

SANTA CLARA COUNTY RESPONSE TO CPP QUESTIONS

GOVERNANCE STRUCTURE

1. It is not clear if caseworkers, individuals and families with lived experience, and local community members were consulted in the development of the CPP. Were these groups consulted in the development of the CPP?

Santa Clara County developed the CPP through extensive collaboration and partnership with many stakeholders, including social workers, youth, families, community members, and system partners. These engagement strategies began in the earliest stages when cross-system stakeholders were convened to define a county-wide vision of prevention and continue to be the practice now for implementing the CPP. As mentioned on pages 11 and 19 of our plan, our planning team engaged over 100 experts from agency staff (including case workers and clinicians), community-based organizations, community partners, and advocacy groups comprised of individuals with lived experience (i.e., foster and probation youth, relative and non-relative caregivers and biological parents). The primary goal of these engagement sessions was to identify gaps, solicit feedback on needed programming, and define systems change priorities, such as addressing mindset shifts needed to engage families as partners in their case planning. Engagement efforts with case workers included presentations at bureau meetings, two rounds of staff surveys, and 1-on-1 interviews with subject matter experts. Engagement efforts with youth or parents with lived experience included presentations to Youth Leadership Council composed of youth with lived experience, and advocacy groups such as Children of Color and the Multi-Cultural Community Team, which both include representation from parents with lived experience and other community members. Individuals providing feedback were invited to join monthly committee meetings held once a month. Organized advocacy groups also received additional presentations on planning progress and were engaged to provide feedback during these presentations. These groups were also given an opportunity to provide comments on the final draft of the plan before its submission to the state.

In addition, in a parallel process, DFCS and Probation were building and solidifying the infrastructure and leadership for AB2083, the Integrated Children and Youth System of Care. As part of the infrastructure, the Integrated Leadership Team (ILT) has established an Executive Advisory Team (EAC), which includes, as part of the decision-making role, two parent and youth advisory members with lived experience. Our plan also details this information, with the infrastructure decision-making described on page 15.

A complete list of engaged individuals or groups is attached; in addition to the drafted logic model that was discussed with stakeholders and incorporated short and long-term outcome as part of the prevention plan, and with in-depth discussion of priority needs and population that helped inform the CPP

2. What efforts were made by the County to encourage the involvement during the CPP development of the non-participating representation, and what were the barriers to engaging them?

Santa Clara County developed several strategies to ensure involvement and intentionally invite stakeholders into the development of the CPP across the county, as detailed in our answer above. There

is cross-sector representation in our existing monthly oversight committee meetings. For stakeholders with limited ability to participate in committee meetings or other forums, we have developed two newsletters released quarterly: one for community members and one for agency stakeholders or contracted providers. These newsletters include a call to action to be part of the work and contact information for those wishing to provide input outside formal meeting structures. In addition, there is an extensive engagement plan to continue building on existing relations and trust to build out resources and supports that are equitable for the community needs (See attached plan).

CROSS-SECTOR COLLABORATION, PARTNER ENGAGEMENT

1. How will cross sector partners be consulted for ongoing monitoring and continuous improvement of program?

The Family First Initiative has been embedded within the County's Children and Youth System of Care, whose infrastructure was developed to promote the program's sustainability, monitoring and continuous improvement. In addition, the existing workgroups referenced on pages 18-19 of the County's CPP, which are already composed of cross-sector partners, continue to be convened monthly to inform and monitor our plan's implementation. Ultimate oversight and governance of the plan being held by our County's System of Care team, including cross-sector representation from required partners per the AB2083 MOU requirements. The meeting structures for the various teams, for both Family First Initiative and Children & Youth System of Care, have been strategically structured to be able to continuously consult, monitor, and identify areas of improvement and discuss recommended action steps.

2. What will be the process to review and incorporate cross-sector partner input for continuous improvement?

The CQI process is under development by our evaluation workgroup, with additional support from staff within the CQI Division and technical support from contracted consultants. The workgroup is developing a comprehensive evaluation plan, which includes meaningful engagement levels, data and team knowledge to support CQI process, as well as setting a schedule for reporting progress on process and outcomes measures and convening stakeholders to review progress. System of Care stakeholders are expected to receive quarterly progress reports. The newsletters are expected to be shared with the community, and cross-system stakeholders will be released following each quarterly report summarizing progress and soliciting feedback.

3. Did the county cross sector partners include representation from the following required agencies/groups/individuals: Family Resource Centers, CAPCs, Tribes, **both** parents and youth with lived experience?

Yes: FRCs participated in both Family First planning committees and on the System of Care Executive Advisory Committee and were invited to provide written feedback to the draft plan prior to submission. CAPC members were invited to committee meetings, received multiple presentations at their meetings and annual retreats, and were invited to provide written feedback on the draft plan prior to submission.

For tribes, see responses in the Tribal Collaboration section below.

Parents and youth with lived experience were consulted using the engagement methods described in the cross-sector collaboration and partner engagement section. Their input was centered on the County's final programming decisions.

4. What were the barriers with engaging the required cross-sector partners who did not participate?

One challenge was that parents or youth with lived experience were not able to consistently attend committee meetings, including staff members with lived experience. However, they were consulted using the engagement methods described in the cross-sector collaboration and partner engagement section described above. Their input was centered in the county's final programming decisions of the CPP.

TRIBAL COLLABORATION

1. The plan mentions that DFCS has contacted some federally recognized tribes. Were these tribes invited to participate in the development of the CPP? Were any tribes invited to participate in the development of the CPP?
 - For some historical context, the 2010 census reported that 26,569 American Indian/Alaska Natives live in Santa Clara County, representing over 180 tribes. The Indian Relocation Act of 1956 encouraged American Indians living on reservations to relocate to seven major urban cities. San Jose was one of four relocation sites in California. Our plan states that we're committed to reaching our tribes, regardless of federal recognition. Our plan states that our local tribes do not have federal recognition. Engagement efforts are focused on our local tribe (the Muwekma Ohlone tribe), and other tribes specific to the Santa Clara Valley, including the Ohlone, Yokuts, and Miwok bands. Additional tribes present in this area include Tamien, Alson, Ritocsi, Chaloctaca, Matalan, Pala, Auxentac, Tomoi, Chiputas, Pitac, Unijaima, Chitactac, and Santa Ysabel. People of Chumash and Rumsen lineage live in this area as well. Also present are many tribes indigenous to Mexico and Central America, such as Aztec, Mayan, and Zapotec communities.
 - Engagement with the tribes has focused on relationship-building and surfacing tribal priorities. Two meetings have already been held with tribal representatives, constructed primarily as listening sessions for county agencies to build relationships and understand tribal needs. While these listening sessions inform the planning and implementation of our County's prevention strategies, they were not specifically focused on the development of the System of Care or the Comprehensive Prevention Plan. Those topics are on the agenda for future meetings (scheduled for September 2023). However, the County felt that initiating the engagement by framing the conversation around the development of the CPP or System of Care would be centering the compliance needs, undermining our relationship-compliance needs and undermining our relationship-building efforts. We felt that a good faith engagement required an initial focus on the tribal agenda, not the County's agenda. DFCS is particularly sensitive to honoring the historical trauma our tribal communities have endured, many of whom first came to the region as part of the Indian Relocation Act of 1956. Given these recent histories of government oppression, the County is being careful to

center the needs and agendas of our tribes in our joint meetings. A third meeting is scheduled to focus on opportunities around Families First implementation and our Children Youth System of Care efforts.

2. Which Tribes participated in providing input into the CPP?

Tribal representatives at initial meetings have had affiliation with the following tribes: Apache, Zapotec, Navajo, Purepecha, Yaqui, Mexica, Paiute, Muwekma Ohlone, Lakota, and Mayan.

3. If there was no Tribal representation, what efforts were made by the County to encourage Tribal representation?

As mentioned in the plan, DFCS has two dedicated staff to support ICWA implementation as well as develop community relations with all tribes in the County. They have launched a stakeholder group of tribal representatives and key stakeholders that support the Native American community. Some of the agency participants are also connected to their tribe and culture. Some of the members' tribal affiliations are as follows: Apache, Zapotec, Navajo, Purepecha, Yaqui, Mexica, Paiute, Muwekma Ohlone, Lakota, and Mayan.

The agencies involved provide Native/culturally specific programming - Powwow Dance & Drum classes, substance abuse curriculums, parenting workshops, youth workforce development programs for native children, cultural brokers programs, and much more. The agencies include: the Indian Health Center of Santa Clara Valley, Washoe Native TANF, ConXion to Community, Native Families Outreach and engagement w/ County Behavioral Health, Community Agency for Resources Advocacy and Services (CARAS), National Compadres Network, and Youth Law. All these agencies serve individuals who identify as Native/Indigenous peoples – some who are enrolled members of tribes, and others who are not.

DFCS has messaged to stakeholders that the communities will be nimble, and that the plan can be adjusted accordingly.

4. What input did the Tribes provide to the County?

The tribal representatives asked to be part of the joint work rather than just providing input on the project. At the two meetings held earlier in 2023, tribal representatives brainstormed recommendations on system change needs. Fall 2023 sessions will prioritize these recommendations. These official recommendations will only be released after the group consensus. Input will be sought on an ongoing basis, if needed, we will modify our prevention plan as needed in response to this ongoing dialogue.

5. What was the outcome of the tribe's input into the plan?

ICWA representatives were among the stakeholders advocating for emphasizing culturally and linguistically appropriate prevention services in the County's Comprehensive Prevention Plan, resulting in the commitment of state block grant funds to develop these services. Santa Clara County continues to engage these representatives and tribal leaders in discussions regarding CPP content, updates, and changes to comprehensive prevention policies, practices, and programs. DFCS's ICWA team, also members of tribal communities, are currently invited to the Oversight Committee meetings where they have represented tribal interests. As our relationships with tribal communities develop, tribal representatives can attend directly or elect to continue using the ICWA team as a formal conduit and

communication feedback loop. Information about prevention plan implementation is also distributed through our quarterly newsletter, which includes Native American stakeholders.

INTEGRATED CORE PRACTICE MODEL (ICPM)

The County stated under the Children and Youth System of Care MOU, all system partners have agreed to mutually use the principles, values, and practices of the ICPM as guidance and direction in developing shared values, core components, and standards of practice in deliver of timely, effective, collaborative and integrated services for children, youth and families. However, the following items are unclear:

1. How did the County incorporate ICPM in the development of the CPP?

A core strategy in our theory of change is changing agency culture to work differently with families. Our logic model further elaborates this strategy, which includes multiple activities to change agency culture through training, policy development, and program enhancements. It also highlights ensuring that services are strengths-based and collaborative and use a teaming structure that engages families as partners. The ICPM is the blueprint for carrying out this work, which this County has started with support from Richard Knecht, consultant, who launched a 2-day leadership development series as part of the Children and Youth System of Care work.

2. What strategies will the county use to incorporate ICPM with their partners and Tribes?

The County is beginning to roll out the ICPM training for all agency staff and cross-system partners. This is being done in collaboration with all system partners to ensure that there is a commitment to common values, practices, and behaviors when working with children, youth, and families. Training sessions are being designed to allow for cross-pollination and sharing of knowledge amongst all system partners. The County has already completed two training sessions for leaders and executives in person. This foundational work gave leaders the opportunity to discuss the best strategies to launch and implement the ICPM across the County. It was the beginning of intentional conversations on how practices and behaviors across the system will look to ensure a more effective and efficient system of care for children and youth. System partners are in the process of implementing and embedding ICPM within their organizations and rolling out training for all staff and stakeholder partners. Trainings will be ongoing and made available and expected to continue throughout the calendar year 2024.

3. What strategies will the county use to incorporate ICPM in their elected prevention services?

The core values of ICPM (5 key practices: Engagement and Team Preparation, Assessment, Planning, and Plan Delivery, Monitoring and Adapting, and Transitions) will be integrated into the RFPs for new program selection to support the CPP. ICPM provides practical guidance and direction to system partners in delivering timely, effective, and collaborative services to children, youth, and families. It is practical to ensure that all system partners and community providers align with the shared values, core components, standards of practice, and expected practice behaviors to ensure equity and effective support. Existing prevention programs currently adhere to the same values of the Child and Family Practice Model, parallel to ICPM. Providers are expected to incorporate practice behaviors into client engagement, case planning, and case management. In addition, DFCS is currently in the process of expanding the Interagency Placement team to a Multi-Disciplinary team that will support the integration and more intentional coordination of services for children and youth that are system-involved. In order

to create a foundation for a more integrated system of support that is more preventative rather than reactionary, ICPM training will provide that common language and foundation to continue to move towards this vision.

THEORY OF CHANGE

1. It is unclear what are the activities and intended outcomes for **children and youth**?

Our Theory of Change and logic model is focused on improving protective factors for families and creating conditions where families can thrive, thereby improving the relationship of youth with their families and ensuring they receive the support needed to remain with their families.

One of the core strategies of our Theory of Change is making service access more relevant to family needs. This includes programming for impacted youth, such as concrete supports that ensure safety (like temporary housing assistance, safe sleeping arrangements, etc.). Some activities we are emphasizing is the home-visiting programs for younger children that strengthen their familial bonds and encourage development in the early years. We are also looking at other activities that will address the needs of the priority population identified in the CPP, and this includes increasing behavioral health support for older children, particularly those struggling with substance use.

SPENDING PLAN/SUSTAINABILITY

1. How will Title IV-E prevention funding sources be used?

We expect the following programs to draw down on Title IV-E prevention funding sources when California is ready to begin claiming these funds. These programs were already present in Santa Clara County before developing our Comprehensive Prevention Plan. As our needs assessment did not suggest these programs needed the support of state block grant funds to expand or maintain services, they are not emphasized in our plan. Still, we do expect them to draw down on Title IV-E prevention funding eventually:

- Multi-systemic Therapy
- Parent-Child Interaction Therapy
- Functional Family Therapy
- Brief Strategic Family Therapy
- Nurse-Family Partnership

Additionally, we are using state block grant funds to launch or expand several programs. The table below details these programs; we expect to leverage Title IV-E funding.

Program	Title IV-E funding potential
Culturally specific Family Strengthening Programs	Uncertain – if the community supports Familias Unidas or Strong African American Families, then yes. However, the community was not initially receptive to these programs and may advocate for programs not yet in the clearinghouse.

Home Visiting Programs (Parent Child+ and Homebuilders)	Likely – Homebuilders is already in the clearinghouse as a well-supported practice. ParentChild+ is in the California clearinghouse and will likely be in the federal clearinghouse by 2026.
Residential Placement Options for Fathers	Maybe – Depends on whether the provider is using evidence-based substance use treatments that can be billed to Title IV-E prevention sources. This is likely given the prevalence of EBPs already used locally for substance use treatment services, but we’re too early in the process to be certain.
Concrete Support Programs	Uncertain – these programs are not yet in the clearinghouse, but the evidence base supporting concrete supports is growing rapidly.
Motivational Interviewing	Likely – MI is already widely used for both Substance Use Treatment and Cross-Cutting Case Management. We’ll be expanding training using state block grant funds to expand usage and improve model fidelity.

2. Has the County identified any barriers to ensure sustainability?

Potential barriers:

- Community advocates to launch programs (particularly cultural programs) that aren’t in the evidence-based clearinghouse. In that case, we may need to balance community desires with identifying long-term funding sources that don’t have requirements linked to the EBP clearinghouse. Our plan emphasizes programs in the clearinghouse or will likely be there by 2026. Still, we have left some flexibility to allow the community to determine the “best fit” cultural programming, which is not limited to EBPs.
- Many of the programs highlighted in our plan benefit from braided funding streams. While this makes them resilient in the event of agency-level budget shifts, it does imply that they’ll need to retain broad-based support to persist.