



**Annual
Program
Evaluation
2021-2022**

March 2023

The Stanislaus County Children and Families Commission

The Stanislaus County Children & Families Commission was established by the Stanislaus County Board of Supervisors on December 8, 1998 following voter approval of Proposition 10 in November 1998. The Commission operates as an independent County agency. In July 2018 the Commission also adopted the use of the name First 5 Stanislaus to align with nomenclature used by nearly all local commissions and the State commission.

The Commission is dedicated to promoting children's development and well-being by supporting programs that make a difference in the emotional, physical, and intellectual experiences in a child's first 5 years.

Every year, the Commission invests millions of dollars in vital services for children ages 0 through 5 and their families in the areas of health, safety, family support, and child development.

The Annual Program Evaluation assesses the Commission's funded programs to determine each program's performance and efficiency while also demonstrating the overall impact toward the Commission's long-term goals.

Mission

Be a catalyst to help give children and families the best start.

Commissioners

Ignacio Cantu, Jr. - Community Representative
Vito Chiesa - Board of Supervisors
David Cooper, Chair - Community Representative
Daniel Diep, MD - Community Representative
Christine Huber – Community Services Representative
Tony Jordan – School Representative
Mary Ann Lilly-Tengowski, Vice-Chair - Health Services Agency
Thea Papasozomenos, MD - Public Health Officer
Nelly Paredes-Walsborn - Community Representative

March 2023

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Introduction

Section 130100 of the California Health and Safety Code requires the Stanislaus County Children and Families Commission to “use outcome-based accountability to determine future expenditures.” This provision of law has been interpreted to require that evaluations are conducted for the programs funded with Proposition 10 funds.

“Evaluation,” as used by the Stanislaus County Children and Families Commission, is the systematic acquisition and analysis of information to provide useful feedback to a funded program and to support decision making about continuing or altering program operations. The results of the evaluation illustrate how a program is making a difference and to what extent the program and their outcomes align with overall Commission goals.

This Evaluation Report contains information on:

- Strategic Plan goals
- The purpose of this evaluation
- Distribution of funding and services by result areas, geography, and type of services
- Intensity of services
- Participant and County demographics
- How program results (by result area) address Strategic Plan goals
- Program operations by contract including participant makeup, highlights, contractor responses to last year’s recommendations, planned versus actual outcomes, and recommendations

Strategic Plan Goals and Objectives

In its 2019-2024 Strategic Plan, the Commission focused on providing services and producing results in the areas of family functioning, health, child development, and sustainable systems. In these areas of focus, the Commission’s desired results for children ages 0-5 in Stanislaus County are listed below with corresponding objectives:

Families are supported and safe in communities that are capable of strengthening families

- Increase parental and caregiver knowledge, skills, and access to resources to support their child’s development
 - Strive to ensure all parents and caregivers of children in Stanislaus County receive parenting education from the earliest possible moment
 - Decrease child abuse and neglect
- Improve a sense of community in the lives of families (connections, supports, etc.) by increasing connections, relationships, and concrete support for parents and caregivers

Children are eager and ready learners

- Increase the number of children that are read to daily
- Increase access to opportunities for professional growth for Family, Friend, and Neighbor childcare providers
- Increase the number of children who are “ready to go” when they enter kindergarten (as measured by the Kindergarten Student Entrance Profile/KSEP)

Children are born healthy and stay healthy

- Increase the rate of healthy births
 - Increase the number of pregnant women and teens who receive prenatal care
 - Maintain infant mortality rates below state levels
 - Decrease the number of low birth weight babies
 - Decrease the percentage of women who smoke during pregnancy
- Increase children’s access to and utilization of health insurance benefits

Sustainable and coordinated systems are in place that promote the well-being of children from prenatal through age five

- Increase the funding and/or alignment of funding for a coordinated system of support for children and families

- Increase the level of county data integration/alignment of indicators, associated monitoring, and use of data to inform course-correction as needed to improve outcomes for children and families
- Increase the knowledge of individuals serving young children about available resources (including professional development) services, and referral opportunities

Evaluation Purpose and Methodology

The intent of this evaluation is to answer questions on two levels: individual programs' performance and the Commission programs as a collective. Put simply, on both the program performance and collective Commission levels, the Results-Based Accountability questions "How much was done?," "How well was it done?," and "Is anyone better off?" are answered in this evaluation.

With these questions in mind, the goal of the evaluation process for the 2021-2022 fiscal year was to acquire, report, and analyze information, share that information with stakeholders (i.e., programs, community, funders), and then upon reflection, make recommendations based on the areas of strengths and areas that could improve to better serve target populations on both the Commission and program levels.

The evaluation is a collaborative effort between Commission staff, programs, and other involved stakeholders. A variety of data sources have been utilized to holistically evaluate the programs and the Commission's progress toward goals set forth in the Strategic Plan.

Data sources used for the evaluation include quarterly reports, outcome-based scorecards, budgets, invoices, and a participant demographic report (PDR). Two of the main tools utilized are the PDR database and the Stanislaus County Outcomes and Results Reporting Sheet (SCOARRS). PDR is a locally developed database that tracks demographics of participants and the services provided by funded programs. The SCOARRS is a reporting tool that programs use to track progress toward planned outcomes by defining activities and reporting outputs and changes in participants.

Program data was provided exclusively by the respective programs while financial data and contract information were acquired from Commission records. Whenever possible, the contracted programs' self-analysis were integrated into the evaluation, at times in their own words. Collectively, this provides information about funded programs, the impact they make on children and families, their contributions towards the objectives and goals of the Commission's Strategic Plan, as well contributions toward population level results for our community's 0-5 population.

Community Impact Dashboard 2021-2022

Invested...

over \$4.8 million in
the community



Reached...

18,126 children,
parents and providers



Provided...

children with 4,861
books to nurture a desire
to read at home



Served...

the families of 1,507 children
participated in literacy services



Provided...

parent education and support
to the parents of 1,546 children



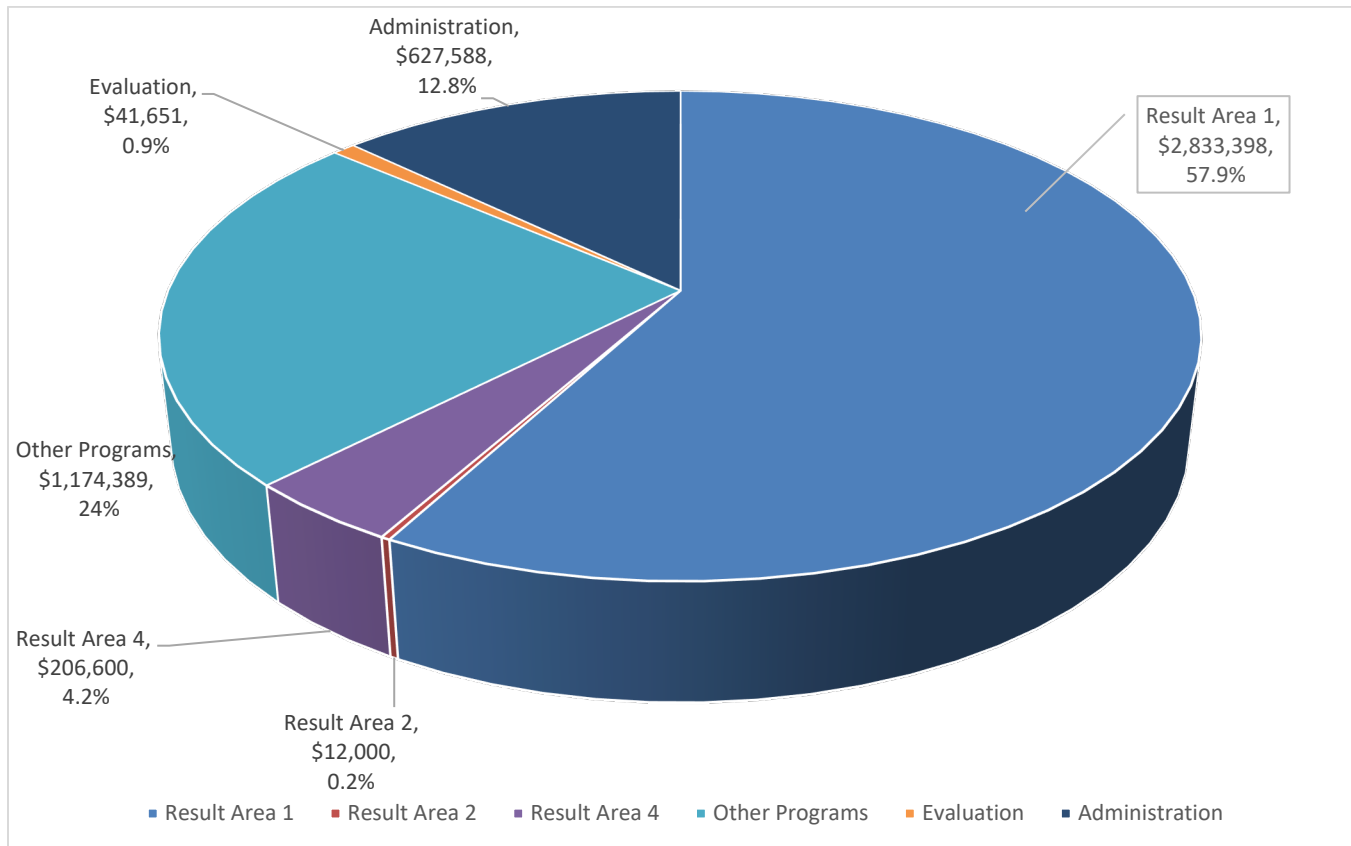
Served...

441 children received
developmental screenings



Funding Distribution by Budget Category

Total: \$4,895,626



The 2021-2022 budget pie chart portrays the distribution of Commission funding by budget category.

Program Categories:

The program categories (also known as Result Areas) make up 62.3% of the annual budget. These are areas in which outcomes for children ages 0-5 and their families are reported and evaluated. The funding provides measurable services for children and families.

Other Programs Category:

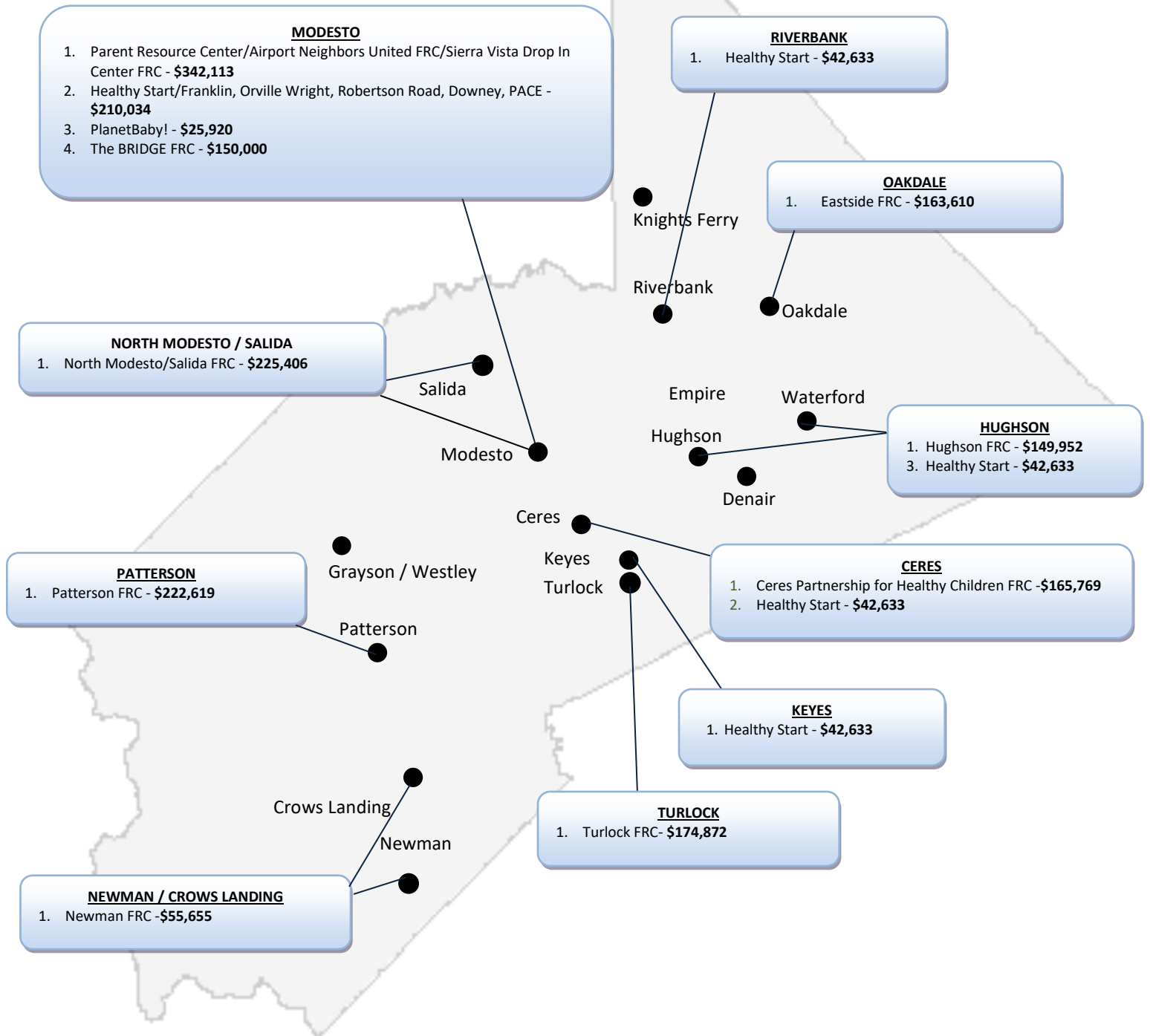
"Other Programs" consists of Commission and Stanislaus County charges that support programs, and the funds appropriated for program adjustments. This category makes up 24% of the budget.

Administration and Evaluation Categories:

These categories make up nearly 14% of the annual budget, with Administration comprising 12.8% and Evaluation comprising 0.9%.

STANISLAUS COUNTY CHILDREN & FAMILIES COMMISSION

2021-2022 PROGRAMS



COUNTYWIDE PROGRAMS

1. United Way 211 - **\$20,000**
2. Healthy Start - **\$117,831**

Program Budget Award by Location

Location	Program Budget Allocation	% of 21/22 Program Budget*	% of County's Population**
Modesto	\$ 728,067	35.4%	40%
Turlock	\$ 174,872	8.5 %	13%
Riverbank	\$ 42,633	2.1%	4%
Ceres	\$ 208,402	10.1%	9%
Newman/Crows Landing	\$ 55,655	2.7%	2%
Hughson (includes SE smaller towns)	\$ 192,585	9.4%	4%
Oakdale	\$ 163,610	8.0%	4%
Salida***	\$ 225,406	11.0%	3%
Keyes	\$ 42,633	2.1%	1%
Patterson	\$ 222,619	10.8%	4%
TOTAL of location specific programs	\$ 2,056,483		
Countywide Programs	\$ 137,831		
TOTAL:	\$ 2,194,314****		

*Percent of Program Budget that is not allocated countywide

**State of California, Department of Finance, E-1 Population Estimates for Cities, Counties, and the State with Annual Percent Change – January 1, 2021 and 2022: Sacramento, CA, May 2021; 2020 Census Redistricting Data, June 2021

***The program budget allocation for the Salida location includes parts of the North Modesto area.

****Contains Rounding

The map depicts the distribution of Stanislaus County Commission funds allocated to programs by location within the county. It illustrates the extent to which program services reach children ages 0-5 and their families countywide, and the number of programs in each area. The chart above shows the percentage of program funds allocated by city or region juxtaposed against the percentage of the county's population in that area. The percentage of funding allocated to the Stanislaus County cities and towns generally align with population demographics. Some of the smaller outlying areas of the county such as Oakdale and Patterson were allocated disproportionately higher amounts of funding as the outlying areas of the county are located farther from many community resources.

A total of \$137,831 was allocated to programs that operate throughout the county, making up 6% of the total program budget. These countywide programs reach all the above locations, and many have developed partnerships in order to collaborate with location specific programs, thereby leveraging Commission resources. The remaining 94% of the program budget is allocated to programs that operate within a specific community to best serve the needs of the children and families within that community. As programs that operate within specific communities continue to expand their virtual services, they also have the potential to reach families outside of their immediate neighborhoods and community. This broadens their potential reach outside of their neighborhood and to the wider County population.

Intensity of Services and Service Levels

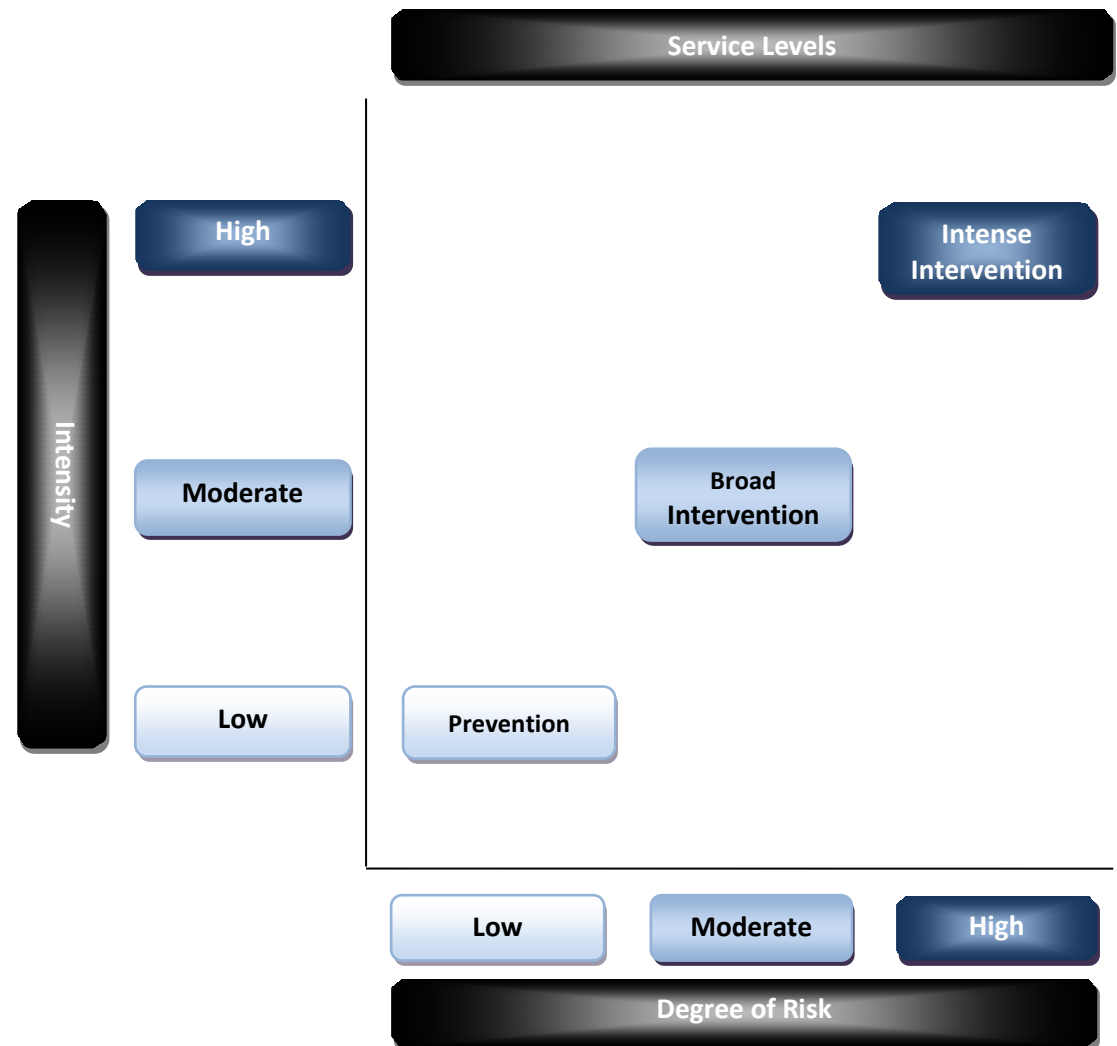
With the adoption of the Commission's 2019-2024 Strategic Plan, the Commission decided to focus more on primary prevention services. While the Commission continues to fund programs that offer a continuum of prevention and intervention services that target all children 0-5 and their families in Stanislaus County, it is shifting away from intensive services.

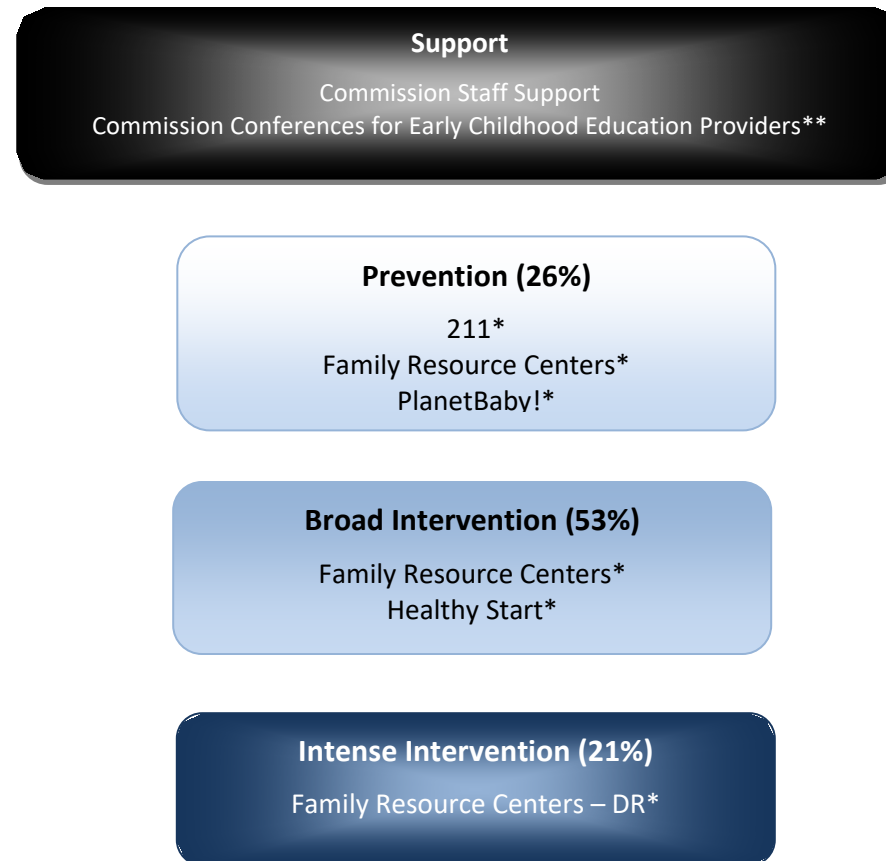
Service Levels

The diagram to the right portrays how the level of services relates to the intensity of the service and the degree of risk. In general, the low-risk and low-intensity services (prevention) are those that benefit a larger number of children and families with lower associated costs. Conversely, the high-risk and high-intensity services (intense intervention) usually assist a smaller number of children and families with higher associated costs. It is important to note that there are services that fall in areas between these main levels of services.

Service Level Investment

Approximately 53% of the contracts program budget is dedicated to Broad Intervention, while 21% goes towards Intense Intervention and 26% to Prevention services. The Commission's priority has shifted towards prevention and broad intervention, therefore decreasing the percentage applied to intensive services. Some programs are listed under more than one level because they have different program components, and there is certainly overlap between service levels.





* Improved Family Functioning

** Improved Child Development

**** Improved Systems of Care

Prevention:

Strategies delivered to the 0-5 population and their families without consideration of individual differences in need and risk of not thriving

Broad Intervention:

Strategies delivered to sub-groups of the 0-5 population and their families identified based on elevated risk factors for not thriving

Intense Intervention:

Strategies delivered to sub-groups of the 0-5 population and their families identified based on initiated or existing conditions that place them at high risk for not thriving

Participant and County Demographics

Commission funded programs utilize the locally developed participant data report (PDR) to track and report direct service participants' demographic information. Demographic data used in these charts were obtained from state/federal sources and contract reports.

Race/Ethnicity Served and Participant Primary Language

These two charts depict the profile of the population being served by Commission funded programs. As shown, the programs are providing services to a diverse population and closely align with county demographics. There is a continuing emphasis on serving Hispanic families. Programs are aware of the need for culturally sensitive and appropriate services. All funded programs have implemented cultural awareness/proficiency trainings and the outreach efforts to diverse populations have been consistently strong.

Participating Children Age Distribution

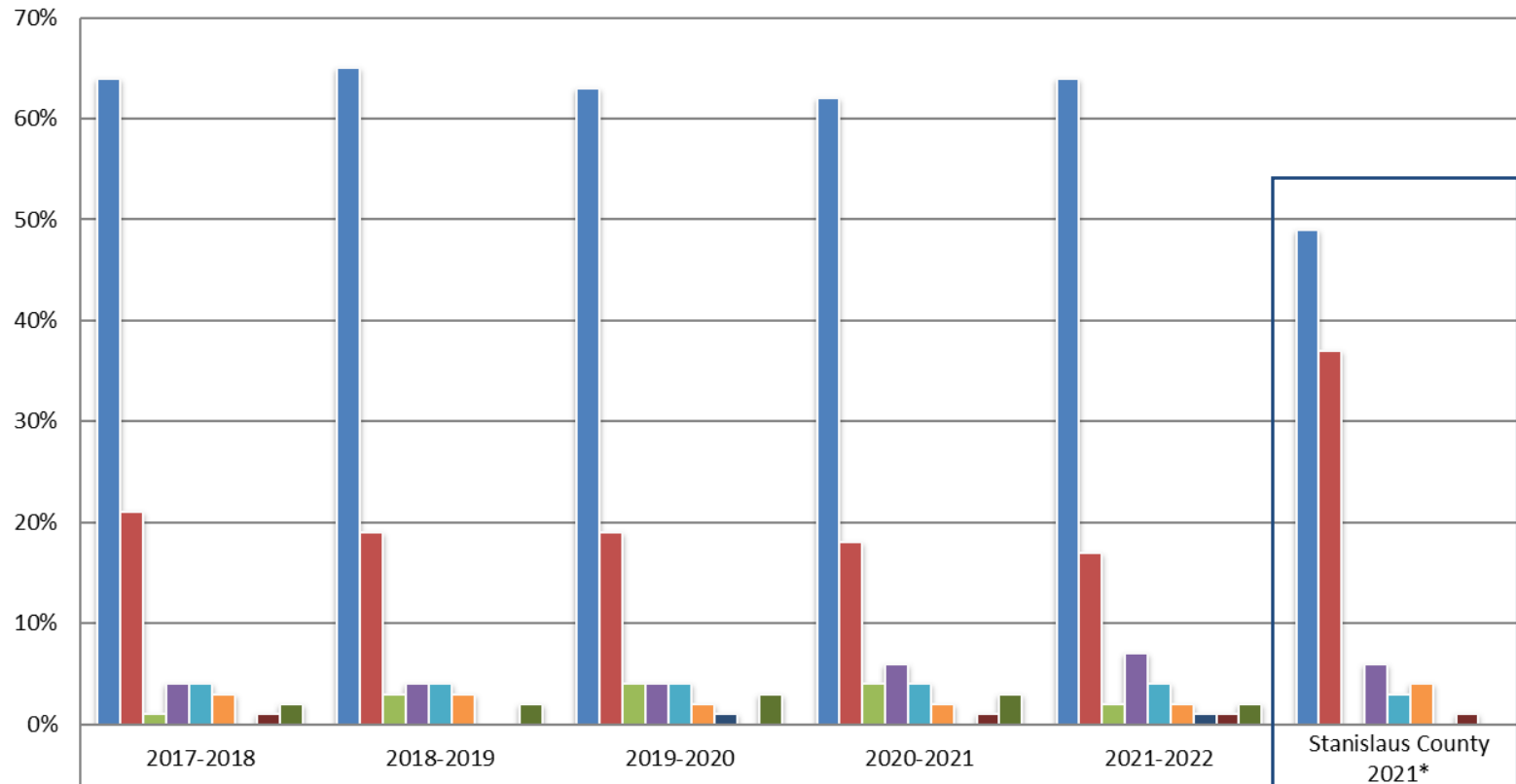
This chart shows the age distribution of children participating in Commission funded programs. The programs offer families a wide range of services to engage and support children from birth through age 5. The programs have almost equally served children ages 0 through 2 and children ages 3 through 5 from 17/18 through 19/20. In 21/22 and 21/22 more children ages 3 through 5 were served than in the past. This may be a result of the COVID-19 pandemic and these children not being able to engage in other services such as child care, Early Head Start, etc.

Infant Mortality Rate

These charts show that the Infant mortality rate for Stanislaus County is slightly higher than the State rate and exceeds the Healthy People 2030 goal of 5.7. (Healthy People 2020 established science-based 10-year national objectives for improving the health of all Americans on a number of different indicators, including infant mortality. New goals were developed for Healthy People 2030. Visit <https://health.gov/healthypeople/objectives-and-data/browse-objectives/pregnancy-and-childbirth> for more information.)

However, there are disparities when comparing the infant mortality rates for individual ethnicities. Stanislaus County exceeds or meets the Healthy People 2020 goal for all. Socioeconomic influences such as education, food security and income stability may be factors impacting the infant mortality rate for the different ethnicities.

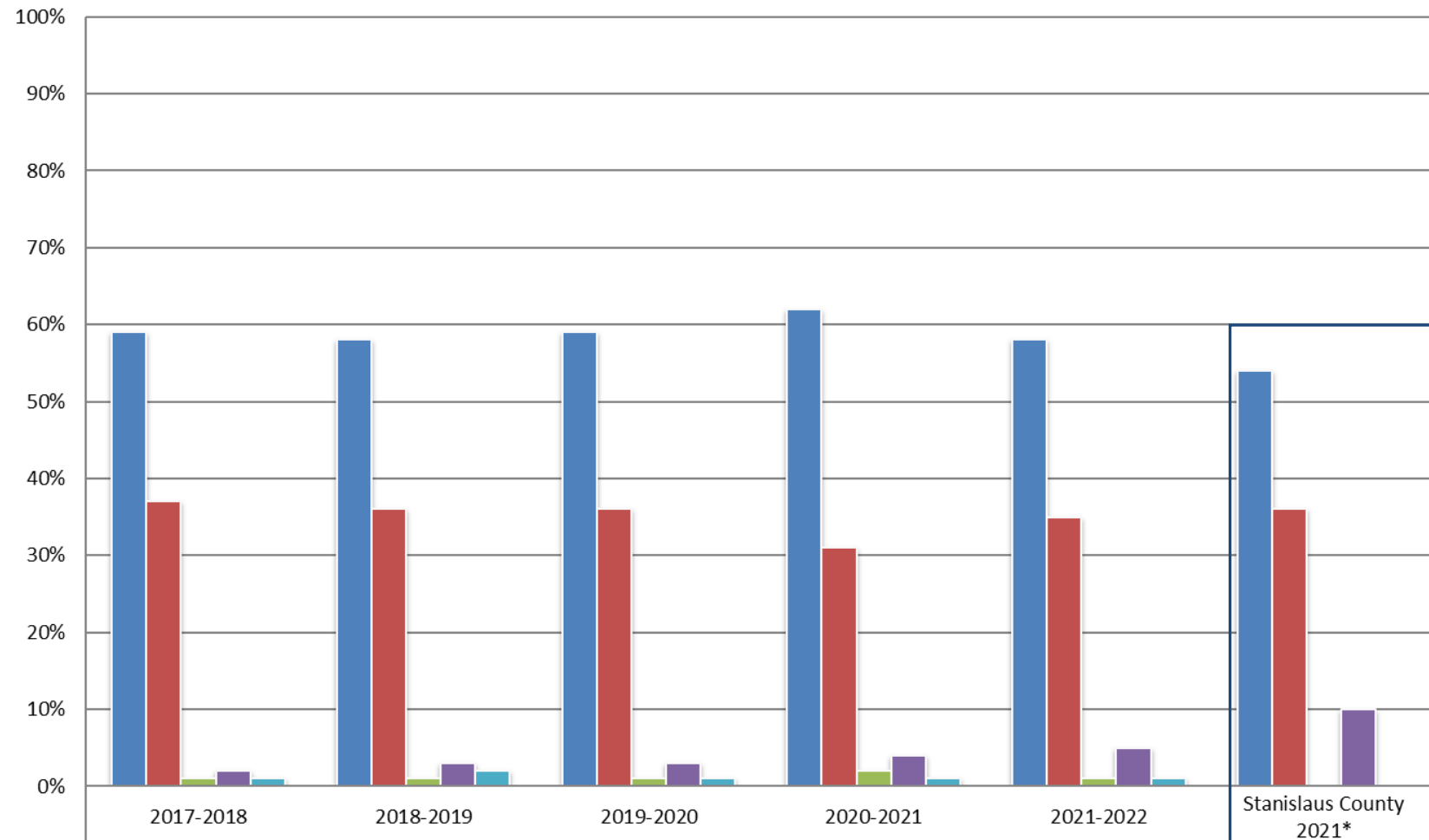
Race/Ethnicity Served



CFC data does not include provider capacity language data.

*U.S. Census Bureau, 2021 American Community Survey (ACS).

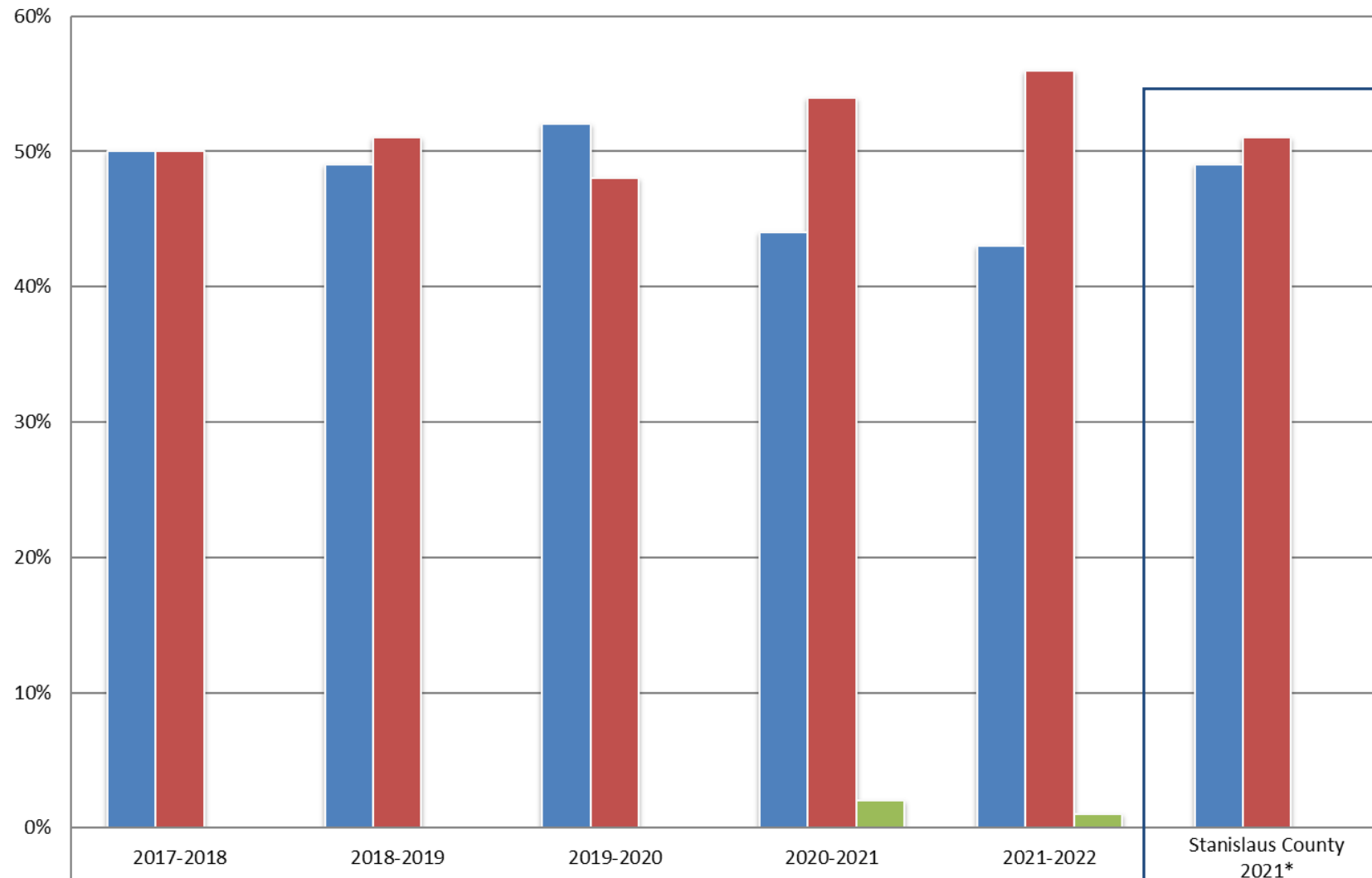
Participant Primary Language



CFC data does not include provider capacity language data.

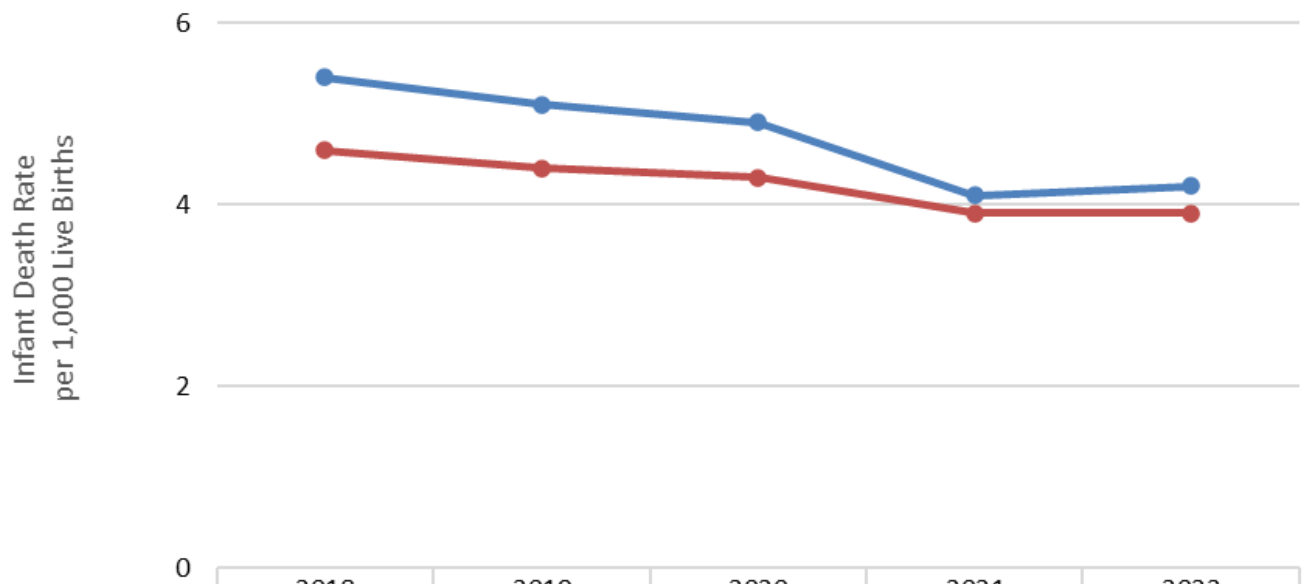
*U.S. Census Bureau, 2021 American Community Survey (ACS).

Participating Children Age Distribution



*State and County Total Population Projections by Race/Ethnicity and Detailed Age, California Department of Finance, 2021

Infant Mortality Rate



	2018	2019	2020	2021	2022
Stanislaus County	5.4	5.1	4.9	4.1	4.2
State	4.6	4.4	4.3	3.9	3.9

County Health Status Profiles, California Department of Public Health, 2020, 2021 and 2022; Stanislaus County's Health Status Profile, 2018 and 2019

Stanislaus County Infant Mortality Rate

	2018	2019	2020	2021	2022
All Races	5.4	5.1	4.9	4.1	4.2
Asian	7.7	NM*	NM*	M*	M*
Black	4.3	M*	M*	M*	M*
Hispanic	5	4	4.1*	3.2	3.4
White	5.2	5.7	5.3*	4.8	4.6

*Rates deemed unreliable when based on fewer than 20 data

*NM – Not Met refers to the Healthy People 2020 National Objective only (objective is 6.0)

*M – M refers to the Healthy People 2020 National Objective only (objective is 6.0)

<https://www.healthypeople.gov/2020/About-Healthy-People>

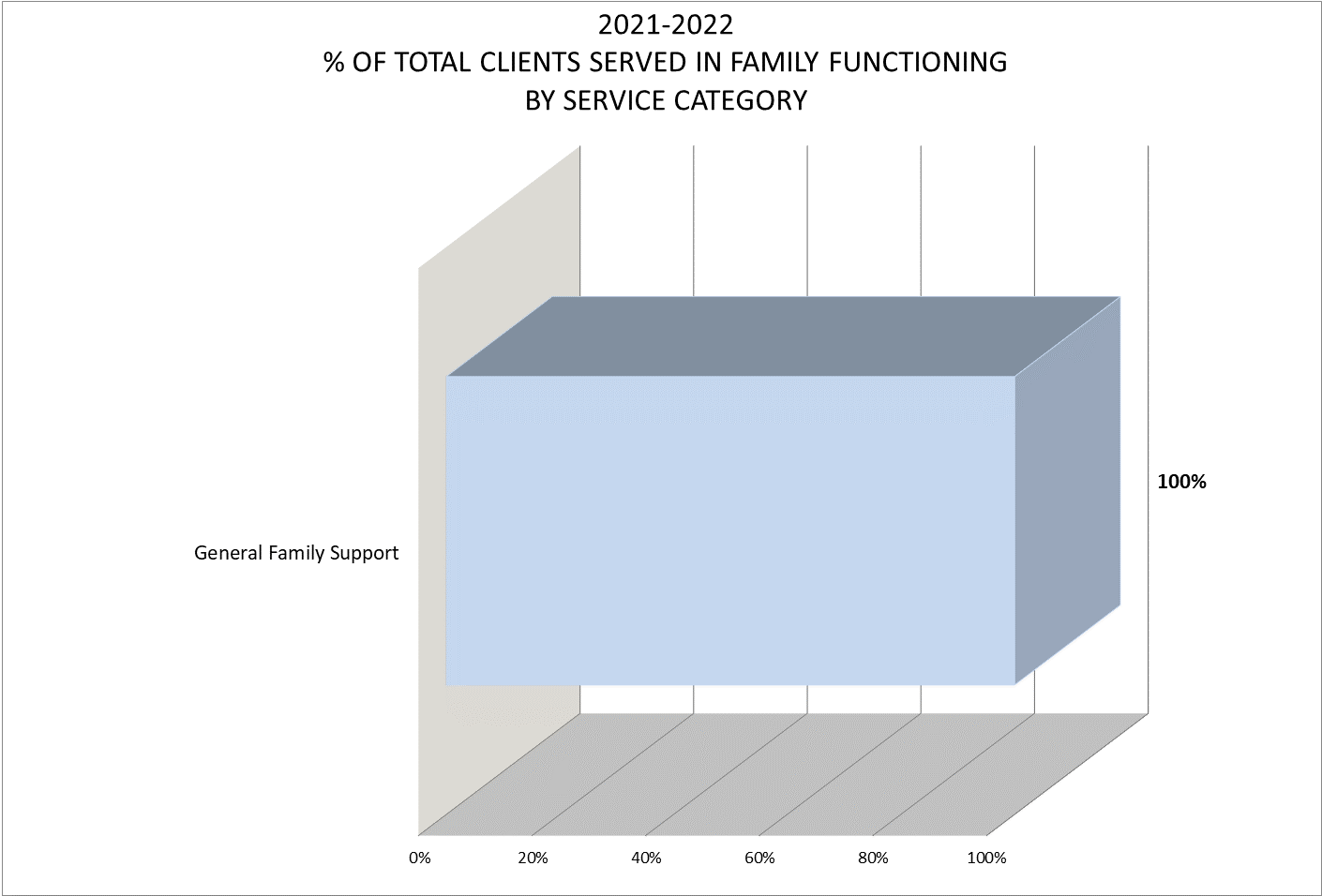
Result Area 1: Improved Family Functioning

Description

The Result Area 1: Improved Family Functioning goal is to increase community capacity to support safe families. Programs included in Result Area 1 provide parents, families, and communities with relevant, timely, and culturally appropriate information, education, services, and support. The Commission’s strategy is to fund programs that are working towards the two strategic plan objectives for Result Area 1, which are area: (1) Increase parental and caregiver knowledge, skills, and access to resources to support their child’s development and (2) Increase a sense of community in the lives of families by increasing connections, relationships, and concrete support for parents and caregivers.

Eleven Prop 10 funded programs are categorized under Improved Family Functioning and represent 47.7% of the 2021-2022 budget. Seven of the programs are grouped under “Family Resource Centers with Differential Response services.”

The amount budgeted in Result Area 1 is the largest of any other result area for fiscal year 21/22 suggesting that funding for Improved Family Functioning continues to be critical in the provision of services for children and families.



Result Area 1 Services and Service Delivery Strategies

The number of programs and services, as well as the amount of funding dedicated to the Improved Family Functioning Result Area, indicates that it plays a significant role in fulfilling the goals of the Commission's strategic plan. The funding that is allocated to Result Area 1 is intended to increase the communities' capacity to support safe families, leading to a population result for Stanislaus County of, "Families Are Supported and Safe in Communities That Are Capable of Strengthening Families." Programs contribute to this population result by providing a variety of services that result in changes for children and families to improve family functioning, and ultimately, safety.

Desired Result: Families Are Supported and Safe in Communities That Are Capable of Strengthening Families

Objectives:

- *Increase parental and caregiver knowledge, skills, and access to resources to support their child's development*
 - *Strive to ensure all parents and caregivers of children in Stanislaus County receive parenting education from the earliest possible moment*
 - *Decrease child abuse and neglect*
- *Increase a sense of community in the lives of families (connections, support, etc.) by increasing connections, relationships, and concrete support for parents and caregivers*

The Commission has employed the following services and service delivery systems to progress towards these objectives, to increase community capacity to support safe families, and contribute to the population result "Families are Safe":

- **General Family Support**

Commission programs provide general parenting education, support basic family needs, school readiness education, family advocacy and literacy services. Programs may also provide referrals or service information about various community resources, such as medical facilities, counseling programs, family resource centers, and other supports for families with young children. This includes 211 services or other general helplines. In general, this category reflects services that are designed to be less intensive and shorter term for families.

Services are offered by a spectrum of providers, from community-based family resource workers to school based staff. A variety of strategies are used to provide the services, including differential response (a flexible approach for child welfare to respond to child abuse/neglect referrals), group classes, and virtual workshops.

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
<ul style="list-style-type: none"> • 6,931 children 0-5 received services designed to improve family functioning • The parents of 1,610 children attended parenting education classes • The families of 5,151 children 0-5 received resources or referrals to improve family functioning • 4,861 children 0-5 whose caregiver participated in literacy services received a book 		
<ul style="list-style-type: none"> • 41% of children 0-5 obtained a library card after receiving literacy services (92/223) • 441 children 0-5 received a developmental screening and 31 were referred for supportive services as a result 		
<ul style="list-style-type: none"> • 97% of caregivers participating in parent education (1,220/1,254) reported an increase in skills or knowledge • 82% of caregivers participating in parent education (986/1,203) reported an increase in confidence in parenting ability • 77% of children 0-5 whose caregiver received literacy services (1,115/1,507) increased time reading at home with their family 		

Result Area 1: Improved Family Functioning								
Program	Amount Expended in 2021-2022 <small>(% of 2021-2022 allocation)</small>		Total #Children 0-5 Served <small>(or served through family members)</small>	Cost per Child 0-5	Total Award To-Date <small>(7/1/2007-6/30/2022)</small>	Cumulative Amount Expended <small>(7/1/2007-6/30/2022)</small>	% of Cumulative Amount Expended	
211	\$	20,000 (100%)	2,387	\$ 8	\$ 1,573,159	\$ 1,446,044	92%	
Healthy Start*	\$	498,398 (100%)	2,760	\$ 181	\$ 9,479,185	\$ 9,444,734	99.6%	
The Bridge (FRC)	\$	150,000 (100%)	175	\$ 857	\$ 2,654,500	\$ 2,569,041	97%	
PlanetBaby!	\$	24,626 (95%)	102	\$ 241	\$ 25,920	\$ 24,626	95%	
Family Resource Centers (providing Differential Response and AfterCare Services)* (7 contracts)	\$	1,467,383 (98%)	1,507	\$ 974	\$ 25,096,598	\$ 23,450,405	93%	
TOTAL	\$	2,160,407 (98%)	6,931	\$ 312	\$ 38,829,362	\$ 36,934,849	95%	

* Data for expenditures, award, and cost per child includes the total of entire contract and amount awarded. The amount of support funding and expenditures was split between result areas in prior years but has been inclusive since FY 2017-2018.

211 Stanislaus County

Agency: United Way of Stanislaus

Current Contract End Date: June 30, 2022

Program Description

211 Stanislaus County (211) helps meet the essential needs of Stanislaus County residents by providing health and human service information and referrals through trained and live Call Specialists; 24 hours a day, 7 days a week, and 365 days a year in more than 120 languages through language line services. Callers are provided up-to-date information, referrals and offered a follow-up call, 7-10 days from their initial call to determine the outcome of referrals provided. 211 can be accessed by dialing 2-1-1, 1-877-211-7826 (toll-free), texting their zip code to 898211, and by visiting www.stanislauscounty211.org

Through comprehensive outreach efforts, 211 staff members also strive to educate the County at large of 211's ability to provide vital information and referral services including critical resources in times of disaster to those who live in underserved areas, and households with children 0-5.

Finances			
Total Award July 1, 2007 – June 30, 2022	FY 21/22 Award	FY 21/22 Expended*	Cumulative Amount Expended
\$1,573,159	\$20,000	\$20,000 (100% of budget)	\$1,446,044 (92% of budget)

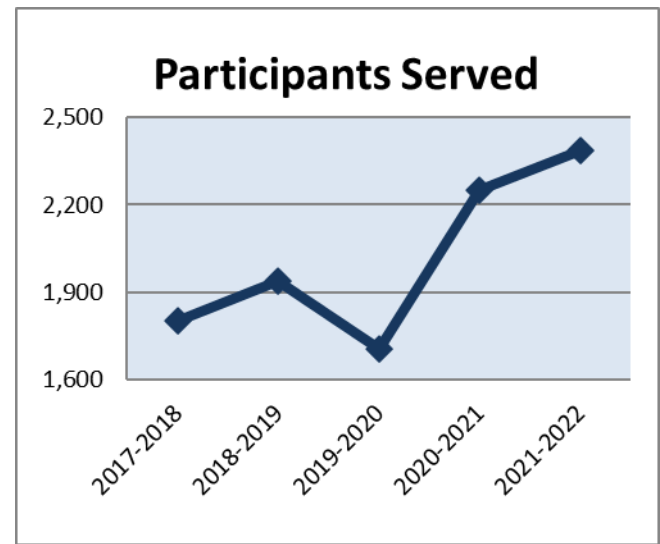
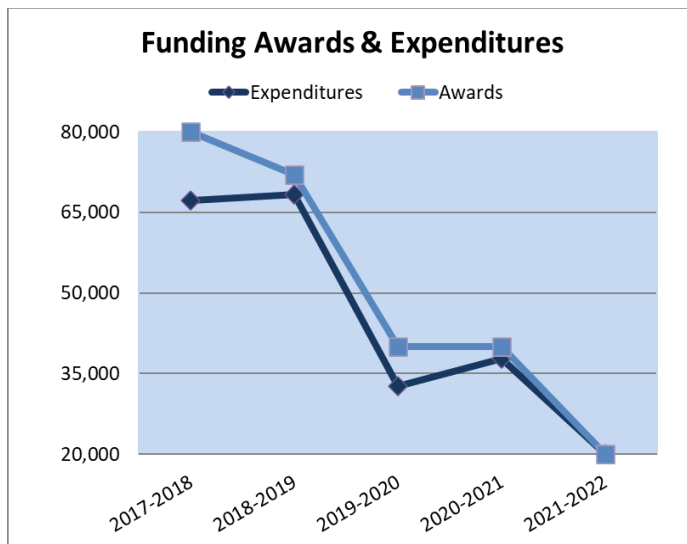
FY 21/22 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Marketing	Indirect Cost Rate	Cost per Caller (2,387 callers with a child 0-5)
\$20,000	\$0	\$0	0%	\$8

PARTICIPANT TYPE	% SERVED
Children 0-5	53%
56% <3; 44% 3-5;	
Parents/Guardians	40%
Other Family	7%

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	60%
White	16%
Black/African American	8%
Asian	1%
Alaska Native/American Indian	2%
Pacific Islander	2%
Multiracial	4%
Other	5%
Unknown	2%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	72%
Spanish	28%
Hmong	-
Other	-
Unknown	-

Participants Served Comparison by Fiscal Year



Funding for 211 has decreased as the Commission has begun implementing its 2019-2024 Strategic Plan. 211 has struggled in the past several years to consistently expend the award amount but was able to expend 100% in 21/22. There was an increase in participants served in 18/19 attributed to the program's partnership with the Focus on Prevention homeless initiative. The significant increase in participants served in 20/21 and 21/22 was a result of families needing assistance finding resource during the COVID-19 pandemic.

Program Highlights

- 211's higher than normal call volume was sustained through 2021-2022 as the COVID-19 Pandemic continued and, as a result, the call center's standard "Disaster" call handling protocol, which limits the amount of demographic data collected from callers, remained in place. 211 believes this impacted the demographic information collected related to callers with children 0-5.
- 14% of callers were from households with a child 0-5, meeting the program target outreach for 0-5 families of 11%.
- In 2021-2022, United Way of Stanislaus County (UWSC) 211 added a more robust two-way texting component to their services. Now individuals can text their zip code to 898211 to begin a text request for services and a Call Specialist will reply asking them how they can assist. When the Call Specialist determines what the individual's need is, they will text back a list of available resources.
- In 2021-2022 while COVID-19 restrictions began to lift, social gatherings were still at a minimum and 211 outreach activities remained limited as a result. However, 211 was able to participate in the following outreach activities:
 - Migrant Education Parent Meeting
 - Turlock 10th Annual Community Awareness Day
 - Annual Victims' Right Rally & Family Safety Fair
 - SCOE Family Resource Fair
 - Everett Elementary STEM/STEAM Family Night
 - Beyer High School's 1st Annual Community Resource Fair
 - First 5 & SCOE Early Care & Education Conference
- United Way of Stanislaus County partnered with Amazon and Second Harvest to provided 400 food boxes to families at Robertson Road between July 2021 and November 2021. Each food box included information on 211 services.

- The following were common types of service requests in 2021-2022:
 - Housing / Shelter / Rent – 5,921 requests
 - Utility Bill Payment – 2,915 requests
 - Disaster Related Services – 2,349
 - Health Related Services – 1,612 requests
 - Family-Community Services – 1,098 requests
- Leveraging: 211 received \$80,000 in funding from Stanislaus County Community Services Agency, \$75,000 from Kaiser, \$48,904 from Goodwill Industries and \$15,000 from Sutter Health.
- Race, Equity, Diversity, Inclusion Practice / Cultural Proficiency: All of 211's call operators are bilingual (English/Spanish) making the dialogue more proficient between the caller and the call specialist. All other languages are handled through the AT&T Language Line Services to provided translation services in over 120 languages as needed. Furthermore, United Way of Stanislaus County is making additional extensive outreach efforts to target diverse groups of the community who may not use 211 services currently.
- Collaborations: 211 continues to collaborate with many agencies/programs throughout the county to educate staff, clients and the community through presentations, material distribution and attendance at scheduled outreach fairs/events in the community. During COVID-19, United Way and 211 continued to collaborate with community partners using Zoom and other digital platforms. United Way and 211 have partnerships already in place with local organizations, city/county government and existing collaborations that include: Stanislaus County agencies (OES, HSA, CSA, Cal-EMA); Advancing Vibrant Communities; Stanislaus CBO Collaborative; Stanislaus County Focus on Prevention; Stanislaus Housing and Supportive Services Collaborative/Continuum of Care; and Turlock Community Collaborative Meeting. In addition, United Way and 211 increased their collaboration with the Family Resource Centers in the county by funding them to provide basic needs, utility, and rental assistance to families.
- Sustainability: The COVID-19 Pandemic created various areas for 211 to support the community, for example, the Stanislaus County Pop-Up Call Center and Senior Food Delivery collaboration with Love Our Neighbors. This could create additionally funding for 211 to manage these projects effectively post COVID-10. Recently 211 has been recognized as an important partner to become the single point of entry for major county initiatives such as the Emergency Rental Assistance Program. 211 will continue to pursue additional opportunities to be the single point of entry for other important projects to support the communities they serve.

Prior Year Recommendations

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> • UWSC continually seeks sources of funding to ensure 211 service will continue. As needs arise in our county, the need to do more outreach and expand our database grows. Additionally, funding is necessary to do more outreach, update database, and improve technology and user interface. First 5 funding is critical to our 211 as our revenues have declined over the years. This fiscal year, UWSC secured two funding sources that helped leverage funding and those were from Sutter Health and Kaiser Permanente. We will continue to seek new avenues for in the coming fiscal year.

2. Continue to stay informed on community resources as much as possible to ensure referrals given to callers are appropriate and available.

- We continued to attend community meetings around the county (for example, Promotoras and Turlock Community Collaborative) to learn about any updates or new additions that we needed to add our database. We also looked at data on a monthly basis to determine which service providers were at the top for referrals and then ensured that we were reaching out to them to update their programs (for example, utility assistance was a huge concern for the year so we ensured that we were proactively calling entities that provided that service and updating their information so that callers received the most current information). When people called or emailed us through the website, we answered enquiries quickly especially when it concerned a service provider.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
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OUTPUTS / OUTCOMES	PLANNED	ACTUAL
211 callers have access to health and human services program information 24/7/365	100%	81% (13,044/16,053)
211 callers with children 0-5 have access to health and human services program information 24/7/365	100%	74% (1,778/2,387)
11% of callers have children 0-5	11%	15% (2,387/16,053)
Callers with children 0-5 years are unduplicated callers	75%	74% (1,778/2,387)
211 callers with children 0-5 who are contacted for follow-up report having their needs met through referrals after calling 211	50%	90% (102/117)
211 callers with children 0-5 who are contacted for follow-up report satisfaction with the services they received from 211	80%	91% (107/117)

Recommendations

This program has undergone multiple annual and periodic evaluations by Commission staff and the program has been responsive to prior years' recommendations. As the program enters its "maturation phase," it is recommended that the program continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.

Additionally, it is recommended the program develop cross-training for contract requirements and reporting to ensure continuity of services if staff are out or leave the organization.

Healthy Start

Agency: Stanislaus County Office of Education

Current Contract End Date: June 30, 2022

Program Description

Nine Stanislaus County Healthy Start sites form a collaborative connecting children and families with resources, support and education essential to create and sustain healthy communities. Located on or near school sites, the sites link schools with the community to provide a safety net of culturally appropriate and family centered programs, services, referrals, and support for families with children 0-5. By connecting with families of school age children, Healthy Start also connects with families who have children 0-5 who are not accessing resources in any other way. The sites serve the populations specific to their communities, and some specialize in serving teen parents who are attending school. Healthy Start sites build relationships by meeting families where they are and reflect the demographics of the communities they serve.

The 9 countywide Healthy Start sites provide services to families with children 0-5 that include walk-ins, telephone calls, referrals, monthly presentations, and written materials about community resources and agencies so families will become more knowledgeable and access services. Healthy Start sites also provide sessions through various programs that include information on health, nutrition, and safety issues. In addition, Healthy Start sites provide child development strategies and tools for caregivers to support involvement in their children's development and education.

Stanislaus County Office of Education (SCOE) Healthy Start Support provides assistance in multiple ways to the individual Healthy Start sites. SCOE conducts site visits to each of the locations to provide technical assistance in the areas of budgeting, health services, outreach, education, sustainability, contract compliance, reporting, and operational issues. Regular consortium meetings are also facilitated to strengthen the countywide Healthy Start collaborative and to provide a forum for information, trainings, partnership development, and sharing of resources and best practices. The meetings have fostered a strong sense of collaborative purpose to serve children 0-5 and their families in Stanislaus County.

Finances			
Total Award March 15, 2002 – June 30, 2022	FY 21/22 Award	FY 21/22 Expended	Cumulative Amount Expended
\$9,479,185	\$498,398	\$498,398 (100%* of budget)	\$9,444,734 (99.6% of budget)

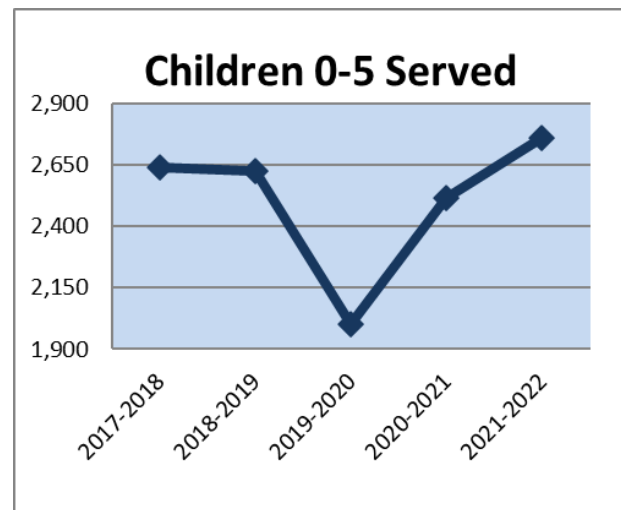
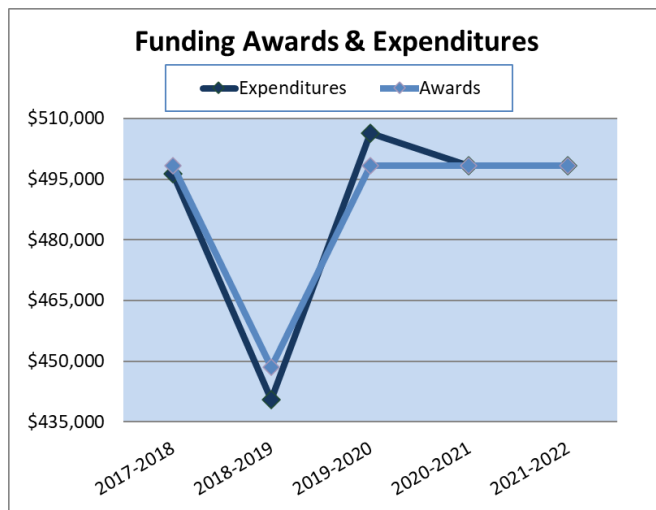
FY 21/22 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Healthy Start Sites	Indirect Cost Rate	Cost Per Child 0-5 (2,760)
\$67,689	\$38,570	\$381,622	9.8% (excludes sites)	\$181

PARTICIPANT TYPE	% SERVED
Children	48%
29% <3; 71% 3-5	
Parents/Guardians	42%
Other Family	10%

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	79%
White	13%
Black/African American	1%
Asian	1%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	1%
Other	2%
Unknown	5%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	51%
Spanish	48%
Hmong	-
Other	1%
Unknown	-

Children 0-5 Served Comparison by Fiscal Year



Funding for Healthy Start has remained stable except for 18/19 when all programs received funding reductions in an effort by the Commission to balance its budget while going through extensive strategic planning. A prior year technical adjustment in 19/20 is the reason the program appears to have spent over its award. School closures as a result of COVID-19 impacting all sites caused a significant decline in the number of children served in 19/20. As the sites adjusted to providing services in alternative formats, the number of children served increased in 20/21 to nearly pre-pandemic numbers. Schools opening in 21/22 allowed the sites to resume regular service delivery and saw an additional increase in participants served.

Program Highlights

- The 9 Healthy Start sites funded by the Commission are located at the following schools: Ceres, Downey, Franklin, Hughson, Keyes, Orville Wright, Petersen Alternative Center for Education (PACE), Riverbank, and Robertson Road.
- In 2021-2022, the community began to transition back to in-person engagement and Healthy Start Family Resource Centers resumed many of their regular in-person events and services as well. Several sites also continued to offer some online or hybrid services in order to meet the needs of families who continue to find the virtual model the most appropriate and accessible.
- The Healthy Start scope of work was updated in 2021-2022 to better align with the Commission's 2019-2024 Strategic Plan. As such, program activities focused heavily on community and outreach events, parent education, educational workshops/classes, literacy programs and book distribution. The timing of the transition back to in-person engagement and the community/outreach event focus of the scope of work aligned well as families were eager to get out and enjoy these types of events again.
- Free and reduced lunch eligibility continues to be an indicator of the socio-economic levels at the 9 sites. The percentage of students at sites who are eligible for free and reduced lunch ranges from 65% to 99%.
- The Hispanic/Latino population continues to be the largest ethnic group in each of the 9 school communities ranging from 60% to 85%.
- Families struggled to make ends meet during 2021-2022 but the 1,068 resource/referrals from the 9 Healthy Start sites helped them address their needs. Referrals included access to concrete supports such as food, utility assistance, medical services, etc. For example, Robertson Road Healthy Start, like many of the other sites, provided food to the community on a regular basis. With the help of various agencies, Robertson Road Healthy Start Family Resource Center was able to provide food to over 100 families twice a month at the Robertson Road site alone. Robertson Road Healthy Start Family Resource

Center also provided their clients with referrals to other agencies around Modesto that could help them with food and other necessities.

- The program continued to use Persimmony, an online data tool, to further improve accuracy, efficiency and save staff time. Persimmony was helpful in tracking and reporting the new scope of work outcomes implemented in 2021-2022. SCOE Healthy Start Support staff continued to work closely with Persimmony technical staff to ensure data is collected and reported in the most accurate and efficient way.
- Leveraging: In 2021-2022, the 9 Healthy Start sites reported receiving \$572,071 directly from State and Federal government sources, local government sources, and in-kind services or goods generated by participating school sites.
- Race, Equity, Diversity, Inclusion Practice / Cultural Proficiency: The largest ethnic group served continues to be Hispanic/Latino at all of the 9 Healthy Start sites/districts. Materials and programs are culturally sensitive and provided in both Spanish and English. Most staff are bilingual or have bilingual support available as needed. In addition, SCOE Healthy Start Support attended multiple REDI trainings throughout the year and shared out key-takeaways with the collaborative at meetings so that sites are able to implement best practices. Trainings completed by Healthy Start Support included: (1) Culturally Responsive Relationships Right from the Very Start, (2) Nurturing Culturally Responsive Relationships, (3) Partnering with Families in Culturally Responsive Ways During Challenging Times, and (4) Using Culturally Responsive Practices During Transitions. SCOE Healthy Start Support also attended a webinar through Discovery Education titled, "Equity Talks."
- Collaboration: All sites work with other FRCs in their community, other Commission funded programs, and a myriad of other community organizations. The program reports the 9 Healthy Start sites collaborate with over 100 different agencies including government departments, community-based organizations, service organizations and local businesses.
- Sustainability: Site coordinators continue to keep community decision makers such as Boards of Trustees, County Supervisors, district administrators and school principals apprised of up-to-date Healthy Start information. For example, CASA del Rio Healthy Start presented at Riverbank Unified School District's Leadership meetings. Additionally, Ceres Healthy Start conducted a presentation to the School Board through the Superintendent's "What's Working" presentation series. The Healthy Start Family Resource Centers also support various community capacity building efforts through their continued partnerships with local businesses, faith-based and community organizations. For example, the coordinator at the Franklin Healthy Stat Family Resource Center also presented to City Ministry Network during their monthly meeting to garner support for their program.

Prior Year Recommendations

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
<ol style="list-style-type: none"> 1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends. 	<ul style="list-style-type: none"> • Sustainability: Site coordinators continue to keep community decision makers such as Boards of Trustees, County Supervisors, district administrators and school principals apprised of up-to-date Healthy Start information. For example, CASA del Rio Healthy Start presented at Riverbank Unified School District's Leadership meetings. Additionally, Ceres Healthy Start conducted a presentation to the School Board through the Superintendent's "What's Working" presentation series. The coordinator at the Franklin Healthy Stat Family Resource Center also presented to City Ministry Network during their monthly meeting to garner support for their program. • Leveraging: Sites continue to leverage school district resources such as: Riverbank Unified School District General Fund, Ceres and Hughson Unified LCFF/LCAP funds, Modesto City Schools Title I and LEA funds; and in-kind contributions such as AEB grant, and facilities usage for Riverbank and Ceres Unified School Districts, and

	<p>Modesto City Schools.</p> <ul style="list-style-type: none"> • Collaboration: All nine Healthy Start Family Resource Centers support various community capacity building efforts through their continued partnerships with local businesses, faith-based and community organizations.
<p>2. Continue its use of virtual services with families as appropriate.</p>	<ul style="list-style-type: none"> • Many of the sites continued to provide virtual services to families as appropriate. For example, in partnership with Learning Quest, CASA was able to host the ESL and citizenship classes on-line in addition to the in-person classes for the families who preferred the virtual option. CASA also hosted their monthly community collaborative meetings virtually August 2021– February 2022. • Ceres continues to provide consultations and referrals by phone. Additionally, Ceres Healthy Start referred families to virtual services offered by partnering agencies (i.e., parenting classes offered virtually by Life Works Parenting Tools). • At Downey, every student has an electronic device, which enables the program to have constant contact with students and families to address any challenge they encounter throughout the year. Downey was able to hold virtual meetings with students and families for counseling services as well as maintain electronic communication to make families aware of services and available resources provided by Healthy Start. • Franklin held many of their programs and services virtually, including: bi-monthly Parent Cafe educational presentations; weekly mental health information workshops; weekly Mother Empowerment programs; weekly Parent Institute for Quality Education sessions; weekly Latino Family Literacy Project sessions; weekly case management; Parent Support Group; and weekly parent/student services provided by Stanislaus State University MSW Interns. • At Keyes, after a few weeks of Sierra Vista coming out to the school, the program transitioned to holding their meetings virtually.
<p>3. Continue to work with Healthy Start sites and Persimmony to ensure data collected and reported is accurate to the program's best ability</p>	<ul style="list-style-type: none"> • SCOE Healthy Start support has continued to communicate with Persimmony to make adjustments to the application as needed and provide 1:1 training and technical assistance to Healthy Start sites during quarterly reporting to ensure that data collected and reported is accurate to best of the program's ability.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
OUTPUTS / OUTCOMES		
Caregivers of children 0-5 are made aware of program services through outreach	No Planned Outcome	298
Families with children 0-5 who attended community events reported expanded social connections	No Planned Outcome	14% (69/508)
Families with children 0-5 have knowledge and skills to support their growth and development - as evidenced by the following:		
Families are connected to community resources	No Planned Outcome	1,068
Families reporting improved parenting skills as a result of participating in parenting education	80%	91% (275/301)
Families reporting increased confidence in their parenting ability	No Planned Outcome	92% (278/301)
Families reporting increased parenting skills as a result of participating in workshops	No Planned Outcome	48% (152/314)
Children are eager and ready learners - as evidenced by the following:		
Families indicating increased reading time at home as a result of literacy services	No Planned Outcome	56% (258/461)
Children 0-5 have access to books at home	No Planned Outcome	3,336 books distributed
Virtual Storytimes are provided to the families	No Planned Outcome	43

Recommendations

This program has undergone multiple annual and periodic evaluations by Commission staff and the program has been responsive to prior years' recommendations. As the program enters its "maturation phase," it is recommended that the program continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.

Additionally, it is recommended the program:

- Implement practices to increase surveys collected from participants, even for virtual services.
- Implement strategies to increase reading time at home as a result of literacy services.

PlanetBaby!

Agency: West Modesto Community Collaborative

Current Contract End Date: June 30, 2022

Program Description

PlanetBaby! is a support group-based program engaging pregnant and parenting women through their baby's first year. The program is not a clinical model but is rather designed to provide the women participating in group sessions with the opportunities for social support as well as some education. The groups are founded upon the Five Protective Factors and are intended to help participants increase their protective factors to support their parenting success by helping them become more capable and confident in their skills. Groups sessions are offered in Spanish or English and are presented virtually or in a hybrid virtual/in-person format.

Finances

Total Award June 1, 2021 – June 30, 2022	FY 21/22 Award	FY 21/22 Expended	Cumulative Amount Expended
\$25,920	\$25,920	\$24,626 (95% of budget)	\$24,626 (95% of budget)

FY 21/22 Budget / Expenditure Data

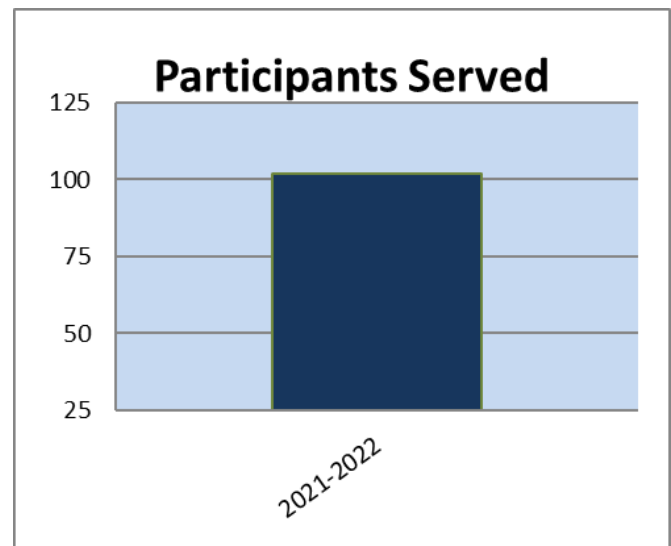
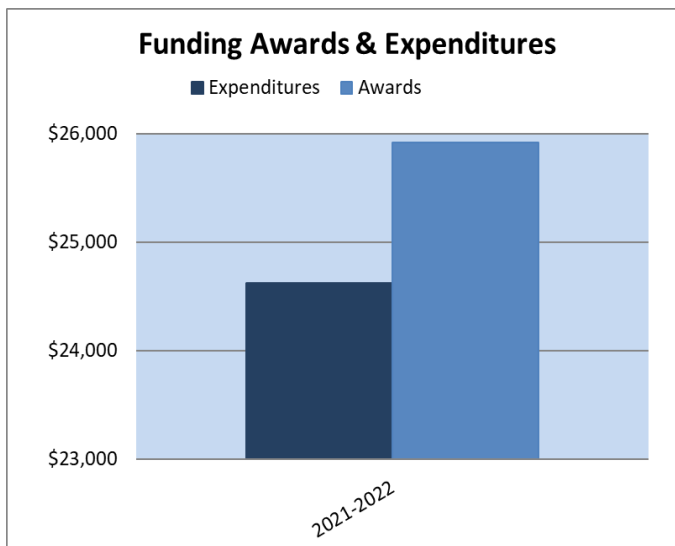
Personnel Costs	Services/Supplies	Indirect Costs	Indirect Cost Rate	Cost Per Participant (102)
\$16,466	\$6,154	\$2,006	10%	\$241

PARTICIPANT TYPE	% SERVED
Children	50%
100% <3; -% 3-5	
Parents/Guardians	50%
Other Family	-

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	100%
White	-
Black/African American	-
Asian	-
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	-
Other	-
Unknown	-

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	-
Spanish	100%
Hmong	-
Other	-
Unknown	-

Children 0-5 Served Comparison by Fiscal Year



The 2021-2022 fiscal year was the first year of the PlanetBaby! program. PlanetBaby! expended the majority of its award (95%). The program served 102 participants in its first year.

Program Highlights

- In 2021-2022, West Modesto Community Collaborative (WMCC) began providing the PlanetBaby! program to pregnant and parenting women through the first year of their child's life. Previously, WMCC provided the Healthy Birth Outcomes (HBO) program funded by the Commission in partnership with the Health Services Agency. HBO was a more intensive program that included case management and in-depth health education in addition to the support group sessions. PlanetBaby! is a lighter touch program primarily focused on developing protective factors in participants and thereby increasing their parenting skills. PlanetBaby! group sessions offer social support via peer sharing while also incorporating some relevant components of health education.
- In its first year of implementation, PlanetBaby! reached full capacity, serving 51 pregnant and parenting women and 51 babies. Once the program was at capacity, it worked with other FRCs to refer interested women to their PlanetBaby! programs available in the county.
- PlanetBaby! has a successful retention rate for those participating in the program which it attributes to several factors including offering engaging activity days, its hybrid model of learning (virtual and in-person format) as well as a monthly in-person check-in where the staff support participants with needed materials, resources, and referrals.
- WMCC has a Lightning Bug program that serves children ages 1-5 with kindergarten readiness skills. This program will provide participants of PlanetBaby! whose children age out of the program and want to stay to engaged a place to continue to receive services at the site.
- The needs of PlanetBaby! participants remain high, and the program works diligently to meet the moment with resources and services that are developed with families in mind. This includes access to low barrier bill and rent assistance programs, support services for families and children related to mental health, and access to support and resources. These resources are provided free for families in their community, specifically families without access to medical coverage. Staff work to find sponsors and funding to incentivize community participation by supporting families with diapers, food gift cards, lunches, and educational programs.
- In recent years, WMCC has seen an increase in participating families from Central and South America as well as a decrease in participation from families of Asian and African American race and ethnicity, which aligns with recent Census trends. PlanetBaby! continues their efforts in engaging families of all demographics and has partnered with African American

community leaders in West Modesto, the NAACP, as well as African American past participants of PlanetBaby! to an effort to continue to engage this population.

- **Leveraging:** In 2021-2022, West Modesto Community Collaborative used \$389 from Sunlight Giving to support the PlanetBaby! program.
- **Race, Equity, Diversity, Inclusion Practice / Cultural Proficiency:** PlanetBaby! continuously works at engaging families via presentations that are inclusive and encourage the participation of all demographics in their community. Historically, with hard-to-reach communities, testimony sharing has been a powerful tool to encourage participation. Through open conversations and invited guest speakers, they hope to engage and retain more mothers and families of all demographics. As such, PlanetBaby! continues to use these tools as a grassroots effort in creating visibility and welcoming programs for all families in their community.
- **Collaboration:** PlanetBaby! partnered with other Commission funded programs including the Family Resource Centers for resource sharing in addition to referring participants when the program is at capacity. WMCC partnered with community agencies such as CVOC that provide financial support in the form of emergency bill assistance for families. Through a partnership with Modesto Library, PlanetBaby! was able to secure donated books to provide participating families to encourage reading and learning. Finally, PlanetBaby! collaborated with the King Kennedy Board of Directors as an effort to further engage African American mothers from their community.
- **Sustainability:** WMCC received government funds, private donations, and grant opportunities to fund services offered at its site. However, majority of the PlanetBaby! program is provided by the Commission.

Prior Year Recommendations

PlanetBaby! was first funded by the Commission in the 21/22 fiscal year. Therefore, there are no prior year recommendations for the program.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
OUTPUTS / OUTCOMES		
Pregnant and parenting women attend support group sessions	No Planned Outcome	51
Pregnant and parenting women who attended support group sessions reported reduced stress	No Planned Outcome	96% (49/51)
Pregnant and parenting women who attended support group sessions reported improved protective factors in their lives	No Planned Outcome	96% (49/51)
Pregnant and parenting women who attended support group sessions reported increased parenting skills	No Planned Outcome	96% (49/51)

Recommendations

It is recommended that the program work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.

The BRIDGE

Agency: Sierra Vista Child & Family Services

Current Contract End Date: June 30, 2022

Program Description

In 1988, The BRIDGE was created in response to the arrival of a large number of Southeast Asian (SEA) refugee families into Stanislaus County without the skills or background necessary to function or participate in a meaningful way within the community. The majority of The BRIDGE clients are Cambodian, Hmong, and Laotian families. Profound poverty, difficulties with parenting, cultural adaptation, language, and fundamental belief differences challenge the Southeast Asian community. In response, The BRIDGE offers many services including parenting education/support, literacy services, interpretation, translation, and cultural liaison services to health care providers, schools, and legal and social service providers.

The BRIDGE provides culturally sensitive and knowledgeable services to the very reticent SEA population. The population has a history of poor service utilization, but The BRIDGE is a trusted service provider for the SEA community and has been successful in bringing in young SEA families with children 0-5. The BRIDGE provides focused outreach to inform families of the various programs offered. Additionally, other resource centers refer families to The BRIDGE when they determine that BRIDGE services would be more effective. The BRIDGE operates under Sierra Vista Child & Family Services, who provide administrative and fiscal services.

Finances			
Total Award June 1, 2007 – June 30, 2022	FY 21/22 Award	FY 21/22 Expended	Cumulative Amount Expended
\$2,654,500	\$150,000	\$150,000 (100% of budget)	\$2,569,041 (97% of budget)

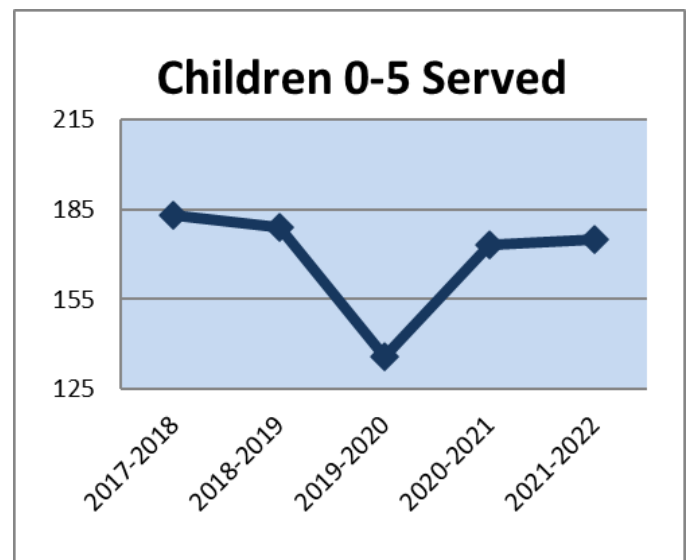
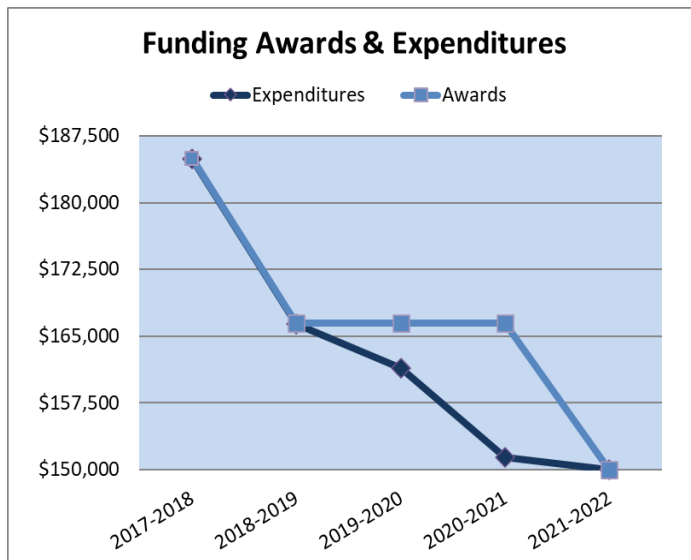
FY 21/22 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Indirect Costs	Indirect Cost Rate	Cost Per Child 0-5 (175)
\$98,608	\$29,379	\$22,014	17.2%	\$857

PARTICIPANT TYPE	% SERVED
Children	18%
37% <3; 67% 3-5	
Parents/Guardians	59%
Other Family	23%

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	-
White	-
Black/African American	-
Asian	100%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	-
Other	-
Unknown	-

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	-
Spanish	-
Hmong	24%
Other	76%
Unknown	-

Children 0-5 Served Comparison by Fiscal Year



Funding remained steady for The BRIDGE until 18/19 when all programs received a reduction in funding as the Commission went through intensive strategic planning and began efforts to balance its budget. As a result of a vacant position, The BRIDGE did not expend all of its award in 19/20 and 20/21. The Bridge did expend 100% of its award in 21/22. A reduction of staff hours to offset salary costs in 18/19 resulted in the decline of children 0-5 served for that fiscal year. Several factors influenced the program's ability to serve children 0-5 in 19/20 including relocating to a new site, two vacant positions during the year and the COVID-19 pandemic. The latter resulted in a shift to providing services on a more one-on-one basis. The increase in children served in 20/21 was a result of families impacted by the COVID-19 pandemic needing more services and The Bridge staff providing outreach to the community. The number served remained steady for 21/22.

Program Highlights

- The BRIDGE staff continued to engage families and children 0-5 during the COVID-19 pandemic. Parent education and literacy services were conducted via Zoom or one-on-one via teleconference as needed. As the pandemic began to lessen, services were cautiously offered in person at the site. Families were provided with materials to support school readiness and literacy activities. Positive parenting practices were embedded into all activities provided to increase caregivers' knowledge of appropriate child development and communication.
- The BRIDGE scope of work was updated in 2021-2022 to better align with the Commission's 2019-2024 Strategic Plan. As such, program activities focused heavily on community and outreach events, parent education, educational workshops/classes, literacy programs and book distribution. The timing of the change was well timed with the transition to in-person services and allowed The Bridge staff and families to engage in ways that haven't occurred in years.
- The BRIDGE staff continue to offer Parent Cafés to families. The Cafés offer families the opportunity to build connection with other parents and caregivers about topics that are relevant to them and hear how their counterparts handle them. The BRIDGE staff participated in the Parent Café training in 21/22 offered by the Commission to gain additional facilitation skills.
- The BRIDGE staff continue to distribute personal protection equipment (masks, disinfectant, sanitizer, etc.) as well as sharing COVID-19 updates provided by local health care providers to the SEA community.
- The BRIDGE staff continue to have low caregiver completion rates for surveys and pre/post-test for parent education services. Completed surveys are how caregivers can indicate improvement as a result of services and The Bridge staff should make additional efforts to collect this information for participants.
- Leveraging: In 2021-2022, The BRIDGE received \$26,944 from local government sources, \$20,460 from California Family Resource Association, \$20,000 from Sunlight Giving and \$7,854 from Together Towards Health.

- **Race, Equity, Diversity, Inclusion Practice / Cultural Proficiency:** The Bridge Family Resource Center continues to strengthen diverse relationships within the community to help provide equitable and inclusive services for all. Staff are provided with trainings opportunities to enhance culture competency.
- **Collaboration:** The BRIDGE has a long history of collaborating with the Modesto Police Department, MID, PG&E, Probation, CSU Stanislaus, Josie's Place, El Concilio, BHRS, among other organizations. The BRIDGE also has collaborative relationships with several local Modesto City School campuses; Robertson Road, Kirschen, and Burbank. The BRIDGE continues strong and active collaborations with West Modesto King Kennedy, CVOC, Clients' Rights Advocates, Modesto Commerce Bank, and the Cambodian and Laotian Temples. The BRIDGE also continues strong collaborations with doctors' offices, social security, the Community Services Agency, providing linkages to and interpreting services for families. The BRIDGE has created new relationships with other agencies and businesses including Modesto Commerce Bank, Self-Help Federal Credit Union, United Way, Public Health Advocates, Doctor's Medical Center, Stanislaus County Library, and Valley Mountain Regional Center, Health Plan of San Joaquin and Health Net. The Stanislaus Asian American Community Resource (SAACR) has reached out to and collaborated with The BRIDGE as well.
- **Sustainability:** The BRIDGE's continued strategy is to seek outside funding sources (grants, allocations, and other government support). The BRIDGE currently uses funding through grants from CSA CalFresh, Together Towards Health, Sunlight Giving and California Family Resource Association. However, the majority of the program's long running funding continues to be provided by the Commission.

Prior Year Recommendations

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> • Sierra Vista Child & Family Services continues to work on the Commission's priorities of sustainability, leveraging and collaboration to ensure services continue after the Commission's financial support ends. SVCFS annually updates its sustainability plan, instituting practices and procedures that build and strengthen fiscal, administrative, and service capacity (i.e., Joint Commission Accreditation, leadership training, Strategic Planning, staff training, fundraising). SVCFS consistently seeks to leverage new and diverse funding to broaden services to families and bolster financial stability. Lastly, SVCFS values collaboration throughout the organization and with partners to provide children and families with the most comprehensive services to meet the unique needs of the community as well as to minimize duplication of services.
2. Offer virtual services with families as appropriate.	<ul style="list-style-type: none"> • The BRIDGE significantly increased its virtual service delivery during the 2021-2022 fiscal year. Staff were trained in the fundamentals of using the virtual platform and subsequently worked to train the community. The virtual events are becoming better attended each quarter.
3. Increase caregivers completing pre and post-tests for services	<ul style="list-style-type: none"> • Since COVID, all services have been provided virtually and by phone. The staff strives to complete a survey after services are met and continues working on increasing the survey amounts.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
OUTPUTS / OUTCOMES		
Caregivers of children 0-5 are made aware of program services through outreach	No Planned Outcome	264
Families with children 0-5 who attended community events reported expanded social connections	No Planned Outcome	100% (118/118)
Families with children 0-5 have knowledge and skills to support their growth and development - as evidenced by the following:		
Families reporting increased advocacy skills as a result of participating in advocacy training/workshops	No Planned Outcome	100% (24/24)
Families reporting improved parenting skills as result of participating in parenting education	80%	100% (51/51)
Families reporting increased confidence in their parenting ability	No Planned Outcome	100% (51/51)
Families reporting increased parenting skills as a result of participating in workshops	No Planned Outcome	100% (27/27)
Children are eager and ready learners - as evidenced by the following:		
Families indicating increased reading time at home as a result of literacy services	No Planned Outcome	100% (95/95)
Children 0-5 have access to books at home	No Planned Outcome	95 books distributed
Storytimes are provided to the families of children 0-5	No Planned Outcome	38

Recommendations

This program has undergone multiple annual and periodic evaluations by Commission staff and the program has been responsive to prior years' recommendations. As the program enters its "maturation phase," it is recommended that the program continues to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.

Additionally, it is recommended that the program:

- Continue to find ways to integrate the updated Scope of Work services into the Bridge delivery system.
- Implement practices to increase caregivers' completion of pre and post-tests for services.
- Offer virtual services with families as appropriate.

Family Resource Center Countywide Summary

Agencies: Aspiranet, Center for Human Services, Ceres Partnership for Healthy Children,
Sierra Vista Child & Family Services, Parent Resource Center
Current Contract End Date: June 30, 2022

Program Description

In May 2005, the Children and Families Commission and the Community Services Agency (CSA) partnered to fund a network of Family Resource Centers (FRC's) to provide Differential Response (DR) and family support services to Stanislaus County communities. The intent was to provide families with children 0-5 and 6-17 and families at risk for child abuse/neglect with support services and a hub of resources. (DR is explained in more detail on the following page.) Originally, six contracts were awarded to serve Central/South Modesto, Ceres, Hughson and Southeast communities, Turlock, the Westside (Newman/Crows Landing, Grayson/Westley, and Patterson), and the Eastside (Oakdale/Riverbank). In May 2007 a seventh contract was awarded to serve North Modesto/Salida. In 2017-2018, After Care services were added as part of an expansion to CSA's portion of the contracts.

All FRC's provide the following core services: community resources and referrals, strength-based assessments and case management, parent education and support groups, school readiness education, mental health referrals, and child developmental screenings and referrals. In addition, each site provides unique services that address the needs of each community.

Finances							
Total Award June 1, 2005 – June 30, 2022		FY 21/22 Award		FY 21/22 Expended (% of budget)		Cumulative Amount Expended (% of budget)	
Commission Funds	Combined Funds (includes CSA)	Commission Funds	Combined Funds (includes CSA)	Commission Funds	Combined Funds (includes CSA)	Commission Funds	Combined Funds (includes CSA)
\$25,096,598	\$35,525,559	\$1,499,995	\$2,399,995	\$1,467,383 (98%)	\$2,096,073 (87%)	\$23,450,405 (93%)	\$33,059,182 (93%)

Cost per Child 0-5 to Commission (1,507) = \$974

PARTICIPANT TYPE	% SERVED
Children	26%
47% <3; 48% 3-5; 5% Unknown	
Parents/Guardians	38%
Other Family	36%

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	63%
White	24%
Black/African American	5%
Asian	1%
Alaska Native/American Indian	-
Pacific Islander	1%
Multiracial	2%
Other	1%
Unknown	3%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	65%
Spanish	33%
Hmong	-
Other	-
Unknown	2%

An Investment In Communities

Family Resource Centers and Differential Response

During the last 17 years, the Commission has invested over \$25 million dollars in Differential Response-Family Resource Centers (DR-FRCs). The funding for 21/22 represents 34% of the Commission's total program budget and 69% of the budget allocated to Improved Family Functioning. This investment is based on both published national research about DR and FRCs, as well as the results that Stanislaus County has experienced. The Commission is funding what works within an effective structure.

What Works

Family Resource Centers

When the Commission, CSA, and the community began the work necessary to develop the network of FRCs, research was evolving which indicated that FRCs were promising strategies for addressing child abuse and neglect, substance abuse, family violence, isolation, instability, community unity and health, and educational outcomes. The California Family Resource Center Learning Circle cites this research and offers the shared principles and key characteristics of an effective FRC. All of the funded DR-FRCs share these principles and key characteristics and apply them within their own communities in unique ways.

Shared Principles

- Family Support
- Resident involvement
- Partnerships between public and private
- Community building
- Shared Accountability

Key Characteristics

- Integrated
- Comprehensive
- Flexible
- Responsive to community needs

Differential Response

Studies across the nation regarding various DR programs and services have suggested positive results for children, families, and communities. Evaluations have demonstrated that the implementation of DR has led to quicker and more responsive services. Evidence also indicates that parents are less alienated and much more likely to engage in assessments and services, resulting in the focus on the families' issues and needs (Schene, P. [2005]).

Drawing from the success of DR in other communities, the protocol for Stanislaus County's DR was designed by the Child Safety Team, a group made up of Community Services Agency staff and other stakeholders. Parameters had been set by the state, and members of the group attended various trainings about how other states had successfully implemented DR. A strength based and solution focused model was selected as the mode of implementation, with the Strength Based Assessment serving as the foundational tool. This strategy is well documented in the literature as empowering families to not only engage in services, but to become their own best advocates.

Effective Structure

- ***FRCs provide an infrastructure and capacity to organize and supply services at the community level***
FRCs are "one-stop-shops" located in the heart of the communities they serve. With an array of public and private partnerships, FRCs have the capacity to provide services to individuals and families where they live, alleviating access and transportation barriers that often prevent them from getting their needs met. FRCs provide a less formal, more comfortable setting for receiving services, and staff are familiar and connected to the community at large.
- ***FRCs provide a framework for unifying the efforts of new and existing programs***
FRCs offer a gateway through which many programs and services are offered and coordinated, and they are at the center of the resource and referral process.
- ***FRCs provide a structure for linking finance/administration with community feedback, local development and improved program evaluation***
FRCs provide the opportunity for consumers and partners to share feedback about their programming, community needs, and quality of services. By implementing various strategies such as focus groups, surveys, informal discussions and broader community forums, FRCs can regularly evaluate outcomes and any emerging needs that require support.
- ***FRCs provide a single point of entry to an integrated service system that provides local access to information, education, and services that improve the lives of families***
Families experiencing crisis or trauma are often overwhelmed and confused when seeking support. FRCs make this process easier by initiating contact locally and working with families to develop a plan for support (eliminating or limiting the need for families to access multiple service systems on their own).

Family Development Matrix and Case Management (Improved Family Functioning)

All FRCs utilize the same assessment from the Family Development Matrix (FDM). The assessments are conducted with families who are referred through Differential Response or After Care. This process allows the case manager to discuss with the family their strengths and concerns in the areas of basic needs, child safety and care, self-sufficiency, social community, family interactions, child development, and family health and well-being. An empowerment plan is then developed with the family to address any issues in those areas, and the family is always engaged in the work to be done to achieve goals. Case management activities may include frequent home visits to support the family, referrals for adjunct services such as housing/food/employment needs, and individual parenting support. Each case managed family is reassessed every two months and the FDM is used to document the family's progress towards self-sufficiency and independence. Individual FRCs, and the staff members employed, have their own style of delivering case management services, such as length of total services and duration of visits. All of the FRCs also provide interpretation and translation for Spanish speaking families, as well as culturally sensitive services.

Parent Education and Support Groups (Improved Family Functioning)

Parenting education and support groups are offered by every FRC and are adjusted to meet the community's needs. Each FRC uses a minimum of one of three preapproved curricula. The number of classes, times, and frequency vary by program, but all sites provide or give access to classes in both English and Spanish. Positive parenting and discipline, nurturing, infant care, and advocacy are some of the subjects addressed during the classes.

Community Outreach

All FRC sites conduct community outreach in a manner that is most appropriate for their particular communities and populations. Some of the methods that FRCs employ are door-to-door outreach, presentation of information at both health and safety events, family fairs, and participation in community events. Some sites have conducted their own events as well, including open houses and community-wide workshops. Outreach is a critical component of reaching positive outcomes due to a variety of barriers preventing families from knowing about or seeking services on their own.

FRC Core Services

**All funded DR-FRCs
provide
these core services**

Resource and Referral (Improved Family Functioning)

Due to their deep knowledge of their communities and the county as a whole, the FRCs frequently connect families to community resources, services, supports and other FRC funded services based on the needs of each family. Referrals could include connecting families to food or housing assistance programs; medical, dental, and mental health providers; victim services, etc.

Developmental Screenings (Improved Child Development)

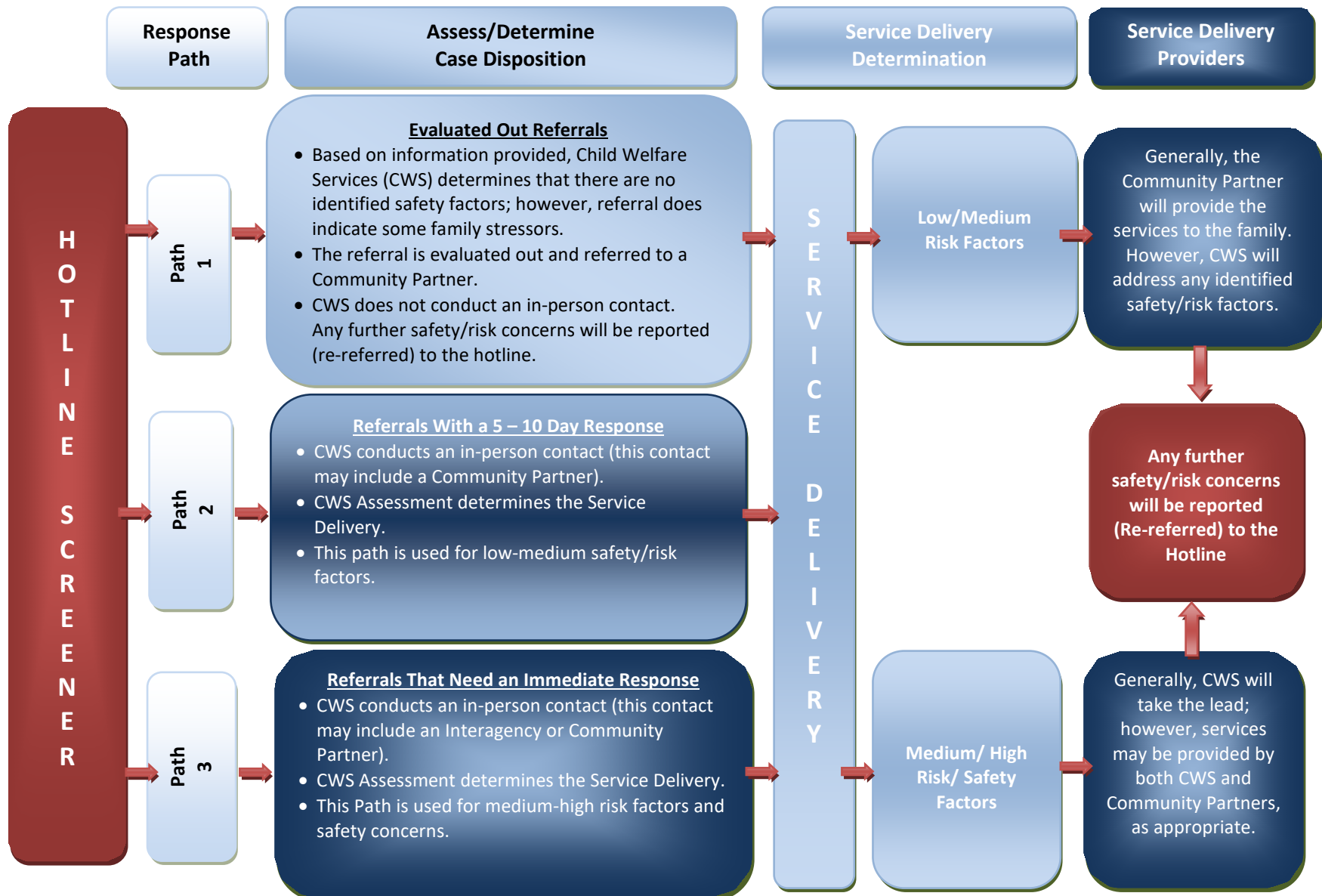
The Ages and Stages Questionnaire is used by all FRCs to screen children 0-5. The screening is intended for the early detection of developmental concerns in asymptomatic children. The caregiver is involved in the screening process, and child development activities and issues are discussed. If indicated based on the assessment score, referrals and support are given to the children and families.

School Readiness/Literacy Support (Improved Child Development)

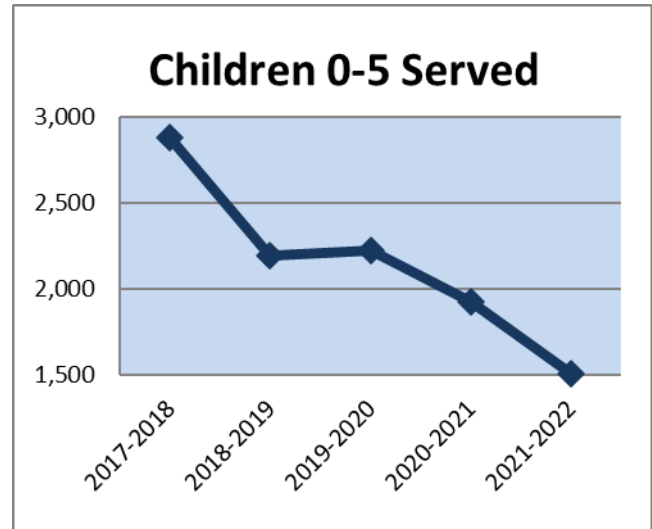
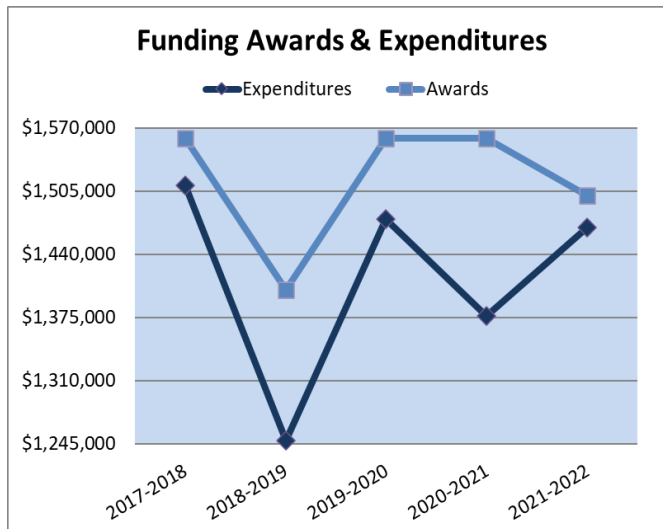
The FRCs use the Creative Curriculum program to provide children and their families with developmentally appropriate services that support active learning and promotes progress in all developmental areas. The FRCs may offer school readiness groups or include caregiver/child interactions in their parent education groups to support child development. The FRCs educate caregivers to support their children to meet physical, social/emotional, and cognitive development and early literacy in addition to connecting them to resources for age-appropriate books.

Differential Response is a strategy where community groups partner with the county's child welfare agency to respond to child abuse/neglect referrals in a more flexible manner (with three response paths instead of one). CSA's response to a referral depends on the perceived safety and risk presented. The family circumstances and needs are also considered. Families are approached and assisted in a non-threatening manner, and family engagement is stressed; prevention and early intervention is the focus. Below is a graphic presentation of the DR structure used by Stanislaus County.

Stanislaus Differential Response Paths



Children 0-5 Served Comparison by Fiscal Year



Commission funding for countywide FRCs has remained stable except for 18/19 when all programs received funding reductions in an effort by the Commission to balance its budget while going through extensive strategic planning. FRC expenditures have been relatively stable (averaging 93% of award). FRCs struggled to expend funds in 20/21 during the pandemic as they had to continue to offer modified services and participants chose to engage differently but were able to expend 98% of funding in 21/22 as they adapted to the virtual and hybrid service delivery models. The number of participants served declined significantly in 18/19 due to several factors: reduced funding, reporting errors that were corrected, and staffing vacancies that impacted outreach efforts and service delivery. There was a slight increase in the number served in 19/20 due to their efforts to engaging families during the pandemic using alternative formats. The number served declined in 20/21 as participants struggled to balance other critical needs such as supporting their children in online schooling. There was another decrease in children served in 21/22 as the FRCs grappled with staffing vacancies.

Program Highlights

- In 2017-2018, CSA added an additional \$400,000 to the FRC program for the provision of After Care services. CSA began referring clients who closed out their family unification and family maintenance cases with CSA to FRCs for After Care support. The intent of After Care services is to increase awareness of and utilization of community resources by referred clients. CSA and FRC staff continue to develop strategies to further engage After Care clients and the FRCs have been slowly increasing their work with this population.
- In 2021-2022, the scope of work for the FRCs was updated to align with the Commission's 2019-2024 Strategic Plan. This included standardized the parenting curricula used by the sites: Abriendo Puertas, Nurturing Parenting and Parent Cafés. The FRCs can use one or all three parenting programs based on the needs of their community. The Commission offered training for FRC staff in 21/22 to ensure optimal implementation of all the new parenting programs.
- In 2021-2022, the FRCs began offering PlanetBaby! as part of their contract. PlanetBaby! is a support group-based program engaging pregnant and parenting women through their baby's first year. The program is not a clinical model but is rather designed to provide the women participating in group sessions with the opportunities for social support as well as some education. The groups are founded upon the Five Protective Factors and are intended to help participants increase their protective factors to support their parenting success by helping them become more capable and confident in their skills. Groups sessions are offered in Spanish or English and are presented virtually or in a hybrid virtual/in-person format.
- In addition to collaborating with others in the region, the FRCs work together through the Multidisciplinary Team (MDT) within Stanislaus County. The MDT consists of providers of Differential Response services from each FRC. The Team has been meeting

twice monthly since the inception of FRCs. The MDT members discuss cases, protocol, and best practices, as well as share successes and challenges.

- Each FRC partners with a wide and unique spectrum of agencies, businesses, and community organizations to serve the needs of the children and families it serves. The list of partnerships is extensive and continues to grow as one of the critical roles of the FRCs is to link children and families to community resources. The FRCs have become established and trusted in their communities and are considered hubs of services. Partnerships and collaboration are the cornerstones for this development.
- Each FRC utilizes unique tools for evaluation and operational purposes. However, the following are the common tools all FRCs use:
 - ✓ Demographic Data Sheets – Excel spreadsheets developed by Commission staff in which programs input counts for services and the demographic data of participants; data is entered quarterly.
 - ✓ Stanislaus County Outcomes and Results Reporting Sheet (SCOARRS) - Completed quarterly throughout the fiscal year addressing five milestones: 1) Caregivers' assets and needs are assessed; 2) Mental health issues of caregivers are assessed; 3) Children receive early screening and intervention for developmental delays and other special needs; 4) Children possess literacy tools (books, skills) and caregivers demonstrate improved literacy skills; and 5) Caregivers possess parenting knowledge, skills, and support. The SCOARRS lists the strategies each program uses to reach milestones, and the indicators that show progress towards the milestones and planned outcomes.
 - ✓ Customer Satisfaction Surveys – Each FRC administers a customer satisfaction survey at least twice a year.
 - ✓ Employee Satisfaction Surveys – Each FRC administers an employee satisfaction survey at least once a year.
 - ✓ Family Development Matrix (FDM) – This assessment is used every sixty days to track the progress a case managed family is making towards independence and resiliency. The periodic assessments can be compared to document changes in the family unit.
 - ✓ Intake Forms/Logs – FRCs began using intake forms that collected consistent information. These coordinated intake forms allowed FRCs to collect and report data more consistently and accurately.
 - ✓ ASQ (Ages and Stages Questionnaire) – Every FRC uses the ASQ-3 to screen children 0-5 for developmental concerns.
- With the COVID-19 pandemic beginning to ebb in 2021-2022, the FRCs' provided services in a hybrid format with some services being in-person and some remaining virtual. Smaller groups returned in-person toward the end of the year, and some remained virtual depending on the participants' preference. Larger events may have been provided in-person, virtual or drive-thru, depending on the site or time of year the event was held.
- The FRCs continued to offer holiday and other events to families using drive through or pick-up formats which allowed families engage while maintaining appropriate social distance. Families received the materials needed to participate in the activities planned by the FRCs and could virtually join FRC staff for the scheduled activities. This allowed families to continue to have a sense of normalcy and much needed social connection as the pandemic continued. The FRCs also provided other materials in this way including: school readiness activities for families, self-care packets for caregivers, and food and hygiene kits for families.
- Families continued to feel the lingering effects of COVID-19 pandemic through 2021-2022 including: loss of employment or reduced work schedule, reduced availability or inability to access food and daily supplies, reduced availability or inability to access cleaning and hygiene supplies, and coping with anxiety and uncertainty. The FRCs remained strategic partners in supporting families due to being geographically dispersed throughout the County and their established relationships within their communities. The FRCs received additional COVID emergency grants from the Commission and other organizations in 2021-2021 to provide needed support for families such as housing and utility assistance, gift cards to purchase food, cleaning and hygiene materials, and other basic needs.
- The FRCs listened to the needs of their communities and added workshops to address the needs of their families. Workshop topics included: immigration, COVID-19, library services, couple's communication, financial literacy, goal setting, nutrition, and mental wellness.
- Leveraging: As a group, in 2021-2022, the FRCs leveraged a total of \$2,414,583 from local government sources and \$621,485 was generated by civic groups, foundations, and local fundraising events.
- Race, Equity, Diversity, Inclusion Practice / Cultural Proficiency: All DR-FRCs are committed to the continued development of cultural competency for staff. FRCs recruit and hire multicultural and bi-lingual staff to meet the needs of their diverse communities. A large number of bi-lingual Spanish staff are employed by FRCs. FRCs employ staff with fluency in other languages including Cambodian, Laotian, Hmong, Farsi, Assyrian, and American Sign Language. FRCs also contract with the Language Line for translation for other languages and interpreters as needed. The FRCs provide direct services, literature, and presentations in threshold languages and in other languages as material is available. Staff at the FRCs is provided with ongoing cultural competency

training in order to provide competent services to participants. The FRCs likewise implement Diversity, Equity, and Inclusion (DEI) practices at their sites to varying degrees including sending staff to trainings, offering resources and integrating DEI into their agency's strategic plans.

- **Collaboration:** FRCs have developed an extensive number of collaborations with public, private, and non-profit agencies including: El Concilio, The BRIDGE, other Family Resource Centers, Women Infant and Children (WIC), Workforce Development, Healthy Starts, International Rescue Committee, Family Justice Center, Salvation Army, United Samaritans, Children's Crisis Center, 211, Promotoras, local health plans and health clinics, churches, city governments, County departments, school districts, civic groups, CalFresh and many others.
- **Sustainability:** Each FRC has prepared a Sustainability Plan that contains the following elements: (1) Vision and Desired Results; (2) Identifying Key Champions and Strategic Partnerships; (3) Internal Capacity Building through development of a strategic planning process and (in some cases) accreditation; (4) Strategic Financing (including cost management and revenue enhancement); and (5) Establishing an Implementation Plan with Periodic Reviews. The FRCs have successfully developed Sustainability Plans and each year the FRCs report on the progress made in their individual plans.

Prior Year Recommendations

In the 2021-2022 Local Evaluation Report, the seven Family Resource Center contracts were evaluated together as an initiative and while the number and type of recommendations were the same for each contract, the individual responses of the contractors are listed below:

CERES	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> • On Sustainability: CHS and our FRCs will continue to grow a broad base of local community support and involvement to help sustain our work in the communities of Oakdale/Eastside, Westside/Newman/Patterson and Ceres. The agency will work to advance best practices and strong partnerships, as well as connect to larger, regional or national funding opportunities that support family strengthening work. Locally, CHS has been successful at promoting regional fund-raising events to increase our unrestricted funding, as well as utilizing MAA Medi-Cal as an additional resource to support FRC work. • On Leveraging: The FRCs continue to build a continuum of leveraged resources and support from public and private partners. We have leveraged monetary donations, manpower, food, clothing, space and household items (to name a few) and continue to look for ways to minimize costs and maximize our funding. A good example of leveraging is work in receiving several new sources of funding for 2022-2023 including CDBG Cares, ARPA, and miscellaneous donations that help us to support community members and their families. • On Collaboration: Collaboration on the county and local level will continue to be important for our FRCs. Each FRC collaborates with a multitude of partners, public and private, and helps increase our capacity to provide resources without duplicating efforts. The Stanislaus County FRC collaborative group is well-connected and there is continued interest on working together, vs. in silos. At CHS, we are working toward greater community

	engagement and involvement in our FRC. This movement of community will help ensure sustainability beyond our agency's involvement.
2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> Ceres has started Abriendo Puertas as a parenting education program this fiscal year. This addition has been helpful for providing an opportunity for parents to learn from guided materials as well as have rich dialogue with other parents.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> Ceres provided books to 430 children this year, an increase of 15% from last year. We are continuing to offer books and literacy support at community events, and we continue to partner with Stanislaus County library to provide free books to children 0-5.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> Over the last year, we found a virtual option is essential to creating access for families with barriers. Ceres will continue to offer virtual groups and 1:1 engagement as needed.
5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> We collected 101 surveys this fiscal year. We will continue to provide opportunities in person as well as virtually to submit survey feedback.

EASTSIDE

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> Center for Human Services continues to look for other fiscal resources to support our FRCs. Leveraging and collaboration with other partners, as well as developing other strategies, are a priority to ensure identified services continue as the Commission's financial support declines. The Center for Human Service is committed to continue to provide support to the Eastside Community as it has done for the past 20 years. Funds from targeted fund-raising events such as the Oakdale Crab Feed and Medi-Cal Administrative Activities (MAA) is an example of unrestricted funds that are available that we are using as a way to bridge financial gaps for the Oakdale FRC.
2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> This year we added Abriendo Puertas/Opening Doors as a way to increase engagement and so far it has been really successful.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> This has been challenging. We are able to outreach more in the community now and hope to increase the number of children receiving these services. We will also be offering classes in person and virtually.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> Groups will be a hybrid of in person and virtual in the coming year.

5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> As we fully open our FRC we will be able to have people do surveys in person and online. This should increase the number of surveys that are submitted.
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FAMILY RESOURCE CONNECTION	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> Both partners have awareness of this priority. This year was the second full year of funding for the PRC's West Modesto RAIZ Promotora program. The City of Modesto considers the PRC a high performing grant recipient, the PRC was approved for a \$40,000 parenting education program for the FY 21-22. The Parent Resource Center and Sierra Vista also both received contracts for the Strengthening Seniors Program with Stanislaus County Adult Protective Services. The duration of the contracts is two and half years. Also, in January 2022 the County ARPA Navigation contracts were awarded to Sierra Vista with Parent Resource Center as a sub-contractor. The duration of the contract is 36 months. Additionally, the Cal Fresh contract with Sierra Vista and PRC was increased, and PRC received \$30,000, which was an increase of about 40%. As FRCs, both PRC and SV continue to benefit from new partnerships and funding sources that developed as part of the FRC network.
2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> The Family Resource Connection partners recognize the importance of parents engaging in parenting education services. The Parent Resource Center noticed a need for classes to be offered at non-traditional business hours. The center responded by offering two evening classes (one English, one Spanish) and twice held Saturday morning series of classes. This resulted in a higher number of caregivers being able to successfully attend parenting education classes. There is still need for a class geared for caregivers of non-DR/AC children 6-17 years old. This age group is not covered by the FRC portion of the contract. However, PRC was able to leverage funding from other programs to ensure these parents had access to the quality education they need.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> The Family Resource Connection partners worked hard to increase the amount of children 0-5 engaging in literacy services. Last fiscal year 117 children were engaging in literacy services. This fiscal year 370 children 0-5 engaged in literacy services. The Parent Resource Center reviewed the importance of literacy with the staff and ensured each parent served received a new book as well as the education on the importance of reading to their children. Also, PRC worked diligently to create a stronger partnership with the Stanislaus County Library. Through this stronger partnership tours took place for the clients. The PRC also worked with the library administration to streamline the

	process of receiving a library card for those families who applied.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> All classes, services, and workshops were offered fully virtual or in a hybrid format. Efforts were made to ensure the same quality service was delivered via virtual platform. This fiscal year there was an increase in the number of joint visits with social workers that took place on virtual platforms. Staff was able to continue “door drops” of documents and emergency supplies on a client’s door step, if needed. In some instances, staff worked remotely and continued to serve the families with the same level of excellence as they would in the office. The creativity and flexibility of the staff allowed for services and programs to develop and flourish on any virtual platform.
5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> The Family Resource Connection partners strive to conduct as many surveys as possible, including those for virtual services. These surveys are essential to ensuring the needs of the clients are heard. The Parent Resource Center procedure is to survey any client who has received services after a substantial amount of time (3 months) or completed a full length class. By focusing the surveys to those who receive substantial services, quality feedback is assured. Every effort is made to stay in contact with clients long enough to perform this survey. For virtual parenting classes, clients are surveyed before they are able to pick up their completion certificate.

HUGHSON

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM’S RESPONSE
1. Continue to work on the Commission’s priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission’s financial support ends.	<ul style="list-style-type: none"> Sierra Vista Child & Family Services (SVCFS) completes annual updates of its sustainability plan, instituting practices and procedures that build and strengthen fiscal, administrative, and service capacity (i.e., Joint Commission Accreditation, leadership training, Strategic Planning, staff training, fundraising). SVCFS consistently seeks to leverage new and diverse funding to broaden services to families and bolster financial stability. SVCFS values collaboration throughout the organization and with partners to provide children and families with the most comprehensive services to meet the unique needs of the community, as well as to minimize duplication of services.
2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> Hughson and Waterford FRC’s continuously work with academic settings and organizations within the services area to establish a collaboration. The centers continue to promote services by completing general outreach local events and within locally existing programs in hopes of reaching new and preexisting

	<p>participants.</p> <ul style="list-style-type: none"> • Staff received appropriate training in parenting facilitation such as “Abriendo Puertas”, “Nurturing Parents” and “Parent Cafes”. Parenting classes have been provided virtually and in person throughout the year.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> • Hughson and Waterford FRC continue seeking opportunities to invite 0-5 children to engage them in literacy services. Staff provide outreach at community events, schools, and with local agency to seek new clients. • The FRC’s hosted a book fair and invited the library to increase literacy development and provide information on the local libraries. • The FRC is incorporating literacy services into its current weekly groups and hosted a virtual “Story Time”. • All Hughson and Waterford FRC events will incorporate literacy components that will promote literacy amongst children and provide parents with ideas and skills to continue with the promotion of literacy in the home setting.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> • The center has been providing both in-person and virtual classes accessible to the community. The plan is to continue providing both services. This allows families who struggle with transportation to still join the classes available to them.
5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> • The staff strives to complete a survey after services are met. Staff continues working on increasing the survey amounts.

NORTH MODESTO / SALIDA	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM’S RESPONSE
1. Continue to work on the Commission’s priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission’s financial support ends.	<ul style="list-style-type: none"> • Sierra Vista Child & Family Services (SVCFS) completes annual updates of its sustainability plan, instituting practices and procedures that build and strengthen fiscal, administrative, and service capacity. For example, SVCFS is Joint Commission Accredited. Additionally, SVCFS is focused on strategic planning, leadership development and training, staff training/ development, and fundraising. • SVCFS consistently seeks to leverage new and diverse funding to broaden services to families and bolster financial stability. • SVCFS values collaboration throughout the organization and with partners to provide children and families with the most comprehensive services to meet the unique needs of the community, as well as to minimize duplication of services.

2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> North Modesto/ Salida FRC has multiple staff trained in evidence-based parenting curriculums. This has allowed us to provide ongoing parenting classes throughout the year. The center continues to promote services by completing general outreach and conducting events in hopes of reaching new and pre-existing participants.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> North Modesto/ Salida FRC staff conduct outreach within various locations in our service area in hopes of connecting and engaging with new clients. North Modesto/ Salida FRC hosted a Book Fair to distribute books to existing and new clients/ families. North Modesto/ Salida FRC has collaborated with Salida and Stanislaus County Library to provide onsite Library card completions which require minimal follow-through. North Modesto/ Salida FRC is continuously trying to improve our literacy group in hopes of increasing participation from new or pre-existing clients. All North Modesto/ Salida FRC events incorporate literacy components that can lead to increased literacy engagement in the home settings.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> North Modesto/ Salida FRC is presently providing both in-person and virtual classes, and it will continue to do so moving forward. This will allow families to connect from a variety of locations with ease.
5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> The administration of surveys has increased at North Modesto/ Salida FRC in comparison to the previous quarter. Staff will continue to work on increasing survey numbers for participating families. North Modesto/ Salida FRC is developing simple surveys that can be administered via virtual platforms like Zoom

TURLOCK

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> The Turlock Family Resource Center continued to provide outreach and held free market events to inform the community of services currently being offered. TFRC collaborated with community partners and other FRC's within the network to continue to create new opportunities for funding, workshops and trainings. TFRC's Contracts Coordinator continued to look for grants and send them to TFRC leaders, as well as assist with the application process for funding.

2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> The Turlock Family Resource Center did not anticipate a high number of turnover in staff, but parent education classes continued throughout the fiscal year. Efforts in outreach were made by distribution of fliers to other organizations, and at Differential Response and After Care home visits.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> Due to high turnover staff rate this fiscal year, new staff were not able to receive the creative curriculum training and limited literacy services were provided. However, the family liaisons provided books, and resources to families of children ages 0-5 through home visits and virtual parenting classes.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> Classes continued to be held virtually and clients reported to prefer virtual classes due to lack of childcare and for health and safety concerns if classes were in person.
5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> In an effort to increase feedback from the families we are serving, TFRC has integrated customer satisfaction surveys into the intake and discharge process. In virtual settings clients are allocated time during the activity to complete the survey and send it to the hosting staff member. TFRC staff have also been trained in how to conduct these surveys over the phone or in virtual settings.

WESTSIDE	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> The Center for Human Services and Westside FRCs are committed to continue to look for programs and/ or grants to support and prioritize sustainability. CHS is committed to supporting the sustainability of both the Newman and Patterson FRCs as both have become an important resource to those and surrounding communities. Westside FRCs have made a lot of effort to leverage and collaborate with other organizations to provide services to Westside Communities. These efforts include monetary donations, food, meeting space, volunteers, and donated items like toys and clothes. M.O.V.E. Stanislaus has used our facility to connect disabled community members with transportation access in the County.
2. Work to increase the number of caregivers engaging in parenting education services.	<ul style="list-style-type: none"> Since we began to implement Abriendo Puertas as our parenting education we have seen an increase of parents attending the group. Having the group in person we believe will be more engaging for those parents that like to have person to person interaction but will provide a

	virtual alternative as well.
3. Work to increase the number of children 0-5 engaging in literacy services.	<ul style="list-style-type: none"> As more outreaching opportunities begin because of the change in Covid guidelines we will participate at community events to inform the community of our services. We will continue to use social media as basic platforms for outreaching. We believe that by holding groups in person or hybrid, word of mouth will also help to increase the number of children engaging in literacy services.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> As we have learned this fiscal year and when we began virtual groups, we have found that many parents still are cautious and prefer to participate in virtual groups. We will provide hybrid groups models as an alternative to those parents who want to continue to attend virtually but allow parents who feel comfortable to attend in person. We have learned that many families have access to technology, and we will continue to provide any services that we can in a virtual setting.
5. Work to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> Westside FRC's will work on a plan to be more intentional in collecting surveys in person or virtually. Other means of collecting surveys will be explored that may include using web-based platforms such as Survey Monkey to increase the number of surveys collected.

Planned Versus Actual Outputs / Outcomes

Family Resource Centers 21/22 Annual Scorecard Data

	Ceres Partnership		Eastside FRC		Parent Resource Center		Hughson FRC		North Modesto / Salida		Turlock FRC		Westside FRC		Total	
Participants develop expanded social connections from community events held by programs.																
Participants who attended community events and report expanded social connections	33%	173/524	0%	0/0	84%	492/589	100%	1,930/1,930	100%	177/177	100%	96/96	100%	24/24	87%	2,892/3,340
Caregivers participant in FRC activities as a result of outreach events.																
Caregivers who participant in FRC programs/services as a result outreach events	2%	88/5,048	1%	17/1,220	11%	1/9	2%	35/1,930	5%	1/20	10%	1/10	21%	0%	3%	252/9,474
Caregivers will have increased advocacy skills and knowledge.																
Caregivers who report an increase in advocacy skills as a result of advocacy training and/or guidance	100%	44/44	100%	16/16	100%	36/36	100%	20/20	100%	17/17	100%	1/1	100%	21/21	100%	155/155

Family Resource Centers 21/22 Annual Scorecard Data

	Ceres Partnership		Eastside FRC		Parent Resource Center		Hughson FRC		North Modesto / Salida		Turlock FRC		Westside FRC		Total	
Children whose caregivers gain an increase in skills and knowledge from attending parent education.																
Children whose caregiver attended parent education, completed a survey and indicated an increase in knowledge or skills	100%	182/182	100%	176/176	100%	120/120	100%	39/39	100%	18/18	100%	120/120	100%	77/77	100%	732/732
Caregivers gain an increase in skills and knowledge from attending parent education.																
Caregivers of children 0-5 who attended parent education, completed a survey and indicated an increase in knowledge or skills	100%	167/167	100%	169/169	95%	89/94	100%	26/26	100%	20/20	100%	102/102	100%	91/91	99%	664/669
Caregivers of children 0-5 who attended parent education, completed a survey and indicated an increased confidence in parenting ability	100%	167/167	104%	169/169	95%	89/94	100%	26/26	100%	20/20	100%	102/102	85%	77/91	98%	657/669
Caregivers have increased skills and knowledge from attending workshops.																
% of FRC families that participant in educational workshop/classes and report increased skills as a result of participation	100%	20/20	100%	2/2	100%	36/36	100%	60/60	100%	42/42	89%	48/54	0%	0/0	97%	208/214

Family Resource Centers 21/22 Annual Scorecard Data

	Ceres Partnership		Eastside FRC		Parent Resource Center		Hughson FRC		North Modesto / Salida		Turlock FRC		Westside FRC		Total	
Children 0-5 will receive developmental screenings using Ages & Stages Questionnaire.																
Children 0-5 received a developmental screening	15%	56/368	1%	3/297	43%	144/333	49%	72/148	29%	25/87	20%	20/99	18%	74/408	23%	394/1,740
Children 0-5 received early intervention or support services as indicated by screening results	0%	0/4	0%	0/0	0%	0/4	100%	9/9	100%	4/4	67%	2/3	0%	0/1	60%	15/25
Children 0-5 will receive literacy / school readiness services.																
Children 0-5 who received literacy services indicated increased time reading at home with family	84%	301/358	100%	54/54	76%	282/370	100%	29/29	100%	38/38	100%	37/37	94%	61/64	84%	802/951
Children 0-5 provided books	100%	301/301	100%	54/54	100%	370/370	93%	27/29	100%	38/38	100%	37/37	100%	65/65	150%	951/951
Children 0-5 attending literacy services who obtained a library card as a result of services	50%	10/20	0%	0/0	50%	57/115	100%	12/12	67%	12/18	0%	0/37	5%	1/21	41%	92/ 223

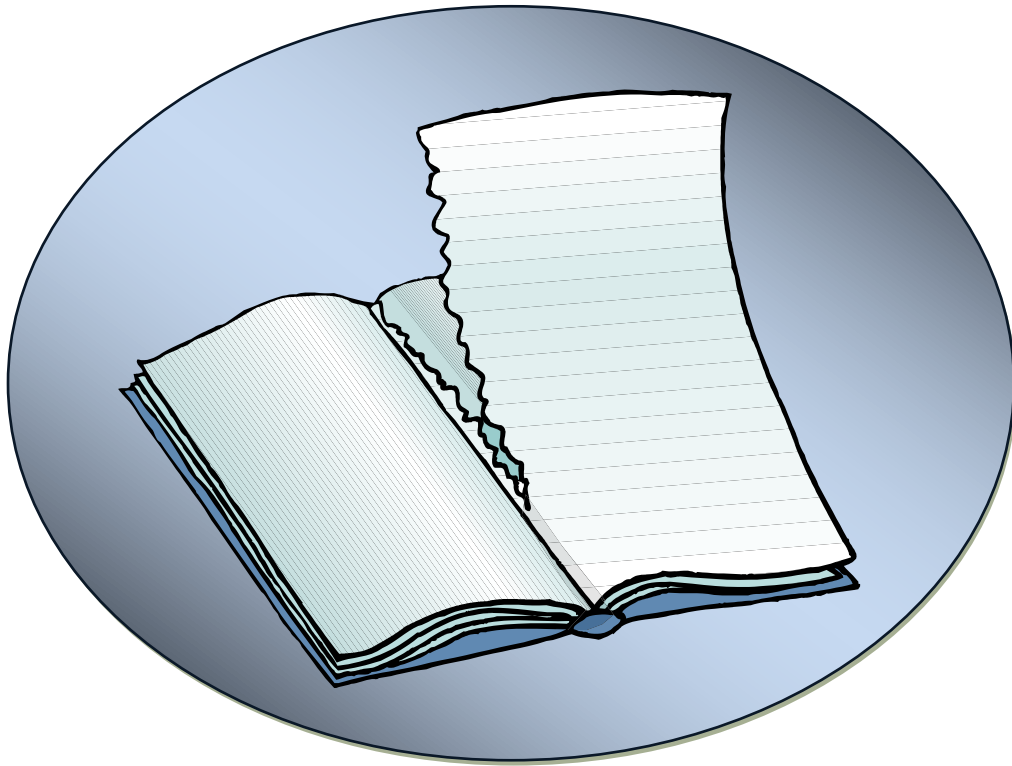
Recommendations

These programs have undergone multiple annual and periodic evaluations by Commission staff and the programs have been responsive to prior year's recommendations. As the programs enter their "maturation phase," it is recommended that the programs continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.

Additionally, it is recommended that Family Resource Centers:

- Implement strategies to increase the number of caregivers and children engaging in FRC services.
- Implement practices to increase surveys collected from participants, even for virtual services.
- Continue their use of virtual services with families as appropriate.

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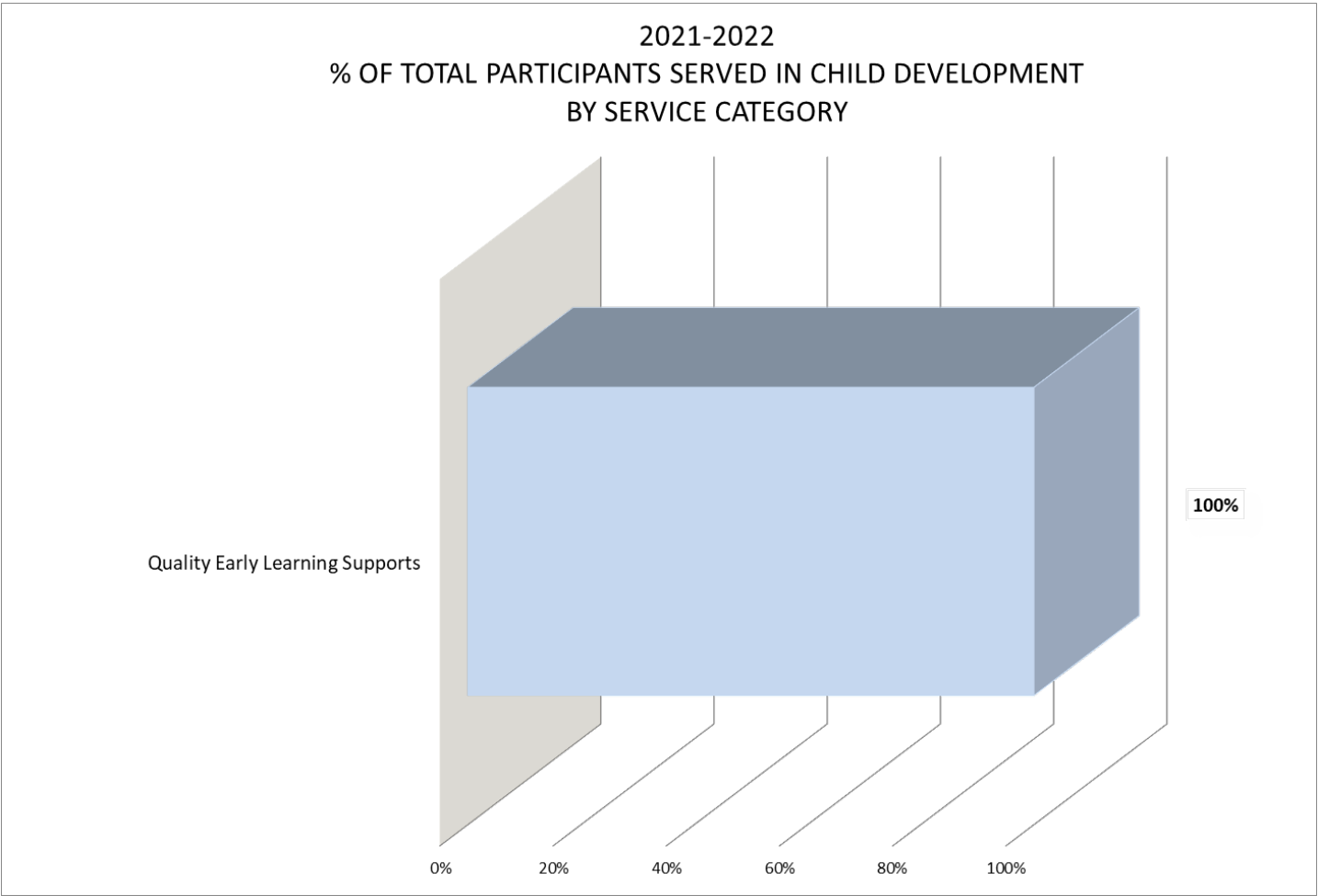


Result Area 2: Improved Child Development

Description

The goal of the Improved Child Development Result Area is for children to be eager and ready learners. Included in this result area are programs and services that focus on preparing children and families for school, and improving the quality of, and access to, early learning and education for children 0-5. While the Commission does not have contracts to report under Result Area 2 however, it does have expenditures which that are working towards the three strategic plan objectives for this result area.

The percentage of the budget represented by the Result Area 2: Improved Child Development is 0.25%.



Result Area 2 Services and Service Delivery Strategies

The funding allocated to the Improved Child Development Result Area is meant to support families and systems, leading to a population result for Stanislaus County of “Children are Eager and Ready Learners.” The programs and services contribute to this population result by providing services that result in changes for children and families. Although the percentage of the budget allocated to this result area has decreased over the years, the support that the Commission gives to services helps improve child development and helps children and families get ready for school. Since a variety of factors influence the development of a young child, the Commission supports efforts to help children become eager and ready learners by funding programs not only in the Improved Child Development Result Area, but in other Result Areas as well. Although programs categorized in other result areas also contribute to the Strategic Plan goal and objectives below, the emphasis in this result area is on school based programs and activities that positively affect early learning providers and environments.

Desired Result: Children Are Eager and Ready Learners

Objectives:

- *Increase the number of children that are read to daily*
- *Increase access to opportunities for professional growth for Family, Friend, and Neighbor providers*
- *Increase the number of children who are “ready to go” when they enter kindergarten (as measured by the Kindergarten Student Entrance Profile/KSEP)*

The Commission has employed the following services and service delivery systems to progress towards these objectives, increasing the capacity of families, providers, and schools to help children prepare for school:

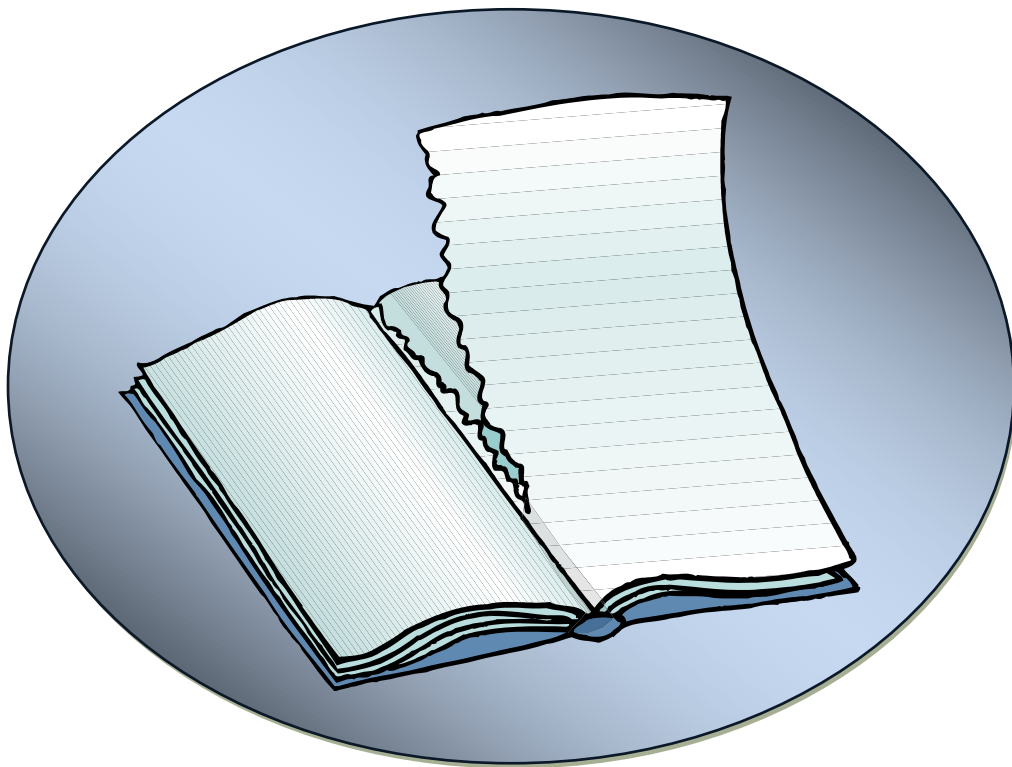
- **Quality Early Learning Supports**

The Commission, in partnership with Stanislaus County Office of Education, offers Early Childhood Educator/Provider Conferences designed to train and support those working daily with young children. Offering these conferences at no cost to participants remains a cost-effective means to serve many with beneficial results. In FY 2021-2022, a third conference was added, and the format was extended to a full-day conferences to allow attendee to gain further knowledge on topics relevant to their field.

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
<ul style="list-style-type: none"> • 309 individuals attended the three ECE/Provider Conferences offered in FY 21/22 to gain skills and knowledge • 98% of the surveyed attendees (226/230) rated the August 2021, February 2022 and May 2022 ECE/Provider Conferences as good or excellent • 82% of surveyed attendees (189/230) indicated they would take information they learned at the August 2021, February 2022 and May 2022 ECE/Provider Conferences and apply it in their family childcare home/classroom/center 		

Result Area 2: Improved Child Development	
Program/Activity	Amount Expended in 2021-2022
Early Care & Education Conferences	\$ 2,314
TOTAL	\$ 2,314

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Result Area 4: Improved Systems of Care/Sustainable Systems

Description

Programs and services funded specifically to improve coordination, leveraging, collaboration, or utilization of resources are to be categorized in Result Area 4: Improved Systems of Care/Sustainable Systems. While the Commission has several contracts under Result Area 4, they are not program contracts. These contracts support and nurture widespread and overarching collaboration, coordination, and leveraging. As such, they do not necessarily have direct participant impacts.

The percentage of the budget represented by the Result Area 4: Improved Systems of Care/Sustainable Systems for fiscal year 2021-2022 was 6%. As the Commission continues to implement its 2019-2024 Strategic Plan, which has an emphasis on collaboration and capacity building, the percentage of its total budget allocated to RA 4 may begin to increase. It should also be noted, expenditures that are allocated to "Other Programs" in the Commission's 2021-2022 budget should be considered as contributing to the results in Result Area 4. These include expenditures for staff time spent supporting and monitoring programs.

Result Area 4 Services and Service Delivery Strategies

Result Area 4 encompasses programs and services that build capacity, support, manage, train, and coordinate other providers, programs, or systems in order to enhance outcomes in the other result areas. Funding in this category also supports programs in their efforts to sustain positive outcomes. The overall population result that the Commission activities contribute to in Result Area 4 is, "Sustainable and coordinated systems are in place that promote the well-being of children from prenatal through age five." Although the Commission and funded programs cannot take full responsibility for this result in Stanislaus County, there are numerous ways that they are contributing to this result. In addition, Commission staff has continued to support contractors with sustainability, leveraging efforts, collaboration, and building capacity.

Desired Result: Sustainable and Coordinated Systems Are In Place that Promote the Well-Being of Children From Prenatal Through Age Five

Objectives:

- *Increase the funding and/or alignment of funding for a coordinated system of support for children and families*
- *Increase the level of county data integration/alignment of indicators, associated monitoring, and use of data to inform course-correction as needed to improve outcomes for children and families*
- *Increase the knowledge of individuals serving young children about available resources (including professional development) services, and referral opportunities*

The Commission has employed the following services and service delivery systems to progress towards these objectives, and contribute to the population result "Sustainable and coordinated systems are in place that promote the well-being of children 0-5":

- **Program and System Improvement Efforts**

The Commission strives to improve service quality, develop connections between service providers, support infrastructure and invest in professional development for those who service children 0-5 and their families. The Commission supports this effort in a variety of ways. One way is through the training and support Commission staff provides to funded partners, including trainings and workshops. The Commission partnered with On the Verge to offer a second year of the leadership cohort to Family Resource Center and Community Service Agency staff in FY 21/22 as well as several other additional trainings. Furthermore, in FY 21/22, the Commission continued its efforts coordinating the home visiting collaborative. A part-time coordinator assisted with the process and worked with several agencies providing home visiting programs in the community.

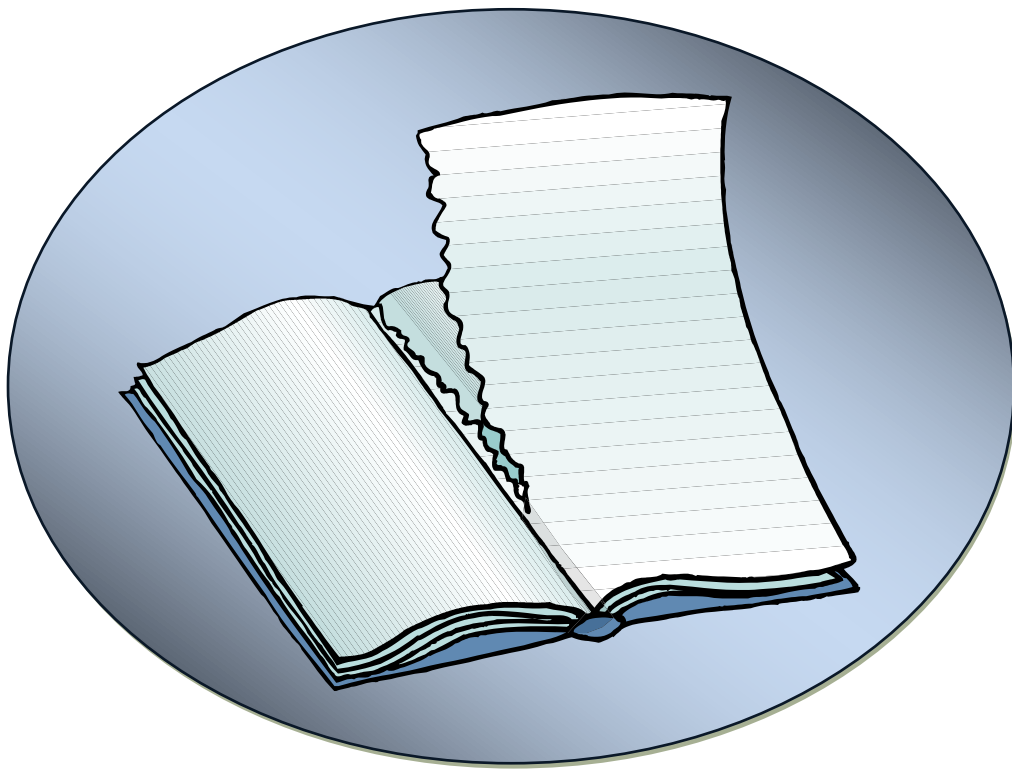
- **Emergency and Disaster Relief**

Due to the continued community impacts resulting from the COVID-19 pandemic, the Commission received a \$120,000 grant from Sunlight Giving which was passed through to the FRCs to support the families in their communities affected by COVID-19. FRCs who received the COVID-19 grants were able to determine how best to use it for their community

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
<ul style="list-style-type: none"> • The Home Visiting Collaborative focused on assessing and addressing public needs through several community interviews, focus groups, and surveys on ways to assist families and expand services. • 23 FRC partners were certified to provide the Nurturing Parenting curriculum at their sites for families • 33 FRC partners were certified to provide the Abriendo Puertas curriculum at their sites for families • 20 FRC partners were certified to provide the Parent Cafés model at their sites for families • The StanREADY coordinator facilitated a Design Day for the action team which resulted in a new focus for the group on testing the impacts of having parents co-design and lead efforts with them as well as educating Pre-K and Kinder parents on the importance of school attendance • 1,338 children 0-5 and 1,505 caregivers received COVID-19 relief support to help with housing assistance, utility payments, or other basic needs 		
<ul style="list-style-type: none"> • The local Home Visiting Collaborative developed an agency decision referral tree that family support staff can use to better promote the various home visiting programs available in the county 		
<i>Increases in Leveraging Within and Outside of the County</i>		
<i>Increase in Resources and Community Assets Leveraged Within the County</i>		
<ul style="list-style-type: none"> • 91% of the Commission contracted programs (10/11) report leveraging of community resources • Nearly \$3.1 million was leverage from inside sources in 2021-2022 		
<i>Increase in resources coming into Stanislaus County, As a Result of Leveraged Dollars</i>		
<ul style="list-style-type: none"> • 82% of the Commission contracted programs (9/11) report leveraging Prop 10 dollars to receive funding from outside of Stanislaus County • Over \$809,092 was leverage from outside sources in 2021-2022 		

Result Area 4: Improved Systems of Care (Sustainable Systems)	
Program/Activity	Amount Expended in 2021-2022
Home Visiting Coordination	\$ 51,506
High Risk Maternal Health	\$ 1,800
Stanislaus Community Foundation (Cradle to Career)	\$ 8,805
COVID Emergency Support Stipends	\$ 120,000
Abriendo Puertas	\$ 54,417
Planet Baby! Technical Assistance	\$ 7,611
Parenting Facilitator, Trainer, and Capacity Building Services	\$ 3,600
Nurturing Parenting	\$ 3,320
TOTAL	\$ 251,059

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APPENDIX - ACRONYMS

The following list identifies widely used acronyms that have been referenced in this evaluation. They include organizations, programs, tools, and terms.

0-5 EIP	Zero to Five Early Intervention Partnership (formerly SCCCP)
AC	After Care
ADRD/DRDP	Adapted Desired Results Developmental Profile/Desired Results Developmental Profile
AOD	Alcohol and Other Drugs
AP	Abriendo Puertas (parenting education program)
ASQ	Ages and Stages Questionnaire
ASQ-3	Ages and Stages Questionnaire – Third Edition
ASQ SE	Ages and Stages Questionnaire – Social Emotional
BHRS	Behavioral Health and Recovery Services
CAA	Certified Application Assistor
CAPC	Child Abuse Prevention Council
CASA	Court Appointed Special Advocates
CAPIT	Child Abuse Prevention, Intervention, and Treatment
CARES	Comprehensive Approaches to Raising Educational Standards Project
CBCAP	Community-Based Child Abuse Prevention
CBOs	Community Based Organizations
CC	Creative Curriculum (school readiness program)
CCC	Children’s Crisis Center
CDBG	Community Development Block Grant
CDC	Center for Disease Control
CFC	Children and Families Commission, also know as First 5 Stanislaus
CHA	Community Health Assessment
CHDP	Child Health and Disability Prevention Program
CHIS	California Health Interview Survey
CHS	Center for Human Services <i>Funded Programs: Westside Family Resource Centers, Eastside Family Resource Center</i>
CHSS	Community Housing and Shelter Services
CPHC	Ceres Partnership for Healthy Children
CPS	Child Protective Services
CPSP	Comprehensive Prenatal Services Program
CSA	Community Services Agency <i>Funded Programs: Family Resource Centers</i>
CVOC	Central Valley Opportunity Center
CWS	Child Welfare Services

CWS/CMS	Child Welfare Services Case Management System
DMCF	Doctors Medical Center Foundation
DR	Differential Response
ECE	Early Childhood Education
0-5 EIP	Zero to Five Early Intervention Program
EL	Early Learning <i>or</i> English Learners
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment
ESL	English as a Second Language
FJC	Family Justice Center
FCC	Family Child Care
FDM	Family Development Matrix
FFN	Family, Friends, and Neighbors (childcare category)
FM	Family Maintenance (division of CPS)
FPG	Federal Poverty Guideline
FPL	Federal Poverty Level
FRCs	Family Resource Centers
FSN	Family Support Network
FY	Fiscal Year
GED	General Education Diploma
GVHC	Golden Valley Health Centers
HBO	Healthy Birth Outcomes
HEAL	Healthy Eating Active Living
HEAP	Home Energy Assistance Program
HRSA	Health Resources and Services Administration
HSA	Health Services Agency <i>Funded Programs: Healthy Birth Outcomes</i>
IZ	Immunizations
KBS	Keep Baby Safe
KRP	Kindergarten Readiness Program
LSP	Life Skills Progression tool
MAA	Medi-Cal Administrative Activities
MCAH	Maternal Child Adolescent Health
MHSA	Mental Health Services Act
MOMobile	Medical Outreach Mobile
NP	Nurturing Parenting (parenting education program)
NSJVFRCN	Northern San Joaquin Valley Family Resource Center Network
PACE	Petersen Alternative Center for Education

PBI	PlanetBaby! (prenatal to age one parenting program)
PAT	Parents as Teachers Program
PEDS	Prop 10 Evaluation Data System
PEI	Prevention and Early Intervention
POP	Power of Preschool
PRC	Parent Resource Center <i>Funded Programs: Family Resource Connection</i>
PSI	Parental Stress Index
PSSF	Promoting Safe and Stable Families
RBA	Results Based Accountability
SAMHSA	Substance Abuse and Mental Health Services Administration
SBA	Strength Based Assessment
SBS	Shaken Baby Syndrome (Prevention Program)
SCCCP	Specialized Child Care Consultation Program
SCCFC / CFC	Stanislaus County Children and Families Commission
SCDLPC	Stanislaus Child Development Local Planning Council
SCOARRS	Stanislaus County Outcomes and Results Reporting Sheet
SCOE	Stanislaus County Office of Education <i>Funded Programs: SCOE Healthy Start Support</i>
SEA Community	Southeast Asian Community
SEI	Social Entrepreneurs, Inc.
SELPA	Special Education Local Plan Area
SFJC / FJC	Stanislaus Family Justice Center / Family Justice Center
SR	School Readiness
SVCFS	Sierra Vista Child and Family Services <i>Funded Programs: North Modesto/Salida FRC, Hughson FRC, Drop In Center, The BRIDGE</i>
TCM	Targeted Case Management
TUPE	Tobacco Use Prevention Education
VFC	Vaccines For Children
VMRC	Valley Mountain Regional Center
WCC	Well Child Checkup
WIC	Women, Infants, and Children
WMCC	West Modesto Community Collaborative <i>Funded Program: PlanetBaby!</i>