San Joaquin County 2024 Recovery Plan

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Attachments:

Attachment A: Beacon Economics Report: An ARPA Strategy for San Joaquin County

Attachment B: April 2023 SJ Teeth Evaluation Report 2021-2022

Attachment C: 2023 Annual Fidelity Assessment Summary Report: Help Me Grow

Attachment D: F5SJ Home Visiting Newsletter April 2024

Attachment E: Raising Quality Impact Evaluation Report July 2023

GENERAL OVERVIEW

Executive Summary

Established in 1850, San Joaquin County encompasses an area of 1,425 square miles, including 35 square miles of water and waterways with eight cities – Escalon, Lathrop, Lodi, Manteca, Mountain House (incorporated July 2024), Ripon, Stockton, and Tracy. San Joaquin County has a long history of providing responsive public service and innovative programs while operating under sound fiscal principles. Working together, an elected Board of Supervisors and County staff strive to represent, support, and protect the individuals, businesses, and natural resources that make San Joaquin County a great place to live, work, and play.

In March 2021, the State and Local Coronavirus Fiscal Recovery Funds (SLFRF), a part of the American Rescue Plan Act (ARPA), was established to provide counties funds to respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and non-profits, or aid to impacted industries such as tourism, travel, and hospitality: Section 603(c)(1)(a). San Joaquin County has received \$148,038,314 in ARPA funding.

The work to structure San Joaquin County priorities and plans for use of ARPA funding began immediately in discussions with the County Board of Supervisors. At the recommendation of the County Administrator, the Board approved the County contracting with a consultant firm, Beacon Economics, to provide a roadmap for the economic recovery of the County. A report by Beacon Economics was presented to the Board in October 2021. The Report validated that the County is on target in its decision to distribute ARPA funds in the chosen targeted areas/population. San Joaquin County also commissioned Godbe Research to conduct a survey of residents to assess their opinion on the County's efforts in addressing the COVID crisis, as well as the overall satisfaction with the quality of life in San Joaquin County, the County provision of services, and the County's management of public funds.

In addition, prior to receiving the second tranche of \$74.0 million, the County Administrator's Office met with Board members, Chambers of Commerce, Business Districts, and several stakeholder groups to listen to the needs of the community and encouraged participants to submit proposals. Information was gathered and in October 2022, the Board of Supervisors approved a priority list of funding requests for the second tranche of \$74.0 million that were evaluated and met the ARPA requirements for funding.

Through June 30, 2024, the Board of Supervisors has approved the commitment (budget) of nearly all the \$148.0 million received. Approved projects are underway and through June 30, 2024, actual expenditures are \$57,636,400. Approximately \$8.9 million remains uncommitted and available for the Board's consideration of future eligible projects.

Uses of Funds

Negative Economic Impacts (EC 2)

San Joaquin County has invested \$79.1 million in ARPA funding under the category Negative Economic Impacts. The Small Business Grant, Microbusiness Grant, and Relief Across Downtown (RAD) programs have assisted small businesses (100 employees or less), micro-businesses (5 employees or less), and the local economy in general. The Small Business and Microbusiness Grant programs provided funding for past due (unpaid) rent, mortgage and utilities, or reimbursement of paid rent, mortgage, utilities, and PPE. The RAD program consisted of matching consumer's contributions up to \$200 and has proven to be a successful way to stimulate the local economy by doubling consumer spending and bringing much needed relief to small businesses in San Joaquin County. In May 2024, the Board of Supervisors approved another program to support small business, Shop San Joaquin, through BluDot Technologies. This program empowers economic growth through an innovative phone application. By shopping at eligible establishments, local consumers can then earn and redeem rewards for future purchases. Consumers are eligible for up to \$200 in rewards each year.

Also included in the Negative Economic Impacts category are programs for families with household incomes at or below 100% of the Area Median Income, the expansion of First 5 programs serving children 0-5 impacted by the pandemic (SJ TEETH, Help Me Grow, Grandparents Initiative, Home Visitation Expansion, Parent Engagement), and housing projects to support the development of new units of housing or the expansion of services to address homelessness such as supportive housing and to improve access to stable, affordable housing among unhoused individuals.

Funding was also used for much needed repairs and replacement of equipment at Veterans Organization and Community Centers within San Joaquin County.

Additionally in May 2024, the Board of Supervisors approved an agreement with the Greater Stockton Chamber of Commerce for implementation of the Stockton Takes Action Against Retail Theft (STAART) Program. Through ARPA's criteria of responding to the pandemics 'negative economic impacts, this program will assist the law enforcement community in curbing retail theft through the use of a phone application (Fast STAART), crime prevention videos for small business owners, and Business Watch Programs. The STAART Program will provide for continued collaboration with local law enforcement and the District Attorney's Office holding educational workshops for employers, employees, and business throughout the County.

Public Health (EC 1)

A total of \$17.9 million of ARPA funds have been invested in projects that will increase the local pipeline of mental health providers and improve recruitment and retention for mental health services; reimburse County Clinics for COVID-related salaries; fund 54,000 Rapid Antigen tests to assist Public Health Services in combatting the pandemic; combat illegal dumping; and strengthen the Information Systems Division's infrastructure functions of Disaster Preparedness, Public Safety, Security and Compliance, and Automation.

Public Health – Negative Economic Impact Public Sector Capacity (EC 3)

San Joaquin County has invested \$17.5 million in ARPA funding to assist fire districts with public safety equipment and repairs to existing facilities; and a project that expands the County's Landlord Incentives Program to incentivize landlords to accept homeless veterans utilizing United States Department of Housing and Urban Development Veterans Affairs Supportive Housing HUD-VASH program vouchers for a minimum of 30 households.

Infrastructure (Water, Sewer, and Broadband) (EC 5)

The County has invested \$18.1 million in ARPA funds for water and sewer infrastructure projects at Community and Regional Parks, County Service Areas, and Community Centers. Modernization of the irrigation systems will reduce water usage, repair, and maintenance costs by the inclusion of water sensors, break alerts, and computerized programming. The COVID-19 pandemic created a change in usage patterns, which has negatively affected the wells and domestic water systems throughout San Joaquin County Parks, accelerating the need for their repair or replacement. In addition, funds have been obligated for the Supervisory Control and Data Acquisition System (SCADA) Project at multiple County-administered Special Districts. SCADA allows the ability to monitor and regulate water flows remotely. Public Works' Utility Maintenance division operates and maintains 32 water systems with 52 wells; 43 storm drain systems with 70 pump stations; and nine sewer systems with three sewage treatment plants and nine sewage lift stations in various locations within the unincorporated county. This Project is intended to increase the longevity of current utility infrastructure; allow the ability to detect equipment failures more guickly and efficiently; reduce future utility maintenance and operations costs; and reduce replacement costs for these utility systems. Infrastructure improvements are costly and seldom have adequate funding sources. Per the Final Rule, eligible uses of ARPA funds include investments and improvements to existing sewer and water infrastructure.

Premium Pay

The use of \$6,523,447 in ARPA funds was allocated to provide a one-time lump sum payment to County employees who worked during the COVID-19 pandemic from March 30, 2020, through September 26, 2021. Through the efforts of its employees, the County has maintained continuity of services to the community while striving to keep the workplace safe.

Additional detail on all above-mentioned projects/programs is provided under Project Inventory.

Promoting Equitable Outcomes

The San Joaquin County Board of Supervisors and the County Administrator's Office have established programs that promote equity within the community. The focus remains on assisting those most vulnerable and underserved. For each of the programs, data is being collected to measure and support equity at various stages of each program. More detailed information is included in the Project Inventory section.

Community Engagement

To better prepare for the second tranche of \$74.0 million of ARPA funding, the County Administrator's Office met with each of the Board of Supervisors, Chambers of Commerce, African Chamber of Commerce, Business Districts, Fire Districts, Veterans Organizations, and several stakeholder groups to listen to the needs of the community and encouraged participants to submit proposals. More detailed information is included in the Project Inventory section.

Housing Authority County of San Joaquin (HACSJ) – Utilized Housing Navigators to connect with the community. Housing Navigators contacted owners and property managers directly, including onsite visits, to identify vacant units. Owners and property managers throughout the community were also contacted via email and the community was canvassed with flyers to promote the Landlord Incentives Program. Once available units were identified, families were provided with leads to units and aid to reduce leasing barriers. The Housing Navigator provided support to walk the family through the leasing process until HAP contracts were executed. The most common barrier that families faced was the lack of credit or rental history. Owners and property managers are reluctant to rent to a family with the lack of credit or rental history as they are unable to show financial stability. By providing

the owner and/or property manager with reassurance from the voucher and paying the security deposit and a leasing bonus on the family's behalf, owners and/or property managers were more likely to lease to the family.

The County also collaborated with HACSJ on the Project Homekey Match Funding program. HACSJ provides and advocates for safe, affordable living environments for low-income families.

To assist with administering the Family COVID Assistance Grant program, the County contracted with El Concilio, a community-based organization whose mission is "to empower the region's diverse low-income, minority and marginalized communities by providing critically needed comprehensive and compassionate programs and services."

Labor Practices

San Joaquin County uses strong labor standards to promote effective and efficient delivery of high-quality infrastructure projects while also supporting the economic recovery through strong employment opportunities for workers. The County utilizes labor practices such as project labor agreements, prevailing wage requirements, and local hiring.

Use of Evidence

All programs established within San Joaquin County will be and are being evaluated. Results will demonstrate the success of the program and its intended outcome. See details under Project Inventory.

Performance Report/Key Performance Indicators:

San Joaquin County intends to design Key Performance Indicators (KPIs) and identify applicable evidence-based interventions, where relevant, on a case-by-case basis. The County intends to monitor each SLFRF funded program through the timeline of each project's milestones to ensure goals are achieved.

Projects and KPIs are consistent with the 2022-2023 Board's Strategic Priorities and the Beacon Economics Report approved by the Board in October 2021. The Board's Strategic Priorities include Organizational Capacity/Technology Utilization, Fiscal Optimization, Public Safety/Criminal Justice/Quality of Life, Homelessness, Water Management, and Economic Development.

Key Performance Indicators are included, where appropriate, in the Project Inventory Section of this Report.

PROJECT INVENTORY

Landlord Incentives for Homeless Veterans

Funding amount: \$222,500

Project Expenditure Category: EC 2.18 Housing Support: Other Housing Assistance

Project Overview

Project expands the County's Landlord Incentives Program to incentivize landlords to accept homeless veterans utilizing United States Department of Housing and Urban Development Veterans Affairs Supportive Housing (HUD-VASH) program vouchers for a minimum of 30 households. On any given evening there are approximately 140 homeless veterans living throughout the County, with the majority of those located in Stockton. Collaborating with the Housing Authority County of San Joaquin (HACSJ), funds were provided for security deposits, unit repairs, utility assistance, rental application fees, vacancy loss coverage, and leasing incentive payment to HUD-VASH landlord participants to

assist households in San Joaquin County. Additionally, HACSJ provided in-kind staff support in the form of a landlord liaison; a dedicated phone line set up to guarantee a response within one business day; online access to information related to inspections, Housing Assistance Payments, and Contracts; two housing navigators to assist with eligibility, paperwork, support, assistance, and housing locator; and landlord workshops and training. In May 2022, the Board of Supervisors approved the expansion of the scope of work for the program to include Housing Choice Voucher (HCV) Program participants.

There are currently 5,237 vouchers locally under the HCV program, with 8% of those not yet utilized. This expansion of the Landlord Incentives Program aims to create similar increases in voucher utilization for HCV participants that have so far been realized for VASH participants under the Landlord Incentives Program.

Promoting Equitable Outcomes

The Housing Authority County of San Joaquin (HACSJ) collaborated with San Joaquin County to leverage voucher assistance programs including Veterans Affairs Supportive Housing and use landlord incentives to reduce homelessness throughout the County. Leasing up these vouchers in the current rental market is challenging and unused vouchers not only have a social but also an economic impact on the community. HACSJ was able to support 78 families with security deposit and leasing bonus to minimize the gap between renting in the private market. The average household income for participating families was \$17,083. Participating families were served on a first come first serve basis, and a Housing Assistance Payment (HAP) contract was executed to confirm the successful lease up and release of incentives.

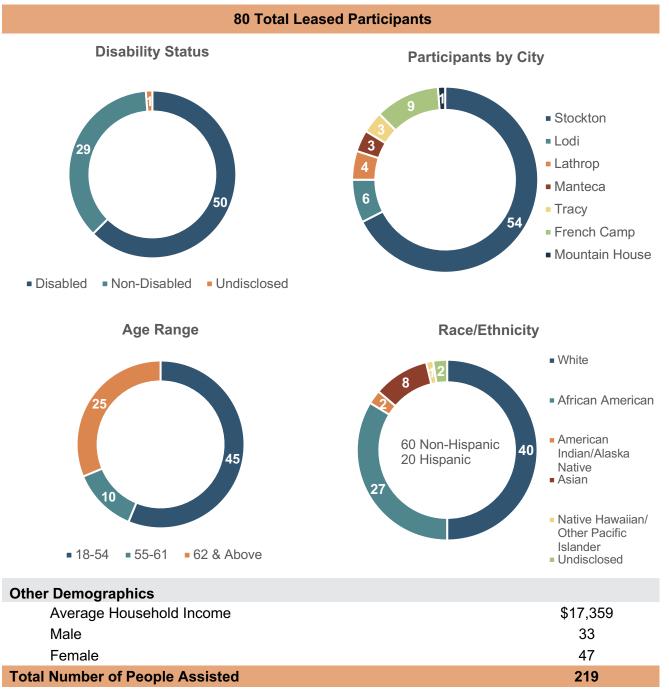
As listed in the County's Use of Funds section, over \$79.1 million falls within the category of *Negative Economic Impacts*. San Joaquin County has implemented programs that have aided households, small businesses, veterans, and non-profits to address the impacts of the pandemic, which have been most severe among low-income populations.

Use of Evidence

Evidence research statistics of the Landlord Incentives for Homeless Veterans Program compare outcomes between groups receiving the intervention. According to the San Joaquin County Homeless Management Information System, there were 763 unduplicated veterans served Countywide to date in 2024 through a broad range of interventions including emergency shelter, street outreach, and permanent supportive housing.

The goal of the Landlord Incentives for Homeless Veterans Program is to expand rental opportunities for voucher holders by making landlord participation in the program more economically attractive, more feasible and as simple as possible. The program works to recruit new landlords and retain current landlords by providing new incentives and support systems that address potential risks that property owners may associate with leasing to homeless clients, while realigning staff and internal program management by HACSJ to make program participation easier. While financial-based incentives are an important strategy to help mitigate the real and perceived risks associated with leasing to homeless clients, nonfinancial incentives such as expanded staff support are of equal importance in promoting landlord participation.

The following statistics of the Landlord Incentives for Homeless Veterans Program compare outcomes between groups receiving the intervention.



Recording metric of voucher holders. Obtain a run rate and determine how impactful voucher activity improves based on ARPA funds. Based on the evidence above, 80 families were assisted with an average income of \$17,359, totaling 214 individuals who are no longer living on the streets or in shelters. All funding provided has been exhausted and has been distributed throughout San Joaquin County. The program was completed earlier than expected as the need is greater than the funding. HACSJ will continue to look for funding opportunities that reduce housing barriers, impact homelessness, and increase affordable housing stability.

Family COVID Assistance Grant Program – Round 1 & 2

<u>Funding amount</u>: \$13,700,000. Due to the underutilization of the program, \$10.2 million was returned to the fund fiscal year-end 2022 and will be reallocated to a future project.

Project Expenditure Category: EC 2.2 Household Assistance: Rent, Mortgage, and Utility Aid

Project Overview

Using CARES Act funds, the County successfully implemented Round 1 of the Family COVID Assistance Grant Program to assist families who have experienced negative financial impacts of the COVID-19 pandemic. Numerous applications could not be funded due to the depletion of CARES Act funds. With the use of ARPA funds, the County was able to complete Round 1 and continue the grant for Round 2 to assist families with household incomes at or below 100% of the Area Median Income who have been negatively impacted by pandemic. Up to \$10,000 was made available to families for past due (unpaid) rent, mortgage, and utilities, or reimbursement of paid rent, mortgage, and utilities during the period of financial harm due to the pandemic, with proper documentation. Final administrative costs through June 30, 2022, were paid. A total of \$13.7 million of ARPA funds was obligated for the FCAG program. Due to the underutilization of the Family COVID Assistance Grant Program, caused by applicants receiving funds through other programs, \$10.2 million was returned to the fund at fiscal year-end and will be reallocated to a future project.

Promoting Equitable Outcomes

To assist with the application process for the Family COVID Assistance Grant program, the County has contracted with a community-based organization,

El Concilio, whose mission is "to empower the region's diverse low-income, minority and marginalized communities by providing critically needed comprehensive and compassionate programs and services." El Concilio administered the program with continued oversight provided by the County.

The Program assisted families with household incomes at or below 100% of the Area Median Income who have been negatively impacted by the COVID-19 pandemic. Up to \$10,000 was made available to families for past due (unpaid) rent, mortgage, and utilities, or reimbursement of paid rent, mortgage, and utilities during the period of financial harm due to the pandemic, with proper documentation.

Use of Evidence

The goal of this program was to provide relief to families struggling to pay for rent or mortgage, and utilities. The County plans to evaluate the program by surveying participants and determining whether beneficiaries have recovered economically from the assistance this program provided.

Performance Report Key Performance Indicators

Key indicators vary by participants. Items funded will be measured to determine how well issues funded will be remediated. The number of households who received eviction prevention services was 200.

Small Business Grant Program - Round 4

Funding amount: Initial funding: \$14,439,000

Project Expenditure Category: EC 2.29 Loans or Grants to Mitigate Financial Hardship

Project Overview

Round 4 of the Small Business Grant Program launched on September 1, 2021. Utilizing \$14.4 million of ARPA funds, this grant provided small businesses (100 employees or less) with up to \$100,000 for past due (unpaid) rent, mortgage and utilities, or reimbursement of paid rent, mortgage, utilities, and PPE during the period of financial harm due to the pandemic, with proper documentation. This program directly supports category EC 2: Negative Economic Impacts. Businesses submitted applications for this program through an online application portal that was accepting applications from September 1, 2021, through September 30, 2021.

Final Administration costs through June 30, 2022, were paid. On May 21, 2024, the Board of Supervisors approved the transfer of \$2,515,375 from the Small Business Grant Program to fund the Shop San Joaquin Program (\$1,197,975) and the Greater Stockton Chamber of Commerce for the Stockton Takes Action Against Retail Theft Program/Security Camera Grant Program (\$1,317,400). Both programs are covered in this report. A balance remains and may be used for a future round.

Use of Evidence

The goal of this program was to provide relief to small businesses struggling to pay for rent or mortgage, utilities, and PPE. The County plans to evaluate the program by surveying participants and determining whether beneficiaries have recovered economically from the assistance this program provided.

Performance Report Key Performance Indicators

Key indicators vary by participants. Items funded will be measured to determine how well issues funded will be remediated. Number of small businesses served was 167.

Homekey Match Funding

Funding amount: \$10,000,000

Project Expenditure Category: EC 2.15 Long-term Housing Security: Affordable Housing

Project Overview

\$10.0 million of ARPA funds have been obligated as a set aside for a required match of funding for a Homekey project. If San Joaquin County, partnering with the Housing Authority of the County of San Joaquin (HACSJ), is successful in the application process, the County's match will bring in \$30.0 million to support the development of 200 new units of housing in the County for those experiencing homelessness. HACSJ will acquire the property, secure an operator, and commit rental assistance to support the project application and ongoing operation.

Use of Evidence

The goal of this project is to increase support for affordable housing for those experiencing homelessness in the County. Once a Homekey project is secured, on a semi-annual basis, the County will work with the HACSJ to collect data on the success of the application and ongoing support for participants.

The County is obligating one-time matching funds to make possible the project application and improve competitive project scoring by demonstrating a commitment, increasing the likelihood of a Homekey award from the State. If HACSJ is awarded Homekey funds following a successful application, the County's match funds would be made available for draw down to pay for eligible costs associated with the acquisition of a property and its conversion to permanent housing for the homeless. HACSJ will acquire the property, develop the project, secure an operator, and commit rental assistance to support the project application and ongoing operation. If the County and HACSJ are successful, the project has the potential to provide up to 200 initial doors of permanent housing for the homeless.

First 5 Programs

Funding amount: \$6,613,465

Project Expenditure Category: EC 2.37 Economic Impact Assistance: Other

Project Overview

To address the longer-term negative impacts of the pandemic on children 0-5, and their adult caretakers, in September 2021, the Board of Supervisors approved the use of \$4.1 of ARPA funds to expand or initiate services in the following five programs:

- 1. SJ TEETH This project partners with local community organizations, APSARA, Catholic Charities, El Concilio, Family Resource Network, and Family Resource & Referral Center, to provide Care Coordination services to children and their parents/caregivers in San Joaquin County enrolled in Medi-Cal. Care Coordination aids families to find a Medi-Cal dental provider, secure dental appointments and decrease "no show" rates at dental appointments by addressing barriers. Through these partnerships, the goal is to increase access to oral health care. This program will serve approximately 1,500 children and parents/caregivers. See Attachment B.
- 2. Help Me Grow This project partners with Family Resource & Referral Center for the Help Me Grow (HMG) Call Center. HMG is a national model that helps children receive periodically based developmental and behavioral screens and that families, in turn, receive appropriate referrals that result in timely access to services. This system of care also connects families to a wide range of family- and community-strengthening services such as referrals to home visiting programs, housing assistance, mental health services, health insurance, food assistance, general childhood development information, provider training, and family education. This program will serve approximately 1,100 families. See Attachment C.
- 3. Grandparents Initiative This project partners with APSARA, Catholic Charities Mary Magdalene Community Services, and El Concilio. Agencies provide coordination and services to Family, Friend, and Neighbor (FFN) childcare providers in San Joaquin County with the goal of improving the quality of care for children. Based on these trusting relationships, grandparents are provided with a Care Coordinator that assists them in: developing and implementing Quality Growth Plans; utilizing Raising A Reader, an early literacy and family engagement program; conducting screenings and referral services for health insurance, California Work Opportunity and Responsibility to Kids (CalWORKs), CalFresh (food stamps), Women, Infants, and Children (WIC); administering developmental screenings through the Ages & Stages Questionnaires; and delivering training and technical assistance related to child development, school readiness and quality interaction and environments. This program served 54 grandparents in fiscal year 2021-2022, 135 grandparents in fiscal year 2022-2023, and 246 in fiscal year 2023-2024.

- 4. Home Visitation Expansion Home visiting is a voluntary, evidence-based intervention that strengthens families and leads to long-term positive health and other evidence-based intervention that strengthens families and leads to long term positive health and other outcomes. Trained professionals visit parents regularly during pregnancy and through the early years. Home visitors also connect families to a broad range of available, supportive resources in the community. Through these visits and referrals, home visiting programs reduce parental stress, improve child health and development, and help parents bond with their child. This program served 50 parents/caregivers in fiscal year 2021-2022, 300 parents/caregivers in fiscal year 2022-2023, and 255 parents/caregivers in fiscal year 2023-2024. See Attachment D.
- 5. Parent/Family Engagement This project currently partners with Creative Child Care, Inc. and Tracy Unified. Parent/Family Engagement is a relationship-based, mutual, respectful, and responsive partnership between families, early learning and care providers, and other school readiness professionals to promote children's development, learning, and wellness. This program will serve 200 families.

Promoting Equitable Outcomes

First 5 San Joaquin (F5SJ) is committed to ensuring that all children have access to equitable learning opportunities, preparing them for success in both school and life. Placing children's needs at the heart of its mission, F5SJ operates with a focus on advancing equity and pursuing equitable outcomes. Utilizing American Rescue Plan Act (ARPA) funds, F5SJ has broadened its program reach in underserved communities by adopting an equity-focused approach. This includes funding trusted community-based organizations to deliver services for initiatives, such as the San Joaquin Treatment and Education for Everyone on Teeth and Health (SJ TEETH), Family Engagement, Help Me Grow, Expanded Home Visitation, and Raising Quality! Family, Friend, and Neighbor (FFN) Grandparents Initiative. These agencies employ culturally sensitive outreach strategies to engage Black/African American, Latinx, and Southeast Asian families, with efforts to reach participants in more isolated areas throughout the County.

- SJ TEETH emphasized the engagement of care coordination agencies with connections within the community to reach those facing the greatest oral health disparities and inequities. This included children from Latinx, Southeast Asian, and other communities of color, as well as children with special needs and those whose primary language is not English. ARPA funding has allowed SJ TEETH to deepen its investment in agencies experienced with families with Medi-Cal Dental benefits. F5SJ funded five agencies to provide targeted outreach to underserved communities: Asian Pacific Self-Development And Residential Association (APSARA) for the Southeast Asian population, Catholic Charities of the Diocese of Stockton and El Concilio California for the Latinx population, Family Resource Center for local childcare providers, and Family Resource Network serving children with special needs. In addition, F5SJ participated and continues to be actively involved in the County's Oral Health Advisory Committee working on updating a five-year strategic plan, and the California Statewide Partnership for Oral Health Steering Committee to help identify gaps in services and strategies to address equity within oral health care coordination. This involvement has helped to keep F5SJ informed of gaps in services, and local and statewide efforts to promote racial and economic equity.
- The Family Engagement Initiative within Tracy Unified School District has offered layered bilingual support services to promote early literacy and family engagement. This strategy has increased access to services and supports for families whose primary language is Spanish (e.g., use of Abriendo Puertas, bilingual curriculum, and Latino Literacy Workshops with lending library materials in Spanish).

- The Expanded Home Visitation Initiative has enhanced its responsiveness to underserved communities through the expansion of outreach efforts to families experiencing significant health, educational, and economic challenges. Four agencies provided home visitation services: APSARA focused on Southeast Asian communities in various zip codes (95204, 95205, 95206, 95207, 95209, 95210, 95212, 95215, and 95240), California Health Collaborative (CHC) and Delta Health Care (DHC) targeted Black/African American families residing in underserved zip codes (CHC served 95205, 95206, 95215, and 95376, and DHC served 95202, 95206, 95207, 95210, and 95219), and YMCA offered services in a broad range of zip codes (95202, 95203, 95204, 95206, 95207, 95209, 95210, 95212, 95215, and 95231).
- The Help Me Grow Initiative serves the County and receives referrals from the 2-1-1 system, which supports multiple languages.
- The Raising Quality! FFN Grandparents Initiative prioritized grandparents from various ethnic backgrounds. ARPA funds expanded this program to additional agencies, supporting grandparents through coaching with an emphasis on developing and implementing Quality Growth Plans for their grandchildren. APSARA served the Southeast Asian community, Mary Magdalene Community Services focused on the Black/African American community, and El Concilio California and Catholic Charities of the Diocese of Stockton served the Latinx community. Additionally, ARPA funding enabled Family Resource Center, the County's childcare resource and referral provider, to extend its service delivery beyond Stockton.
- Lastly, ARPA funds supported Home Visiting Workforce Development efforts by providing free
 training and events to support the growth and development of local capacity for home visitors
 throughout the County. Through ARPA funds, F5SJ provided Countywide training and
 professional development opportunities.

Community Engagement

F5SJ is aware of the rich diversity in San Joaquin County and the historical barriers faced by people of color. To address these challenges and serve children and families effectively, F5SJ collaborates with trusted community agencies to offer program-related training and workshops in other languages. In addition, each F5SJ initiative is evaluated. As part of the evaluation process, participant surveys and key informant interviews are conducted to assess the initiative and provide recommendations for improvement. These recommendations are incorporated in evaluation reports and are used to inform changes in programs or service delivery.

For example, F5SJ used its Home Visitation Workforce Development Action Plan, prior year's workforce development activities survey responses, and sought input from the San Joaquin County Home Visiting Coalition to inform the selection of professional development topics and effective training methods to address the local needs of the community.

F5SJ staff and SJ TEETH funded partners participate in the County's Oral Health Advisory Committee. This participation has facilitated and supported linkages to oral health resources for underserved communities.

Use of Evidence

F5SJ integrates evidence-based strategies and utilizes program evaluations to assess and inform the development of all programs and initiatives. This is done to refine programs and support continuous quality improvement.

 The SJ TEETH Initiative employs a care coordination model to promote the importance of dental care and to connect families to services, optimizing the utilization of Medi-Cal dental benefits. This initiative builds on the County's Oral Health Strategic Plan and was informed by the County's Oral Health Needs Assessment. Care coordinators specifically target low-income families with children under age six, ensuring they receive necessary dental care and resources. Attached is a recent SJ TEETH evaluation report.

- The Expanded Home Visitation Initiative uses an evidence-based curriculum to educate and support parents and caregivers as their child's first and best teacher. The research-based home visitation strategy is used due to its potential to improve children's outcomes across a range of domains including health, school readiness, parent economic self-sufficiency, and parenting practices. This initiative provides parents and caregivers with individualized and family-centered tools and supports to assist in their child's development and encourage healthy attachments. The initiative supports the whole family with the aim of ensuring caregivers have the resources and skills to provide safe, stable, nurturing, and stimulating care. Activities such as parent or caregiver education and family literacy are included to promote nurturing and positive emotional environments. Attached is a recent Home Visitation evaluation report.
- The Raising Quality! FFN Grandparents Initiative utilizes a coaching model to support grandparents as caregivers, incorporating Quality Growth Plans. These tools and strategies focus on children's health and safety, empowering grandparents to support their grandchildren's early care and education. This aligns with F5SJ's commitment to continuous quality improvement.
- The Family Engagement Initiative utilizes a research-based bilingual curriculum, Abriendo Puertas. This curriculum incorporates culturally familiar activities and data to promote school readiness, family well-being, and advocacy by addressing key aspects of early childhood development.
- Help Me Grow is a nationally recognized model that promotes collaboration between pediatric
 primary care practices, early care and education professionals, families, and community
 providers to implement a comprehensive, coordinated system for the early detection, referral,
 and care coordination of at-risk children for needed services and supports. Each year,
 F5SJ submits a program fidelity report to Help Me Grow National to support continuous
 system improvements. Attached is the recent Help Me Grow Fidelity Assessment Report.

See Attachments B and C included at the end of this report.

Performance Report Key Performance Indicators

First 5 Programs incorporate elements of promising practices involving coaching, goal setting, development screenings and layering of support services. First 5 is tracking the number of participants and progress of participants.

Evaluation is a fundamental aspect of service delivery at F5SJ. Evaluation is a fundamental aspect of program service delivery at F5SJ. F5SJ collaborates with Harder+Company Community Research (Harder+Co) to conduct program-specific evaluations and reporting. These evaluations typically involve analyzing process and outcome data collected by funded partners. Activities are incorporated into all initiative scopes of work and tracked through a database. Harder+Co uses this data, along with information gathered from individual surveys and interviews, to develop evaluation reports, fact sheets, and data dashboards. The evaluation results are utilized to inform planning and ongoing programmatic decisions, as well as to support continuous quality improvement. These reports are shared with funded partners and reported to the Commission.

ARPA-Funded First 5 Initiatives		
Initiatives		Participants
Expanded Home Visitation Initiative		
Developmental Screenings Completed		210
Home Visitation Initiative Participants		255
Raising a Reader Literacy Program Participants		233
	Total	698
Family Engagement Initiative		
Parent Participation in Family Engagement Modules		31
Developmental Screenings Completed		75
	Total	106
Help Me Grow Initiative		
Developmental Screenings Completed		1,334
Developmental Screening Training Completed		297
Help Me Grow Call Center Follow-Up		4,348
	Total	5,979
Oral Health Outreach to Existing Medi-Cal Recipients		27,572
Oral Health Care Coordination		1,394
	Total	28,966
Workforce Development Initiative		
Completion of eight session Community of Learning focused on home visiting utilizing curriculum from Start Early		21
Scholarships to attend the National Home Visiting Summit		49
Hosted 1st Annual Home Visiting Summit for San Joaquin County (Free of Charge)		140
	Total	210

RAD Card Program

Funding amount: \$5,771,000

Project Expenditure Category: EC 2.29 Loans or Grants to Mitigate Financial Hardship

Project Overview

The program assists small businesses, which were adversely affected by COVID-19 pandemic. The program utilizes a mobile phone application that is free to download on the APP store and Google Play. The program consists of a digital gift card where consumer's contributions are matched up to \$200. Nearly \$5.8 million of ARPA funds have been allocated to this program, which has proven to be successful to stimulate the local economy by doubling consumer spending and bringing much needed relief to small businesses in San Joaquin County.

Use of Evidence

The goal of the program is to assist small businesses in the County who were adversely affected by the pandemic. The program supports economic recovery and has proven to be successful in stimulating spending and encouraging consumers to spend in their local communities.

To date, 27,422 individuals have participated and had funds matched and 433 businesses are enrolled in the RAD Card Program. RAD Card Program dollars spent at participating businesses total \$11.4 million.

Performance Report Key Performance Indicators

Indicators include tracking businesses enrolled in program, number of individuals who participated and had funds matched, and RAD Card Program dollars spent at participating businesses.

COVID Testing

Funding amount: \$1,023,418

Project Expenditure Category: EC 1.2 COVID-19 Testing

Project Overview

To assist San Joaquin Public Health Services in its effort to combat the pandemic and because COVID-19 spreads so quickly, it is essential for those being tested to have immediate results. This project allocated approximately \$1.0 million for over 54,000 Rapid Antigen tests that produced immediate results.

Use of Evidence

The goal is to reduce the spread of COVID-19 in San Joaquin County by offering tests and immediate results to the community, but especially those in the underserved communities.

Performance Report Key Performance Indicators

Indicators include tracking the number of tests and results.

Lodi House

Funding amount: \$846,181

<u>Project Expenditure Category</u>: EC 2.16 Long-Term Housing Security: Services for Unhoused Persons.

Project Overview

An initial allocation of \$846,181 in ARPA funds was used to assist Lodi House in acquiring a facility to expand Lodi House shelter and related services. Lodi House is a private non-profit organization designed to help women and children achieve long-term stability in family life, finances, employment, and housing. Lodi House has a long history of serving a diverse population, with BIPOC individuals comprising approximately 70% of the mothers and children assisted.

This initial project included the purchase of four rental units. Lodi House's transitional housing program is intended to support the long-term stability of households with children, following the completion of their shelter program. Throughout tenancy, residents are required to maintain employment, a monthly savings plan, and are offered ongoing aftercare following discharge from the program. Lodi House staff assist residents in developing the life skills and resources needed to maintain housing and financial stability for themselves and their children over a lifetime. This is achieved through providing job connections, financial education, savings requirements, and relational support, allowing these families to build a rental history, secure adequate income, and prepare to move into permanent housing within two years. Lodi House staff meet with transitional program residents several times a month to monitor their progress, build and strengthen relationships, resolve concerns, provide resources, and foster a climate of accountability.

The Final Rule eligible uses of ARPA funds include "services to address homelessness such as supportive housing to improve access to stable, affordable housing among unhoused individuals."

Use of Evidence

Lodi House consistently assesses the impact of its programs by measuring their effectiveness in achieving key outcomes, including housing stability, employment attainment, and the overall well-being of single mothers and their children. Its client-centered approach is deeply rooted in trauma-informed care, which draws from ACES research. We are dedicated to integrating findings that highlight the profound negative effects of human trauma on life outcomes, encompassing mental health disorders, substance abuse disorders, chronic medical conditions, homelessness, and domestic violence. This commitment informs a strategy to provide holistic support that addresses the complex needs of Lodi House clients. Furthermore, Lodi House engages a licensed therapist to offer therapy sessions for both mothers and children enrolled in the program. Regular records are maintained at www.cdc.gov/violenceprevention/aces/about.html.

The mother and children served through the ARPA funding transitional housing program continue to meet monthly with a case manager. The goal of this program is to further family stability through financial management, increase savings, job stability, and a network of support.

Hilborn House opened on February 1, 2022. Since that time, four homeless families (four mothers and 21 children) have been served at Hilborn House. Goals of the project are focused in the areas of parenting, professional development, finances, and building a community network. Residents work with a local property management company to establish a positive rental history and are required to put at least \$200 a month into a savings account managed by Lodi House staff to develop financial stability. These supports are designed to help residents achieve sustainable lifestyles to avoid returning to the cycle of homelessness.

Performance Report Key Performance Indicators

Housing Support: The number of affordable housing units preserved or developed is four.

Lodi House uses HMIS to track client demographics and program participation for both the shelter program and ARPA-funded transitional housing program.

Premium Pay to Employees

Funding amount: \$6,523,447

Project Expenditure Category: EC 4.1: Public Sector Employees

Project Overview

Public Sector Employees – \$6,523,447 in ARPA funds was allocated to provide a one-time lump sum payment to County employees who worked during the COVID-19 Pandemic from March 30, 2020, through September 26, 2021. Through the efforts of its employees, the County has maintained continuity of services to the community while striving to keep the workplace safe. To recognize the current County employees who either reported to work in person or through telework, the County reached an agreement with its labor organizations to provide a one- time payment of up to \$1,000, effective January 31, 2022, based on the following parameters:

- 520 1,040 regular hours worked: \$500 payment
- More than 1,040 regular hours worked: \$1,000 payment
- Must be a current County employee at the time payments are issued.

Use of Evidence

The goal was to recognize employees for their efforts of maintaining continuity of services to the community during the pandemic.

Performance Report Key Performance Indicators

Obtained hours of all employees and provided a one-time payment of up to \$1,000 based on hours worked during a defined 18-month period identified as having the most significant COVID-19 exposure in the County.

- 520 1,040 regular hours worked: Received \$500 payment
- More than 1,040 regular hours worked: Received \$1,000 payment

Microbusiness COVID-19 Relief Grant

Funding amount: \$790,000

Project Expenditure Category: EC 2.37: Economic Impact Assistance: Other

Project Overview

The California Microbusiness COVID-19 Relief Grant Program (MGCRG) was created in 2021 to assist qualified microbusinesses significantly impacted by the pandemic. Businesses must have less than five full-time equivalent employees and business income must be less than \$50,000, but more than \$1,000, in each year of 2019, 2020, and 2021. \$790,000 in ARPA funding provides relief to qualified microbusinesses in the form of a one-time grant award of \$2,500. The County Board of Supervisors approved a County match of \$2,500 to each qualified microbusiness (up to 316) for a total grant amount of \$5,000 per qualified microbusiness.

Use of Evidence

The goal is to provide relief to qualified microbusinesses that have been significantly impacted by the COVID-19 pandemic.

Performance Report Key Performance Indicators

Applications were reviewed and approved by the County's Employment and Economic Development Department, following guidelines of the California Microbusiness COVID-19 Relief Grant Program. The department will track the number of microbusinesses that receive assistance. The number of microbusinesses served was 316.

Parks Projects (Oak Grove Lake Bank Erosion Mitigation, Westgate Landing Well Repair, Micke Grove Tie-In, Irrigation Upgrades, Giannone Tie-In)

Funding amount: \$8.0 million

Project Expenditure Category: EC 5.5: Clean Water: Other sewer infrastructure

Project Overview

\$8.0 million in ARPA funds has been allocated to fund water and sewer infrastructure projects at community and regional Parks, County Service Areas, and community centers. Continuous drought conditions, age, and multiple repairs over the years have degraded park irrigation systems. Modernization of the irrigation systems will reduce water usage, repair, and maintenance costs by the inclusion of water sensors, break alerts, and computerized programming. In addition, the COVID-19 pandemic created a change in usage patterns, which has negatively affected the wells and domestic water systems throughout San Joaquin County parks, accelerating the need for their repair or replacement.

Use of Evidence

The goal is to modernize irrigation systems to reduce water usage, repair, and maintenance costs by the inclusion of water sensors, break alerts, and computerized programming.

Performance Report Key Performance Indicators

Track reduction in water usage, reduction in repair and maintenance costs, and track number of project labor agreements and local hiring.

Parks and Recreation Equipment for County Park Facilities

Funding amount: \$112,500

Project Expenditure Category: EC 1.14 Other Public Health Services

Project Overview

Heavy flows of the slough caused additional damage including debris, trash, mud, silt, downed trees, and fallen branches. Funds were used to purchase an excavator and trailer to assist the Parks and Recreation Division in maintaining the slough for future stormwater runoff and maintain other areas throughout County parks including river sites and lakes at Micke Grove and Shumway Oak Grove Regional Parks and to assist with trenching for irrigation.

Performance Report Key Performance Indicators

The excavator assists in maintaining the slough for future stormwater runoff and is used to maintain the other areas throughout parks, including river sites and lakes at Micke Grove and Shumway Oak Grove Regional Parks. The County will track maintenance of the slough for future stormwater runoff.

Information Systems Division (ISD) Projects

Funding amount: \$6.5 million

Project Expenditure Category: EC 1.7: Other COVID-19 Public Health Expenses

(Including Communications, Enforcement, Isolation/Quarantine)

Project Overview

\$6.5 million in ARPA funds has been obligated for Technology Infrastructure Modernization. Acceptable uses of ARPA funds include assisting local governments in the enforcement of public health orders, supporting incarceration facilities, and making capital investments to meet pandemic operational needs. San Joaquin County owns and maintains several information systems that have reached or will soon reach the end of their service lives that support fire/life/safety agencies. Continued reliance upon systems that are no longer supported puts the County at risk of business service interruption and at risk of unanticipated and unbudgeted expense to replace a failed system or component.

Information Systems Division used ARPA funds to replace a set of public safety radios used by rural fire departments. Rual fire agencies in San Joaquin County coordinate some purchasing and operations activities through the Joint Radio Users Group (JRUG). Using ARPA funds, the County supported public safety operations of rural fire districts that have limited resources.

Use of Evidence

The goal is to utilize \$6.5 million in ARPA funds to assist San Joaquin County in making capital investments to meet pandemic operational needs, which includes supporting incarceration facilities. Funding will be used to implement systems and controls outlined in the County's Cyber Security Strategic Plan to improve the county's cybersecurity defenses.

Track number of systems and controls implemented throughout County facilities, project labor agreements, and local hiring, and 100% use of prevailing wage requirements.

ISD used ARPA funds to upgrade its data center storage and compute infrastructure. After performing a capacity analysis and predicting future utilization based on historical trends, ISD chose to expand its private cloud compute capacity and associated storage systems. ISD uses network and systems management tools to monitor utilization trends and to inform decisions about infrastructure investments.

Public Works Projects

Funding amount: \$8,050,000

Project Expenditure Category: EC 5.18: Water and Sewer: Other

Project Overview

The Board of Supervisors approved the use of \$8,050,000 in ARPA funds for two Public Works Projects:

- 1. \$2.6 million in ARPA funds have been obligated for the Supervisory Control and Data Acquisition System (SCADA) Project at multiple County-administered special districts. Per the Final Rule, eligible uses of ARPA funds include investments and improvements to existing sewer and water infrastructure. SCADA allows the ability to monitor and regulate water flows remotely. Public Works' Utility Maintenance division operates and maintains 32 water systems with 52 wells; 43 storm drain systems with 70 pump stations; and nine sewer systems with three sewage treatment plants and nine sewage lift stations in various locations within the unincorporated county. This Project is intended to increase the longevity of current utility infrastructure; allow the ability to detect equipment failures more quickly and efficiently; reduce future utility maintenance and operations costs; and reduce replacement costs for these utility systems.
- 2. \$5,450,000 in ARPA funds have been obligated to fund water, sewer, and emergency power projects at six County-administered special districts. The Department of Public Works (Public Works) administers over 100 special districts that provide services to communities within the unincorporated area of the County. Public Works has capital improvement projects (CIPs) within six districts for which ARPA funding is proposed to improve water service reliability, conserve water, decrease operation and maintenance costs, and improve public health and safety. These CIPs involve relocating and modernizing water distribution infrastructure, procuring, and installing emergency power generators, and sanitary sewer system improvements. The proposed CIPs align with ARPA guidelines for water and sewer infrastructure investments because they are eligible to be funded through the Environmental Protection Agency Clean Water State Revolving Fund and/or Drinking Water State Revolving Fund.

Use of Evidence

Projects are intended to increase the longevity of current utility infrastructure, allow the ability to detect equipment failures more efficiently, reduce future utility maintenance and operations, reduce replacement costs of these utility systems, and improve water service reliability, conserve water, and improve public health and safety.

Track detected equipment failures and corrections, reduction in utility maintenance and operational costs, water service and conservation of water, reduction in replacement costs of utility systems, number of project labor agreements, and local hiring, and 100% use of prevailing wage requirements.

Ground Water Authority

Funding amount: \$2,104,000

Project Expenditure Category: EC 5.18: Water and Sewer: Other

Project Overview

The GWA is a joint powers agency consisting of 16 ground water sustainability agencies, two of which are governed by the Board of Supervisors, who are responsible to implement a Groundwater Sustainability Plan for the Eastern San Joaquin groundwater sub-basin. The GWA GSP identifies management actions to accomplish the following: (i) fill data gaps; (ii) develop monitoring wells to track and understand surface and groundwater interactions; and (iii) equip wells with instrumentation to improve data collection at key monitoring locations. To address these requirements, the Project will involve design and construction of five shallow monitoring wells; two nested Delta wells to track salt migration; and, up to six additional wells, including installation of monitoring hardware at key locations.

Key elements of the Project include project management, site selection, permitting, design, environmental clearance, easement acquisition, drilling, well logging and equipment acquisition/installation. A general breakdown of estimated Project costs is shown in the following table:

Cost Estimat	e Breakdown
Project Management	\$120,000
Preliminary Engineering	103,000
Construction	1,600,000
Instrumentation	91,000
Contingency	190,000
	Total \$2.104.000

Use of Evidence

The project is intended to increase the longevity of existing sewer and water infrastructure and improve public health and safety.

Performance Report Key Performance Indicators

Fill data gaps, develop monitoring wells to track and understand surface and groundwater interactions, and equip wells with instrumentation to improve data collection at key monitoring locations.

Housing Projects (Lodi House Project No. 2, St. Mary's/STAND Supportive Housing, Lodi Access Center, Creekside South Apartments, Tracy Shelter)

Funding amount: \$20.0 million

Project Expenditure Category: EC 2.16: Long-Term Housing Security Services for Unhoused Persons

Project Overview

On October 4, 2022, the Board of Supervisors approved \$20.0 million in ARPA funding for the following five affordable and permanent supportive housing projects:

Project		Funding Amount
Lodi House Transitional Housing (BOS 11-29-22)		\$832,202
St. Mary's/STAND Supportive Housing (BOS 11-29-22)		2,000,000
Lodi Access Center (BOS 12-13-2022)		8,200,000
Creekside South Apartments Rehab (BOS 5-2-2023)		1,800,000
Tracy Emergency Shelter Project (BOS 7-25-23)		7,167,798
	Total	\$20,000,000

- Lodi House Transitional Housing Allocation of another \$832,202 to Lodi House to fund an
 additional capital acquisition of a facility to provide additional transitional housing, and the repair
 and rehabilitation of the emergency shelter and administrative offices. This project included the
 purchase of three units with a total of six bedrooms and three full bathrooms.
- St. Mary's/STAND Supportive Housing With an allocation of \$2.0 million, STAND will purchase, rehabilitate, and provide ongoing management services for four single-family homes, creating a total of 16 new units of housing for the homeless. St Mary's Dining Room will provide case management services and deliver services ongoing while clients are residents of the program.
- Lodi Access Center \$8.2 million of ARPA funds will be used to complete the Lodi Access Center
 Project (acquisition of the site, infrastructure improvements, furnishings and fixtures,
 landscaping, and parking). Two more phases of the project are currently planned to further
 improve the facility and add a workforce development center dedicated to learning and job
 training activities for Access Center clients and members of the community.
- Creekside South Apartments \$1.8 million in ARPA funds received to preserve low-income
 housing units to maintain the health and stability for the most vulnerable citizens, particularly
 seniors. Funding will be used to cover costs including roofing, siding, windows, HVAC, and
 electrical, allowing for the completion of rehabilitation of the property and preserve it for use as
 senior affordable housing. The average annual income of Creekside's senior residents is
 \$16,309.
- Tracy Emergency Shelter Project \$7.2 million in ARPA funds will be used to complete the Tracy
 Emergency Shelter Project. Funds will be used solely for capital needs of the project. Once fully
 operational, anticipated for May 2024, the facility will have capacity to provide emergency shelter
 and related services each night to 68 homeless men and women.

Use of Evidence

Upon completion of all these projections, many homeless families will be served at five different locations throughout San Joaquin County. Goals also include case management services focused in the areas of parenting, professional development, finances, and building a community network. These supports are designed to help residents achieve sustainable lifestyles to avoid returning to the cycle of homelessness.

Housing Support: The number of affordable housing units preserved or developed is four.

Fire Districts Projects (Multiple)

Funding Amount: \$12.5 million

Project Expenditure Category: EC 3.4: Public Sector Capacity: Effective Service Delivery

Project Overview

ARPA provides funding for permissible capital investments. Under the section Capital Expenditures in General Provisions: Other, the acquisition of equipment for COVID-19 prevention and treatment, including ventilators, ambulances, and other medical, emergency services, and emergency response equipment and support for operations and maintenance of existing equipment and facilities are eligible uses. The Board of Supervisors approved funding of \$12.5 million to assist fire districts within the County with purchases of emergency vehicles, equipment, and capital projects supporting operations and maintenance of existing facilities.

Use of Evidence

Project is intended to assist Fire Districts in purchasing needed equipment and facility repairs to continue providing services to community in the most effective and efficient manner.

Performance Report Key Performance Indicators

Track calls where new equipment has been dispatched and track reduction in maintenance and capital costs.

Escalon Community Ambulance

Funding Amount: \$347,000

Project Expenditure Category: EC 3.4: Public Sector Capacity: Effective Service Delivery

Project Overview

ARPA provides funding for the acquisition of equipment for COVID-19 prevention and treatment, including ventilators, ambulances, and other medical, emergency services, and emergency response equipment. The Board of Supervisors approved funding of \$347,000 to Escalon Community Ambulance (ECA) for the purchase of two ambulances, patient transportation equipment for each ambulance, a command vehicle, and emergency medical services equipment and training.

Use of Evidence

During the COVID-19 pandemic, ECA would have benefited from having additional resources to respond to emergency medical service calls within the community. Additional equipment will allow the current emergency vehicle to be cleaned and disinfected properly and remain in service for community members.

Performance Report Key Performance Indicators

Track calls where new equipment has been dispatched and number of staff receiving additional EMS training.

Downtown Stockton Alliance

Funding Amount: \$1,141,946

Project Expenditure Category: EC 2.35: Aid to Tourism, Travel, or Hospitality

Project Overview

The Downtown Stockton Alliance (DSA) is a servant of downtown business property owners, business owners, and residents, in the form of providing sidewalk maintenance in addition to other services. The Board of Supervisors approved funding of \$1.1 million for the DSA to purchase vehicles to aid them in conducting downtown maintenance work more effectively, which provides a direct benefit to downtown businesses property owners, visitors, and residents, while assisting the area in recovering from the pandemic by ensuring that downtown is an attractive place to visit, work, and live. In addition, the DSA has received an allocation for assessments, parking passes, recertification fee, bus passes, chamber memberships, window repair funds, banners and banner poles, window wraps and displays, and a trash enclosure near the Canlis building.

Performance Report Key Performance Indicators

The goal is to assist downtown businesses in revitalizing downtown.

Children and Youth Taskforce Projects

Funding Amount: \$3,125,000

<u>Project Expenditure Category</u>: EC 2.13 Healthy Childhood Environments Services to Foster Youth or Families Involved in Child Welfare System

Project Overview

To address the long-term negative impacts of the COVID-19 pandemic on children and their adult caretakers, in August 2022, the Board of Supervisors approved the use of \$3.1 million of ARPA funds to expand or initiate services in the following four programs:

- Neglected Children's Fund-Human Services Agency (HSA) Funding provides opportunities
 for foster children to participate in extracurricular activities that would otherwise be
 unavailable to them due to cost. HSA staff normally fundraises by hosting a bake sale and
 raffling off baskets. Due to the pandemic, no fundraisers have taken place. Funding will also
 be used for outreach, strategies to recruit volunteers, and increase awareness of the Court
 Appointed Special Advocates Program.
- 2. Community Grant Fund Funding supports community-designed events that promote solidarity and healing and highlights local resources for pandemic recovery to under-resourced and marginalized communities in San Joaquin County
- 3. Youth Workforce Initiative Funding to engage youth to strengthen pathways to the workforce through awareness and education campaigns. Youth-led and community driven, this campaign will focus on connecting more youth to the many workforce development programs available across the County and the developing skills needed to be hired.
- 4. 2-1-1 Program Two years of funding for two full-time positions to provide: i) outreach to Community-Based Organizations (CBOs) to ensure accurate information uploaded in the database; and ii) ambassador training to CBOs, businesses, and schools so they are aware of what's available via 2-1-1 and care coordination to increase connections to services. Funding will also provide billboards throughout San Joaquin County to advertise 2-1-1, digital and paid media/advertising to include the promotion of a newly developed mobile app. Professional services will include AIRS certifications/accreditation & CA Child Care Resource & Referral Network membership, and various communication expenses.

Children and Youth Taskforce programs primarily serve disproportionately impacted communities.

Use of Evidence

Program evaluations will be conducted on all Children and Youth Taskforce programs.

Performance Report Key Performance Indicators

Children and Youth Task Force Programs incorporate elements of promising practices involving coaching, goal setting, development screenings, and layering of support services. The Task Force is tracking the number of participants and progress of participants.

Veterans Projects

Funding Amount: \$4,000,000

<u>Project Expenditure Category</u>: EC 2.34 Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)

Project Overview

On October 4, 2022, the Board of Supervisors allocated \$4.0 million in ARPA funds to veterans' organizations within San Joaquin County for much needed property repairs to veteran facilities and equipment needs. These non-profit organizations serve veterans and are committed to mentoring youth and sponsorship of wholesome programs in the community, advocating patriotism and honor, promoting strong national security, and continuing devotion to service members and veterans.

Performance Report Key Performance Indicators

The goal is to assist veterans' organizations with providing veterans with a safe and more modern facility.

Community Center Projects

Funding Amount: \$6,539,453

<u>Project Expenditure Category</u>: EC 2.2 Strong Healthy Communities: Neighborhood Features that Promote Health and Safety

Project Overview

A total of \$6.5 million in ARPA funds has been obligated for facility repairs, upgrades, and equipment purchases at the eight Community Centers operated by the County, and the Clements Community Center. An extensive list of facility improvement projects and equipment purchases for each Community Center has been identified. Improvements will address HVAC replacements, new roofs and kitchens, repairs to parking lots and sidewalks, additional storage, outdoor seating, and free internet access. These improvements will increase access to the community.

Current progress includes HVAC and roof replacements. By December 2024, it is anticipated that all eight community centers will have new flooring. During 2024-2025, it is expected that kitchen upgrades, storage and interior paint will be completed. Parking lots and walkway repairs are anticipated to be completed in 2025-2026.

Use of Evidence

Community Centers, located in several underserved areas provide San Joaquin County citizens with a variety of amenities such as indoor community center facilities, sports fields (soccer, basketball, and baseball), playgrounds, and picnic facilities. The goal of this program was to upgrade and repair these facilities to provide the community opportunities to positively impact their lives, promote exercise and healthy living, and promote public safety.

Track number of community members that visited community centers prior to facility improvements and upgrades, and how many visit after facility improvements and upgrades.

Mental Health Workforce Pipeline Project

Funding Amount: \$5,200,000

Project Expenditure Category: EC 1.12 Mental Health Services

Project Overview

A collaborative effort between San Joaquin County Health Care Services, Behavioral Health Services, Children and Youth Task Force, along with various partnering organizations including the County Office of Education, school districts, Health Plan of San Joaquin, and community behavioral health providers will utilize an initial investment of \$5.2 million in ARPA funding to increase collective service capacity to help mitigate the pandemic's negative impact on mental health within San Joaquin County and sustain many elements of the proposed Mental Health Workforce Pipeline Project permanently using other State, Federal, and local funding. Although there will be some proposed use of Mental Health Services Act (MHSA) Workforce and Education Training (WET) funds to partially facilitate the ongoing project, the pilot requires supplemental funds to meet the initial budgeted costs and to provide the foundation for the program to grow. MHSA WET funds for the next three years are already allocated to other projects and are not sufficient to launch this initiative. BHS is experiencing a prolonged and severe shortage of both employed and contracted behavioral health professionals which is adversely impacting its ability to successfully implement both current and planned expansion programs.

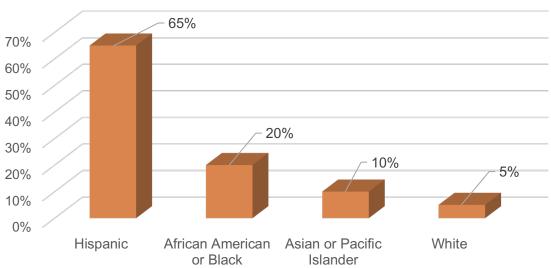
Promoting Equitable Outcomes

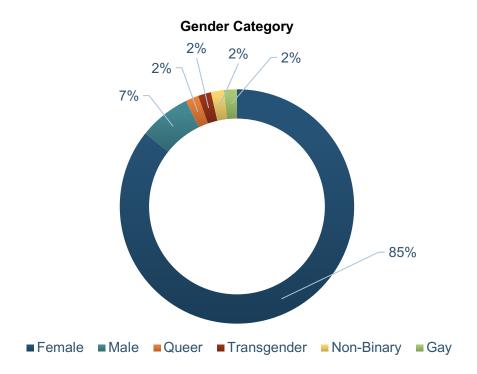
Through this funding, Behavioral Health Services is striving to build a behavioral health community that can match the diverse ethnicities of the County's community and the populations served. The project targets a wide geographic region within the County by working with a variety of field-based Community Based Organizations who serve marginalized communities.

Demographics of Interns

Fifty-nine Internships have taken place through June 30, 2024.

Ethnicity





Based on responses from 48 interns, 18 interns speak a second language, including Spanish, Tagalog, and Afrikaans.

Behavioral Health Services and contracted CBOs serving Medi-Cal patients were eligible for interns serving across the county. Many if not most, do not have the capacity to accept interns without this program. Interns have served in three cities: Stockton, Tracy, and Lodi. CBOs currently or previously hosting an interna include:

- Child Abuse Prevention Council
- El Concilio
- San Joaquin Pride Center
- Children's Home of Stockton
- Amelia Ann Adams Whole Life Center
- Community Medical Centers

Community Engagement

Health Care Services (HCS) started the process of creating the Mental Health Workforce Pipeline project by conducting one year of community engagement. During the year, HCS met four times as a large group with a broad range of community members, 12 times in small subgroups, and several individual meetings. There was a strong representation from small to large community-based organizations (CBOs) that represent populations intended to be reached with this funding. The community engagement strategies of the Mental Health Workforce Pipeline project support equity goals as the project included CBOs that serve and represent those who have faced significant barriers to services, such as people of color, people with low incomes, and limited English proficient populations. Funds have been used to try to uplift these organizations since the community finds accessing their programs to be less stigmatizing than coming to a government agency for services. Training has been provided on how to submit government requests for proposals. Training has also been provided on how to become a Medi-Cal provider with the Management Care Plans which is integral in helping these agencies thrive. During the training, input from CBOs was gathered on what they need from this program to be successful in meeting the needs of the community.

Three CBOs were recently awarded part of the California grant monies to provide evidence-based practices to children.

The funding provides for a full-time program manager who in addition to other responsibilities is tasked with ongoing community engagement strategies. To gauge impact from the program and ensure ongoing collaboration the program manager has engaged in the following activities:

- Meetings with partners and community-based organizations across the county to identify new intern locations.
- Collect feedback from interns through their learning logs on impact and benefits of being a part of the program.
- Collect feedback from community-based organizations that are current intern locations to access benefits to partners.
- Regularly attended the Community Health Leadership Councils SJC Youth Wellness Alliance meetings. These councils have diverse populations attend and participate.

Use of Evidence

To build a better pipeline of health force workers, the evidence suggests that something needs to be done to prevent college dropouts and increase student retention. Specifically, the following statistics provide evidence that this program is needed in the San Joaquin County community: Three in every ten students drop out of college after or within the first year, while 79% of students delay their graduations due to financial difficulties. The nation's growing college dropout rate is attributed mostly to financial challenges. Tuition costs have risen by 1,375% since 1978 leaving students to have to choose between finishing their degree or dropping out to resolve their financial hardships. Based on research from 2021, 38% of students admit to dropping out because of financial pressure. Funds will be used to encourage student retention by offering hardship scholarships, paid practicums, and providing loan repayment.

Performance Report Key Performance Indicators

Vacancy rates will be tracked over the life of this program to measure the impact on the provision of Behavioral Health services for the community. Current tracking includes the utilization of the program to see which aspects of the program are making the most impact.

For example, the following is tracked:

- Number of intern placements
- Number of loan repayment awards
- Number of retention bonuses
- Number of hardship scholarships
- Number of PSSC bonuses

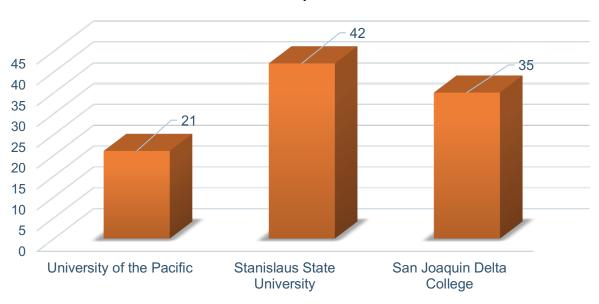
The following data is collected on an ongoing basis and will be examined annually for impact and trends.

- Number of internships created
- Number of agencies hosting interns
- Number of graduates that are hired in San Joaquin County
- Number of vacancies at Behavioral Health Services year over year
- Number of vacancies in partner organizations in behavioral health serving positions

Scholarships

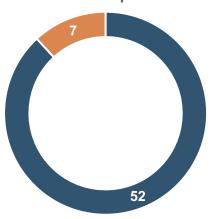
- \$210,000 awarded to University of the Pacific 21 students awarded \$10,000 each
- \$210,000 awarded to Stanislaus State University 42 students awarded \$5,000 each
- \$20,000 awarded to San Joaquin Delta College students to purchase required uniforms for two cohorts of students enrolled in the Psychiatric Technician program; 35 students benefited

Scholarships Invested



Internships

Total Internships To Date



- Internships with supervision through HealthForce Partners
- Interships with partner organizations receiving stipends for supervision

Nine of ten interns who completed their first year of required hours and chose to return to work while finishing their coursework, were hired in San Joaquin County in behavioral health jobs — many at their intern locations.

Illegal Dumping Project

Funding Amount: \$2,000,000

Project Expenditure Category: EC 1.14 Other Public Health Services

Project Overview

A record-setting amount of garbage and illegal dumping is polluting the region. Abandoned refrigerators, tires, mattresses, motors, and marine vessels are scattered throughout neighborhoods and along highways, and waterways. If not cleaned up, this waste could threaten the community's health, safety, and environment. Additionally, it affects property values, creates blight, and attracts more illegal dumping. The San Joaquin County Board of Supervisors approved an Illegal Dumping Ordinance that will enable the County Sheriff's Office to issue citations and hold illegal dumpers accountable starting October 13, 2022. A County Task Force has been tasked with exploring the complex issues of illegal dumping and developing a plan, with the goal of deterring illegal dumping in a measurable amount to decrease its negative impacts. Funds will be used to support Illegal Dumping efforts, which include advertising, cameras, education/outreach, eradication, and enforcement.

Use of Evidence

The goal of this program is to combat the negative impacts of illegal dumping on the County's residents, communities, and environment, using the Three Es method – Education, Eradication, and Enforcement. This method has been a proven success in other California counties.

Performance Report Key Performance Indicators

Education and outreach efforts continue to inform the community on the proper ways to dispose trash and debris and report illegal dumping. Radio, social media platforms, and billboards were used to display the Task Force's message of, "See It. Report It. Stop It." During the year, these media platforms delivered over 5 million impressions, 40,000 clicks, and a reach of over 1.6 million people.

The Sheriff's Office Strategic Intelligence Unit has continued its enforcement efforts using camera surveillance of illegal dumping hot spots throughout the County. As a result, 10 citations have been issued along with 5 five arrests and two open investigations. The Unit will continue to deploy surveillance cameras in other hot spot areas within the County. Eradication continues across the County with an increase in citizens reporting illegally dumped trash and debris which resulted in 2,666 tons of trash/debris tonnage. Furthermore, additional clean-up events were added to the Dumpster Days Calendar to assist communities near hot spot areas to properly dispose of household waste, debris, and appliances.

OES Equipment, Training, and Vehicle & COVID-19 After Action Report

Funding Amount: \$752,996

Project Expenditure Category: EC 3.4: Public Sector Capacity: Effective Service Delivery

Project Overview

A total of \$598,000 in ARPA funds has been provided to the County's Office of Emergency Services (OES) for a shower trailer combo to supplement shelter operations; disaster preparedness training; EOC technology updates; and two operational area support vehicles.

In addition, ARPA funding of \$154,996 was provided to Public Health Services for the purpose of contracting with a vendor for the development and presentation of the San Joaquin County COVID-19 Emergency After Action Report and Improvement Plan.

- Shower Trailer The shower trailer is intended to supplement shelter operations by providing reliable and durable emergency shower and restrooms, including Access and Functional needs, to the most vulnerable population and those evacuated during an emergency. Many older facilities used for evacuation/shelters may not have accessible restrooms/shower amenities. The trailer is towable and will allow for portable and portable hookups. Allowing for clean water sources from contaminated flood waters during an emergency.
- Disaster Preparedness Training Training on EOC management and operations ensures local responders are well-prepared to coordinate disaster response effectively. Training extends to community organizations, enhancing their disaster preparedness skills and ensuring they can contribute to response efforts in their communities.
- Response Vehicles OES purchased several vehicles- Chevy Tahoe and Dodge 3500 truck, which are equipped and ready for rapid deployment to disaster sites. These vehicles are branded with the SJReady.org information and are frequently used to tow a mobile operations center, transport light towers, and serve as static displays at various community events. This visibility raises awareness about emergency preparedness and encourages the community to engage with SJReady.org for valuable resources and information.

Promoting Equitable Outcomes

These programs contribute to promoting equitable outcomes through targeted efforts that address economic and racial equality. Disaster response typically involves leveraging various resources, equipment, and personnel managed by OES to respond and manage emergencies.

- Shower Trailer The shower trailer is designed to be ADA accessible, and those with specific
 needs such as elderly populations. It plays a critical role in ensuring equitable access to
 emergency shower facilities, particularly in underserved areas where resources are limited.
 OES is committed to promoting inclusivity and addressing the diverse community needs,
 thereby enhancing resilience and the well-being of the community during an emergency.
- Disaster Preparedness Training These training courses are open to all OES partners within the County and Operational Area, including community-based organizations and local businesses.

Community Engagement

 Disaster Preparedness Training – OES has strengthened community engagement efforts through strategic partnerships with the Central Valley Regional VOAD (Voluntary Organizations Active in Disaster). This collaboration promotes cooperation, communication, and coordination to foster more effective delivery of services to communities affected by disasters. OES is better able to address the unique needs of various community segments through VOAD's expertise and resources.

Use of Evidence

- Shower Trailer The trailer adheres to the Emergency Shelter Guidance outlined in the Revised ADA Standards for Accessible Design (2010 Standards). By leveraging demographic data and incorporating community input, OES effectively identified and secured resources that guarantee access.
- Disaster Preparedness Training These training courses help enhance the capabilities of community members and organizations that serve vulnerable populations. Through review, OES can adapt the training to address current challenges and leverage best practices, ensuring all community members are better prepared and protected.

Response Vehicles – These vehicles have improved emergency deployment response times.
 During the 2022-2023 Winter Storm events, OES faced challenges due to limited fleet supply.
 By analyzing data and performance metrics from those events, OES identified critical gaps including vehicle deployment. This evidence-based approach ensures the fleet is equipped to swiftly respond and effectively respond to future emergencies.

Performance Report Key Performance Indicators

- Shower Trailer The shower trailer was acquired for approximately \$84,000, below the allocated funding amount of \$150,000. In 2024, the trailer was prepared for deployment during two major activations. The cost savings allowed for the reallocation of funds to further strengthen emergency preparedness and response infrastructure.
- Disaster Preparedness Training OES has completed four training courses, which were attended by Operational Area members.

Lodi Grape Festival

Funding Amount: \$320,122

<u>Project Expenditure Category</u>: EC 2.34 Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)

Project Overview

The Lodi Grape Festival, a local non-profit agency, was awarded ARPA funding to replace the 25,000 square foot roof of the Lodi Grape Festival building. The Grape Festival has experienced significant negative economic impacts due to the pandemic. All hospitality events were canceled for more than a year. Not being able to host any events for 18 months has ultimately affected the ability to complete all deferred maintenance projects. Additionally, the County owns this facility, which is operated by the Lodi Grape Festival Association on a lease agreement that has been in place since 1937. The Lodi Grape Festival building has been used as a testing/vaccination site and is designated by the County and State as an emergency evacuation shelter.

Performance Report Key Performance Indicators

The goal of the project is to assist this non-profit with the completion of a deferred maintenance project. Progress will be tracked through the completion of the roof replacement.

San Joaquin Health Centers

Funding Amount: \$3,000,000

<u>Project Expenditure Category</u>: EC 1.7 Other COVID-19 Public Health Expenses

(Including Communications, Enforcement, Isolation/Quarantine)

Project Overview

Many public health employees remain dedicated to responding to the COVID-19 public health emergency. The Board of Supervisors approved \$3.0 million of ARPA funding to reimburse County Clinics (San Joaquin Health Centers) for COVID related salary and benefit expenses through December 31, 2026. San Joaquin Health Centers primarily serve disproportionately impacted communities.

Use of Evidence

This project will be evaluated through program evaluations.

Track number of patients seen and track hours of public health employees administering care for COVID related issues.

University of the Pacific – Manor Hall Renovation for Veterans

Funding Amount: \$2,000,000

<u>Project Expenditure Category</u>: EC 2.34 Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)

Project Overview

The University of the Pacific (UOP) has incurred significant costs to ensure the safety of its campus, students, faculty, and staff during this unprecedented time. Veterans are one of the fastest growing student populations at UOP. Enrolled military and student veteran population has increased from 20 students in 2017 to 106 in 2022, with enrollment projected to increase to 300 in the next three years. To further meet the needs of military and student veterans, UOP will provide on-campus housing specifically for these students and their families. UOP has identified an under-utilized residential facility, Manor Hall, for renovation to create a military and student veteran housing community. The projected budget for the Manor Hall capital renovation is approximately \$4.6 million. UOP has begun fundraising for this project and has raised over \$2.0 million towards the goal. In May 2023, the Board of Supervisors approved obligating \$2.0 million of ARPA funds towards the completion of this project.

Performance Report Key Performance Indicators

The goal is to assist military and student veterans in locating affordable on-campus housing by creating a UOP Veteran Housing Community. Progress will be tracked through the completion of the project.

Registrar of Voters System Project

Funding Amount: \$3,600,000

Project Expenditure Category: EC 3.4: Public Sector Capacity: Effective Service Delivery

Project Overview

This project will ensure the County has the voting system that best meets the needs of all San Joaquin County voters. The Board of Supervisors obligated \$3.6 million in ARPA funding to purchase a new voting system or upgrade the current voting system. The main implementation phase of the project has been completed, with additional upgrades expected to be paid for and implemented by the end of the first quarter of fiscal year 2024-2025. The Registrar of Voters utilized an additional State grant to offset the County's use of ARPA funding and once all remaining expenditures are finalized, the department will be returning approximately \$2.2 million of these funds to be repurposed for other County needs.

Promoting Equitable Outcomes

Casting a ballot is a fundamental right that should be available to all communities. The Hart Intercivic voting system is very user-friendly, making it accessible to all registered voters. The upgrade to the voting system used by San Joaquin County has significantly enhanced the voting experience for individuals with language barriers. The system now has the capability to produce printed ballots in numerous languages, better serving the diverse residents of the County. With these capabilities, we can ensure equitable opportunities for every San Joaquin County resident, regardless of cultural or language barriers.

Voters with disabilities can also have the same voting experience as any other voter due to the system's user-friendly components which include ADA compliance and the ability to produce a paper ballot, even on ADA-specific devices. This ensures an equal experience for everyone based on their individual needs.

Community Engagement

With this purchase, San Joaquin County has been able to maintain using traditional polling places, serving voters right in their neighborhoods. This localized approach encourages voting within the community and engagement by community members to staff their polling locations. The County has successfully acquired the right system and the right amount of equipment to achieve the County's goals and engage its diverse community.

Use of Evidence

There are three vendors certified by the State of California for providing voting systems. All three submitted proposals through a Request for Proposal (RFP) process. Through the RFP process, Hart Intercivic was determined to be the best fit for the County.

Performance Report Key Performance Indicators

The Registrar of Voters purchased and implemented the system several months prior to the March 2024 Presidential Primary election to allow adequate time to fully test the system and ensure desired performance. Progress was tracked through phases such as the Logic and Accuracy test and the Ballot Build process, all while simultaneously using a task management system to ensure all components of the voting system were functioning properly.

Shop San Joaquin

Funding Amount: \$1,197,975

Project Expenditure Category: EC 2.35 Aid to Tourism, Travel, and Hospitality

Project Overview

The Rewards Program allows consumers to earn rewards when shopping at San Joaquin County small businesses. This initiative incentivizes local shopping and stimulates the economic recovery following the challenges faced by the retail and hospitality industries during the pandemic. By supporting small businesses and enabling consumers to earn cash back rewards, the program benefits both businesses and consumers. This program utilizes a mobile phone application, which is free to download on the App Store and Google Play. Consumer's purchases are 100% matched with a reward cap of \$50 per transaction and up to \$200 per consumer per year. This type of program has proven to be an effective way to stimulate the local economy by doubling consumer spending and providing much-needed relief to small businesses in San Joaquin County.

Promoting Equitable Outcomes

This program promotes equitable outcomes by ensuring that the economic benefits of increased consumer spending reach small businesses throughout San Joaquin County, including those in traditionally marginalized communities. By incentivizing local shopping, the program supports small business owners, many of whom are women, minorities, or from low-income backgrounds, thereby fostering economic equity. Challenges include ensuring widespread awareness and participation among all community segments, particularly those who may have limited access to digital tools or information. To address this, targeted outreach and support are provided to ensure the program reaches all eligible businesses and consumers.

Community Engagement

The program incorporates community engagement by various marketing strategies to ensure diverse feedback and participation. This includes using social influencers, business engagement, and press releases to reach a varied population. The program specifically targets engagement with communities that have historically faced significant barriers to economic opportunities, such as people of color, low-income individuals, and limited English proficient populations. These strategies support the County's equity goals by ensuring the program's benefits are accessible to all community members, thus promoting inclusive economic recovery.

Use of Evidence

The goal of the program is to assist small businesses in the County who were adversely affected by the pandemic. The program supports economic recovery and has proven to be successful in stimulating spending and encouraging consumers to spend in their local communities. A soft launch was conducted on June 28, 2024, with a full launch on July 3, 2024. Employment and Economic Development Department staff will diligently monitor program metrics, work closely with the BluDot vendor, and obtain quarterly reports for the program. To date, 1,625 businesses have been added to the app. Evidence-based strategies are utilized to track and evaluate the program's effectiveness, ensuring that interventions are grounded in data and best practices.

Performance Report Key Performance Indicators

Tracking the number of businesses benefiting from the program, the dollar amount of rewards earned at each business, the number of consumers participating, and the total rewards per consumer. These metrics will be regularly reviewed to assess the program's impact and to make data-driven decisions for ongoing improvements.

Stockton Takes Action Against Retail Theft Program

Funding Amount: \$1,317,400

Project Expenditure Category: EC 2.29 Loans or Grants to Mitigate Financial Hardship

Project Overview

The STAART (Stockton Takes Action Against Retail Theft) program is a retail theft initiative designed to tackle the serious epidemic currently affecting the business community, leading to substantial financial losses, wasted time, and diminished future revenue. Building upon existing initiatives to combat retail theft in San Joaquin County, the STAART program adopts a proactive approach to engage in activities and strategies aimed at effectively mitigating crime. This initiative will enhance the reporting of theft and other aggressions by impacted businesses and increase vigilance by businesses to prevent crime before it starts. Through the STAART initiative, the Stockton Chamber of Commerce (Chamber) will:

- Support the creation of a crowdsourced incident reporting app, *Fast* STAART, for instant reporting, designed to provide local law enforcement with immediate situational awareness. Business owners, employees and the public can use their mobile phones to report problems quickly and discreetly to authorities Countywide.
- Create and maintain a website with information about the program.
- Produce crime prevention videos and public service announcements (PSAs) to be shared on websites and social media platforms throughout the County.
- Coordinate Business Watch programs throughout the County in conjunction with local law enforcement agencies.

- Schedule presentations at service organizations and at each City's Council meetings throughout San Joaquin County.
- Continue partnership with the District Attorney's Office and local law enforcement agencies to hold educational workshops for employers, employees, and businesses throughout the County.
- Continue collaboration with relevant stakeholder representatives throughout the County and within the Chamber membership, creating a STAART Task Force that meets regularly for statistical updates and to share best practices and opportunities.
- Utilize the existing infrastructure of the Chamber to disseminate resources Countywide.
- Report monthly activities to the Chamber Board of Directors and other stakeholders, as requested.
- Administer a Security Camera Grant program to provide small business owners one-time grants to install camera systems in their places of business (maximum grant amount is \$2,000 per property).

Promoting Equitable Outcomes

The STAART program promotes equitable outcomes by targeting support to small businesses, many of which are owned by traditionally marginalized communities, including minorities and low-income individuals. By providing resources such as the incident reporting app and security camera grants, the program aims to level the playing field and enhance the safety and economic stability of these businesses. The program addresses constraints such as limited access to crime prevention tools and information by ensuring these resources are readily available to all business owners in the county.

Community Engagement

Community engagement is integral to the STAART program, incorporating strategies such as feedback through the incident reporting app, social media campaigns, crime prevention workshops, billboards placed throughout the county, and presentations at community organizations and City Council meetings. These efforts are designed to capture diverse feedback from the community, ensuring that the program meets the needs of all businesses, particularly those that have historically faced significant barriers to accessing support. Engaging with a wide range of stakeholders, including businesses owned by people of color and low-income individuals, supports the program's equity goals by promoting inclusive participation and benefit distribution.

Use of Evidence

The STAART program uses evidence-based interventions to ensure effective crime prevention and community support. The creation of the crowdsourced incident reporting app, crime prevention videos, billboard and social media campaigns, and educational workshops are grounded in proven strategies for reducing retail theft and enhancing community safety. EEDD staff will monitor program metrics, conducting monthly analyses for the Camera Grant program and providing quarterly reports for the STAART program. In addition, analytics will be tracked and posted on social media and other platforms. These evaluations will ensure that the program's strategies remain effective and are adjusted as necessary based on data and feedback.

Performance Report Key Performance Indicators

Tracking number of incidents reported through the Fast STAART app, and the number of businesses participating in the Security Camera grant program. Regular analysis and reporting of these indicators will allow the program to measure its impact, identify areas for improvement, and ensure that resources are effectively used to support the business community in San Joaquin County.







OCTOBER 2021





PREPARED BY BEACON ECONOMICS

Founded in 2007, Beacon Economics, an LLC and certified Small Business Enterprise with the state of California, is an independent research and consulting firm dedicated to delivering accurate, insightful, and objectively based economic analysis. Employing unique proprietary models, vast databases, and sophisticated data processing, the company's specialized practice areas include sustainable growth and development, real estate market analysis, economic forecasting, industry analysis, economic policy analysis, and economic impact studies. Beacon Economics equips its clients with the data and analysis required to understand the significance of on-the-ground realities and to make informed business and policy decisions.

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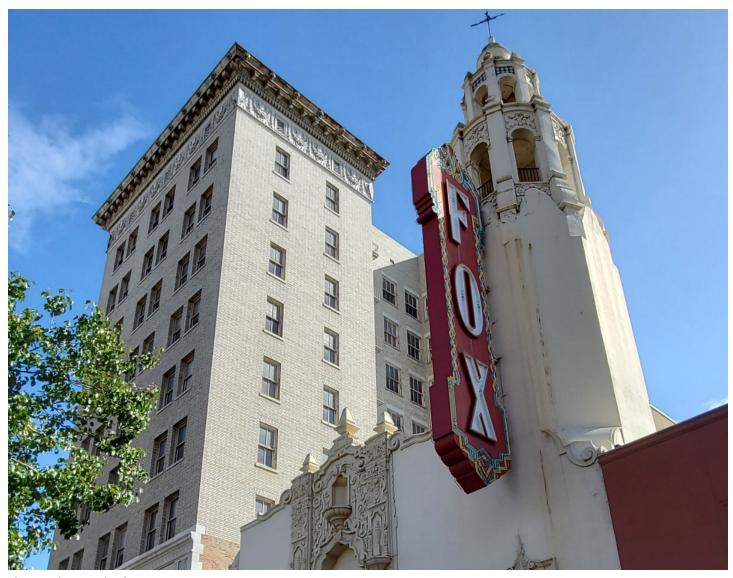


Photo Credit: Jay Wilverding

INTRODUCTION

On May 10 of 2021, the U.S. Department of the Treasury announced the disbursement of some \$65.1 Billion in state and local fiscal aid provided under Section 603 of the American Rescue Plan Act (ARPA)¹. That same month, the San Joaquin County Administrator's office contracted with Beacon Economics to deliver strategic advisory services to support county appropriation. A Beacon team worked between July and October to identify eligible uses of the money and to evaluate 'highest and best' uses. This document is the main output of Beacon's project with San Joaquin County. It begins with a short summary of legitimate uses for state and local funds under ARPA, continues with an overview of the recommended strategic framework and then discusses 4 types of fiscal aid that would maintain the spirit and letter of the law. The main objective here is to provide informed and independent advice, based on an analysis of relevant economic and health factors. County Administrators and Supervisors will ultimately determine how much to balance this and other sources of guidance (e.g., community input, state directives) as they make their final decisions.

FEDERAL GUIDANCE ON ARPA SPENDING

State, local, and Tribal spending under ARPA is expected to quickly reach the communities and sectors that have been hardest hit by the COVID-19 pandemic while also complying with Federal Law. The Treasury Department elaborated on permitted uses through a subsequent interim final rule², an executive order³ that lists approved uses and addresses common questions. Follow-up guidance came throughout the Summer, as the government updated its Frequently Asked Questions (FAQ) page⁴.

The Interim Final Rules specifies six broad forms⁵ of approved Covid-19 aid:

- 1. Public health responses to the pandemic
- 2. Aid to replace public sector revenue losses
- 3. Aid for workers, families and businesses who have been impacted by the pandemic
- 4. Premium pay for essential workers
- 5. Support to improve water and sewer infrastructure
- 6. Broadband Network Investments

Assistance that is explicitly not allowed includes: spending that lowers tax revenues or spending that reduces pension liabilities accrued prior to the pandemic. Additionally, "General Economic and Workforce Development" activities are not fundable. Therefore, any efforts to attract or retain businesses or improve the quality of the labor market must be focused on communities that have been negatively impacted during the pandemic.

While the Treasury Department provides explicit guidance on eligible recovery programs, it would not be able to anticipate and delineate all permitted uses. When direct guidance is unavailable, jurisdictions are asked to evaluate prospective programs based on whether they respond to a negative pandemic impact, and whether the program itself can be expected to address that impact⁶. Accordingly, tax reductions and economic development initiatives would fail the first test, and unproven public health measures the second, even if such measures were never singled out in government advisories

 $^{^{\}rm 2}$ Coronavirus State and Local Fiscal Recovery Funds Interim Final Rule

https://home.treasury.gov/system/files/136/FRF-Interim-Final-Rule.pdf

³ Primer on Interim Final Rules

https://www.americanactionforum.org/insight/interim-final-rules-a-primer/

⁴ Department of Treasury Coronavirus State and Local Recovery Funds FAQ, July 19, 2021

https://home.treasury.gov/system/files/136/SLFRPFAQ.pdf

⁵ Department of Treasury Coronavirus State and Local Recovery Funds, Quick Reference Guide https://home.treasury.gov/system/files/136/SLFRP-Quick-Reference-Guide-FINAL-508a.pdf

⁶ Interim Final Rule, P. 10



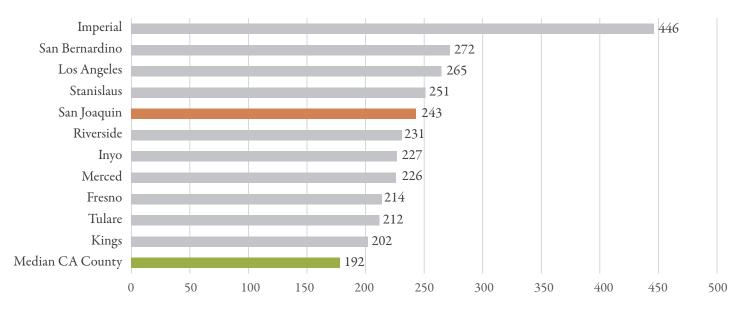
SAN JOAQUIN'S PANDEMIC

The COVID-19 pandemic has affected every US county somewhat differently, depending mainly on the toll of the virus itself, demographic factors, and the composition of the industrial base. San Joaquin County (SJC or The County hereafter) has been more directly affected by the disease than the average California county, and somewhat less affected by the economic fallout of the pandemic.

COVID-19 MORTALITY

San Joaquin's pandemic has been one of the worst in California in terms of total mortality. (Figure 1). 1,658 people have died of the disease as of October 5, the equivalent of 253 deaths per 100,000 people. Only four California counties: Imperial, San Bernardino, Los Angeles, and northern neighbor Stanislaus have had higher coronavirus death rates. San Joaquin County' death rate is 27% higher than in the median county in the state.

FIGURE 1: CALIFORNIA COUNTIES WITH THE HIGHEST COVID-19 MORTALITY RATES



COVID DEATHS PER 100K (AS OF OCTOBER 5TH)

The addition of coronavirus deaths has increased total mortality in the county. The local coronavirus death rate is comparable to deaths by heart disease and cancer, the two leading causes of death in 2019 (See Figure 2).

FIGURE 2: COMPARING CORONAVIRUS MORTALITY TO LEADING CAUSES OF DEATH IN SAN JOAQUIN COUNTY, 2019 $^{7}\,$

CAUSE OF DEATH	12 MONTHS	18 MONTHS	SHARE OF TOTAL
Heart Disease	1,188	1,188	20.9%
Cancer ("Malignant Neoplasms")	1,146	1,146	20.1%
Coronavirus	1,105	1,105	19.4%
Cerebrovascular diseases	424	424	7.4%
Accidents (unintentional injuries)	372	372	6.5%
Alzheimer's disease	269	269	4.7%
Chronic lower respiratory diseases	266	266	4.7%
Diabetes	170	170	3.0%
Chronic liver disease and cirrhosis	128	128	2.2%
Influenza and pneumonia	114	114	2.0%
Nephritis, nephrotic syndrome and nephrosis	107	107	1.9%
Suicide	82	82	1.4%
Essential hypertension and hypertensive renal disease	78	78	1.4%
Assault (homicide)	61	61	1.1%
Parkinson's disease	49	49	0.9%

Source: Centers for Disease Control, Compressed Mortality File; Analysis By Beacon Economics

While the 1,105 annualized COVID-19 deaths do not represent an increase in total mortality by quite that same amount (because some COVID deaths would have otherwise been deaths by other causes), nationwide estimates suggest that the pandemic was responsible for a 16% increase in total mortality⁸.

⁷ California Department of Public Health. Death Statistical Master File (Static), 1970-2013. Compiled by Center for Health Statistics and Informatics. https://data.chhs.ca.gov/dataset/death-profiles-by-county

⁸ Centers for Disease Control Provisional Mortality Data, United States 2020 https://www.cdc.gov/mmwr/volumes/70/wr/mm7014e1.htm

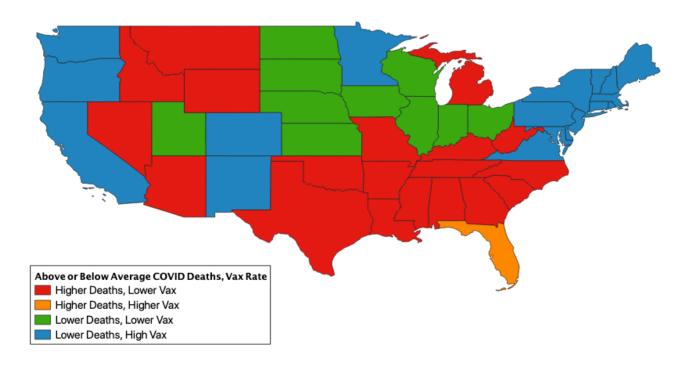
PANDEMIC OF THE UNVACCINATED

The nature of the pandemic changed in late 2020, with the emergency use approval of multiple coronavirus vaccinations that were shown to significantly reduce covid-mortality and transmission. Pfizer-BioNtech—the first approved vaccine—was linked to a 99.65% reduction in severe infection. With the rapid scaling up of the production of three effective vaccines: Pfizer, Moderna, and Janssen (marketed as Johnson and Johnson) during the Winter, the rest of the year has come to be known as the 'Pandemic of the Unvaccinated' because mortality and hospitalization have been heavily concentrated among this group.

Coinciding with a growth in vaccination was the rapid diffusion of the 'Delta' covid-19 variant, a mutation of the original virus that is more contagious than the original strain. By the end of the summer, genetic sequencing testing showed that it was more common than the original Covid strain. Delta reinforced the stark differences between the vaccinated and unvaccinated populations. While this strain is somewhat more resistant to vaccines than the original, the vaccine still works well, and severe outcomes are exceedingly rare. A State of Washington analysis shows that .5% of the vaccinated had breakthrough infections and 1% of breakthrough infections (.05% of all) ended in death¹⁰.

There is an obvious geographic aspect to the pandemic of the unvaccinated, with US states largely falling into two categories: more vaccinated than average with lower mortality rates or less vaccinated than average with higher rates. California is in the relatively better off blue category of Figure 3, because its average vaccination rates are higher and, relatedly, its mortality rate since April is lower.

FIGURE 3: MAPPING FOUR CATEGORIES OF STATE BASED ON AVERAGE VACCINATION AND COVID-19 MORTALITY SINCE APRIL 5TH

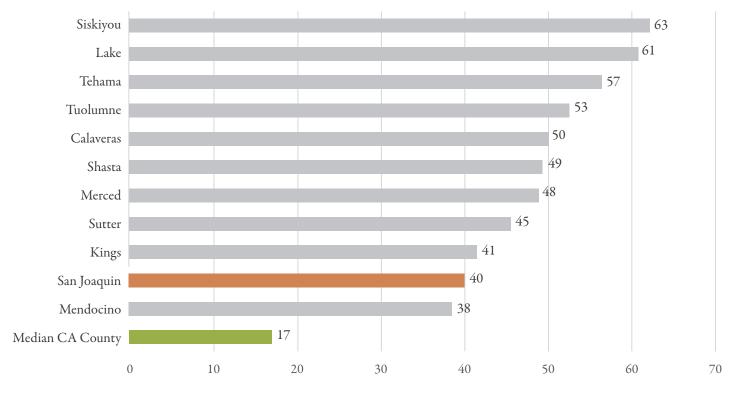


⁹ Pfizer BioNTech FAQ

https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/pfizer-biontech-covid-19-vaccine-frequently-asked-questions

10 Washington State Department of Health, SARS-CoV-2 Vaccine Breakthrough Surveillance and Case Information Resource
https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/data-tables/420-339-VaccineBreakthroughReport.pdf

FIGURE 4: CALIFORNIA COUNTIES WITH THE HIGHEST COVID-19 MORTALITY RATES SINCE APRIL 5TH, 2021



COVID DEATHS PER 100K APRIL 5 - OCTOBER 5

Source: New York Times COVID-19 Github, County File; Analysis By Beacon Economics

However, state averages mask key differences within states, and San Joaquin has, again, had among the worst mortality rates in the state since April 2020. 40 per 100,000 county residents have died during that span; a 135% greater COVID death rate than the median California county, putting San Joaquin County much closer to the national average of 46.8 deaths per 100,000.

San Joaquin's higher recent mortality rates are a likely byproduct of lower vaccine adoption. With only 50.6% of its total population vaccinated, the county ranks 28th out of 49, among counties with published vaccination data in California. The vaccination rate among seniors is relatively much higher. 86.7% of the people aged 65 and up have been vaccinated, good enough for 8th in the state and higher than the national average of 84%.



Beyond vaccination, numerous local factors can be implicated in San Joaquin's relatively negative COVID outcomes. Numerous county-level factors are associated with COVID-19 mortality, including the local age profile, population density, the number of uninsured and many more¹¹. When these are integrated into models of county-vulnerability, San Joaquin does appear to be relatively more exposed to the disease than the average county. Based on the Pandemic Vulnerability Index, a model and dashboard hosted at the National Institute of Environmental Health Sciences¹², San Joaquin County ranked in the top percentile of vulnerability (meaning SJC is one of the most vulnerable) among all counties in the country at the beginning of the crisis and ranks in the top 27th percentile today. Population mobility, air pollution and population density are among the factors that explain San Joaquin's pandemic vulnerability score. At a more general level however, the County's high employment in the 'essential' sectors of agriculture and logistics have led to much higher levels of mobility throughout the course of the pandemic.

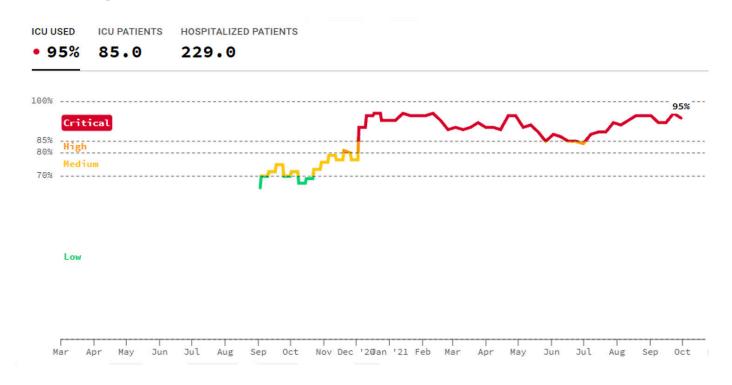
¹¹ Mclaughlin et al. (2021) County Level Predictors of Coronavirus Critical Infection Diseases https://academic.oup.com/cid/article/73/7/e1814/5992242#304674739

¹² Marvel et al. (2021) The COVID-10 Pandemic Vulnerability Index Dashboard Environmental Health Perspectives https://ehp.niehs.nih.gov/doi/pdf/10.1289/EHP8690

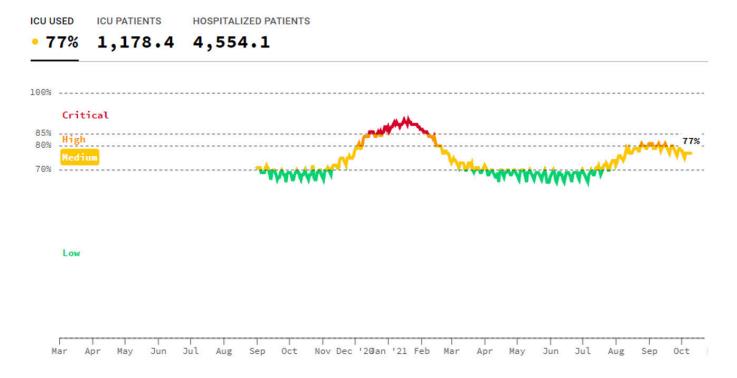
FIGURE 5: ICU UTILIZATION IN SAN JOAQUIN COUNTY AND CALIFORNIA

SEPTEMBER 2020 TO SEPTEMBER 2021

A) SAN JOAQUIN COUNTY HOSPITAL CAPACITY



B) STATEWIDE HOSPITAL CAPACITY



Source: Image from Covid Act Now, Data from Health and Human Services Department; Analysis by Beacon Economics

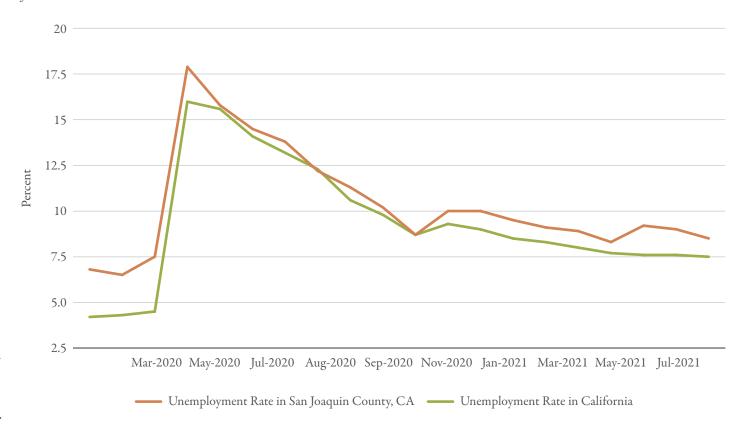
HOSPITAL UTILIZATION

Throughout the pandemic, public health authorities have emphasized the importance ensuring hospitals do not reach capacity amidst waves of Covid-19 infections. The "Flatten the Curve' campaigns at the beginning of the pandemic primarily sought to maintain the ability to fight the virus. San Joaquin's hospital utilization has been much higher than in the state at large: 95% of its ICU beds are currently used, and that number has not dropped below 84% for nearly an entire year, since a surge in hospitalizations in December of 2020. In California as a whole, only 77% of ICU beds are currently being used.

UNEMPLOYMENT

The San Joaquin County Economy shows fewer scars from the pandemic than its health system does. To be sure, San Joaquin did experience a spike in unemployment in March of 2020, when the unemployment rate increased from 7.5 to 17.5%. However, prior to the pandemic in January 2020, the country unemployment rate was 2.6 percentage points higher than the statewide average, but this gap fully disappeared at some points during the pandemic and is only 1 percentage point (Figure 6) today. Pandemic-related economic impacts were more acute in the state as a whole, but the local unemployment rate is only 1 point higher than in February of 2020.

FIGURE 6: UNEMPLOYMENT RATE IN SAN JOAQUIN COUNTY VS CALIFORNIA JANUARY 2020- SEPTEMBER 2021



Source: U.S. Bureau of Labor Statistics; Analysis By Beacon Economics

¹³ As of October 13, 2021

San Joaquin County's higher unemployment relative to the national average is significant. Nationally, the unemployment rate is only 5.2%, which is 63% less than in San Joaquin. Under a 'normal' downturn such a difference would mean that the county as a whole was relatively less well off, as more workers would be deprived of income. In the current environment, unemployed workers have/had access to additional supports including:

- Cash payments for individuals earning less than \$75,000, with additional payments for families¹⁴
- Supplemental federal unemployment insurance payments to top up state funds by \$600 per week (Federal Pandemic Unemployment Compensation)
- Access to unemployment assistance for self-employed workers (Pandemic Unemployment Assistance)¹⁵
- Federal student loan forgiveness
- Eviction moratoria for renters and home-owners, backed by \$46 billion in rental assistance 16

"The combined impact of these programs means that a relatively higher unemployment rate in an area is not equivalent to higher deprivation. Nationally, personal incomes have grown during the pandemic, based largely on the strength of such transfers (Figure 7), and the same basic pattern would be expected in San Joaquin. This strongly suggests that any effort to shore up personal income would be, at best, redundant with current federal programs. Figure 7 breaks down sources of personal income growth and decline through the pandemic, showing that unemployment insurance and government transfers have already greatly improved personal incomes.

FIGURE 7: PERSONAL INCOME CHANGE Q4 2019 - Q2 2021

	Q2-21	Q4-19 TO Q2-	Q4-19 TO Q2-21 CHANGE	
CATEGORY (\$BILLIONS, SAAR)	DIF.	%		
Personal Income Total	20,565	1916	10.3	
Compensation of Employees	12,301	694	6.0	
Current Transfer Receipts	4,329	1154	36.3	
Income Receipts on Assets	2,938	-44	-1.5	
Proprietors Income	1,838	211	13.0	
Rental Income	717	18	2.5	
Unemployment Insurance	481	454	1,692.9	

Source: Bureau of Labor Statistics; Analysis By Beacon Economics

 $^{^{\}rm 14}$ Department of Treasury, Assistance for American Families and Workers

https://home.treasury.gov/policy-issues/coronavirus/assistance-for-American-families-and-workers

¹⁵ Coronavirus State and Local Recovery Funds (2021), Interim Final Rule

https://www.federalregister.gov/documents/2021/05/17/2021-10283/coronavirus-state-and-local-fiscal-recovery-funds

¹⁶ Federal Emergency Rental Assistance Program

https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/emergency-rental-assistance-program

LOCAL INDUSTRY TRENDS

The nature and types of jobs available in San Joaquin have changed during the pandemic, as is evident from a "Shift Share Analysis" (SSA). An SSA is a local industrial model that seeks to identify the specifically local changes in employment by industry. Appendix 1 describes this model in full, but the logic works in the following way.

Imagine that there is a sector, Sector A, that lost 30% of its jobs during the pandemic in San Joaquin County. This job loss does not entirely reflect local changes because national job loss across all industries has been 1.5%. If job loss in that industry nationally was 15%, then only 13.5% of Sector A's changes can be considered San Joaquin specific (because 15% and 1.5% of the 30% were lost due to industry and national forces, respectively). This is referred to as the "Competitive Share" of local employment growth in Sector A. During unprecedented national events like pandemics, it is an essential barometer of how a region's local industrial structure is changing, and one that can potentially reveal pain points and areas of strength.

Figure 8 shows the local industries with the highest competitive share drop losses during 2020, the peak of the pandemic. For reference it also includes the total number of jobs lost locally in each sector. The largest losses were in the Social Assistance sector, especially its social welfare component. 1183 total jobs were lost in "Individual and Family Services", which includes counseling offices, adoption and foster care, and drug treatment centers. That the competitive share of these losses is so high, suggests that funding for these services was relatively less stable in the county. Merchant Wholesalers, especially in nondurable sectors, also saw competitive share job losses, with a combined 1622 job loss over 2020. The nation at large saw wholesale employment decline as overall demand and import activity declined¹⁷. Elsewhere, there were local declines, especially, in local face-to-face services (education and hospitality) and agricultural activities. The county's strong agricultural sector is its third highest employing major industry and is more exposed than most sectors to any general economic downturn.

FIGURE 8: SAN JOAQUIN COUNTY INDUSTRIES WITH THE HIGHEST COMPETITIVE SHARE JOB LOSS

INDUSTRY NAME	TOTAL DECLINE	COMPETITIVE SHARE DECLINE
Social Assistance	-1,628	-1,370
Merchant Wholesalers, Nondurable Goods	-1,689	-1,233
Crop Production	-369	-432
Educational Services	-577	-401
Merchant Wholesalers, Durable Goods	-577	-389
Agriculture & Forestry Support Activity	-368	-363
Amusement, Gambling & Recreation	-968	-294
Broadcasting (except Internet)	0	-262
Professional and Technical Services	-170	-257
Performing Arts and Spectator Sports	-153	-212

Source: Quarterly Census of Employment and Wages; Analysis By Beacon Economics

¹⁷ IBIS World Trade, Wholesale Trade in the US https://my.ibisworld.com/us/en/industry/42/industry-at-a-glance

Interestingly, competitive share gains in Warehousing and Storage and Administrative and Support Services, more than offset losses in Social Assistance and Wholesaling. Warehousing and Storage, along with Truck Transportation and Support Activities for Transportation can all be associated with logistics activity. Even before the pandemic, San Joaquin County had established itself as one of the top logistics centers in the country, trailing only Laredo, Texas in the share of workers devoted to Transportation and Warehousing¹⁸. Most growth in the industry was already driven by growing e-commerce demand in Northern California. The pandemic only accelerated those trends as many consumers retreated into their homes and embrace contact-free shopping. Because employment overall declined during the pandemic, growth in logistics during the period has meant that the San Joaquin economy has become ever more dependent on this sector for its economic development.

FIGURE 9: SAN JOAQUIN COUNTY INDUSTRIES WITH THE HIGHEST COMPETITIVE SHARE JOB INCREASES

INDUSTRY NAME	TOTAL DECLINE	COMPETITIVE SHARE DECLINE
Warehousing and Storage	5,617	2,869
Administrative and Support Services	1,259	2,074
Truck Transportation	832	1,168
Food Manufacturing	759	771
Food Services and Drinking Places	-2,779	695
Support Activities for Transportation	133	336
Transportation Equipment Manufacturing	171	329
Clothing/Clothing Accessories Stores	-421	326
Plastics & Rubber Products Manufacturing	214	260
Specialty Trade Contractors	-43	236

Source: Quarterly Census of Employment and Wages; Analysis By Beacon Economics

Elsewhere, San Joaquin managed to beat national trends in local services such as Food Services and Drinking Places and Clothing Stores. To be sure, county employment dropped in both of these sectors, but losses were considerably lower in San Joaquin than nationally. Three manufacturing sectors: Food, Transportation Equipment, and Plastics and Rubber, saw significant local employment gains in spite of national employment losses.

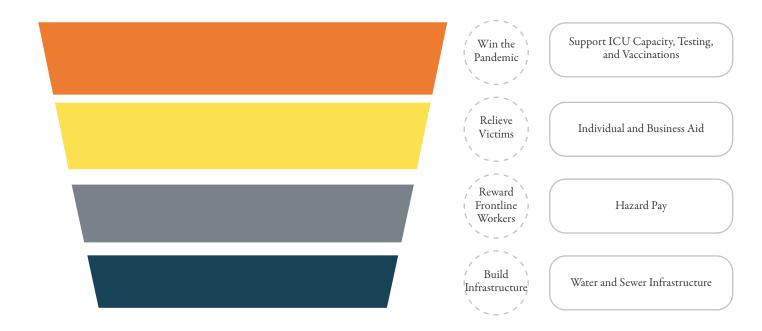
¹⁸ San Joaquin Council of Governments, "Warehousing, E-Commerce, and Evolving Trade Patterns in San Joaquin County" https://www.sjcog.org/DocumentCenter/View/4755/2019-The-Rise-of-Warehousing-and-E-Commerce-PDF-Document?

A FRAMEWORK FOR ARPA SPENDING DECISIONS

In apportioning its \$148 million in ARPA funds, San Joaquin seeks to direct aid to where it is most needed while complying with federal guidelines. Compliance is made much more straightforward by Treasury Department guidance, including the ARPA Interim Final Rule and various FAQs. However, because the economic and public health environment varies from place to place, so will the ideal spending strategy.

Based on the facts laid out in the previous section, Beacon Economics recommends that San Joaquin County adopt a tiered (i.e., triage-based) spending system that prioritizes public health spending that will lessen the direct effects of the pandemic (See Figure 10). As public health capacity allows, San Joaquin County should also consider, in successive order of priority: mitigating the current and future effects of COVID-19, direct relief to victims, compensation for frontline workers, infrastructure investments, and Workforce and Economic development.

FIGURE 10: PRIORITIZING SAN JOAQUIN'S ARPA AID



All levels of recommended support are broadly compliant with federal guidelines. However, we believe that the tiered system described here best reflects the spirit of the American Rescue Plan Act, which is to direct funds to people and systems that have been most affected by the pandemic.

Sensitivity to the law's spirit is important for at least two reasons. First, fiscal spending decisions can be fiercely contested by very different stakeholders, each with their own priorities, planning horizons and constituencies. The 'intent' standard is a neutral and recognizable benchmark, that is more likely to be accepted as legitimate across San Joaquin County. Second, future aid from the federal and state government is unlikely to fully replicate ARPA—for instance negotiations on a federal infrastructure package are still underway—so the present funds likely represent the best opportunity to subsidize pandemic-related costs.

The remainder of this section describes each category of aid listed in Figure 10, including its rationale and qualifying initiatives.

WIN THE PANDEMIC

The County should primarily use funds to lower disease transmission and to improve expected outcomes for the infected. As has already been established, San Joaquin County has had one of the highest COVID-19 mortality rates in the state and, due to its economic structure and demographics, it is still more vulnerable than 73% of other counties in the country. Vaccines are the most effective weapon in any county's Covid-19 arsenal, and they have only been adopted by 50% of all residents. To win the pandemic, San Joaquin County should subsidize testing, incentivize vaccinations, and shore up any gaps in medical infrastructure.

SUBSIDIZE AND DISTRIBUTE COVID-19 TESTS

Testing support is a simple and uncontroversial measure with significant impact. Widespread testing stems disease transmission by informing the infected that they are a risk to their families and communities and providing early warning to public health systems about outbreaks. Testing can also be a key part of ensuring that establishments can reopen and stay open, even in the face of community transmission.

It appears over-the-counter cost is currently a barrier to testing in the United States. Hospital testing tends to cost between \$50 and \$200 dollars¹⁹, and the suggested retail price of the popular Abbott test is \$12 per test. However, survey data suggests that these levels are still too high for many people. A recent survey finds that 79% of respondents would test regularly at a \$1 a test price point, and only 33% would do so at \$25²⁰.

San Joaquin County can eliminate the price gap by purchasing tests and delivering them to places of need. The Food and Drug Administration has issued guidance to explain the differences among tests. Specific purchasing decisions should depend on the setting and the level of known transmission. Medical facilities, nursing homes and known sites of infection should be provided with relatively more accurate but less rapid tests. Worksites, schools, and event spaces should be given access to rapid tests. In order to boost testing among hard-to-reach populations, The County might consider running testing drives. For example, Skagit County, Washington used ARPA money to purchase a van to conduct community testing.

An investment in testing would carry very high public health returns. Even at the retail price, The County would be able to buy 83,000 rapid tests for \$1 million. Beyond purchasing tests and the warehouse space to accommodate them, San Joaquin County will need to commit resources to distribution and testing literacy for site managers. Recent reporting suggests supply shortages in rapid tests²¹, so The County will need to invest in procurement expertise to navigate these challenges.

¹⁹ Kaiser Family Foundation, COVID-19 Test Prices and Payment Policy https://www.healthsystemtracker.org/brief/covid-19-test-prices-and-payment-policy/

²⁰ COVID Collaborative, Americans' Views on At-Home Rapid Testing

https://www.covidcollaborative.us/content/public-health-social-measures/americans-views-on-at-home-rapid-testing

²¹ Kaiser Health News, Why At-Home Rapid COVID Tests Cost So Much Even After Biden's Push for Lower Prices



INCENTIVIZE VACCINATION

A successful vaccination campaign would likely do the most to lower community transmission. Fortunately, there are now strong indications that such a campaign can be based mostly, or entirely around 'carrots' like incentives and inducements as opposed to mandates or other 'sticks'.

State vaccine lotteries such as California's "Vax for the Win" program have been around since the Spring, and these appear to have had success at motivating the hesitant. A study of Ohio's "Vax-A Millions" program, which entered the vaccinated into a \$ 1 million lottery was found to increase the percent vaccinated by nearly 1 percentage point and carried a cost of \$49 per vaccinated worker²². Recent evidence suggests that direct payments for vaccinations might work better than draws. A Swedish study shows that modest payments of \$24 were enough to boost vaccination by 5 points²³.

The County of San Joaquin should seriously consider cash incentives for the unvaccinated and should entertain lotteries if incentives are unfeasible. In administering the program, The County, will need to be willing to increase incentives amounts as more residents become vaccinated because longer holdouts should be expected to be less sensitive to each dollar of incentive.

EXPAND HOSPITAL CAPACITY

San Joaquin continues to experience strained ICU capacity many months after the Winter surge in community transmission. This is primarily a concern as the county seeks to overcome the pandemic, but it also suggests a vulnerability for future public health emergencies. Therefore, officials should explore cost-effective ways to expand medical capacity.

Exactly how to expand capacity 'on the fly' during the pandemic, is the subject of a 2020 Imperial College Report²⁴, which recommends 18 initiatives: including converting general and acute hospital beds to critical care beds, sourcing medical equipment from areas with surpluses, upskilling staff to work in ICUs, and more. The County of San Joaquin should consult with medical center leadership on these and other forms of support.

²² Neil Sehgal (2021), Impact of Vax-a-Million Lottery on COVID-19 Vaccination Rates in Ohio, American Journal of Medicine https://www.sciencedirect.com/science/article/pii/S0002934321004666

²³ Campos Mercade et al. (2021, Monetary Incentives Increase COVID-19 Vaccinations, Science https://www.science.org/doi/10.1126/science.abm0475

²⁴ Ĉristen et al. (2020) Štrengthening Hospital Capacity for the COVID-19 Pandemic, Imperial College London https://spiral.imperial.ac.uk/bitstream/10044/1/78033/6/2020-04-17-COVID19-Report-15.pdf

RELIEVE VICTIMS

If it is satisfied that it has made the necessary investments in disease mitigation, the County of San Joaquin should investigate ways to relieve those who were directly affected by the pandemic. There are two significant forms of aid: aid to families who have incurred lost income and extra costs and aid to firms who were disadvantaged by the economic fallout of the pandemic.

The County should seek out aid opportunities that are fair, effective, and not-redundant with federal and state programs. It should avoid programs that require excessive monitoring and compliance costs. Finally, it should seek as much as possible to minimize access costs to aid. When aid is contingent on knowing about county programs, and knowing how to interface with state agencies, then it tends to be less accessible to recipients who need it most.

AID TO FAMILIES

In lieu of providing employment insurance or "general" cash transfer payments, The County should consider ways to reimburse families for excess expenses during the pandemic. Utility Bill reimbursement is especially promising because:

- 1. Families tended to spend more on utilities, especially broadband connectivity, during the pandemic as they shifted to online communication and schooling.
- 2. Utilities provision is so concentrated in San Joaquin County that coordination costs to administering a reimbursement program would be relatively low, and rebates could be issued to all eligible families, not just those who apply.
- 3. Utilities rebates can take the form of future subsidies.

Rebates for childcare and eldercare services are justifiable in the event that the County can successfully identify families who used additional childcare services.

Finally, aid to families can take the indirect form of subsidies for social services offices. Per Figure 8, the county suffered uniquely highly social services job losses during 2020. This impacted families directly by lowering the amount of available social services, including healthcare and childcare. Payroll subsidies for these establishments would help to ensure that they can get closer to their prior employment levels, supporting family service workers and their clients. The priority of any such program should be "Individual and Family Services" offices, which saw the steepest absolute declines. Per the federal classification system, this category includes:

...establishments primarily engaged in providing one or more of a wide variety of individual and family social, counseling, welfare, or referral services, including refugee, disaster, and temporary relief services. This industry includes offices of specialists providing counseling, referral, and other social services.

Figure 11 shows the relative employment declines of each office. Crucially, medical services offices have seen employment losses even in the midst of a public health emergency.

FIGURE 11: SOCIAL ASSISTANCE EMPLOYMENT CHANGES IN SAN JOAQUIN COUNTY 2020

FAMILY SERVICE TYPE	EMPLOYMENT CHANGE	PERCENT
Individual and family services	-1183	-12.9
Vocational rehabilitation services	-233	-35.7
Offices of other health practitioners	-228	-16.4
Nursing care facilities, skilled nursing	-226	-6.6
Child day care services	-206	-21.4
Offices of dentists	-146	-7.3
Offices of physicians	-95	-2.8
General medical and surgical hospitals	-88	-1.7

Source: From Chen et al., 2021; Analysis By Beacon Economics

AID TO BUSINESSES

When San Joaquin County Officials initially approached Beacon Economics for this study, they indicated a specific interest in understanding how to target business supports. Using business data provided by the county, the Beacon team has identified a list of eligible businesses, based on industry identifiers. Appendix 1 describes the methodology in detail. The list of firms itself will be provided to leadership in database form.

At a high level, it is worth noting that San Joaquin's businesses have experienced many different types of pandemics. Logistics and related firms have been presented with new economic opportunities, while local service providers struggled to make ends meet as more of their clients stayed home. 12,141 SJC firms are from industries that suffered employment loss, and the Beacon methodology highlights firms among these from industries that were not already suffering prior to the pandemic and can be judged to be uniquely affected by it.

In building the list, Beacon further subsets firms that are from 'export-oriented' industries, that is industries that serve markets outside of San Joaquin County. Beacon recommends that San Joaquin prioritize these firms in funding decisions because locally-serving firms have somewhat captive markets, so that the firms that happened to survive the pandemic should be expected to 'cannibalize' the markets of firms that stopped operations. It is important to note that cannibalization is also possible in the "Individual and Family Services" aid proposed above, and so aid in that case should be entirely contingent on hiring.

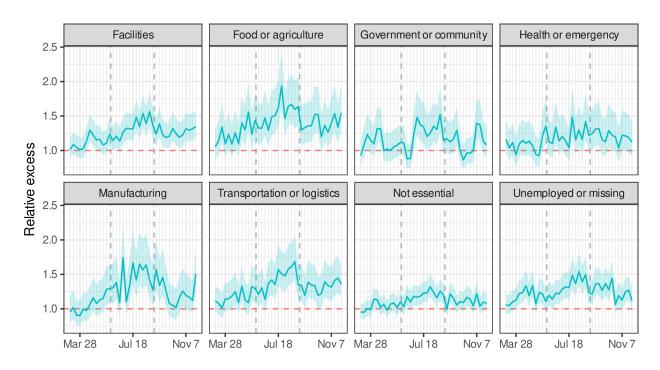
Beacon finally selects firms from disadvantaged communities, either those that are minority-owned or those in zip codes designated as 'Difficult Development Areas' by the federal government. A guiding assumption of ARPA regulations that surfaces in the legislation and supporting documents is that traditionally deprived populations will tend to be more exposed to the pandemic. Ultimately, The County itself will have to determine how much priority, if any, to give to these firms.

In deciding the form of aid for businesses, The County should again prioritize forms of aid that combine maximum impact with minimal monitoring and administration costs. If The County decides to subsidize utility fees for families, it can extend the same relief to firms. Business license and business permit fees can be refunded as well for the present year and for prior years. Counties elsewhere have directed ARPA money toward small business support services. SJC should ensure that it has the human resources to provide these supports if it elects to go in this direction.

REWARD FRONTLINE WORKERS

If San Joaquin County officials can be satisfied that they have exhausted appropriate forms of family and business aid, they should consider premium pay to reward frontline workers. San Joaquin County's relatively high COVID-19 morbidity partly reflects its higher participation in 'essential' sectors like food production and logistics. A peer-reviewed study published in Plos1 shows that Transportation and Warehousing workers experienced 25% higher mortality during most of the pandemic and that Food and Agriculture workers faced excess mortality closer to 50%. Average mortality in these sectors was even higher, based on this study, than in healthcare.

FIGURE 12: EXCESS MORTALITY ASSOCIATED WITH THE COVID-19 PANDEMIC AMONG CALIFORNIANS 18–65 YEARS OF AGE, BY OCCUPATIONAL SECTOR AND OCCUPATION MARCH THROUGH NOVEMBER 2020"



Source: Chen, Y. H., Glymour, M., Riley, A., Balmes, J., Duchowny, K., Harrison, R., ... & Bibbins-Domingo, K. (2021). Excess mortality associated with the COVID-19 pandemic among Californians 18–65 years of age, by occupational sector and occupation: March through November 2020. Plos one, 16(6), e0252454.; Analysis By Beacon Economics

Elsewhere in California, San Diego County set aside \$36 Million of its \$648 Million in funding (5%) on hazard pay. Per Title 31 of the authorizing act, premium pay is defined as an amount up to

...an amount of up to \$13 per hour that is paid to an eligible worker, in addition to wages or remuneration the eligible worker otherwise receives, for all work performed by the eligible worker during the COVID-19 public health emergency. Such amount may not exceed \$25,000 with respect to any single eligible worker.

And eligible workers are those performing essential work, which is work that is not provided from a residence and involves.

- (i) Regular in-person interactions
 - (i) Regular in-person interactions with patients, the public, or coworkers of the individual that is performing the work
 - (ii) Regular physical handling of items that were handled by, or are to be handled by patients, the public, or coworkers of the individual that is performing the work.

Based on these guidelines, workers in any of the industry sectors listed in Figure 11, except Government or Community are broadly eligible for hazard pay. Meaningful hazard pay for a large group of workers is technically possible, depending on the county's outlay. For instance, there are 23,764 Warehousing and Storage workers in the county based on recent data. For less than \$25 million dollars, the county would be able to give each of them \$1,000 in hazard pay, and still have 85% of its budget left over. If the County is to pursue such a program, it would have to target frontline employees among those who work in frontline industries. For instance, not all Warehouse Industry employees directly work in warehouses.

As Figure 11 suggests, unemployed workers have been relatively less exposed to pandemic mortality, even though there is plenty of economic rationale for providing them aid. If The County pursues hazard pay, the primary justification would not be economic, it would be a recognition that frontline workers have sacrificed personal safety to keep the economy running during the pandemic.

BUILD INFRASTRUCTURE

ARPA carves out permission for counties to spend funds on very specific infrastructure improvements, including broadband internet upgrades, water, and sewer system investments, and select other uses. In each case, the legislation provides some justification for how specified investments are related to the pandemic. Still, the Beacon team recommends that the last two funding types only be considered if viable economic or moral responses to the pandemic described above are no longer available.

Under ARPA, broadband investments are expected to improve broadband speeds to meet or exceed 100 Mbps 'symmetrical' upload and download speeds. San Joaquin County mostly already exceeds this benchmark. According to current county-based FCC statistics²⁵ some 3 internet service providers offer speeds at or above this standard, and these represent 91.7% of all customers. The remaining customers do not appear to subscribe to slow speeds because they lack choice. However, if County officials are aware of certain gaps in high speed broadband access, then they would have the opportunity to use ARPA funds to address these.

A more promising infrastructure target might be water and sewer infrastructure under the Clean Water State Revolving Fund (CWSRF) or the Drinking Water State Revolving Fund (DWSRVF). These are pre-existing federal funding schemes for water system expansion with their own rules and processes. They are involved in the expansion of municipal wastewater facilities, estuary protections, replacing storage tanks and more. The County may have outstanding water infrastructure needs that ARPA funds can help address. Relatedly, SJC can devote ARPA money to lead pipe and lead paint remediation.

²⁵ Area Summary, San Joaquin County, Federal Communications Commission https://broadbandmap.fcc.go

APPENDIX 1: IDENTIFYING FIRMS FOR DIRECT ASSISTANCE

When compiling a list of companies to provide relief to, one of the most important considerations is ensuring that aid is, as much as possible, being sent to companies that need it and not simply lining the pockets of those that do not. Without access to individual companies' financials, the best way to approach this task is to study the trends in the various industries in San Joaquin. This analysis provides an understanding of the effects that COVID-19 had on every industry in the area, showing which industries grew during the pandemic and which suffered. If the industry as a whole saw a downturn during the pandemic, it follows that the firms that make up this industry must also have suffered²⁶. There are countless factors and analyses that could be done to show which firms should be helped, as there were 12,141 companies²⁷ in San Joaquin alone from industries that experienced employment loss in 2020, but below are the most promising ones along with their results.

COMPETITIVE SHARE ANALYSIS

There were undoubtedly many firms that encountered hardship during the pandemic, but this does not necessarily mean that their travails were because of the pandemic. Even in the best economic environment, some firms will face difficulties because of firm-specific difficulties, and others will be part of industries that are facing sector-wide challenges. This competitive share analysis seeks to sort the latter industries from those that were hurt solely by pandemic.

To exclude already suffering industries, the data is subset in the following way:

Competitive Growth Industries =
$$\frac{1}{n} \sum_{i=1}^{n} Competitive Share_i > 0$$

Where j is 2017Q1 through 2019Q4, inclusive

COVID Competitive Downturn Industries
$$=\frac{1}{k}\sum_{j=1}^{k}$$
 Competitive Share $_{j}<0$

where j is 2020Q1 through 2020Q4, inclusive

Comp = Competitive Growth Industries \(\cap \) COVID Competitive Downturn Industries

²⁶ While it is possible that a firm saw profits while its own industry experienced hardship, the number of firms for whom this is true must be small, otherwise the industry trend would be positive. Furthermore, the 3-digit NAICS code provides enough specificity that this problem is minimized.

²⁷ See Excel Appendix Spreadsheet Figure 1 for Company List

The first equation defines Competitive Growth Industries as the industries in which the arithmetic mean of the competitive share for the period is greater than 0. In other words, these are industries in San Joaquin that were more competitive due to the unique factors of San Joaquin (i.e., industries that San Joaquin had a competitive advantage) during the period. In Development Economics, these are industries that San Joaquin specializes in and should be focused on to maintain and improve this advantage.

The second equation defines COVID Competitive Downturn Industries as those that had an average less than 0 during 2020, meaning that they became less competitive during COVID. This leads to the third equation, which keeps only industries that had a competitive advantage before COVID but lost this advantage during the pandemic.

These are industries that, prior to the pandemic, represented the some of the most important sectors in the San Joaquin economy.

INDUSTRY NAME	NAICS	PRE-PANDEMIC COMPETITIVE SHARE AVERAGE	PANDEMIC COMPETITIVE SHARE AVERAGE
Social Assistance	624	50.71168366	-342.545828
Merchant Wholesalers, Durable Goods	423	44.53900749	-97.16050378
Merchant Wholesalers, Nondurable Goods	424	28.88185096	-308.3246239
Heavy and Civil Engineering Construction	237	26.33037877	-22.13085732
Repair and Maintenance	811	10.16875486	-20.27332836
Performing Arts and Spectator Sports	711	7.419120446	-53.05664618
General Merchandise Stores	452	4.476261505	-42.3294807
Electronics and Appliance Stores	443	4.430811437	-3.77553843
Personal and Laundry Services	812	3.52529335	-25.09025086
Primary Metal Manufacturing	331	2.806282883	-2.41075772
Credit Intermediation & Related Activity	522	2.269007551	-50.53817844
Textile Product Mills	314	1.769606865	-0.768389396
Motor Vehicle and Parts Dealers	441	1.538316161	-50.49603275

While this is only 13 industries, these 13 industries are comprised of 4,978²⁸ companies in San Joaquin, so providing meaning assistance to each of the companies may be cost-prohibitive. For example, if the San Joaquin government had \$30 million dollars to send to suffering industries, which means each company on this list would only get around \$6,000. Therefore, it would be useful to find different ways to either subset the data further or consider other criteria to base assistance on.

²⁸ See Excel Appendix Spreadsheet Figure 2 for Company List

Export-Oriented industries are those that mainly send goods and services outside of their immediate area and their supporting industries. At the NAICS 3-level, these industries are the following:

PRIMARILY EXPORT-ORIENTED INDUSTRIES			
Agriculture & Forestry Support Activity	Merchant Wholesalers, Nondurable Goods		
Apparel Manufacturing	Primary Metal Manufacturing		
Beverage & Tobacco Product Manufacturing	Rail Transportation		
Chemical Manufacturing	Support Activities for Mining		
Computer and Electronic Product Manufacturing	Support Activities for Transportation		
Crop Production	Textile Mills		
Fabricated Metal Product Manufacturing	Textile Product Mills		
Food Manufacturing	Transportation Equipment Manufacturing		
Forestry and Logging	Truck Transportation		
Furniture and Related Product Manufacturing	Warehousing and Storage		
Leather and Allied Product Manufacturing	Water Transportation		
Machinery Manufacturing	Wood Product Manufacturing		
Merchant Wholesalers, Durable Goods	-		

Export-oriented industries are an area of the economy that San Joaquin could gain a true competitive advantage over its surrounding areas. In the two years prior to the pandemic, San Joaquin County was, on average, gaining competitive shares in:

		PRE-PANDEMIC	PANDEMIC
INDUSTRY NAME	NAICS	COMPETITIVE SHARE	COMPETITIVE SHARE
INDUSTRI NAME	NAICS	COMPETITIVE SHARE	COMPETITIVE SHARE
Merchant Wholesalers, Durable Goods	423	44.53901	-97.1605
Merchant Wholesalers, Nondurable Goods	424	28.88185	-308.325
Transportation Equipment Manufacturing	336	18.39211	82.25871
Machinery Manufacturing	333	18.04904	4.311688
Wood Product Manufacturing	321	13.35992	17.6286
Paper Manufacturing	322	8.756339	16.04629
Fabricated Metal Product Manufacturing	332	7.107608	14.94205
Chemical Manufacturing	325	6.587757	10.22375
Primary Metal Manufacturing	331	2.806283	-2.41076
Beverage & Tobacco Product Manufacturing	312	2.088322	13.33738
Textile Product Mills	314	1.769607	-0.76839

However, Merchant Wholesalers, Durable Goods, Merchant Wholesalers, Nondurable Goods, Primary Metal Manufacturing, and Textile Product Mills are COVID Competitive Downturn Industries as well. Overall, there are 3,989 companies²⁹ in primarily exportindustries. The four Comp export industries are made up of 1,168 companies³⁰.

 $^{^{29}}$ See Excel Appendix Spreadsheet Figure 3 for Company List 30 See Excel Appendix Spreadsheet Figure 4 for Company List

DIFFICULT DEVELOPMENT AREAS

Through this study, several areas in San Joaquin County have been identified as "difficult development areas", or areas with high land, construction, and utility costs relative to the area median income. These areas are the represented by the zip codes: 95219, 95304, 95376, 95377, 95212, 95220, 95320, 95330, 95391, 95632. Inside of these areas, there are 8,295 companies³¹. Of these companies, 1,19332 are in primarily export industries, and 30433 are both in export industries and Comp industries.

MINORITY-OWNED BUSINESSES

During the pandemic, many businesses experienced at least a temporary loss in revenue. However, according to a survey by the Federal Reserve, minority-owned business disproportionately suffered,³⁴ as minority-owned businesses reported more frequent losses in revenue and greater difficulty in obtaining financial assistance, such as PPP. Because of this reality, it is important to consider providing aid to minority-owned firms. In San Joaquin County, only 407 firms³⁵ are owned by a person or persons of color. Of these 407, 154³⁶were in Comp industries, and 81 minority-owned companies³⁷ were in export industries. There are also 72 minority-owned companies in DDAs38

ON THE ADVICE OF SAN JOAQUIN COUNTY ADMINISTRATORS, ADDITIONAL CRITERIA WERE USED TO EXCLUDE NATIONAL FIRMS, LARGE FIRMS AND PUBLIC SCHOOLS

1. Not a "chain" business

- a. Top chain restaurants were omitted from the list, using 2 public datasets
 - i. List of 10,000 restaurant chains from a Datafiniti public dataset³⁹
 - ii. List of top 250 restaurant chains in the US from Foodservice Database Company dataset (available publicly)⁴⁰
- b. Top retail chains were omitted from the list using a public dataset
 - i. List of top 100 retailers compiled by the National Retail Federation⁴¹
 - c. Other chain businesses in San Joaquin County
 - i. Any business with more than one location within San Joaquin County was also considered a "chain" business and thus omitted especially because it is very possible that there are other big firms that are not captured by the previously used datasets

2. Is a "small" employer

- a. California "Minimum Wage" Laws define any employer a "large" employer if they have 26 or more employees. 42
 - i. Any business with 26 or more employees were also dropped from the list

3. Public Schools and Districts

- a. Public schools and districts were also dropped using a public dataset
 - i. List of all public schools and districts in CA from the California Department of Education⁴³

³¹ See Excel Appendix Spreadsheet Figure 5 for Company List

³² See Excel Appendix Spreadsheet Figure 6 for Company List

³³ See Excel Appendix Spreadsheet Figure 7 for Company List

³⁴ Minority-led small businesses surveyed were hit hardest by the pandemic. Jeanne Sahadi. 16 April 2021. CNN. Retrieved from: https://www.cnn.com/2021/04/16/success/ minority-owned-small-businesses-pandemic/index.html

³⁵ See Excel Appendix Spreadsheet Figure 8 for Company List

³⁶ See Excel Appendix Spreadsheet Figure 9 for Company List

³⁷ See Excel Appendix Spreadsheet Figure 10 for Company List

³⁸ See Excel Appendix Spreadsheet Figure 11 for Company List

³⁹ https://www.kaggle.com/datafiniti/fast-food-restaurants/version/3

⁴⁰ https://www.fsdbco.com/top-250-restaurant-chains-us-2019/

⁴¹ https://nrf.com/resources/top-retailers/top-100-retailers/top-100-retailers-2021-list

⁴² https://www.dir.ca.gov/dlse/faq_minimumwage.htm

⁴³ https://www.cde.ca.gov/ds/si/ds/pubschls.asp





April 2023

First 5 San Joaquin

SJ TEETH
Evaluation Report
2021-2022



Executive Summary

Tooth decay is the most common—and preventable—chronic disease among young children, with children of color most likely to experience tooth decay and most likely to have untreated tooth decay. Despite the high need, many children experience barriers to regularly accessing preventive dental care.

In Fiscal Year (FY) 2021-2022, First 5 San Joaquin (F5SJ) invested in the San Joaquin Treatment + Education for Everyone on Teeth + Health (SJ TEETH) program, which seeks to improve oral health outcomes for children in San Joaquin County. SJ TEETH is funded by the San Joaquin County Board of Supervisors with American Rescue Plan Act (ARPA) and County contingency funding, and revives an earlier version of the program implemented from 2017-2020. Five organizations provide culturally responsive dental care coordination and education for children up to age 18 and their parents/caregivers who are insured by Medi-Cal.

The SJ TEETH program provided services to 811 people in FY 2021-2022 who were racially and linguistically diverse and who resided in communities historically facing barriers to health. This successful reach was a result of the SJ TEETH agencies' use of accessible outreach strategies including leveraging local partners and existing programs, participating in community events, and presenting on SJ TEETH in schools. Once enrolled, SJ TEETH care coordinators used strategies such as making dental office recommendations, scheduling appointments, and providing oral health education to help families arrange and keep their dental appointments. As a result, 53 percent of program participants received dental services. Among 253 parents/caregivers who were surveyed about their child's dental services, 97 percent were satisfied with the care their child received.

Key recommendations from this evaluation are summarized in the table below.

Recommendations for F5SJ

- Identify strategies to reach more African American families in San Joaquin County.
- Expand efforts to reach more parents of children ages 0-5.
- Consider opportunities to expand services to additional priority populations.
- Support care coordinators to make connections with key partner organizations (including other SJ TEETH organizations).
- Collaborate with Harder+Company and SJ TEETH agencies to improve data quality and completeness.





Background

Tooth decay is the most common—and preventable—chronic disease among young children. By third grade, 61 percent of students in California have experienced tooth decay and 22 percent have untreated tooth decay. Children of color are disproportionately impacted by tooth decay. Latinx students have the highest prevalence of tooth decay, followed by Black/African American, Asian, and white students.¹ Despite the high need, many children do not access preventive dental care. In 2019, less than half (42 percent) of Medi-Cal beneficiaries ages 0-20 in San Joaquin County accessed preventive dental services. After the start of the COVID-19 pandemic in 2020, access declined to 34 percent.²

In response to these oral health disparities, First 5 San Joaquin (F5SJ) invested in the San Joaquin Treatment + Education for Everyone on Teeth + Health (SJ TEETH) program. Through culturally responsive dental care coordination, children up to age 18 who are insured by Medi-Cal receive support for dental health needs. Fiscal Year (FY) 2021-2022 was the first year that parents/caregivers were also eligible to receive care coordination. Care coordination includes providing education on how to minimize tooth decay; finding dentists that meet a family's needs; scheduling dental visits; helping families identify the resources to get to their appointments; and preparing families for a successful dental visit.

SJ TEETH is funded by the San Joaquin County Board of Supervisors as part of the American Rescue Plan Act (ARPA), which provided federal funding in response to the COVID-19 pandemic's economic and community impacts.³ In addition, \$550,000 in County contingency funds were allocated to SJ TEETH to support its five care coordination agencies: APSARA, Catholic Charities, Family Resource Network, Family Resource Center and El Concilio. Together, these sources fund SJ TEETH through the end of FY 2023-2024. The current SJ TEETH program builds on an earlier version that was implemented from 2017-2020 as part of the Department of Health Care Services (DHCS) Dental Transformation Initiative.⁴

This evaluation report documents both implementation of the SJ TEETH program during FY 2021-2022, as well as early insights into its contributions to improving oral health. The report focuses on the following evaluation questions:

- Who is being served by the SJ TEETH program?
- What strategies did care coordinators use to maximize outreach and connect families to dental care?
- Has SJ TEETH contributed to increased utilization of dental services?
- What are the experiences of participants who receive dental care?

Findings were informed by an analysis of the SJ TEETH care coordination database, a parent survey about dental visit experiences, a focus group with SJ TEETH care coordinators, and secondary data sources. For a full description of evaluation methods, please refer to the Technical Appendix.

SJ TEETH At-A-Glance

Goal: Improve oral health outcomes for children and their parents/caregivers in San Joaquin County by providing dental service care coordination and oral health education.

Target population: Children ages 0 to 18 and their parents/caregivers who are insured by Medi-Cal

Agencies: SJ TEETH is implemented by five agencies:

- Asian Pacific Self-Development and Residential Association (APSARA)
- Catholic Charities Stockton
- El Concilio California
- Family Resource Center
- Family Resource Network

¹ California Department of Public Health, Office of Oral Health. *Oral health status of children: Results of the 2018-2019 California Third Grade Smile Survey.* June 2021. Accessed here on January 26, 2023.

² Dental Utilization Measures and Sealant Data by County, Ethnicity and Age, Calendar Year 2013 to 2020. Retrieved from https://data.chhs.ca.gov/ on February 2, 2023. Measure limited to continuously enrolled Denti-Cal beneficiaries ages 0-20.

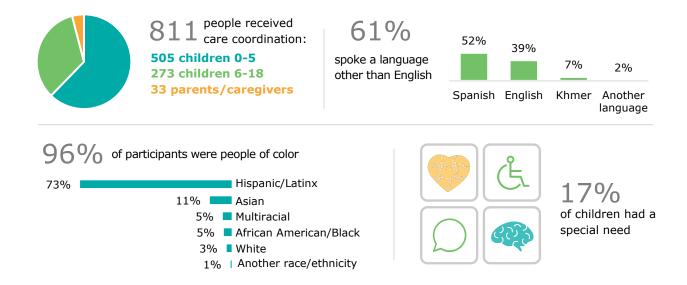
³ San Joaquin County Office of Emergency Services. *San Joaquin County Recovery Plan State and Local Fiscal Recovery Funds: 2022 Report.* Accessed here on January 26, 2023.

⁴ First 5 San Joaquin. SJ TEETH Local Dental Pilot Program (LDPP) Four-Year Report. December 2020. Accessed <u>here</u> on January 26, 2023.

SJ TEETH reached high-priority and high-need families

During FY 2021-2022, SJ TEETH served 778 children and 33 adults. These participants reflected both the diversity of San Joaquin County, as well as First 5 San Joaquin's commitment to reaching the communities and places in the county that have faced historic barriers to health and well-being. Exhibit 1 highlights key characteristics of SJ TEETH participants.

Exhibit 1. Characteristics of SJ TEETH participants



Two opportunities to increase reach to high-priority populations emerged in FY 2021-2022:

- Increase reach to African American/Black families. Five percent of participants identified as African American/Black, which is lower than the percent of African American/Black children in San Joaquin County (7 percent) and the percent of African American/Black children served in the 2017-2020 version of SJ TEETH (8 percent). According to the San Joaquin County Oral Health Needs Assessment, African American children are often less likely to utilize preventive care than other racial/ethnic groups. 6
- Increase reach to parents/caregivers. Parents/caregivers became eligible to receive care coordination from SJ TEETH for the first time in FY 2021-2022 but remain a small proportion of the total number served by SJ TEETH (4 percent).

⁵ First 5 San Joaquin. Strategic Plan 2022-2027. Accessed here on January 30, 2023.

⁶ San Joaquin County Public Health Services. San Joaquin County Oral Health Needs Assessment. November 2018. Accessed <u>here</u> on January 30, 2023.

SJ TEETH reached families in San Joaquin County's Priority Neighborhoods

In 2022, San Joaquin County Public Health Services completed its triennial Community Health Needs Assessment (CHNA) (www.sjcphs.org/Disease/Epidemiology.aspx), which provides a picture of the county's current community health. This CHNA included a special focus on 14 "Priority Neighborhoods" that have been most impacted by historic health disparities. To align with the San Joaquin County CHNA and inform progress towards achieving equity, the SJ TEETH evaluation examined SJ TEETH participation in these Priority Neighborhoods. Almost three out of every four SJ TEETH participants (72 percent) lived in zip codes associated with the Priority Neighborhoods. While these zip codes are an imperfect proxy for the county's Priority Neighborhoods (which are Census Designated Places and do not align with zip codes), the high percentage offers insight into SJ TEETH's ability to reach some of the highest need communities in the county.



Care coordinators used accessible strategies tailored to reach children and families

SJ TEETH care coordinators used the following strategies to connect with high-priority and high-need families:

- Partnering with other local agencies that work with Medi-Cal eligible populations.
- Identifying families who may benefit from SJ TEETH and are already enrolled in other programs at their agency.
- Sharing flyers at community events, Women Infants and Children (WIC) offices, libraries, and other familyfrequented locations.
- Offering oral health supplies and personal protective equipment to recruit and engage families.
- Giving presentations about SJ TEETH to staff at local preschools and school districts.



2022 Family Day at the Park

In addition to these effective strategies, SJ TEETH care coordinators also identified two areas to improve outreach to families that could most benefit from dental service coordination. First, some care coordinators described the challenges of reaching migrant farmworker families, another historically underserved community in the county. According to one care coordinator, migrant farmworker families "were really eager for the [SJ TEETH] information," but were difficult to stay connected with because "they would migrate back to their homeland and then come back, and then sometimes I wasn't able to reach them anymore." To address this, care coordinators noted they could collaborate with the other SJ TEETH agencies to share strategies for reconnecting with families through their migration cycles. In addition to this opportunity, some care coordinators described challenges engaging in outreach when they did not possess contact information or personal connections with key referral partners (i.e., early childcare and education programs). These care coordinators identified a need for easily accessible, up-to-date contact information for these key organizations.

Care coordinators used a range of strategies to support families to make and keep their dental appointments

Care coordination strategies included offering both tangible supports to families such as helping to schedule dental appointments, and intangible supports such as establishing trusting relationships with families. Families expressed gratitude for the positive, supportive care coordination they received through SJ TEETH. One parent said "Thank you for making this very easy. I appreciate this program." Another specifically appreciated that the care coordinator "made reminders about the appointments and [checked] in on me and [my family member]." See Exhibit 2 for details on these key strategies.

Exhibit 2. Key strategies used by SJ TEETH care coordinators



Building trust with participating families

Care coordinators worked to establish trust with families so that they felt comfortable sharing their dental needs and life circumstances. This included relating to parental struggles around introducing children to dental services and reducing shame about previous oral health habits.



Providing oral health education

Care coordinators provided oral health education and supplies to reinforce the importance of seeking both preventive and restorative dental care.



Recommending dental offices

Care coordinators helped families look for a dentist that met their families' needs, such as location, office hours, language preferences, child's age, and if the child had a special need. Care coordinators also recommended dental offices based on feedback from other SJ TEETH families' experiences.



Helping schedule appointments

Care coordinators helped families schedule their dental appointments. They also called families to remind them about their appointments and followed up to find out if the dental appointment met their needs.



Establishing relationships with dental offices

Care coordinators connected directly with staff at dental offices to find out how to best communicate with them and to stay informed about other dental office updates that could impact SJ TEETH families.



Working effectively with each other

Across SJ TEETH agencies, care coordinators established relationships with each other to share knowledge, train new staff, make referrals, and brainstorm solutions for complex cases.

Care coordinators underscored the value of strong relationships between SJ TEETH agencies for meeting families' needs. These relationships were developed through joint outreach efforts, regular in-person meetings prior to the pandemic, informal training, and conversations about program implementation. One care coordinator noted that these benefits extended beyond oral health: "You learn [about] other resources those agencies have to offer. And then if any of your families do need any of those resources, [you could always refer] to those other agencies." Care coordinators expressed interest in being able to reconnect beyond the virtual space, "because seeing each other on the screen, you're not building those real relationships. So hopefully someday we'll be able to be back in person and we can learn [about] the new coordinators just more personally."

First 5 San Joaquin invested in oral health education materials and campaigns

F5SJ partners with the San Joaquin County Public Health Services (SJPHS) oral health program and RSE, a communications firm, to implement community education and media campaigns that share trustworthy information with parents/caregivers of children ages 0 to 5 and the providers that serve them. With funding support from Sunlight Giving, F5SJ and SJPHS invested \$181,000 in the following SJ TEETH strategic communications activities in FY 2021-2022:

- Expanding availability of Stella's Shiny Smile, a bilingual children's book about good dental habits, to include versions in English, Spanish, Khmer, Tagalog, Pashto, and Punjabi.
- Developing a Stella activity kit, which contains a copy of Stella's Shiny Smile, a hand puppet, and memory card game to help care coordinators and home visitors teach good dental health habits while also promoting development skills like reading and playing. Complementary activity bags with the book, a sticker, and a finger puppet were also developed to leave with families.
- Creating games for <u>Stella's Kids Corner</u> (<u>www.sjteeth.org/en-us/Kids-Corner</u>), including a tooth brushing maze, brushing calendar, and coloring pages.
- Launching a social media campaign—including animated videos—that highlighted
 SJ TEETH's care coordination services.
- Conducting a paid media campaign and school outreach to increase awareness of the Kindergarten Oral Health Assessment guidelines and resources for completing the assessment.
- Relaunching a "Nothing Beats Water" campaign on the benefits of drinking water for healthy teeth.





Care coordination contributed to children and their parents going to the dentist

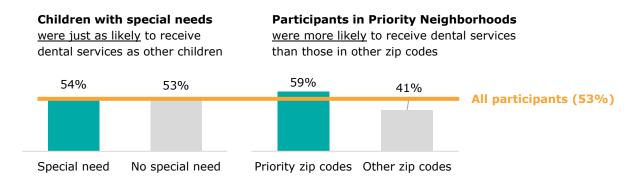
With the support of SJ TEETH care coordinators, over half of SJ TEETH participants (53 percent, or 433 people) received dental services in FY 2021-2022. This is similar to utilization in the first year of the 2017-2020 version of SJ TEETH.

As part of its commitment to race, equity, diversity, and inclusion, First 5 San Joaquin and SJ TEETH seek to improve health outcomes for communities with the highest need. Therefore, dental service utilization was examined by key demographic characteristics, including participant race/ethnicity, primary language, neighborhood, and presence of an identified special need. Exhibit 3 highlights two promising findings about SJ TEETH's ability to reach communities experiencing oral health inequities:

53%

of participants received dental services in FY 2021-2022

Exhibit 3. SJ TEETH is improving dental health access in high-need communities



- Children with special needs. Health care systems experience many barriers to accommodating the full spectrum of health needs, and children with special needs often have a more difficult time accessing dental care. Among SJ TEETH participants, however, children with special needs were just as likely to receive dental services (54 percent) as children without special needs (53 percent). Evaluation of the 2017-2020 version of SJ TEETH indicated that this may be due to SJ TEETH's ability to match families to dentists with the skills and experience to serve children with special needs, as well as the extra attention that SJ TEETH can provide for families trying to navigate a variety of medical and developmental support appointments.
- San Joaquin County Priority Neighborhoods. People living in San Joaquin County's Priority Neighborhoods experience more financial, logistical, and structural barriers to dental care. Interestingly, SJ TEETH participants in zip codes associated with these Priority Neighborhoods had a higher dental service utilization rate (59 percent) than participants in zip codes elsewhere in the county (41 percent). This finding may point to SJ TEETH agencies' ability to effectively reach and serve residents in these historically underserved neighborhoods. It may also point to an opportunity to better support utilization among those living outside Priority Neighborhood zip codes.

⁷ Additional variations in dental service utilization by race/ethnicity and language may be a result of data quality issues that are currently being addressed by First 5 San Joaquin, SJ TEETH agencies, and Harder+Company, and will continue to be monitored and reported moving forward.

⁸ Norwood et al. Oral health care for children with developmental disabilities. *Pediatrics*. 2013;131(3):614-619. Available at https://doi.org/10.1542/peds.2012-3650. Accessed January 21, 2023.

⁹ First 5 San Joaquin and Harder+Company Community Research. San Joaquin TEETH Year 1 Evaluation Summary Memo. May 2018. Available upon request.

Families had a positive experience at the dentist

Between October 2021 and September 2022, SJ TEETH care coordinators conducted 253 phone surveys with parents/caregivers to learn about their experiences with SJ TEETH care coordination and their children's dental visits. Among respondents to this survey:

- 97 percent reported that they were satisfied with the care their child received (see Exhibit 4 for examples of feedback shared by parents/caregivers).
- On a scale of 1 (worst) to 5 (best), 94 percent rated the care their child received at the dentist as a 5.
- 81 percent of parents said the dentist explained the child's treatment to them in a way that they understood.
- 99 percent of parents planned to bring their child back to the same dentist.

For those parents/caregivers whose children did not see a dentist, additional data collection will be conducted in the next year to explore reasons for reschedules and cancellations.

Exhibit 4. Families shared positive feedback about their dental visits

"We absolutely loved [our dentist]. We were in and out so fast. Best part was my daughter cooperated." "The staff is friendly, courteous, and very professional.

The doctor provided a lot of information and tips on how to protect and keep [my child's] teeth clean. She was very thorough and explained everything in a simple way that was easy for me and my husband to understand."

"Estoy encantada y feliz con la atención del dentista y sus asistentes. [Mi hijo] está perdiendo el miedo que tenía previamente. Esta última cita cooperó más con el dentista y se dejó limpiar sus dientes."

"I am delighted and happy with the attention of the dentist and his assistants. [My son] is losing the fear he previously had. During this last appointment, he was more cooperative with the dentist and let [the dentist] clean his teeth." 99%

of participants plan to bring their child back to the same dentist

"I love taking my child here. We have been going to [this dental office] for several years. My son allows them to do a little more with each visit."

"I really said 10 out of 5!!! I loved the office; great set-up and the TVs are fantastic. I made appointments for all my children. I can't wait to take them back in February."

Recommendations

The following recommendations can support F5SJ to continue building on SJ TEETH's strengths:

- Consider strategies to enroll more African American families. The proportion of African American/Black children in SJ TEETH is lower than the African American/Black population in the county, and lower than the proportion served in an earlier version of the SJ TEETH program. At the same time, African American/Black residents experience poorer oral health access and outcomes than other racial/ethnic groups in the county. F5SJ should explore possible participation barriers for African American/Black families and consider strategies to better connect with and serve these communities in the county.
- Expand efforts to reach more parents of children ages 0-5. Parents of children ages 0-5 still make up a small percentage (4 percent) of SJ TEETH participants, despite being eligible for the program since 2021 and previous evidence that they could benefit from dental care coordination. F5SJ should work with care coordinators to explore ways to reach more parents. This may include clearly communicating eligibility to parents, finding outreach messages that focus specifically on parent enrollment, or identifying and addressing other challenges that keep parents from participating.
- Consider opportunities to expand services to additional priority populations. Participants living in zip codes that are part of San Joaquin County's Priority Neighborhoods were more likely than those in zip codes outside Priority Neighborhoods to get a dental service. This finding may point to a strength in SJ TEETH's ability to reach these high-need communities. F5SJ and the SJ TEETH evaluation should seek to learn more about care coordinators' experiences, challenges, and insights about strategies that are working well in Priority Neighborhoods. These insights could be used to expand services to areas and/or populations that could benefit from more access to SJ TEETH's services. At the same time, F5SJ and SJ TEETH agencies should further explore what supports could help to raise the dental service utilization rate among participants who live outside zip codes associated with the CHNA Priority Neighborhoods.
- Support care coordinators to connect with key partner organizations (including other SJ TEETH organizations). Care coordinators described the importance of connecting with other local organizations—and sharing information with each other—to best support families. They are interested in ongoing opportunities to learn about each other's work and develop their relationships in in-person settings to sustain cross-agency collaborations. They also identified practical ways to make these connections easier, including having a list of contacts at key organizations and creating additional channels for virtual communication (such as a Teams group or other virtual space) with other SJ TEETH organizations. F5SJ should explore ways they can support SJ TEETH agencies to easily make these connections.
- Collaborate with Harder+Company and SJ TEETH agencies to improve data quality and completeness. SJ TEETH agencies collect valuable data—including a parent satisfaction survey, care coordination contact records, and documentation of dental services—that help to describe the program's impact. However, some agencies collected a limited number of parent surveys, or had less documentation of care coordination and dental services. Throughout the year ahead, F5SJ should connect with Harder+Company staff and SJ TEETH agencies to understand and identify strategies to improve evaluation data collection and thereby improve the ability to accurately capture and describe the experiences of families served by SJ TEETH.

Technical Appendix

This evaluation report includes data from the following sources:

- SJ TEETH database (FY 2021-2022). SJ TEETH care coordination agencies
 use the SJ TEETH database to track demographic and service data for children
 and family members enrolled in care coordination. Data entered between July
 2021 and June 2022 were included in this report.
- SJ TEETH parent survey (n=253). Within 30 days of a preventive dental appointment, SJ TEETH care coordinators called parents/caregivers of participating children to learn about satisfaction with dental care and barriers to accessing care. The parent survey was launched in October 2021, and data presented in this report reflect survey responses collected from parents beginning in October 2021 through September 2022. Most responses (95 percent) were from parents whose children successfully received dental care; five percent of responses were from those who were not able to receive dental care.
- Care coordinator focus group. The evaluation team conducted a semi-structured virtual focus group with SJ TEETH care coordinators to learn about outreach strategies, care coordination processes, and agency partnerships/capacity. Learnings from this focus group were analyzed for key themes and recommendations.



Overview

Enclosed please find your HMG system's **final 2023 Annual Fidelity Assessment Summary Report** (Reporting Period: January 1, 2023 - December 31, 2023). We encourage systems to review the final report with their team and flag areas where your system is performing well, as well as areas for improvement. We hope this information allows you to reflect on the ways in which you are contributing to HMG's national impact as well as provide you with the numbers and metrics you can use in advocating for HMG's value proposition.

Please let Melissa Miller (MMiller02@connecticutchildrens.org) know if you have any questions.

Key Features of this Report

Below is a summary of key features for this report:

Feature	Description			
Resources	For systems not in full implementation of a Core Component, we have provided a list of resources for you to reference and support implementation of the Key Activities. Resources are only provided if your HMG system is in Exploration or Installation of the respective Core Component.	3		
Impact Indicator Data	This include systems target areas for improvement, along with state- and national-level data for benchmarking.	4 & 5		
SMART Aim & Trends	We have pulled your HMG system's SMART Aim & Trends responses for you to easily reference.	5		

State:	California
System:	San Joaquin County



The summary below presents each of the HMG Model's Core Components and their associated Key Activities necessary to implement the HMG Model to its full potential. This summary is derived from the individual responses submitted by the HMG system identified above in the 2023 Annual Fidelity Assessment (2023 Calendar Year Reporting Period, data submitted April 2024).

HMG systems should review and identify areas of the HMG Model that are not yet being implemented within their system and the support that may be necessary to advance the Model within their local community or state.

Activity	Indicators			
	Centralized Access Point			
	An entity has been identified to serve as the HMG Centralized Access Point (CAP).	✓		
Specialized child development line. A	A specialized HMG CAP is currently accepting calls.	✓		
specialized child development line - distinct from a general call line - which can be directly	The HMG CAP is intended to serve a specific subgroup of families with young children between prenatal and 8 years of age.			
accessed by families and providers.	A specialized child development line - distinct from a general call line - can be directly accessed by families/caregivers, health care providers, and community agencies.	✓		
Linkage to service & follow-up. Capacity to facilitate connection to a variety of early childhood services and to follow-up with families at least 75% of the time (if consented by family) to ensure successful linkage.	HMG Care Coordinators provide follow-up to the initial caller regarding the referral at least 75% of the time (if consented by family).	√		
Researching resources for families. A systematic process to research available resources in the community.	HMG Care Coordinators use a defined procedure to research available resource and connect children/families to community based services and programs.			
Real time directory maintenance. An early childhood-specific HMG Resource Directory that	The CAP utilizes a computerized resource directory that can be efficiently updated and modified (e.g. 2-1-1 resource database, self-developed database, etc.).	✓		
is systematically updated at least annually and can be updated in real-time as ad hoc changes	A systematic protocol is in place to proactively review and update the Resource Directory at minimum annually.	✓		
arise.	A systematic protocol is in place to make real-time updates in the Resource Directory as changes arise.	✓		
	Family & Community Outreach			
Utilize community partners. Partners for HMG Family & Community Outreach have been identified and partnership extends beyond inclusion in the HMG Resource Directory.	Partners for HMG Family & Community Outreach have been identified and partnership extends beyond inclusion in the Resource Directory.	√		
Networking. Meetings are facilitated to support networking among programs and agencies.	HMG is the convener or lead partner for networking meetings among community partners.	✓		
Community events & trainings. Outreach is conducted at least twice a year to increase awareness of HMG.	HMG provides outreach to increase awareness of HMG at least twice a year such as presentations, events, and/or meetings.	√		
Marketing. Marketing opportunities, including social media, are utilized to promote HMG.	HMG utilizes marketing opportunities including social media to promote HMG.			

^{**}Light Yellow Cells = activity not met or no value reported.

Child Health Care Provider Outreach				
Physician Champion. Identification of and active participation with a HMG Physician Champion who advocates for HMG in the broader medical community.	HMG has identified and actively partners with at least one HMG Physician Champion that advocates for HMG to the broader medical community and/or aids in connecting HMG to other practices.	√		
Training on surveillance & screening. HMG ensures that targeted outreach on effective developmental surveillance and screening is being conducted with child health care providers through education, trainings, or workshops.	HMG staff or partnering entity conducts at least 1 targeted outreach to child health care providers through office-based education, trainings, and/or workshops on effective developmental screening and surveillance.	~		
Training on referral & linkage. HMG ensures that targeted outreach on referral and linkage through HMG is being conducted with child	HMG staff or partnering entity conducts at least 1 targeted outreach to child health care providers through office-based education, trainings, and/or workshops on linkage and referral through the HMG system.			
health care providers through education, trainings, or workshops.	Strategies are used to engage child health providers with HMG.	✓		
Feedback loop. HMG Care Coordinators close the feedback loop by sharing information about screening and/or referral outcomes with referring child health care providers in at least 75% of instances (if consented by family).	HMG closes the feedback loop with child health care providers by sharing information about screening and/or referral outcomes at least 75% of the time (if consented by family).	~		
	Data Collection & Analysis			
Data monitoring. HMG-specific data are	Impact Indicators and SMART Aim are submitted to the HMG National Center.	✓		
regularly reviewed, tracked, and analyzed and meaningful reports can be generated.	Reports at least one trend that was identified and acted upon using HMG data with the last 12 months.	✓		
Sharing data across partners. HMG-specific data are shared across partners, such as through regular reporting, ad hoc requests, or targeted evaluation projects.	HMG shares HMG-specific data across partners, such as through regular reporting, ad hoc requests, or targeted evaluation projects.	✓		
Continuous quality improvement. Quality improvement projects are conducted using HMG-specific data.	HMG uses data to support Continuous Quality Improvement projects within HMG system.	✓		
Community change through data. HMG-specific data, such as identification of systemic barriers, are leveraged to generate community and/or policy change.	HMG identifies common themes in the challenges and barriers that families face when accessing services and supports for their children, and use these barriers to support advocacy efforts.	√		

^{**}Light Yellow Cells = activity not met or no value reported.

¹Kids Count 2022 Data

Scoring

To categorize HMG systems with respect to their HMG Model implementation progress, the following scoring method is used:

Exploration: No indicators within Core Component **Installation:** At least 1 indicator within Core Component **Implementation:** All indicators within Core Component

Affliation Status

Please find your HMG system's overall implementation status and implementation status by core components for 2023.

Core Component	Component Implementation Status	Overall Implementation Status
Centralized Access Point	Implementation	Implementation
Family & Community Outreach	Implementation	
Child Health Care Provider Outreach	Implementation	Implementation
Data Collection & Analysis	Implementation	

Resources

Based on your HMG system's Core Component Implementation Status, we recommend exploring the customized list of resources below. Resources are only provided if the HMG system is in *Exploration* or *Installation* of the respective Core Component.

Core Component	Recommended Resources
Centralized Access Point	HMG System is in full implementation of this Core Component.
Family & Community Outreach	HMG System is in full implementation of this Core Component.
Child Health Care Provider Outreach	HMG System is in full implementation of this Core Component.
Data Collection & Analysis	HMG System is in full implementation of this Core Component.

State: California

System: San Joaquin County



Your System in Context of the Network: The 2023 Fidelity Assessment summary highlights your HMG system's reported Impact Indicator data and how it contributes to your state and National Affiliate Network totals for each metric. While the Assessment is designed to capture a response for each metric by every HMG system, there are some systems that were not able to report all metrics during this reporting period, therefore the repsonse rate changes depending on the number of responses received for each metric.

	System Totals**	State Totals			HMG National Affiliate Network Totals		
	# or Avg %	# or Avg %	# of Systems Reporting ²	Response Rate	# or Avg %	# of Systems Reporting (out of 121)	Response Rate
Centralized Access Point							
Total # of Children Served [#]	2,402	31,666	24	96%	225,931	116	96%
Total # of Children - SPN36 [#]	1,542	15,633	23	92%	111,721	111	92%
Total # of Children - S3Plus [#]	776	16,102	24	96%	78,937	111	92%
Total # of Families Served [#]	2,042	29,222	24	96%	198,146	115	95%
Total # of families served that resulted in sharing information or education only (EO) [#]	1,180	8,493	23	92%	50,119	109	90%
Total # of families served that resulted in a referral (R)[#]	1,872	22,375	23	92%	95,022	112	93%
Total # of families served that received HMG follow-up (RF)[#]	724	16,581	23	92%	62,167	109	90%
Total CAP Activities [#]	-	292,208	21	84%	1,099,672	111	92%
Needs Met Average [%] ³	100%	85%	19	76%	89%	76	63%
Linkage Average [%] ³	94%	74%	20	80%	79%	101	83%
Family & Community Outreach							
Total number of individuals (non-families) representing community agencies reached through a HMG coordinated or HMG-led event over the past 12 months [#]	75	5,825	24	96%	89,727	113	83%
Total # of non-medical professionals trained on developmental screening and/or referral and linkage through HMG over the past 12 months [#]	69	4,218	20	80%	21,924	101	88%
Total number of individuals (parents, caregivers, other family members) reached through events led or coordinated by HMG to promote awareness of child development and/or HMG over the past 12 months [#]	-	69,158	20	80%	594,058	106	69%
Child Healthcare Provider Outreach							
Total # of trainings provided by HMG to medical staff on developmental screening and surveillance over the past 12 months [#]	-	193	17	68%	1,145	83	69%
Total # of trainings provided by HMG to medical staff on referral and linkage through HMG over the past 12 months [#]	1	264	19	76%	264	92	76%

^{**}Light Yellow Cells = activity not met or no value reported.

Data Collection & Analysis

Systems must report on a SMART Aim and report on at least one trend that was identified and acted upon using HMG data within the last 12 months. Below please find your system's SMART Aims for 2023.

Specific	HMG staff will increase (by at least 50 percent) the number of presentations (lasting more than 30 minutes each) designed to increase visibility and awareness to community-based organizations or events such as libraries, Breast Feeding Coalition, Learning Exchange for Home Visitors (held three times per year), Community Links (monthly meetings support community services), and WIC offices not currently receiving HMG services.
Measurable	HMG staff will document all presentations with flyers, agendas, and participation lists.
Attainable	HMG staff feel this goal will be attainable by scheduling at least one session per quarter.
Relevant	As HMG conducts mail-outs to clients to promote the HMG Program, the online link was added to the mail-out letters giving the parents the option to complete the questionnaires via the portal. The ASQ was also provided to the clients. This led to an increase in ASQs coming from the portal.
Time-Bound	HMG staff will conduct these sessions in the next twelve months.

Below please find the trend(s) that your system identified and acted upon using HMG data with the last 12 months.

As HMG conducts mail-outs to clients to promote the HMG Program, the online link was added to the mail-out letters giving the parents the option to complete the questionnaires via the portal. The ASQ was also provided to the clients. This led to an increase in ASQs coming from the portal.

¹Kids Count 2022 Data

^{**}Light Yellow Cells = activity not met or no value reported.



Executive Summary

First 5 San Joaquin (F5SJ) invests in home visiting - an evidence-based strategy for strengthening family resiliency and supporting children so they are healthy and ready for school – including funding organizations who have the capacity and expertise to reach and effectively engage historically underserved communities. Several different home visiting programs are offered by F5SJ including:

- Home Visitation Initiative focuses on preparing children for school, strengthening parent knowledge of child development, assisting parents to make healthy lifestyle changes, and providing opportunities for connections with other parents.
- **FamilyWORKs** provides services to California Work Opportunity Responsibility to Kids (CalWORKs) families with children ages 0 to 5. In addition to home visits focused on child development, FamilyWORKs participants receive job search and job readiness assistance.
- JourneyWORKs provides services for families with children ages 0 to 5
 receiving CalWORKs public assistance and who are either at risk for or
 experiencing substance use or mental health challenges.

Last year these home visiting programs served 1,064 parents; nearly all were from historically underserved racial or ethnic communities. As a result of their participation, parents reported being more knowledgeable and resilient and children were better prepared for school both socially and academically.

Key recommendations from this evaluation are summarized in the table below.

Recommendations

- Continue to invest in training to strengthen the home visiting workforce.
- Consider expanding opportunities for contractors to meet more regularly.
- Continue to prioritize in person home visiting services.
- Engage contractors in discussions about how to increase and track father engagement.
- Explore the provision of additional family engagement activities.





Background

For over 20 years, First 5 San Joaquin (F5SJ) has invested in home visiting as a strategy to help ensure children enter school healthy and ready to learn. Funded organizations ("contractors") provide individualized support and service coordination to families with children ages 0 to 5. Services are provided in the home or another safe, accessible location by trained and trusted community messengers. F5SJ's investment in home visiting is part of a broader strategy to achieve equity. This approach involves funding organizations who have the capacity and expertise to reach and effectively engage historically underserved communities such as individuals who identify as Black, Indigenous, or People of Color and/or who live in under-resourced or historically marginalized communities. As described below, F5SJ offers several distinct home visiting programs, each responding to the specific needs and circumstances of families with children ages 0 to 5.1

- Home Visitation Initiative (HVI) provides services to families with children ages 0 to 5 focusing on preparing children for school, strengthening parent knowledge of child development, assisting parents to make healthy lifestyle changes through good nutrition and regular physical activity, and providing opportunities for connections with other parents through supportive group meetings and community resources. Contractors funded under HVI offer two evidence-based home visitation programs: Parents as Teachers (PAT)² and University of California Cooperative Extension (UCCE)³ Health Education.
- **FamilyWORKs** provides services to California Work Opportunity Responsibility to Kids (CalWORKs) families with children ages 0 to 5. In addition to receiving PAT, FamilyWORKs participants also receive job search and job readiness assistance to help them obtain employment and achieve economic self-sufficiency.
- JourneyWORKs provides services for families with children ages 0 to 5
 receiving CalWORKs public assistance and who are either at risk for or
 experiencing substance use or mental health challenges. Home visitors
 support parent access to substance use and/or behavioral health services.

This evaluation report documents implementation and impacts across home visiting programs for F5SJ contractors and participants during the 2022-2023 fiscal year. The purpose of this report was to collect data to better understand the strategies home visiting programs used to reach their priority populations, how priority populations experienced the programs, as well as how program experiences can be enhanced for priority populations. Findings were informed by surveys, interviews, and the Client and Service Database. For a full description of evaluation methods, please refer to the Technical Appendix.

Home visiting programs are serving their priority populations.

During interviews, contractors shared specific priority populations they aim to reach. This included families from historically underserved racial and ethnic communities, as well as families who are low-income, living in under-resourced

HVI: Asian Pacific Self-Development And Residential Association, California Health Collaborative, Child Abuse Prevention Council, Delta Health Care and Management Services Corporation, El Concilio California, Family Resource Center, Lincoln Unified School District, San Joaquin County Office of Education, and YMCA of San Joaquin County.

FamilyWORKs: Child Abuse Prevention Council, El Concilio California, Family Resource Center, Mary Magdalene Community Services, and San Joaquin County Office of Education.

JourneyWORKs: Child Abuse Prevention

Home Visiting Contractors

¹ F5SJ also invests in a home visitation initiative that aims to enhance the quality of care provided by grandparents. The data collected from this initiative will be provided in a newsletter later this year.

² Families with children ages 0 to 3 are eligible to participate in PAT and receive weekly visits for up to 12 months.

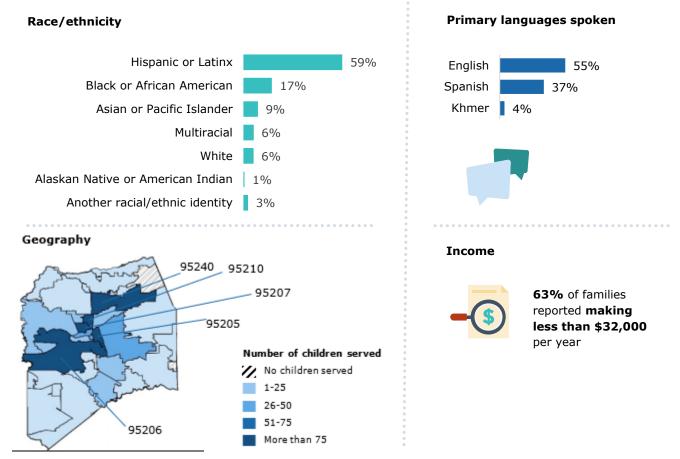
³ UCCE Health Education includes curricula focused on nutrition, family finances, and early literacy. Families with children ages 0 to 5 are eligible to participate and receive weekly visits for up to six months.

areas, have children with special needs, are CalWORKs recipients, and those at risk of substance abuse, homelessness, or mental health challenges. Contractors made data informed decisions to identify their priority populations, including collaborating with other agencies to better understand needs and disparities, reviewing secondary indicator data, and relying on their own experience and expertise serving the community.

Data collected from the Client and Service databases⁴ show home visiting programs provided services to those they intended to reach.

- Nearly all (94%) participants were from a historically underserved racial or ethnic community⁵, including 98 percent of HVI participants, 91 percent of FamilyWORKs, and 79 percent of JourneyWORKs.
- The primary languages spoken included English (55%), Spanish (37%), and Khmer (4%).
- Nearly two-thirds of families (63%) reported making less than \$32,000 per year.⁶
- The greatest number of participants lived in 95206 (14%), 95207 (10%), 95205 (9%), 95210 (8%), and 95240 (8%) zip codes that include many of the census tracts that have been identified as areas where communities experience the greatest health disparities.⁷

F5SJ home visiting programs reached **1,064 parents** and **1,226 children ages 0 to 5** in FY 2022-2023. On average, parents participated in home visiting for **one year**.



⁴ Race/ethnicity, language, and zip code data represent available data for participating children. Percentages may not add to 100 due to rounding.

https://www.sicphs.org/assets/20220817 CHIP%20Report%207%2025%2022.pdf. Accessed on February 28, 2024.

⁵ Historically underserved racial and ethnic communities include Hispanic/Latinx, Black/African American, Asian/Pacific Islander, Multiracial, Alaskan Native/American Indian, and another racial/ethnic identity.

⁶ Income data was only available for HVI and FamilyWORKs families.

⁷ Community Health Improvement Plan for San Joaquin County.

Interviews with participants further demonstrated home visiting programs are reaching priority populations. Participants described themselves as having intersecting identities including those that have historically been underserved.

Cambodian, currently works part-time and dad also works part-time

African American household, middle-class, has bachelor's degree, husband has high school degree

Guatemalan and low-income

Mexican, Spanishspeaking, and lowincome Mexican, middle-class, stayat-home mom

African American, lives in Section 8 housing, low-income, mom

Biracial, formerly homeless

Khmer, single mother, CalWORKs recipient, not employed

Mexican, born and raised in Mexico, identifies as Hispanic

Hispanic, dad goes to school full-time

Hispanic, son half-Cambodian, half-Hispanic, low-income

Contractors used creative and culturally relevant strategies to engage their priority populations, though some barriers made outreach and participation challenging.

Contractors used a range of strategies to enroll priority communities in their home visiting programs including:



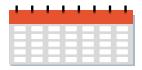
Leveraging positive word of mouth within the community.



Going to locations where priority populations frequently visit such as churches, farmers' markets, flea markets, hair salons, laundromats, and recovery centers.



Collaborating with other trusted community messengers including WIC staff, pediatricians, and school districts.



Developing outreach plans that identify important cultural events and dates allowing them to more strategically tailor their efforts to reach priority populations.

Despite these successful outreach strategies, both home visiting contractors and participants reported several barriers that made participating in home visiting challenging. This included:

- Navigating personal realities, such as prenatal and early postpartum periods, required some participants to ask to pause services and reenroll when they were ready. Several others shared the time commitment and staying connected to the program was a challenge given family responsibilities. One parent shared their living situation did not always allow for a comfortable space to meet, sharing, "Living with my parents has been one issue. It's hard because it's never quiet here."
- **Building trusting relationships** in connecting families to home visiting services can take time. One contractor shared, "Our successful enrollments come from families who we have built trust with...so when we are [doing outreach] we try and build a relationship in the moment. Another shared, "There were some families that ended up not participating and there were others who opened their door and built that trust [with us] over time. [They realized] we were there to support and educate them, not to look for reasons to report them."
- Social stigma around substance use/abuse treatment was a barrier to
 engaging individuals in JourneyWORKs program resources. Contractors
 shared this often affected individuals' willingness to openly discuss their
 substance use with them, making referrals a challenge.

While mothers tend to be the primary caregiver participating in home visiting, fathers/partners also engage in a multitude of ways.

To engage families more holistically and help sustain positive outcomes, F5SJ invests in efforts to increase father/partner engagement in home visiting. While most home visiting participants identify as mothers⁸, interview respondents reported fathers/partners were interested in the program and participated in the visit when they were available. One participant shared how father engagement has been one of the most helpful aspects of their participation in home visiting, as it has helped the father to remain accountable to himself.

Conflicting work and school schedules were the primary barriers to participation, however, home visiting participants shared how fathers/partners often used the materials and activities when they returned home. One participant shared, "When the home visitor brings activities, I explain it to my son's dad. Then he does the activity with my son. That's how he involves himself." Another shared, "After the visit I talk to him [about what we did]. I take videos and send pictures to him. Then he knows what she's doing." One family whose father was incarcerated described how they chose to engage in home visiting content, sharing how they read books to their child via a phone call. These alternative ways of engagement illustrate how fathers are demonstrating their interest even if in different formats or times.

When asked how to more effectively reach fathers, contractors and home visiting participants shared suggestions such as continuing to invite fathers to be more deeply involved in home visiting conversations; funding programs or workshops designed specifically for fathers; and increasing male presence on marketing materials such as flyers.

"He works longer hours than I do. When he gets home, my daughter shows him the materials and talks to him about what she learned."

-Home visiting participant

⁸ 97 percent of FamilyWORKs participants identified as a female parent or caregiver.

Participants reported high satisfaction with their home visitor, valuing their professionalism, accessibility, and cultural sensitivity.

Overall, home visiting participants highly appreciated their home visitors, noting they were kind, qualified, and flexible. One participant shared, "She is very professional. It's not where she is impersonal either. She genuinely cares. She makes us feel comfortable." Another participant stated, "The home visits are at convenient times and [my home visitor] has been flexible to identify a time that works best for me."

Participants also acknowledged the ways in which home visitors honored their family's cultural and racial background. For example, one participant appreciated having a shared language with their home visitor, saying, "The fact that she spoke Spanish and I was not stressed that I had to speak in English...made me feel valued in my identity." Another participant shared, "[My home visitor] having the same ethnic background as me made me feel comfortable. Also, my dad is here, and she is able to communicate with him in his native language. It makes him feel more comfortable that the person who is coming into the home can understand him and he is able to communicate with them too." One participant noted they hadn't had conversations about their background with their home visitor and that, "I would benefit from having that conversation about my culture and racial background."

Contractors shared their aim to hire staff who have similar identities and experiences as their priority populations. One contractor stated, "I have found that when you have a provider that looks like you and understands your community and where you come from, you have that trust and then you're more likely to engage and get the help that you need."

Preferences for In Person vs. Virtual Home Visits

Overall, both parents and staff involved in home visiting reported a preference for in-person home visits over virtual services. The hands-on, face-to-face interactions were seen as more effective and engaging, especially for very young children. Parents observed their children are more attentive and interactive during in-person visits. For instance, one parent mentioned, "I prefer in person because I like the interaction and for my daughter to be able to talk to someone one on one and not through a screen. She's more focused [in person]." Another parent highlighted the limitations of virtual interaction for young children, saying, "She's so young. I don't think she would sit there very long in front of the screen. During in person visits, she starts to get up and walk around a little bit, so it helps that [me and the home visitor] are both there to redirect her." A few parents and contractors, however, did note the helpfulness in having the option to meet virtually if, for example, the child was sick, but the parent still wanted to meet or had questions for the home visitor.

"[I'm homeless] and I
have never felt judged.
[My home visitor]
embraced my family, our
socioeconomic status, and
me being a biracial
woman."

-Home visiting participant

Parents are more knowledgeable and resilient after participating in home visiting.

Home visiting programs aim to strengthen protective factors, enabling parents to nurture their children even when faced with adversities and stressful situations. To assess the presence, strength, and growth of Strengthening Families Protective Factors, HVI and FamilyWORKs participants completed a survey at intake and exit. The survey measures parental resilience, social and emotional competence of children, social connections, and concrete support in times of need.⁹

Survey findings demonstrated participants experienced statistically significant increases 10 in both the parental resilience and social emotional competence of children domains after participating in home visiting (Exhibit 1). The parental resilience competency assesses a parent's functioning when faced with stressors or challenges. The social emotional competency assesses if a child's environment and experiences enables them to form close relationships with adults and to experience and express emotions. 11

Further, parents of children who identified as Black/African American or Latinx reported the greatest increase in resilience and social/emotional competence, compared to parents with children of other races and ethnicities.

Exhibit 1. Parents' protective factor scores before and after participating in home visiting*



^{*} Scale is from 1 to 5 where a higher score indicates stronger protective factors

Home visiting participants also appreciated the support they received to increase their knowledge of their child's age and developmentally appropriate behaviors. Developmental screenings and charts (such as those to track key developmental milestones), Ages and Stages Questionnaire (ASQ) developmental screenings, hearing and vision screenings, and tools like sensory blankets were particularly helpful. One parent shared, "Doing the ASQ with my daughter was comforting. I thought maybe she was going to show developmental delays, but her scores showed she was in areas where we can work with her." Data from the Client and Service database showed:

 646 children¹² (53% of children served overall) were screened for potential developmental delays using the ASQ. "I have learned that at certain stages [my child] is supposed to be able to do certain things and that helps me know what I need to work on with them."

-Home Visiting Participant

⁹ For the purposes of this report, data is only reported for parental resilience and social and emotional competency of children.

¹⁰ n=362, p<.001. A p-value is a measure of statistical significance. When a p-value is less than .05, the finding is referred to as "statistically significant." Statistical significance means that the changes between the data points are likely not due to random chance.

¹¹ Parents' Assessment of Protective Factors: User's Guide and Technical Report. https://cssp.org/wp-content/uploads/2018/08/PAPF-User-Guide.pdf. Accessed March 2024.

¹² Some children may have been screened prior to FY 22-23, or started the program with an existing IEP thus are not included in the count of children screened.

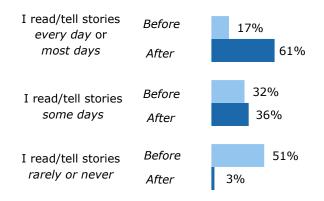
- The racial and ethnic identity of children screened aligned with home visiting programs' priority populations (63% of children screened were Hispanic/Latinx, 13% Asian, and 11% Black/African American).
- Referrals for a follow up developmental assessment were made for 50 (8%) children following the ASQ screening.

Home visiting strengthened children's school readiness, both socially and academically.

Parents cited a variety of reasons why they chose to participate in home visiting with a big motivator being to ensure their child would be ready for school. This is also the area in which parents felt home visiting made a great impact for their child, strengthening both their social/communication as well as their academic skills. One parent shared their son is more vocal, attentive, and communicative because of home visiting. Another shared how home visiting has been helpful for their child's speech and communication, which will be instrumental for socializing with other children. They explained, "I liked that my daughter socializes with the home visitor. It's like a type of training for preschool. It teaches her to trust the teacher." Excitement for going to school was another positive outcome shared by parents.

Early literacy practices, including parents reading to their child, are important contributors to a child's academic success. According to the HVI and FamilyWORKs surveys, 61 percent of parents reported reading or telling stories to their child at least five days per week, compared to just 17 percent at program start (Exhibit 2). ¹³ Additionally, most parents (84%) increased how often they read or told stories to their child. One parent described how the home visitor would read books to the child in English while the mom would read the books in Spanish. Another parent explained, "Before we had [my daughter] my husband never picked up books, but now he reads on his own and with her." Parents of children who identified as Latinx (85%) and parents whose children were monolingual Spanish speakers (53%) reported the greatest increases in reading frequency.

Exhibit 2. Engagement in family literacy practices before and after participating in home visiting



"She now is motivated to go to school. [When the home visitor comes] she grabs her book and pencil. She wants to learn."

-Home Visiting Participant

 $^{^{13}}$ n=506-508. Data are from participants who completed the literacy questions on both the pre- and post- program survey. The total number of responses varies by question.

Home visiting encouraged parents to prioritize healthy eating and physical activity habits.

Families who participate in the Health Education Program receive information and strategies for leading healthier lives. Parents reflected on how this program informed them of the benefits of healthy eating practices as well as the benefits and importance of modeling healthy eating habits for their child. One parent shared:

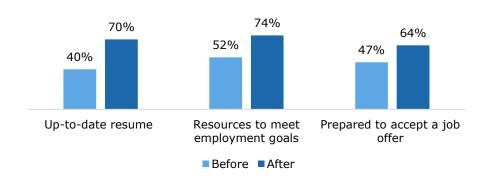
"So far, all the things I learned I have been able to use. [The home visiting program] has helped me to really open my eyes to the unhealthy habits I had. The small things I changed about exercising, drinking more water, and making healthier meals...I am incorporating these things into my daily life."

In other instances, parents reflected on changes they have seen in their child's eating habits, especially around openness to new foods. One parent explained, "The fact that he is willing to try new foods is wonderful. Previously he would scream...and now he is willing to try them."

FamilyWORKs increased parent's job search and readiness skills.

A key goal of FamilyWORKs is to support parents to meet their employment and self-sufficiency goals. At program exit the FamilyWORKs survey demonstrated 70 percent of parents had an up-to-date resume, compared to 40 percent at program entry (Exhibit 3). Additionally, after participating in FamilyWORKs, 74 percent of parents indicated having the resources and support needed to meet their employment goals, compared to 52 percent at program entry. Lastly, nearly two-thirds (64%) of parents felt prepared to accept a job offer at program exit, compared to 47 percent at program start.

Exhibit 3. Job readiness skills before and after participating in FamilyWORKs

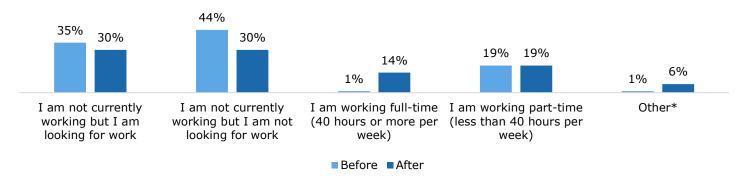


FamilyWORKs also supported parent's ability to obtain or keep employment (Exhibit 4). When looking at the employment status of FamilyWORKs parents at program start, 44 percent reported not currently working and not looking for work, 35 percent were not working but looking for work, one percent were employed full-time, and 19 percent were employed part-time. After participating in FamilyWORKs, the percentage of parents not working (either not working and looking for work or not working and not looking for work) decreased while the percentage of parents working full-time increased.

"We had a Black urban farmer who shared about the importance of whole nutritious foods for your family...and that you can grow in an apartment or in your backyard"."

-Home Visiting Participant

Exhibit 4. Employment status before and after participating in FamilyWORKs



*Other examples include in the process of being hired, full/part time student, caring for family members, working for a church, and international employment.

Parents with children who identified as Black/African American or Latinx – communities who disproportionately experience discrimination in employment practices¹⁴ - saw the greatest improvements in their ability to keep or maintain employment. For example, at program start, 20 percent and 21 percent respectively, had employment of any type, but after participating in home visiting 35 percent and 31 percent had part time or full-time employment.

Opportunities to Improve Home Visiting

The data collected as part of this home visiting report document suggests programs are making important strides in meeting their goals. Programs reached their priority populations and served as a trusted resource. As a result, parents are more self-sufficient, and their children are better prepared for school success. The following recommendations are ways F5SJ, and its contractors can enhance participant experiences and strengthen the program in the future.

Continue to invest in training to strengthen the home visiting workforce.

Throughout the report, data suggest training opportunities for home visiting programs, particularly as they relate to F5SJ's equity goals. These could be hosted by F5SJ, or contractors may use their own training dollars to strengthen staff capacity. Suggested topics include:

- Culturally sensitive outreach and engagement. Given participants' complex and intersecting identities, home visitors may need to expand their tool kit to be able to engage in culturally sensitive practices more fully. This could include ensuring home visitors feel comfortable and confident talking to participants about their identities (e.g., gender orientation, culture, race, preferred pronouns); understanding and learning about important cultural traditions, celebrations, and holidays; as well as well as navigating conversations about the impact of culture and race in the context of early childhood systems.
- Parents as the child's first teacher. One of the roles of the home visitor is
 to educate parents on how to use age-appropriate activities to engage with

¹⁴ U.S. Equal Employment Opportunity Commission. Facts About E-RACE. https://www.eeoc.gov/initiatives/e-race/facts-about-e-race#:~:text=The%20most%20frequently%20filed%20claims,from%20opposition%20to%20race%20discrimination. Accessed March 2024.

their child. However, some data in this report suggests parents identified their home visitor as their child's teacher rather than someone who was there to support them to teach their child. Training that reviews the role of the home visitor versus the parent may be beneficial.

• Other training topics. Contractors also suggested training on specific topics such as supporting parents with children who have special needs, the Life Skills Progression family assessment tool, strategies to mitigate substance use-related stigma, father engagement, and navigating their own stress management and compassion fatigue. Some contractors also shared challenges with the ASQ not reflecting relevant experiences and norms. Training on these topics, including refresher training for staff on how to score the ASQ to reflect cultural norms and expectations could be helpful. Some of these topics may also be discussed during contractor meetings (see recommendation below).

Consider expanding opportunities for contractors to meet more regularly. Several contractors noted the helpfulness of the quarterly contractor meetings and suggested even more opportunities to connect with other agencies. Agenda items could include best practices for navigating the Parents As Teachers (PAT) website, strategies used by contractors to translate materials to help ensure they resonate with different priority communities, how to re-establish relationships with schools following the height of the pandemic, recruiting home visitors who reflect the cultural and linguistic diversity of the participants, and navigating caseloads – all challenges contractors raised during interviews.

Continue to prioritize in person home visiting services. Overall, both parents and staff preferred in-home, rather than virtual visits. The hands-on, face-to-face interactions were seen as more effective and engaging, particularly for children. However, some were thankful for the option of a virtual check-in when their child was sick and could not meet, but they still wanted to connect with the home visitor. F5SJ should continue to prioritize in person home visiting services, having the option for parents to meet virtually on an as needed basis. Programs should continue to be attuned to the barriers related to virtual visits such as challenges building rapport with parents as well as equitable access to and comfort with using technology.

Engage contractors in discussions about how to increase and track father engagement. Contractors and participants shared several suggestions to increase father/partner engagement in home visiting. This included refreshing outreach materials to appeal to more fathers/partners (e.g., changing the overall design or "look and feel"), engaging fathers more intentionally in home visiting, and funding programs/services designed specifically for fathers. Engaging contractors in a follow-up conversation will be helpful to identify strategies for engagement given available resources, funding requirements, and staff capacity, as well as what data to collect to more fully understand and track father engagement.

Explore the provision of additional family engagement activities. Several parents suggested more activities for them to do with their children, such as parent-child yoga classes, teddy bear socials, and other community-building events both for parents and children. One parent suggested programs provide more information about other programs/supports once children age out of home visiting services.

Technical Appendix

- Interviews with home visiting participants (n=16). Interviews were conducted with home visiting participants to better understand their experiences with outreach; materials and resources; as well as the format of the home visits. Participants were also asked about the cultural competency of their home visitor as well as any changes their family made because of their participation.
- Interviews with home visiting contractors (n=10). Interviews were
 conducted with staff at agencies implementing home visiting programs.
 Respondents included both home visitors and supervisors. Interviews explored
 respondent perspectives on strategies to reach priority populations; available
 services, materials, and the curriculum; impact on families; efforts to center
 race, equity, diversity, and inclusion; as well as opportunities to improve home
 visiting moving forward.
- Participant survey (HVI n=345, FamilyWORKs n=65). Parents in HVI and FamilyWORKs completed a survey at intake and program exit. The survey contained questions related to family literacy practices and participant characteristics. It also includes a series of measures the Parents' Assessment of Protective Factors (PAPF) that was developed to assess the presence, strength, and growth of parents' self-reported beliefs, feelings, and behaviors. This report includes responses from parents who completed both the pre and post surveys.
- **Client level database.** All F5SJ home visiting programs use the Client and Service database to gather client level demographic and service information for participating families.