

Regional Funding

Fiscal Year 2021 - Partner Funding Application

Safe Harbor Child Advocacy Center

Agency Information

General Information

Agency Name Safe Harbor Child Advocacy Center
Physical Address 305 Hanson Avenue, Suite 180, Fredericksburg, VA, 22401, U.S.A.
Mailing Address PO Box 56, Fredericksburg, VA 22404
Agency Phone Number (540) 891-6280
Federal Tax ID # 261563081
Web Address <http://www.safeharborva.org>
Agency Email Address elizabethmcnally@safeharborva.org

Agency Mission Statement

Safe Harbor's mission is to reduce the trauma to child victims of abuse by coordinating and strengthening the community response.

Number of Years in Operation 11

Main Contact

Main Contact Elizabeth McNally, phone: (540) 891-6280, email: elizabethmcnally@safeharborva.org

Job Title Executive Director

Localities Served

Please select any/all localities your agency serves.

Caroline
Fredericksburg
King George
Spotsylvania
Stafford

Collaborative Impact

Describe in detail how the community would be impacted if your agency were dissolved or merged with another partner agency.

Safe Harbor Child Advocacy Center (SHCAC) exists to ensure the abused children in our service area are not re-traumatized following their initial outcry of abuse. SHCAC provides a child-focused, safe environment in which a neutral, legally sound (forensic) interview may take place, and provides victim support and advocacy—including free mental health services—to support children's healing. Support services are also available for non-offending caregivers.

Empirical evidence demonstrates that communities with child advocacy centers (CACs) have greater law enforcement involvement in child sexual abuse investigations and greater incidence of coordinated investigations. Wolfeich and Loggins found that organizations with multidisciplinary teams (MDTs) were associated with higher frequency of substantiated abuse than the traditional child protection model that does not facilitate an MDT. By coordinating the investigation and combining the available evidence on the child's case, the MDT helps build a complete picture of the abuse. This type of coordination ultimately results in offenders being held accountable, reduction of duplication in both effort and cost, and most importantly, improved outcomes for youth and the community.

CACs are critical to healthy communities. CACs help victims avoid the economic cost of abuse—estimated to otherwise be \$212,000 over the lifetime of a child victim—therefore not only improving outcomes for the child, but for the community at large.

Our work supports the mission of the Community Collaborative to "help to cultivate a thriving community through an inclusive collaborative in which youth and families acquire the foundation to be stable and successful." SHCAC's services directly support the following outcomes identified by the Collaborative in the Common Plan: family support, other adult relationships, community values children and youth, role models, resistance skills, and peaceful conflict resolution.

Community Impact

Please provide at least 2 examples of how your services have impacted members of our community.

Example 1

Zoe* was referred to SHCAC for a forensic interview in early 2019. At just twelve years old, Zoe reported to her father that her stepbrother had sexually abused her on multiple occasions while she was visiting her mother. Because she did not reside with her father full time, Zoe's father did not witness some of her emotional and behavioral symptoms such as anxiety, flashbacks of the incident, and difficulty sleeping. But Zoe's father was supportive of her from the time of her outcry forward—an essential element to a child's ability to heal. Through her father's support and the guidance of child welfare professionals, Zoe's safety was established and protected by ceasing visits with her mother while an investigation took place.

The multidisciplinary team (MDT) provided a coordinated response to Zoe and her father not only on the day of the forensic interview, but throughout the legal and therapeutic processes. After her interview, Zoe was quickly connected to free, trauma-focused cognitive behavioral therapy (TF-CBT) and consistently attended sessions. With access to therapy in the CAC setting (a setting already known to and trusted by Zoe), Zoe was provided the benefit of an evidence-based treatment that helped her address the negative effects of trauma while developing effective coping and interpersonal skills. It also included a treatment component for her father (who was not abusive).

The CAC maintained contact with Zoe and her father throughout the legal process—ultimately, the case was successfully adjudicated, and the perpetrator held accountable. Zoe and her father are healing—they work together with the therapist to continue eliminating Zoe's triggers and process the abuse at her pace. Most importantly, even when her father doesn't understand what Zoe's feeling, he's always there for his daughter. With such deep caring and support, Zoe is expected to complete therapy successfully soon.

*name changed for confidentiality purposes

Example 2

During FY2019, trauma-focused cognitive behavioral therapy (TF-CBT) services were initiated for 58 children served by Safe Harbor who met the criteria established by the Rappahannock Area Community Services Board (Safe Harbor's partner provider of therapy services). TF-CBT is a 12-16 week course of treatment delivered in a newly opened child-focused facility provided by Safe Harbor. On 6/30/2019, 32 of those 58 children were still participating in therapy and twenty-four (24) children completed therapy successfully.

TF-CBT seeks to address and deregulate symptoms in five domains: (1) affective, for example, anxiety, sadness, anger; (2) behavioral, for example, avoidance of trauma reminders, self-injurious behaviors, maladaptive behaviors modeled during trauma (e.g., sexual behaviors, bullying, aggression); (3) biological, such as hypervigilance, poor sleep, increased startle response, and somatic problems that interfere with functioning; (4) cognitive/perceptual, for example, intrusive trauma-related thoughts and memories; maladaptive trauma-related beliefs, dissociation, psychotic symptoms, cognitive dysregulation; and (5) social/school: such as impaired relationships with family, friends, peers, social withdrawal, decline in school concentration, performance and/or attendance; impaired attachment and/or trust.

To assess a child victim's reactions to trauma, the therapist administers the UCLA Post-traumatic Stress Index. This test has been used across a variety of trauma types, age ranges, settings, and cultures. Of the 24 children who completed therapy successfully, all 24 reduced their Post-traumatic Stress Disorder (PTSD) Index score substantially—the average score reduction was 52%.

Example 3 (Optional)

Six-year-old Isaiah* and his eleven-year-old sister, Maggie*, were brought to Safe Harbor after an outcry of sexual abuse perpetrated by Isaiah's biological father who was the step-father to Maggie. The children were provided forensic interviews at the CAC and were then referred to clinical mental health services in their home locality, however, two months later their mother contacted Safe Harbor to request clinical services as she was not pleased with her current provider.

Because Safe Harbor offers free therapy services for children until they are age eighteen, the program was able to accommodate the mother's request. A very supportive caregiver, the children's mother was willing and able to make the one-hour drive into Fredericksburg in order to access services. Trauma-focused cognitive behavioral therapy was offered, and the children attended regularly for several months. As a result of participating in therapy, both children were assisted in managing strong emotions and triggers related to their unique issues surrounding the abuse, processing feelings of guilt and shame, and addressing their anger and frustration. The therapist provided support to their mother as well as she was experiencing loss. Both children successfully completed treatment. Supportive services were also provided by the therapist who assisted the children with both court testimony at the preliminary hearing and with victim impact statements.

The children's mother continues to periodically contact Safe Harbor staff and thank the team for their support in helping the family recover and move forward during an extremely challenging time in their lives.

*names changed for confidentiality purposes

Safe Harbor Child Advocacy Center

Agency Budget Narrative

Administrative Expenses

Provide an overview of the administrative costs for your agency.

Safe Harbor's administrative costs are low as the majority of the organization's budget is comprised of personnel and operating expenses associated with the delivery of direct program services. Safe Harbor's overhead ratio is well within that permitted by most government funders.

If your agency is requesting an increase or decrease in administrative funding, please describe in detail the reasons for these changes.

n/a

Please provide justification for and specific amounts of administrative costs that are defrayed by locality funds.

At the time of application, the amounts of and justification for administrative costs are not historically recorded as being expended by specific revenue sources. General expenses that are not grant-specific are offset by the collective of fundraising net revenue, donations not earmarked for operations, and local government grants.

Capital Expenses

Please provide an overview of the capital costs for your agency.

At the time of this application, Safe Harbor does not anticipate capital costs in FY2021.

Please provide justification for and specific amounts of capital costs that are defrayed by locality funds.

At the time of this application, we do not anticipate capital costs in the upcoming fiscal year that will need to be defrayed by locality funds.

Salary & Benefit Expenses

Please provide an overview of any increases or decreases in general personnel expenses for your agency.

The agency's FY2020 budget included increased expenses related to the addition of 1.5 full time equivalent employees. The expenses for these positions are covered by the agency's Virginia Department of Social Services grant. It is anticipated that these two positions will be carried forward into the FY2021 budget.

Other increases to salary included COLA and merit increases in FY2020 also projected for FY2021.

Please provide a description of any changes to agency benefits structure or cost.

In September 2019, Safe Harbor initiated a group health insurance benefit for its employees. Safe Harbor pays a portion of the premium for each employee enrolled in the plan. In previous years, each employee was provided a monthly stipend to offset the cost of purchasing health insurance on the market.

Overall, the cost of benefits increased in FY2020 and is projected to again in FY2021. The FY2020 increase was due to additional positions being added to the budget. The FY2021 projected increase is based on anticipated increase in the premiums with a resulting slight increase in the portion that Safe Harbor will pay per employee.

Budget Issues

Provide any legislative initiatives or issues that may impact the agency for the upcoming year.

The state legislative calendar is, as always, full and it is unclear how the funding for the support of child abuse victims and their service agencies will be impacted. The Executive branch of the Federal government, and some decisions early in the administration, leave victims and service providers alike uncertain about future federal funding. At the state level, Children's Advocacy Centers of Virginia continues to coordinate efforts for Safe Harbor to participate in an advocacy event to educate state leaders on the need for continued funding.

If you are aware of "outside" funding sources that will expire or be reduced on a set cycle or date, please note those below and how you are planning for them.

SHCAC's grant funding is on a set cycle which staff administer closely with the leadership of the respective funding sources.

Please detail any identified agency needs or areas of concern that are currently not being addressed in your funding request.

The Safe Harbor Board of Directors has established a Long Term Expense fund with the FY2019 budget. The purposes of the fund are to (a) set aside a minimum of six months operating costs (approximately \$283,000 in FY2020), and (b) set aside funds to support strategic goals. After its annual audit is complete the Board will vote to transfer surplus funds from FY2019 out of its operating account into the Long Term Expense fund account.

Support for fundraising development continues to be a goal as we are seeking to create a robust strategic fundraising plan.

Safe Harbor Child Advocacy Center

Agency Total Budget

In the boxes below provide an overview of the administrative costs associated with your total agency budget.

Expenses

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Salary			218,820.00	281,195.00	289,630.85
Benefits			23,021.60	46,629.67	48,028.56
Operating Expenses			159,086.99	236,198.70	243,284.66
Capital Expenses			0.00	0.00	0.00
Other Expenses			0.00	0.00	0.00
Total	0.00	0.00	400,928.59	564,023.37	580,944.07

Revenues

Please include revenue associated with your entire organization. This section represents the TOTAL revenue your organization is receiving. The revenue associated with specific programs will be listed within your program budgets; this section represents total revenues. (For example if your organization requests funding for multiple programs the total amount requested from each locality or other entities goes within this section)

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Caroline			1,050.00	1,050.00	1,100.00
Fredericksburg			5,000.00	5,000.00	5,200.00
King George			3,075.00	3,075.00	3,200.00
Spotsylvania			7,150.00	7,365.00	7,600.00
Stafford			3,000.00	3,090.00	3,200.00
United Way			74,250.00	69,750.00	72,000.00
Grants			14,000.00	18,500.00	19,055.00
Client Fees			0.00	0.00	0.00
Fundraising			77,512.50	72,512.00	74,397.26
Other (Click to itemize)	0.00	0.00	215,891.09	383,681.37	395,191.81
Total	0.00	0.00	400,928.59	564,023.37	580,944.07

Surplus / Deficit

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

Safe Harbor Child Advocacy Center

Locality Information

Locality Notes

Please use the spaces below to provide any locality specific notes or statements that may be relevant to your application.

Caroline County

Fiscal year 2020 represents the tenth year that SHCAC has provided services not only to the abused children of Caroline County, but free trauma-focused mental health treatment services for those children and ongoing education, training, and support for Caroline County's multidisciplinary team.

During FY2019, Safe Harbor served twenty-three (23) victims whose cases originated in Caroline County. The cost per child in FY2019, not including mental health services, was \$1,438. We remain committed to the partnership with Caroline County so that together we may bring trust, healing, and justice to its most vulnerable child residents. Locality funding to support CACs should be considered as an extension of all efforts to maintain safe, stable communities. We are grateful for the support provided by Caroline County MDT members and leadership in FY2020.

City of Fredericksburg

Safe Harbor relocated to the City of Fredericksburg in August 2017 to a location that is central to the planning district service area, accessible to I-95, Route 1, and the local trauma center where forensic nurses are based.

During FY2019, Safe Harbor served sixty-nine (69) victims of abuse whose cases originated in the City of Fredericksburg. The cost per child in FY2019, not including mental health services, was \$1,438. Locality funding to support CACs should be considered as an extension of all efforts to maintain safe, stable communities. We are grateful for the financial support provided by City of Fredericksburg leadership in FY2020.

King George County

King George County continues to fully utilize Safe Harbor for essential coordination of services for the abused children of that county. Fully embracing the CAC model, MDT members from King George actively seek continuing education which in turn supports the achievement of positive results for abused children.

During FY2019, SHCAC served twenty (20) victims of abuse whose cases originated in King George County. The cost per child in FY2019, not including mental health services, was \$1,438. We hope that King George County government will resume its past support of Safe Harbor's services. Locality funding to support CACs should be considered as an extension of all efforts to maintain safe, stable communities.

Spotsylvania County

Although Safe Harbor relocated from Spotsylvania County to the City of Fredericksburg in August 2017, as a non-profit serving the community for nearly eleven years, we understood the need to continue stewarding the long-standing relationship that had been built and remain committed to a strong working relationship with the Spotsylvania multidisciplinary team in the future.

During FY2019, Safe Harbor served forty-five (45) victims of abuse whose cases originated in Spotsylvania County. The cost per child in FY2019 not including mental health services, was \$1,438. Locality funding to support CACs should be considered as an extension of all efforts to maintain safe, stable communities. We are grateful for the financial support provided by Spotsylvania County leadership in FY2020.

Stafford County

During FY2018, SHCAC served fifty-four (54) victims of abuse whose cases originated in Stafford County. The cost per child in FY2019, not including mental health services, was \$1,438. Locality funding to support CACs should be considered as an extension of all efforts to maintain safe, stable communities. We are grateful for the financial support provided by Stafford County leadership in FY2020.

Safe Harbor Child Advocacy Center - Safe Harbor Child Advocacy

Program Overview

You may save your work at any time by clicking on the "Save My Work" link/icon at the bottom or top of the page.

When you have completed all questions on the form, select the "Save My Work and Mark as Completed" link/icon at the bottom or top of this page.

You may also SWITCH between forms in this application by using the SWITCH FORMS feature in the upper right corner. When switching forms, any updates to the existing form will automatically be saved.

General Information

Program Name Safe Harbor Child Advocacy

Is this a new program? No

Program Contact

Name Elizabeth McNally

Title Executive Director

Email elizabethmcnally@safeharborva.org

Phone (540) 891-6280

Program Purpose / Description

Provide an overview of this program

Safe Harbor Child Advocacy Center is a nonprofit whose mission is to strengthen and coordinate the community's response to child abuse and neglect. Safe Harbor follows a nationally recognized, evidence-based model which had its origins in Huntsville, Alabama in the 1980s with the nation's first child advocacy Center.

Safe Harbor aims to lessen the trauma to child victims of abuse by coordinating and utilizing a multidisciplinary team (MDT) approach. Professionals from law enforcement, medical forensics, mental health, child protective services, prosecution, and victim advocacy come together to address and respond to the child's abuse. The MDT approach not only reduces trauma, but it is known to prevent further victimization of children as well.

Safe Harbor operates in a safe, child-focused setting. Services offered by Safe Harbor include case management, forensic interviewing, forensic medical examinations, support for non-offending caregivers, and trauma-focused therapy. SHCAC also provides development, coordination, and training for members of the MDTs of the five jurisdictions it serves.

Client Fees

Please describe the fees clients must pay for the services by this program.

There are no fees for any service provided to children or families at Safe Harbor.

Justification of Need

Please state clearly why this service should be provided to the citizens of the region and why the localities should consider this funding request.

According to the Virginia Department of Social Services, there were 55,255 Virginia children reported as possible victims of abuse or neglect in state fiscal year 2018. Kids Count reports that in 2017, the rate of founded cases of child abuse per 1,000 children was 1.7 - Caroline Co.; 6.9 - City of Fredericksburg; 0.9 - King George Co.; 2.5 - Spotsylvania Co.; and 0.7 - Stafford Co.

The investment by each locality in Safe Harbor's services has a profound, lasting impact as the child survivor pursues a healthy, productive future. The use of CACs and MDTs has resulted in increased successful prosecutions of child abuse perpetrators. In a study by Miller & Ruben comparing two districts of a large urban area over a period of 10 years, felony prosecutions of child sexual abuse doubled in the district in which the use of CACs remained constant.

Locality funding to support CACs should be considered as an extension of all efforts to maintain safe, stable communities.

If this is a new program, be sure to include the benefits to the region for funding a new request.

The program has successfully operated since 2008.

Target Audience and Service Delivery

Describe the program's intended audience or client base and how those clients are served.

Safe Harbor aims to serve children and adolescents age 0- 18 who are reported victims of sexual or physical abuse. Safe Harbor serves Planning District 16: the City of Fredericksburg, and the Counties of Caroline, King George, Spotsylvania, and Stafford; our child-focused facility is located in the City of Fredericksburg.

Members of the multidisciplinary team (MDT) begin the process by accepting the initial report of a child's outcry of abuse. Safe Harbor collaborates with MDT members to collect intake information and provides services based on the recommendation of the MDT. Services include forensic interview (ages 3-18), forensic medical exam (ages 0-18), victim advocacy/case management, and trauma-focused cognitive behavioral therapy (TF-CBT). Services continue, at no cost, until the child no longer needs them. Additionally, children may return to Safe Harbor to access services from the time of their forensic interview until their eighteenth birthday.

If your program has specific entry or application criteria, please describe it here.

Safe Harbor's services are initiated and provided at the request of locality MDTs.

Safe Harbor Child Advocacy Center - Safe Harbor Child Advocacy

Program Budget Narrative

Please indicate in detail reasons for increases or decreases in the amounts you are requesting.

A nominal increase in locality funding requests is due to (1) corresponding increases in the number of children projected to be served for each locality, and (2) to maintain pace with the cost of doing business.

*Please note that an error was made in previous year reporting: During FY2017, King George County awarded SHCAC \$3,000; King George Sheriff's Office awarded \$1,500. During FY2018, funds were not awarded by King George County, however, the CAC received funding from the Sheriff's Office (\$1,500).

If an increase is being requested, please describe the impact not receiving an increase would have on the program.

If an increase is not awarded, or a partial increase is awarded, the result will be that staff will be required to spend additional time and resources to raise needed funds.

In particular, please describe in detail if any increase is sought for new positions or personnel.

As previously stated, the 1.5 FTEs added to the FY2020 budget are currently reimbursable to Safe Harbor's Victims of Child Abuse (VOCA) grant.

Safe Harbor Child Advocacy Center - Safe Harbor Child Advocacy

Program Specific Budget

Please provide your program specific budget below.

Expenses

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Personnel	131,156.91	179,720.10	238,776.38	281,195.00	289,630.85
Benefits	14,701.27	2,969.50	3,065.22	46,629.28	48,028.56
Operating Expenses	179,937.23	135,163.68	159,086.99	236,199.09	243,284.66
Capital Expenses	0.00	0.00	0.00	0.00	0.00
Total	325,795.41	317,853.28	400,928.59	564,023.37	580,944.07

Revenues

This section represents revenue specifically associated with your program. Revenue that supports the implementation of your program and the services provided to the community.

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Caroline	0.00	1,000.00	1,050.00	1,050.00	1,100.00
Fredericksburg	5,000.00	5,000.00	5,000.00	5,000.00	5,200.00
King George	3,000.00	1,500.00	1,575.00	1,575.00	1,700.00
Spotsylvania	7,000.00	7,000.00	7,150.00	7,365.00	7,600.00
Stafford	4,750.00	3,000.00	3,000.00	3,090.00	3,200.00
United Way	69,453.10	72,550.64	74,250.00	69,750.00	72,000.00
Grants	122,119.17	209,986.87	175,346.09	0.00	0.00
Client Fees	0.00	0.00	0.00	0.00	0.00
Fundraising	54,797.92	90,511.26	77,512.50	72,512.00	73,832.26
Other (Click to itemize)	51,190.45	69,615.59	56,045.00	403,681.37	416,311.81
Foundation & Trust Grants	2,000.00	2,000.00	2,000.00	12,000.00	12,000.00
Church Donations	877.45	0.00	500.00	500.00	515.00
Individual & Business Contributions	35,690.96	22,096.55	28,000.00	28,000.00	28,840.00
Gifts in Kind	11,712.45	26,560.58	10,000.00	15,000.00	15,540.00
Investments	69.48	178.03	100.00	100.00	103.00

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Other types of income	840.11	13,205.18	1,945.00	0.00	0.00
NonProfit Organization Grants		0.00	5,000.00	0.00	0.00
NCA Grant		4,075.25	7,000.00	6,500.00	6,500.00
KG County Sheriff's Department		1,500.00	1,500.00	1,500.00	1,500.00
Courtesy Forensic Interview Income		0.00	0.00	0.00	0.00
Virginia Department of Social Services				340,081.37	351,313.81
Total	317,310.64	460,164.36	400,928.59	564,023.37	580,944.07

Surplus / Deficit

	FY 2017 Actual	FY 2018 Actual	FY 2019 Budgeted	FY 2020 Budgeted	FY 2021
Surplus or Deficit	-8,484.77	142,311.08	0.00	0.00	0.00

[View Diagram](#) Goals and Objectives

Goals

Goal:

Safe Harbor services will be utilized by local multidisciplinary teams from each jurisdiction to investigate cases of suspected abuse and neglect.

Objectives

Objectives		2017 Year End	2018 Baseline	2018 Year End	2019 Baseline	2019 Year End	2020 Baseline
Safe Harbor will provide the resources to conduct a minimum of 190 forensic interviews, medical evaluations, and consults.	Total # Clients Served	237	262	229	255		300
	Total # Clients Achieved/Successful	237	262	229	255		300
	% Achieved / Successful	100	100	100	100	0	100
100% of forensic interviews at Safe Harbor are conducted by an individual trained in the ChildFirst model of forensic interviewing.	Total # Clients Served	237	262	229	255		300
	Total # Clients Achieved/Successful	237	262	229	255		300
	% Achieved / Successful	100	100	100	100	0	100

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

Recognizing there are multiple acceptable protocols for child forensic interviewing, Safe Harbor will broaden our objective to include those additional protocols.

If you are restating the goals or objectives for the prior calendar year, please include those here

100% of forensic interviews at Safe Harbor are conducted by an individual trained in an accepted child forensic interviewing protocol such as ChildFirst, NCAC, Cornerhouse, etc.

Goal:

Child victims of alleged child abuse have immediate needs addressed onsite in a coordinated, comprehensive, child-focused, safe and protected environment.

Objectives		2017 Year End	2018 Baseline	2018 Year End	2019 Baseline	2019 Year End	2020 Baseline
Family needs assessments will be conducted with 225 families.	Total # Clients Served	237	250	229	225		225
	Total # Clients Achieved/Successful	237	250	229	220		225
	% Achieved / Successful	100	100	100	97.78	0	100
Child victims of alleged abuse return for ongoing mental health and support services to address the impact of traumatic events.	Total # Clients Served	48	55	71	55		75
	Total # Clients Achieved/Successful	15	42	32	44		35
	% Achieved / Successful	31.25	76.36	45.07	80	0	46.67
To be eligible for therapy at SHCAC, there must be a disclosure of abuse during the forensic interview and a subsequent score of 25+ on the UCLA Post Traumatic Stress Scale (exceptions may be made by the MDT on a case-by-case basis to provide therapy for children who score lower).							

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

TF-CBT is offered to all children who have made a disclosure of abuse and have the verbal and cognitive capacities to participate in this treatment modality. In 2018, SH initially projected that 55 children would participate in TF-CBT, however, services were opened to 71 children—nearly a 23% increase over original projections.

At the end of the reporting period, 31 of those children were still participating in TF-CBT, 8 cases were discharged from therapy due to non-compliance, and the remaining 32 cases completed therapy successfully. Calculating a success rate from the number of children who had an opportunity to complete therapy within the period, we arrive at an 80% success rate (32 completions + 8 discharges / 40 total cases).

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

We anticipate the number of TF-CBT participants to increase due to multiple factors, however, we will continue to measure success based on the number of children who could have completed therapy (i.e. were not in the midst of their 12-16 week course of therapy) at the year end locality reporting interval.

We have adjusted the total number of Family Assessments for FY 2021 to reflect the practice of conducting one family assessment per household (multiple children from a household may receive a forensic interview, however, only one assessment is conducted with the family).

If you are restating the goals or objectives for the prior calendar year, please include those here

Safe Harbor Child Advocacy Center - Safe Harbor Child Advocacy

Number of Individuals Served

Localities

Please provide the actual numbers of individuals served in this program during FY2017, FY2018, and FY 2019, the estimated numbers of individuals served in FY2020 and the projected numbers of individuals served in FY2021.

Locality	FY2017 (Actual)	FY2018 (Actual)	FY 2019 (Actual)	FY 2020 Estimate	FY 2021 Projected
Fredericksburg City	31	25	65	70	80
Caroline County	29	12	21	30	35
King George County	14	14	19	23	28
Spotsylvania County	74	61	36	57	70
Stafford County	54	56	51	65	75
Other Localities	35	56	46	55	60
Total	237	224	238	300	348

Safe Harbor Child Advocacy Center - Safe Harbor Child Advocacy

Collaborative Impact

Efforts and Partnerships

Describe in detail examples of collaborative efforts and key partnerships between your program and the other programs or agencies in the area.

SHCAC has well-established formal partnerships with Mary Washington Healthcare (MWHC) and the Rappahannock Area Community Services Board (RACSB) which enable the organization to achieve its mission.

MWHC provides Forensic Nurse Examiners (FNEs) to perform free medical consultation and forensic medical exams for child victims. Nurses have access to a child-focused examination room and state-of-the-art equipment at SHCAC.

RACSB is SHCAC's key partner for free, onsite TF-CBT. Children who are forensically interviewed at Safe Harbor remain eligible for therapy at any point in time after their disclosure until the age of eighteen.

SHCAC maintains inter-agency collaborative agreements with the City of Fredericksburg, Counties of Caroline, King George, Spotsylvania, and Stafford as their dedicated personnel form our multidisciplinary teams comprised of Law Enforcement, Department of Social Services (Child Protective Services) Commonwealth's Attorney, and Victim Witness.

Collaborative Impact

Describe in detail how the community would be impacted if your program were dissolved or merged with another partner agency.

SHCAC is the only child advocacy center in this region of Virginia. Multiple pervasive and negative impacts would occur with the loss of SHCAC: (1) a delay for child victims receiving or total lack of availability of medical, therapeutic, or support services, (2) the loss of coordinated and comprehensive services, (3) the loss of training paid by SHCAC for government and public professionals who comprise MDTs; and (5) the loss of a cost saving of more than \$1,300 per case when approached using best practices through a CAC as compared to the traditional approach.

As described in our agency collaborative statement, data exists which demonstrates that communities with CACs have dramatic improvement in felony prosecution of child abuse as well as faster case processing time. Because SHCAC exists, healing, trust, and justice are the outcomes for abused children in our service area.