

**Meeting Date:** 5/26/2015

**Report Type:** Staff/Discussion

**Report ID:** 2015-00525

**Title:** FY2015/16 Proposed Budget and Supplemental Budget Information [To Be Delivered]

**Location:** Citywide

**Recommendation:** Receive and consider the FY2015/16 Proposed Budget and forward to the Budget and Audit Committee for final consideration.

**Contact:** Leyne Milstein, Director, (916) 808-8491; Dawn Holm, Budget Manager, (916) 808-5574, Department of Finance

**Presenter:** Leyne Milstein, Director, (916) 808-8491; Dawn Holm, Budget Manager, (916) 808-5574, Department of Finance

**Department:** Finance

**Division:** Budget Office

**Dept ID:** 06001411

**Attachments:**

- 01-Description/Analysis
- 02-SBI Log
- 03-SBI #1 - Fire Company Costing
- 04-SBI #2 - Single vs Dual Role Medic Costing
- 05-SBI #3 - Community Based Services
- 06-SBI #4 - Development Activity Staffing
- 07-SBI #5 - Deferred Maintenance
- 08-SBI #6 - Solid Waste Rate Assistance
- 09-SBI #7 - County Funding Request
- 10-SBI #9 - Parks and Recreation Deferred Maintenance
- 11-SBI #10 - OpenGov
- 12-SBI #11 - Gang Prevention Task Force
- 13-SBI #12 - 15 Police Officers
- 14-SBI #13 - Police Counters
- 15-SBI #14 - Parks and Recreation Furthering Repairs
- 16-SBI #15 - Pocket Canal Bike Trail
- 17-SBI #16 - Fire Response Data

---

**City Attorney Review**

Approved as to Form  
Joe Robinson  
5/22/2015 3:11:58 PM

**Approvals/Acknowledgements**

Department Director or Designee: Leyne Milstein - 5/22/2015 2:34:00 PM

## Description/Analysis

**Issue Detail:** During budget hearings Council members requested additional information on a number of issues. The list of supplemental budget information (SBI) requests and responses are included as Attachment 1. The status of each request is included in the SBI list.

**Policy Considerations:** The Proposed Budget includes most of Council’s adopted budget priorities. The City, as a matter of policy, must remain focused on efforts to continue the development of opportunities to further right-size the organization to achieve General Fund budget sustainability over the longer-term.

**Economic Impacts:** No direct economic impacts will be created from this report.

### Environmental Considerations:

**California Environmental Quality Act (CEQA):** This report concerns administrative activities that will not have a significant effect on the environment, and that do not constitute a “project.” Accordingly, CEQA review is not required, under the CEQA Guidelines, Sections 15061(b)(3) and 15378(b)(2). CEQA review for any project, which utilizes funds allocated under the FY2015/16 CIP budget, has been or will be performed in conjunction with planning, design, and approval of each project as appropriate.

**Sustainability:** None.

**Commission/Committee Action:** On May 5, 2015, the Budget and Audit Committee forwarded the Proposed Budget to Council for consideration. On June 2, the Committee will consider the budget, including amendments, and forward to Council for final adoption on June 9.

**Rationale for Recommendation:** The Council’s revised budget process requires Budget and Audit Committee consideration and recommendation on the Proposed Budget prior to final adoption by Council.

**Financial Considerations:** The forecast provides a multi-year view of revenues and expenditures, allowing an assessment of the fiscal consequences of both prior and current funding decisions in the context of forecasted revenues and expenditures.

The following charts reflect the General Fund and Measure U Fund forecasts as proposed on May 1, 2015:

### General Fund Forecast

\$ in 000s	FY16	FY17	FY18	FY19	FY20	FY21
<b>Beginning Fund Balance</b>	<b>11,234</b>	<b>8,055</b>				
Total Revenues/Other Sources	400,571	407,846	415,678	424,003	432,578	441,415
Total Expenditures	395,712	414,143	425,772	432,205	438,178	441,598
Priority Budget Initiatives <i>(one-time costs)</i>	8,038	-	-	-	-	-
<b>Surplus/(Deficit)</b>	<b>8,055</b>	<b>1,758</b>	<b>(10,094)</b>	<b>(8,202)</b>	<b>(5,600)</b>	<b>(183)</b>

## Measure U Fund Forecast

\$ in 000s	FY16	FY17	FY18	FY19	FY20	FY21
<b>Beginning Fund Balance</b>	<b>32,746</b>	<b>32,912</b>	<b>39,432</b>	<b>46,281</b>	<b>41,138</b>	<b>0</b>
<b>Revenues</b>	<b>42,046</b>	<b>43,798</b>	<b>45,610</b>	<b>35,619</b>	<b>0</b>	<b>0</b>
<b>Expenditures</b>						
Fire Department	14,618	10,803	11,043	11,290	11,545	11,807
Police Department	17,064	18,304	19,316	20,834	21,265	21,708
Parks and Recreation Department	9,516	7,484	7,708	7,940	8,178	8,423
Miscellaneous	682	687	693	698	704	710
<b>Total Measure U Restorations</b>	<b>41,880</b>	<b>37,278</b>	<b>38,760</b>	<b>40,762</b>	<b>41,691</b>	<b>42,648</b>
Resources less Expenditures	32,912	39,432	46,281	41,138	(553)	(42,648)
<b>Reserve Balance</b>	<b>\$32,912</b>	<b>\$39,432</b>	<b>\$46,281</b>	<b>\$41,138</b>	<b>0</b>	<b>0</b>

On May 19, the Council requested consideration of several amendments to the proposed budgets for the General Fund and Measure U Fund. Given the Council's sustainable budget policy, proposed fiscal actions are evaluated in a longer-term, rather than a short-term, context. As such, the proposed amendments to the budget must be considered within the context of a five-year forecast.

The following charts reflect the amendments to the General Fund and Measure U Fund forecasts based on Council's direction:

## General Fund Forecast

\$ in 000s	FY16	FY17	FY18	FY19	FY20	FY21
<b>Beginning Fund Balance</b>	<b>11,234</b>	<b>6,249</b>				
Total Revenues/Other Sources	400,571	407,846	415,678	424,003	432,578	441,415
Total Expenditures	395,712	414,143	425,772	432,205	438,178	441,598
Priority Budget Initiatives ( <i>one-time costs</i> )	8,038	-	-	-	-	-
<b>FY16 Proposed Ending Fund Balance</b>	<b>8,055</b>	<b>(48)</b>	<b>(10,094)</b>	<b>(8,202)</b>	<b>(5,600)</b>	<b>(183)</b>
Fire Company - Station 43 ( <i>January 2016</i> )	1,414	2,418	2,515	2,615	2,720	2,829
Garcia Bend Bike Trail Planning Study	341	-	-	-	-	-
Utility Rate Assistance Program	51	86	122	122	122	122
<b>FY16 Proposed Amendments</b>	<b>1,806</b>	<b>2,504</b>	<b>2,637</b>	<b>2,737</b>	<b>2,842</b>	<b>2,951</b>
<b>Revised FY16 Ending Fund Balance</b>	<b>6,249</b>	<b>(2,552)</b>	<b>(12,731)</b>	<b>(10,939)</b>	<b>(8,442)</b>	<b>(3,134)</b>

## Measure U Fund Forecast

\$ in 000s	FY16	FY17	FY18	FY19	FY20	FY21
<b>Beginning Fund Balance</b>	<b>32,746</b>	<b>26,778</b>	<b>30,868</b>	<b>35,191</b>	<b>27,420</b>	<b>0</b>
<b>Revenues</b>	<b>42,046</b>	<b>43,798</b>	<b>45,610</b>	<b>35,619</b>	<b>0</b>	<b>0</b>
<b>Expenditures</b>						
Fire Department	14,618	10,803	11,043	11,290	11,545	11,807
Police Department	17,064	18,304	19,316	20,834	21,265	21,708
Parks and Recreation Department	9,516	7,484	7,708	7,940	8,178	8,423
Miscellaneous	682	687	693	698	704	710
<b>Total Measure U Restorations</b>	<b>41,880</b>	<b>37,278</b>	<b>38,760</b>	<b>40,762</b>	<b>41,691</b>	<b>42,648</b>
Park Capital Improvements	2,000	-	-	-	-	-
15 Police Officers	1,800	1,560	1,622	1,687	1,755	1,825
Gang Prevention Task Force	1,000	-	-	-	-	-
Public Safety Counter Staffing	684	661	688	715	744	774
Park Assessment	450	-	-	-	-	-
Dual-Role Medics	200	208	216	225	234	243
<b>FY16 Amendments</b>	<b>6,134</b>	<b>2,429</b>	<b>2,527</b>	<b>2,628</b>	<b>2,733</b>	<b>2,842</b>
<b>Revised Measure U Restorations</b>	<b>48,014</b>	<b>39,708</b>	<b>41,287</b>	<b>43,390</b>	<b>44,424</b>	<b>45,490</b>
Resources less Expenditures	26,778	30,868	35,191	27,420	(17,004)	(45,490)
<b>Revised Reserve Balance</b>	<b>26,778</b>	<b>30,868</b>	<b>35,191</b>	<b>27,420</b>	<b>0</b>	<b>0</b>

Local Business Enterprise (LBE): Not applicable.

**Supplemental Budget Information (SBI) Log**

Item	Request	SBI Status
1	What is the cost of an additional fire company for Station 43?	Attached
2	What is the cost of a single-role medic vs. a dual-role medic?	Attached
3	What is the benefit of the City providing youth/teen programs vs. funding community based groups to provide services?	Attached
4	How is the City preparing to manage the increase in development activity?	Attached
5	What is the status of the City's facilities/assets relative to deferred maintenance?	Attached
6	What would it cost to provide the same level of rate assistance to customers for the recently approved Solid Waste rate increase as we are providing for the Water and Wastewater rate increases previously approved by Council?	Attached
7	What is the status of the County's request for \$750,000 annually to address African American infant mortality?	Attached
8	How does parks allocate resources for park maintenance and recreation?	Pending <sup>1</sup>
9	What would it cost for a Citywide Parks Assessment study to evaluate deferred maintenance and park amenity equities citywide and how long will it take?	Attached
10	What is the status of OpenGov?	Attached
11	Sacramento Gang Prevention Task Force - What would the \$1 million be used for? How will it be allocated and what is the incremental return on investment?	Attached
12	What is the total cost of 15 additional officers? What is the incremental cost of each officer? What is the capacity to fill these positions? What is the goal for the 2035 plan? Does the department have a higher priority where these additional resources would be more beneficial?	Attached
13	What is the breakdown of the \$900,000 needed to reopen the three police substations (FTE/Service & Supplies)? What is the timeline to fully staff these substations and would overtime be used in the interim? What was the original intent of the public counters in the community? What is the incremental return on investment for the \$900,000? Does the Department have a higher priority where these additional resources would be more beneficial?	Attached
14	What could be accomplished with an additional \$2 million in park repair funds for a grand total of \$4 million?	Attached
15	What would it cost to design the a bike trail extension from the Pocket Canal to Garcia Bend Park?	Attached
16	What are fire response times/metrics relative to suppression and medical calls by district?	Attached
17	What are the City Manager's priorities for Measure U restorations?	To be Delivered
18	Provide a report on PIF and Quimby, what they can be used for and what the plan is to change fees.	Pending <sup>1</sup>
19	Provide a report outlining the metrics that could be established to determine overall satisfaction with City park facilities.	Pending <sup>1</sup>
20	Provide a report on funding the development and maintenance of the City's regional parks.	Pending <sup>1</sup>

<sup>1</sup>This item will be added to the City Council follow up log

# Supplemental Budget Information – Item 1

**Question:**

What is the cost of an additional fire company for Station 43?

**Response:**

A fire company includes 3 Fire Captains, 3 Fire Engineers, and 9 Firefighters (3 are assigned to the detail pool to cover vacation, sick leave, and other time off). This level of staffing is consistent with staffing added when Stations 30 and 43 were originally opened.

The cost of a new fire company is approximately \$2.6 million which includes \$228,000 in start-up costs for personal protective equipment and Emergency Medical Services equipment for the truck. The ongoing cost is approximately \$2.35 million annually based on the average cost of the positions. Funding from January through June 2016 is estimated to cost \$1.4 million which includes the start-up costs for this company.

The additional operational costs (utilities, telephones, maintenance, etc.) of the station based on the increased use and the fire truck operating costs are not included in this estimate.

## Supplemental Budget Information – Item 2

### **Question:**

What is the cost of a single-role medic vs. a dual-role medic unit?

### **Response:**

When the City began ambulance services in 1993, Council intended this program to be fully supported by user fees. In fact, the program has never been self-supporting. Over the years the General Fund subsidy to provide this service has increased to over \$6 million in the current fiscal year. In an effort to address increased calls for service, loss of calls to other agencies (loss of revenue), and employee fatigue, the City began evaluating service delivery models.

The City currently uses dual-role medics which include three shifts with two firefighters for each ambulance. The cost of the current staffing model is approximately \$882,500 per ambulance per year to cover the salaries of the employees on the ambulance.

The FY2013/14 Approved Budget authorized the addition of 12.0 positions to staff two single-role medic ambulances. These ambulances would provide advanced life safety (ALS) response; the only difference is the paramedics and emergency medical technicians would not be firefighters. The estimated staffing cost of a single-role medic unit is approximately \$480,000 per ambulance per year to cover the salaries of the employees on the ambulance.

As reflected on the attached ALS cost analysis for FY2015/16, the cost to run the ALS program is approximately \$25 million while the revenues are projected to be approximately \$18.8 million. These estimates assume 13 dual-role ambulances and two single-role ambulances, resulting in an estimated General Fund subsidy of \$437,218 per ambulance. Because of Sacramento's unique payer mix and reduced reimbursements associated with Medicare and Medi-Cal transports the City is only receiving an average of \$440 on the \$1,450 cost of each transport.

## Supplemental Budget Information – Item 3

### **Question:**

What is the benefit of the City providing youth/teen programs vs. funding community based groups to provide services?

### **Response:**

The answer to this question varies by program as it has proven difficult to find nonprofit partners or community-based groups for some programs. An example would be Aquatics. There are few community groups that have the capacity to run a public Aquatics program and maintain appropriate levels of safety in their operations. While the Department of Parks and Recreation has partnered with the YMCA to assist with Aquatics operations, it only has the capacity to operate one swimming pool.

There are a number of nonprofits that can offer youth and teen programs similar to the START out-of-school programs on school campuses, but it is difficult to find nonprofit or community based providers for state-licensed childcare similar to the City's 4<sup>th</sup> R program that meets school district standards.

Benefits of the City providing services for youth and teens include:

- Direct accountability
- Capacity for continuity of service
- Experience with a broad scope of program types serving all areas of the community
- Existing investment in staff training
- Oversight of facilities to house programs (centers, clubhouses, pools)
- Support infrastructure (risk management/safety office, facility repair/management, finance, procurement and human resources)

It can be challenging for nonprofits or community-based groups to maintain consistent operations and provide quality services on an ongoing basis. Most nonprofits and community-based organizations must also focus already lean resources on fund development, donor/member support and administrative support.

## Supplemental Budget Information – Item 4

**Question:**

How is the City preparing to manage the increase in development activity?

**Response:**

The Community Development Department (CDD) has a strategy to staff plan review, plan check, building inspections, and planning at a level that supports the City's long-term average of \$600 million in building valuation. The department is taking a careful approach to avoid overstaffing (resulting in staff reductions) while utilizing consultants to handle peak activity. As part of the FY2014/15 Midyear report Council approved the addition of six positions to respond to development growth. Based on projected building and development activity over the next fiscal year, seven positions have been added to the department for FY2015/16. CDD plans to continue to add staff in a measured way, monitoring building and development activity every six months. As staff is added, the reliance on contracts is reduced.

## Supplemental Budget Information – Item 5

### **Question:**

What is the status of the City's facilities/assets relative to deferred maintenance?

### **Response:**

Our City facilities have an estimated need of nearly \$40 million in 2015 dollars for bringing all known assets to a state of good repair and being updated. This represents the current known inventory which is not exhaustive. The FY2015/16 CIP Budget includes \$1 million to address the most critical needs.

The Department of Public Works is estimating that it will cost approximately \$1.1 million to develop a comprehensive Facilities Programming Guide (FPG). Given limited resources, this effort will require consultant services to assist with facility assessment, development of an asset management database, and stakeholder participation. Using the popular Transportation Programming Guide (TPG) as a model, the new document will serve as the City's first comprehensive guide for objectively prioritizing and delivering ongoing essential facility service updates and repairs.

## Supplemental Budget Information – Item 6

### **Question:**

What would it cost to provide the same level of rate assistance to customers for the recently approved Solid Waste rate increase as we are providing for the Water and Wastewater rate increases previously approved by Council?

### **Response:**

In March 2015, the City Council approved a three-year rate adjustment (3%, 2% and 2%, respectively) for Solid Waste services that will ensure Proposition 218 compliance by adjusting rates for services by commodity to match the full cost of providing those services, maintain a prudent reserve equal to 90 days of operating costs, and avoid rate spikes at the end of the three-year cycle.

It is estimated that \$51,000 would be needed in FY2015/16, \$86,000 in FY2016/17, and \$122,000 in FY2017/18 from the rate increase to fund a rate assistance program consistent with the established guidelines for the Water and Wastewater funds. All funding for this program must be taken from the General Fund since Proposition 218 prohibits the use of ratepayer funds for this purpose.

## Supplemental Budget Information – Item 7

### **Question:**

What is the status of the County's request for \$750,000 to support the implementation of programs as part of its Reduction of African-American Child Deaths Strategic Plan?

### **Response:**

The County of Sacramento requested that the City provide \$750,000 annually to support this program. This program would not qualify for Measure U funding since it would be a new service program and not a restoration of a former program.

The following is the email received from the Sacramento County Executive on May 19, with additional program details:

In 2011, the Sacramento County Child Death Review Team (CDRT) provided a 20-year report on all child deaths in the county. The CDRT report findings showed that African-American children died at a rate two times higher than that of all other children in the county.

1. 32 percent of children who died of infant sleep-related causes were African-American
2. 32 percent of children who were victims of homicide not perpetrated by a parent or caretaker (i.e., third-party homicide) were African-American
3. 30 percent of who were victims of homicide perpetrated by a parent or caretaker (i.e., child abuse and neglect homicide) were African-American
4. 25 percent of children who died of perinatal conditions were African-American

Six neighborhoods had the largest number and percent of African-American child deaths in these four categories (see map attached):

- Arden-Arcade
- North Highlands/Foothill
- Valley Hi/Meadowview
- North Sacramento/Del Paso Heights
- Oak Park
- Fruitridge/Stockton Boulevard

In response to the findings, the Board established a Blue Ribbon Commission and later a Steering Committee to Reduce African-American Child Deaths (RAACD). In April, the Committee presented the attached strategic plan to

address this issue, with the following requests for funding, totaling \$1.75 million a year for five years as follows:

- Program Management (\$250,000) – Funding for staffing support of the Steering Committee and a new multi-agency policy-development body.
- Technical Assistance Resource Center (\$400,000) – Funding to build community-based organization capacity in the six target neighborhoods. This would be provided through include training, workshops and peer learning networks.
- Capacity-Building Grants (\$500,000) – This would provide small grants for 20-30 CBOs from the six neighborhoods to participate in capacity building activities.
- Participatory Action Research (\$250,000) – This would assemble, develop, and make available community-based and best practices research for use by the community.
- Grassroots Retail Communication Implementation (\$350,000)

I [County CEO] am proposing the budget line items below to assist in addressing the key causes of disproportionate death rates among African-American children. The first table summarizes budget recommendations from the County General Fund.

Funding to promote capacity building and technical assistance for community agencies and communication within unincorporated target neighborhoods to raise awareness of early child deaths. Those neighborhoods would be Arden-Arcade, North Highlands/Foothill, and parts of Oak Park/South Sacramento. Pending development of a detailed work plan from the Steering Committee. <b>The County is seeking an equivalent match from the City of Sacramento to target identified city neighborhoods.</b>	750,000
DHHS funding to support RAACD Steering Committee through Sierra Health	100,000
5 Probation officers providing services to at risk youth and their families in target neighborhoods	716,057
4 CPS positions for permanency, kinship support, informal supervision dedicated to African-American families in target neighborhoods	426,837
CBO contracts for Cultural Brokers in target neighborhoods to provide prevention and family services; focusing on African-American families	300,000
Maternal Child Adolescent Health Program: 2 nurses to conduct home visits and provide perinatal care follow-up with new African-American mothers; and a program planner to provide breastfeeding and other healthy infant care education	465,279
<b>Total County General Fund</b>	<b>\$2,758,173</b>

The table below represents additional recommendations from non-General Fund sources.

DHHS Black Infant Health: 1 social worker position dedicated to African-American families in target neighborhoods (state-funded)	106,609
DHHS Nurse Family Partnership: 1 Public Health Nurse dedicated to African-American families in target neighborhoods	260,000
First 5 Sacramento funding to support RAACD Steering Committee through Sierra Health	100,000
First 5 Sacramento funding to expand the Valley Hi/Meadowview Family Resource Center to provide parent education, home visitation, and crisis intervention to reduce child abuse and neglect	150,000
First 5 Sacramento funding to re-establish the Arden Arcade Family Resource Center	700,000
First 5 Sacramento funding for perinatal conditions education campaign	200,000
First 5 Sacramento funding for infant safe sleep education campaign	200,000
First 5 Sacramento funding for cultural broker programs to improve pregnancy and birth outcomes	1,000,000
<b>Total Other</b>	<b>\$2,716,609</b>

*sic*





*Center for*  
**Health Program  
Management**  
SIERRA HEALTH FOUNDATION

# **AFRICAN AMERICAN CHILDREN MATTER: What We Must Do Now**

Steering Committee on Reduction of  
African American Child Deaths in  
Sacramento County, California



March 2015

Sacramento County Board of Supervisors:

The Steering Committee on Reduction of African American Child Deaths in Sacramento County submits this Strategic Plan in response to the recommendations from the Blue Ribbon Commission. This commission was convened in 2011 by Supervisor Phil Serna to focus on the disproportionate African American child deaths in Sacramento County. This plan is reflective of strategies inherently rooted in the belief that all of our children matter, especially those who are most vulnerable and marginalized and have very little or no opportunity to voice their needs.

Development of the strategic plan marks the culmination of a year of analysis, planning and invaluable input by Steering Committee members. These members represent a diverse cross section of the community’s civic groups, faith-based organizations, parent groups, youth representatives, social justice advocates, health providers, county agencies, education and philanthropic organizations. Collaboratively, we have worked to develop and refine an approach that advances the Blue Ribbon Commission’s goal to reduce African American child deaths in Sacramento County by 10 percent to 20 percent over the next five years. This approach embraces two key ideas. First, a targeted approach to reducing the disproportionate causes of death among African American children will have a universal impact on all children in Sacramento County. Second, addressing child mortality in our African American community requires addressing the complex, integrated and overlapping social and economic systems responsible for good or bad health.

We acknowledge that the Blue Ribbon Commission’s goals are not a destination, but a process of both healing and empowering Sacramento to address the needs of its children who have experienced the most negative health outcomes by no fault of their own. Admittedly, some of the strategies in our plan are very ambitious, but the challenge we have before us requires bold and transformative thinking and action. Moreover, committed partnerships are essential to its success, as its implementation will demand shared accountability and responsibility. To truly have long-term impact on the health and well-being of all children in Sacramento County, it is paramount that we work at the nexus of community, city and county systems and policy to create a county where our children are healthy, happy and thriving.

This Steering Committee is wholly committed to providing the oversight and coordination necessary to manage all the efforts associated with implementing the strategic plan, evaluating its impact and reporting on its progress.

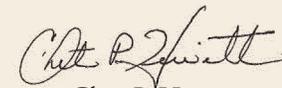
On behalf of the Steering Committee, we thank the Board of Supervisors and the many community partners who have contributed to the plan’s development. Additionally, because belief informs behavior, it is the hope of the Steering Committee that the Board of Supervisors will continue to stand with us in the belief that all of our children’s lives matter.

We look forward to continuing to work with the Supervisors as we implement our strategic plan.

Respectfully,



Wendy Petko  
Co-Chairperson



Chet P. Hewitt  
Co-Chairperson

# CONTENTS

<b>EXECUTIVE SUMMARY</b>	2
Background	6
Vision, Mission, Goal, Core Values and Strategic Priorities	7
<b>STRATEGIC PLANNING</b>	
The Strategic Planning Process	8
Steering Committee Systems Change Model	9
<b>STRATEGIC DIRECTION</b>	
Overview of the Strategic Plan	10
The Strategic Plan	11
Our Strategic Direction	16
Strategic Plan Priority Outcomes Matrix	22
<b>IMPLEMENTATION PLAN</b>	
Plan Design	23
<b>ACKNOWLEDGMENTS</b>	23



*The Steering Committee is funded by the County of Sacramento and First 5 Sacramento, and is managed by Sierra Health Foundation Center for Health Program Management.*



*Center for*  
**Health Program**  
**Management**  
SIERRA HEALTH FOUNDATION

## Executive Summary

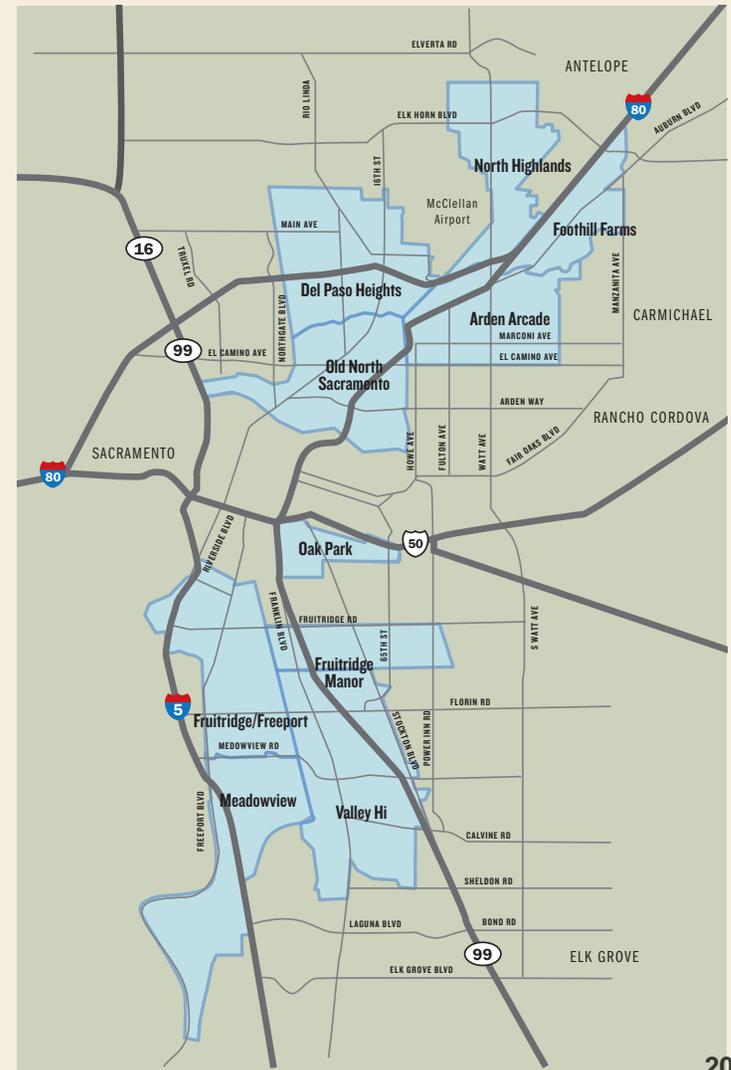
The Steering Committee on Reduction of African American Child Deaths in Sacramento County submits this Strategic Plan in response to the recommendations from the Blue Ribbon Commission convened in 2011 by Supervisor Phil Serna. The Committee’s charge was to focus on the development of a plan to reduce disproportionate African American child deaths in Sacramento County. This plan is reflective of strategies inherently rooted in the belief that all of our children matter, and that society has a responsibility to ensure the well-being of those who are most vulnerable and marginalized.

### We Value Universal Impact

Our central focus is to work together to positively impact the health and well-being of all children in Sacramento County, while paying particular attention to the conditions that are creating poor outcomes for African American children. Californians live with geological fault lines that lie beneath the earth’s surface; much like these physical faults, we experience social fault lines that result in health and other disparities that are not natural and thus can be remedied. These lines have made conversations around how to achieve equity in health and well-being historically difficult in our nation, and Sacramento County is not excluded from this challenge. This strategic plan has been created to transform Sacramento County’s approach to African American child health to promote more equitable health outcomes for all children.

### Targeted Neighborhoods

The Steering Committee proposes a targeted prevention and intervention approach to support activities that will universally enhance the overall positive health outcomes of all children in Sacramento County, but will intentionally point toward six neighborhoods indicated by the Blue Ribbon Commission Report.



These communities are at the epicenter of the disproportionate number of African American child deaths in the county:

- Valley Hi/Meadowview
- Arden-Arcade
- North Sacramento/Del Paso Heights
- Oak Park
- North Highlands/Foothill
- Fruitridge/Stockton Boulevard

### Our Strategic Direction

Children and youth today—particularly children and youth of color—struggle with societal problems such as poverty, racism, violence, and other social, economic and political ills that directly and indirectly impact their health. The Blue Ribbon Commission’s Report on Disproportionate African American Child Deaths identified four equally important causes of death that have the most disproportionate impact on African American children in Sacramento County. Those causes are:

- **Infant sleep-related deaths**
- **Perinatal conditions**
- **Child abuse and neglect homicides**
- **Third-party homicide**

### Framework for Collective Strategies

The Steering Committee identified five strategic priorities in an effort to reduce deaths by between 10 percent and 20 percent among African American children in Sacramento County by 2020. The strategies for long-term impact over the next five years include:

- **Advocacy and Policy**
- **Equitable Investment and Systematic Impact**
- **Coordinated Systems of Support**
- **Data-driven Accountability and Collective Impact**
- **Communications and Information Systems**

These strategies are further outlined in the following pages.



## 1. Advocacy and Policy

### *Priority Outcome 1*

Engage up to 20 organizations as partners of the Steering Committee. These organizations will promote, advocate and empower communities within the target neighborhoods to take on the four causes of death identified by the Steering Committee to ensure that children from 0 to 17 years of age are safe emotionally, physically and educationally.

**Strategy 1.1** Create and convene a community-based Leadership Roundtable to support the development of communication messages and protocols, and carry out mobilization activities that will assist the Steering Committee in the strategic implementation of its activities.

## 2. Equitable Investment and Systematic Impact

### *Priority Outcome 2*

Convene executive-level county decision makers and elected policymakers representing agencies and departments in Sacramento City and County to focus public system resources on the reduction of African American child deaths.

**Strategy 2.1** Establish a Sacramento County Interagency Children's Policy Council (ICPC) made up of county agency executives and department directors who have responsibility for children's health and well-being in Sacramento County. The Council would be directly accountable to the Board of Supervisors and would work closely with the Steering Committee on the development of a comprehensive and collaborative integrated services delivery system strategy consistent

with the Blue Ribbon Commission's Report recommendations to improve the lives of low-income and vulnerable children, youth and their families. The ICPC would work closely with the Steering Committee on reduction of African American child deaths.

**Strategy 2.2** Employ the ICPC to develop and advance cross-county-agency initiatives focused on interagency communication, the development of policies and practices, and initiating budgetary changes that result in the prevention and reduction of African American child deaths in Sacramento County, and improve the lives of low-income and vulnerable children, youth and their families.

## 3. Coordinated Systems of Support

### *Priority Outcome 3*

Establish the Sacramento County Training and Technical Assistance Network to connect, strengthen and expand the capacity of organizations currently focused on preventing and reducing African American child deaths in Sacramento County.

**Strategy 3.1** Allocate resources to implement a Reduction of African American Child Deaths Technical Assistance Resource Center (TARC) that is overseen by the Steering Committee and is connected to the Interagency Children's Policy Council (ICPC). Use the TARC to create an information exchange network that connects partners working in the six targeted communities to the best ideas, practices, policies and research from around the county, state and nation whose efforts are directly related to reducing African American child deaths.

## 4. Data-driven Accountability and Collective Impact

### Priority Outcome 4

Develop the RAACD Collective Impact Assessment Framework.

**Strategy 4.1** Monitor, document and report on progress toward established benchmarks for reducing African American child deaths.

**Strategy 4.2** Monitor, document and report on the quality of programs focused on the well-being of African American children and the reduction of their disproportionate death rate.

## 5. Communications and Information Systems

### Priority Outcome 5

Create a social marketing campaign aimed at increasing awareness of the disproportionate number of African American child deaths in Sacramento County, particularly in the six targeted neighborhoods.

**Strategy 5.1** Develop and disseminate media materials focused on the prevention and reduction of African American child deaths for local targeted audiences, using both traditional media and a variety of social media outlets.

## Implementation and Next Steps

The Steering Committee will use a collective impact framework to guide the development and design of its implementation plan. Collective impact represents the application of resources from a committed group of partners to a common agenda. The result is to increase capacity to solve complex social problems, such as the disproportionate number of African American child deaths in Sacramento County. The underlying premise of the collective impact framework is that no single organization can create large-scale, lasting social change alone. Specific to the Steering Committee's work, the collective impact framework emphasizes the importance of a comprehensive county-wide "all-in strategy" that is needed to address disproportionate African American child deaths.

## Conclusion

Transformative change is the goal of the Steering Committee's strategic plan. To achieve its bold and ambitious goals, there is a need to redesign delivery systems and invest in communities where the need is the highest. The unfortunate truth is that the disparity of African American child deaths in Sacramento County has occurred for too long, and there is no single organization or institution that can address this issue alone. The Steering Committee hopes that the strategies outlined in this document encourage partnership and a fierce urgency to act now to eliminate unnecessary African American child deaths.

## Background

For the past 20 years, the Sacramento County Child Death Review Team (CDRT) has investigated, analyzed and documented the circumstances surrounding all child deaths in Sacramento County. During its 20-year review, the CDRT has consistently found that African American children in Sacramento County died at a rate two times higher than all other children. Reacting to this finding, in its 2009 annual report, the CDRT made a specific recommendation to the Sacramento County Board of Supervisors:

*“Appoint a multi-disciplinary, Sacramento County Blue Ribbon Commission to analyze data, explore causes of disproportionality in African American child death rates, and develop a coordinated strategic plan to address it.”*

In response to this recommendation, in October 2011, Sacramento County Supervisor Phil Serna convened the Blue Ribbon Commission on Disproportionate African American Child Deaths in Sacramento County. During its review, the Blue Ribbon Commission extended the CDRT’s analysis to find that the African American child death rate was twice the average of the overall child death rate during the period from 1990 to 2009.<sup>1</sup> Since 1990, of the 3,633 child deaths, African

American children accounted for 22% (816) of child deaths, while being only 12% of the child population in Sacramento County. According to the 1990–2009 data reported by the Blue Ribbon Commission,

*African American children represent 25% (260 of 1,041) of all perinatal condition deaths,*

*32% (134 of 420) of all infant sleep-related deaths,*

*30% (48 of 158) of all child abuse and neglect homicides,*

*and 32% (44 of 138) of all third-party child homicides.<sup>2</sup>*

When explaining that he convened the Blue Ribbon Commission to develop a coordinated strategic plan to reduce the numbers of African American child deaths, Supervisor Serna also issued its ultimate charge:

**“ . . . formulate recommendations for consideration by the County Board of Supervisors, so that we on the Board, with welcomed public input, can deliberate what must change to decrease all deaths in our County.”**

In order to develop and execute those recommendations, the Steering Committee on Reduction of African American Child Deaths was established by a resolution of the Sacramento County Board of Supervisors in June 2013. Funded by Sacramento County and First 5 Sacramento, and managed by Sierra Health Foundation Center for Health Program Management, the 25-member Committee is comprised of representatives from county agencies, education, health systems, civic groups, faith-based organizations, parent and youth groups, and policy advocates.

<sup>1</sup>The overall child death rate during the 20-year time period was 53.2 per 100,000 Sacramento County resident children. During the same period, a total of 816 Sacramento County African American resident children died. However, African American children consistently died at a disproportionate rate of 102.0 per 100,000 children, compared to Caucasian children who died at a rate of 48.5 per 100,000 children, and Hispanic children who died at a rate of 38.3 per 100,000 children..

<sup>2</sup> Sacramento County Blue Ribbon Commission (2013). Report on Disproportionate African American Child Deaths. <http://www.philserna.net/wp-content/uploads/2013/05/Blue-Ribbon-Commission-Report-2013.pdf>

The Steering Committee is charged with the development, and subsequent implementation, of a strategic plan that will carry forward the recommendations developed by the Blue Ribbon Commission, as unanimously supported by the Sacramento County Board of Supervisors on May 7, 2013. In addition, the Committee's ultimate charge is to monitor implementation, as well as to evaluate and report on progress toward reducing the disproportionate number of African American child deaths. It will accomplish that objective by providing coordination and oversight of all the efforts focusing on multiple manners of child deaths, including deaths related to perinatal conditions, infant sleep-related deaths, homicides related to child abuse and neglect and third-party homicides.

### **Our Vision**

**All African American children in Sacramento County are happy, healthy and thriving.**

### **Our Mission**

**Eliminate preventable African American child deaths in Sacramento County.**

### **Goal**

**By 2020, reduce the disproportionate African American child death rate in Sacramento County by at least 10 percent to 20 percent.**

### **Our Core Values**

- Service**
- Collaboration**
- Compassion**
- Sustainability**
- Innovation**
- Accountability**
- Commitment**
- Community Engagement**

### **Our Strategies**

- Advocacy and Policy**
- Equitable Investment and Systematic Impact**
- Coordinated Systems of Support**
- Data-driven Accountability and Collective Impact**
- Communications and Information Systems**



## Strategic Planning

### The Strategic Planning Process

In January 2014, the Steering Committee initiated a strategic planning process that included participatory planning and decision making that led to the development of four workgroups aligned to the four causes of death that are the most disproportionate relative to the ratio of the child population. Those four causes of death are:

1. Perinatal conditions
2. Infant sleep-related deaths
3. Child abuse and neglect homicides
4. Third-party homicides

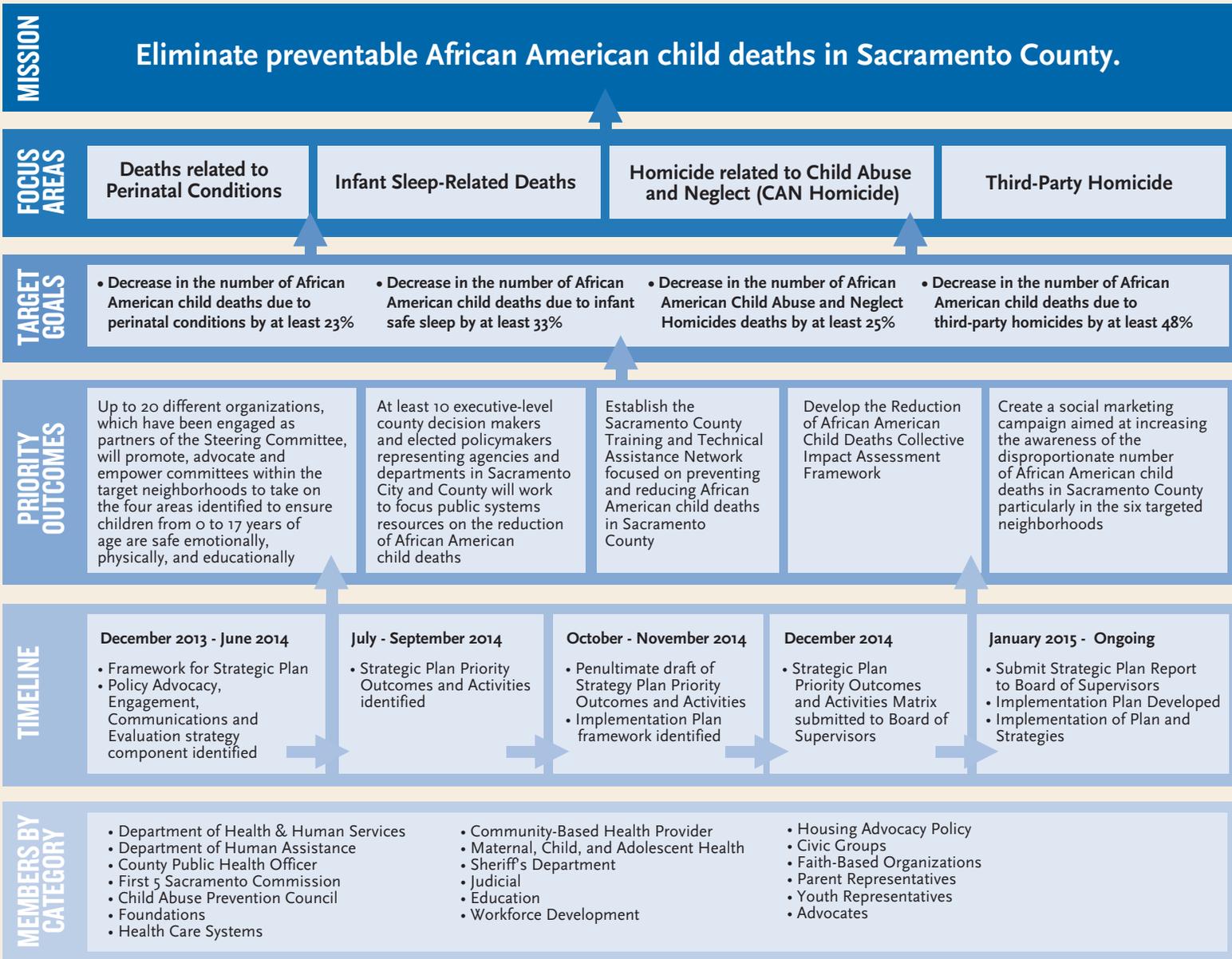
An added workgroup — Evaluation and Assessment — comprised of both Sierra Health Foundation evaluation staff and Steering Committee members, focused on defining and measuring outcomes. This initial planning phase led to the development of strong collaborative relationships among members of the committee, which was necessary for the subsequent direction of the strategic planning.

In addition to the workgroups, the Steering Committee developed a timeline to guide the initial strategic planning phase. Utilization of the findings and recommendations from the 2013 Report on Disproportionate African American Child Deaths and Committee member input provided the basis for outlining strategies aimed at the reduction of African American child deaths.

Building on the initial phase of the strategic planning, further refinement of the strategies and a shift from the workgroup approach to an “all in” full-group approach led to scaffolding of the priority outcomes and core activities identified by the Steering Committee. The process required several mechanisms to meaningfully capture the Steering Committee’s multitude of diverse perspectives, all of which shared in the urgency of the Committee’s mission to eliminate disparities in African American child deaths, but not always on how to best achieve a mission that requires a restructuring of the system that currently exists if our efforts are to be successful. Ultimately, through understanding the manner in which the strategies interact and by integrating the outcomes, timeline and four causes of disproportionate African American child deaths, the design emerged for a coherent systems change model that provides overarching guidance for the Steering Committee’s work.



# Steering Committee on Reduction of African American Child Deaths: Systems Change Model



## Strategic Direction

### Overview of the Strategic Plan

The strategic planning process included an unprecedented level of input and collaboration by a diverse Steering Committee, whose members are fundamentally committed to eliminating the disparities of African American child deaths in Sacramento County. The resulting Strategic Plan has been significantly influenced and enriched by an untiring Committee whose expertise, experience and participation — coupled with data findings and recommendations from the Blue Ribbon Commission's 2013 Report on Disproportionate African American Child Deaths — helped define priority geographies, outcomes, strategies and activities over the course of several planning meetings. That work was also strongly informed by the daily realities of those Committee members who work for and in the communities where the most disproportionate deaths of African American children are occurring. The core activities for each identified strategy outlined in the strategic plan convey where the Steering Committee's work will occur over the next several years.

Additionally, the Steering Committee identified five strategic priorities in an effort to reduce deaths by between 10 percent and 20 percent among African American children in Sacramento County by 2020. Our strategies for long-term impact over the next five years include:

1. Advocacy and Policy
2. Investment and Systematic Impact
3. Coordinated Systems of Support
4. Data-driven Accountability and Collective Impact
5. Communications and Information Systems

Each of these five strategies is aligned with the following three components.

- **Priority Outcomes:** What will be achieved as a result of Steering Committee efforts to reduce African American child deaths in Sacramento County?
- **Strategies:** What are the approaches to achieve the desired priority outcome?
- **Core Activities:** What key activities will be implemented in order to realize the strategies?

The following sections detail the Strategic Plan on the Reduction of African American Child Deaths.



## Reduction of African American Child Deaths Strategic Plan

### 1. Advocacy and Policy

**Goal Statement:** Promote, advocate and empower target neighborhoods so they play a key role in ensuring that children are safe socially, emotionally, physically and educationally from infancy to adulthood.

#### Priority Outcome 1

Engage up to 20 organizations as partners of the Steering Committee on Reduction of African American Child Deaths. These organizations will promote, advocate and empower communities within the target neighborhoods to take on the four areas identified by the Steering Committee to ensure that children from 0 to 17 years of age are safe emotionally, physically and educationally.

**Strategy 1.1** Create and convene a community-based Leadership Roundtable that provides key communication messages and protocols, and carries out mobilization activities that will assist the Steering Committee in the strategic implementation of its activities.

#### Core Activities

- a. Develop an “echo chamber” environment<sup>3</sup> to reduce African American child deaths by enabling community leaders to speak in a coordinated voice to the Steering Committee to both keep it connected to the targeted neighborhoods and affected communities, and to create a harmonized effort that will help champion and implement strategies.
- b. Create a series of key messages for the Steering Committee that are informed by direct input from

Roundtable members that will be disseminated through the “echo chamber” process.

- c. Leverage existing partnerships with health and wellness, and child advocacy groups in Sacramento County to develop conferences, publications and other projects that support the “echo chamber” impact on the reduction of African American child deaths.
- d. Recruit business and philanthropic community champions to provide financial and non-financial support that will assist in connecting the effort to reduce African American child deaths to other community child health efforts, as well as related workforce and economic development initiatives.

### 2. Equitable Investment and Systematic Impact

**Goal Statement:** Engage key public and private institutional stakeholders so they invest resources to support long-term system change initiatives that increase efforts around, and awareness for, reducing African American child deaths as a key component of achieving overall health for children and families in Sacramento County.

#### Priority Outcome 2

Convene at least 10 executive-level county decision makers and elected policymakers representing agencies and departments in Sacramento City and County to focus public systems resources on the reduction of African American child deaths.

<sup>3</sup> The Steering Committee is using the term “echo chamber” to refer to the creation of a dynamic in Sacramento County in which information, ideas and beliefs around the importance of disproportionate African American child deaths are amplified and reinforced by transmission between multiple organizations within Sacramento County.

**Strategy 2.1** Establish a Sacramento County Interagency Children’s Policy Council (ICPC) made up of county agency executives and department directors who have some impact on prevention and reduction of African American child deaths in Sacramento County. The Council is directly accountable to the Board of Supervisors and would work closely with the Steering Committee on the development of a comprehensive and collaborative integrated services delivery system strategy consistent with the Blue Ribbon Commission’s Report recommendations to improve the lives of low-income and vulnerable children, youth and their families. The reduction of African American child deaths is a key initiative of the ICPC.

**Core Activities**

- a. Secure additional support for investments in the prevention and reduction of African American child deaths in Sacramento County from county and city agency executives and department directors to support the co-location of comprehensive health, education and other appropriate services.
- b. Align county and city resources that have the potential to prevent and reduce African American child deaths in Sacramento County in order to leverage current and future county, philanthropic, private and city investments in Valley Hi/Meadowview, North Sacramento/Del Paso Heights, North Highlands/Foothill, Oak Park, Fruitridge/Stockton and Arden Arcade.

**Strategy 2.2** Employ the ICPC to develop and advance cross-county-agency initiatives focused on interagency communication, the development of policies and practices, and initiating budgetary changes

that result in the prevention and reduction of African American child deaths in Sacramento County, and improve the lives of low-income and vulnerable children, youth and their families.

**Core Activities**

- a. Link the Child Abuse Prevention Council of Sacramento, Inc. (CAPC) and the Child Review Death Team analysis of child mortality rates directly to an assessment of the progress of the ICPC efforts.
- b. Establish partnerships among the Board of Supervisors, the ICPC and a private nonprofit agency in Sacramento County to create a quasi-public function that serves as a backbone function for the Steering Committee that supports:
  - 1) the creation and institutionalization of interagency and intra-agency support systems and strategies,
  - 2) data-driven, collaborative decision-making,
  - 3) protection of individual privacy and confidentiality,
  - 4) resource development, expansion, leveraging and pooling,
  - 5) mutual responsibility for outcomes,
  - 6) joint credit for success, and
  - 7) promotion of best practices.
- c. Identify and involve youth-serving organizations as partners to support the ICPC efforts to:
  - 1) support community-based, youth-led leadership in ICPC efforts to prevent and reduce African American child deaths in Sacramento County, and
  - 2) inform policies and develop practices to improve service delivery outcomes for children, youth

and families related to efforts to prevent and reduce African American child deaths in Sacramento County.

- d. Engage in developing a children's annual budget that would:
- 1) identify a dedicated funding stream for children's services that will serve as an incentive for supporting the ICPC model as a hub for the planning and coordination of children's services within Sacramento County,
  - 2) allow for the identification of county discretionary dollars for children's services that allow Sacramento County to meet the priority of preventing and reducing African American child death in Sacramento County,
  - 3) support the strategic expenditure of county dollars to attract other funding and significant leveraging of private, state and federal dollars, and increases in the overall funding for children's services,
  - 4) create a discretionary local funding stream for children's services to be used to facilitate inter-departmental programs regarding preventing and reducing African American child deaths in Sacramento County, hence promoting greater efficiency of existing resources,
  - 5) create flexibility with county resources to facilitate innovation and experimentation, allowing for new ideas for preventing and reducing African American child deaths in Sacramento County to flourish,
  - 6) position Sacramento County as one of several lead funders of community services for preventing and reducing African American

child deaths, placing the ICPC to serve in a strong position to improve accountability of the service delivery system, including developing a data collection and evaluation system, as well as building the capacity of service providers, and

- 7) position the ICPC as a partner to the Steering Committee to serve as a venue, and provide incentives, to develop comprehensive and integrated policies related to preventing and reducing African American child deaths in Sacramento County.

### 3. Coordinated Systems of Support

**Goal Statement:** Develop high-quality coordinated systems of integrated support services that are easily accessible, culturally responsive and meaningful with a supportive policy and management infrastructure.

#### *Priority Outcome 3*

Establish the Sacramento County Training and Technical Assistance Network to connect, strengthen and expand the capacity of organizations currently focused on preventing and reducing African American child deaths in Sacramento County.

**Strategy 3.1** Allocate resources to implement a Reduction of African American Child Deaths Technical Assistance Resource Center (TARC) that is overseen by the Steering Committee and is connected to the Interagency Children's Policy Council (ICPC). Use the TARC to create an information exchange network that connects partners working in the six targeted communities to the best ideas, practices, policies and research from around the county, state and nation whose efforts are directly related to reducing African American child deaths in Sacramento County.

**Core Activities**

- a. Develop an approach that builds a local “support system” to assist communities in their efforts to prevent and reduce African American child deaths by combining the talents of public agency staff with the expertise of local consultants, the knowledge from resident participants, experiences of community-based programs, the data from existing evaluations, and learnings from existing investments into technical assistance networks.
- b. Facilitate best practices sharing with diverse community stakeholders, including local residents, through meetings, presentations, site visits, media and online.
- c. Support communities to stay attuned to local priorities by increasing the number of people recruited from the targeted neighborhoods to be trained to provide technical assistance.
- d. Identify, develop, refine and disseminate research tools and resources to improve existing and/or to-be-developed services, thereby ensuring an ongoing relevant measurement of service quality of support providers.
- e. Create formal technical assistance partnerships with health and community partner agencies who embrace the emphasized need for equity, inclusiveness and accountability for priority goals outlined in the Blue Ribbon Commission Report.
- f. Foster an approach to technical assistance that encourages strong community engagement and leadership development, strategic partnerships across various sectors, the ability to convene

partners and conduct long-term planning and reliable community data and information systems.

#### 4. Data-driven Accountability and Collective Impact

**Goal Statement:** Use data-driven strategies to inform ongoing improvement efforts to reduce the disproportionate number of African American child deaths.

##### Priority Outcome 4

Develop the RAACD Collective Impact Assessment Framework.

**Strategy 4.1** Monitor, document and report on progress toward established benchmarks for reducing African American child deaths.

##### Core Activities

- a. Develop a shared vision for city and county integrated quality service coordination that seeks to prevent and reduce African American child deaths.
- b. Develop integrated systems indicators for all private and publicly funded organizations focusing on the prevention and reduction of African American child deaths.
- c. Create standardized data collection tools and evaluation plans for tracking the indicators directly related to the prevention and reduction of African American child deaths.
- d. Develop data-sharing agreements to assess collective impact on the prevention and reduction of African American child deaths.

- e. Utilize collective data to inform and prioritize allocation and accessibility of services directly related to the prevention and reduction of African American child deaths.

**Strategy 4.2** Monitor, document and report on the quality of programs focused on the well-being of African American children and the reduction of their disproportionate death rate.

#### **Core Activities**

- a. Research best practices on quality assessment tools.
- b. Draw on research and input from community partners to develop a quality assessment tool.
- c. Utilize the quality assessment tool to monitor the quality of programs that support RAACD.
- d. Facilitate sharing of the quality assessment tool and results through meetings, presentations, site visits, media and online.

## **5. Communications and Information Systems**

**Goal Statement:** Develop a social marketing plan that will favorably impact the prevention and reduction of African American child deaths in the six targeted Sacramento neighborhoods.

#### **Priority Outcome 5**

Create a social marketing campaign aimed at increasing awareness of the disproportionate number of African American child deaths in Sacramento County, particularly in the six targeted neighborhoods.

**Strategy 5.1** Develop and disseminate media materials focused on the prevention and reduction of African American child deaths for local targeted audiences using both traditional media and a variety of social media outlets.

#### **Core Activities**

- a. Review existing research to examine similar social marketing health campaigns, networks and collective impact models.
- b. Conduct community-based dialogues and focus group discussions to identify opinions, attitudes and levels of awareness key audiences have about African American child deaths in Sacramento County.
- c. Utilize research findings to develop a strategically focused rolling social marketing plan that utilizes social media, online and traditional advertising, public relations and community outreach initiatives that target key audiences throughout Sacramento County.
- d. Involve and partner with youth to educate and engage targeted populations to increase awareness about how to reduce African American child deaths, particularly in the six targeted neighborhoods.
- e. Launch the strategically focused grassroots social marketing campaign using social media and traditional media.
- f. Celebrate wins and accomplishments publicly.

## Our Strategic Direction

Children and youth today — particularly children and youth of color — struggle with societal problems such as poverty, racism, violence and other social, economic and political ills that may directly or indirectly impact their health. As stated earlier, the Blue Ribbon Commission’s Report on Disproportionate African American Child Deaths identified four equally dire causes of death that have the most disproportionate impact on African American children relative to their proportion of the total child population in Sacramento County. Those causes include:

1. Perinatal conditions
2. Infant sleep-related deaths
3. Child abuse and neglect homicides
4. Third-party homicide

The Blue Ribbon Commission Report also indicated that the most disproportionate number of African American child deaths occurs in six Sacramento County neighborhoods. Based on data gathered from 1990 through 2009, 81 percent of the 486 African American child deaths in the four categories of death listed above lived in one of the following neighborhoods:

1. Valley Hi/Meadowview
2. Arden-Arcade
3. North Sacramento/Del Paso Heights
4. Oak Park
5. North Highlands/Foothill
6. Fruitridge/Stockton Boulevard

According to findings from the Blue Ribbon Commission Report, the Healthy Sacramento Coalition’s Community Health Needs Assessment and Sacramento County’s 2012 County Health Profile, these six neighborhoods share many of the same risk factors. They each had large percentages of residents living below the federal poverty level, with low levels of educational attainment, had higher proportions of households headed by single females in poverty, and a high percentage of residents without a high school diploma. In addition, all of the neighborhoods had higher proportions of residents who are African American or Latino/Hispanic.



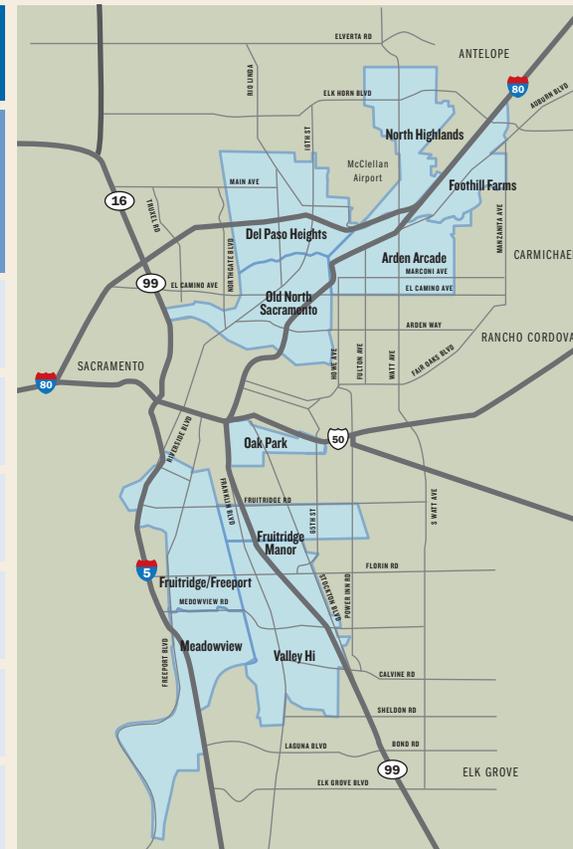
# Sacramento County Blue Ribbon Commission Report on Disproportionate African American Child Deaths

## GEOGRAPHIC DISTRIBUTION

Of the 486 African American child deaths from 1990 through 2009 in the four categories of third-party homicides, infant sleep-related, child abuse and neglect homicides and perinatal conditions, 81% (392 of 486) are from six primary Sacramento County neighborhoods. These neighborhoods are the most disproportionate relative to the ratio of the child population. The following table reflects the top six neighborhoods with the largest number and percent of African American child deaths in the four categories.

**Top Six Neighborhoods and Top Four Causes of Child Death with the Greatest Disproportion  
Sacramento County Resident Child Deaths 1990 - 2009**

	# AA Third-Party Child Homicide	# AA Infant Sleep-Related Deaths	# AA CAN Homicides	# AA Perinatal Deaths	# Total AA Deaths Among Four Categories	# Total Deaths in All Races Among Four Categories	AA Child Deaths as % of All Child Deaths Among Four Categories	AA Children as % Total Child Population In Each Neighborhood
Meadowview/Valley Hi	19	32	15	116	182	446	41%	16%
Arden-Arcade	1	6	7	19	33	95	35%	8%
North Sacramento/Del Paso Heights	9	17	3	34	63	212	30%	16%
Oak Park	1	7	4	11	23	84	27%	9%
North Highlands/Foothill	5	11	7	22	45	188	24%	9%
Fruitridge/Stockton Blvd.	4	11	6	25	46	194	24%	8%



While one of these risk factors alone may not create a barrier to the healthy development of children, exposure to multiple risk factors dramatically increases the likelihood of negative health outcomes. It was important, therefore, that the strategic direction of the Steering Committee acknowledge that children and youth do not develop in a vacuum, but are part of a much larger societal ecosystem made up of families, neighborhoods, institutions and systems that contribute to good or bad health. Understanding the dynamics of how these *social determinants*<sup>4</sup> intersect with social, emotional and physical health is crucial to the task of addressing disproportionate African American child deaths.

*“We consider and make explicit the following fundamental key assumptions that have evolved during the strategic planning process: Place, Policy, Partners, Community Engagement and Youth.”*

The Steering Committee has identified a bold strategic vision with an approach that seeks to focus on a set of targets. The direction of the Strategic Plan, while universal in scope, starts with a focus on addressing four causes and six neighborhoods. The Steering Committee will use a *targeted prevention and intervention approach* to employ strategies and activities that will universally enhance the overall positive health outcomes of everyone in Sacramento County, but will intentionally

point toward the six neighborhoods indicated by the Blue Ribbon Commission Report to have the most disproportionate number of African American child deaths in Sacramento County. In practice, the Steering Committee defines this approach as one that stresses policies and investments targeted at reducing the health inequities, and addressing the needs of those families and communities most acutely impacted by the disproportionate number of African American child deaths. A targeted universal approach unambiguously aims to reduce health disparities for children, youth and families who are most deeply affected by African American child deaths, while addressing overall well-being for all residents living in Sacramento County. The innovative nature of this endeavor demonstrates a timely, innovative and creative approach.

In pursuing this targeted approach that incorporates a view on the multiple factors that determine good health for children, we consider and make explicit the following fundamental key assumptions that have evolved during the strategic planning process: Place, Policy, Partners, Community Engagement and Youth.



<sup>4</sup> CSDH (2008). *Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health.* Geneva, World Health Organization.

**Key Assumptions:****PLACE MATTERS TO A CHILD'S HEALTH**

A place-based approach, which is central to any effort to improve the lives of African American children, has three distinct strategic values:

1. Mapping demonstrates places where health disparities faced by African American children are concentrated, and are the foci of the interventions;
2. Places provide a venue to test the Blue Ribbon Commission's comprehensive theory of change for building healthy communities for African American children; and
3. Places are platforms for engaging community leaders and constituencies necessary for advancing the policy and practices necessary for improving the lives of African American children in Sacramento County.

**POLICY CHANGE = SYSTEMIC TRANSFORMATION**

1. *Connecting Communities to Large Public and Private Organizations*—To dramatically reduce African American child deaths, a more systemic approach is needed. Sustainable, effective policy change requires the meaningful engagement of community leaders, youth, parents/families, advocates, and city/county elected and appointed officials to facilitate and bridge the appropriate relationships between community members and external stakeholders.

2. *Explicit Change Model Connecting Neighborhood and Regional Work*—The Steering Committee recognizes that the development of a framework that identifies the steps required to bring about a policy and systems change to diminish disparities must, at a minimum, take the form of a menu of potential activities that can function as a working document that is easily understood and can be developed in partnership with the Steering Committee.

**COMMUNITY PARTNERSHIPS MATTER**

1. *Partners Contribute to the Steering Committee's Goals Around Reducing African American Child Death Rates*—The care of children starts with, and is deeply rooted in, the fabric of communities and neighborhoods. As such, the Steering Committee realizes its strategy is dependent upon strong community partnerships; however, this approach requires connecting closely to existing efforts already moving in communities and neighborhoods. This requires partners who are:
  - a. Connected to goals, in targeted neighborhoods and have key constituencies directly related to the Steering Committee's agenda.
  - b. Taking on tough community issues, such as housing, jobs, food, safety, etc., that are not directly related to the Steering Committee's agenda, but ultimately will enhance the overall goals.

## COMMUNITY ENGAGEMENT IS ESSENTIAL

1. *Improving the Health of African-American Children Translates into Addressing Race, Class and Power to Improve the Health of Neighborhoods Where Children Live.*

The Steering Committee recognizes that both systems/policy changes and community mobilization efforts to address this vital segment of Sacramento County's population will allow communities to create a clear agenda, fundamentally built on existing community-based assets.

2. *Comprehensive "influence analysis" is incorporated into every level of the planning process.*

Systematic approaches to building community leadership with a clear agenda are the cornerstone for the Steering Committee's success. A review of the literature coupled with interviews with various community leaders all point to a lack of a clear analysis of influence in their communities as a major weakness of previous efforts to improve the health of African American children. The Steering Committee's use of an influence analysis<sup>5</sup> will build a clear agenda, identify potential challenges to, and support for, any effort to improve the lives of African American children, and allow for the creation of change models that build support for the agenda.

<sup>5</sup> A typical power analysis creates shared understanding of key players, along with their position on key issues, conceptual approach and indicators, data, and analysis and communication in order to map the informal political landscape (including its rules and structures). In addition, it's critical that the foundation teams in each place understand how system cooperation and the allocation of resources are influenced by this landscape and how the landscape of power shapes their activities.

<sup>6</sup> Social Justice Youth Development combines best practices of youth development with integrated strategies of community social organizing and advocacy. Shawn Ginwright and Julio Cammarota examine the nexus of youth development and youth organizing, documenting how youth organizing results in positive youth development outcomes and social change.

3. *Steering Committee strategy sets priorities to improve neighborhoods and drive systems/policy change.*

The Steering Committee seeks to structure a process where key partners use its "influence analysis" to:

- a. Identify a policy agenda with clear priorities, goals, constituencies and interests.
- b. Build political will to make systems change, policy change and implementation/funding a priority for policymakers and opinion leaders.

## YOUTH AT THE CENTER OF CHANGE

Social Justice Youth Development<sup>6</sup> is a cornerstone of the Steering Committee's efforts.

1. *A social justice youth development perspective is critical to the success of the Steering Committee's strategy.*

Far too many African American children live in communities plagued by chronically high drop-out rates, pervasive violence and substance abuse, inadequate preparation for the job market, limited access to appropriate health services and limited opportunities for physical activities, but easy access to unhealthy foods. All of these are key contributors to the disproportionate rates of African American child deaths in Sacramento County. If we seek long-term sustainable change, we must involve youth as partners with a grassroots approach and equip them as agents of change, so that efforts targeting young people meaningfully become by and for youth.

2. *A key element of the Steering Committee's youth development approach is violence prevention.*

The Steering Committee's goal is to move violence prevention work in Sacramento County "upstream." Supporting the six targeted communities to adopt strength-based approaches to building youth resilience and development will allow Sacramento County to address the root causes of violence and prevent youth from being exposed to the conditions that lead to the disproportionate number of deaths among African American children.

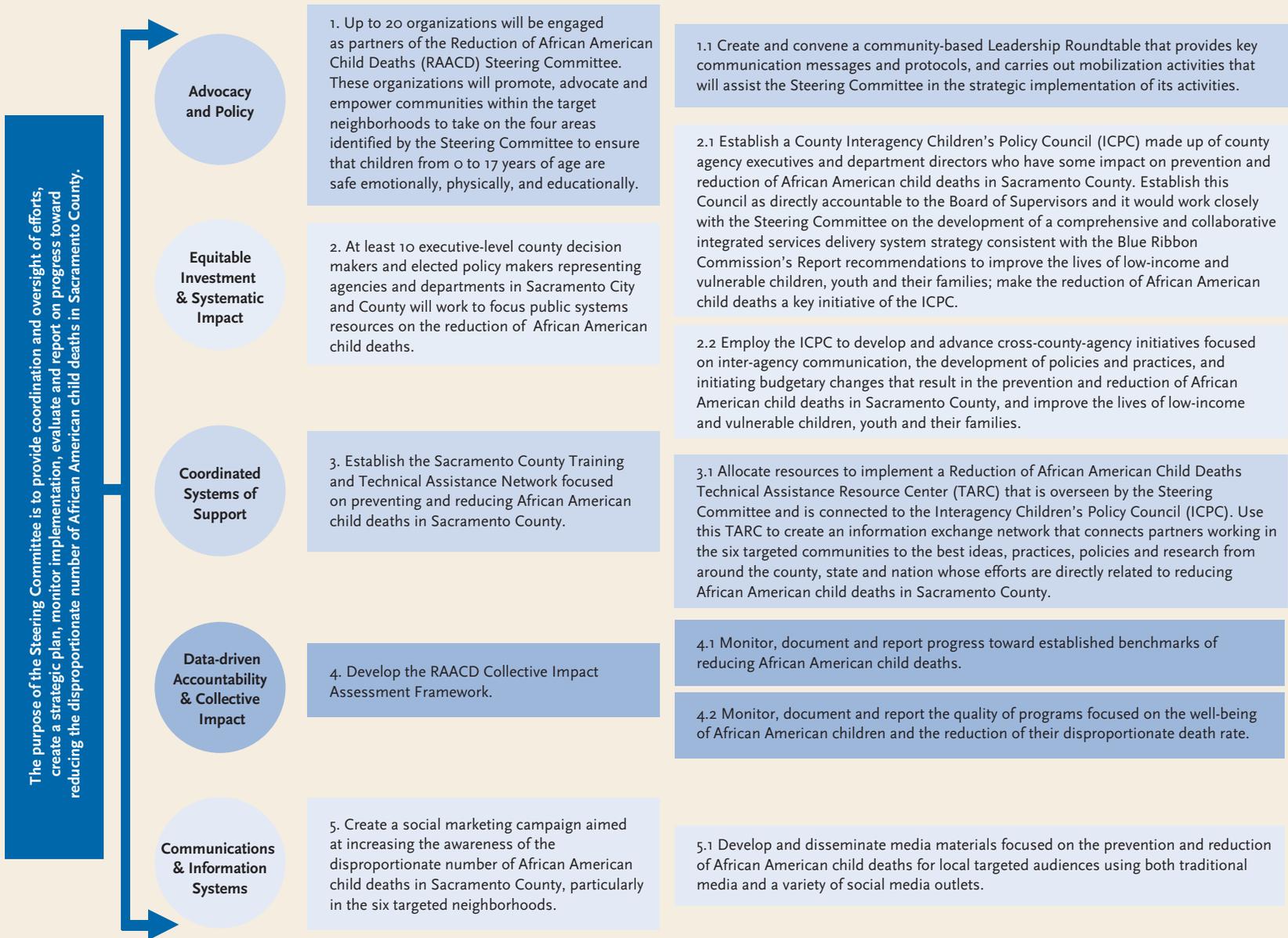
3. *Youth Empowerment*

The Steering Committee recognizes that opportunities must be created to ensure that our youth develop as leaders — each one can teach one — so that the empowerment is reciprocal and culturally relevant.

*“The Steering Committee recognizes that opportunities must be created to ensure that our youth develop as leaders — each one can teach one — so that the empowerment is reciprocal and culturally relevant.”*



# Steering Committee on Reduction of African American Child Deaths Strategic Plan Priority Outcomes Matrix



## Implementation Plan

### Plan Design

As part of its commitment to the overall execution of the strategic plan, the Steering Committee will develop an implementation plan that highlights the core activities to be implemented by 2020, the people and partnerships responsible for the implementation, as well as a project timeline and implementation indicators of success that will list and track key implementation milestones.

The Steering Committee will use a collective impact strategy framework to guide development and design of its implementation plan. Collective impact represents the application of resources from a committed group of partners to a common agenda. The result is to increase capacity to solve complex social problems, such as the disproportionate number of African American child deaths in Sacramento County. The underlying premise of the collective impact strategy framework is that no single organization can create large-scale, lasting social change alone.

Not only does the framework communicate the overall direction of the Steering Committee's efforts, it also demonstrates the integration and impact of multiple partnerships, as well as community-based tactics that will lead to positive behavior change, especially in the six target neighborhoods identified in the Blue Ribbon Commission Report. Moreover, the collective impact strategy framework emphasizes the importance of a comprehensive county-wide "all-in strategy" that is needed to address disproportionate African American child deaths.

In summary, the implementation plan will:

1. Serve as a living document that details the specific and measurable coordinated tasks or actions needed to maximize impact in the six target neighborhoods and throughout Sacramento County.
2. Embrace a practice of shared accountability and a collective approach needed to address the complex social risk factors.
3. Coordinate and manage with Steering Committee partners the alignment among the strategic plan's priority outcomes, strategies and activities.

## Acknowledgments

This report is a result of the collaborative effort of the Steering Committee on Reduction of African American Child Deaths in Sacramento County. The members are an accomplished assembly of community advocates, educators, health care practitioners, faith-based leaders, philanthropists and public leaders. This report is a collective vision and we are privileged to have their profound knowledge and dedication in improving the lives of African American children. We thank them for their insight, commitment and experience.

**Steering Committee on Reduction of African American Child Deaths**

Pastor Alice Baber-Banks  
*Christian Fellowship Ministry*

Keith Herron  
*Target Excellence*

Tyrone Netters  
*Sacramento NAACP*

Debra Cummings  
*Del Paso Heights Community Association*

Chet P. Hewitt  
*Sierra Health Foundation*

Kim Pearson  
*Sacramento County Child Protective Services*

Dr. Ethan Cutts  
*Kaiser Permanente*

Pastor Robert Jones  
*Powerhouse Christian Ministries*

Wendy Petko  
*Center for Community Health & Well-Being, Inc.*

Gladys Deloney  
*Department of Human Assistance*

Dr. Olivia Kasirye  
*Sacramento County Public Health Officer*

Gina Roberson  
*Child Abuse Prevention Council*

Paris Dye  
*Liberty Towers*

Darcel Lee  
*California Black Health Network*

Tina Roberts  
*Roberts Family Development Center*

Addie Ellis  
*Youth Development Network*

Judge Barry Loncke  
*Sacramento Superior Court*

James Shelby  
*Greater Sacramento Urban League*

Toni Moore  
Linda Fong-Somera  
*First 5 Sacramento Commission*

Leslie Moore  
*UC Davis Health System*

Essence Webb  
*Sacramento Association of Black Social Workers*

Diane Galati  
*Dignity Health*

Dr. Robert Moynihan  
*Sutter Health*

Natalie Woods Andrews  
*Sacramento County Office of Education*

**Sierra Health Foundation Center for Health Program Management Staff**

Diane Littlefield, *Vice President of Programs and Partnerships*

Robert Phillips, *Director of Health Programs*

Kindra F. Montgomery-Block, *Program Officer*

Madeline Sabatoni, *Program Associate*

Kari Lacosta, *Public Affairs and Communications Director*

Katy Pasini, *Communications Officer*

Leslie Cooksy, *Evaluation Director*

**CONSULTANTS**

bel Reyes, *Innovation Bridge*

Jim Hill, *Hill & Associates*

Lyn Corbett, *The Pivotal Group*

**CREDITS**

Gregory Berger, *Pomegranate Design*

*We especially wish to thank County Supervisor Phil Serna and the Blue Ribbon Commission for your commitment and progressive leadership.*



*Center for*  
Health Program  
Management

SIERRA HEALTH FOUNDATION

[www.shfcenter.org](http://www.shfcenter.org)

## Supplemental Budget Information – Item 9

**Question:**

What would it cost to for a citywide park infrastructure assessment study to evaluate deferred maintenance and how long will it take?

**Response:**

The Department of Parks and Recreation estimates the cost at approximately \$450,000. Existing staff, with assistance from consultants and/ or new, limited term student interns, would prepare a report identifying needed capital repair and refurbishment of existing facilities in developed parks. The proposed FY2015/16 Capital Improvement Program includes \$2 million to address the most critical needs.

The report would include an analysis of existing hardscape, irrigation, furniture, fixtures, and planting features in each park, coupled with cost estimates for each major element. Recommendations in the study would be prioritized based safety, code compliance, and future maintenance requirements.

To provide a citywide study without interrupting current project delivery schedules is estimated to take approximately 6 months.

# Supplemental Budget Information – Item 10

## **Question:**

What is the status of OpenGov?

## **Response:**

At the May 5<sup>th</sup>, 2015 Budget and Audit Committee staff was asked to provide information on a software product for sale called OpenGov and to explain what the City currently does to provide financial transparency tools for the community.

The City of Sacramento has developed its own easy-to-use budget and financial information website for the community. This information is delivered on our Open Budget website (<http://portal.cityofsacramento.org/opendata/open-budget>). There is no additional cost to the City for the Open Budget website. Financial data is provided in a variety of formats, available from several access points on the City's website ([www.cityofsacramento.org](http://www.cityofsacramento.org)). The City's Open Budget website provides more data, tools, and visualizations than are typically seen on OpenGov or other financial reporting websites.

Staff has reviewed the OpenGov product periodically over the past few years to determine if OpenGov was a cost-effective solution for the City. OpenGov is a widely used tool in small-to medium-sized communities and a few larger cities for publishing multiyear budget, revenue and expenditure information. The City has been given informal cost estimates ranging from \$27,000-40,000 annually for the OpenGov product.

The City's Open Budget website provides the following key data and features at no additional cost to the City.

### **Budget**

- FY2013/14–FY2014/15 Approved Budgets and FY2015/16 Proposed Budget
  - Actual and Projected Revenues
  - By Department, fund, and expense
  - Interactive charts and graphs to compare multi-year expenses and revenues

### **Revenue and Spending**

- By Department, division, fund, and expense
- Actual and Projected
- Checks Issued
- Business Operation Tax Information

- Citywide Contracts and Purchase Orders by Vendors

**Functions/Data features**

- Extensive Graphs and Charts
- Dynamic data inquiry
- Detailed data downloads to standard file formats
- Embedded charts data and graphs into websites
- Utilizes OpenSource tools

In 2014, the City was ranked in the top 10 cities in the nation for enhancing the public's online access to City information and continues to provide leadership and best practices for cities across the nation. Further development in web technologies and data provision will continue to increase transparency, citizen engagement, and make participation in local government even easier.

The Open Budget website is accessed at:

<http://portal.cityofsacramento.org/opendata/open-budget>

## Supplemental Budget Information – Item 11

### **Question:**

Sacramento Gang Prevention Task Force - What would the \$1 million be used for? How will it be allocated and what is the incremental return on investment?

### **Response:**

Councilmember Jennings requested the Police Department to assist in creating Sacramento's Gang Task Force and developing a coordinated and collective response to address gang violence. The Sacramento Gang Prevention Task Force would build upon the progress made by the Mayor's Gang Prevention Task Force in which disbanded in 2013.

The Councilmember proposed a \$1 million set aside for this effort, specifying that in the first 90 days of FY2015/16 the Councilmember would work with the Public Safety Ad Hoc Committee (Committee) to develop a comprehensive Strategic Plan for Gang Prevention that focuses on collaboration with local community based organizations, faith based organizations, school districts, and local law enforcement agencies. This strategic plan will include actionable items to strategically invest the \$1 million for both coordinating and implementing youth development through gang prevention and intervention programming. The Committee would bring the strategic plan to the City Council for consideration within the 90-day period, including specific measureable outcomes related to the use of these funds.

The Department anticipates the need for two positions to provide the coordination and support of the City's efforts at a cost of \$212,000 (1.00 Program Manager and 1.00 Program Analyst). In addition, it is recommended the timeline be reconsidered and established once staff has been hired and there is an opportunity for the Committee to provide specific direction.

## Supplemental Budget Information – Item 12

### Question:

What is the total cost of 15 additional Police Officers? What is the incremental cost of each officer? What is the capacity to fill these positions? What is the goal for the 2035 plan? Does the Department have a higher priority where these additional resources would be more beneficial? How do you measure success?

### Response:

The goal of the 2035 plan is to reach a ratio of 2.0 officers per 1,000 residents. The Police Department Proposed Budget for FY2015/16 includes funding for 1,014.80 positions (725 sworn and 289.80 civilian) and a ratio of 1.53 sworn officers per 1,000 residents<sup>1</sup>. The Department would need to add 275 sworn officer positions to reach a ratio of 2.0 officers per 1,000 residents. A 20-year plan to reach this goal would require the addition of 15 officers each year until 2035. The cost of 15 additional officers and equipment in FY2015/16 is \$1.8 million, with each officer costing approximately \$106,000 annually.

The Department of Justice (DOJ) is currently soliciting applications for the FY2015 COPS Hiring Program grant with a maximum award of 15 officers (\$125,000 per position over three years). As with other grants, costs in excess of the grant reimbursement are funded by the City. If successful, the Department must fill vacancies on a rotating basis by funding source (e.g. Grant, Measure U, General Fund, Grant, Measure U, General Fund) with the expectation of filling the 15 grant-funded positions by the end of FY2015/16.

If the Department does not receive the grant, the 15 positions proposed on May 19 cannot be filled until all existing grant funded vacancies have been filled. Based on current academy schedules it is estimated that these positions would not be filled until the second half of FY2016/17.

To measure the effectiveness of 15 new officers the Department will track and report on the following metrics:

- 1) Ranking Part 1 crimes of the top ten largest cities in California;
- 2) Part 1 crimes reported per 1,000 residents;
- 3) Part 1 crimes reported per sworn officer position; and
- 4) Response times to priority calls.

---

<sup>1</sup> Sworn staffing levels have increased by 85 positions from a low of 640 positions in FY2011/12, but are still 79 positions below peak levels attained in FY2007/08. The staffing ratio has increased by approximately 16 percent since FY2011/12 when sworn staffing ratios reached a low of 1.32 per 1,000 residents.

## Supplemental Budget Information – Item 13

### **Question:**

What is the breakdown of the \$900,000 needed to reopen the three police substations (FTE/Service & Supplies)? What is the timeline to fully staff these substations and would overtime be used in the interim? What was the original intent of the public counters in the community? What is the incremental return on investment for the \$900,000? Does the Department have a higher priority where these additional resources would be more beneficial?

### **Response:**

The City's police substations were never closed. However, public counters at the William J. Kinney (North) and Joseph E. Rooney (South) substations were closed in 2008. The proposed public counter at 300 Richards (Central) was never opened. Currently, the department offers a public counter at the Public Safety Administrative Building (PSAB) located at 5770 Freeport Boulevard.

Reopening a public counter during business hours (Monday – Friday) will require three Police Records Specialists at an ongoing cost of approximately \$212,000. An additional \$16,000 in one-time funding would be necessary to properly equip the facilities for public use, for a total first year cost of \$228,000. Reopening all counters would require nine Police Records Specialists at a full year ongoing cost of \$636,000. An additional \$48,000 would be necessary for one-time service and supply funding, for a total cost of \$684,000.

Of the three closed counters, restoring public counter services at the Kinney substation (North) would be the highest priority. This substation is the farthest away from PSAB and is the only police substation serving north area neighborhoods. It would take approximately six months to hire and conduct background checks for the three additional Records Specialists. The estimated budget of \$228,000 could fund any necessary overtime as well as full-time staff and service and supply needs.

To measure the effectiveness of public counter services the Police Department would track indicators including: 1) Number of public events; 2) Number of existing reports requested; 3) Number of new reports made; and 4) Number of citizen interactions.

This service restoration would be eligible for Measure U funds.

## Supplemental Budget Information – Item 14

### **Question:**

What could be accomplished with an additional \$2 million in park repair funds for a grand total of \$4 million?

### **Response:**

Recommendations to further citywide park renovation and repair projects include the following options:

**Sacramento Historic City Cemetery:** The Department of Parks and Recreation has identified the highest priority repairs addressing antiquated/manual irrigation systems and failing retaining walls. Staff estimates full repair and correction at \$1.3 million. If this project is funded, a phased list of improvements will be developed as a next step.

**Damaged Sidewalks:** A significant number of walkways throughout the City's park system are in disrepair leading to trip and fall hazards. It is estimated that \$1 million would address the most critical sections. Analysis and ranking could occur as a first step as part of a citywide park infrastructure study (see SBI 9).

**Park Furnishings and Amenities:** Picnic tables, benches, concrete pads, BBQ's, fencing and backstops are worn out and/or vandalized and in need of replacement. Unfortunately, park furniture is a primary target for vandalism. A replacement and repair plan would be based on safety, code compliance, future maintenance needs, and esthetics. It is estimated that \$700,000 could address a significant portion of the most critical repair items.

**Water Conservation/Safety and Irrigation Repairs:** There is water loss in the system due to continuing breaks in antiquated water connections and fittings. In addition, there are drinking water safety projects to be completed, which is the focus of the current Measure U funded park repair program. Six of 20 drinking water safety projects have been completed to date. There is insufficient funding to complete all 20 projects. Additional funding of \$1 million could continue these critical repairs.

**Additional Option: Park Restrooms:** There are over 40 public restrooms in the park system; many are worn out and in disrepair due to age and/or vandalism. An allocation of \$1 million could fund the replacement and/or rehabilitation of three to five restrooms.

**FY 2016/17 through FY 2018/19:** Repair needs in the park system are far greater than \$4 million. City Council could opt to make future allocations to further sidewalk repair, water safety/irrigation projects, and/or sport court resurfacing.

## Supplemental Budget Information – Item 15

**Question:**

What would it cost to design a bike trail extension from the Pocket Canal to Garcia Bend Park?

**Response:**

Preliminary engineering which includes the scoping, environmental, public outreach, and design is estimated at \$341,000. The remaining project cost is estimated at \$1.02 million.

This project is currently number 50 in the Transportation Programming Guide. Completion of the planning study would move it to number 17.

This project would not be eligible for Measure U funding or most transportation funding as it is for an off-street bike trail. There may be an opportunity for grant funding (California River Parkway Grant) of \$500,000 for the construction of this project. However, the City would need to fund the remaining cost.

Additional project details are attached.

## MEMORANDUM

TO: Dennis M. Rogers  
CC: Nick Theocharides, Jesse Gothan  
FROM: Judy Matsui-Drury  
SUBJECT: POCKET CANAL BIKE TRAIL EXTENSION PROJECT  
DATE: March 12, 2015

The City's District 7 is interested in pursuing a bike trail connection from the Pocket Canal pump station to Garcia Bend Park, improving connectivity and enhancing the bike trail system in the area. The Sacramento River Parkway (Middle Pocket) is a proposed bike trail project on the Sacramento River levee from Garcia Bend Park to Arabella Way and ranked #48 in the City's 2014 Transportation Programming Guide (TPG) in the Class I Off-Street Bike Trail category.

The purpose of this memorandum is to provide a brief overview and background of the Pocket Canal Bike Trail Extension project and some considerations for the next steps.

### PROJECT DESCRIPTION

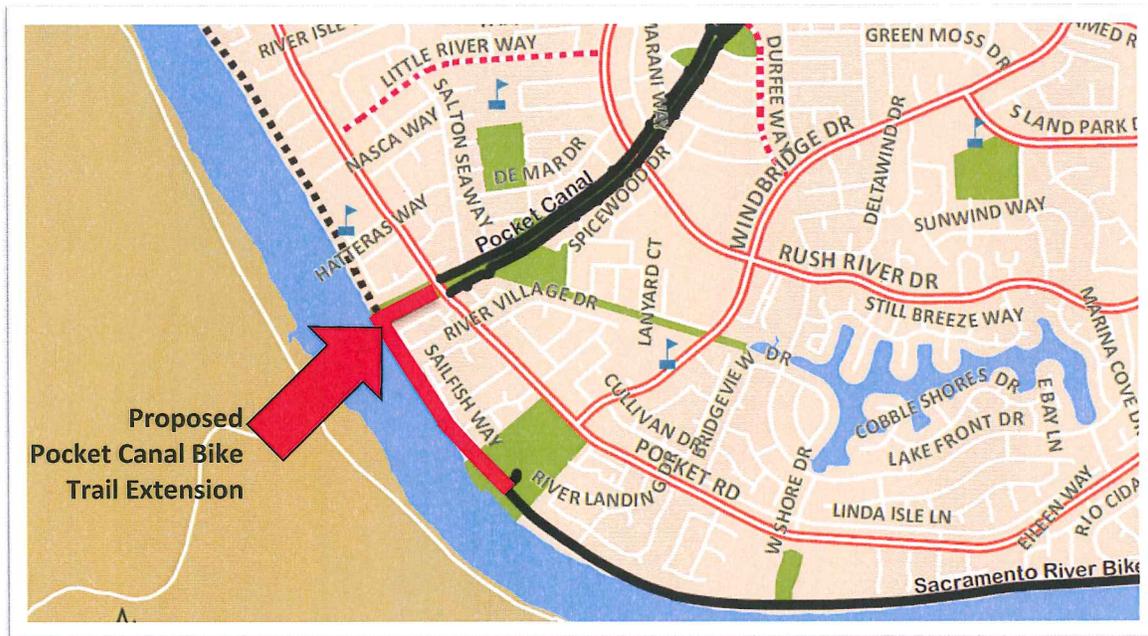
The Middle Pocket Area has riverfront, levee top area with potential for scenic bikeway facilities for both recreational and commuter travel. The project would consist of a Class I off-street bike trail extension from Pocket Road through the City's Pocket Canal pump station property. A paved Class I bike trail would then connect on the top of the Sacramento River levee, heading south to Garcia Bend Park. This bike trail southern terminus would tie-in to the existing Sacramento River Bikeway to the south. This project offers connectivity to the existing Class I off-street Pocket Canal Parkway which connects to the Seymour Park Bike Trail and ultimately the Sacramento River Bikeway to the north. See Figure 1 on the following page.

Some key considerations for the project include addressing potential environmental issues that require close coordination with City Department of Utilities (DOU) and effective communication with residential property owners in the Pocket Area community. Furthermore, construction on the levee and near the pump station might require special design and construction considerations for issues related to seepage and maintenance.

Attached is a draft preliminary cost estimate to perform the preliminary engineering through construction for the Pocket Canal Bike Trail Extension project.

The estimated cost for preliminary engineering through construction is \$1,370,000.

FIGURE 1 – PROPOSED POCKET CANAL BIKE TRAIL EXTENSION



	The Pocket Canal Parkway is a Class I off-street bike trail that extends from Greenhaven Drive to Pocket Road.
	The Sacramento River Bikeway is a Class I bike trail on top of the Sacramento River levee in the South Pocket Area.
	The Sacramento River Parkway (Middle Pocket) is a proposed bike trail from Garcia Bend Park to Arabella Way and ranked #48 in the 2014 TPG.
	There is a gap between the levee and the existing bike trail that terminates at Pocket Road. The new bike trail would extend west of Pocket Road through City pump station property and turn south to Garcia Bend Park along the levee top, connecting to Sacramento River Bikeway. (Total length approx. 1/2 mile)

## Planning Level Cost Estimate - Pocket Canal Bike Trail Extension

This cost estimate is for concept planning purposes only, and is not to be used for programming funds or as a commitment on the part of Public Works to deliver this project. If you decide to proceed further, a Project Report will need to be prepared for approval by the Engineering Services Division of the Department of Public Works which may be used for programming purposes. The Project Report will contain a detailed scope, schedule, and cost estimate for the development of preliminary engineering, environmental clearance, right-of-way acquisition, design, construction, and construction management.

**References:**

- Sacramento River Bikeway Plans, PN HA77
- Sacramento River Bike Trail-Broadway to R Street, PN HA78
- Two Rivers Bike Trail Along American River between Jibboom St and 12th St

Description	Qty	Unit	Unit Cost	Cost
<b>Assumptions</b>				
Bike Trail Width = 20' (12' pvmt + 2 - 4' Shld), W	20.0	ft		
Structural Section:				
AC = 12' W x 5"D, X-Sectional Area	5.0	sf		
AB = 2 x 4' W x 4"D, X-Sectional Area	2.7	sf		
Roadway Excavation:				
X-Sectional Area = 12' W x 5"D	5.0	ft		
Retaining Wall Needed along Station Driveway	500	ft		
<b>Trail</b>				
Top of Levee, Length	1,800	ft		
Levee embankment, Length	300	ft		
Pump Station Property, Length	500	ft		
Total Trail Length	2,600	ft		
AC (CI 2)	943	tons	\$ 225	\$ 212,063
AB (CI 2)	257	cy	\$ 75	\$ 19,259
<b>Roadway Excavation</b>				
Area, sf	5.0	sf		
Length, ft	2,600	ft		
Volume	13,000	cf		
	481	cy	\$ 50	\$ 24,074
<b>Import Borrow</b>				
Height, ft	24	ft		
Area, sf	480	sf		
Length, ft	300	ft		
Volume	144,000	cf		
	5,333	cy		
Net Volume	4,852	cy	\$ 35	\$ 169,815
<b>Structure &amp; Retaining Wall</b>				
Length of Wall, ft	500	ft		
Height of Wall, ft	2	ft		
Wall Area, sf	1,000	sf	\$ 120	\$ 120,000
Major Construction Items				\$ 545,000
Mobilization	10%			\$ 55,000
Traffic Control	5%			\$ 27,000
Construction Staging	10%			\$ 55,000
Unadjusted Construction Cost				\$ 682,000
Contingency	25%			\$ 171,000
<b>Construction Cost</b>				<b>\$ 853,000</b>
<b>Preliminary Engineering (includes Environmental; Public Outreach)</b>				<b>\$ 341,000</b>
<b>Construction Management</b>				<b>\$ 171,000</b>
<b>Total</b>				<b>\$ 1,370,000</b>

## Supplemental Budget Information – Item 16

### **Question:**

What are fire response times/metrics relative to suppression and medical calls by district?

### **Response:**

Data is measured in response times and volume of calls. For Advanced Life Support (ALS) medic units the standard is to arrive on scene in 8 minutes or less. Because engines and trucks are staffed with paramedics, the “clock” stops once the engine or truck arrives. The City’s response standard for engines and trucks is to arrive in 5 minutes or less.

Response times reflect how long it takes a piece of equipment to get to a call after dispatch. Response times are affected by the distance the unit travels to a call. Because some stations have much higher calls for service, units with lower calls for service often respond outside their service area (see attached station service area maps), resulting in a higher response time.

As demonstrated by the response time and call volume data below, a comprehensive deployment study and analysis (Standards of Cover) is needed to determine the appropriate location of apparatus to best serve the needs of Sacramento. Without this analysis, the City’s fire system will continue to be challenged to meet service demands in the most efficient and effective manner.

The following graphs pages provide response data for the City’s Medic Units, Engine<sup>1</sup> Companies, and Truck<sup>2</sup> Companies for the 2014 calendar year.

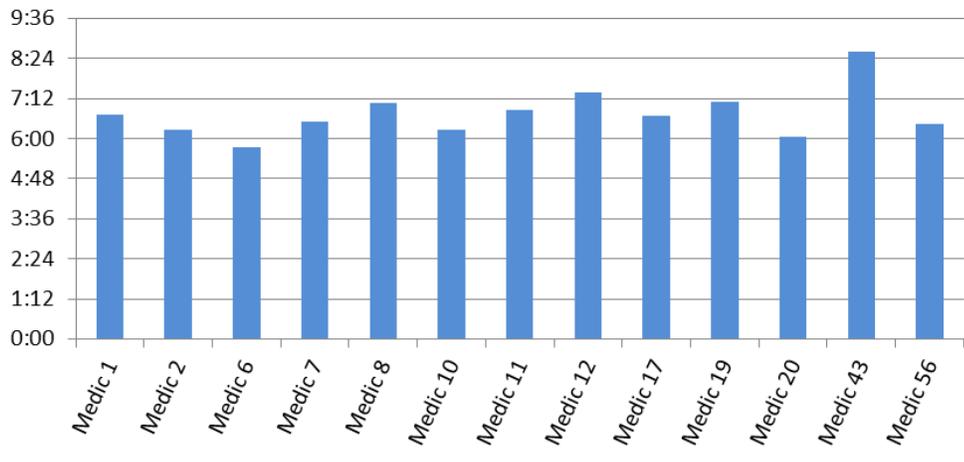
---

<sup>1</sup> Fire Engines are the water distribution vehicle for fire suppression, have a pump and carry water, hoses and ALS equipment.

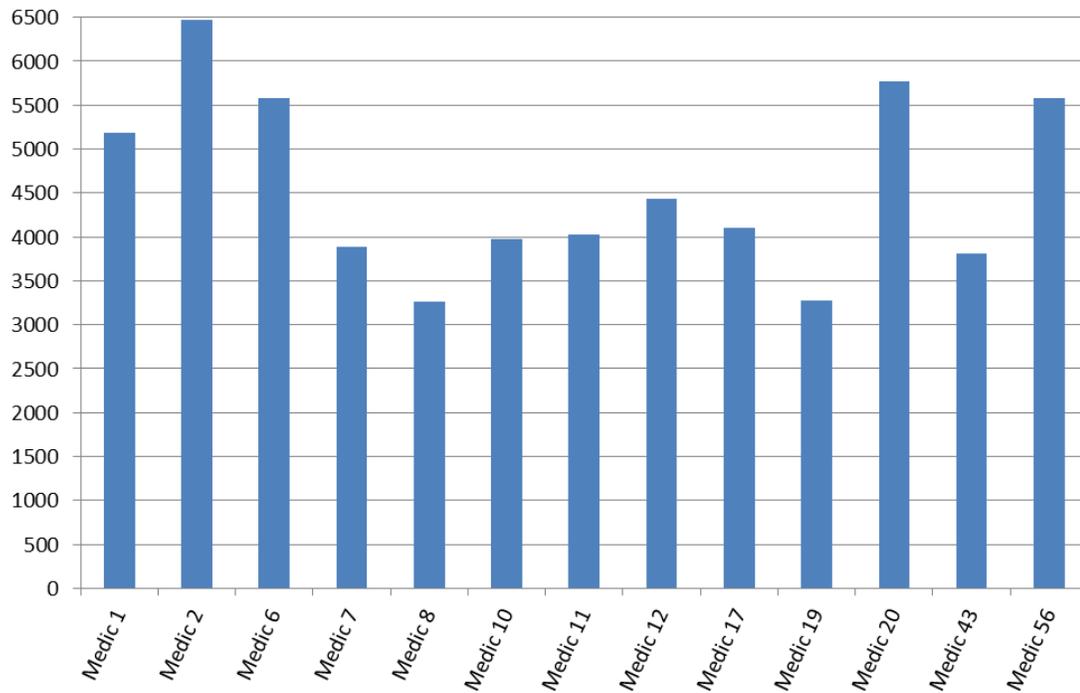
<sup>2</sup> Fire Trucks are used for search and rescue, forcible entry, ventilation, provide support to the engines, and carry ladders and other specialized equipment including ALS equipment.

# MEDIC RESPONSE DATA FOR 13 AMBULANCE COMPANIES<sup>3</sup>

## Average Medic Response Time in Minutes

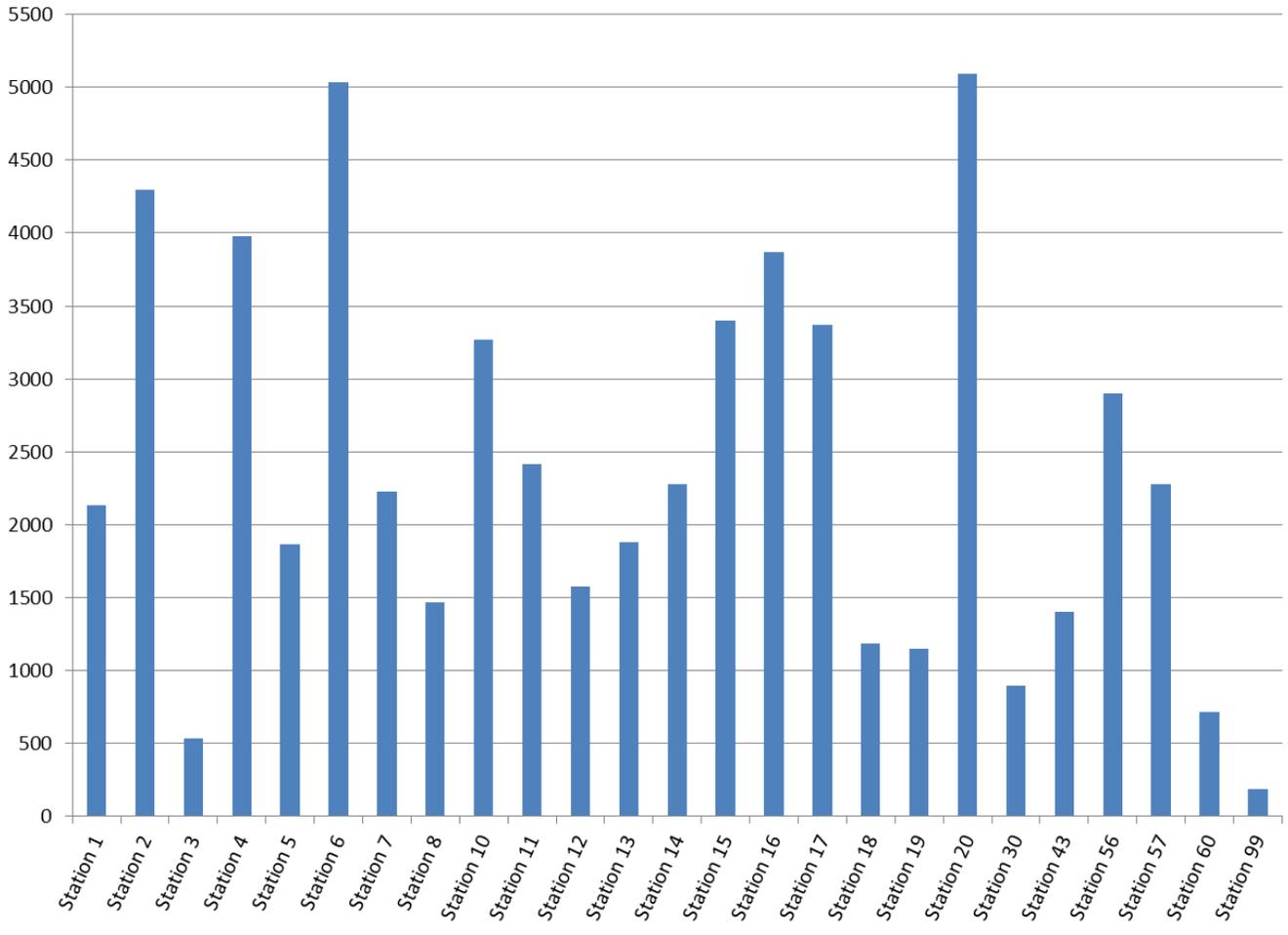


## Calls per Medic Unit



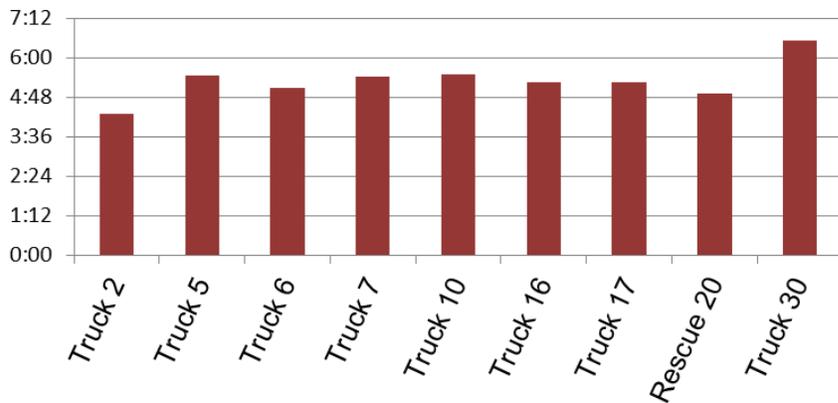
<sup>3</sup> Former Station 9 closed in the early 1990's and is included on these charts as Station 99 for data display only.

### Medic Calls by Fire Station Service Area

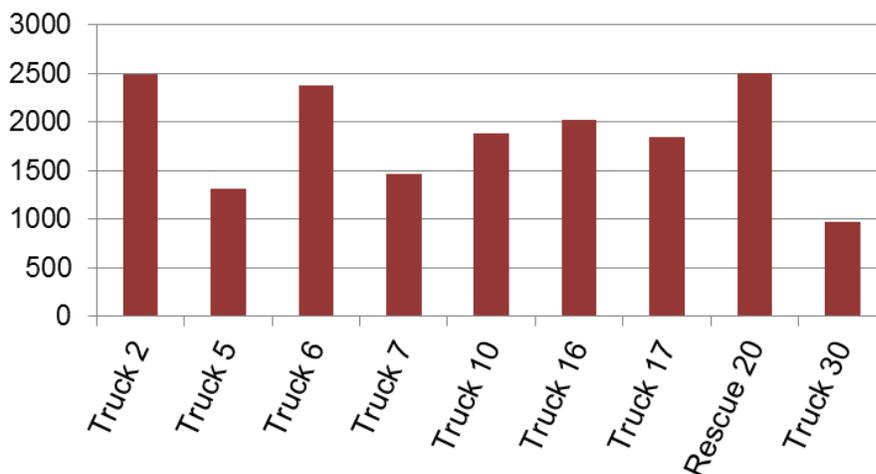


### RESPONSE DATA FOR 9 TRUCK COMPANIES

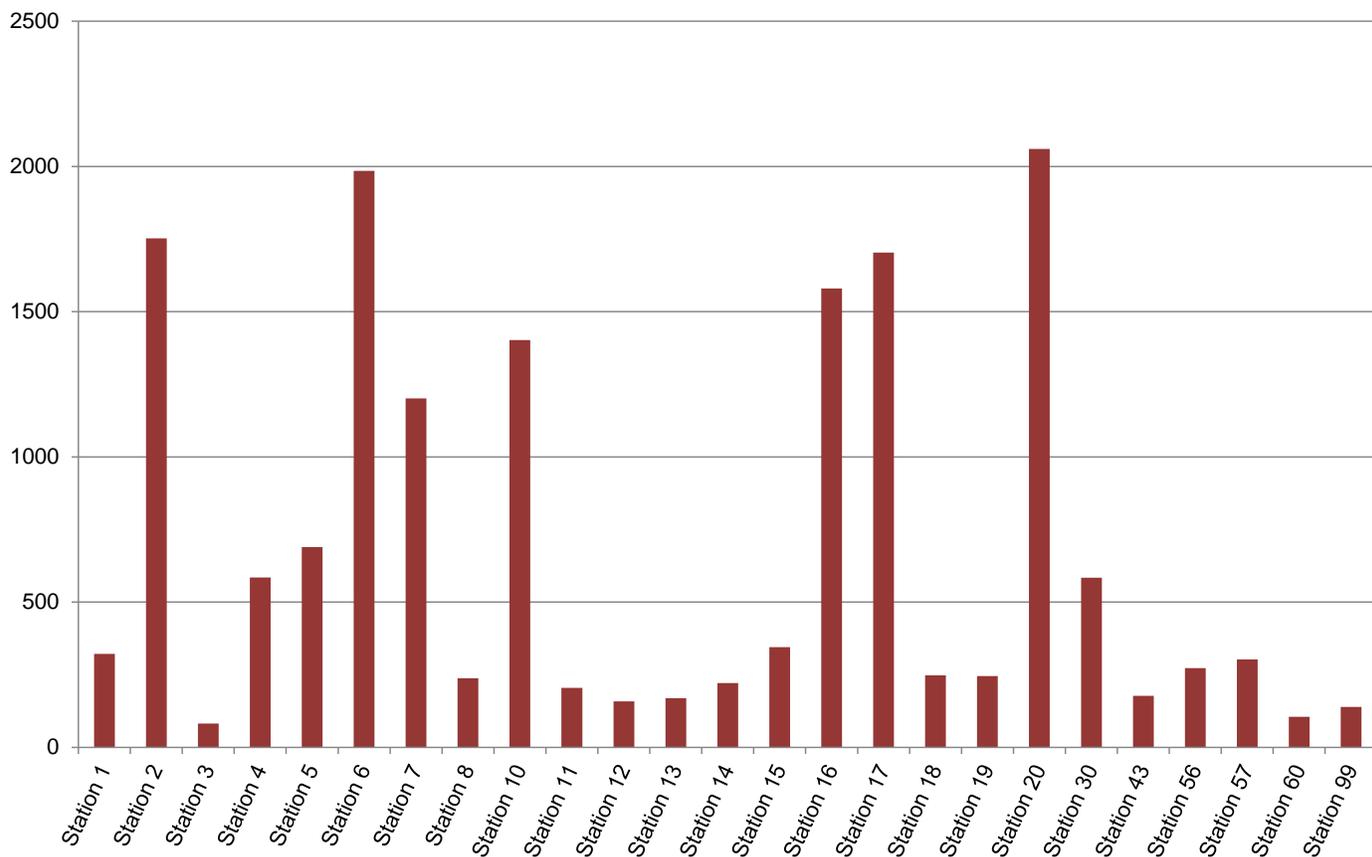
#### Average Truck Response Time in Minutes



## Fire Truck Call Volume

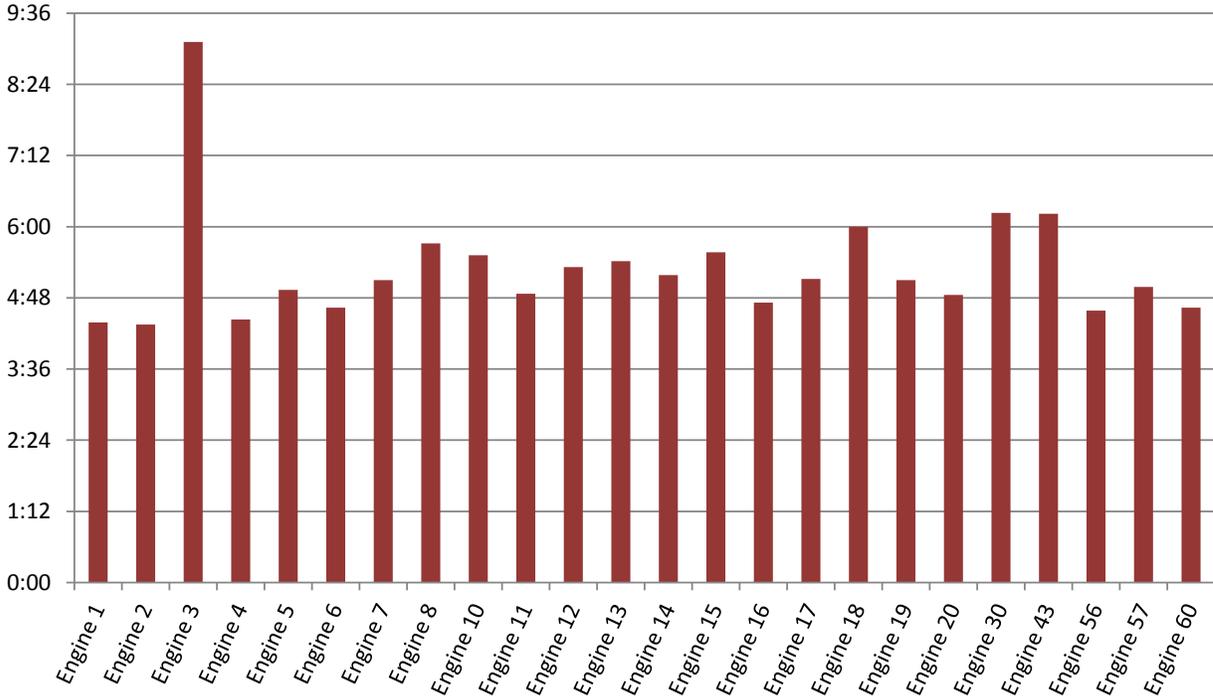


## Truck Call Volume by Station Area

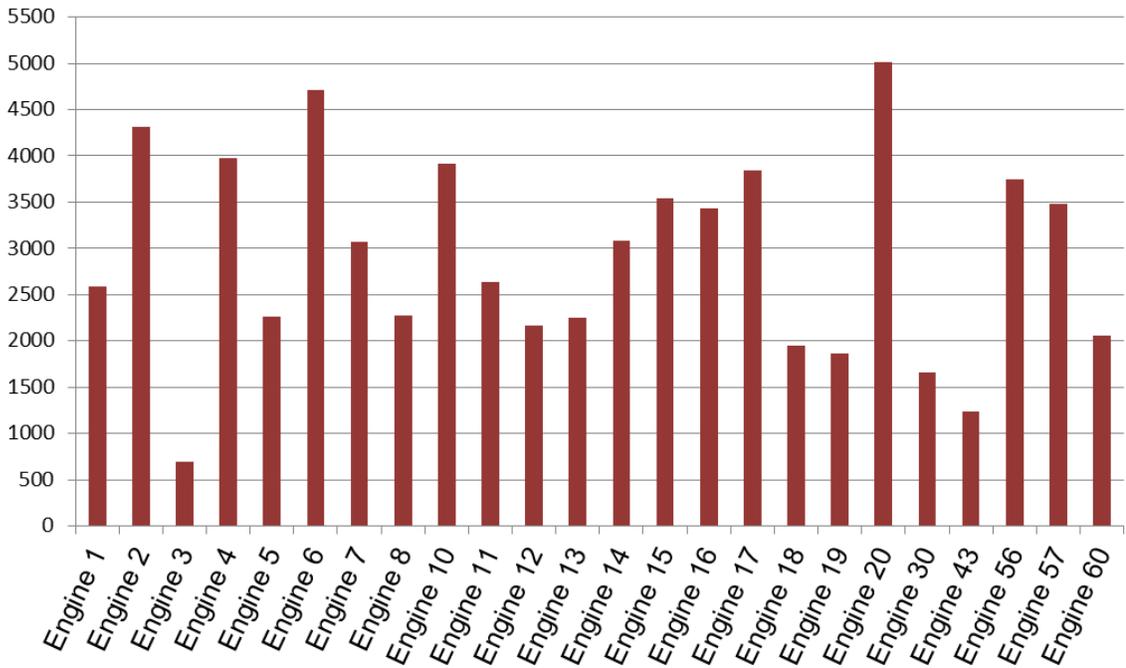


# RESPONSE DATA FOR 24 ENGINE COMPANIES

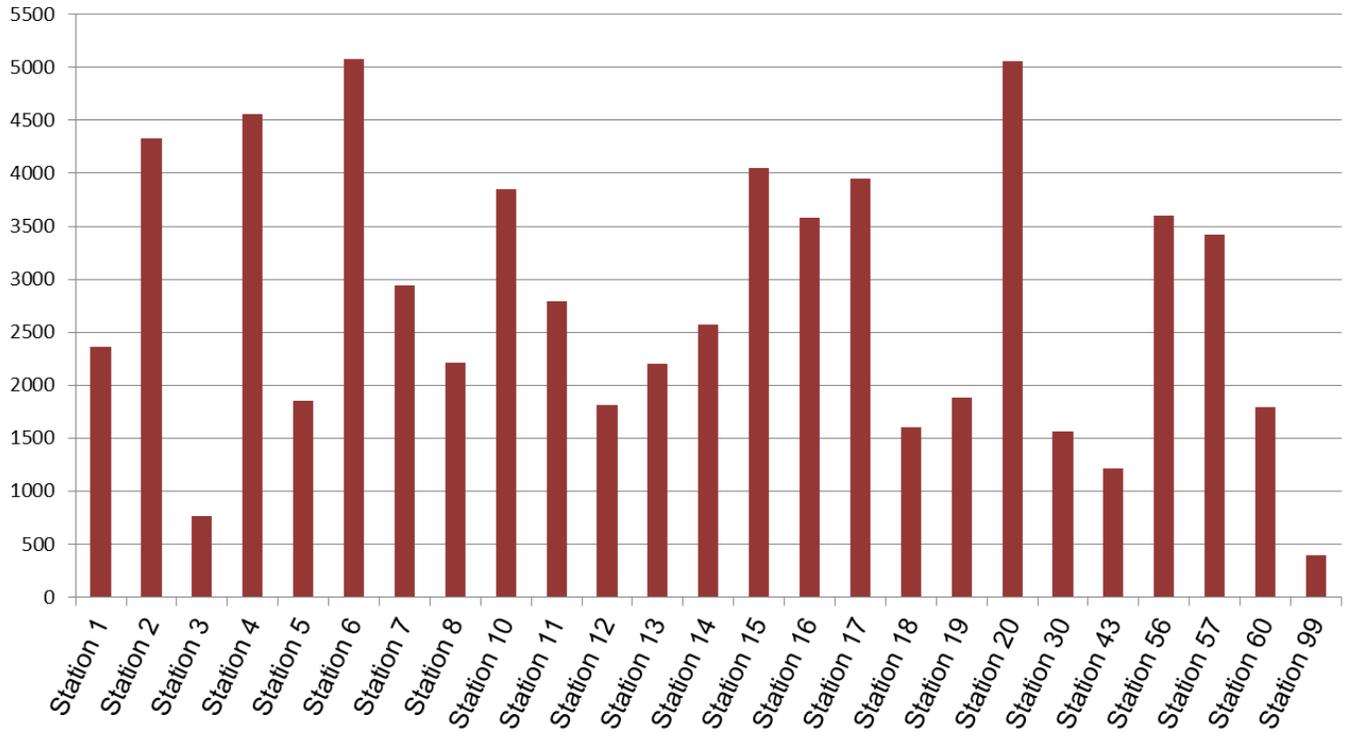
## Average Engine Response Time in Minutes



## Fire Engine Call Volume

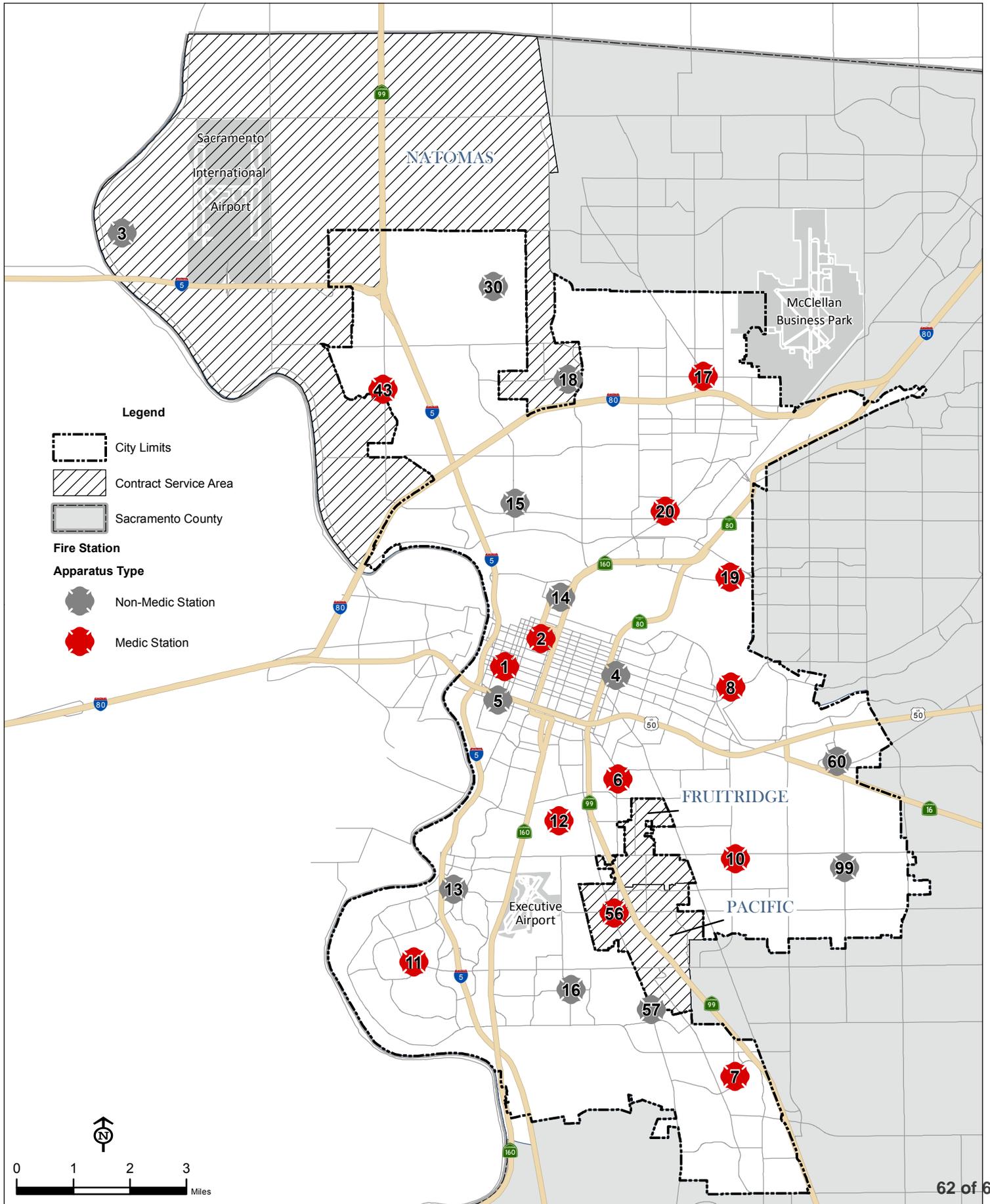


## Engine Calls by Station Service Area





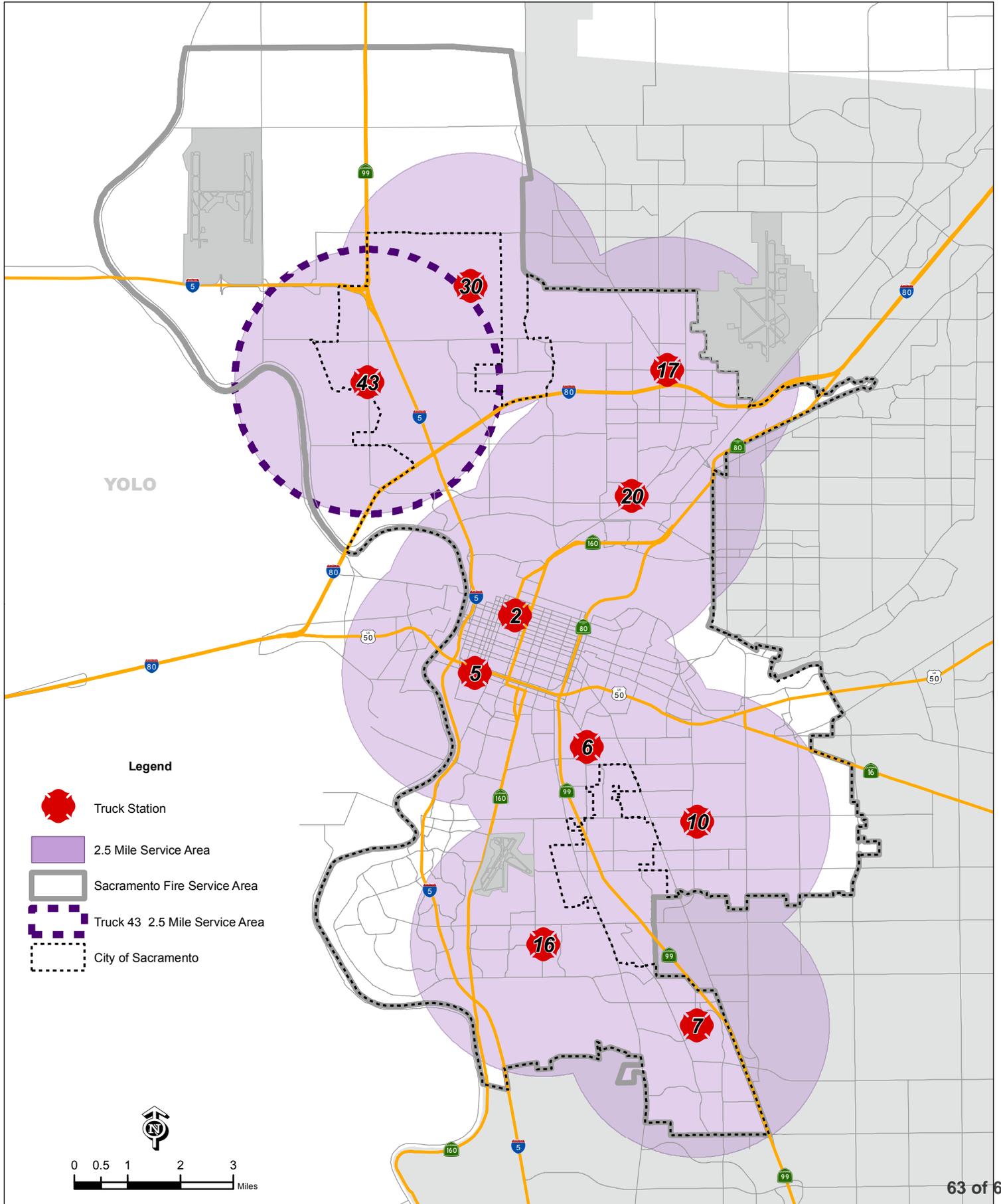
# City of Sacramento Fire Department Medic Station Locations





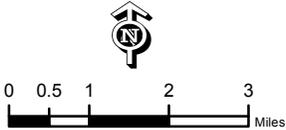
**City of Sacramento  
Fire Department**

**Truck Station 2.5 Mile Service Area - Sacramento Fire Department**



**Legend**

- Truck Station
- 2.5 Mile Service Area
- Sacramento Fire Service Area
- Truck 43 2.5 Mile Service Area
- City of Sacramento





**City of Sacramento  
Fire Department**

**Engine Station 1.5 Mile Service Area - Sacramento Fire Department**

