



City Council Report

915 I Street, 1st Floor
Sacramento, CA 95814

www.cityofsacramento.org

File #: 2016-01076

Consent Item 02

Title: Funding for the Reducing African American Child Deaths (RAACD) Initiative

Recommendation: Pass a Motion authorizing the City Manager or his designee to execute an agreement with the Sierra Health Foundation Center for Health Program Management for the amount of \$750,000.

Location: Citywide

Contact: Khaalid Muttaqi, Director, Gang Prevention and Intervention Taskforce, (916) 808-5380, Office of the City Manager

Presenter: Khaalid Muttaqi, Director, Gang Prevention and Intervention Taskforce, (916) 808-5380, Office of the City Manager

Department: City Manager

Attachments:

- 1-Description/Analysis
- 2-RAACD Strategic Plan, March 2015
- 3-County Executive response to City questions
- 4-Funding Agreement
- 5-RAACD Implementation Plan 2015-2020

Description/Analysis

Issue Detail: In 2011, the Sacramento County Child Death Review Team (CDRT) provided the Board of Supervisors with a 20-year report on all child deaths in Sacramento County (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. In response to the findings, the Sacramento County Board of Supervisors established a Blue Ribbon Commission to develop recommendations to decrease African-American child deaths.

On May 7, 2013, the Commission presented its report, identifying the four highest rates of disproportional African-American child deaths between 1990 and 2009 in the following categories:

- Infant Sleep-Related
- Third-Party Homicide (i.e., child not killed by parent or caretaker)
- Child Abuse and Neglect Homicide
- Perinatal Conditions

On June 16, 2015 the County Board of Supervisors allocated \$1.5 million annually for five years to implement the Strategic Plan to address disproportional death rates among African American children in Sacramento County (attachment 2). This financial commitment is in addition to approximately \$2.35 million annually from the First Five Sacramento Commission, amounting to a total investment of approximately \$20 million for the Reduction of African American Child Deaths initiative (RAACD) over five years.

The well-funded Strategic Plan developed by the County's Steering Committee includes supporting evidence about the seriousness and complexity of problems surrounding child deaths in Sacramento and identifies five key strategies for long-term impact:

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

On October 20, 2015 the County Steering Committee on Reduction of African American Child Deaths (RAACD) presented its Strategic Plan to City Council for discussion as a receive and file agenda item. The discussion prompted various questions from Council Members and direction to the City Manager to follow up with the County Executive to explore opportunities for the City to financially support the County's RAACD initiative. The County Executive's Office

provided written responses to Council questions that were not answered at the meeting on October 20th concerning metrics, specified services, implementation, returns on investment, City/County collaboration and sustainability (attachment 3).

On February 16, 2016 City Council committed \$750,000 from the midyear fund balance to provide funding for the RAACD initiative. These funds are to be used for community grants geared towards integrating community engagement in six target neighborhoods through capacity development. The City has developed a funding agreement with the Sierra Health Foundation Center for Health Program Management for this purpose (attachment 4).

Policy Considerations: The RAACD initiative is consistent with the City's vision to prevent youth violence.

Economic Impacts: None

Environmental Considerations: None

Sustainability: None

Commission/Committee Action: None

Rationale for Recommendation: A funding agreement was developed with the Sierra Health Foundation Center for Health Program Management to provide funding for the RAACD initiative. These funds will be used for community grants geared towards integrating community engagement in six target neighborhoods through capacity development.

Financial Considerations: A total investment of approximately \$20 million has been committed for the Reduction of African American Child Deaths initiative over the next five years. This includes \$1.5 million annually from the County and \$2.35 million annually from the First Five Commission. At midyear the City allocated \$750,000 from the General Funds FY2014/15 year-end results.

Local Business Enterprise (LBE): Not applicable



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



STRATEGIC PLAN // MARCH 2015

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.

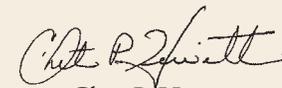
On behalf of the Steering Committee, we thank the Board of Supervisors and the many community partners who have contributed to the plan’s development. Additionally, because belief informs behavior, it is the hope of the Steering Committee that the Board of Supervisors will continue to stand with us in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

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



Executive Summary

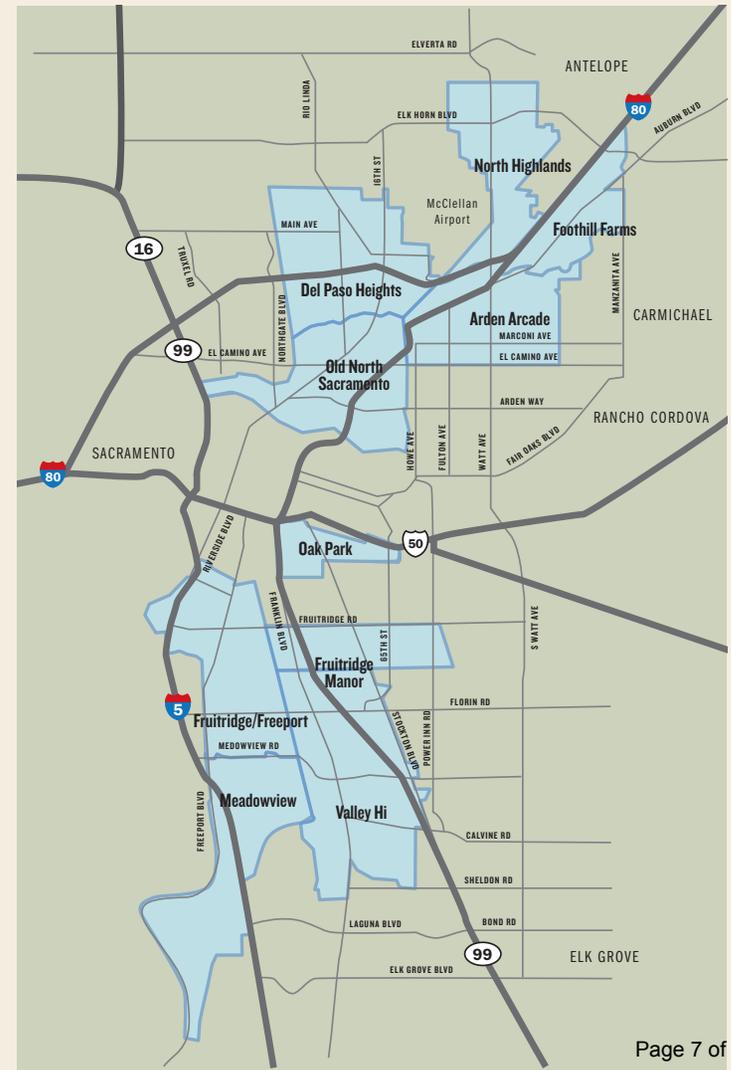
The Steering Committee on Reduction of African American Child Deaths in Sacramento County submits this Strategic Plan in response to the recommendations from the Blue Ribbon Commission convened in 2011 by Supervisor Phil Serna. The Committee’s charge was to focus on the development of a plan to reduce 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 2009.¹ 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.²

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.

¹The 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..

² 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

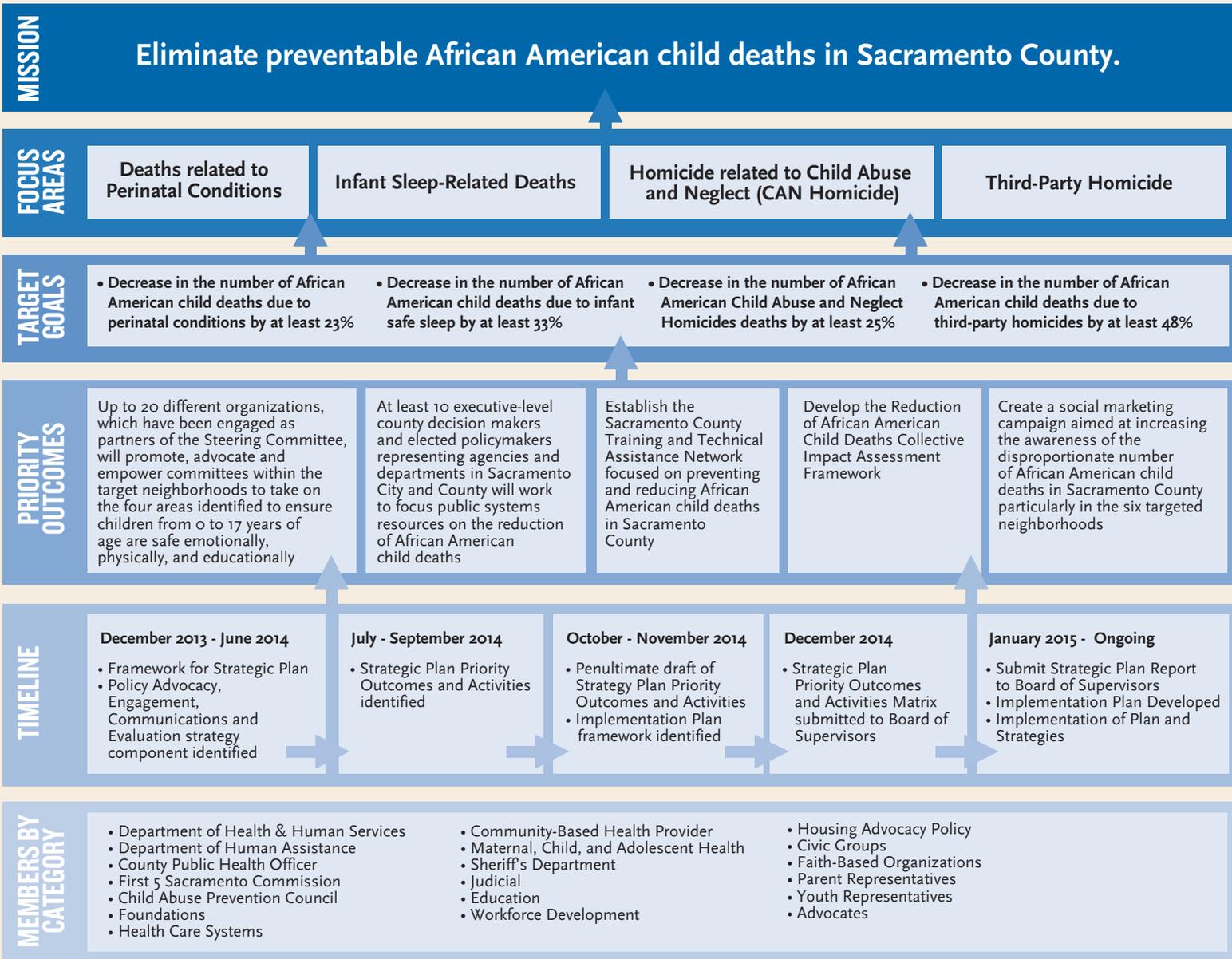
An added workgroup — Evaluation and Assessment — comprised of both Sierra Health Foundation evaluation staff and Steering Committee members, focused on defining and measuring outcomes. This initial planning phase led to the development of strong collaborative relationships among members of the committee, 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” environment³ 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.

³ 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.



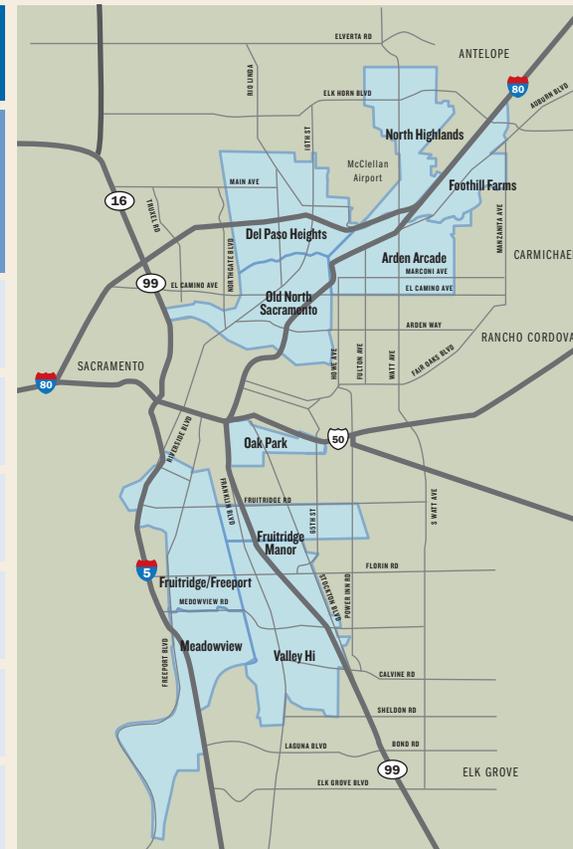
Sacramento County Blue Ribbon Commission Report on Disproportionate African American Child Deaths

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*⁴ 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.



⁴ 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 analysis⁵ 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.

⁵ 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.

⁶ 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 Development⁶ 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.

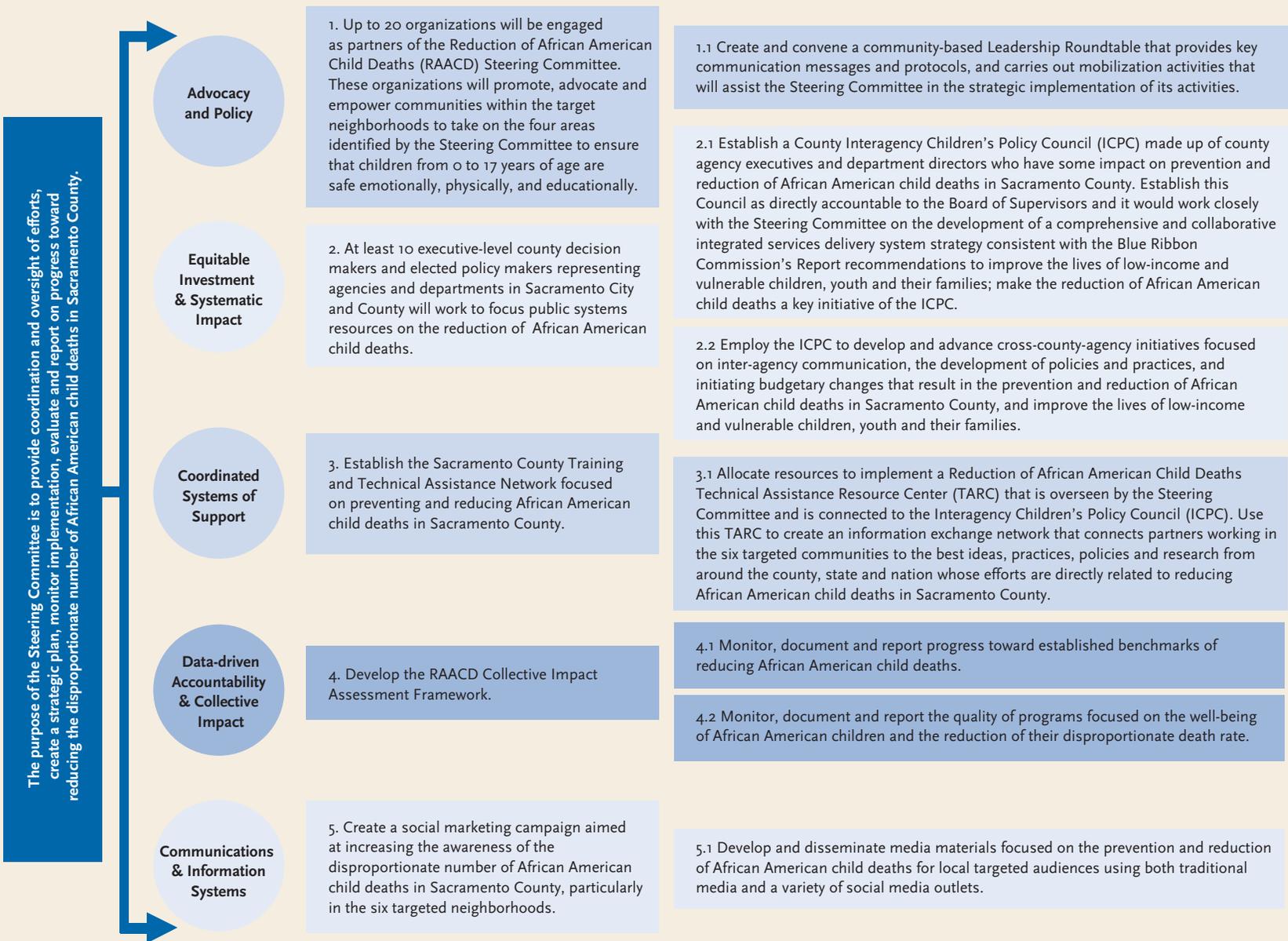
3. *Youth Empowerment*

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

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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
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UC Davis Health System

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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

Countywide Services
Paul G. Lake,
Chief Deputy County Executive



County of Sacramento

Departments
Agricultural Commission
Child Support Services
Conflict Criminal Defenders
Cooperative Extension
Coroner
Environmental Management
Health & Human Services
Human Assistance
Public Defender
Voter Registration

November 18, 2015

John Shirey
City Manager
City of Sacramento
915 I Street, Fifth Floor
Sacramento, CA 95814

Dear Mr. Shirey:

Thank you for your follow-up questions on the initiative to reduce African American Child Deaths in Sacramento. I am forwarding responses from The Steering Committee for Reduction of African American Child Deaths and providing supplemental information on the County's role in implementing their strategic plan.

What specific services/interventions will be funded with City of Sacramento funds?

The Steering Committee is proposing that the City of Sacramento enter into a contract with the Center for Health Program Management ("CHPM", affiliated with the Sierra Health Foundation) to fund grants that will deepen and broaden the engagement of the six neighborhoods most affected by disparities in African American child death. Specifically, the funds would increase grants that support priority areas three (Coordinated System of Support) and five (Communications and Information Systems) in the Implementation Plan to promote the changes required to ensure the health and wellbeing of children. The Coordinated System of Support relies on Community Incubator Leads (CILs). Their role is to integrate community engagement and actions in the six targeted neighborhoods through a community support, capacity development, and empowerment. The CILs will partner with and act as incubators for smaller organizations and grassroots groups in order to build local capacity. Each CIL will be responsible for coordinating the network of RAACD efforts in its neighborhood, including cultural brokers, community grassroots messaging, and youth leadership and engagement, and for managing re-granting programs to small local organizations involved in the RAACD activities. Through the CILs, neighborhood-level investments will engage and empower residents in the work of preventing African American child deaths.

The CILs will also help coordinate the Multi-Disciplinary Teams (MDTs), which are made up public program service providers from multiple agencies, including Sacramento County departments. MDTs will deliver services that target African American families as well as being provided to the community at large. Services offered by MDTs include job training and other employment services, behavioral health and substance abuse treatment, food and nutrition assistance, and health care, among others. In

addition, they will share information and resources to ensure culturally-appropriate, effective services and resources that improve the health and wellbeing of African American children and their families and provide data to a shared data system that will be used to monitor progress toward the prevention of African American child death. The strategy also includes the development of a Technical Assistance and Resource Center (TARC) which will act as a facilitator of capacity building activities and clearinghouse of resources so that the CILs and their partners will have access to the best research, policies, and practices related to reducing African American child deaths. The TARC will also have responsibility for coordinating evaluation and reporting.

Communications and information systems are the focus of priority area 5. The strategies that address this priority are intended to (1) increase community awareness in a culturally sensitive and appropriate way on how best to support healthy development of children and youth, (2) spur community action on behalf of the children, and (3) ensure that the services and programs of the CILs are both known and utilized by residents of the targeted communities. Two major strategies will be used. First, a community media campaign will develop and disseminate media materials focused on the prevention and reduction of African American child deaths to key local audiences using both traditional media and social media outlets. In support of the media campaign, the TARC will facilitate media and communication trainings with CILs and other stakeholders and develop media partnerships to publicize the work and services of the RAACD. The second strategy is the engagement of youth through paid positions in developing and leading the implementation of a social marketing plan. The youth will be supported by the CILs and TARC. The City funds will enable the communications plans to more deeply engage youth, families, and leaders of the neighborhoods in the development and dissemination of effective messages.

What are the metrics used to track and evaluate success?

The ultimate measures of success are reduced African American child death and reduced disparities between the rate at which African American children die and the rate at which other children die. These two primary goals will be monitored as in the past by the Sacramento County Child Death Review Team (CDRT). In addition, recognizing that the changes required to effect those goals will take time, the Steering Committee's Evaluation Workgroup has drafted an evaluation framework of indicators of changes associated with the strategies described in the Implementation Plan. The Evaluation Workgroup is currently identifying measures for tracking indicators associated with each strategy. For example, one general indicator is "increased use of effective, culturally responsive services by children and their families." Specific measures will include increased access to health care services (such as prenatal care) and the quality of care (such as prenatal care that is culturally appropriate and includes screening for depression and exposure to partner violence). Measures are being identified from established sources, such the U. S. Department of Education's guidance on measuring performance in the Promise Neighborhoods, the Centers for Disease Control's *Essentials for Childhood*, and as the Family Engagement Inventory created for the U.S. Department of Health and Human Services. When the framework is more fully developed, it will be shared with a planned Children's Policy Council, the Community Leadership Roundtable, and others for additional input and refinement. To the extent possible, the final set of measures will rely on data that are already collected by agencies that serve children and families in the targeted neighborhoods. The TARC will compile data from multiple sources for regular reporting. In addition, the implementation plan includes participatory action research by

community members, which will involve the application of rubrics to assess dimensions of implementation quality, such the extent to which the activities are youth-centered and build community capacity so that the results will be sustained beyond the five year initiative.

Are there portions of the strategic plan that are already being implemented?

The Steering Committee is working to launch all 5 priority areas. The following is the list of year-one milestones:

- Launch the Community Leadership Roundtable – Fall 2015
- Select CILs through a competitive Request for Proposal (RFP) process –Spring 2016
- Train CILs and engage MDTs – Summer 2016
- Launch community media campaign – Fall 2016
- Finalize evaluation plan in consultation with RAACD stakeholders – Winter 2016
- Working with Sacramento County and key leaders, initiate first meeting of an Interagency Children’s Policy Council (ICPC) – Winter 2016
- Organize the Technical Assistance Resource Center (TARC) – Winter 2016

In addition, Sacramento County has funded new positions in Children’s Protective Services, Public Health, and Probation to complement and enhance components of the Plan. CPS will work with cultural brokers that will enhance outreach to and connections with families to prevent child abuse and neglect, reduce recidivism, reunify families, and find and support permanency for children who cannot be reunified. Public Health will increase its outreach, education, and nursing services to low-income pregnant and new mothers in target communities. Probation will increase its outreach into communities and bring direct services to bear to families to reduce violence and recidivism in the juvenile justice system.

What would be the return on investment for the City’s financial contribution?

The RAACD implementation plan focuses on structural changes that can bring about the sustained improvements needed to eliminate disparities in the deaths of African American children not just over the next five years, but continuing into the future. The Steering Committee notes that many of the financial rewards that will be reaped from these changes will not be observable in the short-term. Thus, instead of a traditional cost-benefit assessment, which requires benefits (such as reduced disparities in African American child death) to be monetized, the Steering Committee proposes to provide a cost-effectiveness analysis. Cost-effectiveness measures financial inputs and, instead of comparing them to monetized benefits, compares them to the social returns on investment. The social returns on investment include:

- more effectively implemented health and human services, which will improve family and child health and wellbeing and thus reduce costs in public health and juvenile justice, while increasing the productivity of young people in the targeted communities

- stronger neighborhood institutions, which provide an infrastructure to sustain changes in the targeted neighborhoods and can be competitive in requests for funding support from private sources as well as from state and federal programs.
- healthier families and individuals, which reduce costs on public and nonprofit health and human service systems
- increased success of young people in the educational system, which creates a productive workforce for the future.

Are there other existing collaboration/programs that can be leverage and integrated with this initiative to help secure its success and sustainability?

As noted above, the initiative will coordinate the MDTs, which are made up of county service providers, in order to streamline and increase the effectiveness of county services provided to the neighborhoods. (Additional information provided in response to Question 1.)

In addition, Sacramento County departments work closely through a number of collaboratives with community agencies, providers, and other government entities to address this issue.

Is there a proposed plan for spending the \$25.5 million allocated to this project over five years?

Sacramento County intends to contract with CHPM over five years to pay for costs as summarized below, at a total cost of \$7.50 million. This does not include nearly \$1 million per year in additional County staff positions dedicated to complementing and assisting with the initiative to reduce African American child deaths in Sacramento County.

Cost Item	Year 1	5-Year Total
Staff, Center for Health Program Mgt. (annual COLAs)	\$ 169,962	\$ 1,045,516
Operating Cost, CHPM	\$ 34,973	\$ 174,865
Consultation Costs	\$ 30,000	\$ 150,000
Community Leadership Roundtable	\$ 30,000	\$ 150,000
Children's Policy Council staff support	\$ 30,000	\$ 150,000
Technical Assistance Resource Center	\$ 100,000	\$ 500,000
Evaluation and Performance	\$ 95,000	\$ 475,000
Communications	\$ 214,413	\$ 876,359
Community Grants	\$ 600,000	\$ 3,000,000
Indirect Costs (CHPM) @ 15%	\$ 195,652	\$ 978,261
Total	\$ 1,500,000	\$ 7,500,000

First Five Sacramento has budgeted funds as shown below and intends to make similar commitments over five years, totaling approximately \$11.75 million.

Use of Funds	FY 15-16
Expand the Valley Hi/Meadowview Family Resource Center	\$150,000
Re-establish the Arden Arcade Family Resource Center	\$700,000
Steering Committee on the Reduction of African-American Child Deaths	\$100,000
Perinatal conditions education campaign	\$200,000
Infant safe sleep education campaign	\$200,000
Cultural broker programs to improve pregnancy and birth outcomes	\$1,000,000
FIRST 5 SACRAMENTO TOTAL	\$2,350,000

The Steering Committee is asking the City of Sacramento for \$3.75 million over five years for activities described above.

How was the "gap" for additional funds determined?

The Steering Committee reviewed budgets for innovative initiatives similar to the RAACD initiative in seven counties. (See attached for more information.) Based on the similarities and differences in approaches and projected costs of the specific activities based on prior grantmaking experience, an annual budget of \$2.25 million was determined. The gap of \$750,000/year reflects the difference between the total budget and the funds that the County Board of Supervisors committed to the initiative (\$1.5 million/year for 5 years).

Please clarify the methodology that was used to aggregate the data used to determine geographic focus areas for this initiative.

Please find attached "Sacramento County Death Review Team: A Twenty Year Analysis of Child Death Data 1990-2009". Page 57 provides a geographic distribution of child deaths in the County during that period. This report describes the overall CDRT methodology.

Please also find attached "Sacramento County Blue Ribbon Commission Report on Disproportionate African American Child Deaths 2013". On pages eight and nine the report highlights in detail the Mapping Analysis that has been used to target the six Sacramento County Neighborhoods.

Please note that this data uses different and larger community area boundaries than the City uses in identifying neighborhoods. Land Park was not specifically identified as a target neighborhood, although it does fall within the larger South Sacramento community area where a large number of African American children died in the time period studied.

Sincerely,



Paul G. Lake
Chief Deputy County Executive

FUNDING AGREEMENT

This agreement, dated _____, 2016, for purposes of identification, is between the **City of Sacramento** (the "City"), a California municipal corporation, and the **Sierra Health Foundation: Center for Health Program Management** ("Recipient"), a California nonprofit public benefit corporation.

Background

Studies have confirmed that African American children in Sacramento County die at disproportionately high rates when compared to children of other races. To reduce the disproportionate number of African American child deaths, Sacramento County formed the Steering Committee on the Reduction of African American Child Deaths ("RAACD"). RAACD's purpose is to provide coordination and oversight of efforts, create a strategic plan, monitor implementation, evaluate, and report on progress towards reducing the disproportional number of African American child deaths in Sacramento County.

In March 2015, RAACD created a strategic plan that outlined strategies for reducing African American child deaths, and in October 2015, Sacramento County approved RAACD's implementation plan, which provides detailed steps that will be taken to reduce the number of African American child deaths in Sacramento County.

Recipient is a California nonprofit public benefit corporation whose mission is to serve a leadership role in expanding health and wellness by securing resources from multiple funding sources and then using those resources to address regional and state health needs. Sacramento County has entered into a contract with Recipient to carry out RAACD's implementation plan.

On February 16, 2016, as part of its midyear budget approval, the City Council allocated \$750,000 during the 2015-2016 fiscal year to financially support RAACD's implementation plan.

With these background facts in mind, the City and Recipient agree as follows:

1. **Term.** This agreement takes effect as described in Section 12 and terminates on June 30, 2017.
2. **Funding.** The City shall provide Recipient with \$750,000 to assist Recipient in executing RAACD's implementation plan. The funding shall be provided no more than 14 days after the effective date of this agreement. In exchange for the City's funding, Recipient shall do all of the following:
 - (a) Issue grants to, or enter into contracts with, organizations within the community to execute services outlined in RAACD's implementation plan;
 - (b) Work in partnership with grantees to organize an infrastructure and network to coordinate county and citywide RAACD efforts;
 - (c) Engage community media partners to promote ongoing communications and marketing mechanisms to facilitate community engagement, outreach, education, and involvement;
 - (d) Provide leadership that engages and mobilizes the community to make sustainable change to achieve a reduction in preventable African American child deaths;

- (e) Develop and monitor grantee and contract reporting strategies to report outcomes of city funding connected to the activities in subsections (b) and (c) of this Section 2;
- (f) Develop and monitor a data collection and evaluation plan; and,
- (g) Provide the City with a written report that details Recipient's progress in implementing RAACD's implementation plan and the extent to which the RAACD implementation plan's goals have been achieved no later than June 30, 2017. Recipient shall provide the findings of the report to the City Council at a City Council meet no later than June 30, 2017.

3. Notices. Any notice or other communication under this agreement must be in writing and is considered properly given and effective only when mailed or delivered in the manner provided by this Section 3 to the persons identified below. A notice or other communication that is mailed is effective or considered to have been given on the third day after it is deposited in the U.S. Mail (certified mail and return receipt requested), addressed as set forth below, with postage prepaid. A notice or other communication sent in any other manner will be effective or will be considered properly given when actually delivered. A party may change its address for these purposes by giving written notice of the change to the other party in the manner provided in this Section 3.

If to the City:

City of Sacramento
 City Manager's Office
 915 I Street, 5th Floor
 Sacramento, California 95814
 Attention: Khaalid Muttaqi
 Gang Prevention Intervention Director

If to Recipient:

Sierra Health Foundation: Center for
 Health Program Management
 1321 Garden Highway
 Sacramento, CA 95833
 Attention: Kim Maslaniak
 Director of Operations

- 4. Assignments.** A party may not assign or otherwise transfer this agreement or any interest in it without the other party's prior written consent, which the other party may withhold in its sole discretion. An assignment or other transfer made contrary to this section 4 is void.
- 5. Binding effect.** This agreement binds and inures to the benefit of the parties' successors and assigns.
- 6. Time of Essence.** Time is of the essence in performing this agreement.
- 7. Severability.** If a court with jurisdiction rules that any nonmaterial part of this agreement is invalid, unenforceable, or contrary to law or public policy, then the rest of this agreement remains valid and fully enforceable.
- 8. Waiver.** A party's failure to insist on strict performance of this agreement or to exercise any right or remedy upon breach of this agreement will not constitute a waiver of the performance, right, or remedy. A party's waiver of another party's breach of any provision in this agreement is not a continuing waiver or a waiver of any later breach of the same or any other provision. A waiver is binding only if set forth in a writing signed by the waiving party.
- 9. Interpretation.** This agreement is to be interpreted and applied in accordance with California law, except that that the rule of interpretation in California Civil Code section 1654 will not apply.

10. **Attorneys' fees.** The parties must bear their own costs and attorneys' fees incurred in connection with this agreement.
11. **No Third-Party Beneficiaries.** This agreement is solely for the benefit of the City and Recipient. It is not intended to benefit any third parties.
12. **Effective date.** This agreement is effective on the date both parties have signed it, as indicated by the dates in the signature blocks below.
13. **Counterparts.** The parties may sign this agreement in counterparts, each of which is considered an original, but all of which constitute the same agreement. Facsimiles, pdfs, and photocopies of signature pages of the agreement have the same binding effect as originals.
14. **Integration and modification.** This agreement sets forth the parties' entire understanding regarding the matters set forth above and is intended to be their final, complete, and exclusive expression of those matters. It supersedes all prior or contemporaneous agreements, representations, and negotiations—written, oral, express, or implied—and may be modified only by another written agreement signed by both parties.

(Signature Page Follows)

City of Sacramento,
a California municipal corporation

By: _____
Howard Chan, Assistant City Manager
For: John F. Shirey, City Manager
Date: _____, 2016

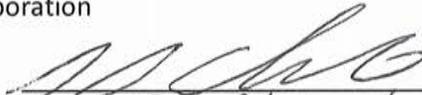
Approved as to Form
Sacramento City Attorney

By: 
Michael Sparks
Senior Deputy City Attorney

Attest:

By: _____
Assistant City Clerk

**Sierra Health Foundation: Center for Health Program
Management,** a California nonprofit public benefit
corporation

By: 
[Name] Gil Alvarado
[Title] VP of Admin CFO
Date: 8/18, 2016

By: _____
[Name]
[Title]
Date: _____, 2016



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

Steering Committee on Reduction of African American Child Deaths

Implementation Plan for
Sacramento County 2015-2020



Dear Colleagues,

We are pleased to share with you the Steering Committee on Reduction of African American Child Deaths' (RAACD) implementation plan to reduce the disproportionate African American child mortality rate in Sacramento County. This implementation plan, which is a follow up to the Steering Committee's strategic plan, provides detailed programmatic steps to be undertaken to reduce the number of African American child deaths by 10% to 20% over a five-year period.

For far too long, African American children have died at a higher rate than other children in Sacramento County. But over the past two years, the community, with leadership from the Sacramento County Board of Supervisors, has come together to address this longstanding inequity. A strategic plan, *African American Children Matter: What We Must Do Now*, was created by the Steering Committee to address the structural issues we believe limit Sacramento County's ability to reduce African American child mortality rates. This plan is rooted in the belief that while all of our children matter, to successfully address health and well-being disparities affecting vulnerable children, targeted resources and systemic changes are required.

Moving forward, our priority is to operationalize the strategic plan by identifying and strengthening underutilized community assets – people, neighborhood associations and institutions – and strategically investing in their capacity to generate a reduction in

the African American child mortality rate. The following implementation plan sets forth tangible steps toward this goal. It provides a roadmap for the establishment of six intra-neighborhood collaboratives to support the delivery of community-based, culturally relevant services; strategically connects the six neighborhoods to create a learning community network and generate the scale required to achieve the identified countywide goal; and then links the network to an interagency policymaking body responsible for understanding, planning and acting to promote the health and well-being of all children in Sacramento County.

We passionately believe that Sacramento County's ability to address disproportionate African American child death is only possible if we can more effectively partner with the most affected communities. We also believe we can simultaneously set in place a structure for improving the county's ability to ensure all children have the opportunity to thrive regardless of the zip code they reside in. Through this process of creating the strategic and implementation plans, we have seen the African American community, and Sacramento County, come together to contribute to this multiyear community planning and development effort. The incredible leadership and partnerships that have emerged inspire us, and we look forward to their continuation as we enter this next critical phase. Together we can and we will make a difference.

Respectfully,



Wendy Petko
Co-Chairperson



Chet P. Hewitt
Co-Chairperson

CONTENTS

INTRODUCTION	2
Core Objectives for the RAACD Implementation Plan	3
KEY IMPLEMENTATION MILESTONES AND TIMELINE	4
OVERVIEW OF THE RAACD IMPLEMENTATION STRUCTURE	5
Community Network Design	5
IMPLEMENTATION OF THE FIVE PRIORITY STRATEGIES	7
Promoting Advocacy and Policy Transformation	7
Equitable Investment and Systematic Impact	8
Coordinated Systems of Support	9
Data-driven Accountability and Collective Impact	11
Communications and Information Systems	13
CONCLUSION	13
APPENDIX	14
ACKNOWLEDGEMENTS	15



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.



Introduction

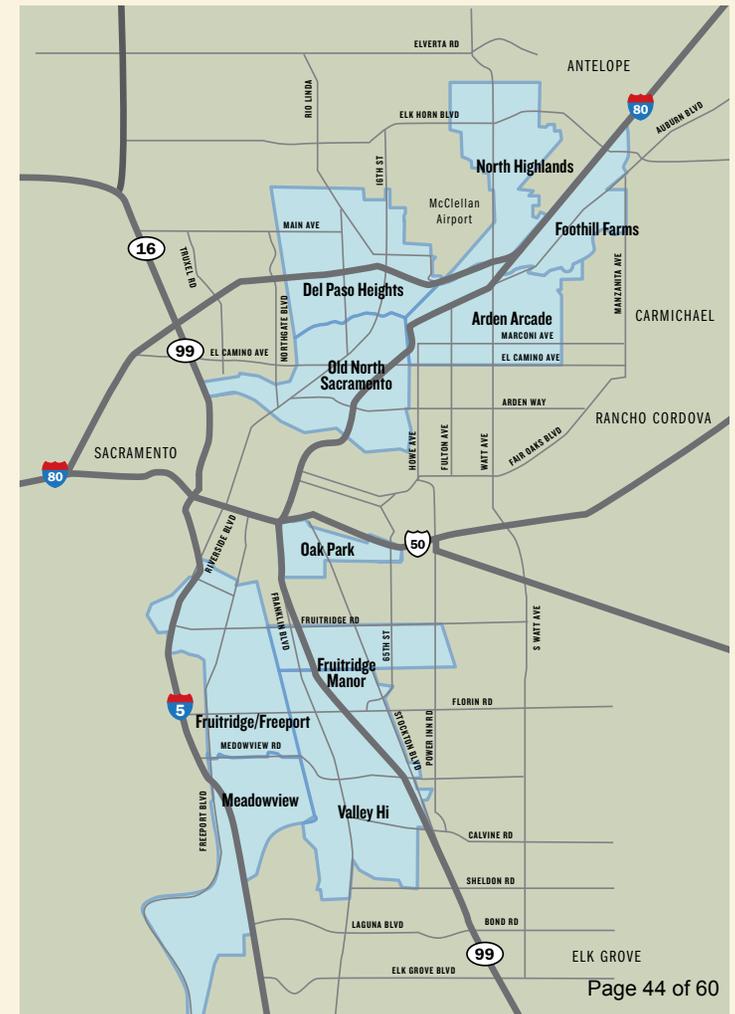
In April 2013, the Sacramento Blue Ribbon Commission Report on *Disproportionate African American Child Deaths* described the 20-year problem of disproportionate African American child mortality in Sacramento County, recommended the adoption of the goal of reducing African American child deaths by at least 10% to 20% by 2020, outlined potential approaches to achieving the goal and established the Steering Committee on Reduction of African American Child Deaths (RAACD). The report identified four primary causes of death that have the most disproportionate impact on African American children in Sacramento County. Those causes are:

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

It also identified six neighborhoods that have the highest numbers of African American child deaths in the county. The six neighborhoods have become the focus of the RAACD efforts and include:

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

In March 2015, following an intensive and passionate community process driven by core values of collaboration, community engagement, accountability, innovation, sustainability and service, the Steering Committee on RAACD created a strategic plan, *African American Children Matter: What We Must Do Now*, outlining five priority strategies to transform public systems and foster meaningful community engagement to achieve a 10% to 20% reduction goal.



The strategies included a focus on:

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



At the June 2015 Sacramento County Board of Supervisors meeting, nearly 300 advocates, many from neighborhoods most impacted by disproportionate rates of African American child mortality, voiced their support for the strategies proposed in the plan. The Board of Supervisors agreed with the community advocates and voted to approve \$1.5 million annually for five years to implement the plan. This commitment is in addition to those made by the county’s First 5 Sacramento Commission and its public health, child welfare and probation departments. It is unique and complementary to these efforts because it expressly focuses on facilitating unprecedented levels of community capacity, engagement and action to reduce African American child deaths.

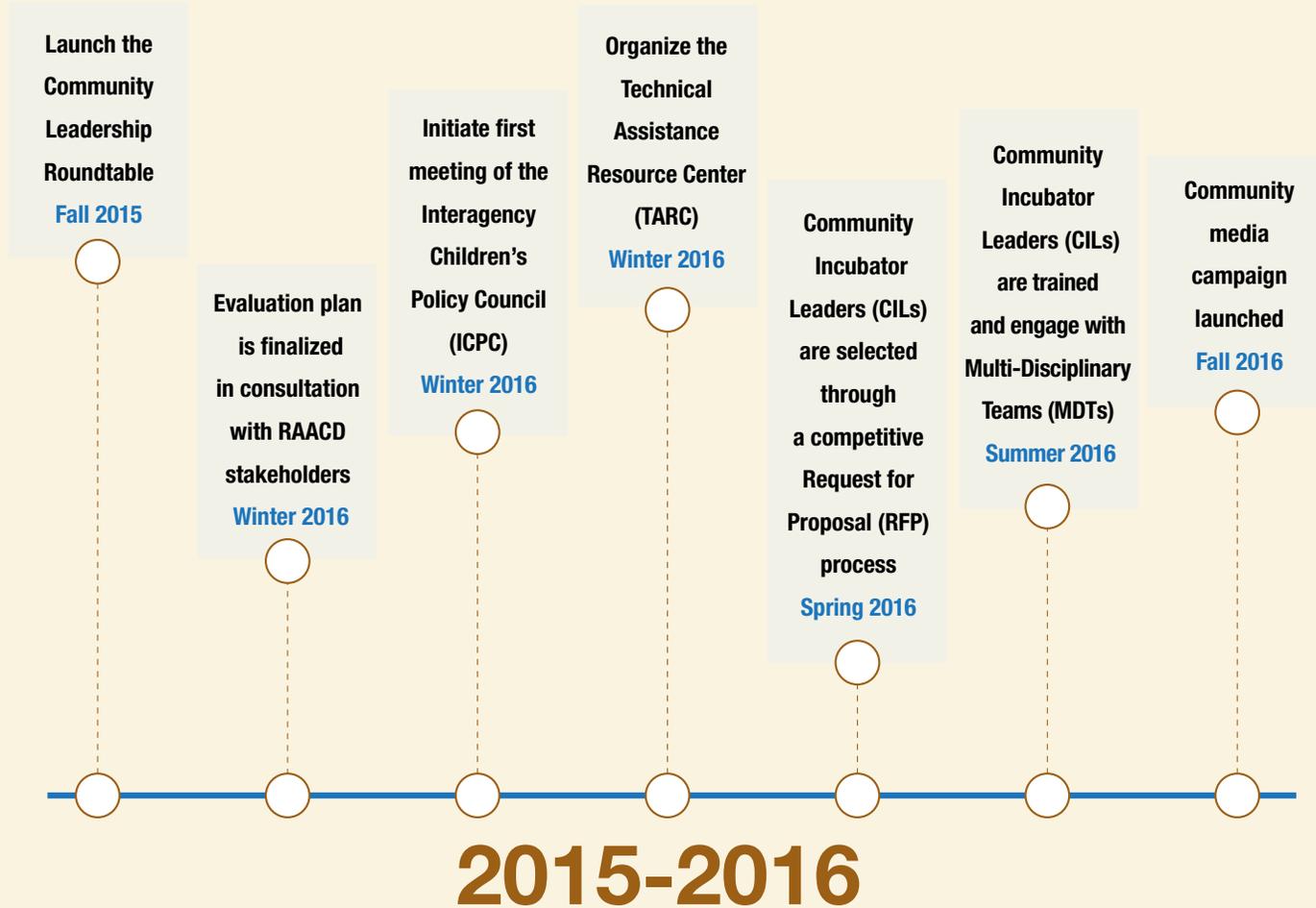
Accordingly, this implementation plan is a living document. It is designed to adapt to meet the dynamic environment in which it will operate.

Core Objectives for the RAACD Implementation Plan

Six core objectives, based on the principles outlined in the strategic plan, will be used to monitor the effectiveness of the implementation process. The objectives, listed below, will continually be refined through an ongoing community engagement process and analysis of new information and data as it becomes available.

1. Engage residents and a select group of community institutions in RAACD priority neighborhoods and establish them as an inter-neighborhood network to reduce African American child deaths
2. Design a community/grassroots messaging and marketing campaign and deploy it through a saturation strategy in the focus neighborhoods
3. Increase the level of investment in high-quality and evidenced-based programs and services for children, youth and families in the focus neighborhoods
4. Improve access to services through the co-location of multidisciplinary social services teams in the RAACD-focused neighborhoods
5. Align county policy discussions and practice changes with identified neighborhood network priorities
6. Monitor the quality of implementation, evaluate effectiveness and report on progress toward the ultimate goal of reducing African American child deaths and promoting the well-being of all children in Sacramento County

Key Implementation Milestones and Timeline



Overview of the RAACD Implementation Structure

The operations structure laid out in the implementation plan will be overseen by the Steering Committee (SC) and managed by Sierra Health Foundation Center for Health Program Management (CHPM). The structure is designed to accomplish the plan's goals by:

1. **Creating, managing and supporting a community network:** organize a high-performing, cohesive network at both the neighborhood and county levels and connect this network to public sector efforts to reduce African American child deaths
2. **Connecting neighborhoods to resources:** assist community organizations located in the six focus neighborhoods by identifying and connecting them with new financial in-kind and human resources, while helping them to strategize and understand the benefits of forming a partnership with government, private funders and their peers
3. **Improving organizational sustainability and capacity:** provide essential skill-building training and technical assistance to help community organizations build the necessary capacity to implement and maintain efforts to improve child health and well-being in their communities over time
4. **Distributing best practices:** identify, gather and disseminate relevant information, lessons learned and promising practices to create a conduit for ideas drawn from sources outside the network, such as academics, policymakers and advocacy groups
5. **Publicizing successes and “hard lessons”:** announce the impact and results of the implementation effort to build new knowledge and advance the efficacy of our work

Community Network Design

Figure 1 on the following page outlines the components of the community network structure called for in the Blue Ribbon Commission's report and the SC's strategic plan. These components include the following entities:

1. **Steering Committee on Reduction of African American Child Deaths (SC):** The SC will provide coordination and oversight for all implementation activities, as well as evaluate and report progress toward reducing the disproportionate number of African American child deaths in Sacramento County.
2. **Technical Assistance Resource Center (TARC):** The TARC is the SC's independent operational partner that works directly with community stakeholders to build neighborhood capacity and identify resources to address issues that arise during implementation. The TARC will be managed by CHPM and be comprised of faculty that will include academics, consultants and community leaders with experience designing programs that strengthen the operational capacity of community institutions on an as-needed basis.
3. **Community Leadership Roundtable (CLR):** The CLR is a group of individuals who speak directly with the SC. The CLR, which will include representatives from each of the neighborhood Community Incubator Leads (see following page), will have responsibility for relaying information from the SC to community residents and for bringing community concerns and questions to the attention of the SC. The broader CLR membership will include civic leaders, policymakers, journalists, practitioners, youth and researchers, among others.

4. **Community Incubator Lead (CIL):** A CIL is an organization within the community that will be the focus of TARC efforts to engage and build the capacity of smaller, grassroots organizations. In each of the six focus neighborhoods, CIL(s) will be selected through a competitive process managed by the SC. CIL leadership will also serve as members of the CLR and will meet monthly as a professional learning community facilitated by the TARC.
5. **Sacramento County Multi-Disciplinary Team (MDT):** MDTs are co-located county agencies within each of the six neighborhoods. MDTs are county staff, working in tandem with CILs to offer culturally appropriate services and facilitate access to health insurance, rental subsidies, health care and other resources. Differing from a one-stop-shop, members of the MDT will work together to assist community members with their needs.
6. **Interagency Children’s Policy Council (ICPC):** ICPC is a senior leadership body brought together to identify trends, set policy and ensure accountability for issues that affect child health and well-being. It will be made up of county and non-county agency executives and department directors who have impact on prevention and reduction of African American child deaths in Sacramento County, as well as representatives from nongovernmental organizations that impact the lives of low-income and vulnerable children and families in the county. The ICPC will be directly accountable to the Board of Supervisors for the development of an integrated services delivery system strategy consistent with the Blue Ribbon Commission report’s recommendations to improve the lives of children, youth and their families.

Figure 1: RAACD Community Network Structure



Implementation of the Five Priority Strategies

The following sections explain the relationship among the five priority strategies outlined in the strategic plan, and the structure and activities being developed to support their implementation.

1. Promoting Advocacy and Policy Transformation

Successful, long-term change stems from empowering community members to promote and advocate for resources they need to ensure that children and youth from 0 to 17 years of age are emotionally and physically safe. Engaging residents in all six neighborhoods will help define and prioritize communication strategies and identify key audiences so messaging can influence, saturate, unite and drive the appropriate action. The implementation steps described below are intended to achieve outcomes of: (a) increasing awareness and community participation, (b) identifying resources to support effective interventions, and (c) creating a sustainable infrastructure of community leadership.

Efforts to promote advocacy and create policy change include:

- Establishing a Community Leadership Roundtable
- Educating community members
- Identifying partners for change

Community Leadership Roundtable (CLR)

The creation of the CLR will involve the following actions:

- Identify up to 20 community organizations to undergo comprehensive community outreach planning and communication training regarding RAACD prevention strategies
- Develop messages and a communication plan for the CLR

Community Outreach and Education

To communicate the messages about how to prevent African American child deaths and how the community is involved, the CLR will:

- Partner with local community-based organizations to co-host neighborhood town hall meetings in the six neighborhoods
- Educate the community on at least 10 separate occasions about RAACD strategies (e.g. sponsor community forums, ads in traditional and social media)

Partnership for Change

The CLR will connect with other organizations in order to generate new resources for the work in the communities. To this end it will:

- Leverage existing partnerships with health, wellness and child advocacy groups in Sacramento County to develop convening venues and publications
- Identify business and philanthropic community partners to provide financial and non-financial support that will assist in connecting the effort to reduce African American child deaths to other relevant efforts
- Work with the ICPC to create a fund development plan that fosters public investment in best and promising practices in RAACD neighborhoods

Goal: Consistent community leadership and resources to advocate for the changes needed to prevent African American child deaths.

2. Equitable Investment and Systematic Impact

Public and private institutional stakeholders have increasingly relied on targeted investments to promote equity, address disparities and increase systemic impact, such as the reduction of African American child deaths. In April 2015, in response to the strategic plan, the Sacramento County Board of Supervisors supported, in concept, the creation of an Interagency Children’s Policy Council (ICPC). The policy council’s role is to make recommendations that will create an overarching health and well-being strategy for all children in Sacramento County. It is our hope that the policy council will accomplish this by ensuring that strategic investments are made to facilitate (a) an integrated family and child service delivery system that promotes safe and stable families, (b) expansion of culturally sensitive services, and (c) greater access to child and family services and support.

Interagency Children’s Policy Council (ICPC)

The SC will continue to work with the Sacramento County CEO’s office to establish an ICPC charter and policy principles that include the mission, vision, values and goals, as well as a process of member appointment, nominations and terms for review by the Board of Supervisors. The reduction of African American child deaths will be a central effort of the ICPC’s initial work.

Goal: A coordinated system of public resources and services that promotes safe and stable families and positive options for youth.

The ICPC will:

- Convene key elected policymakers, a representative of the Office of the County Executive, representation from the SC, and executive leadership from the following agencies that impact the lives of low-income and vulnerable children and families, including at least one representative from:
 - County Office of Education
 - Department of Health and Human Services
 - Probation
 - Juvenile Court
 - Department of Human Assistance
 - District Attorney
 - First 5 Sacramento
 - Sacramento Employment and Training Agency
 - Sacramento Housing and Redevelopment Agency

The ICPC will be staffed by the CHPM in coordination with county staff.



3. Coordinated Systems of Support

To integrate community engagement throughout the actions described in this plan, a coordinated system of community support, capacity development and empowerment will be established. The system will be made up of a network of established community organizations partnering with and acting as incubators for smaller organizations and grassroots groups. The organizations, known as Community Incubator Leads (CILs), will build local capacity to obtain and deploy resources that engage and empower residents in the work of preventing African American child deaths. The CILs will also help coordinate public services that will be located in the neighborhoods in the form of teams made up of service providers from multiple agencies, known as Multi-Disciplinary Teams (MDTs). To ensure that technical assistance and activities within and across neighborhoods are available and coordinated, a Technical Assistance Resource Center (TARC) will be created.

Outcomes of the connections among the CILs, MDTs and TARC include (a) established partnerships between public agencies and the community, (b) institutionalized public agency policies and practices that result in culturally responsive services and supports, and (c) increased engagement of community residents in activities that support the well-being of children and their families.

Implementing the coordinated system of support will require:

- Creating a Technical Assistance Resource Center (TARC)

- Establishing Multi-Disciplinary Teams (MDTs)
- Selecting Community Incubator Leads (CILs)

Technical Assistance Resource Center (TARC)

By serving as a facilitator and clearinghouse of resources, the TARC will connect partners working in the six focus neighborhoods to each other and to the best research, policies and practices related to reducing African American child deaths. The TARC will also have responsibility for coordinating evaluation and reporting. The TARC, overseen by the SC, will be responsible for the following action steps:

- Assemble resources, such as case studies and background sources, related to specific aspects of RAACD implementation
- Develop a training and technical assistance plan that links the efforts across the six neighborhoods, while also providing technical assistance that is tailored to the needs of the individual neighborhoods
- Work with the CILs (described below) to coordinate the technical assistance within and across the six neighborhoods

Community Incubator Leads (CILs)

Each CIL will be responsible for (a) coordinating the network of RAACD efforts in its neighborhood, including cultural brokers, trauma-informed care, community grassroots messaging, youth leadership and engagement, (b) building and strengthening community relationships, and (c) managing regranting

Goal: A community-based infrastructure of services and supports that empowers residents to improve the health and well-being of their children.

programs for small local organizations involved in the RAACD activities. The CILs will be responsible for the following action steps:

- Identify needed technical assistance and other resources to support their ability to carry out their charge
- Conduct an assets and needs scan of existing service providers and facilities in these service areas
- Identify small local providers that can be coordinated to deliver focused neighborhood-based services
- Participate in a learning community to share learnings and coordinate communication, evaluation and partnership activities
- House and coordinate the MDTs that address the needs identified in the scan
- Propose new programs based on gaps revealed in the scan
- Participate in the CLR



Sacramento County Multi-Disciplinary Team (MDT)

The coordination and delivery of county services will target African American families, but will be provided to the community at large. Implementation steps carried out by the MDTs are:

- Develop a RAACD case management system that allows the MDTs to provide wrap-around services, such as:
 - Employment services
 - Counseling
 - Food and nutrition assistance
 - Health insurance
 - Health care (Black Infant Health Network, Nurse Family Partnership)
 - Housing
 - Behavioral health and substance abuse treatment
- Share information and resources to ensure culturally appropriate, effective services and resources that improve the health and well-being of African American children and their families
- Provide data to a shared data system that will be used to monitor progress toward the prevention of African American child death

4. Data-driven Accountability and Collective Impact

With multiple agencies, organizations and individuals using diverse strategies to work toward the common goal of reducing African American child deaths, the RAACD effort requires an evaluation based on a framework of collective impact. Collective impact transpires when different sectors set out to solve an issue and includes a commitment to using the same measurement practices and an agreement to use data to improve policy and program decisions, hold decision-makers accountable and build public will. The implementation steps described below are intended to create and support (a) a sustained system for the collection and dissemination of information about quality and outcomes of the RAACD effort, (b) a transparent system for accountability for progress, (c) ongoing quality improvements to increase effectiveness of interventions, and (d) documentation of effective practices for reducing African American child deaths to support replication in other jurisdictions.

The evaluation of the RAACD effort has three components:

- Community-based evaluation of implementation quality
- Shared outcome measurement
- Monitoring of trends in African American child deaths

The three components will feed into a data system housed at the TARC. The system, or data hub, will compile and organize data from multiple sources so that it can be analyzed and reported at regular intervals

to the public and policymakers. A task force will be created to develop shared measurement and reporting plans.

Community-based Evaluation of Implementation Quality

— Through interviews, observations, document reviews and other methods, community residents, with the support of the CILs and the TARC, will engage in participatory action research that will improve the implementation process. The research will be guided by a quality assessment tool based on quality dimensions and indicators developed by the SC (see Appendix for the dimensions).

The steps to complete the implementation of community-based evaluation are:

- Finalize the quality assessment tool
- Train CILs in participatory action research and the use of action research methods in the quality assessment, interpreting outcomes and making recommendations for improvements
- Recruit and train youth and other community residents in carrying out quality assessments
- Provide supervision and support for community members engaged in quality assessment
- Compile quality assessment results so that they can be shared with the public in multiple forms, including through the CLR and other messengers
- Report findings and make recommendations for improvements to the RAACD activities, as needed

Goal: Ongoing system for collecting, sharing and using information about the quality of the activities and the extent to which they are achieving changes that will prevent African American child deaths.

Shared Outcome Measurement — Data are already collected on programs and services intended to improve the health and well-being of Sacramento County children. However, there are no agreed-upon intermediate measures of progress toward the goal of reducing African American child deaths, and thus no way to monitor the extent to which the interventions are or are not changing the conditions that lead to the disproportionate death rate of African American children. To evaluate the outcomes of the RAACD effort, a framework that identifies agreed-upon measures of progress must be developed. To ensure buy-in to the framework, a task force made up of representatives from the ICPC agencies, CILs and the SC will be created.

The specific actions needed to develop and implement the framework for shared measurement of outcomes are:

- Create the task force and provide training on developing a shared measurement plan
- Identify indicators that accurately reflect progress toward changing conditions in ways that will reduce African American child deaths, relying to the extent possible on existing data
- Develop a plan and memoranda of understanding for compiling data on the agreed-upon indicators in the data hub
- Ensure ongoing submission of data to the data hub, where it will be organized into easy-to-read reports

Monitoring Trends in African American

Child Deaths — To keep attention focused on the ultimate goal of the RAACD effort, reducing the disproportionate African American child death rate in Sacramento County by at least 10% to 20%, the Child Death Review Team will continue its annual reporting on the deaths of African American children relative to the rate of deaths of other children.



5. Communications and Information Systems

Significant attention will be paid to communications to foster connection between focus neighborhoods and Sacramento County residents on the importance of the initiative and its status. This strategy is aimed at increasing awareness of the disproportionate number of African American child deaths in Sacramento County, particularly in the six focus neighborhoods, and empowering community members to create change. The implementation steps described below are intended to have outcomes of (a) increased community awareness in a culturally sensitive and appropriate way on how best to support healthy development of children and youth, and where to access necessary resources, and (b) an informed community that is engaged in activities that support the well-being of children and their families.

Efforts to create effective communication include:

- Community Media Campaign
- Social Marketing Plan

Community Media Campaign — To help develop and disseminate media materials focused on the prevention and reduction of African American child deaths to key local audiences using both traditional media and social media outlets, the SC will:

- Conduct community focus group discussions to identify resident opinions, attitudes and levels of awareness key audiences have about African American child deaths in Sacramento County
- Develop RAACD communication funding strategy to support all six neighborhoods in RAACD programs, resources and services

- Select grantees through a competitive RFP process for RAACD integrated grassroots community media campaigns
- Through the TARC, facilitate media and communication trainings with lead media grantee, CILs and stakeholders engaged in grassroots community campaign
- Facilitate quarterly meetings with the RAACD CLR and media partners
- Develop media partnerships to publicize accomplishments in a timely manner, and celebrate wins and accomplishments publicly

Social Marketing Plan — Grassroots partners will:

- Review existing research to examine similar social marketing health campaigns, networks and collective impact models
- Utilize research findings to develop and launch a strategically focused social marketing plan that utilizes social media and traditional media, advertising, public relations and community outreach efforts that focus on key audiences throughout Sacramento County
- Engage youth through paid positions to take the lead on social marketing activities

Conclusion

Sacramento County is positioned to catalyze creative neighborhood-led problem solving to reduce African American child deaths. This plan is the result of collaboration among public agencies, grassroots organizations, community residents and many others. It serves as a call to action to all those committed to preventing African American child deaths and improving the lives of all children.

Goal: Messages about how to prevent African American child deaths and improve the health and well-being of children that are provided using culturally appropriate methods and messengers.

APPENDIX — Quality Dimensions

Dimensions	General Definition
Mission focus	Activities associated with implementing the strategic plan are consistently focused on the mission of reducing African American child deaths.
Engaged leadership	Leaders and decision-makers from the various stakeholders demonstrate commitment to RAACD by being actively involved in implementing the strategic plan.
Partnerships (with community-based organizations (CBOs, private sector, philanthropy, etc.)	Diverse constituencies are effectively represented so that diverse perspectives are included in the implementation of the strategic plan.
Community engagement	Activities intended to engage the community in the implementation of the strategic plan are authentic and effective.
Community capacity building	Existing community capacity is recognized and built on using effective practices to maximize inclusion in implementing the strategic plan.
Youth-centered	Youth are recognized as assets in the process of implementing the strategic plan.
Transparency and fairness	Decisions, plans, etc. involved in implementing the strategic plan are documented, shared and judged to be fair by stakeholders.
Communications	Communications associated with implementing the strategic plan (e.g., messages about infant health, urgency of reducing African American child deaths, positive youth development) are clear to intended audiences.
Data collection, sharing and use	High-quality data about the strategic plan implementation and outcomes are collected; interpretation of findings is participatory; and findings are shared and used for multiple purposes (accountability, course correction, contribution to knowledge).

Acknowledgments

The Steering Committee on Reduction of African American Child Deaths (RAACD) was established by a resolution of the Sacramento County Board of Supervisors in June 2013 with a goal of reducing the disproportionate African American child death rate by at least 10% to 20% by 2020. This 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. It will provide oversight of the implementation of this effort, and is funded by the County of Sacramento and First 5 Sacramento, and managed by Sierra Health Foundation Center for Health Program Management.

Steering Committee on Reduction of African American Child Deaths Members

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Christian Fellowship Ministry

Stephanie Bray

United Way California Capital Region

Debra Cummings

Del Paso Heights Community Association

Dr. Ethan Cutts

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*Thank you to the RAACD Strategic Implementation Team (SIT) members for contributing their expertise to the development of this plan. (SIT members are designated by * above and below.)*

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Thank you to the RAACD Evaluation Workgroup members for their continued work on our collective impact framework. (Evaluation Workgroup members noted above and below.)

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Steve Wirtz – Evaluation Workgroup Member Only
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Steering Committee members at the April 14, 2015, Sacramento County Board of Supervisors RAACD workshop. Not all members are shown.

Sierra Health Foundation Center for Health Program Management

Sierra Health Foundation Center for Health Program Management will staff the Steering Committee and manage the day-to-day activities of the RAACD effort to ensure that a coordinated and collaborative process will result in community transformation.

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*
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The Steering Committee would like to thank the Sacramento County Board of Supervisors for their support and vision:

- District 1: Phil Serna – Chair
- District 2: Patrick Kennedy
- District 3: Susan Peters
- District 4: Roberta MacGlashan – Vice Chair
- District 5: Don Nottoli

We also thank our community partners and stakeholders as we embark on this journey together toward reducing African American child deaths.

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