

**Alameda County  
Comprehensive Prevention Plan  
(FFPS)**

**July 31, 2023**



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## **INTRODUCTION**

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The federal Family First Prevention Services Act (FFPSA) was enacted under Public Law 115-123 in 2018. Among its many components, it creates a prevention services program that allows states the option to access uncapped Title IV-E federal financial participation for the provision of specific evidence-based mental health, substance use, and in-home services to children at imminent risk of entry into foster care, their parents or kin caregivers, and pregnant or parenting youth in foster care. This includes kinship caregivers of children who are not placed by a Title IV-E agency and are qualified for prevention services. The intent of this legislation is to increase the availability and early access to quality prevention services for children, parents, and kin caregivers to help children remain at home while simultaneously reducing the use of foster care.

These Title IV-E programs are a foundational component of the larger comprehensive prevention planning for California's Family First Prevention Services (FFPS) program. All County Letter 22-23 describes the process for county child welfare and probation departments to develop and submit their Comprehensive Prevention Plans to address primary, secondary, and tertiary prevention and intervention strategies and services that support the ability of parents and families to provide safe, stable, and nurturing environments for their children.

Alameda County has a lengthy legacy of prevention efforts and collaboration across the public and private sector on both the Child Welfare Services (CWS) and Probation side going back several decades, and most notably starting in 2007. Alameda County was a participant in the Title IV-E Waiver Demonstration Project from October 1, 2007 through September 30, 2019. Alameda County participated in two projects: the first from 2007-2014, the second from 2014-2019.

### **Title IV-E Waiver History: Child Welfare Services**

For CWS, the Title IV-E waiver was utilized to reduce the number of children entering foster care by: increasing the availability of early intervention/prevention strategies; increase the percentage of children placed in relative homes and in turn reduce congregate care placements; increase the percentage of children who are reunified safely, permanently, and timely and thus reduce the percentage of children who re-enter foster care; increase the percent of timely adoptions and guardianships; and, enhance services for emancipating youth. These efforts were realized with interventions such as Safety Organized Practice, Evidenced-Based parenting programs such as Triple-P, and services for Commercially & Sexually Exploited Children (CSEC). One of the byproducts of these goals and interventions over time was a significant reduction in all foster care entries, but especially in entries of African American children entering care.

Given the success of the demonstration project and seeing actual positive changes in outcomes for children and families as well as reducing the disproportionality, Alameda

County is looking forward to the many opportunities the FFPSA offers to continue and expand its collective prevention services and to deepen the partnerships within the catchment communities, Tribes and other partners.

In 2020, Alameda Department of Child and Family Services, in collaboration with the local Child Abuse Prevention Council, created the Strong Family Alliance (SFA) at a time when the community needed support during times of isolation, fear and uncertainty. The SFA is made up of a 12-member coalition of agencies which is part of the county's Child Abuse Prevention Council. The SFA providers participate in quarterly meetings where they are able to collaborate with one another on best practices, challenges and ways in which to provide better services to the community.

The SFA provides a county-wide child abuse awareness campaign and utilizes a 24-hour Parenting Stress Helpline as the link to referrals to Child Abuse Prevention, Intervention and Treatment services in Alameda County. The goal is to provide all parents and caregivers easy access to vital services and promote the Strengthening Families Protective Factors.

The Department of Child and Family Services (DCFS) has also recognized the need to keep racial equity, inclusion and justice in the forefront of case work practice and has embarked on a training series for all child welfare staff under the Equity and Inclusion Fellowship. The Equity and Inclusion Fellowship is an 8-module series designed to help participants identify organizational and interpersonal behaviors that perpetuate oppression, exclusion, and continued disparities in child welfare. Participants learn about the historical context of race and racism and its implication for child welfare practice. Twenty percent of the CWS staff have been through the fellowship to date and another cohort will be starting in August 2023.

#### **Title IV-E Waiver History: Probation**

For Probation, the Title IV-E waiver was utilized to expand and build support services focused on improving system changes that impact youth who are at risk of removal, and their families, while achieving the following goals: reduce the number of youth in out-of-home placements; provide the least restrictive level of placement when out-of-home placement is necessary; and promote family preservation and family reunification strategies to reduce the number of out-of-home placements by expanding the use of Wraparound and Collaborative Courts). Title IV-E Waiver dollars were used to enhance services through staffing, collaborative partnerships and operational development.

Several strategies continue to be utilized to achieve these goals and include Screening for Out-of-Home Services (SOS), and transitional services from detention and out-of-home placement. Additionally, other efforts include increased family engagement through the completion of thorough social histories that include results from detention and criminogenic risk/needs assessments for the purposes of identifying prevention services and developing individualized supervision case plans to prevent youth from

escalating into out-of-home care. As a planned strategy to reduce the number of youth in group home placements, ACPD implemented the use of models that increase family engagement and enhance the family's voice as a means of developing stronger supervision case plans and to increase utilization of alternative, in-home placements. Strategies aimed at increasing the number of youth placed in a least restrictive setting include the use of foster home placements in lieu of group home placement with additional therapeutic services.

The Delinquency Prevention Network (DPN), created nearly thirty years ago, is a collaborative partnership of community-based organizations and city government agencies, who provide prevention services and programs to youth ages 8-21 who are system-involved, or at risk of becoming system-involved. The Alameda County Crisis Receiving Home is also connected to the DPN.

The DPN agencies are categorized as a Youth Service Center or a Local Service Center, depending on the services they provide. The 10 Youth Service Centers provide trauma-informed therapeutic counseling, case management, diversion, crisis intervention (in coordination with the Crisis Receiving Home) and truancy mediation services. Youth Service Centers are located throughout the county and serve youth that reside or attend school in their local community. The 7 Local Service Centers provide specialized service and programs in one or more of the following categories: Diversion, Life Skills, Civic and Social Engagement, Restorative Justice, and Mentoring. Local Service Centers can serve youth living in any part of the county.

In addition to these formal networks of prevention partners through CWS and Probation, Behavioral Health has also been providing support and funding prevention assistance to children, youth and families in the county. These services include African American Family Support Group, Black Men Speak, and Parent Voices of Oakland. The Mental Health Association of Alameda County has sponsored an African American Family Support Group since the 1990s. This support group helps African American families talk, learn about, and cope with mental health conditions and/or substance abuse in their families.

Black Men Speak, which has been funded by Behavioral Health, helps men of color understand through storytelling what it is like to be an African American man or a Man of Color with mental health and substance abuse issues living in an urban community. In addition, they provide resources, mentoring, peer support, and employment and training sources.

Parent Voices of Oakland (PVO) is a parent-led grassroots organization that advocates for affordable, accessible, quality child-care. PVO organizes and empowers families with the highest need to build effective campaigns toward economic and educational justice.

This CPP is an articulation of what Alameda County envisions, as it builds upon its Title IV-E legacy, continuing its public-private partnership through a “no wrong door” approach with community-based organizations. The vision for this legacy is a three-phase approach which looks to first train all providers on Motivational Interviewing, then develop and sustain community pathways, and finally, look at special populations of focus who may need additional prevention services.

Probation has also made race, equity and diversity issues a part of their department and provides an all-staff training titled “Diversity, Equity, and Inclusion: Race Work”. In addition Probation hosts a monthly meeting with justice partners and community activists called RED: Racial Equity, Diversity.

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**CONTACT INFORMATION**

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DocuSigned by:

*Karyn Tribble*

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Signature of Authorized  
Behavioral Health Representative  
Karyn Tribble, Director, Alameda County Behavioral Health



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## **ASSURANCES**

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- A. A description of the coordination with the local Mental Health Plan to ensure adherence to federal requirements that Title IV-E remains the payer of last resort.

**Locally there is a strong coordination and collaboration between the Behavioral Health Department, Probation Department and Department of Children and Family Services (DCFS). Leaders and staff from these agencies have been actively involved in developing the Comprehensive Prevention Plan and meet monthly to discuss collaborative efforts.**

**All of the departments understand that under FFPSA, Title IV-E is the payor of last resort.**

- B. Plans for meeting the workforce and training requirements established under the state plan.

**Alameda County will participate in all three tiers of the state's training series and will work with the state to ensure that the county's Training Unit is included in curriculum development, Training for Trainer sessions, and given access to e-Learnings and curriculum to upload to the county's Learning Management System. This will allow the county to facilitate training for its own staff. Training for community agencies will be coordinated as described in the state's training plan.**

**In addition, local community prevention providers will be included in Motivational Interviewing (MI) training and training for trainer sessions. Contracts with community providers will include an expectation that staff will remain in compliance with the certification standards and ensuring all new staff are trained in MI.**

- C. A description of how counties will ensure that all EBPs, whether delivered via contracted entity or by local Title IV-E agency staff, will adhere to model fidelity protocols.

**Alameda County has a long history of implementing Evidence-Based Practices (EBPs) and monitoring model fidelity. With the Title IV-E waiver, Alameda strengthened its use of EBPs and has significant infrastructure for training, data collection, and fidelity monitoring. Three of the EBPs that are included in California's Five-Year Prevention Plan are currently being provided by community-based organizations (CBOs) or county departments in Alameda County which include Nurse Family Partnership (NFP), Healthy Families America (HFA), and Motivational Interviewing.**

- D. Counties that contract with CBOs for services will also describe the process for how safety monitoring and periodic risk assessments will be overseen. Agencies must include language within any service contracts that describes this process to ensure that roles and responsibilities are clear.

**Alameda County system partners utilize a variety of assessment tools and practices such as: Structured Decision Making (SDM) tools, Child and Adolescent Needs and Strengths (CANS), Katie A. Screening, Youth Level of Service/Case Management Inventory (YLS/CMI), Safety Organized Practice (SOP) principles, in applicable programs, and agree to share those assessment outcomes and processes to facilitate care coordination and reduce youth and family impact.**

**DCFS will work with system partners to co-develop a risk assessment and monitoring process, using the above referenced tools, and will include language in service contracts describing the roles and responsibilities of partner agencies and county department staff.**

**DCFS and Probation provide directly and through contracted providers an array of prevention services at all levels, and will train all staff on Motivational Interviewing (MI) which will be delivered to all children, youth and families.**

**As claiming for IV-E services becomes available, Alameda County will explore developing community pathways through which services can be delivered through the network of community-based organizations in the county.**

- E. Assurances of all other requirements under the state Title IV-E Prevention Program Plan approved by the federal Administration for Children and Families (ACF).

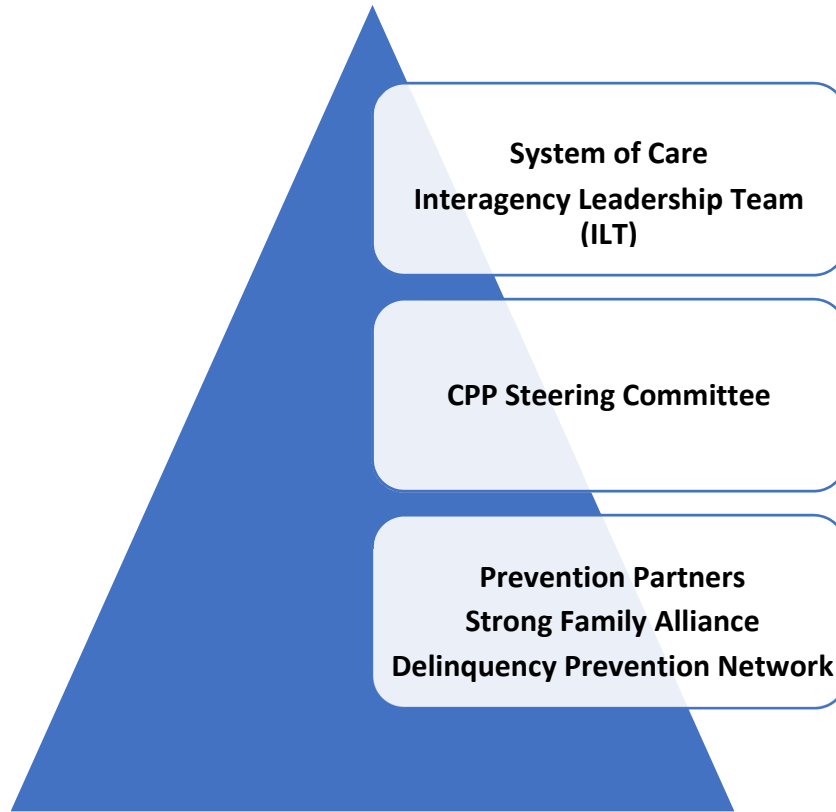
**In addition to following through with the above-mentioned assurances, Alameda County will follow requirements as outlined for Title IV-E Prevention Program Plan. For reference, please refer to page 50 for the signed FAMILY FIRST PREVENTION SERVICES (FFPS) PROGRAM ASSURANCES.**

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## GOVERNANCE STRUCTURE

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Alameda's CPP governance structure is made up of three coordinated bodies.



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As a result of Assembly Bill 2083, the Department of Children and Family Services, Probation, Behavioral Health, the County Office of Education and its Regional Center partner, collaborated in a shared design, delivery, and management of services to children, youth, and families in Alameda County, and developed a Memorandum of Understanding (MOU) to further the interdepartmental collaboration required by AB 2083.

The goal of this collaboration is to address systemic barriers to the traditional provision of interagency services. It is the intent of the agency partners to utilize coordinated case planning for clients and maintain an administrative team with collaborative authority over the interrelated child welfare, juvenile justice, education and behavioral health children's services. It is the intent of these system partners to fully support the structure and processes and to provide the framework that will guide their operations and the activities, decisions, and direction of each of their employees regarding children, youth, and family programming. The Interagency Leadership Team, described in its MOU, is best suited to provide governance, oversight, and approval for any funding and activities planned for the CPP in Alameda County and is the first level of responsibility.

The second level of the governance structure is the CPP Steering Committee which is made up of county leadership staff and support from the Casey Family Programs. This team is responsible for understanding the project timelines and requirements, executing the vision of the Interagency Leadership Team (ILT) Team, and developing and driving the county plan/timeline for development of the CPP. The Steering Committee identifies resource needs along the way, engages the Prevention Partners Team in identifying needs and gaps of services, securing those resources, develops work products outside of meetings to move the work forward, and understands the alignment with the AB 2083 System of Care work. The Steering Committee carries information and recommendations from the prevention partners for consideration to the ILT members. The Steering Committee began meeting weekly in May 2023 and has been actively working on the CPP with a broad cohort of prevention partners.

The third level of the governance structure is the Prevention Partners which is made of county department staff, CAPC members and community-based organizations from throughout Alameda County that provides coordination and support for the provider network. Building on its legacy of partnership under Title IV-E, these agencies have aligned in support of a robust conversation about prevention work in Alameda County and are looking forward to more engagement and inclusion as the CPP work continues in order to fully support all the components of the CPP.

All required partners are represented throughout the CPP governance structure.

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## **CROSS-SECTOR COLLABORATION, PARTNER ENGAGEMENT**

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Alameda County's involvement in the Title IV-E waiver demonstration project meant that cross-sector collaboration for the purposes of prevention service delivery has been occurring in earnest for many years. Some of these partnerships are even older than that, and were part of the vanguard of this type of community engagement, which centers the voice of those with lived experience. Two shining examples of this are the Parent Engagement Program and the Youth Advocate Programs. These programs are among the oldest programs in the state, and served as a model for the development of such programs in other jurisdictions. The inclusion of parent and youth voices started in 2000, as we implemented Family to Family. DCFS consulted heavily with California Youth Connection (CYC) as well as organizations like Parents United, who provided guidance on who to implement a sustained youth and parent voice in all of our operational planning moving forward. Through these programs, DCFS has been in strategic collaboration with parents and youth who have lived experience with the child welfare system since the early 2000s.

The Parent Engagement Program—or “PEP” Program as it is known—was established in Alameda County in 2003. The intent is to provide birth parents involved with child welfare with parent advocacy, education and support. Its unique approach engages birth parents through the use of Parent Advocates—specially trained individuals who have successfully navigated the child welfare experience and reunified with their children. In short: individuals who have *lived it* and now are sharing the wealth of their experience with other parents in need of guidance and support. One other benefit of this program has been the service of Parent Advocates on workgroups and implementation teams to inform the development of policies and procedures. In so doing, Parent Advocates have helped to improve the quality of practice, and supported the success of families involved in child welfare services. They do this through:

- Attending Child and Family Team meetings where an Emergency Removal or Considered Removal is discussed
- Working intensively with parents to increase their engagement and participation in case plan activities
- Facilitating CHATs (Communicating History and Transitions) and help maintain connections between parents and children while in out of home care
- Sharing insight and understanding about their own personal experiences that may help the parents be successful in their own reunification program
- Providing support in accessing referrals given by the CWW
- Informing the Agency's practices and policies, and
- Providing in-house consultation to all CWWs looking for assistance with parent engagement.

The Youth Advocate Program (YAP) began in Alameda County around 2006 and is a three-year fellowship program made up of former foster youth, ages 18-25 committed to bringing about positive changes to the Alameda County child welfare system. The fellowship is a full-time job for the Youth Advocates, under the supervision and support at West Coast Children's Clinic. They work in collaboration with the Department to improve services, experiences, and outcomes for youth in foster care by including the voice and perspective of current and former foster and probation youth. This involves direct and indirect advocacy, policy input, and training, in collaboration with DCFS. YAP trains and supports current and former foster and probation youth through this fellowship program that develops their skills in advocacy, engagement, outreach, policy development, and provides experiences that furthers their professional development.

In partnership with Alameda County DCFS, WestCoast Children's Clinic also provides other professional development activities, employment training and on-the-job experience within the context of the work performed for Alameda County DCFS.

The Youth Advocate Fellow fulfills their function through:

1. Participating in Child and Family Team meetings
2. Providing perspectives and feedback on policies through sub-committee participation
3. Training Child Welfare Workers and other partners on the Youth perspective and Youth voice

Both the PEP and YAP programs were amongst the first of their kind in the state and have been fully integrated into the activities of the DCFS in better serving the community for nearly two decades.

The CPP planning process provided the opportunity to enhance and expand these and relationships that have been growing for nearly 20 years. The Alameda County CPP Steering Committee and ILT are composed of many county departments and other stakeholders. Leadership began this iteration of the work through a series of informal engagements beginning in the summer of 2022 and culminating in stakeholder meetings that occurred in the spring of 2023. These stakeholder meetings were held in-person and via remote engagement, to hear about the needs and perspectives of its partners and the community at large, and to share the vision of FFPSA. Many of the required partners for cross-sector collaboration are already included on the CPP Steering Committee, and Prevention Team. These agencies and groups are poised to participate in the ongoing Continuous Quality Improvement (CQI) processes which will support CPP implementation.

For the first year the cross-sector collaborative will meet monthly to guide implementation of MI across providers, and then to inform strategies to develop the Community Pathway. The frequency of this meeting may decrease to quarterly after full implementation of the CPP, but the cross-sector collaborative will make that decision in the future. Data collection will include qualitative feedback from stakeholders in addition

to quantitative data around MI as an intervention for Alameda’s identified Candidates. This information will be reviewed quarterly by the Steering Committee and then provided to the ILT for further guidance around next steps. If the identified strategies do not have the intended outcome, the ILT will accept recommendations from the Steering Committee and be responsible for directing next steps.

The following required partners are included in those bodies referenced:

- Child Abuse Prevention Council (CAPC)
- Department of Children and Families
- Probation Department
- Behavioral Health
- Tribal Representation (No Federally Recognized Tribe in Alameda)
- Office of Education
- Community-Based Service Providers
- Family Resource Centers
- Parents with lived experience
- Youth with lived experience

**Stakeholder Outreach and Engagement**

A series of events was hosted by the county in May and June 2023, in which among other processes, a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis was conducted with over 50 participants from various community agencies, youth and parents, county departments, school districts, and related healthcare providers. These events provided a window through which the county departments could better understand what was working well, what areas needed continued work, what the opportunities were and what threats might arise under CPP. The following table highlights the SWOT analysis.

<p>Strengths</p> <ul style="list-style-type: none"> <li>● Great partner relationships</li> <li>● Accessibility to CWS staff</li> <li>● Large county systems work with CBOs</li> <li>● Coordinated Service Teams in schools</li> <li>● Family Path</li> <li>● Differential Response provider-program working well with reducing re-referral of families</li> <li>● A lot of services in county</li> <li>● Strength-based initiatives</li> <li>● CWS image has improved in county</li> <li>● BH expansion of services</li> <li>● Prevention-focused county</li> </ul>	<p>Opportunities</p> <ul style="list-style-type: none"> <li>● Coordination</li> <li>● Navigators</li> <li>● No wrong door</li> <li>● Braiding of funds</li> <li>● CalAIM</li> <li>● Strategies that deal with poverty</li> <li>● Admin support for CBOs</li> <li>● Parent/peer support models</li> <li>● Funding for cultural programs</li> <li>● Preterm Birth Initiative</li> <li>● C4ES Pilot Program in District 5</li> <li>● Convening and networking for partners</li> <li>● Neighborhood Ready for school grant</li> </ul>
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	<ul style="list-style-type: none"> <li>● Workforce Development Pipeline, which includes succession planning</li> <li>● Parent Cafes</li> <li>● Parity for lived experience in workforce development</li> <li>● SEED Program</li> <li>● Audience countywide for MI training</li> <li>● Marketing of services</li> <li>● Shared mindset of prevention</li> <li>● More and easier pathways before CWS/probation involvement</li> <li>● More substance abuse prevention services</li> <li>● Regular check-ins as prevention partners</li> </ul>
<p><b>Weakness</b></p> <ul style="list-style-type: none"> <li>● CBOs feeling siloed</li> <li>● Lack of coordination</li> <li>● Lack of communication</li> <li>● Burden families with too many providers/staff</li> <li>● Slow turnaround with providers once referral is made</li> <li>● Disparities in services</li> <li>● Limited linguistic capabilities</li> <li>● Under-resourced grants which don't meet the basic needs of families</li> <li>● Everyone is stretched thin with funding</li> <li>● Gatekeeping of funding is not family friendly</li> <li>● High staff turnover</li> <li>● Cross-sector staffing shortages</li> <li>● DPN has to come through probation</li> <li>● Lack of services in jail</li> <li>● Not enough services for families with teens</li> <li>● Lack of knowledge of services at county level</li> </ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>● Political climate</li> <li>● Stigma</li> <li>● Inclusivity of services</li> <li>● Over-policing instead of prevention</li> <li>● Funding that is diverted</li> <li>● EBPs are mostly MH focused and not about concrete services</li> </ul>

These CPP stakeholder events provided a validation of prior prevention-focused stakeholder meetings, convened by the Child Abuse Prevention Council in the summer of 2022, which effectively solicited feedback regarding the support, development, and execution of county child abuse and neglect prevention efforts. Themes from those 2022 conversations were similar to the May and June stakeholder sessions and



reflected sentiments not just from those sessions, but also from years of cross-sector dialogue and collaboration. Those themes included needing more awareness and coordination of prevention services between prevention providing agencies, more funding flexibility, peer support or navigators, more Mental Health/Substance Use Disorder (MH/SUD) services, more affordable housing options and other concrete support, and more long-term support and assistance for families.

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## **TRIBAL CONSULTATION AND COLLABORATION**

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Though there are no federally recognized American Indian tribes in the county, Alameda County works closely with local organizations serving Native Americans living in our urban communities to be inclusive of all tribal citizens and Native Americans who, through forced relocation, feel strong cultural connection but do not yet have tribal citizenship, that reside in the county and that services are culturally appropriate to people identifying with Native American ancestry. The Bay Area Collaborative of American Indian Resources (BACAIR) was formed to provide a more structured way to grow collaborative relationships between county child welfare agencies and the agencies serving the urban Native population.

BACAIR, established in approximately 2006, is a gathering of Native American agency, state, and county representatives that practice within a framework of respect, wellness, cultural affirmation, healing and restoration for American Indian/Alaska Native families residing in the greater Bay Area. BACAIR promotes culturally appropriate responsiveness; strengthens permanent connections; informs policy and practice; honors government to government relations; provides guidance through governmental and agency systems; and facilitates awareness and access to resources for American Indian/Alaska Native families through collaboration, advocacy, engagement and education.

BACAIR is comprised of Native American, state and county agency representatives within the San Francisco Bay Area. Membership and participation is encouraged by all agencies that serve American Indian/Alaska Native children and families in the greater Bay Area. Some of the organizations who belong to BACAIR include American Indian Child Resource Center (AICRC), Native American Health Center, Inter-Tribal Friendship House, Washoe TANF, the CDSS Office of Tribal Affairs, Casey Family Programs, Judicial Counsel of California's Tribal Affairs unit, and local county child welfare agencies. Many of these community organizations serve families across the Bay Area including Alameda, Contra Costa, Santa Clara, San Mateo and San Francisco Counties. Members of BACAIR have been consulted about the CPP for both San Francisco and Alameda Counties.

It should be noted that these organizations deliver invaluable services to families across multiple jurisdictions. As such, their broad range of services and staffing resources limit their ability to participate in individual county meetings. In deference to their bandwidth to partner with multiple jurisdictions, we acknowledge that their participation can happen meaningfully in ways other than formal meetings hosted by Alameda County. Recently, it was agreed upon at the June 2023 BACAIR meeting, that all counties participating in BACAIR would share their CPP and implementation and progress at the BACAIR table, solicit feedback about effectiveness, and worries about continued gaps. Alameda County staff attending BACAIR meetings will then share this feedback with the Steering Committee to inform next steps. In addition to formal settings, Alameda County staff have regular informal communication with members of BACAIR and have cultivated

robust relationships resulting in more organic, likely family-specific, opportunities to discuss the impact of the CPP, all of which will also be shared with the Steering Committee. To highlight the strength of these partnerships and their role in the community we share a couple of specific examples of just two of the BACAIR partners' work.

The AICRC is an Indian led, Indian serving, and 501(c)3 non-profit community service organization focusing on American Indian foster care, mental health, education, and cultural protective factors. AICRC was founded in 1974 and is an established leading organization in American Indian youth services and delivering best-practice programs for positive cultural identity and belonging. AICRC envisions an empowered multi-tribal American Indian community where American Indian youth and families thrive in a healthy environment with access to needed resources. AICRC believes families will demonstrate resilience, health, and balance through secure and/or affordable housing. AICRC seeks guidance from an elder's council for its wisdom to influence programming. It seeks a broadly distributed set of assets, resources and collaborations that respond to needs and reinforce community and a sense of belonging. AICRC's youth programs continue to develop resilient youth who have a positive strong sense of self through culturally relevant education and multi-disciplinary opportunities for success that will provide leadership for future generations. AICRC maintains a culture of inclusiveness, practices common core values that foster identity as American Indian peoples, reinforces a sense of belonging & encourages individual connection to respective tribes. AICRC has a pre-existing contract with Alameda County to provide community advocacy for families with Native American ancestry very early in their contact with the child welfare agency at the first Child and Family Team meeting even before court involvement, to ensure that cultural and tribal connections are made and to connect families with providers in the community that may be of assistance in their specific situation. In a recent family situation, children who were tribal citizens could not live with either parents due to their instability, so were living with their grandmother, who is also a citizen of the tribe. AICRC was able to help prevent deeper penetration into the child welfare system by supporting the grandmother in pursuing guardianship. The case manager at the AICRC consulted with the Emergency Response Child Welfare Worker, in addition to the Alameda County staff at the BACAIR table to better understand their options and support the family more effectively.

Another partner at the BACAIR table is the Native American Health Center. In addition to their health clinic, Parent Education and Fatherhood Circle, they have a long standing Home Visiting program to serve Native children at risk. Embedded in their practice is to staff this program with individuals with lived experience. One Home Visitor recently shared at the BACAIR table about the pride she has when rendering the type of aid she had previously received, as she supports and advocates for other families.

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## ***INTEGRATED CORE PRACTICE MODEL (ICPM)***

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Alameda County's leaders, including its community partners, place high value in a commitment to meaningful use of the Integrated Core Practice Model (ICPM). This begins at the leadership level and permeates the department's practices in ways that support the work directly with families, youth and children. While DCFS has in recent years trained and oriented to the California Welfare Core Practice Model, a commitment to include all System of Care partners in CPP planning and implementation invites consideration of the ICPM as the county CPP guiding source. Historically, the county's partnerships have reflected the ICPM's principles, values and practices, in its early implementation of Child and Family Teaming and Family Group Decision Making.

As a component of implementing the Comprehensive Prevention Plan, the county will apply available cross-training resources to share the ICPM framework and expectations with prevention plan partners and support the integration of the ICPM. Doing so in a well-planned and strategic manner will support access and timeliness to care, and further enhance engagement with families in order to assess their needs and candidacy, the management of family prevention plans, and the delivery of prevention services with families.

ICPM is supported by and aligned with existing practice guidance used in Alameda County, including Safety Organized Practice, trauma-informed courts and other youth justice practices, and the person-centered planning that is the hallmark of the community's approach. For more than two decades, Alameda's key child abuse partners, led by A Better Way, YEP and West Coast Children's Clinic, have supported parent partnership, youth advocacy and training, all anchored in a family-centered empowerment frame. Building on this history of evidenced informed practice, implementing ICPM's leadership and practice behaviors across systems will provide staff at all levels with the essential principles and professional behaviors that lead to strong relationships with each other and with children, youth and families. ICPM based practice centers family voice, supports open and transparent conversations, and fosters an authentic team approach.

For Alameda's CPP work, values, principles, leadership, and practice behaviors have been foundational to the development of the plan and will continue to be a point of emphasis in all interactions and partnerships, levels and agencies. During the next phase of CPP implementation, the ICPM's leadership behaviors will be incorporated into interactions with our community partners, internal staff, cross-system partners, Tribal leaders, parents, and youth with lived expertise.

Once ICPM standard curricula are available, the objective is for direct family and child level interactions to consistently incorporate ICPM practice and leadership behaviors, to authentically engage and elicit family and support network expertise and voice, and to partner across systems to continue to build strong relationships and empower youth and

families. The AB 2083 Interagency Leadership Team (ILT) will further prioritize the implementation of ICPM across the county’s System of Care work and within the next year, this will include how to build and sustain the training, to keep the workforce grounded in the practice and principles of ICPM, as the hallmark of essential teaming success.

ICPM’s service elements and leadership and practice, as found in the California Children and Youth Integrated Practice Model, will inform Alameda’s work is outlined as follows (Extrapolated from the state’s pending 2023 ICPM update):

<b>ICPM Element</b>	<b>Organizational and Practice Behaviors</b>
<b>Engagement</b>	<ul style="list-style-type: none"> <li>● Engage in open, honest, timely collaboration and accountability with all stakeholders participating in implementation to gain input and share information.</li> <li>● Expect all team members to be accountable for what they say and do within planning meetings.</li> <li>● Lead with principles and practices that are trauma informed and justice/equity centered.</li> <li>● Engage in open, honest, clear, and respectful communication with families seeking assistance and receiving prevention services.</li> <li>● Support communication with families in the method they prefer and provide engagement or services in culturally relevant languages whenever possible with translation services available where appropriate.</li> <li>● Foster a sense of trust among implementation team partners and work toward gaining a better understanding of the roles/responsibilities of each agency.</li> <li>● Use the proven Motivational Interviewing strategies to establish a relationship with all members of the family (child, youth, young adult, and caregivers) through intake, screening, assessment of family needs, and managing the family prevention plan.</li> </ul>
<b>Assessment</b>	<ul style="list-style-type: none"> <li>● Use partner’s existing assessment tools such as Protective Factors or Child and Adolescent Needs and Strengths (CANS), with any modifications to ensure all FFPSA data needs are captured and to minimize assessment redundancy.</li> <li>● Expand opportunities for data sharing between the child welfare agency and community-based partners who are managing prevention plans to ensure fidelity and consistency throughout the assessment process.</li> <li>● Support the development of a collaborative process to ensure that DFCS or Probation verification of family eligibility for FFPSA prevention services is external to the prevention pathway and services provided.</li> </ul>

	<ul style="list-style-type: none"> <li>● Gather information using Motivational Interviewing skills that support engaging the family and identifying their eligibility and interest in receiving prevention services.</li> <li>● When a partner CBO is acting solely as a prevention access point, staff will ensure the family is engaged with the FFPSA leads at the agencies, to further support them in accessing prevention services.</li> <li>● Communication with families and Community Pathway providers will be clear and consistent.</li> </ul>
<b>Planning and Plan Delivery</b>	<ul style="list-style-type: none"> <li>● Ensure that individualized prevention plans are co-developed with the family and their natural supports.</li> <li>● Throughout service delivery, the prevention plan case manager will facilitate interaction with the family by remaining objective, and consistently creating an atmosphere of transparency, mutual exploration, and respect.</li> <li>● Work with community-based services to identify culturally appropriate continued support to the family as they engage with prevention services.</li> <li>● Actively work to protect individual privacy and family confidentiality and share only needed information to the referred CBO as appropriate and assist the family in contacting the CBO.</li> </ul>
<b>Monitoring and Adapting</b>	<ul style="list-style-type: none"> <li>● Agency partners will use data to guide decision making about which EBPs to implement, expansion of EBPs, or need for cultural adaptations of services.</li> <li>● Partners will track data to best determine how to use funding and maximize impact of the CPP plan.</li> <li>● Partners will ensure accountability through evaluation components as outlined in the logic model.</li> </ul>
<b>Transitions</b>	<ul style="list-style-type: none"> <li>● Partners will keep each other well informed of agency changes, either in key services or initiatives, funding, data, or staffing to prepare for the impact of these transitions on the Comprehensive Prevention Plan.</li> <li>● Provide transition planning and preparation well ahead of transition points, in collaboration with the service provider and in alignment with the EBP being provided.</li> <li>● Coordinate and collaborate to ensure that formal supports as identified by the family are present and engaged.</li> </ul>

## **TARGET CANDIDACY POPULATION AND NEEDS ASSESSMENT**

In consultation between the CPP Steering Committee and prevention partners, the determination was made to initiate the first phase of CPP with the following candidate groups: children with a substantiated or inconclusive referral but no case opened, children in families receiving Voluntary or Court-Ordered Family Maintenance services, and Probation Youth. This determination was made by reviewing data and outcomes from DCFS and Probation, based on their collective 4E and related other efforts.

The following two charts show how prevention efforts initiated under the Title IV-E wavier project have significantly impacted not only lowering entry into care but have also made significant impacts to the disproportionately metric. Though significant strides have been made to address disproportionately, there is still much more work to be done.

Chart 1: Alameda County Annual Entries into Foster Care and Number of Children, Youth & NMDs in Foster Care 2000 – 2022:

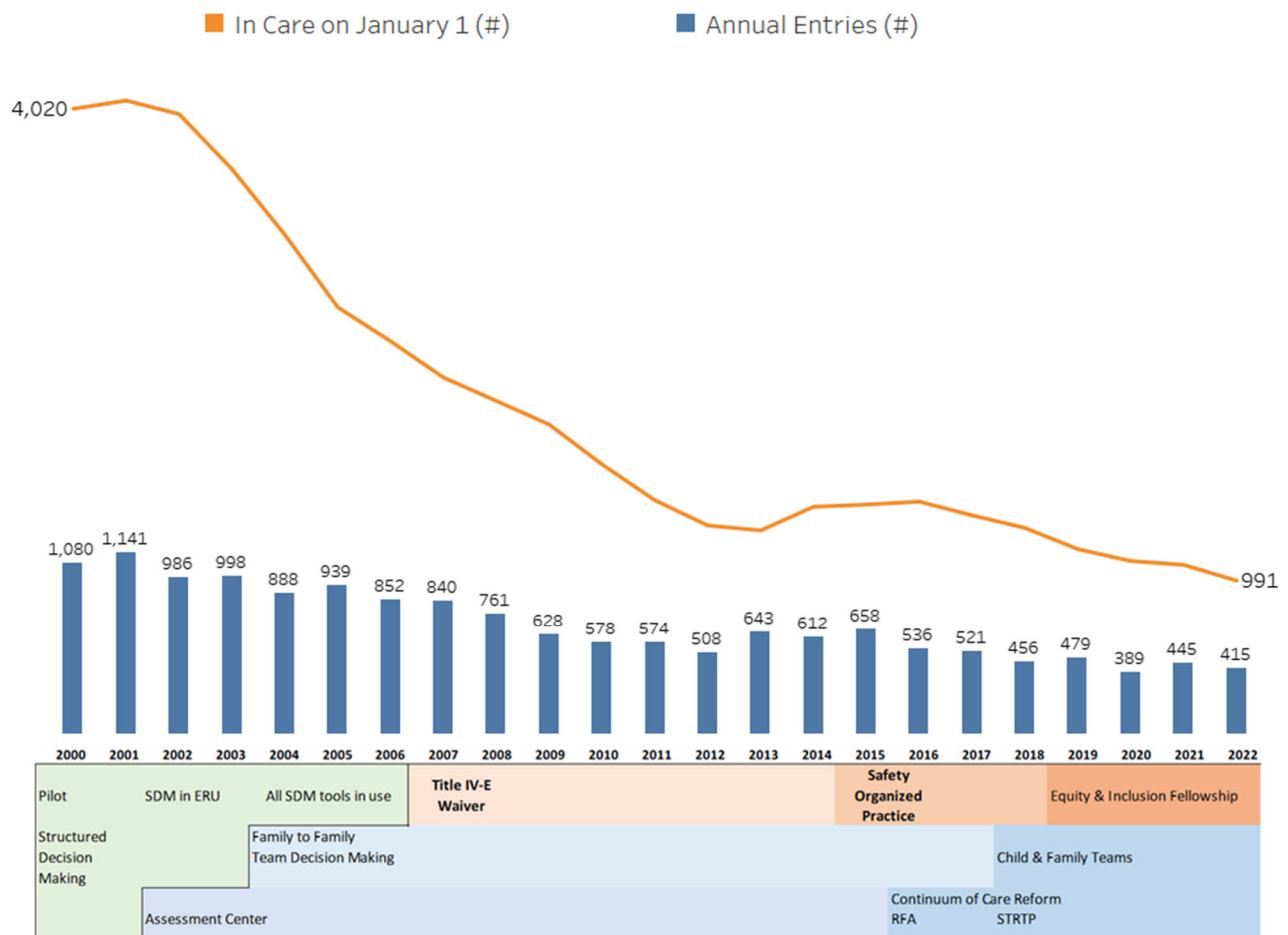
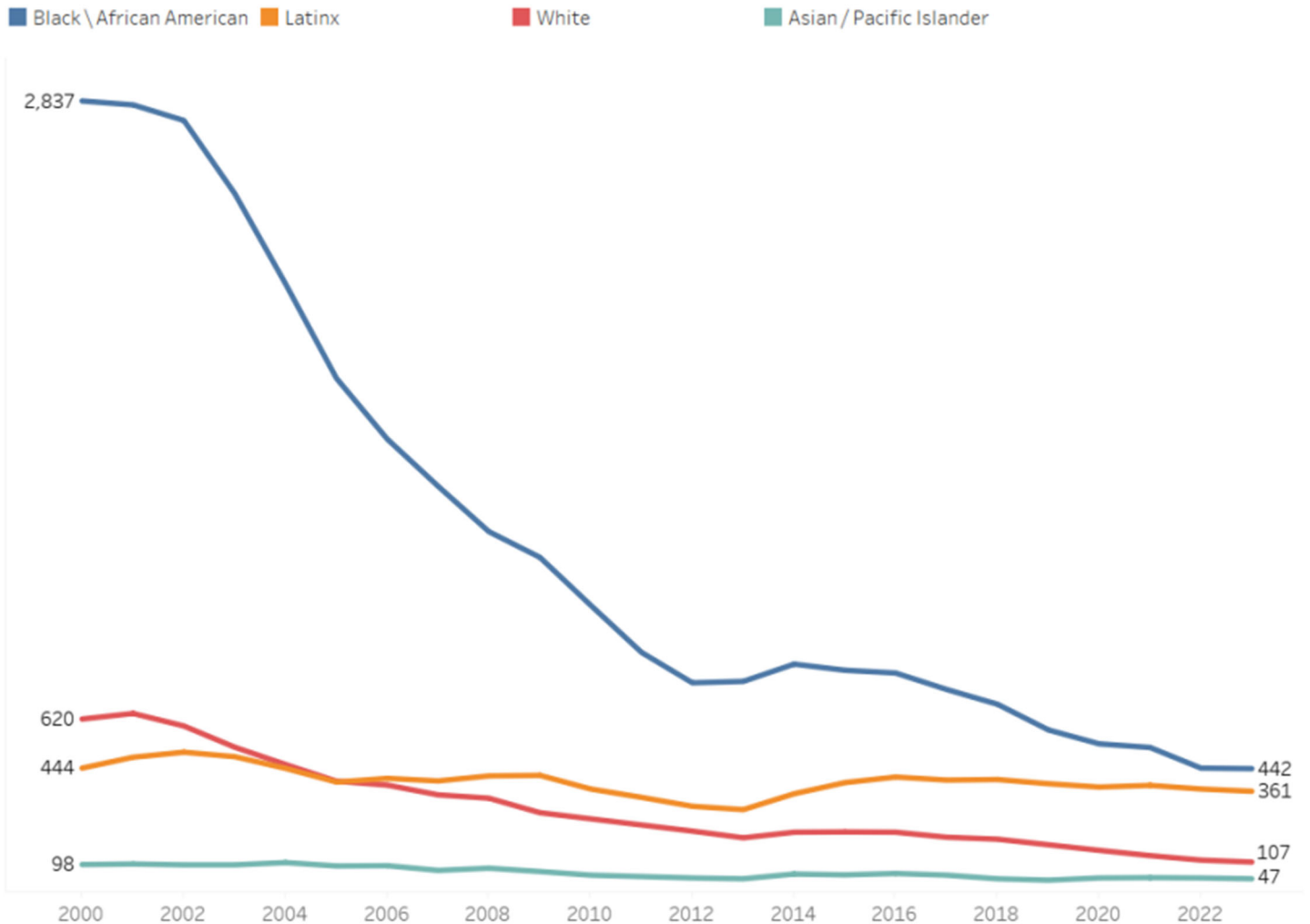


Chart 2: Number of Children and NMD in Foster Care 2000-2023 by race:



One key area of focus for Alameda County CWS has been on the frontend and how to divert families from the child welfare system. The Another Road to Safety (ARS) Program is a child welfare Differential Response Program (formally waiver funded) that is offered in Alameda County through the Prevention and Intake Division of the Department of Children and Family Services. ARS provides community-based, family centered, early intervention and prevention services, utilizing the Strengthening Families approach. ARS serves eligible families in all zip code catchments, cities and unincorporated areas in Alameda County.

The ARS Program was initially developed to address the high recidivism rate of referrals and the increased need for services to vulnerable families as an alternative to formal child welfare services. ARS utilizes evidence-based practices including the North Carolina Family Assessment Scale (NCFAS) practice-based instrument that measures five domains of family functioning (Environment, Family Safety, Parental Capabilities, Family Interactions and Child Well-being) with the goal of mitigating crises, building



family resilience and strengthening the well-being of families. The goals of the ARS Program are:

- Increased safety and protection of children at risk for child abuse and neglect who are referred to child welfare services.
- Maintain children in their homes with strong community-based services and support resulting in fewer children involved in the child welfare system.
- Greater family and community involvement in the protection of children, resulting in increased child-wellbeing and family stabilization.
- Promote family autonomy and self-sufficiency through community-based services and partnerships.
- Provide culturally and linguistically appropriate services to families to promote fairness and equity in referrals.

The following Table shows the continued use of the ARS program post Title IV-E waiver.

## Another Road to Safety Program (ARS) Referrals

### Number of ARS Referrals by Path

FY 2020-21		FY 2021-22		FY 2022-23*		TOTAL	
Path 1	101	Path 1	151	Path 1	78	Path 1	330
Path 2	148	Path 2	95	Path 2	91	Path 2	334
<b>Total</b>	<b>249</b>	<b>Total</b>	<b>246</b>	<b>Total</b>	<b>169</b>		<b>664</b>

\*FY 2022-23 data is from 7/1/2022 - 3/31/2023

### Number of Referred Children/Youth by Age

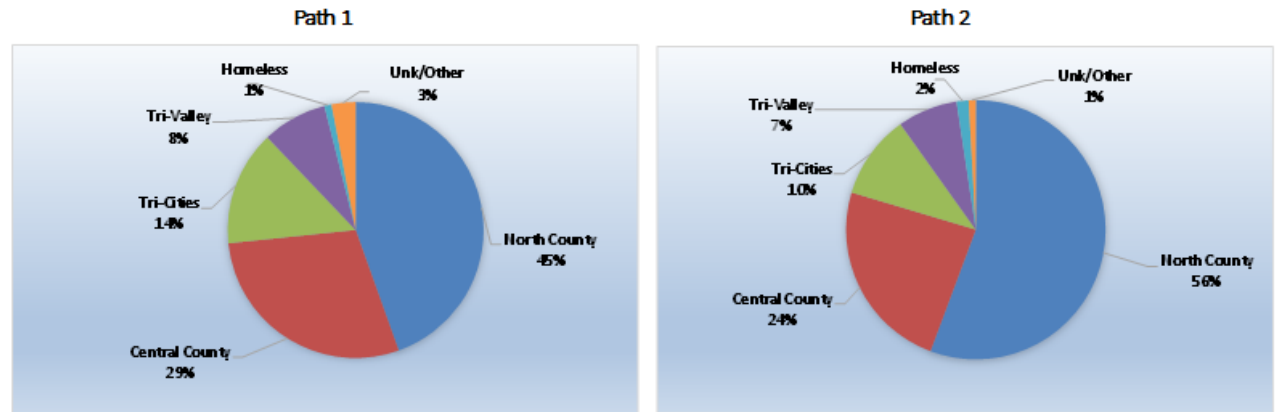
FY 2020-21		FY 2021-22		FY 2022-23*		TOTAL	
0-5	127	0-5	101	0-5	74	0-5	302
6-12	252	6-12	220	6-12	155	6-12	627
13-17	158	13-17	168	13-17	157	13-17	483
<b>Total</b>	<b>537</b>	<b>Total</b>	<b>489</b>	<b>Total</b>	<b>386</b>		<b>1412</b>

### Number of Referrals by Path and Geographic Area for FY 2021 through 2023\*\*

Region	Path 1	Path 2
North County	147	186
Central County	95	80
Tri-Cities	48	35
Tri-Valley	27	25
Homeless	3	5
Unk/Other	10	3
<b>Total</b>	<b>330</b>	<b>334</b>

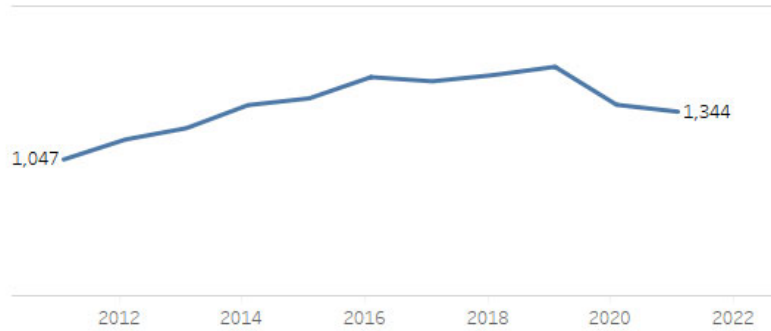
\*\*Includes 11 Quarters of data; FY 2023 data is from 7/1/2022 - 3/31/2023 (Q1-Q3)

North County = Alameda, Albany, Berkeley, Emeryville, Oakland and Piedmont  
 Central County = Castro valley, Hayward, San Leandro and San Lorenzo  
 Tri-Cities = Fremont, Newark, Union City  
 Tri-Valley = Dublin, Livermore and Pleasanton



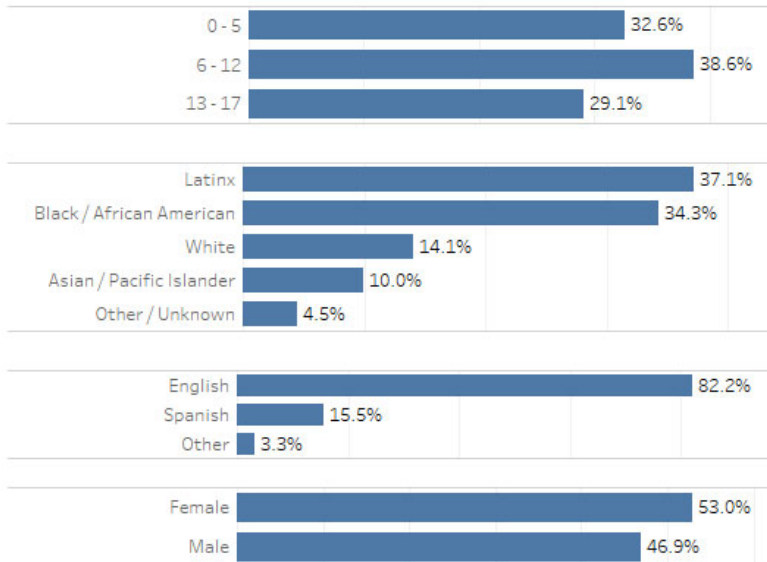
The following table shows the number of children with a substantiated or inconclusive referral with no child welfare case opened. Many children in this target candidacy group are referred to ARS.

**Children with a substantiated or inconclusive referral with no case opened**  
(Rolling 12-month total)..

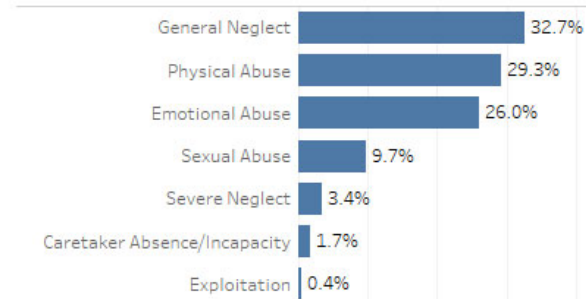


2021	2022	% change
1,387	1,344	-2.9%

**Demographic Snapshot: Children with a substantiated or inconclusive referral with no case opened in 2022**

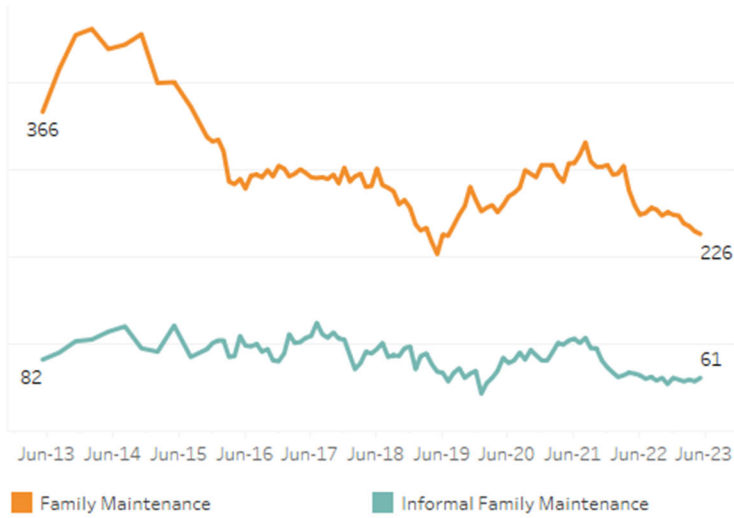


**Allegation Reasons: Children with a substantiated or inconclusive referral with no case opened in 2022**



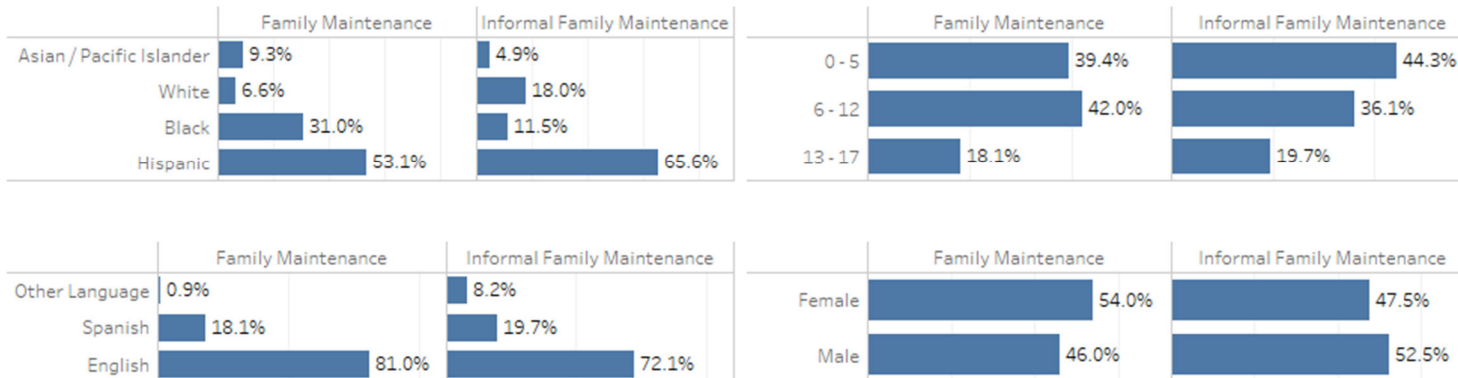
The following table shows the historical trend in the number of children receiving voluntary (informal) and court-ordered family maintenance services along with a recent demographic summary:

Alameda County Child Welfare Family Maintenance Caseload Over Time (monthly point-in-time)



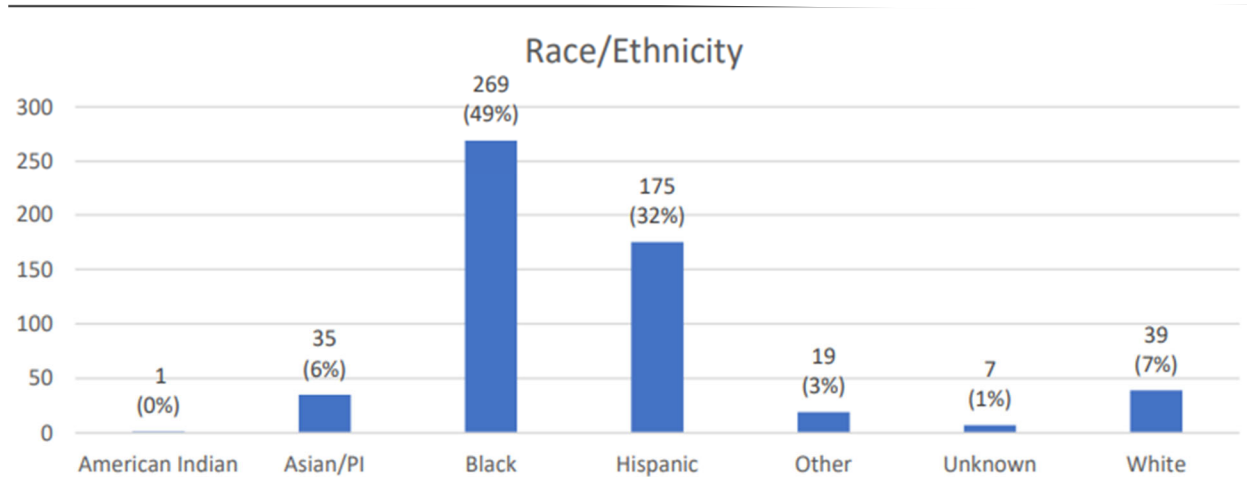
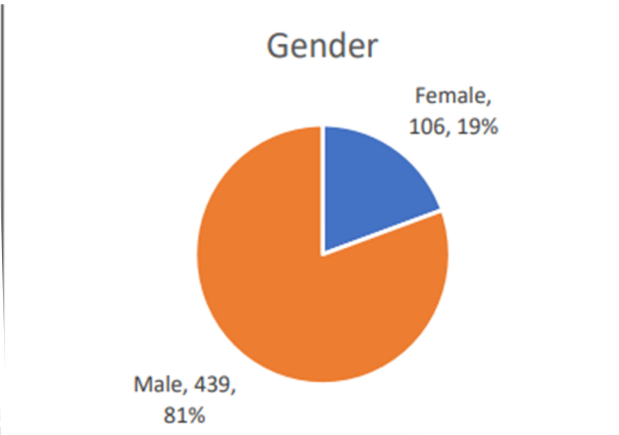
	June 2022	June 2023	% change
Family Maintenance	259	226	-12.7%
Informal Family Maintenance	66	61	-7.6%
Grand Total	325	287	-11.7%

Demographic Snapshot: Children in Family Maintenance on June 30, 2023

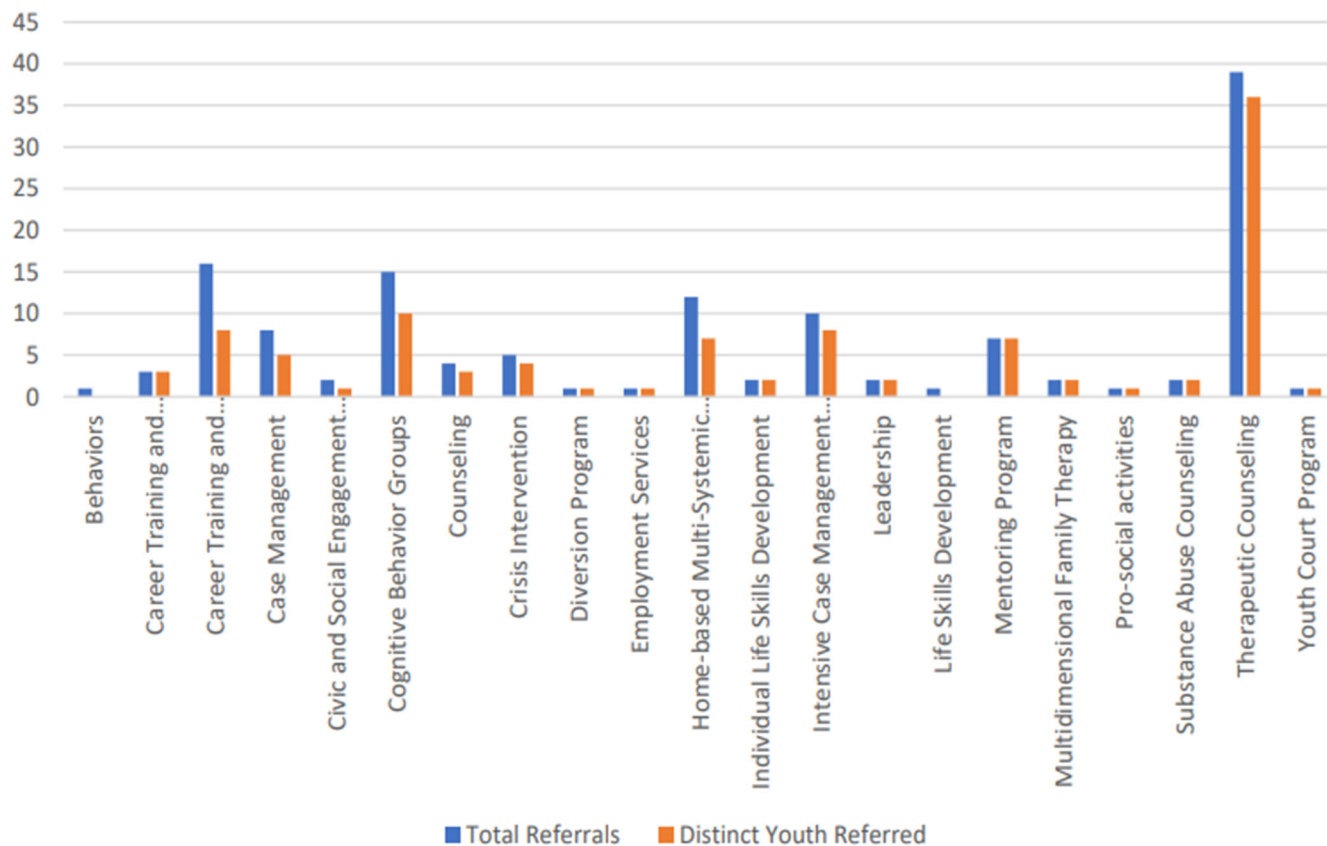


Probation has also seen its number of youth in congregate care reduce during the Title IV-E waiver project and continued this positive outcome afterwards too. The following charts show current Probation caseloads and demographics:

Supervision Type	Count	Percent
Warrant	65	12%
Placement	43	8%
Home Supervision	19	3%
Community Supervision	205	38%
Intake/Investigations	213	39%
<b>Total</b>	<b>545</b>	<b>100%</b>



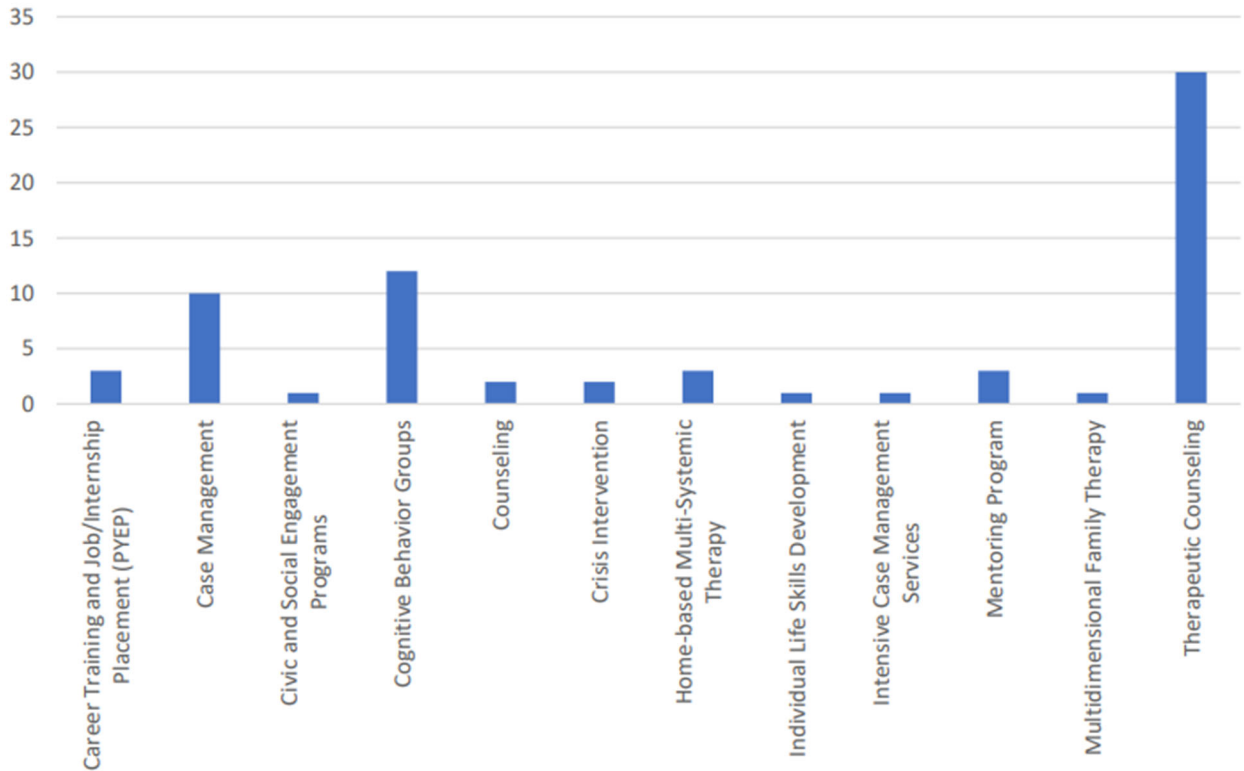
## Youth Referred to Programs



The above chart reflects that during Q1, 2023, 104 distinct youth received 135 referrals to programs recorded in the Probation case management system. Individual youth may be referred to more than one program in each area throughout the year.

The below chart reflects that in Q1, 2023, 62 distinct youth (69 non-distinct) were active in 14 programs reflecting 12 service types. Distinct youth may participate in more than one program in each area throughout the quarter; this is reflected in the non-distinct count.

## Youth Active in Programs



During its first three-year implementation cycle, the Alameda County Steering Committee and Prevention Partners agreed to have a consistent service delivery framework, so families received services with similar language and messaging regardless of which county department or CBO they were involved with or seeking services from. This framework is Motivational Interviewing, which is a tool that is already being utilized by some of the agencies and would become a standard with all of them.

Motivational Interviewing (MI) is effective with anyone who is ambivalent about change or hesitant to engage with services. MI is effective because it uses an approach that lowers defensiveness and builds trust. It also pulls people's own motivation to change and strengthens it, allowing the individual to identify their personal reason for making changes.

Research supports that MI is effective for engaging with individuals who may be hesitant or not yet convinced of the need for services. Given that families often become involved in the child welfare system involuntarily and therefore engagement may be a challenge for caseworkers, MI is a method a caseworker may want to consider in their practice. (Mirick, 2013).

Through the analysis of the current system, it was acknowledged that, while the prevention efforts thus far are working well, there are many opportunities to build upon the current service array by utilizing prevention funding in the following manner:

1. Staff/personnel training for Motivational Interviewing.
2. Ongoing Training for Trainers who can support Motivational Interviewing.
3. Creating a resource guide for all prevention service providers in the county.
4. Creating a marketing campaign utilizing existing resources and social media.
5. Developing an interagency process for community pathways that are community-based with a “no wrong door” option.
6. Build upon the existing prevention networks such as the Strong Family Alliance and Delinquency Prevention Network to expand to other prevention partners in the county.
7. As the community pathways grow in the county, focus will turn to specific populations of focus that need more specialized support and assistance.

These capacity building investments will support prevention efforts in a number of ways, including:

- By training MI to both county employees and community-based organization partner staff, the county is investing in developing a workforce equipped to engage parents, as well as youth, in prevention efforts.
- By paying for training using one-time dollars, capacity will be built for future title IV-E claiming.
- By paying for training for trainers’ certification, the county will have local experts equipped to sustain motivational interviewing on an ongoing basis.

These tasks will help build upon the existing framework and strengthen prevention efforts countywide.



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## **SERVICE AND ASSET MAPPING**

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Alameda County is well-situated in terms of existing prevention efforts and has a track record of developing, funding, and implementing prevention strategies at all levels (primary, secondary and tertiary). While Alameda County will continue to invest in these collaborations, initiatives, and funding innovations, FFPS planning efforts have given the county the opportunity to mine further gaps and strategize for the community's needs.

### **Existing Prevention Efforts**

#### Board of Supervisors (BOS) – DCFS as Designated Public Agency for Prevention Funding

The Alameda County Board of Supervisors (BOS) designates the Department of Child and Family Services – Child Protective Services Division to administer, distribute and monitor the Child Abuse Prevention Intervention and Treatment (CAPIT), Community-Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) funds. The CP Division designates program monitors to collect data, conduct program evaluations, and complete the annual Office of Child Abuse Prevention (OCAP) report during the System Improvement Plan cycle.

#### Child Abuse Prevention Council (CAPC)

In accordance with CDSS' processes and guidelines, the Child Abuse Prevention Council (CAPC) of Alameda is a C-CFSR and CSA agency partner with CPS, with the mutual goal of protecting children by strengthening families and communities through prevention and early intervention efforts. CAPC was established in 1977 as a 501(c)(3), the Alameda County Board of Supervisors, per California Welfare and Institutions Code Chapter 12.5 Section 18980, approved CAPC as the only county entity to coordinate child abuse prevention.

Alameda County Child Abuse Prevention Council acts as the oversight authority for the Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention Program (CBCAP), Promoting Safe and Stable Families (PSSF), and County Children's Trust Fund (CCTF) funding. The Agency appoints one staff member to act as CAPC Liaison. Recipients of CAPIT/County Children's Trust Fund (CCTF) funds are chosen via an RFP process.

The county's CAPC Liaison is a Child Welfare Supervisor within the DCFS Prevention and Intake Division. The Liaison's responsibilities include oversight of county-wide contracted services and implementation of the CAPIT/CBCAP/PSSF funding. The Liaison, with support from a Contract Specialist, is responsible for oversight of program coordination, collecting and analyzing data from subcontractors, preparing required

state and agency reports, submission of timely reports and conducting annual compliance site visits.

#### County Children's Trust Fund (CCTF) Commission, Board or Council

Alameda County does not have a separate CCFT commission designated to carry out this function. The county CCFT is held by the DCFS who is the BOS identified body to administer CCTF. All CCFT finances collected by Alameda County are managed by the Social Services Agency Administration and Finance Department. The funding is used for general prevention activities as overseen by CAPC and Alameda County DCFS.

Alameda County collects information regarding funding programs through quarterly reports and annual site visits. The information and data collected throughout the year is reported to the State of California through annual Office of Child Abuse Prevention (OCAP) reporting.

#### Promoting Safe and Stable Families Program (PSSF) Collaborative

Alameda County does not have a separate PSSF Collaborative designated to carry out this function. The county PSSF Collaborative is held jointly by the DCFS and the CAPC. PSSF funding is held within the DCFS to provide supportive tertiary prevention services to child welfare involved families. Alameda County's PSSF funding is currently allocated to provide case management services to families within the Family Maintenance program of DCFS. These prevention efforts support the reduction of new incidents of child abuse and neglect, prevent out of home placement of juvenile court dependent children, and decrease the time to dismissal of their Family Maintenance case. The name of this PSSF funded program is Family Reclaim and these services are provided by community-based organizations in the county.

#### AB 2083 Child, Youth and Family System of Care (CYFSOC)

Alameda's 2083 MOU is focused on sustaining the integrative and shared service delivery partnership and enhancing both effectiveness and efficiency for all partners and the youth being served. While AB 2083 focuses on youth in foster care, an essential understanding includes an imperative to build locally governed interagency or interdepartmental effectiveness on behalf of a much larger number of children and youth. This is based on the emerging awareness that addressing the social determinants of health in communities and promoting child and family well-being, cannot be impacted by any single system or department; and that to effectively maximize its federal, state and local resources, counties must build more collaborative, adaptive and effective service models.

#### The Gathering Place

Implemented under the Title IV-E waiver project, the county had long sought to open a visitation center where families could receive therapeutic support in a safe, welcoming

environment, while going through the process of maintaining or creating healthy nurturing relationships between parents and children. Alameda went through an extensive planning process before it opened the Gathering Place in 2011. The model for the tertiary prevention program is based on an evidence-based practice called Triple P-Positive Parenting Program.

### Services to Enhance Early Development (SEED)

The SEED program for children ages 0-3 years pre-dated the waiver but the secondary/tertiary prevention program expanded capacity by adding a Public Health nurse. The expansion was influenced by the research evidence on the importance of early intervention for healthy brain development and parental attachment. DCFS works in close conjunction with the Public Health department and the Oakland Children's Hospital on this program, and continues to collect data for program evaluation.

### Another Road to Safety (ARS)

ARS as already mentioned is a formally Waiver funded program that provides secondary and tertiary prevention community-based support services to families as an alternative to formal Child Welfare Services (ARS). The program utilizes the evidence-based practice of North Carolina Family Assessment Scale (NCFAS). Families are referred to ARS either directly from the hotline (without a CPS contact), or after an Emergency Response investigation where the allegations where there are no live safety threats, or where the safety threats have been resolved.

### Family Paths

Provides primary, secondary, and tertiary prevention services to children and families within the county and also runs a parental stress hotline support for caregivers.

### Family Reclaim

Provides tertiary prevention services and focuses primarily on families whose children are dependents but are served within Family Maintenance cases. The goal of Family Reclaim is to provide intensive services and support to families to help maintain the safety of children who remain with their caregivers, as well as support transitioning families out of care.

### CalWORKs

CalWORKs is a public assistance program under the umbrella of Department of Human Assistance (DHA) that provides cash aid and other secondary prevention services to eligible families that have a child(ren) in the home. DCFS and the CalWORKs program is currently working on a Linkages Program implementation in the agency.

Probation does not have direct linkage program with CalWORKs, but if a need is identified resources and assistance are provided to the client regarding how to apply.

### Public Health (PH)

CPS, the Division of Public Health and Department of Probation have an MOU wherein Foster Care Public Health Nurses (FCPHNs) are co-located with CPS agency staff and probation officers with remote accessibility to all team members who serve foster children/youth. FCPHNs help identify health care needs for children/youth in foster care, assist care providers in obtaining timely, comprehensive health assessments, and interpret health care reports for social workers, probation officers, foster placement and others as needed. There are also public health nurses supporting families with children participating in the Informal Supervision court prevention program, who assist with developmental screenings, connection to services and providing education to parents related to the medical/developmental needs of their child(ren). In addition, Public Health offers Nurse Family Partnership (a well-supported EBP in the Title IV-E Prevention Clearinghouse), Black Infant Health (not rated yet) and African American Perinatal Health (not rated yet) programs, all of which provide in-home parenting support to families at the primary, secondary and tertiary level.

### Behavioral Health Services (BHS)

#### *Mental Health*

Behavioral Health provides access to preventative mental health services to families in the community via self-referral or through a community provider referral. For children and youth involved with the child welfare and/or probation systems, CWS and Probation collaborate with BHS for mental health assessments and other tertiary prevention services. CWS utilizes BHS for the completion of the Child Adolescent Needs and Strengths (CANS) evaluations when a child is not linked to a mental health provider. BHS provides connection to an array of mental health/behavioral interventions, several of which are well-supported EBP in the Title IV-E Prevention Clearinghouse, such as Parent-Child Interaction Therapy (PCIT), PC-CARE, Functional Family Therapy (FFT), Wraparound Services, Therapeutic Behavioral Services (TBS), and Flexible Integrated Treatment (FIT) services to children and youth who meet criteria. BHS also offers an array of prevention and early intervention programs, such as a suicide prevention crisis line, bereavement, support groups and grief services, mobile crisis assessment and intervention, mental health consultation for preschoolers, and violence and bullying prevention, education, and outreach. There are also suicide prevention services, education outreach and engagement specialty for LGBTQIA youth, Latino Cultural, Russian Speaking/Slavic Community Cultural, African American Cultural, Native American/Indian Cultural, and Asian Pacific Islander Cultural services in place.

### *Substance Use Prevention and Treatment (SUPT)*

Behavioral Health provides access to preventative SUPT services to families and youth in the community via self-referral or through a community provider referral. CWS collaborates with the Behavioral Health Adult System of Care to provide assessment and intervention to families who come to the attention of our system and who might benefit from the array of services available through SUPT. SUPT provides prevention and treatment services for substance (alcohol and drug) use disorders. The range of services are primary, secondary, and tertiary prevention services, outpatient treatment, intensive outpatient services, medication-assisted treatment, withdrawal management (detoxification), residential treatment, recovery services and more. Services are available for youth, young adults, perinatal/parenting women, adults, and seniors.

### *Community Services and Supports (CSS)*

CSS is secondary prevention effort focused on community collaboration, cultural competence, client and family driven services and systems, wellness focus. CSS programs address one of the following priorities developed in the community planning process: reduce homelessness; reduce involvement with justice and child welfare systems; reduce hospitalization and frequent emergency medical care; promote a client- and family-driven system; reduce ethnic and regional service disparities; develop necessary infrastructure for the systems of care.

### *School-Based Services*

The Blue Skies Mental Wellness Team was established in 2015 as a collaboration between Alameda County Public Health Program and Alameda County Behavioral Health Services. The program was designed as an innovative approach to integrate mental health prevention and early intervention (primary and secondary prevention) strategies into the Public Health Department's maternal child health and early childhood home visiting programs.

MHSA Braided funding for expansion of School Based Behavioral Health and School Linked Services in all 14 Alameda County School Districts. MHSA funding is being braided with EPSDT funds to provide enhanced (secondary and tertiary prevention) School Linked therapeutic services and supports at nearly 150 school sites across Alameda County.

### *Unaccompanied Immigrant Youth Outreach (UIY)*

With a local community-based provider, ACBH is providing a secondary/tertiary prevention program dedicated to unaccompanied immigrant youth (UIY). These minors make dangerous journeys across borders to flee extreme violence, traumatic experiences, and economic deprivation in their home countries. The UIY team provides linguistically and culturally responsive trauma informed services, outreach and

preventive counseling, stabilization, identification of early signs of mental illness, and linkages to various resources/supports to a population sensitive to acculturation and challenges navigating new systems.

### *Prevention & Early Intervention Program: Underserved Ethnic-Language Population (UELP)*

Alameda County is an incredibly diverse population of over 1.5 million people. To address its diversity, Alameda County Behavioral Health Care Services (ACBH) has contracted thirteen programs to provide culturally responsive Mental Health PEI services to state-identified underserved populations. All UELP providers offer these secondary prevention services in two main categories: 1) Prevention services, for clients who are at higher-than-average risk of developing a significant mental illness and 2) Preventive Counseling (PC) services, designed for clients who are showing early signs and symptoms of a mental health concern. Services are provided to children, youth, TAY youth, families, individuals, adults and seniors.

### *Justice-Involved Youth*

Intensive Case Management through Behavioral Health Care Services and Probation partnership which includes Family support, collateral supports, individual support to the referred youth, and linkages to resources. Interventions integral to the model are 1:1 support directly to the youth, family support, monthly family team meetings, and intensive case management services. Intervention in courts, JJC, Mental Health Hospitals, Family Home, Community Outings, Schools etc.

### County Office of Education and School Districts

ACOE along with all local school districts in the county provides a network of supportive services for students and families under the umbrella of the Student Services Council. In coordination with each district's Student Services Director, ACOE helps meet the needs of students and families with a variety of secondary prevention services and some case management through local school hubs or resource centers. These services include concrete needs such as food, clothing, hygiene products, gift cards and other basic needs the student or family may need as well as referral to community-based organizations as appropriate. ACOE provides support to each school district in obtaining needed resources and has utilized standing agreements with non-profits such as All Good Living Foundation to help meet those needs. The council comes together monthly and works collaboratively to meet all student needs such Homelessness, at risk students and school safety.

### Child and Family Team Meetings

Over the last decade, Alameda's Probation and DFCS teams have developed and expanded their respective Child and Family Teaming (CFT) processes. The CFT

typically include representatives who provide formal supports to the youth and family when appropriate, including the caregiver, placing agency caseworker, representative from the Foster Family Agency (FFA) or Short-Term Residential Therapeutic Program (STRTP) where the probation youth is placed, as well as a mental health clinician.

Members of the CFT work together to identify the strengths and needs of a foster youth to develop a youth and family centered plan. All staff seek to use and apply the ICPM's essential guidance when engaging, assessing, planning, monitoring, adapting and transitioning youth in their care.

### Housing Related Programs

Alameda County utilizes an array of strategies and efforts to support the housing of all persons in the county. EveryOne Home, which is a collective impact initiative and Alameda County's Continuum of Care, provides the Coordinated Entry portal to Alameda County's Housing Crisis Response System. Additionally, there are other access points for supportive services, education, and lower-income housing listings (e.g. <http://211alamedacounty.org/> and <https://housing.acgov.org>).

Additionally, there is a broad effort through ALL IN Alameda County that is working to address issues of poverty, including basic needs and housing, through collaboration across sectors of government and with the community.

Other efforts by the Social Services Agency include the Bringing Families Home program which works to reduce homelessness, or the risk of homelessness for families served by the child welfare system, increasing family reunification and preventing foster care placement. Focused programs could include rapid rehousing, targeted homelessness prevention services and permanent supportive housing coordinated through various contractors. There are also various transitional housing programs for current and former foster youth, and direct assistance for move-in costs and utility bills to persons involved with child welfare.

Though Probation does not have a dedicated service for housing for youth and their families, young Adults or Transitional Age youth-TAY, can utilize Probation housing contracts in the Adult Division funded through AB109. Probation also does help with housing through the Breaking Barriers program, and also has the same housing options available for CWS youth for their non-minor dependents (AB-12).

Alameda County Health Care for the Homeless (ACHCH) is a federally funded health center program housed in Alameda County Health Care Services Agency which provides direct care services, and coordinates a network of county and community health clinics to increase access and improve care for people experiencing homelessness.

### Services for LGBTQIA Community:

Three providers in the county provide secondary prevention services dedicated to the LGBTQIA community. First is, Our Space, which is a Side by Side program that

provides a safe space for LGBTQ youth (Ages 14 – 21) to congregate; socialize and build community; and, access case management and individual/family therapy support services as needed.

Second is the Youth Acceptance Collaborative (YAC) which provides case management, weekly support meetings with a YAC advocate for youth and/or their families, crisis support and case consultation for providers. Minors living in Alameda County who have questions or concerns about their own sexual orientation, gender identity and expression (SOGIE) and/or their families can have a Youth Advocate and utilize YAC services.

Third, is the Youth Acceptance Project which works with the families of LGBTQ+ and gender expansive children, and youth in foster care. The intervention serves as a family preservation and family reunification tool, assisting families who are struggling with the sexual orientation and/or gender identity/expression of their child.

### The Delinquency Prevention Network (DPN)

The Alameda County Probation Department, in collaboration with community-based organizations forming the Delinquency Prevention Network, offers a comprehensive set of primary, secondary, and tertiary preventative juvenile services aimed at safeguarding the youth in Alameda County from involvement in the juvenile justice system. These services encompass a wide range of initiatives designed to address various aspects of youth development and well-being. Such programs including:

**Diversion Programs:** An alternative to formal court referral for youth involved in minor offenses. These programs focus on rehabilitation and skill-building rather than punitive measures.

**Life Skills Education:** Youth receive training in essential life skills, including decision-making, conflict resolution, and goal setting, to equip them with tools for responsible and productive living.

**Civic and Social Engagement:** Encouraging youth to become active participants in their communities, these programs promote civic awareness and community involvement among young people.

**Restorative Justice:** Restorative justice practices are utilized to repair harm caused by delinquent behavior. These programs emphasize accountability, empathy, and reconciliation between youth involved in criminal offenses and the victims of those offense.

**Therapeutic Counseling:** Youth in need of therapeutic support receive counseling services to address mental health and emotional challenges, helping them cope with issues that may contribute to delinquent behavior.

**Crisis Intervention:** Services are available to address urgent situations, providing immediate assistance to youth in crisis and helping stabilize their situations.



**Case Management Services:** Guidance and support to meet the requirements for high school graduation and prepare for future educational or vocational paths. These programs also provide individualized case management to address specific needs.

**Truancy Mediation:** Programs are in place to address truancy issues, including early intervention in school attendance matters and prevent youth from engaging in delinquent activities.

**City of Oakland-Specific Programs:** Recognizing the unique needs of the Oakland community, specialized programs such as the OK Program and Cross Age Mentoring are tailored to address the high-need population in this city.

- **OK Program:** In partnership with Oakland Unified School District, and the Alameda County Probation Department, Oakland Police officers recruit and mentor middle school-aged black male youth, providing long-term support and positive influence. The program focuses on conflict resolution, school attendance, and preparing youth for post-graduation options. Probation Officers assist the same middle school youth through high school, preparing them for graduation and entry into college, vocational training, or military service.
- **Cross Age Mentoring:** This collaborative partnership between the Oakland Unified School District, City of Oakland Department of Violence Prevention, and Alameda County Probation Department trains high school students to become mentors for middle school students. It fosters leadership skills in high school students while preparing middle school students to assume mentoring roles in the future.

The overarching goal of these preventative juvenile services is to create a supportive community environment that addresses the needs of Alameda County's youth comprehensively. By providing these services, the Alameda County Probation Department strives to keep youth out of the juvenile justice system, fostering their personal growth and development while contributing to the well-being of the community.

For youth who are already involved in the criminal justice system but are still within the community, the Alameda County Probation Department extends the very same services available through the Delinquency Prevention Network. In addition to the existing preventative services, these justice-involved youth have access to specialized intensive case management wraparound services. These wraparound services adopt a holistic approach to service delivery, aiming to comprehensively support youth in various areas of their lives, including but not limited to:

**Substance Use:** Youth receive guidance and support to address substance use issues. This may include access to substance abuse counseling, treatment programs, and resources to promote recovery.

**Mental Health:** Mental health services are provided to address any emotional or psychological challenges the youth may face. This includes therapy, counseling, and access to mental health professionals.

**Education:** Support is given to help justice-involved youth continue their education. This may involve tutoring, educational advocacy, and assistance with reintegration into school or alternative education programs.

**Employment:** Assistance with job training, job placement, and career development is offered to help youth gain valuable employment skills and find stable employment opportunities.

**Leisure Time:** Youth are encouraged to engage in positive recreational activities during their leisure time. Programs and activities that promote healthy hobbies and interests are made available.

**Life Skills:** Building essential life skills remains a priority, with a focus on decision-making, conflict resolution, financial literacy, and other skills necessary for successful reintegration into the community.

**Personal Development:** Tailored programs help youth build self-esteem, set goals, and develop a sense of purpose and identity.

These wraparound services recognize that justice-involved youth often face complex and interconnected challenges. By addressing these various aspects of their lives, the Alameda County Probation Department aims to support their rehabilitation and reintegration into the community, ultimately reducing the likelihood of further involvement in the criminal justice system and removal from the community. This comprehensive approach seeks to empower these youth to make positive choices, lead productive lives, and contribute positively to society.

#### Juvenile Justice Crime Prevention Act (JJCPA)

Youth Uprising (JJCPA) is a neighborhood hub offering young people primary and secondary prevention services and programs to increase physical and mental wellbeing, community connection, educational attainment, and career achievement among youth members.

#### *Cognitive Behavior Groups*

Group programs with youth that combine restorative practices with cognitive behavioral therapy. Healthy, Wealthy, & Wise (HWW) is one of the curricula utilized in this group program that addresses issues of decision making, identity, overcoming pain and trauma, and life skills.

#### Centerforce

The Centerforce Parenting Program (CPP) uses Centerforce's established skills in parent coaching, case management and classes to reduce juvenile justice involvement and support healthy family relationships.

## Family Finding

Probation contracts its family finding efforts to Family Builders who provides a dedicated social worker who is located at the JJC. The social worker conducts an investigation which includes, but is not limited to, a computer-based search engine as well as interviewing the youth in custody to build a network of connections of relatives that the youth feels a closeness to.

CWS has dedicated Four CWW positions to provide Family Finding and Engagement efforts for children in non-relative care. The Family Finding and Engagement CWW's organize newly found family and fictive kin around the youth, make connections to the found family and promote family responsibility for their youth's permanency and placement related decisions, and promote the establishment of a life-long relationship with at least one concerned, committed, and caring adult.

In addition, the Casey Family Programs is supporting case mining and family finding efforts for foster youth identified as at risk of sexual exploitation to assess for important connections within the youths' lives that could be re-supported to cultivate opportunities for both relational and physical permanency.

## Evidence-Based Programming to be Sustained by FFPSA

Alameda County is rich in terms of the Evidence-Based Practices available in the community already as depicted in the following table:

<b>EBP</b>	<b>Agency</b>	<b>Prevention Level</b>
Triple-P program	A Better Way	Primary- Parents/Caregivers/Secondary - Parents/Caregivers at- Risk/Tertiary - Parents/Caregivers in CWS
Multidimensional Family Therapy (MDFT)	Lincoln	Evaluations and Assessments for corrections-involved young people.
Dialectical Behavior Therapy	La Clínica De La Raza La Familia Children's Hospital, Oakland Catholic Charities of the East Bay Ruby's Place Family Paths Catholic Charities of the East Bay	Secondary-Families at- Risk/Tertiary-Families in CWS

	La Familia/FESCO UCSF Benioff Children's Hospital, Oakland La Clinica Family Paths	
Cognitive Behavioral Therapy	La Clinica De La Raza La Familia Children's Hospital, Oakland Catholic Charities of the East Bay Ruby's Place Family Paths Catholic Charities of the East Bay La Familia/FESCO UCSF Benioff Children's Hospital, Oakland La Clinica Family Paths	Secondary-Families at-Risk/Tertiary-Families in CWS
Motivational Interviewing	La Clínica De La Raza La Familia Children's Hospital, Oakland Catholic Charities of the East Bay Ruby's Place Family Paths Catholic Charities of the East Bay La Familia/FESCO CALICO Center UCSF Benioff Children's Hospital, Oakland La Clinica Family Paths	Primary-Parents/Caregivers/Secondary - Parents/Caregivers at-Risk/Tertiary - Parents/Caregivers in CWS
Tom Lyon's Ten Step Interview Protocol	CALICO Center	Tertiary - Children in CWS
Trauma Informed Practice	CALICO Center Abode Ruby's Place	Tertiary - Parents/Caregivers in CWS

	East Bay Agency for Children La Familia/FESCO	Primary - Children Secondary - Children at-Risk Tertiary - Children in CWS  Primary - Families Secondary - Families at-Risk
ASQ, ASQ-SE	Abode	Primary – Children
Strengthening Families Framework; Los Niños Bien Educados	La Familia/FESCO Family Paths Bananas East Bay Agency for Children Abode First place for youth La Clinica	Primary - Parents/Caregivers Secondary - Parents/Caregivers at-Risk Tertiary - Parents/Caregivers in CWS
Northern Carolina Family Assessment Scale (NCFAS)	Family Support Services	Tertiary - Families in CWS
Family Driven Care	Alameda County Behavioral Health Care Services	Primary - Families

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## **LOGIC MODEL**

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The logic model describes the activities and intended outcomes for children, youth, parents, caregivers, and families. The logic model helps to connect the goals of the cross-sector partnership to align with the intent of both the state and federal legislation. The logic model reflects the broad efforts being undertaken by Alameda County to increase family protective factors and decrease the likelihood of child maltreatment and involvement with child welfare services, based on the overall theory of change resulting from diverse efforts across the County.

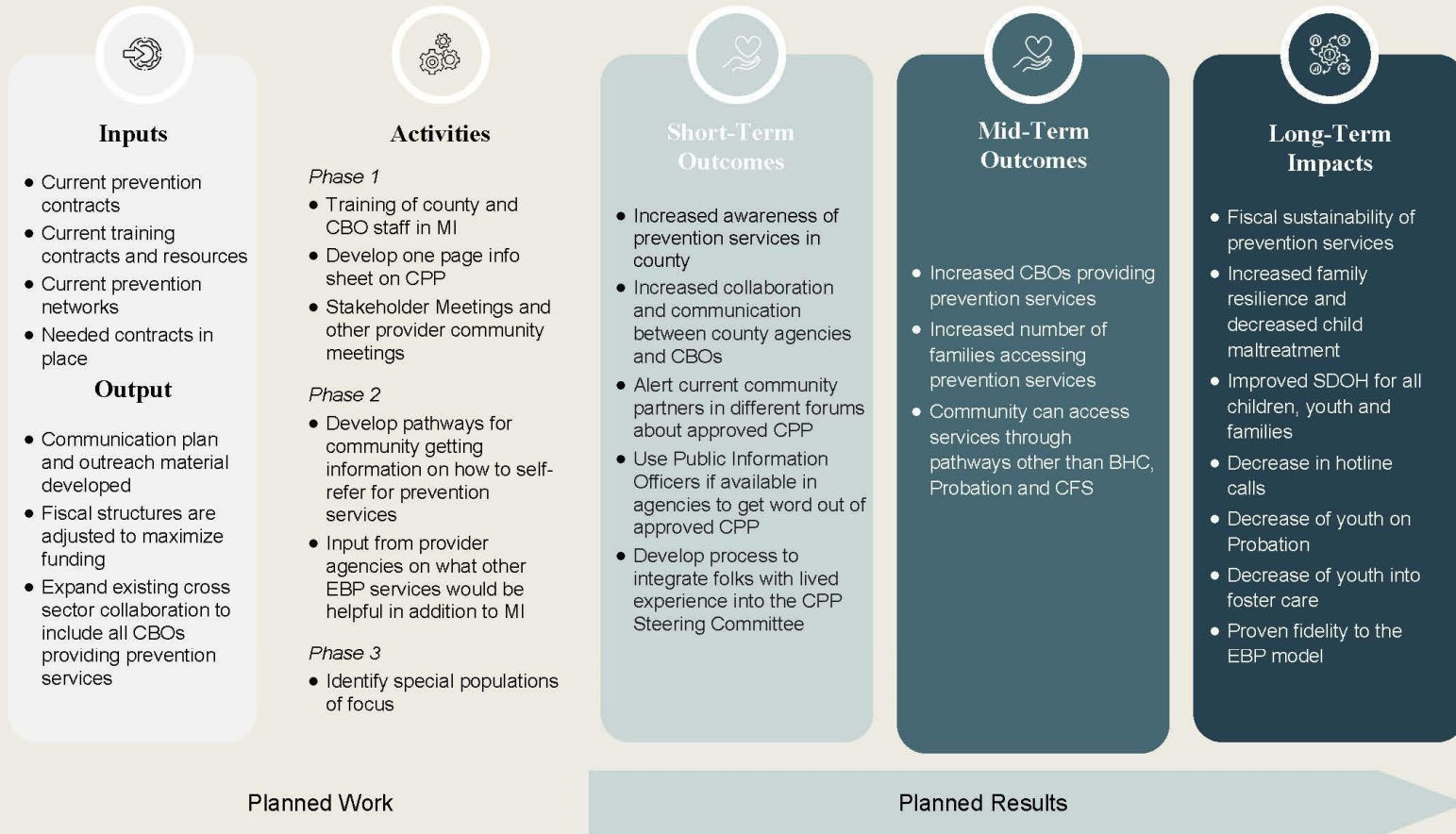
The logic model is supported by an established Theory of Change, which suggests that expanded prevention services with concrete supports and increased equitable access and no wrong door policy and approach will lead to the strengthening of families through an increase in family protective factors and a decrease in the likelihood of child maltreatment resulting in decreased involvement with child welfare and probation services.

Alameda County is looking to take a three phased approach with its CCP and first start with a uniform training for all county department staff and prevention partners on Motivational Interviewing. Then an exploration of developing its community pathways within the county to increase the access to services from a community-based approach that does not require children and families to first come through the doors of Child Welfare or Probation. And lastly as these two efforts are implemented, Prevention Partners will seek to expand services for specific populations of focus based on input and need. The overarching goal for Alameda County is for Child Welfare and Probation to be the last resort of services instead of the first.

For this current CPP, all efforts and planning will be for Motivational Interviewing Training and exploring the second phase of community pathways.

The cumulative result of these initial prevention efforts undertaken by the county and its prevention partners as presented in following the logic model. These long-term outcomes, which are aligned with the theory of change, and are anticipated to include: increased family strength and resilience; reduced child maltreatment and child welfare referrals; improved health and well-being for children, youth, and families; and, decreased rates of disproportionality and disparities throughout the County.

# CPP Logic Model



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**SPENDING AND SUSTAINABILITY PLAN**

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Current Prevention			
ACSSA Prevention Budget in FY 23/24		Over \$5m budgeted for Prevention	
Current Funding Sources		PSSF Allocation, CBCAP, Children's Trust, State Realignment and County General Fund	
Expansion			
Funding For Expansion of Prevention Services - 3 years			
Funding Sources	State Block Grant	\$5.1m	One-Time Funding
	Family First Transition Grant	\$1.3M	One-Time Funding
	ARPA- CBCAP	\$0.7M	One-Time Funding
	State Realignment	\$2.0M	
	Title IV-E	\$2.0M	



Alameda County Social Services Agency

FFPS 3 Year Budget

Funding Sources	FY23-24	FY24-25	FY25-26	TOTAL
Title IV-E		\$462,757	\$1,500,000	\$1,962,757
FFPS State Block Grant	\$5,090,544			\$5,090,544
Family First Transition Act Transition Grant		\$1,334,153		\$1,334,153
ARPA Community Based Child Abuse Prevention (CBCAP)		\$740,333		\$740,333
Realignment		\$462,757	\$1,500,000	\$1,962,757
<b>TOTAL</b>	<b>\$5,090,544</b>	<b>\$3,000,000</b>	<b>\$3,000,000</b>	<b>\$11,090,54</b>

**Spending**

Alameda County plans to use the State FFPS Program Block Grant in the following ways:

- Motivational Interviewing training for county staff and community partners
- Training for Trainers certification in Motivational Interviewing for County staff and community partners
- Administrative Costs
- Purchasing direct services and support for families in need which will help the family achieve or maintain stability.

- Build a network of partners with county departments and community-based organizations to implement and work through all three phases of the CPP and hold regular meetings to help facilitate ongoing communication and coordination of services.
- Raise awareness of prevention services and providers in Alameda County through a resource guide that is made available to all professionals in the county as well as children, youth and families.

In addition to the specific funding and programs in the chart above, Alameda County DSS invests in prevention efforts through other services and programs such as the CalWORKs Home Visiting Program, Linkages, CalWORKs Family Stabilization Services, CalWORKs Housing Services Program, Child Welfare Bringing Families Home Program, wraparound services and realignment funds to operate a robust Voluntary Family Maintenance program. There is currently an RFP for helping to meet concrete needs in the community with ARPA-CBCAP funds.

The Probation Department also invests in an array of services to support juvenile offenders including restorative justice and diversion programs in partnership with community-based organizations throughout the county. At the time of this submission of this plan, actual Probation fiscal dollars were still being determined and will be provided at a later date.

In addition, the Behavioral Health and Public Health Departments invest in a wide range of prevention services including those funded by MHSA, and robust home visiting programs, including evidence-based Nurse Family Partnership. The Behavioral Health total estimated MHSA PEI Budget for fiscal years 2023-2024 is estimated at \$25.7M and much of this is dedicated to children, youth and families.

### **Sustainability**

Alameda County system partners are committed to sharing resources to provide enhanced services to the children, youth and families. Funding may consist of federal, state, local or private resources and will be sought, applied for, planned, monitored and distributed jointly where practical. The partners will communicate through the CPP governance structure (ILT and Steering Committee) about available funding streams and impact to services within the county of any funding change.

System partners will work together to maximize any potential reimbursement afforded through managed care plans, the county mental health plan, and other access points to federal reimbursement. All parties will retain financial responsibility for those children, youth and families that are eligible for services within each parties' respective system of care.

System partner agencies have many required and varied responsibilities relative to tracking, monitoring, evaluating and reporting service delivery to state agencies, and

additional responsibilities for evaluation of contractors and vendors. While these requirements have many unique forms and processes, there are critical areas where system partners' shared goals may be enhanced and where cost savings may be realized.

Alameda County CPP governance bodies are committed to prioritizing strategic sustainable planning by establishing shared data practices and a creation of joint evaluation process. Partner agencies will agree to share information gleaned from, and include system partners impacted by the development of, system improvement focused plans including but not limited to:

- Child Family Services Review (CFSR)
- External Quality Review Organization (EQRO)
- First Five County Strategic Plan
- Juvenile Justice Commission
- Juvenile Justice Coordinating Council Review
- Local Accountability Plans
- Local Control and Accountability Plan
- MHSA Prevention Early Intervention Plan
- Triennial MHP Review
- Cal-OAR

The biggest barrier to sustainability is the unknown nature of future funding available through Title IV-E and the State Block Grant. Sustainability of the Alameda County CAPC Prevention Coordination Services will depend on leveraging Families First Prevention Act funds, ongoing fundraising efforts by community-based organizations and future prevention funding availability.

The team who worked on the development of this CPP focused on short-term system enhancements that build capacity using one-time funding and which poise the system for being able to claim Title IV-E funds once available. Ongoing, the workforce will need to be grown in order to sustain increased capacity of service delivery, however this will depend upon sustainable long-term funding either through further State Block Grant funding or the ability to claim IV-E dollars. In particular, funding that can support additional direct service providers and also increase the numbers of social workers and/or therapists will allow the system to build a broader upstream network of services and supports. In addition to direct service provision, additional administrative staff are anticipated to be needed to support ongoing tasks related to compliance with Title-IV-E requirements such as model fidelity oversight, data entry, development of training and support for community-based organizations.

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## **SUMMARY**

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Alameda County is well positioned to implement its CPP, expand prevention services countywide due to the historical experience of prevention services under the Title IV-E waiver project, extensive collaboration between county departments and community-based organizations and utilization of a wide range of evidence-based programs already established in the county. For this CPP, the county is adopting a three-phased approach to service provision, which will allow a uniform system framework county-wide with the utilization of the evidence-based program of Motivational Interviewing as the first phase.

Once successful, all providers of prevention services will “speak the same language” when engaging with any children, youth and/or families who come seeking services and may not know what exactly they need or fear even asking for help. Alameda County will continue to explore adding more prevention organizations in the second phase of prevention expansion with community pathways and finally in the last phase seek to provide more unique services to specific populations of focus. Alameda County has a proven track record of preventative services that each year continue to expand or modify due to the needs of children, youth and families seeking help. The county’s ILT and its partners are optimistic about this CPP and its continued work of prevention services legacy.

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***APPENDICES***

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Assurances Template with Signatures

Spending Plan Template