

PROGRAM INFORMATION:

Program Title:	All 4 Youth - PEI	Provider:	Fresno County Superintendent of Schools (FCSS)
Program Description:	<p>All 4 Youth is a partnership program between The Fresno County Department of Behavioral Health (DBH) and Fresno County Superintendent of Schools for children and youth ages 0-22 years old experiencing difficulties that affect them at school and at home.</p> <p>All 4 Youth is designed to enable youth and their families to access behavioral health services at school, in the community, or in the home. The goal of All 4 Youth is to remove barriers and increase access to a positive healthy environment in which to live and learn.</p> <p>All 4 Youth provides positive behavioral supports and mental health prevention and early intervention services in a school, preschool, community and home setting to children and youth.</p> <p>The purpose of the Prevention and Early Intervention (PEI) component is to prevent mental illness and reduce the long-term adverse impact on individuals and their families and reduce the impact of untreated mental illness. Prevention in mental health involves reducing risk factors or stressors, building protective factors and skills and increasing support. Prevention promotes positive cognitive, social and emotional development and encourages a state of well-being that allows the individual to function well in</p>	MHP Wor4k Plan:	4-Behavioral health clinical care Choose an item. Choose an item.

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

challenging circumstances. All 4 Youth utilizes a three-tiered integrated approach emphasizing primary preventions, secondary preventions, and linking to tertiary interventions (specialized/individualized systems for youth at risk of school failure, severe emotional and behavioral problems, abuse, neglect, trauma resulting from co-occurring substance use disorder, and/or risk of juvenile justice involvement).

Age Group Served 1: CHILDREN
Age Group Served 2: TAY
Funding Source 1: Prevention (MHSA)
Funding Source 2: Early Intervention (MHSA)

Dates Of Operation: January 7, 2019 – June 30, 2020
Reporting Period: July 1, 2020 - June 30, 2021
Funding Source 3: Choose an item.
Other Funding: Click here to enter text.

FISCAL INFORMATION:

Program Budget Amount:	\$4,352,581.00	Program Actual Amount:	\$3,397,145.40
Number of Unique Clients Served During Time Period:	3972		
Number of Services Rendered During Time Period:	16,169		
Actual Cost Per Client:	\$855.27		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Outpatient
Contract Term:	July 1, 2018 – June 30, 2021 with options for two (2) additional twelve (12) month periods	For Other:	Click here to enter text.
		Renewal Date:	July 1, 2022
Level of Care Information Age 18 & Over:	Enhanced Outpatient Treatment (caseload 1:40)		
Level of Care Information Age 0- 17:	Outpatient Treatment		

TARGET POPULATION INFORMATION:

Target Population:

PEI programs serve youth, families of those youth, school staff and professionals. Professionals involved in various aspects of these programs include school administrators, teachers, and school psychologist/therapist, rehabilitation specialists in addition to personnel from outside the particular school, including FCSS's behavioral health staff. PEI programs take place in school settings, preschool settings and in the home throughout Fresno County. In particular, programs in the schools and preschools are a mixture of school-wide, classroom, and non-classroom or non-instructional settings

CORE CONCEPTS:

- **Community collaboration:** individuals, families, agencies, and businesses work together to accomplish a shared vision.
- **Cultural competence:** adopting behaviors, attitudes and policies that enable providers to work effectively in cross-cultural situations.
- **Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services:** adult persons served and families of children and youth identify needs and preferences that result in the most effective services and supports.
- **Access to underserved communities:** Historically unserved and underserved communities are those groups that either have documented low levels of access and/or use of mental health services, face barriers to participation in the policy making process in public mental health, have low rates of insurance coverage for mental health care, and/or have been identified as priorities for mental health services.
- **Integrated service experiences:** services for persons served and families are seamless. Persons served and families do not have to negotiate with multiple agencies and funding sources to meet their needs.

Please select core concepts embedded in services/ program:

(May select more than one)

Community collaboration

Cultural Competency

Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services

Integrated service experiences

Please describe how the selected concept (s) embedded :

Community collaboration will be demonstrated by the partnering of FCSS with school districts throughout Fresno County for the provision of persons served services within the school setting. It will be further demonstrated by creating hubs within identified regions throughout the county. Persons served and families will be able to access services within the hub settings as an alternative to the school setting.

Cultural competency will be addressed through the provision of training of clinical staff in multiple cultural domains that are reflected by the various cultures and ethnicities of youth and families living in Fresno County. Clinical staff will be assigned to hubs and schools that are a good fit to the school and community culture.

Individual/Family-driven, Wellness/Recovery/Resiliency-Focused: Person served services will be focused on improving social/emotional/behavior functioning, increased ability to cope with the school and/or home environment. These characteristics may be impacting their relationships with others, their ability to make progress at school and their overall health and well-being. The goal of this program is to increase school and home success.

Integrated Service Experiences: Services will be provided at the school individually, in the classroom and on the campus. They will also be provided in the community and in the home when needed.

Access to underserved communities: By year 5 of the contract, all schools within Fresno County will have access to clinical staff including rural and underserved communities where services are limited and the persons served transportation is a barrier to access.

PROGRAM OUTCOME & GOALS

- **Must include each of these areas/domains:** (1) Effectiveness, (2) Efficiency, (3) Access, (4) Satisfaction & Feedback Of Persons Served & Stakeholder
- **Include the following components for documenting each goal:** (1) Indicator, (2) Who Applied, (3) Time of Measure, (4) Data Source, (5) Target Goal Expectancy

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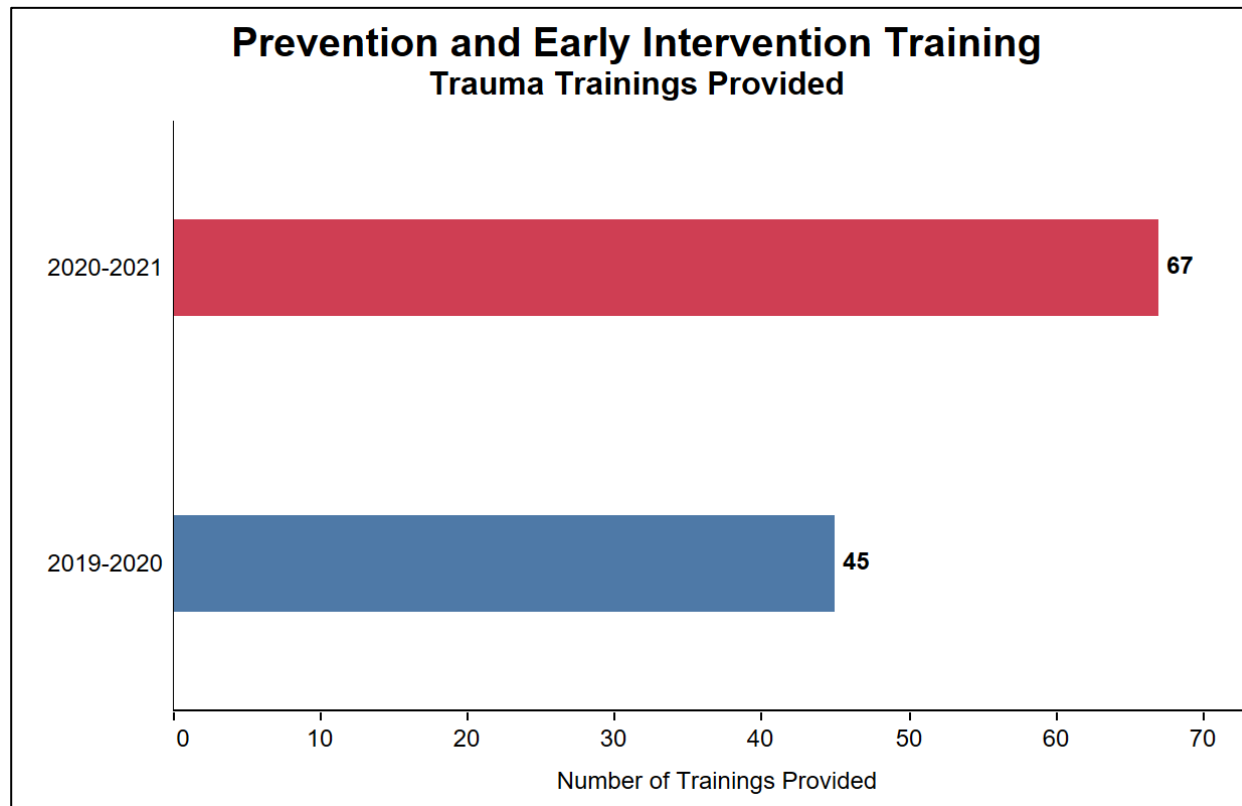
1. Efficiency
 - i. **Prevention and Early Intervention (PEI)**

Prevention refers to reducing risk factors or stressors, building protective factors and skills and increasing support. Prevention promotes positive cognitive, social and emotional development and encourages a state of well-being that allows the individual to function well in challenging circumstances. Early Intervention refers to services directed toward individuals and families for whom a short-duration (up to one year), relatively low-intensity intervention is appropriate to measurably improve a mental health problem or concern very early in its manifestation, thereby avoiding the need for more extensive mental health treatment or services; or to prevent a mental health problem from getting worse. PEI categories include outreach and engagement, early intervention, screening and assessment, crisis and referral training, school-based/education, and parent education and support services.

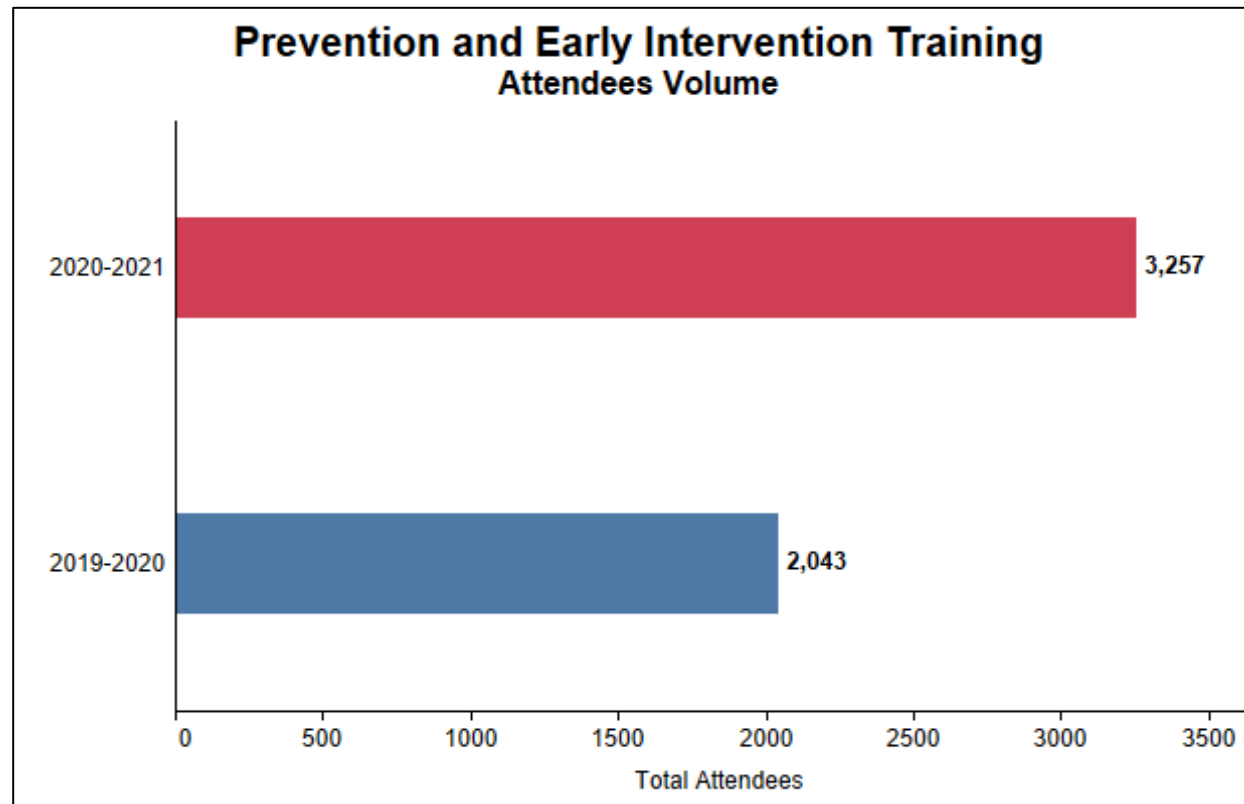
- i. Objective: To increase the number of stakeholders who have been trained and are familiar with Prevention and Intervention related services.
- ii. Indicator: Number of individuals trained in prevention and early intervention categories.
- iii. Who Applied: Stakeholders (i.e. youth, families, school personnel) in onboarded schools.
- iv. Time of Measure: July 1, 2020 – June 30, 2021
- v. Data Source: FCSS All 4 Youth training logs
- vi. Target Goal Expectancy: Increase number of hours and number of trainings provided to youth, families, and school personnel related to prevention and early intervention.
- vii. Outcome: From July 1, 2020 to June 30, 2021, 67 trainings were provided to Years 2 & 3 onboarded districts/schools. Training content included prevention and early intervention knowledge and strategies: trauma responsiveness & ACES, mindfulness and verbal de-escalation strategies. Participants included classified staff, certificated staff and administration (see table for specific job titles). During Year 2 of this contract in March 2020 COVID-19 hit our country, our community and our schools. With the stay-at-home order in place and the discontinuation of in-person instruction, the training format was required to shift from an in-person delivery model to a virtual platform. There were seven trainings that it was necessary to reschedule for Fall 2021 due to the risks of being in-person with school staff. During the remainder of Spring 2020 and over the summer, the trauma trainings were adapted for delivery in a virtual format via Zoom. The Trauma Trainings were delivered to schools in a virtual format beginning in August 2020 when schools re-opened with distance learning in place and continued to be delivered in this way for the entire 2020-21 school year (Year 3). The number of attendees (3,257) and the number of evaluations completed (2943) is the data source. Through the trainings provided, school staff have gained an increased awareness of prevention and intervention strategies. They have increased their knowledge of ACES (Adverse Childhood Experiences) and understanding of the impact ACEs have on brain development and behavior for both children and adults. They have gained skills and strategies for interpreting student behavior and responding to student behavior in a way that assists the child with regulating their behavior. The concepts taught in the school age trainings have been adapted and extended down to the 0-5 year-old population and directly to parents through parent support sessions. The data is summarized in the table below. Additionally, trainings have been provided to school staff to enhance the development of school-wide systems of support and implementing trauma focused responses to behavior within Mutli-tiered Systems of Support (MTSS). These trainings are an expansion of the

concepts provided through the Positive Behavior Interventions and Supports (PBIS) trainings and incorporate the social-emotional learning component. They also weave in the All4Youth clinician services as part of Tier III supports available within a school. Data is summarized in the tables below.

The graph below reflects the number of trainings provided in 2020-2021 (Year 3) compared to the number provided in fiscal year 2019-2020 (Year 2) with 67 trainings in Year 3 and 45 trainings in Year 2 exhibiting increase of 22 trainings in the current reporting year compared to the previous year.



The below graph reflects the total number of attendees at Year 3 (2020-21) for the 67 Trauma Trainings compared to the number of attendees in Year 2 (2019-20) for the 45 trainings.



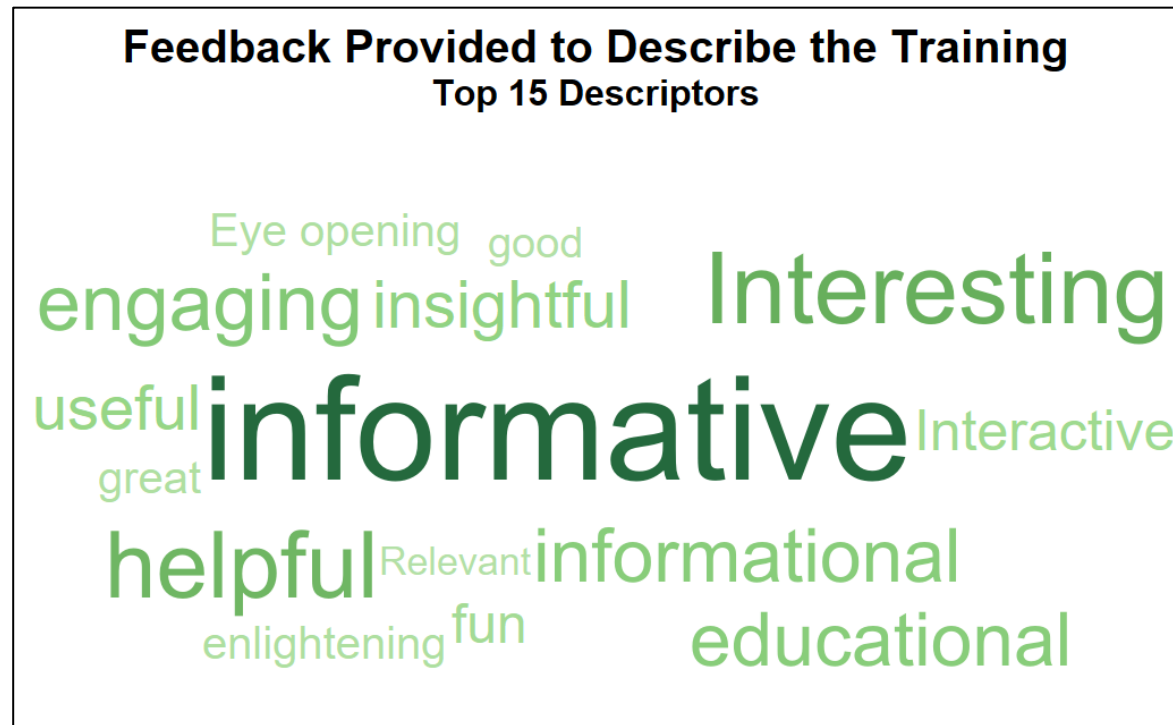
The spreadsheet graphic below reflects the number of attendees (3,257), the number of respondents (2,943) and the the satisfaction ratings on Trauma Trainings Modules 1, 2 and 3 evaluations during Year 3 from July 1, 2020 -June 30, 2021. Three dimensions were measured on a Likert Scale of 1-5 with "5" indicated the most positive rating possible. Averaged ratings were measured at 4.6 or above and indicate high satisfaction overall. The response rate was calculated at 90%, which is a high representation of the satisfaction of the total number of attendees.

Trauma Training Evaluations

Likert scale

Total # of Attendees	Total # of Evaluations Completed	Average of Overall Enjoyment of Traing	Average of Presenter was Knowledgeable	Average of Training was Educational
3,257	2,943	4.6	4.8	4.6

Respondents were also asked to provide anecdotal subjective feedback describing their experience with the Trauma Trainings during Year 3. The graphic below reveals the top 15 descriptors reported.



The Table below (next page) contains a comprehensive list of all Trauma Trainings provided in 2020-2021 with detailed information related to: District Trained, Training Date, Type of training provided, Audience, Total Number of Evaluations Completed, Likert Scale of satisfaction with training based on “Training was educational”, “Presenter was knowledgeable”, and “Overall enjoyment of training”. Anecdotal training feedback is contained in Appendix A.



All 4 Youth Onboarding Training Feedback (*Likert Scale*) 2020-2021

Rating Scale: 5 point Likert Scale (Lowest 1 to Highest 5)

District	Date	Type	Audience	Total # of Evaluations Completed	Training was educational	Presenter was Knowledgeable	Overall Enjoyment of Training
Burrel	9/21/20	Module 2	All Staff	11	4.8	5	4.9
Burrel	10/19/20	Module 3	All Staff	10	4.7	4.8	4.8
Central Unified	3/1/21	Module 1	Tilly & Madison	110	4.8	4.9	4.6
Central Unified	3/8/21	Module 1	Steinbeck & Roosevelt	65	4.9	5	4.8
Central Unified	3/8/21	Module 1	Riverbluff & Liddell	62	4.9	4.9	4.7
Central Unified	3/15/21	Module 1	Saroyan & Houton Kearney	53	4.7	4.9	4.7
Central Unified	3/22/21	Module 1	Teague	34	5	5	5
Central Unified	4/12/21	Module 2	Tilly & Madison	72	4.7	4.9	4.6
Central Unified	4/19/21	Module 2	Riverbluff & Liddell	61	4.9	5	4.8
Central Unified	4/26/21	Module 2	Steinbeck & Roosevelt	88	4.6	4.8	4.5
Central Unified	5/3/21	Module 2	Saroyan & Houton Kearney	46	4.7	4.8	4.6
Central Unified	5/10/21	Module 2	Teague	35	4.48	4.9	4.7
Central Unified	5/24/21	Module 1	Rio Vista	31	4.6	4.8	4.6
Clay Elementary	8/14/20	Module 1	All Staff	19	4.8	4.9	4.6
Clay Elementary	8/31/20	Module 2	All Staff	15	4.9	5	4.8
Clay Elementary	10/30/20	Module 3	All Staff	19	4.2	4.5	3.9
Clovis Unified	8/13/20	Module 1	Nelson	23	4.5	4.8	4.3
Clovis Unified	9/23/20	Module 1	Mountain View	All Staff			

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Clovis Unified	11/2/20	Module 2	Oraze Elementary School	51	4.5	4.7	4.4
Clovis Unified	12/16/20	Module 1	Pinedale	36	4.6	4.8	4.6
Clovis Unified	1/4/21	Module 1	Gettysburg	26	4.9	5	4.8
Clovis Unified	1/4/21	Module 1	Tarpey	38	4.8	4.8	4.8
Clovis Unified	1/6/21	Module 2	Nelson & Mt. View				
Clovis Unified	1/27/21	Module 2	Gettysburg				
Clovis Unified	4/14/21	Module 3	Mountain View	23	4.5	4.6	4.6
Clovis Unified	4/28/21	Module 3	Gettysburg	25	4.7	4.9	4.5
FCSS	8/4/20	Module 1	CTEC All Staff	24	4.7	4.9	4.6
Firebaugh-Las Deltas	8/3/20	Module 1	All Staff	21	4.9	4.9	4.9
Fresno Unified	8/12/20	Module 1	Susan B. Anthony	27	4.9	4.9	4.7
Fresno Unified	8/13/20	Module 1	University High	26	4.5	4.7	4.4
Fresno Unified	8/26/20	Module 1	Phoenix	13	4.8	4.9	4.8
Fresno Unified	9/1/20	Module 1	Muir	37	4.7	4.8	4.7
Fresno Unified	9/18/20	Module 2	Univeristy High	20	4.5	4.7	4.3
Fresno Unified	10/7/20	Module 2	Holland	31	4.8	4.9	4.7
Fresno Unified	10/14/20	Module 3	Univeristy High	25	4.1	4.6	4.1
Fresno Unified	10/22/20	Module 1	Wolters	22	4.5	4.7	4.6
Fresno Unified	10/29/20	Module 1	Ericson	39	4.5	4.6	4.5
Fresno Unified	11/5/20	Module 2	Phoenix	15	4.9	4.9	4.9
Fresno Unified	12/8/20	Module 2	Ericson	27	4.6	4.8	4.6
Fresno Unified	12/9/20	Module 3	Phoenix	15	4.8	4.9	4.7
Fresno Unified	12/15/20	Module 1	Wilson	36	4.3	4.8	4.4
Fresno Unified	1/12/21	Module 2	Muir	26	4.8	4.8	4.8
Fresno Unified	1/19/21	Module 3	Williams & Heaton	57	4.3	4.5	4.4
Fresno Unified	1/20/21	Module 3	Holland	45	4.7	4.8	4.8
Fresno Unified	2/2/21	Module 2	Colombia Elementary	29	4.8	4.8	4.7
Fresno Unified	2/17/21	Module 2	Wolters	22	4.2	4.4	4.1
Fresno Unified	3/1/21	Module 3	Ericson	38	4.4	4.6	4.4
Fresno Unified	1/26, 1/27 & 1/29/21	Module 1	Fig Garden	71	4.7	4.8	4.8

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Fresno Unified	3/9, 3/10 & 3/12/2021	Module 2	Fig Garden	64	4.7	4.7	4.7
Fresno Unified	4/20, 4/21, & 4/23/2021	Module 3	Fig Garden	59	4.7	4.8	4.6
Laton	10/26/20	Module 2	Laton HS	42	4.3	4.6	4.3
Laton	1/11/21	Module 3	Laton HS	41	4.3	4.6	4.3
Monroe	9/14/20	Module 1	All Staff	23	4.8	4.9	4.8
Monroe	10/12/20	Module 2	All Staff	23	4.7	4.8	4.7
Monroe	12/7/20	Module 3	All Staff	13	4.7	4.9	4.6
Parlier	8/20/20	Module	Parlier High & Jr High	87	4.8	4.9	4.7
Parlier	9/14/20	Module 1	Chavez, Martinez, Benavidez & Brletic	125	4.8	4.9	4.8
Riverdale	10/21/20	Module 1	Riverdale Jt.	108	4.6	4.7	4.5
Riverdale	11/18/20	Module 2	Riverdale Jt.	93	4.3	4.6	4.2
Riverdale	12/2/20	Module 3	Riverdale Jt.	89	4.2	4.3	4.1
Sanger Unified	8/2/20	Admin Retreat	Administration/Principals	19	4.4	4.5	4
Sanger Unified	12/7/20	Module 1	Sanger HS West Campus, Kings River/Taft HS & Comm. Day School	26	4.8	4.9	4.8
Sanger Unified	1/25/21	Module 2	Sanger HS West Campus, Kings River/Taft HS & Comm. Day School	99	4.5	4.8	4.5
Sanger Unified	3/15/21	Module 3	WAMS/CDS/Kings River/Taft	60	4.2	4.7	4.1
Sanger Unified	3/16/21	Module 1	Sanger High School East	82	4.7	4.9	4.6
Washington Colony	8/17/20	Module 1	All Staff	33	4.6	4.9	4.6
West Side Elem	2/22/21	Module 1	Certificated and Classified	20	4.9	4.9	4.9
Classified Staff		Certificated Staff	Administrators				
Administrative Assistants, Clerical, Bus Drivers, Custodial, Classroom Aids/Para Professionals, Cafeteria Staff, Front office Staff, Campus Safety Assistants, Library Staff, Sports Coaches, Sports Assistant Staff, Registrars		Teachers, Learning Directors, Administrators, Support Staff, Academic Coaches, Sports Coaches	Superintendents, Assistant Superintendents, Principals, Vice Principals, Directors, Coordinators, Contents Specialists,				

In addition to Trauma Trainings other prevention trainings were provided to the community that focused on how to support the social-emotional needs of 0-5 & Pre-School youth, Parenting Support and providing social-emotional support in K-12 classrooms. All trainings listed in the table below were provided via a virtual platform. Each training was designed and customized with content to meet the needs of parents and staff who were experiencing the challenges associated with COVID-19, social-distancing and virtual instruction.

Training Descriptions

0-5/Preschool Focused

These trainings are focused on providing early childhood educators with the necessary knowledge to understand how preschool age children's brains interpret and respond to the world around them, how stress affects the brain and body, and the impact that trauma has on the developing brain. Staff are provided with strategies such as mindfulness, verbal de-escalation, supporting students' emotional expression and self-awareness and learn when it's time to refer for additional services.

Parent Focused

This series focuses on providing parents with support as they juggle the responsibilities of being a parent, a teacher, and working from home. Parents are taught skills for managing daily behavior challenges and coping with stress during stay at home along with strategies for teaching children how to cope with stress and exploring fun ways to connect with your children.

Teacher/Staff PEI Trainings

This series focused on addressing mental health and social skills concerns under the constraints of social distancing. It is designed to assist staff with managing their shifting roles and the stress that comes from needing to make a quick change in the way they deliver instruction and support to their students. It also focuses on creating a work/life balance, reducing student anxiety, and empowering parents in their new roles.

Understanding Trauma: The road to resilience (Day 1)

Learn what trauma is, how the brain develops, what ACES are and how chronic stress affects well-being. Design your own resilience toolkit to support your students.

AB 2691: Trauma Informed Schools Initiative

AB 2691 recognizes the importance of providing school districts and charter schools information on how trauma impacts staff and students, paths of recovery, and how to avoid trauma inducing practices. Furthermore, staff development on how to become a trauma informed school is also included as a priority in AB 2691.

Dynamic Mindfulness: Foundations (Day 2)

Mindfulness Practices support SEL for all students Tied to LCAP State Priorities 4, 5 & 6

Our foundation training, Dynamic Mindfulness (DM) for Stress Resilience, is an introduction to the Transformative Life Skills (TLS) Program. Dynamic Mindfulness integrate mindful movement, breathing techniques and meditation for stress management, self-care and healing from personal and secondary

trauma. ACES is also explained in this training. Mindfulness Practices support SEL for all students Tied to LCAP State Priorities 4, 5 & 6. The Dynamic Mindfulness Foundation training is a prerequisite for this course. Learn to teach Dynamic Mindfulness as a tool for stress resilience, increasing attention, self-control and emotional regulation. Deepen your own Dynamic Mindfulness practice of mindful movement and breathing techniques.

De-escalation Strategies and Techniques (Day 3)

Verbal De-escalation training provides school staff with specific strategies and techniques for responding to student behavior through a trauma sensitive lense. Verbal De-escalation training is based on a foundation of understanding the ACEs (Adverse Childhood Experiences) research and the impact early childhood trauma has on the developing brain and the capacity of a child to regulate their behavior. Participants learn specific approaches and strategies for responding to behavior in a manner that helps de-escalate student behavior, increase adaptive behaviors, coping and resilience.

The table below reflects data on the 0-5 & Pre-School Focused trainings, Parent-Focused trainings and Teacher/Staff PEI Focused trainings provided in 2020-2021. 56 early childhood educators participated in “The Mindful Classroom for Early Childhood Educators” training. 196 parents participated in “Parenting Using Positive Discipline” sessions. 189 teachers and other school staff participated in the “SEL (Social-Emotional Learning) Toolkit for the Virtual Classroom”.

0-5 & Preschool-Focused Trainings

Date	Type	# of Sessions	Audience	# of Participants
9/24/20 - 10/1/20 - 10/8/20	The Mindful Classroom for Early Childhood Educators	3	Early Childhood Educators	56
Total Sessions:		3	Total:	56

Parent-Focused Trainings

Date	Type	# of Sessions	Audience	# of Participants
11/3/20 - 11/10/20 - 11/17/20	Parenting Using Positive Discipline (English)	3	Parents	25
11/3/20 - 11/10/20 - 11/17/20	Parenting Using Positive Discipline (Spanish)	3	Parents	7
2/9/21 - 2/16/21 - 2/23/21	Parenting Using Positive Discipline (English)	3	Parents	96
2/9/21 - 2/16/21 - 2/23/21	Parenting Using Positive Discipline (Spanish)	3	Parents	28
4/12/21 - 4/19/21 - 4/26/21	Parenting Teens Positive Discipline (English)	3	Parents	17
4/13/21 - 4/20/21 - 4/27/21	Parenting Teens Positive Discipline (Spanish)	3	Parents	23
Total Sessions:		18	Total:	196

Teacher/Staff PEI Trainings

Date	Type	# of Sessions	Audience	# of Participants
9/15/20 - 9/17/20 - 9/22/20 - 9/24/20 - 9/29/20 10/1/20 - 10/6/20 - 10/8/20 - 10/13/20 - 10/15/20	SEL Toolkit for the Virtual Classroom	10	Teachers and Other School Service Providers	189
Total Sessions:		10	Total:	189

2. Access

i. **Youth Served**

Youth served refers to the number of youth that have received All 4 Youth services (including Medi-cal related, PEI related, Private Insurance related, and linkage services).

i. Objective

1. To meet contract identified goals of number of youth served annually. Year one: 750 youth; Year two: 1680 youth; Year three: 2460 youth; Year four: 3240 youth served; Year five: 4020 youth served.

2. To increase penetration rates in identified districts.

ii. Indicator: Number of youth that have received an All 4 Youth service in the Fiscal Year 2020-21.

iii. Who Applied: Program youth served by the All 4 Youth program ages 0-22

iv. Time of Measure: July 1, 2020 to June 30, 2021

v. Data Source: Referral log/spreadsheet and DBH provided penetration rate report.

vi. Target Goal Expectancy: To provide services to at least the minimum number of identified youth for the fiscal year while increasing the number of youth served in each district

vii. Outcomes:

Outcome for Objective 1 (Year three goal: 2460 youth): From July 1, 2020 through the end of the fiscal year on June 30, 2021 a total of **3972** youth were actively served. FCSS All 4 Youth far exceeded the goal by serving an additional 1,512 youth.

The chart below reflects youth served by total number of youth and percentage of youth. At the close of the 2020-2021 fiscal year (June 30, 2021), All 4 Youth was actively serving 1876 youth.

Youth Actively Served At Any Time Within The 2020-2021 Fiscal Year		
Enrollment Status	Number of Youth	Percentage of Total Referrals
Youth Actively Receiving Services During the 2020-2021 Fiscal year	1876	47%
Youth Who Had a Referral Processed and/or Received a Referral or Linkage to an Outside Provider	1970	50%
Currently On-Hold or In Process	126	3%
Total Number of Youth Served 2020-2021 Fiscal Year	3972	

Outcome for Objective 2 (Penetration): Although the penetration rates reported below from July 1, 2020 to the end of the fiscal year on June 30th 2021 do not reflect solely the work that FCSS is doing, we are able to measure penetration prior to FCSS involvement (pre-2019) and measure that against FCSS All 4 Youth Implementation (reflected in these charts/graphs as Q1 2019). In every instance, there has been an overall increase in penetration post FCSS implementation. You will see that there is a dip in penetration in Q2 2020, but we believe that can be safely attributed to the Pandemic and fewer people being engaged in services at that time.

Data Source: Avatar via SiSense Dashboard (DBH-ISD)

Eligibility Data: Eligible beneficiaries of the 30 districts/schools onboarded from the Medi-Cal Eligibility Data System (MEDS) Monthly Extract File (MMEF), data uploaded in Avatar by zipcodes for the following Districts/Schools: **Year 1:** Firebaugh, Mendota, Kerman, Golden Plains, Sierra, **Year 2:** Alvina, Aspen Meadow, Aspen Charter, Caruthers, Central (3 additional schools), Clay Joint Elementary, Clovis (2 schools), Fowler, Fresno (5 schools), Kingsburg Elementary, Kingsburg Joint Union, Laton, Monroe, Orange Center, Pacific Union, Raisin City, Riverdale (4 schools), Sanger (3 schools), Selma, Washington Colony, Washington Unified, Westpark, Burrell, CTEC, Fresno (6 schools), Parlier (6 schools), University High, Westside **Year 3:** Big Creek, Parlier (1 school), Pine Ridge, Central, Clovis (13 schools), Fresno (7 schools), San Joaquin Memorial, Sanger (2 schools). Note that baseline data is captured beginning Q4 2018 prior to the

implementation of All 4 Youth. Furthermore, baseline data for Year 2 and Year 3 is captured between Q2 and Q3 in 2019 (Year 2) and between Q2 and Q3 in 2020 (Year 3) before the start of each school year, prior to the onboarding of additional schools/districts. The following districts/schools are not included in the penetration rate data as it was not available/listed in the data pull/data set from Sisense at the time of this reporting: Aspen Meadow, Aspen Charter, Central, Clovis, Orange Center, Riverdale, Burrell, CTEC, Parlier, University High, Westside, Big Creek, Pine Ridge and San Joaquin Memorial.

Served Data: Eligible beneficiaries served by FCSS.

Penetration Rate by Quarter and Year Overall:

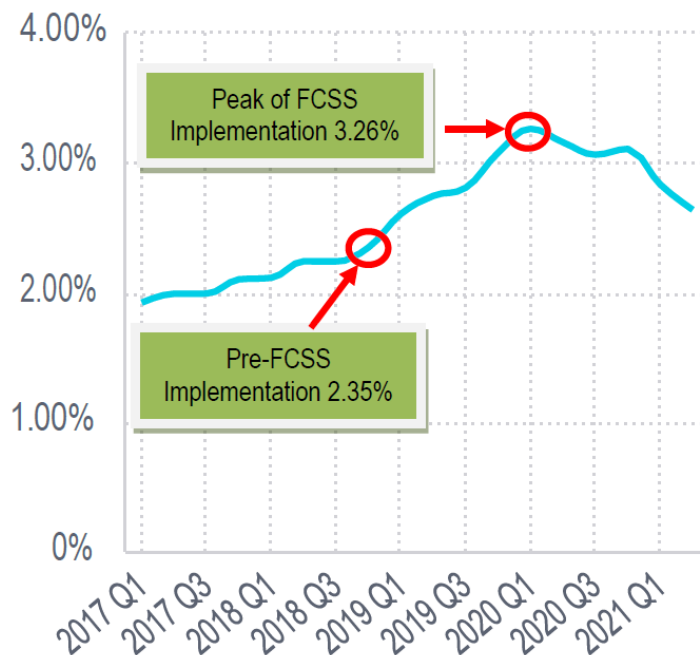
The charts below represent penetration results by quarter and by year respectively. The data points called out in the **Penetration Rate by Quarter** indicate the penetration rate pre-FCSS implementation (Q4 2018 – 2.35%) and the peak of FCSS Implementation (Q1 2020 – 3.26%). We consider Q1 2020 to be the peak of services as Q2 was significantly impacted by the pandemic (although penetration rates in Q2 2020 was still higher than pre-FCSS implementation – 2.35%). Additionally, the 3rd month of Q1 (March 2020) was also impacted by the pandemic, so it may be fair to conclude that penetration in Q1 2020 could have been higher as well. As you can see, penetration increase by almost a full percentage point (.91%) pre-FCSS implementation to the peak of FCSS implementation.

The data called out in the **Penetration Rate by Year** indicate a high point of 4.63% in 2020 pre COVID -19.

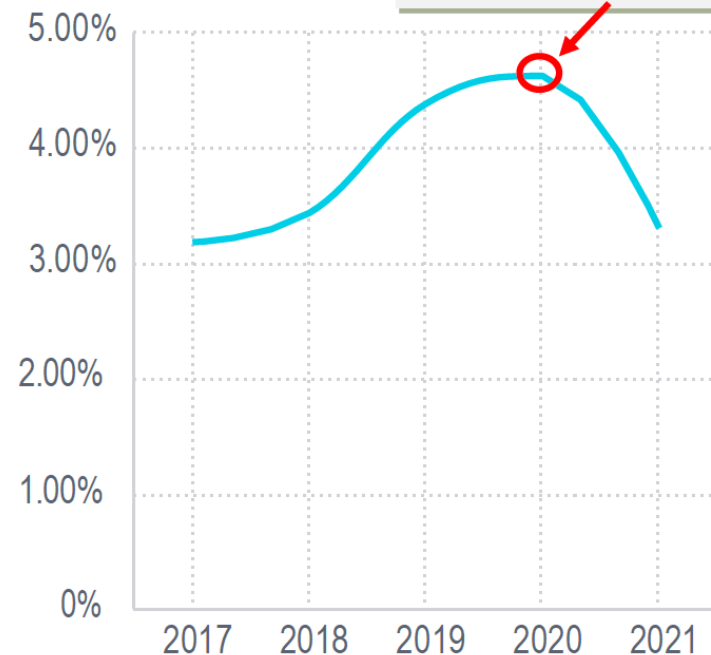
FCSS Penetration Rates Jul 1, 2021 10:07:11 AM fc

Filters age_group Exclude: 00 to 04, 60+, 25 to 59 | age_group Exclude: 00 to 04, 60+, 25 to 59

Penetration Rate by Quarter



Penetration Rate by Year

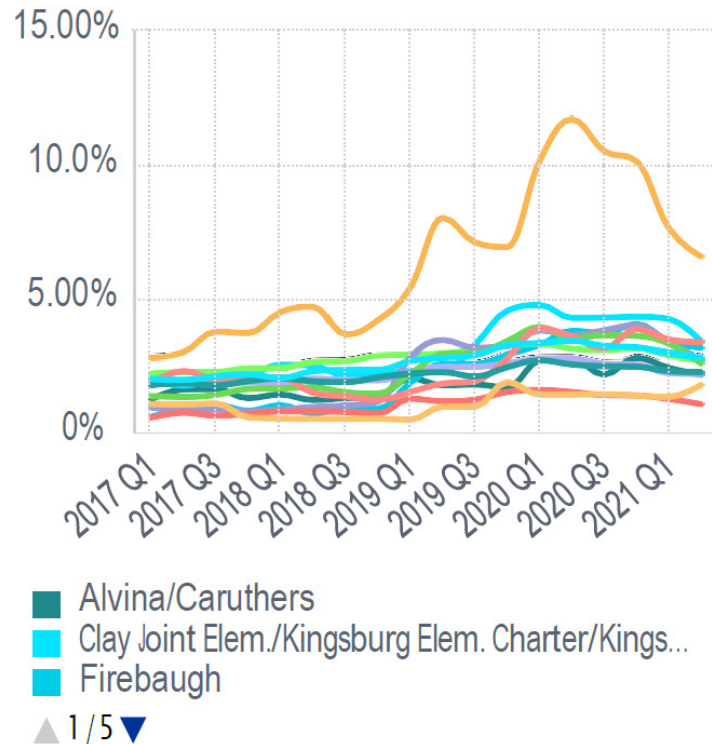
**Penetration Rate by Quarter and Year by Location:**

The charts below represent penetration results by quarter and by year by location where FCSS is providing services. The data points in the **Penetration Rate by Quarter by Location** indicate the penetration rate pre-FCSS implementation in each of the onboarded districts and the penetration rate for each district post FCSS Implementation in each of those districts. Again, we consider Q1 2020 to be the peak of services for most of our districts, as Q2 was significantly impacted by the pandemic. However, for a couple of our districts (Sierra Unified and Raisin City) their peak penetration rates did occur in Q2 2020. Additionally, the 3rd month of Q1 (March 2020) was also impacted by the pandemic, so it may be fair to conclude that penetration in Q1 2020 could have been higher as well in all districts. In

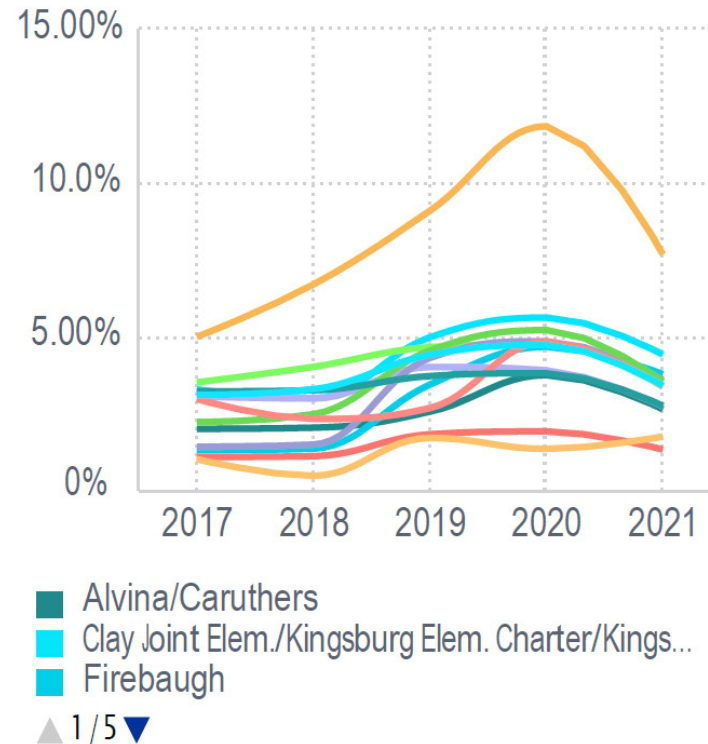
every instance, penetration rates increased in each district post FCSS implementation, often by 2+ percentage points in the peak quarters. The greatest impact was in Sierra Unified that saw a 7.5% increase in Penetration rates.

The data called out in the **Penetration Rate by Year by Location** indicates penetration by year pre-FCSS implementation (2018) for each of the onboarded districts and penetration for the first full year of FCSS implementation (2019) in each of those districts. Penetration for 2021 is incomplete at this time so is not represented but we are seeing trends in data showing some recovery of increasing penetration rates as the pandemic continues and levels off.

Penetration Rate by Quarter By Location



Penetration Rate by Year By Location



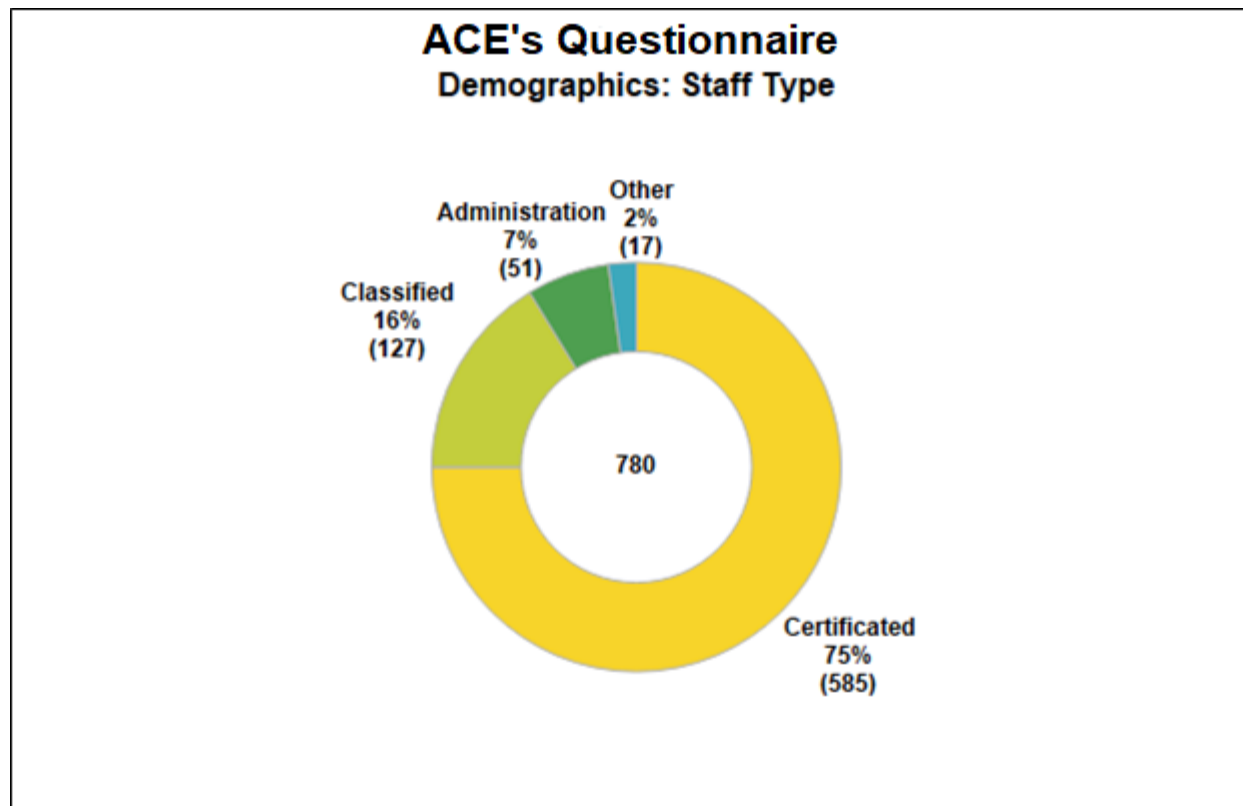
3. Effectivenessi. **School Personnel Efficacy**

School personnel efficacy refers to school personnel's reported knowledge and awareness of what ACE's are, how scores reflect the need for intervention for youth, and ability to identify and respond to students with challenging behaviors.

- i. Objective: School personnel will report achieving a desired level of efficacy in identifying and responding to students with challenging behaviors.
- ii. Indicator: School personnel's self-reported ability to identify and respond to youth with needs related to challenging behaviors.
- iii. Who Applied: All trained school personnel in onboarded districts.
- iv. Time of Measure: July 1, 2020 to June 30, 2021
- v. Data Source: Pre and post-test survey results.
- vi. Target Goal Expectancy: Increased ability to identify and respond to youth's needs.
- vii. Outcome: The ACES Questionnaire (formerly named the "Trauma Training Questionnaire") was administered to all onboarded districts/school Module 3 attendees during Year 3 from July 1, 2020 to June 30, 2021. It is attached for reference. The constructs that the questionnaire measure includes are: Did staff who received trauma and resilience training gain an understanding of what trauma is, how it impacts a person and what school staff can do to support students who have experienced trauma? Second, Did staff who received the training adopt attitudes and beliefs consistent with believing they can impact students who have experienced trauma in a positive way through their own actions and behaviors?

* See Appendix B, ACES Questionnaire
















During the 2020-21 school year 780 staff completed the ACES Questionnaire during training Module 3. The graph below depicts the total number of each staff type and the percentage they represent of total staff who completed the ACES Questionnaire. The majority (75%) of respondents were certificated (teachers) staff.



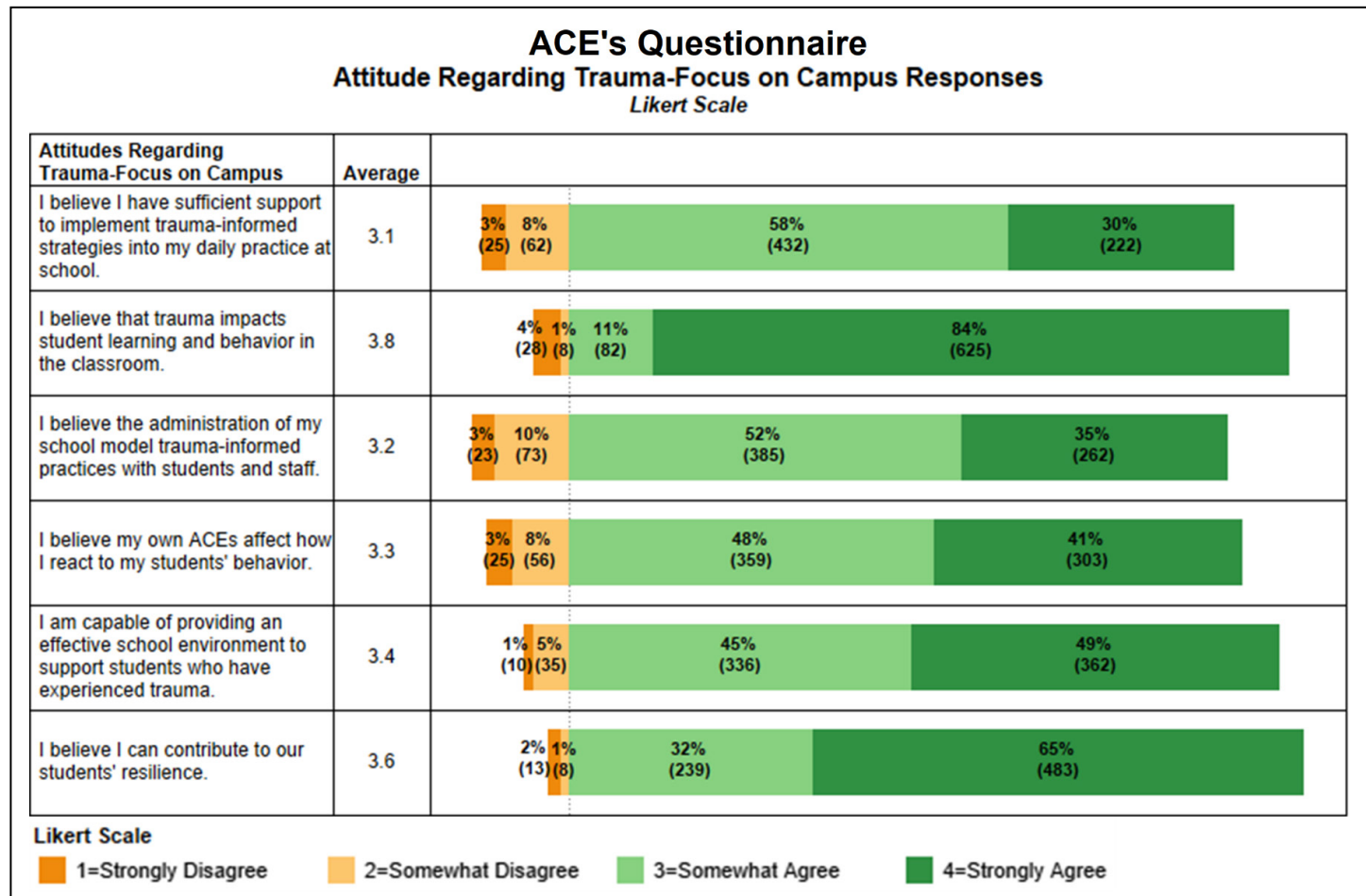
The table below lists the areas of knowledge assessed with the ACES Questionnaire and the percentage of staff with correct and incorrect responses to these items. The majority of respondents provided correct answers to the knowledge questions indicating that the training they received was effective at teaching them what ACES are, what impact they have on youth/adults, what impact they have on an individual's behavior and emotional regulation.

ACE's Questionnaire

Trauma Knowledge Responses

Trauma Knowledge	True	False
Adverse Childhood Experiences (ACEs) include all of the following...	 97% (726)	 3% (22)
Childhood trauma is very common	 99% (738)	 1% (10)
Children usually experience only one ACE	 7% (53)	 93% (697)
Trauma impacts behavior	 100% (749)	0% (2)
Misbehavior can be a sign of dis-regulation rather than just seeking attention, or to be "difficult"	 97% (729)	 3% (22)
Breathing can impact emotions and behavior significantly	 99% (743)	 1% (9)
Adverse childhood experiences (ACEs) have been correlated with negative health outcomes in adulthood	 98% (733)	 2% (18)
Teaching and modeling resilience can reduce the impact of ACEs in children	 97% (730)	 3% (22)

The table below lists the items assessing beliefs and attitudes about ACES and staff perception of their ability to positively impact students who have experienced ACES. The responses indicate that the majority of staff hold beliefs and attitudes that are consistent with the perception that they have the ability to positively impact students at school who have experienced ACES .



4. Satisfactioni. **School Climate**

School Climate refers to youth's, families', and school personnel's ability to express their perspective on the climate of their school campus and a forum to express needs or concerns related to behavioral health and social emotional development.

- i. Objective: Encourage expression of needs or concerns related to behavioral health and social emotional development by increasing the number of school climate surveys given and collected.
- ii. Indicator: Number of youth, families, and school personnel indicating they can express their perspective and needs.
- iii. Who Applied: All youth, families, and school personnel in onboarded districts.
- iv. Time of Measure: July 1, 2020 to June 30, 2021 (Treatment Outcome Survey 6-22 administered July 1, 2020 to June 30, 2021, Treatment Outcome Survey 0-5 administered July 1, 2020 to June 30, 2021 and The All 4 Youth Service Delivery Survey administered in Spring 2021)
- v. Data Source: Treatment Outcome Survey 6-22, Treatment Outcome Survey 0-5, The All 4 Youth Service Delivery Survey
- vi. Target Goal Expectancy: To increase the number of youth, families and school personnel that express their perspective and needs.
- vii. Outcome: The Treatment Outcome Survey is administered by staff at initiation of services, every 6 months and at discharge. The survey collects youth/parent responses by self report and there is a version for 0-5 youth (administered to the parent) and the other is for youth between 6-22 years of age (administered to the youth as appropriate for developmental factors). All 4 Youth adapted the Service Delivery Survey (formerly known as the "End of the Year District/School Satisfaction Survey) due to two factors between the last reporting period and this reporting period. The first factor was to account for COVID-19 and social distancing requirements which changed the way services were delivered and the second factor was changing the timing of when to give the survey itself. We found that giving the survey in the spring, instead of at the end of the year was beneficial in allowing for a higher response rate as well as more time to schedule a meeting and address any potential needs or concerns with a district if any came to light through the survey. The All 4 Youth Service Delivery Survey was administered electronically to all on-boarded Year 1, Year 2, and Year 3 districts/schools in the spring of 2021.

* See Appendix C for Treatment Outcome Survey 0-5

* See Appendix D for Treatment Outcome Survey 6-22

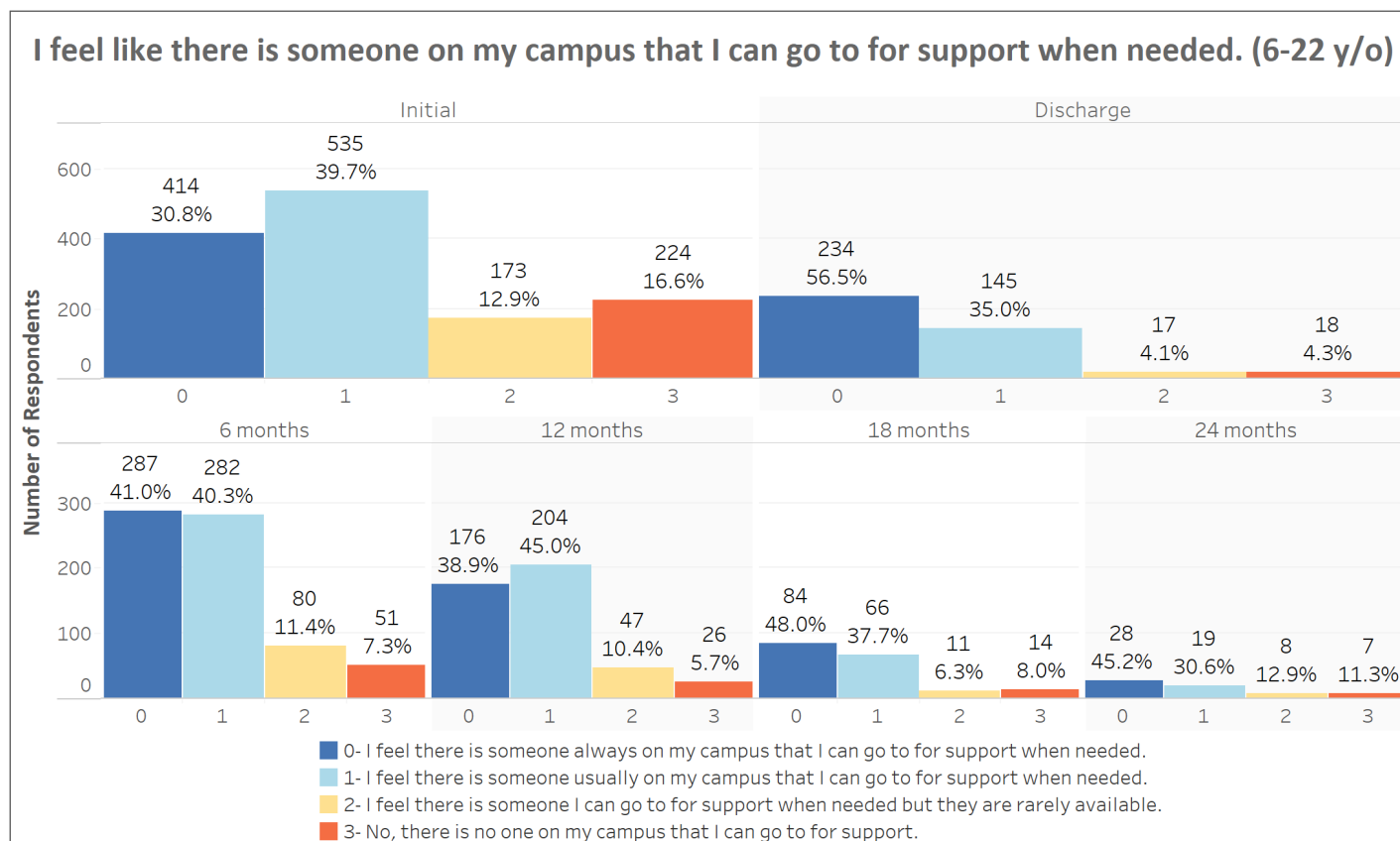
* See Appendix E for The All 4 Youth Service Delivery Survey

All 4 Youth Treatment Outcome Surveys:

The Treatment Outcome Survey was developed in 2019-2020 and implemented. In the 2020-2021 year 1,346 initial surveys were completed for 6-22 y/o and 92 were completed for 0-5 y/o. Out of 431 youth who were discharged 414 completed the 6-22 y/o survey and 17 completed the 0-5 y/o survey.

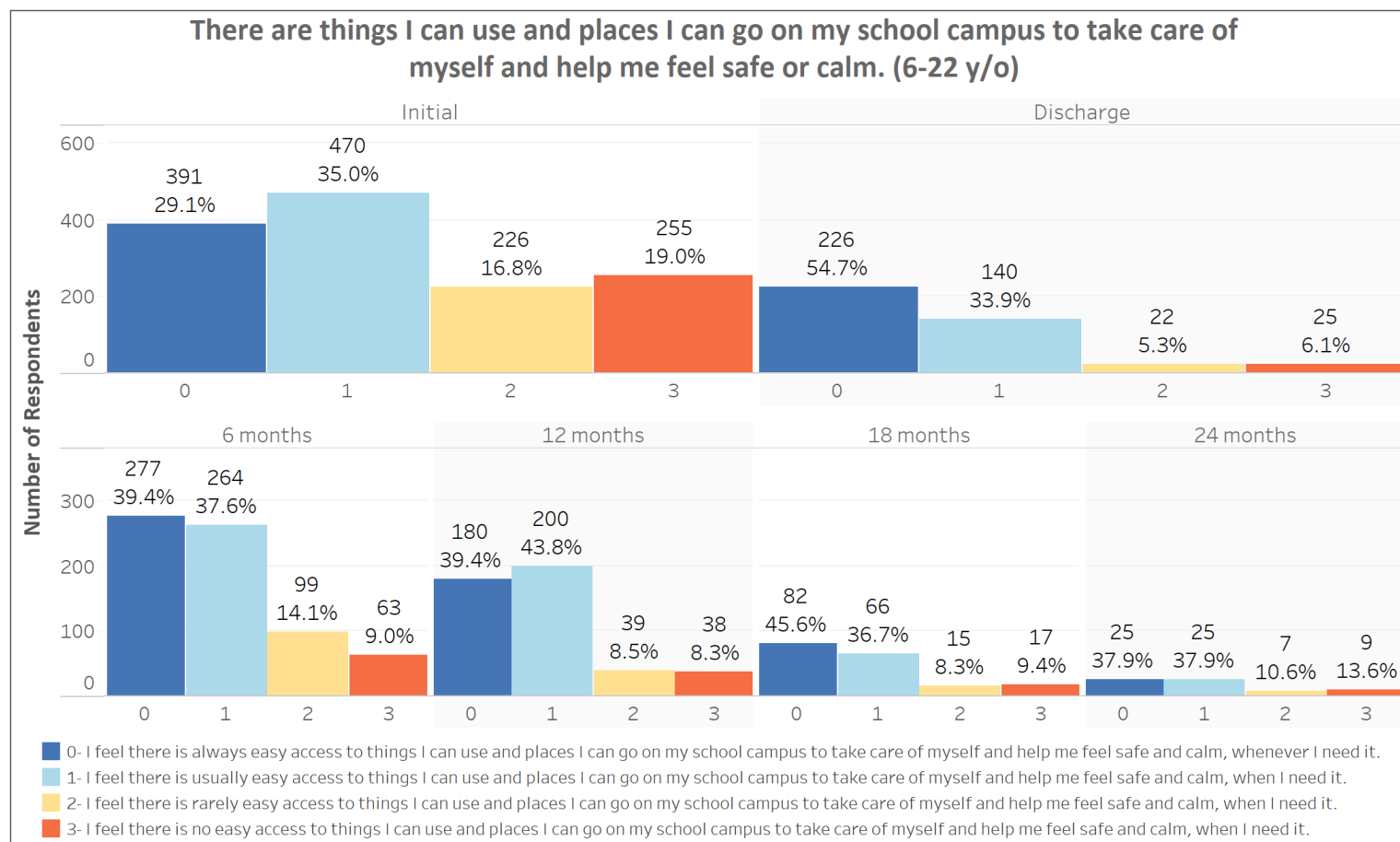
Treatment Outcome Survey 6-22 y/o Results:

The chart below (on the following page) reflects the percent and number of youth/families who feel like they have a source of support on their campus. The reporting periods are Initial, 6 months, 12 months, 18 months, 24 months and discharge. Over the course of time the percentage of youth/families reporting a 0 or 1 (high degree of support on campus) grows from the initial reporting period at every subsequent reporting period, peaking at Discharge at 18 months (56.5% "...someone always on my campus" plus 35% "...someone usually on my campus..." = 91.5%). Although there is some fluctuation through points of time in the chart, this demonstrates that over time, a greater percentage of youth/families feel like they have a source of support on their campus. Of note, this is not all paired data (Youth 1 at initial versus Youth 1 at 6 months for instance), but it still reflects a pattern of increased feelings of support over time, which we would attribute to the increased awareness of the impact of trauma on youth through Trauma Training provided to school staff and the presence and services offered on campus by FCSS All 4 Youth.



The chart below (on the following page) reflects the percent and number of youth/families who feel like they have things they can use or places they can go on their campus to take care of themselves. The reporting periods are Initial, 6 months, 12 months, 18 months, 24 months and discharge. Over the course of time the percentage of youth/families reporting a 0 or 1 (high degree of things to use and places to go for support) grows from the initial reporting period and at every subsequent reporting period, peaking at Discharge at 18 months (54.7% “....always things I can use...” plus “...usually things I can use...” 33.9% = 88.6%). This chart demonstrates that over time, a greater percentage of youth/families feel like they have things they can use or places they can go on their campus to take care of themselves. Of note, this is not all paired data (Youth 1 at initial versus Youth 1 at 6 months for instance), but it still reflects a pattern of increased feelings of access to things and places on campus to support themselves over time, which we would attribute to the increased awareness of the impact of trauma on

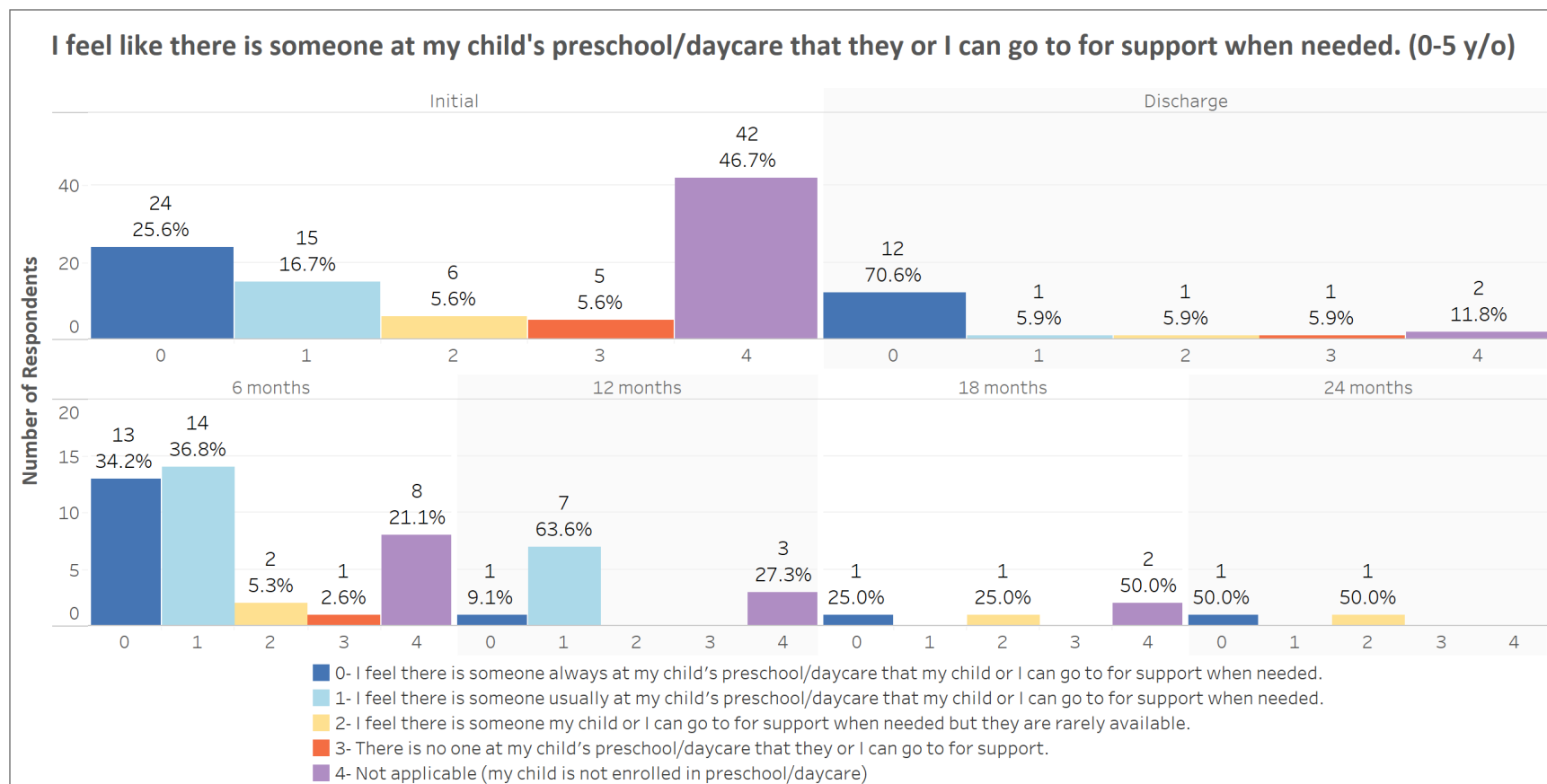
youth through Trauma Training provided to school staff and the presence and services offered on campus by FCSS All 4 Youth.



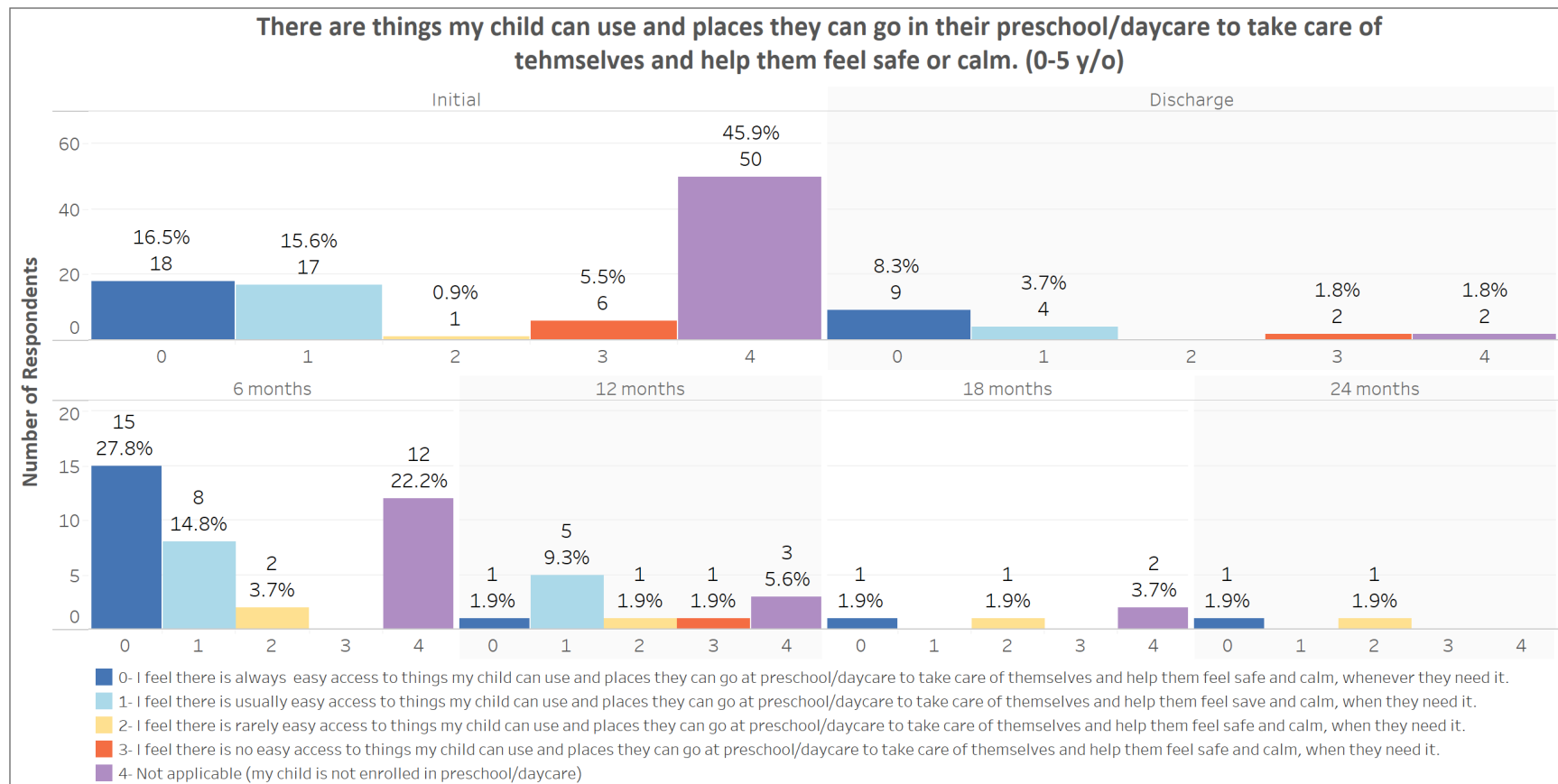
Treatment Outcome Survey 0-5 y/o Results:

The chart below (on the following page) reflects the percentage and number of youth/families who feel like they have a source of support at their child's school/daycare. The reporting periods are Initial, 6 months, 12 months, 18 months, 24 months, and discharge. The results here do not show a strong increase in families' report of feeling as though they have a source of support at their child's school/daycare. The sample size at subsequent reporting periods is almost too small to come to much

of a conclusion on All 4 Youth on this outcome measure (6 month = 38 responses, 12 month = 11 responses, 18 month = 3, 24 month = 2 response, and discharge = 17 responses). As more data comes in, we believe we will be able to make more conclusive statements on the data and make adjustments as needed. Both of these charts indicate that youth/families report relatively stable feelings of having a source of support at their child's school/daycare over time with a slight increase at discharge (although this is a very small sample size of 17 youth). Of note, this is not all paired data (Youth 1 at initial versus Youth 1 at 6 months for instance). This data does make sense for the most part as the majority of the services offered to 0-5 youth happen with the caregiver and not on preschool/daycare campuses, which results in less impact in those venues. This is an area we can research so as to have a greater impact moving forward.



The chart below reflects the percentage and number of youth/families who feel like their child has things they can use or places they can go at their preschool/daycare to take care of themselves. The reporting periods are Initial, 6 months, 12 months, 18 months, 24 months, and discharge. The results here do not show a strong increase in families' report of feeling as though they have a source of support at their child's school/daycare as is evident by the majority of the responses indicating that this is "not applicable" (45.9%) when initially surveyed. Again, this data does make sense for the most part as the majority of the services offered to 0-5 youth happen with the caregiver and not on preschool/daycare campuses, which results in less impact in those venues. This is an area we can research so as to have a greater impact moving forward.

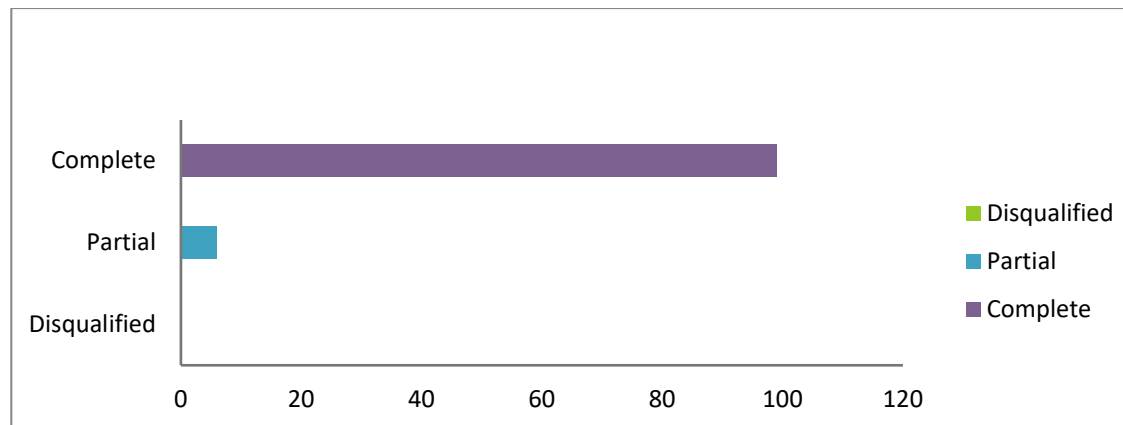


The All 4 Youth Service Delivery Survey

The All 4 Youth Service Delivery Survey was provided to all onboarded districts receiving FCSS All 4 Youth services in the spring of the 2020-2021 school year. Districts identified for themselves who would be best able to respond to the survey. As a result there could be multiple surveys per district depending on the districts choice of who should complete the form. According to the survey results the respondents included; Superintendents, Assistant Superintendents, Principals, Vice Principals, School Counselors, School Psychologists, District Mental Health Clinicians and “Other” district/school staff. Overall the majority of respondents reported agreeing or strongly agreeing that; “All 4 Youth staff are approachable” (almost 84% (83.8% strongly agree), “All 4 Youth staff are easy to collaborate with” (86%), “All 4 Youth staff/administration communicates professionally and responds quickly to questions and concerns ” (88%), “Is the referral process efficient and meeting your needs? ” (81%), “All 4 Youth staff are visible on campus” (74%), and a very small number reported they would like to request a meeting to address any needs, concerns, or to collaborate further” (2%) which we determine to be indicative of their overall satisfaction with FCSS All 4 Youth services.

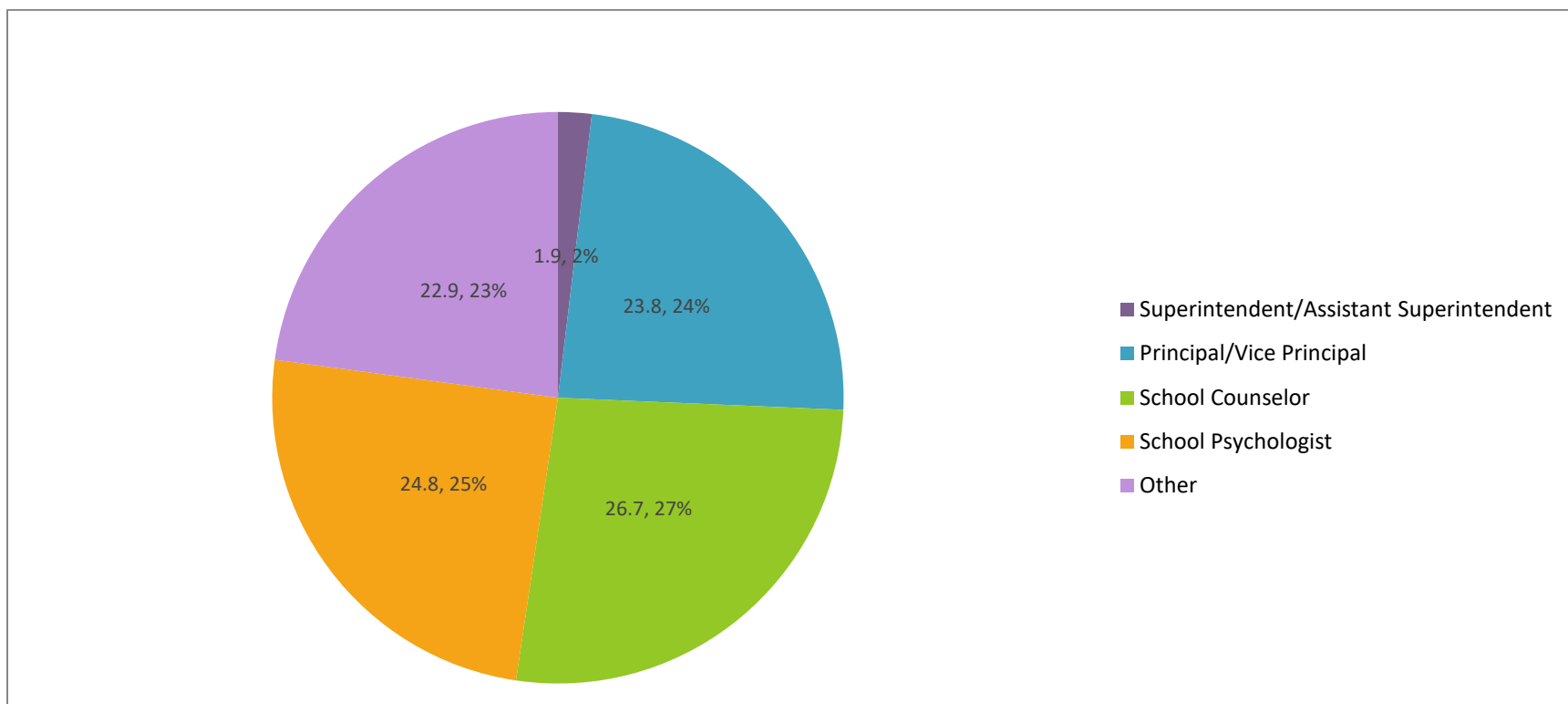
The All 4 Youth Service Delivery Survey Results:

1. Number of Surveys:

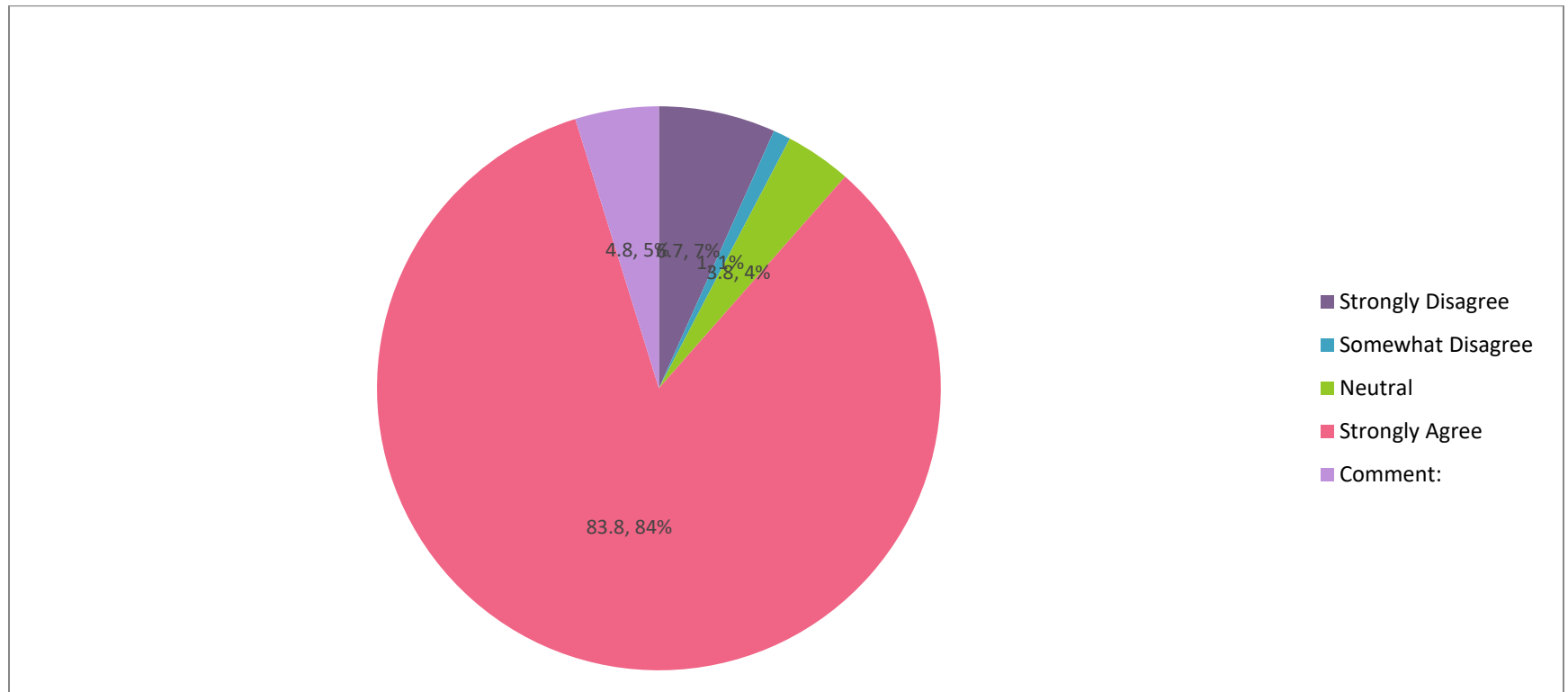


	Count	Percent
Complete	99	94.3
Partial	6	5.7
Disqualified	0	0
Totals	105	

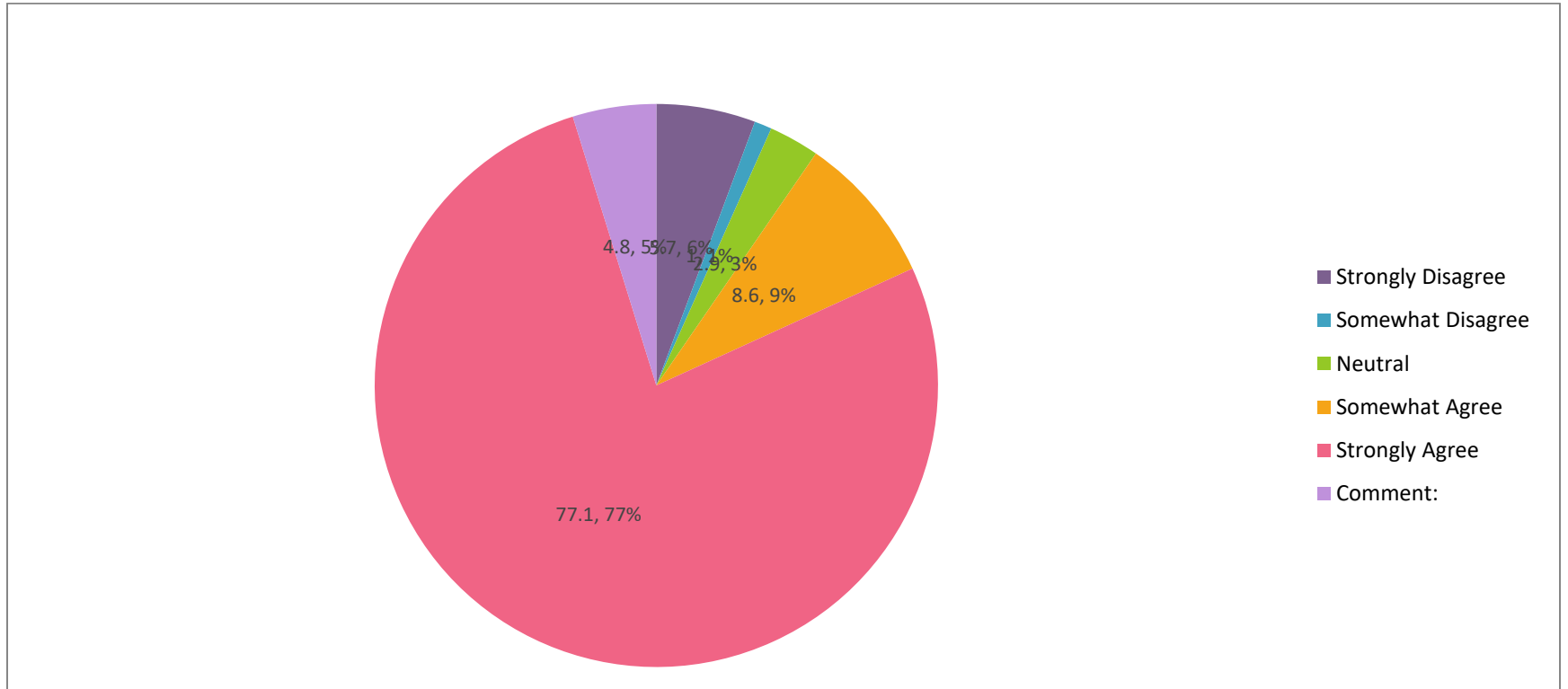
2. Position of Responders:



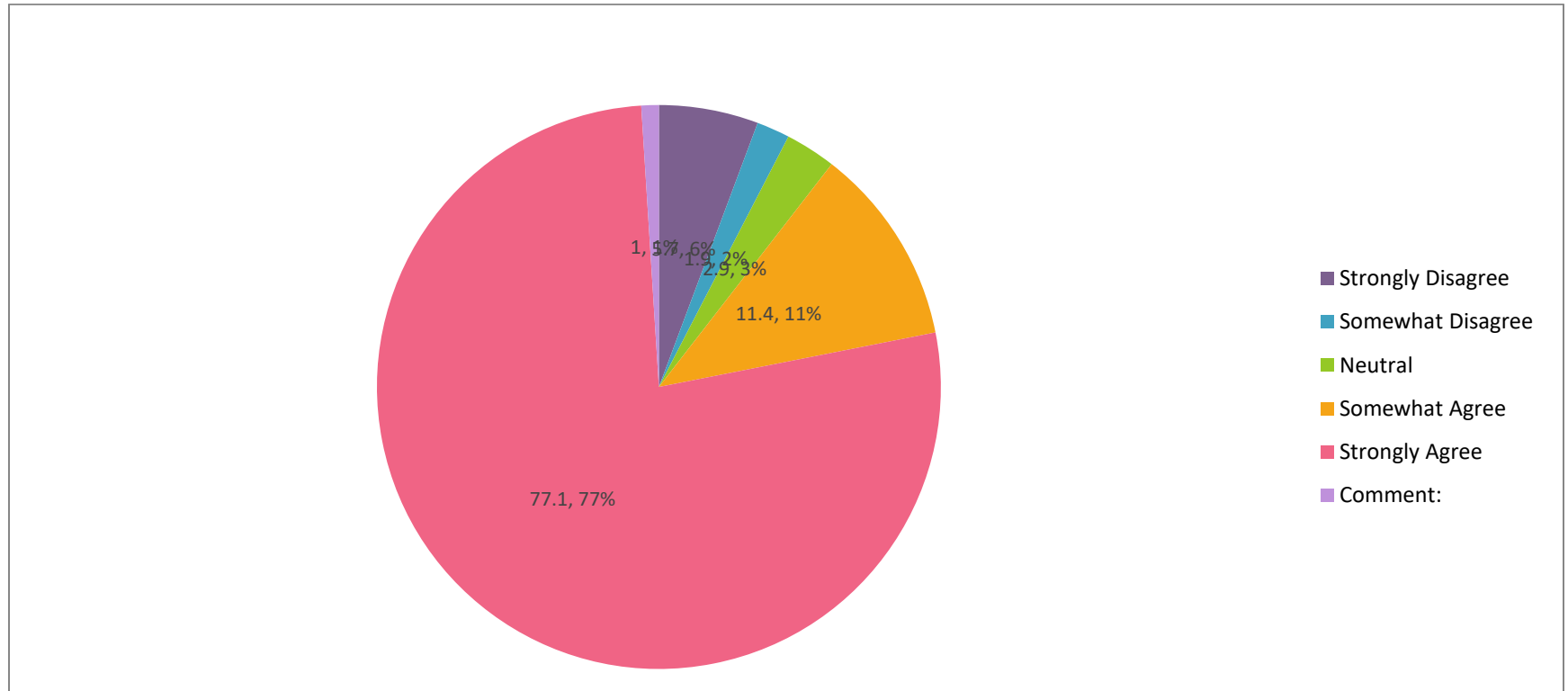
3. The All 4 Youth Staff are approachable:



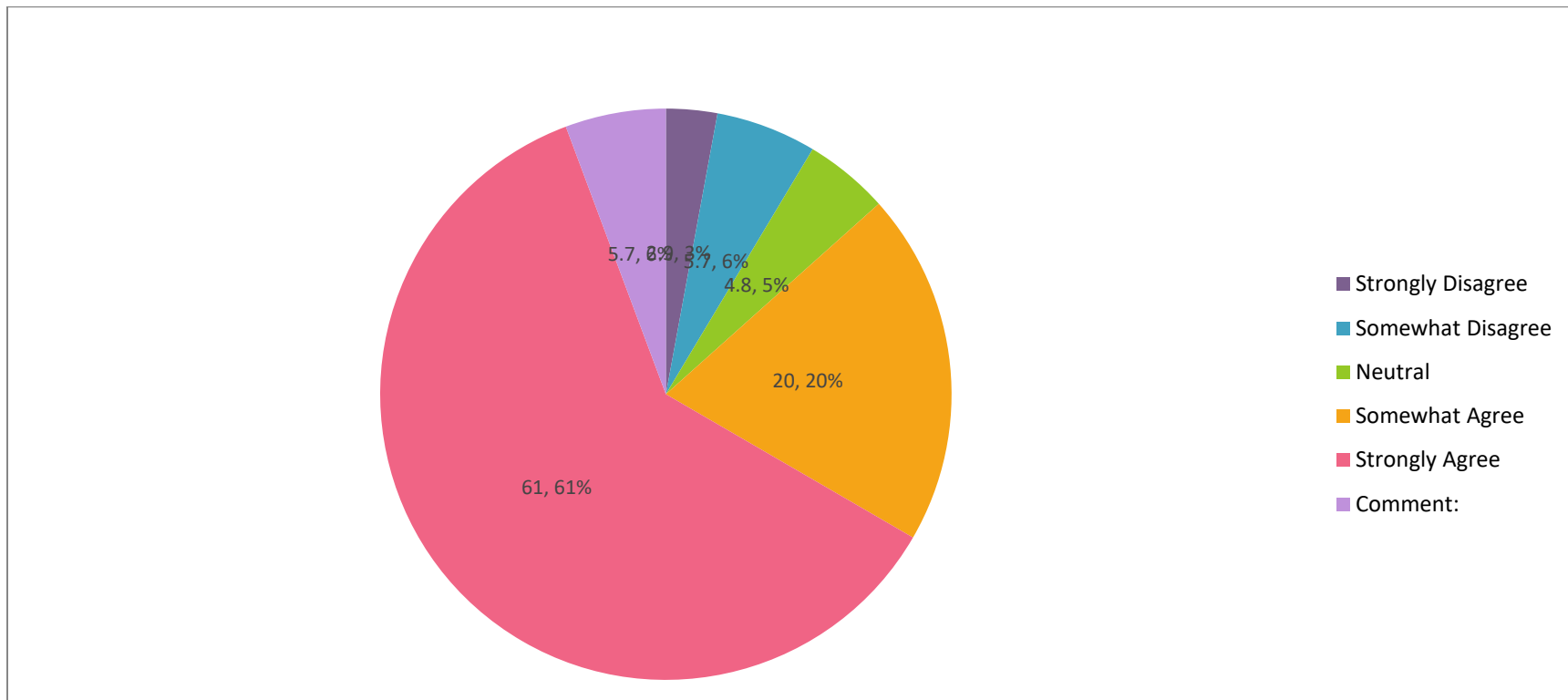
4. The All 4 Youth staff are easy to collaborate with:



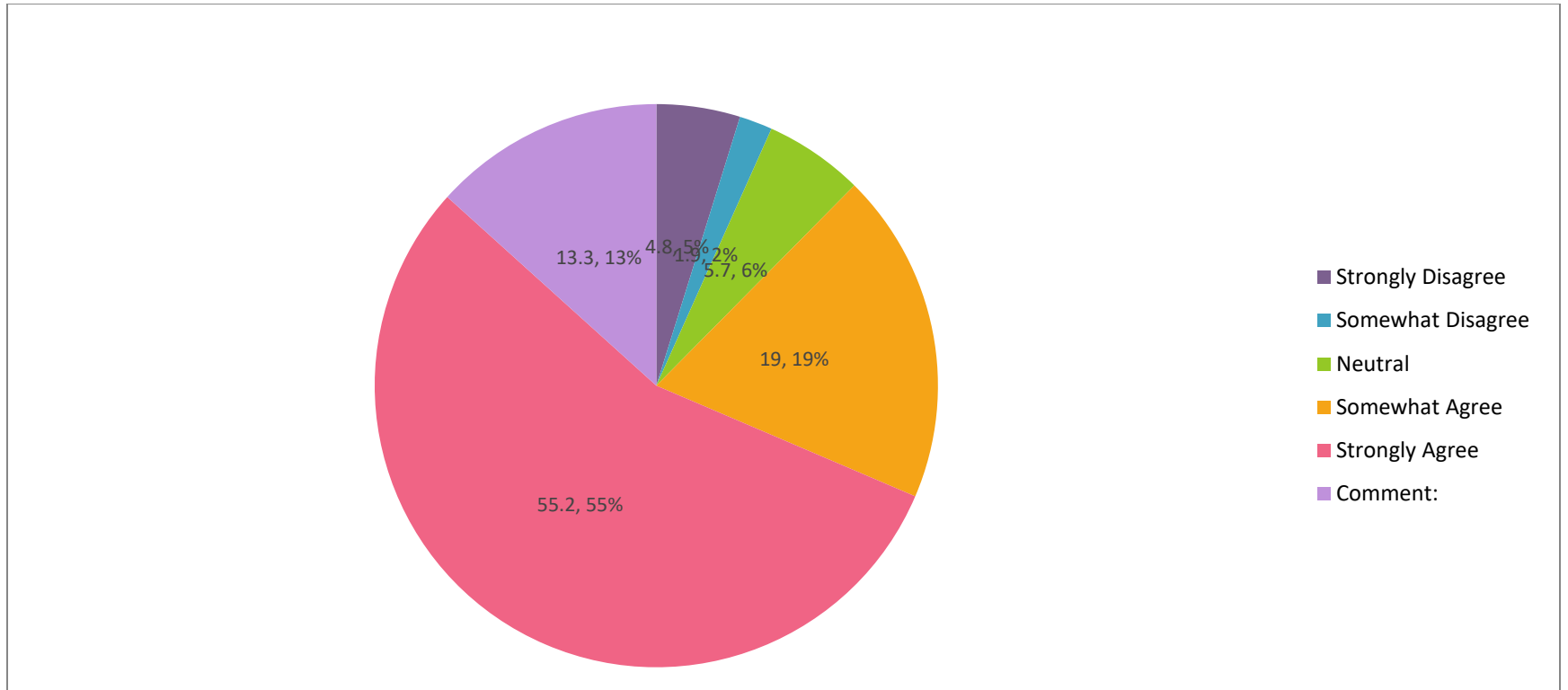
5. The All 4 Youth staff/administration communicates professionally and responds quickly to questions and concerns:



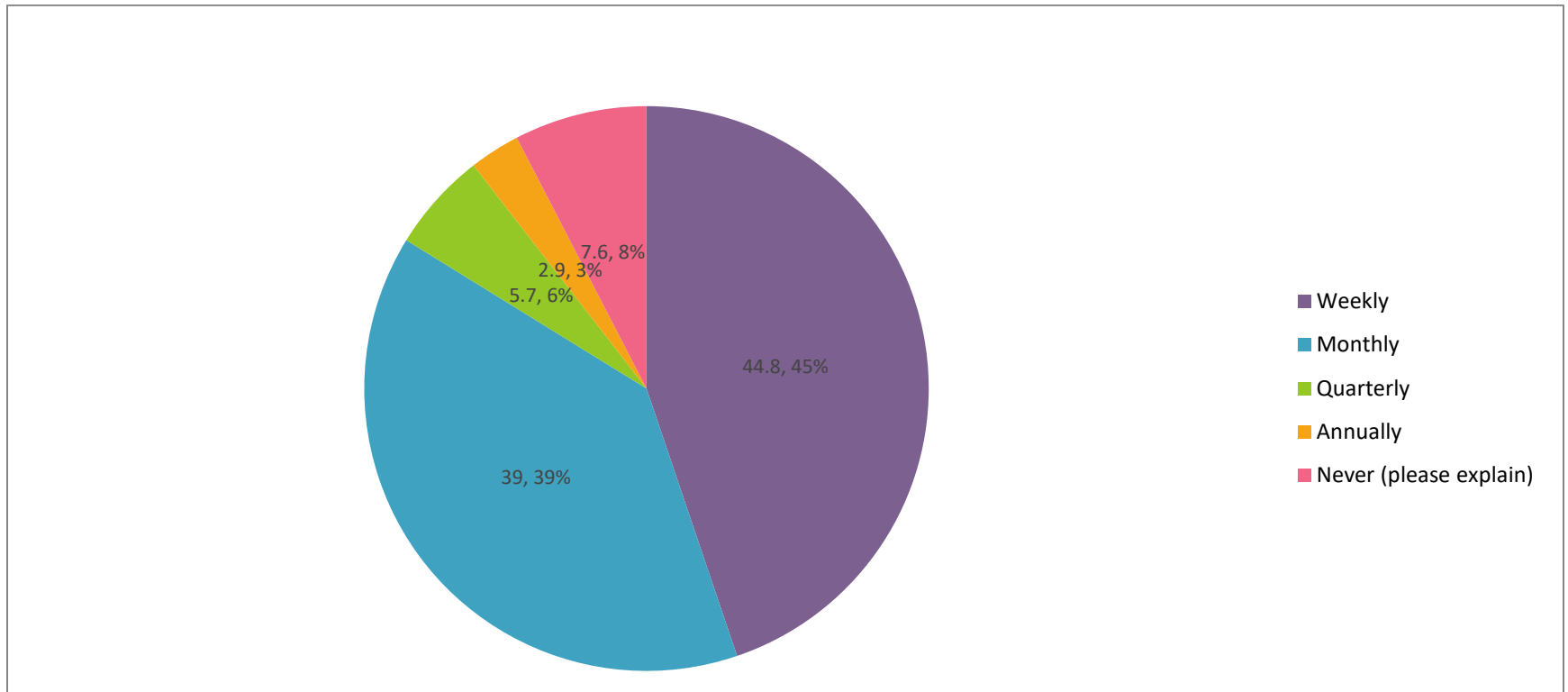
6. Is the referral process efficient and meeting your needs?



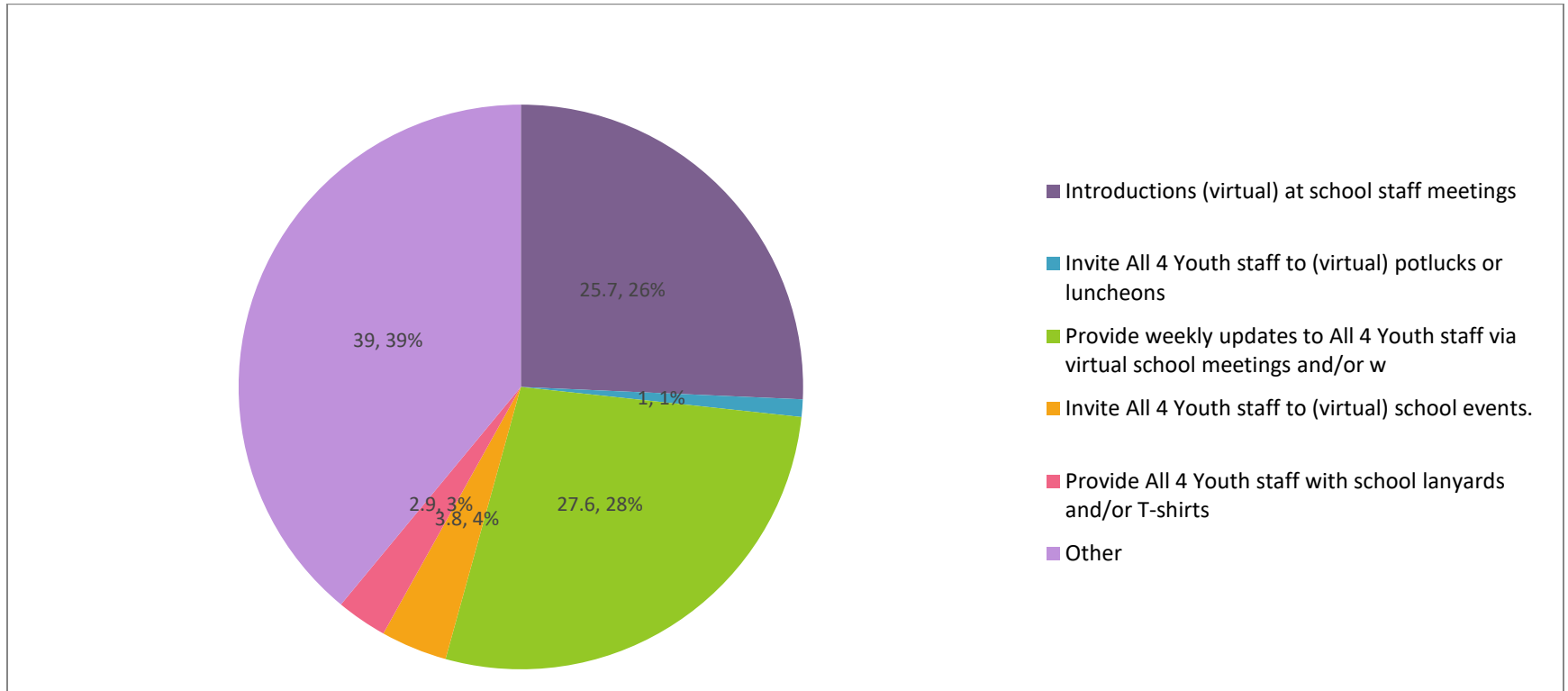
7. The All 4 Youth staff are visible when on campus (please consider that due to COVID-19, staff presence on campus has been reduced).



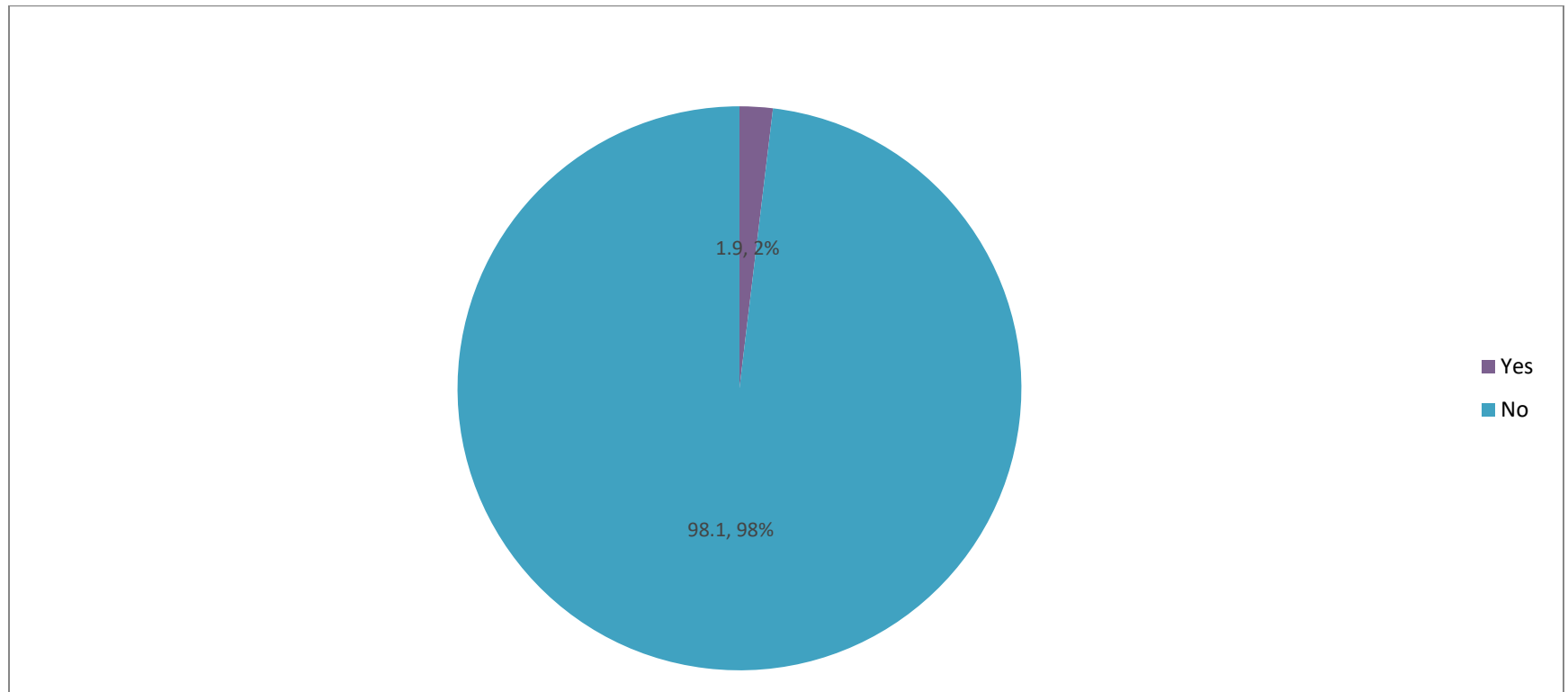
8. If you interact with All 4 Youth staff, how often do you interact with them on a professional level (please consider COVID-19, social distancing impacts, and other ways you may have adjusted interactions)?



9. What steps have you taken, in light of COVID-19, to include any All 4 Youth staff at your school site/district?



10. Would you like to request a virtual meeting to address any needs, concerns, or to collaborate further?



The All 4 Youth Service Delivery Survey was adapted in 2020-2021 to account for COVID-19 and the social distancing requirements that were needed to fulfill safety precautions. Of specific note, changes were made to four specific questions to better account for these adaptations as staff had limited in person connection with school staff/sites.

Further Explanation for the Number of Unique Clients Served During Time Period:

Our program is not a traditional contract program in that we engage in activities that are not captured in Avatar but are part of the comprehensive, integrated experience and approach to service that is the mission of our partnership. We also spend time providing linkage and consultation to these stakeholders. We actually view the stated number in this report as a substantial underestimate of youth served as we impact many more youth on each campus through support, education, and training directly and indirectly through school personnel. Although a subset of these youth never rise to the level of a formal referral, or are referred and not eligible under medical necessity, a significant amount of staff time is allocated to the behind the scenes linkage and support to ensure that they are connected to the resources they need. The number reported here only reflects the number of youth referred and receiving services. As we did last year, we are counting the 3972 unduplicated youth for purposes of calculating cost as it is a more accurate representation of youth served by all program staff.

DEPARTMENT RECOMMENDATION(S):

[Click here to enter text.](#)