



Chief Executive Office  
COUNTY OF LOS ANGELES

# Prevention Services Task Force Meeting

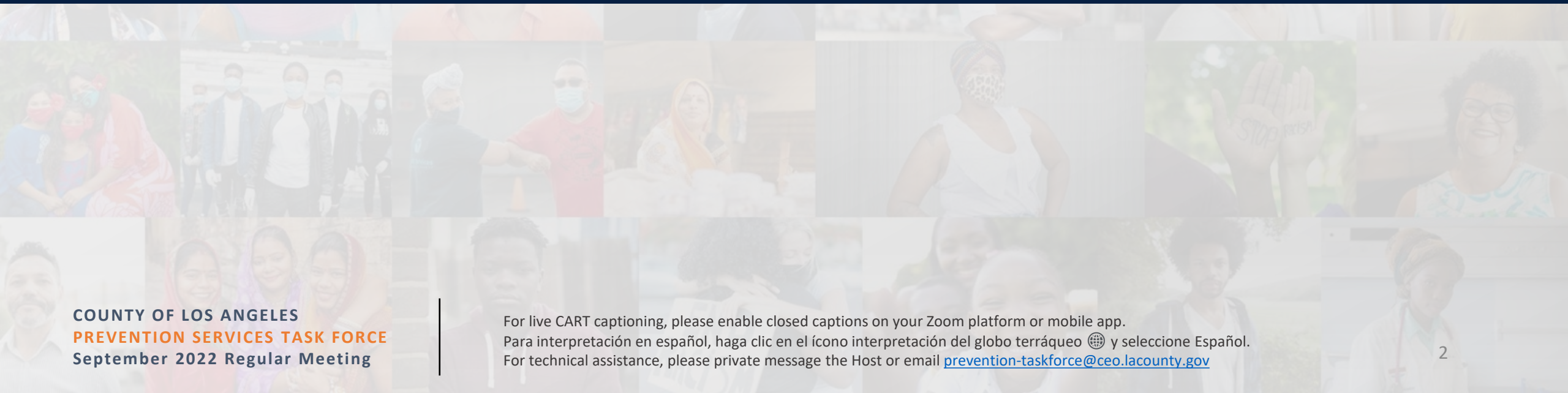
## September 30, 2022





ITEM 2

# MEETING DISCLOSURES



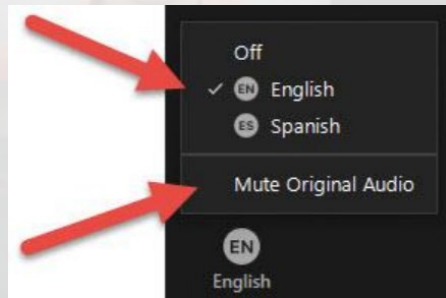
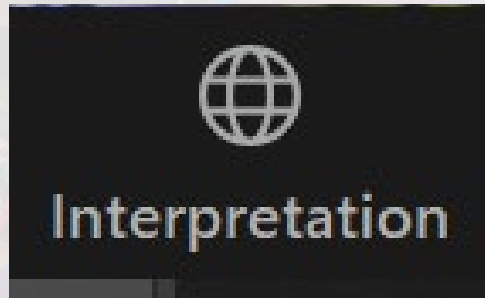
COUNTY OF LOS ANGELES  
**PREVENTION SERVICES TASK FORCE**  
September 2022 Regular Meeting

For live CART captioning, please enable closed captions on your Zoom platform or mobile app.  
Para interpretación en español, haga clic en el ícono interpretación del globo terráqueo 🌐 y seleccione Español.  
For technical assistance, please private message the Host or email [prevention-taskforce@ceo.lacounty.gov](mailto:prevention-taskforce@ceo.lacounty.gov)

# INTERPRETACIÓN EN ESPAÑOL

Para interpretación en español, haga clic en el ícono interpretación del globo terráqueo y seleccione Español.

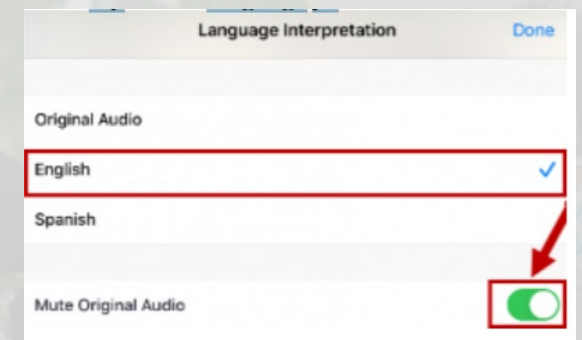
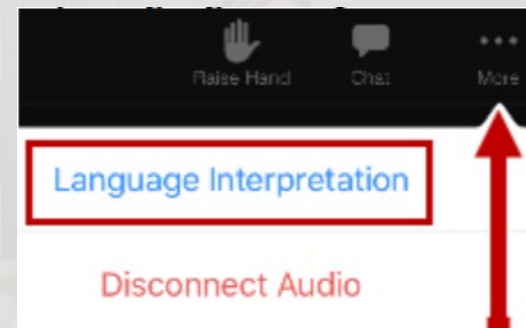
*(For Spanish interpretation, please click on the globe (interpretation) icon and select Spanish.)*



**Teléfono inteligente:**


Toque el botón "..." Más y seleccione Interpretación de idiomas. Luego toque el idioma "Español".

*(Tap the "... " More button and select Language Interpretation. Then tap on the language "Spanish.")*




# LIVE CART CAPTIONING

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please go to **Settings**   
Tap **Meeting**.  
Toggle **Closed Captioning**  
to on.

- **This meeting is being recorded:** for the purpose of meeting minutes and to make the recording available online. By remaining in this meeting, you consent to being recorded.
- **Chat is disabled:** This is a public meeting and subject to the Brown Act. Since conversations and statements on the chat are not visible to people on the telephone and who are unable to participate, the chat function is disabled; however, the host may send out broadcast messages in the chat when needed.
- For anyone experiencing online technical difficulties, telephone dial-in information will also be provided in the chat.

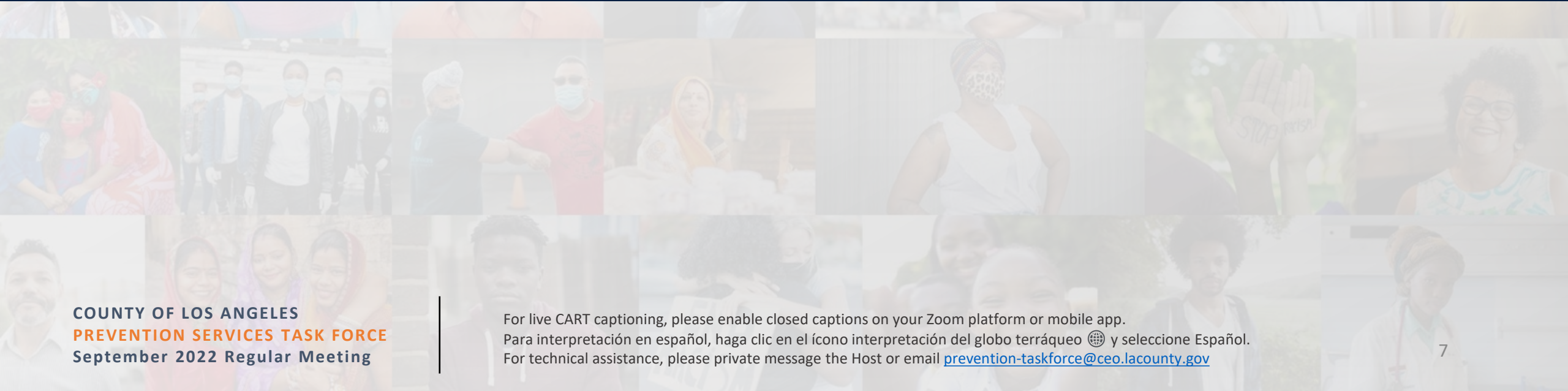


# Land Acknowledgement



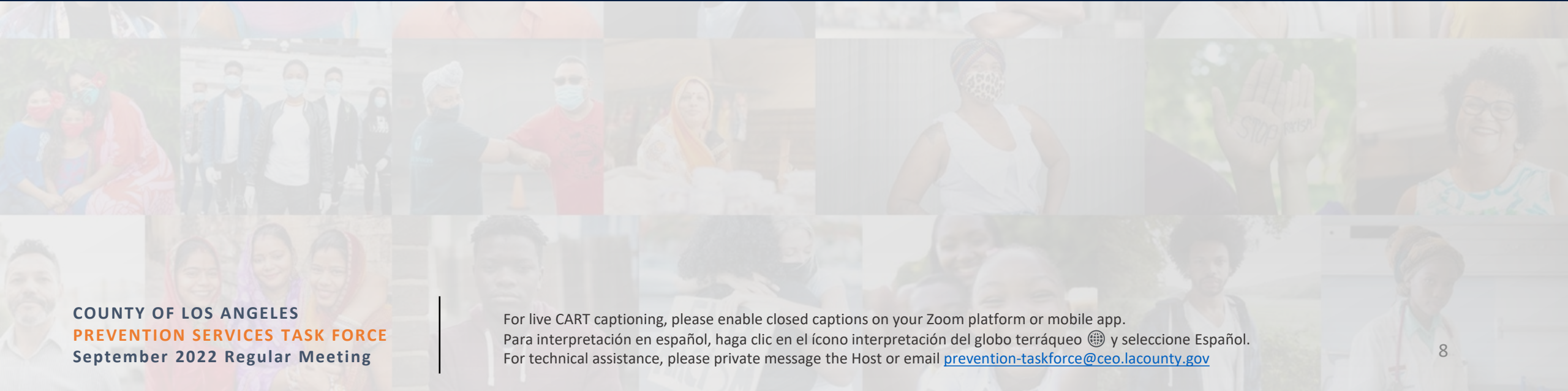
ITEM 3

# WELCOME





# ITEM 4 ROLL CALL





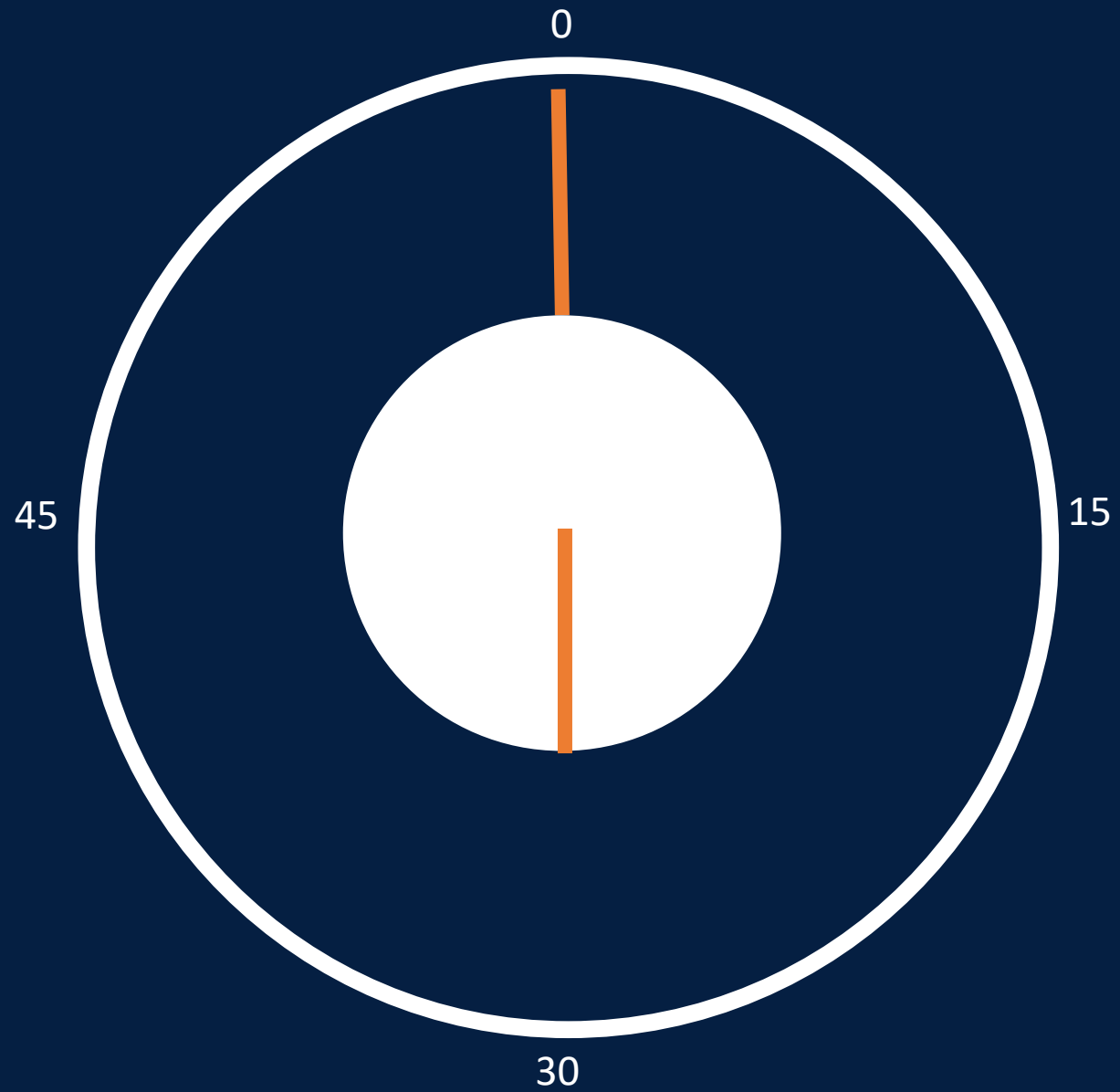


## ITEM 5 **Public Comment**

To address the Task Force and provide public comment on **today's agenda items**, please use the \*raise hand\* feature on Zoom. Use the same feature to lower your hand after your comments.

If you are calling in by phone, dial \*9 on the phone's dial pad to raise your hand. Dial \*9 again to lower your hand. Dial \*6 to unmute when told.

***Each speaker is allowed up to 90 seconds.*** Public comment on other Task Force-related subject matters is scheduled for the end of the meeting.





# ITEM 6

Take appropriate action on the Minutes of the Prevention Services Task Force Regular Meeting of August 19, 2022



# ITEM 7

Task Force & subject area table interdependencies, including current overall progress and intermediate steps to achieving Board deliverables

July

August

September

October

Phase II?

**FEEDBACK AND FINAL AUTHORITY**

Receive, provide feedback on, and formally affirm intermediate deliverables created by the tables (e.g., those listed in the white rectangles on this page)

**FUNDING STREAMS ANALYSIS**

Collection and analysis of program budget data

Consult with County budget and funding experts, including CEO, departmental, and initiative staff

Funding streams analysis

Recommendations and findings for funding streams/programs

**OVERARCHING VISION STATEMENT** (Per TF request, portions of this were moved to the TF to ensure adequate feedback/input)

Collect Task Force, table, benchmarks, and community feedback on vision and vision statement (including survey of community members and County staff)

Adopt vision statement

**DETAILED VISION, FRAMEWORK, AND GOVERNANCE**

Adopt Guiding Principles for Prevention & Promotion

Clarify and affirm range of domains covered under Prevention/Promotion

Adopt Prevention/Promotion Countywide Systems Model

Identify coordinating functions needing to be appropriately aligned across relevant entities

Align coordinating functions to establish governance structure across relevant entities

**GUIDING PREVENTION METRICS**

Identify North Star Life Course Outcomes (LCOs)

Identify Contributing Outcomes and Ecological/Institutional Factors

Elevate disproportionality considerations when utilizing and implementing prevention metrics

Finalize and Adopt guiding prevention metrics

**PROBLEM ANALYSIS: OPERATIONAL BARRIERS AND OPPORTUNITIES TO ADDRESS THEM**

Identify overarching buckets operational barriers hindering coordinated service delivery in prevention and promotion

Brainstorm and discuss solutions to address barriers, utilizing community defined expertise and best practices from existing County initiatives

Provide preliminary recommendations to address operational barriers, including governance structure considerations and pilot programs

Deliver report to Board with recommendations to coordinate and effectuate a comprehensive community-based prevention services delivery system

Begin work on next phase of recommendations, including receiving community feedback on preliminary report, approving table deliverables, and other overarching items

Ongoing: Resolve and operationalize governance structure functional alignment, including accountability concerns

Ongoing: Data Analytics and Targeted Policies to Address Racial Disproportionality, more detailed focus on LCOs and prevention metrics

Ongoing: Continue to coordinate implementation, including data systems integration and user journey mapping

**Task Force level**  
(launched 3/3)

From March to June, focused on background information gathering, table setting, definitions for prevention and promotion, official charter, assembly of table rosters, community engagement, and development of project plans for intermediate deliverables

**Framework Table**  
(launched 8/5)

**Disproportionality Table**  
(launched 7/22)

**Coordination Table**  
(launched 6/16)



# ITEM 8

Report out and updates on actions taken across  
subject area tables by respective co-chairs

# ITEM 8A: PROBLEM ANALYSIS, OPERATIONAL BARRIERS

## *PROBLEM ANALYSIS TO IDENTIFY OPERATIONAL BARRIERS AND OPPORTUNITIES TO ADDRESS THEM*

Problem identification and operational barriers to effectuating the delivery and coordination of community-based prevention services (Coordination Table)

Co-chairs: Minsun Meeker, Laura Trejo

Identify overarching buckets operational barriers hindering coordinated service delivery in prevention and promotion

Brainstorm and discuss solutions to address barriers, utilizing community defined expertise and best practices from existing County initiatives

Provide preliminary recommendations to address operational barriers, including governance structure considerations and pilot programs

# USER JOURNEY ANALYSIS

**Structural barriers and existing systems** preventing a collaborative culture where there is shared accountability and coordination can be most effective

(e.g., bureaucratic hurdles, lack of dedicated staff time and funding for coordination, ad hoc efforts not supported at scale)

**Statutory requirements and regulatory limitations** hampering multidepartmental coordination efforts, including braided/blended funding

Lack of capacity across systems in **data sharing and integration** to better serve clients

**User navigation barriers** hindering folks from accessing the array of services available to them

**Lack of services tailored to client needs**

(e.g., language access barriers, culturally appropriate and community-specific services)

**Community distrust/hesitancy engaging with government systems**

(e.g., due to historical and ongoing marginalization and negative lived experiences)

**Ad hoc approach to community partnerships**, which hinders meaningful relationships, shared decision making, and co-creation of effective solutions

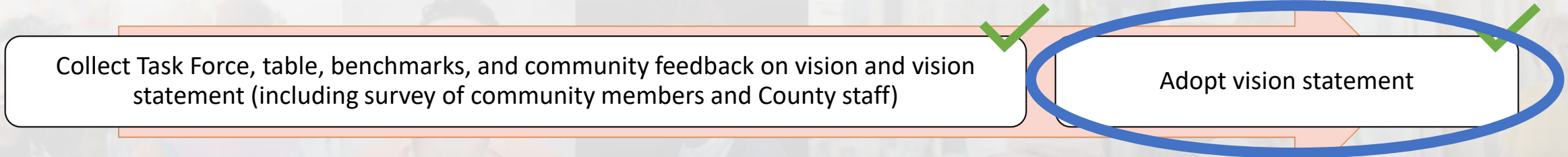


# ITEM 8B: VISION AND MODEL

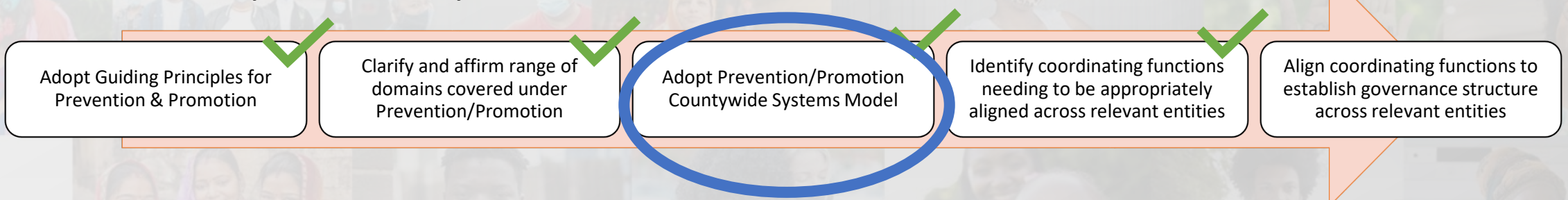
## Vision Statement and Countywide Prevention/Promotion Systems Model (Framework Table)

Co-chairs: Meredith Berkson, Angela Parks-Pyles

### OVERARCHING VISION STATEMENT



### DETAILED VISION, FRAMEWORK, AND GOVERNANCE

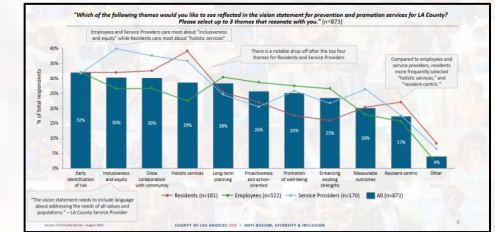


# Vision Statement Development Process

The vision statement process has used feedback and insight from multiple sources

<b>LA County</b> Chief Executive Office	<b>Vision:</b> Establish superior services through inter-Departmental and cross-sector collaboration that measurably improves the quality of life for the people and communities of Los Angeles County. <b>Mission:</b> A value driven culture, characterized by extraordinary employee commitment to enrich lives through effective and caring service, and empower people through knowledge and information.
<b>San Diego County</b>	<b>Diversity &amp; Inclusion values:</b> The County of San Diego is committed to building a region that is Building Better Health, Living Safely, and Thriving. <ul style="list-style-type: none"> <li>Building better health: Improving the health of residents and supporting healthy choices</li> <li>Living safely: Ensuring residents are protected from crime and abuse, neighborhoods are safe, and communities are resilient to disasters and emergencies</li> <li>Thriving: Cultivating opportunities for all people and communities to grow, connect, and enjoy the highest quality of life</li> </ul>
<b>Nebraska</b> Department of Health and Human Services	<b>Vision:</b> Nebraska's culturally diverse populations are as healthy as possible. <b>Mission:</b> Promote and support the advancement of health equity in Nebraska using data, partnerships, funding, training and technical assistance.
<b>Washington</b> Department of Children, Youth and Families	<b>Vision:</b> All Washington's children and youth grow up safe and healthy thriving physically, emotionally, and educationally, nurtured by family and community. <b>Mission:</b> Protect children and strengthen families so they flourish.
<b>Washington, D.C.</b> Child & Family Services Agency	<b>Vision:</b> Children and families are stable and thriving within their communities. <b>Mission:</b> CFSA works to improve the safety, permanence, and well-being of abused and neglected children in the District of Columbia and to strengthen their families.

Incorporated best practices from external benchmarks of jurisdictions such as San Diego, Nebraska, Washington, and Washington DC



Received over 800 responses from LA County staff and residents articulating what is important to focus on and what the county can improve



Incorporated feedback from stakeholders throughout the process on how to engage the community, what are the primary goals, and more



Primary themes from vision statement workshop					
Value-related themes	Process-related themes	Outcome-related themes	Measurable outcomes	Early identification of risk	Equity
<ul style="list-style-type: none"> <li>Provide working people and address their needs</li> <li>Build a more resilient workforce</li> <li>Clear the obstacles and address their needs</li> <li>Focus on the children who need it the most</li> </ul>	<ul style="list-style-type: none"> <li>Clear collaboration with the community</li> <li>Be action-oriented, focusing on the impact of the solution</li> <li>Empower the community to lead the way</li> </ul>	<ul style="list-style-type: none"> <li>Clear vision of the future</li> <li>Long-term planning</li> <li>Both off of existing strengths</li> <li>Build on existing strengths</li> <li>Build on existing strengths</li> </ul>	<ul style="list-style-type: none"> <li>Define programs with the residents in mind</li> <li>Build on existing strengths</li> <li>Build on existing strengths</li> </ul>	<ul style="list-style-type: none"> <li>Generate more visibility into other programs</li> <li>Measure outcomes</li> <li>Generate more visibility into other programs</li> </ul>	<ul style="list-style-type: none"> <li>Enhance identification of risk</li> <li>Improve outcomes</li> <li>Improve outcomes</li> </ul>

COUNTY OF LOS ANGELES CEO - ANTI-RACISM, DIVERSITY & INCLUSION

Incorporated primary themes from vision statement workshop from July's Task Force meeting, including the desire for a broad scope and promotion orientation

# Vision Statement

Based on input from the Community Survey, key stakeholders, and external research, the Framework Table aligned on a bold vision statement for comprehensive prevention and promotion services in LA County

*LA County delivers an **equitable, community-driven, and holistic** prevention and promotion model to enable a safer, stronger, thriving, and more connected community.*

- **Equitable:** *addressing root causes that lead to inequitable life outcomes*
- **Community-driven:** *sharing decision-making and co-creating solutions in partnership with community members, with particular emphasis on lived expertise and marginalized communities*
- **Holistic:** *breaking down silos to provide a continuum of support and ensure everyone thrives across every stage of life*

# COUNTYWIDE SYSTEMS MODEL

## Why establish a new Countywide framework for Prevention and Promotion, including standardizing tier definitions?

- Terminology and usage of prevention and promotion models vary widely, both in LA County and elsewhere. The further we desire moving upstream, the more we as a County need to be aligned under a common understanding of the overarching goals of our prevention and promotion services
- Existing models in use rarely incorporate an explicitly anti-racist and/or structural lens to prevention – including how our social conditions heavily influence whether individuals are more likely to experience positive or negative outcomes. Many models also do not name **promotion** of well-being thriving as a necessary complement to prevention.
- To honor our guiding principles and the lived expertise on our Task Force and in our communities, **LA County has an opportunity to establish a new model that challenges, further contextualizes, and builds upon existing notions regarding prevention and promotion.**

# SYSTEMS MODEL PROCESS

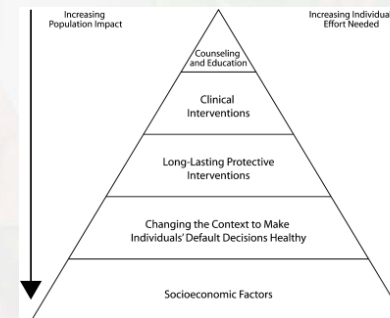
## 1. Research, analyze, and compare existing prevention models in use across federal, state (California) and local county agencies, including LA County, or initiatives.

### Summary of Findings:

- Lack of common definitions – some models defined by level of risk, while others organized tiers by level of involvement with systems or the degree to which a disease had progressed
- Few models acknowledge social conditions (e.g., structural and systemic racism and other –isms) and how they heavily impact risk
- Few models explicitly incorporate promotion beyond passing mention
- Models are often framed around paternalistic *interventions*, rather than solutions co-created with community that provide *support and resources* to help people thrive

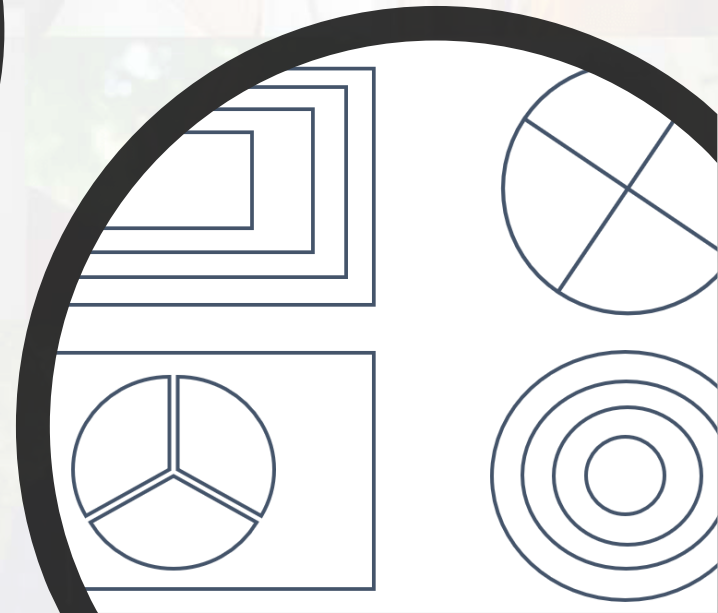
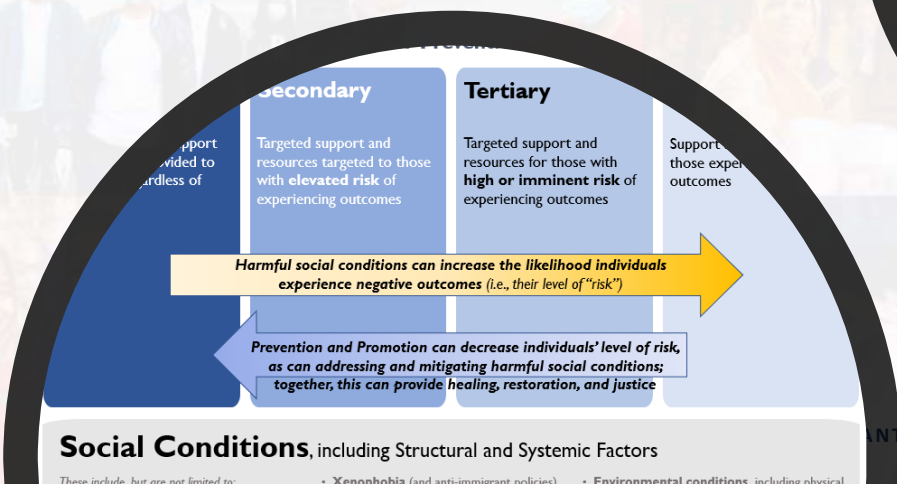
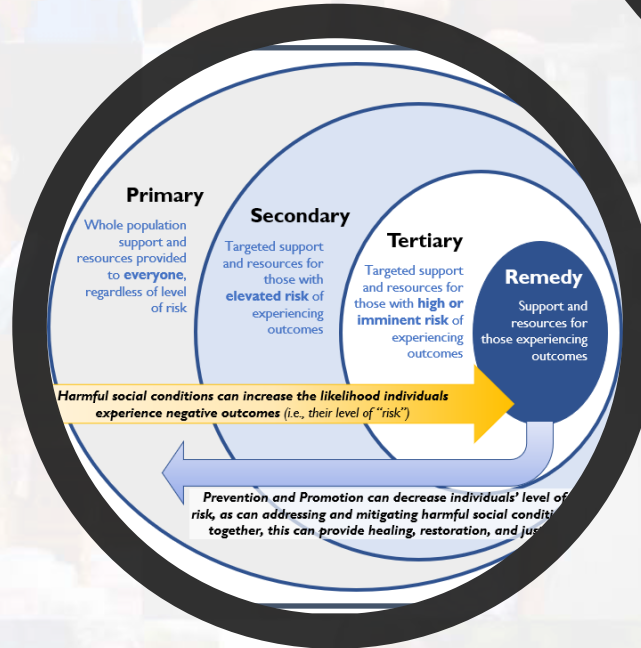
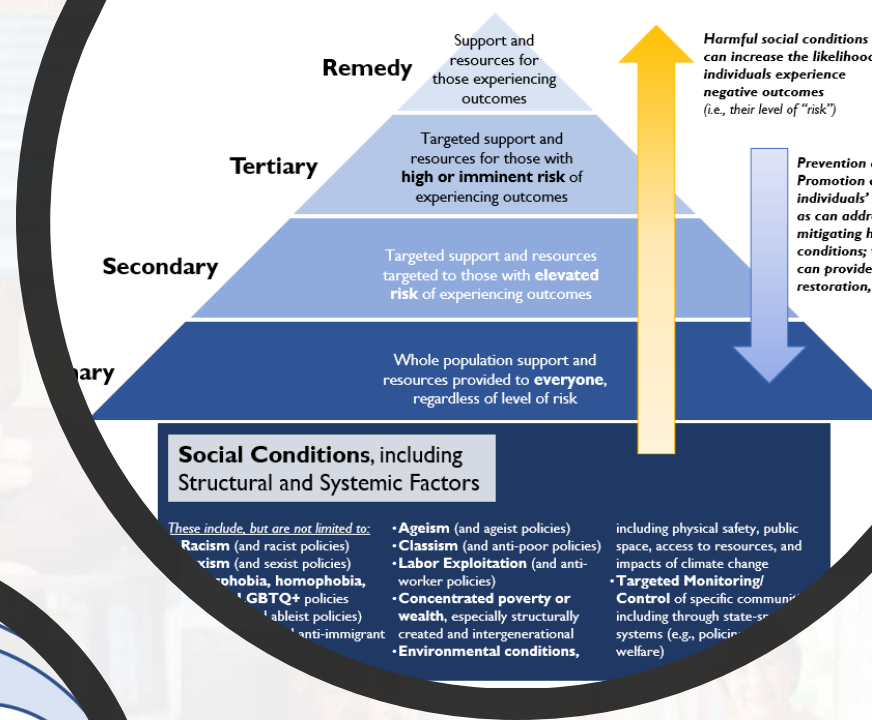
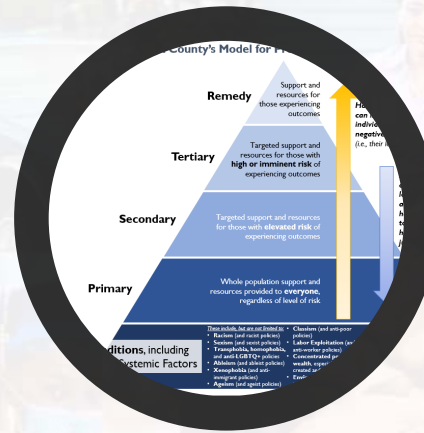
Source	Primary	Secondary	Tertiary
<b>LA County Prevention Services Task Force – Framework Table Proposal</b>	Whole population support and resources provided to everyone, regardless of level of risk	Support and resources for those with elevated risk of experiencing outcomes	Support and resources for those with high or imminent risk of experiencing outcomes
CDSS: <a href="#">Framework</a> for Preventing Child Abuse by the Promotion of Healthy Families & Communities; March 2022 ACI, on CPP	"Directed at the <b>general population</b> to strengthen communities and improve child well-being by focusing on <b>SDOH</b> ."	"Offered to populations that have one or more <b>risk factors</b> associated with compromised well-being"	"Focus on families where child <b>maltreatment</b> has occurred"
Children's Bureau (ACF/HHS): <a href="#">Framework</a> for Prevention of Child Maltreatment	Universal: "directed at general population to prevent maltreatment before it occurs"	High risk: "targeted to individuals/families in which maltreatment is more likely"	Indicated: "targeted toward families in which maltreatment has already occurred"
National Institute on Drug Abuse (NIH): <a href="#">Diagnosis and Treatment of Drug Abuse in Family Practice</a> (2022)	"Helping at-risk individuals avoid the development of addictive behaviors"	"Uncovering potentially harmful substance use prior to the onset of [problems]"	"Treating the medical consequences of drug abuse and facilitating entry into treatment"
CDC: <a href="#">Picture of America – Prevention</a> (2016)	"Intervening before health effects occur"	"Screening to identify diseases in the earliest stages, before onset of [symptoms]"	"Managing disease post diagnosis to slow or stop disease progression through [treatment]"
U.S. Interagency Council on Homelessness, Attachment to Federal Strategic Plan (2010)	"Initiatives [that] prevent new cases" but also may go downstream for those "very likely to become homeless without assistance"	"Identifies and addresses a condition at its earliest stages" – "does not reduce number of cases, but treats conditions [early on]"	"Slow the progression or mitigate the effects of a particular condition"
LA County Commission for Children and Families: <a href="#">Prevention Workgroup Competency Plan</a> (2005)	Universal: "Target the general population," "support families so they can provide the best possible care for their children"	High risk/inconclusive: "Target families who may have a special need for supportive services or who have been identified as being at higher risk for maltreatment"	Substantiated cases of maltreatment: "Target families when abuse/neglect has already occurred," "try to prevent further maltreatment and reduce [its] negative consequences"
LA County DCFS/Casey: <a href="#">Prevention Initiative Demonstration Project</a> (2009)	"Families not known to DCFS"	"Families known, but with no open case"	"Families already part of the system"
Children's Data Network: <a href="#">LA County Dual System Report for DCFS and Probation</a> (2021)	"Community-based supports for families"	"Services to mitigate and address risk"	"Continuing services for families during and after their involvement with [systems]"
Health Impact Evaluation Center for DPH/CEO-Homeless Initiative <a href="#">Measure H: Assessment</a> (2017)	"Seeks to prevent onset of health conditions before they occur" (but uses "at-risk" examples e.g., benefits advocacy/eviction services)	"Seeks to detect health conditions in their earliest stages"	"Seeks to minimize the consequences of established health conditions"

Pictured above: Comparative chart of prevention models/definitions. To read in detail, see [Ftable Meeting Slides for 9/16, slide 13](#)



Pictured left: [A Framework for Public Health Action: The Health Impact Pyramid](#) by Thomas Frieden, brought to the Ftable by Member Allen (DPH) to help inform our discussions

## 2. Workshop and experiment with different shapes, visual representations, and language for the values and ideas we want to convey



# LA County's Model for Prevention and Promotion

3. Collaboratively finalized a new recommended framework for LA County, unanimously adopted by the Framework table:

## Social Conditions

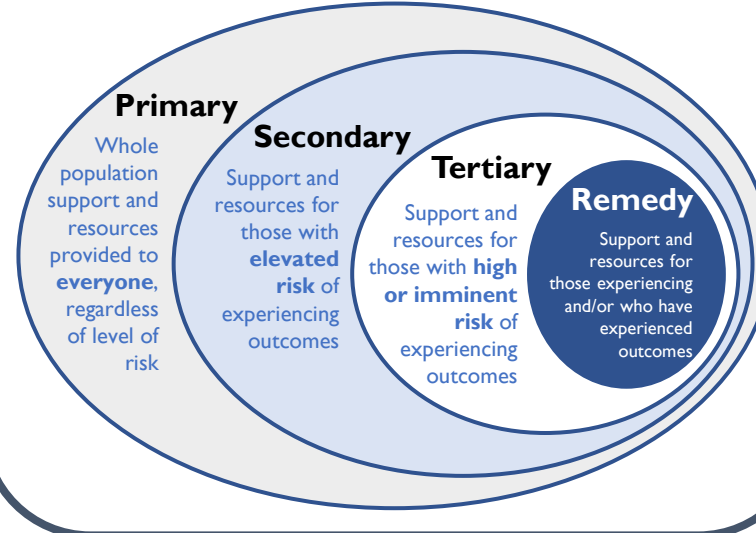
The intersecting structures and systems that shape our lives and influence our likelihood of experiencing positive and negative outcomes (i.e., level of risk).

These conditions are often created by and/or reinforced through government policy, resulting in both positive resources (e.g., public health, parks) and negative forms of harm and control (e.g., racism, ableism, concentrated poverty, environmental hazards, etc.).

## Equitable Decision-Making & Community Agency

Policies and practices to ensure community voices (especially those with lived expertise) inform and shape how we deliver support and resources, especially to historically marginalized communities.

### Levels of Risk & Prioritized Support



## Prevention

Support and resources to stop the occurrence and/or worsening of negative population outcomes, harm, and suffering.

## Promotion

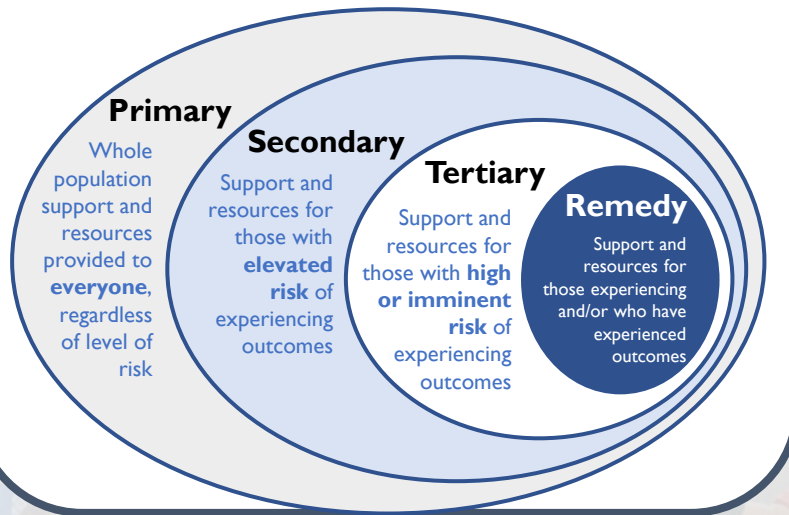
Support and resources to strengthen the occurrence of positive population outcomes, well-being, and thriving.

*Prevention and promotion can decrease individuals' level of risk, as can addressing and mitigating harmful social conditions through equitable decision-making and community agency. Together, this can cultivate healing, restoration, and justice.*

The definitions and tiers for prevention and promotion **vary widely** across and *even within* domains. Given the lack of consensus, **LA County must establish its own definitions and common understanding.**

Based off table conversations and member feedback, we recommend the adoption of the following four tiers displayed to the left, with the following considerations:

## Levels of Risk & Prioritized Support



- **These definitions are not intended to be rigid or overly prescriptive:** many individuals can “exist” at multiple levels of risk depending on their outcome or personal situation. Instead, we delineate and name these levels of risk and prioritized support, *so that we can ensure all County services are operating across a continuum of support and resources that address needs at varying levels of risk* (including those determined largely by social conditions).
- **Explicit inclusion of primary, whole population resources,** which is missing from some models – we note that all individuals can benefit from whole population supports, including some cases where individuals at imminent risk or who are already experiencing outcomes can benefit from whole population services.
- **Intentional distinction between levels of risk:** Some models lump elevated and high/imminent risk together, but we believe that these populations require distinctly different resources and supports:
  - Secondary refers to those with “**elevated risk**,” including those with elevated lifetime risk due to social conditions and systemic factors (e.g., racism, ableism, intergenerational poverty)
  - This is contrasted with Tertiary, which includes folks who demonstrate indicators proximate to the outcomes (i.e., likely that something might happen soon; **imminent risk**)
  - Rather than drawing strict lines between these two levels of risk, we leave it to individual departments/program providers to use their best judgment between what services are required at either level
- **Additional of Remedy:** Some models only cover “prevention,” which can fail to acknowledge needs or unaddressed trauma from outcomes that are currently occurring or previously occurred.
- **We recommend maintaining the Primary/Secondary/Tertiary grouping to avoid confusion about tiers.** (E.g., although California’s CDSS framework adopts a Universal/Targeted/Indicated model, it still uses the Primary/Secondary/Tertiary nomenclature.)



# LA County's Model for Prevention and Promotion

## Social Conditions

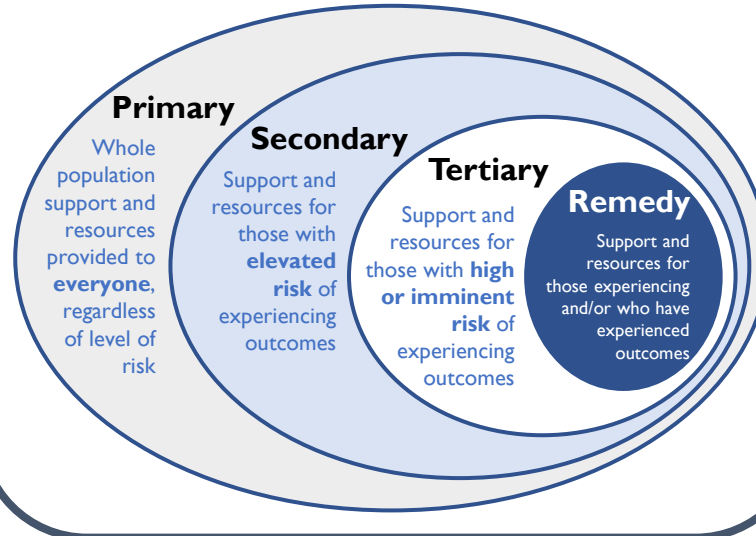
The intersecting structures and systems that shape our lives and influence our likelihood of experiencing positive and negative outcomes (i.e., level of risk).

These conditions are often created by and/or reinforced through government policy, resulting in both positive resources (e.g., public health, parks) and negative forms of harm and control (e.g., racism, ableism, concentrated poverty, environmental hazards, etc.).

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### Levels of Risk & Prioritized Support



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Support and resources to strengthen the occurrence of positive population outcomes, well-being, and thriving.

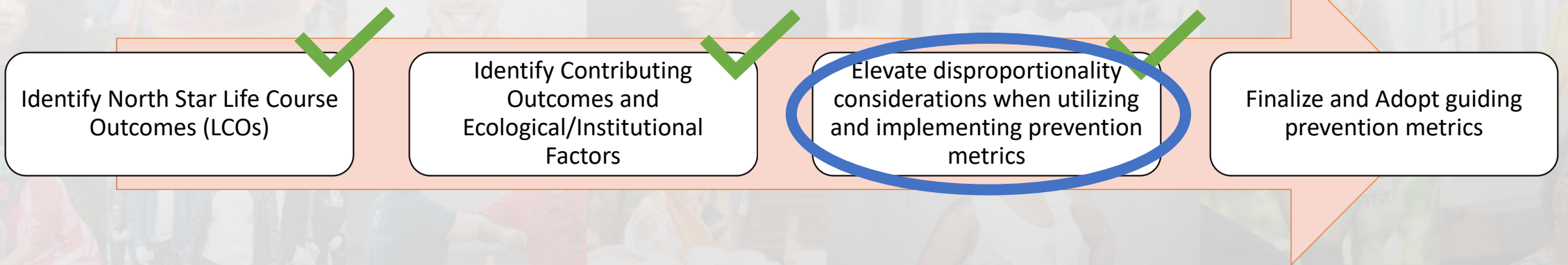
*Prevention and promotion can decrease individuals' level of risk, as can addressing and mitigating harmful social conditions through equitable decision-making and community agency. Together, this can cultivate healing, restoration, and justice.*

# ITEM 8C

## Intermediate steps for guiding prevention metrics (Disproportionality Table):

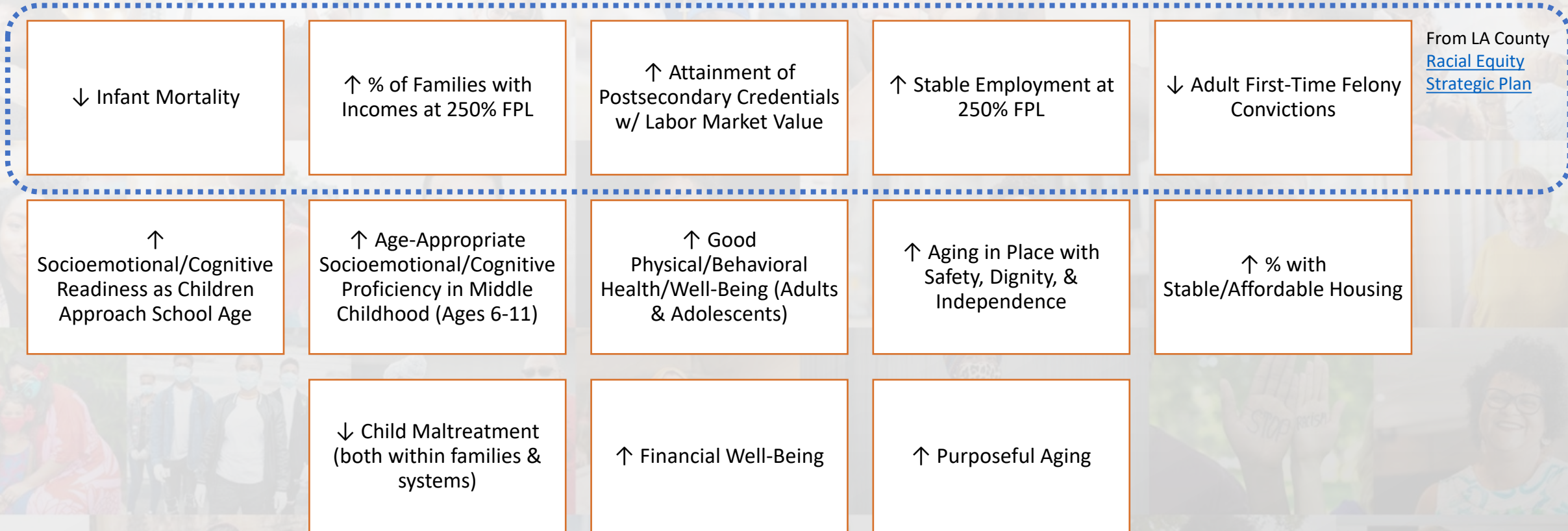
Co-chairs: Irene Vidyanti, Tamara Hunter

### GUIDING PREVENTION METRICS



# PREVENTION AND PROMOTION OUTCOMES

As a reminder, the Disproportionality table previously ratified the following life course outcomes, which were updated per TF feedback:



# DISPROPORTIONATELY IMPACTED POPULATION CATEGORIES

## Population subgroups/categories identified for elevated focus,

including through coordinated data collection/metrics capture, synthesis, and subsequent policy/program design:

- Race/ethnicity
- Disability (inclusive of physical, cognitive, learning, etc.)
- Sexual orientation/gender identity/expression (SOGIE)
- Limited English proficiency
- Immigrant and/or foreign-born (including careful strategies to support undocumented communities without exacerbating risk or harm)
- Unhoused/have experienced homelessness
- Justice impacted
- Single parents
- Age (focus on data on older adults, particularly those living alone and/or low income)
- Foster/Transition Aged Youth (TAY)
- Severe mental illness
- Substance abuse populations

# Elevated considerations relating to disproportionality across life course outcomes

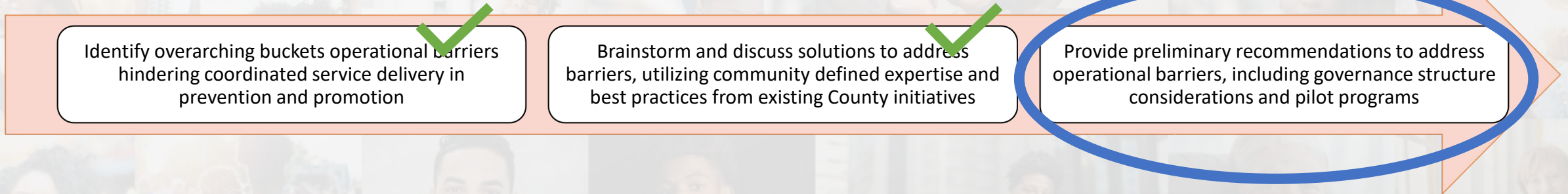
## EXAMPLES BELOW

Life Course Outcome	Known concerns and/or suspected concerns requiring additional study	Actionable solutions for further exploration
<p>↑ Aging in Place with Safety, Dignity, &amp; Independence</p>	<ul style="list-style-type: none"> <li>• Language/cultural isolation and ability for POC elders/immigrants to access safe living spaces</li> <li>• Financial stability/wealth gap shaped by structural and systemic racism, etc.</li> <li>• Disparate access to transportation/transit due to vehicle costs or ableism</li> </ul>	<ul style="list-style-type: none"> <li>• Increasing affordable senior housing, including for culturally and linguistically specific communities</li> <li>• Disability resource centers</li> <li>• Programs to promote social connectedness for older adults, including through broadband access and digital literacy</li> <li>• Enhanced transit and transportation services for older adults, especially those with disabilities</li> </ul>
<p>↑ Age-Appropriate Socioemotional/Cognitive Proficiency in Middle Childhood (Ages 6-11)</p>	<ul style="list-style-type: none"> <li>• Impact of social media, especially related to harmful content/messages, inappropriate or predatory content, and cyberbullying especially targeted toward marginalized young people (includes racial digital divide issues)</li> <li>• Exclusionary and unsupportive (e.g., anti-LGBT, racist, ableist, etc.) school environment interfering with education and well-being</li> <li>• Limited English proficiency students facing intersectional challenges, often compounded with limited parental access to resources due to language access, immigration concerns, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensuring access and visibility of role models and stable adult presence for youth with marginalized identities/experiences</li> <li>• Increasing availability of after school programs in specific neighborhoods with culturally relevant and affirming programming</li> <li>• Bridge digital divide and ensure communities of color in LA County have access to technology (e.g., laptop/computer access) and quality internet service</li> <li>• Expansion of dual language immersion, additional language learning programming</li> <li>• Ensuring inclusive and explicitly anti-racist, LGBTQ-affirming school environments</li> </ul>

# ITEM 8D: ADDRESS BARRIERS THROUGH GOVERNANCE AND ALIGNMENT OF FUNCTIONS

Identified coordinating functions that must be appropriately aligned and resourced across relevant entities to address existing operational barriers (Coordination Table, Framework Table)

Co-chairs: Minsun Meeker, Laura Trejo / Meredith Berkson, Angela Parks-Pyles (respectively)



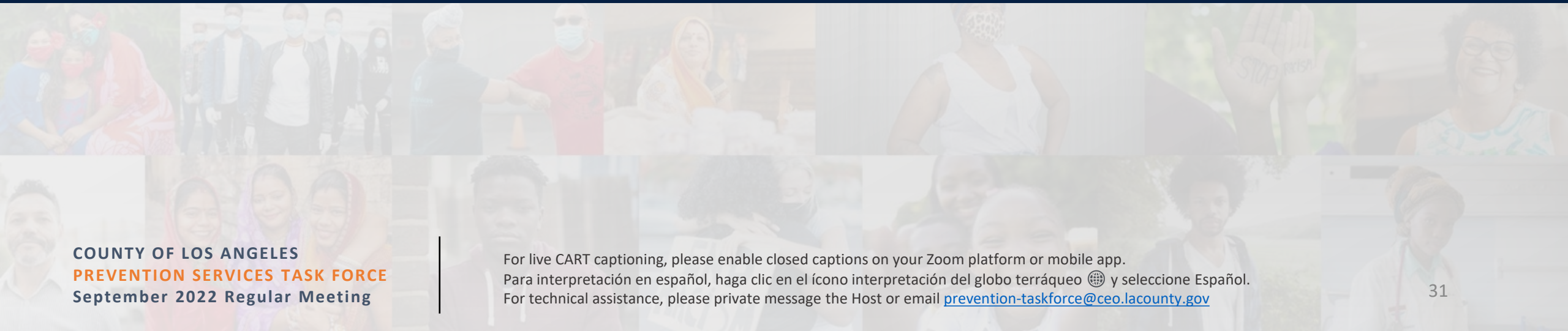
- Clarified authority & responsibility to coordinate prevention/promotion funding, including long-term strategy and sustainability across all relevant departments
- Data sharing and integration oversight
- Coordinated approach and support for departments to conduct federal/state/local policy advocacy **focused on holistic prevention and promotion**

## Coordinated management to support community stakeholders & sustain County investments:

- Countywide approach & dedicated funding to support Community Members with Lived Expertise involved in policy and program development
- Countywide approach & dedicated staffing for language access
- Countywide approach to partner with community-based providers (who are already providing holistic services) and facilitate pipeline/human capital back and forth between County



# ITEM 9: CONSIDERATIONS FOR OPERATIONALIZING PREVENTION AND PROMOTION SYSTEM



# This Task Force was convened to recommend **governance changes** that will lead to an improvement in the **livelihoods and wellbeing** of people in Los Angeles County

## A coordinated and comprehensive prevention and promotion system is grounded in community needs first

- ▶ **Governance** of this vision **needs to center the lived experiences** of those interacting with prevention systems and support a move towards promotion
- ▶ We should all be **challenging our current understanding of “what works”** across departmental silos

## This need to look across siloes has been underscored by the Board and community members

From the *2021 CEO Report on Reimagining Safety Health and Human Services for the County’s Children and Families*:

- ▶ The **lack of integration and coordination** across the many existing prevention efforts **hinders the County from addressing longstanding disparate outcomes** based on the social determinants of health

From the August Community Survey:

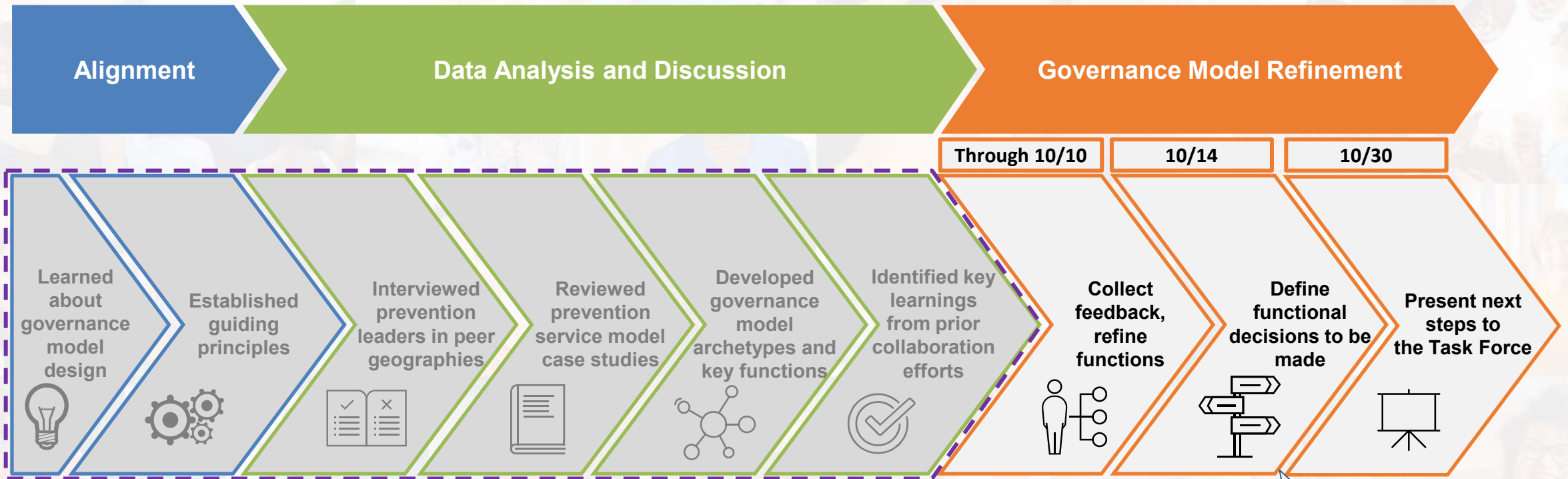
- ▶ Over 800 residents, employees, and service providers indicated that **stronger coordination across agencies is a top priority**
- ▶ Residents listed **holistic services** as a top priority in our community survey

## There is an imperative to “do things differently”

- ▶ LA County’s current efforts operate in a distributed fashion
- ▶ More coordination will necessitate **clarified responsibilities and clear leadership on** key functions to enable coordination
- ▶ **We must find a way to learn from prior coordination efforts to meet the needs of our community**



The Framework Table reviewed case studies from other geographies, and received feedback from key stakeholders, to inform the governance model



**Legend:**



Small working group to convene between these two steps to discuss approaches to community partnership

# Keys to success in interagency collaboration based on prior coordinating initiatives in LA County

Sources: 1:1 interviews with Task Force/table members, Coordination & Framework table discussions, secondary research

## ✓ Best Practices

## ✗ Challenges from Prior Efforts

Function Group #1

### Coordination and programming

- Alignment on the vision and goals (e.g., holistic prevention lens)
- Clarity on activities/communication to involved departments
- Subcommittees or teams to coordinate across agencies
- Flexibility in adapting governance based on stakeholder input
- Outline clear long-term priority areas for programming

- Programming agendas created in silos or by individual departments, rather than with a Countywide/cross-domain lens
- Disempowerment of departments/agencies (reporting, ability to advocate for needs)
- *[Tradeoff with prior point]* Insufficient accountability / power / functional responsibility given to coordinating body / leader

Function Group #2

### Budgeting, funding, contracting, and legal

- Clear and achievable funding objective
- Joint ownership of funding with the community to avoid the perception that an initiative/program is a fundraising arm
- Economic incentives for agencies

- Lacking visibility into funding across agencies
- Lack of funding autonomy for individual offices / departments
- Ignoring effects of statutory requirements and regulatory limitations

Function Group #3

### Staffing and delivery

- Community nonprofit contribution to service delivery
- Specific scope for service offerings
- Expertise and experience with anti-racism, equity, and inclusion
- Fostering cross-agency relationships is essential but not sufficient
- Coordination with local officials for delivery solutions

- Service delivery controlled exclusively by one body
- Disregarding unique coordination / communication needs for each service delivery worker group
- Lack of services tailored to residents' needs
- User navigation barriers hindering service access

Function Group #4

### Community partnerships and co-creation

- Dedicated organization for community input and NGO partnership, including dedicated funding for those involved in program development
- Community relationships with agency leadership
- Shared vision to draw support and excitement
- Understanding how to incorporate existing community initiatives

- Excluding community partners from design/ implementation efforts
- Lack of “phased transitions” in governance models to familiarize the departments and community with change
- Limited connections among community stakeholders themselves
- Ad hoc approach to community partnerships

Function Group #5

### Data and IT

- Dedicated system for data coordination
- Developing agreed-upon measures of success that are data-driven
- Using data to create resource guides and informational materials for stakeholders
- Identifying gaps in data sharing / monitoring that would be helpful

- Lack of metrics that indicate progress
- Lack of data sharing across agencies
- Relying on publicly available agency / department data

The C&I Table’s preliminary feedback for functions that could be aligned and resourced across appropriate entities to address existing barriers:

*(Note: These are not yet official recommendations, but reflect ongoing discussions)*

The C&I Table has discussed multiple functions to be aligned, resourced, and strengthened, including:	The Framework Table has identified the following essential functions that align with the C&I Table’s feedback:
<ul style="list-style-type: none"> <li>• Facilitating cross-system navigation</li> </ul>	<ul style="list-style-type: none"> <li>• Coordination, Collaboration &amp; Communication</li> </ul>
<ul style="list-style-type: none"> <li>• Clarified authority and responsibility to coordinate and maximize <b>holistic prevention and promotion</b> funding sustainably</li> </ul>	<ul style="list-style-type: none"> <li>• Funding Acquisition and Management</li> </ul>
<ul style="list-style-type: none"> <li>• Data sharing and integration oversight, especially with regard to service delivery and prevention outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• Data Tracking/Metrics</li> </ul>
<ul style="list-style-type: none"> <li>• Coordinated management to support community stakeholders and sustain county investments in supporting communities</li> </ul>	<ul style="list-style-type: none"> <li>• Co-Creating Solutions with Community</li> </ul>
<ul style="list-style-type: none"> <li>• Coordinated approach to policy advocacy for <b>prevention and promotion specifically</b> (e.g., federal/state/local)</li> </ul>	<ul style="list-style-type: none"> <li>• Policy and Agenda Setting</li> </ul>
<ul style="list-style-type: none"> <li>• Dedicated funding and staff time <i>within departments</i> to support multidepartment coordination, not only for the coordinating entity.</li> </ul>	<ul style="list-style-type: none"> <li>• Staffing for Coordination</li> </ul>

## Embedded Model

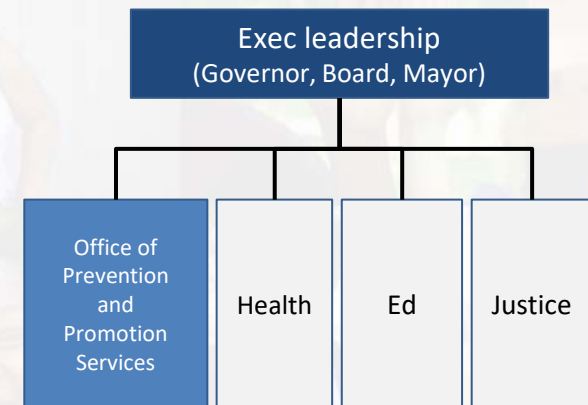
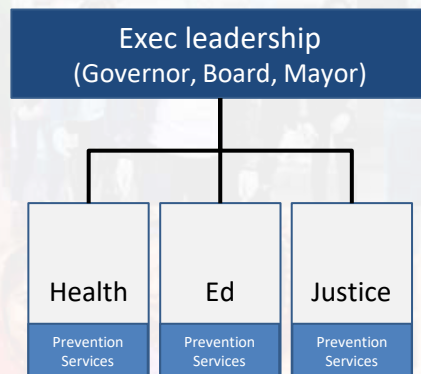
- ▶ **Description:** prevention services are **embedded into individual agencies**, which report to their parent organizations
- ▶ **Degree of Change:** this model would be the most similar to the current structure of LA County. This model has been coined **“the status quo”** model
- ▶ **Function Accountability:** the majority of functions remain owned by individual **departments** (i.e., departments have the primary accountability)
- ▶ **Tradeoffs:** this model is the fastest and easiest to stand up using existing infrastructure, but has little central accountability for prevention and promotion services

## Coalition Model

- ▶ **Description:** responsibilities for prevention services are **led by one coordinating entity**, which oversees the prevention services of the departments underneath it
- ▶ **Degree of Change:** this model would be a meaningful shift towards centralized authority while still maintaining distributed expertise within departments (and limiting the reorganization of departments)
- ▶ **Function Accountability:** functions are distributed or **shared** between the Office of Prevention Services (OPPS) and Departments (i.e., OPPS and Departments may have either primary or secondary responsibility)
- ▶ **Tradeoffs:** this model offers some central accountability with a moderate amount of time to stand up, but lacks the high degree of coordination found in the standalone model

## Stand-alone Model

- ▶ **Description:** prevention services are **carved out from agencies** into one organization reporting directly to executive leadership
- ▶ **Degree of Change:** this model represents the largest departure from current practice in LA County. This model has been coined **“the superagency”** model
- ▶ **Function Accountability:** the majority of functions are owned by the **Office of Prevention Services** (i.e., OPPS has primary accountability)
- ▶ **Tradeoffs:** this model offers high authority to enforce collaboration, but would take years to stand up



This model is closest to where LA County is now

Degree of centralization in the governance model will be determined by **which entities holds accountability for key functions**

Function Group #1	Coordination, Collaboration & Communication	<ul style="list-style-type: none"> <li>Spearheading coordination efforts that span multiple agencies, reducing role confusion and duplication, braiding funding opportunities</li> </ul>
	Policy and Agenda Setting	<ul style="list-style-type: none"> <li>Advocacy and lobbying for key initiatives, including additional funding, and conducting federal, state, and local policy advocacy</li> </ul>
	Programming Decisions	<ul style="list-style-type: none"> <li>Owning program decisions in the relevant areas of opportunity (e.g., which programs to start, how to manage activities of existing programs)</li> </ul>
Function Group #2	Budgeting	<ul style="list-style-type: none"> <li>Operating a strategic approach to identify and maximize funding sources that will support the activities articulated in the vision</li> </ul>
	Funding Acquisition & Management	<ul style="list-style-type: none"> <li>Applying for grants, tracking outcomes, reporting to grantmaking agencies, and coordinating braided and bended funding</li> </ul>
	Contracting	<ul style="list-style-type: none"> <li>Leading contract efforts with partner organizations (e.g., NGOs and service providers) in addition to contracts with vendors and other parties</li> </ul>
	Legal	<ul style="list-style-type: none"> <li>Advising all functions on legal and compliance matters (e.g., funding restrictions, data sharing agreements)</li> </ul>
Function Group #3	Staffing for Coordination	<ul style="list-style-type: none"> <li>Overseeing staffing allocation and HR support for prevention services staff who oversee coordination efforts</li> </ul>
	Service Delivery	<ul style="list-style-type: none"> <li>Providing direct services to the community through on-the-ground case workers and community-based service providers</li> </ul>
Function Group #4	Co-Creating Solutions with Community	<ul style="list-style-type: none"> <li>Providing equitable support and compensation for community members who are co-creating policy and programming</li> </ul>
	Partnering with Community Organizations	<ul style="list-style-type: none"> <li>Establishing and managing partnerships with external community-based service providers who already provide holistic prevention services</li> </ul>
Function Group #5	Data Tracking / Metrics	<ul style="list-style-type: none"> <li>Identifying and monitoring key metrics that track progress made towards the successful outcomes for both prevention and promotion services</li> </ul>
	IT Systems	<ul style="list-style-type: none"> <li>Standing up new IT systems and managing existing systems that share data across multiple agencies</li> </ul>

Based on feedback from key stakeholders, the co-chairs recommend that the CEO convene the department heads to operationalize the functional alignment



### Coordinated but not bureaucratic

Stakeholders prefer something closer to an “embedded” or “coalition” model – a superagency is not feasible due to the broad scope and needs of LA County



### Co-created with the community

It is important for community to be embedded in every part of the process. A separate working group will be convened to discuss how this should be structured.



### Functional alignment

Stakeholders are in alignment about what the critical functions are for this model, but need to decide which should be centralized vs distributed and then how to operationalize



### Decision responsibility

Shared recognition that department heads will drive success of coordinated prevention and promotion and should be ultimately responsible for making functional decisions



### Next Steps:

- Finalize recommendations and remaining deliverables across tables for consolidated Board report
- Launch survey of Framework table and Task Force to receive considerations on tradeoffs on functional alignment
- Organize community working group to build out what Countywide community partnership/co-creation function should look like

# SECOND PHASE OF THIS WORK

While the tables have accomplished a lot over just the last few months, we have identified additional areas that could be further built out in the second Phase of this work (not all of this would necessarily be conducted by the TF/tables):

- Gathering additional community-defined evidence and feedback, especially as the County looks to operationalize and implement recommendations
- Bringing in department director accountability and involvement to ensure success of implementation and collective buy-in
- Determining decision making structure and authority to align and assign coordinating functions across the most appropriate entities, to establish a governance structure that makes the most sense for LA County
- Securing additional resources and dedicated staff time **within departments** so they can effectively implement multi-departmental coordination activities
- Deeper dive on disproportionality and intentional utilization/implementation of the guiding prevention metrics
- Elevating and partnering with existing County CIO data systems integration efforts
- Continuation and deeper dive on user journey mapping



ITEM 10

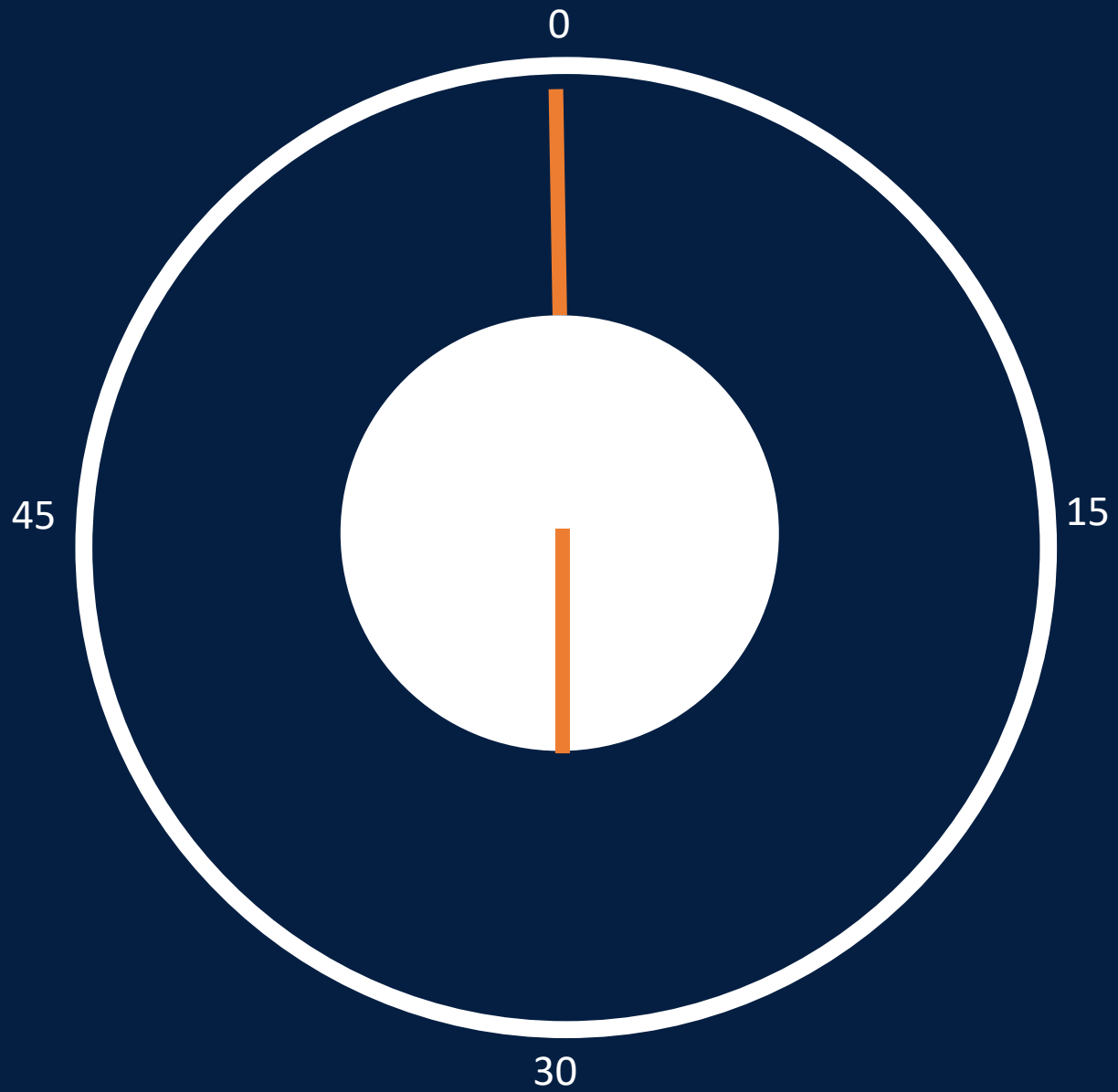
# Public Comment

To address the Task Force and provide public comment on **Task Force-related subject matters**, please use the \*raise hand\* feature. Use the same feature to lower your hand after your comments.

If you are calling in by phone, dial \*9 on the phone's dial pad to raise your hand. Dial \*9 again to lower your hand.

*Each speaker is allowed up to 90 seconds.*







ITEM 11

# ADJOURNMENT

