

Colorado Community Response Program



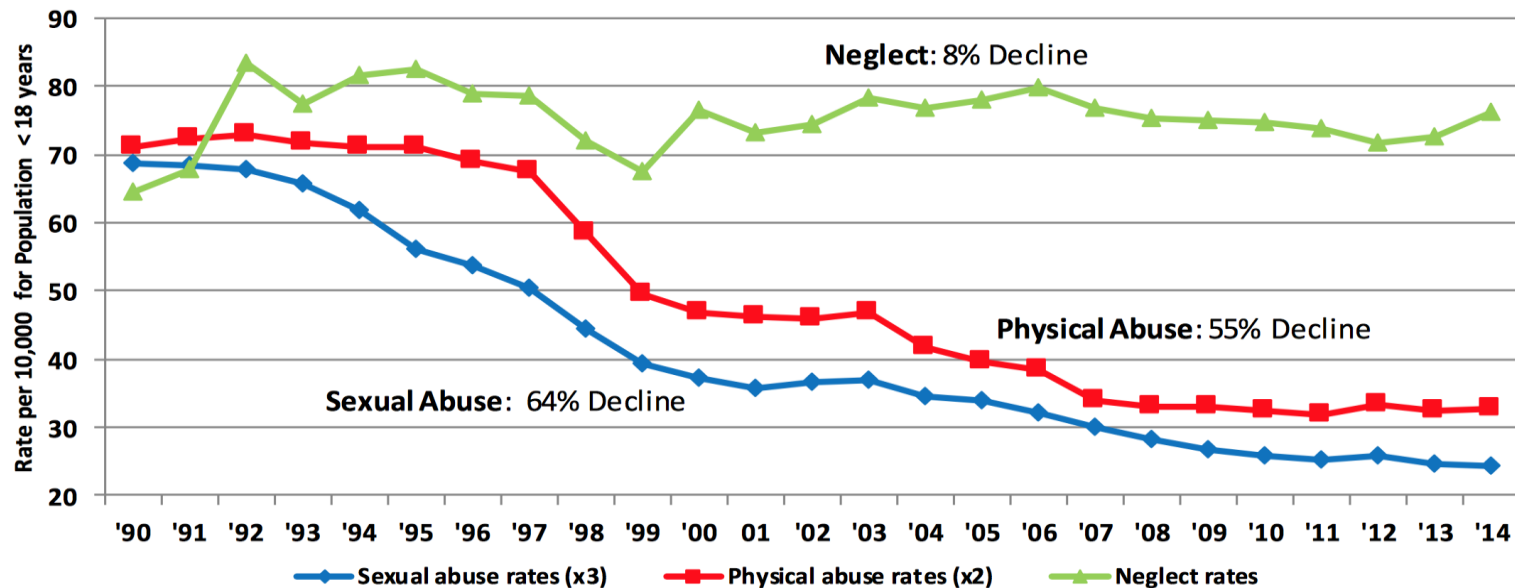
COLORADO
Office of Early Childhood
Department of Human Services

Colorado Community Response Program

Program Purpose

Neglect Trends

U.S. Maltreatment Trends: 1990-2014



Note: Trend estimates represent total change from 1992 to 2014. Annual rates for physical abuse and sexual abuse have been multiplied by 2 and 3 respectively in Figure 1 so that trend comparisons can be highlighted.

¹ The statistics in Table 1 and Figure 1 concern substantiated cases of sexual abuse, physical abuse and neglect. A substantiated case means a case that has been reported to a child protection agency, investigated and deemed to have occurred according to a “preponderance of evidence.” The child maltreatment cases referred and investigated by state child protection agencies primarily involve abuse by caregivers. The cases do not include many involving stranger abusers, unless some element of caregiver neglect was involved.

Source: Finkelhor, D. (2016)
<http://www.unh.edu/ccrc/pdf/Updated%20trends%202014.pdf>

Neglect

Colorado definition of child abuse and neglect:

- Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or
- An act or failure to act which presents an imminent risk of serious harm.

Neglect is commonly defined in State law as the failure of a parent or other person with responsibility for the child to provide needed food, clothing, shelter, medical care, or supervision to the degree that the child's health, safety, and well-being are threatened with harm.

Neglect

Related Issues:

- Poverty/economic hardship
- Substance abuse
- Domestic violence
- Mental illness
- Stress
- Lack of social support
- Low self efficacy
- Child behavior/health

Colorado Community Response

Traditional CPS

Differential
Response

Community
Response

Family Support

Intervention

Prevention

Eligible Population

Colorado Community Response (CCR) is a voluntary program that targets prevention services to families that have been deflected from the child welfare system without the provision of formalized services.

Eligible Families:

- Families with a screened out child welfare referral.
- Families with a closed high-risk assessment.
- Families with a closed Family Assessment Response (FAR) without service plan. (Differential Response)
- Families previously offered CCR services (re-referrals)

Ineligible Population

Referral Type

- Child Sexual Abuse (All)
- Child Fatality
- Community Referrals
- Self Referrals



Screen Out/Closed Assessment

- Insufficient Information.
- Duplicate Referral.
- 3rd Party Incident.
- Victim over 18.
- Repeated unsubstantiated reports.
- No current allegations A/N.
- Custody Issues.

Goals

To enhance comprehensive voluntary services for families reported to child protective services whose referral is screened out and/or closed after initial assessment;

To reduce re-referrals to child protection services related to escalation of risks and prevent the high costs associated with being “screened in” to the child protection services;

To increase families’ protective capacities by promoting individual, family, & community strengths;

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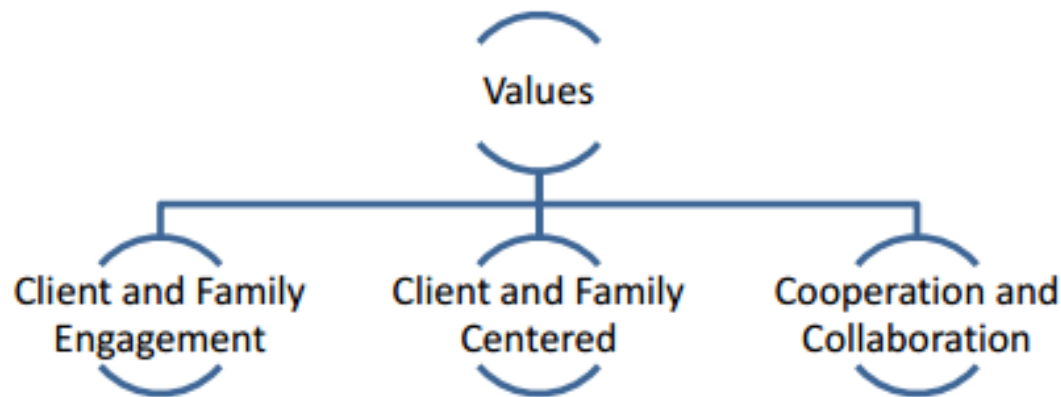
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To increase families’ protective capacities by promoting individual, family, & community strengths;

Goals

To promote safe, stable, nurturing relationships that allow children to reach their full potential.

To address the link between poverty and maltreatment by connecting families to vital economic and other support services to mitigate risk factors associated with child *neglect*;



Colorado Community Response Program

Program Design

Program Design

- **Family Engagement:** Outreach begins within 48 hours of receiving the referral and is consistent over a two week period.
- **Service Delivery:** CCR services are primarily provided in families' own homes, or other locations convenient for the individual family.
- **Family Goal Setting:** Families complete the Colorado Family Support Assessment 2.0 (CFSA) to reflect on their situation, set goals, and measure progress.
- **Case Management:** Collaborative process to assess, implement, monitor, and evaluate options available to meet the identified needs of the family and assist in goal attainment.

Program Design

- **Financial Education/Coaching:** Provide information and resources to help families in overcoming credit problems, paying off debt, prioritizing bill payment, avoiding financial risk, and creating sustainable plans around saving money.
- **Flex Funding:** Funding is available to help families address an imminent need that has immediate implications for child well-being and is directly caused by a lack of economic resources.
- **Resource Referral:** Connects families to vital economic and non-economic resources in their community.

Program Design



Strengthening Families Protective Factors: Helps families build protective factors that are known through research to prevent child maltreatment.

- **Social Capital Building:** Helps families develop social networks based on reciprocity, trust, and cooperation to help one another meet the needs of their families.
- **Case Length:** CCR is a short-term program that is delivered in 12-16 weeks, 20 weeks maximum.

Implementation

Site Structures

- **County and Non-profit Family Support Organization(s):** A county human services department and community based organization (CBO) with the county department designated as the fiscal agent. CCR staff are located within the CBO.
- **Multi-County:** More than one county department of human services collaborate together to provide services across multiple jurisdictions, with one county agent as the fiscal agent. CCR staff are located within one county department of human services or at a community based organization.
- **County Only:** A county human services department provides dedicated county workers to deliver CCR services and acts as the fiscal agent. CCR staff must be solely dedicated to this program and services provided outside of the child welfare system.

Implementation

Training

Required Training

- Motivational Interviewing
- Colorado Family Support Assessment 2.0
- Power of Engagement
- My Money Today and Tomorrow
- Worker Safety
- Mandated Reporter Training
- Strengthening Families Protective Factors Framework
- Professional Boundaries
- Financial Health for Caseworkers*
- Substance Use Conversation Guide*
- Monthly Peer Learning Calls

Optional Training

- Drug Recognition
- Standards of Quality for Family Strengthening and Support
- Two Generation Approach



* New training implemented 2017

Implementation

Tools - Administered Pre and Post-test

- **Colorado Family Support Assessment Tool (CFSAv2):** The instrument is designed to obtain objective and reliable information on family strengths, areas of need, and readiness to change.
- **Protective Factors Survey (PFS):** The instrument is designed for families receiving child abuse prevention services and measures families across five domains. Questions are designed to identify strengths and identify areas for increasing family protective factors.



Implementation

- **Income and Benefits Inventory (IBI):** The instrument is designed for families to create a picture of their financial health, identify current benefits, and determine areas of need. The IBI can be helpful in guiding collaborative goal setting and determining if Flex Funding is warranted.
- **Financial Health Survey (FHS):** The FHS is a series of 27 questions used to help identify and raise awareness about important concepts involving finances. By using this survey, families begin to identify financial challenges, determine financial goals, and connect with resources to help meet their goals and pursue financial stability.

Financial Coaching and Literacy



Income

Why is talking income so difficult?

Manners are self-reinforcing. In the US, it's generally considered inappropriate, rude, tacky, and a bad idea to discuss your income.

People judge you whether you're rich or poor. Oh, you're poor? Well, no wonder. You're lazy! it's uncomfortable for your people to see you as poor. So why give them that information?

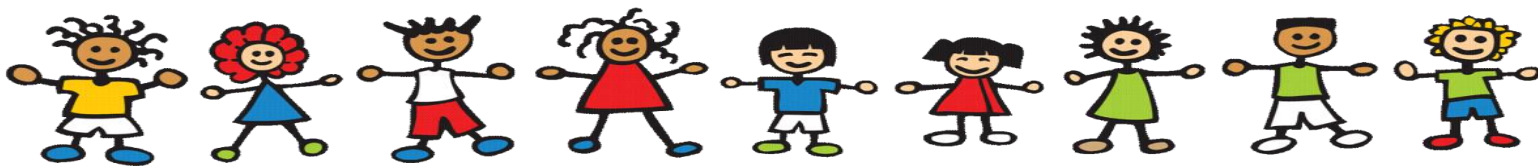
The Rule: Everyone knows you should never divulge your income.

Implications

Why have the conversation?

Studies have demonstrated that childhood poverty is especially harmful to children during the early years of life.

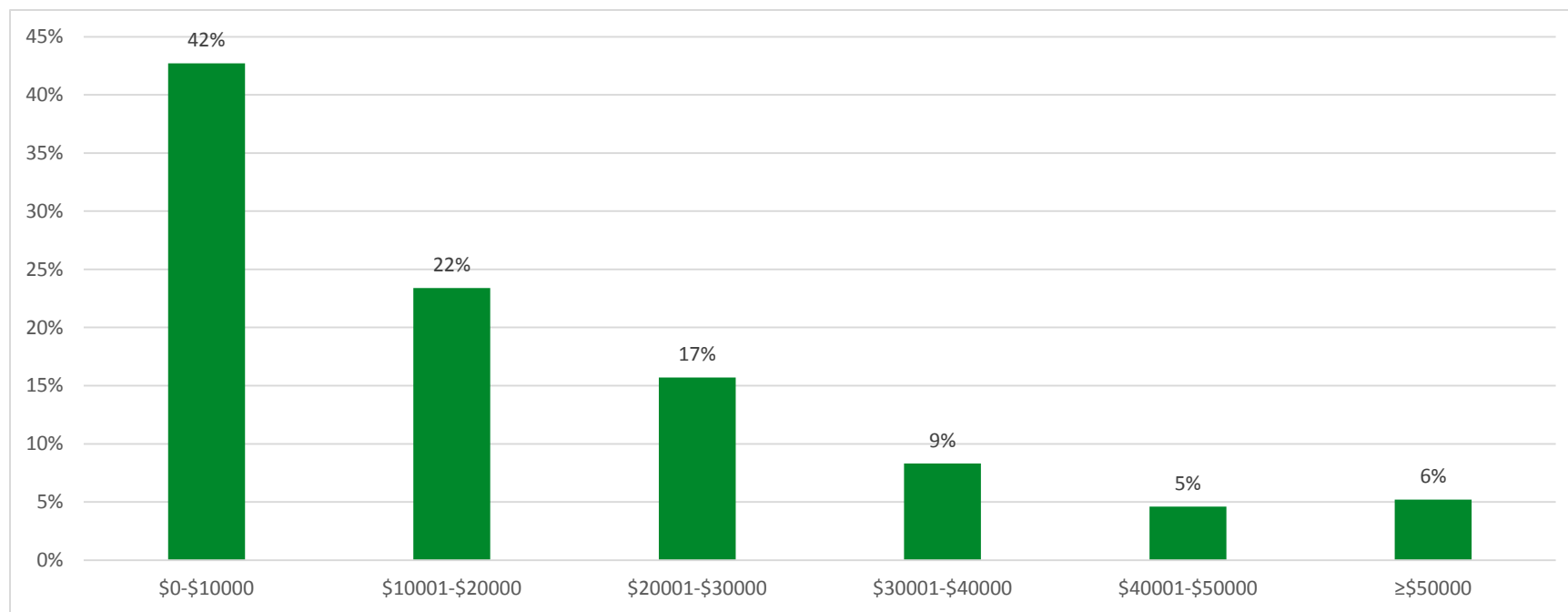
- Toxic Stress
- Homelessness
- Food Insecurity
- Emotional Concerns
- Behavioral Concerns
- Physical Health
- Nutrition



Shonkoff JP, Garner AS; Committee on Psychosocial Aspects of Child and Family Health

CCR Family Income

Income



81% of families reported a household income of less than \$30,000 per year

Family Advocates

The primary role of most family advocates is to help clients stabilize financially and economically.

How much training do most organizations or family advocates have in personal finance and economics?

For most family advocates the answer is “none”.



Site Support

Unlimited access to Financial Health for Case Managers.

- Asset Building.
- Goals and Barriers.
- Personal Values.
- Personal Values vs. Behaviors.
- Goals and Values.
- Receipt Exercise.
- Spending Journal.
- EPIC Exercise.
- EPIC Reflection.
- Support.
- Income.
- Gross vs. Net.
- Time Value.
- Budget.

Site Support

Unlimited access to online Financial Health Programs.

- Financial Health for Case Managers.
- Clarifying Credit Confusion.
- Connections for Couples.
- Bootstraps Asset Building.
- 2 Generation.
- Financial Health for Veterans.
- Financial Health for Recovery.

HOW'S YOUR
FINANCIAL
HEALTH?

Site Support

- Monthly Financial Health Forums and Webinars.
- Financial Health Coaching for Family Advocates and Clients.
- Quarterly Financial Health Newsletter.
- Online Resource Library.
- Financial Health Institute Community Programs.

WHAT FINANCIAL HEALTH MEANS TO ME.

Colorado Community Response Program

Performance Monitoring

Performance Monitoring

Measurement 1: Number of children without a subsequent substantiated cases of child abuse or neglect 6 months after family completes CCR services.

Measurement 2: Number of families who had positive movement in Economic Self Reliance Scale.



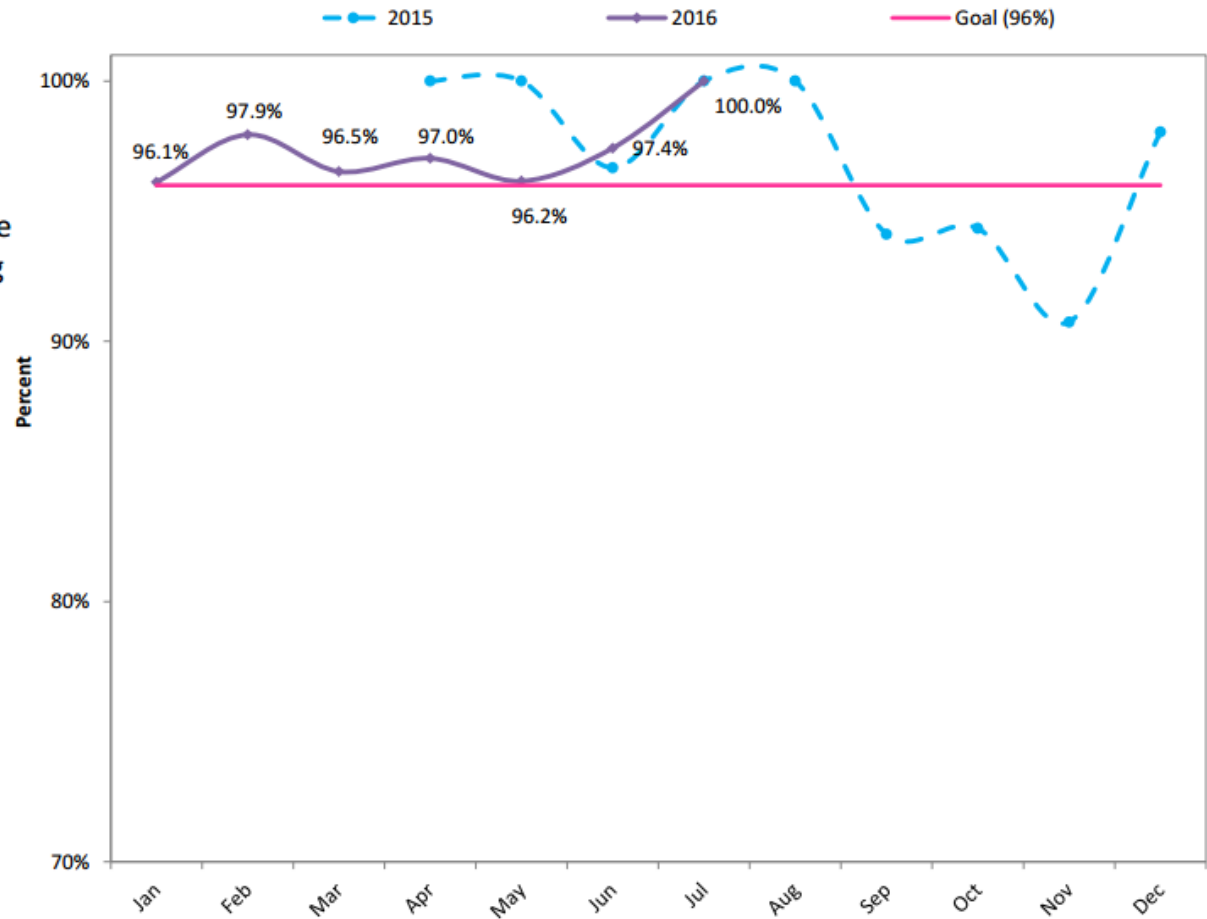
*Above goal of 96% past 8 months

Performance Monitoring

Description of Trend: Performance increased by 2.6 to 100%. The goal has been met 8 months in a row.

Numerator: Number of children **without** a substantiated cases of abuse or neglect within six months of closing CCR case

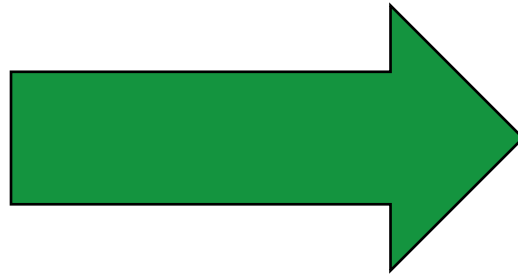
Denominator: Number of children whose family successfully completed CCR services *(Note: All children who are included on CW referral which generated the CCR case are included.)*



*Above goal of 96% past 8 months

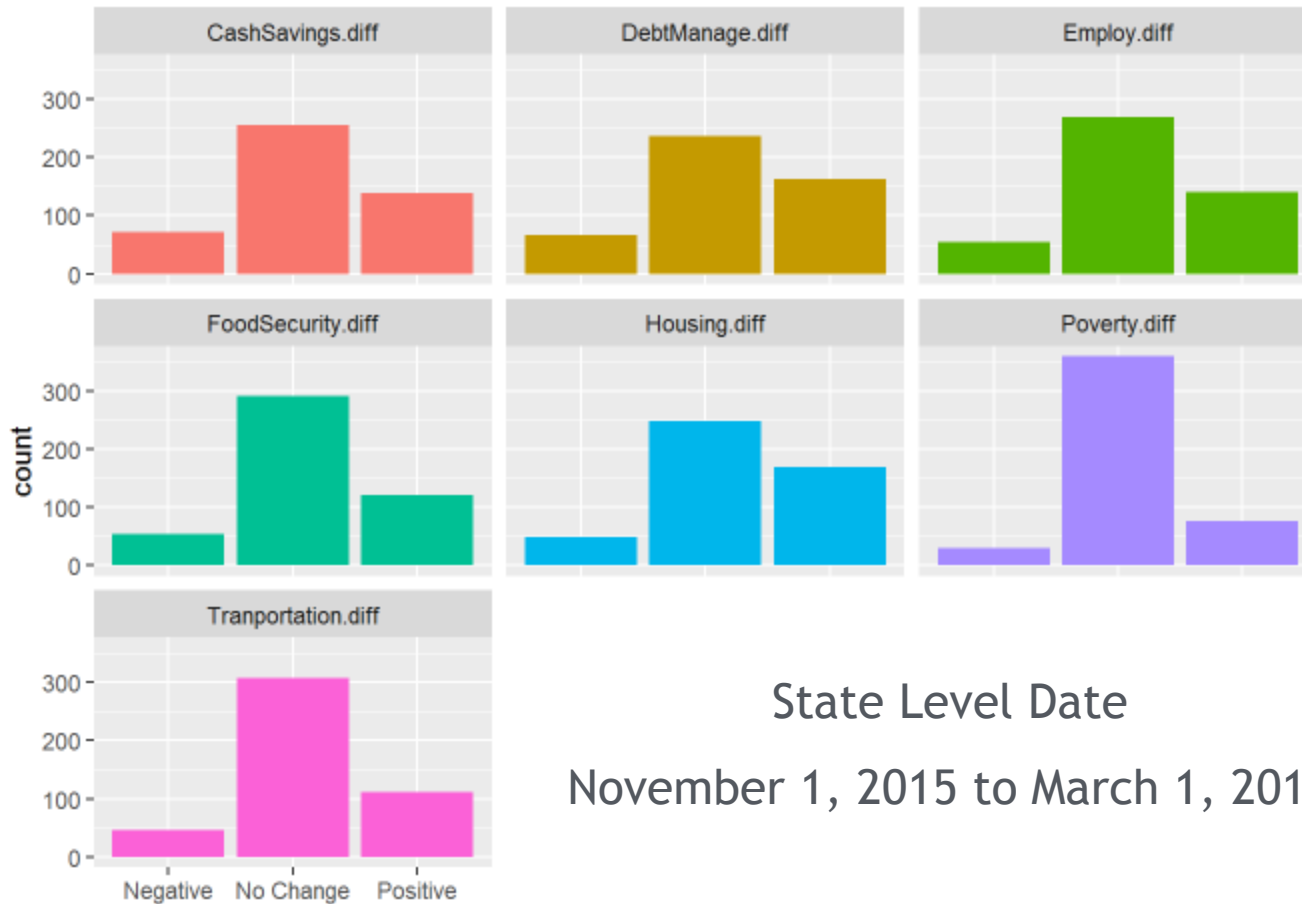
Economic Self Reliance Scale

C D
F O
S M
A A
I
N
S



- Cash Savings
- Debt Management
- Employment
- Food Security
- Housing
- Poverty
- Transportation

Economic Self Reliance



State Level Date

November 1, 2015 to March 1, 2015

Colorado Community Response Program

Pilot Evaluation

Evaluation

Demographics

- 82% female
- 34% under 30 years of age
- 59% White, 31% Hispanic, 6% AI/AN, 2% African American
- 32% married, 9% otherwise partnered, 59% single/divorced/separated/widowed
- 59% renting, 19% homeowners, 19% shared/temporary housing, 3% homeless
- 81% household income <\$30,000/year with 42% household income <\$10,000/year
- 53% high school diploma/GED or less

Evaluation

Data Source

1. Referral Logs
2. Trails Administrative Data
3. Surveys

	Caregiver	Worker
Pretest (at intake)	1. Protective Factors Survey	1. CFSA 2. Income-Benefits Inventory
Posttest (at case closure)	1. Protective Factors Survey 2. Engagement 3. Service provision 4. Satisfaction	1. CFSA 2. Income-Benefits Inventory 3. Engagement* 4. Service Provision Inventory*

*indicates worker completes this survey portion alone (without caregiver input)

Evaluation

Outreach

Total Referrals	Number Accepted	Acceptance Rate
4,988	1,237	27%

Average number of outreach attempts	Number declined	% active declines	% passive declines - unable to reach	% passive declines - other
3	3,662	29%	51%	20%

Note: Number accepted plus number declined do not equal total referrals due to some referrals being actively outreached to at time of data pull.

Evaluation

Closure/Response Rate

Number closed cases	Average Length of Case (days)	% services completed	% family opt-out/ disengagement	% discontinued eligibility
945	106	62%	27%	11%

Caregiver Pretest		Worker Pretest		Caregiver Posttest		Worker Posttest	
Surveys Received	Response Rate	Surveys Received	Response Rate	Surveys Received	Response Rate	Surveys Received	Response Rate
1004	83%	985	81%	425	45%	481	51%

Evaluation

Protective Factors

Domain or Item	Mean Pretest	Mean Posttest	Mean Change
Resiliency	5.42	5.75	+0.34**
Social Support	5.42	6.00	+0.58**
Concrete Support	4.83	5.49	+0.68**
Nurturing and Attachment	6.29	6.45	+0.16**
Parenting - know what to do	4.64	5.08	+0.42**
Know how to help child learn	4.69	6.00	+0.32**
Child misbehaves to upset me	4.93	5.22	+0.26**
Praises child when behaving well	6.24	6.44	+0.21**
Maintain control while disciplining child	6.22	6.33	+0.11*

*indicates statistically significant findings at $p < .05$; ** $p = .001$ or better

Evaluation

Colorado Family Support Assessment

Domain	Number wanting to change area	Average Change in 5-point scale	% Below Prevention Line - Pre	% Below Prevention Line - Post
Income	146	+0.03	97.2%	95.2%
Employment	187	+0.56**	68.5%	46.5%**
Housing	220	+0.58**	59.1%	34.6%**
Transportation	135	+0.74**	28.9%	10.4%**
Food Security	142	+0.52**	47.2%	13.4%**
Child Care	76	+0.67**	56.6%	19.7%**
Child Education	90	+0.43**	36.7%	18.9%**
Adult Education	135	+0.12	54.1%	49.6%
Cash Savings	150	+0.15*	86.7%	81.3%
Debt Management	124	+0.45**	70.2%	49.2%**
Health Coverage	73	+0.26*	37.0%	16.4%**
Physical Health	117	+0.32**	40.2%	27.4%*
Mental Health	167	+0.68**	44.3%	16.2%**
Substance Abuse	47	+0.34*	27.7%	10.6%*

Evaluation

Caregiver Satisfaction

- 93% of caregivers rated the services they received as being moderately or very effective in helping with their family's problems.
- 88% of caregivers reported that their family is “better off” as a result of their CCR participation.
- 91% of caregivers responded that they had received all of the help that they needed through CCR.

Evaluation

Child Welfare Outcomes

Final Report Summer 2017 will review the effectiveness of CCR in preventing child welfare involvement for those who successfully completed CCR services :

- Re-Reports to Hotline
- Reports Resulting in Assessment
- Substantiation of Abuse/Neglect
- Out of Home Placements

Evaluation

Future Evaluation

- **Cost Analysis:** Evaluator will work to identify actual cost to serve a CCR family and determine cost savings gained by deflecting these families from child welfare.
- **Family Interviews:** Evaluator will work to identify families who have participated in CCR.

Success

Family Characteristics

- Blended family with 6 children between the ages of 2 and 15 years old
- Families living separately due to financial hardship
- History of substance use
- Employment issues
- Criminal history

CCR Participation

- Housing stability
- Beds for the children
- Participation in parenting classes
- Budgeting/working on financial stability
- Parent leadership
- Youth groups for children
- Stable Employment



Contact Information

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