

2024

**CENTERS FOR FAMILY DEVELOPMENT, INC. (DBA: BLACK FAMILY DEVELOPMENT, INC)
CONTINUUM OF CARE
LOGIC MODEL OF ACHIEVED OUTCOMES**

Service Category	Assumptions	Programs	Inputs	Activities	Outputs	Outcomes												
<p align="center">JUVENILE JUSTICE</p>	<p>Detroit's Eastside zip code region hosts the highest incidence of youth crime in Wayne County (Skillman Report), in addition to the disproportionately high-risk factors and unmet Social Determinates of Health specifically in zip codes 48205 48224 that impact juvenile crime rates: substantiated and unsubstantiated incidents of abuse/neglect and the highest number of returning citizens.</p> <p>Youth recovery requires the collective investment of treatment providers, adjunct supportive programming, and permanency planning beyond wardship termination.</p>	<p>Care Management Organization (CMO)</p> <p>Youth Assistance Program (YAP)</p> <p>Reentry</p>	<p><u>Treatment Models & Approaches</u></p> <ul style="list-style-type: none"> Structured Decision Making Person Centered Planning Cognitive Behavioral Therapy Restorative Practices Crossover Youth Practice Model (CYPM) <p><u>Prevention Models & Approaches</u></p> <ul style="list-style-type: none"> Restorative Practices Lion's Quest: Skills for Adolescents Aggression Replacement Training Person-Centered Case Management <p><u>Resources</u></p> <ul style="list-style-type: none"> 19 Staff Wayne Co. Department of Health, Human, and Veterans, Services (HHVS) Michigan Dept. of Health and Human Services (MDHHS), Detroit Wayne Integrated Health Network (DWIHN), Detroit Police Department, Title 4-E, and Child Care Funds Wayne Co. Third Circuit Court Participation in Wayne County System of Care Juvenile Justice Services Handbook Electronic Child & Adolescent Functional Assessment Scale Mileage and Cell Phones, Juvenile Agency Information System (JAIS) Virtual Platforms 	<p><u>General Services:</u></p> <ul style="list-style-type: none"> Assessments to determine placement and treatment needs. Placement of youth in a treatment track. Complete Treatment/Probation Plans timely. Maintain electronic case records on the Juvenile Agency Information System (JAIS). Case management and weekly treatment, face-to-face contacts with youth and family. Ensure person-centered face-to-face contact by behavioral health and other treatment providers. Represent the youth and agency's interest in Court and submit Progress Review Hearings before the Jurist of record. Petition Court for security level change as needed. On-Site urine drug screen testing. In-home family-centered treatment. Family engagement and/or reintegration. Holland's Career Inventory/Workforce Development. Educational and academic planning. Reentry planning. <p><u>Specialized Services</u></p> <ul style="list-style-type: none"> Random drug screens for youth as ordered. Quarterly functional assessments of youth progress. Program-specific utilization reviews to determine progress with Key Performance Indicators. Four prevention tracks to serve as after-school diversion programming to prevent at-risk youth from delinquent behavior (Youth Assistance Program). Risk and protective factors assessment and planning. Interagency collaboration of services for Behavioral Health, co-occurring disorders, school-based services, and My Brother's Keeper (Young Men and Boys of Color Leadership Development) Workforce Pathways Committee/ Black Male Career Council One Detroit Youth Council <table border="1" data-bbox="1163 1328 1763 1523"> <thead> <tr> <th colspan="2">2024 Youth Serviced Per Level of Care (Duplicated Count)</th> </tr> </thead> <tbody> <tr> <td>Community Based Level 1</td> <td align="right">179</td> </tr> <tr> <td>Community Based Level 1.5</td> <td align="right">49</td> </tr> <tr> <td>Non-Secure</td> <td align="right">11</td> </tr> <tr> <td>Secure</td> <td align="right">35</td> </tr> <tr> <td>Pre-Adjudicated</td> <td align="right">15</td> </tr> </tbody> </table>	2024 Youth Serviced Per Level of Care (Duplicated Count)		Community Based Level 1	179	Community Based Level 1.5	49	Non-Secure	11	Secure	35	Pre-Adjudicated	15	<p>Number of CMO youth & families in 2024: 251</p> <p>Number of juvenile justice youth <u>diversion</u> recipients in 2024: 70</p> <p>Number of Youth who participated in CYPM: 12</p> <p>Number of youth who participated in Reentry Services: 36</p> <p><u>UR outputs</u></p> <p>Average Length of Stay (LOS) for residential care decreased from 2023 from 275 days to 253 days in 2024</p> <p>Average non-secure LOS 175 days</p> <p>Secure LOS decreased from 2023 from 530 days to 419</p> <p>Average Community treatment Length of Stay: 342</p>	<p><u>Juvenile Justice Case Management Services for Adjudicated Youth/Families:</u></p> <ul style="list-style-type: none"> 100% of youth remained free of felony convictions while enrolled 95% of PL2 youth remained free of all crimes, including felony convictions, for 2 years after termination 99% of PL1 youth remained free of all crimes, including felony convictions, for 1 year after termination 9 youth graduated from high school (KPI) 3 youth entered college or trade school/apprenticeship. (KPI) 51 youth were employed. (KPI) 73% of the youth showed improvement on one or more outcome indicators on the CAFAS Assessment <p><u>Juvenile Justice Diversion Services:</u></p> <ul style="list-style-type: none"> 100% youth who participated in the program remained free of the juvenile justice system 12 months following service completion 100% of youth remained in the community verses moving from the program to an out-of-home placement 85% of youth successfully completed the program 10 youth were employed or linked to positive community activities <p>Outcome Data Sources: Court's Odyssey system; MI OTIS Tracking System; CRIM, CMO Preliminary/Annual Reports, pre/post-test; Program Roster</p> <p><u>Consumer Generated Service Improvements:</u></p> <ul style="list-style-type: none"> Greater emphasis on quality-of-life outcomes including basic needs, transportation, workforce development pathways, educational outcomes and restorative practices through the support of reentry coaches who have lived experiences and other community partnerships.
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INTEGRATED HEALTH (MH)	<p>Individual, family, and group treatment for mental health disorders increases individual's capacity to function self-sufficiently and avoid out-of-home placement.</p> <p>If families are provided evidence-based strategies with fidelity which build upon their strengths, then sustainable change can occur in all the consumers' life domains.</p> <p>If the School Based Team partners with schools and communities to address the emotional, behavioral, academic, and environmental needs of youth, families, and communities, then it will help strengthen the lives of children, youth, and families.</p>	<p><u>Treatment</u></p> <p>Supportive Techniques Assisting and Growth Empowerment Solutions (STAGES)</p> <p>Empowering Parents and Innovating Children (EPIC)</p> <p>Outpatient</p> <p>Homebased</p> <p>Wraparound</p> <p>System of Care (Youth United)</p> <p>Second STAGES Zero Suicide Initiative</p>	<p><u>Treatment Models & Approaches</u></p> <p>Cognitive Behavioral Therapy (CBT) Interventions</p> <p>Wraparound Model</p> <p>Trauma-Focused Cognitive Behavioral Therapy</p> <p><u>Resources</u></p> <p>50 FTE 2 Contractor Psychiatrist 7 Interns</p> <p>Youth Leadership Curriculum developed by East Region (BFDI) Youth United</p> <p>MCBAP Credentialed Staff demonstrating co-occurring competencies</p> <p>Detroit-Wayne Integrated Health Network (DWIHN) Funding</p> <p>Electronic Child & Adolescent Functional Assessment Scale (eCAFAS)</p> <p>DWIHN Quarterly Leadership Series and Peer-to-Peer Learning Series</p> <p>RedCap Fidelity Software Telehealth</p> <p>SAMHSA CCBHC Funding</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> Assessments, Screenings, Diagnoses (CAFAS, LOCUS, PHQ-9, MDQ, GAD-7, ACE, UCLA, SDQ, SAGA, LSI) Case Management Home and community-based interventions Strength-based, Person-centered approach Child/family safety education and techniques Crisis Interventions & 24/7/365 availability <p><u>Integrated Physical Health / Behavioral Health Care:</u></p> <ul style="list-style-type: none"> In 2024, BFDI added a Nurse Manager, Medical Assistant and Nurse Practitioner to the team. Mobile Outreach to avert hospitalizations or further police involvement. Current Certified Community Behavioral Health Clinic <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> All Clinical staff are trained in at least one Evidence-Based Practice. Evidence-Based Practices Include: <ol style="list-style-type: none"> Trauma-Focused Cognitive Behavioral Therapy Wraparound Model Parent-Management Training – Oregon (PMTO) PMTO group model known as Parenting Through Change (PTC) Motivational Interviewing TRAILS Dialectical Behavioral Therapy (DBT) Cognitive Behavioral Therapy Restorative Practices Collaborative Assessment Managing Suicidality (CAMS) Psychiatric services provided to 129 recipients Assessments; Individual Plans of Service; Crisis/Safety Plans; and Progress Notes Co-Occurring Services Transportation 40 activities to continue to instill youth voice and presence in the Wayne County System of Care. <p><u>Second Stages (Saving Lives) Suicide Prevention</u></p> <ul style="list-style-type: none"> 9 Zero Suicide BFDI Champions 22 Wayne County Organizations have been engaged to adopt Zero suicide framework 	<p>In 2024 was provided to: 354 individual consumers and 338 families were provided therapeutic services</p> <p>Number of youth who were served at a home-based level of care: 19</p> <p>Number of youth cont'd beyond age 18 for medical necessity: 5</p> <p>603 individuals received 1,390 mobile services</p> <p>746 individuals received 1 of the 9 core CCBHC services</p>	<p><u>Mental Health Treatment Services:</u></p> <ul style="list-style-type: none"> 96% of youth served in outpatient mental health remained at home, not in out-of-home care, including hospitalizations 49% of children demonstrated meaningful and reliable improvement in level of functioning. <p><u>Wraparound Services:</u></p> <ul style="list-style-type: none"> 95% of youth served in Wraparound (n=19) remained at home, not in out-of-care, including hospitalizations <p><u>Second Stages Suicide Prevention</u></p> <ul style="list-style-type: none"> 1086 individuals have been trained in a suicide prevention model Estimated impact is over 10,000 lives 69% of all BFDI's Workforce have been trained in Suicide Prevention Models including executive leadership 45 members of the behavioral health team were trained in CAMS <p><u>Certified Community Behavioral Health Clinic</u></p> <ul style="list-style-type: none"> 68% of intakes into behavioral health program received an integrated health screening <p><u>School Based Success</u></p> <ul style="list-style-type: none"> 39 partnered schools Outpatient Prevention Positively Impacted 17,601 students through a total of 3,543 preventative services Parent outreach engaged 2,933 parents & caregivers through 1,244 outreach events Mental health education provided to 7,177 school staff/community members through 1,477 educational sessions 58% of consumers served on the Westside of Detroit 42% of consumers served on the Eastside of Detroit <p>Outcome Data Sources: Functional Assessment Systems; EBO; RedCap</p> <p><u>Consumer Generated Service Improvements:</u></p> <p>Increase referrals for ancillary services and EBPs to help clients reach treatment goals.</p>

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INTEGRATED HEALTH (SUD)	<p>Evidence-based models of treatment and prevention yield recovery-oriented and healthy indicators to promote a substance free and recovery-based lifestyle.</p>	<p>Detroit Wayne Integrated Health Network (DWIHN): - HOPE (OP) - F.R.E.E. <i>(Finding Resolution Everyday Through Education)</i></p> <p>Wayne County Department of Health, Human and Veterans, Services – Adult Community Corrections</p>	<p><u>Treatment Models & Approaches</u></p> <p>Motivational Interviewing Cognitive Behavioral Therapy National Drug Control Policy Principles of Effective Substance Abuse Treatment Relapse Prevention Contingency Management</p> <p><u>Prevention Models & Approaches</u></p> <ul style="list-style-type: none"> • Lion’s Quest: Skills for Adolescence • Strengthening Families curriculum • Community-Based Process Prevention Model • Restorative Practices • Transition To Independence Process (TIP) Model® <p><u>Resources</u></p> <p>1 Certified Clinical Supervisor 2 MCBAP credentialed counselor 1 Prevention Staff</p> <p>Detroit Wayne Integrated Health Network funding</p> <p>Substance Abuse Treatment and Prevention Licenses</p> <p>MI Administrative Rules</p> <p>Cell Phones, Office Space/Equip, Telehealth Partners: MI Dept. of Corrections, CMO, faith-based, Detroit Police, ASAM, MHWIN,</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> • Individual, group, marriage, co-dependency, and family, counseling • 20 Outpatient Groups were held • Support services to clients in the following areas: financial, medical, optical, dental, employment, housing, vocational, educational, psychological, childcare, clothing, food, and mental health services • Education about alcohol, tobacco, and other drugs (ATOD) and its negative effects on individuals, families, and communities • Assessments, service plans, community referrals, resource linking, monitoring, follow-up, advocacy, and aftercare linkages. • Transportation assistance (bus tickets/staff vehicles) <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> • Substance Use Disorder Certified Staff • Outpatient, Prevention, and Relapse Prevention Services • Outpatient –group/didactic/individual/family therapy • Court-referred gender specific trauma-informed relapse prevention • Contingency Management • Urine Screens • Referrals to mutual help groups • Parent training of drug prevention • Restorative Practices and Restorative Justice techniques/education to reduce their children’s risk of ATOD use (FREE) • Advancing development/ enforcement of ATOD ordinances, regulations, and legislation (FREE) • Provision of competent services to co-occurring disorder (mental health and substance abuse) affected consumers and their families 	<p>Number of substance abuse treatment customers in 2024: 41</p> <p>Number of Community Corrections customers in 2024: 28</p> <p>Number of substance use Disorder customers received Case Mgmt. in 2024: 5</p> <p>Number of recipients of substance use disorder prevention in 2024: 3456</p> <p>160 prevention services provided</p> <p>114 SUD prevention groups held.</p>	<p><u>Substance Abuse Treatment Services:</u></p> <ul style="list-style-type: none"> • 93% of adults served in SUD outpatient treatment, and 100% of youth consumers remained free of hospitalizations and residential admission. • Of the individuals who received SUD services on average of 90 days or more 100% (n=15) successfully discharged from the program. <p><u>Substance Abuse Prevention Services:</u></p> <ul style="list-style-type: none"> • Prevention staff collaborated in 14 community Substance Use prevention team events. • 100% youth revealed their increased awareness of various substances including cigarettes, alcohol, marijuana, prescription drugs, painkillers, and vapor products. • 75% of consumers successfully complete gender-specific trauma informed relapse prevention services. <p>Outcome Data Sources: Program activity logs; Sign-In Sheets; MPDS Data System Reports; Educational curriculums’ pre-test and post-tests; Detroit Wayne Integrated Health Network (MWINH) enrollment data; Progress Notes; Discharge Summary; Jail Plus Case Mgmt. System; Self-Report; Laboratory Drug Screen Results</p> <p><u>Consumer Generated Service Improvements:</u> Young men are more inclined to achieve their dreams when they are not pressured to aspire to attend college. Staff to procure more workforce development resources for youth who decide not to pursue college career paths.</p>

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FAMILY PRESERVATION	<p>Kinship care, and cost-effective and efficiency interventions increase child well-being/safety, while decreasing the need for out-of-home placement.</p> <p>Homelessness erodes family security, well-being, and self-sufficiency.</p> <p>The absence of basic needs increases likelihood of future crisis and longer-term dependence upon formal systems of care.</p>	<p>Family Connections (FC) - UWSEM -Building Foundations</p> <p>Intake Department</p> <p>Housing Stabilization</p> <p>Building Community Partners</p> <p>Parenting Time Supportive Visitation</p>	<p><u>Intervention Models & Approaches</u></p> <p>Solution-focused counseling Needs Assessment</p> <p><u>Prevention Models & Approaches</u></p> <ul style="list-style-type: none"> - Family Connections (FC) Model - Arizona Self-Sufficiency Matrix - Strength-based <p><u>Case Management Approaches</u></p> <p>Assessment, Service Plan, and Crisis Intervention</p> <p><u>Resources</u></p> <p>17 Staff, 1 Intern</p> <p>Michigan Child Protection Law requirements</p> <p>MDHHS referring staff</p> <p>Wayne State University</p> <p>Family Connections Advisory Council & Partners</p> <p>Empirical Assessment Tools</p> <p>Mileage, Cell Phones, Office Space/Equip</p> <p>UWSEM Apricot Database and 211 line</p> <p>EBO (BFDI's EMR)</p>	<p><u>General Services:</u></p> <ul style="list-style-type: none"> • Assessment, referral, linking, and follow-up into BFDI services, as well as community resources meeting families' needs beyond the scope of BFDI services. • Initial contact with family is made within 24 hours. • Small caseloads allowing for intensive intervention. • Services are home-based and community-based. • Time-limited programming. • Ecological approaches to preventing future crises. • Specific assistance for families' basic needs • Individual, Family, and Group Counseling. • Support groups. • Case Management. <p><u>Specialized Services:</u></p> <ul style="list-style-type: none"> • Parenting education • Teach/model: home management, budgeting, communication, and assertiveness skills. • Advocacy with schools, medical and mental health facilities • Housing and relocation assistance • Assistance with food, clothing, appliances, and other concrete needs. • Linkages to natural helping networks and ongoing community supports. • Transportation support services. • Initial face-to-face contact with family within 24 hours. • Safety planning. • Individual and Family Activities. • FC Multi-family Activities. • Assistance with identifying stable, adequate housing, including assistance with securing legal documents (state identification, birth certificates, etc.) necessary to secure housing. • Housing Stabilization in targeted areas 48205, 48228, 48224, 48204 	<p>Number of FC family preservation <u>prevention</u> recipients in 2024: 25</p> <p>Number of individual persons (heads of household) served by Intake in 2024: 1984</p> <p>Number of Housing Stabilization Households served in 2024: 19 individuals in 7 families</p> <p>Number of parent recipients of Building community Partner Services in 2024: 83</p> <p>Number of Parenting Time Supportive Visitation recipients in 2023: 27</p> <p>Outcome Data Sources: EBO</p>	<p><u>Family Preservation Intervention Services:</u></p> <ul style="list-style-type: none"> • 100% of children and families served received intensive case management and in-home counseling • 88% of families demonstrated an increase in self-sufficiency by utilizing on average 243 days of services <p><u>Intake Services:</u></p> <ul style="list-style-type: none"> • 1984 individuals served by the Intake Dept. • 71% (n=1415) of calls were seeking housing information/assistance • 414 individuals/heads of households were served to lower healthcare cost • 26% (n=515) were referred to or from internal programs • 16% (n=327) were seeking resources to address food insecurities <p><u>Bridges:</u></p> <ul style="list-style-type: none"> • Seven (7) households provided housing stabilization. • Four (4) families received Cash Assistance • Five (5) families were provided rapid re-housing • Two (2) families were provided re-stabilization <p><u>Building Community Partners:</u></p> <ul style="list-style-type: none"> • 91% of parents who engaged in Parent Partner Services successfully completed goals towards reunification • 92% of families successfully complete 3 of their parent treatment plan goals <p><u>Parenting Time Supportive Visitation:</u></p> <ul style="list-style-type: none"> • 100% of families were offered non-traditional parenting time visits • 226 visits were provided to 27 families <p><u>Consumer Generated Service Improvements:</u></p> <p>Expand community partnerships and outreach programs including electronic interfacing.</p>

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COMMUNITY ENGAGEMENT and Young Men and Boys Initiative	Community development initiatives increase community safety, neighborhood beautification, and citizen empowerment, while reducing justice involvement.	Restorative Practices My Brother's Keeper (Obama Foundation and Young Men and Boys of Color) Initiative HOPE Mobile Outreach	<u>Prevention Models & Approaches</u> Restorative Practices Community Engagement Meetings R.E.A.L. (Restorative, Engaged, Aspiring, Leading) Brothers - Joven-Noble Curriculum <u>Resources</u> 9 Staff 1 Intern volunteers Kresge Foundation Funding Detroit Wayne Integrated Health Network Detroit's Osborn, Cody Rouge, and Denby residents Mileage, Cell Phones, Office Space/Equip, Community Meeting Space, Video Conferencing	<u>General Services:</u> <ul style="list-style-type: none"> • Building community and repairing harm throughout Detroit, the region, and nationally using Restorative Practices training • Strengthen and preserve families by empowering our youth in Detroit's Osborn/Denby, and Cody Rouge neighborhoods. • Community engagement initiatives that build community safety and advance neighborhood goals developed and monitored by residents. <u>Specialized Services:</u> <ul style="list-style-type: none"> • Harambee Brotherhood Groups utilize Restorative Practices techniques during and after school programming to foster problem-solving skills, and develop community, amongst boys and young men of color who are being prepared as Youth Ambassadors in their schools and communities: <ul style="list-style-type: none"> - <i>Malcom X/Paul Roberson</i> - <i>Barack Obama Leadership Academy</i> - <i>Fisher Upper</i> - <i>Virtual</i> <u>Community Partners:</u> <ul style="list-style-type: none"> - ARISE Detroit Neighborhoods Day - Yorkshire Woods Community Organization - Mohican Regent Homeowners Association - Southfield-Plymouth Community Association - Detroit Crime Commission (DCC) - Mayors' Office City of Detroit - Detroit City Council - Detroit Police Department (9th and 6th pct.) - My Brother's Keeper Alliance National Leadership - One Detroit Violence Reduction Partnership - Racial Justice United Network meetings with R.E.A.L. Brothers 	Quarterly Steering Committee 114 Harambee meetings 17 Ambassadors who are engaged and active in their community 6 Community meetings convened hosting 100 individuals each meeting totaling 600 residents 8353 individuals participated in 148 community resource events 164 individuals requested follow-up contact to avert police involvement, and hospitalization	<ul style="list-style-type: none"> • BFDI hosts 9 trained and licensed Restorative Practices practitioners • Over 350 Block Clubs in Osborn and Cody Rouge to-date • 1390 therapy services and peer interventions provided • 56 is the Average Attendance per Event • 4% of attendants requested/received follow-up services. <u>Consumer Generated Service Improvements:</u> Implement resources to support grief and loss as well as strengthen workforce development pathways.

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<p style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 2em; font-weight: bold; margin: 0;">EARLY CHILDHOOD</p>	<p data-bbox="282 77 494 443">Early literacy interventions by parents with children from birth – age 3, up through age 8, are essential to building children’s brains for language development and reading.</p> <p data-bbox="282 475 494 716">Wellness solutions and support increase children’s likeliness to enter school ready to learn and able to succeed.</p>	<p data-bbox="521 77 736 505">BFDI’s sustainable early childhood services was birth from Local planning and implementation of the national Promise Neighborhoods (PN) to strengthen the cradle to career pipeline.</p> <p data-bbox="521 537 669 594">Parents As Teachers</p> <p data-bbox="521 626 669 716">Parents As Teachers (Expansion)</p> <p data-bbox="521 773 669 805">LENA Start</p> <p data-bbox="521 870 736 927">Hope Starts Here Imperative 3</p> <p data-bbox="521 959 709 992">Project Launch</p> <p data-bbox="521 1016 709 1219">Substance Abuse and Mental Health Services Administration (SAMHSA)</p> <p data-bbox="521 1252 709 1284">Priority Health</p>	<p data-bbox="763 77 1051 167"><u>Prevention and Intervention Models & Approaches</u></p> <p data-bbox="763 183 1018 215">Parents As Teachers</p> <p data-bbox="763 232 911 264">LENA Start</p> <p data-bbox="763 313 911 345"><u>Resources</u></p> <p data-bbox="763 354 924 386">5.0 FTE Staff</p> <p data-bbox="763 427 1059 516">Great Start Wayne Early Childhood Development Collaborative</p> <p data-bbox="763 548 1045 605">Coalition on Temporary Shelter (COTS)</p> <p data-bbox="763 638 1099 792">Great Start Collaborative – Wayne [Everybody Ready] & Michigan Department of Health and Suman Services funding</p> <p data-bbox="763 808 1059 865">W.K. Kellogg Foundation Trustee Grant</p> <p data-bbox="763 881 1085 1003">Detroit Public Schools Community District (DPSCD) Principals, Staff, Students, and Families</p> <p data-bbox="763 1036 1032 1092">Early Childhood Work Group</p> <p data-bbox="763 1125 1085 1182">Community Meeting Space Video Conferencing</p> <p data-bbox="763 1214 1045 1320">MI-AIMH (Michigan Association for Infant Mental Health)</p>	<p data-bbox="1131 77 1360 110"><u>General Services:</u></p> <ul data-bbox="1131 110 1744 289" style="list-style-type: none"> • Early childhood student literacy training • Early childhood parent literacy and brain science coaching using 21st century technology • Case Management services to increase resiliency and resources of families with children from 0-5 • DECA, PICCOLO, Massie Campbell <p data-bbox="1131 321 1408 354"><u>Specialized Services:</u></p> <ul data-bbox="1131 354 1757 971" style="list-style-type: none"> • In September 2017 BFDI brought the national early childhood literacy model, LENA Start, to Detroit, supported by Kellogg and LENA Foundation funding. • Educational reform and community revitalization to ensure that “all children will have access to effective schools and strong systems of family and community support that will prepare them to attain an excellent education, and successfully transition to college and career”. • A national, evidenced-based home visiting model that promotes the optimal early development, learning, health and well-being of children by providing developmental and literacy tools to parents and caregivers. • Hope Starts Here – BFDI serve as co-lead for imperative 3 and targeted 3 strategies. <ul data-bbox="1185 1003 1757 1214" style="list-style-type: none"> • Strategy 6: Increasing the supply of high-quality early care and learning seats in Detroit. • Strategy 7: Strengthening the professional development and compensation of the early care and learning workforce. • Strategy 8: Aligning early childhood and K-3 systems. 	<p data-bbox="1792 77 1972 289">Number of Parents As Teachers recipient families in 2024: 42 and 55 children</p> <p data-bbox="1792 321 1972 443">Number of personal home visits in 2024: 310</p> <p data-bbox="1792 475 1972 621">Number of LENA Start recipient families in 2024: 39</p> <p data-bbox="1792 654 1972 776">Number of Project Launch Recipients in 2024: 133</p> <p data-bbox="1792 808 1972 1084">Number of individuals who have received training in prevention or mental health promotion through Project Launch – 30</p> <p data-bbox="1792 1117 1972 1263">22 classroom observations provided by Project Launch Tea,</p>	<p data-bbox="2005 77 2282 110"><u>Parents As Teachers:</u></p> <ul data-bbox="2005 110 2591 386" style="list-style-type: none"> • 85% of families with an identified family stressor received the required number of monthly home visits • 100% (N=9) of required group connections were achieved. • 88% of families received 2 visits per month. • 100% of caregivers who presented depression risk factors received a resource connection to mental health services. <p data-bbox="2005 418 2483 451"><u>LENA Start Early Childhood Literacy:</u></p> <ul data-bbox="2005 451 2564 548" style="list-style-type: none"> • 56% of families successfully completed, demonstrating 4 more minutes read per day. • Facilitators attended 12 community events. <p data-bbox="2005 581 2201 613"><u>Project Launch</u></p> <p data-bbox="2005 613 2529 670">100% evidence-based mental health-related services as a result of the gran</p> <p data-bbox="2005 703 2389 735"><u>Hope Starts Here Imperative 3</u></p> <p data-bbox="2005 751 2591 873">Outcome Data Sources: Great Start Collaborative-Wayne Ages and Stages Database; BFDI Intake Database; Family Connections Referral Database; Parents As Teachers Personal Visits and Group Logs</p> <p data-bbox="2005 906 2583 938"><u>Consumer Generated Service Improvements:</u></p> <p data-bbox="2005 971 2564 1052">Increase collaboration with Project Launch and leverage external interfacing to enhance engagement and referrals.</p>