# 2024 – 2025 Annual Report

State of California Citizen Review Panels

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# 2024 – 2025 Annual Report

## State of California Citizen Review Panels

*Submitted on September 30, 2025.*

**The Citizen Review Panels submit this report to the California Department of Social Services, Office of Child Abuse Prevention.**

This report was developed by the Child and Family Policy Institute of California and RDA Consulting, SPC.

All activities, findings, and recommendations are completed, identified, and finalized by Citizen Review Panel members.

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# Glossary of Terms

| | |
|---|---|
| **AB** | Assembly Bill |
| **ACES** | Adverse Child Experiences |
| **ACIN** | All County Information Notice |
| **ACL** | All County Letter |
| **CANS** | Child and Adolescent Needs and Strengths |
| **CAPC** | Child Abuse Prevention Council |
| **CASA** | Court Appointed Special Advocates |
| **CBCAP** | Community-Based Child Abuse Prevention |
| **CDPH** | California Department of Public Health |
| **CDRT** | Child Death Review Team |
| **CDSS** | California Department of Social Services |
| **CAPTA** | Child Abuse Prevention and Treatment Act |
| **CFPIC** | Child and Family Policy Institute of California |
| **CFS** | Children and Family Services |
| **CFSR** | Child and Family Services Review |
| **CFT** | Child and Family Teams |
| **CI** | Critical Incidents |
| **CPM** | Child Welfare Core Practice Model |
| **CRP** | Citizen Review Panel |
| **CSAC** | California Student Aid Commission |
| **CWC** | Child Welfare Council |
| **CWDA** | County Welfare Directors Association of California |
| **DDS** | Department of Developmental Services |
| **DHCS** | Department of Health Care Services |
| **DOJ** | Department of Justice |
| **EBP** | Evidence Based Practice |
| **FE/FI** | Father Engagement / Father Involvement |
| **FFA** | Foster Family Agencies |
| **FFPSA** | The Family First Prevention Services Act |
| **FRC** | Family Resource Centers |
| **ICPM** | Integrated Core Practice Model |
| **ICWA** | Indian Child Welfare Act |
| **I/DD** | Intellectual and Developmental Disabilities |
| **ILP** | Independent Living Program |
| **MOU** | Memorandum of Understanding |
| **OCAP** | Office of Child Abuse Prevention |
| **OVP** | Office of Violence Prevention |
| **PIP** | Performance Improvement Plan |
| **RC** | Regional Center |
| **RDA** | RDA Consulting. SPC |
| **STRTP** | Short-Term Residential Treatment Programs |
| **UBI** | Universal Basic Income |

# Introduction

Since 2017, California has convened three statewide Citizen Review Panels (CRPs) to meet the requirements of the federal Child Abuse Prevention and Treatment Act (CAPTA).

**Each state that accepts funding under CAPTA must establish a minimum of three independent CRPs to "evaluate the extent to which state and local agencies are effectively discharging their child protection responsibilities under the state's CAPTA Plan, child protection standards under federal and state law, and any other criteria the CRPs consider important to ensuring the protection of children."**

Further, the CAPTA details that Citizen Review Panels should be composed of volunteer members, broadly representative of the community(ies) for which the panel is established. This should include members who have expertise in the prevention and treatment of child abuse and neglect and may include adults who were former victims of child abuse or neglect.

In implementing the CAPTA requirements, and to support the evaluation and improvement of California's Child Welfare System and protection agencies, the California Department of Social Services (CDSS) established operational requirements for the three California CRPs. The CRPs are required to:

- Meet at least quarterly;
- Examine policies, procedures and practices of state and local agencies and where appropriate, specific cases;
- Maintain confidentiality of all specific case information provided to the panel for review;
- Seek public comment to assess the impact of current procedures and practices upon children and families; and

- Produce an annual report containing a summary of activities and recommendations for improvement to the Child Welfare and Protection System.

California's three statewide CRPs are organized along the continuum of child and family well-being.

The panels, including the area of focus for making recommendations, are:

**The Prevention of Child Abuse and Neglect CRP** makes recommendations to strengthen child abuse prevention efforts in California.

**The Children and Family Services CRP** makes recommendations to better serve children and families involved in the child welfare system.

**The Critical Incidents CRP** makes recommendations to help reduce the incidence of maltreatment-related child fatalities and near-fatalities.

Each panel engages in unique activities throughout the year to learn about and evaluate its focused areas of the Child Welfare System. From this work, each panel has developed topic-specific recommendations. These recommendations are highlighted in the following sections and initially presented by panel along with descriptions of the research, learning, and findings that led to those recommendations. A full list of recommendations from all panels is included as Appendix A.

## CRP Coordination & Facilitation Approach

In October 2020, the California Department of Social Services' Office of Child Abuse Prevention (CDSS/OCAP) executed a contract with the Child and Family Policy Institute of California (CFPIC) to coordinate and facilitate California's three CRPs. For this engagement, CFPIC elected to partner with RDA Consulting, SPC (RDA), an organization with extensive capacity for data collection and analysis, to further benefit CRP efforts. In coordinating the CRPs, the CFPIC built on an already well-established relationship with CDSS as well as its extensive knowledge of California's human services system.

In combining this strong relationship with system knowledge, CFPIC supports the CRPs in program learning and evaluation activities, in the development of recommendations that are impactful to families in California, and ensuring the role of the

CRPs is maintained in accordance with the federal mandate. CFPIC's work with the CRPs is guided by the California Child Welfare Core Practice Model (CPM) and Integrated Core Practice Model (ICPM), which are informed by the key elements and behaviors of engagement, inquiry and exploration, teaming, advocacy, and accountability.

Each CRP meets in monthly virtual sessions to discuss relevant issues, develop priorities, and formulate recommendations. CRPs also form smaller task groups to meet and conduct activities (such as background research or literature review) between regular meetings to ensure that the panels continue to make forward progress in evaluating programs and developing recommendations throughout the year.

Annually, the facilitation team (CFPIC and RDA) hosts an All-CRP meeting that brings together members from across all three CRPs to foster a spirit of collaboration. In furthering this spirit of collaboration, the annual meeting is planned in partnership with the CDSS Office of Child Abuse and Prevention (OCAP) and includes attendance from staff with the California Department of Public Health (CDPH) Office of Violence Prevention (OVP). The All-CRP meeting includes both panel and department presentations, in addition to general information sharing and questions. The annual meeting of all CRPs is a time for reflection and forward planning for each panel.

In addition to CDSS OCAP, representatives from several bureaus within the Child and Family Services Division attend and provide insights that help panel members to further develop and refine annual plans and recommendations. Finally, following the submission of each recommendation report, the CDSS provides a written response back to the CRPs. This response informs the CRPs as to the Department's ability to engage with recommendations made. The annual meeting also provides an opportunity for CDSS staff to verbally address their feedback and share any plans for implementing specific aspects of the recommendations.

Engaging across panels, as well as with CDSS and other state partners, continues to be a cornerstone of the strategy to coordinate the efforts of California's CRPs. More information on each panel's work, findings, and recommendations is included on the following pages.

## Overview of 2024-2025 Work
## Continuing to Strengthen Partnerships

Throughout the past year, each of the three CRPs built on its previous years' efforts to strengthen partnership with the CDSS administration to support improved understanding and awareness of California's Child Welfare System. In working with OCAP staff, CDSS Branch and Bureau Chiefs were invited to attend regular (monthly) CRP meetings to both provide information about the Department's strategic objectives and to support panel learning and evaluation efforts that could then inform more focused and actionable recommendations in the annual report. This partnership and acceptance of invitation to attend CRP meetings extended beyond CDSS, encompassing CDPH as well as other statewide child welfare organizations as detailed by individual panel updates.

The CRPs express gratitude to OCAP staff who have actively supported the development of an ongoing positive relationship between the panels and the state administration. OCAP maintains open communication with the CRP facilitation team and panels; this allows for a better understanding for both panel members and OCAP staff as to the purpose and intent for recommendations made, which then provides opportunity for panel exploration of possible responses in coordination with representatives throughout the Children and Family Services Division. The Department's response to the CRP recommendations has been more informed and relevant to the panels' intentions because of these collaborative efforts.

## Overarching Recommendations for 2024-2025
### From All CRPs

Through panel members' local advocacy and engagement with state legislators, it was discovered that there is not widespread knowledge about the work of the CRPs or familiarity with the recommendations panels make. To ensure greater awareness, support, and accountability for continued improvement to California's Child Welfare System, the following recommendations are provided to CDSS and supported by each CRP:

>> **California's Citizen Review Panels recommend that each year CDSS forward the Annual CRP Report to the California Legislature as a part of yearly reporting made by the Children and Family Services Division. This dissemination should include a copy of CDSS's response to the CRP Annual Report and should begin with the current year's report and response.**

>> **The CRPs are encouraged by CDSS' partnership and collaboration in responding to previous recommendations (initially raised by the CFS CRP) regarding meaningful engagement with those with lived experience to inform its work. To build upon those efforts, the CRPs recommend that CDSS continue to seek out and incorporate the voices of those with lived experience and strengthen accountability by making those learnings publicly accessible, so that other organizations and agencies throughout California may benefit.**

The CRP members applaud CDSS's significant progress in engaging the voices of individuals with lived and professional expertise in assessing its programs and making recommendations for system improvements (this engagement has extended beyond only the CRPs).

The CRPs believe that in sharing the CRP Annual Report with legislators, there will be a greater opportunity to demonstrate the Department's commitment to building and maintaining meaningful partnerships with the communities it serves.

# Citizen Review Panels'
# Activities & Recommendations

>> **The Prevention of Child Abuse and Neglect**
**Citizen Review Panel**

>> **The Children and Family Services**
**Citizen Review Panel**

>> **The Critical Incidents**
**Citizen Review Panel**

# The Prevention of Child Abuse and Neglect Citizen Review Panel
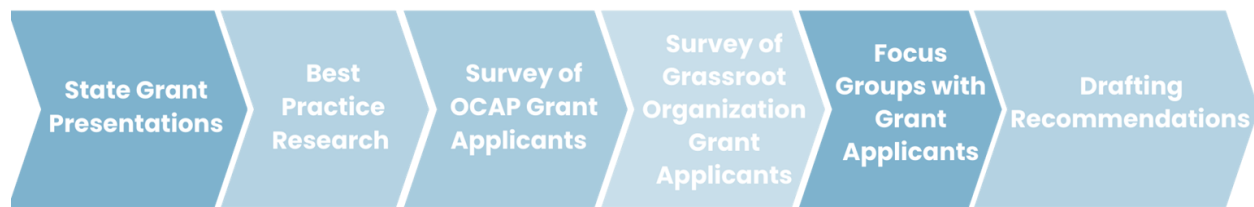
## Area of Focus

For more than a year, the Prevention CRP has been focused on learning more about Office of Child Abuse Prevention (OCAP) grants, including how grant funding priorities are determined, how OCAP distributes and evaluates grant applications, and the support both applicants and grantees receive from OCAP.

OCAP is responsible for administering federal grants, contracts, and state programs designed to promote best practices and innovative approaches to child abuse prevention, intervention and treatment.[1] The professional experience of many members of the Prevention CRP (either directly as previous grant applicants/grantees or through things they have learned from grantees they have worked with over the years) generated a robust discussion of ways this process might be strengthened. Panelists were also curious to know how often smaller, more community-driven grassroots organizations were pursuing these opportunities, and what resources might exist to bolster inclusion for these important partners in the prevention funding landscape. Another topic of discussion related to how these OCAP grants align with California's vision for prevention as identified in their five-year state prevention plan, approved by the federal government in 2023.

Over the course of the next 14 months, the process of gathering data to learn more about OCAP grants, as well as the experiences of organizations in applying for and managing grants, was conducted. The Panel and CRP facilitators received presentations from state organizations, reviewed grant best practice research, conducted two rounds of surveys, convened focus groups, and conducted key informant interviews. The information gathering and stakeholder engagement timeline is detailed in the following section.

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[1] OCAP. (2025). *CDSS Programs*. Office of Child Abuse Prevention. https://www.cdss.ca.gov/inforesources/ocap

# Overview & Findings of This Year's Work

| State Grant Presentations | Best Practice Research | Survey of OCAP Grant Applicants | Survey of Grassroot Organization Grant Applicants | Focus Groups with Grant Applicants | Drafting Recommendations |

## State Grant Presentations

For two full panel meetings in summer 2024, OCAP representatives presented information to the Panel about the grants they manage. They provided a detailed overview of their process, from grant release through grant award, as well as an overview of the types of grants that were available to community-based organizations directly from OCAP. They provided links to access information on their website regarding the current grants and grantees. Additionally, they engaged in a very open discussion with the Panel regarding ways they envisioned that their grant process could be strengthened. OCAP was supportive of the Panel's focus on their grants and committed to supporting the Panel in its outreach to current and former OCAP grant applicants and recipients to learn more about their direct experiences and seek their suggestions on potential improvements OCAP could consider in their grant processes.

As part of this year's exploration into grants, the Panel decided it would be beneficial to learn more about other state entities' grant processes, and how they might help inform the Panel's recommendation development. During the panel's previous exploration of prevention and early intervention services to children and adults with intellectual and developmental disabilities (detailed in the 2023 Annual Report), grants provided by the California Department of Developmental Services (CDDS) to support these efforts were touched upon.

In September 2024, the Prevention Panel invited CDDS to join its meeting and provide a presentation on these grants. Representatives from CDDS, including representatives from the Service Access & Equity (SAE) grant management team, provided the presentation, which included a comprehensive overview of how CDDS approaches grant development, application, and execution. It became clear during this presentation that CDDS' SAE grant process has quite a few strengths. For example, CDDS employs a robust stakeholder input process as part of their SAE grant-making process, incorporating feedback from CDDS

service partners in determining areas in need of greater grant funding. Additionally, the SAE team always conducts bidder's conferences as part of their grant release process and provides guidance to interested applicants on how to submit a quality application for consideration. By also providing feedback to unsuccessful applicants, the SAE team reported that many applicants have reapplied for later opportunities, incorporated the feedback, and been successful in receiving funding.

## Best Practice Research

With guidance from the panelists, the RDA facilitator reviewed best practices for engaging community members and ensuring that funding opportunities are responsive to the community identified needs. Several core practices were identified during the research process that would support an informed community needs assessment and ensure equitable engagement.

Practices included involving key stakeholders, identifying those who may be underrepresented at community meetings, addressing language barriers, and lowering barriers to participation by locating meetings near public transportation as well as providing multiple opportunities for community input.

Additionally, facilitators reviewed the literature to identify promising methods for evaluating grant applications and managing grantees. Several practices were identified that may support a more equitable and methodologically robust application review process. These practices included utilizing outside evaluators with subject matter expertise[2], multiple application rounds with evaluator feedback, and a hybrid scoring process to avoid giving a disproportionate advantage to larger organizations with more resources over promising grassroots organizations[3].

## OCAP Applicant Survey

Based on both the best practice research and the presentations from the OCAP and CDDS, the Panel identified what data points they would like to gather through a survey of previous OCAP applicants. Over the course of two meetings, panelists participated in the design of the *Prevention CRP OCAP Applicant &*

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[2] Substance Abuse and Mental Health Services Administration. (2024, May 22). *Grant Review process*. Grant Review Process. https://www.samhsa.gov/grants/about/review-process

[3] U.S. Department of Health and Human Services. (2025, April 1). *NIH revises Grant Review Process to improve focus on scientific merit, reduce reputational bias*. National Institutes of Health. https://www.nih.gov/news-events/news-releases/nih-revises-grant-review-process-improve-focus-scientific-merit-reduce-reputational-bias

*Grantee Survey*. The survey was composed of 27 questions, with both multiple choice and open response options. Approximately 155 OCAP grant applicants were invited to participate in the survey to improve the OCAP grant application and administration processes. Applicants were reassured that their responses would remain anonymous, and the results of the survey would only be communicated to OCAP in aggregate form. The Panel received 38 complete responses, 12 of which were from organizations who were awarded a grant from OCAP. Organizational demographics included a wide variety of institutional resources and geographic areas. Key highlights from the survey results are highlighted below:

- **Organizational Resources**
    - ▶ Of the applicants who did not receive funds, half did not have a full-time grant writer.
    - ▶ All applicant (not awardee) organizations have been in operation for 30+ years. The number of employees and operating budgets vary widely across all respondents.
    - ▶ Most applicants were not aware they could request feedback on their grant applications.

- **Application Process Feedback**
    - ▶ Generally, respondents felt they would benefit from more time to complete the application. Coordinating with partner agencies, gathering information for document requests, and formatting the application is a time intensive process for many organizations.
    - ▶ Some respondents felt the application requirements were disproportionate to the available funding.

- **Supportive Resources**
    - ▶ Respondents appreciated information sessions during the application period, and respondents who received a grant found meetings with their grant managers helpful and supportive.

## Survey of Grassroot Organization Grant Applicants

Prevention panelists opted to expand the survey outreach efforts to better reach grassroots organizations that were either not aware of OCAP grant opportunities or who had opted not to apply, in addition to those organizations who have previously applied for OCAP grants. The survey was adjusted to generalize the language that referenced the OCAP application experience, and panelists promoted the survey within their professional networks. This survey

outreach yielded 11 complete responses, mostly from smaller grassroots organizations. Several respondents noted that they applied to an OCAP grant within the last 3 years.

Key highlights from the survey results are highlighted below:

- **Organizational Resources**
  - ▶ The primary barrier that respondents identified was a lack of organizational capacity to develop the application materials for grants that require extensive documentation, or where respondents feel the data collection requirements would use a disproportionate amount of resources compared to the award amount.

- **Application Process Feedback**
  - ▶ Respondents expressed a desire for a more streamlined application process, more communication with the funder during the application process, and longer application windows.

- **Supportive Resources**
  - ▶ Some respondents noted that they would have benefited from an opportunity to discuss not just the technical aspects of the application, but also the broader intent of the grant with OCAP staff.
  - ▶ Most respondents who received grants did not feel they had sufficient lead time to recruit new employees to staff the grant funded program.
  - ▶ Numerous respondents experienced challenges with delays with contracts and disbursements of funds. Smaller organizations noted that they had difficulty covering the costs associated with the delays.

## Focus Groups & Key Informant Interviews

After reviewing the results from both surveys, Prevention CRP panelists opted to explore these themes further through focus groups. With input from the Panel, facilitators developed a set of focus group questions. Panelists conducted outreach within their professional networks and facilitators also reached out to organizations who indicated they would be interested in future discussions in their survey responses. Two focus groups were conducted as well as two key informant interviews for participants unable to make the two scheduled focus group times. The following provides a summary of the responses received across both focus groups and key informant interviews:

1. **Where do you usually receive information about available OCAP grants?**

Focus group participants identified several main resources for learning about OCAP grants, including emails and newsletters from OCAP, grant subscription services, and referrals from colleagues. Additionally, several noted habits that keep them informed of grant opportunities such as regularly checking the OCAP website and setting aside dedicated time to learn more about opportunities and different topics related to identifying and securing funding. Several participants felt that the OCAP website could have a more user-friendly design.

2. **What factors/barriers does your organization consider before deciding whether to apply for an OCAP grant?**

There was consensus among participants that they considered three factors: whether the grant aligns with the organization's mission; if the funding will be sufficient to pay for overhead, auditing requirements, and competitive staff salaries; and if the grant will help them increase their capacity as an organization (e.g., staff and partner training, equipment, etc.). One participant shared that they needed to consider whether the funds would be sufficient to do the work in a way they could be proud of or if it would be just enough to scratch the surface.

Additionally, numerous participants agree that documentation requirements have "gotten out of control." Grassroots work is rarely well represented in standardized reporting requirements because it does not highlight stories from community members served by the program. Broadly, participants feel that the quantity of information and frequency of reporting is disproportionate to the funding award and often pulls resources away from doing the community-facing work. If the reporting requirements are high and the applicant pool is large, smaller organizations do not feel that they have a chance to be competitive in the application process.

Participants also report considering the application timeline, how supportive/flexible a funder relationship would be, and whether they need to work with partner organizations.

Participants suggest:

- Funders identify the most necessary metrics and reduce the "nice to have" data points from reporting requirements, then keep them consistent throughout the reporting period.
- Applications should be written in plain language with templates available in Word instead of PDFs.
- Application timelines should be between 60-90 days because it takes a considerable amount of time to generate interest in the opportunity, coordinate with partners, and thoughtfully develop a proposal.
- Grants would be more accessible to smaller organizations if it were clear that a funder was willing to front-load funds for the launch of the program.
- Grants should be sufficient to fund case management data platforms.

### 3. What kind of support from OCAP would be most helpful to your organization in helping with OCAP grant application and/or OCAP grant management/execution?

Participants identified several supports for the application process, including Q&A sessions and a phased application process. Organizations that do not have substantial experience with grant applications would appreciate tutorials and information sessions that dive into the intended purpose of the grant rather than just the technical requirements for the application. One participant suggested changing the application process so that the first step would be to solicit letters of interest from organizations detailing their vision for the grant. From there, the funder would invite organizations to complete the full application. This would reduce the initial time and materials investment from interested organizations, as the application process is usually very time-consuming. Another participant shared that an ideal balance is to have no more than 20% of time spent on reporting, invoices and budget modifications, and 80% on the community-facing work.

Participants identified resources that would improve grant management and execution, including flexibility in funding, connecting with other grantees, and having clear timelines for finalizing contracts and dispersal of funds. Multiple participants would appreciate greater flexibility in how they chose to spend funds and the ability to better adjust to the needs of their program participants.

Several participants identified that they would benefit from opportunities to connect with other grantees who could provide helpful information and support improving their own programs, like a grantee organization. They would also appreciate more resources for navigating the requirements of the grant (data management skills, streamlining data reporting, etc.).

Lastly, multiple participants expressed frustration with regular delays of 90-120 days for finalizing contracts and disbursing funds which drastically impacts smaller organizations who need to hire or pay staff.

**4. What changes to OCAP grants would be most helpful for your organization?**

Participants recommended several changes that they felt would increase accessibility of both the application process and execution of the grant. Funders should:

- Be explicit about the goals they are hoping to achieve through the grant.
- Develop a more streamlined application that accepts copy/paste functions.
- Provide office hours for grantees seeking support.
- Create a grantee collaborative for resource and knowledge sharing and encourage supportive relationships between funder and grantee.
- Allocate sufficient funds for:
  - Smaller costs like food for events and participants
  - Case management data management platforms
  - Auditing, if required
  - Electronic banking

## Prevention CRP Recommendations for FY2024 - 2025

Utilizing what the Panel learned from OCAP, CDDS, best practice research regarding grants, survey responses, and qualitative details from focus group participants, the Panel developed a set of recommendations for OCAP that focus on three key areas: grant investment, grant application, and grant management.  The recommendations are as follows:

### Grant Investment Process

- As part of the strategic planning process, the Panel recommends the Child and Family Services Division (and OCAP specifically) incorporate a broad outreach and participatory research process to gather data from

community-based organizations (including grassroots organizations) and individuals with lived experience on community strengths and needs for child and family well-being, as well as input on the most important programs/projects to fund in their community. This data will inform OCAP's grant funding priorities to ensure that funding better aligns with community strengths and needs. This process could include:

- ▶ Town hall meetings
- ▶ Listening sessions
- ▶ Informational sessions
- ▶ Surveys
- ▶ Focus groups

- The Panel recommends OCAP provides counties with guidance on updating their Comprehensive Prevention Plans to clarify how they will utilize their OCAP funding to increase the capacity of local community-based organizations to build and sustain community-based services and support, as described in California's Five-Year State Prevention Plan.

- OCAP should build upon the Community Pathway State Fiscal Inventory providing cross-systems (e.g. CDSS, DHCS, CDOE, CDDS, HCD, CSD, etc.) guidance to counties on ways to utilize the inventory to blend and braid funding to sustain services and supports they are offering as part of their Comprehensive Prevention Plans. This guidance could include promising fiscal practices that have been demonstrated by counties.

## Grant Application Process

- The Panel recommends OCAP create guidance to increase accuracy and transparency about the timelines associated with OCAP grants—from application through release of funding. This guidance should include a realistic timeline that details each step of the process including, but not limited to:

- ▶ Application and review period
- ▶ Award
- ▶ Grant review and scope of work development
- ▶ Legal and administrative review
- ▶ Agreement finalization
- ▶ Release of funds
- ▶ Amendment (extension, budget, etc.)

- OCAP should further support potential grant applicants in determining whether to apply by exploring a layered grant process. The Panel recommends this process includes, but be not limited to:

  ▶ **Request for Information**: Provide general guidance on what OCAP intends to fund and solicit a letter of intent from interested prevention-focused organizations. This letter of intent will include, but not be limited to:

    - organizational capacity and strengths, including how the grant opportunity would further develop the capacity of the organization,
    - organizational vision for program design and service provision,
    - organizational funding requirements.

  ▶ **Request for Applications**: Utilize the information collected during the RFI process to finalize the grant scope of work and notify RFI respondents of the opportunity to apply for the grant.

  ▶ As part of the RFA process, OCAP should expand its communication to potential grant applicants by conducting Bidder's Conferences for all grant opportunities. These should be accessible in a virtual environment and recordings of these sessions should be made available for reference during the application window. Bidder Conferences should include subject-matter experts from OCAP who can provide details not only on the technical aspects of completing the RFA, but also the intent of the funding opportunity and how it aligns with OCAP's vision. OCAP should solicit questions from potential applicants prior to the Bidder's Conference to ensure that these sessions are as informative and responsive as possible.

- OCAP should build upon its commitment to equity by incorporating grant practices and evaluation criteria that would encourage applications from a variety of child and family well-being organizations. The Panel recommends consideration of the following criteria:

  ▶ Geographical diversity (rural, urban, suburban)
  ▶ Diversity in populations of focus
  ▶ Organizational size and capacity levels
  ▶ Organizations open to mentoring/partnering with emerging grassroots organizations

▶ Innovative practices to serve their communities and incorporate non-traditional partners (e.g., faith-based organizations, peer-lead organizations, and culturally responsive organizations)

## Grant Management

- The Panel recommends OCAP improve upon its grant reporting process by establishing consistent reporting mechanisms, including user-friendly electronic templates and web-based portals. Additionally, OCAP should consider modifying the level of reporting requirements to be commensurate with the size and the purpose or goals of the grant.

- Utilizing active outreach to current and past grantees, the Panel recommends OCAP expand on its opportunities for grantees to come together to share best practices, learn from each other, and further improve coordination and communication between system partners and OCAP.

- The Panel recommends that CDSS, and OCAP where applicable, explore ways to assist grantees with fiscal funding and administrative barriers with the grant process, including but not limited to:

  ▶ Timely electronic payments to grantees
  ▶ Providing upfront funding to support initial program development, possibly in collaboration with philanthropic foundations.
  ▶ Identify where it is possible to blend and braid funding to support the initial costs of program development and fund more flexible program activities (e.g., food costs and incentives to lower barriers to engagement for program participants).
  ▶ Providing increased clarity for organizations on how funds may be able to be used and any relevant approval processes that may be required.

The Prevention CRP recognizes that adopting recommendations will be a multi-year process and is committed to working in collaboration with OCAP. The CRP invites OCAP to partner with the CRP to plan and implement these recommendations.

## Additional Areas for Further Exploration in 2025 - 2026

In the discussion of grants and how they can best support community-based efforts to improve child and family well-being, additional curiosity from Panel members related to the criteria on how grants are scored as well as how outcomes are defined and measured to ensure the funds are having a positive impact.

Neither of these areas generated recommendations from the Prevention CRP this year as the topics will require further exploration with both OCAP and grant recipients. It should be noted that the Child and Family Services Citizen Review Panel includes recommendations on scoring OCAP grants specific to father engagement; how the department responds to those recommendations will certainly be of interest to both CRPs moving forward. Additionally, early conversations with both OCAP and panelists indicated a need to learn more about the impact of OCAP grant investments.

Further areas of exploration could include how outcomes are defined, how data is collected and reported, and how this information could be used to both increase the impact of existing programs as well as inform program design moving forward. As stated in the wrap-up of the Prevention CRP recommendations, the Panel is interested in continuing to partner with OCAP to help inform and support these efforts, as the Panel recognizes implementing the recommendations will not be simple and having partners with a shared commitment to improving child, family and community well-being is critical.

# The Children and Family Services Citizen Review Panel

## Area of Focus

The CFS CRP met monthly throughout the fiscal year 2024-2025. The Panel includes 10 returning members from the previous year and two new members this year. Panel members bring a wide range of professional and lived expertise that informs the Panel's efforts to support improvements to the child and family system of care. Please see Appendix B for a complete list of panel members and their professional affiliations. For the last 3 years, the Child and Family Services Citizen Review Panel has operated two subcommittees with the following areas of focus: Father Engagement, and Independent Living Skills Program. Both subcommittees were facilitated by CFPIC and RDA. Subcommittees met during regular monthly meetings and scheduled additional ad hoc work time as needed to inform the development of annual recommendations.

**Independent Living Program (ILP) Subcommittee**

- In 2022-2023, the CFS CRP established an ILP Subcommittee to focus on services supporting successful transition to adulthood for youth and young adults in care. The ILP subcommittee developed a baseline understanding of how ILP services currently function in California and used that information to identify scalable successes at the local level, identify solutions for systemic barriers, and make recommendations for improvement. The committee also established a partnership with San Diego County to learn about that county's approach to ILP and whether they would participate in a pilot for the development of an evaluation toolkit.

- In 2024-2025, the ILP subcommittee focused on developing an evaluation toolkit that was intended to improve Independent Living Program (ILP) Services by evaluating the delivery and impact of services in partnership with youth who have lived experience with ILP. The evaluation tools and processes are being co-designed with youth and include a specific focus on engaging youth in the evaluation process.

**Fatherhood Engagement (FE) Subcommittee**

- The FE subcommittee chose to build upon the previous year's research activities and focus on improving service design to more effectively engage and support biological fathers. Specifically, the FE subcommittee members see room for growth when it comes to creating a unified vision for improving father specific resources and services to guide ongoing investment in father engagement at the local level.

## Overview of This Year's Work: Independent Living Program Subcommittee

As a part of evaluation efforts provided below is an update of the work completed thus far.

- Strengthened partnership with San Diego Department of Child and Family Well Being (CFWB) to plan youth engagement to develop a youth-led evaluation plan and evaluation toolkit
- Recruited youth to partner in the co-development of the evaluation plan and toolkit
  - ▶ Developed guides for co-creation with youth through youth feedback sessions
- Recruited new subcommittee members to add expertise and perspectives
- Strengthened partnership with CDSS
- Presented the toolkit and evaluation plan to the CWDA Transition Age Youth Subcommittee; generated interest amongst counties in possibly replicating the work of the ILP subcommittee

In addition to the above, the ILP subcommittee followed a detailed workplan which guided activities as laid out below:

**Background and Discovery:** The Panel gathered information about the existing ILP landscape and services in San Diego County.  These were primarily sought from two data sources:

- ***Key Informant Interviews (KIIs):*** Prior to conducting KIIs, the Panel identified specific parties to interview, developed the interview questions and protocol and the associated outreach language. The SD CFWB provided feedback and contact information/introductions to the key informants.

- **Document Review:** In collaboration with SD CFWB, the Panel identified relevant and available data and documentation which included **a)** NYTD data for SDC, **b)** ILP Narrative Report for SDC, and **c)** Other program data such as the documentation of services and service providers.

**Evaluation Planning:** CRP members worked in partnership with key stakeholders (including youth with lived experience) to develop the evaluation plan. This process involved the following steps:

- **Stakeholder Session Planning and Outreach:** The Panel helped identify the stakeholder type and age group of the lived experts to include in the planning, including developing outreach materials and providing compensation for youth to participate. The stakeholder types included justice-involved youth, probation youth, tribal youth (and service providers for these special populations). SD CFWB helped the panel determine the process for minors to be approved to participate in the planning and provided contact information and a lead to 10 such lived experts.

- **Hosting Stakeholder Sessions:** The Panel facilitated sessions and documented notes, which were reviewed by SD CFWB.

- **Evaluation Plan Development:** The Panel developed an outline of the evaluation toolkit phases and activities and shared the materials with stakeholders and SD CFWB for their review and feedback. SD CFWB reviewed the evaluation phases and activities and granted feedback to the Panel who incorporated them into the plan.

**Toolkit Development:** CRP members developed evaluation toolkit materials—the planned tools determined by evaluation planning efforts.

This process involved the following steps:

- **Tool Drafting:** The Panel drafted the tools and shared them with SD FFWB for feedback. SD CFWB reviewed the toolkit and provided feedback.

- **Tool Review (with key stakeholders):** Outside of SD CFWB, the Panel shared the tools with stakeholders and scheduled and facilitated a review meeting.

- **Finalizing Tools:** The Panel revised the tools based on CFWB and stakeholder feedback. SD CFWB approved the evaluation tools for a pilot.

# Recommendations from the
# Independent Living Program Subcommittee

- The Panel recommends that CDSS continue to work with the ILP Subcommittee of the CRP to further support the development of tools and procedures for evaluating ILP services that are centered around youth voices and can meaningfully measure the extent to which ILP services meet the needs of youth exiting from care. This may be accomplished through either improvements to existing evaluation methods and/or development of new approaches.

- CDSS should include ILP Subcommittee members as participants in the process of redesigning the CDSS ILP Narrative Survey Report, improving questions to incorporate information about the impacts and outcomes of ILP services on youth wellness and readiness for independence as determined by youth leaders and lived experts.

- CDSS should advocate for improvements to the NYTD survey to include measures based on youth goals, service impacts, and outcomes. This should include exploring alternate methodologies and procedures for collecting information from youth as well as compensation for time spent by youth providing feedback.

- Explore alternate methods for completing ILP evaluation, including third party vendors.

## Areas of Additional Exploration:
## Independent Living Program Subcommittee

- Continued partnership with San Diego County on pilot

- Work with CDSS on narrative report and possible implications for NYTD

- Consider expansion of toolkit activities to other counties

## Overview of This Year's Work:
## Fatherhood Engagement Subcommittee

Over the course of the previous 3 years, the FE subcommittee has dedicated considerable time to reviewing best practice research and promising practices. Panelists built on that foundation during FY24-25 by inviting presentations with OCAP, and CDSS more broadly, as well as exploring which tools would be most helpful for ensuring CDSS funded fatherhood-focused programs are incorporating best practices. The recommendations and the tools created by the FE subcommittee are intended to support the success of fatherhood-focused programs and complement the grant administration-focused recommendations of the Prevention CRP.

The Fatherhood Engagement (FE) subcommittee began their efforts by collaborating with OCAP to better understand existing grantmaking practices. Panelists also reviewed the objectives and outcomes of the eight fatherhood-focused pilot programs that were funded through OCAP. During these discussions, panelists were encouraged to learn about how pilot programs use evidence-based and promising practices, such as utilizing peer-to-peer support, to connect fathers to the most appropriate services for their needs. Panelists identified two areas for improvement:

- Grantees are not required to have a sustainability plan for their program. Unfortunately, pilot programs in general tend to struggle to obtain long-term funding to ensure they can continue to provide vital services in their communities. Some of these service interruptions are unavoidable and subject to fluctuations in available funding from the county to the federal level. However, pilot programs can improve their competitiveness for grant funding by building a strong data culture at the outset and regularly dedicating time to identifying potential future funding opportunities.
- While programs focus exclusively on fathers and their children, they are often part of a larger organization that is focused on the broader family needs. Panelists feel that it is important to uplift fatherhood-focused organizations, especially at the grassroots level, to ensure programs are culturally responsive to the needs and experiences of fathers involved in, or at risk of becoming involved in, the Child Welfare System.

Building on earlier work, the Fatherhood Engagement (FE) subcommittee spent the first half of the FY24–25 panel year closely reviewing the full FE pilot grant process. Panelists examined Year 1 reports, discussed with OCAP how grant expectations were communicated, and considered the type of support programs received. Through this review, it became clear that while OCAP was

engaged in monitoring progress, there was an opportunity to strengthen the technical assistance (TA) component and support grantees more proactively. These insights shaped the subcommittee's work early in the year and directly informed the development of a new rubric to guide future efforts.

As the Panel reviewed progress, they reflected on how grant goals aligned with the broader intentions of fatherhood engagement work. A consistent theme was the need for clearer accountability—both to ensure programs are progressing toward their goals, and to track whether investments are reaching the intended populations. Past pilot efforts often lacked mechanisms to measure impact or sustainability, making it difficult to assess long-term success. This gap led to a key recommendation focused on building TA structures and strengthening data practices to help programs grow effectively.

The subcommittee also revisited how well CDSS investments aligned with evidence-based fatherhood engagement principles. Panelists emphasized the importance of culturally responsive, community-rooted approaches and saw value in deepening alignment between funding and established best practices. These reflections supported further refinement of the rubric and helped shape discussions about program expectations and evaluation.

Sustainability remained a central concern. Panelists noted that while pilot programs often deliver critical services, many face challenges maintaining operations once initial funding ends. The subcommittee sees an opportunity for CDSS to support long-term planning at the program level and to help ensure continuity of services, especially in communities most affected by child welfare agencies involvement. These ideas are captured in the Panel's second recommendation, which focuses on supporting sustainability and sharing successful models across the state.

In addition, panelists began to explore the broader landscape of CDSS investments in fatherhood engagement. While learning about peer partner models and other related initiatives, it became clear that a centralized inventory of efforts could help inform strategy and coordination across departments. This led to a recommendation for a statewide landscape analysis to better understand and strengthen fatherhood-focused investments.

Finally, the subcommittee discussed ways to support shared learning and promote promising practices, such as through webinars or All County Information Notices (ACINs). These approaches would help amplify effective models and ensure that both emerging and established programs benefit from shared knowledge and lessons learned statewide.

# Recommendations from the Fatherhood Engagement Subcommittee

- Incorporate the Fatherhood Engagement Best Practices & Program Design Rubric into the CDSS application and evaluation process for all future funding opportunities related to fatherhood engagement. The recommended rubric is included as Appendix E.

- Allocate substantial funds within current and future CDSS Fatherhood Engagement funding opportunities to be specifically apportioned for the following:
  - ▶ Technical assistance for data collection/management, program design continuous quality improvement, and identifying sustainable funding.
  - ▶ Evaluation services or program impact reports.
  - ▶ Collaboration and networking opportunities to share resources and best practices with programs or organizations conducting similar work in their communities.

- Regularly, spotlight best and emerging practices for Fatherhood Engagement programs, such as through webinars, All County Information Notices, CDSS website updates, and including reference to successful programs in future RFPs to maximize opportunity for spread of successful programs.

- Develop, maintain, and make publicly available a comprehensive inventory of CDSS investments, activities, and partnerships related to fatherhood engagement. The inventory should include, but not be limited to, the following:
  - ▶ Internal Staff Efforts: CDSS staff responsible for gathering information, Workgroups for Fatherhood Engagement, and CDSS' training efforts for external partners, constituents, and stakeholders.
  - ▶ CDSS Funded Efforts:
    - ▪ Impact Information: Links to publicly available impact or evaluation reports.
    - ▪ Demographic Information: Organization name, organization size, zip code, populations served (e.g. race/ethnicity, socio-economic status etc.), links to program websites.

- Award/Investment Information (if applicable): Total grant award and award years.
- Include a description of each program's efforts, mission, goals and expected outcomes.
▶ External Efforts:
  - Identify Partners and Organizations that support the development of best practices for Fatherhood Engagement.
  - Identify Partners and Organizations who were previously awarded a Fatherhood Engagement Grant who can provide technical assistance and mentorship for new Fatherhood Engagement programs.
▶ Actively involve partners such as Citizen Review Panels and the Fatherhood Council to provide updates and seek guidance on Fatherhood Engagement related activities and investments.

## Areas of Additional Exploration: Fatherhood Engagement Subcommittee

The Fatherhood Engagement Subcommittee, and the CFS Panel overall, looks forward to continued partnership with CDSS and supporting ongoing efforts to improve and expand access to services for fathers and their children.

# The Critical Incidents Citizen Review Panel

## Overview of This Year's Work

Each year the CI CRP develops a detailed, structured Work Plan that outlines priorities, objectives, and specific activities. The full Work Plan is included in Appendix F. In 2024, the Panel submitted a progress report on its work to achieve established objectives across five priority areas. Work across these priority areas continued throughout 2025; the Panel focused its efforts on the continuation of research, issue exploration, and partnership development to decrease child fatalities and near-fatalities due to maltreatment in California.

The five priority areas and associated objectives set by the CI CRP are the following (with the specific activities delineated in the detailed Work Plan in the Appendix):

### 2024-2025 Priorities and Strategic Objectives

**Priority Area:** **Share, use & improve the CDRT Toolkit**

**Objective:**
What do we want to achieve

Statewide awareness of Toolkit and established process for local CDRTs to provide feedback to support continuous quality improvement of the Toolkit.

**Priority Area:** **Establish a statewide approach to building connection and peer sharing among local CDRTs within their regions**

**Objective:**
What do we want to achieve

Local CDRT leaders and teams have a clear connection for learning, mentorship, support and building consistency across CDRT review practices with other CDRTs in their region. Increased relationship and unified voice to better elevate review findings and recommendations.

**Priority Area:** **Improved consistency, reliability, and accuracy of statewide data used to identify and characterize child fatalities, near-fatalities, and maltreatment**

**Objective:**
What do we want to achieve

Improved ability to identify, document, and learn about circumstances surrounding child fatalities and near-fatalities across the state to support more robust recommendations for a public health approach to preventing fatalities, near-fatalities, and maltreatment.

**Priority Area:** **Increased awareness of the continuity of family support and prevention programming statewide and the impact of home visiting programs on child fatalities, near-fatalities, and maltreatment**

**Objective:**
What do we want to achieve

Accurate description of what evidence-based home visiting programs are being implemented statewide, and improved understanding of their impact in preventing child fatalities and near-fatalities to further inform panel recommendations and state funding for preventative programs and continuity of family support and care

**Priority Area:** **Advocate for increased state support and adoption of CI CRP recommendations including the development of a statewide Child Death Review Council**

**Objective:**
What do we want to achieve

A collaborative state to local-level approach to decreasing child fatalities and near-fatalities through the formal establishment and recognition of a State Child Death Review Council.

## 2024-2025 Panel Accomplishments

The CI CRP members continued to deepen relationships with state partners at the California Department of Social Services (CDSS) and the California Department of Public Health (CDPH). The CRP CI recognizes and appreciates the Panel's working relationship with CDSS, which has never been better. Under its current leadership, the CDSS Children's Services Operation Bureau (including its Critical Incident Oversight & Support Unit) has been present at many of the Panel's meetings and educated and oriented Panel members to many policies and programs. Communication and collaboration have been open and collaborative. The Panel applauds and praises the energy and dedication of these staff.

Additionally, the Panel established a new partnership with the Los Angeles Interagency Child Abuse Network (ICAN). Partnership with the ICAN has been a significant strength for panel efforts to develop and support a more coordinated child death review infrastructure across California. Partnership and relationship development has happened through focused learning and collaboration meetings with these partners and panel members. These meetings have helped expand the CI CRP's understanding of how to best achieve its objectives and have led to specific recommendations that Panel members believe will increase knowledge, documentation, and understanding of the causes of child fatalities and near-fatalities because of abuse and/or neglect, as well as improve the Child Welfare System's ability to prevent these tragic outcomes from occurring. This work further contributed to the Panel's understanding of how best to communicate about the value of local CDRTs to agency partners as well as community members in counties where a local CDRT is not currently supported.

The core actions accomplished by the Panel over the 2024-2025 period are outlined below, by priority area.

**Priority Area**    **Share, use & improve the CDRT Toolkit**

**2024-2025 Accomplishments & Actions Taken**

- CDSS Reviewed & Approved CDRT Toolkit
- CDRT Toolkit was updated for Accessibility Standards (in partnership with CDSS)
- CDRT Toolkit was shared by CDSS, CDPH, and with ICAN's State CDRT Network
- The Safe Systems Improvement Tool was integrated into the toolkit.
- Initial Presentations to raise awareness and use began:
  - CAPC Convening, November 2024 [Presented by Stuart Oppenheim & Stephanie Biegler]
  - Presentation accepted for International Child Maltreatment Conference, January 2026
  - Exploration began for hosting a Webinar with CalTrin

**Priority Area**    **Establish a statewide approach to building connection and peer sharing amongst local CDRTs within their regions**

**2024-2025 Accomplishments & Actions Taken**

- Connection established with ICAN's statewide CDRT Network initiative
  - Attendance at quarterly meetings
  - Planning for Regional Learning Collaboratives and Statewide Conference in coming year
  - County CDRTs surveyed to assess interest in Regional Collaboratives and Statewide Conference in the upcoming year (resounding support for improved and ongoing connections were expressed.)
- CDRT County/Contact Roster updated (including primary contacts and CDRT status)
  - Organized CDRTs into 6 Regions according to CDSS/CDPH Innovative Partnership Grants alignment
- Initial development of Medical Examiner/Coroner list, by county

**Priority Area**  **Improved consistency, reliability, and accuracy of statewide data used to identify and characterize child fatalities, near-fatalities, and maltreatment**

**2024-2025 Accomplishments & Actions Taken**
- Fostered ongoing relationship with CDSS and CDPH
- Reviewing and providing feedback for improvement to the CDSS Child Fatality and Near-Fatality Report
  - ▶ Serving as a point of accountability and encouraging an expedited sharing timeline
- Hosted a meeting with CDSS and CDPH to explore options for integrating data efforts from both Departments and how to improve local data collection to ensure greater statewide accuracy (Hosted in May 2025)

**Priority Area**  **Increased awareness of the continuity of family support and prevention programming statewide and the impact of home visiting programs on child fatalities, near-fatalities, and maltreatment**

**2024-2025 Accomplishments & Actions Taken**
- Discovery and learning about current Home Visiting programs supported by CDSS, CDPH, and First 5 California; these partners provided presentations to Panel members in November 2024
- Presentation and learning about Sacramento County's approach to home visiting as a successful evidence-based model; further informing the Panel's ability to make strategic recommendations for increasing statewide implementation of home visiting programs that are effective and sustainable

**Priority Area**  **Advocate for increased state support and adoption of CI CRP recommendations and for the development of a statewide Child Death Review Council**

**2024-2025 Accomplishments & Actions Taken**
- Connection established with ICAN's statewide CDRT Network initiative
  - ▶ CI CRP members attend quarterly meetings
- On-going discussions with state departments about how best to promote support for statewide Child Death Review Council

In addition to focused actions and activities within each of the priority areas, the CI CRP also engaged in the following activities during the 2024-2025 period:

- Conducted New Member Recruitment, Selection, and Orientation which resulted in six new members joining the CI CRP.
- Participated in and shared at the 2025 All-CRP Annual Meeting.
- Developed a partnership with the National CRP Advisory Committee; partnering and planning for the 2026 National Conference which will be in California and hosted by California's CRPs.

## Findings from the Panel's Work

Throughout the 2024-2025 period, the Panel's work was focused on the identification of system gaps and barriers, the development of strategic partnerships to expand knowledge and understanding of system operations, and the examination of models and best practices that could support system and service delivery improvement at the state and local levels. These efforts are presented in the following paragraphs and by panel priority areas.

**Priority Area** **Share, use & improve the CDRT Toolkit**

In 2023, the Panel developed the Child Death Review Team (CDRT) Toolkit. This Toolkit is intended to be a living resource to support CDRTs throughout the state. Whether well established and looking for improvement opportunities, emerging and looking for guidance, or still planning for formation, the Toolkit provides a pathway to best practices and resources, and supports increased consistency and sustainability for CDRT activities. During the 2024-2025 period, the Panel worked in coordination with the CDSS to adapt the CDRT Toolkit to be more widely available, consistent with Accessibility Standards. Additionally, the Panel actively continues to identify and review emerging and established best practices to incorporate into the Toolkit.

Of primary focus over the past year, was sharing the CDRT Toolkit more broadly and with new groups. This sharing took place across multiple forums and platforms (e.g., email updates, websites, conferences). Through sharing the CDRT Toolkit, the Panel members and facilitators have learned of its value to jurisdictions with an existing CDRT as well as to those that have not yet (or who do not at present) convene a local CDRT. Through presentation and related discussions, the Panel continues to identify and make recommendations for refinements, updates, and additions to the Toolkit. These recommendations are

presented and discussed during Panel monthly meetings, and those adopted are then added to the online Toolkit resource.

The Panel members and facilitators actively explore additional opportunities to share the CDRT Toolkit; the Panel is committed to continued promotion of the Toolkit's value to ensure local communities are more readily and consistently able to engage in child death review actions. Finally, the Panel actively seeks and welcomes feedback from partners using the toolkit and engaging in CDRT efforts. This supports the Panel's strategy for CDRT Toolkit continuous quality improvement and sustained relevancy statewide.

>> **Priority Area** **Establish a statewide approach to building connection and peer sharing amongst local CDRTs within their regions**

In the absence of leadership and direction from a state-level Child Death Review Council, which remains in statute but was dismantled in 2008 and since defunded, the Panel identified gaps in county-to-county coordination.

Intercounty communication among, and coordination of, local Child Death Review Teams and child welfare agencies is essential. Child fatalities and near-fatalities due to maltreatment persist statewide and when not reviewed and discussed at a state level, there is a missed opportunity for improved understanding of the circumstances surrounding each child fatality and near-fatality and larger scale improvements to the Child Welfare System and programs that truly address the root causes of child abuse and neglect.

In researching a plan for developing a county-to-county network of CDRTs, the Panel learned of similar efforts being undertaken by the Los Angeles Interagency Child Abuse Network (ICAN). ICAN began to host bi-monthly to quarterly CDRT collaboration and sharing meetings. CI Panel members reached out to ICAN and following an initial introductory and overview meeting, CI CRP members began to attend and participate in these meetings as well.

Further, the CI CRP and ICAN worked together to update a roster of county-level CDRT contacts. This allowed for a deeper understanding of child death review operations (or lack thereof) for each county in California. Additionally, it allowed for the development of statewide CDRT contact list to support coordinated communication and partnership. This foundation will enable a more comprehensive approach to connect local CDRTs together in upcoming years. Following roster updates, the CI CRP surveyed local CDRTs to further learn

of their interest in the establishment of regional peer mentoring networks as well as their ability and interest to attend a statewide CDRT conference. There was resounding support for both greater connection in an ongoing format, but also the opportunity to connect more broadly with others engaged in similar work across the state. In response, the CI CRP is planning a statewide conference for early 2026 with hopes of bringing CDRT representatives together from each county and to initiate regional connections and conversations.

## COUNTIES WITH CHILD DEATH REVIEW TEAMS

| | | |
|---|---|---|
| Alameda | Merced | Santa Barbara |
| Alpine | Modoc | Santa Clara |
| Amador | Mono | Santa Cruz |
| Contra Costa | Monterey | Shasta |
| Del Norte | Nevada | Sierra |
| El Dorado | Orange | Siskiyou |
| Fresno | Placer | Solano |
| Humboldt | Plumas | Sonoma |
| Imperial | Riverside | Stanislaus |
| Kern | Sacramento | Sutter |
| Kings | San Benito | Trinity |
| Lassen | San Bernardino | Tulare |
| Los Angeles | San Diego | Tuolumne |
| Madera | San Francisco | Ventura |
| Marin | San Joaquin | Yolo |
| Mariposa | San Luis Obispo | Yuba |
| Mendocino | San Mateo | |

### COUNTIES WITH NO OPERATING CHILD DEATH REVIEW TEAMS

| | | | |
|---|---|---|---|
| Butte | Colusa | Inyo | Napa |
| Calaveras | Glenn | Lake | Tehama |

Initial CDRT regional networks and statewide conference planning have not yet had participation from aligned state departments (CDSS and CDPH). However, both initiatives would benefit from partnership and participation, and the CI CRP hopes both will be open to greater engagement in the upcoming year.

## Priority Area Improved consistency, reliability, and accuracy of statewide data used to identify and characterize child fatalities, near-fatalities, and maltreatment

Since its inception in 2017, the CI CRP has understood the need for consistent, reliable and accurate statewide data identifying child fatalities and near-fatalities due to maltreatment and has consequently made multiple recommendations aimed at resolving gaps and limitations in state data collection and reporting. This year's work included focused meetings with the CDSS and CDPH to further understand how each department collects child abuse, neglect, fatality, and near-fatality data; the goal is to identify areas for improvement and greater coordination of cross-departmental efforts.

In coordination and partnership, the CDSS Critical Incidents Unit provided a comprehensive and compelling presentation for the CI CRP members. From this presentation, Panel members learned that there is a statutory requirement (Welfare and Institutions Code (WIC) § 10850.4 (j)) for all 58 county Child Welfare departments to report to the CDSS all child fatalities due to maltreatment that they are aware of; awareness most frequently is a result of a child being previously known to Child Welfare or because the fatalities are reported to Child Welfare once they are determined to have occurred due to child maltreatment.

The Panel also learned that there is no mandated process for professionals outside of Child Welfare to report child fatalities if the child has not previously been known to Child Welfare. In its assessment, the Panel discussed the importance of having each child fatality reported to Child Welfare, regardless of previous involvement or apparent maltreatment and the need for revisions in the California Child Fatality Surveillance System (CCFSS). In doing so, the state would have a more comprehensive, consistent, reliable, and accurate data set for child fatalities.

An essential component of quality data is accurate data collection and reporting. At present, there is neither comprehensive nor standardized training for county-level child welfare staff or CDRTs. The panel and CDSS partners discussed the importance of shifting practices to provide clear definition for data collected, as well as detailed overviews of the process for collecting data locally and reporting to CDSS. The need for comprehensive, standardized, and mandatory training was identified.

Comprehensive, consistent, reliable, and accurate data and accounting of child fatalities in the state is important to quality identification of root causes contributing to these poor outcomes and development of strategic action to avoid preventable child deaths.

Further, child fatalities are shared through the CDSS Annual Report on Child Fatalities; more thorough and accurate data would improve the reliability of accounting of California's children to tragically die due to abuse and/or neglect. Additionally, timely and regular reporting must be in place and followed; this reporting should have established, communicated, and predictable times for release to support statewide efforts at the legislative and community levels. The CDSS Annual Report serves as a communication tool to the state legislature and other policy planning entities. An accurate and comprehensive report will lead to better informed and more strategic policy, programs, and ideally funding decisions in service to children across California.

The CDSS Child Fatality & Near-Fatality Annual Report[4] (Annual Report) is mandated by State Senate Bill 39 (Chapter 468, Statutes of 2007) to issue an annual report on child fatalities and near-fatalities in our state. While we recognize that reports have a lag time required to accumulate and validate data, the last CDSS Annual Report is the 2017 report, based upon 2017 data.

This demographic and epidemiological analysis is foundational for wise and responsive program and prevention intervention. It would be beneficial to have more timely reporting of county and statewide data.

Finally, the Panel learned that there has been no coordination in data reporting or systems between CDPH and CDSS. This limits the ability to have a statewide perspective on Child Welfare outcomes and decreases the state's ability to be a leader in protecting children and strengthening families. This lack of coordination extends to the county level. At the county level, CDRTs are only able to access and collect data from within their own county boundaries. This lack of county-to-county interoperability severely limits and delays review processes and leads to gaps in the data. An example of this is the inability of CDRTs to access birth and death certificates from outside their county. Improving access and removing systemic barriers would greatly improve the quality of case reviews and data sharing from local to state partners.

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[4] The Critical Incident Oversight & Support Unit (CIOSU) is responsible for the review of critical incidents reported to the CDSS which involve child fatalities and near fatalities resulting from abuse and/or neglect. Annual Reports can be accessed at: https://cdss.ca.gov/inforesources/child-fatality-and-near-fatality

**Increased awareness of the continuity of family support and prevention programming statewide and the impact of home visiting programs on child fatalities, near-fatalities, and maltreatment**

The review of child fatality and near-fatality incidents through a multi-disciplinary team approach, like the CDRTs, is essential to the CI CRP's focus and efforts. The Panel prioritizes its focus on CDRT infrastructure and improvement, understanding that to improve the child welfare system and fortify the state's child abuse and neglect prevention initiatives there must first be a clear, data- and family-informed understanding of how the system does or does not meet current child and family needs and how that contributes to some of the worst outcomes for children in the state (i.e., near-fatality, fatality due to maltreatment). As such, the Panel expanded its focus toward assessing effective preventative actions by increasing its awareness of the prevention models that operate across the state and work to serve at-risk families directly in the home and community setting.

Home visiting programs have long operated in the state. However, home visiting program model use, implementation, and sustainability varies greatly county by county. During the 2024-2025 program year, the Panel focused efforts to examine this variation to inform what best/better fit evidence-based home visiting models and practices would strengthen child abuse and neglect prevention measures. In November 2024, the Panel convened partners responsible for the administration and/or oversight of home visiting programs in California. The convening gathered representatives from CDSS, CDPH, and First 5 California as well as Children Now.

In preparation for the convening, the Panel elevated five core areas of desired discovery to each presenting partner:

Discovery & Learning Areas of Focus:

- Identifying the number of home visiting programs supported across the state (and by county where possible)
- Examining program sustainability and funding structures for operating programs
- Clarifying the capacity (staff numbers, caseload goals, actual caseload numbers) for unique programs and how this varies by county
- Understanding how programs collect data (including demographic data), conduct evaluations, and report on program outcomes; and
- Learning how home visiting programs administered by different states and/or CBO agencies communicate and coordinate with each other.

In responding to the requested areas of discovery, each partner provided an overview of the home visiting programs supported and shared briefly about program evaluation outcomes. CDPH administers the following evidence-based home visiting models in coordination with local county partners (e.g., local public health agencies, community-based organizations).

**California Department of Public Health (CDPH)**

- **Family Connects**
- **Healthy Families America**
- **Home Instruction for Parents of Preschool Youngsters**
- **Nurse Family Partnership**
- **Parents as Teachers**

*other evidence-based & innovative home visiting models supported at the county-level (varies by county and region)

The CDSS and First 5 presented home visiting work more broadly. Each assumes the role of funder to county-level agencies who in turn provide a breadth of services, among which frequently includes home visiting programming. The CDSS, for instance, provides oversight of the California Opportunity and Responsibility to Kids (CalWORKs) program. CalWORKs is a voluntary program that is then administered by participating counties across California.

Many counties utilize CalWORKs funding to support evidence-based home visiting programs[5]. Home visiting programs administered is a county-to-county decision, as such there is significant variation in the home visiting programs provided as well as the capacity for the number of eligible families that can be supported. A further limitation is the lack of transparency and ease of access to information about home visiting programs in operation across the state. The completion of a statewide home visiting impact assessment would support more strategic statewide provision of services, however, there presently exists no centralized listing of home visiting programs (by home visiting model and county) to support these efforts.

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[5] CalWORKS Home Visiting Programs may serve eligible families with home visiting services for up to 24 months or until the child's second birthday, whichever is later. Additional eligibility criteria are available through the CDSS website at: https://www.cdss.ca.gov/calworks-home-visiting-program/families

First 5 California operates similarly to CDSS; First 5 California (also known as the California Children and Families Commission) distributes funding to all 58 counties. In turn, each county has established a local First 5 commission. These local bodies determine how funds should be used to address local community needs for children aged 0 to 5 and their parents or caregivers. This frequently encompasses home visiting programs, but again there is wide variation in programming and capacity for service provision by county.

Additional information about CDSS and First 5 California, evidence-based home visiting partners and funders, is available on each agencies' website:

**California Department of Social Services (CDSS)**

▶ **California Work Opportunity and Responsibility to Kids (CalWORKs) Home Visiting**

**First 5 California**

▶ **California Children and Families Commission & Local First 5 County Commissions**

Following this initial convening, the Panel had a presentation about the Birth & Beyond Family Resource Centers, an evidence-based home visiting model in Sacramento County.

**Child Abuse Prevention Center (CAPC)**

▶ **Birth & Beyond Family Resource Centers**

These presentations and partner discussions reinforced the importance of evidence-based and data-driven home visiting programs being made available to more families across the state. Home visiting programs universally provide both a layer of prevention as well as early intervention for child abuse and neglect. They equip families with a partner (e.g., nurse, community health worker, social worker, etc.) that provides linkages and direct connections to the resources and supports most needed in those early years of their child(rens) life.

Presentations and discussions shed light on the gaps in home visiting program access in the state. While county-level home visiting programs collect service data and monitor family outcomes, this information is maintained in siloed

systems with no process for aggregated review or use. This diminishes the state's ability to evaluate impact at a macro level. Additionally, data collected is stored in differing data management systems, and data points and outcome measures vary in definition and program to program collection abilities.

Evaluation and outcome data shared demonstrated the success and benefit of evidence-based home visiting programs on an individual and local level. It is imperative to understand the statewide impact for better future planning.

Finally, the Panel reviewed and discussed the various models of home visiting programs that serve families across California. Evidence-based programs provide coverage and access across the state and encompass nurses to social workers to community health worker models. While all evidence-based models are impactful, the panel further explored models that may be most cost effective and sustainable such as home visiting programs staffed primarily by community health workers. Community health worker staffing models can be less expensive while still demonstrating successful program outcomes; further exploration would aid in sustainability of current access levels and help expand access to more Californians and their families.

In the upcoming year, the panel will continue to explore impactful prevention and early intervention programming that supports families and serves to prevent child abuse, neglect and near-fatalities and fatalities.


**Priority Area** **Advocate for increased state support and adoption of CI CRP recommendations for the development of a statewide Child Death Review Council**

The CI CRP has, since its inception in 2017, recommended the reinstatement of a statewide Child Death Review Council.  Research by the Panel revealed that California is one of very few states that do not have such a council.  Due to a fiscal crisis in 2008, California removed Department of Justice funding for the Child Death Review Council, and despite improving financial circumstances in the ensuing years, the State Administration has failed to reinstate the Council.

The benefits of a statewide council include, but are not limited to, creation of a centralized agency for statewide data collection, coordination of and communication with local County Child Death Review Teams, and identification of promising strategies to prevent child fatalities due to maltreatment. Although in statute some of these responsibilities are referenced regarding one of three State departments (DOJ, CDSS, CDPH), there is no centralized responsibility for ensuring guidance, support, and coordination of local CDRTs.

The Panel's research further revealed that Child Death Review Councils in other states have better alignment with maltreatment strategies by locating responsibility for Councils in Departments of Public Health and Departments of Social Services. When California's council was originally established it was located under the auspices of the Department of Justice, reflecting an emphasis on criminal prosecution and punishment.

Today, the role and purpose of Child Death Review Teams has evolved to focus on identifying the root causes of child fatalities to prevent them, the Panel believes that a reinstated statewide Child Death Review Council would be better situated in a department that supports child abuse and neglect prevention program activities (either CDPH or CDSS).

## CI CRP Recommendations for FY2024 - 2025

Informed by the research, learning, and activities completed over the past year, the CI CRP developed and offers the following recommendations. These recommendations are intended to support improvement in the Child Welfare System and to ultimately prevent child fatalities and near-fatalities due to abuse and neglect statewide.

**Data Infrastructure & Interoperability**

- CDSS should work with the CI CRP to provide best practice guidance to counties through an All County Information Notice and the bi-annual All-County Webinars done by the Children's Services Operations Bureau that encourages: **1)** establishment of a county or regional level CDRT (including a direct link to the CDRT Toolkit), **2)** reporting of each child case reviewed by CDRTs that is determined to a result of abuse and/or neglect to Child Welfare services (thereby expanding most counties' current level of reporting), **3)** that Child Welfare Agencies upload all relevant investigatory information including but not limited to CDRT findings into CWS/CMS, and **4)** County Child Welfare agencies to report all known child fatalities and near-fatalities due to abuse and neglect on a SOC 826[6] in alignment with WIC Section 10850.4-10850.54 within 10 days of determination that the fatality or near-fatality was due to abuse or neglect.

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[6] The submission of the SOC 826 form triggers completion of a full case review for each child fatality and near-fatality. This case review is completed by the CDSS Critical Incident Oversight and Support Unit.

- Upon implementation of the previous recommendation, which will result in more comprehensive data collection, we recommend that CDSS publish annual findings in a timelier manner.
- Participate in a working group, convened and facilitated by the CI CRP beginning no later than July 1, 2026, to identify opportunities to develop and implement a process for data sharing, cohesion, and reconciliation between CDSS and CDPH to limit duplication and decrease gaps in statewide data sets.
- CDSS should develop, deliver, and promote training for local Child Welfare staff and CDRTs that emphasize importance of data collection and details reporting processes around child fatalities and near-fatalities.
- CDSS should work with the administration to adjust from county-only to statewide access to birth and death certificates for CDRTs and their related case investigations.

### Prevention & Intervention Supports

- Advocate for sustained funding for evidence-based home visiting programs in current operation across the state, and advocate for increased funding to ensure equitable home visiting program access in each county.
  - ▶ Explore how more cost-effective home visiting models (e.g. community health worker led) can contribute to greater statewide coverage.
- CDSS, in partnership with CDPH and First 5, should develop a statewide registry of the evidence-based home visiting programs supported across the state; a comprehensive registry should identify programs by county, funding source, and caseload capacity.
  - ▶ The Panel would further recommend that the registry be made available through the OCAP website to support statewide partnership, connection, and learning.

### System Accountability & Capacity Building

- CDSS should work with the CI CRP to identify funding and resources to reinstate and maintain a State Child Death Review Commission and assign responsibility to either the CDSS or CDPH to reflect the evolution of child death review from a punitive focus to a child maltreatment prevention focus.[7]

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[7] Prior legislative proposals have included provisions for funding local CDRTs to support mandatory reporting to a statewide Child Death Review Council, which has raised concerns in the Administration regarding potential new costs to the state.   This recommendation does not include a recommendation for local  funding, and it is the opinion of the CI

- CDSS and CDPH staff should attend statewide and regional CDRT peer support meetings to learn about the needs of local CDRTS and explore how they might assist in addressing those needs.

## Additional Areas for Further Exploration in 2025 - 2026

In the 2025-2026 year, the CI CRP will continue to research and develop strategies across the five finding areas presented. This will be completed through coordinating with partners at CDSS and CDPH, as well as the county CDRTs.

In addition to renewing its strategic work plan in October to November of 2025, the Panel holds interest in further exploration in: **1)** identifying best practices to prevent child death due to maltreatment and identifying those that may be best integrated into the CDRT Toolkit, and **2)** the development of a comprehensive map of evidence-based programs in operation statewide that contribute to decreasing child abuse, neglect, and fatality.

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CRP that the cost for establishing a statewide Child Death Review Council without a commensurate funding for local CDRTs would be minimal and within the financial reach of the current Administration. The CI CRP and ICAN are two external entities that would assist in the Council's establishment without any request for funding beyond what is currently appropriated.

# Appendices

# Appendix A. 2024-2025 All CRP Recommendations to CDSS

## Prevention CRP Recommendations for FY2024 - 2025

**Grant Investment Process**

**1.1** As part of the strategic planning process, the panel recommends the Child and Family Services Division (and OCAP specifically) incorporate a broad outreach and participatory research process to gather data from community-based organizations (including grassroots organizations) and individuals with lived experience on community strengths and needs for child and family well-being, as well as input on the most important programs/projects to fund in their community.

This data will inform OCAP's grant funding priorities to ensure that funding better aligns with community strengths and needs. This process could include:

- Town hall meetings
- Listening sessions
- Informational sessions
- Surveys
- Focus groups

**1.2** The Panel recommends OCAP provide counties with updated guidance that encourages counties to update their Comprehensive Prevention Plans. This guidance could demonstrate how they will utilize their OCAP funding to increase capacity of local community-based organizations to build and sustain community-based services and support, as described in California's Five-Year State Prevention Plan.

**1.3** OCAP should build upon the Community Pathway State Fiscal Inventory to provide cross-systems (e.g. CDSS, DHCS, CDOE, CDDS, HCD, CSD, etc.) guidance to counties on ways to utilize the inventory to blend and braid funding to sustain services and supports they are offering as part of their Comprehensive Prevention Plans. This guidance could include promising fiscal practices that have been demonstrated by counties.

**Grant Application Process**

**1.4** The Panel recommends OCAP create guidance to increase accuracy and transparency about the timelines associated with OCAP grants—from application through release of funding. This guidance should include a realistic timeline that details each step of the process including, but not limited to:

- Application and review period
- Award
- Grant review and scope of work development
- Legal and administrative review
- Agreement finalization
- Release of funds
- Amendment (extension, budget, etc.)

**1.5** OCAP should further support potential grant applicants in determining whether to apply, by exploring a layered grant process. The Panel recommends this process includes, but be not limited to:

- **Request for Information**: Provide general guidance on what OCAP intends to fund and solicit a letter of intent from interested prevention focused organizations. This letter of intent will include, but not be limited to:
  - organizational capacity and strengths, including how the grant opportunity would further develop the capacity of the organization,
  - organizational vision for program design and service provision,
  - organizational funding requirements.
- **Request for Applications**: Utilize the information collected during the RFI process to finalize the grant scope of work and notify RFI respondents of the opportunity to apply for the grant.
- As part of the RFA process, OCAP should expand its communication to potential grant applicants by conducting Bidder's Conferences for all grant opportunities. These should be accessible in a virtual environment and recordings of these sessions should be made available for reference during the application window. Bidder Conferences should include subject-matter experts from OCAP who can provide detail not only on the technical aspects of completing the RFA but also the intent of the funding opportunity and how it aligns with OCAP's vision. OCAP should solicit questions from potential applicants prior to the Bidder's Conference, to ensure that these sessions are as informative and responsive as possible.

**1.6** OCAP should build upon its commitment to equity by incorporating grant practices and evaluation criteria that would encourage applications from a variety of child and family well-being organizations. The panel recommends consideration of the following criteria:

- Geographical diversity (rural, urban, suburban)
- Diversity in populations of focus
- Organizational size and capacity levels
- Organizations open to mentoring/partnering with emerging grassroots organizations
- Innovative practices to serve their communities and incorporate non-traditional partners (e.g., faith-based organizations, peer-lead organizations, and culturally responsive organizations)

**Grant Management**

**1.7** The Panel recommends OCAP improve upon its grant reporting process by establishing consistent reporting mechanisms, including user-friendly electronic templates and web-based portals. Additionally, OCAP should consider modifying the level of reporting requirements to be commensurate with the size and the purpose or goals of the grant.

- Utilizing active outreach to current and past grantees, the panel recommends OCAP expand on its opportunities for grantees to come together to share best practices, learn from each other, and further improve coordination and communication between system partners and OCAP.

**1.8** The Panel recommends that CDSS, and OCAP where applicable, explore ways to assist grantees with fiscal funding and administrative barriers with the grant process, including but not limited to:

- Timely electronic payments to grantees.
- Providing upfront funding to support initial program development, possibly in collaboration with philanthropic foundations.
- Identify where it is possible to blend and braid funding to support the initial costs of program development and fund more flexible program activities (e.g., food costs and incentives to lower barriers to engagement for program participants).

**1.9** Providing increased clarity for organizations on how funds may be able to be used and any relevant approval processes that may be required.

# The Children and Family Services CRP Recommendations for FY2024 - 2025

**Recommendations from the Independent Living Program Subcommittee**

**2.1** The Panel recommends that CDSS continue to work with the ILP Subcommittee of the CRP to further support the development of tools and procedures for evaluating ILP services that are centered around youth voice and that meaningfully measure the extent to which ILP services meet the needs of youth exiting from care. This may be accomplished through either improvements to existing evaluation methods and/or development of new approaches.

**2.2** CDSS should include ILP Subcommittee members as participants in the process to redesign the CDSS ILP Narrative Survey Report, improve questions to incorporate information about the impacts and outcomes of ILP services on youth wellness and readiness for independence, as determined by youth leaders and lived experts.

**2.3** CDSS should advocate for improvements to the NYTD survey to include measures based on youth goals, service impacts and outcomes. This should include exploring alternate methodologies and procedures for collecting information from youth as well as compensation for time spent by youth providing feedback.

**2.4** Explore alternate methods for completing ILP evaluation, including third party vendors.

**Recommendations from the Fatherhood Engagement Subcommittee**

**2.5** Incorporate the Fatherhood Engagement Best Practices & Program Design Rubric into the CDSS application and evaluation process for all future funding opportunities related to fatherhood engagement. The recommended rubric is included as Appendix E.

**2.6** Allocate substantial funds within current and future CDSS Fatherhood Engagement funding opportunities to be specifically apportioned for the following:

- Technical assistance for data collection/management, program design continuous quality improvement, and identifying sustainable funding.
- Evaluation services or program impact reports.

- Collaboration and networking opportunities to share resources and best practices with programs or organizations conducting similar work in their communities.

**2.7** Regularly spotlight best and emerging practices for Fatherhood Engagement programs, such as through webinars, All County Information Notices, CDSS website updates, and including reference to successful programs in future RFPs to maximize opportunity for spread of successful programs.

**2.8** Develop, maintain, and make publicly available a comprehensive inventory of CDSS investments, activities, and partnerships related to fatherhood engagement. The inventory should include, but not be limited to, the following:

- Internal Staff Efforts: CDSS staff responsible for gathering information, Workgroups for Fatherhood Engagement, and CDSS' training efforts for external partners, constituents, and stakeholders.
- CDSS Funded Efforts:
  ▶ Impact Information: Links to publicly available impact or evaluation reports.
  ▶ Demographic Information: Organization name, organization size, zip code, populations served (e.g. race/ethnicity, socio-economic status etc.), links to program websites.
  ▶ Award/Investment Information (if applicable): Total grant award and award years.
  ▶ Include a description of each program's efforts, mission, goals and expected outcomes.
- External Efforts:
  ▶ Identify Partners and Organizations that support the development of best practices for Fatherhood Engagement.
  ▶ Identify Partners and Organizations who were previously awarded a Fatherhood Engagement Grant who can provide technical assistance and mentorship for new Fatherhood Engagement programs.
- Actively involve partners such as Citizen Review Panels and the Fatherhood Council to provide updates and seek guidance on Fatherhood Engagement related activities and investments.

# Critical Incident CRP Recommendations for FY2024 - 2025

**Data Infrastructure & Interoperability**

**3.1** CDSS should work with the CI CRP to provide best practice guidance to counties through an All County Information Notice and the bi-annual All-County Webinars done by the Children's Services Operations Bureau that encourages:

1. establishment of a county or regional level CDRT (including a direct link to the CDRT Toolkit),
2. reporting of each child case reviewed by CDRTs that is determined to a result of abuse and/or neglect to Child Welfare services (thereby expanding most counties' current level of reporting),
3. that Child Welfare Agencies upload all relevant investigatory information including but not limited to CDRT findings into CWS/CMS, and
4. County Child Welfare agencies to report all known child fatalities and near-fatalities due to abuse and neglect on a SOC 826 in alignment with WIC Section 10850.4-10850.54 within 10 days of determination that the fatality or near-fatality was due to abuse or neglect.

**3.2** Upon implementation of the previous recommendation, which will result in more comprehensive data collection, we recommend that CDSS publish annual findings in a timelier manner.

**3.3** Participate in a working group, convened and facilitated by the CI CRP beginning no later than July 1, 2026, to identify opportunities to develop and implement a process for data sharing, cohesion, and reconciliation between CDSS and CDPH to limit duplication and decrease gaps in statewide data sets.

**3.4** CDSS should develop, deliver, and promote training for local Child Welfare staff and CDRTs that emphasize importance of data collection and details reporting processes around child fatalities and near-fatalities.

**3.5** CDSS should work with the administration to adjust from county-only to statewide access to birth and death certificates for CDRTs and their related case investigations.

**Prevention & Intervention Supports**

**3.6** Advocate for sustained funding for evidence-based home visiting programs in current operation across the state, and advocate for increased funding to ensure equitable home visiting program access in each county.

**3.6.1** Explore how more cost-effective home visiting models (e.g. community health worker led) can contribute to greater statewide coverage.

**3.7** CDSS, in partnership with CDPH and First 5, should develop a statewide registry of the evidence-based home visiting programs supported across the state; a comprehensive registry should identify programs by county, funding source, and caseload capacity.

**3.7.1** The Panel would further recommend that the registry be made available through the OCAP website to support statewide partnership, connection, and learning.

**System Accountability & Capacity Building**

**3.8** CDSS should work with the CI CRP to identify funding and resources to reinstate and maintain a State Child Death Review Commission and assign responsibility to either the CDSS or CDPH to reflect the evolution of child death review from a punitive focus to a child maltreatment prevention focus.

**3.9** CDSS and CDPH staff should attend statewide and regional CDRT peer support meetings to learn about the needs of local CDRTS and explore how they might assist in addressing those needs.

# Appendix B. Citizen Review Panel Members

## The Prevention of Child Abuse and Neglect Citizen Review Panel Members

**Yvette Baptiste**
Lived Expert, Executive Director
Eastern Los Angeles
Family Resource Center

**Dana Blackwell**
Senior Director
California Strategic Consultation Casey
Family Programs

**Lori Scott Clarke, MA**
Director, Social Policy Institute
SDSU School of Social Work

**Antonia Rios**
Lived Expert, Chair,
National Parent Leadership Team,
Parents Anonymous

**Katie Albright**
Senior Advisor
Safe and Sound

**Alex Morales**
Retired CEO
Child's Bureau Southern California

**Judi Sherman**
Principal
Judi Sherman & Associates

**Sheila Boxley**
President & CEO (ret.)
Child Abuse Prevention Center

**Jose Ramos**
Child Care Resource Center

**Forrest Archer**
Child Abuse Prevention Coordinating
Council (Humboldt County)

**Dara Griffin**
Lived Expert, Director of Innovation,
Policy and Youth Advancement
Pasadena/Altadena Coalition of
Transformative Leaders (PACTL)

**Shamawn Wright**
Lived Expert, CEO/Founder
Bridge Builders to the Next Generation

## The Children and Family Services Citizen Review Panel Members

**Emily Bahne**
Resource Parent
Pediatric Nursing Professional

**Nicole Chung**
Lived Expert, Therapist, Foster Youth
Support Professional

**Yvonne Epps**
Social Work Policy Professional

**Angie Heredia**
Social Work Professional
Tribal Communities

**Simone Hidds-Monroe**
Lived Expert, Foster Youth Support
Professional

**Michael Huesca**
Lived Expert, Professional in Fatherhood
Service and Family Law

**Deutron Kebebew**
Lived Expert, Fatherhood Services
Professional

**Dorothy Lewis**
Lived Expert, Parent Partner Professional

**Caitlin Radigan**
Lived Expert, Foster Youth Services
Professional

**Ruth Salady**
Lived Expert, Traima-informed Youth
Services Professional

**Melissa Stamps**
Lived Expert, Lead Parent Partner
Professional

**Carolyn Travis**
Lived Expert, Artist, Research and Policy
Professional

## Critical Incidents Citizen Review Panel Members

**Alyssa Antelman, LCSW**
Human Services Manager
County of Ventura Children and Family
Services

**Stephanie Biegler**
Retired Chief Program Officer
Child Abuse Prevention Center

**Melinda Douros**
CASA Program Manager
Child Advocates of Nevada County

**Stephanie Garthwaite**
Legislative Assistant & Policy Advisor
County of Riverside

**Jeoffry Gordon, MD, MPH**
Family Physician (Retired)

**Ruby Guillen**
Lived Expert, Child Welfare Professional,
Tech & Data Child Abuse Analyst

**Sheryn Hildebrand**
Executive Director
Court Appointed Special Advocates of
Mendocino & Lake Counties

**Ellen Moffatt, MD**
Medical Examiner

**Rhonda J. Oliver**
Foster Parent/Mentor

**Lisa Ramos**
Law Enforcement
Fresno Police Department

# Appendix C. Coordination & Facilitation Consultant Teams

## The Child and Family Policy Institute of California (CFPIC)

**Stuart Oppenheim, MSW**
Director Emeritus

**Juliet Cox, MPA**
Executive Director

**Andrea Sobrado, MSW**
Associate Director

## RDA Consulting, SPC. (RDA)

**Aditi Das, MSW, PhD**
Consulting Manager

**Courtney Chapple, MPH**
Consulting Manager

**Julia Owens, MA**
Consultant

# Appendix D. Prevention CRP OCAP Applicant/Grantee Survey

**Applicant/Grantee Details**

1) Were you a recipient of a OCAP grant?
Whether or not your organization received an OCAP grant, please continue with the rest of the survey.
( ) Yes
( ) No

2) If you <u>did</u> receive grant funding from OCAP, please select the name of the grant(s) below
[ ] Economic Empowerment (July 2021 - September 2024)
[ ] Father Engagement (October 2022 - September 2025)
[ ] Innovative Partnerships (July 2019 - June 2024)
[ ] Planning Prosperity (October 2022 - September 2025)
[ ] Road to Resilience (July 2022 - June 2024)
[ ] Safe Sleep Baby 2.0 (July 2021 - June 2024)
[ ] Strong Communities (October 2022 - September 2025)
[ ] N/A

3) If you <u>did</u> receive grant funding from OCAP, please share the total grant award amount?
[ ] Economic Empowerment (July 2021 - September 2024):
[ ] Father Engagement (October 2022 - September 2025):
[ ] Innovative Partnerships (July 2019 - June 2024):
[ ] Planning Prosperity (October 2022 - September 2025):
[ ] Road to Resilience (July 2022 - June 2024):
[ ] Safe Sleep Baby 2.0 (July 2021 - June 2024):
[ ] Strong Communities (October 2022 - September 2025):
[ ] N/A

4) If you <u>did not</u> receive funding, did you request feedback from OCAP about the reason your application was not selected?
( ) Yes, I requested feedback and received it.
( ) Yes, I requested feedback but I did not receive it.
( ) No, I did not request feedback.
( ) No, I was not aware I could request feedback.
( ) N/A: My organization received grant funding.

5) If you received feedback from OCAP, was it helpful? Why or why not? *If you did not receive feedback, please enter N/A.*

6) What, if any, challenges or barriers did you encounter during your application process? *(select all that apply)*
[ ] The explanation of the application process was not clear
[ ] There was not enough time to develop the application materials
[ ] There was not enough staff capacity to develop the application materials
[ ] Our application was disqualified due to a technical error such as formatting or including attachments
[ ] Our organization does not have a staff member(s) that specializes in grant writing
[ ] Other (please fill in the blank):

7) What type of support/resources would have been helpful during the application process?

**Organizational Characteristics**

8) Approximately, how many people are employed by your organization?
( ) Fewer than 10 employees
( ) 10 - 49 employees
( ) 50 - 99 employees
( ) 100 - 149 employees
( ) 150 - 199 employees
( ) 200 - 249 employees
( ) 250+ employees

9) How long has your organization been operating?
( ) 1 - 5 years
( ) 6 - 10 years
( ) 11 - 20 years
( ) 21 - 30 years
( ) 30+ years

10) Approximately, what is your organization's yearly operating budget?
( ) less than $500,000
( ) $500,000 - $1,000,000
( ) $1,000,001 - $5,000,000
( ) $5,000,001 - $10,000,000
( ) $10,000,001 - $20,000,000
( ) $20,000,001 or more

11) Approximately, what percentage of your organization's funding comes from state and federal grants?
( ) 0% - 25%
( ) 26% - 50%

( ) 51% - 75%
( ) 76% - 100%

12) In which OCAP region does your organization operate?
( ) Northwest Region (Counties: Del Norte, Siskiyou, Humboldt, Trinity, Shasta, Tehama, Mendocino, Glenn, Lake, Colusa)
( ) Northeast Region (Counties: Modoc, Lassen, Plumas, Butte, Sierra, Sutter, Yuba, Nevada, Placer, El Dorado, Sacramento)
( ) Bay Area Region (Counties: Sonoma, Napa, Solano, Marin, Contra Costa, San Francisco, Alameda, San Mateo, Santa Clara, Santa Cruz, San Benito)
( ) Mountain Valley Region (Counties: Yolo, Amador, Calaveras, Alpine, Tuolumne, Mariposa, Mono, Madera, Fresno, Inyo)
( ) Central Coast/Valley Region (Counties: San Joaquin, Stanislaus, Merced, Monterey, Kings, Tulare, San Luis Obispo, Kern, Santa Barbara, Ventura)
( ) Southern Region (Counties: San Bernardino, Los Angeles, Orange, San Diego, Riverside, Imperial)

13) What zip code does your organization operate in?

14) Does your organization employ a full-time grant writer?
( ) Yes
( ) No

15) How did you learn about the grant opportunity?
( ) DSS Website
( ) Email Listserv Notification
( ) Other:

16) Approximately how many individuals in your organization were involved in the application process?
( ) 1 - 3 people
( ) 4 - 6 people
( ) 7 - 10 people
( ) We contracted with an outside grant writer.

17) Approximately, how many hours did the application process take? (from reviewing the opportunity, to drafting and editing, to application)
( ) less than 5 hours
( ) 6 - 10 hours
( ) 11 - 15 hours
( ) 16 - 20 hours
( ) 20+ hours

18) Did you attend any information sessions? If so, did you find them helpful?

( ) Yes, but I did not find it helpful.
( ) Yes, and I found it helpful.
( ) No, I did not attend info sessions.

19) What resources or supports did you find helpful in your application process?

**Grant Recipients**

20) If you would like to continue to contribute to this effort to improve the grant application process, we would appreciate the opportunity to learn more about your application experiences in a key informant interview or focus group. If you are interested in this, please share your contact information below.

Again, your specific contributions will not be attributed to your organization or shared with OCAP. OCAP will only receive data in aggregate, summarized form.

Full Name:
Title:
Email Address:

21) If you would like to receive updates on the results of this survey, please share your information below. Regardless of whether you choose to receive updates, your information will remain confidential. Once a report regarding the results of this survey is completed, we expect to make the report available on the OCAP website.
Full Name:
Title:
Email Address:

22) Did your organization have sufficient lead time to recruit and hire necessary staff to begin operations at the start of the grant funded program?
( ) Yes
( ) Yes, but we would have benefitted from more time.
( ) No
( ) N/A

23) Did you experience any delays with disbursement of funds? If so, what was the cause of the delay?

24) Do you feel grant reporting requirements were proportionate to the amount of funds your organization received? Why?

25) Do you track any additional outcomes/impacts than what is needed for the grant reporting requirements? If yes, what do you track?

26) Did you find monthly meetings with your grant manager to be helpful? What type of guidance did you receive from your grant manager?

27) Was your organization able to secure funding to continue your program beyond the grant period?
( ) Yes, we received additional funding from OCAP.
( ) Yes, we received funding from another source.
( ) No, we did not receive outside funding but the program continued
( ) No, we did not receive funding and the program was discontinued.
( ) N/A

Thank You!

# Appendix E. Fatherhood Engagement Best Practices & Program Design Rubric

Fatherhood Engagement Best Practices & Program Design Rubric

This rubric was designed by members of the [Child and Family Services Citizen Review Panel](#), in conjunction with the Office of Child Abuse Prevention and panel facilitators from [Child and Family Policy Institute of California](#) and [RDA Consulting](#). This rubric is intended to provide guidance to grant applicants and the application review team at OCAP. Please refer to this rubric to ensure your application highlights how your organization intends to utilize best practices, engage the community, and monitor program outcomes.

| Guiding Principles | Description | Points |
|---|---|---|
| **Operations & Capacity Building** | | |
| Staff Training & Experience | Describe the training that the organization and/or program staff will receive regarding **bias mitigation**, and **meeting the needs of fathers and their children**. (10 points)<br><br>This may include how your organization plans to prepare staff to accomplish the following:<br><br>- Engage parents who are considered youth themselves,<br>- Maintain a flexible case management plan to meet a wide variety of parent and child needs<br>- Incorporate their understanding of adverse childhood experiences (ACEs), trauma informed care, and traumatic system involvement (e.g., incarceration, reentry, hospitalization etc.)<br>- Peer support specialist training and certification, as applicable to your program's goals.<br><br>Describe your organization's **prior experiences and qualifications** to provide fatherhood engagement services. (5 points) | __/20 |

| | Describe your organization's **hiring practices and priorities** to ensure that services are informed by and provided by those with relevant lived experience and those who reflect the community they serve. <u>(5 points)</u> | |
|---|---|---|
| Data Management | Describe your organization's current data management practices for programmatic data, including protocols for securely maintaining sensitive or identifying program participant information. | __/10 |
| Community Engagement | Describe your organization's plan for ensuring that the needs of the community are represented in your program design and delivery model.<br><br>This includes but is not limited to the following:<br><br>- community engagement/outreach sessions,<br>- survey design and distribution,<br>- participatory action research<br>- identifying existing efforts in the community to avoid duplicative efforts.<br><br>As applicable, detail partnerships with other community-based organizations or care providers. Please detail how you plan to maintain strong communication and collaboration with partners. | __/15 |
| Sustainability Plan | Describe your organization's **plan for identifying and applying for additional funding opportunities** to sustain the program, including potential billing opportunities and if the organization anticipates funding this program in the future. | __/5 |

| Program Design | | |
|---|---|---|
| Theory of Change & Logic Model | Include your organization's **Theory of Change** and/or **Logic Model** for the proposed program. | __/10 |
| Continuous Quality Improvement & Evaluation Strategies | Describe your organization's history of utilizing **Continuous Quality Improvement Strategies** and how those strategies may be applied to the management of the proposed program.<br><br>Describe your organization's strategies for ongoing program evaluation and key performance indicators. | __/10 |
| Evidence-Based & Promising Practices | | |
| Principles of Fatherhood Friendliness | Describe the extent to which your proposed program design aligns with the **Principles of Fatherhood Friendliness**.<br><br>*For more information on the Principles of Fatherhood Friendliness, click here.*<br><br>For more information on evidence-based practices, please consider visiting the California Evidence Based Clearinghouse for Child Welfare. | __/10 |
| Cultural Responsiveness Strategies | Describe the extent to which your proposed program design plans to ensure services are **culturally responsive**.<br><br>This includes but is not limited to the following:<br><br>- Ensure program materials are accessible in multiple languages, and services can be delivered in multiple languages<br>- Identify strategies for ensuring services are responsive to cultural groups beyond racial and ethnic identities (e.g., stigma among men | __/10 |

| | seeking mental health support, those who have been previously separated from their children, single fathers, and those raising children with complex emotional needs) | |
|---|---|---|
| Accessibility | Describe the extent to which your proposed program plans to **ensure that services are accessible** to potential program participants.<br><br>Examples include, but are not limited to:<br><br>- Intake practices that are welcoming, strength-based, and trauma-informed<br>- Variety of times available for services<br>- Transportation to and from services from external providers<br>- Warm handoffs for referrals to external providers<br>- On-site childcare, as applicable, for services that are exclusively for the parent<br>- Stipends for participants to offset the cost of travel<br>- Online or hybrid options for participation | __/10 |
| Total | | __/100 |

## Appendix F. Critical Incidents CRP 2024-2025 Work Plan

| Priority Area: | Share, use & improve the CDRT Toolkit |
|---|---|
| Objective:<br><br>What do we want to achieve | Statewide awareness of Toolkit and established process for local CDRTs to provide feedback to support continuous quality improvement of the Toolkit. |
| **Strategies & Activities** | |
| Explore collaboration with CalTrin for Toolkit overview and use training | |
| Convene & host statewide webinar to share Toolkit & establish regional CDRT connections | |
| Support ongoing updates to CDRT Toolkit throughout the year | |

| Priority Area: | Establish a state-wide approach to building connection and peer sharing among local CDRTs within their regions |
|---|---|
| Objective:<br><br>What do we want to achieve | Local CDRT leaders and teams have a clear connection for learning, mentorship, support and building consistency across CDRT review practices with other CDRTs in their region. Increased relationship and unified voice to better elevate review findings and recommendations. |
| **Strategies & Activities** | |
| Complete work to develop a Medical Examiner/Coroner list, by county | |
| Convene & host statewide webinar to share Toolkit & establish regional CDRT connections | |
| Provide initial support/coordination to regional CDRT collaboration spaces | |

| Priority Area: | Improved consistency, reliability, and accuracy of statewide data used to identify and characterize child fatalities, near-fatalities, and maltreatment |
|---|---|
| Objective:<br><br>What do we want to achieve | Improved ability to identify, document, and learn about circumstances surrounding child fatalities and near-fatalities across the State to support more robust recommendations for a public health approach to preventing fatalities, near-fatalities, and maltreatment. |

**Strategies & Activities**

Schedule update and data sharing presentations from CDSS for CI Panel Members

Focusing on CDSS Child Fatality and Near-Fatality Report

Continue to foster working relationship with CDSS to further discuss and improve data reporting

- CDSS Child Fatality and Near-Fatality Report accountability and sharing timeline

Critical Incident and Oversight Support Unit - Medical Director Outreach & Dialogue support

Develop a standard list of ICD Codes that should be quired for use in identification of child fatalities and near fatalities *[Held for future follow-up]*

Advocate for the development of ICD diagnostic code(s) for child fatalities, near fatalities, and child maltreatment *[Held for future follow-up]*

Conduct validation research on reported deaths due to abuse and neglect Advocate for consistency and expansiveness of data collection and reporting

- Initial step may be discussion with CDSS during spring presentation
- Consistency Needs (County-to County collection + Reporting to State)
- Expansiveness
  - Alignment between death certificate documentation, autopsy reporting, access to death certificates across county lines state to county and county to county data sharing processes and agreements

| Priority Area: | Increased awareness of the continuity of family support and prevention programming state-wide and the impact of home visiting programs on child fatalities, near-fatalities, and maltreatment |
|---|---|
| Objective:<br><br>What do we want to achieve | Accurate description of what evidence-based home visiting programs are being implemented statewide and improved understanding of their impact in preventing child fatalities and near-fatalities to further inform panel recommendations and state funding for preventative programs and continuity of family support and care |

| Actions/Activities |
|---|
| Meet with each State Department that supports or funds home visiting. Seek information on model types, funding, availability, partnership, etc. |
| Improve comprehensive data knowledge for all home visiting to inform communication about the impacts on the reduction of child fatalities, near fatalities, and maltreatment / consistent collection county to county and state-wide unification of data. |

| Priority Area: | Advocate for increased State support and adoption of CI CRP recommendations including the development of a statewide Child Death Review Council |
|---|---|
| Objective:<br><br>What do we want to achieve | A collaborative State to local-level approach to decreasing child fatalities and near-fatalities through the formal establishment and recognition of a State Child Death Review Council. |

| Strategies & Activities |
|---|
| Conduct research period to learn more about the structural needs for a state supported CDR Council (including review of models used in other States) |
| Develop recommendations for the best use of structure and placement CDRTs and of a statewide council |

# Appendix G. Works Referenced by CRPs

The Prevention of Child Abuse and Neglect CRP

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Finally, we acknowledge and thank the local child welfare agencies, community-based organizations, and families who are the front line of child welfare and wellness outcomes. Your dedication and work are seen. You make a positive impact one child and one family at a time; this is what makes the difference.