



INTERAGENCY SERVICE AGREEMENT
Contra Costa County,
for its Employment and Human Services Department -
Community Services Bureau

AGREEMENT #21-030

INTERAGENCY AGREEMENT
(County Provides Services)

1. **Agreement Identification.** Interagency Agreement between First 5 Contra Costa Children and Families Commission and Agency named below to coordinate and administer a Family Support program in Contra Costa County.
2. **Parties.** First 5 Contra Costa Children and Families Commission (Commission), and the following named Agency mutually agree and promise as follows:

Agency: **Contra Costa County, for its Employment and Human Services Department – Community Services Bureau “County”**

Capacity: Public Entity Taxpayer ID #: 94-6000509

Address: 1470 Civic Court, Suite 200
Concord, CA 94520
3. **Term.** The effective date of this Agreement is **7/1/2021**. It terminates on **6/30/2022**, unless sooner terminated as provided herein.
4. **Payment Limit.** Commission’s total payments to County under this Agreement will not exceed **\$610,000.00**.
5. **Commission’s Obligations.** Commission will pay County for its provision of the services as set forth in the Payment Provisions, which are incorporated herein by this reference, subject to all the terms and conditions contained or incorporated herein.
6. **County’s Obligations.** County will provide those services and carry out that work described in the Additional Provisions, subject to all the terms and conditions contained or incorporated herein.
7. **General and Special Conditions.** This Agreement is subject to the General Conditions and Special Conditions (if any) attached hereto, which are incorporated herein by reference.
8. **Legal Authority.** This Agreement is entered into under and subject to the following legal authorities: Health and Safety Code Section 130140.1, Contra Costa County Ordinance Code Section 26-14.026. As required by Ordinance Code Section 26-14.026 and the California Children and Families First Act of 1998 (the “Act”).
9. **Project.** This Agreement implements in whole or in part the following described Project, the application and approval documents of which are incorporated herein by reference.
10. **Signatures.** These signatures attest the parties' Agreement hereto:

INTERAGENCY AGREEMENT
(County Provides Services)

**First 5 Contra Costa
Children and Families Commission**

By: _____ Date: _____
Commission Executive Director/Designee

AGENCY

COUNTY OF CONTRA COSTA, CALIFORNIA

<p>BOARD OF SUPERVISORS</p> <p>By _____ Chairman/Designee</p>	<p>ATTEST: Clerk of the Board of Supervisors</p> <p>By _____ Deputy</p>
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<p>RECOMMENDED: Department of Employment and Human Services</p> <p>By _____ Name and Title</p>	<p>_____</p> <p>Signature</p>
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ADDITIONAL PROVISIONS

1. Background.

Proposition 10 was passed in 1998 by California voters. On June 15, 1999 the Contra Costa County Board of Supervisors established the Contra Costa Children and Families Commission to implement the provisions of Proposition 10 (Ordinance 99-15). The purpose of this Ordinance is to support local programs and services designed to help children 0-5 reach their greatest potential in school and life through the development of a seamless, comprehensive system of information and services.

In December 2019, the Commission approved a three year Strategic Plan, which outlines the Commission's funding priorities and objectives from fiscal year 2020-2021 through 2022-2023. A key strategic results area of the plan is Family Support. The purpose of this performance based contract between First 5 Contra Costa Children and Families Commission (F5CC) and Contra Costa County Employment & Human Services Department Community Services Bureau (CSB) is to sustain home-based support services for Contra Costa parents and their children (0-2 years) to be implemented by a qualified social service provider in contract with CSB.

2. Partnership Description. Building on a long-standing partnership with CSB, CSB will utilize F5CC resources to oversee the implementation of the F5CC home visiting program model and increase the number of children served by Early Head Start (EHS) home-based support services.

F5CC home visiting model is designed to strengthen families (inclusive of fathers); promote positive parenting practices, develop strong parent-child relationships, support healthy child development, promote school readiness and prevent child maltreatment. Home visits provide parent education and support; child development and depression screening; family-centered case management; referrals and enrollment assistance to access community resources and benefits, and opportunities to broaden informal support networks through meaningful socializations. F5CC Home Visiting Program Model Implementation Guidelines (Guidelines) Attachment B.

CSB and the contracted service provider will utilize the F5CC HV Database (ETO) to implement the F5CC home visiting program model. End user support, training and technical assistance will be made available to CSB and/or the Contracted service provider for the purpose of monitoring, evaluating, and reporting outcomes related to the operation and funding of this program.

3. County Obligations. County's obligations are as follows:

A. Administration

- a. County will ensure that all provisions of this contract are carried out.
- b. County will ensure a qualified social service provider is contracted to implement the F5CC Home Visiting Program Model for the term of this contract.
- c. County will ensure First 5 allowable expenses and limits are adhered to by contracted social service provider, Attachment A.
- d. County will ensure program participation meets the EHS minimum requirement of frequency and dosage for every child (slot). Only filled slots that meet the required level of participation will be eligible for payment

ADDITIONAL PROVISIONS

- e. County will submit proof of program participation as back up documentation with the submission of any demand, to be submitted monthly for the duration of this contract.
- f. County will submit detailed program budget to include F5CC and EHS funds prior to the start of this contract and any budget modifications thereafter.

B. Contract Amendment and/or Renewal

- a. County will inform First 5 of any increase or decrease of EHS funded slots within 14 days of the date of notification within the term of this contract.
- b. County will notify F5CC no later than April 15th the estimated number of children (“slots”) to be served and the EHS rate per slot for the fiscal year beginning July 1st.
- c. County will submit to F5CC the final number of slots and EHS rate at least 60 days prior to the end of the term of this Contract and not less than 30 days prior to program start date.

C. F5CC Home Visiting Program Model Fidelity

- a. County will ensure fidelity to program model as outlined in the F5CC Home Visiting Program Model Implementation Guidelines (“Implementation Guidelines”).
- b. County will meet at least once annually with F5CC to review EHS regulations and EHS Partner Agencies Comprehensive Services Protocol to ensure F5CC home visiting program model aligns with required and best practices.
- c. County will ensure service delivery is regularly monitored for quality and safety through its on-going monitoring system. Monitoring/ quality reports may be requested at any time by First 5 staff.
- d. County will require and monitor program’s utilization of a healthy food and beverage policy.

D. Data Collection and Data System Utilization

- a. County will ensure F5CC data collection policies and practices are adhered to as outlined in F5CC Home Visiting Program Model.
- b. County will coordinate with F5CC to address data collection issues at least quarterly, or as needed, to include data reconciliation, reports, and forms revisions.
- c. County will ensure a Client Information Protection process is implemented with program participants. The process to include: disclosure to clients explaining how personal information will be used, shared and stored, obtaining signed client consent that authorizes use of personal information and program-utilization data be entered into ETO, use of data for a specific period of time, and the option to revoke at any time upon request.
- d. County will ensure not participant’s personal information is entered into ETO prior to program enrollment, including information provided by family or other referring providers during the referral process.
- e. County will manage, monitor and limit access to ETO by authorized users only. Authorized users have assigned ETO account with a personalized username, password, security setting, are employed by the County and determined to have an interest and

ADDITIONAL PROVISIONS

purpose for having access to program data. County will ensure that the protocol is in alignment with client protection policies generated by First 5.

- f. County will inform First 5 Contra Costa Family Support Officer and Database Coordinator of dates of separation for any staff leaving the program to ensure ETO user accounts are disabled by the end of business on the staff person's last day of employment, and will request a new ETO account for all newly-hired staff members.

E. Program Monitoring and Evaluation

- a. County will enable the Commission to monitor the terms of the contract. Monitoring may include, but not limited to site visits, periodic program reviews (e.g., quarterly Contractor Performance Assessment Report), review of written documentation (e.g., program policy and procedures manual), regular and/or special meetings with county. Commission's online reporting system, hereafter called "First 5 Reports", Income and Expenditure reports, review of program data and collection procedures, job descriptions and County's agency organizational structure.
- b. County will be subject to at least one annual site visit by Commission staff, and will complete the necessary documentations and Expenditure Reports set forth in Section 4 Reporting of these Additional Provisions.
- c. County will be subject to fiscal compliance site visits as deemed appropriate by the Commission. The Commission will contact the County no less than five (5) working days in advance to schedule the limited fiscal review site visit.
- d. County will participate in and carryout Commission identified evaluation activities necessary to ensure the accurate and timely collection of data. County-specific data collection requirements are attached hereto as Attachment C and incorporated herein by this reference.
- e. County's services hereunder will be in accordance with the First 5 allowable expenses, which is attached hereto as Attachment A and incorporated here in by this reference. County is required to submit a Budget Revision Request form to the Commission when requesting the following changes to the approved budget:
 - i. Expenditures that exceed the 10% variance allowed within budget categories 1-3:
 - ii. Request to move monies between budget categories.

4. Reporting.

- A. County will participate in training for use of the First 5 Reports system and will use the system to report quarterly progress on Performance Measures identified in this Contract, incorporated herein by this reference and the Contract Compliance Narratives, no later than the 15th of the month following the close of quarters 1-3 and no later than the 31st of the month following the close of the 4th and final quarter. Contract Compliance Narratives may include but are not limited to a description of successes and challenges in program implementation, lessons learned, service or income and expenditure discrepancies, significant staffing changes, and compelling vignettes of service consumers.

ADDITIONAL PROVISIONS

- B. County will submit a general ledger as back-up to support all expenses charged to this Contract. The general ledger should be comprehensive and include current and previous quarter expenses.
- C. County will submit the following Performance Measures, Compliance Narratives and Budget Reports on the dates set forth below:

REPORTS	TIME PERIOD	DUE
QUARTER 1	July 1, 2021 through September 30, 2021	August 15, 2021
QUARTER 2	October 1, 2021 through December 31, 2021	January 15, 2022
QUARTER 3	January 1, 2022 through March 31, 2022	April 15, 2022
QUARTER 4	April 1, 2022 through June 30, 2022	July 31, 2022

Performance Measures - Quarterly progress on meeting milestones and targets identified in this agreement. This report is to be completed using the First 5 Reports system.

Contract Compliance Narrative – Quarterly narrative on progress. This report is to be completed using the First 5 Reports system.

Expenditure Report - Written Report detailing budget expenditures. This report must be **electronically** delivered to the Commission no later than the report due date. This report is cumulative and must include current and previous quarter expenses.

5. Commission Obligations.

- A. The Commission will reimburse the County up to 180 slots that meet the EHS minimum requirement of frequency and dosage for every child (slot).

B. Contract Monitoring.

The Commission will monitor the terms of the contract. Monitoring may include, but is not limited to, site visits, fiscal compliance reviews, periodic reviews and discussions with County, First 5 Online Reporting System, Income and Expenditure reports, review of data collected and data collection procedures, job descriptions and organization structure of the County.

6. Payment Provisions.

- a. **Payment Demands.** County will submit Performance Measures, Compliance Narratives and Budget Reports within fifteen (15) days from the end of quarters 1-3 and within thirty-one (31) days from the end of quarter 4, as set forth in Section 4C above. Once the reports are received and approved by the Commission, the Commission will forward a Demand Form to the County for County to complete and submit for payment.
- b. Commission will make payments to County promptly upon approval of said payment demands by the Executive Director of the Commission, or designee. Upon approval of said payment demands by the Executive Director of the Commission, or designee, the Commission will submit from T/C 35 or T/C 36 for payment.

ADDITIONAL PROVISIONS

- c. Commission's payment for services will be up to 180 slots per month, at no more than \$282.41 per slot. Services must be in accordance with the First 5 allowable expenses (Attachment A).
- d. Commission will reimburse County for any approved expenditures for agreed upon services within thirty (30) days of approval of said Payment Demand.
- e. **Funds will be made payable to:**
Contra Costa County, for its Employment and Human Services Department - Community Services Bureau
1470 Civic Court, Suite 200
Concord, CA 94520
- g. If County fails to submit to the Commission a timely demand for payment for the final quarter as specified in paragraph 6.a., above, the County is required to complete an Interfund Accrual Request form and submit it to the Commission no later than August 3, 2022 by 5:00 PM. If the Commission does not receive the completed Interfund Accrual Request form by August 3, 2022, the Commission will not pay County for any expenses submitted after the final due date as specified in Section 4(Reporting) above.
- h. If the Commission is unable to obtain reimbursement from the State of California as a result of County's failure to submit to the Commission a timely demand for payment as specified in Section 6 (Payment Provisions), the Commission will not pay County for such services to the extent Commission's recovery of funding is prejudiced by the delay, even though such services were fully provided.
- i. **Right to Withhold.** The Commission has the right to withhold payment to County when, in the opinion of the Commission expressed in writing to County, (a) County's performance, in whole or in part, either has not been carried out or is insufficiently documented, (b) County has neglected, failed or refused to furnish information or to cooperate with any inspection, review or audit of its program, work or records, or (c) County has failed to sufficiently itemize or document its demand(s) for payment.
- j. **Audit Exceptions.** County agrees to accept responsibility for receiving, replying to, and/or complying with any audit exceptions by appropriate county, state or federal audit agencies resulting from its performance of this Agreement. Within thirty (30) days of demand, County will pay the Commission the full amount of the Commission's obligation, if any, to the state and/or federal government resulting from any audit exceptions, to the extent such are attributable to County's failure to perform properly any of its obligations under this Agreement.

ADDITIONAL PROVISIONS

7. Miscellaneous Provisions.

- a. **Termination.** This Agreement may be terminated by either party, at its sole discretion, upon thirty (30) advance written notice thereof to the other, and may be cancelled immediately by written mutual consent. Notwithstanding the foregoing, this Agreement may be terminated if funding of Commission pursuant to the California Children and Families Act of 1998 (California Health & Safety Code §§ 130100, et seq.) ceases.
- b. **Entire Agreement.** This Agreement contains all the terms and conditions agreed upon by the parties. Except as expressly provided herein, no other understanding, oral or otherwise, regarding the subject matter of this Agreement will be deemed to exist or to bind any of the parties hereto.
- c. **Amendments.** This Agreement may be modified or amended by a written document executed by County and Commission, subject to any required state or federal approval.
- d. **Choice of Law and Personal Jurisdiction.** This Agreement is made in Contra Costa County and will be governed and construed in accordance with the laws of the State of California. Any action relating to this Agreement will be instituted and prosecuted in the courts of Contra Costa County, State of California.
- e. **Tobacco Policy.** County understands and agrees that it is not currently and will not in the future receive financial support from any tobacco or alcohol company, or invest in such companies.
- f. **Conflicts of Interest.** County covenants that it presently has no interest and that it will not acquire any interest, direct or indirect, that represents a financial conflict of interest under state law or that would otherwise conflict in any manner or degree with the performance of its services hereunder. County further covenants that in the performance of this Agreement, no person having any such interests will be employed by County. If requested to do so by the Commission, County will complete a "Statement of Economic Interest" form and file it with the Commission and will require any other person doing work under this Agreement to complete a "Statement of Economic Interest" form and file it with the Commission. County covenants that County, its employees and officials, are not now employed by the Commission and have not been so employed by the Commission within twelve months immediately preceding this Agreement; or, if so employed, did not then and do not now occupy a position that would create a conflict of interest under Government Code section 1090. In addition to any indemnity provided by County in this Agreement, County will indemnify, defend, and hold the Commission harmless from any and all claims, investigations, liabilities, or damages resulting from or related to any and all alleged conflicts of interest. County warrants that it has not provided, attempted to provide, or offered to provide any money, gift, gratuity, thing of value, or compensation of any kind to obtain this Agreement.
- g. **Alcohol and Drug Abuse Policy.** County will be subject to, support implementation of, and comply with the Commission's Alcohol and Drug Abuse Policy, adopted by the Commission, which is on file with the Commission and incorporated herein by this reference.

ADDITIONAL PROVISIONS

- h. **Child Abuse Index Check.** If the services required by this Agreement involve the provision of direct services to children, County agrees to perform the following reference checks on each employee who provides direct services to children: (a) the Child Abuse Index check; (b) the Criminal Record Clearance check by the State Department of Justice; and (c) the State Department of Motor Vehicles (DMV) record check. If any of these reference checks shows an employee has a criminal record involving crimes against children, County will immediately remove that employee from providing any services pursuant to this Agreement.

- i. **Supplantation of Funds.** County warrants that the funds received pursuant to this Agreement supplement, and do not supplant, existing levels of service. With regard to services covered by this Agreement and for the term of this Agreement, County agrees to maintain the same level of such services as it provided at the time of this Agreement, utilizing funds other than those provided under this Agreement.

- j. **Acknowledgement of Funds.** All printed materials created by County pursuant to this Agreement will contain the following information in a type size and style appropriate to the materials. The Commission will provide camera-ready logo upon request. County will follow the Style and Usage Guide, which is attached hereto as Attachment D and incorporated herein by this reference.

Made possible by funding from the



See Attachment D for directions

- k. **Separate Public Entity.** County acknowledges and agrees that the Commission is a public entity separate from the County of Contra Costa.

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ATTACHMENT A
First 5 Contra Costa Allowable Expenses
Contra Costa County,
for its Employment and Human Services Department -
Community Services Bureau

AGREEMENT #21-030

Social Service Provider Allowable Expenses and Limits		
First 5 Contra Costa Home Visiting Program		
Personnel		
	FTE	Limits
Director	0.02	Maximum
Program Mgr	0.5	Maximum
Admin Support	1	Minimum
Lead EHS Sup	1	Maximum: EHS oversight/ Supervision of no more than 5 HVs
Supervisors	1.7	Minimum: Required Ratio 1:6
Home Visitors	15	Minimum: Required Ratio 1:12
Outreach	1	FTE Minimum
Father Engagement	0.25	FTE Minimum
Fringe Benefits		
Program and Operations		
Allowable Expenses		
Program Supplies		Maximum: 6% of First 5 allocation
Socializations		
Office Supplies		
Staff Training		Must Include Growing Great Kids
Postage		
Printing		
Datanetwork		
Mileage		Minimum: IRS annual rate of reimbursement
Equipment		
Cellular		
Printing		
Building Maintenance		
Utilities		
Indirect	15%	Maximum
<p>F5 Funded EHS Wait List: HV .05 FTE: per slot is required to maintain a wait list to sustain EHS funding/slots. For this fiscal year the minimum FTE needed for pool is .75/9 slots. F5 is providing 2.58 FTE/31 slots</p>		



ATTACHMENT B

**First 5 Contra Costa Home Visiting Program Model (F5HVP)
Contra Costa County,
for its Employment and Human Services Department -
Community Services Bureau**

AGREEMENT #21-030

A. FIRST 5 CONTRA COSTA HOME VISITING PROGRAM (F5HVP)

First 5 Contra Costa initially designed and funded this program from 2016 – 2020, as a key strategy under the Commission’s Family Support Initiative. An initiative that supports families with children birth to age three, the most critical time in a child’s development. Theoretically rooted in the belief that early, nurturing relationships lay the foundation for life-long, healthy development. The F5HVP incorporates over 15 years of First 5 Contra Costa’s experience designing and funding family support programs: home visiting and family resource centers (First 5 Centers). The F5HVP provides families relationship based individualized in-home services designed to foster school readiness, by promoting early childhood health, well-being, optimal development, and positive parent-child relationships with secure attachment. Building on best practices and principles associated with family support, the F5HVP is strengths-based; family-centered and employs cultural humility and reflective practice.

B. PHILOSOPHY AND APPROACH TO SERVICES

F5HVP incorporates evidence-based research, best practices and approaches proven effective in the family support field and strengthening families with young children.

Family Strengthening is an approach that recognizes the inherent strengths, resilience, and abilities of families. Through mutually respectful partnerships, families enhance their own capacity to understand how to promote the optimal development (cognitive, social, emotional, and physical) of all family members. A strength-based approach also recognizes the significance of supportive relationships and social networks and helps families identify and enhance informal and formal supports.

The **F5HVP** service components aim to strengthen the **Five Protective Factors** reflected in the **Strengthening Families framework**, developed by the Center for the Study of Social Policy. Each protective factor, parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social and emotional competence of children, have been proven to be “promotive” factors that build family strengths and a family environment that promotes optimal child and youth development. Research studies support the common-sense notion that when these Protective Factors are well established in a family, the likelihood of child abuse and neglect diminishes. More information can be found at [Strengthening Families](#).

The **F5HVP** practices **universal developmental screening** and informs parents about the **Help Me Grow system** to facilitate early detection of developmental delays, initiate appropriate intervention and provide parental support. The goal of developmental screening is to improve a child’s functioning and reduce the need for costly lifelong interventions. Research has shown that when healthcare providers or pediatricians only use clinical judgment or developmental surveillance, many children who are experiencing developmental delays are not identified and do not receive the earliest possible intervention (American Academy of Pediatrics, 2010).

Cultural Humility is an approach used to respectfully engage and honor families’ diverse cultural traditions, race/ethnicity, languages, values, belief systems, socio-economic status, family structures, sexual orientation, religion, individual abilities, and other aspects of identity and lived experiences. The F5HVP staff build trusting relationships with families by intentionally facilitating opportunities for families and staff to: learn from each other, honor and value each other’s differences, and adapt programming to be responsive and sensitive to families’ varying needs. For more information about

the principles of Cultural Humility, view the [Cultural Humility](https://www.youtube.com/watch?v=SaSHLbS1V4w) (<https://www.youtube.com/watch?v=SaSHLbS1V4w>) video.

The **F5HVP** incorporates the best of all the **Home Visiting Best Practices and Evidence Based Program Models**. The **F5HVP** meets the **Early Head Start** in-home service delivery requirements, incorporates key concepts and elements from **Healthy Families America** and practices **Reflective Practice**.

Healthy Families America (HFA) is a national program model launched in 1992 by Prevent Child Abuse America (PCA America) in partnership with Ronald McDonald House Charities. The HFA model is based on two decades of research, the experiences of Hawaii's successful Healthy Start program and best practices from numerous communities and prevention models. More information can be found at [Healthy Families America](#).

Reflective Practice is a concept that centers around the idea of lifelong learning in which a practitioner analyzes experiences in order to learn from them. Introduced by [Donald Schön](#) in his book *The Reflective Practitioner* in 1983, Reflective Practice is used to promote independent professionals who are continuously engaged in the reflection of situations they encounter in their professional worlds. The practice has historically been applied most in the educational and medical fields, with widespread application by early childhood practitioners. Reflective practice in the early childhood setting has a profound impact on the relationships and partnerships staff are able to have with parents. Parents directly benefit from a parallel process that happens as home visitors become skilled in reflective dialogue.

F5HVP SERVICE COMPONENTS

- 1. Prenatal education and support** that promotes prenatal care, healthy behavior, and nutrition during pregnancy, screens for and supports optimal mental health and wellness, helps parents prepare and plan for the birth of their child, engages fathers early (or other family members as appropriate), and provides important information about raising a family (e.g., benefits of breast feeding, healthy diet, physical activity, oral health, child safety, car seat safety, avoiding alcohol, drugs, and tobacco, environmental toxicants, family planning/spacing).
- 2. Postpartum education and support** supports postpartum care and health to include screening for maternal depression, newborn care (e.g., breast feeding, sleep practices, reading and responding to baby cues, swaddling, food preparation), support for father involvement, and promoting the importance of well child visits and how to detect and respond to child illness.
- 3. Parent education and support** supports and promotes the importance of play, daily routines, infant and toddler caretaking, child development, and positive parenting practices. Social Service Providers to utilize Growing Great Kids or equivalent home visiting curriculum designed for parents of young children.
 - a. Infant and Toddler Caretaking**
F5HVP provides age-appropriate information on issues related to basic infant and toddler care, including feeding, sleep and scheduling, bathing and clothing, child safety, appropriate well-child care, and what to do if your child is sick.

b. *Child Development*

F5HVP provides information and guidance on child development and age-appropriate behavior; teach parents about key milestones and factors influencing development; encourage interaction and play to promote development; and help parents understand how their relationship with their child impacts development.

c. *Positive Parenting Practices*

F5HVP provides education and modeling to help parents meet their child's needs. Programs will help parents gain the knowledge, skills and confidence to read and respond to their baby's cues, interact frequently with their child (e.g., talking during feedings and responding to vocalizations), understand how a child learns, the importance of play, how parents are their child's first teacher, turning everyday activities into learning opportunities, and offer techniques and strategies for parents to manage challenging behaviors that negatively impact the parent-child relationship.

- 4. Developmental screening is** administered by program to assess child development at regular intervals to track progress and/or identify concerns that may require a referral for further assessment or early intervention services. All children will be screened utilizing the Ages and Stages Questionnaire 3 (ASQ3) and when appropriate the Ages and Stages SE2 (ASQSE2). When appropriate, F5HVP works closely with Contra Costa's Help Me Grow system to support parents and coordinate resources and referrals for children with identified developmental concerns.
- 5. Family-centered case management is** offered to parents by creating a comprehensive, strength-based plan that has parent-identified goals and priorities. Home visitors teach strategies to help parents identify achievable goals, develop action steps, and strengthen problem solving and decision making skills when confronted with obstacles.
- 6. Comprehensive family assessments,** (e.g. Life Skills Progression) are conducted according to tool recommendations and utilized in case management, reflective supervision and evaluation.
- 7. Father engagement** is individualized to meet the needs of each enrolled father and includes but not limited to involving fathers in case plan development, regularly scheduled visits, and socializations when possible and appropriate. Fathers receive education, support and case management services within the context of their self-identified roles and level of engagement in parenting, caretaking, and partner support. In some cases, it father participation may need to be incentivized where justified.
- 8. Information and referrals** provided to facilitate access to community resources and services to address basic needs and self-sufficiency. Referrals are tracked, monitored and reported on when family successfully utilizes a resource or referral.
- 9. Benefits eligibility screening and enrollment assistance** is provided for parents to help increase access to state and local resources, services or income support programs (e.g., TANF, health insurance, WIC, CalWORKs, Head Start).

10. Socializations are offered at a minimum, once a month for the purpose of reducing isolation, promoting peer learning, and strengthening families' support networks. Socializations are designed to engage all family members, include an educational focus area relative to early childhood, and include interactive activities that foster the development of meaningful relationships among families. Socializations are offered at First 5 Centers when possible.

C. SERVICE INITIATION, ELIGIBILITY AND PRIORITY AREAS

F5HVP services are initiated prenatally, at birth up to 12 weeks postpartum. Expectant and parenting families, inclusive of fathers (when possible and appropriate), who meet the income eligibility criteria, are actively raising a child aged 0-2, and reside in Contra Costa are eligible for F5HVP. Home visits are available for families by appointment 46 weeks annually, at least five days a week, with expanded hours to include Saturdays and evenings to maximize access for working parents.

Home visitation services are offered within communities with greatest needs, specifically in the Central, East, and West regions of Contra Costa County. Families will primarily reside in the following cities:

- **Central Region:** Concord (Monument Community); Martinez
- **East Region:** Bay Point; Pittsburg; Antioch; Oakley
- **West Region:** San Pablo and Richmond

D. POPULATION TO BE SERVED

F5HVP is designed to serve families with multiple risk factors who are not in crisis at the time of enrollment, to maximize the level of commitment a family needs to make to benefit from the full scope of the program. Families may present with one or more of the following risk factors: poverty (e.g. Medi-Cal recipients), first-time parents, socially isolated families, residents of a specific neighborhood or geographic region with known challenges (e.g. community violence, low-performing schools, limited access to resources, high crime rate), having less than a high-school education, or multiple psycho-social issues (e.g. domestic violence, strained familial relations, mental health issues).

E. OUTREACH AND REFERRAL SOURCE

Social Service providers implementing F5HVP must be diligent in developing and maintaining prenatal referral sources and effectively managing a wait-list to ensure the program operates at capacity.

G. FAMILY RECRUITMENT AND RETENTION

Successful family recruitment and retention relies heavily upon a family's commitment to full participation by all family members and adequately assessing parents' interest in strengthening parenting and goal attainment skills. Families who are in crisis at the time of enrollment are not a good fit for the F5HVP, due to the duration and scope of services that does not include crisis intervention. A home visitor who has a relationship with a family who faces a crisis while enrolled in the program is able to refer the family for assistance because of the trusted role they have of connector to community resources.

Retaining families for this relationship-based program is accomplished with high quality service delivery by competent home visitors who are able to establish rapport and trust with a family for the duration of the client's enrollment in the program.

H. PROGRAM CASELOADS, FREQUENCY AND DURATION

Families will be offered individual face-to-face visits in or outside the home. A full-time Home Visitor will carry a maximum caseload of 15 clients. Caseloads are limited to ensure home visitors have a manageable workload, are sufficiently trained, receive adequate support and participate regularly in reflective supervision.

Families will receive weekly visits, but no less than two visits per month. Visits will be 90 minutes in length. To provide the greatest impact for families and their children, the program is intended to engage families prenatally for at least 18 months, up to the child's second birthday. Families who participate in the program less than 18 months, regardless of the reason of closure, is a pre-mature closure, and will be reported as such.

I. COMMUNITY PARTNERSHIP

F5HVP staff are an integral part of their communities and work collaboratively with community partners to the benefit of families, including coordination with the First 5 Centers is strongly encouraged.

J. INCENTIVES

The use of incentives (food/meals, transportation, organized group activities with childcare, child related items, gift cards, etc.) has proven to be an effective strategy to increase and encourage family participation and retention in the program.

To model healthy lifestyles, when food is provided to participants of the F5HVP, a healthy food and beverage policy is adhered to.

K. STAFFING

a. Key Staff Positions and Supervision Ratios

For effective program implementation, the following positions and/or roles are necessary to have: Program Manager, Supervisor(s), Home Visitor(s), Administrative Assistant (data entry), and a male Home Visitor and/or Father Engagement Specialist. The list of positions above does not assume that each role requires a full-time staff person. Program size will dictate the amount of oversight along with the best practice of F5HVP supervision ratios.

Program Manager will have no more than 6 direct reports. Supervisor(s) will have no more than 6 home visitors assigned to them at any given time.

Exceeding supervising staff ratios even on a limited or temporary basis will compromise staff's ability to deliver quality services and maintain best practices embedded in each program component, conversely negatively impacting families and children.

b. Home Visitors' Qualifications and Competencies

To address the variety of experiences a home visitor may encounter when working with families with multiple risk factors, home visitors need to be educated in early childhood, child

development, parenting and coaching for goal-attainment. Home visitors serving in this program should possess or be supported to develop the ability to: 1) establish trusting and caring relationships with families; 2) foster empathic and nurturing parenting practices; 3) support parents to optimize their child's development potential; 4) educate and heighten parents' interest in caretaking, healthy nutrition, and preventive health; 5) expand the parents' capacity to manage stress and utilize a variety of community resources; and 6) incorporate cultural practices in home visits aimed at solidifying the family's identity and enriching parenting.

L. STAFF TRAINING

Implementation of the **F5HVP** requires intensive training for home visiting program staff, including primary, ongoing and specialized training. All training when possible should provide a strength-based and family centered perspective.

a. Primary Training

Primary training establishes a foundation for the program and instructs staff in their roles as Home Visitors, Supervisors, and Program Managers to understand the essential components of family assessment and home visitation. Within the first six months of employment, new staff will need approximately 80 hours of primary training. Primary training covers content and service provision topics such as: working with families with multiple risk factors; offering services and making referrals; establishing eligibility and enrolling families in benefits; child development, child health and safety; establishing and maintaining trust with families; building on family strengths; maintaining professional boundaries; developing an individual family support plan; observing, teaching and modeling healthy parent-child interactions; managing crisis situations; cultural humility; reflective practice; and specific issues such as substance abuse; reporting child abuse; domestic violence; drug-exposed infants; and maternal depression.

Curriculum Training is included in primary training. Staff must complete training by a recognized and/or certified trainer affiliated with the curriculum utilized by the **F5HVP**. Any Social Service Provider implementing the **F5HVP** must provide curriculum training at least every other year for new and veteran staff to maintain fidelity to the curriculum. Staff should be proficient in working within the full scope of the curriculum, to ensure that the home visitor is able to individualize and meet the families' unique educational needs and interests.

b. Ongoing Training

Ongoing training complements primary training and covers the implementation of supplemental curriculum used in F5HVP, as well as topics relevant to the needs of families, such as domestic violence, immigration, literacy and accessing community resources. It is essential that opportunities for staff to receive ongoing training is built into the social service provider's operating plan and budget.

c. Specialized Training

Specialized training is offered to strengthen staff's capacity to implement and/or administer the program. Training may include data base utilization, content focused, assessments and/or screening, reflective practice, five protective factors, trauma informed care etc.

M. REFLECTIVE PRACTICE

Program Manager and Supervisor(s) provide ongoing, effective supervision that supports Reflective Practice. By employing the practice of Reflective Supervision, home visitors will be able to develop realistic and effective plans to empower families to meet their objectives; to understand why a family may not be making progress and how to work with the family more effectively; and to express their concerns and frustrations. Reflective supervision requires the F5HVP to allocate the time necessary to effectively implement and sustain Reflective Supervision.

N. PARTNERSHIP WITH FIRST 5 CONTRA COSTA

First 5 Contra Costa, is available upon request, to provide training and/or clarification related to these Implementation Guidelines.

First 5 supports the F5CC Home Visiting Data System (ETO) and the evaluation of the program. Additional resources may be made available to the F5HVP like collateral material, information and resources for families, material goods (e.g. car seats, books).

O. FIRST 5 HOME VISITING DATA SYSTEM (HVDS)

Social Service Provider(s) use the First 5 Home Visiting Data System developed by Social Solutions' Efforts to Outcomes (ETO). The HVDS is designed to meet the unique needs of this home visiting program. Staff enter data into the HVDS to record, track and manage family information, service and program activities, enrollment information, screening and assessment data (such as ASQ3), surveys (such as the First 5 Family Survey and Parenting Survey), case management plans, referrals, attendance in group activities, and specific program outcomes.

C. REQUIREMENTS FOR COMPUTER SYSTEM AND INTERNET ACCESIBILITY

Home Visiting Program staff must have a computer and/or laptop with internet accessibility that meet the following requirements:

At the office:

- PC computer available for every home visitor running Microsoft Windows 7 or higher with an Intel Pentium II processor (or equivalent) that runs at 500 MHz or above, and a minimum of 256 MB memory (1 GB of memory recommended)
- Secure high-speed internet connection with a minimum speed of 500kb/s (at least 1 Mb/s highly recommended)
- Microsoft Internet Explorer 9 or above

In the field:

- A tablet or Laptop for each Home Visitor, with internet connection.

D. DATA COLLECTION AND REPORTING

Social Service Provider will enter data into the F5CC Home Visiting Data System (ETO). Data collection and entry are to be accurate, complete, and timely. A data reconciliation process conducted on a regular basis is recommended to ensure program reports reflect the program's accomplishments and data discrepancies are corrected and prevented. On-going training and technical support will be provided by First 5 Contra Costa's Data Systems' Coordinator.

E. EVALUATION

Select data may be extracted from the Home Visiting Data System by staff of the First 5 Evaluation Department and/or their external evaluation firm for the purpose of evaluating specific Program Outcomes (to be agreed to with Contractor), formative process evaluation questions, or other special analysis. Database fields and additional assessments may be added at the request of the Contracting agency, First 5 Program Officer, or First 5 or Contractor's Evaluation Department as warranted and feasible.

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**ATTACHMENT C
DATA COLLECTION REQUIREMENTS
Contra Costa County,
for its Employment and Human Services Department -
Community Services Bureau**

AGREEMENT #21-030

Data Collection Tool	Administration	Submission
ETO (Home visiting database system)	HV staff record, track and manage family information, enrollment information, home visits, service and program activities, screenings, referrals, and attendance in group activities and other related information about families in ETO.	HV staff enter data and periodically review the accuracy and completeness of home visiting information entered into the ETO database no less than quarterly.
The following information, including forms, surveys, and consents, is entered by program staff into the First 5 online home visiting database (ETO).		
First 5 Registration information and Family Survey	HV staff ask families to complete survey at intake.	HV staff enter information from Family Survey into the ETO database.
Ages and Stages Questionnaire 3 (ASQ-3)	HV staff administer ASQ 3 at recommended intervals.	Staff enter ASQ 3 scores into ETO database.
Parent Knowledge Survey (to be identified in conjunction with First 5 staff)	HV staff administer Parent Knowledge Survey at recommended intervals as determined by First 5 staff.	HV staff enter Parent Knowledge Survey into the ETO database.
Phone Consent	Phone interviews are conducted by external evaluator; F5 staff request consent at intake.	Family’s acceptance or denial of consent entered into ETO. Paper consents kept on file.
Depression Screenings	HV staff administer Depression screenings.	HV staff enter screening results in ETO database.
Case Closure	HV staff will complete a Case Closure for each family exiting the program.	HV staff enter case closures into ETO database
The following reports are entered by program staff into the online First 5 Reports system.		

Routine Reports	Completed by County.	Quarterly Reports due 4/15 and 7/31 for Units of Service / Population Reached progress updates.
<p>This evaluation design may change as the Commission’s needs for information change, and data collection /evaluation requirements from County may change accordingly.</p> <p>County will make reasonable efforts enable F5CC evaluation staff to assess outcomes of this program.</p>		

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ATTACHMENT D
COMMISSION LOGO STYLE AND USAGE GUIDE
Contra Costa County,
for its Employment and Human Services Department -
Community Services Bureau

AGREEMENT #21-030