

**NORTH CAROLINA DEPARTMENT OF HEALTH & HUMAN SERVICES
DIVISION OF SOCIAL SERVICES**

**REQUEST FOR APPLICATION (RFA) # 900212FSRP
State Fiscal Year 2012-2015**

For eligible grantees to provide services to the North Carolina Division of Social Services to develop, operate, and/or expand community-based, family support and respite programs to reduce the risk of child abuse and neglect by promoting protective factors that strengthen and support families, through the:

NORTH CAROLINA FAMILY SUPPORT and RESPITE PROGRAM

RFA Release Date:	January 13, 2012
Letter of Intent:	January 20, 2012
Technical Assistance Webinar:	January 25, 2012
Deadline for Questions:	February 1, 2012
Deadline for Proposals:	February 29, 2012, at 5:00 p.m.
Return to (Mailing Address –USPS):	NC Division of Social Services Mail Service Center 2410 Raleigh, NC 27699-2410
Hand Delivery/Overnight Delivery: (i.e., Fed EX, UPS, DHL)	NC Division of Social Services 325 N. Salisbury Street Albemarle Building, Suite 725 Raleigh, NC 27603
Mailing Address (USPS):	NC Division of Social Services 325 N. Salisbury Street Mail Service Center 2410 Raleigh, NC 27699-2410
Attention/Questions:	Christina DiSalvo Program Consultant Office (919) 334-1150 christina.disalvo@dhhs.nc.gov
Submission Instructions:	Late Applications will not be accepted. Faxed Applications will not be accepted.

TABLE OF CONTENTS

I. General Information.....	3 - 7
Purpose of Request	3
Award Amount and Term.....	3
Eligibility	3
Letter of Intent	4
Technical Assistance Webinar.....	4
Number of Copies.....	4
Deadline.....	4-5
Disqualification Factors.....	5
Selection Process	5
Reporting	5
Program Monitoring	6
Required Background Checks	6
Required Training	7
Peer Review	7
Prevention Network Membership.....	7
 II. Governing Legislation and Funding Sources	 8 - 9
 III. Program Purpose and Requirements.....	 10 - 19
Principles of Family Support Practice	11
Parent Engagement and Leadership.....	11-12
Collaborative Community Partnerships	12
Levels of Prevention	12-13
Target Population	13-14
Positive Outcomes for Children and Families	14
Promoting Protective Factors	15
Evidence-Based, Evidence-informed Practice	15-18
Outcome Accountability and Evaluation.....	18-19
 IV. General Instructions & Format.....	 20-26
Basic Format.....	20
Cover Letter.....	20
Application Order	20-21
Scope of Work	21-25
Budget and Budget Narrative	25-26
 Appendices	
Appendix A: Application Checklist	27
Appendix B: Scoring Criteria	28-31
Appendix C: NC County Child Maltreatment Data	32-35
Appendix D: Sample Logic Model.....	36
Appendix E: Definitions	37-39
Appendix F: Required Documents & Reference Links.....	40-41

I. GENERAL INFORMATION

A. PURPOSE OF REQUEST

The North Carolina Department of Health and Human Services (NCDHHS), through the Division of Social Services (NCDSS), is seeking proposals from qualified responders to develop, operate and/or expand community-based, family support and respite programs to reduce the risk of child abuse and neglect by promoting protective factors that strengthen and support families. Responders will demonstrate the capacity to achieve positive outcomes for children and families in communities with high rates of child maltreatment and/or other risk indicators associated with the incidence of child maltreatment. The North Carolina Family Support and Respite program helps to advance the NCDHHS' vision: *All North Carolinians will enjoy optimal health and well-being.*

B. AWARD AMOUNT AND TERM

Family Support annual allocation is \$ 3,700,000.

- **80% of the funds** will be granted to those agencies implementing supported and well-supported programs.
- **20% of the funds** will be granted to those agencies implementing service models and activities that are promising practices or emerging/evidence informed activities.

Respite Services annual allocation is \$300,000 for 10 grants of \$30,000.00 each.

Respite and crisis care is short term care services provided in the temporary absence of the regular caregiver to children who are in danger of abuse or neglect, who have experienced child abuse or neglect, and/or who have disabilities, chronic or terminal illness. This care is provided within or outside the child's home and is intended to enable the family to stay together and to keep the children living at home and in the community.

For agencies proposing to deliver both Family Support and Respite programming, a separate program application shall be submitted for both programs.

The term of any resulting contract is anticipated to be for three years, from July 1, 2012 until June 30, 2015. Contract renewal from year to year is required and is based on availability of funding, grantee performance, and contractual compliance. No carry over of unexpended funds is allowed from one fiscal year to another.

Award amounts do not require a local match. All funds are distributed on a reimbursement after expenditure basis. Funds from this grant may not be used to supplant other funds.

C. ELIGIBILITY

Any tribal government, community-based, public or private nonprofit, tax-exempt organization (including faith-based), school system or local government agency that is duly incorporated and registered under North Carolina Statutes is eligible to apply. It is important that the proposed project does not overlap with existing programs in the county. Factors to take into account when considering program overlap are populations served, duplication of program sites, etc.

D. LETTER OF INTENT

All agencies considering applying for these funds must submit a letter of intent with signature, by email to Christina DiSalvo at christina.disalvo@dhhs.nc.gov. Agencies that do not submit a letter of intent will not be considered for funding and their application will be disqualified. Letter of intent is due by **January 20, 2012 by 5 pm** and shall include the following information:

- Legal name of the agency or organization
- The mailing address, phone number, and fax number of the agency or organization
- The name of the representative(s) who plan to participate in the technical assistance webinar
- A desire to respond to this RFA and for which program, Respite and/or Family Support.
- The name, title, and email address of the person who will coordinate the application submission.

Agencies that submit a Letter of Intent in response to this RFA will be able to submit questions regarding the RFA by **February 1, 2012** by 5:00 to Christina DiSalvo at christina.disalvo@dhhs.nc.gov. Please send questions as soon as possible for due consideration. Answers to all questions received will be emailed to agencies who submitted a Letter of Intent by **February 8, 2012**.

E. TECHNICAL ASSISTANCE WEBINAR

Details of a technical assistance webinar held on **January 25, 2012** will be provided to those eligible agencies who submit a letter of intent. Invitation to the technical assistance webinar will be via email. In order to be eligible for funding, a representative of the applicant agency is required to participate in this webinar.

Two subsequent webinars will be held regarding the logic model builder, protective factor framework, and implementation support for agencies proposing to deliver Circle of Parents, Strengthening Families Program, and/or the Incredible Years curricula. Participation in the subsequent webinars is not required, but is highly encouraged. Dates for these webinars will be sent via email.

F. NUMBER OF COPIES

Three original applications with all signature pages *signed in blue ink* and *one copy of the application* are required at the time of initial submission. *In addition, the entire application packet must be emailed before the deadline date and time, to christina.disalvo@dhhs.nc.gov.* An Acknowledgement of Receipt will be provided to all applicants with an identification number that will be noted on the acknowledgement. This number must be referenced in all subsequent communications with NCDSS concerning the application.

G. DEADLINE

The closing date for submission of applications is **February 29, 2012, at 5:00 p.m.** *Applications received after 5:00 p.m. will be classified as late and will not be considered for funding.* (Applicants should be aware that certain conditions influence the timely submission of applications, i.e., traffic congestions, available parking, highway construction, weather conditions, faulty driving directions, etc.) Applicants are cautioned to request a legible dated United States Postal Services postmark or receipt or to obtain a legibly dated receipt from a commercial carrier.

Applicants should allow adequate time (approximately seven days) for application packages to arrive at the Albemarle Building. *No faxed applications will be accepted.*

H. DISQUALIFICATION FACTORS

Any application that fails to satisfy the deadline requirements stated above will be deemed non-responsive and will not be considered for funding under this announcement. Additionally, any applicant that fails to comply with all application requirements and/or submits an incomplete application will not be considered for funding. Please use and include with your application the Application Checklist provided in the Appendix A. Agencies are also required to submit a Disqualification Acknowledgement Form, the link to which is located within Appendix F.

I. SELECTION PROCESS

All applications received before the declared deadline will be reviewed to ensure all necessary worksheets and documentation is complete and included in submitted applications. Incomplete applications will not be reviewed by the grant review committee. Nothing may be added to any application after it has been submitted. Eligible applications will then be forwarded to the grant review committee who will review, score and rank the applications. Points will be added or subtracted based on prior contract performance with NCDSS. Please refer to the Appendix B for the scoring criteria. Award notices will be sent via USPS mail by **April 30, 2012**. Communication via phone, e-mails and fax regarding award notices is prohibited.

If an applicant wishes to appeal a scoring or award decision, the applicant must send a cover letter on agency letterhead outlining the reasons for the appeal to:

Sherry S. Bradsher, Director
NC Division of Social Services
325 North Salisbury Street
Mail Service Center 2408
Raleigh, NC 27699-2408

J. REPORTING

If awarded funding, the following are required reporting for all agencies:

Monthly:

- Reimbursement Form 1571, by the 10th of each month. Agencies with a subcontract must include a monthly Form 1571 completed by the subcontractor.
- Entry of all services/activities in the NC Family Support Database.

Quarterly:

- Completed Performance Status Monitoring and Quarterly Reporting Tool.

Annually:

- End of Year Report
- NC State Auditors GS 143-6.2 Grant Compliance Report

K. PROGRAM MONITORING

Desk monitoring occurs on a monthly basis. Contract Administrators review the DSS 1571 III Administrative Cost Report for accurate, allowable and reasonable costs and the State Auditors' non-compliance list is reviewed to ensure all G.S. 143-6.2 reporting requirements are being fulfilled by the subrecipient. If applicable, monthly program reports or database entries are reviewed to ensure participants are enrolled and programming activities have been implemented. Ongoing telephone and e-mail monitoring is documented by the Contract Administrator when it pertains to possible contractual non-compliance issues.

During the first quarter of the contract year, subrecipients complete a Performance Status Monitoring Tool within 90 days of the contract start date. A conference call is conducted between the Contract Administrator and subrecipient administration/staff to review the subrecipient's report to ensure that required components of programming, accurate monthly reporting, and fiscal procedures are being implemented and baseline data is being compiled to fulfill the evaluation plan of the contract.

For announced on-site monitoring reviews, Contract Administrators send a formal written notification letter on NCDSS letterhead to the subrecipients no later than 30 days prior to the scheduled review date. A Site Review Report is completed at the end of the on-site monitoring review. The OMB Circular A-133 specifies fourteen areas of compliance monitoring, and if applicable to the program, are reviewed during the on-site review, in addition to the subrecipient's Conflict of Interest Policy which is included in the subrecipient's executed contract. Areas concerning programming, fiscal management, compliance requirements, personnel, safety, organizational capacity, subcontract services and evaluation are also reviewed to confirm contractual compliance during the on-site review.

Within 30 days of an on-site monitoring review with identified corrective action findings, the Contract Administrator will send a formal written corrective action findings letter to the subrecipient. If the subrecipient remains in non-compliance status, the contract may be terminated due to failure to meet the terms and conditions of the contract.

Subrecipients will be monitored at least once during a grant cycle according to an established schedule once baseline data is collected, unless other requirements for frequency take precedence.

K. REQUIRED BACKGROUND CHECKS

Applicant agencies shall document for all staff and volunteers having direct contact with children or families on an ongoing basis, completion of a national criminal history background check. This check should also include a check of the National Sex Offender Registry. Any prior felony convictions or other abnormalities must have written evidence of supervisory review and acknowledgement, which justifies employment. This documentation shall be kept within the volunteer or employee personnel file and will be subject to review during an on-site monitoring visit. Applicants should include this expense in the proposed budget, Section K.

L. REQUIRED TRAINING

The following training is required by Family Support and Respite agencies:

1. All direct service staff and program managers listed in the contract budget shall attend the *Connecting with Families: Family Support in Practice* six-day specialized curriculum designed for family support and family resource center workers. The training provides instruction in the skills necessary for working successfully with families in center-based programs, in support groups, and through home visiting. The training is interactive and skill-based. ***Staff are expected to attend this training within the first fiscal year of funding.***
2. Agencies shall have trained staff and/or facilitators in place prior to contract execution or shall demonstrate that staff is scheduled to be trained in their chosen evidence-based and/or evidence informed program within the first 6 months of contract execution.

NCDSS, in partnership with Prevent Child Abuse North Carolina, FRIENDS National Resource Center, and The Center for the Study of Social Policy will provide on-going training and technical assistance throughout the 3-year grant cycle.

As a part of Continuous Quality Improvement practice, agencies are expected to encourage on-going staff development and should be budgeted for accordingly. Some resources include, but are not limited to:

- NCSW Learn: A Learning Site for North Carolina's Human Services Professionals <https://www.ncswlearn.org/>
- The North Carolina Parenting Education Network <http://www.ncpen.org/>
- NC Family Development Credential for Workers <http://www.communityactionopportunities.org/ncfamilysupport.html>
- The North Carolina Collaborative Training Institute <http://www.nccti.org/>
- The National Child Traumatic Stress Network, Learning Center for Child and Adolescent Trauma <http://learn.nctsn.org/>

M. PEER REVIEW

Agencies will be required to participate in a peer review process once during the 3-year grant cycle. This process is meant to be used as a continuous quality improvement strategy to enhance service delivery and is not part of contract monitoring.

N. PREVENTION NETWORK MEMBERSHIP

The Prevention Network is an affiliation of agencies and individuals who care about North Carolina's children and families. Members are professionals and concerned citizens who work with families and children and who are committed to strengthening and supporting families. Members represent diverse fields such as early childhood, education, public health, mental health, child protection, medicine, domestic violence prevention, law, and family support. The Prevention Network provides members with access to training, resources and networking opportunities to help them strengthen their abilities to serve North Carolinians. All Family Support and Respite grantees will be provided with an annual Prevention Network membership scholarship.

II. GOVERNING LEGISLATION AND FUNDING SOURCES

The mission of NCDSS is to provide family centered services to children and families to achieve well being through ensuring self-sufficiency, support, safety and permanency. NCDSS is guided by

both federal and state legislation designed to protect children and strengthen safe, stable, nurturing families. As such, the following federal and state requirements govern the administration of the Family Support Program:

Adoption and Safe Families Act (ASFA) of 1997

On November 19, 1997, the President signed into law (P.L. 105-89) the Adoption and Safe Families Act of 1997, to improve the safety of children, to promote adoption and other permanent homes for children who need them, and to support families. ASFA recognized that innovative approaches are needed to achieve the goals of safety, permanency, and well-being and provided a funding mechanism allowing greater flexibility to develop community-based strategies to achieve positive results for families.

Promoting Safe and Stable Families Amendments (PSSF) of 2001

The purpose of this program is to enable States to develop and establish, or expand, and to operate coordinated programs of community-based family support services, family preservation services, time-limited family reunification services, and adoption promotion and support services to accomplish the following objectives:

- To prevent child maltreatment among families at risk through the provision of supportive family services.
- To assure children's safety within the home and preserve intact families in which children have been maltreated, when the family's problems can be addressed effectively.
- To address the problems of families whose children have been placed in foster care so that reunification may occur in a safe and stable manner in accordance with the Adoption and Safe Families Act of 1997.
- To support adoptive families by providing support services as necessary so that they can make a lifetime commitment to their children.

Community-Based Child Abuse Prevention (CBCAP)

This program provides funding to States to develop, operate, expand, and enhance community-based, prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect. The program was reauthorized, amended and renamed as part of the CAPTA amendments in 2003. The Child Abuse Prevention and Treatment Act (CAPTA) is one of the key pieces of legislation that guides child protection. CAPTA, in its original inception, was signed into law on January 31, 1974 (P.L. 93-247). It was reauthorized in 1978, 1984, 1988, 1992, 1996, and 2003, and with each reauthorization, amendments have been made to CAPTA that have expanded and refined the scope of the law. CAPTA was most recently reauthorized on December 20, 2010, by the CAPTA Reauthorization Act of 2010 (P.L. 111-320). To receive these funds, the Governor must designate a lead agency to receive the funds and implement the program. In North Carolina, the CBCAP state lead designee is NCDSS. Some of the core features of the program include:

- Federal, State, and private funds are blended and made available to community agencies for child abuse and neglect prevention activities and family support programs.
- An emphasis on promoting parent leadership and participation in the planning, implementation, and evaluation of prevention programs.
- Interagency collaborations with public and private agencies in the States to form a child abuse prevention network to promote greater coordination of resources.

- Funds are used to support programs such as voluntary home visiting programs, parenting programs, family resource centers, respite and crisis care, parent mutual support, and other family support programs.
- An emphasis on promoting the increased use and high quality implementation of evidence-based and evidence-informed programs and practices.
- A focus on the continuum of evaluation approaches which use both qualitative and quantitative methods to assess the effectiveness of the funded programs and activities.

III. PROGRAM PURPOSE AND REQUIREMENTS

The North Carolina Family Support and Respite Program strategically supports child abuse and neglect prevention efforts across a broad spectrum of strategies, based on research in the field of

prevention, and promotes current knowledge of evidence based, “best practice” in the prevention of child abuse and neglect.

Research confirms child abuse has a long-term impact on a child’s life and the entire community, harming both quality of life and prosperity. Children who experience abuse and/or severe neglect develop toxic levels of stress. If consistent, this high level of stress can damage the developing architecture of a child’s brain. These changes to a child’s brain caused by exposure to toxic stress can lead to significant behavioral changes.

In 2005, the Centers for Disease Control and Prevention and insurer Kaiser Permanente released the most comprehensive research to date on the impact of child abuse and neglect. This study, called the Adverse Childhood Experiences Study or ACE Study, surveyed 17,000 adults about their childhood experiences and compared them with their health histories. The research found that children who suffered severe adversity in childhood – violence, abject poverty, substance abuse in the home, child abuse and neglect – were far more likely to suffer long-term intellectual, behavioral, and physical and mental health problems.

Quality, child maltreatment prevention focused programming that strives to strengthen family protective factors offers great promise for improving a child’s overall well-being. *The North Carolina Family Support and Respite Program will support community-based programs to provide outreach, support and services to individuals and families identified as being at-risk of compromised health and safety to eliminate or reduce those risks by promoting protective factors that strengthen and support families.* Grants will be awarded throughout the state.

For agencies proposing to deliver both Family Support and Respite programming, a separate application shall be submitted for each program.

North Carolina Family Support and Respite Program applicants shall meet ***all*** of the following requirements to be eligible for funding (*a detailed description of each requirement is provided on the subsequent pages*):

1. Provide services based on the Principles of Family Support Practice.
2. Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
3. Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.
4. Family Support programs can be defined as either Primary or Secondary prevention services. Respite services can be defined as either Secondary or Tertiary prevention services.
5. Serve target populations most at risk of child abuse or neglect.
6. Are designed to achieve positive outcomes for children and families who participate voluntarily. “Participants” is inclusive of parents with children with disabilities, parents with disabilities, racial and ethnic minorities, and members of underserved and underrepresented groups.
7. Promote one or more of the five protective factors linked to lower incidence of child abuse and neglect.
8. Provide a service or implement a program that demonstrates an acceptable level of evidence-based or evidence informed practice.
9. Are able to demonstrate positive outcomes through the use of outcome accountability and evaluation tools.

1. Principles of Family Support Practice

Family Support is based on the premise that primary responsibility for the development and well-being of children lies within the family, and communities must support families as they raise their children. Family Support services include a broad array of activities designed to strengthen families, helping parents to raise their children successfully, become self-sufficient, and take an active role in their communities.

1. Staff and families work together in relationships based on equality and respect.
2. Staff enhances families' capacity to support the growth and development of all family members - adults, youth, and children.
3. Families are resources to their own members, to other families, to programs, and to communities.
4. Programs affirm and strengthen families' cultural, racial, and linguistic identities and enhance their ability to function in a multicultural society.
5. Programs are embedded in their communities and contribute to the community-building process.
6. Programs advocate with families for services and systems that are fair, responsive, and accountable to the families served.
7. Practitioners work with families to mobilize formal and informal resources to support family development.
8. Programs are flexible and continually responsive to emerging family and community issues.
9. Principles of family support are modeled in all program activities, including planning, governance, and administration.

2. Parent Engagement and Leadership

Developing strong relationships between parents and staff is an essential ingredient in the program's ability to connect with parents. When parents and other caregivers feel valued and supported in the context of a learning relationship, the likelihood of their taking responsibility for and making use of new information increases. ***Agencies must demonstrate*** how staff will work proactively with families who are isolated or seem most in need of encouragement and support, drawing them into the social networks and activities available. North Carolina Family Support and Respite grantees are expected to convey a clear message that parents and caregivers are an important and valued part of their children's lives and their community.

Agencies are also required to demonstrate how they will model the principles of family support, to include opportunities for parents and other caregivers to contribute to program planning, governance, and administration. Parents play an essential role in improving the quality of services and offer unique perspective as consumers. Meaningful involvement of families ensures the programming being delivered actually meets the community's needs. To encourage this, ***all grantees must develop an Advisory Committee or have a Board comprised of at least 1 to 2 parents.*** Agencies can utilize the 2012-2013 SFY to accomplish this requirement, but the application should clearly demonstrate how the agency plans to recruit and retain the parent leaders on the board or committee. These parents should only be serving in the role of parent. A person, who is a DSS representative and also a parent, for example, would not satisfy this requirement.

3. Collaborative Community Partnership

Preventing child abuse and neglect is not the responsibility of one agency. It is a community responsibility. Agencies must demonstrate that they are actively developing and participating in on-going collaborative relationships with community partners to link families with appropriate and timely resources and identify gaps and/or barriers to a family's ability to access services. ***Special consideration will be given to agencies coordinating with community partners by braiding resources.*** Examples of community partners are as follows:

- Parents/Caregivers
- Department of Social Services
- School system
- Juvenile justice system
- Health Department
- Mental Health Center
- Local Head Start /Early Head Start
- Child care center
- Partnership for Children
- Other Community agencies (i.e. - faith and civic organizations)

Applicants are also encouraged to discuss involvement with their local Community Child Protection Team (CCPT). Located in all 100 counties, the CCPTs meet to promote a community-wide approach to the problem of child abuse and neglect. The purpose of the CCPT includes identifying gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, and develop strategies to ameliorate child abuse and promote child well-being at a local and state level. Further information on local Community Child Protection Teams can be found at: <http://www.ncdhhs.gov/dss/ccpt/index.htm>

4. Levels of Prevention

The North Carolina Family Support Program ***shall only fund*** those applicants providing Primary and/or Secondary Child Abuse Prevention services. The goal being to provide services *prior* to the incidence of abuse and neglect.

Respite Programs may be considered a Secondary or Tertiary Child Abuse Prevention Service, depending on target population. All agencies proposing to provide Family Support and Respite programming, shall submit separate applications for each program.

Applicants shall be able to demonstrate how they plan to target and track clients served. Family Support agencies shall be able to demonstrate referrals are only accepted with a Primary or Secondary Prevention focus.

Levels of Prevention are defined as follows:

Primary Prevention activities are directed at the general population and attempt to stop maltreatment before it occurs. All members of the community have access to and may benefit from these services. Primary prevention activities with a universal focus seek to raise the awareness of the general public, service providers, and decision-makers about the scope and problems associated with child maltreatment. Universal approaches to primary prevention might include:

- Public service announcements that encourage positive parenting

- Parent education programs and support groups that focus on child development, age-appropriate expectations, and the roles and responsibilities of parenting
- Family support and family strengthening programs that enhance the ability of families to access existing services, and resources to support positive interactions among family members
- Public awareness campaigns that provide information on how and where to report suspected child abuse and neglect

Secondary Prevention activities with a high-risk focus are offered to populations that have one or more risk factors associated with child maltreatment, such as poverty, parental substance abuse, young parental age, parental mental health concerns, and parental or child disabilities. Programs may target services for communities or neighborhoods that have a high incidence of any or all of these risk factors. Approaches to prevention programs that focus on high-risk populations might include:

- Parent education programs located in high schools, focusing on teen parents, or those within substance abuse treatment programs for mothers and families with young children
- Parent support groups that help parents deal with their everyday stresses and meet the challenges and responsibilities of parenting
- Home visiting programs that provide support and assistance to expecting and new mothers in their homes
- Planned temporary relief for the primary caregiver of children with disabilities or chronic illness, to emergency respite or crisis care for children at risk of abuse or neglect. This includes respite and crisis care programs (often referred to as “crisis nurseries” or “crisis respite”)
- Family resource centers that offer information and referral services to families living in low-income neighborhoods

Tertiary prevention consists of activities targeted to families that have confirmed or unconfirmed child abuse and neglect reports. These families have already demonstrated the need for intervention, either with or without court supervision. *These are families that qualify for services under child welfare programs and are not a focus of the North Carolina Family Support Program, but may be served through Respite Programs targeting families involved in the child welfare system to enable the family to stay together and keep the children living at home and in the community.*

5. Target Populations Most At-Risk of Child Maltreatment

Research has identified several factors that contribute to the risk of child maltreatment. While not predictive, risk factors commonly identify common features of families, parents/caregivers, children and their environment where abuse or neglect most often occur. Agencies will need to demonstrate that they intend to **target one or more** of the following population(s) if they are providing secondary or tertiary (respite only) prevention programming:

- Families and children living in poverty
- Parents/caregivers abusing substances
- Young parents and/or parents of young children (0-5) (*ALL family members will be referred for appropriate services, if a need arises, including those children beyond the targeted age range of 0-5 years*).
- Single parents

- Families experiencing domestic violence
- Parents/caregivers and/or children with disabilities or mental illness
- Fathers, non-custodial parents, and parent companions
- Former adult victims of child abuse and neglect
- Unaccompanied homeless youth and families experiencing homelessness
- Tribal populations
- Military families

In addition, Family Support and Respite agencies, in compliance with the most recent CAPTA reauthorization, will be required to speak to outreach services to unaccompanied homeless youth and families experiencing homelessness with the goal of ensuring this population is aware, can access, and feels welcome to participate in child maltreatment prevention programming. The definition of homelessness is provided through the following link: <http://hudhre.info/>

Examples of outreach to unaccompanied homeless youth and families experiencing homelessness population includes, but is not limited to:

- Coordination with local youth homeless shelters.
- Outreach and resource information provided to schools, faith-based organizations, clinics, crisis nurseries, homeless shelters, and domestic violence shelter who may already be serving this population.
- Shared training between community-based agencies.
- Removing barriers that may prevent this population from accessing services.

6. Positive Outcomes for Children and Families

Agencies must demonstrate the capacity to achieve positive outcomes for children and families who participate voluntarily in their programs.

The North Carolina Family Support and Respite Program carries out its mission to prevent child abuse and neglect through a spectrum of prevention efforts that include support of community-based programs that provide specialized outreach along with targeted services to children and families at risk of child maltreatment. Community-based child abuse prevention programs utilize a variety of intensive and specialized strategies in their work with children and families. Regardless of the approach, Family Support and Respite funded agencies are *collectively* accountable for achieving the following shared vision for families:

Families have enhanced capacity to provide for their children’s educational, physical, and emotional needs and children have opportunities for healthy social and emotional development.

7. Promoting Protective Factors

NCDSS is committed to achieving safety, permanency and well-being for North Carolina’s children and their families. Previous efforts to accomplish this have focused on the identification of family risk factors and deficiencies; however, families have been reluctant to participate in activities that label them “at-risk” for abusing or neglecting their children. Research and initiatives

suggest that a Strengthening Families Framework that identifies protective factors can significantly reduce incidences of childhood maltreatment and trauma. The Strengthening Families Framework is an intentional focus on family development and optimal child development that identifies five protective factors that are relevant for the continuum of child welfare services.

North Carolina Family Support and Respite agencies *shall measure outcomes for 1-2* of the following five protective factors.

- **Parental Resilience**

A parent's ability to effectively cope with the various challenges of parenting and everyday life and their ability to overcome life's challenges. Examples include program activities that help caregivers establish relationships with friends, family, and professionals that provide on-going encouragement and knowledge of accessible community resources.

- **Social Connections**

Positive relationships with friends, family members, neighbors, and others who can provide concrete and emotional support to parents and caregivers. Examples of programming would strengthen informal and formal support mechanisms for families.

- **Knowledge of Parenting and Child Development**

Accurate information about raising children and appropriate expectations for their behavior. Examples would be parenting education through parent support groups, facility based education classes, or home visitation.

- **Concrete Support in Times of Need**

Support and services within the community which can include financial, transportation, and food assistance, job training, and/or mental health services. An example of programming would be providing immediate and accessible resources or support to families in crisis.

- **Children's Social and Emotional Development**

A child's ability to effectively interact with others positively and articulate their feelings. An example of programming would be providing children and caregivers a safe and nurturing place to "practice" normal roles and behaviors, strengthening a positive parent-child relationship.

The Strengthening Families Framework identifies seven key strategies that exemplary programs use in their work to build protective factors with families. While the strategies themselves are consistent across many different kinds of programs, the way in which a program implements the strategies may vary. To find out more information on the seven strategies please utilize the following link:

<http://www.cssp.org/reform/strengthening-families/basic-one-pagers/Strengthening-Families-for-Practitioners.pdf>

8. Evidence Based and Evidence-Informed Practice

Family Support Programs

Family Support agencies *must provide* a service or implement a program that demonstrates an acceptable level of evidence-based or evidence-informed practice. Federal CBCAP funding guidelines require increasing support for evidence-based evidence-informed child abuse prevention programs and practices.

Please visit the FRIENDS National Resource Center for Community Based Child Abuse Prevention website at <http://friendsnrc.org/cbcap-priority-areas/evidence-base-practice-in-cbcap/evidence-based-program-directory> for a comprehensive listing and description of EB/EIP programs. The categories are: Emerging/Evidence Informed, Promising, Supported, and Well-

Supported. Definitions of each category are clearly defined and are based on other definitions used by existing national registries for evidence-based programs. The categories are organized into a continuum of evidence, with Well-Supported and Supported programs having the strongest level of evidence for effectiveness, followed by Promising programs with moderate evidence. Finally, Emerging and Evidence-informed programs represent those with exploratory evidence.

Programs in one category, *does not* necessarily mean they are “better” than programs in another category. Selection of program services should be based on many factors, such as appropriateness for the population served, community needs, and agency capacity to implement services with fidelity. What *is* critical is that all services funded must at least meet the criteria for Emerging/Evidence Informed programs. That means, in part, that they have: a logic model, a theory of change based on the best research. As a reminder, **80% of the Family Support funds** will be granted to those agencies implementing supported and well-supported programs and **20% of the Family Support funds** will be granted to those agencies implementing service models and activities that are promising practices or emerging/evidence informed activities.

Additional resources for identifying EB/EIP programs and related supporting research not found on the FRIENDS list can be found by accessing the following document:

http://friendsnrc.org/direct-download-menuitem/doc_download/47-appendices

It is a requirement that agencies demonstrate in the application that there has been careful thought around the selection, implementation, and evaluation of a particular community-based prevention program. Additionally, it required that during planning, agencies seek out support for pre-implementation assessment, training, in-service and peer support opportunities, coaching/clinical supervision, and evaluation in order to ensure continued model fidelity and program sustainability. Agencies will have to demonstrate that these supports are in place and are able to be sustained throughout the grant award period. This support is considered an allowable cost and should be budgeted accordingly. All applicants shall complete the Implementation Checklist, link for which can be located in Appendix F.

For applicants proposing to implement the Pre-School and School Age BASIC Incredible Years training program, Strengthening Families Program (6-11), and/or Circle of Parents programs/curricula, it is highly encouraged that applicants access and budget for program network memberships through Prevent Child Abuse North Carolina (PCANC). Membership benefits include:

- **Pre-implementation and implementation support**
- **Pre-service training**
- **Coaching**
- **Ongoing technical assistance**
- **Consultation**
- **Networking**
- **Statewide evaluation**

Prior to program selection, applicants are encouraged to visit <http://www.preventchildabusenc.org/> to access program specific resources including:

- **archived webinars offering programmatic information including evidence of effectiveness, planning for implementation, and fidelity to the model**
- **readiness considerations**
- **sample budgets (including cost for the program network membership benefits listed above)**
- **contact information for program staff**

NCDSS will be utilizing the sample budgets listed above when determining budget appropriateness during application scoring. Additionally, all NCDSS funded Incredible Years and Strengthening Families Programs grantees are required to follow NCDSS and PCANC approved implementation guidelines, also accessible at the link above.

To better understand EB/EIP and begin the community needs assessment and program selection process, we highly encourage agencies to access the following resource: *Integrating Evidence-Based Practices into CBCAP Programs: A Tool For Critical Discussion*.

http://friendsnrc.org/direct-download-menuitem/doc_download/46-introduction-and-getting-started

Respite Programs

While Respite programming has not been identified as evidence-based or evidence-informed, it is a preventative strategy that strengthens families, protects their health and well-being, and allows their children to remain at home and in the community. Respite is an important component of a comprehensive continuum of child abuse and neglect prevention programming. Respite models include, but are not limited to:

- In-home respite with trained professionals or volunteer providers;
- Out-of-home (child care centers, schools, family care home, foster care homes, hospitals, or specific respite facility) also using trained or volunteer providers;
- Periodic respite (churches, community centers or other community-based organizations that support periodic respite events);
- Summer camps, recreational or after-school programs

As respite has been determined to be a critical service, there is some emerging research that demonstrates its positive impact on children and their families. Respite agencies shall speak to emerging evidence in their application. Resources include:

- ARCH National Resource Center <http://www.archrespite.org/>
- Child Welfare Information Gateway
<http://www.childwelfare.gov/preventing/evaluating/respite.cfm>
- FRIENDS National Resource Center <http://friendsnrc.org/cbcap-priority-areas/respite-care>

All applicants shall complete the Implementation Checklist, the link for which can be located in Appendix F.

Additionally, Evaluating and Reporting Outcomes: a Guide for Respite and Crisis Care Program Managers (2002), can assist Respite agencies, providing both planned and crisis respite, to clearly demonstrate their programs are achieving worthy outcomes related to the improvement of quality of life, and outcomes related to saving tax-payer dollars on more costly interventions such as foster

care, nursing homes, or other institutional care. Information on this resource can be found at <http://www.archrespice.org/program-evaluation>.

9. Outcome Accountability and Evaluation

All programs are performance and outcome based. The process of having agencies develop and utilize a logic model guides agencies towards greater outcome accountability. Outcome accountability is demonstrating that the expenditure of staff time, funding, and other resources result in tangible positive changes for children and families. The logic model should be the applicant's 'drawing board' for planning services, linking those services to outcomes, and identifying tools that will measure whether the stated outcomes were achieved. The logic model is intended to be a working document that is referenced and revised regularly by your agency.

In order to support outcome accountability, and provide a framework for outcome evaluation, NCDSS *requires applicants* to utilize the FRIENDS National Resource Center Evaluation toolkit in the development of a required logic model: <http://friendsnrc.org/evaluation-toolkit>

NCDSS highly encourages applicants to access the Logic Model training (assessable through the following link <http://friendsnrc.org/online-learning-community>) prior to drafting their logic model.

The toolkit is comprised of four components:

1. **Building Your Evaluation Plan** – assists programs with a general understanding of outcome evaluation.
2. **Logic Model Builder** - guides users as they create their own logic model.
3. **Outcomes and Indicators**- a menu of common Protective Factor linked outcomes and indicators.
4. **Annotated Measurement Tools** – a listing of commonly used tools to measure outcomes in prevention programs.

NCDSS has a stated shared vision that *shall be used for all family support and respite agencies* when completing the logic model builder:

Family Support and Respite Shared Vision

Families have enhanced capacity to provide for their children's educational, physical, and emotional needs and children have opportunities for healthy social and emotional development.

Specific population, inputs (resources), outputs (service strategies), assumptions, outcomes, indicators, and measurement tools are determined by applicants. Child abuse and neglect prevention programs and practices that meet evidence-based or evidence-informed criteria *are expected*, over time, to produce a progression of outcomes: Short-term, then Intermediate, and eventually Long-term outcomes.

When composing your logic model keep in mind the following:

- Outcomes are divided into, short-term, intermediate, and long-term. Example of these are:
 - Short-Term (parents attending class; awareness of alternative discipline techniques)

- Intermediate (a parent practices a new conflict management technique with their child; a parent talks with other parents about how the technique works)
- Long-Term (A parent is consistently utilizing/practicing the learned parenting techniques with their children)
- Identify the desired change in participant’s knowledge, attitudes, skills, or aspirations.
- Please draft realistic outcomes. Applicants should be aware of time-restraints, and/or consider ‘checking-in’ with parents at 6 and 12 months following the close of services. ***It may not be realistic to state that child abuse and neglect has been prevented if your agency is not having long-term contact with a family. What can be demonstrated is risk factors that contribute to the occurrence of child maltreatment were decreased and family protective factors were increased.***
- Outcomes should be SMART- Specific, Measurable, Achievable, Realistic, and Time-Bound.
- In addition to any agency chosen or curricula specific measurement tools, please list the Pre/Post Protective Factor Survey and NCDSS Client Satisfaction Survey, as these are required evaluation tools to be used for all programming.
- ***Once you have developed your logic model in the logic model builder, please transfer the data to the following logic model form (Appendix F), which can be adjusted as needed, but should remain 1 page .***

The narrative portion of this section should expand upon the information listed in the Logic Model. Applicants are also encouraged to discuss how their agency will ensure maintenance of model fidelity. For example, is there a fidelity checklist based on the program or curricula’s core components that will be used?

IV. GENERAL INSTRUCTIONS & FORMAT

Basic Format

- Type should be 12 point font size.
- The proposal should be typed on 8 ½” x 11” white paper.

- Lines should be double-spaced with no less than 1” margins.
- The Proposal Summary and Attachment B should be numbered sequentially with the Page ___ of ___ format in the upper right hand corner. Following Worksheet 6, **do not** number pages.
- Include a footer identifying the agency submitting the application and the initiative you are applying for.
- Adhere to page limits. **Do not** add additional pages when responding to this application. Points will be deducted during scoring for applications that exceed page limits.
- Proposals **should not** be stapled or bound – instead use binder clips or paperclips.
- Respond to each criteria listed in this RFA in the order requested. **Include section headings** in the Scope of Work as listed in the application checklist. **Do not** insert Section/Attachment pages as dividers.

Cover Letter

A cover letter on organization letterhead must accompany the application. Include in the cover letter: purpose of the request, the specific amount being requested, number of participants to be served, program activities, area/county of program and the population being served. ***This letter must be signed by the authorized official of the agency in blue ink.***

Application Order

Use the table below to comply with the maximum page limits in each section. ***The Application Checklist in the Appendix A section of this application must be completed and all boxes checked for consideration of funding. Links to all required contract documents are located in Appendix F.*** Applications that are incomplete will not be considered for funding.

Section	Maximum Page Limit
Cover Letter on agency letterhead	1
Application Checklist - completed	1
Scope of Work - will include the following sections (each section should be labeled accordingly and should include page numbers):	
Attachment B – Direct Client Services Face Sheet – ALL sections completed and signed and dated in blue ink	1
Proposal Summary	2
Needs Assessment	3
Project Design – Include the following: Logic Model Implementation Checklist	15
Organizational Capacity - Include the following: Organizational Chart Worksheet 1 - Board Member Profile Capacity Checklist Job Descriptions (for all staff listed in the budget)	2
Local Coordination and Collaboration	3
Sustainability – Include the following: Worksheet 2 - Anticipated Revenue Summary Worksheet 3 - Funding Chart Worksheet 4 - Reimbursement Acknowledgement	1

Attachment C - Budget Form DSS-6844S (and the following supporting information): Budget Narrative Draft of Sub-Contract Agreement(s) (if applicable) Lease agreement (if requesting rent) Cost Allocation Plan (if some costs are shared with other funding/programs)	N/A
Attachment D: Conflict of Interest form notarized and a copy of grantee's conflict of interest policy attached	N/A
Attachment E: No Overdue Tax Form (on organization's letterhead and notarized)	N/A
Attachment F: IRS Federal Tax Exempt Letter 501 (c) (3)	N/A
Memorandum of Agreement with the local county DSS	N/A
Letters of support (3 required)	N/A
Disqualification Factors Acknowledgement	N/A
Acknowledgement of Receipt	N/A

ATTACHMENT B: SCOPE OF WORK

Face Sheet-Direct Client Services Narrative

All sections must be completed. Sign and date in blue ink.

Proposal Summary (Two page limit)

Please provide a clear and concise description of the program. Summarize the major points from your Scope of Work, including: the community being served, the number of annual participants who will be served (broken out into # of caregivers and # of children), physical location where the participants will be served, the activities proposed (frequency, intensity, and duration), type of curricula/program, and who will administer the program.

Needs Assessment (Three page limit)

Describe the targeted community need the proposed community-based prevention program will address. *When describing community need, applicants are asked to reference the North Carolina County Child Maltreatment Data, listed in Appendix C. After review of this data, applicants should speak to factors contributing to the county's child maltreatment rate and why providing the proposed community-based prevention program may have long-term impact on these rates.* Need assessments should be a clear, concise, well-supported statement of what the community problems (not limited to child maltreatment) are and why program is needed. *Data and noted citations should be used to support need statements.* Proposals shall include:

1. How your agency assessed the current needs of your community (i.e. – collaborative needs assessment process with other agencies and parents, focus groups, accessing other agency’s data/reports, etc)
2. Who is your target population? Where are they located? How were they identified?
3. Socio-economic needs of the community and risk factors of the specific target population. Please state the relationship of the target population to the larger community.
4. Need for the community-based prevention and family support service in the identified community. Applicants should reference how the proposed program fits into the community’s continuum of services, if it fills an identified gap in services, and/or works to eliminate barriers to a family’s ability to access services. If similar services are already being delivered to your community, the proposal should describe why an additional service is needed (i.e., locations factors, time of day factors, funding factors, number of people not being served, etc)
5. The proposal should include information on the likely outcome for children/youth and families if the program is not established.

You may find some of your county’s statistical information at any of the agencies you collaborate with or you may utilize other Needs Assessments completed by agencies and organizations within your county, (e.g., United Way, etc.) Additional information can also be found on the web at:

- http://ctb.ku.edu/en/tablecontents/chapter_1003.aspx
- <http://quickfacts.census.gov/qfd/states/37000.html>
- <http://www.ncchild.org/>
- <http://www.aecf.org/>
- <http://www.ocme.unc.edu/nccfpp/index.shtml>
- http://sasweb.unc.edu/cgi-bin/broker?_service=default&_program=cwweb.grlrep.sas&county=North%20Carolina&label=&format=html&fn=ALL&type=CHILD&byvar=TOT&type2=NUM&menu=11
- http://friendsnrc.org/component/joomdoc/doc_details/579-redacted-hv-data-sources

Project Design/Activities (Fifteen page limit, not including logic model and implementation checklist)

Applicants shall describe in how the program will meet *all 9 requirements listed on pages 10-19 of this RFA* by providing a detailed description of the program design. The following questions should be referenced when drafting the project design section:

Principles of Family Support Practice

- How will your agency model the Principles of Family Support?
- How will your agency affirm and strengthen families’ cultural, racial, and linguistic identities?
- How do you ensure families are approached with equality and respect?

Meaningful Parent Engagement and Leadership

- What will meaningful parent engagement look like?
- What incentives will be provided to support participation?

- If transportation or childcare is a concern for clients how will your agency work to overcome this barrier?
- How will you recruit and maintain parent involvement on your board or advisory committee?
- How will parents be involved in your agency's continuous quality improvement process?

Collaborative Partnerships

- What other community partners are supporting service delivery?
- How is your agency contributing to community efforts to prevent child abuse and neglect?
- What formal and informal resources are being used to support families?
- What is your relationship with your local Department of Social Services agency?
- How do you communicate your agency's available services to your community?

Levels of Prevention

- Are your services considered primary, secondary, or tertiary prevention?
- If primary prevention, speak to your universal focus.
- If secondary or tertiary, speak to your targeted population and the identified risk factors and/or lack of protective factors.
- Where will you receive your referrals and how will those referrals be tracked?

Target Population

- Who is your target population?
- How many parents and children will be served?
- Where will services be held and/or located?
- What community outreach/recruitment will be done?
- Are services accessible to residents of multiple counties?

Positive Outcomes for Children and Families

- What is the goal of your program?
- What is your identified theory of change?

Promoting Protective Factors

- What protective factor(s) will be addressed?
- Why are these protective factors the most relevant to your program?

Evidence-Based Evidence-Informed Practice

- What program or curricula are you utilizing?
- What is the supporting research that identifies the practice, program, or curricula as evidence-based or evidence-informed?
- How was this practice, program, or curricula chosen?
- What does pre-implementation look like?
- What is your program implementation timeline?
- How will you support implementation?
- How will you ensure model fidelity?
- Did you complete the Implementation Checklist?

Outcome Accountability and Evaluation

- Is the Family Support and Respite Shared Vision listed in the logic model?
- What are the inputs, outputs, assumptions, outcomes, indicators, and measurement tools?
- What are the identified short-term, intermediate, and long-term outcomes?

- Are the outcomes, specific, measurable, achievable, realistic, and time-bound?
- What type of follow-up, if any, is the agency providing to clients?
- How will you evaluate client success formally and informally?
- How will you assess program success formally and informally?
- Who will be involved in your continuous quality improvement process?

Organizational Capacity (Two page limit not including worksheets, org chart, job descriptions, and capacity checklist).

Successful agencies have strong organizational capacity to help achieve their goals. Organizational capacity includes but is not limited to, sound programmatic and fiscal policies and procedures, adequate staff, professional development opportunities, meaningful staff supervision time, engaged board and community stakeholders, sufficient resources, and a strong data and evaluation process.

This section should include, but not be limited to the following (do not mention staff names, only position titles):

- State the mission of the organization and how it relates to programming.
- Describe the history of your organization within the community and provide evidence that it has the capacity to serve and reach the target population.
- Will any of the proposed services be outsourced to a subcontractor? If so, describe how the services will regularly be monitored and performance evaluated.
- Who will oversee the administration and supervision of the proposed services and what are their qualifications?
- Include an **organizational chart** of your agency showing how the program fits into the organization's structure (this chart will not be included in the page limit).
- Who will be responsible for submitting all financial forms and the individual's experience with submitting budget modifications and monitoring agency/grant spending?

Complete the **Worksheet 1 - Board Members**, listing your current board members, their board position and contact information. Worksheet 1 can be located in Appendix F.

Complete the **Capacity Checklist** form. The Capacity Checklist form can be located in Appendix F.

Please attach **job descriptions** for positions listed in your Budget and Budget narrative.

Local Coordination and Collaborations (Two page limit, not including worksheets).

Describe and list the collaborations with local agencies and organizations that focus on child, family, and community well-being. Identify any organizations that will act as partners in funding, managing, or providing services for this program and the specific roles that each shall play in executing the Scope of Work.

Each proposal must show evidence of collaboration with other agencies and organizations, including parents and/or caregivers. ***Proposals must include a MOA with the local Department of Social Services and at least 3 letters of support. If the applying agency is a local Department of Social Services, only the 3 letters of support are required.*** At least one letter should be from a consumer of services. Examples are:

- If school based, a letter of support signed by school principal
- Juvenile justice system
- Health Department
- Mental Health Center
- Local Head Start /Early Head Start
- Child care center
- Housing authority
- Partnership for Children
- Hospitals/Pediatricians/Nurses
- Other Community agencies (i.e. - faith and civic organizations)
- Parents/Caregivers

Sustainability Plan (One page limit, not including worksheets).

Applicants must address the potential for continuing the project beyond the initial grant period, as the funding available from this source may not be available on a recurring basis. Sustainability is important because a break in services for families and children may increase risk of child maltreatment. Proposals may include actions that will be taken to insure continuity of programming and identifying specific funding sources that will be contacted. Describe a *three year sustainability plan* that includes a plan for diversifying funding for the program. Include the following:

- How the program will be marketed to participants to ensure participation and increase awareness of the program's availability.
- The types of support and resources from the applicant organization and their partners.
- In-Kind resources.
- A funds diversification plan which includes identification of sources and types of local, state and federal funds, as well as foundations and corporate sources.

Complete **the Worksheet 2 - Anticipated Revenue Summary Form, Worksheet 3 - Funding Chart, and Worksheet 4 – Reimbursement Acknowledgement.**

Attachment C: Budget (DSS 6844S) and Budget Narrative

Applicants are required to submit a line-item budget for Fiscal Year 2012-13 on form DSS 6844S outlining the proposed use of funds and a budget narrative justifying each line item. Agencies will be expected to submit a new agency budget during the annual contract renewal process. The Fiscal Year 2012-13 budget shall equal 1/3 of the 3-year grant cycle award total.

The budget narrative must explain each line item and how the expenditures help the program meet the proposed program deliverables. No carry over of unexpended funds is allowed from one fiscal year to another. Award amounts do not require a local match. All funds are distributed on a reimbursement after expenditure basis. Funds from this grant may not be used to supplant other funds.

- *Page 1 of Form DSS 6844S must be signed in blue ink by the authorized official.*

- Expenditures for travel and daily subsistence must be in accordance with state approved rates. The Office of State Budget and Management (OSBM) prepares the Budget Manual which includes current state approved travel and daily subsistence rates and can be located through the following link: http://www.osbm.state.nc.us/files/pdf_files/BudgetManual.pdf
- Funds may not be used to purchase or renovate real estate property nor purchase or lease vehicles.
- Equipment may be purchased if it can be shown to be essential to the overall goals and outcomes of the program.
- Tangible equipment costing \$5,000.00 or more cannot be purchased with these funds.
- Agencies which received funding in previous years to purchase equipment (e.g. computers, televisions, vcr/dvd players, etc) will not be approved to purchase duplicate equipment under this grant, unless the need is clearly articulated.
- Include the following if proposed in the budget: a draft Sub-Contractors Agreement, a lease agreement if requesting rent and/or an Indirect Cost Rate Plan.

APPENDIX A

NORTH CAROLINA DEPARTMENT OF HEALTH & HUMAN SERVICES
NORTH CAROLINA DIVISION OF SOCIAL SERVICES
SFY 2012-2015
FAMILY SUPPORT AND RESPITE PROGRAM SERVICES

Application Checklist

(All required documents can be accessed in Appendix F)

_____ Cover letter on agency letterhead

_____ Application Checklist

_____ Scope of Work – will include the following sections:

_____ Attachment B – Direct Client Services Face Sheet

_____ Proposal Summary

_____ Needs Assessment

_____ Project Design (please include the following):

♦ Logic Model

♦ Implementation Checklist

_____ Organizational Capacity (please include the following):

♦ Organizational Chart

♦ Worksheet 1 – Board Member Profile

♦ Capacity Checklist

♦ Job Descriptions (for all staff listed in the budget)

_____ Local Coordination and Collaboration

_____ Sustainability Plan (please include the following):

♦ Worksheet 2 – Anticipated Revenue Summary

♦ Worksheet 3 – Funding Chart

♦ Worksheet 4 – Reimbursement Acknowledgement

_____ **Attachment C** - Budget Form DSS-6844S and Budget Narrative:

Attach the following, as needed, following the budget narrative:

Draft of Sub-Contractor(s) Agreement(s)

Lease agreement (if requesting rent)

Cost Allocation Plan

_____ **Attachment D:** Conflict of Interest- Notarized (Include organizational conflict of interest policy).

_____ **Attachment E:** No Overdue Tax Form - Notarized (must be printed on Agency Letterhead).

_____ **Attachment F:** IRS Federal Tax Exempt Letter (501)(c)(3) (non-profit) or Verification of Tax ID (governmental)

_____ MOA with Local DSS agency (not required if applicant is a DSS agency)

_____ Letters of Support (3)

_____ Disqualification Factors Acknowledgement

_____ Acknowledgement of Receipt

APPENDIX B

SFY 2012-2015 COMMUNITY BASED PROGRAMS READER RECORDING SHEET - FAMILY SUPPORT/RESPIRE PROGRAMS

Reader: _____

Total Reader Points Awarded: _____

Applicant: _____

Internal NCDSS Points Awarded: _____

Funding Criteria	Clarification	Maximum Score Possible	Points Awarded
I. Proposal Summary		5 Maximum Points	
	<ul style="list-style-type: none"> ▪ Agency provides a clear and concise summary of proposed services. 	0-5 points	
	Subtract (-1) point if the applicant exceeded 2 pages for this section.		
		Subtotal	
II. Needs Assessment		10 Maximum Points	
	<ul style="list-style-type: none"> ▪ Clearly stated sources of needs assessment data. 	0 - 1 points	
	<ul style="list-style-type: none"> ▪ Agency speaks to county's child maltreatment rate, contributing factors, and how the proposed program may mitigate the incidence of child maltreatment. 	0 - 3 points	
	<ul style="list-style-type: none"> ▪ Program fits into the community's continuum of services and is not duplicative. 	0 - 3 points	
	<ul style="list-style-type: none"> ▪ Demographics of the area are provided. 	0 - 3 points	
	Subtract (-1) point if the applicant exceeded 3 pages for this section.		
		Subtotal	
III. Project Design		35 points Maximum Points	
Principles of Family Support Practice	<ul style="list-style-type: none"> ▪ Agency discusses who they will support the Principles of Family Support. ▪ The agency states how they will demonstrate cultural competency. 	0-2 points	
Meaningful Parent Engagement and Leadership	<ul style="list-style-type: none"> ▪ The agency explains what meaningful parent engagement looks like in their agency. ▪ The agency discusses how they will support parent engagement and retention. ▪ Parent involvement on the agency's advisory or board is stated. ▪ Parent involvement in the agency's continuous quality improvement process is discussed. 	0-4 points	
Collaborative Partnerships	<ul style="list-style-type: none"> ▪ Community partners who are supporting service delivery are identified. ▪ Relationship with the local Department of Social Services is discussed. ▪ Agency discusses how they are contributing to community child abuse/neglect prevention efforts 	0-3 points	
Levels of Prevention	<ul style="list-style-type: none"> ▪ Agency identifies programming as primary, secondary, or tertiary prevention services. ▪ Primary prevention programming - agency speaks to their universal focus. ▪ Secondary or tertiary prevention programming - agency speaks to target population and their identified risk & protective factors. 	0-4 points	

	<ul style="list-style-type: none"> ▪ Referral sources are identified. 		
Target Population	<ul style="list-style-type: none"> ▪ Target population is identified ▪ Number of parents and children stated ▪ Location of service delivery is stated ▪ Agency discussed planned outreach/recruitment efforts ▪ County or counties served is stated. 	0-4 points	
Positive Outcomes for Children and Families	<ul style="list-style-type: none"> ▪ Goal of the program is clearly stated. ▪ Agency communicates their theory of change 	0 - 4 points	
Promoting Protective Factors	<ul style="list-style-type: none"> ▪ The protective factors to be addressed are stated ▪ Agency communicates why these protective factors were chosen 	0 – 4 points	
Evidence-Based Evidence-Informed Practice	<ul style="list-style-type: none"> ▪ Evidence-based or Evidence Informed practice or curricula is identified. ▪ Supporting evidence/research is discussed. ▪ Agency states why the practice or curricula was chosen. ▪ Agency clearly states what pre-implementation will look like. ▪ Agency discusses what resources will be used to ensure model fidelity and support implementation. ▪ A timeline for implementation was provided. ▪ Implementation Checklist completed & attached 	0-5 points	
Outcome Accountability and Evaluation	<ul style="list-style-type: none"> ▪ The Family Support Shared Vision was used in the logic model. ▪ Inputs, outputs, assumptions, indicators, and measurement tools are listed. ▪ Identified short-term, intermediate, and long-term outcomes stated. ▪ The outcomes are specific, measurable, achievable, realistic, and time-bound. ▪ Agency states if they will be following up with clients after close of services. ▪ The agency outlines how they will evaluate client and program success. ▪ The agency identifies those who will participate in their continuous quality improvement process. 	0-5 points	
	Subtract (-1) point if the applicant exceeded 15 pages (not including logic model & implementation checklist) for this section.		
		Subtotal	
IV. Organizational Capacity		12 Maximum Points	
	<ul style="list-style-type: none"> ▪ A brief description of the organization’s history and structure is provided. 	0 – 2 points	
	<ul style="list-style-type: none"> ▪ Organization’s mission clearly relates to programming. 	0 – 2 points	
	<ul style="list-style-type: none"> ▪ Capacity to serve and reach the target population – Capacity Checklist included. 	0 - 2 points	
	<ul style="list-style-type: none"> ▪ Board Member Profile- Worksheet 1 is complete. 	0 – 2 points	
	<ul style="list-style-type: none"> ▪ Organizational Chart is included and provides evidence that there is a support structure in place. 	0 -2 points	

	▪ Job descriptions included for all staff position listed in budget (Attachment C)	0 – 2 points	
	Subtract (-1) point if the applicant exceeded 2 pages (not including job descriptions, org chart, capacity checklist and worksheets) for this section.		
		Subtotal	
VI. Local Coordination and Collaboration		8 Maximum Points	
	▪ The program’s collaboration and coordination plan with other community- based public and private agencies within the community/county is identified and described and clearly articulates the need and support of collaborative efforts. Planning team members are identified.	0 - 3 points	
	▪ A minimum of three required letters of support are included. In addition, a local Dept. of Social Services Memorandum of Agreement is required.	0 - 2 points	
	▪ DSS MOA included from each county services proposed	0 – 3 points	
	Subtract (-1) point if the applicant exceeded 3 pages (not including letters of support and local DSS MOA) for this section.		
	Subtotal		
V. Sustainability		12 Maximum Points	
	▪ A three year plan for possible funding is clearly described, including listing of potential funding sources.	0 – 3 points	
	▪ How the program will be marketed to increase the awareness of the program’s availability.	0 - 3 points	
	▪ Anticipated Revenue Summary Form –Worksheet 2 is complete.	0 - 2 points	
	▪ Funding Chart – Worksheet 3 is complete.	0 – 2 points	
	▪ Reimbursement Acknowledgement –Worksheet 4 is complete.	0 – 2 point	
	Subtract (-1) point if the applicant exceeded 1page (not including worksheets) for this section.		
		Subtotal	
VII. Budget Appropriateness		18 Maximum Points	
	▪ The budget is appropriate and supports the Project Design.	0 – 9 points	
	▪ The budget narrative provides justification for each line item, is clearly articulated, and sufficient to support the goals and activities outlined in the proposal.	0 – 9 points	

		Subtotal	
TOTAL POINTS AWARDED	Please add section subtotals and transfer this amount to the front page of the scoring sheet		

It is required to complete the following sections. Please bullet point areas of strength and concern.

Areas of Strength:	
Areas of Concern/ Questions Needing Clarification:	

Other Comments:

FOR INTERNAL NCDSS COMPLETION ONLY		
Prior NCDSS Family Support Performance	Regularly unsuccessful in meeting projected numbers/outcomes <u>and/or</u> significant corrective action findings - 5 Success with meeting projected numbers/outcomes +0 Met or exceeded projected numbers/outcomes <u>and</u> minor or no corrective action findings +5	

- / + POINTS AWARDED	Please transfer this amount to the front page of the scoring sheet	
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APPENDIX C
North Carolina County Child Maltreatment Data

County Name	County Number	From	To	All Children Under 18	Abuse and Neglect	Abuse	Neglect	Dependency	Rate of Substantiations	Services Needed	Rate of Child Maltreatment
STATEWIDE				2277967	0.51	0.5	3.92	0.18	5.11	0.51	5.62
Alamance	1	Jul-09	Jun-10	36647	1.2	0.6	4.39	0.16	6.35	4.48	10.83
Alexander	2	Jul-09	Jun-10	8223	1.09	0.36	15.69	0.12	17.26	10.09	27.35
Alleghany	3	Jul-09	Jun-10	2129	0	2.35	6.58	0.47	9.4	2.35	11.75
Anson	4	Jul-09	Jun-10	5642	0.18	0.18	3.19	0.18	3.73	7.09	10.82
Ashe	5	Jul-09	Jun-10	5080	2.95	0	5.12	0	8.07	6.1	14.17
Avery	6	Jul-09	Jun-10	3272	0	0.92	6.72	0	7.64	15.89	23.53
Beaufort	7	Jul-09	Jun-10	10382	0.77	0.1	8.09	0	8.96	12.62	21.58
Bertie	8	Jul-09	Jun-10	4420	0	0.23	0.45	0	0.68	0.68	1.36
Bladen	9	Jul-09	Jun-10	7827	0.77	2.43	2.17	0	5.37	4.47	9.84
Brunswick	10	Jul-09	Jun-10	19841	0.45	1.01	4.33	0.1	5.89	4.74	10.63
Buncombe	11	Jul-09	Jun-10	48027	0.9	0.37	4.39	0.08	5.74	10.64	16.38
Burke	12	Jul-09	Jun-10	20161	0.45	0.99	4.17	0.1	5.71	12.2	17.91
Cabarrus	13	Jul-09	Jun-10	47896	0.48	0.38	3.44	0.04	4.34	4.24	8.58
Caldwell	14	Jul-09	Jun-10	18124	0.06	0.28	0.88	0.33	1.55	15.89	17.44
Camden	15	Jul-09	Jun-10	2527	0	0	1.58	0.4	1.98	0	1.98
Carteret	16	Jul-09	Jun-10	12341	0.41	0.81	5.75	0.08	7.05	6.4	13.45
Caswell	17	Jul-09	Jun-10	4854	0.82	0.21	5.97	0.21	7.21	0.82	8.03
Catawba	18	Jul-09	Jun-10	38391	0.23	0.44	1.82	0.05	2.54	15.6	18.14
Chatham	19	Jul-09	Jun-10	14254	0.84	0.28	4.98	0.63	6.73	5.75	12.48
Cherokee	20	Jul-09	Jun-10	5181	3.86	0.19	31.08	0.77	35.9	1.16	37.06
Chowan	21	Jul-09	Jun-10	3448	0.58	0.29	0.29	0.29	1.45	3.19	4.64
Clay	22	Jul-09	Jun-10	1896	1.05	0.53	6.86	0	8.44	17.93	26.37
Cleveland	23	Jul-09	Jun-10	23884	1.13	1.59	15.66	0.38	18.76	3.94	22.7

Columbus	24	Jul-09	Jun-10	13469	0.52	1.26	12.18	0.3	14.26	2.75	17.01
Craven	25	Jul-09	Jun-10	22659	0.31	0.26	1.99	0.22	2.78	10.42	13.2
Cumberland	26	Jul-09	Jun-10	84590	1.13	0.05	4.34	0.07	5.59	9.94	15.53
Currituck	27	Jul-09	Jun-10	5758	1.56	0.87	9.38	0	11.81	6.43	18.24
Dare	28	Jul-09	Jun-10	7097	0.14	0	14.65	0	14.79	5.64	20.43
Davidson	29	Jul-09	Jun-10	38042	0.16	0.63	1.89	0.05	2.73	7.02	9.75
Davie	30	Jul-09	Jun-10	9851	0.91	0.2	9.03	0.1	10.24	7.21	17.45
Duplin	31	Jul-09	Jun-10	13847	0.07	0.79	17.26	0.36	18.48	2.96	21.44
Durham	32	Jul-09	Jun-10	63286	0.33	0.71	1.58	0.13	2.75	3.92	6.67
Edgecombe	33	Jul-09	Jun-10	13631	0.37	1.03	2.2	0.07	3.67	14.09	17.76
Forsyth	34	Jul-09	Jun-10	88322	0.29	0.08	0.79	0.03	1.19	1.8	2.99
Franklin	35	Jul-09	Jun-10	14557	0.21	0.48	0.82	0.21	1.72	7.28	9
Gaston	36	Jul-09	Jun-10	50744	0.3	0.37	2.96	0.18	3.81	7.35	11.16
Gates	37	Jul-09	Jun-10	2912	0.34	0	2.75	0	3.09	0	3.09
Graham	38	Jul-09	Jun-10	1724	6.38	1.74	13.34	1.16	22.62	8.7	31.32
Granville	39	Jul-09	Jun-10	13103	0.31	0.15	1.83	0	2.29	4.5	6.79
Greene	40	Jul-09	Jun-10	4617	0.22	0.43	3.9	0	4.55	8.88	13.43
Guilford	41	Jul-09	Jun-10	114112	1.02	0.62	3.92	0.14	5.7	2.4	8.1
Halifax	42	Jul-09	Jun-10	12863	0.08	0.39	3.34	0.31	4.12	13.06	17.18
Harnett	43	Jul-09	Jun-10	31303	0.64	0.16	2.84	0.03	3.67	4.89	8.56
Haywood	44	Jul-09	Jun-10	11431	2.19	1.22	3.15	0.09	6.65	26.07	32.72
Henderson	45	Jul-09	Jun-10	21636	0.18	0.51	8.37	0	9.06	7.3	16.36
Hertford	46	Jul-09	Jun-10	5167	0.39	0	0.19	0.39	0.97	0	0.97
Hoke	47	Jul-09	Jun-10	13025	0.23	1.15	3.22	0.23	4.83	0.54	5.37
Hyde	48	Jul-09	Jun-10	951	0	2.1	2.1	1.05	5.25	0	5.25
Iredell	49	Jul-09	Jun-10	40847	0.83	0.2	9.06	0.12	10.21	9.21	19.42
Jackson	50	Jul-09	Jun-10	6929	0.87	0.58	10.1	0	11.55	12.27	23.82
Johnston	51	Jul-09	Jun-10	46970	0.13	0.17	0.66	0.19	1.15	8.62	9.77
Jones	52	Jul-09	Jun-10	2124	0	0	0	0	0	0.47	0.47
Lee	53	Jul-09	Jun-10	15907	0.44	0.82	3.02	0.25	4.53	2.45	6.98
Lenoir	54	Jul-09	Jun-10	14025	1	1.57	3.92	0.43	6.92	12.19	19.11
Lincoln	55	Jul-09	Jun-10	18578	0.65	1.51	3.12	0.27	5.55	7.59	13.14
Macon	56	Jul-09	Jun-10	9683	0.1	0.31	1.76	0.62	2.79	2.38	5.17

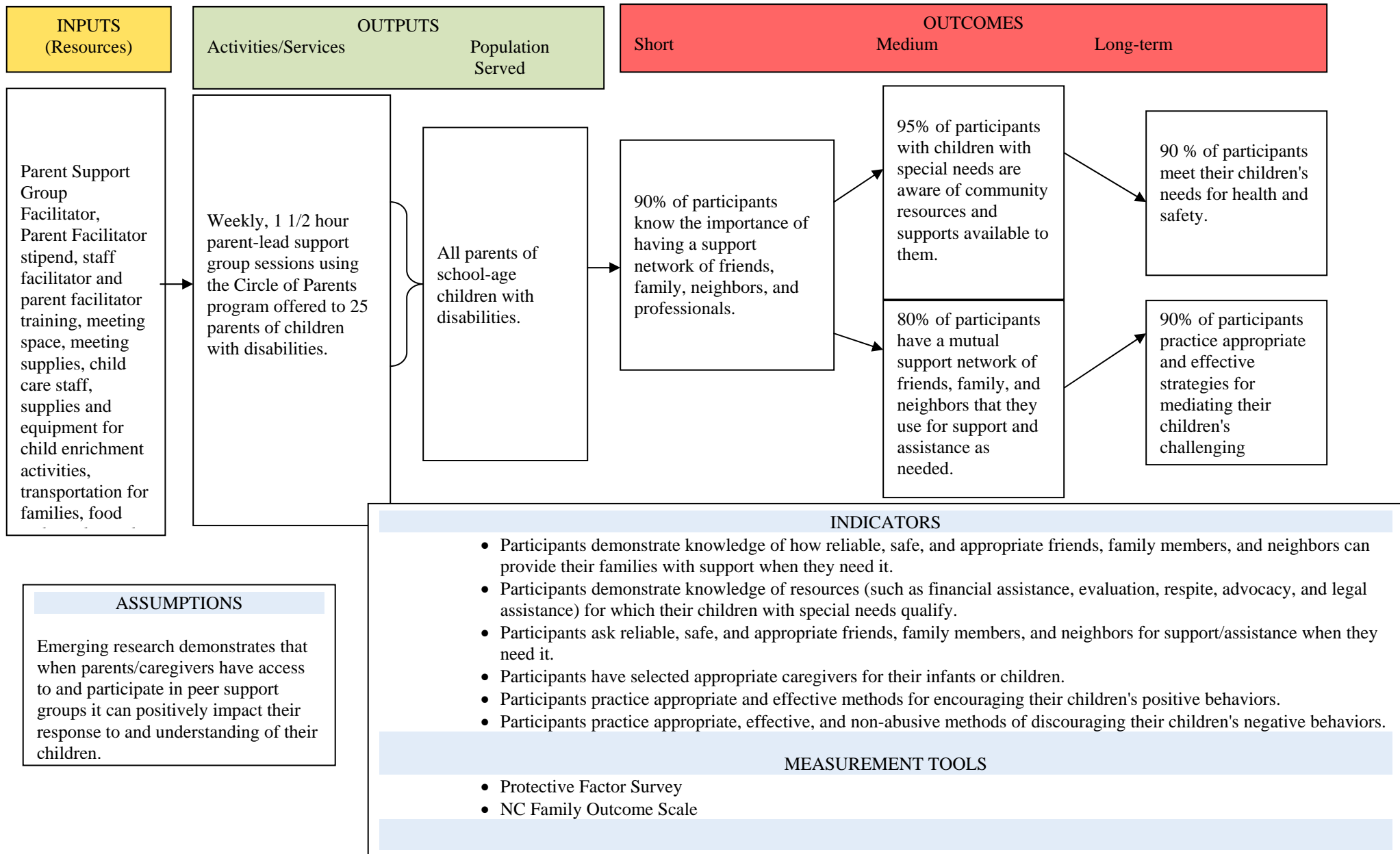
Madison	57	Jul-09	Jun-10	6633	0	0.3	11.91	1.81	14.02	13.12	27.14
Martin	58	Jul-09	Jun-10	4150	0.72	0	0.72	1.2	2.64	4.34	6.98
McDowell	59	Jul-09	Jun-10	5454	1.65	1.28	17.05	0.37	20.35	20.9	41.25
Mecklenburg	60	Jul-09	Jun-10	237842	0.21	0.5	2.64	0.21	3.56	3.79	7.35
Mitchell	61	Jul-09	Jun-10	3169	0.32	1.58	8.84	0	10.74	4.42	15.16
Montgomery	62	Jul-09	Jun-10	6850	1.02	0.15	3.8	0	4.97	11.82	16.79
Moore	63	Jul-09	Jun-10	19259	0.26	0.52	7.43	0.26	8.47	2.18	10.65
Nash	64	Jul-09	Jun-10	23289	0.94	0.47	4.25	0.17	5.83	3.26	9.09
New Hanover	65	Jul-09	Jun-10	39600	0.2	0.38	6.01	0.23	6.82	12.25	19.07
Northampton	66	Jul-09	Jun-10	4237	0	4.01	0	0	4.01	8.5	12.51
Onslow	67	Jul-09	Jun-10	40880	1.17	0.24	3.84	0.17	5.42	9.66	15.08
Orange	68	Jul-09	Jun-10	26871	0.07	0.41	0.86	0.15	1.49	6.29	7.78
Pamlico	69	Jul-09	Jun-10	2172	0.46	0.46	8.29	0	9.21	9.21	18.42
Pasquotank	70	Jul-09	Jun-10	9787	0.31	0.31	6.64	0.2	7.46	3.47	10.93
Pender	71	Jul-09	Jun-10	11581	0.35	0.43	2.25	0.52	3.55	4.32	7.87
Perquimans	72	Jul-09	Jun-10	2541	0	0	0	2.36	2.36	3.15	5.51
Person	73	Jul-09	Jun-10	8688	1.61	0.81	7.71	1.5	11.63	1.38	13.01
Pitt	74	Jul-09	Jun-10	36950	0.22	0.38	2.6	0.19	3.39	4.09	7.48
Polk	75	Jul-09	Jun-10	3566	0	0.28	0	0	0.28	14.3	14.58
Randolph	76	Jul-09	Jun-10	34812	0.43	0.55	2.61	0.2	3.79	4.94	8.73
Richmond	77	Jul-09	Jun-10	11391	0	0.09	1.14	0.61	1.84	5.62	7.46
Robeson	78	Jul-09	Jun-10	35980	0.47	0.64	5.2	0.19	6.5	9.2	15.7
Rockingham	79	Jul-09	Jun-10	20972	0.62	0.43	3.15	0	4.2	12.87	17.07
Rowan	80	Jul-09	Jun-10	33135	0.45	0.78	7.48	0.72	9.43	3.32	12.75
Rutherford	81	Jul-09	Jun-10	14573	1.72	0.27	15.44	0.21	17.64	6.52	24.16
Sampson	82	Jul-09	Jun-10	16884	0.47	0.77	5.92	0.3	7.46	1.07	8.53
Scotland	83	Jul-09	Jun-10	9216	0	1.19	6.18	0.33	7.7	10.09	17.79
Stanly	84	Jul-09	Jun-10	13881	0.36	0.58	4.39	0.07	5.4	8.57	13.97
Stokes	85	Jul-09	Jun-10	10227	0	0.2	3.03	0.1	3.33	9.88	13.21
Surry	86	Jul-09	Jun-10	17248	1.22	0	3.13	0.06	4.41	3.54	7.95
Swain	87	Jul-09	Jun-10	3143	2.86	2.86	26.73	0	32.45	11.45	43.9
Transylvania	88	Jul-09	Jun-10	5783	0	1.73	0.17	0.86	2.76	10.2	12.96
Tyrrell	89	Jul-09	Jun-10	762	0	0	0	1.31	1.31	1.31	2.62

Union	90	Jul-09	Jun-10	59783	0.22	0.64	1.15	0.13	2.14	4.82	6.96
Vance	91	Jul-09	Jun-10	11356	0.79	0.88	4.23	0.26	6.16	7.57	13.73
Wake	92	Jul-09	Jun-10	237116	0.15	0.39	2.08	0.02	2.64	6.25	8.89
Warren	93	Jul-09	Jun-10	3892	0	2.31	4.62	0.51	7.44	2.57	10.01
Washington	94	Jul-09	Jun-10	3174	0	0	0	0.32	0.32	1.89	2.21
Watauga	95	Jul-09	Jun-10	6492	0.15	1.08	2.62	0.31	4.16	10.78	14.94
Wayne	96	Jul-09	Jun-10	29354	0.44	0.1	2.9	0.07	3.51	5.14	8.65
Wilkes	97	Jul-09	Jun-10	14879	0.6	0.47	10.15	1.01	12.23	6.86	19.09
Wilson	98	Jul-09	Jun-10	19586	1.68	0.61	3.57	0.61	6.47	3.98	10.45
Yadkin	99	Jul-09	Jun-10	8858	0.56	0.34	6.55	0.11	7.56	1.02	8.58
Yancey	0	Jul-09	Jun-10	3744	1.6	1.34	5.88	0.27	9.09	21.9	30.99

APPENDIX D

SAMPLE Family Support Program Logic Model

Families have enhanced capacity to provide for their children’s educational, physical, and emotional needs and children have opportunities for healthy social and emotional development.



APPENDIX E

DEFINITIONS

Activities (sometimes referred to as outputs, services, objectives) This is the portion of your logic model where you describe the services your consumers will receive. What are the activities provided that are directly linked to the outcomes that you wish to achieve?

Annual Rate of Child Maltreatment The annual rate of child maltreatment is calculated by dividing the number of children reported as victims of maltreatment by the estimated number of children living in a county. The number of children reported as victims of maltreatment is drawn from the Management Assistance website. It represents a count of the number of unique children—based on having a different or unique SISID—reported as a victim of maltreatment during a state fiscal year. State-level data can be found at http://sasweb.unc.edu/cgi-bin/broker?_service=default&_program=cwwweb.report.sas&county=North%20Carolina&label=&type=RCHIL D&fn=ALL&format=html. The population is based on estimates provided by the U.S. Census Bureau. The Census Bureau periodically provides an updated population estimate of each county's population. The estimates are available for different groups in the population, including individuals age 17 and younger. Information on the population estimates can be found at <http://www.census.gov/popest/estimates.html>. The annual rate of child maltreatment on the achievement report was obtained by dividing the number of unique children reported in a county in State Fiscal Year (SFY) 2009-2010 by the estimated number of children in living in the county on July 1, 2009. That figure is then multiplied by 1,000 to obtain a rate per thousand.

Assumptions (sometimes referred to as underlying theory, rationale) The services you offer should be based on what is known to be effective. What assumptions are you making that suggest your services will bring about the desired outcomes, with the population you serve? The assumptions are the product of your research and demonstrate your knowledge of what has worked in the past for similar programs serving similar populations.

Continuous Quality Improvement (CQI) Continuous Quality Improvement activities ensure that programs are systematically and intentionally increasing positive outcomes for the families they serve. It is an ongoing process that involves:

1. Collecting data

- formally, through outcome and implementation evaluation activities, focus groups, needs assessments, self-assessment, peer review, and study of research findings.
- informally, through self-reflections and direct or indirect feedback from participants, staff, funders, and other stakeholders.

2. Reviewing and analyzing data

- formally, in the course of staff supervision, full staff meetings, board meetings
- informally, through daily discussions with staff and participants and self-assessment
- of job performance
- Case record reviews and document reviews

3. Adjusting practices based on findings

- formally, at the agency level by adopting new practices, programs, policies, and
- procedures based on findings
- informally, by making personal adjustments to improve job performance

Core Components (sometimes referred to as key elements or active ingredients) These are the key services or activities of an evidence-based program that have been demonstrated or are believed, based on program theory, to lead to the identified program outcomes. These components must remain intact during any implementation of that program.

Evidence-Based Practices These are approaches to prevention or treatment that are validated by some form of documented scientific evidence. This could be findings

established through scientific research, such as controlled clinical studies, but other methods of establishing evidence are valid as well. There are different types of evidence based practices; these include “supported” or “well-supported,” based on the strength of the research design.

Evidence-Based Programs use a defined curriculum or set of services that, when implemented with fidelity as a whole, have been validated by some form of documented scientific evidence. Different types of evidence-based programs include “supported” or “well-supported,” based on the strength of the research design.

Evidence-Informed Practices use the best available research and practice knowledge to guide program design and implementation within context. This informed practice allows for innovation and incorporates the lessons learned from the existing research literature.

Fidelity This means implementation of an evidence-based program faithful to the core components of the original model and implemented as it was intended.

10. Fidelity Measures These evaluation measures specifically monitor the faithfulness of implementation to the core components of the model. This measure allows programs to understand if outcomes are based on the model or are attributed to other, possibly unknown, factors.

Implementation Plan This plan serves as the template for a program manual and documents key program components and specifies activities, resources, staff training, and evaluation components, among other things.

Indicators (sometimes referred to as performance objectives, performance targets, objectives) Indicators answer the question: What is it that tells someone that an outcome has been achieved? Indicators are concrete, specific descriptions of what will be measured to judge a program’s success. An indicator can include the number or percentage of participants projected to achieve the outcome.

Logic Model A logic model is a map of the program. It is a simple, logical illustration of what the program does, why the program does it, and how observers will know if the program is successful. There is a wide variety of logic model formats, but most have the same key components. The elements of a logic model will become clearer as you go through the logic model building process. Although the process is laid out step by step, you will need to make sure that decisions made in later steps still match choices you made earlier in the process.

Outcomes (sometimes referred to as goals, objectives) If the program is successful in providing services, what changes will program participants experience? Generally, outcomes describe who... will do... what as a result of program services. Outcomes can be short-term, usually changes in attitude, beliefs, and knowledge; intermediate, which can be developing and practicing new skills; or long-term, including permanent changes at an individual level or changes that create an impact on larger social structures.

Program Developer The program developer is the originating source of an evidence-based program or practice model. This may be an individual or an institution. Before considering implementing an existing program, access to this individual or institution should be explored. Program developers have a highly varying degree of ability to help implement further replications of their model. Their availability for consultation, willingness to provide technical assistance or on-site training, and ability to answer questions regarding possible adaptations to their model should be known and considered when identifying a possible

program for implementation.

Resources (sometimes referred to as inputs or investments) Resources detail what the program needs to provide services. Is it food for a parent education group? A curriculum? Does the staff need any specialized training? Will child care, transportation, or a meeting space need to be provided? Think of this as a budget justification.

Target Population (sometimes referred to as participants, consumers, audience) This is a description of the population the program serves or plans to serve. As specifically as possible, identify the people who will receive the services.

**Definitions taken from the Friends National Resource Center for CBCAP website*

APPENDIX F

ON-LINE CONTRACT DOCUMENTS AND RESOURCES

On-Line Required Application Documents and Corresponding Instructions:

- [Application Checklist](#)
- [Direct Client Services Face Sheet](#)
- [Direct Client Services Face Sheet Instructions](#)
- [Logic Model Template](#)
- [Implementation Checklist](#)
- Worksheet 1 – [Board Member Profile](#)
- [Capacity Checklist](#)
- Worksheet 2 – [Anticipated Revenue Summary](#)
- Worksheet 3 – [Funding Chart](#)
- Worksheet 4 – [Reimbursement Acknowledgement](#)
- [Budget](#)
- [Budget Narrative Sample](#)
- [Budget Instructions](#)
- [Conflict of Interest Form](#)
- [No Overdue Tax Form](#) (non-governmental agencies)
- [501\(c\)3 Status Form](#) (non-profit agencies)
- [Verification of Tax ID](#) (governmental agencies)
- [Sample DSS MOA](#)
- [Disqualification Factors Acknowledgement](#)
- [Acknowledgement of Receipt](#)

On-Line Contract Reference Materials:

- [Model Fidelity Checklist](#) (sample)
- [Questions to ask program developers when choosing an EB/EI program](#)
- [Program Comparison Tool](#)
- [Performance Status Monitoring/Quarterly Reporting Tool](#) – Family Support
- [Performance Status Monitoring/Quarterly Reporting Tool](#) – Respite
- [Administrative Cost Reimbursement Form 1571](#) (Sample)
- [Notice of Certain Reporting & Audit Requirements](#)
- [Budget and Contract Amendments](#)
- [Tips for Drafting a contract budget narrative](#)
- [General contract reference guide](#)
- [Monitoring Notification Letter](#)
- [North Carolina Community Based Child Abuse Prevention \(CBCAP\) FFY 2011 Application and 2010 Annual Report](#)
- [Indirect Costs](#)

Other Helpful Links:

- The Department of Health and Human Services' Office of Procurement and Contract Services' website is <http://opcs.dhhs.state.nc.us/default.aspx>
- The Department of Health and Human Services' Office of the Controller' website is <http://www.dhhs.state.nc.us/control/index.htm>
- Prevent Child Abuse North Carolina <http://www.preventchildabusenc.org/>

- FRIENDS National Resource for Community Based Child Abuse Prevention <http://friendsnrc.org/>
- U.S. Department of Health and Human Services, Administration for Children and Families, <http://www.acf.hhs.gov/>
- The Center for the Study of Social Policy (Strengthening Families Initiative) <http://www.cssp.org/reform/strengthening-families>
- Child Welfare Information Gateway <http://www.childwelfare.gov/preventing/>
- University of Kansas Community Toolbox http://ctb.ku.edu/en/tablecontents/chapter_1003.aspx
- National Clearinghouse on Families and Youth (organization and community toolkit) <http://ncfy.acf.hhs.gov/publications/guide-to-starting-and-managing-a-youth-program/organization>
- The Finance Project <http://www.financeproject.org/index.cfm?page=22>
- Grant Writing <http://www.grantstation.com/>