



Agenda

FAMILY & HUMAN SERVICES COMMITTEE

July 31, 2017
10:30 A.M.

651 Pine Street, Room 101, Martinez

Supervisor John Gioia, Chair
Supervisor Candace Andersen, Vice Chair

Agenda Items:

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. APPOINT Tracy Cascio to the Veteran Administration Representative seat on the Council on Homelessness with a term expiring December 31, 2017 and DIRECT staff to forward the recommendation to the Board of Supervisors for their approval.
4. CONSIDER accepting the draft responses to Civil Grand Jury Report No. 1703, entitled "Mental Health Services for At-Risk Children in Contra Costa County" and directing staff to forward the response to the Board of Supervisors for their approval. (Cynthia Belon, Behavioral Health Director)
5. CONSIDER accepting the reports from the Employment and Human Services Department on youth services and directing staff to forward the report to the Board of Supervisors for their information. (Kathy Gallagher, Employment and Human Services Director)
6. CONSIDER accepting the report from the Health Services Department on Health Care for the Homeless and directing staff to forward the report to the Board of Supervisors for their information. (Dr. Joseph Mega, Health Services Department)
7. CONSIDER accepting the report on the Local Planning and Advisory Council for Early Care and Education activities and countywide plan for early care and education and directing staff to forward the report to the Board of Supervisors for their information, as recommended by the County Office of Education. (Ruth Fernández, LPC Coordinator/Manager, Educational Services)
8. The next meeting is currently scheduled for August 28, 2017.
9. 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 - Special Meeting

3.

Meeting Date: 07/31/2017
Subject: Appointment to the Council on Homelessness
Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,
Department: County Administrator
Referral No.: N/A
Referral Name: Appointments to Advisory Bodies
Presenter: N/A **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 the Board of Supervisors sub-committee.

The Contra Costa Council on Homelessness is appointed by the Contra Costa County Board of Supervisors to assist and provide guidance in the development and implementation of long range planning and policy formulation that addresses homeless issues in Contra Costa County.

The Council on Homelessness provides a forum for communication and coordination of the County's Strategic Plan to End Homelessness; educate the community on homeless issues, allocate federal HUD Homeless Assistance funding to providers, and advocate on federal, state and local policy issues affecting people who are homeless or at-risk of homelessness. Council on Homelessness members are appointed and serve two year terms.

Referral Update:

Please see the attached memo from the Council on Homelessness, which details their request to appoint Tracy Cascio due to an administrative error. The total council membership consists of 18 seats, of which 15 are currently filled. The three vacancies are in the Philanthropy, Veteran Administration, and Consumer/Consumer Advocate - Alternate seats. If the requested action is approved by the Family and Human Services Committee, only the Philanthropy and Consumer/Consumer Advocate - Alternate seats will remain vacant.

Recommendation(s)/Next Step(s):

APPOINT Tracy Cascio to the Veteran Administration Representative seat on the Council on Homelessness with a term expiring December 31, 2017, and DIRECT staff to forward the recommendation to the Board of Supervisors for their approval.

Attachments

Memo to F&HS from CoH

T. Cascio Application

CoH Roster with Attendance



1350 Arnold Drive, Suite 202
Martinez, CA 94553-4639
Ph 925-313-7700
Fax 925-646-9420

Date: June 29, 2017

To: Family and Human Services Committee

Supervisor John Gioia, District I, Chair

Supervisor Candace Anderson, District II, Co-Chair

CC: Jaime Jenett, Planning and Policy Manager, Housing and Homeless Services Division

From: Lavonna Martin, Director, Health, Housing and Homeless Services Division

Subject: Vacant Council on Homelessness Seat Membership Recommendation

The Director of Health, Housing and Homeless Services, Lavonna Martin, respectfully requests that the Family and Human Services Committee accepts the recommendation to re-instate Tracy Cascio, Homeless Program Manager of the VA Northern California Health Care System, to the Veteran Administration seat on the Contra Costa Council on Homelessness (aka the Homelessness Advisory Board) that was vacated in error.

PURPOSE OF COUNCIL ON HOMELESSNESS

The Contra Costa Continuum of Care is governed by the Contra Costa Council on Homelessness (hereinafter referred to as the Council). The Council is appointed by the Contra Costa County Board of Supervisors to assist and provide guidance in the development and implementation of long-range planning and policy formulation of homeless issues in Contra Costa County.

The Contra Costa Council on Homelessness provides a forum for communication and coordination of the County's Strategic Plan to End Homelessness, educate the community on homeless issues, and advocate on federal, state and local policy issues affecting people who are homeless or at-risk of homelessness.

Governance

The Council on Homelessness is appointed by the Board of Supervisors and consists of 18 seats representing homeless or formerly homeless persons, community members, educational/vocational services, health care, housing providers, law enforcement, local government, the faith community, and homeless service providers including the Veteran Administration. All Council members reside in or are employed in Contra Costa County, demonstrate a professional interest in or personal commitment to addressing and alleviating the impact of homelessness, and must be able to contribute unique expertise, opinions and viewpoints on homeless issues. Candidates will serve two-year terms.

SUMMARY OF RECRUITMENT EFFORTS/NOMINEES FOR MEMBERSHIP

Due to an administrative error, Tracy Cascio was vacated from the Veteran Administration Representative seat. The Council on Homelessness has voted in favor of re-instating Ms. Cascio to the seat as soon as possible.



Veteran Administration Representative

Tracy Cascio, MSW

Homeless Program Manager

VA Northern California Health Care

150 Muir Road

Martinez, CA 94553

(925) 372-2463

Tracy.cascio@va.gov

The candidate has previously served on the Council and is dedicated to fulfilling the mission and goals as outlines in the Council on Homelessness by-laws.

Based on the above information, the Director of Health, Housing and Homeless Services Division, on behalf of the Council on Homelessness respectfully recommends that the FHS Committee appoint the above listed person to the Council on Homelessness.





CLERK OF THE BOARD OF SUPERVISORS
CONTRA COSTA CO.
Costa
County

RECEIVED

MAY 10 2017

Office Use Only
Date Received:

For Reviewers Use Only:
Accepted Rejected

Print Form

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
(Each Position Requires a Separate Application)

BOARD, COMMITTEE OR COMMISSION NAME AND SEAT TITLE YOU ARE APPLYING FOR:

Council on Homelessness Executive Board

Health Care Representative

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (if applicable)

1. Name: Cascio Tracy
(Last Name) (First Name) (Middle Name)

2. Address: (No.) (Street) (Apt.) (City) (State) (Zip Code)
Martinez CA 94553

3. Phones: (Home No.) (Work No.) (Cell No.)

4. Email Address:

5. EDUCATION: Check appropriate box if you possess one of the following:

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

Give Highest Grade or Educational Level Achieved Graduate School

	Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
				Semester	Quarter		
A)	Western Washington Univ.	Psychology	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>		64	BA	1986
B)	UC Berkeley, School of SW	MSW	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	6		MSW	1991
C)			Yes No <input type="checkbox"/> <input type="checkbox"/>				
D)	Other schools / training completed:	Course Studied	Hours Completed	Certificate Awarded: Yes No <input type="checkbox"/> <input type="checkbox"/>			

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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.

<p>A) Dates (Month, Day, Year)</p> <p>From <input type="text"/> To <input type="text"/></p> <p><input type="text"/> 2/05 <input type="text"/> Present</p> <p>Total: Yrs. <input type="text"/> Mos. <input type="text"/></p> <p><input type="text"/> 10 <input type="text"/> 7</p> <p>Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title</p> <p>Homeless Program Manager</p> <p>Employer's Name and Address</p> <p>VA Northern California Health Care 150 Muir Road Martinez, CA 94553</p>	<p>Duties Performed</p> <p>Supervise staff and manage a continuum of services for homeless Veterans in the region of NCHCS, including permanent supportive housing, contracted emergency and transitional housing, justice outreach and employment services. Team size is 73 staff, 1340 units of permanent housing, 221 transitional, 121 emergency.</p>
<p>B) Dates (Month, Day, Year)</p> <p>From <input type="text"/> To <input type="text"/></p> <p><input type="text"/> 9/91 <input type="text"/> 2/05</p> <p>Total: Yrs. <input type="text"/> Mos. <input type="text"/></p> <p><input type="text"/> 13 <input type="text"/> 5</p> <p>Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title</p> <p>Homeless Program Coordinator</p> <p>Employer's Name and Address</p> <p>San Francisco VA 401 3rd St. San Francisco, CA 94103</p>	<p>Duties Performed</p> <p>Supervised a team of social workers and operated a continuum of services for Veterans in the SF Bay area. Team size was 10, number of transitional and emergency beds totaled 50.</p>
<p>C) Dates (Month, Day, Year)</p> <p>From <input type="text"/> To <input type="text"/></p> <p><input type="text"/> <input type="text"/></p> <p>Total: Yrs. <input type="text"/> Mos. <input type="text"/></p> <p><input type="text"/> <input type="text"/></p> <p>Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title</p> <p><input type="text"/></p> <p>Employer's Name and Address</p> <p><input type="text"/></p>	<p>Duties Performed</p> <p><input type="text"/></p>
<p>D) Dates (Month, Day, Year)</p> <p>From <input type="text"/> To <input type="text"/></p> <p><input type="text"/> <input type="text"/></p> <p>Total: Yrs. <input type="text"/> Mos. <input type="text"/></p> <p><input type="text"/> <input type="text"/></p> <p>Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title</p> <p><input type="text"/></p> <p>Employer's Name and Address</p> <p><input type="text"/></p>	<p>Duties Performed</p> <p><input type="text"/></p>

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:

Contract with CCC for emergency beds.

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 Costa County.

Sign Name:

Date:

10/7/15

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.

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Council on Homelessness Attendance Roster 2017

	Seat Name	Appointee	Affiliation	Jan	Feb	Mar	Apr	May	June	July
1.	Behavioral Health Representative	Miguel Hidalgo-Barnes, PsyD	Program Manger, Hume Center	-	-	-	√	√	√	√
2.	CoC/ESG Program Grantee	John Eckstrom	Chief Executive Officer, SHELTER, Inc.	-	-	-	√	X	√	√
3.	Community Member Seat #1	Teri House	CDBG Consultant, City of Antioch	√	√	√	√	√	√	√
4.	Community Member Seat #2	Gary Kingsbury	New Life Dream Center	√	√	X	√	√	√	√
5.	Community Member Seat #3	Cecelia McCloy	Business person	-	-	-	√	√	√	√
6.	Consumer/Consumer Advocate	Stephanie Batchelor	Former Consumer	-	-	-	X	√	√	X
7.	Education and Vocational Services Representative	Alejandra Chamberlain	Contra Costa County Office of Education	√	√	√	√	X	√	√
8.	Emergency Solutions Grants Representative	Gabriel Lemus	CDBG Program Planner, Contra Costa County	√	√	√	√	√	√	√
9.	Faith Community Representative	Doug Leich	Multi-Faith ACTION Coalition	-	-	-	√	√	√	√
10.	Government Seat #1	Anne Struthers	Homeless Manager, Contra Costa Employment and Human Services	-	-	-	√	√	√	√
11.	Government Seat #2	Brenda Kain	Community Services Program Manager, City of Concord	-	-	-	√	√	√	X
12.	Health Care Representative	John Barclay, RN	Director of Community Based Services, Contra Costa Health Plan	-	-	-	√	√	√	X
13.	Homeless Housing Provider	Dan Sawislak	Executive Director, Resources for Community Development	X	X	√	X	√	√	X
14.	Philanthropy Representative	VACANT	-	-	-	-	-	-	-	-
15.	Public Housing Authority	Joseph Villarreal	Executive Director, Housing Authority of Contra Costa County	-	-	-	X	X	√	√
16.	Public Safety Representative	Diane Aguinaga	Captain, Police Department, City of Antioch	√	√	√	X	√	√	X
17.	Veteran Administration Representative	VACANT	-	X	X	-	-	-	-	-
18.	Consumer/Consumer Advocate - Alternate **	VACANT	-	-	-	-	-	-	-	-

√: Present X: Absent -: Seat Not Filled





Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE - Special Meeting

4.

Meeting Date: 07/31/2017

Subject: Draft Response to Civil Grand Jury Report No. 1703, "Mental Health Services for At-Risk Children in Contra Costa County"

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: N/A

Referral Name: N/A

Presenter: Cynthia Belon, Behavioral Health
Director

Contact: Enid Mendoza, (925)
335-1039

Referral History:

On May 11, 2017, the 2016/17 Civil Grand Jury filed the above referenced report. On June 13, 2017, the Board of Supervisors received this report and forwarded it to the County Administrator's Office for response. This action directed the appropriate staff to review the report and provide the Board of Supervisors with an appropriate response so that the Clerk of the Board can forward that response to the Superior Court no later than August 9, 2017 (90 days).

Referral Update:

Since the June 13, 2017 Board meeting, the County Administrator's Office has worked closely with Health Services Behavioral Health staff to prepare responses to this civil grand jury report.

At their July 11, 2017 meeting, the Mental Health Commission received a brief report from the County Administrator's Office clarifying County processes for responding to civil grand jury reports. At this meeting the Commission voted to provide feedback to the Behavioral Health Division of Health Services for consideration in the Department's responses.

Recommendation(s)/Next Step(s):

ACCEPT the draft response to Civil Grand Jury Report No. 1703, entitled "Mental Health Services for At-Risk Children in Contra Costa County" and DIRECT staff to forward the response to the Board of Supervisors for approval at their August 8, 2017 meeting.

Attachments

Grand Jury Report No. 1703 Draft BOS Response for F&HS

Grand Jury Report No. 1703



**CONTRA COSTA COUNTY CIVIL GRAND JURY REPORT NO. 1703
"Mental Health Services for At-Risk Children in Contra Costa County"**

BOARD OF SUPERVISORS' RESPONSE

FINDINGS – California Penal Code Section 933.05(a) requires a response to the designated findings of the Grand Jury.

F1. The County provides timely and consistent mental health services to detained youth in Juvenile Hall, CSEC victims, and children in domestic violence and sexual abuse situations.

Response: The respondent agrees with the finding. The County's Probation and Health Services departments work collaboratively to provide a high level of Mental Health services to the youth in the Juvenile Justice system including Juvenile Hall and the Orin Allen Youth Facility.

F2. Under the terms of the Katie A. requirements, upper and middle management levels of CFS and BHS have started to coordinate their efforts.

Response: The respondent disagrees wholly with the finding. Since about 1996, the Behavioral Health Division and Child and Family Services Bureau have collaborated on children's mental health services in a comprehensive way. Katie A. and the implementation of Continuum of Care Reform have contributed to a more coordinated relationship since Health Services and Employment and Human Services department staff meet on a weekly basis and often meet more than once a week.

F3. Many at-risk children are not receiving mental health treatment for several weeks to several months after the County assesses their mental-health needs.

Response: The respondent disagrees partially with the finding. Children presenting at the Regional Clinics are seen within eight to thirteen days for their first appointment with a Mental Health Clinical Specialist that provides comprehensive assessment and treatment. The County recognizes challenges with the availability of child psychiatrists and delays may occur with the medical treatment and medication support of the child.

F4. Children's Mental Health Services estimates that the County needs an additional six psychiatrists for its three clinics.

Response: The respondent disagrees wholly with the finding. Further analysis is required before Children's Mental Health Services can provide a current estimate of the number of additional psychiatrists needed for its three clinics.

F5. County salaries for psychiatrists are not competitive with private practice.

Response: The respondent agrees with the finding. In general, private sector practices offer more competitive salaries than public agencies.

F6. The shortage of psychiatrists causes delays in the diagnosis and treatment of medium to severely mentally ill children.

Response: The respondent disagrees partially with the finding. Shortage of psychiatrists may delay the medical treatment and medication support of the child. However, children are assessed and diagnosed to be seen for outpatient therapy by a Mental Health Clinical Specialist within eight to thirteen days.

F7. West County clinic, which has the most medium to severe patients, also has the highest patient to therapist ratio.

Response: The respondent disagrees wholly with the finding. Caseloads are balanced across the clinics. West County has a large number of contractors with open cases. These are cases that are not assigned to clinic staff.

F8. The 85 County Clinical Staff, who treat medium to severely mentally ill children, are not equitably distributed among the three clinics based on workload.

Response: The respondent disagrees wholly with the finding. Assignment of therapists across the County's regions is balanced. The numbers cited in the report are in error. Central County is listed as having more than forty clinicians on staff. The Central County Children's Clinic has 13 FTE therapists on staff.

F9. Twenty percent of the CBOs and 68% of the individual private therapists are not available for appointments.

Response: The respondent disagrees wholly with the finding. Only CBOs and Network Providers that are available for appointments are referred.

F10. BHS liaisons are not provided with current information about the availability of CBOs and private therapists for appointments.

Response: The respondent disagrees wholly with the finding. Liaisons operate with the most recent information available, as provided by surveys to private therapists and the expectation that CBOs notify liaisons of any availability changes. Behavioral Health liaisons follow the same protocol as Mental Health Access by providing three potential clinician referrals to each beneficiary. The County is not aware of issues with CBO's and private therapist's lack of availability and this is a process that is reviewed annually by the state.

RECOMMENDATIONS - California Penal Code Section 933.05(b) requires a response to the designated recommendations of the Grand Jury.

R1. The Board of Supervisors should consider identifying funds to add six psychiatrists at the three regional mental health clinics.

Response: The recommendation will not be implemented because it is not warranted. The Board of Supervisors reviews staffing levels and budget recommendations annually through budget processes. Throughout the year, County departments re-evaluate staffing and funding levels to determine whether additional positions are needed. At this time, the County has not identified a need to add six additional psychiatrist positions. However, there are currently four psychiatrist vacancies that the County is working to fill.

R2. The Board of Supervisors should consider directing Human Resources to review the compensation packages for County psychiatrists to ensure their compensation packages are competitive compared to the private market.

Response: The recommendation will not be implemented because it is not reasonable. The County's psychiatrist compensation packages can be compared with other county psychiatrists; however, the County cannot compete with the private market. Therefore, using private market compensation packages will not provide reasonable benchmarks. The County is currently in negotiations with Physicians' and Dentists' Organization of Contra Costa, which includes a review of benefits and wages for all represented classifications, including psychiatrists.

R3. The Board of Supervisors should consider directing BHS to redeploy therapists with a view to a more equitable ratio of children per therapist among the County's three mental health clinics.

Response: The recommendation has been implemented. Clinical staff are fairly and evenly distributed across the regional clinics with equitable ratios of children per therapist.

R4. The Board of Supervisors should consider identifying funds to enable BHS to review and improve systems related to the real time availability of CBOs and individual private therapists for mental health service appointments.

Response: The recommendation will not be implemented because it is not reasonable. The County is not aware of the existence of a real time tool to support the recommended effort. However, the County has processes in place to maintain current information on the availability of CBOs and individual private therapists.

R5. The Board of Supervisors should consider directing BHS to monitor and report on the wait times for mental health treatment for at-risk children.

Response: The recommendation has been implemented. The Behavioral Health Division is required by the State Department of Health Care Services to monitor and report on the timeliness of mental health treatment for at-risk children.

**A REPORT BY
THE 2016-2017 CONTRA COSTA COUNTY GRAND JURY**
725 Court Street
Martinez, California 94553

Report 1703

Mental Health Services for At-Risk Children in Contra Costa County

APPROVED BY THE GRAND JURY:

Date: _____

5/11/17



JIM MELLANDER
GRAND JURY FOREPERSON

ACCEPTED FOR FILING:

Date: _____

May 19, 2017



JOHN T. LAETTNER
JUDGE OF THE SUPERIOR COURT

Contra Costa County Grand Jury Report 1703

Mental Health Services for At-Risk Children in Contra Costa County

TO: County Board of Supervisors, Behavioral Health Services

SUMMARY

The Grand Jury conducted a detailed investigation concerning the County's delivery of mental health services to at-risk children ("At-Risk Children"), which is defined as foster children or those in danger of becoming foster children, Commercial Sexually Exploited Children victims (CSEC), youth detained in Juvenile Hall, and children in domestic violence or sexual abuse situations. Over the course of a seven-month investigation, the Grand Jury found that at-risk children are not receiving timely access to mental health treatment. Several factors were preventing timely access, all of which are within the control of Behavioral Health Services and its subdivision Children's Mental Health Services. The Board of Supervisors should consider identifying funds to provide timely treatment for children.

METHODOLOGY

The Grand Jury researched the statutes, agreements and regulations on mental health services for children that pertain to the County. It also researched official reports from State and County agencies, and conducted numerous interviews with County personnel who are involved in the delivery of mental health services.

BACKGROUND

This Grand Jury conducted a detailed investigation of mental health services for at-risk children in Contra Costa County. For purposes of this investigation, the Grand Jury defined at-risk children as:

- Foster children or those in danger of becoming foster children
- Commercial Sexual Exploitation of Children (CSEC) victims
- Youth detained in Juvenile Hall
- Children who have experienced domestic violence and sexual abuse.

The Mental Health Commission White Paper

The Mental Health Commission (MHC), an advisory body appointed by the Board of Supervisors to serve as the watchdog group in the County for mental health services, issued a white paper in April 2016 *“to encourage discussion around the current crisis in the county public mental health care system and deficits in the county mental health budget process that contribute to this crisis.”*

While the white paper was issued by MHC, Behavioral Health Services (BHS) assisted MHC with the data and the contents of the paper. The paper describes key points that are pertinent to at-risk children:

“The wake-up call of the crisis at Psychiatric Emergency Services (PES) that points to an impacted system that is unable to provide the right treatment at the right moment in time and is therefore struggling to truly meet the needs of people with a serious mental illness,”

“The compromised ability of... Child/Adolescent Clinics to meet the needs of patients due to understaffing as evidenced by three to four months wait times and a migration of patients to PES for intervention that is not meant to be a stand-in for treatment,”

“The underlying theme of inadequate staffing levels due to the inability of treatment facilities to attract and keep high quality psychiatrists and nurses because of uncompetitive compensation and such practices as closing of lists,”

“The underlying theme of dedicated, quality staff struggling to offer excellent care but undercut by budgets that are generated by a formulaic, top down process rather than a process that builds up a budget from program needs.”

The Katie A. Requirements

In delivering mental health services, the County must comply with the terms of the *Katie A.* requirements. Katie A. was the lead plaintiff in a multiple-plaintiff lawsuit filed against Los Angeles County and the State of California in 2002. The lawsuit alleged that significant gaps existed in mental health services provided to children in the foster care system. By the age of 14, Katie A. had been shuffled through 37 foster homes and had endured 19 confinements in psychiatric hospitals.

Los Angeles County settled with the plaintiffs in 2003. The State of California agreed to the following *Katie A.* child definition and mental health service requirements in 2011:

Children who are in or at risk of entering foster care will be identified as the “Katie A. subclass.” A child will be part of the subclass if wraparound or specialized services are being considered for the child, or the child has been hospitalized three times in the past 24 months for behavioral reasons or is currently hospitalized for a behavioral issue.

Pursuant to this agreement, California counties must adhere to a protocol, called a “core practice model,” for screening and treating foster children. In accordance with this protocol, children may be eligible for the following services:

- Intensive Care Coordination (ICC)
- Intensive Home-Based Services (IHBS)
- Therapeutic Foster Care in specially-trained foster homes.

The County hired several coordinators and appointed a *Katie A.* specialist manager to handle the new protocol.

DISCUSSION

The Grand Jury used the new *Katie A.* requirements and the MHC white paper as starting points to investigate Contra Costa County’s delivery of mental health services to at-risk children.

Youth confined in Juvenile Hall receive a consistent and well-regulated package of children’s mental health services from the County since these children are in a controlled confinement. Of the 110 youth currently at the Hall (some of whom are CSEC victims), 30% have been identified as having mental health problems. BHS has assigned three County clinicians and a program manager to work exclusively at the Hall to provide treatment, which involves medication and therapy. All three therapists are grant-funded, and the grants require regular data reports on the outcome of the treatments.

CSEC victims and children in domestic violence and sexual abuse situations are sometimes discovered by police responding to a complaint. The police refer the children to the Victim Advocates in the District Attorney’s Office. After securing the child in a safe environment, the advocate arranges for the child to receive therapy so that the child can better assist in the legal prosecution of their abusers. BHS is not usually involved in this process. Rather, the Victim Advocate arranges for the victim to receive treatment from a private therapist or psychiatrist. This treatment is funded by the State Victim Compensation Fund and continues for the months or years that the victim needs to recover. Despite receiving mental-health treatment, some CSEC victims are reluctant to testify against their pimp abusers.

An estimated 85-90% of foster children need some form of mental health services. Given this statistic, it is not surprising that a significant component of the estimated 7,000-plus children in the County who are serviced for mental health annually are foster children, estimated at over 1,700, or those who are in danger of becoming foster children. Only 300 of these children currently belong to the “*Katie A.* subclass.” The County’s compliance in the *Katie A.* requirements is a work in progress. Satisfactory

compliance depends upon skilled coordination between the social workers in Children and Family Services (CFS) and the clinicians at BHS.

Children who may need mental health services are generally assessed and evaluated within 7-10 days. However, children wait much longer, weeks or months, to receive treatment.

After assessment and evaluation, the social workers at CFS arrange for treatment for the child client through the BHS liaisons. The liaisons provide the social workers and child guardians with three referrals of available psychiatrists or therapists from their database. The social workers or guardians call these mental health professionals to schedule treatment. Oftentimes, the social workers or guardians find that the three referrals they have been given by the BHS liaisons are not available. Then they must go back to the liaisons to arrange for another set of three referrals. This is the cause of many delays. The CFS social workers state that the child has an average waiting time for treatment of three months and the BHS liaisons state that the average is only 4 to 6 weeks. These two sets of County workers are working from different perspectives and from different calendar counts. The BHS liaisons also state that they do not have an updated list of unavailable psychiatrists or therapists.

After the screening and evaluation phase, each of the 7,000-plus children are classified into two groups:

1. Medium to severe
2. Mild to medium

The mild to medium cases are scheduled for appointments with psychiatrists and therapists in non-profit community-based organizations (CBOs) and private therapists contracted by BHS. The medium to severe cases are scheduled for appointments with the psychiatrists and therapists in the County's three regional mental health clinics.

There are several factors that prevent children from accessing mental health services in a timely manner. These factors differ depending on whether the child is classified as medium to severe, or mild to medium.

Medium to Severe Cases

The three mental health clinics are understaffed in terms of psychiatrists, the doctors who diagnose the children and prescribe medication for them when appropriate. Children's Mental Health Services estimates it needs to hire six more psychiatrists to handle the workload and resolve the inequitable distribution among the regional clinics. The County pays \$30-50,000 less than what psychiatrists can earn in private practice.

Table 1 shows the distribution of the medium to severe cases assigned to the three clinics and the corresponding distribution of psychiatrists in those three clinics.

TABLE 1

	Antioch	Concord	West County	TOTAL
Children	630	740	800	2170
Psychiatrists*	2.2	3.5	1.3	7
Ratio	286.4	211.4	615.4	310

Note: * Full time equivalent

As shown on Table 2, the distribution of 85 County therapists across the three clinics is inequitable relative to the distribution of medium to severe mental cases.

TABLE 2

	Antioch	Concord	West County	TOTAL
Children	630	740	800	2170
Therapists	22	47	16	85
Ratio	28.6	15.7	50	25.5

The normal management response to such uneven distribution is to reallocate some therapists from Concord, to Antioch and to West County. The Grand Jury found no evidence that any such plan is being considered.

Mild to Medium Cases

BHS contracts with 34 non-profit Community Based Organizations (CBOs) to treat the estimated 5,000 children considered mild to medium cases. Twenty percent of these 34 CBOs were at capacity as of February 2017, meaning that seven of the CBOs had no appointment availability. The BHS liaisons, who provide the appointment referrals for the guardians/patients, do not have current data on the clinicians' availability. Thus, social workers or guardians call to CBOs that have no availability, causing delays in the children's treatment.

In addition to providing mental health treatment through CBOs, BHS can assign the 5,000 children who are diagnosed as mild to medium cases to the over 200 individual private therapists that it contracts with. Like CBOs, these private therapists have limited availability. Table 3 shows the availability of those private therapists in February 2017 and their distribution in the three regions.

TABLE 3

	East County	Central	West County	TOTAL
Private Therapist	60	100	47	207
Available	13	33	21	67
Not available	47 (78%)	67 (67%)	26 (55%)	140 (68%)

Overall, 68% of the private therapists were not available for appointments. Thus, children must wait longer for mental health services.

While no-shows for appointments also contribute to longer wait times, this factor is not under the control of BHS. The tables show what is within the control of BHS and its subdivision that manages treatment delays for at-risk children.

FINDINGS

- F1. The County provides timely and consistent mental health services to detained youth in Juvenile Hall, CSEC victims, and children in domestic violence and sexual abuse situations.
- F2. Under the terms of the *Katie A.* requirements, upper and middle management levels of CFS and BHS have started to coordinate their efforts.
- F3. Many at-risk children are not receiving mental health treatment for several weeks to several months after the County assesses their mental-health needs.
- F4. Children's Mental Health Services estimates that the County needs an additional six psychiatrists for its three clinics.
- F5. County salaries for psychiatrists are not competitive with private practice.
- F6. The shortage of psychiatrists causes delays in the diagnosis and treatment of medium to severe mentally ill children.
- F7. West County clinic, which has the most medium to severe patients, also has the highest patient to therapist ratio.
- F8. The 85 County therapists, who treat medium to severely mentally ill children, are not equitably distributed among the three clinics based on workload.
- F9. Twenty percent of the CBOs and 68% of the individual private therapists are not available for appointments.
- F10. BHS liaisons are not provided with current information about the availability of CBOs and private therapists for appointments.

RECOMMENDATIONS

- R1. The Board of Supervisors should consider identifying funds to add six psychiatrists at the three regional mental health clinics.
- R2. The Board of Supervisors should consider directing Human Resources to review the compensation packages for County psychiatrists to ensure their compensation packages are competitive compared with the private market.

- R3. The Board of Supervisors should consider directing BHS to redeploy therapists with a view to a more equitable ratio of children per therapist among the County's three mental health clinics.
- R4. The Board of Supervisors should consider identifying funds to enable BHS to review and improve systems related to the real time availability of CBOs and individual private therapists for mental health service appointments.
- R5. The Board of Supervisors should consider directing BHS to monitor and report on the wait times for mental health treatment for at-risk children.

REQUIRED RESPONSES

	Findings	Recommendations
Contra Costa County Board of Supervisors	F1 to F10	R1 to R5

These responses must be provided in the format and by the date set forth in the cover letter that accompanies this report. An electronic copy of these responses in the form of a Word document should be sent by e-mail to ctadmin@contracosta.courts.ca.gov and a hard (paper) copy should be sent to:

Civil Grand Jury – Foreperson
725 Court Street
P.O. Box 431
Martinez, CA 94553-0091



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE - Special Meeting

5.

Meeting Date: 07/31/2017
Subject: Youth Services Report Update - ILSP and WDB Programs
Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,
Department: County Administrator
Referral No.: 93
Referral Name: Youth Services Report
Presenter: Kathy Gallagher, EHSD Director **Contact:** Enid Mendoza, (925) 335-1039

Referral History:

An annual update of the Independent Living Schools Program administered by the Employment and Human Services Department (EHSD) was first referred to the Family and Human Services Committee by the Board of Supervisors on October 17, 2006.

On June 7, 2016, EHSD requested, and the Board approved, expanding Referral #93 – Independent Living Skills Program to include additional youth services updates and retitling the referral to “Youth Services Report”, so that the department can include reports on all youth services offered in the community through EHSD, including Workforce Investment and Opportunity Act (WIOA) and CalWorks youth services.

The last annual report on this referral was approved by the Board at their November 8, 2016 meeting.

Referral Update:

Please see the attached reports from the Employment and Human Services Department, which includes Independent Living Skills Program and Workforce Development Board Youth Services updates.

Recommendation(s)/Next Step(s):

ACCEPT the reports from the Employment and Human Services Department on youth services, which includes updates on the Independent Living Skills Program, and DIRECT staff to forward the reports to the Board of Supervisors for their information.

Fiscal Impact (if any):

This is an informational report; there is no fiscal impact.

Attachments

Youth Services Report - Independent Living Skills Program

Youth Services Report - WDB Programs

Youth Services Presentation

**EMPLOYMENT AND HUMAN SERVICES
CONTRA COSTA COUNTY**

TO: Family and Human Services' Committee Members **DATE:** July 31, 2017
David Twa, Contra Costa County Administrator

FR: Kathy Gallagher, Director, Employment and Human Services Department
Kathy Marsh, Interim Director, Children and Family Services Bureau

SUBJECT: Independent Living Skills Program (ILSP)

RECOMMENDATION

Accept this report from the Employment and Human Services Department; and continue to support the Children and Family Services Bureau and its efforts to serve foster youth in the ILSP program.

BACKGROUND

The Omnibus Budget Reconciliation Act of 1993 permanently authorized the Independent Living Program (ILP) which offers training, services and programs to assist current and former foster youth achieve self-sufficiency prior to and after leaving the foster care system. The Chafee Foster Care Independence Program (CFCIP) Act of 1999 (Public Law 106-169), amended Section 477 of the Social Security Act providing more flexibility in the use of ILP funding (see 42 USC 677).

In California, County Welfare Departments have the flexibility to design services to meet a wide range of individual needs and circumstances for current and former foster youth. Every California County operates an ILP. Youth participation is voluntary. Overwhelming evidence supports the fact that youth leaving foster care are in need of greater support as they transition into adulthood. Foster youth nationwide are found to have an increased likelihood of early parenting, instability in relationships, not graduating from high school, lower school performance, increased health and mental health concerns, homelessness, incarceration, substance abuse, and a higher rate of unemployment.

In September 2010, Governor Schwarzenegger signed into law Assembly Bill 12, the California Fostering Connections to Success Act. AB12 took effect on January 1, 2012 and allows young adults to be provided transitional support to age 21 and ensure that they are given the necessary skills to survive on their own. A young adult must be in a high school or a GED program, enrolled in a college or vocational program, employed at least 80 hours per month, participating in a program designed to remove barriers to employment, or unable to work/attend school because of a medical condition. The young adult must also live in an approved placement and sign a mutual agreement with their case worker, Supervised

Independent Living Placement (SILP). With this legislation, young adults will receive the support of the foster care system to age 21, extending the time to work with young adults in foster care with more parity in assistance provided to children from intact families.

PROGRESS TO DATE:

For the past twenty nine years, the Children and Family Services Bureau of the Employment and Human Services Department has provided services through the Independent Living Skills Program (ILSP). This program educates and supports youth in a wide variety of areas designed to inspire a successful transition to adulthood, and empowers foster youth to become responsible adults. Staff working in the program are Contra Costa County employees. Under the direction of a Program Coordinator and an Assistant Coordinator, the five program specialists continue to provide services to Contra Costa County foster youth, out of county youth and probation youth, while embracing the CCC CFS ILSP Vision statement:

“Our vision is to move every youth from stagnation to motivation, from limitations to possibilities; from dependency to self-sufficiency; from the past to the future.”

As a result of their successful approach and accomplishments, the Contra Costa County CFS Independent Living Skills Program has received recognition throughout the State of California and nation for its performance and youth services. The program continues to emphasize and promote positive youth development to support young people in developing a sense of competence, usefulness, belonging and empowerment. ILSP is funded by the federal Title IV-E and state dollars.

ILSP offers a variety of skill building trainings and youth engagement activities to promote self-sufficiency in foster youth. Development activities and programs include, but are not limited to, employment preparation, vocational training support, education resources, financial literacy and housing assistance. ILSP spotlights four core areas called the Four Pillars when providing hands-on, experiential learning experiences. The Four Pillars consist of Education, Employment, Housing and Well Being. Workshops and events are provided in the East, West, and Central parts of the county to attract more youth participation and to provide a shorter travel distance for care providers and youth attending weekly workshops and events.

This past fiscal year, six hundred and ten (610) current and former foster youth were served both individually and in group settings (i.e. workshops, classes, etc.) One hundred forty seven (147) of these youth are deemed “Non-Minor Dependents,” and have chosen to remain in foster care under Assembly Bill 12.

ILSP PILLAR - HOUSING

Transitional housing for foster youth and emancipated young adults continues to be delivered in Contra Costa County. Under the Transitional Housing Placement Program (THPP), two providers serve the in-care foster youth age 16-18. Under the Transitional Housing Program

Plus (THP+), three providers serve emancipated youth, aged 18-24. The emergence of Assembly Bill 12 produced an additional transitional housing opportunity called Transitional Housing Program Plus Foster Care (THP+ FC), which has 5 providers. This program serves young adults, ages 18-21 that have opted to remain in foster care as Non Minor Dependents under AB12. Housing continues to be a significant challenge for young adults as they emancipate. The Housing Continuum that Children and Family Services created has improved the numbers of young adults being served, but now that AB 12 has been implemented, some of the existing providers are opting to serve the Non Minor Dependent population exclusively, creating an increased need for housing to serve those young adults opting to emancipate from foster care at age 18 or 19.

ILSP maintains its efforts to develop housing options in the community through collaborations with community based organizations, faith based organizations and individual citizens whom are willing to offer support (i.e. room for rent). The constant goal in this area is to develop more permanent housing options for foster youth. For example, ILSP has established connections with the Housing Authority and receive Section 8 lists when they become available so that ILSP participants can apply. Our ILSP staff assist youth in applying for these opportunities. Additionally, the contracted providers, such as the County's Homeless Programs and First Place for Youth, work diligently to develop more permanent housing options and advocate for improved housing options for foster youth. This past fiscal year we began to refer youth to Safe Time who provides host homes to potential applicants.

ILSP PILLAR- EMPLOYMENT

ILSP has been partnering with the Workforce Development Board of Contra Costa County to deliver employment services to eligible foster youth through the Workforce Innovation and Opportunity Act. ILSP refers youth to participate in the Earn and Learn Summer Employment Program. ILSP continues to cultivate working relationships with the three contracted agencies providing services through the Workforce Investment Opportunity Act (WIOA). Our work includes referring 20% of the foster care population to both the "In School and Out of School" programs throughout the school year. The case managers for the contracted agencies present at ILSP staff meetings and ILSP workshops in order to recruit youth and disseminate information for services available to them. This collaboration has proven to be beneficial to our program and program participants and the number of foster youth served with WIOA have been steadily increasing because of our partnership.

The East County Youth in Transition Committee comprised of Uplift Family Services, The Contra Costa County Office of Education Foster Youth Services and The Contra Costa County Children and Family Services' Independent Living Skills Program has been partnering with the Los Medanos Community Healthcare District since 2011 to provide summer internships for youth transitioning out of the foster care system. The Internship is designed to provide valuable employment skills to the youth participants. Youth work in groups and learn public speaking skills and they conduct research on health care issues identified by the Los Medanos

Community Healthcare District. This summer will be the seventh year of this award winning internship.

Los Medanos Community Healthcare District's Summer Intern Program projects include:

- 2011 - Healthy Eating Habits and Fitness: Pittsburg Seafood Festival
- 2012 - Under Age Smoking: Curbing teenage smoking
- 2013 - A Battle for Breathing: Air Pollution, Lung Cancer, and Asthma in the Community
- 2014 - The Heritage Project: Bridging the Age Gap between youth and senior citizens
- 2015 - Healthy Youth Council: Impacting Our Community to Stop Diabetes
- 2016 - Youth Empowerment Group: The Trends of E-cigarettes and Cigarettes usage

LMCHD's Summer Intern Program achieved the following awards and recognitions:

- 2013 – Exceptional Public Outreach & Advocacy Award from California Special Districts Association
- 2013 - Certificate of Recognition for Public Outreach & Advocacy from Assemblyman Jim Frazier
- 2013 - Letter of Recognition for Public Outreach & Advocacy from Assemblywoman Susan Bonilla
- 2013 - Letter of Recognition for Public Outreach & Advocacy from Local Agency Formation Commission (LAFCO)
- 2014 - Innovative Program of the Year Award from California Special Districts Association
- 2015 - Exceptional Public Outreach & Advocacy award for small districts

ILSP PILLAR- EDUCATION

It is well documented that foster youth are under-educated, lack basic educational skills and often drop out of high school. ILSP supports and encourages foster youth to stay in school through curriculum that motivates youth to strive towards graduation, pursue a higher education and embrace learning as a lifelong process. Our collaboration with the County Office of Education and Mt. Diablo Foster Youth Services allows us to partner in order to get resources and support to youth in need. This past year, one hundred and seven participants graduated from high school and eleven graduated from college. All of the graduates were honored at the 29th Annual ILSP Recognition Event where fifty-three scholarships totaling over seventy thousand dollars, were awarded.

ILSP provides the following trainings and events to foster youth with a concentration on Senior Youth, to better prepare them for post-secondary education:

- Scholarship Workshop
- Financial Aid Workshop
- Preparing Personal Statements

- Navigating the Community College System
- College Campus Tours
- Understanding the FAFSA, Chafee Grant and Board of Governor's Fee Waiver
- Senior Night Workshop
- College Luncheon
- Understanding the UC and the CSU system

ILSP has established specialized relationships and collaborations with the following agencies and colleges to provide a seamless transition upon emancipation from foster care:

- Los Medanos Community College:
A "Student Connection Team" was developed to provide youth with a direct contact person within each department on campus, giving them a person to connect with while navigating the community college system. ILSP East County Life Skills trainings are held on campus once per week, exposing youth to the college environment. Tours and information about the various programs and areas of study at Los Medanos Community College are included as a part of the Life Skills Curriculum. Presentations from departments are held as often as possible.
- Job Corps – Treasure Island:
ILSP continues to maintain a relationship with Job Corps, one of the largest career technical training and education programs in the nation for students ages 16 through 24. Job Corps provides hands on training in careers such as the Culinary Arts, Construction, Healthcare, Security and Protective Services. Housing, meals and basic medical care are afforded to our youth through the course of the program. ILSP is offered site visits for youth who are interested in enrolling at Job Corps and priority opportunities have also been made available to ILSP youth. Under AB12, this is an approved Supervised Independent Living Placement (SILP) for our young adults.
- Sierra College:
The Sierra College provides foster youth various programs, inclusive of an on-campus housing option. Programs such as the TRiO program, Umoja, Puente, First Year Experience, EOPS and CARE have proven to benefit ILSP youth. Our continued relationship has nurtured a priority enrollment and registration into these programs. Several times per year, ILSP takes appropriate youth to the campus for tours, assessments and introductions of the services available to them. College Counselors are on site during these presentations and financial relationships are in place to assist our youth with securing housing/dorm deposits should they choose to attend Sierra College. Under AB12, this is also an approved Supervised Independent Living Placement (SILP) for our youth.

ILSP has developed relationships with the following agencies and organizations to better serve our foster youth and to support programs and events:

- **The Assistance League of Diablo Valley:**
 ILSP has collaborated with the Assistance League of Diablo Valley to develop a Senior Sponsorship Program as well as various scholarships for our youth.
 The Senior Sponsorship Program is designed to financially assist graduating seniors with the expenses for typical events during their Senior Year in High School. The program funds such things as senior pictures, yearbooks, prom tickets, cap/gown expenses, graduation announcements, as well as laptop/tablet purchases. This past year, 25 ILSP participants were sponsored \$400.00 each totaling \$10,000.00. In addition, the Assistance League provides each emancipating youth with an “On Your Way” Duffle bag filled with various household products and basic necessities to assist them as they progress into adulthood.

- **Volunteer Emergency Services Team In Action, Inc. (VESTIA):**
 VESTIA has served as a fiduciary agent for ILSP donations. In addition, this past year, the VESTIA Board sponsored a part of the expenses for the 29th Annual Recognition Event held to honor graduating seniors. The VESTIA scholarship committee awarded eleven (11) scholarships totaling \$11,000.00 that evening. We receive items for our onsite Food Pantry, donated clothing for our onsite clothes closet and school supplies for our youth as often as needed.

- **The Orinda Woman’s Club:**
 The Orinda Woman’s Club has provided scholarships annually to our graduating seniors. This past year, 8 youth benefited from a total of \$8,000.00 in scholarships towards their college education.

- **Honorable Judge Lois Haight Foster Youth Foundation:**
 In 2001, Honorable Judge Lois Haight established a foundation specifically to serve our population of youth and has since provided hundreds of scholarships to our youth in excess of \$440,000.00. This past June, she presented twenty (25) scholarships totaling \$25,000.00 to seniors of the class of 2017.

- **The Wilhelmina Johnson ILSP Youth Award:**
 Wilhelmina Johnson was an avid youth advocate, social worker and program analyst who dedicated 24 years to Contra Costa County youth and was instrumental in the establishment of Contra Costa County’s Independent Living Skills Program. She believed that every youth deserved a chance regardless of their background. ILSP honors youth who have demonstrated the ability to overcome significant barriers and achieved personal growth with this scholarship each year.

- **Foster A Dream:**
 ILSP collaborates with Foster A Dream to host the annual Holiday Network Event as part of the Well-Being Pillar. In addition, Foster a Dream has provided our youth with

backpacks containing school supplies during our Fall Retreat Kick-off Event. Foster A Dream also provides scholarships to graduating seniors each year.

- **Free Senior Portraits by Suzy Todd Photography:**
Suzy Todd approached ILSP and offered her professional services to ILSP seniors. She wanted to give back and does so by providing seniors with free senior portrait packages valued at \$300 each.
- **The Secret Elves:**
During the Holiday season, ILSP hosts a Holiday Social event for our youth to provide them with donated gifts from the Secret Elves. The Secret Elves have provided gifts that teens are able to enjoy during the holiday season. This past year, The Secret Elves provided each youth a ukulele and lessons on how to play one. In addition, youth were given gift cards to purchase a personal item of their choice.
- **Friends of ILSP:**
“Friends of ILSP” is an informal group of ten members of the Philanthropic and Educational Organization that will provide scholarships and financial assistance to ILSP graduates. This organization is providing scholarship monies to upcoming or former graduates of the Independent Living Skills Program that wish to or are pursuing higher education or certification from a trade school. Applications are accepted throughout the school year and contact by this organization is ongoing. They provide birthday and holiday cards and frequent contact throughout the year to let our young adults know that they are cared for.

ILSP WELL-BEING

Youth in foster care often do not experience childhood in the way most children who live with their families of origin do. They have suffered child abuse and neglect, been removed from their families and many older youth spend the remainder of their childhood moving from home to home. The foster care system is designed to fund board and care and basic needs, but not necessarily extra-curricular activities such as participating in sports, arts, birthday parties, spending the night at friend’s homes, and the like. They are in turn exposed to the sub-culture of foster care. They learn the survival skills needed to cope with placement changes, rejection from resource parents, and the grief of not being with their families. Instead of developing positive social skills, for instance, some are learning to cope with living in a group setting with other foster youth who are struggling with their own issues. ILSP provides activities and supportive services to help encourage positive social development and exposure to typical childhood activities. Through a variety of excursions such as outings to baseball and football games, field trips to beaches, bike riding, ski trips and water rafting, foster youth are able to experience fun activities that a typical teenager might, but are also mentored in developing positive social skills and are further engaged in the ILS program. The State of California Department of Social Services has emphasized the importance of supporting the well-being of foster care and ILSP is the perfect mechanism to provide this intervention. The ILSP staff is trained in an approach

called Positive Youth Development. This approach enables them to engage youth and motivate them to strive to improve their lives and grow into happy and healthy adults.

ILSP - AFTERCARE

Each year, 100-150 foster youth are eligible to age out of foster care at age 18 or 19 years old. If they choose to emancipate out of foster care, then at that point, they are on their own to support themselves. Some foster youth are fortunate to remain with their resource parents or relatives; other youth are able to participate in a Transitional Housing Program, but most of them will struggle once they leave the system. The funds provide supportive services to emancipated foster youth up to age 21 years old. The needs of emancipated youth are severe. They often call in crisis, homeless and in need of basic necessities such as transportation, food and shelter. The Aftercare program provides emancipated foster youth as well as Non Minor Dependent young adults living under AB12 regulations supportive housing, employment, educational, and crisis services.

LEADERSHIP DEVELOPMENT

ILSP promotes the development of leadership in foster youth. Whenever possible, emancipated foster youth are invited to share their experiences with ILSP youth and to facilitate workshops or trainings. In addition, ILSP promotes participation and support of the Contra Costa County California Youth Connection (CYC) chapter. CYC is a statewide advocacy organization specifically geared towards developing leadership in and advocacy skills to engage foster youth with policy makers to improve the foster care system. CYC is mainly responsible for all of the positive legislative changes impacting the child welfare system. Additionally, each year ILSP prepares foster youth to participate in a leadership group called the Speaker's Bureau. These youth are trained in public speaking and work with ILSP to speak to community groups, advocate for legislation at the State Capitol and be the Youth voice in the child welfare system. This past year, our local chapter of CYC received the Local Issue Award for bringing healthy eating awareness to our local group homes and for hosting the Iron Chef Challenge, which paired our participants with care providers who together, prepared a nutritious meal.

SUMMARY/CONCLUSION

Youth who emancipate from foster care are expected to become self-sufficient at age 18 or 19 years old. This entails the ability to maintain stable housing, maintain employment, and maintain one's physical health. Research on the outcomes of emancipated foster youth indicates that this task is difficult for this population. Rates of homelessness for emancipated foster youth have been found to be as high as 42% and housing moves are generally related to poverty and lack of stable family relationships. Foster youth also have high rates of incarceration, especially when they have experienced multiple placements and time in the foster care system.

ILS programs have been implemented by Child Welfare programs in order to help prevent these negative outcomes. The Contra Costa County CFS ILSP has upwards of 800 eligible youth each year and endeavors to provide resources in collaboration with the foster care system. Much of the work of the ILSP Coordinators and staff is spent cultivating collaborative partnerships with community based organizations and other foster youth serving groups. Their expertise in engaging youth and motivating them to stay in school, graduate, and obtain life sustaining employment is critical. This work was acknowledged by the 2014-2015 Contra Costa County Grand Jury, in report 1509, entitled, "The Benefits of the California Connections to Success Act in Contra Costa County." With the Board's continuing support and commitment to the ILS program, foster youth will continue to benefit from quality skill building workshops, events and one on one support. They will continue to acquire better social skill development and improve transitions into adulthood.

Workforce Development Board Family & Human Services Presentation May 2017

WIOA Youth Programs

On July 22, 2014 the Workforce Innovation and Opportunity Act (WIOA) was signed into law. WIOA was implemented on July 1, 2015, replacing the Workforce Investment Act (WIA) of 1998. Key changes under WIOA for serving youth include increasing the minimum percentage of funds to be spent on out-of-school youth from 30% to at least 75%, increased focus on work-based learning and career pathways, extending the out-of-school age limit from 21 to 24 years and streamlining the eligibility process. These changes are consistent with DOL's commitment to delivering high-quality services for disconnected youth and young adults beginning with career exploration and guidance, continuing support for educational attainment, opportunities for skills training in high-demand industries/occupations and culminating with a high quality job along a career pathway or enrollment in post-secondary education.

The Department of Labor (DOL) estimates that nearly 14 percent of 16-24 year olds in this country are not employed or not in school. In many cases, they face additional challenges, including being low-income, homeless, young parents, in foster care or involved in the justice system. These disconnected youth and young adults are twice as likely to live in poverty, three times as likely to not have a high school diploma or its equivalent and three times as likely to be disabled. Disconnected girls and young women are more than three times as likely to have a child as their connected counterparts. Strategies to reach and engage these vulnerable young people are a priority for the Workforce Development Board.

The Workforce Development Board of Contra Costa (WDB) and its Youth Committee issue a Request for Proposals (RFP) every three years. By partnering with Community Based Organizations other Public Agencies and School Districts, the WDB maximizes impact in the communities most in need by leveraging match funding. For instance, WIOA funding in contracts with current service providers Contra Costa County Office of Education/Ryse, Bay Area Community Resources/Opportunity Junction, and Mount Diablo Unified School District is matched dollar for dollar. WIOA funds allocated to youth service providers are used for the following program design areas:

- Outreach, Recruitment, Orientation
- Intake, Eligibility, Registration
- Objective Assessment and Referral
- Individual Service Strategy
- Case Management
- Access to a Range of Services.

It is the intent of the WDB's youth program to connect more young people in Contra Costa County with broader work opportunities, increase work readiness and competitiveness in future employment and build career planning capacity and skills development through various means including post-secondary education. Funded youth providers program designs must include the following 14 required elements:

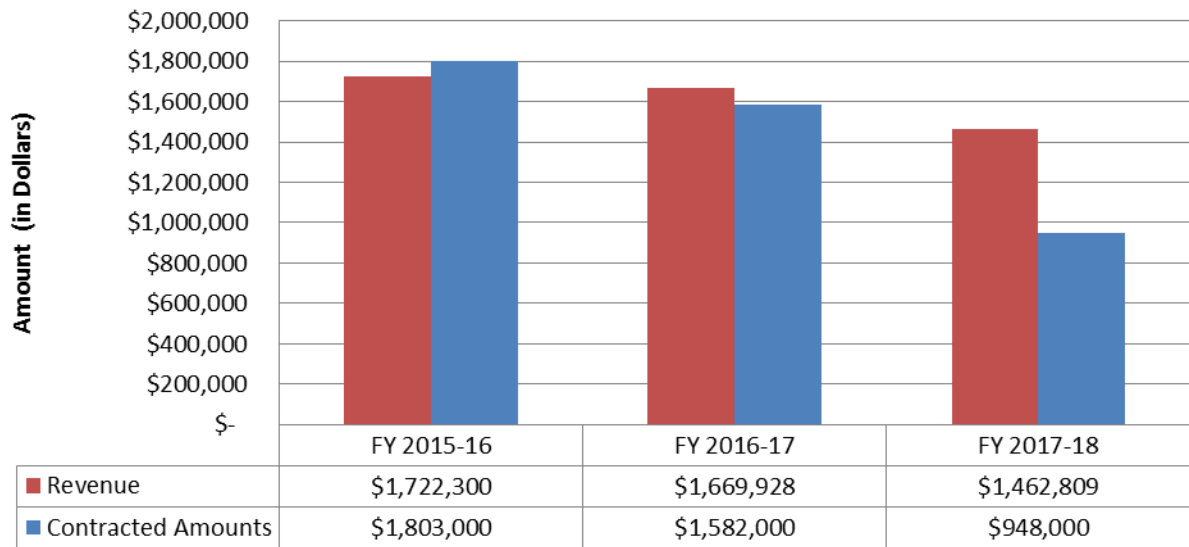
- Tutoring, study skills training
- Alternative secondary school offerings
- Meaningful work experience opportunities
- Occupational skills training
- Education offered concurrently with workforce preparation
- Leadership development opportunities
- Supportive services
- Adult mentoring
- Follow-up services for a minimum 12-month period
- Comprehensive guidance and counseling
- Financial Literacy education
- Entrepreneurial skills training

The WDB's service provider's delivered intensive wrap-around services to 400 youth and young adults in FY 2017/18. For example, 107 of those youth have a disability, 42 are connected to the justice system, 227 are basic skills deficient, 72 are in, or aged out of, Foster Care, 77 are homeless youth and 66 youth who are pregnant or parenting.

The WDB strives to be diversified in our funding for youth programs and has positioned itself to receive financial support from the California Department of Education Career Pathways Trust grants. With that funding, the WDB launched Earn & Learn East Bay, an engagement and recruitment campaign bringing partners throughout Contra Costa County and the East Bay together to expose youth and young adults to local careers and hands-on work experiences. Earn & Learn recognizes the value of collaboration to support our region's economic vitality. This innovative initiative maximizes success for both businesses and youth and has successfully connected thousands of youth to Work-based learning experiences in the community.

WIOA funding has seen a steady decrease over the past 3 program years. For fiscal year 2017-18, significant decreases in funding are expected to impact the WDB's ability to serve the most vulnerable youth in Contra Costa County. The graphic below demonstrates the severe funding reductions that the WDB has already seen in just the youth program, which has resulted in an almost 50% reduction in contracted services. These contracted services are the heart of our youth program.

WIOA Youth Allocation & Contract Reductions



Children & Family Services

Moving the agency in a positive direction with regards to helping families become stronger so they can care for their children, helping family be able to care for children when their parents cannot, and to create and maintain a workforce committed to excellence.



**2016/2017
PROGRAM REPORT
FAMILY AND HUMAN SERVICES' COMMITTEE**

July 31, 2017

The Forward Movement of Children & Family Services

Service Delivery to strengthen families in the community

- Prioritizing Staffing
- Ombudsman specific for CFS & Adult Protective Services Work
- Caregiver Liaison
- Safety Organized Practice (SOP)
- Children's Leadership Team (CLT)
- The Court Unit Workgroup
- The County Culture Workgroup
- Intensive Family Services (IFS)
- Structured Decision Making (SDM)
- Resource Family Approval (RFA)
- Approve Relative Caregiver Funding Option (ARCFO)
- Continuum of Care Reform (CCR)
- Continuous Quality Improvement (CQI)



What is ILSP?

- Programming to support foster youth age 16 to 21 years old to become self-sufficient through skill building, supportive services and positive youth development.
- Funding and services expanded to State and Federal government via the John H. Chafee Foster Care Independence Act in 1999.
- Assembly Bill 12, the California Fostering Connections to Success Act allows young adults to be provided transitional support to age 21 to ensure the necessary skills to survive on their own.



The Independent Living Skills Program

“Our vision is to move every youth
from stagnation to motivation,
from limitations to possibilities;
from dependency to self-sufficiency;
from the past to the FUTURE.”

Who are the Foster Youth Served by ILSP?

- Children who have been removed from their family's custody due to neglect and abuse.
- Children who have not reunified with their family nor have they found a permanent home (i.e. adoption)
- Children who may have grown up in foster care or just entered as adolescents.
- Youth who have a Placement Order through the Juvenile Probation Department at the age of 16.



What is the Need?

Children who emancipate from the foster care system face higher rates of:



- Unemployment
- Lower Educational Attainment
- Incarceration
- Dependence on public assistance
- Substance abuse
- Early parenting
- Homelessness
- Increased Health and Mental Health problems
- Other high-risk behaviors



About The Program

- **Staff consists of an ILSP Coordinator, Assistant Coordinator and 5 Program Specialists**
- **Serves all foster youth from Contra Costa County, including youth from other counties placed in Contra Costa County**
- **ILSP Youth Center opened in 2001**
- **Collaborative Partners include:**
 - CCC Office of Education**
 - The Assistance League of Diablo Valley**
 - CCC Community College District**
 - The Orinda Woman's Club**
 - Wellness City Challenge**
 - Bay Area Community Resources**
 - Job Corps – Treasure Island**
 - The Secret Elves**
 - Suzy Todd Photography**
 - Friends of ILSP Organization**
 - The Los Medanos Community Healthcare District**
 - Honorable Judge Lois Haight Foster Youth Foundation**
 - CCC Workforce Development Board Youth Council – WIOA**
 - Volunteer Emergency Services Team In Action (VESTIA)**
 - Foster A Dream**
 - ARM of Care, Inc**



Programming and Services

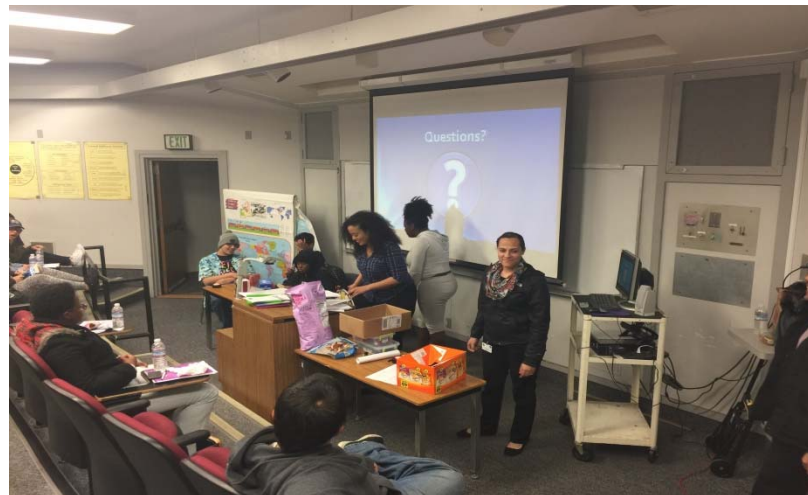
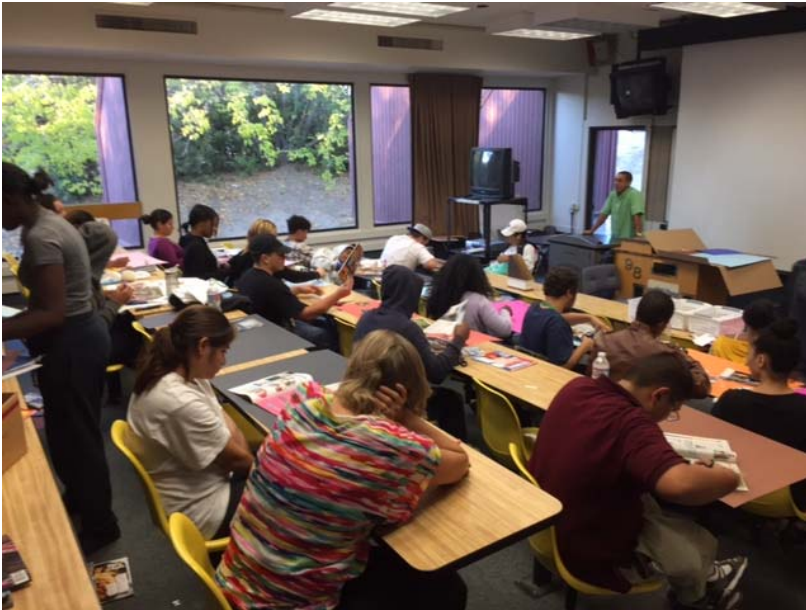
- ILSP spotlights four core areas called “The Four Pillars” when providing hands-on, experiential learning experiences for participants. The Four Pillars consist of Education, Employment, Housing and Well-Being. Workshops are offered in all three regions of the county (East, Central & West) to increase participation.
- Aftercare program for emancipated youth/AB12 youth
- Leadership Development through California Youth Connection (CYC)



2016/2017 Summary

- This past fiscal year, 610 current and former foster youth were served both individually and in group settings (i.e. workshops, classes, etc.)
- 147 of these youth were Non-Minor Dependents
- THP+ has the capacity for 12 emancipated youth and THPP has the capacity for 24 in care youth
- THP+FC is expanding as new providers are becoming certified to offer housing services to our Non Minor Dependent Population. We currently work with six licensed agencies.
- 106 ILSP youth graduated High School in 2017
- 11 graduated college

A Glimpse of ILSP...



Annual Fall Retreat Event



Summer Network Event – WaterWorld



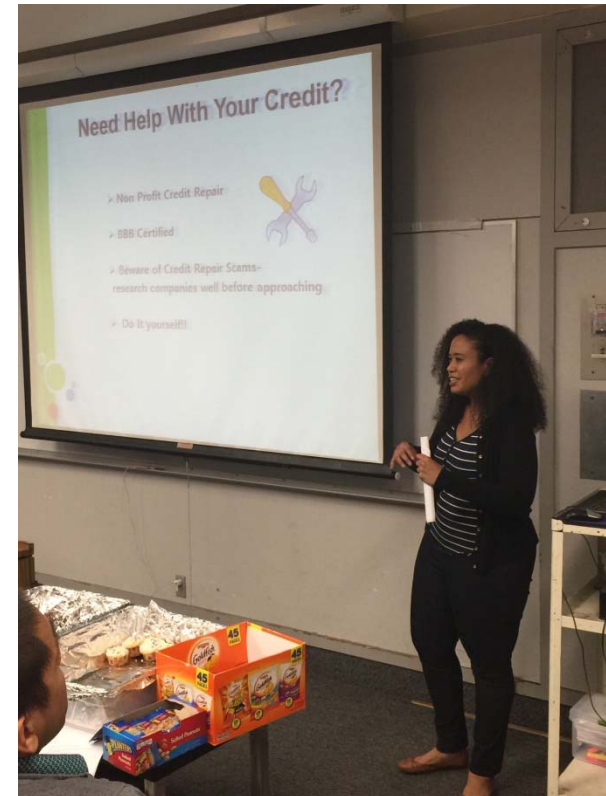
Cooking and Nutrition Workshops

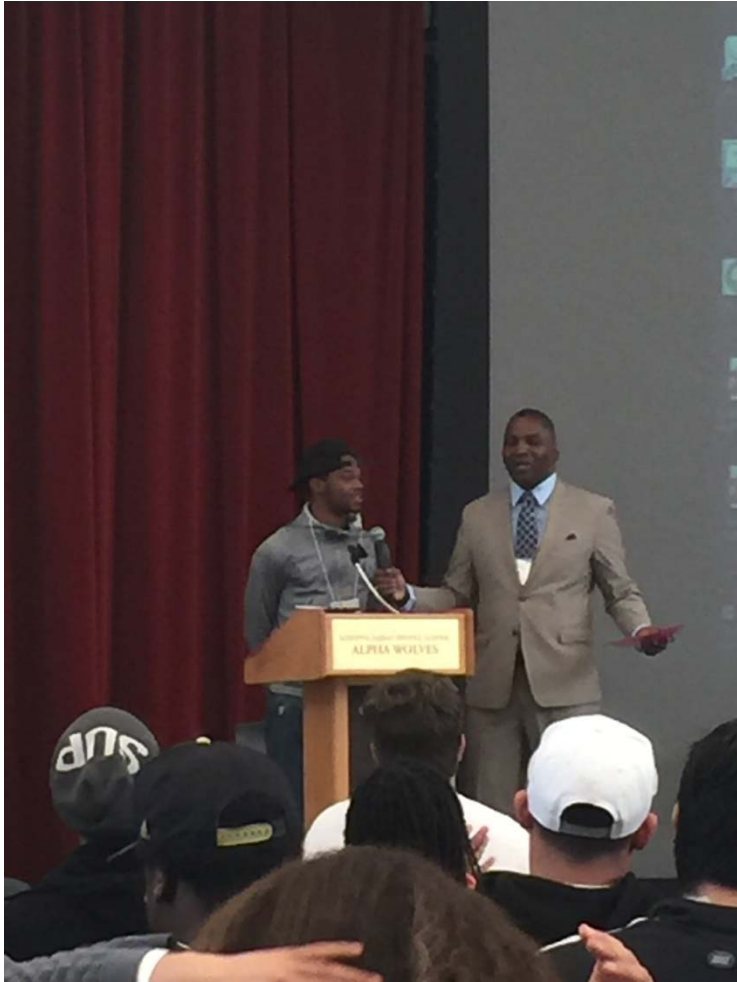


Los Medanos Community College Foster Youth Education Summit

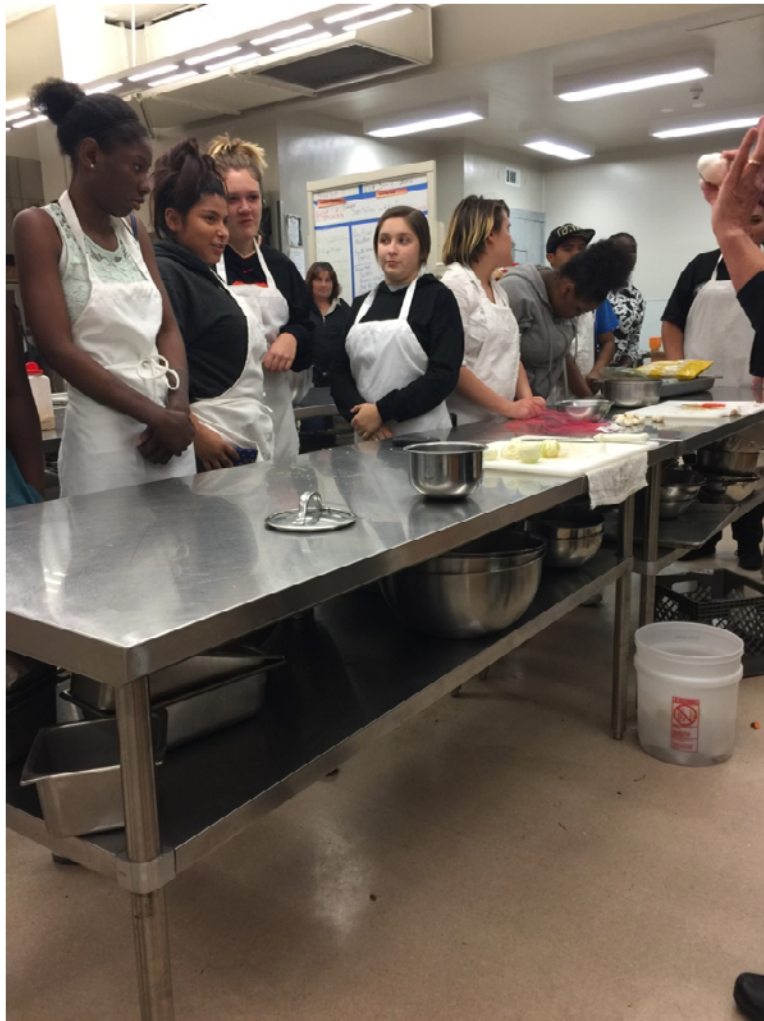


Life Skills Workshops



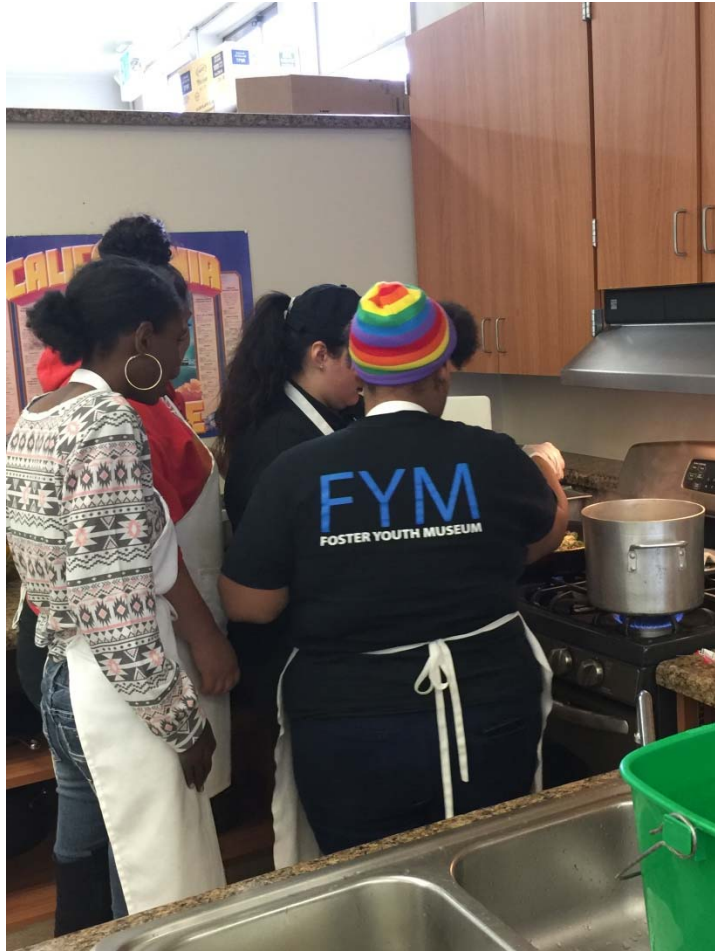






Iron Chef Youth Challenge Event





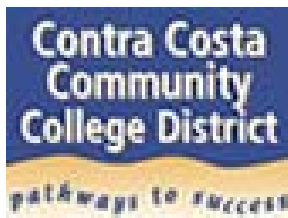
White Water Rafting South Fork American River



Money Management Workshop



College Luncheon Event





Los Medanos Community Healthcare District's Summer Intern Program





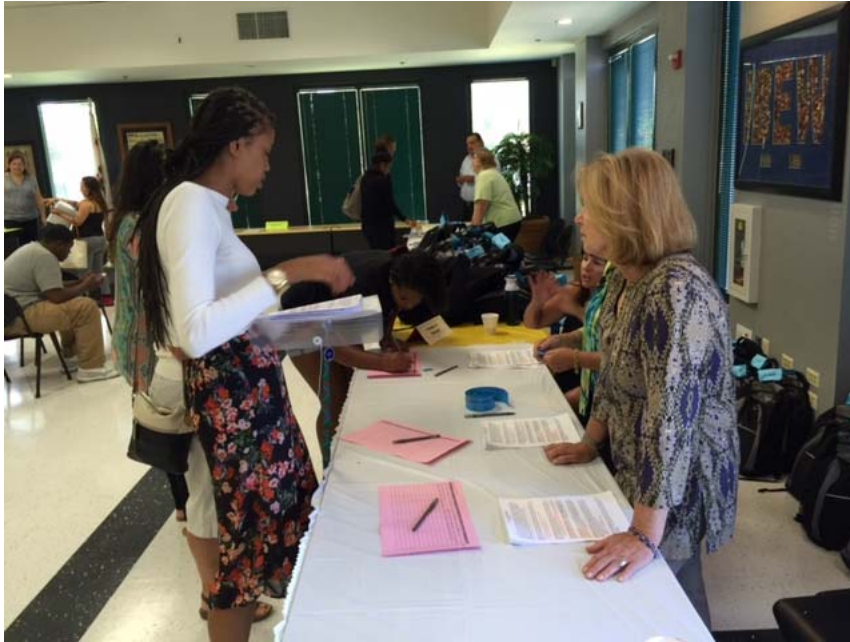
Holiday Network Event



Bear Valley Overnight Ski Trip



ILSP Senior Kick Off Event





Sea Kayak Trip Sausalito to Angel Island

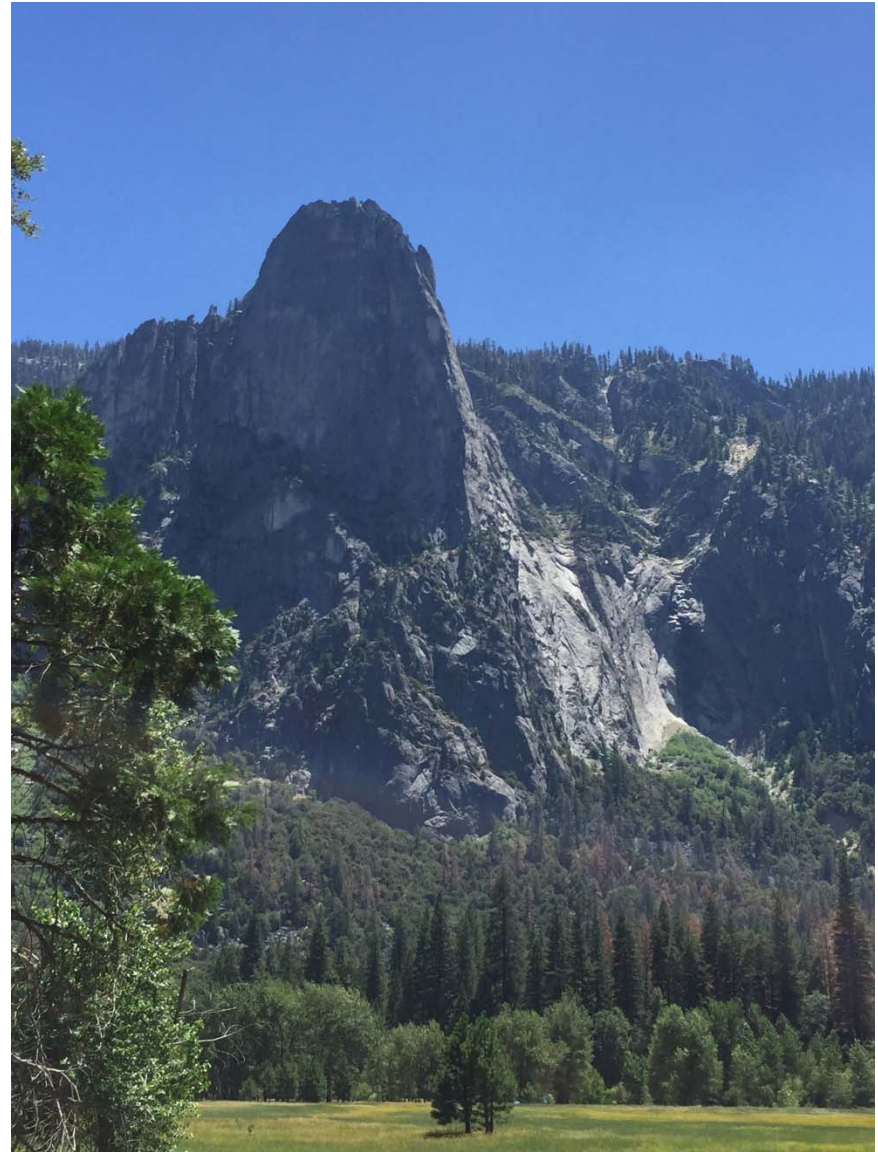




Yosemite Lakes Camping Trip







Annual ILSP Recognition Event



Summary



- In the current economic climate, ILSP plays an even greater role in the lives of foster youth.
- For some emancipated youth, ILSP is the only support they have in times of crisis.
- For youth opting to remain in foster care under AB12, ILSP will continue to provide support, direct services and resources.
- ILSP addresses the social and well-being aspects of foster youth.



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE - Special Meeting

6.

Meeting Date: 07/31/2017

Subject: Health Care for the Homeless

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: 5

Referral Name: Continuum of Care Plan for the Homeless / Healthcare for the Homeless

Presenter: Joseph Mega, MD MPH, Health Services Department
Contact: Enid Mendoza, (925) 335-1039

Referral History:

This referral to the Family and Human Service Committee was originally made by the Board of Supervisors on December 3, 1996. Since that time, the Health Services Department regularly updates the Committee on the services provided to the homeless.

Referral Update:

On June 26, 2017, the Family and Human Services Committee received a report from the Health Services Department on the first topic of this referral, Continuum of Care Plan for the Homeless.

Please see the attached report for an update on Health Care for the Homeless services topic of this referral.

Recommendation(s)/Next Step(s):

ACCEPT the report provided by the Health Services Department on Health Care for the Homeless services and DIRECT staff to forward the report to the Board of Supervisors for their information.

Fiscal Impact (if any):

There is an informational report; there is no fiscal impact.

Attachments

Health Care for the Homeless Report

Health Care for the Homeless Presentation

**CONTRA COSTA HEALTH SERVICES DEPARTMENT
CONTRA COSTA COUNTY**

TO: Family and Human Services **DATE:** July 31, 2017
Committee Members
Board of Supervisors

FROM: Joseph Mega, MPH, MD
Medical Director, Health Care for the Homeless

SUBJECT: Health Care for the Homeless Annual Update

Recommendations

1. Accept this report from the Health Services Department; and
2. Forward this report to the Board of Supervisors for acceptance; and
3. Direct staff to continue to report on an annual basis to the FHS Committee regarding health status of the homeless population in Contra Costa County by the Health Care for the Homeless Program.

Background

Since 1990, the Health Care for the Homeless (HCH) Program has provided health care services to the homeless population in Contra Costa County through mobile clinics, stationary health centers and the Concord Medical Respite facility. Health care services provided by the HCH team include routine physical assessments, basic treatment of primary health problems such as minor wounds and skin conditions, respiratory problems, TB screening, acute communicable disease screening, coordination and referrals for follow up treatment of identified health care needs, dental services, health education, behavioral health services, medication assisted treatment and outreach and enrollment services. A significant portion of the homeless patients seen by the HCH team have chronic diseases, including asthma, hypertension, diabetes, and mental health/substance abuse issues. They also have disproportionately more dental, substance abuse and mental health needs than the general population.

The clinical team is comprised of a Medical Director, Family Nurse Practitioners, Registered Nurses, Community Health Workers, Dentist, Registered Dental Assistance, Mental Health Specialist, Substance Abuse Counselor, Health Educator and Eligibility Workers.

Homeless patients who receive care on one of the mobile clinics are referred into one of the CCHS ambulatory care health centers for primary and specialty care,

into County mental health and substance abuse services, and to Contra Costa Regional Medical Center for emergency, inpatient hospital, outpatient surgeries, laboratory and radiology. There are four ambulatory care clinics, located in Antioch, San Pablo, Martinez and Concord, designated specifically for homeless patients to help them transition from the mobile clinic setting into the ambulatory care system. HCH staff members are present at each of these clinics.

Updates

The HCH Program now includes a **Medication Assisted Treatment (MAT)** team, which provides Nurse and Behaviorist Care Management services to patients seeking recovery from opiate addiction. This program works in collaboration with the CCHS ambulatory health center system and the CCHS Alcohol and Other Drugs division of Behavioral Health. MAT patients are prescribed Buprenorphine, a drug used to treat opioid addiction, enrolled in regular group classes to support their recovery, and assigned a nurse care manager to support this process and ensure medication and appointment compliance. The MAT program has seen significant growth in the last year through referrals for patients needing these services.

The HCH program also continues to expand our Behavioral Health services as funding and collaborative opportunities become available. We've recently collaborated with the Behavioral Health division to add a half-time Psychiatrist to our mobile team. Dr Emily Watters provides psychiatric support to patients with our Medical Outreach team and at County-run homeless shelters. In addition, we are currently interviewing to add a Mental Health Case Manager to our team to provide ongoing support to patients who transition out of an emergency shelter environment.

The attached report highlights the increasing needs of the aging homeless population, and the disproportionate behavioral and social needs of our homeless population.

HEALTH CARE FOR THE HOMELESS (HCH) CONTRA COSTA HEALTH SERVICES

PRESENTATION TO THE
FAMILY & HUMAN SERVICES COMMITTEE
CONTRA COSTA COUNTY BOARD OF SUPERVISORS

JULY 31, 2017

Joseph Mega, MD MPH
Medical Director Healthcare for the Homeless

FUNDING FOR HCH SERVICES

- Section 330(h) Public Health Services Act Health Care for the Homeless grant from the Federal Government (BPHC/HRSA) – approx. \$3.1M per year.

NEW FUNDING

Dental Service Expansion – Mobile dental vans providing onsite dental services coming in the fall

Medication Assisted Treatment –

- expansion of staffing and services
- expansion of overdose prevention
- increased advanced training for staff

WHAT WE DO?

Primary Care
Mental Health
Substance Abuse
Dental Care
Respite Care
Case Management
Eligibility Assistance
Patient Education
Linkages to larger CCHS systems of care



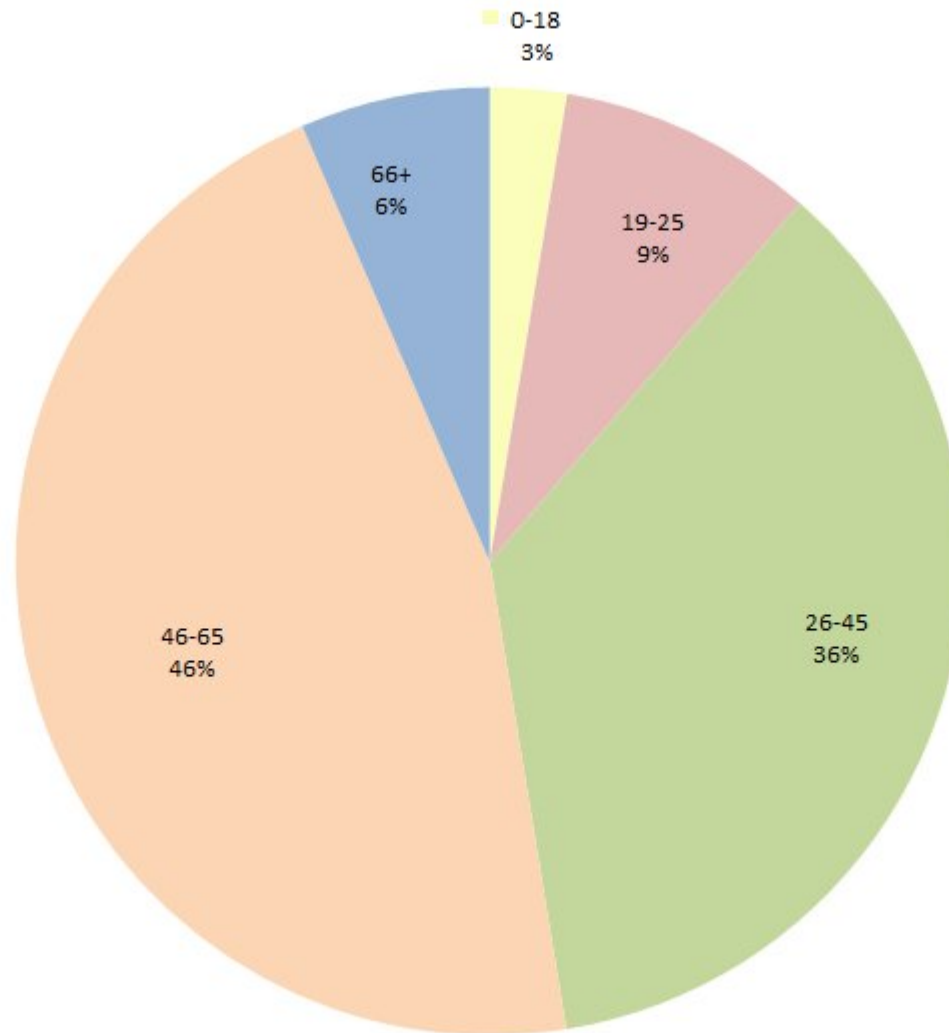
STRATEGIC PLANNING GOALS

- GOAL 1: Improve Communication within and between Homeless Providers in Contra Costa County.
- GOAL 2: Expand BH integration within the HCH Program
- GOAL 3: Increase preventative services compliance
- GOAL 4: Improve HCH visibility, service alignment and integration within CCHS system
- GOAL 5: Reduce barriers to care and provide comprehensive services to all Homeless clients in County

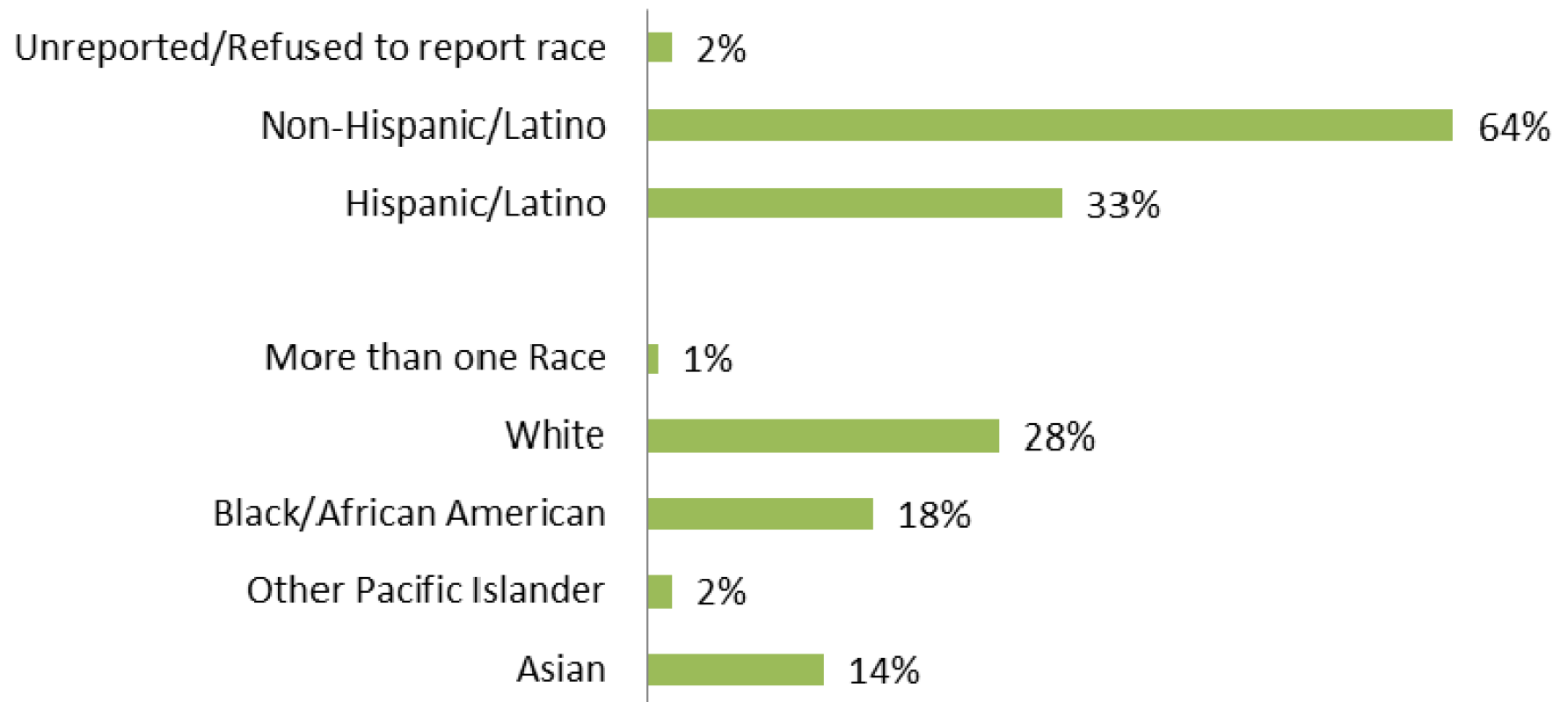
PATIENT DEMOGRAPHICS 2016

- 54% Female (2016)
- 46% Male (2016)
- 7% Uninsured (2016)
- 76% Medi-Cal (2016)
- 25% Best served in language other than English (2016)

Percent of HCH Medi-Cal Patients, by Age



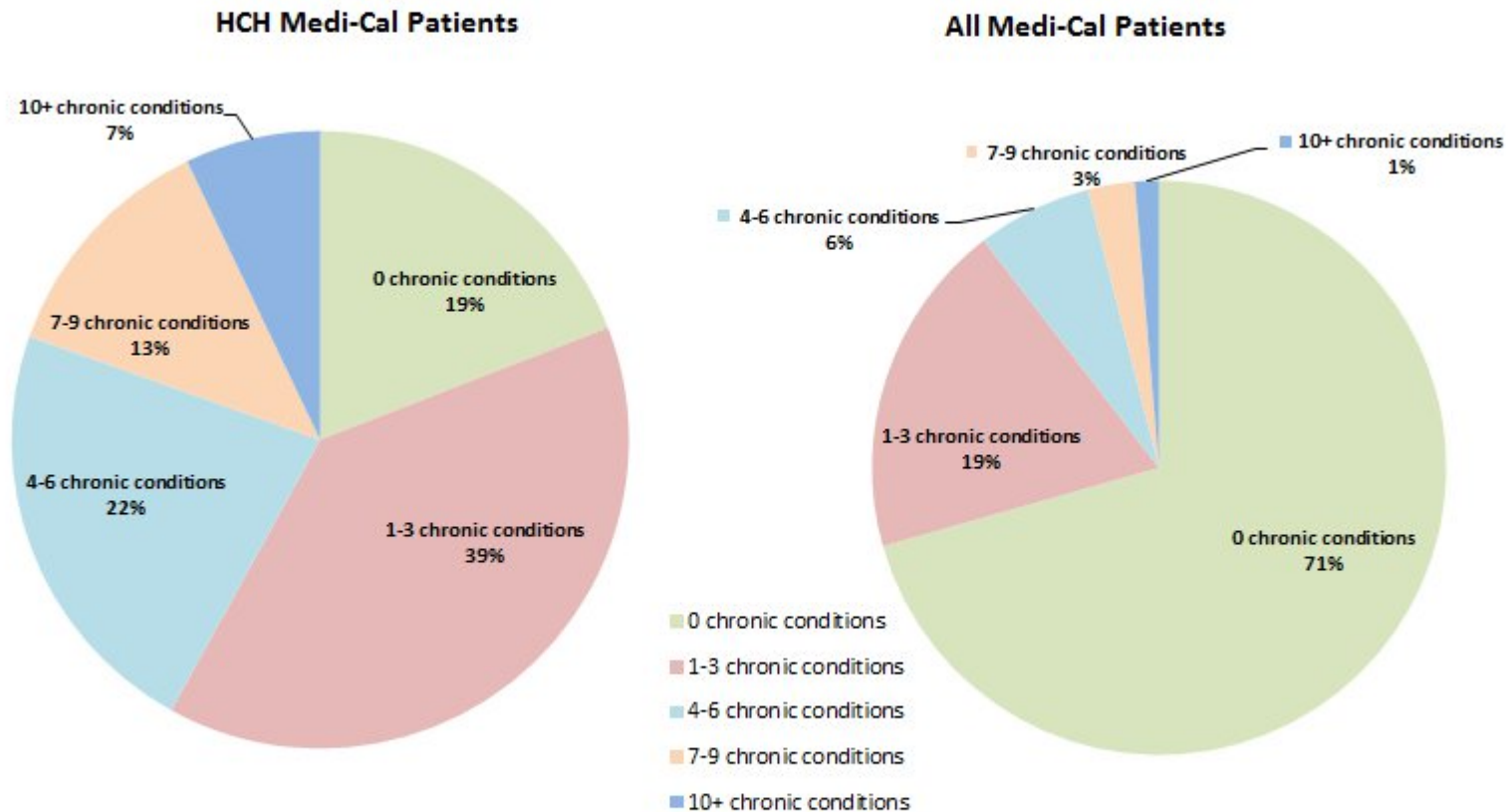
Race/Ethnicity among Homeless Patients



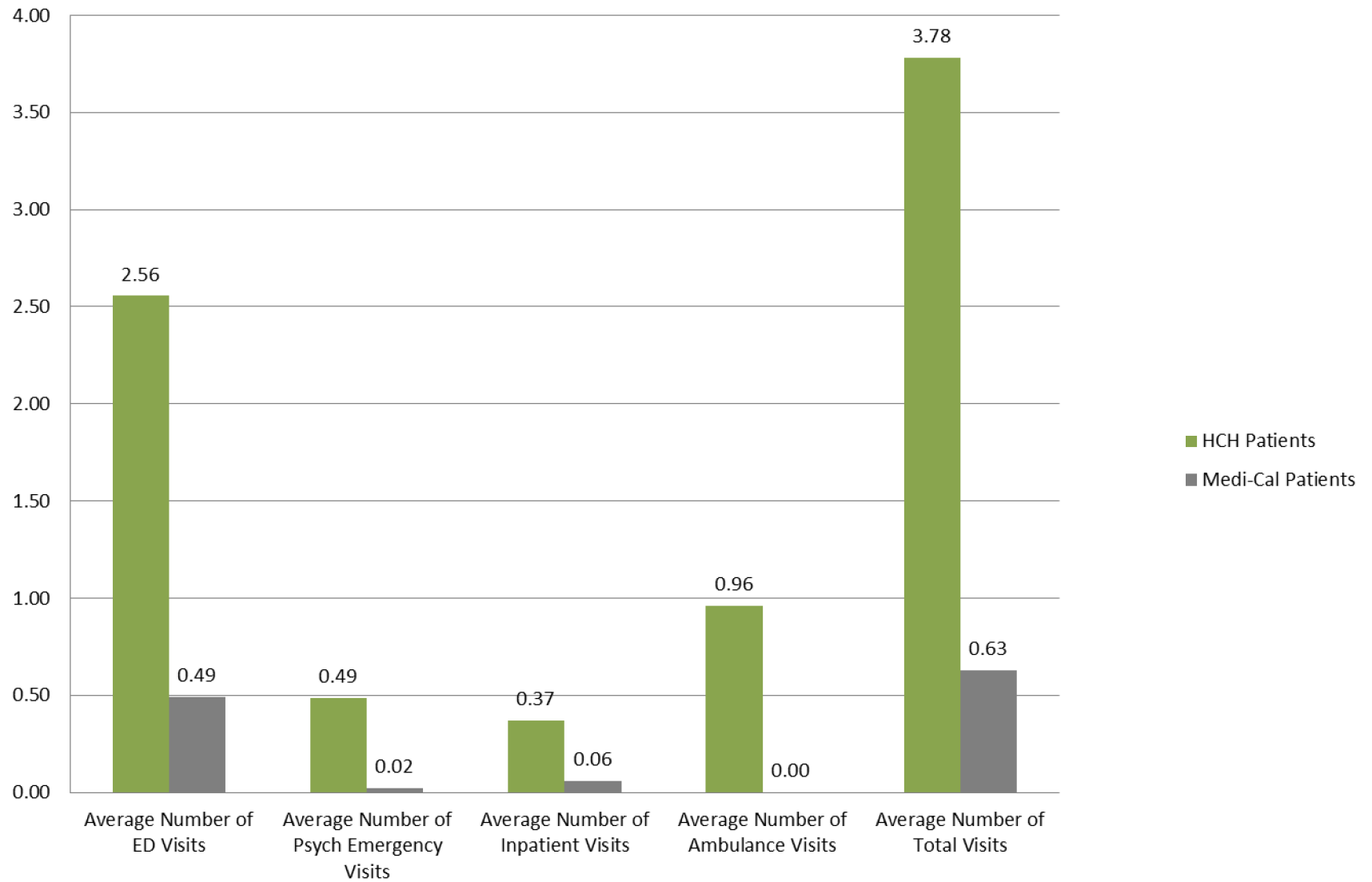
WHERE ARE PATIENTS BEING SERVED?

Region	2016
West County	38%
Central County	36%
East County	26%

Chronic Conditions of HCH Patients and CCHS Medi-cal Patients



Average Number of Visits - HCH vs. Medi-Cal Patients



IMPORTANT HIGHLIGHTS OF OUR HOMELESS POPULATION IN 2016

- Disproportionate involvement with Criminal Justice system
 - 37% of HCH Medi-cal patients
 - 5% AB 109
- Disproportionate burden of Mental Illness/SUD
 - 44% positive for depression
 - 51 % positive for depression AND AOD
 - Poor access to services:
 - 20% with active MH services
 - 17% AOD
- Older, Sicker Homeless Patients

CASE STUDY

OLDER, SICKER HOMELESS PATIENTS

TAKE HOME POINTS

- The homeless of Contra Costa County are disproportionately interacting with the criminal justice system.
 - Additional coordinated re-entry health services are needed
- Homeless population disproportionally suffers from mental illness and substance use disorders and has unique difficulties accessing services.
 - Improved behavioral health integration and flexibility of services are desperately needed
- Increase in older, sicker homeless patients with greater needs
 - Shelter and medical respite services are often inadequate leading to increased long term hospitalizations and street homelessness
 - Additional housing/custodial care options are necessary to adequately care for this population

HCH UPDATES

- Increased Behavioral Health integration
 - HCH psychiatrist hired in 1/2017
 - Currently seeking additional MH clinical specialist
- Weekly street outreach
 - Point-of-care services including diagnostic imaging
 - Collaboration with CORE outreach teams
 - Behavioral health outreach with HCH psychiatrist
- Expanded MAT programs
- Mobile Dental Services in Fall
- Improved collaboration with TCN programs and Detention health



Contra Costa County Board of Supervisors

Subcommittee Report

FAMILY AND HUMAN SERVICES COMMITTEE - Special Meeting

7.

Meeting Date: 07/31/2017

Subject: Local Planning and Advisory Council for Early Care and Education Activities and Countywide Child Care Plan

Submitted For: FAMILY & HUMAN SERVICES COMMITTEE,

Department: County Administrator

Referral No.: 81 & 92

Referral Name: Local Child Care & Development Planning Council Activities / Local Planning Council - Countywide Child Care Plan

Presenter: Ruth Fernández, LPC Coordinator/Manager, **Contact:** Enid Mendoza, (925) 335-1039
Educational Services

Referral History:

The Board of Supervisors referred updates on the activities of the Local Planning and Advisory Council for Early Care and Education (LPC) (formerly known as the Local Planning Council for Child Care and Development) to the Family and Human Services Committee (F&HS) on January 17, 2006.

On October 17, 2006, the Board of Supervisors referred updates on the Countywide Child Care Plan to the Family and Human Services Committee and the Local Planning and Advisory Council for Early Care and Education has provided annual reports.

These reports are typically brought to the Family and Human Services Committee separately, but this year the County Office of Education is prepared to present on both referrals at the same time.

Referral Update:

Please see the attached report on the Local Planning and Advisory Council for Early Care and Education's countywide Child Care Plan and activities update.

Recommendation(s)/Next Step(s):

ACCEPT the report on the Local Planning and Advisory Council for Early Care and Education activities and countywide plan for early care and education, as recommended by the County Office of Education.

Fiscal Impact (if any):

This is an informational report; there is no fiscal impact.

Attachments

LPC Report to F&HS

LPC Childrens Forum - Save the Date Flyer

MEMORANDUM

DATE: July 31, 2017

TO: Supervisor Candace Andersen, District II, Vice Chair
Supervisor John Gioia, District I, Chair

FROM: Ruth Fernández, LPC Coordinator/Manager, Educational Services

SUBJECT: Local Planning and Advisory Council for Early Care and Education (LPC)
Council Activities-Referral #92

CC: Karen Sakata, Contra Costa County Superintendent of Schools
Dr. Pamela Comfort, Deputy Superintendent of Schools
LPC Chair and Vice Chairs

RECOMMENDATION(S):

1) **ACCEPT** the activities report and key accomplishments during fiscal year 2016-2017 for the LPC as they relate to Education Code - *Section 8499.3 – 8499.7* and the implementation of the multi-year Comprehensive Countywide Plan for Early Care and Education 2014 through 2017.

REASON/S FOR RECOMMENDATION:

California Education Code (EC) Section 8231 requires that Local Planning Councils prepare a comprehensive countywide child care plan designed to mobilize public and private resources to address identified needs. Projects and activities of the Contra Costa LPC align with legislative intent for Local Planning Councils to *serve as a forum to address the child care needs of all families and all child care programs, both subsidized and non-subsidized in Contra Costa County* (Ed code Sections 8499.3 and 8499.5).

BACKGROUND:

The Contra Costa County Local Planning and Advisory Council for Early Care and Education (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.

I. SUMMARY OF ACTIVITIES

- a. **Hosted the 13th Annual Young Children's Issues Forum – *Speak Out for Children: Educate and Advocate on Saturday, March 18, 2017.*** Over 265 teachers, school administrators, college faculty, community advocates, local government officials, parents, business leaders, and state legislators attended the Forum held at the Pleasant Hill Community Center, in Pleasant Hill, CA. The topic of focus for this year's forum is ***Together As One Community For All Children*** which strived to highlight the importance of active engagement of all of members of the community – parents, families, caregivers, teachers, business owners, organizations of faith, policy makers, community leaders and more – to identify what is needed for children, what needs to be changed in order to meet their needs, what we cannot lose, and what we must gain to insure equity of opportunities for all of our children. This event continues to be a catalyst to ongoing and active community engagement and advocacy in the early care and education community. Forum attendees received an “advocacy toolkit” which included local, regional and state resources for families, “how-to” tip sheets and guidelines to encourage civic engagement and general information about the state legislative cycle.

- b. **Initiated the 2017 - 2020 Countywide Child Care Needs Assessment and Child Care Facility Development Study for Contra Costa County.**

The LPC is currently coordinating their 2017 Needs Assessment and Child Care Facility Study. The child care needs assessment is conducted every five years and aims to determine the child care needs as mandated by California Education Code for all LPCs across the State. Based on recommendations made by the LPC's Ad Hoc Child Care Facilities Committee the LPC commissioned a comprehensive countywide needs assessment study for child care for children ages 0 to 12 that includes current conditions of existing facilities, interest in expansion from current providers, potential financing models, and roles for various stakeholders.

The study will be conducted by Brion Economics, Inc. and will be modelled after the study being conducted in San Mateo County by Brion Economics, Inc. (BEI) with Davis Consultant Network, Nilsson Consulting, and other sub-consultants. The study will be conducted in phases, partly due to funding constraints, but also due to the nature of the work that builds on each phase.

Brion Economics, Inc. will update the prior Needs Assessment for 2017, and will provide key analysis and data on an implementation effort to increase the supply of child care facilities in the County. The overall study proposal is divided in five phases overall. However, the current project will only address Phases 1 and 2. Financial sponsorship for the study is provided by the Contra Costa County Office of Education and the LPC; First 5 Contra Costa and the Contra Costa County Department of Conservation and Development (DCD).

- **Phase 1:** Countywide Child Care Needs Assessment - 2017 (NA) by City and community area and countywide, as of 2017 and 2027.
- **Phase 2:** Online Surveys & Analysis of Existing Child Care Providers and Stakeholders in County
- **Phase 3:** Prepare Child Care Capital Improvement Plan
- **Phase 4:** Identify 10 possible ELF sites and conduct site assessments
- **Phase 5:** Child Care CIP Financing Strategy for ELF site development

The lack of child care facilities is an ongoing issue in our county and budgets require we address the issue in the most efficient and focused manner. Currently, our county is unprepared for the expansion of state preschool slots due, in great part, to the absence of adequate facilities. The LPC envisions this study as an effort to operationalize the goal of increasing the supply of child care facilities and program expansion in areas of need. Thus, this study presents an opportunity to further partner with DCD and First 5 Contra Costa for long-term systemic efficiencies and expansion of child care services in our community. The LPC acknowledges the essential role of our local partners and co-sponsors of this study in the local system working to ensure Contra Costa County residents have access to healthy and safe living and working environments.

- c. **Coordinated and Facilitated Quarterly State Funded Program Administrators Network (SFPAN) meetings held at the CCCOE and facilitated by the LPC Coordinator.** The State Funded Administrators Network (SFPAN) convenes 14 agencies that contract with the California Department of Education to provide General Child Care Services for children ages 0-12 and State Preschool services for high need families and children throughout Contra Costa. The SFPAN includes the county's Head Start and Early Head Start providers and the CalWorks child care voucher program known as the Alternative Payment Program which includes stage 1, stage 2 and stage 3 families.

- d. **Support and Fiscal Consultation/Coaching Services for Administrators of State Funded Programs** - Title 5 contractors with the California Department of Education, Early Education and Support Division (CDE-EESD) continue to struggle to fully earn their contract allocation due to low state reimbursement rates, unrealistic family income eligibility guidelines and staff turn-over. Providers cannot cover their operational costs, and therefore, are unable to utilize their full allocation of state and federal child care and child development funds. Over the past four years, the amount of unearned state child care and development funds in Contra Costa County has steadily increased. The LPC also gathered local data from state-funded program administrators that indicated a need for additional training, coaching and technical assistance (TA) for Program Administrators and Directors.
 During 2016 – 2017, the LPC decided to allocate AB 212 funds to “pilot” consultations services to administrators with the goal of improving efficient contract management for full earning of allocation. Over the past two years, three Title 5 programs experienced changes in administration and leadership which impacted the stability of the programs greatly. Other local challenges among Title 5 contractors include: lack of available child care facilities and low enrollment.

- e. **LPC Coordinator is CCCOE's administrator for the California State Preschool Program QRIS Block Grant and Infant and Toddler QRIS Block Grant contracts for Contra Costa County.** The LPC is actively involved in the local planning, coordination and implementation of quality improvement services, professional development and growth activities and incentives, and countywide efforts to increase public awareness of “quality indicators” through the *Contra Costa Quality Matters* program.

II. ACCOMPLISHMENTS

Nurture and Retain a Qualified Early Care and Education Workforce

As in previous years, the LPC has offered multiple professional growth and development services and incentives in Contra Costa County. The LPC was approved by the California Department of Education (CDE) in 2016 -2017 to support teaching staff and the leadership (Site Supervisors and Directors) at state-funded Early Care and Education (ECE) programs by providing stipends for participation at various levels and through multiple commitments to participation paid with AB212 funds. Total stipends issued from AB212 of \$76,173.79 were paid to 81 AB212 eligible staff. The LPC chose to implement the following activities under the sponsorship of AB212 funding:

- **Professional Development Program (PDP) Services and Incentives:** During fiscal year (FY) 2016-2017, the Contra Costa LPC continued the partnership with First 5 Contra Costa for Professional Development Program funding. During the application period, 112 applications were received from AB212 educators. After completing approved PDP activities, a total of 76 AB212 staff received incentives in one or more components or incentive categories.
- **Site Supervisor and Director Professional Learning Communities (PLC) Project-** The LPC received eight applications from participants to the 2016-2017 with one applicant withdrawing before initiating any activities in the PLC. During the project, the leaders participated in activities with seven Site Supervisor/Directors completing all activities in the Professional Learning Community (PLC) and were deemed eligible to receive stipends of \$1000 each for a total of \$7000.
- **Foreign Transcript Evaluation Services continued to be funded and provided through AB212 allocations and were offered in PDP -** Two evaluations were completed for PDP participants by an evaluation service to assist AB212 individuals with education from outside the United States with applying for or advancing on the Child Development Permit or degree completion - \$650.
- **Community Hot Topics Seminar:** 13th Annual Young Children's Issues Forum 2016 Speak Out for Children– On Saturday, March 18, 2017, over 265 teachers, school administrators, college faculty, community advocates, local government officials, parents, business leaders, and state legislators attended the 13th Annual Young Children's Issues Forum "Speak Out For Children: Educate and Advocate" held at the Pleasant Hill Community Center, in Pleasant Hill, CA. Certificates of Professional Growth Hours were issued – AB212 funds partially supported the implementation of the Forum.
- **Additional AB212 Support Services:** 112 applications were received from AB212 educators for participation in the Professional Development Program by advisors at each of the three colleges in the Contra Costa Community College District or by AB212 Staff. The college advisors provided Information Sessions, education advising towards degrees, regular individual advising sessions, and documentation acceptance from July 2016 through January 2017. AB212 staff continued to provide the same services at state-funded employment sites, through advising appointments, Child Development Permit application processing and related professional growth advising sessions, and

training, as needed, for understanding of renewal requirements for the Child Development Permit and for successful participation in PDP. PDP stipend details follow in Table 1- the number of participants completing each type of professional development and the stipend amounts by category is represented in the next page.

- Permit Applications:** AB212 staff continued to assist early childhood educators to apply for new, renewal and upgrade Child Development Permit applications. A total of 157 permit applications were processed to date with 11 from AB212 Professional Development Program (PDP) participants who submitted Permit applications. In the past several years, AB212 staff have seen an increase in online renewals by Contra Costa County early childhood professionals. There seems to be a better understanding of the process for online renewals and many have become more aware of the services which can be provided online. Recent history has shown that fewer individuals are needing assistance with accessing their Permit information online and may contact AB212 staff for guidance in making payment, submitting the application for renewal, or editing personal information due to marital status, address changes, or incorrect information. Professional Growth Advising and the development of awareness of that may have also increased this online engagement with the Commission on Teacher Credentialing (CTC).

2016-2017 Professional Development Program (PDP)
Incentive Summary - Table 1

Stipend Type and amount	Number per Stipend Type	Total per Stipend Type
Course Completion Stipend = \$400 for 6 units completed	59	\$23,600
Professional Training Hours = \$150 (for completion of 12 hours or \$300 for completion of 24 hours	11	\$3,150
Professional Training Receipts Based on receipts submitted = MAX \$100	4	\$273.79
Coursework Bonus for completing additional units after first 6 units. \$100 per unit with MAX \$800	44	\$22,100
Reflective Practice Seminar = \$300 required concurrent enrollment in one three-unit course.	26	\$7,800
Education Milestone M1 - completion of 24 ECE/CD and 16 GE for Teacher Permit = \$500, M2 - completion of AA/AS degree = \$500 M3 -completion of BA/BS =\$500	17 M1 = 8 M2 = 6 M3 = 3	M1 = \$4,000 M2 = \$3,000 M3 =\$1,500
Lost Wages - Completion of lab or community-based supervised field experience which required absence from employment, based on hours completed	3	\$3,750
PLC - Site Supervisor and Director Professional Learning Community = \$1000	7	\$7,000
Total stipend types paid to 76 approved and eligible participants	171	\$76,173.79

Permit Applications Processed During 2016 - 2017 for State-Funded Programs

Permit Level by Job Title								
Job Title	No Permit Yet	Assistant	Associate Teacher	Teacher	Master Teacher	Site Supervisor	Program Director	Total
TAT or Assistant	8	1	3	-	-	-	-	12
Associate Teacher	-	-	19	3	1	2	-	25
Teacher	2	-	3	9	2	2	-	18
Master/Lead Teacher	-	-	1	2	3	5	1	12
Site Supervisor	-	-	-	-	-	6	2	8
Program Director	-	-	-	-	-	-	1	1
Total	10	1	26	14	6	15	4	76

Retention by Job Title

Job Title and Years of Employment						
Years of Employment						Totals
Job Titles	Not provided	< 3 years	3-5 years	5-10 years	More than 10 years	
Assistant	1	8	3	-	1	13
Associate Teacher	2	9	1	7	5	24
Teacher	2	6	2	3	6	19
Master Teacher	-	2	2	-	7	11
Site Supervisor	-	-	1	1	6	8
Program Director	1	-	-	-	-	1
Total - Central	6	25	9	11	25	76

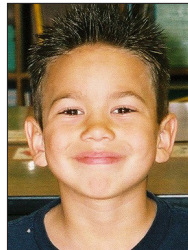
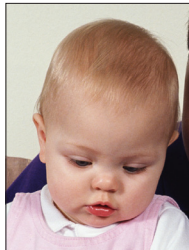
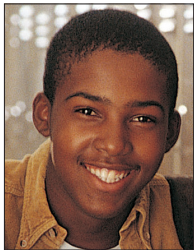
III. PROPOSED WORK PLAN/OBJECTIVES FOR 2017 - 2018

The LPC will continue to oversee the design and implementation of the following projects and priority activities:

- **Plan, Coordinate and Host the 14th Annual Young Children's Issues Forum – Speak Out for Children: Educate and Advocate** scheduled for Saturday, March 17th, 2018 (See Save the Date Flyer Attached).
- **Complete the new Countywide Child Care Needs Assessment and Facility Development Study 2017-2020**
The Early Learning Facilities Needs Assessment would update the prior Child Care Needs Assessment for 2017 (a statutory mandate for the LPC), and would provide key analysis and data on an implementation effort to increase the supply of child care facilities in the County. The study is expected to be completed by April 2018.
- **Convene Annual LPC Member Retreat** on December 1, 2017 to begin strategic planning process for Contra Costa County Comprehensive Countywide Early Care and Education Plan 2017-2020.
- **Participate, support and align funding** goals to support countywide efforts to improve the quality of all Early Care and Education programs through the *Quality Matters (QRIS) Project*.
- **Co-sponsor teacher incentives and professional development services** offered through Contra Costa County PDP utilizing AB212 funding and in partnership with First 5 Contra Costa.
- **Continue implementation** of the California Transitional Kindergarten Stipend Project (CTKS) by continuing to build and maintain relationships with TK Coordinators, State Preschool (CSPP) Administrators and TK/CSPP teachers in Contra Costa County.



**Contra Costa County
Local Planning and Advisory Council
for Early Care and Education**



SAVE THE DATE—

14th Annual Young Children's Issues Forum 2018 "Speak Out for All Children: Educate and Advocate"

Join your local state legislators, local elected officials, business leaders, early childhood educators, families, and the community in a dialogue about the current movement to elevate the quality of Early Care and Education services for all children and promote increased compensation.

- When:** Saturday, March 17, 2018, 9:00 AM – 2:00 PM
Registration and resource fair begins at 8:30 AM
- Where:** Pleasant Hill Community Center
320 Civic Drive, Pleasant Hill, CA 94523
- Cost:** \$15 - Space is limited
Resources, continental breakfast and light lunch provided.

Watch for registration information on our website:

www.plan4kids.org

Limited child care available for children 2 years and up.
For more information, please call Ruth Fernández at 925-942-3413
Coordinated by the Contra Costa County Office of Education



**CONTRA COSTA COUNTY
Office of Education**
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