

COMBINED IN-HOME SERVICES ANNUAL REPORT 2024



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COMBINED IN-HOME SERVICES ANNUAL REPORT 2024

Executive Summary

ESSB 5950 (2024) Section 227 (26) states: "By December 1, 2023, and annually thereafter, the department shall provide a report to the legislature detailing combined in-home services expenditures and utilization, including the number of families served and a listing of services received by their families." The Department of Children, Youth, and Families (DCYF) has a contracted suite of services called Combined In-Home Services (CIHS). These services are authorized and described under RCW 74.14C.020 (Intensive Family Preservation Services and Family Preservation Services) and are family-focused, behavior-oriented, in-home counseling, and support programs. This report includes an overview of the specific service types under CIHS and DCYF's fiscal year (FY) 2024 expenditures (\$15,992,853). This represents 4,244 cases being provided CIHS, which is 12.2% of the totals cases serviced in Child Welfare. Efforts are underway to strengthen DCYF's infrastructure to ensure that expanded services are high-quality, culturally responsive, and available to all families who could benefit.

Introduction

Combined In-Home Services (CIHS) are a suite of contracted parenting and family support services available to families involved with DCYF child welfare. They consist of: Family Preservation Services (FPS), Intensive Family Preservation Services (Homebuilders), Crisis Family Intervention (CFI), SafeCare, Promoting First Relationships (PFR), Parent-Child Interaction Therapy (PCIT), Incredible Years (IY), Positive Parenting Program (Triple P) and Functional Family Therapy (FFT). These services address a variety of parental related needs such as attachment/bonding, structure and routine, counseling, coaching, concrete supports, connections to community resources, and crisis stabilization. They range from crisis oriented, birth to small-child Evidence Based Practices (EBPs), and school-aged to adolescent EBPs.

EBPs are supported by research to achieve specific outcomes within a population. In 2012, Washington State enacted House Bill (HB) 2536, requiring that state agencies serving children move toward greater use of Evidence-Based Practices (EBPs) in their service portfolios. The affected state agencies included two of the three DCYF agencies of origin - the former Children's Administration and the former Juvenile Rehabilitation Administration. HB 1661, enacted in 2017, brought these two former Administrations together with the Department of Early Learning, to form the current Department of Children, Youth, and Families. Per HB 2536, DCYF's EBPs for child welfare involved families in the CIHS portfolio are well-supported or promising practices identified by the Washington State Institute for Public Policy (WSIPP) Inventory of Evidence-Based, Research-Based, and Promising Practices for Prevention and Intervention Services for Children and Juveniles in the Child Welfare, Juvenile Justice, and Mental Health Systems. Some are also identified in the Family First Prevention Services Clearinghouse for positive outcomes with the child welfare population (e.g., improved parent-child attachment, placement prevention, successful reunification, and decrease in parental stress). See Appendix for details of each individual service. This report provides the details requested in ESSB 5187 (2023) Section 227 (26) as well as DCYF strategies to increase CIHS utilization.

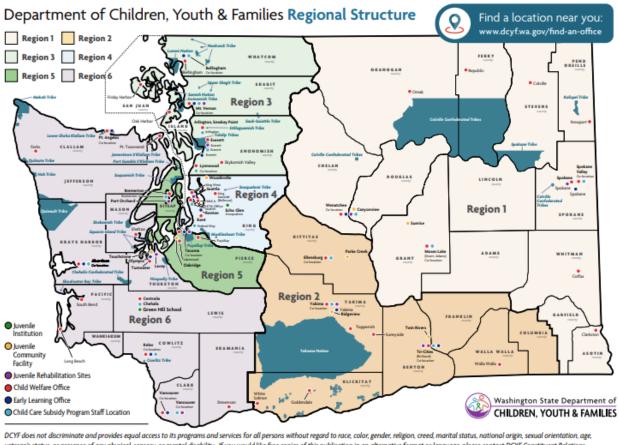
Fiscal Year 2024 CIHS Expenditures by Service Type

The table below shows expenditures for FY 2024 for each CIHS type and the total for all. It does not exclude families who received more than one CIHS during that time or distinguish between case type (e.g. FAR, CWFS).

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Service Type	FY2024 Expenditures
Crisis Family Intervention	\$ 124,637.21
Family Preservation Services	7,388,928.50
Functional Family Therapy	608,323.71
Home Builders	4,561,358.86
Incredible Years	706,769.78
Parent Child Interaction Therapy	331,102.95
Promoting First Relationships	43,479.51
Safe Care	2,091,681.84
Positive Parenting Program (Triple P)	514,795.31
Total	\$ 16,371,077.67

DCYF operates utilizing a regional structure, as seen below.



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In Region One and Two there is a <u>Network Administrator (NA) for CIHS</u>. The NA provides oversight, support, management, monitoring, and enhancement of a network of high quality, effective service providers.

Calendar Year 2023 Data

Calendar Year 2023 is the most recent full set of data available showing how many families received a CIHS. This is a retrospective summary of those data. DCYF has grouped CIHS into categories of service types: Crisis Services (Family Preservation Services, Homebuilders, and Crisis Family Intervention); young-child EBPs (Promoting First Relationships, Incredible Years, SafeCare, and Parent-Child Interaction Therapy); and school aged-adolescent EBPs (Triple P and Functional Family Therapy). Below are tables outlining the total counts of cases and children who received a CIHS in 2023 as well as the percent of cases and children who received a CIHS compared to the total number of cases and children involved in child welfare. It is common for families to receive more than one CIHS (e.g., FPS and then an EBP) given one service may not address all the needs a family presents with, or their needs may evolve; therefore, there are duplicate counts of cases and children in the sets of data. Overall, there were 34,779 families involved in Child Welfare in 2023 and 12.2% received a CIHS. While this report shows retrospective data from 2023, DCYF is currently in the process of hiring a position to assist with ongoing data analysis in what has been named as the Service Penetration Report. DCYF should have regular snapshots of this data set to analyze and report out for future legislative reports.

DCYF has been able to make some corrections to the previous penetration rate that was completed.

Lessons Learned:

- 1. Denominator (count of all families served by Child Welfare in each Calendar Year) in the updated CIHS penetration rate, DCYF has ensured that any child who was being served through Extended Foster Care (EFC) was excluded from this population. These children are not working towards reunification and/or a permanent plan in the same ways, therefore CIHS would not be offered at the same rate. In addition, if a child was made legally free during that Calendar Year, DCYF also excluded them from the population. For the legally free population, DCYF is working towards achieving permanency, however, reunification would not be the focus.
- 2. Numerator (count of all families who received a CIHS during the time frame their case is opened) in the updated CIHS penetration rate a correction was made to how payments were being calculated, most noticeably within FPS, where payments were being categorized as an FPS payment, although they were not FPS. In addition, the new method is limiting the CIHS payments to those that were made during the year being evaluated.

Table 1. Count of Case and Children in Cases Served Statewide, 2023

	Children age 0-5	Children age 6-17	Total
Cases	18,102	26,846	34,779
Children in Cases	25,383	50,820	76,203

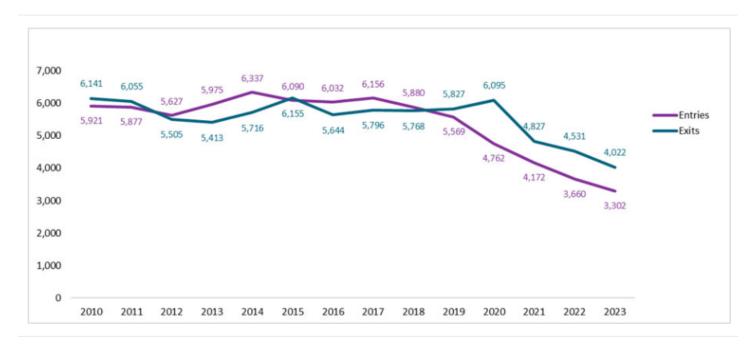
Table 2. Percentage of Children (0-17 and not legally free) Served Through Child Welfare, in Any Program, 2023

	Preservation	Crisis Family Intervention	Homebuilders	Promoting First Relationships	Incredible Years	Safe Care	Parent Child Interactio n Therapy		Functional Family Therapy	Any %	Zero to Five Any %	Six to Seventeen Any %
2018	7.05	0.28	1.37	1.82	2.2	2.03	0.89	2.91	1.91	14.1	14.13	8.18
2019	7.24	0.31	1.5	1.92	2.38	1.99	0.74	3.75	1.8	14.91	13.87	8.75
2021	6.78	0.3	1.11	2.51	2.02	1.62	0.68	3.49	1.44	13.75	13.09	8.65
2022	6.03	0.27	1.13	2.48	1.42	1.72	0.64	3.09	1.39	12.14	11.81	7.34
2023	5.73	0.25	1.17	2.34	1.31	1.92	0.5	3.8	1.22	12.22	11.19	6.79

Source: DCYF, OIAA, Data Analytics

It is important to note that the count of children in out-of-home care continues to decrease. The decreased number of children in care and the fact that most CIHS are currently used in out-of-home cases impacts the amount and type of services needed and the number of families who receive services.

Children Entering and Exiting Out of Home Placement, SFY 2010-2023



Source: DCYF. (October 2023). Out of home exits and entries [July 2009-June 2023]. infoFamlink.

Notes: Entries identify the number of children who entered out-of-home care and were in the Placement and Care Authority (PCA) of DCYF.

Exits identify each child that achieved permanency within each year, dismissing them from the PCA of DCYF.

The table below has a different denominator and only looks at cases where a child was removed during all, or part of, the 2023 Calendar Year, in addition to those children placed on a Trial Return Home and/or In-Home Pre-Fact-Finding Placement and Care Authority (requiring Court intervention and oversight). This would identify which cases may have been offered services to focus on reunification. In 2023, 40.7% of these types of cases received a CIHS.

Table 3. Percentage of Children Served Through Child Welfare When Removal, Trial Return Home and/or In-Home Pre-Fact-Finding Placement and Care Authority Occurred, 2023

	Preservation	•	Homebuilders	Promoting First Relationships	Incredible Years		Parent Child Interaction Therapy		Functional Family Therapy		Zero to	Six to Seventeen %
2018	19.52	0.46	4.38	6.66	8.87	6.44	3.19	10.74	4.15	39.34	39.43	30.88
2019	21.22	0.41	4.7	7.36	10	6.34	2.79	12.83	3.73	42.1	41.54	33.36
2021	20.8	0.3	3.34	9.52	8.4	5.8	2.65	12.29	3.18	40.65	40.74	34.67
2022	19.68	0.26	3.78	10.51	6.2	6.85	2.59	12.41	3.41	38.85	39.01	33.55
2023	20.51	0.35	4.3	10.72	6.31	8.06	2.17	14.63	2.31	40.69	40.89	33.14

Source: DCYF, OIAA, Data Analytics

Additionally, the last table below also has a different denominator, looking at cases that were served by Child Protective services (CPS), Family Reconciliation Services (FRS), and/or Family Voluntary Services (FVS). These would not include a case where a child spent one (1) or more days in out-of-home care. This identifies cases where services were offered to stabilize the family unit. In 2023, 7.4% of these types of cases received a CIHS.

Table 4. Percentage of Children Served Through Child Welfare, in CPS, FRS and/or FVS, 2023

	Family Preservation Services		Homebuilders	Promoting First Relationships	Incredible	Safe	Parent Child Interactio n Therapy	PPP	Functional Family Therapy			Six to Seventeen Any %
2018	4.1	0.24	0.72	0.43	0.3	0.79	0.24	1.62	1.62	8.21	6.94	4.43
2019	3.93	0.3	0.78	0.44	0.3	0.83	0.18	2.21	1.52	8.48	6.41	4.52
2021	3.57	0.31	0.64	0.67	0.35	0.54	0.16	2.07	1.2	7.6	5.89	4.43
2022	3.31	0.27	0.66	0.55	0.27	0.5	0.17	1.78	1.14	6.83	5.39	3.76
2023	3.23	0.23	0.67	0.62	0.28	0.67	0.15	2.49	1.11	7.41	5.15	3.56

Source: DCYF, OIAA, Data Analytics

This data demonstrates an area of improvement. CIHS are more frequently provided when a child is removed from their home (40.7% in 2023) versus not (7.4% in 2023). This is an area DCYF will focus on during the next year. DCYF plans to work on identifying barriers to offering CIHS for CPS, FRS, and FVS cases and solutions to increasing usage of CIHS.

Strategies to Increase CIHS Utilization

Root Cause Analysis

DCYF is reviewing referral trends across the state to identify patterns and begin a root cause analysis to increase CIHS referrals. Currently, the data are insufficient to pinpoint a root cause to make needed changes. By engaging in continuous data feedback over time, DCYF intends to better understand referral pattern behavior and address barriers or practice issues. In Region 1 and 2 (Eastern Washington), the Network Administrator has some data on supply and demand that is useful in determining referral trends and what services are needed and where. Currently, DCYF does not have similar data for the rest of the regions as those

service referrals are sent directly to individual contractors. However, in October 2024, DCYF will begin collecting the following data from each CIHS provider on a quarterly basis: service capacity, count of accepted referrals, and count of referrals not accepted with identifying reasons. This data will be useful for understanding capacity and referral trends which will inform what services are needed and where.

Collecting Weekly Service Availability Reports

DCYF program staff are collecting weekly service availability reports from CIHS providers to compare with provider reported capacity. This analysis gives a snapshot into unfilled capacity, which they then share with regional leadership and caseworkers in the field to enhance CIHS referrals from child welfare staff.

Statewide Provider Directory

During FY 2023, program staff developed a statewide provider directory. Prior to its development, service availability was shared only locally/regionally which created barriers for accessing services across regions. In November 2023, the statewide provider directory was launched. It lists contracted child welfare providers statewide, their availability to accept referrals, specialty services and/or languages. CIHS providers enter their availability weekly. The directory offers additional resources to include education about CIHS, a link to report contract complaints, and a report of service needed tool to report when a needed service is not available. The report of service needed tool allows for data collection that informs expansion needs. The statewide provider directory streamlines availability reporting and supports accessibility to available and appropriate services.

Telehealth

DCYF piloted telehealth service delivery options for CIHS in Regions 1 and 2 from August 2023 through September 2024. The pilot came from recommendations made by a workgroup comprised of DCYF field operations staff, leadership, and CIHS providers and was approved by executive leadership and the child welfare leadership team. Ultimately, it was determined that offering telehealth delivery options for CIHS allows for additional flexibility when safe and appropriate. CIHS will be available via telehealth statewide when the CIHS contracts renew, in October 2024.

FPS Upgrade

DCYF program staff convened a workgroup December 2023 through January 2024 to explore upgrading the most widely used CIHS (Family Preservation Services). The workgroup included internal and external partners as well as Tribal partners. The recommendations for FPS moving forward included: incorporating Motivational Interviewing (MI) as a requirement of service provision and allowing for an extended duration of service, up to six months.

Motivational Interviewing is a strength-based, evidence-based communication method that professionals can use to support families. MI is an approved Evidence-Based Practice (EBP) on the Family First Preventative Services Act (FFPSA) Clearing House. This will create an opportunity to receive IV-E reimbursement for qualifying cases, in the future, once MI is being delivered to fidelity.

By working towards implementing the FPS upgrade, families will receive a more holistic service with a less restrictive timeline. This will allow providers to adapt the service to better meet the needs of each family's

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culture as well as other unique needs. With the ability to include cultural adaptations paired with motivational interviewing, DCYF expects to see an increase in service engagement from AI/AN/Black and African American families which will directly reduce disproportionality. Motivational Interviewing works well with culturally diverse populations; it elicits the client's goals in a collaborative and client-centered approach to pursue behavior change.¹

DCYF will begin implementing the FPS Upgrade in Fall 2024. An evaluation of the changes to FPS will be conducted by DCYF's Office of Innovation, Alignment and Accountability (OIAA). To maintain the upgrade, DCYF submitted a Decision Package for the 2025 legislative session that, in part, includes enhancing Family Preservation Services to include ongoing Motivational Interviewing (MI).

Strategies to Increase Quality and Access to CIHS

Performance-Based Contracting (PBC)

DCYF's implementation of Performance Based Contracting (PBC) supports CIHS work to deliver high quality services through timely service initiation, a completed CANS-F Family Plan for Change, and EBP model fidelity in order to prevent placements, support adoptions, achieve placement stability and/or reunification in support of DCYF's strategic goal to safely reduce entries and re-entries into child welfare systems.

With the support of the DCYF PBC initiative, in 2019 CIHS program staff examined and planned how PBC could be implemented with contracted service providers within the CIHS array. From 2020-2024 formative PBC work continued and included a program literature review and theory of change, development of a logic model, review of key services data and completion of a retrospective data analysis. This research information was then used to inform the development of programmatic level PBC service, quality, and outcome metrics.

In 2024, CIHS and OIAA staff continue to work together to build a PBC data dashboard utilizing PBC service, quality and outcome metrics. PBC dashboards are a tool for internal DCYF program staff and contracted service providers to review data, progress to targets and drive high quality services. The creation of the PBC CIHS dashboard will allow contracted service providers to work towards achieving PBC results while focusing on continuous improvement together. DCYF anticipates that once finalized, the statewide data dashboard for CIHS will be publicly available.

Updating Caseworker Trainings

DCYF has been working with the University of Washington Alliance training partners to update e-learnings to enhance worker knowledge of available services, create holistic service referrals, and better match services with family needs. The Alliance finalized Part 1 of 2 in April of 2024; they will finalize part 2 of 2 by Fall 2024.

Community Pathway Development

DCYF is developing community pathway opportunities under the Family First Prevention Services Act (FFPSA) to further prevention efforts and access to services further upstream. These efforts will create opportunities

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¹ Self KJ, Borsar B, Ladd BO, Nicolas G, Gibson CJ, Jackson K, Manuel KJ. Cultural adaptions of motivational interviewing: A systematic review. Psychol. Serv. 2023;20(Suppl 1): 7-18. Doi: 10.1037/ser0000619. Epub 2022 Feb 7. PMID: 35130010; PMCID: PMC10161132 Original Date: December 11, 2024 | Revised Date: January 10, 2025

for families who are not child welfare involved but who are closely adjacent to the system and have high needs that could lead to involvement to engage in a CIHS via prevention pathway. In December 2024 DCYF will submit the next 5-year State FFPSA plan to the Children's Bureau that will include community pathway design, and additional services that have been approved in the Prevention Services Clearinghouse.

Intercept Pilot

SB 6109 Section 204 directs the Department of Children, Youth and Families (DCYF) to provide funding and support for two pilot programs to implement an evidence-based, comprehensive, intensive, in-home parenting services support model to serve children and families from birth to age 18 who are involved in child welfare, children's mental health, or juvenile justice systems. DCYF received proviso funding for pilot programs intended to prevent or limit out-of-home placement through trauma-informed support to the child, caregivers, and families with three in-person, in-home sessions per week and on-call crisis support 24 hours a day, seven days a week. The pilot program will be the Youth Villages model Intercept. Presently, DCYF is collaborating with Youth Villages, the developer of Intercept, and working towards procurement.

Culturally-Specific Prevention Services Pilots

From 2014 to 2021, data on Racial/Ethnic Disproportionality Ratios for child welfare removals in Washington state revealed that Native children were placed in out-of-home care at a rate 2.6 times higher than their representation in the general population, while Black/African American children at a rate 1.38 times higher. Moreover, in 2020-2021, diagnostic work conducted by DCYF (with support of the Harvard Government Performance Lab) highlighted a critical shortage of culturally responsive and specific services for families as well as a lack of service providers located within and proximate to the Native, Black and African American communities. These service gaps have a significant impact on family engagement and completion of intervention services. To help address the observed disproportionalities and to build a more equitable child welfare system, DCYF has made an investment to expand culturally responsive and specific programs under its Service Continuum by releasing three procurements that occurred in May of 2023 for the first cohort of the Request For Application (RFA) for Services for Native families, April of 2024 for the second cohort of the RFA for Services for Native Families, and April of 2024 for the Request For Proposal (RFP) for Services for Black and African American Families. These procurements have resulted in the implementation of five culturally specific piloted service lines for Native Families with the anticipated addition of nine additional services lines for Native, Black and African American communities by the Fall of 2024. These programs include a diverse array of services such as Positive Indian Parenting, the Chicago Parent Program, Indigenous-centered home visiting, lactation and doula services, tribal-based intensive family preservation services, free and culturally responsive mental health services for Black families, fatherhood engagement and mentorship, Native Youth Olympics, traditional language classes, comprehensive wraparound case management, and culturally relevant financial literacy education. DCYF anticipates using the learnings from these pilots to plan for future program expansion, and particularly to help the agency's systems better serve small, rural, and specialized communities where services are often the most difficult to procure and maintain.

Decision Package Requests

For the 2025-2027 biennium, DCYF submitted a <u>Decision Package</u> that included CIHS rates and Positive Indian Parenting (PIP). CIHS providers are unable to maintain sufficient capacity to equitably provide quality services to families who are involved in the child welfare system due to the ebb and flow of referral volume and the impact of <u>HB1227</u> reducing the number of children entering care. DCYF needs to work towards a minimal threshold of capacity statewide that ensures quality services for placement prevention are readily available when families need them most. By implementing key new requirements and support funds, the overall quality and availability of services to families will improve.

DCYF is also requesting funds to implement PIP as a service contract to support families identifying as American Indian/Alaska Native statewide with children ranging from 0-18 years old. There is a notable overrepresentation of American Indian/Alaska Native (AI/AN) children in out-of-home care. Additionally, DCYF is requesting funds to procure for a culturally responsive consultation and training contract. This will support implementation of cultural adaptations to CIHS and will create a resource for contractors to gain knowledge and skills to adapt their curriculums to the unique cultural needs of the families they serve.

Conclusion

In summary, several efforts are underway to strengthen DCYF's infrastructure to ensure that expanded services are high-quality, culturally responsive, and available to all families who could benefit from them. DCYF program staff will continue to utilize and analyze these and other strategies to better meet the needs of those we serve.

Appendix

Crisis Family Intervention

Crisis Family Intervention is a brief in-home crisis intervention service available to adolescents and their families who are experiencing brief conflict. It is for youth ages 12 to 18 and for families in need of support to find immediate and long-term solutions to their conflicts. Services are limited to 12 hours over 45 days.

Family Preservation Services

Family Preservation Services is a family focused, behavior-oriented in-home counseling and support program. It is for children and youth ages birth to 17 and for families to address specific needs and goals. It focuses on reinforcing the strengths of the family and supporting them to gain insight into issues that may result in crisis. Services are limited to approximately 30 sessions, weekly or as needed, within 90 to 120 days but may be extended up to six months, when needed.

Functional Family Therapy

Functional Family Therapy is a strength-focused, family counseling model designed primarily for at-risk youth. It is for youth ages 11 to 18 and families who need support to overcome delinquency, substance abuse, violence and/or who may need support across systems (juvenile justice or schools). It helps control threats to child safety, so children can remain free from harm in their own homes. Services are limited to 12 to 16 weekly sessions over three to four months.

Homebuilders

Homebuilders is an intensive service focused on child safety, crisis intervention, connection to community resources and teaching caregiver's problem solving/life skills. It is for children and youth ages birth to 18 and families when removal from the home is imminent or when reunification is planned within seven days. Services are limited to four to six weeks with an average of 80 hours spent on each case.

Incredible Years

Incredible Years is a parent education program designed to be delivered in group sessions or in the family home. It is for parents with children between the ages of birth to 12 (ages served are defined as: Baby - Birth to 12 months, Toddler - 1 to 3 years, Preschool - 3 to 6 years, School Age - 6 to 12 years). It focuses on the parent-child relationship, managing child behaviors, discipline and working to keep children safely at home. Parents either meet with a group for 2.5 hours or with the provider in-home every week. The standard length of services are: Baby - 8 to 11 weeks, Toddler - 12 to 17 weeks, Preschool - 18 to 21 weeks, School Age - 21 weeks.

Intercept

A program of Youth Villages, offers services to children ages birth to age 18 and their families, who are involved in child welfare, children's mental health and/or juvenile justice systems. Intercept® works to prevent or limit out-of-home placement; services last four to nine months in duration.

Parent-Child Interaction Therapy

Parent-Child Interaction Therapy is a program for young children and parents that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns. It is for children ages 2 to 7 and families when parent-child interaction patterns, child behavior, and social and emotional development are primary areas of concern. It involves live coaching in which parents are coached by the therapist through an earpiece while the therapist observes their interactions. Services are limited to 12 to 15 sessions.

Positive Parenting Program

Positive Parenting Program is a coaching system of parenting and family supports designed to promote positive parenting and caring relationships between parents and children. It is for children and youth ages 2 to 18 and families when child behavioral issues are the primary area of concern and a primary safety issue for the family is directly related to the behavioral issues of the child. The standard length of service is 10 to 14 weekly sessions that are 50 to 90 minutes each.

Promoting First Relationships

Promoting First Relationships is a system of parenting and child supports designed to promote sensitive and secure relationships between the child and caregiver. It is for children ages birth to 5 and families when the quality of the parent-child relationship is the primary area of concern. It supports parents to experience joy and confidence in their relationships with their infants and toddlers. Services are limited to 10 to 14 weekly sessions that are 60 minutes each.

SafeCare

SafeCare is an eco-behavioral model that provides at-risk parents with direct skill training to prevent child maltreatment. It is for children birth to 5 and their families when basic parenting skills, understanding and management of child's illness and/or injuries and home safety are the primary areas of concern. Services are limited to 18 to 22 weekly visits that are 60 to 90 minutes each; it includes three modules that last approximately six weeks each.