

**FIRST 5
STANISLAUS**



**Annual
Program
Evaluation
2022-2023**

January 2024

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 – Community Services Representative
- Tony Jordan – School Representative
- Mary Ann Lilly-Tengowski, Chair - Health Services Agency
- Keri Magee - Community Representative
- Thea Papasozomenos, MD - Public Health Officer
- Nelly Paredes-Walsborn, Vice-Chair - Community Representative

January 2024

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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 2022-2023 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 2022-2023

Invested...

over \$4.6 million in the community



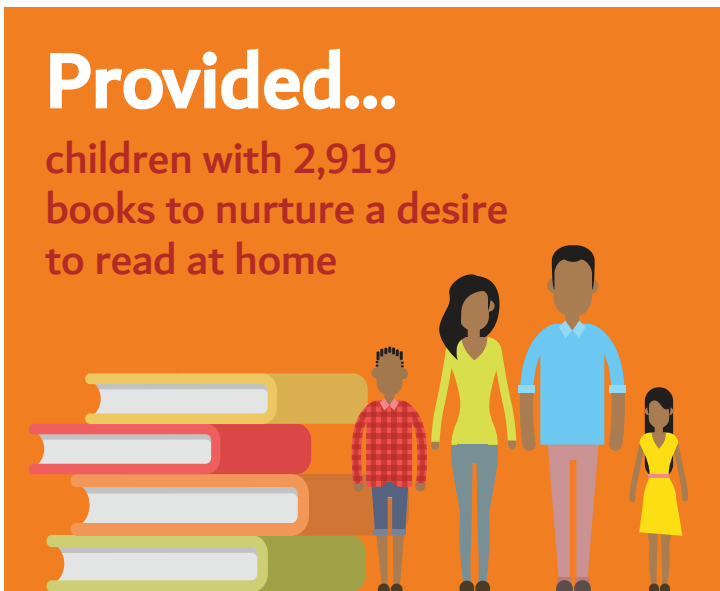
Reached...

15,838 children, parents and providers



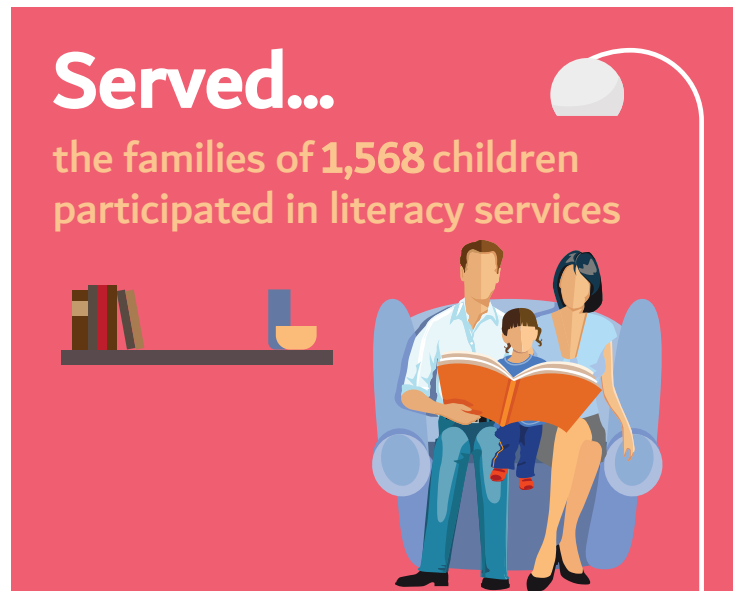
Provided...

children with 2,919 books to nurture a desire to read at home



Served...

the families of 1,568 children participated in literacy services



Provided...

parent education and support to the parents of 2,119 children

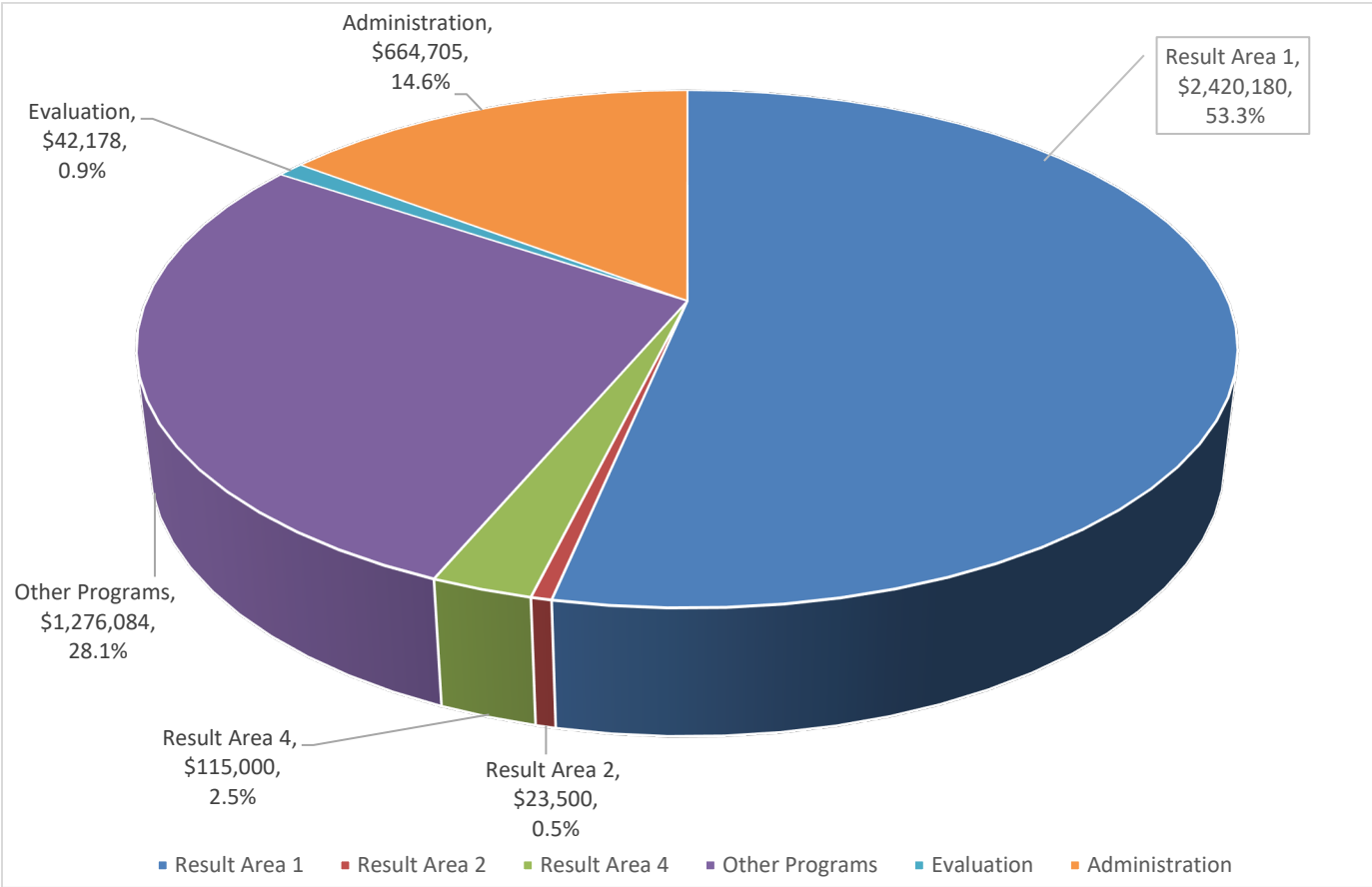


Served...

576 children received developmental screenings



Funding Distribution by Budget Category
Total: \$4,541,647



The 2022-2023 budget pie chart portrays the distribution of Commission funding by budget category.

Program Categories:

The program categories (also known as Result Areas) make up 56% 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:

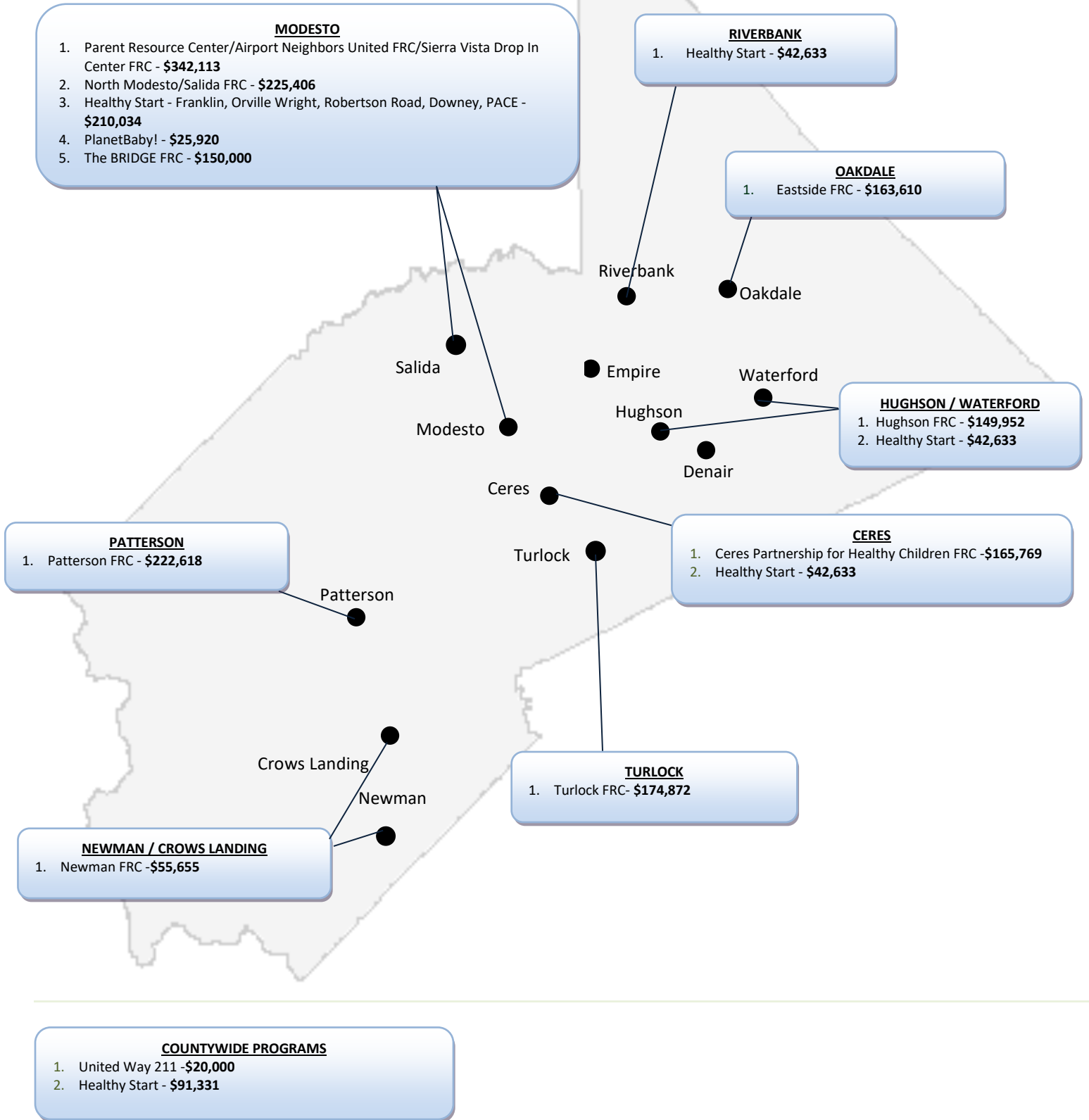
“Other Programs” consists of Commission and Stanislaus County charges that support programs, and the funds appropriated for program adjustments. This category makes up 28.1% of the budget.

Administration and Evaluation Categories:

These categories make up nearly 16% of the annual budget, with Administration comprising 14.6% and Evaluation comprising 0.9%.

STANISLAUS COUNTY CHILDREN & FAMILIES COMMISSION

2022-2023 PROGRAMS



Program Budget Award by Location

Location	Program Budget Allocation	% of 22/23 Program Budget*	% of County's Population**
Modesto (includes Salida)	\$ 728,067	47.4%	43%
Turlock	\$ 174,872	8.7 %	13%
Riverbank	\$ 42,633	2.1%	4%
Ceres	\$ 208,402	10.3%	9%
Newman/Crows Landing	\$ 55,655	2.8%	2%
Hughson/Waterford (includes SE smaller towns)	\$ 192,585	9.6%	3%
Oakdale	\$ 163,610	8.1%	4%
Patterson	\$ 222,618	11.1%	4%
TOTAL of location specific programs	\$ 2,013,849		
Countywide Programs	\$ 111,331		
TOTAL:	\$ 2,125,180***		

*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, 2022 and 2023: Sacramento, CA, May 2023; 2020 Census Redistricting Data, June 2021

***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 \$111,331 was allocated to programs that operate throughout the county, making up 5% 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 95% 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

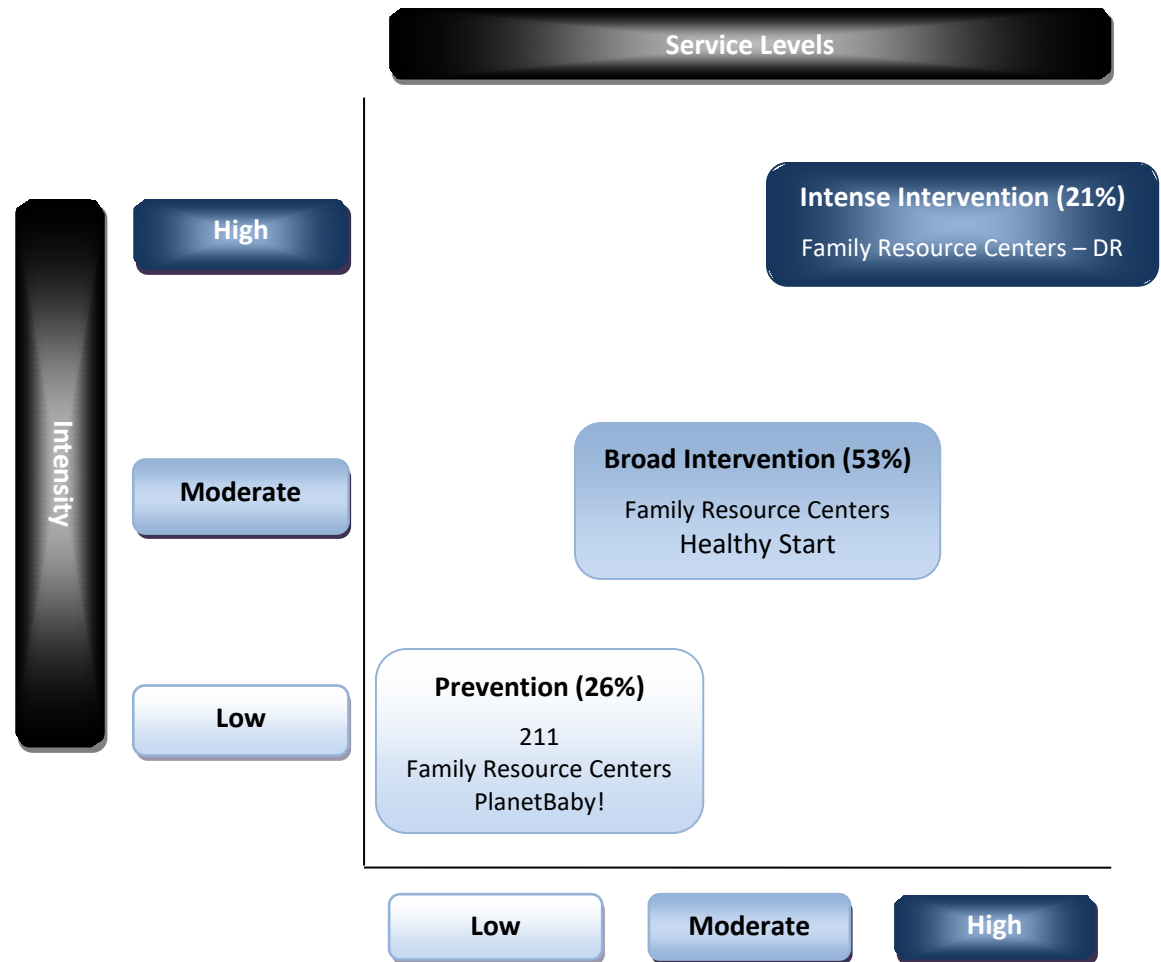
With the adoption of the Commission’s 2019-2024 Strategic Plan, the Commission decided to increase its emphasis on primary prevention services. While the Commission continues to fund programs that offer a continuum of prevention and intervention services that target all children 0-5 and their families 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 53% of the contracts program budget is dedicated to Broad Intervention, while 26% goes to Prevention and 21% 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 211 program which experienced data collection issues in 2022-2023.

Participating Children Age Distribution

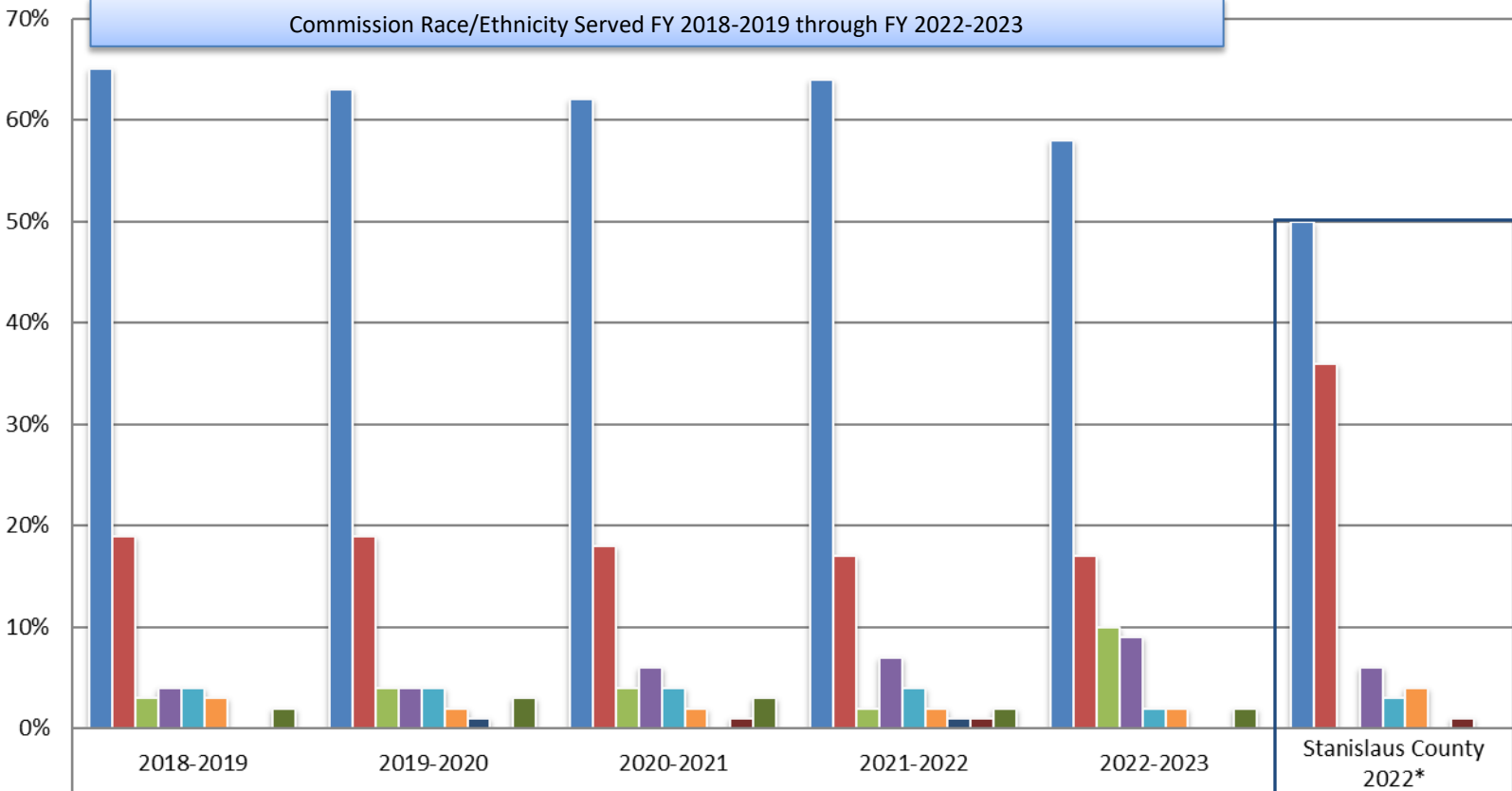
This chart shows the age distribution of children participating in Commission funded programs. The programs offer families a wide range of services to engage and support children from birth through age 5. The programs have almost equally served children ages 0 through 2 and children ages 3 through 5 over the past five years. In 2020-2021 and 2021-2022 more children ages 3 through 5 were served than in the past. This may be a result of the COVID-19 pandemic and these children not being able to engage in other services such as child care, Early Head Start, etc.

Infant Mortality Rate

These charts show that the Infant mortality rate for Stanislaus County is slightly higher than the State rate and exceeds the Healthy People 2030 goal of 5.0. (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.)

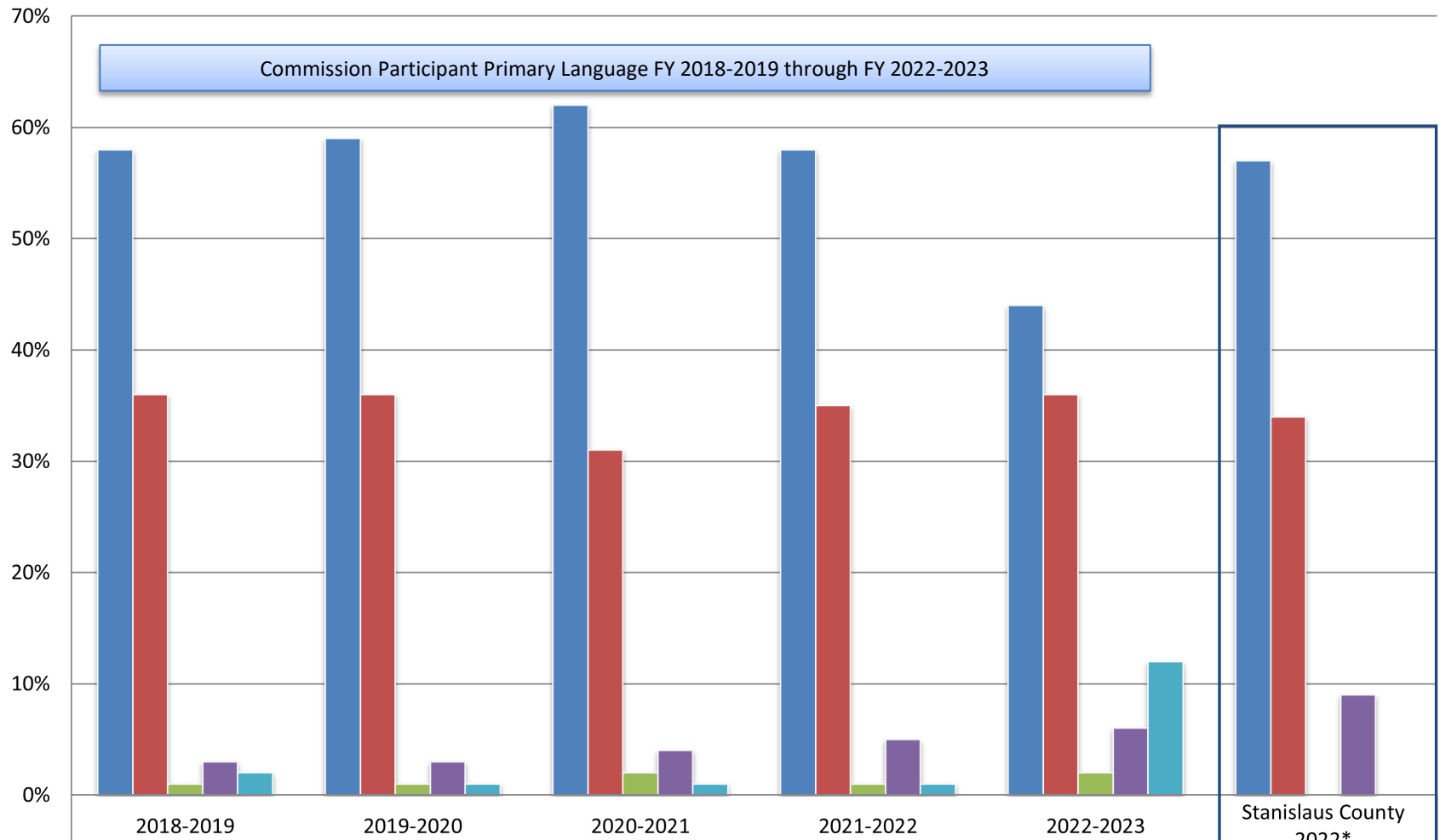
However, there are disparities when comparing the infant mortality rates for individual ethnicities. Stanislaus County meets or exceeds the Healthy People 2030 goal for most ethnicities. Socioeconomic influences such as education, food security and income stability may be factors impacting the infant mortality rate for the different ethnicities.

Race/Ethnicity Served



CFC data does not include provider capacity language data.
 *U.S. Census Bureau, 2022 American Community Survey (ACS).

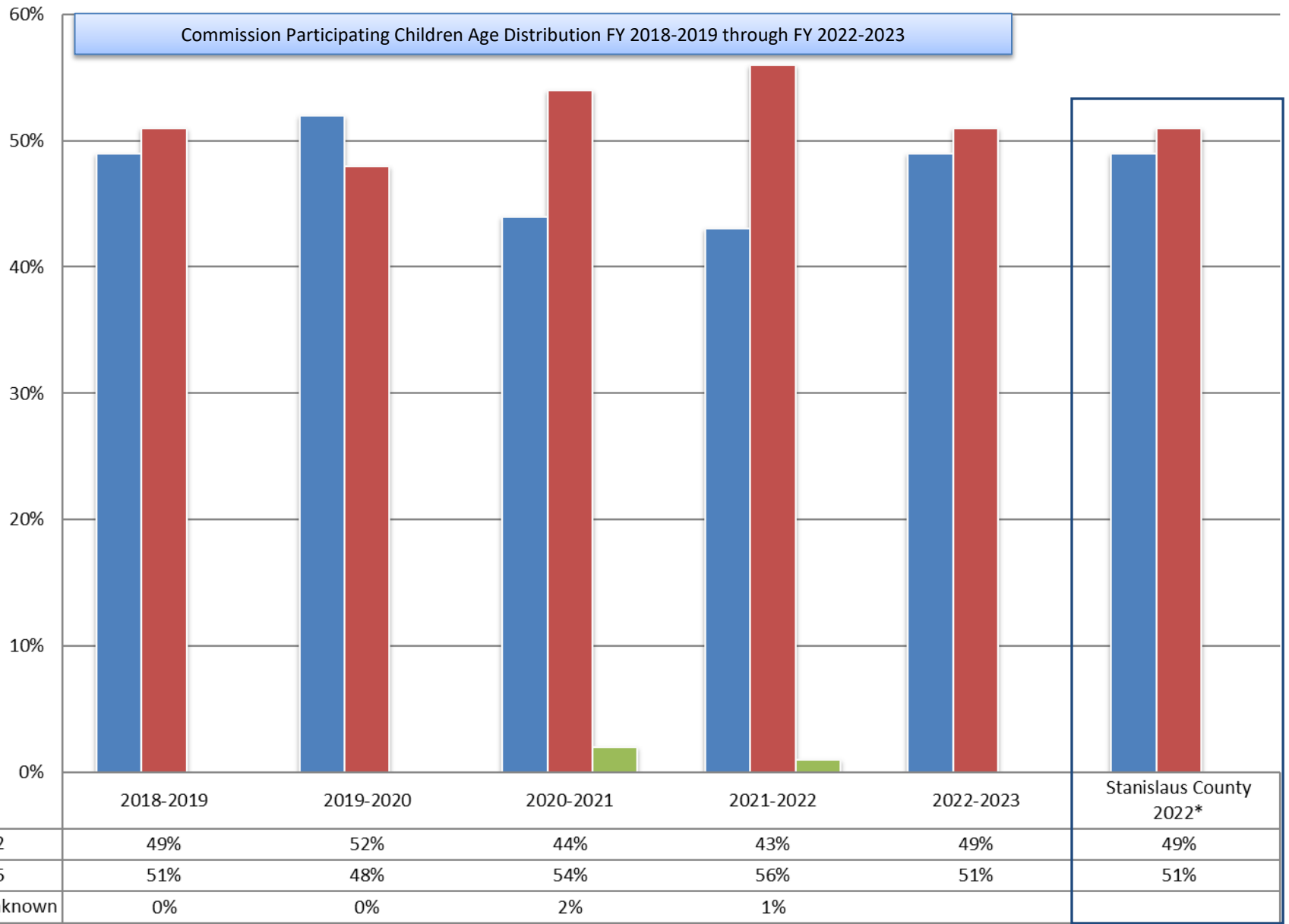
Participant Primary Language



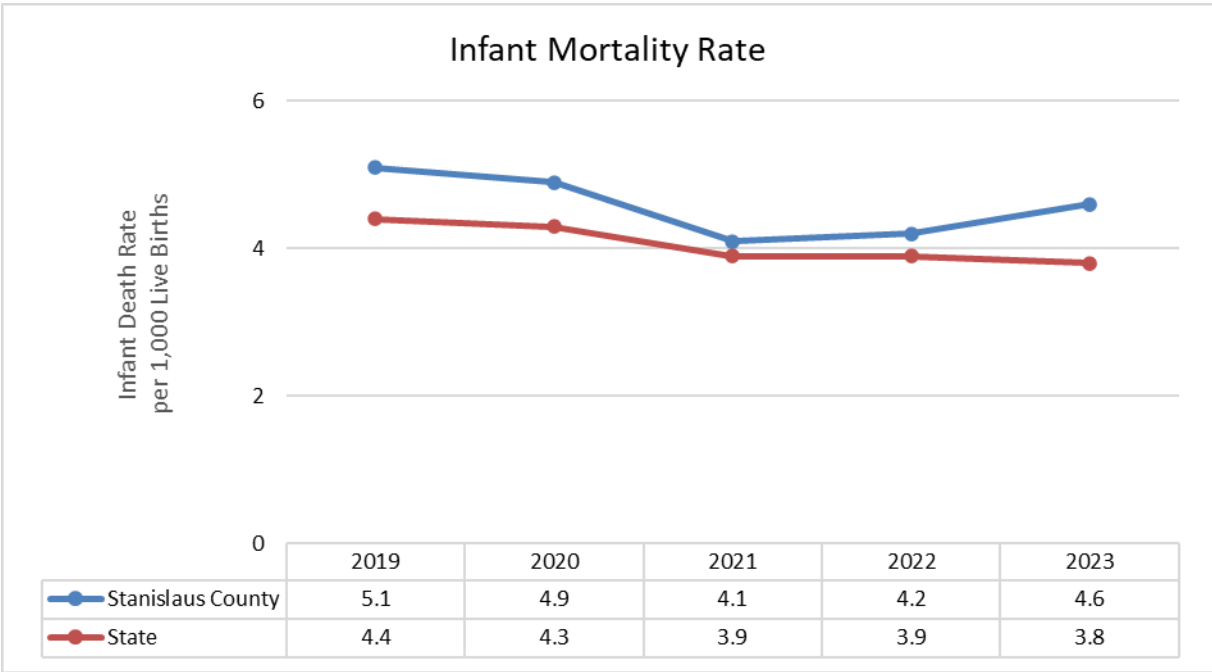
CFC data does not include provider capacity language data.

*U.S. Census Bureau, 2022 American Community Survey (ACS).

Participating Children Age Distribution



*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>

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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 53.3% of the 2022-2023 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 2022-2023 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 provide general parenting education, support basic family needs, school readiness education, family advocacy and literacy services. Programs may also provide referrals or service information about various community resources, such as medical facilities, counseling programs, family resource centers, and other supports for families with young children. This includes 211 services or other general helplines. In general, this category reflects services that are designed to be less intensive and shorter term for families.

Services are offered by a 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?
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- 5,911 children 0-5 received services designed to improve family functioning
- The parents of 2,119 children attended parenting education classes
- The families of 6,712 children 0-5 received resources or referrals to improve family functioning
- Children 0-5 whose caregiver participated in literacy services received 2,919 books
- 576 children 0-5 received a developmental screening

- 58% of children 0-5 obtained a library card after receiving literacy services (259/446)
- 70% of children whose developmental screening indicated a needed for early intervention were referred for and received services as a result (32/46)

- 99% of caregivers participating in parent education (837/849) reported an increase in skills or knowledge
- 82% of caregivers participating in parent education (795/849) reported an increase in confidence in parenting ability
- 72% of children 0-5 whose caregiver received literacy services (1,127/1,568) increased time reading at home with their family

Result Area 1: Improved Family Functioning

Program	Amount Expended in 2022-2023 <small>(% of 2022-2023 allocation)</small>	Total # Children 0-5 Served <small>(or served through family members)</small>	Cost per Child 0-5	Total Award To-Date <small>(7/1/2007-6/30/2023)</small>	Cumulative Amount Expended <small>(7/1/2007-6/30/2023)</small>	% of Cumulative Amount Expended
211	\$ 20,000 (100%)	1,647	\$ 12	\$ 1,593,159	\$ 1,466,044	92%
Healthy Start*	\$ 429,265 (100%)	2,521	\$ 170	\$ 9,908,450	\$ 9,873,999	99.7%
The Bridge (FRC)	\$ 150,000 (100%)	161	\$ 932	\$ 2,804,500	\$ 2,719,041	97%
PlanetBaby!	\$ 24,579 (95%)	116	\$ 212	\$ 25,920	\$ 49,205	95%
Family Resource Centers (providing Differential Response and AfterCare Services) (7 contracts)	\$ 1,431,039 (94%)	1,466	\$ 976	\$ 26,596,593	\$ 24,881,444	94%
TOTAL	\$ 2,052,409 (97%)	5,911	\$ 347	\$ 40,954,542	\$ 38,987,259	95%

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

211 Stanislaus County

Agency: United Way of Stanislaus
 Current Contract End Date: June 30, 2023

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, 2023	FY 2022-2023 Award	FY 2022-2023 Expended*	Cumulative Amount Expended
\$1,593,159	\$20,000	\$20,000 (100% of budget)	\$1,466,044 (92% of budget)

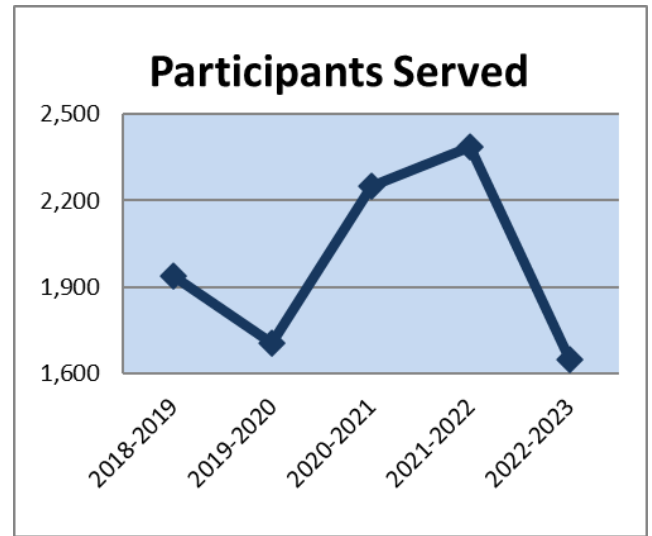
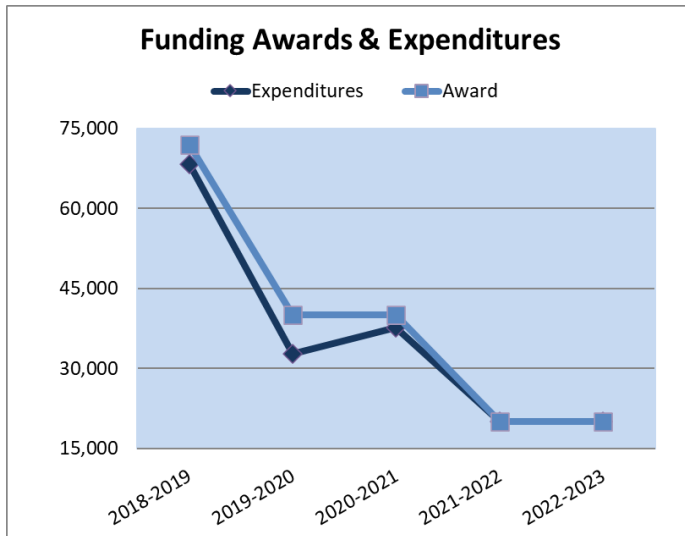
FY 2022-2023 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Marketing	Indirect Cost Rate	Cost per Caller (1,647 callers with a child 0-5)
\$4,439	\$14,621	\$0	10%	\$12

PARTICIPANT TYPE	% SERVED
Children 0-5	58%
53% <3; 47% 3-5;	
Parents/Guardians	42%
Other Family	-

RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	32%
White	7%
Black/African American	5%
Asian	1%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	2%
Other	4%
Unknown	49%

LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	29%
Spanish	12%
Hmong	-
Other	1%
Unknown	58%

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 and 2022-2023. There was an increase in participants served in 2018-2019 attributed to the program's partnership with the Focus on Prevention homeless initiative. The significant increase in participants served in 2020-2021 and 2021-2022 was a result of families needing assistance finding resource during the COVID-19 pandemic. The number served decreased significantly in 2022-2023 as a result of 211's call center inability to adequately answer calls.

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.
- In 2022-2023, United Way of Stanislaus County (UWSC) began new 211 website construction. The website will reflect a more user-friendly interface with easy search buttons and easily accessible updated information.
- UWSC expanded their free tax preparation activities by offering more Volunteer Income Tax Assistance (VITA) free tax preparation opportunities and self-filing sessions throughout the county. They also expanded outreach to families of food and farm workers as they executed the Federal Food and Farm Workers grant in 2022-2023. Moving forward, one of UWSC's main goals is to provide wrap-around information on 211, free tax prep, and other opportunities to families in need.
- 211 continued to strengthen their relationships with Family Resource Centers in the county. In 2022-2023, 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.
- 11% 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 2022-2023:
 - Emergency Assistance 441
 - Home Energy Assistance Program (HEAP) 260
 - Utility Assistance Program 230
 - Rent Payment Assistance 199
 - Homeless Prevention Program 166
- The top 5 categories families with children 0-5 years old and/or pregnant in 2022-2023 were:
 - Electric Service Payment Assistance (220)
 - Rent Payment Assistance (190)
 - Utility Service Payment Assistance (142)
 - Food Pantries (135)
 - Homeless Shelter (123)
- In 2022-2023 with COVID-19 restrictions lifted, 211 was able to provide more outreach activities. 211 was able to participate in the following outreach activities:
 - Creekside Middle School Orientation
 - Norman N. Glick Middle School Back to School
 - Blaker-Kinser Junior High Meeting
 - Kids Connect with Department of Child Support Services
 - Turlock School District
 - Ceres School District
 - Cesar Chavez Tribute Celebration
 - Steam Night
 - El plan del Pueblo
 - El Rematito
 - VITA Bus Free Tax Prep Event
 - VITA and Self-Filing Free Tax Prep Sessions (17 events around Stanislaus County)
- Leveraging: 211 received \$80,000 in funding from Stanislaus County Community Services Agency, \$50,000 from Kaiser, \$18,884 from Goodwill Industries and \$15,000 from Sutter Health.
- Race, Equity, Diversity, Inclusion (REDI) Practice / Cultural Proficiency: UWSC released its very first DEI statement in 2022-2023 which can be found on its website: <https://uwaystan.org/about-uwsc>. All of 211's call operators are bilingual (English/Spanish) making the dialogue more proficient between the caller and the call specialist. All other languages are handled through the AT&T Language Line Services to provided translation services in over 120 languages as needed. Furthermore, United Way of Stanislaus County is making additional extensive outreach efforts to target diverse groups of the community who may not use 211 services currently.
- Collaborations: UWSC and 211 continues to collaborate and meet with local organizations, city/county agencies, and other convenings like Focus on Prevention and Turlock Collaborative Meeting to ensure that they are tapped into the needs of the community. 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 rising costs of running 211, UWSC have had to re-evaluate their funding structures and understand what needs to be done to still be relevant and meet necessary goals. For the next fiscal year, they applied to more funding by way of county and general grant funding so that they can meet the needs of the community. They acknowledge that to meet the needs they must pivot and implement strategies that make them more proactive and not a passive 211. This also means contending with rising costs to run their call center and maintain a robust 211. In the next fiscal year, with added funding opportunities, they plan to strengthen their 211 offerings and continue to build upon changes implemented this year.

Prior Year Recommendations

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
<p>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.</p>	<ul style="list-style-type: none"> As we continue to learn more about our 211 database and implement new mechanisms to track data, we are hoping to also increase relevant service providers in the database as well as continue to clean the database so that information is up to date. We continue to leverage funding from other entities and collaborate in new spaces to promote 211 services within the county. We also continue to attend and find new community meetings to attend so that 211 is made aware of needs and resources within the county.
<p>2. Develop cross-training for contract requirements and reporting to ensure continuity of services if staff are out or leave the organization.</p>	<ul style="list-style-type: none"> As we continue to learn more about our 211 database and implement new mechanisms to track data, we are developing procedures for current staff and future staff to reference for pulling reports.

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%	51% (7,951/15,481)
211 callers with children 0-5 have access to health and human services program information 24/7/365	100%	100% (1,647/1,647)
11% of callers have children 0-5	11%	11% (1,647/15,481)
Callers with children 0-5 years are unduplicated callers	75%	85% (1,647/1,937)
211 callers with children 0-5 who are contacted for follow-up report having their needs met through referrals after calling 211	50%	29% (2/7)
211 callers with children 0-5 who are contacted for follow-up report satisfaction with the services they received from 211	80%	29% (2/7)

Recommendations

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

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, 2023

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.

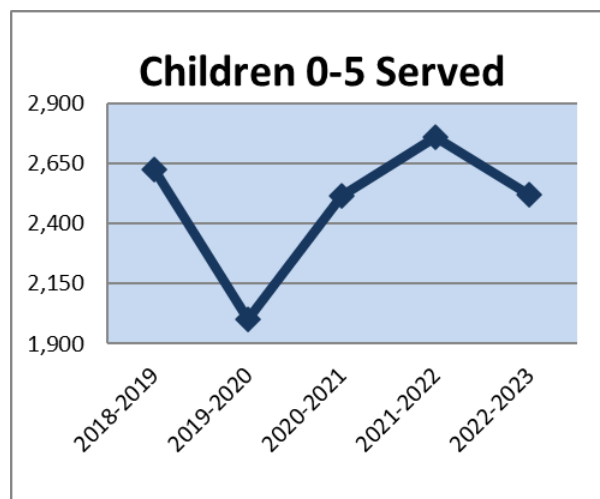
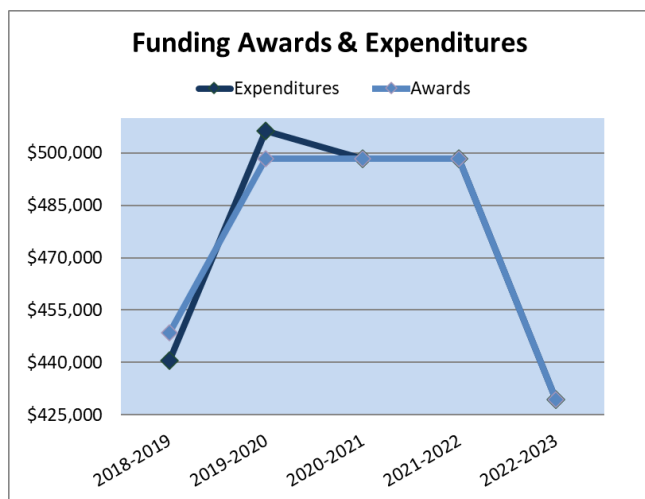
Stanislaus County Office of Education (SCOE) Healthy Start Support provides assistance in multiple ways to the individual Healthy Start sites. SCOE conducts site visits to each of the locations to provide technical assistance in the areas of budgeting, health services, outreach, education, sustainability, 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, 2023	FY 2022-2023 Award	FY 2022-2023 Expended	Cumulative Amount Expended
\$9,908,450	\$429,265	\$429,265 (100% of budget)	\$9,873,999 (99.7% of budget)

FY 2022-2023 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Healthy Start Sites	Indirect Cost Rate	Cost Per Child 0-5 (2,521)
\$71,739	\$11,441	\$337,934	9.8% (excludes sites)	\$170

PARTICIPANT TYPE	% SERVED	RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)	LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
Children	47%	Hispanic/Latino	83%	English	42%
46% <3; 54% 3-5		White	13%	Spanish	57%
Parents/Guardians	40%	Black/African American	1%	Hmong	-
Other Family	13%	Asian	1%	Other	-
		Alaska Native/American	-	Unknown	-
		Indian	-		
		Pacific Islander	-		
		Multiracial	1%		
		Other	1%		
		Unknown	-		

Children 0-5 Served Comparison by Fiscal Year



Funding for Healthy Start has remained stable except for 2018-2019 when all programs received funding reductions in an effort by the Commission to balance its budget while going through extensive strategic planning. A prior year technical adjustment in 2019-2020 is the reason the program appears to have spent over its award. Funding in 2022-2023 was reduced when the program went to eight school sites from its original ten. School closures because of COVID-19 caused a significant decline in the number of children served in 2019-2020. The number of children served increased in 2020-2021 as sites adjusted to the modified service delivery formats and again in 2021-2022 when COVID restrictions began to lift. The decline in children served in 2022-2023 is attributed in the expansion of transitional kindergarten (TK). Children previously ineligible for TK may be engaging in services at other site or programs.

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.
- In 2022-2023, with school site COVID restrictions lifted, most program activities resumed in-person engagement. Some Healthy Start sites also continued to offer online or hybrid services in order to meet the needs of families who continue to find the virtual model the most appropriate and accessible.
- The Healthy Start scope of work was updated in 2021-2022 to better align with the Commission's 2019-2024 Strategic Plan. As such, program activities focused heavily on community and outreach events, parent education, educational workshops/classes, literacy programs and book distribution. SCOE and the Healthy Start sites continue to work diligently to implement all components and targeted outcomes.
- Free and reduced lunch eligibility continues to be an indicator of the socio-economic levels at the sites. The percentage of students at sites who are eligible for free and reduced lunch ranges from 55% to 96%.
- The Hispanic/Latino population continues to be the largest ethnic group in each of the school communities ranging from 60% to 83%.
- Healthy Start sites offered workshops to the families they serve to provide education, awareness and or resources on the topics presented. In 2022-2023, the sites offered workshops on Safe Travel, Behavior Management at Home, Understanding the Standards (English as a Second Language and Math) How Parent Involvement Leads to Parent Success, On the Road to Kinder, and CPR.

- In 2022-2023, the Healthy Start sites held many activities to support child literacy development. Some highlighted activities for the year include Hughson’s Reader in Me program, Orville Wright’s Family Literacy series and Read Across America Parent Café, and PACE’s Sensory Story Times.
- All Healthy Start sites engage in outreach activities to increase community awareness of their programs and the services they offer. Outreach activities for 2022-2023 included Casa del Rio’s Community Baby Shower and Parent Summit, Ceres’ food distribution events, Downey’s Christmas care package event, Franklin’s Family Fun Night, and Orville Wright’s Coffee Break with Friends events.
- Leveraging: In 2022-2023, the Healthy Start sites reported receiving \$708,443 directly from State and Federal government sources, local government sources, and in-kind services or goods generated by participating school sites.
- Race, Equity, Diversity, Inclusion (REDI) Practice / Cultural Proficiency: The largest ethnic group served continues to be Hispanic/Latino at all of the Healthy Start sites/districts. Materials and programs are culturally sensitive and provided in both Spanish and English. Most staff are bilingual or have bilingual support available as needed. In addition, SCOE Healthy Start Support attended multiple trainings on these topics throughout the year and shared out key-takeaways with the collaborative at meetings so that sites are able to implement best practices. Trainings completed by Healthy Start Support included: (1) CalTrin’s “Implicit Bias” Webinar (2) CalTrin’s "The Culture of One: Moving Beyond Cultural Competence" Webinar and (3) CalTrin’s “Being Culturally Informed: Translating Concepts to Action” Webinar. The following resources were also shared during Collaborative meetings: Greater Good in Education’s tools for mindful reflection processes for developing culturally responsive practices, and a TED Talk on "How to Go Beyond Diversity and Inclusion to Community and Belonging" by E'Ula Green.
- 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

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM’S RESPONSE
<p>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.</p>	<ul style="list-style-type: none"> • Sustainability: Site coordinators continue to keep community decision makers such as Boards of Trustees, County Supervisors, district administrators and school principals apprised of up-to-date Healthy Start information. • Leveraging: Healthy Start leverage resources at their school sites and school districts to provide more services, programs and supports to their communities than would be possible otherwise. Funds leveraged beyond Prop. 10 dollars this year include: Riverbank Unified School District General Fund, Riverbank Unified School District Facilities In-kind, Adult Education Budget Grant In-Kind, Ceres Unified School District Facilities Usage, Ceres Unified School District Local Control and Accountability Plan Funds, Local Control Funding Formula, and Title III. • Collaboration: All eight Healthy Start sites support various community capacity building efforts through their continued partnerships with local businesses, faith-based and community organizations.

<p>2. Implement practices to increase surveys collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> • SCOE Healthy Start has added language to the MOU for 2023-2024 so that sites have increased accountability for administering surveys: "Commit to administering surveys to participants for all services delivered as part of the Scope of Work/SCOARRS."
<p>3. Implement strategies to increase reading time at home as a result of literacy services.</p>	<ul style="list-style-type: none"> • SCOE Healthy Start speculates that increasing the amount of surveys administered for literacy services will aid in increasing the amount of parents who report increased reading time at home. Thus, SCOE Healthy Start has added language to the MOU for 2023-2024 so that sites have increased accountability for administering surveys: "Commit to administering surveys to participants for all services delivered as part of the Scope of Work/SCOARRS."

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
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OUTPUTS / OUTCOMES	PLANNED	ACTUAL
Caregivers of children 0-5 are made aware of program services through outreach	No Planned Outcome	1,105
Families with children 0-5 who attended community events reported expanded social connections	No Planned Outcome	7% (56/804)
Families with children 0-5 have knowledge and skills to support their growth and development - as evidenced by the following:		
Families are connected to community resources	No Planned Outcome	1,281
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	98% (297/303)
Families reporting increased parenting skills as a result of participating in workshops	No Planned Outcome	14% (89/653)
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	1,713 books distributed
Virtual or In-Person Storytimes are provided to the families	No Planned Outcome	36

Recommendations

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

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.

PlanetBaby!

Agency: West Modesto Community Collaborative

Current Contract End Date: June 30, 2023

Program Description

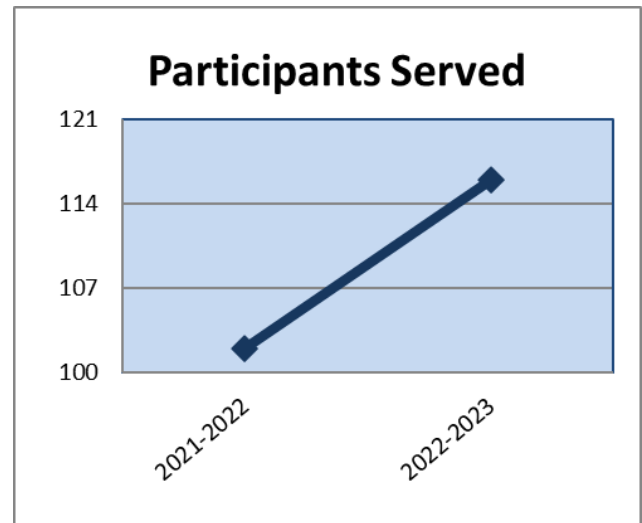
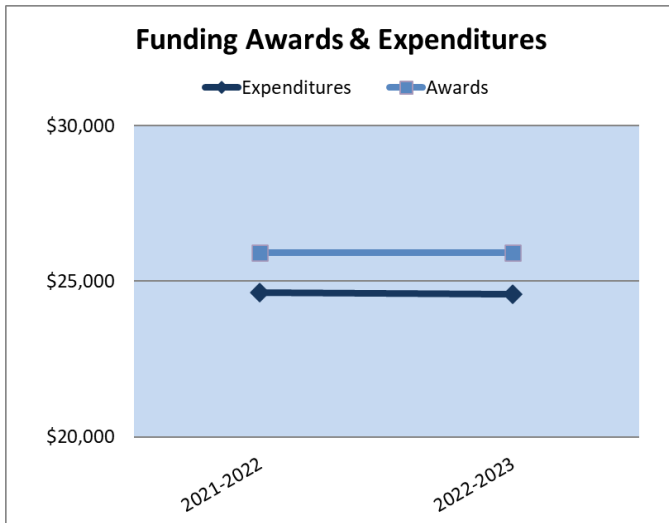
PlanetBaby! is a support group-based program engaging pregnant and parenting women through their baby's first year. The program is not a clinical model but is rather designed to provide the women participating in group sessions with the opportunities for social support as well as some education. The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

Finances			
Total Award June 1, 2021 – June 30, 2023	FY 2022-2023 Award	FY 2022-2023 Expended	Cumulative Amount Expended
\$51,840	\$25,920	\$24,579 (95% of budget)	\$49,205 (95% of budget)

FY 2022-2023 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Indirect Costs	Indirect Cost Rate	Cost Per Participant (116)
\$16,422	\$5,918	\$2,239	10%	\$212

PARTICIPANT TYPE	% SERVED
Children	43%
100% <3	
Parents/Guardians	57%
Other Family	-
RACE/ETHNICITY	PERCENTAGE (ALL PARTICIPANTS)
Hispanic/Latino	100%
White	-
Black/African American	-
Asian	-
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	-
Other	-
Unknown	-
LANGUAGE	PERCENTAGE (ALL PARTICIPANTS)
English	3%
Spanish	97%
Hmong	-
Other	-
Unknown	-

Children 0-5 Served Comparison by Fiscal Year



FY 2022-2023 was the second year of the PlanetBaby! program. PlanetBaby! expended (95%) of its award. The program was able to build upon its success from the prior year and increased the number of participants served in 2022-2023 to 116.

Program Highlights

- In 2021-2022, West Modesto Community Collaborative (WMCC) began providing the PlanetBaby! program to pregnant and parenting women through the first year of their child's life. Previously, WMCC provided the Healthy Birth Outcomes (HBO) program funded by the Commission in partnership with the Health Services Agency. HBO was a more intensive program that included case management and in-depth health education in addition to the support group sessions. PlanetBaby! is a lighter touch program primarily focused on developing protective factors in participants and thereby increasing their parenting skills. PlanetBaby! group sessions offer social support via peer sharing while also incorporating some relevant components of health education.
- In its second year of implementation, PlanetBaby! reached increased capacity, serving 66 pregnant and parenting women and 50 babies. Once the program was at capacity, it worked with other FRCs to refer interested women to their PlanetBaby! programs available in the county.
- PlanetBaby! attributes its successful retention rate for those participating in the program to several factors including offering engaging activity days, its hybrid model of learning (virtual and in-person format) as well as bi-monthly in-person check-in where the staff support participants with needed materials, resources, and referrals.
- WMCC offers a Lightning Bug program that serves children ages 1-5 with kindergarten readiness skills. This program provides PlanetBaby! participants whose children age out of the program and want to stay to engaged a place to continue to receive services at the site.
- The needs of PlanetBaby! participants remain high, and the program works diligently to meet the moment with resources and services that are developed with families in mind. This includes access to low barrier bill and rent assistance programs, support services for families and children related to mental health, and access to support and resources. These resources are provided free for families in their community, specifically families without access to medical coverage. WMCC staff work to find sponsors and funding to incentivize community participation by supporting families with diapers, food gift cards, lunches, and educational programs.

- In recent years, WMCC has seen an increase in participating families from Central and South America as well as a decrease in participation from families of Asian and African American race and ethnicity, which aligns with recent Census trends. PlanetBaby! continues their efforts in engaging families of all demographics and has partnered with African American community leaders in West Modesto, the NAACP, as well as African American past participants of PlanetBaby! in an effort to continue to engage this population.
- Leveraging: In 2022-2023, West Modesto Community Collaborative used \$2,027 from Sunlight Giving to support the PlanetBaby! program. This funding allowed WMCC to supplement incentives available for program participants.
- Race, Equity, Diversity, Inclusion (REDI) Practice / Cultural Proficiency: As an agency, WMCC staff participated in racial equity training that provided insight into the importance of being inclusive in the workplace. Furthermore, it allowed staff to help and support their families through a more competent lens. This creates an inviting and nurturing environment for all families, specifically PlanetBaby! families. Historically, with hard-to-reach communities, testimony sharing has been a powerful tool to encourage participation. As such, PlanetBaby! continues to use these tools as a grassroots effort in creating visibility and welcoming programs for all families in their community. Through open conversations and invited guest speakers, they hope to engage and retain more mothers and families of all demographics.
- Collaboration: PlanetBaby! partnered with other Commission funded programs including the Family Resource Centers for resource sharing in addition to referring participants when the program is at capacity. WMCC partnered with community agencies such as Central Valley Opportunity Center that provide financial support in the form of emergency bill assistance for families. Through a partnership with Modesto Library, PlanetBaby! was able to secure donated books to provide participating families to encourage reading and learning. Kaiser funds supports WMCC’s mental health program which allows them to support families with mental health tools and resources. Finally, PlanetBaby! collaborated with the King Kennedy Board of Directors as an effort to further engage African American mothers from their community.
- Sustainability: WMCC received government funds, private donations, and grant opportunities to fund services offered at its site. However, the majority of the PlanetBaby! program is provided by the Commission.

Prior Year Recommendations

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM’S RESPONSE
1. Continue to work on the Commission’s priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission’s financial support ends.	<ul style="list-style-type: none"> • WMCC activities and progress made on the Sustainability Plan originally submitted to the Commission include progression from the PlanetBaby! to continue onto other programs by WMCC, such as Lightning Bugs. It would ensure a continuation of support services, case management, and preparing children for success in kindergarten. Activities and plans in place also include the continuation of community partnerships for referrals and resource sharing.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
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OUTPUTS / OUTCOMES	PLANNED	ACTUAL
Pregnant and parenting women attend support group sessions	No Planned Outcome	66
Pregnant and parenting women who attended support group sessions reported reduced stress	No Planned Outcome	39% (26/66)
Pregnant and parenting women who attended support group sessions reported improved protective factors in their lives	No Planned Outcome	39% (26/66)
Pregnant and parenting women who attended support group sessions reported increased parenting skills	No Planned Outcome	39% (26/66)

Recommendations

Financial support of this program was assumed by West Modesto Community Collaborative at the start of the 2023-2024 fiscal year. Therefore, there are no Commission recommendations for this program.

The BRIDGE

Agency: Sierra Vista Child & Family Services

Current Contract End Date: June 30, 2023

Program Description

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

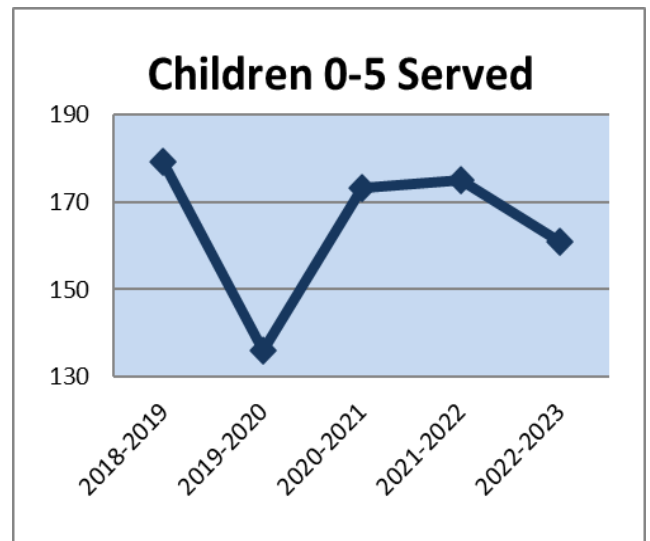
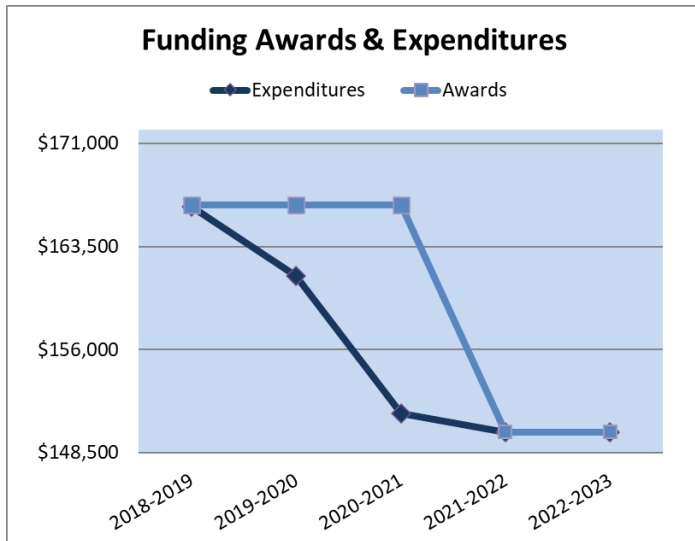
The BRIDGE provides culturally sensitive and knowledgeable services to the very reticent SEA population. The population has a history of poor service utilization, but The BRIDGE is a trusted service provider for the SEA community and has been successful in bringing in young SEA families with children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

Finances			
Total Award June 1, 2007 – June 30, 2023	FY 2022-2023 Award	FY 2022-2023 Expended	Cumulative Amount Expended
\$2,804,500	\$150,000	\$150,000 (100% of budget)	\$2,719,041 (97% of budget)

FY 2022-2023 Budget / Expenditure Data				
Personnel Costs	Services/Supplies	Indirect Costs	Indirect Cost Rate	Cost Per Child 0-5 (161)
\$93,805	\$32,458	\$23,737	18.8%	\$932

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Children 0-5 Served Comparison by Fiscal Year



Funding remained steady for The BRIDGE until 2018-2019 when all programs received a reduction in funding as the Commission went through intensive strategic planning and began efforts to balance its budget. As a result of a vacant position, The BRIDGE did not expend all of its award in 2019-2020 and 2020-2021. The Bridge expended 100% of its award in 2021-2022 and 2022-2023. A reduction of staff hours to offset salary costs in 2018-2019 resulted in the decline of children 0-5 served for that fiscal year. Several factors influenced the program's ability to serve children 0-5 in 2019-2020, including relocating to a new site, two vacant positions during the year and the COVID-19 pandemic. The latter resulted in a shift to providing services on a more one-on-one basis. The increase in children served in 2020-2021 was a result of families impacted by the COVID-19 pandemic needing more services and The Bridge. The number served remained steady for 2021-2022 but declined in 2022-2023 as staff struggled to engage new 0-5 families.

Program Highlights

- The BRIDGE scope of work was updated in 2021-2022 to better align with the Commission's 2019-2024 Strategic Plan. As such, program activities focused heavily on community and outreach events, parent education, educational workshops/classes, literacy programs and book distribution. The Bridge staff struggled to fully implement all component of the updated scope of work and to discontinue previously funded activities.
- Participants of the BRIDGE reported various needs in 2022-2023. Some of the most reported concerns for participants were housing, employment, food resources, and navigating the health care system. Stable employment continues to be a challenge for SEA communities due to language barriers or immigration status. The BRIDGE staff assisted by providing resources and tools to be successful in the job market. Participants have also struggled with food security as additional CalFresh benefits that were provided during the pandemic have ended in FY 2022-2023. As a result, participants have reported struggling financially to purchase nutritious foods.
- The BRIDGE staff continued to offer Parent Cafés to families. The Cafés offer families the opportunity to build connection with other parents and caregivers about topics that are relevant to them and hear how their counterparts handle them.
- The BRIDGE held four community workshops in 2022-2023 with a total of 31 families attending. Workshop topics included the Home Energy Assistance Program (HEAP), Kinship Care and Needed Support/Services, Family Nutrition, and Library Resources. In addition to these workshops, staff provided advocacy training to 22 parents/caregivers.
- The BRIDGE staff participated in several outreach events throughout the year in an effort to increase program awareness and engage new participants. Staff outreached to the community by providing information about the programs offered at the BRIDGE. Participants received information on parenting classes, children's literacy groups, parent cafés, and linkage to community resources.

- Leveraging: In 2022-2023, The BRIDGE received \$31,430 from local government sources.
- Race, Equity, Diversity, Inclusion (REDI) Practice / Cultural Proficiency: The BRIDGE Family Resource Center continues to strengthen diverse relationships within the community to help provide equitable and inclusive services for all. Staff are provided with trainings opportunities to enhance culture competency.
- Collaboration: The BRIDGE continues strong collaborations with doctors' offices, BHRS, and the Community Services Agency, providing linkages to and interpreting services for families. The BRIDGE also has collaborative relationships with several local Modesto City School campuses; Robertson Road, Kirschen, and Burbank. The BRIDGE continues strong and active collaborations with West Modesto King Kennedy, Central Valley Opportunity Center (CVOC), Clients' Rights Advocates, Modesto Commerce Bank, and the Cambodian and Laotian Temples.
- Sustainability: The BRIDGE's continued strategy has been to seek diverse funding sources (grants, allocations, and other government support). The BRIDGE currently uses funding through grants from CSA CalFresh and Sunlight Giving. However, the majority of the program's long running funding continues to be provided by the Commission.

Prior Year Recommendations

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> • Sierra Vista Child & Family Services (SVCFS) continues to work on the Commission's priorities of sustainability, leveraging and collaboration to ensure services continue after the Commission's financial support ends. SVCFS annually updates its sustainability plan, instituting practices and procedures that build and strengthen fiscal, administrative, and service capacity (i.e., Joint Commission Accreditation, leadership training, Strategic Planning, staff training, fundraising). SVCFS consistently seeks to leverage new and diverse funding to broaden services to families and bolster financial stability. Lastly, SVCFS values collaboration throughout the organization and with partners to provide children and families with the most comprehensive services to meet the unique needs of the community as well as to minimize duplication of services.
2. Continue to find ways to integrate the updated Scope of Work services into the Bridge delivery system.	<ul style="list-style-type: none"> • No response provided
3. Implement practices to increase caregivers' completion of pre and post-tests for services.	<ul style="list-style-type: none"> • The staff strives to complete a survey after services are provided and continues working on increasing the survey numbers.
4. Offer virtual services with families as appropriate.	<ul style="list-style-type: none"> • The BRIDGE significantly increased its virtual service delivery during the 2021-2022 fiscal year. However, in the 2022-2023 fiscal year, as restrictions lessened, services shifted back to the in-person format.

Planned Versus Actual Outputs / Outcomes

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
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OUTPUTS / OUTCOMES	PLANNED	ACTUAL
Caregivers of children 0-5 are made aware of program services through outreach	No Planned Outcome	71
Families with children 0-5 who attended community events reported expanded social connections	No Planned Outcome	100% (196/196)
Families with children 0-5 have knowledge and skills to support their growth and development - as evidenced by the following:		
Families reporting increased advocacy skills as a result of participating in advocacy training/workshops	No Planned Outcome	100% (24/24)
Families reporting improved parenting skills as result of participating in parenting education	80%	100% (30/30)
Families reporting increased confidence in their parenting ability	No Planned Outcome	100% (30/30)
Families reporting increased parenting skills as a result of participating in workshops	No Planned Outcome	100% (31/31)
Children are eager and ready learners - as evidenced by the following:		
Families indicating increased reading time at home as a result of literacy services	No Planned Outcome	100% (161/161)
Children 0-5 have access to books at home	No Planned Outcome	190 books distributed
Storytimes are provided to the families of children 0-5	No Planned Outcome	2

Recommendations

First 5 Stanislaus was notified by Sierra Vista Child & Family Services that the BRIDGE staff would be retiring at the end of Fiscal Year 2022-2023 and would no longer be operated as a standalone program. In the future, SVCFS will serve the Southeast Asian population at their existing family resource centers located in multiple communities in the county. Therefore, there are no Commission recommendations for this program.

Family Resource Center Countywide Summary

Agencies: Aspiranet, Center for Human Services, Ceres Partnership for Healthy Children,
Sierra Vista Child & Family Services, Parent Resource Center
Current Contract End Date: June 30, 2023

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 and support groups, school readiness education, mental health referrals, and child developmental screenings and referrals. In addition, each site provides unique services that address the needs of each community.

Finances							
Total Award June 1, 2005 – June 30, 2023		FY 2022-2023 Award		FY 2022-2023 Expended (% of budget)		Cumulative Amount Expended (% of budget)	
Commission Funds	Combined Funds <i>(includes CSA)</i>	Commission Funds	Combined Funds <i>(includes CSA)</i>	Commission Funds	Combined Funds <i>(includes CSA)</i>	Commission Funds	Combined Funds <i>(includes CSA)</i>
\$26,596,593	\$37,925,554	\$1,499,995	\$2,399,995	\$1,431,039 (95%)	\$2,165,718 (90%)	\$24,881,444 (94%)	\$35,224,900 (93%)

Cost per Child 0-5 to Commission (1,466) = \$976

PARTICIPANT TYPE	% SERVED
Children	28%
49% <3; 50% 3-5; 1% Unknown	
Parents/Guardians	42%
Other Family	30%
RACE/ETHNICITY	PERCENTAGE <small>(ALL PARTICIPANTS)</small>
Hispanic/Latino	58%
White	29%
Black/African American	3%
Asian	2%
Alaska Native/American Indian	-
Pacific Islander	-
Multiracial	3%
Other	3%
Unknown	2%
LANGUAGE	PERCENTAGE <small>(ALL PARTICIPANTS)</small>
English	61%
Spanish	33%
Hmong	-
Other	2%
Unknown	4%

An Investment In Communities **Family Resource Centers and Differential Response**

During the last 18 years, the Commission has invested over \$26 million dollars in Differential Response-Family Resource Centers (DR-FRCs). The funding for 2022-2023 represents 33% of the Commission's total program budget and 71% of the budget allocated to Improved Family Functioning. This investment is based on both published national research about DR and FRCs, as well as the results that Stanislaus County has experienced. The Commission is funding what works within an effective structure.

What Works

Family Resource Centers

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

Shared Principles

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

Key Characteristics

- Integrated
- Comprehensive
- Flexible
- Responsive to community needs

Differential Response

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

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

Effective Structure

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

Family Development Matrix and Case Management (Improved Family Functioning)

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

Parent Education and Support Groups (Improved Family Functioning)

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

Community Outreach

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

FRC Core Services

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

Resource and Referral (Improved Family Functioning)

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

Developmental Screenings (Improved Child Development)

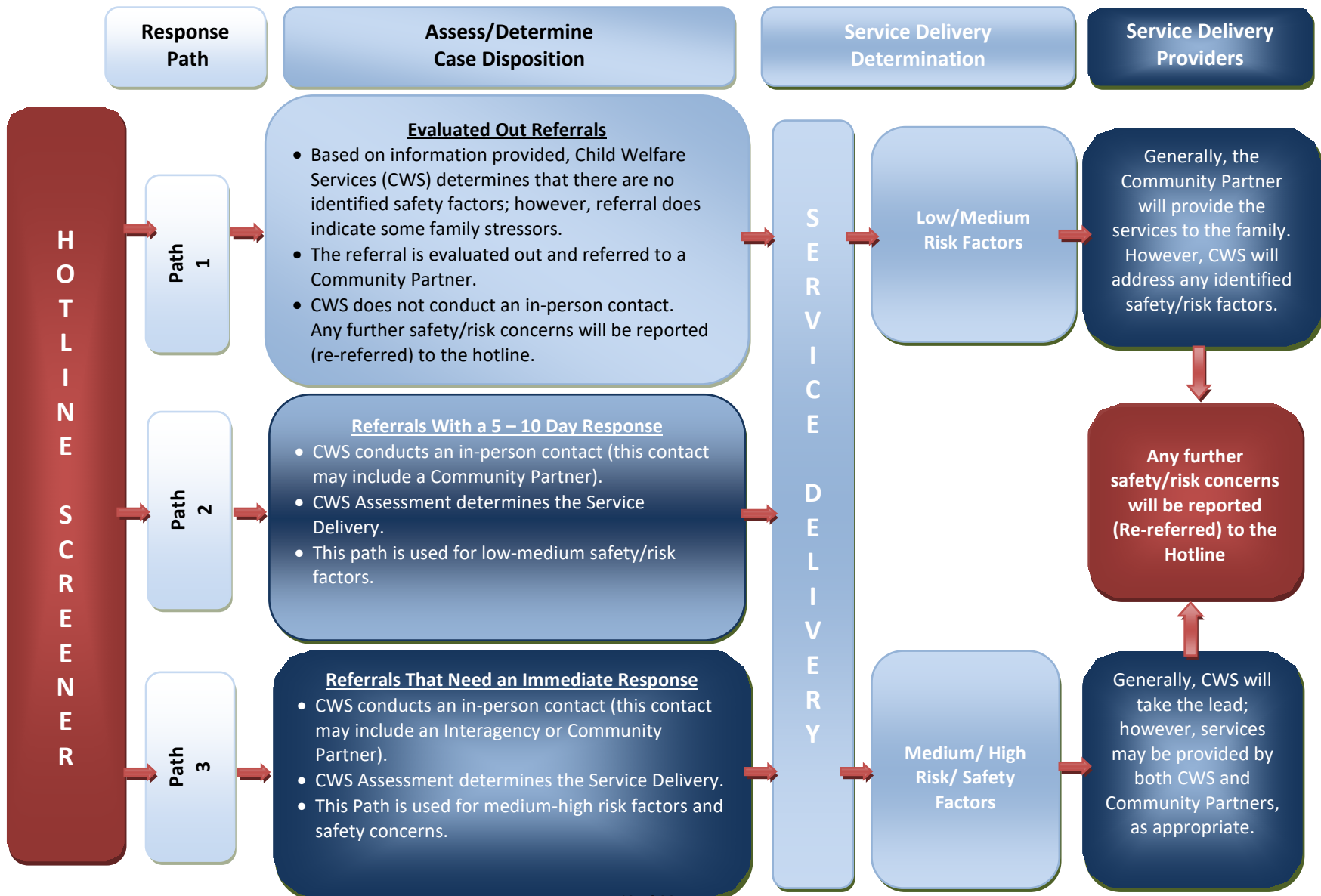
The Ages and Stages Questionnaire is used by all FRCs to screen children 0-5. The screening is intended for the early detection of developmental concerns in asymptomatic children. The caregiver is involved in the screening process, and child development activities and issues are discussed. If indicated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

School Readiness/Literacy Support (Improved Child Development)

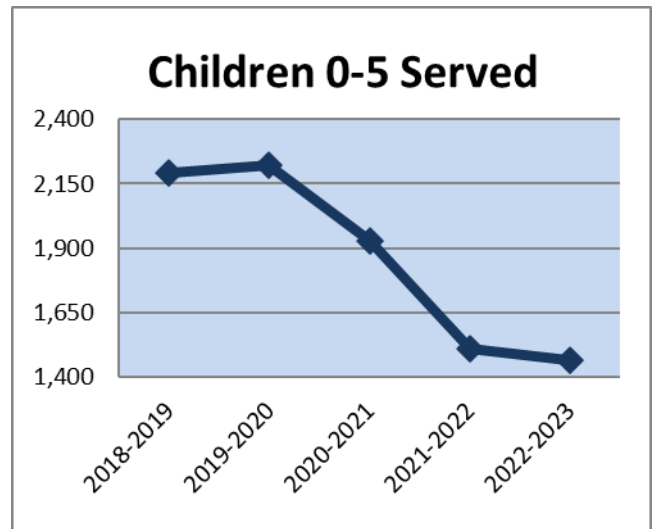
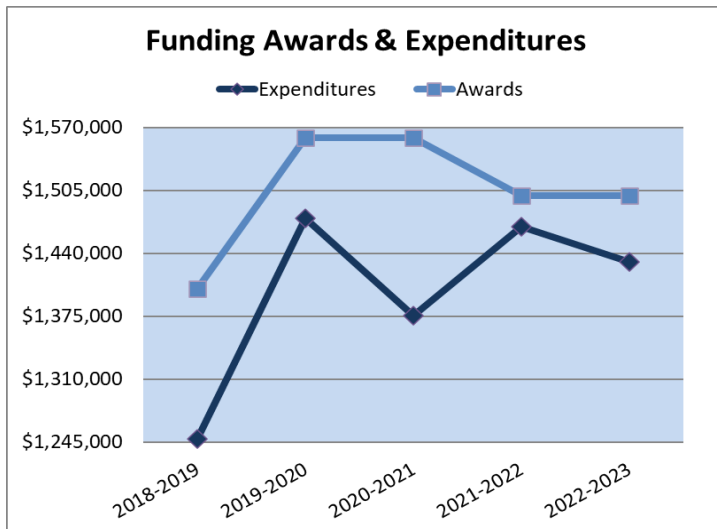
The FRCs use the Creative Curriculum program to provide children and their families with developmentally appropriate services that support active learning and promotes progress in all developmental areas. The FRCs may offer school readiness groups or include caregiver/child interactions in their parent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

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

Stanislaus Differential Response Paths



Children 0-5 Served Comparison by Fiscal Year



Commission funding for countywide FRCs has remained stable except in 2018-2019 when all programs received funding reductions in an effort by the Commission to balance its budget while going through extensive strategic planning. FRC expenditures have been relatively stable (averaging 93% of award). FRCs struggled to expend funds in 2020-2021 during the pandemic as they had to continue to offer modified services and participants chose to engage differently. The FRCs were able to expend 98% of funding in 2021-2022 as they adapted to the virtual and hybrid service delivery models. There was a slight increase in the number served in 2019-2020 due to their efforts to engaging families during the pandemic using alternative formats. The number served declined in 2020-2021 as participants struggled to balance other critical needs such as supporting their children in online schooling. There was another decrease in children served in 2021-2022 and again in 2022-2023 as the FRCs grappled with staff turnover and vacancies.

Program Highlights

- In 2021-2022, the scope of work for the FRCs was updated to align with the Commission’s 2019-2024 Strategic Plan. This included standardized the parenting curricula used by the sites: Abriendo Puertas, Nurturing Parenting, and Parent Cafés. The FRCs can use one or all three parenting programs based on the needs of their community. The Commission offered a Nurturing Parenting refresher training for FRC staff in 2022-2023 to ensure continued optimal implementation of parenting programs.
- In 2022-2023, the FRCs implemented the second year of PlanetBaby! as part of their contract. PlanetBaby! is a support group-based program engaging pregnant and parenting women through their baby’s first year. The program provides group sessions for participants and offers them opportunities for social support as well as some education. The groups are founded upon the Five Protective Factors and are intended to help participants increase their protective factors to support their parenting success by helping them become more capable and confident in their skills. PlanetBaby! groups saw an increase in participants across most FRC sites in 2022-2023 as facilitators focused on outreach efforts and engagement strategies.
- 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.
- With the COVID restrictions fully lifted by the end of 2022-2023, each FRC determined how best to provide services for the community they served based on participant input. Some sites resumed services completely in-person, some sites continued to provide services primarily in a virtual format, and some sites provided a hybrid model (in-person and or virtual based on what worked best for each service).
 - Families continued to feel the lingering effects of the COVID-19 pandemic through 2022-2023. Many supports previously available to families, such as increased CalFresh benefits and utility payment deferments, ended resulting in additional household strain as families struggled to gain financial stability. In addition, inflation further reduced the ability of families to cover their most basic needs. The FRCs remained strategic partners in supporting families due to being geographically dispersed throughout the County and their established relationships within their communities. The FRCs received additional COVID emergency grants from the Commission in 2022-2023 to provide needed support for families such as housing and utility assistance, gift cards to purchase food, cleaning and hygiene materials, and other basic needs.
 - The FRCs offered workshops on immigration, parent empowerment, COVID-19 vaccine, resume building and job hunting, library services, financial literacy, CPR, goal setting, nutrition, self-care, and mental wellness to address the needs of their families.
 - 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, Santa’s Workshop, Ceres Dads Group, Mother’s Day Celebration and Summer Camp.
 - Leveraging: As a group, in 2022-2023, the FRCs leveraged a total of \$3,563,087 from local government sources and \$426,793 was generated by civic groups, foundations, and local fundraising events.
 - Race, Equity, Diversity, Inclusion (REDI) Practice / Cultural Proficiency: All DR-FRCs are committed to the continued development of cultural competency for staff. FRCs recruit and hire multicultural and bi-lingual staff to meet the needs of their diverse communities. FRCs employ staff with fluency in languages including Spanish, Cambodian, Laotian, Hmong, Farsi, Assyrian, and American Sign Language. FRCs also contract with the Language Line for translation for other languages and interpreters as needed. The FRCs provide direct services, literature, and presentations in threshold languages and in other languages as material is available. Staff at the FRCs is provided with ongoing cultural competency training in order to provide competent services to participants. The FRCs likewise implement Diversity, Equity, and Inclusion (DEI) practices at their sites to varying degrees including sending staff to trainings, offering resources, and integrating DEI into their agency’s strategic plans.
 - Collaboration: FRCs have developed an extensive number of collaborations with public, private, and non-profit agencies including: El Concilio, The BRIDGE, other Family Resource Centers, Women Infant and Children (WIC), Workforce Development, Healthy Starts, International Rescue Committee, Family Justice Center, Salvation Army, United Samaritans, Children’s Crisis Center, 211, Promotoras, local health plans and health clinics, churches, city governments, county departments, school districts, civic groups, CalFresh and many others.
 - Sustainability: Each FRC has prepared a Sustainability Plan that contains the following elements: (1) Vision and Desired Results; (2) Identifying Key Champions and Strategic Partnerships; (3) Internal Capacity Building through development of a strategic planning process and (in some cases) accreditation; (4) Strategic Financing (including cost management and revenue enhancement); and (5)

Establishing an Implementation Plan with Periodic Reviews. The FRCs have successfully developed Sustainability Plans and each year the FRCs report on the progress made in their individual plans.

Prior Year Recommendations

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

CERES	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM’S RESPONSE
<p>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.</p>	<ul style="list-style-type: none"> • 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. • Obtaining additional funding through programs such as Community Development Block Grant (CDBG) to provide case management and emergency assistance to Ceres and Keyes residents accessing the FRC, such as food boxes and utility assistance. Funding from BHRS provides an active community Promotora program. Funding from the Ceres Unified School District (CUSD) supports local nutrition programs for children and their families. 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. 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 developed an agency volunteer network, including community Promotoras, to help our capacity to work with FRC individuals 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. New partners this year include Ceres Community Center, Stanislaus State University, Ceres Christian Church, and others. 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. We partner with Ceres High School’s S-Club who partnered to provide the Thanksgiving dinner boxes. 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

	<p>consistent partner who provides reading time, literacy activities, free books, and library cards to 0-5 families. Other partners include Ceres Champions, Service Clubs of Ceres, Child Care Resource & Referral, Workforce Development, Leaps & Bounds and the WIC program. CP also has strong partnerships with other FRCs, non-profits, and community collaborations/groups.</p>
<p>2. Implement strategies to increase the number of caregivers and children engaging in FRC services.</p>	<ul style="list-style-type: none"> We have increased our efforts in community outreach, both in person and virtual, to expand services. Additionally, we have developed new workshops, community events and activities to attract new families.
<p>3. Implement strategies to increase surveys collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> As of June 2023, we have adapted our client survey to be available year-round. Previously we conducted two survey periods, and this limited the number of surveys collected. With a continuously open survey we should increase the number of surveys collected.
<p>4. Continue their use of virtual services with families as appropriate.</p>	<ul style="list-style-type: none"> Our groups are offered in a hybrid format, allowing participants to join in person or on Zoom.

EASTSIDE	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
<p>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.</p>	<ul style="list-style-type: none"> Center for Human Services (CHS) continues to look for other fiscal resources to support our FRCs. Leveraging and collaboration with other partners, as well as developing other strategies, are a priority to ensure identified services continue as the Commission's financial support declines. CHS is committed to continuing to provide support to the Eastside community as it has done for the past 20 years. Funds from targeted fund-raising events such as the Oakdale Crab Feed and Medi-Cal Administrative Activities (MAA) is an example of unrestricted funds that are available that we are using as a way to bridge financial gaps for the Oakdale FRC.
<p>2. Implement strategies to increase the number of caregivers and children engaging in FRC services.</p>	<ul style="list-style-type: none"> We are outreaching more and have focused on reaching more families in Riverbank. We are able to engage more families virtually, but our families have shared that the children aren't getting as much out of the classes when they are held over zoom. It is difficult to engage 2-5 year old's for more than a few minutes at a time. Our families asked for them to be in person, so that their children can learn more.
<p>3. Implement strategies to increase survey collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> We have created a new survey and we have implemented a QR code to allow families to scan it with their smart phones. The survey is given for each program they participate in and is administered more frequently so we

	can get more real time data. We have been teaching our families this new survey protocol over the last quarter of the fiscal year and we collected more surveys than in previous quarters.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> We use virtual platforms as necessary and needed with our families. We work hard to make sure we have their feedback and make sure we are reaching them in ways that are appropriate for their needs.

PARENT RESOURCE CENTER	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> The Parent Resource Center (PRC) partners recognize the importance of parents engaging in parenting education services. The PRC noticed a need for classes to be offered at non-traditional business hours. The center responded by offering a Saturday morning series of classes. This resulted in a higher number of caregivers being able to successfully attend parenting education classes.
2. Implement strategies to increase the number of caregivers and children engaging in FRC services.	<ul style="list-style-type: none"> The Parent Resource Center partners recognize the importance of caregivers and children engaging in parenting education services. As pandemic restrictions lifted, an increased effort was made to attend outreach events and host community events to inform families about the services offered at the FRCs. PRC also offered additional parenting classes at varying times outside of traditional business hours to drive engagement and to meet client needs. These strategies proved to be a success. The number of FRC participants at the PRC increased from 318 participants in the 2021-2022 fiscal year to 812 participants in the 2022-2023 fiscal year, which was more than double the amount served. There is still need for a class geared for caregivers of non-DR/AC children 6-17 years old. This age group is not covered by the FRC portion of the contract.
3. Implement strategies to increase surveys collected from participants, even for virtual services.	<ul style="list-style-type: none"> The PRC partners worked hard to increase the number of participants with children 0-5 who receive customer satisfaction surveys. The FRCs have seen success with increasing this number by providing it more regularly to active participants. However, a slight drop was seen as many participants did not engage for a very long time and could not be reached for follow-up. One practice continued by the PRC is to have surveys available during graduation ceremonies. Both virtual and hybrid clients participate in graduation and can easily complete the survey at that time. Also, PRC has emailed surveys to virtual clients as well as used a link in the "chat" during the virtual sessions. Clients are alerted to the surveys and links during orientation and during the class. For clients unable to attend graduation, surveys are available at the front desk. At a later agreed upon time, the client completes the survey at the office and before receiving the certification of completion. PRC and

	Sierra Vista continue to explore creative ways for clients to receive and complete the surveys.
4. Continue their use of virtual services with families as appropriate.	<ul style="list-style-type: none"> As pandemic restrictions lifted during the fiscal year, the PRC partners saw a continued demand for virtual services among some of the families served. Rather than transition back fully to in-person and on-site, the FRCs instead gave the option to any family receiving services to utilize digital/remote communications methods (Zoom, Teams, etc.) or to meet at the FRCs in-person. All classes, services, and workshops were offered fully virtual or in a hybrid format. This flexibility helped to ensure as many families could be served based on their needs and home situations. This also helped to ensure engagement with clients who may not be fully available to travel to the FRCs, whether it be because of lack of transportation, access to childcare, medical reasons such as quarantining, or any other issue. This also proved helpful when FRC staff was introduced to families via warm hand off from community partners or county social workers, as other community staff members may not have the full availability to travel to the FRCs' locations.

HUGHSON	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
1. Continue to work on the Commission's priorities of sustainability, leveraging, and collaboration to ensure services continue after the Commission's financial support ends.	<ul style="list-style-type: none"> Sierra Vista Child and Family Services (SVCFS) completes annual updates of its sustainability plan, instituting practices and procedures that build and strengthen fiscal, administrative, and service capacity. SVCFS is focused on strategic planning, leadership development/ training, staff development/ training, and fundraising. SVCFS consistently seeks to leverage new and diverse funding to broaden services to families and bolster financial stability. SVCFS values collaboration throughout the organization and with partners to provide children and families with the most comprehensive services to meet the unique needs of the community, as well as to minimize duplication of services.
2. Implement strategies to increase the number of caregivers and children engaging in FRC services.	<ul style="list-style-type: none"> SVCFS staff conducts outreach within various locations in our service area in hopes of connecting and engaging with new clients. We are continuously attempting to develop and maintain partnerships with community programs to promote our services and work collaboratively for the betterment of our community. We are continuously trying to modify and improve our services in hopes of increasing participation for new or pre-existing clients.

<p>3. Implement strategies to increase surveys collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> The center has been providing both in-person and virtual classes to the community. The center will provide classes in a format that best meets the needs of clients.
<p>4. Continue their use of virtual services with families as appropriate.</p>	<ul style="list-style-type: none"> The staff strives to complete a survey after services are provided. Staff continues working on increasing the survey numbers.

NORTH MODESTO / SALIDA

<p style="text-align: center;">2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS</p>	<p style="text-align: center;">PROGRAM'S RESPONSE</p>
<p>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.</p>	<ul style="list-style-type: none"> Sierra Vista Child and Family Services (SVCFS) completes annual updates of its sustainability plan, instituting practices and procedures that build and strengthen fiscal, administrative, and service capacity. SVCFS is focused on strategic planning, leadership development/ training, staff development/ training, and fundraising. SVCFS consistently seeks to leverage new and diverse funding to broaden services to families and bolster financial stability. SVCFS values collaboration throughout the organization and with partners to provide children and families with the most comprehensive services to meet the unique needs of the community, as well as to minimize duplication of services.
<p>2. Work to increase the number of caregivers and children engaging in FRC services.</p>	<ul style="list-style-type: none"> SVCFS staff conducts outreach within various locations in our service area in hopes of connecting and engaging with new clients. We are continuously attempting to develop and maintain partnerships with community programs to promote our services and work collaboratively for the betterment of our community. We are continuously trying to modify and improve our services in hopes of increasing participation for new or pre-existing clients.
<p>3. Implement strategies to increase surveys collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> The administration of surveys has increased at North Modesto/ Salida. FRC staff will continue to work on increasing survey numbers for participating families. North Modesto/ Salida FRC has developed a Survey Monkey survey, this link can be provided to clients via email and/or text.
<p>4. Continue their use of virtual services with families as appropriate.</p>	<ul style="list-style-type: none"> North Modesto/ Salida FRC is providing both in-person and virtual classes, and it will continue to do so moving forward. This will allow families to connect from a variety of locations with ease.

TURLOCK

2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
<p>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.</p>	<ul style="list-style-type: none"> • 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: <ol style="list-style-type: none"> 1) Pro-Family (CSA) 2) Welfare to Work (Workforce Development) 3) Promotoras (BHRS) 4) Keep Baby Safe (HSA) 6) American Rescue Plan Act (CSA) 7) Teichert Foundation Grant 8) Elder Abuse Prevention Services (APS) • These blended funding sources are critical to the sustainability of the TFRC. While effort would be put into replacing a loss of a funding stream, the sustainability of services could be impacted should funding sources or amounts be changed. • Aspiranet has established a strong presence in the community, which has resulted in additional services and supports (provided and funded by other agencies or entities) coming into the center. Reaching beyond our Center-funded services and inviting other agencies to use our Center has provided additional resources without incurring additional personnel or service costs to the TFRC. One example of how donations enhance our service delivery is Aspiranet's relationship with Bed Bath and Beyond; the TFRC receives In-Kind items through this partnership, and donations last fiscal year totaled approximately \$9,000. These items included linens, household goods, and children's toys and games, which went directly to families in need.
<p>2. Implement strategies to increase the number of caregivers and children engaging in FRC services.</p>	<ul style="list-style-type: none"> • The Turlock Family Resource Center plans to implement strategies to increase the number of caregivers and children engaging in FRC services by increase outreach efforts, building partnerships with other community-based organizations who serve the same population, and increase the internal referral process within the larger agency.
<p>3. Implement strategies to increase surveys collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> • In an effort to increase feedback from the families we are serving, TFRC has integrated customer satisfaction surveys into the intake and discharge process. In virtual settings clients are allocated time during the activity to complete the survey and send it to the hosting staff member. TFRC staff have also been trained in how to conduct these surveys over the phone or in virtual settings.

<p>4. Continue their use of virtual services with families as appropriate.</p>	<ul style="list-style-type: none"> Classes continued to be held virtually and clients reported to prefer virtual classes due to lack of childcare and for health and safety concerns if classes were in person.
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WESTSIDE	
2021-2022 ANNUAL PROGRAM EVALUATION RECOMMENDATIONS	PROGRAM'S RESPONSE
<p>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.</p>	<ul style="list-style-type: none"> 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.
<p>2. Implement strategies to increase the number of caregivers and children engaging in FRC services.</p>	<ul style="list-style-type: none"> We are committed to continue to outreach via community events and social media to increase the number of caregivers and children engaged in FRC services. We will look at ways to incentivize caregivers by referring and/or enrolling family or friends as a strategy to increase engagement in FRC services.
<p>3. Implement strategies to increase surveys collected from participants, even for virtual services.</p>	<ul style="list-style-type: none"> As we explore alternative ways to survey participants, we will also make it part of the process for the ending of all activities funded by 0-5 to receive a survey. We believe that by doing this we will be able to capture more surveys and people willing to participate in filling out a survey.
<p>4. Continue their use of virtual services with families as appropriate.</p>	<ul style="list-style-type: none"> As we continue to enroll more families and children into the different groups, we find that families prefer in person groups. We also know that logistically we can only have a limited number of people in each group in person. We are committed to provide hybrid versions of all of our groups to expand our reach and services to families with children under the age of 5.

Planned Versus Actual Outputs / Outcomes

Family Resource Centers 2022-2023 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%	137/137	100%	125/125	85%	541/638	100%	181/181	100%	222/222	56%	88/157	0%	0/0	89%	1,294/1,460
Caregivers participant in FRC activities as a result of outreach events.																
Caregivers who participant in FRC programs/services as a result outreach events	1%	36/6,200	0%	17/4,000	1%	15/2,579	0%	6/1,449	1%	9/1,174	16%	5/31	2%	19/1,122	1%	127/16,679
Caregivers will have increased advocacy skills and knowledge.																
Caregivers who report an increase in advocacy skills as a result of advocacy training and/or guidance	100%	23/23	100%	18/18	100%	29/29	100%	12/12	100%	17/17	100%	7/7	100%	36/36	100%	142/142
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	100%	116/116	100%	54/54	99%	270/274	100%	53/53	100%	39/39	88%	44/50	100%	49/49	98%	625/635

Family Resource Centers 2022-2023 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	100%	142/142	100%	54/54	99%	126/127	100%	36/36	100%	25/25	95%	36/38	100%	54/54	99%	473/476
Caregivers of children 0-5 who attended parent education, completed a survey or pre/post test, and indicated an increased confidence in parenting ability	100%	142/142	100%	54/54	99%	126/127	100%	36/36	100%	25/25	82%	31/38	100%	54/54	98%	468/476
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%	46/46	40%	8/20	100%	12/12	100%	53/53	100%	25/25	100%	29/29	100%	30/30	94%	203/215
Pregnant and parenting women who attend group sessions and reported improved protective factors in their lives as a result	100%	46/46	40%	8/20	100%	12/12	100%	53/53	100%	25/25	69%	20/29	100%	30/30	90%	194/215
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%	22/22	100%	19/19	100%	50/50	100%	23/23	100%	8/8	100%	7/7	100%	25/25	100%	203/215

Family Resource Centers 2022-2023 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	4%	23/515	5%	19/395	36%	170/474	58%	72/124	57%	59/103	82%	84/103	7%	57/765	20%	394/1,740
Children 0-5 who received early intervention or support services as indicated by screening results	100%	7/7	0%	0/0	70%	7/10	100%	2/2	60%	9/15	50%	4/8	75%	3/4	70%	15/25
FRC staff or contracted 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%	118/118	100%	12/12	63%	258/410	100%	70/70	100%	56/56	75%	154/204	100%	82/82	79%	750/952
Children 0-5 will be provided books	100%	118/118	142%	12/12	60%	248/410	87%	61/70	100%	56/56	100%	204/204	23%	19/82	100%	952/952
Children 0-5 attending literacy services who obtained a library card as a result of services	100%	118/118	0%	0/0	30%	41/137	21%	19/91	54%	22/41	100%	59/59	0%	0/0	58%	259/446

Recommendations

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

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).

- **Emergency and Disaster Relief**

Due to the continued community impacts resulting from the COVID-19 pandemic, the Commission received a \$70,000 grant from Sunlight Giving which was passed through to the FRCs to support the families in their communities affected by COVID-19. FRCs who received the COVID-19 grants were able to determine how best to use it for their community.

How Much Was Done?	How Well Was it Done?	Is Anyone Better Off?
<ul style="list-style-type: none"> • 4 FRC partners were certified to provide the Nurturing Parenting curriculum at their sites for families • 21 FRC partners were provided Ages & Stages Questionnaire training for use with their families • 656 children 0-5 and 723 caregivers received COVID-19 relief support to help with housing assistance, utility payments, or other basic needs 		
<p><i>Increases in Leveraging Within and Outside of the County</i></p> <p><i>Increase in Resources and Community Assets Leveraged Within the County</i></p> <ul style="list-style-type: none"> • 91% of the Commission contracted programs (10/11) reported leveraging of community resources • Over \$3.9 million was leveraged from inside sources in 2022-2023 <p><i>Increase in resources coming into Stanislaus County, As a Result of Leveraged Dollars</i></p> <ul style="list-style-type: none"> • 91% of the Commission contracted programs (10/11) reported leveraging Prop 10 dollars to receive funding from outside of Stanislaus County • Over \$950,000 was leveraged from outside sources in 2021-2022 		

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

Program/Activity	Amount Expended in 2022-2023
PlanetBaby! Technical Assistance	\$ 4,895
Nurturing Parenting	\$ 2,500
COVID Emergency Support Stipends	\$ 70,000
TOTAL	\$ 77,395

APPENDIX - ACRONYMS

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

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

CWS/CMS	Child Welfare Services Case Management System
DMCF	Doctors Medical Center Foundation
DR	Differential Response
ECE	Early Childhood Education
0-5 EIP	Zero to Five Early Intervention Program
EL	Early Learning <i>or</i> English Learners
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment
ESL	English as a Second Language
FJC	Family Justice Center
FCC	Family Child Care
FDM	Family Development Matrix
FFN	Family, Friends, and Neighbors (childcare category)
FM	Family Maintenance (division of CPS)
FPG	Federal Poverty Guideline
FPL	Federal Poverty Level
FRCs	Family Resource Centers
FSN	Family Support Network
FY	Fiscal Year
GED	General Education Diploma
GVHC	Golden Valley Health Centers
HBO	Healthy Birth Outcomes
HEAL	Healthy Eating Active Living
HEAP	Home Energy Assistance Program
HRSA	Health Resources and Services Administration
HSA	Health Services Agency
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

PBI 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, The BRIDGE
TCM Targeted Case Management
TUPE Tobacco Use Prevention Education
VFC Vaccines For Children
VMRC Valley Mountain Regional Center
WCC Well Child Checkup
WIC Women, Infants, and Children
WMCC West Modesto Community Collaborative
Funded Program: PlanetBaby!