

Safe at Home

Douglas County

Helping children exit foster care and reunify with their families by expanding support for in-home safety.



safe at home
FAMILY PARTNERS



Impact Report

January 2025

Produced by:

Children's Public Private Partnership (CP3)

Contributions from: *Safe at Home* Program (S@H) & ODHS' Office of Reporting, Research, Analytics & Implementation (ORRAI)



Submitted to:

**Oregon Department of Human Services (ODHS) Child Welfare
Family Faith and Relationship Advocates (FARA)**



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EXECUTIVE SUMMARY

Led by Family Faith and Relationship Advocates (FARA), *Safe at Home* (S@H) Douglas County recruits and trains community volunteers who ensure child safety by partnering with Child Welfare (CW) referred families on the path to family reunification. The Children's Public Private Partnership (CP3) provides program design, implementation, and evaluation support, in partnership with Oregon Department of Human Services (ODHS) Office of Research, Reporting, Analytics & Implementation (ORRAI).

The S@H program was initially developed in partnership between CP3, ODHS Marion Child Welfare and the Marion Polk Early Learning Hub (MPELH). While the local context in Marion and Douglas counties differ, the need for safety service providers to monitor in-home child safety and support return home plans for families was still identified as a primary barrier to reunification. S@H replication led by FARA in Douglas benefitted from promising practices, program improvements, lessons learned and knowledge sharing from the Marion S@H implementation team. Key elements to successful program implementation included an existing optimized Child Welfare Referral Process, and an integrated monitoring and evaluation system. The FARA S@H replication demonstrated success early on and is moving full ahead into its second year of programming.

This document shares the impact of S@H Douglas, as implemented by FARA. The report draws upon 12 S@H programmatic metrics, reflections from ODHS Douglas Child Welfare and FARA staff, and feedback from those most familiar with the program: Family Partners and CW Caseworkers. FARA received 40 CW referrals and served 23 families within its first year of full program implementation from Sept. 2023- 2024. There is already compelling evidence from this data that the involvement of community volunteers, or "Family Partners," in Douglas, significantly contributes to the safe and timely exit of children from foster care. Family Partners also play a crucial role in connecting families with vital community resources, enhancing their ability to safely parent at home and reducing the likelihood of future Child Welfare involvement.

CP3 will continue to support S@H Douglas for an additional year, at which time we hope that ODHS CW in Douglas and FARA assume full local ownership of the S@H program, with ODHS CW providing sustained funding to enable its continued expansion and evolution.

Key expansion activities already being implemented by FARA include:

- Integrating Family Partner support with Family Preservation, particularly during initial Child Protective Services (CPS) investigations, which could help children remain safely at home and avoid entering foster care.
- Exploring the potential for paid Safety Service Providers (SSPs) to complement the volunteer model, enhancing consistency, availability, and expertise, particularly for more complex cases.

In the coming quarter, we will explore how the S@H program might also be replicated in Coos County, which is adjacent to Douglas, and currently integrated into ODHS District 6 to include Douglas, Coos and Curry counties for greater widespread impact.

The implementation team has demonstrated admirable commitment to the S@H program, bringing invaluable local knowledge and experience for understanding and serving the needs of children and families in their community.

Safe at Home Implementation Team

March 2025



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INTRODUCTION

The *Safe at Home* (S@H) program was initially conceived in 2020 by a diverse working group of ODHS staff and community partners as a targeted intervention to reduce the number of children in foster care in Marion County. Based on ODHS research and input from Douglas County community and the local CW team, S@H was replicated for implementation in Summer 2023.

LACK OF SAFETY SERVICE PROVIDERS (SSP)

ODHS research (Oct. 2022) identified the lack of Safety Service Providers (SSPs) among the top three barriers to family reunification (return home) in Douglas County. SSPs are often people from a family's current network of natural supports, or new supports identified by the family and/or Child Welfare (CW) caseworker. SSPs serve as volunteers and do not receive compensation.

Based on the current structure, a variety of barriers limit the availability of natural family supports to serve as SSPs:

1. Family is isolated and does not have a reliable network of natural supports
2. Family is reluctant to mobilize its network due to the stigma of being CW-involved
3. Friends and extended family are unwilling or unable to clear a background check
4. Friends and extended family are unable to volunteer as a SSP due to time and resource constraints

During a May 2022 survey, CW caseworkers in Douglas County indicated that increased availability of SSP's beyond a family's natural network could support reunification of more children in foster care. It should be noted that SSPs are a CW condition for return and a required resource for implementing an in-home plan.

There are far fewer SSPs available than needed. In response to this barrier, the Children's Public Private Partnership (CP3) co-designed the *Safe at Home* (S@H) program with the local CW team and community partners, practitioners, and individuals with lived experience.

IMPACT OF FOSTER CARE

A child being removed from family and placed into foster care is a traumatic event that can increase a child's likelihood to experience chronic physical, behavioral, emotional, and developmental health problems and lead to other adverse outcomes such as incarceration and homelessness.

The extent of trauma can be lessened when children are able to stay home or be safely returned home. Research supports that parents are significantly more likely to participate in case planning and experience more successful outcomes when their children are in their care. Timeliness of achieving reunification for children in foster care is critical – with every year a child remains in foster care, the likelihood of reunification declines.



SAFE AT HOME DOUGLAS

Safe at Home is a community-based program, led by local implementing partner, Faith Family and Relationship Advocates (FARA). S@H was designed to expand in-home support for families by utilizing volunteers to serve as Family Partners (FPs) in an SSP role, helping CW-involved families meet the conditions necessary to implement a return home plan. FPs help monitor in-home child safety to expedite child-family reunification and support families as they work to uphold their safety plan and achieve successful reunification and CW case closure; *and* to avoid removing children from their home when possible while families and ODHS work together on securing resources to support safety and stability.

THEORY OF CHANGE

The primary goal of the S@H program is to demonstrate that with the support of volunteer FPs more children can experience safe and timely reunification with their families and successfully exit foster care; *and* prevent removal of children from their home and entry into foster care when possible. By mobilizing community members to serve as FPs, we expand the SSP resources available to CW-involved families, thereby enabling trial family reunification or preventing child placements into foster care, with the ultimate goal of improving child-family outcomes, reducing CW involvement and enhancing supports for family stability.

KEY PROGRAM COMPONENTS

Program design and implementation has been a collaborative process between S@H/FARA and the local Douglas CW team, facilitated by CP3 and supported by ORRAI. These partners formed a workgroup that identified and developed six key program components, noted below. Refer to [Appendix](#) for a full list of activities and outputs for each component.

- Essential Roles and Functions
- Volunteer Recruitment Strategy
- Volunteer Onboarding, Training & Support
- Service Referral, Access & Delivery
- Communication and Collaborative Interactions
- Data Collection & Monitoring Outcomes

PROGRAM IMPLEMENTATION

Approach & Timeline

FARA became the local implementing partner for S@H in May 2023. They hired and onboarded a dedicated Program Manager (PM) in September and began working closely with CP3 and the local CW team on program implementation.

The PM's first year focused on expanding her knowledge of CW practices and adapting to and engaging with CW leadership and staff at the Douglas branch. To better understand the volunteer Family Partner role, S@H's PM became the first Family Partner working directly with CW-involved families. Her experiences provided valuable insights into key program design elements. During this early period, the PM also developed FP training materials, conducted community outreach, and continued to refine the program in partnership with CP3. Key program design activities included:

- Securing FARA’s ability to request background checks directly from the Background Check Unit (BCU) and updating policy language in collaboration with CW that enabled S@H the ability to determine suitability of volunteers to serve as FPs;
- Defining S@H volunteer requirements to support greater engagement of people with lived experience;
- Refining the identification of families who would benefit from S@H and improving the Child Welfare referral process accordingly; and
- Planning strategic communications to support CW staff’s program knowledge and engagement.

The importance of a local CW Resource Developer (RD) working closely with the S@H PM cannot be understated. In early 2024, Douglas CW successfully hired a new RD, to directly support S@H CW referrals, as well as regular and consistent communication within and between S@H and CW caseworkers.

Finally, CP3 and S@H partnered with ORRAI to define and implement local data tracking processes for program evaluation. These metrics were developed over two cycles of iterative learning and process improvements within the first few years of implementation in Marion County.

Moving into their second year of full program implementation (Oct-24), FARA has experience supporting several CW-referred families, a pool of potential volunteers and a strong foundation to expand the program and its impact. See Table 1: for more information.

<p>YEAR 1 May 2023–Jun 2024</p>	<ul style="list-style-type: none"> • ODHS-FARA Grant Agreement (May 2023-2024) • CP3-FARA Grant Agreement (Jul-23) • PM hired & onboarded (Sep-23) • PM develops program understanding, partners with MPELH S@H PM for knowledge transfer and begins serving as first Family Partner • PM builds collaborative working relationships with CW leadership & staff • PM leads community engagement & FP volunteer recruitment • PM leads FP training & curriculum development
<p>YEAR 2 Jul 2024–Jun 2025</p>	<ul style="list-style-type: none"> • ODHS-FARA and CP3-FARA Grant Agreements, amended to fund Year 2 • PM continues serving as FP, recruiting/onboarding volunteers & developing partner relationship with ODHS CW • Douglas CW RD hired and plays critical role in CW referrals and branch communications • PM continues to support ongoing recruitment, education/training, and recognition activities for FP volunteers • Hired PT Staff Support (administrative support and enhanced FP support)

Table 1: Program Implementation Timeline

Program Costs & Funding History, May 2023-June 2025

Total Program Cost			
May 2023 – June 2025	\$241,250 to FARA	Source: <ul style="list-style-type: none">• ODHS: GA 179145 \$200,000• CP3: \$41,750k passthrough funding from OCF Joseph E Weston Foundation	
Funding History			
Grant Period	Amount	Source	Notes
Year 1 May 2023- June 2024	\$100,000 \$20,500	ODHS CP3	GA 179145 GA #4 (passthrough OCF Joseph E Weston Foundation)
Year 2 Jul 2024- Jun 2025	\$100,000 \$21,250	ODHS CP3	GA 179145-1 GA #4-1 (passthrough OCF Joseph E Weston Foundation)

Table 2: Program Cost & Funding Sources, 2023-2025

PROGRAM IMPACT

S@H identified early success indicators that incorporate experiential and outcome-focused metrics to ensure a shared understanding of the S@H program goals and to measure its impact. See Table 3: S@H Program Metrics. Through a collaborative effort, CP3, ORRAI, CW and S@H tracked and collected quantitative program and systems data and collected feedback via 1:1 conversations and surveys from individuals who have experienced S@H, including S@H Family Partners and CW staff. We have analyzed and summarized key indicators, findings, and themes as they relate to the success criteria and overall program impact, strengths, challenges, and opportunities for improvement.

PROGRAM METRICS - OUTCOMES & SUCCESS INDICATORS




OVERARCHING OUTCOMES		
 <p>Expand access to SSP resources to support in-home child safety</p>	 <p>Enable safe, timely and successful child-family reunification</p>	 <p>Connection to resources that support long-term family stability</p>
SUCCESS INDICATORS		
Category	Quantitative Measures	Qualitative Measures
Volunteer Recruitment & Engagement	<ul style="list-style-type: none"> FPs Recruited/Retained FPs Actively Serving 	<ul style="list-style-type: none"> Quality of FP Onboarding, Training, and Support
Service Referral & Access	<ul style="list-style-type: none"> CW Family Referrals Families Served & Service Duration 	<ul style="list-style-type: none"> Understanding of Program, Roles & Expectations Across all Roles Opportuneness of Referral Process
Service Delivery & Impact	<ul style="list-style-type: none"> Child-Family Reunifications Children who Remained at Home or with Relatives Timeliness to Reunification 	<ul style="list-style-type: none"> Experience and Impact of FPs Serving Families In-Home Collaborative Interactions between S@H, CW, and Families
Long-Term Family Stability	<ul style="list-style-type: none"> # of Family CW Case Closures # of Successful Reunifications 	<ul style="list-style-type: none"> Long-Term Family Impact Connection to Community Resources

Table 3: S@H Program Metrics

PROGRAM DATA - QUANTITATIVE MEASURES

This section summarizes preliminary learnings based on quantitative program data collected from S@H program data and OR-Kids CW Administrative Data (as of 12/31/24).

Service Referrals & Access

S@H FARA began accepting family referrals from CW in late September 2023.

- *Chart 1.* Through Dec. 2024, 40 families have been referred to S@H by CW. Of those, 23 families accepted/started services, 17 completed/ended services, 6 are still receiving services, 4 are still under review, and 14 did not accept/start services (*reasons listed in Table 4*).

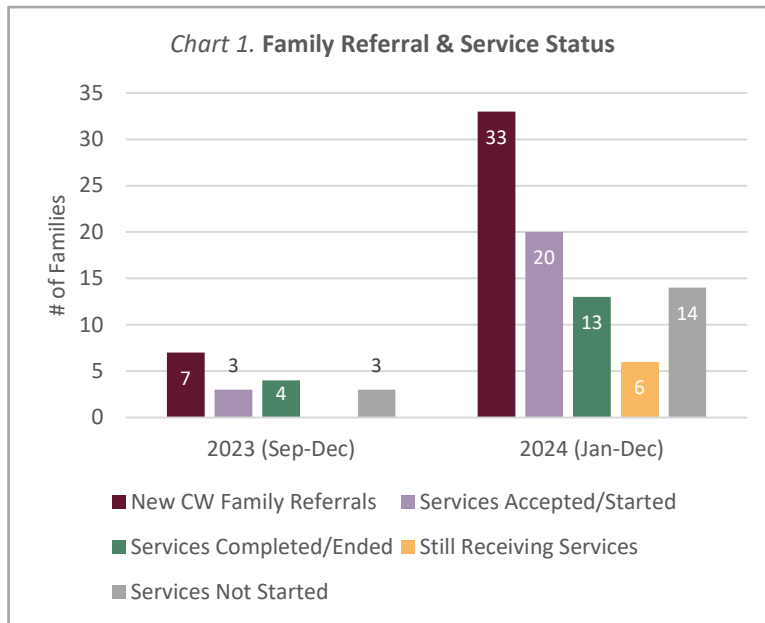
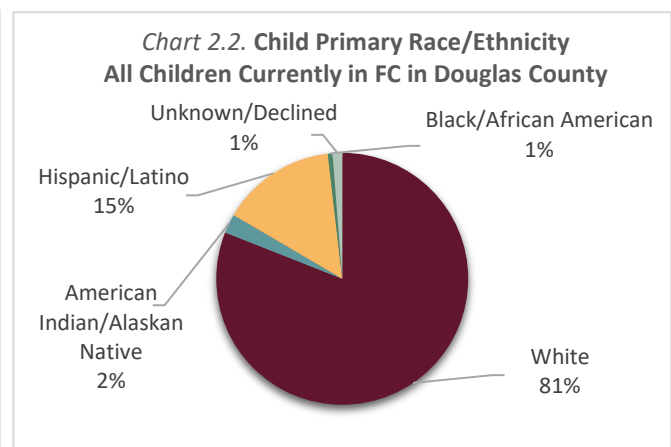
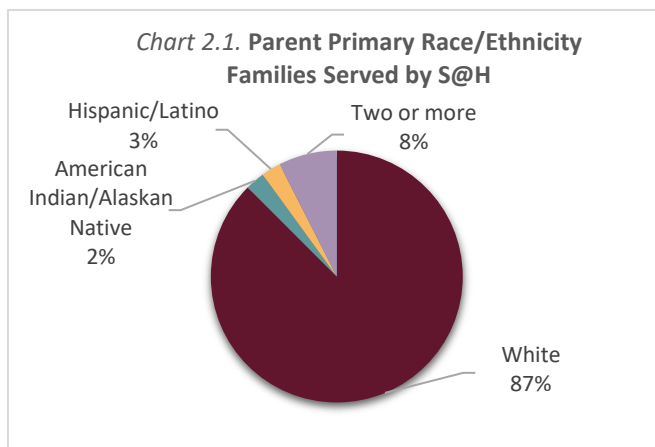


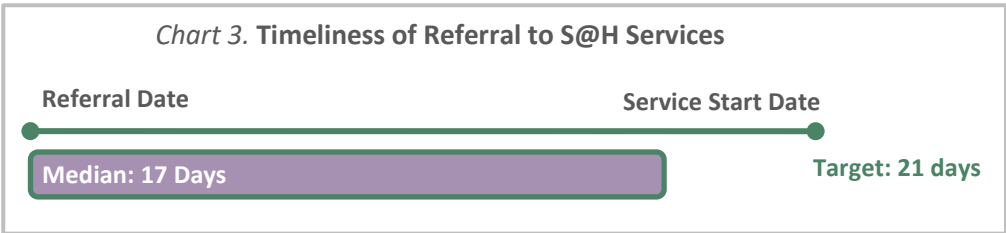
Table 4. Reasons Services Not Started	# of Families
Referral cancelled by CW	
○ Service no longer needed	10
○ In-home plan was not implemented	
○ Other SSP supports identified	
No FP available to serve in family location (Myrtle Creek)	1
Request for family transportation (not available by S@H)	1
Request for supervision for Family Time visits (not available by S@H at the time)	1
Referral under review	4

- *Chart 2.1.* Percentages of Parent's Primary Race/Ethnicity for all families referred to S@H, based on CW administrative data (collected by CW caseworkers).
- *Chart 2.2.* Percentages of Child's Primary Race/Ethnicity for all children currently in foster care in Douglas County, based on CW administrative data (collected by CW caseworkers).



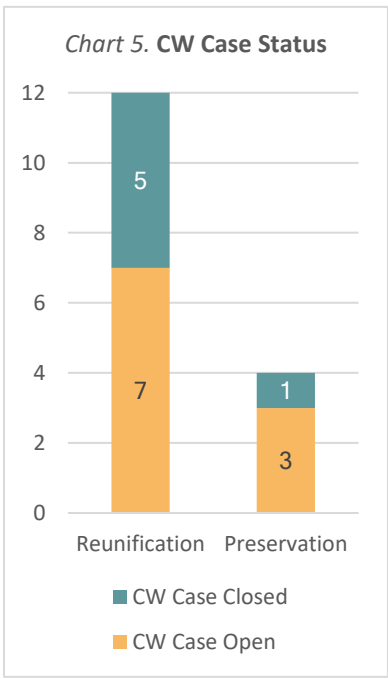
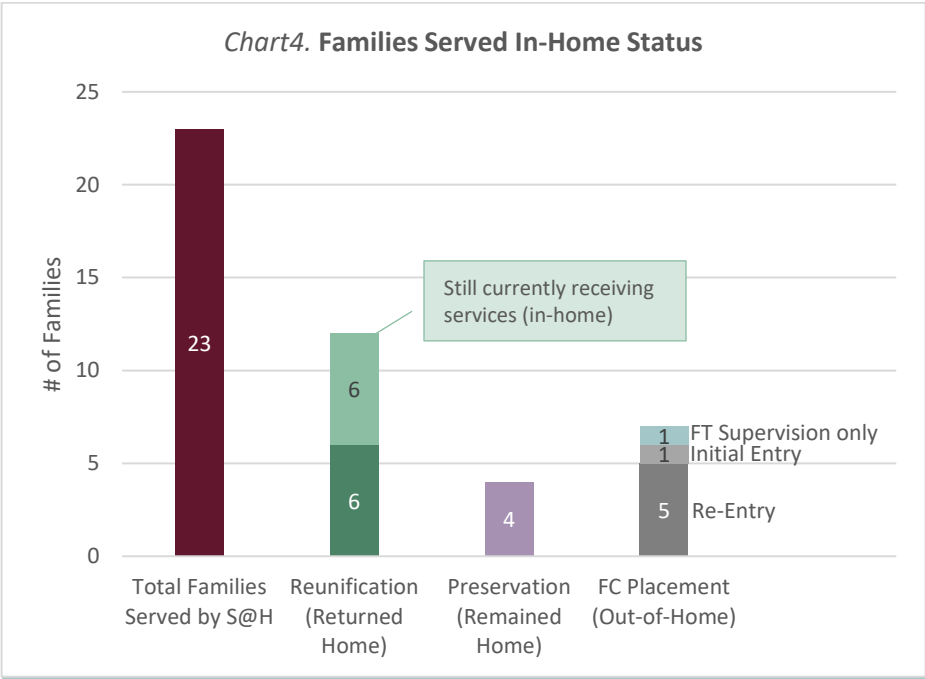
The CW– S@H Referral Process has been refined and its effectiveness in supporting appropriate referrals and timely access to services has improved.

- *Chart 3.* The median time from initial S@H referral date to families accepting/starting services with S@H is 17 days, which is less than the expected target time of 21 days (metric defined by S@H/CW during program design phase). This data suggests that the referral and access process is functioning as or better than expected and could also indicate family readiness for services and/or reunification in that they become involved with S@H at a point where they can successfully implement an in-home plan with SSP supports provided by S@H FPs.

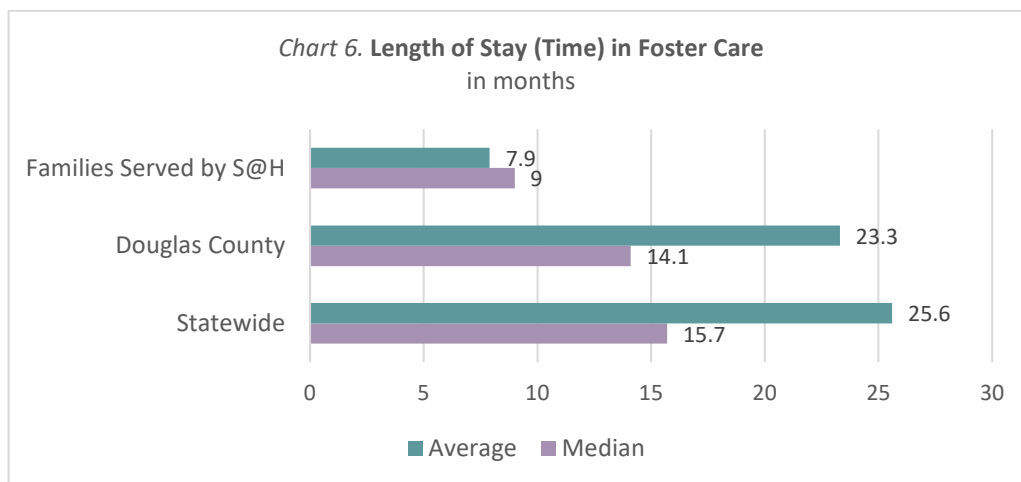


Service Delivery & Family Outcomes

- **S@H Family Partners serving families in-home may contribute to children safely existing foster care and reunifying with family.**
 - *Chart 4.* Of the 23 families served by S@H to date, 12 have experienced reunification (in-home plan implemented), 6 of whom are still currently receiving services from S@H. The children in 4 of these families were able to remain home, preventing FC entry (out-of-home placement), and 1 family is currently receiving S@H support during Family Time (Visitation) working towards the implementation of an in-home plan. Children in 6 of these families entered/re-entered foster care (out-of-home placement) due to a failed in-home plan during their service period.
 - *Chart 5.* Of the 12 families who experienced reunification, 5 of them have successfully closed their CW case, while 7 remain open (6 of whom are still currently receiving services from S@H). Of the 4 families whose children remained home (preservation), 1 has successfully closed their CW case, while 3 remain open.

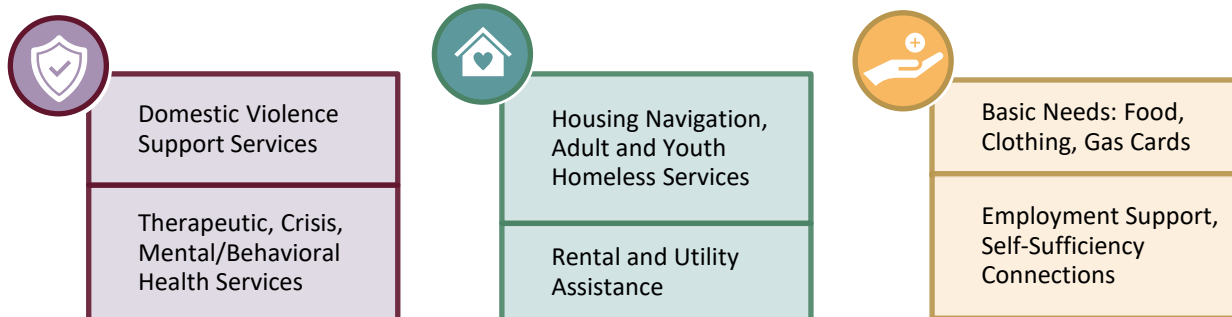


- **Support of Family Partners may contribute to timely reunification and reducing the length of stay (LOS) for children in foster care.**
 - *Chart 6.* The median LOS in Foster Care for children of families served by S@H is 9 months, which is 5.1 months less than the Douglas County Median LOS (14.1 months), and 6.7 months less than the Statewide Median LOS (15.7 months), for all children currently in foster care and on a Reunification plan.

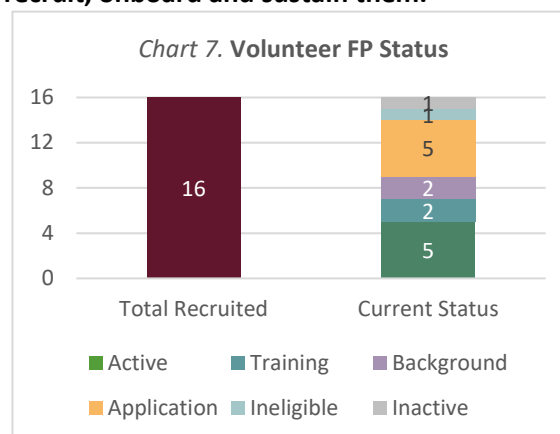


*LOS: Time period begins from current CW episode start date.

- **S@H has connected families to other community-based resources (including access to all existing FARA services) to enhance service delivery and support their ability to safely parent at home, promoting community connection, long-term family stability and prevention of future CW involvement.**



- **Although volunteer levels have not yet returned to pre-pandemic levels, the S@H Community Volunteer model is viable, but it takes time to recruit, onboard and sustain them.**
 - *Chart 7.* Of the 16 volunteers engaged, 5 continue to actively serve as FPs, 4 are in process of becoming a FP, 5 have submitted applications, and 2 are inactive/ineligible.



PROGRAM DATA - QUALITATIVE FEEDBACK

Feedback from S@H Family Partners

Summary

Feedback from FPs highlights positive experiences of volunteering with S@H. FPs were motivated to join the program by their shared desire for hands-on, in-person volunteering, and the opportunity to help make a positive difference for children and families. FPs appreciate the support from S@H's PM, clarity on boundaries, and feel that the training provided has been effective in helping navigate the challenges of in-home visits. While some FPs are still gaining experience, they recognize the value of S@H and the potential for the program's effectiveness in monitoring child safety and supporting family well-being. Despite initial challenges like concerns with the background check process, understanding safety planning documents, and occasional missed home visits, FPs remain committed to volunteering with S@H and look forward to serving more families, reinforcing their belief in the program's value and dedication to the program's mission and their role within it.

"Families have expressed immense gratitude for having options and the ability to turn to the community for necessary [safety] checks that allow children to come home. The specific benefits for children and parents when they can remain together while working on issues are profound."

S@H Program Manager &
Family Partner

Strong Program Aspects

During qualitative interviews, FPs were asked about what aspects of the program they believed were strongest.






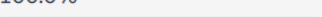
Value	Percent
Building relationships with families	100.0% 
Supporting child safety	100.0% 
Reunifying families and keeping them connected	100.0% 
Connecting families to community resources	100.0% 
Cultural or language understanding	100.0% 
Peer support/mentorship, shared lived experience (if applicable)	100.0% 

Table 5: Feedback from Family Partners

"We just need more volunteers. S@H and the PM have done a great job of affirming, rewarding, and appreciating the Family Partners."

Family Partner

Feedback from CW Permanency Caseworkers

Summary

Feedback from CW Permanency Caseworkers highlights that the S@H program is highly positive, specifically in its effectiveness, ease of use, and value in supporting families with limited natural support networks and SSP resources. Caseworkers appreciate S@H’s clear communication, quick response times, and simplicity in the referral process, despite some initial challenges around required documentation and the need for more specific guidance on certain procedures (e.g., safety plans). There is a strong demand for more volunteers, access to additional services like transportation, and for the program to expand into more rural areas to serve more families. Caseworkers also suggested enhanced communication with S@H and more frequent updates from FPs on family progress. Overall, S@H is viewed as highly beneficial, and seen as a valuable service that fills a crucial gap for families on the path to reunification and in need of in-home supports. Caseworkers are very likely to continue referring families to S@H, and its growth and expansion are eagerly anticipated.

“Grateful to have this program. This is a great service and one that has been needed for a long time.”
CW Caseworker

Beneficial Program Aspects

During interviews with CW Permanency Caseworkers, they were asked about what aspects of the program they felt were most beneficial to families.

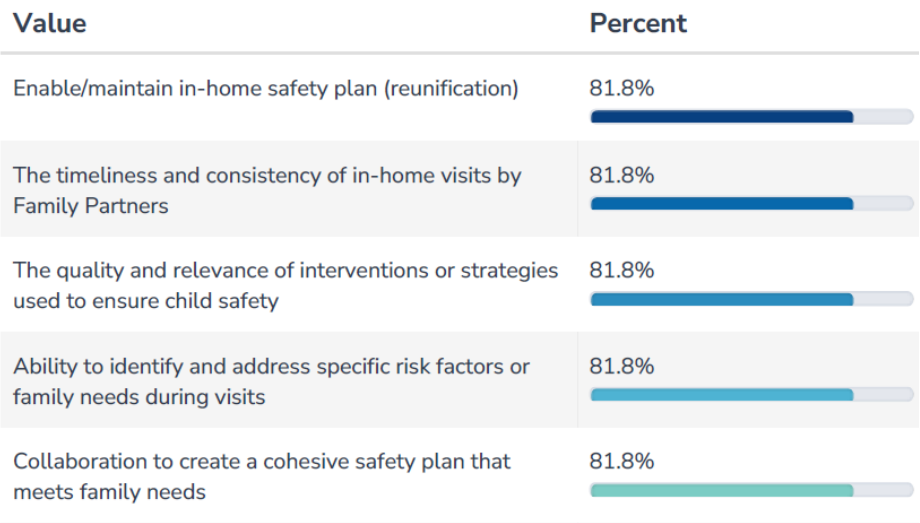


Table 6: Feedback from CW Caseworkers

“The biggest benefit is they [S@H] are there for families who have lost their support system, and they would not have the opportunity without them!”
CW Caseworker

“Finally having SSP’s [Family Partners] in the community is huge. It really enables families to stick together and work together.”
CW Caseworker



Tina Temple, *Safe at Home* Program Manager

Family Faith and Relationship Advocates (FARA)

The experience of working with FARA has been a positive one. The preexisting relationship that FARA has with ODHS and the Douglas County helper community made FARA the perfect implementation site for S@H. FARA's goal to create safe environments for children to thrive aligns perfectly with the goal of S@H. Robert Miller, the Executive Director of FARA, has been gracious, open, helpful, and kind during the implementation of S@H, providing valuable insight on how to be successful, open to discussing challenges or problems, and being proactive in finding solutions while empowering me to guide the S@H program.

S@H has been successful at reuniting families and ensuring a safe environment for children. In doing so, these families experience more support and increased personal and familial resilience to serve them in the future. As the S@H Program Manager, I have witnessed families try and succeed, as well as try and show the need for additional support or services before they can be successful at reaching ODHS case closure. I am very proud of the impact being made in Douglas, one family at a time. Families have expressed immense gratitude for having options and the ability to turn to the community for necessary [safety] checks that allow their children to come home.

The specific benefits for children and parents when they can remain together while working on issues are profound. Children staying with their families provides emotional stability, a sense of security, and continuity in their daily lives. It helps them maintain their routines, friendships, and school environment, which are crucial for their development and well-being. Parents having their children at home while working on their issues fosters a sense of responsibility and motivation to improve their situation. It allows them to directly apply the skills and strategies they are learning in a real-life context, which can lead to more sustainable changes. Improved outcomes are consistently shown when families remain together, as it strengthens family bonds and promotes a supportive environment for growth and healing. S@H Family Partners recognize the benefits that families get by remaining together. They see it daily when they enter family homes, where parents can greet their children and talk to them about their schoolwork, or what they did that day. These everyday

interactions are CHERISHED by parents who have previously been separated. S@H is making it possible for families to share these memories during a most precarious time in their lives.

S@H has made a significant impact in its first year. While there are challenges to address, the strengths and successes of the program provide a solid foundation for future growth and improvement. With additional resources and support, we are confident that Safe at Home can continue to make a positive difference in the lives of many more families.



Desta Walsh, ODHS District 6 Manager

Oregon Department of Human Services (ODHS) Child Welfare (CW)

With the help of CP3, Douglas County Child Welfare identified a need for volunteer safety service providers to support in-home safety plans in cases where the family lacks natural supports. Following the model established first in Marion County, we approached FARA about the possibility of serving this role. As they always are, FARA was quick to respond with excitement and enthusiasm to learn from the provider in Marion County, hire a Program Manager, and begin recruiting volunteers while designing the program with ODHS. The identification and onboarding of volunteers was faster than anticipated, and the service has been received with gratitude from ODHS, partners, and most importantly the families. FARA and ODHS work together to match the right Family Partners with the right families to provide the support needed to allow children to be safe at home with their parent(s), neighbors, schools, and friends. The model also provides a great opportunity for parents to build relationships with volunteers in the community that might continue to benefit them beyond the span of an open ODHS case.

CONCLUSION

Summary Assessment

S@H has made a significant impact in its first year, demonstrating the program's viability and transferability (replication), in alignment with its intended vision, goals, and stakeholder needs. Program data and experiential evidence suggests that the planned interventions within the S@H program are leading to the desired outcomes of enabling family reunification and preservation and achieving long-term impact. It also emphasizes the ongoing development and adaptation of the program, and highlights program strengths and successes, as well as areas for growth, such as enhanced coordination, and resource availability. The program's flexibility, collaboration, high-quality interventions, and family-centered approach are highly valued by all program participants.

Future of S@H Douglas

Moving forward, continuous improvement in communication and coordination, staff training, resource availability (more FPs with diverse backgrounds), and incorporating family voices and diverse lived experiences, is essential for enhancing service delivery and ensuring that the program continues to meet the evolving needs of families.

S@H aims to secure funding for an additional 0.5 FTE, a paid Family Partner/Program Support person. This step would allow S@H to serve more families at a greater distance from the main office in Roseburg. Hiring this person would also ensure that the Family Partners and Program Manager have coverage available for in-home safety checks in case of illness or vacation.

Additionally, S@H plans to conduct lunch and learns in the Reedsport and Glide areas to find Family Partners in more areas of Douglas County. This will enable S@H to serve more families and facilitate more reunifications.

S@H's Program Manager will also begin facilitating the Trauma Recovery Empowerment model, called Empowerment Through Connection (ETC), in February 2025. This class is designed for women who have experienced trauma, abuse, or other types of disconnect and desire healing. Among the families served by S@H, many women have experienced abuse, trauma, or are victims of domestic violence. The ETC class provides them with a safe space for healing and growth alongside others traveling a similar journey, cultivating community connection, and promoting long-term stability.

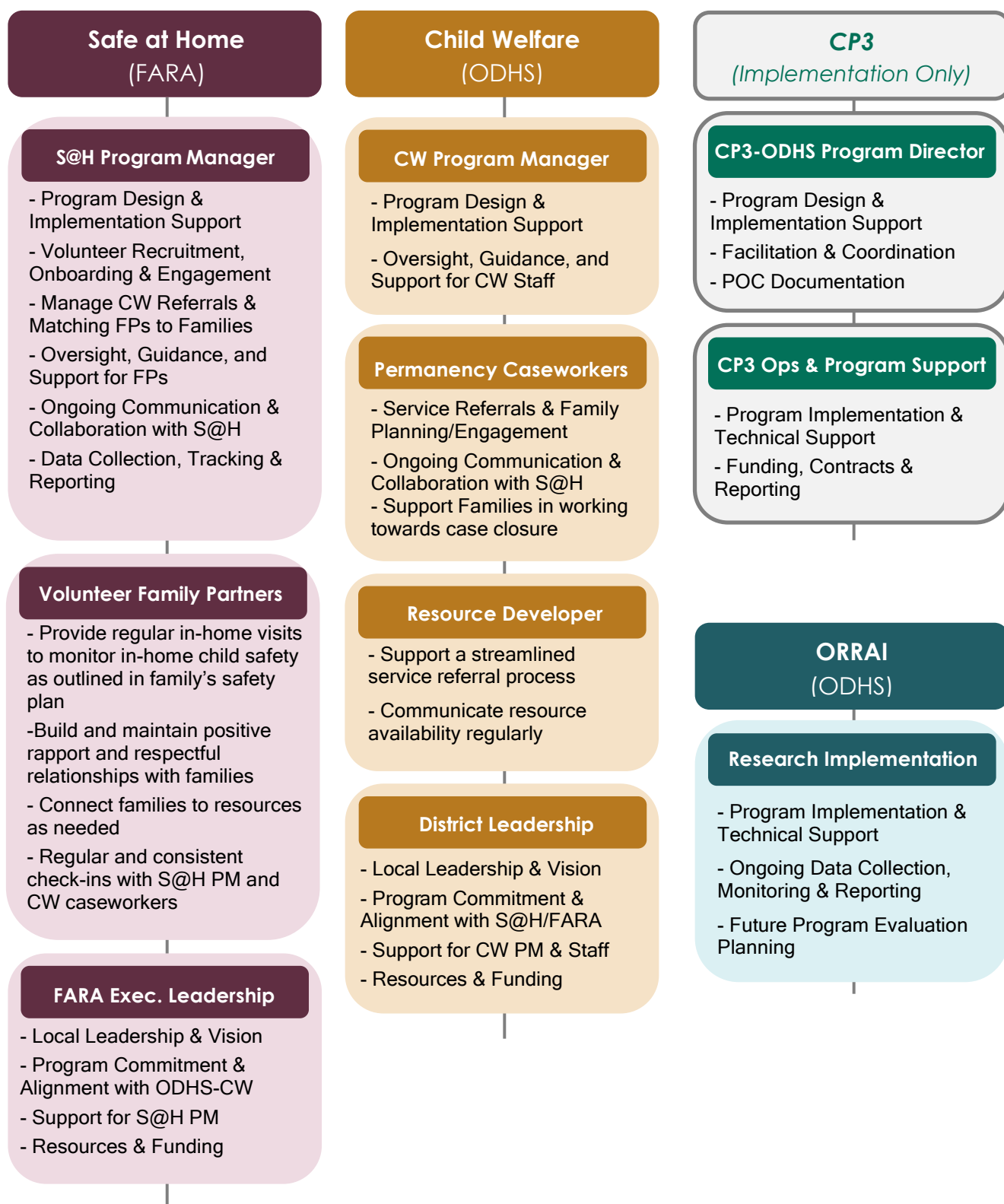
Recommendations

- Identify and secure long-term, sustainable ODHS/CW funding pathways to enable the S@H Program's continued expansion and evolution in Douglas County, advancing efforts towards full local ownership.
- Explore how CP3 and Douglas CW might replicate the S@H Program in Coos County, which is adjacent to Douglas, for greater widespread impact.

APPENDIX

- Essential Roles & Functions Chart
- Design Components, Activities & Output Table
- CW Program Referral Flyer

Safe at Home Essential Roles & Functions



Safe at Home Design Components, Activities & Outputs

Design Components	Activities & Outputs
Essential Roles & Functions	<ul style="list-style-type: none"> ✓ Establish shared program vision, values, and goals and strong collaboration and commitment from all partners ✓ Define essential roles and functions to support effective program design and implementation, service access and delivery (<i>Figure 1.1</i>)
Volunteer (FP) Recruitment Strategy	<ul style="list-style-type: none"> ✓ Develop a targeted recruitment strategy and outreach materials to attract a diverse group of volunteer FPs ✓ Collaborate with local media outlets, community centers, and schools to amplify the program's reach ✓ Establish a new volunteer background check process that considers lived experience and facilitates shared decision-making between S@H & ODHS-CW
Family Partner Training & Support	<ul style="list-style-type: none"> ✓ Develop thorough training modules covering child safety, trauma-informed approach, trial reunification procedures, and collaboration with CW ✓ Create an intentional volunteer onboarding plan, management/supervision guidance, processes and tools ✓ Establish a robust support system for FPs, including regular check-ins, ongoing training opportunities, and helpline for immediate assistance
Service Referral, Access, & Delivery	<ul style="list-style-type: none"> ✓ Develop a clear and easy-to-follow service referral form and flowchart outlining the process from service referral to service delivery (<i>Figure 1.2</i>) ✓ Establish a careful matching process to pair FPs with families based on their needs ✓ Ensure that decision-making processes are Family-driven, Equity-centered, Trauma-informed, Strengths-based, and Culturally-responsive ✓ Develop an implementation plan and timeline to support program rollout (pilot)
Communication & Collaborative Interactions	<ul style="list-style-type: none"> ✓ Develop procedural guidance to support program understanding, outline key program components and processes, manage expectations, and maintain collaborative interactions between S@H and CW ✓ Establish clear communication channels and feedback loops between S@H and CW at all levels (leadership, staff, FP's, families, etc.)

	<ul style="list-style-type: none"> ✓ Develop shared messaging and communications planning to support and promote program rollout and ongoing program understanding and service engagement
Data Collection & Monitoring Outcomes	<ul style="list-style-type: none"> ✓ Define shared success indicators, metrics, and outcome measures (<i>Table 1.3</i>) ✓ Established a data collection strategy and reporting tools for tracking progress/impact, outcome monitoring and evaluation related to implementation ✓ Setup regular check-ins to share program updates, communicate strengths, barriers, challenges and goals ✓ Provide ongoing technical assistance, case-specific consultation, and participant support

Helping Families Reunite

The *Safe at Home* program utilizes Family Partners to support in-home child safety for CW-involved families



safe at home
FAMILY PARTNERS

Service Description

- Family Partners are volunteers that serve as Safety Service Providers to help families meet the conditions necessary to implement an in-home plan.
- Family Partners help monitor in-home child safety and support the family as they work to achieve successful reunification and case closure.
- Family Partners are matched with families based on family needs and the ability to fulfill case plan requirements.
- Family Partners are approved through ODHS background checks, completed mandatory training, considered lived experience, and willingness to collaborate and maintain communication with family caseworkers.

Service Eligibility

- Family must be on a Reunification plan and within 30-60 days from implementing an in-home plan (to allow adequate time for family eligibility and matching process)
- All conditions for return with the exception of Safety Service Providers must be met (or will be met within the 30-60-day timeframe)
- Safety service provider needs must not require 24/7 supervision
- Caseworker and family have made efforts to identify natural supports to meet safety service provider needs



hub inc.

Referral Process

WEEK 1

Family's caseworker submits Referral form (with signed ROI) and family's In-Home Safety Plan to Marion Resource Developer

Marion Resource Developer confirms eligibility and submits family's referral to S@H's Program Manager

WEEK 2

S@H's Program Manager reviews referral to determine a possible Family Partner match

S@H's Program Manager will contact the family's caseworker directly with whether or not there is a Family Partner match

WEEK 3

If there is a match, S@H's Program Manager and family's caseworker will schedule an introductory meeting with the family and Family Partner

v1. Nov-2023