

# FY 2011

## United Way Final Report

**Program: Piedmont CASA, Inc.**

**Agency: Piedmont CASA, Inc.**

**Date: 7/21/2011**

- 1. For the current funding period, please highlight your program's goals, activities and results, noting any changes to your original plan/proposal. Include any relevant budget and/or financial information. Limit your response to no more than one page.**

Piedmont CASA's goal is to reduce child abuse and neglect in Charlottesville and Albemarle County. The program recruits, screens, trains and supervises volunteer court appointed special advocates who are appointed to children who are the subject of juvenile court cases involving allegations of abuse or neglect. The volunteers advocate for the best interests of the children, supporting and promoting safe, permanent and nurturing homes. There were no changes to the original plan.

During the reporting period, 100 volunteers advocated for 204 child abuse or neglect victims. Highlights include:

- Piedmont CASA conducted two 32-hour training sessions and inducted 40 new CASA volunteers;
- 241 children were in the program; 204 children had assigned CASA advocates;
- 107 new children were referred to the program;
  - 72 of those new children have been assigned volunteers;
  - 28 children were denied services because the court dismissed the child protective order petition;
  - 4 children were on the waitlist at year end;
- Cases were closed for 94 children served by CASA volunteers;
- 128 independent investigations were conducted;
- 9,270 contacts were made by CASA volunteers with children, parents, physicians, therapists, social workers, attorneys and others;
- 282 hearings attended;
- 100% of the children served by the program remained free from new "founded" incidents of abuse and/or neglect; and
- Active CASA volunteers have served with the program on average 36.5 months.

As of 6/30/2011, based on unaudited financial statements, annual fund income was at 100% of budget and 8.6% unfavorable to last year; expenses were at 96% of budget and 10.8% over last year to date. Piedmont CASA's financial records are currently undergoing the annual audit.

2. Please share a success story from your program. We are especially interested in stories that show a long-term impact on a person or family, and stories that show collaborations or referrals with other community programs in meeting a client's multiple needs.

***Strengthening Sibling Relationships; Planning for the Future:*** Three teenage siblings came to the Court's attention due to their mother's inability to maintain her sobriety; psychological testing revealed that their mother also had significant mental health issues. The Court removed the children and placed them in foster care; the oldest was placed in one foster home and the two younger siblings were placed together in a different foster home.

The CASA volunteer assigned to the case has worked hard to get to know the case and each child's situation. He has visited the three teenagers consistently and has successfully established a positive relationship with each of them. He has also maintained regular communication with the Department of Social Service and the foster parents. He attends monthly team meetings, which provide an opportunity for him to observe and talk with the children's mother, as well as communicate with all team members on the case.

When the CASA volunteer was first assigned to the case, the mother would not communicate with him. Due, however, to the CASA volunteer's diligence and consistent involvement with the children, he earned the mother's trust and she began talking with him and allowing him to come to her home to observe her visits with the children. He has also earned the children's trust. Due their ages, the CASA volunteer has focused on helping them determine what they want their futures to hold. The oldest child, for example, is a senior in high school and needed assistance applying to colleges. The CASA volunteer successfully advocated for the young woman to be transported to visit colleges and to receive assistance preparing for and taking her SAT. The young woman received acceptance to two colleges and was put on the waitlist for two additional colleges. The CASA volunteer advocated for another of the children, who had a passion for technology, to participate in a summer technology class/camp.

The CASA volunteer was also concerned about the connection between the siblings, because at case outset their relationship was strained. The CASA volunteer successfully advocated for the three teenage siblings to have regular visits outside of their visits with their mother; as a result the bond between the siblings has deepened. Over time, the three children have expressed to their CASA volunteer how much they like seeing each other and how much they appreciate the opportunity.

This case has not yet come to closure, but the CASA volunteer's advocacy has helped the children to take some concrete steps toward futures filled with opportunity. His understanding of each child's needs and interests is helping the Court and the Department of Social Services make informed decisions about the children's well-being. He has also helped to ensure that, while they are experiencing upheaval and uncertainty now, they have stronger bonds with each other to help stabilize them.

**3. Complete the following Outcome Measurement update (based on your application for funding) for the fiscal year to date.**

**Projected Number of Intended FY11 Primary Beneficiaries:** 200      **Actual Number of Primary Beneficiaries:** 204 (an additional 4 children on the waiting list as of 6/30/11)

Projected FY11 Outcomes	FY11 Indicators Tracked	FY11 Outcome Results (provide specific numbers and percentages)
<p><b>Children will remain safe while served by Piedmont CASA</b></p>	<p>100% of the children will be free from new, founded incidents of abuse or neglect.</p> <p>&lt;5% of the children will re-enter the dependency court system within 1 year of case closure with the court.</p>	<p>There were no new incidents of founded abuse or neglect during this period (100% free from new incidents)</p> <p>No children re-entered the court system within 1 year of CASA case closure with the court</p>
<p><b>Children presenting with concerns in areas of physical health, emotional well-being and academic performance will experience improvements by case closing, or be receiving appropriate services to address their needs.</b></p> <p><i>Projections assume a) 33% of cases are closed during fiscal year; b) 25% of the children will present with physical health concerns; c) 42% of children will have mental health concerns; and d) 70% of the children will be school age.</i></p> <p><i>In F10, 80 children's cases were closed (39%).</i></p>	<p>100% children with physical health concerns will have improved health condition or be receiving appropriate treatment by case closing.*</p> <p>85% of children with mental health concerns will have improved emotional well-being and/or be receiving appropriate therapeutic services by case closing.</p> <p>85% of school-age children will demonstrate improved or grade-level academic performance or be receiving remedial services by case closing.</p>	<p><b>94 children's cases were closed during the period:</b></p> <ul style="list-style-type: none"> <li>▪ 37 children (39%) presented with physical health concerns and <b>all 37 (100%) received appropriate treatment and/or showed improved conditions by case closing.</b></li> <li>▪ 53 children (56%) presented with mental health concerns and <b>52 (98%) received appropriate therapeutic services by case closing.</b></li> <li>▪ 61 (65%) of the 94 children were school age. <b>61 (100%) of the school age children were either meeting grade-level performance (46 – 75%) and/or were receiving remedial services (23 – 38%).</b></li> </ul>

<p><b>Children will experience stability and live in family-setting, permanent homes.</b></p> <p><i>*Own home or adoptive home is considered the least restrictive, relative placement, family foster care, group home, institutionalization or incarceration are placements of increasingly restrictive levels. **Based on "last placement" statistics.</i></p>	<p>The average number of placement changes for children in placement will be less than 2.5 changes per child.</p> <p>Of the placement changes during the year, at least 80% will be moves to a setting of equal or less restriction.*</p> <p>60% of the children will live in their own homes, with a relative or in an adoptive home and 25% will live in family-setting foster homes.**</p> <p>85% of the children will live in permanent homes within 18 months of assignment to the program (or &lt;15% will be in the program 18 months or more without achieving a permanent home).</p>	<ul style="list-style-type: none"> <li>■ The average number of placements for children removed from their homes during the period was 1.3</li> <li>■ 81 (40%) of the 204 children experienced 105 placement changes during the year. 52 were initial removals from home. Of those already in care, 42 of 53 placements (79%) were changes to placements of equal or less restriction</li> <li>■ 62% lived in their own homes or with a relative and 31% lived in family-setting foster homes as of 6/30/11.</li> <li>■ 14 (7%) of the children have been with the program more than 18 months without being placed in a permanent home.</li> </ul>
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**4. Impact Report. We are looking for issues and statistics specific to our local area; you are also welcome to include some general issues that set the framework for the local statistics. Under the Actual Results heading, we are looking for impact, especially long-term results, not just numbers served. For the Financial Impact section, have each example highlight a different thing (in other words, don't just multiply the first answer three more times).**

**Community Needs or Issues Your Program Addresses -- please include at least 3 local issues/statistics and cite your source**

**1. Reports of Child Abuse and Neglect:**

In the first three quarters of FY 2011, there were 317 referrals for child abuse/neglect in Albemarle County. 194 of those referrals were accepted by the Department of Social Services resulting in 151 Family Assessments and 39 Investigations. Sixteen investigations were determined to be "founded." In the City of Charlottesville, there were 519 referrals for child abuse/neglect, 210 of which were accepted by the Department of Social Services. 145 were

addressed with Family Assessments and 63 were investigated. 16 of those investigated referrals resulted in “founded” dispositions (*Virginia Department of Social Services FY 2011 Child Protective Services Accountability Report*).

2. **Children in Foster Care:** As of July 1, 2011, Albemarle County had 64 children in foster care, and the average time in care was 45 months. The City of Charlottesville had 132 children in care, and the average time in case was 44 months (*Virginia Department of Social Services Foster Care Children Demographic Report*). In the City, 29.2 children per 1,000 lived in foster care, as compared with 5.2 per 1,000 in Albemarle County (*2010 Stepping Stones, compiled by the Charlottesville-Albemarle Commission on Children and Families*).

*The average annual cost of one child in foster care in Virginia is \$52,000 per child (Virginia Dept. of Social Services Office of Research Division of Strategy Management and Research, 2009 Annual Statistical Report -*

[http://www.dss.virginia.gov/geninfo/reports/agency\\_wide/annual\\_statistical.cgi](http://www.dss.virginia.gov/geninfo/reports/agency_wide/annual_statistical.cgi)).

3. **Court Abuse/Neglect Caseloads:** The Albemarle County Juvenile and Domestic Relations Court held 98 Abuse/Neglect Hearings, 111 Foster Care Hearings and 13 Termination of Parental Rights Hearings. Charlottesville J&DR Court held 63 Abuse/Neglect Hearings, 218 Foster Care Hearings and 72 Termination of Parental Rights Hearings (*2010 Virginia Supreme Court – Virginia Caseload Statistics of District Courts*).

### **Your Program’s Solutions that United Way Community Impact Funds Support**

Piedmont CASA seeks to reduce child abuse and neglect in the Charlottesville-Albemarle community by providing trained volunteers to advocate for the best interests of abused and neglected children as their cases proceed through the dependency court system. CASA volunteers advocate for services and support safe, permanent and nurturing homes for maltreated children.

- CASA volunteers conduct independent investigations, submit written court reports with recommendations, monitor the child’s situation between court hearings, assist the guardian ad litem to provide legal representation, and report suspected child abuse and neglect.
- Children need safety, stability, consistency and permanency; emotional well-being, medical needs and educational needs must be addressed during intervention by the child welfare and court system. CASA volunteers collaborate extensively to address these needs by (1) meeting with CASA children at least monthly – usually more frequently; (2) maintaining regular contact with the family, school, social workers, therapists, physicians and other relevant individuals to monitor the family and children’s progress, promote child safety and ensure that needed services are provided; (3) participating in foster care service planning meetings, Individual Education Plan (IEP) meetings, Family Assessment Planning Team (FAPT) meetings, Family Drug Treatment Court case management meetings and other collaborative planning meetings; and (4) communicating with social workers, therapists, service providers and guardians ad litem to assure that every party receives appropriate information regarding progress and concerns.

- The CASA Court Order of Appointment gives the volunteer very broad access to information about the child, so the volunteer can gather information from confidential sources not otherwise available to many individuals working with the child. This, with information gathered through direct observations and interviews (i.e. home visits, consultations with the child’s therapist, physician, teachers, foster parents, etc.), enables the CASA volunteer to help develop a comprehensive picture of the child’s situation. The information, with recommendations, is reported to the court and considered by the judges in making decisions for orders pertaining to custody, placements, services and protection.
- According to statistics produced by the National CASA Association, children with CASA volunteers receive more services than children without an advocate. These services—whether medical, dental, educational, or psychological—often prove to be crucial to the children’s ability to recover from the devastating effects of the neglect or abuse they have suffered. Also, a child with a CASA volunteer is significantly less likely to be in long-term foster care than child victims without an advocate. When children move out of foster care and into permanent homes, they benefit from lifelong connections, stable homes, and positive role models.
- Piedmont CASA is an active participant in the Family Drug Treatment Court Team (FTC), a collaborative project between social services, Piedmont CASA, substance abuse treatment professionals, and the Court. This interdisciplinary team implements intensive case management and treatment services for parents who have lost custody of their children, or are at risk of losing custody, due to substance abuse issues in the City of Charlottesville and Albemarle County. Piedmont CASA volunteers serve as the child advocates for children of Family Treatment Court.

**Actual Results (7/1/2010 - 12/31/2010) - based on your stated outcomes; please use percentages and numbers served to help show outcomes**

Child safety, achievement of permanency, stability of children in foster care placements and the well-being of children served (physical health, emotional well-being and education) are the criteria used to measure program success.

- 204 (100%) children with assigned CASA volunteers remained free from “founded” re-abuse while served by Piedmont CASA.
- No children served by CASA re-entered the dependency court system within one year of case closure.
- Of the 94 children whose cases were closed:
  - 37 children (39%) presented with physical health concerns and all 37 (100%) received appropriate treatment and/or showed improved conditions by case closing. For example, one child who had been the victim of sexual abuse received a forensic examination and medical treatment for her injuries; another child, who had been severely burned, had surgery for a toe amputation and skin grafts. Other examples of health conditions include lack of immunizations; dental issues; drug-exposed infants (methadone and cocaine); premature infant with “dumping

syndrome”; hypoglycemia; severe cradle cap; hydrocephaly; and head lice. Two children were born with profound birth defects and will need life-long specialized medical care.

- 53 (56%) of the 94 children whose cases were closed by the program presented with mental health conditions/concerns and all but one (98%) received appropriate treatment by case closing. Examples of conditions included sleep disturbances, autism, post-traumatic stress disorder, severe anxiety, depression, anger and behavioral issues. One child struggled with sexual identity issues. Services included individual and family counseling, behavioral therapy, medication management, play therapy, and participation in ROSMY support group.
- 61 (65%) of the 94 children whose cases were closed by the program were of school-age and all (100%) were meeting grade level performance (46 or 75%) and/or were receiving remedial services (23 or 38%) at case closing. Services included Individualized Education Plan and special education services, after-school tutoring, residential educational school, vocational training, Title 1 services and speech therapy.
- The average number of placement changes for children in placement was 1.3.
- 81 (24%) of the 204 children served by CASA volunteers experienced 105 placement changes during the year. Fifty-two were initial removals from home. Of those already in care, 42 (79%) of the changes were to placements of equal or less restriction (i.e. own home or placement with relative).
- On 6/30/2011, 62% of children live in their own home, with a relative or in an adoptive home and 31% lived in family-setting foster homes.
- 14 (7%) children have been with the program more than 18 months without being placed in a permanent home. These tend to be older children with more serious psychiatric and/or behavioral concerns, and historically have had multiple placements as a result.

### **Financial Impact of Donations**

Based on the FY 2011 unaudited financial statements, the financial impact of donations on the children Piedmont CASA serves is as follows:

- \$31.67 per week (\$1,647/year) is the cost to provide CASA direct advocacy services to one child; and
- \$64.61 per week (\$3,360/year) is the cost to train and supervise one volunteer;
- Piedmont CASA program volunteers donated the equivalent of \$209,637 in services working on behalf of Charlottesville’s and Albemarle County’s child abuse victims (based on Department of Criminal Justice calculation of CASA volunteer hour equivalency in quarterly statistical reports).