

**Contra Costa County Comprehensive Prevention Plan
Submitted by the CPP Planning Team**

CPP TABLE OF CONTENTS

| | |
|--|----|
| Contact Page..... | 1 |
| Signature Pages..... | 2 |
| Introduction..... | 5 |
| CPP Governance Structure..... | 5 |
| Charter Statement..... | 9 |
| Information Sharing and Distribution..... | 9 |
| CPP Development Engagement Process..... | 12 |
| Barriers to Engagement..... | 14 |
| Tribal Consultation and Collaboration..... | 16 |
| Integrated Core Practice Model (ICPM)..... | 18 |
| Needs Assessment Summary and Analysis..... | 19 |
| Data Sources..... | 25 |
| Needs of the Selected Populations..... | 33 |
| Identified Strategies to Address the Needs of the Selected Population..... | 35 |
| Service Array and Asset Mapping..... | 36 |
| Service Array Expansion to Meet the Needs of Targeted Population..... | 38 |
| Evidence-Based Practice Selection..... | 39 |
| Contra Costa Theory of Change..... | 43 |
| Contra Costa Logic Models..... | 44 |

APPENDICES

| | |
|---|--|
| Social Determinants of Health (SDOH) Chart – Appendix A | |
| Primary Prevention Asset Map – Appendix B | |
| Secondary Prevention Asset Map – Appendix C | |
| Tertiary Prevention Asset Map – Appendix D | |
| Primary Prevention Logic Model – Appendix E | |
| Secondary Prevention Logic Model – Appendix F | |
| Tertiary Prevention Logic Model – Appendix G | |
| Assurances Template – Appendix H (from ACL 23-23, also known as Attachment B) | |
| Local Spending Plan Template – Appendix I | |

COMPREHENSIVE PREVENTION PLAN OF CONTRA COSTA COUNTY

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| Title IV-E Agency Information: | Contra Costa County Children & Family Services and Contra Costa County Probation Department |
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CPP Date of Submission: 7/10/2023

Coordination with Local Mental Health

In accordance with section 471(e)(10)(C) of the federal Social Security Act and California WIC section 16588(f)(3), the Children & Family Services Bureau and Probation Department (Name of participating child welfare services and/or probation agency) assures the agency will establish a joint written protocol, based on the model developed by the CDSS and Department of Health Care Services for use among the child welfare agency, probation department, behavioral health agency, and other appropriate entities to determine which program is responsible for payment, in part or whole, for a prevention service provided on behalf of an eligible child.

Signatures

Signature: These assurances must be signed by the official with authority to sign the CPP and submitted to the CDSS for approval.

Signature of Authorized CWS Representative

Date

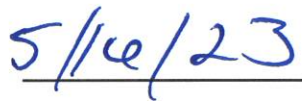
Signature of Authorized Probation Representative

Date


Contra Costa County Child Welfare Representatives



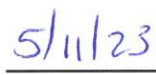
Marla Stuart, MSW, PhD
Employment & Human Services Director



Date



Kathy Marsh
Children & Family Services Director



Date


Contra Costa County Probation Representatives



Esa Ehmen-Krause
Chief Probation Officer

5.16.23

Date



Kiki Farris
Probation Director of Speciality Field Services

5/16/23

Date

Contra Costa County Behavioral Health Representatives

Suzanne Tavano, PhD

Suzanne Tavano, PhD
Director, Behavioral Health Services

5/17/23

Date

Gerold Loenicker

Gerold Loenicker, LMFT
Mental Health Program Chief

5/17/23

Date

INTRODUCTION

Contra Costa County is located in the northern portion of the East Bay region of the San Francisco Bay Area. Contra Costa's total population was reported by the California Department of Finance to be 1,156,555 residents as of January 1, 2022. The eastern side of the county has consistently been the fastest growing part of the county. Geographically, the county is split into three areas, which are divided by a network of highways: Central, East, and West. Contra Costa acknowledges our county is located on the traditional territory and homelands of the Yokuts, Karkin, Confederated Villages of Lisjan, Ohlone, Miwok, and Muwekma peoples.

Contra Costa is committed to providing prevention and intervention services that strengthen families, enable children to remain safely in their home of origin in a stable and nurturing environment, and positively impact parents, children, and caregivers in the community. This plan is being submitted by our Title IV-E agency co-leads, Contra Costa County Children & Family Services, and Contra Costa County Probation Department. In the drafting and development of this prevention plan, and in adherence to the required Comprehensive Prevention Plan (CPP) elements and components, the CPP Planning Team utilized the optional CDSS-issued CPP Template; our answers are modeled after questions shared in the template. The required Assurances Template has been included at the end of the prevention plan.

CPP GOVERNANCE STRUCTURE

How will the governance structure ensure that all required cross-sector collaborative partners will provide meaningful participation in decision making, for: training, implementation, selection of Evidence Based Practices (EBP), fidelity monitoring, and continuous quality improvement for the CPP?

Contra Costa County has built a three-tiered governance structure that ensures all required and additional cross-sector collaborative partners are participating in CPP planning. The governance structure that has been created ensures cross-sector partners will provide meaningful participation in decision-making for training, implementation, the selection of an Evidence-Based Practice (EBP), fidelity monitoring, and continuous quality improvement.

One tier of the governance structure is the Contra Costa County AB 2083 Executive Interagency Leadership Team (ILT), who are responsible for setting direction and strategies, allocating resources, overseeing prevention planning progress, ensuring stakeholder and community engagement, and making decisions. The ILT already has a governance structure and decision-making protocols in place to guide the implementation process, identify and address barriers to cross-sector collaboration, and offer input on key strategies.

The other tiers of the governance structure are the Contra Costa County Child Abuse Prevention and Community Empowerment Committee, known as the "CPP Planning Team," and its accompanying Steering Committee. The CPP Planning Team is the outgrowth of a process that began in June 2021, when a Children & Family Services Program Analyst and Children & Family Services consultant, as co-leads for the initial CPP planning process, began meeting with a cross-sector collaboration of community stakeholders and representatives of various county and nonprofit child-serving agencies. The purpose of these meetings was to provide information about what was known about the Family First Prevention Services Act (FFPSA) Part I at the time, and to engage interested community members in becoming involved in the prevention planning process.

In April 2022, the Contra Costa County Office of Child Abuse Prevention (OCAP) Committee merged with the CPP Planning Team. The OCAP Prevention Committee, led by Children & Family Services and the Child Abuse Prevention Council (CAPC) of Contra Costa, was also a cross-sector group and had been meeting for several years to develop a primary prevention strategy in Contra Costa County. The Committee had previously adopted a Strengthening Families/Protective Factors framework, had committed to addressing disproportionality and increasing resources and equity in access, had engaged in asset mapping and service gap analysis, and had also begun to examine strategies to address primary prevention needs.

In May 2022, the original OCAP Prevention Committee, along with additional representatives of various sectors in the community, joined the CPP Planning Team. At that time, the CPP Planning Team also established a Steering Committee, which is our third governance tier. The Steering Committee functions as a lead advisory body comprised of some of the CPP Planning Team members, whose purpose is to address and oversee the direction, scope, timeliness, and methods used to develop a prevention plan.

How are required and/or suggested partners going to be engaged in on-going monitoring of the FFPS Program?

The Steering Committee, and the larger CPP Planning Team, whose respective memberships feature partners both required and suggested by the CDSS, including local community representatives and those with lived experience, have assertively identified and engaged individuals in the prevention planning collaborative. CPP Planning Team members are aware of, and have voiced strong commitment to, the county's plans to engage them in the ongoing monitoring of the prevention services program. They have agreed to continue to meet in order to monitor implementation of the program. The CPP Planning Team will move from planning prevention services to overseeing implementation of services following the approval of our CPP.

The CPP governance structure was built to ensure there are individuals and organizations that represent all the CDSS-required and locally desired cross-sector collaborative partners who will participate in all aspects of the planning and decision-making process. Moreover, the CPP Planning Team leads are conscientious about seeking engagement in decision-making from all participants at and in between meetings.

CPP Steering Committee

- Children & Family Services: Kathy Marsh, Roslyn Gentry, Kimberly Baker, Debra Bidwell, Nicole Gremillion, Alysia Dellaserra, Linda Orrante, Jim Paulsen
- Probation: Kiki Farris
- Child Abuse Prevention Council: Carol Carrillo
- County Office of Education: Lynn Mackey
- Catholic Charities of the East Bay: Michelle La Place-Watts
- First 5: Lisa Morrell Korb
- CDSS OCAP: Jagdish Majju (until fall 2022)
- Strategies 2.0: Troy Nichols

CPP Planning Team

CDSS required partners:

- Contra Costa County Children & Family Services (CFS)
 - CFS Leadership – Kathy Marsh (Director), Roslyn Gentry (Deputy Director), Kimberly Baker (Quality Assurance, Screening, and After Hours Division Manager), Debra Bidwell (East County Operations Division Manager), Nicole Gremillion (Central County Operations Division Manager), Alysia Dellaserra (Program Analyst/ CPP Planning Team Lead)
 - CFS Consultants/ CPP Planning Team Leads – Linda Orrante, Jim Paulsen
 - CFS Social Workers and Social Work Supervisors: Adrienne Brooks, Barbara Crespo, Deborah Cunningham, Shafica Davis, Amy Drenik, Nannette Dupree, Michelle Estrade, LeTanya Fleming, Uche Uzegbu-McGhee, Michele Williams
 - CFS Administrative Services Assistants – Jessica Laumann, Laura Malone, Jan Nelson
 - CFS Fiscal Analyst – Laura Volante
 - CFS Research and Evaluations Manager – Vihra Gocheva
 - CFS Special Projects Manager – Gloria Halverson
 - CFS Staff Development – Mari Solis
- Contra Costa County Probation
 - Probation Executive Leadership – Kiki Farris (Probation Director of Speciality Field Services), Melvin Russell (Assistant Chief Probation Officer, Field Services)
 - Probation Administration – Kevin Schrupp (Probation Manager, Placement and Investigation), Tina Reyes (Probation Manager, East County Operations)
 - Probation Supervisor – Gerri Liberty (East County/TAY Supervision)
- Contra Costa County Behavioral Health, Mental Health Services – Gerold Loenicker (Mental Health Program Chief), Charlene Bianchi (Mental Health Program Manager), Amy Linsao (Mental Health Program Manager)
- Contra Costa County Office of Education – Superintendent Lynn Mackey, Alejandra Chamberlain, Esperanza Velarde-Ellis
- Contra Costa Community Services Bureau – Jacqueline Lopez
- Contra Costa Child Abuse Prevention Council (CAPC) – Carol Carrillo
- Tribal Representatives – Anthony Cesspooch Guzman, Veronica Shawnegof
- First 5 Centers (also known as Family Resource Centers in Contra Costa) – Lisa Morrell Korb, DeeAnna Garza, Camilla Rand, Wanda Davis
- Nonprofit/Community-Based Organizations
 - Differential Response Providers – Contra Costa Youth Service Bureau (Onna Alexander, Alicia Carrillo); Catholic Charities of the East Bay (Veerenyze Lopez, Michelle La Place-Watts, Shantell Herndon); and Pacific Clinics (Dalia Rivera)
 - Family Preservation Provider – Pacific Clinics (Dalia Rivera)
 - Kinship Providers – Pacific Clinics (Antoinette Harris), Wayfinder Family Services (Carol Ramirez, Cheri Thomas-Stevens)
 - Lincoln Family Center – Dynell Garron, Michelle Thompson

- Community Violence Solutions – Cynthia Peterson, Christina Vasquez
- Family Justice Center – Natalie Oleas, Shannon Starzyk
- People Who Care Association – Connie Russell, Jose Nicasio, Veronica Pope
- Safe Refuge for Children and Families – Alexia Paredes
- Foster Family Agencies – Alternative Family Services (Manisha Sandhu), Wayfinder Family Services (Carol Ramirez, Cheri Thomas-Stevens)
- Youth Partners/Former Foster Youth (Lived Expertise) – Delilah Borg, Kayla Nelson
- Parent Partner (Lived Expertise) – Lorena Tobar
- 7 current foster youth (names confidential)

CDSS suggested partners

- Public Health
 - Public Health Nurses – Susi Polos, Johnalice Waters
 - Public Health Nurse Program Manager – Debbie Paterson
 - Public Health Nursing and Clinic Director, Health Services – Sue Crosby
- Regional Center of the East Bay – Elvia Osorio-Rodriguez, Shirley Obioma

Other community representatives identified by the CPP Planning Team:

- City of Antioch, Youth Services Division – Tasha Johnson, Monserrat Cabral
- Alcohol & Other Drugs Services – Patricia Rogers
- County Physicians – Dr. Casey Brown (Medical Director of Family Violence and Child Abuse Prevention Program; Child Abuse Pediatrician with Contra Costa Health Services) and Dr. Francine Jolton (pediatrician with Contra Costa Regional Medical Center and Health Centers; Chair of the Department of Pediatrics)
- John Muir Health Community Health Improvement Coordinator – Huda Assaf
- East Contra Costa Community Alliance – Solomon Belette
- Court Appointed Special Advocates (CASA) of Contra Costa County – Ann Wrixon
- Contra Costa Crisis Center – Tom Tamura
- Antioch Community Foundation – Keith Archuleta
- Antioch Unified School District – Barbara Aguilar (Foster and Homeless Liaison), Scott Bergerhouse (Director of Student Support Services)
- Antioch Police Department – Lieutenant John Fortner
- Strategies 2.0, Senior Training and Consulting Specialist – Troy Nichols*
- CDSS OCAP Analyst – Jagdish Majju (spring 2022 - fall 2022) *

*During the prevention planning process, Contra Costa County was in regular communication with OCAP and Strategies TA representatives, who served as intermediaries with the CDSS for technical assistance and implementation support. They have attended the CPP Planning Team's prevention planning meetings regularly.

Charter Statement

- **Purpose:** To create and oversee a countywide prevention plan which impacts the social determinants of health for our children, families, and community.
- **Vision:** All children and families in Contra Costa County are supported by services and systems that are accessible, have an equitable approach, include culturally and linguistically responsive services, and celebrate all aspects of diversity.*
 - *Diversity includes abilities; cultural, ethnic, and racial background; gender identity; sexual orientation; immigration status; language; religion; age; socioeconomic status; and special needs.
- **Mission:** To create and oversee a seamless cross-sector network that shares collective responsibility for increasing protective factors and positively impacting the quality of the social determinants of health.
- **Goals:**
 - **Primary Prevention Goal:** Strengthen communities and improve child well-being by focusing on the social determinants of health, i.e., the conditions into which people are born, grow, work, live, play, and age, and the wider set of forces and systems shaping the conditions of daily life.
 - **Secondary Prevention Goal:** To build protective factors and mitigate risk factors for populations with risk factors, e.g., poverty, parental substance abuse, young parental age, parental mental health concerns, exposure to violence, and parental or child disabilities.
 - **Tertiary Prevention Goal:** For families where child maltreatment has occurred, to mitigate trauma, reduce negative consequences, and prevent recurrence, including entry into foster care or probation placement.

Information Sharing and Distribution

How will the governance structure share information between the cross-sector collaborative partners?

Contra Costa County's governance structure and meeting cadence ensures information sharing between the cross-sector collaborative partners. Since the launch of the CPP planning process, Contra Costa has cast a wide net to involve as many public and community agencies and organizations as possible in the planning process. The CPP Planning Team leads have continually asked agency and organization representatives to invite and involve, and share information about our prevention planning efforts with their partners, constituencies, clients, and community members with lived experience.

CPP Planning Team meetings are held monthly, as are Steering Committee meetings. Given the size of the workgroup, the date and time of monthly meetings does not accommodate all members' schedules, but a written agenda and accompanying supportive documents (including documentation of previous meetings' decisions) are distributed to the CPP Planning Team email

distribution list before the meeting date, and all members are encouraged to provide feedback and share their ideas. Meetings are facilitated by the CPP Planning Team leads with special attention to encouraging participation from workgroup members, and transparency in examining the impact, benefits, and challenges of various strategies and decisions.

In October 2022, the CPP Planning Team created three separate subgroups to address the different prevention levels. The subgroups were responsible for examining needs to be addressed at each level with special attention to prioritization of the identified target population to ensure a focus on families who are overrepresented in child welfare and juvenile probation, and families who are otherwise most needy; determining the appropriate services and supports at each level; completing logic models; and for bringing recommendations back to the larger planning team and the Steering Committee.

Contra Costa's existing communication strategies have allowed for the sharing of information regarding prevention policies, new practices, and services with others who may not be directly involved in prevention planning. One of these existing mechanisms is the CFS District Managers' monthly Community Partnership Meetings. These meetings serve as forums to share prevention and other service information, community and agency needs, relevant data, upcoming events and various opportunities, and other news that impacts residents of the county. Community Partnership Meetings are interactive, allowing for the exchange of information and discussion about topics and shared initiatives that any member in attendance may bring forward, thus providing another opportunity for prevention planning input. Information is also shared with community partners via an extensive email distribution list.

CFS also has a "Resource Family Newsletter" that is shared with resource caregivers, CFS employees, the community partnership distribution list, and our kinship centers. Over 300 resource families, community members, prospective resource families, and staff at community-based organizations have signed up for direct electronic communication of the newsletter. The publication provides resources, general education, service initiatives, training opportunities, and support to resource families and kinship caregivers in Contra Costa County. Community partners and new initiatives are generally highlighted in the newsletter.

Probation is able to utilize the Juvenile Justice Coordinating Council and its various subcommittees, which have public participation and involvement, in order to communicate information about the CPP.

Once Contra Costa County has an approved prevention plan, these various communication methods will continue to be utilized to share information, including the announcement that a Request for Proposal will be developed to secure a community provider for prevention services, and any subsequent steps in implementation. The CPP Planning Team meetings will continue to be held regularly as well.

How will the CPP content be developed, reviewed, and approved locally by the governance structure?

CPP content has been, and continues to be, developed, reviewed, and approved through a highly interactive process by CPP Planning Team members with support from the CPP leads. Members of the team have provided extensive input and have also reviewed and considered information and resources shared by the leads. The leads are responsible for documentation of the decisions. The leads provide that same documentation for the CPP Planning Team's review,

and subsequently incorporate members' input and feedback into the prevention plan. This is considered an ongoing, collaborative process.

The CPP Planning Team is responsible for planning and implementation recommendations, which includes EBP selection, training, fidelity monitoring, continuous quality improvement, developing the process for how safety monitoring and periodic risk assessments will be overseen, and other relevant matters. These recommendations are then presented to the Executive Interagency Leadership Team for review and final approval. With four of the Executive ILT members on two levels of the CPP governance structure, the process has been smooth.

What is the process for the required cross-sector partners to review and consult on necessary guidance and implementation decisions, provide feedback, and receive notification regarding the reasons recommendations that were incorporated or chosen not to be incorporated?

Contra Costa County will continue to convene regular CPP Planning Team meetings to provide status reports on all aspects of our implementation progress, which will allow for ongoing opportunities to review and consult on necessary guidance and implementation decisions, provide feedback, and offer information on the reasons that recommendations were either incorporated or not incorporated. The CPP leads will provide an implementation report and fundamental data, and other information requested by the CPP Planning Team members for review, consideration, and feedback. During these meetings, discussion will include the identification of prevention program successes, needs, and challenges to gather further recommendations, and examine pros and cons in order to make decisions about which recommendations should be pursued. In subsequent meetings, there will be notification about the status of recommendations, i.e., were they included or not, and the rationale for the action taken. The CPP Planning Team's input will be incorporated into strategies for continuous improvement of the county's prevention program.

How will the governance structure be used to modify the CPP in the future if needed?

Contra Costa intends to utilize the same three-tiered governance structure that was used for prevention planning in order to oversee CPP implementation, monitor progress, and to make any future modifications to our prevention program if needed.

How will you document the co-created strategy to engage other organizational partners, impacted communities, and those with lived experience in discussions regarding ways in which services can be adapted to be culturally responsive to the needs of the population served?

Contra Costa's developed prevention plan will function as a living, working document, which ensures the documentation of the co-created strategy to engage other organizational partners, impacted communities, and those with lived experience in discussions regarding ways that services can be adapted to be culturally responsive to the needs of the population being served. As suggestions and recommendations are made about any aspect of CPP implementation, including engagement and culturally responsive services, they will be documented in the CPP Planning Team's meeting notes and can be included in the prevention plan itself. Additionally, the selected community organization that is providing services will be able to include any changes and improvements into reports to the Title IV-E agencies.

The CPP Planning Team's goal during prevention planning has been to ensure cultural responsiveness. The effort to engage organizational partners, constituent communities, and individuals with lived expertise in all aspects of implementation, including cultural

responsiveness, will continue to be multi-faceted, and involve direct outreach. Cultural responsiveness will be an element addressed in the Request for Proposal Scope of Work. Cultural responsiveness will also be directly addressed in all the Title IV-E agencies' monitoring meetings with the future contracted organization, and in cross-sector collaborative CPP Planning Team meetings. The contracted organization will be required to actively demonstrate principles and strategies of cultural responsiveness.

CPP Development Engagement Process

In addition to the required and suggested partners who have shared in the ongoing monitoring and strategizing of our local FFPS Program, Contra Costa County made it a point to identify other collaborative structures and cross-sector stakeholder groups to inform, advise, review, and make recommendations that validate the CPP. One structure is the East Contra Costa Community Alliance (ECCCA). ECCCA is a collaboration of nonprofit agencies who are dedicated to strengthening policies, services, and resources in East County, with an emphasis on improving the quality of life of all individuals who reside in East County. Another collaborative structure who joined our efforts is the Antioch Community Foundation (ACF). The mission of ACF includes the following objectives: identifying supportive programs and projects that increase family economic security and health; promoting recreation activities for seniors, youth, and low-income families; and promoting cultural and civic events and initiatives that foster equity and inclusion, and build community pride.

The CPP Planning Team took steps to ensure stakeholder engagement incorporated lived expertise and community representation into the implementation process. Initially, the CPP Planning Team sought involvement and input from community group members at already existing meetings by inviting CPP Planning Team members to suggest parenting groups, parenting and other classes/workshops, support groups, community meetings, etc. that would be able to provide community and lived experience input.

Individuals who are disproportionately at-risk for entry into child welfare and juvenile justice systems, or who already have some involvement with those systems, were also welcomed into our planning efforts. One engagement method was to invite former foster youth, and parents of current or former foster youth, to join the committee. Another method was an effort led by Contra Costa's Child Abuse Prevention Council (CAPC) Director, Carol Carrillo, and Strategies 2.0 Senior Training and Consulting Specialist, Troy Nichols, to convene Community Cafes in Contra Costa County. A Community Cafe is an engagement model that brings together members of the community in a friendly, welcoming setting with the goals of sharing ideas and offering input to build a stronger, healthier community.

The engagement strategy of Community Cafes began in September 2022. The CPP Planning Team's long-term goal is to develop and facilitate Community Cafes that will be solely about prevention planning and implementation. Contra Costa recognizes that a racial equity and inclusion lens requires that youth and family experiences and perceptions are a key data source for program design and revision, and that qualitative and quantitative data are equally valuable. Contra Costa will intentionally engage with youth and parents through Community Cafes to gather continuing feedback on the CPP implementation. Contra Costa regards community engagement as something that will continue to grow as we build, sustain, and expand our prevention program.

A Youth Community Cafe planned and facilitated by the CAPC Director, Strategies 2.0 consultant, two Youth Partners (individuals with prior lived experience in the child welfare system), and the Program Facilitator from People Who Care Children Association was held in November 2022. Youth and young adults between the ages of 14 and 21 participated in the cafe. Dinner and a stipend were provided to compensate participants for their time, effort, input, and expertise.

Seven of the participants in the Community Cafe were foster youth with open CFS cases. The foster youth were invited to join the county's ongoing prevention planning efforts. The following topics were discussed with the youth and young adults: 1) how can we in Contra Costa make the lives of youth and families better in our community; 2) challenges that youth and young adults in the community face; and 3) resources and supports that are needed in the community.

The participants reported that not having more supportive services in convenient, neighborhood-based locations is a challenge to seeking help, and transportation is also a barrier. Participants shared that there need to be more youth-centered programs in the community that include relatable content specific to the target population, incentives for attendance, a defined purpose for the gathering, and an intentionally safe environment. It was noted that more outreach and promotion would be helpful, as it is not always known to residents what resources and supports are available in Contra Costa County. Engaging with youth in the community, and collecting their feedback, helped to inform the service array that the CPP Planning Team developed.

Other outreach activities and notification of the prevention program that is being developed were completed with the following Contra Costa agencies and groups: the Fostering Health Collaborative, Early Childhood Prevention and Intervention Coalition (ECPIC), Contra Costa Health Services Prevention Providers System of Care, and the East County Community Partnership. Representatives from each of these agencies and groups have been involved in the CPP planning and implementation process since the workgroup was originally formed, but in winter 2023, the CPP leads gave presentations at each of these meetings for additional outreach, engagement, and community strategizing.

Partnerships with the Antioch Unified School District (AUSD) and the Antioch Police Department have also been established. Given the ongoing interactions that both AUSD and the police department have with families in the community, they are valued members in the CPP planning and implementation process. AUSD and the Antioch Police Department are in prime position to be able to refer families to our agency for prevention-specific and culturally responsive, trauma-informed services. Upon approval of our prevention plan, we will develop a referral pathway process for families, and will work with AUSD and the Antioch Police Department, and other community organizations, to promote our prevention program and provide information on the CPP referral and collaboration process.

Additional insight into community needs was gleaned from a wide variety of existing county needs assessments, and feedback from focus groups in both the 2022 Contra Costa County Children & Family Services County Self-Assessment, and the 2021 Report on Juvenile Justice Programs and Services in Contra Costa County. Focus groups were conducted with foster youth, parents with open child welfare cases, youth with probation involvement, and resource and kin caregivers.

The CPP Planning Team is committed to supporting ongoing countywide engagement efforts. Ongoing engagement will include offering training in the selected evidence-based practice

(EBP) to agencies and individuals participating in CPP development along with public and/or private organizations, community members, and individuals with lived experience interested in prevention who have yet to join the CPP Planning Team. Extending training opportunities to the widest portion of the community will support ongoing engagement and collaboration by creating opportunities to both inform the community about the CPP and grow expertise in the selected EBP throughout Contra Costa County. EBP training will also assist CBOs throughout the county in assessing their own capacity and interest in submitting proposals to provide CPP-described services now or in the future as our prevention program expands.

Once our CBO begins to deliver services, we intend to host focus groups on a quarterly basis so that families who have received prevention services and supports via the CBO will have the opportunity to share information about their experience with the prevention program. This will allow us to better track outcome measures at each prevention level, as well as the effectiveness of the services delivered.

It is Contra Costa County's intention that the current prevention planning governance structure will be employed for ongoing monitoring of the FFPS Program. Since the existing governance structure has been so actively engaged and invested in the planning process, they are most knowledgeable about proposed strategies and anticipated outcomes. Plans include establishing a continuous feedback loop to provide team members with information about implementation for their review and to receive their input about the implementation status, including suggestions for program improvement and refinement.

Barriers to Engagement

What barriers to engagement were discovered with any of the required entities, individuals, or system of care entities? Please describe these barriers and the plan to overcome the barriers.

Barriers to engagement throughout the prevention planning process were identified through Contra Costa County's use of the CDSS-provided Prevention Planning Capacity Assessment Tool. The tool's purpose was to assess the CPP Planning Team's overall motivation, commitment, and readiness to implement prevention efforts, and to aid in informing our prevention plan's content. The Assessment Tool was distributed to all members of the planning team. Representatives from CFS, Probation, Health Services, Behavioral Health, Public Health, Differential Response, the Office of Education, First 5, the Family Justice Centers, and the Child Abuse Prevention Council completed the tool.

In summary, the results indicate the collaborative of stakeholders involved in prevention planning efforts desire and are motivated for change, believe prevention is important, and are willing to work towards and for it. The stakeholders are outcome-focused and want their efforts to make a difference in the community, both short-term and long-term. In consolidating the assessment responses, it was determined that there is ample leadership buy-in, strong working relationships and networks (which are continuing to grow), and other prevention initiatives and efforts to build upon or weave into a countywide prevention strategy. There is a sharing of values about prevention work.

The primary barrier that was noted—and this continues to be a barrier—is related to workforce numbers and capacity. County and community-based organizations are not at their most optimal

point to support desired change due to a current lack of staff capacity across the board, existing mandates and responsibilities that require additional case management, and limited supportive structures and resources. However, despite the challenges, the planning members want to move forward with planning and implementing a prevention program, and determined that we would work together to find ways to be successful and produce positive outcomes.

The Assessment Tool also identified the following strengths, areas to develop, concerns, challenges, strategies, and priorities. A summary of the areas is outlined below:

Strengths – The areas in which the Title IV-E agencies were identified as ready and motivated for change to develop a comprehensive prevention plan were in the following domains: Provider Capacity and Capability, especially organizational stability, established meeting frequency, organizational equity, and shared values; Motivation for Change, particularly leadership buy-in, and collective commitment to change; and in System Provider Capacity and Capability, primarily history of shared partnerships.

Areas to develop – In the System Capacity and Capability domain, there were areas identified as “absent or missing,” which indicates a lack of readiness to begin the process of prevention planning. These areas will require capacity building to enhance readiness. Resources added through additional prevention funding will directly address some of the capacity concerns.

The CPP Planning Team also expressed concerns about infrastructure based on the fact that the West and Central regions of Contra Costa County are resource rich, thus indicating a need to strengthen the existing infrastructure in East County. Examination of this issue led to the CPP Planning Team’s decision to focus on East Contra Costa County. The other infrastructure concern is related to whether each organization will have the capacity to contribute staff and other resources to the prevention planning and implementation effort.

Another noted concern was about community engagement strategies. Respondents shared that this is an ongoing struggle that may be exacerbated by repetitive requests to community members which could affect their willingness or availability to participate. On the other hand, several responders did report their specific agency’s successes in engaging underserved youth, parents, caregivers, and partners with lived experience. Tribal engagement also remains limited. The CPP Planning Team agreed to build on the efforts of those agencies that have successfully engaged community partners.

Key challenges – The greatest identified barrier likely to impact the partners’ ability to effectively advance change and implementation processes is in the domain of System Provider Capacity and Capability, specifically due to not being at optimal staffing levels. Respondents reported that not having optimal staffing can lead to some reluctance to engage in new initiatives.

Priorities – The areas most important to address in implementation planning are: the existing resource gap in East County, the need for adequate staffing for all involved agencies, and community engagement.

Strategies – To address the priority areas and overcome identified challenges, the CPP Planning Team intends to: 1) identify implementation funds to hire qualified staff to augment the workforce and to participate in various workforce development opportunities; 2) focus on developing accessible East County prevention services; and 3) use both focus group and Community Cafe approaches with community members that will inform and guide prevention planning and provide a continual feedback mechanism during implementation.

Tribal Consultation and Collaboration

A description of efforts to invite and engage Tribes, and/or tribal organizations to gather input into the CPP.

According to 2020 Census information, American Indians and Alaskan Natives make up 1.1% of the population in Contra Costa County, but there are no federally recognized Indian Tribes within the county. In 2021, there were less than 10 ICWA eligible children with active CFS involvement. A close examination of the tribal affiliations for these children identified two children from the Chippewa tribe, two from the Quechan tribe, and the others from a variety of tribes. During the CPP planning process, the Planning Team has made concerted efforts to engage American Indian/Alaskan Native representatives in the CPP planning process to ensure their participation, and input in determining culturally appropriate and responsive prevention services from the AI/AN perspective.

CPP Planning Team members reached out to various tribal entities to identify a tribal liaison. These outreach contacts were numerous, including the Bureau of Indian Affairs Central California Agency, the Governor's Tribal Affairs Office, CDSS Tribal Affairs, Red Man Pocahontas of Oakley (a local nonprofit organization), Native American Heritage Commission, American Indian Child Resource Center, Quechan Tribe of Fort Yuma, and Scotts Valley Band of Pomo Indians of Concord. By the CPP submittal date, these efforts have not yielded any positive results. Contra Costa County takes the matter of tribal government-to-county government communication seriously and will continue to conduct these outreach efforts until a tribal liaison is identified.

Meanwhile, the following individuals joined our prevention planning and implementation efforts: Anthony Cesspooch Guzman, Chief Cultural Officer at the Native American Health Center (NAHC), and Veronica Shawnego, a Community Health Worker at NAHC who leads prevention and early intervention services. NAHC is a nonprofit organization that serves the Bay Area native population. NAHC provides comprehensive, community-driven health services and free, non-clinical services, including mental health referrals, support groups, and classes. NAHC offers system navigation, and hosts Talking Circle support groups for grief, loss, and substance abuse recovery, drum classes, Book Club, and Medicine Bag classes.

Contra Costa will continue to engage these representatives, and tribal leaders or others who may be identified later, in discussions regarding CPP content, updates, and any changes to comprehensive prevention policies, practices, and programs. The representatives will continue to be invited to the planning and implementation meetings. Information about programs and practices available will be disseminated via the existing CPP Planning Team Distribution List, and by adding the Native American Health Center to CFS internal distribution lists for Community Partnership Meetings and the quarterly Resource Family Newsletter.

Contra Costa County's existing policy and practice for native children and families involved in CFS services is to offer referrals which include tribal-specific resources. There is no difference in payment for these resources and other necessary services. Existing CFS contracts for services include language about providers demonstrating cultural sensitivity, or ensuring culturally relevant and sensitive services are delivered.

The Title IV-E agencies understand the importance of the Indian Child Welfare Act (ICWA). Children & Family Services works diligently to comply with ICWA mandates by developing a partnership with any child welfare-involved American Indian/Alaskan Native (AI/AN) families so

native children who are determined to be ICWA-eligible remain connected to their culture and community. The agency's social workers collaborate with Tribes to identify appropriate placements that are supported by the child's Tribe. CFS social workers follow all ICWA noticing procedures, and provide AI/AN families with an internal ICWA Resource Guide that contains culturally appropriate and responsive services for AI/AN families in the Bay Area, sorted into the following categories: educational services, employment and career services, legal services, behavioral/mental health services, substance abuse prevention and treatment services, medical services, and cultural resources.

When Contra Costa's prevention plan is approved, and we have identified a CBO who will provide prevention-based services for child welfare-involved families who are FFPSA Part I eligible candidates, and meet ICWA criteria eligibility, we will work to update our internal ICWA policies and protocols to ensure AI/AN families eligible for prevention-based services are given the opportunity to receive such services and supports via a referral to the CBO. It will be noted in the contract's obligations with the CBO that when a native family is referred to them—regardless of which level of prevention it is for—they must ensure the family is aware of local organizations centered around supporting the native population. The CBO will also be encouraged to work with any organizations that the native family is interested in to ensure there is no duplication of services.

Additionally, other local service providers will be trained to understand the purpose and components of ICWA relevant to their programs, and to engage Tribes in service planning and delivery for AI/AN children and their families. When a family provides information that there is "reason to believe" a child is a native child during an initial intake assessment by a local service provider, further inquiry is necessary and must be done by contacting the Tribe consistent with Welfare and Institutions Code (WIC) Section 224.2(e). As described in WIC Section 224.2(d), the information must be shared with the Tribe so the Tribe has an opportunity to participate in the family assessment, case planning, service delivery, and any safety and risk assessments. The local Title IV-E agencies will partner with tribes to ensure culturally appropriate and responsive services are available locally to meet the needs of native children and families.

Prevention services to an AI/AN child under the county Title IV-E program will be aligned with the ICWA requirements for activities to maintain a native child with their family. The following activities identify points in a prevention case where a child's Tribe(s) must be engaged:

- Inquiry regarding tribal membership or eligibility
- Notice to the Tribe(s) where the child is a member or eligible for membership
- Sharing information with the Tribe(s) for the Tribe to make a membership determination including, but not limited to the child and parents' names and dates of birth, and other information about the current status of the child and case
- Joint referrals to services, performed with the Tribe(s) input and involvement in decision-making
- Intake for services and keeping the Tribe up to date on information regarding service delivery
- Ensuring access to information regarding candidacy determinations, including sharing information with the Tribal IV-E agencies so that the agency may make the agency determination for its children
- Co-development of a Prevention Plan with the Tribe(s) input and involvement in decision-making
- Delivery and coordination of services

- Input into decision-making regarding Safety and Risk Assessment

INTEGRATED CORE PRACTICE MODEL (ICPM)

How did the Title IV-E agency incorporate and implement strategies for the use of the Integrated Core Practice Model with partner agencies and Tribes (e.g., leadership behaviors, candidacy assessment, family engagement, service delivery, and transitioning)?

The Integrated Core Practice Model (ICPM) is recognized as an integral component of the work that should occur among the systems that serve vulnerable children, youth, and families in California, and as such has been incorporated into all aspects of Contra Costa's CPP. (Refer to the Theory of Change section.) Additionally, the CPP Planning Team has approached the prevention planning process as a collaborative partnership effort, acknowledging that no one agency or organization can effectively develop a CPP or implement it on its own. ICPM principles have supported the complex reality of this CPP planning process.

In addition to leveraging the core ICPM elements to support CPP planning, the CPP Planning Team has adapted ICPM use toward prevention, and focused on equity and inclusion.

The CPP builds upon the AB 2083 Memorandum of Understanding (MOU) and the Interagency Leadership Team (ILT) process for System of Care. The AB 2083 MOU emphasizes a System of Care for children and youth in child welfare or probation foster care, or at risk of foster care entry, and a commitment to these children as the System Partners' collective children. The articulation of this shared perspective created a solid basis for developing a CPP.

The AB 2083 MOU led to the formation of a multi-agency collaboration, the Interagency Leadership Team (ILT). Contra Costa County held countywide training in 2021/2022 on ICPM principles, shared values, and practice standards expected from those who provide services to vulnerable populations. Staff of ILT member agencies attended, including CFS, Probation, Mental Health, the County Office of Education, and the Regional Center. The lessons from that ICPM training support the CPP interagency collaborative prevention planning process by providing a framework outlining how services should be developed and provided.

One of the most important elements of ICPM that CPP Planning Team members and partners have used in their planning and will use in prevention program implementation are the ICPM Principles: family voice and choice; natural supports; collaboration; teaming; community-based; culturally competent; individualized; strength-based; persistence; and outcomes-based. The CPP Planning Team is committed to these principles and have woven them into the planning process, and also articulated the need for planned prevention services to incorporate them.

Some of the specific ICPM Foundational Behaviors for Leadership and All Agency Staff that have been key to supporting Contra Costa's CPP planning include:

- **Communication:** Being open, honest, clear, and respectful in communications, especially being transparent about the Title IV-E agencies' roles and responsibilities in collaborating with other stakeholders to develop a CPP.
- **Teaming:** Seeking out and identifying more potential service partnerships with effective community-based service providers, especially those with cultural connections to families in need of services, and particularly in the selected geographic area.

- Working collaboratively with cultural and community representatives, and people with lived experience, in a cross-sector collaboration to plan and implement a CPP and establish a feedback loop for use during ongoing operations.
- Accountability: Exploring barriers, challenges, and concerns through a transparent process of inquiry that includes listening to those involved, identifying others who need to be included, developing a shared expectation about follow-up, and reviewing other data and information in order to make balanced assessments and informed decisions.
- Planning to identify and implement a transparent process to monitor for practice Motivational Interviewing model fidelity and effectiveness.

The CPP Planning Team is also aware of forthcoming ICPM enhancements, especially in the areas of race and equity, prevention, and the voice of lived expertise that, once available, will serve to further support and strengthen our planned CPP implementation.

In summary, the Integrated Core Practice Model is a practical guide to support county and community partners to improve delivery of timely, effective, and integrated services to children, youth, and families. The ICPM requires commitment to shared values and practices, building positive, respectful relationships across systems with youth and family members, and recognizing and appreciating different perspectives and accountability to achieve a shared vision. Because the key elements of the ICPM strengthen Contra Costa's CPP, all agency and community partners will be required to participate in ICPM training to ensure this foundation is in place across the county.

NEEDS ASSESSMENT SUMMARY AND ANALYSIS

What data or information (e.g., needs assessments, community metrics, or County Self-Assessment, if applicable) was used to identify children and youth at greatest risk of entry or re-entry into foster care in your community?

A review of countywide and local community needs assessments was completed to identify children and youth at greatest risk of entry or re-entry into foster care in our community, determine candidacy populations for prioritization, develop an understanding of Contra Costa County's service needs, and inform the selection of our service array, prevention strategies, and evidence-based practices. Planning collaborative members joined together to identify, gather, and review the following existing needs assessments:

1. California Department of Social Services Office of Child Abuse Prevention, Child Maltreatment Prevention Data Dashboard for Contra Costa County, 2008-2017
2. 2021 Report on Juvenile Justice Programs and Services in Contra Costa County
3. Contra Costa Behavioral Health Services and County Office of Education, Proposal to Mental Health Services and Accountability Commission, June 2020
4. Contra Costa HOME/CDBG Consortium, Contra Costa Consortium Needs Assessment, 2020-2025 Consolidated Plan, May 2020
5. Casey Family Community Opportunity Maps (for Contra Costa County and cities), downloaded in June 2022
6. Board of Supervisors Presentation, Potential Sales Tax Measure Ad Hoc Committee County Needs Assessment, May 2020
7. Contra Costa County Office of Education, 2021-2024 Foster Youth Services

- Coordinating Program Plan
8. 2018 Contra Costa Kindergarten Readiness Assessment
 9. Early Childhood Prevention & Intervention Coalition, 2020 Early Childhood Mental Health System of Care for Contra Costa County: Guidance for MHSA Planning
 10. Measure X Advisory Board Presentation to Contra Costa County Board of Supervisors
 11. Antioch Community Advisory Council (“Antioch Parent Advisory Group”), Community Assessment Survey: Results Analysis, 2021/2022
 12. City of Pittsburg, My Brother’s Keeper Pittsburg Phase 1 Summary Report, July 2022
 13. 2017 Contra Costa County Child Care Needs Assessment Executive Summary
 14. Richmond Department of Children and Youth, Richmond 2020 Community Needs Assessment Report
 15. New Americans in Contra Costa County 2021, Gateways for Growth
 16. 2019 Profile of the Unauthorized Population: Contra Costa County, CA, from Migration Policy Institute (MPI) analysis of U.S. Census Bureau data
 17. Contra Costa County Children & Family Services, County Self-Assessment, 2022
 18. Contra Costa County Behavioral Health Services, 2019 Mental Health System of Care Needs Assessment, December 2019
 19. Contra Costa County Behavioral Health Services, Behavioral Health Community Infrastructure Program Needs Assessment Findings, May 16, 2022
 20. California Healthy Places Index (for Contra Costa County and cities)
 21. Contra Costa County Office of Education Foster Youth Demographic Year Report 2019-2020
 22. 2022-23 Local Control Accountability Plan for Antioch Unified School District

How did you determine your target population/community?

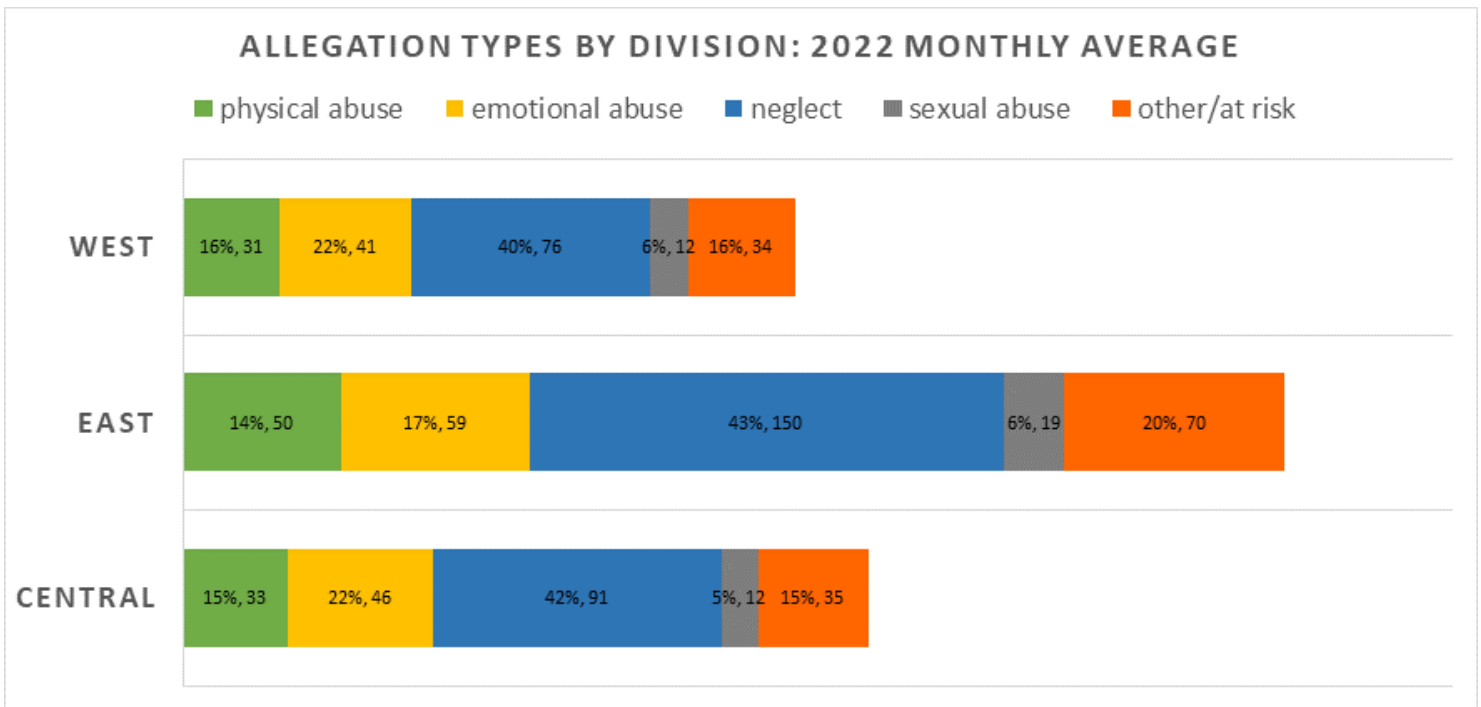
The following summary and analysis of the reviewed needs assessments describes the process the CPP Planning Team used to determine our target population and community. Documenting the outcomes of our needs assessments, and later, our asset mapping efforts by prevention level, also helped to fulfill the first required element in the 14 CPP elements noted by the CDSS. The CPP Planning Team considered the issues and needs identified, information about who in the county is most affected, examined data about children, youth, and families who have come into contact with—or have had formal involvement with—Children & Family Services and Probation, strategies that have been identified to address community needs, what resources are available, and what resources are most needed. After thoughtfully considering these factors, the CPP Planning Team determined that **the greatest need for services exists in East Contra Costa County**. Although needs exist throughout the entire county, and all residents are deserving of support in times of need in order to promote stronger family functioning and healthy outcomes, East County, and particularly the city of **Antioch**, is notable in its paucity of resources in comparison to its population numbers and acuity of need.

In its 2021 County Self Assessment and its review of safety and risk factors for child maltreatment, as well as more recently furnished internal data, the following facts were notable:

- Each month, Contra Costa’s 211 line receives more than 3,500 calls from county residents who need assistance. The frequency of 211 calls indicates the highest number

comes from East County.

- In 2019, a point in time count of the unhoused population in Contra Costa County, by city, indicates that homelessness is a problem throughout the county. However, Antioch is one of the cities with the highest count of those living outdoors.
- When sorted by geographical area, the most calls for service in 2018 related to domestic violence/intimate partner violence were from East County (42% of the total), and Antioch had the most of all East County cities.
- Data shows a concentration of poverty, lower income, and homelessness in all regions of the county, and in East County, especially in the cities of Antioch and Pittsburg.
- Comparing the three major CFS operational divisions (East, Central, and West) in the county indicates that East County has the most First Placements into foster care. East County also has the highest number of referrals per month. The chart below shows that the average number of monthly referrals received per District throughout 2022, with special attention to the allegation types.



- Children in Antioch are overrepresented in child welfare. The chart below indicates that the total percentage of all referrals received from May 2021 to October 2022 from Antioch is significantly higher than the actual city population as a percentage of the total Contra Costa County population.

| City | Number of Referrals May 2021-Oct 2022 | Percent of All Referrals May 2021-Oct 2022 | City Population as Percent of Total CCC Population | People Under 18 as Percent of CCC Under 18 Population | People Under 18 as Percent of CITY total population |
|--------------|--|---|--|---|---|
| Antioch | 1711 | 15.8% | 10% | 11% | 24.2% |
| Richmond | 1459 | 13.4% | 10% | 10% | 21.5% |
| Concord | 1121 | 10.3% | 11% | 11% | 21.7% |
| Pittsburg | 903 | 8.3% | 7% | 7% | 23.4% |
| Brentwood | 540 | 5.0% | 6% | 6% | 26.0% |
| Oakley | 520 | 4.8% | 4% | 5% | 28.1% |
| San Pablo | 513 | 4.7% | 3% | 3% | 26.4% |
| San Ramon | 474 | 4.4% | 7% | 9% | 27.8% |
| Martinez | 416 | 3.8% | 3% | 3% | 20.4% |
| Walnut Creek | 403 | 3.7% | 6% | 4% | 15.6% |
| Bay Point | 400 | 3.7% | 2% | 3% | 27.3% |

Notable information from Contra Costa Probation, via the 2021 Report on Juvenile Justice Programs and Services in Contra Costa County, and through Probation's own internal mechanisms for collecting both qualitative and quantitative data, included the following observations:

- Black/African American youths are overrepresented in Probation and in confined settings in the county. In 2020, Black/African American youths were approximately 14 times more likely than white youths to be arrested in Contra Costa, 15 times more likely to be referred to Probation, and 1.6 times more likely to have petitions filed (among youth referred to Probation).
- The majority of youth involved with Probation are male. From January 2022 to December 2022, at intake, the sex of juveniles came out to 86% male (240) and 14% female (39).
- The top needs for Probation-involved youth include behavioral health, education, and family services. Interview and focus group participants noted there is also a need for more educational services, including tutoring and after school programs, and employment services, including non-college career pathway programs.

- Antioch Unified School District is one of the school districts in Contra Costa that has less successful educational outcomes compared to county averages for suspension, expulsion, chronic absenteeism, and graduation rates.

The California Health Places Index (CHPI) indicates that Antioch is only at the 14.4 percentile for healthy community conditions when compared to other California communities, at the 13.2 percentile for healthy social conditions, and at the 10.3 percentile for healthy economic conditions. This information reveals that Antioch is in the bottom 10-15% of all California counties for conditions that contribute to healthy communities. In contrast, the entirety of Contra Costa County has a 92.5 percentile for healthy community conditions in comparison to other California communities.



CHPI also indicates a 92% Race/Ethnicity Diversity Index, with 43% Latinos/Hispanics, 18.8% Blacks/African Americans, 9.3% Asians, .9% Native Americans, and 25.6% Whites.

The CPP Planning Team learned and evaluated the following information about the people and communities in Contra Costa who are most affected:

- Low income population –
 - Children: in Contra Costa County, the child poverty rate is 13.2% and the child food insecurity rate is 15.6%. About 10,000 children ages 0-5 live at 100% poverty level and about 5,500 live in deep poverty (50% of poverty level, \$12,000 annually). 63% of eligible persons receive Supplemental Nutrition Assistance Program (SNAP) benefits. 16% of residents living under the 138% poverty line

are not covered by health insurance. 13.9% of infants had mothers who did not receive prenatal care in the first trimester.

- Immigrants: 15% of immigrants in Contra Costa County live at or below 150% of federal poverty compared to 13% of United States-born residents. 63,000 persons who are considered “unauthorized” live in Contra Costa County; 70% are from Mexico/Central America and 21% from Asia, and of these groups, 21% live below 100% of poverty level, and 26% between 100-200% of poverty level.
- Black/African American residents –
 - Black/African American residents in Contra Costa County are almost two times more represented in low income categories than the general population (and Hispanics 1.6 times).
 - There are 3.3 times more maltreatment allegations for Black/African American children than for the general population. Black/African American (and Native) children have substantiated abuse allegations more than three times that of the general population.
 - Black/African American youths are 14 times more likely than white youths to be arrested and 15 times more likely to be referred to Probation. They are overrepresented in Probation and confined settings, and have 3.9 times more felony arrests than the general population.
- East County – Significant needs and challenges exist countywide, especially in East and West County. However, the highest need is in East County, because service concentration has historically been in the central and west regions of the county, with a resulting resource gap in East County. Establishment of services in East County has not kept pace with the county population increases in that area.
 - Antioch (in East County)
 - 29% of households are living in poverty compared to 19% in the county overall.
 - 22% of Antioch families have single parents, compared to 13% countywide.
 - 15% of Antioch residents access SNAP benefits compared to 7% countywide.
 - Reduced/free lunch rate is at 68% in Antioch compared to 38% countywide.
 - 36% of children ages 3-4 in Antioch are enrolled in school compared to 54% countywide.
 - 21% of Antioch adults have a Bachelor’s Degree compared to 43% countywide.
 - Of the 19 Contra Costa County schools with a high foster youth population, five schools, or 26%, are in Antioch. Deer Valley High School in Antioch has the highest population of foster youth. In 2019-2020, there were 48 foster youth at Deer Valley, down from 63 foster youth in 2018-2019. In those same years, four other Antioch schools had the highest foster youth populations, including Antioch High School, Dallas Ranch Middle School, John Muir Elementary School, and Diablo Vista Elementary School.

- For the student population for the Antioch Unified School District (AUSD), 74% of students are Socioeconomically Disadvantaged, 18.8% are English Learners, 1.15% are Foster Youth, and 16% are Students with Disabilities.
- AUSD experienced an increase in chronic absenteeism and suspensions in 2021-2022 upon the return to in-person learning following 18 months of online distance learning during the height of the COVID-19 pandemic.
- Pittsburg (also in East County, located next to the city of Antioch)
 - 34% of households are living in poverty compared to 19% in the county overall.
 - 20% of families have single parents, compared to 13% countywide.
 - 15% of residents access SNAP benefits compared to 7% countywide.
 - Reduced/free lunch rate is at 58% compared to 38% countywide.
 - 39% of children ages 3-4 are enrolled in school compared to 54% countywide.
 - 23% of adults have a Bachelor's Degree compared to 43% countywide.
 - Latino and Black/African American male youths combined represent almost 80% of felony youth arrests in Contra Costa.
 - Safety and community violence are concerns identified by youth and parents.

SOCIAL DETERMINANTS OF HEALTH

In order to ensure a thorough examination of issues during the needs assessment and target population identification process, the CPP Planning Team reviewed and analyzed community needs based on the Social Determinants of Health and the Protective Factors Framework. **Appendix A** summarizes that work.

DATA SOURCES

What data sources were used to conduct a strength and needs assessment of AI/AN children and black children who are disproportionately represented in the county child welfare and probation systems?

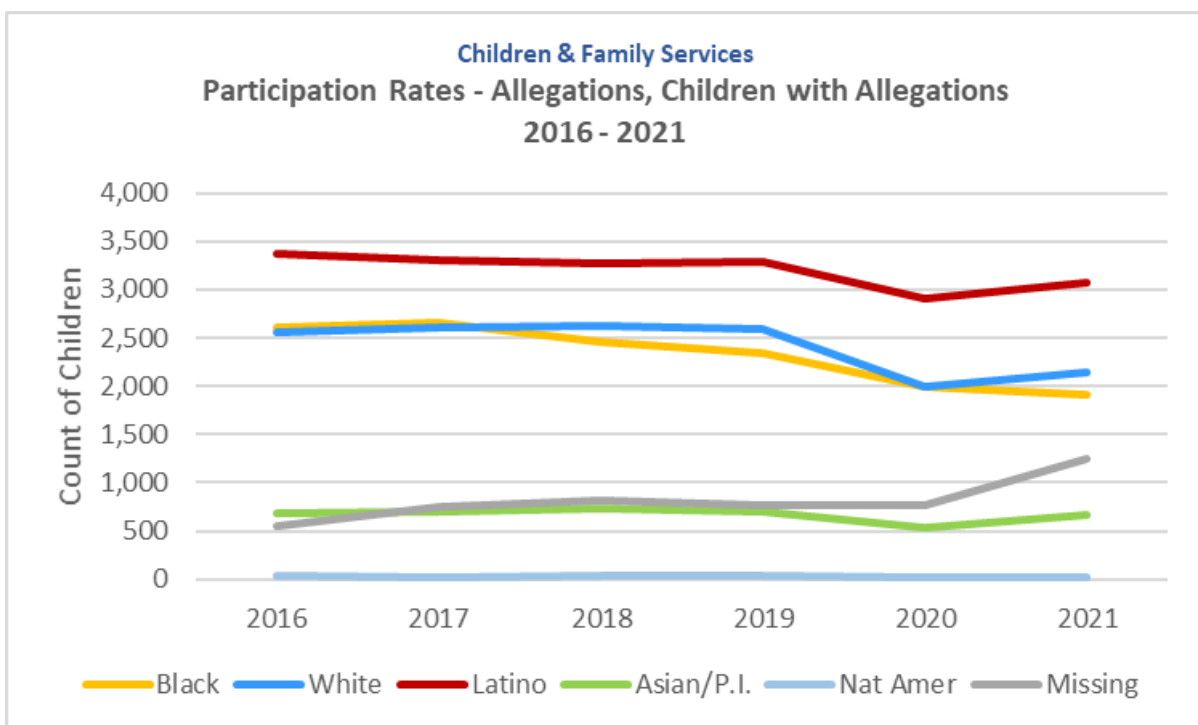
A variety of sources were utilized in gathering and reviewing information pertaining to American Indian/Alaskan Native and Black/African American children who are overrepresented in both the child welfare and juvenile probation systems, as well as numbers more specific to poverty, including: the Casey Family Opportunity Maps (2022), the California Child Welfare Indicators Project (CCWIP), the California Department of Finance, Child Welfare Services/Case

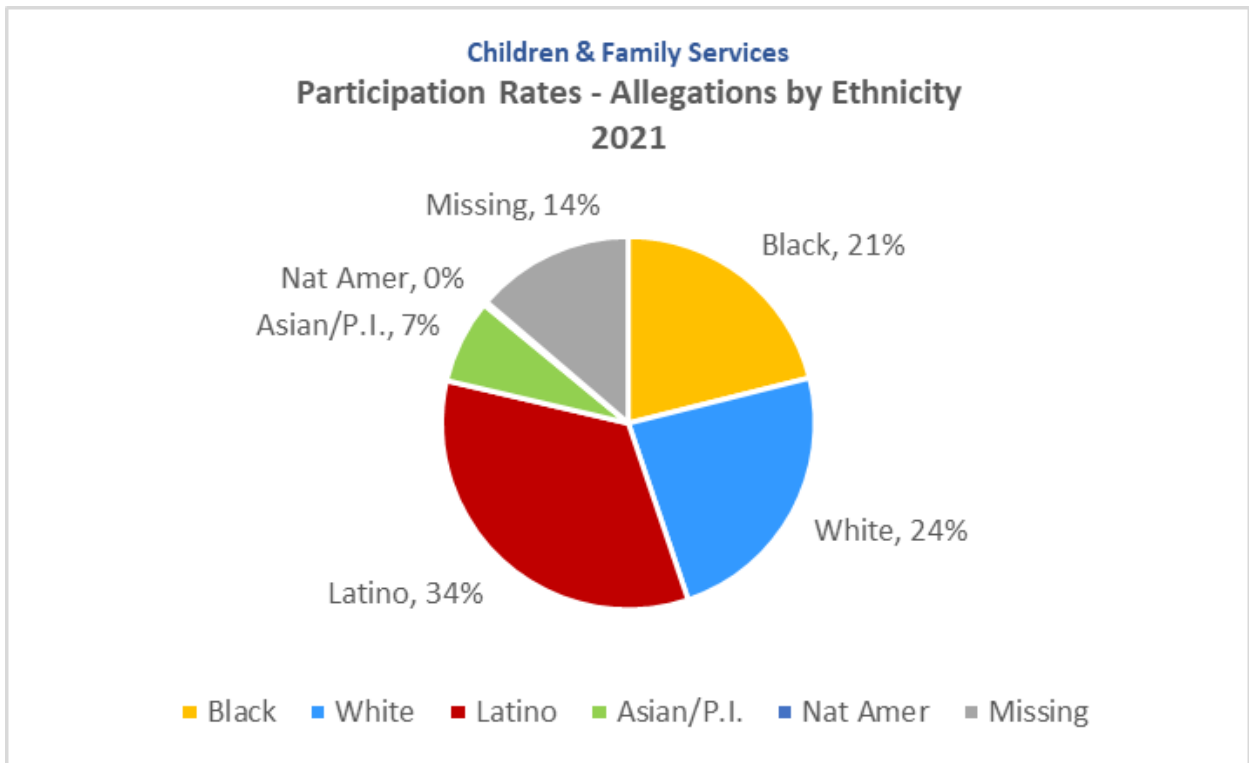
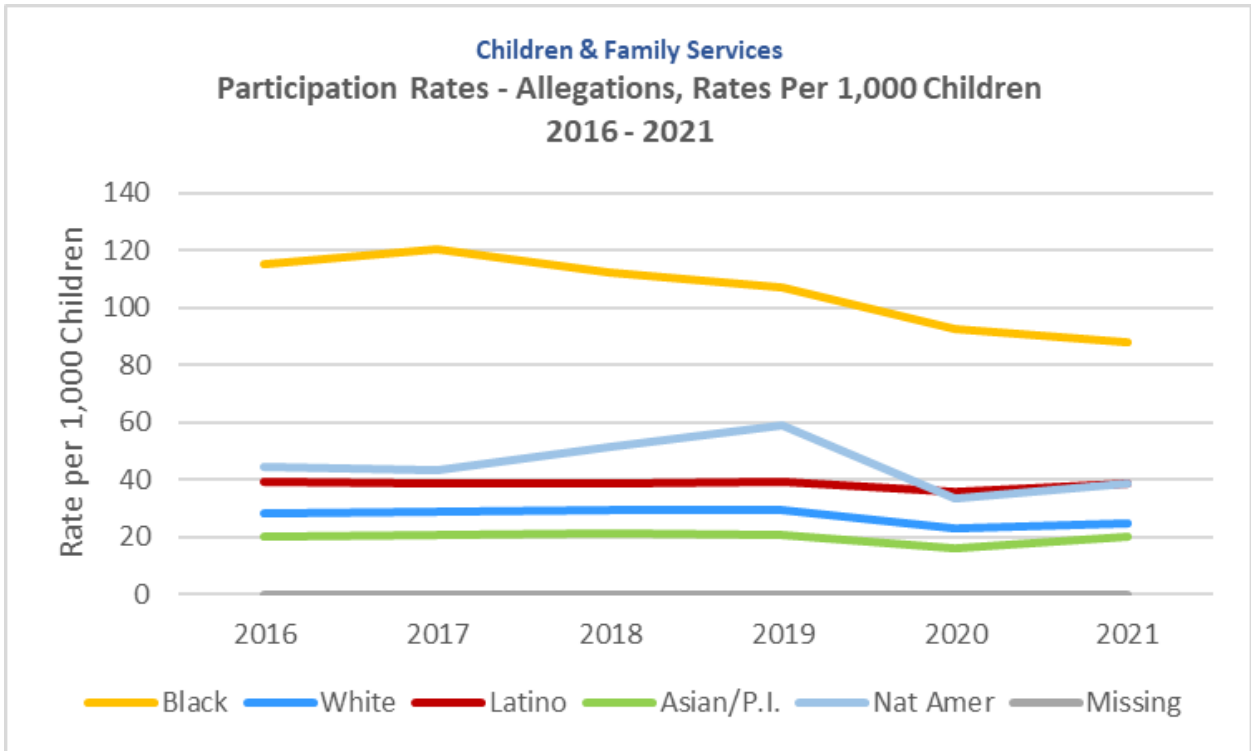
Management System (CWS/CMS), the 2022 Contra Costa County Self-Assessment, internal Contra Costa Probation data, and a few of the countywide needs assessments. Existing data was also utilized to inform our service array assessment.

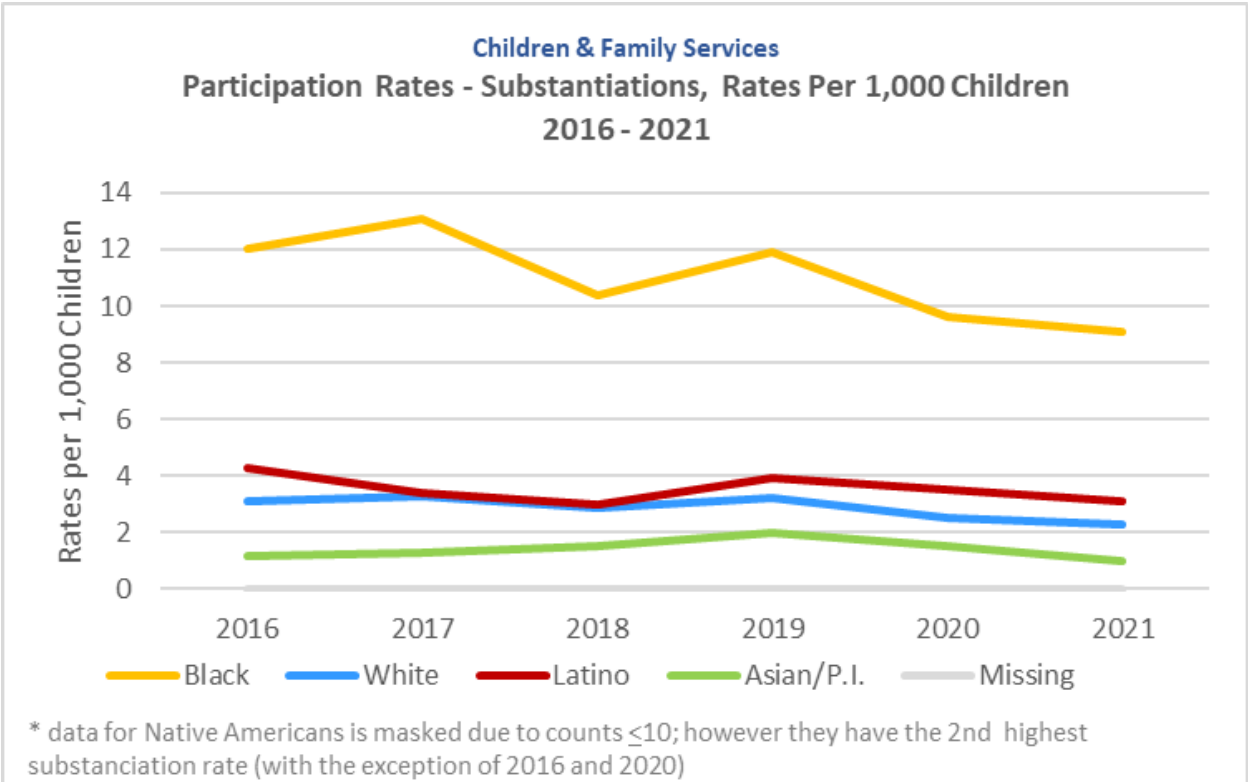
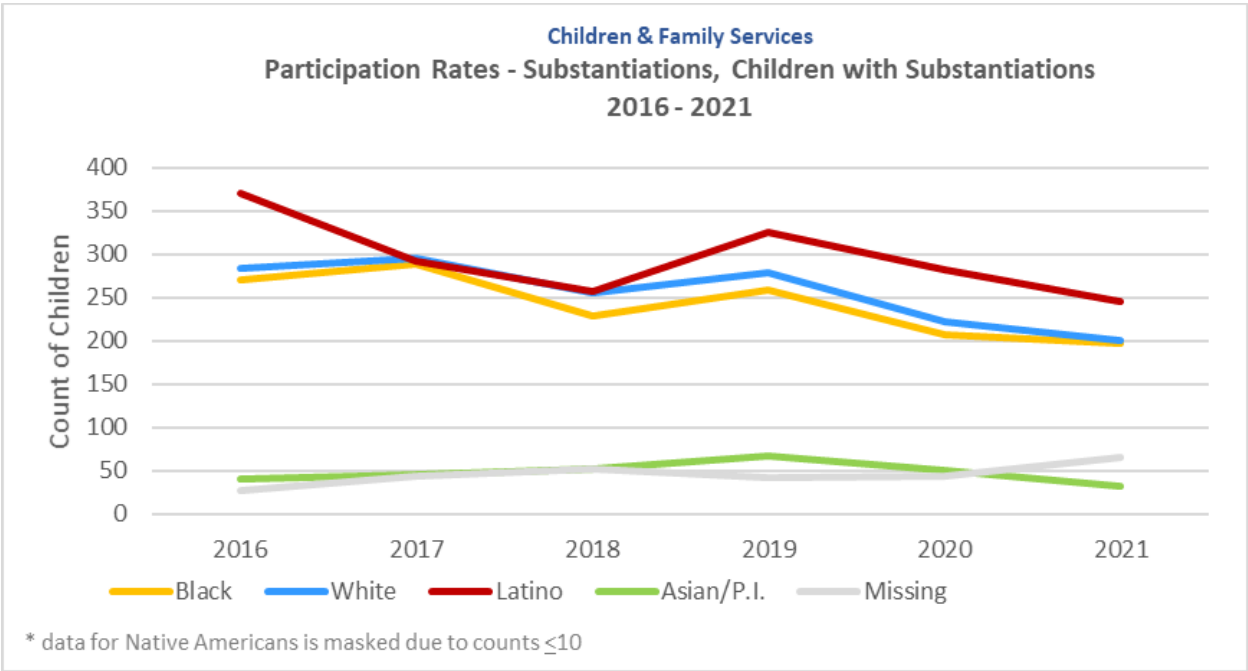
According to the Casey Family Opportunity Maps (2022), AIs/ANs represent about 5,500 (0%) of Contra Costa County’s 1.1M total population, and about 800 (1%) of Antioch’s 105.5K total population. CCWIP Disparity Indices Reports that when compared with the white population, Native Americans are 1.5 times more likely to have an allegation reported to child welfare in Contra Costa (2022). The CCWIP also urges caution when using these indicators, especially when the rate is computed based on a small population. There may be disparities due more to the small denominator than excessive system contact. From a Contra Costa CFS perspective, looking at two different points in time, there were 17 ICWA eligible and 27 primary or mixed ethnicity of American Indian children in 2015, and in 2021, there are less than 10 ICWA eligible and 16 primary or mixed ethnicity of American Indian children. Because of low counts, no further analysis is available.

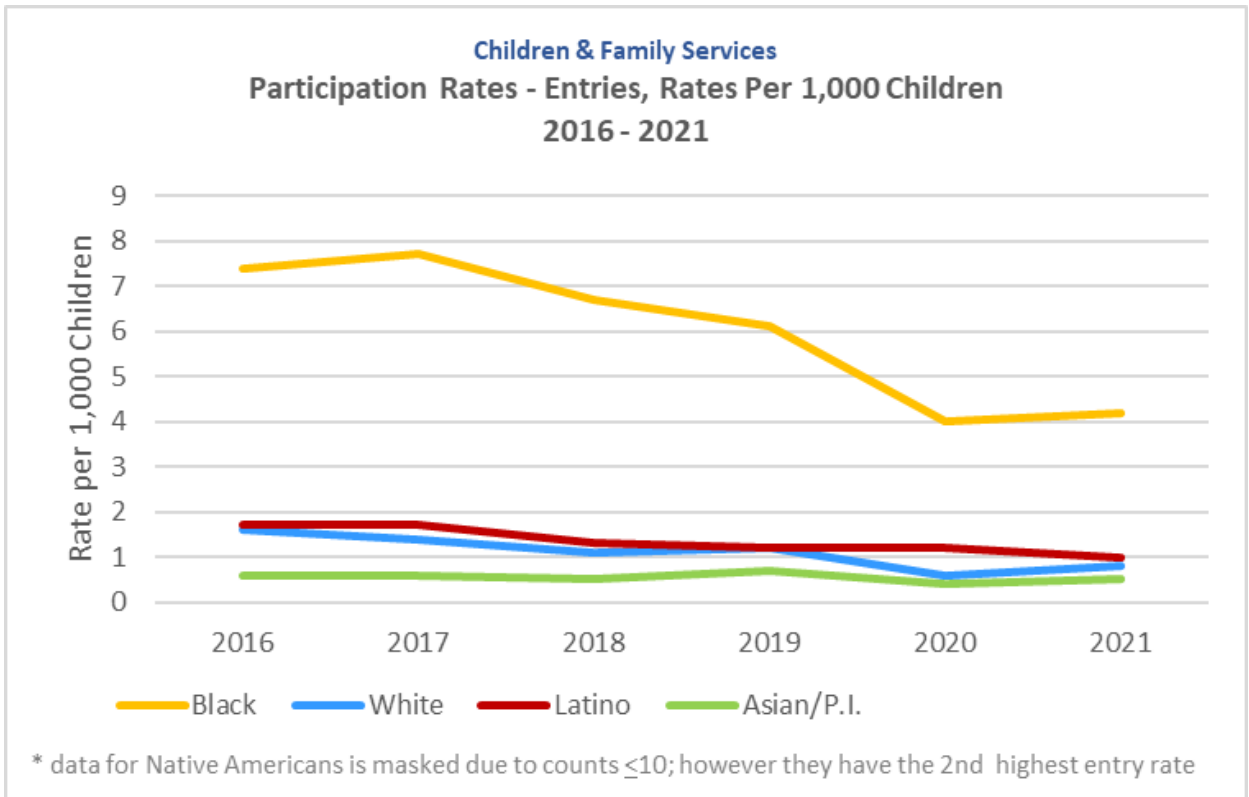
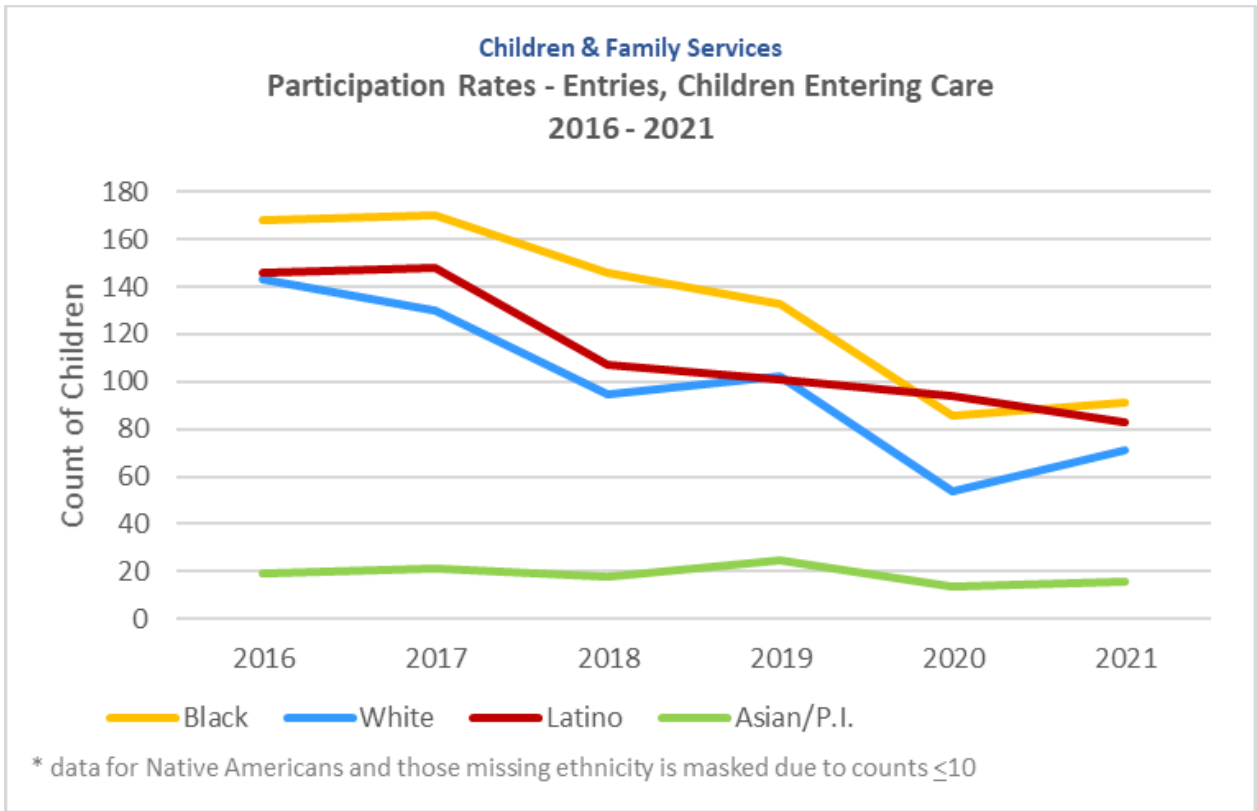
The California Department of Finance reports 279,000 children in Contra Costa (2022) and the CCWIP calculates that about 23,000 live in poverty.

Contra Costa County CFS data on child welfare participation rates (allegations, substantiations, and entry into foster care) were stratified and examined by race/ethnicity for the period of 2016 to 2021. Both raw numbers of children and rates per 1,000 children in the population are reported. Per the CCWIP, rates per 1,000 children are based on California Department of Finance annual population counts. As shown in the charts below, the rates per 1,000 children demonstrate that Black/African American children are at higher risk than other ethnic groups of having allegations, substantiations, and ultimately entry into foster care. The participation rates of Black/African American children have been decreasing in recent years, but it should be noted that there has been a significant decline in the total number of youth in open foster care cases over the past several years.

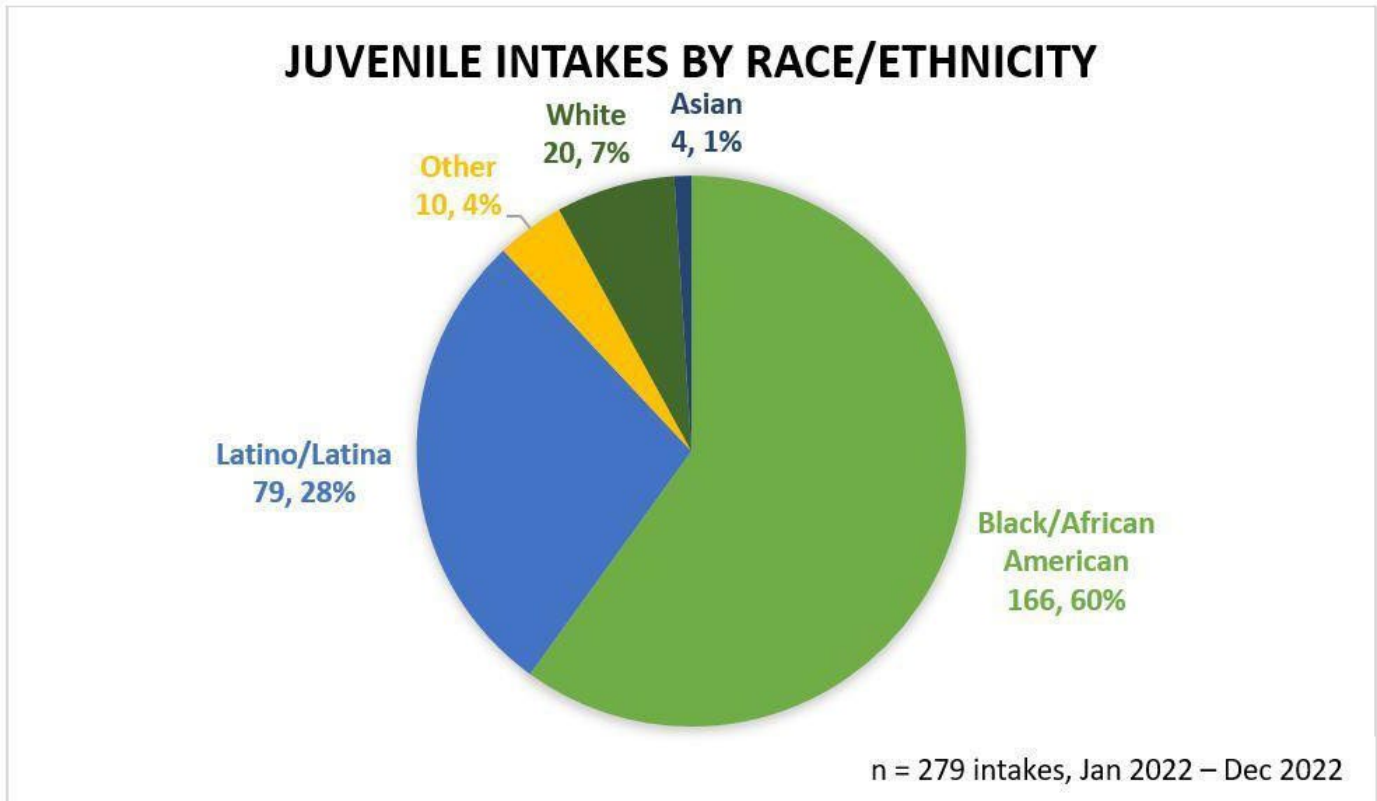






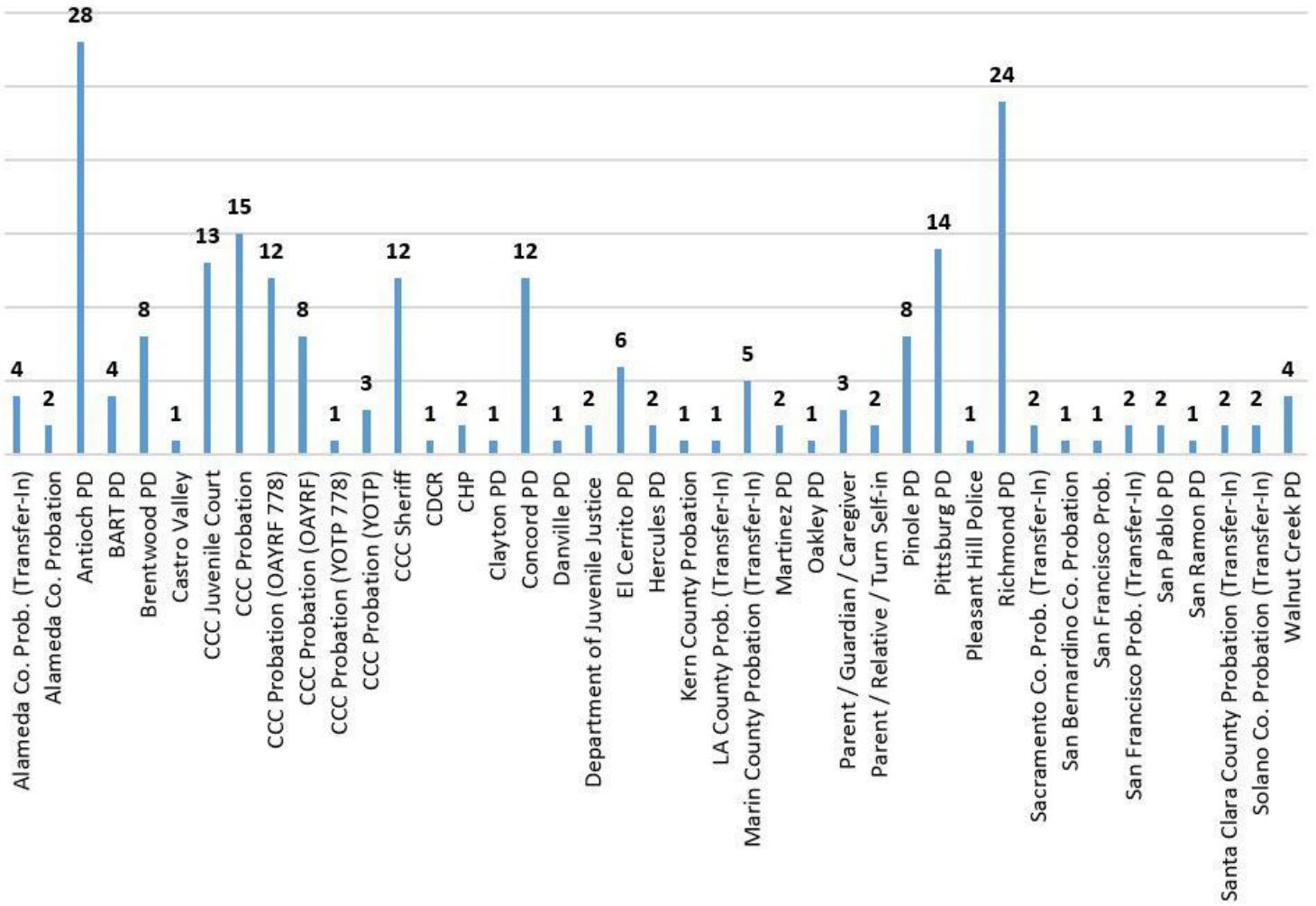


Data provided by Contra Costa Probation indicates the majority of youth whom they have come into contact with are Black/African American. In 2022, Contra Costa Probation's contacts with Black/African American youth were significantly higher than other races/ethnicities, though their contact with Latino/Latina youth was notable as well.



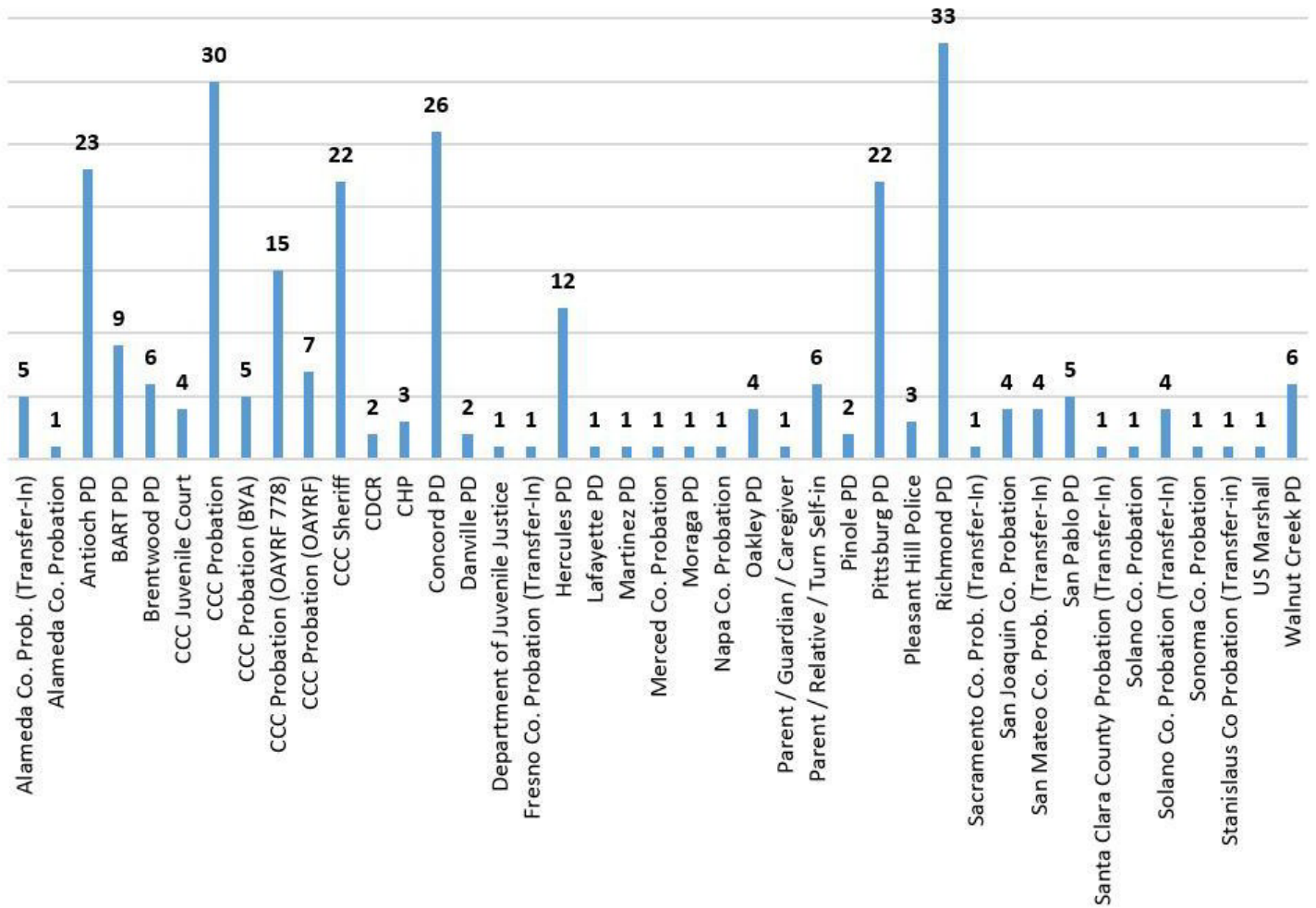
Contra Costa Probation data also indicates that the Antioch Police Department had the highest number of juvenile arrests in 2021. The number of arrests by the Antioch Police Department in 2022 did not end up being the highest, but the overall count was still significant. Refer to the charts on pages 31 and 32 for the number of juvenile intakes made by each agency.

Juvenile Intakes in 2021 by Agency



■ Arresting Agency. n = 214 intakes, Jan 2021 – Dec 2021

Juvenile Intakes in 2022 by Agency



■ Arresting Agency. n = 279 intakes, Jan 2022 – Dec 2022

NEEDS OF THE SELECTED POPULATION

What are the needs of the people in the selected population/community, particularly in the areas of substance use, mental health, and parenting support?

In East Contra Costa County, the greatest need is to develop a more robust prevention services infrastructure. The city of Antioch in East County has grown significantly over the years due to an influx of new residents from the greater Bay Area seeking more affordable housing; however, the services structure has not grown to accommodate the needs of the new, larger population. The population in East County continues to grow mostly because it generally offers the most affordable and new housing in the county and the surrounding Bay Area. As a result, there are great needs in the areas of parenting support, mental health services, and substance abuse prevention and treatment.

Overall, in Contra Costa County, the greatest documented needs are among **poor residents, Black/African American, immigrant, and LGBTQ+** residents, particularly in **East County and West County**.

The most frequently cited needs:

- Increase the number of resources and the accessibility of services in East County, especially in the city of Antioch.
- Strengthen the safety net of supportive services critical to establishing stability and safety for individuals and families.
- Provide family services, parenting support, and skills education to develop healthy social and coping skills, and adaptive functioning for children and youth.
- Increase behavioral health and substance abuse prevention and treatment services, especially services that are culturally appropriate and trauma-informed.
- Increase resource availability for Black/African American youths.

Mental health, substance abuse, and parenting support:

- Behavioral Health/Mental Health (BH/MH) and Alcohol & Other Drugs (AOD) services –
 - These services are lacking for all ages. There are often waitlists to receive services, and the needs for these services are increasing significantly.
 - Significant BH/MH needs are being identified for children as young as 0-5.
 - Direct services that are trauma-informed and culturally responsive are needed.
- Family services – Services focused on in-home stability and parenting skills/education and support in order to build protective factors are needed. For the past five years, lack of adequate supervision has contributed to child neglect, drownings, and injuries. Black/African American children also experience the highest level of child fatalities in Contra Costa County. This information was noted by the co-chair of the county's Child Death Review Team. The final draft of the multi-year Contra Costa County Child Death Review Team Report is pending publication by Contra Costa Health Services.
- For youth involved in the juvenile justice system – Youth and their families need substance abuse prevention and treatment, behavioral health services and support, prosocial skills, family and living arrangements, education, and employment services. The need for services far exceeds availability.

Other needs:

- Poverty – The safety net of supportive services must be strengthened, especially housing, legal assistance, advocacy, and concrete supports and services in times of crisis, e.g., financial assistance to prevent eviction.
- Housing –
 - 30,000 people in Contra Costa County have a documented need for housing assistance. Most have a disability or are victims of domestic violence/intimate partner violence.
 - Compared to national and California rates, Contra Costa County's transitional age youth (ages 15-25) have higher homelessness rates.
 - Unhoused individuals also have more justice system contact.
 - Homelessness continues to increase due to lack of affordable housing, unemployment, poverty, mental illness, and substance abuse.
- Location of services – Services are present in each region of the county, but due to lack of transportation, services are not always accessible to those living outside of the immediate area surrounding a service location.
- Education –
 - There is an overall lack of high-quality early childhood education programs in the county.
 - Only 44% of Contra Costa County children are considered ready for kindergarten.
 - About 20% of immigrants in the county are limited English proficient (LEP) and 63% of them speak Spanish at home. The largest number of immigrants, and the largest percentage of LEP immigrants, live in Richmond and San Pablo. The second largest percentage of LEP immigrants live in Antioch.
- Domestic Violence/Intimate Partner Violence – Calls to law enforcement increased from 2,860 in 2017 to 4,134 in 2019.
- Commercially Sexually Exploited Children and Youth (CSEC/Y) – Services are needed to increase awareness of, and services for, CSEC/Y and for children and youth who are considered at-risk of sexual exploitation.
- Child care –
 - Shortages are greatest in West and East County, especially in cities with more ethnic and racial minorities, the lowest median family incomes, and the highest predicted population growth for the next 10 years. In contrast, there is a noted surplus of preschool spaces in the central part of the county.
 - There is a significant need for more subsidized child care, especially for children ages 0-2 and ages 5-12.
 - There is a need for childcare for children who have special needs.

IDENTIFIED STRATEGIES TO ADDRESS THE NEEDS OF THE SELECTED POPULATION

What do you need to meet the needs of those in your selected population/community?

Identified Strategies to Address Needs

The primary need in Contra Costa is to establish a more robust prevention services infrastructure in East County. This will require collaborating and partnering with existing East County services agencies, organizations, and programs, including informal entities.

The following recommendations were identified in the various community assessment documents that were reviewed for the prevention planning process, with special attention to the reviewed needs assessments, data that was collected, and qualitative stories from those with lived experience and other members of the CPP Planning Team.

- Increase the resources and accessibility of services in East County, especially Antioch.
- Strengthen the safety net of supportive services that are critical to establishing stability and safety for individuals and families. Examples include:
 - Access to food
 - Emergency/short-term housing
 - Emergency financial assistance
 - Case management
 - Benefits access assistance
 - Referrals and linkage to resources in the community
 - Transportation assistance
 - Crisis support
- Increase behavioral health and substance abuse prevention and treatment services, and provide all such services in a timely, trauma-informed, and culturally appropriate and responsive manner.
- Provide family services and in-home parenting support and skills education to help children and youth develop healthy social and coping skills, and adaptive functioning.
- Provide job training and placement opportunities, including non-college pathways for youth, and microenterprise and small businesses for others.
- Increase awareness of school-based services, e.g., tutoring and afterschool programs.
- Develop more community childhood activities and programs geared toward providing practical and useful, enjoyable skills, and opportunities that will provide a foundation for growth and healthy outcomes.

SERVICE ARRAY AND ASSET MAPPING

According to the assessments, how is the current service array meeting or not meeting the needs of children, youth, parents, and families in your community?

Contra Costa County has a vast service array countywide. However, according to the various needs assessments reviewed, and in thoughtful discussions with members of the CPP Planning Team and those with lived experience, the current service array in East County is not meeting the needs of children, youth, parents, and families who live there.

The biggest gaps in East County's service array include:

- Limited prevention services infrastructure in East County.
- Insufficient resources and accessibility of services in East County, especially Antioch.
- An insufficient safety net of supportive services for establishing stability and safety for individuals and families, including:
 - Access to food
 - Emergency financial assistance
 - Case management
 - Benefits access assistance
 - Referrals and linkage to resources in the community
 - Transportation assistance
 - Crisis support
 - Emergency/short-term housing or assistance
- Insufficient behavioral health and substance abuse prevention and treatment services, including services that are delivered in a timely, trauma-informed, and culturally appropriate and responsive manner.
- Insufficient family services and parenting support and skills education to develop healthy social and coping skills, and adaptive functioning.
- Insufficient job training and placement opportunities, non-college pathways for youth, and microenterprise and small businesses for others.
- Insufficient programs for students to succeed in school, e.g., tutoring and afterschool programs.
- Insufficient community childhood activities and programs for providing practical and useful, enjoyable skills, and opportunities that will provide a foundation for growth and healthy outcomes.

The limited number of public and private nonprofit prevention services available in Antioch are funded by both public and private sources with some programs blending public and private or foundation funding. CFS and Probation have an established history of contracting with Antioch and East Contra Costa County-based nonprofit organizations to provide prevention services, including some in-home services. Most of the programs and services identified in our primary, secondary, and tertiary prevention asset maps (Appendices B, C, and D) are available to segments of the CPP selected target population. Currently available services are, however, available to a limited number of families, and a number of programs have lengthy waiting times.

Few services are provided in consumers' homes or at locations selected by consumers. Starting in the spring of 2020, in-home and mobile programs have been compelled to allocate additional administrative, training, and material resources to crafting and implementing enhanced policies and procedures to ensure the health and safety of staff, volunteers, and consumers at all service delivery locations.

Community-based organizations and public agencies serving Antioch residents share commonalities within their mission statements, and relationships between public and private nonprofit organizations are growing with the support of a community foundation, Antioch provider alliance and established service delivery partnerships that include community members and both public and private agencies. There is not yet a prevention services infrastructure in place to support routine and efficient collective performance feedback and evaluation. Service providers currently gather similar consumer demographic information and are interested in more robust and accessible data and outcome reviews inclusive of the community. The implementation of the CPP program will support collaboratively identified outcome measures, data sharing agreements, and the creation of a data management expert advisory group. These data management experts can help inform decisions regarding outcome measures, quality control and service model fidelity, ongoing training needs, efficient and ethical data sharing, and information technology capacity building.

The CPP Planning Team developed countywide asset maps categorized by level of prevention and the Protective Factors, which may be referenced in the Appendices section. The services and agencies that are located in East County have been highlighted in order to demonstrate that this area of the county does not have an adequate number of resources. Engaging in asset mapping helped the CPP Planning Team to inform and describe the content of our plan, identify the candidacy population we will prioritize, and identify much-needed services and supports.

Appendix B – Primary Prevention
Appendix C – Secondary Prevention
Appendix D – Tertiary Prevention

Although there is some overlap when it comes to agencies and programs that have the ability to serve justice-involved youth, a separate, existing needs assessment completed by the Contra Costa Probation Department as part of the 2021 Report on Juvenile Justice Programs and Services in Contra Costa County has been included on page 38. Some of the services are provided through funding from the Juvenile Justice Coordinating Council (JJCPA) and the Youthful Offender Block Grant (YOBG).

Contra Costa County Justice-Involved Youth Service Providers by Region & Funding Source

| | West Sub-Region | Central Sub-Region | East Sub-Region |
|--|--|---|--|
| JJCPA & YOBG Programs General Community Resources | 1) Bay Area Community Resources (BACR) - El Cerrito 2) Bay Area Legal Aid (BALA) 5) Family Justice Center - Richmond 8) La Familia - Richmond 13) RYSE Center | 3) CCC Office of Education (CCC OE) 4) Community Options for Families and Youth (COFY)/Embrace** 5) Family Justice Center - Concord 7) Health, Housing & Homelessness (H3) 8) La Familia - Concord 9) Love Never Fails 10) Probation Department 11) Public Defender's Juvenile Unit 14) Seneca Family of Agencies (Seneca)** 15) STAND! | 3) Family Justice Center - Antioch 6) Fresh Lifelines for Youth (FLY) |
| | 12) A Step Forward - El Cerrito 18) Brighter Beginnings - Richmond 21) Calli House Youth Center - Richmond 21) Catholic Charities of the East Bay - Richmond 24) Bright Futures Growth and Development Center 25) Building Blocks for Kids 30) Community Health for Asian Americans 32) Community Works* 36) Contra Costa College 41) East Bay Center for Performing Arts 42) Familias Unidas 44) Fred Finch Youth Center 49) Getting' Outta Dodge Ministry 50) Girls Inc. of West Contra Costa 55) Latina Center 60) Missey* 61) Rubicon Programs - Richmond 63) New Life Movement 66) Pomona Apartments Transitional 67) West Contra Costa Youth Service Bureau - 20th St Richmond 67) West Contra Costa Youth Service Bureau - Broadway Richmond 70) YWCA - Richmond 72) Reentry Success Center 73) Richmond Police Activities League 74) Richmond Promise 75) Richmond Works 76) Safe Return Project 77) Spark Point 79) The Latina Center 80) Urban Tilth 81) Youth Enrichment Strategies (YES) | 12) A Step Forward - Concord 17) Back on Track 21) Calli House Youth Center - Martinez 22) Catholic Charities of the East Bay - Concord 23) Boys & Girls Clubs of Contra Costa 26) C.O.P.E. Family Support Center 28) Center for Human Development 29) Child Abuse Prevention Council for Contra Costa County (CAPC) 33) Diablo Valley College - San Ramon 33) Diablo Valley College - Pleasant Hill 35) Congress of Neutrals 37) Contra Costa Independent Living Skills Program 38) Contra Costa Youth Continuum Services 39) CSU East Bay Concord 43) Foster a Dream 46) Future Unchained 52) Interfaith Council 53) Interfaith Council of Contra Costa County 57) Lutheran Social Service 59) Martinez Adult Education 60) Missey* 62) Mt Diablo USD 68) Workforce Development Board - Pleasant Hill 68) Workforce Development Board - Concord 69) Rainbow Community Center 70) YWCA - Arnold Dr Martinez 70) YWCA - Glacier Dr Martinez 78) Strengthening Families | 12) A Step Forward - Antioch 18) Brighter Beginnings - Lone Tree Way Antioch 18) Brighter Beginnings - West 5th St Antioch 19) Bay Area Rescue Mission 20) Beat the Streets 31) Community Violence Solutions 32) Community Works* 40) D-1 & Only Martial Arts Academy, Inc. 45) Lift Up Contra Costa (LUCC) - Pittsburg 45) Lift Up Contra Costa (LUCC) - Antioch 47) Lincoln Child Center (Lincoln Family) - Pittsburg 48) Los Medanos College - Brentwood 48) Los Medanos College - Pittsburg 51) Golden Hills Community Church 60) Missey* 61) Rubicon Programs - Antioch 64) One Day at a Time 65) Opportunity Junction 70) YWCA - Pittsburg 70) YWCA - Antioch 70) YWCA - Bay Point 70) YWCA - Oakley 71) Reach Project Inc |

* Physical location outside of Contra Costa County but offers services in the County.

SERVICE ARRAY EXPANSION TO MEET THE NEEDS OF TARGETED POPULATION

How will your current service array adjust to meet the needs of your FFPSA candidacy target population and your non-FFPSA target population (in primary, secondary, and tertiary prevention service tiers)?

The biggest change will be the establishment of a community pathway. Developing a community pathway in the city of Antioch, where there is significant demonstrated racial disparity, is fundamental to an equity-centered approach to prevention. A community pathway provides families access to community-based services before a call needs to be made to child protective services and/or when direct involvement with CFS or Probation is not warranted. A community pathway can serve to reduce racial disparities by keeping vulnerable children and families who most need supportive services out of "the system" while providing needed services and monitoring safety and risk. Contra Costa County will be relying more on the help and support of

community partners to implement culturally responsive, trauma-informed community programs and services that can better serve poor and Black/African American families.

The service array will be expanded in Antioch as follows:

PRIMARY - There will be a program that will provide a safety net of supportive services that include concrete supports, navigation assistance, and advocacy services in times of family stress and crisis to prevent harm before it occurs. Poverty increases Black/African American families' exposure to the child welfare system. Black/African American households experience homelessness at a disproportionate rate relative to the general population. Families living in poverty have more difficulties accessing housing, behavioral health, health, transportation, employment, child care, and other supportive resources required to keep families stable and children and youth safely at home. In its primary prevention services, Contra Costa will offer referrals and linkage to, and advocacy with, California's various safety net programs that are intended to alleviate and disrupt poverty, including CalWORKs, CalFresh, and Contra Costa's housing and homelessness programs.

SECONDARY - There will be a program for families who have one or more risk factors, e.g., parents with mental health concerns, parental substance abuse, exposure to domestic violence/intimate partner violence, parental or child disabilities, young parental age, poverty, etc., to receive in-home (or natural, place-based) family preservation-type services to stabilize families when they are at a crisis point. This would include case management, parenting support and education, skills-building, and side-by-side coaching.

TERTIARY - There will be a program that will provide services for families who have experienced child maltreatment, in order to mitigate trauma, reduce negative consequences, and prevent recurrence, including foster care entry or detention by Probation. Services will focus on two populations: (1) Families with children or youth not requiring either formal CFS and/or Probation intervention because the reasons contributing to allegations of maltreatment or delinquency can be resolved by other protective supports; and (2) Families receiving CFS Family Reunification Services who are transitioning to Family Maintenance Services and would benefit from additional support.

EVIDENCE-BASED PRACTICE SELECTION

Outline the services that the Title IV-E agency will provide that address a continuum of primary, secondary, and tertiary prevention, intervention strategies and services for the selected populations.

Contra Costa County drew on diverse evidence and a stakeholder engagement process to drive data-driven and locally-informed decisions around the most appropriate evidence-based services to support the county's prevention-eligible children and families, and to also address the desired strategies and services at each prevention level. The specific services and interventions that have been designed to support safety, permanency, and well-being, and to promote stable and nurturing environments for children and families, are available for review in our logic models, and are also reflected in our Theory of Change.

The CPP Planning Team selected Motivational Interviewing and the Protective Factors Framework for its fundamental strategies. All planning members, including the Mental Health Program Chief and two Mental Health Program Managers from County Behavioral Health, were consulted and in support of this approach.

In its five-year FFPSA Prevention Plan, California stated its intention to use Motivational Interviewing (MI) as a cross-cutting intervention beyond solely substance use disorder treatment. MI is presently considered well-supported in the Title IV-E Clearinghouse for parent and caregiver substance use, which allows states to receive reimbursement for MI as part of their service array under FFPSA. Additionally, the CDSS requested a waiver for the evaluation of MI both as a substance use disorder treatment intervention as well as a cross-cutting intervention.

As California has stated in its plan, MI is showing considerable success in services including in-home parenting skill-building, mental health treatment, and family engagement and interaction. MI is also considered an effective service delivery strategy with both adult and youth populations. As a result, California has proposed the use of MI in a variety of settings, including community agencies and clinical settings, and that counties may use MI to improve engagement with families during each encounter. When delivered as a stand-alone EBP, MI is delivered by clinicians, social workers, and/or case managers. As examples, clinicians may implement MI as a substance use treatment service; social workers and case managers of FRCs and CBOs may deliver MI as a family engagement and case management strategy; and Title IV-E case workers may use MI to improve engagement with families during each encounter.

The primary reasons Contra Costa County plans to use MI as a fundamental Evidence-Based Practice and foundation for all levels of its prevention program is MI's focus on enhancing internal motivation to achieve behavioral change, reinforcing that motivation, and working to develop a plan to achieve change. Contra Costa intends to use MI to engage successfully with families. The parents, caregivers, and families that Contra Costa plans to serve are experiencing significant stressors that can include isolation, hopelessness, fear of asking for and accepting help, and reluctance to come to the attention of any authority for fear of negative outcomes. The CPP Planning Team has as its goal to have prevention services providers who are respectful and diligent about meaningful family engagement resulting in measurable positive outcomes. MI was also selected because there are no educational or training prerequisites needed to be trained as an MI practitioner; this will allow Contra Costa County to do extensive outreach to ensure any individuals at child- and family-serving agencies interested in building MI knowledge and skills have the opportunity to be trained.

The goal of the CPP Planning Team is to promote successful outcomes for families who receive prevention services by engaging clients in making positive life changes using MI's clear principles of engagement: authentic partnership between the provider and the client; a nonjudgmental and respectful approach to signal the provider's acceptance of the client; compassion for and prioritizing the client, and their well-being; and calling forth the client's own desire to work toward change. Because Contra Costa seeks to provide effective services that will improve families' well-being, prevent entry into the child welfare or probation system, and support families to stay out of the system, MI is critical to building working relationships and meaningful connections that are led by clients in a way that highlights their own strengths and expertise. Ideally, families will feel empowered to express ideas about how they can work toward change, gaining ownership over the change process and therefore increasing the likelihood they will be successful.

MI will be leveraged through case management as a mechanism to improve engagement in services; set goals to address parenting, mental health, and substance abuse needs; selection of client service strategies for the child-specific prevention plan; and to promote and sustain client participation in and completion of services, ultimately increasing the reach and impact of preventive services.

As a means of investing in making a countywide impact, especially for vulnerable residents, Contra Costa County will have a phased-in plan to provide MI training for our prevention program Community-Based Organization, and also East County child welfare and probation staff, including direct services staff, supervisors, and managers. Additionally, other community partners will be invited to participate in MI training, especially those in Antioch and serving Antioch residents. This will be the first step in ensuring that MI will be carried out by prevention services providers and case managers with fidelity as an integral component of the practice model and case management for all families served. We intend to have ongoing focus groups with staff who are receiving MI training to measure training effectiveness, report on successes and challenges with utilizing MI with clients, and to collect feedback prior to implementing a countywide rollout.

In order to ensure model fidelity, and to ensure the appropriate documentation of delivered MI services, Contra Costa plans to use the Motivational Interviewing Treatment Integrity (MITI) coding tool, or a similar well-established tool, to yield feedback that can be used to increase clinical skill in MI practice and measure how well a practitioner is using MI.

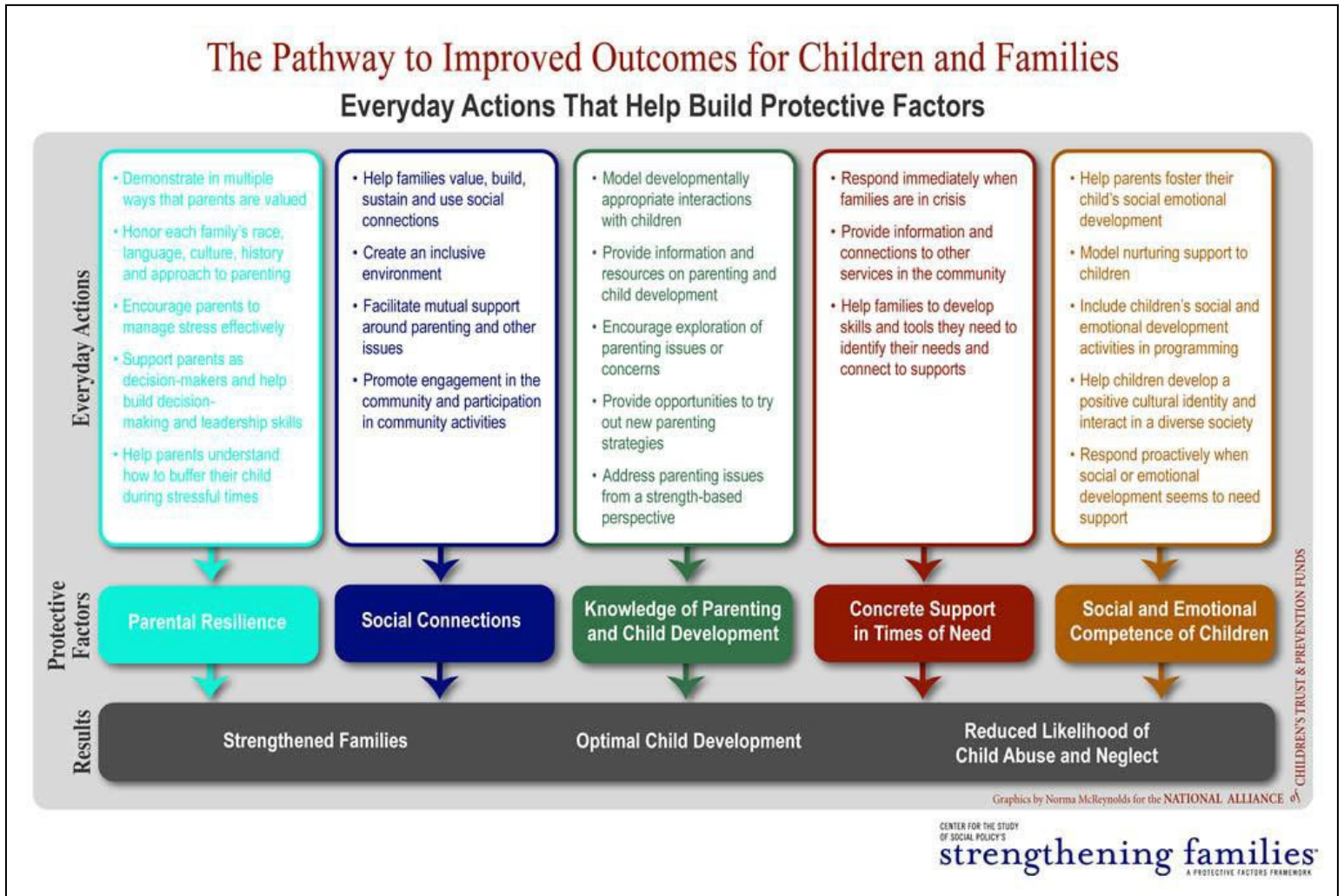
Contra Costa County will work with our local training provider, Bay Area Academy (BAA), to identify a Motivational Interviewing Network of Trainers (MINT) trainer or an equivalent to train staff, our future prevention program contracted service provider, and other individuals with a vested interest in children and families in the community, and to also provide ongoing support. MI training for CFS and Probation management and supervisors will be specifically tailored so that staff in leadership roles will be able to adequately coach and support their social workers and probation officers.

Contra Costa will develop and utilize a workforce training plan that will include how the county will ensure contracted EBP providers meet minimum requirements of training and practitioner qualifications. In order to make MI implementation as smooth as possible, and to determine how best to initially implement and then fully implement delivered services, Contra Costa will be forming an MI Implementation Team. The MI Implementation Team will include the CPP leads, the CFS Staff Development Unit, a representative from the Continuous Quality Improvement (CQI) Unit, and any other CPP Planning Team members who are interested in participating as we develop a training approach and ways to measure its effectiveness.

Members of the CPP Planning Team, the future contracted service provider, CFS and Probation staff, and other community partners will also make themselves available for FFPSA trainings and webinars made available as part of the state's three-tiered training rollout that was reported in California's five-year prevention plan.

Contra Costa also intends to utilize the Protective Factors Framework (PFF) in conjunction with MI services. Although PFF is not one of the well-supported EBPs in Title IV-E Clearinghouse, it is a resource-informed, strengths-based practice that provides a foundation for approaching the provision of prevention services. Building protective factors to promote stronger family functioning will dovetail nicely with our MI efforts.

Below is a flowchart that shows how PFF, as described by the Strengthening Families Program, can result in positive outcomes for children, families, and communities.



Each prevention level of Contra Costa's CPP will utilize goal-oriented prevention and intervention strategies to serve and support the ability of parents and families to provide safe, stable, and nurturing environments for their children. The specific strategies and services are outlined below, and are expanded on in our logic models:

PRIMARY - There will be a program that will provide a safety net of supportive services that include concrete supports, navigation assistance, and advocacy services in times of family stress and crisis to prevent harm before it occurs.

SECONDARY - There will be a program for families who have one or more risk factors, e.g., parents with mental health concerns, parental substance abuse, exposure to domestic violence/intimate partner violence, parental or child disabilities, young parental age, poverty, etc., to receive in-home (or natural, place-based) family preservation-type services to stabilize

families when they are at a crisis point. This would include case management, parenting support and education, skills-building, and side-by-side coaching.

TERTIARY - There will be a program that will provide services for families who have experienced child maltreatment, in order to mitigate trauma, reduce negative consequences, and prevent recurrence, including foster care entry or detention by Probation. Services will focus on two populations: (1) Families with children or youth not requiring either formal CFS and/or Probation intervention because the reasons contributing to allegations of maltreatment or delinquency can be resolved by other protective supports; and (2) Families receiving CFS Family Reunification Services who are transitioning to Family Maintenance Services and would benefit from additional support.

CONTRA COSTA THEORY OF CHANGE

IF Contra Costa County increases prevention services at the primary, secondary, and tertiary levels of prevention by establishing an effective cross-sector network and leveraging resources, THEN children and families will have access to resources and evidence-based interventions in their communities to strengthen their families and prevent unnecessary child welfare or probation involvement,

SO THAT the need for foster care will be decreased; and

SO THAT the well-being of children and youth already in foster care will be increased; and

SO THAT children and youth will be able to return home safely to stable and stronger families.

This vision is supported by the California Integrated Core Practice Model (ICPM) for children, youth, and families. Contra Costa County's reliance on the ICPM is articulated in its AB 2083 System of Care MOU.

The ICPM articulates the shared values, core components, and standards of practice reflecting current research that demonstrates how collaborative and integrated family services can best work together meeting the complex needs of children, youth, and families. The ICPM is based on 5 key components and 10 guiding principles.

The 5 key components within the ICPM model include:

- Engagement
- Assessment
- Service planning/implementation
- Monitoring/adapting
- Transitions

The 10 guiding principles include:

- Team based
- Family voice and choice
- Natural supports

- Collaboration and integration
- Community-based
- Culturally respectful
- Individualized
- Strengths-based
- Persistence
- Outcomes-based

To this foundation, Contra Costa County adds the state’s pillars for a comprehensive prevention plan that will support families in providing safe, stable, nurturing relationships and environments for their children and youth:

- Family Voice Centeredness - In individual case planning and system-wide policy development, practice, and implementation, as well as adapting evidence-based prevention and early intervention services to be culturally appropriate and to focus on the well-being of all family members.
- Racial Equity - Specifically seeking to reduce disproportionality in foster care, supporting the development of community-based, culturally appropriate services and programs, and incorporating outcomes measures to help ensure equitable implementation and provision of services and to inform the continuous quality improvement and evaluation frameworks established by the CDSS.
- Tribal Consultation and Collaboration - In the development of programs, systems, and policies that impact Tribes and American Indian/Alaskan Native families, ensuring consistent partnership with Tribes in all aspects of individual assessment and case planning for Tribal children and families.
- Strength-Focused and Trauma-Informed - Services, practices, and policies to support children and families.
- Community Capacity Building - Empowering community leadership to assist families and to support community efforts in developing needed services and definitions of success.
- Workforce Excellence - With a staff composition that reflects ethnic, linguistic, and cultural aspects of the community, incorporates individuals with lived experience, and is grounded in trauma-informed practice.
- Integration and Collaboration - Across systems to maximize and leverage funding, share information and collected data, and provide families with services and supports to meet their specific needs.
- Monitoring, Integrity, and Continuous Quality Improvement (CQI) - To ensure high-quality, ever-improving, and equitable services.

CONTRA COSTA LOGIC MODELS

The CPP Planning Team has split our logic model diagrams by level of prevention. The specific services we intend to offer have been documented in the logic models. Please refer to the following documents:

Appendix E – Contra Costa County Primary Prevention: Concrete Support, Referrals, and Outreach

Appendix F – Contra Costa County Secondary Prevention: Family Stabilization and

Preservation

Appendix G – Contra Costa County Tertiary Prevention: Keeping Families Together

ADDITIONAL ASSURANCES

Please refer to **Appendix H** for Contra Costa County’s completed Assurances Template, otherwise known as Attachment B, from the CDSS All County Letter (ACL) 23-23.

SPENDING AND SUSTAINABILITY

Contra Costa has elected to utilize the CDSS-created Local Spending Plan Template, which details how the various FFPS funding sources will be used for prevention activities and services, and the extent to which additional funds are being leveraged for comprehensive prevention planning and sustainability. This has been submitted along with our prevention plan. Please refer to **Appendix I**.

APPENDIX A. CONTRA COSTA SOCIAL DETERMINANTS OF HEALTH CHART (SDOH)

| SDOH | ECONOMIC STABILITY | EDUCATION | HEALTH AND HEALTH CARE | | NEIGHBORHOOD AND BUILT ENVIRONMENT | SOCIAL AND COMMUNITY CONTEXT |
|--------------------------|---|---|--|--|--|---|
| | HOUSING/FINANCIAL | | HEALTH | MH, BH, & SUBSTANCE ABUSE SERVICES | | |
| PROTECTIVE FACTOR | Concrete support in time of need | Social/emotional competence of children Knowledge of parenting and child development | Parental resilience Concrete support in time of need | Parental resilience Social/emotional competence of children | | |
| IDENTIFIED NEEDS | Cash support for emergencies Emergency and short-term housing Housing, esp. for disabled, intimate partner violence victims, transition aged-youth Stable family living arrangements Case management Navigator services Information referral, linkage, and advocacy Subsidized child care, esp. 0-2 & 5-12 y.o. & special needs Legal assistance Eviction prevention Transportation Youth employment | Parenting skills education Parenting support Prosocial skills training Preschool programs to prepare children for kindergarten English language classes Tutoring Appropriate supervision of children Money and credit management Job training | Preventive health care Timely healthcare when needed Health screenings Developmental screenings | Timely mental health/behavioral health services Timely substance abuse services for all ages Provide mental health and Alcohol & Other Drugs services in culturally relevant, trauma-informed way Crisis support Domestic/IPV services | Make services available throughout each region, not just in certain neighborhoods Increase resource availability in East County | Equity and advocacy Youth programs, especially after school Decrease overrepresentation of Black/African American youths in justice system Understanding and eliminating suspension and expulsion disparities of Black/African American youth in school settings Increase awareness of commercial sexual exploitation Safety from community violence East and West County regions most affected |

APPENDIX B. CONTRA COSTA PRIMARY PREVENTION ASSET MAP

| Social Connections | Knowledge of Parenting and Child Development | Concrete Support in Times of Need | Parental Resilience | Social and Emotional Competence of Children | Systems Change |
|---|--|--|--|--|--|
| <p>First 5 Family Resource Centers</p> <p>Parenthood Resource Directory</p> <p>Library services</p> <p>Sports teams</p> <p>Play groups</p> <p>Breastfeeding support groups</p> <p>Social Media</p> <p>Schools</p> <p>Medical Center Cafes (John Muir Health)</p> <p>Parenting Cafes</p> <p>2nd Time Around</p> <p>Grandparents Support Group</p> <p>Down Syndrome Connection of the Bay Area</p> <p>Mother's Club</p> <p>Native American Health Center</p> <p>Big Brothers/Big Sisters Of The East Bay</p> | <p>Nurse Family Partnership</p> <p>Parenthood Resource Directory</p> <p>Black Infant Health</p> <p>Welcome Home Baby</p> <p>Help Me Grow Network</p> <p>Mt. Diablo Adult Education Parent Education Program</p> <p>Sandy Hook Promise: violence prevention in 15/18 school districts;</p> <p>Signs of Suicide Education for students and teachers</p> <p>First 5 Parent Education Workshops</p> <p>Welcome Home Baby</p> <p>Core Triple P</p> <p>Brighter Beginnings Family Partnership Program</p> <p>Kaiser classes, including Newborn Care and 1-2-3 Magic</p> <p>Mt. Diablo Peace Center</p> <p>Ask Suicide Screening Questions (ASK) Toolkit</p> | <p>Bay Area Crisis Nursery</p> <p>Parenthood Resource Directory</p> <p>First 5 Resource Specialists</p> <p>Women, Infants, and Children (WIC)</p> <p>Bay Area Rescue Mission</p> <p>La Clinica</p> <p>Contra Costa Crisis Center</p> <p>Student and Family Resource Centers (cities and schools at Richmond HS; James Morehouse Project at El Cerrito HS)</p> <p>CalFresh</p> <p>Scheduled well-checks for children and parents</p> <p>Community Violence Solutions</p> <p>AMF Food Closet</p> <p>Loaves & Fishes of Contra Costa</p> <p>Shelter Inc. Prevention Program</p> | <p>First 5 FRC Fatherhood Engagement Series</p> <p>Parenthood Resource Directory</p> <p>Bay Area Crisis Nursery</p> <p>STAND! For Families Free of Violence</p> <p>Brighter Beginnings Family Support Program (for pregnant and parenting teens and young adults)</p> <p>Healthy Start</p> <p>COPE Supporting Fatherhood Involvement, Group Triple P, Everyday Moments,</p> <p>TALK Line Family Support Center</p> <p>Bay Point Works</p> <p>Contra Costa Health Services Breastfeeding Warmline</p> <p>Familias Unidas</p> <p>Native American Health Center</p> <p>Contra Costa County Access Unit</p> | <p>Help Me Grow Network</p> <p>Parenthood Resource Directory</p> <p>First 5 playgroups for children with mild-moderate delays</p> <p>RYSE Youth Center</p> <p>Village Community Resource Center</p> <p>Rainbow Center</p> <p>Bridge Builders (in 5 Antioch Unified School District schools)</p> <p>Our Collective Impact</p> <p>Young Latinas, Future Leaders (Latina Center)</p> <p>Boys and Girls Club</p> <p>Springboard Project</p> <p>Build Antioch Internship Program</p> <p>CARE Parent Network</p> <p>CAPC – ChildHelp Speak Up Be Safe</p> <p>Office of Education Coordinator of Social Emotional Learning</p> <p>Yes Nature to Neighborhoods</p> <p>George Miller Center</p> | <p>Racial Justice Oversight Body</p> <p>East Contra Costa Comminute Alliance</p> <p>Children's Leadership Council</p> <p>The Alliance to End Abuse</p> <p>Trauma Transformed</p> <p>Georgetown Capstone</p> <p>Diversion Project</p> <p>African American Health Conductors (AAHC)</p> <p>Contra Costa Human Trafficking Coalition</p> <p>Promotoras (Spanish language health promoters – Center for Human Development)</p> <p>Breastfeeding at work laws</p> <p>Fetal Infant Mortality Review Program</p> <p>Paid parental leave advocacy</p> <p>Changing tables in men's restrooms</p> <p>Blueprint</p> |

Highlight denotes service provider/organization/activity located in East County

APPENDIX B. CONTRA COSTA PRIMARY PREVENTION ASSET MAP

| | | | | | |
|--|---|---|---|--|--|
| | <p>Attendance Awareness Campaign</p> <p>Down Syndrome Connection of the Bay Area</p> <p>We Care Services for Children</p> <p>Child Health & Disability Prevention Program (CHDP)</p> <p>Family, Maternal and Child Health (FMCH) Line</p> | <p>Sweet Beginnings Diaper Bank</p> <p>Contra Costa Housing Authority</p> <p>Ambrose Community Center - food assistance program</p> <p>FBC Community Outreach - food assistance program</p> <p>Contra Costa County East County Adult and Senior Services</p> | <p>Opportunity Junction</p> <p>CocoKids</p> <p>Prenatal and Pediatric ACEs Screenings</p> <p>IPV Screening</p> <p>First 5 community engagement and regional groups</p> <p>Building Blocks for Parents, parent engagement in neighborhood initiatives</p> <p>Amador Institute, Inc.</p> | <p>One Day at a Time mentorship/empowerment</p> <p>El Puente</p> <p>Empowerment Program</p> <p>“Rooming alone” medical settings 12+</p> <p>People Who Care Children Association</p> <p>Youth Services Bureau (wraparound, teen parenting resources)</p> <p>Teen screening during well-check</p> <p>Comprehensive Sex Education</p> <p>Health Academy in some schools</p> <p>Monument Violence Prevention in schools</p> <p>Nutrition Services at John Muir Health. John Muir is starting to offer nutrition education in some local schools</p> <p>Building Blocks for Kids, Richmond Collaborative</p> <p>Health education for middle and high schoolers (LGBTQIA+ support, anger management, Empowering Girls)</p> <p>Ask Suicide-Screening Questions (ASQ) Toolkit</p> <p>Bright Futures Growth and Development Center</p> <p>Richmond Police Activities League after-school program</p> <p>Wellness in Schools Program</p> | <p>100 Black Men of the Bay Area, Inc.</p> <p>African American Health Conductors Program</p> <p>The Latina Center</p> <p>Project Second Chance Adult Literacy Program</p> <p>Antioch Community Foundation</p> |
|--|---|---|---|--|--|

Highlight denotes service provider/organization/activity located in East County

APPENDIX C. CONTRA COSTA SECONDARY PREVENTION ASSET MAP

| Social Connections | Knowledge of Parenting and Child Development | Concrete Support in Times of Need | Parental Resilience | Social and Emotional Competence of Children | Systems Change |
|---|--|--|--|---|--|
| <p>Kinship Centers (Pacific Clinics, Youth Service Bureau, Wayfinder)</p> <p>Rainbow Community Center</p> <p>RYSE Center</p> <p>Down Syndrome Connection of the Bay Area</p> | <p>Early Head Start + Head Start Program (0-5)</p> <p>Parenting education for incarcerated mothers and fathers</p> <p>CAPC – Nurturing Parenting Program</p> <p>Prenatal Care Guidance (PCG)</p> <p>Contra Costa Network of Care</p> <p>Parenting education at substance abuse centers</p> <p>Down Syndrome Connection of the Bay Area</p> <p>Child Health & Disability Prevention Program (CHDP)</p> <p>Family, Maternal and Child Health (FMCH) Line</p> <p>Lynn Center</p> | <p>Family Justice Centers (East, West, Central)</p> <p>Bay Area Crisis Nursery</p> <p>Kinship Centers (Pacific Clinics, Youth Service Bureau, Wayfinder)</p> <p>Home Health for high risk mothers</p> <p>School-based health centers</p> <p>Scotts Valley Tribal TANF Program (SVTT)</p> <p>Youth Continuum Homeless Hotline</p> <p>Healthy & Active before 5</p> <p>Fred Finch Youth & Family Services</p> <p>John Muir Health Mobile Health Clinic (Concord, Pittsburg, Brentwood)</p> <p>Monument Crisis Center (food pantry, senior services, immigration clinic, etc.)</p> <p>Rainbow Community Center</p> <p>Neighborhood Housing Services of the East Bay</p> | <p>Project What</p> <p>Bay Area Crisis Nursery</p> <p>Early Childhood Mental Health has fatherhood groups in Richmond</p> <p>Healthy Start</p> <p>CAPC partnering with Re-Entry Services in Richmond to offer parenting education to men and women</p> <p>East County Women's Services / Wollam House</p> <p>Frederic Ozanam Center</p> <p>Hand-to-Hand Collaborative</p> <p>The Rectory Women's Recovery Center</p> <p>Harmonic Solutions LLC</p> <p>Family Support Services</p> <p>Ujima Central Outpatient Program</p> <p>Ujima West Outpatient Program</p> <p>Ujima East Outpatient Program</p> <p>Amador Institute, Inc.</p> | <p>Antioch Mayor's Apprenticeship (pilot program)</p> <p>Fresh Lifelines for Youth (FLY)</p> <p>Early Childhood Mental Health Program</p> <p>Project What</p> <p>REACH Project</p> <p>Wellness in Schools Program</p> <p>People Who Care Children Association</p> <p>East County Children's MH Clinic - Antioch, Outpatient alcohol and drug treatment for Medi-Cal eligible youth</p> <p>West County Child and Adolescent Services</p> <p>ARM (Art, Recreation, Movement) of Care</p> <p>Crossroads High School - on-campus childcare, leadership program, parenting classes</p> <p>Center for Recovery and Empowerment (C.O.R.E.)</p> | <p>Rubicon Programs</p> <p>Youth Early Intervention Partnership (YEIP)</p> |

Highlight denotes service provider/organization/activity located in East County

APPENDIX C. CONTRA COSTA SECONDARY PREVENTION ASSET MAP

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|--|--|---|--|--|--|
| | | <p>Humanity Way Inc. (housing, workforce development, basic community needs)</p> <p>Calli House</p> <p>Safe Refuge for Children and Families</p> <p>Pillars of Hope</p> <p>Loaves & Fishes of Contra Contra</p> <p>AMF Food Closet</p> <p>Love-A-Child Missions Homeless Recovery Shelter</p> <p>SHELTER Inc. of Contra Costa County</p> <p>Greater Richmond Interfaith Program (GRIP)</p> <p>Contra Costa Youth Continuum of Services</p> <p>Anka Behavioral Health, Inc.</p> <p>Contra Costa Interfaith Housing</p> <p>Appian House</p> <p>Bay Area Rescue Mission - Family Center</p> <p>Bay Area Rescue Mission - Men's Shelter</p> | | | |
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Highlight denotes service provider/organization/activity located in East County

APPENDIX D. CONTRA COSTA TERTIARY PREVENTION ASSET MAP

| Social Connections | Knowledge of Parenting and Child Development | Concrete Support in Times of Need | Parental Resilience | Social and Emotional Competence of Children | Systems Change |
|---|--|---|---|--|---|
| <p>Sandy Hook Promise- Say Something anon. reporting line</p> <p>Youth/Parent Partners</p> <p>Down Syndrome Connection of the Bay Area</p> <p>Contra Costa Children & Family Services Independent Living Skills Program (ILSP)</p> <p>Kinship Centers (Pacific Clinics, Youth Service Bureau, Wayfinder)</p> | <p>Parenting education classes</p> <p>Foster Kinship Care Education (FKCE)</p> <p>Down Syndrome Connection of the Bay Area</p> <p>Child Health & Disability Prevention Program (CHDP)</p> <p>Family, Maternal and Child Health (FMCH) Line</p> | <p>SARB process</p> <p>Seneca's Mobile Crisis Response Team</p> <p>Regional Center crisis response project and crisis behavioral therapist</p> <p>Victims of Crime compensation</p> <p>The Youth Continuum of Services</p> <p>Contra Costa Children & Family Services Independent Living Skills Program (ILSP)</p> <p>Kinship Centers (Pacific Clinics, Youth Service Bureau, Wayfinder)</p> | <p>Parent Partners</p> <p>Differential Response providers: Catholic Charities of the East Bay, Pacific Clinics, Youth Service Bureau</p> <p>Family Preservation provider: Pacific Clinics</p> <p>Seneca Family of Agencies (Wrap support)</p> <p>The Rectory Women's Recovery Center</p> <p>Harmonic Solutions LLC</p> <p>East County Women's Services / Wollam House</p> <p>Frederic Ozanam Center</p> <p>Ujima Central Outpatient Program</p> <p>Ujima West Outpatient Program</p> <p>Ujima East Outpatient Program</p> <p>Amador Institute, Inc.</p> | <p>Specialized schools under Office of Ed</p> <p>Youth partners mentoring foster youth who are preparing to exit foster care</p> <p>Wellness in Schools Program</p> <p>East County Children's MH Clinic - Antioch, Outpatient alcohol and drug treatment for Medi-Cal eligible youth</p> <p>Contra Costa Children & Family Services</p> <p>Independent Living Skills Program (ILSP)</p> <p>ARM (Art, Recreation, Movement) of Care</p> <p>First Place for Youth</p> | <p>Child Death Review Team</p> <p>SCAN Team</p> |

Highlight denotes service provider/organization/activity located in East County

APPENDIX E. Contra Costa County Primary Prevention

| Contra Costa County Primary Prevention: Concrete Support, Referrals, and Outreach | |
|--|--|
| <p>Program Vision: All children and families in Contra Costa County, especially in the East County region, are supported by services and systems that are accessible, have an equitable approach, include culturally and linguistically responsive services, and celebrate all aspects of their diversity.</p> <p>Prioritization of clients: Focus on families who are overrepresented in Child Welfare and Probation, and those who are otherwise most needy, e.g., Black/African American families, AI/AN families, Latino families, immigrant families, LGBTQ+ families, and unhoused families. Also, families struggling to find resources, families with multiple children, and families of children with special needs.</p> | <p>Population needs to be addressed by services: The safety net of supportive services, especially in the East County region, must be strengthened, which will include concrete support, navigation assistance, and advocacy services in times of family stress and crisis to prevent harm before it occurs.</p> <p>Population Served: Initially, families in Antioch.</p> |
| <p>Services/Interventions: All services and interventions will be provided using Motivational Interviewing and the Protective Factors Framework to promote successful outcomes for families and reduce the likelihood of child abuse and neglect.</p> <p>- Outreach: a multilingual, multicultural public awareness campaign to increase Antioch residents’ knowledge of available social and family support resources in their community. Formal outreach and promotion may include:</p> <ul style="list-style-type: none"> ● Broadcast and social media ● City of Antioch, faith-based, recreational, schools, and other organizations’ bulletins or communication tools and websites ● Text blasts and an email distribution list, e.g. sharing of resources, different community activities, etc. ● Community events, e.g., resource fairs, health fairs, festivals, etc. ● Other public and private providers who interact with parents, e.g., childcare, law enforcement, pediatricians, school staff, etc. <p>- Provide referrals to community and public agency resources with:</p> <ul style="list-style-type: none"> ● Warm hand-off and linkage to agencies and resources in the community ● Accompaniment ● Advocacy ● Navigation assistance to agencies and resources in the community <p>- Referrals and assistance with navigating supportive services such as:</p> <ul style="list-style-type: none"> ● Specialized daycare (RC) ● Respite care, including behavioral respite care ● Mental health support/behavioral health support and counseling | <p>Outputs:</p> <ul style="list-style-type: none"> ● Families will have increased knowledge of resources and services that fit their needs ● Services will be accessible to families in terms of location, sense of safety, welcoming environment, cultural appropriateness, and language availability ● # of service providers trained in Motivational Interviewing ● # trained in Protective Factors Framework ● # of media announcements and outreach efforts to promote prevention program ● # of families who receive direct primary prevention services ● # of families who received referrals to other agencies or organizations ● # of families who received advocacy/navigation services ● Reduced maltreatment as measured by number of substantiated referrals ● Reduced maltreatment as measured by number of entries into foster care <p>Inputs:</p> <ul style="list-style-type: none"> ● Identified funding for all costs, e.g., service delivery, administrative, staffing, data tracking, supports, etc. ● Identified CBO who can serve families via identified services and interventions ● Hired staff with special consideration to the following desired staffing requirements: <ul style="list-style-type: none"> ○ Reside in or near Antioch/familiar with Antioch community ○ Lived experience ○ Social Services experience ○ Bicultural and bilingual ○ Reliable transportation ○ Flexible hours/ability to be available 24/7, including weekends ● Training topics for CBO provider: |

APPENDIX E. Contra Costa County Primary Prevention

Services/Interventions, continued:

- Public assistance, e.g., CalFresh
 - Healthcare access, including information on pediatric medical homes
 - Housing
 - Adult education
 - Credit repair/financial counseling and support
- Concrete resources and funds to help keep families together and stable, including:
- Affordable housing (vouchers, short-term emergency housing, etc.)
 - Employment services
 - Transportation accessibility, especially for children to attend school and for families to receive health care
 - Food (gift cards/vouchers)
 - Child needs (cribs, strollers, child-proofing materials, etc.)
 - Emergency stipends

Measurement Tools:

- Protective Factors Survey (PFS)
- Use of the Motivational Interviewing Treatment Integrity (MITI) coding tool, or a similar well-established tool, which will assess whether clients with whom Motivational Interviewing was used showed:
 - More likelihood to participate in services
 - Changes in high-risk lifestyle behaviors that may lead to child maltreatment
 - Increased confidence in parenting skills
 - Increased self-reliance and responsibility for change in family's well-being
- Survey for families to measure their evaluation of services
- Internal CWS data
- Internal Probation data
- Focus groups, which will include consumers, members of the community, and those with lived experience
- Antioch Unified School District – student attendance and SARB data

Inputs/Training topics for CBO provider, continued:

- Motivational Interviewing (will include ongoing coaching/utilizing fidelity and efficacy monitoring tool)
- Protective Factors Framework
- Development stages across lifespan/child development
- Trauma-informed care
- Mandated Reporter/Mandated Supporter
- Overview of Contra Costa public agencies
- Cultural awareness/competency
- Community engagement methods
- Overview of other community resources, and where to refer families if CBO is not the appropriate venue
- Case management
- Crisis intervention
- LGBTQ+ population
- Advancing Equity/Racial Justice

Outcomes:

- A more visible and accessible safety support network for families in Antioch
- Increased knowledge of available services and supports in the community
- Increased emotional and mental well-being of parents and caretakers
- Improved positive parenting practices
- Increased confidence in parenting skills
- Reduction of parental and familial stress

Indicators:

- Short-term: # of established services/support activities that were offered to families
- Long-term: 5% decrease in overall number of Antioch families whose children enter foster care
- Long-term: 5% decrease in overall number of Antioch families whose children are referred to Juvenile Probation
- Long-term: 5% increase in Antioch school attendance rate
- Long-term: 5% decrease in CFS substantiated referrals
- Number of individuals who contact the prevention program for support will increase by 5% each year
- Long-term: An informed community who knows the difference between actual child neglect/abuse and a family who is struggling and needs additional support

APPENDIX F. Contra Costa County Secondary Prevention

Contra Costa County Secondary Prevention: Family Stabilization and Preservation

Program Vision: All children and families in Contra Costa County, especially in the East County region, are supported by services and systems that are accessible, have an equitable approach, include culturally and linguistically responsive services, and celebrate all aspects of their diversity.

Population needs to be addressed by services: Families with one or more risk factors associated with compromised well-being or child maltreatment, such as children of parents with mental health concerns, parental substance abuse, exposure to domestic violence, parental or child disabilities, young parental age, and poverty.

Services/Interventions: All services and interventions will be provided using Motivational Interviewing and the Protective Factors Framework to promote successful outcomes for families and reduce the likelihood of child abuse and neglect.

In-home (or natural, place-based) family preservation-type services will be utilized to stabilize families when they are at a crisis point. This would include:

- Case management, including concrete supports, advocacy, and community referrals
- Parenting education, support, and coaching. May include referrals to neighborhood-based and/or parenting education or parenting support groups.
- Family preservation services with side-by-side coaching and support, which may include the following topics:
 - Child development
 - Early learning and literacy, school readiness
 - Managing social media and technology
 - Adolescence
 - Behavioral/positive discipline/managing challenging behaviors
 - Co-parenting, communication, and custody issues
 - Child abuse prevention
 - Special education and IEPs
 - Self-care, stress management
 - Substance abuse prevention and treatment (children and adults)
 - Understanding social media and its accompanying pressures, internet safety
 - Intimate Partner Violence/Domestic Violence (children and adults)
 - LGBTQ+ population
- Transportation assistance and support (either via provider or funding)
- Mentorship connections for both children and adults

Population Served: Initially, families in Antioch.

Prioritization of clients: Focus on families who are overrepresented in child welfare and probation, and those who are otherwise most needy, e.g., Black/African American families, AI/AN families, Latino families, immigrant families, LGBTQ+ families, and unhoused families. Also, families struggling to find resources, families with multiple children, and families of children with special needs.

Outputs:

- Services will be accessible to families in terms of location, sense of safety, welcoming environment, cultural appropriateness, and language availability
- # of service providers trained in Motivational Interviewing
- # trained in Protective Factors Framework
- # of families served
- # of parents who were referred to parenting education classes or parenting support groups
- # of families who received direct secondary prevention services
- # of families who received referrals to other agencies or organizations
- # of families who received advocacy/navigation services
- Reduced maltreatment as measured by number of substantiated referrals
- Reduced maltreatment as measured by number of entries into foster care

Inputs:

- Identified funding for all costs, e.g., service delivery, administrative, staffing, data tracking, supports, etc.
- Identified CBO who can serve families via identified services and interventions
- Hired staff with special consideration to the following desired staffing requirements:
 - Reside in or near Antioch/familiar with Antioch community
 - Lived experience
 - Social Services experience
 - Bicultural and bilingual
 - Reliable transportation
 - Flexible hours/ability to be available 24/7, including weekends

APPENDIX F. Contra Costa County Secondary Prevention

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| <p><u>Services/Interventions, continued:</u></p> <ul style="list-style-type: none"> ● Identification of informal and natural supports ● Safety planning ● Skills building ● 24/7 availability, including weekends ● Services that are sensitive/supportive of elder caregivers ● Close monitoring of potentially dangerous situations ● Holistic services approach that teaches families how to access services and equips them with the tools to prevent future trauma | <p><u>Inputs/Training topics for CBO provider, continued:</u></p> <ul style="list-style-type: none"> ● Trained staff and community partners, including ongoing coaching for delivery of intensive in-home preservation services. Training topics include: <ul style="list-style-type: none"> ○ Motivational Interviewing (will include ongoing coaching/utilizing fidelity and efficacy monitoring tool) ○ Protective Factors Framework ○ Development stages across lifespan/child development ○ Trauma-informed care ○ Mandated Reporter/Mandated Supporter ○ Overview of Contra Costa public agencies ○ Cultural awareness/competency ○ Community engagement methods ○ Overview of other community resources, and where to refer families if CBO is not the appropriate venue ○ Case management ○ Crisis intervention ○ LGBTQ+ population ○ Advancing Equity/Racial Justice |
| <p><u>Outcomes:</u></p> <ul style="list-style-type: none"> ● A stronger safety support network for families in Antioch ● Families who participated in the program will have lower rates of referral to CFS and Juvenile Probation after receiving services ● Decrease in the number of children experiencing child abuse and neglect, and the adverse effects of removal from their home of origin ● Increased well-being and resiliency of parents and caretakers ● Reduction of parental and familial stress ● Services are delivered in a timely manner with responsive resources ● Families will have increased knowledge of child development ● Increased knowledge of available services and supports in the community | <p><u>Measurements:</u></p> <ul style="list-style-type: none"> ● Protective Factors Survey (PFS) ● Use of the Motivational Interviewing Treatment Integrity (MITI) coding tool, or a similar well-established tool, which will assess whether clients with whom Motivational Interviewing was used showed: <ul style="list-style-type: none"> ○ More likelihood to engage and participate in services ○ Changes in high-risk lifestyle behaviors that may lead to child maltreatment ○ Increased confidence in parenting skills ○ Increased self-reliance and responsibility for change in family's well-being ● Surveys: Pre/post client satisfaction survey ● North Carolina Family Assessment Scale ● Internal CWS data ● Internal Probation data ● Focus groups, which will include consumers, members of the community, and those with lived experience ● Local law enforcement data – calls for service for “family disturbance.” ● Antioch Unified School District – student attendance and SARB data |
| <p><u>Indicators:</u></p> <ul style="list-style-type: none"> ● Increased number of families served through prevention services ● Long-term: 5% decrease in the number of families residing in Antioch whose children enter foster care ● Long-term: 5% decrease in the number of Antioch families whose children are referred to Juvenile Probation ● Long-term: 5% decrease in number of Antioch youths booked in Juvenile Hall ● Long-term: 5% increase in Antioch school attendance rate | |

APPENDIX G. Contra Costa County Tertiary Prevention

Contra Costa County Tertiary Prevention: Keeping Families Together

Program Vision: All children and families in Contra Costa County, especially in the East County region, are supported by services and systems that are accessible, have an equitable approach, include culturally and linguistically responsive services, and celebrate all aspects of their diversity.

Population needs to be addressed by services: Services for families in which child maltreatment has already occurred, with an emphasis on trauma mitigation, reduction of negative consequences, and prevention of recurrence, including entry into foster care or detention by Juvenile Probation.

Population Served: Initially, families in Antioch, with attention to two specific populations:

- WIC 241.1 youths not requiring formal CFS and/or Juvenile Probation intervention because the reasons contributing to allegations of maltreatment or delinquency can be resolved by other protective supports.
- Families receiving Family Reunification services from CFS, but transitioning to Family Maintenance services, who could benefit from additional support.

Prioritization of clients: Focus on families who are overrepresented in child welfare and probation, and those who are otherwise most needy, e.g., Black/African American families, AI/AN families, Latino families, immigrant families, LGBTQ+ families, and unhoused families. Also, families struggling to find resources, families with multiple children, and families of children with special needs.

Services/Interventions: All services and interventions will be provided using Motivational Interviewing and the Protective Factors Framework to promote successful outcomes for families and reduce the likelihood of future child abuse and neglect.

Services will include:

- Providing family preservation-type services to strengthen parenting skills and teach effective coping strategies
- In-home (or natural, place-based) case management and support at flexible times to meet the family's needs, with consideration to any transportation barriers
- Engagement of families and parents as full partners in service planning
- Alleviation of risks that may cause entry or re-entry into foster care
- Safety planning
- Parenting education/parent training and support, which may include the following topics:
 - Positive discipline
 - Trauma-informed parenting
 - Understanding of developmental stages
 - Understanding social media and its accompanying pressures, and internet safety
 - Co-parenting, communication, and custody issues
 - Sex-trafficking education
 - Substance Abuse prevention and treatment (children and adults)

Outputs:

- # of service providers and staff trained in Motivational Interviewing
- # trained in Protective Factors Framework
- # of families who received direct tertiary prevention services
- # of families who received referrals to other agencies or organizations
- # of families who received advocacy/navigation services
- # of children who remained out of foster care
- # of children who remained out of the Probation system

Inputs:

- Identified funding for all costs, e.g., service delivery, administrative, staffing, data tracking, supports, etc.
- Identified CBO who can serve families via identified services and interventions
- Hired staff with special consideration to the following desired staffing requirements:
 - Reside in or near Antioch/familiar with Antioch community
 - Lived experience
 - Social Services experience
 - Bicultural and bilingual
 - Reliable transportation
 - Flexible hours/ability to be available 24/7, including weekends
- Trained staff and community partners, including ongoing coaching for delivery of intensive in-home preservation services. Training topics include:

APPENDIX G. Contra Costa County Tertiary Prevention

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| <p><u>Services/Interventions, continued:</u></p> <ul style="list-style-type: none"> ○ Intimate Partner Violence/Domestic Violence (children and adults) ○ LGBTQ+ population ● Referrals to parenting education classes and support groups ● Use of Protective Factors framework to identify strengths and develop resources ● Linkage and effective connection to health services, schools, and other resources ● Identifying, developing, and using informal and natural supports ● Holistic services approach that teaches families how to access services and equips them with the tools to prevent future trauma | <p><u>Inputs/Training topics for CBO provider, continued:</u></p> <ul style="list-style-type: none"> ○ Motivational Interviewing (will include ongoing coaching/utilizing fidelity and efficacy monitoring tool) ○ Protective Factors Framework ○ CFS and Juvenile Probation overview ○ Mandated Reporter/Mandated Supporter ○ Trauma-informed approaches ○ Safety Organized Practice (SOP) and Structured Decision Making (SDM) ○ Development stages across lifespan/child development ○ Overview of other community resources, and where to refer families if CBO is not the appropriate venue ○ Knowledge of family finding process ○ Crisis intervention ○ Cultural awareness/competency ○ LGBTQ+ population ○ Advancing Equity/Racial Justice |
| <p><u>Outcomes:</u></p> <ul style="list-style-type: none"> ● Populations considered disproportionately represented in child welfare and Juvenile Probation will have more support ● A reduction in entry or re-entry to foster care due to child maltreatment ● Decrease in the number of children experiencing abuse and neglect, and the adverse effect of removal from their home of origin ● Increase in child safety, permanency, and well-being ● Fewer emergency department visits pertaining to child injury ● Increased engagement in mental health services ● Improved family functioning and increased self-sufficiency, resiliency, and stability ● Increased school attendance ● Increased community engagement | <p><u>Measurements:</u></p> <ul style="list-style-type: none"> ● Protective Factors Survey (PFS) ● Use of the Motivational Interviewing Treatment Integrity (MITI) coding tool, or a similar well-established tool, which will assess whether clients with whom Motivational Interviewing was used showed: <ul style="list-style-type: none"> ○ More likelihood to engage and participate in services ○ Changes in high-risk lifestyle behaviors that may lead to further child maltreatment ○ Increased confidence in parenting skills ○ Increased self-reliance and responsibility for change in family’s well-being ● Pre/post client satisfaction survey ● Focus groups, which will include consumers, members of the community, and those with lived experience ● North Carolina Family Assessment Scale ● Local law enforcement data – calls for service for “family disturbance.” ● Antioch Unified School District – student attendance and SARB data |
| <p><u>Indicators:</u></p> <ul style="list-style-type: none"> ● Increased number of families served through prevention services ● Long-term: 5% decrease in the number of Antioch families whose children enter foster care ● Long-term: 5% decrease in the number of subsequent referrals for Antioch families who have previous child welfare or probation involvement ● Long-term: 5% decrease in the number of Antioch families whose children are referred to Juvenile Probation ● Long-term: 5% decrease in number of Antioch youths placed in Juvenile Hall ● Long-term: 5% increase in Antioch school attendance rate | |



KIM JOHNSON
 DIRECTOR

GAVIN NEWSOM
 GOVERNOR

ATTACHMENT B- ASSURANCES TEMPLATE

Family First Prevention Services (FFPS) Program Assurances

County of _____

Instructions: These assurances must be submitted by local child welfare services (CWS) and probation agencies that opt into the FFPS Program and are a required component of the local comprehensive prevention plan (CPP). These assurances will remain in effect unless changed by the submission of updated assurances and an updated CPP. Any changes to the local CPP must include resubmission of these assurances.

Title IV-E Prevention Program Reporting

In accordance with section 471(e)(5)(B)(x) of the federal Social Security Act and California Welfare and Institutions Code (WIC) section 16587(d)(9), _____, (Name(s) of participating child welfare services and/or probation agency) is providing this assurance, consistent with the local CPP and the California Title IV-E Prevention Services State Plan, to collect and report to the CDSS information and data required for the FFPS Program, including all information and data necessary for federal financial participation, federal reporting, to determine program outcomes, and to evaluate the services provided. This includes, but is not limited to, child-specific information and expenditure data.

Child Safety Monitoring

In accordance with section 471(e)(5)(B)(ii) of the federal Social Security Act and California WIC sections 16587(d)(7)-(8), the _____ (Name(s) of participating child welfare services and/or probation agency) assures it will provide oversight and monitoring of the safety of children who receive services under the FFPS Program, including oversight and monitoring of periodic risk assessments throughout the period of service delivery. The agency further assures it will monitor and oversee the safety of children and periodic risk assessments for children who receive FFPS program services through its contracted community-based organizations. If the local child welfare and/or probation agency determines the child's risk of entering foster care remains high despite the provision of the services, the agency assures that it will reexamine the child's prevention plan during the 12-month period. In the case of an Indian child, the agency assures the assessments, and any reexamination of the prevention plan will be conducted in partnership with the Indian child's tribe.

Workforce Development and Training

In accordance with section 471(e)(5)(B)(viii) of the federal Social Security Act, the _____ (Name(s) of participating child welfare services and/or probation agency) assures it will adhere to the FFPS training plan as outlined in the California Title IV-E Prevention Services State Plan, and ensure caseworkers within both the community and Title IV-E agency pathways under the FFPS program are supported and trained in assessing what children and their families need, connecting to the families they serve, accessing and delivering the needed trauma-informed and evidence-based services, overseeing and evaluating the continuing appropriateness of the services, and all other foundational requirements, including but not limited to, understanding how the requirements of the federal Indian Child Welfare Act (ICWA) and implementing state laws intersect with prevention services provided through the community based and Title IV-E agency pathways.

Trauma-Informed Service Delivery

The _____ (Name of participating child welfare services and/or probation agency) assures that in accordance with section 471(e)(4)(B) of the federal Social Security Act and California WIC section 16587(d)(6), each service in the CPP provided to or on behalf of a child will be provided under an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma, including historical and multigenerational trauma, and in accordance with recognized principles of a trauma-informed approach and trauma-specific interventions to address trauma's consequences and facilitate healing.

Model Fidelity for Evidence-Based Programs and Continuous Quality Improvement

In accordance with section 471(e)(5)(B)(iii)(II) of the federal Social Security Act and California WIC sections 16587(d)(10) and 16587(d)(11)(A), the _____ (Name of participating child welfare services and/or probation agency) assures that services provided in the CPP will be continuously monitored to ensure fidelity to the practice model, to determine the outcomes achieved, and to refine and improve practices based upon information learned, using a continuous quality improvement framework, developed in accordance with instructions issued by the CDSS. The agency agrees to participate in state level fidelity oversight, data collection, evaluation, and coordination to determine the effectiveness of a service provided under the FFPS program.

Equitable and Culturally Responsive Services and Supports

In accordance with the Governor's Executive Order N-16-22, and consistent with California Five Year Prevention Services State Plan, the _____ (Name of participating child welfare services and/or probation agency) assures that the implementation of interventions, services and supports should be equitable, culturally responsive and targeted to address disproportionality and disparities experienced by black, indigenous, and people of color, as well as lesbian, gay, bisexual, transgender, queer and plus (LGBTQ+) children and youth.

Coordination with Local Mental Health

In accordance with section 471(e)(10)(C) of the federal Social Security Act and California WIC section 16588(f)(3), the Children & Family Services Bureau and Probation Department (Name of participating child welfare services and/or probation agency) assures the agency will establish a joint written protocol, based on the model developed by the CDSS and Department of Health Care Services for use among the child welfare agency, probation department, behavioral health agency, and other appropriate entities to determine which program is responsible for payment, in part or whole, for a prevention service provided on behalf of an eligible child.

Signatures

Signature: These assurances must be signed by the official with authority to sign the CPP and submitted to the CDSS for approval.



Signature of Authorized CWS Representative

5-17-23

Date



Signature of Authorized Probation Representative

5.16.23

Date