

## Excerpt of ReCAST Grantee Manual: Appendix G: Community Strategic Plan Template

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The template below is intended to be filled in directly by grantees as they develop their Community Strategic Plans and prepare to submit it to GPOs by **May 31<sup>st</sup>, 2022**. The template includes sections for all required report components. *Please note that brief examples of the concepts that are required to be inserted by grantees are provided in italics throughout the template.*

**Grantees should revise the template tables to accommodate the goals, objectives, activities, and process and outcome measures that are being proposed (i.e., you may have more or fewer goals, objectives, activities, measures than the templates are structured for). The template tables are provided to give you a recommended way to structure the information being requested.**

**Similarly, grantees may feel free to revise the suggested Logic Model structure to meet their needs.**

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### ReCAST Community Strategic Navigation Plan

<b>Grantee Site:</b>	Oakland, CA
<b>Grant #:</b>	1 H79 SM084923-01
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<b>Data Plan Submitted: <i>Due May 31, 2022</i></b>	May 31, 2022
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### Introduction

**Project Overview** (to include the context for our ReCAST Program, including the historical factors that led to the creation of the project and a brief description of the community and population of focus)

Oakland ReCAST promotes resilience, healing, belonging, joy, and equity for Oakland’s high-risk youth and families. We focus on those most affected by the interrelated challenges of violence, civil unrest, and trauma, including trauma resulting from the disparate impact of the COVID-19 pandemic. This includes residents of low-income, high-stressed neighborhoods in East and West Oakland; youth attending high-stressed schools; victims of violence; Black youth and families; and Indigenous and other vulnerable populations of color.

As a backdrop for the development of Oakland ReCAST, the city is highly diverse and faced with significant and interrelated challenges related to poverty, homelessness, violent crime, and mental health, all of which have been intensified by the spread of COVID-19. The City’s 2019 Homeless Point-in-Time Count found 4,071 homeless individuals, 79% of whom were unsheltered. This number has grown in the intervening years and will likely grow exponentially as COVID-19 related eviction protections lapse.

After a near 50% decrease in homicides and shootings from 2012-2018 and a slight increase in 2019, Oakland saw a 47% increase in homicides and a 72% increase in shootings in 2020. That year, 102 lives were lost in Oakland due to gun violence and almost 500 people were shot. This trend continued into 2021; there were 15 homicides in January 2021, while in January 2020 there was just one.

Multiple factors have consistently limited the number of high-risk youth and families who seek out needed services, including real and perceived barriers to access, mistrust of government, fear of bias among service providers, and confusion about how to access services. This is particularly detrimental now, when miscommunication poses a very real risk to the city’s ability to reduce stress and trauma resulting from the pandemic and recent civil unrest. Further, local service providers and staff from across OUSD and city agencies have noted a considerable increase in demand for mental health services as the pandemic stretches on. More broadly, there are limited mental health resources for those who are not enrolled in Medi-Cal and/or do not have a formal diagnosis.

As a result, there is a tremendous need for upstream investments in training and capacity building for the teachers, mental health clinicians, and other staff who interact with high-risk youth and families to ensure their ability to deliver trauma-informed services. Oakland has a long history of systemic racism fueling civil unrest and tension between community members, law enforcement, and local government, as evidenced by the 1966 formation of the Black Panther Party whose primary focus was on challenging police brutality. In the past two decades, the City has spent \$74 million to settle at least 417 lawsuits against its police

officers, and since 2003, the Oakland Police Department (OPD) has been under Federal Oversight as part of a negotiated settlement agreement stemming from a police misconduct case involving 119 plaintiffs.

The aforementioned challenges are not felt equally by all. The Oakland Community Stressors Index indicates that many intersecting sources of stress and trauma are concentrated in East and West Oakland, home to much of Oakland's Black population. Hence, the Oakland ReCAST program has chosen these area residents as their target population.

### **Summary of Community Needs and Resource Assessment**

Residents, particularly those in East and West Oakland, are continuing to experience trauma from a multitude of sources. Much of that trauma has been exacerbated by the COVID-19 pandemic and its disparate impact on already traumatized neighborhoods. Currently, many of those neighborhoods have a disproportionate number of BIPOC residents.

- Based on a thorough review of existing data<sup>1</sup> related to community needs in Oakland that has been compiled for the past five years, the CNRA found that the following need areas were present:
  - Access to culturally responsive behavioral health
  - Physical health and access to affordable health care
  - Access to quality education in a safe environment and other youth-centered issues
  - High prevalence of poverty and income inequality
  - Lack of affordable housing and the resulting displacement of community members
  - Prevalence of violence in communities and criminal justice involvement among community residents
- Data suggests that these traumatizing factors disproportionately impact the BIPOC residents of Oakland.
- In each of these areas, the COVID -19 epidemic and the response to it (e.g., stay at home orders, loss of employment, limited resources, etc.) exacerbated the effect of these traumatizing factors.

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<sup>1</sup> *California Healthy Kids Survey*. (2019). Retrieved from <https://calschls.org/reports-data/>

Applied Survey Research. (2019). *City of Oakland Homeless Count & Survey*. Retrieved from <https://cao-94612.s3.amazonaws.com/documents/2019-Oakland-Point-In-Time-Count.pdf>

*Oakland Community Stressors Index*. (n.d.). City of Oakland. Retrieved from <https://www.oaklandca.gov/resources/oakland-community-stressors-index>

Oakland Fund for Children and Youth. (2020). *Oakland Fund for Children & Youth FY 2019-20 Evaluation Report*

City of Oakland. (2021). *Oakland Reimagining Public Safety Task Force, Report and Recommendations*.

City of Oakland. (2018). *Oakland Equity Indicators Report*.

Alameda County-Oakland Community Action Partnership. (2021). *Data Profile: Alameda County and Oakland*.

- While there are several HSD Divisions and other city departments as well as some community organizations that provide some support, **no one organization or resource emerged** as the most used by Oakland residents.
- Overall, community members seemed appreciative of the services they received; however, the available **services were often insufficient to meet the level of need** displayed by residents.
- Some of the programs that existed in Oakland pre-pandemic are no longer available to residents as a result of closings
- Across many of the traumatizing factors examined, **residents relied on family, friends, and other informal supports** to meet many of their needs.
- Many community members cited a **need for more socially or culturally responsive providers and services**, as well as services and resources offered in alternative languages.
- Residents cited a need for **trauma-informed services** across multiple areas and contexts.
- Relative to mental health, residents identified a need for **non-police related services and response options** for communities.
- **Increased access** to support programs and options (e.g., early childhood education, behavioral health services, individualized youth-led spaces and support programs, affordable and nutritious food, etc.)

Oakland residents highlighted certain community resources that serve as sources of cultural wealth, which will fuel our ReCAST work.

- Across many of the traumatizing factors examined, **residents relied on family, friends, and other informal supports** to meet many of their needs.
- There are several **HSD Divisions and other city departments** as well as some community organizations that provide support across the several stated areas of need, including early education, varied behavioral health programs, and case management.
- The City has seen significantly **improved response to violent crime**, thanks to the Department of Violence Prevention.

#### Summary of Behavioral Health Disparities Impact Statement

Findings from the 2017 Oakland ReCAST CNRA revealed that mental health stigma, system navigation, and provider capacity all posed barriers to behavioral health services in Oakland. For many members of the community, youth in particular, any programs that are perceived as part of the mental health system are viewed as negative. Even if members are open to services, many community members are unaware of existing behavioral health services and navigating the system without support can be especially difficult. Once connected, community-based service providers are challenged to meet community needs as there is a high level of

demand that exceeds the number of available resources to properly respond. In addition, there is a need for more socially- or culturally responsive providers and services as not enough mental health consultants share the same lived experience (e.g. racial and ethnic background, engagement with similar community stressors or traumas) as the community they serve and many services and resources are not offered in alternate languages. In addition, socioeconomic factors such as high household cost burden, child poverty, citizenship status and educational attainment pose large barriers to behavioral health service accessibility. Prior to the onset of the COVID-19 pandemic in March 2020, there was an exponential increase in social, emotional, and behavioral health needs for California children including suicide, suicidal ideation, self-injury, anxiety, and depression. With the stress of the pandemic and the addition of distance learning, these behavioral health needs have been exacerbated for children with additional social isolation, economic instability, and general family strain. A national study found declining parental mental health and subsequent child behavioral health due to COVID-19, and CDC data revealed a rise in pediatric mental health-related visits compared to 2019. In addition, multiple studies have found significantly increased anxiety or depressive symptoms due to COVID-19, in particular for women, young adults, healthcare workers, people with pre-existing mental health conditions and transgender or non-binary people. Substance abuse continues to be a leading behavioral health issue in the US as drug-related deaths have more than tripled since 2000. In the past year, deaths among Alameda County's unhoused population have increased by 40%, with overdose and chronic substance use contributing heavily to this increase. In the first nine months of 2020 alone, drugs or alcohol played a role in more than a third of unhoused populations' deaths compared to less than a quarter in 2017. Both COVID-19 restrictions (e.g., social distancing and reduced social gatherings) and drug criminalization have contributed to the increase in drug overdoses. Health professionals typically advise drug users to use with someone else in case of an overdose, however gathering has been discouraged during a pandemic, so many are using alone. Additionally, the criminalization of substance use discourages people who use drugs from accessing emergency services, including lifesaving overdose prevention, emergency housing, and risk-reducing practices such as syringe exchanges.

Although the long-term behavioral health effects of COVID-19 are unknown, many Oakland children experience potentially traumatic events outside of the pandemic that increase their risk of negative, long lasting health issues. These Adverse Childhood Experiences (ACEs) are disproportionately experienced by children of color compared with White children. In a UCSF study, 20% of mostly Black and Latinx children in Oakland experience discrimination before they are 12 years old. In addition, more than half have endured four forms of ACES including food, housing insecurity, community violence and discrimination that lead to chronic health conditions that disproportionately affect communities of color.

**Process Used to Develop Strategic Plan** (including how your coalition of stakeholders was involved)

The strategic plan was developed based upon a review of the CRNA results, as well as contributions from the residents of the communities of East and West Oakland through community listening sessions and surveys.

In April 2022, two listening sessions were held via Zoom in which community members were invited to share their feedback on the mission and goals of ReCAST as well as on what they perceive to be the most pressing community needs and gaps in existing services. The sessions were attended by community residents, community-based service providers, City of Oakland Human Services staff and other stakeholders and partners. In addition to the listening sessions, community residents were provided an opportunity to complete an online survey that included the same discussion questions as those in the listening sessions.

Ten community members responded to the survey. They were residents of east and west Oakland. all between the ages of 25 and 70, with most being over the age of 40. Several of the respondents were known in the community and have been active in community reform and support efforts over the years. The information gathered from both the surveys and listening sessions were combined and analyzed and the results have been incorporated into the goals and objectives outlined in this strategic navigation plan.

### **Mission, Vision, and Project Value Statements**

**Mission Statement:** Use this section to describe the purpose of your project, what the project does, how it does it, and for whom.

Oakland Resiliency in Communities After Stress and Trauma (ReCAST) promotes **resilience, healing, belonging, joy, and equity** for Oakland's high-risk youth and families most affected by the interrelated challenges of violence, civil unrest, and trauma. A multi-sector coalition works together to improve behavioral health and reduce trauma among the highest-risk youth and families, empower residents, and improve community-police relations.

Populations of focus for Oakland ReCAST include residents of low-income, high-stressed neighborhoods in East and West Oakland; children attending high-stress schools; victims of violence; Black children and youth; as well as other vulnerable populations. Through a multi-sector, participatory approach aligned to the work of Oakland Thrives, the Oakland ReCAST initiative builds upon existing local efforts and the work accomplished through the City's 2016-2021 ReCAST grant to promote resiliency, healing,

belonging, joy, and equity among Oakland residents most affected by trauma and unrest. All ReCAST activities are aligned to two primary strategies:

**First,** Oakland ReCAST provides **culturally appropriate, evidence-based, and community-designed and driven interventions** for high-risk youth and families impacted by civil unrest, violence, and COVID-19. This approach recognizes that violence and civil unrest fueled by systemic racism have an intergenerational impact that can be disrupted by providing and promoting nurturing and healing relationships; that high-risk youth and families who receive community-driven trauma and resilience supports have increased likelihood of improving their behavioral health, creating more resilient communities, and reducing incidents of violence; and that the impacts of stress and trauma can be healed and prevented by connecting youth and families to evidence-based, culturally appropriate services.

**Second,** Oakland ReCAST works to **strengthen, heal, and reimagine the systems that community members seek when in distress through training, capacity building, coaching, and fostering cross-system collaboration and coordination.** This approach recognizes that these systems often perpetuate systemic racism through toxic practices, policies, and procedures; that they risk retraumatizing residents most affected by violence and civil unrest when services are not provided through a trauma-informed lens; and that a lack of coordination across systems limits community access to resources that mitigate inequities.

**Vision Statement:** Use this section to paint a picture of the future the project is seeking to create.

Oakland will be a more equitable, healthy, and thriving community for all residents by the acknowledgment of historical trauma and promotion of healing and resilience. The work of the agencies that support the residents of Oakland through ReCAST will be informed by the lived experiences of community members and will center race and equity in building sustainable and healthy communities.

**Project Values:** Describe the values that help shape the work of the project (hint! They might connect to trauma informed and healing-centered principles!).

- Providing first-rate programs for children, youth, and other adults through direct services, grants, and collaboration with other public and community-based agencies
- Embedding a culture of trauma-informed and trauma-lived service delivery that incorporates the lived experiences that impact the lives of children, youth, and other adults in East and West Oakland

- Promoting social equity—particularly for children and youth—by developing new resources and leveraging existing resources
- Developing and supporting collaborations that improve community health and safety, with an emphasis on violence prevention and community building
- Creating opportunities for community engagement and raising community awareness of our services by enhancing department visibility and outreach

**Goals, Objectives, and Program/Policy Activities and Measures**

Goals	Objectives	Activities & IPP Measures	Persons Responsible	Progress Measures
<b>Goal 1:</b> Increase the capacity (knowledge, skills, and dispositions) of City workforce in agencies, local service provider networks, and community interventionists to provide and collaborate in the provision of trauma-informed and culturally relevant services and activities for youth and families	<b>Objective 1:</b> HSD Staff Capacity Building: Oakland ReCAST will increase trauma awareness, trauma lived and trauma informed service delivery models to 250 HSD staff and community interventionists.	Activity 1: Create a training/train the trainer approach for trauma informed delivery model to be implemented to systems leaders and service providers. <b>(TR1, WD2 &amp; AW1)</b>	ReCAST Program Director, Admin Assistant, and Contracting Partners	Roster of learning, training, and capacity building tools / # held per year
		Activity 2: Implement trauma informed training programs for HSD staff <b>(TR1, WD2 &amp; AW1)</b>	Contracting Partners, ReCAST Program Director	Increase the number of individuals who have received training in trauma informed approaches, and



impacted by stress and trauma.	Activity 3: Implement trauma informed training programs for all City Department staff (TR1, WD2 & AW1)	Contracting Partners, ReCAST Program Director	<p>other related trainings that will be sustained through year 5 and measured by attendance data from trainings</p> <p>Rating results from Participation Feedback Survey collected from individuals attending the training</p> <p>Post-test knowledge questionnaire to measure awareness shift</p> <p>Impact of trainings on service provider systems that are comprised of training participants &amp; trainers</p> <p>Increased interpersonal growth &amp; skills, knowledge, and attitude, expanded ability to use skills in</p>
	Activity 4: Implement trauma-informed training programs to adults, families, and youth most impacted by stress and trauma in East and West Oakland (TR1, WD2 & AW1)	Contracting Partners / ReCAST Program Director	

				leadership, as measured by post-training survey
<p><b>Objective 2:</b> Oakland ReCAST will award funding to community-based organizations to train 1,500 mental health service providers in the implementation of evidence based, trauma informed behavioral health models and peer support activities over the course of the ReCAST grant.</p>	<p>Activity 1: Conduct RFPs for organizations to provide trauma informed trainings</p>	<p>ReCAST Program Director, Admin Assistant, and Contracting Partners</p>	<p>Registration data across all CBO trainings</p>	
	<p>Activity 2: Facilitate the implementation of evidence-based and culturally defined trainings in behavioral models to support individuals working at community-based organizations. (TR1, WD2 &amp; AW1)</p>	<p>Contracting Partners / ReCAST Program Director</p>		<p>Pre and post training surveys for CBOs</p> <p>Increase in CBOs receiving trauma informed training</p> <p>Number of registrants from training who attended the Resiliency Symposium</p>
	<p>Activity 3: Serve as a convener for community-based organizations by providing peer resourcing and trainings to maximize collaboration and communication (TR1, WD2 &amp; AW1)</p>	<p>Contracting Partners, ReCAST Program Director</p>		

	<p><b>Objective 3:</b> Design, establish and implement the Oakland Capacity Building Institute (CBI) that addresses: 1) Trauma Awareness-raising &amp; education; 2) Healing &amp; Resiliency; and 3) Policy &amp; Systems change for city staff, CBOs that serve youth, and community members in our focus areas.</p>	<p>Activity 1: Draft and send out RFPs for organizations to provide technical assistance in evidence-based models to develop learning curriculum in year one and two.</p>	<p>ReCAST Program Director, Admin Assistant</p>	<p>Increase number of RFP responses</p>
		<p>Activity 2: Implement trauma informed training program that address the needs of community members, CBOs and City staff in year two and three <b>(TR1, WD2 &amp; AW1)</b></p>	<p>Contracting Partners, ReCAST Program Director</p>	<p>Number of participants completing training sessions</p>
<p><b>Goal 2:</b> Expand practice of community and youth partnership to promote the trauma informed principles of voice, choice, collaboration, and mutuality in</p>	<p><b>Objective 1:</b> Ensure informed community input from target population impacted by stress and trauma to provide continuous quality improvement of ReCAST program implementation.</p>	<p>Activity 1: In Year One, recruit &amp; convene community and staff stakeholders to advise, inform and partner in ReCAST Implementation Advisory Team that represents populations</p>	<p>ReCAST Program Director, Admin Assistant, and Contracting Partners</p>	<p>Number of RFP created</p> <p>Number and frequency of meetings conducted</p>

Oakland City agency and local provider network.		from our areas of focus, City staff, and partner agencies (PC2)		Number of partnership agreements
		Activity 2: Train advisory team members in trauma-informed service delivery annually (PC2)	ReCAST Program Director, Admin Assistant, and Contracting Partners	
		Activity 3: Facilitate advisory team meetings with regular updates on program implementation and evaluation (PC2)	ReCAST Program Director, Admin Assistant, and Contracting Partners	5 meetings per year Number of agendas sent out Number of meeting minutes recorded
		Activity 4: Facilitate interagency collaboration and resources sharing across advisory team members and their organizations annually (PC2)	ReCAST Program Director, Admin Assistant, and Contracting Partners	Increased collaboration, coordination, and resource sharing among participating community organizations and agencies as measured by a tracking form of organizations and agencies.
		Activity 5: Design and facilitate a Trauma-Informed Service Delivery Taskforce, to be composed of	ReCAST Program Director, Admin Assistant	Increase the number of individuals who have received training in trauma informed approaches, mental

		<p>representatives across various City departments, in order to ensure alignment of trauma-informed system plans. (PC2)</p>		<p>health literacy, and other trainings related to behavioral/mental health trauma-informed approaches that will be sustained through year 5 as measured by attendance data from trainings.</p> <p>Train 1,000 City staff in trauma informed approaches, violence prevention, mental health literacy, and other related trainings in mental health, or related workforce trained in behavioral/mental health trauma-informed approaches.</p> <p>Train number of Community based Organizations in trauma informed approaches, violence prevention, mental health literacy, and</p>
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				<p>other related trainings in mental health, or related workforce trained in behavioral/mental health trauma-informed approaches.</p> <p>Train number of community members in trauma informed approaches, violence prevention, mental health literacy, and other related trainings in mental health, or related workforce trained in behavioral/mental health trauma-informed approaches.</p>
	<p><b>Objective 2:</b> Annually, increase youth partnerships through youth mini-grants that support youth-led activities that focus on resiliency, healing, belonging, joy.</p>	<p>Activity 1: Design and develop program for Youth Mini grant initiative</p>	<p>ReCAST Program Director</p>	<p>Number of mini-grant applicants</p>
		<p>Activity 2: Provide Training &amp; Technical Assistance in year 2 to youth mini grant recipients</p>	<p>Contracting partner</p>	<p>Number of people completing training</p>

		(TR1, WD2 & AW1)		
		Activity 3: Implement Mini Grant Program in year 2 and throughout the grant	Contracting partner	Number of mini-grants awarded
		Activity 4: Mentor/Coach Program Participants in Monitoring, Implementation, & Evaluation throughout the grant cycle (PC2)	Contracting partner	Number of hours provided to participants
		Activity 5: Award 5 Youth-to-youth Mini Grants in year 2, and increase number of awards each subsequent year		

<b>Goal 3:</b> Increase opportunities for community-driven resilience and healing among and between community members most affected by	<b>Objective 1:</b> Annually, the Oakland Cultural Strategists (CS) will use art-based and culturally responsive approaches to deliver three (3) healing	Activity 1: Trauma-informed, therapeutic activities using art-based and culturally responsive modalities that address trauma and healing (TR1)	Contracting partner	Number of programs provided to community
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violence and trauma in Oakland.	activities to youth and families in our areas of focus that promote resiliency, healing, belonging, joy, and equity.	Activity 2: A collaborative showcase to uplift community efforts that respond to the impact of displacement and health disparities in East and West Oakland by uplifting artists, makers, and creatives <b>(PC2)</b>	Contracting partner	Number of attendees of showcase
		Activity 3: Use art-based strategies to develop citywide messaging on displacement, gentrification, safety, and culture <b>(AW1)</b>	Contracting partner	At least 20 new Murals painted on private and commercial structures in East Oakland and Downtown by end of the grant
		Activity 4: Host a healing and belonging conference (such as Resilience Symposium) to showcase liberation among cultural communities most impacted by stress and trauma	ReCAST Program Director, Admin Assistant, Contracting partners (DVP, OFCY)	Number of community-driven events  Number of mental health and wellness events that market ReCAST values



				<p>Number of registrants to Resilience Symposium with Oakland residents by end of the grant.</p> <p>Number of registrants to Racial Reckoning Symposium by the end of 2023.</p>
	<p><b>Objective 2:</b> Increase awareness of and access to tools, resources, and training opportunities within community(ies) &amp; the City through a trauma-informed communications plans.</p>	<p>Activity 1: Targeted messages and multiple channels of communications, such as website w/ stressors map, resources &amp; programs (AW1)</p>	<p>ReCAST Program Director</p> <p>Contractors (graphic designers &amp; marketing subject matter experts potentially artists)</p>	<p>Communication &amp; marketing plan developed</p>
		<p>Activity 2: Develop Oakland ReCAST website. Announcements, stories, links. Trauma resources/data. Blog posts. This will include a public awareness campaign that helps develop understanding of how trauma affects the brain. This will also</p>	<p>ReCAST Program Director</p> <p>Contractors (graphic designers &amp; marketing subject matter experts)</p>	<p>Number and frequency of new sign-ups for online newsletter</p> <p>Number of many page visits to website with high concentrations of trauma-informed service information</p>

		include the dissemination of resources through online newsletters housed on the Oakland ReCAST website.		
		Activity 3: Promotional presentations across ReCAST identified neighborhoods, cultural communities, and stakeholders. These communications will reach all ReCAST stakeholders, including community members.	ReCAST Program Director	Number of promotional presentations to priority partners in identified areas
	<b>Objective 3:</b> Increase the number of individuals (youth and family members) receiving free to low-cost services for trauma informed behavioral health as a result of the ReCAST grant.	Activity 1: Use RFP process to award funding to trauma-informed behavioral health providers in Oakland that serve our populations of focus and are value-aligned <b>(T3)</b>	ReCAST Program Director  Contracting Partners	Number of individuals (youth and family) receiving behavioral health direct services as a result of the grant.  Service provision tracking sheets,

		Activity 2: Track and monitor service delivery (T3)		including attendance and continuity.
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**Plans for Meeting Data Collection, Performance Measurement, and Local Evaluation Requirements, and Persons Responsible**

Below is a detailed description of our plans to collect all required data, and carry out all required evaluation methods.

**(1) GPRA (IPP) DATA**

GPRA WD2: The number of people in the mental health or related workforce trained in behavioral/mental health trauma- informed approaches as a result of the ReCAST grant.						Persons Responsible
<b>How will you collect this data?</b> <i>Consider training/ event registration questions</i>	Sign-in sheets will identify the types of trainings and the number of individuals who have received trainings in the respective types (these counts will not be unduplicated)					ReCAST team and/or contracting training partners
<b>Who will you collect this data from and at what time points?</b>	Trainers will be required to collect and enter sign-in sheet data within one week of each training.					ReCAST team, Contracting Training Partners
<b>What are your annual targets for this measure?</b>	Year 1	Year 2	Year 3	Year 4	Year 5	
	100	200	250	300	400	

<b>GPRA TR1: The number of individuals who have received training in trauma-informed approaches, violence prevention, mental health literacy, and other related trainings as a result of the ReCAST grant.</b>						<b>Persons Responsible</b>	
<b>How will you collect this data?</b> <i>Consider training/ event registration questions</i>	Sign-in sheets will identify the types of trainings and the number of individuals who have received trainings in the respective types (these counts will not be unduplicated)					ReCAST team, and/or contracting training partners	
<b>Who will you collect this data from and at what time points?</b>	Trainers will be required to collect and enter sign-in sheet data within one week of each training						
<b>What are your annual targets for this measure?</b>	Year 1	Year 2	Year 3	Year 4	Year 5		
	100	200	250	300	400		

<b>GPRA T3: The number of people (youth and family members) receiving services for trauma-informed behavioral health services as a result of the ReCAST grant.</b>						<b>Persons Responsible</b>	
<b>How will you collect this data?</b>	ReCAST Program Manager will confer with ReCAST partners to aggregate the number of referrals/contacts for trauma-informed behavioral health services provided by each funded agency to Oakland residents.					ReCAST team	
<b>Who will you collect this data from and at what time points?</b>	Providers will record each referral/contact at the time of service. ReCAST will collect data from partners and providers on a bi-annual basis (or as agreed upon by partners)					ReCAST team and Contracting service providers	
<b>What are your annual targets for this measure?</b> Note that annual targets and obtained data/measures need to be submitted quarterly into the TRAC system.	Year 1	Year 2	Year 3	Year 4	Year 5		
	50	250	500	1250	1500		

<b>GPRA PC2: The number of [new] community organizations and agencies that are collaborating, coordinating, and sharing resources with each other as a result of the ReCAST grant</b>						<b>Persons Responsible</b>	
<b>How will you collect this data?</b>	Knowledge acquisition surveys (e.g. pre and post tests) and/or progress reports					ReCAST team	
<b>Who will you collect this data from and at what time points?</b>	Each funding agency will be responsible for collecting this information from their funded programs at the end of each year. For advisory team, ReCAST staff will summarize information on a yearly basis						
<b>What are your annual targets for this measure?</b> Note that annual targets and obtained data/measures need to be submitted quarterly into the TRAC system.	Year 1	Year 2	Year 3	Year 4	Year 5		
	20	20	20	20	20		

<b>GPRA AW1: The number of individuals exposed to mental health awareness messaging as a result of the ReCAST grant.</b>						<b>Persons Responsible</b>	
<b>How will you collect this data?</b> <i>Be mindful of your team and system's capacity to track and monitor data.</i>	Information from the ReCAST resources displayed on the website will be collected to record the number of visits to the site. Data regarding attendance or exposure will also be collected at any site where ReCAST advertising is used and at any ReCAST program trainings.					ReCAST team and community partners	
<b>Who will you collect this data from and at what time points?</b>	This data will be collected from the RDA (for the website) and any community partners who display advertising on a bi-annual (twice a year) basis.					ReCAST, community partners, and RDA	

<b>What are your annual targets for this measure?</b> Note that annual targets and obtained data/measures need to be submitted quarterly into the TRAC system.	Year 1	Year 2	Year 3	Year 4	Year 5	
	200	350	500	750	750	

**(2) Outcome Performance Measures**

<b>Outcome Performance Measure Focused on Youth Needing Intensive Support</b>		<b>Persons Responsible</b>
<b>What specific outcome performance measure will you focus on for youth needing intensive support (e.g., “high-risk youth”)?</b>	The number of youth and young adults who are exposed to violence and/or engaged in violence that participate in programming and services.	ReCAST Team, HSD, DVP, OFCY
<b>What tool will you use to measure/identify a baseline for this outcome (i.e., a tool that provides data that shows what the outcome was prior to program implementation)?</b>	With the support of Social Policy Research Associates (SPR), HSD will utilize administrative record review via the Cityspan database to capture baseline program data.	ReCAST Team, HSD, DVP, OFCY
<b>What tool will you use to measure/identify the impact of the program (i.e., a tool that provides data that shows what the outcome will be after program implementation) ?</b>	Wherever possible, Oakland ReCAST’s evaluator will work with SPR and any additional evaluation partners already providing evaluation for DVP, OFCY, and Head Start to determine the impact of participation by identified youth and young adults. Additionally, Oakland ReCAST’s evaluation team will conduct interviews, focus groups, and surveys to assess the impact of this program.	ReCAST, Team, HSD, DVP, OFCY
<b>Who will you collect the data from and when/at what time points?</b>	HSD Program Officers on a quarterly basis.	HSD program officers

<b>How will you establish that/when you have achieved your desired result/outcome?</b>	The Project Manager will work with the Oakland ReCAST evaluator to determine a measurable outcome.	ReCAST team and Evaluation Team
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<b>Outcome Performance Measure Focused on Family Engagement</b>		<b>Persons Responsible</b>
<b>What specific outcome performance measure will you focus on for family engagement?</b>	Percentage of families receiving services through HSD programming who report receiving culturally responsive behavioral health services and consultation	PM, HSD
<b>What tool will you use to measure/identify a baseline for this outcome (i.e., a tool that provides data that shows what the outcome was prior to program implementation) ?</b>	Recruitment and retention relational strategies as well as pre and post-satisfaction survey tools.	PM, HSD, Evaluators
<b>What tool will you use to measure/identify the impact of the program (i.e., a tool that provides data that shows what the outcome will be after program implementation)?</b>	Pre / post participation surveys (measuring voice, choice, belonging and safety in ReCAST leadership programs)	PM, HSD, Evaluators
<b>Who will you collect the data from and when/at what time points?</b>	Data collected pre and post partnership from participants	HSD, Contract Partners, Evaluators
<b>How will you establish that/when you have achieved your desired result/outcome?</b>	post- satisfaction survey tool results and in addition leveraging HSD programs such as Head Start, OFCY citywide partnership with DVP program strategies to determine the impact of participation by identified families	PM, Head Start, OFCY, HSD, Evaluators

### (3) Local Evaluation Plan

#### Plans for Disaggregating Data to Focus on Intended Population of Focus and Disparate Subpopulations

**Our plans for disaggregating our data so that we can focus on our intended population(s) and subpopulations include the following:**

Oakland ReCAST plans to disaggregate data by the following descriptors:

- Neighborhood
- Race/Ethnicity
- Age
- Gender Identity
- Income/Socioeconomic status

#### Plans to Assess Changes in Disparities in Access to Care/Use of Care/Outcomes

**Our plans for assessing changes in disparities in access to care, use of care, and related outcomes include the following:**

We will assess the baseline number of therapeutic services provided to youth and families through ReCAST community providers trained in trauma-informed approaches compared to the number being served at yearly grant intervals.



## **Policies and Procedures for Health Disparities and Persons Responsible**

**Our plan, which aligns with the enhanced National CLAS Standards, for implementing policies and procedures that address behavioral health disparities for the populations indicated in our disparities impact statement include the following:**

### *Principal Standard:*

Ensure cultural and linguistic diversity of members of potential community advisory committee and provide translation services when needed including print materials.

### *Governance, Leadership and Workforce.*

Oakland ReCAST key partner, Alameda County Behavioral Health Care Services, requires all contracted providers to provide plans on how they will adhere to the CLAS standards and offers trainings to them on the 15 CLAS standards along with conducting yearly follow-up training to ensure implementation.

HSD Staff and leadership are committed to promoting social equity particularly for children and youth—by developing new resources and leveraging existing resources.

### *Communication and Language Assistance.*

The City of Oakland's Equal Access Ordinance (EAO) ensures that Oakland residents, regardless of their English proficiency, have full and equal access to all city services, including many basic and potentially life-saving city services through specific language needs.

EAO requires City departments to hire a sufficient number of bilingual employees in Public Contact Positions, translate vital written documents, and provide recorded telephone messages in languages spoken by at least 10,000 Oakland residents.

All departments must inform all residents of the availability of language assistance services in their preferred language.

Oakland's Head Start programs, in adherence to federal Head Start Performance Standards and Personnel Policies on cultural competency, must ensure staff, consultants, contractors, and volunteers respect and promote the unique identity of each child

and family and do not stereotype on any basis, including gender, race, ethnicity, culture, religion, disability, sexual orientation, or family composition.

Head Start must also ensure staff and program consultants or contractors (such as mental health providers) are familiar with the ethnic backgrounds and heritages of families in the program and are able to serve and effectively communicate, either directly or through interpretation and translation, with children who are dual language learners and to the extent feasible, with families with limited English proficiency.

In addition, whenever a majority of children in a class speak the same language, typically Chinese or Spanish, at least one class staff member speaks that language. Head Start's contracted mental health providers are required to provide group consultation and training to staff and parents including special training for staff with limited English proficiency. This standard of practice is used across all programs of Oakland Human Services Department.

All trainings to HSD staff and providers will be culturally responsive and translated into other languages as needed.

*Engagement, Continuous Improvement, and Accountability.*

Both Oakland Violence Prevention Department and Oakland Fund for Children and Youth (OFCY) require applicants to address their experience and capacity to work with the intended target population and to provide linguistically and culturally appropriate services in the proposal. Applicants must also address whether and how proposed services are appropriate to the target population's developmental needs, gender, sexual orientation, and cultural identification. Post-award, services offered by grantees are evaluated upon these requirements.

All HSD divisions require grantees to collect accurate and reliable demographic data. This data will be used to monitor and evaluate CLAS impact on health equity and outcomes and to inform service delivery. For any new program, HSD will partner with the appropriate community to design, implement and, evaluate policies, practices, and services to ensure cultural and linguistic appropriateness and competency.

All HSD evaluation processes will track demographic data and will plan to include question to participants if services are culturally and linguistically responsive and appropriate.

**The persons responsible for overseeing and implementing this plan include:**

Human Services Department (ReCAST Program Director) and Alameda County Behavioral Health Care Services

## Sustainability Strategies and Persons Responsible

The sustainability strategies and plans that we have identified in order to sustain the services, supports, and infrastructures developed through ReCAST include the following:		
Sustainability Strategies	Timeframe for Implementation	Persons Responsible
<p><i>Systems Partnership &amp; Collaboration</i></p> <p>Oakland ReCAST is a highly collaborative Program of the Human Services Department working across City departments, and community-based organizations to, align across efforts, grow capacity, and ensure healing, equity and resiliency remain a central theme within the organization.</p> <p>Oakland ReCAST has continued to engage many local systems and community partners to ensure that the goals of the project are institutionalized and sustained past the end of the project timeline.</p>	Ongoing	Human Services Department Staff, Community partners, and Oakland ReCAST Team
<p><i>Authentic Community Engagement &amp; Partnership</i></p> <p>Oakland ReCAST is intentional about cultivating deep relationships with the stakeholders to continuously incorporate feedback from community members during each</p>	Continuous	Human Services Department Staff, Oakland ReCAST Team

<p>phase of the ReCAST project. Oakland ReCAST will further our reach leveraging our Community Advisory Board.</p> <p>Oakland ReCAST intends to incorporate trauma-informed trainings for community members to build capacity in Oakland neighborhoods to deepen understanding and access to trauma-informed services.</p> <p>Oakland ReCAST will also expand existing online resources for community residents related to available training, programming, and support services.</p>		
<p><i>Leveraged Funding Opportunities</i></p> <p>The Human Services Department uses voter approved tax initiatives and local city government funds to leverage state and federal funds and create sustainability for this.</p> <p>The Human Services Department uses voter approved tax initiatives and local city government funds to leverage state and federal funds and create sustainability for this</p>	<p>Continuous</p>	<p>Human Services Department Staff</p>

<p>important work.</p> <p>Oakland Violence Prevention Department: Funded by Measure Z, work around violence prevention/intervention is funded in Oakland through 2025. These funds provide stability and sustainability as well as support continued efforts to obtain additional leveraged funding in the near and long-term.</p> <p>OFCY receives 3% of unrestricted general funds from the City of Oakland to fund after school/violence prevention programs and can leverage millions of dollars to sustain this work.</p> <p>Head Start/Early Head Start: Federal and state funds are the primary sources of funding for Head Start.</p>		
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