

#### **Early Childhood Evaluation Advisory Subcommittee Meeting**

October 21, 2019 3:30-4:30 p.m.

First 5 San Mateo County 1700 S. El Camino Real, #405 San Mateo, CA 94402

**Committee Members/F5SMC Commissioners:** David Canepa, Neel Patel, Louise Rogers **Grantee Representatives:** Heather Cleary, Peninsula Family Service; Carol Elliott, Gatepath

**Staff:** Kitty Lopez, Michelle Blakely, Jenifer Clark

Minutes: Jenifer Clark

#### **AGENDA**

	Item	Presenter			
1.	Agenda Review & Announcements	Clark/All			
2.	Approval of the June 17, 2019 Early Childhood Evaluation Advisory Subcommittee Meeting Minutes (Attachment 2)	Rogers/All			
3.	Discussion: Grantee Representative Application and Process	Clark/All			
4.	Discussion: F5SMC Annual Report to First 5 California	Clark/All			
5.	<ul> <li>Updates: Ongoing Research &amp; Evaluation Activities</li> <li>Trauma- and Resiliency-Informed Systems Initiative (TRISI) Organizational Assessment (Attachment 5)</li> <li>Qualitative Study on Access to Child Care for Children with Special Needs and Challenging Behaviors</li> <li>WMG Roundtable Network Analysis</li> </ul>	Clark			
6.	Next Steps	Rogers/All			
7.	Adjourn	Rogers			
Next Meeting Date(s):  TBD in 2020					

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#### FIRST 5 SAN MATEO COUNTY

# Early Childhood Evaluation Advisory Subcommittee Meeting Minutes June 17, 2019

Commissioners Present: David Canepa

Commissioners Absent: Neel Patel, Louise Rogers

Grantee Representative(s): Heather Cleary

Staff: Michelle Blakely, Jenifer Clark, Kitty Lopez

#### 1. Agenda Review & Announcements

Due to the lack of a quorum of voting members, the agenda item to elect a committee chair was held over. The agenda was approved with no other changes.

# 2. <u>Approval of the October 2018 Early Childhood Evaluation Advisory Subcommittee Minutes</u> Minutes were approved with no changes.

#### 3. Committee Roles: Elect Chair and Discuss New Grantee Representative

Committee members discussed the process for filling the grantee-representative vacancy left by Tracey Fecher now that she has moved on from Gatepath. Carol Elliott, also from Gatepath, has stepped in for Tracey in the past when necessary; current committee members felt comfortable asking Carol to fulfill the remainder of Tracey's term as representative without opening up the application process. Staff will review the guidelines for identifying grantee representatives and determine how to move forward when the current term for representatives ends.

#### 4. Discussion: Interim Results of the F5SMC Census Readiness Survey

Jenifer Clark presented interim results of the F5SMC Grantee Census Readiness Survey, which is currently in the field and is scheduled to close on June 19<sup>th</sup>. Results indicate that, on average, management staff at our funded partners are more comfortable with engaging in census outreach and education activities than are line staff, who report more concerns and hesitation. The most commonly cited barriers to participating in outreach and education activities include:

- Lack of knowledge about the census
- Lack of time/resources to support these activities
- Concerns about how these activities might impact clients

Full results and a complete analysis will be available later this month, and can be presented to the Commission and any other County agencies that are interested. Results will also be used to inform the planning of the upcoming F5SMC Grantee Learning Circle on Census Education and Outreach. This Learning Circle is scheduled for August 22nd, from 9am to noon.



#### 5. Update: Ongoing Research & Evaluation Activities

The group received updates on various ongoing research and evaluation activities, including:

- Qualitative Study on Access to Child Care for Children with Special Needs and Challenging Behaviors: We have received two quotes from consultants who can implement focus groups in Spanish. We will review these quotes and select a consultant within the next week or two.
- Watch Me Grow Roundtable Network Analysis: We are working with Stanford Children's Health to finalize the respondent list.
- EQ+IP EL Provider Survey: Jenifer Clark and Kim Goutam of SMCOE are working to refine the survey that we used during the Comprehensive Evaluation, and this will be implemented with EQ+IP partners and programs during the next fiscal year.
- Trauma- and Resiliency-Informed Systems Initiative (TRISI) Organizational Assessment:
   F5SMC is putting together a workgroup with members of the TRISI Steering Committee to review and select an assessment that is the best fit for our local needs. This assessment is intended to gather baseline information about the policies, procedures, and practices that nurture or impede the creation of a trauma- and resiliency-informed work environment. The first meeting of this group will be planned for July.

#### 6. Next Steps

- Staff will review the current process and time frame regarding the grantee representative
  positions on the ECEA committee, and bring a recommendation about how to proceed to
  the next meeting. Carol Elliott will be invited to continue in this role for the remainder of
  Tracey Fecher's term.
- Staff from F5SMC and SMCOE will review the submittals for the consultant to work on the Qualitative Study on Access to Child Care for Children with Special Needs and select the award recipient.
- Full results of the Census Readiness Survey will be presented to the Commission at the next opportunity.
- The next meeting of the Early Childhood Evaluation Advisory Committee is planned for August 19<sup>th</sup>, 2019 from 3:30-4:30pm at F5SMC.

# BECOMING TRAUMA INFORMED

A Guide for Child Serving Programs & Organizations





#### Trauma-informed Approach Self-Assessment Checklist- Staff

#### **INSTRUCTIONS:**

The self-assessment checklist focuses on key principles of the trauma-informed approach (TIA) and identifies activities at all levels of the organization. It is based on materials from SAMHSA, the Network of Infant/Toddler Researchers, the Office of Adolescent Health, the University of Southern Florida and the work of Roger Fallot, Ph.D. and Maxine Harris, Ph.D.

The self-assessment checklist should be completed by representatives from all levels of the organization – administrative, supervisory, direct service providers, clerical and, if feasible, families and/or youth. Incorporating multiple voices ensures that all perspectives are heard and encourages buy-in at all levels of the organization. Respondents may complete the tool individually or the tool may be completed by a group, for example during a staff meeting.

There are seven principles included in the self-assessment with 4-6 items for each principle. The total number of items is 35. Respondents should answer all questions from their own perspective. There are no "right" answers, the goal is to understand the perceptions of those involved in the organization. Following each section, you are invited to provide one or more examples for each item in that section.

# WHAT IS YOUR ROLE IN THIS ORGANZATION? (E.G. Administrator, support staff, supervisor, direct service provider)

\_\_\_\_\_

#### **Key Principle: Safety**

	Trauma-informed Practice	Describes Us Well (4)	We Could Do More (3)	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
1.	Our policies address the physical safety needs of staff & those who receive services.						
2.	Our organization has policies & practices regarding program emergencies, crisis situations & legal reporting requirements.						
3.	All staff interact with each other & those who seek services in a respectful manner.						
4.	Attention is paid to reducing potential trauma triggers.						
5.	Policies & strategies are in place to prevent & address secondary traumatic stress.						
6.	Debriefing sessions are available following crisis or critical incidents.						
	Safety Score Total /24	X4	Х3	X2	X1	0	0

1.	
2.	
3.	
4.	
5.	
6.	

# **Key Principle: Trustworthiness and Transparency**

	Trauma-informed Practice	Describes us well	We Could Do More	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
		(4)	(3)				
1.	Our organization makes						
	decisions with transparency by						
	documenting the values and						
	rationale behind decisions.						
2.	Staff members clearly						
	communicate program services,						
	expectations & limitations and						
	obtain informed consent from						
	program participants.						
3.	There is a clear procedure for						
	the review of allegations of						
	boundary violations between						
	staff or between staff and						
	clients, including sexual						
	harassment & inappropriate						
	social contacts.						
4.	Our confidentiality policies,						
	including legal reporting						
	requirements, are clearly						
	explained &/or posted for all						
	who receive services.						
5.	Staff provides services in a						
	timely and reliable fashion;						
	changes/exceptions are clearly						
	communicated.						
Tri	ustworthiness & Transparency Total /20	Х4	Х3	X2	X1	0	0

1.	
2.	
3.	
4.	
5.	

# **Key Principle: Peer Support**

	Trauma-informed Practice	Describes us well (4)	We Could Do More (3)	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
1.	Our organization provides or refers families to resources for peer support & mutual selfhelp.						
2.	We support the concept of a caring community & take actions to develop resilience building supports.						
3.	We promote community connections for the families/youth we serve.						
4.	We provide opportunities for consistent, mutual support among staff.						
	Peer Support Total /16	X4	Х3	X2	X1	0	0

1.		
2.		
2.		
3.		
4		
4.		

# **Key Principle: Collaboration and Mutuality**

	Trauma-informed Practice	Describes Us Well (4)	We Could Do More (3)	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
1.	Families/youth participate in the development & implementation of individualized goals & service plans.						
2.	A Motivational Interviewing approach is used to determine readiness for change & preferred actions.						
3.	Staff participates in team building/organizational improvement practices.						
4.	Continuous quality improvement activities are part of the organization's culture.						
	Collaboration & Mutuality Total /16	X4	Х3	Х2	X1	0	0

Examples (provide one or more examples for each item above)
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1.		
2.		
3.		
4.		

# **Key Principle: Empowerment, Voice and Choice**

	Trauma-informed Practice	Describes Us Well (4)	We Could Do More (3)	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
1.	When feasible, families/youth exercise choice in the way services are provided e.g. site, individual/group, provider, etc.						
2.	Feedback about organizational services are sought from families/youth.						
3.	Families/youth serve on our organization's governing board and/or advisory committee.						
4.	Staff provides regular feedback to organizational leaders about the workplace environment.						
5.	Staff serves on the organization's governing board and/or advisory board.						
Er	npowerment, Voice & Choice Total /20	X4	Х3	X2	X1	0	0

1.		
2.		
3.		
4.		
5.		

# **Key Principle: Cultural, Historical, and Gender Issues**

	Trauma-informed Practice	Describes Us Well (4)	We Could Do More (3)	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
1.	Our environment						
	reflects/honors the diverse						
	groups in our community.						
2.	Services/reading materials are						
	available in the languages that						
	families/youth prefer.						
3.	Staff training is provided re:						
	culturally appropriate						
	practices and equity.						
4.	Program policies & practices						
	address issues of cultural and						
	historical oppression in the						
	population we serve.						
5.	Program policies & practices						
	address gender-related needs						
	in the population we serve,						
	including individuals who are						
	transgender.						
Cı	ıltural, Historical, & Gender Issues	X4	Х3	X2	X1	0	0
	Total						
	/20						

1.	
2.	
3.	
4.	
5.	

# **Trauma-informed Approach Administrative Support and Policies**

	Trauma-informed Practice	Describes Us Well (4)	We Could More (3)	Just Getting Started (2)	Does Not Describe Us (1)	Does Not Apply to Us (0)	Don't Know (0)
1.	There is a TIA champion/ committee responsible for assessing trauma related needs & developing a plan.						
2.	Our leadership communicates support & guidance for implementing TIA.						
3.	Our organization supports staff training regarding trauma, and trauma-informed responses.						
4.	Our Human Resource policies & practices address the impact of secondary traumatic stress.						
5.	Our organization has partnerships with community agencies that provide traumaspecific services.						
6.	We utilize evidenced-based practices to screen, assess & treat individuals in need of trauma-specific services.						
	General Practices Score Total /24	X4	Х3	Х2	X1	0	0

1.	
2.	
3.	
4.	
5.	
6.	

Areas of Greatest Strength:	
Greatest Opportunities for Growth:	

#### **Assessment Summary:**

Transfer scores for each component of the checklist to this summary sheet. Review the scores and examples to determine areas of strength for the organization and opportunities for growth. The Recommendations/Suggestions section offers best practices for each item. It is not meant to be exhaustive but serves as a starting point for possible changes. Utilize the action planning tool to document the action plan.

Total Trauma-informed Approach Score	
	/24
Safety Subtotal	
	/20
Trustworthiness & Transparency Subtotal	
	/16
Peer Support Subtotal	
	/16
Collaboration & Mutuality Subtotal	
	/20
Empowerment, Voice & Choice Subtotal	
	/20
Cultural, Historical & Gender Issues Subtotal	
	/24
General Principles Subtotal	
	/140
Grand Total	