

**Virginia Department of Social Services
Division of Family Services
Prevention Unit
Promoting Safe & Stable Families Program
Fiscal Year 2019 Report Instructions & Definitions**

SECTION 1 - OVERVIEW

Importance of Collecting Data

To continue receiving Promoting Safe and Stable Families (PSSF) funds from the federal government, Virginia's PSSF program must demonstrate success in serving, preserving and strengthening families. Congress and the Virginia General Assembly, as well as the Administration for Children and Families (ACF) demand accountability. Collectively, the Virginia Department of Social Services (VDSS) and local programs must show that we are maximizing the use of limited funds to preserve families, or to help children secure new families when they are unable to return to their birth families. **Based on the locality's approved PSSF plan/renewal application, each locality receiving PSSF funds is required to submit quarterly and year-end reports listing the types of services provided, number of families and children served, and actual outcomes achieved resulting from the use of PSSF funds.**

Critical Information Requested

There are some essential elements that should be included in the program reports. Primarily, VDSS has taken a more results-oriented approach to achieve safety, permanency and well-being of children. It is important to address whether the PSSF program services prevented foster care placement and child abuse, re-abuse, or neglect. Also, please discuss local program models and best practices proven to be effective in producing successful program outcomes when completing the Year-End Report.

Counting the Number of Families and Children Served

The PSSF Microsoft Excel worksheets are designed to capture the number of children and families served under the four service types: Family Support, Family Preservation, Time-Limited Family Reunification, and Adoption Promotion & Support. VDSS recognizes that depending on the case, there may be times when services may fall under more than one service type (e.g., Family Preservation and Time-Limited Family Reunification). If this is the case, report the family as receiving services under **both service types** for the applicable quarter. Use the approved Service Codes listed on (*Attachment A*) to ensure the appropriate tracking of services provided.

Narrative Sections

Including comments in the narrative sections is strongly encouraged.

The PSSF Quarterly & Year-End Report is in Microsoft Excel

Complete the Cover Sheet, Family Support, Family Preservation, Time-Limited Family Reunification, and the Adoption Promotion & Support sections/worksheets as appropriate. Click on the applicable tab to access the desired section/worksheet. The year-end worksheet is the last tab. When submitting the year-end report, only complete the cover sheet and year-end worksheets.

The PSSF Quarterly & Year-End Report is due as follows:

1st Quarter (June 2018 – August 2018) Due: September 24, 2018	2nd Quarter (September 2018 – November 2018) Due: December 17, 2018	3rd Quarter (December 2018 – February 2019) Due: March 25, 2019
4th Quarter (March 2019 – May 2019) Due: June 24, 2019	Year-End (June 2018- May 2019) Due: July 22, 2019	Please forward completed reports via e-mail to pssf.cvcc@dss.virginia.gov

SECTION 2 - REPORT INSTRUCTIONS & DEFINITIONS

The following instructions and definitions were developed to help localities complete the report form.

*A locality that contracts with another service provider should combine all activities purchased from the provider in one report. Each locality's **Primary PSSF** contact or designee must collect all required program data from each provider, enter the combined data on one report form and e-mail the locality's report per the instructions in Section I.*

For fiscal year 2019, localities selected one or more of the following outcomes (as appropriate) per service type:

Outcome 1: Prevent the neglect, abuse, or exploitation of children
Outcome 2: Increase the number of children who are able to remain safely with their families
Outcome 3: Increase permanency for children in foster care
Outcome 4: Reduce recurrence of child abuse and/or neglect
Outcome 5: Reduce the incidence of child abuse and/or neglect in foster care
Outcome 6: Reduce time in foster care to reunification without increasing reentry
Outcome 7: Reduce time in foster care to adoption
Outcome 8: Increase placement stability
Outcome 9: Reduce placement of young children in group homes or in institutions
Outcome 10: Other: Please describe ->
Outcome 11: Other: Please describe ->
Outcome 12: Other: Please describe ->

The aforementioned outcomes are located within the report template. Please follow the instructions on the report template.

Definitions of Key Words
Adoption: Services and activities designed to encourage placement out of the foster care system while focusing on the best interests of children. Includes such activities as pre- and post-adoptive services designed to expedite the adoption process and support adoptive families.
Children in Relative/Kinship Care: The full-time care, nurturing and protection of children by a relative (<i>Code of Virginia</i> § 63.2-100). Individuals ages birth to 18 living in a home belonging to a person other than their biological mother or father to whom the child is related (e.g., a grandparent, aunt, uncle or sibling).
Children Served: The number of individual children living in the home, receiving the services and between the ages of birth to 18 or who fit the definition of eligibility under Foster Care.
Community Collaborations: Includes other agencies in the local community that work together in meeting the needs of families and children receiving services paid for with PSSF funds (e.g., school-based programs, faith-based organizations, nonprofit organizations and municipal, county or state agencies that comprise formal or informal direct service systems).
DSS Service Region: The geographic area to which the local department of social services is assigned.
Families Served: The unit receiving services (i.e., parents and children living in the home).
Family Preservation: Services are designed to help families (including birth, foster, adoptive, and extended families) alleviate crises; maintain the safety of children in their own homes; support families who are preparing to reunify or adopt, and assist families to obtain support to address their multiple needs in a culturally sensitive manner. The definition also allows grantees to support infant safe haven programs.
Family Support: Services are designed to alleviate stress and help parents care for their children's well-being before a crisis occurs . Services often provided at the local level by community-based organizations. They are voluntary, preventive activities to help families nurture their children. They connect families with available community resources and supportive networks which assist parents with child rearing. They encourage strengthening parental relationships and promoting healthy marriages. Family support activities include respite care for parents and caregivers, early developmental screening of children to identify their needs, mentoring, tutoring, health education for youth, and informal interactions in drop-in centers.
FIPS Code: Federal Information Processing Standards Codes for states, counties, and named populated places. It is a three digit number and can be obtained from the local agency. The code is required reporting data.
Locality: The designated city or county that is served by the program.
Person Reporting: The individual responsible for completing and submitting the reports.
Primary Program Contact: The contact with whom VDSS communicates with regarding the locality's PSSF program. This person is directly responsible for managing the program.

Race and Ethnicity Categories (federal definitions):

- **Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- **American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.
- **Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **Black or African American:** A person having origins in any of the black racial groups of Africa.
- **Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Reporting Agency: The authority completing the report that is sent to VDSS. If localities are jointly administering a PSSF program with other local department of social services, community based organizations or **contract providers** a joint report is required. Single reports should not be submitted. One reporting agency should be identified and that agency should collect the program data, enter it into one report form and submit it to VDSS.

Service Code: The three digit code assigned to each service category listed on the approved Array of Services listing. (Attachment A, page 7)

Service Type: The four categories types under which PSSF funding can be spent.

Time-Limited Family Reunification: TLFR services are “services and activities that are provided to a child who is removed from home and **placed in a foster family home or a residential facility**, and to the parents or primary caregiver of such a child, in order to facilitate the reunification of the child safely and within a timely fashion, but only during the **15-month** period that begins on the date that the child is considered to have entered foster care.” **Once the child is reunified, the 15-month time limit ends.** **Regulations do allow use of family preservation funds for post-reunification services and follow-up.**

(Example of TLFR: Child #1 a 5 y/o female was removed from the home of her 25 y/o mother due to neglect resulting from substance abuse reports filed against the mother by a neighbor 01/15. The mother attended substance abuse treatment for six months and remained drug free. The child was placed in foster care during the mother’s treatment and reunited with the birth mother 06/15. Transportation services were provided for weekly visitation with the birth mother during her treatment).

Total Served this Quarter: The number of families that received at least one service under a particular service type (i.e., Family Support, Family Preservation, Time-Limited Family Reunification, or Adoption Promotion and Support) at any time during the quarter. Report the number of children receiving at least one service. Please include only the children in the household that receive services funded in whole or part with PSSF funds.

Please ensure that the number of families and children are counted as follows:

Families Served:	The unit receiving at least one service (i.e., parents and children living in the home).
Children Served:	The number of individual children living in the home, directly receiving the goods or services and between the ages of birth through 17 years of age or who fit the definition of eligibility under Foster Care.

Below are three examples.

Example 1

A family who consists of the biological father and three children reside together in the same home in your locality. The locality is using PSSF funds to pay for the father to participate in parenting education classes. None of the children attended any of the classes for the reporting period. The number(s) would be reported as:

Families Served:	1 = The unit receiving services (i.e., parents and children living in the home).
Children Served:	0 = The number of individual children living in the home, directly receiving the [goods or] services and between the ages of birth through 17 years of age or who fit the definition of eligibility under Foster Care.

Explanation: Since the father is the only one who participated in the parenting education classes then the father directly benefited from the classes and would be counted as part of the family served (which includes the children). Therefore, since none of the children directly participated in any of the classes for the reporting period then they **would not** be counted separately as children who directly participated in the classes. However, it is assumed that the children would indirectly benefit from such service. Again, the children are considered part of the family served and are included as one family unit being served.

Example 2

A family (who consists of the mother with two kids) resides together in your locality in the same home. The mother received a power shut off notice. The mother contacted the

appropriate contact, applied for benefits, and the agency found the mother to be eligible for housing or other material assistance under PSSF. The power bill is in the mother's name. The agency paid the power bill to keep the power from being shut off. The mother is able to pay her power bill in the near future. The number(s) would be reported as:

Families Served:	1 = The unit receiving services (i.e., parents and children living in the home).
Children Served:	2 = The number of individual children living in the home, directly receiving the goods or services and between the ages of birth through 17 years of age or who fit the definition of eligibility under Foster Care.

Explanation: Due to the fact that the power bill is in the mother's name and the family (mother and two children reside together) would benefit from such service then the number of families served is counted as one. In addition, the children directly benefit from the electricity remaining on. The number of children served is counted as two.

Example 3

A paternal aunt has legal custody of two children. The family resides in your locality. The aunt is in need of two beds for the children. The aunt contacted the appropriate resource person who connected her with a PSSF contact in your locality. Based on the locality's PSSF eligibility guidelines, the aunt applied for services and was found eligible for two beds. The beds were purchased using PSSF funds. The number(s) would be reported as:

Families Served:	1 = The unit receiving services (i.e., parents and children living in the home).
Children Served:	2 = The number of individual children living in the home, directly receiving the goods or services and between the ages of birth through 17 years of age or who fit the definition of eligibility under Foster Care.

Explanation: One family was served. In addition, one bed was purchased per child. The total number of beds purchased is two.

Attachment A:

Service Code	Array of Services
010	Adoption Promotion/Support Services
020	Assessment
030	Case Management
040	Community Education and Information
050	Counseling and treatment: Individual
051	Counseling: Therapy Groups
060	Day Care Assistance
061	Developmental/Child Enrichment Day Care
070	Domestic Violence Prevention
080	Early Intervention (Developmental Assessments and/or Interventions)
090	Educational/ School Related Services
110	Financial Management Services
120	Health Related Education and Awareness
130	Housing or Other Material Assistance
140	Information and Referral
150	Intensive In-Home Services
160	Juvenile Delinquency/Violence Prevention Services
170	Leadership and Social Skills Training
180	Mentoring
190	Nutrition Related Services
200	Other (identify)
201	Emergency Situations
210	Parent-Family Resource Center
211	Parenting Education
212	Programs for Fathers (Fatherhood)
213	Parenting Skills Training
220	Respite Care
230	Self Help Groups (Anger Control, SA, DV)
235	Substance Abuse Services
240	Socialization and Recreation
250	Teen Pregnancy Prevention
260	Transportation

See Attachment B (pages 8- 13) for the definition of each service.

Attachment B:

Service Code	Array of Services
010	<p>Adoption Promotion/Support Services Services and activities designed to encourage more adoptions out of the foster care system, when adoptions promote the best interests of children. Activities include pre- and post-adoptive services and activities designed to expedite the adoption process and support adoptive families. Note: VDSS uses 20 percent of the federal and state PSSF funds for contracts with private and public agencies to provide services for families who adopt children in foster care. Additionally, there are post- adoption support services to families through United Methodist Family Services.</p>
020	<p>Assessment Assessment occurs throughout the life of the agency’s involvement with the family. The assessment may include child and family circumstances, history, strengths and needs of the child and family, the seriousness of the threat, and the services and supports the family currently is using or has available (e.g., nuclear family, extended family, school, work, place of worship, neighborhood, etc.).</p>
030	<p>Case Management Occurs when a worker takes responsibility for assuring that the needs of the family as a whole are assessed, that services plans are created with the family and reflect their priorities and goals, and that the efforts of all service providers involved with the family are coordinated and consistent with the service plan.</p>
040	<p>Community Education and Information Community-based prevention strategies that increase public awareness about issues such as family violence and the availability of services in the community for victims of family violence. Topics may include Anger Management, Mentoring of Youth, Parenting Skills and Crisis Intervention.</p>
050	<p>Counseling and treatment: Individual Provided to individuals or a family unit by qualified human service professionals in either individual or group sessions. The counseling focuses on the individual's perception of self, family, and significant others. Providers of this service shall be licensed unless exempt under Section 54-9444 of the Code. This includes the purchase of psychological, psychiatric, and therapeutic services not covered under Title XIX (Social Security Act). Such services include evaluation and diagnosis of problems,</p>

	development of treatment goals and strategies and counseling. Services are available through purchase from facilities such as State operated mental health clinics, locally operated public mental health clinics and centers under the auspices of Community Mental Health and Mental Retardation Services Boards, private mental health professionals licensed to provide services, private mental health clinics and public and private residential treatment facilities.
051	Counseling: Therapy Groups This includes the purchase of guidance, consultation, and problem solving in a helping professional relationship. It is related to family and personal adjustment problems, values clarification, personal effectiveness, and other areas of counseling exclusive of counseling related to other discrete services. Therapeutic interaction between mental health professionals, family Services workers, case managers and family members; or groups of families, birth parents or youth experiencing similar problems that may be solved with similar treatment plans.
060	Day Care Assistance This includes the purchase of day care from approved providers. Day care may be provided to children whose parent/parent substitute is employed, in training for employment, temporarily ill or absent from the home. It may also provide protection for the child or opportunities for the child with special needs such as physical, mental or emotional problems. A regularly operating service arrangement for children where, during the absence of a parent or guardian, a person or organization has agreed to assume responsibility for the supervision, protection, and well-being of a child under the age of 13 for less than a 24-hour period. The service may be provided in the parent's home, the provider's home or a public facility. Note: Providers of direct care must be licensed by the State or approved by local social service agencies as meeting standards established by the State Board of Social Services.
061	Developmental/Child Enrichment Day Care Treatment designed to improve the ability of a child to function as normally as possible in home, school and community setting when impaired by the effects of a mental, physical or emotional disorders. Services must be based on medical necessity.
070	Domestic Violence Prevention Services designed to decrease the probability that one parent will not exert physical or emotional damage to another parent and/or their children. VDSS operates an Office of Family Violence (OFV) that provides funding to some localities that provide for the safety of battered adults and their children through the provision of emergency housing and transportation, crisis intervention, peer counseling, support, advocacy and information and referral. Funding also supports public awareness initiatives. Note: PSSF funds should not be used to fund services that are available through community-based programs receiving OFV funding. Examples of services allowable under PSSF may include couples and family counseling.
080	Early Intervention (Developmental Assessments and/or Interventions)

	Services needed to treat or improve a condition identified in a child during Early Periodic Screening, Diagnosis and Treatment (EPSDT) mental health services. This includes linking children to a medical “home” (i.e., primary care physician), immunizations, FAMIS enrollment, and Ages and Stages appropriate programs.
090	Educational/ School Related Services Training and developmental programs designed for children or adults offered in a community-based facility or resource center. Services may include after-school and recreational programs with an educational component, health and nutrition education and mentoring/tutoring services.
110	Financial Management Services Information offering help with household budgeting, money management and credit issues.
120	Health Related Education and Awareness A service activity may include information or demonstrations about proper medical care. For example, in a school assembly or community forum, there could be a presentation on good nutrition, healthy lifestyles, proper dental care, or hygiene. Note: PSSF funds cannot be used to cover any medical or dental procedures or treatment costs for children, parents or guardians. Health and hospital related social services are not purchasable.
130	Housing or Other Material Assistance Temporary direct financial assistance provided to families when unemployment, lack of budget management, or low income creates stress or the inability to meet household expenses. Examples of assistance include food, clothing, rent, gasoline, security deposits, and utility payments. Typically, telephone bills and cable television service are unallowable expenditures.
140	Information and Referral Occurs when a worker provides family members with information on the range of useful community resources and helps the family access necessary services. The family makes its own decisions about which services it will use and participates in meetings with service providers. Appropriate sources of referral are local department of social services, mental health/substance abuse programs, the juvenile justice system, legal services providers, faith-based organizations and other community agencies.
150	Intensive In-Home Services Services must be offered in the family’s residence with the parent(s), guardian(s) and children present. Service intervention is necessary to prevent out-of-home placement and to prepare the family for the child’s return when reunification with the birth parents is a permanency goal.
160	Juvenile Delinquency/Violence Prevention Services To provide effective prevention and treatment services to families where

	aggression or violence is a problem. Separate counseling groups for men, women, and children may be offered. Groups should be led by experienced, professional counselors. Juvenile delinquency may refer to either violent or non-violent crime committed by persons who are (usually) under the age of eighteen and are still considered to be a minor. Note: The child is not in a correctional facility.
170	Leadership and Social Skills Training Activities that promote positive behavior and discourage negative behavior among youth. Services that will help with developing positive self images, dealing with peer pressure, effective decision making that lead to productive adult members of society. Examples include improving school attendance and academic achievement; work experience and vocational preparation; and prevention of teen pregnancy, substance abuse and juvenile delinquency.
180	Mentoring A structured, managed program in which children are appropriately matched with screened and trained adult volunteers for one-on-one relationships, involving meetings and activities on a regular basis, intended to meet, in part, the child's need for involvement with a caring and supportive adult who provides a positive role model.
190	Nutrition Related Services Occurs when a professionally trained person provides information and follow-up to families about foods and proper eating and dietary practices that the body needs to function properly. The service may be offered through brochures and seminars approved by (e.g., Virginia Cooperative Extension Services and the Food and Drug Administration).
200	Other (identify) Additional services that will ensure the safety and well-being of children at risk of abuse and neglect that will prevent foster care placement or that will enhance reunification efforts as determined by the CPMT or FAPT. These services must fall outside of the normal scope of services identified in the current service array. Note: This category should be used sparingly and a description of the circumstances leading to its usage should be explained in the reports.
201	Emergency Situations Unplanned/unbudgeted events that may occur during the fiscal year that needs immediate attention. The locality may budget up to 8% of its allocation per service type for this service code.
210	Parent-Family Resource Center A community based drop-in facility that is committed to preventing and treating child abuse and neglect by strengthening families through family-centered therapeutic, educational and support services. Services should be structured and offered by trained community resource persons having experience in working with families in crisis. Services should include more than maintaining a display of brochures and newsletters containing topics that may be of interest to parents.

211	<p>Parenting Education Services offered in-home or out-of-home, providing information and support to families to help parents with issues of child safety, parenting skills, budgeting, nutrition and school and community interaction.</p>
212	<p>Programs for Fathers (Fatherhood) Services designed to increase the proportion of children growing up with involved, responsible, and committed fathers. For example, this may include a curriculum where a facilitator conducts individual classes or workshops for fathers, or structured group or one-on-one socialization and recreational activities that involve fathers with their sons or daughters.</p>
213	<p>Parenting Skills Training Services providing structured instruction and support as parents implement newly learned skills. This involves a wide range of parenting activities and functions such as nurturing, age appropriate expectations, adequate supervision, acceptable discipline, behavior management, communication, and anger control.</p>
220	<p>Respite Care These services are to be provided on an emergency or planned basis and designed to be short-term relief to families caring for children by providing substitute care for the child. The primary objective is to reduce the potential for incidents of abuse and neglect.</p> <p>Note: Historically, VDSS funds respite care services under a separate funding stream through direct allocation to local departments of social services. <i>Localities are expected to access and exhaust their Respite Care Program funds allocated under this separate funding source <u>for children in foster care</u> before utilizing their PSSF funds.</i></p>
230	<p>Self Help Groups (Anger Control, SA, DV) Weekly or monthly support oriented activities, discussions or meetings designed to teach family members how to cope with issues that affect family stability and safety such as Divorce, Grief & Loss, and Substance Abuse.</p>
235	<p>Substance Abuse Services This includes the purchase of counseling, medical/remedial services, pharmacological intervention, social, education, and rehabilitative services for drug-addicted individuals. Also includes structured time-limited goal-oriented treatment in a clinical setting (inpatient/outpatient) to assist a child and/or parent or guardian in reaching and maintaining drug and alcohol free lifestyles. Services must be based on medical necessity on a case-by-case basis. Note: The facility providing the treatment must comply with standards established by the Department of Mental Health and Mental Retardation.</p>
240	<p>Socialization and Recreation Activities designed for youth that provide opportunities to participate in constructive age appropriate group experiences under adult supervision.</p>

	This includes the purchase of activities which provide opportunities for constructive social experiences and leisure time opportunities. This service is directed at improving individual functioning in personal and social communication, offering opportunities for self-expression, and minimizing isolation and monotony.
250	Teen Pregnancy Prevention Efforts to prevent out-of-wedlock teen pregnancies and to encourage adolescents to remain sexually abstinent Services and information that promote values, behavior, and policies that reduce both teen pregnancy and unplanned pregnancy. Note: PSSF funds cannot be used to purchase birth control pills or terminate pregnancies.
260	Transportation This includes assistance that will enable a parent or custodian or a child attend counseling, parenting classes, court, local department of social service appointments, visitations with a child, visitations with an incarcerated parent, medical appointment, or other pre-approved appointments (e.g., gas cards, bus tokens and minor vehicle repairs) as determined by the CPMT or FAPT. Travel to and from medical care payable under Title XX (Social Security Act) is not allowed under this service.

If you have any questions, comments, or concerns about this document, please feel free to contact:

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VIRGINIA DEPARTMENT OF
SOCIAL SERVICES