

# Family Resource Center Guidebook

July 2022



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## **INTRODUCTION**

In 2005, First 5 Stanislaus also known as the Stanislaus County Children and Families Commission (CFC) and the Community Services Agency (CSA) formed a collaboration to fund a network of family resource centers (FRCs) throughout Stanislaus County. The collaboration marked a unique opportunity for FRCs to provide differential response and family support activities throughout the County. This collaboration continues to be an important community investment and partnership for both CFC and CSA in order to create long-term, positive community outcomes.

Long-term outcomes of this investment would be: (1) families are strong and children are healthy from their early years to adulthood; (2) children are eager and ready learners; and (3) children live in safe, stable, and permanent homes.

While both organizations work in partnership, funding supplied by both organizations for contractors comes from different funding sources. As a result, both CFC and CSA have their own separate scope of services/service matrix deliverables associated with the Agreement. CSA and CFC funding will only support the specific scope of services identified with their individual organization's funding. CFC and CSA have separate cost pools for approved services/activities. All services/activities are to be delivered with a sensitivity to culture, race and equity.

This guidebook should serve as a tool for the funded FRCs in the areas of operations, invoicing and reporting. The guidebook contains definitions, examples of activities, and methodologies for tracking data. Information contained in this guidebook applies only to funding provided through the joint CSA/CFC FRC (also referred to as County within this document) initiative. Any data or information provided by the FRCs should only reflect activities directly supported by the funding initiative.

## **COLLABORATION MISSION STATEMENT**

FRCs provide support and strengthening services and activities to children and families in their neighborhood and communities.

## **COLLABORATION VISION STATEMENT**

Children and families are strong, thriving, and connected to their community.

## MANDATED CONTRACTUAL REPORTING

Stanislaus County Outcomes and Results Reporting Sheet (SCOARRS) and demographic data are non-duplicative. The services provided for a specific family should only be reported once per fiscal year. If a family receives multiple types of services (Case Management, Parent, Caregiver Provider Education etc.), the FRC should report each service provided to the family **once** per fiscal year the on the SCOARRS and demographic datasheet.

The Contractor/FRC shall report **quarterly** to CFC staff and CSA staff using SCOARRS, demographic datasheet, Program Statistical reports or other forms provided by CFC or CSA for: Promoting Safe and Stable Families (PSSF) and Child Abuse Prevention, Intervention, and Treatment (CAPIT) (as specified in the Agreement)

Contractor/FRC shall submit all **quarterly** forms (reports) referenced above according to the following schedule:

- Quarter 1 (July – September): Due October 31
- Quarter 2 (October – December): Due January 31
- Quarter 3 (January – March): Due April 30
- Quarter 4 (April – June): Due July 31

All **quarterly** forms (reports) or other reporting shall be sent to the following:

- CFC's approved electronic data system, Neighborly (or at CFC's discretion CFCReports@stancouty.com)
- [CSAReport@stancounty.com](mailto:CSAReport@stancounty.com)

Contractor/FRC shall submit data on a monthly basis associated with services and activities through a data reporting tool supplied by the funder(s). Contractor/FRC shall enter data into CFC's approved electronic data system, Neighborly. Contractor/FRC shall submit a Differential Response Client Data Sheet (DR Client Data Sheet) via email to [DRClientData@stancounty.com](mailto:DRClientData@stancounty.com). Reports are due once a month, according to the following schedule:

- Thirty (30) days after the end of the current month

Monthly data reports may be duplicative. FRC may report individuals/families who receive services each month they participant or engage with the site during the fiscal year. However, the count for each month should be non-duplicative. If a family receives multiple types of services (School Readiness, Parent, Caregiver Provider Education etc.), the FRC should report each service provided to the family **once** per month the on the report.

Contractor/FRC shall conduct a customer satisfaction survey during the **second and fourth quarters** of the Fiscal Year using the form provided.

1. FRC will compile and report survey results by January 31 (for Quarter 2) and July 31 (for Quarter 4).
2. Results shall be sent to the following:
  - CFC's approved electronic data system, Neighborly (or at CFC's discretion CFCReports@stancouty.com)
  - [CSAReport@stancounty.com](mailto:CSAReport@stancounty.com)

Contractor/FRC shall submit to CFC and CSA staff an **annual report** in the format provided by CFC or CSA. The annual report shall be submitted no later than August 5<sup>th</sup> to:

- CFC's approved electronic data system, Neighborly (or at CFC's discretion CFCReports@stancouty.com)

- [CSAReport@stancounty.com](mailto:CSAReport@stancounty.com)

Contractor/FRC shall develop and conduct an employee satisfaction survey **annually**.

1. Contractor/FRC shall compile and report the survey results in the program's annual report, due August 5<sup>th</sup>, as described in the Agreement.

## GENERAL TIME STUDY GUIDELINES

Definition/Activities

1. Trainings should be time studied to the cost pool it most represents.
2. All hours should be reflected on the time study and must be keyed to the nearest quarter hour.
3. Staff time providing childcare should be time studied to the appropriate cost pool. Time should be allocated based on the children attendance for each cost pool (e.g., if 75% of the children are DR referred then 75% of the staff time to the nearest quarter hour should be time studied to DR).
4. Hours not spent on the specific activities funded by this Agreement should be shown in the Non-FRC (Non – CFC/CSA FRC funded activities) line.
5. Paid time off hours including holiday, vacation, sick, paid time off should be shown on the Paid Time Off line on the time study.

## INVOICING

Invoices must be compliant with the terms of this Agreement. Invoice requirements are subject to change and the Contractor/FRC shall be notified in writing.

1. For services provided in the months of July 2022 through April 2023, Contractor shall submit invoices in the CFC/CSA specified format within twenty (20) days following the end of each service month. Invoice due dates for the service months of May 2023 and June 2023 will be emailed to Contractors in the month of April 2023.
2. Invoices shall be submitted to:

Stanislaus County Community Services Agency  
Attention: Accounts Payable Supervisor, E2A  
P.O. Box 42  
Modesto, CA 95353-0042

OR

[AccountsPayableTeam@stancounty.com](mailto:AccountsPayableTeam@stancounty.com)  
Accounts Payable Supervisor Phone: (209) 558-2217

3. Contractor/FRC shall submit invoices for accrued vacation and/or sick time cash-outs for a staff member who has separated from service as follows:
  - a. Vacation and/or sick time accrued/earned during the current Agreement period shall be reimbursed according to the allocation based on the employees' time (FTE%).

- b. Vacation and/or sick time accrual earned during the Agreement period, up to the employee's date of separation from service shall be reimbursed.
  - c. Reimbursement of vacation and/or sick time shall be at the separated employee's current hourly rate of pay.
  - d. Vacation and/or sick time accrued in any prior fiscal year outside of the current Agreement will not be reimbursed.
4. Each invoice shall include the following supporting documentation:
- a. Vendor shall submit their FRC Worksheet to CSA with their monthly invoice submittal;
  - b. Copies of signed or electronically approved employee time studies/time cards, EXHIBIT E, documenting actual time dedicated to these Agreement services;
  - c. Supporting payroll and fringe benefit journals;
  - d. Copies of paid receipts/invoices of all Contractor operational costs billed to this Agreement;
  - e. Any client supportive service shall include the participant's ID number and initials, the supportive service description, the date supportive service was given and the backup documentation; and
  - f. Any gift cards purchased shall include the participant's client full name, pre-approval backup documentation and shall adhere to the Auditor Controller's Incentive Gift Card policy as well as the Gift Card Guidelines policy of the Commission Policy & Procedure Manual (Section 509) for issuing incentives.
4. To ensure compliance with Federal and State regulations, CSA/CFC may require additional supporting documentation or clarification of claimed expenses.
- a. Contractor/FRC must respond within seventy-two (72) hours with required additional documentation or clarification to avoid disallowances/partial payment of invoice.
  - b. If additional documentation or clarification is not provided to CSA/CFC within seventy-two (72) hours of request, the affected invoices shall have those expenses disallowed. Only the allowed expenses will be paid on the invoice.
  - c. Contractor/FRC may resubmit disallowed expenses as a supplemental invoice only. Supporting documentation and clarification must accompany the supplemental invoice.

Unallowable expenses include, but are not limited to:

- Alcoholic Beverages
- Tobacco products
- Firearms
- Purchase of motor vehicles
- Purchase of property
- Late Fees/Finance Charges (i.e. credit card late fees)
- Fees for missed conferences or trainings
- Costs associated with fundraisers
- Food/refreshments for staff meetings
- Items requiring pre-approval by CSA/CFC that have not been pre-approved (e.g. food, gift card, inventory items, out of county travel)
- Expenditures for Contractor staff including, but not limited to, stipends, bonuses, gift cards, food, or breakroom materials.

This list is meant as a guideline for types of expenses that cannot be budgeted for or expended using County funds, unless specific program requirements are indicated, and prior approval has been

obtained. Without prior approval, these types of expenses will be disallowed. This list is not all-inclusive.

Contractor/FRC must submit a Cost Allocation Plan with supporting documentation to the County for each site included in the scope of work in the Agreement prior to the start of the Agreement period.

Changes in contact information for the Contractor must be submitted to County staff within seven (7) business days.

The County reserves the right to withhold payment of an invoice for reimbursement for non-compliance with the requirements of the Agreement.

## **COMPENSATION**

Contractor/FRC will be compensated for the services and activities provided under this Agreement as follows:

1. There are multiple funding sources for this agreement as listed below:
  - a) CSA funding can only be used for services and activities as defined in this Guidebook in the Community Services Agency Services and Activities and Joint Services and Activities sections for children 0-17 years of age and their families.
  - b) CFC funding can only be used for services and activities as defined in this Guidebook in the Children and Families Commission Services and Activities and Joint Services and Activities sections for children 0-5 years of age and their families.
  - c) A service matrix listing all services allowed by each funding type is available as a reference at the end of the Guidebook.
2. This is a cost reimbursement Agreement. The costs reimbursed for the services and activities must be included in the approved Agreement Budget. Contractor will not be reimbursed for costs not authorized in approved Agreement Budget or approved Budget Revision. Costs cannot exceed authorized Agreement amounts.
3. Contractor shall not expend any funds provided pursuant to this Agreement except as expressly authorized in their approved Budget or as the budget is thereafter amended or obligated.

Contractor/FRC's are not allowed to collect a share of cost and/or charge for services provided to recipients.

Costs must comply with Federal grant reform and uniform guidance in Title 2, Code of Federal Regulation (CFR) Part 200 – Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards. All equipment purchased by Contractor must be depreciated in accordance with 45 CFR 95.705. Contractor agrees that the costs charged to County for the contracted services for the term of this Agreement only include allowable costs, both indirect and direct, relative to the services in this Agreement.

County shall not be required to purchase any definite amount of services nor does County guarantee to Contractor any minimum amount of funds or hours.

Any equipment, materials, supplies, or property of any kind purchased for or reimbursed from funds provided under this Agreement, excepting any funds received for indirect expense pursuant to the budget document attached as EXHIBIT C, having useful life of three (3) years or greater, and a value in excess of Five Hundred Dollars (\$500.00) shall be defined as an inventory item. All inventory items not fully consumed in the services and activities under the Agreement will be the property of the County at the termination of the Agreement unless the County, at its sole discretion, makes an alternative disposition. Contractor will annually prepare a written report of all inventory items and submit the report to the County. Contractor will also file an inventory report with the County within ten (10) days after termination this Agreement. Final disposition of all inventory items shall be in accordance with written instructions from the County. Contractor is responsible for proper maintenance of inventory items and is responsible for all damage except for normal wear and tear.

## **PAYMENT**

County will pay the sum of money claimed by the approved invoice, (less any credit due County for adjustments of prior invoices) on or before the thirtieth (30th) day after receipt of the invoice. If the required invoice conditions are not met, County will pay when the necessary processing is completed and/or proper backup documentation is provided.

County will not pay for unauthorized services rendered by Contractor or for the claimed services which County monitoring shows have not been provided as authorized.

Contractor must have thirty (30) days prior approval for client support services purchases. The request should be submitted to CFC's and CSA's Program Managers via email. The approval must be submitted with any applicable invoice along with the participant's ID number and initials, the supportive service description and any other backup documentation. If 30-day notice is not obtained due to extenuating circumstances, a request may be submitted with as much notice as possible and will be considered by CFC's and CSA's Program Managers.

Contractor must have thirty (30) days prior approval for gift card purchases if not already include in the FRC's budget narrative. The request should be submitted to CFC's and CSA's Program Managers via email. The approval must be submitted with any applicable invoice. If 30-day notice is not obtained due to extenuating circumstances, a request may be submitted with as much notice as possible and will be considered by CFC's and CSA's Program Managers. Gift card purchases must adhere to the Gift Card Guidelines policy of the Commission Policy & Procedure Manual (Section 509).

Contractor shall be reimbursed for travel costs, including transportation, lodging and meals, provided CSA/CFC has agreed in writing to reimburse the Contractor for such costs. Any reimbursement for travel costs shall be subject to and not exceed those amounts allowable under the current Stanislaus County Travel Policy. The established mileage rate, maintained by the Stanislaus County Auditor-Controller's Office, may be adjusted annually based on the Internal Revenue Service (IRS) stated rate for that year. Incremental IRS rate increases are not automatic.

NOTE: Contractor must have out of county travel approved thirty (30) days prior to travel. The request should be submitted to CFC's and CSA's Program Managers via email. The approval must be submitted with any applicable invoice. If 30-day notice is not obtained due to extenuating circumstances, a request may be submitted with as much notice as possible and will be considered by CFC's and CSA's Program Managers.

County retains the right to withhold payment on disputed claims.



Final payment under Agreement may be held until a termination audit is completed or until receipt of Contractor's annual narrative report.

## **BUDGET**

### **Policy**

Expenditures made by Contractors must comply with Federal, State, and local laws and policies; adhere to the agreed upon contractual terms; and demonstrate good stewardship of public resources.

### **Procedure - CFC Funding**

Expenditures will be reimbursed for only those services, supplies, and materials that directly benefit the health and well-being of children 0 through 5 years of age. It is acknowledged that some services provided to other family members in families with children 0 through 5 will have a benefit to the child (Parent, Caregiver, Provider Education, Resource and Referral, Developmental Screening, Outreach and Community Events, etc.).

Expenditures made by Contractors must comply with the scope of work and budget in the Agreement. Budget categories may include, but are not limited to: salaries and benefits, services and supplies, and inventory items.

To incentivize program participants or volunteers, the CFC prefers that Contractors provide materials or supplies that are targeted to children 0 - 5 (books, educational materials, infant/toddler care supplies, learning games, etc.). The use of stipends or gift cards may be used as an incentive for program participants or volunteers only if specified in the Contractor's approved scope of work and budget.

The CFC and its contractors must be ever vigilant regarding their obligations and responsibilities to be good stewards of the public funds entrusted to them. Providing food and non-alcoholic beverage items at meetings and events is an especially sensitive subject and such items should be provided only in very limited and occasional circumstances. Alcoholic beverages cannot be purchased with public funds under any circumstances. Food or beverage items may be invoiced as an allowable expenditure when:

- ❑ There is prior approval from the CFC
- ❑ The activity is listed in the budget/budget narrative
- ❑ Special approval has been given from the CFC if activity is not listed in the budget/budget narrative
- ❑ The meeting targets community members, the public, and/or employees of other agencies (e.g., education or training session). An agenda or event flier and an attendance sheet or list of meeting attendees must accompany the invoice for reimbursement. The CFC reserves the right to request additional documentation as needed
- ❑ The items purchased contain predominately healthy choices: fruits, vegetables, water, juices, unsweetened drinks, etc.
- ❑ The items are utilized as an inducement to increase meeting attendance.
- ❑ The items are related to an extended training session (e.g., a lunch meal as a part of an all-day training session).
- ❑ The items are integral to the service being provided (e.g., nutrition education or obesity prevention).
- ❑ Practicality, convenience, and efficiency dictate the need for such items (e.g., meetings of extended length or meetings held at sites where access to such items is not readily available).

Food and beverage purchases for regular and recurring program activities may be purchased only if listed in the budget and/or budget narrative or Agreement's scope of work. All other food and beverage purchases must be submitted on *Program Food and Beverage Authorization Form* and approved by CFC staff prior to the purchase.

Should the Contractor submit food claims that are determined by CFC staff to be excessive or not demonstrating good stewardship of public resources, a written notification may be delivered to the Contractor specifying which food purchases shall not be reimbursed to the contracting agency by the CFC.

As a general rule, food and non-alcoholic beverage items should not be supplied for the exclusive use of Contractor's staff. The CFC shall accept such items on Contractor invoices only when it can be demonstrated the items are associated with extended training or with a meeting over a meal period that could not reasonably be scheduled for another time. Attendance sheets and agendas shall be included as supporting documentation of the need for such expenditures.

### **Funds for Fixed Assets and Capital Improvements**

State CFC funds cannot be used for the acquisition or purchase of fixed or capital assets. County CFC funds may be utilized, in very limited circumstances, to fund construction or reconstruction projects that provide services or benefits to children ages 0 through 5. All such capital improvement requests received by the Stanislaus County CFC shall be reviewed based on the criteria set forth below.

- A. Capital improvement projects are defined as new construction or reconstruction projects.
  1. All capital improvement project proposals must be considered by one or more CFC Committees prior to being referred to the full CFC for consideration.
  2. Capital improvement proposals must be evaluated according to criteria that includes, but is not limited to, the following:
    - a. The useful life of the improvement
    - b. The use of the improvement
    - c. The CFC's ability to secure its investment
    - d. The amount requested
    - e. The length of time the improvement will be specifically dedicated for Proposition 10 purposes
    - f. The ability of the improvement to be used by non-targeted groups
    - g. The amount of funds leveraged with Proposition 10 funds
    - h. The services or programs for children 0-5 years of age enhanced by the improvement
    - i. The length of time the applicant has been in business
    - j. The administrative and fiscal capacity and capability of the applicant
    - k. The reasonableness and appropriateness of the project budget
    - l. The location and accessibility of the proposed improvement

Agreements providing funding for any capital improvement project must be approved by the CFC's Counsel.

### **Agreement Budgets and Budget Revision by Contractors**

CSA/CFC require Contractor/FRC to establish, at the time the Agreement is signed, an estimated expenditure budget for the Agreement. Contractor/FRC is responsible for management and monitoring of monthly expenses and budget to avoid overspending. Expenditures made by Contractors are not to exceed 20% of any line item and are not to exceed the subtotal in the

Personnel, Services, or Fixed Assets categories without a budget revision being submitted and approved by CSA and CFC.

## **Procedure**

Prior to the Agreement start date, the Contractor shall provide the following budget documents to the CSA/CFC for review and approval:

- ❑ Fiscal Year Budget form – annual line item budget
- ❑ Budget Narrative - describe and substantiate the line item budget amounts

Budget revisions initiated by the Contractor/FRC are to be submitted in advance of the proposed change by submitting a Budget Revision Form and a Budget Narrative Form. CSA/CFC may choose not to reimburse expenses incurred prior to the approval of a submitted budget revision request. Budget revision requests may be submitted at any time between July and March 1<sup>st</sup> of the fiscal year.

**Revisions may not be submitted after the March 1<sup>st</sup> deadline.**

Budget revisions should be used with great discretion on the part of a Contractor/FRC. A maximum contract amount should not be viewed as the Contractor/FRC money, but rather as CSA/CFC funding approved to accomplish the goals of the budget plan that was approved. A budget plan is created for each Agreement and approved before the Agreement begins. This budget plan is the approved spending roadmap in order to achieve CSA/CFC priorities. If a Contractor is not expending funds in specific budget categories according to the plan, there should be no expectation by the Contractor/FRC to be entitled to maximum funding of the Agreement. Examples of funding for budget revisions that will not be approved by CSA/CFC, and should not be submitted, include:

- ❑ Stocking up on supplies that are outside the scope or budget plan
- ❑ Purchasing for a different fiscal year
- ❑ The intention to expend unused funds to avoid “losing” the funding

Approval by CSA and CFC is required for any budget revision proposed by a Contractor that:

- ❑ Increases or decreases a line item by more than 20%
- ❑ Increases or decreases the subtotal of the Personnel, Services, or Fixed Asset categories

The CSA and CFC may approve Agreement budget revisions, so long as:

- ❑ The planned expenditures in the budget revision are consistent with the contractual scope of work
- ❑ The budget revision does not materially change the scope, size, capacity, or direction of the program
- ❑ The budget revision does not increase the total value of the Agreement

Budget revisions shall be submitted to the following email address: [CSA-Contracts@stancounty.com](mailto:CSA-Contracts@stancounty.com)

Once the proposed budget is received, both CSA and CFC will review the request. Staff from either agency may reach out for questions regarding their funding or program SOW. Once both CSA and CFC have approved the request the Contractor will receive an approval memo for their records.

## **USE OF CHILDREN AND FAMILIES COMMISSION (CFC) / FIRST 5 LOGO**

### **Policy**

Contractors and partnering organizations are required to use the CFC’s name and logo on all printed materials, promotional information, products, etc., that are funded by the CFC. The purpose of this

policy is to stipulate guidelines for the use of the CFC's name and official logo on documents and publications produced by CFC grantees and partnering organizations.

## **Procedure**

CFC contractors/partners must adhere to the following:

- ❑ Contractors and partnering organizations will use the CFC logo on printed materials, promotional information, products, etc., and must receive prior approval from the CFC's Executive Director or designee prior to the final printing or production of the product.
- ❑ Organizations that use the CFC logo are required to submit samples of the final product to the CFC for their information and potential use.
- ❑ The following language, or something very similar, is to be included on all printed materials, promotional information, products, etc., which are funded by the CFC:
  - "This program is made possible by a grant from First 5 Stanislaus."
  - "This program is made available through a grant from First 5 Stanislaus."
  - "This program is made available through a partnership with First 5 Stanislaus."

## **ADMINISTRATION**

Administration refers to non-direct hours spent on complying with the CFC/CSA Agreement.

Examples of administration activities include:

- ❑ attending meetings not associated with a specific cost pool (Differential Response, AfterCare, CFC)
- ❑ non-Agreement related supervision of staff
- ❑ time compiling invoices
- ❑ data collection and tracking (if not easily associated with a specific cost pool)
- ❑ time reviewing and approving staff time studies
- ❑ time completing reporting requirements associated with the Agreement

Time spent supervising, training or assisting FRC staff associated with a specific cost pool (DR, AC, CFC) should be allocated to that cost pool on the supervisor's and support staff's time study.

## **JOINT FUNDED SERVICES AND ACTIVITIES**

### **Parent, Caregiver, Provider Education**

Parent, caregiver, and provider education refers to services focused on enhancing parenting practices and behaviors, such as developing and practicing positive discipline techniques, learning age-appropriate child development skills and milestones (specifically ready for Kindergarten), promoting positive play and interaction between parents and children, and locating and accessing community services and support. (From the Child Welfare Information Gateway).

Activities offered through parent education programs at the FRCs may include: structured, curriculum-based parenting programs or group support for parents. *Parent education is not an unstructured one-on-one time with a parent on a specific topic or crisis. This would be considered case management.*

### **Criteria for Activities/Services:**

#### **Staffing**

- Staff are trained and certified in curricula and able to facilitate a diverse group of participants
- Staff are provided training and supervision to maintain fidelity to the curriculum

## Space and Other Logistics

- FRCs provide a mix of virtual and in person classes with opportunities for participant interaction
- FRCs are culturally responsive to the population they serve
- Materials and staffing are reflective of the community served and offered in a variety of languages

## Quality

- Parents have an opportunity to practice what they have learned
- The curriculum is designed for the appropriate target audience
- Classes provide a support system and learning through parent-caregiver/child interaction
- CFC emphasis on prenatal through year one education

## Process

- Classes for 0-5 and 6-17
- List objectives for CFC and for Child Welfare families
- Fidelity and linkage to possible programs such as:
  - Nurturing Parenting Program
  - Abriendo Puertas
  - PlanetBaby! - Prenatal through Age One Program
  - Parent Café
- Two full cycles a year or 30 weeks of parenting classes
- Pre/posttest – 80% increase skills
- Creative Curriculum (0-5: also listed in Parent, caregiver, child literacy)
  - 3-4 cycles/year
  - 12-15 classes per cycle
- Ages 6-17: 12-15 classes per session (CSA)
- Explore Parents as Teachers for 6-17 age group (CSA)

## Tracking:

Time studies: Staff time studies should be conducted on a daily basis. Staff time including preparation, clean up, and facilitation of parent education activities should be time studied to differential response (DR), AfterCare (AC), or CFC funded activities (CFC). Time should be allocated based on the class attendance for each cost pool (e.g., if 50% of the class are CFC clients then 50% of the staff time to the nearest quarter hour should be time studied to CFC. The subcontractor should time study to the appropriate cost pool that represents the clients in attendance. Additionally, if the center is subcontracting for parent education, subcontracted staff time should only be time studied to DR, AC, or CFC for direct involvement in developing the parent education program. Coordination and supervision of parent education activities should be time studied to DR, AC, or CFC.

Case counts: Case counts for parent education should be provided for the number of children associated with parents participating in parent education activities under DR or AC who are not reported as case managed. Families should only be counted one time per month. Case counts are not required for CFC funded activities.

Example: A parent attends a 12-week parenting class. The parent has 4 children (ages 7, 6, 5, 2). The case counts for the month would be 4 (if the class spanned across several months there would be 4 case counts for each month the class occurred).

SCOARRS (Scorecards): Services should be reported for each child whose caregiver participated in the class (in the CFC section, track FRC children and caregivers). In the section for CSA, please track only DR and AC referred caregivers and their children.

Example: A caregiver attends an 8-week long class that crosses over 2 quarters. The caregiver would be counted 1 time only. If the caregiver is FRC and has a 2, 5, 6, and 7-year old, the scorecard count would be 2 for the children (the 2 and 5 year-old) and 1 for the caregiver and it would only be accounted for in the CFC/First 5 section.

Example: If the caregiver has a 5, 7, and 10 year-old, and is DR referred, the scorecard count would be split between the 0-5 section (1 count) and the 6-17 section (2 counts) for the children. The caregiver would be counted 1 time in the CSA section.

## **Resource and Referral**

FRCs will regularly make referrals to connect families to community resources, services, supports, and other FRC funded services.

### **Criteria for Activities/Services:**

#### Staffing

- Staff are educated and informed about available resources and providers

#### Logistics

- Resources are offered in person and by phone
- Services will be provided in languages appropriate to families

#### Cultural Responsiveness

- Staff will have broad knowledge of local services/resources

#### Quality

- Families are connected to all public programs for which they are eligible
- FRCs connect people to private and nonprofit resources and programs as appropriate
- FRCs are intentional about utilizing resources and referrals to build protective factors

#### Process

- Resource and Referrals
  - Mental health
  - Counseling
  - Financial stability
  - Childcare
  - After-school programming
  - Other public and private sources

### **Tracking:**

Time Studies: Staff time studies should be completed on a daily basis. Staff providing resource and referral activities as described above for differential response (DR) or AfterCare (AC) should record his/her time under differential response (DR) or AfterCare (AC) if the client was referred by Child Welfare. Staff providing resource and referral activities as described for non-Child Welfare clients with children ages 0-5 only should be recorded under CFC funded activities.

Case Counts: Case counts for providing resource and referral activities for DR or AC referred clients should be counted under differential response (DR) or AfterCare (AC). Case counts for providing resource and referral activities for non-Child Welfare clients with children ages 0-5 are not required for CFC funded activities (CFC). Counts should be provided for each child in the family, not the number of adults. Additionally, each family should only be counted once per month. Case counts should not be provided for administration of an intake form.

Example: A family of five referred by Child Welfare (Father, mother, child (12), child (6), child (2)) attends a class. The number of case counts would be 3, recorded under DR or AC.

## **Developmental Screening**

FRCs will provide Ages and Stages-3 (ASQ-3) developmental screenings for children and train families to administer developmental screenings.

### **Criteria for activities/services:**

#### Staffing

- Staff are trained to conduct screenings
- Staff are able to train parents and caregivers to conduct screenings

#### Logistics

- Screenings are available as needed for specific programming

#### Quality

- Screenings increase knowledge of child development and help to improve parent/caregiver child relationship

#### Process

- Developmental Screenings
  - ASQ-3 is used to screen children for identification of developmental delays
  - Train families to perform screenings (ASQ-3)
  - Provide referrals for children whose scores indicate a need for early intervention or support services as a result of screening

### **Tracking:**

Time Studies: Staff time studies should be completed on a daily basis. Staff providing a developmental screening or training families to complete a developmental screening as described above should record his/her time under differential response (DR) or AfterCare (AC) if the client was referred by Child Welfare. Time spent on developmental screening or training families to complete a developmental screening as described above for non-Child Welfare clients with children ages 0-5 only should be recorded under CFC funded activities (CFC)

Case Counts: Case counts for developmental screening or training families to complete a developmental screening as described above should be counted under differential response (DR) or AfterCare (AC). Case counts for developmental screening or training families to complete a developmental screening as described above for non-Child Welfare clients with children ages 0-5 are not required for CFC funded activities (CFC). Counts should be provided for each child in the family, not the number of adults. Additionally, each family should only be counted once per month. Case counts should not be provided for administration of an intake form.

Example: A family of five referred by Child Welfare (Father, mother, child (12), child (6), child (2)) attends a class. The number of case counts would be 3, recorded under DR or AC.

SCOARRS (Scorecards): Services should be reported for each child who received a developmental screening or whose family participated in training related to screening. In the section for CSA, please track only DR and AC referred caregivers and their children. In the CFC/First 5 section, track FRC children and caregivers).

## **CHILDREN AND FAMILIES COMMISSION (CFC) FUNDED SERVICES AND ACTIVITIES**

### **Outreach and Community Events**

A Community Event is an event held by the resource center for current families or the larger community as an opportunity to engage with resource center staff and each other. Community events may be held for a specific purpose such as a healthy fair, back-to-school occasion, holiday celebration, block-party, etc. Outreach may be a by-product of the event but is not the sole purpose/goal.

Outreach refers to proactive efforts to invite and encourage families to participate in FRC programs and activities and participate in the Family Network. This may include a variety of strategies intended to expand the reach of FRCs for education and information dissemination, and to connect people to the Family Network for children ages 0-5. Outreach may be an activity/event held by the FRC or be an event FRC staff attend hosted by another community partner.

### **Criteria for activities/services:**

#### Staffing

- Local events: understanding of local community
- Peer mentors
- Promotoras
- Family Network: staff possess relevant experience or background
- Cultivation of Community Partners
- Partnerships with professional and community organizations that are focused on the well-being of children and families

#### Space and Logistics

- A mix of virtual and in person events (as interest and health guidelines permit)
- Expanded outreach including school events, farmers' markets, health fairs, site events, local community events and others
- Materials and staffing are reflective of the community served and in a variety of languages  
Activities should embody diversity and reflect the community served

#### Quality

- Outreach and community events planned with specific goals in mind (increase participation, reach specific target group, visibility, parent education, build relational connections, community building, etc.)  
Staff encourage development of Protective Factors and Promote Protective Factors
- Adhere to evaluation, tracking timelines and agreements
- Ensure that a cross sector of organizations is reflected in partnerships (health, recreation, business, arts, etc.)
- Offer a variety of supports
  - Tangible – books,



- Social – opportunities to network, meet & greet;
- Informational – tips, posters, resource listings; and social media
- Interactive Learning – hands-on activities
- Family Network to create virtual neighborhoods beyond FRC for:
  - Parent mentor program
  - Parent cafes
  - Parent education

#### Process

- Provide a minimum of four community events per year
- Provide a minimum of three outreach events per year, at least one promoting Talk, Read, Sing
- Contribute to a master event calendar to coordinate and track outreach efforts across FRCs with CFC
- Staff at outreach events will represent the entire FRC Network and Family Network\*
- Staff will encourage families to opt-in to the Family Network
- Develop community partners to assist with the coordination of community and outreach events

*\*Family Network is a pilot program to expand the reach for parent engagement opportunities to increase the number of families reached in the community. The emphasis is to engage new families. Additional process criteria may develop as the program progresses.*

#### **Tracking:**

Time Studies: Staff time studies should be completed on a daily basis. Staff time spent on planning and providing outreach and community events as described above for non-Child Welfare clients with children ages 0-5 only should be recorded under CFC funded activities (CFC). **This activity is not allowable under CSA funding.**

Case Counts: Case counts for participants of outreach and community events as described above for non-Child Welfare clients with children ages 0-5 are not required for CFC funded activities (CFC).

SCOARRS (Scorecards): Each parent/caregiver for children 0-5 who attends outreach and community events should be recorded on the scorecards. Each parent/caregiver for children 0-5 opting into the Family Network should be recorded on the scorecards.

#### **Advocacy and Parent Leadership Training**

Families are supported to build and strengthen the skills to advocate for themselves and their children in a variety of situations.

Activities offered would support parents/caregivers to:

- Navigate the school environment to increase school success
- Interact with medical and mental health professionals
- Become leaders within their families, and
- Become advocates within and for their communities.

#### **Criteria for activities/services:**

##### Staffing

- Staff possess relevant degree or background to provide services
- FRCs could utilize peer mentors and Promotoras as support for parents in the program
- Train the trainer (train parents/caregivers who train others)

## Space and Other Logistics

- Provide a mix of virtual and in person events
- Offer flexible meeting times

## Cultural Responsiveness

- Materials and staffing are reflective of the community served and in a variety of languages
- Activities embody diversity and reflect the community served; all are welcome

## Quality

- Staff encourage development of Protective Factors
- Race and equity-informed content
- Targeted to communities of color
- Adhere to evaluation, tracking timelines and agreements

## Focus advocacy capacity building to support parents/caregivers to:

- Navigate the school environment to increase school success
- Interact with medical and mental health professionals
- Become leaders with their families
- Become advocates with and for their community

## Process

- Advocacy skills training may be included in parent education, workshops or through connection with other parents and caregivers
- Delivered in-person and virtual settings

*\*Advocacy and Parent Leadership is a pilot program to expand parents' and caregivers' ability to advocate for themselves and their children. The emphasis is to build and strengthen their skills. Additional process criteria may develop as the program progresses.*

## **Tracking:**

*Time Studies:* Staff time studies should be completed on a daily basis. Staff time spent on planning and providing advocacy and parent leadership activities as described above for non-Child Welfare referred children ages 0-5 only should be recorded under CFC funded activities (CFC) FRC. **This activity is not allowable under CSA funding.**

*Case Counts:* Case counts for participants' advocacy and parent leadership activities as described above for non-Child Welfare clients with children ages 0-5 are not required for CFC funded activities (CFC).

*SCOARRS (Scorecards):* Each parent/caregiver for children 0-5 participating in advocacy and parent leadership activities should be recorded on the scorecards.

## **Workshops and Classes**

Workshops and classes build knowledge and skills to enrich people's lives, promote optimal child and youth development, and strengthen families. These are interactive events and lead to strong social connections and a stable support system of family and friends. (FRCs, Vehicles for Change, volume 2)

Examples of workshop/class topics include: financial basics, relationship communication, leadership basics, personal and family advocacy, and home organizing for child safety. Ideally, FRCs should

outreach beyond their local neighborhood, utilize guest speakers, and employ virtual delivery for larger group size.

### **Criteria for activities/services:**

#### Staffing

- Staff possess background and/or experience related to the topic they are offering
- Shared training by variety of FRC staff
- Partner organizations are invited to deliver trainings (i.e., schools, library, other community resource)

#### Space and Other Logistics

- Offer flexible meeting times
- Provide a mix of virtual and in person events
- Workshops and classes are added to a shared calendar across FRCs
- Topics are responsive to the needs and interests of participants

#### Cultural Responsiveness

- Materials and staffing are reflective of the community served and offered in a variety of languages

#### Quality

- Workshops and classes promote the Five Protective Factors
- They are interactive and provide opportunities for participants to learn from one another
- Build on and partner with current classes/activities
- Collaborate with FRCs and Frist 5 to organize classes for multiple agency participants

#### Process

- Emphasis on virtual format for larger groups
- Utilize guest speakers
- Outreach beyond local neighborhood
- Suggested Topics
  - Financial Basics
  - Relationship Communication
  - Home organizing for child safety
  - How to be more patient
  - Talk, Read, Sing
  - How to Read a Book Like a Pro
  - Personal and Family Advocacy
  - Leadership Basics
  - Interesting, consumer-focused subjects that resonate with the public
  - Additional subjects as appropriate

### **Tracking:**

***Time Studies:*** Staff time studies should be completed on a daily basis. Staff time spent on planning and providing workshop and class activities as described above for non-Child Welfare referred children ages 0-5 only should be recorded under CFC funded activities (CFC). **This activity is not allowable under CSA funding.**

***Case Counts:*** Case counts for planning and providing workshop and class activities as described above for non-Child Welfare clients with children ages 0-5 are not required for CFC funded activities (CFC).

SCOARRS (Scorecards): Each parent/caregiver for children 0-5 participating in workshop and class activities should be recorded on the scorecards.

### **Family, Friends, and Neighbor Early Learning Education**

FRCs will identify their participants that are Family, Friend, and Neighbor (FFN) childcare providers and implement strategies to increase quality in childcare provision.

#### **Criteria for activities/services:**

##### Staffing

- Staff are trained in Early Care and Education (ECE) quality activities and techniques through IMPACT partnership

##### Space and Other Logistics

- Provide a mix of virtual and in person activities at the FRCs
- Offer flexible scheduling to accommodate providers' work schedule
- Offer possible alternate training locations with partner organizations (libraries, other agencies)

##### Cultural Responsiveness

- Reflective of the community served and offered in a variety of languages
- Recognition that caregivers are by definition unlicensed

##### Quality

- Conducted with dignity and respect
- Staff connection to the IMPACT 2020 program for coaching and support
- Meeting caregivers and children where they gather in the community

##### Process

- Begin by identifying FFN caregivers currently within the FRC
- Staff to train FFN caregivers within the FRC
- Refer FFN caregivers to Stanislaus County Office of Education Resource and Referral Program
- Staff to provide targeted training at local libraries and alternative settings for implementation

#### **Tracking:**

Time Studies: Staff time studies should be completed on a daily basis. Staff time spent for Family, Friends, and Neighbor early education as described above for non-Child Welfare referred children ages 0-5 only should be recorded under CFC funded activities (CFC). **This activity is not allowable under CSA funding.**

Case Counts: Case counts for Family, Friends, and Neighbor early education as described above for non-Child Welfare clients with children ages 0-5 are not required for under CFC funded activities (CFC).

SCOARRS (Scorecards): Each caregiver/provider participating in the Family, Friends, and Neighbor training should be recorded on the scorecards.

### **Parent, Caregiver and Child Literacy**

FRCs provide children with evidence-based, developmentally appropriate programs that support active learning and promotes progress in all developmental areas; parents/caregivers are connected

to resources for age-appropriate books and educated to support their children to meet physical, social/emotional, and cognitive development and early literacy.

### **Criteria for activities/services:**

#### Staffing

- Staff are certified in evidence-based training curricula
- Knowledge of age-appropriate experiences for parents/caregivers and children
- Knowledge of Talk, Read, Sing

#### Space & Other Logistics

- Center location for take-home resources and book distribution
- Pop-up or curbside for neighborhood distribution
- Virtual or in person classes for training
- Social media distribution

#### Cultural Responsiveness

- Reflective of the community served and in a variety of languages

#### Quality

- Conducted with dignity and respect
- Staff trainers are provided training and supervision
- Books and other materials are age appropriate, distributed equitably, and in a variety of languages that reflect the needs of community
- Talk, Read, Sing delivered in partnership with CFC

#### Process

- Creative Curriculum offered three to four times a year for children 0-5; A cycle consists of 12 classes (also listed in Parent Education)
- Talk, Read, Sing education
- Talk, Read, Sing promotions and media blasts
- Virtual Storytime offered at least once a month
- Book distribution (should be tied to a literacy program)

### **Tracking:**

*Time Studies:* Staff time studies should be completed on a daily basis. Staff time spent on parent caregiver child literacy as described above for non-Child Welfare referred children ages 0-5 only should be recorded under CFC funded activities (CFC). **This activity is not allowable under CSA funding.**

*Case Counts:* Case counts for participants receiving parent caregiver child literacy as described above for non-Child Welfare clients with children ages 0-5 are not required for CFC funded activities (CFC).

*SCOARRS (Scorecards):* Each child participating in parent, caregiver and child literacy activities should be recorded on the scorecards.

# COMMUNITY SERVICES AGENCY (CSA) FUNDED SERVICES AND ACTIVITIES

## Differential Response

Differential Response services are provided in all geographic regions of Stanislaus County including those areas that are geographically isolated. This model provides for 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. These activities are accomplished through the use of strength-based assessment, case management, parent education, and links to health care providers. Services are targeted to children at risk of abuse or neglect.

## **Criteria for activities/services:**

### Staffing

- ER Social Worker
- Intake Social Worker
- FRC designated staff member
- Members of the Differential Response Multidisciplinary Team will complete a minimum of the following training:
  - Mandated Reporter Training
  - Identification of Child Abuse and Neglect
  - Confidentiality
  - Strength-based Assessment
- The multidisciplinary team meets on a regular basis to:
  - Staff Cases
  - Obtain current DR information
- Staff are able to engage families who have trauma history
- Staff partner with families to help them achieve their self-identified goals

### Space & Other Logistics

- Path 1: FRC staff conducts home visit
- Path 2: Social Worker and FRC staff conduct home visit
- Path 3: ER Social Worker investigates and determines if FRC response is appropriate
- Staff will meet the families in their home
- Engagement with family should not be limited to traditional business hours (9-5)

### Cultural Responsiveness

- Reflective of the community served and in a variety of languages
- FRC staff trained to respond appropriately to different levels of DR families
- Service delivery that embraces diversity
- Staff will have broad knowledge of parent/youth population and multi-generational families such as understanding of barriers to engagement
- Staff will have broad knowledge of local services/resources

### Quality

- FRCs meet expectations described in the most current FRC Guidebook. This includes specifications for tracking and reporting for DR.
- FRCs utilize the Ages and Stages for developmental screening 0-3
- FRCs conduct time studies as specified in the current FRC Guidebook
- FRCs keep case counts and score cards as specified in the current FRC Guidebook
- Multidisciplinary Team (MDT) meetings:

- Held twice per month
- Required for individuals contacting families for Differential Response
- Periodic discussion and case presentation about families served by Differential Response
- Discuss, brainstorm and problem solve challenging cases
- Improve our Differential Response process by making suggestions, sharing ideas, etc.
- Staff will respond to referral within three (3) days of receipt not including weekends or holidays

#### Process

- Strengthening family assessment with protective factors incorporated to engage families/youth
- Strengthening family's assessment should be on the first visit but no later than two weeks of first contact

#### **Path 1: FRC staff conducts home visit**

##### FRCs will

- Receive the fax
- Assign the family to the designated staff member
- Visit the family to assess for and offer services
- Complete strength-based assessment

#### **Path 2: Social Worker and FRC staff conduct home visit**

##### Child & Family Services (CFS) Response:

- The assigned ER Social Worker will:
  - Determine if referral is Path 2
  - Contact the FRC by telephone within 2-3 days of receiving to discuss the Path 2 referral
  - The Social Worker and the FRC will schedule a joint visit with the parent(s) or determine the best approach
  - Make face to face contact with each other prior to meeting the family
  - Update the PDT with current concerns and write a brief narrative if necessary

##### FRC will:

- Receive the fax.
- Visit the family to assess for and offer services.
- Complete strength-based assessment

#### **Path 3: ER Social Worker investigates and determines if FRC response is appropriate**

##### CFS Response:

- Referrals with medium-high risk factors and safety concerns
- The assigned ER Social Worker will:
  - Investigate the referral.
  - If ER Social Worker determines FRC services would be appropriate and the family lives in an area served by an FRC:
    - Contact the FRC to schedule a home visit and discuss the family's needs.
    - Update the PDT with current concerns and write a brief narrative if necessary.

#### **The following applies to all Path types:**

FRC will:

- Receive the fax
- Visit the family to assess for and offer services
- Complete strength-based assessment

FRCs will document:

- Date referred on the Child & Family Services referral form.
- Referral Name as indicated on the Referral form (this is the birth mother or adoptive mother's name, even if she does not reside in the home).
- Child(ren)'s name(s)
- Child(ren)'s Date of Birth
- Date Assessed
- Each month the family is case managed.
- Report any reasonable suspicion of child abuse and/or neglect to the Child & Family Services Hotline at: 1 (800) 558-3665

### **Tracking:**

Time studies: Time studies should be completed on a daily basis by staff. Staff administering differential response activities (including initiating contact or attending home visits) and attending Multi-Disciplinary Team (MDT) meetings should count his/her time under DR. **This activity is not allowable under CFC funding.**

Case counts: A family may be counted under the differential response category (case counts, time studies) once contact with the family is attempted. Counts should reflect the number of children associated with the family, and each family should only be counted one time each month. The charge should be made to DR if referred by Child Welfare.

SCOARRS (Scorecards): A family may be reported under the differential response category once contact with the family is attempted. Each child associated with the family should be reported under the appropriate category based on their age (0-5, 6-17) and each family should only be reported once per DR referral.

### **AfterCare**

The AfterCare referral process was developed to provide support and services to those families who have successfully reunified or completed their Family Maintenance or Family Reunification case. With that additional support, after the Child Welfare case is closed, the goal is to prevent the family from feeling isolated in the community and falling back into the behaviors that first brought them to the attention of child welfare. With those on-going services and support the family can thrive, and be healthy, productive members of their communities

### **Criteria for activities/services:**

Staffing

- Social worker and FRC staff
- Members of the Differential Response Multidisciplinary Team will complete a minimum of the following training:
  - Mandated Reporter Training
  - Identification of Child Abuse and Neglect
  - Confidentiality
  - Strength-based Assessment



- The multidisciplinary team will meet on a regular basis to:
  - Staff Cases.
  - Obtain current DR information
- Staff are able to engage families who have trauma history
- Staff are partnering with families to help them achieve their self-identified goals

#### Space & Other Logistics

- Onsite at the FRC
- Virtual
- Home visit
- Child Family Team Meeting
- Staff will meet the families in their home
- Engagement with family should not be limited to traditional business hours (9-5)

#### Cultural Responsiveness

- Reflective of the community served and in a variety of languages
- Service delivery that embraces diversity
- Staff will have broad knowledge of parent/youth population such as understanding of barriers to engagement.
- Staff will have broad knowledge of local services/resources

#### Quality

- Social worker and family complete a warm hand off prior to their case being closed
- Case management as part of the Child Family Team (CFT) meeting with CSA
- Services delivered by the FRC are not the same as those managed by Child Welfare (no duplication of services)
- Strengthening Family Assessment with protective factors incorporated to engage families/youth

#### Process

- Each Center uses an intake document or welcome form to assess needs, strengths, and concerns
- Family Development Matrix administered according to current FRC Guidebook
- Time studies
- Case Counts
- Staff will attend biweekly MDT meetings
- Strengthening Family assessment should be on the first visit but no later than thirty days from first day of first contact.
- Staff will respond to referral within 3 days of receipt not including weekends or holidays

#### **Tracking:**

Time studies: Time studies should be completed on a daily basis by staff. Staff administering AfterCare activities (including initiating contact) and attending Child Family Team (CFT) meetings should count his/her time under DR. **This activity is not allowable under CFC funding.**

Case counts: A family may be counted under the AfterCare category (case counts, time studies) once contact with the family is attempted. Counts should reflect the number of children associated with the family, and each family should only be counted one time each month. The charge should be made to AC if referred by Child Welfare.

SCOARRS (Scorecards): A family may be reported under the AfterCare category once contact with the family is attempted. Each child associated with the family should be reported under the appropriate category based on their age (0-5, 6-17) and each family should only be reported once per AC referral.

## **Case Management**

Case management is a collaborative process of assessment, planning, facilitation, and advocacy for options and services to meet a family's needs through communication of available resources to promote quality, cost-effective outcomes.

Activities surrounding case management may consist of the following:

1. Assessment of the family's situation (health, social, education, employment, or basic needs). Assessment shall be defined as the process of identifying, selecting, designing, collecting, analyzing, interpreting, and using information to determine a family's needs. Essentially, assessment is an integral part of the FRC determining the most effective way to work with a specific family.
  - a. Intake: Each center shall use an intake document or welcome form to use with families to get a "snapshot" of needs or concerns.
  - b. Family Development Matrix (FDM): The FDM should be administered to all families who express interest in 3 or more services. The intended use of the FDM is for case management and is used to measure engagement. FDMs should not be used for simple assessments. If you feel it is appropriate for someone with fewer needs, you may use it. The start of gathering FDM data can begin at intake meeting but is not designed to be completed at first intake meeting unless the family wants to complete it then.
2. Centers will enter data from the FDM into the database. FDM surveys can be closed in the database without completion and still be counted if client disengages.
3. A first FDM assessment will be processed within 30 days of a family's intake. A first FDM assessment shouldn't be done at the family's intake appointment or first contact unless the family expresses a desire for the assessment.
4. Every DR, Family Reunification (FR-AfterCare), and Family Maintenance (FM-AfterCare) family should receive an FDM.
5. A second FDM assessment will be processed within 60 days of the family's initial assessment. Subsequent FDMs can be performed at 60-day intervals.
6. Identification of the needs or problems of the family.
7. Identification of the family's desired outcomes or goals.
8. Development of a service plan with the family to reach identified goals (may use the empowerment plan from FDM).
9. Participation in carrying out the service plan by linking the family with services that will help the family to obtain identified outcomes and goals (referring, informing, or arranging services).

10. Assist the family in accessing the services (make appointments, arrange for interpreter, follow up on referrals).
11. Consult with families and service providers about the effectiveness of the services and progress toward goals.
12. Assist the family in time of crisis to plan for and access needed assistance.
13. Periodic reassessment of the family's situation
14. Periodic review of the empowerment plan with the family to evaluate whether it needs changes (implement changes if necessary).
15. Family Reunification families may receive case management services from FRCs as part of their child family team meeting with CSA. These services will be documented in their family plan. Services case managed must NOT be the same services managed by Child Welfare (There cannot be a duplication of services.)
16. A joint visit to an FRC may be considered case management. Allowable joint visits will occur when an AC case is being closed out by CSA and being referred to the FRC site being visited.

### **Criteria for activities/services:**

#### **Staffing**

- Staff are able to engage families who have trauma history.
- Staff are partnering with families to help them achieve their self-identified goals.
- The multidisciplinary team will meet on a regular basis to:
  - Staff Cases
  - Obtain current DR/AC information

#### **Logistics**

- Staff will meet the families at local FRC or their homes.
- Engagement with family should not be limited to traditional business hours (9-5)

#### **Cultural Responsiveness**

- Services will be provided in languages appropriate to families
- Service delivery that embraces diversity
- Staff will have broad knowledge of parent/youth population such as understanding of barriers to engagement.
- Staff will have broad knowledge of local services/resources

#### **Quality**

- ACE assessment and HOPE assessment should be factor while jointly developing a case plan to develop and strengthen protector factors
- Offer to clients with multiple needs who require multiple visits

#### **Process**

- Intake or welcome form used to identify family strengths, needs, concerns
- Every DR, AfterCare, and Family Maintenance family participates in an FDM assessment
- Develop a service plan with family to identify goals and steps
- Reassess using the FDM after 3 months

- Staff will attend biweekly MDT meetings
- Limited to 6 months
- Extended case management beyond six months with CSA approval
- Time studies

### **Tracking (Assessment):**

Time Studies: Staff time studies should be completed on a daily basis. Staff administering any assessments and intake forms as described above should record his/her time under differential response (DR) or AfterCare (AC) if the client was referred by Child Welfare. **This activity is not allowable under CFC funding.**

Case Counts: Case counts for administration of assessments should be counted under differential response (DR) or AfterCare (AC). Counts should be provided for each child in the family, not the number of adults. Additionally, each family should only be counted once per month. Case counts should not be provided for administration of an intake form.

SCOARRS (Scorecards): Children associated with the parents completing the assessment should be recorded on the scorecards under differential response (DR) or AfterCare (AC). Count each child in the family, not the number of adults. Additionally, each family should only be counted once per assessment (first or second).

Example: A family of five referred by Child Welfare (Father, mother, child (12), child (6), child (2)) receives an assessment. The number of case counts would be 3, recorded under DR or AC.

### **Tracking (Case Management):**

Time studies: Time studies should be completed on a daily basis by staff. Staff administering case management activities and attending Multi-Disciplinary Team (MDT) meetings should count his/her time under DR or AC. **This activity is not allowable under CFC funding.**

Case counts: A family may be counted under the case management category (case counts, time studies) once contact with the family is attempted. Counts should reflect the number of children associated with the family, and each family should only be counted one time each month. The charge should be made to DR or AC if referred by Child Welfare

SCOARRS (Scorecards): A family may be counted on scorecards for case management once an assessment has been completed. The scorecards should reflect the number of children associated with the family, not the number of parents. A completed FDM continues to be used to track engagement. FDM first engagement outcome percentage is 40% and second engagement outcome percentage is 30%. The engagement factor will be calculated by dividing the number of FDMs by the number of clients who respond to engagement attempts.

Example: A family of three is being case managed for three consecutive months. The family includes a mother and twin 4-year olds. The number reflecting this family would be two. Additionally, the family would only be counted on the scorecard 1 time.

Client data sheets: All differential response and AfterCare families should be included on the client data sheet when the referral is received. Names should never be removed from the client data sheet.

## GLOSSARY

**AfterCare:** Services provide ongoing preventative services to families that have completed Family Reunification (FR) or have had an open Family Maintenance (FM) case and their cases are not closed. Client referrals would be made by CSA to the FRC.

**Assessment:** Assessment is the process of identifying, selecting, designing, collecting, analyzing, interpreting, and using information to determine a family's needs. Essentially, assessment is an integral part of the FRC determining the most effective way to work with a specific family.

**Case Counts:** Case counts represent the number of children (under the age of 18) whose family received services. Case counts are recorded on the monthly invoice and reflect services provided to families served through the center. The invoice should reflect the number of children (under the age of 18) per month whose families received services. Case counts do not carry over month-to-month.

**Case Management:** Case management shall be defined as a collaborative process of assessment, planning, facilitation, and advocacy for options and services to meet a family's needs through communication and available resources to promote quality cost-effective outcomes.

**Child & Family Services (CFS):** A division of Community Services Agency which sends Differential Response referrals to Family Resource Centers.

**Child Welfare Services (CWS):** Child protection services comprised of a number of services and interventions that are organized into programs which together, form a continuum of efforts aimed at safeguarding the well-being of children and adults in ways that strengthen and preserve families, encourage personal responsibility, and foster independence.

**Children 0-5:** Children ages 0 through 5 are eligible for services funded by the CFC. A child is eligible until he/she turns 6 years old. If a child turns 6 after the first of the month, the child may continue to receive services through the end of the month.

**Children 0-17:** Children ages 0-17 are eligible for DR and AC services through the CSA funding if there is a CSA referral.

**Community Event:** An event held by the resource center for current families or the larger community as an opportunity to engage with resource center staff and each other. Community events may be held for a specific purpose such as a healthy fair, back-to-school occasion, holiday celebration, block-party, etc. Outreach may be a by-product of the event but is not the sole purpose/goal.

**Contact:** Contact is defined as completed if the case manager is able to receiving any sort of response (verbal, non-verbal) in writing or in person.

**Attempted Contact:** Is defined as an attempt to reach person or family without receiving any sort of response (verbal, non-verbal) in writing or in person.

**Cost Pools:** Service categories on the invoice recording case counts and expense distribution based on time studies. Cost pools on the invoices are as follows:

<b>DR</b>	Differential Response (Child Welfare referred clients) <i>Allowable Activities: Case Management, Parent/Caregiver Education, Developmental Screenings, Resource &amp; Referral</i>
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<b>AC</b>	AfterCare (Child Welfare referred clients) <i>Allowable Activities: Case Management, Parent/Caregiver Education, Developmental Screenings, Resource &amp; Referral</i>
<b>CFC</b>	Children and Families Commission funded activities <i>Allowable Activities: Outreach/Community Events, Advocacy/Parent Leadership Training, Parent, Caregiver, Provider Education, Workshops &amp; Classes, Family, Friends, &amp; Neighbors Early Learning Education, Parent/Caregiver Child Literacy, Resource &amp; Referral</i>
<b>AD</b>	Administration of the Agreement
<b>Non-FRC</b>	Non-CFC/CSA FRC funded activities

**Developmental Screening:** An assessment tool used to screen children for identification of developmental delays. Currently the CFC and CSA requires FRCs to use the Ages and Stages Questionnaire (ASQ-3)

**Differential Response:** An alternative intake, assessment and service delivery structure that allows a child welfare agency to respond in a more flexible manner (with three response paths) to referrals of child abuse and neglect. The path of response is based on the assessed safety and risk reported, as well as to the needs, resources and circumstances of the family. Client referrals would be made by CSA to the FRC

**Family, Friend, and Neighbor (FFN):** A person who provides care to a child that is a relative, friend, or neighbor, or a babysitter or nanny. These providers are typically exempt from licensing and regulations. They may not be required to meet health, safety, and training standards unless they care for children who receive government financial assistance

**Family Network:** The Family Network is a component of the First 5 website and will provide a variety of parenting information in the form of articles, videos, parenting tips, apps, a resource directory, events calendar and more. The Family Network is a pilot program to expand the reach for parent engagement opportunities in order to increase the number of families reached in the community.

**Outreach Event:** An event held or attended with the sole purpose of distributing information to families with the intent to bring awareness to the resource center and its services and ultimately engaging new families in the resource center's programs.

**PlanetBaby!:** A prenatal to age one support group-based program funded by First 5. PlanetBaby! is based on the 5 Protective Factors and provides some education to participants through the use of pre-approved videos. PlanetBaby! uses a standardized model offered in-person and virtually every other week. **Groups are monolingual.**

**Promotoras:** A lay Hispanic/Latino community member who receives specialized training to provide basic mental health education in the community without being a professional mental health provider. While most of their work involves educating target audiences about mental health issues affecting their community, they also provide guidance in accessing community resources associated with mental health. Promotoras serve as liaisons between their community, mental health professionals, and human and social service organizations. As liaisons, they often play the roles of an advocate, educator, mentor, outreach worker, role model, and interpreter.

**Resource and Referral:** Connecting families to available community resources, services, supports, and other FRC funded services which may of assistance to the families

**(SCOARRS) Stanislaus County Outcomes and Results Reporting Sheet:** Outcome reporting sheet for the activities provided.

**Subcontractor:** Contracted services paid for through the FRC grant. Subcontractors should report data and time studies to the FRC paying for the services. Subcontractor are required to comply with the FRC Guidebook and the CFC Policies and Procedure Manual. It is the responsibility of the Contractor to ensure that their subcontractor(s) are maintaining compliance.

**Stanislaus County Children and Families Commission:** (CFC), First 5 Stanislaus, or County

**Stanislaus County Community Services Agency:** (CSA) or County

## SERVICE MATRIX

Services and activities funded by CFC and CSA may only be used for the following services, activities, and target population:

- CFC funding can only be used for services and activities as defined in this Guidebook for children 0-5 years of age and their families
- CSA funding can only be used for services and activities as defined in this Guidebook for children 0-17 years of age and their families

Below is a quick reference of allowable services and activities by funder.

Service/Activity	Output	Funder	
		CSA	F5
Outreach/Community Events	Participate in the Family Network		XX
	Four Community events a year		XX
	Three Outreach events a year		XX
	Contribute/Coordinate with Master Calendar		XX
	Engage with new customers		XX
Advocacy and Parent Leadership	Advocacy (stand alone, in classes) (May use Abriendo Puertas module or another First 5 approved training)		XX
Parent, Caregiver, Provider Education	Fidelity and linkage to Evidence-Based Programs	XX	XX
	Two full cycles a year or 30 weeks of Parenting Classes	XX	XX
	Ages 6-17: 12 – 15 classes/session	XX	
	Parent Cafés (virtual and in person)	XX	XX
	PlanetBaby! - Prenatal through year one education		XX
Workshops and Classes	Emphasis on virtual format FRCs Coordinate delivery across agencies and with First 5 Outreach beyond local neighborhood		XX
Resource and Referral		XX	XX
Developmental Screening	Ages and Stages Questionnaire	XX	XX
Family, Friends, and Neighbors Training	Connect with FRC FFN Caregivers		XX
	Expand to libraries and alternate settings		XX
Parent, Caregiver, Child literacy	Creative Curriculum for children 0-5: Three-four cycles a year; 12 classes a cycle		XX
	Talk, Read, Sing Promotion		XX
	Virtual Story time at least a month		XX
	Book distribution tied to literacy		XX
Differential Response, AfterCare	Path 1, 2, 3	XX	
	Strengthening Families assessment and FDM	XX	
	Bi-weekly MDT	XX	
	Service Plan for Goals and Steps	XX	
Case Management	Up to six months	XX	