

**2021 Exit Report Summary
Children's Trust Fund Grantees: Cohort 27**

Review of Programs Interviewed

Cohort 27 grantees participated in an exit interview that provided the opportunity to reflect on the successes and challenges faced during the three-year grant cycle. A brief description of each program follows the summary report.

Program Name	Counties Served	Evidence-Based Program	Service Modality
Allegheny Intermediate Unit	Allegheny	ACT Raising Safe Kids	Group Parent Education Series
Beginnings, Inc.	Cambria	Parents as Teachers	Home Visits with family, Group Connections
Blueprints	Washington, Greene	Triple P – Positive Parenting Program	Individual Parent Education
Community Action Partnership of Lancaster County	Lancaster	Parents as Teachers	Home Visits with family, Group Connections
Family Connection of Easton	Northampton	ParentChild+ (formerly known as Parent-Child Home Program)	Home Visits with family, Group Events
Family Services of Montgomery County	Montgomery	Triple P – Positive Parenting Program	Group or Individual Parent Education
Fayette County Community Action Agency	Fayette	Circles	Group Parent Education, Financial Education, and Case Management
Health Promotion Council	Philadelphia	SafeCare	Home Visits with family
Maternity Care Coalition	Philadelphia	Healthy Families America	Home Visits with family, Group Events
Outreach	Lackawanna	Incredible Years	Group Parent Education Series
Union Snyder Community Action Agency	Union, Snyder	Parenting Inside Out	Group Parent Education Series
Wesley Family Services	Allegheny, Westmoreland	Incredible Years	Group Parent Education Series

Program Design

What worked about the original program design?

Grantees provided a variety of reasons why the program design worked in their community. Specific positive aspects of program design are described below.

- Most grantees explained that the design of the evidence-based program contributed to the success of the grant. Models that delivered services in a group setting were beneficial for families to connect with one another. One-on-one services offered the opportunity for individualized support and connection.
- The ability of staff to build strong relationships with participants was integral to success. Grantees cited consistency, the ability to be non-judgmental, and familiarity with the community and services as building blocks for strong relationships.
- Several grantees attributed successful program implementation and recruitment of families to the community partnerships established before and during the grant period. Community partners provided referrals, space for in-person classes, and access to potential service recipients. A grantee providing services to incarcerated, re-entering, and systems-involved caregivers noted the importance of the relationships they built within the criminal justice system.
- One grantee provided services in a new, previously under-served area of the county. The staff dedicated to this service area is from this community and very familiar with available resources and challenges faced by residents which helped them connect with families in a meaningful way. In addition, participants built strong relationships with one another.

What challenges were faced and how were they addressed?

Overwhelmingly, grantees reported the COVID-19 pandemic as the biggest challenge to program implementation. Grantees were in the middle of their second year of implementation when COVID-19 restrictions were established in March 2020.

- The pandemic had major impacts on families that led to increased immediate needs. Grantees worked to address these needs in a variety of ways including providing material goods, connecting families to services, and providing opportunities to connect when social isolation was the norm.
- At the onset of the pandemic, all grantees needed to adjust delivery of services from in-person to virtual (via online platforms or by telephone). In some cases, grantees were required by model developers to complete additional training to deliver services virtually. This shift caused a disruption in services for at least one grantee while the developers determined if virtual delivery was feasible.
- Several grantees noted that not all families were comfortable receiving virtual services while others did not have the equipment and internet access needed to engage. Some grantees were able provide iPads, laptops, and wi-fi hot spots to families to support participation.
- The grantee serving incarcerated individuals was not able to enter the jail to provide in-person services or provide virtual services due to technology

limitations. This eliminated the grantee's ability to serve one of their targeted demographics. They were able to develop a strong relationship with staff from Probation and Parole to recruit individuals that were re-entering the community and connected to the Reporting Center.

A few grantees experienced challenges unique to the model implemented or the targeted population served.

- One grantee found that the level of the evidence-based program they chose was limited in depth and scope. They found that they needed to supplement the materials and lessons as well as lengthen the time parents were involved in the program to ensure that they received the supports needed. Ultimately, this grantee will not continue this program because it was not a good fit.
- A grantee implementing an evidence-based program that was new to them, underestimated the rigor of the certification process for staff and the time needed to complete certification to deliver services. In addition to training, the certification process also included coaching sessions with a trainer and ongoing observation of service delivery by the model developer before caseloads could increase. This led to delays in service provision and contributed to the grantee serving fewer families than anticipated. Despite a rigorous process for basic certification, the grantee followed through with their original plan to have two staff certified at a higher level which will allow them to provide coaching and observation for newly trained staff. This will contribute to sustainability as they will not need to engage the trainer for this and potentially speed up the process for individual provider certification.
- One grantee working with families experiencing substance use disorder (SUD) found that caregivers working to maintain sobriety had many competing demands for their time and attention. Caregivers were "living in the short-term" to maintain sobriety, and it was at times difficult for them to consider how completing a long-term program would be beneficial to their families. High needs, distrust of system-based supports, and involvement with multiple systems made scheduling and attending sessions a challenge for some caregivers. Staff addressed this challenge through persistence, flexibility, and a commitment to building strengths-based, trusting relationships with participants.

What was learned?

In many cases the grantees cited learning related navigating service delivery during the pandemic. They noted how staff were persistent, flexible, and creative in the ways that they delivered services during the pandemic. This included learning new tools, ways of teaching and coaching in a virtual environment, and how to adapt in times of uncertainty. Staff built their own resilience and were quick to point out the resilience shown by participants in the program.

Although delivering the program virtually presented some challenges, several grantees cited surprising and positive impacts. Several programs noted that virtual services allowed them to overcome transportation barriers often faced by families. Some grantees mentioned that having the option to complete sessions virtually allowed them

to be more flexible with scheduling. Some programs saw an increase in attendance and fewer missed sessions when delivering services virtually—which was unexpected. A program that noticed a lack of engagement in group sessions experimented with providing additional informal sessions that allowed for participants to chat and visit with one another—a key element they were missing from when they shared a meal in place-based classes. For one grantee, the virtual service provision allowed volunteer facilitators to support one another even though they were located throughout the county—something that had not previously occurred during place-based sessions.

One grantee expressed that in reviewing data collected as a part of the CTF outcomes, they determined that they wanted to be more intentional about when they collect data. Rather than collect only at entry and exit, they would like to survey participants more frequently so that they can chart progress over time.

Did the intentional integration of the Strengthening Families™ approach have an impact on organizational culture and/or the way work is done with families?

Most grantees were familiar with the Strengthening Families™ approach prior to this grant award and had already incorporated strengths-based practices into their work. Many cited using the Protective Factors as a framework not only for working with families but also to guide staff discussions and professional development opportunities.

- Many grantees noted that protective factors were a useful guide during the COVID-19 pandemic. Staff supported families by discussing needs and challenges using protective factors language. For example, many grantees noted an increase in material needs and concrete supports. Staff were able to discuss stressors related to the pandemic and support families as they identified coping skills and actions that build resilience.
- Two grantees delivering Be Strong Parent Cafes mentioned that participation encouraged caregivers to use protective factors language. Parent Cafes also created spaces for families to connect when they were isolated during the pandemic. One of the grantees noted that the Parent Cafes provide a structure for family leadership in their organization.
- The Strengthening Families™ approach was new to some grantees. One noted that they appreciated learning about the framework and that they were now passing on information to other initiatives in their organization that are now utilizing the approach as well. Another grantee felt that their program staff and volunteers really embraced the approach. They now describe the Strengthening Families Protective Factors Framework as a lens that facilitators consult and consider as they plan sessions. They support and encourage families to use this lens as well as they consider their strengths and areas for growth.

Target Population

Numbers Served:

Grantees faced unprecedented challenges because of the COVID-19 pandemic. Shifts in service delivery, additional professional development required from developers, and the need to learn new platforms and service delivery techniques created delays and, in

some cases, pauses in service delivery at the onset of the pandemic. Grantees were able to recover quickly in most cases and continue services to families that wished to receive services virtually. Continued uncertainty, increased material needs, and the general overwhelming nature of living through a global health crisis added to the stress of both staff and families. Some programs struggled to recruit new families to attend in a virtual format.

Despite challenges, three grantees exceeded the number of families they intended to serve, and one grantee met their goal. Although eight grantees fell short of their goal of families served, three of eight were within 85% of that goal.

What were your most successful recruitment and retention efforts with families?

Despite the challenges of the COVID-19 pandemic, grantees continued intentional recruitment efforts and retained families. Several grantees noted that participants often referred other caregivers to the program. In one program, a current participant sits on a committee that focuses on recruitment. Many grantees noted that community partners are an important referral source for new participants. Several grantees stressed the importance of ensuring that partners are familiar with the program so they can recommend it.

Almost all grantees discussed the importance of the relationship that staff build with families as an integral factor in program implementation. These relationships, that are built on trust and are strengths-based and nonjudgmental, lead to high retention. Several grantees also noted that caregivers remained in the program during the COVID-19 pandemic because they were able to access goods and services to meet their families' needs in challenging times.

Outcomes, Indicators, and Evaluation

What outcomes were achieved as a result of the CTF grant? In what ways did the grantee impact the families with whom they worked?

Grantees reported a variety of positive outcomes among parents served by the program. Examples of progress are highlighted below.

- Parents increased their knowledge of parenting. In some cases, this increase was reflected in evaluation tools while other grantees noted that staff observed parents using the skills they learned or that parents described how they used the knowledge and strategies they learned. Several grantees noted they observed, or parents reported more confidence in their parenting skills. Parents also increased their understanding of child development, and what activities and parenting strategies are appropriate to their children's developmental stage. One grantee illustrated the importance of building on parent knowledge with an example of a mom of seven. Rather than assuming what the parent might need, the staff encouraged her to share what she has learned from raising her children and what else she might like to know. This built on her curiosity and encouraged her to consider the different needs of each of her children.

- Several grantees reported that parents relied more often on positive discipline techniques because of their participation. Some staff observed an increase in positive interactions over time while others noted that parents described more positive interactions with their children and a decrease in harsh discipline. One grantee noted that a particular lesson about discipline and punishment in their parenting education program sparked conversation and reflection about how the participants were parented and how that might impact the ways they want to parent. For example, some stated that they were committed to using more positive methods with their own children.
- Grantees observed or parents self-reported increased positive interactions with their children. Several discussed that while the pandemic created many challenges for families, some caregivers noted that stay-at-home restrictions led to more time spent with their children.
- The COVID-19 pandemic provided ample opportunities for staff to observe how parents built and relied on protective factors to face challenges. Grantees reported that parents reached out for support when needed and learned more about the resources available to them in the community. Caregivers that participated in group settings became informational resources for one another as they navigated challenges. Caregivers connected with one another and built social support systems when many were feeling isolated. Parents reported increased stress during the pandemic and found the supports available through programs to be helpful. Several grantees noted that parents learned about the importance of self-care and stress reduction strategies.
- Several grantees noted that caregiver engagement in the program increased over time. As relationships were built with staff and among caregivers receiving services in group settings, participants were more willing to open up, share, and engage in activities. One grantee noted that most of their participants were mandated to attend the parenting classes but over time, they developed a positive attitude about attending the program.
- Several grantees noted that parents expressed satisfaction with the program. In some cases, caregivers noted satisfaction in surveys while others expressed satisfaction verbally or through letters. Many grantees noted that parents recommended the program to other families. One grantee described a parent who shared her experience in the program with a doctor who then contacted staff to learn more about the program.

Did the data collected through the evaluation tools adequately describe the progress towards meeting the grantee’s outcomes and objectives?

Grantees used a variety of evaluation tools to measure participant progress, including tools specific to the evidence-based programs and agency-developed tools. All grantees reported that the various tools they used illustrated participants’ progress in the specific areas measured. A few grantees described instances where caregivers scored themselves higher on pre-tests and then noted that after learning more through program participation would not score themselves as high. In addition to formal evaluation tools,

staff observation and participant self-report were very important methods to gather information about participant progress.

Community Interaction

What were the most successful methods of telling the community about your program?

Grantees reported a variety of effective methods of sharing program information with the community including through agency websites, social media, newsletters, and targeted emails. Most grantees felt that their most effective ways of informing the community about their program was through sharing at collaborative group meetings, providing information at community events, and providing tailored presentations and information to community partners.

Describe the impact of community collaboration and community partners on the success of the program implemented through the CTF grant.

All grantees cited their relationships with individual community partners and participation in collaborative groups as integral to the success of their programs. Community partners helped identify families that would benefit from the program, referred families, and provided resources for families referred by the grantees. Several programs indicated that their relationship with their local child welfare agency was particularly helpful for referrals and potential opportunities for funding and collaboration. Community collaborative groups provided space for grantees to promote their programs and learn about the resources other members could provide for families. These groups also provided opportunities to plan shared programming. Some specific examples of impacts are described below.

- One grantee reported that the statewide network for their evidence-based program provided invaluable support when transitioning to virtual services.
- One grantee noted the nature of their evidence-based program promotes community collaboration because it relies on volunteers. Staff from many organizations in the community serve as advocates, members of implementation teams, and as allies to program participants.
- One grantee led the local reentry coalition which brought together many agencies that serve families and partners from the criminal justice system. The grantee was able to bring the perspective of the parents to this group to discuss barriers for caregivers who are reentering the community or how involvement in the criminal justice or other systems impacts families. With partners that focused on the criminal justice-involved individual, they were able to shift the focus from the solely on the individual to considering impacts on the family.

How has the project funded by the CTF grant impacted the continuum of support services for families in the community?

Grantees explained that their CTF funded program provided services and resources to underserved families, filled gaps in available services for families, increased the number of families that could be served, or provided additional options for family support in their communities. Specific examples are listed below.

- A grantee noted that their CTF-funded program was implemented because of requests from families already involved in their home visiting program to have parenting education classes. While most participants were already involved with the grantee, through a relationship with the Family Courts they were able to provide services to parents who needed to attend parenting classes as a result of court-ordered judgements. The virtual format adopted during the pandemic made classes accessible for these participants regardless of location.
- One grantee researched and provided information about systemic issues related to poverty. Staff and volunteers identify issues and barriers that impact the bulk of families in the community. They are contributing to conversations about solutions and starting some of these conversations about what families need to move out of poverty.
- One grantee noted that their program provided individualized services to families that were tailored to their needs and addressed specific challenges as opposed to more general resources already available.
- A grantee offering a home visiting program noted the lack of Pre-K programs in their community. Those that are available may have eligibility restrictions or long waiting lists. Through implementing their program, they provided an alternative for families who do not qualify or cannot access other services that are at capacity.
- One grantee filled a gap in services to families experiencing substance use disorder. Many of the services available in their community focused solely on the individual, but the CTF-funded program addressed the wellbeing of the entire family.

Agency Experience and Human Resources

What knowledge, skills, and attitudes were critical for staff to have/develop to ensure program success?

As noted previously, staff played a major role in grantees' success. Flexibility and perseverance were incredibly important during the COVID-19 pandemic to accommodate families' scheduling, increased needs, and compounded stressors. Staff also were patient and persistent as they navigated shifting COVID-19 restrictions and modifications in model delivery. Knowing the available resources in the community and skills for researching resources were also integral.

Many grantees noted the importance of staff being non-judgmental and "meeting families where they are." This required open-mindedness and a strengths-based perspective. One grantee noted the importance of staff having or developing a compassionate understanding of poverty, a hopeful attitude, and a belief that people have the capacity to change.

Grantees discussed the importance of staff being representative of the communities they serve related to race, language, parental status, and residence in the community served. In addition, staff needed to practice cultural humility and responsiveness,

listening to understand when parents when share their stories and challenges, and acknowledge that parents are experts in their family and partners in the work.

Sustainability

What is the status of the CTF program at the conclusion of the grant? How is the sustainability of the program being accomplished specifically?

All but one grantee will continue their CTF-funded program. The grantee that will not continue found that the program was not a good fit for the families served. Seven grantees will continue their programs at the same capacity with identified funds. Four will continue providing services but at a reduced level. Grantees attributed sustainability to a variety of reasons including finding other funds and shifts in staffing. Two grantees noted that their program design contributed to sustainability because CTF funds supported staff training or that program delivery was carried out by existing staff. Grantees cited a variety of sources for funds to continue programming including the local United Way, unrestricted agency funds, pandemic-related funds including CARES, Children and Youth funds, and the Health Enterprise Zone grant.

Feedback on the CTF Grant Process

What feedback do you have on the CTF grant process?

Many grantees noted that they appreciated the support of Center for Schools and Communities (CSC) technical assistance (TA) staff. Calls were helpful to check in and discuss the program. Staff were responsive to requests and questions. Grantees experiencing staff transitions appreciated the support of TA staff. Grantees also appreciated the professional development opportunities that were offered including the Family Support Webinars from the CSC. One grantee asked for additional professional development on evaluation and continuous quality improvement.

Grantees provided feedback on aspects of the grant process that could be improved. Many grantees noted that the transition to using the database which occurred in the first year of the grant was a struggle. The ongoing changes to the database and how reporting was completed was at times confusing. Two grantees requested that due dates for reports be streamlined so there are not as many dates to remember. One grantee commented that the application process for the CTF grant was lengthy. Another grantee noted that they appreciated previous grant cycles when they were given an evaluation tool to use rather than matching their tools to stated outcomes as they were asked to do in this round.

CHILDREN'S TRUST FUND GRANTEES
July 1, 2019 – June 30, 2021
Round 27

1. Allegheny Intermediate Unit
Allegheny Intermediate Unit will serve 210 families over three years using the Parents as Teachers home visiting model, ACT Raising Safe Kids parent education series, and Be Strong Parent Cafes. This program will support parents, caregivers, and families who are recruited by or seeking services through Allegheny Intermediate Unit's existing family centers.
2. Beginnings
Beginnings will serve 37 families over three years using the Parents as Teachers model. They will focus on serving families impacted by substance use. They anticipate building a strong relationship with the Center of Excellence in their area as well as local correctional institutions.
3. Blueprints
Blueprints will serve 80 families over three years using the Triple P - Positive Parenting Program parent education model. This program will serve parents and families with children enrolled in Head Start, Early Head Start, and Pre-K Counts who have a diagnosed disability or who are experiencing behavioral issues.
4. Community Action Partnership of Lancaster County, Inc.
Community Action Partnership of Lancaster County, Inc. will serve 30 families over three years using the Parents as Teachers home visiting model. The program will serve families with pregnant mothers and children through age five in the community of Columbia, a high needs area of Lancaster County.
5. Family Connections of Easton
Family Connection of Easton will serve 26 families over three years using the ParentChild+ (formerly known as Parent-Child Home Program). The CTF grant will enable Family Connections of Easton to expand its existing program.
6. Family Services of Montgomery County – Pottstown Family Center
Family Services of Montgomery County, PA will serve 157 families over three years using the Triple P - Positive Parenting Program parent education model to provide individualized support to at-risk families in Pottstown with children birth through age 12.
7. Fayette Community Action Agency
Fayette County Community Action Agency will serve 112 families over three years using the Circles of Support model. This model matches the parent or parents of a family (Circle Leader(s)) with 2-3 Circle Allies (mentors) who work together weekly in a group setting to develop and implement a plan out of poverty using the Circles® curriculum. This program will target economically disadvantaged families with the goal of halting patterns of poverty and system

dependence while attaining self-sufficiency to reduce stress—a primary contributing factor of child abuse and neglect.

8. Health Promotion Council

Health Promotion Council will serve 60 families over three years by integrating the SafeCare parent education model into their existing home-based programming. The program will target low-income single parents with children under 5 years old, particularly those with special healthcare needs.

9. Maternity Care Coalition

Maternity Care Coalition will serve 34 families over three years using the Healthy Families America home visiting model. The program will expand to serve families in North Philadelphia and adds a mental health component utilizing their Perinatal Therapeutic Services for families with histories of trauma, intimate partner violence, and mental health or substance abuse issues.

10. Outreach

Outreach will serve 162 families over three years using the Incredible Years parent education model. The target audience will be families with children ages 2 to 12 with behavioral issues that are currently on program waiting lists.

11. Union Snyder Community Action Agency

Union-Snyder Community Action Agency will serve 81 families over three years using the Parenting Inside Out parent education model in their Parenting 101 project. This program will involve parents who are incarcerated as well as those involved in the criminal justice and child welfare systems.

12. Wesley Family Services

Wesley Family Services will serve 36 families over three years using the Incredible Years Basic Parenting parent education series and DINA Small Group child education model. Running the DINA program with children at the same time their parents and caregivers are attending Incredible Years will give families more multifaceted support and provide opportunities for parents to learn skills parallel to what their children learn in the DINA program and enhance parents' skills with effective family communication, limit setting, and consistent parenting practices.