MEETING MINUTES

Call to Order: 1:30 p.m.

Present:

<table>
<thead>
<tr>
<th>Name</th>
<th>Agency</th>
<th>Role</th>
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<tbody>
<tr>
<td>Debra Pomeroy</td>
<td>San Mateo County Children &amp; Family Services</td>
<td>CAPC Coordinator/Facilitator</td>
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<tr>
<td>Michelle Grupe</td>
<td>Social Change Partners</td>
<td>Advisor</td>
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<tr>
<td>Liliana Mendoza</td>
<td>San Mateo County Children &amp; Family Services</td>
<td>Program Analyst</td>
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<tr>
<td>Christina Falla</td>
<td>San Mateo County Board of Supervisors</td>
<td>Legislative Aid, Office of Supervisor Noelia Corzo</td>
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<tr>
<td>Elizabeth Cauley</td>
<td>Stanford</td>
<td>Social Work Program Mgr. w/Child Abuse Team</td>
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<tr>
<td>Melissa Egge</td>
<td>Stanford; Keller Center</td>
<td>Child Abuse Pediatrician; Medical Director</td>
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<tr>
<td>Melissa Guariglia</td>
<td>Family Connections</td>
<td>Director of Infrastructure &amp; Clinical Services</td>
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<td>Eric Valladares</td>
<td>Family Connections</td>
<td>Executive Director</td>
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<tr>
<td>Louise Robaina</td>
<td>BHRS Pre-To-Three</td>
<td>Mental Health Program Specialist</td>
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<td>Michelle Blakely</td>
<td>First Five</td>
<td>Deputy Director</td>
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<td>Lizelle Lirio de Luna</td>
<td>Family Health Services</td>
<td>Director</td>
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<td>Erika Hernandez</td>
<td>CORA</td>
<td>Children’s Program Coordinator</td>
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<tr>
<td>Yvette Huerta</td>
<td>BHRS, Pre-To-Three</td>
<td>Mental Health Program Specialist</td>
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<td>Sean Hughes</td>
<td>Social Change Partners</td>
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<td>Lauren Real</td>
<td>CORA</td>
<td>Clinical</td>
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<td>Lauren Real</td>
<td>CORA</td>
<td>Child and family clinician</td>
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<tr>
<td>Lauren Real</td>
<td>CORA</td>
<td>Clinical coordinator</td>
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I. Welcome and Public Comment:

The San Mateo County Child Abuse Prevention Council (CAPC) was welcomed by San Mateo County CAPC Coordinator Debra Pomeroy.

San Mateo County CAPC members were asked to reflect on the meaning of prevention, summarized in one word. Member responses included:

- Certainty
- Protection
II. Public Comment/Brown Act:

No members of the public requested to comment.

III. Strategic Planning Group Discussion

Context: work on the Strategic Plan began in Fall 2023 and was developed in alignment with the best practices OCAP and strategies document. The plan is scheduled to be finalized by July 2024/August 2024. Feedback obtained during CAPC meetings will be used in the implementation of the plan (i.e. onboarding plan, orientation guide, systems and operations).

Strategies 1.2 (Mission and Vision) and 2.1 (Meeting Schedule) were reviewed in the May 2024 CAPC meeting. Today’s meeting will focus on finalizing the last three goals: Goal 2, Strategy 2.3; and Goal 3, Strategy 3.1 and Strategy 3.3

CAPC Council members branched out into groups (virtual and in-person) and brainstormed on an action plan. They were asked to provide input on:

- Timelines for activities
- Additional activities
- Potential partners
- Identify available resources (i.e. existing community campaigns)

**Goal 2 Convener of Cross Sector Partnerships**
Bringing together traditional and non-traditional partners to innovate, align, and integrate prevention systems and programs.

**Strategy 2.3**
Engage parents and the community to inform strategies and practices by holding listening sessions, inviting them to volunteer on community education campaigns or at CAPC events.

People with lived experiences would be invited to advise professionals on the types of community education campaigns and events that are beneficial to families.

**ACTION PLAN**
Ideas brought forth from council members included:

- Data collection from existing parenting support groups (i.e. CORA’s parenting support groups) and classes to determine current interests for training and education
- A public facing QR code linked to an anonymous survey for parents, to learn about their interests and the subject matter for potential trainings or classes.
- Diverse Data Sources
- Quarterly community advisory board for nurse-family partnership and Healthy Families America (made up several stakeholders that provide resources/services of these populations)
- Mental health for youth
San Mateo County CAPC Council Meetings scheduled on a bi-monthly/quarterly basis would allow for workgroup meetings whose focus would be community education and CPP alignment.

**Goal 3 Coordinator of Countywide Prevention Activities**
CAPCs align larger prevention efforts through public awareness, education, and training

**Strategy 3.1**
Promote public awareness and build shared understanding of how to prevent child abuse and neglect (i.e. community education campaigns - Blue Ribbon Month, Protective Factors)

Focused work on this strategy will commence after Strategy 2.3 has been executed and input from the community has been collected.

**ACTION PLAN**
Build a collective capacity to share information in San Mateo County. Various avenues to promote awareness are: social media, flyers, ads, and a combination of these for outreach.

Ways to promote sharing of information and improving outreach efforts:

- Use of NextDoor app by parents; incorporating outreach efforts on the app
- Partner with large birthing centers for new parents who need support with addressing stressors during the first few months of life
- CORA community education, outreach and prevention department.
- Communications plan around standard messaging, (i.e. same style and branding to build continuity)
- Targeted focus group (i.e. caregivers) creating a space where families can be involved
- Inclusive of different cultures to ensure a diverse representation
- Develop the message in the primary language (1st); secondarily providing translation in English

To be determined: existing campaigns and the need for new campaigns

**Strategy 3.3**
Provide professional development trainings to key stakeholders on preventing child maltreatment; i.e., PACES (formerly ACEs Aware), mandated reporters, CSEC (Commercial Sexual Exploitation of Children). Levels of Prevention, etc.

**Measures of Success:** Training needs identified and provided to professionals and community members in detecting, treating, and preventing child abuse and neglect.

The CPP outlines some trainings that key stakeholders have identified as essential:

1. **Mandated Reporting Training**
   - Training curriculum is available through the State.
   - In 2023, work began on redefining terms (i.e. poverty, neglect).
   - Legislation exists requiring professionals in the education/child care worker fields to takemandated reporting training.

2. **Community Training – 101 Child Welfare System (What happens after the call is made?)**
   Training previously provided by San Mateo County Children & Family Services.
3. Triple P

**ACTION PLAN**

- Developing trainings that align with best practices
- Identify additional trainings aside from those recommended in the CPP
- Look for overlap in funding and leveraging existing resources to provide trainings
- Identify available online trainings; and other ways to enhance what is mandated that do not require great expense

Suggestion(s) for additional trainings:
- Abusive Head Trauma (previously known as shaken baby syndrome)
- Campaigns for Fentanyl Abuse

IV. **Next Steps**

Today's feedback from San Mateo County CAPC Council will be incorporated into the Strategic Plan. After implementation of the plan, San Mateo County CAPC will review progress twice a year and will be a working document that can be revisited and revised as needed.

The next meeting will be in August 2024. The meeting locations will rotate on a bi-monthly basis.

V. **NEXT MEETING:** Thursday, August 1, 2024; 1:30 pm – 2:30 pm, (hybrid format)

VI. **Adjourn**