



Travis County Commissioners Court Agenda Request

Meeting Date: 07/10/2012, 9:00 AM, Voting Session

Prepared By/Phone Number: Alan Miller, Planning and Budget Office, 854-9726

Elected/Appointed Official/Dept. Head: Leslie Browder, County Executive
Planning and Budget

Commissioners Court Sponsor: Judge Biscoe

Review and approve requests regarding grant programs, applications, contracts and permissions to continue:

- A. New application to the Office of the Governor, Criminal Justice Division, for funds to evaluate the Travis County Criminal Court's indigent defense system; and
- B. New application to the U.S. Department of Health and Human Services, Administration for Child and Families, to fund the Travis County Children's Success Initiative in Health and Human Services and Veterans Services Department for services to children affected by substance abuse in Travis County.

BACKGROUND/SUMMARY OF REQUEST AND ATTACHMENTS:

Item A is a new application for funds to review the Travis County indigent defense system. It provides funds and operating expenses for 1 FTE from 07/01/12 to 03/31/14.

Item B is a new application for a multiyear grant to expand services to children affected by substance abuse. The grant provides funding for 9 positions, 3 will be County positions and the other six will be divided among other partner agencies.

STAFF RECOMMENDATIONS:

PBO recommends approval.

ISSUES AND OPPORTUNITIES:

Additional information is provided on each item's grant summary sheet.

FISCAL IMPACT AND SOURCE OF FUNDING:

Neither of the proposed grant actions require any additional funding through Commissioners Court. Item B includes a match requirement of \$113,995 that is met through the allocation of existing staff to the grant purpose.

REQUIRED AUTHORIZATIONS:

Planning and Budget Office
County Judge's Office

Leslie Browder
Cheryl Aker

GRANT APPLICATIONS, CONTRACTS AND PERMISSIONS TO CONTINUE
FY 2012

The following list represents those actions required by the Commissioners Court for departments to apply for, accept, or continue to operate grant programs. This regular agenda item contains this summary sheet, as well as backup material that is attached for clarification.

Dept.	Grant Title	Grant Period	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	PBO Notes	Auditor's Assessment	Page #	
Application												
A	124	Indigent Defense System Evaluation Grant	07/01/12 - 03/31/14	\$230,318	\$0	\$0	\$0	\$230,318	1.00	R	MC	11
B	158	Children's Success Initiative	09/28/12 - 09/27/13	\$670,593	\$113,995	\$0	\$4,345	\$788,933	15.15	R	EC	28

PBO Notes:

- R - PBO recommends approval.
- NR - PBO does not recommend approval
- D - PBO recommends item be discussed.

County Auditor's Complexity Assessment measuring Impact to their Office's Resources/Workload

- S - Simple
- MC - Moderately Complex
- C - Complex
- EC - Extremely Complex

FY 2012 Grant Summary Report
Grant Applications approved by Commissioners Court

The following is a list of grants for which application has been submitted since October 1, 2011, and the notification of award has not yet been received.

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
49	Little Webberville Park Boat Ramp Renovation Grant	6/01/2012-05/31/2015	\$77,502	\$0	\$25,834	\$0	\$103,336	-	10/25/2011
49	Webberville Park Boat Renovation Grant	6/01/2012-5/31/2015	\$129,793	\$0	\$43,624	\$0	\$173,417	-	10/25/2011
49	Dink Pearson Park Boat Ramp Grant	6/01/2013-5/31/2016	\$500,000	\$0	\$166,667	\$0	\$666,667	-	10/25/2011
58	AmeriCorps	8/1/2012-7/31/2013	\$298,671	\$0	\$437,941	\$73,677	\$810,289	28.00	11/1/2011
47	State Homeland Security Grant program (through CAPCOG)- SCBA equipment	10/01/2012-11/30/2014	\$40,000	\$0	\$0	\$0	\$40,000	-	1/10/2012
47	State Homeland Security Grant program (through CAPCOG)- equipment licenses	10/01/2012-11/30/2014	\$8,000	\$0	\$0	\$0	\$8,000	-	1/10/2012
47	State Homeland Security Grant program (through CAPCOG)- maintenance contract	10/01/2012-11/30/2014	\$30,000	\$0	\$0	\$0	\$30,000	-	1/10/2012
47	State Homeland Security Grant program (through CAPCOG)- replacement equipment	10/01/2012-11/30/2014	\$30,000	\$0	\$0	\$0	\$30,000	-	1/10/2012
47	State Homeland Security Grant program (through CAPCOG)- chemical protective clothing	10/01/2012-11/30/2014	\$40,000	\$0	\$0	\$0	\$40,000	-	1/10/2012
47	State Homeland Security Grant program (through CAPCOG)- radiological isotope identifier	10/01/2012-11/30/2014	\$33,500	\$0	\$0	\$0	\$33,500	-	1/10/2012
47	State Homeland Security Grant program (through CAPCOG)- dosimeters	10/01/2012-11/30/2014	\$8,000	\$0	\$0	\$0	\$8,000	-	1/10/2012
49	FY 12 Habitat Conservation Plan Land Acquisition Assistance Grant	5/1/2012-8/30/2014	\$4,834,800	\$0	\$3,223,200	\$0	\$8,058,000	-	1/17/2012
49	Emergency Management Performance Grant	10/1/2011-9/30/2012	\$138,465	\$138,464	\$0	\$0	\$276,929	3.00	1/24/2012
24	Travis County Veterans Court	7/01/2012-6/30/2013	\$53,414	\$0	\$0	\$0	\$53,414	-	1/31/2012

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
45	Drug Court & In-Home Family Services	9/01/2012-8/31/2013	\$181,000	\$20,011	\$0	\$0	\$201,011	0.24	1/31/2012
45	Juvenile Accountability Block Grant (JABG) Local Assessment Center	9/01/2012-8/31/2012	\$101,525	\$11,280	\$0	\$0	\$112,805	1.34	1/31/2012
19	Underage Drinking Prevention Program	10/1/2012-9/30/2013	\$161,205	\$230,502	\$35,951	\$53,875	\$481,533	3.50	2/7/2012
24	Veterans Court Grant	9/1/2012-8/31/2013	\$226,516	\$0	\$0	\$0	\$226,516	2.00	2/7/2012
39	Travis County Adult Probation DWI Court	9/30/2012-9/29/2013	\$206,515	\$0	\$0	\$0	\$206,515	3.05	2/7/2012
24	Family Drug Treatment Court	9/1/2012-8/31/2013	\$137,388	\$0	\$0	\$0	\$137,388	1.00	2/14/2012
37	TCSO Child Abuse Victim Services Personnel	9/1/2012-8/31/2013	\$24,997	\$0	\$24,997	\$0	\$49,994	1.00	2/14/2012
39	Travis County Adult Probation DWI Court	9/1/2012-8/31/2013	\$229,112	\$0	\$0	\$0	\$229,112	4.00	2/14/2012
42	Drug Diversion Court	9/1/2012-8/31/2013	\$132,585	\$0	\$0	\$0	\$132,585	1.00	2/14/2012
45	Travis County Juvenile Treatment Drug Court-SAMSHA/CSAT	9/1/2012-8/31/2013	\$199,766	\$0	\$0	\$0	\$199,766	-	2/14/2012
19	Family Violence Accelerated Prosecution Program	09/01/12-08/31/13	\$121,905	\$31,534	\$16,365	\$17,742	\$187,546	2.28	2/21/2012
45	Travis County Eagle Resource Project	09/01/12-08/31/13	\$31,926	\$0	\$0	\$0	\$31,926	-	2/21/2012
45	Trama Informed Assessment and Response Program	09/01/12-08/31/13	\$192,666	\$0	\$0	\$0	\$192,666	0.50	2/21/2012
47	Fire Mitigation Assistance Grant Hodde Lane #2957	09/04/11-09/19/11	\$38,605	\$12,868	\$0	\$0	\$51,473	-	3/13/2012
47	Fire Mitigation Assistance Grant Pedernales #2959	09/04/11-09/19/11	\$333,005	\$111,002	\$0	\$0	\$444,007	-	3/13/2012
47	Fire Mitigation Assistance Grant Steiner #2960	09/04/11-09/19/11	\$385,016	\$128,339	\$0	\$0	\$513,355	-	3/13/2012
49	Travis County Fuels Reduction Project (aka Wildfire Mitigation Grant)	09/01/12-08/31/14	\$200,775	\$66,925	\$0	\$0	\$267,700	-	3/20/2012
58	Parenting In Recovery*	09/30/11-09/29/12	\$583,843	\$62,818	\$80,000	\$52,212	\$778,873	1.00	3/20/2012

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
45	Residential Substance Abuse Treatment (RSAT) Program	10/01/12 09/30/13	\$143,743	\$47,914	\$0	\$0	\$191,657	1.75	3/20/2012
45	Trama Informed Assessment and Response Program*	09/01/12 08/31/13	\$192,666.00	\$0.00	\$0	\$0	\$192,666.00	0.50	3/27/2012
45	Travis County Eagle Resource Project*	09/01/12 08/31/13	\$31,926.00	\$0.00	\$0	\$0	\$31,926.00	-	3/27/2012
39	Travis County Adult Probation Co-Occurring Re-entry Services	10/01/2012 9/30/2012	\$565,345.00	\$0.00	\$0	\$0	\$565,345.00	3.00	4/17/2012
57	NEH Preservation Assistance	2/01/2012 8/1/2013	\$6,000.00	\$0.00	\$0	\$0	\$6,000.00	-	4/17/2012
39	SCATTF - Sheriff's Combined Auto Theft Task Force	09/01/12 08/31/13	\$1,007,657	\$173,811	\$236,537	\$0	\$1,418,005	12.00	5/1/2012
45	Youth Reentry Program	10/01/12 03/31/15	\$1,047,504	\$0	\$0	\$0	\$1,047,504	3.00	5/1/2012
39	Domestic Violence Accountability Management Program	10/01/2012 09/30/2014	\$499,956	\$0	\$0	\$0	\$499,956	3.00	5/15/2012
45	National School Lunch/Breakfast program and USDA School Commodity Program	07/01/2012 06/30/2013	\$217,219	\$0	\$0	\$0	\$217,219	-	6/12/2012
137	State Alien Assistance Program SCAAP 12	07/01/2010 - 06/30/2011	\$683,501	\$0	\$0	\$0	\$683,501	-	6/26/2012
158	Basic Transportation Needs Fund Bus Pass Program	09/01/2012 - 08/31/2013	\$5,790	\$0	\$0	\$0	\$5,790	-	6/26/2012
137	Sheriff's Office Command & Support Vessel	06/01/2012 - 03/31/2013	\$413,236	\$0	\$0	\$0	\$413,236	-	7/3/2012
			\$14,525,038	\$1,035,468	\$4,291,116	\$197,506	\$20,049,128	75.16	

*Amended from original agreement.

**FY 2012 Grant Summary Report
Grants Approved by Commissioners Court**

The following is a list of grants that have been received by Travis County since October 1, 2011

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
24	Drug Diversion Court	9/01/2011-8/31/2012	\$132,702	\$0	\$0	\$0	\$132,702	1.00	10/4/2011
24	Travis County Veteran's Court	9/01/2011-8/31/2012	\$155,000	\$0	\$0	\$0	\$155,000	2.00	10/4/2011
22	Family Drug Treatment Court	9/01/2011-8/31/2012	\$119,185	\$0	\$0	\$0	\$119,185	1.00	10/4/2011
39	DWI Court	9/01/2011-8/31/2012	\$231,620	\$0	\$0	\$0	\$231,620	4.00	10/4/2011
49	Low-Income Repair Assistance, Retrofit, and Accelerated Vehicle Retirement Program (LIRAP) Local Initiatives Projects*	5/06/2008-8/31/2013	\$1,650,140	\$0	\$0	\$155,101	\$1,805,241	-	10/4/2011
45	Travis County Psychology Internship Program	9/01/2011-8/31/2016	\$464,733	\$99,779	\$0	\$0	\$564,512	-	10/11/2011
58	Comprehensive Energy Assistance Program*	1/01/2011-12/31/2011	\$5,519,883	\$0	\$0	\$0	\$5,519,883	-	10/18/2011
37	Austin/Travis County Human Trafficking LE Task Force*	1/01/2011-9/30/2012	\$15,000	\$0	\$0	\$0	\$15,000	-	10/18/2011
24	Drug Diversion Court*	9/01/2010-8/31/2011	\$188,422	\$0	\$19,132	\$0	\$207,554	1.00	10/18/2011
37	2012 Target & Blue Law Enforcement Grant	10/1/2011-9/30/2012	\$500	\$0	\$0	\$0	\$500	-	10/25/2011
45	Juvenile Services Solicitation for the Front End Therapeutic Services Program	9/1/2011-8/31/2012	\$21,000	\$0	\$0	\$0	\$21,000	-	10/25/2011
45	Travis County Eagle Resource Project	9/1/2011-8/31/2012	\$39,907	\$0	\$0	\$0	\$39,907	-	10/25/2011
58	Travis County Family Drug Treatment Court - Children's Continuum	10/1/2011 - 9/30/2014	\$550,000	\$0	\$28,012	\$155,321	\$733,333	4.00	11/1/2011
47	Emergency Management Performance Grant	10/1/2010-3/31/2012	\$78,753	\$78,753	\$0	\$0	\$157,506	3.00	11/8/2011
37	State Criminal Alien Assistance Program (SCAAP)	7/1/2009-6/30/2010	\$683,501	\$0	\$0	\$0	\$683,501	-	11/22/2011

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
58	Comprehensive Energy Assistance Program*	1/1/2011-12/31/2011	\$5,519,883	\$0	\$0	\$0	\$5,519,883	-	11/22/2011
47	Urban Area Security Initiative*	8/1/2010-13/31/2012	\$250,000	\$0	\$0	\$0	\$250,000	1.00	11/22/2011
45	Leadership Academy Dual Diagnosis Unit-Residential Substance Abuse Treatment Program	10/1/2011-9/30/2012	\$142,535	\$47,512	\$0	\$0	\$190,047	1.82	11/29/2011
58	Seniors and Volunteers for Childhood Immunization (SVCI)	9/1/2011-8/31/2012	\$8,846	\$0	\$0	\$0	\$8,846	0.20	11/29/2011
58	Coming of Age (DADS)	9/1/2011-8/31/2012	\$24,484	\$24,484	\$0	\$0	\$48,968	-	11/29/2011
58	Coming of Age (CNCS)*	10/1/2010-3/31/2012	\$75,743	\$22,723			\$98,466	0.59	11/29/2011
58	Emergency Food and Shelter Program, Phase 30	1/1/2012-12/31/2012	\$100,000	\$0	\$0	\$0	\$100,000	-	12/6/2011
34	Bulletproof Vest Partnership - CN4	4/1/2011-9/30/2012	\$493	\$493	\$0	\$0	\$986	-	12/13/2011
42	Drug Diversion Court*	09/01/2011-08/31/2012	\$132,702	\$0	\$4,605	\$2,602	\$139,909	1.00	1/3/2012
58	DOE Weatherization Assistance Program	04/01/2011-03/31/2012	\$212,612	\$0	\$0	\$0	\$212,612	-	1/10/2012
49	Low-Income Repair Assistance, Retrofit, and Accelerated Vehicle Retirement Program (LIRAP)	1/24/2012-8/31/2013	\$175,000	\$0	\$0	\$0	\$175,000	-	1/17/2012
37	Travis County Sheriff's Office Response Equipment	12/01/2011-5/31/2012	\$100,000	\$0	\$0	\$0	\$100,000	-	1/31/2012
24	Formula Grant - Indigent Defense Grants Program	10/01/2011-9/30/2012	\$441,998	\$0	\$0	\$0	\$441,998	-	1/31/2012
23	Texas Commission on Environmental Quality Intergovernmental Cooperative Reimbursement Agreement with Travis County*	11/19/2012-8/31/2012	\$590,797	\$0	\$0	\$0	\$590,797	2.00	1/31/2012
59	Capital Area Trauma Advisory Council	5/1/2011-8/31/2012	\$5,888	\$0	\$0	\$0	\$5,888	-	2/7/2012
58	ARRA WAP Weatherization Assistance Program*	09/01/2009-02/28/2012	\$7,622,699	\$0	\$0	\$0	\$7,622,699	3.00	2/21/2012

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
40	OVW FY2010 Safe Havens: Supervised Visitation and Safe Exchange Grant Program*	10/01/2010 09/30/2013	\$400,000	\$0	\$0	\$0	\$400,000	-	2/28/2012
37	TxDOT Impaired Driving Mobilization Grant	03/07/12 09/30/12	\$18,102	\$6,100	\$0	\$0	\$24,202	-	3/13/2012
37	2009 COPS LE Technology Grant*	03/11/12 09/10/12	\$300,000	\$0	\$0	\$0	\$300,000	-	3/13/2012
49	LIRAP Local Initiative Projects (LIP)*	05/06/08 08/31/13	\$1,688,163	\$0	\$0	\$0	\$1,688,163	-	3/20/2012
17	Ransom and Sarah Williams Farmstead Educational Outreach Project	10/1/2011- 9/30/2013	\$7,500	\$0	\$7,500	\$0	\$15,000	-	3/27/2012
58	Coming of Age (CNCS)	4/1/2012- 3/31/2013	\$50,495	\$321,591	\$0	\$0	\$372,086	6.80	3/27/2012
42	Drug Diversion Court*	09/01/2011- 08/31/2012	\$132,702	\$0	\$7,930	\$0	\$140,632	1.00	4/3/2012
58	Share the Warmth	04/01/12 09/30/12	\$24,500	\$0	\$0	\$0	\$24,500	-	4/24/2012
21	Electronic Disposition Reporting	04/15/2012 08/31/12	\$34,939	\$0	\$0	\$0	\$34,939	-	5/8/2012
31	Full Services Community Schools - East Austin Children's Promise	02/01/2011 09/30/2011	\$7,215	\$0	\$0	\$7,215	\$14,430	0.20	5/8/2012
31	Full Services Community Schools - East Austin Children's Promise*	10/01/2011 09/30/2012	\$10,000	\$0	\$0	\$7,215	\$17,215	0.20	5/8/2012
58	AmeriCorps*	8/1/2011 - 7/31/2012	\$298,922	\$236,045	\$0	\$183,061	\$718,028	26.5	6/5/2012
149	Onion Creek Greenway Phase 1 Urban Outdoor Grant*	10/02/09 - 07/15/2013	\$1,000,000	\$0	\$1,000,000	\$0	\$2,000,000	0	6/26/2012

*Amended from original agreement.

\$29,226,564 \$837,480 \$1,067,179 \$510,515 \$31,641,738 60.31

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FY 2012 Grants Summary Report

Permission to Continue

Dept	Name of Grant	Grant Term per Application	Amount requested for PTC			Filled FTEs	PTC Expiration Date	Cm. Ct. PTC Approval Date	Cm. Ct. Contract Approval Date	Has the General Fund been Reimbursed?
			Personnel Cost	Operating Transfer	Total Request					
58	Comprehensive Energy Assistance Program	1/1/2012-12/31/2012	\$29,196	\$29,196	\$58,392	4.00	3/31/2012	12/27/2011	N/A	No
58	Comprehensive Energy Assistance Program*	1/1/2012-12/31/2012	\$0	\$0	\$175,000	0.00	3/31/2012	12/27/2011	N/A	No
58	Casey Family Programs Community and Family Reintegration Project	1/1/2012-12/31/2012	\$15,196	\$15,196	\$30,392	1.00	3/31/2012	12/27/2011	N/A	No
58	Casey Family Programs Community and Family Reintegration Project	1/1/2012-12/31/2012	\$29,196	\$29,196	\$58,392	1.00	6/30/2012	3/20/2012	N/A	No
58	Comprehensive Energy Assistance Program	1/1/2012-12/31/2012	\$29,196	\$29,196	\$58,392	4.00	5/31/2012	3/27/2012	N/A	No
58	Comprehensive Energy Assistance Program	1/1/2012-12/31/2012	\$29,196	\$29,196	\$58,392	4.00	8/31/2012	6/5/2012	N/A	No
158	Casey Family Programs Community and Family Reintegration Project	1/1/2012-12/31/2012	\$15,862	\$0	\$15,862	1.00	9/30/2012	6/26/2012	N/A	No
Totals			\$147,842	\$131,980	\$454,822	15.00				

*This portion of the request is not a typical permission to continue and will temporarily use General Fund resources for grant program operating expenses. Expenses will be made in the General Fund and reclassified against the grant once funds are available.

TRAVIS COUNTY FY 09 - FY 14 PLANNING TOOL FOR AMERICAN RECOVERY AND REINVESTMENT ACT (ARRA) AND LARGE MULTI-YEAR GRANT CONTRACTS

The potential impact in future years to the County is shown for planning purposes only. County funding determinations will be made annually by the Commissioners Court based on the availability funding and progress of the program. ARRA Grants are highlighted in bold.

Future year amounts are estimated if not known and impact amounts may be reduced if additional Non-County funding is identified. Amounts shown in a particular year may not represent the actual grant term allocation since terms may overlap the County's Fiscal Year.

Grant Contracts approved by Commissioners Court		FY 09		FY 10		FY 11		FY 12		FY 13		FY 14	
Dept	Grant Title	Grant Award	Add. County Impact	Grant Award	Add. County Impact	Grant Award	Add. County Impact	Grant Award	Add. County Impact	Grant Award	Add. County Impact	Grant Award	Add. County Impact
Criminal Justice Planning	Travis County Mental Public Defenders Office. To establish the nation's first stand alone Mental Health Public Defenders Office. Full impact in FY 12 when grant is no longer available.	\$ 375,000	\$ 250,000	\$ 250,000	\$ 375,000	\$ 125,000	\$ 500,000	\$ -	\$ 625,000	\$ -	\$ 625,000		\$ 625,000
Criminal Justice Planning	Office of Parental Representation. County impact is intended to be offset by reductions to Civil Indigent Attorney Fees. Full impact in FY 12 when grant is no longer available. Impact amounts will be updated to take into account internal reallocations and any potential costs/savings to indigent attorneys fees that are centrally budgeted.	\$ 300,000	\$ 307,743	\$ 100,000	\$ 102,360	\$ 50,000	\$ 152,360	\$ -	\$ 152,360	\$ -	\$ 152,360	\$ -	\$ 152,360
Criminal Justice Planning	Office of Child Representation. County impact is intended to be offset by reductions to Civil Indigent Attorney Fees. FY 11 is last year of grant. Impact amounts will be updated to take into account internal reallocations and any potential costs/savings to indigent attorneys fees that are centrally budgeted.	\$ 300,000	\$ 301,812	\$ 100,000	\$ 102,358	\$ 50,000	\$ 152,359	\$ -	\$ 152,359	\$ -	\$ 152,359	\$ -	\$ 152,359
Criminal Justice Planning	Travis County Information Management Strategy for Criminal Justice (ARRA). Includes technology funding for (Constables, Records Management, Adult Probation, Juvenile Probation, Court Administration, County Attorney's Office, District Attorney's Office and Manor Police Department).	\$ -	\$ -	\$ 487,359	\$ -	\$ -	\$ 26,432	\$ -	\$ 26,432	\$ -	\$ 26,432		\$ 26,432
Facilities Management	Energy Efficiency and Conservation Block Grant (ARRA). For Retrofit of the Travis County Executive Office Building HVAC System. One-time grant and includes a \$1.2 million County contribution in FY 10 to complete project.		\$ -	\$ 2,207,900	\$ 1,292,000		\$ -		\$ -		\$ -		\$ -
Travis County Sheriff's Office	2009 Byrne Justice Assistance Grant (ARRA). One-time grant for one-time capital purchases. Does not require a County match or program to continue after grant term ends on 9/30/12.	\$ -	\$ -	\$ 123,750	\$ -	\$ 165,000	\$ -	\$ 165,000	\$ -	\$ -	\$ -	\$ -	\$ -
Travis County Sheriff's Office	Travis County Sheriff's Office Response Equipment (ARRA) - One-time funds	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 100,000	\$ -	\$ -	\$ -
Travis County Sheriff's Office/County Attorney's Office	Recovery Act - STOP Violence Against Women Act. TC Expedited Victims Restoration Grant (ARRA). One-time ARRA funding for laptops for TC SO and one-time funding for a Victim Counselor, laptop computer, and operating expenses for the County Attorney's Office. Grant ends March 2011, but for simplification purposes the award is shown fully in 2010. No County match or commitment after grant ends.	\$ -	\$ -	\$ 64,599	\$ -		\$ -		\$ -		\$ -		\$ -

Community Supervision and Corrections	Recovery Act Combating Criminal Narcotics Activity Stemming from the Southern Border of the US: Enhancing Southern Border Jails, Community Corrections and Detention Operations. (ARRA) Grant will supplement department's state funding to help keep all current probation officer positions. This two year funding goes to the State and there is no County obligation or impact. Full amount of grant is believed to be spent by FY 11.	\$ -	\$ -	\$ 143,750	\$ -	\$ 143,750	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
District Attorney	Interlocal Agreement for the Austin/Travis County Family Violence Protection Team. Includes funding for the District Attorney's Office, County Attorney's Office, Travis County Sheriff's Office, and Constable Pct 5. Grant is coordinated by the City of Austin. It is possible that the responsibility to apply for the Grant may fall to the County for FY 11 and beyond.	\$ 342,793	\$ -	\$ 342,793	\$ -	\$ 342,793	\$ -	\$ 342,793	\$ -	\$ 342,793	\$ -	\$ 342,793	\$ -
Transportation and Natural Resources	Local Transportation Project - Advanced Funding Agreement (ARRA). ARRA funding to upgrade 4 roads by milling and overlaying roadway. Grant is a one-time grant with the potential for estimated \$13,741 contribution from the Road and Bridge Fund.	\$ -	\$ -	\$ 687,047	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health and Human Services	2009 Phase 27 ARRA Emergency Food and Shelter Program. The grant is a one-year one-time grant for emergency utility assistance that does not require a County match or program to continue after termination.	\$ 41,666	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health and Human Services	Americorps. Grant match is handled internally within the existing budget of the Texas AgriLife Extension Service. Assumes grant will continue each year.	\$ 288,139	\$ -	\$ 298,297	\$ -	\$ 298,297	\$ -	\$ 298,297	\$ -	\$ 298,297	\$ -	\$ 281,297	\$ -
Health and Human Services	Parenting in Recovery. FY 09 is Year Two of a Potential Five Year Grant. The full impact will occur in FY 13 when grant funding is no longer available.	\$ 500,000	\$ 77,726	\$ 500,000	\$ 80,000	\$ 500,000	\$ 80,000	\$ 500,000	\$ 80,000	\$ -	\$ 580,000	\$ -	\$ 580,000
Health and Human Services	ARRA Texas Weatherization Assistance Program. Provide weatherization services to low income households		\$ -	\$ 2,311,350	TBD	\$ 5,311,349	TBD		\$ -		\$ -		\$ -
Health and Human Services	Community Development Block Grant ARRA (CDBG-R) Funds to be used for approx 39 water connections for Plainview Estates.	\$ 90,000	\$ -	\$ 136,300	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Health and Human Services	Community Development Block Grant (CDBG). Impact amounts are based on the amounts added for staff added in HHS and County Auditor's Office to support the grant. The Auditor's staff person also supports other large federal grants, but is only listed here for simplification. Actual amounts may vary by year. Assumes grant will continue each year.	\$ 833,133	\$ 223,908	\$ 866,380	\$ 223,908	\$ 866,380	\$ 223,908	\$ 866,380	\$ 223,908	\$ 866,380	\$ 223,908	\$ 866,390	\$ 223,908
Health and Human Services	Community Putting Prevention to Work (Tobacco Free Worksite Policy). Interlocal with the City of Austin to receive ARRA funds to development a tobacco free worksite policy for County facilities. Includes 1.5 FTE to support program. In addition, there are existing resources provided by the State that are available through the employee clinic to help employee to quit tobacco use. Ends Feb 2012.	\$ -		\$ -	\$ -	\$ 100,000	\$ -	\$ 100,000	\$ -	\$ -	\$ -	\$ -	\$ -
Totals		\$ 3,070,731	\$ 1,161,189	\$ 8,619,525	\$ 2,175,626	\$ 7,952,569	\$ 1,135,059	\$ 2,272,470	\$ 1,260,059	\$ 1,607,470	\$ 1,760,059	\$ 1,490,480	\$ 1,760,059

County impact includes the grant match amount that is not internally funded or costs that required a budget increase and the amount that may be required by the County upon termination of the grant. This amount does not include all costs related to the administration of the grant that are incurred by the County. Existing grants with approved contracts for the current year with pending applications for the following year are shown only on the contracts sheet to avoid duplication.

GRANT SUMMARY SHEET

Check One:	Application Approval: <input checked="" type="checkbox"/>	Permission to Continue: <input type="checkbox"/>
	Contract Approval: <input type="checkbox"/>	Status Report: <input type="checkbox"/>
Check One:	Original: <input checked="" type="checkbox"/>	Amendment: <input type="checkbox"/>
Check One:	New Grant: <input checked="" type="checkbox"/>	Continuation Grant: <input type="checkbox"/>
Department/Division:	Travis County Criminal Courts	
Contact Person/Title:	Debra Hale, Director of Court Management	
Phone Number:	512-854-9224	

Grant Title:	Indigent Defense System Evaluation Project				
Grant Period:	From:	07/01/12	To:	03/31/14	
Fund Source:	Federal: <input type="checkbox"/>	State: <input checked="" type="checkbox"/>	Local: <input type="checkbox"/>		
Grantor:	Office of the Governor, Criminal Justice Division				
Will County provide grants funds to a subrecipient?			Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Are the grant funds pass-through another agency? If yes list originating agency below			Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Originating Grantor:	OOG-CJD				

Budget Categories	Grant Funds	County Cost Share	County Contribution	In-Kind	TOTAL
Personnel:	\$198,511	0	0	0	\$198,511
Operating:	\$27,290	0	0	0	\$27,290
Capital Equipment:	0	0	0	0	\$0
Indirect Costs:	\$4,517	0	0	0	\$4,517
Total:	\$230,318	\$0	\$0	\$0	\$230,318
FTEs:	1.00	0.00	0.00	0.00	1.00

Permission to Continue Information					
Funding Source (Account number)	Personnel Cost	Operating Transfer	Estimated Total	Filled FTE	PTC Expiration Date
	0	0	\$0	0.00	

Department	Review	Staff Initials	Comments
County Auditor	<input type="checkbox"/>	RP	
County Attorney	<input type="checkbox"/>	JC	

Performance Measures Applicable Depart. Measures	Projected FY 12 Measure	Progress To Date:				Projected FY 13 Measure
		12/31/11	3/31/12	6/30/12	9/30/12	
# of misdemeanor cases evaluated for case outcome, access to attorney, and ability to post bond.	N/A	N/A	N/A	N/A	N/A	36,777 Proj. misd. dispositions for FY13
# of felony cases evaluated for case outcome, access to attorney, and ability to post bond.	N/A	N/A	N/A	N/A	N/A	11,007 Proj. felony dispositions for FY13
Measures For Grant						
Participate as a pilot site with the National Legal Aid and Defense Association/North Carolina Office of Indigent Defense Services to collect and analyze indigent defense data to develop performance measures for indigent defense systems.	N/A	N/A	N/A	N/A	N/A	47,784 Proj. felony and misd dispositions to be reviewed across 3 key areas

PBO Recommendation:

This is a new grant opportunity for the Criminal Courts to be part of a pilot program with the National Legal Aid and Defender Association/North Carolina Office of Indigent Defense Services to evaluate the indigent defense system in Travis County.

The grant provides personnel and operating funds for one Business Analyst III position from July 1 2012 through March 31, 2014.

There are no match requirements or commitment to continue the program after the grant expires. PBO recommends approval.

1. Brief Narrative - Summary of Grant: What is the goal of the program? How does the grant fit into the current activities of the department? Is the grant starting a new program, or is it enhancing an existing program?

The Travis County Criminal Courts have been selected as a pilot site to work with the National Legal Aid and Defender Association/North Carolina Office of Indigent Defense Services to evaluate our Indigent Defense System. The project will encompass evaluating our Indigent Defense System in three key areas: case outcomes, access to attorney, and ability to post bond. Part of the project will be to develop a tool kit for other jurisdictions on how to set-up a way to effectively evaluate indigent defense outcomes and criminal justice outcomes on a regular basis. The purpose of the project is not to critique our Indigent Defense System, but to develop performance measures and use evidence-based approaches to enhance system performance. Participation in this evaluation project will require an FTE researcher who will be dedicated to analyzing Travis County data and working with the other sites in the nation participating in this project. The Governor's Office Criminal Justice Division is providing Travis County the opportunity to apply for a discretionary grant in order to fund the FTE to conduct research for the project period (7/01/12 – 3/31/14) as well as necessary software and hardware for the project.

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Agency Name: Travis County
Grant/App: 2636801 **Start Date:** 7/1/2012 **End Date:** 3/31/2014

Project Title: Indigent Defense System Evaluation Project
Status: Application Pending Submission

Profile Information

Applicant Agency Name: Travis County
Project Title: Indigent Defense System Evaluation Project
Division or Unit to Administer the Project: Criminal Courts
Address Line 1: 509 W. 11th Street, Room 2.700
Address Line 2:
City/State/Zip: Austin Texas 78701-1748
Start Date: 7/1/2012
End Date: 3/31/2014

Regional Council of Governments(COG) within the Project's Impact Area: Capital Area Council of Governments
Headquarter County: Travis
Counties within Project's Impact Area: Travis

Grant Officials:

Authorized Official
User Name: Samuel Biscoe
Email: sam.biscoe@co.travis.tx.us
Address 1: Post Office Box 1748
Address 1:
City: Austin, Texas 78767
Phone: 512-854-9555 Other Phone:
Fax: 512-854-9535
Title: The Honorable
Salutation: Judge

Project Director

User Name: Debra Hale
Email: debra.hale@co.travis.tx.us
Address 1: 509 W. 11th Street, Room 2.700
Address 1:
City: Austin, Texas 78701
Phone: 512-854-9432 Other Phone: 512-854-9244
Fax: 512-854-4464
Title: Ms.
Salutation: Ms.

Financial Official

User Name: Susan Spataro
Email: susan.spataro@co.travis.tx.us
Address 1: P.O. Box 1748
Address 1:
City: Austin, Texas 78767
Phone: 512-854-9125 Other Phone:
Fax: 512-854-6640
Title: Ms.
Salutation: Ms.

Grant Writer

User Name: Tonya Watson
Email: tonya.watson@co.travis.tx.us
Address 1: 509 W. 11th Street, Room 1.300
Address 1: Criminal Justice Center
City: Austin, Texas 78701
Phone: 512-854-4726 Other Phone: 512-854-4898
Fax: 512-854-4464

Title: Ms.

Salutation: Ms.

You are logged in as **User Name:** debrahale

[[Print This Page](#)]

Agency Name: Travis County

Grant/App: 2636801 **Start Date:** 7/1/2012 **End Date:** 3/31/2014

Project Title: Indigent Defense System Evaluation Project

Status: Application Pending Submission

Narrative Information

Primary Mission and Purpose

The State Criminal Justice Planning (421) Fund supports programs designed to reduce crime and improve the criminal or juvenile justice system.

Funding Levels

The anticipated funding levels for the Fund 421 program are as follows:

- Minimum Award - \$5,000
- Maximum Award - None
- Match Required - None

For more information regarding grantee match, please click on the **Budget** tab, and then click on the **Source of Match** tab in eGrants.

Note: If you voluntarily include matching funds that exceed the minimum match requirement, you will be held to that amount throughout the grant period.

Juvenile Justice Program Requirements

Preferences - Preference will be given to those applicants that demonstrate cost effective programs focused on proven or promising approaches to services provision.

Juvenile Justice Board Priorities - Juvenile justice projects or projects serving delinquent or at-risk youth will address at least one of the following priorities developed by the Governor's Juvenile Justice Advisory Board to be eligible for funding.

Diversion - Diversion - Programs to divert juveniles from entering the juvenile justice system.

Job Training - Projects to enhance the employability of juveniles or prepare them for future employment. Such programs may include job readiness training, apprenticeships, and job referrals.

Professional Therapy and Counseling/Mental Health - Services include, but are not limited to, the development and/or enhancement of diagnostic, treatment, and prevention instruments; psychological and psychiatric evaluations; counseling services; and/or family support services.

School Based Delinquency Prevention - Education programs and/or related services to prevent truancy, suspension, and expulsion. School safety programs may include support for school resource officers and law-related education.

Substance Abuse - Programs, research, or other initiatives to address the use and abuse of illegal and other prescription and nonprescription drugs and the use and abuse of alcohol. Programs include control, prevention, and treatment.

Training and Technology/Juvenile Justice System Improvement (for Statewide Projects Only) - Programs, research, and other initiatives to examine issues or improve practices, policies, or procedures on a system-wide basis (e.g., examining problems affecting decisions from arrest to disposition and detention to corrections).

Disproportionate Minority Contact (DMC) (for Statewide and OOG-identified County Organizations Only) - The purpose of this funding is to assist designated jurisdictions and agencies in developing and implementing strategies to reduce racial disparities at various contact points in the juvenile justice system. Section 223(a) (22) of the JJDP Act provides that the State shall: "[Address] juvenile delinquency prevention efforts and system improvement efforts designed to reduce, without establishing or requiring numerical standards or quotas, the disproportionate number of juvenile members of minority groups who come into contact with the juvenile justice system."

Victim Assistance Program Requirements

Preferences - Preference will be given to applicants that promote comprehensive victim restoration while incorporating an emphasis on cultural competency in underserved populations. Applicants are also encouraged to streamline administrative and reporting processes by consolidating grant requests whenever possible in lieu of submitting multiple applications.

Culturally Competent Victim Restoration - Applicants agree to promote collaboration and coordination among local service systems that involve multiple disciplines and Preference will be given to applicants that promote comprehensive victim restoration while incorporating an emphasis on cultural competency in underserved populations. Applicants are also encouraged to streamline administrative and reporting processes by consolidating grant requests whenever possible in lieu of submitting multiple applications.

N/A

Criminal Justice Program Requirements

Preferences – Preference will be given to applicants that support law enforcement activities, prosecution, and improvements to technology, and reentry of offenders into the community.

Eligible Activities - Applicant assures that its proposed project meets at least one of the following areas to be eligible for funding:

- **Law Enforcement** – Supports state and local law enforcement agencies that address violent crime or statistically supported major crime initiatives at the local level.
- **Prosecution and Court** – Programs that improve the prosecution of serious and violent crimes, including those that reduce the time from arrest to disposition.
- **Technology** – Programs that implement or expand a law enforcement agency's ability to report and analyze crime. Applicant assures that any criminal intelligence databases developed under this program will comply with 28 CFR Part 23.
- **Corrections and Community Corrections** – Programs that reintegrate adults and juveniles into the community.
- **Drug Treatment** – Programs that target substance abuse treatment for juveniles or adults who have been court ordered to participate, including drug courts and projects that serve as alternatives to incarceration.

Program Income - Applicant agrees to comply with all federal and state rules and regulations for program income and agrees to report all program income that is generated as a result of the project's activities. Applicant agrees to report program income to CJD through a formal grant adjustment and to secure CJD approval prior to use of the program income. Applicant agrees to use program income for allowable costs and agrees to expend program income immediately after CJD's approval of a grant adjustment and prior to requesting reimbursement of CJD funds.

- **Deduction Method** – Program income shall be deducted from total allowable costs to determine the net allowable costs. Program income shall be used for current costs unless CJD authorizes otherwise. Program income which the grantee did not anticipate at the time of the award shall be used to reduce the CJD award and grantee match rather than to increase the funds committed to the project.
- **Asset Seizures and Forfeitures** – Program income from asset seizures and forfeitures is considered earned when the property has been adjudicated to the benefit of the plaintiff (e.g., law enforcement entity).

Assets Seizures and Forfeitures

Applicant agrees to comply with the following:

1. Applicant will maintain on file and provide a copy of the asset sharing agreement between the agency and any other criminal justice agency outlining the distribution of assets forfeited in the course of grant-related activities. The asset agreement must clearly describe the distribution of forfeited assets within the grantee agency in regards to grant-funded and non-grant funded personnel participating in grant-related activities.
2. Applicant shall maintain a logbook of all assets seized in the course of grant-related activities. The logbook shall record the assets seized, the date and time of the asset seizure, the case number of the incident involving the asset seizure, the name of the grantee agency employee(s) who were involved in the seizure of the assets, the date seized assets are forfeited, the date forfeited assets are liquidated if not cash, and the final disposition of cash from cash forfeitures or property sales to the grantee agency.

Uniform Crime Reporting - Applicant assures that if it operates a law enforcement agency, the agency is current and has been current in reporting required Part 1 violent crime data for three previous years to the Texas Department of Public Safety and will continue reporting throughout the grant period.

Criminal History Reporting - Applicant assures that they are currently reporting and will maintain timely reporting of all information required under the Texas Code of Criminal Procedure, Chapter 60.

Constitutional Compliance - Applicant assures that they will engage in no activity that violates Constitutional law including profiling based upon race.

Information Systems - Applicant assures that any new criminal justice information systems will comply with data sharing standards for the Global Justice XML Data Model and the National Information Exchange Model.

Drug Court Program Requirements

Preferences – Preference will be given to:

1. mandated drug courts under Texas Health and Safety Code, §469.006; and
2. non-mandated drug courts operating in counties with a population of less than 200,000.

Ten Essential Characteristics

Drug Court programs that provide court-supervised substance abuse treatment as an alternative to traditional criminal sanctions, as defined in Chapter 469 of the Texas Health and Safety Code must incorporate the following ten (10) essential characteristics of drug courts noted below and codified in Texas Health and Safety Code §469.001 to be eligible for funding.

Describe in detail how your program meets each of the ten essential characteristics of a drug court.

Integration of Services – The integration between alcohol and other drug treatment services in the processing of cases in the judicial system.

N/A

Non-Adversarial Approach – The use of a non-adversarial approach involving prosecutors and defense attorneys to promote public safety and to protect the due process rights of program participants.

N/A

Prompt Placement – Early identification and prompt placement of eligible participants in the program.

N/A

Access – Access to a continuum of alcohol, drug, and other related treatment and rehabilitative services.

N/A

Abstinence Monitoring – Monitoring of abstinence through weekly alcohol and other drug testing.

N/A

Compliance Strategy – A coordinated strategy to govern program responses to participants' compliance.

N/A

Judicial Interaction – Ongoing judicial interaction with program participants.

N/A

Evaluation – Monitoring and evaluation of program goals and effectiveness.

N/A

Education – Continuing interdisciplinary education to promote effective program planning, implementation, and operations.

N/A

Partnerships – Development of partnerships with public agencies and community organizations.

N/A

General Approaches

- **Pre-adjudication** - The defendant is diverted to the treatment program in lieu of prosecution before charges are filed or before final case.
- **Post-adjudication** - The drug offender begins the drug court program after entering a plea of guilty or nolo contendere or having been found guilty, often as a condition of probation.
- **Reentry** - Offenders completing sentences of incarceration or lengthy terms of residential treatment are ordered into the treatment program to facilitate their transition and reintegration into society.
- **Civil** - Participants enter the drug court program in relation to suits affecting the parent-child relationship, including child welfare / CPS cases, child support cases, or other civil matters.

Select the **general approach(es)** that best fit this drug court.

Select **all** that apply:

- Pre-adjudication
- Post-adjudication
- Reentry
- Civil
- N/A

Observation – The drug court team (judge, prosecutor, defense counsel, treatment provider, supervision officer, court coordinator, etc.) of a new program must observe at least one drug court staffing session and hearing, in Texas, prior to program implementation.

Policies and Procedures – The drug court will develop and maintain written policies and procedures for the operation of the program.

Information Sharing – The applicant will submit a copy of any project evaluations, evaluation plans, recidivism studies, or related reports that are completed during the grant period to CJD.

Jurisdiction - Provide the name of the court administering the Drug Court program (e.g., 999th Judicial District Court, Somewhere County Criminal Court, or City of Somewhere Municipal Court). If this has not been decided enter 'To Be Determined', or enter 'N/A' if this item does not apply.

N/A

Drug Court Date - If the Court has commenced operations, provide the date that the Court was established.

Enter the date [mm/dd/yyyy]:

7/1/2012

Drug Court Type

- **Adult** - Programs serving adults (either pre-adjudication, post-adjudication, or reentry).
- **Veterans** - Programs serving veterans or current members of the United States armed forces, including members of the Reserves, National Guard or State Guard.
- **Family** - Programs serving parents who enter the drug court in relation to suits affecting the parent-child relationship, including child welfare / CPS cases, child support cases, or other civil matters.
- **Juvenile** - Programs serving juveniles (either pre-adjudication, post-adjudication, or reentry).

Select the type of drug court that will be operated:

- Adult
- Veterans
- Family
- Juvenile
- N/A

Will the drug court accept **DWI offenders**?

Select the appropriate response:

- Yes
- No
- N/A

Presiding Judge - The presiding judge of a drug court funded through this program must be an active judge holding elective office, an associate judge or magistrate assigned to preside over drug court, or a retired judge available as a sitting judge.

Enter the name, phone number, and email address of the **Presiding Judge** for the Drug Court. If this has not been decided enter 'To Be Determined', or enter 'N/A' if this item does not apply. Applicant must notify CJD with this information when a judge is appointed.

N/A

Enter the name, phone number and email address of the **Drug Court Coordinator**. If this has not been decided enter 'To Be Determined', or enter 'N/A' if this item does not apply.

N/A

Federal Funding - Applicant agrees to apply for federal grant funding from the Bureau of Justice Assistance to support operations of the court. Applicant also agrees to notify CJD immediately of any additional state or federal grants or other funds that may become available to support operation of the court. At that time, CJD may deobligate a portion of the funds awarded under this solicitation.

Has the drug court ever applied for **federal funding**?

Select the appropriate response:

- Yes
- No
- N/A

Has the drug court ever received **federal funding**?

Select the appropriate response:

- Yes
- No
- N/A

If you selected **Yes** above, provide the federal award amount, grant period [mm/dd/yyyy to mm/dd/yyyy], and how the funds were used or will be used if the federal grant period overlaps with the grant period for this solicitation.

Enter the federal funding description:

N/A

TDSHS - CMBHS Registration - Applicant assures that it is currently registered or will register with the Texas Department of State Health Services (TDSHS) - Clinical Management for Behavioral Health Services (CMBHS) database. Information about registration procedures can be accessed [here](#).

Community Planning Participation

Did the applying agency participate in the Local or Regional community planning process?

Select the appropriate response:

- Yes
- No
- N/A

Civil Rights Liaison

A civil rights liaison who will serve as the grantee's civil rights point of contact and who will be responsible for ensuring that the grantee meets all applicable civil rights requirements must be designated. The designee will act as the grantee's liaison in civil rights matters with CJD and with the federal Office of Justice Programs.

Enter the Name of the Civil Rights Liaison:

Diane Poirot, Human Resource Director

Enter the Address for the Civil Rights Liaison:
P.O. Box 1748, Austin, Texas, 78767

Enter the Phone Number for the Civil Rights Liaison [(999) 999-9999 x9999]:
512-854-9165

Certification

Each applicant agency will certify to the specific criteria detailed above under **Program Requirements for Juvenile Justice, Victim Assistance, Criminal Justice**, and (if applicable) **Drug Court Program Requirements** to be eligible for funding under the State Criminal Justice (421) Fund Program Solicitations.

I certify to all of the above eligibility requirements.

Problem Statement:

Please provide a detailed account in the Problem Statement section of the existing issues your project will target.

Enter your problem statement:

The Sixth Amendment of the United States Constitution guarantees that "In all criminal prosecutions, the accused shall enjoy the right to...have the assistance of counsel for his defense." In order to ensure that the lack of financial ability to retain counsel does not interfere with the fundamental right to have counsel, various Indigent Defense Systems (IDS) have been implemented throughout the United States. In Texas alone, there are multiple indigent defense models operating in different counties around the state. Some examples of indigent defense models used in Texas counties are: private appointed counsel, contract attorneys, public defenders offices, and managed assigned counsel. Currently, the state of Texas does not have a set of indicators by which to measure the performance of the Indigent Defense Systems. Therefore, it is unknown which indigent defense model is most effective while providing the best outcomes. In order to assist in establishing IDS performance measures, Travis County has been selected as a pilot site in the Indigent Defense Systems evaluation project spearheaded by the National Legal Aid and Defenders Association/North Carolina Office.

Supporting Data:

Provide as much supporting data, to include baseline statistics and the sources of your data, which are pertinent to where the grant project is located and/or targeted. Do not use statewide data for a local problem or national data for a statewide problem.

Enter your supporting data:

According to the Texas Indigent Defense Commission, in State Fiscal Year 2011, the State of Texas spent \$198,364,998 for indigent defense costs. As mentioned above, there is no consistency across the State of Texas with respect to the type of indigent defense model used by the various counties. To date, indigent defense performance measures have not been developed and applied to the various indigent defense models in order to determine which model provides the greatest efficiency and best outcomes for indigent defendants. Travis County uses the private appointed counsel indigent defense model. This involves rotating court appointments to approximately 225 private attorneys according to level of offense and attorney qualifications. In Travis County Fiscal Year 2011, there were 40,561 misdemeanor dispositions and 12,832 felony dispositions in which 46% of misdemeanor cases, and 71% of felony cases received court appointed counsel in Travis County. For the Travis County Fiscal Year 2013, Travis County projects that there will be 36,777 misdemeanor dispositions, and 11,007 felony dispositions for a total of 47,784 dispositions. As part of the Indigent Defense System Evaluation Project, these 47,784 cases will be reviewed and analyzed across three key areas: case outcomes, access to attorney, and ability to post bond.

Community Plan:

For projects that have a local or regional impact target area, provide information regarding the community plan need(s) that your project will address.

Enter your community planning needs:

N/A

Goal Statement:

Provide a brief description of the overall goals and objectives for this project.

Enter a description for the overall goals and objectives:

The overall goal of this project is to participate as a pilot site with the National Legal Aid and Defender Association to develop a selection of Indigent Defense System metrics that will allow Travis County to measure system outcomes and performance. The data collected will also be used to establish a toolkit to support increasing research capacity that will provide other organizations with the tools to advocate for and set up in-house research positions and a data warehouse geared towards analyzing the performance of Indigent Defense Systems in other jurisdictions.

Cooperative Working Agreement (CWA):

When a grantee intends to carry out a grant project through cooperating or participating with one or more outside organizations, the grantee must obtain authorized approval signatures on the cooperative working agreement (CWA) from each participating organization. Grantees must maintain on file a signed copy of all cooperative working agreements, and they must submit to CJD a list of each participating organization and a description of the purpose of each CWA. Cooperative working agreements do not involve an exchange of funds.

For this project, provide the name of the participating organization(s) and a brief description of the purpose(s) for the CWA(s). You should only provide information here that this project's successful operation is contingent on for the named service or participation from the outside organization.

Note: A **Sample CWA** is available [here](#) for your convenience.

Enter your cooperating working agreement(s):
N/A

Continuation Projects:

For continuation projects only, if your current or previous year's project is NOT on schedule in accomplishing the stated objectives, briefly describe the major obstacles preventing your organization from successfully reaching the project objectives as stated within your previous grant application. (Data may be calculated on a pro-rated basis depending on how long the current or previous year's project has been operating.)

Enter your current grant's progress:
This is not a continuation project.

Project Summary:

Briefly summarize the entire application, including the project's problem statement, supporting data, goal, target group, activities, and objectives. Be sure that the summary is easy to understand by a person not familiar with your project and that you are confident and comfortable with the information if it were to be released under a public information request.

Enter your summary statement for this project:

The Travis County Criminal Courts have been selected as a pilot site to work with the National Legal Aid and Defender Association/North Carolina Office of Indigent Defense Services to evaluate our Indigent Defense System. The project will encompass evaluating our Indigent Defense System across three key areas: case outcomes, access to attorney, and ability to post bond. The project will work to develop a tool kit for other jurisdictions on how to set-up a way to effectively evaluate indigent outcomes and criminal justice outcomes on a regular basis.

You are logged in as **User Name:** debrahale

[Print This Page]

Agency Name: Travis County**Grant/App:** 2636801 **Start Date:** 7/1/2012 **End Date:** 3/31/2014**Project Title:** Indigent Defense System Evaluation Project**Status:** Application Pending Submission**Project Activities Information****Juvenile Justice Projects****Juvenile Justice Board Priorities**

Select the Juvenile Justice Priority that best fits your project:

- Diversion
- Job Training
- Professional Therapy and Counseling/Mental Health
- School Based Delinquency Prevention
- Substance Abuse
- Training and Technology/Juvenile Justice System Improvement (for Statewide Projects Only)
- Disproportionate Minority Contact (DMC) (for OOG-identified Counties Only)

Disproportionate Minority Contact (DMC) Projects

For Statewide and OOG-identified County Organizations Only - The purpose of this funding is to assist designated jurisdictions and agencies in developing and implementing strategies to reduce racial disparities at various contact points in the juvenile justice system. Section 223(a)(22) of the JDP Act provides that the State shall: "[Address] juvenile delinquency prevention efforts and system improvement efforts designed to reduce, without establishing or requiring numerical standards or quotas, the disproportionate number of juvenile members of minority groups who come into contact with the juvenile justice system."

Addressing Disproportionate Minority Contact in the Texas Juvenile Justice System

Briefly summarize the project's approach using the framework provided in the "Addressing Disproportionate Minority Contact in the Texas Juvenile Justice System: Causes and Solutions from the Community Perspective" research study conducted by Texas A&M Public Policy Research Institute. This study encourages a multidisciplinary approach targeting five factors:

1. Family/Social Circumstances - Within this broad theme, specific areas to address include broken families, poverty, a lack of role models, and cultural norms that under-value the importance of education in building a positive future for youth.
2. Criminal Justice System - Within this broad category, three specific issues of concern were identified. These include a lack of therapeutic interventions for delinquent youth, inequities experienced by poor and minority youth navigating the juvenile justice system, and a lack of juvenile detention facilities.
3. Special Populations at Increased Risk of DMC - Concern was most often expressed for youth with mental health or behavior disorders and for those who are members of a minority group.
4. School Related Factors - Areas that should be addressed include standardized testing policies, school discipline policies, and issues of communication between schools and families.
5. Need for Supervised Programs - Contributors to the study often identified a lack of supervised community programs as a factor contributing to DMC.

Note: For information regarding the Texas A&M PPRI study, applicants are encouraged to go [here](#).

Provide summary of DMC approach:

N/A

DMC Advisory Board

Please list the names and positions of stakeholders involved in the advisory board.

N/A

Victims Projects

Type of Crime Victim - Select the type(s) of crime victim this project targets and provide the percentage of time dedicated to serving each category of crime victim. You may select more than one type; however, the sum of the percentages may not exceed 100%.

Sexual Assault Percentage (%):

0

Domestic Abuse Percentage (%):

0

Child Abuse Percentage (%):

0

DUI / DWI Crashes Percentage (%):

0

Survivors of Homicide Percentage (%):

0

Assault Percentage (%):

0

Adults Molested as Children Percentage (%):

0

Elder Abuse Percentage (%):

0

Robbery Percentage (%):

0

Stalking Percentage (%):

0

Dating/Acquaintance Violence Percentage (%):

0

Human Trafficking Percentage (%):

0

Drug Court Projects

Does your project have a Steering Committee that helps direct and enhance your court's operations?

Yes

No

N/A

List the members of your project's treatment team and describe their role in supporting the participants, or enter 'N/A' if this item does not apply.

N/A

Provide the average caseload size for a full-time case manager/probation officer assigned to this project, or enter 'N/A' if this item does not apply.

N/A

Provide your project's policy on drug testing participants, or enter 'N/A' if this item does not apply.

N/A

Describe the process you will use to determine your project's effectiveness, or enter 'N/A' if this item does not apply.

N/A

Provide the total cost for operating your project during the previous fiscal year, or enter '0' if this item does not apply. (This should include all salaries, travel, counseling, treatment services, office supplies, etc.)

0

List the sources and amounts of non-CJD funding used to support this project during the previous fiscal year, or enter 'N/A' if this item does not apply. (This may include local or state funds and any other charges to participants.)

N/A

List the treatment resources used for this project (e.g., ATR, TAIP, in-house, etc.), or enter 'N/A' if this item does not apply.

N/A

Provide the total fees collected in your county during the most recently completed fiscal year, in accordance with Chapter 102.0178, Code of Criminal Procedure, for offenses found in Chapter 49, Penal Code (DWI) and Chapter 481, Health and Safety Code (controlled substances), or enter '0' if this item does not apply. Note: The party responsible for collecting court assessed fees in your county may be the treasurer, county clerk, or district clerk.

0

Of the fees collected in your county, provide the amount that was directed to your project, or enter '0' if this item does not apply.

0

Describe how your project used those fees, or enter 'N/A' if this item does not apply.

N/A

Law Enforcement Projects

What is your agency's approved budget for law enforcement operations for the current fiscal year, or enter 'N/A' if this item does not apply?

0

How many commissioned peace officers are funded through your agency's current budget, or enter '0' if this item does not apply?

0

Provide the amount of asset forfeitures awarded to your agency in the previous fiscal year, or enter '0' if this item does not apply.

0

Provide the balance of asset forfeitures on hand as of the date of this application, or enter '0' if this item does not apply.

0

Describe the proposed use of the forfeiture funds or enter 'N/A' if this item does not apply:

N/A

Sources of Financial Support

Please complete the following information on all law enforcement or homeland security grants awarded to your agency during the previous fiscal year, and all applications you have submitted or new awards for the current fiscal year, or enter 'N/A' if this item does not apply.

Each source of funding you select below should include the following information for each grant award; or if your agency did not receive funding from any of the sources listed below, enter 'N/A':

1. name of agency providing funds;
2. grant period;
3. amount of the award (or amount requested);
4. amount expended; and
5. how the funds have been or will be used.

N/A

Does your agency expect to be awarded funds from any of the following sources during the project period of this grant?

Select the appropriate response(s):

- The American Recovery and Reinvestment Act (any source)
- Community Oriented Policing (COPS)
- Weed and Seed Program
- Bureau of Justice Assistance
- Homeland Security Grant Program (HSGP)
- Operation Stonegarden (OPSG)
- Interoperable Emergency Communications Grant Program (IECGP)
- Emergency Operations Center (EOC) Grant Program
- State Criminal Justice Planning (421) Fund
- Governor's Division of Emergency Management (GDEM) or Texas Department of Public Safety
- Texas Automobile Burglary and Theft Prevention Authority (ABTPA)
- Selective Traffic Enforcement Program (STEP)
- Texas Border Sheriff's Coalition (TBSC)
- Other state or federal grant programs
- Private Organization, Private Enterprise, or Non-Government Organization Grant Programs
- Applicant does not expect to receive grant funds from any source to support its law enforcement agency

If you selected any of the boxes above (except for the last box), describe your agency's internal controls and processes that will be used to prevent supplanting of your agency's budgeted funds with grant funds. Example: Timesheets will be tracked to determine allowable charges for each fund source and to ensure that duplicate invoices are not submitted to multiple agencies.

Travis County does not currently have any budget that pays for staff to perform evaluations of its Indigent Defense program. Any financial award received as part of this grant will be placed in a separate fund which will be monitored and tracked to ensure that all expenditures directly support the evaluation of the Indigent Defense program. Additionally, any staff hired under this grant will periodically certify that they are spending 100% of their time on grant-related activities. The separation of duties, of those spending the funds and the staff claiming the expenditures for reimbursement under the grant, will serve as a check and balance that only grant allowable expenditures are claimed for reimbursement. Any future Travis County budget reductions will not impact this grant budget as this budget will only be allowed to be spent on activities related to the evaluation of the Indigent Defense program.

Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
Technology	100.00	Technology improvements that enable the courts to collect and analyze data in order to develop indicators that allow for the effective evaluation of Indigent Defense Systems.

Geographic Area:
Travis County, Texas

Target Audience:
Adults with criminal court dispositions.

Gender:
male and female

Ages:
17 and over

Special Characteristics:
N/A

You are logged in as **User Name:** debrahale

[Print This Page](#)

Agency Name: Travis County
Grant/App: 2636801 **Start Date:** 7/1/2012 **End Date:** 3/31/2014

Project Title: Indigent Defense System Evaluation Project
Status: Application Pending Submission

Measures Information

Progress Reporting Requirements

All programs will be required to report the output and outcome measures for this program to Texas A&M University, Public Policy Research Institute (PPRI).

Objective Output Measures

OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
Number of NEW data systems to be developed.	0	1
Number of existing data systems enhanced with grant funds.	0	1
Number of subscriptions to data sharing systems.	0	3

Custom Objective Output Measures

CUSTOM OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
-----------------------	--------------	--------------

Objective Outcome Measures

OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
Number of personnel with access to improved data / information sharing systems.	0	75
Number of agencies who benefitted from improvements to the new or enhanced data systems.	0	6

Custom Objective Outcome Measures

CUSTOM OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
------------------------	--------------	--------------

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Print This Page

Agency Name: Travis County

Grant/App: 2636801 **Start Date:** 7/1/2012 **End Date:** 3/31/2014

Project Title: Indigent Defense System Evaluation Project

Status: Application Pending Submission

Budget Details Information

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
Indirect Costs	Approved Rate - 2% or Less	2% indirect costs allowable by CJD	\$4,517.00	\$0.00	\$0.00	\$0.00	\$4,517.00	0
Supplies and Direct Operating Expenses	Cellular, Fax, Pager, and/or Office Telephone	Office telephone for Statistical Research Analyst	\$175.00	\$0.00	\$0.00	\$0.00	\$175.00	0
Personnel	Computer Systems / Information Specialist	Manage and analyze large data sets while conducting qualitative and quantitative data analysis using a wide variety of research methodologies and techniques.	\$198,511.00	\$0.00	\$0.00	\$0.00	\$198,511.00	100
Equipment	Laptop System and Accessories	Laptop computer and printer	\$3,145.00	\$0.00	\$0.00	\$0.00	\$3,145.00	1
Supplies and Direct Operating Expenses	Office Equipment and/or Furniture (Valued Under \$1,000)	Desk workstation for Statistical Research Analyst	\$2,000.00	\$0.00	\$0.00	\$0.00	\$2,000.00	0
Supplies and Direct Operating Expenses	Office Supplies (e.g., paper, postage, calculator)	General office supplies for Statistical Research Analyst	\$500.00	\$0.00	\$0.00	\$0.00	\$500.00	0
Travel and Training	Out-of-State Incidentals and/or Mileage	Attend quarterly sessions in Washington DC, Durham, North Carolina, and other test sites.	\$15,260.00	\$0.00	\$0.00	\$0.00	\$15,260.00	0
Equipment	Specialized Computer Software	Statistical Software and MSDN License	\$5,470.00	\$0.00	\$0.00	\$0.00	\$5,470.00	1
Equipment	Stand-Alone Computer Software	MS Office (productivity software)	\$740.00	\$0.00	\$0.00	\$0.00	\$740.00	1

You are logged in as **User Name:** debrahale

Travis County Resolution
Indigent Defense System Project Evaluation Grant
(Grant period 7/01/12 – 3/31/14)

WHEREAS, The Travis County Commissioners Court finds it in the best interest of the citizens of Travis County, that Travis County participate in the Indigent Defense System Evaluation Project.

WHEREAS, The Travis County Commissioners Court agrees that in the event of loss or misuse of the Criminal Justice Division funds, Travis County assures that the funds will be returned to the Criminal Justice Division in full.

WHEREAS, Travis County Commissioners Court designates Samuel T. Biscoe, County Judge, as the grantee's authorized official. The authorized official is given the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency.

NOW THEREFORE, BE IT RESOLVED that the Travis County Commissioners Court approves submission of the grant application for the Indigent Defense Systems Evaluation Project to the Office of the Governor, Criminal Justice Division.

Signed by: _____
County Judge Samuel T. Biscoe

Passed and Approved this _____ (Day) of _____ (Month), _____ (Year)

Grant Application Number:

GRANT SUMMARY SHEET

Check One:	Application Approval: <input checked="" type="checkbox"/>	Permission to Continue: <input type="checkbox"/>
	Contract Approval: <input type="checkbox"/>	Status Report: <input type="checkbox"/>
Check One:	Original: <input checked="" type="checkbox"/>	Amendment: <input type="checkbox"/>
Check One:	New Grant: <input checked="" type="checkbox"/>	Continuation Grant: <input type="checkbox"/>
Department/Division:	Travis County Health and Human Services and Veterans Service	
Contact Person/Title:	John C. Bradshaw, Contract Specialist	
Phone Number:	854-4277	

Grant Title:	Children's Success Initiative (CSI)		
Grant Period:	From: 9/28/12	To: 9/27/13	
Fund Source:	Federal: <input checked="" type="checkbox"/>	State: <input type="checkbox"/>	Local: <input type="checkbox"/>
Grantor:	U.S. Dept. of Health and Human Services, Administration for Children and Families		
Will County provide grants funds to a subrecipient?		Yes: <input checked="" type="checkbox"/>	No: <input type="checkbox"/>
Are the grant funds pass-through another agency? If yes list originating agency below		Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
Originating Grantor:			

Budget Categories	Grant Funds	County Cost Share	County Contribution	In-Kind	TOTAL
Personnel:	410,385	113,995	0	4,345	528,725
Operating:	260,208	0	0		260,208
Capital Equipment:	0	0	0	0	\$0
Indirect Costs:	0	0	0	0	\$0
Total:	670,593	113,995	0	4,345	788,933
FTEs:	9 ¹	6.1 ²		.05 ³	15.15

Permission to Continue Information					
Funding Source (Account number)	Personnel Cost	Operating Transfer	Estimated Total	Filled FTE	PTC Expiration Date
	0	0	\$0	0.00	

Department	Review	Staff Initials	Comments
County Auditor	<input checked="" type="checkbox"/>	JC	
County Attorney	<input checked="" type="checkbox"/>	LW	

¹ The grant will fund 3 FTE's that will be located at Travis County. Six other FTE's will be divided among the grant partners.

² Six staff from the Children FIRST unit in TCHHSVS will provide the majority of the match by spending 100% of their time in support of the CSI program. Two staff members from the Travis County Office of Child Representation will provide 5% of their time in support of the CSI program.

³ A staff member at the Center for Child Protection will provide 5% of her time in support the CSI program.

Performance Measures	Projected FY 13 Measure	Progress To Date:				Projected FY 14 Measure
		12/31/12	3/31/13	6/31/13	9/30/13	

Number of clients receiving substance treatment services (Please note this number reflects County portion of the Substance Abuse Treatment (SAMSO) contract with ATCIC which is 43% based on financial contribution. Due to this population having multiple treatment episodes and SAMSO being a calendar year contract, actual numbers are not available until end of the calendar year. All numbers are projections based on prior years.)	250					250
Number of families involved with child welfare completing service plan goals	90					90
Number of new children entering care	275					275
Measures For Grant ⁴						
Number of parents receiving intensive treatment services	10					13
Outcome Impact Description	Decrease substance abuse; enhance parent nurturing skills and knowledge; increase family economic stability					
Number of parents receiving regular treatment services	60					64
Outcome Impact Description	Decrease substance abuse; enhance parent nurturing skills and knowledge; increase family economic stability					

⁴ The grant does not require specific performance targets. These numbers are included in the project design.

Number of children/youth receiving services	120					141
Outcome Impact Description	Increase bonding and attachment with parent; improve developmental, social, cognitive and emotional functioning; increase school success					
Number of kinship providers receiving services	55					65
Outcome Impact Description	Reduce trauma and increase protective factors					
Outcome Impact Description						

PBO Recommendation:

This grant application is for a new grant program that will expand the services offered to children and families involved in the child welfare system because of substance abuse. This grant, if awarded, will be used by the department to fill in the continuum of supports and services provided to children and families beyond those provided by the Family Drug Treatment Court and the Parenting in Recovery grant.

This grant application is for the first year of a five year program. Over the five year life of the program, the grant would provide \$3,284,713 in federal funds while the County and its partners will provide a match of \$778,414. The majority of the grant match is proposed to be provided by existing Travis County staff. The department has indicated that there is no ongoing requirement placed on the County to provide these additional/expanded services. However, PBO notes that once additional or expanded services are provided using grant funds, the County rarely allows the program to lapse and services revert back to pre-grant levels. This may result in a large increase in funding being requested five years hence.

The funding and match amounts for the first year of the grant program are those listed on the first page of the grant summary sheet and on the federal SF-424. That is the format required by the grantor.

In addition to the forms included in this packet that require the County Judge's signature is a Memorandum of Understanding with the Texas Department of Family Protective Services (DFPS) is also required but still being revised. The MOU is required by the grantor to demonstrate DFPS' commitment to providing certain services and contributing resources to this proposed grant project. Meeting this commitment is contingent upon receipt of the U.S. Department of Health and Human Services grant funds via the awarding of an Administration for Children and Families (ACF) Regional Partnership Grant and the negotiation of a mutually agreeable contract between the parties.

A draft of the MOU has been reviewed by the County Attorney's Office, County Auditor's Office, and PBO and shared with TC HHSVS and Texas DFPS. As soon as a final version is prepared, PBO and/or TC HHSVS will submit three originals for signature by the County Judge.

PBO recommends approval of this grant application.

1. Brief Narrative - Summary of Grant: What is the goal of the program? How does the grant fit into the current activities of the department? Is the grant starting a new program, or is it enhancing an existing program?

This grant, known as the Children's Success Initiative (CSI) will augment the efforts of Travis County to build and coordinate a continuum of supports and services for children and families with substance dependence issues involved in the child welfare system. The CSI program has four main goals: 1) early identification and provision of services to children and youth that promotes their well-being; 2) services and supports to parents; 3) development of a coordinated system of supports for families involved in Child Protective Services – Family Based Safety Services (FBSS) with a focus on enhancing the collaboration between FBSS, local community providers and the school systems; and 4) improvement of the quality of the service delivery to children, youth and their families through cross-trainings in areas of trauma, parent education, protective factors, substance abuse and child welfare.

2. Departmental Resource Commitment: What are the long term County funding requirements of the grant?

The grant award is for five years with budgets submitted each year. The grant request for year 1 is \$670,593 with a 15% match requirement of \$118,340. The match remains at 15% in year 2, increases to 20% in years 3 and 4, and increases to 25% in year 5.

County Cost Share: Travis County Health and Human Services and Veterans Service (TCHHSVS) is providing \$104,493 in General Fund money for staff time devoted to the grant program. The Travis County Office of Child Representation (OCR) is providing \$9,502 in General Fund money for staff time devoted to the grant program.

In-Kind: The Center for Child Protection (CCP) is providing \$4,345 in staff time as a match.

3. County Commitment to the Grant: Is a county match required? If so, how does the department propose to fund the grant match? Please explain.

Travis County is providing most of the match during each of the five years of the grant through staff time devoted to the grant program. CCP, one of the grant partners is providing a small amount of the match each year.

4. Does the grant program have an indirect cost allocation, in accordance with the grant rules? If not, please explain why not.

The current indirect cost rate assigned to TCHHSVS by the consultant Maximus is .5542. At this rate, the cost for grant administration would be \$371,643. There is not enough money elsewhere in the grant budget to cover the shortfall that would result if this amount were requested for grant administration.

5. County Commitment to the Program Upon Discontinuation of Grant by Grantor: Will the program discontinue upon discontinuance of the grant funding? (Yes/No) If No: What is the proposed funding mechanism: (1) Request additional funding (2) Use departmental resources. If (2) is answered, provide details about what internal resources are to be provided and what other programs will be discontinued as a result.

In the design of CSI, sustainability was a key consideration. The project only funded positions that had the willingness to sustain their role after the grant ends. The sustainability plan focuses on specific accomplishments each year of the grant award. In years 1 and 2, implement and adjust the project design as indicated by data and experience and begin assessing the project's viability in conjunction with whether the proximal and distal outcomes are being obtained. (This assessment will be continued in year 3.) In year 2, develop and disseminate local data reports tailored to the interests and needs of the partners. In years 3 and 4, develop and revise a detailed sustainability plan that focuses on sustaining each element of the design independently with a designated champion and highlight the program to local funding entities such as city and county government. In year 5, primary partners will submit funding proposals to sustain CSI after the grant ends. TCHHSVS will remain the designated coordinator of the project, although the Project Director position will not be continued after the grant ends. CSI has already shown a commitment to use local resources to sustain the program by converting five case worker positions and a supervisor in TCHHSVS to support the CSI grant design. These positions are fully supported and funded by general revenue dollars and will remain committed to the project design after the grant ends.

The CCP, which will receive funding for three Child Therapists, has the physical space and supervision capacity to manage the positions. The positions fit into the CCP strategic plan and the agency has the means to raise capital to fund the positions after the grant ends. The grant funded position at Austin Recovery could be sustained through expanding the grant funding under the AIA programs. Finally, funding could be pursued for the attorney position at OCR through county funding. The collaborative system of coordinated services would be maintained through either memorandums of understanding or a charter, and routine partner meetings and the training capacity would be maintained by establishing local experts and collaborative partners to host and support continuing education units.

6. If this is a new program, please provide information why the County should expand into this area.

This grant will help continue the efforts of Travis County to coordinate and build a continuum of supports and services for children and families involved in the child welfare system.

7. Please explain how this program will affect your current operations. Please tie the performance measures for this program back to the critical performance measures for your department or office.

This program is in line with many of the services currently offered by TCHHSVS.



**TRAVIS COUNTY HEALTH and HUMAN SERVICES
and VETERANS SERVICE
502 E. Highland Mall Blvd.
P. O. Box 1748
Austin, Texas 78767**

**Sherri E. Fleming
County Executive
for TCHHSVS
(512) 854-4100
Fax (512) 279-1608**

DATE: June 28, 2012

TO: Members of the Commissioners Court

FROM: *Amber Colange Bussey for Sherri E. Fleming*
Sherri E. Fleming
County Executive for
Travis County Health and Human Services and Veterans Service

SUBJECT: Grant Application to the U.S. Department of Health and Human Services, Administration for Children and Families, for a Regional Partnership Grant to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse

Proposed Motion:

Consider and take appropriate action to approve a \$3,284,713 grant application to the U.S. Department of Health and Human Services, Administration for Children and Families, to fund the Travis County Children's Success Initiative.

Summary and Staff Recommendations:

Travis County Health and Human Services and Veterans Service (TCHHSVS) is the lead agency applying for a Regional Partnership Grant from the U.S. Department of Health and Human Services, Administration for Children and Families. This grant focuses on improving the well-being of children affected by substance abuse whose families are involved in the child welfare system. The grant proposal being submitted is known as the Children's Success Initiative (CSI).

The three main goals of CSI are (1) to promote the early identification of the social and emotional needs of children and youth and ensure access to services and supports that enhance their well-being; (2) to provide services and supports to parents that promote protective factors and decrease substance abuse; and (3) to further expand and enhance a coordinated system of community-based supports for children, youth and families involved in the child welfare system.

Grant partners include the Travis County Office of Child Representation (OCR), the Texas Department of Family and Protective Services, and community-based organizations such as Encompass Medical Management, Austin Recovery, and the Center for Child Protection (CCP).

The grant will fund nine positions: a Project Director and Parent Advocate located at TCHHSVS; an Attorney Ad Litem at OCR; an Evaluator and Research Assistant at Encompass Medical Management; a Case Manager at Austin Recovery; and three Child Therapists at CCP.

TCHHSVS staff recommends approving this application.

Budgetary and Fiscal Impact:

The \$3,284,713 grant is split over five years with budgets being submitted annually. The budget for year 1 is \$670,593; in years 2, 3 and 4 it is \$653,105; and in year 5 it is \$654,805. The year 1 match is \$118,340. The match for year 2 is \$115,254. Years 3 and 4 require a match of \$163,276; and year 5 requires a match of \$218,268.

OCR and CCP will provide a combined match of \$13,847 each year in the form of staff time devoted to the grant program. The Children FIRST unit located in TCHHSVS will provide the balance of the match each year in the form of staff time devoted to the grant program. As part of the grant design, the Children FIRST unit will have one supervisor and five case workers who will only serve grant participants.

The application instructions state that only the first year's budget of \$670,593 and the match of \$118,340 be included on the SF-424A and SF-424B grant application forms.

Issues and Opportunities:

The CSI grant will enhance those Travis County programs already in place to help children and families. Travis County has been using various grants to build a continuum of supports and services for children and families involved in the child welfare system. The Parenting in Recovery grant provides treatment and recovery supports for women involved in the child welfare system due to substance abuse. A grant from the Texas Office of the Governor funds the Travis County Family Drug Treatment Court (TCFDTC) for the same population and also adds men to those eligible for treatment and recovery supports. These initial efforts had a primary focus on the parents. In 2011, the Children's Continuum (TCC) grant funded services that focus on the child's well-being. TCC establishes a continuum of screening, developmental, therapeutic and non-traditional services for children and includes a child advocate as a vital part of the

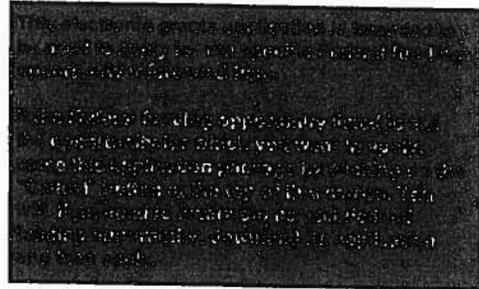
TCFDTC. With its specialized service population and high-intensity service provision, the TCFDTC has served an average of 20-25 families annually. While the reach of the TCFDTC has been relatively limited, the experience and knowledge gained has been valuable and is broadly applicable. Creating the TCFDTC has enhanced the community's ability to build a robust collaboration across organizations and systems including child welfare, courts (local attorneys, District Attorneys, judges), substance abuse providers, and community organizations. Another especially important lesson learned has been how to effectively access and utilize substance abuse treatment options for parents involved with the child welfare system. Because of this foundation of knowledge and the continuing availability of the TCFDTC to offer expertise and support in substance abuse system navigation, substance abuse treatment does not need to be a focus of the CSI grant proposal, allowing more opportunity to focus on other gaps in the current system.

Background:

The Administration for Children and Families within the U.S. Department of Health and Human Services provides grants for regional partnerships designed to enhance the safety of children who are in an out-of-home placement or are at risk of being put in an out-of-home placement due to a parent's or caretaker's methamphetamine or other substance dependence.

Cc: Andrea Colunga Bussey, Director, Office of Children's Services, TCHHSVS
 Susan A. Spataro, CPA, CMA, Travis County Auditor
 Jose Palacios, Chief Assistant County Auditor
 Janice Cohoon, Financial Analyst, Travis County Auditor's Office
 Laura Ward, Assistant County Attorney
 Leslie Browder, Executive Manager, Planning and Budget Office
 Diana Ramirez, Analyst, Planning and Budget Office
 Cyd Grimes, C.P.M., Travis County Purchasing Agent
 Shannon Pleasant, Assistant Purchasing Agent, Travis County Purchasing Office

Opportunity Title:	Regional Partnership Grants to Increase the Well-Being
Sponsoring Agency:	Administration for Children and Families
CFDA Number:	93.087
CFDA Description:	Enhance the Safety of Children Affected by Parental Met
Opportunity Number:	HHS-2012-ACF-ACYF-CU-0321
Competition ID:	HHS-2012-ACF-ACYF-CU-0321
Opportunity Open Date:	05/17/2012
Opportunity Close Date:	07/16/2012
Agency Contact:	Daphne Weeden cb@lux (866) 796-1591



This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name:

Mandatory Documents

Move Form to Complete

Move Form to Delete

Mandatory Documents for Submission

Application for Federal Assistance (SF-424)
Project/Performance Site Location(s)
Assurances for Non-Construction Programs (SF-42)
Grants.gov Lobbying Form
Project Narrative Attachment Form
Budget Narrative Attachment Form

Optional Documents

Move Form to Submission List

Move Form to Delete

Optional Documents for Submission

Other Attachments Form
Faith Based EEO Survey

Enter a name for the application in the Application Filing Name field.

- This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
- You can save your application at any time by clicking the "Save" button at the top of your screen.
- The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.

Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

- It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.

The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".

To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.

All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.

Click the "Save & Submit" button to submit your application to Grants.gov.

- Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button.
- Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
- The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
- You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.

Application for Federal Assistance SF-424

*** 1. Type of Submission:**

- Preapplication
- Application
- Changed/Corrected Application

*** 2. Type of Application:**

- New
- Continuation
- Revision

*** If Revision, select appropriate letter(s):**

*** Other (Specify):**

*** 3. Date Received:**

Completed by Grants.gov upon submission.

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*** a. Legal Name:**

Travis County

*** b. Employer/Taxpayer Identification Number (EIN/TIN):**

1-746000192A5

*** c. Organizational DUNS:**

0309088420000

d. Address:

*** Street1:**

502 E. Highland Mall Blvd

Street2:

*** City:**

Austin

County/Parish:

*** State:**

TX: Texas

Province:

*** Country:**

USA: UNITED STATES

*** Zip / Postal Code:**

78752-3722

e. Organizational Unit:

Department Name:

Health and Human Services

Division Name:

Office of Children Services

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

Ms.

*** First Name:**

Laura

Middle Name:

*** Last Name:**

Peveto

Suffix:

Title: Prevention and Intervention Manager

Organizational Affiliation:

*** Telephone Number:**

512-854-7874

Fax Number:

512-854-5879

*** Email:**

laura.peveto@co.travis.tx.us

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

B: County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

*** Other (specify):**

*** 10. Name of Federal Agency:**

Administration for Children and Families

11. Catalog of Federal Domestic Assistance Number:

93.087

CFDA Title:

Enhance the Safety of Children Affected by Parental Methamphetamine or Other Substance Abuse

*** 12. Funding Opportunity Number:**

HHS-2012-ACF-ACYF-CU-0321

*** Title:**

Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse

13. Competition Identification Number:

HHS-2012-ACF-ACYF-CU-0321

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

CSI Maps.jpg

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**

The Children's Success Initiative (CSI) is a collaboration to augment the resources & supports to children and families involved in the court & welfare system, as a result of parental substance abuse.

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant

b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="670,593.00"/>
* b. Applicant	<input type="text" value="113,995.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="4,345.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="788,933.00"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

- Yes No

If "Yes", provide explanation and attach

Add Attachment

Delete Attachment

View Attachment

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:

Middle Name:

* Last Name:

Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative: * Date Signed:

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006
Expiration Date: 06/30/2014

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected	93.087	\$	\$	\$ 670,593.00	\$ 118,340.00	\$ 788,933.00
2.						
3.						
4.						
5. Totals		\$	\$	\$ 670,593.00	\$ 118,340.00	\$ 788,933.00

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SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected				
a. Personnel	\$ 311,904.00	\$	\$	\$	\$ 311,904.00
b. Fringe Benefits	98,481.00				98,481.00
c. Travel	10,760.00				10,760.00
d. Equipment	0.00				
e. Supplies	16,109.00				16,109.00
f. Contractual	112,120.00				112,120.00
g. Construction	0.00				
h. Other	121,219.00				121,219.00
i. Total Direct Charges (sum of 6a-6h)	670,593.00				\$ 670,593.00
j. Indirect Charges	0.00				\$
k. TOTALS (sum of 6i and 6j)	\$ 670,593.00	\$	\$	\$	\$ 670,593.00
7. Program Income	\$ 0.00	\$	\$	\$	\$

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SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected	\$ 113,995.00	\$	\$ 4,345.00	\$ 118,340.00	
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)	\$ 113,995.00	\$	\$ 4,345.00	\$ 118,340.00	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 670,593.00	\$ 217,653.00	\$ 150,980.00	\$ 150,980.00	\$ 150,980.00
14. Non-Federal	\$ 118,340.00	29,585.00	29,585.00	29,585.00	29,585.00
15. TOTAL (sum of lines 13 and 14)	\$ 788,933.00	\$ 247,238.00	\$ 180,565.00	\$ 180,565.00	\$ 180,565.00
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected	\$ 653,105.00	\$ 653,105.00	\$ 653,105.00	\$ 654,805.00	
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)	\$ 653,105.00	\$ 653,105.00	\$ 653,105.00	\$ 654,805.00	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:		22. Indirect Charges:	0		
23. Remarks:					

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ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

<p>* SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL</p> <p>Completed on submission to Grants.gov</p>	<p>* TITLE</p> <p>Travis County Judge</p>
<p>* APPLICANT ORGANIZATION</p> <p>Travis County</p>	<p>* DATE SUBMITTED</p> <p>Completed on submission to Grants.gov</p>

Standard Form 424B (Rev. 7-97) Back

Project/Performance Site Location(s)

Project/Performance Site Primary Location I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location 1 I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Additional Location(s)

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* APPLICANT'S ORGANIZATION		
Travis County		
* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE		
Prefix: Mr.	* First Name: Samuel	Middle Name: T.
* Last Name: Biscoe	Suffix:	
* Title: Travis County Judge		
* SIGNATURE: Completed on submission to Grants.gov	* DATE: Completed on submission to Grants.gov	

Survey on Ensuring Equal Opportunity For Applicants

OMB No. 1890-0014 Exp. 2/28/2009

Purpose:

The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey

If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name:	Travis County
Applicant's DUNS Name:	0309088420000
Federal Program:	Regional Partnership Grants to Increase the Well-Being of, and to Improve the Perma
CFDA Number:	93.087

- Has the applicant ever received a grant or contract from the Federal government?
 Yes No
- Is the applicant a faith-based organization?
 Yes No
- Is the applicant a secular organization?
 Yes No
- Does the applicant have 501(c)(3) status?
 Yes No
- Is the applicant a local affiliate of a national organization?
 Yes No
- How many full-time equivalent employees does the applicant have? (Check only one box).
 3 or Fewer 15-50
 4-5 51-100
 6-14 over 100
- What is the size of the applicant's annual budget? (Check only one box).
 Less Than \$150,000
 \$150,000 - \$299,999
 \$300,000 - \$499,999
 \$500,000 - \$999,999
 \$1,000,000 - \$4,999,999
 \$5,000,000 or more

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

Approved by OMB
0348-0046

1. * Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. * Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. * Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> SubAwardee * Name: Not applicable * Street 1: Not applicable Street 2: _____ * City: Not Applicable State: _____ Zip: _____ Congressional District, if known: _____		
5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:		
6. * Federal Department/Agency: Not applicable	7. * Federal Program Name/Description: Enhance the Safety of Children Affected by Parental Methamphetamine or Other Substance Abuse CFDA Number, if applicable: 93.087	
8. Federal Action Number, if known: _____	9. Award Amount, if known: \$ _____	
10. a. Name and Address of Lobbying Registrant: Prefix _____ * First Name: Not applicable Middle Name: _____ * Last Name: Not applicable Suffix: _____ * Street 1: _____ Street 2: _____ * City: _____ State: _____ Zip: _____		
b. Individual Performing Services (including address if different from No. 10a) Prefix _____ * First Name: Not applicable Middle Name: _____ * Last Name: Not applicable Suffix: _____ * Street 1: _____ Street 2: _____ * City: _____ State: _____ Zip: _____		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		
* Signature: Completed on submission to Grants.gov		
* Name: Prefix _____ * First Name: Not applicable Middle Name: _____ * Last Name: Not applicable Suffix: _____		
Title: _____ Telephone No.: _____ Date: Completed on submission to Grants.gov		
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2. OBJECTIVES AND NEED FOR ASSISTANCE

2.a Background: Need for Assistance

Like many communities across the United States, Travis County is continuously working to understand and meet the needs of children affected by their parent's substance abuse. According to the SAMHSA National Household Survey on Drug Abuse conducted in 2001 an estimated six million children (about 8-10% of all U.S. children) lived with at least one parent who abused or was dependent on alcohol or an illicit drug during the past year (Office of Applied Studies, Substance Abuse and Mental Health Services Administration, 2003). While there is no one agreed-upon figure, all estimates show that among families involved in the child welfare system, rates of substance abuse are significantly higher. In studies that have examined the prevalence of substance abuse among families involved in the child welfare system, estimates range from 40% to 80%. A DHHS report to Congress (1999) stated that between one-third and two-thirds of children in the child welfare system were affected by substance use disorders (National Center on Substance Abuse and Child Welfare, n.d.).

Parental substance abuse has a negative impact on the physical and emotional well-being of children, often creating chaotic home environments that lead to child maltreatment or situations where the child's needs are secondary to the parent's substance-related activities. Prenatal exposure to alcohol can create functional and physiological problems and lead to challenges in early development as well as with social and academic skills and success as the child ages. Children who live in a home with a substance abusing parent often experience many consequences that negatively impact their development including: disruption to the normal bonding process; emotional, academic and developmental problems; unmet basic needs; finding themselves in unsafe situations; taking on the stressful role of caring for younger siblings or of running the family; feeling embarrassed by their parents and their family situation; and being at

greater risk for developing substance use disorders themselves (Office on Child Abuse and Neglect, Children's Bureau, ICF International, 2009). Child maltreatment as a result of a parent's substance abuse can damage the brain circuits and hormonal systems that regulate stress, and, in turn, lead to premature aging and increased vulnerability to mental and physical problems (Centers for Disease Control and Prevention [CDC], n.d.b). Additionally, maltreatment during childhood has been linked to social and emotional problems later in life including delinquency, teenage pregnancy, intimate partner violence, anxiety, depression and suicide (CDC, n.d.b).

Local statistics indicate that parental substance abuse impacts the lives of children in Travis County and is a factor in many local child welfare cases. Of the 6,348 investigations completed by Child Protective Services (CPS) in fiscal year 2011 in Travis County, approximately 2,820 (or 44.4%) alleged drug or alcohol abuse by a caretaker (Texas Department of Family and Protective Services [DFPS], 2011). In this grant proposal we assess the current capacity for serving child welfare-involved children and families affected by substance abuse in Travis County, explore the impacts of system challenges and gaps, and identify the unique service needs, size and characteristics of this population we seek to serve. We propose a project model that reflects the goals of this FOA, namely promoting the well-being, safety, and permanency outcomes of children who have experience maltreatment and are at risk of being placed in out of home placement as a result of a parent's substance abuse. As described by the ACYF, our proposal recognizes the importance of a trauma-informed approach and of assessing and intervening around each of the domains that must be addressed to promote well-being and positive functioning, including: understanding experiences, developmental tasks, coping strategies, and protective factors.

2.b. Current Service Delivery System

Travis County Response to the Issue of Substance Abuse and Child Welfare Involvement

In response to the issue of parental substance abuse, Travis County has been working to coordinate systems and build a continuum of supports and services for child welfare-involved children and families. Initial collaborative efforts leveraged one federal and one state grant to create the Travis County Family Drug Treatment Court (TCFDTC) and serve a high-need, high-risk population of substance-dependent women with young children ages 0-5 who could benefit from intensive services and oversight. The five-year (October 2007-September 2012) federal grant known as Parenting in Recovery provides treatment and recovery supports for women involved in the child welfare system due to substance abuse and dependency. A state grant from the Texas Office of the Governor (OOG, Criminal Justice Division) created and maintains a civil Family Drug Treatment Court (TCFDTC) for the same population and also added men to the service population eligible for treatment and recovery supports. These initial efforts had a primary focus on the parents. In 2011, the Children's Continuum, funded through a three-year Department of Justice (DOJ) Grant, was developed to augment services to the children of TCFDTC participants. With its focus on the child's functioning and well-being, the Children's Continuum establishes a continuum of screening, developmental, therapeutic and non-traditional services for children, includes a child advocate as a vital part of the TCFDTC, and concentrates on improved parent/child relationships. With its specialized service population and high-intensity service provision, the TCFDTC has served an average of 20-25 families annually. While the reach of the TCFDTC has been relatively limited, the experience and knowledge gained has been valuable and is broadly applicable. Creating the TCFDTC has enhanced the community's ability to build a robust collaboration across organizations and systems including

child welfare, courts (local attorneys, District Attorneys, judges), substance abuse providers, and community organizations (CASA, SafePlace - the local domestic violence shelter). Another especially important lesson learned has been how to effectively access and utilize substance abuse treatment options for parents with child welfare involvement. This includes improved knowledge of available resources, of the funding strategies to access these services and of the most effective practices to promote successful utilization and completion of treatment. Because of this foundation of knowledge and the continuing availability of the TCFDTC to offer expertise and support in substance abuse system navigation, substance abuse treatment does not need to be a focus of this grant proposal, allowing more opportunity to focus on other gaps in the current system.

Child Welfare System and System Challenges

As stated above, only a small number of children and families are served through the TCFDTC. The majority of child welfare-involved families struggling with substance abuse are provided with a more routine set of supports through the Texas Department of Family and Protective Services' (DFPS) Child Protective Services (CPS) system. This child welfare system operates in a state with a large child population that is growing both in terms of size and in needs. Between 2000 and 2010, the Texas child population grew by 17% and nearly one million children for a total child population of 6.86 million in 2010 (The Annie E. Casey Foundation). During this same period, the share of the Texas child population living in poverty increased from 20.7% to 25.7% (The Annie E. Casey Foundation). In FY2010 there were more than 264,000 reports of child abuse and neglect across the state.

Local trends in Travis County are even more significant. Between 2000 and 2010 the Travis County child population grew by 27%-- from 192,944 to 245,037 (The Annie E. Casey

Foundation); the number of children living in poverty increased from 27,493 (13.6% child poverty rate) to 59,737 (24.5% child poverty rate) during the same period (The Annie E. Casey Foundation). In FY2010 in Travis County, there were 9,278 reports of child abuse and neglect (DFPS).

Family Based Safety Services (FBSS)¹, the CPS division that provides family preservation services, is an especially strained area of the current child welfare system. During the past 10 years (FY2002 to FY2011) the number of Region 7 (serving Travis County and Central Texas) families receiving family preservation services increased by 79%— from 724 cases opened for family preservation services in FY2002 to 1,293 such cases opened in FY2011. Family preservation services also make up a growing share of all CPS cases. Ten years ago (FY2002) in Region 7 about half (51%) of families served received family preservation services, while 49% of cases were designated for substitute care. In more recent years, family preservation services have shifted to comprise a clear majority of services and removals to substitute care the minority— a three year average during FY2009-2011 indicates nearly two-thirds (63%) of all families were provided with family preservation services as opposed to substitute care (DFPS). At the same time demand for family preservation services is growing, resources, particularly those available to support families in their homes, remain limited. While 66% of all Texas children receiving CPS services in FY2011 were served through FBSS family preservation or family reunification (Burstain, 2012a), only about 5% of the FY2012 CPS budget is directly allocated for in-home family support services (Burstain, 2012b).

In addition to, and possibly in part because of, increasing demand and budgetary constraints, large and increasingly complex caseloads have created systemic staff retention

¹ This grant proposal uses the terms family preservation and Family Based Safety Services (FBSS) interchangeably to refer to cases in the FBSS, family preservation stage. As a note, FBSS also serves families in the family reunification stage.

issues, even in the historically more staff-stable family preservation side of the system (Burstain, 2009). Caseworkers may feel that they cannot adequately support and supervise their cases and may choose to leave CPS rather than risk that a child in their caseload be harmed because they did not have the resources to do their job. High caseworker turnover disrupts the continuity and stability necessary for relationship building and creates inconsistency in the level and quality of services a family receives (Burstain, 2009).

Community Resources and Supports

Although the formal responsibility for protecting children and ensuring their basic safety from harm, abuse and neglect lies with the child welfare system, the community as a whole has an important role in ensuring the well-being of its youngest residents. Travis County has a variety of programs and supports available to address the needs of the population to be served in this grant proposal. There are several options for substance abuse treatment and intervention. Seton Shoal Creek Hospital (SSCH) has both an adult intensive outpatient program and the adult dual recovery outpatient program for individuals who are diagnosed with both mental illness and chemical dependency. SSCH accepts a variety of insurances including Medicaid and has served women with open CPS cases. Austin Recovery (AR) has a wide variety of programs including both in-patient and outpatient treatment services as well as Family House (FH). FH serves allows women to enter residential substance abuse treatment with their children (0-5 years of age). AR has been a primary partner with the TCFDTC and has developed effective programs to support families who are struggling with both addiction and involvement with CPS. AR uses Seeking Safety curriculum in their programing. Communities for Recovery (CR) is a non-profit group that provides recovery supports through a peer to peer recovery coaching model along with a variety of specialized support groups. Oak Springs Treatment Center provides treatment through

education, group and individual counseling services, life skills training, and case management for individuals with substance use disorders, including co-occurring psychiatric and substance use disorders (COPSD). Additionally, there are three entities that provide sober housing options for men, women and women and their children. Any Baby Can, a local non-profit, provides education, training and services for early child development and children with specialized needs. Austin Child Guidance Center (ACGC) and Lifeworks are both non-profit agencies that provide mental health services to children, youth and families. The staff at both agencies has completed training on trauma-informed care. ACGC specializes in services to younger children, especially victims of trauma, while Lifeworks focuses on teens and young adults with a specialty in transitional services. Austin Travis County Integral Care (ATCIC) manages a provider network of both traditional and non-traditional providers (respite, behavioral aide, parent coaching, mentoring) to enhance the functioning of children/youth with significant mental health challenges.

2.c. Impact of System Challenges and Service Gaps

While there are continuous efforts toward improvement, systemic issues create significant areas where the current child welfare system falls short of helping parents address their own substance abuse, alleviate its impact on their children, and create a consistent, nurturing home environment moving forward. First, while CPS has recognized the importance of family engagement and implements this practice through evidence-based practices like family group conferencing (DFPS, 2011), operational realities, including the size and growing intensity of caseloads, are such that families are not always engaged at the optimal level. Over the past 5 years (FY2007-FY2011) the Region 7 family preservation daily caseload size averaged about 19 cases (DFPS). Because of turnover (30% in FY2011 in Region 7) and vacancy, caseworkers

may carry a caseload of 25 or more families at any given time and often visit with a family just once a month rather than meeting their target of connecting once a week. As meaningful family engagement is a key component of assessing and addressing the needs of the child and family and has been shown to have many benefits including: helping the family feel respected and strengthening the relationship with the caseworker; promoting family investment in their case plan; expanding the family and kinship network available to support the child and family; building the family's decision making skills; and enhancing the fit between family needs and services (Child Welfare Information Gateway, 2010), additional resources are likely needed to ensure optimal engagement on a more consistent basis.

A second area where gaps in the system occur is in linking families to community resources. While, as described in the previous section, Travis County has a variety programs and resources available, child welfare-involved children and families may not always be successfully referred to these services or may face barriers to accessing them. With limited time and resources to dedicate to each family, FBSS service provision generally involves providing referrals to community resources. One lesson the community has learned through its experience with the TCFDTC is that for parents working through their own substance abuse issues and for kin caregivers overwhelmed with their new child care responsibilities, the task of connecting with the recommended resources can be daunting, and referrals alone are often not sufficient to help families access and engage with services.

Finally, while the child welfare system's goal is to protect and ensure the safety and well-being of children, the main point of intervention is with the primary caretaker (most often the mother). The child welfare system is not structured or equipped to administer assessments to children. As such, under the current system, the mental health or other developmental needs of

the child may be overlooked unless they manifest significantly enough for the medical profession and/or school system to identify gross deficits and delays and then report these concerns during communications with child welfare professionals.

Gaps in the child welfare system may be especially detrimental for those families who are most at risk of having their situation deteriorate and result in their child's removal. While FBSS seeks to stabilize the family and strengthen the parent's ability to protect their child, there are a significant number of cases where a child is removed from the home after entering family preservation services, particularly when drugs or alcohol is involved. In FY2010, 193 Travis County children were removed from their home while receiving FBSS family preservation services—106 (55%) of these cases involved drug abuse and 30 cases (16%) involved alcohol abuse (DFPS). While parental substance abuse and child welfare involvement have negative impacts, children removed from their families often face additional challenges and may experience confusion, fear, apprehension of the unknown, loss, sadness, anxiety and stress (Bruskas, 2008). Although neglect and abuse are certainly harmful, a child's removal from his or her family can be equally traumatic. Silver et al. (1999) report that in some ways the loss of a parent through entry into foster care can be worse than death, because in addition to the loss of his or her parents, the child also experiences loss of family, friends, and a familiar environment with no sense of closure. Children in foster care may also face additional educational challenges because of frequent moves and are at risk of aging out of the system with little financial, medical or social support (Bruskas, 2008).

2.d. Need for Services

While comprehensive local data about the specific needs of Travis County's substance abuse-affected child welfare population remains somewhat limited, one important benefit of this

grant opportunity is that it could allow the Travis County community to continue to build an understanding of the scope of this issue and needs of the children it impacts. As the community continues to develop a more comprehensive assessment of the needs of children affected by their parent's substance abuse, there are several sources we can look to in order to help us define the need for services. These include national level research on the unique needs of this population, community-based assessment of the general availability of services, and past experience working with the child welfare-involved population in the community and through the TCFDTC. These sources help identify three areas where there is a clear and currently unmet need for services.

First and foremost, there is a need to expand and strengthen support to and treatment for children dealing with the negative impacts of their parent's substance abuse. This means (1) recognizing the serious effects that maltreatment has on child development and well-being including: negative effects on normal and healthy brain development; clinical level behavior problems; challenges managing interpersonal relationships and social interactions, managing moods, and regulating emotional responses; increased rates of mental illness such as Post Traumatic Stress Disorder, Attention Deficit/Hyperactivity Disorder (ADHD), Major Depressive Disorder (MDD), Conduct Disorder (CD)/Oppositional and Defiant Disorder (ODD); (2) assessing the child's needs at the earliest point possible; and (3) providing services to reduce impairments and support development and functioning (Administration for Children and Families, 2012). Due to system challenges and service gaps described previously, this process of comprehensive assessment and early intervention is not a routine part of the current CPS service delivery structure. There is also a specific related need to create more access to quality therapeutic interventions for those children who need support in dealing with the impacts of trauma or with other mental health issues. Although the situation is somewhat better in urban

areas like Travis County, Texas overall has a scarcity of specialists in children's mental health. According to a recent analysis, Texas only has one child psychiatrist per 3,800 children with mental health service needs (Texans Care for Children, n.d.). Locally, a comprehensive community mental health assessment conducted in 2004 found that only 5.3% of the 24,624 Travis County children with a serious emotional disorder received services through ATCMHMR (the local mental health authority, now called Austin Travis County Integral Care) (Morningside Research and Consulting, 2005).

Secondly, families (parents and kin caregivers) need more help than the current system is able to provide to connect with the community services and resources that can help them create a family environment where their children will thrive. Such services can help families address risk factors—particularly substance abuse—and strengthen their protective factors. Research shows that with the presence of protective factors including parental resilience, social connections, concrete supports in times of need, knowledge of parenting and child development, and social and emotional competence of children there is less likelihood for child abuse and neglect (Center for the Study of Social Policy, n.d.). While current FBSS services assess each family and provide referrals based on the family's needs, the child welfare system and network of community resources are not well integrated, and CPS caseworkers have little or no time to help families navigate systems to connect them with the services that can help them build or strengthen their protective factors. System enhancements are needed to help make connections between CPS and community agencies, address barriers to access, and most importantly, link families to the community resources that can continue to support them after their involvement with the CPS system ends.

Finally, the community needs to shore up resources to better understand and more appropriately address the unique needs of the substance abuse impacted, child welfare-involved population. In most, if not all, cases, the children and families served by CPS are already involved with and receive services from schools and community organizations. Staff within these organizations need to understand the needs of this particular population and have the training to be serve them effectively; thus far, this is an area where Texas falls short. Texans Care for Children (n.d.) reports that, "by and large, a lack of training and technical assistance in Texas has led to a workforce unprepared to use the latest breakthroughs in serving children with mental health challenges." On a positive note, this deficit has garnered statewide attention, and in 2012 the Texas Legislature passed SB 219 to improve mental health and "trauma-informed" services for children in foster or kinship care. "Trauma-informed care is an approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives" (Substance Abuse and Mental Health Services Administration). SB 219 expands trauma-informed training requirements at DFPS and, importantly, it also requires DFPS to assist community-based organizations that serve and support the child welfare-involved population to develop training in trauma-informed care to locate money or resources to assist the entities in providing it. If awarded, this grant would help support this legislation and fast track the implementation of higher standards for the provision of trauma-informed care at a local level.

2.e. Project Objectives

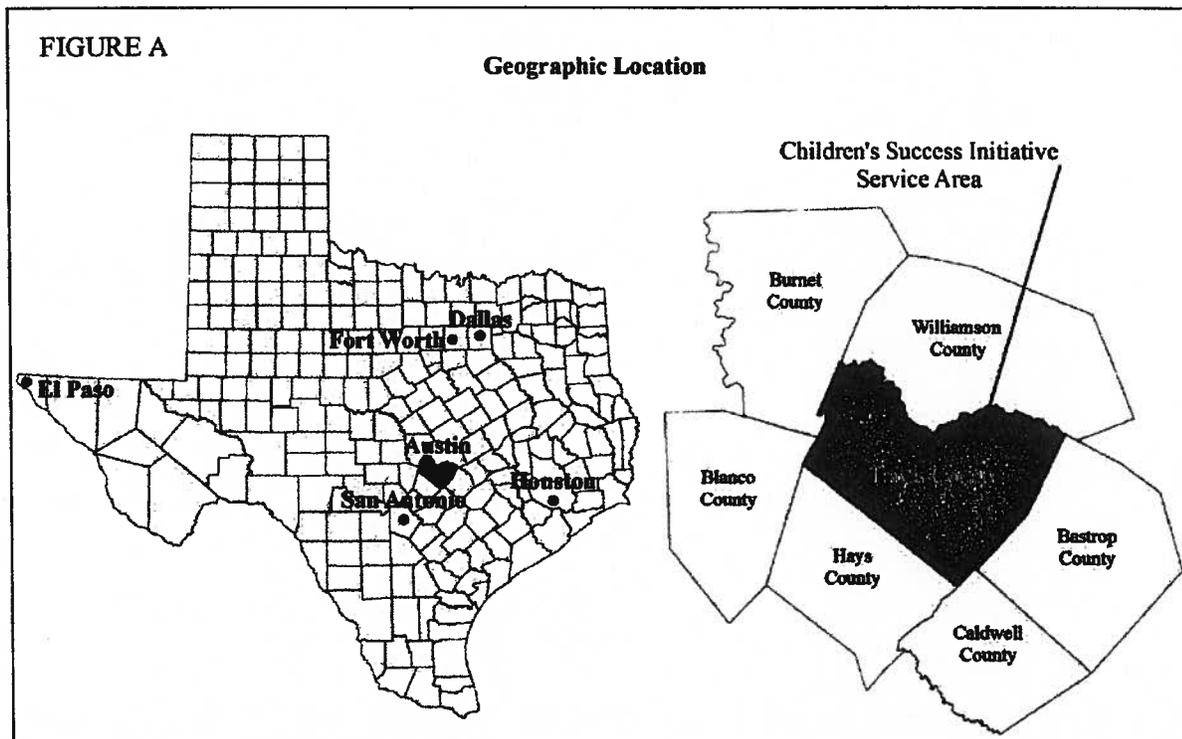
In order to address the above described system challenges and fill service gaps, provide a higher level of support to families dealing with substance abuse, and increase the well-being of substance abuse affected, child welfare-involved children, Travis County has created the

Children's Success Initiative (CSI). CSI is predicated on the belief that if intervention is early, comprehensive, and collaborative, and focuses on promoting protective factors, addressing trauma, and integrating the family into community services, then children/youth will be able to remain safely with their families. The proposed project builds on community experience and leverages existing community resources. The project design includes: comprehensive assessment of needs at project entry; evidence-based interventions and services, including therapy for children and substance abuse treatment for parents; support navigating systems and accessing resources; and connection to ongoing services and supports at case closure. The project design also involves a high level of communication and coordination among systems and providers and a training component to improve community-wide understanding of and skill in meeting the needs of the CSI population (see project model in Figure B on page 17). The three broad goals of CSI are (1) Promote the early identification of children and youths' social and emotional needs and ensure access to services and supports that enhance their well-being; (2) provide services and supports to parents that promote protective factors and decreases substance abuse; (3) further expand and enhance a coordinated system of community-based supports for children, youth and families involved in the child welfare system. These goals support the major anticipated outcomes of CSI, which are to decrease the number of out-of-home placements for children and reduce the referral recidivism rate. Additional objectives for CSI parents are: increased access and completion of services, improved functioning and capacity, increased parenting skills and knowledge of child development, increased parental resilience, and the strengthening of family and community connections. For children/youth, the objectives include: increased access and completion of services, improved functioning in school and/or day care settings, improved self-image/self-worth, engagement in an extra-curricular activity, and

improved mental health. For the community, the objectives are: to integrate the FBSS-involved families and their caseworkers into the wider service community and to improve the knowledge, communication, and collaboration of the community through cross-trainings. The areas of focus include child welfare, substance abuse, trauma, protective factors, and child development.

2.f. CSI Target Population

CSI will serve families who are involved in the FBSS division of CPS in Travis County, Texas (see Figure A below for geographic display of the service area) and for whom substance abuse is a contributing factor to their involvement.

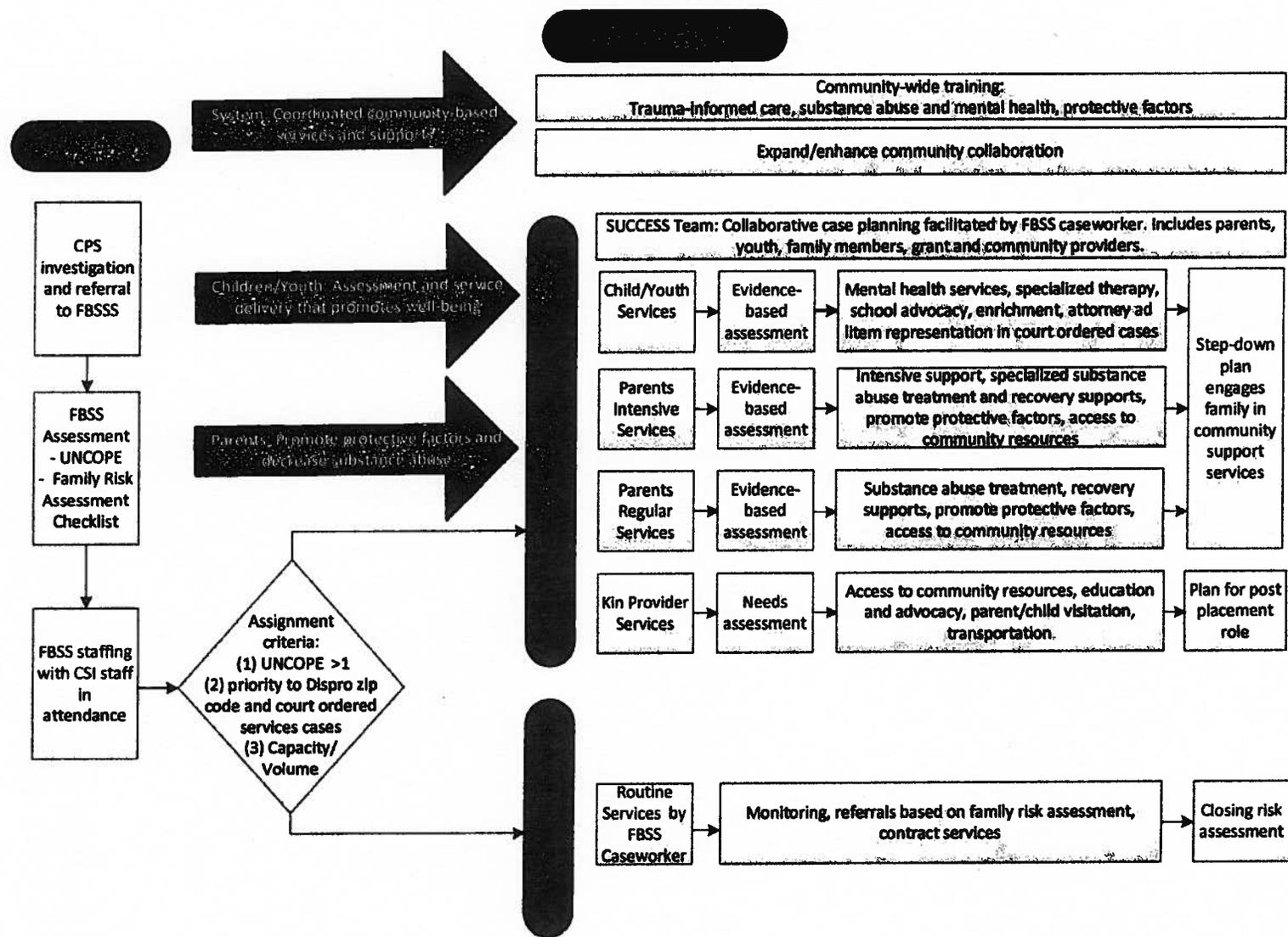


CSI will provide services to parents, their children and kinship placement providers. These children and families are a subset of the 1,491 confirmed investigations of abuse and neglect involving 2,483 children in Travis County during FY2011. Over half (52%) of these child victims were Hispanic, 26% African American, 19% Anglo, and 3% identified as some

other race/ethnicity (DFPS). Hispanic children and African American children are over-represented in the child welfare population compared to their representation in the County population as a whole—Hispanic children 0-17 comprise 47% of the County population and African American children make up 10% (U.S Census, 2010). While age statistics are not available at the County level, the age make up Travis County children involved with the child welfare system is likely relatively similar to that of child victims across the state. In FY2011, more than half of child victims (60%) of abuse and neglect were 6 or younger—15% were under 1, 25% were 1 to 3, and 20% were 4 to 6. The remaining 40% were fairly evenly split between the older age groups—15% were 7 to 9, 12% were 10 to 12, and 13% were 13 to 17 (DFPS). Substance abuse is a significant factor for families involved with the child welfare system in Travis County— of a total 6,348 investigations completed by CPS in FY2011 in Travis County, about 44% alleged drug or alcohol abuse by a caretaker. In 225 of the cases of alleged drug or alcohol abuse, the abuse or neglect was confirmed and the risk was serious enough to open the case in substitute care and remove at least one child from the home. In 277 cases, the drug or alcohol related allegation was confirmed, but the child/children were able to remain with the family and receive FBSS services; these Travis County children and families are the target population for CSI (DFPS). Based on initial approximations, the CSI expects to serve around 300 individuals annually, an estimated 88 parents, 165 children/youth, and 75 kinship providers.

FIGURE B

Children's Success Initiative (CSI) Project Model



CS

3. APPROACH

3.a. Program Strategies and Activities

The program strategies and activities outlined in this section facilitate the attainment of the three goals of the Children's Success Initiative (CSI) which are early identification of social and emotional needs and the provision of services to enhance children/youth well-being; promote parental protective factors and decrease substance abuse; and expand and enhance a coordinated system of community based supports and services. The CSI project design would be classified as an indicated approach in the three-tiered classification system for preventative intervention services for child maltreatment. "Indicated interventions were the first to be federally mandated and institutionalized. Such interventions serve families where maltreatment has already occurred; begin with monitoring and referral to services in the community and can take the form of removing the child from the family of origin" (Stagner & Lansing, 2009, p.27). It is the goal of CSI to enhance the indicated approach to child maltreatment in Travis County.

It is well documented that child maltreatment along with adverse exposure to mental health challenges of the parents, substance abuse by the parent or violence between parents can lead to behavioral and emotional problems in children such as aggression, conduct disorder, delinquency, anti-social behavior, substance abuse, intimate partner violence, teenage pregnancy, post-traumatic stress disorder, anxiety, depression, and suicide (Centers for Disease Control and Prevention, n.d.b). It remains critical that we continue to intervene with families at the indicated level but we must improve the quality of the service provision and move beyond monitoring and referrals to a comprehensive intervention model that address the needs of the child/youth, parent and family. The model must be strength-based, culturally relevant, utilize evidence-based tools

and interventions, engage the parent and child as partners and be delivered through a collaborative service delivery model. CSI proposes to be that model for Travis County.

Travis County is uniquely positioned to deliver this type of service model due to our existing collaborations, expertise in evidence-based practices and trauma-informed care, and availability of wraparound services and community resources. This grant allows the community to build on its strengths to deliver a high quality, comprehensive, evidence-based program to children/youth and their parents; with the intent to maximize the benefit of the intervention by FBSS. This program will engage, support and nurture parents through the promotion of protective factors and the treatment of substance abuse. The program will provide services to children ages 0-17 that promote improved sense self-worth, effective regulation of emotions, and adoption of a healthy world view (Center for the Study of Social Policy, n.d.). This project design utilizes interagency collaboration, integration of existing programs, resources and expertise to increase the well-being, permanency, and safety of children who are at risk of being placed in out of home care by Child Protective Services (CPS) due to parental substance abuse among other complicating factors. An additional strategy of CSI is to ensure each parent and child have an identified coordinator or therapist who is responsible for ensuring service needs are identified and met. In the previous Regional Partnership Grant awarded to Travis County, we learned how essential it is to not only have coordinated meetings with the parent present, but also to assign one staff person to take primary responsibility for coordinating service provision for the parent and child. Otherwise, services and supports are not coordinated, and the parent has to continually explain their status, collaborating partners receive incorrect or incomplete information. The result is often that service needs take longer to be identified and addressed.

The next sections of this application will provide a detailed description of the project design, followed by an explanation of the evidence-based practices used, the approach to implement the design, cultural competency, dissemination of project knowledge, and project sustainability. A number of screening and assessment tools are referred to in pages 20-25. For descriptions of these tools, see pages 28-30.

3.b. Project Design

Project Entry

The CSI target population is families who are referred to FBSS after the completion of a CPS investigation. These are families investigators identified as presenting risk factors for abuse or in which child maltreatment has already occurred. Families served will include both voluntary and court-ordered recipients of services with some children remaining in the home with the parents while others will be placed with kinship providers as part of a safety plan. As per existing policy, FBSS caseworkers will meet with all referred families to complete a family assessment tool. Under the CIS project model the FBSS caseworkers will also complete a modified family assessment tool and administer the UNCOPE, a screening tool for substance abuse using a rating scale of 0-6. With three to ten days of completing the assessment FBSS holds a multi-disciplinary staffing. Under the CSI project design, CSI staff will participate in the staffing process. The role of the staffing is to review the risk factors, ensure the appropriate level of oversight, and officially assign the family to an FBSS caseworker. Under CSI, the focus of the staffing will expand to include: 1) strengths identification; 2) immediate service needs; and 3) grant eligibility. A family is eligible to participate in CSI if they are open to FBSS and receive an UNCOPE rating of 1 or higher. Within that pool of eligible participants, priority is given to: 1) families with court-ordered services and 2) families who reside in the disproportionality target

zip codes. Enrollment continues in the treatment group until capacity is reached, then all families that meet the general grant eligibility guidelines are assigned to the modified control group.

Designation to the modified control group is based solely on volume and capacity. Currently FBSS has 38 caseworker positions and all will participate in service provision to both the treatment and modified control group. As indicated, CSI will focus on serving those families involved in FBSS where substance use/abuse is a contributing risk factor.

SUCCESS Teams

To ensure both effective and coordinated service delivery, under the CSI project design the FBSS Caseworker's primary role will be to coordinate service provision through the development of SUCCESS teams. These teams will be unique to each family and meet routinely (monthly to quarterly as indicated) to coordinate service provision among the providers and family members. The SUCCESS team will include the parents, youth, other family members, grant and community providers and the FBSS Caseworker as the facilitator. The goals of the SUCCESS team are: improved communication and coordination between service providers and the family, assessment of the effectiveness of the interventions, empowerment of the parent, and the development and implementation of a step-down plan to community resources. The SUCCESS teams will reduce service duplication and the need for the child/youth and family to explain their current status multiple times to different providers, ensure resolution of barriers to access services and supports, and coordinate the service interventions across providers. This grant does not alleviate the high caseloads of FBSS caseworkers in Travis County, but it does put in place a trained, coordinated team of providers to deliver evidence-based services and supports in partnership with the family. This allows the FBSS Caseworker to focus on coordination of the services through the implementation of the SUCCESS teams and to maintain the master service

plan that includes services and supports recommended from the SUCCESS team members addressing behavioral health, medical/physical, and concrete needs.

Service Tracks.

CSI will provide three distinct tracks of service: children/youth; parents; and kinship placement providers to promote protective factors and the social and emotional well-being of children. Each track will have flexible funding available to fund concrete service needs; specialized treatment/services such as recovery coaching, psychiatric services not funded by insurance; and gap funding to ensure timely service delivery. Additionally, when indicated, the service providers will transport the parent and/or child to appointments that support the goals identified in their service plan.

The **children/youth track** will be supported primarily by three grant-funded master's level child therapists through the Center for Child Protection (CCP), our local Child Advocacy Center. These therapists, known as Lead Child Advocates, will conduct a Child Behavioral Checklist (CBCL) assessment with each child/youth in the treatment group and based on the results, provide individualized supports that address trauma; parent-child relationship; behavioral and/or developmental concerns; educational support/advocacy; and the promotion of enrichment activities. For those children who are too young to be administered the CBCL (0-1.5 years) the Ages and Stages Questionnaire Social/Emotional (ASQ-SE) will be used to develop appropriate intervention strategies and supports. These services will be provided through different modalities including, filial therapy, Trauma Focused- Cognitive Behavioral Therapy (TF-CBT) and experiential therapies. When determined to be necessary by clinical observations, parent/child self-report or history, the CCP Lead Child Advocate will administer the Trauma Symptom Checklist for Children (TSCC) and integrate the results in their practice with the child. The goal

of these services is to reduce the effects of trauma, increase the social and development abilities of the child/youth leading to improved well-being. The CCP Lead Child Advocates will also administer the Parenting Stress Index (PSI) to gauge the parent/child relationship and devise appropriate service interventions. To support this portion of the track, the grant will fund three therapists and provide funding for the experiential therapies. The CCP will provide grant match through supervision of the staff and access to other non-grant-funded services available at CCP. The Office of Child Representation (OCR) will employ an Attorney Ad Litem (AAL) to represent the voice and needs of the children in the FBSS court-ordered services cases. This attorney will collaborate with the SUCCESS team, attend meetings, and grant trainings. This is a critical addition to the child/youth track, as it is imperative that there is good coordination and communication with the legal parties so information is accurately represented to the Court.

Additionally, this grant design is a shift in philosophy that encourages systems collaboration, innovative practices, empowers parents and fully embraces the goal of children remaining with their families. It is critical that the focus, goal and design of CSI are supported by the AAL as they implement their legally-mandated role in court-ordered services cases. This support will further healthy, effective collaboration in the courtroom which will benefit the child/youth. OCR will match the grant by providing supervision of the grant-funded AAL and through community trainings on relevant legal topics. The services and supports in the other two tracks will also directly and indirectly benefit the child/youth as well.

The focus of the **parent treatment track** will be to identify and address service needs including substance abuse, mental illness, and traumas such as domestic violence through case management and referrals to needed services. The service providers of the parent track will be educated in resource identification and navigation and trained in services and interactions that

promote parental resiliency, connection to social supports, and adequate knowledge of parenting and child development.

The parent track will have two tracks: intensive and regular. The **intensive track** will be for those families whose parent scores a 4-6 on the UNCOPE (again, see p. 11 for description). They will be assigned to a grant-funded Intensive Case Manager under the CRADLES program. This program was selected due to their experience in intensive case management with a focus on substance abuse. Additionally, they are located with and managed by Austin Recovery (AR), the largest substance abuse provider in the community. This experience and knowledge will allow them to provide the parents intensive support with a specialized emphasis on substance abuse treatment and recovery supports. Individuals with an UNCOPE score of 4 or higher may require inpatient treatment, and will require significant support and oversight to successfully complete treatment and engage in recovery supports. The CRADLES Intensive Case Manager will complete a series of screening tools with the parent: Adverse Childhood Experience (ACES), Adult/adolescent parenting Inventory-2 (AAPI2), and the Family Protective Factors Survey (PFS). The AAPI2 and PFS (see 29-30 for descriptions) will be administered pre/post service delivery. These tools, along with a social history that includes pre-natal history for each child, will be used in collaboration with the parent to develop an individualized plan of service that will be integrated into the FBSS master plan. The CRADLES Intensive Case Manager will facilitate substance abuse treatment, recovery supports, and parent skill-building with an emphasis on the protective factors utilizing the Nurturing Program modules. They will connect the parent to relevant community services and at closure will ensure parent engagement and utilization in step down services. The CRADLES case manager, as part of the SUCCESS team, will work with the 10-12 parents for 6 to 8 months.

The **regular track** will be for those families whose parent scores a 1-3 on the UNCOPE. They will be assigned to Parent Advocates through the Children F.I.R.S.T. unit of TCHHS/VS. Currently this unit has five case managers and one supervisor and through this grant, one additional case manager will be funded. Four of the staff will be assigned to the parent track and the other two will be assigned to the kinship track. The Children F.I.R.S.T unit will be fully integrated into the CSI project design and will only serve grant eligible parents F.I.R.S.T and kinship placement providers. The Children F.I.R.S.T unit will be re-trained and move from resource coordination to staff that engage, support, and facilitate access to needed services and supports. The training will focus on: trauma-informed care, substance abuse and mental health diagnosis and treatment, protective factors, and the Nurturing Program modules. The Children F.I.R.S.T. Parent Advocates will complete a series of screening tools with the parent: ACES, AAPI2, and the PFS. The AAPI2 and PFS will be administered pre/post service delivery. These tools along with a social history that includes pre-natal history for each child will be used in collaboration with the parent to develop an individualized plan of service that will be integrated into the FBSS master plan. The Parent Advocates will connect parents to substance abuse treatment, provide recovery supports and help build parenting skills with a focus on developing protective factors. Parent Advocates will also help parents access other supports in the community and will oversee parent's transition out of services at closure. The Children FIRST parent advocates serve as part of the SUCCESS team and will work with 12-15 families for 5-7 months.

The final track is the **kinship placement provider track** which focuses on supporting those kinship placement providers who have children voluntarily placed in their care during the course of the FBSS case. Traditionally, these family members have been expected to

independently navigate the necessary systems to access resources for themselves and services and supports for the children/youth in their care. This can be a daunting task especially if the children in their care exhibit behavioral challenges or have special needs or if they have a limited income and have no prior experience in locating and accessing financial, medical or behavioral health supports. This lack of support can result in the children's needs not being fully met in the care of the kinship placement provider, the kinship placement provider not accessing all eligible benefits to sustain the placement and eventually the children being removed from the kinship placement provider and placed in foster care. To address this gap in service provision, the Children F.I.R.S.T. unit will designate two staff members as Kinship Advocates who will support the kinship families' role in FBSS cases. These Kinship Advocates will complete a needs assessment, facilitate access to community resources, provide education and advocacy, assist with parent/child visitation and help with transportation for children's service oriented appointments. Upon the children's transition back to the parents, the Kinship Advocate will support the kinship provider in establishing their post-placement role. The Kinship Advocates will be a part of the SUCCESS team and will serve 15 kinship placement providers for a four month period.

Number of Participants Served

In year one of the grant, CSI anticipates enrolling a reduced number of participants due to start-up time, initial referral rates, and the inherent challenges associated with implementing a new grant design. These enrollment numbers are based on the capacity of the grant-funded and community match positions, length of service time and the projected carry-over from year to year. It is challenging to accurately project service numbers based on a grant design, so there may be a variation in these numbers once the grant design is implemented. CSI anticipates

beginning enrollment of treatment participants by January 2013 and the modified control participants by April 2013. CSI has projected a length of time for each track of service which will be monitored carefully, but this could impact enrollment projections as well. CSI projects that each service track will carry over about 20% of their enrolled participants annually.

Table 1. Caseload capacity for CSI treatment group

Caseload Capacity for Treatment Group			
Projected Capacity	Annually Year 2-5	Projected Caseload Size	Number of Staff
Parent – Intensive	12	10	1
Parent – Regular	76	12	4
Children/Youth	165	55	3
Kinship Provider	75	15	2

Table 2. Annual enrollment for CSI treatment and modified control group

Enrollment Per Year for Treatment Group						
Population	Year One	Year Two	Year Three	Year Four	Year Five	Total
Attorney ad Litem	40	50	50	50	50	
Families	48	54 + C/O	52 + C/O	52 + C/O	52 + C/O	258
Parent – Intensive	10	13 + C/O	12 + C/O	12 + C/O	12 + C/O	58
Parent – Regular	60	64 + C/O	61 + C/O	61 + C/O	61 + C/O	307
Children/Youth	120	141 + C/O	132 + C/O	132 + C/O	132 + C/O	657
Kinship Provider	55	65 + C/O	60 + C/O	60 + C/O	60 + C/O	300
Total (Unduplicated)	245	282	265	265	265	1322
Carry Over @ 20% average						
Families	10	12	12	12		46
P-I	2	3	3	3		11
P-R	12	15	15	15		57
C/Y	24	33	33	33		123
Kinship	10	15	15	15		55
Enrollment Per Year for Modified Control Group						
Parents	50	75	75	75	75	350
Children/Youth	100	137	137	138	138	650
Kinship	40	65	65	65	65	300
Total	190	277	277	278	278	1300

3.c. Evidence-Based Practices Utilized in Project Design

CSI project design is based on current collaborative efforts, resources and expertise in the area of child welfare, substance abuse, trauma-informed care and parent education/training. CSI builds on these local strengths and incorporates additional evidence-based practices that are appropriate for the focus of the project design. These practices are reflected in the assessment

and screening tools utilized, the intervention and therapeutic services, the training and skills of the staff, and the overall goals of the project.

Evidence-Based Screening and Assessment Tools

The FBSS caseworkers will administer the **UNCOPE** as a screening tool for substance abuse and intervention (Hoffman, 1999). The UNCOPE has been successfully utilized in child welfare practice in the following jurisdictions: the State of Oklahoma (an RPG Grant site), the State of Kentucky, and Los Angeles County, CA. FBSS caseworkers will also use a modified version of the FBSS Family Assessment Guide. These tools will be completed with all CSI participants – treatment and the modified control group. The results of these tools will be used to guide service interventions and supports to the children/youth and parents.

CCP will administer assessments to both the children/youth and parents to inform their service provision. CCP will employ three grant dedicated Child Therapists who will administer the **Child Behavior Checklist** (CBCL 1.5 to 5 and the CCCL 6 to 18) to all CSI children enrolled in the treatment portion of the project (Achenbach, n.d). "CBCL, developed by Dr. Thomas Achenbach in 1991, analyzes a child's emotional and behavioral health, using information from the child's teacher or caregiver in conjunction with an extensive exam, completed by a therapist, a parent or by the child himself. The exam is scored against a predetermined standard for emotional health" (Sheridan, 2009).

When indicated by clinical observation, family or professional report, the CCP Therapist will administer the **Trauma Symptom Checklist for Children** (TSCC) (DioGuardi & Gilbert, 2005). "The TSCC, the child version of the adult Trauma Symptom Inventory (Briere, 1995), evaluates acute and chronic posttraumatic symptomatology and other symptom clusters found in some children who have experienced traumatic events. The clinical subscales are conceptually

based on theories of development and child trauma (Feindler, Rathus, & Silver, 2003, p. 209)"
(DioGuardi & Gilbert, 2005).

The CCP Therapists will administer the **Ages and Stages Questionnaire Social/Emotional (ASQ SE)** to children who are 0-1.5 and to children under three for whom the ASQ SE may be more appropriate than the CBCL, described above. The ASQ SE is a screening questionnaire designed to identify developmental delays in infants and young children, including assessment of social emotional development. The CCP therapists will complete the **Parenting Stress Index-Short Form (PSI-SF)** with all parents enrolled in the treatment portion of the CSI project. This tool will be used to measure the relative stress in the parent-child relationship. Child characteristics in the full scale include: distractibility/hyperactivity, adaptability, reinforces parent, demandingness, mood, and acceptability. Parent measures include: competence, isolation, attachment, health, role restriction, depression, and spouse. The **PSI** is used for early identification of dysfunctional parent-child interactions, parental stress, family functioning, and risk for child abuse and neglect, and also for evaluation of child custody decisions (The California Evidence-Based Clearinghouse for Child Welfare, 2009). These assessment tools along with clinical observations will provide an in-depth understanding of the functioning of children/youth and the parent/child relationship to aid in planning of treatment and services.

The Cradles Intensive Case Manager and the Children F.I.R.S.T Parent Advocates will utilize several screening tools to enhance their collaboration and service delivery to parents in the treatment group. The **Adverse Childhood Experiences (ACE)** will be used to identify a parent's childhood exposure to adverse experiences (Centers for Disease Control and Prevention, n.d.). The **Adult-Adolescent Parenting Inventory (AAPI2)** will be used to identify the parenting and child rearing attitudes of parents (Bavolek, n.d.). The **Protective Factors Survey**

(PFS) will be used to measure the protective factors (FRIENDS National Resource Center, n.d.). The AAPI2 and the PFS will be completed pre and post service delivery. This collection of tools will allow the parents themselves and the advocates to understand the level of need and support a parent may have in areas of mental health, parenting skills and protective factors. This information will guide the development of an individualized plan for services and supports.

Table 3 provides a summary and additional description of the CSI assessment tools.

Table 3. CSI standardized assessment tools

Measures	Indicators/data elements or example items	Data source
UNCOPE	Basic Demographics and Screening tool with 6 items (yes/no). Two or more positive responses indicates possible abuse or dependence; Responses of 4 or more strongly indicates dependence.	FBSS caseworker
Modified Family Assessment Guide	Qualitative and quantitative items that indicate family functioning, concerns, expectations for CPS interactions, expectations of children and parents, support systems for the family, goals and needs, family strengths, safety and risks	FBSS caseworker
Texas Guided Risk Assessment	Qualitative assessment of: Caregiver capacity, protective capabilities, home & social environment, protective capabilities, quality care Child vulnerability, maltreatment pattern, response to intervention	FBSS caseworker
Child Behavior Checklist (CBCL)	Standardized measure (99-118 items based on child's age) designed to identify specific behavioral (attention problems, rule breaking, aggression) emotional (depression, somatic complaints), and social problems	CCP therapist
Trauma Symptom Checklist for Children (TSC)	Standardized measure (40 items) that includes subscales for various categories of mental health, including PTSD, anxiety, depression, etc.	CCP therapist
Ages and Stages Questionnaire – Social/emotional (ASQ-SE)	Standardized measure that focuses on self-regulation, compliance, communication, adaptive behaviors, autonomy, affects and interactions with people	CCP therapist
Parenting Stress Index-Short form (PSI)	Standardized measure (120 items) that assesses parent and child characteristics to evaluate parent-child interactions	CCP therapist
Adverse Childhood Experience (ACE)	Parent responses to categories of adverse experiences that include abuse as a child, trauma in the household environment as a child, and neglect as a child	CRADLES/ Child First caseworkers
Adult/adolescent parenting Inventory-2 (AAPI-2)	Standardized measure (40 items) that assesses parenting attitudes and child rearing in areas of: inappropriate parental expectations, inability to demonstrate empathy towards children's needs, strong belief in the use of corporal punishment, reversing parent-child family roles, and oppressing children's independence.	CRADLES/ Child First caseworkers
Family Protective Factors Survey (PFS)	Standardized measure (20 items) that measure family functioning/resiliency, social support, concrete support, nurturing and attachment, and knowledge of parenting/child development	CRADLES/ Child First caseworkers

Evidence-Based Interventions

The FBSS Caseworker will develop, manage and coordinate the SUCCESS Teams as part of the CSI project design. The team design is based on the System of Care model and the Wraparound process (Child Welfare Information Gateway, 2008). The CCP grant dedicated therapists will be trained to provide **Trauma Focused- Cognitive Behavioral Therapy (TF-CBT)**. "TF-CBT is a psychosocial treatment model designed to treat posttraumatic stress and related emotional and behavioral problems in children and adolescents" (National Registry of Evidence Based Programs and Practices, 2008). The therapist will engage the children/youth in experiential therapy services: pet-assisted therapy, ropes courses, music, art and yoga. The children will participate in both individual and group services. The CCP will offer parents participation in group services utilizing the **Systematic Training for Effective Parenting (STEP)** National Registry of Evidence-based Programs and Practices, 2010). STEP provides skills training for parents dealing with frequently encountered challenges with their children that often result from autocratic parenting styles. Children F.I.R.S.T and CRADLES will utilize modules of the **Nurturing Parenting Programs** support their interaction, coaching and teachable moments with parents (National Registry of Evidence-based Programs and Practices, 2010). The Attorney Ad Litem, representing children in court-ordered child protective services cases, will utilize *The Practice & Policy Brief: Advocating for Very Young Children in Dependency Proceedings: The Hallmarks of Effective, Ethical Representation* as a guide in representing children (Maze, 2010).

3.d. Provision of Culturally Responsive Services

CSI will be culturally responsive to the children/youth and their families by acknowledging the unique strengths, abilities and challenges of each family in the context of

their culture. In this way, culture is viewed not only as race/ethnicity but as the distinctive culture of the family, their neighborhood and community. Culture is seen as an asset that requires understanding and acceptance. CSI staff will be creative and flexible in their efforts to adapt interventions to mesh with a family's culture whenever possible. CSI staff will be reflective of the families served and each track will have a staff member who is bilingual in Spanish. The services and supports provided to the families will be offered in their home and community. The family will be a part of the SUCCESS team and they will have a voice and choice in service provision. CPS has been working to address issues of disproportionality over the last five years through trainings, community groups and specialized caseloads for target zip codes with high disproportionality rates. CSI will be able to partner with the CPS disproportionality initiative to improve understanding, knowledge and service delivery methods as it relates to disproportionality of minority representation in child protective services cases. Additionally, CSI will collaborate with the Center for Elimination of Disproportionality and Disparities to receive training, program guidance and recommendations for delivering culturally relevant and competent services.

3.e. Collaboration

One primary role of TCHHS/VS is to facilitate collaboration between various community entities in order to streamline service provision and minimize duplication for residents. TCHHS/VS accomplishes this in a variety of ways: applying for and managing collaborative grants, developing expertise in an issue area, research and reporting, facilitation of community meetings, chairing community coalitions, and acting as a broker between groups with competing interests. The Travis County community enjoys numerous collaborative efforts designed to maximize the available resources, skills and expertise of our community partners.

TCHHS/VS plays a primary leadership role in these coalitions, among others: Community Partners for Children (CPC); Child and Youth Mental Health Planning Partnership (CYMHPP); the System of Care Initiatives; and the Regional Partnership Grant – Parenting in Recovery/Travis County Family Drug Treatment Court. Additionally, we are members of the Early Childhood Coalition (ECC), Success by 6, Disproportionality Coalition, Model Court Initiative, Child Protective Services/Travis County Juvenile Court cross-over docket, and the COPE Juvenile Justice Mental Health Court.

TCHHS/VS has been continuously successful in developing and managing coalitions across issues areas with a focus on children's mental health, substance abuse, child welfare, juvenile justice and the school learning environment. In 1997, Travis County was awarded a SAMSHA grant and created The Children's Partnership (TCP) to address the mental health needs of children/youth and their families. TCP has been a vibrant part of our community since 2005. The primary partners are the mental health authority, Austin Travis County Integral Care; juvenile justice and child welfare agencies; area School Districts; and TCHHS/VS. TCP partners created a community management team that oversees TCP day-to-day operations. The partners use a shared database, report on shared outcomes, and utilize a blended funding pool.

In 2007, TCHHS/VS was awarded a Regional Partnership Grant through the Administration of Children and Families. This grant is known as Parenting in Recovery (PIR) and supports the Travis County Family Drug Treatment Court (TCFDTC). One of the main achievements of PIR was the development of a collaborative service delivery system between child welfare, the Court and the substance abuse community. This collaboration did not formally exist in 2007, but now Travis County has a charter supporting the TCFDTC which delineates the collaboration and commitment of the primary partners. Additionally, PIR was successfully

integrated into the TCFDTC, which was launched in 2008. The program has become entrenched in the community through the dedication of its partners. CPS dedicated a unit of staff to the effort, the District Attorney's office designated an ADA to PIR, and the district court devoted a court room, staff, and a judge as well. The current collaboration for this RPG has expanded to include these members: Austin Recovery (substance abuse provider); CRADLES (grant-funded home visiting program focused on child welfare and substance abuse); Communities for Recovery (recovery supports group); Child Welfare; TCHHS/VS; Safeplace (domestic violence partner); ATCIC (behavioral health partner & contract management for flexible funding); CASA; local attorneys; Foundation Communities (housing partner) Lone Star Circle of Care and Manos de Cristos. Additionally, this grant was able to facilitate partnership with local vendors to prioritize our clients, charge reduced rates, and accept payment from various sources. This Regional Partnership has successfully collaborated to develop and sustain a Family Drug Treatment Court. It has also established a continuum of services for child welfare families that includes substance abuse treatment, housing, and mental health and parenting supports. The partners shared data, reports, releases and documents to further the collaboration and enhance the services to families. The collaboration has routine meetings (monthly and quarterly), an annual retreat, and quarterly cross-training events. This reflects that TCHHS/VS has the capacity, knowledge and relationships to establish, support and maintain collaborations. TCHHS/VS was able to build on the RPG collaboration to develop the Children's Continuum, designed to support the children of the TCFDTCT, which was funded by DOJ in 2011. This expands the collaboration to a child development specialist, secures the role of CASA and introduces specialized therapeutic services to children and families.

Through these experiences, TCHHS/VS has learned these key components must be present for a collaboration to succeed: 1) a person/agency is designated to provide administrative support, routine communication and meeting facilitation, 2) the facilitator must know and communicate the strengths, capacity, and limitations of each partner and build on the strengths, acknowledge the limitations, and "push" the capacity, 3) each partner must understand the benefits to their agency, 4) communication and support must occur at three levels- direct line staff, supervisors, and administration, 5) partners must have a common, documented purpose or goal – preferably through an MOU or charter, 6) partners must have defined tasks and responsibilities, and 7) cross-training ensures that all partners have the same knowledge base and understanding. These key components allow the collaboration to develop respect, trust and a mutual understanding which facilitates system improvement and innovation.

Collaborations take time to develop and mature. CSI will build on several established collaborations in Travis County. The collaborative partners of CSI - Child Welfare – Family Based Safety Services, Center for Child Protection, CRADLES, Office of Child Representation, Children F.I.R.S.T. unit, and TCHHS/VS-All of whom have worked with families involved in the child welfare system, have collaborated on a case by case basis, and acknowledge that the limits in the current service delivery system do not result in the desired outcomes for children/youth and families. Four of the CSI partners control their own data and will be able to release it to further the collaboration and meet the requirements of the grant. The State CPS office has agreed to cooperate with the grant and will release requested data from the IMPACT system. However, the data collected on FBSS families in the IMPACT system is more limited; therefore, it will be necessary to obtain data from the local CPS office. CSI partners share same values, but their client focus is different as well as their area of specialty. Successful

implementation of CSI will require a strong team approach that supports everyone's "voice" and creates a collaborative plan. Each partner will share the costs of this grant proposal through in-kind match and/or redirection of existing services and supports. All partners were part of the grant proposal team and ensured that agency and community needs and goals were addressed through this new continuum of services for children/youth and their families involved in FBSS.

CSI integrates and enhances existing programs within Travis County. CCP currently provides services to children and families who have experienced abuse/neglect; Children F.I.R.S.T support families with open CPS cases with resource coordination; CRADLES provides intensive case management to child welfare-involved families; OCR represents children rights in CPS legal cases; and FBSS provides monitoring and referral services to children/youth and their families. This grant design brings these partners together to serve the same population of children/youth and families comprehensively in a team setting utilizing each entities' expertise.

3.f. Factors that Speed or Hinder Project Implementation

Strengths (Speed Implementation)

The implementation of CSI will be managed through a coordinator effort between the lead agency, TCHHS/VS, grant partners and the grant-funded positions. The roles, responsibilities and scope of these entities are designed to maximize skill sets and ensure on-time implementation and management of the grant. It has been the experience of TCHHS/VS, through the management of previous grants that it is critical to have the implementation and management responsibilities divided and assigned to specific staff to ensure that the resources and expertise are available to make sure grant requirements are successfully met. In this way, we believe we will be able to implement the grant successfully and within expected timeframes.

The designated roles and responsibilities for the grant are described in detail next. TCHHS/VS will be responsible for the financial, contractual, and grant compliance tasks.

TCHHS/VS will designate a Program Administrator to manage the grant who will work in collaboration with designated County staff in finance, contract management, legal, and the auditor's office. The focus of this staff will be to integrate the grant award into the county financial system, ensure sub-recipient contracts are executed, complete yearly audits of sub-recipients, and comply with submission of grant required financial documents, including carry-over requests and the SF-425. The grant-funded Project Director will be responsible for implementation of the project design, in collaboration with the Project Administrator and grant partners. The Project Director will focus on compliance of grant required reports, the evaluation, systems and service development and the strengthening of the regional partnership. This position will be immediately responsive to the grantor, participate in grantee conference calls and technical assistance, and provide insight and recommendations regarding the implementation of CSI. The Evaluator and Research Assistant (both grant-funded) will focus on the implementation and management of the CSI evaluation system. They will be responsible for gathering the necessary data from the partners for bi-annual uploads to the grantor. They will analyze and interpret the data for both local and federal evaluation purposes. The Evaluator will collaborate closely with the Project Director to address data trends and finding to update and improve practice within the CSI project design. The Evaluator will work closely with the federal grantor to ensure compliance with the federal reporting requirements for the evaluation.

Again, the primary community partners Family Based Safety Services (FBSS), Office of Child Representation (OCR), Center for Child Protection (CCP), CRADLES, and Children F.I.R.S.T (TCHHS/VS unit) will be responsible for providing direct service to eligible families

according to the CSI project design. To reiterate, FBSS will train their caseworkers in strengths-based team meeting facilitation, which will allow them to create, manage and support the CSI SUCCESS teams. OCR will employ a grant-funded attorney to represent the legal rights of children in the court-ordered services lawsuits. This position will ensure that a child's voice is heard in court while collaborating with a team to support the goals of healthier, stronger and socially connected children/youth and parents. The CCP's three grant-funded Child Therapists will administer assessments and provide direct therapeutic services to the children, and tailored relationship and skill-building with parents. Children F.I.R.S.T will redesign and retrain their current staff to serve only grant eligible families and will convert three of their current positions to Parent Advocates and two to Kinship Advocates. One designated grant-funded position will expand the Parent Advocate staff to four. CRADLES will have one grant-funded Intensive Case Manager. Children F.I.R.S.T Kinship Advocates will serve those family members who are providing a kinship placement to the children while the parents are engaged in services to stabilize the home environment. The Kinship Advocates will provide needs assessments, access to community resources, education/advocacy, and support to transition to a parent/child support role post placement. Children F.I.R.S.T and CRADLES staff will focus on service provision and support to the parents with an emphasis on promoting protective factors and mitigating substance abuse, domestic violence and untreated mental illness. These primary partners will also be the designated substance abuse, child welfare, early childhood, and therapeutic services (parent/child) regional partnership members. This group will become the grant management team led by the Project Director and supported by the Project Administrator. This team will meet monthly grant management and quarterly, with other community partners, to address partnership development, system change and sustainability.

Hindrances

A challenge in county government is the time required to certify federal funding, execute contracts and obtain Court approval. TCHHS/VS is aware of these limitations and addresses this by designating a program administrator to oversee the grant project who can successfully navigate the County government system. CPS has significant staff turnover that can hinder implementation of a grant project. To address this concern, we have engaged direct line staff, supervisors and administrators to support this project. Additionally, several persons will be designated from CPS to support the implementation of CSI. CSI will require a philosophical shift for all the partners. This philosophy embraces clinical collaboration on a routine basis, sees parents/children as active, equal participants in the team process, and acknowledges the importance of supporting each individual to reach their capacity while supporting the family as a whole. The individual partners express these values and indicate a willingness to embrace a philosophical shift and to adjust their practice to support the CSI project design. This oversight, management and collaboration will allow CSI to meet their goals of the grant to promote the well-being of children/youth, to increase protective factors and decrease substance abuse, and to enhance and expand a coordinated system of community based services and supports.

3.g. Project Timeline

The project timeline, shown in Table 4, illustrates the steps necessary for implementing CSI. This chart demonstrates that TCHHS/VS, in conjunction with their community partners, will be able to facilitate the implementation of this grant within reasonable and appropriate times that meet the grantor's requirements. The chart identifies major milestones, target completion dates for tasks, and key personnel responsible for implementation and management of the grant (whose grant-related roles were reviewed in detail earlier in this section).

Table 4. Project timeline

Yr 1 Start Date	Project Function	Objective to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Sept 3 2012	Pre-Grant Award Implementation	Review grant design & implementation plan with regional partners	Engaged partners prepared for grant award	Sept 3 2012	Laura Peveto
Sept 10 2012	Pre-Grant Award Implementation	Meet with Travis County grant team to prepare for grant award and implementation	Engaged staff prepared for grant award	Sept 10 2012	Laura Peveto
Sept 10 2012	Pre-Grant Award Implementation	FBSS will develop a plan to implement the UNCOPE	UNCOPE will be utilized by FBSS staff as a screening tool for service identification	Sept 28 2012	Stephanie Weiss
Sept 10 2012	Pre-Grant Award Implementation	Children F.I.R.S.T will develop a plan to transition to a grant program	Children F.I.R.S.T will be available to accept grant assignments by Jan 2013	Sept 28 2012	Mary Williams
Sept 10 2012	Pre-Grant Award Implementation	FBSS and Evaluator will develop the modified risk assessment tool	Modified Risk Assessment Tool that categorizes risk factors of families served	Sept 28 2012	Sanna Thompson Stephanie Weiss
Sept 28 2012	Grant Award Implementation	Complete internal County processing of grant award	Grant Certification Budget Set-Up in SAP	Oct 30 2012	Laura Peveto Auditor/Finance
Sept 28 2012	Grant Award Implementation	County approval of future sub-recipient contracts	Ensure that contracts are effective to the date of the grant award.	Oct 30 2012	Legal / Auditor
Oct 1 2012	Grant Award Implementation	Develop sub-recipient contracts with CCP, CRADLES/AR, Encompass, OCR	Completed contracts to hire project staff to implement grant design	Oct 30 2012	Laura Peveto John Bradshaw Community Partners
Oct 1 2012	Grant Award Implementation	Review Grant Match expectations for partners & acceptable reporting methods	Partners are able to successfully document grant match and submit reports semi-annually	Dec 31 2012	Laura Peveto Community Partners
Oct 1 2012	Grant Award Implementation	TCHHS/VS post the project director position	Project director position is posted which facilitates interviews and hiring of the position	Oct 30 2012	Laura Peveto
Oct 2012 Monthly	Grant Award Implementation	CSI Management Team meet to review grant implementation progress	CSI Management Team will assign and monitor implementation tasks	Monthly	Laura Peveto CSI Primary Partners
Oct 15 2012	Grant Award Implementation	Hire Research Assistant to support evaluation	Encompass – Evaluator hired research assistant to implement evaluation data protocols	Nov 12 2012	Sanna Thompson
Oct 1 2012	Grant Award Implementation	Convene Regional Partnership Meeting	Regional partners will be educated about the grant; their role/responsibilities	Oct 31 2012	
Nov 1 2012	Grant Award Implementation	CSI Management Team introduce the grant to FBSS, CCP, CRADLES staff	Primary partner staff are knowledgeable of the CSI grant and their role with the grant	Nov 12 2012	Laura Peveto
TBD	Grant Award Implementation	Attend Grant Kick-Off Meeting	Primary partners attend Kick-Off to review grant management and evaluation	Nov 2012	Grant Required
Oct 1 2012	Grant Award Implementation	Evaluation protocols established to collect data	Methods established to collect data on both experimental and comparison group	Dec 17 2012	Sanna Thompson
Oct 1 2012	Grant Award Implementation	TCHHS/VS will hire a project director	Project Director will facilitate the implementation and management of the grant	Dec 17 2012	Laura Peveto

Yr 1 Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Dec 1 2012	Grant Award Implementation	Identify changes to database to meet the new grant data protocols/ requirements	Plan & Timeline is developed to have database updated to new grant requirements	Dec 31 2012	Sanna Thompson Laura Peveto (PD)
Dec 17 2012	Grant Award Implementation	Create grant case file; program description; brochures	CSI documents are available for distribution; case file format is established	Dec 31 2012	Laura Peveto Project Director
Oct 15 2012	Grant Award Implementation	Children F.I.R.S.T staff will attend training to comply with grant design	Children F.I.R.S.T will be trained in protective factors; trauma; assessment tools; substance abuse	Dec 31 2012	Mary Williams Laura Peveto
Nov 5 2012	Grant Award Implementation	Hire attorney to represent the child in court ordered services cases	Child has cohesive team of support including legal representation	Jan 7 2012	OCR
Nov 5 2012	Grant Award Implementation	CCP hire 3 child therapist	3 Child Therapists will implement the children tracks of service	Jan 7 2012	CCP
Nov 5 2012	Grant Award Implementation	CRADLES will hire 1 case manager	1 case manager will implement the intensive track of service	Jan 7 2012	CRADLES / AR
Oct 1 2012	Grant Award Implementation	Protocols & Oversight developed for the expenditure of flexible funds	Established guidelines and accountability for expenditure of flexible funding	Dec 31 2012	Project Director / Lp CSI Mgmt Team
Oct 1 2012	Grant Award Implementation	Evaluation release and participation forms developed for Families	Families are able to consent to participate in the CSI evaluation	Dec 31 2012	Research Assistant / Encompass
Oct 1 2012	Grant Award Implementation	IRB completed and submitted for approval	Approved IRB for the evaluation component of the grant	Jan 17 2013	Sanna Thompson
Dec 17 2012	Grant Award Implementation	CSI enrollment process and form established	Families are able to enroll in the CSI project	Jan 2 2013	Project Director Stephanie Weiss
Dec 1 2012	Grant Award Implementation	Solidify enrollment plan for CSI experimental and control participants	Procedure to meet monthly target numbers for enrollments of parent / child / kinship provider	Jan 14 2013	Laura Peveto/PD Stephanie Weiss
Jan 2 2013	Grant Award Implementation	Train CSI project staff on the grant design; role; and responsibilities	Knowledgeable CSI project staff ready to serve clients.	Jan 14 2013	Laura Peveto/ SW Project Director
Jan 2 2013	Grant Award Implementation	FBSS staff will be trained to facilitate SUCCESS Teams	FBSS staff will be able to facilitate SUCCESS Teams	Jan 14 2013	Stephanie Weiss Laura Peveto/PD
Sept 10 2012	Grant Award Implementation	UNCOPE implemented for all FBSS families	Systematic change to FBSS to include a SA screening tool for all FBSS served families	Jan 2 2013 - Ongoing	Stephanie Weiss Project Director
	Grant Award Implementation	FBSS staff use the modified Family Assessment Form	Systematic change to FBSS to include a modify assessment that identifies risk factors	Jan 2 2013 - Ongoing	Stephanie Weiss Project Director
Dec 17 2012	Grant Award Implementation	FBSS staffing will include CSI staff and will use tool to recommend services	Systematic change to FBSS staffing and service assignment	Jan 17 2012 - Ongoing	Stephanie Weiss Project Director
Jan 2 2013	Grant Award Implementation	FBSS staffing Project Director will identify eligible families for CSI	Parent/Children identified for CSI enrollment to enhance functioning and well-being	Jan 17 2012 - Monthly	Project Director Stephanie Weiss
Jan 31 2013	Grant Award Implementation	Meet monthly enrollment goal for each service category: Parent/Child/Kinship	Enroll monthly between 25-29 CSI participants includes all service categories	Jan 17 2012 - Monthly	Project Director CSI Mgmt Team

Yr 1 Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Feb 2013	Grant Management	Monthly CSI Management Meeting	Quality Assessment reviews of grant design and implementation	Feb 2013 – Monthly	Project Director CSI Mgmt Team
Mar 2013	Grant Management	Regular Evaluation Meetings (every other month)	Quality Assessment review of data collection process and results of indicators	Mar 2013 – Every other month	Evaluator/RA CSI Mgmt Team (PD)
Jan 17 2013	Grant Management	Monthly SUCCESS Team Mtgs held for enrolled participants	Team collaboration to support parent/child & kinship provider goals and well-being; collaborative case planning	Jan 2013 – Monthly	FBSS Staff CSI SUCCESS Team
Mar 2013	Grants Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	Mar 31 2012 - Quarterly	Project Director
Mar 2013	Grant Management	Track Service Outputs for Children, Parents, Kinship Provider	Quality Assurance review of grant design and implementation	Mar 2013 - Monthly	Evaluator/RA, CSI Mgmt Team (PD)
Mar 2013	Grant Management	Monthly Data Uploads	Ensure that data is collected and uploaded monthly on both experimental and comparison families	Mar 2013 - Monthly	CSI Mgmt Team (PD)
Mar 2013	Grant Management	Tracking Monthly Expenditure of flexible funds by category	Quality Assurance review of grant design and implementation	Mar 2013 - Monthly	Project Director Laura Peveto
Mar 2013	Grant Management	Monitor Grant Budget	Ensure spending is on track and anticipate budget transfers and/or carry-over requests	Mar 2013 - Monthly	Auditor/Finance
Apr 2013	Grant Management	Begin enrolling Modified Control Group	Modified Control Group is enrolled whenever CSI reaches service capacity	April 2013-Monthly	Project Director FBSS
Apr 2013	Grant Management	Monitor Match contributions and collect Match report from partners twice annually	Partner agencies are submitting their match twice a year to HHS per agreement	Apr 2013 and Oct 2013	Project Director (LP) Auditor
Apr 2013	Grant Management	Semi-Annual Grant Report	Comply with grant requirement of submitting a semi-annual report regarding grant status	Apr 2013 and Oct 2013	Project Director Laura Peveto
Apr 2013	Grant Management	Submission of Grant required financial documents	Semi-Annual submission of the SF 425	Apr 2013 and Oct 2013	Finance/Auditor
Apr 2013	Grant Management	Annual Grant Re-Application	Submit Re-Application of Grant for subsequent year funding	May 2013	Project Director Laura Peveto
May 2013	Grant Management	Federal Data upload	Upload Grant Site Data per Grant Requirements	June 2013	
May 2013	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	May 30 2013 - Quarterly	Project Director
Aug 2013	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	Aug 31 2013 - Quarterly	Project Director
Aug 2013	Grant Management	Annual Grantees Meeting	Site attends the required grantees meeting with partners; enhance learning and TA	Aug 31 2013	Project Director Evaluator / Partners

Yr 1 Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Sept 2013	Grant Management	End of Grant Year Review	Quality Assurance: Management Team reviews strengths and challenges of grant year; develops goals for next year; plans to implement grant design changes with approval	Sept 27 2013	Project Director (LP) CSI Mgmt Team
Sept 2013	Grant Management	Carry – Over Request prepared	Review year one budget expenditures and prepare carry-over requests for services / supports that were started in year one but were not completed	Oct 31 2013	Project Director Laura Peveto Finance/Auditor
Sept 2013	Grant Management	Identify number of CSI Participants in Treatment Group will be carried over to next fiscal year	CSI will adjust projected enrollments based on carry-over participants	Sept 27 th 2013	Project Director CSI Mgmt Team
Sept 2013	Grant Management	Verify number of CSI Participants in Control Group against projection	CSI will enroll families into the modified control group at the rate projected or modify and explain	Sept 27 th 2013	Project Director CSI Mgmt Team
Oct 2013	Grant Management	Monitor Match contributions and collect Match report from partners twice annually	Partner agencies are submitting their match twice a year to HHS per agreement	Oct 31 2013	Project Director (LP) Auditor
Oct 2013	Grant Management	Semi-Annual Grant Report	Comply with grant requirement of submitting a semi-annual report regarding grant status	Oct 31 2013	Project Director Laura Peveto
Dec 2013	Grant Management	Submission of Grant required financial documents	Semi-Annual submission of the SF 425	Oct 31 2013	Finance/Auditor
Yr 2-4 Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Sept	Grant Management	Identify number of CSI Participants in Treatment Group will be carried over to next fiscal year	CSI will adjust projected enrollments based on carry-over participants	Sept 27 th	Project Director CSI Mgmt Team
Sept	Grant Management	Verify number of CSI Participants in Control Group against projection	CSI will enroll families into the modified control group at the rate projected or modify and explain	Sept 27 th	Project Director CSI Mgmt Team
Sept	Grant Management	Meet monthly enrollment goal for each service category: Parent/Child/Kinship	Enroll monthly between 20-25 CSI participants includes all service categories based on C/O	Monthly	Project Director CSI Mgmt Team
Oct	Grant Management	Dissemination Plan is reviewed and plan of action established	CSI will comply with the dissemination plan and produce required products	Annually	Evaluator Project Director
Sept	Grant Management	Grant Design Changes for Year 2-4	Develop and implement a plan to introduce and monitor any grant design changes for each year	Oct 31	Project Director (LP) CSI Mgmt Team
Nov	Grant Management	Regular Evaluation Meetings (every other month)	Quality Assessment review of data collection process and results of indicators	Every Other Month	Evaluator/RA CSI Mgmt Team (PD)
Nov	Grant Management	Review outcomes of closed families; compare results to comparison group	Analysis of outcomes as it relates to families served and closed; review for project design implications	Nov 30	Evaluator/RA CSI Mgmt Team Project Director (LP)

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Yr 2-4 Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Sept	Grant Management	Monthly SUCCESS Team Mtgs held for enrolled participants	Team collaboration to support parent/child & kinship provider goals and well-being; collaborative case planning	Monthly	FBSS Staff CSI SUCCESS Team
Nov	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	Nov 30	Project Director
Oct	Grant Management	Track Service Outputs/Outcomes for Children, Parents, Kinship Providers Treatment & Control	Quality Assurance review of grant design and implementation	Monthly	Evaluator/RA, CSI Mgmt Team (PD)
Nov	Grant Management	Monthly Data Uploads	Ensure data is collected and uploaded monthly on both experimental and comparison families	Monthly	CSI Mgmt Team (PD)
Nov	Grant Management	Tracking Monthly Expenditure of flexible funds by category	Quality Assurance review of grant design and implementation	Monthly	Project Director Laura Peveto
Dec	Grant Management	Review outcome measures	Analysis outcome measures and apply learning to site and grant design	Quarterly	Project Director CSI Mgmt Team
Dec	Grant Management	Federal Data upload	Upload Grant Site Data per Grant Requirements	Dec	Evaluator/ RA
Dec	Grant Management	Monitor Grant Budget	Ensure spending is on track and anticipate budget transfers and/or carry-over requests	Quarterly: Dec; Mar; June; Sept	Laura Peveto (PD) Auditor/Finance
Feb	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	Feb	Project Director
Mar	Grant Management	Monitor Match contributions and collect Match report from partners twice annually	Partner agencies are submitting their match twice a year to HHS per agreement	Apr & Oct	Project Director (LP) Auditor
Apr	Grant Management	Semi-Annual Grant Report	Comply with grant requirement of submitting a semi-annual report regarding grant status	Apr	Project Director Laura Peveto
Apr	Grant Management	Submission of Grant required financial documents	Semi-Annual submission of the SF 425	Apr	Finance/Auditor
Apr	Grant Management	Annual Grant Re-Application	Submit Re-Application of Grant for subsequent year funding	May	Project Director Laura Peveto
May	Grant Management	Federal Data upload	Upload Grant Site Data per Grant Requirements	June	Evaluator/ RA
May	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	May 31	Project Director
Aug	Grant Management	Regional Partnership Meeting	Sustainability; Systems Review; Collaborative Effectiveness; grant service delivery & data update	May 31	Project Director
Aug	Grant Management	Annual Grantees Meeting	Site attends the required grantees meeting with partners; enhance learning and TA	Aug	Project Director Evaluator / Partners

Yr 2-4 Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Sept	Grant Management	End of Grant Year Review	Quality Assurance: Management Team reviews strengths and challenges of grant year; develops goals for next year; plans to implement grant design changes with approval	Sept 27	Project Director (LP) CSI Mgmt Team
Sept	Grant Management	Identify number of CSI Participants in Treatment Group will be carried over to next fiscal year	CSI will adjust projected enrollments based on carry-over participants	Sept 27	Project Director CSI Mgmt Team
Sept	Grant Management	Verify number of CSI Participants in Control Group against projection	CSI will enroll families into the modified control group at the rate projected or modify and explain	Sept 27 th	Project Director CSI Mgmt Team
Oct	Grant Management	Carry - Over Request prepared	Review year one budget expenditures and prepare carry-over requests for services / supports that were started in year one but were not completed	Oct 31	Project Director Laura Peveto Finance/Auditor
Oct	Grant Management	Monitor Match contributions and collect Match report from partners twice annually	Partner agencies are submitting their match twice a year to HHS per agreement	Oct 31	Project Director (LP) Auditor
Oct	Grant Management	Semi-Annual Grant Report	Comply with grant requirement of submitting a semi-annual report regarding grant status	Oct 31	Project Director Laura Peveto
Dec	Grant Management	Submission of Grant required financial documents	Semi-Annual submission of the SF 425	Dec 1	Finance/Auditor
Yr 3 Only Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Oct 2014	Grant Management	Completion of Sustainability Plan	Sustainability Plan reflects community commitment to the grant design and plans for sustaining post grant funding	Dec 31 2014	Project Director
Yr 4 Only Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Oct 2015	Grant Management	Revision of Sustainability Plan	Sustainability Plan reflects community commitment to the grant design and plans for sustainability post grant funding	Dec 31 2015	Project Director
Yr 5 Only Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Sept	Grant Management	Meet monthly enrollment goal for each service category: Parent/Child/Kinship	Enroll monthly between 20-25 CSI participants includes all service categories Based on C/O	Monthly	Project Director CSI Mgmt Team
Oct	Grant Management	Monthly CSI Management Meeting	Quality Assessment reviews of grant design and implementation	Monthly	Project Director CSI Mgmt Team
Sept	Grant Management	Grant Design Changes for Year 3/4	Develop and implement a plan to introduce and monitor any grant design changes for year 2	Oct 31	Project Director (LP) CSI Mgmt Team

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Yr 5 Only Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Nov	Grant Management	Regular Evaluation Meetings (every other month)	Quality Assessment review of data collection process and results of indicators	Every Other Month	Evaluator/RA, CSI Mgmt Team (PD)
Nov	Grant Management	Review outcomes of closed families; compare results to comparison group	Analysis of outcomes as it relates to families served and closed; review for project design implications	Nov 30	Evaluator/RA CSI Mgmt Team Project Director (LP)
Sept	Grant Management	Monthly SUCCESS Team Mtgs held for enrolled participants	Team collaboration to support parent/child & kinship provider goals and well-being; collaborative case planning	Monthly	FBSS Staff CSI SUCCESS Team
Nov	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	Nov 30	Project Director
Oct	Grant Management	Track Service Outputs for Children, Parents and Kinship providers	Quality Assurance review of grant design and implementation	Monthly	Evaluator/RA, CSI Mgmt Team (PD)
Nov	Grant Management	Monthly Data Uploads	Ensure data is collected and uploaded monthly on both experimental and comparison families	Monthly	CSI Mgmt Team (PD)
Nov	Grant Management	Tracking Monthly Expenditure of flexible funds by category	Quality Assurance review of grant design and implementation	Monthly	Project Director Laura Peveto
Dec	Grant Management	Review outcome measures	Analysis outcome measures and apply learning to site and grant design	Quarterly	Project Director CSI Mgmt Team
Dec	Grant Management	Federal Data upload	Upload Grant Site Data per Grant Requirements	Dec	Evaluator/ RA
Dec	Grant Management	Monitor Grant Budget	Ensure spending is on track and anticipate budget transfers and/or carry-over requests	Quarterly: Dec ; Mar ; June; Sept	Laura Peveto (PD) Auditor/Finance
Feb	Grant Management	Regional Partnership Meeting	Community collaboration & Systems Review; grant service delivery & data update	Feb	Project Director
Mar	Grant Management	Monitor Match contributions and collect Match report from partners twice annually	Partner agencies are submitting their match twice a year to HHS per agreement	Apr & Oct	Project Director (LP) Auditor
Apr	Grant Management	Semi-Annual Grant Report	Comply with grant requirement of submitting a semi-annual report regarding grant status	Apr	Project Director Laura Peveto
Apr	Grant Management	Submission of Grant required financial documents	Semi-Annual submission of the SF 425	Apr	Finance/Auditor
May	Grant Management	Federal Data upload	Upload Grant Site Data per Grant Requirements	June	Evaluator/ RA
May	Grant Management	Regional Partnership Meeting	Sustainability & Systems Review; grant service delivery & data update	May 31	Project Director
May	Grant Management	Regional Partners will submit and Monitor budget proposals for sustainability	Regional Partners will have sustained portions or all of the grant design through local funds	Sept 27	Regional Partners

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Yr 5 Only Start Date	Project Goal	Objectives to be Accomplished	Activity Accomplished	Expected Completion Date	Person Responsible
Aug	Grant Management	Regional Partnership Meeting	Plan to implement the sustainability plan for the grant	May 31	Project Director
Aug	Grant Management	Annual Grantees Meeting	Site attends the close out grantee meeting	Aug	Project Director Evaluator / Partners
Aug	Grant Management	No-Cost Extension	Site completes and submits the No-Cost Extension if funding remains and services in year 5 have not been completed	Aug	Laura Peveto (PD) Finance/Auditor
Oct	Grant Management	Semi-Annual Grant Report	Comply with grant requirement of submitting the last semi-annual report regarding grant status	Oct 31	Project Director Laura Peveto
Dec	Grant Management	Submission of Grant required financial documents	Semi-Annual / Close- Out submission of the SF 425	Dec 1	Finance/Auditor
Dec	Grant Management	Final Report	Site provides thorough report on the 5 year grant: lessons learned; data analysis; service recommendations; replication of model	Dec 31	Project Director Evaluator Laura Peveto
Dec	Grant Management	Final Data Upload	Final Data for the grant uploaded to Federal partner	Dec 15	Evaluator/RA Project Director

If extension is granted then continue service delivery and documentation per grant guidelines and follow same close-out procedures listed above for the No-Cost Extension period.

Referenced Person/Roles:

Name/Role	Agency/Affiliation	Title/Role	Responsibilities
Laura Peveto (LP)	TCHHS/VS	Prevention/Intervention Mgr	Grant Management/Project Administration
Finance	TCHHS/VS	Contract Specialist - Finance	Grant Sub-recipient Contracts, Budget
Auditor	Travis County Auditor's Office	Auditor for Grants	Audits Sub-recipient contracts; and HHS expenditures; grant compliance; budget
Project Director (PD)	TCHHS/VS	Grant-funded Project Director for CSI	Grant Management; System Collaboration; Sustainability
Evaluator - Sanna Thompson	Encompass	Evaluator for CSI	Evaluation component of the CSI grant
Research Assistant (RA)	Encompass	RA for CSI	Data collection and management
Regional Partners	Travis County	Identified Grant Partners	System Change; Collaboration; Sustainability
CSI Management Team	Travis County	Primary Partners for CSI	Support the day to day operations of the grant
Mary Williams	TCHHS/VS	Supervisor for Children F.I.R.S.T	Oversee service delivery to parents in regular track
CCP	Center for Child Protection	Primary Partner for Children Svs	Oversee service deliver to children
OCR	Office of Children's Representation	Primary Partner for Children Svs	Oversee legal services to children
CRADLES/AR	Austin Recovery	Substance Abuse Provider	Oversee service deliver to parent in intensive track

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3.h. Contribute to Increased Knowledge & Dissemination of Findings

The CSI project design dissemination goals are to 1) provide the local community with relevant data regarding the target population; 2) provide data on the effectiveness and ability to replicate the project model in other communities; 3) provide evaluative data on the unique aspects of the CSI project design; 4) provide findings that assess the impact of using screening/assessment tools to guide service intervention and planning; and 5) identify the relationship between a parent's UNCOPE score and their child's CBCL or ASQ-SE.

Dissemination objectives are to create a more sophisticated understanding of the needs of the target population than presently exists in the community, to support the replication of the program design in other communities, to highlight CSI practices that have made a positive impact with families, to understand the value of and advocate for the use of screening/assessment tools with the child welfare population, and to explore whether certain ratings on the UNCOPE can be used to alert child protective services staff to explore potential areas of concern for children's social/emotional development .

Information including data and knowledge will be disseminated to local community members, state officials and the federal grant community. At the local level there will be an emphasis on distribution to direct service providers, agency administrators, government officials and advocacy groups. The data will be disseminated in a variety of ways including: papers, presentations, annual reports, and poster sessions. This would be in addition to fulfilling the reporting requirements of the grant. This dissemination plan includes the provision of both local and national entities with rich demographic data on the target population. Specifically, outcomes regarding the effectiveness of the CSI project model, data on specific interventions such as collaborative case planning, experiential therapies, and the use of screening and assessment tools

will be shared. This will result in increased knowledge and understanding of these children and families and how to intervene effectively. It will also highlight the power and usefulness of community collaborations to identify and address the needs of a particular population.

3.i. Project Design - Sustainability Plan

In the design of CSI, sustainability was a key consideration in the selection of primary partners, screening tools and the roles and responsibilities of partners and grant-funded staff. The project only funded positions within agencies that had the capacity and the potential willingness to sustain their role in CSI, post-grant. The proposed sustainability plan for CSI focuses on specific accomplishments each year of the grant award. In grant year one and two, implement and adjust the CSI project design as indicated by data and experience and begin assessing the project's viability in conjunction with whether the proximal and distal outcomes are being obtained – continue assessment in year three. In year two, develop and disseminate local data reports that are tailored to the interests and needs of the partners and highlight the success of the program participants. In grant year three and four, develop and revise a detailed sustainability plan that focus on sustaining each element of the design independently with a designated champion and highlight the program to local funding entities like City and County government. In grant year five, primary partners will submit funding proposals to sustain CSI post grant funding. TCHHS/VS will remain the designated coordinator of the project, although, the Project Director position will not be continued post grant. Additionally, the feasibility of sustaining grant-funded positions post-grant has been reviewed with these results: CSI maximized local resources by converting five local case management positions and a supervisor to support the CSI grant design. These positions are fully supported and funded by general revenue dollars and will remain committed to the project design post grant. The CCP, which would receive funding

for three Lead Child Advocates under the CSI project design, has the physical space and supervision capacity to manage the positions. The positions fit into their overall strategic planning for CCP and the agency has the means to raise capital to fund the positions post-grant. The CRADLES position could be sustained through expanding the grant funding under the AIA programs. Finally, funding could be pursued for the attorney position through county funding. The collaborative system of coordinated services would be maintained through either MOUs or a charter and routine partner meetings post-grant and the training capacity would be maintained by establishing local experts and collaborative partners to host and support continuing education units.

4. EVALUATION

4.a. Design and Sampling Strategy

The evaluation design for this project is a treatment and modified randomized control group methodology that includes pre/post testing of various measures of parent and child outcomes. The evaluation will track and examine accomplishments of the *Children's Success Initiative* specific program goals over the 5 years of grant funding (Sept. 30, 2012 – Sept 29, 2017). Employing both formative and summative strategies will result in an evaluation that improves understanding of specific program processes and also monitors child and parent/caregiver outcomes.

The design for the evaluation includes a treatment group with a modified randomized control group. The sampling frame will include families who are identified by Child Protective Services (CPS) as having a substantiated case for child maltreatment, with the likelihood that parental substance abuse is a risk factor. Those families whose children are not being removed to foster care, but remaining with the immediate family or kin are admitted to Family Based Safety Services (FBSS), a division of CPS. Families who meet these criteria will be identified as

possible participants for the *Children's Success Initiative (CSI)*. The FBSS caseworker will meet with families and complete a family assessment, including the UNCOPE, a short, standardized tool to screen for abuse and dependence for alcohol and other drugs. Families who score higher than 1 (on the 6 point scale) on the UNCOPE will be eligible for participation. The treatment group will receive the *CSI* program and the modified control group will receive services as they are typically provided by FBSS to families, youth and children.

Due to budget constraints in the number of families that can be served during the grant period, a modified randomized control group will be instituted. This method assumes that all participants who are identified as FBSS cases are similar and that assignment to either group would be without bias in terms of parent or child characteristics. In order to ensure the groups are as similar as possible, while addressing the ethical issues associated with randomly assigning families to a 'no treatment control,' families will be assigned solely on the basis of the availability of treatment capacity in the *Children's Success Initiative*; once spaces are filled in *CSI* or experimental condition, participants will be entered into the modified control group and receive FBSS services as usual. The treatment and modified control groups will be similar in that families are identified as having substantiated maltreatment of a child and met substance abuse/dependency screening criteria.

Although this method of recruitment and assignment to groups does not allow for true random assignment to treatment or control groups, this method addresses program limitations and ethical considerations. It also recognizes the reality that having the assured volume of participants in the treatment condition is as important as attempting to create theoretically unbiased treatment and control groups. Given this strategy of recruitment, *CSI* will serve approximately 245 - 282 families each grant year (approximately 1322 over the 5-year grant

period). It is anticipated that approximately 190-278 families will be recruited into the modified control group each grant year, resulting in 1300 control group families over the 5-year grant period.

4.b. Informed Consent procedures

After the screening and intake information has been gathered with the parent and appropriateness for recruitment into the program is confirmed, the parent will be presented with the option of participating in the program. The specifics of the program will be described and each parent will receive an "Informed Consent" form that includes an explanation of the program, including who is conducting the study, that participation is voluntary, that information will be kept confidential, and warned that some questions may be potentially objectionable but that they can stop their participation in the evaluation process without it impacting their ability to receive services. They will be informed that *CSI* will maintain records on them and their child(ren) during the course of the program and for at least four-years after completing the program. These data will be used on an aggregated basis for analysis, reporting to federal officers, manuscripts and presentations.

Review of this project by an Institutional Review Board (IRB) will occur if funded. The program evaluator is faculty at the University of Texas at Austin; therefore, the University of Texas' IRB will provide this service. The evaluator will develop the proposal to the IRB and monitor all issues associated with the informed consent process. A suggested consent form is found in the Appendices.

4.c. Data collection

During the intake process by the Family Based Safety Services caseworker, all families will complete (1) the *UNCOPE*, (2) *Modified Family Risk Assessment Checklist*, and the (3)

Texas Guided Risk Assessment. These indicators will provide assurance that the appropriate population is being served and provide a baseline for various risk and protective factors. Those with an UNCOPE score greater than 1 will be further assessed by FBSS workers to determine the most appropriate 'service track' to be offered to the family. These two instruments will be used to provide caseworkers in determining the most appropriate service track for individual families, including (1) child/youth, (2) parent treatment, (3) intensive, and (4) regular track. The same data elements will be collected for the program evaluation across each of these tracks in the experimental group and all participants in the modified control group.

The UNCOPE is an excellent screening tool that consists of six questions developed from existing instruments and previous research. It is a simple and quick means of identifying risk for abuse and dependence for alcohol and other drugs and is appropriate for use with caseworkers who have limited training in substance abuse issues.

The *Modified Family Risk Assessment* is a more qualitative tool that has been used by caseworkers in Texas for many years. This assessment will be modified to include more quantitative checklists of risk and protective factors and service needs that caseworkers will address throughout their period of interaction with families.

The *Texas Guided Risk Assessment* will also be conducted with each family. This assessment identifies a variety of risk and protective factors and is routinely collected by CPS caseworkers during home visits across the state of Texas. Various concepts associated with risk behaviors and responses have been developed especially for this population by the Texas Department of Family and Protective Services to meet the needs of this client population. This tool was developed and is currently being used by CPS caseworkers in Travis country. It will be used during the first year of the project, but may be changed to another more standardized tool

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with validated reliability and validity during the project period. This risk assessment will provide outcome information that will be used to evaluate the child/adolescent's changes in vulnerability, capabilities, maltreatment, etc. over the course of the project period.

All standardized instruments included in the project are detailed and summarized in Table 3, page 30 (Laura's section). Additional data elements will be collected from various sources, such as the Child Protective Services management information system database that is managed by the Texas Department of Family Protective Services (DFPS). These data elements are specified in the tables that follow (Table 5 and 6).

In order to manage all the sources of data, one of the major tasks for the evaluation will be the development and on-going management of a specialized database where all data will be collected. In the previous Regional Partnership Grant Program, a web-based database was developed. The ease of access by various users was enhanced as caseworkers with access to the internet could enter their data in a password protected and secure site, which created greater ease in data collection than would have been possible with paper/pencil data collection or sole reliance on data sources from various agencies. The database and web portal will be developed for the *CSI* project, while building on the previous RPG database framework. This will permit connectivity between data collected especially for *CSI* and data collected by the state DFPS partners, while taking advantage of lessons learned and data structures from the RPG grant. It is likely that the previously developed database can be modified for use in the proposed *CSI* project. The web-based data portal is housed in a highly secure location that meets all the criteria set forth by Health Insurance Portability and Accountability Act (HIPAA).

Specific activities include:

- (1) Develop database for all data entry to be used by project director and evaluation team for gathering data from various partners on an on-going basis
- (2) Develop and modify database for capability to run reports of requested indicators by federal and local program staff for annual and bi-annual reports,
- (3) Extract and manage data from the various partners,
- (4) Warehouse the data in secure and HIPAA compliant site and administer data privacy and validity for HIPAA,
- (5) Conduct monthly security checks of data and data sources,
- (6) Provide ongoing maintenance of web-based database including password and user administration,
- (7) Develop process for federal data upload requirements

4.d. Evaluating implementation of program delivery PROCESSES

This section provides detailed descriptions of the procedures and methods that will be used to address evaluation of the *three specific goals* to be implemented for the *Children Success Initiative* program. This section identifies specific procedures and how they will be measured and evaluated to address whether or not they were attained. The focus of this section is on evaluating the process of conducting the program. Specific data sources/measurement tools to evaluate these processes are listed in the following table (Table 5) according to each of the major goals of the project.

Table 5. Process measures

GOAL 1 Child Focused	Promote the early identification of children and youths' social and emotional needs and ensure access to services and supports that enhances their well-being		
PROCESS MEASURES	Indicators/data elements	Data source	Time-frame
Child Sample demographics	Demographics of child, including birthdate, gender, ethnicity, referral sources, language spoken at home,	Modified Family Assessment Guide	Intake

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(serving appropriate population)	living situation, maltreatment type		
Services assessed as need and provided if needed	Number (%) of indirect and direct services delivered to child: Case management, child care, education, parenting, legal, healthcare, financial, housing, mental health, etc.	FBSS Caseworker/CSI database	6 months Discharge
Program completion status	Number (%) completed, terminated, transferred, etc.	FBSS caseworker/CSI database	Discharge
Comprehensive service support	Monitor whether the service was received, what was the level of intervention, number of children eligible for service, number of children receiving service, number of days using service: <ul style="list-style-type: none"> o stable housing o educational needs o mental health o medical services o level of CPS involvement 	FBSS caseworker/CSI database	6 months Discharge
FBSS Family meetings	<ul style="list-style-type: none"> ▪ How many family-based meetings held ▪ Number of family members attended 	FBSS caseworker/CSI database	6 months Discharge
GOAL 2 Parent Focused	Provide services and supports to parents that promote protective factors and decreases substance abuse		
PROCESS MEASURES	Indicators/data elements	Data source	Time-frame
Increase substance abuse treatment retention	<ul style="list-style-type: none"> ▪ Number of days from admission to discharge from residential treatment. ▪ Number of days remain engaged with child welfare worker following discharge from residential treatment 	FBSS caseworker/CSI database	6 months Discharge
Program completion status	Number (%) completed, terminated, transferred, etc.	FBSS caseworker/CSI database	Discharge
Services assessed as need and provided if needed	Number (%) of indirect and direct services delivered to parent: Case management, child care, education, parenting, legal, healthcare, financial, housing, mental health, substance abuse services, etc.	FBSS caseworker/CSI database	6 months Discharge
Comprehensive service support	Monitor whether the service was received, what was the level of intervention, number of parents eligible for service, number of parents receiving service, number of days using service: <ul style="list-style-type: none"> o Substance abuse treatment o Educational/employment needs o Mental health o Medical services o Housing o Parent training 	FBSS caseworker/CSI database	6 months Discharge
FBSS Family meetings	<ul style="list-style-type: none"> ▪ How many family-based meetings held ▪ Level of each family member's willingness to provide assistance and type of assistance including kinship care 	FBSS caseworker/CSI database	6 months Discharge
GOAL 3 Community Focused	Further expand and enhance a coordinated system of community-based supports for children, youth and families involved in the child welfare system		

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Measures PROCESS	Indicators/data elements	Data source	Time-frame
Improve the knowledge, communication, and collaboration of the community through cross-trainings	<ul style="list-style-type: none"> • Number of hours of cross-trainings delivered to community partners • Types of trainings delivered • Number of people who attended each training 	Program director	Annual/bi-annual report
Integrate the FBSS-involved families and their caseworkers into the wider service community	<ul style="list-style-type: none"> • Number of services delivered to families • Number of hours of services provided, • Number of families served, • Number of children served, • Number of individuals and families who are assessed as needing various services • Number of individuals and families who are assessed as needing various services and received them 	Program director	Annual/bi-annual report
Increase service capacity	<ul style="list-style-type: none"> ▪ Number of children/parents successfully completing <i>Children's Success Initiative</i> ▪ Number of families reunified or remaining intact at program discharge ▪ Number of families who have no re-referrals to Child Protective Services during their engagement in the program. 	Child Protective Services (DFPS) management information system database	Annual/bi-annual report

3.e. Evaluating participant OUTCOMES based on program goals

This section provides detailed descriptions of the practices and procedures that will be used to evaluate outcomes of children and parents associated with Goals 1 and 2 (see logic model) to be implemented in the *Children's Success Initiative*. This section identifies specific measures to evaluate change from baseline to discharge; outcomes will be measured at intake and compared to the same measures at discharge from *CSI* to demonstrate changes over time. Treatment versus modified control groups will also be assessed to determine differences in child and parent outcomes. Measures are overwhelmingly reported by the parent for children less than six years of age and require different forms of assessment. Many of the measures are standardized and have evidence-based reliability.

QUALITATIVE interviews will also be conducted with a random sample of parents at exit from the program. The program evaluator and research team members will develop a series of open-ended questions that queries their perceptions of the usefulness and effectiveness of the program. Questions developed for other qualitative interviews that seek perceptions of participants concerning program strengths and challenges will be used to develop these questions. Questions may include: (1) What services or supports helped/did not help you, (2) In what ways have you changed since being involved in the *Children's Success Initiative*, (3) What has been your biggest support/challenge in your substance abuse recovery, (4) What parts of the program seemed to have the most benefit to the safety and well-being of your child? Data from these interviews will be collected through audio recording the discussions and transcribing them. These data will then be summarized into various themes to organize the material. Approximately 5 individual cases will be sought each year of the project; more if resources permit. The following table (Table 6) identifies the specific data elements to be used to evaluate child and parent outcomes from intake to discharge from the *CSI* program.

TABLE 6. Outcome measures of child and parent (family)

GOAL 1 Child focused	Promote the early identification of children and youths' social and emotional needs and ensure access to services and supports that enhances their well-being		
OUTCOMES	Indicators/data elements	Data source	Time-frame
Child/Adolescent Placement	<ul style="list-style-type: none"> ▪ Number of children in Family Based Safety Services each month ▪ Length of stay from date of entry into care until date of reunification or another placement ▪ Number of children in kinship care per month ▪ Number of children remaining with mother in treatment per month ▪ Number of children who have a reduction in out-of-home placements during project period ▪ Number of events of children moving from one placement to another during project period ▪ Number of families who have no re-referrals to Child Protective Services during their engagement in the Parenting in Recovery 	Child Protective Services (DFPS) management information system database	Intake 6-month Discharge

	<p>program.</p> <ul style="list-style-type: none"> ▪ Whether the family is an in-home case or if the child has been removed from the home ▪ Whether some children have been removed while others remain at home ▪ Whether it is a voluntary case or is court involved ▪ The court has requirements and deadlines for specific hearings and achieving necessary outcomes - met or not ▪ Permanency/reunification goal met for child 		
Service needs	Services for developmental, mental health, educational, and medical needs identified/assessed and received needed service	FBSS Modified Family Assessment Guide – FBSS caseworker	Intake Discharge
Maltreatment	Initial substantiated/indicated maltreatment Reoccurrence of maltreatment Type of maltreatment (physical, sexual, neglect, etc.)	FBSS caseworker and Child Protective Services management information system database	Intake 6-month Discharge
Safety	<ul style="list-style-type: none"> ▪ Number of re-referrals of child to CPS ▪ Number of children required medical attend due to physical abuse ▪ Number of children whose caregiver unwilling to meet child's needs 	Child Protective Services management information system database	Intake 6-month Discharge
Permanency of living situation	<ul style="list-style-type: none"> ▪ Remained in parent's care ▪ Length of time in home during program ▪ Number of placements outside the home since discharge from CSI program 	FBSS caseworker/ Child Protective Services management information system database	Intake 6-month Discharge
Child/adolescent risk and protective factors and well-being	<p>Texas Guided Risk Assessment</p> <ul style="list-style-type: none"> ▪ Child vulnerability: fragility and behaviors ▪ Maltreatment patterns: severity, chronicity, trends ▪ Home and Social environment: dangerous exposure, social climate, social violence 	Child Protective Services management information system database	Intake 6-month Discharge
Emotional and behavioral health	Improve behavioral, emotional, and social problems; Child Behavior Checklist will be used to assess these behavioral and emotional competencies of child/adolescent as viewed by parent	Child Behavior Checklist – CCP Therapist	Intake Discharge
Mental health related to trauma	Improve children's mental health, including PTSD, anxiety, depression	Trauma Symptom Checklist (TSC) - CCP therapist	Intake Discharge
GOAL 2 Parent-focused	Provide services and supports to parents that promote protective factors and decreases substance abuse		
OUTCOMES	Indicators/data elements	Data source	Time-frame
Parent substance abuse	Decrease substances used and problems related to substance use	UNCOPE – FBSS caseworker	Intake Discharge
Family risk and protective factors	<p>Texas Guided Risk Assessment</p> <ul style="list-style-type: none"> ▪ Caregiver capability: knowledge/skills, control, function ▪ Quality of care: emotional and physical care 	FBSS caseworker and Child Protective Services (DFPS) management	Intake Discharge

	<ul style="list-style-type: none"> ▪ Home and Social environment: dangerous exposure, social climate, social violence ▪ Response to CPS intervention: attitude, deception ▪ Protective capacities: caregiver protection, support network 	information system database	
Family functioning, concerns, strengths	Improve family interactions, decrease law enforcement involvement, domestic violence, balance of perceptions of reality relative to life circumstances, improve communication, social skills, safety	FBSS Modified Family Assessment Guide – FBSS caseworker	Intake Discharge
Parenting Skills	Improve parental functioning, increase positive perceptions and competency related to parenting and raising children, increase understanding of child development.	Adult-Adolescent Parenting Inventory (AAPI-2) – CRADLES/Child First caseworkers	Intake Discharge
Family Protective Factors	Increase family protective factors of family functioning, emotional support, concrete support, knowledge of parenting and nurturing and attachment issues.	The Family Protective Factors Survey (PFS) – CRADLES/Child First caseworkers	Intake Discharge
Service needs	Services for substance abuse, mental health, educational/employment, housing, medical, transportation, child care needs identified/assessed and received needed service	FBSS Modified Family Assessment Guide – FBSS caseworker	Intake Discharge
Parenting Stress	Decrease the levels of stress in the parent/child relationship and increase social support and connections	Parenting Stress Index (PSI) - CCP therapist	Intake Discharge
Address childhood maltreatment	Recognize adverse childhood experience as adult	Adverse Childhood Experiences (ACE) – CRADLES/Child First caseworkers	Intake Discharge

4.f. Additional Evaluation Activities

(1) Training in conducting UNCOPE

The evaluator (S. Thompson) is familiar with the delivery of this instrument and will train an identified FBSS staff member to teach individual case workers in using the UNCOPE. The UNCOPE was chosen for implementation as a new tool for FBSS caseworkers as they have no standardized assessment or screening instruments to identify parents who might have problems related to substance abuse/dependency. As this instrument is relatively simple to use, caseworkers are more likely to successfully use this instrument than would occur with more complicated ones.

The UNCOPE screening instrument will be completed by the FBSS worker with each client to inform more effective treatment planning related to substance dependency. As this measure asks the individual about their past year alcohol/drug use and also symptoms associated with abuse and dependency, the FBSS caseworker will collect data from all participants concerning their use at intake and at discharge from the program. Comparisons between treatment and modified control groups will be conducted to determine changes in substance use in relation to program activities.

(2) Train FBSS caseworkers and other partners concerning substance use issues

The on-line, interactive NCSACW course includes modules that provide links to worksheets, pop-up questions, case studies, and information boxes to support learning. The course concludes with a "Knowledge Assessment" that tests how well the individual understands the material. FBSS caseworkers will be encouraged to complete this assessment, after which they will print out the "certification of completion." An identified FBSS staff will monitor and report completion to the evaluator.

4.g. Analytic procedures

The evaluator will conduct analyses of all data using SPSS statistical software package, version 18. For each broad goal, specific data elements/indicators will be analyzed. As there are process measures associated with implementing the program and outcome measures focused on changes in participant behaviors and characteristics (including treatment and modified control groups), specific analyses will be required to assess each goal. For example, Goal 3 focuses on the cross-systems training of child welfare workers and other community partners in parenting. To evaluate the implementation process and effectiveness of these trainings, the evaluator will gather information from the trainers and project director concerning the number of individuals

who attended and their specific roles. These data will be entered into the data entry web-based system and monitored for completeness and quality. Data will be reported in bi-annual and annual reports. Similar methods will be used for each of the process measures with data analysis focusing on simple frequencies and percentages across indicators.

Goals 1 and 2 focus on outcomes associated with the child(ren) and parent participants. Most of these data will be collected from the Family Based Safety Service caseworker, other partners, and the research assistance associated with the evaluation. The research assistant will be particularly important for collecting data on the modified control group. Descriptive analyses will predominately focus on frequencies and percentages; however, all data will also be compared for treatment and control groups by conducting *T*-tests or chi square analyses. Between groups and within group changes will be monitored across various measures for these two goals (see measures table for specific variables of interest). As more data is collected and the sample size increases during the course of the grant, it will be possible to conduct more refined analyses, such a logistic regression to identify characteristics of parents and children that are significantly related to specific outcomes, such as safety, permanency, and well-being.

4.h. Procedures for managing and monitoring the evaluation

Procedures for training staff to collect evaluation-related information:

Data will be collected from a variety of sources, including Child Protective Services management information system, Family Based Safety Service caseworkers, and individual interviews with participants. The service partners will train their staff in collecting identified data and will continue to require the staff to accurately complete data entry into their individual systems. For some of the data, however, the evaluator and research assistant will be responsible for collecting specific types of information from various sources, such as individual participants.

Especially for the modified control group, other mechanisms for gathering data will be necessary. The evaluator will work in conjunction with the project director to ensure data is collected consistently and accurately, regardless of the source.

Procedures for conducting quality control checks of the information collection process:

Data will be collected by the evaluator on a continuous basis, but sweeps of the Department of Family Protective Services databases for Texas will occur at 6 month intervals. Gathering the data from all sources regularly and frequently will ensure that if problems arise they can be corrected quickly. It will also provide the evaluator with a mechanism to ensure that missing data is minimal.

5. ORGANIZATIONAL CAPACITY

5.a. Applicant Experience

The proposed Children's Success Initiative (CSI), as described in the Project Narrative, will involve a large collaboration among several community partners and Travis County Health and Human Services and Veterans Service (TCHHS/VS) working to address the impact of parental substance abuse on the social-emotional, behavioral and mental health of children. CSI aims to improve parenting skills, reduce substance abuse, and support enhanced collaboration among child welfare, early education and other relevant child-serving agencies. The four key agencies partnering with TCHHS/VS on CSI will be Family Based Safety Services (FBSS) of the Department of Family and Protective Services, Center for Child Protection (CCP), Austin Recovery (CRADLES) program, Travis County's Office of Child Representation, and the Children F.I.R.S.T unit of TCHHS/VS. This assembly of community partners and child-serving agencies is not a novel approach within Travis County; several of the agencies have collaborated on numerous grant-funded projects for years and each agency has significant

experience developing, implementing, managing and evaluating projects similar in nature and scope around this specific issue area. A description of each partner's past experience and organizational capability is outlined below.

TCHHS/VS Experience

TCHHS/VS, the lead applicant, has vast experience with both discretionary and entitlement grant funding, and is well-poised to assume responsibility for this new project having overseen grants ranging from \$10,000 to \$2.9 million for more than 20 years. Currently, TCHHS/VS oversees 15 grants. Nearly all of the funding received (95%) is from federal sources, while the remainder is local funding. Travis County was one of the original grantees for the initial round of Regional Partnership Grant funding issued by the Department of Health and Human Services' Administration for Children and Families in 2005 for its 5 year, \$2.5 million Parenting in Recovery (PIR) program, a program similar in nature that provides treatment and recovery supports for women involved in the child welfare system due to substance abuse and dependency. It also has collaborated with the Travis County Family Drug Treatment Court (TCFDTC) in applying for and managing a state grant from the Texas Governor's office that added men to PIR's eligible client population for treatment and recovery supports, as well as administering a grant from the Department of Justice (DOJ) to augment services to the children of TCFDTC participants. The DOJ grant, more commonly known as the Children's Continuum program enhanced the operation of the TCFDTC by allowing early identification of a child's needs, immediate intervention, and monitoring.

The Office of Children Services (OCS) is the office within TCHHS/VS where the proposed program will be operated. OCS is familiar with overseeing grant programs of different sizes including: the PIR Program, the Children's Continuum and a Child Protective Services (CPS)

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Reintegration Project. OCS has 2 proposed grant-funded positions -- both to be overseen by CSI's Project Administrator, thereby demonstrating its familiarity, skill and preparedness for assuming the responsibilities entailed with this new regional partnership grant.

Partners' Experience – Ability to fulfill assigned roles –

Family Based Safety Services (FBSS) is the unit that serves families for whom an investigation has been completed and there was a finding of abuse/neglect and/or significant risk factors that warranted further involvement by CPS through community-based services. The Texas Department of Family and Protective Services (DFPS) is the regulatory agency that oversees CPS. The State of Texas is divided into geographical service regions. Region 7 contains 30 counties, of which Travis County (the proposed service area) is the largest. Ms. Stephanie Weiss, the Region 7 Program Director, has more than 8 years of experience with DFPS in various positions ranging from investigator for the TCFDTC to FBSS Supervisor to her current position. She also has community based experience having worked as a Child Advocate at Safeplace with children exposed to sexual and domestic violence. She continues to broaden her understanding of the effects of substance abuse on children through her ongoing attendance at training and professional development on the subject matter. Under Ms. Weiss, who was one of the primary collaborators on the PIR grant, the regional office has been able to successfully initiate and sustain the collaboration between the child welfare, substance abuse prevention, /treatment and other community based supportive systems serving the target population.

The Center for Child Protection (CCP), a nationally accredited children's advocacy center, is the first stop for children in Travis County who are suspected victims of sexual abuse, physical abuse, or neglect and for children who have witnessed a violent crime. The Center is a

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child-friendly, specially-equipped facility where children go for recorded forensic interviews, medical exams, counseling and intervention during the investigation and prosecution of child abuse cases. It is the only nonprofit in Travis County involved in the investigation of crimes against children. All services are provided to children and their protective caregivers at no charge and most are available in English and Spanish (Center for Child Protection, 2012). CCP staff have considerable experience in serving the target population. Two of the key staff from the agency (both the Clinical Director and Director of Program Services) have more than 40 years combined experience working with the client population, in both clinical and administrative settings, and are extremely knowledgeable about the issues facing such communities not only in providing them with time-sensitive treatment, supports and training, but with navigation of other social service systems. The Clinical Director is a Licensed Clinical Social Worker, having provided assessments, counseling (individual, group and family) as well as crisis counseling and discharge planning in various multidisciplinary team settings. The Director of Program Services served several years within the state's Child Protective Services unit in the field and as an administrator – her first-hand experience and extended knowledge of child welfare provide a key advantage for families served by CCP. Nearly 40% of CCP's budget comes from grant funding and is used towards programming and services for abused and neglected children and their families (Center for Child Protection, 2010).

Austin Recovery, the parent organization of the CRADLES project, is an important local resource for substance-abusing women in Travis County, including pregnant women and women with very young children. Since 1967, the 501(c)(3) community-based nonprofit has provided affordable, effective, compassionate drug and alcohol treatment for individuals and families. The organization serves some 3,400 clients and their families annually. It has an annual budget of

approximately \$12 million. **CRADLES**, a program of Austin Recovery, stands for Collaboration to Reduce Abandonment and Deliver Local Education and Support and serves women in Travis County who are either pregnant or have a child under the age of six, are affected by substance abuse and have a high risk of abandoning or being separated from their young child(ren). CRADLES staff identify and address the needs of eligible families with infant and children by providing service that include family needs assessment, in-home support, parenting coaching, child development education, and parenting skill assessment(s).

The Travis County Office of Child Representation (OCR) provides legal services to youth and children involved in civil CPS cases filed in Travis County. OCR staff consists of a multidisciplinary team including attorneys, a social worker, a paralegal and two legal secretaries. OCR acts as the Attorney ad Litem in each case that is appointed to the office. In the role of Attorney ad Litem, the OCR attorney assigned to the case will counsel the client about his/her legal options in a developmentally appropriate way and, if the client is able to direct legal representation, the attorney will advocate the client's position to the court. If the client is unable to direct representation (due to youthful age or some other factor), the attorney will substitute his/her judgment on the client's behalf and will advocate to the court in that way.

Children F.I.R.S.T is a TCHHS/VS program that provides referrals, supports and training through home visitation. The target populations for these services are children and families involved in the child welfare system who are at risk for abuse/neglect or who have already experienced judicial intervention for abuse/neglect. The program's goals are: To ensure safe and healthy children, to decrease or prevent the removal of children from their families due to abuse and neglect when possible, to improve individual parent functioning and family functioning by teaching families to cope with and or resolve their economic and social challenges, and to

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connect families to available community resources. Children F.I.R.S.T. staff consists of a unit of five case coordinators and one supervisor. The unit is co-housed with child welfare staff. The case coordinators maintain caseloads of 10 families providing home-based services. The unit receives their family referrals from the various units (conservatorship, family-based safety services, investigations) of child welfare. The case coordinators work collaboratively with the families to develop an individualized service plan and provide targeted services and linkages to community resources. Children's F.I.R.S.T. has a budget of nearly \$400,000, all of which is locally funded. (Travis County Health and Human Services and Veterans Service, 2012).

Evaluator Experience

Sanna J. Thompson, Ph.D. is an Associate Professor at The University of Texas at Austin, School of Social Work with several years of experience as an evaluator and principal investigator on federal grants and other funding sources. Her research has focused primarily on high-risk youth and their families, with special emphasis on runaway/homeless youth and young adults. Dr. Thompson's publications and grants reflect her expertise and focus on issues of unaccompanied adolescents and their families, especially those involved with CPS. CSI builds logically on her prior work with vulnerable populations and interventions. She has received grant awards from the National Institute of Drug Abuse and National Institutes on Nursing Research to develop and evaluate interventions aimed at improving engagement, retention, and outcomes of youth and families in treatment. Dr. Thompson has collaborated extensively with Encompass Medical Management (EMM), a data management company, throughout the Regional Partnership grant to Travis County (Funded by Administration for Children & Families). EMM provided technical expertise, such as the development of online reporting systems and databases

for use by multiple partners, data management from multiple sources, and reporting to funders, including data uploads to grantors.

5.b. Key Staff – relevant knowledge, experience and capabilities/description of roles

The proposed CSI “core” staff will be a cross-functional, cross-system professional team comprised of the following positions (both grant- and match-funded): 1 *Project Director*; 3 *Child Therapists* (referred to also as *Child Advocates*); 1 *Attorney Ad Litem* to represent *Children*; 1 *Intensive Case Manager*; 2 *Kinship Coordinators*, 4 *Parent Advocates*; an *Evaluator*; and, 1 *Research Assistant*. Other project-supportive staff will include a Program Administrator, a Contract Specialist to assist with post-award financial obligations; the Travis County Auditor to assist with audits, contracts, reporting, compliance and budget issues and supervisory or peer level staff at each partner agency that assist in implementation of the program design. Further explanation of each of the staff's responsibilities is explained in the Approach section of this narrative which begins on page 18.

The hiring process for the position of *Project Director* will begin upon notification of grant award. The *Project Director* will be responsible for implementation of the grant design and management of the grant in collaboration with the Project Administrator and grant partners. Until that position is filled, the existing Prevention and Intervention Manager (PI) in the Office of Children's Service, Ms. Laura Peveto, will serve in that capacity. Upon hire of the position, the PI Manager will resume the evolve into more of a *Project Administrator* role, supervising the *Project Director*; assisting with programmatic oversight; and, serving as a liaison to other County departments. To date, Ms. Peveto has played a pivotal role not only within TCHHS/VS and the County, but the community at large. She has served as a leader in identifying key needs of women, children and families, identifying resources, fostering relationship with key staff in

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different community, state, and federal agencies that have led to a strategic partnership which have made possible many cross-stream collaborative efforts, such as the previously mentioned Regional Partnership Grant.. Trained as a social worker and holding a B.A. in Social Work, Ms. Peveto possesses a multi-faceted background with 23 years of service in various positions within both community-based, state-level and clinical settings. Her experience, knowledge and role within OCS and TCHHS/VS will be key in overseeing and navigating the County system in conjunction with other systems.

The Children's FIRST *Site Supervisor*, Ms. Mary Williams, has more than 28 years of service in the health and human services arena working with high-risk families on parenting skills, child development education, and basic financial literacy skills. She has held positions that have included in-home visitation, case management, and most recently, managerial. She is currently overseeing 5 caseworkers- all of which under CSI will be serve as grant-designated *Parent or Kinship advocates*. She will provide day- to-day supervision, work in collaboration with the SUCCESS team to promote goals of the grant design, and assign cases to the *Parent and Kinship Advocates*. She will serve as liaison with other County and State Departments as well as other community agencies and collect, maintain and update administrative and programmatic records, reports, and statistical data.

As mentioned, the Children's F.I.R.S.T. unit within the OCS currently has 5 caseworkers that currently report to the above mentioned Site Supervisor. All these staff members possess knowledge of the target population through experience acquired principally from having worked with child welfare-involved families as part of their assigned caseload. If CSI is funded, these existing caseworkers in addition to 1 more caseworker will serve as *Parent and Kinship Advocates (PAs and KAs)* for the CSI model. Under the proposed grant design, the staff will be

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able to incorporate assessment and screening tools and an evidence-based intervention program, thereby improving the quality of service to the parents and kin caregivers.

The *Child Advocates (CAs)* are the child therapists in the CSI program design. Staff in these positions will be required to possess a Master's Degree in a behavioral science, LMSW, LCSW, LPC, or LPCi; hold a current licensure in their respective area; and, have a minimum of two years of experience (including case management services) for child victims of sexual and physical abuse, child protection, crisis support and counseling services.

The Office of Child Representation (OCR) will hire an *Attorney Ad Litem (ALA)* who will possess a law degree, will have been an attorney licensed for at least three years with a valid Texas license, and will be familiar with family law and CPS cases. S/he will also demonstrate an interest in working with the target population, and will be sensitive to the needs and issues of clients.

The *Intensive Case Manager* will provide intensive case management to those parents identified by the UNCOPE screening assessment in the program model as "higher risk." The staff hired will be required to have had experience working with high need, low income families with very young children and have knowledge of substance abuse and mental health disorders.

Dr. Thompson, the *Evaluator*, has extensive experience in participating and providing evaluation for federally funded projects, described previously on page 6 of this document. She will, with program staff input, provide on-going monitoring and organizational strategies to carry out the evaluation model selected for this project. Dr. Thompson will also serve as the liaison to the University of Texas' Institutional Review Board. She will be serving on a contractual basis, and will be overseeing the CSI *Research Assistant (RA)*. The RA position will be filled by an individual who has familiarity developing databases, monitoring data collection and data

analysis. The RA will be required to be knowledgeable in SPSS (Statistical Package for the Social Sciences).

5.c. Plan of Action for ensuring effective implementation

The project timeline, located within the Approach (on page 40) provides a more detailed workplan with key milestones, agencies' roles and responsibilities and key dates noted. The timeline clearly delineates each partner's component in the project design so that each clearly understands its component within the program design, thereby establishing a quality assurance component towards meeting the grants' objectives.

Project startup activities will commence September 2012 upon notification of award and continue approximately through January 2013. Startup activities will include the hiring of key CSI personnel such as the Project Director, Child Advocates, Attorney ad Litum, Kinship Advocate, and other positions to be located at agency partners. Additionally, it will include the training of key personnel on grant requirements and attendance at grant-required and/or grant-sponsored conferences or trainings. Child Welfare staff (FBSS) will be trained on the appropriate screening tool and their roles in stewarding the SUCCESS teams to be utilized in working with families and partners.

Actual client participation is estimated to begin in early 2013, once programmatic, financial and administrative supports have been setup within TCHHS/VS, Travis County infrastructure, the Evaluator and partner agencies. Consent forms will have been completed by program-eligible families prior to commencing participation. Collaborative meetings (both CSI program specific as well as Regional Partnership Grant) will begin to take place regularly so that appropriate communication and pertinent grant information is disseminated in a timely fashion. Additionally, data collection will begin and monitored to ensure accuracy and grant

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compliance. Likewise, budget expenditures (including match documentation and reports) will be monitored in order to be aptly prepared to closeout each grant year and develop the following year's continuation application.

5.d. Mutually beneficial relationship between CSI and other federally supported initiatives

In Travis County there are several currently awarded grants and grants being sought by other community entities that this grant application, if awarded, will collaborate with directly or indirectly. PIR is a federally funded regional partnership grant through the Administration of Children and Families and provides services and supports to the Travis County Family Drug Treatment Court (TCFDTC). CSI will collaborate with the Court to gain substance abuse training, expertise on collaboration and system development, and best practices regarding service to clients with significant child protective services histories and substance abuse addiction. The Children's Continuum (CC), a DOJ grant, funds services and supports for the children of the parents enrolled in the TCFDTC. CSI will collaborate with this program for training on children's issues and the utilization of an array of children's services to promote well-being. The CRADLES program which is a program funded through the Abandoned Infants Assistance Act will be a primary partner to CSI; both projects focus on families involved in the child welfare system due to substance abuse. CSI staff will receive training and technical assistance from the CRADLES program as it relates to developmental needs of children and the delivery of services to parents through the nurturing program. Austin Child Guidance Center (ACGC), a counseling center and a partner to the CSI application, has applied for the National Child Traumatic Stress Initiative – Category III Community Treatment and Service Centers through SAMHSA. As part of that grant, ACGC will provide training to the community on trauma informed care and be a provider of trauma informed care for children and

youth. CSI staff, if awarded, will be a priority group to receive the trauma informed care training, resources and the children/youth of CSI will be a priority population to be served under this grant.

5.e. Applicant demonstrates that efforts for collaborative service delivery have already been undertaken prior to reviewing and responding to this FOA; community interest

CSI, if funded, will enhance the work begun by several other collaborative service delivery efforts in Travis County. As previously mentioned in this narrative, the TCFDTC, as supported by PIR, is the underlying foundation for much of the community work around parental substance abuse, serving substance-dependent women with young children ages 0-5. The Children's Continuum is a more recent collaborative focusing on the child's functioning and well-being, establishing a continuum of screening, developmental, therapeutic and non-traditional services for the child. The active participation of partner agencies in PIR and Children's Continuum, attendance at regional partnership meetings, and the collaborative spirit and energy that has surrounded CSI's program development demonstrates that the community is well-positioned to fully utilize and maximize resources brought together by the CSI initiative.

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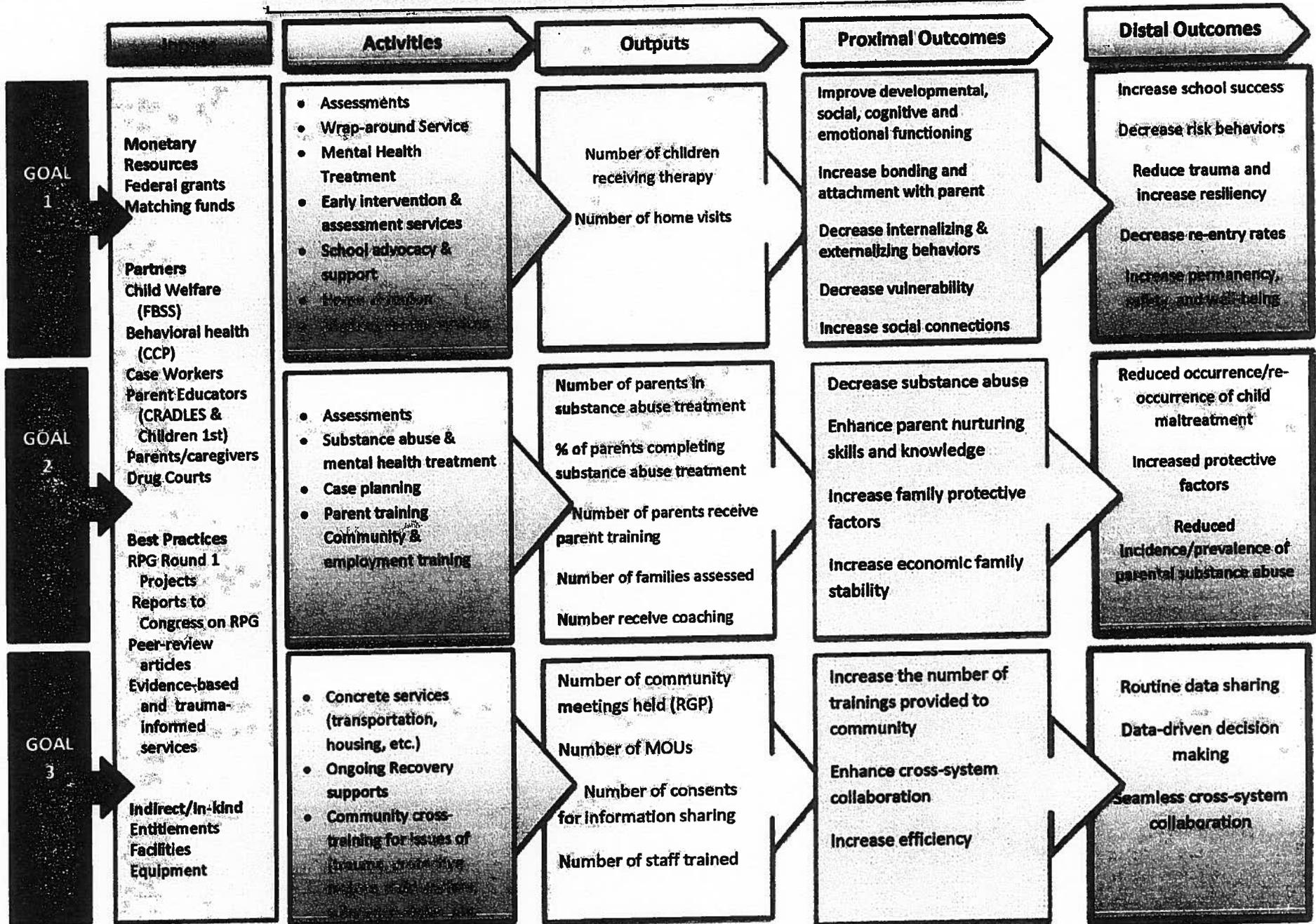
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Project Title: Children's Success Initiative (CSI)

Applicant Name: Travis County Health and Human Services & Veterans Service (TCHHS/VS)

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Children's Success Initiative LOGIC MODEL



Children's Success Initiative

Travis County Health and Human Services is the lead agency applying for a second round of Regional Partnership Grants through the Administration of Children and Families – Children's Bureau. These grants focus on improving the well-being of children affected by substance abuse whose families are involved in the child welfare system. These grants are five years and will run from September 2012 – 2017. The principal partners for this grant application are Travis County Health and Human Services, Center for Child Protection, CRADLES (Austin Recovery), and the Travis County Office of Child Representation. The grant proposal being submitted for Travis County is the *Children's Success Initiative* (CSI).

The Children's Success Initiative (CSI) has four main goals: 1) early identification and provision of services to children and youth that promotes their well-being; 2) services and supports to parents that promote protective factors; 3) development of a coordinated system of supports for families involved in Child Protective Services – Family Based Safety Services (FBSS) with a focus on enhancing the collaboration between FBSS, local community providers and the school systems; and 4) improvement of the quality of the service delivery to children, youth and their families through cross-trainings in areas of trauma; parent education; protective factors; substance abuse and child welfare.

The project design expands current resources, enhances others, and expands the collaborative structure and knowledge base of the community. Children's Success Initiative (CSI) will focus on working with families who have open cases with the Family Based Safety Services (FBSS) division of Child Protective Services and involvement with FBSS is complicated by issues of substance use/abuse. CSI will create SUCCESS teams with each family to identify, address and provide specialized resources that promote and sustain protective factors, with an emphasis on trauma.

The SUCCESS teams will consist of a FBSS caseworker, a child therapist, a parent coordinator, the parent/child, family members, community service providers and, when indicated by the type of FBSS intervention, a child's attorney and a kinship coordinator. The SUCCESS team will be coordinated by the FBSS caseworker through routine meetings, contacts and a coordinated service plan.

Each parent and child in CSI will receive an assessment and individualized planning based on their strengths and needs. All service providers will be trauma informed and will integrate that understanding into their practice. All families will have access to flexible funding to provide concrete support in the time of need, as well as specialized therapeutic and enrichment services not currently covered by traditional insurance. The parent coordinator will focus on facilitating substance abuse treatment, parent skill building that promotes protective factors, recovery supports, accessing community resources and, at closure, ensuring engagement in step-down community services. The child therapist will focus on providing individualized services based on the assessment that could include: individual/group therapy, parent/child therapy, non-traditional therapeutic services (mentoring, respite, music/art/recreational therapy), substance abuse education (and treatment if indicated) and, if needed, psychiatric consultation and intervention. Additionally, the child therapist will provide specialized parent education and school advocacy. For those families whose FBSS intervention warranted court-ordered

services and/or voluntary placement of the children in kinship care, CSI's SUCCESS team will also include a child's attorney and a kinship coordinator. The child's attorney will represent the child in court and will advocate for the child's legal position. Representing the child is the attorney's primary role. As a member of the SUCCESS team, the attorney will also share their expertise about the legal system with other team members. The attorney will improve the effectiveness and efficiency of court cases by being part of a team that communicates about service provision to families and strategies to reduce risk factors. The kinship coordinator will provide supports to those family members who are voluntarily caring for children during an open FBSS case. The kinship coordinator will focus on facilitating a needs assessment, access to community resources, education and advocacy, parent/child visitation, and the post-placement role of the kinship caregiver.

CSI will work with the community to identify, prioritize, and engage FBSS-involved families in community programs that continue the initial work of the project. CSI will develop and support a collaboration consisting of community service providers and FBSS. This collaboration will address systems barriers to service access, increase knowledge about available services and the role of FBSS, and provide cross-training on issues such as: trauma informed care, substance abuse, protective factors, and child well-being.

Curriculum vitae
Sanna J. Thompson, Ph.D.

School of Social Work
University of Texas at Austin
One University Station
Campus Box D3500
Austin, TX 78712

(512) 232-0604 (Office)
(512) 731-1679 (Mobile)
(512) 232-0638 (Fax)
email: SannaThompson@mail.utexas.edu
website: <http://www.utexas.edu/ssw/faculty/thompson/>

Education

PhD *Ph.D. in Social Work*

1998 Washington University, George Warren Brown School of Social Work
Dissertation: Behavioral and health outcomes of youths with Diabetes in one and two-parent families: Individual, family, and community contexts

MSW *Masters of Social Work*

1993 Washington University, George Warren Brown School of Social Work
Concentration: Mental Health

BS *Bachelors of Science*

1992 Weber State University
Dual Major: Social Work & Psychology
Honors: *summa cum laude*
National Dean's List, 1988-1992
College of Social Science Scholar of the Year, 1992
Social Work & Psychology Outstanding Graduate of the Year, 1992
Mary Uke's Scholarship in Social Work, 1991-1992

Academic/Teaching Positions

Sept 2005- Present **Associate Professor**
School of Social Work
University of Texas at Austin

June 2003- Aug 2005 **Research Associate Professor**
School of Social Work
University of Texas at Austin

Sept 2001- May 2003 **Assistant Professor**
School of Social Work,
University of Texas at Arlington

Sept 1998- June 2001 **Assistant Professor**
School of Social Work
State University of New York at Buffalo

Clinical Positions

1992-1994 **Substance Abuse and Family Counselor**
St. Anthony's Hyland Behavioral Health
St. Louis, Missouri

1992-1993 **Mental Health Counselor**
Grace Hill Neighborhood Services
St. Louis, MO

1991-1992 **Psychiatric Technician**
McKay-Dee Hospital Psychiatric Unit
McKay-Dee Behavioral Health Institute
Ogden, Utah

Selected Publications

Peer-reviewed Articles: More than 79 published articles, available upon request

Grants/External Funding

National Institute of Nursing Research

Co-Investigator

Grant Title: Enhancing Psychological Capital to Foster Health Outcomes in Homeless Young Women
Grant # R21-NR013538-01
Funded: \$525,000 / 2 years

U.S. Dept. of Health & Human Services, Administration for Children and Families

Program Evaluator

Grant Title: Parenting in Recovery
Grant # 90CY0039
Granted to Travis County – Office of Health and Human Services
Funded: 10/1/2007-9/30/2012 (\$2,500,000)

National Institute of Drug Abuse

Principal Investigator – Mentored Research Scientist Career Development Award (K01)

Grant title: Family-based substance use treatment for runaway youth
Grant # K01 DA15671-05
Funded: 6/2003–5/2008, plus 1 year no-cost extension (\$644,650)

Center for Social Work Research – Addictions Research Institute

Principal Investigator

Grant title: Substance use and abuse among homeless street youth
NIDA infrastructure grant
Grant # R24 DA013579
Funded: 8/2006-5/2007 (\$15,000)

Washington University

Co-Principal investigator with David Pollio, Ph.D.

Grant title: The role of transience in service use by street youth
Funded: 4/2005–8/2005 (\$24,000)

National Institute of Drug Abuse

Principal investigators: David Pollio, Ph.D. & Carol North, M.D.

Consultant – R21 NIDA Services Branch

Grant title: Family services for runaway/homeless youth
Grant # R21 DA15341-02
Funded: 9/2003 – 8/2005 (\$250,000)

U.S. Dept. of Health and Human Services, Administration for Children and Families

Co-Investigator

(David Pollio, Ph.D. Principal investigator)

Grant Title: Homeless and Runaway Youth Outcomes among Youths in the Missouri-Iowa-Nebraska-Kansas (MINK) Network
Funded: 10/1996-10/1998 (\$60,000)



**TRAVIS COUNTY HEALTH and HUMAN SERVICES
and VETERANS SERVICE**

**Children's Success Initiative
Memorandum of Understanding
Effective September 28, 2012 - September 30, 2013**

This Memorandum of Understanding is designed to demonstrate the *Center for Child Protection's (CCP)* relationship with the Travis County Health and Human Services and Veterans Service Department and to outline CCP's commitment to providing certain services and contributing resources to the proposed project, in conjunction with the Children's Success Initiative Grant.

I. *Center for Child Protection's* Role and Responsibilities

a. Service Provision

- i. Provide 3 full-time grant-funded and project-dedicated Children Therapists to:
 1. Assess referred children
 2. Develop a coordinated service delivery plan in conjunction with the Family Based Safety Services Unit located within the Child Protective Services Division of the Texas Department of Family and Protective Services
 3. Provide specialized services which include, but may not be limited to:
 - a. Individual Therapy
 - b. Group Services
 - c. Parent/Child Therapy
 - d. Other appropriate CCPS services, such as Medical and/or Psychiatric Services
- ii. Provide parental and caregiver education, as applicable
- iii. Serve on the SUCCESS team and attend meetings regularly
- iv. Provide appropriate referrals to other community agencies
- v. Expend flexible funding on eligible children per the grant design

b. Collaboration (routine consultation & interaction among agencies)

- i. Consult with Grant Director and other partner agencies on a regular and ongoing basis, regarding programmatic guidance or other program-related inquiries.
- ii. Attend regional partnership meetings and other project-related meetings as determined by Travis County Health and Human Services and Veterans Service.

c. Program Performance Tracking/Reporting (joint accountability and shared outcomes)

- i. As one of the key partner agencies responsible for this grant project, the Center for Child Protection shall carry out those roles and responsibilities outlined in I.a of this MOU.
- ii. Report on assessments pre- and post- on children.
- iii. Report on outcomes and outputs of children served as outlined in the grant proposal.
- iv. Enter data into the grant designed data system, as appropriate.

- v. Provide data as required by the Grant Evaluation, as it pertains to clients served by CCP under this grant.
- d. **Training and Staff Development (cross training and staff development)**
 - i. Agree to attend training sponsored and coordinated by Travis County Health and Humans Services and Veterans Service or Grantor, related to the provision of services under the project. This may include, but not be limited to, training related to administration of assessment and/or surveys, reporting requirements, fiscal and/or programmatic functions.
 - ii. Provide training to the community & CSI staff and partners on trauma and therapeutic interventions for children and families.
- e. **Communication and Information Sharing**
 - i. Ensure appropriate communication with Grant Director and Partners.
 - ii. Track and share project-related client information (as appropriate and within privacy and confidentiality guidance) with partners and appropriate staff for evaluative and other grant related purposes.
- f. **Financial Responsibilities/Agreements**
 - i. Grant Funding
 - 1. The Center for Child Protection will provide the services outlined above in Section I.a, contingent upon funding from Children's Success Initiative Grant, as negotiated through future agreement with Travis County Health and Human Services and Veterans Service Department.
 - ii. Agency Resource Commitments
 - 1. The Center for Child Protection will provide annual match funds towards the project budget, as negotiated through future agreement with Travis County Health and Human Services and Veterans Service Department.
 - 2. The Center for Child Protection will appropriately document resource contributions of staff time and other eligible grant match expenditures in accordance with grant guidelines.
 - 3. CCP will participate in annual programmatic audits conducted by Travis County.
 - iii. Central Contractor Registration
 - 1. The Center for Child Protection will have obtained a Data Universal Numbering System (DUNS) number at the time a future agreement with Travis County Health and Human Services and Veterans Service Department occurs.

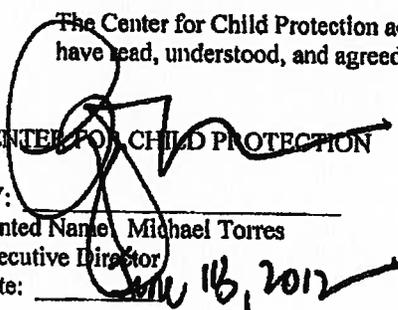
II. Amendments to this Memorandum of Understanding

This MOU may be changed or revised with the written consent of both parties.

III. Authorization

The Center for Child Protection acknowledges by their authorized representative's signature that they have read, understood, and agreed to the terms of this document.

CENTER FOR CHILD PROTECTION

BY: 
 Printed Name: Michael Torres
 Executive Director
 Date: Jan 16, 2012



**TRAVIS COUNTY HEALTH and HUMAN SERVICES
and VETERANS SERVICE**

**Children's Success Initiative
Memorandum of Understanding
Effective September 28, 2012 - September 30, 2013**

This Memorandum of Understanding is designed to outline the *Children FIRST* program's (located within the Travis County Health and Human Services and Veterans Service Department) commitment to providing certain services and contributing resources to the proposed project, in conjunction with the Children's Success Initiative Grant.

I. *Children FIRST's* Role and Responsibilities

a. Service Provision

i. Assign 4 existing full-time county-funded staff position to serve as project-dedicated Parent Advocates. These staff shall:

1. Assess parental needs
2. Develop a service delivery plan integrated into the DFPS service plan
3. Facilitate access to Substance Abuse Treatment in conjunction with Austin Recovery
4. Facilitate access to appropriate recovery supports
5. Provide parent skill building education (protective factors, child development)
6. Refer to other appropriate community agencies, as applicable, to facilitate transition back to community
7. Participate in the SUCCESS team

ii. Assign 1 existing full time county-funded staff and hire 1 full-time grant funded staff to serve as Kinship Coordinators. These staff shall:

1. Assess caregiver needs
2. Collaborate and refer to appropriate community resources, as applicable
3. Provide education/advocacy for children within systems such as: Child Protective Services, schools and other agencies/entities
4. Facilitate Parent/Child Visitation, in conjunction with appropriate partners
5. Utilize flexible funding to support eligible kinship support
6. In conjunction with the SUCCESS team, assist the kinship provider with post placement role
7. Provide support group/network for kinship providers

b. Collaboration (routine consultation & interaction among agencies)

- i. Consult with Grant Director and other partner agencies on a regular and ongoing basis, regarding programmatic guidance or other program-related inquiries.
- ii. Attend regional partnership meetings and other project-related meetings as determined by Travis County Health and Human Services and Veterans Service.

c. Program Performance Tracking/Reporting (joint accountability and shared outcomes)

- i. As both the lead agency and one of the primary service providers for this grant project, HHSVS' *Children FIRST* shall carry out those roles and responsibilities outlined in 1.a of this MOU.

- ii. Report on assessment completed on caregivers.
 - iii. Report on outcomes and outputs of caregivers served and outline in the grant proposal, when appropriate.
 - iv. Collaborate with evaluator to provide data for grant evaluation.
- d. **Training and Staff Development(cross training and staff development)**
- i. Agree to attend training sponsored and coordinated by Travis County Health and Humans Services and Veterans Service or Grantor, related to the provision of services under the project. This may include, but not be limited to, training related to administration of assessment and/or surveys, reporting requirements, fiscal and/or programmatic functions.
- e. **Communication and Information Sharing**
- i. Ensure appropriate communication with Grant Director and Partners.
 - ii. Track and share project-related client information (as appropriate and within privacy and confidentiality guidance) with partners and appropriate staff for evaluative and other grant related purposes.
- f. **Financial Responsibilities/Agreements**
- i. Grant Funding
 - 1. Children FIRST will provide the services outlined above in Section I.a., contingent upon funding from Children's Success Initiative Grant, as negotiated through future agreement with Travis County Health and Human Services and Veterans Service Department.
 - ii. Agency Resource Commitments
 - 1. Children FIRST will provide annual in-kind match support towards the project budget.
 - 2. Children FIRST will appropriately document and submit resource contributions of staff time and other eligible grant match expenditures in accordance with grant guidelines.
 - 3. Participate in an annual programmatic audit conducted by Travis County.

II. Amendments to this Memorandum of Understanding

This MOU may be changed or revised with the written consent of both parties.

III. Authorization

Children FIRST acknowledges by their authorized representative's signature that they have read, understood, and agreed to the terms of this document.

TRAVIS COUNTY HEALTH AND HUMAN SERVICES & VETERANS SERVICE

BY: *Sherri E. Fleming*
 Printed Name: Sherri E. Fleming
 Date: June 18, 2012



**TRAVIS COUNTY HEALTH and HUMAN SERVICES
and VETERANS SERVICE**

**Children's Success Initiative
Memorandum of Understanding
Effective September 28, 2012 - September 30, 2013**

This Memorandum of Understanding is designed to demonstrate *Encompass's* relationship with the Travis County Health and Human Services and Veterans Services Department and to outline *Encompass's* commitment to providing certain services and contributing resources to the proposed project, in conjunction with the Children's Success Initiative Grant.

I. *Encompass's* Role and Responsibilities

a. Service Provision

- i. Provide evaluation services in accordance with the project's workplan and determine the project's impact based on its activities as well as address the project's effectiveness.
- ii. Serve as a Principal Evaluator overseeing the evaluation component of the RPG Grant.
- iii. Hire and oversee a research assistant that will assist in maintaining and updating client database, running reports, communicating with collaboration's partners, and supporting the evaluation process.
- iv. Oversee a web based data system that will provide for data collection and reports related to RPG Grant
- v. Securing informed consent and implement an Institutional Review Board (IRB) review

b. Collaboration (routine consultation & interaction among agencies)

- i. Consult with Grant Director and other partner agencies on a regular and ongoing basis, regarding programmatic guidance or other program-related inquiries
- ii. Attend regional partnership meetings and other project-related meetings as determined by Travis County Health and Human Services and Veterans Service.

c. Program Performance Tracking/Reporting (Joint accountability and shared outcomes)

- i. As the designated evaluator for this grant project, *Encompass* shall carry out those roles and responsibilities outlined in IA of this MOU.

d. Training and Staff Development(cross training and staff development)

- i. Agree to attend training sponsored and coordinated by Travis County Health and Humans Services and Veterans Service or Grantor, related to the provision of services under the project. This may include, but not be limited to, training related to administration of assessment and/or surveys, reporting requirements, fiscal and/or programmatic functions.
 1. Within 3 months after award issuance, must attend a kick-off meeting in Washington DC.
 2. Must attend annual grantee meeting held typically in Spring in Washington DC.

e. Communication and Information Sharing

- i. Ensure appropriate communication with Grant Director and Partners.

- ii. Track and share project-related client information (as appropriate and within privacy and confidentiality guidance) with partners and appropriate staff for evaluative and other grant related purposes.

f. Financial Responsibilities/Agreements

i. Grant Funding

- 1. Encompass will provide the services outlined above in Section I.a., contingent upon funding from Children's Success Initiative Grant, as negotiated through future agreement with Travis County Health and Human Services and Veterans Services Department.

ii. Agency Resource Commitments

- 1. Encompass will provide annual match funds towards the project budget.
- 2. Encompass will appropriately document resource contributions of staff time and other eligible grant match expenditures in accordance with grant guidelines.

iii. Central Contractor Registration

- 1. Encompass will have obtained a Data Universal Numbering System (DUNS) number at the time a future agreement with Travis County Health and Human Services and Veterans Services Department occurs.

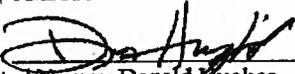
II. Amendments to this Memorandum of Understanding

This MOU may be changed or revised with the written consent of both parties.

III. Authorization

Encompass acknowledges by their signature that they have read, understood, and agreed to the terms of the document.

ENCOMPASS

BY: 

Printed Name: Donald Hughes

President

Date: 6/24/2012



TRAVIS COUNTY HEALTH and HUMAN SERVICES and VETERANS SERVICE

Children's Success Initiative Memorandum of Understanding Effective September 28, 2012 - September 30, 2013

This Memorandum of Understanding is designed to demonstrate the *Travis County Office of Child Representation's (OCR)* relationship with the Travis County Health and Human Services and Veterans Service Department and to outline OCR's commitment to providing certain services and contributing resources to the proposed project, in conjunction with the Children's Success Initiative Grant.

I. *Travis County - Office of Child Representation's Role and Responsibilities*

a. Service Provision

- i. Provide 1 full-time grant-funded and project-dedicated Staff Attorney, who will serve as attorney ad litem (and guardian ad litem in some cases). This Staff Attorney will represent children and youth involved in the project's proposed service delivery system. Services will include, but may not be limited to:
 1. Representing child at court and advocating for the child's legal position (for those children from families whose FBSS intervention warranted court-ordered services or voluntary placement of child in kinship care);
 2. Participating in the SUCCESS team;
 3. Sharing legal system expertise with SUCCESS Team;
 4. Improving the effectiveness and efficiency of court cases by being a member of this interdisciplinary team that communicates about service provision to families to reduce risk factors.

b. Collaboration (routine consultation and interaction among agencies)

- i. Consult with Grant Director and other partner agencies on a regular and ongoing basis regarding programmatic guidance or other program-related inquiries;
- ii. Attend regional partnership meetings and other project-related meetings as determined by the Travis County Health and Human Services and Veterans Service Department.

c. Program Performance Tracking/Reporting (joint accountability and shared outcomes)

- i. As the partner providing the attorney/guardian ad litem position for this grant project, the Travis County Office of Child Representation shall carry out those roles and responsibilities outlined in I-a of this MOU.
- ii. Report outcomes and outputs relevant to this position as outlined by the grant proposal.
- iii. Enter data into the grant designed data system, as appropriate.
- iv. Collaborate with evaluator to provide data for grant evaluation.

d. Training and Staff Development (cross training and staff development)

- i. Agree to attend training sponsored and coordinated by Travis County Health and Human Services and Veterans Service or Grantor, related to the provision of services under the project. This may include, but not be limited to, training related to administration of assessment and/or surveys, reporting requirements, fiscal and/or programmatic functions.

- ii. Provide training to CSI staff and their partners on the legal process and the role of the attorney/guardian ad litem regarding Child Protective Services cases.
- e. **Communication and Information Sharing**
 - i. Ensure appropriate communication with Grant Director and Partners.
 - ii. Track and share project-related client information (as appropriate and within privacy and confidentiality guidelines) with partners and appropriate staff for evaluative and other grant related purposes.
- f. **Financial Responsibilities/Agreements**
 - i. **Grant Funding**
 - 1. OCR will provide the services outlined above in Section I-a., contingent upon funding from Children's Success Initiative Grant, as negotiated through future agreement with the Travis County Health and Human Services and Veterans Service Department.
 - ii. **Agency Resource Commitments**
 - 1. OCR will provide annual match funds towards the project budget, as negotiated through future agreement with the Travis County Health and Human Services and Veterans Service Department and as approved and allocated in OCR's budget by the Travis County Commissioners Court.
 - 2. OCR will appropriately document and submit resource contributions of staff time and other eligible grant match expenditures in accordance with grant guidelines.
 - 3. OCR will participate in annual programmatic audits conducted by Travis County.

II. Amendments to this Memorandum of Understanding

This MOU may be changed or revised with the written consent of both parties.

III. Authorization

OCR acknowledges by their authorized representative's signature that they have read, understood, and agreed to the terms of this document.

TRAVIS COUNTY - OFFICE OF CHILD REPRESENTATION

BY: _____

Leslie Hill
Leslie Hill

Title: Managing Attorney

Date: 6-20-12



**TRAVIS COUNTY HEALTH and HUMAN SERVICES
and VETERANS SERVICE**

**Children's Success Initiative
Memorandum of Understanding
Effective September 28, 2012 - September 30, 2013**

This Memorandum of Understanding is designed to demonstrate *Austin Recovery's* relationship with the Travis County Health and Human Services and Veterans Service Department (TC/HHSVS) and to outline Austin Recovery's commitment to providing certain services and contributing resources to the proposed project, in conjunction with the Children's Success Initiative Grant.

- I. *Austin Recovery's* (via its CRADLES program – Collaboration to Reduce Abandonment and Deliver Local Education and Support) Role and Responsibilities**
- a. Service Provision**
- i. Provide 1 full-time grant funded and project – dedicated Case Manager to serve parents requiring more intensive case management. The position shall:
 1. Assess parents' needs
 2. Develop appropriate service delivery plan in conjunction with the Family Based Safety Services Unit located within the Child Protective Services Division of the Texas Department of Family and Protective Services
 3. Facilitate access to substance abuse treatment
 4. Facilitate access to appropriate recovery supports
 5. Provide parent skill building education (protective factors) utilizing a mentoring program
 6. Refer parents to other appropriate community agencies, as applicable to facilitate appropriate transition to community resources
 7. Participate in SUCCESS team
 8. Expend flexible funding on eligible parents per grant design
- b. Collaboration (routine consultation & interaction among agencies)**
- i. Consult with Grant Director and other partner agencies on a regular and ongoing basis, regarding programmatic guidance or other program-related inquiries
 - ii. Attend regional partnership meetings and other project-related meetings as determined by Travis County Health and Human Services and Veterans Service
- c. Program Performance Tracking/Reporting (joint accountability and shared outcomes)**
- i. As one of the key partner agencies responsible for this grant project, Austin Recovery shall carry out those roles and responsibilities outlined in I.a of this MOU.
 - ii. Report on assessments pre- and post- completed on parents
 - iii. Report on outcomes and outputs of parents served as outlined in the grant proposal
 - iv. Enter data into the grant designed data system, as appropriate
 - v. Provide data as required by the Grant Evaluation, as it pertains to clients served by Austin Recovery and CRADLES.

- d. **Training and Staff Development(cross training and staff development)**
 - i. Agree to attend training sponsored and coordinated by Travis County Health and Humans Services and Veterans Service or Grantor, related to the provision of services under the project. This may include, but not be limited to, training related to administration of assessment and/or surveys, reporting requirements, fiscal and/or programmatic functions.
 - ii. Provide child development and protective factors training to CSI staff and partners.
- e. **Communication and Information Sharing**
 - i. Ensure appropriate communication with Grant Director and Partners.
 - ii. Track and share project-related client information (as appropriate and within privacy and confidentiality guidance) with partners and appropriate staff for evaluative and other grant related purposes.
- f. **Financial Responsibilities/Agreements**
 - i. **Grant Funding**
 - 1. Austin Recovery will provide the services outlined above in Section I.a., contingent upon funding from Children's Success Initiative Grant, as negotiated through future agreement with Travis County Health and Human Services and Veterans Service Department.
 - ii. **Agency Resource Commitments**
 - 1. Austin Recovery will provide annual match funds towards the project budget, as negotiated through future agreement with TCHHS/VS.
 - 2. Austin Recovery will appropriately document and submit resource contributions of staff time and other eligible grant match expenditures in accordance with grant guidelines.
 - 3. Austin Recovery/CRADLES will participate in annual programmatic audits conducted by Travis County.
 - iii. **Central Contractor Registration**
 - 1. Austin Recovery will have obtained a Data Universal Numbering System (DUNS) number at the time a future agreement with Travis County Health and Human Services and Veterans Service Department occurs.

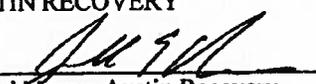
II. Amendments to this Memorandum of Understanding

This MOU may be changed or revised with the written consent of both parties.

III. Authorization

Austin Recovery acknowledges by their authorized representative's signature that they have read, understood, and agreed to the terms of this document.

AUSTIN RECOVERY

BY: 

Printed Name: Austin Recovery
CEO/President

Date: June 16, 2012

TRAVIS COUNTY JOB DESCRIPTION

JOB TITLE: Social Services Manager – CSI Project Manager

JOB SUMMARY:

Manages the day-to-day and overall operations of a social services department, work unit or program composed of multiple operational components and related staff. Performs managerial, consultative, technical and administrative work in the planning, developing, overseeing implementation of and evaluating departmental goals and objectives.

DISTINGUISHING CHARACTERISTICS:

This is a job classification within the Social Services job family. This classification is responsible for managing the operations of a social services department, work unit or program composed of multiple operational components and related staff. This classification is distinguished from the Social Services Program Administrator which directs and manages a large department or broad based series of multiple funded programs with broad scope of responsibility, complex budget and large staff.

DUTIES AND RESPONSIBILITIES:

- Directs and manages the planning and operations of a social services department, work unit or program. Oversees subordinate managers and staff, including hiring, training, performance evaluation and disciplinary actions, ensuring activities are consistent with policies, procedures, laws, regulations, goals and objectives.
- Plans, develops and establishes goals and objectives. Participates in, or develops strategic plans to accomplish the goals and objectives.
- Manages service delivery and program operations for assigned area. Organizes operations and procedures. Sets priorities, monitors activities and assignments and resolves problems.
- Provides technical advice, policy interpretation and guidance for application of appropriate procedures to staff.
- Evaluates program effectiveness to develop improved methods. Devises evaluation methodology and manages implementation. Analyzes results and recommends or takes appropriate action.
- Develops, oversees and evaluates new and existing services and initiatives for implementation.
- Assists in, or develops budget for area of assignment. Administers budget and approves or recommends expenditures within established budget. May prepare proposals for funding or funding continuation.
- Serves as liaison and collaborates with governmental and public agency representatives, community outreach and advocacy groups, service providers and others. Plans, develops and manages a variety of community development and community organizing activities. Identifies and resolves service gaps and barriers, stimulates interest in departmental programs and services.
- Develops and participates in education and training for clients and community. Makes presentations related to departmental programs and services.
- Prepares periodic reports, financial analysis and statistical reports on program activities and program progress.
- Performs other job-related duties as assigned.

MINIMUM REQUIREMENTS:

Education and Experience:

Bachelor's degree in Social or Behavioral Sciences or a directly related field AND five (5) years increasingly responsible experience in social services, including one (1) year of supervisory or management experience; OR, Any combination of education and experience that has been achieved and is equivalent to the stated education and experience and required knowledge, skills, and abilities sufficient to successfully perform the duties and responsibilities of this job.

MINIMUM REQUIREMENTS: (Cont.)

Licenses, Registrations, Certifications, or Special Requirements:

Licensed Chemical Dependency Counselor (LCDC); OR,
Qualified Credentialed Counselor (QCC).
Licensed Social Worker (LSW); OR,
Licensed Master Social Worker (LMSW).
Valid Texas Driver's License.

Preferred:

Licensed Professional Counselor (LPC).
Master's degree in Social or Behavioral Sciences or a directly related field.

Knowledge, Skills, and Abilities:

Knowledge of:

- Management and supervisory principles, practices and techniques.
- Policies, practices and procedures within area of assignment.
- Federal, State and Local program laws and requirements.
- Advocacy groups, social service providers and community outreach organizations.
- Budgetary practices and techniques.
- Modern office practices, procedures and methods.
- Computer equipment to include word processing, spreadsheets, databases and a variety of software packages.
- Business letter writing, grammar and punctuation, and report preparation.

Skill in:

- Planning, development, monitoring and evaluation of social service programs and services.
- Supervising others, allocating resources and evaluating programs.
- Leadership and community collaboration.
- Problem-solving and decision-making.
- Operating a variety of modern office equipment, including a computer.
- Both verbal and written communication, including presentations.

Ability to:

- Motivate, train, supervise and develop and evaluate staff.
- Serve as technical consultant and liaison.
- Create and recommend department and program initiatives.
- Prepare administrative and statistical reports.
- Communicate effectively.
- Work independently.
- Manage time well and perform multiple tasks, and organize diverse activities.
- Establish and maintain effective working relationships with departmental clientele, representatives of outside agencies, other County employees and officials, and the general public.

WORK ENVIRONMENT AND PHYSICAL DEMANDS:

Physical requirements include the ability to lift/carry up to 25 pounds occasionally, visual acuity, speech and hearing, hand and eye coordination and manual dexterity necessary to operate a computer and office equipment. Subject to standing, sitting, walking, climbing stairs, bending, stooping, crouching, kneeling, pushing, pulling, reaching, twisting, balancing, repetitive motion, driving, client/customer contact, and squatting to perform the essential functions.

TRAVIS COUNTY JOB DESCRIPTION

JOB TITLE: Case Worker – Parent Advocate and Kinship Advocate

JOB SUMMARY:

Determines applicants' eligibility for a variety of social services available and/or provides other social services related to crisis intervention and short-term case management. Interviews clients, collects and completes required eligibility documentation, determines eligibility for social services assistance and monitors client progress and usage of assistance. Refers clients to clinical and social service provider resources. May serve as lead worker over subordinate social services staff.

DISTINGUISHING CHARACTERISTICS:

This is a job classification within the Social Services job family. This classification is distinguished from other social services classes due to the eligibility-related functions and short-term case management for various clients. This classification interviews clients and collects eligibility documentation to determine appropriate social services assistance and monitors client progress and usage of assistance. Duties also include problem-solving assistance and functioning as an advocate on behalf of the client. This classification may require a flexible work schedule in order to meet the needs of the department.

DUTIES AND RESPONSIBILITIES:

Interviews clients, collects and completes required documentation and determines eligibility for assistance based upon a variety of service regulations and procedures. Monitors and ensures contract and program compliance. May make home visits on an "as needed" basis for clients unable to come to the service site.

- Provides basic needs counseling and problem-solving assistance or case management services for clients. Conducts assessment of client needs. Develops casework/service plans, monitors progress and follow-up. Provides social services related to crisis intervention.
- Coordinates with other service agencies, organizations, and vendors to provide appropriate services and information for clients as well as referrals. Serves as an advocate on behalf of client. Makes appropriate referrals to other social service, education, and/or health agencies as needed. Interprets eligibility requirements, policy and procedures to clients, other agencies, vendors and governmental entities.
- Assists in contract development and monitoring.
- Plans, organizes and participates in special projects, including outreach efforts, public speaking and special activities for client. Provides education and training to clients/community.
- May provide short and long-term case management, crisis intervention and service coordination to ensure maximum self-sufficiency and non-institutional living. May provide short-term independent living skills assistance and training.
- May assist clients in obtaining vocational and employment services.
- May coordinate arrangement for indigent burials with funeral homes, survivors and staff. Attends indigent burials to ensure compliance with contract.
- May recruit, train and function as lead over volunteers and staff.
- Performs other job-related duties as assigned.

MINIMUM REQUIREMENTS:

Education and Experience:

Bachelor's degree in one of the Social or Behavioral Sciences AND two (2) years experience in social services related work;

OR,

Any combination of education and experience that has been achieved and is equivalent to the stated education and experience and required knowledge, skills, and abilities sufficient to successfully perform the duties and responsibilities of this job.

MINIMUM REQUIREMENTS: (Cont.)

Licenses, Registrations, Certifications, or Special Requirements:

Valid Texas Driver's License.

Knowledge, Skills, and Abilities:

Knowledge of:

Policies, practices, procedures and terminology of assigned function.
Local social services, organizations and programs and the resources available.
Federal, State and Local program laws and requirements.
Modern office practices, procedures and methods.
Computer equipment to include word processing, spreadsheets, databases and a variety of software packages.

Skill In:

- Providing assistance to clients.

Interviewing techniques.

- Problem-solving and decision-making.

Referring clients to appropriate social services organizations and programs.

Math computation.

Operating a variety of modern office equipment, including a computer.

Both verbal and written communication.

Ability to:

Deal effectively with persons experiencing crises and economic stress.
Work effectively and courteously under high-pressure circumstances.
Prepare accurate and complete records and reports.
Demonstrate consistent, sound, and mature judgment in the effective and efficient use of human and financial resources.

- Manage time well and meet timelines.
- Communicate effectively.
- Establish and maintain effective working relationships with departmental clientele, representatives of outside agencies, other County employees and officials, community outreach and other organizations, clinical and other social service providers, and the general public.

WORK ENVIRONMENT AND PHYSICAL DEMANDS:

Physical requirements include the ability to lift/carry up to 25 pounds occasionally, visual acuity, speech and hearing, hand and eye coordination and manual dexterity necessary to operate a computer and office equipment. Subject to standing, sitting, walking, climbing stairs, bending, stooping, crouching, kneeling, pushing, pulling, reaching, twisting, balancing, repetitive motion, driving, client/customer contact, and squatting to perform the essential functions.

This job description is intended to be generic in nature. It is not necessarily an exhaustive list of all duties and responsibilities. The essential duties, functions and responsibilities and overtime eligibility may vary based on the specific tasks assigned to the position.

Center for Child Protection
Job description

Job Title: **Lead Child Advocate**

Supervisor: **Clinical Director**

Minimum Qualifications: Master's Degree in a behavioral science, LMSW, LCSW, LPC, or LPCi preferred, with a minimum of two years experience including case management services for child victims of sexual and physical abuse, child protection, crisis support and counseling services.

Job Skills:

- Ability to work within a multidisciplinary team;
- Ability to work with diverse groups in possibly stressful settings;
- Ability to work in highly structured and unstructured settings;
- Ability to interface with complex systems;
- Ability to problem solve;
- Ability to do psychosocial assessments and clinical diagnostic evaluations;
- Ability to assess protective caregiver's mental health, protectiveness and risk factors, and social service needs;
- Ability to provide individual and family therapy services for children and adults;
- Ability to provide group therapy services for children and adults;
- Ability to provide clinical case managements assessments and service planning;
- Ability to develop treatment plans with identified treatment goals and intervention strategies;

- Ability to collect and report child abuse case information;
- Ability to work effectively with clients in their home environment;
- Ability to work with volunteers

Job Tasks:

- Provide clinical case management, individual, group and family therapy services for children and families with high risk needs;
- Provide clients with clinical assessment and evaluation to inform appropriate clinical treatment goals and intervention strategies;
- Develop clinical treatment plans with identified goals to be reviewed with the Clinical Director during treatment plan reviews;
- Provide follow up services for families needing information/intervention related high risk needs;
- Provide in-home case management and therapy support services for children and their non-offending caregivers;
- Intake new clients for clinical services through Initial Clinical Assessment
- Coordinate information between multidisciplinary team members, mental health providers and investigators/caseworkers.
- Work collaboratively with the Child Protection Team in the provision of services to clients;
- Accompany clients as needed for support in pursuing needed services;
- Assist in the application process for crime victim's compensation;
- As needed, provide direct service support services via program coverage and volunteer support;
- Perform other duties as assigned



Title: Case Manager Department: CRADLES Grade: 8
Location: Family House FLSA status: Non-exempt Hours: 40 hours per week

Essential Duties & Responsibilities:

- Provide intensive in-home comprehensive case management services to women with substance abuse who have small children. Duties include:
 - Conduct psycho-social history and family needs assessment to provide diagnosis and treatment planning
 - Provide referrals and advocacy for clients to local resources to stabilize the family such as basic needs assistance, employment, housing, substance abuse treatment, mental health services, entitlement programs, medical referrals, etc.
 - Administer and score various assessment instruments including: child development assessment - ASQ-SE – Ages & Stages Questionnaire w/ Social Emotional sections, parenting assessment scale – AAPI – Adolescent Adult Parenting Inventory, Nurturing Skills Competency Scale, and research data collection forms both pre- and post. Provide parenting interventions based on assessment scores to promote healthy parent-child attachment
 - Crisis counseling intervention
 - Utilizing counseling techniques to assist clients in examination of factors that may influence decision making that affects family stability
 - Provide guidance and psycho-educational support on life choice issues including relationships, family violence, substance abuse relapse prevention, child welfare issues, etc.
 - Providing permanency planning that provides for the safety, well-being and permanency of the child/children.
 - Parent education involving pre- and post-natal information, and a child development curriculum for ages 0-3
- Case notes, completion of additional case forms and file maintenance
- Complete monthly reports, maintain mileage & expenditure logs
- Attend bi-monthly team meetings to staff cases, address program needs, review community resources
- Attend bi-monthly supervision meeting with program manager
- Attend and assist with organized parenting events

Qualifications

Required:

- Experience working with high need, low income families with very young children.
- Some knowledge of substance abuse and mental health disorders.
- Must be able to work independently and with a team.
- Must have workable knowledge of Microsoft Word and Excel applications.
- Ability to work with diverse populations
- Effective organizational, interpersonal, and communication skills.
- Must have reliable transportation and valid Texas Driver's License.
- Must pass drug test and criminal background check.

Preferred:

- Knowledge in techniques including Motivational Interviewing, de-escalation, grounding, reflective listening, etc.
- Two or more years of experience working in social service field.
- Knowledge of pre and post natal child development and parent education.
- Knowledge of Austin area social services.
- Bi-lingual in Spanish a plus.

Education and Experience

Master's level education in social work, counseling, or other human-service related field. Must have clinical licensure or working towards it.

Supervised by: Lead Clinical Case Manager & Program Manager

TRAVIS COUNTY JOB TITLE: Attorney III (Attorney Ad Litum)

JOB SUMMARY: Practices civil or criminal law for Texas County or District government.

DISTINGUISHING CHARACTERISTICS:

This is the third in a series of seven attorney-related job classifications within the Attorneys job family. This classification handles cases and matters that are the least complex and may result in the least serious consequences without supervision and handles cases and matters that are moderately complex and may result in moderately severe consequences with supervision.

DUTIES AND RESPONSIBILITIES:

Performs legal research. Searches resources and studies legal records and documents to obtain information applicable to case or issue under consideration.

Drafts briefs, motions, orders, subpoenas, contracts and other legal documents, as well as correspondence and reports.

Takes depositions and responds to discovery requests. Oversees the creation and issuance of legal documents, including subpoenas, motions, orders, writs, warrants, contracts, official policies and other related documents. Represents the State at docket calls.

Prepares cases for trial. Collects, organizes and prepares evidence, information and other legal materials. Performs other job-related duties as assigned.

MINIMUM REQUIREMENTS:

Education and Experience:

J.D./LL.B. from an accredited law school AND three (3) years licensed attorney work experience.

Licenses, Registrations, Certifications, or Special Requirements:

Licensed to practice law in the State of Texas.

Knowledge, Skills, and Abilities:

Knowledge of:

Jurisprudence, criminal and civil law and procedures, including constitutional and statutory law.

Federal, State, Local and County applicable laws, rules, regulations and guidelines.

Methods and practices of pleading cases and of effective techniques for presentation of cases in court or to effectively present facts and precedents verbally and in writing in law related matters.

Policies, practices, procedures and legal terminology related to court system.

Computer equipment to include word processing, spreadsheets, databases and a variety of software packages.

Business letter writing, grammar and punctuation, and report preparation.

Skill In:

Problem-solving and decision-making.

- Analyzing and appraising facts, policies, procedures and legal precedents in area of specialty.
- Both verbal and written communication, including presentations.

Ability to:

- Conduct legal research and analysis, both manually and electronically.
- Present facts, precedents and arguments verbally and in writing and apply negotiation skills.
- Communicate effectively, both verbally and in writing.
- Work Independently.
- Manage time well and perform multiple tasks, and organize diverse activities.
- Work well under pressure and exercise tact in trying situations.
- Establish and maintain effective working relationships with departmental clientele, representatives of outside agencies, other County employees and officials, and the general public.

WORK ENVIRONMENT AND PHYSICAL DEMANDS:

Physical requirements include the ability to lift/carry up to 25 pounds occasionally, visual acuity, speech and hearing, hand and eye coordination and manual dexterity necessary to operate a computer and office equipment. Subject to standing, walking, sitting, repetitive motion, reaching, climbing stairs, bending, stooping, kneeling, crouching, crawling, pushing, pulling, balancing, client/customer contact, squatting to perform the essential functions.

Title: Evaluation of the Children's Success Initiative
Evaluator: Sanna Thompson, Ph.D.

The University of Texas at Austin
School of Social Work

IRB PROTOCOL # TBD

Telephone: (512) 232-0604

Email: SannaThompson@mail.utexas.edu

You are being asked to participate in a program evaluation. This form provides you with information about this evaluation. Your Family Based Safety Services Caseworker assigned to you by Child Protective Services will describe this program evaluation to you and answer all of your questions. Please read the information below and ask any questions you might have before deciding whether or not to take part. Your participation is entirely voluntary. You can refuse to participate without penalty or loss of benefits to which you are otherwise entitled. You can stop your participation at any time and your refusal will not impact current or future relationships with UT Austin or participating agencies. To stop your participation, simply tell your CPS Caseworker. Your caseworker will provide you with a copy of this consent for your records.

The purpose of this study is to evaluate the impact of the *Children's Success Initiative* on you and your child.

If you agree to be in this study, we will ask you to do the following things:

- Continue to speak with your Family Based Safety Services (FBSS) Caseworker on a regular basis, who will continue to collect information from you as she always has.

Total estimated time to participate in the evaluation is one year. However, you will not be required to do anything more than you normally do during when meeting with your FBSS Caseworker or other service partners.

Risks of being in the study

- This evaluation may involve risks that are currently unforeseeable. If you wish to discuss the information above or any other risks you may experience, you may ask questions now or call the Evaluator (Sanna Thompson) listed at the top of this form.

Benefits of being in the study

- Benefits to be gained are associated with being part of a program that is trying to provide services to you in shared way. Because CPS, substance abuse treatment, and many other human services agencies will work together to provide care, you may find this more helpful than having to deal with them separately. The field of service delivery may benefit from a better understanding of the effect of collaboration among providers on the outcomes of their clients.

There will be no compensation for participating in this evaluation project

Confidentiality and Privacy Protections:

- The data resulting from your participation may be made available to other researchers in the future for research purposes not described in this consent form. In these cases, the data will contain no identifying information that could associate you with it or with your participation in the evaluation.
- The records of this study will be stored securely and kept confidential. Authorized persons from The University of Texas at Austin, members of the Institutional Review Board, and Administration for Children and Families (the agency funding this project) have the legal right to review your research records and will protect the confidentiality of those records to the extent permitted by law. All publications will exclude any information that will make it possible to identify you as a participant. Throughout the study, the researchers will notify you of new information that may become available and that might affect your decision to remain in the study.

Contacts and Questions:

If you have any questions about the study please ask now. If you have questions later, want additional information, or wish to withdraw your participation call the evaluator conducting the study. Her name, phone number, and e-mail address are at the top of this page. If you have questions about your rights as a research participant, complaints, concerns, or questions about the research please contact James Wilson, Ph.D., Chair, The University of Texas at Austin Institutional Review Board for the Protection of Human Subjects at (512) 232-2685 or the Office of Research Support and Compliance at (512) 471-8871 or email: orsc@uts.cc.utexas.edu.

You will be given a copy of this information to keep for your records.

Statement of Consent:

I have read the above information and have sufficient information to make a decision about participating in this study. I consent to participate in the study.

Signature: _____

Date: _____

Signature of Person Obtaining Consent

Date: _____

Signature of Investigator: _____

Date: _____

**Travis County - Children's Success Initiative (CSI)
Budget Overview
(Detailed yearly budgets and grant partner budgets on subsequent pages)**

<u>Partner Expenses</u>	<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>	<u>Year 5</u>	<u>Five-Year Total</u>
Travis County HHSVS	80,679	77,182	77,182	77,182	77,182	389,407
Children FIRST (located in Travis County HHS)	98,638	100,391	100,391	100,391	100,391	500,202
Encompass Medical Mgmt.	68,690	54,895	54,895	54,895	56,595	289,970
Encompass Medical Mgmt. (Evaluator Percentage of Grant Budget)	43,430	43,430	43,430	43,430	43,430	217,150
Austin Recovery - Cradles Program	16.72%	15.06%	15.06%	15.06%	15.28%	
Center for Child Protection	74,724	76,899	76,899	76,899	76,899	382,320
Travis County Office of Child Representation	189,202	191,462	191,462	191,462	191,462	955,050
<u>General Expenses</u>						
Grant Partner Travel	10,760	10,760	10,760	10,760	10,760	53,800
Systems Development Training	1,000	1,000	1,000	1,000	1,000	5,000
Grant Funds	670,593	653,105	653,105	653,105	654,605	3,284,713
Match	118,340	115,254	163,276	163,276	218,268	778,414
Grant Percentage	0.85	0.85	0.80	0.80	0.75	
Total Funds	788,933	768,359	816,381	816,381	873,073	4,063,127

Travis County - Children's Success Initiative (CSI)

Year 1		Months	Percentage of time	Personnel	Fringe Benefits	Travel	Equipment	Supplies	Contractual	Other	Federal	Non-Federal
Partner Expenses												
Travis County HHSVS	Project Director	12	100%	52,978	19,108			3,697		4,696	80,679	
Children FIRST (located in Travis County HHS)	Parent Advocate	12	100%	40,830	16,665			3,497		37,646	98,638	
Encompass Medical Mgmt.	Evaluator	12	100%						68,690		68,690	
	Research Asst.	12	100%						43,430		43,430	
Austin Recovery - Cradles Program	Case Manager	12	100%	36,000	10,953			150		27,621	74,724	
Center for Child Protection	Child Therapists (3)	12	100%	114,000	29,606					45,596	189,202	
Travis County Office of Child Representation	Attorney Ad Litem	12	100%	68,096	22,149			8,765		4,460	103,470	
General Expenses												
Grant Partner Travel						10,760					10,760	
Systems Development Training										1,000	1,000	
Total				311,904	98,481	10,760		16,109	112,120	121,219	670,693	
Match												
Children FIRST (located in Travis County HHS)	Social Services Mgr.	12	100%	55,582	21,851							77,433
	Case Workers (5)	12	100%	201,470	76,648							278,118
Operating Budget	Operating	12	100%							27,151		27,151
	Total Budget/Match Amount											<u>382,702</u>
Travis County Office of Child Representation	Managing Attorney	12	5%	101,501	31,088							6,629
	Social Worker	12	5%	42,382	15,080							2,873
												<u>9,502</u>
												<u>4,345</u>
Center for Child Protection	Director of Program Svcs.	12	5%	72,360	14,549							<u>118,340</u>
Total*												

*Travis County Office of Child Representation is providing a match of \$9,502 and the Center for Child Protection is providing a match of \$4,345. Travis County Children FIRST is providing the balance (\$104,493) of the year match requirement of \$118,340. The full personnel and operating budget of \$382,702 for Children FIRST is included to show the funds that will support the grant program. However, only the \$104,493 will be used as match

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Travis County - Children's Success Initiative

Year 2	Partner Expenses	Position	Months	Percentage of time	Personnel	Fringe Benefits	Travel	Equipment	Supplies	Contractual	Other	Federal	Non-Federal
	Travis County HHSVS	Project Director	12	100%	52,978	19,108			200		4,896	77,182	
	Children FIRST (located in Travis County HHS)	Parent Advocate	12	100%	40,830	16,665					42,896	100,391	
	Encompass Medical Mgmt.	Evaluator	12	100%						54,895		54,895	
		Research Asst.	12	100%						43,430		43,430	
	Austin Recovery - Cradles Program	Case Manager	12	100%	36,000	10,853			150		29,796	76,899	
	Center for Child Protection	Child Therapists (3)	12	100%	114,000	29,806					47,856	191,462	
	Travis County Office of Child Representation	Attorney Ad Litem	12	100%	68,096	22,149			2,381		4,460	97,086	
	General Expenses												
	Grant Partner Travel						10,780					10,760	
	Systems Development Training										1,000	1,000	
	Total Match				311,904	98,481	10,760		2,731	98,325	130,904	663,105	
	Children FIRST (located in Travis County HHS)	Social Services Mgr.	12	100%	55,582	21,851							77,433
		Case Workers (5)	12	100%	201,470	78,648							278,118
	Operating Budget	Operating	12	100%							27,151		27,151
		Total Budget/Match Amount											<u>382,702</u>
													<u>101,407</u>
	Travis County Office of Child Representation	Managing Attorney	12	5%	101,501	31,088							6,629
		Social Worker	12	5%	42,382	15,080							2,873
													<u>9,502</u>
	Center for Child Protection	Director of Program Svcs.	12	5%	72,360	14,549							<u>4,346</u>
	Total*												<u><u>116,254</u></u>

*Travis County Office of Child Representation is providing a match of \$9,502 and the Center for Child Protection is providing a match of \$4,345. Travis County Children FIRST is providing the balance (\$101,407) of the year two match requirement of \$115,254. The full personnel and operating budget of \$382,702 for Children FIRST is included to show the funds that will support the grant program. However, only the \$115,254 will be used as match.

Travis County - Children's Success Initiative (CSI)

Year 3 Partner Expenses	Position	Months	Percentage of time	Personnel	Fringe Benefits	Travel	Equipment	Supplies	Contractual	Other	Federal	Non-Federal
Travis County HHSVS	Project Director	12	100%	52,978	19,108			200		4,896	77,182	
Children FIRST (located in Travis County HHS)	Parent Advocate	12	100%	40,830	16,665					42,896	100,391	
Encompass Medical Mgmt.	Evaluator	12	100%						54,895		54,895	
	Research Asst.	12	100%						43,430		43,430	
Austin Recovery - Cradles Program	Case Manager	12	100%	36,000	10,653			150		29,796	76,899	
Center for Child Protection	Child Therapists (3)	12	100%	114,000	29,606					47,856	191,462	
Travis County Office of Child Representation	Attorney Ad Litem	12	100%	68,096	22,149			2,381		4,460	97,086	
General Expenses												
Grant Partner Travel						10,760				1,000	10,760	
Systems Development Training											1,000	
Total				311,804	98,481	10,760		2,731	98,325	130,804	653,105	
Match												
Children FIRST (located in Travis County HHS)	Social Services Mgr.	12	100%	55,582	21,851							77,433
	Case Workers (5)	12	100%	201,470	76,648							278,118
Operating Budget	Operating	12	100%							27,151		27,151
Total Budget	Total Budget/Match Amount											382,702
												<u>149,429</u>
Travis County Office of Child Representation	Managing Attorney	12	5%	101,501	31,088							6,629
	Social Worker	12	5%	42,382	15,080							2,873
												<u>9,502</u>
Center for Child Protection	Director of Program Svcs.	12	5%	72,360	14,549							<u>4,345</u>
Total*												<u>163,276</u>

*Travis County Office of Child Representation is providing a match of \$9,502 and the Center for Child Protection is providing a match of \$4,345. Travis County Children FIRST is providing the balance (\$149,429) of the year three match requirement of \$163,276. The full personnel and operating budget of \$382,702 for Children FIRST is included to show the funds that will support the grant program. However, only the \$149,429 will be used as match.

Travis County - Children's Success Initiative (CSI)

Year 4		Months	Percentage of time	Personnel	Fringe Benefits	Travel	Equipment	Supplies	Contractual	Other	Federal	Non-Federal
Partner Expenses												
Travis County HHSVS	Project Director	12	100%	52,978	19,108			200		4,896	77,182	
Children FIRST (located in Travis County HHS)	Parent Advocate	12	100%	40,830	16,665					42,896	100,391	
Encompass Medical Mgmt.	Evaluator	12	100%						54,895		54,895	
	Research Asst.	12	100%						43,430		43,430	
Austin Recovery - Cradles Program	Case Manager	12	100%	36,000	10,953			150		29,796	76,899	
Center for Child Protection	Child Therapists (3)	12	100%	114,000	29,808					47,856	191,462	
Travis County Office of Child Representation	Attorney Ad Litem	12	100%	68,096	22,149			2,381		4,460	97,086	
General Expenses												
Grant Partner Travel						10,760				1,000	10,760	
Systems Development Training											1,000	
Total Match				311,904	98,481	10,760		2,731	98,325	130,904	653,105	
Children FIRST (located in Travis County HHS)	Social Services Mgr.	12	100%	55,582	21,861							77,433
Operating Budget	Case Workers (5)	12	100%	201,470	76,648							278,118
	Operating	12	100%							27,151		27,151
	Total Budget/Match Amount											382,702
Travis County Office of Child Representation	Managing Attorney	12	5%	101,501	31,088							6,629
	Social Worker	12	5%	42,382	15,080							2,873
												9,502
Center for Child Protection	Director of Program Svcs.	12	5%	72,360	14,549							4,345
Total*												163,276

*Travis County Office of Child Representation is providing a match of \$9,502 and the Center for Child Protection is providing a match of \$4,345. Travis County Children FIRST is providing the balance (\$149,429) of the year four match requirement of \$163,276. The full personnel and operating budget of \$382,702 for Children FIRST is included to show the funds that will support the grant program. However, only the \$149,429 will be used as match.

Travis County - Children's Success Initiative (CSI)

Year 5	Partner Expenses	Position	Months	Percentage of time	Personnel	Fringe Benefits	Travel	Equipment	Supplies	Contractual	Other	Federal	Non-Federal
	Travis County HHSVS	Project Director	12	100%	52,978	19,108			200		4,896	77,182	
	Children FIRST (located in Travis County HHS)	Parent Advocate	12	100%	40,830	16,665					42,896	100,391	
	Encompass Medical Mgmt.	Evaluator	12	100%						56,595		56,595	
		Research Asst.	12	100%						43,430		43,430	
	Austin Recovery - Cradles Program	Case Manager	12	100%	36,000	10,953			150		29,796	76,899	
	Center for Child Protection	Child Therapists (3)	12	100%	114,000	29,606					47,856	191,462	
	Travis County Office of Child Representation	Attorney Ad Litem	12	100%	68,096	22,149			2,381		4,460	97,086	
	General Expenses												
	Grant Partner Travel						10,760					10,760	
	Systems Development Training										1,000	1,000	
	Total Match				311,904	98,481	10,760		2,731	100,025	130,904	654,805	
	Children FIRST (located in Travis County HHS)	Social Services Mgr.	12	100%	55,582	21,851							77,433
		Case Workers (5)	12	100%	201,470	76,648							278,118
	Operating Budget	Operating	12	100%							27,151		27,151
		Total Budget/Match Amount											382,702
													<u>204,421</u>
	Travis County Office of Child Representation	Managing Attorney	12	5%	101,501	31,088							6,829
		Social Worker	12	5%	42,382	15,080							2,873
													<u>9,502</u>
	Center for Child Protection	Director of Program Svcs.	12	5%	72,360	14,549							<u>4,346</u>
													<u>218,268</u>
	Total*												

*Travis County Office of Child Representation is providing a match of \$9,502 and the Center for Child Protection is providing a match of \$4,345. Travis County Children FIRST is providing the balance (\$204,421) of the year five match requirement of \$218,268. The full personnel and operating budget of \$382,702 for Children FIRST is included to show the funds that will support the grant program. However, only the \$204,421 will be used as match.

Travis County - Children's Success Initiative (CSI)

Match

Children FIRST - Personnel*

	Salary	FICA	Health Insurance	Life Insurance	Retirement	WCI	%	Total
Social Services Manager	55,582	4,252	10,572	99	6,820	108	100%	77,433
Case Worker	41,187	3,151	7,872	99	5,054	80	100%	57,443
Case Worker	40,298	3,083	14,844	99	4,945	79	100%	63,348
Case Worker	40,191	3,075	6,456	99	4,931	78	100%	54,830
Case Worker	40,374	3,089	6,456	99	4,954	79	100%	55,051
Case Worker	39,420	3,016	-	99	4,837	77	100%	47,449
								<u>365,651</u>

Children FIRST - Operating*

OFFICE EQUIP, FURN, & SUPP	566
BUILDING MAINT EQUIP/SUPP	166
EDUC, COMMUNCATN, EQ & SUPP	49
OTHER GENERAL HARDWARE	54
LONG DISTANCE	50
CELLULAR AIRTIME	559
CELL PHONE ALLOWANCE	360
AUTO MILEAGE-EMPLOYEES	500
AUTO MILEAGE-VOLUNTEERS	3,000
ADVERTISING/PUBLIC NOTICE	1,000
OTHER PURCHASED SERVICES	1,356
VOLUNTEER RECOGNITION	5,246
TRAVEL, MEALS, LODGING	915
TRAINING & SEMINARS	330
TRAINING-IN HOUSE/ONLINE	8,000
TRAINING - MATERIALS	5,000
	<u>27,151</u>

Total Budget

382,702

Match Amount Year 1 \$104,493, Year 2 \$101,407, Year 3 \$149,249, Year 4 \$149,249, Year 5 \$204,421

Travis County Office of Child Representation - Personnel

	Salary	FICA	Health Insurance	Life Insurance	Retirement	WCI	%	Total
Managing Attorney	101,501	7,765	10,572	99	12,454	198	5%	6,629
Social Worker	42,382	3,242	6,456	99	5,200	83	5%	2,873
								<u>9,502</u>

Center for Child Protection - Personnel

	Salary	FICA	Health Insurance	Life Insurance	Retirement	WCI	%	Total
Director of Program Services	72,360	5,536	4,693	0	2,171	2,149	5%	<u>4,345</u>

*Travis County Office of Child Representation is providing a match of \$9,502 and the Center for Child Protection is providing a match of \$4,345. Travis County Children FIRST is providing the balance (\$104,493) of the year one match requirement of \$118,340. The full personnel and operating budget of \$382,702 for Children FIRST is included to show the funds that will support the grant program. However, only the \$104,493 will be used as match in year one. A similar arrangement will be in effect for years two through five.

Travis County - Children's Success Initiative (CSI)

General Expenses

Year 1 Year 2 Year 3 Year 4 Year 5

Grant Partner Travel

10,760 10,760 10,760 10,760 10,760

(Funding for key grant funded staff and key staff from partners to attend kick-off mtg. and annual grantee mtg. in Wash., D.C.)

Hotel = 180 per night x 3 nights (540);

Airfare = Roundtrip (500);

Per Diem = 46 per day w/o receipts or 60 per day w/ receipts x 4 days (240);

Misc. = taxi, baggage fee (65)

Total = 1,345 per trip x 2 trips x 4 staff (10,760)

(Note: Travel for Evaluator will be included in the sub-contract for that partner.)

Systems Development Training

1,000 1,000 1,000 1,000 1,000

Training grant staff and community partners = processing CEU's (250); speaker fee (500); space rental (100); training materials (150)

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Travis County - Children's Success Initiative (CSI)

Travis County Health and Human Services

<u>Personnel</u>	Year 1	Year 2	Year 3	Year 4	Year 5
Project Director					
Salary	52,978	52,978	52,978	52,978	52,978
Total	52,978	52,978	52,978	52,978	52,978
<u>Fringe</u>					
FICA (Salary x .0765)	4,053	4,053	4,053	4,053	4,053
Health Insurance (696.08 x 12 mos.)	8,353	8,353	8,353	8,353	8,353
Life Insurance (8.25 x 12 mos.)	99	99	99	99	99
Retirement (Salary x .1227)	6,500	6,500	6,500	6,500	6,500
WCI (Salary x .75 x .0026)	103	103	103	103	103
Total	19,108	19,108	19,108	19,108	19,108
<u>Supplies</u>					
Notebook workstation w/ network port (Travis County ITS quote)	2,550				
Desktop licenses and security software (Travis County ITS quote)	947				
Office Supplies (Based on another position equivalent to grant funded position)	200	200	200	200	200
Total	3,697	200	200	200	200
<u>Other</u>					
Mileage Reimbursement (600 miles @ mos. X .55 per mile x 12 mos.)	3,960	3,960	3,960	3,960	3,960
Cell Phone time (78 per month x 12 mos)	936	936	936	936	936
Total	4,896	4,896	4,896	4,896	4,896
Grand Total	80,679	77,182	77,182	77,182	77,182

Travis County - Children's Success Initiative (CSI)

Children FIRST

	Year 1	Year 2	Year 3	Year 4	Year 5
Personnel					
Parent Advocate					
Salary	40,830	40,830	40,830	40,830	40,830
Total	40,830	40,830	40,830	40,830	40,830
Fringe					
FICA					
(Salary x .0765)	3,123	3,123	3,123	3,123	3,123
Health Insurance					
(696.08 x 12 mos.)	8,353	8,353	8,353	8,353	8,353
Life Insurance					
(8.25 x 12 mos.)	99	99	99	99	99
Retirement (Salary					
x .1227)	5,010	5,010	5,010	5,010	5,010
WCI					
(Salary x .75 x .0026)	80	80	80	80	80
Total	16,665	16,665	16,665	16,665	16,665
Supplies					
Notebook workstation w/					
network port	2,550	0	0	0	0
(Travis County ITS quote)					
Desktop licenses and					
security software	947	0	0	0	0
(Travis County ITS quote)					
Total	3,497	0	0	0	0
Other					
Mileage Reimbursement					
(600 miles per month x 12					
mos. X .55 per mile)	3,960	3,960	3,960	3,960	3,960
Cell Phone time					
(78 per month x 12 mos)	936	936	936	936	936
Training					
(Nurturing Parenting					
Program - 7 staff x 400	2,800	0	0	0	0
each)					
(Touchpoints - 7 staff x 100					
each)	700	0	0	0	0
(Specialized training in					
engagement and other					
nurturing program modules -					
7 staff x 300 each)	2,100	2,100	2,100	2,100	2,100
Membership Dues					
(Baby Connections and					
YMCA - 7 staff x 100 each)	700	700	700	700	700
AAPI Measurement Tool					
	200	200	200	200	200
Flexible funds (To spend on					
specialized services for					
parents - cost based on					
estimate of services					
needed)	26,250	35,000	35,000	35,000	35,000
Total	37,646	42,896	42,896	42,896	42,896
Grand Total	88,638	100,391	100,391	100,391	100,391

(5% of the flexible funds total - \$1,313 in year 1 and \$1,750 in years 2-5 will be paid as an MSO fee to Austin Travis County Integral Care, the organization overseeing the provider network for Children FIRST)

Travis County - Children's Success Initiative (CSI)

Encompass Medical Management

GRANT ACTIVITY	Contract Hours	Hourly Rate	Cost - Year 1	Cost - Year 2	Cost - Year 3	Cost - Year 4	Cost - Year 5
Encompass Medical Management - Database Development Activities*							
Develop web-based database for entry of data required by grantor; include various drop-down menu items that conform to the federal indicator criteria and match the indicator criteria to the federal data dictionary requirements	250	100	25,000				
Create interfaces between CSI and CPS databases to allow data to be uploaded to federal database that tracks grant evaluation component	50	100	5,000				
Total			30,000	10,000	10,000	10,000	15,000
Encompass Medical Management - Ongoing Database Evaluation Activities							
Manage data connections and data feeds from CPS state databases in the CSI access database for all reports	25	100	2,500				
Warehouse the data in secure data repository and HIPAA compliant site	25	100	2,500				
Conduct on-going security checks of data and data sources	25	100	2,500				
Administration of data privacy and validity for HIPAA and confidentiality	25	100	2,500				
Ongoing consulting to evaluator on data management	25	100	2,500				
Develop XML mapping process and validity checks to meet federal data requirements	20	100	2,000				
Upload program data to federal data repositories for semi-annual report	30	100	3,000				
Total			17,500	17,500	17,500	17,500	17,500
Encompass Medical Management - Ongoing Program Evaluation Activities							
Develop data collection plan with designated federal and local performance indicators	25	100	2,500				
Meet with federal program officers and liaison at national meetings and on-site; provide information to these individuals concerning the evaluation status as requested	20	100	2,000				
Develop Institutional Review Board Human subjects protection activities, including application to IRB, maintenance of IRB protocols, consent forms, strategies to recruit, monitoring of the informed consent process	40	100	4,000				
Training activities, such as training in new assessment instruments for FBSS workers and training research assistant in instrument needed for control group	25	100	2,500				
Assist in developing semi-annual & annual reports on federal and local indicators	20	100	2,000				
Interface with database developers as needed	20	100	2,000				
Supervise research assistant and provide oversight of data collection	25	100	2,500				
Total			17,500	17,500	17,500	17,500	17,500
Printing and distributing various fact sheets to community partners	10	100	1,000	-	-	-	-
Special evaluation of local data	33	100	-	3,300	3,300	3,300	-
Dissemination plan (50 copies x \$30 each x 3 times a year)			-	4,500	4,500	4,500	4,500
Community specific reporting (25 copies x \$30 each)			-	750	750	750	750
Travel			2,690	1,345	1,345	1,345	1,345
Total			3,690	9,895	9,895	9,895	6,595
GRAND TOTAL EVALUATOR			68,690	64,895	64,895	64,895	68,695
Research Assistant - full-time							
Ongoing monitoring of web-based database to ensure data gathered from project partners throughout the year in correct formats	300	22.62	6,786				
Data collection and data entry from all partner data bases and interviews with individual program participants	1000	22.62	22,620				
Monitor data collection and data for all partners	100	22.62	2,262				
Develop tracking system for data, with special concentration on collecting control group data at pre and post-testing	300	22.62	6,786				
Develop apps databases from Excel and Web-based database and convert data for data analysis	220	22.62	4,976				
GRAND TOTAL RESEARCH ASSISTANT			43,430	43,430	43,430	43,430	43,430

*Duties will stay basically the same for years 2-5. However, database development activities will change to database maintenance activities and the cost will be reduced to \$10,000 in years 2,3, and 4 but will increase to \$15,000 in year 5.

Travis County - Children's Success Initiative (CSI)

CRADLES

<u>Personnel</u>	<u>Calculation</u>	Year 1	Year 2	Year 3	Year 4	Year 5
Case Manager						
Salary		36,000	36,000	36,000	36,000	36,000
Total		36,000	36,000	36,000	36,000	36,000
<u>Fringe</u>						
FICA	Salary x .0765	2,754	2,754	2,754	2,754	2,754
Long-Term Disability	9.35 x 12 mos.	112	112	112	112	112
Medical Insurance	847.64 x 12 mos.	7,772	7,772	7,772	7,772	7,772
Worker's Comp.	28.26 x 12 mos.	315	315	315	315	315
Total		10,953	10,953	10,953	10,953	10,953
<u>Supplies</u>						
Office supplies		150	150	150	150	150
Total		150	150	150	150	150
<u>Other</u>						
Mileage Reimbursement	600 miles X .55 per mile x 12 mos.	3,960	3,960	3,960	3,960	3,960
Cell Phone Bill	105 x 12 mos.	1,260	1,260	1,260	1,260	1,260
Payroll Processing	15.5 x 12 mos	186	186	186	186	186
Staff Development	Amount allotted to each staff for trainings or conferences Flexible funding to spend on specialized services for parents (cost based on estimate of services needed)	600	600	600	600	600
Flexible funds	cost allocated per staff per year	15,000	20,000	20,000	20,000	20,000
Occupancy						
rent		2,465	2,465	2,465	2,465	2,465
electricity		395	395	395	395	395
internet access		20	20	20	20	20
desk phone		22	22	22	22	22
other/facility maintenance		811	811	811	811	811
copier rental		45	45	45	45	45
dues & subscriptions		32	32	32	32	32
Hiring Costs						
employment ad		25				
HealthStream training	DSHS required online training	1,220				
pre-employment testing	drug and background	180				
iPhone Purchase		200				
Laptop, bag, mouse		800				
Business Cards		20				
Nurturing Parenting training		400				
Total		27,621	29,796	29,796	29,796	29,796

Travis County - Children's Success Initiative (CSI)

Center for Child Protection

<u>Personnel</u>	<u>Calculation</u>	Year 1	Year 2	Year 3	Year 4	Year 5
Child Therapists (3)						
Salary	(3 positions x 38,000 each)	114,000	114,000	114,000	114,000	114,000
Total		114,000	114,000	114,000	114,000	114,000
<u>Fringe</u>						
FICA	(114,000 x .0765)	8,721	8,721	8,721	8,721	8,721
Health Ins	(\$391.07 per month x 12 months x 3 staff)	14,079	14,079	14,079	14,079	14,079
Worker's Comp.	2.97% of salary	3,388	3,388	3,388	3,388	3,388
Retirement	3% of salary	3,420	3,420	3,420	3,420	3,420
Total		29,606	29,606	29,606	29,606	29,606
<u>Other</u>						
Mileage	(545 miles per month x 12 months x 3 staff x .55 per mile)	10,791	10,791	10,791	10,791	10,791
Measurement Tools	TSCC, TSCYC, software @ \$1,937; CBCL @ \$600; PSI @ \$753; ASQ-SE @ \$450; STEP @ \$780 <u>Note reduced amount of \$3,165 for Measurement Tools in years 2-5:</u> <u>(TSCYC @ \$1,362, CBCL @ \$600, PSI @ \$753, ASQ-SE @ \$450)</u> Trauma Symptom Checklist-Child; Trauma Symptom Checklist-Young Child; Child Behavior Checklist; Parenting Stress Index Ages and Stages Questionnaires Social Emotional; Systematic Training for Effective Parenting	4,520	3,165	3,165	3,165	3,165
Cell Phone	(\$100 per month x 12 months x 3 staff)	3,600	3,600	3,600	3,600	3,600
Flexible funds	Flexible funding to spend on specialized services for children (cost based on estimate of services needed)	22,500	30,000	30,000	30,000	30,000
Computers	(3 tablet computers x \$600 each)	1,800	-	-	-	-
Dragon Dictation Software	\$200 each for equipment and software x 3 staff	600	-	-	-	-
Therapy Tools	Travel kit with games and tools @ \$200 x 3 staff	600	-	-	-	-
Training	ROPES @ \$300 x 3 staff; TF-CBT @ \$95 x 3 staff ROPES is done by Rope Works to facilitate therapy on a ROPES course; Trauma Focused-Cognitive Behavioral Therapy (The cost for ROPES recertification will be \$300 - \$100 x 3 staff - in years 2-5.)	1,185	300	300	300	300
Total		45,596	47,856	47,856	47,856	47,856
Grand Total		189,202	191,462	191,462	191,462	191,462

Travis County - Children's Success Initiative (CSI)

Center for Child Protection

Match

Center for Child Protection - Personnel

Director of Program Services

Salary		72,360	72,360	72,360	72,360	72,360
FICA		5,536	5,536	5,536	5,536	5,536
Health Insurance		4,693	4,693	4,693	4,693	4,693
Life Insurance		0	0	0	0	0
Retirement		2,171	2,171	2,171	2,171	2,171
WCI		2,149	2,149	2,149	2,149	2,149
	%	5%	5%	5%	5%	5%
Total		4,345	4,345	4,345	4,345	4,345

Travis County - Children's Success Initiative (CSI)

Office of Child Representation

Personnel
Attorney Ad Litem
Salary
Total

Calculation	Year 1	Year 2	Year 3	Year 4	Year 5
	68,098	68,098	68,098	68,098	68,098
	68,098	68,098	68,098	68,098	68,098

Fringe
FICA
Health Insurance

(Salary x .0765)	5,209	5,209	5,209	5,209	5,209
(696.08 x 12 mos.)	8,353	8,353	8,353	8,353	8,353

Retirement
WCI
Total

Life Insurance (8.25 x 12 mos.)	99	99	99	99	99
(Salary x .1227)	8,355	8,355	8,355	8,355	8,355
(Salary x .75 x .0026)	133	133	133	133	133
	22,149	22,149	22,149	22,149	22,149

Supplies

Office supplies

(Based on another attorney position same as grant funded position)	300	300	300	300	300
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Family Code (includes shipping cost for all 3 code books)
Notebook workstation w/ network port
Desktop licenses and security software
Security software maintenance and port maintenance
Computer installation and voice and data cabling installation
Phone ISM license
Phone and port costs
Voice and data cabling installation for phone

(Based on another attorney position same as grant funded position)	120	120	120	120	120
(Travis Co. ITS quote)	2,550	-	-	-	-
(Travis Co. ITS quote)	947	-	-	-	-
(Travis Co. ITS quote)	76	76	76	76	76
(Travis Co. ITS quote)	715	-	-	-	-
(Travis Co. ITS quote)	50	-	-	-	-
(Travis Co. ITS quote)	400	-	-	-	-
(Travis Co. ITS quote)	550	-	-	-	-

Long distance phone calls (per year)

(Based on another attorney position same as grant funded position)	25	25	25	25	25
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State bar license dues (per year)

(Based on another attorney position same as grant funded position)	148	148	148	148	148
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National Association of Council for Children membership

(Based on another attorney position same as grant funded position)	100	100	100	100	100
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Texas Rules - Civil Trials

(Based on another attorney position same as grant funded position)	85	85	85	85	85
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Family Law Handbook

(Based on another attorney position same as grant funded position)	135	135	135	135	135
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Broadband (per year)

(Based on another attorney position same as grant funded position)	456	456	456	456	456
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Cell phone (per year)

(Based on another attorney position same as grant funded position)	936	936	936	936	936
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Furniture - desk

(Based on another attorney position same as grant funded position)	1,042	-	-	-	-
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Furniture - chair

(Based on another attorney position same as grant funded position)	130	-	-	-	-
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Total

	8,765	2,381	2,381	2,381	2,381
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Other

Mileage

600 miles per month x 12 months x .55 per mile	3,960	3,960	3,960	3,960	3,960
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Continuing legal education

(Based on another attorney position same as grant funded position)	500	500	500	500	500
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Total

	4,460	4,460	4,460	4,460	4,460
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Grand Total

	103,470	97,086	97,086	97,086	97,086
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Match Contribution

Managing Attorney

Salary \$ 101,501
 FICA \$ 7,765
 Health \$ 10,572 (881 x 12)
 Life \$ 99
 Retire \$ 12,454
 Workers Comp \$ 198

Total \$ 132,589

132,589 x .05	6,629	6,629	6,629	6,629	6,629
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Social Worker

Salary \$ 42,382
 FICA \$ 3,242
 Health \$ 6,456 (538 x 12)
 Life \$ 99
 Retire \$ 5,200
 Workers Comp \$ 83

Travis County - Children's Success Initiative (CSI)

Total \$ 57,462

57,462 x .05

2,873 2,873 2,873 2,873 2,873

Grand Total

9,502 9,502 9,502 9,502 9,502

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Budget Justification

Children's Success Initiative (CSI) seeks funding in year one for:

Nine grant positions:

1. Evaluator – Contract with Encompass
2. Research Assistant – Contract with Encompass
3. Project Director – Funded position within Travis County Health and Human Services/Veteran Services (TCHHS/VS)
4. 3 Lead Child Advocates (Child Therapists) – Funded positions with Center for Child Protection (CCP)
5. 1 Attorney ad Litem represent Children – Funded position with Office of Child Representation (OCR)
6. 1 Intensive Case Manager – Funded position with CRADLES / Austin Recovery
7. 1 Parent Advocate – Funded position with Children FIRST (TCHHS/VS)

Office supplies, mileage, and cell phone allowance to support the grant funded positions.

Laptop computers for seven of the grant funded staff. The cost of each individual laptop will not exceed \$3,000.

Flexible funding to expend on specialized services for children and parents including substance abuse treatment, concreted and recovery supports as well as concrete supports for kinship placement providers. These funds will follow the entities below that are providing services to children, youth and family:

1. Center for Child Protection
2. CRADLES
3. Children F.I.R.S.T. (TCHHS/VS).

Travel to support attendance of key personnel (Project Director, Evaluator, Substance Abuse, Child Welfare Partner and Early Education Partner and other key staff) at the grantee meetings in Washington.

Training to support cross-training between partners on critical issues such as trauma-informed care; substance abuse; mental health; child development; child welfare; evidenced-based practices; protective factors and cultural competence and disproportionality.

There will be no funding requested for Equipment or Construction.

CSI will provide match funding each year of the grant from these sources:

1. TCHHS/VS – Children FIRST staff positions (Existing positions not funded by the grant)
2. OCR percentage of supervision time of the grant position (Existing position not funded by the grant)
3. CCP percentage of supervision time of the grant positions (Existing position not funded by the grant)

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Object Class Categories

A. Personnel / Fringe Benefitsⁱ

Position: Evaluator

Necessity: Grant required position that is essential to ensure compliance with the evaluation component of the grant design.

These duties will be executed:

- Develop data collection plan with designated federal and local performance indicators
- Meet with federal program officers and liaison at national meetings and on-site; provide information to these individuals concerning the evaluation status as requested
- Develop Institutional Review Board Protection of Human Subjects activities, including application to IRB, maintenance of IRB protocols, consent forms, strategies to recruit, monitoring of the informed consent process
- Training activities, such as training in new assessment instruments for FBSS workers and training research assistant in instrument needed for control group
- Assist in developing semi-annual & annual reports on federal and local indicators
- Interface with database developers as needed
- Supervise research assistant and provide oversight of data collection
- Complete a local evaluation for dissemination annually with a focus on impact and outcomes

Additionally these duties as it relates to the management of the web based data collection system:

- Develop web-based database for entry of data required by grantor; include various drop-down menu items that conform to the federal indicator criteria and match the indicator criteria to the federal data dictionary requirements
- Create interfaces between CSI and CPS databases to allow data to be uploaded to federal database that tracks grant evaluation component
- Encompass Medical Management - Ongoing Program Evaluation activities
- Manage data connections and data feeds from CPS state databases in the CSI access database for all reports
- Warehouse the data in secure data repository and HIPAA compliant site
- Conduct on-going security checks of data and data sources
- Administration of data privacy and validity for HIPAA and confidentiality
- Ongoing consulting to evaluator on data management
- Develop XML mapping process and validity checks to meet federal data requirements
- Upload program data to federal data repositories for semi-annual report

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Reasonableness: The hourly rate of \$100 includes the remuneration of the evaluator. There is no administrative or indirect cost.

Allocation of Proposed Cost: Execute a unit cost contract with Encompass. The allocation of grant funding is at least 15% annually as required by grantor.

Position: Research Assistant

Necessity: Position to support the collection of data and support the activities of the evaluator. This position is essential to ensure full compliance with the evaluation component of the grant design.

- Ongoing monitoring of web-based database to ensure data gathered from project partners throughout the year in correct formats
- Data collection and data entry from all partner data bases and interviews with individual program participants
- Monitor data collection and data for all partners
- Develop tracking system for data, with special concentration on collecting control group data at pre and post-testing
- Develop SPSS databases from Excel and Web-based database and convert data for data analysis

Reasonableness: The hourly rate for this position is \$22.62 and the staff is expected to work 1,920 hours annually. The cost also includes required benefits of FICA; Health Insurance; Unemployment; and Worker's Compensation.

Allocation of Proposed Cost: The funds for this position will be part of the contract executed with the evaluator through Encompass.

Position: Project Director

Necessity: This position will be responsible for implementation of the grant design and management of the grant in collaboration with project administrator and grant partners. This position is essential to ensure full compliance with grant requirements and successful implementation of the grant design. Specific duties include the following:

- Providing grant required reports
- Complying with the evaluations
- Expanding and enhancing systems and services
- Strengthening the regional partnership
- Position will be immediately responsive to the grantor, participate in grantee conference calls and technical assistance calls, and provide insight and recommendations regarding the application of the grant design.

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Reasonableness: The salary for this position was derived from the Travis County Classified Salary Schedule. The compensation is commensurate with the skills, education, knowledge and responsibilities of this position.

Allocation of Proposed Cost: The funds for this position will be utilized by the lead agency, TCHHSVS, to hire and supervise the project director.

Position: Lead Child Advocate (Child Therapist) (3 positions)

Necessity: These positions are required to fulfill the grant design and provide therapeutic services to the children served by the grant. Duties include the following:

- Assessments
- Provide direct therapeutic services
- Provide or access experiential therapeutic services
- Advocacy in school setting
- Education on substance abuse
- Parent training.

Reasonableness: The salary of this position is slightly below the median salary for a licensed clinical social worker based on the national average. The salary is commensurate with others who have like degrees and experience in Austin, Texas.

Allocation of Proposed Cost: The funds for these positions will be provided to CCP in a sub-recipient contract.

Position: Attorney Ad Litem

Necessity: This position is required to fulfill the grant design. This position provides legal representation to children whose family has an open lawsuit with Child Protective Services. Duties include the following:

- Interview all clients who are 4 years old or older
- Interview people who have significant knowledge of the child's history and condition, investigate the facts of the case
- Obtain and review copies of relevant records
- Participate in litigation
- Take action that is necessary to expedite the proceedings and encourage settlement.

Reasonableness: The salary for this position was derived from the Travis County Classified Salary Schedule. The salary is less than the median average salary for attorneys in Austin, Texas but is the average salary for a County funded attorney position and is commensurate to other attorneys in OCR.

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Allocation of Proposed Cost: The funds for this position will be allocated to the budget of the Office of Child Representation which is a program managed under the Justice and Public Safety Division of Travis County.

Position: Intensive Case Manager

Necessity: This position is required to fulfill the grant design. This position provides intensive case management to parents with a rating of 4 or higher on the UNCOPE. Duties include the following:

- Conduct psycho-social history
- Provide referrals to local resources
- Facilitate access to substance abuse treatment
- Administer screening/assessment tools
- Provide guidance and psycho-educational support on life choice issues
- Parent education / training
- Promote protective factors.

Reasonableness: This position is funded below the median salary in Austin, Texas but is commensurate to the salary of others employed by the CRADLES program.

Allocation of Proposed Cost: This position will be provided to CRADLES / Austin Recovery in a sub-recipient contract.

Position: Parent Advocate

Necessity: This position is required to fulfill the grant design. This position provides case management to parents with a rating between 1-3 on the UNCOPE. Duties include the following:

- Conduct psycho-social history
- Provide referrals to local resources
- Facilitate access to substance abuse treatment
- Administer screening/assessment tools
- Provide guidance and psycho-educational support on life choice issues
- Parent education / training
- Promote protective factors.

Reasonableness: The salary for this position was derived from Travis County Classified Salary Schedule. The compensation is commensurate with the skills, education, knowledge and responsibilities of this position.

Allocation of Proposed Cost: The funds for this position will be allocated to the budget of the Children FIRST which is a program managed under the Office of Children Services under TCHHSVS.

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B. Travel

The proposed budget for CSI includes funding for 5 key positions to attend the grantee meetings annually. These are the positions/partners that will be supported by grant funding to attend the grantee meeting:

- Evaluator
- Project Director
- Substance Abuse Partner
- Child Welfare Partner
- Early Childhood Partner
- Other key staff/partners

CSI is not requesting any additional funding for travel other than that required for key positions to attend the grantee meetings.

C. Equipment

CSI does not have any equipment purchases as part of the grant budget proposal.

D. Supplies

CSI has office supplies as part of the budget for each sub-recipient contract with CRADLES, OCR, and for the Project Director grant-funded position managed by TCHHSVS.

Necessity: Basic office supplies to facilitate work with grant supported parents.

Reasonableness: The allocation for office supplies annually is less than 1% of each individual program budget within CSI.

Allocation of Proposed Cost: Office supplies will be part of the allocated budget under the CSI design.

E. Contractual

CSI will execute one vendor contract and three sub-contracts as part of implementing the CSI grant design.

1. Encompass – this will be a unit cost contract with the evaluator for the grant project. The contract will cover these costs: Evaluator's project time and compliance with grant requirements; Database development and management activities; employment of a research assistant; and travel expenses to required grantee conferences. These

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services and costs will be similar year to year of the grant except for year 1 and 5 due to start-up and close-out activities related to the grant.

2. CRADLES – this will be a sub-recipient contract to facilitate service delivery to the parents served by the grant. This contract will employ an intensive case manager who will work with parents who rate 4 or higher on the UNCOPE. This contract will include these costs related to the position: salary, benefits, mileage, cell phone stipend, office supplies, and other costs. In year one of the grant there will be associated start-up costs: purchase a laptop computer, cell phone, and required training. The specific trainings are Healthstream – required by Department of State Health Services for any agency that is a recipient of their funding, as is Austin Recovery (parent agency of CRADLES); and Nurturing Parent Training as is required to ensure quality parent coaching skills. The budget will also include flexible funding to support parents in substance abuse treatment, recovery supports, and concrete services. The intensive case manager will identify the unmet need and pursue funding through the flexible funding following the written oversight protocols by CRADLES that include need and funding verification, and that the cost is reasonable in comparison to like services. .

3. CCP – this will be a sub-recipient contract to facilitate service delivery to the children served by the grant. This contract will employ 3 lead child advocates (child therapists) who will provide therapeutic assessments and services. This contract will include those costs related to the positions: salary, benefits, mileage, cell phone stipend, office supplies and other costs. In year one of the grant, there will be associated start-up costs including purchase of a laptop, measurement tools and required training. The specific trainings are ROPES and Trauma Focused Cognitive Behavioral Therapy. The budget will also include flexible funding to support service delivery for the children enrolled in CSI. The funding will be used to purchase services and supports that are not funded by insurance but are considered therapeutically important to the child's social and emotional development. The therapist will identify the unmet need and pursue funding through the flexible funding following the written oversight protocols by CCP that include need and funding verification and that the cost is reasonable in comparison to like services.

4. **Austin Travis County Integral Care (ATCIC)** – as part of the System of Care (SOC) contract that TCHHS/VS has executed with ATCIC for the last 8 years. The SOC contract allows TCHHS/VS to expend flexible funding on the behalf of children, youth and families. The contract funds specific services and supports for participants in various programs in Travis County. ATCIC acts as the managed service organization in this contract by fulfilling two functions: Provider Network development and payment allocation and subsequent reimbursement. ATCIC recruits, credentials, contracts and oversees a provider network. The providers on the network are identified by community partners, families and ATCIC staff. The contract dollars allocated by TCHHS/VS under this contract reimburses ATCIC for payments rendered to network and non-network providers under this contract. ATCIC has the software to carefully manage funding

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allocation and budget management to ensure that only authorized funding is expended on eligible clients. Under this contract, TCHHS/VS funds an MSO fee to offset the cost of the management of the network and the billing process. The MSO fee for this grant is and the authorized MSO fee is 5%. As part of the grant design, flexible funding will be allocated for the SOC contract to be utilized by the parent advocate and kinship advocates of the Children F.I.R.S.T. program. The flexible funds will be expended to support parent's substance abuse treatment, recovery supports, and concrete services and concrete services for kinship placement providers. The parent/kinship advocate will identify the unmet need and pursue funding through the flexible funding, following the written oversight protocols by Children F.I.R.S.T. that include need and funding verification and that the cost is reasonable in comparison to like services.

F. Construction

CSI does not have any construction costs as part of the proposed budget.

G. Other

These are other CSI costs that have not been accounted for in the other budget categories.

1. Cross-Training for regional partners, CSI staff, primary partners' staff, and community members. The training will cover a variety of topics that support a common basis of knowledge and understanding. The training will occur quarterly and will cover these topics among others: promoting protective factors, evidence-based practices specific to target population of the grant, substance abuse/child welfare, child development, parent/child visitation – family time, trauma-informed care, neuro-development of young children and trauma. The costs cover speaker fees, location rental, documents for distribution, and CEU's.

2. Indirect Charges

CSI will not charge indirect costs to the grant.

H. Match Requirement

The match requirement for this grant is an escalating match with year one and two being 15%; year three and four is 20% and year five is 25%. The match for this grant will be made through in-kind contributions from the lead agency and primary partners.

1. TCHHS/VS will provide between 90-95% of the match for the grant for all five years. The amount will increase annually based on the increasing match requirements (TCHHSVS share of the match will increase as necessary. The amount of match provided by the partners will remain constant).

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TCHHS/VS match will be from the salaries and benefits of the Children FIRST unit of Travis County. This unit is currently funded by Travis County using general revenue funds. The unit has been funded in some capacity for over twenty years. The unit does not provide essential or mandated services to the county. None of the employees are elected officials and all individual salaries are less than \$60,000.00. The unit currently employs 1 supervisor and 5 case workers. The target population for the unit is any family with an open child protective services case. The services are geared to be short-term at 90 days and focus on resource identification and referral. The unit does not use any assessment/screening tools or an established evidenced-based curriculum. The services are rendered in the home and community. As part of the grant design, the Children FIRST unit will be redesigned and only serve grant funded participants. The target population served by the unit will change to only FBSS families with a UNCOPE of 1-3. Their title will shift to Parent Advocate. The focus of their work will be to facilitate access to substance abuse treatment, recovery supports, parent training and concrete supports. The staff will become part of the SUCCESS team and be expected to collaborate with team members and other relevant community partners in service delivery to the parent. The staff will also provide transportation to appointments that support service goals for the family. The staff will also be required to administer screening and assessment tools with each family. Children FIRST will become a team member of the SUCCESS Team of CSI once the grant is awarded.

TCHHS/VS will sustain the Children FIRST unit as part of the CSI post-grant funding. This allows for 6 positions to have a secure funding source which supports long-term sustainability for the project.

2. CCP will provide less than 1 % of the overall match for all five years of the grant.

CCP match will consist of 5% of supervisory time for the 3 grant funded lead child advocate positions. CCP will track the hours monthly and report to TCHHS/VS semi-annually.

3. OCR will provide less than 1% of the overall match for all five years of the grant.

OCR match will consist of 5% of supervisory time for the grant funded attorney ad litem as well as 5% of a social worker's time. OCR will track the hours monthly and report to TCHHS/VS semi-annually.

Flexible Funding for CSI Grant

Flexible funds have been budgeted each year for the children, youth and families enrolled in the treatment group of the grant.

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The funding will be allocated to the primary partners in each service track to be expended on enrolled participants to enhance their functioning and well-being.

Each primary partner must develop a written protocol to manage the authorization and distribution of the funds ensuring compliance with the grant design and grantor.

Year One the funding will be adjusted down 25% since the service period will be 9 months.

Parent / Kinship Track Flexible Funding

CRADLES – Allocation Year 1 is \$15,000 and Year 2-5 is \$20,000 will be a part of their contract

Examples of approved expenditures:

- Parent/Caretaker Education
- Psychological Assessment
- Psychiatric Assessment
- Specialized Therapy
- Individual, Group or Family Counseling/therapy
- Crisis Counseling
- Medication Management
- Substance Abuse Treatment
- Psychosocial Skills Training/Behavior Management
- Respite Care
- Child Care/supervision
- Transportation
- Employment Support Services
- Case Conference (Wraparound Team Meeting)
- Emergency Food
- Clothing
- Utilities
- Housing Assistance
- Medical Purchases

Children FIRST – Allocation Year 1 \$26, 250 and Year 2-5 is \$35,000 will be placed in the System of Care contract between TCHHS/VS and ATCIC The flexible funds will be expended to support parents substance abuse treatment, recovery supports, and concrete services and concrete services for kinship placement providers. The parent/kinship advocate will identify the unmet need and pursue funding through the flexible funding, following the written oversight protocols by Children FIRST that include: need and funding verification and that the cost is reasonable in comparison to like services.

Examples of approved expenditures:

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Same as above

Children's Track Flexible Funding

Center for Child Protection – Allocation for Year 1 - \$22,500 and Year 2-5 \$30,000 will be part of their contract. The funding will be used to purchase services and supports that are not funded by insurance but are considered therapeutically important to the child's social and emotional development. The therapist will identify the unmet need and pursue funding through the flexible funding, following the written oversight protocols by CCP that include: need and funding verification and that the cost is reasonable in comparison to like services.

Examples of Approved Expenditures

- Substance Abuse Treatment/Intervention
- Tutoring
- Specialized Therapy
- Experiential Therapy
- Equine Therapy
- Psychological Assessment
- Psychiatric Assessment
- Neuropsychological
- Medication Management
- Psychosocial Skills Training
- Mentoring
- Therapeutic/Behavioral Aide
- Case Conference (Wraparound Team Meeting)
- Recreational/Social activities
- Enrichment Activities
- Mentoring

¹ <http://www.salary.com/category/salary/> this website was used to compare salaries for reasonableness