

Families First Prevention Services
Comprehensive Prevention Plan



County of Merced
Merced County Human Services Agency

Table of Contents

INTRODUCTION.....	3
IDENTIFYING CANDIDACY POPULATIONS	3
SELECTED CANDIDACY POPULATIONS	7
SERVICE/ASSET MAPPING	8
NEEDS ASSESSMENT	9
CAPACITY ASSESSMENT	10
CURRENT CONDITIONS IMPACTING FAMILIES AND CHILDREN.....	11
CURRENT SERVICE ARRAY	11
MERCED COUNTY COMPREHENSIVE PREVENTION PLAN.....	12
DESCRIPTIONS OF CPP SERVICE ELEMENTS.....	12
THEORY OF CHANGE/LOGIC MODEL	15
SPENDING & SUSTAINABILITY PLAN	16
GOVERNANCE STRUCTURE	17
CROSS-SECTOR COLLABORATION, PARTNER ENGAGEMENT	18
TRIBAL CONSULTATION AND COLLABORATION	18
INTEGRATED CORE PRACTICE MODEL (ICPM)	18
AGENCY SIGNATURES.....	19
APPENDICIES:	
Assurances Template-Appendix A	
Local Spending Plan Template- Appendix B	

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

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

- In early 2023, Merced County conducted a series of analyses to inform its selection of the target population for the Family First Prevention Services. Merced 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 April 2023, the County held a series of stakeholder engagement and focus group meetings in-person and 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: Merced 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	57	14.2	57	13.9	32	10.7
1-2	45	M*	37	M*	36	4.5
3-5	52	4.2	57	4.2	54	4.3
0-5 combined	154	M*	151	M*	122	6.5
6-10	81	3.7	73	3.4	62	2.8
11-15	81	3.5	54	2.4	74	3.2
16-17	M*	M*	M*	M*	23	2.4
Total	316	4.2	278	3.6	281	3.7

*Data could not be extracted, typically due to data entry errors in CWS/CMS.

Analysis:

The year-over-year rate per one thousand has decreased, with the exceptions of 3–5-year-old children and 11–15-year-old children in 2021. Additionally, although the number of entries for 3–5-year-olds is fewer in 2021, the rate per thousand increased and may correlate with the demographic shifts in California overall. The combined 0–5-year-old entries have the highest number for all three years, however the rate per thousand is highest for under 1 years old.

Table 2: Merced 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	27	13.5	22	9.9	34	14.7
White	91	5.1	53	2.9	43	2.4
Latino	201	3.8	198	3.9	208	4.0
Asian/Pacific Islander	12	M*	11	M*	10	M*
Native American	0	0	0	0	0	0
Total	331	4.2	284	3.6	295	3.7

*Data could not be extracted, typically due to data entry errors in CWS/CMS.

Analysis:

Latino children comprise the majority of entries overall, but the rate per thousand is highest for Black children at more than double Whites or Latinos (some years triple). The rate per thousand for Latino children stays consistent, but Black children saw a sharp increase in 2021 and even surpassed the pre-COVID entries in 2019.

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

Removal Allegation	Number	% of Total	Parent Mental Health Indicator	Parent Drug Use Indicator
Neglect	231	58.2%	72	101
Caretaker Absence	109	27.5%	34	21
Physical Abuse	25	6.3%	8	5
Emotional Abuse	20	5.0%	7	10
Sexual Abuse	12	3.0%	3	3
Total	397	100%	124	146

Analysis:

A total of 287 parents are involved, and the Mental Health and Drug Use columns may represent the same parent in multiple categories.

Table 4: Merced County Children Currently in Family Reunification by Age and 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	15	23	45	64	61	23	231
Caretaker Absence	10	11	22	30	25	11	109
Physical Abuse	1	4	2	8	8	2	25
Emotional Abuse	0	0	0	8	6	6	20
Sexual Abuse	0	0	0	3	7	2	12
Total	26	38	69	113	107	44	397

Analysis:

6-10-year-olds comprise the majority of children currently in Family Reunification, with 11-15-year-olds closely behind.

In addition, Merced 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.

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

	0-5 Years	6 - 10 Years	11 - 15 Years	16-17 Years	Total Number	% in PP
Black	10	4	9	1	24	10.5%
White	39	17	39	29	124	54.1%
Latino	36	21	13	7	77	33.6%
Asian/Pacific Islander	3			1	4	1.8%
Native American						
Totals	88	42	62	38	229	

Analysis:

White children comprise more than half of those in PP, even though the majority of entries from 2019-2021 were Latino children. 0–5-year-old children are the largest age range. This point-in-time data is from February 23, 2023.

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

Removal Allegation	#
Caretaker Absence	67
Neglect	153
Physical Abuse	10
Emotional Abuse	12
Sexual abuse	5

Allegations Children in PP	#
Caretaker Absence	46
Neglect	77
Physical Abuse	5
Emotional Abuse	6
Sexual abuse	8

Analysis:

Of the 229 children in PP, 198 have more than one reason for removal.

Table 7: Merced County Child Welfare Removals by City and Zip Code – January to December 2022

Removal City	Removal Zip Code	# of Removals	Total Population*	Child Population*	% of child Population
Atwater	95301	60	31,978	9,050	.66%
Delhi	95315	9	10,755	3,162	.28%
Dos Palos	93620	23	5,775	1,392	1.65%
Gustine	95322	14	6,091	1,169	1.20%
Hilmar	95324	4	5,164	1,570	.25%
Livingston	95334	17	14,528	4,199	.40%
Los Banos	93635	56	46,398	15,822	.35%
Merced	95340, 95341, 95348	215	89,308	26,971	.80%
Planada	95365	2	4,164	-	-
Winton	95388	26	11,709	3,782	.69%

*Population data based on 2020 Census and July 2021/2022 estimates from census.gov

Analysis:

Dos Palos has both a higher number of removals and % of child population, even though it is the second smallest population size in the county. 70% of the population in Dos Palos identifies as Latino, however the majority of removals were White children. Additionally, Winton and Atwater have a population difference of nearly 20,000, but their % of child population are essentially the same.

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 Merced County are outlined in the table below:

Table 8: Merced County Children at Highest Risk of Entering, Re-entering, and Remaining in Foster Care

CATEGORY	SIGNIFICANT POPULATION	RATE
Age	<ul style="list-style-type: none"> • Children under one years old enter care at the highest rate per thousand • Children 0-5-years-old have the highest number of entries 	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 disproportionate representation in care • Latino children have the highest number in care 	<ul style="list-style-type: none"> • Black children enter foster care at 3x the rate of other ethnicities. • Latino children make up 45% of entries into foster care.
Allegations	The highest percent of allegations are neglect (including Caretaker Absence)	85% overall

SELECTED CANDIDACY POPULATIONS

Merced 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 families.

0 to 5 years

For the families of children in the 0-5 years old age range, it was determined that 80% of the allegations were due to neglect which is often attributed to substance-exposed newborns, parental substance use disorders, domestic violence situations, and unsafe living conditions.

Black and Latino Families

Black children enter foster care at 3x the rate of other ethnicities.

Latino children make up 45% of entries into 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, Merced County has decided to begin with these priority populations for the initial phase of implementation. However, after some time transitioning the current system to the changes required within FFPS and evaluating how the system is functioning, Merced County intends to explore expanding the priority population to address the needs of families of children ages 11-15 years old. This will allow us to provide additional infrastructure and sustainability to the already strong community prevention efforts and focus on supporting additional families prior to their involvement with the agency.

SERVICE/ASSET MAPPING

Merced County conducted a large stakeholder in-person event to conduct asset mapping, needs assessment, and capacity assessment on April 14, 2023. The event drew over 40 attendees from public and private sector organizations, parents with lived experience, resource parents, 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. Additionally, the County conducted focus groups with educators and youth with lived experience of the foster care system.

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. Among the services and programs identified by the participants in the Stakeholder meeting were:

- Family Urgent Response System (FURS) which will respond to the home and talk (de-escalate) with children and assess them to see if they need further assistance.
- Parent Café which provides family resources for those with in-custody youth, including parents’ skill development on “how to be a good parent” role modeling.
- Family Resource Center which provides classes for parents on topics such as substance use and parenting with behavioral challenges.
- Public Health Department which offers programs for parents looking for career development and parenting skills training.
- Home visiting program for high-risk moms and infants, supports families with 0-5-year-olds.

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. Among the services and programs identified by the participants in the Stakeholder meeting were:

- Challenge Resource Center which serves families with children with disabilities and supports advocacy for youth and families involved in Individualized Education Programs (IEP.)
- Healthy House which helps with translation, hotel vouchers for the homeless, and other services and resources for pregnant moms.
- Financial literacy programs.

- Adolescent Family Life program for pregnant or parenting young parents, twice a month, provides resources for postpartum health and mental health.
- School-based prevention services for students and their families including the Youth Accountability Board, School Attendance Review Boards (SARB), Teen Outreach, The Cube wellness center which provides transitional age youth (6-21 y/o) laundry services, supplies, and mental health resources.
- Central Valley Regional Center, First 5 and Women, Infant, Child (WIC) nutrition services.
- Community Action Agency.
- All Dads Matter.
- All Moms Matter.
- Aspiranet—home visiting services.

Assets Requiring Additional Evaluation of Prevention Capacity

Participants identified a small number of additional 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

- Peer support from those with lived experiences,
- Parent Partners to support prevention efforts, and
- Lack of support system—child/ families—expressed as neglect.

Health Care/Mental Health

- Lack of health insurance for undocumented individuals,
- Lack of health professionals,
- Lack of parental mental health resources,
- Infant mental health providers, and
- Eating disorder programs.

Substance Use Disorder (SUD) Treatment

- Lack of RTC SUD programs for fathers that accepts children,
- Lack of adolescent SUD services, including a need for AA/NA meetings, and
- Lack of inpatient treatment for adolescents.

Special Needs Children

Respite care providers for families with special needs children

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

- More marketing of services and programs,
- Basic navigation of the systems-how to enter the continuum of care,

- Family navigator (peer support, case manager) to keep connected to services, bringing services to the client, someone to keep track of services who is not directly involved in crisis,
- More programs for geographical areas with higher needs,
- More recreation and afterschool programs, and
- Greater access to services for non-native English-speaking residents.
- More collaboration with Community Health Clinics

Child Care

Lack of affordable childcare.

High Cost of Living

Economic needs.

Housing

Lack of affordable housing, limits access to extra-curricular activities for families.

Parenting

Teen parenting programs.

CAPACITY ASSESSMENT

The Capacity Assessment survey conducted with participants at the County's FFPS Stakeholder meeting on April 12, 2023:

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

- Implementation support for Continuous Quality Improvement (CQI),
- Data collection,
- Adequate staffing, 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 high 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 Merced 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. In addition, substance use and the impacts of crime were identified as having negative impacts on families.

CURRENT SERVICE ARRAY

Merced County is served by an impressive number of service providers. At the stakeholder event in April 2023, 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 wellbeing 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 very 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.

MERCED COUNTY COMPREHENSIVE PREVENTION PLAN

Merced County has identified the following (Table 9) 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 9: Outline of CPP Services Roll out by Fiscal Year

	FY2023-24	FY2024-25	FY2025-26
Primary	<ul style="list-style-type: none"> • Parent Family Navigator • Family Wellbeing Conference • Expand access to community based behavioral health programs 	<ul style="list-style-type: none"> • Parent Family Navigator • Family Wellbeing Conference • Expand access to community based behavioral health programs 	<ul style="list-style-type: none"> • Parent Family Navigator • Family Wellbeing Conference • Expand access to community based behavioral health programs
Secondary	<ul style="list-style-type: none"> • Parent Family Navigator • Motivational Interviewing • Additional resources to meet the needs of those suffering from “substance use disorder” (SUD). • Expand existing parent support programs 	<ul style="list-style-type: none"> • Parent Family Navigator • Motivational Interviewing • Additional resources to meet the needs of those suffering from “substance use disorder” (SUD). • expand existing parent support programs 	<ul style="list-style-type: none"> • Parent Family Navigator • Motivational Interviewing • Additional resources to meet the needs of those suffering from “substance use disorder” (SUD). • Expand existing parent support programs
Tertiary			<ul style="list-style-type: none"> • Motivational Interviewing • Parents as Teachers

DESCRIPTIONS OF CPP SERVICE ELEMENTS

Primary Prevention Services

Identifying benefits and services you might qualify for can be difficult. Understanding where to go, complex applications and timelines to apply for assistance can be confusing and overwhelming. A **Parent Family Navigator** would help families identify and collect information

regarding social services and other community resources that are available. A Navigator would provide information and support to improve access to these programs and services. A Navigator serves as a one-stop information and referral resource to the many programs available in the community.

Parent Family Navigator would (or could):

- Improve access to programs and services.
- Identify community resources to remove barriers to successful employment.
- Helps coordinate multiple services.
- Assists in developing an action plan, clearly detailing steps and timelines to follow.
- Assists with applications.
- Attends appointments to help enable better communication.
- Provides referrals to community agencies.
- Acts as an advocate.

Merced County also plans to hold a Family Wellbeing Conference to increase public awareness of available community services and to provide education forums on parenting, mental health and substance abuse disorder issues. This forum will provide opportunities for service providers and families to engage and establish connection and trust to help communities become more open and receptive to discussing and understanding issues that impact families. This engagement and education will lead to positive outcomes for families and the wider Merced community.

FFPS funds will be utilized to expand access to community based behavioral health programs to increase the number of families who participate in programs that build and enhance protective factors that promote optimal development and reduce ACES.

Secondary Prevention Services

Parent Family Navigators will also be used to support families as they access services to increase child well-being and family functioning. As a secondary prevention services, the Navigators 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 Navigators will make use of the Adverse Childhood Experiences (ACES) survey assessment in addition to the Structured Decision Making (SDM) safety and risk assessment tools to better understand additional family needs and risk profile.

The Navigators will be housed at the County’s Family Resource Centers (FRCs) to place them closer to families and the services. The Navigators will work through school sites. Public Health and Behavioral Health staff working at these school sites will also have access to the services provided by the Navigators.

Additionally, Merced County will be developing additional resources to meet the needs of those suffering from “substance use disorder” (SUD.) These secondary SUD prevention services may include:

- Alcoholic/Narcotics Anonymous groups for adolescents,
- Recovery Assistance for Teens (RAFT) SUD Services for adolescents, and
- Teen-Parent support groups.

FFPS services will also expand existing parent support programs.

All Dad's Matter (ADM) recognizes the positive impact of a caring, involved and nurturing father to a child's healthy growth and development. ADM program support healthy children, families and communities by providing fatherhood support groups, workshops and a Resource Center where dads can receive one on one support with accessing services, navigating systems or meet one on one with a member of our team. FFPS will support expanding this program with an emphasis on engaging teen fathers and expectant fathers.

All Mom's Matter (AMM) is a program that provides support groups and workshops for new mothers. AMM also utilizes a one-on-one approach to match veteran mothers with new moms who are expecting their first baby to help new moms navigate motherhood's daily life activities and by providing support, encouragement and resources for moms. This program will also be expanded through FFPS to focus on teen mothers, particularly pregnant and parenting foster youth. FFPS will provide tangible resources and infant-mental health services through AMM.

Tertiary Prevention Services

Parents as Teachers (PAT) and Motivational Interviewing (MI) will be implemented to "model fidelity" for the delivery of tertiary prevention services to the identified families with children from the candidacy population and at imminent risk of entering the foster care system. Both PAT and MI have found to be effective with Black, Latino and Native American families, particularly those impacted by SUD, providing positive parenting practices and family social functioning.

Parents as Teachers (PAT) is a home-visiting parent education program that teaches new parents skills intended to promote positive child development and prevent child maltreatment. PAT aims to increase parent knowledge of early childhood development, improve parenting practices, promote early detection of developmental delays and health issues, prevent child abuse and neglect, and increase school readiness and success.

PAT targets new parents in high-risk environments such as teen parents, parents with low educational attainment, history of substance abuse in the family, and chronic health conditions which have endangered the well-being of their children.

The PAT model includes home visits, supportive group connections, child health and developmental screenings, and community resource networking. PAT is designed so that it can be delivered to families with risk factors based on child safety and well-being.

Motivational Interviewing (MI) is a method of counseling clients designed to promote behavior change and improve physiological, psychological, and lifestyle outcomes. MI aims to identify ambivalence for change and increase motivation by helping clients progress through five stages

of change: pre-contemplation, contemplation, preparation, action, and maintenance. It aims to do this by encouraging clients to consider their personal goals and how their current behaviors may compete with attainment of those goals.

MI uses clinical strategies to help clients identify reasons to change their behavior and reinforce that behavior change is possible. These clinical strategies include the use of open-ended questions and reflective listening. MI can be used to promote behavior change with a range of target populations and for a variety of problem areas.

THEORY OF CHANGE/LOGIC MODEL

Merced 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 10: Outline of County of Merced 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, wellbeing, and development			
Vision	Keep Them Safe: a shared approach to child health and wellbeing			
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 wellbeing 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 connected to the	Processes are in place between CWS and	<ul style="list-style-type: none"> • Protocols for providing formal 	<ul style="list-style-type: none"> • Clients receive culturally

	services they need.	community providers, to assist families be engaged with local services.	feedback are in place. <ul style="list-style-type: none"> • Key issues identified and responses developed. • CWS and CBOs understands client need and service requirements. 	competent services. <ul style="list-style-type: none"> • CWS and CBO Staff attend training Policies are in place.
Activities	<ul style="list-style-type: none"> • Promote awareness and understanding of FFPS. • Engage clients and assess needs. • Refer families to appropriate services. • Follow-up to ensure families engage. 	<ul style="list-style-type: none"> • Establish and maintain links with local service system. • Promote collaboration within local service networks. • Assist clients to navigate service system. 	Identify and feedback gaps and duplication in local services.	<ul style="list-style-type: none"> • Develop knowledge of culturally competent mainstream services. • Provide culturally competent services and refer clients to culturally competent services. • Feedback on availability of culturally safe services to local network.

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 directly 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. Merced County will collaborate with community organizations and other county departments to build partnerships, increasing capacity and maximizing funding sources with other programs. The required Local Spending Plan (attached) provides complete details of the financial sources and uses.

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 Merced 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 Merced 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 Merced County CPP Governance Structure will include:

- Interdepartmental Leadership Team (AB 2083)
 - 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.
 - Consider opportunities to deliver prevention services to other priority populations such as families with children 11-15 years old.
- 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.
 - Identify key prevention-success metrics and opportunities to communicate those metrics to stakeholders, service providers and the community.
- HSA 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 Interagency Leadership Team 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

Merced County does not have federally recognized tribes. However, Merced County has extended ongoing invitations Indian Child Welfare Act (ICWA) points of contact. Merced County's Point of Contact (POC) for Indian Child Welfare Act (ICWA) has an ongoing working relationship with multiple tribes. 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.


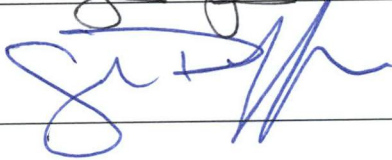
INTEGRATED CORE PRACTICE MODEL (ICPM)

Merced 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 in an effort 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 in order to measure success.
- **Transition:** Facilitate an increased role for the family's network and natural supports in order to build an ongoing support system that coordinates with the family's formal and informal advocates.

Cross training of ICPM will be developed and provided to the Community Based Organizations that may be providing primary and secondary prevention services to support the effectiveness of practice and impacts on outcomes.

MERCED COUNTY AGENCY SIGNATURES

Title IV-E Agency Information	Merced County Human Services Agency
Submitting Authority	Child Welfare Services
Contact Name	Jami Johnson, MSW
Contact Email	Jami.Johnson@countyofmerced.com
Signature of Authorized Child Welfare Services Representative	
Signature of Authorized Juvenile Probation Representative	



HUMAN SERVICES AGENCY

Yvonna Brown, EdD, MSW
Director

2115 W. Wardrobe Avenue
(209) 385-3000
(209) 354-2518 Fax
www.co.merced.ca.us

Mailing Address
P.O. Box 112
Merced, CA 95341-0112

Equal Opportunity
Employer

ATTACHMENT B- ASSURANCES TEMPLATE

Family First Prevention Services (FFPS) Program Assurances

County of Merced

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

Title IV-E Prevention Program Reporting

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

Child Safety Monitoring

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

Workforce Development and Training

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

Trauma-Informed Service Delivery

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

Model Fidelity for Evidence-Based Programs and Continuous Quality Improvement

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

Equitable and Culturally Responsive Services and Supports

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

Coordination with Local Mental Health

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

Signatures


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



Signature of Authorized CWS Representative

7/31/23

Date



Signature of Authorized Probation Representative

7/31/2023

Date

DATE SUBMITTED: 10/20/20		COUNTY: Nevada		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		FUNDING SOURCES		COSTS		
Activity/Service Type	Activity/Service Name	Fiscal Agent	Grantee/Contractor Name	Allocation Type/Frame	Of State Block Grant Child	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Domestic	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame	Of State Block Grant Child Welfare	Of State Block Grant Prenatal	FFTA	Non-Federal Time Frame
<p>Prevention:</p> <p>FFPS Program Planning Capacity and readiness assessment, needs mapping and needs assessment for child/adolescent and independence of the child/grandchildren</p> <p>Other Administrative Cost</p>																																								
<p>Development of Plan:</p> <p>Develop and disseminate and train for the CDP</p> <p>Eligibility Determination</p> <p>Assess and Provide Measurement Training and technical development for CDP</p> <p>Program Development/Family Working Conference</p> <p>Technical Costs/Methodical trainments</p> <p>Other Administrative Cost</p>																																								
<p>Total from Planning and Development</p>																																								