

FAMILY & HUMAN SERVICES COMMITTEE

May 22, 2017 10:30 A.M. 651 Pine Street, Room 101, Martinez

Supervisor John Gioia, Chair Supervisor Candace Andersen, Vice Chair

Agenda Items may be taken out of order based on the business of the day and preference of the Committee

- 1. Introductions
- 2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to three minutes).
- 3. CONSIDER recommending to the Board of Supervisors the appointment of Paul Mikolaj to the Member-At-Large #10 seat on the Advisory Council on Aging with a term expiring September 30, 2018, as recommended by the Council.
- 4. CONSIDER recommending to the Board of Supervisors the appointment of Deborah Son to the At-Large #11 seat with a term expiring February 28, 2018 and Michelle Brown to the At-Large #15 seat with a term expiring February 28, 2017 on the Contra Costa Commission for Women, as recommended by the Commission.
- 5. CONSIDER recommending to the Board of Supervisors the appointment of Cynthia Molander to the Community Representative #3 seat on the Local Planning and Advisory Council for Early Care and Education with a term expiring April 30, 2018, as recommended by the County Office of Education. (Ruth Fernández, Contra Costa County Office of Education)
- 6. CONSIDER recommending to the Board of Supervisors the appointment of John Montagh to the Additional #2 seat on the Workforce Development Board with a term expiring June 30, 2020, as recommended by the Employment and Human Services Department.
- 7. CONSIDER accepting the report from the Veterans Service Office on the Stand Down on the Delta for Homeless Veterans event and forward to the Board of Supervisors for their information. (Nathan Johnson, Veterans Service Officer; J.R. Wilson, Director of Stand Down on the Delta)
- 8. CONSIDER accepting the report on the County's Laura's Law Assisted Outpatient Treatment Program (AOT) implementation for the period February through December 2016. (Warren Hayes, MHSA Program Manager)

- 9. CONSIDER accepting the report from the Employment and Human Services on the Workforce Innovation and Opportunity Act and forward to the Board of Supervisors for their information. (Kathy Gallagher, Employment and Human Services Director)
- 10. The next meeting is currently scheduled for June 26, 2017.
- 11. Adjourn

The Family & Human Services Committee will provide reasonable accommodations for persons with disabilities planning to attend Family & Human Services Committee meetings. Contact the staff person listed below at least 72 hours before the meeting.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Family & Human Services Committee less than 96 hours prior to that meeting are available for public inspection at 651 Pine Street, 10th floor, during normal business hours.

Public comment may be submitted via electronic mail on agenda items at least one full work day prior to the published meeting time.

For Additional Information Contact:

Enid Mendoza, Committee Staff Phone (925) 335-1039, Fax (925) 646-1353 enid.mendoza@cao.cccounty.us



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

3.

Meeting Date: 05/22/2017

Subject:Appointment to the Advisory Council on AgingSubmitted For:FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: N/A

Referral Name: Appointments to Advisory Bodies

Presenter: Enid Mendoza, (925) 335-1039

Referral History:

On December 6, 2011 the Board of Supervisors adopted Resolution No. 2011/497 adopting policy governing appointments to boards, committees, and commissions that are advisory to the Board of Supervisors. Included in this resolution was a requirement that applications for at large/countywide seats be reviewed by a Board of Supervisors sub-committee.

The Advisory Council on Aging provides a means for county-wide planning, cooperation and coordination for individuals and groups interested in improving and developing services and opportunities for the older residents of this county. The Council provides leadership and advocacy on behalf of older persons and serves as a channel of communication and information on aging.

The Advisory Council on Aging consists of 40 members servicing 2 year staggered terms each ending on September 30. The Council consists of representatives of the target population and the general public, including older low-income and military persons; at least one-half of the membership must be made up of actual consumers of services under the Area Plan.

The Council includes: 19 representatives recommended from each Local Committee on Aging, 1 representative from the Nutrition Project Council, 1 Retired Senior Volunteer Program, and 19 Members at-Large.

Referral Update:

There are currently 33 seats filled on the Advisory Council on Aging and 7 vacancies. These vacant seats include: Local Committee Martinez, Local Committee Pittsburg, and Member-At-Large seats 3, 6, 10, 11 and 19. The current membership is as follows:

| Seat Title | Term Expiration Date | Current Incumbent | Incumbent Supervisor District | Annointment | Number of Meetings Attended Since Appointment Date | Total Number of Meeting Held Since Appointment | Total Number of Absences Allowable in By-laws |
|------------------------------|----------------------------|----------------------|-------------------------------------|-------------|---|--|---|
| Nutrition Project Council | 9/30/2018 | Garrett, Gail | I | 10/25/2016 | 6 | 6 | 3 |
| At-Large 1 | 9/30/2018 | Adams, Fred | II | 12/6/2016 | 5 | 6 | 3 |
| At-Large 2 | 9/30/2018 | Krohn, Shirley | IV | 10/25/2016 | 5 | 6 | 3 |
| At-Large 3 | 9/30/2017 | VACANT | | | | | 3 |
| At-Large 4 | 9/30/2018 | Welty, Patricia | V | 10/25/2016 | 2 | 6 | 3 |
| At-Large 5 | 9/30/2018 | Card, Deborah | V | 10/25/2016 | 5 | 6 | 3 |
| At-Large 6 | 9/30/2018 | VACANT | | | | | 3 |
| At-Large 7 | 9/30/2018 | Selleck, Summer | V | 12/6/2016 | 6 | 6 | 3 |
| At-Large 8 | 9/30/2017 | Richards, Sheri | IV | 10/6/2015 | 14 | 17 | 3 |
| At-Large 9 | 9/30/2017 | Xavier, Rita | I | 10/6/2015 | 17 | 17 | 3 |
| At-Large 10 | 9/30/2018 | VACANT | | | | | 3 |

| At-Large 11 | 9/30/2017 | VACANT | | | | | 3 |
|----------------------------------|-----------|---------------------------|-----|------------|----|----|---|
| At-Large 12 | 9/30/2018 | Neemuchwalla, Nuru | IV | 10/25/2016 | 6 | 6 | 3 |
| At-Large 13 | 9/30/2018 | Dunne-Rose, Mary D | II | 10/25/2016 | 5 | 6 | 3 |
| At-Large 14 | 9/30/2017 | Jones, Ella | I | 10/6/2015 | 11 | 17 | 3 |
| At-Large 15 | 9/30/2017 | Bruns, Mary | IV | 10/6/2015 | 13 | 17 | 3 |
| At-Large 16 | 9/30/2017 | Leasure, Robert | II | 10/6/2015 | 13 | 17 | 3 |
| At-Large 17 | 9/30/2018 | Ames, Kathyrn | IV | 8/2/2016 | 6 | 9 | 3 |
| At-Large 18 | 9/30/2018 | Nahm, Richard | III | 10/25/2016 | 6 | 6 | 3 |
| At-Large 19 | 9/30/2017 | VACANT | | | | | 3 |
| At-Large 20 | 9/30/2017 | Frederick, Susan | I | 10/25/2016 | 5 | 6 | 3 |
| Local Committee Lafayette | 9/30/2017 | MaCahan, Ruth | II | | | | 3 |
| Local Committee Orinda | 9/30/2017 | Clark, Nina | II | 11/10/2015 | 12 | 17 | 3 |
| Local Committee Antioch | 9/30/2018 | Fernandez, Rudy | III | 9/13/2016 | 7 | 9 | 3 |
| Local Committee Pleasant Hill | 9/30/2017 | Van Ackern, Lorna | IV | 11/3/2015 | 15 | 17 | 3 |
| Local Committee Pinole | 9/30/2018 | Haegeland, Kristin | I | 9/13/2016 | 8 | 9 | 3 |
| Local Committee Concord | 9/30/2018 | Joslin, David | IV | 9/13/2016 | 1 | 9 | 3 |
| Local Committee Richmond | 9/30/2018 | Williams, Jenelle | I | 9/13/2016 | 6 | 9 | 3 |
| Local Committee El Cerrito | 9/30/2018 | Kim-Selby, Joanna | I | 9/13/2016 | 5 | 9 | 3 |
| Local Committee Hercules | 9/30/2018 | Doran, Jennifer | I | 4/18/2017 | 2 | 2 | 3 |
| Local Committee Pittsburg | 9/30/2016 | VACANT | V | | | | 3 |
| Local Committee San Ramon | 9/30/2018 | Fehrenback, Anna | II | | | | 3 |
| Local Committee Clayton | 9/30/2017 | Tervelt, Ron | IV | 11/10/2015 | 15 | 16 | 3 |
| Local Committee Alamo-Danville | 9/30/2018 | Donnelly, James Robert | II | 9/13/2016 | 7 | 9 | 3 |
| Local Committee Walnut Creek | 9/30/2017 | Doherty, C. Joseph | IV | 10/6/2015 | 12 | 17 | 3 |
| Local Committee Moraga | 9/30/2017 | Katzman, Keith | II | 11/10/2015 | 15 | 17 | 3 |
| Local Committee San Pablo | 9/30/2018 | Gantt, Dorothy | I | 9/13/2016 | 7 | 9 | 3 |
| Local Committee Martinez | 9/30/2018 | VACANT | V | | | | 3 |
| Local Committee Brentwood | 9/30/2017 | Kee, Arthur | III | 11/10/2015 | 16 | 17 | 3 |
| Local Committee Oakley | 9/30/2018 | Smith, Grayce | III | 10/8/2015 | 12 | 17 | 3 |

Mr. Paul Mikolaj submitted an application to the Council, which later conducted an interview with Mr. Mikolaj and selected him for appointment to the Member-At-Large SEat #10.

Recommendation(s)/Next Step(s):

CONSIDER recommending to the Board of Supervisors the appointment of Paul Mikolaj to the Member-At-Large #10 seat on the Advisory Council on Aging with a term expiring September 30, 2018, as recommended by the Council.

Fiscal Impact (if any):

There is no fiscal impact.

Attachments

ACOA Memo to F&HS

P.Mikolaj Application

Contra Costa County California Employment & Human Services

Kathy Gallagher, Director
40 Douglas Dr., Martinez, CA 94553 ★ Phone: (925) 313-1579 ★ Fax: (925) 313-1575 ★ www.cccounty.us/ehsd.

MEMORANDUM

DATE: 5-5-2017

To: Family and Human Services Committee

CC: Victoria Tolbert, Director Aging and Adult Services

FROM: Jaime Ray, Staff Representative for the Advisory Council on Aging

SUBJECT: Advisory Council on Aging – Appointment Requested

The Contra Costa Area Agency on Aging (AAA) recommends for immediate appointment to the Contra Costa Advisory Council on Aging (ACOA) the following applicant: Mr. Paul Mikolaj for the Member at Large #10 seat. The MAL #10 seat is undesignated and has remained vacant since April 18, 2017. Jennifer Doran who previously was appointed to At Large #10 was reappointed to the ACOA as the City of Hercules Representative.

Recruitment has been handled by both the Area Agency on Aging, the ACOA and the Clerk of the Board using CCTV. AAA staff has encouraged interested individuals including minorities to apply through announcements provided at the Senior Coalition meetings and at the regular monthly meetings of the ACOA. The Contra Costa County EHSD website contains dedicated web content where interested members of the public are encouraged to apply and are provided an application with instructions on whom to contact for ACOA related inquiries, including application procedure.

Mr. Mikolaj had previously served on the ACOA as a Representative occupying the Alamo-Danville Local Committee seat; appointed on March 3, 2015. On February 2, 2016 the Board of Supervisors accepted his resignation that permitted him to pursue medical care. Mr. Mikolaj submitted a subsequent and new application to re-establish ACOA membership on February 9, 2017; this document is provided as a separate attachment. At the time of his selection by the ACOA Membership Committee to fill one of two At Large vacancies, there was one other At Large applicant; both At Large applicants were approved at the April 19, 2017 ACOA meeting.

Thank You



For Office Use Only

For Reviewers Use Only: Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO: Contra Costa County

| | BOARD Rm. 106 | Application) | | | | | |
|-------------------------------|-------------------|---------------------------------------|-------------------|-----------------|---------------|----------------|---------------------------|
| BOARD, COMMITTEE OF | R COMMISSION NAM | IE AND SEAT TITLE YOU ARE APPLY | ING FOR: | | | | |
| Advisory Council | on Aging | | | | | | |
| PRINT EXACT NAME OF | BOARD, COMMITTEE | E, OR COMMISSION | PRINT EXA | CT SEAT NAME (i | f applicable) | | |
| 1. Name: Mike | olaj Paul | George | | | | | |
| (La | st Name) | (First I | Name) | | (N | liddle Nam | e) |
| 2. Address: | | Danville, CA 94526 | -5049 | | | | |
| (1 | No.) | (Street) (A | Apt.) | (State) | | (2 | Zip Code) |
| 3. Phones: (I | Home No.) | (Work No.) | (Cell | No.) | | | |
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| | ma 🔲 G.E.D. | ate box if you possess on Certificate | | | ficate 🔲 | | _ |
| Names of college atten | | Course of Study / Major | Degree Awarded | Units Cor | npleted | Degree Type | Date Degree Awarded |
| ROBERT LIBERTY | | | | Semester | Quarter | | |
| | Cleveland State U | | Yes No × | | | BChE | 1958 |
| | ochester | | Yes No 🗵 | | 12 5 5 5 | MS ChE | 1960 |
| | ute of Technology | | Yes No X | | | PhD | 1965 |
| D) Other schools / completed: | training | Course Studied | Hours Co | mpleted | C€ | ertificate Awa | |

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|---|---|---|
| From To Jan, 1999 Present | Technology Coordinator, Volunteer | I am part of a team that is responsible for all computer hardware, software, and logistics to |
| Total: <u>Yrs. Mos.</u> 18 years Hrs. per week 12-20 . Volunteer | Employer's Name and Address Volunteer Organization AARP Foundation Tax-Aide 601 E Street Northwest Washington, DC 20049 Contra Costa Central District CA-2 Substate | support our local Tax-Aide Program. This Program provides free income tax assistance to taxpayers with low and moderate income, giving special attention to those 60 and older. |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
| <u>From</u> <u>To</u> 1976 April, 1998 | Tosco Corporation/Refining Company | At Tosco Corporation: Presented the company's position on refinery operating practices and |
| Total: <u>Yrs.</u> <u>Mos.</u> | Employer's Name and Address Company is no longer in existence Previous locations were: | environmental concerns to Federal, State, and Local regulators. |
| Hrs. per week 40+ . Volunteer | Tosco Corp, Los Angeles, CA Tosco Refining Company Avon Refinery, Martinez, CA | At Tosco Refining Company: Provided technical leadership and project management for refinery environmental controls. |
| C) Dates (Month, Day, Year) | Title | Duties Performed |
| From To Sept, 1967 Sept, 1973 | Asst Professor, Chemical Engineering | Taught undergraduate and graduate courses in Thermodynamics and Process Engineering Design. |
| Total: <u>Yrs. Mos.</u> 6 years | Employer's Name and Address University of California, Santa Barbara Santa Barbara, California 93106 | Supervised research projects of MS and PhD candidates: topics included thermodynamic properties, |
| Hrs. per week 40+ Volunteer | | and pollution from natural oil seeps in the Santa Barbara Channel. |
| D) Dates (Month, Day, Year) From To | Title | Duties Performed |
| Total: <u>Yrs.</u> <u>Mos.</u> | Employer's Name and Address | |
| Hrs. per week Volunteer | | |

| 7. How did you learn about this vacancy? | |
|--|---|
| ☐CCC Homepage ☐Walk-In ☐Newspaper Advertisement | □ District Supervisor ☑ Other County Staff |
| 8. Do you have a Familial or Financial Relationship with a me Resolution no. 2011/55, attached): No X Yes Yes | ember of the Board of Supervisors? (Please see Board |
| If Yes, please identify the nature of the relationship: | |
| belief, and are made in good faith. I acknowledge and under | issions of material fact may cause forfeiture of my rights to serve |
| Sign Name: _ | Date: Feb 9, 2017 |

Important Information

- 1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
- 2. Send the completed paper application to the Office of the Clerk of the Board at: 651 Pine Street, Room 106, Martinez, CA 94553.
- 3. A résumé or other relevant information may be submitted with this application.
- 4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
- 5. Members of boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
- 6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation.
- 7. Meeting dates and times are subject to change and may occur up to two days per month.
- 8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA and for Special Districts, Agencies and Authorities Governed by the Board Adopted Resolution no. 2011/55 on 2/08/2011 as follows:

IN THE MATTER OF ADOPTING A POLICY MAKING FAMILY MEMBERS OF THE BOARD OF SUPERVISORS INELIGIBLE FOR APPOINTMENT TO BOARDS, COMMITTEES OR COMMISSIONS FOR WHICH THE BOARD OF SUPERVISORS IS THE APPOINTING AUTHORITY

WHEREAS the Board of Supervisors wishes to avoid the reality or appearance of improper influence or favoritism; NOW, THEREFORE, BE IT RESOLVED THAT the following policy is hereby adopted:

- I. SCOPE: This policy applies to appointments to any seats on boards, committees or commissions for which the Contra Costa County Board of Supervisors is the appointing authority.
- II. POLICY: A person will not be eligible for appointment if he/she is related to a Board of Supervisors' Member in any of the following relationships:
- 1. Mother, father, son, and daughter;
- 2. Brother, sister, grandmother, grandfather, grandson, and granddaughter;
- 3. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter;
- 4. First cousin;
- 5. Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
- 6. Sister-in-law (brother's spouse or spouse's sister), brother-in-law (sister's spouse or spouse's brother), spouse's grandmother, spouse's granddaughter, and spouse's grandson;
- 7. Registered domestic partner, pursuant to California Family Code section 297.
- 8. The relatives, as defined in 5 and 6 above, for a registered domestic partner.
- 9. Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES

COMMITTEE

4.

Meeting Date: 05/22/2017

Subject: Appointments to the Contra Costa Commission for Women

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: N/A

Referral Name: Appointments to Advisory Bodies

Presenter: Contact: Enid Mendoza, (925) 335-1039

Referral History:

On December 6, 2011 the Board of Supervisors adopted Resolution No. 2011/497 adopting policy governing appointments to boards, committees, and commissions that are advisory to the Board of Supervisors. Included in this resolution was a requirement that applications for at large/countywide seats be reviewed by a Board of Supervisors sub-committee.

The Contra Costa Commission for Women (CCCW) was formed to educate the community and advise the Contra Costa County Board of Supervisors and other entities on the issues relating to the changing social and economic conditions of women in the County, with particular emphasis on the economically disadvantaged.

The Committee consists of 20 members and one alternate, including: five district representatives, fifteen at large members; and one at large alternate.

The five district representatives are nominated for a three year term by each of the five members of the Board of Supervisors. The fifteen at large members and one at large alternate are nominated by the CCCW membership committee and forwarded to the full CCCW. All nominated appointments to the CCCW are reviewed by the Family and Human Services Committee (F&HS) and referred to the Board of Supervisors for approval. CCCW terms are for three years and they are staggered across the membership.

Referral Update:

There are currently 17 seats filled on the Contra Costa Commission for Women and 4 vacancies. These vacant seats include the Alternate-At-Large seat and Member-At-Large seats #11, 12, and 15.

The Commission interviewed Deborah Son and Michelle Brown and believe they will be a great asset to the Commission. There are no other current applicants for seats on the Commission.

Recommendation(s)/Next Step(s):

CONSIDER recommending to the Board of Supervisors the appointment of Deborah Son to the At-Large #11 seat with a term expiring February 28, 2018 and Michelle Brown to the At-Large #15 seat with a term expiring February 28, 2017 on the Contra Costa Commission for Women, as recommended by the Commission.

Fiscal Impact (if any):

There is no fiscal impact.

Attachments

Memo from CCCW to F&HS

D.Son Application

M.Brown Application





P.O. Box 6695 Concord, CA 94520

E-Mail: womenscommission@gmail.com

DATE: April 24, 2017, 2017 TO: Family and Human Services Committee

FROM: Phyllis L. Gordon, Membership Chair, Contra Costa Commission for

Women

SUBJECT: Recommended Appointments to the Contra Costa Commission for Women

The purpose of this memorandum is to forward to you the following recommendation from the Contra Costa Commission for Women (CCCW):

- Appoint Deborah Son to At Large Seat 11 on the CCCW
- Michelle Brown to At-Large Seat 15 on the CCCW

Background

The Contra Costa Commission for Women was formed to educate the community and advise the Contra Costa County Board of Supervisors and other entities on the issues relating to the changing social and economic conditions of women in the County, with particular emphasis on the economically disadvantaged.

The Committee consists of 20 members and one alternate, including:

- Five district representatives; (one from each supervisorial district)
- Fifteen at large members; and
- One at large alternate.

The five district representatives are nominated for a three year term by each of the five members of the Board of Supervisors. The fifteen at large members and one at large alternate are nominated by the CCCW membership committee and forwarded to the full CCCW. All nominated appointments to the CCCW are reviewed by the Family and Human Services Committee (IOC) and referred to the Board of Supervisors for approval. CCCW terms are for three years and they are staggered across the membership.

Current Status of Appointments

The CCCW have been actively recruiting applicants on an ongoing basis to fill the vacant seats.

The membership committee unanimously approved the above recommendations.

As of April 1, 2017 there are 3 at large vacancies (one recently open because of resignation at large seat 3) and the At Large Alternate seat is also vacant.

If the appointments recommended in this memorandum are ultimately approved, two at large seats will be filled. The vacancies remaining after approval would be 1 at large seats and one alternate. With several other applicants in process (interviews) as of April 1,2017.

Since May 2004, the CCCW has had extremely limited staff support and no budget provided by the County. However, the CCCW Membership Committee is continuing its recruiting efforts and plans to fill the remaining vacancies within the next few months.

cc without attachment: CCCW Me

CCCW Membership Committee/Gordon,Chair Enid Mendoza, CAO



For Office Use Only Date Received:

For Reviewers Use Only: Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

| MAIL OR DELIVER TO: | | | | | |
|---|-------------------------------|--------------------|--------------------------------|---------------|------------|
| Contra Costa County | | | | | |
| CLERK OF THE BOARD | | | 1 | | |
| 651 Pine Street, Rm. 106 Martinez, California 94553-1292 | | | | | |
| PLEASE TYPE OR PRINT IN INK | | | | | |
| (Each Position Requires a Separate | Application) | | | | |
| BOARD, COMMITTEE OR COMMISSION NAI | ME AND SEAT TITLE YOU ARE APP | LYING FOR: | | | |
| Contra Costa Commission for Wor | nen | At-Large 11 | | | |
| PRINT EXACT NAME OF BOARD, COMMITTE | | | ACT SEAT NAME (if applicable) | | |
| TRICT EXACT INAISE OF BOARD, COMMITTEE | E, OR COMMISSION | PRINTEA | ACT SEAT MAINE (IT applicable) | | |
| | | | | | |
| 1. Name: Son | Del | oorah | | SungMin | |
| (Last Name) | (First | Name) | (1 | Middle Nar | ne) |
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| 2. Address: | Lafayette, CA 94549 | | | | |
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| 5. EDUCATION: Check appropr | iate box if you possess o | ne of the followin | g: | | |
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| High School Diploma ☑ G.E.D. | Certificate California | High School Pro | ficiency Certificate | | |
| Give Highest Grade or Education | ALL aval Ashioved Master | Degree | | | \neg |
| Sive Highest Grade of Educations | ai Level Acilieved | 9 | | | |
| | | | | | Date |
| Names of colleges / universities | Course of Study / Major | Degree | Units Completed | Degree | Degree |
| attended | | Awarded | | Туре | Awarded |
| | | | Semester Quarter | | |
| A) University of California, Los | P 0.1 | V N 55 | | | |
| Angeles | English | Yes No 🗵 🗌 | 30 | B.A. | 08/2004 |
| | | 7 | | | |
| B) California State University, East | Social Work | Yes No 🗵 | | M.S.W. | 06/2014 |
| Bay | | | | | |
| C) | | | | | |
| | | Yes No 🔲 🗌 | | | |
| D) Other schools / training | Course Studied | Hours Co | mpleted | ortificate Au | tordod: |
| completed: | Course Studied | nours Co | Impleted Co | ertificate Aw | |

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|---|--|--|
| From To | Project Coordinator | Provide remote, virtual, and/or on-site technical assistance, training and |
| 04/2016 Present | Employer's Name and Address | organizational support to constituent |
| Total: <u>Yrs. Mos.</u> 1 0 Hrs. per week 40 . Volunteer | Asian Pacific Institute on Gender-Based Violence 500 12th Street, Suite 330 Oakland, CA 94607 | programs and project participants to strengthen capacity and leadership within Asian and Pacific Islander communities, and promote peer sharing and innovative strategies and collaboration in the anti-violence field. |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
| From To 09/2015 Present | Adjunct Professor | |
| | Employer's Name and Address | Provide instruction to graduate level |
| Total: Yrs. Mos. 1 7 Hrs. per week 10 . Volunteer | California State University, East Bay Department of Social Work 1000 Broadway, #109 Oakland, CA 94607 | social work students in seminar and lecture course settings, and serve as liaison between clinical field placements and the university. |
| | | |
| C) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | Title Crisis and Emergency Services Manager | Duties Performed Acted as lead in development and ongoing implementation of the Lethality |
| From To 05/2015 05/2016 | | Acted as lead in development and on- going implementation of the Lethality Assessment Program (LAP), a |
| From To 05/2015 | Crisis and Emergency Services Manager | Acted as lead in development and on- going implementation of the Lethality |
| From To 05/2015 05/2016 Total: Yrs. Mos. 1 0 Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) | Crisis and Emergency Services Manager Employer's Name and Address STAND! For Families Free of Violence 1410 Danzig Plaza | Acted as lead in development and ongoing implementation of the Lethality Assessment Program (LAP), a collaborative project of Contra Costa County's Domestic Violence Homicide Prevention Initiative. Also supervised the day-to-day operation of the crisis line program and emergency response |
| From To 05/2015 | Employer's Name and Address STAND! For Families Free of Violence 1410 Danzig Plaza Concord, CA 94520 Title | Acted as lead in development and ongoing implementation of the Lethality Assessment Program (LAP), a collaborative project of Contra Costa County's Domestic Violence Homicide Prevention Initiative. Also supervised the day-to-day operation of the crisis line program and emergency response support services. Duties Performed Managed and developed medical- |
| From To 05/2015 05/2016 Total: Yrs. Mos. 1 0 Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) | Employer's Name and Address STAND! For Families Free of Violence 1410 Danzig Plaza Concord, CA 94520 Title | Acted as lead in development and ongoing implementation of the Lethality Assessment Program (LAP), a collaborative project of Contra Costa County's Domestic Violence Homicide Prevention Initiative. Also supervised the day-to-day operation of the crisis line program and emergency response support services. Duties Performed |

| 7. How did you learn about this vacancy? |
|---|
| ☑CCC Homepage Walk-In Newspaper Advertisement District Supervisor Other |
| 8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No 🔽 Yes 🗍 If Yes, please identify the nature of the relationship: |
| 9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No Yes |
| If Yes, please identify the nature of the relationship: |
| I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and understand that all information in this application is publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra |
| Sign Name: Date: |

Important Information

- 1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
- 2. Send the completed paper application to the Office of the Clerk of the Board at: 651 Pine Street, Room 106, Martinez, CA 94553.
- 3. A résumé or other relevant information may be submitted with this application.
- 4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
- 5. Members of boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
- 6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation.
- 7. Meeting dates and times are subject to change and may occur up to two days per month.
- 8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.



Date Received:

Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO:
Contra Costa County
CLERK OF THE BOARD
651 Pine Street, Rm. 106
Martinez, California 94553-1292
PLEASE TYPE OR PRINT IN INK
(Fach Position Renulines a Senarate Application)

| Contra Co | Sta Comenistion s ME OF BOARD, COMMITTE | EE, OR COMMISSION | Contra Costa PRINT EX | COMMISSI ACT SEAT NAME | MFWV (if applicable) | Jamen | |
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| 1. Name :_ | Brown | M | thelle | | | 10(4r | |
| | (Last Name) | (First | Name) | | 1) | Middle Nan | ne) |
| 2. Address | | | Alau | | CA | 9451 | |
| | (No.) | (Street) | (Apt.) ((| City) | (State) | | (Zip Code) |
| 3. Phones : | | | | | | | |
| | (Home No.) | (Work No.) | (Cel | l No.) | | | |
| 4. Email A | ddress: | | | | | | |
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| gh School Dive Highest G Names of colar (A) | ploma G.E.D. Grade or Educations lleges / universities ttended | Certificate | Degree Awarded Yes No | Units Co Semester | Quarter | Degree Type | Degree Awarded |

Medical Exercises Specialist 6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

| (A) D ((A) - (b) D - (V) () | Title | Duties Performed |
|---|---|--|
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| nis. per week 10 . Volunteer | | personal + group |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
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| 7. How did you learn about this vacancy? |
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Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

5.

Meeting Date: 05/22/2017

Subject: Appointments to the Local Planning Council

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: 25

Referral Name: Child Care Planning/Development Council Membership

Presenter: Ruth Fernandez, LPC Contact: Enid Mendoza, (925)

Coordinator/Manager 335-1039

Referral History:

The review of applications for appointments to the Contra Costa Local Planning Council for Child Care and Development was originally referred to the Family and Human Services Committee by the Board of Supervisors on April 22, 1997.

The Local Planning and Advisory Council for Early Care and Education (LPC) coordinates programs and services affecting early child care and education, including recommendations for the allocation of federal funds to local early child care and education programs.

The LPC consists of 20 members: 4 consumer representatives - a parent or person who receives or has received child care services in the past 36 months; 4 child care providers - a person who provides child care services or represents persons who provide child care services; 4 public agency representatives - a person who represents a city, county, city and county, or local education agency; 4 community representatives - a person who represents an agency or business that provides private funding for child care services or who advocates for child care services through participation in civic or community based organizations; and 4 discretionary appointees - a person appointed from any of the above four categories or outside of those categories at the discretion of the appointing agencies.

Referral Update:

There are currently 12 seats filled on the LPC and 8 vacancies. These vacant seats include 3 consumer representatives, 1 child care provider, 1 public agency representative, and 3 community representatives.

Recently Daniel Safran submitted his resignation to the Discretionary 2 seat, which will result in an additional vacancy once the Board of Supervisors approves his resignation.

Ms. Cynthia Molander submitted her application for consideration and her appointment to the LPC was approved by Deputy Superintendent of Schools. Please see that attached memo and correspondence for additional information.

Recommendation(s)/Next Step(s):

CONSIDER recommending to the Board of Supervisors the appointment of Cynthia Molander to the Community Representative #3 seat on the Local Planning and Advisory Council for Early Care and Education with a term expiring April 30, 2018, as recommended by the County Office of Education.

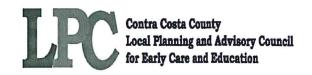
Fiscal Impact (if any):

There is no fiscal impact.

Attachments

LPC and COE Memo and C.Molander Application





MEMORANDUM

DATE:

May 22, 2017

TO:

Family and Human Services Committee Supervisor John Gioia, District I, Chair

Supervisor Candace Andersen, District II, Vice Chair

Contra Costa County Office of Education

Karen Sakata, Contra Costa County Superintendent of Schools

Dr. Pamela Comfort, Deputy Superintendent of Schools

FROM:

Ruth Fernández, LPC Coordinator/Manager, Educational Services

SUBJECT:

Referral #25 - LPC APPOINTMENT and RESIGNATION

Contra Costa County Local Planning and Advisory Council for Early Care and Education (LPC)

RECOMMENDATION(S):

1) APPOINT the following new member to the Contra Costa Local Planning and Advisory Council for Early Care and Education, as recommended by the LPC:

| Name | Seat | Area |
|-------------------------------|----------------------------------|----------------------|
| Cynthia Molander | Community 3 | Central/South County |
| 2) ACCEPT the resignatio Name | n for the following member: Seat | Area |
| Daniel Safran | Discretionary 2 | Central/South County |

REASON/S FOR RECOMMENDATION:

The Contra Costa County Local Planning Council for Child Care and Development (LPC) was established in April 1998. Required by AB 1542, which was passed in 1993, thirty members of the LPC were appointed by the County Board of Supervisors and the County Superintendent of Schools. Childcare consumers and providers, public agency representatives, and community representatives each comprise 20% of the LPC. The remaining 20% are discretionary appointees. Membership is for a three-year term. On January 7, 2003, membership was decreased from 30 to 25 members, due to the difficulty being experienced in filling all of the seats.

On September 19, 2012 membership was decreased from 25 to 20, due to continued difficulty to fill vacant seats. Official reduction of appointed seats provides flexibility to ensure quorum is met in order to conduct Council business.

Membership consists of the following:

- Four consumer representatives a parent or person who receives or has received child care services in the past 36 months;
- Four child care providers a person who provides child care services or represents persons who provide child care services;
- Four public agency representatives a person who represents a city, county, city and county, or local education agency;
- Four community representatives a person who represents an agency or business that provides private funding for child care services or who advocates for child care services through participation in civic or community based organizations;
- Four discretionary appointees a person appointed from any of the above four categories or outside of those categories at the discretion of the appointing agencies.

Appointments to the Contra Costa County Local Planning and Advisory Council for Early Care and Education (LPC) are subject to the approval of the Board of Supervisors and County Superintendent of Schools, Karen Sakata. The Board of Supervisors designated the Family and Human Services Committee to review and recommend appointments on their behalf. Dr. Pamela Comfort, Deputy Superintendent of Schools, Contra Costa County has been designated to review and recommend appointments on behalf of the County Superintendent of Schools.

Ruth Fernandez
Coordinator, Contra Costa Local Planning Council
Contra Costa County Office of Education
77 Santa Barbara Road
Pleasant Hill, CA 94523



Dear Ruth,

Thank you for inviting me to apply for a seat on the LPC Advisory Council. I am interested in serving on the council because I believe strongly in advocating for quality early care and education. I became aware of the work of the Council through the Multi-faith ACTION Coalition (MFAC) of Contra Costa County.

The MFAC represents over 50 communities of faith in our county. Its mission is to advocate for measures that address the root causes of poverty. The work of the Education Task Force, which I co-chair, recognizes the importance of assuring that children from low-income families have access to affordable quality childcare during the early years when they are developing social, intellectual and emotional skills. Children who receive care in environments that support their development in these critical areas are far more likely to succeed in school and in life.

At its February meeting, the MFAC Steering Committee approved a proposal from the Education Task Force that we partner with other agencies in the community who share our advocacy mission. First on the list is the LPC!

I appreciate the welcome I received when I have attended Council meetings and look forward to joining the dedicated members of the group.

Sincerely,

Cynthia Molander



APPLICATION FOR MEMBERSHIP

| Name: | Cypthia N. Molander | | | | L | |
|---|---|----------------------------------|------------------------------|---|-------------------------------|-----------------|
| Home Add | dress: City: | Conco | rd | Zip | 94 | 521 |
| Business/ | Agency/Affiliation: Multi-faith ACTION | 1 Coals | rigiti | of Contr | a Cost | Tounty |
| Address: | Kichmond Commundy Tours City: Kich | MONO | | 7in: 94 | LYOU | |
| Type of O | rganization: Faith-bases Posi | tion: Co | -cha | ir Edul | מסולם | Tosk Force |
| Day Phon | | | | | | |
| | | | | | | |
| The Coun Early Care Twenty per categories Represent | GORIES FOR APPOINTMENT ty Board of Supervisors and the Superintender e and Education Planning Council. Members re- ercent of the Planning Council members are to described below: Child Care Consumer, Che tative, Public Agency Representative, and All represent. | must live be drav ild Care | or wor wn from Provide | k in Contra each of the er, Commu | a Costa he follow unity | County. ring |
| | 1. Consumer of Child Care Services - usi | na childe | ooro or | have used | l it within | the next |
| | 36 months. | rig Grillat | care or | nave used | I IL WILIIII | i trie past |
| | Are you currently utilizing Child Care? Yes _ | _ No | Date yo | u last used | it: | |
| | Type of Care: Length of Time as a Consumer: | _ | Locatio | n: | | |
| | 2. Child Care Provider- please check the | | caro w | ou provido | and not | o the |
| u | number of children: | types or | care yo | ou provide | and note | e trie |
| | Licensed family care provider | | # of chi | ldren licens | ed for | |
| | Licensed & publicly funded child care | center | # of chi | ldren licens | ed for | |
| | Licensed, private for profit, or private | | # of chi | ldren licens | ed for | |
| | non-profit child care center | | | | | |
| | Subsidized Child Care Program | | # of chi | ldren licens | ed for | |
| | License exempt child care provider | | # OI Chi | ldren cared | ior | |
| | Location of your facility: | | Program | n/Center Na | ame: | |
| | | | - | | | |
| נו | 3. Community Representative: Includes c | ivic or co | nmmun | ity hased a | anencies | or |
| | business that advocate for child care but do NOT provide child care or contract with the California Department of Education to provide child care and developmental services. | | | | | |
| | Organization: Mutti-Faith | Service | Provide | d: advo | cacu | |
| | ACTION CONTRACTO | | | | | |
| | Location: Contra Posta County | Service | Area: | atra Cos | aLLoui | <u> </u> |
| | 4. Public Agency Representative - Including Agency: | ing city, o Service | county Area: | and local e | education | n agencies. |
| | 5. All Other- Please describe: | | | | | |
| | | | | | | |
| | | | | | | |

B. GEOGRAPHIC, ETHNIC, AND CULTURAL DIVERSITY REPRESENTATION CalWORKS legislation AB 1542 (Education Code 8499.3 d) states, "Every effort shall be made to ensure that the ethnic racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county" Which region of the County would you represent: Lentral South County Please indicate your ethnic origin: White (non-Hispanic) Black (Includes African, Jamaican, Trinidad and West Indian) Hispanic (includes Mexican, Puerto Rican Cuban, Latin American or Spanish) Asian or Pacific Islander (includes Pakistani, East Indian, Japanese, Tongan, Filipino, Laotian, or Vietnamese) American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue or tribal association) C. CURRENT COUNCIL INVOLVEMENT: Are you currently an active participant on a Council Committee? X No Yes Which Committee: What is your participation? D. INTERESTS: Personal/Professional areas of interest/experience/skills that could benefit the Council: Mease see attachment I am interested in becoming a Council representative because: I believe strongly in advocating for quality early care and education. E. MEMBER RESPONSIBILITIES: Members are expected to attend regular meetings on the fourth Monday of July, September, November, January, March, and May from 3:00 p.m. to 5:00 p.m. and participate in at least one committee. Additional meetings may be scheduled for training and council business. Are you able to commit to regular participation, given this schedule: X Yes No If needed, do you have the support of your agency/employer to be an active member of the Council? Yes _____ No F. How did you hear about the Planning Council? Ruth Fernandez

Please attach your resume and a letter of interest with this application. Mail completed application, resume and letter of interest to the Contra Costa County Local Planning and Advisory Council (LPC) Coordinator at the Contra Costa County Office of Education, 77 Santa Barbara Road, Pleasant Hill, CA 94523.

For more information please call the LPC Coordinator at (925) 942-3413.

| Signature; | Date: 03/03/17 |
|------------|----------------|
| • | |



For Office Use Only Date Received:

For Reviewers Use Only: Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO:
Contra Costa County
CLERK OF THE BOARD
651 Pine Street, Rm. 106
Martinez, Calfornia 94553-1292
PLEASE TYPE OR PRINT IN INK
(Each Position Requires a Separate Application)

| Centra Coste | County Local P | anding and | Constitu | ANY EXACT | entral/So | with Count | ty | | |
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| 1. Name: | Molander | Duck | thia | | | 7. 10217 | and the state of t | 711E 075 77 75 | |
| And the second second second | (Last Name) | راFirst Name | | | | (N | (Middle Name) | | |
| 2. Address | | | | |) i | CA | G | 94521 | |
| z. Addiess | (No.) | (Street) | (Apt.) | oncord (Cit | Maria Caracian Caraci | (State) | | (Zip Code) | |
| B. Phones: | | | | | | n na na Prairig No. 22. | | | |
| | (Home No.) | (Work No.) | | (Cell N | o.) | | | | |
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THIS FORM IS A PUBLIC DOCUMENT

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|--|--|---|
| From To | | |
| Oaloilly Present | Co-chair, Education Task Force | engaging with community |
| | Employer's Name and Address | for measures that |
| Total: <u>Yrs. Mos.</u> Hrs. per week | Multi-Faith ACTION Contition of Centre Costa County Yelichmond Community Found attom 1014 Florida Ave #200 Richmond CA 94804 | expand educational opportunities for low-income families in Contra Costa County |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | Community Dutrend | planning, organizing, |
| 01/01/15 Present | Employer's Name and Address | recrusting volunteers |
| Total: Yrs. Mos. 2 | St. John's Episcopal Church 5555 Clayfon Fed. Clayton, CA 94517 | for panish outreach pojects |
| | | |
| C) Dates (Month, Day, Year) | Title | Duties Performed |
| From To original P4 Total: Yrs. Mos. | Teacher, English as a Second Language Employer's Name and Address | Classes at Family Literacy Centers. |
| Hrs. per week 22. Volunteer | Mt. Diablo Unified School District 1936 Carlotto. Drive Concord, CA 94519 | in conjunction with staff of First 5- sponsored preschools. |
| D) Dates (Month, Day, Year) | Title | Duties Performed |
| To To To To To To To To | member Lagital Avea United Civers Planning Lowal Employer's Name and Address Baton Rough, LA | |
| | | |

| 7. How did you learn about this vacancy? |
|---|
| □CCC Homepage Walk-In □Newspaper Advertisement □District Supervisor □Other Ruth Femande2 |
| 8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): NoX Yes |
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| 9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? NoX Yes |
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| Sign Name: Date: C3 03)17 |
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THIS FORM IS A PUBLIC DOCUMENT

From: Safran Daniel <danielsafran@yahoo.com>

To: Ruth Fernandez <rfernandez@cccoe.k12.ca.us>
CC: Cathy & Larry Roof <geeroofs@gmail.com>

Date: 4/7/2017 10:22 AM
Subject: Letter of Resignation

Hi Ruth,

I'm sending this email to formally submit my resignation as a member of the Contra Costa County Local Planning Council for Early Care and Education. I appreciate the work of the LPC and hope to find other ways of supporting the achievement of its mission. While it has been a pleasure to serve for these past several years, I am now devoting a large portion of my time to advocacy for -and service to- immigrants and refugees.

As is well known, except for our native population and those brought here in bondage, people across many generations have come to America to flee uncertainty, oppression and abuse. Many of us came -or are descended from people who came- with false or no documentation to seek a better life. The November 2016 election ushered in an administration in Washington with little regard for this history or for what America is and means. New federal policies have created animosity toward immigrants and minorities, resulting in fear, uncertainty, discrimination, attacks and the danger of deportation.

I plan to work aggressively to change those policies and protect my neighbors. Unfortunately, the time I am committing and the political nature of my work are incompatible with my continuing on the LPC.

I applaud what the Contra Costa County LPC has done and continues to do and I greatly appreciate your leadership.

Fondly,

Dan

P.S. Cathy, I plan to share this information with the Executive Committee on Monday afternoon.



May 22, 2017

Statement re: Appointment of LPC Member

I have reviewed the memorandum and member application submitted by the Contra Costa Local Planning and Advisory Council for Early Care and Education (LPC) recommending approval to appoint Cynthia Molander to vacant seat of Community 3 -Central/South County.

Based on the applicants' education, background, and current affiliation with the Multi-faith ACTION Coalition of Contra Costa County, I've determined that Ms. Molander meets the eligibility definition for Community Seat in Contra Costa County as defined by the LPC Membership Structure. Ms. Molander is currently Co-Chair of the Education Task Force for the Multi-faith ACTION Coalition and has over 11 years of service in education as an English Language Learner Teacher with the Mount Diablo Unified School District.

The applicant possesses relevant experience and knowledge about the early care and education system and understands the diverse needs of children and families through her work experience as an educator in Central Contra Cosa County, and her continuous leadership within the faith-based community.

I vote to approve the recommendation submitted by the LPC.

I extend my welcome to Cynthia Molander and thank her for her interest in contributing her knowledge and expertise for the improvement of early care and education in Contra Costa County through community service on the LPC.

Pamela Comfort, Ed.D., Deputy Superintendent, Educational Services acting on behalf of

Karen Sakata, Contra Costa County Superintendent of Schools

cc: Supervisor, John Gioia, District I, Chair Supervisor Candace Andersen, District II, Vice Chair Ruth Fernandez, LPC Coordinator Cathy Roof, LPC Chair

Famile Comfort



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES

6.

COMMITTEE

05/22/2017

Subject:

Appointments to the Workforce Development Board

Submitted For:

Meeting Date:

FAMILY & HUMAN SERVICES COMMITTEE,

Department:

County Administrator

Referral No.:

N/A

Referral Name:

Appointments to Advisory Bodies

Presenter:

Contact: Enid Mendoza, (925) 335-1039

Referral History:

On December 13, 2011, The Board of Supervisors adopted Resolution No. 2011/498 adopting policy governing appointments to independent boards, committees, and commissions, and special districts. Included in this resolution was a requirement that independent bodies initially conducting interviews for At Large/Countywide seats provide appointment recommendations to a Board Committee for further review.

The Workforce Development Board implements federal requirements for programs to address the education, skills, and employment needs for a skilled workforce, and that lead to an increase in the skills and earnings of Contra Costa residents.

Referral Update:

On March 14, 2016, the Family and Human Services Committee (F&HS) accepted the Employment and Human Services Department's recommendation to decertify the then current Workforce Investment Act local Board and recertify and new board structure in compliance with the new Workforce Innovation and Opportunity Act (WIOA). F&HS approved these recommendations, and the Board did the same at their March 29, 2016 meeting.

Under new standards in WIOA (2016) and as adopted by the Board on March 29, 2016, the new Workforce Development Board structure is: a total of 23 required seats and 2 "optional seats", consisting of: 13 Business representatives, 5 Workforce representatives, and 5 Education and Training representatives as follows: (1) Adult Education/Literacy; (2) Higher Education; (3) Economic & Community Devl; (4) Wagner Peyser representative; (5) Vocational Rehabilitation. Also two additional/ "optional" seats that may be filled from any of the 3 categories above.

The Employment and Human Services Department is requesting an appointment to the Additional #2 seat on the Workforce Development Board. Please see the attached memo, application and roster for additional information.

Recommendation(s)/Next Step(s):

CONSIDER recommending to the Board of Supervisors the appointment of John Montagh to the Additional #2 seat on the Workforce Development Board with a term expiring June 30, 2020, as recommended by the Employment and Human Services Department.

Fiscal Impact (if any):

There is no fiscal impact.

Attachments

WDB Memo to F&HS

J.Montagh Application

WDB Roster



MEMORANDUM

DATE: April 18, 2017

TO: Family and Human Services Committee

CC: Kevin Corrigan, CAO Senior Management Analyst

Enid Mendoza, CAO Sr. Deputy County Administrator

FROM: Donna Van Wert, Interim Executive Director

SUBJECT: Appointment to Workforce Development Board

This memorandum requests the Family and Human Services Committee recommend to the Contra Costa County Board of Supervisors the appointment of the following candidates to the new WIOA compliant Workforce Development Board of Contra Costa County.

Background:

Local board structure and size:

Compared to predecessor legislation, the Workforce Innovation and Opportunity Act (WIOA) substantially changes Local Board composition by reducing local workforce development board size while maintaining a business and industry majority and ensuring representation from labor and employment and training organizations.

The Executive Committee of the local WIOA board met January 21, 2016 and approved a recommended WIOA Board configuration, subsequently approved by the Board of Supervisors on March 29, 2016. To meet the categorical membership percentages, the WDB recommended a board of twenty-five (25) members. This option represents the minimum required local board size under WIOA plus an additional six (6) optional representatives in the following enumerated categories: 1) business; 2) workforce; 3) education and training.

Category – Representatives of Business (WIOA Section 107(b)(2)(A))

• Thirteen (13) representatives (52%)

Category – Representatives of Workforce (WIOA Section 107(b)(2)(A))

• Five (5) representatives (20%)

Category - Representatives of Education and Training (WIOA Section 107(b)(2)(C))

- One (1) Adult Education/Literacy Representative (WIOA title II)
- One (1) Higher Education Representative
- One (1) Economic and Community Development Representative
- One (1) Wagner Peyser Representative
- One (1) Vocational Rehabilitation Representative

Two (2) additional seats from the above categories, including constituencies referenced in Attachment III of Training Employment & Guidance Letter (TEGL) 27-14.

Recommendation:

- a) Recommend approval of local board candidate for the vacant Flex Additional seat to the new WIOA-compliant board (Attached application & board roster)
 - Interview Date January 30, 2017
 - John Montagh Approved on April 12,2017 at the Executive Committee Meeting
 - No other candidate competed for the vacant Flex Additional Seats.

NEW APPOINTMENT

| Seat | Last Name | First Name | Address & District | Term of | District |
|--------------|-----------|------------|--------------------|------------|---------------|
| | | | # | Expiration | (Resident) |
| Flex Seat #2 | Montagh | John | 1950 Park Side | 6/30/2020 | Not available |
| | | | Drive | | |
| | | | Concod, CA 94519 | | |
| | | | District 4 | | |

Thank you

DVW/rms attachment



MAIL OR DELIVER TO: Contra Costa County For Office Use Only Date Received:

For Reviewers Use Only: Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

CLERK OF THE BOARD 651 Pine Street, Rm. 106 Martinez, California 94553-1292 PLEASE TYPE OR PRINT IN INK (Each Position Requires a Separate Application) BOARD, COMMITTEE OR COMMISSION NAME AND SEAT TITLE YOU ARE APPLYING FOR: Workforce Development Board of Contra Costa C Boardmember PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION PRINT EXACT SEAT NAME (if applicable) 1. Name: Montagh Andrew John (Middle Name) (Last Name) (First Name) Concord CA 94519 2. Address: (No.) (Street) (Apt.) (City) (State) (Zip Code) 3. Phones: (Work No.) (Home No.) (Cell No.) 4. Email Address: 5. EDUCATION: Check appropriate box if you possess one of the following:

| Names of colleges / universities attended | Course of Study / Major | Degree Awarded | Units Co | mpleted | Degree Type | Date Degree Awarded |
|---|-------------------------|-------------------|----------|---------|-------------------------|--|
| | | September 1999 | Semester | Quarter | | |
| San Franscisco State University | Business Administration | Yes No 🗵 | | P. Jr. | BS | 1985 |
| B) | | Yes No 🔲 | | | | |
| C) | | Yes No 🔲 | | 177ACF/ | 3 250 Co | The second secon |
| D) Other schools / training completed: | Course Studied | Hours Cor | mpleted | Ce | ertificate Aw Yes No | |

High School Diploma 区 G.E.D. Certificate ☐ California High School Proficiency Certificate ☐

Give Highest Grade or Educational Level Achieved Bachelor of Science Business Administration

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|--------------------------------|--------------------------------|--|
| From To | Econ. Dev. and Housing Manager | Output the Cityle Francesia |
| 1994 Current | Employer's Name and Address | Oversee the City's Economic Development Program including |
| Total: <u>Yrs.</u> <u>Mos.</u> | | business retention, expansion and |
| 23 | City of Concord | attraction programs. Also manage the |
| | 1950 Park Side Drive | City's affordable housing program to preserve and expand the City's |
| Hrs. per week 40 . Volunteer | Concord Ca 94519 | affordable housing stock. |
| | | |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | Boardmember WDB of Co.Co.Co | |
| 12/2006 06/2015 | Employer's Name and Address | Attended and acted on Board related |
| Total: Yrs. Mos. | | matters for the Workforce |
| 9 | | Development Board of Contra Costa. |
| | | Also served on the Board's Economic Development subcommittee |
| Hrs. per week Volunteer 🗵 | * | |
| | | |
| C) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | | |
| | | |
| Table Was Maria | Employer's Name and Address | |
| Total: <u>Yrs.</u> <u>Mos.</u> | | |
| | | |
| Hrs. per week Volunteer | | |
| This, per week Volumeer | | |
| D) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | | |
| | | |
| | Employer's Name and Address | |
| Total: Yrs. Mos. | | |
| | | |
| | | |
| Hrs. per week | | |
| | | |

THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA and for Special Districts, Agencies and Authorities Governed by the Board Adopted Resolution no. 2011/55 on 2/08/2011 as follows:

IN THE MATTER OF ADOPTING A POLICY MAKING FAMILY MEMBERS OF THE BOARD OF SUPERVISORS INELIGIBLE FOR APPOINTMENT TO BOARDS, COMMITTEES OR COMMISSIONS FOR WHICH THE BOARD OF SUPERVISORS IS THE APPOINTING AUTHORITY

WHEREAS the Board of Supervisors wishes to avoid the reality or appearance of improper influence or favoritism; NOW, THEREFORE, BE IT RESOLVED THAT the following policy is hereby adopted:

- I. SCOPE: This policy applies to appointments to any seats on boards, committees or commissions for which the Contra Costa County Board of Supervisors is the appointing authority.
- II. POLICY: A person will not be eligible for appointment if he/she is related to a Board of Supervisors' Member in any of the following relationships:
- 1. Mother, father, son, and daughter;
- 2. Brother, sister, grandmother, grandfather, grandson, and granddaughter;
- 3. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter;
- 4. First cousin;
- 5. Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
- 6. Sister-in-law (brother's spouse's sister), brother-in-law (sister's spouse or spouse's brother), spouse's granddaughter, and spouse's grandson;
- 7. Registered domestic partner, pursuant to California Family Code section 297.
- 8. The relatives, as defined in 5 and 6 above, for a registered domestic partner.
- 9. Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103. Financial Interest), such as a business partner or business associate.

8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional

commitment of time.

CITY OF CONCORD

COMMUNITY & ECONOMIC DEVELOPMENT

1950 Parkside Drive, MS/1B Concord, California 94519 Telephone: (925) 671-3355

FAX: (925) 671-3381



CITY COUNCIL Laura M. Hoffmeister, Mayor Ronald E. Leone, Vice Mayor Edi E. Birsan Timothy S. Grayson Daniel C. Helix

Tim McGallian, City Treasurer Valerie J. Barone, City Manager

March 1, 2017

Ms. Stephanie Mello County Administrator's Office Contra Costa County 651 Pine Street, Room 106 Martinez, CA 94553

Dear Ms. Mello,

I would like to take this opportunity to highly recommend John Montagh for membership on the Workforce Development Board of Contra Costa County (WDB).

John actively served on the WDB Board for approximately nine years (2006-2015) and also served on the WDB's Business and Economic Development Committee during his tenure on the Board. He is currently the City of Concord Economic Development and Housing Manager implementing the City's business attraction, retention and expansion programs along with preserving and creating affordable housing in Concord. John has worked in the economic development field for more than 20 years and has a keen understanding of the local and regional economies. His relationships with industry/business leaders, entrepreneurs and real estate professionals would be a valuable asset for the WDB.

Given John's prior service on the WDB, his professional experience and economic development knowledge, I know he would be a respected and productive member on the Workforce Development Board of Contra Costa County and I highly recommend him for this position.

Sincerely,

Victoria Walker Director of Community and Economic Development City of Concord



BOARD MEMBERS PUBLIC ROSTER

| Name | Seat # | Appointment Date | District # (Resident) | Term End Date | Title | Entity | District # (Employment) |
|------------------------|--------|---|--|------------------|---|--|----------------------------|
| Michael McGill | П | 3/29/2016 | District #2 | 6/30/2020 | Chairperson/Engineer | MMS Design Associates | District #2 |
| Pamela Kan | 7 | 3/29/2016 | | 6/30/2020 | Small Business/President | Bishop-Wisecarver Corporation | District #5 |
| Bill Mahoney | 3 | Pending BOS | Vacaville, CA | 6/30/2020 | Instumentation & Electrical Supervisor | Shell Oil Company | District #5 |
| Maggie Carrillo | 4 | 3/29/2016 | District #3 | 6/30/2020 | Human Resources Manager | Ramar Foods International (MFG) | District #5 |
| Bhupen B. Amin | 2 | 3/29/2016 | District #4 | 6/30/2020 | Chief Operating Officer & Counsel | Lotus Hotels & Investments | District #4 |
| Jose Carrascal | 9 | 3/29/2016 | District #3 | 6/30/2020 | Production Leader | The Dow Chemical Company | District #5 |
| Jason Cox | 7 | 3/29/2016 | District #4 | 6/30/2020 | Manager, Rolling Div. Maintenance | USS-POSCO Industries | District #5 |
| Ashley Georgian | ∞ | 3/29/2016 | Plesanton, CA | 6/30/2020 | Director, Government Affairs | John Muir Health | District #4 |
| Robert Lilley | 6 | Pending BOS | District #4 | 6/30/2020 | Business Development Director | Contra Costa Electric , Inc. | District #5 |
| Robert Rivera | 10 | 3/29/2016 | District #4 | 6/30/2020 | Vice President of Sales | The Staffing Solutions | District #5 |
| Justin Steele | 11 | 3/29/2016 | Berkeley, CA | 6/30/2020 | Human Resources Manager | Chevron Richmond Refinery | District #1 |
| Paul Adler | 12 | 3/29/2016 | | 6/30/2020 | Manager, Public Affairs | Phillips 66 | District #5 |
| Vacant | 13 | | | 6/30/2020 | | | |
| Name | Seat # | Appointment Date | | Term End Date | Title | Entity | |
| Vacant | 7 | | | 6/30/2020 | | | |
| Robert III Williams | 2 | 3/29/2016 | District #1 | 6/30/2020 | Labor Organization/Business Representative | IUPAT 741 (Joint Labor Management Apprenticeship) | Livermore. CA |
| Steve Older | 8 | 3/29/2016 | District #4 | 6/30/2020 | Registered Apprentiship/Area Director | Intl. Assoc. of Machinist & Aerospace Workers, AFL-CIO, District 190 | District #5 |
| Margaret Hanlon-Gradie | 4 | 3/29/2016 | District #1 | 6/30/2020 | Executive Director | Contra-Costa AFL-CIO Labor Council | District #5 |
| James Araby (RESIGNED) | 2 | 3/29/2016 | District #5 | 6/30/2020 | Executive Director | UFCW Western States Council | Buena Park, CA |
| Name | Seat # | Appointment Date | | Term End Date | Title | Entity | |
| Kathy Farwell | - | 3/29/2016 | District #5 | 6/30/2020 | Adult Education & Literacy/Director | Martinez Unified School Distriict/Martinez Adult Education | District #5 |
| Randal Tillery | 2 | 3/29/2016 | Berkeley, CA | 6/30/2020 | Inst. Higher Educ./Sr. Dean of Workforce & Eco. Dev. | Contra Costa Community College | District #5 |
| Name | Seat # | Appointment Date | | Term End Date | Title | Entity | |
| Kristin Connelly | 1 | 3/29/2016 | District #2 | 6/30/2020 | Economic & Community Dev./President & CEO | East Bay Leadership Council | District #4 |
| Richard Johnson | 2 | 3/29/2016 | | 6/30/2020 | Employment Service/Employment Prog.Manager II | California Employment Development Department | District #4 |
| Carol Asch | 33 | 3/29/2016 | | 6/30/2020 | Rehabilitation Act of 1973/District Administrator | California Department of Rehabilitation | District #4 |
| Name SH&= | Seat # | Appointment Date | | Term End Date | Title | Entity | |
| Yo k nda Vega | 1 | 3/29/2016 | Distrtict #2 | 6/30/2020 | Facilitator/Mediator Partnering Services | Bay Area Rapid Transit | Oakland, CA |
| Vægant | 2 | | | 6/30/2020 | | | |
| da Packet Page 42 | | BUSINESS WORKFORCE & LABOR EDUCATION AND TRAINING GOVERNMENTAL AND ECON FLEX ADDITIONAL MEMBERS PENDING APPROVAL/CONFIR | BUSINESS WORKFORCE & LABOR EDUCATION AND TRAINING GOVERNMENTAL AND ECONOMIC AN FLEX ADDITIONAL MEMBERS PENDING APPROVAL/CONFIRMATION VACANT SEAT | ND COMMUN | BUSINESS WORKFORCE & LABOR EDUCATION AND TRAINING GOVERNMENTAL AND ECONOMIC AND COMMUNITY DEVELOPMENT FLEX ADDITIONAL MEMBERS PENDING APPROVAL/CONFIRMATION VACANT SEAT | | |



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

7.

Meeting Date: 05/22/2017

Subject: Stand Down on the Delta for Homeless Veterans

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: 56

Referral Name: East Bay / Delta Stand Down for Homeless Veterans

Presenter: Nathan Johnson, Veterans Service Officer; J.R. Contact: Enid Mendoza,

Wilson, Director of Stand Down on the Delta (925) 335-1039

Referral History:

On November 6, 2001, the Board of Supervisors referred to the Family and Human Services Committee the review of the plans and preparations for the bi-annual East Bay Stand Down for Homeless Veterans. The East Bay Stand Down occurs bi-annually on even numbered years, so the Family and Human Services Committee considers the report from the Veterans Service Office only every two years.

In September of 2015, the Delta Veterans Group held its first "Stand Down on the Delta" event, which was a four-day, three-night event where Veterans were provided full medical treatments, court and legal services, DMV, Chaplain services, housing, addiction and mental health counseling, employment and other community services. The Veterans Service Officer presented information on the first Stand Down on the Delta at the July 20, 2015 Family and Human Services Committee (F&HS) meeting. Since this stand down was expected to continue as a biannual event every odd numbered years, F&HS Referral No. 56 East Bay Stand Down for Homeless Veterans was expanded to include biannual informational reports on the Stand Down on the Delta events.

Referral Update:

Please see the attached memo and informational brochures regarding the Stand Down on the Delta scheduled for August 11-14, 2017.

Recommendation(s)/Next Step(s):

ACCEPT the report from the Veterans Service Office on the Stand Down on the Delta for Homeless Veterans event and forward to the Board of Supervisors for their information.

Fiscal Impact (if any):

There is no fiscal impact.

Attachments

VSO Memo to F&HS

Stand Down on the Delta Tri-fold Guide

Stand Down on the Delta Tri-fold Volunteer Info

Delta Veterans Group Poster

Contra Costa County Veterans Service Office

- □ 10 Douglas Drive, #100 Martinez, CA 94553-4078 (925) 313-1481 FAX (925) 313-1490
- □ 2101 Vale Road, #302 San Pablo, CA 94806 (510) 374-3241 FAX (510) 374-7955



- □ 3361 Walnut Blvd, #140 Brentwood, CA 94513 (925) 313-1481 FAX (925) 313-1490
- □ 400 Hartz Avenue, #208 Danville, CA 94526 (925) 313-1481 FAX (925) 313-1490

May 17, 2017

Supervisor John Gioia, District I, Chair Supervisor Candace Andersen, District II, Vice Chair Family and Human Services Committee

Stand Down on the Delta for Homeless Veterans

Background: The Stand down on the Delta is an extraordinary event serving 350 homeless Veterans and their families from the San Francisco Bay Area. They have an opportunity to receive invaluable and diverse services and care in a safe, secure environment. The goal is to assist homeless veterans to end the cycle of homelessness by bringing into one location transitional housing opportunity, medical/dental care, legal services, benefits counseling, food, clothing, entertainment and many other services. Most important, our participants receive this care in a respectful manner and we let them know they are not forgotten. This event is supported by hundreds of dedicated community volunteers and agencies.

Recommendation: The Board of Supervisors endorses and supports the Stand Down on the Delta to be held August 11 through 14, 2017 at the Contra Costa County Fairgrounds, Antioch, CA.

As a volunteer and member of the Executive Board for Stand Down on the Delta, I am pleased to present the opportunity to discuss an event that has a strong positive effect on our community.

J.R. Wilson, Board Chairman, is with us today and would like to make a few comments.

Thank you for your support on this worthy endeavor!

Nathan D. Johnson County Veterans Service Officer



If I am a Wheelchair Bound veteran, will I be able to get transportation to Stand Down on the Delta?

Contra Costa County Homeless

pre-registration for Stand Down on the Delta for Yes, you must obtain a blue bus pass during your one of these three pick up sites.

Must be pre-registered with a blue bus Pass Wheelchair Bound Veterans Pick Up ONLY! 4150 Clement St, San Francisco, CA 94121 San Francisco VA Medical Center:

Must be pre-registered with a blue bus pass 2221 M.L.K. Jr Way, Oakland, CA 94612 Wheelchair bound Veteran Pick Up Oakland VA Outpatient Clinic:

Wheelchair bound Veteran Pick Up Martinez VA Outpatient Clinic 150 Muir Road, Martinez, CA

so please Identify your need during the Registration and intake process for Stand Department of Veterans Affairs if you have a Scooter you are asked to leave it where you Down on the Delta Scooter" during the Wheelchair There are a limited number of Motorized Scooter's (first come first serve), Must be pre-registered with a blue bus pass provided stay and request the use of for is bound veterans Down on the Delta. **Transportation** event.

them to my registration?," "Can I bring my girlfriend?" Who can I contact with questions that come up after I register (ie: "Î just found out my kids will be with me that weekend, can I add

Alex Alexander @ AlexA@shelterinc.org Cell 415-519-9983 Fax 925-335-9815 David Boatwright @ yeah4david@yahoo.com Cell 707-782-6840













DVG is undertaking again the challenge of bringing Contra Costa Counties Homeless Veterans "Stand Down on the Delta, 2017" August 11-14, 2017 at the Contra Costa Fairgrounds in Antioch, CA. DVG is a 501 (c) 3 nonprofit organization in its fourth year of operation, and is staffed 100% by volunteers who provide services to veterans from all over the Bay Area at our location in east Contra Costa County. It is estimated that between 1,500 and 2,000 volunteers will participate in the Stand Down on the Delta 2017, to help serve our Veterans, who have sacrificed and served us all.

This Stand Down comes at a critical time for Contra Costa County, as nonprofits serving Veterans such as Delta Veterans Group, corporations and businesses, foundations, the faith community, County Health Services, the Veterans Administration, local hospitals, law enforcement, and other sectors dealing with homeless persons come together as a part of an attempt to end veteran homelessness. Contra Costa County's BI-ANNUAL "Stand Down on the Delta" is a key vehicle to drive this effort.

I'm sure you know that there is a disproportionately large percentage of Veterans in the homeless population, and homeless female Veterans are growing in number as their representation in the military has increased in recent years.

But it doesn't have to be this way, and you can be a vital part of the solution here in Contra Costa County in 2016-2017 as a Donor or Sponsor of Stand Down on the Delta, 2017.

Q&A

What items can I bring/not bring?

Please bring two sets of clothing (clothing will be handed out to you at Stand Down on the Delta) just in case we do not have your size readily available. Please bring Identification if you have an I.D. (This will help you obtain certain services faster) NO WEAPONS, DRUGS or ALCOHOL!

How will my medications be stored/ handled?

Medications will be checked for Prescription and I.D. during the medical triage process at Stand Down on the Delta. If you have Medication that needs to be refrigerated, Stand Down on the Delta has refrigeration that will be secured and available for your medication storage needs.

What is the parking arrangement at Stand down if I wish to transport myself?

There is a lot of Parking onsite, the entrance to Stand Down on the Delta is the "O St" entrance. Once inside the event you will not be able to have access to your car until the end of the four days. You must be across freedom bridge and starting your intake process by 1pm on Friday August 11, 2017.

If I have a job interview and can't stay for the whole weekend, can I still come for the day?

No there are NO ins and outs

What is the plan for minor children who will be attending? Any special scheduled activities?

Stand Down on the Delta welcomes Children and Dependents of Veterans. Paradise Skate has opened its doors for a night of fun Skating. Children arts and craft activities are planned for Saturday and Sunday of the event. Saturday night is Family Movie night, come out and enjoy a movie and Poncorn.

Are pets allowed, including service animals, and what is their care and transportation plan?

Veterans are given a respite from the street, their Pet care will be provided on-site during the Stand Down event. Please advise participants that they will have daily access to their pets once inside the Veterans that need bus transportation to Stand Down and have a Pet must be directed to and given a bus pass for one of the PET STAND DOWN: Stand Down on the Delta will be accommodating Veterans with pets. While the pets will receive medical care, food and socializing. Stand Down encampment during visiting Hours/ walking times as needed for Comfort, all in three (3) "pet pick up" locations (S.F. downtown clinic, Oakland VA OPC, or Martinez VA OPC). Veterans with pets must be "pre-registered controlled areas.

Veterans must provide us with the number and type of animal (dog/cat) that will participate. Under "type" on the Eligibility Form please put (a) animal name, (b) species, (c) estimated weight, (d) and breed. All pets must be registered prior to Stand Down to reserve a space on the pet shuttles that will travel with each bus as needed. At check-in in Antioch all Veterans will briefly reunite with their pet and be asked about vaccinations and any medical conditions.

What is the plan for CPAP machines?

If you have a CPAP/Bi PAP machine please alert the Stand Down Medical team during the Triage process. You will be assigned to the Medical Special needs tent.

Will I be able to charge my motor scooters/ wheelchairs and cell phone that need charging during Stand down?

- Electrical Charging stations will be available just for charging Motorized Chair's and Scooters.
- Electrical phone charging stations spread throughout the encampment for your use.

Will showers be available?

Yes, Showers will be available for both Men and Women!

Contra Costa County Homeless Veterans Stand Down











\$1,000-2,499 \$2,500-4,499 \$4,500-9,999 \$300-399 \$400-499 \$500-999 \$200-299 \$10,000+ \$100-199 \$1-49 \$50-99 Command Sergeant Major General (Event Sponsor) Sergeant First Class First Sergeant Lieutenant General Brigadier General Major General Tent Sponsor Corporal Sergeant

veterans in the most need and their families Veterans Group. Your support will help our make the toughest transition of their lives. Thank you for your contribution to Delta

deductible to the extent allowed by law. 2650624. Your contribution is tax-Delta Veterans Group is a 501(c)(3) nonprofit organization, Tax ID #46-

Delta Veterans Group Pittsburg, CA 94565 Please mail to: P.0. Box 1692

C/O Stand Down on the Delta 815 Fulton Shipyard Rd Antioch, CA 94509 Antioch VFW

F&HS Agenda Packet Page 48





501 (c) 3 nonprofit organization in its fourth year of operation, and is staffed 100% by volunteers who challenge of bringing Contra Costa **11-14, 2017** at the Contra Costa Fairgrounds in Antioch, CA. DVG is a provide services to veterans from all over the Bay Area at our location in east Contra Costa County. It is estimated that between 1,500 and 2,000 volunteers will participate in the Stand Down on the Delta 2017, to help serve our Veterans, who have is undertaking again the Counties Homeless Veterans "**Stand** Down on the Delta, 2017" August sacrificed and served us all. This Stand Down comes at a critical time for Contra Costa County, as nonprofits serving Veterans such as Delta Veterans Group, corporations and businesses, foundations, the faith community, County Health Services, the Veterans Administration, local hospitals, law enforcement, and other sectors dealing with homeless persons come together as a part of an attempt to end veteran homelessness. Contra Costa County's BI-ANNUAL "Stand Down on the Delta" is a key vehicle to drive this effort.

I'm sure you know that there is a disproportionately large percentage of Veterans in the homeless population, and homeless female Veterans are growing in number as their representation in the military has increased in recent years. But it doesn't have to be this way, and you can be a vital part of the solution here in Contra Costa County in 2016-2017 as a Donor or Sponsor of Stand Down on the Delta, 2017.

Stand Down on the Delta Overview

for the Stand Down has been ongoing support services, enlivened by bands and recreation opportunities for not only the men and women who are Down events in the Bay Area over past years, and will be bringing experience, best practices, and key skills to the implementation of Stand Down on the Delta in 2017. Planning personal health and DVG Board members and volunteers have participated in numerous Stand during the past year. The event will care with housing, employment, legal and a myriad of veterans, but for their families as well. integrate wellness

Based on the number of attendees at regional Stand Downs in the Bay

Areas and Central California, and given that this Stand Down will occur on the "off year" of the East Bay Stand Down, DVG is anticipating 400 veterans will be attending. However we are planning for 450 participants so that no one will have to be turned away. DVG expects to serve single male and female Veterans, as well as dependents (spouses and children). Women Vets will have their own tent. dependents and children will have separate, fenced accommodations, as well as services and activities for each group.

Veterans obtained, and DD 214 status will be Administration and County Veterans Services. Veterans meeting VA eligibility criteria will receive VA medical and other services. Veterans the Contra Costa County Health Care DVG will be serving both VA eligible and ineligible veterans at this event. VA eligibility will be ascertained through preregistration information not meeting the VA standards of eligibility will receive services from the for the Homeless Team. by verified

STAND DOWN ON THE DELTA 2017

for Homeless and at risk Veteran's



August 11-14, 2017 Contra Costa Fairgrounds



VOLUNTEERS NEEDED

Registration open March 23rd - August 7th

Planning meetings are at 7pm on the 1st Thursday of the month Location: Antioch Veterans Memorial Bldg, 403 W 6th st Antioch, CA

Stand Down on the Delta is a bi-annual, four-day encampment for homeless and/or at-risk Veterans to come together and receive support from their communities. While at Stand Down, veterans are provided with court and legal services, DMV, addiction counseling, clothing, food, shelter, hygiene services, wellness, medical, dental and a goal of Delta Veterans Group in hosting the Stand Down on the Delta event is to treat the Veteran participants with respect and dignity, as well as honoring our female Veterans and families of the Veterans. Our Nation's Veterans have made the ultimate sacrifices for our freedoms, which is why we strive to make Stand Down on the delta "All about the Veteran". Please visit www.deltavetransgroup.org for more information on how you can contribute to our Nation's fine Men and Women Veterans of the United States Armed Forces.

<u>Some of the Services Available at Stand Down Are:</u>

- COMPLETE MEDICAL
- TRANSITIONAL HOUSING
- MENTAL HEALTH
- COURT/LEGAL SERVICES
- DMV I.D. SERVICES
- SUBSTANCE ABUSE ASSISTANCE

- **ON-SITE PET CARE**
- **EMPLOYMENT SERVICES**
 - **VETERANS BENEFITS**
- **WELLNESS & CHAPLAIN SERVICES**
 - **MEALS/CLOTHING/HYGIENE** •
 - LIVE MUSIC ENTERTAINMENT •









DeltaVeteransGroup

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Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

8.

Meeting Date: 05/22/2017

Subject: Laura's Law Implementation Update Report

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: 107

Referral Name: Laura's Law

Presenter: Warren Hayes, MHSA Program Contact: Enid Mendoza, (925)

Manager 335-1039

Referral History:

The Assisted Outpatient Treatment Demonstration Project Act (AB 1421), known as Laura's Law, was signed into California law in 2002 and is authorized until January 1, 2017. Laura's Law is named after a 19 year old woman working at a Nevada County mental health clinic. She was one of three individuals who died after a shooting by a psychotic individual who had not engaged in treatment.

AB 1421 allows court-ordered intensive outpatient treatment called Assisted Outpatient Treatment (AOT) for a clearly defined set of individuals that must meet specific criteria. AB 1421 also specifies which individuals may request the County Mental Health Director to file a petition with the superior court for a hearing to determine if the person should be court ordered to receive the services specified under the law. The County Mental Health Director or his licensed designee is required to perform a clinical investigation, and if the request is confirmed, to file a petition to the Court for AOT.

If the court finds that the individual meets the statutory criteria, the recipient will be provided intensive community treatment services and supervision by a multidisciplinary team of mental health professionals with staff-to-client rations of not more that 1 to 10. Treatment is to be client-directed and employ psychosocial rehabilitation and recovery principles. The law specifies various rights of the person who is subject of a Laura's Law petition as well as due process hearing rights.

If a person refuses treatment under AOT, treatment cannot be forced. The Court orders meeting with the treatment team to gain cooperation and can authorize a 72 hour hospitalization to gain cooperation. A Laura's Law petition does not allow for involuntary medication.

AB 1421 requires that a county Board of Supervisors adopt Laura's Law by resolution to authorize the legislation within that county. AB 1421 also requires the Board of Supervisors to make a finding that no voluntary mental health program serving adults or children would be

reduced as a result of implementation.

At its June 3, 2013 meeting, the Legislation Committee requested that this matter be referred to the Family and Human Services Committee (F&HS) for consideration of whether to develop a program in the Behavioral Health Division of the Health Services Department that would implement assisted outpatient treatment options here in Contra Costa County.

On July 9, 2013, the Board of Supervisors referred the matter to F&HS for consideration. F&HS received reports on the implementation of Laura's Law on October 16, 2013 and March 10, 2014, and on February 3, 2015 the Board accepted the recommendations to implement Laura's Law. In February 2016, Laura's Law was implemented and the Department provided F&HS with a 6-month implementation report on September 12, 2016 and a data report on the 6-month implementation on December 12, 2016. Both reports were accepted by the Board on September 27, 2016 and December 20, 2016, respectively.

Referral Update:

In an effort to maintain ongoing communications with F&HS and the Board, the Health Services Department, in partnership with Resource Development Associates, would like to share information from the 2017 Report for the California Department of Health Care Services. This report covers the County's first 11 months (February - December 2016) of Laura's Law AOT implementation. The Department plans to return to F&HS later in the year, likely in August, to provide implementation data for the period July 1, 2016 - June 30, 2017.

Recommendation(s)/Next Step(s):

CONSIDER accepting the report on the County's Laura's Law - Assisted Outpatient Treatment Program (AOT) implementation for the period February through December 2016.

Fiscal Impact (if any):

There is no fiscal impact; the report is informational.

Attachments

2017 DHCS AOT Report 2017 DHCS AOT Report Summary

Contra Costa County Assisted Outpatient Treatment (AOT)

2017 Report for the California Department of Health Care Services



Prepared by:

Resource Development Associates

March 31, 2017





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Introduction

In 2002, the California legislature passed AB 1421 (also known as "Laura's Law"), which authorized the provision of Assisted Outpatient Treatment (AOT) in counties that adopt a resolution to implement AOT. AOT is designed to interrupt the repetitive cycle of hospitalization, incarceration, and homelessness for people with serious mental illness who have been unable and/or unwilling to engage in voluntary services through an expanded referral and outreach process, which may include civil court involvement, whereby a judge may order participation in outpatient treatment. The Welfare and Institutions Code defines the target population, intended goals, and the specific suite of services required to be available for AOT consumers in California.

On February 3, 2015, the Contra Costa County Board of Supervisors adopted a resolution to authorize the implementation of AOT. The County's AOT program became operational on February 1, 2016 and accepted its first consumer in March 2016. Contra Costa County Behavioral Health Services (CCBHS) provides behavioral health services to AOT consumers through an Assertive Community Treatment (ACT) team operated by Mental Health Systems (MHS), a contracted provider organization. ACT is an evidence-based service delivery model for people with serious mental illness who are at-risk of or would otherwise be served in institutional settings or experience homelessness. ACT has the strongest evidence base of any mental health practice for people with serious mental illness and, when implemented to fidelity, ACT produces reliable results for consumers. Such results include decreased negative outcomes (e.g., hospitalization, incarceration, and homelessness) and improved psychosocial outcomes (e.g., improved life skills and increased involvement in meaningful activities).

Contra Costa County's AOT Program Model

Contra Costa County has designed an AOT program model that exceeds the requirements set forth in the legislation and responds to the needs of its communities. The Contra Costa County AOT program includes a Care Team comprised of CCBHS and MHS staff, including a County clinician, family advocate, and peer counselor, as well as an ACT team operated by MHS.

The first stage of engagement with Contra Costa County's AOT program is through a telephone referral whereby any "qualified requestor" can make an AOT referral. Within five business days, a CCBHS mental health clinician connects with the requester to gather additional information on the referral, as well as reaches out to the individual referred to begin to identify whether they meet AOT eligibility criteria (see Appendix I).

¹ Qualified requestors include: An adult who lives with the individual; Parent, spouse, adult sibling, or adult child of the individual; Director of an institution or facility where the individual resides; Director of the hospital where the person is hospitalized; Treating or supervising mental health provider; Probation, parole, or peace officer.



If the person appears to initially meet eligibility criteria, a CCBHS investigator from the Care Team staff facilitates a face-to-face meeting with the family and/or consumer to gather information, attempts to engage the consumer, and develops an initial care plan. If the consumer continues to appear to meet eligibility criteria, the Care Team provides a period of outreach and engagement while furthering the investigation to determine eligibility. If at any time the consumer accepts voluntary services and continues to meet eligibility criteria, they are immediately connected to and enrolled in ACT services; however, if after a period of outreach and engagement the consumer does not accept voluntary services and continues to meet eligibility criteria, the County mental health director or designee may choose to file a petition with the court. Utilizing a collaborative court model that combines judicial supervision with community mental health treatment and other support services, Contra Costa County then holds one to two court hearings to determine if criteria for AOT are met. At this time, the consumer may enter into a voluntary settlement agreement with the court for AOT or be ordered to AOT for a period of no longer than six months; the ACT team, operated by MHS, provides the community mental health treatment for AOT consumers. After six months, if the judge deems that the person continues to meet AOT criteria, they may authorize an additional six-month period. At every stage of the process, CCBHS and MHS staff continue to offer the individual opportunities to voluntarily engage in services and may recommend a 72hour hold, at any stage of the process, if the consumer meets existing criteria.

Organization of the Report

The following report of Contra Costa County's AOT program implementation and outcomes is broken into four sections, highlighted below:

- Methodology
- Pre-ACT Enrollment
- ❖ ACT Enrollment Period
- Summary of Findings

The "Methodology" section provides a brief description of the data sources and analysis techniques used to address the required DHCS outcomes. This is followed by a discussion of Contra Costa County's processes for AOT referral, investigation, and outreach and engagement in the "Pre-enrollment" section. Section 3, "Enrollment Period," describes the consumer profile in Contra Costa County, as well as consumers' service engagement and outcomes during ACT enrollment. Finally, the "Summary of Findings" section highlights key findings from the County's first 11 months of AOT implementation (February – December 2016).



Section 1. Methodology

The following sections highlight the data sources used to compile Contra Costa County's 2017 AOT program update report to DHCS, as well as the analysis techniques used for reporting the data in meaningful ways. It should be noted that, given the current size of the AOT program, this document reports findings for consumer groups of less than five consumers; therefore, this DHCS report cannot be publicly disseminated without redaction of any consumer groups of less than five.

Data Sources

RDA worked with CCBHS and MHS staff to obtain the data necessary to address the DHCS reporting requirements for the period spanning February 1, 2016 – December 31, 2016. Table 1 below presents the data sources utilized for this report, highlighting which sources were used to report on each DHCS required outcome. Appendix II provides a detailed description of each data source, including a description of the data and how it was used in this report.

Table 1. DHCS Reporting Requirements and Corresponding Data Sources

| Table 1. Dries Reporting Requirements and Corresponding Data Sources | | |
|--|--|--|
| DHCS Reporting Requirement | Data Source | |
| The number of persons served by the program | Contra Costa PSP Billing System | |
| The extent to which enforcement mechanisms are used by the program, when applicable | CCBHS Care Team (FMH and ACT teams) Interview | |
| The number of persons in the program who maintain contact with the treatment system | Contra Costa PSP Billing System | |
| Adherence/engagement to prescribed treatment by persons in the program | Contra Costa PSP Billing System | |
| Substance abuse by persons in the program | Contra Costa PSP Billing System | |
| Type, intensity, and frequency of treatment of persons in the program | Contra Costa PSP Billing System | |
| The days of hospitalization of persons in the program that have been reduced or avoided | Contra Costa PSP Billing System | |
| The number of persons in the program with contacts with local law enforcement, and the extent to which local and state incarceration of persons in the program has been reduced or avoided | FSP Partnership Assessment Form (PAF) and Key Event Tracking (KET) | |
| The number of persons in the program able to maintain housing | FSP PAF and KET | |
| The number of persons in the program participating in | FSP PAF and KET | |
| employment services programs, including competitive employment | Care Team and ACT Team Communications | |
| Social functioning of persons in the program | Self Sufficiency Matrix (SSM) | |
| Skills in independent living of persons in the program | Self Sufficiency Matrix (SSM) | |
| | | |



| DHCS Reporting Requirement | Data Source | |
|---|---|--|
| Victimization of persons in the program | MacArthur Violence Instrument ² | |
| Violent behavior of persons in the program | MacArthur Violence Instrument ² | |
| Satisfaction with program services both by those | Focus Groups with Consumers and | |
| receiving them and by their families, when relevant | Family Members | |
| | CCBHS Consumer Satisfaction Survey ² | |

In addition to the data sources listed in Table 1, several other sources of data were used to understand the Contra Costa County's AOT investigation and outreach and engagement processes:

- ❖ CCBHS AOT Request Log: This spreadsheet is populated by CCBHS forensic mental health staff and includes the date of each AOT referral, demographic characteristics of those referred, information on the individual making the referral (e.g., family, mental health provider, law enforcement), and the team's recommendations based on their investigation (e.g., AOT ineligible, refer to MHS). For this report, this data source was used to inform discussion of how and when consumers are referred to AOT and the disposition of each referral.
- ❖ CCBHS Blue Notes Log: CCBHS staff converted all Blue Notes (i.e., field notes from successful outreach events) into a spreadsheet tracking the date, location, and length of each CCBHS Investigation Team outreach encounter. This source was used to assess the average number and duration of investigation encounters with AOT consumers, as well as the locations of these encounters.
- MHS Outreach and Engagement Log: This spreadsheet tracks the date, location, length, and outcome of each MHS outreach encounter, including information on who provided outreach (e.g., family partner, peer partner, clinician) to whom (consumer or collateral contact such as friend, family, or physician). Data from this source were used to assess the average number and duration of outreach and engagement encounters, as well as their location.

Data Collection and Analysis

RDA worked closely with CCBHS and MHS staff throughout the data collection process. Upon receiving each data set, RDA performed a review of its contents and collaborated with CCBHS and MHS staff to ensure the evaluation team understood each data element and could seek additional data as needed. RDA matched clients across a number of disparate data sources and utilized descriptive statistics (e.g., frequencies, mean, median, and mode) for all analyses in this report to describe the data and highlight pre and post-enrollment outcomes, wherever appropriate. In future reports with larger sample sizes and longer enrollment periods for consumers, both descriptive and inferential statistics will be used to explore AOT implementation and consumer outcomes.

² The Care Team is in the process of implementing these assessments, so data were unavailable during this reporting period. These assessment tools will be used for future reports.



As with all real-world evaluations, there are limitations to note. First, the evaluation period captures the first 11 months of Contra Costa County's AOT program implementation; natural programmatic developments and modifications took placement over the initial months that have impacted data accessibility and quality. In addition, only 31 ACT consumers had spent, on average, only 158 days enrolled in ACT, with participation ranging from 15 to 302 days through December 31, 2016.³ This is important as baseline data for outcome measures such as homelessness and psychiatric hospitalizations and crisis stabilization episodes are recorded for 12 months and 36 months before enrollment, respectively. To account for differences in the pre- and post-time periods, RDA standardized outcomes measures to rates per 180 days. Nevertheless, because consumers have spent much less time, on average, in ACT compared to their pre-enrollment periods, there is less opportunity for them to experience outcomes such as hospitalization, arrest, and/or incarceration. As a result, these outcomes may be underestimated if a large number of consumers experienced zero negative outcomes during shorter periods while they were enrolled in ACT. On the other hand, if consumers experienced a number of negative outcomes for lengthy periods during their ACT enrollment period, these estimations may be overestimated.

Finally, this report relies on consumer self-reported measures of criminal justice involvement to identify criminal justice outcomes during ACT. While self-report measures may serve as an accurate proxy, they are not ideal measures and limit the precision of the analyses. In future reports, Superior Court and Sheriff's Office data will be used to assess consumers' criminal justice involvement before, during, and after ACT.

³ Though 32 consumers were enrolled in AOT during the evaluation period, one was enrolled at the end of December and received no ACT services in their brief enrollment; therefore, they are not included in any service engagement or outcomes analysis in this report.



Section 2. Pre-Enrollment

The following sections report on Contra Costa County's processes for AOT referral, investigation, and outreach and engagement, and highlight key findings across each area.

Referral for AOT

A majority (64%) of AOT referrals came from consumers' family members.

CCBHS received 189 total AOT referrals from February 1, 2016 – December 31, 2016 (see Figure 1). Of these 189 referrals for AOT, 181 were for unique individuals. Those who were referred multiple times 1) did not meet AOT eligibility criteria, 2) were connected with other services, or 3) were still under investigation at the conclusion of the evaluation period.

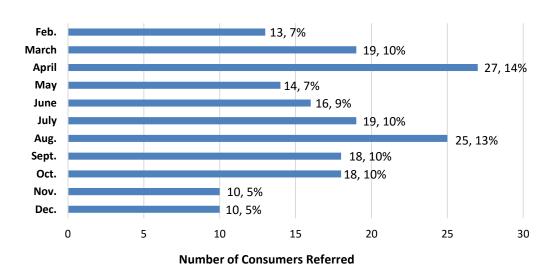


Figure 1. Consumers Referred to AOT by Month (N = 189)

Table 2 below depicts the percentage of referrals made by each category of qualified requestor. Family members made the majority of referrals (64%, n = 121), while smaller percentages were made by their treating or supervising provider (17%, n = 33) and law enforcement (12%, n = 22), among others.



Table 2. Summary of Requestor Type⁴

| Requestor | Percent of Total Referrals (N = 189) |
|---|--------------------------------------|
| Parent, spouse, adult sibling, or adult child | 64% |
| Treating or supervising mental health provider | 17% |
| Probation, parole, or peace officer | 12% |
| Adult who lives with individual | 2% |
| Director of hospital where individual is hospitalized | 1% |
| Director of institution where individual resides | 1% |
| Not a qualified requestor or "other" | 4% |

Investigation, Outreach, and Engagement

The Care Team conducts an investigation for each AOT referred consumer to determine each individual's eligibility for AOT (see Appendix I for AOT eligibility requirements) and then conducts intensive outreach and engagement to enroll consumers in ACT services. Contra Costa County's Care Team is responsible for these efforts; CCBHS's Forensic Mental Health team conducts the investigation, and MHS's ACT team conducts the outreach and engagement. On average, it took the Care Team about 84 days from the date of initial referral to enroll consumers in ACT.

Investigation

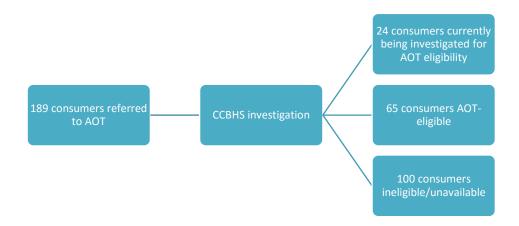
Approximately one-third (34%, n = 65) of consumers referred for AOT are identified as eligible following initial investigation.

Following referral by a qualified requestor, the CCBHS forensic mental health staff conduct a screening of the client's information and face sheet. If the client appears to meet AOT eligibility criteria, CCBHS meets with the qualified requestor. If the client continues to appear to meet eligibility criteria following a meeting with the qualified requestor, CCBHS begins an investigation to determine eligibility. Investigation consists of attempts to contact consumers via phone and in-person at various locations to determine if referred consumers meet the criteria for AOT. Consumers' family members are also included in this process, when appropriate and as permitted by law. Figure 2 depicts the referral process for Contra Costa County's AOT program during the evaluation period.

⁴ Source: CCBHS Care Team AOT Request Log



Figure 2. Referral to AOT Process



As shown in Figure 3, approximately one-third of consumers were confirmed to be eligible for AOT (34%, n = 65) and referred to MHS for outreach and engagement. An additional 13% (n = 24) were still under investigation, while 53% (n = 100) were unavailable for the investigation or otherwise ineligible. Consumers who were unable to be located or who were hospitalized or incarcerated for a period were deemed unavailable. Consumers were determined to be ineligible because the qualified requestor withdrew the request or was unable to be contacted; the consumer did not meet defined AOT eligibility criteria; or the consumer had a previous or existing relationship with other mental health services likely to meet the consumer's needs and was willing to re-engage with the service provider. For those who did not meet AOT criteria, CCBHS worked to connect those individuals to the appropriate level of mental health treatment. For those who had previous or existing relationships with other mental health services CCBHS worked with the referred consumer to reconnect the individual to the previous or current provider.

See Appendix I for a detailed description of the requirements that govern the AOT eligibility determination process.

AOT eligible

Ineligible/unavailable

Ongoing investigation

24, 13%

0 20 40 60 80 100 120

Consumers

Figure 3. Eligibility Determination of all Referred Consumers (Duplicated; N = 189)



Outreach and Engagement

MHS provided outreach and engagement to 62 consumers, 32 of whom enrolled in ACT.

Once CCBHS makes an eligibility determination, they connect eligible consumers with MHS, who provides intensive outreach and engagement to enroll consumers in ACT services. Following investigation, 62 unique consumers (three of whom were referred twice) were identified as AOT-eligible and were connected to MHS between February 1 and December 31, 2016.

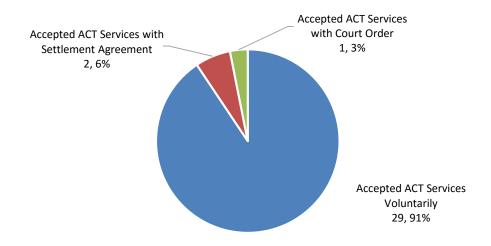
Table 3 describes the status of the 62 unique consumers who received outreach and engagement services from MHS during the evaluation period. Those who enrolled in ACT services did so 1) voluntarily without court involvement, 2) with a voluntary settlement agreement with the court, or 3) with a court order. Consumers considered "closed" are those who were closed by CCBHS's Forensic Mental Health team during the outreach and engagement period, typically for changes in eligibility status, including agreement to re-engage with a previous service provider who could appropriately meet their needs.

Table 3. Status of All Eligible Consumers at Conclusion of Evaluation Period (N = 62)

| Consumer Status | Number of Consumers | % of Total Eligible Consumers |
|--------------------------------|---------------------|-------------------------------|
| Enrolled in ACT Services | 32 | 52% |
| Enrolled Voluntarily | 29 | |
| Enrolled Settlement Agreement | 2 | |
| Enrolled with Court Order | 1 | |
| Active Outreach and Engagement | 10 | 16% |
| Closed | 20 | 32% |

As shown in Figure 4, the majority of consumers (91%, n = 29) enrolled in ACT services voluntarily. The remaining 9% (n = 3) had some form of court involvement, either a settlement agreement or court order.

Figure 4. Consumer Enrollment Process (N = 32)





The CCBHS Care Team conducts persistent investigation and outreach with consumers and their families in order to enroll consumers in the County's AOT program.

Table 4 shows the Care Team activities from investigation through outreach and engagement and the total efforts made to enroll the 32 consumers in ACT. Successful encounters included both contacts with consumers and collateral contacts (e.g., with family members or other providers). In total, it took an average of 17 successful investigation and outreach encounters per consumer to connect them to ACT services. These efforts lasted an average of 36 minutes per encounter. Outreach and engagement occurred wherever the consumer was willing to meet, with the majority of the encounters occurring at either the providers' offices or any mental health clinic (n = 169), or in the field or community (n = 118).

Table 4. Care Team Investigation, Outreach, and Engagement Efforts

| rance in care reason and configuration, can calculate and a garge mental and a garge ment | | | | |
|--|---------------|------------|------------|--|
| | Investigation | Outreach & | Total | |
| | | Engagement | | |
| Total Successful Encounters | 353 | 175 | 528 | |
| Average Number of Successful Encounters per | 11 per | 5.5 per | 16.5 per | |
| Consumer | consumer | consumer | consumer | |
| Average Duration of Successful Encounters ⁵ | 43 minutes | 22 minutes | 36 minutes | |
| Location of Successful Encounters ⁶ | | | | |
| In Person - Field/Community | 85 | 33 | 118 | |
| In Person – Court or Correctional Facility | 17 | 19 | 36 | |
| In Person - Office/Clinic | 126 | 43 | 169 | |
| In Person – Hospital, Inpatient, or Licensed Care | | | | |
| Facility | 45 | 29 | 74 | |
| In Person – Shelter | 3 | 6 | 9 | |
| In Person – Consumer's Home | 3 | 21 | 24 | |
| Phone or Email | 68 | 15 | 83 | |
| Other or Unknown | 26 | 0 | 26 | |

⁵ Only some MHS outreach and engagement data accounted for travel time in the reported duration; therefore, RDA calculated the proportion of time spent traveling for the available data and subtracted the same proportion from the total duration of encounters that did not specify travel time.

⁶ Some CCBHS investigation encounters occurred at multiple locations, so the total exceeds the number of total contact attempts.



Section 3. Enrollment Period

At the conclusion of the evaluation period, 32 consumers were enrolled in ACT services with MHS. The Enrollment Period section provides information on the profile of enrolled consumers as well as service engagement and consumer outcomes during enrollment.

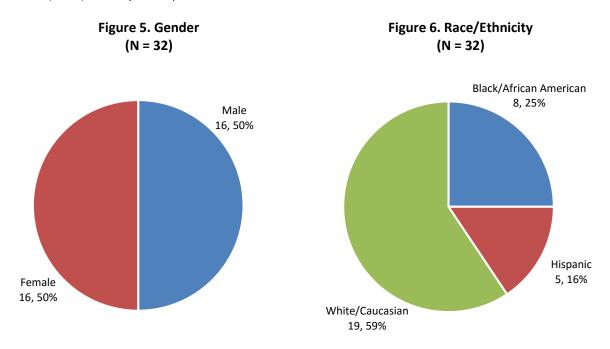
Consumer Profile

The following section describes consumers' demographic characteristics, as well as their diagnoses, employment status, and sources of financial support prior to and at the time of enrollment.

Contra Costa County is reaching the identified target population.

Demographic Information

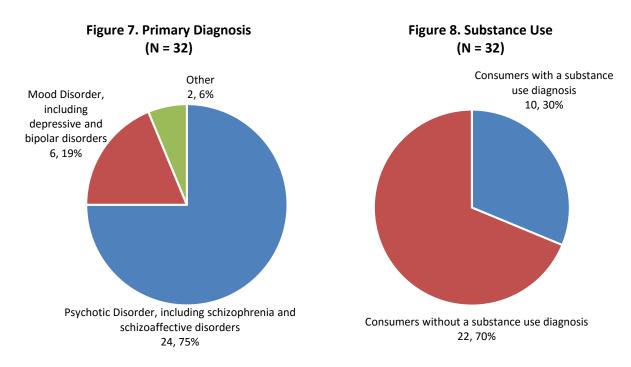
As shown in Figure 5 and Figure 6, half of consumers are male and half are female. The majority of consumers identify as White/Caucasian (58%, n = 19), while 25% (n = 8) identify as Black/African American and 16% (n = 5) identify as Hispanic.





Diagnosis and Substance Use

Figure 7 below demonstrates that enrolled consumers are reflective of the intended AOT population. The majority of consumers (75%, n=24) have a primary diagnosis of a psychotic disorder, including schizophrenia and schizoaffective disorders; the remaining 25% (n=8) have a primary diagnosis of a mood disorder or another diagnosis combined with a co-occurring substance use disorder. As shown in Figure 8, 30% (n=10) of consumers were diagnosed with some form of substance use disorder (e.g., alcohol abuse or drug dependence) at the time of enrollment. The majority of consumers (70%, n=22) had either no secondary diagnosis or a deferred secondary diagnosis.



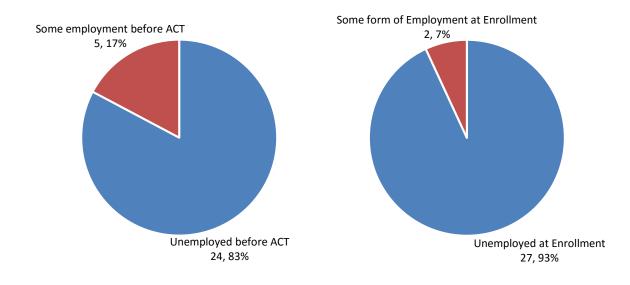
Employment and Financial Support

Data on consumers' employment experiences were available for 29 consumers in Contra Costa County. Of those 29 consumers, 83% (n = 24) were unemployed between four and 12 months prior to enrolling in ACT (see Figure 9). As shown in Figure 10, 93% (n = 27) of the consumers with available data were unemployed when they were enrolled in ACT services.



Figure 9. Employment 12 months before ACT (N = 29)

Figure 10. Employment at ACT Enrollment (N = 29)



Financial support data were available for 28 consumers. Table 5 depicts the different sources of financial support and income for consumers in the 12 months before enrollment and at the time of enrollment. The majority of consumers (66%, n = 19) received Supplemental Security Income (SSI) prior to and at the time of enrollment. Fourteen percent (14%, n = 4) of consumers reported having no financial support or income at the time of enrollment; this was the case for 10% (n = 3) of consumers in the 12 months prior to enrollment as well.

Table 5. Sources of Financial Support for ACT Consumers (N = 28)

| Source of Financial Support | Received in the 12 Months Prior to Enrollment | Receiving at Enrollment |
|---|--|----------------------------|
| Supplemental Security Income | 19 (66%) | 19 (66%) |
| Support from family or friends | 2 (7%) | 2 (7%) |
| Retirement/Social Security | 2 (7%) | 2 (7%) |
| Other (including Tribal Benefits and Food Stamps) | 2 (7%) | 1 (3%) |
| No Financial Support | 3 (10%) | 4 (14%) |

Service Participation

The following sections describe the type, intensity, and frequency of service participation, as well as adherence to treatment. Of the 32 consumers enrolled in ACT from February 1, 2016 – December 31, 2016, one was enrolled at the end of December 2016 and did not receive any ACT services during the evaluation period. This individual is omitted from the following service engagement analyses.



Type, Intensity, and Frequency of Treatment

The ACT team is providing intensive services to consumers.

Consumers in Contra Costa County receive services from a multidisciplinary ACT team who provide intensive wrap-around behavioral health services. When implemented to fidelity, ACT produces reliable results including decreased negative outcomes, (e.g., hospitalization, incarceration, and homelessness) and improved psychosocial outcomes. From February – December 2016, the 31 consumers who were enrolled in and receiving ACT services were enrolled for an average of 158 days. Table 6 indicates that while enrolled in ACT, consumers received an average of 31 service encounters per month, lasting an average of 54 minutes per encounter. The range of encounters per month varies substantially across consumers, from three to 104 encounters per month.

Table 6. ACT Service Engagement (N = 31)

| | Average | Range |
|---|-------------------------|------------------------------|
| Length of ACT Enrollment | 158 days | 15 – 302 days |
| Frequency of ACT Service Encounters | 31 encounters per month | 3 – 104 encounters per month |
| Intensity of ACT Services Encounters | 54 minutes | 1 – 422 minutes |

Treatment Adherence and Retention

The majority (94%) of consumers were adherent with ACT services.

Given that AOT provides a mechanism to compel eligible consumers to participate in outpatient mental health services, consumers were considered "treatment adherent" if they engaged in at least one face-to-face contact per week. As shown in Table 7, 94% (n = 29) of consumers met this baseline adherence requirement, with the majority (52%, n = 16) receiving between five and seven contacts per week, on average. Six percent (6%, n = 2) of the ACT population had less than one face-to-face encounter per week and were determined to be "non-adherent."

Table 7. Average Number of Face-to-Face ACT Encounters per Week (N = 31)

| Adherence | Number of Contacts | Consumers |
|--------------|--------------------|--------------|
| Not adherent | < 1 | 6% (n = 2) |
| Adherent | 1 – 4 | 13% (n = 4) |
| | 5 – 7 | 52% (n = 16) |
| | 8 – 10 | 10% (n = 3) |
| | 11+ | 19% (n = 6) |

Ten percent (10%, n = 3) of consumers were discharged from ACT during the evaluation period. According to the ACT team, one of these discharges was the result of successful completion of the program. The remaining two consumers had changes in their service engagement and may be re-enrolled in the future.



ACT Consumer Outcomes

The following sections provide a summary of consumers' experiences with psychiatric hospitalizations, crisis episodes, criminal justice involvement, and homelessness before and during enrollment. Readers should note that, on average, consumers were enrolled for 158 days in the ACT program, with participation ranging from 15 - 302 days through December 31, 2016. This is important because baseline data for outcomes measures such as homelessness, arrests, and incarcerations are recorded for the entire year prior to enrollment (and for three years prior to enrollment for psychiatric hospitalizations and crisis stabilization episodes). To account for differences in the pre- and post-time periods, RDA standardized outcomes measures to rates per 180 days. Nevertheless, because consumers have spent much less time, on average, in ACT compared to their pre-enrollment periods, there is less opportunity for them to experience outcomes such as hospitalization, arrest, and/or incarceration.

Additionally, given the current size of the ACT program in Contra Costa County, some consumer outcome categories in this report include less than five consumers; therefore, this DHCS report cannot be publicly disseminated without redaction of any consumer groups of less than five.

Psychiatric Hospitalizations and Crisis Episodes

This section describes consumers' psychiatric hospitalizations and crisis stabilization episodes before and during ACT enrollment. The County's PSP Billing System was used to identify consumers' hospital and crisis episodes in the 36 months prior to and during AOT enrollment.

The majority of consumers experienced fewer psychiatric hospitalizations and crisis episodes during ACT, although a subset of consumers continues to experience hospitalization.

The majority (74%, n = 23) of ACT consumers were hospitalized at least once during the 36 months prior to enrollment. Almost all consumers (97%, n = 30) also had at least one crisis episode before ACT enrollment. Table 8 below depicts the following key findings about ACT consumers' hospitalization and crisis episodes prior to ACT enrollment:

- ❖ Among consumers with at least one hospitalization prior to enrollment (n = 23, 74%), each consumer experienced an average of 1.07 hospitalization episodes per 180 days, lasting approximately one week per episode.
- ❖ On average, consumers experienced over three (3.31) crisis episodes per 180 days, for approximately one day per episode.⁷

⁷ The average crisis episodes per consumer are slightly inflated due to three consumers who had more crisis episodes than the other consumers.



Table 8. Consumer Psychiatric Hospitalizations and Crisis Episodes prior to ACT Enrollment

| | Average | Range | |
|-------------------------------|----------------------------|--------------------------------|--|
| Hospitalizations (n = 23) | | | |
| Episodes | 1.07 episodes per 180 days | < 1 – 8 episodes per 180 days | |
| Length of Episodes | 7 days | 1 – 95 days | |
| Crisis Stabilization (n = 30) | | | |
| Episodes | 3.31 episodes per 180 days | < 1 – 16 episodes per 180 days | |
| Length of Episodes | 1 day | 1 – 5 days | |

During enrollment, 22% (n = 5) of the 23 consumers hospitalized prior to ACT were hospitalized again during ACT. An additional two consumers who were not hospitalized prior to ACT were hospitalized after enrolling in ACT, for a total of seven consumers who experienced psychiatric hospitalizations during ACT. Of the 30 consumers who experienced a crisis episode before ACT, almost two-thirds (63%, n = 19) experienced a crisis episode during ACT. Table 9 highlights the following key findings about consumers' hospitalization and crisis episodes after enrolling in ACT:

- Consumers who were hospitalized during ACT (23%, n = 7) experienced approximately 2.86 episodes per 180 days, with each episode lasting approximately 11 days per consumer. 8
- Consumers who experienced a crisis episode during ACT (61%, n = 19) had less than one episode (0.53) per 180 days, and each episode lasted approximately one day.

Table 9. Consumer Psychiatric Hospitalizations and Crisis Episodes during ACT Enrollment

| | Average | Range | |
|-------------------------------|----------------------------|-------------------------------|--|
| Hospitalizations (n = 7) | | | |
| Episodes | 2.86 episodes per 180 days | < 1 – 8 episodes per 180 days | |
| Length of Episodes | 11 days | 3 – 30 days | |
| Crisis Stabilization (n = 19) | | | |
| Episodes | .53 episodes per 180 days | < 1 – 2 episodes per 180 days | |
| Length of Episodes | 1 day | 1 – 2 days | |

Taken together, the findings from this section preliminarily suggest that ACT participation is helping to stabilize consumers. In particular, fewer consumers experienced psychiatric hospitalization and/or crisis episodes during their ACT enrollment compared to prior; however, there is a subset of consumers who continue experiencing hospitalization. As the program matures and there are longer periods of enrollment, inferential analyses can help isolate the effects of service participation on these outcomes.

⁸ The average number of episodes during ACT is slightly inflated due to three consumers who were hospitalized more frequently than the other consumers.



Criminal Justice Involvement

A small subset of consumers is continuing to experience criminal justice involvement after ACT enrollment.

Given limitations in self-reported criminal justice data, the following section describes consumers' arrest and incarceration experiences during ACT. Data were unavailable for one consumer; therefore, findings are reported for 30 consumers.

Of the 30 consumers for whom there were data, 23% (n = 7) were arrested and incarcerated during ACT. All consumers who were arrested during ACT were also incarcerated; therefore, the average number of arrests and incarcerations among individuals who were arrested and incarcerated while enrolled in ACT were the same. Table 10 highlights the following findings:

- Consumers who were arrested and then incarcerated during ACT (23%, n = 7) were arrested and incarcerated at a rate of 4.13 times every 180 days.
- The length of consumers' incarcerations ranged between one and 19 days, for an average of 17 days per incarceration.

| | Average | Range |
|--------------------------|----------------------------------|-----------------------------------|
| Arrests (n = 7) | | |
| Average | 4.13 arrests per 180 days | 1 – 9 arrests per 180 days |
| Incarcerations (n = 7) | | |
| Average | 4.13 incarcerations per 180 days | 1 – 9 incarcerations per 180 days |
| Length of incarcerations | 17 days | 1 – 19 days |

Table 10. Incarcerations during to ACT Enrollment

Future investigation of consumers' criminal justice involvement will use data from the Sheriff's Office and Superior Court; therefore, future reports will explore consumers' justice involvement before and during enrollment.

Housing Status

Half of consumers were in stable housing at the conclusion of the evaluation period.

Self-reported housing data from before and during ACT were available for 26 consumers. ¹⁰ As shown in Figure 11, 23% (n = 6) of consumers obtained housing while enrolled in ACT, while 27% (n = 7) maintained the housing they had before enrollment. The remaining 50% of consumers either lost their housing while in ACT (n = 3) or never had nor gained stable housing (n = 10).

⁹ The average number of incarcerations is slightly inflated due to some consumers who experienced more incarcerations during ACT.

¹⁰ RDA used the Department of Housing and Urban Development (HUD) definition of stable housing to determine which categories from the FSP PAF and KET forms should be considered "housed."



Figure 11. Consumers' Housing Status before and during ACT

Consumers who obtained housing

 23% of consumers who were not housed before ACT obtained housing while enrolled

Consumers who maintained housing

 27% of consumers who were housed before ACT continued to maintain housing while enrolled

Consumers who were not stably housed

- 12% of consumers were housed before ACT but did not maintain housing during ACT
- 38% of consumers were not housed before or during ACT enrollment

Employment Service Engagement

All ACT consumers have access to employment services provided by the ACT team. During the evaluation period, nine ACT consumers accessed employment services through ACT. Employment services included: support developing résumés, searching for job openings, preparing for interviews, and submitting applications. The ACT team also worked with consumers to identify their vocational goals and discuss how employment can lead to independent living for consumers.

Social Functioning and Independent Living

Consumers experienced positive changes in their life skills, relationships with friends and family, and community involvement.

The Self Sufficiency Matrix (SSM) was used to assess consumers' social functioning and independent living. The SSM consists of 18 domains scored on a scale of one ("in crisis") to five ("thriving"). Clinicians assessed consumers at intake, every 90 days, and upon discharge. Intake data were available for just over half (56%, n = 18) of the ACT consumers, 13 of whom also had a reassessment. Figure 12 below shows consumers' average scores at intake, and for those who were reassessed, their most recent average scores on the life skills, family and social relationships, and community involvement domains. The "life skills" domain evaluates the extent to which consumers are able to meet basic activities of daily living. The "family/social relations" domain assesses the level of support consumers receive from family and friends, while the "community involvement" domain evaluates the degree to which consumers are socially isolated or actively involved in their community. On average, consumers with a reassessment increased across each domain, indicating that consumers are experiencing increases in social functioning and independent living skills during program enrollment.

¹¹ The most recent assessment was either consumers' 90-day or 180-day assessment, depending on their length of enrollment.



5 4.5 3.77 4 3.62 3.5 2.92 3 2.56 2.28 2.5 2 2 1.5 1 0.5 0 Life Skils Family and Social Relationships Community Involvement ■ Intake (N = 18) ■ Most Recent Assessment (N = 13)

Figure 12. Changes Life Skills, Relationships, and Community Involvement Domains during ACT

Change scores were calculated for consumers who had both an intake and re-assessment (n = 13). As shown in Table 11, consumers experienced positive change in each domain, with the greatest increase in community involvement.

Table 11. Average Change in Social Function and Life Skills Domains among Consumers with Re-Assessment (N = 13)

| Domain | Average Change |
|---------------------------------|----------------|
| Life Skills | 1.42 |
| Family and Social Relationships | 1.08 |
| Community Involvement | 1.67 |

Taken together, these findings indicate that, at the time of reassessment, consumers had made some improvements in social function and independent living. According to the SSM scoring, consumers were able to, on average meet most of their daily living needs without assistance (life skills). They also had some support from family and friends (family and social relationships). Finally, though they made some improvement in their community involvement (i.e., improving from social isolation and an absence of motivation), they still lacked knowledge of ways to become involved in their community, on average.

AOT Enforcement Mechanisms

No AOT enforcement mechanisms were used during the first 11 months of program implementation.

The primary enforcement mechanism occurs when AOT consumers (e.g., consumers who have a voluntary settlement agreement or AOT court order) refuse to engage and a judge issues a mental health evaluation order at a designated facility for a consumer who does not meet 5150 criteria established in the Welfare and Institutions Code. No enforcement mechanisms have been used.



Consumer and Family Satisfaction

RDA conducted focus groups with ACT consumers and their family members in August 2016. Feedback from consumers and their families suggest that they are generally appreciative of the ACT program and believed that participating in ACT was beneficial. Consumers highlighted several strengths of the program, including staff responsivity and emphasis on shared decision-making; the professionalism of the ACT team; and the ACT team's inclusive approach to services, including their ability to support consumers obtaining and attending appointments, taking medication, navigating the legal system, and engaging in activity-based and recovery-oriented groups. Consumers and their family members also provided feedback on program improvement, suggesting that the ACT team could provide additional meaningful activities to reduce the amount of consumers' free time; more support for family members; and more support with housing supervision.

Future reports will include consumer and family satisfaction survey results, in addition to focus group data collected from annual ACT fidelity assessments.

Violent Behavior and Victimization

CCBHS and MHS attempted to implement the Abbreviated MacArthur Community Violence Tool to assess violence and victimization. However, administering the tool with consumers has been challenging. At the time of this report, no consumers had completed the MacArthur tool. In Contra Costa's experience, this consumer population, who is often in the early stages of accepting treatment and recovery, has resisted the administration of additional assessments and refused to answer violence and victimization questions. The County and MHS will continue to try to implement the MacArthur tool as well as find new ways to obtain this information. However, given the commitment to engaging consumers in treatment and helping consumers progress in their recovery, they have focused more on administering the required assessments rather than disrupting relationship-building with additional tools and scales. If consumers consent to violence and victimization assessments in the future, this information will be included in later reports.



Section 4. Summary of Findings

In its first 11 months of AOT implementation, Contra Costa County received 189 total referrals for AOT from all categories of potential qualified requestors. The majority of consumers were referred by family members (64%, n = 121). Through investigation that involved engaging both consumers and their families, CCBHS connected 62 unique eligible referred consumers to MHS for outreach and engagement services. Of those who were not connected to MHS, 24 were still under investigation to determine their eligibility. The remaining 100 consumers were either unavailable (i.e., the qualified requestor withdrew the request or could not be reached; the consumer could not be found, was hospitalized or incarcerated; or the consumer re-engaged in other FSP services) or they did not meet AOT eligibility criteria.

Following referral to MHS, 62 consumers received intense outreach and engagement services from the ACT team, with the goal of connecting consumers and their families to voluntary mental health services. At the conclusion of the evaluation period, MHS successfully enrolled 32 consumers in ACT.¹²

- ACT consumers reflected the target population for the AOT program. The majority (75%, n = 24) had a primary diagnosis of a psychotic disorder and 30% (n = 10) had a co-occurring substance disorder. The majority of consumers experienced a psychiatric hospitalization (74%, n = 23) and crisis stabilization episode (97%, n = 30). Housing data were available for 26 consumers, 19 of whom (73%) were homeless in the 12 months before enrollment.
- The majority (94%, n = 29) of consumers were adherent to ACT services. In other words, consumers consistently averaged at least one face-to-face contact with the ACT team per week and received a range of services, including individual and group therapy, case management, employment and housing assistance, medication management, and support building independent living skills, wellness, and community engagement.
- Overall, consumers experienced fewer hospitalizations and adverse outcomes; however, there remains a small subset of consumers experiencing hospitalizations and justice involvement. Fewer consumers experienced psychiatric hospitalizations (23%, n = 7) and crisis stabilization stays (61%, n = 19) during ACT. Additionally, seven consumers were arrested and incarcerated while enrolled in ACT.
- Housing support and assistance efforts can be improved. While six consumers obtained housing and another seven maintained their housing while in ACT, half of consumers for whom there was data (n = 13) were not in stable housing at the end of the evaluation period.
- Consumers experienced improvement in their social functioning and independent living. On average, consumers who were in the program for at least 90 days and received an SSM assessment experienced positive changes in their life skills, family and social relationships, and community involvement.

¹² One consumer was enrolled at the very end of the evaluation period and therefore had not received any ACT services at the time of this evaluation).



Overall, consumers and their family members are satisfied with the ACT program. While there
is room for program improvement (e.g., providing additional opportunities for meaningful activity
engagement, family support, and housing assistance), consumers and their families are pleased
with the professionalism of the ACT team, the opportunities for self-determination and decisionmaking, and the team's comprehensive approach to services.

As Contra Costa County's AOT program matures, and larger numbers of consumers enroll in the program for longer periods, future reports will include additional information on consumers' outcomes and allow for more advanced statistical analyses to be utilized in order to better explore changes in Contra Costa County's ACT consumer outcomes over time.



Appendix I. AOT Eligibility Requirements¹³

In order to be eligible, the person must be referred by a qualified requestor and meet the defined criteria:

- The person is 18 years of age or older.
- The person is suffering from a mental illness.
- ❖ There has been a clinical determination that the person is unlikely to survive safely in the community without supervision.
- The person has a history of lack of compliance with treatment for his or her mental illness, in that at least one of the following is true:
 - a. At least 2 hospitalizations within the last 36 months, including mental health services in a forensic environment.
 - b. One or more acts of serious and violent behavior toward himself or herself or another, or threats, or attempts to cause serious physical harm to himself or herself or another within the last 48 months.
- ❖ The person has been offered an opportunity to participate in a treatment plan by the director of the local mental health department, or his or her designee, provided the treatment plan includes all of the services described in Section 5348, and the person continues to fail to engage in treatment.
- The person's condition is substantially deteriorating.
- ❖ Participation in the assisted outpatient treatment program would be the least restrictive placement necessary to ensure the person's recovery and stability.
- ❖ In view of the person's treatment history and current behavior, the person is in need of assisted outpatient treatment in order to prevent a relapse or deterioration that would be likely to result in grave disability or serious harm to himself or herself, or to others, as defined in Section 5150.
- ❖ It is likely that the person will benefit from assisted outpatient treatment.

¹³ Welfare and Institutions Code, Section 5346



Appendix II. Description of Evaluation Data Sources

<u>CCBHS AOT Request Log</u>: This spreadsheet includes the date of each AOT referral, as well as the demographic characteristics of each individual referred to AOT and the disposition of each referral upon CCBHS' last contact with the individual referred (e.g., unqualified requestor, open AOT investigation, voluntarily accept MHS services, court involved MHS participation).

These data were used to identify the total number of referrals to the County's AOT program from February 1, 2016 – December 31, 2016, as well as the number of referrals made to AOT each month, and the number of individuals who received more than one AOT referral.

<u>CCBHS Blue Notes:</u> CCBHS staff converted the Blue Notes (i.e., field notes from successful outreach events) into a spreadsheet tracking the date, location and length of each CCBHS Investigation Team outreach encounter. These data were used to assess the average length (i.e., days and encounters) of investigation attempts provided by the CCBHS Investigation Team per referral.

<u>MHS Outreach and Engagement Log:</u> This spreadsheet tracks the date and outcome of each MHS outreach encounter, including information on who provided outreach (e.g., family partner, peer partner, clinician) to whom (consumer or collateral contact such as friend, family, or physician), and the location and length of each outreach encounter.

Data from this source were used to calculate the average number of outreach encounters the MHS team provided each consumer, as well as the average length of each outreach encounter, the location (e.g., community, secure setting, telephone) of outreach attempts, and the average number of days of outreach provided for reach referral.

<u>Contra Costa County PSP Billing System (PSP)</u>: These data track all services provided to ACT participants, as well as diagnoses at the time of each service. PSP service claims data were used to identify the clinical diagnoses of ACT participants at enrollment, as well as the types and costs of services consumers received pre- and during-ACT enrollment (e.g., outpatient, inpatient, residential, and crises), the average frequency with which consumers received ACT FSP services, and the average duration of each service encounter.

FSP Partnership Assessment Form (PAF), Key Event Tracking (KET), and Quarterly Assessment Form (3M): Though the PAF, KET, and 3M are entered into the Data Collection and Reporting (DCR) system, data queries were unreliable and inconsistent; therefore, MHS staff entered PAF, KET, and 3M data manually into a Microsoft Access database. These data were used in this report to generate consumer profile measures and self-reported changes in outcome measures such as homelessness before and during ACT.

<u>MHS Outcomes Files:</u> These files include assessment data for a number of clinical assessments MHS conducts on ACT participants. For the purposes of this evaluation, the Self Sufficiency Matrix (SSM) was used to assess consumers' social functioning and independent living. Future reports will include findings



from the MacArthur Abbreviated Community Violence Instrument to address consumers' experiences of victimization and violence.

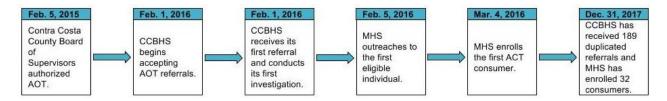


Contra Costa County Assisted Outpatient Treatment - 2017 DHCS Report Summary

Background

On February 5, 2015, the Contra Costa County Board of Supervisors adopted a resolution to authorize the implementation of AOT in accordance with the Welfare and Institutions Code, Sections 5345-5349.5. Figure 1 below shows the implementation timeline of AOT in Contra Costa County.

Figure 1. Contra Costa County AOT Program Implementation Timeline



The County has designed an AOT program model that exceeds AB 1421 requirements and responds to the needs of its communities. CCHBS and Mental Health Systems (MHS) collaborate as the Care Team to

What is ACT?

ACT is an evidence-based behavioral health program for people with serious mental illness who are at-risk of or would otherwise be served in institutional settings such as a hospital or jail, or experience homelessness.

conduct investigation, outreach, and engagement activities. MHS provides Assertive Community Treatment (ACT) services for individuals enrolled in ACT. When implemented to fidelity, ACT produces reliable results for consumers, including negative decreased outcomes, such hospitalization, incarceration, and homelessness, and improved psychosocial outcomes, such as increased life skills and involvement in meaningful activities.

This summary reports on the activities and outcomes of the first 11 months of AOT implementation and ACT service provision in Contra Costa County (February 1, 2016 – December 31, 2016).

Methodology

RDA worked with CCBHS, MHS, and other County partners to gather a variety of data, as shown in Table 1. RDA matched clients across a number of County and MHS data sources and utilized descriptive





CONTRA COSTA HEALTH SERVICES Assisted Outpatient Treatment Program – 2017 DHCS Report Summary

statistics (e.g., frequencies, mean, median, and mode) for all analyses to describe the data and highlight pre- and during-enrollment outcomes, wherever appropriate.

Table 1. Evaluation Data Sources

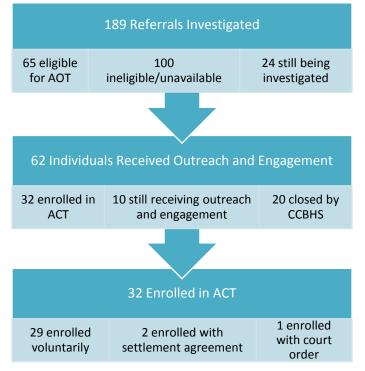
| Source | Data Elements |
|--------|---|
| ссвнѕ | Referral and investigation information Service utilization data for all specialty mental health services provided or paid for by CCBHS, including ACT Consumers' mental health diagnoses and substance abuse |
| MHS | Outreach and engagement encounters Clinical assessments/outcomes Homelessness, criminal justice involvement, and employment outcomes (FSP PAF, KET, and 3M assessments) RDA-facilitated focus groups with ACT consumer and family focus groups (August 26, 2016) |

Pre-Enrollment

In the first 11 months of implementation, Contra Costa County received 189 total referrals for AOT from all categories of potential qualified requestors, with the majority (64%, n = 121) made by family members.

- 65 eligible consumers were referred to MHS for outreach and engagement services.
- 24 were still under investigation to determine their eligibility.
- 100 consumers were either unavailable (i.e., the qualified requestor withdrew the request or could not be reached; the consumer could not be found, was hospitalized, or incarcerated; or the consumer reengaged in other FSP services) or they did not meet AOT eligibility criteria.

Figure 2. Consumer Progress from Referral through ACT Enrollment





Contra Costa County Behavioral Health Services CONTRA COSTA HEALTH SERVICES Assisted Outpatient Treatment Program – 2017 DHCS Report Summary



Of the 65 referrals, there were 62 unique consumers. They received intense outreach and engagement services from the ACT team, with the goal of connecting consumers and their families to voluntary mental health services (see Enrollment Period

Contra Costa County is reaching the identified target population for ACT.

The majority are White (59%) or Black/African American (25%) and are individuals with a psychotic disorder (75%).

- Of the consumers for whom there was data (n = 29), 83% (n =24) were unemployed between four and 12 months prior to enrolling in ACT and 93% (n = 27) were unemployed when they were enrolled in ACT services.
- The majority of consumers with data (66%, n = 19) received supplemental security income in the 12 months before ACT enrollment and when they enrolled in ACT.

| of black/Affical Afficilitati (23%) and are individu | uais With a |
|---|-------------|
| Characteristic | % (N) |
| Gender | |
| Male | 50% (16) |
| Female | 50% (16) |
| Race/Ethnicity | |
| Black/African American | 25% (8) |
| Hispanic | 16% (5) |
| White/Caucasian | 59% (19) |
| Primary Diagnosis | |
| Psychotic Disorder, including schizophrenia and schizoaffective disorders | 75% (24) |
| Mood Disorder, including depressive and bipolar disorders | 19% (6) |
| Other | 6% (2) |
| Substance Use | |
| Consumers with a substance use diagnosis | 30% (10) |
| Consumers without a substance use diagnosis | 70% (22) |

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Enrollment Period

Contra Costa County is reaching the identified target population for ACT.

| Characteristic | % (N) |
|---|----------|
| Gender | |
| Male | 50% (16) |
| Female | 50% (16) |
| Race/Ethnicity | |
| Black/African American | 25% (8) |
| Hispanic | 16% (5) |
| White/Caucasian | 59% (19) |
| Primary Diagnosis | |
| Psychotic Disorder, including schizophrenia and schizoaffective disorders | 75% (24) |





Contra Costa County Behavioral Health Services

CONTRA COSTA Assisted Outpatient Treatment Program – 2017 DHCS Report Summary

 The majority are White (59%) or Black/African American (25%) and are individuals with a psychotic disorder (75%).

| Mood Disorder, including depressive and bipolar disorders (N = | 19% (6) 32) |
|--|-----------------------|
| Other | 6% (2) |
| Substance Use | |
| Consumers with a substance use diagnosis | 30% (10) |
| Consumers without a substance use diagnosis | 70% (22) |

- Of the consumers for whom there was data (n = 29), 83% (n =
 - 24) were unemployed between four and 12 months prior to enrolling in ACT and 93% (n = 27) were unemployed when they were enrolled in ACT services.
- The majority of consumers with data (66%, n = 19) received supplemental security income in the 12 months before ACT enrollment and when they enrolled in ACT.

The ACT team is providing intensive services to consumers. From February through December 2016, 31 consumers were enrolled in and receiving ACT services for an average of 158 days. The majority (94%, n = 29) of consumers adhered to treatment, which means they received at least one face-to-face contact from MHS staff per week.

 While enrolled in ACT, consumers received an average of 31 service encounters per month.

Table 4. ACT Service Engagement (N = 31)

| | Average | Range |
|--------------------------------------|-------------------------|---------------------------------|
| Length of ACT Enrollment | 158 days | 15 – 302 days |
| Frequency of ACT Service Encounters | 31 encounters per month | 3 – 104 encounters per month |
| Intensity of ACT Services Encounters | 54 minutes | 1 – 422 minutes |

¹ One consumer who enrolled at the conclusion of the evaluation period had not yet received any ACT services and was not included in the following analyses.



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Contra Costa County Behavioral Health Services

CONTRA COSTA HEALTH SERVICES Assisted Outpatient Treatment Program – 2017 DHCS Report Summary

Encounters lasted an average of 54 minutes per encounter.

• Encounters per month varied across consumers, from three to 104 encounters per month.





The majority of consumers experienced fewer psychiatric hospitalizations and crisis episodes during ACT, although a subset of consumers continues to experience hospitalization. As depicted in Figure 3, high levels of hospitalization and crisis episodes among a small subset of consumers resulted in slightly inflated averages of both outcomes during enrollment.

Figure 3. Consumer Crisis Episodes and Hospitalizations before and during ACT

Consumer Crisis Episodes and Hospitalizations **Before ACT**

•97% (n = 30) had at least one crisis episode before ACT enrollment

3.31 episodes per 180 days for an average 1 day per episode

•74% (n = 23) were hospitalized at least once during the 36 months prior to enrollment

1.07 hospitalizations per 180 days for an average 7 days per episode

Consumer Crisis Episodes and Hospitalizations **During ACT**

•63% (n = 19) of those with an episode before ACT experienced a crisis episode during ACT

0.53 episodes per 180 days for an average 1 day per episode

•30% (n = 7) of the 23 hospitalized prior to **ACT** were hospitalized during ACT

2.86 hospitalizations per 180 days for an average 11 days per episode

A small subset of consumers is continuing to experience criminal justice involvement after ACT enrollment. Given limitations to self-reported criminal justice data, RDA reports on consumers' arrests and incarcerations during ACT enrollment. As with hospitalizations and crisis episodes, a few consumers with high levels of justice involvement resulted in slightly inflated averages.

- Consumers who were arrested and then incarcerated during ACT (23%, n = 7) were arrested and incarcerated at a rate of 4.13 times every 180 days.
- The length of consumers' incarcerations ranged between one and 19 days, for an average of 17 days per incarceration.





Half of consumers were in stable housing at the conclusion of the evaluation period. Figure 4 reports the housing status of consumers during ACT. Self-reported housing data from before and during ACT were available for 26 consumers.

Figure 4. Summary of ACT Consumers' Housing during ACT (N = 13)

6 consumers obtained housing

• 23% of consumers who were not housed before ACT obtained housing while enrolled

7 consumers maintained housing

• 27% of consumers who were housed before ACT continued to maintain housing while enrolled

13 consumers were not stably housed

- 12% of consumers were housed before ACT but did not maintain housing during ACT
- 38% of consumers were not housed before or during ACT enrollment

Consumers experienced positive changes in their life skills, relationships with friends and family, and community involvement. The Self Sufficiency Matrix (SSM) was used to assess consumers' social functioning and independent living. The SSM consists of 18 domains scored on a scale of one ("in crisis") to five ("thriving"). Intake data were available for just over half (56%, n = 18) of the ACT consumers, 13 of whom also had a reassessment. According to the SSM scoring, consumers on average:

- Met most of their daily living needs without assistance (life skills)
- Maintained some support from family friends (family and social relationships).
- Still lacked knowledge of ways to become involved in their community.

Table 5. Average Change in Social Function and Life Skills Domains (N = 13)

| Domain | Average Change |
|---------------------------------|----------------|
| Life Skills | 1.42 |
| Family and Social Relationships | 1.08 |
| Community Involvement | 1.67 |

Additionally, nine consumers utilized the employment services provided by the ACT. Services included: support developing résumés, searching for job openings, preparing for interviews, and submitting applications.

Overall, consumers and their family members are satisfied with the ACT program. While there is room for program improvement (e.g., providing additional opportunities for meaningful activity engagement, family support, and housing assistance), consumers and their families are pleased with the professionalism of the ACT team, the opportunities for self-determination and decision-making, and the team's comprehensive approach to services.

As Contra Costa County's AOT program matures, and larger numbers of consumers enroll in the program for longer periods, future reports will include additional information on consumers' outcomes and allow for more advanced statistical analyses to be utilized in order to better explore changes in Contra Costa County's ACT consumer outcomes over time.



Contra Costa County Behavioral Health Services



CONTRA COSTA HEALTH SERVICES Assisted Outpatient Treatment Program – 2017 DHCS Report Summary

Evaluation Next Steps

RDA will conduct the following next steps for its evaluation of the Contra Costa County AOT program:

• ACT Fidelity Assessment

- ACT Fidelity Assessment Activities: July 2017
- o ACT Fidelity Assessment Report: August 2017

• Evaluation Report

- Data collection and analysis: June August 2017
- o AOT Evaluation Report (July 1, 2016 June 30, 2017): September 2017
- o Presentations of Evaluation Report findings: October-November 2017

• 2018 DHCS Report

- o Data collection and analysis: December 2017 February 2018
- o **DHCS Report** (January 1, 2017 December 31, 2017): March 2018
- o Presentation of DHCS report findings: April May 2018





Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE

9.

Meeting Date: 05/22/2017

Subject: Workforce Innovation and Opportunity Act Annual Report

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: 109

Referral Name: Workforce Innovation and Opportunity Act

Presenter: Kathy Gallagher, Employment and Human Contact: Enid Mendoza, (925)

Services Director 335-1039

Referral History:

On January 6, 2015 the Board of Supervisors referred oversight and receipt of updates on the Workforce Innovation and Opportunity Act (WIOA) to the Family and Human Services Committee (F&HS).

WIOA was signed into law on July 22, 2014. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market and to match employers with the skilled workers they need to compete in the global economy. Congress passed the Act by a wide bipartisan majority; it is the first legislative reform in 15 years of the public workforce system. WIOA was expected to significantly impact the Employment and Human Services Department (EHSD) and the way the Workforce Development Board does its work. Therefore, updates on the impacts and changes was referred to F&HS.

Referral Update:

On September 14, 2015 and March 14, 2016, F&HS received reports on the impacts of WIOA report from EHSD. At the March 14, 2016 meeting, F&HS approved the Department's recommendation to decertify the Workforce Development Board and recertified a new recommended structure in compliance with the new WIOA requirements. At that time, the Department was awaiting further guidance from the State on other WIOA rules. Therefore, F&HS asked the Department to return with additional information once sufficient information and guidance was received from the State and the Department was able to provide further analysis of the impacts of WIOA.

Recommendation(s)/Next Step(s):

CONSIDER accepting the report from the Employment and Human Services on the Workforce Innovation and Opportunity Act and forward to the Board of Supervisors for their information.

Fiscal Impact (if any):

There is no fiscal impact; the report is informational.

Attachments

WIOA Report to F&HS



Workforce Development Board of Contra Costa County Family & Human Services Presentation May 2017

The most important and pressing work that is before the Workforce Development Board of Contra Costa County (WDBCCC) at this point in time is the full implementation of the Workforce Innovation and Opportunity Act (WIOA). Although WIOA was signed into law in July of 2014, the final rules were not issued until August 19, of 2016. While the WDBCCC has been moving towards this implementation since the later part of 2014, it is only within the last 4 months that the state has issued directives with enough clarity, direction and deadlines (of which there are many) to fully implement. The WDBCCC continues to move forward with a number of key priorities and activities, with particular emphasis on preparation for the full implementation of the WIOA.

The WDBCCC is serving as the lead Local Workforce Development Area (LWDA) for the newly established "East Bay Planning Region" under WIOA. As a part of this, the WDBCCC will be responsible for administering funds to help support and coordinate regional planning activities in conjunction with the other three (3) regional LWDAs from Alameda County, the City of Oakland, and the City of Richmond. Regional plans must be completed and submitted to the California Workforce Development Board (CWDB) by March 31, 2017. Planning efforts around this work will be leveraged through the regional EASTBAY *Works* partnership that has been operating since 1998.

The Workforce Development Board of Contra Costa County exceeded both service-level and performance targets for services to job seekers and businesses, thus receiving the "High Performing Board" certification by the CWDB again.

The WDBCCC continues to serve as the lead organization for the East Bay "Slingshot" initiative, which brings together stakeholders from economic development, education, and workforce development to support industry sector partnerships that are driving the growth and prosperity of the regional economy. Targeted industry sectors include advanced manufacturing, biomedical, healthcare, information communication technology (ICT), and transportation / logistics.

Workforce Innovation & Opportunity Act implementation items requiring Board of Supervisor approval:

Regional and Local Plans:

March 15th Local and Regional Plans submitted to State Board

May 1st WDBCCC received conditional approval; additional information requested

June 15th Revisions due to State Board
June/July Plans submitted for BOS approval

August 1st Final corrected and signed plans due to State Board

• Adult DW Career Services Provider App:

Approved by BOS and signed by Supervisor Glover March 9th; the WDBCCC has received conditional approval along with a request for additional information.



• One-Stop Operator Selection

An RFI was released March 26th and closed on April 24th; the responses received did not meet the needs of this procurement and it was determined to be a failed procurement. The WDBCCC will revise and repost the procurement but must submit an application to be the AJCC Operator per WSB Directive 16-14 in order to meet the required deadline of July 1, 2017.

Mandated Partner MOU Phase I

Scheduled for approval at May 23rd BOS

Mandated Partner MOU Phase II – cost allocation

- o The WDBCCC is working with Fiscal to establish a cost allocation method
- May/June the cost allocation is being presented to mandated partners for approval
- June submit to BOS for approval
- September 1st deadline to submit to the state
- o January 2018 Implementation

WIOA Youth Programs

WDBCCC staff members have been working on implementing changes regarding the administration and implementation of WIOA youth programs, the most notable of which include increased funding percentages for out-of-school youth and a new age range for services from 16-24 years old. There is also a requirement that at least 20% of WIOA youth funds be spent on helping youth gain work-based learning experiences.

To meet the new WIOA youth requirements and in accordance with procurement policy, an RFP to solicit competitive proposals for the delivery of year-round youth program services was released on December 23, 2016, with proposals due February 13^{th,} 2017. Three proposals were received and negotiations are taking place to award these contracts effective July 1, 2017.

Earn & Learn East Bay is an engagement and recruitment campaign coordinated by the WDBCCC, the Contra Costa Economic Partnership (CCEP) and Diablo Gateways to Innovation (DGI). DGI is a collaborative effort among a wide range of educational and workforce partners actively supporting career pathways for youth and young adults in our region. The Earn & Learn East Bay initiative provides compensated work-based learning opportunities to youth through meaningful workplace experiences, summer and year-round placement, internships and apprenticeships, or in industry-led summer learning experiences. Moving forward, the WDBCCC will continue to facilitate employer participation on Industry Advisory Boards to advise and assist educators with career pathway programs, and as guest speakers in high school and community college classrooms. The WDBCCC will also support teachers by helping them gain a deeper understanding of industry needs and by arranging externships in which teachers directly experience the workplace.

Business Services

The WBD is revising its business services to align with our sector priorities, support priority populations, and support regional partnerships as defined in WIOA. These include working with our regional sector



partnerships (EB Advanced Manufacturing Partnership, EB Health Workforce Partnership, EB Transportation and Logistics Partnership, and EB Information and Communications Technology Partnership), the CCWORKS Program, Earn & Learn East Bay (a youth focused initiative), and AB 109/AB 2060 focusing on serving the reentry population through increased employer engagement.

In collaboration with Contra Costa College the WDBCCC Business Services team hosted a career fair at Contra Costa College on October 5, 2016. Thirty-six employers participated, 20 community resource providers, and 252 job seekers attended this event.

Feedback shows that the majority of respondents believed the Career Fair to be a huge success. Our analysis shows that job seekers were "very satisfied" with the event's accessibility, staff assistance, employers and resources, and their overall satisfaction. Agencies were also pleased in their feedback. A number commented on how well the fair was organized. In addition, these agencies represent hard to serve populations, which include returning citizens, low-income seniors, the disabled, veterans, and disadvantage youth. They indicated that their clients also had a positive experience.

In accordance with the WDBCCC's work with AB109 and our recent AB2060 Forward Focus grant, the WDBCCC will be hosting a Second Chance Employer Summit on May 24th at the Pleasant Hill Community Center. This event has garnered tremendous attention from businesses in our community and is expected to be at full, if not over, capacity.

Small Business Development Center

Partially funded by the Small Business Administration (SBA), this program, hosted by the WDBCCC, delivers individualized advising and group training to current and aspiring business owners in English and Spanish throughout the County. The SBDC actively partners with myriad public, nonprofit, and private sector organizations to attract "high-impact" employers as well as community-based agencies to reach and serve low-to-moderate income (LMI) residents.

The Contra Costa SBDC is one of the highest functioning SBDCs in the State of California serving over 2,000 small businesses annually.

CCWORKS

Under the direction of the WDBCCC the CCWORKS subsidized employment program continues to have a high success rate of finding work experience opportunities for CalWORKS recipients with over 126 placements through April 2017. The WDBCCC is conducting satisfaction surveys from both business and participants for continuous improvement. The results of recent Business Partnership Satisfaction Survey are currently being evaluated.

One-Stop/AJCC Operations

Continued strong participation from the Workforce Integration Network (WIN) teams, which are comprised of community-based organizations and other public sector partners to examine ways to better coordinate and align resources and efforts around employment and other services. Three (3) different teams, representing the West, Central, and East Contra Costa sub-regions are continuing to meet, share information, coordinate referrals, and plan events. These groups are expected to play an



important role as the WDBCCC continues to evolve its services under WIOA and begins to work on adoption of a new strategic workforce development plan.

The WDBCCC continues to maintain strong linkages with educational partners to support a variety of services and initiatives at the AJCCs and other locations.

Number of Work Experience Hours Provided to Interns: **22,754 TOTAL** at PY 2016-2017 Q3 WIOA: **9,114** CCWorks: **10,360** SCSEP: **1,524** Adult Ed: **336** Other: **1,420**

The WDBCCC, through its America Job Centers of California and contracted services, provides basic career serves to approximately 11,000 customers annually.

The following are indicators for people who received intensive services through the WDBCCC PY 2015-2016:

ENTERED EMPLOYMENT RATE

During FY 15-16, 74% of adults entered employment compared to the negotiated performance level of 75%. 85% of Dislocated Workers entered employment, well above the negotiated performance level of 77.5%.

RETENTION RATE

During FY 15-16, 86% of adults remained employed for at least 3 quarters compared to the negotiated performance rate of 82.5%. 86% of Dislocated Workers retained employment exceeding the negotiated performance level of 85%.

AVERAGE EARNINGS FOR SIX MONTHS

During FY 15-16, the average earnings for adults participating in WDBCCC programs were \$14,797 compared to the negotiated performance level of \$14,950. The average earnings for Dislocated Workers were \$22,507 compared to the negotiated performance rate of \$20,250.

The WDBCCC administers several programs targeting youth ages 14-24 in Contra Costa County. The WDBCCC youth programs focus on improving their educational attainment and skills along with their career readiness to strengthen their future employment opportunities.

PLACEMENT IN EMPLOYMENT OR EDUCATION

72% of youth participants were placed in employment or educational opportunities, an impressive success rate which exceeded the negotiated performance level of 60%.

YOUTH CREDENTIAL ATTAINMENT

68% of youth attained a high school diploma, GED or occupational certificate as compared to the negotiated performance level of 51.5%.

LITERACY NUMERACY GAINS

Due in large part to a transition in contracted service providers for the WDBCCC's youth programs only 9% of youth participants increased their basic reading and math skills while the negotiated performance level was 40.5%. Corrective action is underway. This program is aimed at increasing skills for out-of-school youth who read, write, or compute below the 9th grade level.



To date for PY 2016-2017 the WDBCCC has provided intensive career services to 1,141 customers of which 159 attained a certificate/diploma/degree and 200 have entered unsubsidized employment.

Budget/Grants/Funding Opportunities

The WDBCCC is entering into a very austere budget period with federal allocations down 13% in the past 3 years coupled with the decrease in CalWORKS funding that has had a residual impact on the WDBCCC/ AJCCs funding resulting in the loss of several positions.

- AB 109: The WDBCCC has been receiving \$200,000 annually AB 109 funds for each of the past three (3) years, with another allocation of \$200,000 anticipated in FY 2017-2018. These funds have primarily been used for two purposes: 1) to deepen connections between the re-entry community and businesses/employers; 2) to strengthen partnerships between the WDBCCC and other public agencies, as well as the contracted nonprofit service providers that are helping AB 109 participants reenter the community.
- <u>AB2060-Forward Focus</u>: The WDBCCC was able to leverage AB109 funds for a grant opportunity and was awarded a \$400,000 to support the needs of the re-entry population in Contra Costa County, one that goes beyond the requirements of AB 109 to include other supervised populations.

The WDBCCC is pursuing additional grants and funding opportunities.