



## Outcomes Report - 2018

*Helping children facing adversity on their journey to adulthood.*

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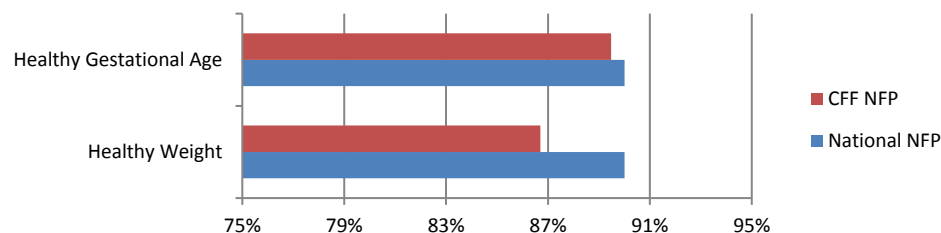
# HEALTHY BABIES

Program	2018 Outcome Measures	2018 FINAL	2017 FINAL	2016 FINAL
<p><b>NURSE FAMILY PARTNERSHIP (NFP)</b> is an evidence-based home visiting program enrolls first time, low-income pregnant women who are no more than 28 weeks pregnant. Their Nurse Home Visitor follows them through the child's second birthday.</p> <p><b>Glossary:</b>  <b>ASQ</b> = Ages &amp; Stages Questionnaire  <b>ASQ-SE</b> = Ages &amp; Stages Quest. – Social/Emotional.            These are developmental and social-emotional screening for children from one month to 5 ½ years. Highly reliable and valid, ASQ looks at strengths and trouble spots and educates parents about developmental milestones.</p> <p><b>Data Sources:</b>            NFP Quarterly Reports provided by National Service Office</p>	<p><b>Children Improve Health &amp; Well-Being</b></p> <ul style="list-style-type: none"> <li>Babies are born healthy (e.g. normal weight of 5.5 lbs. or more and gestational age of 37 weeks or more at delivery).</li> <li>Toddlers receive recommended immunizations by age 2.</li> <li>Toddlers develop age appropriate language and social skills.</li> </ul> <p><b>Mothers Improve Life Course</b></p> <ul style="list-style-type: none"> <li>Mothers are not pregnant 24 months after birth of baby</li> <li>Mothers improved education and/or employment</li> </ul> <p><b>Clients Complete Program</b></p> <ul style="list-style-type: none"> <li>Attrition during pregnancy phase of program (National NFP Objective: 10% or less, national data 16%)</li> <li>Attrition during infancy phase of program (NFP objective: 20% or less, national data 33%)</li> <li>Clients complete toddler phase of program (NFP Objective: 20% or less, national data 18%)</li> </ul> <p><i>*NOTE: According to American College of Obstetrics and Gynecology (ACOG): the following represent the four new definitions of 'term' deliveries:</i></p> <ul style="list-style-type: none"> <li>Early Term: 37wks 0d thru 38wks 6d</li> </ul>	<p>102 babies born YTD</p> <p><b>Child Health &amp; Well-Being</b>  <u>HEALTHY BABIES</u>            2018            88% (89/102) of babies born have a healthy weight, 88% (89/102) are not pre-term (at least 37 weeks gestation), and 61% (62/102) met the ACOG definition of full-term.*</p> <p><b>NOTE: Due to changes in data management and reporting, updated cumulative data was not provided in Q3 or Q4 2018</b></p> <p><i>Cumulative (Program start through 6/30/18):</i>            87% of babies born have a healthy weight 593/684); 89% are 37 weeks or more (312/684).</p> <p><u>IMMUNIZATIONS</u>            95% of infants; 97% of 1 yr. olds; 93% of 18 mo. olds; and 95% of 2 yr. olds have up-to-date immunizations.</p> <p><u>LANGUAGE &amp; SOCIAL SKILLS</u>            ASQ-SE # &amp; % within normal range</p> <ul style="list-style-type: none"> <li>6 months – 98%</li> <li>12 months – 96%</li> <li>18 months – 96%</li> <li>24 months – 95%</li> </ul> <p>ASQ # &amp; % within normal range</p> <ul style="list-style-type: none"> <li>4 months – 93%</li> <li>10 months – 87%</li> <li>14 months – 94%</li> <li>20 months – 97%</li> </ul>	<p>82 babies born 2017</p> <p><b>Child Health &amp; Well-Being</b>  <u>HEALTHY BABIES</u>            90% (74/82) of babies born have a healthy weight, 90% (74/82) are not pre-term (at least 37 weeks gestation), and 64% (49/77) met the ACOG definition of full-term.*</p> <p><i>Cumulative (Inception through 12/31/2017):</i>            87% of babies born have a healthy weight (542/626); 89% are 37 weeks or more (559/626).</p> <p><u>IMMUNIZATIONS</u>            95% of infants; 97% of 1 yr. olds; 93% of 18 mo. olds; and 94% of 2 yr. olds have up-to-date immunizations.</p> <p><u>LANGUAGE &amp; SOCIAL SKILLS</u>            ASQ-SE # &amp; % within normal range</p> <ul style="list-style-type: none"> <li>6 months – 98%</li> <li>12 months – 96%</li> <li>18 months – 95%</li> <li>24 months – 95%</li> </ul> <p>ASQ # &amp; % within normal range</p> <ul style="list-style-type: none"> <li>4 months – 93%</li> <li>10 months – 87%</li> <li>14 months – 94%</li> <li>20 months – 97%</li> </ul> <p><b>Maternal Life Course</b>  <u>SUBSEQUENT PREGNANCY</u>            97% of mothers are not pregnant at 6 mos.; 90% at 12 mos.; 81% at 18 mos.; 77% at 24 mos.</p> <p><b>Program Completion</b></p>	<p><i>120 babies born</i></p> <p><u>HEALTHY BABIES</u>            91% (109/120) of babies born have a healthy weight, 89% (107/120) are not pre-term (at least 37 weeks gestation), and 64% (77/120) met the ACOG definition of full-term.*</p> <p><i>Cumulative (Inception through 12/31/16):</i>  <u>HEALTHY BABIES</u>            86% of babies born have a healthy weight (471/545); 89% are 37 weeks or more (485/545)</p> <p><u>IMMUNIZATIONS</u>            94% of infants; 97% of 1 yr. olds; 91% of 18 mo. olds; and 93% of 2 yr. olds have up-to-date immunizations.</p> <p><u>LANGUAGE &amp; SOCIAL SKILLS</u>            ASQ-SE # &amp; % within normal range</p> <ul style="list-style-type: none"> <li>6 months – 97%</li> <li>12 months – 96%</li> <li>18 months – 95%</li> <li>24 months – 95%</li> </ul> <p>ASQ # &amp; % within normal range</p> <ul style="list-style-type: none"> <li>4 months – 92%</li> <li>10 months – 85%</li> <li>14 months – 94%</li> <li>20 months – 97%</li> </ul> <p><u>SUBSEQUENT PREGNANCY</u>            97% of mothers are not pregnant at 6 mos.; 89% at 12 mos.; 80% at 18 mos.; 79% at 24 mos.</p> <p><u>ATTRITION</u></p>

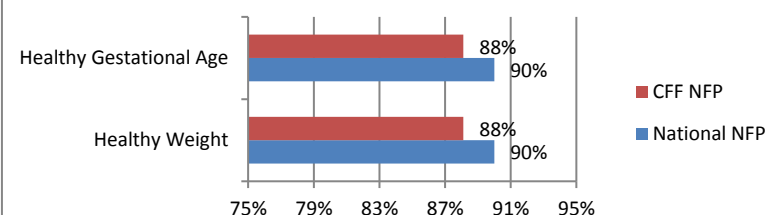
<ul style="list-style-type: none"> <li>• Full Term: 39wks 0d thru 40wks 6d</li> <li>• Late Term: 41wks 0d thru 41wks 6d</li> <li>• Postterm: 42wks 0d and beyond</li> </ul> <p>We are focused on reducing pre-term deliveries (before 37 weeks) but have also started tracking full-term deliveries for consistency between HFA and NFP</p>	<p><b>Maternal Life Course</b>  <u>SUBSEQUENT PREGNANCY</u>            98% of mothers are not pregnant at 6 mos.; 90% at 12 mos.; 82% at 18 mos.; 80% at 24 mos.</p> <p><b>Program Completion</b>  <u>ATTRITION</u>            16% of Potential Completers dropped during pregnancy; 45% of potential Completers dropped in Infancy; 22% of potential Completers dropped in Toddlerhood.</p> <p><u>BREASTFEEDING INITIATION</u>            84% of NFP clients report initiating breastfeeding, compared to 75% of Delaware mothers (2016 CDC Breastfeeding Report Card)</p> <p><u>EDUCATION</u>            62% of active clients have a high school diploma or GED, 1% have a vocational certificate</p> <p><u>WORKFORCE</u>            16% of active clients are employed full-time, 29% are employed part-time.</p>	<p><u>ATTRITION</u>            16% of Potential Completers dropped during pregnancy; 45% of potential Completers dropped in Infancy; 24% of potential Completers dropped in Toddlerhood.</p> <p><u>BREASTFEEDING INITIATION</u>            82% of NFP clients report initiating breastfeeding, compared to 75% of Delaware mothers (2016 CDC Breastfeeding Report Card)</p> <p><u>EDUCATION</u>            59% of active clients have a high school diploma, 1% have a vocational certificate</p> <p><u>WORKFORCE</u>            20% of active clients are employed full-time, 26% are employed part-time.</p>	<p>15% of Potential Completers dropped during pregnancy; 45% of potential Completers dropped in Infancy; 25% of potential Completers dropped in Toddlerhood.</p> <p><u>BREASTFEEDING INITIATION</u>            84% (492/589) of NFP clients report initiating breastfeeding, compared to 65.7% of Delaware mothers (2014 CDC Breastfeeding Report Card)</p>
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## Healthy Birth Outcomes

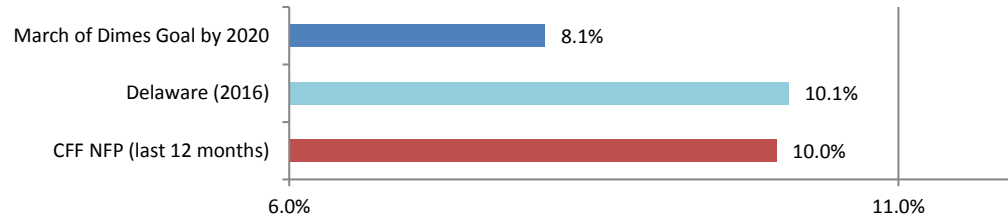
Healthy Birth Outcomes, Program Initiation through Q2 2018



Healthy Birth Outcomes, 2018



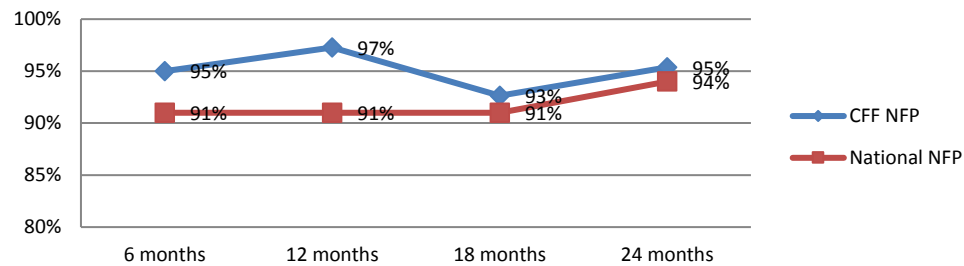
### Pre-Term Births (less than 37 weeks)



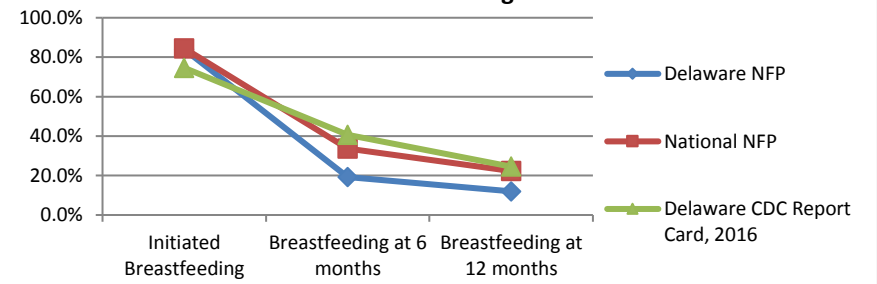
NOTE: Reducing pre-term births (births before 37 wks. gestational age) is a focus of a national March of Dimes initiative in which we are a partner. We are working to reduce pre-term births in Delaware from a 2016 rate of 10.1 to a rate of 8.1 by 2020.

### Infant Health (Cumulative: Program Inception through Q2 2018)

#### Cumulative: % of Babies Current with Immunizations

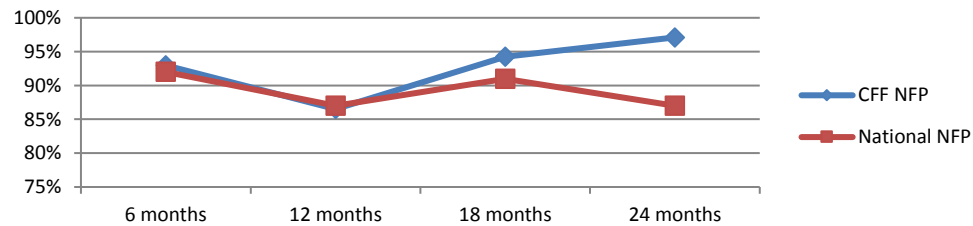


#### Breastfeeding

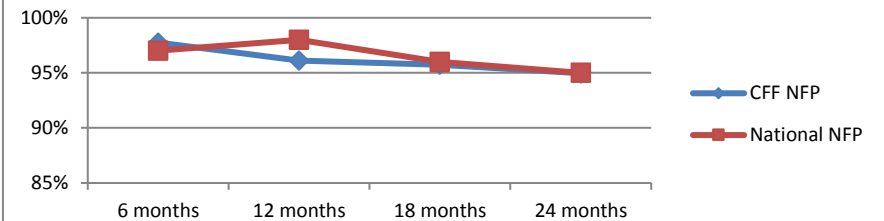


### Child Development (Cumulative: Program Inception through Q2 2018)

#### Cumulative: ASQ within Normal Range

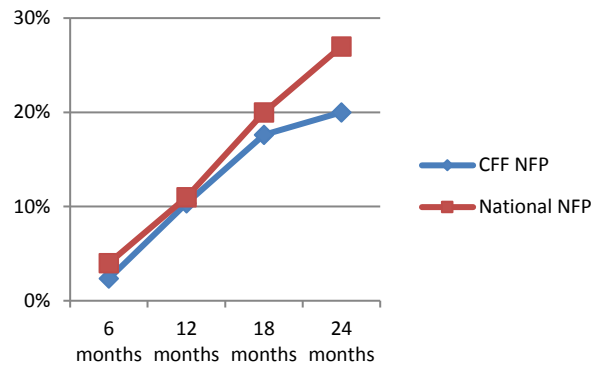


#### Cumulative: ASQ-SE within Normal Range

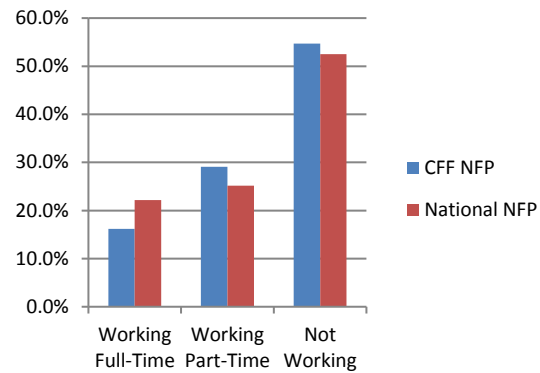


## Maternal Life Course and Program Attrition (Cumulative: Program Inception through Q2 2018)

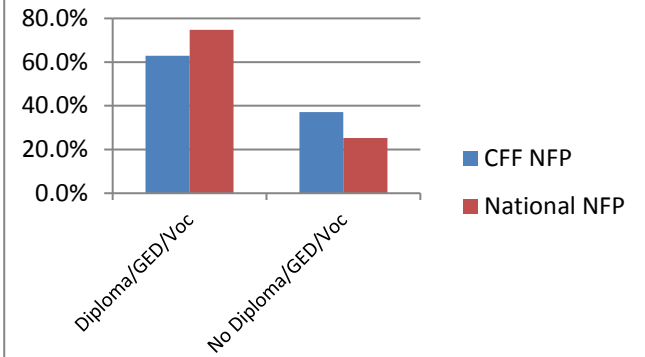
**Cumulative: % of Mothers with Subsequent Pregnancy**



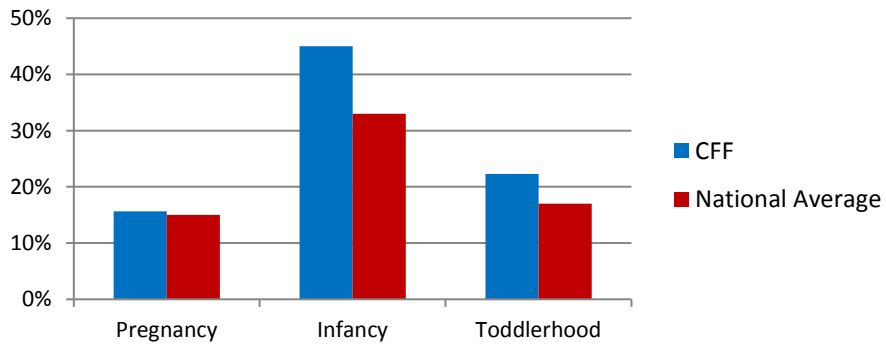
**Point in Time: Current Work Status for Active Clients**



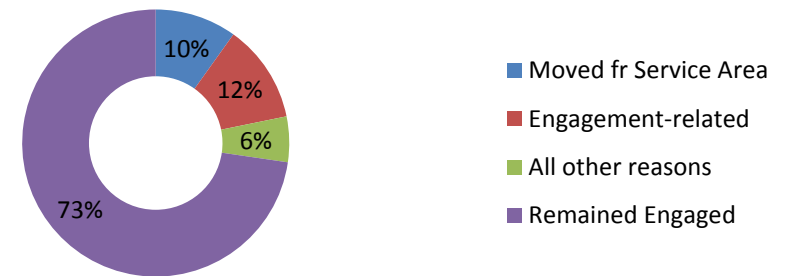
**Current Education for Active Clients: CFF Compared to NFP National**



**Potential Program Completers who Drop Out, by Phase**



**Attrition: All Phases**



Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<p><b>HEALTHY FAMILIES Delaware (HFD)</b> is an evidence-based home visiting program, HFD uses nurses and social workers as home visitors to serve moms who do not meet NFP criteria. HFD works with parents until their child turns three.</p> <p><u><b>Glossary:</b></u>  <b>ASQ</b> = Ages &amp; Stages Question.</p> <p><b>Data Sources:</b>  <b>Reports pulled from ETO</b></p> <ul style="list-style-type: none"> <li>HFA babies Born - Age Weight</li> <li>HFA ASQ</li> <li>HFA Connected Report</li> <li>HFA Monthly Data Form</li> <li>HFA Discharge Summary</li> </ul>	<ul style="list-style-type: none"> <li>Babies are born healthy (e.g. normal weight &amp; gestational age)</li> <li>Toddlers develop age appropriate language and social skills as measured by Ages &amp; Stages Questionnaire (ASQ)</li> <li>Mothers are not pregnant 18 months after birth of baby.</li> <li>Connection to medical home.</li> <li>Clients complete program.</li> <li>Monitor reports of child abuse and neglect</li> </ul> <p><i>*NOTE: According to American College of Obstetrics and Gynecology (ACOG): the following represent the four new definitions of 'term' deliveries:</i></p> <ul style="list-style-type: none"> <li>Early Term: 37wks 0d thru 38wks 6d</li> <li>Full Term: 39wks 0d thru 40wks 6d</li> <li>Late Term: 41wks 0d thru 41wks 6d</li> <li>Post Term: 42wks 0d and beyond</li> </ul> <p>We are focused on reducing pre-term deliveries (before 37 weeks) but have also started tracking full-term deliveries for consistency between HFA and NFP</p>	<p>Of 45 babies born to mothers enrolled in the program prior to delivery, 89% (40/45) had a healthy weight (5.5 lbs. or more) and 84% (38/45) are not pre-term (at least 37 wks. gestation).</p> <p><u>CHILD DEVELOPMENT YTD 2018</u>  <b>ASQ-SE # &amp; % within normal range</b></p> <ul style="list-style-type: none"> <li>12 months – 100%</li> <li>24 months – 100%</li> <li>36 months – 97%</li> <li>OVERALL – 99%</li> </ul> <p><b>ASQ # &amp; % within normal range</b></p> <ul style="list-style-type: none"> <li>4 months – 97%</li> <li>9 months –90%</li> <li>18 months –72%</li> <li>24 months – 74%</li> <li>30 months – 76%</li> <li>36 months – 91%</li> <li>Other – 75%</li> <li>OVERALL – 84%</li> </ul> <p><u>CONNECTION TO MEDICAL CARE</u>  Parents: Of parents who completed a medical home touchpoint in 2018, 63% (35/56) reported having a medical home. Of those, 54% had visited their provider within the last 12 months. 96% of children attended required well-child visits (based on Monthly Data Form results).</p> <p>Children: Based on self-report data, children attend regular well-child visits:</p> <ul style="list-style-type: none"> <li>3 months – 100%</li> <li>6 months – 98%</li> <li>9 months –97%</li> <li>12 months – 94%</li> <li>18 months –90%</li> <li>24 months – 93%</li> <li>30 months – 97%</li> <li>OVERALL – 96%</li> </ul> <p><u>SAFE SLEEP:</u>  Parents are asked if they ever co-sleep with their children. The following</p>	<p>Of 38 babies born (including a set of twins) to mothers enrolled in the program prior to delivery YTD, 87% (33/38) had a healthy weight (5.5 lbs. or more) and 95% (36/38) are not pre-term (at least 37 wks. gestation).</p> <p><u>CHILD DEVELOPMENT YTD 2017</u>  <i>NOTE: Due to changes in the way that this data is being reported and analyzed, comparisons to previous periods cannot be made.</i>  <b>ASQ-SE # &amp; % within normal range</b></p> <ul style="list-style-type: none"> <li>12 months – 100%</li> <li>24 months – 97%</li> <li>36 months – 93%</li> </ul> <p><b>ASQ # &amp; % within normal range</b></p> <ul style="list-style-type: none"> <li>4 months – 90%</li> <li>9 months – 87%</li> <li>18 months –87%</li> <li>24 months – 94%</li> <li>30 months – 91%</li> <li>36 months – 100%</li> </ul> <p><u>MEDICAL HOME</u>  Of parents who completed a medical home touchpoint in 2017, 71% (29/41) reported having a medical home. Of those, 59% had visited their provider within the last 12 months. 96% (125/130) of children had a medical home.</p> <p><u>RETENTION</u>  <i>NOTE: Due to changes in the way that this data is being reported and analyzed, comparisons to previous periods cannot be made.</i>  Of 46 closed YTD, 22 (48%) graduated from the program</p> <p>For 24 that closed but did not graduate, phase at closing was:</p> <ul style="list-style-type: none"> <li>Prenatal – 1 (4%)</li> <li>Infancy – 16 (67%)</li> <li>Toddlerhood – 7 (29%)</li> </ul>	<p>Of 34 babies born (including a set of twins) to mothers enrolled in the program prior to delivery, 74% (25/34) had a healthy weight (5.5 lbs. or more) and 74% (25/34) are not pre-term (at least 37 wks. gestation). Note: Births at 39 wks. or later are considered full-term.* 53% met the definition (18/34).</p> <p><u>CHILD DEVELOPMENT</u>  <b>ASQ-SE # &amp; % within normal range</b></p> <ul style="list-style-type: none"> <li>6 months – 100%</li> <li>12 months – 94%</li> <li>18 months – 95%</li> <li>24 months – 91%</li> <li>36 months – 96%</li> </ul> <p><b>ASQ # &amp; % within normal range</b></p> <ul style="list-style-type: none"> <li>4 months – 100%</li> <li>10 months – 96%</li> <li>16 months – 92%</li> <li>22 months – 88%</li> <li>36 months – 96%</li> </ul> <p><u>RETENTION</u>  Of 178 referrals closed YTD, 69 did not enroll for various reasons, and 56 graduated from the program</p> <p>For 43 that enrolled but did not graduate, phase at closing was (next page bar chart):</p> <ul style="list-style-type: none"> <li>Prenatal – 10 (17%)</li> <li>Infancy – 37 (64%)</li> <li>Toddlerhood – 11 (19%)</li> </ul> <p><b>Top Closing Reasons</b>  Graduation - 56 (31%)  Referral Not Opened, Unable to Locate 24 ( 13%)  Referral Not Opened – Declined Service, 18 (10%)  No Home Visit 90 days, creative outreach, 15 (8%)  Lack of capacity, referred elsewhere, 12 (7%)</p>

percentage of parents report NEVER co-sleeping with their children:

- 3 months – 58%
- 6 months – 67%
- 9 months – 52%
- 12 months – 52%

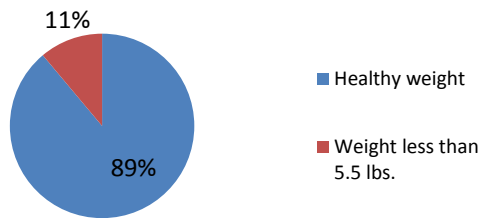
RETENTION Of 76 closed YTD, 35 (46%) graduated from the program

For 41 that closed but did not graduate, phase at closing was:

- Prenatal – 3 (7%)
- Infancy – 27 (66%)
- Toddlerhood – 11 (27%)

## HFD – Infant Health

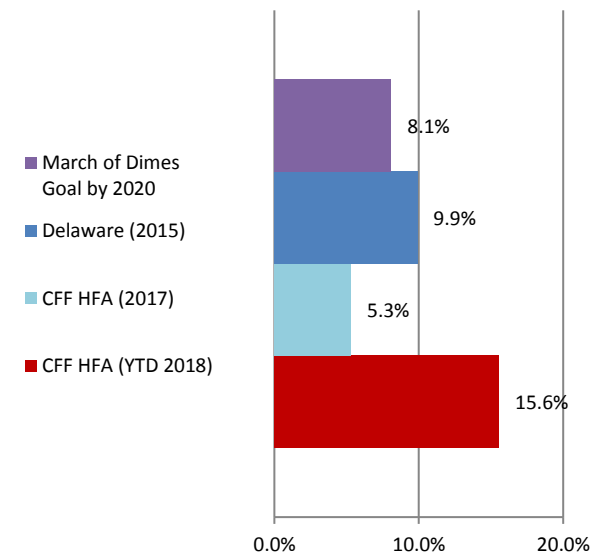
**Birthweight, 2018**



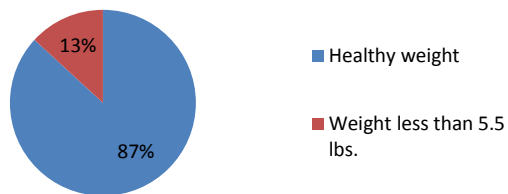
**Gestational Age (37 weeks or more), YTD 2018**



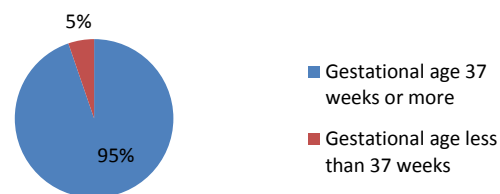
**Pre-Term Births (less than 37 weeks)**



**Birthweight, YTD 2017**

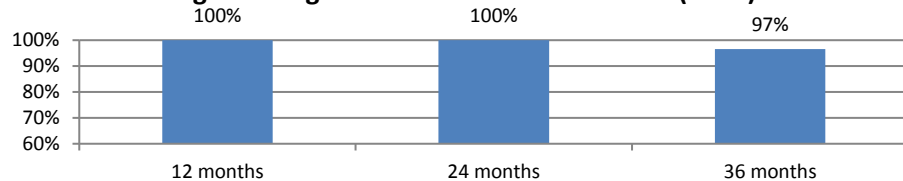


**Gestational Age (37 weeks or more), YTD 2017**

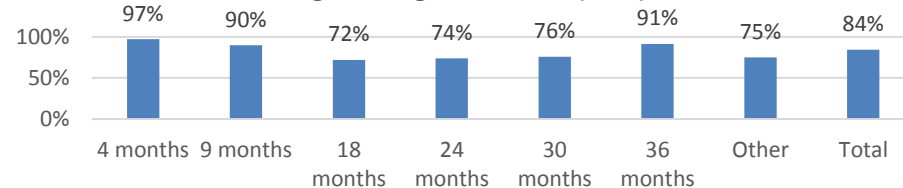


## HFD – Child Development

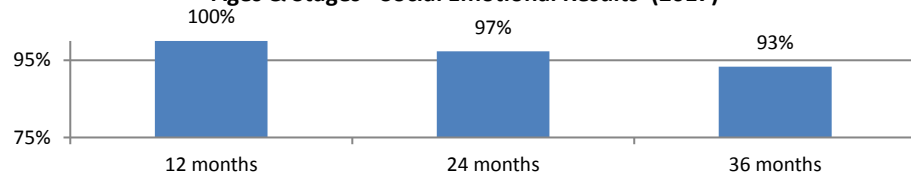
**Ages & Stages - Social Emotional Results (2018)**



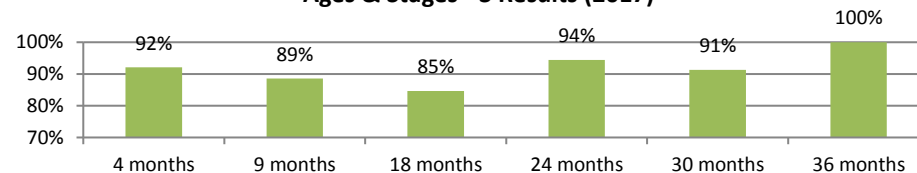
**Ages & Stages - 3 Results (2018)**



**Ages & Stages - Social Emotional Results (2017)**

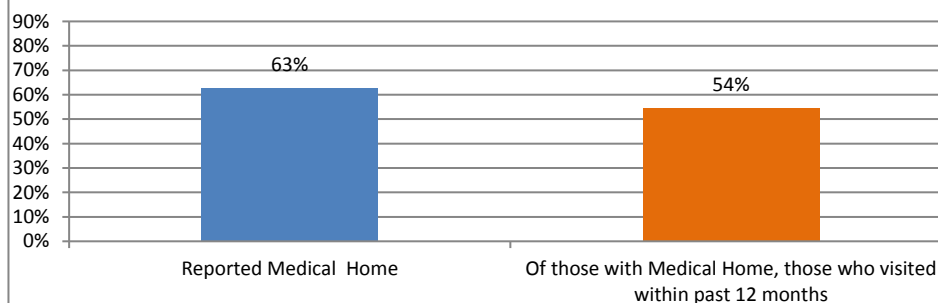


**Ages & Stages - 3 Results (2017)**

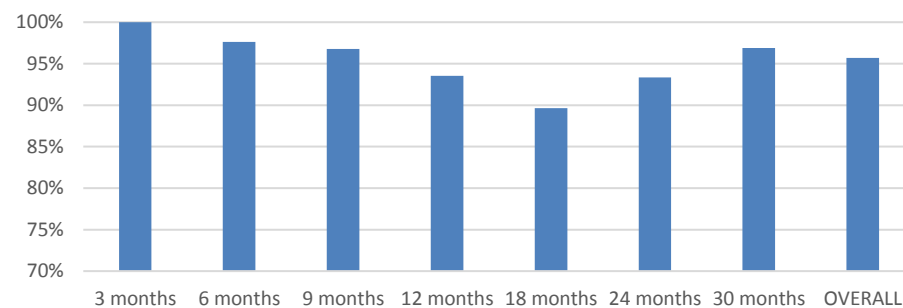


## HFD – Connection to Medical Care

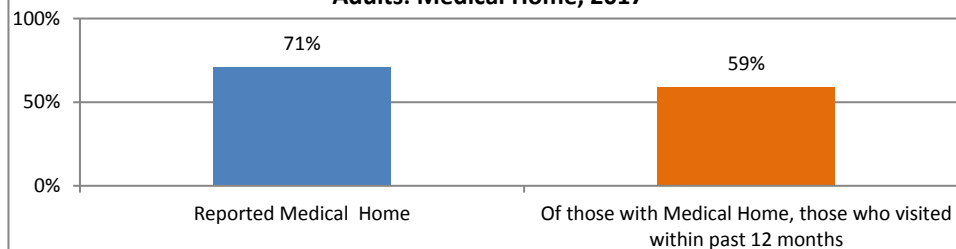
**Adults: Medical Home, 2018**



**% clients who report at least one well-child visit in period**

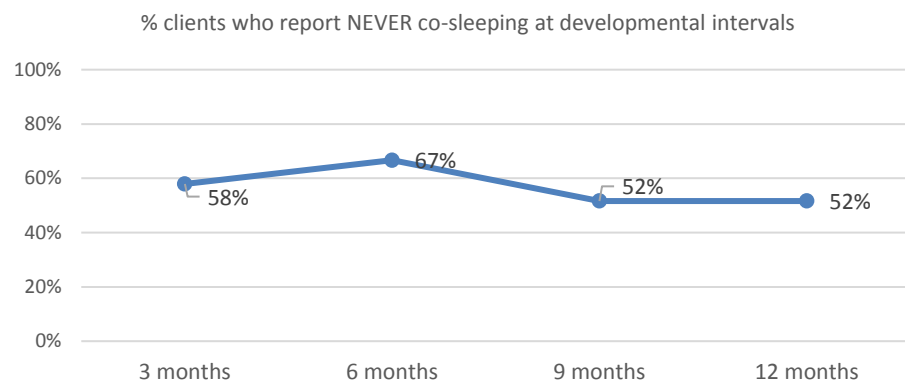


**Adults: Medical Home, 2017**



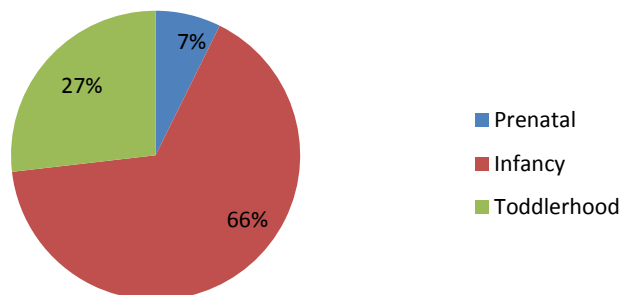


## HFD – Safe Sleep

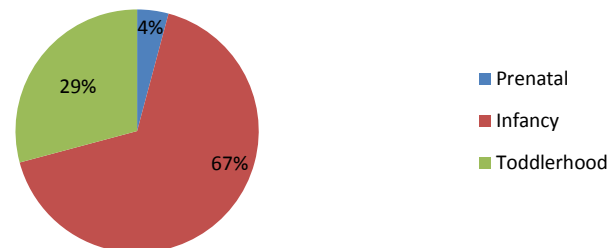


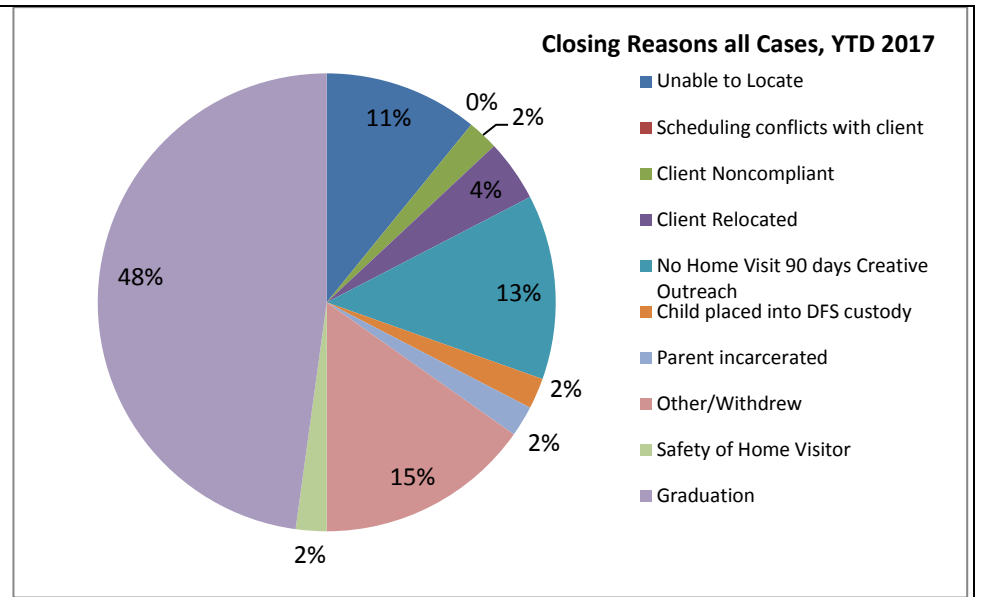
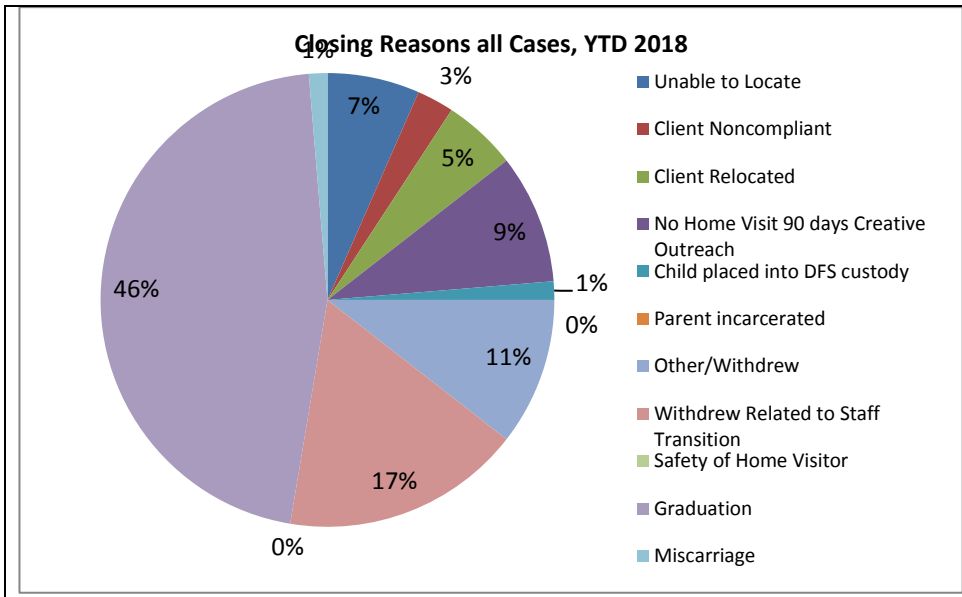
## HFD – Closing

Phase at Closing (excludes lack of capacity and graduations), 2018



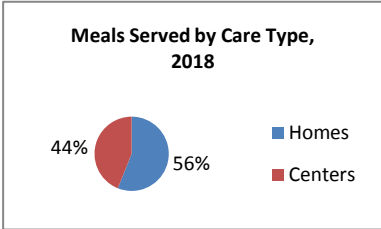
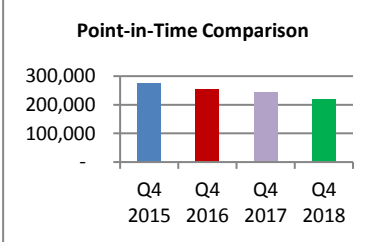
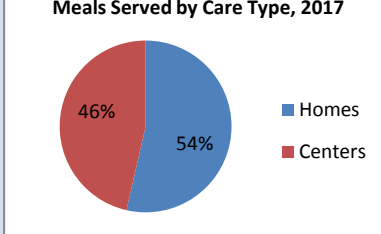
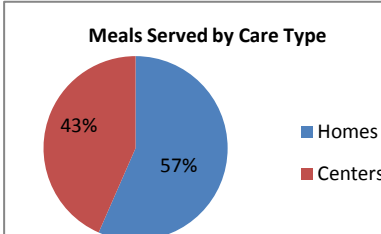
2017 Phase at Closing (excludes cases not opened, lack of capacity, and graduations)

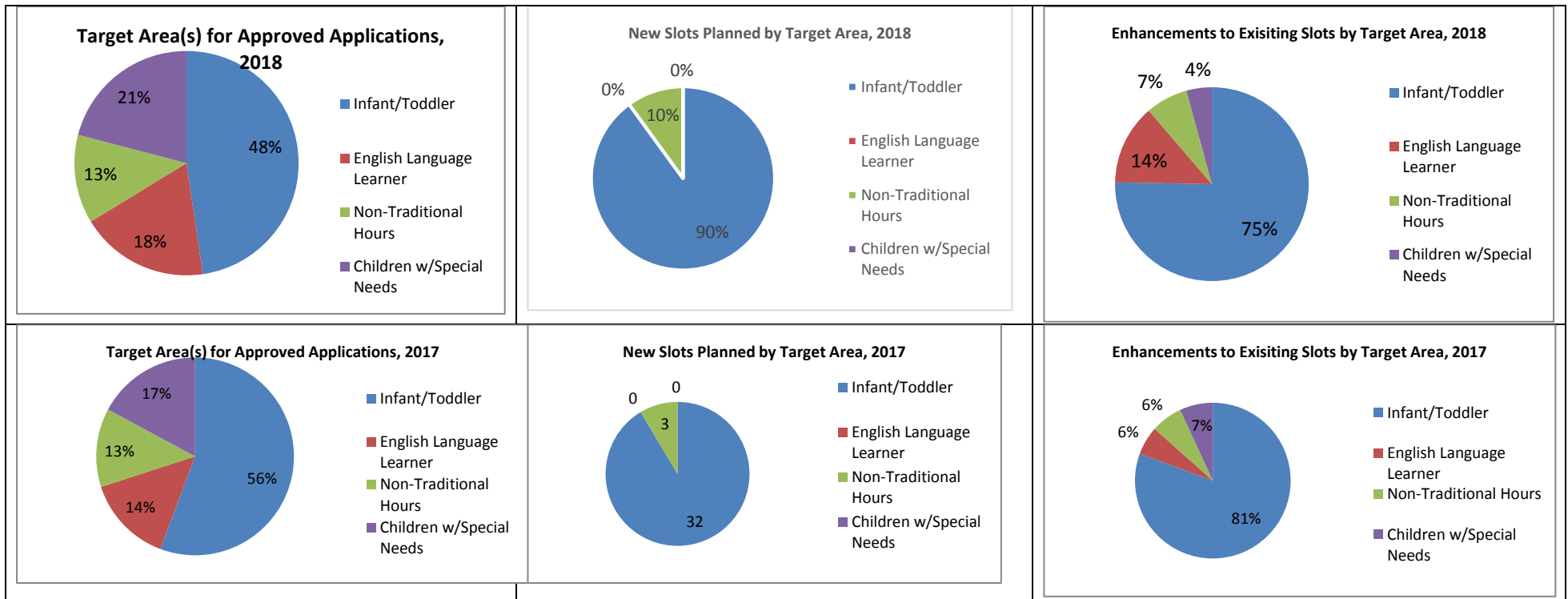




# EARLY CHILDHOOD

Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL																																																												
<p><b>DELAWARE STARS FOR EARLY SUCCESS (Stars)</b> is a quality rating and improvement system that provides technical assistance to child care programs as they engage in quality improvement efforts.</p> <p><b>Glossary:</b> SL = Star Level. Range from “Getting Started” to Star Level 5. Ratings are tied to child care quality.</p> <p><b>Data Sources:</b> DE Stars Quarterly report provided by Program Manager</p>	<p>Child care centers improve their quality as measured by an increase in their star level(s).</p>	<p><b>**NOTE:</b> Due to a “Star Level Movement Freeze” effective July 1st as per the Office of Early Learning, the only SL movement allowed is for programs moving from SL1 to SL2. As of October 1, 2017 an amendment to the “Star Level Movement Freeze” gave programs the option to request a 1-year extension to their Star Level.</p> <p>Total # of programs that moved up at least a Star level: 32; Programs that Maintained: 9; Programs that Went Down SL: 9</p> <div><p><b>Star Level Movement, 2018</b></p><table><thead><tr><th>Star Level</th><th>Count</th></tr></thead><tbody><tr><td>to SL2</td><td>16</td></tr><tr><td>to SL3</td><td>5</td></tr><tr><td>to SL4</td><td>1</td></tr><tr><td>to SL5</td><td>10</td></tr></tbody></table></div> <div><p><b>Assessment/Verification Outcomes, 2018</b></p><table><thead><tr><th>Outcome</th><th>Count</th></tr></thead><tbody><tr><td>maintained SL</td><td>9</td></tr><tr><td>went down SL - expiration</td><td>9</td></tr><tr><td>went down SL - program change</td><td>2</td></tr><tr><td>went down SL - other</td><td>1</td></tr></tbody></table></div>	Star Level	Count	to SL2	16	to SL3	5	to SL4	1	to SL5	10	Outcome	Count	maintained SL	9	went down SL - expiration	9	went down SL - program change	2	went down SL - other	1	<p><b>**NOTE:</b> Due to a “Star Level Movement Freeze” effective July 1<sup>st</sup> as per the Office of Early Learning, the only SL movement allowed is for programs moving from SL1 to SL2. As of October 1, 2017 an amendment to the “Star Level Movement Freeze” gave programs the option to request a 1-year extension to their Star Level.</p> <p>Total # of programs that moved up at least Star level: 23; Programs that Maintained: 28; Programs that Went Down SL: 16</p> <div><p><b>Star Level Movement, 2017</b></p><table><thead><tr><th>Star Level</th><th>Count</th></tr></thead><tbody><tr><td>to SL2</td><td>4</td></tr><tr><td>to SL3</td><td>6</td></tr><tr><td>to SL4</td><td>13</td></tr><tr><td>to SL5</td><td>0</td></tr></tbody></table></div> <div><p><b>Assessment/Verification Outcomes, 2017</b></p><table><thead><tr><th>Outcome</th><th>Count</th></tr></thead><tbody><tr><td>maintained SL</td><td>28</td></tr><tr><td>went down SL - expiration</td><td>9</td></tr><tr><td>went down SL - program change</td><td>6</td></tr><tr><td>went down SL - other</td><td>1</td></tr></tbody></table></div>	Star Level	Count	to SL2	4	to SL3	6	to SL4	13	to SL5	0	Outcome	Count	maintained SL	28	went down SL - expiration	9	went down SL - program change	6	went down SL - other	1	<p>Total # of programs that moved up at least Star level: 69</p> <p>18 moved from “Getting Started” to SL 15 moved to SL3 8 moved to SL4 28 moved to SL5 6 maintained SL upon assessment 2 went down a SL upon assessment</p> <div><p><b>Star Level Movement, 2016</b></p><table><thead><tr><th>Star Level</th><th>Count</th></tr></thead><tbody><tr><td>to SL2</td><td>18</td></tr><tr><td>to SL3</td><td>15</td></tr><tr><td>to SL4</td><td>8</td></tr><tr><td>to SL5</td><td>28</td></tr></tbody></table></div> <div><p><b>Star Level Movement, 2016</b></p><table><thead><tr><th>Star Level</th><th>Count</th></tr></thead><tbody><tr><td>to SL2</td><td>18</td></tr><tr><td>to SL3</td><td>15</td></tr><tr><td>to SL4</td><td>8</td></tr><tr><td>to SL5</td><td>28</td></tr></tbody></table></div>	Star Level	Count	to SL2	18	to SL3	15	to SL4	8	to SL5	28	Star Level	Count	to SL2	18	to SL3	15	to SL4	8	to SL5	28
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Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>CHILD &amp; ADULT CARE FOOD PROGRAM (CACFP)</b> reimburses child care providers that serve meals that follow the guidelines from the U.S. Department of Agriculture (USDA). Our food monitors provide training for participating providers and visit each site three times per year.  <b>Data Sources:</b> Quarterly Meals report provided by Program Manager	Childcare programs that serve children meals meeting USDA requirements receive reimbursement	928,295 meals subsidized; 56% at family child care homes, 44% at child care centers.    	1,046,265 meals subsidized; 54% at family child care homes, 46% at child care centers.  	1,124,859 meals subsidized; 57% at family child care homes, 43% at child care centers.  
<b>CAPACITY PROGRAM</b> provides technical assistance and limited funding to child care providers to expand or create services that are in limited supply in one or all of the following areas: <ul style="list-style-type: none"> <li>• children with disabilities,</li> <li>• children who need care during non-traditional hours,</li> <li>• children who are English language learners and</li> <li>• infants and toddlers.</li> </ul> <b>Data Sources:</b> Capacity Quarterly report provided by Program Manager	Eligible early care programs receive funding and supports to expand or create services in limited supply	Enrolled 42 programs  <u>Target Areas for Approved Applications, 2018*</u> Infant/Toddler: 41 English Language Learner: 16 Non-Traditional Hours: 11 Children w/Special Needs: 18  <u>Enhancements to Existing Slots impact:</u> Infant/Toddler: 780 English Language Learner: 139 Non-Traditional Hrs.: 73 Special Needs: 44  <i>*some programs applied for more than one target area, so numbers cannot be totaled</i>	Enrolled 48 programs  <u>Target Areas for Approved Applications, 2017*</u> Infant/Toddler: 39 English Language Learner: 10 Non-Traditional Hours: 9 Children w/Special Needs: 12  <u>Enhancements to Existing Slots impact:</u> Infant/Toddler: 690 English Language Learner: 51 Non-Traditional Hrs.: 56 Special Needs: 59  <i>*some programs applied for more than one target area, so numbers cannot be totaled</i>	Enrolled 51 programs  <u>Applications Approved by Target Area*</u> Infant/Toddler: 38 English Language Learner: 10 Non-Traditional Hours: 9 Children w/Special Needs: 14  <u>New Slots Planned:</u> Infant/Toddler: 44  <u>Enhancements to Existing Slots impact:</u> Infant/Toddler: 709 English Language Learner: 142 Non-Traditional Hrs.: 56 Special Needs: 55  <i>*some programs applied for more than one target area, so numbers cannot be totaled</i>
See charts on following page				
Capacity Program				



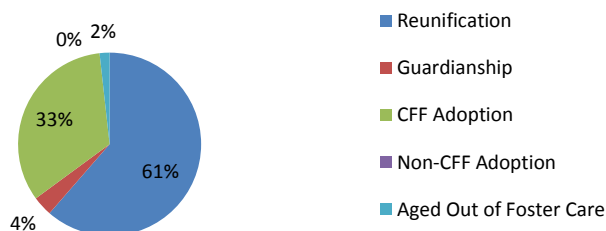
# POSITIVE PARENTING

Program	2018 Outcome Measures	2018 YTD	2017 YTD	2016 FINAL																																															
<b>RESOURCE FAMILY RECRUITMENT:</b> Families are recruited, prepared, selected and supported to facilitate children joining foster or adoptive families successfully.	Families are recruited and trained to become foster and/or adoptive resources.	<ul style="list-style-type: none"><li>• 305 Resource Parent inquiries; 72 applications; 32 completed PRIDE; 20 families approved.</li><li>• 12 second parent adoption cases; 7 finalizations</li><li>• 4 guardianship cases, 21 finalization</li></ul>	<ul style="list-style-type: none"><li>• 256 Resource Parent inquiries; 72 applications; 41 completed PRIDE; 21 families approved.</li><li>• 7 second parent adoption cases</li><li>• 0 guardianship cases</li></ul>	<ul style="list-style-type: none"><li>• 135 Resource Parent inquiries; 49 applications; 28 completed PRIDE; 25 families approved.</li><li>• 15 second parent adoption cases</li><li>• 2 guardianship cases</li></ul>																																															
Data Source: Workbooks provided by FCA Program Manager		<div><p><b>Resource Home Recruitment, 2018</b></p><table><thead><tr><th>Category</th><th>Value</th></tr></thead><tbody><tr><td>Inquiries</td><td>305</td></tr><tr><td>Application Complete</td><td>53</td></tr><tr><td>Completed Pride</td><td>32</td></tr><tr><td>Assessment Approved</td><td>20</td></tr></tbody></table></div>	Category	Value	Inquiries	305	Application Complete	53	Completed Pride	32	Assessment Approved	20	<div><p><b>Resource Home Recruitment, 2017</b></p><table><thead><tr><th>Category</th><th>Value</th></tr></thead><tbody><tr><td>Inquiries</td><td>256</td></tr><tr><td>Application Complete</td><td>72</td></tr><tr><td>Completed Pride</td><td>41</td></tr><tr><td>Assessment Approved</td><td>21</td></tr></tbody></table></div> <div><p><b>Resource Home Recruitment &amp; Approval, 2017 &amp; 2016</b></p><table><thead><tr><th>Category</th><th>2017</th><th>2016</th></tr></thead><tbody><tr><td>Inquiries</td><td>256</td><td>135</td></tr><tr><td>Application Complete</td><td>72</td><td>84</td></tr><tr><td>Completed Pride</td><td>41</td><td>49</td></tr><tr><td>Assessment Approved</td><td>21</td><td>28</td></tr></tbody></table></div>	Category	Value	Inquiries	256	Application Complete	72	Completed Pride	41	Assessment Approved	21	Category	2017	2016	Inquiries	256	135	Application Complete	72	84	Completed Pride	41	49	Assessment Approved	21	28	<div><p><b>Resource Home Recruitment 2016</b></p><table><thead><tr><th>Category</th><th>Value</th></tr></thead><tbody><tr><td>Inquiries</td><td>135</td></tr><tr><td>Attended Meeting</td><td>84</td></tr><tr><td>Application Complete</td><td>49</td></tr><tr><td>Completed Pride</td><td>28</td></tr><tr><td>Assessment Approved</td><td>25</td></tr></tbody></table></div>	Category	Value	Inquiries	135	Attended Meeting	84	Application Complete	49	Completed Pride	28	Assessment Approved	25
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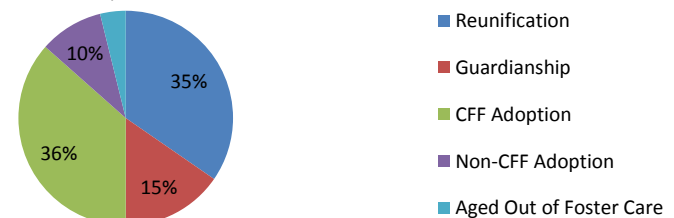
<p><b>FOSTER CARE (Regular)</b> is provided to children and teens who cannot remain at home. The youth is monitored by a team including a social worker and resource parent.</p> <p><b>SHELTER CARE (Foster Care)</b> provides short-term emergency families for youth in foster care.</p>	<p>Children will:</p> <ul style="list-style-type: none"> <li>• remain with one CFF family.</li> <li>• be served by CFF in the event that separation is necessary.</li> <li>• attend school</li> </ul> <p>No substantiated abuse by resource parents.</p> <p><u>Shelter Care</u> Children will:</p> <ul style="list-style-type: none"> <li>• remain with one family.</li> <li>• join other CFF families if move is required during shelter placement.</li> <li>• attend school.</li> <li>• Positive family involvement.</li> </ul> <p>No substantiated abuse.</p>	<p><b>Foster Care</b></p> <ul style="list-style-type: none"> <li>• 92% (106/118) children in foster care remained with one CFF family.</li> <li>• 42% (5/12) of children who separated from a CFF resource family joined another one within CFF.</li> <li>• 2 founded abuse (5 allegations)</li> <li>• 96% of school days attended</li> </ul> <p><u>Discharges from CFF Foster Care</u> 74 children discharged</p> <ul style="list-style-type: none"> <li>• 35 to Reunification</li> <li>• 2 to Guardianship</li> <li>• 19 to CFF adoption</li> <li>• 0 to non-CFF adoption</li> <li>• 15 to non-CFF placement</li> <li>• 1 aged out</li> <li>• 0 discharged on AWOL status</li> <li>• 2 discharged to other positive living situation</li> </ul> <p>Of those discharged from foster care, 99% achieved permanency (73/74).</p> <p><u>Shelter Care</u></p> <ul style="list-style-type: none"> <li>• 100% (8/8) remained with one family</li> <li>• 80% school days attended (169/216)</li> </ul> <p>1 allegation of abuse/neglect (unsubstantiated)</p>	<ul style="list-style-type: none"> <li>• 87% children in foster care in each quarter remained with one CFF family.</li> <li>• 58% (18/31) of children who separated from a CFF resource family joined another one within CFF.</li> <li>• 3 founded abuse (10 allegations)</li> <li>• 95% of school days attended</li> </ul> <p><u>Discharges from CFF Foster Care</u> 76 children discharged</p> <ul style="list-style-type: none"> <li>• 18 to Reunification</li> <li>• 8 to Guardianship</li> <li>• 19 to CFF adoption</li> <li>• 5 to non-CFF adoption</li> <li>• 24 to non-CFF placement</li> <li>• 1 aged out</li> <li>• 1 discharged on AWOL status</li> </ul> <p>Of those discharged from foster care, 96% achieved permanency.</p> <p><u>Shelter Care:</u></p> <ul style="list-style-type: none"> <li>• 60% (3/5) remained with one family</li> <li>• 99% school days attended (86/87)</li> </ul> <p>1 allegation of abuse/neglect (unsubstantiated)</p>	<ul style="list-style-type: none"> <li>• 92% children in foster care each quarter remained with one CFF family.</li> <li>• 79% (19/24) of children who separated from a CFF resource family, joined another one within CFF.</li> <li>• 2 founded abuse (12 allegations)</li> <li>• 95% of school days (4,979) attended</li> </ul> <p><u>Discharges from CFF Foster Care</u> 83 children discharged</p> <ul style="list-style-type: none"> <li>• 19 to Reunification</li> <li>• 6 to Guardianship</li> <li>• 23 to CFF adoption</li> <li>• 2 to non-CFF adoption</li> <li>• 20 to non-CFF placement (including 3 to YRS)</li> <li>• 5 aged out</li> <li>• 4 discharged on AWOL status</li> </ul> <p><u>Shelter Care</u></p> <ul style="list-style-type: none"> <li>• 100% (12/12) remained with one family</li> <li>• 85% school days attended (170/200)</li> </ul> <p>1 allegation of abuse/neglect (unsubstantiated)</p>
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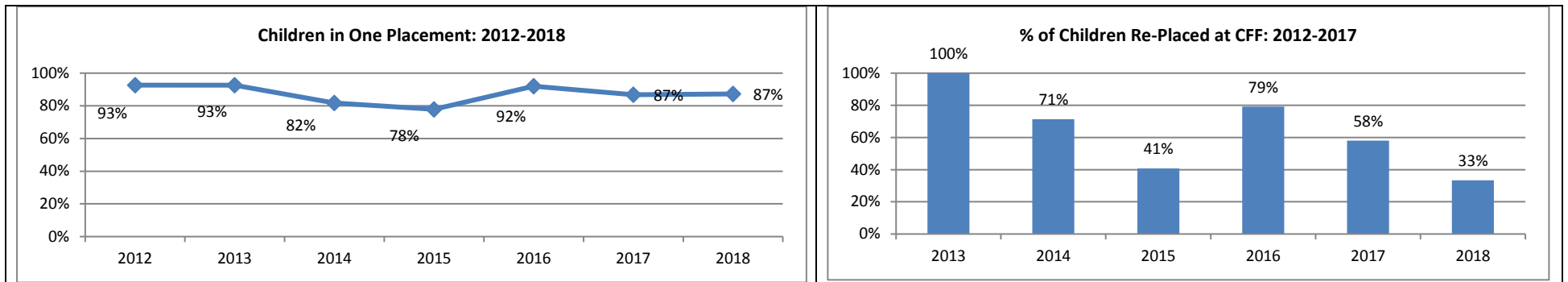
#### Foster Care – Placement & Discharge

Discharge From Foster Care, 2018



Discharge From Foster Care, 2017





<b>Foster Care: FAMILY SEARCH &amp; ENGAGEMENT (FSE)</b> works with youth in foster care ages 10 to 17 who are at-risk of aging out of foster care, to connect them to family members or other caring adults, in order to find permanent families or for transition support	#/% of youth successful connected to supports  Status at discharge (benchmark)	100% (23/23) youth served have connections. 17 new connections made this year.	100% (7/7) youth have connections. <ul style="list-style-type: none"> <li>Q1: served 5 youth (0 new); made 4 new connections</li> <li>Q2: served 6 youth (1 new); made 6 new connections</li> <li>Q3: served 6 youth (1 new); made 6 new connections</li> <li>Q4: served 4 youth; made 4 new connections</li> </ul>	86% (12/14) youth have connections. 30 new connections made for 12 youth. <ul style="list-style-type: none"> <li>Q1: served 7 youth (1 new); made 5 new connections (1 youth had none before)</li> <li>Q2: served 10 youth (2 new); made 10 new connections</li> <li>Q3: served 8 youth (2 new); made 8 new connections (2 youth who had none before)</li> <li>Q4: served 7 youth (1 new); made 7 new connections (1 youth had none before)</li> </ul>
<b>Foster Care: Child Specific Recruitment (CSR)</b> works to identify adoptive resources for targeted children in foster care.	#/% of youth matched with adoptive resource	Served 32 youth. Eight youth were discharged in the reporting period had an adoptive resource identified. Of 8 youth for whom a resource was identified: <ul style="list-style-type: none"> <li>2 identified within 6 months of enrollment in the service</li> <li>2 identified within 12 months of enrollment in the service</li> <li>4 identified more than 12 months after enrollment</li> </ul>	Served 40 youth. A potential adoptive resource has been identified for 58% youth (23/40). Of 23 youth for whom a resource was identified: <ul style="list-style-type: none"> <li>18 identified within 6 months of enrollment</li> <li>5 identified 7-12 months after enrollment</li> </ul>	Served 37 youth in 2016. A potential adoptive resource has been identified for 54% youth (20/37). Of 20 youth for whom a resource was identified: <ul style="list-style-type: none"> <li>6 identified within 6 months of enrollment</li> <li>11 identified 7-12 months after enrollment,</li> <li>3 identified more than 12 months after enrollment</li> </ul>

Length of Time to Make Connections, 2018

Time Period	Percentage
0-6 months	25%
7-12 months	25%
more than 12 months	50%

Length of Time to Make Connections, 2017 YTD

Time Period	Percentage
0-6 months	72%
7-12 months	28%
12 months or more	0%

Length of Time to Make Connections

Time Period	Percentage
0-6 months	30%
7-12 months	55%
More than 12 months	15%



**Foster Care:**

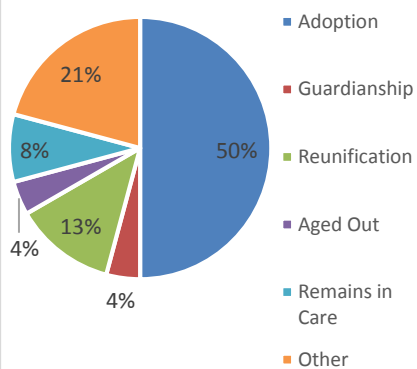
**My Life** helps children in foster care prepare for adoption or other permanent placement

# of children served  
# children successfully completing service

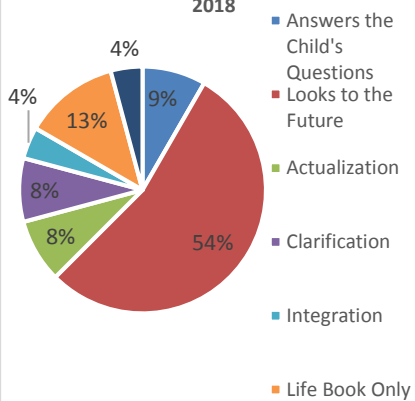
Served 55 youth in 2018. Seventeen (17) youth who engaged with services were discharged during the reporting period, with discharge reasons described below:

- Adoption: 7 (64%)
- Guardianship: 1 (9%)
- Reunification: 2 (18%)
- Aged Out: 1 (9%)

**Placement Status at Discharge from My Life, 2018**



**Stage at Discharge from MyLife, 2018**



Served 46 youth YTD. Closed 34 cases.

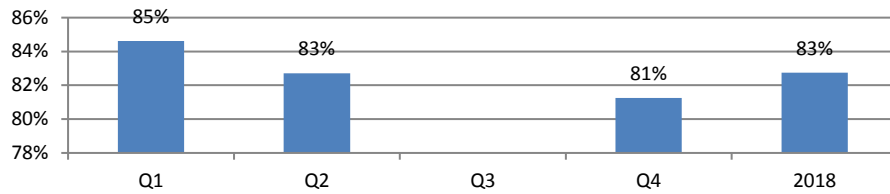
Served 70 youth in 2016. Closed 8 cases.

Program	2018 Outcome Measures	2018 YTD	2017 YTD	2016 FINAL
<p><b>ADOPTION: SPECIAL NEEDS</b> provides a permanent family for older youth, siblings, or children with special emotional, developmental or medical needs whose parents have had their rights terminated.</p> <p><b>POST ADOPTION SUPPORTS (PAS)</b> medical/background information, and search assistance for those adopted through CFF.</p> <p>Data Source: Workbooks provided by FCA Program Manager</p>	<p>Children remain with one adoptive family.</p> <p>Adoptions are finalized in 12 mos.</p> <p>Adoptions are finalized within 24 months of a child's entrance into foster care</p> <p>No substantiated reports of abuse by adoptive parents during adoption supervision.</p> <p><u>Post-Adoption</u> # of inquiries for medical history or background, # responded to 2 weeks</p> <p># of requests for search, # completed, # successful, # reunions facilitated.</p>	<ul style="list-style-type: none"> <li>100% (19/19) children remained with one adoptive family.</li> <li>100% (21/21) adoptions were finalized within 12 mos. of child joining a family.</li> <li>95% (20/21) of adoptions were finalized within 24 mo. of child's entry in FC</li> <li>0 substantiated abuse reports, 0 allegations</li> </ul> <p><u>Post-Adoption</u></p> <ul style="list-style-type: none"> <li>There were 30 requests for any type of information, 100% of which were fulfilled within 2 weeks.</li> <li>There were 6 requests for search information: resulting in 3 relative located. 2 reunions were facilitated.</li> </ul>	<ul style="list-style-type: none"> <li>95% (19/20) children remained with one adoptive family.</li> <li>100% (17/17) adoptions were finalized within 12 mos. of child joining a family.</li> <li>76% (13/17) of adoptions were finalized within 24 mo. of child's entry in FC</li> <li>0 substantiated abuse reports, 0 allegations</li> </ul> <p><u>Post-Adoption</u></p> <ul style="list-style-type: none"> <li>There were 44 requests for medical information, all of which were fulfilled within 2 weeks. There were 3 requests for background info which were fulfilled within 2 weeks.</li> </ul> <p>There were 6 agency requests for search information: resulting in 8 relatives located and 7 reunions facilitated.</p>	<ul style="list-style-type: none"> <li>96% (26/27) of children remained with one adoptive family.</li> <li>100% (16/16) finalized in 12 mos. of child joining a family.</li> <li>73% (16/22) finalized in 24 mo. of entry in FC</li> <li>0 substantiated abuse reports, 0 allegations</li> </ul> <p><u>Post-Adoption</u></p> <p>There were 2 inquiries for medical. They were both fulfilled within 2 weeks. There were no inquiries for background searches</p> <p>There were 5 agency requests for search information: resulting in 5 relatives located and reunions facilitated; 9 non-agency requests for verification.</p>

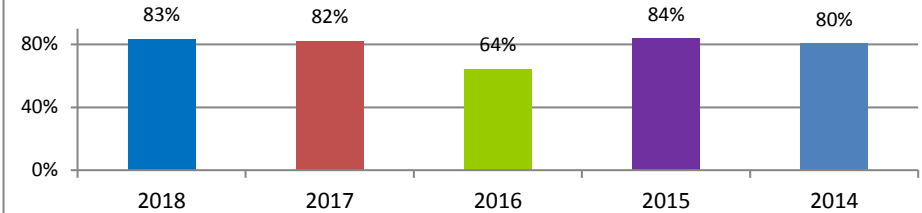
Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<p><b>STRENGTHENING FAMILIES PROGRAM (SFP)</b> is a research-based model family skills training and education program for parents and their children. Groups meet once a week for 14 weeks for those with children ages 4-5, 6-11 and 12-17.</p> <p><u>Glossary:</u>  <b>SFP Retrospective Assessment</b> was designed by the model developers to measuring changes in parenting beliefs as a result of participation in the program  <b>AAPI-2</b> is an inventory designed to assess the parenting and child rearing attitudes parent populations.</p>	<p>Parents will attend and successfully complete the series.</p> <p>Parents use effective child behavior management skills as measured by a retrospective pre/post test designed by the program developers.</p> <p>Parents will change attitudes about parenting and child behavior that place children at risk as measured by pre/post AAPI-2 survey</p>	<p><b>NOTE: No Groups ended in Q3 2018.</b></p> <ul style="list-style-type: none"> <li>83% (139/168) of parents who enrolled in a series were engaged (attending 4 or more sessions)</li> <li>Of parents who engaged, 83% (111/139) successfully completed the series (<b>including those who earned an Educational Certificate because their children were not present</b>).</li> <li>77% of families taking AAPI (99/128) demonstrated reduced risk for negative parenting behaviors on two or more domains.</li> <li>97% (110/113) of parents taking a retrospective assessment demonstrated improved parenting knowledge based on increased overall assessment scores.</li> <li>65% of families taking retrospective tests (72/111) reported improvement in family relationships as measured by bonding.</li> <li>72% (80/111) of parents reported an improvement in family communication as measured by retrospective assessment.</li> <li>91% (101/111) of parents self-report improved positive discipline as measured by retrospective assessment.</li> <li>68% (39/57) of families who identified a risk around belief in corporal punishment reported reduced belief as measured by AAPI.</li> <li>51% of Parents who were medium to high risk on Empathy (52/101) reported increased Empathy as measured by AAPI Empathy Construct.</li> </ul>	<ul style="list-style-type: none"> <li>82% (161/196) of parents who enrolled in a series were engaged (attending 4 or more sessions)</li> <li>Of parents who engaged, 90% (145/161) completed the program as measured by attending at least 10 of 14 sessions. 88% (142/161) met CFF's definition for Successful Completion as demonstrated by attendance, home practice, and class participation.</li> <li>77% of families taking AAPI (108/141) demonstrated reduced risk for negative parenting behaviors on two or more domains.</li> <li><b>87% (93/107) of parents taking a retrospective assessment demonstrated improved parenting knowledge based on increased overall assessment scores.</b></li> <li>65% of families taking retrospective tests (70/107) reported improvement in family relationships as measured by bonding.</li> <li>83% (47/72) of parents in SFP 4-16 reported an improvement in family communication as measured by retrospective assessment.</li> <li><b>86% (62/72) of parents in SFP 4-16 self-report improved positive discipline as measured by retrospective assessment.</b></li> <li>76% (25/33) of families who identified a risk around belief in corporal punishment reported reduced belief as measured by AAPI.</li> <li>63% of Parents who were medium to high risk on Empathy (79/126) reported increased Empathy as measured by AAPI Empathy Construct.</li> </ul>	<ul style="list-style-type: none"> <li>64% (255/397) of parents who enrolled in a series were engaged (attending 4 or more sessions)</li> <li>Of parents who engaged, 84% (215/255) completed the program as measured by attending at least 10 of 14 sessions. 80% (203/255) met CFF's definition for Successful Completion as demonstrated by attendance, home practice, and class participation.</li> <li>78% of families taking retrospective tests (111/143) reported improvement in family relationships as measured by bonding.</li> <li>74% of families taking AAPI (145/195) demonstrated reduced risk for negative parenting behaviors on two or more domains.</li> <li>81% (61/75) of parents in SFP 4-16 reported an improvement in family communication as measured by retrospective assessment.</li> <li>83% (40/48) of families who identified a risk around belief in corporal punishment reported reduced belief as measured by AAPI.</li> <li>58% of Parents who were medium to high risk on Empathy (103/177) reported increased Empathy as measured by AAPI Empathy Construct</li> </ul>

## SFP – Engagement

Engagement Rate 2018

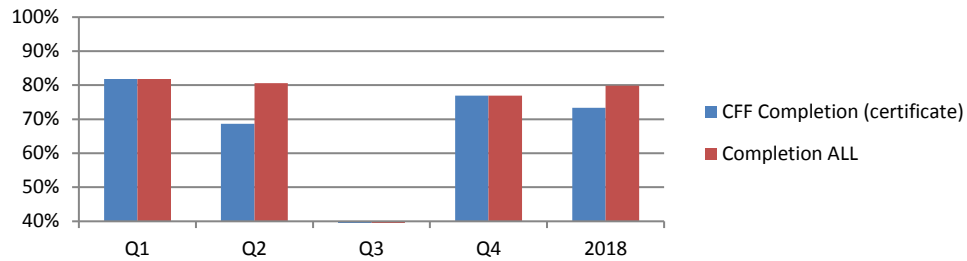


Engagement Rates: 2014-2018

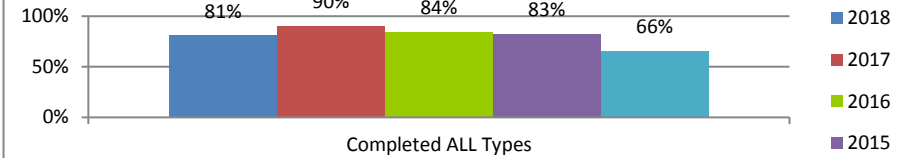


## SFP – Parent Completion

SFP Completion Rates, 2018

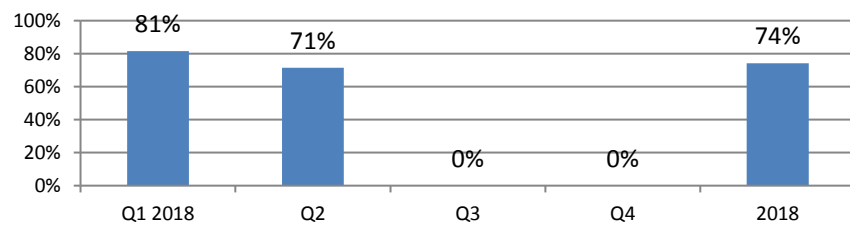


Completion Rates: 2014-2018

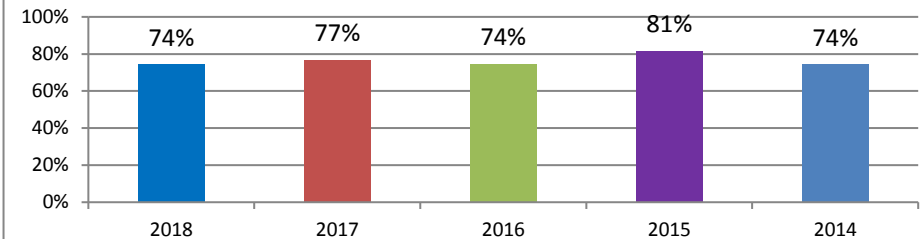


## SFP – Improved Knowledge & Skills

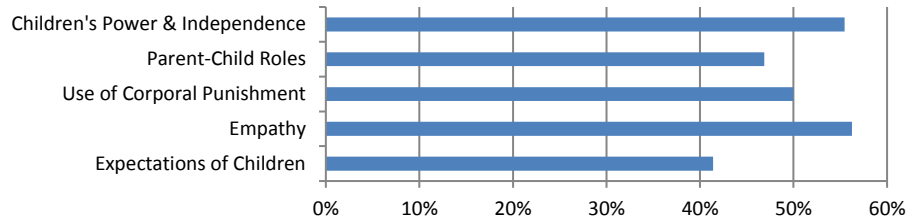
% w/ increased parenting knowledge/skills as measured by AAPI



% demonstrating increased knowledge/skills as measured by AAPI

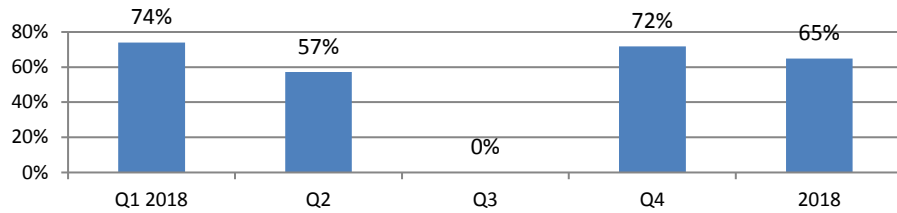


**% of Parents Who Improve on AAPI Domains, 2018**

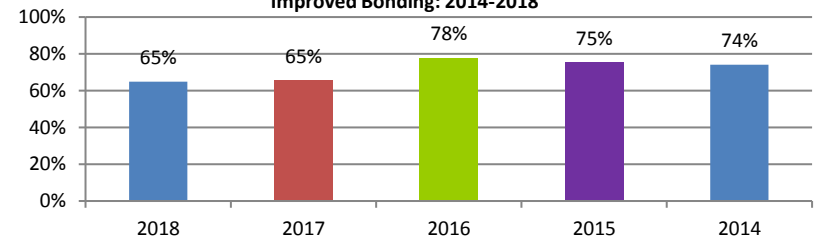


## SFP – Improved Bonding

**% of parents with improved relationship (bonding) as**

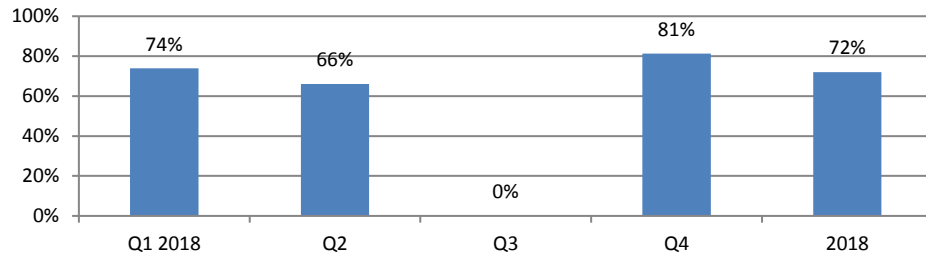


**Improved Bonding: 2014-2018**

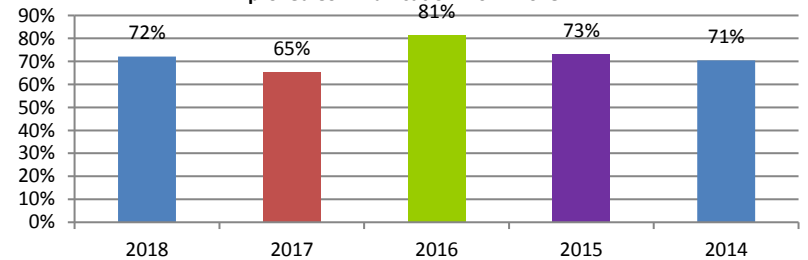


## SFP – Improved Communication

**% of parents with improved communication , 2018**

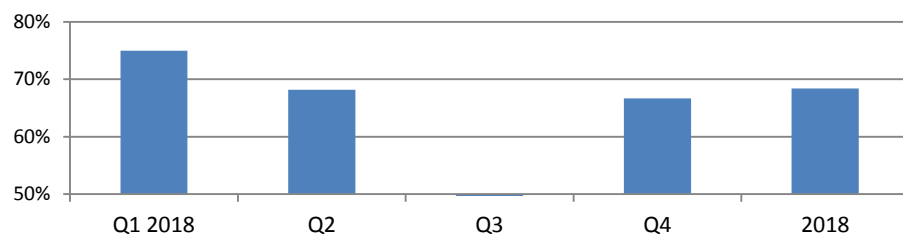


**Improved Communication: 2014-2018**

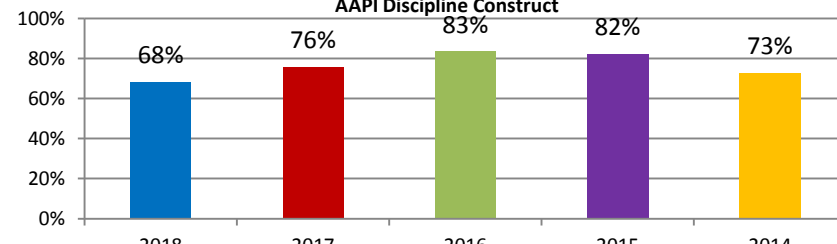


## SFP – Reduced Risk of Corporal Punishment

Decreased Risk of Corporal Punishment

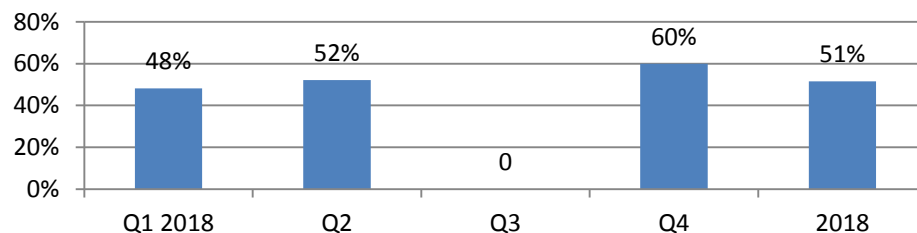


Parents report decreased belief in use of corporal punishment as measured by AAPI Discipline Construct

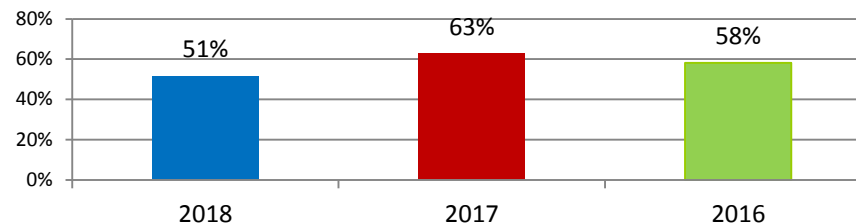


## SFP – Increased Empathy

Parents Increase Empathy as measured by AAPI Empathy Construct



Parents Increase Empathy as measured by AAPI Empathy Construct



Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>Nurturing Parenting</b> provides parenting skills training to caregivers of children ages birth to as an alternative to abusive and neglecting parenting and child-rearing practices. Groups meet once a week for 14 weeks.  <b>Glossary:</b> <b>AAPI-2</b> is an inventory designed to assess the parenting and child rearing attitudes parent populations.	Parents will attend and successfully complete the series.  Parents will change attitudes about parenting and child behavior that place children at risk as measured by pre/post AAPI-2 survey  Parents who successfully complete the series will improve their resiliency.	<b>NOTE: No Groups ended in Q3 2018.</b>  <ul style="list-style-type: none"> <li>85% (63/74) of parents who enrolled in a series were engaged (attending 4 or more sessions)</li> <li>Of parents who engaged, 70% (44/63) successfully completed the series (including those who earned an Educational Certificate because their children were not present).</li> <li>86% of families taking AAPI (42/49) demonstrated reduced risk for negative parenting behaviors on two or more domains.</li> <li>82% (14/17) of families who identified a risk around belief in corporal</li> </ul>		

punishment reported reduced belief as measured by AAPI.

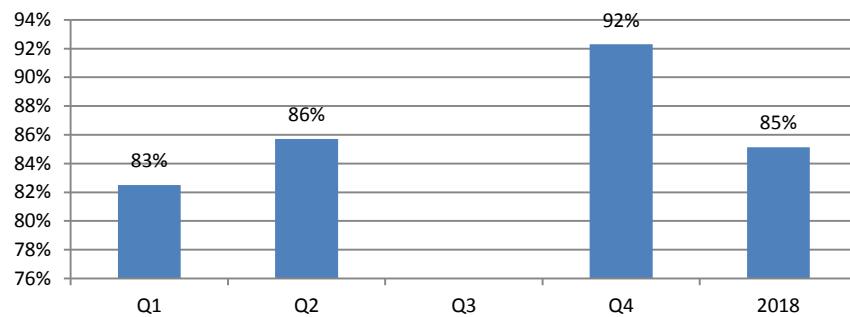
- 71% of Parents who were medium to high risk on Empathy (27/38) reported increased Empathy as measured by AAPI Empathy Construct.

Parents who successfully completed improved their resiliency as measured by the Devereux:

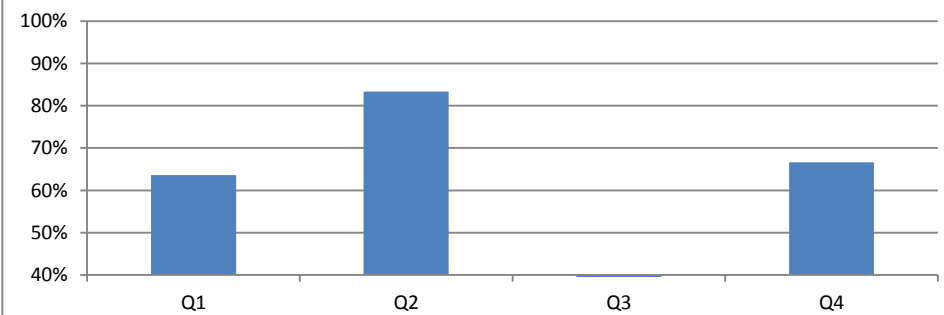
- 70% of parents' scores increased from pre- to post-assessment (23/33)
- At pre-assessment, 76% (25/33) of parents reported having Resiliency in Place. At post-assessment, 94% (31/33) had Resiliency in Place.

#### Nurturing Parent: Engagement & Completion

NP Engagement Rates, 2018

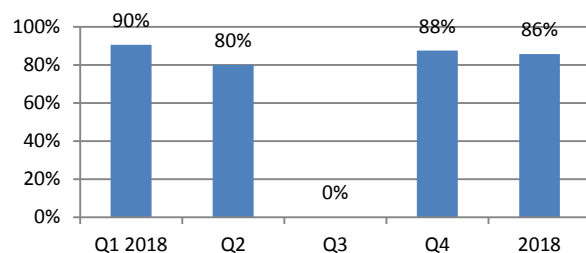


NP Completion Rates, 2018

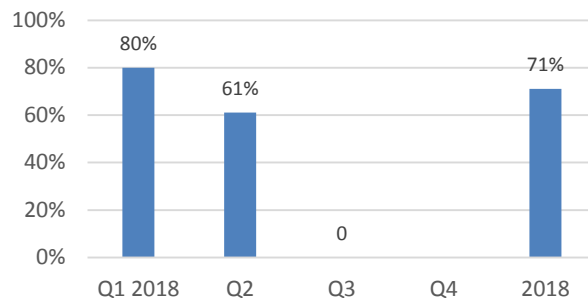


## Nurturing Parent: AAPI Data

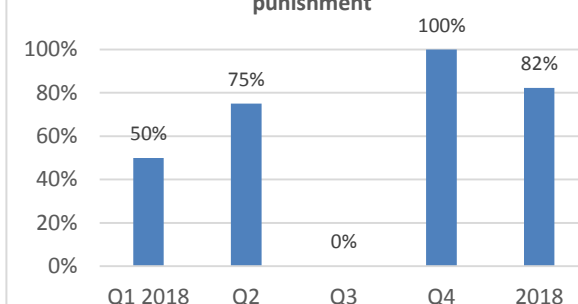
**% w/ increased parenting knowledge/skills as measured by AAPI**



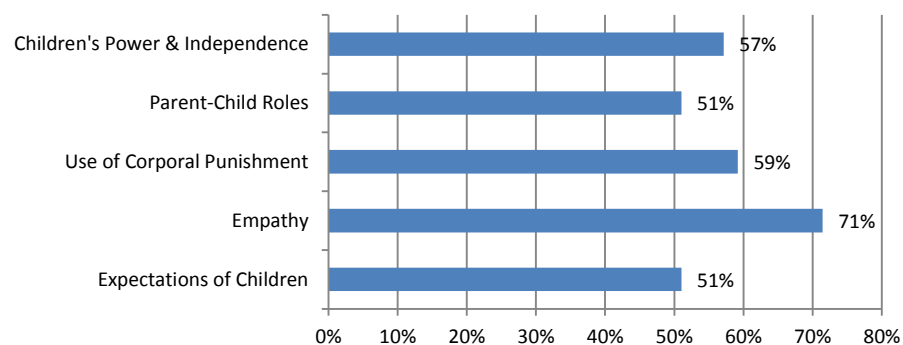
**% improved - Empathy Construct**



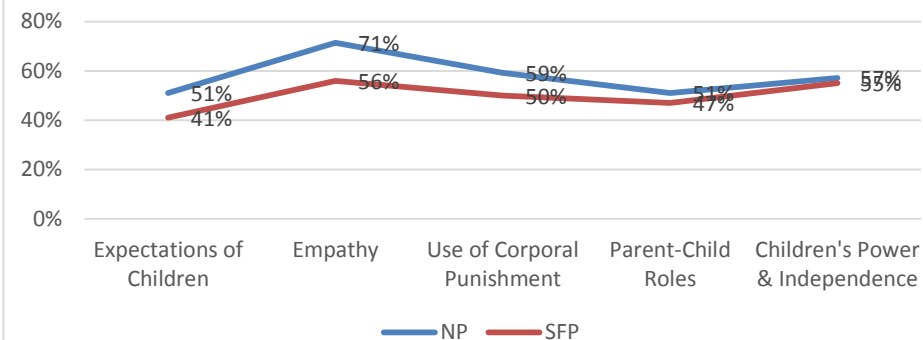
**% w/decreased risk for use of corporal punishment**



**% of Parents Who Improve on AAPI Domains, 2018**

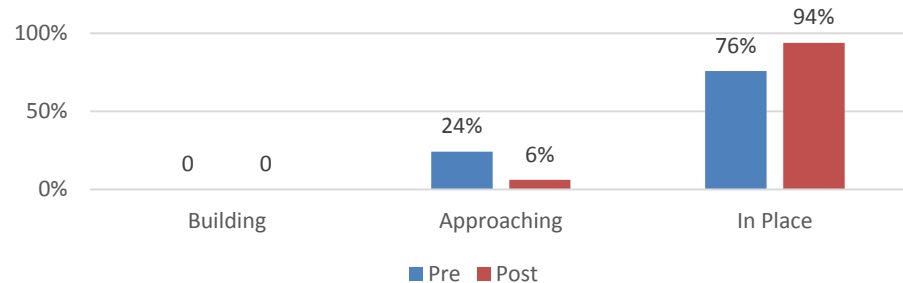


**% Parents who Improve on AAPI Domains - NP and SFP**



## Nurturing Parent: Resiliency

**Changes in Resiliency, 2018**





## FAMILY RESOURCES

Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>Eastside Community Schools</b> developed through partnership with the Christina, School Districts work in identified elementary and middle schools to ensure the provision of a wide-range of vital in-house health, social services, parent engagement activities, and cultural enrichment opportunities. The goal is for children to be physically, emotionally, and socially prepared to learn.	Parents and community-members are engaged as demonstrated by attendance at community-school sponsored events  Students are engaged as demonstrated by number of students involved in community-school sponsored or supported enhanced learning or resource opportunities  Students who receive an individual-level intervention improve attendance and/or tardies.	Services included: <ul style="list-style-type: none"> <li>Students: afterschool, mentoring, participation in enrichment events, and access to supports like Food Bank of DE backpacks. Parents: access to food pantries, referrals, participation in enrichment events and adult educational opportunities</li> <li>Community members: volunteerism, participation in community events and adult educational opportunities.</li> </ul>	Services included: <ul style="list-style-type: none"> <li>Students: afterschool, mentoring, participation in enrichment events, and Food Bank of DE backpacks. Parents: access to food pantries, referrals, participation in enrichment events and adult educational opportunities</li> <li>Community members: volunteerism, participation in community events and advisory board meetings and adult educational opportunities.</li> </ul>	Services included: <ul style="list-style-type: none"> <li>Students: afterschool, mentoring, participation in enrichment events, and Food Bank of DE backpacks. Parents: access to food pantries, referrals, volunteerism, participation in enrichment events and adult educational opportunities</li> <li>Community members: volunteerism, participation in community events and advisory board meetings and adult educational opportunities.</li> </ul>
		DUPLICATED CONTACTS <b>ECS Schools (incl. Bayard)</b> January through March Students: 7,666 Parents: 1,970 Community: 628  April through June Students: 7,756 Parents: 2,187 Community: 583  July through September Students: 1,651 Parents: 743 Community: 124  October through December Students: 7,188 Parents: 976 Community: 471	DUPLICATED CONTACTS <b>ECS Elementary Schools</b> January through March Students: 1,972 Parents: 1,218 Community: 379  April through June Students: 2,644 Parents: 1,715 Community: 755  July through September Students: 1,854 Parents: 1,108 Community: 335  October through December Students: 3,423 Parents: 2,191 Community: 471  <b>TOTAL DUPLICATED COUNT FOR 2017</b> Students: 9,883 Parents: 6,232 Community: 1,940	DUPLICATED Served in January through March Students: 1,395 Parents: 1,481 Community: 607  Served in April through June Students: 2,701 Parents: 2,549 Community members: 803  Served in July through September Students: 1,762 Parents: 1,189 Community members: 425  Served in October through December Students: 3,868 Parents: 2,090 Community members: 557

			<p><b>Bayard Middle School</b> January through March Students: 642 Parents: 31 Community: 62</p> <p>April through June Students: 1,052 Parents: 135 Community: 168</p> <p>July through September Students: 797 Parents: 73 Community: 89</p> <p>October through December Students: 1,439 Parents: 176 Community: 112</p> <p><b>TOTAL DUPLICATED COUNT FOR 2017</b> Students: 3,930 Parents: 415 Community: 431</p>	
<p><b>Red Clay Community Schools</b> developed through partnerships with the Christina, Red Clay, and Seaford School Districts, work in identified elementary and middle schools to ensure the provision of a wide-range of vital in-house health, social services, parent engagement activities, and cultural enrichment opportunities. The goal is for children to be physically, emotionally,</p>	<p>Students within the RCCS who receive an individual-level intervention (i.e. school-age cohort, mentoring, attendance support) improve attendance.</p> <p>Students within the RCCS who receive an individual-level intervention (i.e. school-age cohort, mentoring, attendance support) improve academically as measured by identified assessment(s).</p> <p>Students within the RCCS who receive an individual-level intervention (i.e. school-age cohort, mentoring, attendance support) improve behavior as measured by reduced suspensions, disciplinary actions, and/or tardies.</p>	<p>Services included:</p> <ul style="list-style-type: none"> <li>Students: afterschool programming, mentoring, participation in enrichment events, Food Bank of DE backpacks, etc.. Parents: access to food pantries, referrals, volunteerism, participation in enrichment events and adult educational opportunities</li> <li>Community members: volunteerism, participation in community events and adult educational opportunities.</li> </ul> <p>Because of the federal reporting period, data below is from October 2017 through March 2018.</p>	<p>Services included:</p> <ul style="list-style-type: none"> <li>Students: afterschool programming, mentoring, participation in enrichment events, and Food Bank of DE backpacks. Parents: access to food pantries, referrals, volunteerism, participation in enrichment events and adult educational opportunities</li> <li>Community members: volunteerism, participation in community events and advisory board meetings and adult educational opportunities.</li> </ul> <p>Served in January through March Students: 2,238 Parents: 224</p>	<p>Services included:</p> <ul style="list-style-type: none"> <li>Students: afterschool, mentoring, participation in enrichment events, and Food Bank of DE backpacks. Parents: access to food pantries, referrals, volunteerism, participation in enrichment events and adult educational opportunities</li> <li>Community members: volunteerism, participation in community events and advisory board meetings and adult educational opportunities.</li> </ul> <p>Served in January through March</p>

and socially prepared to learn.	Parents/guardians (school wide) are actively involved in their children’s education as evidenced by their participation in learning/development-focused RCCS activities.																																																														
This section includes information about families enrolled in the Shortlidge-Warner Achievement Zone (SWAZ), which targets a small group of parents of children enrolled at Shortlidge & Warner for on-going support.	Parents are referred to needed services such as benefits, housing, health care, or nutrition																																																														
In Fall 2018, this program is changing to the Mobility Mentoring model and re-vamping enrollment, retention, and service delivery.	Community members participate with RCCS as a volunteer or participant in stakeholder advisory process.																																																														
	Parents in the SWAZ cohort improve self-sufficiency as measured by the Arizona Self-Sufficiency Scale																																																														
	Parents in the SWAZ cohort improve resiliency as measured by Devereux Resiliency Scale																																																														
		<table><tr><th>SERVICES</th><th>Student</th><th>Family</th><th>Comm</th><th>Total</th></tr><tr><td>Early Childhood</td><td>22</td><td>22</td><td>0</td><td>44</td></tr><tr><td>Academic Enrichment</td><td>485</td><td>123</td><td>0</td><td>608</td></tr><tr><td>Family Engagement</td><td>834</td><td>663</td><td>246</td><td>1743</td></tr><tr><td>Mentoring/ Youth Devel.</td><td>77</td><td>0</td><td>0</td><td>77</td></tr><tr><td>Service Learning</td><td>0</td><td>0</td><td>77</td><td>77</td></tr><tr><td>Social Service Access</td><td>120</td><td>17</td><td>0</td><td>137</td></tr><tr><td>Nutrition &amp; Physical Fitness</td><td>170</td><td>31</td><td>13</td><td>214</td></tr><tr><td>Mental Health Counseling</td><td>54</td><td>15</td><td>0</td><td>69</td></tr><tr><td>Adult Education &amp; ESL</td><td>0</td><td>18</td><td>0</td><td>18</td></tr><tr><td>Attendance Support</td><td>98</td><td>100</td><td>0</td><td>198</td></tr><tr><td>Duplicated Totals</td><td>1860</td><td>989</td><td>336</td><td>3185</td></tr></table>	SERVICES	Student	Family	Comm	Total	Early Childhood	22	22	0	44	Academic Enrichment	485	123	0	608	Family Engagement	834	663	246	1743	Mentoring/ Youth Devel.	77	0	0	77	Service Learning	0	0	77	77	Social Service Access	120	17	0	137	Nutrition & Physical Fitness	170	31	13	214	Mental Health Counseling	54	15	0	69	Adult Education & ESL	0	18	0	18	Attendance Support	98	100	0	198	Duplicated Totals	1860	989	336	3185	
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		April through June Students: 5,977 Parents: 363 Community: 147																																																													
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		October through December Students: 2,629 Parents: 469 Community: 184																																																													
		<u>SWAZ</u> 39 families were enrolled in the SWAZ cohorts prior to shifting to the Mobility Mentoring model as of 10/1/18. <ul style="list-style-type: none"><li>All parents enrolled completed an initial screening using the Arizona Self-Sufficiency Matrix at enrollment. Average total score was 73 out of 95. This indicates that while families have areas of strength,</li></ul>																																																													
		Community: 125  Served in April through June Students: 1,753 Parents: 207 Community: 101  July through September Students: 1,019 Parents: 506 Community: 33  October through December Students: 1,723 Parents: 394 Community: 37  <b>TOTAL DUPLICATED COUNT FOR 2017</b> Students: 6,733 Parents: 1,331 Community: 296  <u>SWAZ</u> <ul style="list-style-type: none"><li>172 unduplicated students received attendance supports from our Service Navigators, with 303 separate contacts.</li></ul> 40 families were actively enrolled in the SWAZ cohorts as of 12/31/17. 52 parents have completed an initial screening using the Arizona <ul style="list-style-type: none"><li>Self-Sufficiency Matrix. The average score across all 19 domains was 3.82 on a 5-point scale. Average total score was 73 out of 95. This indicates that while families have areas of strength,</li></ul>	Students: 880 Parents: 194 Community: 540  Served in April through June Students: 651 Parents: 367 Community Members: 102  Served in July through September Students: 297 Parents: 494 Community Members: 61  Served in October through December Students: 1,635 Parents: 415 Community members: 161  83 students received mentoring services at Shortlidge and Warner during the 2015/16 school year. Big Brothers Big Sisters of Delaware (BBBSDE) shared their evaluation results with us for these students during the 2015/16 school year. More than 60% of mentored students showed an improvement in self-confidence and ability to express feelings; 62% or more improved in academic performance, attitude toward school, and class participation; and 70% improved their peer interactions and display of trust toward teachers.  <u>SWAZ</u> At the end of Year 1 of the federal evaluation (9/30/2016), we had 14 consented families in the School Age SWAZ cohort, and 4 families who had signed consents to																																																												

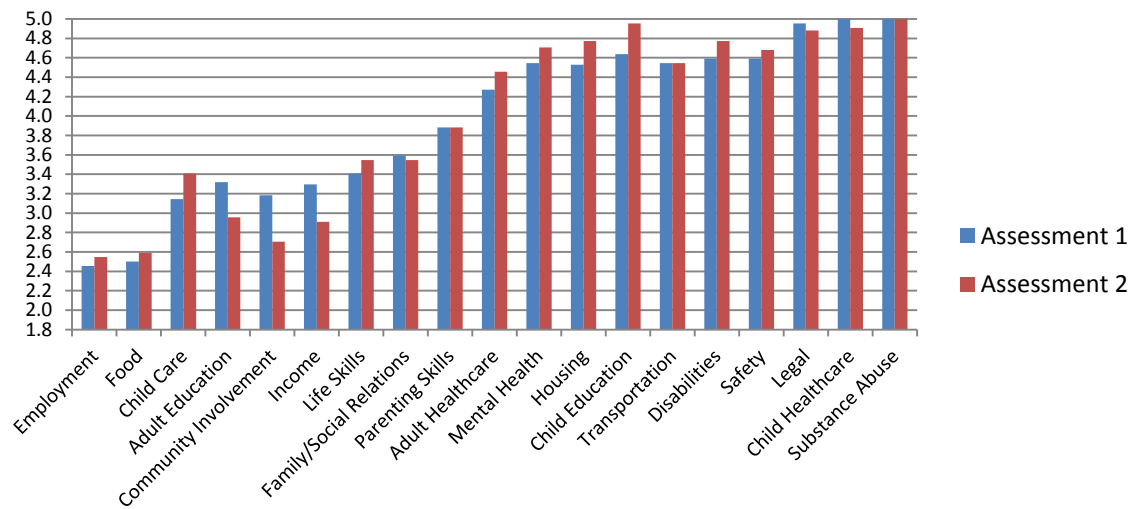
		<p>there are significant opportunities to increase self-sufficiency.</p> <ul style="list-style-type: none"> <li>• 22 families completed more than one Arizona Self-Sufficiency Assessment. 64% (14/22) improved their self-sufficiency scores over time.</li> <li>• 27 adults completed the Devereux Resiliency Scale, and 37% are Approaching Resiliency, with an additional 63% with Resiliency in Place.</li> </ul> <p>Below please find selected SWAZ data from the federal evaluation report:</p> <p><b>Attendance.</b> Participants in SWAZ cohorts exceeded the school-wide average attendance rates at Shortlidge Academy and Warner Elementary in 2017-18.</p> <p><b>Tardiness.</b> The tardiness rates of the SWAZ cohorts increased slightly over the past two academic years, from 5% to 6% for Cohort I and 6% to 8% for Cohort II.</p> <p><b>Out-of-School Suspension.</b> During the baseline year and Year 1 of the RCCS program, no student enrolled in the Red Clay Community Schools program, from either SWAZ cohort, had been suspended out of school. In 2017-18, 5.88% of the SWAZ cohorts suspended. The overall group's rate compares favorably to the school-wide rates for Shortlidge and Warner, 6.88% and 31.51% respectively.</p>	<p>there are significant opportunities to increase self-sufficiency.</p> <ul style="list-style-type: none"> <li>• 115 referrals to community resources were documented in ETO, including connections to home visiting, child care, health care, housing assistance, crisis supports (food/clothing/shelter), parenting information, and energy assistance.</li> <li>• Five adults have completed the Devereux Resiliency Scale, and 80% are Approaching Resiliency, with an additional 20% with Resilience in Place.</li> </ul> <p>Below please find selected data from the federal evaluation report for school-aged youth participating in the SWAZ cohorts and Big Brothers Big Sisters mentoring:</p> <p><b>Attendance.</b> In 2016-17, the first SWAZ cohort had an attendance rate of 96%, improving from 95% in 2015-16. Students who participated in the Big Brothers Big Sisters (BBBS) mentoring program had an average attendance rate of 95%. Both groups had better rates than the overall school populations at Shortlidge and Warner whose attendance rate was 92%.</p> <p><b>Tardiness.</b> The first SWAZ cohort's tardiness rate decreased from 8% to 5% between 2015-16 and 2016-17. The tardiness rates for the second cohort and the BBBS mentoring students was 6% for the 2016-17 school year.</p> <p><b>Out-of-School Suspension.</b> Over the last two academic years, no student enrolled in the Red Clay Community Schools program, from either cohort, has been suspended from school. In</p>	<p>participate in the Early Start SWAZ cohort.</p> <ul style="list-style-type: none"> <li>• Our Project Evaluator received information about the 14 School-Age cohort families who had signed program consents. Analysis of attendance and academic data will be used as a baseline to measure improvement for the 2016/17 school year for these students.</li> <li>• By 12/31/16, we had received 42 referrals for the SWAZ cohorts, of whom 26 families had enrolled. We continue to recruit for our Early Start and School Age SWAZ cohorts. We are evaluating whether to combine the two cohorts because recruitment of families appropriate for the Early Start cohort has been particularly challenging.</li> </ul> <p>Service Navigators made 69 resource referrals for SWAZ families and 83 resource referrals for other Shortlidge and Warner families.</p> <p>Service Navigators received 70 referrals for attendance intervention at Warner and 79 at Shortlidge. We follow the protocols of the school based teams, including phone calls to the home, visits to addresses where school mail is being returned, and home visits.</p>
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2015-16<sup>1</sup>, 9.5% of Shortlidge and 18.36% of Warner students were suspended out of school.

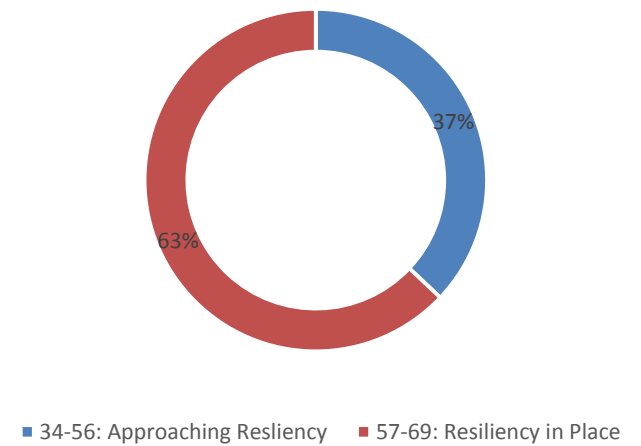
**Classroom Participation.** Teachers indicated that about two-thirds of the BBBS students showed improvement in regards to their attitudes toward school and their levels of classroom participation.

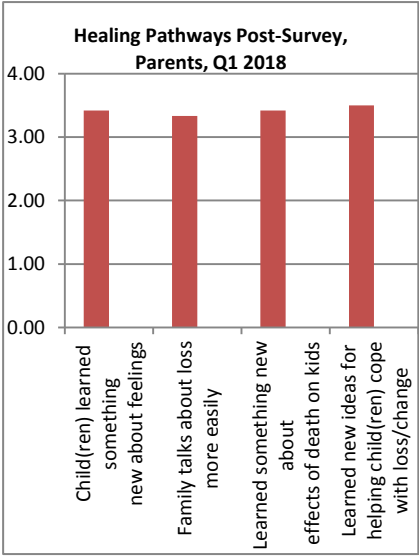
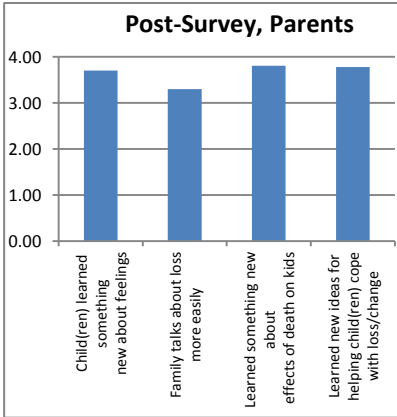
## SWAZ Data

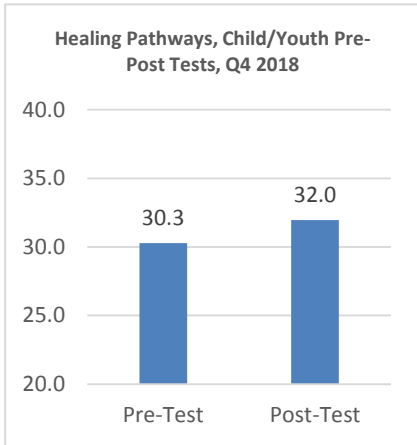
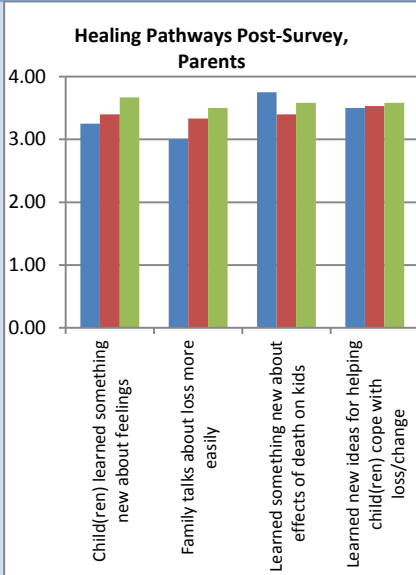
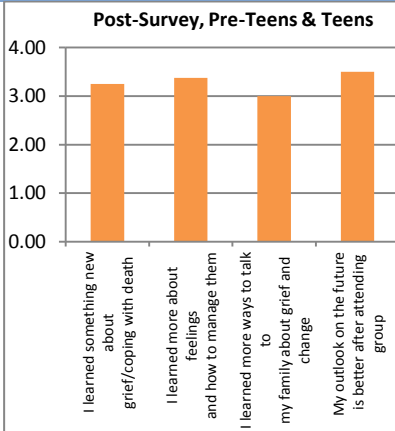
Arizona Self-Sufficiency: Changes over Time



SWAZ Resiliency - Baseline



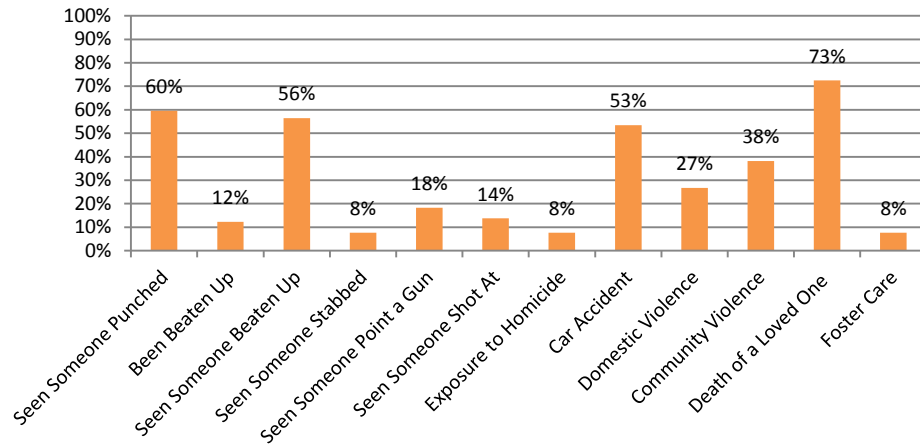
Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>Supporting Kidds - Healing Pathways</b> is 6-week structured grief support group program for children ages 5 to 18 and their caregivers.  <b>Data Source:</b> Report provided by Team Lead	<p>Healing Pathways post program measures:</p> <p>Parents</p> <ul style="list-style-type: none"> <li>Family talks about the loss more easily</li> <li>Learned about effects of death on kids</li> <li>Get ideas for helping children cope with loss/change</li> </ul> <p>Teens/Pre-teens</p> <ul style="list-style-type: none"> <li>Learn about grief/coping with death</li> <li>Learn about feelings, managing them</li> <li>Learn ways to talk to family about grief and change</li> <li>Improve outlook on future</li> </ul>	<p>No Healing Pathways groups ended in Q1 2018 or Q3 2018.</p> <p>In Q2, one group held in Hockessin. 12 adults and 0 teens/pre-teens completed assessment (younger children do not complete surveys). Data combined below.</p> <p>On a scale of 0 (strongly disagree) to 4 (strongly agree), parents reported:</p> <ul style="list-style-type: none"> <li>children learned something about feelings (3.4)</li> <li>The family talks about loss more easily (3.3)</li> <li>Parents learned something about effects of death on kids (3.4)</li> <li>Parents got ideas to help children cope with loss/change (3.5)</li> </ul>  <p>In the Q4 group, 21 children completed a pre-post survey about their grief experiences, of whom 67% (13/21) reported improvements in their grief process. Scores on the post-test</p>	<p>In Q2, groups held in Georgetown and Hockessin. 19 adults and 8 teens/pre-teens completed assessment (younger youth do not complete surveys). Q3, group held in Hockessin. 12 adults and one pre-teen completed assessment. Data combined below.</p> <p>On a scale of 0 (strongly disagree) to 4 (strongly agree), parents reported:</p> <ul style="list-style-type: none"> <li>children learned something about feelings (3.5)</li> <li>The family talks about loss more easily (3.4)</li> <li>Parents learned something about effects of death on kids (3.5)</li> <li>Parents got ideas to help children cope with loss/change (3.5)</li> </ul> <p>Teens/pre-teens reported they learned:</p> <ul style="list-style-type: none"> <li>more about grief/coping with death (3.3)</li> <li>more about feelings and managing them (3.6)</li> <li>more ways to talk to family about grief and change (3.1)</li> </ul> <p>Teens had an improved outlook on future (4.0)</p>	<p>On a scale of 0 (strongly disagree) to 4 (strongly agree), participants reported an average of 3.28 across measures. Parents reported:</p> <ul style="list-style-type: none"> <li>children learned something about feelings (3.7)</li> <li>The family talks about loss more easily (3.3)</li> <li>Parents learned something about effects of death on kids (3.8)</li> <li>Parents got ideas to help children cope with loss/change (3.8)</li> </ul> <p>Teens/pre-teens reported they learned:</p> <ul style="list-style-type: none"> <li>more about grief/coping with death (3.3)</li> <li>more about feelings and managing them (3.4)</li> <li>more ways to talk to family about grief and change (3.0)</li> <li>Teens had an improved outlook on future (3.5)</li> </ul> 

		<p>improved by an average of 1.7 points over the pre-test.</p> <div><p>Healing Pathways, Child/Youth Pre-Post Tests, Q4 2018</p><table><thead><tr><th>Test</th><th>Score</th></tr></thead><tbody><tr><td>Pre-Test</td><td>30.3</td></tr><tr><td>Post-Test</td><td>32.0</td></tr></tbody></table></div>	Test	Score	Pre-Test	30.3	Post-Test	32.0	<div><p>Healing Pathways Post-Survey, Parents</p><table><thead><tr><th>Category</th><th>Score</th></tr></thead><tbody><tr><td>Child(ren) learned something new about feelings</td><td>3.2</td></tr><tr><td>Family talks about loss more easily</td><td>3.0</td></tr><tr><td>Learned something new about effects of death on kids</td><td>3.7</td></tr><tr><td>Learned new ideas for helping child(ren) cope with loss/change</td><td>3.5</td></tr></tbody></table></div> <div><p>Post-Survey, Pre-Teens &amp; Teens</p><table><thead><tr><th>Category</th><th>Score</th></tr></thead><tbody><tr><td>I learned something new about grief/coping with death</td><td>3.2</td></tr><tr><td>I learned more about feelings and how to manage them</td><td>3.3</td></tr><tr><td>I learned more ways to talk to my family about grief and change</td><td>3.0</td></tr><tr><td>My outlook on the future is better after attending group</td><td>3.4</td></tr></tbody></table></div>	Category	Score	Child(ren) learned something new about feelings	3.2	Family talks about loss more easily	3.0	Learned something new about effects of death on kids	3.7	Learned new ideas for helping child(ren) cope with loss/change	3.5	Category	Score	I learned something new about grief/coping with death	3.2	I learned more about feelings and how to manage them	3.3	I learned more ways to talk to my family about grief and change	3.0	My outlook on the future is better after attending group	3.4
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<p><b>SK- Guiding Pathways</b> provides individual grief and loss therapy to children ages 3-18 in an office-based setting.</p> <p>Glossary: <b>Persistent Complex Bereavement Disorder</b></p>	<p># youth screened for eligibility to participate in GP program</p> <p>#/% found to be eligible for services</p> <p>#/% who discharge successfully</p> <p>#/% whose symptoms improve as measured by the following:</p>	<p><u>Preliminary Data</u></p> <p>35 youth were assessed and enrolled for participation in the Guiding Pathways program from Q1-Q4, 2018.</p> <p>Of those assessed and enrolled, 6 had discharged by the end of the reporting period, 4 of whom met the criteria for successful discharges (67%).</p>																											

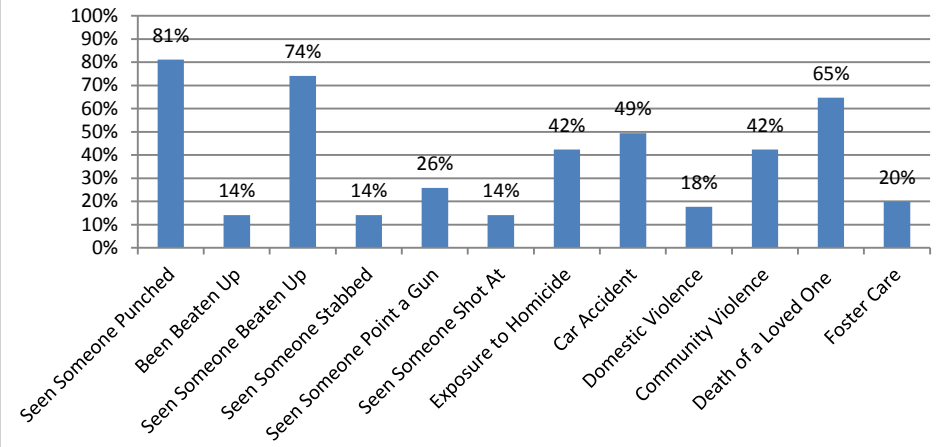
<p><b>Checklist</b> is a psychological assessment for bereaved children and adolescents aged 8-18 designed to assess content domains corresponding to DSM-5 proposed Persistent Complex Bereavement Disorder symptom criteria, including Separation Distress, Reactive Distress, Existential/Identity Related Distress, and Distress over Circumstances of the Death.</p> <p><b>Data Source:</b> Report provided by Team Lead</p>	<ul style="list-style-type: none"> <li>Persistent Complex Bereavement Disorder scale or Trauma subscales</li> <li>Grief &amp; Wellness Scores</li> </ul> <p>#/% who improve resiliency as measured by the Devereux</p>			
<p><b>Cognitive Behavior Intervention for Trauma in Schools (CBITS)</b> is an evidence-based group and individual intervention delivered in school and community settings designed to help children and youth in middle and high school recover from traumatic experiences and symptoms.</p> <p>Glossary: <b>CBITS Trauma Exposure Checklist</b> is used to screen for trauma exposure and related challenges.</p> <p><b>Data Source:</b> Report provided by Team Lead</p>	<p>Youth complete the series.</p> <p>Youth who complete CBITS reduce trauma symptoms as measured by pre- and post- trauma screenings.</p>	<p>90% (26/29) of groups that started completed successfully.</p> <p>80% (134/167) of youth completed the CBITS group they enrolled in.</p> <p>Of youth who completed and completed a pre- and post-screening, 63% (82/131) improved their trauma symptoms.</p> <ul style="list-style-type: none"> <li>Average score on pre-screenings: 23.3</li> <li>Average score on post-screenings: 19.6</li> </ul> <p>Average change: -3.7</p>	<p>In 2017, a total of 85 youth completed the program in and had both pre- and post-data. Of those youth, 66% (56/85) demonstrated improvement on post-screening.</p> <ul style="list-style-type: none"> <li>Average score on pre-screenings: 23</li> <li>Average score on post-screenings: 18</li> <li>Average change: -5</li> </ul>	



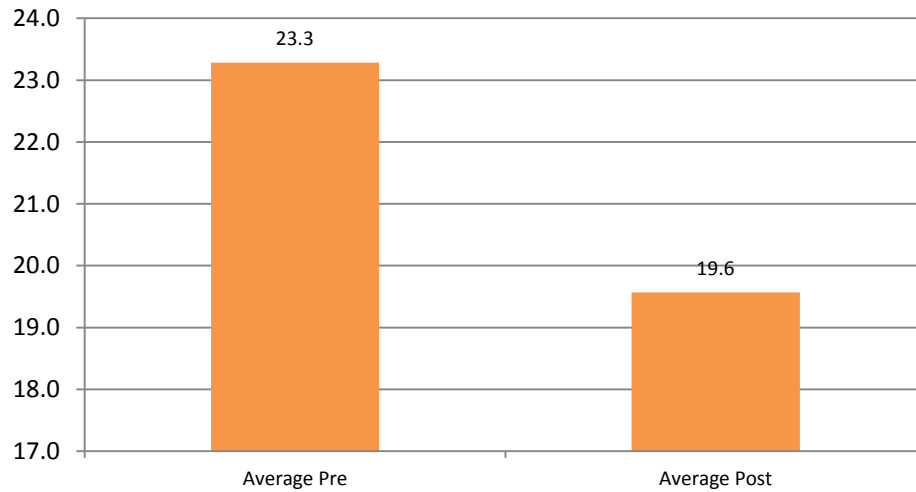
**Trauma/Violence Exposure Reported at Intake, 2018 YTD**



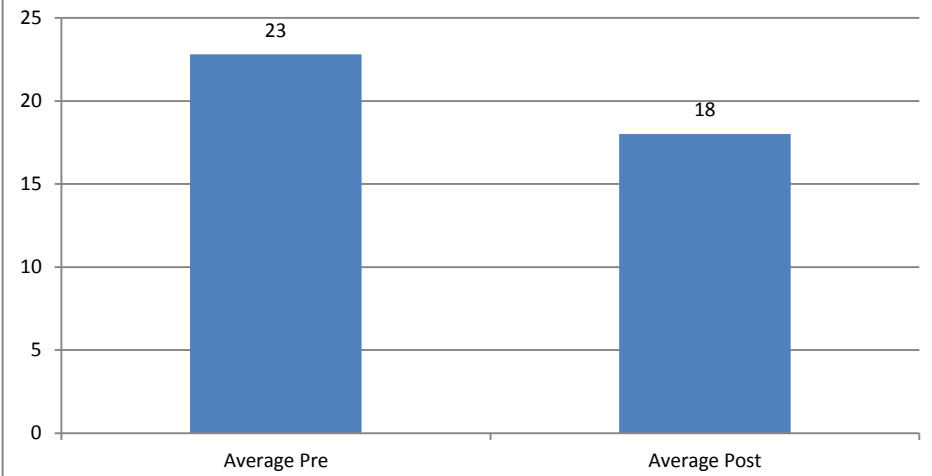
**Trauma/Violence Exposure Reported at Intake, 2017**

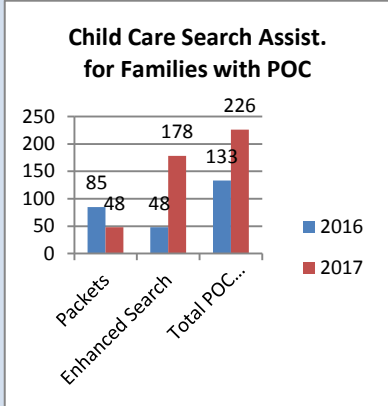


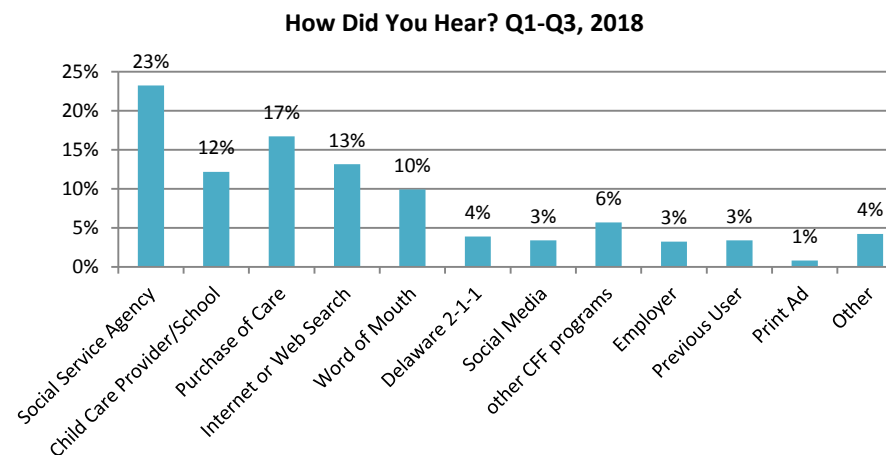
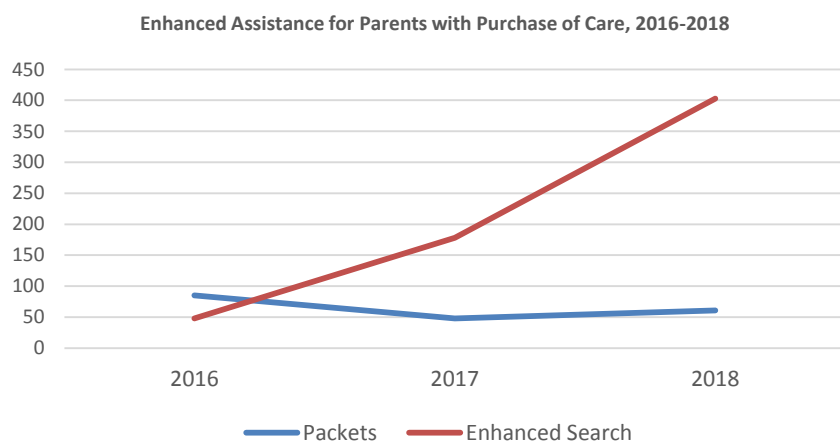
**Average Pre and Post Scores, 2018**



**Average Pre and Post Scores, 2017**



Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL												
<p><b>HELPLINE: ACCESS CARE</b> helps users identify child care centers, family child care homes, preschools, school-age programs and camps. This free service, accessed online or by telephone, lists services by zip code and offers suggestions on how to make informed care decisions.</p> <p><u>Data Sources:</u></p> <ul style="list-style-type: none"><li>• Survey Monkey Access Care Survey</li><li>• Survey Monkey Access Care Enhanced Survey</li><li>• Program Manager and Staff report</li></ul>	<p>Users are satisfied with the service.</p>	<p>848 total searches and packets</p> <p>NOTE: sample size of survey responses is VERY SMALL (7 survey respondents)</p> <ul style="list-style-type: none"><li>•On a scale of 1-5, the overall rating for satisfaction is 3.83</li><li>•83% (5/6) would use the service again</li></ul> <p>In 2017, we began offering enhanced outreach and additional supports to families who have Purchase of Care (POC). 131 individuals have received enhanced supports this year. In addition, we have provided 61 information packets and facilitated 403 web searches for individuals with POC.</p>	<p>731 searches</p> <p>NOTE: sample size of survey responses is VERY SMALL (11 survey respondents)</p> <ul style="list-style-type: none"><li>•On a scale of 1-5, the overall rating for satisfaction is 4.00</li><li>•75% (3/4) would use the service again</li></ul> <p>In 2017, we began offering enhanced outreach and additional supports to families who have Purchase of Care. This has resulted in an increase in the numbers of families who receive enhanced services:</p> <div><p><b>Child Care Search Assist. for Families with POC</b></p><table><caption>Child Care Search Assist. for Families with POC</caption><tr><th>Category</th><th>2016</th><th>2017</th></tr><tr><td>Packets</td><td>85</td><td>48</td></tr><tr><td>Enhanced Search</td><td>48</td><td>178</td></tr><tr><td>Total POC...</td><td>133</td><td>226</td></tr></table></div> <p>We have begun tracking referral source, below (Current as of 9/30/17):</p>	Category	2016	2017	Packets	85	48	Enhanced Search	48	178	Total POC...	133	226	<p>2,040 searches</p> <p>NOTE: sample size of survey responses is VERY SMALL (20 survey respondents)</p> <ul style="list-style-type: none"><li>•On a scale of 1-5, the overall rating for satisfaction is 3.94</li><li>•85% (17/20) would use the service again</li></ul>
Category	2016	2017														
Packets	85	48														
Enhanced Search	48	178														
Total POC...	133	226														

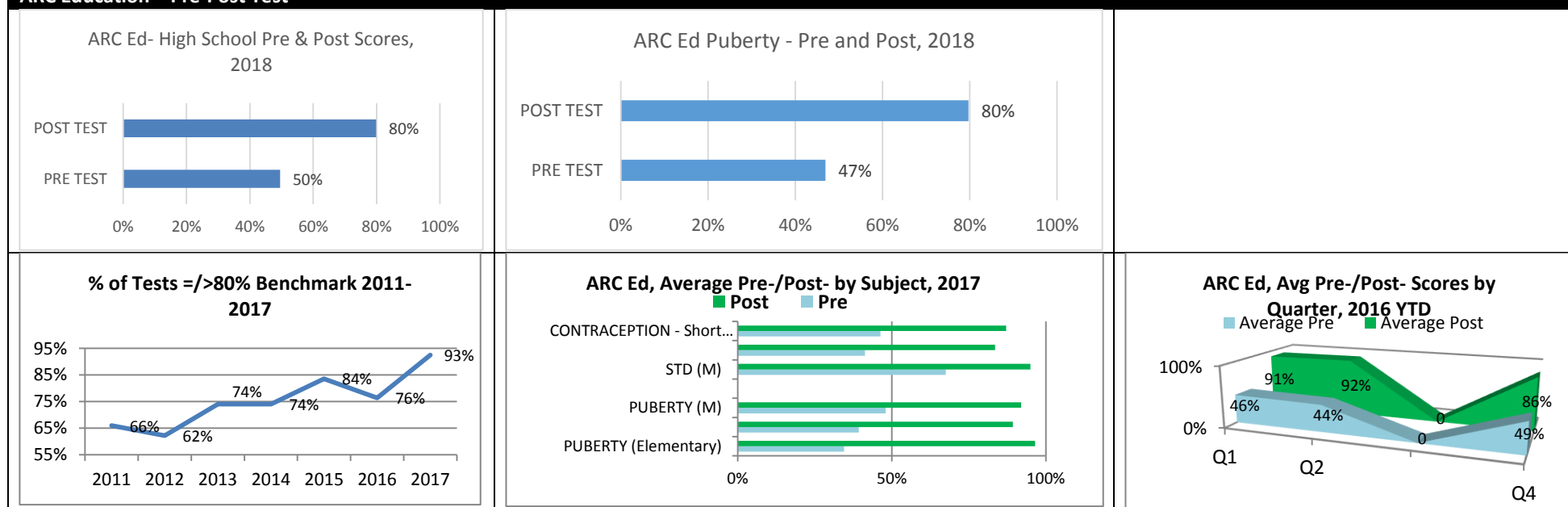


<p><b>HELPLINE: ELDER ONLINE</b>, part of the state's Aging &amp; Disability Resource Center (ADRC) helps individuals identify service providers to meet older relatives' needs and educational materials to help make informed choices. Referrals include housing, assisted living, companion services, legal, transportation, etc.</p> <p><b>Data Source:</b> Survey Monkey ADRC Website Survey</p>	<p>Users are satisfied with the service.</p>	<p>7,866 searches.</p> <p>NOTE: sample size of survey responses is VERY SMALL (16 survey respondents)</p> <ul style="list-style-type: none"> <li>• 88% (14/16) found the website helpful.</li> <li>• 80% (12/15) would use the service again</li> <li>• 88% (14/16) would recommend the website to others.</li> </ul> <p><i>With ADRC website, users are prompted to a survey following each search.</i></p> <p><i>With ADRC website, users are prompted to a survey following each search.</i></p>	<p>8,205 searches.</p> <p>NOTE: sample size of survey responses is VERY SMALL (4 survey respondents)</p> <ul style="list-style-type: none"> <li>• 75% (3/4) found the website helpful.</li> <li>• 67% (2/3) would use the service again</li> <li>• 50% (2/2) would recommend the website to others.</li> </ul> <p><i>With ADRC website, users are prompted to a survey following each search.</i></p>	<p>9,282 searches</p> <p>NOTE: sample size of survey responses is SMALL (8 survey respondents)</p> <ul style="list-style-type: none"> <li>• 100% (8/8) found the website helpful.</li> <li>• 100% (8/8) would use the service again</li> <li>• 100% (8/8) would recommend the website to others.</li> </ul> <p><i>With ADRC website, users are prompted to a survey following each search.</i></p>
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## SUPPORTING TEENS

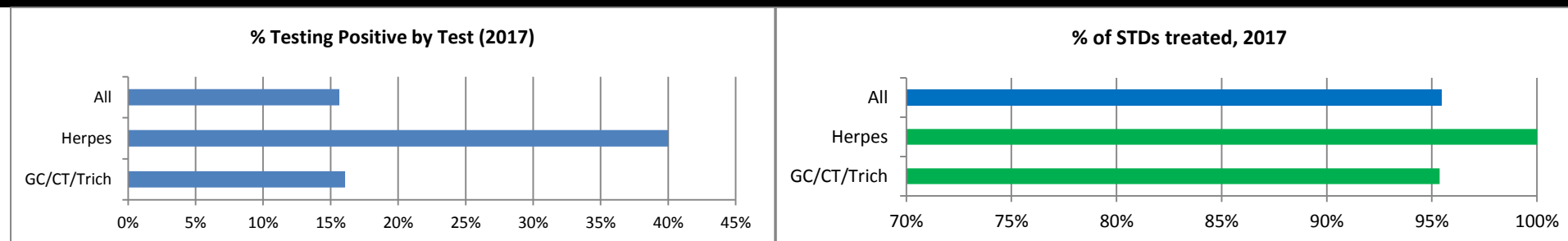
Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>ARC EDUCATION (ARC Ed)</b> is provided in elementary, middle and high schools as well as community centers throughout the state. Topics include puberty, abstinence, responsible decision making, healthy relationships, contraception, and prevention of sexually transmitted diseases including HIV/AIDS. <p><b>Data Source:</b> Pre / Post tests entered into Survey Monkey</p>	Students gain age-appropriate knowledge about sexuality (puberty, sexually transmitted diseases and contraception). # and % that increase knowledge overall as measured by a pre/post test	<b>Puberty Ed:</b> Students know an average of 80% of the information at post test overall (compared to 47% at pre-test).  <b>High School:</b> Students know an average of 80% of the information at post test overall (compared to 50% at pre-test).	Students know an average of 91% of the information at post test overall (compared to 45% at pre-test). 93% of the school classes tested (37/40) were at or above the 80% benchmark within each school.  <i>No Education sessions held in Q3.</i>	Students know an average of 87% of the information at post test overall (compared to 54% at pre-test). 76% of the school classes tested (42/55) were at or above the 80% benchmark within each school.  <i>No Education sessions held in Q3.</i>

### ARC Education – Pre-Post Test

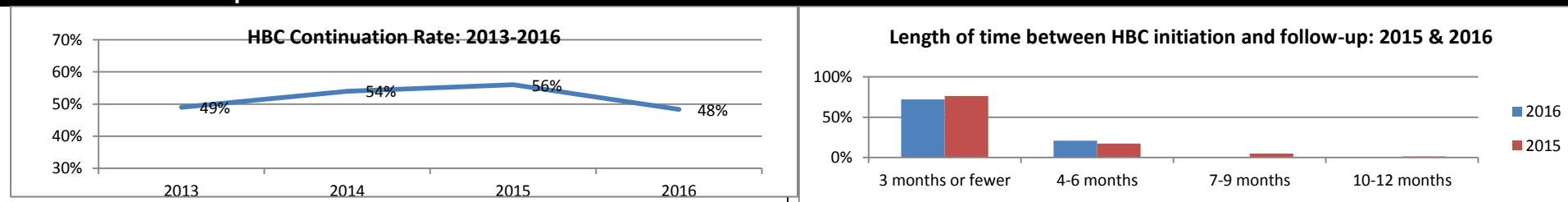


Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>ARC-Medical</b> services are provided at a clinic in Wilmington in partnership with Nemours. Medical services include contraception, testing and treatment for sexually transmitted diseases, pregnancy confirmation.	<p>Sexually active teens protect their sexual health by testing for and treating sexually transmitted diseases including HIV. (# STD test, # positive, # treated)</p> <p>Sexually active teens prevent pregnancy as measured by the # who initiate and return for contraception.</p> <p><i>Note: rate of return for contraception is calculated annually at year end.</i></p>	<p>Clinic services in partnership with Nemours began in May 2018.</p> <p>Test results were positive for 15% (11/75) of tests for sexually transmitted diseases (gonorrhea/Chlamydia).</p> <p>Of 11 positive tests for STDs, 10 (91%) were treated at ARC. The remaining person was referred to DPH for treatment.</p>	<p>Test results were positive for 16% (108/672) of tests for sexually transmitted diseases (GC/CT/Trich, HIV/Syphilis, Rapid HIV, Syphilis, and Herpes).</p> <p>Of 108 positive tests for STDs, 97 (90%) were treated at ARC and an additional 8 were treated elsewhere for a total treatment rate of 95%.</p>	<p>Test results were positive for 16% (136/853) of tests for sexually transmitted diseases (GC/CT/Trich, HIV/Syphilis, Rapid HIV, Syphilis, and Herpes).</p> <p>Of 136 positive tests for STDs, 122 (90%) were treated at ARC and an additional 8 were treated elsewhere for a total treatment rate of 96%.</p> <p>For those initiating hormonal contraception, 48% (115/238) returned for continuation of hormonal contraception at least once.</p> <p>Of those who returned,</p> <ul style="list-style-type: none"> <li>• 72% (83/115) returned for their first follow up within 3 months</li> <li>• 21% (24/115) in 4-6 months</li> <li>• 5% (6/115) in 7-9 months</li> <li>• 2% (2/115) in 10-12 months</li> </ul>

### ARC Med – STD Treatment



### ARC Med – Contraception



Program	2018 Measures	2018 YTD	2017 FINAL	2016 FINAL - SHTRC																										
<b>SEAFORD HOUSE THERAPEUTIC RESIDENCE (SHTR)</b> target youth in child welfare placement. Outcome measures will require updates.  <b>Glossary:</b> <b>Independent Living Skills Assessment (ILSA)</b> was developed by the Washington State Department of Social & Health Services to assess youth skills across 15 different categories, such as Money Management, Interpersonal Skills, Job Maintenance Skills, Educational Planning, etc.  <b>Devereux Adult Resilience Scale (DARS), adapted,</b> measures youth self-report of resiliency across domains that include Relationships, Self-Control, and Internal Beliefs.  <b>Strengths &amp; Difficulties Questionnaire (SDQ)</b> measures youth on a three-point scale across problem areas such as emotional stability, conduct, etc. It also assesses pro-social behaviors such as relationships with peers.  <b>Data Source(s)</b> Provided by Program Administrator	<b>UPDATED for new program in 2018</b> <ul style="list-style-type: none"><li>• #/% of youth who improve independent living skills, measured by total number of skills in advanced or excellent status on the ILSA</li><li>• #/% of youth who improve resiliency as measured using the modified Devereux Adult Resilience Scale (DARS)</li><li>• #/% of youth who reduce Difficulties as measured by the SDQ</li><li>• #/% of youth who improve pro social skills as measured by the SDQ</li><li>• Youth achieve academic benchmarks</li><li>• #/% <b>discharged</b> to less restrictive environment</li><li>• # of Therapeutic <b>holds</b></li></ul>	<p>62% of quarterly assessments of Independent Living Skills showed improvement (29/47). 83% (5/6) of youth who discharged in 2018 and had a pre-post ILS, showed improvement, gaining an average of 2 skills.</p> <p>59% of quarterly DARS assessments show improvement in resiliency (26/44). 50% (3/6) of youth who discharged in 2018 and had a pre-post DARS, showed improvement, gaining an average of 7.7 points.</p> <p>73% of youth at Seaford House indicate that they have Resiliency in Place at intake.</p> <div><p><b>Seaford Resiliency at Intake</b></p><table><tr><td>Building</td><td>4%</td></tr><tr><td>Approaching</td><td>23%</td></tr><tr><td>In Place</td><td>73%</td></tr></table></div> <p>64% (18/28) of quarterly MH Difficulties assessments show improvement. 60% (3/5) of youth who successfully discharged in 2018 and had a pre-post SDQ, showed improvement, decreasing scores by 4 points.</p> <p>70% (19/27) of quarterly MH ProSocial assessments show improvement.</p>	Building	4%	Approaching	23%	In Place	73%	<p><b>Due to Programmatic Transition, only reported outcomes are discharges and holds.</b></p> <p>Therapeutic Residence served 21 children in 2017.</p> <p>8 children discharged</p> <ul style="list-style-type: none"><li>• 1 to Reunification</li><li>• 5 to non-CFF placement<ul style="list-style-type: none"><li>- 3 to detention</li><li>- 1 to psychiatric hospitalization</li><li>- 1 to other group home placement</li></ul></li><li>• 1 aged out</li><li>• 1 discharged on AWOL status</li></ul> <p><b>Therapeutic Holds YTD: 19</b></p> <div><p><b>Therapeutic Holds, Previous 4 Quarters (Rolling)</b></p><table><tr><th>Quarter</th><th>Holds</th></tr><tr><td>Q1 2017</td><td>7</td></tr><tr><td>Q2 2017</td><td>9</td></tr><tr><td>Q3 2017</td><td>0</td></tr><tr><td>Q4 2017</td><td>3</td></tr></table></div>	Quarter	Holds	Q1 2017	7	Q2 2017	9	Q3 2017	0	Q4 2017	3	<p><b>73% (22/30)</b> youth discharged went to level or less restrictive care</p> <ul style="list-style-type: none"><li>• <b>Q1:</b> 50% (3/6) 1 lower, 2 level care</li><li>• <b>Q2:</b> 81% (9/11) 1 age out, 1 level, 7 lower</li><li>• <b>Q3:</b> 75% (6/8) 1 level, 7 lower care</li><li>• <b>Q4:</b> 80% (4/5) 4 lower, 1 higher</li></ul> <p>For youth who successfully completed the program, and had pre-post data: <b>CBCL Scores:</b> 9/12 (75%) improved <b>CBCL Syndrome:</b> 9/12 (75%) improved <b>YRS Scores:</b> 6/8 (75%) improved <b>YRS Syndromes:</b> 14/17 (82%) improved</p> <p><b>UCLA: 69% (13/19)</b> of youth who by self-report met criteria for trauma symptoms at intake, were discharged with reduced symptoms. (Of those, 78% (7/9) who met criteria for full PTSD no longer met criteria at discharge, and 38% (5/13) who met criteria for partial PTSD no longer met criteria at discharge.) <b>ASEBA CBCL, PTSD: 75% (3/4)</b> youth who met PTSD criteria at intake by guardian assessment, longer met criteria at discharge.</p> <p><b>Therapeutic Holds: 60</b></p> <div><p><b>Therapeutic Holds, 2016</b></p><table><tr><th>Quarter</th><th>Holds</th></tr><tr><td>Q1 2016</td><td>25</td></tr><tr><td>Q2 2016</td><td>18</td></tr><tr><td>Q3 2016</td><td>8</td></tr><tr><td>Q4 2016</td><td>9</td></tr></table></div>	Quarter	Holds	Q1 2016	25	Q2 2016	18	Q3 2016	8	Q4 2016	9
Building	4%																													
Approaching	23%																													
In Place	73%																													
Quarter	Holds																													
Q1 2017	7																													
Q2 2017	9																													
Q3 2017	0																													
Q4 2017	3																													
Quarter	Holds																													
Q1 2016	25																													
Q2 2016	18																													
Q3 2016	8																													
Q4 2016	9																													

80% (4/5) of youth who successfully discharged in 2018 and had a pre-post SDQ, showed improvement, increasing scores by 2 points.

#### Q1/Q2 2018

During this quarter, 60% of youth were enrolled in the Seaford School District (9/20), 15% (3/20) in GED programs and 15% in another school setting, such as another school district or an alternative school.

82% (9/11) of youth who received grades passed all of their courses. 82%, (9/11) passed their core classes, such as math, science and English.

64% (7/11) who completed the marking period in the school setting received the Honor Roll. 55% (6/11) were on the Distinguished Honor Roll.

#### Q3 2018 (end of year – summer)

#### Q4 2018 Updated Data not available

#### Discharges

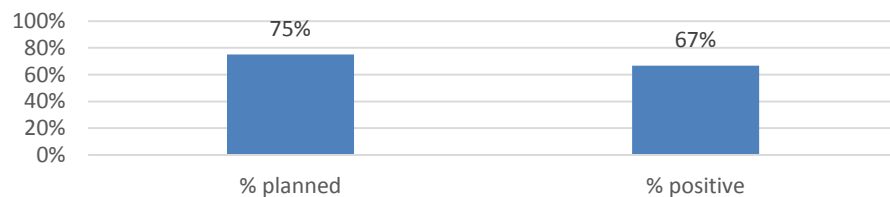
There have been 12 discharges this year of which 9 (75%) were planned and 8 (67%) were successful.

Reunification (4)

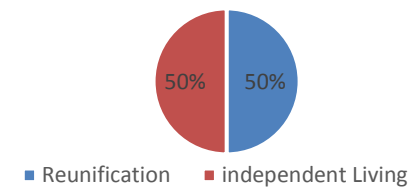
Independent Living (4)

**Holds:** 12 therapeutic holds YTD

SHTR Discharges 2018



Successful Discharges by Type, 2018



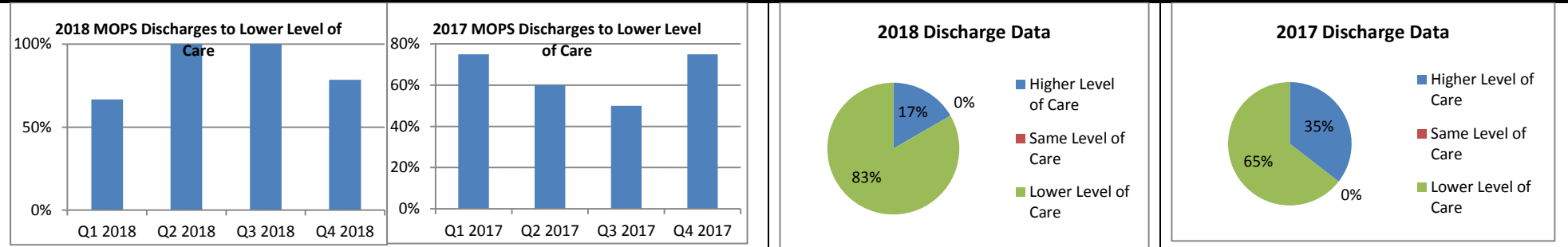
Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<p><b>MOBILE OUTPATIENT SERVICES (MOPS)</b> are designed to serve youth ages 8 to 18 with a primary mental health diagnosis. MOPS offers a unique combination of individual therapy and Functional Family Therapy in conjunction with case management and psychiatric care for youth and their families in Kent and Sussex Counties.</p> <p><b>Child Behavior Checklist (CBC)</b> parent-report questionnaire rating child on behavioral and emotional problems that include:</p> <p><b>2007 Scales</b> - Obsessive Compulsive Disorder, PTSD</p> <p><b>Competence</b> - pro-social measures like positive qualities, activities, etc.</p> <p><b>DSM Syndromes</b> Empirically-based syndromes scales: Anxious/ Depressed, Withdrawn/ Depressed, Social Problems, Thought Problems, Attention Problems, Somatic Problems, Rule Breaking, Aggressive</p> <p><b>DSM Symptoms</b> - Depression, Anxiety, Somatic, ADHD, Oppositional Defiant Disorder (ODD), Conduct Disorder</p>	<ul style="list-style-type: none"> <li>Youth will be successfully discharged to level or lower level of care</li> <li>Families will demonstrate improvement as indicated by FFT measures (COM and SDQ)</li> <li>Youth will demonstrate improvements in symptomology and behavior as measured by the Child Behavior Checklist</li> </ul>	<p><u>CMHS Outcomes</u> 83% of youth were discharged to lower level of care (30/36).</p> <p><u>Child Behavior Checklist or Youth Self Report</u> Youth discharged to lower level of care for whom a pre- and post-CBCL /YSR assessment was completed and showed as “at risk” in each category. Percentages are reduced risk at post: <b>CBCL/YSR/2007 Scales:</b> 68% (13/19) <b>CBCL/General:</b> 36% (8/22) <b>CBCL Syndromes:</b> 63% (15/24) <b>CBCL/DSM Scores:</b> 61% (14/23)</p> <p><u>No MOPS/FFT Cases closed in Q3</u></p> <p><u>FFT Outcomes</u> 67% (8/12) of cases closed in generalization phase in 2018.</p> <p><b>Due to changes in FFT Assessment process required by Model Developer in Q4 2018, updated assessment data is not available.</b></p> <p>92% (11/12) adolescents /parents reported an improved relationship as measured by an overall improvement on the COM.</p> <ul style="list-style-type: none"> <li>100% (6/6) adolescents</li> <li>83% (5/6) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 91% (10/11) reported communication improvement as measured by COM.</p> <ul style="list-style-type: none"> <li>80% (4/5) adolescents</li> <li>100% (6/6) parents</li> </ul>	<p><u>CMHS Outcomes</u> 67% of youth were discharged to lower level of care (26/39).</p> <p><u>Child Behavior Checklist or Youth Self Report</u> Youth discharged to lower level of care for whom a pre- and post-CBCL /YSR assessment identified as “at risk” in each category. Percentages are reduced risk at post: <b>CBCL/2007 Scales:</b> 79% (11/14) <b>CBCL/General:</b> 52% (11/21) <b>CBCL Syndromes:</b> 71% (15/21) <b>CBCL/DSM Scores:</b> 63% (12/19)</p> <p><u>FFT Outcomes</u> 50% (5/10) of cases closed in generalization phase.</p> <p>92% (11/12) adolescents /parents reported an improved relationship as measured by an overall improvement on the COM.</p> <ul style="list-style-type: none"> <li>100% (5/5) adolescents</li> <li>86% (6/7) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 42% (5/12) reported communication improvement as measured by COM.</p> <ul style="list-style-type: none"> <li>80% (4/5) adolescents</li> <li>14% (1/7) parents</li> </ul> <p>20% (1/5) youth rated themselves as “Severe” on SFSS at initial assessment. 0/1 improved. <b>For FFT data in graphic format, please see FFT OUTCOMES section.</b></p> <p><i>See next page for graphic data.</i></p>	<p><u>CMHS Outcomes</u> 80% of youth were discharged to same or lower level of care (40/50).</p> <p><u>Child Behavior Checklist</u> Youth discharged to lower level of care for whom a pre- and post-CBCL assessment identified as “at risk” in each category. Percentages are reduced risk at post: <b>CBCL/2007 Scales:</b> 75% (24/32) <b>CBCL/Competence:</b> 72% (26/36) <b>CBCL Syndromes:</b> 57% (20/35) <b>CBCL/DSM Scores:</b> 62% (24/39)</p> <p><u>FFT Outcomes</u> 73% (8/11) of cases closed in generalization phase.</p> <p>41% (7/17) adolescents /parents reported an improved relationship as measured by an overall improvement on the COM.</p> <ul style="list-style-type: none"> <li>38% (3/8) adolescents</li> <li>44% (4/9) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 14% (2/14) reported communication improvement as measured by COM.</p> <ul style="list-style-type: none"> <li>13% (1/8) adolescents</li> <li>17% (1/6) parents</li> </ul> <p>38% (3/8) youth rated themselves as “Severe” on SFSS at initial assessment. 67% of youth had improved at closing. <b>For FFT data in graphic format, please see FFT OUTCOMES section.</b></p> <p><i>See next page for graphic data.</i></p>



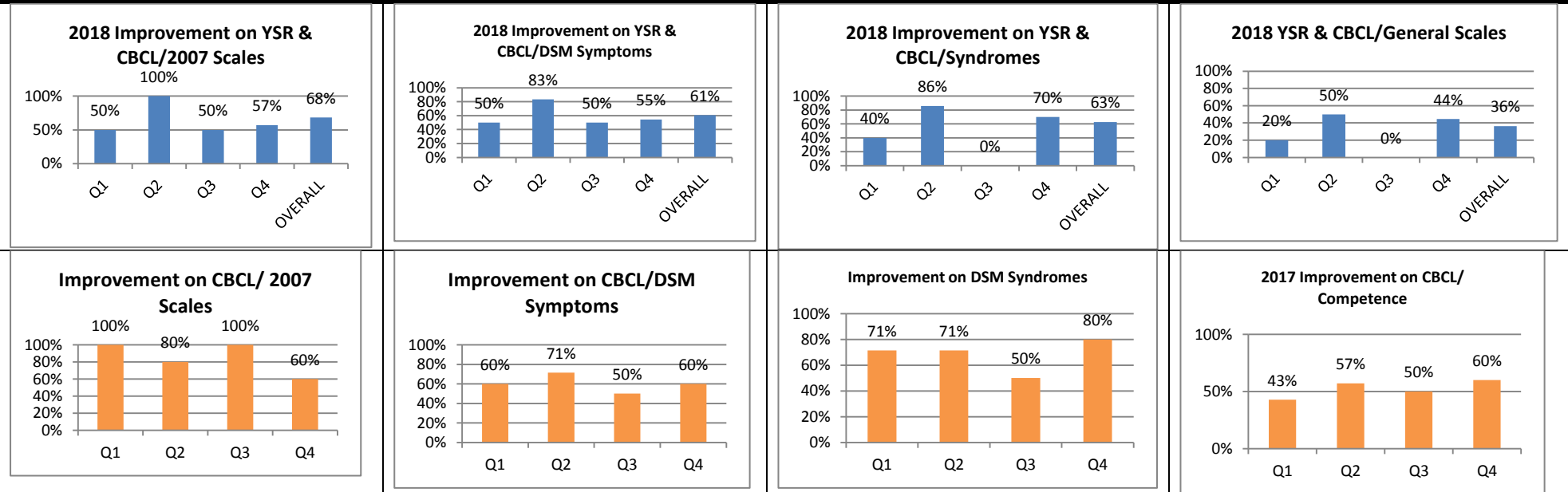
50% (3/6) youth rated themselves as "Severe" on SFSS at initial assessment. 100% improved, all moving out of clinical range improved.

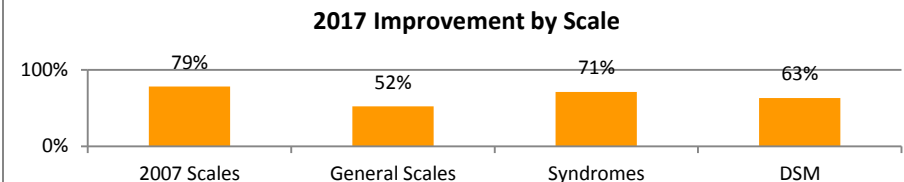
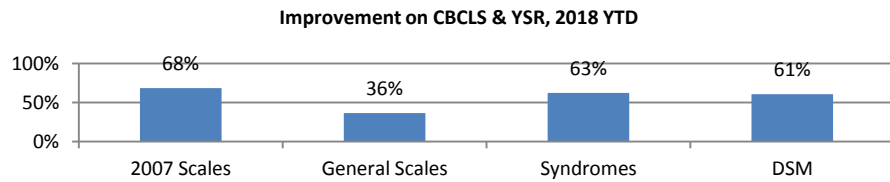
**FFT graphs in FFT section.**

## CMHS – Discharge Data



## CMHS – Child Behavior Checklist Data





Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<p><b>FAMILY ASSESSMENT &amp; INTERVENTION RESPONSE (FAIR)</b> is part of the Delaware Division of Family Services' Differential Response model. CFF's FAIR program uses research-based services such as Functional Family Therapy (FFT) and Family Keys to help keep families together and keep adolescents out of foster care.</p> <p><b>Expansion update:</b> Serving children age 0-17 years of age who have been referred to DFS due to allegations of child abuse, neglect and or dependency. Intervention models include: CPP (children ages 0-6) helps support and strengthen the relationship between the child and his/her parent to improve behavioral and social skills. CBT (children ages 7-17) focuses on changing behaviors, improving emotional stability, and developing coping skills.</p> <p><b>Glossary:</b> <b>COM</b> = Client Outcome Measures, proprietary FFT assessment that looks at family functioning <b>SFSS</b> = Symptoms and Functioning Severity Scale is designed to</p>	<ul style="list-style-type: none"> <li>• #/% of families who complete Family Keys successfully.</li> <li>• #/% of families who complete FFT successfully (FFT Outcomes)</li> <li>• # of re-referrals to DFS within 12 months of closing, as reported by DFS</li> </ul> <p>New Measures to be added for FAIR Expansion in Q4 2018.</p>	<p><u>FAIR Outcomes</u> 511 families referred</p> <ul style="list-style-type: none"> <li>• 14 were mis-assigned</li> <li>• 0 were duplicate reports</li> <li>• 38 were linked reports</li> </ul> <p>497 cases needed assessment</p> <ul style="list-style-type: none"> <li>• 33 declined FAIR, returned to DFS</li> <li>• 67 returned to DFS based on safety and/or risk assessment</li> <li>• 0 closed after assessment based on No Safety or Risk Issues</li> </ul> <p><b>CASE CLOSURE</b> 91% of cases (379/418) closed successfully. Of successful closures,</p> <ul style="list-style-type: none"> <li>• 91% (345/379) completed Family Keys only</li> <li>• 5% (20/379) completed FFT only</li> <li>• 1% (3/379) completed CBT/CPP</li> </ul> <p><u>FAIR FFT Outcomes</u> 67% (20/30) of cases closed in generalization phase.</p> <p><b>Due to changes in FFT Assessment process required by Model Developer in Q4 2018, updated data is not available.</b></p> <p>86% (24/28) adolescents /parents reported an improved relationship as measured by an overall improvement on the COM.</p> <ul style="list-style-type: none"> <li>• 86% (12/14) adolescents</li> <li>• 86% (12/14) parents</li> </ul>	<p><u>FAIR Outcomes</u> 408 families referred</p> <ul style="list-style-type: none"> <li>• 8 were mis-assigned</li> <li>• 1 were duplicate reports</li> <li>• 22 declined FAIR, returned to DFS</li> </ul> <p>377 cases needed assessment</p> <ul style="list-style-type: none"> <li>• 33 returned to DFS based on safety and/or risk assessment</li> <li>• 4 closed after assessment based on No Safety or Risk Issues</li> </ul> <p><b>CASE CLOSURE</b> 98% of cases (356/362) closed successfully. Of successful closures,</p> <ul style="list-style-type: none"> <li>• 98% (348/356) completed Family Keys only</li> <li>• 2% (8/356) completed FFT only</li> </ul> <p><b>UPDATE 11/1/18</b> DFS data shows that of families served in 2017, only 3 entered DFS Placement, for a placement rate of less than 1% (3/362).</p> <p><u>FAIR FFT Outcomes</u> Of cases that closed, 8 successfully completed FFT</p> <p>67% (8/12) of cases closed in generalization phase.</p>	<p><u>FAIR Outcomes</u> 429 families referred</p> <ul style="list-style-type: none"> <li>• 30 were mis-assigned</li> <li>• 0 were duplicate reports</li> <li>• 38 declined FAIR, returned to DFS</li> </ul> <p>399 cases needed assessment</p> <ul style="list-style-type: none"> <li>• 17 returned to DFS based on safety and/or risk assessment</li> <li>• 13 closed after assessment based on No Safety or Risk Issues</li> </ul> <p><b>CASE CLOSURE</b> 98% of cases (328/334) closed successfully. Of successful closures,</p> <ul style="list-style-type: none"> <li>• 89% (291/328) completed Family Keys</li> <li>• 11% (37/328) completed FFT</li> </ul> <p><b>Data provided by DFS shows that of families referred to FAIR since 2014, 21 referred youth have entered placement, only 9 of whom completed FAIR services. This is a placement rate of less than 1% (9/1,146).</b></p> <p><u>FAIR FFT Outcomes</u> Of cases that closed, 52 also received FFT. 76% (37/49) of cases that began closed in generalization phase.</p> <p>88% (61/69) adolescents and parents reported an improved relationship as measured by an overall improvement on the COM.</p>

provide feedback on the youth's level of severity in regard to symptoms and functioning.

*Additional tools for expansion to be added to report in Q3.*

Of adolescents/parents who identified communication as an issue on initial assessment, 100% (20/20) reported communication improvement as measured by COM.

- 100% (10/10) adolescents
- 100% (10/1) parents

47% (7/15) youth rated themselves as "Severe" on SFSS at initial assessment. 100% (7/7) improved.

For FFT data in graphic format, please see FFT OUTCOMES section.

75% (16/20) adolescents /parents reported an improved relationship as measured by an overall improvement on the COM.

- 75% (6/8) adolescents
- 83% (10/12) parents

Of adolescents/parents who identified communication as an issue on initial assessment, 70% (14/20) reported communication improvement as measured by COM.

- 50% (4/8) adolescents
- 83% (10/12) parents

63% (5/8) youth rated themselves as "Severe" on SFSS at initial assessment. 80% (4/5) improved. For FFT data in graphic format, please see FFT OUTCOMES section.

See next page for graphic data.

- 93% (27/29) adolescents
- 85% (34/40) parents

Of adolescents/parents who identified communication as an issue on initial assessment, 82% (51/62) adolescents and parents reported improvement in communication as measured by the COM.

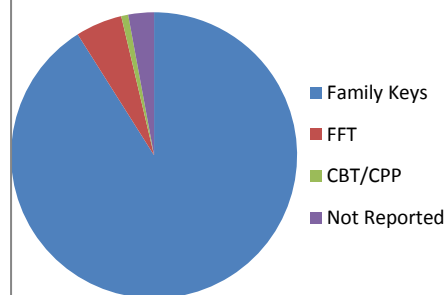
- 83% (24/29) adolescents
- 82% (27/33) parents

52% (15/29) of youth rated themselves as "Severe" on SFSS at initial assessment.

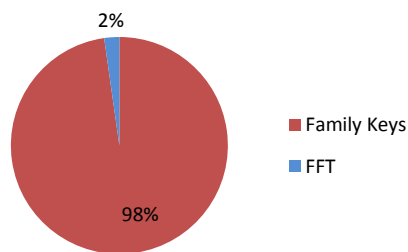
- 80% (12/15) moved out of "Severe" at closing.
- 100% (15/15) clinical ratings improved by closing

## FAIR – Successful Completion

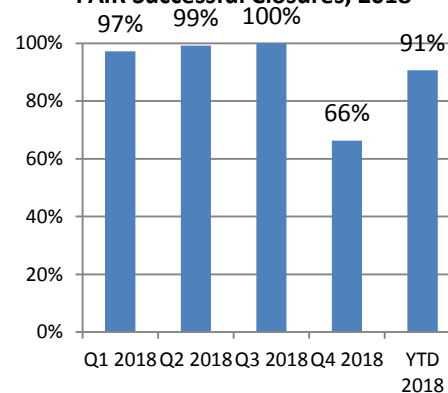
Successful Completion by Service Type, 2018



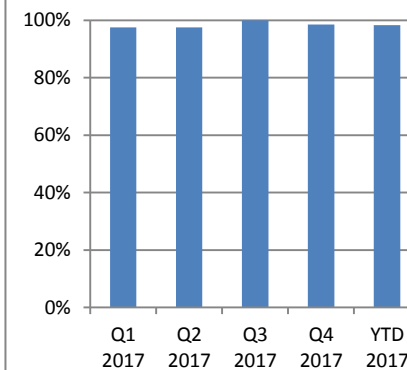
FAIR Successful Completion by Service Type, 2017



FAIR Successful Closures, 2018



FAIR Successful Closures, 2017



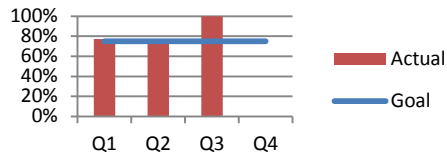
Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<p><b>FUNCTIONAL FAMILY THERAPY (FFT)</b> provides counseling for youth ages 10 to 18 and their families using this evidence-based model program. Services are generally provided in homes.</p> <p><b>Glossary:</b>  <b>COM</b> = Client Outcome Measures, proprietary FFT assessment that looks at family functioning  <b>SDQ</b> = Strengths &amp; Difficulties Questionnaire, assessment that measures risk for conduct problems. FFT program discontinued use in 2014.  <b>SFSS</b> = Symptoms and Functioning Severity Scale is designed to provide feedback on the youth's level of severity in regard to symptoms and functioning. Replaced SDQ in 2014.</p>	<p>75% of the cases that begin will close in the generalization phase.</p> <p>75% of adolescents and parents will report an improved relationship as measured by an overall improvement on the COM.</p> <ul style="list-style-type: none"> <li>• 70% adolescents</li> <li>• 80% parents</li> </ul> <p>65% adolescents and parents will report improvement in communication as measured by the COM</p> <ul style="list-style-type: none"> <li>• 65% adolescents</li> <li>• 65% parents</li> </ul> <p>At the end of treatment 70% of youth identified as "severe" on SFSS will report reduced severity at case closing.</p>	<p><u>REGULAR FFT</u>  57% (40/70) of cases that began closed in generalization phase.</p> <p><b>Due to changes in FFT Assessment process required by Model Developer in Q4 2018, updated assessment data is not available.</b></p> <p>78% (41/65) of adolescents/parents reported improved relationship as measured by COM improvement.</p> <ul style="list-style-type: none"> <li>• 75% (24/32) adolescents</li> <li>• 82% (27/33) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 86% (30/35) adolescents/parents reported improvement in communication as measured by COM.</p> <ul style="list-style-type: none"> <li>• 89% (16/18) adolescents</li> <li>• 82% (14/17) parents</li> </ul> <p>46% (13/28) of youth rated themselves as (clinical range) "Severe" on SFSS at initial assessment. Of those, 100% (13/13) were no longer "Severe" at closing.</p> <p><u>ALL FFT (incl. Regular, FAIR and IOP)</u>  67% (68/112) of cases that began closed in generalization phase.</p> <p><b>Due to changes in FFT Assessment process required by Model Developer in Q4 2018, updated assessment data is not available.</b></p> <p>82% (86/105) adolescents/parents reported improved relationship, as measured by improvement on the COM.</p>	<p><u>REGULAR FFT</u>  68% (60/88) of cases that began closed in generalization phase. 72% (89/124) of adolescents/parents reported improved relationship as measured by COM improvement.</p> <ul style="list-style-type: none"> <li>• 80% (48/60) adolescents</li> <li>• 64% (41/64) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 54% (62/114) adolescents/parents reported improvement in communication as measured by COM.</p> <ul style="list-style-type: none"> <li>• 67% (37/55) adolescents</li> <li>• 42% (25/59) parents</li> </ul> <p>54% (31/57) of youth rated themselves as (clinical range) "Severe" on SFSS at initial assessment. Of those, 58% (18/31) were no longer "Severe" at closing (and 7 more improved, for a total of 81% who improved.)</p> <p><u>ALL FFT (incl. Regular, FAIR and IOP)</u>  66% (73/110) of cases that began closed in generalization phase. 75% (116/156) adolescents/parents reported improved relationship, as measured by improvement on the COM.</p> <ul style="list-style-type: none"> <li>• 81% (59/73) adolescents</li> <li>• 69% (57/83) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 56% (81/146) reported improvement as measured by COM.</p> <ul style="list-style-type: none"> <li>• 66% (45/68) adolescents</li> <li>• 46% (36/78) parents</li> </ul> <p>53% (37/70) of youth rated themselves as (clinical range) "Severe" on SFSS at initial assessment. Of those, 57% (21/37) were no</p>	<p><u>REGULAR FFT</u>  67% (75/112) of cases that began closed in generalization phase. 60% (94/158) adolescents/parents reported improved relationship as measured by COM improvement.</p> <ul style="list-style-type: none"> <li>• 50% (34/68) adolescents</li> <li>• 56% (45/80) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 53% (79/148) adolescents/parents reported improvement in communication as measured by COM.</p> <ul style="list-style-type: none"> <li>• 50% (34/68) adolescents</li> <li>• 56% (45/80) parents</li> </ul> <p>44% (33/75) of youth rated themselves as (clinical range) "Severe" on SFSS at initial assessment. Of those, 61% (20/33) were no longer "Severe" at closing, and 30% (8/33) more improved, for a total of 85% who improved.</p> <p><u>ALL FFT (incl. Regular, FAIR and IOP)</u>  70% (120/172) of cases that began closed in generalization phase. 67% (175/261) adolescents/parents reported improved relationship, as measured by improvement on the COM.</p> <ul style="list-style-type: none"> <li>• 67% (80/120) adolescents</li> <li>• 67% (95/141) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 59% (143/241) reported improvement as measured by COM.</p> <ul style="list-style-type: none"> <li>• 58% (65/113) adolescents</li> <li>• 61% (78/128) parents</li> </ul> <p>44% (53/120) of youth rated themselves as (clinical range) "Severe" on SFSS at initial assessment. Of those, 68% (36/53) were no</p>

		<ul style="list-style-type: none"> <li>• 81% (42/52) adolescents</li> <li>• 83% (44/53) parents</li> </ul> <p>Of adolescents/parents who identified communication as an issue on initial assessment, 91% (60/66) reported improvement as measured by COM.</p> <ul style="list-style-type: none"> <li>• 91% (30/33) adolescents</li> <li>• 91% (30/33) parents</li> </ul> <p>47% (23/49) of youth rated themselves as (clinical range) "Severe" on SFSS at initial assessment. Of those, 100% (23/23) were no longer "Severe" at closing.</p>	longer "Severe" at closing (and 8 more improved, for a total of 78% who improved.)	longer "Severe" at closing. 21% (11/53) more improved, for a total of 89% who improved.
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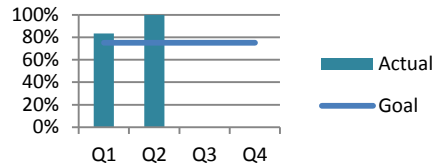
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<div>Generalization 2018 (Reg. FFT)</div> <table><thead><tr><th>Quarter</th><th>Actual (%)</th><th>Goal (%)</th></tr></thead><tbody><tr><td>Q1</td><td>48</td><td>75</td></tr><tr><td>Q2</td><td>85</td><td>75</td></tr><tr><td>Q3</td><td>70</td><td>75</td></tr><tr><td>Q4</td><td>45</td><td>75</td></tr></tbody></table>		Quarter	Actual (%)	Goal (%)	Q1	48	75	Q2	85	75	Q3	70	75	Q4	45	75	<div>Generalization 2018 (IOP FFT)</div> <table><thead><tr><th>Quarter</th><th>Actual (%)</th><th>Goal (%)</th></tr></thead><tbody><tr><td>Q1</td><td>60</td><td>75</td></tr><tr><td>Q2</td><td>75</td><td>75</td></tr><tr><td>Q3</td><td>75</td><td>75</td></tr><tr><td>Q4</td><td>65</td><td>75</td></tr></tbody></table>		Quarter	Actual (%)	Goal (%)	Q1	60	75	Q2	75	75	Q3	75	75	Q4	65	75	<div>Generalization 2018 - FAIR FFT</div> <table><thead><tr><th>Quarter</th><th>Actual (%)</th><th>Goal (%)</th></tr></thead><tbody><tr><td>Q1</td><td>50</td><td>75</td></tr><tr><td>Q2</td><td>65</td><td>75</td></tr><tr><td>Q3</td><td>70</td><td>75</td></tr><tr><td>Q4</td><td>50</td><td>75</td></tr></tbody></table>		Quarter	Actual (%)	Goal (%)	Q1	50	75	Q2	65	75	Q3	70	75	Q4	50	75	<div>Generalization 2018 - All FFT</div> <table><thead><tr><th>Category</th><th>Value (%)</th></tr></thead><tbody><tr><td>Goal</td><td>75</td></tr><tr><td>Actual</td><td>61</td></tr></tbody></table>		Category	Value (%)	Goal	75	Actual	61
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Q1	75	75																																																								
Q2	70	75																																																								
Q3	60	75																																																								
Q4	60	75																																																								
Quarter	Actual (%)	Goal (%)																																																								
Q1	100	75																																																								
Q2	50	75																																																								
Q3	40	75																																																								
Q4	0	75																																																								
Quarter	Actual (%)	Goal (%)																																																								
Q1	80	75																																																								
Q2	80	75																																																								
Q3	100	75																																																								
Q4	25	75																																																								
Category	Value (%)																																																									
Goal	75																																																									
Actual	66																																																									

## Improved Relationship

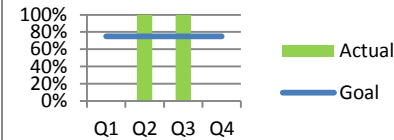
Improved Relationship (Reg. FFT) - 2018



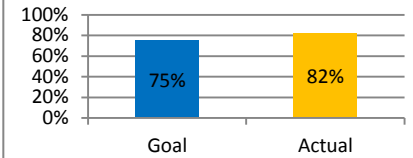
Improved Relationships - MOPS FFT - 2018



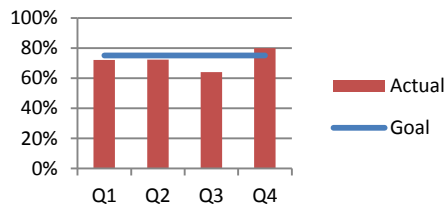
Improved Relationships YTD - FAIR FFT - 2018



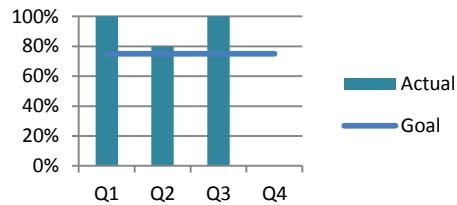
Improved Relationships YTD - All FFT - 2018



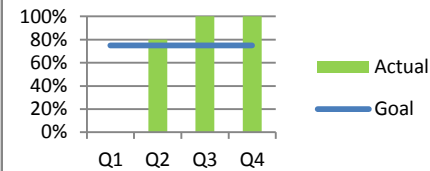
Improved Relationship (Reg. FFT - 2017)



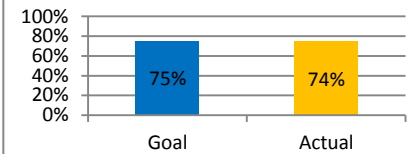
Improved Relationships - MOPS FFT - 2017



Improved Relationships - FAIR FFT, 2017

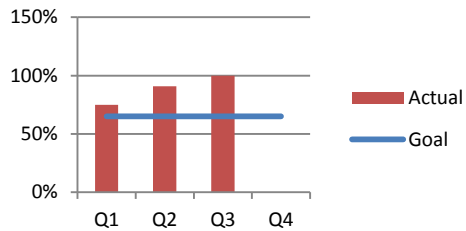


Improved Relationships YTD - All FFT - 2017

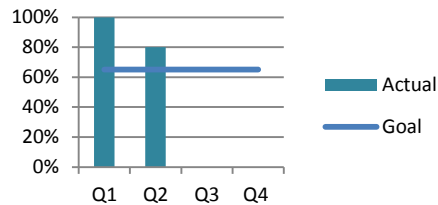


## Improved Communication

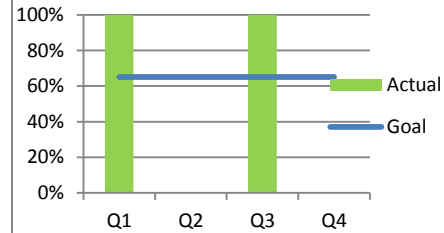
Improved Comm - Reg. FFT - 2018



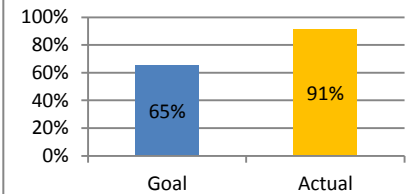
Improved Communication - MOPS FFT - 2018



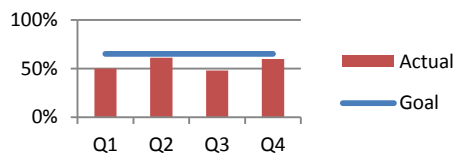
Improved Comm - FAIR FFT - 2018



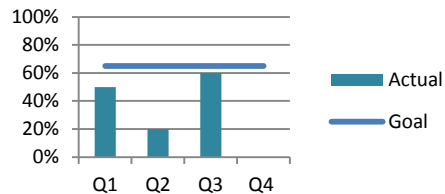
Improved Commun. Youth/Parent - 2018



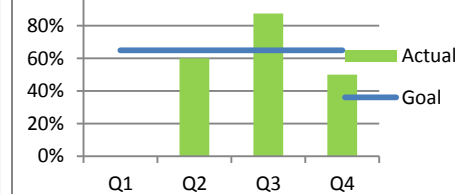
Improved Communication - Reg. FFT - 2017



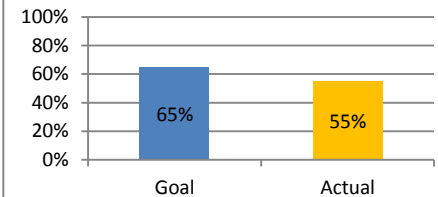
Improved Communication - IOP FFT



Improved Communication - FAIR FFT

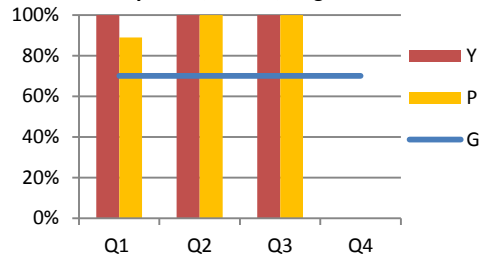


Improved Commun. Youth/Parent

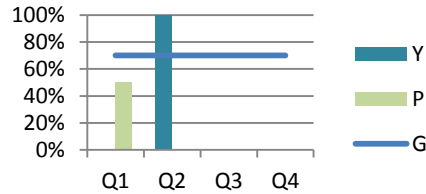


## Reduced Risk

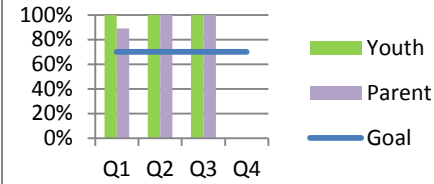
**Youth improve from "Severe" range, rated by Youth/ Parent, Reg. FFT 2018**



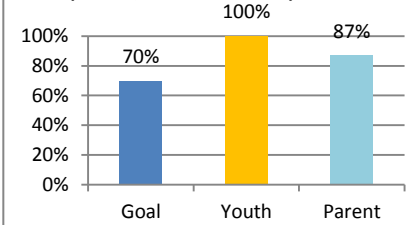
**Moved out of Clinical Range on SFSS, as reported by Youth/Parent - MOPS FFT - 2018**



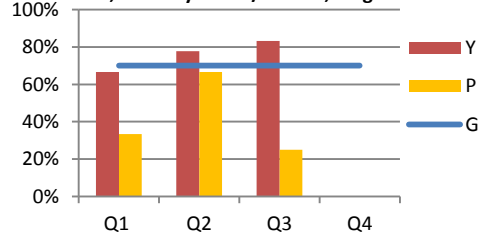
**Youth improve from "Severe" range on SFSS, as rated by Youth and Parent, FAIR FFT - 2018**



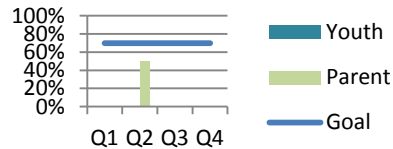
**Move out of Clinical Range on SFSS (Parent/Youth Measures) - All FFT**



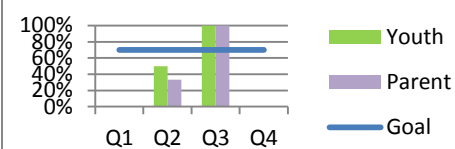
**Youth improve from "Severe" range on SFSS, rated by Youth/ Parent, Reg. FFT**



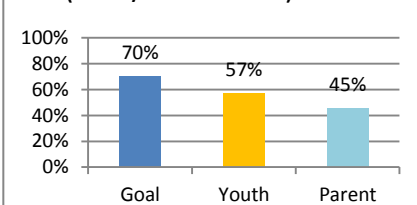
**Moved out of Clinical Range on SFSS, as reported by Youth/Parent - IOP FFT**



**Youth improve from "Severe" range on SFSS, as rated by Youth and Parent, FAIR FFT**

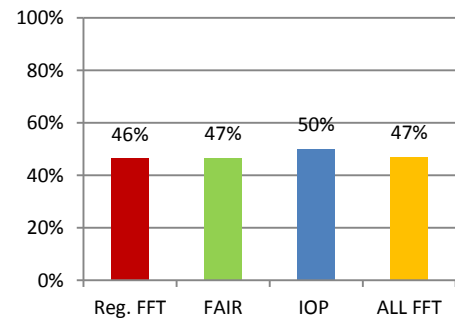


**Move out of Clinical Range on SFSS (Parent/Youth Measures) - All FFT**

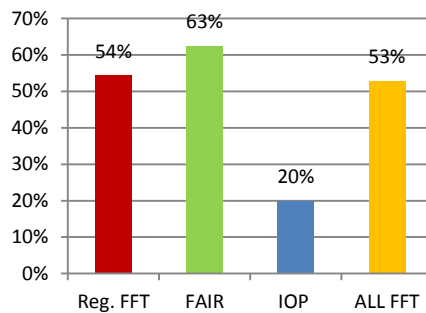


## Youth in Clinical Range by Self Assessment

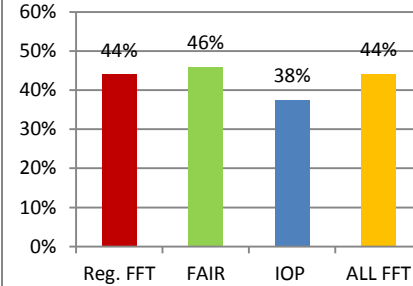
**% of youth in Clinical Range by Self-Assessment**



**% of youth in Clinical Range by Self-Assessment - 2017**



**% of youth in Clinical Range by Self-Assessment 2016**



## WORKPLACE

Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2016 FINAL
<b>JUST IN TIME CARE CORPORATE SERVICES (JITC)</b> is a comprehensive, national backup dependent care program provided as a corporate benefit. JITC links individuals with backup care options. Individuals can also choose their own backup care providers, including friends and family members. An employee subsidy helps offset the backup care costs.	<p>Corporate clients (employees using the service) indicate that they are satisfied with the services.</p> <p>Number of Work days saved</p> <p>Return on investment for corporate clients (annual measurement)</p>	<ul style="list-style-type: none"> <li>On a scale of 1-5, the overall rating for satisfaction is 4.8</li> <li>99% (262-265) indicated JITC met their needs.</li> <li>100% (261/262) indicated they were able to get to work because of JITC.</li> <li>100% (265/266) would use JITC again.</li> <li>7,800 work days saved by 742 unduplicated employees.</li> </ul> <p><i>* Note: Based on 31% response rate (201/654)</i></p>	<ul style="list-style-type: none"> <li>On a scale of 1-5, the overall rating for satisfaction is 4.8 (n=249)</li> <li>99% (247/248) indicated JITC met their needs.</li> <li>99% (245/248) indicated they were able to get to work because of JITC.</li> <li>100% (24/248) would use JITC again.</li> <li>7,497 work days saved by 718 unduplicated employees.</li> </ul> <p><i>* Note: Based on 33% response rate (249/755)</i></p>	<ul style="list-style-type: none"> <li>On a scale of 1-5, the overall rating for satisfaction is 4.8 (n=238)</li> <li>97% (232/238) indicated JITC met their needs.</li> <li>99% (234/236) indicated they were able to get to work because of JITC.</li> <li>100% (236/236) would use JITC again.</li> <li>8,725 work days saved by 847 unduplicated employees.</li> </ul> <p><i>* Note: Based on 33% response rate (238/718)</i></p>



## BRAIN SCIENCE TRAINING

Program	2018 Outcome Measures	2018 YTD	2017 FINAL	2015 FINAL
<b>Brain Science Training</b> is offered to various stakeholder groups to increase knowledge and understanding of the impact of toxic stress on the developing brain and to support resilience-building.	Persons trained increase their knowledge of ACEs, toxic stress, and resilience.	<p>Through Q4, CFF staff has provided training with follow-up surveys to nearly 100 stakeholders, including staff at Serviam Academy, Teach for America fellows, staff at Child Development Watch, and attendees at a conference sponsored by SOAR.</p> <p>Of those who completed a survey that assessed knowledge of key concepts both before and after the training on a scale of 1 (lowest) to 7 (highest), the average change was 1.7 points. 91% of participants said that playing the Brain Architecture Game helped deepen their understanding of the concepts, and 82% said they would like more professional development around trauma-sensitive approaches.</p>	<p>During 2017, we have provided training to more than 400 stakeholders, including teachers, behavioral health consultants, family crisis therapists, resource parents, Head Start parents, Jobs for Delaware Grads participants, and Big Brothers Big Sisters mentors.</p> <p>Of stakeholders who completed a survey that assessed knowledge of key concepts both before and after the training on a scale of 1 (lowest) to 7 (highest), the average change was 2.1 points. 96% of participants said that playing the Brain Architecture Game helped deepen their understanding of the concepts, and 85% said they would like more professional development around trauma-sensitive approaches.</p>	

### 2018 Toxic Stress Training Assessments

Category	Pre	Post
Trauma	5.0	6.5
ACEs	4.3	6.4
Toxic Stress & Behavior	4.9	6.4

### 2017 Toxic Stress Training Assessments

Category	Pre	Post
Trauma	4.4	6.2
ACEs	3.6	6.0
Toxic Stress & Behavior	4.1	6.2