California - Child and Family Services Review

System Improvement Plan

[2021-2025]





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Introduction

The Nevada County 2022 System Improvement Plan (SIP) is the third component of the Child and Family Services Review (CFSR). The CSFR is the comprehensive review of the child welfare a probation placement programs and the continuum of care all the way from prevention and protection through permanency and after care. The CFSR process occurs on a 5-year cycle and is guided by a philosophy of continuous quality improvement (CQI), interagency partnerships, community involvement, and accountability for program outcomes. The development of the 2023 SIP is a continuation of the 2022 Nevada County Self-Assessment (CSA). The development of this SIP was guided by the CSA outcomes and was created in collaboration with Nevada County Juvenile Probation and Child Welfare Services (CWS) in partnership with the California Department of Social Services (CDSS).

Outcome	CFSR Round 3 National Standards	CFSR Round 4 National Performance Values
S1 – Maltreatment in Foster Care	≤8.50	≤9.07
S2 – Recurrence of Maltreatment	≤9.1 %	≤9.7%
P1 – Permanency in 12 months (entering foster care)	≥40.5%	≥35.2%
P2 – Permanency in 12 months (in care 12-23 months)	≥43.6%	≥43.8%
P3 – Permanency in 12 months (24+ months in care)	≥30.3%	≥37.3%
P4* - Re-entry to Foster Care	≤8.3%	≤5.6%
P5 – Placement Stability	≤4.12	≤4.48

Through the course of the CSA, analysis of service delivery, programs, outcome measures, and policy and procedure were conducted for the purpose of identifying areas of strength and areas for improvement within the child welfare and juvenile probation systems in Nevada County. The 2023 SIP is a 3-year strategic plan to improve in the program areas identified in the 2022 CSA and the Peer Review.

The CSA revealed the need for increased RFA recruitment, training and support. Respite care was also mentioned as a way to preserve placements and ensure permanency. Family Finding

efforts being more formalized and efforts increased was also recommended by stakeholders and Peers. Out-of-county placements were seen as a barrier to permanency.

Though stakeholders felt the small size of the county lent to good collaboration it was thought that there was a lack of specialty services available within the community. There are not enough Spanish-speaking service providers especially in the Eastern Region of the County that has a larger Hispanic population. The availability of services for families don't have Medi-Cal is lacking. The concern being private insurance has lower coverage and creates barriers in connecting with the right therapist. The aftermath of COVID has left large capacity issues with private therapists that private insurers are being referring to. Additionally, there are limited resources for addressing parental mental health issue. This can lead to needing to go out of county for services which can be problematic as public transportation within and out-of-county is limited.

Staff turnover was identified as a barrier as foster youth found it difficult to keep switching workers. They felt each time they got a new worker they were starting over. The Stakeholders also thought that there should be more efforts to recruit, retain and train staff. They felt it was important to have staff with lived experience, a culture of self-care, and wanted more Spanish speaking staff.

For Juvenile Probation, the CSA was found that collaboration with the courts and service providers was a strength. The CSA raised awareness of the importance of family finding, the previous process involved a data search but did not include families in a meaningful way which proved adversarial. The importance of maintaining family connections even when the minor is aging out and not returning home, and always striving for reunification within 12 months if possible was highlighted in the CSA as this was found to be a challenge by the Peers given the lack of in-county placement for Probation. Probation efforts will explore placement options for high risk preplacement cases which could result in positive outcomes, stability, and enhance partnerships with community based organizations.

SIP Narrative

C-CFSR TEAM AND CORE REPRESENTATIVES

Below is the list of the C-CFSR team and Core C-CSFR team that met on a regular basis in the planning stages of the CSA, Peer Review process, and during the creation of the SIP.

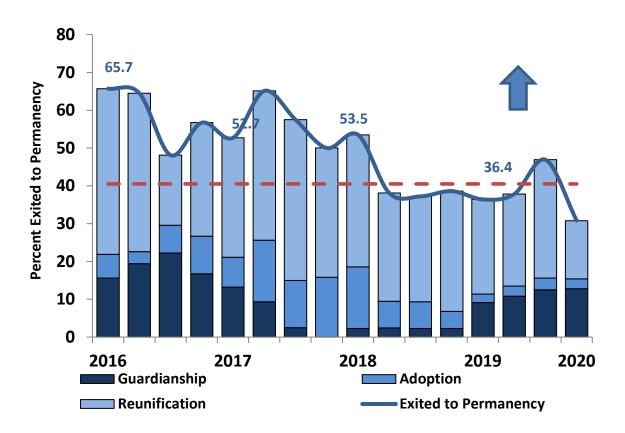
- Rachel Peña, Director of Social Services
- Nick Ready, Program Manager, Child Welfare Services
- Faye Hignight, Administrative Analyst II, Child Welfare Services
- Mike Sypnicki, Probation Program Manager
- Jim Amaral, Supervising Deputy Probation Officer
- Toviah Thompson, CDSS, Outcomes and Accountability Bureau Consultant
- Elizabeth Johnson, CDSS, Office of Child Abuse Prevention Consultant

PRIORITIZATION OF OUTCOME DATA MEASURES/SYSTEMIC FACTORS AND STRATEGY RATIONALE

The 2022 CSA gave a thorough analysis of the federal and state outcome measures and compared them to the noteworthy changes since the 2016 CSA. The data in this report is from the UC Berkeley California Child Welfare Indicators Project (CCWIP) for the third quarter of 2021, unless otherwise indicated. In some instances, SafeMeasures® was used provide more detailed data analyze for a given outcome. Prioritization of Outcome Measures and Systematic Factors was based on performance on Outcome Measures and analysis gleaned from the 2022 CSA, which included information from the Peer Review, stakeholder meeting, focus groups, and surveys.

Outcomes were prioritized based on whether or not the measure met the national standard and what the general trend was over the previous SIP cycle. Systematic Factors were identified by stakeholders, staff, and parents. The Outcome results for Child Welfare are summarized as follows.

3P1: PERMANENCY IN 12 MONTHS FOR CHILDREN ENTERING FOSTER CARE (FEDERAL STANDARD ≥ 40.5%)

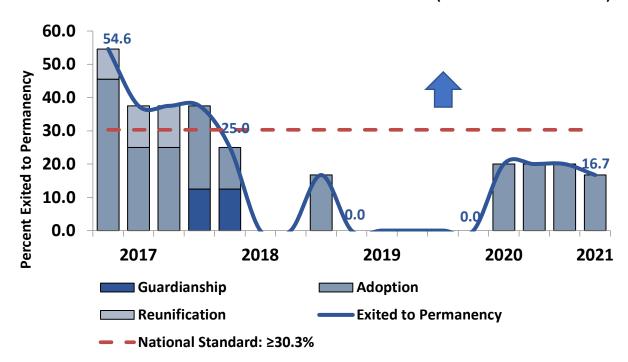


The CSA revealed that in Nevada County there were 39 children who entered foster care from October 1, 2019 to September 30, 2020. Of those children, 12 exited foster care to permanency in the following year. ¹ The national standard was not met. There are several of the factors related to why performance has gone down. 67.7% of the children who came into care were three years old or older for the reported period. Children who are over three years of age have reunification timelines of 12 months so would not be expected to exit within the first 12 month of entry into care. Another contributing factor may be that large percentage of cases where parental rights are terminated are being appealed. It can take two to three years for the appeals process to be completed. Finally, though there has been improvement with the relationship with the Court, continuance and contested hearings were a factor why many of

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the children who did not exit to permanency in 12 months. There were continuances and contested hearings in many of the cases where children did not exit to permanency within 12 months of entering care. Though this measure is not being prioritized for improvement. Efforts to increase the number of in-county RFA home will likely improve performance because it enhances continuity in the child's life as they are able to stay in their community with connection to school, relatives, and culture. It also reduced the time it takes to connect children to needed services. Local Resource Parents are more available and able to mentor and provide support to birth parents. These factors increase child and parent wellbeing which may lead to shorter stays in foster care.

3P3: PERMANENCY IN 12 MONTHS FOR CHILDREN IN CARE FOR 24+ MONTHS (FEDERAL STANDARD ≥ 30.3%)

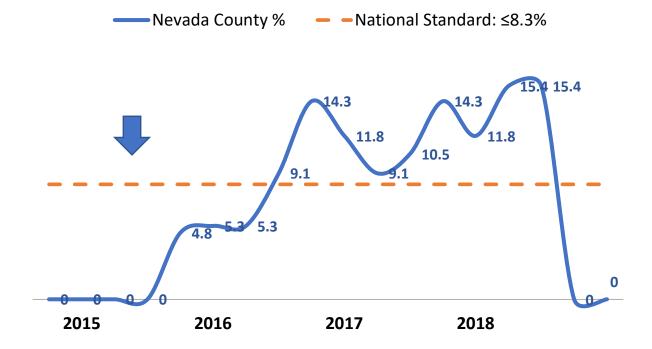


3P3 measures all the children in foster care on the first day of the period that have been in care for 24 months or more and determines how many exited to permanency in the following 12 months. ² As reported in the 2022 CSA only 16.67% exited to permanency between 10/1/20 to 9/30/21. The national standard was not met for four years of the reported CSA period and as such was the focus of the Peer Review, Stakeholder meeting, and Focus Groups. Peers noted

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that children in the Measure had many placement changes and there were distance challenges as placements were out-of-county due to a lack of ISFC homes and local RFA homes trained to work with high needs children. Additionally, it was found that there is a need for more intensive family finding and lack of local specialty mental health resources. This measure has been prioritized for improvement.

3P4: REENTRY TO FOSTER CARE (FEDERAL STANDARD ≤ 8.3%)

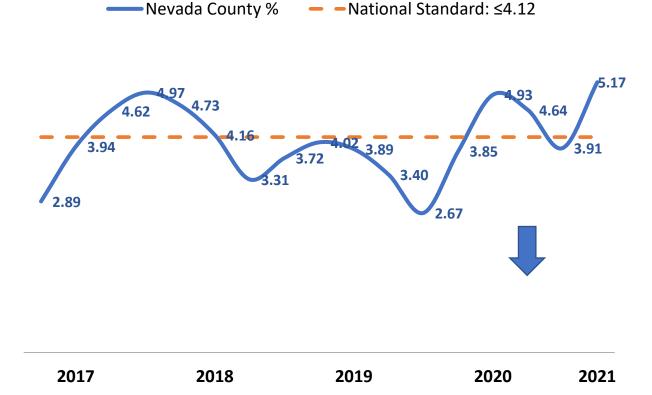


Round 3 C-CFSR Measure P4 examined all the children who entered foster care (entry cohort) in a 12-month period, who were then discharged within 12 months to reunification or guardianship, then determines how many reentered care in the 12 months following their date of discharge from care. In Round 4, the denominator is now based on an *exit* cohort ("the total number of children who exited foster care to permanency in a 12-month period"). Nevada County met the national standard for this measure for the period from 10/1/18 to 9/30/19. There were 16 children who entered foster care from 10/1/18 to 9/30/19, then exit care the following year (10/1/19 to 9/30/20), of those no children reentered care in the 12 months that

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followed their exit (10/1/20 to 9/30/21). Though the national standard was met as reported in the CSA, performance has been variable on this measure over the last 10 years. This measure only looks at an entry cohort. Examining an exit cohort to see which children have reentered following exit from 10/1/19-9/30/20 revealed 11% of children in this cohort who exited to adoption or guardianship then reentered care in the year following their exit. Further if a closer look is taken at the P4 data there were some children who reentered care, but it was over two years after they exited to permanency. Also given that children who exit to adoption are not counted in this measure, the reentry rate is likely to be much higher. Nevada County administers its own Adoption Assistance Program (AAP) and Kinship Guardian Assistance Program (Kin-GAP) so is aware of children reentering that are not captured in this measure. Given the variable performance on this measure it has been prioritized for improvement.

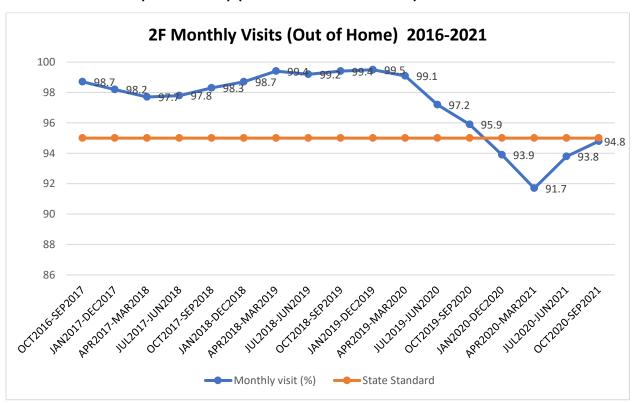
3P5: PLACEMENT STABILITY (FEDERAL STANDARD ≤ 4.12 MOVES PER 1000 FOSTER CARE DAYS)



Measure 3P5 observes children who entered care for one year's worth of placement data and measures the number of moves out of the possible care days. This number is then reduced to show the rate of moves per 1000 days in care. This gives an accurate picture of how

much children are moving because it only counts the number of moves in the current time period. Nevada County did not meet the national standard for this measure for the time period from 10/1/2020 to 9/30/21.⁴ There were at total of 21 moves in 6,000 placement days representing 31 distinct cases. Performance has been sporadic for this measure for the past 10 years. It was noted during the 2022 CSA by Stakeholders, Peers, and Staff that there is a great need for local and well trained RFA homes. There was also an expressed need for family finding as relative placements tend to be more stable than nonrelated placements. Given the variable performance on this measure it has been prioritized for improvement.

3-2F: Monthly visits (Out of Home) (Federal Standard ≥ 95.0%)

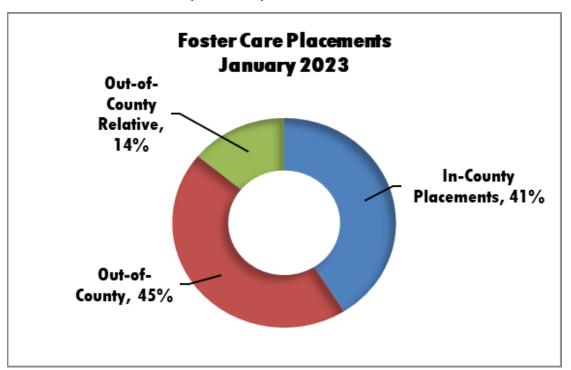


The graph above for 2F: Timely Caseworker Visits above illustrates the percentage of children who had timely in-person monthly visits from a social worker in a given year. The graph for 2F: Percent with Visits in the Residence depicts the percentage of children who had an inperson visit with a child in the home where they are living. For Timely Caseworker Visits Nevada County CWS has done well on this Measure since the last CSA. There is a dip in the in the data

⁴ Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Hammond, I., Ayat, N., Gomez, A., Jeffrey, K., Prakash, A., Berwick, H., Hoerl, C., Yee, H., Flamson, T., Gonzalez, A. & Ensele, P. (2022). CCWIP reports. Retrieved 8/23/2022, from University of California at Berkeley California Child Welfare Indicators Proiect website. URL: http://cssr.berkeley.edu/ucb_childwelfare

where a case was reopened for some data entry and there was difficulty properly closing it again. The graph shows that the standard was not met for four quarters because the reopened case does not have any monthly visits. Management is working with the UC Davis consultant to resolve this data issue. When that issue is resolved the data will show that monthly visits were above the state standard for the entire reported period. CWS was well above the state standard for Visits in the Residence.⁵

RESOURCE FAMILY RECRUITMENT, RETENTION, AND SUPPORT



Through the course of the 2022 CSA it was ascertained that in addition to there being a lack of Resource Families for specialized populations (i.e. sibling sets, youth aged 11-17, and probation youth) there was a lack of training for Resource Families for children with complex needs, and supports to retain Resource Family homes. There is a marked lack of in-county placements which means children lose connection to their community, leads to challenges for service provision to children, and increases travel time for children for supervised visitation. As

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of January of 2023, only 41% of Nevada County dependents were placed within county. The majority of children (59%) are placed out-of-county with only around 2% in out-of-county congregate care. This systemic factor affects placement stability, timely exits to permanency, and the overall wellbeing of children. Peers, stakeholders, and staff identified recruitment, retention, and support strategies as an area needing improvement thus is being prioritized.

PROBATION

3P1: PERMANENCY IN 12 MONTHS FOR CHILDREN ENTERING CARE (FEDERAL STANDARD ≥ 40.5%)

	Interval				
PERCENT	OCT2015-	OCT2016-	OCT2017-	OCT2018-	OCT2019-
PERCEINI	SEP2016	SEP2017	SEP2018	SEP2019	SEP2020
	%	%	%	%	%
Reunified		33.3	33.3		60
Adopted					•
Guardianship			•		20
Aged					
Out/Emancipated	•	•	•		20
Still in care	100	66.7	66.7	100	•

Although Probation met the national goal for measure 3-P1 in Q3 of 2021, in a 5-year CSA review of placement history, reunification occurred in 31.2% of the placement cases within 12 months of entering foster care. Youth who are placed by the Probation department into foster care have significant complex needs and often are a community safety concern. Probation youth tend to be older youth and it is generally harder to find a permanent placement for this age group.

3P2: Permanency in 12 Months for Children in Care for 12-23 Months (Federal Standard ≥ 43.6%)

	Interval					
Outcome	OCT2015- SEP2016	OCT2016- SEP2017	OCT2017- SEP2018	OCT2018- SEP2019	OCT2019- SEP2020	OCT2020- SEP2021
	%	%	%	%	%	%
Exited to						
reunification	•		•	•	•	•
Exited to						
adoption	•		•	•	•	•
Exited to						
guardianship	•		•	•	•	•
Exited to non-						
permanency	•		100	•	•	•
Still in care				100		100

The chart above depicts the number of probation youth who were in care the first day of the 12-month period, who had been in care between 12 and 23 months, was youth discharged to non-permanency within 12 months. ⁶ The remaining cases were juvenile sex offenders who required extensive long-term treatment due to the underlying charges.

FAMILY FINDING

Despite Probation not having a significant number of minors in placement that do not transition to AB12, the CSA findings raised awareness of the importance of family finding and maintaining family connection even if the minor is aging out and not returning home. Even if family cannot provide placement, they can still support the youth in care and into adulthood. Given these factors, this measure has been prioritized for an improvement strategy. 3-2F: Monthly visits (Out of Home) (Federal Standard ≥ 95.0%)

	Interval					
Monthly Visits	OCT2015- SEP2016	OCT2016- SEP2017	OCT2017- SEP2018	OCT2018- SEP2019	OCT2019- SEP2020	OCT2020- SEP2021
	%	%	%	%	%	%
Total	100	100	96.8	86.7	61.5	63.4

⁶ Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Hammond, I., Ayat, N., Gomez, A., Jeffrey, K., Prakash, A., Berwick, H., Hoerl, C., Yee, H., Flamson, T., Gonzalez, A. & Ensele, P. (2022). CCWIP reports. Retrieved 8/23/2022, from University of California at Berkeley California Child Welfare Indicators Project website. URL: https://cssr.berkeley.edu/ucb_childwelfare

CHILD WELFARE

Strategy 1: Increase the number of children in family-like placements and reduce the number of youth in congregate care.

RFA is a caregiver approval process to foster children, youth and Non-Minor Dependents (NMD) in the county child welfare and probation systems. The RFA Program replaced the old processes for licensing foster family homes. The RFA process includes training, home environment assessment, background checks, and family evaluations. A Resource Family (RF) completes one approval process, and upon approval, may choose to provide care on a short- or long-term basis.

Nevada County has been approving RF homes since the program went live in 2017. The program has mainly been utilized to approve relative caregivers to become a RF and has approved non-relative county homes as the one RFA worker has availability. This program has been understaffed since it was implemented. The plan which has already been put in motion is to increase the capacity of the program to recruit and increase supports to RFA families. To that end, the CWS program manager has already submitted a Request for Staffing Change to the County Executive Office which has been approved for Fiscal Year 2023-24. Additionally, clerical staff has been trained to support the approval process by utilizing the Binti database and contacting applicants about needed document so the RFA worker can spend more time on Family Evaluations and supporting Resource Families.

Foster Parent recruitment, retention and support was a focus of the 2016 SIP. However, the strategies put into place at that time relied on contracted FFA to provide the RFA training, recruitment, retention and support. This was unsuccessful in part because homes that were recruited were FFA homes not Nevada County homes so could and did get filled by other counties. The belief is that an in-house recruitment will be more successful as those recruited homes will be Nevada County homes recruited with the expressed mindset of keeping Nevada County foster children in Nevada County. The training provided also proved to be less effective than in-house training because the FFA was not as familiar with county processes and at times confused applicants about the process.

Two monthly support groups have been started for Resource Families. One is specific to relatives and the other is for all Resource Homes including Foster Family Agencies (FFA) families. Though groups have been started attendance has been sporadic. There has also been one respite event that was held in the winter so that Resource Families could drop off their children (biological and foster) and have a night out. This event was well attended and another event is being planned for the upcoming summer. With additional support of another worker it is thought that more engagement in the support groups may be achieved as this person will have the time to advertise and engage families.

There is an event that is to celebrate foster, adoptive, and guardianship families that is hosted by the Nevada County Superintendent of Schools in late spring. CWS had a recruitment booth at this event where free ice cream and information on RFA were provided. This is an annual event that CWS plans to continue to attend. Once the RFA worker is hired it is planned that there will be another such event to attend in the fall or winter.

The RFA worker will be hired in July of 2023 and trained in all aspects of RFA but specialize in recruitment. Though the entire state has experienced challenges hiring CWS does not plan to remain stagnant in recruitment. The approved position is for a social worker IV. However, if there is not success with recruiting a Social Worker IV the position will be recruited as a Social Worker III. Nevada County CWS has had better success recruiting Bachelor's Degree Level Social Workers. Currently there are two Social Worker III position where the social workers are perusing Master's Degrees in order to become a Social Worker IV. Given the size of the county growing workers has been met with more success than hiring Social Worker IV's.

The goal is to recruit homes that will foster children 11-17 (including Probation youth), sibling sets, respite homes, Spanish-speaking families, specific recruitment for children with complex needs. These measures will be tracked with the RFA database, Binti. Initial efforts will likely target schools and other organizations that already work with children. Currently, respite is provided by other Resource Families when possible. There is no home that is dedicated to providing respite care. What is desired is a respite home that will take any child, any time of day up to 30 days. Increasing the number of in-county placement is a priority to improve outcomes

for children who enter foster care. Additionally, the goal is to ensure all children in congregate care are stepped down into family-like placements.

Strategy 2: Motivational Interview training for social worker staff to improve communication and engagement with families.

Nevada County is working on a cross-sector collaboration strategy to engage stakeholder and county staff with regard to evidence-based practices (EBPs), target populations, and service areas. Part of this communication and engagement will be around Motivational Interviewing (MI), as it has been selected for staff and provider training. Utilization of MI aims to improve engagement by improving communication with clients. For instance, MI could help engage clients to identify strengths and determine needs while increasing client comfort, which could lead to increased likelihood of completion of services. It can help improve the interview and intake processes, which could engage clients in needed services sooner and potentially prevent re-entry into foster care Additionally, it is believed that MI will lead to stronger engagement with families and caregivers, which could lead to shorter stays in foster care, better engagement in aftercare services once the case closes, and less re-entry into care.

The first area where MI will be implemented is with CWS staff. The first step will be to create an implementation team that consists of the CWS Program Manager, Analyst and Supervisors. This team will work to on each step to ensure progress is made and any barriers to implementation are addressed. Once established, the implementation team will review outcomes to include staff stratification, client satisfaction, and progress on client outcomes. The team will meet monthly.

Next, a survey of staff will be conducted to see who has interest in MI training, has been previously trained in MI, if so when that training occurred, and if the training included model fidelity. Using this survey, the first cohort of training will be picked based on interest and experience.

After the initial trainings, a coaching program will be developed with the Program Manager and UC Davis Consultants. This program will likely start with coaching provided by the Northern Training Academy. The intention would be to transition coaching to experienced staff or for Supervisors. UC Davis would provide support to the coaching program until county staff

are fully ready.

The development of policies and procedures for model fidelity will follow training and coaching implementation. This will be developed by the CWS Program Manager and Analyst with the support of the UC Davis consultant. Additionally, MI will be built into organizational policies for job descriptions and will be included in by the Supervisor in performance reviews.

In order to assess the impact of MI on client satisfaction and outcomes, the MI implementation team will create a client satisfaction survey and administer the survey to families at the time of case closure. Additionally, the implantation team will review outcomes for CFSR case review Item 13: Child and Family Involvement in Case Planning on a annual basis and provide management with a performance outcome report at the end of every year.

PROBATION

STRATEGY 1: Use family finding in all probation cases to reduce STRTP placements.

Probation's plan is to achieve permanency sooner and increase respite care options to reduce the length of stay in congregate care and increase community-based placements through increasing family findings efforts in probation youth. Family finding is an intensive search method to find family members and other adults who would like to step in and care for children and youth in foster care who lack permanency. The goal of family finding is to locate long-term, caring, permanent connections and relationships for children and youth in foster care. The other key goal of family finding is to establish a long-term emotional support network with family members and other adults who may not be able to take the child into their home but who want to stay connected with the child. While family finding may result in permanent placements with relatives, another outcome is to establish a permanent lifelong connection with a group of relatives who reconnect with the child and provide emotional and other types of support.

By connecting youth in placement to extended family they may benefit from the connections that a family setting can provide. Permanent connections can increase the likelihood that youth will achieve stability and successfully transition to independent adulthood. These connections could help mitigate some of the challenges that are faced by probation youth in timely exits to permanency and could provide options that can reduce reliance on congregate care. Probation will seek to increase family finding efforts by locating, contracting,

and utilizing a third party specializing in these efforts.

During our last 5-year cycle, Family Findings was one of Probation's strategies. Probation focused many efforts on felony referrals and used a research database to identify prospective family homes. There was very limited success in identifying families by the use of the research database, Probation recognized it was not a family focused search because the family was not part of the identification process. Even when the family finding process was completed, it was not helpful in avoiding placement in a STRTP. Many families were resistant to the process and it became adversarial. This made it difficult to locate and identify families therefore resulting in a failed family finding search and need for placement in a STRTP. In addition, Nevada County is a small rural county and does not receive many felony referrals and Probation recognized many of the at-risk youth had misdemeanor referrals.

From January 1, 2017 to December 31, 2022, Probation average 89 felony referrals per year compared to 213 misdemeanor referrals. During the same period of time, we placed 15 youth in a STRTP, 53.3% had felony petitions and 46.7% had misdemeanor petitions. With approximately 50% of the placed youth having misdemeanor petitions, this is seen as an area for system improvement.

Probation is looking to expand the family findings practice with the intent to be more collaborative and avoid placement in a STRTP. Probation will be starting the process of family findings at the initial referral intake rather than wait until the youth is pending a placement order. This will allow Probation to have an initial discussion about possible respite care options and build natural supports on the front end in hopes that a strong support system for the family can be built to have better long-term outcomes. Probation will cross reference the information obtained from the family with the research database outcomes and ask for additional input from the family using a collaborative team approach. When individuals/families are identified as possible long-term options and natural supports, they will be invited to Child and Family Team meetings and other ongoing teams to build self-efficacy. Should placement be necessary at some point in the life of the case, Probation will have already built a support structure and a placement through RFA would be seamless and less traumatizing. Following the Integrated Core Practice Model, Probation will include the family in the solution.

Should the family be involved in a Family WRAP program, Probation will partner with the provider to assist in overcoming barriers to build healthy relationships with identified family members. This may include therapy, parent partners, and connection to other community-based programs as needed. It is believed the new process will also help Probation's standard supervision cases and reduce or eliminate the need for custody time in the juvenile hall and reduced time on juvenile supervision.

At the end of this 5-year cycle, the goal is to avoid placing any youth in congregate care because the family findings effort was more robust and collaborative with the family allowing for greater options for RFA homes and building natural support systems. Family findings also increases the ability for probation to find different options to avoid the use of congregate care and use community-based family-like settings.

It is believed the new process will also help standard supervision cases and reduce or eliminate the need for custody time in the juvenile hall and reduced time on juvenile supervision. At the end of this 5-year cycle, the goal is to avoid placing any youth in congregate care because the family findings effort was more robust and collaborative with the family allowing for greater options for RFA homes and building natural support systems. By increasing agency responsiveness to the community and building natural supports it is believed that even when a child is placed they will be placed in their community with increased support which will facilitate faster return to their families and increase P2: Permanency in 12 months (in care 12-23 months).

PRIORITIZATION OF DIRECT SERVICE NEEDS

Prioritization and selection of direct service needs to be funded with Child Abuse Prevention, Intervention and Treatment (CAPIT)/ Community Based Child Abuse Prevention (CBCAP)/and Promoting Safe and Stable Families (PSSF) funding is based on County needs and information obtained during the CFSR process. The target population found to be of greatest risk of maltreatment is children zero to five. Additional research through FFPS has found that the zip code of 95945 has the most allegations and substantiations of child abuse and neglect. Most of the agencies listed below serve this zip code and children zero to five. Nevada County plans to continue the services and contracts that were initiated during the previous cycle which are serving the needs of families described below. The County is working on a communication and engagement strategy related to FFPS and the implantation of MI which could expand the

capacity of agencies to engage families at the greatest risk of child maltreatment.

CAPIT/CBCAP/PSSF FUNDED ACTIVITIES

PARTNERs Family Resource Centers (FRCs)- The PARTNERs FRCs are an important resource for families in the community to get connected to other families and services available in the area. Child Welfare currently contracts with the Nevada County Superintendent of Schools (NCSOS) using CBCAP, CAPIT, and PSSF funds to provide Differential Response (DR) to families referred to CWS but not rising to the level of CWS intervention. These families are referred to the FRC to receive case management and referral services in the Western region of the county. Nurturing Parenting Program group classes are offered to families on a quarterly basis as well as individual parent coaching. Families in need can also receive services on a walk-in basis. Probation also refers clients to the FRCs.

Healthy Babies (HB) – HB is funded with CBCAP dollars. This is a prevention based program that is an intensive home visiting curriculum using the evidence-based Healthy Families America Model. HB services are offered to families with indicated risk. Home visitors (HVs) work in both Western and Eastern County. Program activities supported by the HB HVs included client home visits, transports, and monthly group socialization activities. The HB HVs additionally provides client information and referrals to a variety of other services including Basic Needs/Concrete Supports; Behavioral Health/Mental Health Services; Domestic Violence Services; Health Services; Substance Abuse Services; Substance Abuse Treatment, and other community resources based on individual need.

Parent leadership opportunities are also provided by the HB Supervisors and the Program Manager by encouraging parents' service/participation on the HB Community Advisory Board (CAB); by being interviewed as a HB program participant during regular site visits, and/or by participating in focus groups and/or other survey opportunities as they become available to the program.

Special projects also supplied to parents include providing testimonials, participation in surveys after events, pictures for local, state newsletters, or other outreach activities. The HB Supervisors and Program Manager additionally support parents by offering training opportunities to ensure that the parents are well-received and their skills are used effectively

during, meetings or other outreach activities.

<u>Sierra Community House (SCH)</u> – The SCH serves families in the Eastern region of the county. CWS contracts with the SCH using CAPIT funds to provide Differential Response to that region of the county. Families are referred to the SCH to receive case management and referrals services. Families can also receive services on a walk-in basis. Probation also refers clients to the SCH.

The SCH utilizes the Strengthening Families and Family Support frameworks, by delivering services that are research and evidence-based. All programs and services apply research-informed ideas that contribute to the overall well-being of families. The Strengthening Families approach aims to build the five protective factors in families, in order for these families to have the support and tools needed to be successful. The work of the SCH is to build upon the following protective factors:

- 1. parental resilience
- 2. social connections
- 3. knowledge of parenting and child development
- 4. concrete support in times of need
- 5. social and emotional competence in children.

Additionally, the principles of Family Support primarily guide the services and programs, as well as the collaborative partnerships with other resources and partners in the community. For the target population, Family Advocates aim to leverage existing strengths within the family while empowering families to build upon these strengths to maintain their overall well-being. Parents are the experts on their family's needs and as such play the central role in identifying areas for growth and improvement and in developing their family goals. This process includes assessing resources, skills, and experiences while at the same time further developing individualized action plans that establish goals and incorporate access to community resources and services. All programs and services at the SCH align with the overall mission of the organization to promote the social and economic success in the community by providing education, mobilizing resources, and advocating for change.

Helping Hands Nurturing Center - CWS contracts with Helping Hands using a blending of CAPIT,

PSSF, and CalWORKs funds to provide the Nurturing Parenting Program to families with an open CWS case. The Nurturing Parenting Program is a family-centered trauma-informed program designed to build nurturing parenting skills as an alternative to abusive and neglecting parenting and child-rearing practices. The long term goals are to prevent recidivism in families receiving social services, lower the rate of multi-parent teenage pregnancies, reduce the rate of juvenile delinquency and alcohol abuse, and stop the intergenerational cycle of child abuse by teaching positive parenting behaviors. Helping Hands also provides court ordered supervised visitation. They have one location in Grass Valley but serve families in Truckee as needed.

Helping Hands provides in-home visits, parenting sessions, one-on-one sessions, groups designed for parents of children of all different ages, father's groups, young parent groups, mommy and me play groups, co-parenting sessions in one-on-one or group settings, training for kinship-care providers, training for foster parents, community education, parent coaching, services to incarcerated parents, and a positive play space with several play rooms that have games, paints, and activities. They also model and provide nutritional foods and snacks, positive nurturing peer support, home safety support and education, and hands on developmental interactive play skills were taught.

Stanford Sierra Youth Families- Family Preservation Program is funded with Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) dollars in a partnership with Behavioral Health. The PSSF funds provide the Medi-Cal match for early intervention services and after-care services for families. The Family Preservation service offers in home parenting education, family therapy, case management, and child psychotherapy with the goal of keeping children safely in their homes. They also provide adoptive parent recruitment and training. They have locations in Sacramento, Placer County, Chico, and Nevada City. They provide the families with:

- 1. Individual therapy & family therapy
- 2. Clinician and Family Support Specialists (FSSs):
- 3. Individual rehabilitation related to skill building
- 4. Case management
- 5. Positive Parenting Program (Triple P)
- 6. Parent Partners

Child Welfare/Probation Placement Initiatives

PATHWAYS TO WELL-BEING (KATIE A. VS BONTA)

Child Welfare utilizes the Child Welfare Mental Health Screening Tool to determine Katie A. eligibility for children. Currently, every child with an open CWS case who is eligible is referred for Katie A. services through Children's Behavioral Health. Once the referral is received, Children's Behavioral Health then initiates services. Child welfare facilitates monthly Katie A. meetings with behavioral health, public health, children's mental health, and eligibility to discuss cases.

Katie A. policy and procedure for 7-day renewal of services is such that one of the parents is needed to sign the renewal, as is their legal right. The social worker can only sign for renewal if so ordered by the court. It can become problematic when parents are absent and a social worker has a hard time locating them. When a parent cannot be found a court order must be obtained. This ultimately leads to delays in treatment.

FOSTERING CONNECTIONS

Nevada County Child Welfare Services and the Probation have implemented California Fostering Connections to Success program. This program allows foster youth over the age of 18 to continue to remain in foster care and receive foster care benefits from ages 18 to 21 if certain participation criteria are met. Currently, there is one social worker who is dedicated to this program. Probation placement youth are also part of this program.

Nevada County also offers Transitional Housing Program-Plus (THP+) for youth who exited foster care after turning 18. The program has an age limit for THP+ to 25 years of age and amount of time that a youth may receive services is 36 months. Eligible probation youth also utilize this program.

CONTINUOUS QUALITY IMPROVEMENT (CQI)

A critical part of building an effective CQI system is strengthening staff's skills for generating and applying evidence to decision making. As part of CQI, case consultations are occurring. In a case consultation a worker with a concern or problem with a case or referral meets with the entire staff to brainstorm a solution to the situation. Involving all staff in the process lends many different perspectives to the problem aiding in the development of well-informed decisions.

Also as part of CQI, Nevada County has been completing Federal Case Reviews. The Federal Case Reviews are a qualitative look a case to supplement the quantitative data already available. Currently, Nevada County has one trained and certified social to perform the Federal Case Reviews. An analyst is trained and certified to provide Quality Assurance for the reviews. Nevada County has to review 20 cases a year, five to be completed each quarter. This data has yielded information that improvement is needed in father engagement. To increase father engagement a parenting group targeted to fathers has been create with the parenting provider.

COMMERCIALLY SEXUALLY EXPLOITED CHILDREN (CSEC)

Nevada County opt into the Commercially Sexually Exploited Children (CSEC) funding options provided by the state and receives \$25,000 in funding a year. A policy and procedure was recently updated for Nevada County regarding CSEC. This policy and procedure has been used as a training tool and has help raise awareness of these children and youth in the department. Staff training is going to be a focus in the coming year. Child Welfare and Probation meet to discuss CSEC youth and those at-risk of CSEC on monthly basis. The CSEC prevention Cool Aunt Series which is an online tool for staff, parents, and youth is being implemented in Nevada County. At this time, Nevada County is in the process of updating the interagency CSEC protocol.

FAMILIES FIRST PREVENTION SERVICES ACT PART IV

Nevada County utilizes the Family Stabilization Collaborative (formerly known as Placement Committee) to help prevent moving children to higher levels of care. This collaborative consist of Public Health, Probation, Children's Behavioral Health (CBH), Child Welfare, Nevada County Superintendent of Schools, and Alta California Regional Center (as

needed). A worker whose child might need a higher level of care make a referral to the FSC Chair either on an emergency basis or during the scheduled monthly meeting to discuss placement options and strategies for placement preservation. If the worker feels the child may need placement in a Short Term Residential Treatment Facility (STRTP) they will also make referral to the Qualified Individual (QI). The QI is a supervisor for CBH and begins work on the assessment once the referral is received. The QI in conjunction with the FSC assess the child's needs and works on a placement plan for the child to bring before the court.

5 – YEAR SIP CHART

CWS

Priority Outcome Measure or Systemic Factor: Foster and Adoptive Licensing, Recruitment and Retention

National Standard: N/A

CSA Baseline Performance: Currently there are 16 children placed in County RFA homes and of the 42 children in foster care 59% are placed out-of-county.

Current Performance: Q3 2021: 16 children placed in County RFA homes and of the 42 children in foster care 59% are placed out-of-county.

Target Improvement Goal: Grow the number of resource families by 6%% annually, focusing on:

- Youth ages 11-17 (including probation youth)
- Sibling sets
- Respite care
- Spanish speaking homes
- In-county placements
- Complex needs specific recruitment
- All children in congregate care stepped-down to a family-like placement.

Priority Outcome Measure or Systemic Factor: Staff and Provider Training

National Standard: N/A

CSA Baseline Performance: Training baseline not yet ascertained.

Current Performance: Q3 2021: Training baseline not yet ascertained

Target Improvement Goal:

Year 1-2: Train all CWS Staff in Motivational Interviewing **Year 3-4:** Provide MI refresher trainings to CWS Staff

Probation

Priority Outcome Measure or Systemic Factor: P2 – Permanency in 12 months (in care 12-23

months).

National Standard: P2 ≥43.8%

CSA Baseline Performance: P2 = 0%

Current Performance: Q3 2021 P2 = 0%

Target Improvement Goal: Probation officers will complete family findings for every referral received and create a comprehensive list of no less than 3 eligible/suitable people for each youth/family. Increase exits to permanency by 10% annually.

Strategy 1: Increase the number of RF homes in county and place children in more family-like settings.	CAPIT CBCAP PSSF N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s): Foster and Adoptive Licensing, Recruitment and Retention. Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	
Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Write a Request for Staffing Change to ask for an additional Social Worker IV who will expand the program by recruiting RFA homes.	November 2022	January 2023	Program Manager
B. Hire and train Social Worker IV for the new RFA position.	July 2023	December 2023	Program Manager and RFA Supervisor
C. Provide support to RFA families through monthly parent groups.	January 2023	Feb 2024	RFA Supervisor and RFA Social Workers
D. Monitor recruitment progress and events through the database Binti.	March 2024	July 2026	CWS Analyst

E. Gauge client success of support groups through attendance numbers and client satisfaction surveys.	June 2024	July 2026	CWS Analyst, RFA Supervisor and RFA Social Workers
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Strategy 2: Motivational Interview training for social worker staff to improve communication and engagement with families.	CAPIT CBCAP PSSF N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s): STAFF AND PROVIDER TRAINING Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	
Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Train all staff including social work supervisors in Motivational Interviewing (MI) through the Northern Training Academy.	September 2023	July 2024	CWS Program Manager, Social Services Supervisors, UC Davis Consultants
B. Develop a coaching program led by supervisors following training to support learning and integration of MI.	Jan 2024	June 2024	Program Manager, UC Davis Consultants

C. Integrate MI into interview and intake processes, and case planning. Develop policy and procedures to support MI fidelity review.	March 2024	December 2024	UC Davis Consultant, Program Manager, CWS Analyst
D. Regular Meetings of Implementation Team to evaluate progress.	July 2023	July 2025	CWS Program Manager, CWS Analyst, Social Services Supervisors
E. Assess the impact of MI on client satisfaction and outcomes by creating a client satisfaction survey and monitoring outcomes for CFSR case review Item 13: Child and Family Involvement in Case Planning.	Jan 2024	July 2025 and ongoing	CWS Program Manager, CWS Analyst

Probation

Strategy 1: Use family finding in all probation cases to reduce STRTP placements.	CAPIT CBCAP PSSF N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s): P2 – Permanency in 12 months (in care 12-23 months) Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	
Action Steps:	Implementation Date:	Completion Date:	Person Responsible:
A. Train Probation Officers how to use the family findings resource tool.	January 2024	March 2024	Supervisor/Program Manager
B. Train Probation Officers how to engage families to enhance the family findings effort.	March 2024	July 2024	Supervisor/Program Manager
C. Identify and collaborate with local service providers to assist probation with family findings.	March 2024	December 2024	Supervisor
D. Collaborate and train with local service providers who are providing a service to the youth/family to enhance the family findings effort.	July 2024	December 2024	Supervisor/Community Providers

E. Track all referrals that resulted in a	December 2024	December 2025	Supervisor/Program Manager
STRTP placement. Track how many			
family placements were solicited			
through family finding collaboration with			
service providers.			

COUNTY: NEVADA

DATE APPROVED BY OCAP: 08/25/2023

CAPIT/CBCAP/PSSF PROGRAM AND EVALUATION DESCRIPTION

PROGRAM DESCRIPTION

PROGRAM NAME:

FAMILY RESOURCE CENTER/DIFFERENTIAL RESPONSE—ITEM 1 ON EXPENDITURE WORKBOOK

SERVICE PROVIDER:

PARTNERS FAMILY RESOURCE CENTERS

PROGRAM DESCRIPTION

Nevada County Superintendent of Schools PARTNERS Family Resource Centers (FRCs) offer a wide variety of events, classes and opportunities for families and children of all ages. The FRCs provide an array of services to address the unmet needs of the populations out of three sites: Grass Valley; North San Juan; and Penn Valley. The FRC's are family-friendly spaces with quality toys, children's books and a video lending library with sections on pregnancy, childbirth, parenting and wellness, a brochure rack, and multiple public access computers with high-speed internet connection. The FRC staff provide confidential information and referral to families for services like counseling, parenting classes, healthcare and childcare on an as-needed basis. In addition to drop-in services, the Centers may host playgroups and story time activities for young children; provide Nurturing Parenting Program (NPP)-8-week Series parenting class for families; and babysitting certification for young adults. In addition, the FRCs serves as a home for unique, parent-driven initiatives. Services are offered in English and in Spanish. The FRCs also effectively collaborate to provide free access to a community-supported closet of clothing, gear, and basic necessities for foster children and children in crisis.

The FRC will incorporate these family support principles and activities:

- Staff and families work together in relationships based on equality and respect.
- Staff will support the capacity of families' growth and development.
- Families are resources to themselves and the community.
- Activities affirm and strengthen cultural, racial, and linguistic identities and enhance the ability of families to function in a multicultural society.
- FRCs are embedded in their communities and contribute to the community-building process.
- Programs advocate with the families for services and systems that are fair, responsive and accountable.
- Activities are flexible and continually responsive to emerging family and community issues.

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 Principles of family support are modeled in all activities, including planning, governance and administration.

Target Population:

PARTNERs FRCs serves any family requesting information or support. Many families are referred by grandparents, friends, educators, therapists, 211, and other service providers. Child Welfare Services (CWS) and non-CWS families are served.

Service Area:

Through the three PARTNERS FRCs, services are provided to children and families throughout Western Nevada County including Grass Valley, Penn Valley, North San Juan, and surrounding areas. The FRCs prioritize special needs and high-risk children and families as necessary. Services are offered primarily at the FRC, but may include area schools, in the family's home, and other locations and virtually as needed. Programs are adapted to meet the special needs of children with physical and/or learning disabilities. Families are encouraged to participate in all treatment services. Children benefit when parents make needed changes and address their issues. Working with the entire family helps create a safe place for children to thrive. Priority is given to children and families referred by health and human service professionals, including Child Welfare Services (CWS), physicians, counselors, child development programs, schools, etc., that have identified potential levels of abuse or neglect in the home.

Scope of Services:

The PARNTERS FRCs provide the following services:

- PARNTERS FRCs maintain successful differential response model for community services.
 Priority is given to children and families referred by health and human service
 professionals that have identified potential levels of abuse or neglect in the home. The
 coalition meets once a month to execute a successful coordinated response model and
 evaluate and refine the model.
- A member of the PARTNERS FRCs regularly attends the Child Abuse Prevention Council meetings.
- Guidance/onsite oversight to support Family Resource Center activities, including Differential Response referrals.
- PARTNERS Family Resource Centers help families alleviate crisis that might lead to out-of-home placement or unsafe conditions for children by assisting families in identifying and obtaining services and other support necessary to address their multiple needs in a culturally sensitive manner. PARTNERS FRCs focus on family stability and self-sufficiency by combining efforts and resources to fulfill a total community need. By identifying families at the first sign of trouble and engaging them in identifying solutions to their problems, the goal is to promote voluntary participation in community-based organizational services designed to support families before further problems develop, engaging families in solutions and providing them with focused services so that there is the best possible opportunity to make needed improvements.

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 Parenting education in the form of Nurturing Parenting Program (NPP)-8-week Series, NPP one-hour workshops, and one-on-one parenting support. Playgroups and story times will also be provided.

Major activities and timelines:

March: Assist with planning of Summer Day Camp at Penn Valley FRC

Monthly: Meetings with CWS, FRC Staff and FRC Coordinator

Quarterly: Coordinate and plan Family Fun Nights to engage families at local schools

Ongoing: Outreach and engagement activities

Ongoing: Link families with Parenting and other resources at FRC's.

Ongoing: Case management of Differential Response and other at-risk families

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	Family Resource Center/Differential Response
СВСАР	Differential Response
PSSF Family Preservation	
PSSF Family Support	Family Resource Center
PSSF Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

IDENTIFY PRIORITY NEED OUTLINED IN CSA

Lack of Services and Resources (2021 CSA Page 118)

TARGET POPULATION

Families at risk of child abuse and neglect

TARGET GEOGRAPHIC AREA

Western Nevada County

TIMELINE

JULY 2021-JUNE 2025

EVALUATION

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PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Families have support in times of need	80% of Parents show improvement in at least one of the following protective factors: Family Functioning/Resiliency, Social Emotional Support, Concrete Support	Protective Factors Survey will be used to evaluate change in family functioning and supportive protective factors for parents receiving 6 hours or more of support For families receiving less than 6 hours of service the numbers of referral given, number of follow-throughs, number of concrete supports given will be counted. Each family receiving service will be asked to take a survey to determine quality of service.	Protective Factor Survey will be completed each quarter for families receiving 6 or more hours of support Services provided will be counted and surveys administered after each time a service is provided. Surveys will be reviewed monthly.
Parents increase knowledge of parenting and child development	80% of Parents taking Nurturing Parenting classes, workshops, or 1:1 support - will report a reduction in overall stress, over- reactivity, and hostility while increasing parenting skills and competence	Nurturing Parenting Class Evaluation includes self- assessment on ability to stay calm, connect and problem solve with child, and ask for help	Nurturing Parenting Class Evaluation to be used during and after 8-week series and 1-hr workshops First 5 Parenting Ladder to be used for 1:1 support

QUALITY ASSURANCE

DATE APPROVED BY OCAP: 08/25/2023

PARTNERs FRCs report to Child Welfare regarding OCAP funded activities biannually. Number of participants is tracked using a web-based system sponsored by First California 5 called Persimmony for each OCAP funded activity. The report includes the rate at which clients are achieving the desired outcome. The Emergency Response Supervisor meets with the contractor annually and meetings are scheduled as needed throughout the year to address questions or issues as they arise.

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	Voluntarily	Surveys reviewed	Areas of concern
developed in-house	completed by	monthly	addressed by staff to
at PARTNERS FRCs.	participants after		resolve issues and
	receiving services		ensure CQI

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DATE APPROVED BY OCAP: 09/01/2023

PROGRAM DESCRIPTION

PROGRAM NAME

Differential Response-Item 2 on Expenditure Workbook

SERVICE PROVIDER

Crisis Intervention Services (DBA Sierra Community House)

PROGRAM DESCRIPTION

Sierra Community House (SCH) ensures the overall well-being of its clients and the entire Truckee North Tahoe community. The goal is to serve community members as a location for programs and referrals focused on building family health and strength, while encouraging residents to take leadership roles to create positive change in their communities. As part of that goal, SCH provides case management as well as specific services to families and individuals, including early childhood education classes, parenting support and classes, home visits, access to mental health services, access to low-cost health insurance, emergency assistance for housing and utilities, peer education programs for chronic health issues and legal assistance for family law, civil issues such as eviction and wage claims. In areas where the direct services needed by a family is not provided, referrals to the appropriate nonprofit or county agency that can help are made. CAPIT funding helps SCH to achieve this goal by helping families build upon the protective factors and focusing on family stability and self-sufficiency. By identifying highrisk families and engaging them in individualized solutions to their problems, SCH is able to support opportunities for much needed improvements to well-being and safety.

Service Area:

SCH provides core services including case management as well as specific direct services to families and individuals, including early childhood education programs, parenting support and parenting classes, home visits, access to mental health therapy, access to low-cost health insurance, emergency assistance for housing and utilities, peer education programs for chronic health issues, affordable housing outreach, assistance with energy efficiency surveys for low-income households, and legal assistance with civil issues such as eviction and wage claims that prevent a family from moving towards stability and self-sufficiency. Where SCH does not provide the particular service needed by a family, they refer that family to other nonprofit agencies or to a county agency that can offer the service that is needed. SCH is a one-stop, safety-net location for programs and referrals focused on building family health and strength while encouraging residents to take leadership roles to create positive change in their

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communities. SCH is staffed with bilingual/bicultural individuals trained in the principles of family support and poised to provide referrals for behavioral health, medical/dental resources, peer support workshops, educational services and enrichment programs for parents and their children.

SCH provides child development and family support services in Eastern Nevada County to promote empowerment within families. The scope of work provided supports both Nevada County's and Sierra Community House overall mission and the needs of families.

Scope of Services:

Sierra Community House (SCH) provides the following services:

- Actively participates in collaborative groups comprised of Nevada County Child Welfare
 Services and other community agencies benefiting from AmeriCorps volunteer support
 with the purpose of: defining AmeriCorps activities and models of service delivery;
 recruiting volunteers; training and supervising, advising, and supporting AmeriCorps
 volunteers. All AmeriCorps members will be trained in the Nurturing Parenting Program
 (NPP) through the Office of Child Abuse and Prevention and the NPP curriculum will be
 incorporated into practice,
- Maintain a successful differential response model for community services. Priority is
 given to children and families referred by health and human service professionals that
 have identified potential levels of abuse or neglect in the home. SCH is the designated
 Eastern Nevada County hub providing case management, information, community links
 and outcomes tracking. The DR Multidisciplinary Team meets once a month to execute a
 successful coordinated response model, evaluate, and refine the model. In addition, a
 second monthly multi-disciplinary meeting helps track the success of referrals and
 services provided to the families.
- Provides advocacy, peer support, and other services and referrals to clients referred by CPS tracking each family's success as a result of the referrals and reporting the amount of services each referred family received during the year and educates the community on the differential response model.
- Provides integrated services ensuring collaborative efforts among all the participating organizations for children and families to receive the needed services.
- Help for families to alleviate crisis that might lead to out-of-home placement or unsafe conditions for children by assisting families in identifying and obtaining services and other support necessary to address their multiple needs in a culturally sensitive manner.
- SCH focuses on family stability and self-sufficiency by combining efforts and resources to
 fulfill a total community need by identifying families at the first sign of trouble and
 engaging them in identifying solutions to their problems, promoting voluntary
 participation in community-based organizational services designed to support families
 before further problems develop, engaging families in solutions and providing them with
 focused services so that there is the best possible opportunity to make needed
 improvements.

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• Differential Response staff assess families on intake and develop action plans within two weeks and connect families to needed services on and off site as matched with their identified needs (mental health, substance abuse, parenting support, housing, domestic violence, one-on-one case management, etc.).

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	Differential Response
CBCAP	
PSSF Family Preservation	
PSSF Family Support	
PSSF Time-Limited Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	

IDENTIFY PRIORITY NEED OUTLINED IN CSA

Lack of affordable housing, mental health services, respite services, lack of SUD services in Truckee, lack of services for high need children.

TARGET POPULATION

Families at risk of child abuse and neglect

TARGET GEOGRAPHIC AREA

Eastern Nevada County

TIMELINE

July 1, 2021-June 30, 2025

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Families have	80% of high-risk	NewOrg is the	Staff track clients
concrete supports in	families will achieve	database	progress bi-monthly
times of need	their individualized	management system	throughout the life of
	action plan	used by SCH	the case by assessing
		First 5 Placer Family	the family using the
		survey	First 5 Placer Family

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	survey and running
	data reports

QUALITY ASSURANCE

SCH reports to Child Welfare regarding OCAP funded activities annually. The report includes the rate at which clients are achieving the desired outcome. The Emergency Response Supervisor meets with the contractor biannually and meetings are scheduled as needed throughout the year to address questions or issues as they arise.

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Satisfaction survey	Voluntarily	Surveys reviewed	Areas of concern
developed in-house	completed by	monthly	addressed by staff to
	participants after		resolve issues and
	services		ensure CQI

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DATE APPROVED BY OCAP: 09/26/2023

PROGRAM DESCRIPTION

PROGRAM NAME

Nurturing Parenting Program – Item 3 on Expenditure Workbook

SERVICE PROVIDER

Helping Hands

PROGRAM DESCRIPTION

Helping Hands provides Nurturing Parenting Program (NPP) services utilizing the Nurturing Parenting Program (NPP) curriculum that coordinates health and social services for families referred by Child Welfare Services (CWS) with an open CWS case, Helping Hands provides supervised supervision/parenting sessions, and/or group services; utilizing the NPP best practices; using strength based and multi-disciplinary approaches; and focuses on family stability and self-sufficiency.

Helping Hands assesses the family's strengths and needs when a referral from CWS is received and provides needed services. The assessment is accomplished utilizing the Adult & Adolescent Parenting Inventory (AAPI-2) pre-process/post survey. The AAPI-2 is an inventory designed to assess the parenting and child rearing attitudes of adolescents and adult parent and pre-parent populations. Based on the known parenting and child rearing behaviors of abusive parents, responses to the inventory provide an index of risk for practicing behaviors known to be attributable to child abuse and neglect. The AAPI-2 is the revised and re-formed version of the original AAPI first developed in 1979. This assessment is given halfway through the program to assess progress and identify areas still needing to improve and again at the end of the program.

Helping Hands provides:

- Individualized Nurturing Parenting Sessions Sessions typically start when CWS offers family reunification services. These sessions are guided by the goals set forth by the CWS and reviewed with the parent in sessions. Goals are reviewed monthly with parents and CWS. The material is individualized to each family's needs to meet ages of children and dynamics of family. The amount of sessions is approved by department to best meet the goals of parent. Monthly staffing with CWS occurs to discuss strengths, challenges and next steps. The length of the program varies based on the needs of the family and often transitions from individual sessions to coaching once a child has been returned.
- **Father's group** Are 13-week groups to support the needs of fathers and the importance of their role as a nurturing father, addresses the roots of fathering, nurturing oneself and children, fathering sons and daughters, discipline without

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violence, playing with children, managing anger/resolving conflict, teamwork with spouse or partner, balancing work and fathering, communication and problem solving, cultural influences, dealing with feelings, while identifying the father they choose to be.

- Parent Educational Play Groups-Interactive groups designed to support child development understanding through a fun play experience while building safe social supports to deepen the experience by engaging with other parents. Studies show that parents who have been given updated information and have time to practice the skills are more effectively able to parent and feel confident in their abilities. Play groups help families to create a more nurturing understanding of the critical techniques that are family-centered, trauma-informed, and designed to build nurturing parenting skills that they can apply as an alternative to abusive and neglectful parenting and child-rearing practices. The Nurturing Parenting Programs target all families at-risk for abuse and neglect with children birth to 18 years. The programs feature activities to foster positive parenting skills with nurturing behaviors, promote healthy physical and emotional development, teach appropriate roles, and developmental expectations.
- **Pre-Dispositional Groups** Six-week voluntary groups to engage parents as they transition to court ordered services through Child Welfare Services.
- Co-Parenting, From Conflict to Empathy For separated, divorced, or high conflict families. The Nurturing Co-Parent Program from Conflict to Empathy helps co-parents establish a nurturing relationship for separated, divorced, or high conflict families in an advanced parent coordination, facilitation, and parent coaching program that utilizes NPP as a vehicle for transforming high conflict co-parenting to nurturing co-parenting. This program combines the principles and structure of the three layers of divorce impasses, mediation, cognitive restructuring, and conflict resolution with the developmental sequence of the Nurturing Parent Program. Nurturing Co-Parent Program helps parents establish a healthy co-parent relationship by increasing parental empathy while reducing parental conflict and the risk factors that influence children's adjustment in high conflict families. In the 10-week Co-Parent Program, lessons can be delivered in a one-to-one format, or in co-parent sessions with both parents, or in a group format. Parents learn:
 - How to grow in empathy as a means to decrease reactivity and conflict,
 - How to identify and meet their needs constructively while understanding and meeting their children's needs
 - How to identify and overcome destructive attitudes affecting their role as a parent and co-parent
 - How to learn emotional regulation for themselves and their children

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- How to effectively communicate, resolve conflicts, reduce stress, and problem solve parenting and co-parenting issues.
- Prevention Group & Seven Individuals —Program for families that are brought to
 attention of CWS outside of court ordered services (voluntary) The 16 session group
 supports families in understanding the basic fundamentals of parenting while learning
 the protective factors. It builds safe social supports to deepen the experience by
 engaging with other parents to share commonalities. In the individual sessions,
 challenges or barriers can be addressed in a private setting that supports the
 complexities of each individual family. Connection to other resources and agencies that
 can help each family maintain their success is also provided.
- Supervised Parent Coaching Nurturing Parent Sessions- Educational interactive play sessions between parent and child with Parent Educator to coach by role modeling implementation of skills with parent and child are learned in the NPP sessions. These sessions can take place at Helping Hands, in parents' home, or in the community.
- **52-week Child Abuse & Prevention Program** Prevent reoccurrence of child abuse and child neglect by teaching the definition of child abuse or endangerment, identifying high-risk situations, and reviewing short-term and long-term effects on children.

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES	
CAPIT	Parent Education	
CBCAP		
PSSF Family Preservation		
PSSF Family Support		
PSSF Family Reunification		
PSSF Adoption Promotion and Support		
OTHER Source(s): (Specify)	CalWORKs	

IDENTIFY PRIORITY NEED OUTLINED IN CSA

General Neglect

P1: Exits to Permanency in 12 Months for Children Entering Care

P4: Reentry into Foster Care

DATE APPROVED BY OCAP: 09/26/2023

TARGET POPULATION

Families involved with Child Welfare

TARGET GEOGRAPHIC AREA

Western Nevada County

TIMELINE

JULY 2021-JUNE 2025

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Parents increase	70% of parents	The Adult &	Completed by
knowledge of	achieve positive	Adolescent Parenting	participants at
parenting and child	outcomes	Inventory (AAPI-2)	program entry, in
development			process, and at exit

QUALITY ASSURANCE

Helping hands reports to Child Welfare regarding OCAP funded activities biannually. The report includes the rate at which clients are achieving the desired outcome. The Ongoing Supervisor meets with the contractor monthly and meetings are scheduled as needed throughout the year to address questions or issues as they arise.

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Scaling Questions	Completed by	Surveys reviewed by	Areas of concern
	participants before	staff after each	addressed by staff, as
	each parenting class	session	appropriate to
	& at end of session		resolve issues and
			ensure continuous
			quality improvement
			(CQI)
Testimonials	Given at the end of	Statements reviewed	Area of concern
	the program	by staff after a client	addressed by staff
		has completed the	and addressed using
		program	CQI

DATE APPROVED BY OCAP: 08/25/2023

PROGRAM DESCRIPTION

PROGRAM NAME

Nurturing Parenting Program – Item 3 on Expenditure Workbook

SERVICE PROVIDER

Helping Hands

PROGRAM DESCRIPTION

Helping Hands provides Nurturing Parenting Program (NPP) services utilizing the Nurturing Parenting Program (NPP) curriculum that coordinates health and social services for families referred by Child Welfare Services (CWS) with an open CWS case, Helping Hands provides supervised supervision/parenting sessions, and/or group services; utilizing the NPP best practices; using strength based and multi-disciplinary approaches; and focuses on family stability and self-sufficiency.

Helping Hands assesses the family's strengths and needs when a referral from CWS is received and provides needed services. The assessment is accomplished utilizing the Adult & Adolescent Parenting Inventory (AAPI-2) pre-process/post survey. The AAPI-2 is an inventory designed to assess the parenting and child rearing attitudes of adolescents and adult parent and pre-parent populations. Based on the known parenting and child rearing behaviors of abusive parents, responses to the inventory provide an index of risk for practicing behaviors known to be attributable to child abuse and neglect. The AAPI-2 is the revised and re-formed version of the original AAPI first developed in 1979. This assessment is given halfway through the program to assess progress and identify areas still needing to improve and again at the end of the program.

Helping Hands provides:

Supervised Parent Coaching Nurturing Parent Sessions- Educational interactive play
sessions between parent and child with Parent Educator to coach by role modeling
implementation of skills with parent and child are learned in the NPP sessions. These
sessions can take place at Helping Hands, in parents' home, or in the community.

DATE APPROVED BY OCAP: 08/25/2023

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	
СВСАР	
PSSF Family Preservation	
PSSF Family Support	
PSSF Family Reunification	Supervised Visitation
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	CalWORKs

IDENTIFY PRIORITY NEED OUTLINED IN CSA

General Neglect

P1: Exits to Permanency in 12 Months for Children Entering Care

P4: Reentry into Foster Care

TARGET POPULATION

Families involved with Child Welfare

TARGET GEOGRAPHIC AREA

Western Nevada County

TIMELINE

JULY 2021-JUNE 2026

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Parents increase	80% of parents	The Adult &	Completed by
knowledge of	achieve positive	Adolescent Parenting	participants at
parenting and child	outcomes	Inventory (AAPI-2)	program entry, in
development			process, and at exit

QUALITY ASSURANCE

DATE APPROVED BY OCAP: 08/25/2023

Helping hands reports to Child Welfare regarding OCAP funded activities biannually. The report includes the rate at which clients are achieving the desired outcome. The Ongoing Supervisor meets with the contractor monthly and meetings are scheduled as needed throughout the year to address questions or issues as they arise.

CLIENT SATISFACTION			
Method or Tool	Frequency	Utilization	Action
Scaling Questions	Completed by	Surveys reviewed by	Areas of concern
	participants before	staff after each	addressed by staff, as
	each parenting class	session	appropriate to
	& at end of session		resolve issues and
			ensure continuous
			quality improvement
			(CQI)
Testimonials	Given at the end of	Statements reviewed	Area of concern
	the program	by staff after a client	addressed by staff
		has completed the	and addressed using
		program	CQI

DATE APPROVED BY OCAP: 05/19/2023

PROGRAM DESCRIPTION

PROGRAM NAME

Behavioral and Mental Health Services – Item 4 on Expenditure Workbook

SERVICE PROVIDER

Stanford Sierra Youth & Families (SSYAF)

PROGRAM DESCRIPTION

SSYAF provides comprehensive, specialty mental health services primarily targeted to serve preand post-adoptive and guardianship children and families and families at risk of a Child Welfare Services referral with specialty focus on issues related to trauma, attachment and permanency for youth who have been removed from birth families. Additional children are served on a spaceavailable basis. Specialty services are provided based on the established medical necessity for mental health services due to behavioral, emotional, and functional impairments meeting the Nevada County Mental Health Plan eligibility criteria. SSYAF utilizes Family Centered Practice principles which is an approach that is individualized, needs-driven, strength-based, trauma informed, culturally competent, outcome driven response to complex family needs.

Programs:

- The Therapeutic Support Services (TSS) program offers a range of therapeutic and supportive services to foster, adoptive, guardianship, birth and kinship children who meet medical necessity requirements. Services are provided by permanency trained therapists who offer individual therapy, family therapy and support, provision of community resources and school consultations with a specialty focus on trauma, grief and loss, attachment and permanency issues.
- The Family Preservation Program offers a range of therapeutic and supportive in-home services focusing on high-risk families with complex needs who have been referred by Child Welfare Services. The mission is to keep children out of foster care or to keep children who are already in foster care in a permanent stable home. The program's six-month model provides a team approach which is individualized based upon the needs of the family. The team includes a therapist, case manager, parent educator and family partner. In home parent education utilizes the Positive Parenting Program (Triple P) curriculum. Services are enhanced by using local community resources to strengthen the family in their community and to build natural supports. The services for this program are managed and authorized through Nevada County Behavioral Health. However, CWS closely interacts with the Contractor.
- Destination Family creates lifelong family connections for youth in foster care. The goal is that no youth will age out of foster care without a permanent family connection that is legally,

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emotionally and physically secure as possible. Case management and family engagement support are provided by the program's Case Manager.

Behavioral health services interventions are delivered in the office, homes, schools, and community settings. Therapeutic services and supports are coordinated and provided by a licensed, license eligible clinician, or clinical student intern. Family Support Specialists are available to families based on need and family choice. All services are provided at the clinic location or within the community, and at a time that best meets the family's needs.

FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	
СВСАР	
PSSF Family Preservation	Behavioral and Mental Health
PSSF Family Support	
PSSF Family Reunification	
PSSF Adoption Promotion and Support	Behavioral and Mental Health
OTHER Source(s): (Specify)	

IDENTIFY PRIORITY NEED OUTLINED IN CSA

Behavioral and mental health services

TARGET POPULATION

At risk children and children eligible for adoption needing Behavioral and Mental Health service

TARGET GEOGRAPHIC AREA

Eastern and Western Nevada County

TIMELINE

July 2021-June 2025

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EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Children's social and	85% of children will	Comprehensive Child	Administered to
emotional	show improvement	& Adolescent Needs	participants at
developmental needs	in their scores on the	and Strengths (CANS)	program entry & exit
are met	Comprehensive Child		
	& Adolescent Needs		
	and Strengths (CANS)		
	between intake and		
	discharge		
Caregivers will have	85% of caregivers will	Goals are written by	Outcomes are
an increased	achieve treatment	therapist who	tracked quarterly
knowledge of	goals which are	determines if the	with six months and
parenting and child	related to parenting	goal has been met	one year being major
development	and child	and this data is	benchmarks for
	development (i.e.	entered into an Excel	determining
	successfully	Spreadsheet	progress.
	completing Triple P)		

QUALITY ASSURANCE

SSYF reports to Child Welfare regarding OCAP funded activities annually. The report includes the rate at which clients are achieving the desired outcome. The Ongoing Supervisor meets with the contractor monthly and meetings are scheduled as needed throughout the year to address questions or issues as they arise.

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Satisfaction Survey	*Completed by	Surveys reviewed	Problem areas
	children ages 12 and	after the close of	addressed by staff, as
	up and caregivers at	services	appropriate to
	the close of services		resolve issues and
			ensure continuous
			quality improvement

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DATE APPROVED BY OCAP: 05/19/2023

PROGRAM DESCRIPTION

PROGRAM NAME

Home Visiting – Item 5 on Expenditure Workbook

SERVICE PROVIDER

Healthy Babies (HB)

PROGRAM DESCRIPTION

HB is nationally accredited through *Healthy Families America* (HFA) and follows their Best Practice Standards for home visiting. HFA is the nationally recognized, evidence-based home visiting program of Prevent Child Abuse America. To maximize opportunities for all children, HFA focuses on supporting parents in the home for building nurturing, safe, and trusting relationships between parents, caregivers, and infants/children ages 0 to 5.

Rigorous research demonstrates HFA's effectiveness. In addition to meeting the criteria for federal funding through the Maternal Infant Early Childhood Home Visiting (MIECHV) program, HFA's most rigorous evidence comes from numerous publications of randomized control trials, comparing the positive changes for HFA families to a randomized control group of families who did not receive HFA services. HFA shows impacts in all domains examined by the Home Visiting Evidence of Effectiveness review for the MIECHV program, including, a reduction in child maltreatment and increase in positive parenting practices.

HB's primary goal is to provide home visiting services to prevent child abuse and neglect before it starts, during pregnancy, and in the early development of a newborn. This goal is achieved through regular home visitation and by: 1) identification of family's strengths and goals, 2) positive development of parent-child relationships, 3) healthy child development, and 4) enhanced family functioning.

Home Visitors come into the home and spend about an hour with parents. During each visit parents can share their concerns about parenting with the Home Visitor and discuss the family's goals and needs. The Home Visitors conduct assessments for pre/post-natal depression, stages of development, relationship assessments, and monitor the baby's development. They listen, answer questions, and bring materials to support the families' goals of child development, child health and safety, and community resources that match the family's needs. The Home Visitors also encourage fun parent-child activities that strengthen and support healthy child development. They explain how simple activities help babies explore and grow. Healthy Babies may host events for mothers and children to socialize.

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FUNDING SOURCES

SOURCE	LIST FUNDED ACTIVITIES
CAPIT	
СВСАР	Home Visiting
PSSF Family Preservation	
PSSF Family Support	
PSSF Family Reunification	
PSSF Adoption Promotion and Support	
OTHER Source(s): (Specify)	MIECHV (CHVP), First 5 of Nevada County

IDENTIFY PRIORITY NEED OUTLINED IN CSA

General Neglect

TARGET POPULATION

Pregnant and parenting families with children ages 0-5

TARGET GEOGRAPHIC AREA

Eastern and Western Nevada County

TIMELINE

JULY 2021-JUNE 2025

EVALUATION

PROGRAM OUTCOME(S) AND MEASUREMENT & QUALITY ASSURANCE (QA) MONITORING

Desired Outcome	Indicator	Source of Measure	Frequency
Children's	Per HFA standards,	ASQ-3(pinpoints	Complete at least
developmental needs	90% of focus children	developmental	two ASQ 3s and one
are on track.	receive the Ages and	progress in children	ASQ-SE annually
	Stages	between the ages of	
	Questionnaire-3	two months to five	
	(ASQ-3) and Ages and	years) and ASQ-SE	
	Stages	(which identifies	
		social-emotional	

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	Questionnaire-Social	challenges) at ages 6	
	Emotional (ASQ-SE)	months to five years.	
90% of the focus	100% of families with	RAT score.	Within the first three
parents will complete	an elevated RAT will		months of active
the Relationship	complete a safety		enrollment.
Assessment Tool	plan and be referred		
(RAT) to determine	to local resources.		
safety in the home			
for parents and			
child(ren).			

QUALITY ASSURANCE

HB reports to Child Welfare regarding OCAP funded activities biannually. The report includes the rate at which clients are achieving the desired outcome. The Program Manager meets with the contractor annually and meetings are scheduled as needed throughout the year to address questions or issues as they arise.

CLIENT SATISFACTION

Method or Tool	Frequency	Utilization	Action
Annual Parent	Provided to	Surveys collected and	Areas of concern
Satisfaction Survey	participants annually.	analyzed annually	addressed by staff to
			resolve issues and
			ensure Continuous
			Quality Improvement
			(CQI)
Parent Exit Survey	Provided to	Surveys are reviewed	Areas of concern
	participants upon	when parents exit	addressed by staff to
	exiting the program	the program	resolve issues and
			ensure CQI

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THIS FORM SERVES AS NOTIFICATION OF THE COUNTY'S INTENT TO MEET ASSURANCES FOR THE CAPIT/CBCAP/PSSF PROGRAMS.

CAPIT/CBCAP/PSSF PROGRAM FUNDING ASSURANCES FOR COUNTY
PERIOD OF PLAN (MM/DD/YY): THROUGH (MM/DD/YY)
DESIGNATION OF ADMINISTRATION OF FUNDS
The County Board of Supervisors designates as the public agency to administer CAPIT and CBCAP.
W&I Code Section 16602 (b) requires that the local Welfare Department administer the PSSF funds. The County Board of Supervisors designates as the local welfare department to administer PSSF.
FUNDING ASSURANCES
The undersigned assures that the Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) funds will be used as outlined in state and federal statute ¹ :
• Funding will be used to supplement, but not supplant, existing child welfare services;
 Funds will be expended by the county in a manner that will maximize eligibility for federal financial participation;
 The designated public agency to administer the CAPIT/CBCAP/PSSF funds will provide to the OCAP all information necessary to meet federal reporting mandates;
 Approval will be obtained from the California Department of Social Services (CDSS), Office of Child Abuse Prevention (OCAP) prior to modifying the service provision plan for CAPIT, CBCAP and/or PSSF funds to avoid any potential disallowances;
 Compliance with federal requirements to ensure that anyone who has or will be awarded funds has not been excluded from receiving Federal contracts, certain subcontracts, certain Federal financial and nonfinancial assistance or benefits.
In order to continue to receive funding, please sign and return the Notice of Intent with the County's System Improvement Plan to:
California Department of Social Services Office of Child Abuse Prevention 744 P Street, MS 8-11-82 Sacramento, California 95814
County Board of Supervisors Authorized Signature Date
Print Name Title

¹ Fact Sheets for the CAPIT, CBCAP and PSSF Programs outlining state and federal requirements can be found at: http://www.cdss.ca.gov/inforesources/OCAP/Funding