



# GLENN COUNTY COMPREHENSIVE PREVENTION PLAN

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

2023–2027

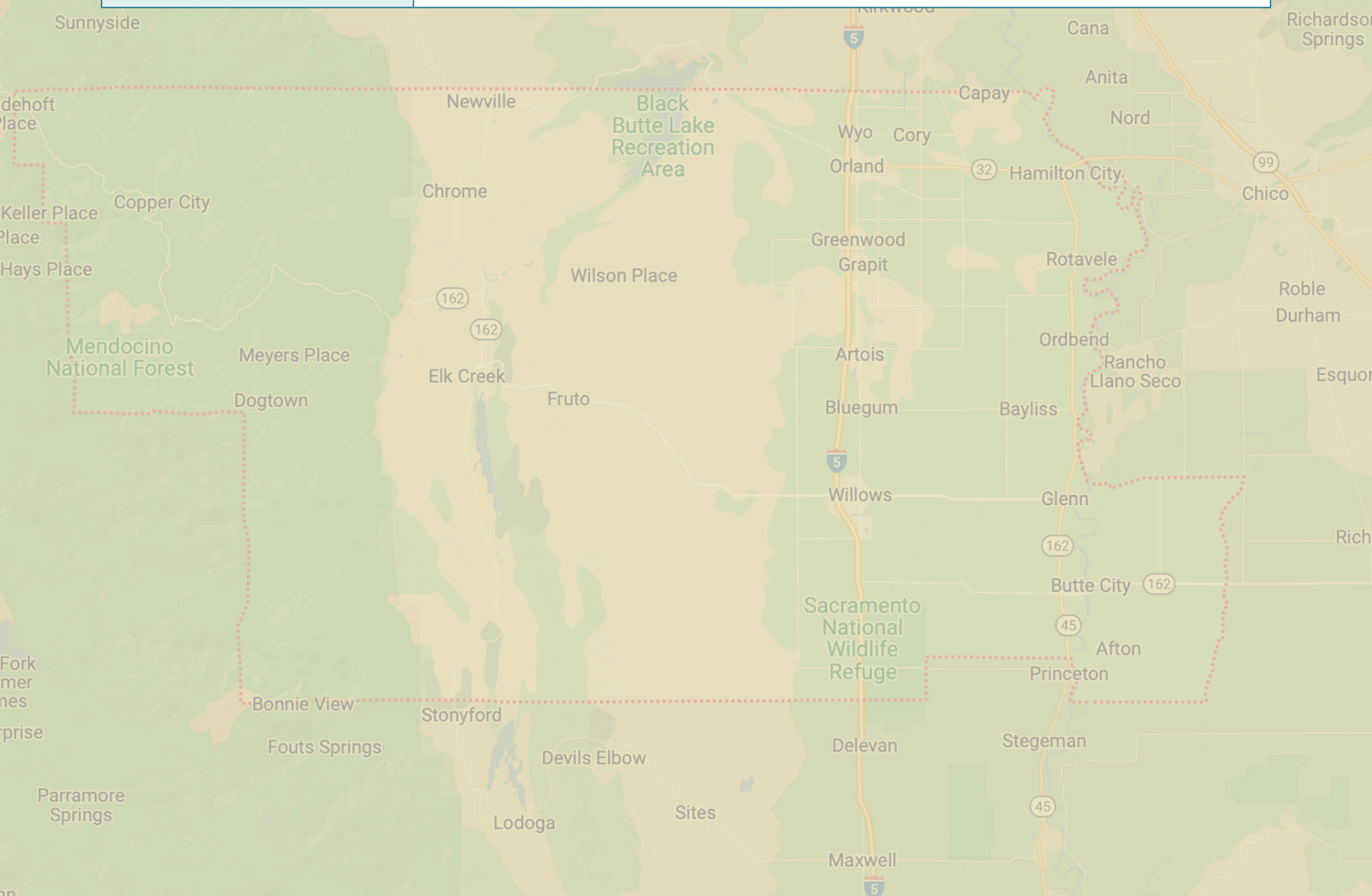
PREPARED BY



# COMPREHENSIVE PREVENTION PLAN OF GLENN COUNTY

## TITLE IV-E AGENCY INFORMATION

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# INTRODUCTION

## Glenn County's Commitment to Prevention

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

The mission of the Glenn County Health and Human Services Agency (HHSA) is “Building Healthy Futures—One Agency Accessible to All.” The agency’s four divisions—Social Services, Behavioral Health, Public Health, and Community Action—collectively offer a broad range of services to achieve the vision of “Health and Opportunity for All.” HHSA is “committed to integrating facilities and services” to offer individualized and innovative services to Glenn County residents. Child Welfare Services (CWS) in Glenn County are provided through the HHSA Child Protective Services Unit, which offers four main programs: Emergency Response, Family Maintenance, Family Reunification, and Permanent Placement. The primary goals of CWS are “the safety of children” and, whenever possible, “keeping the family together.” Glenn County coordinates services across its child- and family-serving agencies through a Children’s System of Care (CSOC).

Glenn County has a long history of developing and administering programs to prevent child maltreatment and the need for removing children into foster care, including the current Differential Response (DR)

program focused on delivering services that can keep families that have come to the attention of the child welfare system together. Since August 2021, Glenn County has also operated a Family Services unit focused on prevention primarily through offering voluntary case management services to families with no court involvement. Families engaged with the Family Services unit are connected to community resources, parenting programs, child care, housing, behavioral health services and other critical supports. These voluntary services help families connect with concrete supports (e.g., food, clothing, furniture), transportation assistance, and advocacy. The Family Services unit uses a connective and community supporting approach and often receives referrals through partner agencies, community members, and the education system. The Family Services unit is the central means for carrying out the prevention vision for Glenn County.

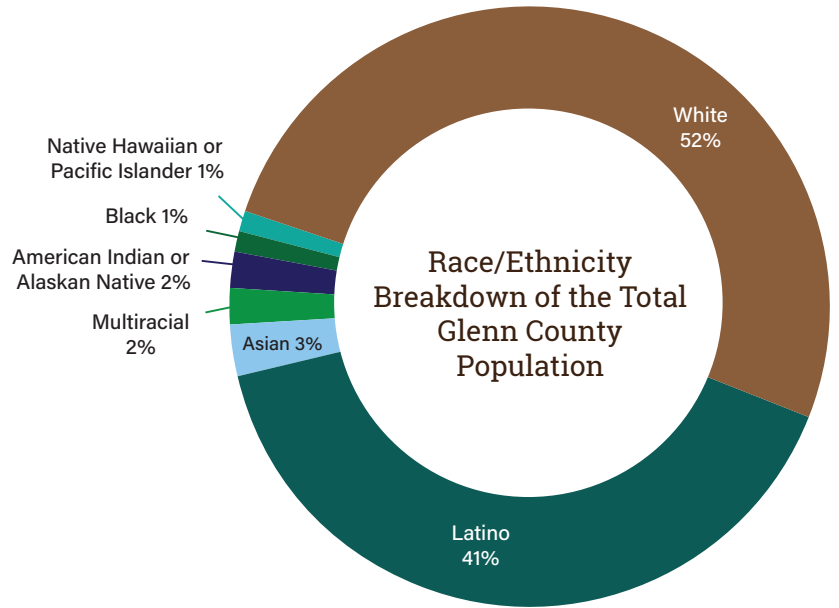
The County also established a Children’s Trust Fund (CCTF) to support prevention services and community-wide prevention events. The CCTF is administered by the Children’s Interagency Coordinating Council (CICC), a Board of Supervisors (BOS)-designated commission which also functions as the County’s Child Abuse Prevention Council (CAPC). The CICC’s mission is “to provide a collaborative community forum for coordinating culturally appropriate, multi-disciplinary services and resources to support the needs of children and families to prevent incidents of child abuse and neglect” in Glenn County.

- ✓ In developing this Comprehensive Prevention Plan (CPP), Glenn County affirms its commitment to keeping children and families together and preventing the need for foster care whenever possible and pursuing opportunities to leverage federal Title IV-E and state Family First Prevention Services (FFPS) Block Grant funding, along with other resources, to expand the availability of prevention services within Glenn County.

# Glenn County Data Profile

## Population<sup>1</sup>

Total Population	29,310
Children Ages 0–17	7,176



## Child Welfare Rates (per 1,000)<sup>2</sup>

	Glenn	CA
Allegations	78.9	49.6
Substantiations	11.9	6.1
Entries to Foster Care	2.8	2.4

## Unique Glenn County Indicators

- » Buprenorphine prescriptions are used to gauge the expansion of medications for opioid use disorder. The annual crude buprenorphine prescribing rate for 2021 was 39.42 per 1,000 residents compared to the state average of 18.66 per 1,000.<sup>3</sup>
- » In 2022, there were 186 domestic violence-related calls for assistance.<sup>4</sup>
- » While 15% of the total population in Glenn County live below the federal poverty level, 57% of the Black and 48% of the Asian population live below the poverty level.<sup>5</sup>

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

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

3 California Overdose Surveillance Dashboard (June, 2023). Placer Opioid Overdose Snapshot: 2019-Q1 through 2022-Q1. Retrieved from <https://skylab.cdph.ca.gov/ODdash/?tab=CTY>

4 OpenJustice (n.d.). Domestic Violence-related calls for assistance. Retrieved from <https://openjustice.doj.ca.gov/exploration/crime-statistics/domestic-violence-related-calls-assistance>

5 United States Census Bureau (2023). American Community Survey - S1701, 2021 ACS 5-Year Estimates. Retrieved from [https://data.census.gov/table?q=poverty+and+race&g=040XX00US06\\_050XX00US06021&tid=ACSST5Y2021.S1701](https://data.census.gov/table?q=poverty+and+race&g=040XX00US06_050XX00US06021&tid=ACSST5Y2021.S1701)

# GOVERNANCE STRUCTURE

In 2018, the State of California passed Assembly Bill 2083 (AB 2083) which required counties to develop and implement a Memorandum of Understanding (MOU) outlining the roles and responsibilities of the various local entities that serve children and youth in foster care who have experienced severe trauma. Prior to that, Glenn County had established the Children's System of Care (CSOC) in the early 2000s, bringing together key staff from several public agencies working directly with children and families to address mental health needs, keep families together whenever possible, improve school performance, and reduce criminal justice system involvement and psychiatric hospitalizations.

In 2021, an MOU was finalized between the following CSOC members in Glenn County: Health and Human Services Child Welfare Services, Health and Human Services Public Health, Health and Human Services Behavioral Health, Department of Probation, County Office of Education Local Education Agencies (LEA), Special Education Local Plan Area (SELPA), Superior Court of California—County of Glenn, Far Northern Regional Center, Glenn County Sheriff's Department, and Orland Police Department. As of August 2023, the CSOC had also signed an MOU with Grindstone Indian Rancheria (GIR) to strengthen engagement and coordination and "work collaboratively on the

implementation of services and activities for those families enrolled with the GIR."

Through the MOU signed in 2021, the CSOC agencies committed themselves to "champion the delivery of culturally responsive, coordinated, person-centered, interagency services" that are "strength-based, trauma informed, individualized, and designed with family and youth voice and choice to achieve optimal outcomes."

As suggested by CDSS in ACL 22-23, Glenn County intends to use the CSOC as the basis for the ongoing cross-sector collaboration envisioned in the CPP. To ensure broad community representation in the County's cross-sector collaboration work, Glenn County has also invited additional stakeholders to participate in the CPP development process including child and family direct service providers, Tribal representatives, and other community-based organizations and individuals with lived experience.

This working group consisting of the original CSOC partners and other invited stakeholders has been meeting regularly since August 2023. Workgroup members have participated in all decision-making around the development of the CPP.

## ✓ The Vision of the Glenn County CSOC is:

*"To create a single, integrated, strength-based, culturally responsive, trauma-informed, and individualized CSOC multi-agency partnership dedicated to improving the lives of children, youth, and their families, through the timely delivery of comprehensive, coordinated, community-based services and supports."*

**Child-serving agencies agree to provide the following activities and services to coordinate the Children’s System of Care:**

1. Regularly participate in the Glenn County Children’s Interagency Coordinating Council and Blue Ribbon Commission (BRC).
2. Coordinate blended funding and reinvestment of funds to promote the goals of the Children’s System of Care.
3. Provide support or direct services in advocating for the needs of children, youth, and their families.
4. Collect, share, and review consumer and summary data to help manage services, outcomes, resources, program evaluation, and quality improvement, which will include family voice. This may include a multi-disciplinary team (MDT) process.
5. Attend meetings, as scheduled, to coordinate services.
6. Plan and conduct training activities across partner agencies to help enhance coordination and integration of services including training for Child and Family Teams, training for families and youth, and training for caregivers.
7. Collaborate on and coordinate services for youth and families involved in probation to improve outcomes and return youth to the community in a timely manner.
8. Coordinate and integrate services to improve timely access to behavioral health assessments and services—for example, local Katie A. meetings.
9. Assist in the development and delivery of targeted training for Resource Families and Parents.
10. Collaborate and integrate activities among all child-serving agencies to plan and develop alternative education programs.
11. Encourage cross-training opportunities for staff involved in CSOC as referenced above.
12. Provide support or direct services for interagency, multi-disciplinary case management and other service delivery components of the CSOC.
13. Agencies will abide by all mandated statutes for the protection of family/consumer confidentiality. The rights of all will be respected without regard to race, ethnicity, language, religion, gender, sexual orientation, nationality, legal status, health, or disability.
14. Train, evaluate, and implement trauma-informed practices and policies for consumers and staff.
15. Decision-making will be done in accordance with the principles set forth by the Integrated Core Practice Model.



# CROSS-SECTOR COLLABORATION & PARTNER ENGAGEMENT

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

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



## Roster of Cross-Sector CPP Collaborative Participants

### ORGANIZATION

### NAME(S)

First 5 Glenn County	Patricia Loera
Glenn County Child Abuse Prevention Council	Angelica Perez
Glenn County Health & Human Services Agency Behavioral Health	Joe Hallett
Glenn County Health & Human Services Agency Behavioral Health Substance Use Disorder Services	Courtney Gibson, Eloise Jones
Glenn County Health & Human Services Agency Child Welfare Services	Amber Arnold, Matt Doyle, Steve Thalken, Colleen Watkins
Glenn County Health & Human Services Agency Community Action	Shelly Ohlms
Glenn County Health & Human Services Agency Public Health	Laura Medina
Glenn County Health & Human Services Agency Social Services Public Benefits	Robert Thammavong
Glenn County Office of Education	T.J. Gundy
Glenn County Probation	Rick Beatty, Sarah McFadden
Grindstone Rancheria	Aaston Bill
Individuals with Lived Experience	Christina Joven, Mia Villa
Northern Valley Indian Health	Raquel Gomez

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



## Other Cross-Sector Collaboration

Beyond the cross-sector collaboration related to the development of this CPP, there are numerous additional existing forums and collaboratives where cross-sector agencies working with children and families in Glenn County work together.

Around 10 years ago, Glenn County consolidated the Human Resource Agency and Health Services Agency (HSA) into one blended agency to create the Health and Human Services Agency (HHSA). The Behavioral Health (BH) Department, which includes Substance Use Disorders (SUDs) and Mental Health, works closely with CWS to support a Children's System of Care treatment, case coordination, and care model. CWS and BH staff hold bi-weekly "Katie A." meetings to staff shared children's unit cases and plan, coordinate, and collaborate for service delivery. In addition, Behavioral Health staff regularly attend the CFT Implementation meetings and other planning meetings to ensure collaboration across departments and a shared role in implementation of new initiatives and programs. Public Health also provides ongoing support to CWS through providing a public health foster care nurse and public health case manager.

## FAMILY AND CHILDREN'S SERVICES

Several county departments (Behavioral Health, Probation, Office of Education, Community Action Division (CAD), and CWS) work closely to maintain services for Glenn County families, whenever possible. Being a small county with minimum resources helps facilitate relationships between and among these departments. Each department has representatives on the Children's Interagency Coordinating Council (CICC). The CICC meets monthly to oversee a continuum of care throughout the county and provide child abuse prevention through the coordination of funding streams and services, as the CICC also functions as the Child Abuse Prevention Council (CAPC) for the county.

## CHILDREN'S SYSTEM OF CARE

Finalized in 2021 with community and stakeholder input, the Children's System of Care (CSOC) MOU fulfills the requirements of AB 2083 (Chapter 815, Statutes of 2018), which requires each county to develop and implement an MOU setting forth roles and responsibilities of agencies and other entities that serve children and youth in foster care who have experienced severe trauma.

A monthly inter-department CSOC leadership meeting addresses updates with Continuum of Care (CCR) implementation, as well as other CSOC program changes that impact the continuum of care for children across departments. Probation, CWS, Behavioral Health, and sometimes the Office of Education participate in these inter-department monthly meetings. Additionally, HHSA hosts a quarterly meeting with the Grindstone Rancheria and other stakeholders for the tribal community. There is also a monthly Interagency Placement Committee (IPC) meeting, referred to as the Multi Agency Placement (MAP) team that meets to staff group home level placements, youth discharging from hospitalizations, and requests for other intensive service needs. The MAP team consists of CSOC Leadership representatives from CWS, Probation, Public Health, Behavioral Health, Office of Education, local schools, and Far Northern Regional Center.

## CHILDREN'S INTERAGENCY COORDINATING COUNCIL

The Children's Interagency Coordinating Council (CICC) is a Board of Supervisors (BOS)-designated commission within the county. The mission statement of CICC is: To provide a collaborative community forum for coordinating culturally appropriate, multi-disciplinary services and resources to support the needs of children and families to prevent incidents of child abuse and neglect in our county.

The executive council includes the HHSA Director, Superior Court Judge, Chief Probation Officer, and the County Superintendent. The council representatives meet monthly, and they or designees from their respective departments were involved

in the California Child and Family Services Review (C-CFSR) stakeholder meetings to elicit input on the administration of CWS programs and to identify any gaps in the community in order to better prevent or intervene in child abuse.

### **COLLABORATION BETWEEN CWS AND JUVENILE PROBATION**

CWS and Probation have a good working relationship and regular communication. CWS provides CFT support for probation cases. CWS also assists Probation with certifying homes and potential foster parents through the Resource Family Approval (RFA) process. Both CWS and Probation also staff potential non-minor clients (400 W&I) to see which agency can best serve the youth. There is a 241.1 Protocol for staffing potential cases with dual jurisdiction issues and making recommendations to the Court for the best agency to serve the youth. Probation attends CSOC Leadership meetings, MAP meetings, CICC meetings, Blue-Ribbon Commission (BRC) meetings, Commercially Sexually Exploited Children (CSEC) meetings, and other meetings where youth service needs and collaboration are important.

### **COLLABORATION BETWEEN CWS AND INDIAN CHILD WELFARE ACT (ICWA) WORKERS AND TRIBAL SERVICE PROVIDERS**

Although there is only one federally recognized tribe in Glenn County, the Grindstone Rancheria, several tribes are represented, including Wintun, Nomlaki, and Wailaki. Tribal members from these groups live throughout the county. The Grindstone Indian Rancheria Tribal Council was organized several years ago, and is a small, but growing, organization. The Tribal Council has participated with the CICC and many other county groups. Tribal representatives now feel comfortable contacting CWS representatives to problem-solve matters that may arise at the Rancheria. Interaction with the Tribe fluctuates depending on Tribal Council turnover. There are occasionally some conflicts regarding procedures, but after discussion the issues are typically resolved. Glenn County understands the importance of working with the Tribe

and values the positive relationship developed with Grindstone Rancheria. The Grindstone Collaborative, which occurs quarterly, has become a successful venue for sharing resources, communicating agency updates, allowing a forum for problem solving, and an opportunity for relationship building between the Tribe, CWS, and community partners.

### **COLLABORATION WITH MENTAL HEALTH PROVIDERS**

Glenn County Behavioral Health (GCBH) and Northern Valley Indian Health are the two agencies in the county that provide mental health services. Both agencies offer an array of services that include, but are not limited to, substance abuse counseling, mental health treatment for individuals, and group treatment. GCBH also serves youth with a Transition Aged Youth (TAY) community center. GCBH contracts with Youth for Change in Butte County to provide Therapeutic Behavioral Services (TBS) for youth in both home and school settings. There are also a few independent providers. Glenn County CWS also contracts with New Beginnings, Inc., an agency in Butte County that provides additional counseling services including anger management, batterer's treatment, and treatment for sexual perpetrators.

### **COLLABORATION WITH LAW ENFORCEMENT**

Glenn County Sheriff's Office (GCSO) and Orland Police Department are the two main law enforcement agencies in the county. GCSO jurisdiction covers the entire county except for the city of Orland. Additionally, there are the Fish and Wildlife agency, Welfare Fraud investigators with HHSA, and California Highway Patrol.

### **COLLABORATION WITH COMMUNITY AGENCIES**

The Court Appointed Special Advocate (CASA) Program is a collaboration of the court with CWS and the community. CASA supports and promotes court-appointed volunteer advocacy so that every abused or neglected child can be safe, establish permanence,

and have the opportunity to thrive. The local program recruits, trains, and supports volunteers in their work with abused children. CASA operates under the following principles:

- » The court recognizes that CASA volunteers are essential for successful outcomes for children.
- » Every potential donor understands the importance of the CASA mission and places it at the top of their priority list.
- » Every government official at the local, state, tribal, and federal level understands the far-reaching results a CASA volunteer can achieve and places this work at the top of their agenda.
- » Every child can thrive in the safe embrace of a loving family.
- » CASA volunteer base reflects the diversity and cultural makeup of children in the system.
- » CASA is committed to ensuring an equitable and fair outcome for all children—regardless of ethnicity or economic circumstance. This is accomplished through aggressive advocacy and training work within the court and Child Welfare System and by endeavoring to make sure that the volunteer base reflects the diversity and cultural makeup of the children in the system.

A representative from the CASA program attends every review hearing calendared in court. When they hear about a case in need of an advocate, they request an appointment to the case and contact one of the Ongoing Unit supervisors to request copies of the minor's court report and contact information. CASAs have provided incredible support and advocacy for our foster youth, have helped provide transportation for teens to attend trainings, and have facilitated sibling visitation.

The county departments are involved in many collaborative efforts with partners. These collaborations include coordinated or contracted service provision, space-sharing agreements, and shared staff time (as in the case of the CICC Coordinator). Collaborative efforts for coordinated or contracted service provision are supported by MOUs. Glenn County is very willing to engage in collaboration, and this is one of the county's greatest strengths. The County recognizes the inherent benefits to both agency and service recipients. The agencies benefit as utilization of funding, staff, and space resources are maximized and the various roles of participating agencies are delineated. Service recipients benefit by having a team of professionals jointly responsible for providing the best services to meet their needs.

Glenn County observes April as Child Abuse Prevention Awareness month each year. The main event is the annual Child and Family Fair, coordinated and sponsored by the CICC. This event follows the Child Abuse Prevention annual theme and includes family friendly activities, information about child abuse and neglect, prevention topics, prevention resources from non-profit agencies, school programs, and county departments that serve families. Brochures on preventing child abuse and neglect are distributed by the CICC staff to county and community agencies, and pre-k schools to high schools. Local public information bulletin boards also post such information throughout the year. Classroom education is provided for children by Glenn County Health Services in coordination with CICC staff. The "What Tadoo" program is presented for educators, parents, and students in the classroom to prevent abuse and learn about stranger danger. Mandated reporter training is provided in collaboration with CICC to schools, county agency staff, HHSA staff, and any other group that requests it. CWS and CICC staff make themselves available to civic groups, churches, community events, and other opportunities to provide information about child abuse and neglect prevention.

Other established collaborative partners that address prevention and early intervention are:

- » Youth Employment Services (YES), a collaborative of agencies providing employment opportunities, resume writing, funding for work clothes, etc., for at-risk youth. This collaborative serves many youths, and aids in the successful transition from foster care to adulthood. The ILP case manager is also a part of YES.
- » AMPLA Clinics, Inc. The clinic in Hamilton City provides dental screenings, medical examinations, non-emergency treatment, and immunizations to families in the community.
- » Public Health Services provides information and community education on health topics, and conducts outreach and provides services to qualified teens through the Adolescent Family Life and Cal-Learn programs. Utilizing the School Readiness Center, Glenn County Health provides Women, Infants and Children (WIC) services and Mental Health Services that include a parent support group and individual counseling in the private Parent Child Interaction Therapy (PCIT) therapy rooms.
- » Little Learners, sponsored by First 5 Commission, is designed to provide supportive and preventative early mental health services, including activities to increase the skills of parents and their connection to the community.
- » Local Child Care Planning Council, Glenn County Office of Education. The Local Childcare Planning Council (LPC) works to improve the quality and quantity of childcare services in Glenn County. The council administers a program to monetarily support childcare providers that continue their education in the areas of Child Development and Early Childhood Education. The LPC also monitors legislation that affects the delivery of childcare services and supports area trainings for all individuals working with families and children.

## BUTTE-GLENN OPIOID SAFETY COALITION

The Butte-Glenn Opioid Safety Coalition (BGOSC) was founded in 2013 by the Butte-Glenn Medical Society as a collaborative workgroup dedicated to eliminating preventable opioid-related deaths in both Butte and Glenn Counties by improving interpersonal cooperation and resource-sharing between local organizations and individuals already working to help residents overcome their struggle with opioid use disorder.

### Butte Glenn Opioid Safety Coalition Accelerator Data Dashboard

This dashboard contains data collected on a semi-annual basis by the California Overdose Prevention Network and the California Department of Public Health. It showcases key data and indicators related to different areas of coalition progress and growth.



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#### Coalition Successes



**35 participants hosted**

- Hosted a virtual Opioid Symposium with 35 participants, including 4 opioid coalitions from the region.
- Event promoted substance use navigator programs and the expansion of the Hub and Spoke System in the region.



**300 providers reached**

- Held an Opioid Summit on MAT.
- Reached an audience of 300 plus providers on how increased access to MAT is needed.



**Coalition infrastructure strengthened**

- Continued meeting virtually during the pandemic.
- New governance structure has promoted project management, sustainability, and cohesion.
- Hired new staff including PHES and VISTA member.

#### Coalition Challenges



**Promoting MAT**

- Address reluctance to prescribe Buprenorphine and offer MAT services.
- The pandemic affected the availability of staff to work on opioid related projects.



**Partnership building**

- Improve communication strategies to increase recruitment of possible partners.
- Promote establishment of strong relationships.
- Loss staff members so progress with grants were limited.



**Community engagement**

- Reach the community and increase understanding of OUD, MAT, and harm reduction services.
- Increase community understanding of how stigma affects the care people receive.
- Feedback for improvement is limited due to a lack of participation with coalition members.

Source: <https://www.bgmsonline.org/opioid-coalition/butte-glenn-opioid-safety-coalition/>

# TRIBAL CONSULTATION & COLLABORATION

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Glenn County maintains a strong working relationship with the one federally recognized tribe within the county, the Grindstone Indian Rancheria of Wintun-Wailaki Indians.

## **ONGOING TRIBAL COLLABORATION**

In May 2023, CDSS issued ACL 23-49 requiring counties to establish coordinated processes for engaging Tribes through their Systems of Care (SOC). Accordingly, in August 2023 Glenn County HHSA formalized an MOU with Grindstone Indian Rancheria (GIR) to “work collaboratively on the implementation of services and activities for those families enrolled in the GIR.” The goals of the MOU between Glenn County HHSA and GIR are:

- A. to protect the best interests of Indian children by aiding in the prevention of child abuse and neglect with families enrolled in the GIR;
- B. to improve access to resources and services for Indian families;
- C. to improve desired outcomes for Indian families; and
- D. to establish a process, through tribal consultation with GIR, to engage and coordinate regarding the ongoing implementation of the System of Care MOU.

As a follow-up to the MOU with Grindstone Indian Rancheria, Glenn County Children’s System of Care (CSOC) issued a Tribal Consultation Policy “to assist the Interagency Leadership Teams (ILT), in consultation with Tribes, to tailor their own consultation efforts, resources and timelines.”

HHSA and other community partners meet quarterly with Grindstone Indian Rancheria for a collaborative meeting to discuss the needs of the Grindstone community and Native American population in the county. Transportation has been a big barrier for individuals and families in the Grindstone community, as well as general access to resources because of how distant and rural this community is in relation to Willows and Orland where the majority of Glenn County residents reside.

The Grindstone Rancheria Tribal Council has demonstrated interest and enthusiasm in being involved in county-wide efforts to prevent child abuse and neglect. A Tribal Council representative is a member of the Children’s Interagency Coordinating Council (CICC) and this involvement has created an additional subcommittee of the CICC known as the Grindstone Collaborative, which helps to ensure the best possible outcome for Native American children.

Northern Valley Indian Health (NVIH) also has a presence in Glenn County, including a clinic in Willows. NVIH provides health services and other supportive services to any county resident with American Indian ancestry, as well as the general public. The HHSA has a good working relationship with NVIH, which is a valuable resource in a community with limited access to medical services and transportation. NVIH has an array of services from medical and dental to wellness, counseling, and medication management as well as substance abuse treatment and recovery programs.

**Representatives from both Grindstone Rancheria and NVIH have been included in Glenn County’s Cross-Sector Team for development of this CPP.**



### **Tribal Coordination Related to the Family First Prevention Services Act and Glenn County Comprehensive Prevention Plan**

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

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

Going forward, Glenn County will continue to engage Tribal representatives through the cross-sector collaborative overseeing implementation of the CPP, and commits to engaging the Tribe in decision-making and in future reviews of and amendments to the CPP.

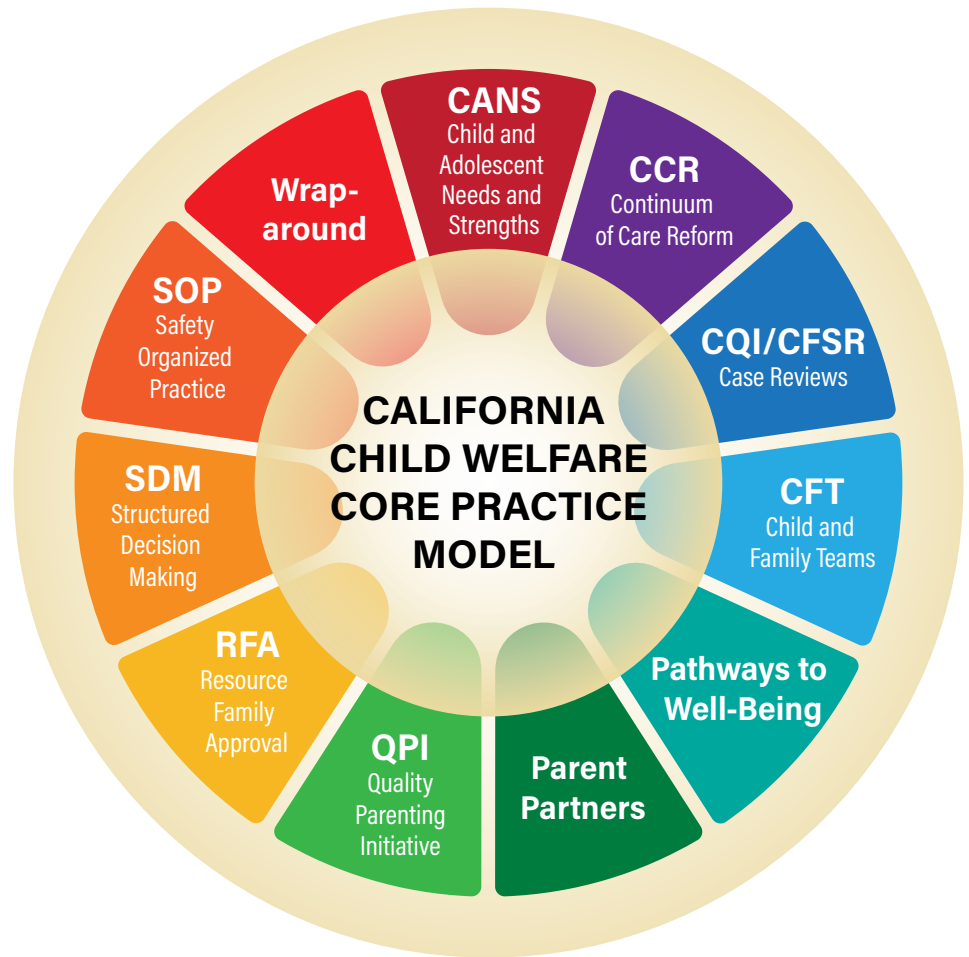
# INTEGRATED CORE PRACTICE MODEL

Glenn County HHSA continually works to embed the vision, values, and principles of California's Integrated Core Practice Model (ICPM) into its work with children and families. Child Welfare Services, Probation, and Behavioral Health utilize ICPM in Children's System of Care (CSOC) Leadership meetings, Katie A. Meetings, Child and Family Team (CFT) meetings, supervision, and in social work practice to help provide a set of behaviors and values to the work done with families and when collaborating across systems.

The ICPM is a practice shift in California in which children, youth, and families are centered in the development of plans to meet their individualized needs.

The principles and strategies of ICPM were integrated into all aspects of development of this CPP, and the Cross-Sector Team formed for development and oversight of the CPP includes representation from a broad range of child- and family-serving public agencies and community based-organizations as well as individuals with lived experience with the child welfare system. These Cross-Sector partners were invited to monthly meetings to help identify community needs and service gaps, identify target populations and service objectives, and develop strategies for meeting the needs of children and families in Glenn County.

Looking ahead, Glenn County remains committed to continuing to incorporate ICPM into all the prevention programs and services envisioned in this CPP, including implementation of the plan, expansion of program and services, and future changes to prevention planning and service delivery.










# TARGET CANDIDACY POPULATIONS & NEEDS ASSESSMENT

## Local Assets & Needs Assessment

Data snapshots and previous community studies completed in Glenn County were reviewed in the process of developing this CPP, including:

-  Glenn County 2022 Child & Family Services Review County Self-Assessment
-  Glenn County 2017-2022 Child & Family Services Review System Improvement Plan
-  First 5 Glenn County Strategic Plan 2019–2024
-  Glenn County Mental Health Services Act 2021-2023 Three-Year Plan & Annual Prevention and Early Intervention and Innovation (PEI-INN) Evaluation Report
-  Glenn County Mental Health Services Act Stakeholder Survey Results—February 2023

The findings from these community studies were supplemented with data retrieved from the California Child Welfare Indicators Project, County Health Rankings, and the U.S. Census.



## Summary of Community Needs

Based on the review of previous community studies and data, the four main pillars of challenge related to child welfare system involvement in Glenn County are substance abuse, mental health issues, poverty and economic insecurity, and domestic violence, coupled with and exacerbated by significant barriers to accessing supportive services to address these challenges.



### SUBSTANCE ABUSE

Drug abuse is one of the largest challenges putting families and children at risk of child welfare system involvement, according to the Glenn County 2022 Child & Family Services Review County Self-Assessment (CSA). The CSA states, “Most cases are the

direct result of parental substance abuse, primarily involving methamphetamine, heroin, marijuana, alcohol, and prescription medications.” One in five adults in Glenn County (20%) reported binge or heavy drinking, according to data retrieved from County Health Rankings (CHR). Multi-generational substance abuse is further highlighted as a risk factor in both the CSA and Glenn County 2017-2022 System Improvement Plan (SIP). The CSA highlights the connection between substance use disorders (SUD) and child maltreatment. “Family life for children with parent(s) who suffer from SUD is often chaotic and

unpredictable,” the CSA states. “Children’s basic needs (e.g., nutrition, supervision, nurturing, etc.) may go unmet, which can result in neglect” (USDHHS, 2014).

Barriers to accessing needed treatment further compound substance abuse challenges in Glenn County. Multiple community studies indicate that limited inpatient SUD treatment services exist within the County. Moreover, the nearest opiate medical treatment program is in a neighboring county, according to the CSA.



### MENTAL HEALTH ISSUES

Mental health issues for both parents and children are another community challenge driving child welfare system involvement. According to CHR, the suicide rate in Glenn County was more than double that of California overall,

and approximately one in six adults in Glenn County (16%) reported experiencing frequent mental distress. The CSA highlights, “In reunification cases, there are often long-standing substance abuse and/or mental health treatment needs for parents.” Additionally, the SIP notes “an influx of older teens into CWS and Probation with emotional/behavioral issues,” while the CSA highlights a focus group finding that “Youth have higher acuity, intense anger and more violent tendencies that are observed in their interactions with peers and teachers.”

Lack of access to needed mental health services further exacerbates this community challenge. A shortage of providers is one factor negatively impacting access; Glenn County’s ratio of population to mental health providers (630:1) far exceeds the state ratio (240:1), according to CHR. The MHSA 2021-2023 Three-Year Plan (MHSA Plan) also notes a shortage of psychiatrists and other mental health clinicians available to deliver services. Moreover, more than one in three respondents (34%) who participated in a 2023 MHSA

### Glenn County’s Four Main Pillars of Challenge



Stakeholder Survey reported that resource limitations (e.g., financial and transportation) and long wait times for appointments were barriers that made it harder for individuals and family members to access mental health services.



### **POVERTY AND ECONOMIC INSECURITY**

Poverty and resource inequality is also a major issue in Glenn County, and it disproportionately impacts people of color in the community. According to CHR, the median household income in Glenn County (\$56,700) is substantially lower than the state average (\$84,900). The 2017–2021 American Community Survey (ACS) reports that 15.1% of the population of Glenn County lives below the poverty line. ACS data further reveals that Hispanic or Latino (16%), American Indian or Alaska Native (24%), multi-racial (27%), Asian (48%), and Black (57%) individuals are all more likely than their White (12%) counterparts to be experiencing poverty.

The SIP notes that poverty, homelessness, and food shortage put children at risk. More than one in five children (21%) live in poverty and more than one in eight (13%) individuals in Glenn County lack adequate access to food, according to CHR. The CSA finds that “The ongoing struggles in the county include broad, systemic challenges in access to housing, employment, and consistent water.” Moreover, it highlights the intersection between poverty and other community challenges, stating, “Many SUD clients in Glenn County are in poverty and have limited resources like transportation, housing and food insecurities and so engaging them in treatment services can be difficult when they are struggling to meet other basic needs.”



### **DOMESTIC VIOLENCE**

Community studies also indicate that domestic violence poses a risk to children and families. The CSA finds that domestic violence “is also a common risk factor” for child welfare involvement and states, “domestic violence in the home can result in a general neglect allegation, because a parent may be unable to keep their children safe in the presence of family violence.” Additionally, according to the MHSA Plan, “Glenn County domestic violence statistics are higher than any other in the state. Many charges and problems are not pursued because victims would need to uproot their children to flee the problem by accepting help from another county.”

#### **Intergenerational Poverty and Trauma, Social Isolation, and Difficulty in Accessing Support Services**

The four pillars of need highlighted above are often the tangible manifested behaviors and issues resulting from underlying unresolved trauma, and the intergenerational nature of adverse childhood experiences (ACEs) and child welfare system involvement has been well documented. These issues are also exacerbated when families are experiencing social isolation—a community challenge that has accelerated since the COVID-19 pandemic.

## THE IMPORTANCE OF SOCIAL CONNECTION TO CHILD AND FAMILY WELL-BEING

In May 2023, the U.S. Surgeon General released *Our Epidemic of Loneliness and Isolation*, a report documenting the impacts of social isolation on individual and community health.

The report notes that social connection is “an important social determinant of health, and more broadly, of community well-being,” and individuals lacking social connection are at increased risk of major health and mental health challenges including anxiety, depression, and suicide. Yet isolation has been increasing for decades in the United States, and in recent years about half of American adults report experiencing loneliness. The COVID-19 pandemic further exacerbated these trends, and a 2022 study found that just 39% of adults in the U.S. feel very connected to others. Ominously, the declines in social participation have been “starkest for young people ages 15 to 24,” and young adults “are almost twice as likely to report feeling lonely than those over 65,” indicating that these underlying trends are continuing to accelerate. Meanwhile, just one in five individuals who experience continuous loneliness and isolation “recognize it as a major problem.”

As noted earlier, the community challenges described above are also compounded by a lack of access to stable housing and supportive services and resources within Glenn County. The 2022 Point in Time (PIT) Count in Glenn County identified 61 households with children experiencing homelessness. Community studies further indicate that the location of services, limited number of community-based organizations in the county, and lack of transportation to certain geographic areas pose substantial barriers. The CSA highlights Glenn County’s rural layout and states, “Resources are minimal or non-existent in areas outside Willows and Orland. Rural areas also suffer the greatest from poverty and substance abuse, which in turn negatively affects the ability to travel to service providers.” Lack of transportation is particularly an issue for Native American families in the Grindstone community, as well as “general access to resources because of how distant and rural this community is in relation to Willows and Orland where the majority of Glenn County residents reside.” The CSA further notes that Glenn County contracts with private contractors in other counties “due to a lack of community-based organizations” within the county. The MHSA Plan finds there is an “ongoing need to hire bilingual, bicultural staff” as “[t]he County’s Hispanic monolingual community continues to grow” and that hiring “remains difficult.”

As a result of these community challenges and resource limitations, Glenn County has a much higher rate of child maltreatment than the state average. In fact, the rate of children with child maltreatment substantiations in Glenn County is nearly twice the state rate (11.9 per 1,000 children in Glenn County vs. 6.1 per 1,000 children across the state), according to 2022 data retrieved from the California Child Welfare Indicators Project. Additionally, the rates of reports of abuse or neglect (78.9 versus 49.6) and children/youth ages 0-17 in foster care (7.6 versus 5.2) in Glenn County far exceed the state average.

CSA stakeholders and focus groups indicate that the populations at greatest risk of maltreatment in Glenn County are substance-exposed infants; children ages 0-5, especially those in families struggling with poverty, mental illness and/or substance abuse; and children with disabilities.



## IMPACT OF RECENT NATURAL DISASTERS

A multitude of natural disasters, including devastating wildfires, water shortages, and the COVID pandemic, have placed additional stress on families in Glenn County over the past five years.

The CSA highlights the impact of these natural disasters.

- ✓ **Wildfires:** “Like much of California, Glenn County and its neighboring counties have been touched by many devastating wildfires. In 2018, the Mendocino Complex burned for almost six months from mid-summer to early January of 2019, and the August Complex fire occurred in the summer of 2020 (starting in August and going through November). The Butte County Camp Fire in 2018 was the deadliest and most destructive wildfire in California history. Glenn County (and its neighboring counties) continue to be the home of many who had to relocate.”
- ✓ **Water Insecurity:** “More recently and starting in the summer of 2021, many wells have gone dry, which has caused water insecurities and required the transportation of non-potable water to hundreds of Glenn County residents and resulted in a temporary moratorium placed on the drilling of new ag wells.”
- ✓ **COVID Pandemic:** “COVID-19 has also had a significant impact on Glenn County, including community losses, workforce recruitment and retention issues, and much more.” “It is very likely,” the CSA further finds, “that the pandemic and subsequent economic fallout will have significant impacts on child welfare outcomes for years to come.”

The populations at the highest risk for social disconnection include many of the same families at risk of child welfare system involvement, including those who experience discrimination or marginalization as well as those experiencing physical and mental health challenges and/or disabilities, financial insecurity, and domestic violence, as well as single parents. These families are often already struggling with a range of stressors which can increase the likelihood of child maltreatment. If they happen to be experiencing social isolation, that can have a major compounding effect as “being isolated or in poor quality relationships can increase the likelihood that one perceives challenges as stressful,” and this stress “may be heightened because the individual has less support and fewer resources to draw upon to cope with the situation.” Conversely, families with high levels of social connection are more likely to experience better child and family health and well-being.



## Candidate Groups & Data Estimates

California’s Title IV-E Prevention Plan (Five-Year State Prevention Plan) lists 12 “candidate” groups that the State identifies as the target populations for federal Title IV-E prevention funding. To be eligible for federal reimbursement, these “candidates for foster care” must be determined to be at “imminent risk” for foster care entry.

Data extracted in 2020 from the Structured Decision-Making (SDM) system and provided to Glenn County by the California Department of Social Services indicates that **233** children received a risk assessment score of “high” or “very high” while **144** children had at least one identified safety threat. These numbers provide a reasonable approximation of how many children in Glenn County may meet the “imminent risk” standard for eligibility for federal reimbursement for prevention services.

To further assess the individual candidate groups eligible for services in Glenn County, the CPP cross-sector collaborative pulled data from numerous systems and sources to provide estimates on the number of children within the County for each target population.

Candidate Group/Target Population with Description and State Data	County Estimate
<p><b>Children in Families Receiving Voluntary or Court-Ordered Family Maintenance Services</b></p> <p>Children in Families Receiving Voluntary or Court-Ordered Family Maintenance services who are also determined to be at imminent risk for foster care will be eligible to receive services under the Title IV-E Prevention Program. These services are the traditional pathway to prevent entry into foster care and may also be provided after reunification to prevent reentry. During SFY 2019-20, there were 12,064 Voluntary Family Maintenance (VFM) cases in California, of whom 991 (8%) were removed within 12 months and placed in foster care. In that same year, there were 37,769 court-ordered Family Maintenance (FM) cases in California, of whom 3,878 (10%) were removed within 12 months and placed in foster care. FFPSA provides an opportunity to expand service capacity to this population.</p>	33
<p><b>Probation Youth</b></p> <p>Probation youth subject to a petition under section 602 of the Welfare and Institutions Code (WIC), and for whom the probation department determined to be at imminent risk for foster care per a state-approved assessment tool, will be eligible to receive services under the Title IV-E Prevention Program. Per CDSS data, in any given month, approximately 3,900 probation youth per month in California have been determined to be at “imminent risk” of foster care.</p>	2
<p><b>Guardianship/Adoption at Risk of Disruption</b></p> <p>Children whose guardianship or adoption arrangement is at-risk of disruption and who are also determined to be at imminent risk of foster care will be able to receive Title IV-E prevention services. These are non-reunified children and youth who have exited foster care to some form of permanency and are at risk of re-entry due to disruption of that permanency arrangement according to an approved assessment tool.</p> <p>In SFY 19-20, 1,092 children, or four percent of children from the entering cohort, were in adoption or guardianship arrangements prior to detention.</p>	5

Candidate Group/Target Population with Description and State Data	County Estimate
<p><b>Children with Substantiated/Inconclusive Allegation</b></p> <p>Children with a Substantiated or Inconclusive Disposition of a child abuse or neglect allegation, but no case opened, will also be eligible for Title IV-E Prevention Services if the child is at imminent risk of foster care. Per CWS/CMS, from March 2020 to March 2021, a total of 360,673 referrals were made reporting allegations of child abuse or neglect. Of those referrals, 40,761 (11.3%) were substantiated, meaning that more likely than not child abuse or neglect had occurred. Inconclusive referrals made up 79,394 (22%), meaning that the findings cannot be made as to whether child abuse or neglect has occurred due to insufficient evidence. Of the substantiated dispositions, 16,292 (11.3%) were closed after investigation, while 63,947 (44.1%) of inconclusive dispositions were closed after investigation.</p>	393
<p><b>Children w/Siblings in Foster Care</b></p> <p>Children who have siblings in foster care, and who are determined at imminent risk of foster care will be eligible to receive Title IV-E prevention services. Siblings have been defined by statute as children or youth related by blood, adoption, or affinity through a common legal or biological parent (in essence- full, adopted, or half siblings through both biological and legal parents). In SFY 2019-2020 there were 8,144 children in California who were not in foster care themselves, who had a sibling in foster care. It is presumed that circumstances that necessitate one child entering care may also impact the child that remains at home. In these instances, Title IV-E prevention services could be provided in order to prevent additional children in the family entering care.</p>	4
<p><b>Homeless/Runaway Youth</b></p> <p>Homeless or runaway youth who are determined to be at imminent risk of foster care can receive Title IV-E prevention services. While state law provides that the homelessness itself is not a basis for removal, for those who are assessed to be candidates, Title IV-E prevention services provide the opportunity to keep families together by directly addressing certain root causes of homelessness, such as mental health and substance use disorders.</p>	134
<p><b>LGBTQ Youth</b></p> <p>The LGBTQ youth who are determined to be at imminent risk of entering foster care may also receive prevention services. Nationwide, 30% of children in out of home care identify as LGBTQ. One in five youth in juvenile justice facilities identify as LGBTQ. There is a higher risk of suicide for LGBTQ than their heterosexual peers and they are disproportionately represented amongst homeless and trafficked youth.</p>	<i>Unable to find accurate local data</i>
<p><b>Substance-Exposed Infants</b></p> <p>Substance-exposed newborns who are also determined to be at imminent risk of entering foster care, will be eligible to receive Title IV-E prevention services. Substance-exposed newborns are defined as infants born and identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including both illegal and prescribed drugs.</p>	<i>Unable to find accurate local data</i>
<p><b>Trafficked Children and Youth</b></p> <p>Trafficked children and youth who are determined to be at imminent risk of entering foster care will be eligible to receive Title IV-E prevention services. These are children and youth who have experienced commercial sexual exploitation (CSE), as defined in WIC section 300(b)(2). During SFY 2019-20, there was an average of 1,081 youth identified as victims of CSE by child welfare and probation, with 275 (25%) of those youth being newly identified within this timeframe. Title IV-E funded prevention efforts will be essential for addressing the exploitation of vulnerable youth at risk for entry into foster care due to being trafficked, based upon the use of an approved assessment tool for this specialized population.</p>	2

Candidate Group/Target Population with Description and State Data	County Estimate
<p><b>Children Exposed to Domestic Violence</b></p> <p>Children exposed to domestic violence who are determined to be at imminent risk of entering foster care will also be eligible to receive Title IV-E services. Between February and September of 2020, a total of 34,433 “Emotional Abuse” referrals were screened in for investigation. Of those, 23,409 (67.98%) had the “Exposure to Domestic Violence” indicator selected. Title IV-E funded prevention services stand to bolster the protective capacity of the non-abusing caretaker, thus preventing the child’s entry into foster care.</p>	88
<p><b>Children w/Caretaker Experiencing Substance Use Disorder</b></p> <p>Children whose caretakers experience a substance use disorder who are also determined to be at imminent risk of entering foster care will also be eligible to receive Title IV-E prevention services. These are children living in households with at least one parent who has a substance use disorder and are at increased risk for child maltreatment and child welfare involvement compared to other children. The children who are at a greater risk may be affected by trauma due to parental neglect, the results of their own prenatal substance exposure, or chaotic environments. Title IV-E funded prevention services can support parents in accessing substance use treatment and develop parenting skills to help to reduce the effects of parental substance use disorders on their children.</p>	76
<p><b>Other Serious Risk Factors</b></p> <p>Children or youth experiencing other serious risk factors that when combined with family instability or safety threats would be assessed to be at imminent risk of foster care. Families of such children may be served under the Title IV- E prevention program when services identified in the state’s prevention plan may provide interventions that mitigate risk of entry into foster care. Examples include: Current or recent (within 6 months) family involvement with social services agency.</p> <ul style="list-style-type: none"> <li>▪ A change in family relationships characterized by frequent conflict or violence;</li> <li>▪ Recent increase in substance use that impacts daily functioning and ability to care for the child or youth;</li> <li>▪ Recent incident in which a parent or guardian made a plausible threat to cause serious physical harm to a child or youth;</li> <li>▪ Incarceration of the caregiver;</li> <li>▪ Child or youth participated in criminal activity; and</li> <li>▪ Other recent or current circumstance that may cause family instability or a threat to the child/youth’s safety or well-being.</li> </ul>	N/A

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

Candidate Group/Target Population with Description and State Data	County Estimate
<p><b>Expectant and/or parenting youth in foster care</b></p> <p>Youth in foster care who are expectant, pregnant and/or parenting</p>	2-3



# Target Populations–Phase 1

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

Accordingly, Glenn County intends to focus on the following five service objectives during Phase 1 of the implementation of this CPP. These service objectives respond to the identified community needs, apply within and across the state-identified candidate groups, and will guide decision-making around program development and investment.

The five service priorities Glenn County intends to advance in Phase 1 of CPP implementation are:

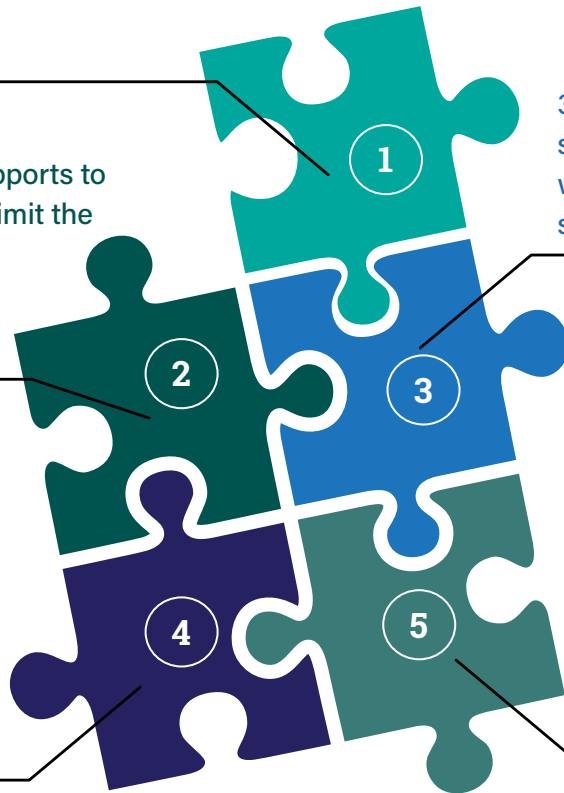
1. Providing community-based pathways to preventive services outside of the traditional child welfare system through enhancement of the Family Services Unit

2. Providing concrete supports to strengthen families and limit the need for child welfare system involvement

3. Delivering trainings to strengthen the capacity of the workforce to comprehensively support children and families

4. Expanding the availability of in-home preventive services

5. Addressing the complex behavioral challenges experienced by youth



## COMMUNITY PATHWAY MODEL

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

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

Because they lack the stigma sometimes associated with public child welfare agencies and therefore maintain a deeper level of trust in the community, CBOs delivering a Community Pathway model are likely to be able to increase support service utilization by families

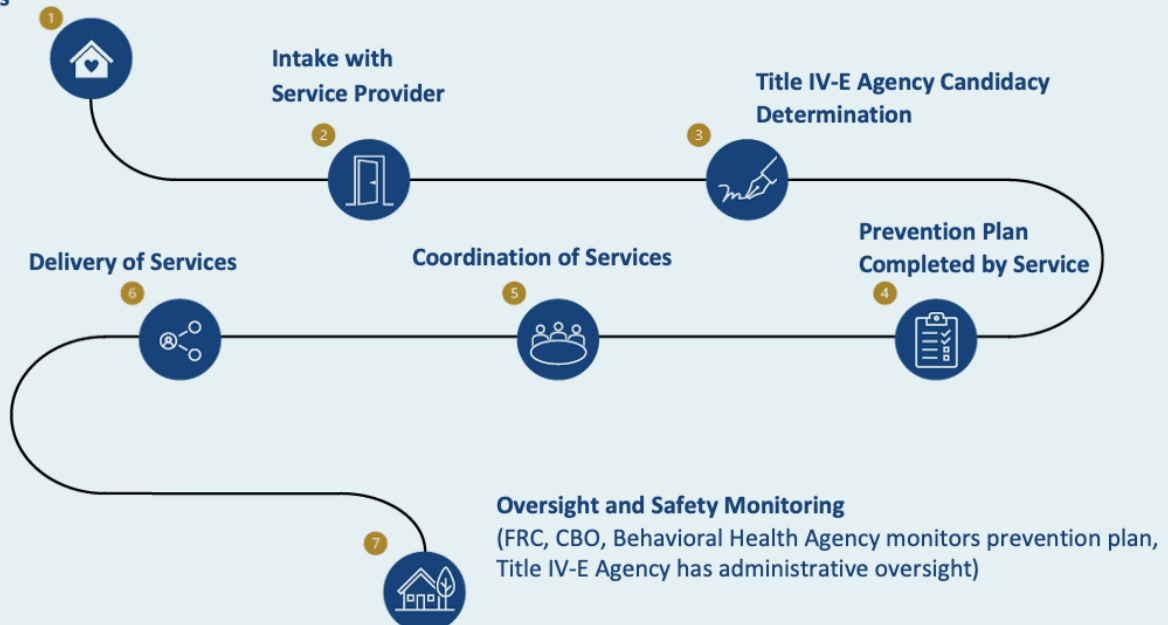
experiencing challenges while improving child and family outcomes and advancing equity. This vision is consistent with the intentions of Glenn County’s existing Differential Response (DR) program.

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

- » Safety assessment, training, and monitoring protocols for CBO staff
- » State and federal funding available to support Community Pathway administrative functions across CBOs and public agencies
- » Integration of existing Differential Response (DR) programs
- » Eligibility determination processes
- » Ongoing communication and reporting between CBOs and public agencies
- » Legal liability across the CBOs and public agencies

## COMMUNITY PATHWAY: THROUGH THE LENS OF AN INTEGRATED PRACTICE MODEL

**Family in Need of Supports and Services**

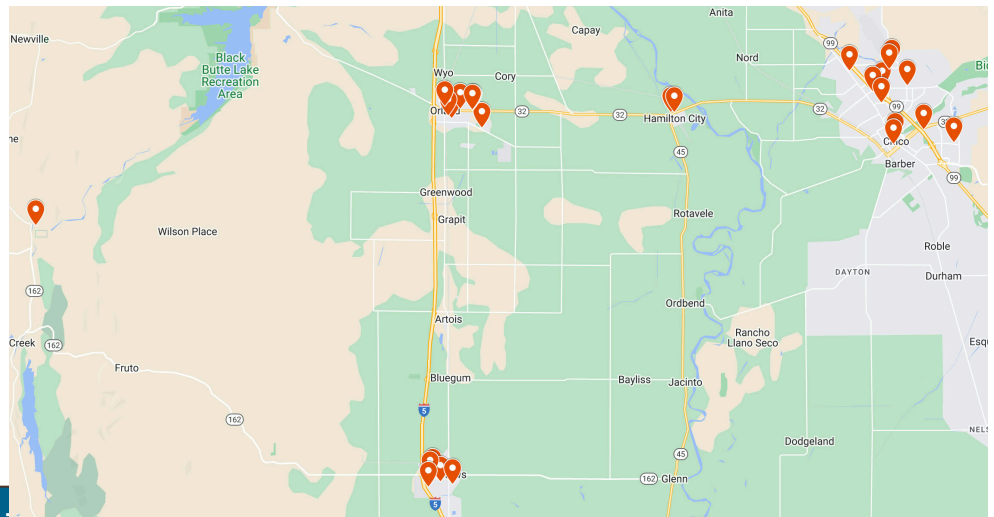


# SERVICES/ASSET MAPPING

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

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

Below is a list of the current programs with descriptions and links to their websites. All agencies and organizations are plotted on the asset map:



Agency	Description
<a href="#">First 5 Glenn County</a>	First 5 Glenn County makes decisions that aim to improve the lives of children ages 0 to 5, pregnant women, and their families. First 5 Glenn County funds Early Learning Education; Adult and Professional Education; Prenatal, Infant, Toddler and Child Health; Dental; and Mental Health as well as Child Care Referrals and oversight support for all other programs that promote Early Childhood Development in Glenn County.
<a href="#">Glenn County Behavioral Health Department</a>	Glenn County Behavioral Health offers a variety of substance use services, outpatient services, mental health support, and outreach/prevention.
<a href="#">Glenn County Community Action</a>	The Community Action Department (CAD) manages a variety of grant-funded programs including emergency services, housing services, and income and employment. CAD also offers community services and development for low-income seniors, youth, and families. CAD serves as the Lead Agency for the Colusa-Glenn-Trinity Community Action Partnership and the Dos Rios Continuum of Care, which serves Colusa, Glenn, and Trinity counties.
<a href="#">Glenn County Office of Education (GCOE)</a>	GCOE's mission seeks to develop literate, educated thinkers and achievers. GCOE aims to meet students' needs by taking into account individual learning modalities; assessing students on an ongoing basis; hiring, supporting, and continuously training quality teachers and staff; working closely with students and county partners to assure full support for student success; and establishing staff accountability for producing positive outcomes.

Agency	Description
<a href="#"><u>Glenn County Probation Department</u></a>	<p>The mission of the Glenn County Probation Department is to provide cost-effective services to the community that promote the safety and protection of citizens by holding offenders accountable in a manner that respects the rights and dignity of the individual by guiding and shaping pro-social behavior through the judicious application of sanctions and services to help offenders acquire the proper skills to facilitate their rehabilitation into law abiding, contributing members of society.</p>
<a href="#"><u>Glenn County Public Health</u></a>	<p>Glenn County Public Health provides services for physical and environmental health, disease prevention, family planning, and disability.</p>
<a href="#"><u>Glenn County Social Services</u></a>	<p>Glenn County Social Services include health and human services, low-income programs, and government benefits. The office oversees these programs to provide a social safety net and protect children, the elderly, and vulnerable adults. Social Services handles the following programs: CalWORKs, CalFresh, Child Care, General Assistance, Medi-Cal, Welfare to Work, Victim Services, Youth Programs, and Family Programs.</p>



Organization	Description
<a href="#"><u>Adoption Choices</u></a>	Adoption Choices provides women with health information so they can become knowledgeable about their normal life stages. They also provide women support, education, self-help, and services so that they can make the best health care decisions for themselves.
<a href="#"><u>Catalyst Domestic Violence Services</u></a>	A non-profit organization that aims to reduce the incidence of intimate partner violence through crisis intervention services, community education, and the promotion of healthy relationships.
<a href="#"><u>Community Housing Improvement Program</u></a>	Community Housing Improvement Program (CHIP) is a private, non-profit 501(c)(3) corporation serving Butte, Glenn, Tehama, Shasta, Sutter, Yuba, and Colusa counties. CHIP assists low-income and rural disadvantaged residents, seniors, and others who lack financial resources or knowledge to improve or provide adequately for their housing.
<a href="#"><u>Court Appointed Special Advocate (CASA) Program of Glenn County</u></a>	A CASA is a trained volunteer appointed by a judicial officer to provide advocacy for a child who is under the jurisdiction of the Court due to abuse or neglect. The CASA serves as the “eyes and ears” of the judge for children in foster care.
<a href="#"><u>Discovery House</u></a>	Discovery House is a drug treatment facility focusing on substance abuse treatment services, providing substance abuse treatment with outpatient care. Persons with dual diagnosis or co-occurring disorders, pregnant or postpartum women, women, and criminal justice clients are supported for drug rehab.
<a href="#"><u>EA Family Services</u></a>	EA Family Services (EA) is a private nonprofit corporation that provides a variety of services to children and young adults. The vision of EA is to support healthy relationships and create opportunities through a community-focused company built on the strengths and dedication of its people.
<a href="#"><u>Glenn County Office of Education—Preschool and Childcare Enrollment Services</u></a>	<p>GCOE Child and Family Services provides Early Head Start/child care and Head Start/State Preschool services to families and children in Glenn County. They serve prenatal mothers, children 0 to 5 years of age, and children with special needs or disabilities. All services are free or at low cost to eligible families.</p> <p>Early Head Start/child care provides services to prenatal mothers and children 0–3 years of age with the following program options:</p> <ul style="list-style-type: none"> <li>▪ <a href="#"><u>Chapman C—Toddler</u></a></li> <li>▪ <a href="#"><u>Hamilton City—Infant/Toddler</u></a></li> <li>▪ <a href="#"><u>Tehama St. Children’s Center—Infant/Toddler</u></a></li> </ul> <p>Prenatal/Home Base Program Head Start/State Preschool provides services to children 0-5 years of age with the following program options:</p> <ul style="list-style-type: none"> <li>▪ <a href="#"><u>Chapman A</u></a></li> <li>▪ <a href="#"><u>Chapman B</u></a></li> <li>▪ <a href="#"><u>Tehama St. Children’s Center—Preschool</u></a></li> <li>▪ <a href="#"><u>Villa</u></a></li> <li>▪ <a href="#"><u>Hamilton City Preschool—Side A</u></a></li> <li>▪ <a href="#"><u>Hamilton City Preschool—Side B</u></a></li> </ul>

Organization	Description
<a href="#"><u>Glenn County Office of Education—Resource Referral &amp; Payment Program</u></a>	The Child Care Resource Referral & Payment Program offers parents a variety of child care options which are subsidized by federal and state funding. Parents choose the child care option and provider that best meet their needs. Child care subsidy is available to families who are in need of respite child care, working, job seeking, or are in school or training. Children ages 0-12 are eligible for subsidized services without regard to their immigration status or the status of their parents, unless under a final order of deportation. The program is designed to be supportive of family relationships and provide information to parents on how to choose quality child care.
<a href="#"><u>Harmony House</u></a>	Harmony House is a community-focused center that encourages and promotes health and wellness by offering a variety of groups and activities.
<a href="#"><u>Legal Services of Northern California</u></a>	The mission of Legal Services of Northern California is to provide quality legal services to empower the poor to identify and defeat the causes and effects of poverty within our community, efficiently utilizing all available resources.
<a href="#"><u>New Beginnings Counseling Center</u></a>	New Beginnings Counseling Center is a mental health services center that offers comprehensive counseling and therapeutic support to individuals, couples, families, and groups. They help clients navigate various challenges such as relationships, family dynamics, mental health conditions, personality disorders, and legal issues.
<a href="#"><u>Northern Valley Indian Health</u></a>	Northern Valley Indian Health (NVIH) is a private, nonprofit tribal corporation that provides Healthcare Services for Native Americans and all community members. NVIH focuses agency efforts on establishing and maintaining an effective and efficient health care system, which ensures services are accessible, available, and of high quality.
<a href="#"><u>Planned Parenthood</u></a>	Planned Parenthood provides health care for women, men, and teens. They provide a range of reproductive and general health services including birth control, prenatal care, pregnancy testing, STD screening and treatment, sterilization and counseling, and other services.
<a href="#"><u>Remi Vista</u></a>	Remi Vista is a nonprofit corporation that provides therapeutic services for youth and families who have either been placed in out-of-home care or who are considered to be at risk for such placement. Remi Vista is licensed by the Department of Social Services to provide group home, foster care, and transitional housing placement programs, and is contracted as an organizational provider of specialty mental health services with many counties in California.
<a href="#"><u>Rowell Family Empowerment</u></a>	Rowell Family Empowerment of Northern California is a parent-founded and parent-run organization specifically funded to provide direct services to families with children with disabilities ages birth to 22. A child may have a diagnosis, may be at risk, or the parents may be concerned and would like to seek an evaluation. They provide guidance to families who may not be familiar with the special education system by providing support, training, and parent consultation services.
<a href="#"><u>Sierra Forever Families</u></a>	Sierra Families provides a continuum of care to empower youth and families to overcome challenges together, and connects youth in foster care to permanent, loving families. The organization provides the following array of comprehensive programs: family advocacy and support; behavioral and mental health services; juvenile justice intervention; mentoring; foster care; adoption services; and pre- and post-adoption support.
<a href="#"><u>Unity in Recovery</u></a>	Unity in Recovery provides a community outreach center, counseling for recovering substance abusers, and clean and sober living houses.

# EVIDENCE-BASED PROGRAMMING

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

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

Providers were also surveyed about whether their current programming is being delivered in person, virtually, or both; which communities it is being delivered in; how it is being financed; and whether it is being delivered as a primary, secondary, and/or tertiary intervention. This survey process provided Glenn County with rich data and a comprehensive understanding of local provider prevention service capacity, and informed the selection and categorization of the EBPs in this CPP.

Glenn County also recognizes the challenges public agencies and community-based direct service providers will face in developing and delivering EBP service lines, including the costs associated with training staff to deliver these programs, retaining these staff, and conducting ongoing monitoring to ensure model fidelity and continuous quality improvement.

## Tier 1 Services

The following EBPs are listed in California’s Title IV-E Prevention Plan, and Glenn County possesses existing capacity to deliver them. Glenn County intends to explore leveraging Title IV-E funds for these programs as soon as possible.

Program	Service Category	Target Population	Outcome Objectives
<b>Family Check-Up</b>	Mental Health, In-Home Parent Skill-Based	Families with children ages 2–17	» Increased positive parenting practices
<b>Motivational Interviewing</b>	Substance Abuse/Cross-Cutting	Adolescents and their parents and/or caregivers	» Decrease in youth substance use » Decrease of parent/caregiver substance use » Improved physiological, psychological, and lifestyle
<b>Nurse-Family Partnership</b>	In-Home Parent Skill Based	Young, first-time, low-income mothers beginning early in their pregnancy until the child turns two	» Reduced child welfare administrative reports » Improved child cognitive functions and abilities » Improved child physical development and health » Improved adult economic and housing stability

Program	Service Category	Target Population	Outcome Objectives
<b>Parent-Child Interaction Therapy</b>	Mental Health	Children ages 2-7 and their parents and/or caregivers	<ul style="list-style-type: none"> <li>» Reduction in child negative behaviors</li> <li>» Increased positive parenting practices</li> <li>» Improvement of parent/caregiver emotional and mental health</li> </ul>
<b>Parents as Teachers</b>	In-Home Parent Skill Based	Parents and/or caregivers with children ages zero to kindergarten	<ul style="list-style-type: none"> <li>» Increased number of developmental milestones met</li> <li>» Increased positive parenting practices</li> <li>» Improvement of parent/caregiver emotional and mental health</li> </ul>

## Tier 2 Services

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

Program	Service Category	Target Population	Outcome Objectives
<b>Cognitive Processing Therapy</b>	Mental Health	Adults with posttraumatic stress disorder (PTSD)	<ul style="list-style-type: none"> <li>» Improvement of parent/caregiver emotional and mental health</li> </ul>
<b>Eye Movement Desensitization and Reprocessing</b>	Mental Health	Individuals experiencing distress associated with traumatic memories and/or other mental health problems	<ul style="list-style-type: none"> <li>» Improvement of child behavioral and emotional functioning</li> <li>» Improvement of parent/caregiver emotional and mental health</li> <li>» Improvement of parent/caregiver physical health</li> </ul>
<b>Intensive Care Coordination Using High Fidelity Wraparound</b>	Mental Health	Children and youth birth to age 21 with complex emotional, behavioral, or mental health needs, and their families	<ul style="list-style-type: none"> <li>» Increased least restrictive placement</li> <li>» Improvement of child behavioral and emotional functioning</li> </ul>
<b>Strengthening Families Program: For Parents and Youth Ages 10-14</b>	Mental Health, Substance Abuse	Families with youth ages 10-14	<ul style="list-style-type: none"> <li>» Increased child well-being: substance use</li> </ul>
<b>Trauma-Focused Cognitive Behavioral Therapy</b>	Mental Health	Children and adolescents who have experienced trauma	<ul style="list-style-type: none"> <li>» Improvement of child behavioral and emotional functioning</li> <li>» Improvement of child social functioning</li> <li>» Increased positive parenting practices</li> <li>» Improvement of parent/caregiver emotional and mental health</li> </ul>



Program	Service Category	Target Population	Outcome Objectives
<b>Triple P Positive Parenting Program—Level 4 (Group)</b>	Mental Health	Families with children up to age 12 with behavioral and/or emotional challenges	<ul style="list-style-type: none"> <li>» Improvement of child behavioral and emotional functioning</li> <li>» Increased positive parenting practices</li> <li>» Improvement of parent/caregiver emotional and mental health</li> </ul>
<b>Triple P Positive Parenting Program—Level 4 (Standard)</b>	Mental Health	Families with children up to age 12 with behavioral and/or emotional challenges	<ul style="list-style-type: none"> <li>» Improvement of child behavioral and emotional functioning</li> <li>» Increased positive parenting practices</li> <li>» Improvement of parent/caregiver emotional and mental health</li> </ul>

## Other Prevention Programming

In addition to the evidence-based programs above, Glenn County and its community-based organizations administer a broad range of primary, secondary, and tertiary prevention services targeting children and families.

Glenn County also contracts with private contractors outside the county, including New Beginnings Counseling Center, Inc., Youth for Change, and Children’s First, to provide child welfare support services due to a lack of community-based organizations. New Beginnings provides individual and group counseling, as well as Domestic Violence Treatment services and Nurturing Parenting Education to families involved with CWS and/or Probation. Youth for Change and Children’s First provide THP-Plus services to former foster youth. Youth for Change also provides Therapeutic Behavioral Health Services (TBS) to children who need intensive case management and behavioral support services in the home or school.

### **SERVICE ARRAY: CWS**

Glenn County has a variety of services to help maintain children in the home or to assist them to return safely to their own families. These services are also incredibly important for well-being and permanency for children. Many of the services described in this section are available not just to children and their parents, but also to legal guardians,

relatives, and other family members in the home. CWS and Probation have a strong relationship with the agencies and service providers who support the needs of children and families in the community. We recognize that it is truly the community as a whole that protects and provides for children/youth in Glenn County. CWS has the authority to intervene in the protection of children, but our capacity is limited in the treatment and healing of children, and thus we need our partners in Behavioral Health and other service providers to truly create better outcomes for children and youth. Public Health is another partner which is critical to the safety and well-being of children and youth. Many families suffer from significant health issues, and these partnerships prove invaluable on a daily basis.

### **The Community Action Partnership**

Glenn County’s Community Action Division (CAD), Housing, and Community Services Unit (HCSU) provides rental and energy assistance, weatherization to homes, emergency food programs, assistance with housing rehabilitation, Section 8 referrals, and overall case management services for families struggling with rent or utility payments. The programs must abide by federal laws to ensure compliance and equal access to disabled, protected classes, and non-English populations. All service sites comply with the Americans with Disabilities Act.

*These services can be categorized as Primary, Secondary, and Tertiary.*

## Differential Response (DR)

Despite limited funding, the DR program continues to serve families at risk of entering Child Welfare Services, or those transitioning from CWS. Referrals received by CWS continue to be designated to a pathway that aligns with Structured Decision Making (SDM) safety and risk assessments completed by CWS social workers. Each referral is designated a path based on the following:



- » DR 1 referrals are identified by SDM as low risk or not meeting the statutory definitions of abuse and neglect. These referrals are evaluated out by the intake social worker, and the family is offered resources, referrals, and short-term case management support by the DR staff member.
- » DR 2 referrals are identified by SDM as low or moderate risk and meet the statutory definitions of abuse and neglect, but the assessment indicates that with targeted services, a family is likely to make needed changes to improve child safety. DR staff offers an array of services to stabilize the family and may work jointly with the CWS social worker during the period of time the referral is open and beyond, if the family agrees to voluntary case management services.
- » DR 3 referrals are identified by SDM as moderate to high risk and meet the statutory definitions of abuse and neglect. Action is necessary to protect the child. DR staff provide advocacy and support to the family during early intervention by CWS, including coordination of CFT placement meetings, and early visitation, as the family enters the Dependency system. Case management support by the DR staff member may be short-term during the early stage of the case or may continue with the family as needed throughout the life of the case.

DR staff can help provide everything from voluntary preventative services to helping families successfully navigate the Child Welfare system should they

become mandatory participants through the Court Dependency and foster care systems. DR staff engages families in identifying solutions to their problems, while CWS staff promotes prevention and intervention through the referrals to the DR program. DR staff offer advocacy, resources, and guidance as they ensure families' needs are met through case management, home visiting, coordinated support to other social services (i.e., CalWORKs, Medi-Cal, TANF), as well as community services that include housing, food, parenting education, and counseling services.

*These services can be categorized as Primary and Secondary.*

## Promoting Safe and Stable Families (PSSF)

These funds are used to support families with children in placement as well as families that are intact. Case management, home visitation, and life-skills education (budgeting, time management, parenting, stress management, etc.) are some of the services offered.

*These services can be categorized as Tertiary.*

**CalWORKs**—a social worker is assigned to CWS and CalWORKs to link the two programs. While Glenn County is not part of the Linkages Project, this social worker operates in much the same way. Services are coordinated between CWS and CalWORKs to ensure coordinated case planning. The social worker

can provide assessments, unified case planning, and supportive services through AB 429 to CalWORKs families who have had their children removed. Such services help restore family capacity and promote early reunification.

*These services can be categorized as Primary, Secondary, and Tertiary.*

### **Workforce Innovation and Opportunity Act (WIOA)**

The WIOA program through the Employment and Training program assists adults who need employment or training. Frequently, parents need training to assist them in obtaining employment. These parents, as well as those in need of more permanent and stable employment, are often referred to the WIOA staff for assistance. Services are available full-time at the two HHSA sites and can also be arranged by appointment.

*These services can be categorized as Primary, Secondary, and Tertiary.*

### **Behavioral Health (BH)**

BH administers many programs and services, including counseling services for children and their families. BH and CWS are co-located in the Orland office to screen and assess referrals from CWS. When Medi-Cal funds are not available to the family, the clinician provides counseling services and/or links them to BH for more intensive services, paid by the Family First Prevention Services. Transportation is provided by CWS when other options are not available.

- » **Counseling services for CalWORKs families** who qualify are provided by a BH clinician. The counselor provides mental health and/or substance abuse counseling for adults in CalWORKs households. With limited resources for adults in need of counseling, this has allowed services to be expanded to families that might not otherwise have received counseling services.
- » **Parent Child Interaction Therapy (PCIT)** has been an effective model used within Glenn County for treatment level parenting. Partners have blended resources to add more PCIT locations, and this

service is offered through multiple agencies in the county.

- » **Discovery House** is an intensive perinatal program for substance abusing mothers and offers a range of services. Discovery House is administered through BH's Substance Use Disorders programs. Support groups are offered continuously throughout the year and mental health counseling services are offered to dual diagnosed clients. A graduation ceremony concludes the successful completion of all phases of the program. Transportation is provided by the program, and childcare is available on-site to enable the mother to have her child there for monitored visitation.
- » **Counseling services** are available to those children who have a mental health diagnosis and moderate to severe impairments in daily functioning. Glenn County has a Children's System of Care (CSOC), a collaborative that includes BH, CWS, Probation, Education, and other partners dedicated to children services. This supports a wide array of services to family reunification cases, including counseling, intensive case management, parent/partner support, and youth mentors. These services target children and families requiring the most extensive level of intervention and therapy.
- » **SMART TEAM**—System-Wide Mental Health Assessment Response Team (SMART) is a collaborative team that responds quickly to critical incidents such as school threats, suicidal behavior, violence, and bullying. The SMART Team is comprised of staff from Mental Health, Law Enforcement, Probation, Child Welfare, and School professionals. The SMART Team provides a timely and evidence-based response to crisis, and case management for the child and family to help resolve the crisis and link the family to ongoing services. Between September 2014 and October 2016, 62 students were referred to SMART. Of those 62 students, 48% included families involved in CWS and 26% who were involved in Probation. Seventy-four percent of those students referred were male and 48% were above age fourteen.
- » **Pathways to Mental Health (Katie A lawsuit related services)**—Every other Monday, social

workers, clinicians, case managers, and other service provider staff from Behavioral Health, CWS, CalWORKs, and the Office of Education meet to staff cases of children who have been identified as meeting *Katie A.* eligibility requirements or other children who need intensive mental health treatment or other services to stabilize their wellbeing. Treatment and case plans are co-created, CFT meetings are discussed and scheduled, and resources and solutions are discussed in an effort to strategize the best way to meet the needs of the children in out-of-home care or at risk of placement.

- » **Strengthening Families**—Strengthening Families is a parenting and family support program that covers over 15 weeks of parenting education and family activities. The program occurs weekly and covers a multitude of family topics such as communication, family meetings, healthy eating and eating together, discipline, developmental needs of children, child safety, and more. It is entering its fifth year in Glenn County and thus far has graduated over 50 families. Staff from Behavioral Health—both Mental Health and SUDs staff—alongside volunteers from four churches have put on this program weekly on varying evenings. Meals for the families have been donated by various agencies, businesses, and church members throughout the community.

*These services can be categorized as Primary, Secondary, and Tertiary.*

## **Glenn County Office of Education**

The Glenn County Office of Education provides services to CWS families that include:

- » **Foster Youth Services (FYS)** provides funding for a coordinator to ensure that grades and credits follow children as they move between placements. They also enter education data into the CWS/CMS system and advocate for children remaining in their school placement when possible.
- » **Special Education** services are available for children who qualify for services according to state and federal guidelines.
- » **Literacy Programs**—The Glenn Literacy Project maintains an integrated presence throughout the community in order to build self-sufficiency and literacy among Glenn County's underserved populations. Free, individualized tutoring is offered to adults in the areas of reading, writing, spelling, and math, as well as more formal preparation for the GED and high school diploma studies. Parents of children ages 0-4 participating in tutoring services, ESL classes, job readiness programs, and Head Start parent groups are recruited to participate in the Families for Literacy (FFL) program. FFL supports parents in their role as their children's first teachers and primary reading role model by building home libraries, providing parenting resources and discussion opportunities, as well as hands-on developmental activities. FFL leadership maintains an ongoing collaboration with a community parent organization, the CICC Parent Partners, to distribute Reading Is Fundamental sponsored books and coordinate story hours at community events.
- » **SPARK** is an after-school program available at almost all of the schools in the county. SPARK provides tutorial services, homework assistance, and educational activities for students. There is no eligibility requirement to attend, and foster youth have priority for enrollment.

*These services can be categorized as Primary, Secondary, and Tertiary.*

## First 5 Commission of Glenn County

The First 5 Commission of Glenn County provides both funding and oversight for the School Readiness Program that continues to operate throughout the county. First 5 completes developmental assessments for all children entering kindergarten each year. These assessments are completed at local schools during Kindergarten Round-Up Days. First 5 shares this information with the teacher to help provide early intervention services. First Five also offers Nurturing Parenting classes in Orland and Willows in a group classroom setting. Many CWS parents attend these classes and report enjoying them. Similar prevention strategies in the county include services offered through Head Start, Migrant Education, Nurturing Parenting classes, and state-funded pre-school programs.

*These services can be categorized as Primary, Secondary, and Tertiary.*

## Children's Interagency Coordinating Council (CICC)

The CICC implements activities identified through the CICC that support child abuse awareness in the community. All activities are coordinated and promoted with local community representatives by the CICC Coordinator to capture a broader audience. Activities that have been supported through the CICC include Student Response Team (SRT); ICWA Trainings and Grindstone Rancheria collaborative support; Regional Fatherhood Conference; Adoptive Parents and Caregiver workshops; Nurturing Parenting workshops; Youth Services Workgroup; implementation of school bullying programs; shaken baby syndrome trainings; and resources and training on child sexual exploitation.

- » The CICC coordinates the annual Child and Family Celebration Fair, which consists of resource areas related to children and families. Several interactive activities are offered to families and children at no cost. The purpose of this event is to promote child abuse awareness and provide an array of interactive activities for all children from local agencies, with organization booths offering appropriate information. All participating agencies/

organizations coordinate age-appropriate activities that can be easily done at home with parent interaction.

- » Youth Employment Services (YES) program is a subcommittee of CICC and is a collaborative that joins the WIOA youth programs with the various vocational education programs at the Glenn County Office of Education. The program targets youth ages 15-19 who are in school. High school seniors and foster youth have priority for enrollment.
- » Nurturing Parent Program is a county-wide curriculum that provides parent education coupled with interactive parent/child sessions. The curriculum promotes an experience for families who recognize the need for parenting their own children in more positive ways than their own childhood experiences. Topics for group sessions can be determined by the parents and caregivers' immediate concerns. A strong underlying component promotes increased community and neighborhood involvement. Program staff can also provide case management, referrals and resources, and short-term counseling for families in crisis. The Nurturing Parent Program (NPP) is used throughout the county by schools, First 5, Adult Education, Child and Family Services, Adolescent Family Life Program (AFLP), non-profits, and preschools. The English and Spanish curriculums are used by providers.

*These services can be categorized as Primary, Secondary, and Tertiary.*

## Services to Native American Children

Services provided to Native American children in Glenn County are primarily the same as those provided to other children in the county. Native American children receive assistance with determining their tribal affiliation in addition to those services that are routinely provided. Every attempt is made to follow the Indian Child Welfare Act (ICWA) in regards to placement preferences for Native American children and to work with the tribe and parents to determine appropriate services in consideration of tribal practices and Native American culture. Relative placements help to preserve the child's connection with their tribal roots. The agency works with the local Grindstone Rancheria Tribal office and their ICWA representative if the child is local, or other tribal offices when the child is not. CWS has asked the Grindstone Rancheria to inform the agency of any potential foster parents residing on the reservation. In addition, the agency complies with all ICWA regulations.

CWS has a contract with an Indian Expert Witness for the purpose of attending Dispositional and 366.26 hearings, writing reports, and testifying if needed on behalf of a child who comes within ICWA and to assure that CWS is following ICWA procedures. This has been a very helpful service and meets the mandates of the law for provision of such a person at the court hearing. In addition, our Indian Expert Witness has provided guidance around ICWA compliance and suggestions regarding resources for Indian children.

The Grindstone Rancheria Tribal Council has demonstrated interest and enthusiasm in being involved in county-wide efforts to prevent child abuse and neglect. A Tribal Council representative is a member of CICC. Recent changes within the Tribal Council continue to facilitate a long-term relationship with CICC. This involvement has created an additional subcommittee of the CICC known as the Grindstone Collaborative that helps to ensure the best possible outcome for Native American children.

Another significant strength in Glenn County is the presence of Northern Valley Indian Health (NVIH), which provides health services and other supportive services to any county resident with American Indian ancestry as well as to the general public. The HHS has a good working relationship with NVIH already in place, and they are a valuable resource in a community with limited access to medical services and transportation. NVIH has an array of services from medical and dental to wellness, counseling, and medication management as well as substance abuse treatment and recovery programs.

*These services can be categorized as Primary, Secondary, and Tertiary.*

## ADOPTION SERVICES

Services designed to assist with the placement of children for adoption are provided by the California Department of Social Services, Adoption Bureau Chico District Office. Assessments are completed to determine what is necessary to prepare the child for adoption, and referrals are made as appropriate. Counseling services are readily available for pre- and post-adoptive placements through referrals. Child Welfare provides the support services necessary to assist a child in being successful until the child is freed for adoption. CWS completes home studies and makes recommendations for children placed prior to guardianship.

*These services can be categorized as Tertiary.*

# LINKING CANDIDATE GROUPS & EVIDENCE-BASED PROGRAMS

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

Glenn County also intends to embed the following five service objectives within Phase 1 of CPP implementation to address the major community needs, service gaps, and challenges outlined in this document:

1. Providing community-based pathways to preventive services outside of the traditional child welfare system through enhancement of the Family Services Unit
2. Providing concrete supports to strengthen families and limit the need for child welfare system involvement
3. Delivering trainings to strengthen the capacity of the workforce to comprehensively support children and families
4. Expanding the availability of in-home preventive services
5. Addressing the complex behavioral challenges experienced by youth



In Phase 1 of the CPP, Glenn County intends to explore the development, replication, and expansion of the Tier 1 EBPs to advance the following service objectives:

Program	Service Category	Phase 1 Target Population(s)	Outcome Objectives
<b>Family Check-Up</b>	Mental Health, In-Home Parent Skill-Based	<ul style="list-style-type: none"> <li>» Community-based pathways</li> <li>» Concrete supports</li> <li>» Expanding capacity of workforce</li> <li>» Expanding in-home services</li> </ul>	<ul style="list-style-type: none"> <li>✓ Increased positive parenting practices</li> </ul>
<b>Motivational Interviewing</b>	Substance Abuse/Cross Cutting	<ul style="list-style-type: none"> <li>» Expanding capacity of workforce</li> <li>» Expanding in-home services</li> <li>» Addressing complex youth BH challenges</li> </ul>	<ul style="list-style-type: none"> <li>✓ Decrease in youth substance use</li> <li>✓ Decrease of parent/caregiver substance use</li> <li>✓ Improved physiological, psychological and lifestyle outcomes</li> </ul>
<b>Nurse-Family Partnership</b>	In-Home Parent Skill Based	<ul style="list-style-type: none"> <li>» Community-based pathways</li> <li>» Concrete supports</li> <li>» Expanding capacity of workforce</li> <li>» Expanding in-home services</li> </ul>	<ul style="list-style-type: none"> <li>✓ Reduced child welfare administrative reports</li> <li>✓ Improved child cognitive functions and abilities</li> <li>✓ Improved child physical development and health</li> <li>✓ Improved adult economic and housing stability</li> </ul>
<b>Parent-Child Interaction Therapy</b>	Mental Health	<ul style="list-style-type: none"> <li>» Community-based pathways</li> <li>» Concrete supports</li> <li>» Expanding capacity of workforce</li> <li>» Expanding in-home services</li> </ul>	<ul style="list-style-type: none"> <li>✓ Reduction in child negative behaviors</li> <li>✓ Increased positive parenting practices</li> <li>✓ Improvement of parent/caregiver emotional and mental health</li> </ul>
<b>Parents as Teachers</b>	In-Home Parent Skill Based	<ul style="list-style-type: none"> <li>» Community-based pathways</li> <li>» Concrete supports</li> <li>» Expanding capacity of workforce</li> <li>» Expanding in-home services</li> </ul>	<ul style="list-style-type: none"> <li>✓ Increased number of developmental milestones met</li> <li>✓ Increased positive parenting practices</li> <li>✓ Improvement of parent/caregiver emotional and mental health</li> </ul>



# LOGIC MODEL

## TARGET POPULATIONS

Families with caregivers abusing substances; Families with youth with behavioral health challenges and/or abusing substances; Families with high-level mental health challenges; Families experiencing domestic violence challenges; Families living in poverty; Families in rural/isolated areas; Families experiencing homelessness or unstable housing; Black, Indigenous, and People of Color (BIPOC) families.



### COMMUNITY NEEDS

- » Increased understanding of any needed substance abuse disorder treatment options for families
- » Substance use supports and services
- » Accessible mental health services
- » Violence prevention supports and services
- » Targeted supports and services for rural areas
- » Affordable housing options
- » Targeted supports to address racial inequities in services



### INPUTS

- » Critical administrative supports, including information technology tools; interagency collaboration; training and workforce supports
  - » Accessible policies outlining Family First Practices and Policies
  - » Active Tribal involvement
  - » Enhanced MOUs and contracts with CBOs to expand capacity and provide eligible services
  - » Strong cross-sector collaboration and partnership
- Delivery of high-fidelity evidence-based programs that are aligned with the specific needs and characteristics of each family in the target population including:*
- Family Check-Up • Motivational Interviewing
  - Nurse-Family Partnership • Parent-Child Interaction Therapy • Parents as Teachers



### OUTPUTS

- » Accurate assessment of safety, risk, and family strengths and needs
- » Buy-in and support from staff, stakeholders, partners, and community members
- » Consistent engagement and parentship with CBOs and families
- » Enhanced capacity of County and service partners to deliver EBPs
- » Services tailored to the needs of all eligible communities, with a focus on reducing racial disparities
- » Widespread community engagement and understanding of FFPSA implementation strategies



### SHORT-TERM OUTCOMES

- ✓ Parents and children in families experiencing substance use disorder challenges receive appropriate support services
- ✓ Decrease of parent/caregiver and youth substance use; Improvement of families' emotional and mental health
- ✓ Professional workforce that is prepared, supported, and effective
- ✓ Parents and children in families experiencing domestic violence challenges receive appropriate supports and services
- ✓ Increased positive parenting practices; Increased availability of supports and services in rural/isolated areas of the county
- ✓ Improved economic and housing stability; Reduced racial disparities



### LONG-TERM IMPACT

- ✓ Families in Glenn County are strengthened and stabilized
- ✓ Improved mental well-being for children and families; Improved mental health of children and caretakers; Reduced foster care census
- ✓ Decreased rates of removal and placement into foster care

# CPP SPENDING PLAN

	PROVIDER/ CONTRACTOR	TIME FRAME	STATE BLOCK GRANT	FFTA
<b>PLANNING AND DEVELOPMENT</b>				
CPP development	Social Change Partners	2023		\$80,000
CPP staff cost	Glenn County HHS	2023	\$1,000	
<b>ADMINISTRATION AND TRAINING</b>				
Admin. staff cost	Glenn County HHS	2023/24	\$92,000	
Infrastructure development	Glenn County HHS	2023/24	\$40,000	
Staff training	Various	2023/24	\$20,000	
<b>ACTIVITIES/ SERVICES</b>				
In home parenting-EBP Parents as Teachers	AmeriCorps	2023/24 2024/25	\$70,000	
Concrete supports for primary, secondary, and tertiary populations	Glenn County HHS	2023/24	\$40,000	
Expansion of Family Services Unit	Glenn County HHS	2023/24	\$12,000	
Enhance Kinship Support	Glenn County HHS	2023/24	\$20,000	
Respite Support for primary and secondary populations	Glenn County HHS	2023/24	\$5,000	
<b>TOTAL</b>			<b>\$300,000</b>	<b>\$80,000</b>

# ADDITIONAL ASSURANCES

## Assurances Template

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### **FAMILY FIRST PREVENTION SERVICES (FFPS) PROGRAM ASSURANCES COUNTY OF GLENN**

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

#### **Title IV-E Prevention Program Reporting Assurance**

In accordance with section 471(e)(5)(B)(x) of the federal Social Security Act and California Welfare and Institutions Code (WIC) section 16587(d)(9),

Glenn County Health & Human Services Agency

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(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

is providing this assurance, consistent with the local CPP and the California Title IV-E Prevention Services State Plan, to collect and report to the CDSS information and data required for the FFPS Program, including all information and data necessary for federal financial participation, federal reporting, to determine program outcomes, and to evaluate the services provided. This includes, but is not limited to, child-specific information and expenditure data.

#### **Child Safety Monitoring Assurance**

In accordance with section 471(e)(5)(B)(ii) of the federal Social Security Act and California WIC sections 16587(d)(7)-(8),

Glenn County Health & Human Services Agency

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(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

assures it will provide oversight and monitoring of the safety of children who receive services under the FFPS Program, including oversight and monitoring of periodic risk assessments throughout the period of service delivery. County Title IV-E agencies that contract with community-based organizations, assure how safety will be monitored and the oversight of periodic risk assessments conducted by the community-based organizations. If the local child welfare and/or probation agency determines the child's risk of entering foster care remains high despite the provision of the services, the agency assures that it will reexamine the child's prevention plan during the 12-month period. In the case of an Indian child, the agency assures the assessments, and any reexamination of the prevention plan will be conducted in partnership with the Indian child's tribe.

**Workforce Development and Training Assurance**

In accordance with section 471(e)(5)(B)(viii) of the federal Social Security Act,

Glenn County Health & Human Services Agency

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(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

assures it will adhere to the FFPS training plan as outlined in the California Title IV-E Prevention Services State Plan, and ensure caseworkers within both the community and Title IV-E pathways under the FFPS program are supported and trained in assessing what children and their families need, connecting to the families served, knowing how to access and deliver the needed trauma-informed and evidence-based services, overseeing and evaluating the continuing appropriateness of the services, and all foundational requirements, including understanding how the requirements of the federal Indian Child Welfare Act (ICWA) and implementing state law intersect with prevention services provided through the community based and Title IV-E pathways.

**Trauma-Informed Service Delivery Assurance**

Glenn County Health & Human Services Agency

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(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

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

**Model Fidelity for Evidence-Based Programs and Continuous Quality Improvement Assurance**

In accordance with section 471(e)(5)(B)(iii)(II) of the federal Social Security Act and California WIC sections 16587(d)(10) and 16587(d)(11)(A),

Glenn County Health & Human Services Agency

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(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

assures that services provided in the CPP will be continuously monitored to ensure fidelity to the practice model, to determine the outcomes achieved, and to refine and improve practices based upon information learned, using a continuous quality improvement framework, developed in accordance with instructions issued by the CDSS. The agency agrees to participate in state level fidelity oversight, evaluation and coordination to determine the effectiveness of a service provided under the FFPS program.

**Advancement of Fairness and Equity Strategies Assurance**

In accordance with the Governor’s Executive Order N-16-22, and consistent with California Five Year Prevention Services State Plan,

Glenn County Health & Human Services Agency

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(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

assures that the implementation of interventions, services and supports should be equitable, culturally responsive and targeted to address disproportionality and disparities experienced by black, indigenous, and people of color, as well as lesbian, gay, bisexual, transgender, queer and plus (LGBTQ+) children and youth.

**Assurance of Coordination with Local Mental Health**

In accordance with section 471(e)(10)(C) of the federal Social Security Act and California WIC section 16588(f) (3),

Glenn County Health & Human Services Agency

(NAME(S) OF PARTICIPATING CHILD WELFARE SERVICES AND/OR PROBATION AGENCY)

assures the establishment of a joint written protocol, based on the model developed by the CDSS and Department of Health Care Services for use among the child welfare agency, probation department, behavioral health agency, and other appropriate entities to determine which program is responsible for payment, in part or whole, for a prevention service provided on behalf of an eligible child.

**Assurances Signatures**

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

10/30/2023

*Amber Arnold*

(DATE)

(SIGNATURE OF AUTHORIZED CWS REPRESENTATIVE)

10/30/2023

*Richard Beatty*

(DATE)

(SIGNATURE OF AUTHORIZED PROBATION REPRESENTATIVE)

# APPENDIX A: CDSS QUESTIONS & ANSWERS

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- 1. Clarification on Cross-Sector Participation:** We are interested to know if your county has any Family Resource Centers. If so, were they invited to participate, or are there plans for the FRC to participate moving forward?
  - » Glenn County does not have any Family Resource Centers.
  
- 2. Sustainability:** Could you include further information in your CPP regarding plans for sustainability? Will the county use funding sources already available in the community to support the implementation of the CPP? In addition to the FFTA funds, were any other funds leveraged for your CPP?
  - » Glenn County plans on sustaining prevention activities through strategic planning on the use of OCAP funding streams. Furthermore, our prevention activities are centered on the development of our Families Services unit which will be carrying out prevention services while connecting families to community resources. This is more of a change in practice and a shift in our energy in Child Welfare rather than a new program that needs additional funding.
  - » Although FFTA is the primary funding stream for the development of our CPP, we did leverage some of the State Block Grant funds as well (approximately \$12,500).

