

FAMILY AND HUMAN SERVICES COMMITTEE

November 16, 2009 1:00 P.M. 651 Pine Street, Room 101, Martinez

Supervisor Federal D. Glover, District V, Chair Supervisor Gayle B. Uilkema, Vice Chair

Agenda Items:

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

- 1. Introductions
- 2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to three minutes).
- 3. #92 Local Child Care & Development Planning Council Activities Update Presenter: Susan Magnone, CC Office of Education
- 4. #2 Oversight of the Service Integration Program Annual Update
 Presenter: Paul Buddenhagen, Employment and Human Services
- 5. #61 HIV Prevention/Needle Exchange
 Presenter Christine Leiverman, Health Services Department

- © The Family and Human Services Committee will provide reasonable accommodations for persons with disabilities planning to attend Committee meetings. Contact the staff person listed below at least 72 hours before the meeting.
- Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Family and Human Services Committee less than 96 hours prior to that meeting are available for public inspection at 651 Pine Street, 10th floor, during normal business hours.
- Dublic comment may be submitted via electronic mail on agenda items at least one full work day prior to the published meeting time.

For Additional Information Contact:

Dorothy Sansoe, Committee Staff Phone (925) 335-1009, Fax (925) 646-1353 dsans@cao.cccounty.us

Glossary of Acronyms, Abbreviations, and other Terms (in alphabetical order):

Contra Costa County has a policy of making limited use of acronyms, abbreviations, and industry-specific language in its Board of Supervisors meetings and written materials. Following is a list of commonly used language that may appear in oral presentations and written materials associated with Board meetings:

ABAG Assembly Bill ABAG Assembly Bill ABAG Assembly Bill ABAG Assembly Constitutional Amendment ACA Assembly Constitutional Amendment ADA American Federation of State County and Municipal Employees AFSCNE American Federation of State County and Municipal Employees AICP American Institute of Certified Planners AIDS Aquired Immunodeficiency Syndrome AIDS Agriced Immunodeficiency Syndrome AIDS Aquired Immuno					
ADA APA Americans with Disabilities Act of 1990 AFSCME Employees Arescan Federation of State County and Municipal Employees ARCP American Federation of State County and Municipal Employees ARCP American Federation of State County and Municipal Employees ARCP American Federation of State County and Municipal ARCP ARCP American Federation of State County and Municipal ARCP ARCP American Federation of State County and Municipal ARCP ARCP American Federation of State County and Municipal ARCP ARCP American Federation of State County and Municipal ARCP ARCP ARCP American Federation of State County and Municipal ARCP ARCP ARCP ARCP ARCP ARCP ARCP ARCP	AB	• •	Assembly Bill	HCD	(State Dept of) Housing & Community Development
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AFSCRE American Federation of State County and Municipal HOV High Occupancy Vehicle Employees HR Human Resources AICP American Institute of Certified Planners HID United States Department of Housing and Urban AIDS Acquired Immunode/licency Syndrome HID United States Department of Housing and Urban Development AIDO Alcohol and Other Drugs IDC Internal Operations Committee AAOD Alcohol and Other Drugs IDC Internal Operations Committee BAART Bay Area Rapid Transit District ISO Industrial Safety Ordinance BART Bay Area Rapid Transit District JPA Joint (exercise of) Powers Authority or Agreement Landinal BACC Bay Conservation & Development Commission Landindal Landindal Ladgette-Moraga-Orinda Area Landindal Ladgette-Moraga-Orinda Area Ladgette-Moraga-Orinda Area Landindal LAFCo Local Agency Formation Commission Landindal Ladgette-Moraga-Orinda Area Landindal LAFCo Local Agency Formation Commission Landindal Ladgette-Moraga-Orinda Area Landindal LAFCo Local Agency Formation Commission Landindal Ladgette-Moraga-Orinda Area LAFCo Local Agency Formation Commission LAFCo Local Agency Formation Authority LAFCO Local Agency Formation Agency LAFCO Local Agency Formation Commission LAFCO Local Agency Formation Agency LAFCO Local Agency Formation Commission LAFCO Local Agency Formation Agency LAFCO Local A			•		· · · · · · · · · · · · · · · · · · ·
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	GIS	;	Geographic Information System		Committee



MEMORANDUM

DATE: November 16, 2009

TO: Family and Human Services Committee

Supervisor Federal D. Glover, District V, Chair Supervisor Gayle B. Uilkema, District II, Vice Chair

Contra Costa County Office of Education

Dr. Joseph A. Ovick, Contra Costa County Superintendent of Schools

FROM: Dr. Susan Magnone, Associate Superintendent, Educational Services on behalf of

Ruth Fernández, LPC Coordinator/Manager, Educational Services

SUBJECT: 1) Contra Costa County Local Planning Council for Child Care and Development

Countywide Child Care Plan Update - Referral # 92

2) Annual Report and Self Evaluation from the Contra Costa County Local Planning

Council for Child Care and Development (LPC).

RECOMMENDATION(S):

1. ACCEPT the below written report of activities during calendar year 2009 for the Contra Costa County Local Planning Council for Child Care and Development (LPC) as they relate to the implementation of the Comprehensive Countywide Child Care Plan 2008-2011 in the following goal areas: 1) Promote Access to Quality Child Care, 2) Develop and Nurture A Trained Workforce, 3) Foster and Promote Coordination and Collaboration with the Community, 4) Advise Sponsoring Entities on Local Issues and Priorities in Child Care and Development.

MAJOR ACTIVITIES AND ACCOMPLISHMENTS DURING REPORTING PERIOD (JUNE 2009-OCTOBER 2009)

1. Promote Access to Quality Child Care

The LPC implemented the requirements of California *Education Code (EC)* Section 8275.5 known as the Voluntary, Temporary Transfer of Funds program. This legislation requires the LPC to facilitate a process in which funds from an agency under earning their contract slots can be transferred to an agency over earning their contract slots. The purpose of the program is to ensure that all of the state allocated funds are used to provide child care services where needed.

To implement this program the LPC first reviewed the Conflict of Interest clause of the LPC bylaws and then approved a policy outlining the process. On October 19, 2009 the LPC Coordinator conducted an informational meeting on the transfer process for State-funded Program Administrators.

2. Develop and Nurture a Trained Workforce

For the past eight years the LPC has provided a variety of financial incentives to individuals completing courses, permits and degrees in early care. Since July of 2009 the AB212 Professional Development Program has undergone major changes.

First, the amount of funds available for incentives was reduced by half due to budget cuts. A new and limited menu of incentives was developed based on priorities set by the LPC. Course completion is the first priority with degree completion the second priority. The incentive dollar amount for these priorities was reduced by 1/3. The intent of the incentive menu is to give some incentive to as many individuals as possible even though it will be a smaller incentive than in the past.

Another important change in Professional Development this year is the piloting of a Center-Based Team Model. The Center-Based Model strives to support state-funded programs in identifying areas for staff growth based on the needs of the children they serve.

Five centers have received grants to implement the professional development plan they submitted to the LPC. The amount of the grants range from \$4,000 to \$7,990. This is a pilot year for the Centered-Based Program and it will be monitored and evaluated to determine the success of the program and ways to improve it.

- 3. Foster and Promote Coordination and Collaboration with the Child Care Community
 Collaboration is an ongoing process for the LPC members and the COE staff members. Examples
 include attendance at Cross Agency Coordinating meetings, Professional Development planning
 meetings with the community colleges and First 5, involvement in the Water cooler Workforce
 Development, co-sponsorship of the Walnut Creek Arts event for young children, serving on the
 California Preschool Instructional Network Advisory Board and participation in developing the
 Preschool Makes a Difference pilot.
- 4. Advise Sponsoring Entities on Local Issues and Priorities in Child Care and Development
 The LPC held a very successful Sixth Annual Young children's Issues Forum on October 17th
 2009 at Diablo Valley College. The elected officials and representatives on the panel included
 Barbara Johnson, District Director for Congressman George Miller, Senator Mark DeSaulnier,
 Senator Loni Hancock, Assemblymember Joan Buchanan, Craig Cheslog, District Director for
 Assemblymember Tom Torlakson, Joseph A. Ovick, Contra Costa County Superintendent of
 Schools, Joe Valentine, Director Employment & Human Services Dept., Cheri Pies, Director
 Family, Maternal & Child Health Programs. The program began with statements by Joe
 Valentine, Cherie Pies and Joe Ovick on the status of children in Contra Costa County. The
 elected officials and representatives each responded to the issues raised. The audience then asked
 questions of the panel members. The format allowed for issues of importance to both the audience
 and the elected officials to be presented and discussed.

The LPC continues to implement the Comprehensive Countywide Child Care Plan and to inform the County Board of Supervisors and the County Superintendent of Schools of progress in meeting the objectives.

BACKGROUND/REASON(S) FOR RECOMMENDATION(S):

California *Education Code (EC)* Section 8231 requires the LPCs to prepare a comprehensive countywide child care plan designed to mobilize public and private resources to address identified needs.

RECOMMENDATION(S):

2. ACCEPT the attached LPC Annual Report and LPC Summary of Self Evaluation from the Contra Costa Local Planning Council for Child Care and Development (LPC).

The findings are a reflection of activities undertaken from 7/1/2009-10/31/2009.

The attached report was reviewed, discussed and approved by the LPC Executive Committee at the meeting held on November 9, 2009 from 9:00-11:00 a.m. at the Contra Costa County Office of Education.

Attached is a copy of the sections of the California *Education Code (EC)* that pertain to the Key Dimensions in each compliance item of the LPC Summary of Self Evaluation.

BACKGROUND/REASON(S) FOR RECOMMENDATION(S):

Per CDE/CDD, the LPC Annual Report form (CD-2934) and the LPC Summary of Self Evaluation form (CD-2935) must be submitted to the CDD by November 15, 2009.

Failure to comply with this requirement may be considered a noncompliance issue and subject the contractor to possible termination of the contract.

TO: Family and Human Services Committee

Supervisor Federal D. Glover, District V, Chair

Supervisor Gayle B. Uilkema, Vice Chair

FROM: Paul Buddenhagen, Program Manager, Service Integration Program

SUBJECT: Report on the Contra Costa County Service Integration Program

DATE: November 16, 2009

RECOMMENDATION

ACCEPT the attached report on the activities and achievements of the Contra Costa County Service Integration Program.

EXECUTIVE SUMMARY

Established in 1994, the Contra Costa County Service Integration Program co-locates County and non-profit agency service providers and community residents in neighborhood-based centers to provide accessible, coordinated public services tailored to meet the specific needs and goals of low-income families, while also engaging families in resident-driven efforts to revitalize their communities. The success of this program's Service Integration Team (SIT) model stems from the synergistic relationship between its two key program components: (1) integrated case management services and (2) neighborhood-building activities.

The Service Integration Program is widely recognized as a leader in the development of successful strategies that improve outcomes for low-income children, youth and families. Key Service Integration innovations include:

- Developing new paradigms of inter-agency collaboration and creating necessary tools to support this work, including cross-agency information-sharing protocols, an integrated case management system and an effective family conferencing model.
- * Redefining County-community partnerships to help fundamentally shift the way in which our public agencies work with residents of low-income communities.
- Launching new initiatives and strategies, such as free tax preparation services (Volunteer Income Tax Assistance), community career centers, employment-focused service delivery, County--Schools projects, the Supporting Fathers Involvement Program, and others.
- Serving as a local model of public sector "systems change" by implementing performance-based results and new strategies for leveraging public and private investments.

The success of the Service Integration model is evident in the measurable improvements achieved in the lives of the children, families and communities it serves. Recent examples of Service Integration Program outcome measures include:

- For the 2009 tax season SIT's Bay Point Works' staff prepared and filed 438 tax returns more than any other site in the County -- saving low-income community residents more than \$43,000 in filing fees, while helping put more than \$700,000 in federal tax refunds back in the pockets of working poor Bay Point residents (and circulating in the local economy). Significantly, \$246,797 in Earned Income Tax Credit and \$167,989 in Child Tax Credits were returned to families for whom Bay Point Works staff prepared and filed taxes. EITC is the single most effective government program in lifting people out of poverty.
- North Richmond SIT completed work on the first phase of the Supporting Father Involvement Program which culminated in the associated researchers publishing a groundbreaking study on the importance of including fathers in social services work. This research and intervention represents the first randomized, controlled clinical trial focused on father involvement in low-and middle-income families. The study compared father-only and father-mother interventions with each other, against a control group, and evaluated the impacts on families and children.

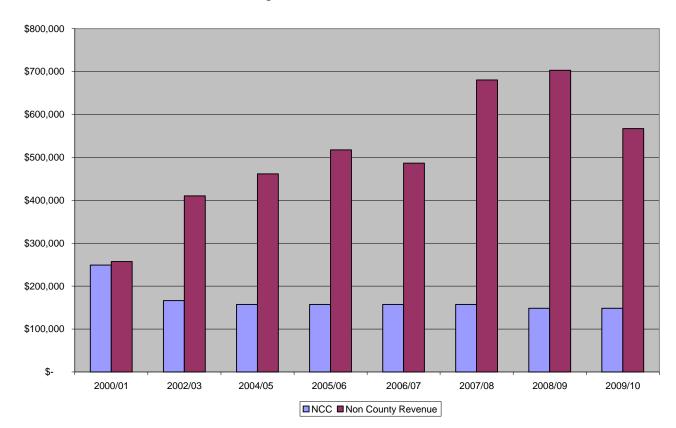
The research confirms that when fathers become more involved in parenting - and in working with mothers as co-parents and partners - the result is healthier families and healthier children. Parents experience reduced stress and anxiety, are more satisfied with their relationship, and children are less hyperactive and aggressive. This year, SIT received a subsequent three year grant to apply the SFI program to families in the child welfare system. This means that through 2012, SIT will enroll 60 child welfare families into the Supporting Father Involvement Program. These families will receive 11 weeks of SFI group support where they will learn concrete skills on how to improve their relationships. They will also receive 18 months of case management support, reducing barriers to leading healthy, safe and supportive lives. Our expectation – and we are explicitly measuring this - is that these families will avoid reentry into the Child Welfare System, thus preserving families and saving money for the County.

In partnership with Helms Middle School in San Pablo, SIT's Helms Involving Parents program last year helped reduce absenteeism by nearly a 1%, resulting in 1,323 more school days attended in 2008-09 than in the previous year. This netted the West Contra Costa County Unified School district an additional \$11,000 in ADA revenue. Based on this success we have launched the Nystrom Involving Parents program this year.

Due to the effectiveness of this model, the Service Integration Program has received local, state and national awards; has been the subject of articles and research studies; and frequently is represented by Service Integration staff at conferences as a "best practice" model.

The Service Integration Program has been successful in leveraging its positive outcomes to raise money for new innovative programs that benefit Contra Costa's most impoverished

families. The chart below contrasts SIT's private revenue with net county cost during the past eight years.



SIT Funding: NCC vs Grant Revenue; 2000-2010

As public and private budgets continue to constrict during these challenging times the obstacles associated with maintaining the Service Integration Program will remain great despite the unquestionable value of our services. We will redouble our efforts to seek new and creative approaches to support this important program.

BACKGROUND

Established in 1994, the Service Integration Program is a multi-disciplinary collaboration of three Contra Costa County departments (Employment & Human Services, Health Services and Probation), two school districts, community-based organizations (CBOs) and neighborhood residents. The Service Integration Program's two Family Service Centers were designed to take an innovative approach to working with families that historically have posed some of the greatest challenges to service providers: families involved in two or more county systems who live in the County's most economically disadvantaged communities. This unique model co-locates County and non-profit agency service providers and community residents in neighborhood-based centers to provide accessible, coordinated public services tailored to meet the specific needs and goals of low-income families, while also engaging families in resident-driven efforts to revitalize their communities.

The success of the Service Integration Program model stems from the synergistic relationship between its two key program components: (1) integrated case management services and (2) neighborhood-building activities. The integrated case management services component places cross-disciplinary Service Integration Teams comprised of Substance Abuse and Mental Health Counselors, Employment Specialists, Probation Officers, School Family Resource Workers, Social Workers and other specialists in Family Service Centers located in Bay Point and North Richmond.

Based on the premise that the challenges facing low-income families and communities are inter-related, these teams embrace a holistic approach. The teams focus on the whole family unit, rather than just the individual, and build upon family strengths to provide services driven by and customized to each family's unique circumstances. In addition to providing families with more personalized services in the communities where they live, this multi-disciplinary approach produces a comprehensive, consistent strategy for each family, reducing conflicting expectations and demands made by different programs.

The Service Integration Program's two neighborhood-building projects, Bay Point Works (BPW) and the North Richmond Empowerment Collaborative (NREC), were born out of the recognition that an integrated team of county and community-based organization staff was a necessary, but not sufficient mechanism for addressing the full range of challenges facing the communities of Bay Point and North Richmond/San Pablo. BPW and NREC were designed to harness the talents and skills of neighborhood residents in the process of revitalizing their communities. This strategy has galvanized the creation of highly innovative and successful programs (designed specifically by and for community members) that support and build upon local cultures and traditions and fill critical gaps in the formal service delivery system. Perhaps most important of all, the neighborhood-building projects have expanded the long-term capacity of the Bay Point and North Richmond/San Pablo communities by developing the skills of numerous neighborhood residents and providing opportunities for them to give back to their communities and build stronger connections in the neighborhoods where they live.

BPW's community-building efforts started with the establishment of the Bay Point Community Career Center in May 1998 and have expanded steadily from there. Every year since, BPW has strengthened its services and, in turn, helped more and more Bay Point residents get jobs, keep jobs and move up the job ladder. In recent years, BPW has offered a number of supportive services that go well beyond the traditional employment services package, such as free income tax preparation for low-income Bay Point workers to help them capture the benefits of the Earned Income Tax Credit (EITC) and free structured activities for the young children of "working poor" parents during school holidays.

NREC's community-building activities also initially focused on boosting neighborhood employment. Early successes included reinstituting night bus services in North Richmond, creating several in-home family day care centers and establishing the North Richmond Community Career Resource Center, which continues to serve neighborhood residents after having been spun off to a CBO in 2000. After making a number of strides in the area of employment, NREC decided to take on an issue of great importance to neighborhood residents: low levels of student success and parental involvement at Verde Elementary School. This focus resulted in the establishment of NREC's Verde Involving Parents (VIP) Program, which has played a critical role in initiating and sustaining the renaissance of Verde

Elementary School over the past seven years. With private foundation support, the VIP program was recently expanded to Helms Middle School, which is where kids leaving Verde go to continue their education.

This report to the Family and Human Services Committee of the Board of Supervisors summarizes some of the Service Integration Program's key innovations and contributions to improving the wellbeing of Contra Costa children, families and communities over the past 14 years.

SERVICE INTEGRATION PROGRAM AS A LEADER IN "BEST PRACTICES"

Since its inception over a decade ago, the Service Integration Program has emerged as a leader in the development of successful strategies that improve outcomes for low-income children, youth and families. The Service Integration Program reaches far beyond the traditional "agency service provider" model by involving low-income residents as integral partners in the process of addressing the needs and aspirations of the neighborhoods where they live. This small, inter-agency program draws down flexible funding from private foundations and outside contracts to complement more traditional federal, state and county funding streams. As a result, Service Integration has managed to maintain a flexibility and inventiveness unusual to public sector agencies. SIT has launched programmatic, fiscal and organizational innovations that have laid the foundations for the development of more effective and efficient services to children, families and communities countywide.

Due to the effectiveness of the Service Integration model, Contra Costa County has received local, statewide and national recognition and has been the subject of research papers and studies, including: *North Richmond Gets Its Buses Back: How a Poor Community and an Urban Transit Agency Struck Up a Partnership* (Institute of Governmental Studies Press, University of California, Berkeley, 1999), which focuses on NREC's successful strategy for partnering with A.C. Transit to bring night-time bus service back to North Richmond; and *A Case Study on North Richmond* (Abt Associates, on behalf of the Ford Foundation, 2004), which highlights the VIP Program as a successful model of school-community revitalization. The latter study credits VIP as being "largely responsible for the major improvements in school attendance, parent involvement and student behavior that have taken place at Verde..." Last year the National Center for Children in Poverty at Columbia University highlighted SIT's VIP program as a best practice intervention in their report, <u>Present, Engaged, and Accounted for: The Critical Importance of Addressing Chronic Absenteeism in the Early Grades</u>

Some of the Service Integration Program's major areas of innovation are summarized below:

❖ Inter-Agency Collaboration: Service Integration has been at the vanguard of Contra Costa's efforts to develop effective models of collaboration and cross-program and -agency partnerships, paving the way for greater collaboration countywide. Service Integration has developed new organizational structures to support this collaboration at the management oversight level (e.g., the inter-agency Service Integration Executive Oversight Committee), as well as at the frontline service delivery level (e.g., multi-disciplinary teams). The infrastructure and tools established through Service Integration's partnership model and the relationships that have formed as a result have laid the groundwork for and facilitated the success of many other inter-agency initiatives.

- County-Community Partnerships: Service Integration has redefined relationships between public agencies and residents of low-income neighborhoods while developing a viable model for bridging the all too common gap between agency "service providers" and the communities they serve. In 1997, in the wake of Federal Welfare Reform, each of the SIT sites engaged neighborhood residents in planning efforts to determine how these communities could succeed in this new policy environment. These efforts resulted in the establishment of two innovative community-building projects, Bay Point Works and the North Richmond Empowerment Collaboration. Last year we surveyed Bay Point residents to find out how we could better help them into economic stability. The results of this survey will lead the way in our effort to partner with community based nonprofit organizations.
- Cross-Agency Information-Sharing: Working together, key Service Integration partner agencies (i.e., EHSD, CCHS, Probation, CAO) and County Counsel developed Contra Costa's first informed consent agreement for integrated services in 1994. This confidentiality release gives permission for Service Integration staff from participating agencies to share information to better serve families. This "Agreement to Participate" form served as a model for more recent integrated services programs, such as the mental health "Spirit of Caring" Initiative, and contributed to the establishment of the Service Integration Program as Contra Costa's first official "Multi-Disciplinary Children's Services Team".
- Outcomes/Performance-Based Accountability: Service Integration spearheaded Contra Costa County's early efforts to implement performance-based accountability. In the early- and mid-1990's, the inter-agency Service Integration Management Team developed a set of meaningful outcomes that could be used to evaluate the success of the Service Integration Program by concretely measuring the program's impact on the lives of children and families. Service Integration staff has diligently tracked these program results since 1996. Service Integration's novel approach led to wider adoption of outcome measures by other County programs and laid the groundwork for the 1997 establishment of Contra Costa's Children and Families Report Card.
- Leveraging Public and Private Investments: Service Integration has designed its fiscal strategy around encouraging private foundations and other funders who do not typically support county ventures to invest in innovation in the public sector. SIT currently has commitments of more than \$1,200,000 from non county private and public sources to fund a variety of family support projects through 2012. Through its strong track record of capturing measurable results, promoting public-private partnerships and engaging community residents in the process of bettering their neighborhoods and their lives, Service Integration has helped to convince many new funding partners that investments in the public sector can galvanize sustainable individual, family, neighborhood and systems change.
- ❖ Holistic, Integrated Case Management System: The Service Integration Program pioneered the County's first integrated case management process. Focusing on the whole family unit, rather than just the individual, this process allows SIT staff to build upon family strengths and provide services driven by and tailored to each family's unique needs. Service Integration created the Family Assessment Record to support the development of comprehensive plans for addressing issues in a range of interdependent life domains, such as child care, child and adult health,

- transportation, school, employment and other social supports. First developed in 1995, this tool and the SIT case management process as a whole have been refined over the years to support continuous improvement and better integration of Service Integration services. SIT staff, funded by a generous grant from the S.H. Cowell Foundation is nearing the end of a 1.5 year project to re-evaluate the case management model and make updates.
- ❖ Family Conferencing: The Service Integration Program's "Family Conferencing" model brought a new way of doing business to Contra Costa County. Service Integration began conducting inter-agency case conferences with client families in the mid-1990s. The success of our family conferencing model helped open the doors for similar family-focused models in Contra Costa, such as "Wraparound" in Children's Mental Health and "Team Decision Making" in Children and Family Services.
- ❖ Employment-Focused Service Delivery: In 1995, prior to the passage of Welfare Reform, Service Integration was the first County program to implement an employment-focused service delivery model. The Service Integration model transitioned "eligibility workers" into "employment case managers" and tapped into the resources of all disciplines to move welfare recipients into the workforce. Due to the effectiveness of this model, the Service Integration Program was invited to codevelop EHSD's redesign plan for restructuring its eligibility determination function into an employment-focused service delivery strategy.
- ❖ Free Tax Preparation Services (Volunteer Income Tax Assistance): In 2003, the Service Integration Program piloted the Volunteer Income Tax Assistance (VITA) free tax preparation model at the Bay Point and North Richmond SIT sites. Based on the success of this pilot, Service Integration played a lead role, along with a number of other partner agencies, in launching a countywide VITA campaign in 2004: Earn It! Keep It! Save It! Contra Costa. This year, the Bay Point Works VITA site filed more tax returns than any of the County's thirteen VITA sites.
- Community Career Centers: In May 1998, the Bay Point SIT's BPW project established the Bay Point Community Career Center, a forerunner to the County's One-Stop Career Center system. In January 2000, NREC established a second Community Career Center in North Richmond. The Career Centers introduced community-based employment resources delivered via a neighbor-helping-neighbor model to the communities of Bay Point and North Richmond. The Bay Point Community Career Center continues to be a heavily utilized hub in the community; 6,542 people have enrolled as members of the Career Center since it opened in 1998!
- ❖ Verde Involving Parents (VIP): Service Integration's VIP Program, established in February 2001, has reaped impressive results. VIP is a team effort of parents, students, teachers and county agencies and non-profit organization staff who live and work in North Richmond. Their goal: get our children to school every day, on time and ready to learn. Due to the dramatic impact of VIP on student attendance and parent involvement at Verde Elementary School, the West Contra Costa Unified School District (WCCUSD) invested \$125,000 in the VIP Program during the 03/04 and 04/05 school years. During the first half of 2004, at the request of WCCUSD Superintendent Dr. Gloria Johnston, the VIP staff and managers met with principals and staff from four low-performing elementary schools to offer technical assistance

- and training on the VIP school improvement model. In summer 2004, the VIP Program presented the WCCUSD with a Training Handbook to support its VIP replication efforts. In the last year SIT has expanded by working with parents, teachers and administrators at Nystrom Elementary School and Helms Middle School to implement the "involving parents' model at those two schools.
- Supporting Father Involvement (SFI): We are pleased to offer an evidence based program that improves families' lives to Contra Costa County. Service Integration's North Richmond family service center is one of five sites statewide to provide the SFI program. For the next three years, SFI will be working with families in the child welfare system to reconnect fathers with their families and increase protective factors so that they stay healthy.

SIT As a Model for Change in the New (and bad) Economy

One of the Service Integration Program's strengths is its flexibility to respond to local, community need in a collaborative, public-private, outcomes focused way. This dexterity has allowed SIT to pilot many new ideas that were then replicated in other locations. Not in decades has the economic landscape been as rocky and challenging as it is now. Unemployment rates are at 25 year highs, obesity is more prevalent than ever, school test scores are falling and budgets of all institutions have cratered. How health and human services agencies respond to this crisis to remake the social safety net will be a serious challenge. The Service Integration Program will take up this challenge by working closely with local residents, county departments, nonprofit agencies, schools, community colleges, private foundations, and businesses to rethink and reorganize a fractured and wobbling safety net system. Building a new system that builds collaborative goals and brings leveraged resources to bear on the problems of poverty will be the focus of the near future for SIT.

IMPROVING THE SIT MODEL - The Service Integration Program has an unwavering commitment to delivering high-quality, comprehensive services to residents of Bay Point and North Richmond/San Pablo – even in the face of diminishing public funds. However, SIT's strategies and structure have not changed much in the past decade. Despite SIT's positive, measurable outcomes in that time frame, the need for systemic and replicable approaches to helping low income Contra Costa County communities improve their lives compels us to look for new approaches to old problems. SIT is nearly finished with a set of recommendations for change based on a year-long assessment of strengths and weaknesses, informed by: SIT staff, other Department staff, community members, foundation staff, and an expert consultant. Some of the elements of a restructured SIT will likely include a new focus on reducing poverty, modifying the current assessment tools, adding new nonprofit partners, a new, on-line (and secure) data & case management system, and the identification of outcomes related to debt reduction, income stabilization, and asset building. We are hopeful that the new SIT will be a model for change that can be adopted in other areas of the County.

Needle Exchange Update



November 2009
Prepared for the
Contra Costa Board of Supervisors
by Contra Costa Health Department

NEEDLE EXCHANGE

- □ In 1999, the Contra Costa Board of Supervisors endorsed a State of Emergency with respect to HIV and AIDS to allow for the provision of needle exchange services. A major interest was to reduce transmission in women and to their unborn children.
- A State of Emergency declaration is no longer needed if an annual update on activities is provided and public comment is invited.

AIDS in Contra Costa County

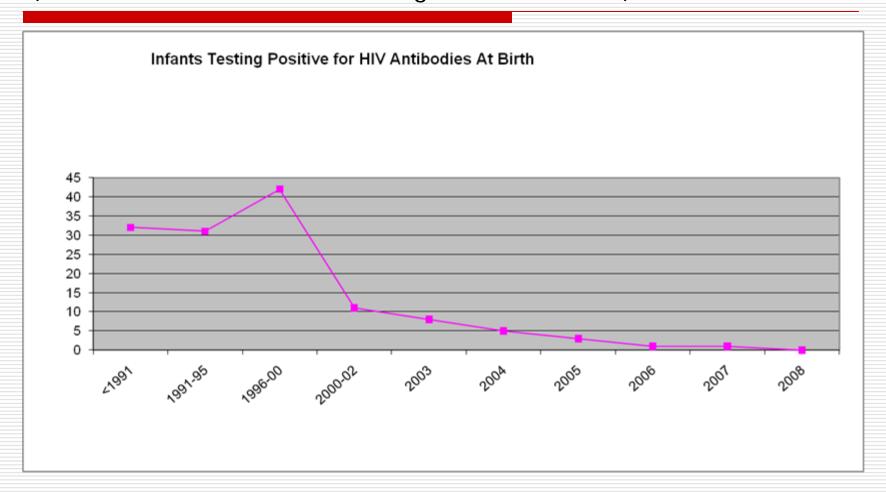
☐ As of December 31 2008, 1,894 individuals were living with AIDS or HIV in Contra Costa. There is no major change in demographics: Approximately 81% are male and 19% are female. African Americans are 31.5% of those living with HIV or AIDS, Whites 47% and Hispanics 17%. The predominant transmission among those living with HIV or AIDS remains men who have sex with other men (MSM).

AIDS Attributed to Injection Drug Use (IDU)

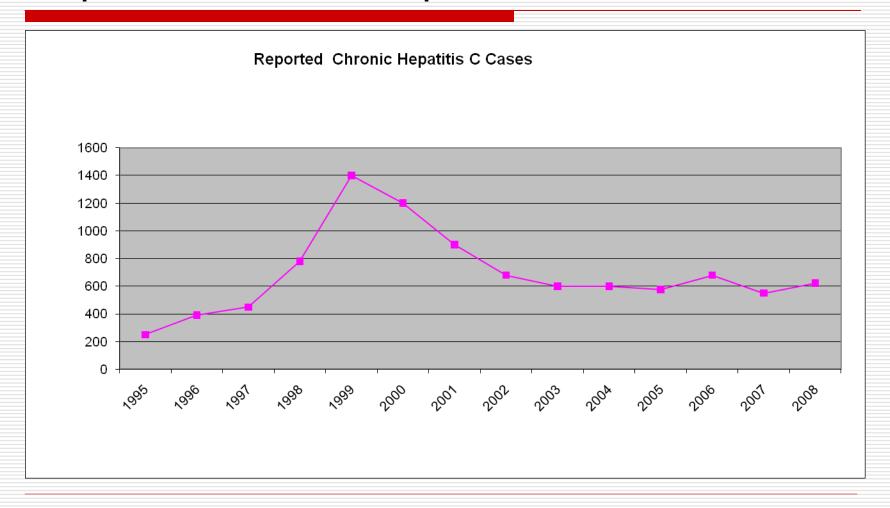
- The percentage of <u>new AIDS</u> cases attributed to IDU continues to decline.
 - From 19.9% in the period from January 1 2004 December 31 2005
 - To 11% in the period from January 1 2007December 31 2008.
 - HIV (only) <u>prevalence</u> attributed to IDU during the same period is 11.6%

Infants Testing Positive for HIV Antibodies at Birth Over Time

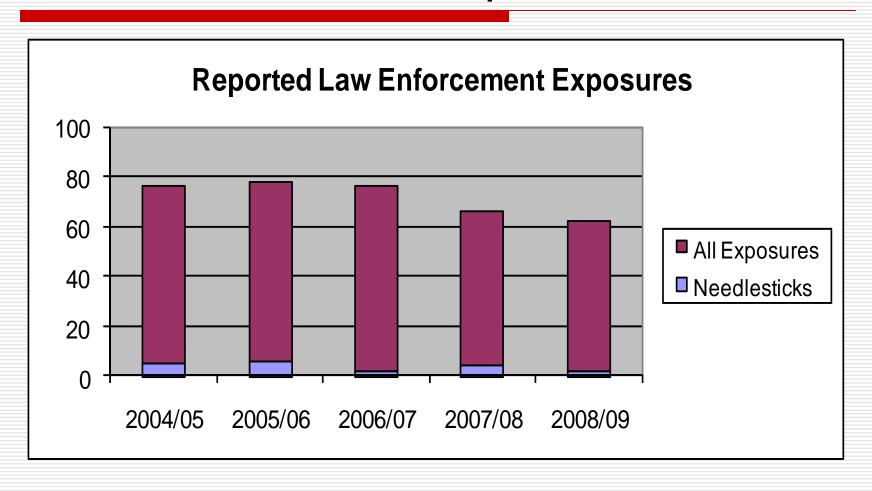
(total n=130. 10 children are diagnosed with AIDS)



Reported Chronic Hepatitis C Cases



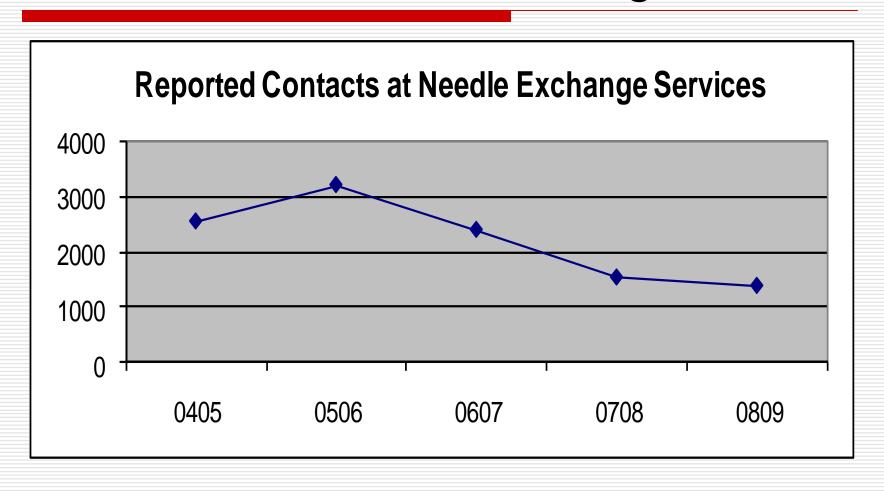
Law Enforcement Exposures



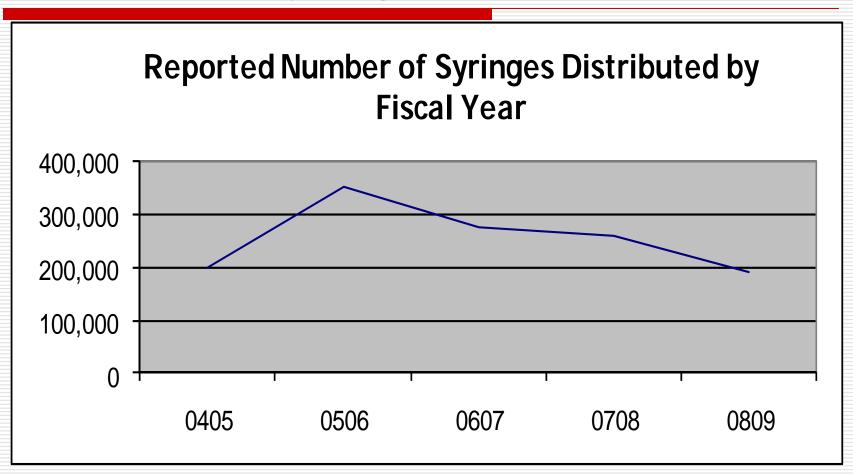
Funding for Needle Exchange

- County funding reduced last year to \$54,000 per fiscal year
- Offer condoms and other risk reduction materials as available
- □ Agency reports they expect an additional \$65,000 in private funds this FY but \$50,000 of that amount has not yet been confirmed

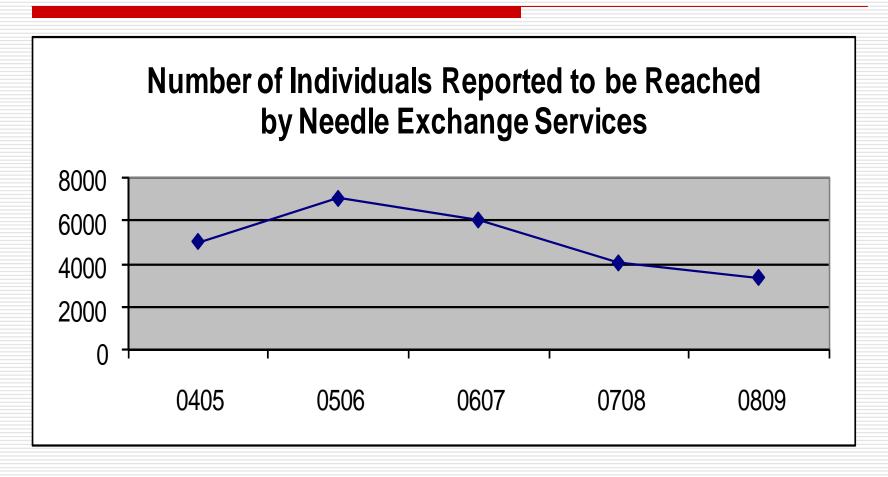
Contacts at Needle Exchange Sites



Number of Syringes Distributed



Secondary Exchanges Reported



Other Prevention Strategies to Reduce Transmission of HIV in IDUs

- Anonymous Partner notification and counseling services
- Prevention with positives program
- Homeless collaborative
- □ HIV testing services in community and in Alcohol and Other Drugs Services programs.
- □ Pharmacy syringe sales (State DPDP / SB 1159) in two chains and a few other stores.

Syringe Disposal Options

West County

Household Hazardous Waste facility
101 Pittsburg Ave., Richmond, CA 94801 1-888-412-9277

East County

Delta Household Hazardous Waste Collection Facility 2550 Pittsburg/Antioch Highway, Antioch, CA 94509 925-756-1990

■ All Contra Costa County residents

Sutter Regional Medical Foundation
4053 Lone Tree Way, Antioch, CA 94509 925-756-3400

John Muir Pharmacy 1220 Rossmoor Pkwy, Walnut Creek, CA 94598

CONCLUSIONS

- 1. Access to clean needles through needle exchange and pharmacy syringe services remain a necessary Public Health measure to reduce transmission of blood borne diseases. Downward trends are noted in the percentage of new AIDS cases attributed to Injection Drug Use, the number of children born with positive antibodies to HIV, and the reported number of individuals with Hepatitis C. The availability of needle exchange and pharmacy syringe sales contributes to this trend.
- 2. Reported local law enforcement exposure to potential blood borne pathogens via needle stick injury has not increased since needle exchange and pharmacy sales have been implemented. Materials for Law Enforcement to document potential exposure and request assistance are available on the website.
- 3. The contract for needle exchange services remains an important HIV prevention service component and should remain in effect so long as the service is provided. The service is a necessary component of the long-term strategy to reduce transmission of HIV and Hepatitis.

County of Contra Costa OFFICE OF THE COUNTY ADMINISTRATOR MEMORANDUM

DATE: November 16, 2009

TO: Family and Human Services Committee

Supervisor Federal D. Glover, Chair Supervisor Gayle B. Uilkema, Vice Chair

FROM: Dorothy Sansoe, Staff

Sr. Deputy County Administrator

SUBJECT: 2009 YEAR-END REPORT ON REFERRAL ITEMS

RECOMMENDATION(S):

- I. ACKNOWLEDGE that the Board of Supervisors referred two new items to the Family and Human Services Committee (FHS) for their review and consideration during the 2009 calendar year in addition to nineteen referrals carried over from the prior year.
- **II. ACCEPT** the recommendation to carry forward the following twenty-one referrals from the 2009 Family and Human Services Committee to the 2010 Committee:
 - a) Referral #1 Child Care Affordability Fund
 - b) Referral #2 Oversight of the Service Integration Team
 - c) Referral #5 Continuum of Care Plan for the Homeless/Healthcare for the Homeless
 - d) Referral #11 Oversight of the Work of the Policy Forum
 - e) Referral #20 Public Service Portion of the CDBG
 - f) Referral #25 Child Care Planning/Development Council Membership
 - g) Referral #44 Challenges for EHS
 - h) Referral #45 Elder Abuse
 - i) Referral #56 East Bay Stand Down for Homeless Veterans (Bi-annual)
 - j) Referral #58 County Wide Youth Commission
 - k) Referral #61 HIV Prevention
 - I) Referral #78 Community Services Bureau/Head Start Oversight
 - m) Referral #81 Local Child Care & Development Planning Council Activities
 - n) Referral #82 Secondhand Smoke Ordinance
 - o) Referral #92 Local Planning Council Child Care Needs Assessment
 - p) Referral #93 Independent Living Skills Program
 - q) Referral #94 Children's Treatment Facility RFP
 - r) Referral #95 Child Welfare Improvement Plan Annual Update
 - s) Referral #96 Fee for Service Child Care
 - t) Referral #98 Mental Health Pavilion A Review of Services to be Provided
 - u) Referral #99 Closure of the Chris Adams Girls Home

BACKGROUND/REASONS FOR RECOMMENDATION(S):

Between January and December 2009, the Board of Supervisors referred two new items to the Family and Human Services Committee (FHS) in addition to nineteen referrals carried forward from the 2009 year. The FHS Committee heard twenty-five separate reports on eighteen different referrals.

Three items were not brought to the Committee for discussion:

- Referral #56 East Bay Stand Down for Homeless Veterans, is a bi-annual referral which is only heard in even number years.
- Referral # 11 Oversight of the Work of the Policy Forum, was not brought to the Committee because the Policy Forum has been on a temporary hiatus and is only now regrouping. Therefore, no report was available.
- Referral #99 Closure of the Chris Adams Girls Home, was made late in the calendar year and it is not anticipated that this item will be ready to be presented to the Committee until early in the 2010 calendar year.