# SERVICE STANDARD PREVENTION SERVICES GEAR-UP PROGRAMS

# 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.

# 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.

# 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 supportive services by identifying at risk families, providing a thorough home safety assessment, purchase, distribution and installation of safety materials, educational/training on safety topics identified in the assessment process. Service is available to families with children under the age of 18. Service will be provided in an estimated 3 home visits, first being the assessment, second to install and provide training/education on safety topics, third a follow up to ensure safety items are being used appropriately. A follow-up survey will be conducted post service to assess program impact. Service will be short term in nature. Initial Home visit will assess the safety/education needs of the family. Program will use an approved Home Safety Assessment tool. A following home visit will be structured to meet the needs identified in the assessment (provision and installation of safety items). A follow-up home visit will be conducted to ensure the family is maintaining a safe home environment and items supplied safety items are being used. Post service assessment/survey will be conducted to assess impact of education and items in changing parental views/behaviors of child safety.

Service provision will include the following:

* Home based service delivery
* Assessment of safety needs
* Planning of service delivery
* Purchase of safety items
* Education and installation
* Follow-up home visit to ensure use of safety items
* Post-service survey to assess program impact

1. Participants, children, and staff interact in positive ways.
2. Staff responds appropriately to the individual needs of participants and children.
3. The program has procedures for tracking enrollment/participation of all participants.
4. 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.
5. Participants will be oriented to program and agree to guidelines.
6. Participants will be connected to formal (paid) and informal (unpaid) supports.

# Goals and Outcome Measures - all goals are required & reported monthly

# Goal #1

To prevent child maltreatment (abuse and neglect) by increasing the safety of the home environment.

Outcome Measure:

1. 90% of participants will demonstrate/report increase in knowledge of child safety as evidenced by pre and post service survey.

# Supervision and qualifications

1. Staff receives appropriate support to make their work experience positive. This is to include a minimum bi-weekly supervision.
2. Staff will have experience in case management.

# Billable Units

**Unit Rate:** per family, not to exceed $750.

***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 and shall not be billed separately.*

# Case Record Documentation

Necessary documentation shall include the following:

1. Case or contact note that documents client contacts and participation in programming.
2. Signature of client to show service delivery.
3. Documentation of assessment, goals, plans, and training/education provided, survey results.
4. Record of materials distributed/installed, money spent.
5. Signed consent to participate in the program.

# Service Access

Services will be provided in any county within the region. Preference for programs that serve the entire DCS region. Access to this program is to be defined by the provider.