

## POSITION IN STATE GOVERNMENT

The Children's Trust Fund (CTF) is a quasi public/private agency. It is located within a division of state government, within the Office of Administration under the Commissioner of Administration for purposes of budgetary, procurement, accounting, and other management issues. CTF is governed by a 21-person board of directors who exercises its powers and duties independently from the Office of Administration. Seventeen members are appointed by the Governor and four are appointments representing the state legislative bodies.

## KEY ACTIVITIES AND ACHIEVEMENTS

- **Core Services:** In 2010, the coordinated lead agency model was replicated successfully a fourth time by awarding grants to 4 CBCAP family support program sites. In each community generation in which the model is replicated, CTF incorporates the best practices learned from the previous generations. Best practices include: community collaboration; implementation of a lead agency coordination model; flex pool funding for emergency family needs; partnerships with proven community programs such as Circle of Parents, Parents As Teachers, and Head Start; implementation of proven prevention models such as resource mothers, safe crib, infant massage, home visitation, respite care, parent support and education, and family development credentialing. An integral part of the implementation of the CBCAP lead agency coordination model has been the forming of family support teams to provide wrap-around services to each CBCAP family.
- **Outreach to Special Populations/Cultural Competence** CBCAP grantees are required to ensure that populations served are representative of the demographics in their community. This includes children and parents of racial and ethnic minorities, children and parents with disabilities and other special needs, homeless families or those at risk of homelessness, and members of other under-served or under-represented groups. CTF recommends that applicants target (1) expectant and young parent(s) 21 years of age or younger with education less than high school or GED; (2) parents mentally or physically challenged with young children; (3) parents with severe psychological disorders or substance abuse problems with young children; (4) families with young children that were prematurely born or have physical or developmental disabilities, and/or; (5) parents with intake Child Abuse Potential Inventory (CAPI) score greater than 200.
- **Parent involvement/leadership:** Each CBCAP site has in place, its own community driven governance, provider, and consumer (parent) council to govern and administer the day-to-day activities of the project. The two recently funded community sites are developing Citizen Advisory Councils (CAC).



Members will include parents who are current and past consumers for services. The CAC will act as an advocate, ombudsman, and evaluator of the project.

- **Evaluation:** The CTF CBCAP evaluation systematically studies:
  - management information systems and administrative management systems
  - client/consumer, and provider satisfaction
  - client/consumer assessment, identification, and referral systems
  - governing, consumer, and provider panel networks, protocols, and policies
  - cost per client vs. outcomes per client for CBCAP services
  - demographic and other information regarding clients

The two new components to the evaluation process added during this year include: measuring protective factors for Strengthening Families and the direct impact the factors have on reducing child abuse and neglect and ensuring the well being of children and families; and a cost savings analysis as it relates to prevention, the social cost of not preventing abuse, and the overall return on investment (ROI).

Results from the CBCAP Operational Performance and Family Outcome Report for Year Two (ending June 30, 2010) include: Positive gains in the three outcome measures for both sites with significant gains on the CAPI for one site and significantly positive gains for the PSI for the other site. Both sites had significant gains on family satisfaction with services versus what families had experienced prior to coming into the CBCAP. Approximately 75% of all families showed positive gains on the CAPI. Analysis of factors related to positive gains, showed that those families with the highest parental stress at intake, those with lower education levels, and those from single parent homes showed the greatest gains at 6-month follow-up.

- **Support Training, Technical Assistance, and Evaluation Assistance:** CTF staff and consultants provided ongoing technical assistance and monitoring of each site. Prevention Consultants of Missouri, Office of Social and Economic Data Analysis (OSED) and the Partnership for Children provided training on utilizing Kids Count Data, regional trends, and how to best use this information to improve outcomes for children and families. Quarterly meetings, statewide workshops, site visits, annual contract compliance reviews, conference calls and the CBCAP e-mail list were all provided as part of comprehensive technical assistance for sites. In addition, two established sites have been paired with the two newest as a way of increasing both the level of technical expertise and to provide peer review from community to community.



<b>Participants receiving direct services</b>	<b># individuals</b>	<b>927</b>	<b># families</b>	<b>253</b>
	<b># children with disabilities</b>	<b>44</b>	<b># parents with disabilities</b>	<b>46</b>
<b>Reach</b>	<b># local grantees</b>	<b>7 (3 training)</b>		
<b>Spread</b>	<b># training sessions on evidence-based and best practices</b>	Multiple	<b># professionals participating in training</b>	<b>900</b>

## ESSENTIAL PARTNERSHIPS

Structure for partnership:

Missouri Prevention Partners Coalition (MPPC): a statewide prevention task force working together to develop a comprehensive prevention plan for Missouri, led by CTF

Show-Me Bright Futures Initiative: statewide collaboration to develop a public health model for mental health prevention and services

Early Childhood Comprehensive Systems: statewide collaboration to develop the state ECCS plan

Key Partners:

### Public Sector

- Public health/ maternal and child health
- Early childhood
- Home visiting
- Mental health
- Head Start/ Early Head Start
- Fatherhood programs

- State Technical Assistance Team

### Private Sector

- Advocacy organizations
- Parent organizations
- Faith community



## SYSTEM CHANGE EFFORTS

- **Early Childhood:** CTF participated on and provided funding support to the State Early Childhood Comprehensive Steering Committee. Three of the four CTF CBCAP community sites also served on the ECCS.
- **Child and Family Service Reviews/Program Improvement Plan (CFRS/PIP):** CTF is a standing member of the CFRS/PIP Advisory Committee in the role of child advocate. The responsibilities of the Child and Family Service/PIP Advisory Committee include: providing feedback on the Child and Family Services Plan and providing assistance to the Children's Division in CFRS process and development of a PIP
- **Home Visiting:** CTF collaborated with Department of Social Services, the Department of Health and Senior Services (DHSS) and the Coordinating Board for Early Childhood to increase home visitation. CTF in conjunction with Department of Social Services (DSS) funded home visitation services through the Nurse Home Visitation models. Additionally, CTF actively participated on the Home Visiting Steering Committee for purposes of implementing a federal home visitation grant. This included assistance to ensure that this home visiting program will be part of a continuum of early childhood services within the state and providing technical assistance in the area of child abuse/neglect prevention and strengthening families. Due in part to the strong collaboration developed through CBCAP, the Home Visitation Steering Committee selected Dunklin/Pemiscot County (a CBCAP community site) to be the first recipient of the Home Visitation funding.
- **Strengthening Families:** CTF leads the Strengthening Families Initiative in Missouri in partnership with DSS in promoting the SFI protective factors through contracts with community based providers.
- **Infant Safe Sleep:** CTF piloted a program in collaboration with DSS to expand a statewide safe cribs program to provide a safe sleep environment for infants and reduce accidental deaths due to suffocation from unsafe sleeping arrangements by providing at-risk families with a safe crib and safe sleep education through nurse home visitation.



## FUNDING AND FISCAL LEVERAGING

### ***Fiscal Leveraging***

#### **Innovative funding mechanisms:**

- Specialty license plates are marketed and sold generating \$150,000 of revenue for CTF
- Missourians have the option of donating part or all of their income tax refund to CTF

State Allowable Claims	<b>2464471</b>
Population-based Allocations	<b>482953</b>
Leveraged-Funds-Based Allocations	<b>85436</b>
<b>Final FY 10 Federal Grant Amount</b>	<b>565485</b>

## EVIDENCE-BASED AND EVIDENCE-INFORMED PRACTICES

Level per Program Assessment Rating Tool	CBCAP Funding
Programs Lacking Support or Positive Evidence/Undetermined/Harmful	\$0
Emerging and Evidence-informed Programs and Practices	\$0
Promising Programs and Practices	\$0
Supported Programs and Practices	\$10,588
Well Supported Programs and Practices	\$448,586

## TRAINING

### **Administrative and Management Topics**

- collaboration and partnerships for prevention
- evaluation and data management
- program monitoring and continuous quality improvement
- grant reporting requirements

### **Programmatic and Service Topics**

- prevention programs and family support
- promoting protective factors and reducing risk factors

## RESOURCES

- Annual State Profiles: [www.friendsnrc.org/...](http://www.friendsnrc.org/)

