

# Santa Barbara County Collaborative Prevention Plan

## COLLABORATIVE AGENCIES

First 5 Santa Barbara County, Santa Barbara County Department of Social Services Child Welfare Services/  
Cuyama Family Resource Center, Santa Maria Bonita School District-Healthy Start, Guadalupe Unified School  
District-Family Resource Center, Lompoc Unified School District-Dorothy Jackson Family Resource Center, Santa  
Ynez Valley People Helping People, Isla Vista Youth Projects, Family Service Agency Santa Barbara/Carpinteria,  
Community Action Commission, CALM-Child Abuse Listening Mediation

## County Philosophy for Preventing Child Abuse and Neglect

Santa Barbara County will work collaboratively to achieve the goal that all children and families are free of child abuse and neglect. We believe that children and families are the strength and future of our community; they innately possess strengths and traditions that should be protected, preserved and fostered. To this end, we strive to engage and empower families utilizing evidence based practices to eliminate child abuse and neglect.

Our approach to working with children and families will be:

- Strength based
- Empower families to identify and believe in their abilities to problem solve
- Prevention based (5 protective factors)
- Family centered
- Culturally sensitive

## Overcoming Obstacles, Meeting Challenges, and Team Objectives

Challenges	Response to Challenges
1) Can Family Development Matrix (FDM) replace GEMS for First 5 funded partners?	No, the FDM will be entered into ILEARN, you will still have to enter the family intake for each family and the ASQ results, and referrals into GEMS
2) Which families should the FDM be completed with and can we be more specific in which clients to do the FDM with?	For First 5 funded partners, we will be utilizing the FDM with all Differential Response clients, General case managed clients and Health Case managed clients who are receiving treatment dollars. For CAC and CALM, all DR clients who will be case managed. CAC and CALM have the option to utilize the tool for other programs or clients not in the Differential Response program in their respective agencies if they would like. For families you see for less than 30 days it is not necessary, but you can if you feel that it would be beneficial.
3) Do referrals need to be tracked for outcomes and there is no spot for CAC/CALM as a referring agency	Yes, for First 5 funded partners we will track the types of services families are accessing through our referral tracking form on gems. CAC/CALM can be added under the other category until the form is revised.
4) Does the design team determine how to track assess/differential response clients?	FRC's, CAC and CALM have agreed at a meeting held on 8/11/09 that the referrals that are coming from CAC/CALM will be triaged to the FRC's and the lead contacts from CAC/CALM will work with the coordinators of the FRC to determine who will be the lead and complete/track the FDM assessment.

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Challenges	Response to Challenges
5) How do technical issues with computers get addressed	If the problem is with the ILEARN system those questions will go to Jerry Enderes If the problem is a GEMS issue those questions will go to the MO-SAIC staff, notifying the Program Officer Firewalls and other issues will be handled by each programs IT staff.
6) How will we find time to do the matrix and paperwork?	Programs participating in the project will have to have these conversations with staff to see how each agency can address this issue.
7) How do we reduce data entry?	For First 5 funded partners, you will not need to enter the Matrix into GEMS. You will enter into the ILEARN system, but will need to somehow cross reference families (GEMS ID) that are entered into GEMS to be able to show services provided
8) Will staff get an overview of the project, theory of change and create scenarios to support staff in the implementation of using the FDM	Yes, this will happen at the September 22, 2009 training.
9) How do we build partnerships across agencies for services when our agency doesn't offer it	These discussions can happen at the bimonthly coordination meetings.
10) Can you address the referral process for the DR?	Protocols have been developed please ask your FRC coordinator for a copy

**Action Plan**



**Family Development Matrix Project:**

- Work in partnership with the FDM project coordinators
- Participate in the FDM project conference calls/training as necessary
- Maintain ongoing communication with project coordinators
- Agency Coordinators are responsible for monitoring, training and reviewing data

**Front Porch-Differential Response:**

- Finalize MOUS with First 5 funded partners and CWS agencies
- Develop protocols for differential response path 1 for Family Resource Centers and path 2 and 3 for Child Welfare Services funded agencies
- Define parent engagement
- Schedule initial coordination meeting
- Provide participating agencies (the design team) with materials and information when appropriate
- Participate in bimonthly coordination meetings
- Send direct line staff as appropriate to trainings that will support the capacity of advocates in working with families
- Work with and participate in the local child abuse prevention council
- Provide ongoing training & technical assistance to staff utilizing the tools