



Partnership for Children Annual Analysis 2009 – 2010



Building a supportive community where children are developmentally healthy, raised in a nurturing family, provided basic living needs, and arrive at school ready to learn.



March 2011

We are pleased to present you with our 2009-10 Annual Analysis for the Charlottesville/Albemarle Partnership for Children.

The Partnership for Children is a collaboration of fourteen public and private agencies focused on building a supportive community where children are nurtured in healthy families and arrive at school ready to learn. Founded in 1999, our Partners have developed a comprehensive early childhood strategy that outlines our mission. Partner representatives from each of our agencies meet on a monthly basis to plan and monitor the early childhood services we provide. Our Data Management Workgroup collects data from the Partners annually and their analysis helps us to evaluate progress toward the shared goals in our mission. The Partnership is committed to continuous improvement of data collection and analysis to improve programming and coordination efforts. Data presented in this report reflects the Partner agencies' service provision and impact for 2009-10.

In FY11 the Partnership has been in transition with a new Coordinator and engaging in a formal strategic planning process. The Partners look forward to sharing the updates from this process in our next Annual Report.

Please feel free to contact Jessie Ray at (434) 220-KIDS or jray@cyfs.org for additional information or to schedule a presentation about our collaboration.

Sincerely,

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Chair, Partnership for Children

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Partner Agencies Serving Charlottesville/Albemarle:

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Community Involvement

In FY10, The Partnership for Children continued to reach out and work with various organizations in order to build new relationships and enhance agency connections. These networks facilitate opportunities for the PFC to increase awareness in the community about early childhood services, and help staff stay up to date on the latest activities and challenges in the community so we can better serve our children and families. This section will highlight four of those efforts.

1. Community Obesity Task Force

The Partnership for Children Coordinator has been participating on the Community Obesity Task Force (COTF), a local organization that seeks to prevent/reduce obesity in children and adults. Healthy children and families is part of the mission of the PFC, including being physically healthy. Behavior and habits in eating can be formed even in the early childhood years. The Partnership therefore has a vested interest in continued dialogue with the COTF to facilitate relationships and information sharing between their work and our agencies and clients. In 2009-2010, the Task Force used the Prevention Institute's Strategic Alliance Initiative's ENACT¹ tool to rate the Charlottesville/Albemarle area in a variety of categories related to food and wellness. One category is child care, and the Coordinator joined this session to discuss the strategies for improved nutrition and physical activity for children in child care. The COTF will finalize recommendations for all categories in the fall of 2010, and the Partnership Coordinator will continue to stay connected with this group.

2. Book Baskets

The Partnership also continued its work with the non-profit Book Baskets. They collect new and gently used books and distribute them to organizations working with children and families. They can also purchase some titles at a reduced rate and often take requests. The Family Support Workgroup brainstormed Book Requests (Wish Lists) from five different agencies: Arc of the Piedmont, Albemarle County Department of Social Services, Region Ten, Monticello Area Community Action Agency, and Jefferson Area CHIP. Book Baskets ordered a total of 392 books, and the PFC purchased 130 books, for a total of 522 books, in English and Spanish, that were distributed between the five agencies in Spring 2010. These books support the early literacy goals of the Partner agencies and offer parents opportunities to spend time with their children.

3. Partnership Orientation

The Public Awareness workgroup piloted Partnership Orientations for agency staff in 2008, and the PFC continued those orientation sessions in 09-10. The purpose of this orientation was:

- To promote awareness about who the Partnership is and what it does;
- To improve and increase access to interagency referrals;
- Thereby improving our services to the community.

¹ <http://eatbettermovemore.org/sa/enact/members/index.php>

The orientation took place over three dates in Spring 2010, covering specific topics of early childhood work. These sessions included: *Introduction & Family Support*, *Child Care & Community Resources*, and *School Readiness & Wrap Up*. A total of 25 different individuals registered for the sessions, representing 10 different agencies. We had a wide range of participants, from human service providers who have only worked in the community a short time (less than 6 months) to many with over 3 years of experience. Survey results showed that all participants “agreed” or “strongly agreed” that they learned something valuable and would recommend this orientation as part of training for new staff members.

4. Creciendo Juntos: Plenary Session

Creciendo Juntos (CJ) is “a network of organizations and people working to support and strengthen the Charlottesville regional community through the integration and development of its Latino/Hispanic members.”² As part of their mission they hold plenary sessions monthly between September and June. In June 2010, the Partnership for Children assisted CJ in the planning and facilitation of its plenary session on Latino Early Childhood Development. The purpose of the plenary was:

- To educate participants about local Latino children 0-5 years old and their families
- To increase awareness about the challenges faced by Latino families with young children and organizations who serve those families
- To provide opportunities for networking and collaboration and identify agencies and resources that serve this population

Judy Smith, then-chair of the PFC, facilitated the plenary session, and Lisa Godwin, then Coordinator of the PFC, assisted with planning, organizing resources, and scheduling speakers. This was a great way for the Partnership to be more visible in the community and connect with more agencies and their providers.

Moving Forward

The Partnership for Children continues to improve its working model for increased effectiveness in service delivery for early childhood work. Last year, the PFC highlighted projects from our workgroups regarding early care and education and pregnancy outcomes. This section includes updates from those groups, as well specific updates from the Smart Beginnings initiative.

1. Social Emotional Pilot

Children, Youth & Family Services (CYFS), on behalf of the Partnership, applied for and received a grant for a pilot initiative on children’s social and emotional development. This pilot will assist in the goal of improving quality child care in the area through increasing awareness and accessibility to resources on social and emotional development. Social and

² <http://www.cj-network.org/intro.html>

emotional development is essential in preparing children to be ready to learn and developmentally healthy, two Partnership target areas.

- The purpose of the Pilot Communities for Infant and Toddler Social, Emotional, and Behavioral Development initiative is to enhance the social, emotional, and behavioral well-being of infants and toddlers in child care settings in the pilot communities and provide an approach and activities that can be replicated in other local communities.

The goals of the initiative are to:

- Improve the access of child care providers to community resources to support the healthy social, emotional, and behavioral development of infants and toddlers, especially those at risk; and
 - Increase the capacity and competence of child care providers to recognize and address the social, emotional, and behavioral development of infants and toddlers in their care.
- Partners convened include: CYFS, the Arc of the Piedmont's Infant Development Project, Region Ten, United Way, UVA (a doctoral student through the Curry School), and ACDSS.
 - The group is looking at several service deliveries including training child care providers and mental health professionals in the community, providing developmental screenings for children 0-36 months, and providing referral services when developmental issues arise.

This grant was awarded in March 2010 and will be implemented through FY11.

2. Improving Pregnancy Outcomes

Prenatal care and infant mortality have been concerns in our community for several years. In 2007 the PFC organized a prenatal care workgroup, and in subsequent years the group evolved in membership and focus. The community health assessment and strategic planning process, *Mobilizing for Action through Planning and Partnerships*, or MAPP, was facilitated by the Charlottesville/Albemarle Health Department and completed in 2008. Findings confirmed the need to address high infant mortality and its attendant racial disparities. In response, the Improving Pregnancy Outcomes (IPO) group was formed led by the Health Department. The IPO workgroup compiled and published the Charlottesville and Albemarle "Pregnancy and Parenting Resource Guide" in April, 2010. This booklet was distributed to over 70 individuals in public and private agencies, as well as every primary care physician in Charlottesville and Albemarle; it is also available on-line at ccfinfo.org. The workgroup continues to work on improving access to care, prompting changes within the UVA OB/GYN clinic to reduce wait time for appointments. Influenced by 2009 IPO focus groups on factors that impact pregnancy outcome, the 2010 Charlottesville Health Summit focused on substance abuse and pregnancy. During FY 11, the IPO workgroup is focusing on outreach/education.

3. Brown Bag information sessions

The Partnership for Children continued hosting brown bag sessions for area service providers and other professionals, as well as parents. Between July 2009 and March 2010 the Brown Bag sessions totaled 98 attendees, including repeat individuals. The events averaged 16 participants per session. The sessions include networking time for professionals and a presentation from an area “expert”. Topics ranged from Child Safety and Injury Prevention to Crisis Management. These trainings can count towards licensing requirements for child care providers as well.

4. Other highlights

Other highlights from the last year in the Partnership include a follow up from the discussion surrounding Part B and C referrals. In FY09, this referral process was identified as needing more discussion and clarification for partner agencies. In the fall of 2009, the Partners participated in a series of presentations to describe the components of home visiting services, Part B and C, and universal screenings. Partners agreed to explore the possibility of universal screenings for families currently outside of the home visiting programs. As part of this follow up, the Home Visiting Collaborative partnered with Smart Beginnings to apply for and receive a grant from the Charlottesville Area Community Foundation in FY10 to increase screenings. Those screenings will be completed during FY11.

5. Early Care and Education: Update

Per the CCF Human Services planning process, the early care and education workgroup of the PFC created an action plan to expand programming and access to affordable early care and education. While several steps on the action plan were fairly straightforward, the majority of recommendations from the plan include high cost, intensive system changes. These often include changes that would need to be facilitated at the state and federal level regarding program requirements. The team will continue to look for creative and effective ways to meet current needs, but several initial items were completed in the last year.

- A map of child care center locations was created. The map was a joint effort between the Early Care group and the Albemarle County Information Technology department. The purpose was to use the map to promote joint trainings for staff at these centers, and identify areas without ready access to child care. PFC staff will revisit the map and work together with the action team to determine the best use of this information.
- A list of state trainings for child care providers was also created for the Spring of 2010. The workgroup will need to assess the best way to disseminate this information in the future.

- In cooperation with some faculty and students at the University of Virginia, a list of best practice resources and information was created; a presentation on nontraditional child care was also created.

6. Smart Beginnings: Update

A. Quality Rating Improvement System (QRIS)

The QRIS is one of the key components of the state Smart Beginnings initiative. CYFS is the local fiscal agent and programmatic lead for the QRIS, now called the Virginia Star Quality Initiative (VSQI). In the first year of the grant, FY09, staff was able to rate 11 centers. This past year, staff mentored those 11 centers to continue progress on their quarterly goals. Those centers will be re-rated in FY11. This year three more centers have been rated. Mini grants were distributed to seven centers for equipment and other materials to improve their rating. For instance, one classroom used the grant to purchase a portable sink so that an infant classroom had access to running water. There have been 110 hours of sponsored training for providers. This number does not include the QRIS mentor training hours spent in the centers. On-site mentor training hours totaled at least 175 hours. Rated centers serve over 1,000 children and include 33 classrooms. CYFS is the only rating agency in the Charlottesville/Albemarle area. Challenges for the coming year include improving participation from day home providers and unregulated providers. CYFS staff will continue working with Smart Beginnings and Partnership for Children to create public awareness opportunities and generate community support for participation in the rating.

B. Ready for Kindergarten Report

In the fall of 2009 Smart Beginnings released the Ready for Kindergarten! Report on the state of local school readiness. Many Partnership agencies were involved in collecting data and providing feedback for the report. The report covered several topics, including local data regarding funding investments, available services to children and families, and assessment and testing results of area children. Based on 07-08 data, the report detailed several important findings. Ninety-three percent of kindergarten children with early learning program experiences prior to kindergarten achieved benchmarks for language and literacy during the fall, whereas 72% of their peers without those programs achieved the benchmarks. Also of note: disadvantaged children with Pre-K experiences achieved the fall benchmarks in language and literacy 23% higher than their disadvantaged peers with no prior program experience. They also maintained higher levels of achievements by the end of kindergarten.³

The report also listed three key recommendations. Those recommendations are:

- 1) Increase the quality and accessibility of child care and family support services.
- 2) Improve the community's ability to measure local school readiness through enhanced data analysis and reporting.

³ <http://www.unitedwaytja.org/Downloads/SmartBeginnings/SchoolReadinessBook2009.pdf> pg 18

- 3) Strengthen collaborative partnerships among private and public entities, in order to enhance the efficiency of services and maximize resources.

Targets under these recommendations include: increasing centers being rated under QRIS, encouraging transition to K programs, increasing family support services, expand readiness indicators and pre-K data collection, increasing communication and curriculum alignment, and reaching out to additional businesses and agencies.⁴ Smart Beginnings and the Partnership for Children will be working together to determine how to accomplish these goals and other next steps for the community.

Formal conversations regarding “merging” the leadership of the Partnership for Children and Smart Beginnings also took place in FY10. While ultimately the two groups decided not to unite in any organizational/structural ways, they will continue to work closely together to avoid duplicated efforts.

Next Steps

At the end of FY10 and beginning of FY11, the Partnership for Children conducted its annual self-assessment survey. The Partnership hosted a facilitated discussion on the results and agreed to perform another survey in the fall of 2010. Early in FY11 the Partnership Coordinator position became open and the workgroups were put on hold until a new Coordinator could be hired. At that time, the Partnership also agreed to engage in a formal strategic planning process. The PFC hopes to re-cast its vision and create specific goals and action steps to move the early childhood services system forward for the next five years. The PFC plans to employ an outside consultant to assist with this process. Those efforts and results will be detailed in the FY11 Annual Report.

⁴ <http://www.unitedwaytja.org/Downloads/SmartBeginnings/SchoolReadinessBook2009.pdf> pg 18-19

Appendix A: Partner Agencies

Our Partner agencies are listed below with acronyms you will see used in the data tables of the Appendices.

Albemarle County Department of Social Services (ACDSS)
Albemarle County Public Schools (ACPS)
The Arc of the Piedmont (ARC)
C/A Commission on Children & Families (CCF)
Charlottesville City Schools (CCS)
Charlottesville Department of Social Services (CDSS)
Charlottesville Redevelopment & Housing Authority (CRHA)
Children, Youth & Family Services, Inc. (CYFS)
Jefferson Area CHIP (CHIP)
Monticello Area Community Action Agency (MACAA)
Region Ten Community Services Board (REGION)
Thomas Jefferson Health District (TJHD)
United Way–Thomas Jefferson Area (UNITED)
Virginia Cooperative Extension (VA COOP EXT)

APPENDIX B- Outcome Data

Partnership Outcomes	Agency Indicators that Support Partnership Outcome	Agency's Program	Agency Results			
	DEVELOPMENTALLY HEALTHY		2006-07	2007-08	2008-09	2009-10
Consistent and Appropriate Prenatal Care	Once enrolled in the program, client will keep 85% of their recommended prenatal care visits.	CHIP	89% (89)	79% (61)	85% (68/81)	96% (53/56)
		CYFS Healthy Families/Family Partners ¹	83% (6)	88% (8)	80% (4/5)	65% (11/16)
Table 1						
NOTES FOR TABLE 1						
*CYFS Benchmark 2004-05: (prior to 36 weeks) kept all prenatal appointments at these weeks: 12, 16, 20, 24, 28, 30, 32, 34, 36, 37, 38, 39, 40.						
Consistent Health Care	Enrolled children will have up-to-date immunizations. Appropriate coverage defined by most current national Recommended Childhood Immunization Schedule per CDC, ACIP, AAP, AAFP. ¹	IMACAA -- Head Start	100% (213)	100% (213)	100% (213)	99% (211)
		CHIP ² CYFS Healthy Families/Family Partners	98% (554)	93% (474/512)	96% (521/544)	91% (503/556)
Table 2	Enrolled children will have up-to-date well child care.	Charlottesville/Albemarle Health Department ³	85% (79)	88% (99/113)	74% (70/94)	80% (22/27)
		Arc of the Piedmont -- Infant Development Project ⁴	New Indicator	New Indicator	95% (1454/1529)	94% (1264/1341)
Table 2						
NOTES FOR TABLE 2						
*Data is on various age groups ² CHIP immunization Schedule per ACIP in 2006-07. ³ Health Department -Percent of children entering public school who are adequately immunized as self-reported to the Health Department by public schools. ⁴ As measured by parent report.						
Table 2						
NOTES FOR TABLE 2						
*Data is on various age groups ² CHIP immunization Schedule per ACIP in 2006-07. ³ Health Department -Percent of children entering public school who are adequately immunized as self-reported to the Health Department by public schools. ⁴ As measured by parent report.						

Partnership Outcomes	Agency Indicators that Support Partnership Outcome	Agency's Program	Agency Results				
			2006-07	2007-08	2008-09	2009-10	
Developmentally on Target Table 3	DEVELOPMENTALLY HEALTHY						
	Enrolled children are making progress toward specific developmental goals, as outlined in an individualized family service plan.	Arc of the Piedmont -- Infant Development Project	100% (48)	100% (67)	100% (68/68)	100% (63/63)	
	Enrolled children will be typically developing on the Ages and Stages Questionnaire.	CHIP CYFS -- Healthy Families/Family Partners	88% (432/490)	78% (282/362)	87% (311/356)	88% (285/324)	
		Arc of the Piedmont -- Infant Development Project	87% (31/36)	85% (33/39)	90% (36/39)	87% (36/41)	
		Arc of the Piedmont -- Infant Development Project	72% (21/29)	75% (33/44)	76% (29/38)	81% (51/63)	
	Enrolled children will receive service coordination to coordinate early intervention (Part C IDEA) services, community and health services.	Infant & Toddler Connection	100% (224)	100% (271)	100% (253)	100% (262)	
	At least 2% of the birth to three population will receive early intervention services through the Infant and Toddler Connection of the Blue Ridge	Infant & Toddler Connection	3%	4%	3%	4%	
	Children demonstrate social readiness.	ACDSS- Bright Stars ¹ CCS -4 year olds ² CYFS - STAR Kids ³ CYFS -- Play Partners ⁴ MACAA -- Head Start ⁵	Data not available 98% (136) 83% (163) 100% (22) 94% (109)	Data not available 85% (123) 86% (155) 95% (81) 96% (129)	85% 90% 80% (152) 79% (74) 92% (118)	88% 98% (170) 79% (166) 79% (62) 90% (137)	
	NOTES FOR TABLE 3						
	¹ Measured in 2005-06 by progressing one developmental stage on the 'Child Observations Record'; a new data collection method was being piloted in 2006-08 therefore data was not available. Beginning in 2008-09 the measurement tool is the Virginia Foundation Blocks for Early Learning; Personal and Social Development. ² Measured by Spring DECA scores in attachment, self control and initiative in the typical or strength range. ³ Measured by meeting or exceeding curriculum goal for social and emotional development by May of the year data is reported. The Star Kids Program operates in many preschool settings in the community so the numbers of children reported might be duplicative. ⁴ Measured by survey of adults who report children improve their ability to sit and attend while being read to, follow directions and stay focused on a task. ⁵ Measure reports the percent and number of Head Start Children entering kindergarten who can use complex sentences to express ideas and feelings.						
Access to appropriate and good nutrition Table 4	Infants, children and pregnant women access WIC.	CHIP ¹	89% (521)	91% (526/579)	93% (505/544)	96% (533/556)	
	Enrolled families will show improved nutrition behavior.	Virginia Coop Ext-- Healthy Weights for Healthy Kids ²	Agency did not report	94% (307/327)	92% (923/1001)	73% (138/165)	
NOTES FOR TABLE 4							
¹ CHIP's goal is 80%. ² In 2005-06 the measure reflects numbers from the Healthy Weights for Healthy Kids program where 116 were enrolled and 46 graduated who showed improvement in one or more nutrition practices, in 2007-08 and 2008-09, the measure reflects the number of graduated clients out of the total enrolled.							

Partnership Outcomes	Agency Indicators that Support Partnership Outcome	Agency's Program	Agency Results			
			2006-07	2007-08	2008-09	2009-10
Children Reach or Exceed Benchmarks in Early Literacy and Learning	READY TO LEARN					
	Percent of children who reach or exceed literacy benchmarks in preschool.	ACDSS -- Bright Stars ¹	76% (71)	75%	68% (89/131)	80%
		CCS -4 year olds ¹	85% (121)	91%	92% (130/142)	93% (135)
		MACAA -- Head Start ²	Agency did not report	56%(126)	80%(118/147)	82% (108)
	Percent of children who reach or exceed literacy benchmarks in kindergarten.	Albemarle County Public Schools ³	87% (867)	90% (830)	94% (860/915)	90%
	Charlottesville City Schools	No data for this indicator.	90% (293)	91% (286/313)	91% (282)	
	Children's desire to be read to increases.	CYFS -- Play Partners ⁴	92% (59)	88% (70)	86% (80/93)	83% (65)
		MACAA Head Start ⁵	100% (213)	100% (213)	100% (213/213)	100% (213)
NOTES FOR TABLE 5						
¹ PreK PALS is the measurement tool used. ² Prior measure used in 2005-06 was Creative Curriculum; in 2006 MACAA did not administer the PALS PreK; and in 2007-08 MACAA began using the PALS tool. The prior measure (Creative Curriculum) included results for both 3 and 4 year olds while the new, current measure (PALS) is used with only 4 year olds. Most recent number includes children with IEPs and ESL. ³ Measurement used PALS; and number of children for at least six months who meet or exceed the Pals benchmark. ⁴ Measured by survey of adults who report children learn and use new vocabulary and increase their desire to be read to; ⁵ Measured by Creative Curriculum: Enjoys and values reading. ⁶ Measured by adults reporting an increase in the vocabulary of children ages 2 years and above who participated in the program.						

Partnership Outcomes	Agency Indicators that Support Partnership Outcome	Agency's Program	Agency Results			
			2006-07	2007-08	2008-09	2009-10
Children Have Access to Quality Child Care and/or Preschool	READY TO LEARN					
	Enrolled local providers have at least Level One on a Quality Rating Scale.	CYFS -- Child Care Quality ¹	<i>New Indicator 07-08</i>	100% (17)	80% (12/15)	100% (22)
	Parents express satisfaction with the resource and referral services to quality child care.	CYFS -- Child Care Quality ²	93%(79)	92% (71)	73% (11/15)	88% (14)
	Infants and preschool children have a single child care provider for at least one year after starting with the program.	United Way - Child Care Scholarships	91% (84)	87% (58)	94% (63)	92% (61)
	Referred children will be enrolled in preschool programs.	CHIP	66% (56)	79% (43)	70% (54/77)	61% (54/89)
	Providers offer a variety of enrichment activities.	CYFS -- Healthy Families/Family Partners	60%(5)	100% (9)	43% (3/7)	45% (5/11)
		CYFS -- Play Partners ³	New Indicator 2008-09	New Indicator 2008-09	100% (9)	88% (7)
NOTES FOR TABLE 6						
¹ The Quality Rating Improvement System (QRIS) used at CYFS is the Seal of Quality Child Care for family care providers, and the Virginia Star Quality Initiative for all other providers; measurements include having a safe nurturing environment, diverse developmentally age appropriate experiences and materials, and positive discipline techniques. ² This number is based on the amount of satisfaction surveys returned. ³ Measured by providers who report an increase in their use of literacy-based enrichment activities with the children in their care.						
Parents are involved in the child's education	Parents attend at least 1 school function (other than conferences) during the school year.	ACDSS -- Bright Stars	91% (103)	88%	92.65%	88%
		CCS -- 4 year olds	97% (140)	93% (135)	69%	89% (165)
	Parents meet with teachers at least 2 times annually.	MACAA -- Head Start	<i>New Indicator 07-08</i>	100% (213)	100% (213)	100% (213)
		ACDSS -- Bright Stars	98%	90%	71.82%	91%
		CCS -- Preschool 4 Year Old Program	99% (140)	95% (138)	85%	94% (175)
NOTES FOR TABLE 7						

Partnership Outcomes	Agency Indicators that Support Partnership Outcome	Agency's Program	2006-07	2007-08	2008-09	2009-10
Effective Parent Child Relationships Table 8	RAISED IN NURTURING FAMILIES					
	Children enrolled at least one year show appropriate parent-child relationship as measured by two subscales on the HOME scale.	CHIP	74% (171)	67% (69)	65% (85/130)	88% (533/556)
	Parents show increased parenting knowledge.	CYFS -- Healthy Families/Family Partners ¹	100% (18)	88% (31)	78% (21/27)	100% (14)
		Arc of the Piedmont -- Infant Development Project ²	100% (20)	100%	100%	100%
		CYFS -- Family Connections ³	SES 93% (28) STY 92% (23) SW 98% (212)	SES 97% (43) STY 98% (40) SW 97% (250)	SES 95% (40) STY 96% (23) SW 97% (116)	SES 99% (34) STY 97% (23) SW 99% (92)
		Region Ten -- Strengthening Families Program ⁴	Data not available	8%	100% (8)	100%

NOTES FOR TABLE 8

¹CYFS, in 2005-06 measured improved responsiveness, and improved attentiveness as separate factors from the inventory measured by the HOME scale. In 2006-07 and 2007-08 a combined measure reflecting a broad, overall improvement was used. ²The Arc's Measure indicates parents with disability who apply parenting knowledge. ³CYFS results are from three parenting classes: SES=Six Easy Steps; STY=Surviving the Teen Years; SW=Saturday Workshops. ⁴Region Ten Strengthening Families Program measure is based on parent report in a retro post test. Parents rate on six different scales: positive parenting, parental involvement, SFP parenting skills, communication, parental supervision, and parenting efficacy. ⁵VA Coop Ext measure is of parents who learned how to keep their children out of the middle of conflicts.

Children are in safe and stable families Table 9	Children ages 0-6 are not abused or neglected as indicated by reports to Child Protective Services.	ACDSS - Family Support ¹	87%	89%	93%	96%
		Arc of the Piedmont -- Infant Development Project	98%	100% (67)	80% (12/15)	89% (56/63)
		CYFS -- Healthy Families/Family Partners	99%	100%	73% (11/15)	100%
		CHIP	97% (306)	95% (333)	93% (14/15)	97% (533/556)
		ACDSS -Family Support ²	99%	99%	100%	100%
		CDSS -- Foster Care Prevention ³	81.4% (83)	81% (69)	91% (83/91)	92%
		ACDSS -Foster Care ⁴	87%	81%	45%	87%
		CDSS -- Foster Care ^{4,5}	53% (9)	44% (4)	50% (4/8)	0%
		ACDSS -Foster Care ^{4,6}	55% (6/11)	25%	14%	60%
		CDSS -- Adoption ^{4,6}	0% (0)	0% (0)	0% (0)	33%
		ACDSS ⁷	0% (0)	0% (0)	0% (0)	0%
		CDSS ^{7,8}	0% (0)	0% (0)	5% (1/18) ⁷	10%
ACDSS -- Foster Care	88% (45/54)	88% (37/42)	96%	92%		
CDSS -- Foster Care	89% (48)	78% (45)	89% (46)	90%		

NOTES FOR TABLE 9

¹ACDSS Family Support benchmark 90%. ²Children served by the Family Support Program are able to remain in their homes without out-of-home placement. ³CDSS benchmark is 80%; measure is of children identified as very high risk of entering foster care who did not enter foster care. ⁴Percentage based on federal goals. ⁵A much greater number of children have reunification as a goal. ⁶This goal is very challenging in the current court system. ⁷Benchmark is 6.1 as measured by "recurrence of maltreatment" ⁸Data is only available from the state for the second half of FY09.

Partnership Outcomes	Agency Indicators that Support Partnership Outcome	Agency's Program	Agency Results			
			2006-07	2007-08	2008-09	2009-10
PROVIDED BASIC LIVING NEEDS						
NOTES FOR TABLE 10						
Sufficient family income to meet child and family needs	Participants remain employed. ¹	ACDSS -VIEW ²	78%	75.06%	68.00%	73.00%
		CDSS -- VIEW ²	60% (130)	63% (97)	68% (127)	65% (108)
		United Way - Child Care Scholarships	95% (84)	92% (71)	96% (78)	95% (54)
Table 10	Parents receive pay increases.	United Way - Child Care Scholarships	11% (10)	8% (6)	6% (5)	6% (6)

NOTES FOR TABLE 11						
¹ Measure is 'are employed 3 months after first employment date. ² Benchmark for DSS is 85%. ³ In 2007-08 this measure break down was for 71 parents -- 19 (27%) under 1 year; 12 (17%) 13-24 months; 19 (27%) 25-36 months; 21 (30%) over 36 months. ⁴ Pay increase reported (eligibility requirement, verified with pay stubs).						
Culturally Responsible Services	Partner Agencies that require staff training in cultural proficiency.	All Partner Agencies*	82% (9)	92% (12)	80% (12/15)	71% (10/14)
		All Partner Agencies*	36% (4)	85% (11)	73% (11/15)	93% (13/14)
		All Partner Agencies*	73% (8)	85% (11)	93% (14/15)	93% (13/14)

NOTES FOR TABLE 12					
[*] Each Partner Agency is asked to fill out a brief survey on Culturally Responsible Services. The percentage and number are based on the total number of agencies who respond each year to the survey. In 2005-06, 14 of 15 Partner Agencies responded. In 2006-07, 11 of 15 Partner Agencies responded. In 2007-08, 13 of 15 Partner Agencies responded. In 2008-09 14 of 15 Partner Agencies responded. In 2009-10 14 of 14 Partner Agencies responded. The following 3 yes or no questions are used: 1. Do you require staff training in cultural diversity? 2. Do you have interpreter services available to LEP clients? 3. Are your programs accessible to individuals with cognitive, sensory and physical disabilities? (No if not providing for all disabilities). ^{**} Interpreter services is determined as access to interpreter services, even if they are not directly on-site. While it is impossible to have access to interpreters of every single language, if the majority of LEP clients could be served, the agency answered 'yes'.					