



END OF YEAR REPORT

**REPORTING PERIOD:
SEPTEMBER 30, 2016 - SEPTEMBER 29, 2017**



SAINT LOUIS COUNTY DEPARTMENT OF PUBLIC HEALTH - OCTOBER 2017

Resiliency in Communities After Stress and Trauma (ReCAST)

Annual Progress Report

EXECUTIVE SUMMARY

The first year of St. Louis ReCAST consisted primarily of process implementation. Major milestones and progress included completing a Community Needs Assessment crosswalk, forming a Strategic Plan, and extensive community outreach to educate and recruit community delegates. It was very important to understand what community members felt was important and funnel those gaps into the ReCAST initiative. Through the Community Needs Assessment crosswalk, Promise Zone residents prioritized the needs of the community and identified key issues. Through the Strategic plan, we addressed how we would tackle issues relating to mental health, peer support, violence prevention, youth engagement, and trauma-informed care. Having conversations with community members was valuable and captured information that is often overlooked by organizations.

Additionally, community outreach was used to promote and recruit community members to become a part of the participatory budgeting process. Several trainings were implemented to build capacity of the selected community delegates and help them have conversations in community to spread the word. A community engagement plan was developed to ensure youth engagement and family participation. Year one activities consisted of the successful recruitment of 79 community delegates, the issuance of four Requests for Proposals, Community Voting, and the awarding of four subcontracts to organizations that will implement services to create resiliency in the Promise Zone community. Service implementation began September 2017 and one organization has reported metrics for peer support services.

The Saint Louis County Department of Public Health evaluation staff designed and conducted community program assessments and evaluations. The Partner Tool is used to ensure valuable partnerships and collaborations are being formed in the Promise Zone by Core Advisory Board and Coalition of Stakeholders members. This assessment tool gains feedback from all parties and collects information about the effectiveness of meetings, etc. In addition, The Monthly Data Collection Tool is used by subcontractors to input data about the services they are providing. Through this tool, we can evaluate performance and track outcome measures linked to qualitative and quantitative data. Lastly, The Demographic tool captures information of the audience being served.

An integral part of St. Louis ReCAST was the formation of the Core Advisory Board (CAB), consisting of partners from twelve organizations that help make key decisions, progressing the projects forward. The CAB has been instrumental in helping facilitate group meetings with community delegates, branding, helping define the funding priorities, and designing the community voting process. The Coalition of Stakeholders (COS) is another group formed. It is comprised of 25 committed community organizations, but its distribution list contains 115 organizations. The COS purpose is currently being defined, but will increase partnerships and collaborations of organizations working in the same space.

St. Louis ReCAST was successful providing the foundation that allowed citizens to participate in the allocation of resources, which empowered the community and promoted individual self-efficacy.

PROJECT IDENTIFICATION AND KEY CONTACTS

Project Identification Information

Please note the year that your grant was awarded.

September 2016

Grant Number: 1H79SM063523-01 Revised

Project Name: St. Louis ReCAST Revised (Project Catalyst)

Grantee Organization: Saint Louis County Department of Public Health

Grantee Staff Contact Information

Two staff positions were filled in January. **Program Manager, Paula Hughes** supports planning, implementation, and evaluation activities; day-to-day project management; communications and coordination with stakeholders and partners. This position is a key managerial role with 100% FTE dedicated to the grant. **Public Health Coordinator/Community Facilitator, Michelle Mitchell** manages and supervises the community engagement process and budget for the Community Delegates and ensures the integrity and consistency of community engagement throughout grant activities. She leads the participatory budgeting (PB) process; facilitates trainings and education for high risk youth and families. This position is a key community engagement and facilitation role with 100% FTE dedicated to the grant.

Project Director

Name/Title: Spring Schmidt/Director of Health Promotions and Health Research

Email: sschmidt@stlouisco.com

Persons completing this form (if different from or in addition to the Project Director)

Name/Title: Paula Hughes/Project Coordinator

Role (e.g. Program Manager): Program Manager

Name/Title: Michelle Mitchell/Public Health Coordinator

Role (e.g. Local Evaluator): Community Engagement Coordinator

PROGRAM ACTIVITIES

In the tables below please provide information on activities completed in the last 12 months of the grant year. Describe progress, changes, and accomplishments for each goal ReCAST goal.

Build a foundation to promote well-being, resiliency, and community healing through community-based, participatory approaches
<p>Briefly describe your approach to this goal and list the specific objective(s) developed for this goal</p> <p>To help promote St. Louis ReCAST and recruit community delegates, a participatory budgeting kickoff event and two recruiting meetings were held. Residents who participate in the initiative are required to live within the Promise Zone (PZ), therefore the meetings took place in three separate locations within the target geographic area (Central location – O’Fallon Rec Center, St. Louis County location – St. Louis County Department of Public Health and St. Louis City location – Vision for Children at Risk).</p> <p>Residents were informed about St. Louis ReCAST’s goals and objectives, as well as the participatory budgeting process. During the three kick-off meetings, community residents were also given the opportunity to have table conversations with Subject Matter Experts (SME) around the funding priorities for the St. Louis ReCAST initiative including mental health, peer support, trauma-informed care, violence prevention, and youth engagement. Each SME took notes to capture common themes and concerns expressed by community members. Community residents were informed as to how we define each area and provided with handouts and other materials that explained the goals and objectives of St. Louis ReCAST.</p> <p>Attendees at each meeting were encouraged to complete applications to become a community delegate. Upon completion of the kick-off event and recruiting meetings, applications were reviewed using The Economic Development Program Eligibility Tool to ensure community members lived within the Promise Zone. A welcome letter was then sent to residents who were selected to be community delegates.</p> <p>Community delegates are extremely instrumental in participatory budgeting because their participation starts the process of community healing and resiliency. Allowing residents to help identify the top-priority needs and resource allocation to meet those needs increases civic engagement, unity, and empowerment. The non-traditional audience of high-risk youth and families were afforded the opportunity to make key decisions in the communities they live in.</p> <p>Group meetings for the four funding priorities were held separately. Over the course of five weeks, groups met to develop scopes of work that were then written into a Request for Proposal (RFP) document placed out for bid by the St. Louis County Department of Public Health. One RFP was written for each funding priority.</p>
<p>A. Major Activities and Accomplishments</p> <ul style="list-style-type: none">• Community Delegate Recruitment (79 participants) and retention throughout the RFP process• Successful facilitation of five weekly sessions, per group, to develop services to be implemented• Issuance of four Request for Proposals (Services requested mental health, peer support, youth engagement, and violence prevention)• Identified additional contacts/resources for initiatives in the four funding areas for collaboration opportunities• The start of community healing through participatory budgeting; PZ residents made key decisions in their immediate community

- Positive qualitative results from delegate participants in evaluation

B. Challenges/Barriers

- It was a bit challenging recruiting youth. Barriers included: appropriate engagement activities and times and locations of the meetings
- Keeping delegates engaged while staff were completing the procurement and contract award processes
- Establishing partnerships with faith based and grass roots organizations
- Identifying specific populations such as mental health service recipients and municipality residents for community level representation
- Recruiting non-traditional partners
- Gathering information from organizations working in the same space but limited success in the development of a central communication strategy and referral process to increase collaboration

C. Deviations from Project (please include a description of changes from your application or strategic plan and the reason(s) for change)

None

D. Lessons Learned

- Implement Conflict of Interest policy
- Create a Request for Proposal (RFP) template to ensure responses are formatted the same
- Change facilitation style of delegate meetings to ensure there is enough information to make informed decisions
- Provide additional trainings around the four funding priorities including examples of evidence-based approaches
- Building relationships with schools are difficult; Continue to work with youth engagement contractor to develop additional partnerships with school district(s), youth councils for youth-driven and youth-planned engagement

E. Activities Planned and Anticipated for the next 12 Months

- Recruitment of Community Delegates for Year 2
- Monthly meetings with Year 2 Community Delegates
- Issuance of Request for Proposals
- Issuance of Micro grants to target smaller organizations that may not need a lot of money to expand current projects or fund new ideas
- Ongoing communication with delegates during down times; implement newsletter
- Community delegate sector and community level representation in system-level coalitions and other civic engagement opportunities

<p>Create more equitable access to trauma-informed community behavioral health resources</p>
<p>Briefly describe your approach to this goal and list specific objective(s) and activities related to this goal.</p> <p>Community Delegates, Subject Matter Experts, and St. Louis ReCAST staff attended awareness training provided by our partnering organization, Alive and Well. Individuals gained valuable knowledge about how to recognize and treat stress. In addition, participants received information about how to access additional trauma-informed care community resources.</p> <p>Just recently, the St. Louis community again experienced civil unrest due to the John Stockley verdict. To help provide additional resources to those in need, St. Louis ReCAST staff attended Resilience and Coping Intervention (RCI) training. It is a group intervention designed for youth with children and adolescents to help participants identify thoughts, feelings, and coping strategies related to issues that may arise following a disaster, traumatic event, or problematic experience as well as issues reflecting developmental challenges and the usual stresses of daily life.</p> <p>To provide additional community behavioral health resources to high risk youth, St. Louis ReCAST sponsored a play entitled, "Games Dad Didn't Play," by Metro Theatre Company to elementary school students in the Promise Zone. The play addresses violence prevention and introduces the concept of trauma-informed care to the audience.</p>
<p>A. Major Activities and Accomplishments</p> <ul style="list-style-type: none"> • Increased community knowledge about trauma-informed care and trauma awareness • Delegate referrals to appropriate trauma-informed care behavioral health resources • St. Louis ReCAST staff trained to help community members identify coping strategies related to issues following traumatic events • Sponsorship of plays that educate high risk youth about violence prevention and trauma-informed care • Identified additional resources for trauma-informed services during participatory budgeting RFP process
<p>B. Challenges/Barriers</p> <ul style="list-style-type: none"> • Unanticipated adverse community events • Targeting high risk youth in the Promise Zone
<p>C. Deviations from Project (please include a description of changes from your application or strategic plan and the reason(s) for change)</p> <ul style="list-style-type: none"> • St. Louis ReCAST staff did not anticipate the community reaction to the John Stockley verdict; Additional resources were leveraged to support community members that experienced trauma during this time. • The sub-contract between DPH and MoACTS-CAGSTL for the delivery of training in trauma informed care to all providers is still in negotiations.
<p>D. Lessons Learned</p> <ul style="list-style-type: none"> • Meet youth where they are • Find creative activities to incorporate sensitive subject matter to high-risk youth

E. Activities Planned and Anticipated for the next 12 Months

- Continuous support of community members affected by trauma
- Sponsorships that promote St. Louis ReCAST to high-risk youth and families

Strengthen the integration of behavioral health services and other community systems to address the social determinants of health

Briefly describe your approach to this goal and list specific objective(s) and activities related to this goal.

Issues and concerns mentioned by community delegates from the participatory budgeting kick-off and delegate meetings were compiled and shared with relevant community partners. St. Louis ReCAST staff also attended various meetings within the Promise Zone to share information with other community systems to address the social determinates of health.

In partnership with the Promise Zone Health and Wellness subcommittee, The St. Louis County Department of Public Health and St. Louis ReCAST helps tackle issues such as access to care, literacy, and economic development.

A. Major Activities and Accomplishments

- Information Sharing
- Increasing community collaborations and partnerships with other organizations working in the same space
- At request of community delegates, added language into contracts requiring sub-awardees to refer to additional services for the needs of clients served
- System level partners with behavioral health services, including a significant local funder, have disseminated ReCAST information to almost all behavioral health service providers in St. Louis about ReCAST, participatory budgeting, delegate evaluation information, and service integration opportunities.
- Partnered with the SAMHSA- funded Systems of Care to provide opportunities for community delegates to be board members or to share lived experiences in support of the system integration of services.

B. Challenges/Barriers

- Appropriately addressing issues expressed by community members that St. Louis ReCAST is unable to tackle e.g. housing development, building construction, patient wait times to see physicians, etc.

C. Deviations from Project (please include a description of changes from your application or strategic plan and the reason(s) for change)

None

D. Lessons Learned

None

F. Activities Planned and Anticipated for the next 12 Months

- Continued collective impact

Create community change through community-based, participatory approaches that promote community and youth engagement, leadership development, improved governance, and capacity building

A. Briefly describe your approach to this goal and list specific objective(s) and activities related to this goal

St. Louis ReCAST community delegates attended several trainings and meetings that expanded their knowledge and capacity in the given topics:

Trauma Awareness training: This 90-minute training provided an introduction to the impact of trauma on health, development, and social functioning. This training is the suggested starting point for individuals and organizations interested in learning more about trauma and toxic stress.

Racial Equity workshop: Helped individuals understand health disparities, institutional and systemic racism, intergenerational poverty, implicit bias, etc. This gives context to understanding community issues and can inform how people approach building out their scopes of work.

Facilitative leadership training: This training focused on conducting meetings, helping groups reach consensus, group problem solving, etc. It teaches people to feel comfortable facilitating groups of neighbors through the engagement process and increases leadership development.

RFP scoring: Taught community delegates how to review and score responses to the request for proposals.

Participatory Approaches: In addition to community delegates shaping the services to be implemented throughout the Promise Zone (PZ), community change occurred as the entire Promise Zone community was allowed to participate in the participatory budgeting process through Community Voting.

The introduction of a public participatory budgeting process has improved governance at St. Louis County Department of Public Health. Though challenges still exist, key staff have revised how community members are incorporated to make decisions in their community.

B. Major Activities and Accomplishments

- Four trainings completed by St. Louis ReCAST Community Delegates: Trauma-Informed Care, Racial Equity, Facilitative Leadership, RFP development and Scoring
- Community Voting (148 participants)
- Sponsorships of schools plays that engage elementary school around the topic of trauma-informed care

C. Challenges/Barriers

- Some community members had already received the trainings that were offered
- Meeting locations and times were not convenient for some community delegates

D. Deviations from Project (please include a description of changes from your application or strategic plan and the reason(s) for change)

- Postponed establishment of Community Delegate Advisory Board because of participatory budgeting timing. Will revisit this in Year 2 based on PB conducted earlier in the fiscal year

- Timing constraints did not allow the development of partnerships with youth, law enforcement personnel and families outside the Coalition of Stakeholders and PB process

E. Lessons Learned

- It is important to consider the order the trainings are provided in
- Select voting times and venues that are more conducive to normal voting process
- Provide electronic distribution of voting materials

G. Activities Planned and Anticipated for the next 12 Months

- Continue trainings for Year 2 community delegates
- Identify evidence based violence prevention programming opportunities for youth engagement

Ensure that program services are culturally specific and developmentally appropriate

A. Briefly describe your approach to this goal and list specific objective(s) and activities related to this goal

St. Louis ReCAST branding and informational materials were designed in accordance to The National CLAS standards. In the initial stages of the project, the target audience was identified and engagement efforts were implemented to support the given demographics. All public facing messaging is intentionally written and designed to ensure readability and understanding for individuals 11 years of age and above.

B. Major Activities and Accomplishments

- Successful creation of ReCAST branding materials: website, flyers, brochures, swag items, T-shirts



Facebook: [facebook.com/ReCASTSTL](https://www.facebook.com/ReCASTSTL)
 Twitter: [@ReCASTSTL](https://twitter.com/ReCASTSTL)
 Website: www.ReCAST-STL.org

C. Challenges/Barriers

- The sub-contract negotiated between DPH and Washington University Institute for Public Health which supports the PRAB, was delayed. They recently reviewed ReCAST activities to determine if we are comprehensive, ethical, professional, authentic, accurate and reliable, and use measures that can be realistically implemented in identified community settings.

D. Deviations from Project (please include a description of changes from your application or strategic plan and the reason(s) for change)

- Contract negotiations were not completed to allow PRAB to review the design and strategy of community-based, participatory activities proposed by the ReCAST Advisory Board and coalition members. They have begun conducting a peer review by 3-5 PRAB members that includes discussion at

the monthly PRAB meeting, dialogue with lead investigators and written feedback and recommendations for improvement of existing materials and processes used for Year 1.

E. Lessons Learned

- None

F. Activities Planned and Anticipated for the Next 12 Months

- Utilize our partnership with the Patient Research Advisory Board (PRAB) to review public facing information to ensure it is culturally competent
- Invite both PRAB members and our community participatory delegates to visit the 4 awarded contract service sites and make observations and provide additional recommendations

ReCAST Coalition Activities

A. Major Activities and Accomplishments

The core planning team and the initial Core Advisory Board include the St. Louis Mental Health Board (Regional System Of Care), St. Louis City and County public health authorities, City and County police departments, Missouri Department of Mental Health, the Regional Health commission (Alive and Well STL), Forward through Ferguson (Ferguson Commission), two large health networks (Integrated Health Network and Behavioral Health Network), St. Louis Metro Transit, St. Louis Public Schools, St. Louis County Executive, Washington University and the University of Missouri-St. Louis

- The initial members of the Core Advisory Board (CAB) were involved in designing the original CATALYST project in addition to their work to address racial inequity, community trauma, and the powers of social determinants of health in their own organizations
- This partnership has opened up new opportunities for collaboration that has increased community engagement, honoring local governance structures while providing institutional supports for sustainability and replicability of this partnerships
- The Core Advisory Board meets monthly to provide review, guidance, project governance and support compliance with SAMHSA requirement
- The Coalition of Stakeholders was developed as an extension of the CAB to help strategically align St. Louis ReCAST using its knowledge base, support and assets
- Surveyed Coalition of Stakeholders to identify interest and resources in promoting community-based, participatory approaches
- Conducted three quarterly Coalition of Stakeholders meetings with minimum attendance of 25 stakeholders at each meeting
- Collected 23 partner enrollment forms to identify support for the Coalition of Stakeholder's effort's as well as to determine activities suited for their level of involvement
- Executed Coalition of Stakeholder partnership tool to examine the process of collaborations for the St. Louis ReCAST local evaluation
- Added 75 stakeholders to the Coalition of Stakeholders initial list of 18 partners

- Partnered with coalition members for meeting locations and engagement opportunities
- Promoted stakeholder activities on social media and with COS and Community Delegate distribution
- Recruited community delegates for engagement opportunities with COS members
- ST. Louis System of Care builds meaningful partnerships with families, youth and public/private child serving organizations. For ReCAST they address duplication /fragmentation of services in addition to providing collaboration with the coalitions they serve
- The St. Louis SOC advocates to ensure strategic alignment with their coalition and promotes and conducts community-based, participatory approaches with the COS and the community delegates

B. Challenges/Barriers

- Difficulty solidifying objectives for the Coalition beyond immediate needs related to the community-based participatory approaches
- Retaining coalition members beyond the current funding cycle
- Many of our members are involved in other coalitions that share similar goals and objectives
- Recruiting non-traditional organizations as well as Promise Zone residents, youth and families directly affected by trauma
- Competing interest i.e., four funding priorities need to find the “common” problem to create impact
- Civil unrest around the Shockley verdict

C. Deviations from Project (please include a description of changes from your application or strategic plan and the reason(s) for change)

- Wanted to partner with existing coalition but found we needed space for the service providers, law enforcement agencies, faith-based organizations, businesses, government agencies and others that bring unique perspectives to the table in the four funding areas
- Identify ways the coalition can be more involved in the essential functions of our work

D. Lessons Learned

- Difficulty to maintain momentum with quarterly meetings
- Identify a specific problem and the ways to influence policy or behavior change
- Address “WIIFM” – What is In It for Me?

E. Activities Planned and Anticipated for the Next 12 Months

- Explore partnering with an existing coalition i.e., youth advisory boards
- Review survey information for gap analyses
- Recruit more individual members
- Explore opportunities to include families and youth
- Develop strategic and action plans to streamline efforts

F. Describe your efforts to engage youth and families in your ReCAST coalition.

- Identify other coalitions to determine overlap
- Recruit youth and families who are part of St. Louis ReCAST's contracted services
- Identify ways to make the collaborations beneficial

PART II: SCOPE & BREADTH OF SERVICES

1. If you have not yet addressed one or more of the 5 required ReCAST program goals (above), please explain what your challenges have been and what your plans are for overcoming those challenges and addressing these goals in the future (including time frame).

Not applicable

2. Have your activities addressed the needs of high risk youth and families? If not, why, and what plans do you have for addressing the needs of high risk youth and families (including time frame)?

Our current subcontracts were awarded September 2017 and services began immediately. These services are now being addressed by all of the sub-contractors as they each have components of services for high risk youth or their families. We also addressed the needs of high-risk youth and families throughout the community assessment and strategic planning process as well as during the participatory budgeting cycle as the key priority in order to stay focused on generating services that met this need.

3. Have your activities included peer support activities, during the past 12 months?

As much of Year 1 was spent on the assessment, planning, and participatory budgeting, most of our activities have focused on defining peer support activities, identifying assessment and planning needs, and facilitating the peer support RFP process meetings with 20 resident delegates to determine the scope of work for the peer support services. The contract agency was identified and awarded and services have begun.

PART III: INFRASTRUCTURE & SYSTEMS CHANGE ACTIVITIES

1. Briefly describe highlights and challenges of ReCAST workforce development activities (i.e., trauma-informed trainings, etc.) during the past 12 months.

All events to promote St. Louis ReCAST afforded the opportunity to introduce the concept of trauma-informed care to community members. Our reach has spanned across 1,000 individuals. The process of participatory budgeting has shaped how the community interacts with the initiative. Promise Zone residents are open about traumatic experiences they have faced and are eager that ReCAST will provide resolve. Staff continuously attend trainings to ensure we have effective conversations.

Services began in September 2017. In the coming months, this activity will be addressed through our Youth Engagement, Violence Prevention and Peer Support subcontract activities.

2. Briefly describe your efforts to collaborate with youth and family serving providers or experts in your community during the past 12 months. Include highlights and challenges related to family/youth service provider relationship development.

Recently, as the St. Louis community faced civil unrest, St. Louis ReCAST collaborated with several organizations to help address community issues among youth and families. Through Facebook and other social member outlets, we promoted resources for community members to seek help. ReCAST took the opportunity to also promote events and meetings of other organizations sharing similar platforms.

The establishment of the Core Advisory Board and the Coalition of Stakeholders has laid a great foundation for community partnerships and communication methods for organizations working in the same space. Both groups have helped expand the reach of St. Louis ReCAST providing linkages to mental health and behavioral health services.

Services began in September 2017. In the coming months, this activity will be addressed specifically with our Youth Engagement and Peer Support subcontract activities.

3. Briefly describe your 2-3 **greatest accomplishments** in creating a trauma informed community and promoting resilience within the community over the last 12 months.

Prior to starting the delegate recruitment process, St. Louis ReCAST staff attended several community events such as health fairs, school activities, and community centers to ask Promise Zone residents to prioritize the needs of their community in accordance with the St. Louis ReCAST funding priorities using a Community Needs Assessment Crosswalk. At each event, residents engaged in conversations about trauma-informed care and how the overall goal of St. Louis ReCAST is to promote resiliency within the community through the process of participatory budgeting. Community residents were given informational materials, including definitions as to how we define each funding priority: mental health, peer support, youth engagement, violence prevention, and trauma-informed care.

Each priority was clearly defined by the St. Louis ReCAST Core Advisory Board. Multiple discussions went into defining trauma-informed care to ensure community members are able to comprehend and understand the concept. Every outreach activity provided the opportunity to have discussions with community members and laid the foundation and framework for the strategic plan. Feedback provided by community members helped shape and structure the trainings attended by staff, and community delegates as community members wanted to know more about trauma-informed care.

To further ensure trauma-informed practices are being promoted effectively, St. Louis ReCAST staff, community delegates, and members of the Coalition of Stakeholders, actively seek opportunities to gain additional knowledge on the subject matter as it becomes available.

The stages of gaining community input through various outreach activities created organizational systems change. Allowing community members to shape and structure the priorities for St. Louis ReCAST to address was a new concept for a governmental organization. Participatory budgeting allowed residents to make key decisions through the RFP process and community voting.

4. Briefly describe your 2-3 **greatest challenges** in creating a trauma informed community and promoting resilience within the community over the last 12 months and what you have done or will do to overcome these challenges.

Trauma informed trainings provided by the MoACTS- Children’s Advocacy Services of Greater St. Louis also started in September 2017.

The initial challenge of creating a trauma-informed care community occurred when defining what it meant to the community. The general definition provides complex information that may be hard for people to interpret. Because St. Louis ReCAST is inclusive of youth, we wanted to ensure readability by all participants. To overcome this issue, the Core Advisory Board simplified the definition of trauma- informed care in accordance to CLAS standards.

Bureaucracy has been the main challenge this year as we have laws that govern the procurement process that did not lend themselves well to community participatory decision making. However, our greatest challenge also becomes our greatest achievement as we have all persevered through Year 1 for contract awards and are moving forward with Year 2 participatory budgeting approaches tweaking the process.

5. Briefly describe activities related to developing ReCAST champions and advocates in your community.

As previously mentioned, there were several trainings provided to the St. Louis ReCAST community delegates to help build capacity and help them become advocates in the community. The most vital training was Facilitative Leadership, designed to instruct the delegates how to have conversations in community about the participatory budgeting process. It was very essential that the delegates buy into the process, and spread the word. All community delegates were encouraged to attend meetings in their communities and discuss St. Louis ReCAST.6. Please identify any areas for which you would like to request technical assistance at this time, either program, communications or evaluation-related.

St. Louis ReCAST is interested in technical assistance to provide introductions to other grantees dealing with civil unrest in their communities. Also, we are open to suggestions about recruiting youth and ways to keep the community engaged.

Section 3: BRIEF VIGNETTES

After the completion of the community delegate meetings and Coalition of Stakeholder meetings, a survey was given to each participant to provide feedback about their overall experience participating in the participatory budgeting process and/or with St. Louis ReCAST. Below are responses gathered from the surveys:

VIGNETTE #1 :

One delegate responded to the question, “What was the most valuable part of being a delegate,” by stating, “The most valuable part of the community delegate process was, “being able to come together with members of my community and (1) decide what improvements we wanted to see and (2) choose the RFPs that provided the services we wanted to see sought.”

VIGNETTE #2 :

Coalition of Stakeholders advised that the aspects of collaborating contributing to St. Louis ReCAST reaching it’s goals are the: 1) Bringing together diverse stakeholders; 2) Meeting regularly; 3) Exchanging information and knowledge; 4) Collective decision-making; and, 5) Having a shared mission and goals.

Section 4: STRATEGIC PLAN

ReCAST grantees should revisit and update Strategic Plans annually, with the exception of the first year of the grant. If you are in the first year of the grant, do not respond to this section.

- A. Not Applicable
- B. Not Applicable

Section 5: TIMELINE

Include a timeline of program planning and implementation activities completed during the past 12 months.

Meeting and Date	Purpose
Community Needs Assessment Crosswalk/ Community Outreach Jan – March 2017	<ul style="list-style-type: none"> • To conduct community outreach activities providing St. Louis ReCAST staff the opportunity to have personal conversations with community members about the initiative • To prioritize needs of Promise Zone residents using a Community Needs Assessment Crosswalk • To lay the foundation for the Strategic Plan and identify key gaps in the community
Participatory Budgeting Kick-Off Event & Recruiting Meetings April 22, 2017 May 1-2, 2017	<ul style="list-style-type: none"> • Inform the community about the St. Louis ReCAST grant through community outreach activities • Team of Expert Presentations • Utilize information gained from the Community Needs Assessment Crosswalk to facilitate conversations with community members • Establish goals for the strategic planning process • Promote Informational Meetings • Handout Delegate Applications

Racial Equity Training for Community Delegates May 13, 2017	<ul style="list-style-type: none"> Racial equity training helps people to understand health disparities, institutional and systemic racism, intergenerational poverty, implicit bias, etc. This gives context to understanding community issues and can inform how people approach building out their scopes of work.
1st Group Meeting/Trauma Aware Training May 20, 2017	<ul style="list-style-type: none"> Provide trauma aware training to selected delegates Introduce group members to one another and provide additional information about their roles as delegates
Scope of Work Development May -July, 2017	<ul style="list-style-type: none"> Create scopes of work (define target audience, services to be implemented, define roles and responsibilities of bidding organizations)
Facilitative Leadership for Community Delegates July, 7, 2017	<ul style="list-style-type: none"> This training focuses on conducting meetings, helping groups reach consensus, group problem solving, etc. It would basically help people feel comfortable facilitating groups of neighbors through the engagement process.
Request for Proposal Scoring July 11-12, 2017	<ul style="list-style-type: none"> Review each question of the RFP and give examples of the kind of information reviewers should look for, what makes a response strong versus weak. Offer tips on how to write strong comments if we are asking the Delegates to write comments for each application. Provide a rating scale so that we have some consistency in assigning numeric scores. Discuss the decision making process, so that we know how the group will reach consensus.
Review of Proposals Aug 7-8, 2017	<ul style="list-style-type: none"> Proposal scoring by St. Louis ReCAST Core Advisory Board members and community delegates
Community Voting August 14-19, 2017	<ul style="list-style-type: none"> Proposal Presentation; voting
Contract Awards September 26, 2017	<ul style="list-style-type: none"> Services are implemented by the 4 awardees

Section 6: SUSTAINABILITY

List the top three areas you plan to work on during the next 12 months.				
Priorities	Action Steps	Timelines	Key Leaders or Staff	Benchmark for Progress
Coalition of Stakeholder - Lack of Focus & Direction	-Clarify vision, mission and goals - Develop action plan	Nov 2017 – Mar 2018	Program Manager	A shared vision and focus for this group; action items that lead to the accomplishment of goals implemented by the group
Core Advisory Board - Sharing of power, decision-making and responsibility	-Develop action plan - Ask organization for representative with more time to offer board -Recruit new organizations	Nov 2017 – June 2018	Project Director/Core Advisory Board	Shared roles and responsibilities by all parties; consistent attendance by all group members
Youth engagement	-Partner with youth councils, etc. -Partner with school districts and other organization working in same space	Nov 2017 – Jan 2018	Community Engagement Coordinator	Increased number of youth participation in various ReCAST participatory budgeting activities Successful recruitment of 15 community delegates

Section 7: PERFORMANCE MEASURES REPORTING

Performance Measure	Data	Narrative
REQUIRED GPRA Performance Measure WD2: The <u>number of individuals</u> in the mental health or related workforce trained in	45	St. Louis ReCAST staff attended Resilience and Coping Intervention (RCI) training prompted by civil unrest in the community. Information on national disaster mental health leadership, developing interventions and providing

behavioral/mental health trauma-informed approaches as a result of the ReCAST grant.		resources. This performance measure is behind because our mental health subcontract was recently awarded September 26 after the completion of the six month participatory budgeting process.
REQUIRED GPRA Performance Measure TR1: The <u>number of individuals</u> who have received training in trauma-informed approaches, violence prevention, mental health literacy, and other related trainings as a result of the ReCAST grant.	121	Four trainings were provided to St. Louis ReCAST community delegates to help increase their knowledge about trauma awareness, racial equity, facilitative leadership and Request for Proposal scoring. All four trainings combines information about how services (including mental health) are to be delivered from the appropriate racial lens. This measure is on track but will have more activity based on the subcontractor efforts.
REQUIRED GPRA Performance Measure PC2: The <u>number of organizations</u> and community representatives that are collaborating/coordinating/sharing resources with each other as a result of the ReCAST grant.	115	The St. Louis ReCAST Advisory Board consist of 10 organizations meet monthly to provide oversight and guidance. They helped develop the partnership agreement, participatory budgeting approaches and request for proposal efforts. Our Coalition of Stakeholders has engaged 100 stakeholders representing residents, community-based non-profit organizations, existing collaborations, health and human service providers, business groups, state and local government entities, law enforcement, transportation agencies, educators, researchers and advocates as a result of the grant. Twenty-five have submitted a coalition enrollment form. Approximately 44 stakeholders attended the June and August quarterly meeting to learn more about the participatory budgeting funding opportunity. This measure is on track.
Required GPRA Performance Measure T3: The <u>number of individuals (youth and family members)</u> referred to trauma-informed behavioral health services as a result of the grant.	0	The awarded subcontractors have just begun to implement services. In the coming months, this activity will be addressed by our Trauma-Informed care activities. This measure is not on track.
[Required Youth Outcome Performance Measure]:	15	CHIPS Health and Wellness provided psychiatric and counseling services to 15 youth in the Promise Zone.
[Required Family Engagement Performance Measure]:	1,071	St. Louis ReCAST staff attended community outreach events in the Promise Zone to specifically target families. We promoted ReCAST and had conversations about mental

		health, youth engagement, peer support, violence prevention, and trauma-informed care with 1,071 people.
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ADDITIONAL END OF YEAR REQUIRED DOCUMENTATION

A: FEDERAL FINANCIAL REPORT

A completed FFR (Federal Financial Report, SF-425) must be submitted to the Division of Grants Management by December 31st of each year. Additional guidance on submission of the FFR can be found in the grantee manual and will also be sent via email.

B: DETAILED BUDGET AND NARRATIVE

Attached