### SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



ITEM: 3.21 (ID # 22520) MEETING DATE: Tuesday, September 12, 2023

#### **FROM :** PUBLIC SOCIAL SERVICES:

**SUBJECT:** DEPARTMENT OF PUBLIC SOCIAL SERVICES (DPSS): Receive and file the 2022 Child Abuse Prevention Community Needs Assessment (CNA) for Riverside County; All Districts. [\$0]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Receive and file the 2022 Child Abuse Prevention Community Needs Assessment (CNA) for Riverside County.

ACTION:Policy

7/20/2023

#### MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Gutierrez, seconded by Supervisor Spiegel and duly carried by unanimous vote, IT WAS ORDERED that the above matter is Received and filed as recommended.

Ayes:	Jeffries, Spiegel, Perez, Washington, and Gutierrez	
Nays:	None	Kimb
Absent:	None	Clerk
Date:	September 12, 2023	By: 🖌
xc:	DPSS	r r

A Recto Deputy

### SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$0	\$0	\$0	\$0
NET COUNTY COST	\$0	\$0	\$0	\$0
SOURCE OF FUNDS: N/A Budget Adjustment: No				ustment: No
For Fiscal Year: 23/24 – 27/2			<b>/ear:</b> 23/24 – 27/28	

### C.E.O. RECOMMENDATION: Approve

#### BACKGROUND:

#### **Summary**

The Riverside County Department of Public Social Services-Children's Services Division (DPSS-CSD), in cooperation with UC Davis, the HOPE Collaborative and Riverside County's Child Abuse Prevention Council (CAPC), completed a countywide Community Needs Assessment (CNA) in the fall of 2022. The purpose of the CNA was fulfilling four DPSS-CSD needs:

- 1. Identifying community service needs and barriers to service, in relation to child abuse and neglect prevention, intervention and treatment.
- Meeting funding requirements and guidelines set by the State of California Office of Child Abuse Prevention (OCAP), providing oversight and consultation in relation to funded programs: Child Abuse Prevention, Intervention and Treatment (CAPIT); Promoting Safe and Stable Families (PSSF); Community-Based Child Abuse Prevention (CBCAP) and Children's Trust Fund (CTF).
- 3. Using findings from the CNA to guide funding priorities for the use of CAPIT, PSSF, CBCAP and CTF funds.
- 4. To assist in development of the Families First Prevention Services Act (FFPSA) Comprehensive Prevention Plan.

The CNA process began in June 2022 with a goal of identifying community service needs and barriers in relation to child abuse and neglect prevention, intervention and treatment. As part of the process, DPSS-CSD, UC Davis and the Hope Collaborative surveyed a diverse population of Riverside County residents and service providers. Efforts were made to survey participants that could be representative of the county, while capturing information to appropriately guide funding priorities. The 2022 Child Abuse Prevention Community Needs Assessment (CNA) Report was reviewed and approved by the CAPC (HOPE) Board of Directors on June 28, 2023.

Based on the results of the needs assessment, and consistent with their responsibilities, the CAPC approved the use of CAPIT/PSSF/CBCAP/CTF funds for the following five service priorities identified in the needs assessment as most important to the prevention of child abuse by service providers:

### SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

- 1. Individual, conjoint, family or group counseling services designed to prevent the occurrence/recurrence of child maltreatment or domestic violence;
- 2. Mental health counseling for children and parents/caregivers;
- 3. Substance abuse counseling and services for children and parents/caregivers;
- 4. Parent Education classes for adults who need assistance strengthening their emotional attachment to their children, learning how to nurture their children and understanding general principles of discipline, care and supervision;
- 5. Support of the Child Abuse Prevention Council.

DPSS intends to use CAPIT/PSSF/CBCAP/ CTF funds through the release of multiple Requests for Proposals (RFP) and/or Requests for Qualifications (RFQ) to secure contractors to provide these services for residents of Riverside County and/or to augment existing or fund new services consistent with the needs assessment criteria.

DPSS also intends to issue an RFP for the provision of CAPC services.

Pursuant to State guidance, Riverside County DPSS will submit the CNA to the Board of Supervisors to receive and file.

#### Impact on Residents and Businesses

The CNA will ensure adequate service offerings are made available to families or individuals in need of the identified services (Counseling, Body Ownership Education, Parenting Education, Domestic Violence and Substance Abuse) designed to prevent the occurrence/recurrence of child maltreatment.

#### **Additional Fiscal Information**

DPSS anticipates funding allocations for FY 23/24 - 27/28 as indicated below:

Funding Source	Amount
CAPIT	\$619,556
CBCAP	\$150,628
CTF	\$728,037
PSSF	\$1,144,720
TOTAL	\$2,642,941

#### ATTACHMENT:

#### ATTACHMENT A: 2022 Child Abuse Prevention Community Needs Assessment (CNA) Report

### SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

Brianna Lontajo, Principal Manage 9/5/2023 ent Analy

7/21/2023 ounse

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# COUNTY OF RIVERSIDE DEPARTMENT OF PUBLIC SOCIAL SERVICES CHILDREN'S SERVICES DIVISION

# Child Abuse Prevention Community Needs Assessment (CNA) Report

August 15, 2022



**Prepared by** 

UCDAVIS Continuing and Professional Education Human Services

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### Introduction

### Background

The evaluation team for the Division of Continuing and Professional Education – Human Services at the University of California, Davis (UCD) in collaboration with Riverside County Department of Public Social Services-Children's Services Division (DPSS-CSD), the HOPE Collaborative, and Riverside County's Child Abuse Prevention Council (CAPC), completed a county-wide Community Needs Assessment (CNA) in the summer of 2022. The CNA was completed with the purpose of fulfilling four DPSS-CSD needs:

- 1. To identify community service needs and barriers to services in relation to child abuse and neglect prevention, intervention, and treatment.
- To meet funding requirements and guidelines set by the State of California Office of Child Abuse Prevention (OCAP), which provides oversight and consultation in relation to the following funded programs: Child Abuse Prevention, Intervention and Treatment (CAPIT); Promoting Safe and Stable Families (PSSF); Community-Based Child Abuse Prevention (CBCAP); and County Children's Trust Fund (CCTF).
- 3. To use findings from the CNA to guide funding priorities for the use of CAPIT, PSSF, CBCAP, and CCTF funds.
- 4. To assist in development of the Families First Prevention Services Act (FFPSA) Comprehensive Prevention Plan.

### Allocation of Funds

Riverside County DPSS-CSD is responsible for monitoring the distribution, use and evaluation of CAPIT, PSSF, CBCAP, and CCTF funds to eligible agencies within the county. This includes responsibility for the execution of contracts and development of measurable outcomes for the evaluation of agency interventions and activities. In

Riverside County, these funds are allocated through a competitive Request for Proposal process that in collaboration with the Board of Supervisor designated Child Abuse Prevention Council (CAPC) is instituted and driven by findings from the CNA. Agencies participating in the competitive process must also meet specific program funding requirements and guidelines in order to be eligible.

### Methods

### Overview

The CNA process began in June 2022 with the goal of identifying community service needs and barriers in relation to the prevention, intervention, and treatment of child abuse and neglect. As part of the process CNA, UCD conducted a series of surveys and focus groups with community stakeholders, service providers, and DPSS staff.

**CSD Survey.** An electronic survey was sent to all DPSS-CSD staff. Two-hundred twenty responses were received, 40% of those from Social Service Practitioners who work directly with families.

**Stakeholder Survey.** An electronic survey was sent to over 60 community stakeholders, including but not limited to service providers, school districts, and county departments (e.g., First 5, County Sheriff, etc.). Responses were received from 21 (35% of those invited) participants who represent a variety of stakeholders, including mental health service providers, healthcare providers, school districts, and law enforcement.

**Stakeholder Meeting.** A two-day community stakeholder meeting was held as part of the county's <u>California Child and Family Services Review (C-CFSR</u>) process. Community members representing a wide array of stakeholder groups participated in discussions around the county's service array, barriers to services, and prevention of entries to foster care.

Focus Groups. Ten focus groups with county staff and community stakeholders were

conducted as part of the county's C-CFSR process. The first 30 minutes of each focus group were dedicated to discussing the accessibility and impact of the top services identified by survey respondents as most effective for preventing child abuse and neglect.

**Analysis.** For the survey data, simple response percentages were calculated using Excel. For qualitative data, similar themes across focus groups were identified and summarized where appropriate.

### Results

### Overall

Across all data collection activities, parental and/or caregiver mental health was consistently identified as the most effective and most needed service. Other top services of importance include parenting classes, substance abuse treatment, and domestic violence services. The consistency of responses can imply that most important contributors to child abuse and neglect are the challenges that these preventative services would aim to address: mental illness, substance abuse, partner violence, and lack of parenting skills and knowledge.

**Most Effective Services.** Respondents were asked to identify the existing services that were most effective in preventing child abuse and neglect in Riverside County. A majority of respondents identified counseling/mental health services (73%) as the most effective existing service. Among counseling/mental health services, family counseling (42%) was identified as the most effective service, followed by parent counseling (28%).

Parenting education (52%), substance abuse treatment for parents/caregivers (45%), and domestic violence services/classes (38%) were the other existing services identified as most effective in preventing child abuse and neglect.

Table 1. Most effective services for child abuse and neglect prevention

Service	% of Respondents	
Counseling/Mental Health Services	73	

Parenting Education	52
Substance Abuse Treatment: Parent/Caregiver	45
Domestic Violence Services/Classes	38

**Most Needed Services.** Respondents were asked to identify the prevention services that were most needed but not currently available in Riverside County. Almost half of respondents (42%) indicated that additional parenting education services were needed. In particular, respondents noted the need for in-home parenting education services, in contrast to group parenting classes. Respondents noted the importance of individualized parent support and in-the-moment parent coaching during interactions with their children.

Respondents also noted the need for additional counseling/mental health services (28%), body ownership education for children/youth (23%), and substance abuse treatment for youth (18%).

Table 2. Most needed services for child abuse and neglect prevention

Service	% of Respondents	
Parenting Education	42	
Counseling/Mental Health Services	28	
Body Ownership Education	23	
Substance Abuse Treatment: Youth	18	

**Barriers to services.** Information about barriers to services was gathered through focus groups and the stakeholder meeting. Participants identified the following barriers:

- Availability of services
- Accessibility of services
- Cultural responsiveness

**Availability of services.** Participants identified limited availability of some services and regional variations in service availability as primary barriers to services. Participants noted limited availability of counseling/mental health services for families and parents,

especially in comparison to the more universally available counseling/mental health services for children/youth. Participants also noted that the availability of many services is more limited in the rural desert regions of the county than in the urban regions. In particular, substance abuse treatment services and domestic violence services are less available in rural regions.

Accessibility of services. Long waitlists, limited transportation, and insurance are perceived as additional barriers to services. Participants noted that when services are available, there can be long waitlists and it can be weeks to months before families are able to begin services. Long waitlists were attributed to staffing shortages, turnover, and new hires not being fully onboarded yet. Additionally, without reliable transportation, families may have difficulty accessing services. This is of particular concern in the rural desert regions where public transportation is limited. Without access to a reliable vehicle, families in these regions are unable to get to service providers. Another common barrier to mental health and/or substance abuse services is insurance. Youth and families on Medi-Cal often have difficulty finding providers who takes that form of payment.

*Culturally responsive.* Participants identified the availability of services in languages other than English, the availability of services for marginalized populations, and a cultural mismatch between providers and families as barriers to services. Although efforts are being made to expand the availability of services in languages other than English, especially Spanish, those efforts have not matched the growth in need. There are also limited services that address the unique needs of certain populations, including but not limited to disabled parents, families with mixed immigration status, and system involved youth who are pregnant or parenting. Furthermore, there is often a cultural mismatch between providers and the families they serve. Efforts are being made to recruit and retain service providers who reflect the ethno-racial make-up of the families they serve. However, the need for service providers from ethno-racial minorities has outpaced these efforts.

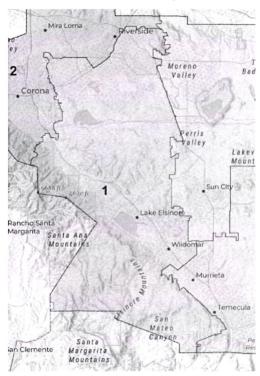
Addressing barriers through telehealth. Participants noted that the introduction and expansion of telehealth services during the pandemic helped address some of the barriers noted above. In particular, telehealth services increased the availability of services for families in rural desert regions of the county, so long as families are able to access to stable internet service.

### **Regional Differences**

There were no notable differences between the supervisorial districts in terms of the existing services identified as most effective in preventing child abuse and neglect and the most needed services. However, there were regional differences in barriers to services, with the availability and accessibility of services presenting a larger barrier in District 4.

## District 1: Service Zones 1 & 2

DPSS-CSD Regions: West Corridor, Metro, Valley, Southern



City	Zip Code(s)	Shared district(s)*
Canyon Lake	92587	3, 5
Correcto	92881	2
Corona	92883	2
Laka Elainara	92530	
Lake Elsinore	92532	5
March Air Reserve Base	92518	
Menifee	92584	3, 5
Murrieta	92562	3
Perris	92570	5
	92503	
	92504	2
Riverside	92505	2
Riverside	92506	2
	92507	5
	92508	
Sun City	92587	3, 5
Temecula	92590	
Wildomar	92595	

\*Indicates zip codes shared by districts.

#### **Most Effective Services**

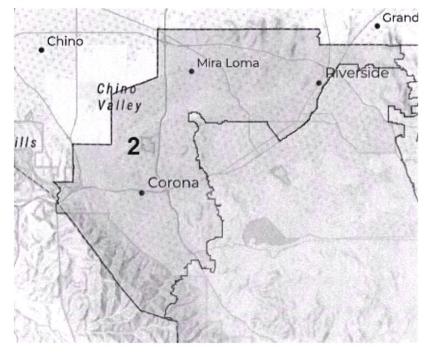
- 1. Counseling/mental health services
- 2. Parenting education
- 3. Substance abuse treatment: parent/caregiver
- 4. Domestic violence services/classes

### **Most Needed Services**

- 1. Counseling/mental health services
- 2. Parenting education
- 3. Domestic violence services/classes
- 4. Body ownership education (good touch vs. bad touch)

# **District 2: Service Zone 1**

DPSS-CSD Regions: West Corridor, Metro



City	Zip Code(s)	Shared district(s)*
	92878	
	92879	
Comme	92880	
Corona	92881	1
	92882	
	92883	1
Jurupa Valley	92509	
Mira Loma	91752	
Norco	92860	
	92501	
Discovida	92504	1
Riverside	92505	1
	92506	2

\*Indicates zip codes shared by districts.

### **Most Effective Services**

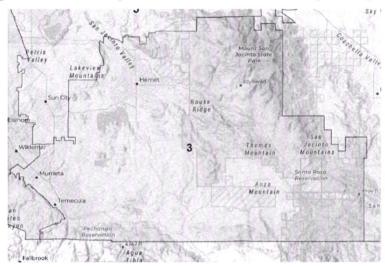
- 1. Counseling/mental health services
- 2. Parenting education
- 3. Substance abuse treatment: parent/caregiver
- 4. Domestic violence services/classes

### **Most Needed Services**

- 1. Counseling/mental health services
- 2. Parenting education
- 3. Body ownership education (good touch vs. bad touch)
- 4. Substance abuse treatment: youth

## District 3: Service Zones 1 & 2

DPSS-CSD Regions: Mid County, Southwest, Diamond Valley, Valley



City	Zip Code(s)	Shared district(s)*
Aguanga	92536	
Anza	92539	
Banning	92220	5
Canyon Lake	92587	1, 5
	92543	
Hemet	92544	
	92545	
ldyllwild	92549	
	92584	1, 5
Menifee	92585	5
Merinee	92586	
	92587	1, 5
Mountain Center	92561	4
	92562	1
Murrieta	92563	
	92564	
Nuevo	92567	5
Palm Springs	92264	2
	92581	
San Jacinto	92582	5
	92583	
Temecula	92591	
Temecula	92592	
Winchester	92596	

\*Indicates zip codes shared by districts.

### **Most Effective Services**

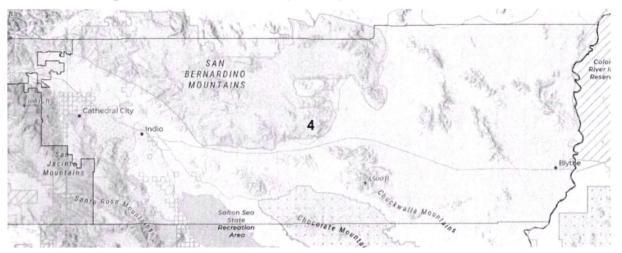
- 1. Counseling/mental health services
- 2. Parenting education
- 3. Substance abuse treatment: parent/caregiver
- 4. Domestic violence services/classes

#### **Most Needed Services**

- 1. Counseling/mental health services
- 2. Parenting education
- 3. Crisis intervention services
- 4. Substance abuse treatment: youth

## District 4: Service Zones 2 & 3

### DPSS-CSD Regions: Desert, Mid County, Valley



City	Zip Code(s)	Shared district(s)*
Disting	92225	
Blythe	92226	
Cathedral City	92234	
Coachella	92236	
Desert Center	92239	
Desert Hot Spring	92241	5
Indian Wells	92210	
	92201	
Indio	92202	
	92203	
La Quinta	92253	
Mecca	92254	
Moreno Valley		
Mountain Center	92561	3
אירום שליאור איז	92211	
Palm Desert	92255	
	92260	
	92262	5
Palm Springs	92263	
	92264	3
Rancho Mirage	92270	
Thermal	92274	
Thousand Palms	92276	

\*Indicates zip codes shared by districts.

### **Most Effective Services**

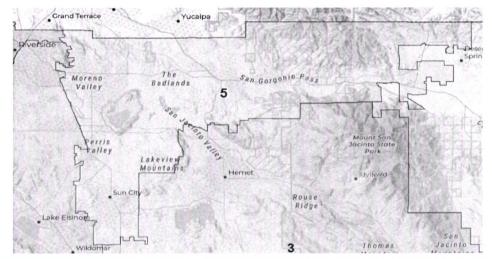
- 1. Counseling/mental health services
- 2. Parenting Education
- 3. Domestic violence services/classes
- 4. Substance abuse treatment: parent/caregiver

#### **Most Needed Services**

- 1. Counseling/mental health services
- 2. Parenting Education
- 3. Substance abuse treatment: youth
- 4. Body ownership education (good touch vs. bad touch)

## District 5: Service Zones 2 & 3

DPSS-CSD Regions: Mid County, Metro, Southwest, Diamond Valley, Valley



City	Zip Code(s)	Shared district(s)*
Banning	92220	3
Beaumont	92223	
Cabazon	92230	
Calimesa	92320	
Canyon Lake	92587	1, 3
Depart Hat Springs	92240	
Desert Hot Springs	92241	. 4
Homeland	92548	
Lake Elsinore	92532	1
March Air Reserve Base	92518	1
Menifee	92584	1, 3
Mermee	92587	1, 3
	92551	
	92552	
	92553	
Moreno Valley	92554	
	92555	
	92556	
	92557	
North Palm Springs	92258	
Nuevo	92567	3
Palm Springs	92262	4
	92570	
Perris	92571	
Riverside	92507	1
San Jacinto	92582	3
Whitewater	92282	

\*Indicates zip codes shared by districts.

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### **Most Effective Services**

- 1. Counseling/mental health services
- 2. Parenting Education
- 3. Substance abuse treatment: parent/caregiver
- 4. Domestic violence services/classes

#### **Most Needed Services**

- 1. Counseling/mental health services
- 2. Parenting Education
- 3. Body ownership education (good touch vs. bad touch)
- 4. Substance abuse treatment: youth

# Overview of Funding Sources CAPIT<sup>1</sup>

Funding Allocation for FY 2021/2022: \$619,556.00

CAPIT funds are available to public/private non-profit agencies with programs that serve the needs of children at risk of abuse or neglect. Funding priority is given to agencies that have demonstrated effectiveness in prevention or intervention of child abuse or neglect. Ninety (90) percent of funds must be allocated to program services (See Appendix 2 "List of Allowable Services and Activities by Funding Program" for examples of CAPIT allowable services). Ten (10) percent of funds can be used for administrative costs. Specific examples of allowable services that can be used to address mentioned needs and barriers follow.

- Behavior health, mental health services
- Domestic violence services
- Family Resource Center or other multi-service center
- Peer support
- Substance abuse services

### PSSF<sup>2</sup>

Funding Allocation for FY 2021/2022: \$1,381,734.00

PSSF funds are available to public/private non-profit agencies with programs that provide coordinated services for children and families across the continuum of prevention through aftercare. Funded agencies must focus efforts to address one or all

<sup>&</sup>lt;sup>1</sup> <u>http://www.cdss.ca.gov/ocap/res/pdf/CAPIT\_FactSheet.pdf</u>

<sup>&</sup>lt;sup>2</sup> <u>http://www.cdss.ca.gov/ocap/res/pdf/PSSF\_FactSheet.pdf</u>

four of the PSSF program components: 1) Family preservation; 2) Community based family support; 3) Time limited family reunification; 4) Adoption promotion and support. Ninety (90) percent of funds must be allocated to program services (See Appendix 2 "List of Allowable Services and Activities by Funding Program" for examples of PSSF allowable services). Ten (10) percent of funds can be used for administrative costs.

Specific examples of allowable services that can be used to address mentioned needs and barriers follow.

- Family Preservation
  - o Behavior health, mental health services
  - o Domestic violence
  - Family Resource Center or other multi-service center
  - Peer support
  - Substance abuse services
- Family Support
  - o Behavior health, mental health services
  - Domestic violence
  - Peer support
- Substance Abuse Services
- Time Limited Family Reunification
  - o Behavior health, mental health services
  - Domestic violence
  - Peer support
  - o Substance abuse services
- Adoption Promotion & Support
  - o Behavior health, mental health services
  - Family Resource Center or other multi-service center
  - Peer support

## CBCAP<sup>3</sup>

Funding Allocation for FY 2021/2022: \$83,533.00

CBCAP funds are available to public/private non-profit agencies with programs that provide community-based services to prevent and/or reduce the risk of child abuse and neglect in the community. Funded agencies must aim to strengthen and support families in the community through community-based collaborations and public/private partnerships. Ninety (90) percent of funds must be allocated to program services (See Appendix 2 "List of Allowable Services and Activities by Funding Program" for examples of CBCAP allowable services). Ten (10) percent of funds can be used for administrative costs. Specific examples of allowable services that can be used to address mentioned needs and barriers follow.

- Behavior health, mental health services
- Domestic violence
- Family Resource Center or other multi-service center
- Information & referral services
- Network development
- Peer support
- Public awareness/public education
- Substance abuse services

<sup>&</sup>lt;sup>3</sup> <u>http://www.cdss.ca.gov/ocap/res/pdf/CBCAP\_FactSheet.pdf</u>

# CCTF<sup>4</sup>

### Funding Allocation for FY 2021/2022: \$648,037.00

CCTF funds are available to private non-profit organizations or public institutions of higher education, with programs that provide community services to prevent or treat child abuse and neglect. Funded agencies must aim to support child abuse prevention councils (CAPCs). Ninety-five (95) percent of funds must be allocated to program services (See Appendix 2 "List of Allowable Services and Activities by Funding Program" for examples of CCTF allowable services). Five (5) percent of funds can be used for administrative costs. Specific examples of allowable services that can be used to address mentioned needs and barriers follow.

- Child abuse prevention coordinating Council (CAPC)
- Behavior health, mental health services
- Domestic violence
- Family Resource Center or other multi-service center
- Information & referral services
- Network development
- Peer support
- Public awareness/public education
- Substance abuse services

<sup>&</sup>lt;sup>4</sup> <u>http://www.cdss.ca.gov/ocap/res/pdf/CCTF\_FactSheet.pdf</u>

### Recommendations

Findings from the CNA provide insight to what Riverside County community stakeholders and service providers have identified as community service needs and barriers to services for the prevention, intervention, and treatment of child abuse and neglect. These needs and barriers can be used to guide funding priorities for the use of CAPIT, PSSF, CBCAP, and CCTF funds. The identified needs and barriers are as follows:

### Identified Needs to be Addressed:

- Parent/caregiver or child/youth mental illness
- Parent/caregiver or child/youth substance abuse
- Parent/caregiver knowledge of child development and positive parenting
- Domestic violence

### Identified Barriers to be Addressed:

- Availability of services
- Accessibility of services
- Cultural responsiveness

It is recommended that DPSS-CSD allocate CAPIT, CBCAP, PSSF, and CCTF funds to support services that address these needs and barriers. Services funded through these funding sources should implement evidence-based or evidence informed practices that are culturally sensitive and in the appropriate language necessary for DPSS-CSD clients.

Subsequent discussion with CSD staff indicated that efforts to mitigate accessibility issues exist; contracts are written to allow for shifts between providers when multiple providers have contract in order to mitigate waiting lists, and telehealth is encouraged when appropriate to address transportation barriers.

Table 4. Anticipated FY 2022/2023 Funding Availability

Funding Source	Program Type	Amount
CAPIT	Counseling	\$619,556
CBCAP	Safe Care	\$83,533
	Child Abuse Prevention Council	1
CTF	Counseling	\$728,037
	Counseling, Parenting Classes,	
	Substance Abuse, Domestic	
	Violence, Post Adoption, Family	
PSSF	Preservation Court	\$1,090,908
TOTAL		\$2,522,034

\*PSSF federal funding allocation reduced by \$290,826 for fiscal year 22/23.

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Table 5. Anticipated FY 2023/2024-2027/2028 Funding Availability

Funding Source	Amount
CAPIT	\$619,556
CBCAP	\$150,628
CTF	\$728,037
PSSF	\$1,144,720
TOTAL	\$2,642,941

# **DPSS Funding Recommendations**

Consistent with the findings and recommendations of this Community Needs Assessment, DPSS proposes to utilize the funds described above to support:

- 1. Counseling/mental health services
- 2. Parenting education services
- 3. Substance abuse treatment services for caregivers and youth
- 4. Domestic Violence Services
- 5. Child Abuse Prevention Council

These funds will be awarded to providers selected through a competitive procurement process and/or public partners with program expertise. Funding for selected providers and services will be based on availability of funds and specific needs. If, over time additional needs are identified, funding for additional services consistent with the CNA may be awarded.

# Appendix 1 – Zip Codes by Service Zone

Service	Zone 1	Service Zone 2	Service Zone 3
91752	92585	92220	92201
92501	92599	92223	92202
92502	92860	92230	92203
92503	92877	92320	92210
92504	92878	92530	92211
92505	92879	92531	92225
92506	92880	92532	92226
92507	92881	92536	92234
92508	92882	92539	92235
92509	92883	92543	92236
92513		92544	92239
92514		92545	92240
92515		92546	92241
92516		92549	92247
92517		92561	92248
92518		92562	92253
92519		92563	92254
92521		92564	92255
92522		*92581	92258
92548		92582	92260
92551		92583	92261
92552		92584	92262
92553		92586	92263
92554		92587	92264
92555		92589	92270
92556		92590	92274
92557		92591	92276
92567		92592	92282
92570		92593	92292
92571		92595	
92572		92596	

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Appendix

				PSSF <sup>2</sup>			
Allowable Services and Activities	<b>CAPIT</b> <sup>1</sup>	Family Preservation	Community-Based Family Support	Time-Limited Reunification	Adoption Promotion and Support	<b>CBCAP</b> <sup>3</sup>	CCTF⁴
Adoptive parent recruitment					>		
Advocacy						>	>
Basic needs, concrete supports	1	`			1	1	1
Behavior health, mental health services	>	>	>	>	>	>	>
Case management.	,	1	~		>	1	>
Child care/Day care	>	>	>	>	>	>	>
Differential Response	1	>	•			1	>
Disability services	>					>	>
Domestic violence services	>	1		>		1	1
Early childhood education					>		
Early childhood services	>	>	>			>	>
Family Resource Center or other multi- services center	>	>	*		>	>	>
Financial literacy education	~	>	~		>	>	>
Health services	1	1	•		1	1	>
Home visiting (0-5)	>	>	>			>	>
Housing services	>	>	>			1	>
Information and referral						>	>
Live Scan Fees							
Network Development						>	>
Parenting education	1	1				1	1
Parent leadership training						>	>
Parenting/sibling visitation	1		~			1	>
Peer support	>	>	>	>	>	>	>
Public Awareness/Public Education							>
Respite care/Crisis nursery	~	~	~	~	>	>	>
Substance abuse services	•	~	~	^		^	>
Team Decision Making	`	~	~		>		
Transportation	1	~		1	~	1	>
Youth programs	>				>	>	>

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