Office of the Governor  
State of North Carolina  

Roy Cooper  
Governor  

June 14, 2017  

Ms. Naomi Goldstein, Acting Commissioner  
Administration on Children, Youth and Families  
330 C Street SW, Room 4035  
Washington, D.C. 20201  

Dear Ms. Goldstein:  

Enclosed is North Carolina’s application for the Community-Based Child Abuse Prevention (CBCAP) program funding. This is in response to the Administration for Children and Families (ACF) Program Instruction ACY-CB-PI-17-06.  

I formally designate the North Carolina Department of Health and Human Services as the lead agency responsible for the administration of the Community-Based Child Abuse Prevention Program. The North Carolina Department of Health and Human Services was designated only after giving full and equal consideration to the capacity and expertise of all entities desiring to be the lead agency in accordance with Section 202 (1)(A)(C) and (D) of the Child Abuse Prevention and Treatment Act (CAPTA) Reauthorization Act of 2010 (P.L. 111-320).  

The person authorized to act on my behalf for the State of North Carolina in matters regarding this funding application is Mandy Cohen, Secretary of the Department of Health and Human Services.  

Thank you for the opportunity to improve the lives of children and families in North Carolina.  

Very truly yours,  

[Signature]  
Roy Cooper  

RAC/sm
Ms. Naomi Goldstein  
Acting Commissioner  
Administration on Children, Youth and Families  
330 C Street SW, Room 4035  
Washington, D.C. 20201

Dear Ms. Goldstein,

Enclosed for your consideration is North Carolina’s Community-Based Child Abuse Prevention (CBCAP) application for FFY 2018. This application is being submitted in response to the Administration for Children and Families (ACF) Program Instruction ACY-CB-PI-17-06. The application is submitted by the North Carolina Department of Health and Human Services (NC DHHS), which has been designated by Governor Roy Cooper as the lead agency for this program. There have been no changes in the lead agency designation, nor the State Lead Agency Assurance Statement since the FFY 2001 application was submitted.

North Carolina’s Community-Based Child Abuse Prevention grant funds are administered through the North Carolina Department of Health and Human Services. The Division of Social Services (NC DSS) is designated by NC DHHS to directly administer the funds and provide oversight to funded programs. NC DSS is the state’s Title IV-B and IV-E child welfare authority and is also responsible for administration of the North Carolina Children’s Trust Fund.

Thank you for your consideration of the enclosed application. Should you have any questions about the report or the application, please contact Kristin O’Connor, Assistant Chief of Child Welfare at (919) 527-6407 or email her at kristin.oconnor@dhhs.nc.gov.

Sincerely,

Mandy Cohen, MD, MPH  
Secretary

Enclosures: Community-Based Child Abuse Prevention Program Application and Report, Leveraged Funds Worksheet, Disclosure of Lobbying Activities, Governor’s Assurances Statement, State CEO Lead Designation Letter and State Lead Agency Assurance Statement

Cc: Wayne Black, NCDSS, Director
I. SUBMISSION LETTER

The submission letter accompanies the North Carolina Department of Health and Human Services’ application for the Community-Based Child Abuse Prevention grants for the state of North Carolina. The letter includes a description of the lead agency that is responsible for the administration of funds and the oversight of the Community-Based Child Abuse Prevention and other prevention programs.

II. LEAD AGENCY IDENTIFYING INFORMATION

Applicant
North Carolina Department of Health and Human Services, North Carolina Division of Social Services

Address
820 S. Boylan Ave.
Raleigh, North Carolina 27603

Employer Identification Number
56-1636462

DUNS Number
80-978-5363

CBCAP Program Contact
Kristin O’Connor, Assistant Section Chief
Child Welfare Services – Division of Social Services
820 S. Boylan Ave.
2439 Mail Service Center
Raleigh, NC 27699-2439
Telephone Number: (919) 527-6407
Fax Number: (919) 733-3823
kristin.oconnor@dhhs.nc.gov

CBCAP Fiscal Contact:
Laketha Miller, Controller
Office of the Controller
Spruill Annex, 1050 Umstead Dr.
2019 Mail Service Center
Raleigh, NC 27699-2019
Telephone Number: (919) 733-0169
Fax Number: (919) 715-4829
laketha.miller@dhhs.nc.gov

III. GOVERNOR DOCUMENTATION AND ASSURANCES

The North Carolina Department of Health and Human Services (DHHS) is designated as the state lead agency for the administration of the Community-Based Child Abuse Prevention (CBCAP) funding. As required, the following documents are included in this application.

- Lead Agency Designation Letter (as indicated in the Submission Letter signed by the Governor)
- State Chief Executive Officer’s Assurance Statement
IV. LEAD AGENCY ASSURANCES

As the lead agency, DHHS assumes the obligations imposed by the terms and conditions of the CBCAP grant award. The State Lead Agency Assurance is included as required.

V. DOCUMENTATION OF LEVERAGED FUNDS

In accordance with CAPTA, Section 203(b) (1) (B), documentation of leveraged funds for the period of October 1, 2015 to September 30, 2016 is included as required.

VI. BUDGET

- Format budget to clearly display line-item expenditures for both Federal and non-federal funds
- Must include 20% Cash Match (state or private funds) The 20% match should be determined based on the population-only portion of the formula
- Must include funds for at least one staff member to attend a 2-5 day Federal Mandatory CBCAP Grantees Meeting
- Up to 20% of available funds may be budgeted for administrative purposes

NC DSS will use CBCAP funds during the period of July 1, 2017 to June 30, 2018 to award competitive contracts for direct Children’s Trust program services as well as to execute a supportive implementation contract with Prevent Child Abuse North Carolina.

The total CBCAP funds obligated for services during the period of July 1, 2017 to June 30, 2018 will be covered by the FFY 2015 and FFY 2016 awards. The FFY 2017-2018 award will be applied to services once the FFY 2015 and FFY 2016 awards have been liquidated. The line item expenditures are projections only.

The non-federal funds that will be used to meet the twenty percent (20%) cash match requirement and support the prevention focused community-based programs and activities will come from state appropriated funds for Smart Start. These programs assist communities in strengthening families and providing primary prevention services, thereby decreasing child abuse and neglect.

☒ Administrative Expenses do not exceed 20% of total costs

☒ Travel to CBCAP Grantees Meeting is included

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VII. DESCRIPTION OF THE LEAD AGENCY’S LEADERSHIP ROLE IN STATE PREVENTION ACTIVITIES

• Describe the role of the Lead Agency and how it is leading the child maltreatment prevention activities in the State.

As the CBCAP Lead Agency, NC DSS leads child maltreatment prevention activities in the state through the funding and development of children’s trust, respite, and community response programs, participation in the network of public and private family strengthening funders, contracting with Prevent Child Abuse North Carolina (PCANC), and administration and support of the North Carolina Child Fatality Prevention System and the Community Child Protection Teams

Children’s Trust, Respite, and Community Response Program Service Grantees

The CBCAP continuum includes Children’s Trust*, Respite, and Community Response Program services. These services are designed to strengthen and support families to prevent child abuse and neglect that are accessible, effective, and culturally appropriate and build upon existing strengths that:
• Offer early, comprehensive educational and resource assistance to families.
• Promote the development of parenting skills and knowledge of child development.
• Increase family stability by improving and maintaining support systems for families and their children, especially for families with children with disabilities.
• Provide referrals to early health and developmental services.
• Demonstrate a commitment to meaningful involvement of caregivers in program planning, implementation, improvement, and system change efforts.
• Demonstrate a local network through their involvement with local boards, advisory councils, and work groups that focus on increasing protective factors in families and reducing risk factors that contribute to child neglect and abuse.
• Promote the development of communities that value and support self-sufficient and nurturing families.

*In 2017, NC DSS intentionally replaced the term “Family Support Programs” with “Children’s Trust Programs” to include contracted, child abuse prevention program services.

In 2017-2018, all contracted Children’s Trust, Respite, and Community Response Program Programs will be required to promote donations to the Children’s Trust Fund and the Kids First license plates. Proceeds will go into the Children’s Trust Fund to sustain and or increase community-based child abuse prevention programs.

Network of Public and Private Family Strengthening Funders

North Carolina maintains a collaborative network of public and private funders and supporters who engage in broad systems-level work. The purpose is to enhance fiscal and implementation support to programs delivering evidence-based and evidence-informed programming to improve outcomes for children and families. Shared values include:
• Investing in evidence-based programs is not only a wise, but also ethical investment
• Collaboratively supporting specific evidence-based programs will yield greater impact for funders and for communities
• Scaffolding is vital to the successful implementation of evidence-based programs
• Creating efficiencies and eliminating duplication of services
Prevent Child Abuse North Carolina and the Prevention Network

To promote and implement the shared values of the network of public and private funders, NC DSS will continue to contract with PCANC to help direct and support the networks of coordinated child abuse prevention resources and activities to strengthen families. The three primary goals of the partnership with PCANC are:

1. To increase successful replication of evidence-based programs and practices to prevent child maltreatment and strengthen families;
2. To influence social norms that strengthen families and promote healthy child development;
3. To advocate for effective policies that support healthy families and positive child outcomes.

North Carolina Child Fatality Prevention System

The North Carolina Child Fatality Prevention System, established under Article 14 of the Juvenile Code, North Carolina General Statute 7B-1400-1414 shall:

- Develop a community approach to the prevention of child abuse and neglect.
- Understand and report the causes of child deaths.
- Identify gaps in services to children and families.
- Make and carry out recommendations for changes to laws, rules, and policies to prevent future child deaths, especially those from abuse and neglect.

The North Carolina Child Fatality Prevention System contains four components:
- North Carolina Child Fatality Task Force
- State Child Fatality Prevention Team (State Team)
- Local Child Fatality Prevention Team (CFPT)
- Community Child Protection Team (CCPT)

CCPTs are interdisciplinary groups of community representatives inclusive of mandated representatives. Located in all 100 counties, the CCPTs meet to promote a community-wide approach to the problem of child abuse and neglect. Each CCPT reviews active child welfare cases, fatalities, and other cases brought to the team for review. The purpose of the CCPT case reviews include identifying gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, assist the county director in protection of living children and develop strategies to ameliorate child abuse and promote child well-being at a local and state level. Responding to previous recommendation, a CCPT Advisory Board was formed. The mission of this Advisory Board is to guide the strengthening of local teams through training and technical assistance. This state level advisory board seeks to mirror the composition of local teams and has started identifying potential members.

VIII. ACTIONS TO ADVOCATE FOR SYSTEMIC CHANGE

- A description of the actions that the CBCAP lead agency will take to advocate systemic changes in state policies, practices, procedures and regulations to improve the delivery of community-based child abuse and neglect prevention programs and activities.
- Explain how the states plans to continue or to begin conducting prevention planning efforts and how these efforts will be integrated with other strategic planning efforts in child welfare, early childhood, or other related systems. Examples may include the CBCAP lead agency’s anticipated involvement in the program implementation plan (PIP), other title IV-B planning activities, such as the child and family services plan (CFSP), network activities and other related interagency systems change efforts, as applicable.
During 2017-2018, NC DSS will engage in several statewide systemic change efforts involving child welfare and the prevention service array network.

Child and Family Services Plan/Annual Progress and Services Report (CFSP/APSR)

Since NC DSS is the lead CBCAP agency and the state’s Title IV-B and IV-E agency, NC DSS will continue to be involved with the Child and Family Services Plan (CFSP) and Annual Progress and Services Report (APSR) processes in FY 2018. The CBCAP annual report and application provides valuable target population information for the CFSP/APSR. Also, outcome and accomplishment information is shared throughout the CFSP/APSR. NC DSS stakeholders have opportunities for shared collaboration between the CBCAP planning and CFSP/APSR planning to create a child welfare continuum that is not fragmented and offers services to families from prevention through post adoption services.

Program Improvement Plan (PIP)

During FFY 2015, NC participated in a Federal Child and Family Services Review. Upon conclusion of the review, it was determined that NC was not in substantial conformity with any of the 7 statewide data indicators or any of the 7 case review outcomes. In SY 2018, NC is working on meeting the goals, strategies and activities of its approved Program Improvement Plan (PIP) through ten (10) workgroups.

A few of the PIP strategies align well with CBCAP. The specific strategies that NC DSS and CBCAP collaborative partners will inform and advocate for systemic change include:

- Strengthening and implementing a modified child welfare policy manual that is in alignment with the NC DHHS mission and values, which will clarify how to best work with families.
- Continued refinement in providing technical assistance to county child welfare agencies, which will support better services to the children & families of NC.
- Developing a statewide parent engagement model (based on technical assistance received from FRIENDS: Family Resource Information, Education and Network Development Services - the National Center for Community Based Child Abuse Prevention, the Capacity Building Center for States, and NC State Center for Family and Community Engagement)
- Strengthening community partnerships to serve children by clarifying the current mechanisms by which agencies systematically interact.

Opportunities for Systemic Change

Community Response Programming

Utilizing Promoting Safe and Stable Families funding, NC DSS will fund eight (8) county social service agencies to support their second year implementing Community Response Programs. This competitive grant award period is from 7/1/16 through 6/30/19. The program prioritizes serving families with children 0-5 years of age. In addition, CRP programs measure outcomes from the Strengthening Families Framework, Protective Factor Survey.

Trauma-Informed Child Welfare Practice

Children’s Trust Programs across North Carolina play a critical role in developing and sustaining healthy families. Programs will continue to serve an important role as NC DSS expands its efforts to infuse trauma-informed practices into all child-serving systems. There are several strategies that will be explored including:

- Ensuring that each Children’s Trust Program agency is aware of the trauma training provided to system of care professionals.
• Educating contract administrators in ways in which they can support trauma-informed practices in Children’s Trust Program agencies.
• Ensuring that Children’s Trust Program agencies are aware of the importance of screening for adult trauma with the parents they serve.
• Ensuring that Children’s Trust Program agencies are aware of the trauma-informed evidence-based treatment available in their community.
• Ensuring that Children’s Trust Program agencies approach families in a trauma-informed manner (i.e., asking ‘what happened to you?’ rather than asking ‘what’s wrong with you?’).

In 2017-2018, NC DSS is planning the following activities related to trauma-informed practices:

1. **Project Broadcast Programming**

   Project Broadcast began in October 2011 as a Cooperative Agreement with the Administration for Children and Families. It was designed to improve the safety, permanency, and well-being outcomes of children involved in the North Carolina child welfare system through improving their access to trauma and evidence-informed practices and services. Key partners include the Center for Child and Family Health (a National Child Traumatic Stress Network site), the University of North Carolina at Chapel Hill and originally nine county social services agencies (Buncombe, Craven, Cumberland, Hoke, Pender, Pitt, Scotland, Union, and Wilson). Project Broadcast has become synonymous with trauma-informed child welfare practice and North Carolina has invested resources in continuing this programming beyond the ACF project. NC DSS currently has 29 counties that are working with the Project Broadcast effort to become more trauma-informed and several other counties that have embraced the Project Broadcast trauma screen for children for whom they serve.

   During 2017-2018, Project Broadcast anticipates several key accomplishments:

   • Trauma-Informed Leadership Training (TILT): Conduct a TILT Learning Community for approximately 8-10 additional counties. This process is training several trauma champions in each local county department of social service to become steeped in trauma knowledge, learn how to spread that knowledge and create system/culture change within their agency, and how to sustain those efforts.

   • Resource Parent Curriculum (RPC): The National Child Traumatic Stress Networks’ curriculum *Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents* is a 16-hour in-service training for foster, adoptive, kinship and therapeutic resource parents to help them understand the impact of trauma and mitigate its effects. Project Broadcast will continue training agencies to learn how to train this curriculum with fidelity. NC anticipates training 30 Staff Facilitators from various child-serving agencies across the state.

   These efforts are designed to increase the number of children involved in the child welfare who are screened for trauma; increase the number of children who are referred for a comprehensive, trauma-informed clinician assessment; increase the number of public and private agency social workers trained to facilitate the Resource Parent Curriculum; and increase the number of trauma-informed resource parents in North Carolina.

2. **North Carolina Child Treatment Program Collaboration**

   NC DSS will continue its collaboration with NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services to support NC CTP with the goal of increasing access to evidence-based treatment for traumatic stress for children across the child welfare continuum of prevention through ACYF-CB-PI-17-06

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permanency. NC DMH/DD/SAS received $1.8 million dollars recurring annual funding to support NC CTP and they are working closely with local county social service agencies to ensure clinicians can serve the vulnerable foster care population. Throughout the 2017-2018 timeframe, NC CTP anticipates training clinicians in several evidence-based treatments including SPARCS (Structured Psychotherapy for Adolescents Responding to Chronic Stress), Parent-Child Interaction Therapy (PCIT), Child-Parent Psychotherapy (CPP), Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Child First. Through another sister program funded by SAMHSA, NC is supporting the continuation of Attachment and Biobehavioral Catch-up (ABC) for young children.

While far more clinicians have been trained by the CTP program to-date, many have agreed to become a “rostered” CTP clinician. This allows consumers and agencies such as a family in need to an evidence-based treatment to quickly search for a provider in their area. There are currently 80 rostered in SPARCS; 552 rostered in TF-CBT; 69 rostered in PCIT; 46 rostered in CPP; and 10 rostered in ABC. NC DSS anticipates these numbers will increase in the next fiscal year.

3. Cross-System Collaboration

There are many cross-system efforts and/or boards or commissions that NC DSS participates in that are also focused on building a trauma-informed child serving system.

- Behavioral Health Strategic Plan Steering Committee
- Cross-System Workgroup (DMA, DMH, DSS, DPH, DPI, DPS/DJJ, NCIOM, and Family Representation)
- Commission for Children with Special Health Care Needs
- Traumatic Brain Injury Advisory Council
- Fostering Health NC Steering Committee (and several workgroups)
- Project NO REST – North Carolina Organizing and Responding to the Exploitation and Sexual Trafficking of Children
- Essentials for Childhood (Trauma-informed workgroup)
- Partnering for Excellence Advisory Committee
- ARC Reflections: Attachment, Regulation and Competency
- Crisis Solutions Initiative
- System of Care Expansion Grant
- Infant Mental Health Association
- Bridging Local Systems Initiatives (LME/MCO and DSS Collaboration)
- Mental Health Block Grant Planning Council

Additionally, NC DSS will continue to work with our partners at the Division of Medicaid and the Division of Mental Health, Developmental Disabilities and Substance Abuse Services to revise several Medicaid service definitions/policies to make them more trauma-informed. This includes but is not limited to In-Home Services, Mobile Crisis and Therapeutic Foster Care. Additionally, NC DSS will continue collaborating on several trauma-informed initiatives to improve access to care through a Tiered Case Management pilot and a Mobile Response and Stabilization Service pilot for youth in foster care.

NC DSS will also be working closely with the Division of Health Benefits to ensure the foster care population’s needs are met during the Medicaid Transformation.

4. Supporting Other Trauma-Informed Programming

Some other efforts to build and sustain a trauma-informed child-serving system:
• NC DSS will continue to embed trauma-informed information into the DSS training system’s curricula wherever appropriate. Special emphasis will be made to increase the offering of a new course regarding Secondary Traumatic Stress.

• NC DSS will continue to develop robust sustainability plan by integrating trauma-informed practices and policies into existing infrastructures and/or building additional collaborations to sustain this work.

• NC DSS will collaborate to share data across systems regarding medication and behavioral health service utilization and conduct analysis on that data. This is particularly important given the misdiagnosis rate and over prescribed medication rates seen nationally of the foster care population due to unaddressed trauma.

• NC DSS will continue to embed trauma knowledge and awareness into NC DSS publications such as Fostering Perspectives and Practice Notes, as well as on the new foster parent training site FosteringNC.org.

• NC DSS will continue to train the NC DSS workforce and spread awareness of the Youth Mental Health First Aid curriculum which helps to inform participants about the prevalence of mental health issues and how to intervene until professional help arrives.

• NC DSS will continue to convene the Secondary Trauma Stress Workgroup which is a subcommittee of the NCACDSS’ Supervisor Advisory Council.

• NC DSS will continue efforts to support family voice and involvement in child welfare services utilizing a trauma-informed approach.

• NC DSS will be launching a new curriculum on our online learning platform called Working Safe, Working Smart which will provide social workers education and guidance on how to remain safe as they conduct child welfare services but also how to cope with any traumatic event that may occur.

• NC DSS will continue to spread trauma-informed pre-service training – providing MAPP trainers to update their curriculum to TIPS-MAPP.

Project NO REST

Project NO REST (North Carolina Organizing and Responding to the Exploitation and Sex Trafficking of Children), funded through a five-year grant provided by Administration for Children and Families (ACF) and begun in October 2014, is designed to increase awareness of human trafficking affecting children and youth involved in the child welfare system in North Carolina. NC DSS is partnering with the University of North Carolina at Chapel Hill to identify and address necessary system improvements for protection and service provision to children and youth, including child welfare-involved children and youth, who have been trafficked or are at risk of being trafficked. Other key partners on the project include county social service agencies (local child welfare agencies), North Carolina Conference of District Attorneys (AOC), North Carolina Department of Public Instruction, North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, State and Local Law Enforcement Agencies, Sexual Assault Response Agencies, Statewide Coalitions against Sexual Assault and Human Trafficking, Child Advocacy Centers, Prevent Child Abuse North Carolina (PCANC), NC Child, North Carolina-based Runaway and Homeless Youth grantees, and various non-profit anti human trafficking agencies which focus on victim services and advocacy.

The goal of Project NO REST is to build awareness of human trafficking affecting children and youth involved in the child welfare system in NC, reduce the number who are trafficked and improve outcomes for those who are trafficked. Strategies include:

• Promoting a strategic, coordinated approach to the provision of services for children and youth who are victims of human trafficking and who have contact with the child welfare system.
• Expanding and coordinating human trafficking-related research data, and evaluation especially as it applies to children and youth involved with the child welfare system in NC.
• Providing and promoting outreach, training, and technical assistance to agencies and organizations at the state and local level to increase victim identification and expand the availability of services.
• Promoting effective, culturally appropriate, trauma-informed services that improve the short- and long-term health, safety and well-being of victims who were or are involved with the child welfare system.

During 2016-2017, the major activities and accomplishments of the project were:
• Awarded a two-year Victims of Crime Act (VOCA) funds grant from the NC Governor’s Crime Commission in the amount of $4,998,404.84 to supplement and expand the activities identified in the initial Project NO REST proposal to the Children’s Bureau. These funds will be used for:
  o A $2,000,040 effort to reach out and inform victims and survivors of trafficking on how and where to obtain services;
  o $1,000,000 to cover implementation and infrastructure costs for pilot sites in five communities across North Carolina;
  o $274,000 to implement a workforce development and training initiative in the pilot sites and in other areas across the state to improve the ability to identify and respond to trafficking; and,
  o Funds to conduct an annual trafficking conference to bring together agencies, organizations, and stakeholders to receive training and technical assistance to improve outcomes for victims and to share successes and challenges from their communities within certain professional sectors. The conference also will highlight the achievements and challenges of the pilot sites. These conferences will include a combination of general sessions and smaller workshops.
• Provision of trafficking training and technical assistance to pilot sites; and,
• Continued implementation of a comprehensive and coordinated plan to address human trafficking among child welfare-involved children and youth.

During 2017-2018, the project anticipates:
• Creating a working group to develop one or more practice models to provide long-term services to survivors of trafficking. Membership will include organizations that provide residential services to youth who have been trafficked. Others to be invited include medical and behavioral healthcare providers along with representatives of government agencies and other organizations to provide services to survivors;
• Continued provision of trafficking training and technical assistance to pilot sites;
• Continued monitoring of and capacity building with pilot sites;
• Developing an inventory of the facilities across the state that provide services to youth who have been trafficked.
• Convening service providers, survivors of trafficking, child caring agencies, social service agencies, funders, and others from across the state to develop a service and practice model for youth who have been trafficked.
• Continuing an analysis of existing data sources, development of additional data sources to address gaps, and report of findings to stakeholders and others.
• Disseminating ongoing project information, including project milestones, to the Children’s Bureau, as well as project stakeholders and others.

NC DSS will continue partnering with the University of North Carolina at Chapel Hill, to identify and address necessary system improvements for protection and service provision to children and youth,
including child welfare-involved children and youth, who have been trafficked or are at risk of being trafficked.

During 2016-2017 NC DSS efforts related to the trafficking of children and youth included, but were not limited to:

- Published updated CPS Intake policy, including intake and screening information on child protective services reports alleging human trafficking on August 1, 2016; and,
- Participated in Project NO REST activities, including the provision of technical assistance to pilot sites, participation in the work groups which developed content, material, and provided information for the VOCA-funded work reaching out to victims and survivors of trafficking, and planning of the Project NO REST conference scheduled to take place in fall 2017.

During 2017-2018 NC DSS anticipates, at a minimum:

- Developing and/or amending other areas of child welfare policy and practice guidance materials to include assessing and providing services to children and youth who have been trafficked;
- Exploring and developing additional opportunities for the child welfare workforce to receive training on recognizing and responding to the trafficking of children, including written materials, web-based training or live webinars, and amending current job-specific training curricula to include information on recognizing and responding to the trafficking of children;
- Participation in planning the Project NO REST conference scheduled for fall 2017;
- Presenting at the Project NO REST conference scheduled for fall 2017; and,
- Participation in and collaboration with the NC Administrative Office of the Courts’ Human Trafficking Technical Assistance Project to address human trafficking involving youth in the North Carolina courts.

System Change Efforts within the Prevention Service Array and Network

Implementation of Essentials for Childhood: Safe, Stable, Nurturing Relationships & Environments

North Carolina is one of five states awarded the Centers for Disease Control and Prevention (CDC) grant, Implementation of Essentials for Childhood (E4C): Safe, Stable, Nurturing, Relationships and Environments (SSNRs & Es). North Carolina Essentials for Childhood (NCE4C) Initiative uses a public health and collective impact approach to align and enhance collaborative efforts to promote safe, stable, nurturing relationships and environments (SSNRs & Es) for children, youth and families through public engagement about the importance of SSNRs & Es across systems, leveraging existing assets and resources which mitigate the effects of adverse childhood experiences and systems, and social norms and policy change. Currently, NCE4C has four workgroups and several subcommittees, comprised of partners, stakeholders and community members, that align with mutually reinforcing activities.

NC DSS remains a key stakeholder and partner in this initiative, serving on the steering committee. NC DSS participates with DPH and other key stakeholders in monthly technical assistance calls with the CDC and attends grantee meetings at the CDC. NC DSS is involved in strategic planning and decision making for this initiative. In 2017-2018, NC DSS will also continue to serve in a leadership role for this initiative.

Strategies for 2017-2018 include:

- Educate and motivate key stakeholders on brain science, Adverse Childhood Experiences (ACEs) and resilience;
- Systems and services transformation to prevent and mitigate the impact of trauma;
- Align systems to enable family-centered service provision;
• Support community ownership, impact and action;
• Improve data sharing and use across systems; and
• Spark innovative policy and financing solutions.

IX. COLLABORATION AND COORDINATION
• Describe the extent and nature of the CBCAP lead agency’s existing and/or future partnerships and collaborations with other Federal, State, local, or private efforts and how they intersect with the State’s child maltreatment prevention programs and activities.
  - Examples may include current or anticipated participation in the Child and Family Services Review (CFSR), PIP, CFSP, or other title IV-B programming, as well as collaborations with Early Childhood Comprehensive Systems, Strengthening Families initiatives, Early Head Start, or Head Start. Other examples are listed in the introduction of the PI, as well as Attachments 4 and 5).
• Highlight how the CBCAP lead agency’s work may be anchored and connected to established prevention and promotion activities in public health or other human services. The report should include information about strength of the collaborations and coordination efforts, the nature and quality of those relationships and what other impacts these connections and partnerships have made.

Please check all collaborations/partnerships that apply:
- CFSR/PIP
- Strengthening Families, Head Start
- IV-B/PSSF
- Early Head Start
- CFSP
- Maternal, Infant, and Early Childhood Home Visiting
- Project Launch
- Early Childhood
- Mental Health
- Substance Abuse
- Public Health/ACES
- Business Community Comprehensive
- Other systems – please describe in your narrative

During 2017-2018, NC DSS will continue collaborations and partnerships with several existing agency committees and workgroups to strengthen and inform its prevention work. NC DSS staff members will participate in planning committees and workgroups to inform and integrate prevention within the following disciplines/communities:
• State Collaborative for Children, Youth, and Families
• National Alliance for Children’s Trust and Prevention Funds
• Prevent Child Abuse North Carolina’s Prevention Leadership Team
• Early Childhood Advisory Council
• North Carolina Interagency Coordinating Council
• North Carolina Lifespan Respite Project Advisory Team
• NC Council on Developmental Disabilities
• Essentials for Children Leadership Action and Collective Impact Team
• North Carolina Pathways to Grade Level Reading – Early Childhood Foundation
• North Carolina Early Childhood State Leaders Collaborative

NC DSS values working together in partnership with public and private agencies, with families and with other disciplines to achieve common goals. NC DSS is in a unique position of leadership for directing, leading, and evaluating the network of public-private partnerships. In 2017-2018, NC DSS will continue collaborations and partnerships with these several existing agency committees and workgroups to strengthen and inform its prevention work.
Prevent Child Abuse North Carolina (PCANC)

NC DSS will continue to serve as a member of PCANC’s Prevention Leadership Team. The team is comprised of administrators, parents and grandparents, direct service practitioners and county and state government personnel, educators, medical professionals and others with a sincere desire to improve and increase the services available to professionals in the state. The main areas of focus for this team are to provide assistance and guidance for the Prevention Network Regional Meetings and webinars and to help PCANC shape the scope of future member benefits. [https://www.preventchildabusenc.org/](https://www.preventchildabusenc.org/)

Early Intervention Programs through IDEA, Part C

The North Carolina Interagency Coordinating Council (ICC) brings policy makers, service providers, and parents together. It serves young children with disabilities and developmental delays, and their families. Its members work to ensure that the supports and services offered to families are in line with their needs. The council advises and assists in making policy related to early intervention services, assists with evaluation of services, supports interagency agreements, identifies services that are right for infants, toddlers and preschoolers, and supports and guides local Interagency Coordinating Councils.

The ICC is the required advisory board for the Early Intervention program in the Division of Public Health (DPH). The ICC meets on a quarterly basis. These meetings are open to the public. The Governor appoints members for two-year terms, and has requirements for attendance at the meetings. NC DSS became an active member of the ICC in July 2011. [http://www.beearly.nc.gov/index.php/icc/icc](http://www.beearly.nc.gov/index.php/icc/icc)

North Carolina Early Childhood Advisory Council (ECAC)

The ECAC is charged with leading the state in creating and sustaining a shared vision for young children and a comprehensive, integrated system of high quality early care and education, family strengthening, and health services that support ready children, families, and communities. NC DSS continues as an appointed member of the NC ECAC and through participation, helps shapes the following major goals:

- Develop an integrated, comprehensive 3-year strategic plan for high-quality health, family strengthening, and early care and education services that support ready children, families, and communities.
- Strengthen awareness and commitment among families, business, and policymakers to ensure that all young children in North Carolina are healthy, learning, and thriving.
- Strengthen the quality of programs and expand opportunities for young children and their families to participate in high-quality programs.
- Strengthen coordination and collaboration across service sectors to promote high-quality, efficient services for young children and their families.
- Support the implementation of an integrated data system that meets the individual and collective needs and capacities of state-funded programs serving young children birth to age five.

NC DSS collaborates with the National Implementation Research Network (NIRN). NIRN works to close the gap between research and direct services by improving the science and practice of implementation of evidence-based programs and promising practices. NC DSS serves as a member of the State Implementation Team and of the ECAC Grants review work group.
Positive Parenting Program (Triple P)

With braided funding from the Division of Public Health (Title V), Division of Social Services, North Carolina Partnership for Children, the John Rex Endowment (Wake County), and other local sources, North Carolina has expanded Triple P into forty-six (46) counties.

Funded communities are implementing Triple P at varying levels, including the Stay Positive media campaign (Level 1). A website, tip papers, and other materials are available in funded counties. Additional information may be found at: http://www.triplep-parenting.net/glo-en/home/. In addition, Triple P Online is available to all families in North Carolina and is available in child and teen version. Triple P has been widely embraced in North Carolina, with additional communities eager to replicate the program.

With funding from The Duke Endowment (TDE), the National Implementation Research Network (NIRN) has completed a study on the implementation of Triple P in two (2) NC counties. Currently The Duke Endowment, the NC Division of Social Services and the NC Division of Public Health are funding the Frank Porter Graham Child Development Institute to develop infrastructure/scaffolding training resources and tools to support practitioners in delivering Triple P with model fidelity and to improve the “coaching” skills of the local Triple P Coordinators.

To support the implementation of Triple P in North Carolina a NC Triple P State Learning Collaborative was established at the onset of implementation of the program in NC. This Collaborative continues to provide peer-to-peer support, training, collaborative and technical assistance to local Triple P Coordinators in the implementing counties. In addition, a NC Triple P State Leadership Team has been formed to support continued expansion. NC DSS is a member of the State Leadership Team.

The Division of Public Health supports a 1.0FTE State Triple P Coordinator, two 0.5FTE Triple P Data Specialists, and a 0.5FTE Triple P Online Coordinator. In July 2017, an additional resource will be added to help develop an NC Triple P Orientation Manual.

In the current year, NC DSS has invested one-time funding to increase the number of practitioners trained to deliver Triple P. NC DSS is seeking recurring funding that may further support implementation of Triple P with county social service agencies in 2017-2018 to prevent child abuse and neglect.

Maternal, Infant and Early Childhood Home Visiting (MIECHV)

The North Carolina Maternal, Infant, and Early Childhood Home Visiting Program (NC MIECHV) goal is to coordinate an effective statewide planning and implementation system through a strong alliance with key partners in early childhood services at the State and local levels that ensures all children grow up in environments that are safe and supportive, and that maximally promote each child’s physical, emotional, cognitive and behavioral health. **Objective 1:** Utilize the Governor's Early Childhood Advisory Council (ECAC) and other partnerships to optimize strong and effective leadership, coordination and implementation of the NC MIECHV Program at both the State and the local levels. **Objective 2:** Educate communities, policy makers and families on the goals and objectives of the NC Home Visiting Program throughout implementation utilizing a public health approach. **Objective 3:** Implement a strong support network to assist local community service providers with implementation of evidence-based home visiting models adhering to fidelity requirements. **Objective 4:** Increase the capacity of local partnerships working to coordinate, improve, and expand delivery of early childhood programs and services. **Objective 5:** Improve coordination of services for at-risk communities. **Objective 6:** Ensure accountability with program standards and measurement mechanisms to track identified outcome indicators. NC MIECHV will continue to implement two evidence-based home visiting programs in seven targeted communities: Healthy Families America and Nurse-Family Partnership. Division of Public Health

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Health will continue to provide training, technical assistance, quality assurance and fidelity monitoring to local sites.

NC DSS has been engaged with other state agencies and stakeholder groups to ensure coordination on this DPH funded project. DPH entered into a data sharing MOU with NC DSS for child maltreatment data related to children enrolled in MIECHV. NC DSS is a member of the MIECHV Advisory Committee and will continue to serve on this committee in 2017-2018.

NC State Collaborative for Children, Youth and Families

The North Carolina Collaborative for Children, Youth and Families is a forum for collaboration, advocacy and action among families, public and private child, youth and family serving agencies and community partners to improve outcomes for all children, youth and families in the state. It serves as a NC DSS stakeholder body for the Child and Family Services Plan. The Collaborative is co-chaired by a family partner. Several of North Carolina’s child-serving agencies such as the Department of Public Instruction, Department of Public Safety (Juvenile Justice) and the Division of Mental Health, Developmental Disabilities and Substance Abuse are participating members of the Collaborative. Meetings occur twice per month and include opportunities for sharing information and problem solving. The Collaborative is not mandated by statute and participation is voluntary.

North Carolina Lifespan Respite Project

North Carolina's Lifespan Respite Project is being led by the North Carolina Division of Aging and Adult Services (NC DAAS), in collaboration with the North Carolina Respite Care Coalition (NCRCC) and other key partners. NC DAAS is a sister division to NC DSS, which is the CBCAP Lead Agency within NC DHHS. The project seeks to enhance and expand the quality and availability of lifespan respite services for all age groups via consumer and provider education and informational activities, volunteer and provider training, and resource development. NC DSS is a member the North Carolina Lifespan Respite Project Advisory Team.

For 2017-2018, North Carolina’s Lifespan Respite Project has identified the following recommendations and action steps:

- Administer a statewide respite voucher program to provide respite vouchers to family caregivers of persons of all ages in need of assistance
- Develop an awareness and advocacy agenda for respite initiatives that can accompany other ongoing advocacy efforts
- Continue to promote online training modules, “Planning and Using Respite Across the Lifespan” as well as publications for organizations interested in starting a respite program using volunteers.
- Examine publicly-funded respite options and the barriers to accessing this respite. Complete a spreadsheet of these resources and distribute to professional referral sources.
X. NEEDS ASSESSMENT AND CRITERIA FOR FUNDED PROGRAMS

• Describe how the current inventory of unmet needs and the current array of community-based child abuse and neglect prevention programs and activities will be used to inform the criteria for funding new programs and activities for the upcoming year.

• Describe the criteria that the CBCAP lead agency will use to develop or select and fund evidence-informed or evidence-based community based child abuse and neglect prevention programs and activities.

• This can be met by including the State’s current announcement of the priority for local grant awards or request for proposals (or other process, as applicable).

Assessing Unmet Needs through Request for Applications

Regardless of service area or funding source, all community-based grant applicants proposing to deliver child maltreatment prevention services are required to describe the targeted community need the proposed community-based prevention program will address in their application for funding. When describing community need, applicants are asked to reference North Carolina county child victimization data for their area. NC DSS provides this data to applicants as well a resource through the University of North Carolina showing available NC child welfare data online http://ssw.unc.edu/ma/index.html. After review of this data, applicants should speak to factors contributing to the county’s child victimization rate and why providing the proposed community-based prevention program may have a long-term impact on these rates. Applicants were asked to discuss:

1. How their agency assessed the current needs of their community (i.e. – collaborative needs assessment process with other agencies and parents, focus groups, accessing other agency’s data/reports, etc.)
2. Who their target population is? Where are they located? How were they identified?
3. Socio-economic needs of the community and risk factors of the specific target population.
4. Need for the community-based prevention and family support services 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, 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.

Applicants were also encouraged to discuss involvement with their local Community Child Protection Team (CCPT), which is charged with 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.

Assessing Needs through Community Child Protection Teams

The Community Child Protection Team (CCPT), a component of the Child Fatality System, is an interdisciplinary group of community representatives. Local teams identify gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, assist the county director in protection of living children and develop strategies to ameliorate child abuse and promote child well-being at a local and state level. Currently, the CCPTs serve as the primary
vehicle by which NC DSS assesses unmet needs and current array of community-based child abuse and neglect prevention program and activities.

Recommendations for 2017-2018 include:

- To encourage common CFT (child and family team) practices to coordinate services for children, youth, and families
- To strengthen the capacity of local CCPTs to work with social services in improving child welfare services
- To create and maintain a survey to track CCPT reviews of child protection cases
- To contribute to the CFSR Program Improvement Plan
- To update a CRPs/CCPTs guidebook on how local teams should operate so that they know how to comply with state and federal requirements and contribute to improving child welfare
- To create a multi-year strategic plan for the Advisory Board

Currently Funded CBCAP Programs

Children’s Trust Program
In December 2015, NC DSS released a Request for Application (RFA) for Children’s Trust Program Services that combine CBCAP, IVB-2 and Children’s Trust Funds for the provision of primary and secondary child maltreatment prevention activities. This RFA was issued for a three year grant period (SFY 2017, 2018, 2019) and Contracted agencies will enter their second year of funding in July 2017. Children’s Trust agencies will implement a program that demonstrates an acceptable level of evidence-based or evidence-informed practice which include qualitative and quantitative evaluation plans that have proven outcomes in increasing protective factors for the prevention of child abuse. These community-based programs will 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 were awarded throughout the state.

North Carolina Children’s Trust Program service providers are required to meet all of the following requirements to be eligible for funding:

- Provide services based on the Principles of Family Support Practice.
- Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
- Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.
- Implement Primary and/or Secondary prevention services.
- Serve target populations most at risk of child abuse or neglect.
- Promote two or more of the five protective factors linked to lower incidence of child abuse and neglect.
- Provide a service or implement a program that demonstrates an acceptable level of evidence-based or evidence informed practice.
- Demonstrate a clear plan for implementation support
- Use outcome accountability and evaluation tools that demonstrate positive outcomes for children and families.

Eighty percent (80%) of available funds will be granted to 30 agencies implementing one or more of the following programs:

- Incredible Years Pre-School BASIC Parent Program for parents of children 3-6
- Incredible Years School-Age BASIC Parent Program for parents of children 6-12
- Strengthening Families Program for parents of children 6-11
- Circle of Parents
• Darkness to Light, Stewards of Children

Twenty percent (20%) of available funds will be granted to seven (7) agencies implementing evidence-based, evidence-informed models and activities not listed in the 80% category above. These programs are implementing:
  • In-Home SafeCare, Parent Child Interaction Therapy, and Motivational Interviewing
  • Nurturing Parenting and Circle of Parents
  • Nurturing Parenting and Incredible Years
  • Parents as Teachers (3 agencies)
  • Parents as Teachers Play Groups

Respite Program
NC DSS issued a Respite Program Services RFA in December 2014 for a three-year funding cycle of respite care for SFY 2016, 2017, and 2018. Ten (10) Respite Programs will be funded for their third and final year of the grant cycle. Respite Program service contractors are required to meet all of the following requirements to be eligible for funding:
  • Provide services based on the Principles of Family Support Practice.
  • Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
  • Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.
  • Implement Primary and/or Secondary prevention services.
  • Serve target populations most at risk of child abuse or neglect.
  • Promote two or more of the five protective factors linked to lower incidence of child abuse and neglect.
  • Use outcome accountability and evaluation tools that demonstrate positive outcomes for children and families.

In FY 2018, NC DSS anticipates issuing a RFA for Respite Program Services for an additional three years.

Community Response Program
As referenced in Section VIII., Actions to Advocate for Systemic Change, NC DSS utilized Promoting Safe and Stable Families funding to release an opportunity for county social service agencies to apply for grant funds to support a Community Response Program. The grant award period is from 7/1/16 through 6/30/19. The availability of grant awards was increased from four (4) grant awards in the prior funding period to eight (8) grant awards this next cycle. Community Response programs are intended to fill a gap in the continuum of child maltreatment prevention programming by reaching out to families who have been reported to county social services agencies, child protection services, but whose cases have been screened out at intake, closed with a decision of services recommended, or closed with a decision of no services needed, after an initial assessment. These services are voluntary and providers may not charge fees for services. The program continues to prioritize serving families with children 0-5 years of age. Also, Community Response programming will continue to support cross-agency collaborative, community-based initiatives 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 through community response programming.

XI. OUTREACH ACTIVITIES FOR SPECIAL POPULATIONS
  • Describe outreach activities that the CBCAP lead agency and the community-based and prevention-focused programs and activities will provide to maximize the participation of (please check all that apply):
Please check all that apply for outreach:

- [x] Parents
- [x] Adult former victims of child abuse and neglect or domestic violence
- [x] Racial and ethnic minorities
- [x] Members of other underserved or underrepresented groups (i.e. Fathers)
- [x] Children and adults with disabilities
- [x] Homeless families and those at-risk of homelessness
- [x] Unaccompanied homeless youth
- [ ] Other option – Please describe in your narrative

During 2014-2015, Children’s Trust and Respite Program services mandated that all agencies use a decision-making process reflective of the racial and socio-economic diversity of the community to be served. Local planning and governance begin at the family level where family members are a part of the local board, committees, workgroups, etc... Families significantly impact how decisions are made and how services are implemented in their communities. This model ensures programs are being developed that are meaningful and needed in the community. Family and consumer feedback regarding the quality of services, customer service and impact of services can help identify specific and creative solutions for gaps and unmet needs within the system. In agencies applications for grant funding, they are required to speak to how they affirm and strengthen families’ cultural, racial, and linguistic identities.

In FFY 2018, Children’s Trust and Respite Program services have identified the following populations/risk factors in their communities in need of supportive services, such as parenting support groups, parenting classes, home visiting, and respite. Some of these services are targeted to the following special populations:

- Fathers
- Teen Parents
- First time parents
- Parents of children with developmental delays, chronic health problems, or special needs
- Parents with mental health disorders or special needs
- Families and children living in poverty
- Native American populations
- Hispanic/Latino populations
- Grandparent/relative caregivers
- Separated parents and single parents
- Families experiencing domestic violence or substance abuse
- Homeless youth and families
- Court involved youth
- Non-English speaking youth and families
- Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex (LGBTQQI) youth
- Military families
- Victims of Human Trafficking

As required by CAPTA legislation, NCDSS will continue to engage in and support programs and activities to maximize the participation of all populations, to include: racial and ethnic minorities, children and adults with disabilities, homeless families and those at-risk of homelessness, unaccompanied homeless youth, adult former victims of child abuse and neglect or domestic violence, and members of other underserved and underrepresented groups.

Children with Special Needs

In 2017-2018, NC DSS will continue to utilize CAPTA funding to contract with the Family Support Network of North Carolina (FSN). The FSN is part of the University of North Carolina at Chapel Hill School of Medicine.
Family Support Network subcontracts with regional FSN programs to provide education, training, and support services to all families who care for children who are medically fragile or have special needs, including children who are substance exposed, HIV positive or developmentally delayed. Research supports the concept that education and support of these vulnerable families helps to reduce the likelihood of abuse or neglect of their children. The three goals of FSN are: (1) to provide education and training to foster, adoptive, birth and kinship families who are caring for medically fragile or special needs children in order to improve their knowledge about the conditions that are effecting the children and how to care for them; (2) to reduce isolation and improve family functioning through social support programs, including facilitating and leading support groups; (3) to enhance collaboration among local family support programs and service providers, including county social services agencies, Family Resource Centers, county foster parent associations, and neonatal intensive care units.

FSN will carry out activities to support the work of the eleven (11) local affiliates. These activities involve facilitating the provision of support to families across the state, specifically:

- Building community capacity to support families through technical assistance with local affiliates to assess community needs, collaborate with local organizations, and support families as they deal with the realities of raising a child who has special needs.
- Facilitating the matching listserv so that families can be matched with others across the state when an appropriate match is not available locally. Participate in the Parent to Parent USA listserv, to ensure that families with children who have low incidence disabilities are able to be matched with families in other parts of the country who are dealing with similar issues.
- Carry out evaluation activities in support of the project.
  - Families caring for infants who are medically fragile and children with special needs will increase their knowledge of the formal and informal resources available to them in the community. Their ability to access to these resources will improve through information offered through workshops, information offered individually, and direct referral to other agencies.
  - Families caring for children who have special needs will participate in supportive activities provided by FSN, gaining emotional support and improving their ability to cope with their situation.
  - Community capacity to serve families with children who have special needs is enhanced for the benefit of target families, who are able to access available support in the network of community organizations.

FSN affiliates are involved in collaborative activities with agencies in their communities, including the local DSS, neonatal intensive care units (NICU), Children’s Developmental Services Agencies (CDSAs), Family Resource Centers, First in Families groups, Foster and Adoptive Parent Associations, System of Care Collaborative, and Smart Start agencies. Other collaborative activities include participation with a Juvenile Crime Prevention Council, the Community Child Protection Team, the Patient Parent Advisory Committee for Womack Army Medical Center, an Autism Awareness Forum Planning Committee, Special Education Parent Teacher Association, a behavioral health collaborative, an infant mental health collaborative, an Exceptional Children’s Parent Advisory Council, the Centers for Exceptional Children Board, a Healthy Beginnings Coalition, the Kids Path Alliance, and a Parent/Professional Collaboration Conference Planning Committee.

FSN Programs collaborate primarily with DSS programs, the Early Intervention system (LICCs and CDSAs), hospitals, and schools.

Families At-Risk of Homelessness/Unaccompanied Homeless Youth

In North Carolina, unaccompanied homeless youth may meet the statutory definition of a dependent juvenile G.S. §7B-101 (9) which is a juvenile in need of assistance or placement because the juvenile has no parent, guardian, or custodian responsible for the juvenile’s care or supervision or who parent, guardian, or custodian is unable to provide for the care of supervision and lacks an appropriate alternative child care arrangement. A county social services agency may petition the court to place an unaccompanied homeless youth in foster care based upon his or her dependency status. If such youth is placed into foster care then they become eligible for
foster care services including those related to North Carolina’s Chafee Program, LINKS, if the youth is age 13 or older.

NC DSS will continue to coordinate with the State Coordinator of the North Carolina Homeless Education Program http://center.serve.org/hepnc/index.php to ensure compliance with the McKinney-Vento Homeless Act. In addition, NC DSS is an active member of the North Carolina Collaborative for Youth in Transition (NCCYT). The NCCYT is a network of representatives from public and private agencies that promote successful transitions to adulthood for youth in our communities. The aim is to inform and influence the systems affecting transitioning youth by advocating for improved services and outcomes. Goals include: 1) Share and disseminate information; 2) Promote collaboration; and 3) Advocate for improved services and improved outcomes in all areas of life for transitioning youth.

Cultural Competency Training

During 2017-2018, NC DSS will continue to provide Children’s Trust, Respite, and Community Response Program grantees access to the child welfare training, Building Awareness and Cultural Competency. The training is a three-day interactive, foundational training designed to enhance the cultural knowledge and sensitivity of social workers and supervisors working with culturally diverse individuals and families.

XII. PLAN FOR PARENT LEADERSHIP AND FAMILY INVOLVEMENT

• Describe how the CBCAP lead agency will implement activities and training to enhance parent participation and leadership.

• Include information on how parents are and will be involved in funded programs, including:
  o planning,
  o implementation and
  o evaluation.

Local Programming

Developing strong relationships between parents and staff is an essential ingredient to a 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. NC DSS grantees 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 Children’s Trust, Respite and Community Response Program 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.

Specifically, NC DSS grantees are 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. Grantees are required to report quarterly on how their agency is supporting parent engagement and leadership. In addition, NC DSS will continue to monitor parent engagement through monitoring phone calls, monitoring site visits and participation in a peer review process during their awarded 3-year funding cycle.

In FY 2018, NC DSS Children’s Trust and Respite Programs report that parents will assume leadership roles by representing on advisory committees and boards, assuming leadership roles at support groups, serving as mentors to new parent participants, and volunteering for activities such as field trips, fundraisers, and events.
Training and Technical Assistance

In 2017-2018, NCDSS will continue to contract with Prevent Child Abuse NC (PCANC) to provide training and technical assistance. PCANC will continue facilitating the Prevention Network Leadership Team (PNLT) that includes parents and grandparents. NC DSS and PCANC value the contributions of parent leaders and will continue to develop strategies to support parent leaders and strengthen parent/practitioner partnerships among Prevention Network members with a specific focus on local DSS agencies. Specifically, PCANC will:

- Offer training on issues such as but not limited to, parent-led community education including relationship building and the importance of research and evidence-based practice for program and policy.
- Provide information to Prevention Network (PN) members on effective parent/practitioner partnerships.
- Support the PNLT in further engaging parent leaders, including fathers to be a part of the Prevention Network Leadership Team.
- Identify new curriculum, readiness assessment tools, training opportunities, and other resources to support both practitioners and parents in strengthening parent/practitioner partnerships and providing access to Prevention Network members.
- Add new resources as they are available and providing the PN access to a compilation of resources on best practices related to parent leadership and parent/practitioner partnerships.

In 2017-2018, NC DSS will also continue to contract with PCANC to provide implementation support and training for local programs implementing Circle of Parents that has an intentional focus on promoting parent leadership. Evaluation indicates that technical assistance support to Circle of Parents programs strengthens implementation with fidelity, parent leadership, and father engagement.

State and Local County Government

During FFY 2015, NC participated in a Federal Child and Family Services Review. Upon conclusion of the review, it was determined that NC was not in substantial conformity with any of the 7 statewide data indicators or any of the 7 case review outcomes. As part of the NC Program Improvement Plan (PIP), NC DSS has developed a strategy to “develop and implement a state level child welfare family leadership model which will provide family ‘voice’ to inform state plans [CBCAP, CFSP/APSR, CAPTA], policies and practices. The multidisciplinary NC DSS Family Engagement workgroup has representation from other public divisions, county DSS agencies, community-based organizations, biological parents, foster parents, adoptive parents, and youth. The workgroup will receive support and technical assistance from FRIENDS: Family Resource Information, Education and Network Development Services - the National Center for Community Based Child Abuse Prevention, the Capacity Building Center for States, and NC State University Center for Family and Community Engagement. In FY 2018, The NC DSS Family Engagement Workgroup will:

- Review available family leadership strategies and adopt/adapt components as needed
- Conduct a readiness assessment for the state to implement a family leadership model
- Formalize the support mechanisms for family leadership engagement and create a North Carolina Child Welfare Family Advisory Council
- Engage the NC Child Welfare Family Advisory Council on the Community Child Protection Team Advisory Board, policy development workgroups, and other opportunities to support practice changes that promote family engagement

In FY 2018, the Community Child Protection Team Advisory Council will continue to involve parent leadership in 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.
XIII. PLAN FOR SUPPORT, TRAINING, TECHNICAL AND EVALUATION ASSISTANCE

- Describe the State’s plan for providing operational support, training, technical assistance and evaluation assistance to community-based, prevention-focused programs.
  - Examples may include training or support related to cultural competence, promotion of strong families, evaluation plans, implementing and sustaining evidence-based or evidence-informed programs and practices.

During FY 2018, NC DSS will directly provide a variety of training and technical assistance to Children’s Trust, Respite, and Community Response Program grantees via on-site monitoring visits, telephone conferences, workshops, e-mail communication and contracted implementation support of evidence-based programs.

Children’s Trust, Respite, and Community Response Program Required Training

During FY 2018, the following training is required for all direct service staff and their supervisors working in NC DSS funded Children’s Trust, Respite, and Community Response Programs:

- Connecting with Families: Family Support in Practice six-day specialized curriculum designed for family support professionals. 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. This training is offered at least twice a year at various locations throughout North Carolina.
- The National Alliance of Children’s Trust and Prevention Funds free, online training course, Bringing the Protective Factors Framework to Life in Your Work – A Resource for Action. This course supports implementation of the Strengthening Families Protective Factors Framework in multiple settings and can be accessed at http://ctfalliance.org/onlinetraining.htm

Implementation Support

In FY 2018, NC DSS will contract with Prevent Child Abuse North Carolina (PCANC) to provide support based on implementation science to enhance community-based agencies’ capacity to implement evidence-based and evidence informed programs effectively. This technical assistance helps programs achieve their outcomes and adhere to model fidelity in a manner that positively affects parenting strategies and enhances protective factors for families in North Carolina. Agencies benefit from support around participant recruitment plans; group management strategies; selecting skilled and experienced staff; curricula implementation problem-solving; ongoing retention strategies; and model fidelity. With collaborative support from NC DSS and other public and private funders, PCANC will provide implementation support for approximately 46 Circle of Parents, Incredible Years Preschool and School Age Parent Programs, and Strengthening Families Program 6 -11. Each agency will access implementation support through a designated Implementation Support Specialist.

In FY 2018, implementation support activities will include:
- Offer a planning/orientation phone call to all Implementation Support Network agencies
- Offer phone/virtual implementation coaching calls to all Implementation Support Network agencies
- Offer up to two (2) implementation support site visits to all Implementation Support Network agencies
- Plan and facilitate six (6) to eight (8) regional skill building days for members of the Implementation Support Network
- Provide a password protected Implementation Support Network members page on PCANC’s website
- Design and administer annual Implementation Support Network survey
- Manage statewide outcome evaluations that includes training on data collection, entry, analysis, and reporting for the Circle of Parents program, Incredible Years Preschool and School Age Parent programs, and the Strengthening Families 6 – 11 program
• Offer, plan, and facilitate up to two (2) Circle of Parents Core/Children’s Program Training
• Coordinate a nationally facilitated Incredible Years Core Training
• Coordinate a nationally facilitated Strengthening Families Training

**The Incredible Years Program (IY)**

Coaching provides quality assurance, technical assistance, and coaching for fidelity to community based agencies implementing and/or operating this evidence-based program. One marker of fidelity is national Group Leader Certification, a process facilitated by the IY national office. North Carolina has more certified IY facilitators than any other state in the USA. All sites in the IY network will engage in an outcome evaluation, using the Parenting Practices Interview and the Eyberg Child Behavior Inventory.

**The Strengthening Families Program (SFP)**

Coaching provides clinical feedback to facilitators of the program and model fidelity/quality assurance issues with sites. All sites in the SFP Network will engage in an outcome evaluation, using the SFP evaluation survey.

**The Circle of Parents Program (Circle)**

The technical assistance provided includes coaching, training and consultation focused on implementation with fidelity as defined by best practice standards, parent leadership, father engagement, and strengthening the five protective factors in families. Circle of Parents will utilize the Protective Factor Survey as part of its outcome evaluation.

**Professional Education Opportunities**

In FY 2018, PCANC will provide professional education opportunities to hundreds of professionals across the state. PCANC offers training and education opportunities to professionals at agencies including but not limited to, county social service agencies, family resource centers, local health departments, child care providers, schools, and non-profit agencies providing parent training, home visiting, information and referral, and other prevention activities.

PCANC will offer the following training and education opportunities:

- Facilitator/parent leader training for Circle of Parents, Incredible Years, and Strengthening Families
- Regional skill building sessions to the Implementation Support Network
- Separate webinars for the Implementation Support Network members implementing Circle of Parents, Incredible Years, and/or Strengthening Families on how to manage data collection for this program
- Prevention Network quarterly webinars
- **Recognizing and Responding (R&R) to Suspicions of Child Maltreatment** (English & Updated Spanish): free, online, self-guided trainings in recognizing and responding to child maltreatment. North Carolina general statute requires that all citizens are mandated to report suspicions of child maltreatment to their local social service agencies and/or law enforcement agency. The English course also provides information on the Multiple Response System, the Protective Factors Framework, Safe Surrender, Children’s Trust Fund, NC Division of Child Development and Early Education reporting rules, Preventing Sex Trafficking and Strengthening Families Act. The Spanish one hour course is designed to provide the general public with basic information about recognizing and responding to suspicions of child maltreatment.
- **What is Prevention** – online, self-guided training that offers participants an increased understanding of child maltreatment prevention; how prevention is different from intervention; an introduction to the concept of risk and protective factors; and an opportunity to become familiar with prevention services
- Ongoing identification of training needs for Prevention and Implementation Support Network members
Cultural Competency

During 2017-2018, NC DSS will continue to provide Children’s Trust, Respite, and Community Response Program grantees access to the child welfare training, *Building Awareness and Cultural Competency*. The training is a three-day interactive, foundational training designed to enhance the cultural knowledge and sensitivity of social workers and supervisors working with culturally diverse individuals and families.

The Prevention Network

In FY 2018, the Prevention Network (PN) will support effective prevention services for North Carolina families. The PN encompasses a diverse group of over 375 individuals and agencies, including early childhood education, public health, mental health, physicians, family support, nonprofit, all 100 county social service agencies, all 85 county departments of health, and individuals who are committed to improving their ability to strengthen families and prevent child abuse in all its forms.

For the 2017-2018 fiscal year, the Contractor will continue focusing on the following three areas known to enhance prevention activities in local communities:

1. *Capacity Building and Networking among Community-Based Agencies*: The PN is guided by an active Prevention Network Leadership Team (PNLT) comprised of representatives from member agencies as well as parents and grandparents. The PNLT provides guidance on membership engagement, focus areas, webinar topics, resources, and member benefits.

2. *Expanding Community Engagement*: As the Prevention Network strives to expand its membership and strengthen services, the Contractor will explore opportunities to increase engagement of county DSS agencies, tribes, and the military. Fostering these connections can help improve local information sharing and support to community-based agencies and organizations, including county departments of social services.

3. *Developing and Strengthening Parent Leadership and Parent Practitioner Partnerships*: Parents, grandparents, and agency personnel participate on the Prevention Network Leadership Team. NC DSS and PCANC value the contributions of Parent Leaders and will continue to develop strategies to support Parent Leaders and strengthen Parent/Practitioner Partnerships among PN members with a specific focus on local DSS agencies.

In FY 2018, support from NC DSS, PCANC PN will:

- Provide guidance and facilitation to help parents and community leaders develop local Child Abuse Prevention Plans (CAPPs) through facilitated community meetings and training, such as Community Cafés, addressing the Protective Factors, and evaluating success using Pathways to Grade Level Reading measures related to Family Support.
- Support opportunities for Prevention Network members to connect with each other locally and regionally to share strategies, tools, and other resources for shared learning.
- Share information about policies, programs, research, and resources that support healthy families and children through PN Action Alerts, webinars, and monthly electronic newsletter.
- Provide information to PN members on effective parent/practitioner partnerships, including access to a compilation of resources on best practices related to parent leadership and parent/practitioner partnerships.
- Support the PNLT in further engaging parent leaders, including fathers to be a part of the Prevention Network Leadership Team.
- Identify new curriculum, readiness assessment tools, training opportunities, and other resources to support both practitioners and parents in strengthening parent/practitioner partnerships and providing access to Prevention Network members.
- Provide membership stipends for 100 local departments of social services, 10 individual members of the Parent/Grandparent Leadership Team, as well as 15 organizations, with priority given to Community Response, Family Support, Respite, and fatherhood programs.
XIV. EVALUATION

- Describe how the CBCAP lead agency’s activities, and those of the network and its members (where appropriate), will be evaluated.
- Describe the State’s overall evaluation plan and approach that will be used to demonstrate the effectiveness of activities conducted, to include outcomes of monitoring and results of the evaluation.
- Develop evaluation plans that incorporate a continuum of evaluation approaches including quantitative and qualitative data collection methods. This can include a peer review process.
- Include plans for reporting requirements regarding the percentage of total CBCAP funding used to support evidence-based (EBP) and evidence-informed programs (EIP) and practices, to include infrastructure costs.
- States that use CBCAP funds for network support/development are strongly advised to develop strategies and methods to evaluate the effectiveness of their network and its activities, as well as their funded programs.

In FY 2018, NC DSS will continue to utilize a range of evaluation approaches to assess program effectiveness to include the following below.

Client Satisfaction Survey
NC DSS will continue to mandate that all Children’s Trust Program and Respite grantees administer a Client Satisfaction Survey. The survey will be offered in both English and Spanish. Participants will be asked to complete the survey at the close of a program offered at each site. The surveys will then be aggregated either by NC DSS Performance Management Evaluation Section or NC DSS Community Based Programs consultative staff.

NC Family Support Outcome Scale
NC DSS will continue to utilize the NCFSOS to assess statewide impact of services provided to prevent child abuse and neglect. NC DSS requires providers to input data into a web-based system monthly. NC DSS Performance Management Evaluation Section will collaborate with the Child Welfare Section to monitor timely submission of information into the data system. During FY 2018, NC DSS will gather data received from community providers through the web based system. This information will then be interpreted to determine the impact of services. The NCFSOS is divided into four domains, each of which measures several broad areas through subscales: 1) Overall Child Functioning; 2) Overall Parent Functioning; 3) Overall Family Functioning; and 4) Family’s Relationship to the Community. Data collection will also include information related to gender, ethnicity, and participant and family special needs.

Collaborative Partnerships in Evaluation
In FY 2018, PCANC will continue to contract with independent evaluators to assess IY, SFP, and Circle of Parents outcomes and, in the case of SFP, fidelity to the model. Continued support will be provided to local programs in how to best use data to inform practice. Outcome reports provide NC DSS information for program oversight and communication with stakeholders such as the North Carolina General Assembly and the Federal government. In addition, evaluation outcomes help demonstrate the three programs’ impact on positive parenting, protective factors, family functioning, and the healthy development of children. For more information, please see Section XIII: PLAN FOR SUPPORT, TRAINING, TECHNICAL AND EVALUATION ASSISTANCE.
Contract Monitoring and Reporting

All funded grantees will submit a renewal application that outlines all contract monitoring required during the contract period. The monitoring process encompasses a variety of tools used throughout the contract period, such as fiscal and program reports, desk monitoring, technical assistance and/or monitoring visits and on-going telephone/e-mail contact with grantees to determine agency’s contractual compliance and program success. NC DSS contract administrators are responsible for monitoring contractual activities, maintaining monitoring documentation and providing monitoring follow-up to all grantees.

All Children’s Trust and Respite Program grantees will participate in the Performance Status desktop monitoring process. Grantees will complete their first quarterly Performance Status Monitoring Tool within 90 days of the contract start date. A conference call will be conducted between the NC DSS Contract Administrator and the grantee’s administration/staff to review the grantee’s report to ensure that required components of programming, accurate monthly reporting, and fiscal procedures will be implemented and baseline data will be compiled to fulfill the evaluation plan of the contract. After each monitoring phone call, the Contract Administrator conducts a risk assessment on the agency and its program.

In addition to the desktop monitoring process, Children’s Trust and Respite Programs grantees receive a minimum of one on-site monitoring review during the three year grant cycle. Sites identified as needing additional technical assistance and monitoring support may receive additional visits. A Site Review Report is completed at the end of the on-site monitoring review. Areas concerning programming, fiscal management, compliance requirements, conflict of interest, personnel, safety, organizational capacity, subcontract services and evaluation are also reviewed to confirm contractual compliance during the on-site review. The OMB Circular A-133 specifies the following fourteen areas of compliance monitoring, which if applicable to the program, are reviewed during the on-site review:

- Crosscutting Requirements
- Activities Allowed or Unallowable
- Allowable Costs/Cost Principles
- Cash Management
- Eligibility
- Equipment and Real Property Management
- Matching, Level of Effort, Earmarking
- Period of Availability of Federal Funds
- Procurement and Suspension and Debarment
- Program Income
- Reporting
- Sub Recipient Monitoring
- Special Tests and Provisions
- Conflict of Interest

XV. CHILD ABUSE PREVENTION MONTH AND PUBLIC AWARENESS ACTIVITIES

- Describe of activities the CBCAP lead agency will coordinate or participate in, and the network’s role in the promotion and observance of the upcoming Child Abuse Prevention Month during April

The Federal Child Abuse Prevention and Treatment Act (CAPTA) requires each state receiving CAPTA funding to conduct a statewide public awareness campaign for child maltreatment. Through NC DSS’ contract with PCANC, communities across the state are provided child abuse prevention awareness resources geared at strengthening families and promoting healthy child development. PCANC continues to integrate the most...
current research on communicating child maltreatment prevention messages into its public education initiatives and media strategies.

NC DSS will continue to work closely with PCANC to promote child abuse prevention activities not only during April 2018, but throughout the entire fiscal year. Anticipated activities include:

- Write, design, produce, and distribute print, digital, and audiovisual materials, such as, but not limited to: videos, infographics, social media posts, blog posts, press releases, and letters to the editor, op-eds, brochures, and fliers for use by individuals and community organizations, inclusive of local county social service agencies, to increase awareness of effective child abuse and neglect prevention programs and strategies
- Engage the public in dialogue about child maltreatment prevention through social media including, but not limited to: creating and posting new content on PCANC’s social media channels, linking, sharing, and commenting on state and community partners’ content, and responding to questions or direct messages on PCANC’s social media channels to further cultivate conversation
- Maintain and regularly update web-based resource centers on PCANC’s website to inform the public about child maltreatment prevention resources, research, and strategies, including, but not limited to:
  - Protective Factors
  - NC’s Safe Surrender Law
  - The impact of child abuse and neglect
  - Parent leadership
  - NC Children’s Trust Fund and Kids First License Plate
  - Fatherhood and the importance of engaged fathers (Fatherhood Resource Center)
  - Child maltreatment data and statistics
  - Effective family-strengthening programs and implementation support
  - Recognizing and responding to child maltreatment
  - Child sexual abuse prevention
  - Links to an online, free, self-guided Recognizing and Responding to Suspicions of Child Maltreatment Course available in English and Spanish
  - A link to an online, free, self-guided “What is Prevention?” course
  - Links to topic- and audience-specific webinars and trainings
- Write, design, produce, and distribute print, digital, and web-based tools and toolkits containing materials, including: brochures and fliers, social media posts, educational webinars, sample media materials, tips for messaging and working with the media, and tips for using social media to support planning and implementation of public awareness events and activities in local communities by individuals and community organizations, including local county social service agencies. These resource may include:
  - Parent Leadership Month Toolkit
  - Child Abuse Prevention Month Toolkit
  - Pinwheels for Prevention® Toolkit
  - Talking About Prevention Toolkit
  - NC Children’s Trust Fund and Kids First License Plate Public Awareness Toolkit
- Collaborate with state and community partners in events such as, but not limited to: press conferences, public awareness events, presentations to community groups, workshops, summits, trainings, and conferences to increase awareness of effective prevention programs and strategies in local communities
XVI. AREAS FOR TECHNICAL ASSISTANCE

- Describe any important contextual factors that may impact the ability of the CBCAP lead agency to implement their proposed plans for the upcoming year.

An important contextual factor includes a priority focus on strengthening the State’s oversight of county social services agencies, child welfare services. NCDHHS, through the NC DSS’ Child Welfare Services Section, has the responsibility to ensure all county social services agencies are operated in a manner to ensure children and families are provided with the services and programs to address the needs of safety, permanency and well-being of children.

In general, developing and implementing performance measurement requires leadership and infrastructure at the state and local levels, strong communication with stakeholders and service partners as well as compliance with program design. The current system does not have the capacity to measure the complexity of child welfare in such a comprehensive manner. This priority is challenged by a high vacancy rate within the NC DSS’ Child Welfare Services Section. NC DHHS, NC DSS is actively working with the NC General Assembly to seek additional resources that will support the improvement of child welfare services in NC.

As stated XII. PLAN FOR PARENT LEADERSHIP AND FAMILY INVOLVEMENT, NC DSS has a PIP workgroup focused on selecting a family leadership model and creating a North Carolina Child Welfare Family Advisory Council. This PIP strategy requires additional technical assistance. NC DSS will seek technical assistance from the National Center for Community Based Child Abuse Prevention, the Capacity Building Center for States, and NC State University Center for Family and Community Engagement.

NC DSS will continue to engage FRIENDS National Center for Community-Based Child Abuse Prevention and the National Alliance of Children’s Trust and Prevention Funds as needed for training and technical assistance needs regarding the provision of services outlined in this plan. Furthermore, NC DSS will continue to draw on the expertise of several state and community-level partners to help inform child welfare connections with early childhood systems integration and trauma-informed child welfare practice.

XVII. CERTIFICATIONS

The Certification Regarding Lobbying and Disclosure of Lobbying Activities Forms are included as required.
ATTACHMENT 6: Governor's Assurance Statement

COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT PROGRAM (TITLE II OF THE CAPTA AMENDMENTS OF 2010 (P.L. 111-320))

GOVERNOR'S ASSURANCE STATEMENT

As Governor of the state of North Carolina, I am providing the following assurance that I have designated the NC Department of Health and Human Services – Division of Social Services to be the lead agency, administer the funds, and assume the obligations imposed by the terms and conditions of the Community-Based Grants for the Prevention of Child Abuse and Neglect award. I further assure that the lead agency will provide or will be responsible for providing--

(A) Community-based child abuse and neglect prevention programs and activities designed to strengthen and support families to prevent child abuse and neglect composed of local, collaborative, public-private partnerships directed by interdisciplinary structures with balanced representation from private and public sector members, parents, and public and private nonprofit service providers and individuals and organizations experienced in working in partnership with families with children with disabilities;

(B) Direction to an interdisciplinary, collaborative, public-private structure with balanced representation from private and public sector members, parents, and public sector and private nonprofit sector service providers;

(C) Direction and oversight to the network through identified goals and objectives, clear lines of communication and accountability, the provision of leveraged or combined funding from federal, state and private sources, centralized assessment and planning activities, the provision of training, technical assistance, evaluation assistance and reporting and evaluation functions.

(D) A demonstrated commitment to parental participation in the development, operation, and oversight of the community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect;

(E) A demonstrated ability to work with state and community-based public and private nonprofit organizations to develop a continuum of preventive, family-centered, comprehensive services for children and families;

(F) The capacity to provide operational support (both financial and programmatic) and training, technical assistance, and evaluation assistance to community-based child abuse and neglect prevention programs and activities designed to strengthen and support families to prevent child abuse and neglect, through innovative, interagency funding and inter-disciplinary service delivery mechanisms; and

(G) Integration of its efforts with individuals and organizations experienced in working in partnership with families with children with disabilities, parents with disabilities and with the child abuse and neglect prevention activities of the state, and demonstrate a financial commitment to those activities.

[Signature of Governor]

06/05/2017

(Date)

OMB Control # 0970-0155 (Expires 08/31/2018)
ATTACHMENT 7: State Lead Agency Assurance Statement

COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT PROGRAM
(TITLE II OF THE CAPTA AMENDMENTS OF 2010 (P.L. 111-320))

STATE LEAD AGENCY ASSURANCE STATEMENT

| STATE: North Carolina | LEAD AGENCY: NC Dept. of Health and Human Services – Division of Social Services |

On behalf of the above named agency, which has been designated by the Governor of the state to be the lead agency responsible to administer the funds and assume the obligations imposed by the terms and conditions under the Community-Based Grants for the Prevention of Child Abuse and Neglect award, the following assurances are provided:

(A) A description of the inventory of current unmet needs and current community-based and prevention-focused programs and activities to prevent child abuse and neglect, and other family resource services operating in the state, will be included with the Annual Performance Report (and subsequent year’s reports);

(B) Funds received under this title will supplement, not supplant, other state and local public funds designated for the start-up, maintenance, expansion, and redesign of community-based and prevention-focused programs and activities to strengthen and support families to prevent child abuse and neglect;

(C) The state has the capacity to ensure the meaningful involvement of parents who are consumers and who can provide leadership in the planning, implementation, and evaluation of the programs and policy decisions of the applicant agency in accomplishing the desired outcomes for such efforts; and

(D) The lead agency will provide the Secretary with reports at such time and containing such information as the Secretary may require (and every year on the same date for the life of the grant).

(Signature of Responsible Lead Agency Administrator)

Mandy Cohen, Secretary of the NC Department of Health and Human Services
(Typed Name and Title of Administrator)

(Date)

OMB Control # 0970-0155 (Expires 08/31/2018)
ATTACHMENT 8: Leveraged Funds Worksheet with Example Worksheet and Guidance for Differentiation Between Leveraged and Match Funds

LEVERAGED FUNDS WORKSHEET for FFY 2017 APPLICATION

STATE: NC  LEAD AGENCY: NC Department of Health and Human Services – Division of Social Services

<table>
<thead>
<tr>
<th>AMOUNT OF CLAIM</th>
<th>DATE(S) FUNDS WERE RECEIVED AND BUDGETED BY LEAD AGENCY</th>
<th>SOURCE OF FUNDS BEING CLAIMED</th>
<th>PURPOSE FOR WHICH FUNDS WERE BUDGETED AND SPENT</th>
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<td>$13,023,772</td>
<td>10/1/15</td>
<td>NC Smart Start</td>
<td>To support child abuse prevention and family resource centers across the state of North Carolina</td>
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<td>$</td>
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<td></td>
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INCENTIVE CLAIM ASSURANCE: All amounts figured into this claim are non-federal monies that have been leveraged by the state, directed through the CBCAP lead agency submitting the application, and budgeted and spent in FFY 2016 (i.e. 10/1/15 – 9/30/16) to support community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect, as defined in the legislation, that coordinate resources among a range of existing public and private organizations for the purposes defined under this Title. No funds claimed here have been claimed to leverage any other source of federal funds. State and non-federal funds that are being used to meet the maintenance of effort, match or other cost-sharing requirements for other federal funding are not eligible to be claimed.

TOTAL CLAIM | PREPARED BY: [Signature] (Fiscal Agent) (Date) 5/18/17
SUBMITTED BY: [Signature] (Lead Agency Authority) (Date) 6/9/17

OMB Control # 0970-0155  (Expires 08/31/2018)
**DISCLOSURE OF LOBBYING ACTIVITIES**

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

<table>
<thead>
<tr>
<th>1. Type of Federal Action:</th>
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<tbody>
<tr>
<td>a. contract</td>
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<tr>
<td>b. grant</td>
</tr>
<tr>
<td>c. cooperative agreement</td>
</tr>
<tr>
<td>d. loan</td>
</tr>
<tr>
<td>e. loan guarantee</td>
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<tr>
<td>f. loan insurance</td>
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<th>2. Status of Federal Action:</th>
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<tr>
<td>b. initial award</td>
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<tr>
<td>c. post-award</td>
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<td>a. initial filing</td>
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<tr>
<td>b. material change</td>
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For Material Change Only:

- year __________ quarter __________
- date of last report __________

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<th>4. Name and Address of Reporting Entity:</th>
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<tr>
<td>□ Prime</td>
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<tr>
<td>□ Subawardee</td>
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<tr>
<td>Tier _______, if known:</td>
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Congressional District, if known: 4c

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<th>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</th>
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<tbody>
<tr>
<td>North Carolina Department of Health and Human Services</td>
</tr>
<tr>
<td>101 Blair Drive</td>
</tr>
<tr>
<td>2001 Mail Service Center             Raleigh, NC 27699-2001</td>
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Congressional District, if known:

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<th>6. Federal Department/Agency:</th>
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<tr>
<td>US Department of Health and Human Services/ACYF</td>
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<tr>
<th>7. Federal Program Name/Description:</th>
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<tr>
<td>Community-Based Child Abuse Prevention</td>
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CFDA Number, if applicable: 93.590

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<th>8. Federal Action Number, if known:</th>
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<td>$ 734,558</td>
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<tr>
<th>10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):</th>
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<tr>
<th>10. b. Individuals Performing Services (including address if different from No. 10a):</th>
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<td>(last name, first name, MI):</td>
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<td>Not Applicable</td>
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</table>

| 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. The disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the party above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure. |

Signature: [Signature]

Print Name: Mandy Cohen, MD, MPH

Title: Secretary, NC Department of Health and Human Services

Telephone No.: 919-855-4800

Date: 6/11/17

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Standard Form LLL (Rev. 7-97)