



**Services to Promote
Family Strengthening – Parent Engagement (0-5)
For
Fiscal Years 2019/2020-2022/2023
With Intent to Contract for 4 years**

Funds Available: \$200,000/year*, with up to 3% annual increase.

APPLICATION FORM

RELEASE DATE: DECEMBER 18, 2018

Application Receipt Deadline: January 25, 2019

The Commission cannot give grants for items that have already been purchased or for services that have already been provided.

Please read the RFA General Instructions (a separate document) before you fill out these forms. All the forms that follow are available as Word files. They can be downloaded from the Commission website at www.First5Tuolumne.org or requested as an email attachment from Sarah Garcia at sgarcia@tcsos.us

Please add your organization's name as a header for the following section. Please submit the application with the Cover Page as Page 1.

**The Commission may adjust fund availability for these services once proposals are received and may fund at levels above or below the amount stated in this Request for Applications. The amount is provided as a guideline only.*

Services to Promote Family Strengthening – Parent Engagement (0-5) Cover Sheet 2019

Name of Applicant: Infant Child Enrichment Services, Raising Healthy Families Program	
Address: 20993 Niagara River Dr. CA 95370	
Contact Person: Natalie Gray	Phone: 209-533-0377 x. 24
e-mail: natalieg@icesagency.org	Fax: 209-533-4017
Descriptive Title of Project: Empowering Resilient Families Using Solution Focused Interventions	
Total Amount of Request: \$836,725	Total Project Cash Budget: \$836,725
Project Start Date: July 1, 2019	Project Completion Date: June 30, 2023

I authorize submission of this application:

Cheryl Dodge

Infant Child Enrichment Services

Name of authorized agency official
Executive Director

Name of agency/organization

Title of authorized agency official

Authorized Signature

January 24, 2019
Date

FIRST 5 FAMILY STRENGTHENING – PARENT ENGAGEMENT SERVICES

All services must align with the Protective Factors Framework, Appendix A. Service design must address at least one of the following 5 Protective Factors: (1) Parental Resilience; (2) Social Connections; (3) Concrete Support in Times of Need; (4) Knowledge of Parenting and Child Development; and/or (5) Social and Emotional Competence of Children.

The total funding available for these services will be \$200,000 in the first year for all funded projects, with an annual increase not to exceed 3% per year for three subsequent years.

The Commission may adjust fund availability for these services once proposals are received and may fund at levels above or below the amount stated in this Request for Applications. The amount is provided as a guideline only.

Project Design, Strength, and Feasibility:

The service approach must address at least 5 of the following 11 desired outcomes for primary caregivers of children birth to five. For the outcomes, below, that you plan to measure with your project, please provide an estimate of unduplicated individuals you will serve for each chosen desired outcome.

Desired Outcomes	Unduplicated number of parents/caregivers to be served annually
1. Caregivers receive education and skill building opportunities on positive parenting techniques.	70
2. Caregivers engage in ASQ screening and learn about developmental milestones.	35
3. Caregivers engage with children's therapy.	35
4. Caregivers are effectively linked to addiction treatment and recovery support.	15
5. New mothers receive depression screening and treatment referrals, as appropriate.	10
6. Caregivers build supportive networks with clean and sober family and friends.	35
7. Caregivers feel physically and emotionally safe in their homes and relationships.	35
8. Caregivers work toward financial stability: job skills & training, driver's licenses, GED, ESL, etc.	
9. Parents are offered support services as early as possible following a child abuse report.	25
10. Caregivers learn about the importance of <i>Talk, Read, Sing</i> in the context of early brain development and do those activities at home.	35
11. Caregivers enroll their children in a quality early learning program.	15
Please add any additional outcomes you plan to measure and report, and the unduplicated number of caregivers to be served annually.	
Families will receive brief <i>Solution Focused Therapeutic Interventions</i> , transitioned into long term family support case management with referral to	35

appropriate resources and services.

Based on your answers above, provide a description of the service strategies you propose to use to effectively meet these desired outcomes.

Description:

To effectively meet the desired outcomes, Infant/Child Enrichment Services (ICES) proposes a comprehensive service design that focuses on strengthening families holistically by offering a program that is scalable, regenerative (sustainable), and flexible to the growing and changing needs of the community we support. Our target population is parents throughout Tuolumne County who are overburdened and lacking fundamental parenting skills necessary to create a responsive, stimulating, and supportive home environment for their children. Our service design addresses high-risk populations by offering evidence-based preventative and intervention services that meet families where they are. The populations we support are those at-risk for being in crisis and those currently in crisis.

For at-risk families, we expand their awareness of our free services by engaging in community outreach activities through social media, broad marketing to community channels, and targeted marketing to partnerships and linkages. We provide parents preventative supports, tools, and resources that ensure they can maintain stability and strengthen the base of their parenting techniques. Throughout the year these parents are invited to participate in thematic monthly classes, workshops tailored to specific family needs, and to interact with families experiencing similar challenges through meet-ups and playgroups. Additionally, these families will receive resource referrals to other community-based supports not offered by ICES, as needed.

For families in crisis, we identify them through linkages and partnerships to other programs in Tuolumne county, as well as through our outreach activities. For families who are currently in crisis, we employ our Home Visiting model where our first goal is to *calm the crisis* they are experiencing. We achieve this by using a brief *Solution-Focused Therapeutic Intervention*. *Solution Focused Therapy* targets the client's default solution patterns, evaluates them for efficacy, and modifies or replaces them with effective problem-solving approaches that work. Using systematic questioning and a strengths-based approach, the intention is to help clients recognize their own resiliency and identify some of the ways in which to build problem solving skills to effectively cope with their problems. In working with families in this way, we aim to help those experiencing difficulty, quickly find tools they can use to cope with immediate challenges. In clarifying their goals, parents are better able to change what is needed in their lives, using the new problem-solving approaches.

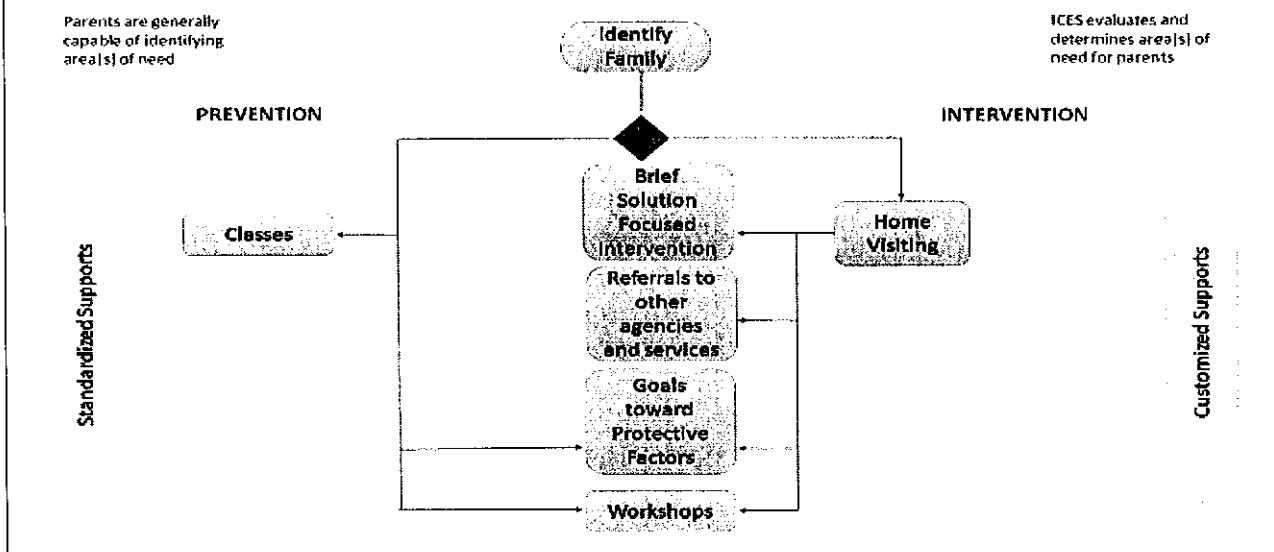
In assessing the family's needs during our initial intake evaluation, we identify immediate supports that will attend to their most basic needs and help move them to a place where they are capable of addressing their family's challenges and learning new behaviors and skills. Utilization of the *Adult Adolescent Parenting Inventory* gives us information that we use to create and implement a customized plan to guide parents into achieving stability and peace within the home. This plan is based on the evidence-based curriculum *Nurturing Parenting* and is foundational to the comprehensive case management we offer families.

Next, families are identified to a case management collaborative, including but not limited to therapeutic intervention, parenting education, childcare, medical, social services or self-referral. The goal is for all children of parents enrolled in the Home Visiting program to receive at least one developmental screening, and for parents to engage in a discussion and exploration of developmental milestones, including the importance of First 5's *Talk, Read, Sing* in the context of early brain development. Most of the families we serve are at risk of child abuse, domestic violence, and/or drug and alcohol abuse. Therefore, we bring education and supports directly to parents and bring to light the implications to their children for exposing them to abuse and trauma. Where needed and in collaboration with other community agencies, ICES links parents to services outside of our programmatic areas. For example, we provide treatment referrals for substance abuse, child abuse, and/or postnatal depression.

While our prevention and intervention programs support the needs of all types of families, we have a particular focus on helping families with pregnant women or with children from birth to age 5, to ensure they have healthy, positive early development experiences.

Our two types of group-based parenting education formats are classes and workshops. Classes are thematic and address topics relevant to all parents. Workshops are customized and focus on specific needs or challenges. For example, for families with specific needs, such as spirited or trauma exposed children, we create content and activities tailored to a small group- with the same particular issues. Both classes and workshops are designed to help parents recognize and apply strategies that address their family's needs.

ICES' service design considers each family by determining which path of supports will best meet their individual needs. While we customize each family's plan, the program components are standardized to allow for replicability and program efficacy, as well as best use of our resources. Lastly, we reflect on our service design regularly to make sure we are nimble enough to flex the program where needed. This ensures the best possible client outcomes. By offering this regenerative model, we can scale our work to reach even more families in the Tuolumne area.



Our Raising Healthy Families service design is dynamic — it flexes to the specific needs of the parents and integrates the five protective factors into the program model to ensure the best possible outcomes for strengthening families.

Access to Services & Community Linkages to Promote Seamless Services

Access to Services: Please describe specific barriers to services or desired outcomes that your proposed participants face, and how your proposed services will help overcome those barriers. These can include barriers such as geography, transportation, homelessness, cultural or socio-economic barriers, etc. as applicable.

The specific barriers our families face relate to our rural geography, the cost of living in California, and the types of issues and traumas they experience.

Our rural geography and the cost of living create two barriers: the ability to get to the location where support services are offered and the ability to afford transportation. Because of our rurality, Tuolumne lacks comprehensive public transportation, resulting in families needing to obtain their own vehicle to access even basic needs, such as food or medical care. However, the cost of living in California is so great that many families cannot afford to purchase or lease a vehicle. To ameliorate these issues, we offer a Home Visiting model, whereby we go to the family's dwelling to meet with them, and we ensure they have access to our classes, workshops, and meet-ups by using our agency's vehicles to transport them from their homes to our location.

The specific barriers our population experiences relative to desired outcomes include lacking *all* of the protective factors in their family structure and experiencing multiple issues at the same time. These issues often include homelessness, poverty, drug/alcohol abuse, domestic/child abuse, and generational issues such as trauma, mental health, and/or substance abuse disorder. To address these issues, ICES believes that we need long-term supports that gradually release families from high-touch, highly customized programs to maintenance plans through a "stepping down" process. The stepping down process is determined by how well parents increase the protective factors, and how capable they are of sustaining a stable home for their children. Each family is provided with a customized plan that applies evidence-based practices and considers their specific barriers, with the ultimate goal of helping them achieve parenting independence.

Our role, therefore, in helping parents raise healthy families is to address the protective factors through Home Visiting; education and skill building (i.e. classes and workshops); and the creation of social connections whereby families engage with other families, make valuable connections, and establishing long-term relationships.

ICES' Raising Healthy Families program works to ensure families become empowered, connected, and resilient.

Community Linkages: Please briefly identify the critical community linkages you will make or maintain to effectively provide the proposed services. If the services you propose are currently offered by another service provider in Tuolumne County, or by your agency under a different funding source, explain how your proposal does not duplicate services.

Description:

Service	Primary Linkages
• Domestic Violence Services	• Me-Wuk Social Services, Center for a Non-Violent Community
• Education for Children/Child Care	• ICES, Head Start, State Preschools
• Health	• MACT Health Dept., Me-Wuk Health, Public Health, Valley Mountain Regional Center, In-Home Supportive Services, and private providers
• Housing Assistance	• Me-Wuk Social Services, ATCAA
• Job Training and Assistance	• Mother Lode Job Training, CalWorks
• Literacy/High School Equivalency Preparation	• Tuolumne Band of Me-Wuk Indians, ATCAA Family Center, Columbia College
• Mental Health Services	• MACT Behavioral Health, Tuolumne County Behavioral Health, Me-Wuk Behavioral Health
• Substance Abuse Services	• MACT Behavioral Health, Tuolumne County Behavioral Health

Staff members are involved in the following boards, councils, and organizations:
Columbia College Child Development Advisory Committee, First 5 Commission, Foster Kinship Council and School Attendance Review Board, Local Child Care Planning Council, Prevent Child Abuse Tuolumne County, Tuolumne County Behavioral Health Quality Improvement Council and Advisory Board, and YES Partnership.

Project Evaluation

Evaluation: Please check the boxes below, to indicate your understanding of the evaluation requirements under this funding process:	
<input checked="" type="checkbox"/>	I understand that the contract will include an evaluation plan.
<input checked="" type="checkbox"/>	I understand that the evaluation plan will include requirements for collection and reporting of service level indicators, such as number of participants, ethnicity, level and type of service, and other service data as required.
<input checked="" type="checkbox"/>	I understand that the evaluation plan will include requirements for collection and reporting of outcome indicators, including measures of relevant change for children, families or service systems, to be finally negotiated at contract time, and revisited as necessary to ensure that quality data is being collected.

Evaluation: Have you demonstrated any of the desired outcomes indicated on page 2 (or very similar outcomes) prior to completing this application, either as a First 5 grantee or under any other funding source? Please check applicable boxes below, and add information as indicated.	
<input checked="" type="checkbox"/>	Yes, as a First 5 Grantee, in the following years (list): 1998 to present
<input type="checkbox"/>	Yes, for another funder. I have attached an evaluation report reflecting our results.
<input type="checkbox"/>	No, there has been no demonstration of these or similar outcomes.
<input type="checkbox"/>	Other:

Organizational Capacity

Staffing: Please explain the staffing structure that you present in your budget. Describe the qualifications of the key personnel (staff or consultants), the time (FTE) they will devote to the project, and their experience performing the services outlined in this application.

Employee classifications to be involved in First 5 Services:

Job Title	RHF Program Manager
Qualifications & Licenses:	BA in Psychology, Sociology, or Human Relations and two years continuous direct experience in related field. Has prior experience managing projects, knowledge of community services, outstanding communication skills and the ability to empathize with families. Preferred licensed/interned social worker (MSW) or marriage and family therapist (MFT).
Functions on the Project:	Oversight of overall Raising Healthy Families program, including First 5 clients' services, workshops, and classes. This includes supervision and coaching of staff, grant writing, data collection, and reporting for First 5 and all other RHF contracts. Performs initial family assessments employs the brief Solution Focused intervention and creates a custom support plan for each family. Sets class and workshop schedules, ensures contract requirements are met, data is gathered appropriately, and outcomes are reported to the grantor according to grant requirements. Provides back-up support to Family Support Specialists in case of absence or staff turnover.
Experience:	<ul style="list-style-type: none"> • Provide mental health help and support for clients <ul style="list-style-type: none"> ○ Helping clients reflect on issues to help them make positive changes ○ Liaising with others (if needed) to help any changes happen • Successfully implemented the Differential Response Program for High Crisis Families • Educating Staff and community members in Trauma Informed Care

Natalie Gray, Program Manager

Work History

- Marriage Family Therapist Intern 2018 – Present
- Program Manager – Infant / Child Enrichment Services (ICES) 2017– Present
- Family Support Specialist, Parent Educator – ICES 2014 – 2017
- Eligibility Worker– Tuolumne County Social Services 2014
- Paraprofessional – Tuolumne County Superintendent of Schools 2013 – 2014

Education

- MA Marriage and Family Therapy, Touro University Worldwide 2018
Graduated Summa Cum Laude
- BS Psychology, California State University Stanislaus 2013
Graduated Summa Cum Laude
- AA Behavioral Science and Allied Health, Columbia College 2011
Graduated High Honors

Certificates

- Advanced Clinical Trauma Practitioner
- Trauma Resiliency Model
- LGBT Youth: From Trauma to Belonging
- Aggression Replacement

Job Title:	Family Support Specialist (FSS)
Qualifications & Licenses:	BA in social service field preferred or AA in related field with two or more years' experience working with adults and/or families in a social service capacity.
Functions on the Project:	<p>Perform contract duties including attending weekly Home Visiting for First 5 clients; teaching workshops and classes; entering and maintaining related data elements; and completing case notes for home visits, attendance notes for classes, and summary progress reports upon request.</p> <p>Teaches workshops and classes and carries a caseload of clients. All clients are assigned based on availability and fit, aligning specificity to family needs, and explicit FSS training and abilities. Each FSS is assigned to grants as appropriate for where the family or workshop/class is assigned. To ensure engagement, home visits are rescheduled in the case of absences, or the RHF manager may visit the family if needed. Workshops and classes may be covered by another qualified ICES staff person or the RHF manager, if necessary.</p>
Experience:	<ul style="list-style-type: none"> • Made recommendations on Child Welfare cases based on Home Visits with the family-CASA (Court Appointed Special Advocates) • Videotaped play therapy sessions-Kempe Center for the Prevention of Child Abuse & Neglect Internship

Angie Gisi, Family Support Specialist

Work History

- Family Support Specialist – Infant / Child Enrichment Services (ICES) 2018 – Present
- Peer Coordinator – Tuolumne County Behavioral Health 2012 – 2015
- Mental Health Worker – Aurora Mental Health 2003 – 2012
- Substance Abuse Counselor – Maynard's Recovery Counselor 2003 – 2012

Education

- BA Psychology, University of Colorado

Job Title:	Family Support Specialist (FSS)
Qualifications & Licenses:	BA in social service or related field preferred or AA in related field with at least one to two years' experience working with adults and/or families in a social service capacity. (Staff may be in process of earning degree.)
Functions on the Project:	<p>Perform contract duties including attending weekly Home Visiting for First 5 clients; teaching workshops and classes; entering and maintaining related data elements; and completing case notes for home visits, attendance notes for classes, and summary progress reports upon request.</p> <p>Teaches workshops and classes and carries a caseload of clients. All clients are assigned based on availability and fit, aligning specificity to family needs, and explicit FSS training and abilities. Each FSS is assigned to grants as appropriate for where the family or workshop/class is assigned. To ensure engagement, home visits are rescheduled in the case of absences, or the RHF manager may visit the family if needed. Workshops and classes may be covered by another qualified ICES staff person or the RHF manager, if necessary.</p>
Experience:	<ul style="list-style-type: none"> • Facilitated cooking and nutrition classes for children and parents involved in Child Welfare Services • Facilitated Nurturing Parenting classes for Child Welfare clients • Home Visiting experience with high-crisis families

Chelsea Corbit, Family Support Specialist

Work History

- Family Support Specialist – Infant / Child Enrichment Services (ICES) 2018 – Present
- Family Support Aide, Child Abuse Prevention Center – AmeriCorps 2017 – 2018
- Pharmacy Tech – SaveMart 2016 – 2017

Education

- AA , Columbia College (in progress)

Certificates

- Pharmacy Tech, Carrington College

Job Title:	ICES Executive Director
Qualifications & Licenses:	BA in sociology, psychology, child development, education, or related field with coursework in child development. Preferred MA in related field. Non-profit business management, grant implementation, and talent/HR management experience. Minimum ten years work experience, preferably with child care and or child development experience. Experience managing grant-based, social service, or education-related programs.
Functions on the Project:	Responsible for general oversight of Agency including operations (administration, HR, IT), finance, marketing and outreach, and program management. Provide oversight and review of First 5 grant and all other RHF services, including periodic review of client progress, family outcomes, class and workshop outcomes, program reporting and overall impact, and adherence to budget.
Experience:	<ul style="list-style-type: none"> • 20+ years program and leadership roles in pre-k-12 education space • Act as Chief Business Officer for Pivot Learning, a \$4-6M education non-profit: <ul style="list-style-type: none"> ○ Program managed a \$1.2M Department of Education grant as subcontractor to American Institutes for Research (AIR) ○ Managed budget of all private foundation grants, ranging from \$200k-\$1.5M (Gates Foundation, The James Irvine Foundation, Stuart Foundation, Hewlett Foundation, etc.) for an annual \$2.5-\$3.5M portfolio) • As Senior Project Manager for Math Solutions, a division of Scholastic, managed and fundraised for program development: <ul style="list-style-type: none"> ○ Managed \$2.2M Gates grant to build an online formative assessment software tool, including all programmatic responsibilities ○ Designed a new program and fundraised additional \$4.3M Gates grant for a multi-state, Common Core professional development program for teachers • Co-founder and was treasurer for community-based non-profit, Oakdale Soccer Club

Cheryl Dodge, Executive Director

Work History

- | | |
|---|----------------|
| • Executive Director – Infant Child Enrichment Services | 2019 - Present |
| • Business Consultant | 2017-2019 |
| • Chief Business Officer – Pivot Learning | 2015-2017 |
| • Vice President, Technical Product Development – McGraw-Hill Education | 2012-2015 |
| • Director, Instructional Design – Scholastic | 2010-2012 |
| • Business Owner – The Well-Rounded Child | 2003-2010 |

Education

- MA Education, Chapman University
- BA Liberal Studies, Saint Mary's College

Job Title:	Administrative Assistant
Minimum Qualifications & Licenses:	Minimum two years continuous experience in similar position. Ability to read and interpret documents, write routine reports and correspondence; must have strong computer skills in database, spreadsheet, and word processing software, and use of Internet and online applications.
Functions on the Project:	Primary clerical assistant; orders all office supplies; answers phone, receives correspondence; creates and distributes promotional materials for workshops and classes.
Experience:	<ul style="list-style-type: none"> • Creating, maintain and entering information into agency's services database. • Updates and formats documents, flyers, and paperwork. • Handles confidential and non-routine information

Kim Cruson, Administrative Assistant

Work History

- Administrative Assistant – Infant Child Enrichment Services 2006 – Present
- Office Assistant – City of Cypress Senior Center 2004 – 2005
- Administrative Clerk – Braille Institute of Anaheim 1995 – 2004

Education

- Templeton High School

Percentage of time allocated for this grant

Executive Director	.04805
Program Manager	.07005
Family Support Specialist II	.68642
Family Support Specialist I	.636
Family Support Specialist I	.5
Child Care Teacher	.08575
Administrative Assistant	.0429

	YES	NO	N/A
Has your organization ever had a contract over the amount of \$10,000 with First 5 Tuolumne?	X		
If so: In your estimation, was the contract executed fully and responsibly?	X		
If so: Were you able to demonstrate good outcomes for children and/or parents?	X		
Has your organization had a contract over the amount of \$10,000 with another entity for similar services in the last five years? If so, please provide some detail on this contract below the table.	X		
If you are not an entity of county government, have you provided one copy only of the most recent audit or financial statements available for your organization?			X

If you would like to provide any additional comments regarding your answers to the questions above, please do so here. (You may be asked to provide additional information to demonstrate organizational effectiveness once applications have been reviewed.):

FY	CBCAP	CAPIT	DR	PEI	FY Total
17-18	\$ 22,363	\$ 63,000	\$ -	\$ 68,750	\$ 154,113
16-17	\$ 22,363	\$ 63,000	\$ 66,573	\$ 105,000	\$ 256,936
15-16	\$ 22,363	\$ 63,000	\$ 66,573	\$ 105,000	\$ 256,936
14-15	\$ 22,363	\$ 63,000	\$ 66,573	\$ 105,000	\$ 256,936
13-14	\$ 22,417	\$ 63,000	\$ 64,573	\$ 98,754	\$ 248,744
12-13	\$ 22,417	\$ 63,000	\$ 64,573	\$ 98,754	\$ 248,744
					\$ 1,422,409

Raising Heathy Families, has been a successful and integral part of the of the child abuse prevention efforts in Tuolumne County for over 35 years. There have been no audit findings or exceptions in the history of the agency. The Raising Healthy Families program has been funded through Child Welfare Services (CWS) CAPIT, DR, and CBCAP funding, Behavioral Health PEI funds, and First 5 Tuolumne County Commission contract to provide comprehensive in-home parenting support, parenting classes, and Parent Leadership activities throughout Tuolumne County. In being able to leverage funding with these grants, we have been able to offer support to many more clients within our community.

Budget

You may cut and paste the budget into this document, or you may submit it as a separate document, along with the answers to the Budget Narrative questions below.

Line Item Budget: Please provide a line item budget for each of the four years of this project (FY 19-20 through 22-23). A fiscal year shall be considered July 1 – June 30. **Annual increases shall not exceed 3%.** You may submit the budget in the budget format used by your organization. All personnel must be broken out by FTE; all consultant costs by hours.

1st5 FY 19-23 BUDGET PROPOSAL

	FY 19-20	FY 20-21	FY 21-22	FY 22-23	Total
Personnel					
Salary Coordination	\$109,235	\$112,512	\$115,887	\$119,364	\$456,998
Benefits	\$30,462	\$31,376	\$32,317	\$33,287	\$127,442
Subtotal Personnel:	\$139,697	\$143,888	\$148,205	\$152,651	\$584,440
Operating/Other Costs					
Contracted Services	\$4,181	\$4,306	\$4,436	\$4,569	\$17,492
Supplies and Office Expense	\$7,574	\$7,801	\$8,035	\$8,276	\$31,687
Facility and Equipment Expense	\$5,041	\$5,192	\$5,348	\$5,508	\$21,090
Travel and Meeting Expenses	\$5,845	\$6,020	\$6,201	\$6,387	\$24,453
Other Expenses	\$3,692	\$3,803	\$3,917	\$4,034	\$15,446
Fix Asset Purchases					\$-
Subtotal Operating/Other:	\$26,333	\$27,123	\$27,937	\$28,775	\$110,167
Management and General allocations	\$33,970	\$34,989	\$36,039	\$37,120	\$142,118
Subtotal Operating/Admin:	\$60,303	\$62,112	\$63,975	\$65,895	\$252,285
TOTAL:	\$200,000	\$206,000	\$212,180	\$218,545	\$836,725

Budget Narrative: Leveraging

What resources will you be able to leverage to assist you in providing and sustaining the services described in this application over the four years of operation? Include both cash resources (directed only to services for children birth to five, their parents, or pregnant women), and any in-kind resources that enable you to serve First 5 families.

Cash-Mental Health Services Act (Prop 63) monies through Prevention and Early Intervention grant funding from Tuolumne County Behavioral Health. We have secured continuous funding since 2009.

In Kind Items	Yearly Amounts
Advertising-	\$2,089
Donated Xmas gifts for clients	
Shop with a Cop	\$3,500
Giving Tree	\$1,650
Toys from Resource and Referral "Lending Library"	
For classes and HV	\$500
Children's Fair-	
Booth exhibitors	\$11,760
Yearly total	\$19,499

Budget Narrative (Other): Please provide an explanation of any items in the budget that may raise questions for a reviewer.

Numbers in narrative are representative of fiscal year 2019-2020. Preceding fiscal years include 3% increase each year.

Personnel

Salary Coordination:

Position	Annual Salary	FTE	Program Salary
Executive Director	\$ 69,451	.04805	\$ 3,337
Program Manager	\$ 48,850	.7005	\$ 34,218
Family Support Specialist II	\$ 39,125	.68642	\$ 26,856
Family Support Specialist I	\$ 27, 089	.636	\$ 13, 545
Family Support Specialist I	\$ 16, 931	.5	\$16,931
Child Care teacher	\$ 5,460	.08575	\$ 3,748
Administrative Assistant	\$ 36,858	.0429	\$ 1,581
		Total	\$ 100,216

Includes Payroll taxes of approximately 8% equaling \$8,017 and Workers Compensation Insurance at approximately 1% equaling \$1,002.

\$ 9,019

Benefits:

Includes health, vision, dental, life, and IRA accounts. These items are allocated proportionately based on organizations allocation schedule utilizing FTE percentage of time.

\$ 30,462

= \$ 139,697

Operating/Other Costs

Contracted Services:

Includes website and information technology operational expenses that are allocated proportionately based on organizations allocation schedule utilizing FTE percentage of time.

Website	\$ 211
IT Support	\$ 3,970
Total	\$ 4,181

Supplies and Office Expense:

Includes program supplies that are direct costs. Common supplies, telephone/communications, postage/shipping, copier contract, and books/subscriptions/references that are a combination of direct and indirect costs that are allocated proportionately based on organizations allocation schedule utilizing FTE percentage of time.

Common Supplies	\$ 1,614
Program Supplies	\$ 2,256
Telephone/Comm	\$2,209
Postage/Shipping	\$ 78
Copier Contract	\$1,228
Books/Subs/Ref	\$ 189
Total	\$ 7,574

Facility and Equipment Expense:

All indirect operational expenses related to occupancy and equipment. Allocated proportionately based on organizations allocation schedule utilizing both program occupancy and FTE percentage of time.

Janitorial	\$ 669
Build/Grnd Maint	\$ 825
Utilities	\$ 1,388
RE taxes/ dues	\$ 123
Equipment Maint	\$282
Depr/Amor	\$ 1,754
Total	\$ 5,041

Travel and Meeting Expenses:

Includes direct and indirect costs associated with the three program vehicles and one organization vehicle. Vehicles are used to travel to and from home visits, classes, meetings, and conferences/trainings. Also includes direct costs associated with program conferences and meetings. Indirect costs are allocated proportionately based on organizations allocation schedule utilizing both auto usage and FTE percentage of time.

Mileage	\$ 137
Auto Expense	\$ 1,373
Auto Insurance	\$2,454
Conf/Meetings	\$ 1,881
Total	\$ 5,845

Other Expenses:

Includes organizational property/liability insurance and a combination of direct and indirect dues, advertising, and other costs. Program staff development is here as well. Indirect are allocated proportionately based on organizations allocation schedule utilizing both program occupancy and FTE percentage of time.

Prop/Liab Insur	\$ 1,406
Memb dues	\$ 47
Staff Develop	\$ 340
Advertising	\$ 189
Other Expenses	\$ 1,710
Total	\$ 3,691
Subtotal =	\$ 26,333

Management and General:

Costs necessary to operate the agency, as a whole, and cannot be identified with specific programs. Includes salaries and benefits of the Executive Director and Fiscal Coordinator, occupancy costs, other costs related to these positions, and required annual organization-wide audit. These costs are proportionately allocated to all programs based on direct salaries in each program.

Total	\$ 33,970
Oper/Admin =	\$ 60,303

ADDITIONAL REQUIREMENTS

<p>Contracts shall stipulate a requirement for key program staff to participate in up to 12 grantee meetings a year, in the first funded year, facilitated by the First 5 Executive Director. The purpose of these meetings is to discuss opportunities for linkages, shared services, leveraging and other system improvements.</p>
<p><i>Please list the most likely person(s) to participate in these meetings:</i> At least one staff member with decision making authority will attend a minimum of 10 Contractor Joint Service Planning meetings FY 18-19.</p>
<p>Contracts shall stipulate a requirement for grantee to provide at least one training a year to peer professionals in the county on a topic of expertise for that grantee, of interest to other providers.</p>
<p><i>Please list at least one possible training topic that your organization would be willing to offer to peer professionals:</i> One training a year will be provided in Tuolumne County to other service providers on topics requested (e.g. training on the effects of trauma/violence on brain development in young children, creating supportive environments for children, building resiliency).</p>
<p>Contracts shall stipulate a requirement for grantee to participate in the collaborative media outreach campaign. Including quarterly meetings to organize outreach efforts.</p>
<p><i>Please list your experience in successful community outreach, including media outlets, social media campaigns, etc.</i></p> <ul style="list-style-type: none"> • Information booths at the ICES Children's Fair, Baby Fair, Stand for Children, Columbia College Child Development classes, presentation to faith communities (Church Secretaries and Parish Nurses) on community services and resources, Lamaze/Birthing Classes at Sonora Regional Medical Center, Parent Co-ops, Church Mom's Clubs, PTA's, Black Oak Casino Family Wellness Day, presentations at Board of Supervisors meetings, YES Partnership and Tuolumne County SELPA (Special Education) meetings. • Distribution of printed materials and other media: Pamphlets/brochures, ICES newspaper (distributed once a year in Wednesday's free Union Democrat), ads in Union Democrat, ICES website, phone book ads, athletic field signs, local Regal movie theatre, InfoNet, Public Health Flipchart, MyMotherlode.com, Facebook, Community Calendar, Craigslist, Local Radio stations- KKBN/KVML

FIRST 5 FUNDS CANNOT BE USED TO SUPPLANT

State law prohibits Commission funds from funding existing levels of service or programs. To ensure compliance with this provision, please provide the following information. If you have questions about how to fill out this form, please call Sarah Garcia 536-2070.

- Has your organization provided any of the following services in Tuolumne County in FY 18/19 with any type of funding, including First 5 funding:

Service	Yes	No
1. Teach parenting skills to caregivers	X	
2. ASQ screening; and/or teach parents about developmental milestones.	X	
3. Engage caregivers with children's therapy.		X
4. Link caregivers to addiction treatment and recovery support.	X	
5. Provide new mothers with depression screening and treatment referrals	X	
6. Assist caregivers in building supportive networks with clean and sober family and friends.	X	
7. Assist caregivers in addressing domestic/relationship violence.	X	
8. Assist caregivers in working toward financial stability: job skills & training, driver's licenses, GED, ESL, etc.		X
9. Target parents for support services following a child abuse report.	X	
10. Teach caregivers about the importance of <i>Talk, Read, Sing</i> in the context of early brain development.	X	
11. Assist caregivers in enrolling their children in a quality early learning program.	X	

- Did you receive any other funds other than First 5 funds to perform these services in the last year? Please explain.

Yes. Tuolumne County Behavioral Health provides from Mental Health Services Act (Prop 63) monies through Prevention and Early Intervention grant funding. Participants with children 6-18 will be reported to PEI, parents with 0-5 will be reported to First 5.

Indirect costs will be divided between the two funding sources.

- Monthly parenting workshops (12 total) utilizing Nurturing Parenting and Strengthening Families Two (2) - 10 week sessions for Parents in Recovery (Drug Dependency Court) will be offered during the contract period.
- Accept referrals from Parents, Behavioral Health, CWS, Schools, SARB board, SELF Program, ATCAA, CNVC, Catholic Charities, and other agencies for home visiting services (priority will be given to families with mental health challenges, as a way to buffer the effects of mental illness on children).
- Information sharing on the evidenced and researched based Nurturing Parenting program will be presented at three (3) events throughout Tuolumne County and weekly classes.

3. If so, will this other funding be available, to the best of your knowledge, in FY 19/20 and beyond for serving children birth to five? If yes, please provide more detailed information on this funding, such as the source of funding, dates and amounts. If no, please explain why not.

Mental Health Services Act (Prop 63) monies through Prevention and Early Intervention grant funding commenced from Tuolumne County Behavioral Health on 04/01/2009. It has renewed every fiscal year continuously since then and has totaled \$965,516.

Appendix A: The Protective Factors Framework

Five Protective Factors are the foundation of the Strengthening Families Approach: parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social and emotional competence of children. Research studies support the common-sense notion that when these Protective Factors are well established in a family, the likelihood of child abuse and neglect diminishes. Research shows that these protective factors are also “promotive” factors that build family strengths and a family environment that promotes optimal child and youth development.

Parental Resilience

No one can eliminate stress from parenting, but a parent’s capacity for resilience can affect how a parent deals with stress. Resilience is the ability to manage and bounce back from all types of challenges that emerge in every family’s life. It means finding ways to solve problems, building and sustaining trusting relationships including relationships with your own child, and knowing how to seek help when necessary.

Social Connections

Friends, family members, neighbors and community members provide emotional support, help solve problems, offer parenting advice and give concrete assistance to parents. Networks of support are essential to parents and also offer opportunities for people to “give back”, an important part of self-esteem as well as a benefit for the community. Isolated families may need extra help in reaching out to build positive relationships.

Concrete Support in Times of Need

Meeting basic economic needs like food, shelter, clothing and health care is essential for families to thrive. Likewise, when families encounter a crisis such as domestic violence, mental illness or substance abuse, adequate services and supports need to be in place to provide stability, treatment and help for family members to get through the crisis.

Knowledge of Parenting and Child Development

Accurate information about child development and appropriate expectations for children’s behavior at every age help parents see their children and youth in a positive light and promote their healthy development. Information can come from many sources, including family members as well as parent education classes and surfing the internet. Studies show information is most effective when it comes at the precise time parents need it to understand their own children. Parents who experienced harsh discipline or other negative childhood experiences may need extra help to change the parenting patterns they learned as children.

Social and Emotional Competence of Children

A child or youth’s ability to interact positively with others, self-regulate their behavior and effectively communicate their feelings has a positive impact on their relationships with their family, other adults, and peers. Challenging behaviors or delayed development create extra stress for families, so early identification and assistance for both parents and children can head off negative results and keep development on track.