed with the Program Director I so that program corrections can be made if indicated. All service activity information will be reported quarterly.

#### Outcomes

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

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

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

#### III.FINANCIAL

### Budget

- 1. See attached budget forms regarding the detailed costs of the Family Centers.
- 2. Anticipated quarterly funding requests for the fiscal year 2014.

| Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4 | Total Grant |
|-----------|-----------|-----------|-----------|-------------|
| \$75,000  | \$75,000  | \$75,000  | \$75,000  | \$300,000   |

3. The applicant shall provide a listing of all other sources of funding that they are trying to obtain for fiscal year 2014.

CFS was able to receive a legislative grants-in-aide to keep the Family Center doors open through June 2013. This has been supplemented by community foundation funding in December 2012 from the G.N. Wilcox Foundation (\$10,000) to support the Family Centers' food pantry service. CFS also received \$50,000 from Hau'oli Mau Loa Foundation to support Family Center operations to economically disadvantaged families. During the 2013-14 fiscal year, CFS is applying to the Office of Community Services to support Family Centers work with immigrants, Department of Human Services to fund SNAP outreach through the Family Centers and will apply to the G.N. Wilcox Foundation for \$10,000. CFS is working with Blueprint for Change to expand Neighborhood Place services to Kauai. If services are to be expanded to Kauai, CFS will apply to Blueprint for Change for funding to support Neighborhood Place services at Nana's House and Hale Ho'omalu. The CFS Board of Directors, the Kauai CFS Guild and the Family Center Advisory Boards are also working to increase donations for the Family Centers from community members and businesses.

4. State and Federal tax credits.

Not applicable.

#### IV. EXPERIENCE AND CAPABILITY

### A. Necessary Skills and Experience

CFS has over 100 years of experience in providing quality services to the people of Hawaii. CFS currently provides services at 44 locations statewide, operating 38 programs in three major areas including: early childhood and children's services, behavioral health services, and adult and family services. The spectrum of CFS programs builds on the strengths of individuals and families to address the many human challenges. The organization's comprehensive array of services has allowed CFS to develop many areas of expertise. Cross-training and consultation strengthens all programs.

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

CFS has been providing family support services on Kauai since 1982 and Family Center services on Kauai since Nana's House opened in 1996. Over the past 16 years CFS staff have become highly accomplished in the organizational and clinical skills necessary to manage a successful community-based Family Center. Our staff have demonstrated skills in creating and maintaining community partnerships, building strong community relationships, and successfully engaging and working with families at-risk of child abuse. The staff at the Family Centers have worked at either Nana's House or Hale Ho'omalu for an average of 10 years with a range between 2 and 16 years. As a result the staff are highly trained and have the skills, abilities and knowledge necessary to help families build a safe, healthy and stable home environment for their children.

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

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

Since CFS has been providing services to families and children on Kauai for over 30 years and 16 years in the Family Center Program, we have developed an extensive network of community resources. The Family Centers are available to all area families for information and referral services so a strong network of resources and agency relationships is essential. Because the staff at the Family Centers work each day listening to families issues and linking them to services, the resource listing at the centers is always up-to-date and staff are very experienced in connecting families directly to needed services. Staff are also knowledgeable about the eligibility requirements and application processes for many services so that families are helped to access the most appropriate services for their situation.

Finally, CFS management, the Family Center staff, and their Advisory Boards have demonstrated their skill in creating an ongoing self-monitoring system to continually assess if the program services are meeting the needs of the community families. During the past 16 years, there have been major shifts in the economic and employment opportunities on Kauai. Nana's House experienced its first major economic shift with the closing of the last sugar mill on the Westside of the island and the end of the sugar based economy. Several years later, there were a few years of low unemployment followed by the most recent painful recession and a dramatic rise in unemployment. As these shifts occurred on the island, the Family Centers have had to reassess the services that they provide and shift priorities and staff to address the current community and family needs. Due to the strong community knowledge of our staff members, they have the ability to be flexible and adaptable to the various changing needs in the different communities we serve. For example, during this most recent economic decline, the Family Centers saw a substantial increase in the number of people coming in for food and other basic needs. As a result, CFS sought additional funding for our food pantry and created a budgeting program at both centers in order to meet the increased need for food and to help families manage their resources more effectively. In addition, the center staff partnered with the DOH Nutrition project and provided cooking and nutrition classes for the parents who come in for food. These classes taught inexpensive ways to eat healthy foods using many of the items they could obtain in the food pantries at Nana's House and Hale Ho'omalu.

#### 16 Years of Experience in Providing Family Centers

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

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

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

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

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

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

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

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

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

As an example, over the last few years the Family Centers have seen a tremendous increase in the number of families that have been coming in for food. Working with the Family Center Advisory Boards and calling on local partners, Nana's House and Hale Ho'omalu have increased the amount of food donations to the centers and the G. N. Wilcox Foundation doubled their annual grant to CFS to support the food pantry not only at Nana's House but also at Hale Ho'omalu. The local businesses have also pitched in to support this need.

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

CFS's extensive experience working with families at-risk of child abuse over the past 16 years has helped to develop substantial skills and abilities to provide Family Center services. Following is a comprehensive list of verifiable experience with projects and contracts pertinent to the proposed services for the most recent three years. It demonstrates CFS's breadth, experience, and institutional knowledge of issues impacting at-risk families in a community-based setting. Those services provided in Kauai are highlighted:

| Title of Service/Brief Description<br>of Service   | Contracting Agency, Contact Person,<br>Phone Number, Email Address, and<br>Mailing Address  | Contract/Project<br>Identification Number           | Service Period                           | Performance Outcomes  |
|--|---|---|--|---|
| Specialized Substance Abuse Treatment Services for Pregnant & Parenting Women & Children E Ala Hou provides specialized substance abuse treatment services for pregnant and parenting women and children.  | Department of Health Alcohol and Drug Abuse Division Terri Nakano (808) 692-7511 terri.nakano@doh.hawaii.gov Kakuhihewa Building 601 Kamokila Blvd., Room 360 Kapolei, HI 96707 | ASO Log No. 10-086                                  | 7/1/2009-6/30/2013                       | <ul> <li>58% of women enrolled have completed treatment. (Target: 75%)</li> <li>100% of pregnant women receiving services have continuous prenatal services (at least 6). (Target: 50%)</li> <li>100% of women enrolled have received case management services and are referred or linked to appropriate services. (Target: 100%)</li> </ul>  |
| Baby S.A.F.E. – A Specialized Substance Abuse Outreach and Early Intervention Service for Pregnant Women on Kauai Provides substance using pregnant and parenting women with outreach, support case management, referrals to community resources, and drug and alcohol screening.                          | Department of Health Alcohol and Drug Abuse Division Terri Nakano (808) 692-7511 terri.nakano@doh.hawaii.gov Kakuhihewa Building 601 Kamokila Blvd., Room 360 Kapolei, HI 96707 | ASO Log No. 04-038                                  | 7/1/2003-6/30/2009                       | <ul> <li>74% of clients reduced their use of alcohol or other substances or remained abstinent during their pregnancy and after. (Target: 80%)</li> <li>36% of clients participated in substance abuse treatment. (Target: 80%)</li> <li>57% of clients participated in early prenatal care. (Target: 80%)</li> <li>86% of newborns were born into a substance free environment. (Target: 80%)</li> </ul> |
| Independent Living Services for Youth Program Provides individual and group counseling to youth, ages 12-21 who are living in out-of-home-care on Kauai. The program provides learning opportunities to develop the skills needed to manage the transition to a productive and self-sufficient adult life. | Department of Human Services Clayton Higa (808) 586-5697 chiga@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813   | DHS-04-POS-1843                                     | 7/1/2003-6/30/2013                       | <ul> <li>94% secured an appropriate living arrangement in accordance with their ILP plan (Target: 80%)</li> <li>100% of youth successfully completed high school with a diploma or equivalent (Target: 85%)</li> <li>97% of youth have demonstrated increased independent living. (Target: 75%)</li> </ul>  |
| Permanency Support Services Provides adoptive, legal guardian and permanent custody families with supportive, therapeutic, prevention, and intervention service, which includes home based intervention, parent education, skill based workshops, counseling, therapy and advocacy.                        | Department of Human Services<br>Clayton Higa<br>(808) 586-5697<br>chiga@dhs.hawaii.gov<br>810 Richards Street, Suite 400<br>Honolulu, HI 96813                                  | Oahu<br>DHS-04-POS-1884<br>Kauai<br>DHS-04-POS-1884 | 7/1/2003-6/30/2011<br>7/1/2003-6/30/2009 | <ul> <li>100% of clients have learned new parenting strategies such as becoming more skilled at setting limits with their child(ren). (Target: 75%)</li> <li>100% of clients are more skilled at setting limits with their child(ren). (Target 75%)</li> <li>100% of clients are more satisfied with their child-parent interactions. (Target: 75%)</li> </ul>  |

| Title of Service/Brief Description of Service | Contracting Agency, Contact Person,<br>Phone Number, Email Address, and<br>Mailing Address | Contract/Project<br>Identification Number | Service Period     | Performance Outcomes   |
|---|--|---|--------------------|--|
| Comprehensive Counseling and                  | Department of Human Services   | Maui                                      |                    | 85% of families have shown improvement in their  |
| Support Services and Voluntary                | Rachel Thorburn  | DHS-04-POS-1855                           | 7/1/2003-6/30/2013 | ability to problem solve including meeting the needs   |
| Case Management                               | (808) 586-5245   |   |                    | of their child(ren). (Target: 80%)   |
| Provides a broad array of services to         | rthorburn@dhs.hawaii.gov   | Kauai                                     |                    | 90% of families with children under age 5 have not   |
| meet the needs of children and their          | 810 Richards Street, Suite 400   | DHS-04-POS-1855                           | 7/1/2009-6/30/2013 | generated any substantiated report of  |
| families including: counseling,               | Honolulu, HI 96813   |   |                    | harm/threatened harm while participating in the  |
| outreach services, parenting                  |  |   |                    | program. (Target: 90%)   |
| education classes, supervised                 |  |   |                    | 92% of families have shown improvement in their  |
| visitation and voluntary case                 |  |   |                    | ability to protect their children and not generate   |
| management for families referred by           |  |   |                    | reports of harm/threatened harm while participating  |
| the Department of Human Services.             |  |   |                    | in the program. (Target 80%)   |
| Comprehensive Counseling and                  | Catholic Charities   | Oahu                                      |                    | Same as above.   |
| Support Services                              | Darlene Beatty   | DHS-04-POS-1889                           | 7/1/2003-6/30/2013 |  |
| Provides a broad array of services to         | (808) 524-4673   |   |                    |  |
| meet the needs of children and their          | beattyd@catholiccharitieshawaii.org  |   |                    |  |
| families including: counseling,               | Clarence T.C. Ching Campus   |   |                    |  |
| outreach services, parenting                  | 1822 Keeaumoku Street  |   |                    |  |
| education classes, and supervised             | Honolulu, HI 96822   |   |                    |  |
| visitation for families referred by the       |  |   |                    |  |
| Department of Human Services.                 |  |   |                    |  |
| Family Strengthening Services                 | Department of Human Services   | Hilo                                      |                    | 98% of families have not generated any   |
| Provides short term outreach                  | Rachel Thorburn  | DHS-04-POS-1845                           | 7/1/2003-6/30/2013 | substantiated report of harm/threatened harm while   |
| services to enhance coping,                   | (808) 586-5245   |   |                    | participating in the program. (Target: 90%)  |
| parenting skills, and prevent or              | rthorburn@dhs.hawaii.gov   | Kauai                                     |                    | 97% of families have shown improvement in their  |
| reduce family stress to families that         | 810 Richards Street, Suite 400   | DHS-04-POS-1846                           | 7/1/2003-6/30/2013 | ability to maintain the safety of the home. (Target:   |
| are referred by the Department of             | Honolulu, HI 96813   |   |                    | 80%)   |
| Human Services, Child Welfare                 |  | Oahu                                      |                    |  |
| Services (CWS) who are not active             |  | DHS-04-POS-1848                           | 7/1/2003-6/30/2013 |  |
| with CWS.                                     |  |   |                    |  |
| Healthy Start Home Visiting                   | Department of Health   | Waianae                                   | 7/1/1000 0/15/2000 | 98% of all the target children of families engaged in  |
| Serves families with children                 | Maternal and Child Health Division   | DOH 94-02                                 | 7/1/1988-8/15/2009 | the Healthy Start services achieved age-appropriate  |
| prenatal to five years of age, with           | Cindy Hirai  | Control                                   |                    | developmental milestones or are in process of  |
| emphasis on children prenatal to              | (808) 733-9042   | Central                                   | 7/1/1989-8/15/2009 | referral for remedial service. (Target: 90%)   |
| three years of age, who have been             | Cindy.Hirai@fhsd.health.state.hi.us  | DOH 96-085                                | //1/1989-8/15/2009 | 99% of participating families maintained a safe    1   |
| assessed at-risk for child abuse and          | 741-A Sunset Avenue, Room 204  | Central and Waianae                       |                    | living environment for their child/children. (Target:  |
| neglect.                                      | Honolulu, HI 96816   | ASO Log # 02-071                          | 7/1/2003-8/15/2009 | 95%)   |
|   |  | A3O Lug # 02-0/1                          | 7/1/2003-6/13/2009 | The second section of the second section is a second secon |
|   |  | Leeward                                   |                    |  |
|   |  | Lecward                                   |                    |  |

| Title of Service/Brief Description<br>of Service  | Contracting Agency, Contact Person,<br>Phone Number, Email Address, and<br>Mailing Address   | Contract/Project<br>Identification Number           | Service Period                            | Performance Outcomes   |
|---|--|---|---|--|
|   |  | Kauai – including EID<br>ASO Log #06-118            | 7/1/1989-8/15/2009<br>1/1/2012 – 6/30/13  |  |
| Enhanced Healthy Start Serves families with children prenatal to five years of age, with emphasis on children prenatal to three years of age, who have been referred to Child Welfare Services.   | Department of Human Services Rex Shilo (808) 587-3168 rshilo@dhs.hawaii.gov 810 Richards Street, Suite 400 Honolulu, HI 96813  | Oahu<br>DHS-06-POS-3129<br>Kauai<br>DHS-06-POS-3130 | 7/1/2005-6/30/2013<br>7/1/2005-6/30/2013  | <ul> <li>100% of all the target children of families engaged in Healthy Start services achieved age-appropriate developmental milestones or are in process of referral for remedial service. (Target: 90%)</li> <li>98% of participant families have no new confirmed report of child abuse. (Target: 95%)</li> </ul>  |
| Head Start Provides comprehensive services to low-income and age eligible children including pre-school education, health program, empowering families to be self-sufficient, and programming for children with severe special needs.       | U.S. Department of Health and Human<br>Services<br>Laura Candeloro<br>(415) 437-8653<br>Laura.candeloro@acf.hhs.gov<br>90 7 <sup>th</sup> Street, 9 <sup>th</sup> Floor<br>San Francisco, CA 94103 | 09CH9054  Head Start Expansion                      | 7/1/2000-6/30/2013<br>10/1/2010-9/30/2011 | <ul> <li>83% of parents met their goal to assist their children with school readiness, such as reading, naming colors, etc. (Target 80%)</li> <li>98% of families have a designated medical home. (Target: 95%)</li> <li>100% of special needs eligible children referred to the program were dually enrolled in both Head Start and DOE. (Target 90%)</li> </ul>  |
| Family Center Services Title IVB/2 Nana's House and Hale Ho'omalu offer family support centers with the primary goal of increasing availability and accessibility of services to reduce family violence,                                    | Department of Human Services<br>Clayton Higa<br>(808) 586-5697<br>chiga@dhs.hawaii.gov<br>810 Richards Street, Suite 400<br>Honolulu, HI 96813   | DHS-98-DDS-6326<br>Nana's House<br>Hale Hoʻomalu    | 7/1/1996-6/30/2011<br>7/1/2002-6/30/2011  | <ul> <li>100% of client families have identified other resources outside the community center. (Target: 75%)</li> <li>100% of client families have reduced the risk for child abuse and neglect. (Target: 75%)</li> </ul>  |
| and child abuse and neglect.  Parenting Education and Support Through the Parent Line and Home Reach Provides phone support on parenting education, referrals and support services and a home visiting model to families of young children. | Department of Health Maternal & Child Health Branch Lyn Niitani (808) 733-4054 Lyn Niitani@fhsd.health.state.hi.us 741-A Sunset Avenue, Room 204 Honolulu, HI 96816                                | Statewide<br>ASO Log No.10-128                      | 1/1/2010-6/30/2013                        | 100% of parents calling the Parent Line received information on child development relative to their age of their child. (Target: 80%)     100% of families served through Home Reach promoted nurturing and facilitated emotional attachments with their children. (Target: 90%)     100% of parent educational resources were updated and distributed throughout that included concrete information regarding parenting. (Target: 100%) |
| Domestic Abuse Shelters and<br>Support Services<br>Offers four domestic violence<br>shelters and 24-hour crisis hotlines<br>for victims of domestic violence and  | Department of Human Services<br>Clayton Higa<br>(808) 586-5697<br>chiga@dhs.hawaii.gov<br>810 Richards Street, Suite 400   | Oahu<br>DHS-11-POS-415<br>DHS-04-POS-1850<br>Hilo   | 10/1/2010-6/30/2012<br>7/1/2003-9/30/2010 | 81% of clients have an increased knowledge of community resources. (Target: 75%)     69% of single adults and families have moved from the shelter to a non-abusive home environment   |

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| Title of Service/Brief Description<br>of Service | Contracting Agency, Contact Person,<br>Phone Number, Email Address, and<br>Mailing Address | Contract/Project<br>Identification Number | Service Period      | Performance Outcomes   |
|--|--|---|---------------------|--|
| their children in Leeward Oahu,                  | Honolulu, HI 96813   | DHS-11-POS-416                            | 10/1/2010-6/30/2012 | (Target 60%)   |
| Honolulu, West Hawaii and East                   |  | DHS-04-POS-1900                           | 7/1/2003-9/30/2010  | 96% of clients in shelter have completed a Safety  |
| Hawaii.  |  | Kona                                      |                     | Plan for themselves and their children. (Target:   |
|  |  | DHS-11-POS-417                            | 10/1/2010-6/30/2012 | 90%)<br>Hilo   |
|  |  | DHS-04-POS-1844                           | 7/1/2003-9/30/2010  | 98% of clients have an increased knowledge of  |
|  |  |   | 777,2003 373 072010 | community resources. (Target: 75%)   |
|  |  |   |                     | 71% of single adults and families have moved from  |
|  |  |   |                     | the shelter to a non-abusive home environment (Target 60%)   |
| 1  |  |   |                     | 81% of clients in shelter have completed a Safety  |
|  |  |   |                     | Plan for themselves and their children. (Target: 90%)  |
|  |  |   |                     | Kona   |
|  |  |   |                     | 99% of clients have an increased knowledge of<br>community resources. (Target: 75%)                                |
|  |  |   |                     | 43% of single adults and families have moved from<br>the shelter to a non-abusive home environment<br>(Target 60%) |
|  |  |   |                     | 98% of clients in shelter have completed a Safety  |
|  |  |   |                     | Plan for themselves and their children. (Target: 90%)  |

#### **B.** Facilities

#### Child & Family Service is Accessible Statewide

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

<u>Headquarters:</u> The corporate office is located at 91-1841 Fort Weaver Road, Ewa Beach, Hawaii. CFS maintains 44 sites throughout the State, on the islands of Hawaii, Kauai, Maui, Molokai, and Oahu.

<u>ADA Accessibility:</u> 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 44 satellite offices on five islands using frame relay technology. Home based and mobile staff are connected either through remote access (RAS) or web-based access (OWA). Staff members are issued desktop or laptop computers equipped with current, up to date technology. The application systems available to staff include a full suite of productivity tools, enterprise email, a windows-based accounting system, an applicant tracking system, a statewide correspondence tracking and records management system, a human resources/personnel system, a time and attendance system, and a client tracking system.

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

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

#### The Family Center Program Facilities - Nana's House and Hale Ho'omalu

Nana's House is located at 9875 Waimea Road in Waimea and serves families on the West Side of Kauai from Koloa to Mana. Hale Ho'omalu is located at 4-1112 Kuhio Highway in the Kapa'a area and serves families from Hanamaulu through Anahola.

Home visits and transportation are offered at both sites to make it possible for families to easily access services. There is ample parking at Nana's House and Hale Ho'omalu and both are located close to a bus stop.

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

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

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

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

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

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

#### 1. Proposed Staffing

The Family Centers are sufficiently staffed to maintain the viability of the proposed program services as well as the administrative infrastructure needed to support timely delivery of services. The Program is fully staffed and consists of a Specialist II, Clinical Specialist and Center Manager at each of the Family Centers. They are supported by a Program Secretary, Program Director I, Clinical Coordinator and the Director of Kauai Programs. While some of these positions are not full-time to this proposed contract, they have sufficient FTE dedicated to the Family Centers to fulfill

the contract requirements and meet program outcomes. The Family Centers anticipates receiving approximately 7-10 referrals a month for case management, information and referral, and counseling services. A much larger number of individual and families come into the centers each month (approximately 200+) for food and clothing. The caseloads will vary from 6-10 families in case management or parenting classes per site and 3-5 families receiving counseling services at each center. The case load varies at any given time due to the specific needs of the families receiving services and the length of time that they have been in the program. In the event of illness, vacation, vacancies, or other situations the Program Director I and/or Director of Kauai Programs will provide coverage. The Program Director I and Director of Kauai Programs have the qualifications, training and experience to provide all services available at the Family Centers.

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

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

The lines of supervisory authority and program responsibility are clearly defined. The Director of Kauai Programs is supervised by the CFS Vice President of Programs to assure quality and Best Practices across all child abuse/neglect and family support programs. The Director of Kauai Programs has direct supervision over the Program Director I and the Program Secretary. The Family Center programs share a single Program Director which encourages sharing of resources and experience between the two centers. The Program Director oversees the work of the Center Manager, Specialist II and Clinical Specialist at each site.

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

| Job Title / FTE                         | Client/<br>Staff<br>Ratio                      | Caseload Capacity  | Justification   |
|---|--|--|---|
| Director of Kauai<br>Programs  0.20 FTE | N/A  | Provides coverage in event of staff illness, vacation or vacancies.  | Provides oversight and leadership for all programs on the Island of Kauai. Supervises the Program Director at least monthly with frequent check-ins. Develops, implements, and monitors Kauai program goals, objectives, and outcomes including monitoring the quality and quantity of services and compliance with contract, accreditation, and regulatory requirements. Identifies problem areas and develops solutions with other management staff. Represents CFS in the Kauai community. Provides community leadership through networking with community leaders, funders, |
|   |  |  | and advocacy groups. Provides 24 hour clinical and administrative support to Program staff.   |
| Clinical Coordinator  0.04 FTE          | N/A  | N/A  | Responsible for assisting in the planning and implementation of the organization's accreditation activities. Assists the program staff in quality improvement endeavors and implementing program contract requirements. Reviews program charts/manuals/documents to evaluate adherence to PQI, internal and external requirements, safety, and Best Practices.  |
| Program Director I .075 FTE             | N/A  | Provides backup or coverage for all Family Center direct service workers as needed. Handles client crisis and Center support on busy days. | Direct management of the Family<br>Centers. Provides support and<br>backup for all direct services.<br>Provides clinical and program<br>supervision for all staff at each<br>Family Center.   |
| Center Manager  Nana's House 0.75 FTE   | Varies<br>depending<br>on service<br>provided. | Up to 10 clients a day per center.   | Direct client contact for information and referral, food distribution and clothing closet. Greets all visitors to the Family Centers, screens for needs,  |

| Job Title / FTE                      | Client/<br>Staff<br>Ratio                          | Caseload Capacity   | Justification  |
|--------------------------------------|--|---|--|
| Hale Hoʻomalu<br>0.75 FTE            |  |   | provides information, community referrals or transfers to Specialist II for more formal assessment.  |
| Specialist II  Nana's House 0.50 FTE | 8: 1   | Case load varies<br>between 8 to 12<br>according to the<br>complexity of the<br>families' needs.                | Direct client case management services. Assessment and individualized family plan determines case load size.   |
| Hale Hoʻomalu<br>0.50 FTE            |  |   | Conducts home or office visits, and provides transportation when needed. Conducts parenting groups.  |
| Clinical Specialist 0.50 FTE         | 4: 1   | Case load can vary based on the number of sessions per week. Family/individual session frequency based on need. | Provides individual and family counseling at Nana's House and Hale Ho'omalu. Coordinates with other service providers.                                 |
| Interpreter/Translator 0.01 FTE      | Varies<br>depending<br>upon<br>services<br>needed. | N/A   | Works in collaboration with the Specialist to provide interpretation services in Marshallese as needed. Provides cultural consultation.                |
| Program Secretary 0.20 FTE           | N/A  | N/A   | Provides clerical support for all aspects of the Family Centers (case files, data collection, program materials, brochures, reports and letters, etc.) |

#### 2. Staff Qualifications

The Family Centers have staff with appropriate qualifications and necessary training to provide the proposed services and activities and who demonstrate knowledge, capacity, skills and experience in working with the families at-risk of child abuse and neglect or in crisis. The position hours and responsibilities are clearly defined and tracked. Staff knowledge and experience at the Family Center is increased by staff from other programs co-located at the Family Centers. This allows CFS to deliver the maximum amount and highest quality of services at the level of funding provided.

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

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

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

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

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

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

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

| Job Title Incumbent<br>Name  | Backup Staff<br>(for Direct Service<br>Staff)   | Minimum Qualifications (Education and Experience)  | Incumbent Qualifications/ Meets Qualifications/ Exceeds Qualifications/ Internal Waiver/ Waiver from Funder  |
|--|---|--|--|
| Clinical Coordinator<br>Susan Richard  | N/A   | Master's Degree in Human Services from an accredited school. One year supervisory experience required. Knowledge of and experience with quality improvement activities required.             | B.A. in Public Administration. Over four years experience working in the Quality Assurance and Training Department. Five years supervisory experience. Internal waiver.  |
| Director of Kauai<br>Programs<br>Lucille Calderon                            | Program Directors   | Master's Degree in Human<br>Services and five years post<br>Master's supervisory and<br>administration experience in<br>community or social services<br>settings.                            | Master's Degree in Counseling Psychology. Over 25 years supervisory experience, and over 30 years of direct service and administrative service. Exceeds qualifications.  |
| Program Director I<br>Cara Sadira  | Center Manager,<br>Specialist II and<br>Clinical Specialist<br>at Nana's House<br>and Hale Ho'omalu | Master's Degree in the Human<br>Services area. Over four years,<br>up to and including six years.<br>Three years experience,<br>including two years of<br>administration and<br>supervision. | Master's Degree in Nonprofit Management. Over six years of administrative and clinical experience. Over eight years administrative and supervisory experience. Exceeds qualifications.                                   |
| Center Manager  Nana's House Anna "Momi"  Machado  Hale Ho'omalu Dory Farias | Program Director I  | Bachelor's Degree in Health, Human Services or related field preferred.  Five years directly related experience might be substituted for Bachelor's Degree.                                  | Momi Machado: High School Diploma. Over 12 years experience providing direct service to families and children. Over 10 years experience managing Nana's House. Meets qualifications.                                     |
|  |   |  | Dory Farias: High School Diploma. Over seven years experience providing direct service to families and children. Over three years experience managing Hale Ho'omalu. Meets qualifications.                               |
| Clinical Specialist Margaret Smith   | Program Director I  | Master's Degree in counseling, psychology, marriage and family therapy, or social work from an accredited school and over two years, up to and including four years experience.              | Master's Degree in Counseling. Licensed Marriage and Family Therapist. Substance Abuse Professional. Over 25 years experience as a licensed therapist working with adults, children and families Exceeds qualifications. |
| Specialist II  Nana's House Nancy Golden  Hale Ho'omalu                      | Center Managers   | Bachelor's Degree in Human<br>Services and four years<br>experience or more with<br>domestic violence, substance<br>abuse, and child abuse and<br>neglect.                                   | Nancy Golden: Bachelor's Degree in Early Childhood Education. Over 18 years experience in the field and child abuse and neglect. Exceeds qualifications.   |
| Aida Pascual   |   |  | Aida Pascual: Bachelor's Degree in Elementary Education. Over 25 years experience in the field of child abuse and neglect. <b>Exceeds</b> qualifications.  |

| Job Title Incumbent<br>Name             | Backup Staff<br>(for Direct Service<br>Staff) | Minimum Qualifications<br>(Education and Experience)   | Incumbent Qualifications/ Meets Qualifications/ Exceeds Qualifications/ Internal Waiver/ Waiver from Funder          |
|---|---|--|--|
| Interpreter/Translator<br>Momira Jetnil | N/A   | High School Diploma and proficiency in Micronesian and English languages.  | High School Diploma. Proficiency in both languages.  Meets qualifications.   |
| Program Secretary<br>Lehua Cristobal    | N/A   | High School Diploma and business training and over two years, up to and including four years of experience. Able to use computer with one to two years experience. | High School Diploma plus college courses in office administration. Over four years experience. Meets qualifications. |

#### **Background Checks**

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

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

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

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

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

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

No more than one moving violation in the past three years, and

No DUI convictions within the past three years.

#### 3. Supervision

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

The supervisory ratios do not exceed one direct service supervisor to seven full-time direct service staff. The supervisor determines how frequently supervision sessions need to occur based on accreditation and contract standards as well as a staff member's education and experience level. The immediate supervisor is responsible for ongoing supervision of staff.

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

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

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

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

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

The Director of Kauai Programs meets weekly with the Kauai supervisory team. This meeting includes the Program Director I, Center Managers and supervisory staff from all of the other CFS Kauai programs. These meetings encourage communication and sharing across program lines and provide an opportunity for the Director of Kauai Programs to discuss any management decisions, changes in program, PQI findings or other pertinent information directly with the supervisory staff. These meetings are brief but the supervisors are encouraged to add their ideas and concerns to the agenda. In addition to the weekly meetings, the Director of Kauai Programs meets with the Program Director I

individually at least once a month. In these more formal supervisory sessions, the staffs' progress on personal and professional goals are discussed and the program data from their programs is reviewed. These meetings also give the Program Director I the opportunity to discuss any program concerns (e.g. personnel, fiscal, community relations, and client incidents).

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

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

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

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

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

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

#### 4. Training - Enhancing Skills and Knowledge

CFS is committed to increasing staff knowledge and skill development through its training program. The organization has invested considerable resources in training and the development of training modules, as well as videoconferencing capacity. This enables CFS staff on all islands to receive standardized information.

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

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

the Field, and Community Based Practice – Psychosocial Approach. These trainings are available and accessible to all staff via the CFS computer network.

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

#### Orientation to the Program and the Organization

CFS provides orientation for both the program and the organization. The Family Center Program will provide orientation to the program within 30 days of an individual's employment. In addition, CFS requires all new hires to attend an organization wide orientation within 60 days of employment. The lists below highlight some of the topics covered in these orientations.

#### Program Specific Orientation – within 30 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
- Review of documentation requirements, including client-related forms, client files, service provision records, quarterly report data forms, and timelines for submission of reports
- Review of referral process and community resources
- Review of administrative policies and procedures, confidentiality and HIPAA
- Review of program specific policies and procedures, COA and contract requirements
- Review of assessing risk and safety of persons served and mandated reporting
- Techniques for handling emergencies
- Orientation to the establishment of rapport and responsive behaviors
- Orientation of the collaboration with other disciplines and community services in meeting the needs of the persons served
- Review of appropriate coordination with mental health, law enforcement, and other professionals
- Orientation of the basic health and medical needs of the service population
- Orientation on the needs of families in crisis, including needs of victims of violence, child abuse and neglect, and family members
- Orientation on the procedures for working with foreign language speakers and persons with communication impairments and the use of interpreters
- Orientation on public assistance programs
- Review of personal and client safety issues
- Review of supervision procedure and schedule, program and department staff meetings, and training plan
- Orientation on email, CFS network, computer network drives, timekeeping system, and databases

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#### 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.

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

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

concerns that can be corrected by changes in procedure or additional training are implemented.

Topics for ongoing training include but are not limited to:

| Training Focus                              | Trainings  |
|---|--|
| Program Philosophy                          | Protective factors for families  |
|   | Child abuse and neglect dynamics, prevention and   |
|   | intervention strategies  |
| Risk, Legal and Regulatory                  | Mandatory reporting  |
| Requirements                                | 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  |
|   | • CPI  |
| Assessment and Service                      | CFS Comprehensive Basic Assessment   |
| Planning                                    | Identifying family and individual strengths  |
| Service Delivery Basics                     | Documentation  |
|   | Client advocacy  |
|   | New referral resources in the community  |
|   | Case management/collaboration/ coordination  |
|   | Child development  |
|   | Basic health and medical needs of the service population   |
|   | to include special needs   |
|   | Service provision through home visiting and community-   |
|   | based settings   |
| Cir. TX 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Working with clients with communication barriers   |
| Clinical Knowledge and Skills               | Professionalism/boundaries   |
|   | Building therapeutic rapport   |
|   | Basic counseling skills  |
|   | Needs of individual and families in crisis; to include   |
|   | suicide precautions  |
|   | <ul><li>Substance use and abuse</li><li>Domestic violence</li></ul>  |
|   |  |
|   | Parent education     Child development   |
| Quality Assurance                           | Child development  |
| Quality Assurance                           | Program outcomes development and measurement  Internation conditions and manifesting of continuous its conditions and measurement. |
|   | • Integration, coordination and monitoring of service quality standards  |
| Supervisory                                 |  |
| Supervisory                                 | • Tracking and supervisory tools   |
|   | • Supervisory training; administration, human resources, supervision and fiscal  |
| Cultural Competency                         |  |
| Cultural Competency                         | • 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.

#### **B.** Organization Chart

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

The proposed service team for the two Family Centers consists of the Program Director I, Center Manager, Specialist II, Clinical Specialist, and Interpreter/Translator. These staff members implement or supervise the direct services provided at the Family Centers. The Clinical Specialist carries a counseling case load of 3-5 clients at each center. The Specialist IIs each carry a caseload of 8-12 families. The staff hours are supplemented by volunteers which allows for an increase in the number of people working at the centers. This allows for more flexibility in providing program services and availability of staff during regular work hours to welcome families. The Program Director I provides clinical supervision to each of the Family Centers. This improves the consistency and quality of services provided to the families.

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

The lines of supervision are delineated on the program organization chart. The Director of Kauai Programs provides backup supervision whenever the Program Director I is on leave or if the position becomes vacant.

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

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

Applicant: Child & Family Service (Family Centers)

#### VI. OTHER

#### A. Litigation

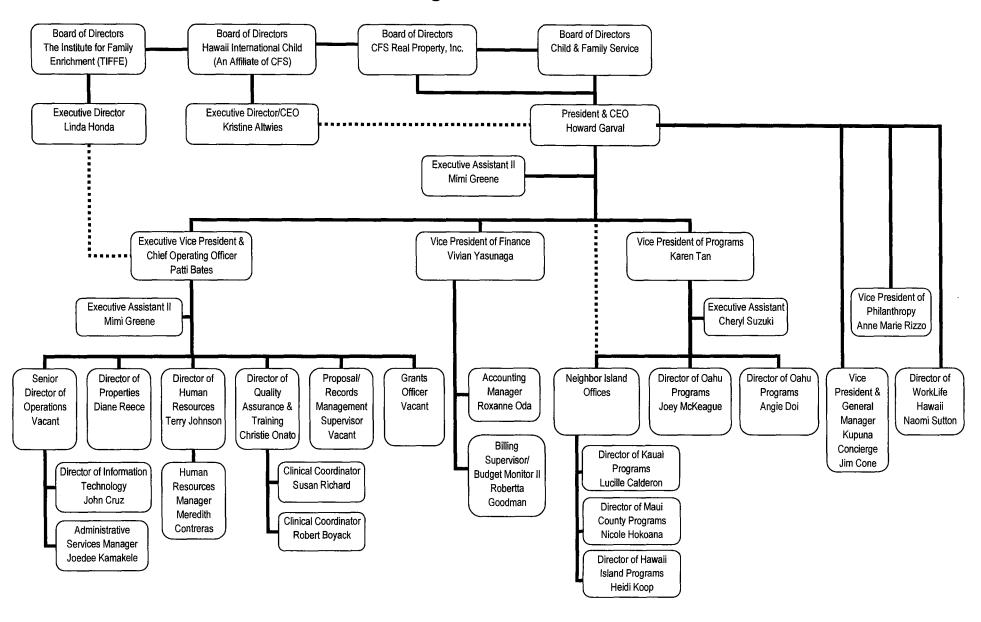
Child & Family Service is not involved in any pending or current litigation.

#### B. Licensure or Accreditation

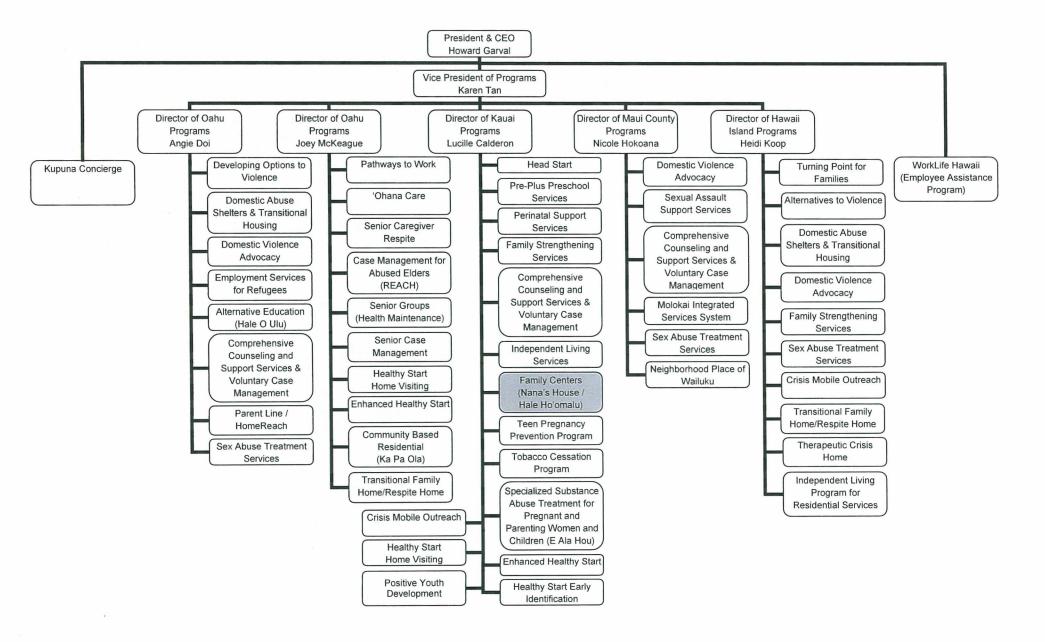
The Council on Accreditation (COA) has accredited CFS since 1980. As a member of COA, CFS maintains the highest standards in organization management and program delivery. CFS has also been a member of the Alliance for Children and Families since 1986. Because of its accreditation status and membership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

The Family Center services do not require licensing.

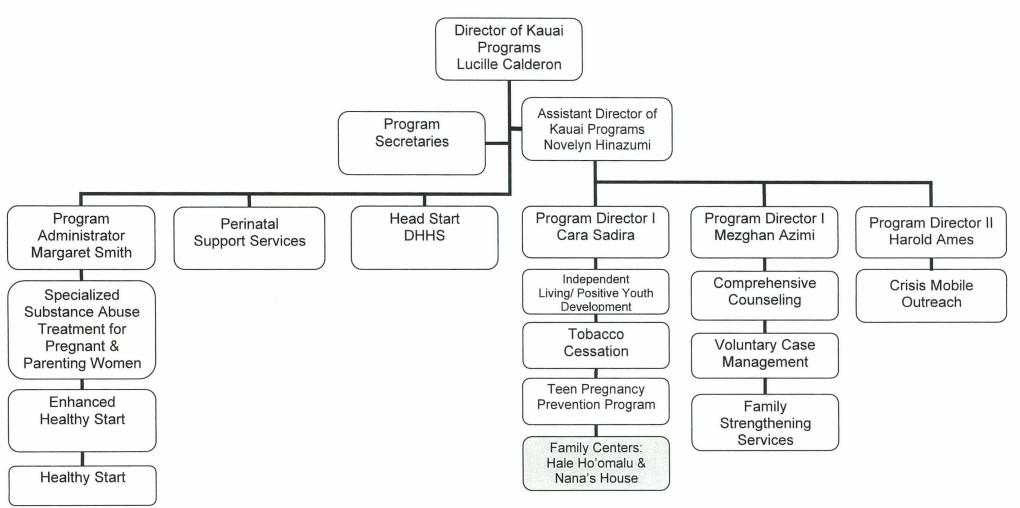
## Child & Family Service Organization Chart



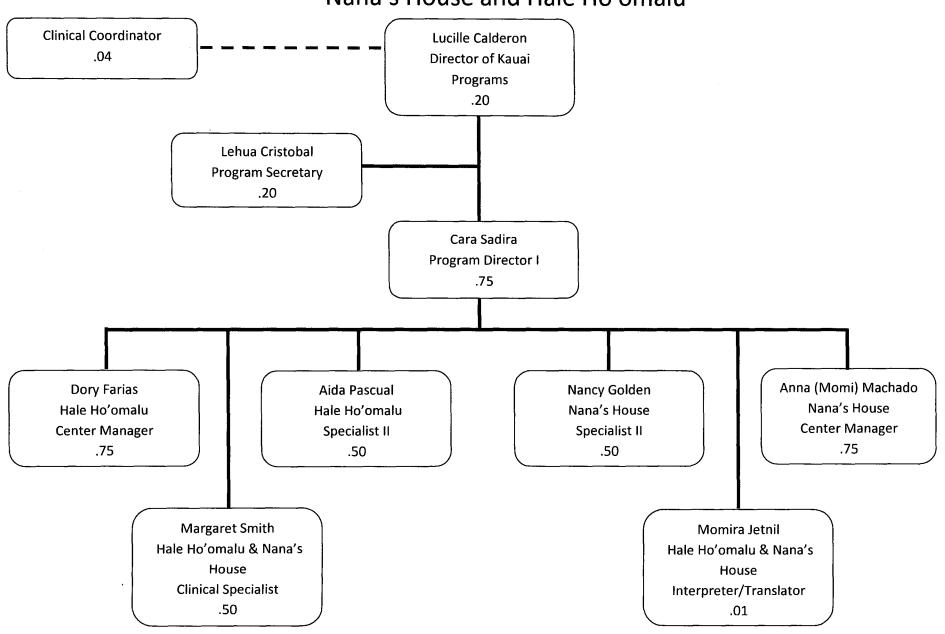
#### Child & Family Service Organization Chart



# Child & Family Service Kauai Office Organization Chart



## Family Centers Nana's House and Hale Ho'omalu



#### **BUDGET REQUEST BY SOURCE OF FUNDS**

(Period: July 1, 2013 to June 30, 2014)

Applicant: Child & Family Service Family Centers Kauai

|    | UDGET                               | Total State     |                       | 1                 |                 |
|----|-------------------------------------|-----------------|-----------------------|-------------------|-----------------|
| C  | ATEGORIES                           | Funds Requested | 1                     | i                 |                 |
|    |                                     | (a)             | (b)                   | (c)               | (d)             |
| A. | PERSONNEL COST                      |                 |                       |                   |                 |
| l  | 1. Salaries                         | 179,440         |                       |                   |                 |
| 1  | 2. Payroll Taxes & Assessments      | 24,099          |                       |                   |                 |
|    | 3. Fringe Benefits                  | 25,785          |                       |                   |                 |
|    | TOTAL PERSONNEL COST                | 229,324         |                       |                   |                 |
| В. | OTHER CURRENT EXPENSES              |                 |                       |                   |                 |
|    | 1. Airfare, Inter-Island            | 200             |                       | i                 |                 |
|    | 2. Insurance                        | 3,690           |                       |                   |                 |
|    | 3. Lease/Rental of Equipment        | 1,500           |                       |                   |                 |
|    | 4. Lease/Rental of Space            | 10,486          |                       | 1                 |                 |
|    | 5. Staff Training                   | 500             |                       |                   |                 |
|    | 6. Supplies                         | 3,000           |                       |                   |                 |
|    | 7. Telecommunication                | 1,800           | <u> </u>              |                   |                 |
|    | 8. Utilities                        | 1,200           |                       |                   |                 |
|    | 9. Audit                            | 1,260           |                       |                   |                 |
|    | 10. Contractual Fees - Subcontracts | 180             |                       |                   |                 |
| 1  | 11. Mileage                         | 2,400           |                       |                   |                 |
|    | 12. Postage, Freight& Delivery      | 120             |                       |                   |                 |
|    | 13. Publication & Printing          | 360             |                       |                   |                 |
| l  | 14. Repair & Maitenance             | 1,440           |                       |                   |                 |
| l  | 15. Auto Expenses                   | 252             |                       |                   |                 |
|    | 16. Auto Insurance                  | 240             |                       |                   |                 |
|    | 17. Auto Registration               | 48              |                       |                   |                 |
|    | 18. Administrative Support          | 42,000          |                       |                   |                 |
|    | 19                                  |                 |                       |                   |                 |
|    | 20                                  |                 |                       |                   |                 |
|    |                                     |                 |                       |                   | -               |
|    | TOTAL OTHER CURRENT EXPENSES        | 70,676          |                       |                   |                 |
| C. | EQUIPMENT PURCHASES                 |                 |                       |                   |                 |
| D. | MOTOR VEHICLE PURCHASES             |                 |                       |                   |                 |
| E. | CAPITAL                             |                 |                       |                   |                 |
| то | TAL (A+B+C+D+E)                     | 300,000         |                       |                   |                 |
|    |                                     |                 | Design C              | LD                |                 |
|    |                                     |                 | Budget Prepared       | з ву:             |                 |
| SO | URCES OF FUNDING                    |                 |                       | •                 |                 |
|    | (a) GIA                             | 300,000         | Bobbi Goodman         |                   | 681-1441        |
|    | (b)                                 |                 |                       |                   | Phone           |
|    |                                     |                 |                       |                   | 1/00/10         |
|    | (c)<br>(d)                          |                 |                       | of Finance        | 1/28/13<br>Date |
|    | (u)                                 |                 |                       | or i mance        | Date            |
|    | TAL DUDGET                          | 000.000         |                       |                   | _               |
| TO | TAL BUDGET                          | 300,000         | Name and Title (Pleas | se type or print) |                 |
|    |                                     |                 |                       |                   |                 |

## BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Applicant: Child & Family Service Family Centers Kauai

Period: July 1, 2013 to June 30, 2014

| POSITION TITLE             | FULL TIME<br>EQUIVALENT | ANNUAL SALARY<br>A | % OF TIME ALLOCATED TO GRANT REQUEST B | TOTAL STATE FUNDS REQUESTED (A x B) |
|----------------------------|-------------------------|--------------------|--|-------------------------------------|
| Director of Kauai Programs | 1.000                   | 75,767             | 20.00%                                 | \$ 15,153                           |
| Clinical Coordinator       | 1.000                   | 50,258             | 4.00%                                  | \$ 2,010                            |
| Program Secretary          | 1.000                   | 27,808             | 20.00%                                 | \$ 5,562                            |
| Program Director I         | 1.000                   | 51,374             | 75.00%                                 | \$ 38,531                           |
| Center Manager             | 1,000                   | 33,861             | 75.00%                                 | \$ 25,396                           |
| Center Manager             | 1.000                   | 33,861             | 75.00%                                 | \$ 25,396                           |
| Specialist II              | 0.500                   | 39,292             | 50.00%                                 | \$ 19,646                           |
| Specialist II              | 0.750                   | 39,292             | 50.00%                                 | \$ 19,646                           |
| Interpreter/Translator     | 0.250                   | 31,824             | 1.00%                                  | \$ 318                              |
| Clinical Specialist        | 0.400                   | 55,565             | 50.00%                                 | \$ 27,782                           |
|                            |                         |                    |  | \$ -                                |
|                            |                         |                    |  | \$                                  |
|                            |                         |                    |  | \$ -                                |
|                            |                         |                    |  | \$ -                                |
| TOTAL:                     |                         |                    |  | 179,440                             |

JUSTIFICATION/COMMENTS:

#### **BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES**

Applicant: Child & Family Service Family Centers Kauai Period: July 1, 2013 to June 30, 2014

| DESCRIPTION EQUIPMENT   | NO. OF | COST PER | TOTAL<br>COST | TOTAL<br>BUDGETED |
|-------------------------|--------|----------|---------------|-------------------|
|                         |        |          | \$ -          |                   |
|                         |        |          | \$ -          |                   |
|                         |        |          | \$ -          |                   |
|                         |        |          | \$ -          |                   |
|                         |        |          | \$ -          |                   |
| TOTAL:                  |        |          |               | _                 |
| JUSTIFICATION/COMMENTS: |        |          |               |                   |
|                         |        |          |               |                   |
|                         |        | ·        |               |                   |

| DESCRIPTION OF MOTOR VEHICLE | NO. OF<br>VEHICLES | COST PER<br>VEHICLE | TOTAL<br>COST | TOTAL<br>BUDGETED |
|------------------------------|--------------------|---------------------|---------------|-------------------|
|                              |                    |                     | \$ -          |                   |
|                              |                    |                     | \$ -          |                   |
|                              |                    |                     | \$ -          |                   |
|                              |                    |                     | \$ -          |                   |
|                              |                    |                     | \$ -          |                   |
| TOTAL:                       |                    |                     |               |                   |

JUSTIFICATION/COMMENTS:

### BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: Child & Family Service Family Centers

Period: July 1, 2013 to June 30, 2014

| TOTAL PROJECT COST | ALL SOURCES OF FUNDS<br>RECEIVED IN PRIOR YEARS |               | STATE FUNDS<br>REQUESTED | OF<br>FUNDS REQUESTED | FUNDING REQUIRED IN SUCCEEDING YEARS |              |
|--------------------|---|---------------|--------------------------|-----------------------|--------------------------------------|--------------|
|                    | FY: 2011-2012                                   | FY: 2012-2013 | FY:2013-2014             | FY:2013-2014          | FY:2014-2015                         | FY:2015-2016 |
| PLANS              |   |               |                          |                       |                                      |              |
| LAND ACQUISITION   |   |               |                          |                       |                                      |              |
| DESIGN             |   |               |                          |                       |                                      |              |
| CONSTRUCTION       |   |               |                          |                       |                                      |              |
| EQUIPMENT          |   |               |                          |                       | ·                                    |              |
| TOTAL:             |   |               |                          |                       |                                      |              |

#### DECLARATION STATEMENT OF APPLICANTS FOR GRANTS AND SUBSIDIES PURSUANT TO CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) 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;
  - b) Complies 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;
  - c) Agrees not to use state funds for entertainment or lobbying activities; and
  - d) Allows 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.
- 2) The applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is incorporated under the laws of the State; and
  - b) 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.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
  - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants or subsidies used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant or subsidy used for the acquisition of the land.

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

| Child & Family Service    |                   |
|---------------------------|-------------------|
| (C) 137 (Y 11/3 ) (C) 1/3 |                   |
|                           | 1/31/13           |
| (Signature)               | ' (Date)          |
| Howard S. Garval          | President and CEO |
| (Typed Name)              | (Title)           |