MIDD 2 Initiative CD-08: Children's Domestic Violence Response Team (CDVRT)

How does the program advance the adopted MIDD policy goals?

CDVRT addresses the adopted MIDD policy goal of "improve health and wellness of individuals living with behavioral health conditions."

The CDVRT provides a continuum of recovery services to address the needs of the families served. The impacts of domestic violence (DV) vary depending on severity of the violence in the home, age and developmental stage of the child, and the ability of the primary caretaker to meet the child's needs. Children's symptoms range from mild (primary and secondary prevention) to severe impairments in functioning requiring intensive rehabilitation/treatment. Support groups such as "Kids Club" and its concurrent parenting group, are offered for children and non-abusive parents who may not need or want mental health services. For children and families needing a higher level of mental health treatment, child and family therapists use individual, family, and group counseling; Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)⁸⁴; and Parent-Child Interaction Therapy (PCIT).⁸⁵

1. Program Description

♦ A. Service Components/Design (Brief)

A team provides mental health and advocacy services to children, ages 0-17 who have experienced DV, and support, advocacy and parent education to their non-violent parent. The team consists of a children's mental health therapist, a children's DV advocate, and other team members as identified by the family (including supportive family members, caseworkers, teachers, etc.). Children are assessed through a parent and child interview, and use of established screening tools. Children's treatment includes evidence-based Trauma Focused Cognitive Behavioral-Therapy, as well as Kids Club, a tested group therapy intervention for children experiencing DV. Children and families are referred through the DV Protection Order Advocacy program, as well as through other partner agencies.

♦ B. Goals

The CDVRT has one primary long-term goal: to help break the generational cycles of violence – to decrease the likelihood that exposure to violence at home will lead to other forms of juvenile and adult violence by children who have been exposed to domestic violence. The CDVRT's more immediate program goals are: 1) to ensure ongoing physical and emotional safety of children and families impacted by domestic violence; and 2) to support emotional healing for children and adults who are victims and survivors of domestic violence.

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http://nctsnet.org/sites/default/files/assets/pdfs/tfcbt_general.pdf

⁸⁵ http://www.pcit.org/

- ♦ C. Preliminary Performance Measures (based on MIDD 2 Framework)⁸⁶
 - 1. How much? Service Capacity Measures

Approximately 85 unduplicated families with 150 children are served annually.

- 2. How well? Service Quality Measures
 - Increased resiliency and reduced negative beliefs
- 3. Is anyone better off? Individual Outcome Measures
 - Reduced behavioral health risk factors
 - Increased stability in treatment, employment, or other quality of life measures
 - Improved wellness and social relationships
- ♦ D. Provided by: Contractor

2. Spending Plan

Year	Activity	Amount
2017	Provide CDVRT services to children and their supportive parent	\$281,875
2017 Annual Expenditure		\$281,875
2018	Provide CDVRT services to children and their supportive parent	\$289,204
2018 Annual Expenditure		\$289,204
Biennial Expenditure		\$571,079

3. Implementation Schedule

♦ A. Procurement and Contracting of Services

It is cost effective to utilize existing organizations to develop the integrated model of DV and behavioral health services within community based DV advocacy organizations. BHRD continues to contract with Sound Mental Health for this program under MIDD 2.

Throughout 2017, review and refinement of Results-Based Accountability (RBA) performance measures for MIDD 2 initiatives will be conducted whenever applicable, in consultation with providers. Updates to performance measures that may result from this collaborative process will be reported in the next MIDD Annual Report in August 2018.

♦ B. Services Start date (s)

Services continued as of January 1, 2017.

4. Community Engagement Efforts

This initiative is continuing from MIDD 1 with an established program model and minimal expected change. No active community engagement is occurring at this time.