

Embedding Trauma-Informed Practices in San Mateo County Systems that Serve Children and Families

First 5 San Mateo Commission Meeting
July 30, 2018



First 5 SMC EMCH Steering Committee: January 2018 Recommendation

Long-term goal: Embed Trauma-Informed Policies and Practices at every level of the system



Training and support for child- and family-serving organizations to become make internal operations more trauma-informed, including:

- **Agency Self-Assessments of Trauma-Informed Care**
- **Trauma 101:** Basic training on definition, prevalence, impacts and treatment of trauma as well as information about resiliency and protective factors
- **Reflective Practice Training and Supervision:** An approach that supports various models of relationship-based service delivery and can be used across disciplines, systems of care, and service models for children and families.



Training and resources for professionals working with children and families

- To understand trauma, its impacts, and treatment options
- That incorporates cultural humility into trauma-informed work



Education for parents to help recognize the signs and symptoms of trauma

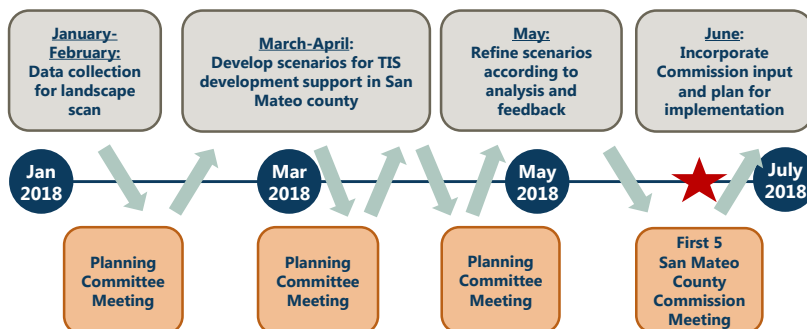
Trauma-Informed Systems: Planning Committee

Members and Affiliation

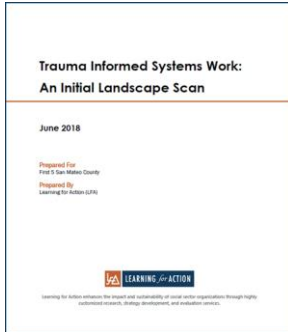
Michelle Blakely, First 5 San Mateo County
Natasha Bourbonnais, San Mateo County Human Services Agency
Suzie Hughes, One Life Counseling Services
Trish Erwin, SMC Health System, Family Health Services
Jean-Marie Houston, San Mateo County Office of Education
Michelle Sioson Hyman, Silicon Valley Community Foundation
Dr. Harvey Kaplan, SMC Health System, First 5 Commission (retired)
Sarah Poulain, Family Connections
Cheryl Oku, Gatepath
Kristin Reinsberg, UCSF Parent Infant Program, StarVista
Emily Roberts, First 5 San Mateo County
Sandra Phillips-Sved, Partners In School Innovation, First 5 Commission



Planning Process



Landscape Scan



Data and Perspectives Included

- A review of secondary literature
- Interviews with key stakeholders from:
 - First 5 Los Angeles
 - Genentech
 - Trauma Transformed
 - WestEd
 - ChildTrauma Academy
 - Bridge Housing
 - 4C's of San Mateo County
- Planning Committee member input

Key Findings

- There's a lot already happening in San Mateo County, but coordination is lacking
- Changing how systems work will take time; think about this as long-term developmental work
- Leadership needs to be engaged for systems change to occur
- Training is a necessary building block for systems change (it will build demand)

Key Assumptions

1 Cultural context – and cultural humility on the part of systems and providers - is foundational to trauma and resilience work.

2 To provide trauma-informed care, organizations must become trauma- and resilience-informed.

3 Becoming trauma- and resilience-informed requires doing deep work to reform organizational systems, values, and ways of working.

Trauma-Informed Organizations (TIO) Developmental Framework

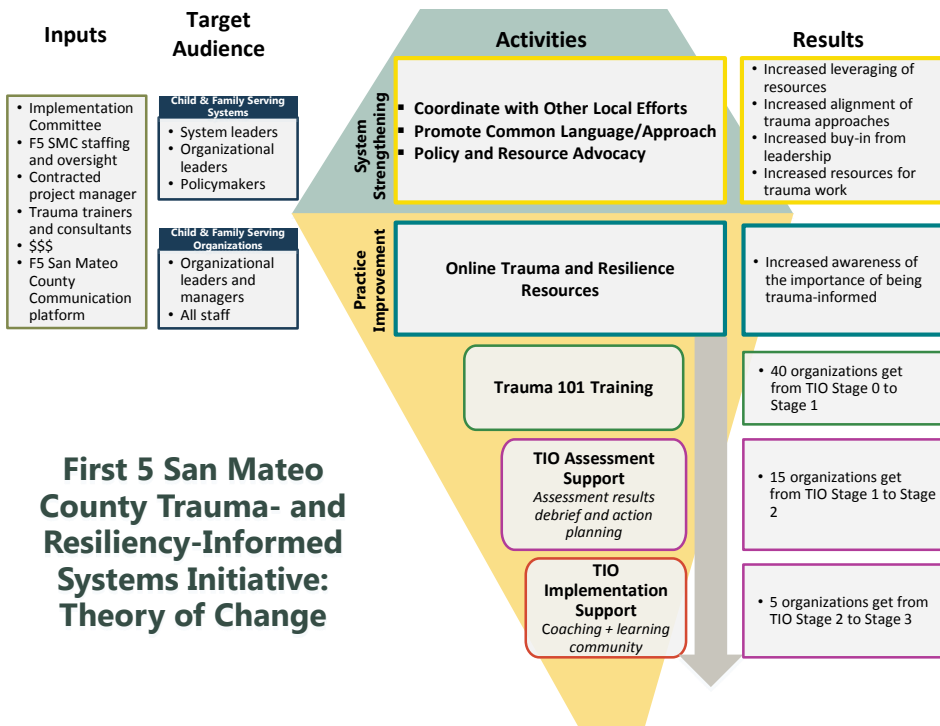
BECOMING TRAUMA AND RESILIENCY-INFORMED: 4 STAGES OF DEVELOPMENT

Principles Safety • Trust and transparency • Peer support • Collaboration and mutuality • Voice, choice, and self-agency • Culturally, historically, and gender-identity appropriate



Domains Leadership and governance • Training and workforce development • Screening, assessment, and services • Progress and results monitoring • Engagement and involvement • Physical environment • Cross-system collaboration • Media and marketing • Policies and procedures • Financing

Source: Center for Collective Wisdom, Trauma and Resiliency: A Systems Change Approach; Emerging Lessons and Potential Strategies from the Los Angeles County Trauma and Resiliency-Informed Systems Change Initiative, 2017. Downloaded from: <https://www.first5la.org/files/Trauma.pdf>



Initial Resource Allocation: \$410K available over 2 years; \$260K from First 5 San Mateo County + \$150K from San Mateo County Health System (MHSA funds)

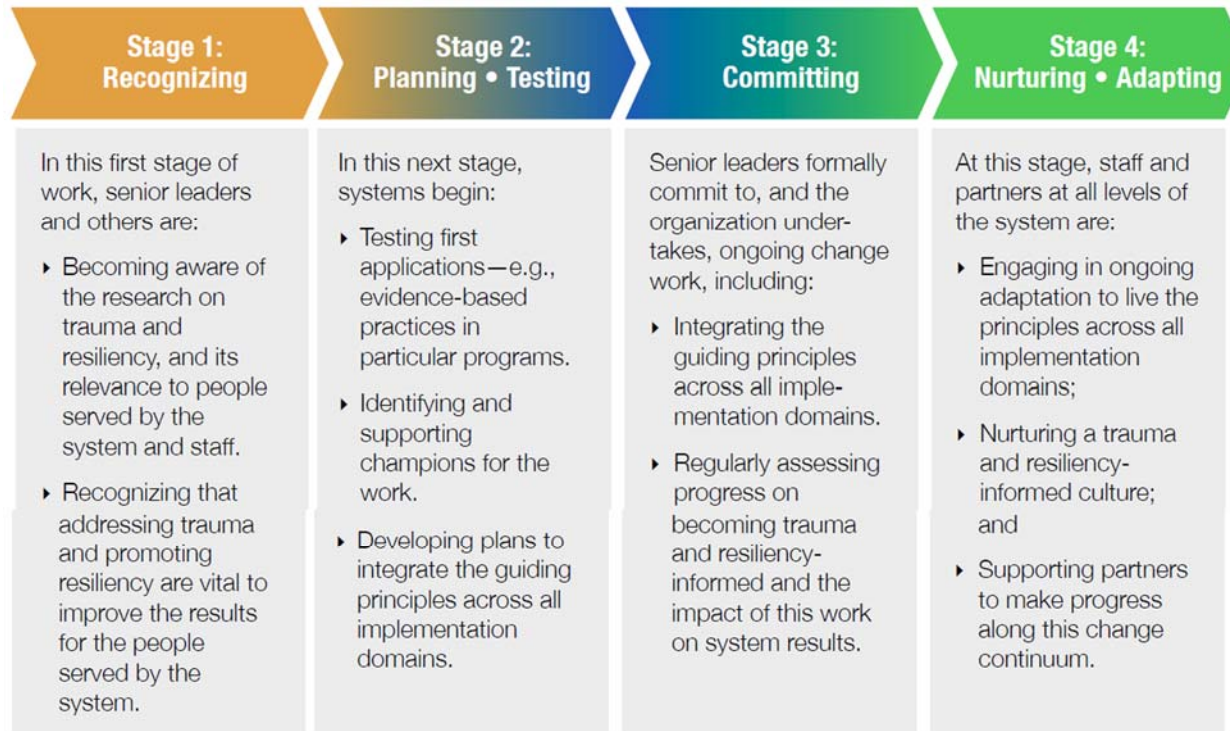
	Activities	Results	Initial Estimate	Projected Cost Drivers
System Strengthening	<ul style="list-style-type: none"> Coordinate with Other Local Efforts Promote Common Language/Approach Policy and Resource Advocacy 	<ul style="list-style-type: none"> Increased leveraging of resources Increased alignment of trauma approaches Increased buy-in from leadership Increased resources for trauma work 	<ul style="list-style-type: none"> \$80K 	<ul style="list-style-type: none"> Contracted and First 5 San Mateo County staff time (to build relationships and coordinate Implementation Committee activity) Meeting costs (space, food, materials) Evaluation and learning
Practice Improvement	<p>Online Trauma and Resilience Resources</p>	<ul style="list-style-type: none"> Increased awareness of the importance of being trauma-informed 	<ul style="list-style-type: none"> \$30K 	<ul style="list-style-type: none"> Market assessment Website design Resource curation and website administration
	<p>Trauma 101 Training</p>	<ul style="list-style-type: none"> 40 organizations get from TIO Stage 0 to Stage 1 	<ul style="list-style-type: none"> \$90K 	<ul style="list-style-type: none"> Project coordination Contracted trainers Meeting costs (space, food, materials) Evaluation and learning
	<p>TIO Assessment Support <i>Assessment results debrief and action planning</i></p>	<ul style="list-style-type: none"> 15 organizations get from TIO Stage 1 to Stage 2 	<ul style="list-style-type: none"> \$90K 	<ul style="list-style-type: none"> Project coordination Contracted consultants Evaluation and learning
	<p>TIO Implementation Support <i>Coaching + learning community</i></p>	<ul style="list-style-type: none"> 5 organizations get from TIO Stage 2 to Stage 3 	<ul style="list-style-type: none"> \$90K 	<ul style="list-style-type: none"> Project coordination Contracted consultants and/or coaches Evaluation and learning

Proposed Project Timeline

Phase 1 July-Dec 2018	Phase 2 Jan-Jun 2019	Phase 3 Jul 2019-Jun 2020
<p>Buildout</p> <ul style="list-style-type: none"> Convene Implementation Committee Hiring Budgeting and procurement Market assessment Relationship building Initiative refinement 	<p>Trauma 101 Training</p>	<p>TIO Program Implementation</p>
	<p>TIO Program Design</p>	<p>Evaluation & Learning</p>
		<p>Recommendations for long-term sustainability</p>

BECOMING TRAUMA AND RESILIENCY-INFORMED: 4 STAGES OF DEVELOPMENT

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Questions, Discussion, and Guidance





First 5 San Mateo County Strategic Plan 2015-2020 Revision



Kitty Lopez, First 5 San Mateo County
Michelle Blakely, First 5 San Mateo County
Christina Bath Collosi, VIVA Strategy + Communications

July 30, 2018



2015-2020 F5SMC Strategic Plan

Revision process - remains the same

Vision: Success for every child

Mission: First 5 San Mateo County promotes positive outcomes for young children and their families through strategic investments, community leadership, and effective partnerships



2015-2020 Plan Desired Outcomes

Revision process - remains the same

1. San Mateo County will give priority to young children and their families
2. Communities provide a safe and healthy environment for young children
3. Children have access to high-quality early care and education settings
4. Families feel connected to and supported by their community and able to nurture their child's health and development
5. Children have healthy attachments to their parents and caregivers
6. Children have access to and are utilizing appropriate health care services to meet their health and developmental needs



How will outcomes be achieved?

Revision process - remains the same

It was understood by the Commission and community that investment alone will not make significant impact on the outcomes.

For the duration of the 2015-2020 Strategic Plan, First 5 San Mateo County will focus on three primary community roles (not in order of priority):

1. Strategic Financial Investor
2. Community Partner in aligned efforts
3. Community Leader to advocate for the prioritization of young children and their families in decision making processes

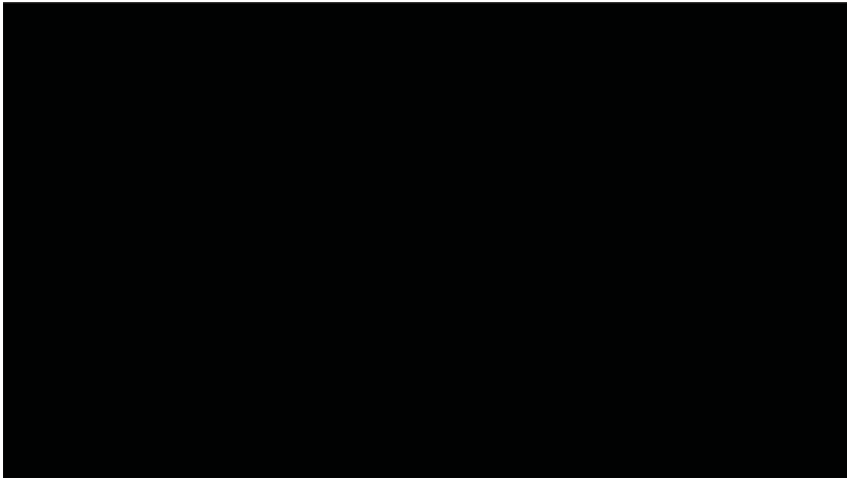


2015-2020 Plan Framework

- Focus Area: Early Learning**
 - 4 Strategies for Investment
- Focus Area: Child Health and Development**
 - 3 Strategies for Investment
- Focus Area: Family Engagement**
 - 4 Strategies for Investment
- Systems Building: Community Approach**
 - 3 Priority Approaches

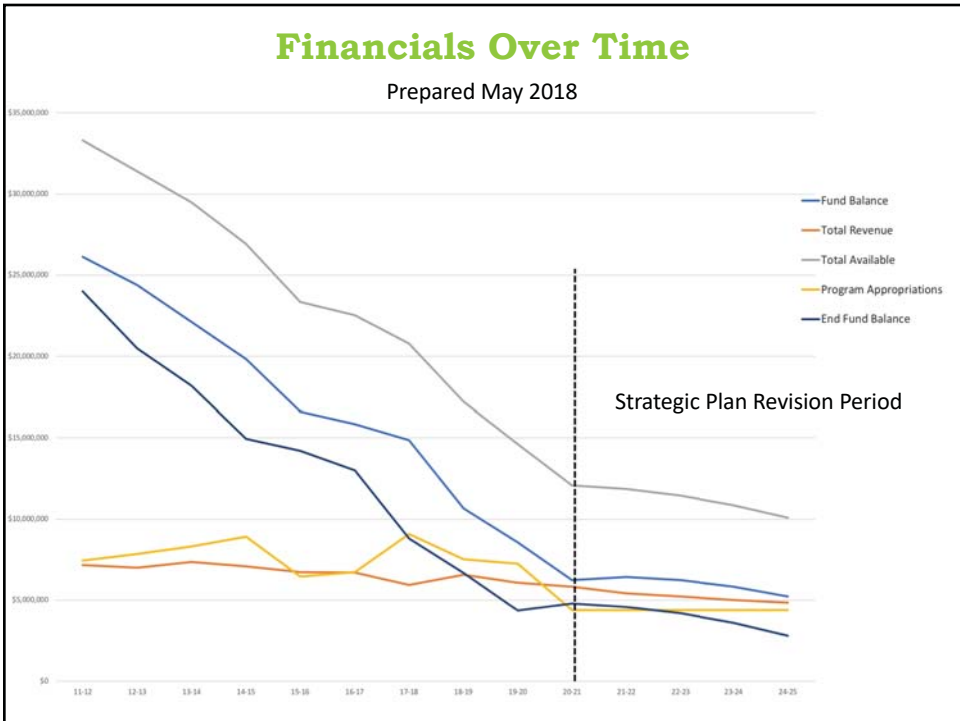



Our kids!




Persistent Challenge

How can First 5 San Mateo County maximize impact in the community at a time of declining financial resources?




SMC Public Forum – Key Themes

- 1. Convener and Collaborator:** Helping local funded and unfunded stakeholders tap into collaborative opportunities
- 2. Resource Maximization:** Leveraging, aligning, blending funding as well as ensuring available public funds are maximized before F5SMC funding is utilized
- 3. Impact Investor:** Focus investments on prevention and target intervention to the very highest needs children
- 4. Systems Catalyst:** Striking the right balance between program investments and systems improvements through cross sector initiatives and effective partnership
- 5. Advocate and Champion:** Impacting local and regional decision makers including community business leaders to prioritize young children



F5SMC Commission Strategic Planning Ad-hoc

- **Prioritize tightly connected and deep efforts aimed at root causes. By this, the committee means focusing on prevention and targeting services that are aligned with systems improvement efforts (systems coordination, partnership/ advocacy)**
- **Prioritize strategies with greatest return on investment**
- **Eliminate strategies that never got off the ground or did not have considerable traction**



Partnership Breakfast

Anne Campbell,

San Mateo County Superintendent of Schools

John Keene,

Chief Probation Officer, San Mateo County

Ken Cole,

Executive Director, San Mateo County Department of Housing

Srija Srinivasan,

Deputy Chief at San Mateo County Health System

Selina Toy Lee,

Director of Collaborative Community Outcomes



Thank you!

