**SERVICE STANDARD  
PREVENTION SERVICES**

**Service and Support for Families – Domestic Violence Prevention**

**2024-2025**

1. **Prevention Definitions**
   1. **Primary Prevention**  
      The first level of prevention, primary prevention, focuses on strategies for the general public. Primary prevention strategies often seek to strengthen family functioning. The philosophy of primary prevention is that keeping children safe from abuse and neglect is the responsibility of the entire community. The long-term goal of such strategies is to educate the entire community to create social change that is intolerant of child maltreatment.
   2. **Secondary Prevention**  
      This level of prevention services focuses on those who are at-risk for abuse and neglect of their children. These include high stress familial situations, lack of familial or community support and young maternal age. Possible goals of at-risk based (secondary) prevention services could be to: increase parents’ parenting skills and strategies; enhance bonding and communication between at-risk parents and their children; increase the connection between at-risk parents and resources or services in the community; increase parents’ skills in coping with stresses of caring for child with special needs; and to increase access to social and healthcare services for all community members. These goals ultimately seek to strengthen family functioning and keep children safe from abuse and neglect.
2. **Service Description**

**Note: Services must meet the child abuse prevention definitions above. Please feel free to utilize the child abuse risk factors in the RFP instructions to assist with this.**   
Provision of support and education to young mothers and fathers or identified victims of domestic violence who would benefit from case management services may include the following:

• Parenting skills education • Goal setting (personal, educational and vocational)   
• Accessing community resources • Independent living skills assistance  
• Financial literacy and planning • Development of Relapse Prevention Plans  
  
1. Participants will be oriented to program and agree to guidelines and goals.  
2. Participants, children, and staff interact in positive ways.  
3. Staff responds appropriately to the individual needs of participants and children.  
4. Staff encourages participants to make responsible choices.  
5. The program has procedures for tracking enrollment/participation of all participants.  
6. Services will be conducted with behavior and language that demonstrates respect for sociocultural values, personal goals, lifestyle choices, and complex family interactions and be delivered in a neutral valued culturally competent manner.

7. Participants will be connected to formal (paid) and informal (unpaid) supports.

8. Additional Services are available to families entering the workforce and/or post-secondary education, as identified by the service provider and can include the following:

* Financial support can be used to support transportation (public transportation, gas cards) to and from employment for up to 6 weeks.
* Financial support can be used to support childcare from a Level 3 childcare provider, for up to 6 weeks of service.

1. **Target Population- additional requirements**  
     
   Services are available to parents of children under the age of 18. With particular focus areas of families dealing with Domestic Violence or who have had interaction with DCS (not current)
2. **Goals and Outcome Measures- all goals are required & reported monthly**  
     
   **Goal #1**  
   To prevent child maltreatment (abuse and neglect) by increasing knowledge of proper parenting skills and understanding of ages and stages of child development and the impact of domestic violence within families.

Outcome Measures:   
1. 85% of participants will demonstrate/report increase in knowledge of parenting skills.

**Goal #2**  
To increase awareness and connection to formal and informal supports in the community.

Outcome Measures:   
1. 90% of participants will develop at least three formal (paid) and three informal (unpaid) supports before successfully leaving the program.

**Goal #3**  
To increase ability of participants to function independently.

Outcome Measures:   
1. 75% of participants will access other supportive services to assist them in meeting their and their family’s needs such as counseling, educational or vocational training, or social services programming.  
2. 75% of participants will demonstrate/report budgeting and other financial skills to function adequately.

1. **Supervision**Staff receives appropriate support and supervision to make their work experience positive and effective. This is to include a minimum of documented bi-weekly supervision.
2. **Billable Units   
     
   Face to face time**

* Includes client specific face-to-face contact with the identified participant during which services as defined in the applicable Service Standard are performed.

**Groups**

* Group sessions on parenting skills, minimum four participants – not to exceed $250/hour

*For hourly rates, partial units may be billed in quarter hour increments only. Partial units to be billed are to be rounded to the nearest quarter hour using the following guidelines: 8 to 22 minutes = .25 billable hours, 23 to 37 minutes = .50 billable hours, 38 to 52 minutes = .75 billable hours, 53 to 60 minutes = 1.00 billable hours.*

**Financial Support** **Service Delivery**

Total Available is not to exceed $**500.00** per family

* Assistance of Rent and/or Utilities
* Assistance with childcare for family.
* Assistance with transportation for family.

1. Provider will be responsible for the purchase of childcare services from a State Accredited Level 3 childcare provider.
2. Provider will be responsible for the purchase of transportation support, public or private (gas cards).
3. Provider will maintain a detailed system to show accountability of tangible supports (childcare reimbursement, transportation, rent-utility assistance) given to families and be able to present these at the time of audit.
4. Client signatures will be maintained to show proof of receipt of tangible supports.

\*Actual dollars may not be disbursed to the family. As such childcare providers may be reimbursed, or taxi cabs, gas cards or bus passes should be used.   
  
***Reminder:*** *Not included is routine report writing and scheduling of appointments, collateral contacts, court time, travel time, and no shows. These activities are built into the cost of the face-to-face rate and shall not be billed separately.*

1. **Case Record Documentation**

Necessary documentation shall include the following:1. Case or contact note that documents client contacts and activities and participation in programming.  
2. Sign-in sheets for program.  
3. Documentation of assessment(s), goals, plans.

4.Documentation of funds dispersed for each family for childcare, transportation supports.

1. **Service Access**Services may be accessed through a self-referral or from identified community agency.