



MAILING: P.O. BOX 596, BRIDGEPORT, CALIFORNIA 93517
BRIDGEPORT OFFICE (760) 932-5570•FAX (760) 932-5571
MAMMOTH OFFICE (760) 924-1730•FAX (760) 924-1731

Mark Magit
Presiding Judge
Superior Court

Dr. Karin Humiston
Chief Probation Officer

MONO COUNTY JUVENILE JUSTICE COORDINATING COUNCIL (JJCC) FUNDING PROPOSAL FORM

Submission Deadline: April 20, 2026
Submit to: JJCC Chair

1. REQUESTING AGENCY INFORMATION

Agency/Department: First 5 Mono

Program Name (if applicable): Risking Connection

Contact Person: Molly DesBaillets

Total Amount Requested: \$119,460

Funding Source (check all that apply):

JJCPA – *keep youth out of deeper involvement in the justice system by providing early support, intervention, and prevention services.*

YOBG – *support youth who are already involved in the justice system by providing services that help them succeed and avoid reoffending.*

JJRBG (SB 823) – *help counties take care of and rehabilitate youth who would have previously been sent to State Division of Juvenile Justice by providing local programs, treatment, and support.*

One-Time or Ongoing Funding (check one): One-Time Ongoing

2. JJCC STRATEGIC PLAN ALIGNMENT

Describe how this request aligns with JJCC Strategic Priorities:

Please find below the JJCC Strategic Priorities and how this proposal seeks to address them.

Staff trained in and using trauma-informed practices are more likely to build supportive relationships with clients, a key component of the Risking Connection system, increasing the likelihood of **positive outcomes in prevention and early intervention and keeping youth safely in the community when possible**. Risking connection training and system implementation will seek to increase staff use of **trauma-informed and individualized approaches**. By implementing the system across County departments **collaboration will be strengthened** by providing a common language and understanding of how to use a trauma-informed approach in working with clients and designing systems. Increased collaboration across departments will also serve as a mechanism to strengthen cross-department referrals and **increase access to services**. Furthermore, developing the

Risking Connection system for Mono County would serve to meet several, if not all, the workplan items in the Mono County Resolution R24-12 affirming Mono County's Commitment to Diversity Equity and Inclusion (attached).

3. PROGRAM DESCRIPTION

Target Population: County staff

Services Provided: Implementation of a long-term trauma-informed system providing County staff tools to prevent burnout, develop a common understanding of client needs across departments, increased capacity to equitably serve clients, and a systemic framework to include equity considerations within existing departmental meetings and frameworks. The program will provide training, develop a leadership team, train trainers to build internal capacity, and conduct evaluation to determine the outcomes of the program.

4. PROBLEM, NEED, & EQUITY IMPACT

Describe the gap or need and explain how it will improve equitable access for youth.
What is the problem, who is affected, and how will this help?

Problem: inequity, staff burnout

Who affected: Mono County residents. Specifically for this project, County staff and clients

How will this help?

- Provide a common understanding and language among staff for speaking about the impact of trauma on clients/patients/consumers, families, and staff.
- Help staff understand the importance of self-awareness and self-care in providing trauma-informed services.
- Begin identifying the County's implementation priorities for the Trauma Informed Care (TIC) system change process.
- Build internal capacity for providing trauma-informed training and sustaining a trauma-informed culture.

In 2023-24, First 5 Mono's Home Visiting Coordination project staff met with 12 agencies, departments, and community partners to learn what systemic inequities clients face. Part of the resulting Equity Action Plan delineates the need for high-quality trauma-informed training, specifically calling out Risking Connection as a system with demonstrated positive outcomes with Owens Valley Career Development Center staff.

5. PERFORMANCE MEASUREMENT & REPORTING

How will progress be tracked and reported?

Goals. The goals of the Program Evaluation are to:

- Measure staff attitude change at 3 time points during the whole system change process.
- The program evaluation will use the Attitudes Related to Trauma-Informed Care (ARTIC) Scale.
- Provide timely feedback on Trauma Informed Care (TIC) attitude change to both the agency-as-a-whole and individual staff via a secure, online dashboard.

- Provide recommendations to the agency based on the data to drive implementation decisions.

Outcomes. By the end of this phase, the client agency will have

- Empirical results measuring the outcome of the TIC change process.
- An agency report on a dashboard showing scores at 3 time points with recommendations for using the data to drive implementation efforts.
- Confidential reports on dashboard for individual staff.
- Ongoing access to agency and individual dashboards.

Program Evaluation for all 350 staff

- Program Evaluation. Data collection at 3 time points using Online ARTIC Scale; data management; data analysis; organization and individual staff reports via online dashboard; meeting with Trauma Informed Care Task Force to discuss findings and implications.

6. EVIDENCE-BASED, PROMISING PRACTICES, OR SERVICE ALIGNMENT

(check all that apply) Evidence-Based Research-Informed/Promising Practice
 Core Supervision/Service Delivery

Describe:

[Risking Connection is listed in the California Evidence Based Clearinghouse](#) and has a medium Child Welfare System relevance level.

7. FISCAL IMPACT & SUSTAINABILITY

Will this require ongoing funding? Yes, \$212-\$310 per trainer annually for up to 20 trainers: \$4,240-\$6,200 annually.

What happens if funding ends? Another funding source will be sought.

8. COLLABORATION

Describe any coordination with JJCC partners. If applicable, identify each partner's role and how this collaboration supports youth outcomes.

JJCC Committee member and First 5 Mono Executive Director Molly DesBaillets will dedicate staff time to coordinate the project with the County and report progress to the JJCC. This activity will work towards progress in addressing equity in Mono County as outlined in the First 5 Mono Home Visiting Coordination Equity Action Plan.

9. REALIGNMENT (SB 823 ONLY)

Describe alignment with realignment goals:

ATTACHMENTS

- x Budget Breakdown
- x Supporting Documents
- Letters of Support

Risking Connection Change Model (RCCM) to Trauma-Informed Care (TIC)
A Cost Proposal for Mono County
Scope of the project includes all 350 agency staff
February 25, 2026

1. ONBOARDING AND PLANNING PHASE

\$3,000

Goals: The goals of the engagement planning phase are to:

- Increase system-wide buy-in for trauma-informed change.
- Form a TIC Task Force which will guide implementation of the change process.
- Build a working relationship between agency leadership, TIC Task Force members, and the TSI consultant team.
- Educate leadership and TIC Task Force about TIC and the RCCM.
- Plan initial stages of the TSI RCCM process.
- Begin identifying Risking Connection (RC) Trainers and RC Champions that will attend the Train-the-Trainer training(s). (Note: It is strongly recommended that at least half of RC Trainers have an advanced degree in a human service-related field).

Outcomes. By the end of the phase, the client agency will have:

- Established greater system-wide buy-in for this TIC initiative.
- Formed a TIC Task Force.
- Developed a working relationship between leaders, the TIC Task Force members, and the TSI consultant team.
- Agency leadership and the TIC Task Force educated about TIC system change and TSI's RCCM process.
- A plan for implementing the initial stages of the process.
- A tentative list of RC Trainers and Champions.

Coaching/Training Activities

- Virtual Onboarding Meeting with the two Project Leads.
- Virtual Onboarding Meeting with the two Project Leads and the CEO.
- Virtual Meeting with the two Project Leads, Executive Leadership, Directors, and Board Representative (as applicable).
- Virtual Program Evaluation Set-Up Consult.
- Virtual Coaching with TIC Task Force.

2. INITIAL STAFF TRAINING

\$56,000

Goals: The goals of the initial staff training phase are to:

- Use the **Risking Connection (RC)** training to:

- Provide as many as 80 (40/cohort) staff with a framework and model for understanding the impact of trauma and the importance of TIC. This model will serve as a central element of building and sustaining TIC at the agency. This training is taught by RC Faculty Trainers.
- Provide a common understanding and language among staff for speaking about the impact of trauma on clients/patients/consumers, families, and staff.
- Help staff understand the importance of self-awareness and self-care in providing trauma-informed services.
- Begin identifying the agency's implementation priorities for the TIC system change process.

Outcomes: By the end of this phase, the client agency will have:

- Up to 80 (40/cohort) staff trained in the RC approach.
- Identified some of the agency's priorities for the TIC system change process.

Coaching and Training Activities

- Two 3-Day Risking Connection Basic Training: This an on-site 3-day foundational trauma training. Recommended participants include: executive leadership; TIC Task Force members; other program directors; staff that will become RC Trainers and RC Champions (required); and representatives from a cross section of programs and levels of agency's hierarchy; "influencers" in the organization.

Includes:

Coaching meeting with TIC Task Force

18.00 CE Units for licensed mental health professionals

Training Materials

**** Travel Cost for two Faculty Trainers**

**** Travel costs are subject to increase during this project based on market changes**

**** Cost of travel will be deducted if in-person training is not possible**

3. TRAINING TRAINERS AND CHAMPIONS.

\$34,500

Goals. The goals of the training of RC Trainers and Champions phase are to:

- Prepare for the RC Train-the-Trainer (TTT).
- Train staff identified as RC Trainers and RC Champions.

Outcomes: By the end of this phase, the client agency will have:

- Made preparations for the TTT training.
- As many as 20 RC Associate Trainers and 20 RC Champions.

Coaching/Training Activities

- One, Risking Connection TTT: This is a 3-Day, on-site training for selected staff that completed the RC Basic Training and meet the criteria for being RC Trainers and Champions.

Includes:

16.5 CE Units for licensed mental health professionals

Cost of RC Trainer credentialing events during calendar year of the TTT

Training Materials (including video, Portraits of Professional Caregivers: Their Passion, Their Pain - required for RC Basic training).

**** Travel Cost for two Faculty Trainers**

**** Travel costs are subject to increase during this project based on market changes**

**** Cost of travel will be deducted if in-person training is not possible**

4. IMPLEMENTATION COACHING

\$4,000

Goals: The goal of this phase is to develop and execute an implementation plan for rolling out RC training to the wider organization and achieving other TIC intervention tasks. This includes goals to implement:

- The rollout of RC trainings.
- Other identified TIC Implementation goals.

Outcomes. By the end of this phase, the client agency will have:

- Made progress toward the goal of training over 90 percent of staff in RC.
- Been in the process of implementing other identified TIC action steps.

Coaching/Training Activities

- Six (6) 90-minute virtual coaching calls with agency TIC Task Force.

5. PROGRAM EVALUATION

\$11,100

Goals. The goals of the Program Evaluation are to:

- Measure staff attitude change at 3 time points during the whole system change process. The program evaluation will use the Attitudes Related to Trauma-Informed Care (ARTIC) Scale.
- Provide timely feedback on TIC attitude change to both the agency-as-a-whole and individual staff via a secure, online dashboard.
- Provide recommendations to the agency based on the data to drive implementation decisions.

Outcomes. By the end of this phase, the client agency will have:

- Empirical results measuring the outcome of the TIC change process.
- An agency report on a dashboard showing scores at 3 time points with recommendations for using the data to drive implementation efforts.
- Confidential reports on dashboard for individual staff.
- Ongoing access to agency and individual dashboards.

Program Evaluation for all 350 staff

- Program Evaluation. Data collection at 3 time points using Online ARTIC Scale; data management; data analysis; organization and individual staff reports via online dashboard; meeting with TIC Task Force to discuss findings and implications.

**** If measure is administered to additional staff as staff size increases, there will be additional charges.**

Program Fee	\$108,600
10% Administrative Fee	\$10,860
<u>Total Cost</u>	\$119,460

40% deposit (to be invoiced after contract is fully executed)	\$47,784
40% due 6 months after contract signing	\$47,784
20% due 12 months after contract signing	\$23,892

Proposal terms and pricing are guaranteed for 60 days

RC Trainers and Champions join a large international Trainer/Champion community working on TIC implementation. They benefit from continuing education events annually and a recertification training every 2 years. RC Trainers are required to attend 2 RC Events per year to maintain their trainer credential (trainer events and recertification trainings count). There is an additional annual cost for these trainings that is not included above. These costs are outlined below.

Continuing Education Events and Recertification

Annual Webinars for RC Trainers. RC Trainers can choose from a menu of RC Trainer events during the year to fulfill their annual credentialing requirement. The fee for webinars in the calendar year during which the RC Train-the-Trainer occurs is included in the cost of the Train-the-Trainer. In subsequent years, the fee for all Trainers is billed in one lump sum to the agency at the beginning of the calendar year based on the number of RC Trainers at that time. RC Champions can attend these events at no charge.

Fee: \$212/RC Trainer/Year

Biennial Recertification. RC Trainers must attend a 1-day Recertification training every two years. In most situations, this training is offered virtually. Trainers must register and pay separately for the Recertification training.

Fee: \$310/RC Trainer (every two years) (Includes cost of CE Credits)

Includes: All updated RC materials

PRICES SUBJECT TO CHANGE

Risking Connection®

 Compare

Topic Areas

Trauma Treatment (Adult)

SCIENTIFIC RATING

NR

Trauma Treatment – System-Level Programs (Child & Adolescent)

SCIENTIFIC RATING

NR

CHILD WELFARE SYSTEM RELEVANCE LEVEL

Medium

Scientific Rating ⓘ

Child Welfare System Relevance Level ⓘ

Target Population

Organizations with professionals and paraprofessionals, and others who work with survivors (children, adolescents, and adults) of traumatic life events, especially those with histories of childhood trauma

Program Overview

Risking Connection® is a foundational trauma training program that grew out of a consumer trauma survivor lawsuit. It is based on constructivist self-development theory (CSDT), an integrative theory drawing on attachment theory, relational psychoanalytic theory, developmental psychopathology, and theory of cognitive schemas. **Risking Connection®** provides a way for organizations and systems to change their culture to one that is trauma-informed and trauma-responsive. It uses a train-the-trainer

model of dissemination whereby organizations gain the internal capacity to conduct **Risking Connection**[®] trainings and sustain a trauma-informed culture.

This model emphasizes:

- A framework for understanding common trauma symptoms
- A common inclusive language
- Relationships as the primary agent of change
- Respect for, and care of, both the client and the service provider (vicarious traumatization) as critical to healing
- Strategies and tools to support adoption of the model in clinical, social, and organizational processes

Contact Information

John Engel

Title: Associate Director

Agency/Affiliation: Traumatic Stress Institute of Klingberg Family Centers

Website: <https://www.traumaticstressinstitute.org/services/risking-connection-change-model/>

Email: John.Engel@Klingberg.org

Program Goals

The goals of **Risking Connection**[®] are:

- Knowledgeable of content and models essential to **Risking Connection**[®]
- Increase in favorable beliefs about trauma-informed care
- Demonstrates behaviors aligned with trauma-informed care
- Increase in compassion satisfaction
- Decrease in burnout and secondary (or vicarious) traumatic stress
- Reduce the use of restraints and seclusion with residents
- Decrease in likelihood to leave organization
- Decrease in staff injuries from client management
- Increase in staff satisfaction with job
- Increase in ability to keep children in care

Logic Model

The program representative did not provide information about a Logic Model for **Risking Connection**[®].

Essential Components

The essential components of **Risking Connection**[®] include:

- **Risking Connection** enables organizations to adopt a staff training model that provides foundational training of staff about trauma and trauma-informed care.
- Organizations can include inpatient and outpatient mental health foster care, hospitals, peer recovery programs, after school programs, community outreach, faith communities, residential care, juvenile justice, and therapeutic schools.
- Organizations are supported in implementing the staff training model and trauma-informed care by joining an international community of agencies who are engaged in a similar process.
- After adopting **Risking Connection**, organizations will have a cadre of highly-trained trainers who can train **Risking Connection** in an ongoing way at their organization. Most organizations make this a mandated training for their staff.
- Staff at organizations using **Risking Connection** has a common language, theory, and framework to describe and understand the behavior their trauma survivor clients engage in.
- Staff learns knowledge about psychological trauma and trauma-informed care, develop beliefs and attitudes favorable to trauma-informed care, and change behaviors to implement a trauma-informed culture.
- Staff displays RICH relationships with clients and their peers. RICH relationships are characterized by Respect, Information, Connection, and Hope.
- Risking Connection teaches organizations to:
 - Utilize the Risking Connection framework to respond to the impact of traumatic life events
 - Frame common symptoms and behaviors as adaptations to traumatic life events
 - Respond to survivors of traumatic experiences from a strengths-based approach
 - Demonstrate collaborative crisis management that reduces the risk of re-traumatization
 - Demonstrate increased self-awareness of their reactions to individual clients
 - Integrate knowledge of the impact of vicarious traumatization in the formulation of organizational and individual self-care plans
 - Create trauma-responsive cultures including policies, processes, and people systems

Program Delivery

Recommended Intensity

This program is not a client-specific intervention, but a whole system approach that targets the entire organization. The focus is to create a trauma-informed and strengths-based environment in which trauma-specific interventions can be more effectively implemented. There are specific components delivered to adults/foster parents/clients that are derived from or related to the intervention, and they work in concert with the full-system efforts.

Recommended Duration

This program is meant to be implemented at an organization and kept as a framework that supports the organization as it helps its clients work through their trauma.

Delivery Settings

This program is typically conducted in a(n):

- Community-based Agency / Organization / Provider
- Group or Residential Care
- Hospital
- Outpatient Clinic
- Public Child Welfare Agency (Dept. of Social Services, etc.)
- School Setting (Including: Day Care, Day Treatment Programs, etc.)

Homework

This program does not include a homework component.

Resources Needed to Run Program

The typical resources for implementing the program are:

This program is implemented into an existing therapeutic environment that will have individual offices, group rooms, and administrative assistance. The training and adoption of the materials into the overall organization are the additional resources that are needed to run this program.

Manuals and Training

Prerequisite/Minimum Provider Qualifications

Educational requirements vary based on context and setting. In clinical settings, licensed master's degree clinicians must be present. In nonclinical settings and nonmental health settings, competency and adoption of the model supersede educational level when staff members do not have postsecondary educations. Perhaps the most critical minimum qualification is the willingness to consider the role of trauma and another way of responding to those who experience it that is inclusive, supportive, and nonpathologizing while offering healing.

Manual Information

There is a manual that describes how to deliver this program.

Training Information

There is training available for this program.

Training Contact

- **John Engel**

Title: Associate Director

Agency: Traumatic Stress Institute of Klingberg Family Centers

Website: <https://www.traumaticstressinstitute.org/events/>

Email: John.Engel@Klingberg.org

- **Agency:** Traumatic Stress Institute of Klingberg Family Centers

Email: tsisupport@klingberg.org

Training Type/Location:

- Organizations dedicate necessary resources (human and financial) to use **Risking Connection** as a training model and approach.
- Organizations complete the Risking Connection Basic Training taught by **Risking Connection** faculty.
- Organizations identify staff to be **Risking Connection** trainers and they attend the Train-the-Trainer.
- When using Klingberg's training system, the organization's credentialed **Risking Connection** trainers attend two continuing education events per year and get recertified every two years.
- Organizations are expected to institutionalize certain core practices. For example, use reminders about RICH Relationships (based on Respect, Information, Connection, and Hope) and asking "how does the problem behavior help the client in the moment?"
- Organizations complete an implementation plan which covers such things as scope of change, training plan and schedule, and targets for change.
- The Traumatic Stress Institute (<https://traumaticstressinstitute.org/>) delivers **Risking Connection** as part of a 12- to 18-month Whole System Change Model to Trauma-Informed Care (TIC). The model has four phases: Leadership Engagement, Staff Training, Training Trainers and Champions, and Implementation Coaching. Program evaluation is integral to the model and involves data collection displayed on a dashboard. Organizations join an international community of providers implementing TIC and are supported by in-person and webinar training. A **Risking Connection** version for training foster parents is available.
- The Trauma Informed Academy (<https://thetraumainformedacademy.thinkific.com/>) delivers **Risking Connection** either as a standalone training or part of an organizational change process. The organizational change process includes a self- or other-guided readiness assessment, which drives a change management plan including the training plan, communication plan, policy review and more followed by actions aligned with goals. Agencies will be worked with based on their specific requirements. Self-directed learning, webinars, and other materials that help improve functioning are also offered.

Number of days/hours:

Faculty-Led core Risking Connection Basic Training: 18-20 hours divided into blocks that meet organizational needs regarding staffing and learning needs.

Instructor-Led RICH® Relationships 101: 6 hours

Transformation to Trauma-Informed Care using Risking Connection®: 1-2 years

Faculty-led Train the trainer: Delivered in an agency setting and varies based on context.

It is recommended that organizations have staff complete the Risking Connection Basic Training and Risking Connection Train-the-Trainer within 3 to 6 months of each other. It is also recommended that **Risking Connection** trainers within an organization train other organizational staff in **Risking Connection** within a year. It is recommended that organizations maintain a cadre of **Risking Connection** trainers.

Initial implementation of **Risking Connection** that includes the Risking Connection Basic Training, Risking Connection Train-the-Trainer, and rollout of training within the organization takes a year to 18 months depending on the size of the organization. Most organizations continue to use **Risking Connection** as foundational trauma training in an ongoing way.

Additional Resources:

There currently are additional qualified resources for training:

Sidran Authorized Providers:

- EPower & Associates, Inc.: http://www.traumainformedcare.com/TIC_Resources.html
- Klingberg Family Centers: <https://klingberg.org/>

Relevant Published, Peer-Reviewed Research

"What is included in the Relevant Published, Peer-Reviewed Research section?"

Brown, S. M., Baker, C. N., & Wilcox, P. (2012). Risking Connection trauma training: A pathway toward trauma-informed care in child congregate care settings. *Psychological Trauma: Theory, Research, Practice, and Policy*, 4(5), 507-515. <https://doi.org/10.1037/a0025269>

Type of Study: Multigroup pretest-posttest study

Participants: 261

Sample / Population:

- **Age** – Mean=38.7 years
- **Race/Ethnicity** – Not specified
- **Gender** – 174 Females and 83 Males
- **Status** –

Participants were staff at residential treatment agencies for youth with serious emotional and psychiatric problems

Location/Institution: Not specified

Summary:

This study examines the impact of the **Risking Connection** trauma training on the knowledge, beliefs, and behaviors of staff trainees at child congregate care agencies. Measures utilized were the *Risking Connection Curriculum Assessment (RCCA)*, the *Trauma-Informed Belief Measure*, and the *Staff Behavior in the Milieu*. Results showed an increase in knowledge about the core concepts of the **Risking Connection** training; an increase in beliefs favorable to trauma-informed care; and an increase in self-reported staff behavior favorable to trauma-informed care. In addition, these findings suggest that the Train-the-Trainer model of dissemination central to **Risking Connection** is effective at increasing beliefs favorable to trauma-informed care. Limitations include lack of a control group, nonrandomization of subjects to the different trainings, and a lack of connection to agency or client level outcomes.

Length of controlled postintervention follow-up: None.

Additional References

DeHart, D. D. (2006). *Collaborative response to crime victims in urban areas: Final evaluation report*. University of South Carolina, Center for Child & Family Studies.

Giller, E., Vermilyea, E., & Steele, T. (2006). Risking Connection: Helping agencies embrace relational work with trauma survivors. *Journal of Trauma Practice*, 5, 65-82. https://doi.org/10.1300/J189v05n01_05

Saakvitne, K. W., Gamble, S., Pearlman, L. A., & Tabor Lev, B. (2001). *Risking Connection: A training curriculum for working with survivors of childhood abuse*. Sidran Press.

Date CEBC Staff Last Reviewed Research: **September 2019**

Date Program's Staff Last Reviewed Content: **August 2019**

Date Originally Loaded onto CEBC: **November 2012**



R24-012

**A RESOLUTION OF THE MONO COUNTY BOARD OF SUPERVISORS
AFFIRMING MONO COUNTY'S COMMITMENT TO
DIVERSITY, EQUITY, AND INCLUSION (DEI)**

WHEREAS, throughout our nation's history, institutional and structural racism, discrimination, and injustice have led to deep and persistent disparities across all sectors and have had lasting negative consequences nationally and within Mono County; and

WHEREAS, racism and discrimination in our country have resulted in the structuring of opportunity and assigning of value based on characteristics such as race, sex, gender, religion, age, national origin, medical condition, etc., which unfairly disadvantage individuals and communities while providing advantages to other individuals and communities, therefore preventing society as a whole from achieving its full potential; and

WHEREAS, numerous studies have shown that institutional and structural inequity is the root cause of health and economic disparities and social inequities that impact many aspects of life, including, but not limited to, housing, education, employment, public safety, criminal justice, and physical and behavioral health; and

WHEREAS, the County recognizes the disparities and systemic inequities that have disproportionately affected historically underserved and underrepresented groups within our community; and

WHEREAS. The County is committed to creating a more inclusive and equitable workplace and community where every individual is afforded equal opportunity to services and resources;

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of the County of Mono affirms that racism, discrimination, and inequity in our society is a crisis that results in disparities in family stability, health and mental wellness, education, employment, economic development, public safety, criminal justice, and housing, among other things.

BE IT FURTHER RESOLVED THAT the Mono County Board of Supervisors finds that racism, discrimination, and inequity have affected our entire society, and the County specifically, and the Board wishes to assess operations, services, policies and procedures to ensure that diversity, equity and inclusion (DEI) are core elements of the County; and

1 **BE IT FURTHER RESOLVED**, that:

- 2 ■ The County Administrative Officer is directed to develop a workplan that includes at a
3 minimum, the following:
- 4 • A description of the County’s goals for diversity, equity, and inclusion, both
5 within the community and within the County’s operations; and
 - 6 • Information regarding the creation of a DEI Work Team comprised of County
7 employees to develop and implement DEI initiatives across all County
8 Departments; and
 - 9 • Plan for engagement with employees and outreach opportunities with community
10 members to actively seek their input and insight to ensure a more inclusive work
11 environment and equitable service delivery; and
 - 12 • Identification of specific, measurable, achievable, relevant, and time-bound
13 measures which the County can undertake to further the identified diversity,
14 equity and inclusion goals; and
 - 15 • A description of the mechanisms, staffing, timing, and other details required to
16 carry out these measures and how adjustments will be made as needed; and
 - 17 • A proposed budget for the work; and
 - 18 • A communication plan for employees and the community to disseminate
19 information on the County’s DEI goals and progress; and
 - 20 • A timeline and schedule for tracking and reporting on the County’s progress
21 toward its goals and commitments.
- 22 ■ The County Administrative Officer is directed to report back to the Board with a draft of
23 the above workplan by April 1, 2024.

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25
26 **PASSED, APPROVED and ADOPTED** this 9th day of January 2024, by the following
27 vote, to wit:


28 **AYES:** Supervisors Duggan, Gardner, Kreitz, Peters, and Salcido.

29 **NOES:** None.

30 **ABSENT:** None.

31 **ABSTAIN:** None.

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Rhonda Duggan (Jan 17, 2024 10:27 PST)

Rhonda Duggan, Chair
Mono County Board of Supervisors

ATTEST:


Clerk of the Board

APPROVED AS TO FORM:


Stacey Simon (Jan 17, 2024 10:26 PST)
County Counsel

First 5 Mono Home Visiting Coordination Equity Action Plan 2024

Formulated with funding support from First 5 California between July 2023 and October 2024 by the First 5 Mono Home Visiting Coordination Team: Annaliesa Calhoun and Molly DesBaillets. Based on input from 12 agencies, departments, and community partners through staff meetings, conversations with managers, and Home Visiting Coordination Luncheons.

After sharing research highlighting the impact of inequity we asked partners: When you think about the families you serve from Mono County, what systemic inequities do you think they face? Responses were compiled to formulate the suggestions below.

Next steps are to share findings with partners and the First 5 Commission to formulate action steps for each item.

Educate

- In partnership with communities of color impacted by disparate outcomes, engage to support access to resources for transportation, healthcare, childcare, legal services, housing, pathways to citizenship, and tech literacy.
- Access high-quality, trauma-informed training, e.g.: Klinberg trauma informed program: Risking Connection, 2-year program, 80K for 500 people

Develop

- Outreach efforts that include unscripted, informal, face-to-face contact between communities of color impacted by disparate outcomes and agency staff to promote development of positive relationships
- A comprehensive universally accessible resource directory (211 or Help Me Grow)
- More services coordinated and run by Tribes and agencies that serve Tribal communities, e.g.: Toiyabe, Owens Valley Career Development Center (OVCDC).

Sustain

- Continue to offer community-centered events and build relationships with families
- Relationships between agencies and work to decrease isolation by department

Advocate

- For more services in Spanish, improve quality of translation and availability of interpretation.
- For a livable wage for all Mono County families to support increased access to technology, childcare, housing, access to healthcare, and transportation