

Butte County

• CALIFORNIA •

BUTTE COUNTY COMPREHENSIVE PREVENTION PLAN

*A Strategy to Leverage Federal Funding Through
the Family First Prevention Services Act*

2023–2027



PREPARED BY



COMPREHENSIVE PREVENTION PLAN OF BUTTE COUNTY

TITLE IV-E AGENCY INFORMATION

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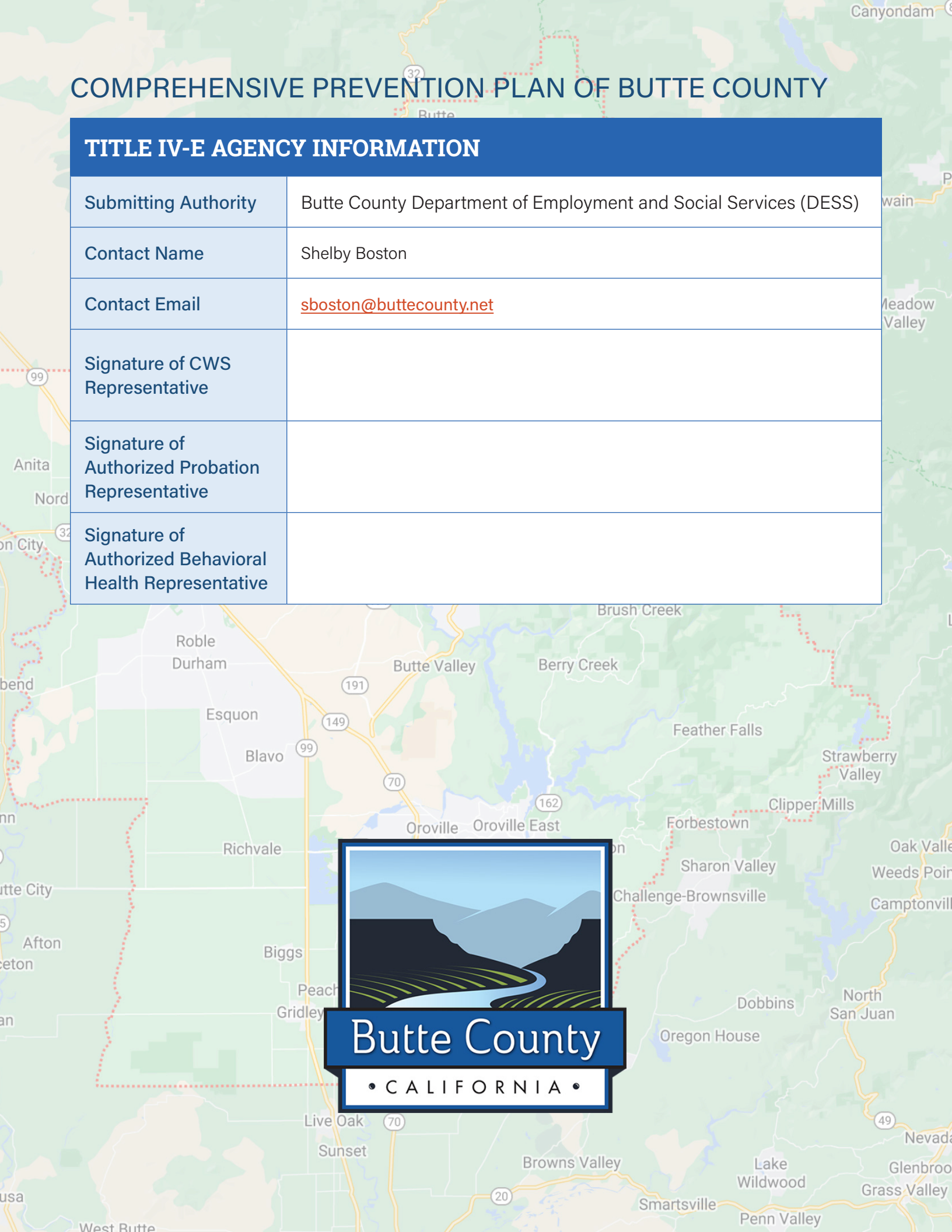


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INTRODUCTION

Butte County's Commitment to Prevention

In 2018, federal enactment of the Family First Prevention Services Act (FFPSA) established a new and optional opportunity for county agencies to access federal Title IV-E funds to prevent the need for foster care, albeit with numerous restrictions. FFPSA allows public agencies to receive federal reimbursement for a limited set of federally approved, evidence-based prevention programs delivered to children and families who are considered to be at "imminent risk" of foster care involvement and classified as "candidates for foster care." The State of California has begun the process of opting into FFPSA for the purposes of accessing IV-E prevention funding, and guidance issued in March 2022 (ACL 22-23) by the California Department of Social Services (CDSS) established an opt-in process for counties, which Butte County has elected to pursue.

The mission of the Butte County Department of Employment and Social Services (DESS) is to administer employment and social services while preserving the dignity of children, families and adults. The agency develops partnerships for a safe, healthy, and self-reliant community. The Children's Services Division (CSD)—which oversees a range of child welfare services—believes that children should remain safely at home whenever possible and offers an array of prevention and intervention services to children and families engaged with the system.

Butte County has a long history of developing and administering programs to prevent child maltreatment and the need for removing children into foster care. Since 1975, a coalition of individuals from public and private agencies, as well as concerned



members of the community, has been coordinating to stop the cycle of child abuse and promote healthy families through education, advocacy, and collaboration. On June 20, 1989, the Butte County Board of Supervisors issued a resolution officially establishing the Butte County Child Abuse Prevention Council (resolution number 89-091).

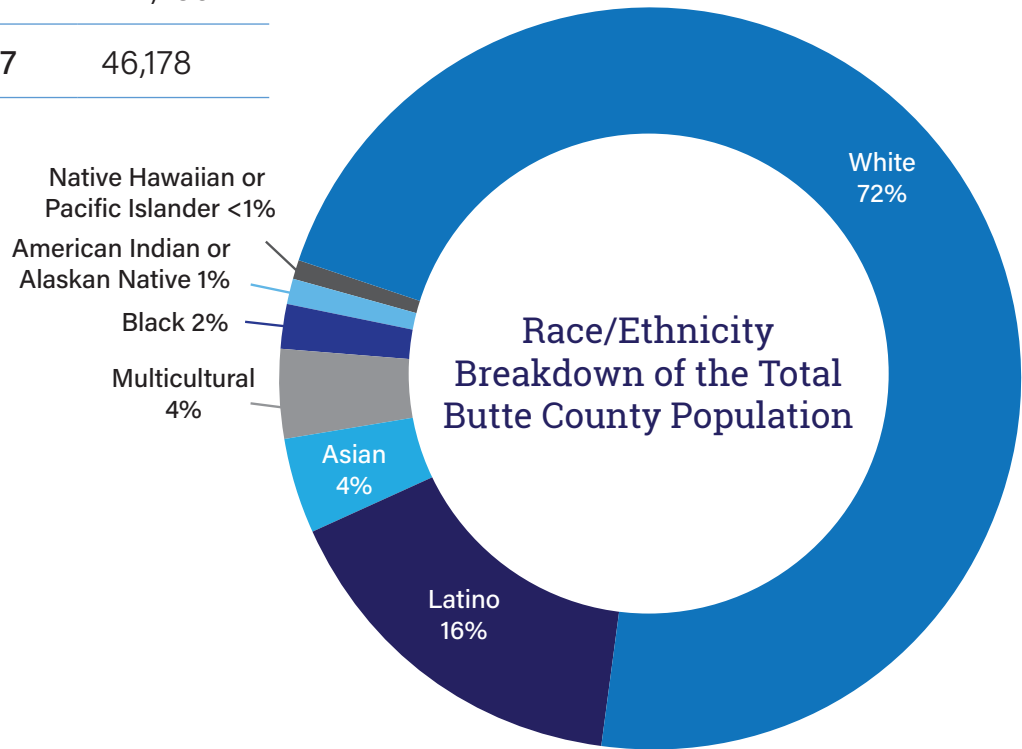
The County has also long been interested in leveraging federal Title IV-E funding to expand the availability of prevention services. Beginning in 2014, Butte participated in California's Title IV-E Waiver/ California Well-Being Project. Participation in the IV-E Waiver provided the County with additional flexibility to invest federal funding to better achieve safety, permanence, and well-being for children in the child welfare and juvenile justice systems while safely reducing the number of children in foster care. Butte County CSD used its IV-E Waiver flexibility to experiment with the design and implementation of an Alternative Response program intended to assess risk factors and refer children and families to variable pathways for intervention and supportive services appropriate to their needs. Butte County ultimately exited the now-defunct IV-E Waiver program in 2017.

- ✓ In developing this Comprehensive Prevention Plan (CPP), Butte County reaffirms its commitment to keeping children and families together and preventing the need for foster care whenever possible while pursuing opportunities to leverage federal Title IV-E funding to expand the availability of prevention services within the County.

Butte County Data Profile

Population¹

Total Population	227,736
Children Ages 0-17	46,178



Child Welfare Rates (per 1,000)²

	Butte	CA
Allegations	69.6	49.5
Substantiations	8.2	5.8
Entries to Foster Care	4.5	2.3

Unique Butte County Indicators

- » In 2022, of the 207 entries into foster care over one-third (35%) were children under the age of five.
- » 58.5 per 1,000 hospital births in 2015 had a substance-affected diagnosis.
- » Almost one-third (30.3%) of Butte County residents have reported experiencing four or more ACEs, approximately twice the statewide average (15.9%).

1 State of California Department of Finance (n.d.). County and State Population Projections (2010-2060) by Age. Retrieved <https://dof.ca.gov/Forecasting/Demographics/Projections/>

2 University of California at Berkeley California Child Welfare Indicators Project. CCWIP Reports JAN2022-DEC2022. Retrieved <https://ccwip.berkeley.edu/childwelfare/reports/AllegationRates/MTSG/r/rts/s>

GOVERNANCE STRUCTURE

In 2018, the State of California passed Assembly Bill 2083 (AB 2083) which required counties to develop and implement a Memorandum of Understanding (MOU) outlining the roles and responsibilities of the various local entities that serve children and youth in foster care who have experienced severe trauma. In 2020, Butte County established an Inter-Agency MOU regarding the delivery of shared services to children, youth, and families between the Butte County Probation Department (Probation), Butte County Department of Employment and Social Services—Children’s Services Division (DESS-CSD), Butte County Department of Behavioral Health (BCDBH), Butte County Office of Education (BCOE), Butte County Superior Court (Court), Butte County Department of Public Health (BCDPH), Far Northern Regional Center (FNRC), and Local Tribes (Enterprise Rancheria, Berry Creek Rancheria, Mooretown Rancheria, and Mechoopda).

As suggested by CDSS in ACL 22-23, Butte County intends to use this Inter-Agency collaborative as the basis for ongoing cross-sector collaboration envisioned in the CPP. To ensure broad community representation in the County’s cross-sector collaboration work, Butte County has also invited additional stakeholders to participate in the CPP development process, including First 5 Butte



County, the Butte County Child Abuse Prevention Council, community-based direct service providers, family resource centers, and individuals with lived experience.

This working group consisting of the original Inter-Agency collaborative partners and other invited stakeholders has been meeting on a monthly basis since March 2022. Workgroup members provided extensive feedback during the County’s focus groups, Capacity Assessment, selection of a data framework and indicators, and distribution of an evidence-based program survey, and have participated in all decision-making around the development of the CPP.

✓ The vision for the Inter-Agency MOU, which remains in effect through June 30, 2023, is:
“Children, youth, and families who are involved in the child welfare system or receiving foster care services through the juvenile justice system will receive timely, effective, and collaborative services consistent with the Integrated Core Practice Model (ICPM) that allow them to thrive in safe, permanent living situations that meet their social, emotional, cultural, and behavioral needs.”

CROSS-SECTOR COLLABORATION & PARTNER ENGAGEMENT

REQUIRED PARTNERS	SUGGESTED PARTNERS
<ul style="list-style-type: none"> » Child Abuse Prevention Council (CAPC) » Child Welfare Agency » Probation Department » Tribal Representation » Office of Education » Behavioral Health Department » Non-Profit/Community-Based Organizations » Family Resource Centers » Foster Family Agencies » Youth Leader (Lived Expertise) » Parent Leader (Lived Expertise) » Former Foster Youth » Foster Youth Currently (18+THP) 	<ul style="list-style-type: none"> » System of Care Partners » Private Organizations » Evidence-Based Program Provider/Purveyor » Program Evaluator » Faith-Based Institutions » First 5 » Public Health Department » Public Assistance Department » District Attorney's Office » Early Childhood Programs » Housing Department/Authority » Homeless Programs » Local Regional Centers » Local Offices of Employment/Career Centers » Local Vocational Training Centers/Community Colleges » Others Identified by the Collaborative

The children and families that are the intended beneficiaries of services under Butte County's Comprehensive Prevention Plan (CPP) interact with a range of child-serving systems including not just child welfare but also mental and behavioral health, public health, early care and education, K-12 education, postsecondary education, juvenile probation and criminal justice, and housing. These children and families can be involved with any combination of county agencies, tribal governments, direct service providers, and non-profit organizations. For these reasons, Butte County has engaged numerous partners across systems to conceive and develop this CPP.

Looking ahead, as Butte County advances from planning toward implementation of the CPP, cross-sector collaboration will remain a high priority. The Inter-Agency collaborative intends to continue its regular monthly meeting schedule to provide ongoing reporting, oversight, and guidance to the County related to the CPP. This ongoing communication and coordination will enable cross-sector partners to collectively develop and incorporate strategies for continuous improvement of the prevention plan into their programs and services.

Roster of CPP Working Group Invitees

ORGANIZATION	NAME(S)
Berry Creek Rancheria	Kim Relph
Butte County Behavioral Health	Scott Kennelly • Jennifer Stofa
Butte County Child Support Services	Bobbi Duran • Sean Farrell
Butte County Children's Services	Penny Mittag • Alise Pugh • Emily Upton
Butte County Employment & Eligibility	Ken Mackell • Cristi Roach
Butte County Office of Education	Meagan Meloy
Butte County Housing & Homeless Services	Briana Harvey-Butterfield • Don Taylor
Butte County Probation	Amy Asher • Melissa Romero
Butte County Public Health	Danette York
Butte County Superior Court	Kimberly Merrifield
California Youth Connection	Mercedes Parker-Gilmore
Cherokee Nation	Tad Teehee
Chico Area Parks & Recreation District	Anjie Goulding
Child Abuse Prevention Council of Butte County	Jolene Hausman
Choctaw Nation	Amber Scott
Cloverleaf Family Counseling	January Giles
Community Action Agency of Butte County	Brian Boyer • Timothy Hawkins
Counseling Solutions	Jessye Barstow • Trishanne Lininger
Enterprise Rancheria	Shari Ghalayini
Far Northern Regional Center	Melissa Gruhler
Feather River Parks & Recreation District	Shawn Rohrbacker
First 5 Butte County	Anna Bauer
Mechoopda Indian Tribe	Mark Alabanza • Sirena Bradley
Mooretown Rancheria	Laura Winner
Paradise Recreation & Park District	Kristi Sweeney
Private Therapist	Dawn Horwitz-Person
Wayfinder Family Services	Karen Alvord • Sarah Sims
Youth 4 Change	Nancy Jorth • Beth Parsons • Stacey Poliquin
Youth & Family Programs	Eve Nash

The Inter-Agency collaborative also overlaps with—and will continue to align and coordinate its efforts with—the Child Abuse Prevention Council (CAPC) of Butte County. The Butte CAPC is a non-profit coalition dedicated to the prevention, intervention, and treatment of child abuse. Its objectives are to increase public awareness of child abuse and neglect, strengthen families, and provide education and professional training.

The primary purpose of the Child Abuse Prevention Council of Butte County is to coordinate the community's efforts to prevent and respond to child abuse and neglect, thus promoting healthy families by:

- ✓ Interagency collaboration, networking, and problem solving
- ✓ Providing and enhancing education for professionals and community members
- ✓ Assessing needs and resources to plan for the improvement and expansion of services
- ✓ Advocating for legislation in support of healthy families
- ✓ Fulfilling its obligation as the designated CAPC Council as per proclamation of the Butte County Board of Supervisors, June 1989
- ✓ Promoting awareness of child abuse and neglect by organizing public programs, events, and activities
- ✓ Promoting membership in the CAPC Council as specified in the Welfare and Institutions Code
- ✓ Organizing/coordinating educational programs and prevention activities sponsored by the CAPC Council
- ✓ Developing/issuing community grants for prevention and intervention activities that correspond with the State Office of Child Abuse Prevention guidelines and Butte County System Improvement Plan (SIP) goals
- ✓ Participating/representing the CAPC Council at local board and community meetings as necessary for projects



The Butte County CAPC is composed of members from local agencies such as:

- » Butte County Board of Supervisors—Representative
- » Butte County Department of Employment and Social Services
- » Butte County Probation Department
- » Butte County Department of Behavioral Health
- » Butte County Public Health Department
- » Feather River Tribal Health
- » Therapists from the Community
- » Parent Partners
- » CASA
- » Community-Based Organizations
- » Law Enforcement

- ✓ Coordinating and funding programs that reduce child injury and abuse in accordance with Kids Plate revenue guidelines
- ✓ Providing oversight of the Frank Watters and Mary Anne Houx Children's Fund campaign and fund distribution
- ✓ Advocating for children/families by encouraging member participation in the legislative process and providing legislative updates to CAPC Council members and the public
- ✓ Maintaining business and fiscal records for the CAPC Council
- ✓ Collaborating with the County liaison to provide data and information for reports, including the annual report to the State of California Office of Child Abuse Prevention
- ✓ Providing reports and evaluations for projects to the County as required
- ✓ Maintaining business and fiscal reports for grant management and public awareness activities for the County and for the CAPC Council

TRIBAL CONSULTATION & COLLABORATION

Since 2019, Butte County Children’s Services has made efforts to engage the local tribes in a partnership to enhance communications and collaborative efforts when providing services to Native American families. This began with a quarterly tribal roundtable meeting, incorporating all of Butte County’s local tribes, with a plan to reach out to tribes in the surrounding counties to grow the collaborative efforts. There was participation from three local tribes in the first meeting with actionable goals to implement in multiple areas that would build and grow the relationships between the county, the tribes, and bring together our collective efforts. The second meeting in 2019 was attended by one tribe, who agreed to be the liaison and help create a shared importance for this continued collaboration. Shortly thereafter this Tribal Liaison left the tribe, creating a need to locate a new Liaison and become familiar with the respective tribal representatives once again.

Over the past several years, ongoing challenges with turnover in Tribal representatives coupled with the COVID-19 pandemic have made continuity and regularity of collaboration difficult. However, the scheduling for the Butte County and Local Tribe ICWA Collaboration Meetings has resumed, and looking ahead the team intends to review past goals and make renewed efforts at follow through.

Four Butte County Tribes (Enterprise Rancheria, Berry Creek Rancheria, Mooretown Rancheria, and Mechoopda) have been incorporated into the County’s Inter-Agency collaborative regarding the delivery of shared services to children, youth, and families since 2020. These four Tribes are thus part of the County’s ongoing cross-sector collaboration regarding the development and implementation of the Butte County Comprehensive Prevention Plan. A specific focus group was also held for tribes in March 2022 to brief them on the CPP process and to solicit their perspectives, priorities, and recommendations.

✓ Butte County is concerned that the rigid standards around evidence-based programs (EBPs) established by the federal government have resulted in just one tribal practice being listed on the Title IV-E Prevention Services Clearinghouse to date. The County urges the federal government to facilitate a more inclusive process around the evaluation of EBPs that will establish more opportunities to leverage federal funding to support tribal programming. Butte County is also committed to exploring cultural adaptations to traditional EBPs that may make them more relevant to tribal children and families.

Irrespective of their eligibility for federal Title IV-E reimbursement, Butte County values the programs delivered by our local Tribes to strengthen families and prevent the need for foster care. Accordingly, during development of the CPP the County engaged the Tribes to develop a full inventory of their prevention programming and is listing all of these programs within the CPP as an important component of the continuum of care in Butte County.

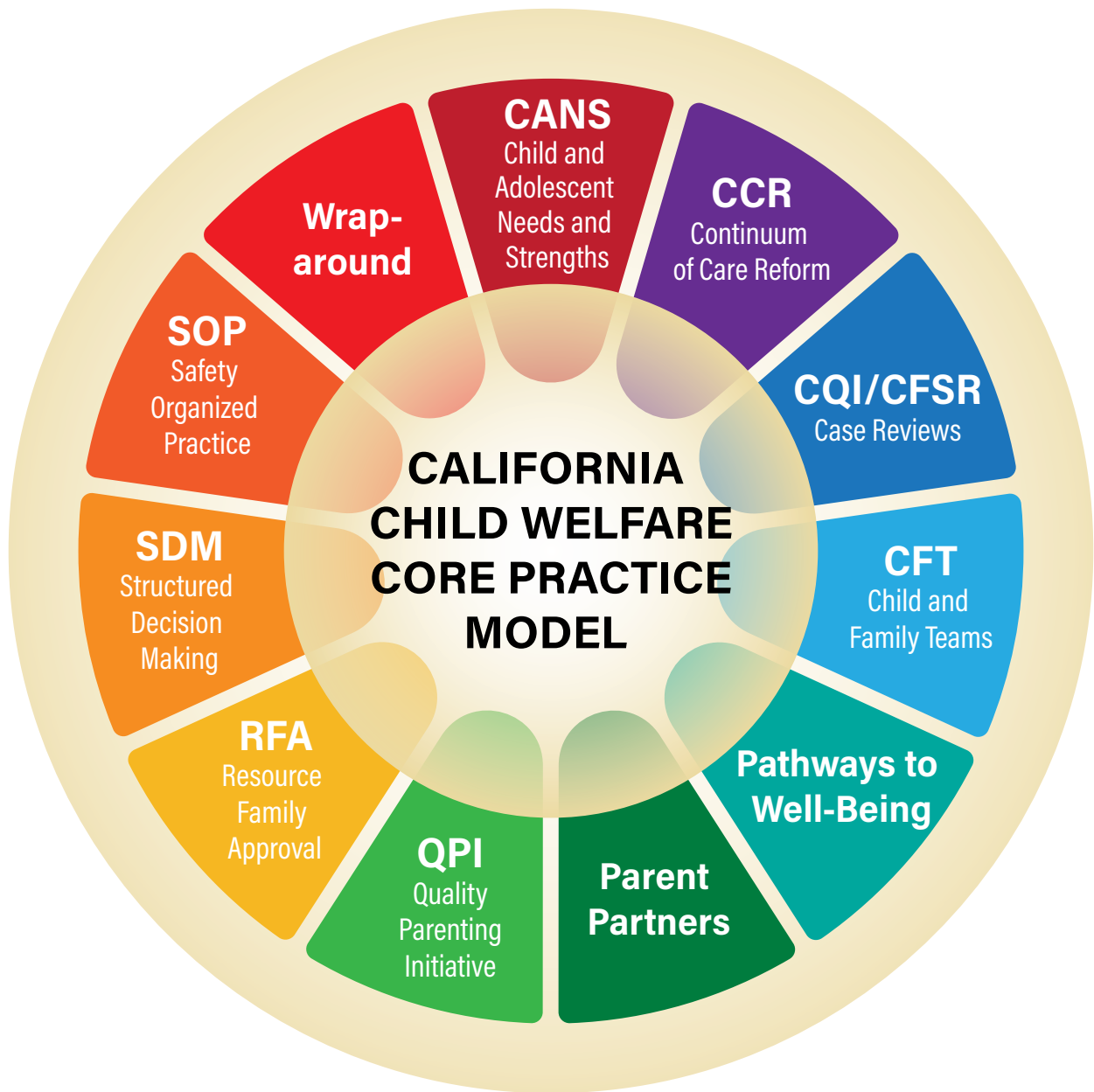
Going forward, Butte County will continue to engage Tribal representatives through the ICWA Collaboration meetings as well as the cross-sector collaborative overseeing implementation of the CPP and commits to engaging the Tribes in decision-making and in future reviews of and amendments to the CPP.

INTEGRATED CORE PRACTICE MODEL

The Inter-Agency Memorandum of Understanding (AB 2083 MOU) developed by Butte County includes a mutual commitment to, and use of, the California Integrated Core Practice Model for Children, Youth and Families. Partner agencies agree to mutually use the principles, values, and practice behaviors in their interactions with youth and families, with one another, and with contractors and county partners. The Ten Guiding Practice Principles of the ICPM outline a service delivery that includes the following key components:

1	Family voice and choice: Each family member’s perspective is intentionally elicited and prioritized during all phases of the teaming and service process.
2	Team-Based: The team consists of individuals agreed upon by the family members and committed to the family through informal, formal, and community support, and service relationships.
3	Natural supports: The team actively seeks and encourages full participation of members drawn from the family members’ networks of interpersonal and community relationships.
4	Collaboration and integration: Team members work cooperatively and share responsibility to jointly develop, implement, monitor, and evaluate an integrated, collaborative plan.
5	Community-Based: The team will strive to implement service and support strategies that are accessible and available within the community where the family lives.
6	Culturally respectful: The planning and service process demonstrates respect for, and builds on the values, preferences—including language preferences, beliefs, culture, and identity—of the family members and their community or tribe.
7	Individualized: The principle of family voice and choice lays the foundation for individualization and flexibility in building the plan.
8	Strengths-Based: The service process and plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the child, youth, and family members, their tribe and community, and other team members.
9	Persistence: The team does not give up on, blame, or reject children, youth, or their families.
10	Outcomes-Based: The team ties the goals and strategies of the plan to observable or measurable indicators of success, monitors progress consistent with those indicators, and revises the CANS and service plan accordingly.

These principles and practices will be applied by Butte County and its community partners throughout the implementation of this CPP, including when engaging families and assessing their eligibility for services and delivering services.



TARGET CANDIDACY POPULATIONS & NEEDS ASSESSMENT

Local Assets & Needs Assessment

Several previous community studies have recently been completed in Butte County and were reviewed in the process of developing this CPP, including:

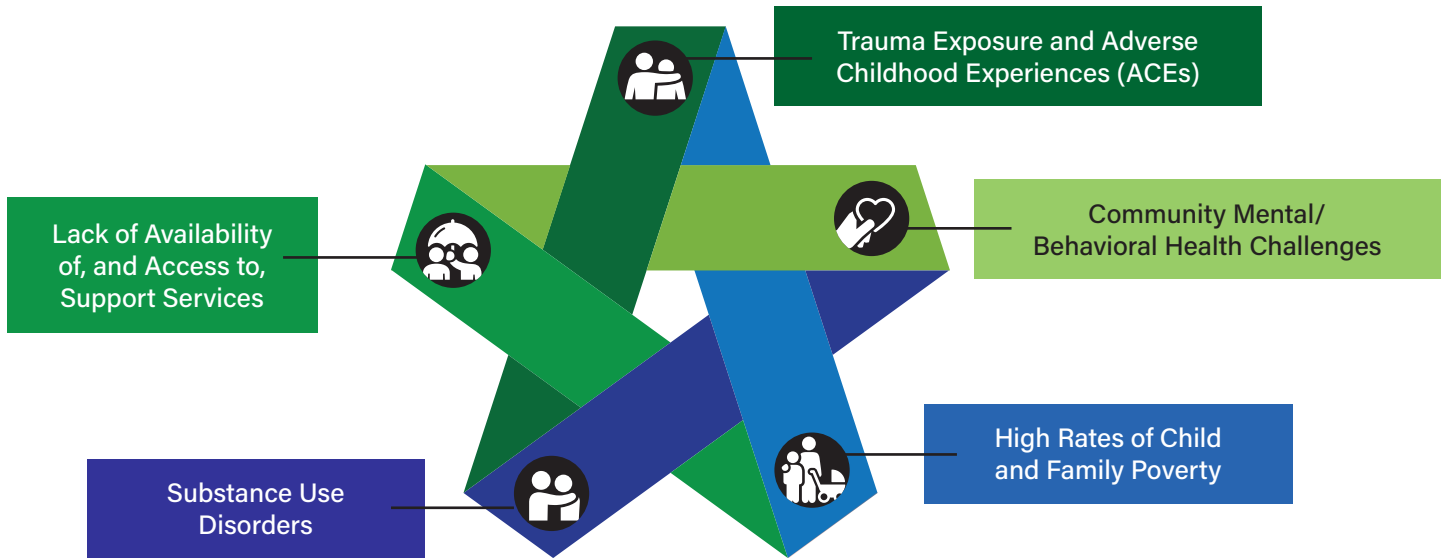
-  Butte County 2020-2025 Child & Family Services Review System Improvement Plan
-  Butte County 2015-2020 Child & Family Services Review County Self-Assessment
-  Butte County Public Health 2019-2022 Community Health Assessment
-  Butte County Public Health 2020-2022 Community Health Improvement Plan
-  North Valley Community Foundation and California Community Foundation Strengthening the Safety Net in Butte County
-  First 5 Butte County 2021-2026 Strategic Plan

The findings of these assessments were supplemented through the CPP development process with focus groups and individual meetings with County staff, direct service providers, First 5 Butte County, Butte County Child Abuse Prevention Council, Tribes, and other community stakeholders; primary and secondary data collection and review; utilization of the Capacity Assessment tool developed by CDSS; and facilitated conversations during monthly CPP cross-sector collaborative meetings.



SUMMARY OF HIGH-LEVEL COMMUNITY NEEDS

Based on our review, the five main drivers of child welfare system involvement (pillars of need) in Butte County that the County seeks to address through this CPP are:



Trauma Exposure and Adverse Childhood Experiences (ACEs)

The 2020–2022 Butte County Public Health Department’s Community Health Improvement Plan identifies the County as having the highest percentage (76.5%) of residents reporting one or more adverse childhood experiences (ACEs) in the state. ACEs are traumatic events that occur in childhood, including things like experiencing violence abuse or neglect; witnessing violence in the home or community; having a member attempt or die by suicide; and other household environmental factors like substance use problems, mental health problems, and family instability. ACEs can have lifelong impacts on individuals, including increased likelihood of chronic health problems, mental illness, and substance use disorders.

Research demonstrates that individuals experiencing at least four ACEs are at a particularly heightened level of risk for a range of poor outcomes. Almost one-third (30.3%) of Butte County residents have reported experiencing four or more ACEs, approximately twice the statewide average (15.9%). Recognizing, addressing, and preventing these high community rates of ACEs has been a major focus of the County in recent years.



Community Mental/Behavioral Health Challenges

The Butte County community studies examined for this CPP reveal recurring themes related to mental and behavioral health challenges including those stemming from traumatic experiences. According to the Butte County Public Health 2019-2022 Community Health Assessment, leading mental health diagnoses among adults include “mood disorders (such as depression), adjustment disorders (poor coping in response to stressful events), bipolar disorder and anxiety disorders,” while the most common diagnoses for children and youth are “mood disorders, anxiety disorders, disruptive behavioral disorder, and attention deficit hyperactivity disorder (ADHD).” Meanwhile, the health assessment found that the rate of suicide in Butte County is roughly twice the California average across all age groups.



High Rates of Child and Family Poverty

The North Valley Community Foundation's 2019 Strengthening the Safety Net in Butte County report noted high levels of poverty (18% compared to a 13% statewide average) and social safety net dependence in the County (28% of residents are on Medi-Cal compared to a statewide average of 18%) as well as a lack of access to services outside of the major population centers. First 5 Butte County also found that nearly one in five Butte County children (17%) are living below the poverty threshold, one in five are living in households with food insecurity (20%), and more than one in three (36%) are on Medi-Cal. The median household income in Butte County is about \$20,000 per year less than the state average. The Community Foundation's safety net report notes "low rental vacancy rates and lack of affordable housing units"—a problem which has only increased following the recent loss of almost 15,000 housing units.



Substance Use Disorders

Meanwhile the 2019–2022 Butte County Public Health Community Health Assessment notes that family and community risk factors for child maltreatment include "parental substance use, parental mental illness, major stress (e.g. poverty, social isolation), domestic violence, and living in neighborhoods with relative high rates of community violence." According to Butte County's System Improvement Plan (SIP), "the vast majority of youth who experience substantiated maltreatment are also experiencing a life of instability, poverty, and/or exposure to drug addiction of caregivers," while the "risk of maltreatment increases as families have less access to services due to location or transportation barriers or refusal to engage in services."



Lack of Availability of, and Access to, Support Services

The North Valley Community Foundation's 2019 Strengthening the Safety Net in Butte County report identifies the "inadequacy of the current behavioral health (mental health and substance abuse) system to meet community need in terms of type, quality and quantity" of services as a major community concern. Stakeholders interviewed for the report described the behavioral health system as "under-resourced, uncoordinated, lacking in options, and challenging to navigate with long waiting lists for a number of services. Specific missing areas included psychiatrists (for low-income populations the only option currently is tele-medicine), behavioral health professionals in general, and mental health services for special populations including seniors, preschoolers, and individuals with special needs." A medical service provider quoted in the report noted: "We weren't able to handle the volume of patients needing psychiatric, mental health, or addiction services even before the fire—people have to leave the county to get any sort of longer-term or more intensive treatment."

County staff have noted that service gaps are also particularly acute for children ages 10 and older. The Community Foundation's Safety Net reported that "stigma about receiving behavioral health services compounds the problem" while the lack of non-governmental service hubs (i.e., family resource centers) where community members can access co-located resources, case management, and support services also exacerbates the challenge. Butte County intends to explore the implementation of the Community Pathway model outlined in California's State Title IV-E Prevention Plan to address these access challenges.

All of the aforementioned issues have also been compounded by the 2018 Camp Fire and COVID-19 pandemic, events which stressed, displaced, and isolated community members including child welfare system-involved children, youth, and families and simultaneously significantly increased the demand for mental health and substance use disorder support services while reducing local capacity.

IMPACT OF RECENT NATURAL DISASTERS³

The hydroelectric plant that serves the Oroville Dam became severely stressed by overflow water in 2017. 188,000 residents of Oroville and surrounding areas were evacuated over concerns of a dam collapse, which did not occur. This disrupted the daily lives of youth in care and those receiving services.

On November 8, 2018, Butte County was devastated by the deadly Camp Fire, which burned 153,336 acres, claiming 85 lives and destroying 18,804 structures (approximately 14,000 of which were homes) (Associated Press, 2018). The fire decimated the town of Paradise and surrounding areas (Magalia, Concow, Centerville, Butte Creek Canyon, Berry Creek, Yankee Hill, and Pulga) and was noted as the deadliest and most destructive wildfire in California history (*East Bay Times*, 2018). It was also the sixth deadliest fire in United States history (Weather Underground, 2018). Most of the devastation occurred in the first four hours of the fire and total damages were approximately \$16.5 billion (*Los Angeles Times*, 2019). Before the Camp Fire, the population of Paradise was 26,423 people; after, it dwindled to 4,590 (KCRA, 2019). Here is a brief impact summary:

Housing

- » Nearly 0% vacancy rate
- » Rental prices have increased an average of 14% in comparison to 2018
- » Home sales prices increased from median of \$337,950 in Chico in August 2018 to \$399,000 in June 2019 (Bill Chance Realty, 2019)

Other Impacts

- » Job loss
- » Mental health
- » Debris removal
- » Water and soil contamination
- » Tree removal
- » Rebuilding—permits and costs

Child Welfare Impacts

- » Decrease in referrals in the two months following
- » Challenges in seeing youth and parents
- » Two group homes/ Short-Term Residential Therapeutic Programs (STRTPs) lost
- » Over 100 youth in foster care impacted
- » 20 CSD staff homes lost
- » Four of nine schools in Paradise destroyed

3 Butte County 2015-2020 County Self-Assessment

Given the overlap of these risk factors with the persistent community challenges in the County, it is perhaps not surprising that Butte County has a much higher rate of childhood maltreatment than the statewide average, including reports of abuse or neglect (74 per 1,000 children in Butte County vs 54.3 per 1,000 children across the state), substantiated maltreatment (9.9 vs 7.7), and removals into foster care (6.5 vs 3.1). "As a medium sized, semi-rural county in Northern California, Butte County has a higher incidence rate of abuse and neglect, in large part due to the prevalence of SUD and high poverty rates," summarizes the Butte County Self-Assessment.

Candidate Groups & Data Estimates

California's most recent draft of its Title IV-E Prevention Plan (Five-Year State Prevention Plan) lists 12 "candidate" groups that the State identifies as the target populations for federal Title IV-E prevention funding. In order to be eligible for federal reimbursement, these "candidates for foster care" must be determined to be at "imminent risk" for foster care entry.

Data extracted between 2019–2020 from the Structured Decision-Making (SDM) system and provided to Butte County by the California Department of Social Services indicates that **558** children received a risk assessment score of "high" or "very high" while **680** children had at least one identified safety threat. Based on more current Butte County SDM data, between October 2021 and March 2023 **384** children scored "high" or "very high" and **1,005** children had an identified safety threat. Collectively, these numbers provide a reasonable range of estimates of how many children in Butte County may meet the "imminent risk" standard for eligibility for federal reimbursement for prevention services.

To further assess the individual candidate groups eligible for services in Butte County, the CPP cross-sector collaborative pulled data from numerous systems and sources to provide estimates on the number of children within the County for each target population. This table also illustrates the recurring needs experienced by each candidate group as well as some of the targeted services that could respond to these needs.

Candidate Group/Target Population with Description and State Data	Targeted Services	County Estimate
<p>Children in Families Receiving Voluntary or Court-Ordered Family Maintenance Services</p> <p>Children in Families Receiving Voluntary or Court-Ordered Family Maintenance services who are also determined to be at imminent risk for foster care will be eligible to receive services under the Title IV-E Prevention Program. These services are the traditional pathway to prevent entry into foster care and may also be provided after reunification to prevent reentry. During SFY 2019-20, there were 12,064 Voluntary Family Maintenance (VFM) cases in California, of whom 991 (8%) were removed within 12 months and placed in foster care. In that same year, there were 37,769 court-ordered Family Maintenance (FM) cases in California, of whom 3,878 (10%) were removed within 12 months and placed in foster care. FFPSA provides an opportunity to expand service capacity to this population.</p>	<p>Family Counseling with Trauma Focus</p> <p>Intermittent/Ongoing Case Management Resource</p> <p>Intermittent Parenting Resources</p> <p>Substance Abuse Treatment (Parent/Child)</p>	<p>County estimate: 40</p> <p>CDSS data estimate from Q2 2020: 30 FM cases pre/no placement, 124 cases post-placement, 6 cases voluntary</p>
<p>Probation Youth</p> <p>Probation youth subject to a petition under section 602 of the Welfare and Institutions Code (WIC), and for whom the probation department determined to be at imminent risk for foster care per a state-approved assessment tool, will be eligible to receive services under the Title IV-E Prevention Program. Per CDSS data, in any given month, approximately 3,900 probation youth per month in California have been determined to be at "imminent risk" of foster care.</p>	<p>Motivational Interviewing</p> <p>Strengthening Families WRAP</p> <p>Substance Abuse Treatment for Youth</p> <p>Parent Education for Older (Teenage) Youth</p> <p>Family Counseling with Trauma Focus</p>	<p>PIT count: 7</p> <p>Total # from Aug 2021 to Aug 2022: 25</p> <p>Avg. Yearly number: 7</p>

Candidate Group/Target Population with Description and State Data	Targeted Services	County Estimate
<p>Guardianship/Adoption at Risk of Disruption</p> <p>Children whose guardianship or adoption arrangement is at-risk of disruption and who are also determined to be at imminent risk of foster care will be able to receive Title IV-E prevention services. These are non-reunified children and youth who have exited foster care to some form of permanency and are at risk of re-entry due to disruption of that permanency arrangement according to an approved assessment tool.</p> <p>In SFY 19-20, 1,092 children, or four percent of children from the entering cohort, were in adoption or guardianship arrangements prior to detention.</p>	<p>Parent Education WRAP Family Counseling with Trauma Focus Adoption Competent Therapy Individual/Family</p>	<p>4</p>
<p>Children with Substantiated/Inconclusive Allegation</p> <p>Children with a Substantiated or Inconclusive Disposition of a child abuse or neglect allegation, but no case opened, will also be eligible for Title IV-E Prevention Services if the child is at imminent risk of foster care. Per CWS/CMS, from March 2020 to March 2021, a total of 360,673 referrals were made reporting allegations of child abuse or neglect. Of those referrals, 40,761 (11.3%) were substantiated, meaning that more likely than not child abuse or neglect had occurred. Inconclusive referrals made up 79,394 (22%), meaning that the findings cannot be made as to whether child abuse or neglect has occurred due to insufficient evidence. Of the substantiated dispositions, 16,292 (11.3%) were closed after investigation, while 63,947 (44.1%) of inconclusive dispositions were closed after investigation.</p>	<p>Family Counseling with Trauma Focus Intermittent/Ongoing Case Management Resource Parent Education with Focus on Trauma Substance Abuse Treatment (Parent/Child)</p>	<p>16/9</p>
<p>Children w/Siblings in Foster Care</p> <p>Children who have siblings in foster care, and who are determined at imminent risk of foster care will be eligible to receive Title IV-E prevention services. Siblings have been defined by statute as children or youth related by blood, adoption, or affinity through a common legal or biological parent (in essence- full, adopted, or half siblings through both biological and legal parents). In SFY 2019-2020 there were 8,144 children in California who were not in foster care themselves, who had a sibling in foster care. It is presumed that circumstances that necessitate one child entering care may also impact the child that remains at home. In these instances, Title IV-E prevention services could be provided in order to prevent additional children in the family entering care.</p>	<p>Family Counseling with Trauma Focus Intermittent/Ongoing Case Management Resource Intermittent Parenting Resources Substance Abuse Treatment (Parent/Child)</p>	<p>County estimate: 276 CDSS data estimate from Q2 2020: 101</p>
<p>Homeless/Runaway Youth</p> <p>Homeless or runaway youth who are determined to be at imminent risk of foster care can receive Title IV-E prevention services. While state law provides that the homelessness itself is not a basis for removal, for those who are assessed to be candidates, Title IV-E prevention services provide the opportunity to keep families together by directly addressing certain root causes of homelessness, such as mental health and substance use disorders.</p>	<p>Family Counseling with Trauma Focus Individual Counseling Parent Education with Focus on CSEC and Childhood Trauma Substance Abuse Treatment (Parent/Child)</p>	<p>CA Department of Education estimate for SFY 2022-23: 1,112 K-12 students HUD January 2020 PIT estimate: 108 children ages 18 and under</p>

Candidate Group/Target Population with Description and State Data	Targeted Services	County Estimate
<p>LGBTQ Youth</p> <p>The LGBTQ youth who are determined to be at imminent risk of entering foster care may also receive prevention services. Nationwide, 30% of children in out of home care identify as LGBTQ. One in five youth in juvenile justice facilities identify as LGBTQ. There is a higher risk of suicide for LGBTQ than their heterosexual peers and they are disproportionately represented amongst homeless and trafficked youth.</p>	<p>Parent Education Regarding LGTBQ</p> <p>Family Counseling with Trauma Focus</p> <p>Intermittent/Ongoing Case Management Resource</p> <p>Intermittent Parenting Resources</p> <p>Substance Abuse Treatment (Parent/Child)</p>	<p>State of California estimate: 244,000</p> <p>Butte County estimate: 1,295</p>
<p>Substance-Exposed Infants</p> <p>Substance-exposed newborns who are also determined to be at imminent risk of entering foster care, will be eligible to receive Title IV-E prevention services. Substance-exposed newborns are defined as infants born and identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including both illegal and prescribed drugs.</p>	<p>Substance Abuse Treatment (Parent)</p> <p>Parent Education with Focus on SUD</p> <p>Family Counseling with Trauma Focus</p>	<p>Hospital admission rate with any substance-affected diagnosis, infants 0-3 mos. per 1,000 hospital births: 58.5 per 1,000 hospital births (2015)</p>
<p>Trafficked Children and Youth</p> <p>Trafficked children and youth who are determined to be at imminent risk of entering foster care will be eligible to receive Title IV-E prevention services. These are children and youth who have experienced commercial sexual exploitation (CSE), as defined in WIC section 300(b)(2). During SFY 2019-20, there was an average of 1,081 youth identified as victims of CSE by child welfare and probation, with 275 (25%) of those youth being newly identified within this timeframe. Title IV-E funded prevention efforts will be essential for addressing the exploitation of vulnerable youth at risk for entry into foster care due to being trafficked, based upon the use of an approved assessment tool for this specialized population.</p>	<p>Intensive Trauma Focused Treatment</p> <p>Substance Abuse Treatment (Parent/Child)</p> <p>Parent Education with Focus on Trauma and CSEC</p> <p>Family Counseling with Trauma Focus</p> <p>Motivational Interviewing</p>	<p>11</p>
<p>Children Exposed to Domestic Violence</p> <p>Children exposed to domestic violence who are determined to be at imminent risk of entering foster care will also be eligible to receive Title IV-E services. Between February and September of 2020, a total of 34,433 "Emotional Abuse" referrals were screened in for investigation. Of those, 23,409 (67.98%) had the "Exposure to Domestic Violence" indicator selected. Title IV-E funded prevention services stand to bolster the protective capacity of the non-abusing caretaker, thus preventing the child's entry into foster care.</p>	<p>Family Counseling with Trauma Focus</p> <p>Parent Education with Focus on Trauma</p> <p>Motivational Interviewing</p>	<p>1,128</p>

Candidate Group/Target Population with Description and State Data	Targeted Services	County Estimate
<p>Children w/Caretaker Experiencing Substance Use Disorder</p> <p>Children whose caretakers experience a substance use disorder who are also determined to be at imminent risk of entering foster care will also be eligible to receive Title IV-E prevention services. These are children living in households with at least one parent who has a substance use disorder and are at increased risk for child maltreatment and child welfare involvement compared to other children. The children who are at a greater risk may be affected by trauma due to parental neglect, the results of their own prenatal substance exposure, or chaotic environments. Title IV-E funded prevention services can support parents in accessing substance use treatment and develop parenting skills to help to reduce the effects of parental substance use disorders on their children.</p>	<p>Substance Abuse Treatment (Parent)</p> <p>Parent Education with Focus on SUD</p> <p>Family Counseling with Trauma Focus</p> <p>Motivational Interviewing</p> <p>WRAP</p>	<p>According to national data, 1 in 8 children in the U.S. live with a caretaker who experienced an SUD in a given year. Extrapolating from that data would mean 5,772 children in Butte County are living with a caretaker experiencing an SUD.</p>
<p>Other Serious Risk Factors</p> <p>Children or youth experiencing other serious risk factors that when combined with family instability or safety threats would be assessed to be at imminent risk of foster care. Families of such children may be served under the Title IV- E prevention program when services identified in the state’s prevention plan may provide interventions that mitigate risk of entry into foster care. Examples include: Current or recent (within 6 months) family involvement with social services agency.</p> <ul style="list-style-type: none"> ▪ A change in family relationships characterized by frequent conflict or violence; ▪ Recent increase in substance use that impacts daily functioning and ability to care for the child or youth; ▪ Recent incident in which a parent or guardian made a plausible threat to cause serious physical harm to a child or youth; ▪ Incarceration of the caregiver; ▪ Child or youth participated in criminal activity; and ▪ Other recent or current circumstance that may cause family instability or a threat to the child/youth’s safety or well-being. 	<p>Family Counseling with Trauma Focus</p> <p>Parent Education with Trauma Focus</p> <p>Motivational Interviewing</p> <p>Intermittent/Ongoing Case Management Resource</p> <p>WRAP</p>	<p>N/A</p>

In addition to the 12 candidate groups listed above, youth in foster care who are expectant/pregnant and/or parenting are also eligible for Title IV-E prevention funding. Importantly, these youth are categorically eligible for services and do not require an “imminent risk” finding.

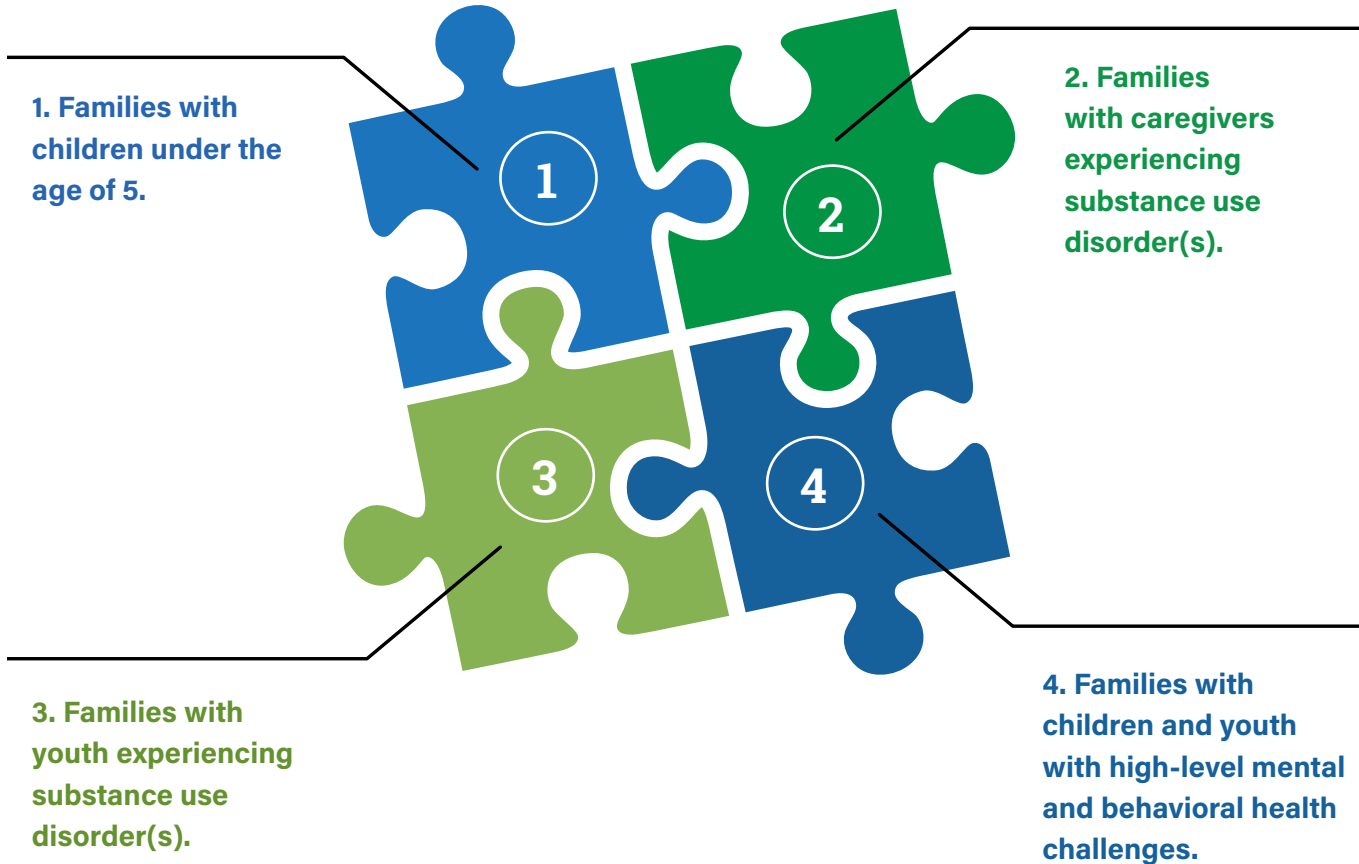
Candidate Group/Target Population with Description and State Data	Targeted Services	County Estimate
<p>Expectant and/or parenting youth in foster care</p>	<p>Youth in foster care who are expectant, pregnant, and/or parenting</p>	<p>20</p>

Target Populations–Phase 1

Looking ahead, Butte County intends to work with its community-based providers to develop service pathways for all children and families who meet the eligibility criteria to be considered “candidates for foster care” outlined above. However, building the capacity to address all underlying needs will take time and resources that are currently not available.

Accordingly, in the early stages of the implementation of this CPP, Butte County intends to develop service pathways focusing on four distinct populations of children, youth, and families that are reflected within and across the state-identified candidate groups. These four populations represent the children and families most likely to become involved with the child welfare system due to the community pillars of need identified earlier in this document.

THE FOUR POPULATIONS BUTTE INTENDS TO SERVE IN PHASE 1 OF CPP IMPLEMENTATION ARE:



COMMUNITY PATHWAY MODEL

The State of California’s Title IV-E Prevention Plan outlines an approach to service delivery known as the Community Pathway that envisions contracted community-based organizations primarily engaging with families and the public agency relegated to a “peripheral” role.

California’s Plan notes: “Struggling families, especially those residing in impoverished neighborhoods, often voluntarily seek support from public and private community agencies, such as faith-based organizations, schools, local athletic organizations, after school programs, scouting organizations, etc. Engaging and strengthening connections between these organizations and local service providers that understand the needs of the community and provide direct services, such as community-based organizations (CBOs), Family Resource Centers (FRC), or behavioral health agency, is key to realizing the ultimate vision for upstream prevention.”

Because they lack the stigma sometimes associated with public child welfare agencies and therefore maintain a deeper level of trust in

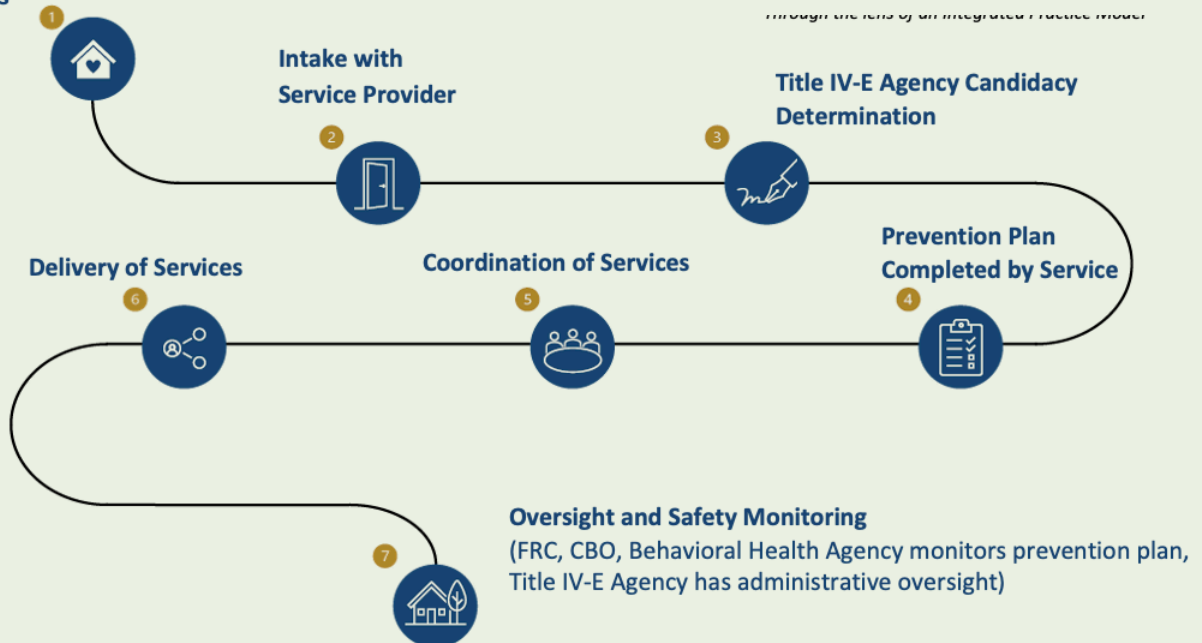
the community, CBOs delivering a Community Pathway model are likely to be able to increase support service utilization by families experiencing challenges, while improving child and family outcomes and advancing equity.

Butte County is very interested in further exploration of the Community Pathway model during the implementation phase of this CPP and believes the concept holds great promise. However, to operationalize the model, Butte County needs further detail and assurances from the State on a range of questions, including but not limited to:

- » Safety assessment, training, and monitoring protocols for CBO staff
- » State and federal funding available to support Community Pathway administrative functions across CBOs and public agencies
- » Eligibility determination processes
- » Ongoing communication and reporting between CBOs and public agencies
- » Legal liability across CBOs and public agencies

COMMUNITY PATHWAY: THROUGH THE LENS OF AN INTEGRATED PRACTICE MODEL

Family in Need of Supports and Services

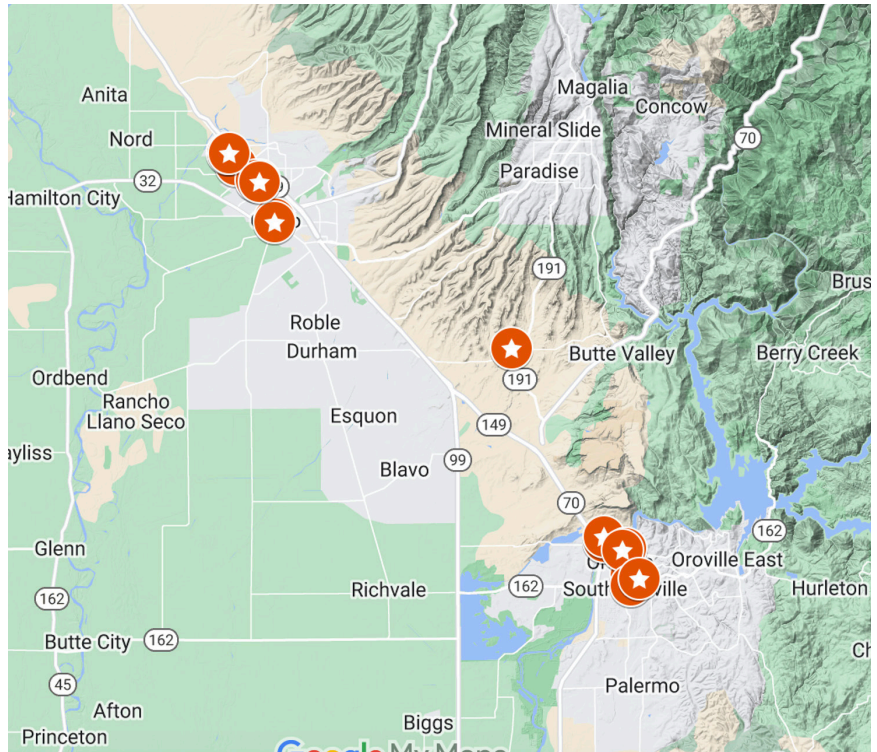


SERVICES/ASSET MAPPING

Despite these challenges, Butte County has significant assets that can be coordinated and leveraged in support of its CPP.

Asset Map

[Asset Map \(Live Version\)](#): An asset map was created using the results from the EBP survey to develop an inventory of children maltreatment and foster care prevention programs that are currently being delivered in Butte County. Identifying a current inventory will help determine any program deserts, gaps in services, provider capacity, and how services are meeting the needs of all children and families at risk of foster care entry. The mapped results will help develop appropriate strategies to leverage federal resources and determine how the county will expand programming over the next several years.



The current prevention programs in Butte County are clustered in both Chico and Oroville.

Below is a list of the current programs (and links to their website) plotted on the asset map and the services they provide:

Agency	Description
Butte County Behavioral Health	Provides mental health and substance use treatment to Medi-Cal beneficiaries, and provides crisis interventions to the community, regardless of insurance status.
Butte County Department of Employment and Social Services	The Department provides emergency response, investigation of child abuse and neglect, family treatment, and protective strategies for children.
Butte County Office of Education	The Butte County Office of Education serves 13 districts, 7 schools and 15 charter schools, educators, and students in all 58 California counties. They are committed to the success of every student and the excellence of every educator.

Agency	Description
<u>Butte County Probation</u>	A support agency for the Criminal, Juvenile, and Family Courts. Committed to maintaining a safe community by providing a coordinated level of service and programs designed to lessen the impact and recurrence of crime, and to protect and serve the people of Butte County.
<u>Butte County Public Health (BCPHD)</u>	Runs over 50 programs serving children, mothers, families, adults, small businesses, animals, and the environment. Committed to promoting healthy behaviors and resources, preventing illness, and protecting the health of Butte County residents.
<u>First 5 Butte County Children and Families Commission</u>	Works collaboratively with partners and community members to build a healthy, integrated system of support for young children and their families and caregivers.

Organization	Description
<u>Butte College Foster Kinship Program</u>	Offers free parent education classes and support services for caregivers. These courses are preventative and early intervention.
<u>Catalyst</u>	A non-profit that is committed to serving the needs of all victims of violence as well as their children. Staff give various types of support to those experiencing violence or abuse.
<u>Cloverleaf Family Counseling</u>	A non-profit organization that provides empathetic, integrative, and individualized mental health services for children, individuals, and families.
<u>Community Action Agency of Butte County, Inc.</u>	A non-profit organization dedicated to the promotion of self-sufficiency and alleviation of poverty. They offer housing and utilities support as well as a food bank for families in need in our community.
<u>Counseling Solutions</u>	Counseling Solutions is a nonprofit organization that helps children, adults, and families work through issues that can be barriers to healthy relationships.
<u>Esplanade House</u>	A transitional housing program for families that is provided by the Community Action Agency. This is a treatment program.
<u>Feather River Tribal Health</u>	Services for families, including information and referral, parenting education, behavioral health, life skills training, pediatrics, and other services.
<u>Hmong Cultural Center</u>	Hmong Cultural Center aims to improve the lives of individuals and families through culturally sensitive education, advocacy, support, and services.
<u>Hospital Alternatives Program</u>	Provides specially trained clinicians and behavioral health counselors to provide comprehensive response and support services to youth who need intensive services as an alternative to being hospitalized following a 5150 screening.
<u>Lilliput, a Part of Wayfinder Family Services</u>	Provides expert, individualized support and services to children, youth and adults, from those who have vision loss or profound special needs to foster youth with serious medical conditions or trauma, and their families.

Organization	Description
<u>Northern Valley Catholic Social Services</u>	Provides low-cost or free mental health, housing, vocational, and support services to individuals and families.
<u>Stanford Sierra Youth & Families (formerly Sierra Forever Families)</u>	Stanford Sierra Youth & Families provides a continuum of care to empower youth and families to overcome challenges together, as well as connects youth in foster care to permanent loving families. This includes the following array of comprehensive programs: family advocacy and support; behavioral and mental health services; juvenile justice intervention, mentoring, foster care, adoption services, and pre- and post-adoption support.
<u>Stepping Stones</u>	Outpatient program offering alcohol and drug treatment, case management, continuing care, and support groups for women who are pregnant or parenting children.
<u>Stonewall Alliance Center</u>	Stonewall Alliance supports and celebrates the health, empowerment, and joy of the North State LGBTQ+ community at every intersection of their identities.
<u>The 6th Street Center for Youth</u>	Provides family reunification, counseling, crisis intervention, and other services to youth ages 14-21 that are homeless, marginally housed, or runaways.
<u>The African American Family & Cultural Center</u>	A non-profit organization that provides programs and services pertaining to mental and behavioral health to families in the surrounding community (e.g., anger management, adult men’s process groups, youth academic success/leadership, youth dance, a community garden, etc.).
<u>The Butte County One-Stop</u>	Provides job readiness classes, resume preparation, and job search assistance/ placement.
<u>The Live Spot</u>	The Live Spot is a comprehensive youth program (6th-12th grade) designed to build the skills and capacity of young people, provide opportunities for meaningful youth engagement and involvement in pro-social activities. The Live Spot offers youth-led, youth-developed programming, workshops, vocational/job opportunities, mentoring, supportive services, and events.
<u>Youth and Family Programs</u>	Youth and Family Programs offers diverse services for foster families and foster youth from infancy to 21 years of age.
<u>Youth for Change</u>	Provides the Homeless Emergency Action Response Team (HEART) program, which seeks to provide physical and emotional safety to youth experiencing a homeless or runaway episode, assisting with stable living conditions, strengthening family bonds, etc.

CAPACITY ASSESSMENT OVERVIEW

Butte County utilized the CDSS Capacity Assessment Tool during the development of this CPP. After being briefed on the tool and its purpose, CPP cross-sector collaborative members were encouraged to complete the tool individually and to submit their results. The scores were then aggregated and the written feedback was consolidated and the findings were presented back to the CPP collaborative at its June 2022 meeting. Following the presentation of these findings, a facilitated conversation then solicited additional feedback. Collaborative members then collectively developed strategies for addressing areas of challenge and identified areas where additional guidance or technical assistance may be needed from the State. The completed tool was then submitted to the County's CDSS Office of Child Abuse Prevention (OCAP) liaison. The results from the tool including areas of strength and challenge can be found in Appendix I of this CPP.

Workforce Challenges

The most pressing capacity challenge currently facing Butte County relates to the public agency workforce. The workforce has been impacted by multiple factors over the past five years, leaving the Department of Employment and Social Services (DESS) and many of our close partnering agencies understaffed.

As a county with a few urban areas and many rural and poor communities, Butte County suffers from a lower tax base and depends heavily on State and Federally funded programs. While DESS has maintained State and Federal funds, partner county agencies including Behavioral Health and Probation rely on County General funds. As a result of the lower tax base, wages may not be as competitive as surrounding areas or the private sector. With excessive vacancies, public agencies are focused on the immediate safety of individuals and the community, leaving little time to develop and explore avenues of prevention.

The COVID-19 pandemic also drastically changed the expectations of work. While remote work was utilized during COVID, effective social work and intervention requires face-to-face engagement. Agency staff and community members alike are still very cautious and worry about exposure from face-to-face meetings. This may be an additional barrier to realizing full staff potential.

Specific to Butte County is the impact of several multi-year disasters. In 2017, Butte experienced the Oroville Dam incident that caused much of the Oroville area to evacuate and resulted in several years of demolition and reconstruction to the Dam. The Camp Fire occurred in 2018 and devastated the entire city of Paradise. Four years later Paradise continues to be in a slower than expected rebuild phase. In 2019, the North Complex Fire consumed the town of Berry Creek. Butte has also struggled through the COVID-19 pandemic over the past few years, as noted above. Each disaster has elicited a new round of experienced, seasoned employees leaving for their own personal reasons. While Butte County continues to recruit and hire new staff, it has lost the institutional knowledge and the workforce mentors that have been prevalent in the past. Brand new social workers are being mentored and guided by workers who have only a couple of years of experience. The disasters have also increased staff feelings of being overwhelmed, despite the lower caseload sizes. Finally, each successive community disaster has taxed public agency staff as staff are reassigned as disaster workers, and layered their trauma and increased their reactivity and stress exponentially.



EVIDENCE-BASED PROGRAMMING

To comprehensively capture the current continuum of prevention programming in Butte County and assess the current and prospective local capacity for the delivery of EBPs, an EBP survey was circulated to a broad range of service providers across the public child welfare, behavioral health, public health, and education systems as well as the local Tribal systems.

Providers were asked to identify the EBPs in California's Title IV-E Prevention Plan they are currently delivering or could potentially deliver with capacity building assistance; the other EBPs on the Title IV-E Prevention Services Clearinghouse they are currently delivering or could potentially deliver with capacity building assistance; additional prevention programs they are currently delivering that have an evidence base and could potentially be added to the federal Clearinghouse in the future; and other prevention programs they are currently delivering with or without an evidence base.

Providers were also surveyed about whether their current programming is being delivered in-person, virtually, or both; which communities it is being

delivered in; how it is being financed; and whether it is being delivered as a primary, secondary, and/or tertiary intervention. This survey process provided Butte County with rich data and a comprehensive understanding of local provider prevention service capacity and informed the selection and categorization of the EBPs within this CPP.

Butte County also recognizes the challenges public agencies and community-based direct service providers will face in developing and delivering EBP service lines, including the costs associated with training staff to deliver these programs, retaining these staff, and ongoing monitoring to ensure model fidelity and continuous quality improvement. Finally, the County realizes that some EBPs will need to be culturally adapted to appropriately meet the needs of some children and families. In the Butte County CSA it states that "services to address cultural needs are a high priority", and the County commits to working with CDSS to identify and implement allowable cultural adaptations of EBPs to ensure their effectiveness in serving all children and families.

Tier 1 Services

The following EBPs are listed in California’s Title IV-E Prevention Plan and Butte County possesses existing capacity to deliver them. Butte County intends to explore leveraging Title IV-E funds for these programs as soon as possible. Looking ahead, as Butte develops capacity to deliver other EBPs listed in California’s IV-E Prevention Plan the County intends to add those services to this list.

Program	Service Category	Target Population	Outcome Objectives
Healthy Families America	In-Home Parent Skill Based	Prenatal to 5 years (services offered within 3 months of birth)	<ul style="list-style-type: none"> » Increased positive parenting practices » Increased nurturing parent-child relationships
Motivational Interviewing	Substance Abuse/ Cross-Cutting	Adolescents and their parents/ caregivers	<ul style="list-style-type: none"> » Decrease in youth substance use » Decrease of parent/caregiver substance use » Improved physiological, psychological, and lifestyle outcomes
Nurse Family Partnership	In-Home Parent Skill Based	Young, first-time, low-income mothers beginning early in their pregnancy until the child turns 2	<ul style="list-style-type: none"> » Reduced child welfare administrative reports » Improved child cognitive functions and abilities » Improved child physical development and health » Improved adult economic and housing stability
Parent-Child Interaction Therapy	Mental Health	Children aged 2-7 and their parents/ caregivers	<ul style="list-style-type: none"> » Reduction in child negative behaviors » Increased positive parenting practices » Improvement of parent/caregiver emotional and mental health
Parents as Teachers	In-Home Parent Skill Based	Parents/caregivers with children ages zero to kindergarten	<ul style="list-style-type: none"> » Increased number of developmental milestones met » Increased positive parenting practices » Improvement of parent/caregiver emotional and mental health

Tier 2 Services

The following EBPs are listed on the Title IV-E Prevention Services Clearinghouse and Butte County has existing capacity to deliver them. These programs are not yet listed in California's Title IV-E Prevention Plan, but when they are added to that plan Butte County intends to explore leveraging Title IV-E for them.

Program	Service Category	Target Population	Outcome Objectives
Aggression Replacement Training	Mental Health	Youth ages 13 to 18 who exhibit violent or aggressive behavior	» Increased child well-being: Behavioral and emotional functioning
Child-Parent Psychotherapy	Mental Health	Children ages birth through 5 and their parents/caregivers	» Increased child well-being: Behavioral and emotional functioning » Increased adult well-being: Parent/caregiver mental or emotional health
Eye Movement Desensitization and Reprocessing	Mental Health	Individuals experiencing distress associated with traumatic memories and/or a variety of other mental health problems	» Increased child well-being: Behavioral and emotional functioning » Increased adult well-being: Parent/caregiver mental or emotional health » Increased adult well-being: Parent/caregiver physical health
Family Centered Treatment	In-Home Parent Skill Based	Families with youth who are at-risk for out-of-home placements, have trauma exposure, have histories of delinquent behavior, or are working toward reunification and youth who move between the child welfare, behavioral health, and juvenile justice systems	» Reduced out-of-home placement » Increased least restrictive placement » Reduced child delinquent behavior
Intensive Care Coordination Using High Fidelity Wraparound	Mental Health	Children and youth birth to age 21 with complex emotional, behavioral, or mental health needs, and their families	» Increased least restrictive placement » Increased child well-being: Behavioral and emotional functioning
Interpersonal Psychotherapy	Mental Health	Adult patients diagnosed with major depression	» Increased adult well-being: Parent/caregiver mental or emotional health » Increased adult well-being: Family functioning

Program	Service Category	Target Population	Outcome Objectives
Interpersonal Psychotherapy for Depressed Adolescents	Mental Health	Adolescents (12-18 years) with mild to moderate symptoms of a depressive disorder	<ul style="list-style-type: none"> » Increased child well-being: Behavioral and emotional functioning » Increased child well-being: Social functioning
Methadone Maintenance Therapy	Substance Abuse	Individuals (generally over age 18) who have an opioid use disorder	<ul style="list-style-type: none"> » Increased adult well-being: Parent/caregiver substance abuse
Mindfulness-Based Cognitive Therapy	Mental Health	Adults with depression symptoms or other mental disorders, such as anxiety	<ul style="list-style-type: none"> » Increased adult well-being: Parent/caregiver mental or emotional health » Increased adult well-being: Parent/caregiver physical health
Strengthening Families Program: For Parents and Youth 10-14	Mental Health, Substance Abuse	Families with youth ages 10-14	<ul style="list-style-type: none"> » Increased child well-being: Substance use
Trauma-Focused Cognitive Behavioral Therapy	Mental Health	Children and adolescents who have experienced trauma including those who have PTSD symptoms, dysfunctional feelings or thoughts, or behavioral problems	<ul style="list-style-type: none"> » Increased child well-being: Positive parenting practices » Increased child well-being: Social functioning » Increased adult well-being: Parent/caregiver physical health » Increased adult well-being: Parent/caregiver mental or emotional health

Butte County is also looking at potentially developing the capacity to deliver the Triple P Positive Parenting Program in the near term. This program could meet the needs of local children and families, and Butte County would intend to automatically add it to the Tier 1 list once it has been added to the California Title IV-E Prevention Plan.

Other Prevention Programming

In addition to the federally reimbursable EBPs listed above, there is also existing capacity in Butte County for delivery of two other evidence-based programs that are not yet listed on the Title IV-E Prevention Services Clearinghouse: the Nurturing Parenting Program for Parents and their Infants, Toddlers, and Preschoolers—a home visitation program targeting families with children under the age of 5 that have been referred to the child welfare system—and the Kinship Support Services Program, a program designed to provide resources and support to help improve outcomes for families formed through kinship care.

THE NURTURING PARENTING PROGRAM

The Nurturing Parenting Program is a family-centered initiative designed to build nurturing parenting skills as an alternative to abusive and neglecting parenting and child-rearing practices. The target population of the program is parents of families who have been reported to the Child Welfare System for child maltreatment, including physical abuse, emotional abuse, and child neglect. It can also be used as a court-ordered parenting program. Some of the long-term goals are to prevent recidivism in families receiving social services and stop the intergenerational cycle of child abuse by teaching positive parenting behaviors.

Nurturing Parenting Program overall goals:

- » Achieve measurable gains in individual self-worth and the self-worth of their children
- » Achieve measurable gains in empathy and meeting their own adult needs in healthy ways
- » Achieve measurable gains in empathy towards meeting the needs of their children
- » Increase in use of dignified and nonviolent disciplinary strategies and practices
- » Achieve measurable gains in self-empowerment and that of their children
- » Achieve measurable gains in nurturing parenting beliefs, knowledge, and utilization of skills and strategies as measured by program assessment inventories
- » Reunify with their children who are in foster care
- » Attend each session and complete the Nurturing Parenting Program for Parents and their School-age Children 5 to 11
- » Decrease likelihood of recidivism

According to the California Evidence-Based Clearinghouse for Child Welfare, Nurturing Parenting is rated high on the Child Welfare System Relevance Level and is ranked 3 (out of a scale of 1–5) in Promising Research Evidence.⁴ Though it has not yet been reviewed for the federal clearinghouse, if Nurturing Parenting is eventually listed on the Title IV-E Prevention Services Clearinghouse, Butte County would explore leveraging federal funding for expansion and replication of the program.

4 CEBC » Program » Nurturing Parenting Program For Parents And Their School Age Children 5 To 11 Years
<https://www.cebc4cw.org/program/nurturing-parenting-program-for-parents-and-their-school-age-children-5-to-11-years/>

KINSHIP SUPPORT SERVICES PROGRAM

The Kinship Support Services Program (KSSP) is designed to provide support to kinship families—particularly those formed voluntarily, without the assistance of the child welfare agency. KSSP provides support to relatives facing the challenge of raising kin, and also helps connect families in similar situations.

Support services offered through KSSP include:

- » In-Home Support
- » Counseling
- » Support Groups
- » Respite Resources
- » Advocacy
- » Information & Referrals
- » Legal Referrals
- » Guardianship Workshops & Adoption Assistance
- » Family Activities
- » Play Care
- » Mentoring
- » Assistance with Basic Needs

The program has demonstrated effectiveness in strengthening families, stabilizing relative placements and increasing permanency, keeping siblings together, and keeping children connected to their communities and cultures, while reducing a range of negative outcomes including juvenile homelessness and delinquency, teen pregnancy, alcohol and drug abuse, and incarceration.

If KSSP is eventually listed on the Title IV-E Prevention Services Clearinghouse, Butte County would explore leveraging federal funding for expansion and replication of the program.

Butte also uses state and federal funding for three additional prevention programs:

SUPPORTING OUR FAMILIES IN TRANSITION (SOFT)

The SOFT program targets families in Family Reunification as they prepare to enter Family Maintenance, as well as provides support during Family Maintenance. SOFT services are provided in both the classroom setting and in the home. Advanced parenting classes are provided to help parents put skills learned in earlier classes to practice once their children have returned home. The curriculum is flexible and can be adjusted to meet specific needs that may arise. Additionally, in-home parent coaching and support with family skills education (such as budgeting) are provided. Typically, parents attend class every other week and have in-home coaching on alternating weeks.

This program is funded by blending Child Abuse Prevention, Intervention and Treatment (CAPIT) and Promoting Safe and Stable Families (PSSF) funding (Family Support, Family Reunification, and Family Preservation). The use of both CAPIT and PSSF funds allows for greater flexibility in providing these services to families while meeting the goals of these funding sources. While working collaboratively with CSD staff, the SOFT case managers provide extra support and parent mentoring, with an emphasis on parenting in recovery, with the goal of successful reunification.

In providing or arranging services for children and families, CSD is committed to making services available on a countywide basis. Parent Engagement and Counselling Services, Nurturing Parenting Program classes, and SOFT services are all provided in both Chico and Oroville. There is no charge for any of these services. Butte County works with families who experience transportation challenges. Bus passes and gas cards are available for all parents who need assistance with transportation, and if they do not live in an area where public bus transportation is available, the parents can be reimbursed for mileage to services if this assistance is needed.

Monitoring service effectiveness is an ongoing process and is done through a variety of methods, including contract monitoring, oversight meetings, reports, data evaluation, pre- and post-testing, satisfaction surveys, visiting services in progress, and evaluating outcome measurements. When needed, changes are made to services if the outcomes do not meet expectations.

Early Intervention (EI)

The EI program is a preventative program for families designed to assist them with resources to avoid CSD/court intervention. These targeted EI services are offered when there is an early risk of abuse and/or neglect, but insufficient risk to require CSD/court intervention. EI services provided include, but are not limited to, community resources/referrals, basic life skills, basic needs/tangible goods, safety planning, transportation, parenting, and case management. EI has had a positive impact on federal outcome measures S2 (Recurrence of Maltreatment) and P4 (Reentry to Foster Care). EI is both prevention and early intervention. The EI program is built on the Nurturing Parenting Program curriculum.

Post-Adoption Services (PAS)

Butte County began providing PAS in January 2013. Services are provided through contracted services to support adoptive families in the community. These services are funded, in part, with PSSF funding for Adoption Promotion and Support Services. The use of this fund allows the County and the contracted agency to support adoptive families by providing support services necessary for them to make a lifetime commitment to children. Some of the services provided include case management, training and consultation for parents, training for professionals working with adoptive families, assessments for Wraparound services, respite, support groups, activities for families, and referrals to local community resources.

TRIBAL PROGRAMMING

The Mechoopda Rancheria offers a range of programs and support services for Tribal members and their households. This includes an advocacy program designed to meet whatever needs Tribal members might have and reduce the impact of adverse childhood experiences, from domestic violence to sexual abuse, trauma and other crises. Despite resource limitations, the Tribe provides crisis counseling, intervention case management, legal support, youth programming, housing assistance, and child care through their full service hubs.

Enterprise Rancheria also offers a range of programs for Tribal members. These include employment, housing, and food assistance; emergency assistance programs; and support for clothing and equipment for students. The Tribe is seeking state funding to support these programs. They also offer mental health, rehab and treatment, and domestic violence support services, designed to prevent removals and detentions and reunify children with their families.

LINKING CANDIDATE GROUPS & EVIDENCE-BASED PROGRAMS

To ensure there are opportunities to serve all children and families deemed to be at “imminent risk” of foster care entry, Butte County has included all 12 candidate groups along with expectant and parenting youth in foster care in this CPP. Similarly, the County has included all federally reimbursable EBPs from the Title IV-E Prevention Services Clearinghouse for which service delivery capacity presently exists. Over time, the County intends to facilitate access to EBPs for all children and families in need of services. At the same time, Butte County recognizes that implementation of FFPSA and the CPP is likely to be a multi-year process consisting of several phases. A key success factor in implementation will be strategically linking the delivery of EBPs with subpopulations of children and families who are most likely to benefit from them.

In Phase 1 of the CPP, Butte County intends to explore the development, replication, and expansion of the Tier 1 EBPs, linked to the following candidate groups for whom these programs show the most promise.

Program	Service Category	Phase 1 Target Population(s)	Outcome Objectives
Healthy Families America	In-Home Parent Skill Based	<ul style="list-style-type: none"> » Children under age 5 » Caregivers experiencing SUD 	<ul style="list-style-type: none"> ✓ Increased positive parenting practices ✓ Increased nurturing parent-child relationships
Motivational Interviewing	Substance Abuse/ Cross-Cutting	<ul style="list-style-type: none"> » Caregivers experiencing SUD » Youth experiencing SUD » Children and youth w/MH-BH challenges 	<ul style="list-style-type: none"> ✓ Decrease in youth substance use ✓ Decrease of parent/caregiver substance use ✓ Improved physiological, psychological, and lifestyle outcomes
Nurse Family Partnership	In-Home Parent Skill Based	<ul style="list-style-type: none"> » Children under age 5 » Caregivers experiencing SUD 	<ul style="list-style-type: none"> ✓ Reduced child welfare administrative reports ✓ Improved child cognitive functions and abilities ✓ Improved child physical development and health ✓ Improved adult economic and housing stability
Parent-Child Interaction Therapy	Mental Health	<ul style="list-style-type: none"> » Children under age 5 » Caregivers experiencing SUD » Children and youth w/MH-BH challenges 	<ul style="list-style-type: none"> ✓ Reduction in child negative behaviors ✓ Increased positive parenting practices ✓ Improvement of parent/caregiver emotional and mental health
Parents as Teachers	In-Home Parent Skill Based	<ul style="list-style-type: none"> » Children under age 5 » Caregivers experiencing SUD 	<ul style="list-style-type: none"> ✓ Increased number of developmental milestones met ✓ Increased positive parenting practices ✓ Improvement of parent/caregiver emotional and mental health

Despite the opportunities outlined above to scale existing local programming, Butte County is concerned that the 10 available EBPs in California's State Title IV-E Prevention Plan do not sufficiently address the needs of the four target populations identified in this CPP:

- » Families with children under the age of 5
- » Families with caregivers experiencing substance use disorder(s)
- » Families with youth experiencing substance use disorder(s)
- » Families with children and youth with high-level mental and behavioral health challenges

A literature review has been conducted to identify additional EBPs that might better align with these target populations.

As California looks to expand its IV-E Prevention Plan in the coming years, Butte County urges the State to prioritize the programs included in this literature review, in particular the following programs which are already listed on the Title IV-E Prevention Services Clearinghouse and thus eligible for federal reimbursement:

PROGRAMS FOR CHILDREN UNDER AGE 5

Homebuilders® is a home- and community-based intensive family preservation services treatment program designed to avoid unnecessary placement of children and youth into foster care, group care, psychiatric hospitals, or juvenile justice facilities. The program model engages families by delivering services in their natural environment, at times when they are most receptive to learning, and by enlisting them as partners in assessment, goal setting, and treatment planning.

TARGET POPULATION:

- » For children/adolescents ages: 0–17
- » For parents/caregivers of children ages: 0–17

PROGRAM GOALS:

- ✓ Reduce child abuse and neglect
- ✓ Reduce family conflict
- ✓ Reduce child behavior problems
- ✓ Teach families the skills they need to prevent placement or successfully reunify with their children

Child First is a two-generation, home-based mental health intervention for the most vulnerable young children (prenatal through age 5 years) and their families, who likely have current or past Child Welfare Services involvement. It is designed for young children who have usually experienced trauma and/or have social-emotional, behavioral, developmental, and/or learning problems.

TARGET POPULATION:

- » Children/adolescents ages: 0–5
- » Parents/caregivers of children ages: 0–5

PROGRAM GOALS:

For Children:

- ✓ Decreased problem behaviors
- ✓ Improved social-emotional regulation and well-being
- ✓ Improved communication and cognition

For Parents/Caregivers:

- ✓ Decreased child abuse and neglect
- ✓ Improved mental health
- ✓ Improved executive functioning

For Families:

- ✓ Increased nurturing, responsive, and protective parent-child relationships
- ✓ Increased stabilization and connection to needed services and supports

PROGRAMS ADDRESSING CAREGIVER & YOUTH SUBSTANCE USE DISORDER

Familias Unidas is a family-centered drug use and sexual risk behavior prevention intervention for Hispanic youth and their families.

TARGET POPULATION:

- » Children/adolescents ages: 12–16
- » Parents/caregivers of children ages: 12–16

PROGRAM GOALS:

- ✓ Prevent drug use and sexual risk behaviors in adolescents
- ✓ Improve family functioning
- ✓ Improve parent-adolescent communication
- ✓ Improve positive parenting
- ✓ Improve parental investment
- ✓ Improve parental monitoring of peers

Strengthening Families Program addresses youth risk such as aggressive or withdrawn behavior, negative peer influence, poor school performance, lack of prosocial goals, and poor relationship with parents. Protective factors addressed include positive future goals, peer pressure resistance skills, prosocial peer relationships, positive management of emotions, and empathy with parents.

TARGET POPULATION:

- » Children/adolescents ages: 10–14
- » Parents/caregivers of children ages: 10–14

PROGRAM GOALS:

For Youth:

- ✓ Decrease alcohol, tobacco, and marijuana use
- ✓ Decrease conduct problems in school
- ✓ Increase appreciation for parents/caregivers
- ✓ Increase skills in dealing with stress and peer pressure

For Parents/Caregivers:

- ✓ Increase parenting skills such as setting appropriate limits and building a positive relationship with their youth
- ✓ Increase in positive feelings towards their child
- ✓ Increase general child management including setting rules and following through with consequences
- ✓ Increase skills in general child management such as effectively monitoring youth and having appropriate and consistent discipline

Guiding Good Choices® (GGC) is designed to help parents develop positive parenting and family management skills. The goal of GGC is to prevent substance abuse and other risky behaviors among teens by improving family communication and family bonding which has been shown to be critically important in reducing or inhibiting adolescent participation in antisocial behaviors.

TARGET POPULATION:

- » Parents of adolescents and young teens
- » For parents/caregivers of children ages: 9–14

PROGRAM GOALS:

- ✓ Prevent substance abuse among teens
- ✓ Prevent other risky behaviors among teens
- ✓ Improve family communication
- ✓ Improve family bonding

PROGRAMS ADDRESSING CHILD & YOUTH MENTAL/BEHAVIORAL HEALTH CHALLENGES

Coping Cat is a cognitive-behavioral treatment for children with anxiety. The program incorporates four components: recognizing and understanding emotional and physical reactions to anxiety; clarifying thoughts and feelings in anxious situations; developing plans for effective coping; evaluating performance and giving self-reinforcement.

TARGET POPULATION:

- » Children/adolescents ages: 7–13
- » For parents/caregivers of children ages: 7–13

PROGRAM GOALS:

- ✓ Reduce anxiety

LOGIC MODEL

TARGET POPULATIONS

Families with children under the age of 5; Families with caregivers experiencing substance use disorder(s); Families with youth experiencing substance use disorder(s); Families with children and youth with high-level mental and behavioral health challenges



COMMUNITY NEEDS

- » 76.5% of residents have reported one or more adverse childhood experiences
- » 30.3% of Butte County residents have reported experiencing four or more ACEs
- » 74 per 1,000 children in Butte County experience childhood maltreatment
- » Rates of abuse or neglect higher than state average
- » Rates of removal into foster care higher than state average



INPUTS

- » Critical administrative supports, including information technology tools, interagency collaboration, and training and workforce supports
- » Active Tribal involvement
- » Accessible policies clearly outlining Family First Practices and Policies
- » Semi-structured eligibility determination and service selection processes
- » Enhanced MOUs and contracts with CBOs to expand capacity and provide eligible services

Delivery of high-fidelity evidence-based programs that are aligned with the specific needs and characteristics of each family in the target population including: Healthy Families America • Motivational Interviewing • Parent-Child Interaction Therapy • Parents as Teachers • Nurse Family Partnership



OUTPUTS

- » Widespread community engagement and understanding of FFPSA implementation strategies
- » Services tailored to the needs of all eligible communities, including tribal communities
- » Access to accurate and comprehensive data
- » Accurate assessment of safety, risk, and family strengths and needs
- » Consistent engagement and partnership with CBOs and families
- » Buy-in and support from staff, stakeholders, partners, and community members
- » Enhanced capacity of County and service partners to deliver EBPs



SHORT-TERM OUTCOMES

- ✓ Professional workforce that is prepared, supported, and effective
- ✓ A shared vision and plan for Families First
- ✓ Effective coordination between entities on eligibility determinations, casework, service delivery, and evaluation
- ✓ Increased referrals for preventive and post-permanency services
- ✓ Increased positive parenting practices
- ✓ Increased nurturing parent-child relationships
- ✓ Decrease in youth substance use
- ✓ Decrease of parent/caregiver substance use
- ✓ Improvement of parent/caregiver emotional and mental health



LONG-TERM IMPACT

- ✓ Families in Butte County are strengthened and stabilized
- ✓ Reduced counts of child maltreatment
- ✓ Decreased rates of removal and placement into foster care

CPP SPENDING PLAN

				FUNDING SOURCES:		CDSS (Required)	CDSS (Required)	CDSS	CDSS	CDSS	CDSS	CDSS	CDSS	CDSS	CDSS	CDSS	First 5
				ALLOCATIONS:		\$3,000,000	\$3,000,000	\$500,000	\$200,000	\$10,000	\$15,000	\$20,000	\$200,000	\$20,000	\$100,000		
Activity/ Service Name	Fiscal Agent	Grantee/ Contractor Name	Spending Time Frame	GF State Block Grant Child Welfare	GF State Block Grant Probation	FFTA	ARPA-CBCAP	CBCAP	CAPIT	PSSF	County Children's Trust Fund	Cal-WORKs	County General Fund	First 5			
PREPLANNING:																	
Consultation and Preparation of CPP	BC CSD	Social Change Partners	FY 2022-23			\$90,000											
SUBTOTAL				\$0	\$0	\$90,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
DEVELOPMENT OF PLAN:																	
Family Resource Center Development		Pending	FY 2022/23-2024/25				\$133,841										
Expand Wraparound to NRLG, Early Intervention, Non-Detained: EBP Implementation	BC CSD	Pending	Pending	Pending													
SUBTOTAL				\$0	\$0	\$0	\$133,841	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL				\$0	\$0	\$90,000	\$133,841	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

				FUNDING SOURCES:		CDSS (Required)	CDSS (Required)	CDSS	CDSS	CDSS	CDSS	CDSS	CDSS	CDSS	First 5	
				ALLOCATIONS:		\$3,000,000	\$3,000,000	\$500,000	\$200,000	\$10,000	\$15,000	\$20,000	\$200,000	\$20,000	\$100,000	
Activity/ Service Name	Fiscal Agent	Grantee/ Contractor Name	Spending Time Frame	GF State Block Grant Child Welfare	GF State Block Grant Probation	FFTA	ARPA-CBCAP	CB-CAP	CAPIT	PSSF	County Children's Trust Fund	Cal-WORKS	County General Fund	First 5		
DELIVERY OF SERVICES/IMPLEMENTATION:																
Wraparound services: EBP Implementation	BC Probation	Youth for Change	FY 2023/24		\$75,000											
Implementation of CPP	BC CSD	Social Change Partners	FY 2023/24-2024/25			\$119,827										
Expand Wrap-around to NRLG, Early Intervention, Non-Detained: EBP Implementation	BC CSD	Pending	FY 2023/24-2024/25	\$924,563												
Motivational Interviewing EBP: Implementation and Expansion	BC CSD	Pending	FY 2023/24-2024/25	\$20,000												
Child Abuse Outreach and Education	BC CSD	CAPC	FY 2023/24								\$148,000					
Child Abuse Outreach and Education	First 5	CAPC	FY 2023/24													\$100,000
Early Intervention Services	BC CSD	Wayfinder	FY 2023/24							\$90,165						
Promoting Safe and Stable Families	BC CSD	Wayfinder	FY 2023/24						\$85,000							
SUBTOTAL				\$944,563	\$75,000	\$119,827	\$0	\$0	\$85,000	\$90,165	\$148,000	\$0	\$0	\$0	\$100,000	
PLANNING AND DEVELOPMENT SUBTOTAL				\$0	\$0	\$90,000	\$133,841	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
GRAND TOTALS				\$944,563	\$75,000	\$209,827	\$133,841	\$0	\$85,000	\$90,165	\$148,000	\$0	\$0	\$100,000		

ADDITIONAL ASSURANCES

Assurances Template

FAMILY FIRST PREVENTION SERVICES (FFPS) PROGRAM ASSURANCES COUNTY OF BUTTE

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 Assurance

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), Butte County Department of Employment and Social Services, Children's Services Division and Butte County Probation 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 Assurance

In accordance with section 471(e)(5)(B)(ii) of the federal Social Security Act and California WIC sections 16587(d)(7)-(8), Butte County Department of Employment and Social Services, Children's Services Division and Butte County Probation 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. County Title IV-E agencies that contract with community-based organizations, assure how safety will be monitored and the oversight of periodic risk assessments conducted by the 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 Assurance

In accordance with section 471(e)(5)(B)(viii) of the federal Social Security Act, the Butte County Department of Employment and Social Services, Children's Services Division and Butte County Probation 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 pathways under the FFPS program are supported and trained in assessing what children and their families need, connecting to the families served, knowing how to access and deliver the needed trauma-informed and evidence-based services, overseeing and evaluating the continuing appropriateness of the services, and all foundational requirements, including understanding how the requirements of the federal Indian Child Welfare Act (ICWA) and implementing state law intersect with prevention services provided through the community based and Title IV-E pathways.

Trauma-Informed Service Delivery Assurance

Butte County Department of Employment and Social Services, Children’s Services Division and Butte County Probation 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 is 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 Assurance

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), Butte County Department of Employment and Social Services, Children’s Services Division and Butte County Probation 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, evaluation and coordination to determine the effectiveness of a service provided under the FFPS program.

Advancement of Fairness and Equity Strategies Assurance

In accordance with the Governor’s Executive Order N-16-22, and consistent with California Five Year Prevention Services State Plan, Butte County Department of Employment and Social Services, Children’s Services Division and Butte County Probation 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.

Assurance of 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), Butte County Department of Employment and Social Services, Children’s Services Division and Butte County Probation assures the establishment of 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.

Assurances Signatures

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

(DATE)

(SIGNATURE OF AUTHORIZED CWS REPRESENTATIVE)

(DATE)

(SIGNATURE OF AUTHORIZED PROBATION REPRESENTATIVE)

APPENDIX I

Butte County Capacity Assessment: Summary of Findings and Areas to Address

Domain	Strengths	Areas to Develop & Challenges	Possible Strategies & Next Steps
Motivation for Change	Leadership Buy-In; Stakeholder Buy-In; Collective Commitment to Change	N/A	N/A
Provider Capacity & Capability	Communication Strategy; Established Meeting Frequency; Transparent Communication with Cross-Sector Partners; Organizational Stability; Organizational Equity; Adaptability; Shared Values	Information Sharing & Exchange; Cross-Sector Partner Investment	Seeking TA/guidance from CDSS on best practices for data and information sharing; working on strategies for blending/braiding funds
System Capacity & Capability	History of Cross-Sector Partnerships; Community Engagement Strategy; Expertise in Data Analysis and Accessibility	Community Involvement; Needs Assessment; Adequate Staffing; Infrastructure	Expanded ILT to include representatives from underserved communities and tribes; developing in-depth community needs assessment through CPP process
Policy Supports	Relationship with Local Governance; Data Sharing Agreements; Alignment with Current Initiatives		N/A

For areas marked “Absent or missing,” what information or data might be helpful and how can the Title IV-E agencies, other public organizations and community partners gather information or data? How can CDSS provide guidance or assistance?

Information on blending/braiding of funding (especially Payor of Last resort and interaction between IV-E and Medi-Cal); state standards/guidance on continuous quality improvement (CQI) and the role of data; best practices for data sharing across agencies and with community stakeholders

Which of the subdomain subcategory attributes (e.g., culture & climate, information sharing, trust in leadership, mission and vision, partnership, existing system coalitions, community interaction, infrastructure, existing policies) are completely established?

Shared vision and mission, buy-in; trust and partnership between public agency & stakeholders; adaptability and creativity/openness to new approaches; cross-sector partnerships and existing system coalitions; support from and policy alignment with local government

Which subdomains need further development? (e.g., Information Sharing & Exchange, Organizational Stability, Cross Sector Partner Investment, etc.)

Information Sharing & Exchange, Cross-Sector Partner Investment, Community Involvement (underserved communities and Tribes), Needs Assessment, Adequate Staffing, Infrastructure

Prioritize the area(s) that require further technical assistance below.

- 1) Strategies for braiding and blending funding
- 2) Implementation of CQI in alignment with state standards
- 3) Overcoming legal and regulatory obstacles to data sharing

APPENDIX II

Capacity Assessment

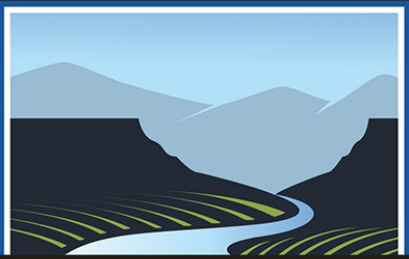
PLEASE USE THE FOLLOWING SCALE TO ASSESS THE ITEMS BELOW:

- 0 (Absent or Missing) indicates that the Title IV-E agency is **not yet ready** and motivated change or comprehensive prevention planning.
- 1 (Emerging) indicates that the Title IV-E agency is **somewhat ready** and motivated for change to begin the process of comprehensive prevention planning.
- 2 (Established) indicates that the Title IV-E agency is **ready** and motivated for change to develop a comprehensive prevention plan.

Domain	Subdomain	Item	Rating
Motivation for Change	Leadership Buy-In	Leadership states change is needed and beneficial.	1.5
Motivation for Change	Stakeholder Buy- In	Stakeholders state change is needed and beneficial.	1.5
Motivation for Change	Collective Commitment to Change	There is shared resolve and commitment for change among Title IV-E agency leadership, other public agencies and community partners.	1.31
Provider Capacity and Capability	Information Sharing and Exchange	Best practices for sharing information is established.	1
Provider Capacity and Capability	Communication Strategy	Title IV-E agencies, other public agencies and community partners have effective processes in place for communication about change and new initiatives.	1.25
Provider Capacity and Capability	Established Meeting Frequency	Meetings (in person, virtual, telephonic) are regularly coordinated.	1.38
Provider Capacity and Capability	Transparent Communication with Cross-Sector Partners	Leaders practice reflective, supportive communication.	1.38
Provider Capacity and Capability	Organizational Stability	There is stability among leadership within Title IV-E agencies, public organizations and community partners, including agency directors, administrators, and program managers.	1.38
Provider Capacity and Capability	Organizational Equity	Organizational culture is inclusive and diverse.	1.5
Provider Capacity and Capability	Feedback Loop	Title IV-E agency staff, other public agencies and community partners have opportunities for involvement in discussions and decisions.	1.13

Provider Capacity and Capability	Adaptability	Title IV-E agencies, public organizations and community partners support innovation and foster a learning organization.	1.5
Provider Capacity and Capability	Shared Values	Leadership within Title IV-E agencies, other public organizations and community partners have shared awareness and are committed to the vision and mission.	1.5
Provider Capacity and Capability	Cross-Sector Partner Investment	Title IV-E agencies, other public organizations and community partners have committed adequate time and resources to the task of implementing a comprehensive prevention plan.	0.88
System Capacity and Capability	History of Cross-Sector Partnerships	History of success, effectiveness, flexibility, openness to new goals/tasks with cross-sector partners.	1.5
System Capacity and Capability	Community Engagement Strategy	Title IV-E agencies, other public organizations and community partners have structures and processes in place to engage tribes, youth, parents and caregivers, those with lived experience, and underserved populations in change initiatives.	1.25
System Capacity and Capability	Community Involvement	Community members from various organizations are encouraged to actively participate in planning, implementing, and evaluating initiatives.	1
System Capacity and Capability	Needs Assessment	A needs assessment has identified the gaps in services and evidence-based practices (EBP's) in the service array to be included in the comprehensive prevention plan (counties may leverage existing assessments or analyses on service array).	0.63
System Capacity and Capability	Implementation Support for CQI	Time and resources are built in for continuous quality improvement (CQI) and evaluation efforts.	1.25
System Capacity and Capability	Data Collection	Title IV-E agencies, other public organizations and community partners have data systems and processes in place to track and monitor the comprehensive prevention plan outputs and outcomes that inform decision-making.	1.13

System Capacity and Capability	Adequate Staffing	Staffing levels support effective functioning and implementation of new programs and practices.	0.63
System Capacity and Capability	Expertise in Data Analysis and Accessibility	Title IV-E agencies, other public organizations and community partners have the internal expertise or ability to access external expertise to collect and analyze data.	1.38
System Capacity and Capability	Infrastructure	Title IV-E agencies, other public organizations and community partners have appropriate resources (e.g. staff, facilities, materials, and technology) to develop a comprehensive prevention plan and begin implementation.	1
Policy Supports	Relationship with Local Governance	Leaders of the Title IV-E agencies, other public organizations and community partners have a positive working relationship with local (city/county) governance body (i.e. Board of Supervisors, City Council, etc.).	1.25
Policy Supports	Data Sharing Agreements	There are data linkage and information sharing agreements among Title IV- E agencies, other public organizations and community partners.	1.25
Policy Supports	Alignment with Current Initiatives	The comprehensive child and family well-being prevention plan supports existing programs and initiatives and aligns with existing county practices.	1.38



Butte County

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