

**2006 West Virginia
YOUTH SERVICES ANNUAL REPORT**

**West Virginia
Department of Health and Human Resources**

Martha Yeager Walker, Secretary

**Bureau for Children and Families
John J. Najmulski, Commissioner**

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INTRODUCTION

“The Department of Health and Human Resources shall from time to time, but not less than annually, review its programs and services and submit a report to the Governor, the Legislature and the Supreme Court of Appeals, analyzing and evaluating the effectiveness of the programs and services being carried out by the department.”

West Virginia State Code 49-5B-7(a)

The Youth Services Annual Report is published by the Department of Health and Human Resources, consistent with the state statute. Through this mechanism, the Department continues its commitment to:

“...establish, maintain, and continuously refine and develop, a balanced and comprehensive state program for juveniles who are potentially delinquent or are status offenders or juvenile delinquents in the care or custody of the department.”

West Virginia State Code 49-5B-2

2006
YOUTH SERVICES
ANNUAL REPORT

YOUTH SERVICES ANNUAL REPORT

Youth Services is a program provided by the Department of Health and Human Resources in conjunction with the courts and other helping agencies throughout the state. The programs and services designed to prevent juvenile delinquency, to divert juveniles from the juvenile justice system, to provide community-based alternatives to juvenile detention and correctional facilities and to encourage a diversity of alternatives within the child welfare and juvenile justice system. Youth Services addresses those instances involving youthful offenders whose behavior impacts negatively on their lives, their families, and their communities.

In 1997, §49-5E-2, created the Division of Juvenile Services within the Department of Military Affairs and Public Safety. The division was to assume responsibility for operating and maintaining the pre-dispositional detention centers as well as the juvenile correctional facilities. It was also to work cooperatively with the Department of Health and Human Resources in the planning and development of programs and services to prevent and/or reduce juvenile offenses.

Also in 1997, §49-7-30, established a procedure for summary review of certain facilities or services in lieu of the certificate of need review process. Through this summary review process, the expansion of necessary services could occur more quickly. The Service Development Task Team, a subcommittee of the Commission to Study Residential Placement of Children's Strategic Planning Committee, was committed to streamlining the process to allow those agencies willing to reconfigure their programs creatively and innovatively to do so without huge cost and time constraints if such configuration is not increasing beds. The Commission to Study Residential Placement of Children created a subcommittee that was challenged to review the current procedure for obtaining a Certificate of Need (CON) The committee, DHHR, Legislature, and providers, were challenged to propose the necessary changes to the process to allow agencies willing to reconfigure their programs creatively and innovatively to do so without huge cost and time constraints to their agencies if such configuration is not increasing beds. The Certificate of Need process has been streamlined and updated in the following manner:

- CON Charts were developed:
 - Summary Review
 - Provider Reconfiguration
 - CON process for proposal outside the Summary Review process
 - The new process and charts will be posted on the State's website for easy access.
 - Made an electronic copy of the Health Care Authority documents for purpose of revision drafts.

- Recommendations for updated terminology are to be sent to the West Virginia Health Care Authority

Provision for the transfer of custody to the Department of Health and Human Resources of an alleged status offender being detained is covered by §49-5-8. Adjudicated status offenders are to be referred to DHHR for services. The statute redefines status offenses, clearly distinguishes the treatment of status offenses from the treatment of delinquency, and changes the adjudication and disposition for status offenses. Also revisions of definitions pertaining to the juvenile proceedings section of the state statute were made.

Youth Services Accomplishments for FY 2006

Reaching Every Child, a West Virginia Out-of-Home Care Education Task Force's preliminary report, was a result of the Alliance for Children's position paper, *The Education of Children in Out-of-Home Care (2004)*. State agency leadership represented on the Task Force used the report to address the issues and subsequent recommendations. The Task Force recognizes the critical importance of accountability across the entire system, for all agencies with responsibility for the out-of-home care child's educational achievements. The Task Force recommendations include:

- Close the education achievement gap for out-of-home children;
- Every out-of-home care child should have seamless, transparent and full access to public education anytime, anywhere in WV;
- Interdisciplinary team of practitioners and educators charged with assessment and investigation of out-of-home education;
- WV Collaborative Council of Out-of-Home Care Education should be established to carry out long term recommendations.

Five subcommittees have been established to assist in reviewing various data and information involving WV children in out of home care and their educational issues related to access to educational services, barriers to achievement, issues faced while in out of home care and how this affects education, support services to this population, and overall problems within the many systems that these children are involved with. The five subcommittees include: Policy Development and Advocacy; Data Development and Analysis; Educational Standards; Systems Development, Quality Processes & Technology; and Training and Development & Communication. The REC Task Force is formulating a status report and recommendations to present to the Board of Education.

The Department of Health and Human Resources developed a strategic plan in July 2004 that contained specific plans and time frames to reduce the reliance on out-of-state resources for our children and youth. The Two Year Plan "Reduction

of Dependence on Out-of-State Placement of Youth” Committee’s purpose was to develop a plan during the 2004 Legislative session that contained specific strategies and time frames for reducing the number of children placed out of state for treatment purposes. The executive committee established the following three subcommittees: Multi Disciplinary Team; Service Development Team: and Training Task Team.

The Commission to Study Residential Placements of Children was created out of legislation, House Bill 2334 on April 9th, 2005. Purpose of the committee was:

- To study the out-of-state placement of children;
- To establish a mechanism to achieve systemic reform;
- To make recommendations to Commission members respective agencies, and to the Legislature regarding funding and statutory, regulatory and policy changes;
- To build upon these recommendations to establish an integrated system of care for at-risk youth and families.

The Commission membership:

- Secretary of the Department of Health and Human Resources, Chair
- Commissioner of the Bureau for Children and Families
- Commissioner for Behavioral Health and Health Facilities
- Commissioner for the Bureau for Medical Services
- State Superintendent of Schools
- Director of the Office of Institutional Educational Programs
- Representatives of local educational agencies
- Director of the Office of Special Education Programs and Assurance
- Executive Director of the Prosecuting Attorney’s Institute
- WV Supreme Court of Appeals

The Commission’s responsibilities were to study:

- Current practices of placing children out of home and into residential placement;
- Adequacy, capacity, availability and utilization of existing in-state facilities;
- Strategies and methods to reduce the number of children placed in out-of-state placements;
- Staffing, facilitation and oversight of MDT planning teams;
- Availability of and investment in community-based alternatives.

In October 2006, the Strategic Planning Committee agreed to dissolve their Committee after either having met their original objectives or having their objectives met by the Commission to Study Residential Placement of Children. The workgroups will continue to meet the original objectives of the Strategic Planning Committee and the objectives of the Commission to Study Residential Placement of Children. The workgroups under the Commission to Study Residential Placement of Children are:

❖ **Multidisciplinary Treatment**

The workgroup, in collaboration with the Court Improvement Program Training Grant Committee, will be looking at ways to fully support the Multidisciplinary Treatment (MDT) team concept and enhance present MDT processes statewide.

❖ **Service Development & Delivery**

This workgroup will look at ways to develop and maintain accurate profile defined needs (clinical) of the targeted children in out-of-home care, both out-of-home and in-state; develop and implement an accurate assessment of current in-state licensed behavioral health agencies and individuals on capacity and program expansion/ reconfiguration capabilities; expand in-state residential and community-based capacity for out-of-home children through systematic and collaborative strategic planning; and ensure uniform system of care is in place statewide through best practices/ quality and accountability for all treatment of WV's out-of-home children.

This workgroup has recently developed a more simplified Certificate of Need (CON) process that is need-driven and includes all appropriate agencies in evaluation/approval activity.

❖ **Training Task Team**

This workgroup addresses workforce staffing and development needs to ensure capacity to fulfill demand and for clinical services for out-of-home children in West Virginia by developing and providing on-going training of all clinical staff across all service providers.

❖ **System of Care**

Implement the "System of Care" model statewide.

Ensure uniform system of care is in place statewide through best practices/ quality and accountability for all treatment of WV's out-of-home children.

❖ **Out of State Provider Certification**

Require out-of-state placements be made only to providers meeting West Virginia standards of licensure, certifications, and expected rules of operation.

❖ **Education**

Ensure all out-of-home children are receiving appropriately quality education in all settings, and provide a flexible funding model to support educational costs.

Ensure education standards are in place and students are fully receiving the appropriate education services in all out-of-state facilities where West Virginia children are placed.

Comprehensive Behavioral Health Commission

The WV legislation (HB 629) passed in 2006 resulted in the establishment of a Comprehensive Behavioral Health Commission to study and review the behavioral health care system of West Virginia. The Commission “shall study the current status of prevention, treatment, education, related services and appropriate workforce development for behavioral health, including substance abuse and domestic violence when those conditions have an effect upon the system. Each item studied shall be reported for children, adults and seniors. The report shall include recommendations on system changes needed to meet the needs of those served by the system and a determination of the total public and private dollars spent for each item listed in this section. The commission may coordinate its activities with those of the Department of Health and Human Resources and its consultants. The commission may appoint subcommittees and workgroups composed of consumers, providers and representative groups as it deems necessary to perform its duties and responsibilities pursuant to this article.” A preliminary report of the progress is to be submitted to the Governor and the Legislature by January 1, 2007 and a final report of recommendations by January 1, 2008. The Department of Health and Human Resources is to submit a report regarding the implementation of the recommendation to the Governor and the Legislature by July 1, 2008.

The Community Based Team (CBT) was a Statewide Pilot targeting the reunification/prevention of 100 kids from out-of-state placement. Each WV DHHR Region had an identified provider to coordinate the regional coordination. CBT is an intensive family reunification/preservation community based team approach to youth returning from out of state/special needs placements that required multi-agency involvement. CBT provided the collaboration of local community based providers willing to work together in the best interest of

children and families. The Statewide Pilot formerly concluded in June 2005 with future implementation and funding transitioning to socially necessary fee for service funding.

CBT work continued as providers collaborated to transition the CBT approach to Socially Necessary Services. The DHHR and CBT providers worked in partnership to create the UM Guidelines and Procedural codes necessary to roll CBT into Socially Necessary Services thus opening the service approach to a variety of credentialed providers statewide.

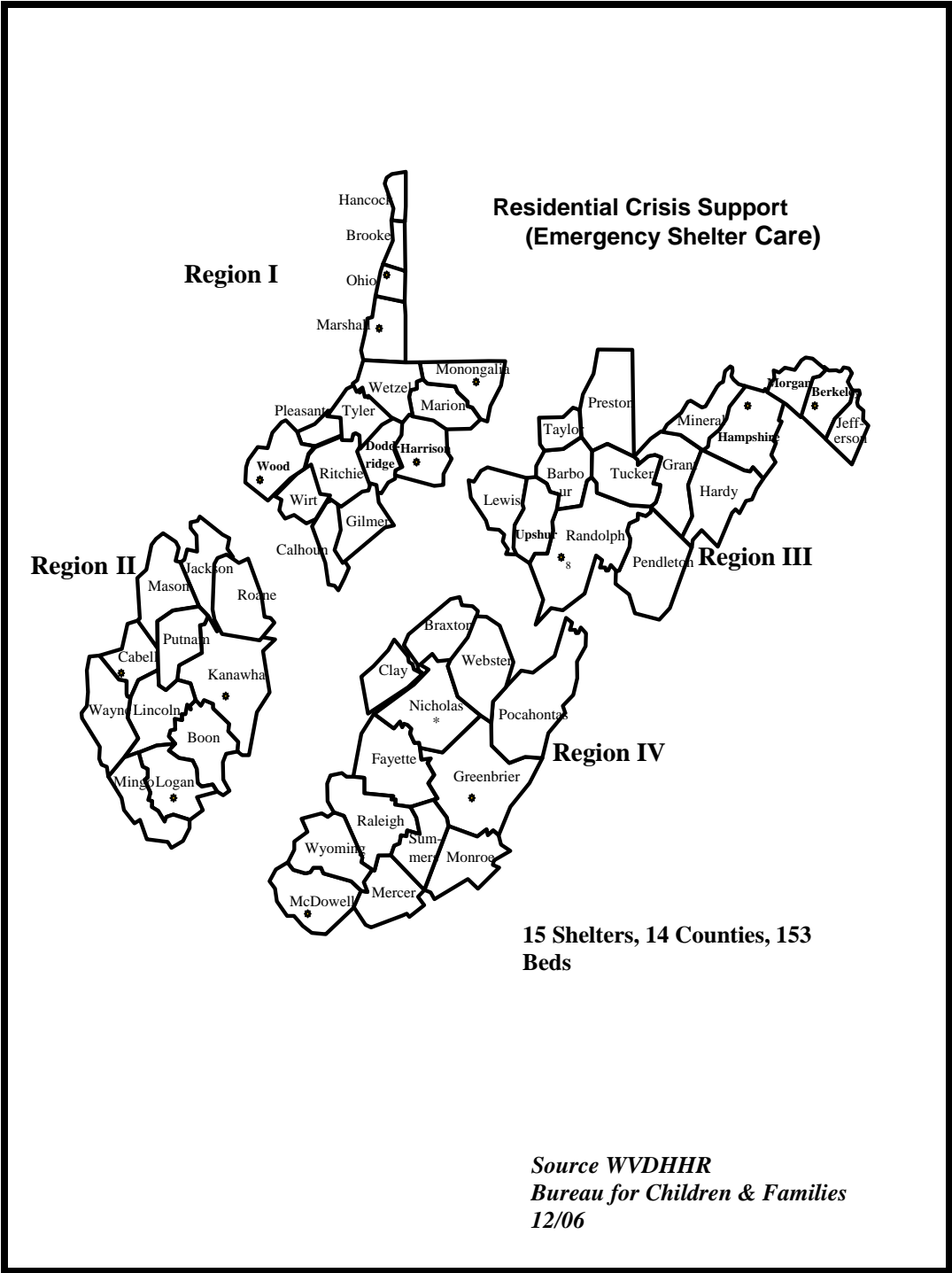
- Development of UM Guidelines specific to the CBT philosophy that will provide for a seamless transition statewide.
- A full round of CBT training will be initiated once the Socially Necessary Service is rolled out. Unused funds from the initial CBT Startup Grant will be used to cover training cost.
- In addition to collaboration with multiple providers, the Region II CBT collaborated with the existing Kids Care Project to identify children and youth in need of CBT services. This collaboration is laying the groundwork for the transition to the System of Care Regional Clinical Teams.
- The CBT, contracted to serve 20 youth in the DHHR Region II during the Pilot, has continued to facilitate services to 31 children and youth to-date.
- CBT Region II collaboration was reflective of participation by providers from every service level: prevention to most restrictive level of care.

EXHIBIT MAPS

DHHR FUNDED YOUTH

&

COMMUNITY SERVICES



**RESIDENTIAL CRISIS SUPPORT
(EMERGENCY SHELTER CARE)**

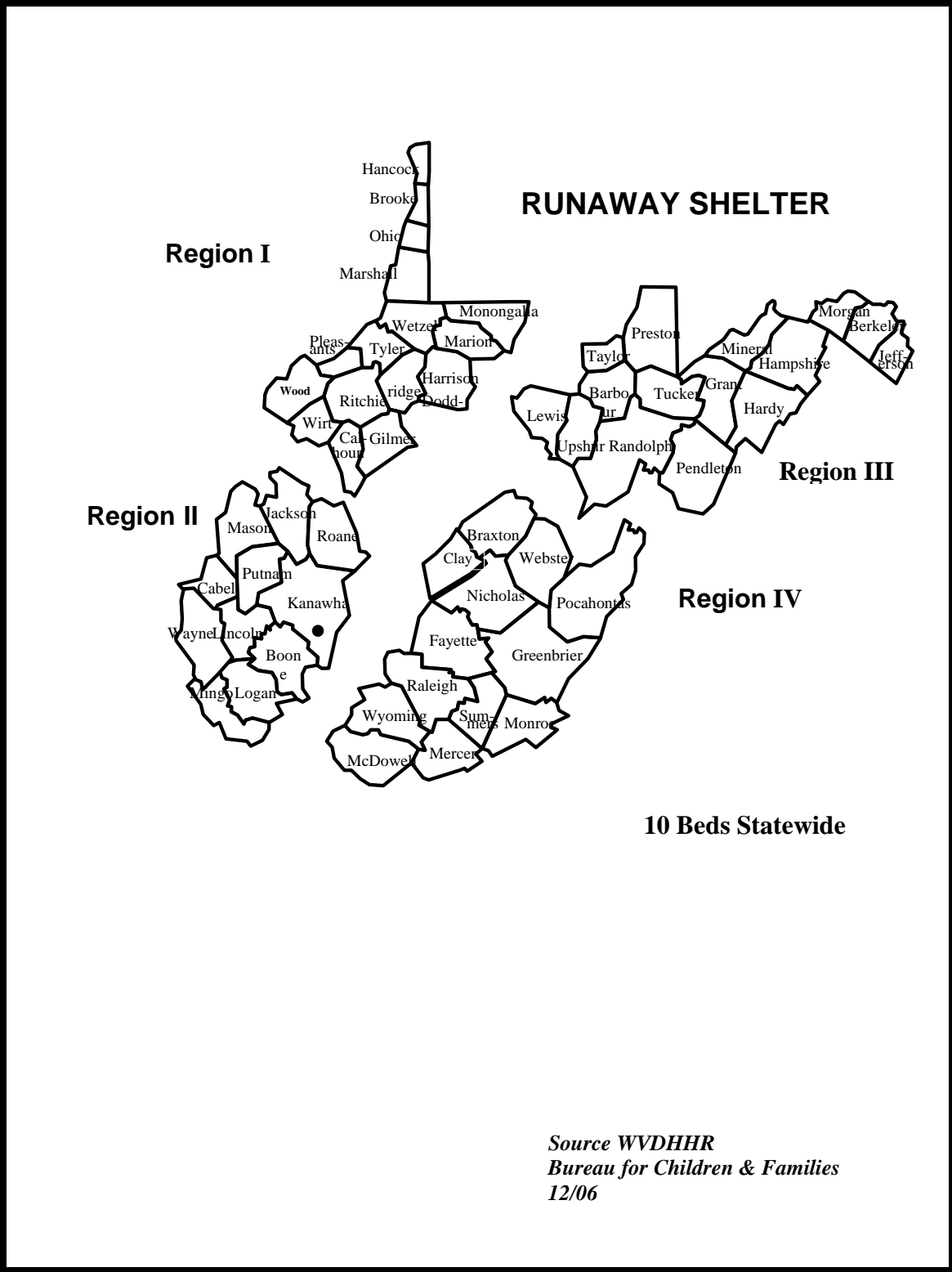
DEFINITION:

This Service provides short-term placement during a crisis situation. The purpose of this service is to provide a supportive environment designed to minimize stress and emotional instability which may have resulted from family dysfunction, transient situational disturbance, physical or emotional abuse, neglect, sexual abuse, loss of family or other support system or the abrupt removal of a child from a failed placement or other current living situation.

Services include: group/individual counseling, basic needs (food, clothing, and shelter), group/individual problem solving, medication administration, 24 hour awake staff and the availability of 1:1 staffing.

AGENCY	LOCATION/COUNTY
Children’s Home Society	Wood, Kanawha, Cabell, Logan, Berkley, Hampshire, Nicholas, Greenbrier, McDowell
Genesis	Harrison
Monongalia County Youth Services	Monongalia
Youth Service Systems, Inc.	Marshall, Ohio
Appalachian Community Health Center	Randolph

**There are 15 facilities with 153 beds located in the four regions of the state. During the most recent fiscal year (July1, 2005 – June 30, 2006) 1,104 Youth were authorized for crisis support in an emergency shelter.
(Information source APS Healthcare)**



RUNAWAY SHELTER

DEFINITION:

Runaway shelters provide short-term residential shelter for youth in crisis, with a primary focus on street youth who are at risk of being sexually abused or exploited. Youth are supported in a safe environment in which they can identify their situation, explore appropriate and available options, and work toward resolving a specific problems or conflict. These services are available 24 hours a day, 7 days a week. Services are voluntary, confidential and provided free of charge.

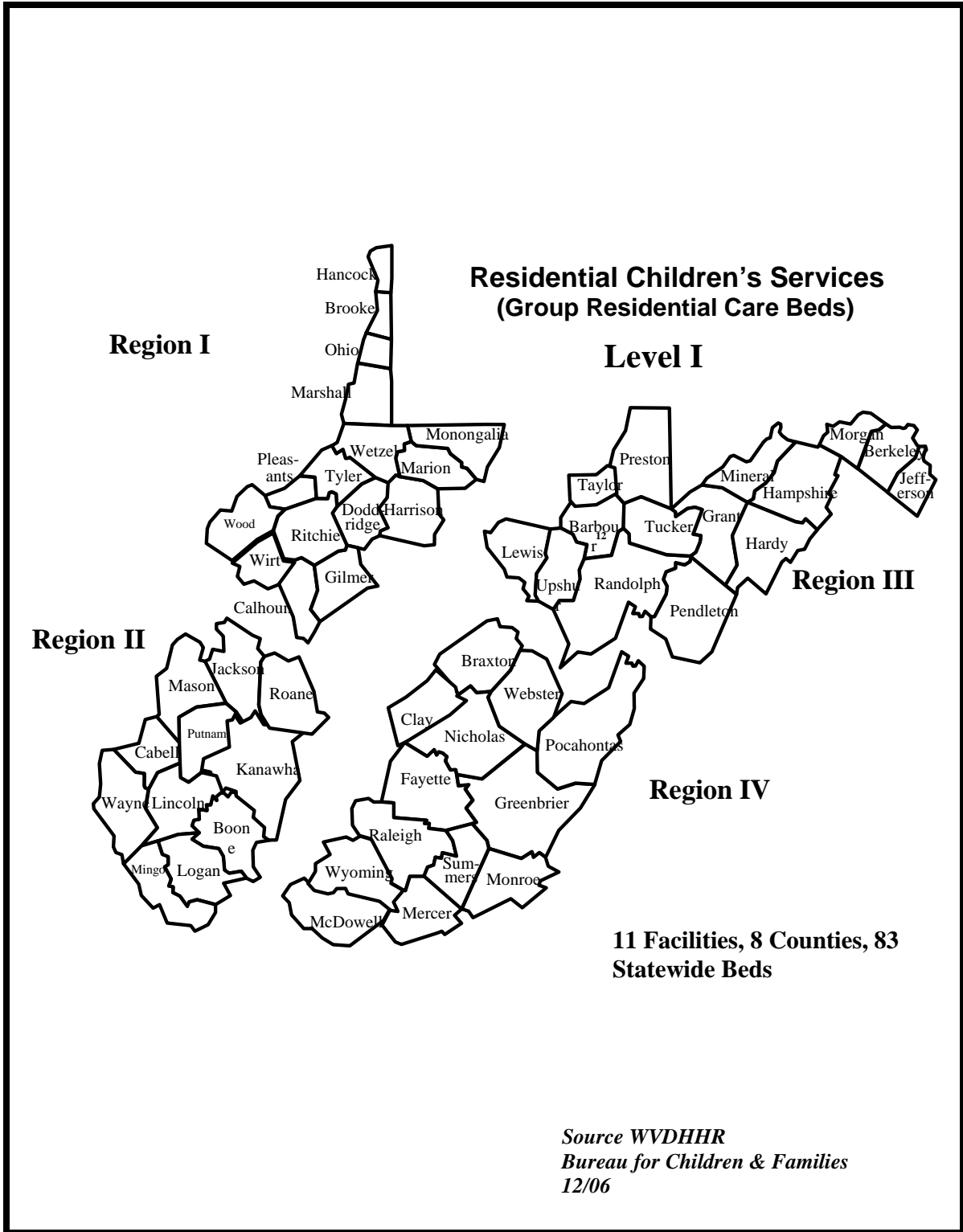
AGENCY

LOCATION/COUNTY

**Daymark, Inc.,
Patchwork**

Kanawha

There is one runaway shelter facility in the state with a capacity of 10 beds. Information regarding use was not readily available.



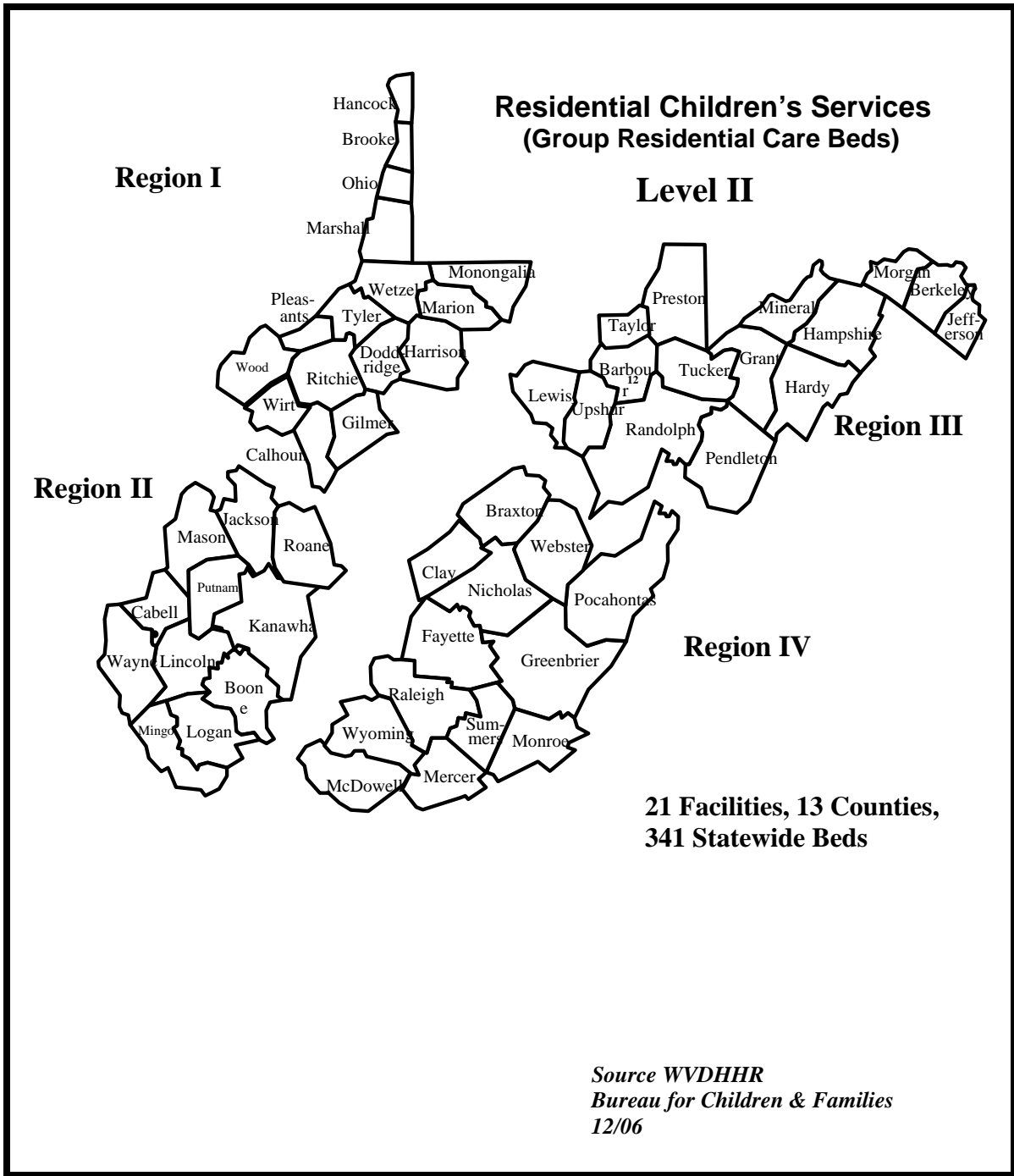
**RESIDENTIAL CHILDREN'S SERVICE – LEVEL I
(GROUP RESIDENTIAL CARE BEDS – LEVEL I)**

DEFINITION:

A structured 24 hour group care setting that targets youth with a confirmed DSM-IV diagnosis that manifests itself through moderate to severe adjustment difficulties in school, home, and/or community. It is designed for youth whose needs can best be met in a community-based setting where the child can remain involved in community-based school and recreational activities. These youth usually can function in public school and in a group residential setting with a minimal amount of supportive services and behavior interventions.

AGENCY	LOCATION/COUNTY
Stepping Stone, Inc.	Marion
Stepping Stones, Inc.	Wayne
Daymark, Inc.	Kanawha
Golden Girl, Inc.	Wayne
Davis Stuart, Inc.	Greenbrier, Raleigh, Mercer
New River Ranch	Fayette
Children's Home of Wheeling	Ohio

There are 11 facilities with 83 beds located in the four regions of the state. During the most recent fiscal year (July 1, 2005 – June 30, 2006) 112 youth were authorized for in Level I treatment. (*Information source APS Healthcare*)



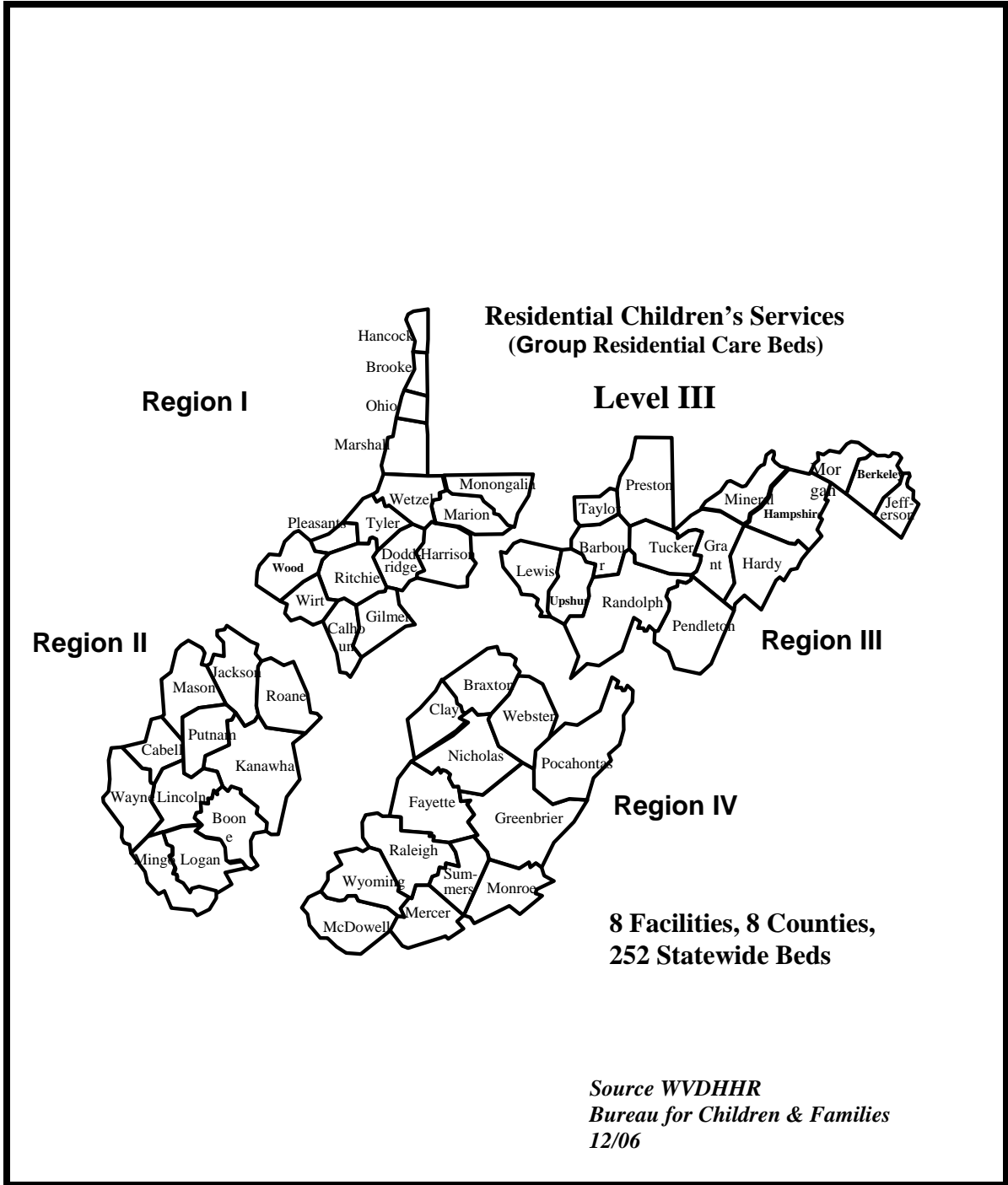
**RESIDENTIAL CHILDREN’S SERVICE – LEVEL II
(GROUP RESIDENTIAL CARE BEDS – LEVEL II)**

DEFINITION:

A structured group care setting targeting youth with a confirmed DSM-IV diagnosis that manifests itself in the form of moderate to severe adjustment difficulties in school, home, and/or community. Children served at this level are characterized by persistent patterns of disruptive behavior and exhibit disturbances in age-appropriate functioning and social problem solving. Disturbances in psychological functioning are common and may then present some risk of causing harm to self or others. These youth cannot function in a public setting without significant psycho-social and psycho-educational support.

AGENCY	LOCATION/COUNTY
Children’s Home of Wheeling	Ohio
Family Connections	Brooke
Florence Crittenton	Ohio
Pressley Ridge Schools	Harrison, Monongalia, Cabell
St. John’s Home for Children	Ohio
Charles W. Cammack Children’s Center	Cabell
Golden Girl, Inc.	Wayne
Stepping Stones, Inc.	Wayne
Burlington United Methodist Family Services, Inc.	Mineral, Raleigh
Elkins Mountain School	Randolph
Home Base, Inc.	Upshur, Lewis
Youth Academy	Marion
Davis Stuart	Greenbrier
West Virginia Children’s Home	Randolph
Mountain Hope	Ohio

There are 21 facilities with 341 beds located in the four regions of the state. During the most recent fiscal year (July 1, 2005 – June 30, 2006) 970 youth were authorized for Level II treatment. (*Information source APS Healthcare*)



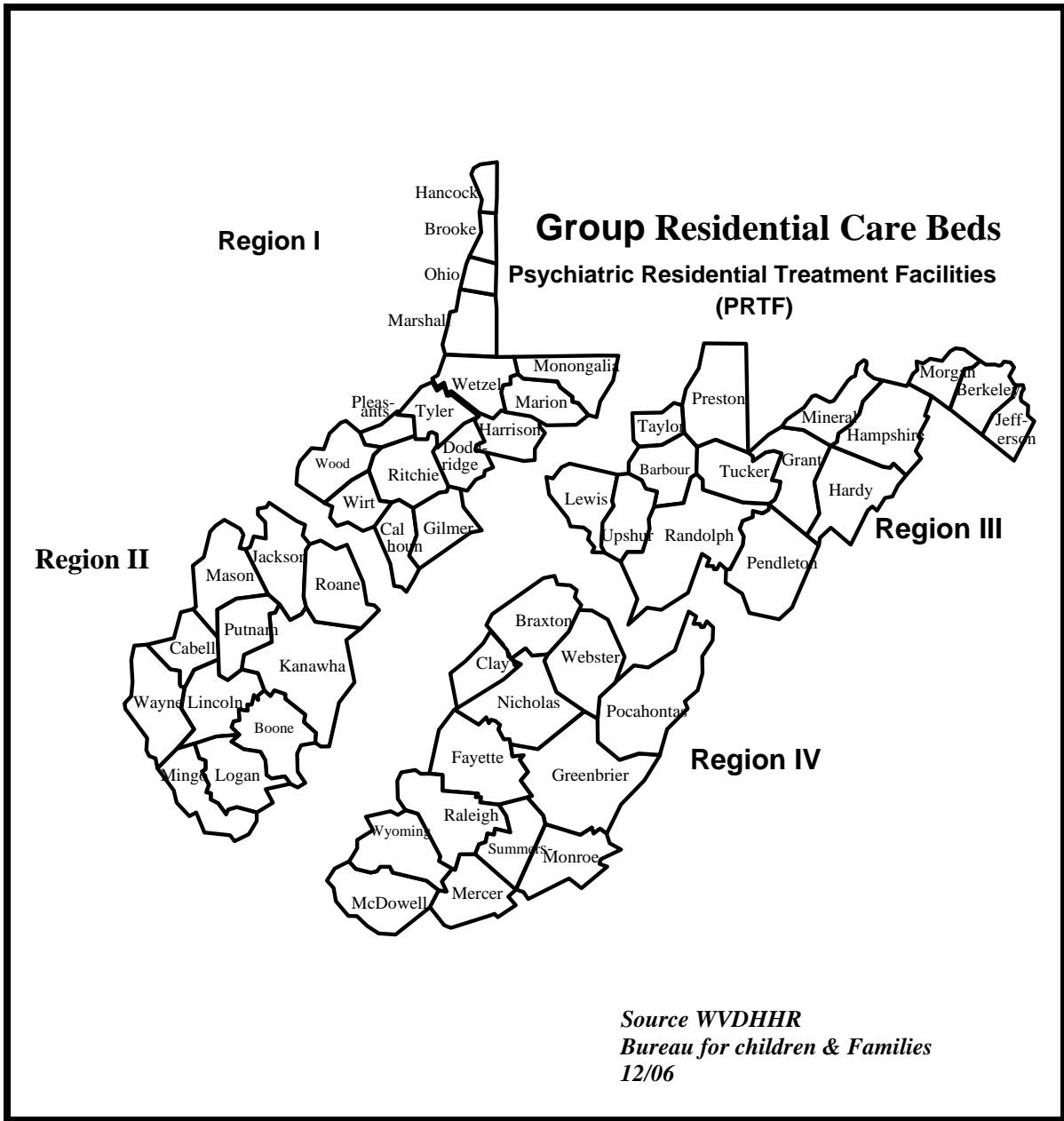
**RESIDENTIAL CHILDREN’S SERVICE – LEVEL III
(GROUP RESIDENTIAL CARE BEDS – LEVEL III)**

DEFINITION:

A highly structured and intensively staffed 24 hour group care setting targeting youth with a confirmed DSM-IV diagnosis which manifests itself in severe disturbances in conduct and emotions and as a result is unable to function in multiple areas of their lives. Residential treatment facilities provide a highly structured program with formalized behavioral programs and therapeutic interventions designed to create a therapeutic environment whereby all planned activities and applied interventions are designed with the goal of stabilizing the child’s serious mental condition.

AGENCY	LOCATION/COUNTY
Pressley Ridge Schools	Wood, Cabell
Burlington United Methodist	Mineral, Raleigh
Elkins Mountain School	Randolph
Board of Child Care	Berkeley
Mountain Hope	Ohio
Olympic Center	Preston

There are 8 facilities with 252 beds located in the four regions of the state. During the most recent fiscal year (July 1, 2005 – June 30, 2006) 678 youth were authorized for Level III treatment. (*Information source APS Healthcare*)



**PSYCHIATRIC RESIDENTIAL TREATMENT FACILITIES (PRTF)
DEFINITION:**

A freestanding or physically distinct part facility that provides to children and adolescents under the age of 21 medically supervised interdisciplinary program of behavioral health treatment. A program of individualized treatment which addresses the psychiatric needs of each individual and his/her family and is provided by qualified behavioral health professionals. These facilities are appropriate for children and adolescents whose predominant symptom presentation is essentially stabilized, although not resolved, and who have persistent dysfunction in several major life areas.

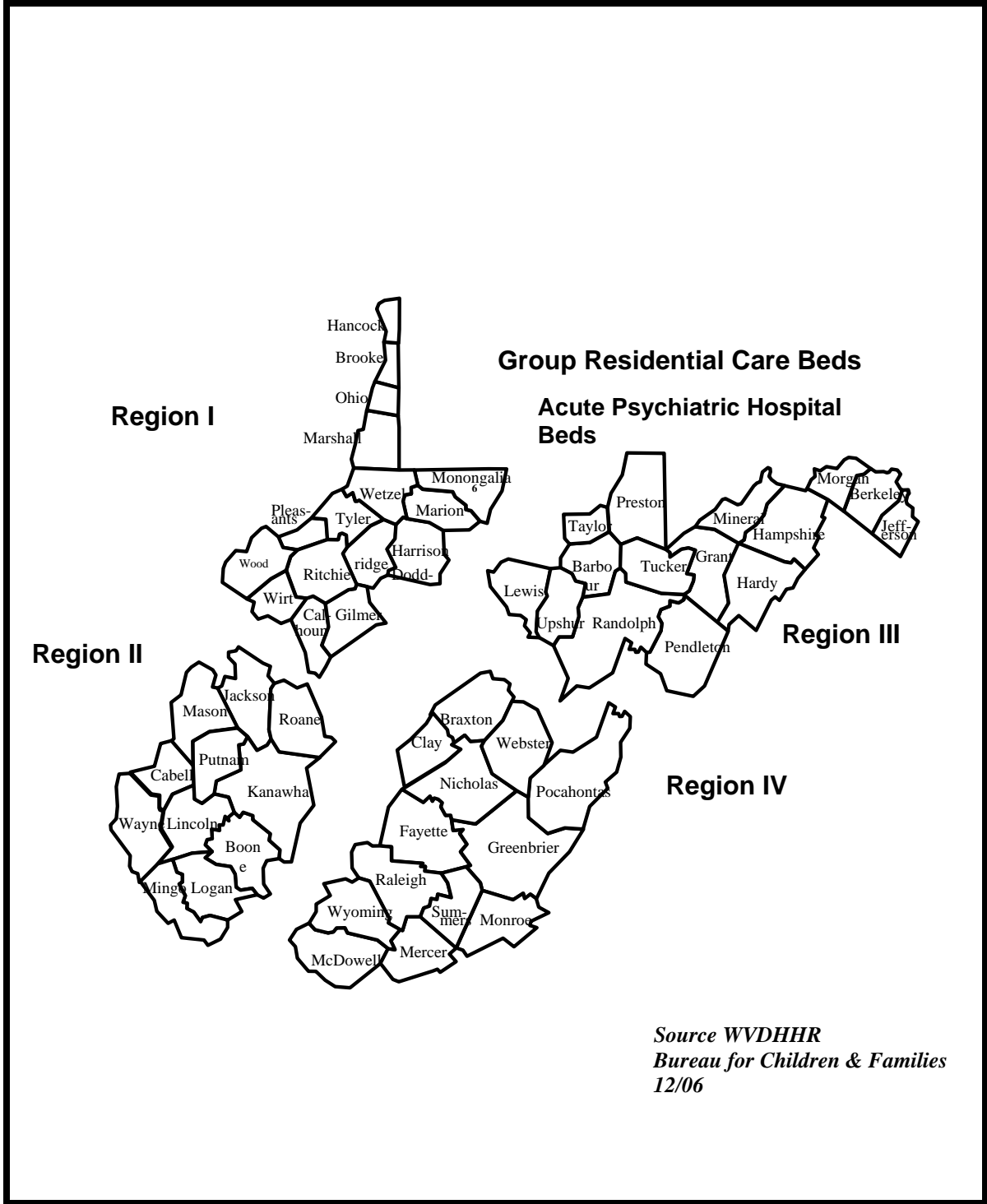
AGENCY

LOCATION/COUNTY

**Chestnut Ridge Hospital
Barboursville School
River Park Hospital**

**Monongalia
Cabell
Cabell**

There are three PRTF facilities in the state. Bed capacity information represents capacity for those children/youth in custody/non-custody status. Information regarding use for the most recent fiscal year was not readily available.



Source WVDHHR
 Bureau for Children & Families
 12/06

ACUTE PSYCHIATRIC INPATIENT HOSPITALIZATION

DEFINITION:

Provides intensive, 24-hour psychiatric care, including crisis stabilization and diagnostic assessment, in a hospital setting, for 30 days or less. Offers a full array of psychiatric services to children, adolescents and their families, and assures the availability of accredited educational, medical, and recreational activities.

AGENCY	LOCATION/COUNTY
Chestnut Ridge Hospital Highland Adolescent Unit/ Pretera Center	Monongalia Kanawha
River Park Hospital Beckley Appalachian Regional Hospital	Cabell Raleigh

There are four Psychiatric In-patient Hospital facilities in the state serving this population. Bed capacity fluctuates according to use and availability. Information regarding use was not readily available.

DHHR

Early Intervention/Family Support

Grants

FY 2006 Grant Awards

2007 Grant Tracking

Grantee's Name	Services	Grant Amount	Counties Served
Bartlett House, Inc.	Homeless	\$ 161,649.00	Monongalia, Taylor, Preston
Braley & Thompson	Youth Service Casework	\$ 834,006.00	Region II
Branches Domestic Violence Shelter	Domestic Violence	\$ 292,564.00	Cabell, Lincoln, Mason, Putnam, Wayne
Brooke Co. Commission	Juvenile Mediation	\$ 150,000.00	Hancock, Brooke, Ohio, Marshall, Wetzel and Tyler
Burlington - Region III	Youth Service Casework	\$ 155,696.00	Hampshire, Hardy, Preston, Grant, Pendleton
Burlington - Region IV	Youth Service Casework	\$ 203,431.00	Fayette, Raleigh
Cabell Co. Library	Homeless	\$ 59,323.00	Cabell, Wayne
Change, Inc.	Domestic Violence	\$ 182,589.00	Hancock, Brooke
Change, Inc. Reg. V	EITC	\$ 19,000.00	Brooke, Hancock, Ohio, Marshall
Children's Homes Society	Youth Service Casework	\$ 155,679.00	Greenbrier, Monroe, McDowell, Wyoming
Community Networks, Inc.	Homeless	\$ 202,847.00	Berkeley, Jefferson, Morgan
Criss Cross	Abuse Hotline APS - CPS	\$ 230,172.00	Statewide
Daymark, Inc.	Independent Living	\$ 100,000.00	Kanawha
Elkins Mountain School	Youth Service Casework	\$ 348,694.00	Randolph, Tucker, Lewis, Upshur, Berkley, Jefferson, Morgan, Barbour, Taylor
Family Crisis Center, Inc.	Domestic Violence	\$ 208,111.00	Grant, Hampshire, Hardy, Mineral, Pendleton
Family Crisis Intervention Center	Domestic Violence	\$ 309,803.00	Calhoun, Gilmer, Jackson, Pleasants, Ritchie, Doddridge, Roane, Tyler, Wirt, Wood
Family Refuge Center	Domestic Violence	\$ 246,309.00	Greenbrier, Monroe, Pocahontas
Family Service of Kanawha Valley	Children's Justice	\$ 127,078.00	Statewide
Greater Wheeling Coalition	Homeless	\$ 81,036.00	Marshall, Ohio
HRDF, INC.	Job Skills for Independent Foster Youth	\$ 330,815.00	Region I, II, III, IV
Legal Aid of WV	Domestic Violence - Legal	\$ 498,712.00	Statewide
Mountain Heart Community Services, Inc. Reg. III	TANF - EITC	\$ 37,000.00	Fayette, Greenbrier, McDowell, Mercer, Monroe, Nicolas, Pocahontas, Raleigh, Summers, Summers, Webster, Wyoming
Mountain Heart Community Services, Inc. Reg. VII	TANF - EITC	\$ 32,000.00	Jefferson, Berkeley, Morgan, Hampshire, Hardy, Mineral, Grant, Pendleton
NCWVCAA-Randolph Co.	Homeless	\$ 72,294.00	Lewis, Randolph, Tucker, Upshur, Barbour, Taylor

Grantee's Name	Services	Grant Amount	Counties Served
NCWVCAA-Scott Place	Homeless	\$ 118,554.00	Doddridge, Harrison, Marion
North Central WV Community Action Association, Inc.	TANF - EITC	\$ 48,500.00	Barbour, Berkeley, Braxton, Grant, Greenbrier, Hampshire, Hardy, Harrison, Jefferson, Lewis, Marion, Mineral, Monongalia, Morgan, Pendleton, Pocahontas, Preston, Randolph, Taylor, Tucker, Upshur, Webster
Pressley Ridge	Youth Service Casework	\$ 288,823.00	Mercer, Nicolas, Webster, Braxton, Clay, Fayette, Raleigh, Pocahontas, Summers
Prosecuting Attorneys	Drug Endangerment Task Force	\$ 30,000.00	Statewide
Rape & Domestic Violence Info. Center	Domestic Violence	\$ 254,557.00	Monongalia, Preston, Taylor
RCCAA - Pine Haven	Homeless	\$ 412,212.00	Fayette, Greenbrier, Mercer, Monroe, Pocahontas, Raleigh, Summers, Summers
RCCAA - Pine Haven	Homeless - Child Mentor	\$ 27,864.00	Raleigh, Wyoming
RCCAA - Stone Haven	Homeless	\$ 149,304.00	Boone, Logan, Mingo, McDowell, Wyoming
Reg. III Workforce Investment Board of Kanawha Co. (WIB III)	FSE&T Grants	\$ 123,531.00	Kanawha
Roark Sullivan Lifeway Center	Homeless	\$ 131,389.00	Kanawha, Clay
Shenandoah Women's Center, Inc.	Domestic Violence	\$ 250,573.00	Berkeley, Jefferson, Morgan
South Western WV Reg. II (WIB II)	FSE&T Grants	\$ 202,702.00	Cabell, Putnam, Lincoln, Wayne, Logan, Boone, Mingo, Logan
South Western WV Region WIB II	TANF Job Skills Training-EXCEL	\$ 484,554.00	Cabell, Putnam, Lincoln, Wayne, Logan, Boone, Mingo, Logan
Step By Step	Family Leadership First	\$ 53,000.00	Statewide
Stop Abusive Family Environments, Inc. (SAFE)	Domestic Violence	\$ 279,218.00	McDowell, Mercer, Wyoming
SWCAC - Mason Co.	Homeless	\$ 85,614.00	Mason, Jackson, Roane
Task Force on Domestic Violence, HOPE, Inc.	Domestic Violence	\$ 267,748.00	Doddridge, Harrison, Marion, Lewis, Gilmer
TEAM for WV Children	Healthy Families America	\$ 395,000.00	Cabell Wayne
Tug Valley Recovery Shelter	Domestic Violence	\$ 206,944.00	Logan, Mingo
United Way of Central WV	TANF - EITC	\$ 43,000.00	Kanawha, Boone, Clay, Putnam, Logan, Mingo
United Way of The River Cities	TANF - EITC	\$ 22,500.00	Cabell, Wayne, Mason, Lincoln & Lawrence Co. Ohio
WIB IV (Workforce Investment Board Reg. IV)	FSE&T Grants	\$ 76,013.00	Pleasants, Wood, Ritchie, Wirt, Jackson, Mason, Roane, Clay, Calhoun
WIB V (Northern Panhandle Workforce Invest. Board)	FSE&T Grants	\$ 38,006.00	Hancock, Brooke, Ohio, Marshall, Wetzel, Tyler
WIB VI (WV Reg. VI Workforce Investment Board)	FSE&T Grants	\$ 275,715.00	Monongalia, Marion, Preston, Taylor, Harrison, Doddridge, Barbour Tucker, Randolph, Upshur, Lewis, Braxton, Gilmer
WIB VII (Region 8 Planning & Dev.)	FSE&T Grants	\$ 114,020.00	Jefferson, Berkeley, Morgan, Hampshire, Mineral, Grant, Hardy, Pendleton

Grantee's Name	Services	Grant Amount	Counties Served
Women's Aid in Crisis	Domestic Violence	\$ 268,973.00	Barbour, Braxton, Randolph, Webster, Tucker, Upshur
Women's Resource Center	Domestic Violence	\$ 308,736.00	Fayette, Nicholas, Raleigh, Summers
WORK4WV REG. 1, INC (WIB I)	FSE&T Grants	\$ 235,654.00	Webster, Nicholas, Fayette, Raleigh, Wyoming, McDowell, Mercer, Summers, Monroe, Greenbrier, Pocahontas
WV Coalition Against Domestic Violence	Domestic Violence Legal	\$ 40,000.00	Statewide
WV Coalition Against Domestic Violence/LBD	Domestic Violence LBD	\$ 76,258.00	Statewide
WV Division of Rehabilitation Services	Voc. Assessment (WV Works)	\$ 185,592.00	Statewide
WV Welfare Reform Coalition	TANF - EITC	\$ 75,000.00	Statewide
WVU Research Corp	Independent Living-Chaffee	\$ 361,440.00	Statewide
WVU Research Corp	Healthy Marriage	\$ 350,000.00	Statewide
Youth Service System	Job Skills for Independent Foster Youth	\$ 30,296.00	Brooke, Hancock, Ohio, Marshall, Wetzel Tyler
Youth Service System	Youth Service Casework	\$ 508,682.00	Region I
YWCA Family Violence-Wheeling FVPP	Domestic Violence	\$ 272,554.00	Ohio, Marshall, Wetzel
YWCA Resolve Family Abuse Program	Domestic Violence	\$ 312,674.00	Boone, Clay, Kanawha
YWCA Sojourners	Homeless	\$ 170,466.00	Boone, Clay, Kanawha