

Lake County Collaborative Prevention Plan

COLLABORATIVE AGENCIES

Lake Family Resource Center, Lake County Office of Education, Healthy Start, Robinson Rancheria, Scotts Valley Band of Pomo Indians, Habematolel Pomo of Upper Lake

C o u n t y P h i l o s o p h y f o r P r e v e n t i n g C h i l d A b u s e

Philosophy

The philosophy of Lake County Family/Tribal PRO (Positive Results & Outcomes) is to enrich the lives of individuals, children and families by cultivating the strengths of our community to reach its full potential. As a community we will honor, nurture, and protect our children. Through our public and private partnerships we will influence collaboration and diversity toward our goal of zero tolerance of child maltreatment.

Positive Responses to Outcomes

Our children will lead future generations. All children are entitled to be safe, protected and provided for.

We believe that families that achieve health, education, employment and financial stability create respect for self, others and community.

Our leadership role is to educate, build trust, confidence, support and instill reassurance and self-esteem to accomplish family goals.

We promote zero (0) tolerance of child abuse and neglect and bridge Tribal and other services to achieve the health of our children, families and community.

O v e r c o m i n g O b s t a c l e s a n d M e e t i n g C h a l l e n g e s

T-PRO/Tribal-Positive Responses to Outcomes works collectively with all 6-Lake County tribes in the prevention and early intervention of child abuse.

T-PRO is overseen by Robinson Rancheria Band Pomo Indians of California, one of the 6-tribes within Lake County.

Each tribe is a government of itself with a Tribal Council body governing their individual tribe. All new endeavors must first be approved by the government body, which is time-consuming and delays progress.

The T-PRO Program is the first program within Lake County supported by Department of Social Services. In collaboration with Lake County Family Resource Services and Lake County Office of Education Health Start Program,

relationship building between tribal communities and non-tribal agencies must continue to overcome unforeseen resistance and/or lack of trust between the two.

Time and distance is a major obstacle. Lake County is a rural community in which a lake inhabits the center of the community, creating an obstacle of efficient travel to participants and partnering agencies. Limited transportation in tribal communities with limited public transportation furthers the obstacles that often prevent regular meetings with not only tribal colleagues, but also the families that are being served.

When working in a collaborative of agencies and tribes, there are layers of leadership and personnel to orchestrate details of the program. Attempts to attend all meetings often overburden the limited staff in T-PRO Department.

Demands are many with just 1-part-time staff and a supervisor whose job duties are not limited to just 1-program.

Limited funding limits outreach services, reducing or delaying successful outcomes to the families being served.

County Team Objectives

Objective	Who is Responsible	Implementation	Completion	Documentation of Success
1. Fully train workers in new tool & timeframes	Agency Coordinators	7/1/09	8/1/09	Compliance w/data entering timelines
2. Determine caseload size weighted for intensity	DR Core Team	7/1/09	9/1/09	Agreement between providers & DSS
3. Increase resources through nontraditional providers	DR Core Team	10/15/09	6/30/09	Engagement of faith community, veterans groups, service groups
4. Reconvene Oversight Advisory Council	DSS	9/1/09	1/31/09	Regular agendas, sign ins
5. Streamline referral process to other agencies	Oversight Advisory Council	10/1/09	6/30/09	Identification of key contacts at each agency
6. Cross-training between partners	DR Core Team	2/1/09	6/30/09	Participation of partner agencies & each agency familiar w/resources in community

Action Plan

Goal/Objective	Who is Responsible	Implementation	Completion	Documentation of Success
1. Increased Funding for Program Expansion	DR Core Team	7/1/09	6/30/11	Grants Obtained
1.1 Team Agrees to Identify & Prepare one major grant application per year	DR Core Team	7/1/09 7/1/10	6/30/10 6/30/11	Submitted Grant Applications
2. Track Recidivism Rates	DR Core Team	7/1/09	6/30/11	Tracking Reports
2.1 Track DR Worker SCARs to CWS	Agency Teams	9/1/09	6/30/10	Report of Family/Tribal PRO reports to CWS
2.2 Track Non-DR Agency SCARs to CWS re: DR Families	CWS	1/1/10	6/30/10	Report of DR Family SCARs rec'd from non-DR Agencies
2.3 Develop Tracking System to follow DR families for 2 years after exit	DR Team/CWS	7/1/10	6/30/11	Annual Reports of repeat SCARs re: DR Families after exit
3. Expand access to services from nontraditional providers	DR Team	7/1/09	6/30/11	Expanded Collaborative Associate Providers
3.1 Each DR agency engages one new nontraditional provider per year	DR Agencies	7/1/09	6/30/11	Addition of 1 new provider each year per each DR agency
4. Build Community Awareness of prevention & Family/Tribal PRO	DR Core Team, DR Oversight	4/30/10	6/30/11	Collaborative Prevention Model Developed w/ Children's Council
5. Coordination of Case Management Between Agencies	DR Core Team, DR Oversight	7/1/09	6/30/11	Informal coordination; DR Reps Participating in County-wide MDT