

Families First Prevention Services Comprehensive Prevention Plan



County of San Joaquin
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Documents Submitted:

- CPP (Required)
- Spending Plan (Required)
- Assurances (Required)

The Families First Prevention Services Act (FFPSA) passed Congress and was signed into law in 2018. FFPSA, for the first time, allowed federal Title IV-E funds to be used for child abuse prevention rather than exclusively supporting the foster care system. The focus of the federal program is to provide prevention services that prevent children “at imminent risk” from entering the foster care system.

In 2021, California established its own Families First Prevention Services (FFPS) program by amending the Welfare and Institutions Code (WIC 16585 through 16589). California’s FFPS program adds its own block grant to fund a more comprehensive child maltreatment prevention program in California counties that includes child maltreatment prevention services to the general population, prevention services to those at-risk of abuse or neglect, as well as those at imminent risk of entering the foster care system.

IDENTIFYING CANDIDACY POPULATIONS

San Joaquin County took several steps in evaluating data and stakeholder feedback to determine the priority population for Family First Prevention Services (FFPS).

- In early 2022, San Joaquin County conducted a series of analyses to inform its selection of the target population for the Family First Prevention Services. San Joaquin County reviewed data from Child Welfare Services/Case Management System (CWS/CMS), the California Child Welfare Indicators Project (CCWIP) and SafeMeasures to identify the priority population of those children and youth who are at “imminent risk” of entering foster care for FFPS.
- In February and March 2022, San Joaquin County held a series of four stakeholder engagement meetings via Zoom to examine the data related to those children most vulnerable to entering the child welfare system. The stakeholder group reviewed data for children entering the foster care system in Tables 1-4

Table 1: San Joaquin County Children with Entries – 2019 to 2021 by Age

Age Group	Children with Entries	Entries per 1K Children	Children with Entries	Entries per 1K Children	Children with Entries	Entries per 1K Children
	2019	2019	2020	2020	2021	2021
Under 1	127	13.3	104	10.7	95	9.8
1-2	65	3.2	54	2.8	46	2.4
3-5	69	2.2	61	1.9	61	1.9
0-5 combined	261	4.2	219	3.5	202	3.3
6-10	94	1.7	80	1.4	100	1.8
11-15	130	2.2	101	1.7	115	2.0
16-17	40	1.7	34	1.4	54	2.2
Total	525	2.6	434	2.2	481	2.0

Analysis:

The 0-5 age group has the highest rate of entry of the combined age groups with the children under 1 year of age being at highest risk of all ages.

Table 2: San Joaquin County Children with Entries – 2019 to 2021 by Ethnicity

Ethnic Group	Children with Entries	Entries per 1K Children	Children with Entries	Entries per 1K Children	Children with Entries	Entries per 1K Children
	2019	2019	2020	2020	2021	2021
Black	109	7.6	111	7.8	113	7.1
White	108	2.2	81	1.6	101	1.7
Latino	275	2.8	211	2.2	250	2.2
Asian/Pacific Islander	29	1.1	27	0.86	15	0.48
Native American	4	4.7	5	5.9	2	2.3
Total	525	2.6	434	2.2	481	2.0

Analysis:

Black children entered foster care at a rate of 3+ times of any other ethnicity (except for Native American whose population is relatively small). Latino children entered foster care at the highest number.

Table 3: San Joaquin County Children Currently in Family Reunification by Removal Allegation

Removal Allegation	Number	Percentage of Total
Neglect	289	60.2%
Caretaker Absence	121	25.2%
Physical Abuse	39	8.1%
Emotional Abuse	10	2.1%
Sexual Abuse	21	4.3%
Total	480	100%

Analysis:

Neglect and Caretaker Absence (which is a subset of Neglect) comprise 85% of the child abuse allegations that brought children into foster care.

Table 4: San Joaquin County Children Currently in Family Reunification by Age and Removal Allegation

Removal Allegation	Under 1	1 to 2 years	3 to 5 years	6 to 11 years	11 to 15 years	16-17 years	TOTAL
Neglect	59	57	46	53	53	21	289
Caretaker Absence	10	13	16	27	38	17	121
Physical Abuse	2	0	3	17	12	5	39
Emotional Abuse	0	1	3	3	3	0	10
Sexual Abuse	0	0	4	4	10	3	21
Total	71	71	72	104	116	46	480

Analysis:

While Neglect is consistent throughout the age groups, Caretaker Absence increases as children age (except for 16-17 years old).

In addition, San Joaquin County examined data related to children who did not reunify and are currently in Permanent Placement as well as the original allegation that brought them into care. Table 5 and 6 reflect this data. Data concerning children who re-enter the foster care system, was also considered but over the past two and a half years (Jan. 2018-June 2020), only eight children (out of 201) who were reunified, re-entered into foster care. As this is not a sizable number, this population was not considered a priority population.

Table 5: San Joaquin County Children Currently in Permanent Placement by Age and Ethnicity

Ethnicity	0 to 5 Years	6 to 10 Years	11 to 15 Years	16-17 Years	Total
Black	33	41	54	37	169 (26%)
White	31	20	31	35	126 (19%)
Latino	84	58	115	62	324 (50%)
Asian/Pacific Islander	6	2	4	8	22 (3%)
Native American	4	0	3	0	7 (1%)
Totals	158 (24%)	121 (19%)	207 (32%)	142 (22%)	649

Analysis:

Latino children are the highest population in Permanent Placement. Black children remain in foster care at a higher rate than other ethnicities. The highest number of children in Permanent Placement are 11 to 15-years-old.

Table 6: Allegations that bring San Joaquin County Children into Care and Allegations for Children that Remain in Care

Removal Allegation	
Neglect	60.2%
Caretaker Absence	25.2%
Physical Abuse	8.1%
Emotional Abuse	2.1%
Sexual Abuse	4.3%

Allegation for Children in PP	
Neglect	46%
Caretaker Absence	41%
Physical Abuse	7%
Emotional Abuse	0%
Sexual Abuse	6%

Analysis:

Children who come into foster care for Caretaker Absence are more likely to remain in foster care.

Data from the previous County Self-Assessment (2019) was also reviewed. That assessment indicated that the most at-risk population for entry into foster care are children 0-5 years of age who had higher foster care entries, 4.8 per 1,000 children in the general population, double that of the other age groups (except for 6-10 years age group which is 2.8 per 1,000 children).

Table 7: San Joaquin County Children Foster Care Entry Rates by Age – 2019 System Improvement Plan (SIP)

Age Group	Total Child Population	Children with Entries	Per 1,000 Children
0-5	62,054	299	4.8
6-10	56,988	162	2.8
11-15	57,443	126	2.2
16-17	23,685	49	2.1

Data from the previous County Self-Assessment (2019) also supported the conclusion that while Latino children had the highest number of children entering foster care, Black children entry rates were the most disproportionate to the population.

Table 8: San Joaquin County Children Foster Care Entry Rates by Ethnicity – 2019 System Improvement Plan (SIP)

Ethnic Group	Total Child Population	Children with Entries	Per 1,000 Children
Black	13,777	149	10.8
White	44,067	160	3.6
Latino	104,787	287	2.7
Asian/Pacific Islander	25,251	39	1.5
Native American	571	1	1.8
Multi-Race	11,717	0	0.0

The resulting determinations of children who are at the highest risk of entering foster care, re-entering foster care, or remaining in foster care in San Joaquin County are outlined below:

Table 9: San Joaquin County Children at Highest Risk of Entering, Re-entering, and Remaining in Foster Care

CATEGORY	SIGNIFICANT POPULATION	RATE
Age	Children 0-5 years old enter care at the highest percent	Children 0-5 years old enter foster care at 2 x the rate of children 6-17 years old
Ethnicity	<ul style="list-style-type: none"> Black children enter care at the highest percent. Latino children have the highest number of entries 	<ul style="list-style-type: none"> Black children enter foster care at three times the rate of other ethnicities. Latino children make up 45% of entries into foster care.
Age + Ethnicity	Black children 0-5 years old enter care at the highest %	Black children 0-5 years old enter foster care at 2-3x the rate of other ethnicities
Allegations	The highest percent of allegations are Neglect (including Caretaker Absence)	Eighty-five percent overall
Time in care	<ul style="list-style-type: none"> Black children in placement Children 11-15 years old 	<ul style="list-style-type: none"> Twenty-six percent of children in Permanent Placement are Black children. Thirty-one percent of children in Permanent Placement are age 11-15

SELECTED CANDIDACY POPULATIONS

San Joaquin County believes that the families that would most benefit from the additional support of FFPS are those with children aged 0-5 years, specifically Black and Latino children, and those families with children aged 11-15 years old, who are least likely to reunify after entering foster care.

0 to 5 years

For the families of children in the 0-5 years old age range, it was determined that 76% of the Neglect allegations were due to substance-exposed newborns, parental substance use disorders, domestic violence situations, and unsafe living conditions.

11-15 years

For the families with children in the 11-15 years old age range, Caretaker Absence/Incapacity was due to substance abuse, lack of parenting skills, and mental health issues of parents and children. Current data shows that 321 of the 695 (46%) children in Permanent Placement are currently 11-15 years old or entered Permanent Placement when they were 11-15 years old. This 11-15 years old population may benefit from earlier intervention that would prevent their entry into foster care and thus prevent this age group languishing in permanent foster care.

Pregnant and Parenting Foster Youth

Lastly, as defined by FFPSA, prenatal or postnatal infants and/or children of an otherwise eligible pregnant/parenting foster youth in foster care will also be a focus of FFPS.

Given the requirements for FFPS, San Joaquin County has decided to begin with these priority populations for our initial phase of implementation. However, after some time transitioning our current system to the changes required within FFPS and evaluating how our system is functioning, San Joaquin County intends to explore expanding the priority population. This will allow us to provide additional infrastructure and sustainability to our already strong community prevention efforts and focus on supporting additional families prior to their involvement with the agency.

SERVICE/ASSET MAPPING

San Joaquin County conducted a large stakeholder in-person event to conduct asset mapping, needs assessment, and capacity assessment on June 28, 2022. The event drew over fifty attendees from public and private sector organizations, transition age youth, and interested residents. The process asked participants to identify what resources are available, what is needed to prevent child maltreatment, and what additional resources can reduce children identified as “imminent risk” entering foster care.

Participants were asked to identify individual, institutional, and community-based assets to support a comprehensive child maltreatment prevention plan. Further, the participants were also asked to identify whether each asset would best contribute to community-wide (primary)

prevention efforts, mitigation of conditions for those families at-risk of experiencing child maltreatment (secondary) prevention activities, or prevention services for those families at imminent risk (tertiary) of child maltreatment. Individuals, and institutional and community-based resources, may be capable of delivering a combination of these prevention activities.

Assets Capable of Comprehensive Prevention Services

Participants identified multiple individuals, groups of individuals, and organizations capable of broadly contributing to family well-being and preventing child maltreatment. Teachers, probation officers, doctors, nurses, mental health counselors, law enforcement and medical first responders were each identified by role as contributing positively to reducing child maltreatment and increasing family well-being. Additionally, participants identified local politicians as important resources for comprehensive prevention services. The participants identified several organizations capable of supporting efforts across the entire prevention framework, including Kiwanis Club, Family Ties Drug Treatment, Victor Community Support Services, Safe House, National Alliance on Mental Illness, Parents by Choice, Valley Mountain Regional Center, Family Justice Center, and the Family Resource and Referral Center.

Assets Capable of Partial Prevention Services

Participants identified many other individuals or organizations that can provide one or two parts of a comprehensive prevention plan. School counselors and office staff, Family Promise, Pride Center, Peace Keepers, Wellness Works, Family Promise, Family Works, First 5, Child Abuse Prevention Council, Head Start, Community Partnership for Families, Catholic Charities, the County Office of Education, County Food Bank, Central Valley Housing, Project Room Key, and Reinvent South Stockton were all identified as being able to support primary and secondary prevention services. Peoples Empowerment Center, La Familia, El Concilio twelve step programs, Family Resource Centers, the Human Trafficking Task Force, Women's Center, Uplift Family Services, Sow a Seed, Wayfinder Family Services, Alternative Family Services, and the Continuum of Care service providers were identified by participants as providing important secondary and tertiary prevention services to those at general or at imminent risk of child maltreatment.

Participants also identified seventy individuals and organizations that can support primary prevention efforts, five organizations that can support secondary prevention activities, and ten that can support tertiary prevention activities.

Assets Requiring Additional Evaluation of Prevention Capacity

Participants identified fifteen assets but were not able to assess the prevention focus of those individuals or groups due to inadequate time or lack of direct knowledge of how they might support prevention efforts. There will be additional time later in the comprehensive prevention plan development process to consider the prevention opportunities for these identified assets.

NEEDS ASSESSMENT

Child Welfare

- Children go to Mary Graham Children's Shelter, and some stay longer than 10 days.
- Foster Care System is broken. Lack of available placements between Short-Term Residential Treatment Programs and psychiatric hospitals.
- Need more Therapeutic Foster Homes-- Children placed in STRTP's instead of family home settings.
- San Joaquin Delta Junior College does not have therapy for students. Many Extended Foster Care youth who attend Delta do not have access to services and mental health issues are not addressed.
- Foster Youth have delayed access to mental health care when placed out of county.
- Important level of Neglect cases due to socio-economic conditions and helpful interventions come too late.
- Taking race/ethnicity out of reporting process. Assessments may not be impartial because of race/ethnicity considerations resulting in disproportionate children of color in the child welfare system.

Staffing Shortage

- Results in high caseloads and inconsistent delivery of services to clients in need. Clients needing reliable quality services.
- Not enough staff or resources to help agencies, resulting in services not being available or long waiting lists.

Health Care/Mental Health

- Individuals cannot access quality affordable health/mental health care, resulting in poor physical and mental health.
- Not enough well-trained trauma informed therapists, leading to chronic and generational mental health issues.
- Poor mental health crisis response that is not consistent, resulting in mental health destabilization.

Substance Abuse Disorder Treatment

Not enough treatment centers, dual diagnosis treatment, leading to untreated and generational substance use disorders (SUD.)

Special Needs Children

No support for parents and families with special needs children, (respite, training, etc.) resulting in families with heightened stress and unstable family functioning.

More/Less Help from Systems (CPS, Education, Health etc.)

Systems have regulations, which are red tape barriers to services. Families feel that they cannot access services or are overly monitored and/or labelled.

Education

- Some districts only have 3 hours per day of T-K/Kindergarten. Parents are unable to work or must work split shifts to allow parent to care for children.
- Lack of after school tutoring, resulting in decline in grades and increased parental stress.

- Not enough available before/after school programs resulting in children not being supervised before/after school and parents work schedules being impacted. Increased family stress as a result.
- Not enough school 1:1 support or tutoring, resulting in children not positively experiencing and benefiting from school.
- Lack of regard for education, resulting in apathy, poverty, and dismal outlook on future.

Inter-Agency Communication

Agencies/providers do not collaborate well, resulting in families/individual treatment and services being compartmentalized, and not treated holistically.

Resources

- Internet not available everywhere. Low-income families are limited in educational/employment/recreational activities.
- Insufficient number of libraries. Limits family's educational/employment/recreational activities.

Employment

- Minimum wages and lack of benefits do not allow families to maintain a normal standard of living.
- Businesses do not provide flexible work schedules to allow for parents to attend to children's needs. Need 32-hour work week so parents can provide parental supervision and increased child involvement.
- Need non-discriminatory hiring practices.

Food

Food prices rising. Healthy choices not affordable. Families spending money/food stamps on unhealthy options.

Child Care

- Childcare is expensive. Parents must work long hours or find creative ways to meet childcare needs or quit jobs/school.
- Parents cannot work or children placed in unsafe care.

High Cost of Living

Inflation, low wages mean families cannot afford to meet basic needs.

Housing

- Not enough safe, stable, or affordable housing. Housing costs increases stress on families. Increased homelessness.
- Emergency housing need. Shelters are full, so individuals/families are living on the street.
- Due to homelessness families living in unsafe neighborhoods.

Clothing

Job related clothing is expensive. Low-income individuals/families not able to successfully interview for quality employment.

Affordable Gas

Increased gas prices create financial hardship and isolation.

Unsafe neighborhoods

- Due to violence in community families are isolated. Child-enhancement experiences (parks, libraries, outings) not available.
- Families cannot access resources to enhance family well-being.
- Low crisis response time to crime. Need more neighborhood watch.

Father Advocacy and Support

Fathers excluded from family involvement. Families experience heightened stress and unstable family functioning.

Transportation

Inadequate transportation for families to access, resulting in difficulty getting to work, school, daycare, and services.

Heating/Cooling Programs

Families'/individuals experience severe weather without relief, which can exasperate health conditions.

Acceptance/Understanding

- Lack of understanding and support for families who are struggling economically, resulting in isolation, disconnection, and dismissal.
- There is no equity in the system and individuals/families feel dismissed/suppressed/disconnected.
- Families feel they are not “seen” or included by people in power, leading to disenfranchised individuals and families.
- Families not feeling accepted or supported, resulting in unhealthy familial and community relationships, leading to conflict within family and community.
- Low-income families feel disrespected in everyday interactions. Lack of respect from community leads to lack of connections, self-respect and blaming others.
- Lack of a sense of belonging or community connections, so families are not engaged in being a part of creating community.

Lack of Privacy

Families do not feel secure, when asking for help that their information will not be shared, resulting in families hiding information, resulting in real problems not being addressed or not seeking services at all.

Parenting

- Parents not having information on child development, parenting skills, and school readiness, resulting in children not thriving, reaching potential, increased parental stress, and lack of family connections.
- Parents are not present and engaged in meeting children’s needs.

Family planning

Lack of family planning, leading to families feeling overwhelmed and not enough resources available to families, resulting in economic/parental/childhood stress.

CAPACITY ASSESSMENT

The Capacity Assessment survey conducted with participants at our FFPS Focus Group meeting on June 28, 2022:

- San Joaquin County seems capable of successfully engaging in comprehensive prevention planning, due to identified capacity in:
 - Established meeting frequency.
 - Transparent communication with cross-sector partners, and
 - Shared values.
- San Joaquin County may be able to rely on additional capacity in the following areas, but may require additional resources to do so successfully:
 - Information sharing and exchange.
 - Communication strategy.
 - Organizational stability.
 - Organizational equity.
 - Adaptability.
 - Cross-sector partner investment, and/or
 - Community involvement.
- Due to ambiguous survey results, San Joaquin County may want to further investigate their capacity in the following areas:
 - Feedback loop.
 - History of cross-sector partnerships.
 - Community engagement strategy, and/or
 - Needs assessment.
- San Joaquin County will be most challenged by insufficient capacity, and additional resources will be required in the following areas:
 - Implementation support for CQI.
 - Data collection.
 - Adequate staffing.
 - Expertise in data analytics and accessibility, and
 - Infrastructure.

CURRENT CONDITIONS IMPACTING FAMILIES AND CHILDREN

The stakeholder gathering identified a variety of conditions that negatively impact child well-being and increase the likelihood of child maltreatment. Minimum wage jobs that fail to provide benefits coupled with the lack of access to affordable childcare, the excessive cost of food, the lack of access to healthy nutrition in their local stores, and an inadequate supply of affordable housing is stressing many families in San Joaquin County. These absolute and perceived needs are a source of stress for urban and rural families. Minimum wage jobs may require adult caregivers to seek multiple positions to “make ends meet.” The inadequate supply of childcare, while the adults work multiple jobs, can lead to increased risk of child neglect with siblings providing care for various lengths of time. The stakeholders also identified that poor access to healthy food and access to health care increases the risk of hunger and

illness, which for families living on the edge, often results in missing hours at work and the hourly wage needed to provide the basic necessities.

CURRENT SERVICE ARRAY

San Joaquin County is served by an impressive number of service providers. At the stakeholder event in June 2022, participants identified individuals, institutions, and resident associations that contribute to the social safety net for at-risk families. Participants also identified how their services might prevent child maltreatment and enhance child well-being for the general population, as well as, for those at general risk or those at specific risk of child maltreatment. Child welfare workers consistently see the strong connection between elevated levels of child neglect resulting from the socio-economic conditions. When interventions finally occur, the help may often be too little and too late.

The community and families at risk currently receive services from multiple public and private agencies. The services provided are constructed or tailored to meet one specific area of family needs with modest levels of coordination between service providers. This leads to significant levels of compartmentalized or episodic care and exceptionally low levels of holistic care. Health care systems, mental health care systems especially, are difficult to access because of high patient volumes and limited services for those without insurance or with Medi-Cal.

All public and private service providers are experiencing profound staffing challenges. Insufficient numbers of trained professionals and paraprofessionals are available to meet the needs of residents and service delivery is most often provided well after any crisis that precipitated the request for services. The caseloads for health care and mental health care providers continues to grow because of economic conditions and the aftereffects of the COVID pandemic, and with no relief in sight, is leading to many care providers to leave the field or reduce their hours for their own mental health.

SAN JOAQUIN COUNTY COMPREHENSIVE PREVENTION PLAN

San Joaquin County has identified the following (Table 10) FFPS Comprehensive Prevention Plans (CPP) elements. Based on the available resources, the County has determined that rolling out the CPP over a three-year period will establish favorable financial and programmatic conditions for success of the various prevention services. This *“walk before you run”* strategy will provide additional time to reduce the existing fragmentation of prevention efforts.

Table 10: Outline of CPP Services Roll out by Fiscal Year

	FY2023-24	FY2024-25	FY2025-26
Primary	Directory of Parenting Support Services	<ul style="list-style-type: none"> • Directory of Parenting Support Services • Prevention Services Community Organizing Project 	<ul style="list-style-type: none"> • Directory of Parenting Support Services • Prevention Services Community Organizing Project
Secondary	<ul style="list-style-type: none"> • Motivational Interviewing • Prevention WRAP Services (Starting Q3) 	<ul style="list-style-type: none"> • Motivational Interviewing • Prevention WRAP Services 	<ul style="list-style-type: none"> • Motivational Interviewing • Prevention WRAP Services
Tertiary			Healthy Families America

DESCRIPTIONS OF CPP SERVICE ELEMENTS

Directory of Parenting Support Services

Building on successful resource guides for the County’s Fatherhood Initiative, San Joaquin County has identified a need for a specific *Family Well-Being Support Service Directory*. As a result of the FFPS Needs Assessment and Asset Mapping processes, San Joaquin County identified a need to bring awareness of the diversity of prevention resources available within the County. The directory will be developed as an online resource for healthcare, education, and other social service providers to identify prevention services and methods of access to those prevention services. San Joaquin County will support the needs of areas of the community that historically have been disproportionately impacted by the child welfare system by giving particular attention to include unique providers of neighborhood, language, cultural, and at-risk prevention services.

Prevention Services Community Organizing Project

The *Prevention Services Community Organizing Project* will leverage the identification of prevention services that began through the *Family Well-Being Support Service Directory*. The Community Organizing Project will facilitate the development of intentional cooperative relationships among organizations identified through the Asset Mapping process. The Community Organizing Project will utilize the standard Plan-Do-Check-Act process to address systemic needs.

The *Prevention Services Community Organizing Project* will bring people, associations, and organizations together to address problematic social conditions by analyzing the root causes of family well-being needs, identify and plan collective actions to address the unmet prevention needs, commit to carrying out collective actions as community partners, and analyzing the collective impact of the prevention activities. The County will provide community organizing skill development training that will provide participants with common knowledge, language, and abilities. The County will support the needs of portions of the community that historically have been disproportionately impacted by the child welfare system by giving particular attention

to include unique providers of neighborhood, language, cultural, and at-risk prevention services.

As a purposeful collective effort, organizing requires sound analytical, political, and interactional skills. An important aspect of those skills for professional organizers involves a continuous pattern of systematic planning, "doing", reflecting again (theorizing), and acting strategically to build a group that can achieve its aims. Community organization is rooted in the reform tradition of professional social work and such values as self-determination, self-sufficiency, empowerment, and social justice.

Motivational Interviewing

As a secondary prevention services, the child welfare staff will be trained to use **Motivational Interviewing** strategies and tactics to provide encouragement and identify family needs as they evolve over time. Motivational Interviewing will not be implemented to "model fidelity" for these secondary prevention services. At the secondary prevention level, the child welfare staff will make use of Motivational Interviewing strategies and techniques while assessing child safety and risk to better support families at-risk.

Prevention Wraparound Services

Wraparound follows a strengths-based, needs-driven approach. The intent is to build on individual and family strengths to help families achieve positive goals and improve well-being. Wraparound is also a team-driven process. From the start, a child and family team are formed and works directly with the family as they identify their own needs and strengths. The team develops a service plan that describes specific strategies for meeting the needs identified by the family. The service plan is individualized, with strategies that reflect the child and family's culture and preferences. California Wraparound is intended to allow children to live and grow up in a safe, stable, and permanent family environment. For children and families in the foster care system, the Wraparound process can:

- Enhance strengths by creating a strength-based intervention plan with a family team.
- Promote youth and parent involvement with family voice, choice, and preference.
- Use community-based services.
- Create independence and stability.
- Provide services that fit a child and family's identified needs, culture, and preferences.
- Create one plan to coordinate responses in all life domains, and
- Focus on achieving positive goals.

Healthy Families America

Healthy Families America (HFA) is a home visiting program model designed to work with families who may have histories of trauma, intimate partner violence, mental health issues, and/or substance abuse issues. HFA services are offered voluntarily, intensively, and over the long-term (3 to 5 years after the birth of the baby). Additionally, and with National Office approval, HFA sites may voluntarily enroll families referred from Child Welfare/Children's Protective Services with a child up to 24 months of age, offering services for a minimum of three years after enrollment.

HFA Target Audience

Families who are at-risk for child abuse and neglect and other adverse childhood experiences. Services must be initiated prenatally or within 3 months after the birth of the baby. When referred from child welfare, families may be enrolled with a child up to 24 months old.

HFA Program Components

HFA is theoretically rooted in the belief that early, nurturing relationships are the foundation for life-long, healthy development. Building upon attachment, bio-ecological systems theories, and the tenets of trauma-informed care, interactions between direct service providers and families are relationship-based; designed to promote positive parent-child relationships and healthy attachment; services are strengths-based; family-centered; culturally sensitive; and reflective.

The HFA model is based upon 12 Critical Elements. These Critical Elements are operationalized through a series of standards that provide a solid structure for quality yet offer programs the flexibility to design services specifically to meet the unique needs of families and communities.

HFA Service Impacts

- Child safety: Self-reports of maltreatment
- Child/youth behavioral and emotional functioning
- Child/youth cognitive functions and abilities
- Educational achievement and attainment
- Positive parenting practices
- Parent/caregiver mental or emotional health
- Family functioning

HFA Responsiveness of Services for Families Disproportionally Represented in Child Welfare

HFA has been found to be effective with a wide variety of disproportionately represented families in the child welfare system.

THEORY OF CHANGE/LOGIC MODEL

San Joaquin County has identified and linked the following components of their Comprehensive Prevention Plan Logic Model. The Logic Model will be a valuable tool for:

- Engaging cross-sectors partners in the delivery of prevention services,
- Setting and maintaining service effectiveness over the three-year plan period and
- Provide the CPP Governance Body with the County's Prevention Framework needed to provide policy guidance and support.

Table 11: Outline of County of San Joaquin County CPP Logic Model

FFPS objectives	Improve access to support services	Improve coordination in the delivery of local services	Support alignment of local services to meet local need	Provide culturally appropriate and effective referral pathways
FFPS Goal	Children, young people, and their families have access to appropriate local services that support their health, well-being, and development			
Vision	Keep Them Safe: a shared approach to child health and well-being			
Inputs	State and Federal funding aligned with service demand, FFPS infrastructure, established systems (policies, procedures, and guidelines), human capital (staff with appropriate qualifications and training), networks and partnerships.			
Long term outcomes	Child safety, welfare and well-being concerns are addressed before they escalate to child welfare foster care involvement. Vulnerable and at-risk families receive appropriate support services Vulnerable and at-risk families are supported by an integrated service system			
Short term outcomes	Target population is engaged in the services they require.	Client needs are met collaborative service system.	Better informed service planning and resource decision by government and non-government organizations.	Disproportionately represented clients are engaged with the culturally appropriate services they require.
Outputs	Families are referred to the services they need.	Processes are in place between CWS and community providers, to assist families be engaged with local services.	<ul style="list-style-type: none"> • Protocols for providing formal feedback are in place. • Key issues identified and responses developed. • CWS and CBOs understands client need and service requirements. 	<ul style="list-style-type: none"> • Clients receive culturally competent services. • CWS and CBO Staff attend training Policies are in place.
Activities	<ul style="list-style-type: none"> • Promote awareness and understanding of FFPS. 	<ul style="list-style-type: none"> • Establish and maintain links with local service system. • Promote collaboration 	Identify and feedback gaps and duplication in local services.	<ul style="list-style-type: none"> • Develop knowledge of culturally competent mainstream services.

	<ul style="list-style-type: none"> • Engage clients and assess needs. • Refer families to appropriate services. • Follow-up to ensure families engage. 	<p>within local service networks.</p> <ul style="list-style-type: none"> • Assist clients to navigate service system. 		<ul style="list-style-type: none"> • Provide culturally competent services and refer clients to culturally competent services. • Feedback on availability of culturally safe services to local network.
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SPENDING & SUSTAINABILITY PLAN

Families First Transition Act (FFTA) Grant will be used to engage in prevention and early intervention planning. The FFTA Grant will also support expanding capacity for evidence-based practices and evaluation activities related to the implementation of FFPSA Part I. The State FFPS Program Block Grant (State Block Grant) will be utilized to support primary, secondary, and tertiary prevention and will maximize Title IV-E funding for administrative and training activities. Once CWS-CARES becomes operational, Title IV-E will be leveraged for tertiary prevention services. San Joaquin County will collaborate with Behavioral Health Services, community organizations and other county departments to build partnerships, increasing capacity and maximizing funding sources with other programs.

GOVERNANCE STRUCTURE

The CPP content was developed through a series of stakeholder and focus group meetings conducted over many months. The stakeholder and focus group meetings did include participants from San Joaquin County agencies that serve families and children, local community representatives, caseworkers as well as individuals and families with lived experience. Follow up outreach and subsequent engagement was conducted after each stakeholder and focus group meeting to garner additional participation.

The purpose of San Joaquin County’s Prevention Services Governance Structure is:

- To oversee the development of the CPP and review the plan prior to CDSS Submission:
- To ensure that all required cross-sector collaborative partners will provide meaningful policy guidance and decision making, for: training, implementation, selection of Evidence Based Practices (EBP), fidelity monitoring, and continuous quality improvement for the CPP; and
- To ensure that information is shared between the cross-sector collaborative stakeholders.

The San Joaquin County CPP Governance Structure will include:

- Children’s Services Coordinating Commission
 - The Children’s Services Coordinating Commission was established by the Board of Supervisors in 1986 in compliance with the Welfare and Institution Code Section 18982 – 18982.4: whose primary purpose is to coordinate the community’s efforts to prevent and respond to child abuse.
 - A total of twenty-five members are appointed. Twenty members appointed by the San Joaquin County Children’s Services Coordinating Commission and five members appointed by the San Joaquin County Board of Supervisors. Representatives are from Public Child Welfare Agency, Community-based organizations dealing with children, the Juvenile Probation Department, Mental Health, Medical Services, Education, Law Enforcement, Licensing Agency, District Attorney Office, Coroner, Civic Organization, Religious Community, Community Volunteers, Consumers and five supervisory district representatives. Members are appointed for three years.
 - Include a cross-sector team that has decision-making authority and is tasked with guiding the implementation process, identifying, and addressing barriers, and offering input on key strategies.
 - Ensure equitable practices in the application of foster care prevention services that are trauma in-formed and evidence-based.
 - Address data sharing agreements in place between all agencies and guidance provided for reporting requirements.
- Stakeholders Committee
 - Identify and integrate agencies that have not historically worked together to resolve economic, food and housing insecurity issues for families at risk of foster care, including public health, education with community safety.
 - Ensure that those with lived experience and those disproportionately at risk are included in the process in a trauma-informed manner.
- Implementation Committee
 - Provide input and review both the design and implementation of the local child welfare prevention services program as well as for its ongoing performance.
 - Ensure there are clear feedback loops established with community partners, CBOs, experts with lived experience and similar stakeholders.
- Human Services Agency Executive Team
 - Provides recommendations for best practices to achieve success with prevention strategies across agencies.

CROSS-SECTOR COLLABORATION, PARTNER ENGAGEMENT

Cross-sector partners will be key participants in the Governance Structure described above. The Children’s Services Coordinating Commission will have a standing agenda item on the status of the FFPS Comprehensive Prevention Plan. The Stakeholders Committee will provide that status report while working to integrate a broad cross section of agencies to improve family well-being, reduce risks and intervene when needed.

TRIBAL CONSULTATION AND COLLABORATION

San Joaquin County does not have federally recognized tribes located within the county. However, San Joaquin County has extended ongoing invitations to Native C.O.R.E. (Community Outreach Resource Education) during the process of developing the Comprehensive Prevention Plan. Unfortunately, members of Native CORE did not attend any of the FFPS stakeholder meetings. However, members of Native CORE did attend Father Engagement workgroup meetings and offered their input on FFPS. San Joaquin County continues to work to establish a relationship with Native CORE which includes ongoing engagement.

San Joaquin County's Point of Contact (POC) for Indian Child Welfare Act (ICWA) has an ongoing working relationship with Native CORE and Native Directions/Three Rivers. The POC continues to work with tribal representatives on scheduling focus groups and establishing ongoing quarterly meetings so tribes will have continuing input on various aspects of child welfare, including FFPS.

Tribes have been providing input on the following:

- Father finding and father engagement specific to tribes, and
- Developing and expanding services and supports for Indigenous fathers, and
- Developing and expanding services and supports for Indigenous children to provide active efforts.

INTEGRATED CORE PRACTICE MODEL (ICPM)

San Joaquin County embedded all five elements of the ICPM into the planning and development of the CPP.

- **Foundation:** All culturally appropriate language is conducted in an open, honest, clear, and respectful manner. Communication is transparent and promotes accountability while adhering to professional standards and ethics.
- **Engagement:** Proactive engagement is the responsibility of the agency and provider(s). SJC was proactive in engaging community members and community-based organizations to participate in a focus group exploring FFPS needs and services.
- **Assessment:** Bringing Families Home (engage in initial and ongoing formal and informal safety and risk assessments, trauma assessments, and permanency planning).
- **Teaming:** Ongoing collaborative work in the community with community-based organizations to develop and expand supportive preventative services.
- **Service Planning & Delivery:** Utilization of an integrated FFPS plan that includes evidence-based interventions which will be tracked and evaluated to measure success.
- **Transition:** Facilitate an increased role for the family's network and natural supports to build an ongoing support system that coordinates with the family's formal and informal advocates.

San Joaquin County is focusing on the ICPM as a part of its current System Improvement Plan (SIP) process. The County will be focusing on ICPM as it relates to ICWA during its next SIP process.