

2018

**BLACK FAMILY DEVELOPMENT, INC.
CONTINUUM OF CARE
LOGIC MODEL OF ACHIEVED OUTCOMES**

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes			
<p style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 2em; font-weight: bold; margin: 0;">JUVENILE JUSTICE</p>	<p>Detroit's Eastside zip code region hosts the highest incidence of youth crime in Wayne County (Skillman Report), in addition to the disproportionately high risk factors specifically in zip code 48205 that impact juvenile crime rates: substantiated and unsubstantiated incidents of abuse/neglect and the highest number of returning citizens.</p> <p>Juvenile rehabilitation requires the collective investment of treatment providers, adjunct supportive programming (Intensive Family Services), and permanency planning beyond wardship termination.</p>	<p>Care Management Organization (CMO)</p> <p>Integrated Services Program (ISP)</p> <p>Wraparound</p> <p>Youth Assistance Program (YAP)</p> <p>Utilization Review (UR)</p>	<p><u>Treatment Models & Approaches</u></p> <p>Balanced and Restorative Justice (BARJ)</p> <p>Cognitive Behavioral Therapy (CBT) Interventions</p> <p>Wraparound Model</p> <p><u>Prevention Models & Approaches</u></p> <p>Restorative Practices</p> <p>Communities That Care: Social Development Research model</p> <p>Lion's Quest: Skills for Adolesc</p> <p>Holland's Career Inventory</p> <p><u>Resources</u></p> <p>23 Staff</p> <p>Wayne Co. Department of Health, Veterans, Community Wellness (DHVCW), Wayne County Dept of Health and Human Services (DHHS), Detroit Wayne Mental Health Authority (DWMHA), Detroit Police Department, Title 4-E, and Child Care funds</p> <p>Wayne Co. Third Circuit Court</p> <p>Participation in Wayne County System of Care</p> <p>Juvenile Justice Services Handbook</p> <p>Electronic Child & Adolescent Functional Assessment Scale</p> <p>Mileage, Cell Phones, Juvenile Agency Information System (JAIS)</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> Assessments to determine placement and treatment needs Placement of youth in a treatment track Complete Service/Treatment Plans timely Maintain electronic case records on the Juvenile Agency Information System (JAIS) Monthly case manager, and weekly treatment, face-to-face contacts with youth and family Ensure weekly face-to-face contact by treatment providers Represent the youth and agency's interest in Court and submit to youth/family Progress Review Hearing before the Jurist of record Petition Court for security level change as needed On-Site drug testing and psychological services In-home family-centered treatment <p><u>Specialized Services</u></p> <ul style="list-style-type: none"> Wraparound implements a first-ever partnership between the Mental Health and Juvenile Justice to ensure cross-systems treatment of adjudicated/at-risk youth/families. Random drug screens for youth as ordered Updated CAFAS completed to determine client's/family's progress. Program-specific utilization review audits Four prevention tracks to serve as after-school diversion programming to prevent at-risk youth from delinquent behavior (Youth Assistance Program). Weekly Length of Stay (LOS) Committee meetings to review appropriate placement for youth in detention and residential facilities. 	<p>Number of CMO case managmt recipient youth & families in 2018: 207</p> <p>Number of juvenile justice treatment model youth recipients & families in 2018: 135 [115 (ISP); 20 (Wrap)]</p> <p>Number of juvenile justice youth prevention recipients in : 69*3</p> <p><u>UR outputs</u></p> <p>*110 UR and LOS & Care Path audits conducted</p> <p>*40-Length of Stay meetings</p> <p>*3 A decrease of 10 from 2017</p>	<p><u>Juvenile Justice Case Management Services for Adjudicated Youth/Families:</u></p> <ul style="list-style-type: none"> 100% (n=207) juveniles remained free of felony convictions while enrolled. 90% of juveniles remained free of all crimes, including felony convictions, after 2 years in the community. Network of residential & community providers. <p>Outcome Data Sources: Court's Oddeyye system, MI OTIS Tracking System; CRIM, CMO Preliminary and Annual Reports</p> <p><u>Juvenile Justice Treatment Services for Adjudicated Youth/Families:</u></p> <ul style="list-style-type: none"> 96% of Wraparound consumers reported service satisfaction and daily functioning improvements. 100% of newly placed ISP youth began treatment within 21 days of acceptance. 80% of juvenile offenders with special needs (i.e., medical, MH, sex offenders, substance abusers) were successfully placed youth began treatment within 30 days of acceptance. <p>Outcome Data Sources: CMO MIS / MFR Reports; ISP Population Report;</p> <p><u>Juvenile Justice Prevention Services:</u></p> <ul style="list-style-type: none"> 96% (n= 47 out of 49 discharged youth) of participated youth have remained free of the juvenile justice system. <p>Outcome Data Sources: Pre-/Post Tests; Roster</p> <p><u>Consumer Generated Service Improvements:</u></p> <ul style="list-style-type: none"> CMO youth and families expressed need to have "real-time" information regarding their treatment planning. As a result, CMO and ISP staff were re-trained on administering the Child and Adolescent Functional Assessment Scale in order to provide empirical assessment on each youth's level of functioning quarterly. Additionally, performance-based incentive plan was derived for CMO youth. 			
	<table border="1"> <thead> <tr> <th colspan="2" style="background-color: #e0f0ff;">2018 Youth Served Per Level of Care (Duplicated Count)</th> </tr> </thead> <tbody> <tr> <td>Community Based</td> <td>46*</td> </tr> <tr> <td>Non Secure</td> <td>56*1</td> </tr> <tr> <td>Secure</td> <td>42*2</td> </tr> </tbody> </table>	2018 Youth Served Per Level of Care (Duplicated Count)		Community Based	46*	Non Secure	56*1	Secure	42*2
2018 Youth Served Per Level of Care (Duplicated Count)									
Community Based	46*								
Non Secure	56*1								
Secure	42*2								

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes
MENTAL HEALTH	<p>Individual, family, and group treatment for mental health disorders increases the youth's/family's capacity to function self-sufficiently, and avoid out-of-home placement.</p>	<p><u>Treatment</u> Supportive Techniques Assisting and Growth Empowerment Solutions (STAGES)</p> <p>Empowering Parents and Innovating (Strengthening) Children (EPIC)</p> <p>Wraparound</p> <p>Parent Management Training – Oregon (PMTO)</p> <p>School – Based Mental Health Treatment and Services Prevention</p> <p>Youth Peer Support</p> <p><u>Lead Advocate Work</u></p> <p>System of Care: - Lead Youth Advocate</p>	<p><u>Treatment Models & Approaches</u></p> <p>Cognitive Behavioral Therapy (CBT) Interventions/BFDI CBT Curriculum</p> <p>Wraparound Model</p> <p>Trauma-Focused Cognitive Behavioral Therapy</p> <p><u>Resources</u></p> <p>24 Qualified Mental Health Professional Staff 2.5 Wraparound staff 2 Psychiatrists 1 Billing Adjudicator 1 Marriage/Family Tx intern 2 Youth Advocates; 1 Lead</p> <p>Youth Leadership Curriculum developed by East Region (BFDI) Youth United</p> <p>MCBAP Credentialed Mental Health Staff demonstrating co-occurring disorder competency</p> <p>Detroit-Wayne Mental Health Authority (DWMHA) Funding</p> <p>CareLink Contract</p> <p>Electronic Child & Adolescent Functional Assessment Scale (eCAFAS)</p> <p>Grand Rounds and Wayne State University Trainings</p> <p>10 schools receiving school-based services, and other schools partnering on behalf of their students' services</p> <p>RedCap Fidelity Software</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> Assessments (CAFAS, LOCUS, MIDAS, Trauma) Screenings, Diagnoses Case Management Home- and community-based interventions Strength-based, Person-centered approach Child/family safety education and techniques Crisis Interventions & 24/7/365 availability Educational support, advocacy, and goal setting Monthly client satisfaction surveys Staff growth and development trainings <p><u>Integrated Physical Health / Behavioral Health Care:</u></p> <ul style="list-style-type: none"> 70 persons served in year 1 of BFDI's physical health clinic, in partnership with Detroit Wayne County Health Authority (D.B.A "Authority Health") One attending Pediatrician staffs the clinic for BFDI youth ages 5-18. <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> Trauma – Focused Cognitive Behavioral Services Wraparound Model Parent-Management Training – Oregon Medicaid billable Youth Peer Support Medicaid billable Parent Support Partner Psychiatric services Therapists provided individual and family therapy, educational mentoring, employment and independent living skills building, transportation services, anger management, advocacy, mentoring services, and targeted case management. Cognitive-behavioral therapy Risk / Strengths and Needs / Psychosocial Assessments; Individual Plans of Service; Release Plans; Crisis/Safety Plans; and Progress Notes Cognitive-Behavioral Skill-building strategies Substance Abuse Prevention Education Restorative Practices Model Transportation Medication Management as necessary 	<p>Number of children's treatment recipient families in 2018: STAGES: 129 EPIC: 58</p> <p>Number of youth who served at a home-based level of care: 22</p> <p>Number of recipients of Parent – Mgmt Training – Oregon model services: 8</p> <p>Number of recipients of Trauma-Focused Cognitive Behavioral Therapy: 21</p> <p>Number of youth cont'd beyond age 18 for medical necessity: 3</p>	<p><u>Mental Health Treatment Services:</u></p> <ul style="list-style-type: none"> 97.5% of youth served for outpatient mental health (184 out of 187) remained at home, not in out-of-home care, including hospitalizations. 1 staff completed MDHHS-funded nat'l Trauma-Focused Cognitive Behavioral Therapy cohort. 6 additional staff joined training cohort in 2018. Oct.2017 – December 31, 2018 eCAFAS data indicated functional improvements in youth age 7-18 participating in behavioral health services. <ul style="list-style-type: none"> 146 consumer assessments were completed with both a baseline and most recent score to allow for comparison Mean age of tested youth was 12 64% youth tested were male 40% of the total population demonstrated symptoms of Pervasive Behavioral Impairment (PBI), which untreated is an indicator of mental illness into adulthood. 71% of those youth improved & no longer met the PBI criteria at most recent assmt. BFDI ePECFAS data for consumers aged 4-6 from October 2017-December 31, 2018: <ul style="list-style-type: none"> Mean age of tested youth was 6 71% youth tested were male Average PECFAS total score at Initial Assessment was 93, and decreased their mental health symptoms by 17 points at their most recent assessment. <p>Outcome Data Sources: Functional Assessment Systems; Program Roster</p> <p><u>Medicaid Expansion: School – Based Mental Health Prevention and Treatment</u></p> <ul style="list-style-type: none"> BFDI's school-based contract with the Detroit-Wayne Mental Health Authority provided the following services throughout 10 schools: <ul style="list-style-type: none"> 686 prevention services to 1,669 students Mental health education to 892 educators, school professionals, and parents in 67 distinct training groups 1,514 mental health treatment to 99 students

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes
SUBSTANCE ABUSE	Evidence-based models of treatment and prevention yield measurable service outcomes.	<p>Detroit Wayne Mental Health Authority (DWMHA): - HOPE (OP) - F.R.E.E. (<i>Finding Resolution Everyday through Medicaid</i>)</p> <p>DWMHA Jail Plus Mental Health and Substance Use Disorder Relapse Prevention Services, managed by the Wayne County Department of Health, Veterans, and Community Wellness Clinical Services Division – Adult Community Corrections</p>	<p><u>Treatment Models & Approaches</u> Motivational Interviewing Cognitive Behavioral Therapy National Drug Control Policy Principles of Effective Substance Abuse Treatment Relapse Prevention</p> <p><u>Prevention Models & Approaches</u> Lion’s Quest: Skills for Adolescence Center for Substance Abuse Prevention-endorsed prevention curriculum for children of addicted parents Strengthening Families curriculum Community-Based Process Prevention Model</p> <p><u>Resources</u> 3.0 FTE MCBAP credentialed Staff; .50 FTE admin. asst Detroit Wayne Mental Health Authority funding Substance Abuse Treatment and Prevention Licenses MI Administrative Rules ACCESS Urinalysis Lab Partners: Dept of Corrections, CMO, faith & comm orgs Bus Tickets, Mileage, Addiction screening, GAINS, ASAM, MHWIn, Cell Phones, Office Space/Equip</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> • Individual, group, marriage, co-dependency, and family, counseling • Didactic group education • Support services to clients in the following areas: financial, medical, optical, dental, employment, housing, vocational, educational, psychological, child care, clothing, food, and mental health services • Education about alcohol, tobacco, and other drugs (ATOD) and its negative effects on individuals, families, and communities • Assessments, service plans, community referrals, resource linking, monitoring, follow-up, advocacy, and aftercare linkages • Transportation assistance (bus tickets/staff vehicles) <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> • Degreed treatment staff, along with a PhD Supervisor/Clinician, and PhD Vice President of Clinical Services • Intensive Outpatient, Prevention, and Relapse Prevention Services Available • Outpatient –group/didactic/individual/family therapy 1-2 days/week for 1.0-2.0 hours/day • Court-referred Mental Health and Substance Use Relapse Prevention (Drug Court: 2 hours for 10 sessions; Mental Health: 1.5 hours for 15 sessions; 1:1 Case management services for 1 hour weekly) • Relapse prevention focused on enhancing self-control; anticipating recovery challenges; rewarding non-drug use • Contingency Management • Urine Screens • Referrals to AA/NA support groups • Parent training of drug prevention techniques/education to reduce their children’s risk of ATOD use (FREE) • Advancing development/ enforcement of ATOD ordinances, regulations, and legislation (FREE) • Provision of competent services to co-occurring disorder (mental health and substance abuse) affected consumers and their families 	<p>Number of substance abuse treatment customers in 2018: 62</p> <p>Number of substance abuse Jail Plus Relapse customers in 2018: 133</p> <p>Number of substance abuse Jail Plus customers referred for Case Management only in 2018: 8</p> <p>Number of substance abuse prevention recipients to avert addiction in 2018: 599</p>	<p><u>Substance Abuse Treatment Services:</u></p> <ul style="list-style-type: none"> • 82% of consumers successfully completed the program. <p><u>Jail Plus Drug Court/Mental Health Court Relapse Prvtn Services:</u></p> <ul style="list-style-type: none"> • 63% (n=70 out of 112) of consumers successfully completed the program. • 102 Relapse Prevention mental health and substance use disorder groups, held on Saturdays at the Circuit Court <p><u>Substance Abuse Prevention Services:</u></p> <ul style="list-style-type: none"> • 56 parent Alcohol, Tobacco, and Other Drug and prevention specific support groups. • Prevention staff collaborated in 5 community Substance Use prevention team events • Staff provided Strengthening Families educational programming at a partner Promise Neighborhood agency, Youth Connection. • Four 6-week session Parenting and family engagement trainings held for 12 families. <p>Outcome Data Sources: Program activity logs; Sign-In Sheets; MPDS Data System Reports; Educational curriculums’ pretest and posttests; Detroit Wayne Mental Health Authority MHWIn enrollment data; Progress Notes; Discharge Summary; JPlus Case Mgmt System; Self-Report; ACCESS Laboratory Drug Screen Results; JIS</p> <p><u>Consumer Generated Service Improvements:</u></p> <ul style="list-style-type: none"> • In effort to improve knowledge acquisition, the program implemented interactive journals into group topics. Journals assist consumers with recording their own cognition and behavioral improvements, and are a hands-on recovery tool post relapse prevention group participation.

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes
FAMILY PRESERVATION	<p>Kinship care cost-effectively and efficiency increases child well-being/safety, while decreasing the need for out-of-home placement.</p> <p>Homelessness erodes family security, well-being, and self-sufficiency.</p> <p>The absence of basic needs increases likelihood of future crisis and longer-term dependence upon formal systems of care.</p>	<p>Family Connections (FC) - UWSEM -Building Foundations</p> <p>Intake Department</p> <p>Parents As Teachers</p> <p>LENA Start</p> <p>United Way for Southeast Michigan Early Learning Community (ELC)</p>	<p><u>Intervention Models & Approaches</u></p> <p>Parents As Teachers</p> <p>LENA Start</p> <p>Early Learning Community</p> <p>Solution-focused counseling</p> <p><u>Prevention Models & Approaches</u></p> <p>- Family Connections (FC) Model</p> <p>- Arizona Self-Sufficiency Matrix</p> <p><u>Case Management Approaches</u></p> <p>Assessment, Service Plan, and Crisis Intervention</p> <p><u>Resources</u></p> <p>12 Staff, 2 interns</p> <p>Michigan Child Protection Law requirements</p> <p>Great Start Collaborative – Wayne [Everybody Ready] & United Way of Southeast Michigan (UWSEM) funding</p> <p>W.K. Kellogg Foundation Trustee Grant</p> <p>DHHS referring staff</p> <p>Wayne State University</p> <p>Family Connections Advisory Council & Partners</p> <p>Empirical assessment tools</p> <p>Mileage, Cell Phones, Office Space/Equip</p> <p>UWSEM Apricot Database and 211 line</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> • Assessment, referral, linking, and follow-up into BFDI services, as well as community resources meeting families’ needs beyond the scope of BFDI services • Initial contact with family is made within 24 hours • Small caseloads allowing for intensive intervention • Services are home-based and community-based • Time-limited programming • Ecological approaches to preventing future crises • Specific assistance for families’ basic needs • Individual, Family, and Group Counseling • Support groups • Case Management <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> • Parenting education • Teach/model: home management, budgeting, communication and assertiveness skills • Advocacy with schools, medical and mental health facilities • Housing and relocation assistance • Assistance with food, clothing, appliances and other concrete needs. • Linkages to natural helping networks and ongoing community supports • Transportation support services • Initial face to face contact with family in 24 hours • Safety planning • Individual and Family Activities • FC Multi-family Activities • Assistance with identifying stable, adequate housing, including assistance with securing legal documents (state identification, birth certificates, etc.) necessary to secure housing • A national, evidenced-based home visiting model that promotes the optimal early development, learning, health and well-being of children by providing developmental and literacy tools to parents and caregivers • Early childhood provider and family training network 	<p>Number of FC family preservation prevention recipients in 2018: 37</p> <p>Number of individual persons (heads of household) served by Intake Dept in 2018: 1030</p> <p>Number of Parents As Teachers recipient families in 2018: 63; In addition to 190 home visits</p> <p>Number of LENA Start recipient families in 2018: 69</p> <p>Number of Early Learning Community beneficiaries in 2018: 91 (Inaugural year)</p>	<p><u>Family Preservation Intervention Services:</u></p> <ul style="list-style-type: none"> • 86% of children achieved age-specific milestones, based upon completed Ages and Stages assessments • 110 Parent / Child Interaction Groups occurred with community families <p><u>Early Childhood Literacy Services:</u></p> <ul style="list-style-type: none"> • 89% of families who completed LENA pre/post surveys show gains in total scores over 8 domains impacting early childhood literacy • 69 graduate families with average of 26 minute increase in reading per day per family. • Snapshot data indicates children whose participated are gaining over 1.5 months of developmental language skills every month <p>Outcome Data Sources: Great Start Collaborative-Wayne Ages and Stages Database; BFDI Intake Database; Family Connections Referral Database; Parents As Teachers Personal Visits and Group Logs</p> <p><u>Intake Services:</u></p> <ul style="list-style-type: none"> • 1030 calls were received by the Intake Dept. • 7 non-enrolled persons walked into BFDI for support from the Intake Dept. • 80% (n=824) of calls were seeking housing information/assistance. • 4% of callers (n=45) sought employment assistance • 8% of callers (n=85) sought mental health treatment including individual/marital counseling <p>Outcome Data Sources: Intake Database</p> <p><u>Consumer Generated Service Improvements:</u></p> <ul style="list-style-type: none"> • Parents As Teachers consumers have requested more assistance with concrete items (housing, food, clothing, etc.), as needs are disclosed during early childhood education & support home visits. Therefore, weekly teaming will occur among Parent Educator and Intake staff to explore community resources to meet families’ needs.

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes
YOUTH & COMMUNITY DEVELOPMENT	<p>Community development initiatives increase community safety neighborhood beautification, and citizen empowerment, while reducing juvenile delinquency</p>	<p>Keys To Literacy at Osborn High School</p> <p>Restorative Practices</p> <p>Bridges On-the-Job Training Program</p> <p>Georgetown University's national Crossover Youth Practice Model (CYPM)</p>	<p><u>Prevention Models & Approaches</u></p> <p>Keys To Literacy Software</p> <p><u>Resources</u></p> <p>5 Staff, multiple volunteers</p> <p>Aztec Software Learning Essentials Series (ASLES)</p> <p>Skillman Foundation funding</p> <p>Kresge Foundation Funding</p> <p>Wayne Co. Department of Health, Veterans, Community Wellness (DHVCW)</p> <p>United Way for Southeastern MI funding</p> <p>Detroit-Wayne Mental Health Authority (DWMHA) Funding</p> <p>Osborn/Cody Rouge citizens, and MAN Network</p> <p>Mileage, Pagers, Office Space/Equip, Community Meeting Space</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> • Student workforce development training • Student literacy training • Showcase the gifts and talents of youth • Strengthen and preserve families by empowering our youth and our Osborn and Cody Rouge neighborhoods • Restorative Practices training • Osborn and Cody Rouge community revitalization and collectivism <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> • In 2018, Black Family Development, Inc. (BFDI) was honored to partner with residents, who were provided with monthly community development and support through 12 monthly community luncheons. Please see community touchpoints in Outputs column for participant outreach results. • During monthly community luncheons residents receive COMPSTAT crime data and develop relationships with police and elected officials • Targeted collaboration with Osborn and Cody Rouge community residents & block club presidents reinforce BFDI's previous "Networking For Change" efforts, through Block Club development, with current organized communication and peace walk efforts to support ongoing community organizing. • Implementing Georgetown's national Crossover Youth Practice model as a Wayne County participating agency 	<p>Number of 2018 Bridges participants: 122 <i>(unduplicated)</i></p> <p>Number of persons trained in 2018 in Restorative Practices Model: 1112</p> <p>Number of community development residents reached in 2018 by Detroit community:</p> <ul style="list-style-type: none"> - <u>Osborn:</u> 2,160 residents - <u>Denby:</u> 880 residents - <u>Cody Rouge:</u> 450 residents (in Bi-monthly meetings) 	<ul style="list-style-type: none"> • Bridges program concluded in June 2018, having provided employability skills, training, and job placement to 122 youth; totaling 1245 units of activity for the program. • Black Family Development, Inc. Training Institute began. • 1112 persons were trained in the International Institute of Restorative Practices mode included participants in North Canton (Ohio) and Henrico County (Virginia) School Districts; (6,664 persons cumulatively trained to-date.) - <i>Hope Academy Public Charter school changed their discipline policies to be restorative, resulting in an 1800% reduction in School Suspensions</i> - <i>125 Restorative Youth Ambassadors used their voices to develop restorative plans impacting homes, schools and communities.</i> - <i>Detroit Public Schools Community District (DPSCD) has changed their Student Code of Conduct to reflect restorative practices.</i> - <i>Henrico County Virginia Schools are transforming their entire systems from being punitive to restorative.</i> • Crossover Youth Practice Model previously funded BFDI as lead County-wide coordinator of the planning and early implementation of the national model in Wayne County. - <i>2018 implementation phase of the model included case reviews for the 24 youth and their families participating in the model</i> <p><u>Consumer Generated Service Improvements:</u> Families, and system-level partners, have requested more information, and staff training, in the CYPM model to improve fidelity and consumer engagement. Training and agency-specific policies throughout Wayne County implementation sites will commence in 2019.</p>

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes
PROMISE NEIGHBORHOODS	<p>The planning for, and implementation of, a cradle – to – career network of youth academic and family well-being resources will achieve the 15 national, plus the 4 Detroit, Promise Neighborhood indicators</p>	<p>Local planning and implementation of the national Promise Neighborhood initiative</p>	<p><u>Prevention Models & Approaches</u></p> <p>Multiple PN Partners' Evidence-Based Practices</p> <p><u>Resources</u></p> <p>2.0 Staff Equivalents And Multiple Volunteers</p> <p>Detroit Public Schools Community District (DPSCD) Principals, Staff, Students, and Families</p> <p>Early Childhood Work Group</p> <p>Early Childhood Director</p> <p>PN Advisory Board members</p> <p>Wayne State University School of Social Work Evaluation tools</p> <p>Mileage, Pagers, Office Space/Equip, Community Meeting Space</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> • Strengthen and preserve families by empowering our youth and our Osborn and Clark Park neighborhoods • Osborn and Cody Rouge community revitalization and collectivism • Early childhood student literacy training • Early childhood parent literacy and brain science coaching using 21st century technology • Workforce development training and employment placement for at-risk youth <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> • In September 2017 BFDI brought the national early childhood literacy model, LENA Start, to Detroit, supported by Kellogg and LENA Foundation funding. • Osborn/Clark Park Promise Neighborhood (PN) educational reform and community revitalization to ensure that “all children growing up in [our PN] will have access to effective schools and strong systems of family and community support that will prepare them to attain an excellent education and successfully transition to college and career”. 	<p>Number of 2018 Early Childhood Literacy participants:</p> <p>11</p>	<p><u>Early Childhood Literacy Coaching</u></p> <ul style="list-style-type: none"> • PN Interns utilized PN Literacy Road Map, developed in conjunction with DPSCD Early Childhood staff, to goal-set and monitor with students and families their students' literacy improvement strategies coordinated by the PN intern. • Ages and Stages developmental screening assessments were been completed for participating Promise Neighborhood (PN) children. System of Care Coordinators (SCCs), our PN interns, have started working with teachers and parents to develop child-specific developmental goals and interventions based upon scores. • A three year data study was shared with early childhood partners. Depicted below is data from Maybury and Above and Beyond Learning Center. Data identifies the following: <ul style="list-style-type: none"> - <i>the number of consumers served each year</i> - <i>COR literacy and ASQ goals set, met and redirected to teachers at the end of System of Care Coordinators internship placement</i> - <i>Family Needs and Goal status</i> (See data charts below).



Promise Neighborhoods To-Date Early Childhood Literacy Program Data



CLIENTS SERVED <i>(Using One-on-One Intern Intervention)</i>						
	2015-2016		2016-2017		2017-2018	
Total Students Served <i>(Using One-on-One Intern Intervention)</i>	10		6		11	
EARLY CHILDHOOD COR LITERACY GOALS						
	2015-2016		2016-2017		2017-2018	
Goals Set	71		79		68	
Goals Met	<i>n= 67</i>	94.4%	<i>n= 57</i>	72.2%	<i>n=43</i>	63.2%
Goals Remaining Open (transferred to teachers)	<i>n= 4</i>	5.6%	<i>n= 22</i>	27.8%	<i>n=25</i>	36.8%
KINDERGARTEN LITERACY GOALS						
	2015-2016					
Goals Set	36					
Goals Met	<i>n= 19</i>	52.8%				
Goals Remaining Open (transferred to teachers)	<i>n= 17</i>	47.2%				
EARLY CHILDHOOD ASQ-3 GOALS						
					2017-2018	
Goals Set					91	
Goals Met					<i>n=67</i>	73.6%
Goals Remaining Open (transferred to teachers)					<i>n=24</i>	26.4%

EARLY CHILDHOOD LITERACY ONLINE COR GOALS						
	2015-2016			2016-2017		
Goals Met	Maybury Elementary School			Maybury Elementary School		
Goals Remaining Open (transferred to teachers)	8 Students / 71 Goals			6 Students / 79 Goals		
	Count in Category	Open <i>n=4</i>	Met <i>n=67</i>	Count in Category	Open <i>n=22</i>	Met <i>n=57</i>
Online COR Key Developmental Indicators (KDI)		%	%		%	%
Q. Listening to and Understanding Speech	n= 15	20.0%	80.0%	n= 16	6.2%	93.8%
R. Using Vocabulary	n= 0			n= 7	28.6%	71.4%
S. Using Complex Patterns of Speech	n= 0			n= 3	33.3%	66.6%
T. Showing Awareness of Sounds in Words	n= 15		100%	n= 10	30.0%	70.0%
U. Demonstrating Knowledge of Books	n= 0			n= 3	33.3%	66.6%
V. Using Letter Names and Sounds	n= 28		100%	n= 12	50.0%	50.0%
W. Reading	n= 1	100%		n= 15	26.7%	73.3%
X. Writing	n= 12		100%	n= 13	30.8%	69.2%

COR KDIs changed for the 2017-2018 school year.

EARLY CHILDHOOD LITERACY ONLINE COR GOALS						
	2017-2018			2017-2018		
Goals Met	Maybury Elementary School			Above & Beyond		
Goals Remaining Open (transferred to teachers)	6 Students / 12 Goals			5 Students / 56 Goals		
	Count in Category	Open <i>n=1</i>	Met <i>n=11</i>	Count in Category	Open <i>n=24</i>	Met <i>n=32</i>
ASQ-3 Domains		%	%		%	%
L. Speaking	n= 1		100%	n= 9	44.4%	55.6%
M. Listening & Comprehension	n= 0			n= 9	44.4%	55.6%
N. Phonological Awareness	n= 4	25.0%	75.0%	n= 9	44.4%	55.6%
O. Alphabetic Knowledge	n= 2		100%	n= 8	50.0%	50.0%
P. Reading	n= 4		100%	n= 6	50.0%	50.0%
Q. Book Enjoyment & Knowledge	n= 0			n= 8	37.5%	62.5%
R. Writing	n= 1		100%	n= 7	28.6%	71.4%



CLIENTS SERVED						
	2015-2016		2016-2017		2017-2018	
Total Families Served <i>(Using One-on-One Intern Intervention)</i>	10		2		8	
FAMILY NEEDS ROADMAP GOALS						
Goals Set	27		6		37	
Goals Met	n= 19	70.4%	n= 6	100.0%	n=21	56.8%
Goals Cancelled by Client	n= 8	29.6%	n= 0	0.0%	n=9	24.3%
Goals Remaining Open	n=0	0.0%	n=0	0.0%	n=7	18.9%

