FIRST 5 STANISLAUS

Annual Program Evaluation 2023-2024

April 2025

The Stanislaus County Children and Families Commission

The Stanislaus County Children & Families Commission (CFC) was established by the Stanislaus County Board of Supervisors on December 8, 1998, following voter approval of Proposition 10 (Prop 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 prenatal through age 5 and their families in the areas of family support, child development, health, and safety.

The Annual Program Evaluation assesses the Commission's funded programs to determine each program's performance and efficiency in addition to 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

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

April 2025

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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 2023-2024 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 participant demographic datasheets (PDDs). Two of the main tools utilized are the PDDs and the Stanislaus County Outcomes and Results Reporting Sheet (SCOARRS). The demographic datasheet 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 was 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 2023-2024

Invested...

over $4.5 million in the community

Reached...

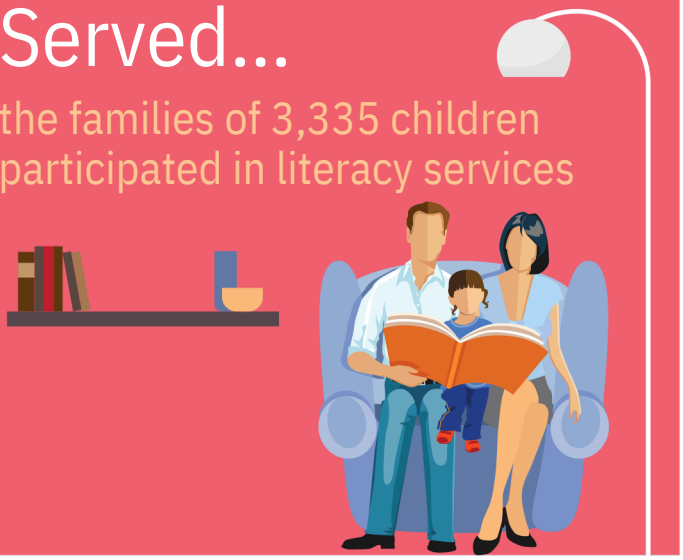
15,932 children, parents and providers

Provided...

children with 4,881 books to nurture a desire to read at home

Served...

the families of 3,335 children participated in literacy services



Provided...

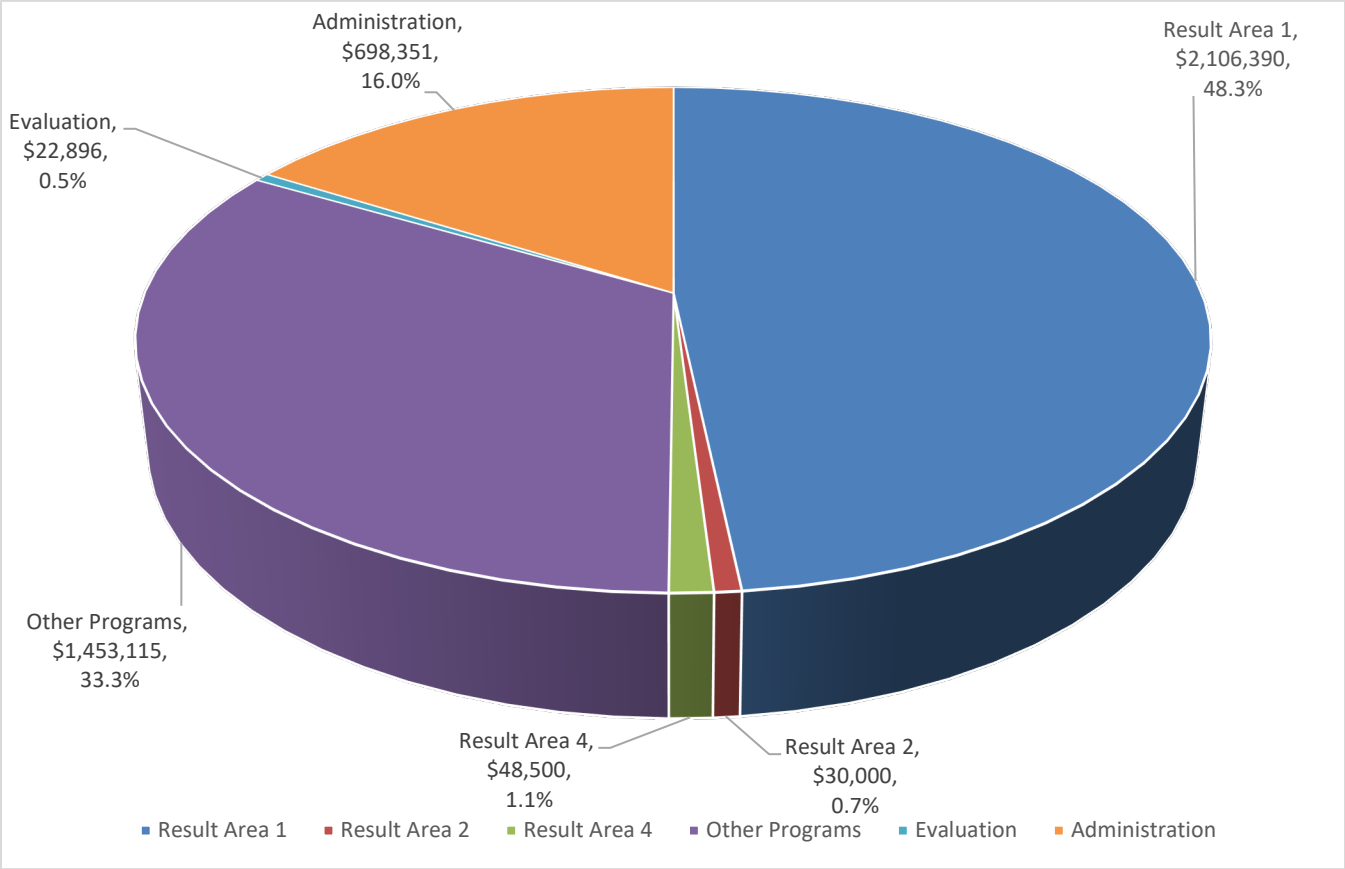
services to 5,789 children 0-5

Served...

301 children received developmental screenings

**All data reported by contractors*

Funding Distribution by Budget Category
Total: $4,359,252



The 2023-2024 budget pie chart portrays the distribution of Commission funding by budget category.

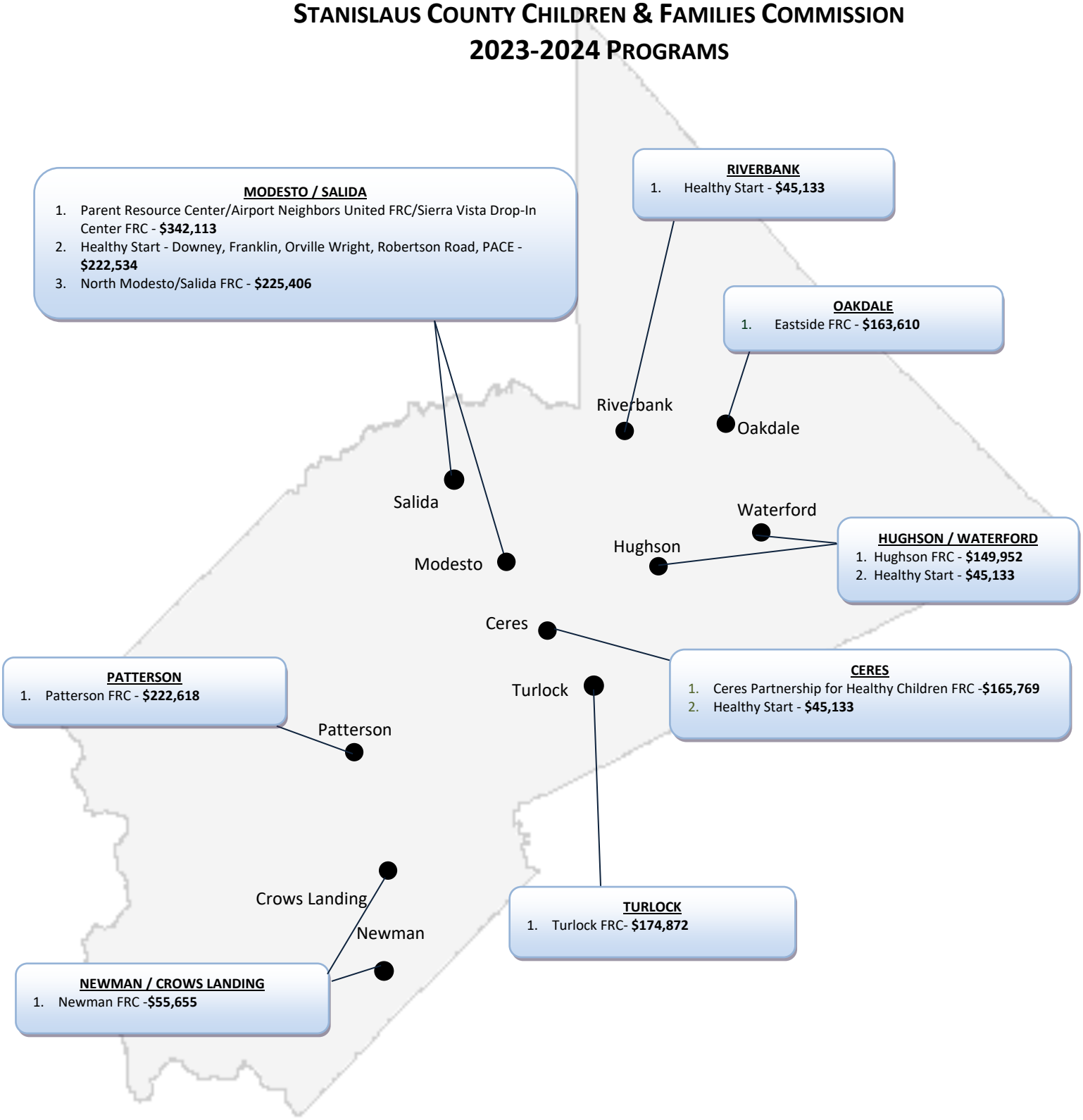
Program Categories:
The program categories (also known as Result Areas) make up 50.1% of the annual budget. These are areas in which outcomes for children ages 0-5 and their families are reported and evaluated. The funding provides measurable services for children and families.

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 33.3% of the budget.

Administration and Evaluation Categories:
These categories make up nearly 16.6% of the annual budget, with Administration comprising 16.5%* and Evaluation comprising 0.5%*.

*Contains rounding

STANISLAUS COUNTY CHILDREN & FAMILIES COMMISSION
2023-2024 PROGRAMS



COUNTYWIDE PROGRAMS

1. United Way 211 -**$40,000**
2. Healthy Start - **$91,331**
3. Imagination Library - **$75,000**
4. CSUS Warrior Food Pantry - **$20,000**

Program Budget Award by Location

Location	Program Budget Allocation	% of 23/24 Program Budget*	% of County's Population**
Modesto (includes Salida)	$ 790,053	43%	42%
Turlock	$ 174,872	9.4 %	14%
Riverbank	$ 45,133	2.4%	4%
Ceres	$ 210,902	11.4%	7%
Newman/Crows Landing	$ 55,655	3.0%	2%
Hughson/Waterford (includes SE smaller towns)	$ 195,085	10.5%	3%
Oakdale	$ 163,610	8.8%	5%
Patterson	$ 222,618	12.0%	4%
TOTAL of location specific programs	$ 1,857,929		
Countywide Programs	$ 226,331		
TOTAL:	**$ 2,084,260*** **		

*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, 2023 and 2024
***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 Salida 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 $226,331 was allocated to programs that operate throughout the county, making up 11% 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 89% 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

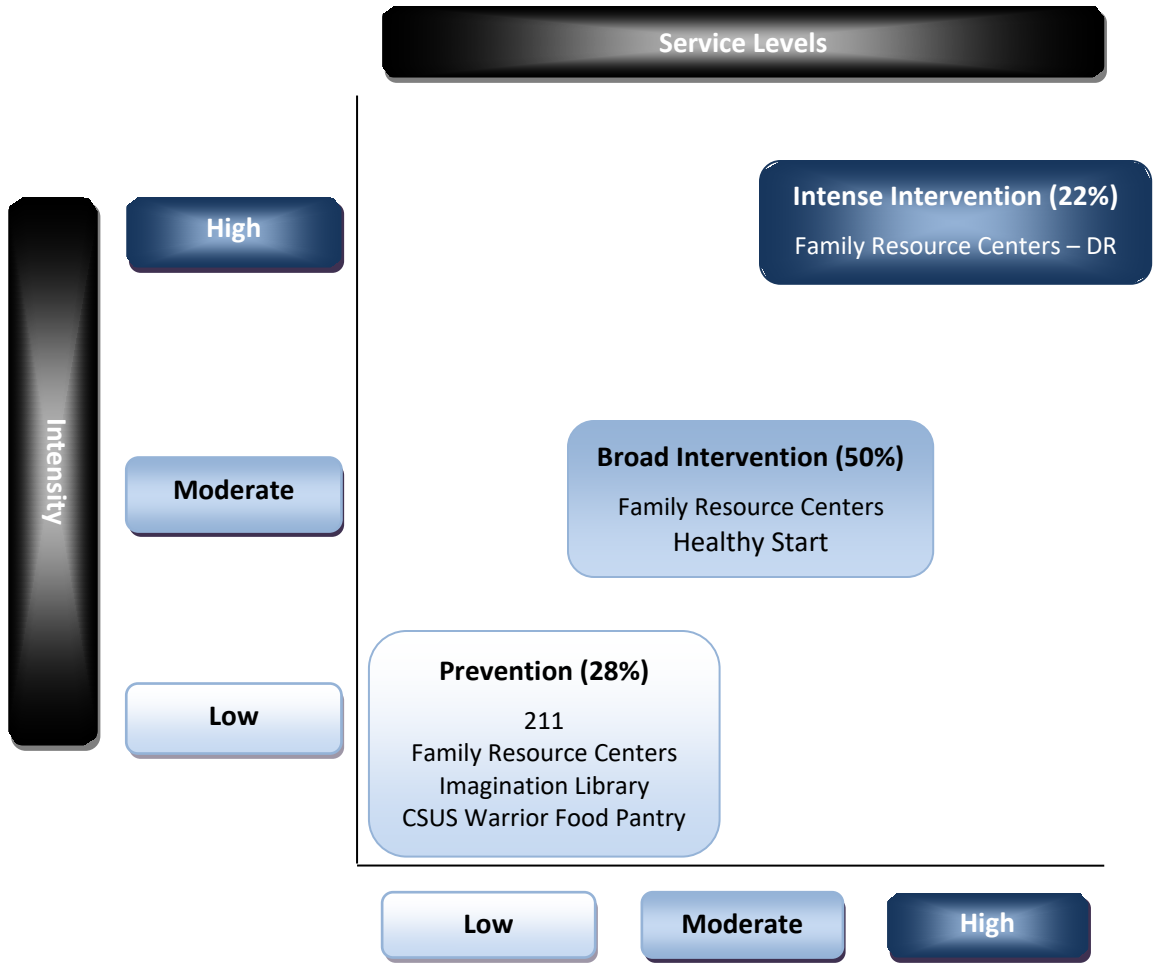
With the adoption of the Commission's 2019-2024 Strategic Plan, the Commission decided to increase its emphasis on primary prevention services. While the Commission continues to fund programs that offer a continuum of prevention and intervention services that target all children 0-5 and their families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

Service Levels

The diagram to the right depicts 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 50% of the contracts program budget is dedicated to Broad Intervention, while 28% goes to Prevention and 22% goes to Intense Intervention 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 multiple program components, and a certain overlap between service levels will occur as a result.



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 demographic datasheet (PDD) 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 relatively align with county demographics. There is a continuing emphasis on providing 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. The increase in Unknown participant demographic data is primarily attributed to the Imagination Library program which did not collect this data in 2023-2024.

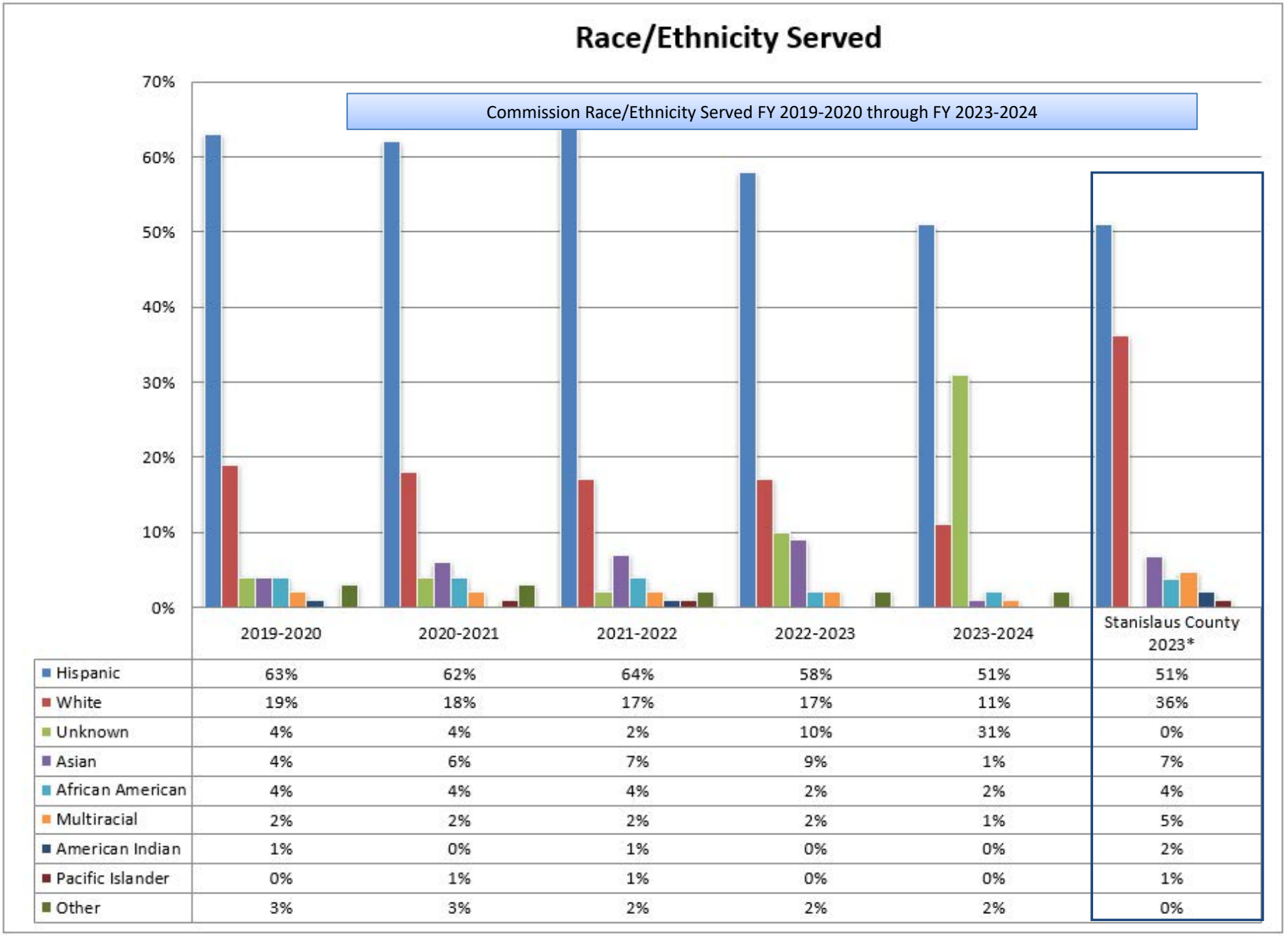
Participating Children Age Distribution

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 over the past five years.

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 5.0. (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 meets or exceeds the Healthy People 2030 goal for most ethnicities. Socioeconomic influences such as education, food security and income stability may be factors impacting the infant mortality rate for the different ethnicities.

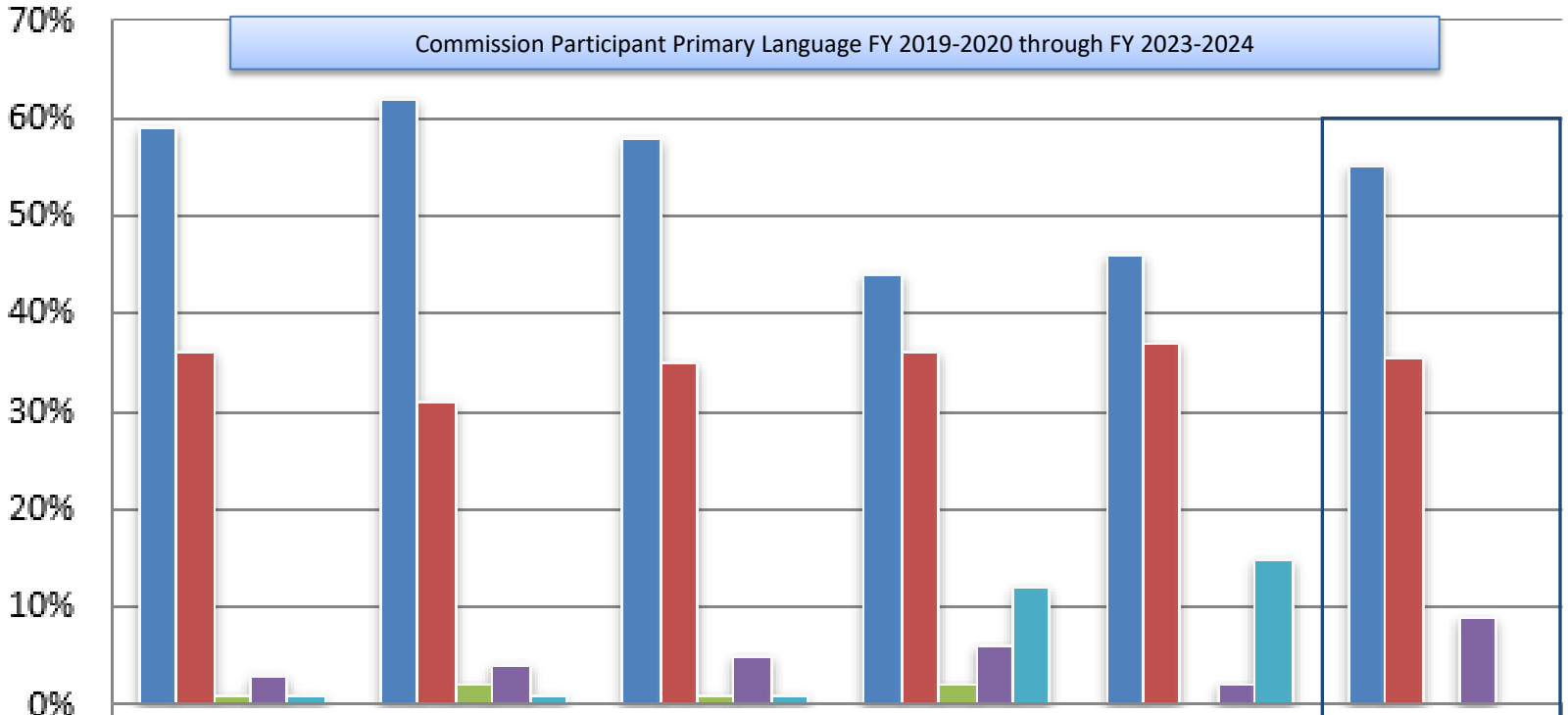


	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	Stanislaus County 2023*
Hispanic	63%	62%	64%	58%	51%	51%
White	19%	18%	17%	17%	11%	36%
Unknown	4%	4%	2%	10%	31%	0%
Asian	4%	6%	7%	9%	1%	7%
African American	4%	4%	4%	2%	2%	4%
Multiracial	2%	2%	2%	2%	1%	5%
American Indian	1%	0%	1%	0%	0%	2%
Pacific Islander	0%	1%	1%	0%	0%	1%
Other	3%	3%	2%	2%	2%	0%

CFC data does not include provider capacity language data.

*U.S. Census Bureau, 2023 American Community Survey (ACS).

Participant Primary Language

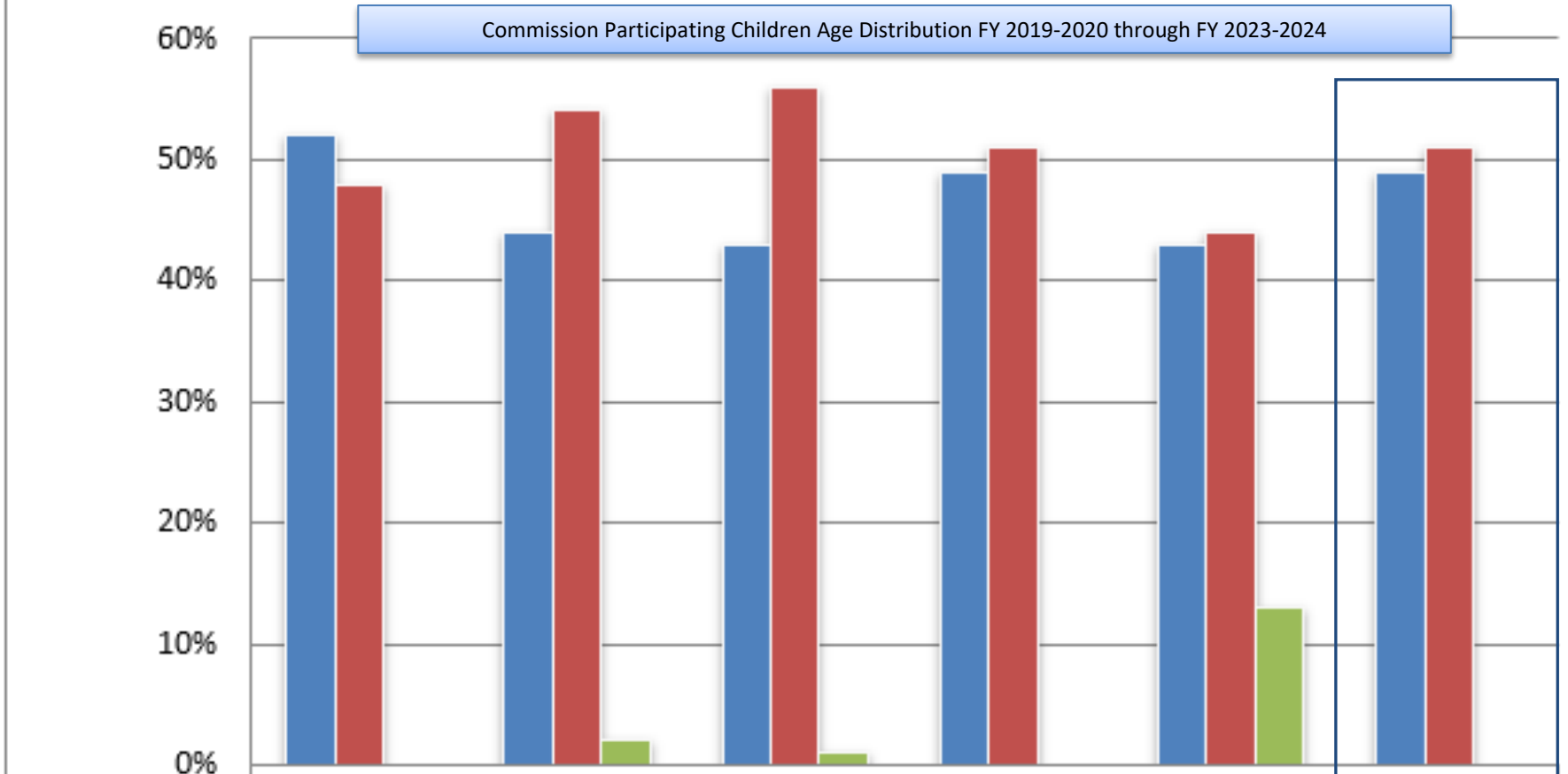


	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	Stanislaus County 2023*
English	59%	62%	58%	44%	46%	55%
Spanish	36%	31%	35%	36%	37%	36%
Hmong	1%	2%	1%	2%	0%	0%
Other	3%	4%	5%	6%	2%	9%
Unknown	1%	1%	1%	12%	15%	0%

CFC data does not include provider capacity language data.

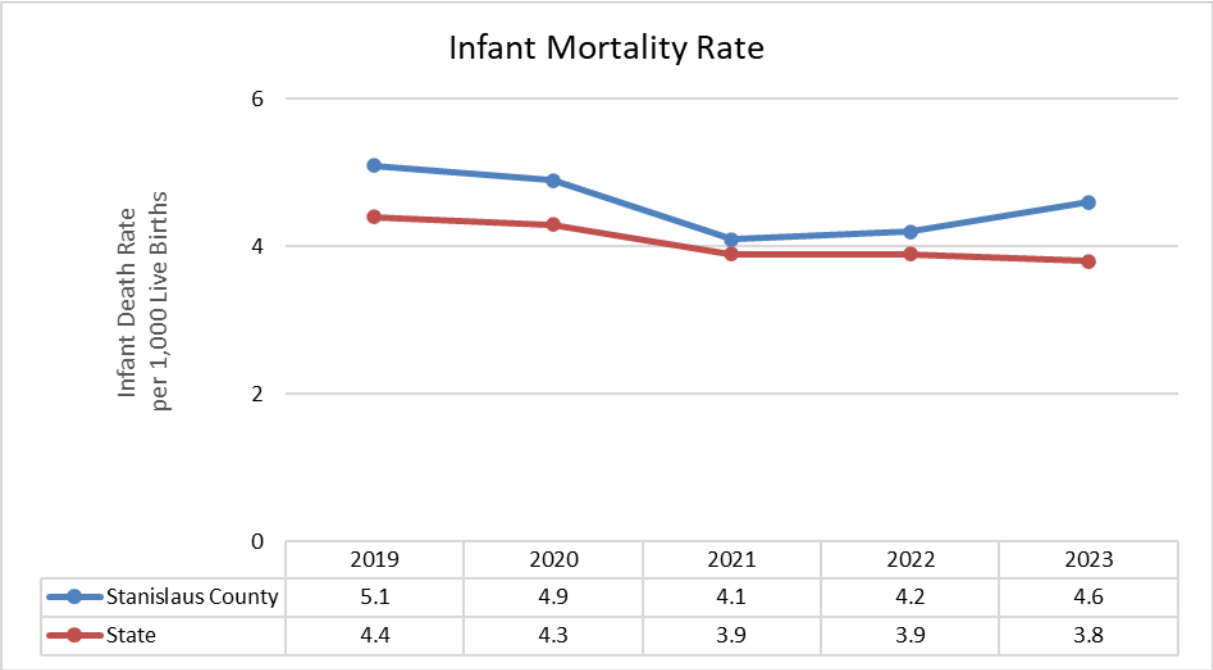
*U.S. Census Bureau, 2023 American Community Survey (ACS).

Participating Children Age Distribution



	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	Stanislaus County 2023*
0-2	52%	44%	43%	49%	43%	49%
3-5	48%	54%	56%	51%	44%	51%
Unknown	0%	2%	1%	0%	13%	

*State and County Total Population Projections by Race/Ethnicity and Detailed Age, California Department of Finance, July 2023



County Health Status Profiles, California Department of Public Health, 2020, 2021, 2022 and 2023; Stanislaus County's Health Status Profile, 2018 and 2019

Stanislaus County Infant Mortality Rate

	2019	2020	2021	2022	2023
All Races	5.1	4.9	4.1	4.2	4.6
Asian	NM*	NM*	M*	M*	M*
Black	M*	M*	M*	M*	M*
Hispanic	4	4.1*	3.2	3.4	3.4
White	5.7	5.3*	4.8	4.6	5.4

*Rates deemed unreliable when based on fewer than 20 data
*NM – Not Met refers to the Healthy People 2030 National Objective only (objective is 5.0)
*M – M refers to the Healthy People 2030 National Objective only (objective is 5.0)
https://health.gov/healthypeople/about

Result Area 1
Improved Family Functioning

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/caregivers, 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 48.3% of the 2023-2024 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 2023-2024 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 community's 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 offer general parenting education, support for basic family needs, school readiness education, family advocacy, and literacy services. These programs may also provide referrals or information about various community resources, including medical facilities, counseling services, family resource centers, and other supports for families with young children. This can include 211 services or other general helplines, as well as essential items like diapers and books. Additionally, we partner with Imagination Library, a multi-year contract between First 5 Stanislaus and the Stanislaus County Office of Education Charitable Foundation, which continues until the allocated funds are exhausted. In general, this category encompasses services that are less intensive and shorter-term for families.

Services are offered by a range 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?

- 5,789 children 0-5 received services designed to improve family functioning
- The parents of 2,646 children attended parenting education classes
- The families of 8,832 children 0-5 received resources or referrals to improve family functioning
- Children 0-5 whose caregiver participated in literacy services received 3,335 books
- 301 children 0-5 received a developmental screening
- 528 total children enrolled in Imagination Library
- A total of 4,881 books were distributed across the community
- A total of 52,800 diapers were distributed across the community
- 103 children were served through California State University Stanislaus Warrior Pantry

- 69% of children 0-5 obtained a library card after receiving literacy services (241/350)
- 50% of children whose developmental screening indicated a needed for early intervention were referred for and received services as a result (17/34)

- 96% of caregivers participating in parent education (582/609) reported an increase in skills or knowledge
- 97% of caregivers participating in parent education (591/609) reported an increase in confidence in parenting ability
- 75% of children 0-5 whose caregiver received literacy services (826/1,101) increased time reading at home with their family

Result Area 1: Improved Family Functioning

Program	Amount Expended in 2023-2024 (% of 2023-2024 allocation)	Total # Children 0-5 Served (or served through family members)	Cost per Child 0-5	Total Award To-Date (7/1/2007-6/30/2024)	Cumulative Amount Expended (7/1/2007-6/30/2024)	% of Cumulative Amount Expended
211	$ 40,000 (100%)	1,807	$ 22	$ 1,633,159	$ 1,506,044	92%
Healthy Start*	$ 449,265 (100%)	1,526	$ 294	$ 10,357,715	$ 10,323,264	99.7%
Imagination Library	$ 1,137 (1.5%)	528	$ 2.15	$ 75,000	$ 1,137	1.5%
CSUS Warrior Food Pantry	$ 20,000 (100%)	103	$ 194	$ 20,000	$ 20,000	100%
Family Resource Centers (providing Differential Response and AfterCare Services) (7 contracts)	$ 1,438,029 (96%)	1,825	$ 788	$ 28,096,588	$ 26,319,473	94%
TOTAL	$ 2,022,294 (96%)	5,988	$ 338	$ 43,038,802	$ 38,243,781	89%

* 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, 2024

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, 2024	FY 2023-2024 Award	FY 2023-2024 Expended*	Cumulative Amount Expended
$1,633,159	$40,000	$40,000 (100% of budget)	$1,506,044 (92% of budget)

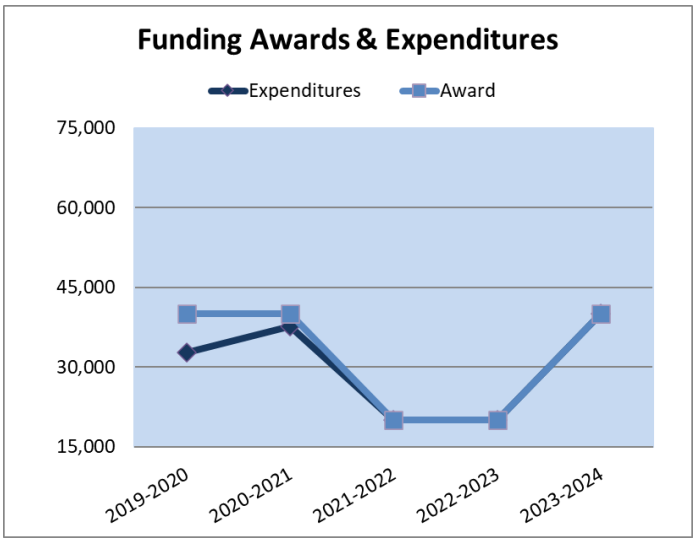
FY 2023-2024 Budget / Expenditure Data		
Call Center Costs	Indirect Cost Rate	Cost per Caller (1,807 callers with a child 0-5)
$40,000	10%	$22

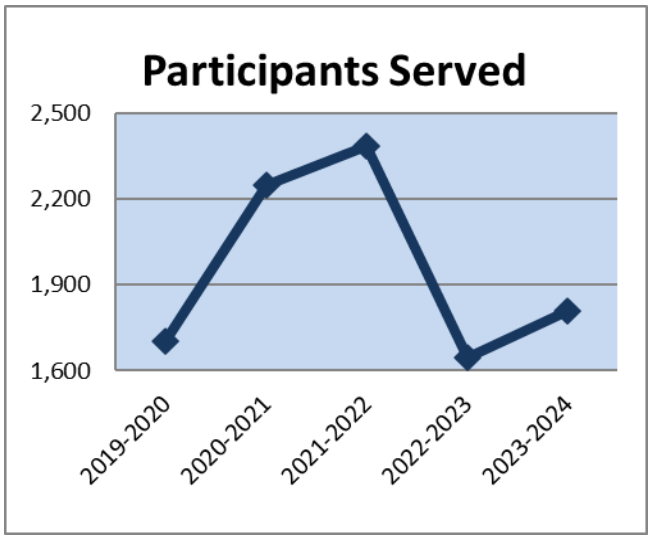
PARTICIPANT TYPE	% SERVED
Children 0-5	59%
50% <3; 49% 3-5; 1% unknown	
Parents/Guardians	41%
Other Family	-

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	19%
White	6%
Black/African American	3%
Asian	1%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	1%
Other	3%
Unknown	66%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	38%
Spanish	9%
Hmong	-
Other	1%
Unknown	52%

Participants Served Comparison by Fiscal Year





Funding for 211 decreased as the Commission began implementing its 2019-2024 Strategic Plan. 211 has struggled the past several years to consistently expend the award amount but was able to expend 100% in 2021-2022, 2022-2023, and 2023-2024. The number served decreased significantly in 2022-2023 as a result of 211's call center inability to adequately answer calls. The Standard Operating Procedures (SOPs) and systems are now significantly stronger than they were previously, which has led to a slight increase in participants served during 2023-2024. United Way has also reported an increase in outreach efforts to promote the 211 program within the community.

Program Highlights

- The 211 program experienced some difficulties in 2022-2023 that impacted its ability to operate as efficiently as its done in prior years. There were significant staffing changes that resulted in the loss of institutional knowledge, specifically in how data was collected and exported from the iCarol database. This affected the data process for much of the fiscal year. Furthermore, United Way's contracted call center had staffing issues that reduced its ability to effectively answer calls placed to 211. This ultimately resulted in lower 211 referrals being made in 2022-2023 than in recent years.
- The 211 program experienced significant improvements in 2023-2024, increasing their numbers across all areas. The 211 program faced staffing issues in 2022-2023, which led to the development of more robust Standard Operating Procedures (SOPs) to assist with smooth staff transitions. However, there are still challenges with the 211 database, particularly as some organizations have left the network. Despite this, 211 has not seen a drop in its results for this fiscal year and is working diligently to improve its database.
- In 2023-2024, United Way of Stanislaus County (UWSC) saw an increased engagement with Family Resource Centers, reflecting their ongoing efforts to strengthen partnerships and enhance service delivery.
- The 2-1-1 program has commenced a targeted community outreach initiative to increase awareness of its services among previously underserved communities. This strategic effort aims to ensure that all individuals have access to the vital resources and support offered by the program.
- 211 continued to strengthen their relationships with Family Resource Centers in the county. In 2023-2024, they have continued their United Way's Build United capacity building program started a cohort of Family Resource Centers to help strengthen their organizational capacity so that they are better suited to meet the needs of the communities they serve. Their outreach efforts

have included directly emailing FRC leadership with opportunities for families and updating their 211 database to have the most current program information for each FRC.

- 13% of callers were from households with a child 0-5, meeting the program target outreach for 11% 0-5 families.
- The following were common types of service requests in 2023-2024:
    - Housing (3815)
    - Food/Meals (2439)
    - Utility Assistance (2187)
    - Legal, Consumer, and Public Safety Services (658)
    - Mental Health/Substance Use Disorders (585)
- The top 5 categories families with children 0-5 years old and/or pregnant in 2023-2024 were:
    - Housing (568)
    - Food/Meals (476)
    - Utility Assistance (428)
    - Clothing/Personal/Household Needs (232)
    - Individual, Family, and Community Support (92)
- In 2023-2024, 211 participated in the following outreach activities:
    - Free Tax Prep – Parent Resource Center
    - Back to School Resource Fair – El Concilio
    - Kids Connect Community Celebration - Department of Child Support Services
    - Foster Youth Tax Credit – Youth Navigation Center
    - First Fridays – NAACP/UWayStan
    - Back to School Block Party – Patterson Unified School District
    - 8th Annual Education Day & Open House
    - Back to School Resource Fair – West Modesto
    - Welcome Day – Modesto Junior College
    - Senior Stride – Modesto Rotary Club Foundation
    - Health & Safety Fair – Foster Farms
    - Family Fun Night – Turlock
    - Family Fall Festival – Stanislaus County Police Activities League
    - Christmas Posada – South Modesto Business United
- Leveraging: 211 received $200,000 in funding from Stanislaus County Community Services Agency and $75,000 from Kaiser.
- Collaborations: UWSC and 211 continues to collaborate and meet with local organizations, city/county agencies, and other convenings. Their collaboration with fellow 211 organizations has been critical this year as they evaluate the performance of their call center. They have leveraged relationships and built new ones to learn what other 211s are doing, how they are making an impact, sharing best practices, and even looking at other 211s policies and procedures so that they can improve upon their own.
- Sustainability: With the rising costs of operating 211, UWSC has had to reassess its funding structures and determine what steps are necessary to remain relevant and achieve their goals. For the upcoming fiscal year, they have applied for additional funding through county and general grants to better serve the community's needs. Recognizing the importance of being proactive, UWSC plans to pivot its approach to ensure 211 is not just a passive service. This includes enhancing their system to integrate closed-loop referrals, such as looking into Cal Aims, and positioning 211 as the first access point for individuals before directing them into care services. They also face challenges with rising operational costs, particularly in running their call center and maintaining a robust 211 service. With the added funding opportunities, they aim to strengthen their 211 offerings and build upon the improvements made this year to better meet community needs.

Prior Year Recommendations

2022-2023 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.	• To continue working on the Commission's priorities of sustainability, leveraging, and collaboration, it is crucial to focus on constantly evaluating closed-loop referrals, particularly through programs like Cal Aims. By positioning ourselves as the first access point, we can ensure that individuals are not only connected to immediate services but are also seamlessly referred into ongoing care. This approach strengthens long-term sustainability by fostering partnerships that extend beyond the Commission's financial support, ensuring that services remain available and accessible over time. By leveraging collaboration across services, we create a robust support network that can continue to meet the needs of the community, even after initial funding has ended.
2. Develop cross-training for contract requirements and reporting to ensure continuity of services if staff are out or leave the organization.	• To ensure continuity of services if staff are out or leave the organization, we have made significant strides in developing cross-training for contract requirements and reporting. Our Standard Operating Procedures (SOPs) and systems are now much more robust than before, putting us in a good position to handle staff transitions smoothly. For instance, staff visited Bakersfield for training, which shows our commitment to engaging in ongoing professional development. As a result, continuity of services has greatly improved. However, there remains a challenge with the database, particularly as some organizations have left the network. Despite this, we are optimistic that people will recognize that 211 is back up and running, which will help restore full access to services and maintain service continuity.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?

OUTPUTS / OUTCOMES	PLANNED	ACTUAL
211 callers will have access to health and human services program information 24/7/365	100%	99.9% (9,670/9,680)
211 callers with children 0-5 have access to health and human services program information 24/7/365	100%	100% (1,263/1,263)
11% of callers have children 0-5	11%	13% (1,263/9,670)
Callers with children 0-5 years are unduplicated callers	75%	100% (1,263/1,263)
211 callers with children 0-5 who are contacted for follow-up report having their needs met through referrals after calling 211	50%	100% (3/3)
211 callers with children 0-5 who are contacted for follow-up report satisfaction with the services they received from 211	80%	100% (3/3)

Recommendations

This program has undergone multiple annual and periodic evaluations by Commission staff and has been responsive to prior years' recommendations. As the program progresses, it is recommended that it continue to focus on the Commission's priorities of sustainability, leveraging resources, and collaboration to ensure that services remain available after the Commission's financial support concludes.

Additionally, it is recommended the program develop procedures and 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, 2025

Program Description

Eight 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 8 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, 2024	FY 2023-2024 Award	FY 2023-2024 Expended	Cumulative Amount Expended
$10,357,715	$449,265	$449,265 (100% of budget)	$10,323,264 (99.7% of budget)

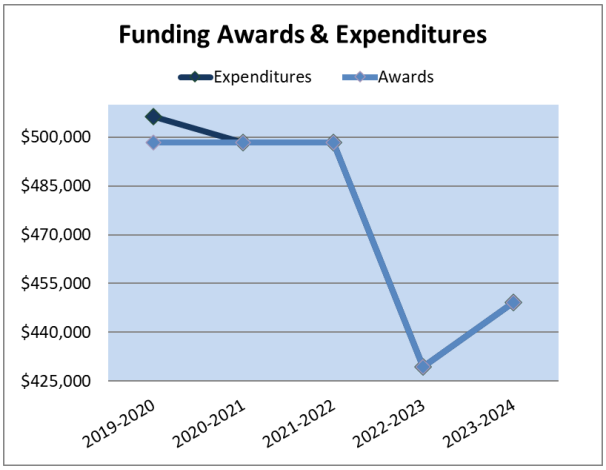
FY 2023-2024 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Healthy Start Sites	Indirect Cost Rate	Cost Per Child 0-5 (1,526)
$67,278	$15,902	$357,934	9.8% (excludes sites)	$294

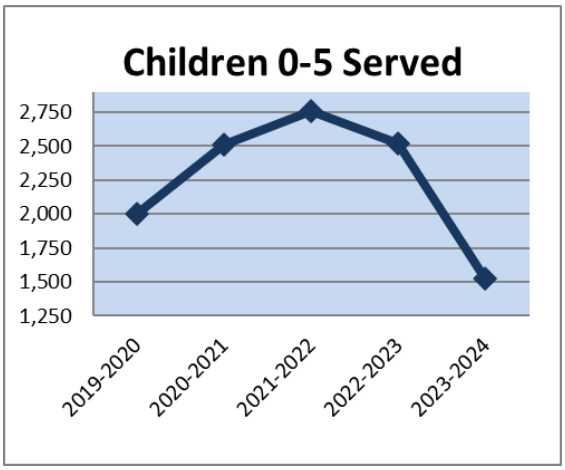
PARTICIPANT TYPE	% SERVED
Children	50%
56% <3; 44% 3-5	
Parents/Guardians	44%
Other Family	6%

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	81%
White	15%
Black/African American	1%
Asian	1%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	-
Other	2%
Unknown	0%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	40%
Spanish	59%
Hmong	-
Other	-
Unknown	0%

Children 0-5 Served Comparison by Fiscal Year





The significant decrease in the number of children aged 0-5 served in 2023-2024 is largely due to changes in reporting procedures. The Stanislaus County Office of Education (SCOE) has made concerted efforts to improve the accuracy of data, ensuring that clients served during the year are not duplicated in the records. As a result, the decrease in the number of children aged 0-5 reflects the implementation of this new tracking method.

Program Highlights

- The 8 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.
- Healthy Start sites offered workshops to the families they serve to provide education, awareness and or resources on the topics presented. In 2023-2024, the sites offered workshops on:
  - CASA Del Rio: CPR/First Aid Training, Latino Literacy, & Parent Cafés.
  - Ceres: 12 Tools & Zones of Regulation, First Steps for Learning Program, and Parents SPRING into ACTION.
  - Downey: CPR & First Aid Training, Believe. Become. Change (levels 1 & 2), Parent Cafés, Golden Valley Presentations (mental health and healthy eating), and financial literacy classes (5).
  - Franklin: Parent Café (twice a month), FRC services presentation, Wellness with Golden Valley (4 sessions), Adult ESL classes, and Growth Heartset (8 weeks), Positive Parenting, and District Workshop.
  - Hughson: On the Road to Kinder, Abriendo Puertas, and 2nd Cup of Coffee.
  - Orville: Dance Therapy, Wellness, Food Smart, Kinder Readiness, Parent Café, Navigate the School System, and ESL.
  - PACE: Connecting Through Play and Nurturing Parenting.
  - Robertson Road: Golden Valley Health Clinic Parent Workshops.
- In 2023-2024, the Healthy Start sites held many activities to support child literacy development. Some highlighted activities for the year include
  - CASA Del Rio: TK/Kinder – Mexican Heritage Book Distribution and Monthly Scholastic Reader (for all TK). Books were also distributed at the Walk, Bike, and Roll to School and Toys for Tots events held in Riverbank.

- Ceres: Books were distributed at Second Harvest Mobile Food Truck, First Steps for Learning Program, 12 Tools & Zones of Regulation, Parents SPRING into ACTION, and Community Zumba Parent Class. Literacy events held include Sensory Storytime, Storytime at Stanislaus County Library, and Community Literacy Event.
- Downey: Family Literacy Night and Spring Book Distribution.
- Franklin: Storytime with book distribution and Franklin Literacy Night.
- Hughson: Reader in Me Program, Winter Literacy Event, and Summer Literacy Event.
- Orville: Storytimes with book distributions and monthly scholastic reading.
- PACE: Sensory Story Time sessions.
- Robertson Road: Literacy Night & Sensory Story Time.

- All Healthy Start sites engage in outreach activities to increase community awareness of their programs and the services they offer. Outreach activities for 2023-2024 included:
  - CASA Del Rio: Community Baby Shower and Lights on & Resource Fair.
  - Ceres: Community events include Sensory Storytime, Community Zumba Parent Class, and Community Literacy Event. Outreach events include Back to School Nights (3), Mental Health isn't Scary, Ceres Community Center Trunk or Treat Event, TK/Kinder Registration Fair, and Walter White Open House.
  - Downey: Family Literacy Night, Food Basket Giveaway, Spring Basket Giveaway, Back to School, Elliot Family Night, Elliot Outreach event, and round-ups.
  - Franklin: National Night Out, Back to School Night, Free Mobile Farmers Market, Free Bread and Food Giveaway, Chase Backpack Giveaway, Family Fun Nights, Back to School Bash, Kids Connect, and round-ups.
  - Hughson: Winter Literacy Event, Summer Literacy Event, Back to School Night, and Kinder Registration.
  - Orville: Summer Community Gathering at George Rogers Park, Family Day at Oregon Park, ribbon-cutting for the reopening of Oregon Park, Head Start & Preschool Parent Orientation, Second Harvest Food Distribution, and round-ups.
  - PACE: Community Baby Shower, Child Trafficking Preventative Training, CSU Stanislaus Child Development Center Family Night, and CSU Stanislaus Child Development Center Community Event.
  - Robertson Road: Literacy Night, Back to School Night, Second Harvest Food Distribution, and round-up.
- Leveraging: In 2023-2024, the Healthy Start sites reported receiving $768,247 directly from State and Federal government sources, local government sources, and in-kind services or goods generated by participating school sites.
- 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 Healthy Start sites collaborate with different agencies in their respective communities 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.

Prior Year Recommendations

2022-2023 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Increase the percentage of families with children 0-5 reporting expanded social connections after attending a community event.	• SCOE provided consistent reminders during meetings and site visits. The data above from Q1 shows that constantly reminding sites and stressing the importance of surveys improved outcomes. Q2 new enrollment numbers was lower than previous year. We will continue to work with the sites to ensure they are capturing as many surveys as possible.
2. Implement practices to increase surveys collected from participants, even for virtual services.	• During Q1 and Q2, there was a slight decrease in the students 0-5 who reported an increase in reading time at home based on the assessment date. During the 23/24 year, 93 0-5 students reported an increase in reading time at home, and in 24/25, there were 90. Literacy programs offered across the collaborative included TK/Kinder Mexican Heritage Story Time and book distribution; monthly Scholastic Reader distribution to all TK/Kinder students at RUSD; Imagination Library referrals; walk and Read Wednesdays; Franklin's Family Literacy Nights; Book Distribution and Story Time events; Hughson's Reader In Me program; Orville Wright's monthly Scholastic Reading and Activity Magazine distribution; Sensory Story Time events at PACE, Robertson Road, Ceres; and Robertson Road's School Literacy Night. Additionally, 777 books were distributed during this reporting period.
3. Implement strategies to increase reading time at home as a result of literacy services.	• During Q1 there was a decrease in the percentage of families with children 0-5 reporting an expanded connection. During Q2 there was an increase in the based on newly enrolled clients, which was 40% compared to 20% in 23/24. This is an area that we will continue to focus on during Q3 and Q4.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?

OUTPUTS / OUTCOMES	PLANNED	ACTUAL
Caregivers of children 0-5 are made aware of program services through outreach	No Planned Outcome	704
Families with children 0-5 have knowledge and skills to support their growth and development - as evidenced by the following:		
Families reporting improved parenting skills as a result of participating in parenting education	80%	97% (295/303)
Families reporting increased confidence in their parenting ability	No Planned Outcome	95% (124/131)
Families reporting increased parenting skills as a result of participating in workshops	No Planned Outcome	96% (126/131)
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	19% (187/426)
Children 0-5 have access to books at home	No Planned Outcome	2,228 books distributed
Virtual or In-Person Storytimes are provided to the families	No Planned Outcome	19

Recommendations

This program has undergone multiple annual and periodic evaluations by Commission staff and has been responsive to prior years' recommendations. As the program progresses, it is recommended that it continue to focus on the Commission's priorities of sustainability, leveraging resources, and collaboration to ensure that services remain available after the Commission's financial support concludes.

Additionally, it is recommended the program:

- Continue to implement practices to increase surveys collected from participants.
- Continue to implement strategies to increase reading time at home as a result of literacy services.
- Increase the percentage of families with children 0-5 reporting expanded social connections after attending a community event.

Family Resource Center Countywide Summary

Agencies: Aspiranet, Center for Human Services, Sierra Vista Child & Family Services, Parent Resource Center
Current Contract End Date: June 30, 2025

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 their 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 (AC) 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, support groups, school readiness education, 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, 2024		FY 2023-2024 Award		FY 2023-2024 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)*
$28,096,588	$40,325,549	$1,499,995	$2,399,995	$1,438,029 (96%)	$2,109,971 (88%)	$26,319,473 (94%)	$37,336,072 (93%)

Cost per Child 0-5 to Commission (1,825) = $788

PARTICIPANT TYPE	% SERVED
Children	38%
47% <3; 50% 3-5; 3% Unknown	
Parents/Guardians	40%
Other Family	22%

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	54%
White	12%
Black/African American	3%
Asian	1%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	2%
Other	3%
Unknown	23%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	43%
Spanish	34%
Hmong	-
Other	3%
Unknown	19%

An Investment In Communities
Family Resource Centers and Differential Response

During the last 19 years, the Commission has invested over $28 million dollars in Differential Response-Family Resource Centers (DR-FRCs). The funding for 2023-2024 represents 41% of the Commission's total program budget and 72% 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 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).

Protective Factors Surveys & Case Management (Improved Family Functioning)

All FRCs utilize the same assessment from the Protective Factors Survey (PFS). 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 completes a secondary PFS after three months or at the end of their services and the PFS 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)

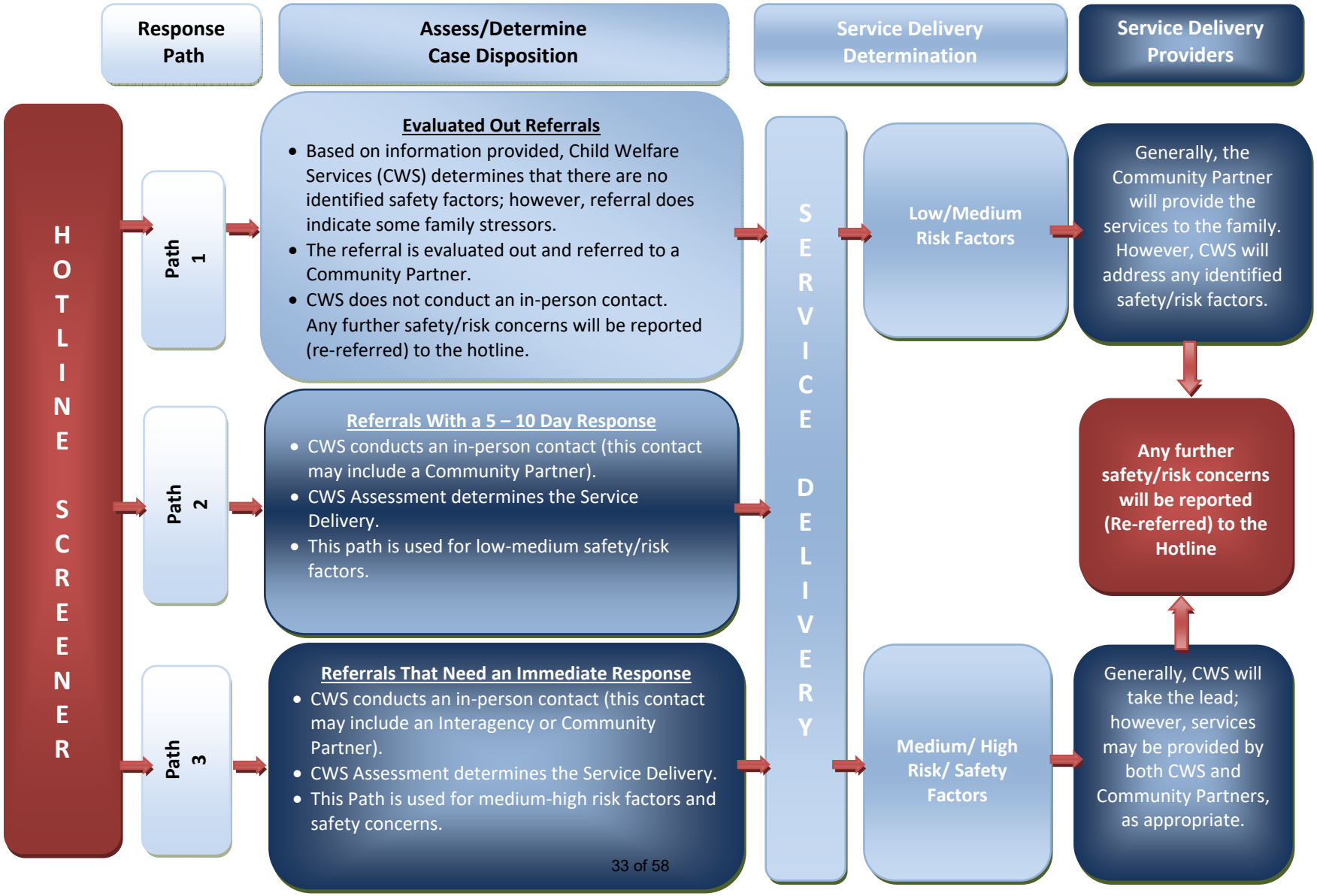
The Ages and Stages Questionnaire is used by all FRCs to screen children 0-5. The screening is intended for the early detection of developmental concerns in asymptomatic children. The caregiver is involved in the screening process, and child development activities and issues are discussed. If indicated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

School Readiness/Literacy Support (Improved Child Development)

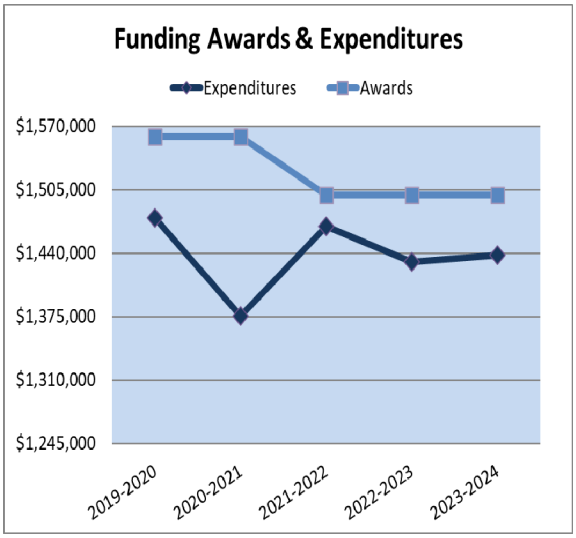
The FRCs use the Creative Curriculum program to provide children and their families with developmentally appropriate services that support active learning and promotes progress in all developmental areas. The FRCs may offer school readiness groups or include caregiver/child interactions in their parent 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.

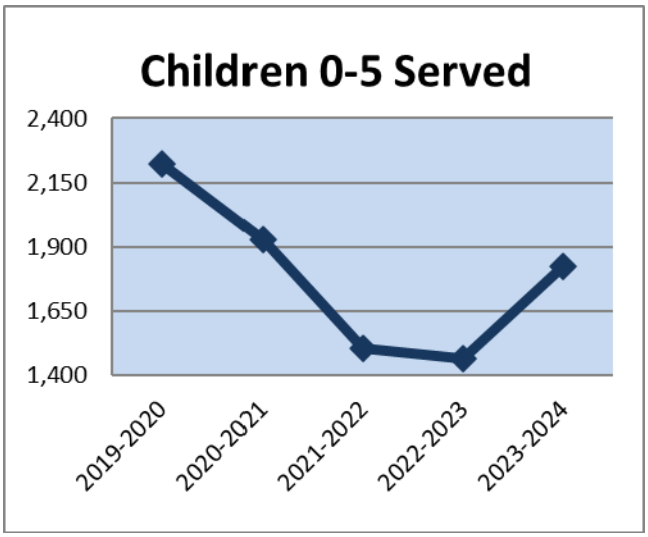
Differential Response is a strategy where community groups partner with the county's child welfare agency to respond to child abuse/neglect referrals in a more flexible manner (with three response paths instead of one). CSA's response to a referral depends on the perceived safety and risk presented. 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





FRC expenditures have remained relatively stable, averaging 93% of the award. The number of individuals served increased in 2023-2024, as FRCs expanded their offerings by providing more classes and participating in a greater number of outreach events compared to the previous year. This growth can also be attributed to the additional community partnerships established by the FRCs. It is important to note that 2023-2024 marked the first year without any COVID-19 restrictions, which enabled FRCs to engage more actively in the community and host more in-person classes.

Program Highlights

- In 2023-2024, the FRCs served a total of 1,825 children, 2,649 parents, and 2,165 other members. FRCs are starting to see an increase in participation compared to the previous three years. The FRCs have shared the challenges post-COVID regarding engagement with families in the communities they serve. However, in 2023-2024, FRCs have put a lot of effort into developing new partnerships with community organizations.
- 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 DR services from each FRC. The MDT 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:
  - ✓ Participant Demographic Datasheets (PDDs) – Data is submitted quarterly through the online data portal; programs input counts for services and the demographic data of participants.
  - ✓ 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) Caregivers have increased protective factors; 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.

- The FRCs offered workshops on the following:

  - North Modesto: Father's Workshop, Homeownership, Haven Women's Presentation on Domestic Violence, Immigration, Child Development, and CPR Training.
  - Hughson: Community Presentation, Financial Literacy, Stanislaus County Preparedness, and Childhood Lead Poisoning.
  - Westside: Water Safety, Nutrition for the Family, Mental Health, Self-Care and Parental Resilience.
  - Oakdale: Car Seat Safety, Nutrition, and Mental Wellness.
  - Ceres: Nutrition, Goal Setting, Water Safety, Mental Wellness, and Self Care.
  - Turlock: Advocacy, Resume Building, Self-Care, Nutrition, and American Society.
  - Parent Resource Center: El Concilio Presentation, Trauma, and Mental Health.

- The FRCs provided many opportunities for their participants, and their community in general, to build social connections through community events they hosted throughout the year. Events held included Harvest Festival, Thanksgiving Community Dinner, Shop with a Cop, Coats for Kids, Back to School Drive and Kid's Summer Camp.

  - North Modesto: Bookfair, Harvest Festival, and Holiday Event.
  - Hughson: Backpack Distribution and Winter Event Frosty Fiesta.
  - Westside: Back to School Event, Coats for Kids, Holiday Food Support, Toy Drive – In partnership with the Patterson Fire Department, Homecoming Project, Newman Toy Drive, and Thanksgiving Community Dinner.
  - Oakdale: Community Baby Shower, Back to School Resource Fair, Winter Resource Fair, Thanksgiving Food Distribution, Angel Tree, Holiday Giving Event, Christmas Food Distribution
  - Ceres: Family Appreciation Resource Fair, Thanksgiving Community Dinner, Giving Tree, and Shop with a Cop.
  - Turlock: Coat Drive, Community Free Market, Multiple Resource Fairs, and Fun in the Sun Carnival.
  - Parent Resource Center: Annual Client Christmas Celebration, Two Free Markets, Kid's Summer Camp, Red Shield Back to School Back, Resource Fairs, and Back to School Drive.

- Leveraging: As a group, in 2023-2024, the FRCs leveraged a total of $3,476,643 from local government sources and $657,896 was generated by civic groups, foundations, and local fundraising events.
- Collaboration: FRCs have developed an extensive number of collaborations with public, private, and non-profit agencies including: El Concilio, 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 2023-2024 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	
2022-2023 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.	• We recognize the need for sustainable funding and are always working to meet that goal. In addition, we develop new partnerships and strengthen existing partnerships to build a strong culture of collaboration. • Funding from BHRS provides an active community Promotora program. Ceres Partnership (CP) has unrestricted funds through Medical Administration Assistance (MAA) billing that has allowed them to see families over the age of 5 years. We also received funding through Cal Fresh and the American Rescue Plan Act. The FRC received large donations of food, clothing and books as well as some monetary donations and other family supplies this year to distribute to 0-5 and DR children and families. We have many community volunteers who assist us on an ongoing basis. • Ceres Partnership has strong partnerships within the Ceres/Keyes community as well as throughout Stanislaus County. We form and maintain partnerships to coordinate service delivery, improve program efficiency, streamline administration, and eliminate the duplication of services. We partner with CUSD, Ceres Healthy Start, Ceres Head Start, and Project YES! for referrals, facility usage, service delivery and outreach to parents. CP is a part of the Ceres Community Collaborative with CUSD and the City of Ceres. We partner with Keyes School Readiness and Keyes Unified School District for referrals and to assist in service delivery for the Keyes community. First Southern Baptist and Valley View Church of the Nazarene provide outreach, referrals, and emergency food services for CP families when needed. Stanislaus County library remains a consistent partner who provides reading time, literacy activities, free books, and library cards to 0-5 families. CP partners with Community Services Agency (CSA), Behavioral Health and Recovery Services (BHRS) and Health Services Agency (HSA) on many projects and contracts. Other partners include Ceres Champions, Service Clubs of Ceres, Child Care Resource & Referral, Alliance WorkNet, Leaps & Bounds and the WIC (Women's, Infants and Children) program. CP also has strong partnerships with other FRCs, non-profits, agencies and community collaborations/groups. • Our most important collaboration is the network of local businesses and organizations. Ceres is a close-knit

	community, and people are eager to support those in need. Having a presence at community events, collaborations, and partnership meetings has allowed us to expand our services and reach new families in need of support. One of our biggest champions and supported has been Councilmember Rosalinda Viera, she has recognized the importance of CP in the ceres community and goes above and beyond to include us in events or conversations.
2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• We have strengthened our partnerships with local schools by inviting them to tour our sites, allowing them to learn about our services firsthand. This collaboration has facilitated warm handoffs between school liaisons and parents who may benefit from our support. Additionally, these partnerships have opened opportunities for us to present at community schools, further expanding awareness of our services. • We also ensure that all outreach efforts and group sessions at the FRC highlight the full range of available programs. Our groups are intentionally planned with participants' interests and benefits in mind, fostering a welcoming and relevant experience that encourages continued engagement.
3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• We have improved our survey collection process to make it more accessible, relevant, and inclusive to the individuals we serve. By creating QR codes and categorizing surveys based on services, we ensure that participants only respond to questions applicable to their experiences—those receiving individual services won't feel obligated to answer questions about group activities, and vice versa. Additionally, we have simplified the process to encourage participation and make it clear that community feedback is valued. Our goal is to ensure that respondents feel heard and confident that their input will contribute to meaningful improvements where needed. • To further prioritize survey collection, we have trained staff to distribute and administer surveys immediately following activities and services. Capturing real-time feedback ensures that responses accurately reflect participants' immediate experiences, providing valuable insights into program effectiveness. Understanding that not all community members have access to the internet, our staff also proactively provide printed surveys in both English and Spanish, ensuring that all participants can share their feedback regardless of digital accessibility. • By integrating multiple methods of survey distribution and making the process as seamless as possible, we are committed to consistently gathering data from participants receiving services. Their direct feedback is essential in demonstrating the effectiveness of our programs and guiding continuous improvements that better serve our community.

4. Increase the number of children receiving a developmental screening (ASQ).	• To increase the number of children receiving a developmental screening (ASQ), our center is implementing a comprehensive strategy to address past challenges and improve screening rates. Significant transitions in leadership and staff created some instability, leading to a decline in ASQ completion. To counter this, we are enhancing our processes to ensure that more children receive timely developmental screenings. • One key initiative is the creation of a "Registration/Welcome Packet" for families, which will include a welcome form, a library application, and clear information on developmental screening options for children ages 0 to 5. This will streamline the process for families, making it easier for them to engage with our services and access developmental screenings. • Additionally, staff have integrated the ASQ as part of a class lesson, providing an engaging and supportive environment for early developmental screening. While this has increased accessibility, we continue to refine our approach to improve tracking and follow-up. Proposed improvements include incorporating the ASQ into the intake process, ensuring that screenings are completed early and consistently. • To further enhance monitoring, we are developing reports that notify staff when the next ASQ is due, allowing for better tracking of each child's developmental progress. These refinements will strengthen our ability to provide timely interventions, ensuring that children receive the resources and services they need to thrive.

EASTSIDE	
2022-2023 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.	• The Center for Human Services (CHS) continues to seek other fiscal resources to support our FRCs. Leveraging and collaborating with other partners, as well as developing additional strategies, are priorities to ensure identified services continue as the Commission's financial support declines. CHS is committed to providing ongoing support to the Eastside community, as it has for the past 20 years. Funds from Medi-Cal Administrative Activities (MAA), CalFresh, and the American Rescue Plan Act are examples of resources we are utilizing to bridge financial gaps for the Oakdale FRC.
2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• The Oakdale RC has increased the amount of outreach that we are doing in person, as well as started utilizing social media for community outreach. Instead of assuming what out caregivers and children need, we are also engaging them and asking what type of Workshops and classes we

	should provide. We have been providing more childcare so the caregivers have more time to engage and learn. This past year we have changed a few of our events to better meet the needs of the community, such as changing Halloween to a fall celebration, and this year we will be including Dia de los Muertos as we have learned how important this is to the people we serve.
3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• We have improved our survey collection process to make it more accessible, relevant, and inclusive to the individuals we serve. By creating QR codes and categorizing surveys based on services, we ensure that participants only respond to questions applicable to their experiences—those receiving individual services won't feel obligated to answer questions about group activities, and vice versa. Additionally, we have simplified the process to encourage participation and make it clear that community feedback is valued. Our goal is to ensure that respondents feel heard and confident that their input will contribute to meaningful improvements where needed. • To further prioritize survey collection, we have trained staff to distribute and administer surveys immediately following activities and services. Capturing real-time feedback ensures that responses accurately reflect participants' immediate experiences, providing valuable insights into program effectiveness. Understanding that not all community members have access to the internet, our staff also proactively provide printed surveys in both English and Spanish, ensuring that all participants can share their feedback regardless of digital accessibility. • By integrating multiple methods of survey distribution and making the process as seamless as possible, we are committed to consistently gathering data from participants receiving services. Their direct feedback is essential in demonstrating the effectiveness of our programs and guiding continuous improvements that better serve our community.
4. Increase the number of children receiving a developmental screening (ASQ).	• We To increase the number of children receiving a developmental screening (ASQ), our center is implementing a comprehensive strategy to address past challenges and improve screening rates. Significant transitions in leadership and staff created some instability, leading to a decline in ASQ completion. To counter this, we are enhancing our processes to ensure that more children receive timely developmental screenings. • One key initiative is the creation of a "Registration/Welcome Packet" for families, which will include a welcome form, a library application, and clear information on developmental screening options for children ages 0 to 5. This will streamline the process for families, making it easier for them to engage with our services and access developmental screenings. • Additionally, staff have integrated the ASQ as part of a class

	lesson, providing an engaging and supportive environment for early developmental screening. While this has increased accessibility, we continue to refine our approach to improve tracking and follow-up. Proposed improvements include incorporating the ASQ into the intake process, ensuring that screenings are completed early and consistently. • To further enhance monitoring, we are developing reports that notify staff when the next ASQ is due, allowing for better tracking of each child's developmental progress. These refinements will strengthen our ability to provide timely interventions, ensuring that children receive the resources and services they need to thrive

PARENT RESOURCE CENTER	
2022-2023 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.	• The Both partners have keen awareness of this priority and pursue new funding opportunities as well as expand on current ones. • The PRC and Sierra Vista Drop In Center had rollover funding for the Promotora expansion program through the SAMHSA funds received by Stanislaus County Behavioral Health. This year was the fourth full year of funding for the PRC's West Modesto RAIZ Promotora program and Sierra Vista continued with its RAIZ Promotora funding. The PRC continued its partnership with Sierra Vista Children & Families Services and entered its third year of providing case management and navigation through a program funded through the American Rescue Plan Act (ARPA). This program was extended so remaining funds can be carried over into another fiscal year. • Also, the PRC received a contract with the Stanislaus Child Abuse Prevention Council (CAPC) to develop a parent advisory group through June 2025. The PRC's grant with Health Plan San Joaquin to provide Medi-Cal renewal and application assistance will be carried over to the next fiscal year. While the funding for this was not received until July 2023, the agreement was signed and executed in June 2023. PRC also renewed its contract with First 5 Stanislaus to provide technical assistance to other FRCs in the county in setting up classes and engaging families with the PlanetBaby! pregnant mothers support group. • The PRC continued to apply for City of Modesto funding programs. Unfortunately, the City of Modesto did not select the PRC's proposal to provide financial literacy education for low-income residents of Modesto or unincorporated areas, including the Airport Neighborhood, through the CDBG program for FY23-24. Applications were submitted to other local and regional foundations. The outcome will not be known until the fall of 2024. The PRC

	will continue to aggressively pursue funding opportunities for these needed services and others that match the PRC's mission as well as train and prepare staff for these new opportunities. • Both PRC and SVCFS's partnership with the Stanislaus County Adult Protective Services (APS) Department continued for the provision of case management, intervention services, and structured contacts and assessments for elderly residents. The county APS applied for and received an extension for this program through June 2024. A second extension was granted to continue this program in a slightly difference arrangement. This was very positive news as the second extension was uncertain and the program does make a difference. • Also, Sierra Vista's contract with Stanislaus County for Cal Fresh services continued this past fiscal year and was renewed for future years. Sierra Vista will continue to sub-contract with PRC for Cal Fresh services. Contracts with Stanislaus County Behavioral Health and Recovery Services for Probation Youth and BHRS youth for Prevention Early Intervention to provide wellness and mental health education continue.
2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• Staff are taking the time to explain the assessments and the rationale for the assessments. With this information, clients are more willing to participate. The rate of completed assessments as well as engagement is slowly improving compared to the previous year. • Additionally, the new availability of funding through the Concrete Supports program has also had an effect on family engagement. Families coming the FRC partners are more willing to listen to the many services available to them at the centers when their physical and financial needs are being met at the same time.
3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• The Customer Satisfaction Survey is listed as step on the client file check list. This assures it is not forgotten. Additionally, for parenting education clients, the survey is administered as a mandatory step to complete the class. Thanks to these steps being taken, the rate of surveys being completed has improved among First 5 participants.
4. Increase the number of children receiving a developmental screening (ASQ).	• Staff report that clients are more willing to participate in assessments when these are explained, and the rationale is provided. In the case of DR-referred clients, the parents were made aware that a referral was being made and the FRC's call was expected.

HUGHSON	
2022-2023 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.	• Sierra Hughson FRC received funding from the American Rescue Plan Act (ARPA) to offer services, education, and access to underserved and unserved populations in Stanislaus County impacted by COVID-19. The grant supports navigation and case management services for walk-in families and those without children ages 0-5 in the home. In collaboration with other SVCFS FRCs, Hughson FRC received the Elder Community Case Management grant from the Community Services Agency: Adult Protective Services. Hughson and Waterford FRCs received the Promotores (Community Health Workers) grant from Prevention and Early Intervention (PEI) under Behavioral Health and Recovery Services (BHRS) to reduce mental health stigma in underserved populations and provide services to children ages 6-18 and their families. Hughson FRC was awarded the CalFresh Outreach and Enrollment Services grant for Area 5 through the Community Services Agency, helping maintain benefits, enroll individuals, and connect them to additional resources and referrals. • Hughson FRC collaborated with the Center for Human Services for mental health services, the West Modesto Collaborative for community presentations, the City of Hughson for outreach, school districts in the area (Hughson, Waterford, Empire), and many others. • All collaborations have been important and have played an intricate part in the growth of the Hughson FRC. We highly value the relationship we have built with the Hughson Sheriff Department, the City of Hughson, and the Hughson, Empire, and Waterford Libraries. These entities have continued to support Sierra Vista Child & Family Services, and the Hughson and Waterford FCR's in finding ways to empower, engage, and connect our families to services. The local libraries have enjoyed the collaboration we have established with them to increase literacy in our communities.
2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• The Family Resource Center has focused on increasing family engagement by organizing groups outside the center, including in local schools. We aim to strengthen collaboration with these organizations to ensure they understand that our services are intended for families with children ages 0-5.
3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• The FRC introduced a customer satisfaction survey raffle, where every client who completed a survey was entered into a monthly drawing. We have also educated our clients on the importance of providing feedback, helping us grow as a center and enhance the customer service

	experience
4. Increase the number of children receiving a developmental screening (ASQ).	• The center emphasizes the importance of the ASQ in all its group sessions. Additionally, before registering for a group, we encourage participants to complete all necessary assessment paperwork, including an ASQ for all children ages 0-5 in the home

NORTH MODESTO / SALIDA	
2022-2023 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.	• The North Modesto/Salida FRC received funding from the American Rescue Plan Act (ARPA) to provide services, education, and access to underserved populations in Stanislaus County impacted by COVID-19. This grant supports navigation and case management for walk-in families and those without children ages 0-5 in the home, running through June 2025. In partnership with other SVCFS FRCs, North Modesto/Salida also received the Elder Community Case Management grant through the Community Services Agency: Adult Protective Services. Additionally, the FRC was awarded the Promotores (Community Health Workers) grant from Prevention and Early Intervention (PEI) under Behavioral Health and Recovery Services (BHRS) to reduce mental health stigma among underserved populations and provide services to children ages 6-18 and their families. The FRC also secured a Kaiser Permanente grant for parent education, mental health wellness groups, and short-term individual mental health services for low to moderate needs. Finally, North Modesto/Salida FRC was awarded the CalFresh Outreach and Enrollment Services grant for Area 5, helping individuals maintain benefits and access additional resources. • North Modesto/Salida FRC values all current and past collaborations. Our partnership with The House Modesto provides Sierra Vista with a diverse reach, and collaborating with churches and established organizations helps North Modesto/Salida FRC connect with a broader and more varied audience. Additionally, this collaboration can be mutually beneficial for referrals and the identification of other potential community partners.
2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• North Modesto focused on increasing caregiver and child engagement by understanding their needs, overcoming barriers, and offering targeted outreach. Staff provides inclusive, culturally relevant services in a welcoming environment, with programs like parenting classes and literacy support. By partnering with local organizations, schools and continuously gathering feedback, we tailored our services to meet family needs, ensuring they feel supported and encouraged to participate

3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• We prioritize survey collection by regularly gathering feedback from participants receiving services at North Modesto to assess their experiences and outcomes. These surveys help us measure the effectiveness of our programs and identify areas for improvement. By analyzing responses, we can make data-driven decisions to enhance services, address challenges, and ensure that we are meeting the needs of the families we serve.
4. Increase the number of children receiving a developmental screening (ASQ).	• We continue emphasizing the importance of developmental screenings by encouraging staff to complete them during first contact with families. This proactive approach, along with ongoing staff training, ensures more children receive timely screenings and helps us better support early childhood development. Additionally, we have provided education to caregivers on the importance of early screenings and worked to ensure that the screenings are culturally sensitive and accessible to all families. These steps are part of our ongoing effort to reach more children and support early development.

TURLOCK	
2022-2023 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.	• Aspiranet has established a strong presence in the community, resulting in additional services and supports (provided and funded by other agencies or entities) being brought into the center. By reaching beyond our Center-funded services and inviting other agencies to use our facility, we have been able to provide additional resources without incurring extra personnel or service costs. The TFRC receives in-kind donations through these partnerships, including items such as linens, household goods, and children's toys and games, which are distributed directly to families in need. • Aspiranet continually seeks to expand resources and develop ways to raise funds to support the program. • Current other sources of funding that support the Turlock Family Resource Center (TFRC) offerings: 1) Pro-Family (CSA) 2) Welfare to Work (Workforce Development) 3) Promotoras (BHRS) 4) Kepp Baby Safe (HSA) 5) American Rescue Plan Act (CSA) 6) Teichert Foundation Grant 7) Elder Abuse Prevention Services (APS) 8) American Cancer Society Grant 9) Omegs new Grant

2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• The increase in community engagement, workshops, groups, and events has played a vital role in establishing a supportive environment that attracts more caregivers and children, providing valuable resources, connections, and opportunities for growth and learning. Additionally, the creation of a dedicated children's area offering childcare while parents participate in the groups has significantly contributed to the increase in caregiver and child participation, making it easier for families to engage and benefit from the programs.
3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• TFRC focuses on streamlining our intake process to ensure that surveys are properly collected. Case Managers are responsible for gathering the surveys. Caregivers tend to respond more effectively when the purpose of the surveys and how the information will be used are clearly explained to them.
4. Increase the number of children receiving a developmental screening (ASQ).	• TFRC Case Managers ensure they provide a comprehensive explanation of the ASQ (Ages and Stages Questionnaire), outlining its purpose and significance in tracking a child's developmental progress. They take time to explain that completing the ASQ helps identify milestones and areas where a child may need additional support. By emphasizing the importance of this tool, the Case Managers ensure that families understand how it can be used to monitor growth and developmental levels, ultimately guiding early interventions or resources to better support the child's development.

WESTSIDE	
2022-2023 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.	• The Center for Human Services (CHS) 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.
2. Develop focused strategies to increase the number of caregivers and children engaging in FRC services.	• Our most important collaboration is the network of local businesses and organizations. Ceres is a close-knit community, and people are eager to support those in need. Having a presence at community events, collaborations, and partnership meetings has allowed us to expand our services and reach new families in need of support. One of

	our biggest champions and supported has been Councilmember Rosalinda Viera, she has recognized the importance of CP in the ceres community and goes above and beyond to include us in events or conversations. To increase caregiver and child engagement in FRC services, we focused on stabilizing leadership and strengthening program activities. After experiencing a transition in management, we prioritized staff training, reassessed service delivery, and implemented strategic outreach efforts. These steps have helped us restore participation and enhance the quality of services for families in our community.
3. Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.	• Our most important collaboration is the network of local businesses and organizations. Ceres is a close-knit community, and people are eager to support those in need. Having a presence at community events, collaborations, and partnership meetings has allowed us to expand our services and reach new families in need of support. One of our biggest champions and supported has been Councilmember Rosalinda Viera, she has recognized the importance of CP in the ceres community and goes above and beyond to include us in events or conversations. • We have improved our survey collection process to make it more accessible, relevant, and inclusive to the individuals we serve. By creating QR codes and categorizing surveys based on services, we ensure that participants only respond to questions applicable to their experiences—those receiving individual services won't feel obligated to answer questions about group activities, and vice versa. Additionally, we have simplified the process to encourage participation and make it clear that community feedback is valued. Our goal is to ensure that respondents feel heard and confident that their input will contribute to meaningful improvements where needed. • To further prioritize survey collection, we have trained staff to distribute and administer surveys immediately following activities and services. Capturing real-time feedback ensures that responses accurately reflect participants' immediate experiences, providing valuable insights into program effectiveness. Understanding that not all community members have access to the internet, our staff also proactively provide printed surveys in both English and Spanish, ensuring that all participants can share their feedback regardless of digital accessibility. • By integrating multiple methods of survey distribution and making the process as seamless as possible, we are committed to consistently gathering data from participants receiving services. Their direct feedback is essential in demonstrating the effectiveness of our programs and guiding continuous improvements that better serve our community.

4. Increase the number of children receiving a developmental screening (ASQ).	• Our most important collaboration is the network of local businesses and organizations. Ceres is a close-knit community, and people are eager to support those in need. Having a presence at community events, collaborations, and partnership meetings has allowed us to expand our services and reach new families in need of support. One of our biggest champions and supported has been Councilmember Rosalinda Viera, she has recognized the importance of CP in the ceres community and goes above and beyond to include us in events or conversations. • To increase the number of children receiving a developmental screening (ASQ), our center is implementing a comprehensive strategy to address past challenges and improve screening rates. Significant transitions in leadership and staff created some instability, leading to a decline in ASQ completion. To counter this, we are enhancing our processes to ensure that more children receive timely developmental screenings. • One key initiative is the creation of a "Registration/Welcome Packet" for families, which will include a welcome form, a library application, and clear information on developmental screening options for children ages 0 to 5. This will streamline the process for families, making it easier for them to engage with our services and access developmental screenings. • Additionally, staff have integrated the ASQ as part of a class lesson, providing an engaging and supportive environment for early developmental screening. While this has increased accessibility, we continue to refine our approach to improve tracking and follow-up. Proposed improvements include incorporating the ASQ into the intake process, ensuring that screenings are completed early and consistently. • To further enhance monitoring, we are developing reports that notify staff when the next ASQ is due, allowing for better tracking of each child's developmental progress. These refinements will strengthen our ability to provide timely interventions, ensuring that children receive the resources and services they need to thrive.

Family Resource Centers 2023-2024 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	100%	65/65	100%	50/50	98%	946/967	100%	203/203	100%	140/140	79%	426/540	100%	5/5	93%	1,835/1,970
Caregivers participant in FRC activities as a result of outreach events.																
Caregivers who participant in FRC programs/services as a result outreach events	1%	18/2,016	0%	8/2,323	4%	47/1,047	2%	90/4,311	2%	13/658	71%	562/791	0%	16/5,042	5%	754/16,188
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	67%	4/6	100%	8/8	100%	19/19	100%	11/11	-	0	100%	12/24	-	0/0	97%	66/68
Children whose caregivers gain an increase in skills and knowledge from attending parent education.																
Children whose caregiver attended parent education, completed a survey or pre/post test, and indicated an increase in knowledge or skills after attending parenting education	93%	43/46	99%	97/98	96%	346/361	100%	16/16	62%	24/39	100%	25/25	100%	64/64	95%	649/898

Family Resource Centers 2023-2024 Annual Scorecard Data

	Ceres Partnership		Eastside FRC		Parent Resource Center		Hughson FRC		North Modesto / Salida		Turlock FRC		Westside FRC		Total	
Caregivers gain an increase in skills and knowledge from attending parent education.																
Caregivers of children 0-5 who attended parent education, completed a survey or pre/post test, and indicated an increase in knowledge or skills after attending parenting education	95%	60/63	99%	100/101	96%	168/175	100%	18/18	63%	19/30	100%	36/38	100%	65/65	95%	456/478
Caregivers of children 0-5 who attended parent education, completed a survey or pre/post test, and indicated an increased confidence in parenting ability	95%	60/63	99%	100/101	96%	168/175	100%	18/18	100%	30/30	100%	31/38	100%	65/65	98%	467/478
Pregnant and parenting women have increased protective factors in their lives.																
Pregnant and parenting women who attend support group sessions and report reduced stress as a result	100%	9/9	100%	18/18	100%	6/6	100%	74/74	72%	26/36	100%	14/14	100%	20/20	94%	167/177
Pregnant and parenting women who attend group sessions and reported improved protective factors in their lives as a result	100%	9/9	100%	18/18	100%	6/6	100%	74/74	72%	26/36	100%	14/14	100%	20/20	94%	167/177
Caregivers have increased skills and knowledge from attending workshops.																
FRC families that participant in educational workshop/classes and report increased skills as a result of participation	100%	23/23	100%	31/31	100%	34/34	100%	26/26	100%	15/15	100%	34/34	100%	55/55	100%	218/218

Family Resource Centers 2023-2024 Annual Scorecard Data

	Ceres Partnership		Eastside FRC		Parent Resource Center		Hughson FRC		North Modesto / Salida		Turlock FRC		Westside FRC		Total	
FRC staff will provide children 0-5 with developmental screenings using Ages & Stages Questionnaire.																
Children 0-5 who received developmental screening	90%	38/42	23%	15/64	21%	107/510	100%	68/68	0%	0/129	37%	41/111	47%	32/68	30%	301/992
Children 0-5 who received early intervention or support services as indicated by screening results	100%	1/1	0%	0/0	6%	1/18	100%	4/4	-	0/0	100%	10/10	100%	1/1	50%	17/34
FRC staff or contraced staff will provide literacy / school readiness services (teaching adults literacy, distributing children's books, teaching adults how to read to childre, etc)																
Children 0-5 who received literacy services will indicate increased time reading at home with family	100%	100/100	65%	26/40	76%	325/426	100%	52/52	100%	48/48	65%	76/117	103%	82/82	81%	668/823
Children 0-5 will be provided books	302%	302/100	110%	44/40	100%	426/426	100%	52/52	100%	48/48	128%	150/117	213%	19/82	135%	1,107/823
Children 0-5 attending literacy services who obtained a library card as a result of services	-	0/0	0%	0/0	75%	165/220	54%	21/39	-	0/0	69%	55/80	0%	0/0	69%	241/350

Recommendations

This program has undergone multiple annual and periodic evaluations by Commission staff and has been responsive to prior years' recommendations. As the program progresses, it is recommended that it continue to focus on the Commission's priorities of sustainability, leveraging resources, and collaboration to ensure that services remain available after the Commission's financial support concludes.

Additionally, it is recommended that Family Resource Centers:

- Develop focused strategies to increase the number of caregivers and children engaging in FRC services.
- Prioritize survey collection from participants receiving services to demonstrate effectiveness/improvement as a result.
- Increase the number of children receiving a developmental screening (ASQ).
- Increase the number of services provided to children 0-5 and their families/caregivers.
- Offer services during flexible hours outside of the 8AM to 5PM hours.

Result Area 2
Improved Child Development

Result Area 2: Improved Child Development

Description

The goal of Result Area 2: Improved Child Development Result 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, it does however have expenditures which are working towards the three strategic plan objectives for this result area.

The percentage of the budget represented by Result Area 2: Improved Child Development is 0.7%.

Result Area 2 Services and Service Delivery Strategies

The funding allocated to the Result Area 2: Improved Child Development 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 funded in Result Area 2 contribute to this population result by providing services that result in early learning changes for children and families. While the percentage of the budget allocated to this result area has diminished over the years, the funding the Commission gives to services continues to promote child development and help 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 individuals with beneficial results. In FY 2023-2024, a total of four conferences were held, with all of the four conferences including English/Spanish content in an effort to provide attendees with training in their preferred language.

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?

- 517 individuals attended the four ECE/Provider Conferences offered in FY 2023-2024 to gain skills and knowledge

Result Area 2: Improved Child Development		
Program/Activity	**Amount Expended in 2023-2024**	
Early Care & Education Conferences	$	9,727
TOTAL	$	9,727

Result Area 4
Improved Systems of Care

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 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 2023-2024 was 1.1%. As the Commission continued to implement its 2019-2024 Strategic Plan, which had an emphasis on collaboration and capacity building, the percentage of its total budget allocated to Result Area 4 increased. It should also be noted, expenditures that are allocated to "Other Programs" in the Commission's 2023-2024 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 prenatal through age five":

- ***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 offered staff from funded programs professional development in FY 2023-2024 by partnering to provide Abriendo Puertas and Parent Café trainings.

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?

- 13 FRC partners were certified to provide the Parent Café curriculum at their sites for families
- 21 FRC partners were provided Abriendo Puertas/Opening Doors training for use with their families
- 94% of pregnant and parenting women who attend group sessions and reported improved protective factors in their lives as a result
- 94% of pregnant and parenting women who attend support group sessions and report reduced stress as a result

Increase in Resources and Community Assets Leveraged Within the County

- 100% of the Commission contracted programs reported leveraging of community resources
- Over $4.4 million was leveraged from inside sources in 2023-2024

Result Area 4: Improved Systems of Care (Sustainable Systems)

Program/Activity	Amount Expended in 2023-2024	
PlanetBaby! Technical Assistance	$	6,842
Tides Center - Abriendo Puertas/Opening Doors	$	34,629
Be Strong Families – Parent Café	$	11,920
TOTAL	$	53,391

Appendix / Acronyms

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

ADRDP/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
Funded Programs: Westside Family Resource Centers, Eastside Family Resource Center

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
Funded Programs: Family Resource Centers

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 *or* 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

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

PAT ..... Parents as Teachers Program

PB! ..... PlanetBaby! (prenatal to age one parenting program)

PDD ..... Participant Demographic Datasheet

PEDS ..... Prop 10 Evaluation Data System

PEI ..... Prevention and Early Intervention

POP ..... Power of Preschool

PRC ..... Parent Resource Center
Funded Programs: Family Resource Connection

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
Funded Programs: SCOE Healthy Start Support

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
Funded Programs: North Modesto/Salida FRC, Hughson FRC, Drop In Center

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