



Strategic Plan 2016-2021



Approved by the Board of Directors on October 26th, 2016

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Executive Summary

Community Action Partnership of Kern (CAPK) is the official anti-poverty agency for Kern County and has been working to provide an integrated network of services since 1965. One of more than 1,000 community action agencies nationwide, CAPK is one of Kern County's largest nonprofit 501(c)(3) corporations. Through a variety of programs and in collaboration with other community service agencies, CAPK helps participants pursue their educational goals, secure and retain employment, maintain adequate housing, receive medical services, obtain energy subsidy and weatherization assistance, encourages parent participation, counteracts hunger and malnutrition, provides child care and preschool education, and other personal and family development opportunities to build and achieve individual and family self-sufficiency.

CAPK embarked upon a strategic planning process to effectively guide agency efforts to transform its service area into an economically stable environment and centers of potential for all Kern County residents. As an initial step in the process, CAPK leadership confirmed the Vision and Mission of the organization. It also established guiding principles that all CAPK staff members strive to use when making decisions, interacting with others and conducting their day to day work.

Vision



At CAPK we envision a future where communities are economically stable centers of potential with abundant resources for all people

Mission



*Community Action Partnership of Kern shall **provide** and **advocate** for resources that will **empower** members of the communities we serve to be **self-sufficient**.*

Guiding Principles



Leadership

Commitment

Quality Service Delivery

Respect & Honor

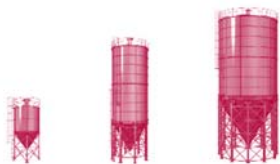
Communication

Following the affirmation of these foundational pillars of the agency, CAPK conducted a scan of the environment in which services are being provided. Organizational leadership completed a SWOT analysis within each facet of agency operations. Additionally, existing organizational documents and statistics regarding community characteristics were reviewed.

The results of the environmental scan led to the identification of five critical issues requiring action.

FAMILY

1. ORGANIZATION CURRENTLY FUNCTIONS IN PROGRAMMATIC SILOS.



CAPK programs are currently working in silos, impacting the organization’s ability to strategically deploy resources in a manner that helps it achieve its organizational vision and mission. This type of work environment leaves employees unaware of the comprehensive needs of the communities they serve and unable to connect the work they do to the larger anti-poverty goals of the organization. It also prevents families from accessing the full range of CAPK services in a manner that is streamlined.

COMMUNITY

2. COMMUNICATION EFFORTS ARE INADEQUATE.



Employees, key stakeholders, other community-based organizations, and the general public do not have adequate information about the spectrum of CAPK services or how the organization is structured. As a result, people who are eligible may not be receiving services, and misconceptions about the organization reduce opportunities to strengthen systems and to partner effectively.

3. ORGANIZATION DOES NOT PROACTIVELY ADVOCATE FOR POLICIES OR FUNDING.



External policies and funding don’t sufficiently support the ability of individuals (service recipients) to achieve self-sufficiency or the organization (CAPK) to adequately respond to community needs. Advocacy that has been conducted has largely been responsive to possible cuts, positioning the organization to consistently function in a survival mode.

AGENCY

4. ORGANIZATION SUFFERS FROM HIGH TURNOVER AND LOW MORALE.



The organization has struggled with workforce issues which stem from the size of the organization, the variety of different employee incentive structures (based on funding stream), and the lack of a strategic approach to talent management. The results are high turnover and low employee morale.

5. INSUFFICIENT ORGANIZATIONAL RESOURCES TO MEET COMMUNITY NEED.



Most CAPK services are dependent upon public and private funding, which is becoming more competitive and constrained, while the demand for services continues to increase. The organization does not have a proactive planning approach to diversifying its funding stream or a designated plan of action in the event that a major cut in funding were to occur.

Following the identification of critical issues, goals and objectives were developed to guide organizational efforts over the next 5 years.

FAMILY

Goal #1: CAPK will develop an agency-wide understanding of the needs of its priority populations and develop organizational goals that unify the efforts of programs throughout the agency.

- By June 2017 – Review and analyze the needs of our target populations.
- By March 2018 – Develop organizational goals and shared outcomes among CAPK programs.

Goal #2: CAPK will establish a system so that individuals can easily access the full spectrum of CAPK services.

- By December 2019 – Establish a single point of entry for all CAPK services.

COMMUNITY

Goal #3: There will be a general understanding of CAPK which drives people to access and support the efforts of the organization.

- By September 2017 – Establish a communications plan that directs how CAPK will proactively communicate with its employees, the public, partner agencies, and key community stakeholders.
- By December 2017 – Implement internal communication activities to support knowledge transfer.
- By December 2016 – Implement external communication activities to increase awareness of and support for CAPK among all community stakeholders (clients, partners, funders, etc.).

Goal #4: CAPK will actively advocate on behalf of issues affecting its target populations.

- By June 2017 – Track and respond to changes in local, state, and federal legislation affecting our service populations.
- By December 2017 – Proactively develop and implement an advocacy agenda.
- By March 2018 – Identify, formalize, nurture, and maintain relationships with key policy stakeholders.



Goal #5: CAPK will have an engaged and retained workforce.

- By June 2018 – Develop an organization-wide talent management plan.
- By June 2018 – Develop the internal systems necessary to recruit the best people and place them in the right positions.
- By June 2018 – Establish an onboarding process that positions new employees for success.
- By January 2019 – Create a consistently applied process for developing employees.
- By June 2019 – Establish a culture of talent appreciation that recognizes the contributions of all CAPK employees.
- By June 2019 – Create and share a succession strategy that will reward employees for advanced placement.

Goal #6: CAPK will develop a strategic financing framework to ensure it is prepared for the future and has an adequate understanding of its financial position.

- By September 2018 – Develop a long-range financial plan.
- By December 2018– Establish financial practices which provide CAPK with better budget flexibility.

This plan will be used as a management tool with progress reviewed monthly and updates established annually, as needed.



Introduction

Since 1965, Community Action Partnership of Kern (CAPK) has been working to provide an integrated network of services as the official anti-poverty agency for the county of Kern. One of more than 1,000 community action agencies nationwide, CAPK is Kern County's largest nonprofit 501(c)(3) corporation. Through a variety of programs and in collaboration with other community service agencies, CAPK helps participants pursue their educational goals, secure and retain employment, maintain adequate housing, receive medical services, obtain energy subsidy and weatherization assistance, encourages parent participation, counteracts hunger and malnutrition, provides child care and preschool education, and other personal and family development opportunities to build and achieve individual and family self-sufficiency.



Purpose of the Plan

CAPK has established this Strategic Plan to effectively guide its efforts to transform its service area into an economically stable environment and centers of potential for all Kern County residents. This document outlines the issues currently facing the organization as well as the plan to address those issues. It is not a business or financial plan, but rather a framework for making policy decisions, setting priorities, and most effectively allocating resources.

Organization of the Report

The report is comprised of six sections in addition to the executive summary and this introduction.

Organizational Overview: In this section, information is presented to provide a general understanding of CAPK, to include the vision and mission of the organization, current services, and recent organizational accomplishments.

Methods & Approach: This section outlines the methods and the approach to the strategic planning process through each phase of development.

Situational Analysis: In this section, the current reality for the residents of Kern County is described as well as what issues are facing CAPK as an organization, including internal strengths and areas to improve, external opportunities and threats.

Critical Issues: Critical Issues as identified through the situational analysis are prioritized and presented for action in this section of the report.

Strategic Plan Goals & Objectives: This section describes the short-term goals that the organization will embark upon between 2016 and 2021.

Evaluating & Updating the Plan: This section describes how the organization will measure and report on its success and lessons learned.

Organizational Overview

Strategic Framework

The promise of Community Action Agencies is to change people's lives, embodying the spirit of hope, and improving communities to make America a better place to live. Community Action organizations care about the entire community and are dedicated to helping people help themselves and each other. Community Action Partnership of Kern (CAPK) operates within this framework as well as its specific vision and mission as provided below.



CAPK has established a set of guiding principles that shape and influence the way in which we fulfill our mission. These principles guide the way we make our decisions and carry out our actions every day.

Leadership. We recognize that each of us leads by the examples we set. As leaders, we seek to find and offer solutions for the problems and challenges that emerge.

Commitment. We honor and uphold our commitments to this agency, our colleagues, and the children and families we serve.

Respect & Honor. We treat the families we serve and one another with respect and honor. We recognize that the individuality and uniqueness of each person makes this organization strong.

Quality Service Delivery. The degree to which each of us meets our responsibilities impacts the quality of work we produce and the services we offer. We define quality for our programs, evaluate program and agency effectiveness, and continually improve service delivery.

Communication. We communicate with families, colleagues, and the community in an open and clear manner that enhances understanding. We respect and protect confidentiality and hold ourselves to the highest professional standards.



Current Services Provided

CAPK services focus on empowering clients with the skills and support necessary to enable them to transition out of poverty and become self-sufficient providers for themselves and their family. Our current services structure includes a variety of programs aimed at increasing early childhood development, providing health and nutritional supports, and serving families, youths, and the community.

Head Start & State Child Development	Health and Nutrition Services	Community Services	Community Development
<ul style="list-style-type: none"> • Head Start • Early Head Start 	<ul style="list-style-type: none"> • Food Bank • Central Kitchen • Women, Infants and Children (WIC) • East Kern Family Resource Center (EKFRCC) • Migrant Childcare Alternative Payment Program (MCAP) • HIV Prevention & Testing 	<ul style="list-style-type: none"> • 211 Kern County • Energy • Volunteer Income Tax Assistance (VITA) 	<ul style="list-style-type: none"> • Friendship House Community Center • Shafter Youth Center

The graphic on the following page provides additional information about each service.

Head Start/State Child Development

Head Start provides high quality, early childhood education to children from prenatal to five years old through part-day, full-day and home-based options. The program takes on a holistic approach by not only addressing the needs of the child, but by teaching parents to become advocates and self-reliant providers for their children through its Parent Policy Council and Family Engagement programs. CAPK offers Head Start and Early Head Start throughout Kern County and Early Head Start in four San Joaquin County communities.



Central Kitchen prepares and delivers breakfast, lunches and snacks for all children enrolled in CAPK's Head Start/State Child Development programs. During the summer, Central Kitchen coordinates the Summer Food Services Program, providing free, nutritious meals to youths ages 18 years and under.

Central Kitchen

Women, Infants and Children (WIC)

The WIC program provides nutrition education, breast feeding support and food vouchers for families with infants, and children ages 0-5 years, and women who are pregnant, postpartum or breast-feeding. CAPK operates 21 WIC sites throughout Kern County, five locations in San Bernardino County, and a mobile clinics.

MCAP

MCAP is a voucher-based child care program that allows parents to choose the best option for their situation. The program enrolls migrant families in Kern, Kings, Madera, Merced, Tulare and Fresno Counties and assists families as they migrate throughout the state.



Volunteer Income Tax Assistance (VITA)

VITA offers free tax preparation and e-filing for low-to- medium income individuals and families. VITA also assists eligible clients to take advantage of the Earned Income Tax Credit (EITC), thereby increasing the amounts of their tax returns and boosting the local economy. All VITA services are provided through trained IRS-certified staff and community volunteers.

CAPK provides HIV prevention education and testing to at-risk clients in recovery at county methadone maintenance residential, and outpatient substance abuse programs. The program works to provide prevention education and HIV oral swab tests through 20 sites under the Kern County Mental Health Department's System of Care.

HIV Prevention & Testing

Food Bank



CAPK's Food Bank supports a network of over 100 partnering food distribution sites throughout kern County to provide food assistance to low-income families and individuals. The Food Bank also offers the Backpack Buddies program during the school year at several elementary schools to provide low-income students with nutritious, ready-to-eat food items for the weekends and school holidays.

East Kern FRC

East Kern FRC is the regional service center based in Mojave that assists individuals and families residing in eastern Kern County. The program focuses efforts on early intervention to prevent child abuse/neglect and preparing children to enter kindergarten.



211 Kern County

211 Kern is a 24/7 information and referral service that provides local residents with comprehensive information and linkage to community services. 211 Kern has a database of 1,500 social service agencies that is available to the public through the CAPK website.

Energy

The Energy program assists income-eligible Kern County residents with utility bill payment, free weatherization, and energy education, at no cost to the participant. Weatherization services include weather stripping, repair or replacement of windows and doors, heating/cooling appliances, stoves, and refrigerators, and more.



Friendship House

Friendship House, located in Southeast Bakersfield, serves children, adults, and families through after-school, summer and pre-employment programs, parenting classes, nutrition education, sports, gang prevention, access to social services and more.

Shafter Youth Center

The Shafter Youth Center provides educational and support services to children and adults in Shafter, including parenting classes, summer and after-school programs with a focus on nutrition, recreation, and healthy living.



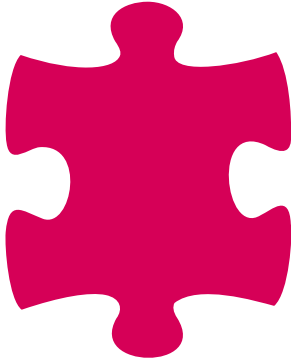
Adaptability to Changing Conditions

Since its inception over 50 years ago, CAPK has undergone considerable change, challenges, and growth. Five years ago, CAPK was faced with the realization that the agency had become stagnant, mired in silos, and operating under outdated policies and systems. CAPK's 2010-2012 Strategic Plan outlined objectives that would help the organization grow, become efficient, and meet the needs of its clients, employees, and other stakeholders.

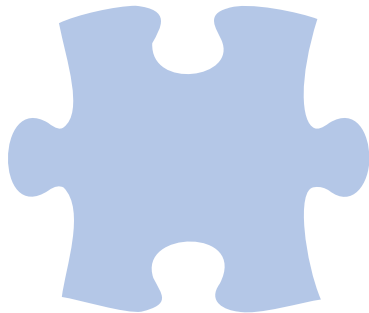
In 2011 CAPK leadership committed to initiate a Strategic Transformation to create a culture of innovation and operational excellence. Under the guidance of Wipfli, one of the nation's top accounting and business consulting firms, CAPK created a Guiding Change Coalition composed of members representing the Board of Directors, leadership, and staff from throughout the agency. The purpose of the Guiding Change Coalition was to identify immediate and future challenges to CAPK, identify training needs so that all management staff became effective leaders, and set short- and long-range goals to transform CAPK into a highly effective poverty fighting machine.

The Guiding Change Coalition developed a *Burning Platform* approach (Appendix D), which inspired the deployment of agency-wide activities to address the dire conditions that were impacting so many people in Kern County. The *Burning Platform* signaled that CAPK must and would transform into a more effective change agent, and that maintaining the status quo was no longer an option.

As a result of this mandate, the following initiatives were set into motion:



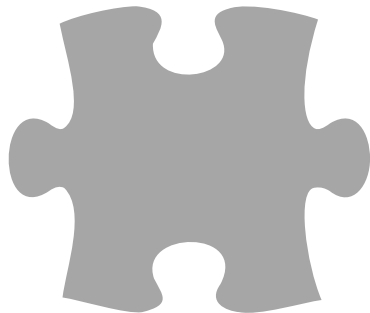
Commitment to a continuous state of improvement. To accomplish transformative goals, CAPK began a long-term effort to establish goals and change the culture of CAPK. The *Burning Platform* was shared with the Board of Directors, all employees, CAPK's partners, and stakeholders in the community. CAPK Division Directors are engaged in continuous training to improve communication and work effectively as a cohesive group.



Investment in professional development. With over 800 well-trained employees who are committed to the *Burning Platform*, CAPK becomes a tremendous force able to positively impact the Kern County community. Head Start employees regularly participate in extensive training; CAPK volunteers were provided with training on the many programs offered to the community; and specialized supervisory training was provided to all managerial staff. An Employee Recognition Committee has been created to identify strategies to acknowledge outstanding employees.



Improvement of systems and policies. Improved the agency's core capacity by upgrading or adopting reporting, tracking and operational systems and software and reorganizing divisions and functions to improve efficiency. CAPK installed new accounting, human resources, and payroll software; streamlined and reorganized the procurement process; reorganized the Information Technology unit and services; adopted an indirect cost rate; updated finance policies and procedures; and strengthened annual audit controls.

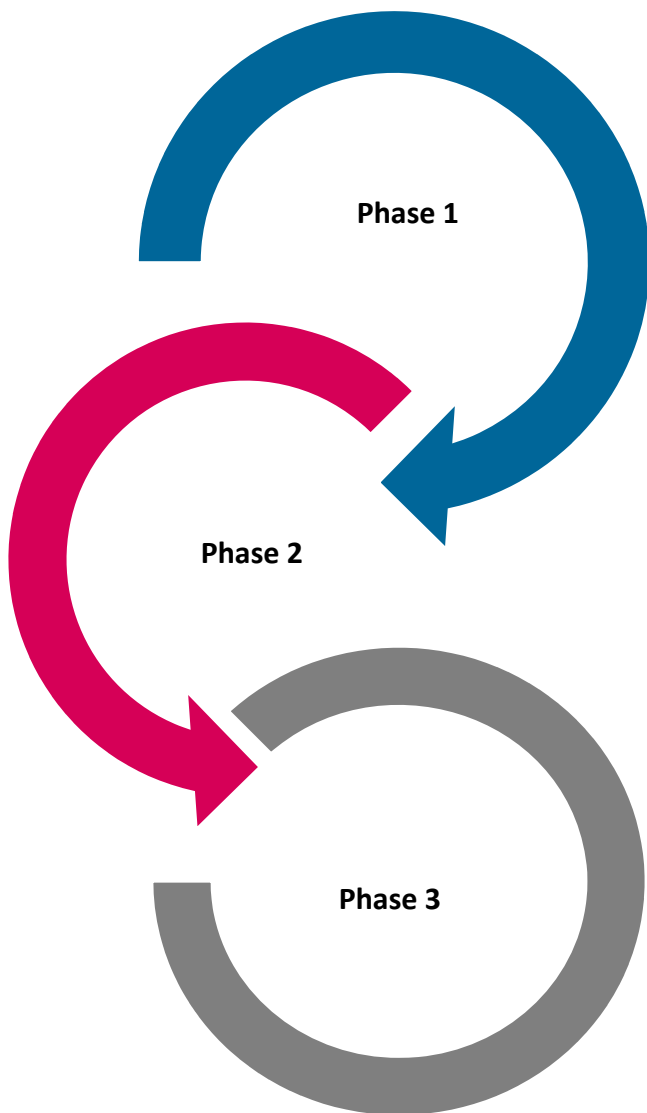


Improvement of communication. Improved CAPK's communication capabilities by assigning an Outreach and Advocacy Manager to direct both internal and external communications, which increases the dissemination and consistency of information to employees, clients, stakeholders, and the community.

The 2016-2020 Strategic Plan provides a map of forward-looking goals to guide CAPK on its path to becoming an innovative and effective anti-poverty agency.

Methods and Approach

To develop this strategic plan, a three-phased approach was used to include: Phase 1 – Assessment and Analysis; Phase 2 – Strategic Planning Session; and Phase 3 – Establishing the strategic plan document. The three phases took place between March and July 2016.



Phase I – Assessment and Analysis

Phase I involved the review and collection of data to prepare for strategic planning. Information related to the Strengths, Weaknesses, Opportunities and Threats (SWOT) associated with each organizational department was collected and analyzed. This was combined with existing data regarding community needs and synthesized to establish the situational analysis.

Phase 2 – Strategic Planning Session

A strategic planning session took place on April 18, 2016. During this session, the results of the situational analysis were reviewed and recent organizational accomplishments were identified. Using a blended planning approach (critical issues and goals-driven), a facilitated discussion occurred in which goals and strategies for future implementation were identified.

Phase 3 – Documenting the Plan

Information gathered and decisions made during the strategic planning session were then documented into the strategic plan document. The document was reviewed and feedback was provided by an outside consultant. The draft plan was reviewed by the CAPK board and made available for public comment prior to its adoption.

Situational Analysis

The following situational analysis was completed to assist the organization in understanding the current reality for the residents of Kern County as well as what issues are facing CAPK as an organization, including internal strengths, areas to improve, external opportunities, and threats.

CAPK has and will continue to identify opportunities to expand its service reach in communities outside of Kern County. When necessary, CAPK customizes its service approach when the service population and needs differ significantly than those of Kern County. This situational analysis includes a review of these communities' various needs appropriate to the level of services offered.

Kern County

Kern County is located in Central California at the southern end of the San Joaquin Valley and is the state's third-largest county by land area. At 8,172 square miles, Kern is larger than the states of Massachusetts, New Jersey, and Hawaii. Terrain varies dramatically within the county, from the valley lowlands, to the mountain peaks of the southern Sierra Nevada, to arid stretches of the Mojave Desert. Because of this geographic diversity, the county has a wide range of climates, determined largely by elevation and precipitation. Summer temperatures often reach over 100 degrees during the summer on the valley floor and in the Mojave Desert, and winter temperatures drop into the teens in the higher mountains.

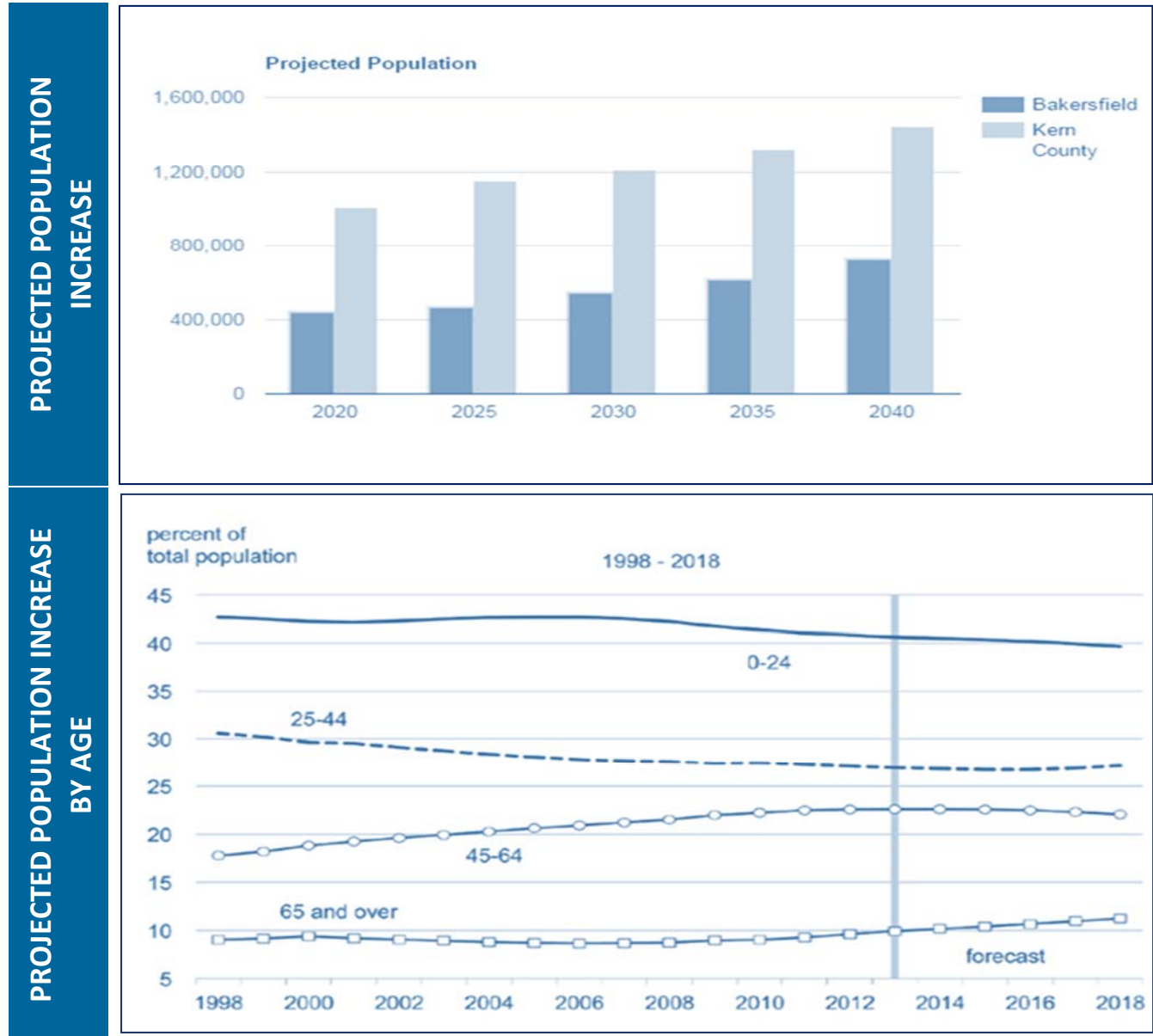
Demographic Information

The following table represents the demographics of Kern County (2010 U.S. Census Bureau). As identified in the table, over half (51.6 percent) of the population in Kern County are male and 48.4 percent are female. The largest age group in Kern County consists of adults between the ages of 35-54 years (25.9 percent), followed by children ages 0-14 years (25.1 percent), and adults between the ages of 20-34 years (22.4 percent). The majority of Kern County residents are White (59.5 percent), with the second largest group being Hispanic/Latino (49.2 percent).

Gender											
Male				Female							
Number (#) of Population		Percent (%) of Population		Number (#) of Population		Percent (%) of Population					
433,108		51.6		406,523		48.4					
Age											
0-14		15-19		20-34		35-54		55-59		60+	
#	%	#	%	#	#	#	%	#	%	#	%
210,052	25.1	72,493	8.6	187,385	22.4	216,979	25.9	43,233	5.1	109,489	13.1
Race/Ethnicity											
White		Black/African American		American Indian		Asian/Pacific Islander		Hispanic / Latino			
#	%	#	%	#	%	#	%	#	%		
499,766	59.5	48,921	5.8	12,676	1.5	34,846	4.2	413,033	49.2		

Population Projections

According to the Kern Economic Development Corporation, the population of Kern County is expected to reach 1,010,800 individuals by 2020. Between 2015 and 2020, it is anticipated that more than 136,536 people will become residents of the county, representing an annual average increase of 1.8%.¹



In 2013 children under the age of 18 represent a large percentage of the population in Kern County at an estimated 30% of the total county population, with 8.6% of children 0-5 years of age. At 30%, this is one of the highest percentages for that age group compared to other counties and much higher than the state with 24% of residents under the age of 18.

¹ Retrieved on April 13, 2016 from: <http://kedc.com/community-profile/demographics/demographic-forecast/>

County Snapshot

The *County Health Rankings* measure the health of nearly all counties in the nation. The data is compiled using county-level measures from a variety of national and state data sources. The data represented in the chart below are taken from the most recent data available (2004-2011). These measures are standardized and combined using scientifically-informed weights².

The table below provides a snapshot of how Kern County characteristics compare to the state of California as well as their placement in relationship to nationally established benchmarks. The information provided lends to an understanding that a number of co-existing factors are affecting Kern County residents. Families are struggling with financial insecurity as they suffer from high unemployment rates, low educational attainment, and inadequate social associations. The number of people reporting poor physical health as well as unhealthy behaviors (obesity and alcohol consumption) exceeds that of statewide averages and falls far from meeting national benchmarks. Additionally, a fifth of county residents are uninsured and are limited in their access to primary or dental care.

Community Characteristics		Kern County	California	National Benchmark
Quality of Life Rank: 51 of 57	Poor or Fair Health (percent of adults reporting fair or poor health)	21%	18%	12%
	Poor Physical Health Days (average number in past 30 days)	4.2	4.0	2.9
	Poor Mental Health Days (average number in past 30 days)	4.0	3.6	2.8
	Low Birth Weight (percent of live births with weight <2500 grams)	7%	8%	6%
Health Factors Rank: 51 of 57	Adult Smoking (percent of adults that smoke)	17%	13%	14%
	Adult Obesity (percent of adults that report a BMI >= 30)	29%	23%	25%
	Physical Inactivity (percent of adults that report no leisure time physical activity)	22%	17%	20%
	Excessive Drinking (percent of adults who report heavy or binge drinking)	19%	17%	12%
	Teen Birth Rate (per 1,000 females ages 15-19)	58	32	19
Clinical Care Rank: 50 of 57	Uninsured (percent of population < age 65 without health insurance)	20%	19%	11%
	Primary Care Physicians (ratio of population to primary care physicians)	2,030:1	1,270:1	1,040:1
	Dentists (ratio of population to dentists)	2,150:1	1,260:1	1,340:1

² Retrieved on April 8, 2016 from:

<http://www.countyhealthrankings.org/app/california/2016/rankings/kern/county/outcomes/overall/snapshot>

Community Characteristics		Kern County	California	National Benchmark
Social & Economic Factors Rank: 54 of 57	High School Graduation (percent of ninth grade cohort that graduates in 4 years)	82%	85%	95%
	Some College (percent of adults aged 25-44 years with some post-secondary education)	47%	62%	72%
	Unemployment (percent of population age 16+ unemployed)	10.4%	7.5%	3.5%
	Children in Poverty (percent of children under age 18 in poverty)	33%	23%	13%
	Income Inequality (ratio of household income at 80 th percentile to income at 20 th percentile)	4.9%	5.2%	3.7%
	Social Associations (number of associations per 10,000 population)	4.5%	5.8%	22.1%
	Children in Single-Parent Households (percent of children that live in single-parent household)	38%	32%	21%
	Violent Crime Rate (violent crime rate per 100,000 population)	561	425	59
	Injury Deaths (number of deaths due to injury per 100,000 population)	63	46	51



Community and Client Needs Assessment

CAPK conducted a community needs assessment in 2015 to identify the needs and resources available throughout Kern County. The assessment utilized a number of tools and data sources to include:

- A resident needs survey (214 responses)
- A community service provider survey (14 agency participants)
- Data from 211 Kern County call center
- Existing community health needs assessment information

Some of the major findings according to that needs assessment include:

Employment Readiness

- The resident survey, service provider survey, and health needs assessment indicate that many Kern County residents lack the training, specialized skills and/or education to prepare them for the workforce. Services such as employment counseling and training programs were identified as significant needs in the community.

Unemployment

- The resident survey, service provider survey, and health needs assessment indicate that unemployment is a major issue facing Kern County residents. Residents indicate the need for job opportunities and access to child care to support their ability to become employed.

Access to Health Care

- Both the service provider survey and the health needs assessment indicate that it is difficult for Kern County residents to access health care and behavioral health care services. Additionally, the resident survey indicates that the biggest health care concern is the lack of its affordability.

Basic Needs

- According to the 211 Kern County call statistics, and results from the community service providers survey, many low-income Kern County residents lack the most basic needs such as secure housing, utilities, food and clothing.

SWOT Analysis

Each division within CAPK and members of the Board were asked to identify the strengths, weaknesses, opportunities and threats (SWOT) facing the organization. CAPK, like all organizations, has a mix of strengths and weaknesses, affected by significant external pressures and internal factors. The SWOT analysis, presented below, is the result of a highly participatory process, and thus contains contradictory views, or differences of opinion and perception about the organization's current strengths, weaknesses, opportunities, and threats. The information provided is essentially a snapshot in time that is most useful as a short term reflection of perceptions and opinions. Its intended use was to identify opportunities to leverage, issues to address, and circumstances to anticipate throughout the development of the strategic plan.

Strengths:

The assets, resources, or capabilities that have the greatest positive impact on the success of the organization and its ability to achieve its mission.

- Staff are knowledgeable and committed to the service population.
- Board and executive leadership are strong.
- Programs have been flexible to changes in the environment.
- Organization is able to meet contractual obligations and has some systems in place to manage risk.
- Families receive high quality services.
- Organization is knowledgeable and responsive to the needs of families.
- Partnership with other service providers.
- Provision of services in rural and "hard to reach" populations where limited access exists.
- Long history of service to the community.
- Good contract compliance and strong relationships with funders.

Weaknesses:

The aspects of the organization that are considered to be important internal weaknesses—deficiencies in resource or capabilities, or other liabilities, that are hindering the ability of the organization to achieve its mission.

- Organization tends to operate in silos, focused on divisional objectives without understanding the connection to the broader mission.
- There are insufficient resources to support organizational activities (lack of funding, technology tools/capabilities, low staff resources, lack of appropriate facilities and supplies).
- The organization does not have a strategic approach to talent management, resulting in high staff turnover and low employee morale.
- There are not consistently applied communication efforts to ensure that knowledge is shared appropriately throughout the organization.
- Lack of a diversified funding stream leaves the organization at risk.
- The organization needs time to plan and organize its system to develop further efficiencies in its work processes.

Opportunities:

The external factors that offer a genuine opportunity to benefit the organization. This may include environmental factors that allow the organization to expand its services, or apply its capabilities to benefit a different part of the community.

- Opportunity to be a capacity builder for smaller nonprofit organizations throughout Kern County.
- Building alignment between our services/goals and other providers to increase partnerships, services, outreach efforts, expand best practices and improve funding opportunities.
- Opportunity to build upon the local, state, federal and private sector support for improvement in the areas of workforce development, education, health, and well-being.
- Opportunity to position the organization as a leader in discussions around poverty and how to eradicate it.
- Expansion of the geographic areas served.
- Use of social media/technology to create workplace efficiencies and increase our outreach efforts.

Threats:

The external conditions, trends, and other forces that could potentially impact the organization in some manner if not addressed.

- Lack of sufficient resources to respond to agency, family, and community needs.
- Reliance upon state and federal funding streams which are not always stable.
- Increasing competition related to funding.
- Local, state, and national politics and its impact on agency operations (e.g., transitional kindergarten).
- Lack of community awareness about CAPK and its role, responsibilities, and reach in the community amongst policy makers, stakeholders, and the general public. Perceptions associated with organization/name/brand can sometime act as a hindrance to efforts.
- Workforce issues: competition for workforce, lack of skills, etc.

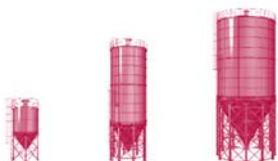
Division-specific SWOT information can be found in the Appendix C of this document.

Critical Issues

Five critical issues emerged from a review of the environmental scan, community needs assessments as well as the SWOT analysis. These issues were discussed and validated during the strategic planning session attended by CAPK leadership, Executive Staffing, and Board Members.

FAMILY

1. ORGANIZATION CURRENTLY FUNCTIONS IN PROGRAMMATIC SILOS.



CAPK programs are currently working in silos, impacting the organization's ability to strategically deploy resources in a manner that helps it achieve its organizational vision and mission. This type of work environment leaves employees unaware of the comprehensive needs of the communities they serve and unable to connect the work they do to the larger anti-poverty goals of the organization. It also prevents families from accessing the full range of CAPK services in a manner that is streamlined.

2. COMMUNICATION EFFORTS ARE INADEQUATE.



Employees, key stakeholders, other community-based organizations, and the general public do not have adequate information about the spectrum of CAPK services or how the organization is structured. As a result, people who are eligible may not be receiving services, and misconceptions about the organization reduce opportunities to strengthen systems and to partner effectively.

3. ORGANIZATION DOES NOT PROACTIVELY ADVOCATE FOR POLICIES OR FUNDING.



External policies and funding don't sufficiently support the ability of individuals (service recipients) to achieve self-sufficiency or the organization (CAPK) to adequately respond to community needs. Advocacy that has been conducted has largely been responsive to possible cuts, positioning the organization to consistently function in a survival mode.

4. ORGANIZATION SUFFERS FROM HIGH TURNOVER AND LOW MORALE.



The organization has struggled with workforce issues which stem from the size of the organization, the variety of different employee incentive structures (based on funding stream), and the lack of a strategic approach to talent management. The results are high turnover and low employee morale.

5. INSUFFICIENT ORGANIZATIONAL RESOURCES TO MEET COMMUNITY NEED.



Most CAPK services are dependent upon public and private funding, which is becoming more competitive and constrained, while the demand for services continues to increase. The organization does not have a proactive planning approach to diversifying its funding stream or a designated plan of action in the event that a major cut in funding were to occur.

COMMUNITY

AGENCY



Goals and Objectives

The critical issues, as described in the previous section, were used as the basis for developing the following goals and objectives for CAPK. These goals and objectives shall serve as a road map to focus CAPK's efforts over the next three to five years toward achieving results that promote self-sufficiency among families and the development of thriving communities. The plan guides limited staff resources at a strategic level and establishes a framework to assist CAPK in measuring progress toward meeting its goals and holding itself accountable for the work that it does.


CRITICAL ISSUE: ORGANIZATION CURRENTLY FUNCTIONS IN PROGRAMMATIC SILOS.

The Issue: CAPK programs are currently working in silos, impacting the organization's ability to strategically deploy resources in a manner that helps it achieve its organizational vision and mission.

Goal #1: CAPK will develop an agency-wide understanding of the needs of its priority populations and develop organizational goals that unify the efforts of programs throughout the agency.

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| <p>1.1 By June 2017 – Review and analyze the needs of our target populations.</p> |  | <p>Research and/or review current and past CAP reports for Kern County as well as other areas served, identifying trends and issues that affect priority populations.</p> |
| <p>1.2 By March 2018 – Develop organizational goals and shared outcomes among CAPK programs.</p> |  | <p>Develop organizational goals which tie program activities to the organization's mission. Develop shared outcomes among CAPK programs and share this information agency-wide.</p> |




Goal #2: CAPK will establish a system so that individuals can easily access the full spectrum of CAPK services.

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| <p>2.1. By December 2019 – Establish a single point of entry for all CAPK services.</p> |  | <p>Develop a leadership team to develop, implement, and refine a single point of entry into CAPK services, using CAP60.</p> |
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CRITICAL ISSUE: COMMUNICATION EFFORTS ARE INADEQUATE.

The Issue: Employees, key stakeholders, other community-based organizations, and the general public do not have adequate information about the spectrum of CAPK services or how the organization is structured.

Goal #3: There will be a general understanding of CAPK which drives people to access and support the efforts of the organization.


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| <p>3.1 By September 2017 – Establish a communications plan that directs how CAPK will proactively communicate with its employees, the public, partner agencies, and key community stakeholders.</p> |  | <p>Develop a Communications committee to establish a comprehensive communications plan which includes internal and external communication practices, tools, and techniques (ex: key messages.)</p> |
| <p>3.2 By December 2017 – Implement internal communication activities to support knowledge transfer.</p> |  | <p>Implement strategies for internal communications as specified in the communications plan.</p> |
| <p>3.3 By December 2016 – Implement external communication activities to increase awareness of and support for CAPK among all community stakeholders (clients, partners, funders, etc.).</p> |  | <p>Implement proactive external communication activities which may include newsletter distribution, press releases and community outreach events.</p> |





CRITICAL ISSUE: ORGANIZATION DOES NOT PROACTIVELY ADVOCATE FOR POLICIES OR FUNDING.

The Issue: External policies and funding don't sufficiently support the ability of individuals (service recipients) to achieve self-sufficiency or the organization (CAPK) to adequately respond to community needs.

Goal #4: CAPK will actively advocate on behalf of issues affecting its target populations.

- 4.1** By June 2017 – Track and respond to changes in local, state, and federal legislation affecting our service populations. 

Using resources such as Virtual CAP, CalCAPA, national CAP, and NASCSP, CAPK will track changes which may affect CAP agencies and consider action. CAPK will also respond to requests from partner agencies regarding letters of support for mission-aligned issues.
- 4.2** By December 2017 – Proactively develop and implement an advocacy agenda. 

Review and assess the policies and issues most important to target population, identifying areas in which CAPK will take proactive legislative action.
- 4.3** By March 2018 – Identify, formalize, nurture, and maintain relationships with key policy stakeholders. 







Implement key policy stakeholders and develop mechanisms and opportunities to increase understanding and support for CAPK efforts.



CRITICAL ISSUE: ORGANIZATION SUFFERS FROM HIGH TURN-OVER AND LOW MORALE.

The Issue: The organization has struggled with workforce issues which stem from the size of the organization, the variety of different employee incentive structures (based on funding stream), and the lack of a strategic approach to talent management. The results are high turnover and low employee morale.

Goal #5: CAPK will have an engaged and retained workforce.

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| 5.1 By June 2018 – Develop an organization-wide talent management plan. |  | Explore what positions are needed based on organizational and programmatic goals/objectives. Conduct a gaps assessment and identify top talent management goals. |
| 5.2 By June 2018 – Develop the internal systems necessary to recruit the best people and place them in the right positions. |  | Establish job descriptions, screening tools and recruitment strategies which are aligned with the talent management plan. |
| 5.3 By June 2018 – Establish an onboarding process that positions new employees for success. |  | Develop onboarding practices which includes orientation, training plan development, and access to peer support. |
| 5.4 By January 2019 – Create a consistently applied process for developing employees. |  | Establish a performance approval process and tools to ensure that each staff member's performance is regularly assessed and professional development plans are established. |
| 5.5 By June 2019 – Establish a culture of talent appreciation that recognizes the contributions of all CAPK employees. |  | Establish an Employee Recognition Committee to survey employees to identify their recognition preferences and develop a system which recognizes employees' efforts and their impact on the organization's success. |
| 5.6 By June 2019 – Create and share a succession strategy that will reward employees for advanced placement |  | Develop a strategy to identify talent within staff/volunteers and provides opportunities for growth and promotion. |

CRITICAL ISSUE: INSUFFICIENT ORGANIZATIONAL RESOURCES TO MEET COMMUNITY NEED.

The Issue: The organization does not have a proactive planning approach to diversifying its funding stream or a designated plan of action in the event that a major cut in funding was to occur.

Goal #6: CAPK will develop a strategic financing framework to ensure it is prepared for the future and has an adequate understanding of its financial position.

6.1 By September 2018 – Develop a long-range financial plan.



Explore funding needs, resources secured, and gaps based on current service delivery. Identify alternative funding mechanisms which may support addressing resource gaps. Also, develop a plan for responding to possible funding cuts.

6.2 By December 2018 – Build upon financial practices which provide CAPK with better budget flexibility.



Use the long-range financial plan as the basis for developing annual budgets. Also regularly use budget monitoring tools to ensure budgets are on track or whether adjustments are needed.



Evaluating and Updating the Plan

This plan will be used as a management tool with ongoing implementation, quarterly progress reviews, and updates established annually, as needed.

Ongoing implementation

Implementation of each goal will be driven by the strategy lead identified in the plan. Implementation efforts will be customized according to what works best for the people in each implementation team.

Implementation efforts will begin in September 2016.

Quarterly review

A review of each active strategic goal/objective will occur on a quarterly basis during strategic plan implementation meetings. Status updates will be prepared by strategy leads with the expectation that information shared will be disseminated throughout the organization. This structure will ensure that staff at every level, and within each division/program of the organization, are informed of progress being made, and will offer an opportunity for those not directly associated with objective activities to provide assistance and input.

The quarterly reviews will be documented to capture the accomplishments and lessons learned throughout the process.

Quarterly reviews will begin in January 2017.

Annual Update

CAPK will conduct a comprehensive annual review of the strategic plan.

- Goals and objectives will be updated as needed based on achievement, changing circumstances, and staff feedback.
- Revisions to the strategic plan will be presented to the board for review and adoption.
- The updated strategic plan will be distributed to internal and external stakeholders.

Annual reviews will take place during the summer of every year covered by this plan.

Annual Implementation Plan

An annual implementation plan will be established by CAPK leadership to guide the activities associated with each year covered by this strategic plan document.

The implementation plan will be established following the annual update and will be completed by September 1 of each year covered by this plan.

Appendix

Appendix A: Implementation Plan

<p>Family Critical Issue: Organization currently functions in programmatic silos. CAPK programs are currently working in silos, impacting the organization’s ability to strategically deploy resources in a manner that helps it achieve its organizational vision and mission.</p>			
<p>Goal 1. CAPK will develop an agency-wide understanding of the needs of its priority populations and develop organizational goals that unify the efforts of programs throughout the agency.</p>			
Objective	Strategies	Timeline for Completion	Lead Staff Members
<p>Objective 1.1: Review and analyze the needs of our target populations.</p>	<p>1.1.1 Identify and prioritize needs of our target population by using information contained in the CAPK 2016-2017 Community Action Plan (CAP).</p>	September 2016	Community Development Division
	<p>1.1.2 Conduct annual surveys of CAPK clients, employees, partner agencies, and the general public to identify and prioritize agency and programs’ needs.</p>	March 2017	Community Development Division/Division Directors
	<p>1.1.3 Key information collected in Strategies 1 and 2 above will be shared with all agency employees.</p>	June 2017	Community Development Division/Division Directors
	<p>1.1.4 Train all staff on agency mission, vision, values, and programs/services. Also use various modes of communications (e.g., videos, meetings, printed materials, site visits, etc.).</p>	December 2017 and ongoing thereafter	Division Directors/Human Resources Staff/Outreach & Advocacy Staff
<p>Objective 1.2: Develop organizational goals and shared outcomes between CAPK programs.</p>	<p>1.2.1 Use National Performance Indicators (NPIs) as a basis to establish organizational goals and how each program contributes to meeting the goals (i.e., client self-sufficiency, improved living conditions, low-income people are stakeholders, community-wide partnerships, increased agency capacity, and strengthening families and supportive environments).</p>	<p>Phase 1: March 2017 Phase 2: March 2018</p>	Division Directors

<p>Objective 1.2: (CONT) Develop organizational goals and shared outcomes between CAPK programs.</p>	<p>1.2.2 The agency-wide task force (identified in Objective 2.1.1 below) will identify tools or software (e.g., CAP60) that will enable the various software used by CAPK programs (e.g., ChildPlus) to “talk to each other” so that all client data can be shared within the agency. The task force will also work with the IT unit to recommend, secure, and implement appropriate tools or software.</p>	<p>December 2019</p>	<p>Division Directors/IT Unit</p>
<p>Goal 2. CAPK will establish a system so that individuals and families can easily access the full spectrum of CAPK services.</p>			
Objective	Strategies	Timeline for Completion	Lead Staff Members
<p>Objective 2.1: Establish a single point of entry for all CAPK services.</p>	<p>2.1.1 Establish an agency-wide task force to develop central intake and case management systems to ensure clients receive holistic, integrated, and seamless services that meet their needs and provide follow-up services. The task force will be called the CAPK Intake Committee. The committee will gather information about data collection practices, software used, data export capability, data security requirements, ability to link database systems, and determine the impact of future system upgrades.</p>	<p>December 2016</p>	<p>Division Directors/IT Unit</p>
	<p>2.1.2 The CAPK Intake Committee will determine the various methods of data acceptance during the intake process (in person, phone, online, other) and the initial universal questions.</p>	<p>December 2016</p>	<p>Division Directors</p>
	<p>2.1.3 The CAPK Intake Committee, with the help of CAPK IT, will determine the base level of family data that can be shared with other CAPK programs.</p>	<p>December 2016</p>	
	<p>2.1.4 To the extent feasible and practical, CAPK will implement a Central Intake system by the end of 2019.</p>	<p>December 2019</p>	

Community

Critical Issue: Communication Efforts are Inadequate.

Employees, key stakeholders, other community-based organizations, and the general public do not have adequate information about the spectrum of CAPK services or how the organization is structured.

Goal 3. There will be a general understanding of CAPK which drives people to access and support the organization’s efforts.

Objective	Strategies	Timeline for Completion	Lead Staff Members
<p>Objective 3.1: Establish a communications plan that directs how CAPK will proactively communicate with its employees, the public, partner agencies and key stakeholders in the community.</p>	<p>3.1.1 Maintain existing external communications efforts.</p>	<p>Ongoing</p>	<p>Outreach & Advocacy Manager/Division Directors/Program Managers</p>
	<p>3.1.2 Develop a customized communications plan (internal and external) for CAPK (using Virtual CAPK’s online resources), and share with all CAPK employees and Board Members.</p>	<p>September 2017</p>	<p>Outreach & Advocacy Manager</p>
	<p>3.1.3 Assess the structure of internal resources tasked with implementing the communications plan and make any adjustments needed to ensure appropriate implementation, e.g.:</p> <ul style="list-style-type: none"> a. Respond in a more focused way to the needs of the various programs; b. Interact with the various program outreach teams to strategize and roll out a more cohesive branding strategy considering the individual programs and their place within the CAPK umbrella; c. Look for or access new opportunities for outreach, including testimonials from clients and staff); d. Implement an employee recognition committee to acknowledge various employees’ milestones (anniversary dates, accomplishments, etc.) 	<p>September 2016</p>	<p>Executive Director/HR Director/Outreach & Advocacy Manager</p>

Objective 3.2: Implement internal communication activities to support knowledge transfer.	3.2.1	Maintain use of existing internal communications efforts.	Ongoing	Outreach & Advocacy Manager/211 Program Manager
	3.2.2	Schedule time during staff professional development meetings for representatives from each CAPK program to share the purpose and new projects each program has.	September 2017 and ongoing thereafter	
	3.2.3	Continue holding monthly joint Managers/Directors meetings to provide a forum for sharing of information.	June 2016 and ongoing thereafter	Executive Director/Division Directors/Program & Support Managers
	3.2.4	Revamp CAPK's Intranet so that: <ul style="list-style-type: none"> a. It is a user-friendly and interactive information hub for employees; b. It is easy to use for a number of administrators/editors who will be empowered to post and update useful information from their own departments designed to facilitate communications and work efficiencies for all; c. The upkeep thereof is a SHARED responsibility for the sake of continuity and the safeguarding of agency information (contingency planning). 	September 2017	Division Directors/Program & Support Managers
	3.2.5	Create a new employee orientation video designed to introduce the various programs of CAPK to employees as they are on-boarded.	December 2016	Outreach & Advocacy Manager/HR Director
Objective 3.3: Implement external communication activities to increase awareness of and support for CAPK among all community stakeholders (clients, partners, funders, etc.).	3.3.1	Develop communications content items (include press releases, letters to the editor, and human interest stories) to share with external audiences.	December 2016	Outreach & Advocacy Manager
	3.3.2	Identify and attend networking events throughout CAPK's service area.	September 2016 and ongoing thereafter	Division Directors/Program Managers & Outreach Teams
	3.3.3	Use social media to increase awareness of CAPK's programs, i.e., launch Facebook Page for East Kern Family Resource Center as a viable resource for CAPK information in East Kern County.	September 2016	Health & Nutrition Division Director/EKFRC Site Supervisor/Outreach & Advocacy Manager

Community

Critical Issue: Organization does not proactively advocate for policies or funding.

External policies and funding don't sufficiently support the ability of individuals and families (service recipients) to achieve self-sufficiency or the organization to adequately respond to community needs.

Goal 4. CAPK will actively advocate on behalf of issues affecting its target populations.

Objective	Strategies	Timeline for Completion	Lead Staff Members
<p>Objective 4.1: Track and respond to changes in local, state, and federal legislation affecting our service populations.</p>	<p>4.1.1 Identify mechanisms within National CAP, NASCSP, and CAPLAW to track legislation, policies, and initiatives that affect CAP agencies.</p>	<p>March 2017</p>	<p>Executive Director/ Community Development Division Director</p>
	<p>4.1.2 Actively participate within CalCAPA's Legislative Committee to identify national and state legislations, regulations, and initiatives that affect California CAPs.</p>	<p>June 2017</p>	
	<p>4.1.3 Monitor local legislations or regulations that affect our service population.</p>	<p>June 2017</p>	
	<p>4.1.4 Assign staff to respond to legislation and regulations that affect CAPs and our service population.</p>	<p>June 2017</p>	
<p>Objective 4.2: Pro-actively develop and implement an advocacy agenda.</p>	<p>4.2.1 Assign staff to spearhead the development of a special Advocacy unit.</p>	<p>June 2017</p>	<p>Executive Director/ Community Development Division Director/Outreach & Advocacy Manager</p>
	<p>4.2.2 Develop a business plan for the Advocacy unit, identifying staff, resources, strategies, and advocacy goals for CAPK.</p>	<p>September 2017</p>	
	<p>4.2.3 Establish priorities and implement CAPK's Advocacy agenda.</p>	<p>December 2017</p>	

Objective 4.3: Identify, formalize, nurture, and maintain relationships with key policy stakeholders.	4.3.1 Identify local, state, and federal policy stakeholders and research how they impact the work of CAPK and our service population.	September 2017	Executive Director/ Community Development Division
	4.3.2 Develop individual strategies to recruit, inform, and/or educate stakeholders. Prepare presentation materials for in-person visits to policy stakeholders. Develop monthly or bimonthly schedule to correspond individually to elected officials and feature elected officials in CAPK newsletters.	March 2018	Executive Director/ Community Development Division Director/Outreach & Advocacy Manager
	4.3.3 Schedule in-person meetings with stakeholders to discuss the importance of collaboration and how it is an effective strategy in meeting the needs of the people we serve. Maintain annual calendars to meet regularly with each stakeholder.	March 2018	

Agency Critical Issue: Organization suffers from high turnover and low morale. The organization has struggled with workforce issues which stem from the size of the organization, the variety of different employee incentive structures (based on funding stream), and the lack of a strategic approach to talent management. The results are high turnover and low employee morale.			
Goal 5. CAPK will have an engaged and retained workforce.			
Objective	Strategy	Timeline for Completion	Lead Staff Members
Objective 5.1: Develop an organization-wide talent management plan.	5.1.1 Begin with a critical review of current positions; evaluating positions with an emphasis on scope of work, balance of work load, and the end product being a revised/final organizational chart. Divisions review grant’s scope of work, performance standards and other regulations to determine and develop positions, with appropriate job descriptions to best accomplish the task. Revise organizational structure to efficiently accomplish the mission of the agency.	April 2017	Division Directors
	5.1.2 Job description review that brings consistency in format, an expectation that follows a “position not person” mentality , qualifications, wage analysis, requirements for testing	June 2017	Division Directors
	5.1.3 Provide revised job descriptions to each Division Director who then signs off for finalization.	September 2017	Division Directors
	5.1.4 Talent Management Plan: maintain, regularly evaluate, follow same process for new positions.	Annually June 2018 June 2019 June 2020 June 2021	Division Directors

Objective 5.2: Develop the internal systems necessary to recruit the best people and place them in the right positions.	5.2.1	Develop an efficient ADP electronic application system inclusive of an integrated online recruitment method for web-based sites such as: EDJOIN, Indeed, etc. The system would include an electronic basic skills testing based on position requirements and data gathering capability to assist in the sharing of applicants' qualifications to recruit for other open positions throughout the agency.	June 2018	Human Resources Division
	5.2.2	Evaluate screening process of applications to ensure consistency for all recruited positions. Applications would be screened for meeting the minimum qualifications for education and level of experience; being reviewed by HR and program management.	June 2018	Human Resources Division
	5.2.3	Evaluate and revamp the current interview process. The interview process elicits specific information that will determine which candidate is most qualified to accomplish the scope of work of the position. The interview process will be based on the needed competencies specific to each position. These competencies will be based on the job descriptions developed to ensure that the scope of work dictated by each grants is efficiently and effectively accomplished.	June 2018	HR/Attorney/Focus Groups/Division Directors
	5.2.4	Create position-specific electronic competency testing to assist in determining qualifications of applicants.	June 2018	Division Directors
Objective 5.3: Establish an onboarding process that positions new employees for success.	5.3.1	Develop "new" CAPK orientation process. The orientation process should be the first stepping stone to establishing the culture of the agency. Orientation should instill pride in the agency and emphasize the privilege it is to be able to assist in the furtherance of our mission, as well as completion of required information and documentation needed for employment.	June 2018	Human Resources Division
	5.3.2	Division-level Orientation: basic expectations of position, training plan orientation, peer resources.	June 2018	Division Directors
	5.3.3	Monthly CAPK Training: safety, program overview.	June 2018	Division Directors

Agency Critical Issue: Organization suffers from high turn-over and low morale. The organization has struggled with workforce issues which stem from the size of the organization, the variety of different employee incentive structures (based on funding stream), and the lack of a strategic approach to talent management. The results are high turnover and low employee morale.			
Goal 5. CAPK will have an engaged and retained workforce. (CONT.)			
Objective	Strategy	Timeline for Completion	Lead Staff Members
Objective 5.4: Create a consistently applied process for developing employees.	5.4.1 Division/Position 6 Month Training Plan development for new hires and EEs entering into a new position to include: Civility Training, retention testing, follow up plan, and an auditing or compliance system to ensure managers are monitoring the success of the training. Develop written training plans for 6 month introductory period. All training plans need to be specific to position with documented timelines and follow up to ensure that all employees receive training to be competent in the essential functions of their position. Management accountability to ensure the completion of all training plans on a consistent manner at all levels of employment.	January 2019	Division Directors
	5.4.2 Develop Performance Evaluation tools based on needed competences of each position. Develop calibration methods that establish constancy in the evaluation of employee performance. Develop supervisorial accountability to ensure all employees are fairly evaluated (goal driven/non-subjective) and delivered in a timely manner.	January 2019	
	5.4.3 Develop an Employee Feedback Survey to monitor training effectiveness, EE retention, and any needed revisions.	January 2019	

Objective 5.5: Establish a culture of talent appreciation recognizes the contributions of all staff.	5.5.1	Establish and Employee Recognition Committee to support a Recognition Program for improved EE morale.	April 2019	Division Directors
	5.5.2	Develop an Incentive/Reward System that holds an intrinsic in value for EEs and encourages camaraderie amongst the team.	April 2019	
	5.5.3	Establish and issue a feedback mechanism to identify any shifts in organizational culture related to talent appreciation.	June 2019 and annually thereafter	
Objective 5.6: Create and share a succession strategy that will reward employees for advanced placement.	5.6.1	Identify potential through tracking/documenting EE evaluations with "Above Standard" ratings to receive advantages in promotion.	June 2019	Division Directors
	5.6.2	Introduction to preferred positions for cross training that involves evaluating education requirements and strategies to reach goals of promotion (Professional Growth Plan)	June 2019	
	5.6.3	Promotion: Policy to enable promoting successful candidates to be placed in positions without going through the interview process.	June 2019	

Agency Critical Issue: Insufficient organizational resources to meet community need. The organization does not have a proactive planning approach to diversifying its funding stream or a designated plan of action in the event that a major cut in funding were to occur.			
Goal 6. CAPK will develop a strategic financing framework to ensure it is prepared for the future and has an adequate understanding of its financial position.			
Objective	Strategy	Timeline for Completion	Lead Staff Members
Objective 6.1: Develop a long-range financial plan.	6.1.1 Identify all costs and projected revenue associated with ongoing support for each division within CAPK over a 5-year period of time.	December 2017	Finance Division/Division Directors
	6.1.2 Develop a formal, comprehensive cost/benefit analysis for all expansion/capital projects, to include initial costs, ongoing maintenance budgets and potential benefits/revenue.	December 2017	Finance Division/Division Directors
	6.1.3 Combine data collected in strategies 6.1.1 and 6.1.2 to develop a 5-year projected revenue and anticipated expense financial plan framework.	March 2018	Finance Division/Executive Director
	6.1.4 Develop written guidelines for implementing financial plan and addressing funding changes, near-term and long-term.	April 2018	Finance Division
	6.1.5 Identify and explore programs with an opportunity to develop enhanced and/or new revenue streams.	July 2018	Finance Division/Division Directors/Executive Director
	6.1.6 Establish a robust committee to develop opportunities to generate \$1MM in the discretionary fund as an initial tier goal.	September 2018	Finance Division/Division Directors/Executive Director

Objective 6.2: Build upon financial practices which provide CAPK with better budget flexibility.	6.2.1	Provide training to managers and/or designees to facilitate (program, division) budget development utilizing the financial plan.	June 2018	Finance Division/Division Directors
	6.2.2	Create a formalized process for budget adjustments.	June 2018	Finance Division
	6.2.3	Perform quarterly reviews of budget to actuals, making necessary changes and reporting to the CAPK board.	December 2018 and quarterly thereafter	Finance Division/Division Directors

Appendix B: CAPK Community Needs Assessment 2015

The CAPK Community Assessment for the 2016-2017 CAP Report consists of a combination of the following activities to provide a review of the needs and resources within the agency's service area.

- Community and Resident Needs Surveys;
- Participation in other agencies' needs assessments, including the City of Bakersfield Consolidated Plan and Kern County Consolidated Plan;
- Evaluation of unmet needs from the 211 Kern County helpline program; and
- Collection of poverty and demographic data.

Community and Client Needs Surveys

CAPK developed and distributed Community Needs Surveys in English and in Spanish for Kern County residents and public and nonprofit service agencies. These surveys were created and made available through SurveyMonkey.com, an online survey tool that creates surveys, collects responses, and analyzes data as well as in paper form for those who do not have computer access. Paper survey responses were manually entered into SurveyMonkey.com for analysis.

The purpose of the survey was to provide a snapshot of residents' opinions regarding poverty, their personal socioeconomic conditions, programs and services recently accessed, and perceived needs in the future. The survey consisted of multiple-choice questions which measured the level of needs for family, youth, and community services, health and nutrition services, employment services, and early childhood education services. The community needs survey was made available to residents and social service agencies throughout the county, but the instrument was not designed to collect a statistically significant sampling of the agency's service area population.

Survey Distribution Methodology

During the period April 29, 2015, to May 8, 2015, the online surveys were promoted via CAPK's Web site, Facebook page, and e-mail blasts to CAPK employees, partner agencies, volunteers, local policymakers, and other residents. For the full survey and results, see Appendix A.

Resident Survey Summary Narrative

A total of 214 responses were received and analyzed. Surveys were available in English and Spanish. Availability of jobs, jobs programs, employment training, and basic educational opportunities are viewed by the majority of survey participants as priority community needs. Other priority needs include youth services, anti-gang programs, and nutrition and health education programs. Affordable health care and health insurance were among the primary health-related needs. The following is a summary of survey questions and priority need areas identified by respondents.

Poverty (Question #1): The highest percentage of survey respondents believe that the lack of job training or specialized skills is the primary cause of poverty in their community (23.9%). Of the 18

persons who wrote comments for “Other,” two felt that “All of the above” contributed to poverty and four stated that drugs were the primary cause. Eight people stated that the cause of poverty was due to personal characteristics of impoverished persons such as laziness or poor work ethic.

Employment (Question #2): Similarly, the highest percentage of survey respondents believe that the primary reason it is difficult to get a job in their community is that there simply are no jobs available (21.9%). Child care (20.8%) was the second reason cited. There were 22 written responses for “other.” Of those, 8 wrote in answers that were already in the selection such as child care or lack of training. Of the remaining 14 written responses, 9 people said that the question was not applicable to them or they had a job. There were three responses that implied that the reasons people did not have jobs was due to personal characteristics such as laziness or lack of work ethic.

Youth (Question #3): With respect to programs for young people, the highest percentage of respondents (35.6%) believed that jobs programs are the most needed.

Housing (Question #4): Both English and Spanish language respondents indicated that the change that would most improve housing would be more affordable rent or mortgage (51.6%).

Health (Question #5): In spite of the roll out of the Affordable Care Act/Covered California in 2013, the highest percentage of respondents to this question cited the lack of affordable health services/medicine as their greatest health concern (44.5%).

Public Services (Question #6): Employment services are viewed as the most important type of public service needed (30.6%).

Jobs/Employment (Question #7): The highest percentage of respondents (39.49%) indicated that skilled employment training programs (welding, air conditioning repair, and auto mechanics) are jobs/employment programs most needed.

Emergency/Basic Needs (Question #8): Survey participants were asked to identify the greatest priority needs (top two) that their families have had during the last 12 months. The priority needs with the greatest percentages were assistance with paying utility bills (40.1%) and help finding a job (24.9%).

Residence (Question #9): Of the individuals who responded to this question, 73% resided in metropolitan Bakersfield.

Race/Ethnicity (Question #10): Of the individuals who responded to this question, 4% were White, 8.8% were Black/ African American, and 45.1% were Hispanic or Latino (of any race).

Age (Question #11): The two largest age groups of respondents to this question were 30-40 (29%) and 50-65 (20%).

Gender (Question #12): Female survey respondents far outnumbered males, representing 79.9% of all survey participants who responded to this question. One response received was from a self-identified gender fluid individual.

Income (Question #13): The highest percentage of individuals who responded to this question had family incomes in the \$20,000-\$30,000 per year range (22.5%), and \$60,000+ per year (22%).

Table 1: Resident Survey Summary

Survey Question	Response with Highest %
1. What do you think is the main reason for poverty in your community?	Lack of job training or specialized skills (23.9%)
2. What is the main reason it is difficult for you or your family to get a job?	No jobs available (21.9%) Child care (20.8%)
3. What type of program is most needed for young people in your community?	Jobs programs (35.6%)
4. What change would most improve housing for you and your family?	More affordable rent or mortgage (51.6%)
5. What is the biggest health concern for you and your family?	Lack of affordable health services/medicine (44.5%)
6. What type of public services do you think your community most needs?	Employment services (30.6%)
7. What jobs/employment program do you think your community most needs?	Skilled employment training programs (39.5%)
8. During the last 12 months, which of the following have you or your family most needed (top2 most important needs.	Assistance with paying utility bills (40.1%)
9. In which community do you live?	Bakersfield (73%)
10. What is your racial/ethnic background?	White (44%); Hispanic or Latino (any race) (45%)
11. What is your age group?	30-40 (29%)
12. What is your gender	Female (79.9%)
13. What is your family's income per year?	\$20,000-\$30,000 per year (22.5%)

Agency Survey Summary

Of the 14 agencies responding to the Client Needs Survey, all served ages 18-30, 78.6% served ages 30-40, and 78.6% served ages 40-50. The largest percentage of agencies served families/individuals at all income levels (46.2%) and 0-\$20,000/year (46.2%) (Questions #10 & #11).

While it is recognized that there is no single cause of poverty, 37.3% of agencies that responded to Question #1 indicated that **insufficient education** is the primary cause of poverty for their clients. Of the agencies responding to Question #2, 46.2% believe that the most significant barrier to employment is **lack of training or specialized skills**, and 50% consider vocational skills programs to have the greatest impact on improving the lives of young people (Question #3). The majority of agencies (53.9%) believed that an **increased supply of affordable housing** would be the factor that would most increase the suitability/livability of housing for their clients (Question #4).

Regarding the most significant health obstacle for their clients (Question #5), 38.5% of the agencies responding believed that **affordability/accessibility to mental health services** was the greatest obstacle for their clients. With respect to the public services with the most beneficial impact on the well-being of clients (Question #6), 64.3% believe that **employment services** would create the most impactful. Of the agencies that responded to Question #7, 42.9% believed that **Employment Counseling Programs** would have the most impact, followed by **Skilled Employment Training Program** (35.7%).

In response to Question #8 regarding clients' two most frequently requested services during the last 12 months, the highest percentage of responses were **employment/job training (continuing education)** and **help finding a job** (42.9% each). Safe and affordable housing (35.7%) was the second highest percentage.

Table 2: Resident Survey Summary

Survey Question	Response with Highest %
1. Which of the following do you consider to be the primary cause of poverty in your community?	Insufficient education (64.3%)
2. Which of the following do you believe is the most significant barrier to employment for your clients?	Lack of training or specialized skills (46.1%)
3. What type of program do you believe has the greatest impact on improving the lives of young people in your community?	Vocational skills programs (50%)
4. What factor would most increase the suitability/livability of housing for your clients?	Increase supply of affordable housing (53.9%)
5. What is the most significant health obstacle for your clients?	Affordability/accessibility to mental health services (38.5%)
6. What type of public services would most improve the well-being of your clients?	Employment services (64.3%)
7. Which of the following jobs/employment programs would have the greatest impact for your clients?	Employment Counseling Program (42.9%)
8. During the last 12 months, which of the needs have been most requested by your clients? (Select the top 2 most frequently requested services)	Employment/job training (42.9%); Help finding a job (42.9%); Safe and affordable housing (35.7%)
9. Which communities does your agency serve? (Select all that apply)	Bakersfield (78.9%)
10. What age group(s) does your agency serve? (Select all that apply)	18-30 (100%); 30-40 (78.6%); 40-50 (78.6%)
11. If your agency provides public services to families/ individuals, what income level(s) are served? (Select all that apply)	0-\$20,000 (46.2%) All (46.2%)

Health Needs Assessments

CAPK staff participated in the countywide Healthy Kern Community Health Needs Assessment in October 2012. The assessment resulted in publication of the 2012/2013 Kern County Community Needs Assessment, which combines quantitative and qualitative information based on review of health and quality of life data and interviews with community leaders and representatives of local agencies. The main purpose of this report is to gain insight into current conditions and trends of various health indicators and to identify areas for improvement.

The 2012/2013 assessment is a collaborative effort of Delano Regional Medical Center, Dignity Health (Mercy and Memorial Hospitals), Kaiser Permanente, and San Joaquin Community Hospital. The 2012/2013 report is also linked to Healthy Kern County, which is a Web site designed to provide a one-stop source of nonbiased data and information about community health in Kern County. It is intended to help planners, policy makers, and community members identify issues and devise solutions. Healthy Kern County includes comprehensive local data, Healthy People 2020 Progress Tracker, news, informative articles, and a community activities calendar.

The top four priority areas identified in the 2012/2013 Kern County Community Needs Assessment include:

1. Obesity
2. Basic Needs: Poverty and Unemployment
3. Educational Attainment
4. Access to Health Care

The collaborative created a set of interview questions and obtained input from key stakeholders in the community to validate the top issues, identify gaps, and suggest evidenced- based and/or promising practices to address the issues.

Public Hearing

CAPK held a public hearing at its administrative offices on Wednesday, May 20, 2015, to provide an opportunity for members of the community to learn about Kern County's needs, the purpose of the Community Action Plan and its areas of focus, and to comment and provide input on the draft CAP in an open discussion format.

The following is a list of attendees (Appendix C, Sign in Sheet) and comments:

- Brady Bernhart
- Ana Vigil
- Frank Ramirez
- Dennis Hendrix
- Patricia Mallard
- Rosanna Esparza
- Ralph Martinez

Comment 1: CAPK would find oil and gas facilities disproportionately located where poverty exists. There is a negative impact to those in poverty from industrial operations. Children attending the Lost Hills Child Development Center are at risk from the close proximity of oil and gas operations. There is

no health clinic in Lost Hills and Omni Health couldn't find a doctor to serve the area. Consider approaching Paramount Farms for help recruiting medical services. CAPK should use the EPA GIS mapping system during the decision making process, it is greatly improved due to recent upgrades. Ensure translation of public documents when needed for non-English speakers (e.g., Spanish, Mixtec, Punjabi, and others).

Comment 2: Consider a program like Parents on a Mission.

Comment 3: Consider youth mentorship programs as one way to fill the gap to serve kids needing assistance through the education process or in job training programs.

Comment 4: Strengthen the partnerships with Clinica Sierra Vista, especially in the area of health services. There is a need for more intensive mentoring during the career readiness process.

211 Kern County Unmet Needs

The 211 Kern County program is a community referral telephone helpline. In 2014, 211 Kern documented 1,999 unmet needs from callers. Of those, the most calls for needs that weren't met were for Utility Service Payment Assistance. The top five unmet needs are in the table below:



Table 3: Top Five 211 Kern Unmet Needs, 2014

Need	Count	% of Total
Utility Service Payment Assistance	878	43.9
Rent Payment Assistance	419	21.0
Clothing	147	7.4
Food Pantries	140	7.0
Food Stamps/SNAP	80	4.0

"Client ineligible for services" was the most common reason that the need wasn't met (36.5% of the total unmet needs). This was followed by "no financial assistance available." The following table contains all the reasons needs weren't met.

Table 4: Reasons for 211 Kern Unmet Needs, 2014

Reason	Count	% of Total
Client ineligible for services	730	36.5
No financial assistance available	475	23.8
Client withdrew	236	11.8
No agency open at this time	211	10.6
Caller refused referral	119	6.0
No program found to meet need	75	3.8
Agency full waiting list	55	2.8
Other	48	2.4
No transportation	25	1.3
Agency resources depleted	12	0.6
Client has used all available services	6	0.3
Client cannot afford the service	1	0.1

Kern County Poverty and Key Indicators Compared to California

Population

As reported by the U.S. Census Bureau, in 2014 Kern County had an estimated population of 873,092. This figure represents a 1.4% increase over the estimated population of 861,164 for 2013. In comparison, the population of the state of California increased from 37,984,138 for 2013 to an estimated 38,340,074 for 2014.

In 2013 children under the age of 18 represent a large percentage of the population in Kern County at an estimated 30% of the total county population, with 8.6% of children 0-5 years of age. At 30%, this is

one of the highest percentages for that age group compared to other counties and much higher than the state with 24% of residents under the age of 18.

With respect to estimated population changes from 2013 to 2014 for incorporated cities within Kern County, only Tehachapi reported no population growth. As shown on the following table, most of the populations of other Kern County cities and communities had slight to moderate growth with McFarland showing the highest growth at 8.9%.

Table 5: Kern County City Population Estimates with Annual Percent Change, 2013-2014

Area	Total Population		Change (%)
	2013	2014	
California	37,984,138	38,340,074	0.9
Kern County	861,164	873,092	1.4
Arvin	20,037	20,226	0.9
Bakersfield	360,633	367,315	1.9
California City	13,197	13,276	0.6
Delano	52,134	52,591	0.9
Maricopa	1,169	1,180	0.9
McFarland	12,624	13,745	8.9
Ridgecrest	28,461	28,638	0.6
Shafter	17,096	17,461	2.1
Taft	8,936	8,942	0.1
Tehachapi	13,348	13,346	0.0
Wasco	25,793	26,159	1.4
Balance of County	307,736	310,213	0.8

Households and Families

According to the U.S. Census American Community Survey, in 2013 there were an estimated 12,460,542 households in the state of California with an average household size of 2.94 persons. Of all households in the state, 32.7% had children under the age of 18. By comparison, the estimated total

number of households in Kern County was 255,271 for the same period, with an average household size of 3.19. Of all Kern County households, 75.1% were families, and of these, 39.9% had (their own) children under the age of 18 years. Of all households, 22% have one or more persons 65 years and over. Nonfamily households in Kern County constituted 24.9% of all households and most of these reported were people living alone. Some of these were single head of households; however, many were households in which no one was related.

Grandparents

Multigenerational households continued to be prevalent as a household type in Kern County with an estimated 28,000 grandparents living with their grandchildren (under 18 years of age) in 2013. Of these grandparents, 34% also had financial responsibility for their grandchildren.

Native and Foreign Born

Of Kern County's 2013 population, 78.5% (665,865) were born in the United States, and 20.6% (174,673) were foreign born. Of the population who were born outside of the United States, 97.3% entered before 2010. Of the county's foreign-born population, 80.7% came from Latin America.

Language

Data for 2013 indicated that in Kern County, a large percentage (42.1%) of the population five years and older spoke a language other than English at home, and 18.1% reported that they spoke English less than "very well." Of the population that spoke a language other than English at home, 37.4% spoke Spanish. By comparison, 43.7% of California's population 5 years and older speak a language other than English at home, and 19.4% indicated they spoke English less than "very well." Of the population that spoke a language other than English at home, 28.8% spoke Spanish.

Geographic Mobility

In 2013, 80.4% of all persons 1 year and over in Kern County resided in the same house as they did in 2012, and 14.2% of those who lived in a different house, moved within the last year and from within Kern County, and 5% moved to Kern County during the last year from a different county in California.

Persons with Disabilities

Among the civilian noninstitutionalized population in Kern County in 2013, an estimated 11.8% reported a disability². The likelihood of having a disability varied by age, from 3.1% of people under 18 years old, 11.7% of people 18 to 64 years old, and 41.3% of those 65 and over. For the December 1, 2013, reporting cycle, there were 2,073 children ages 0-5 years who were enrolled in Special Education Programs in Kern County.

Poverty Guidelines

Guidelines for determining the number of people living in poverty in the U.S. are published annually by the Federal Register. Poverty guidelines are a simplified version of the federal poverty thresholds and

are used for administrative purposes such as determining financial eligibility for certain federal programs. They are issued each year in the *Federal Register* by the Department of Health and Human Services (HHS).

Table 6: Poverty Guidelines, 2015

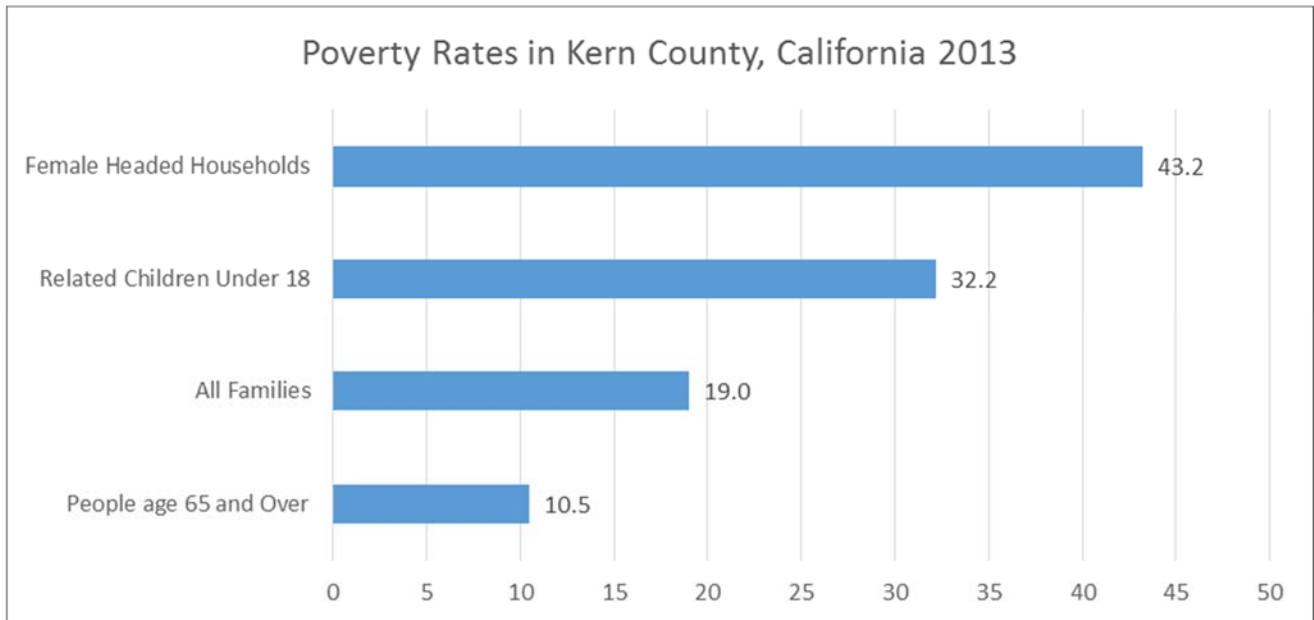
2015 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
Persons in Family/Household	Poverty Guideline
1	\$11,770
2	\$15,930
3	\$20,090
4	\$24,250
5	\$28,410
6	\$32,570
7	\$36,730
8	\$40,890
For families/households with more than 8 persons, add \$4,160 for each additional person.	

Poverty

For 2013, the estimated median household income in Kern County was \$48,552, up from the 2012 estimate of \$45,910, and \$12,542 less than the California median household income of \$61,094. In 2013, 19% of all families in Kern County had incomes below the poverty level, roughly the same as the 2012 estimate of 20%. Although rates for all families did not have a significant change, poverty rates increased by 3.8% for families with children under the age of 5 years. In 2013, 25.8% of all families with children under 5 years of age had incomes below the poverty level, compared to the 2012 rate of 22%. Poverty rate estimates for female-headed households was the highest of all groups living in poverty at 43.2%, followed closely by people with related children under age 18.

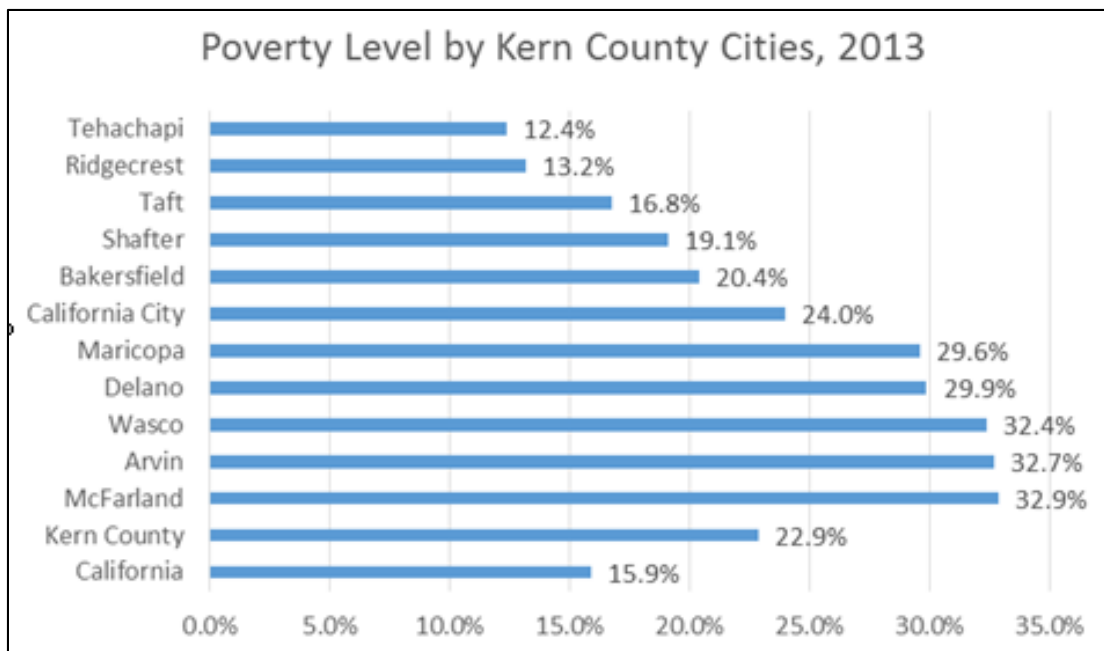


Figure 1: Kern County Poverty Rates by Group, 2013



Most of the cities in Kern County had higher poverty rates than the state of California. As shown in the figure below, the largely rural and agriculturally based cities of Arvin, McFarland, and Wasco experienced the highest level of poverty in 2013 and were well above the state level. Tehachapi, Ridgecrest, and Taft had the lowest rates in the county, with Tehachapi and Ridgecrest below the state poverty rates.

Figure 2: Poverty by Kern County Cities, 2013



Children and Poverty

Research shows that the more time children live in poverty, the more likely it is that they will remain in poverty as adults. According to research conducted by Columbia University's National Center for Children in Poverty, 45% of those who spent at least half of their childhood in poverty were still poor at age 35. This has significant implications when considering the poverty rates for Kern County children.

According to the U. S. Census Bureau, 2013 American Community Survey 1-Year Estimates, there were 28,786 children in Kern County ages 0-5 years whose income in the past 12 months was below the poverty level. There were slightly more females than males in this group.

CAPK GIS Maps

CAPK is currently using Geographic Information Systems (GIS) to map the location of families below poverty with at least one child under 5 years of age. These maps are derived from U.S. Census Bureau, American Community Survey estimates, found in Table B17010, U.S. Census ACS 2009-2013 estimates at the Block Group level. CAPK WIC and Head Start/Early Head Start locations are shown on the maps to better understand service areas and distances to each center.

Poverty and Race

In 2013 poverty rates for people who identify as Black or African Americans and Other Race groups were disproportionately higher than other racial groups. Of the 41,181 Black or African American residents in Kern County, 36.8% were living in poverty, and of the 107,343 Some Other Race group, 28,159 or 26.2% were living in poverty. For the Hispanic or Latino population, 119,570 of 406,288 or 29.4% were living in poverty.

Table 7: Poverty Status in Past 12 Months by Race/Ethnicity, 2013

Race/Ethnicity	Population	Population Below poverty	Percent Below Poverty
Black or African American	41,181	15,166	36.8%
Hispanic or Latino origin (of any race)	406,288	119,570	29.4%
Some other race	107,343	28,159	26.2%
American Indian and Alaska Native	9,462	2,439	25.8%
White	590,711	129,246	21.9%
Two or more races	29,545	6,359	21.5%
Asian	35,432	5,076	14.3%

Working Poor

The face of poverty in the United States has changed greatly over the last decade. In a report presented at the National Community Action Partnership Mega Trends Learning Cluster, *Inequality in America*, former Secretary of Labor Robert Reich discusses trends of those living in poverty in the U.S. According to Reich, as the median family income continues to drop, an estimated 65% of U.S. families live pay check to pay check. He goes on to say that a significant number of people in poverty are working but are unable to earn enough to lift themselves out of poverty. Reich also claims that about 55% of all Americans aged 25 to 60 years have experienced at least one year of poverty or near poverty (below 150% of the poverty line), and at least half of all U.S. children have relied on food stamps at least once in their lifetime.

This data is supported by the U.S. Bureau of Labor Statistics which reported that in 2011, 41.5% of those who were living in poverty in the U.S. were full-time employees (worked 50+ weeks a year). Americans living below poverty level reflect the following statistics:

- 12.8 million in labor force;
- 2.3 million did not work during the year;
- 10.6 million worked; and
- 4.4 million worked full time more than 50 weeks.

According to the California Budget and Policy Center, *Five Facts Everyone Should Know About Poverty*, the majority of families that live in poverty are working and that 67% of those families have one or more workers supporting them. The key reasons cited for working families remaining in poverty are a lack of good paying jobs and the low minimum wage. In Kern County, an estimated 22.1% of residents who are 16 years of age or over are employed and living in poverty.

Participation in Government Programs

A comparison of participation in government programs from 2012 to 2013, shows that an estimated 7.9% of all households in Kern County received Supplemental Security Income (SSI) in 2012, compared to 7% of households in 2013. For that same period, the percentage of households receiving cash public assistance remained unchanged at 7%. However, the percentage of recipients of Supplemental Nutrition Assistance Program (SNAP/food stamps) benefits more than doubled from 7% in 2012 to 14.7% in 2013. This increase may be due in part to increased outreach, education, and enrollment efforts throughout the state.

Industry and Employment

Kern County census data estimates for 2013 indicate that approximately half of Kern County residents were in the labor force, and of those, 43% were employed. When looking at employment by age, those who are age 45 to 54 have the highest rate of employment for their age group at 64.1%. The following table gives a breakdown of participation in the labor force and employment by age for the county.

Table 8: Kern County Employment by Age, 2013

Age	Participation in Labor Force	Employed
20 to 24 years	68.2%	53.7%
25 to 44 years	73.3%	63.5%
45 to 54 years	72.0%	64.1%
55 to 64 years	56.6%	51.6%
65 to 74 years	22.2%	20.3%
75 years and over	5.7%	5.0%
Total Average	49.7%	43.0%

An estimated 15.9% of the employed population worked in the agriculture and mining industries in 2013, which was a minor decrease over the 2012 rate of 16.4%. Employment levels in educational services, health care, and social assistance remained relatively unchanged at 19.6% during 2013. Employment in the retail trades industry remained unchanged from 10.5% in 2012, and the construction industry increased slightly to 6.1% from 5.7%.

Kern County is well known for its agricultural and oil industries. The county's total crop value in 2012 ranked Kern County second in both California and the United States. According to the Kern County Farm Bureau 2012 Kern County Agricultural Crop Report, Kern County's top five crops by gross value were grapes, almonds, milk, vegetables, and pistachios.

In addition to agriculture, Kern County leads the state in oil and natural gas production. According to the Greater Bakersfield Chamber of Commerce, Kern produces roughly 75% of California's in-state oil and nearly 58% of the state's total natural gas. California's top five oil-producing fields are located in Kern County, and three of those fields are ranked in the top ten producing oil fields in the nation. In fact, if Kern County were a state, it would rank 4th in the nation for oil production.

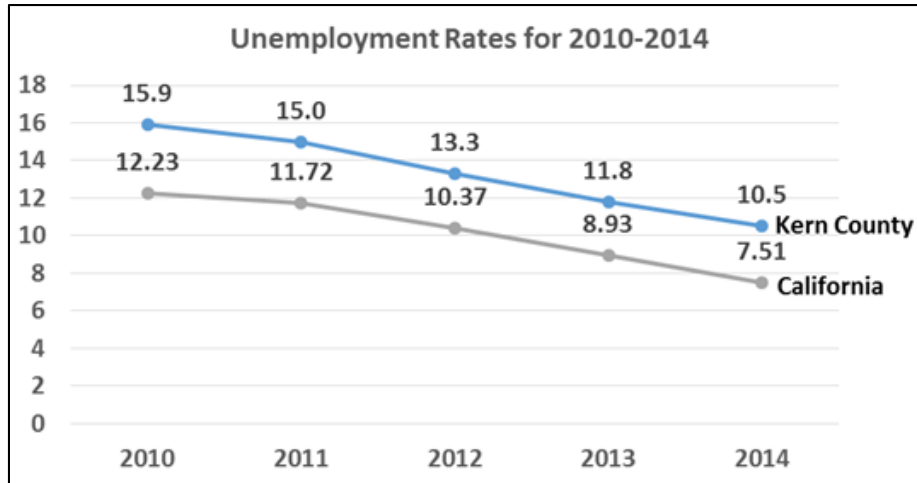
Consistent with its historically natural resource-based economy, Kern County is in the foreground of the alternative energy industry, becoming the site for some of the largest wind farms and solar arrays in the region. The ongoing development and operation of these facilities are expected to provide significant employment opportunities, especially in the eastern region of the county. As a result of the expansion in wind and solar energy, local colleges and vocational institutions are expanding programs in these fields of study.

Unemployment

Although the economy has improved over the last five years, Kern County continues to lag behind in employment compared to the rest of the state. Recent cutbacks in the oil industry and agriculture are

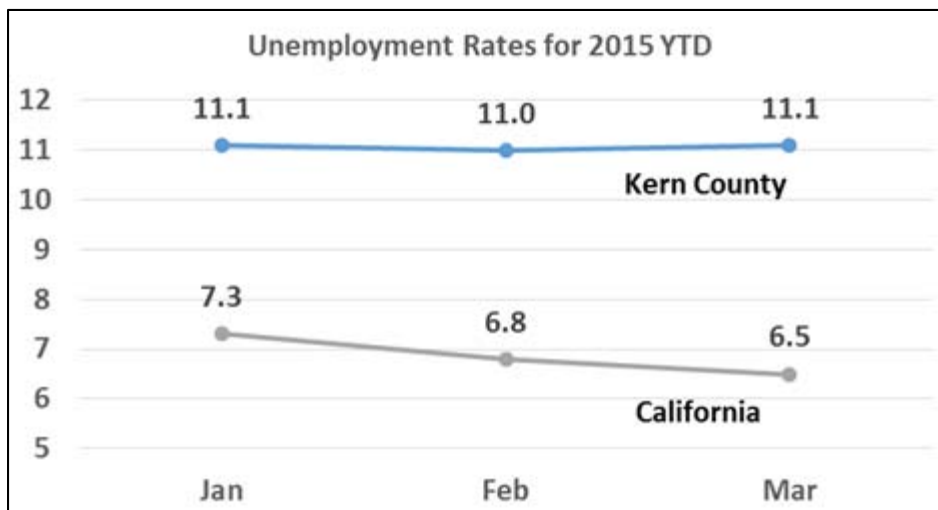
further impacting unemployment in Kern County. According to the California Employment Development Department, the annual average of the civilian workforce that was unemployed in Kern County for 2014 was 10.5%, compared to 7.51% for the state. Kern County unemployment rates are consistently higher than the state rates.

Figure 3: Kern County and California Unemployment Rate, 2010-2014



For 2015 the statewide economic improvements are not shared in Kern County. In January – March 2015, the average unemployment rate for Kern was 11.1% versus 6.9% for California. This may be due to economic issues affecting Kern’s largest industries, oil and gas production and agriculture, both of which have seen declines in prices and/or production. Due to the falling oil prices, oil companies have had instituted massive layoffs throughout the country, including Kern County. Also, California is in the midst of a severe drought which has adversely impacted the agricultural industry.

Figure 4: Kern County and California Unemployment Rate, YTD 2015



Educational Attainment

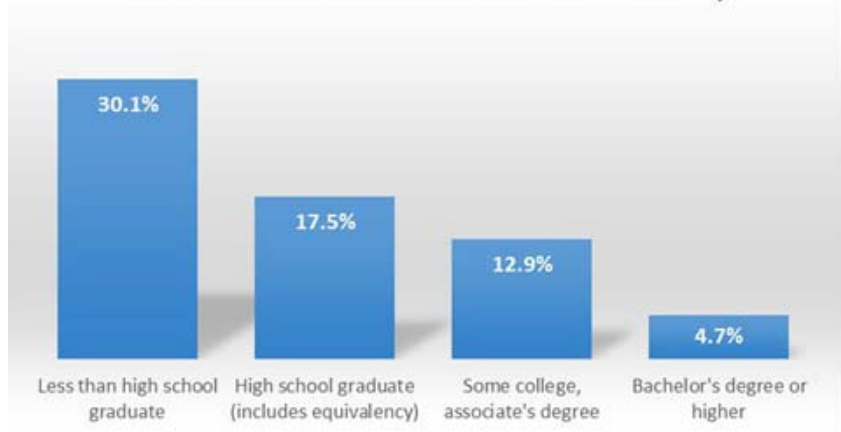
According to the U.S. Census Bureau, American Community Survey, estimated educational attainment rates for Kern County residents continue to be lower than for the state of California. In 2013, 72.4% of all residents in Kern County were high school graduates or higher, compared to 81.2% for the state. The following figures compare California residents’ educational attainment rates with Kern County residents 25 years and over.

Table 9: Educational Attainment Population over Age 25, 2013

Attainment	Kern	California
Less than 9th grade	14.5%	10.2%
9th to 12th grade, no diploma	13.0%	8.5%
High school graduate (includes equivalency)	26.5%	20.7%
Some college, no degree	23.9%	22.1%
Associate's degree	7.0%	7.8%
Bachelor's degree	9.9%	19.4%
Graduate or professional degree	5.1%	11.2%

The lack of higher educational attainment has far-reaching implications for Kern residents. According to an analysis by The PEW Charitable Trust, *Pursuing the American Dream; Economic Mobility across Generations*, a four-year college degree encourages upward mobility from the lower rungs of society and prevents downward mobility from the middle and top. The report states that about 47% of people who are raised in the bottom quartile of the family income ladder who do not get a college degree stay at that level compared to 10% who have earned a college degree. Also, about 39% of those raised in the middle-income ladder who don’t get a college degree move down, while 22% with a degree stay in the middle or advance. According to the U.S. Census Community Data for Kern County, 47.5% of those who are 25 years of age or older and have a high school diploma (includes GED) or less live in poverty compared to 4.7% with a bachelor’s degree or higher.

Educational Attainment and Poverty



Early Childhood Education

In the Assessment of Early Childhood Education in Kern County 2013-2014³², the capacity for Kern County early childhood services were as follows:

- 6,790 spaces in full day, full year nonsubsidized programs;
- 2,182 spaces in full day, full year subsidized programs;
- 322 spaces in part day non-subsidized enrichment programs;
- 4,334 spaces in part day subsidized enrichment programs;
- 7,660 spaces in licensed family child care homes;
- 14,953 spaces in before/after school programs; and
- 4,841 children of low-income families being served through voucher programs.

Early education for children has a great impact on their future by preparing them for success in school and life. However, there has been a decrease in early care for children. As reported by the Early Childhood Council of Kern, a 2014 report released by the California Legislative Analyst's Office, states that between 2008 and 2013, California lost 3,880 (or 10%) licensed family child care homes and 312 nonsubsidized child development centers. In addition, 224 subsidized providers didn't renew their California Department of Education contracts.

Housing

In 2013 there was a total of 285,895 housing units in Kern County. Of these housing units, 255,271 or 89.3% were occupied, and 30,624 or 10.7% were vacant. Of the 285,895 occupied housing units, 58.0% were owner-occupied and 42.0% were renter-occupied.

The demand for affordable housing in Kern County is greater than the available inventory. According to the U.S. Department of Housing and Urban Development, families who pay more than 30% of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation, and medical care¹¹. Based on the 2013 American Community Survey estimates, 30.6% of all Kern County homeowners with a mortgage paid 35% or more of their household income on housing. Renters paid an even higher percentage of their income on housing, with 47.1% paying 35% or more of their household income on rent.

The Housing Authority of the County of Kern indicates that there are 15,134 households in the Kern County and 5,324 households in the city of Bakersfield that have extremely low incomes or very low incomes and have a rent cost burden that exceeds 50% of their income. In addition, there are 28,885 "non-homeless, special needs" households that need housing in Kern County with another 8,837 in the city of Bakersfield. As of January 2013, there were 7,005 households on the Section 8 waiting list and 8,005 on the Public Housing waiting list.



Homelessness

The annual Homeless Census, conducted in a 24-hour period by the Kern County Homeless Collaborative, revealed that on any given night of 2015, there were an estimated 953 people living in homelessness in Kern County, and of those, 150 were children. According to this data, homelessness decreased 4% from 2014 and decreased 38% from 2007. The average length of time that people remain homeless in Kern County is 29 months, with people living in shelters averaging 17 months, which shows that people who access shelters have better housing outcomes than those who live unsheltered.

Substance abuse and health issues continue to be a concern for people living in homelessness with about 50% reporting substance abuse issues and 10% reporting a chronic illness. In addition, at least 20% report having a mental health condition and 60% of people with substance abuse or mental health issues live unsheltered.

One area of concern is the lack of available beds especially in rural areas of the county. There are only two emergency homeless shelters in metropolitan Bakersfield. One shelter is the Mission at Kern County which provides emergency shelter for 200 men, and the other is the Bakersfield Homeless Center, which provides emergency shelter to 170 men, women, and families. With the exception of emergency housing specifically for victims of domestic violence and their children, there are no emergency shelters in the rural areas of Kern County.

Food Insecurity

According to the United States Department of Agriculture, food insecurity occurs when there are reports of multiple indications of disrupted and reduced food intake. The California Food Policy Advocates reports that in 2012, 54% of adults in Kern County were food insecure compared to 42% for the state. The Food Research and Action Center's (FRAC) Food Hardship in America 2012 Report identified Bakersfield as first among the 100 largest metropolitan cities in the U.S. for food insecurity. According to the report, 26.7% of respondents in Bakersfield said they had experienced difficulties feeding themselves or their family. Food inflation was another major factor identified by the authors as contributing to food hardship. The overall inflation rate stayed under control, but the government's cheapest hypothetical diet, the Thrifty Food Plan, was the basis for the Supplemental Nutrition Assistance Program (SNAP) benefits before 2009, whereas the USDA's Low-Cost Food Plan would provide a more appropriate basis for SNAP allotments.

At mild to moderate levels, food insecurity results in anxiety, limited nutritional options, and trade-offs between food and other basic needs. More severe cases of food insecurity may result in hunger and extended periods of time without food. To maintain caloric intake, adults who experience food insecurity tend to limit the variety of their food and concentrate on a few low-cost, energy-dense, and nutritionally poor foods such as refined carbohydrates and foods with added sugars, fats, and sodium. Calorie for calorie, these foods cost less than nutritionally rich perishable items such as fruits, vegetables, and dairy products and contribute to instances of obesity and type II diabetes. According

to the California Food Policy Advocates Report, 40,000 individuals in Kern County have type II diabetes, 57.1% of the adult population is overweight or obese, and 11.2% of the child population is overweight for their age.

Identifying solutions to these issues will be a complex process. According to FRAC, economic growth, and job creation, along with better wages, are vital elements to improve food insecurity for lower-income workers. Another key factor is strengthening the SNAP/food stamp program to reach communities that are unaware of the program and its benefits. This is especially important in the quest to end childhood hunger, an issue that negatively impacts what may be the single best path out of poverty—higher educational attainment.

The prevalence of hunger and food insecurity in Kern County is further documented by a 2009 UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), which profiles hunger and food insecurity in California counties. The study found that 33.9% of Kern County adults with income <200% of the Federal Poverty Level were food insecure. Feeding America, a nonprofit anti-hunger organization, estimates that 17.1% of Kern County households experience food insecurity in a given year, which would indicate 143,000 food-insecure individuals.

Such levels of food insecurity and hunger imply public health and economic costs to both communities and individuals through the following conditions:

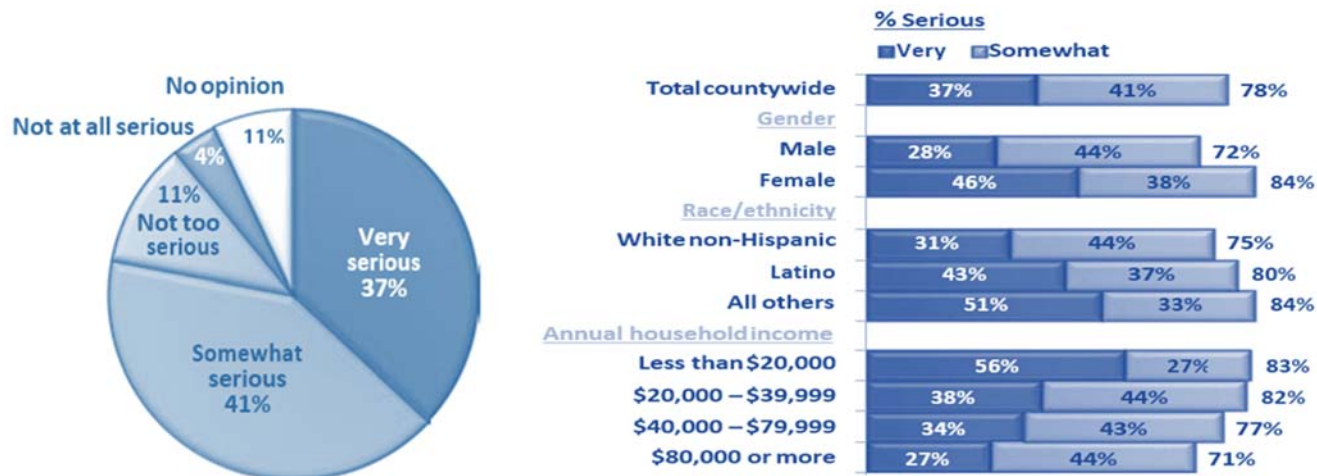
- Lower cognitive development and learning capacity in children;
- Impaired work performance and earnings potential in adults; and
- Lower intake of food energy and key nutrients, leading to increased medical costs, disability, and premature death due to diet-related illnesses.

The Kern Food Policy Council (KFPC) provides a forum for individuals from many sectors of the community food system to promote community-wide healthy eating through education, advocacy, and access. The Council is sponsored by the United Way of Kern County, the California Endowment, and CAPK, with support from many other organizations in the community. The California Endowment, through Field Research Corporation, conducted a poll of 1,200 registered voters to seek information about food insecurity and policy within Kern County. One finding of interest from this poll was the awareness that people in the community have of hunger issues in Kern County. Of those polled, 78% perceived “Families not having enough to



eat” as being a *Somewhat* to *Very Serious* issue. As income increased, the seriousness of the issue decreased. There was also a marked difference in how the issue was perceived by race as represented in the following figure:

Figure 5: Perceived Seriousness of Food Insecurity



CAPK actively participates in the Kern Food Policy Council as a founding member, along with United Way of Kern County, and The California Endowment. CAPK staff drafted the first part of the Community Food Report in 2014. This report provides general food assessment information for Kern County. Some key findings in the report are as follows:

- A recent U.S. Department of Agriculture (USDA) study estimated low-income households with incomes below 185% of the poverty threshold are 34.3% food insecure; that is, they did not have access at all times to enough food for an active and healthy life, with no need for recourse to emergency food sources or other extraordinary coping behaviors to meet their basic food needs.
- Socioeconomic and demographic factors, including 1) household size; 2) homeownership; 3) educational attainment; 4) savings rates; 5) access to credit; and 6) health insurance, have been shown to be important determinants of food security, independent of household income.
- Legislative changes associated with welfare reform and Federal farm supports have created an unfavorable policy environment for SNAP by cutting \$8.6 billion over 10 years. These cuts will translate into a loss of about \$90 per month for a qualifying family food budget. Funding for school food projects in the 2014 Farm Bill and school garden programs is included.

Births to Adolescents

As reported in the Information and Strategic Planning Guide, in 2012 Kern County had the second highest birth rate for mothers 15 to 19 years of age in the state, ranking 57th of the 58 counties in California. In 2009 there were an estimated 3.7% of births to teenage females and 4.9% in 2013. Among this group, the birth rate was disproportionately high for minorities, as seen in the table on the following page.

Table 10: Births to Adolescent Females aged 15-19 by Race, 2009-2013

Year	All	White	African American	Hispanic/Latino
2013	4.9	3.4	8.0	5.4
2012	4.1	3.2	1.5	5.1
2011	4.6	3.4	8.5	5.5
2010	4.5	3.9	5.8	5.3
2009	3.7	2.8	4.0	4.5

Health

Overall, the health of Kern County residents falls far behind residents of other California counties. According to the County Health Rankings and Roadmaps for 2015, Kern County ranks 51 out of 58 California counties in “Health Outcomes” and 55 out of 58 in “Health Factors.” According to this study, health factors that affect the health of people living in Kern County include many of the socio-economic factors previously discussed, such as educational attainment, unemployment, and income inequality.

Table 11: Kern County Ranking for Health, 2015

Health Outcomes	51
Length of Life	44
Quality of Life	55
Health Factors	55
Health Behaviors	52
Clinical Care	55
Social & Economic Factors	52
Physical Environment	44

The 2015 SocioNeeds Index, created by the Healthy Communities Institute provides correlations between socioeconomic need and poor health outcomes, reported by zip codes. This information is indexed from 1 (lowest need) to 100 (highest need) and then ranked from 1 (lowest need) to 5 (highest need). When looking at Kern County’s 40 zip codes in the index, over half are in the 4 and 5 rankings with 7 areas with indexes of 99.2 to 99.7.

The following table found on the following page gives a summary of the socio needs index for Kern County.

Table 11: Socio Needs Index Summary Kern, 2015

Index	Rank	Number of Zips	%
93-100	5	15	37.5
82-92	4	9	22.5
65-80	3	8	20
35-62	2	5	12.5
0-19	1	3	7.5

Environmental Health

According to the American Lung Association's *2015 State of the Air* report, Kern County has some of the worst air quality in the nation. The rankings were based on three types of pollutants:

- Short-term particulate: Episodes of increased particulates caused by events such as wild fires.
- Year-round particulate: chronic exposure to particulates caused by things like soot, diesel exhaust, chemicals, metals, and aerosols.
- Ozone: mostly attributed to wood burning and auto exhaust.

Kern County ranked as having the second worst short-term and year-round particle pollution and fourth worst ozone pollution in the nation. The current drought exacerbates this problem of short-term particulate matter due to an increase in wildfires and increased weather patterns that trap the pollutants in the lower atmosphere.

These particulates are of special concern for Kern County residents because of the significant health risks. As mentioned in this report, Kern County has significantly high rates of death for respiratory conditions and heart disease, which are known to be related to poor air quality. Also, as noted in this report, Kern has a high poverty rate, especially in our rural farming communities, which is linked to lower access to health care. A last factor to consider is that Kern's main industries, agriculture, and oil, are major contributors to the poor air quality.

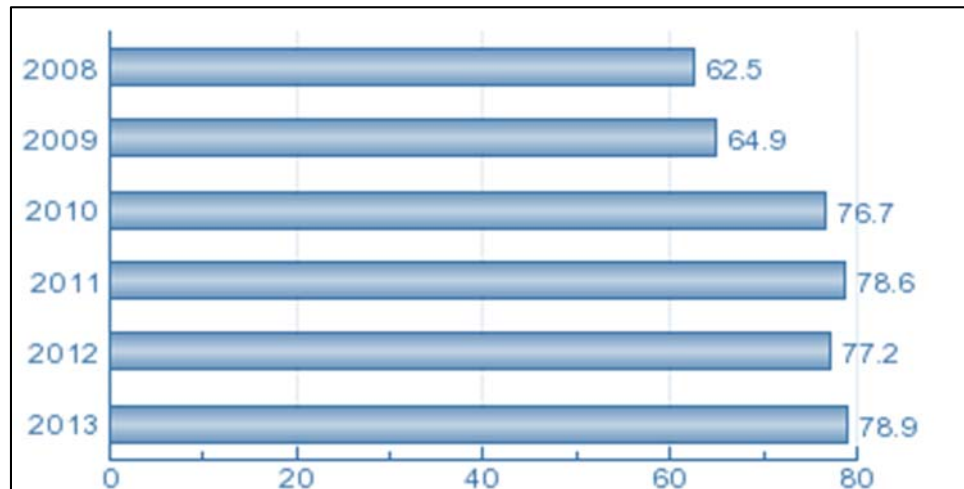
Asthma rates for Kern County are ranked among the highest in the state as indicated by the number of asthma hospitalizations. According to the 2012/2013 Healthy Kern Community Health Assessment, 12.9 per 10,000 people were hospitalized for asthma. Rates for children were especially high with 23.6 per 10,000 children hospitalized and 134.8 per 10,000 children visiting emergency rooms. Children are more vulnerable than adults to the effects of poor air quality due to more permeable skin and fragile systems. Poor air quality also places children at risk of increased cognitive defects and cancer.



HIV

According to Healthy Kern, newly diagnosed HIV cases have shown a steady increase over the last six years. For 2013 there were 78.9 per 100,000 or about 631 people diagnosed.

Figure 6: HIV Prevalence Rate Time Series Cases/100,000 Population



The prevalence of HIV/AIDS has increased over the last few years due to people living longer. Key to living a healthier and longer life with HIV is an early diagnosis. The Centers for Disease Control, however, estimates that 1 out of 5 people with the disease do not know they are infected. People at highest risk of contracting HIV continue to be men of all races who have sex with other men, with African Americans and Hispanic/Latinos disproportionately affected. People in the under-30 age group have the highest occurrence of HIV.

Health Insurance

In 2013, 79.8% of the Kern County civilian noninstitutionalized population had health insurance coverage and 20.2% did not. For those under 18 years of age, 9.8% had no health insurance coverage. There was a slight decrease from the prior year as an estimated 80.7% of all Kern County residents had coverage.

Mortality

According to the California Department of Public Health, the death rate for Kern County is considerably higher than the rate for the state of California. In comparison to other California counties, Kern consistently ranks in the bottom third for leading causes of death. Especially noteworthy are that two of the leading causes of death, coronary heart disease and diabetes, are strong indicators of poor diet and nutrition and which are particularly impactful among low-income populations.



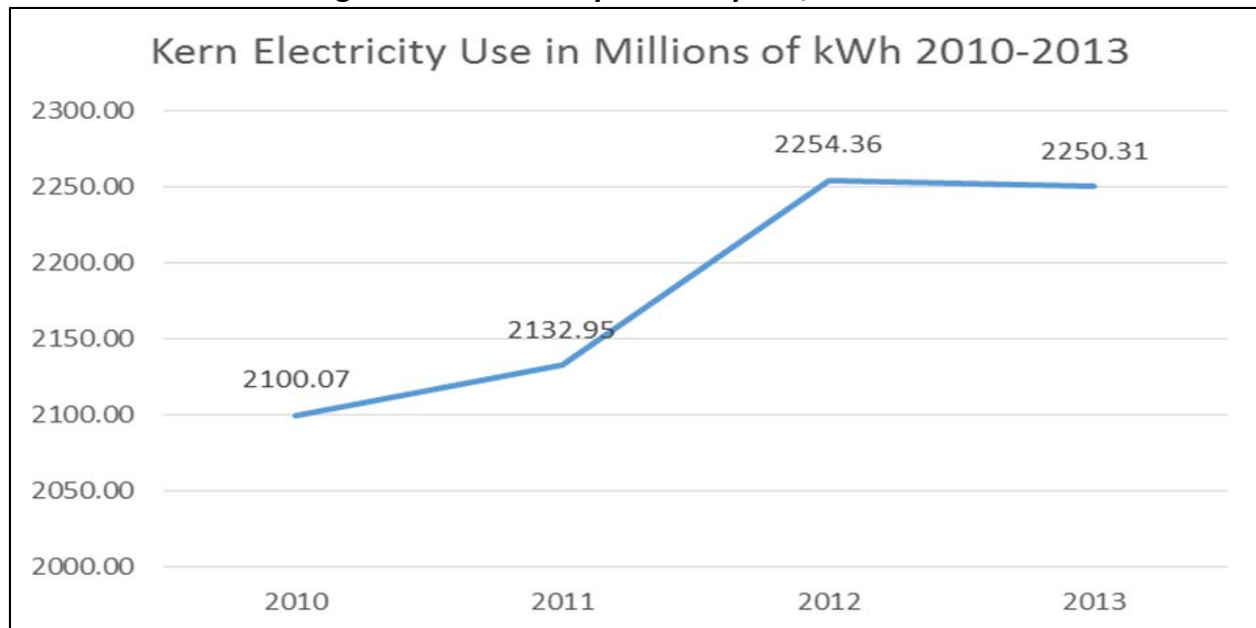
Table 13: Age-Adjusted Death Rates per 100,000, 2009-2011

Area	All Causes	Coronary Heart Disease	Diabetes	Lower Respiratory	Influenza/Pneumonia
California	654.9	122.4	20.2	37.5	17.3
Kern County	836.5	165.0	32.4	68.4	23.9
County Ranking	46	57	57	54	56

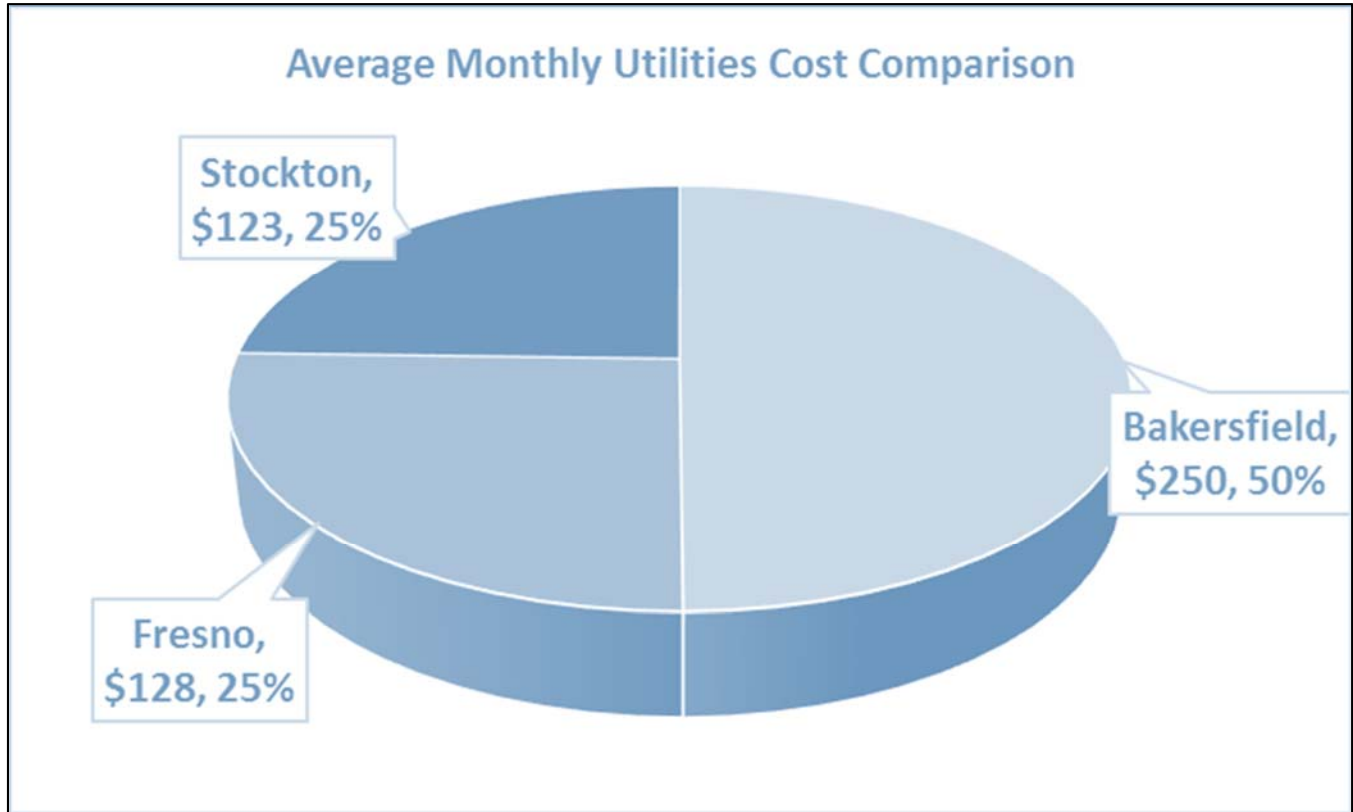
Energy Use

Residents of Kern County use more electricity than most counties in the state with the 11th highest electricity consumption of the 58 counties. Kern has also seen big increases in electricity use over time with a 6.7% increase from 2010 to 2013.

Figure 7: Kern County Electricity Use, 2010-2013



Due to the rate structure of Pacific Gas and Electric Company (PG&E) and Southern California Edison, higher electric use can have a serious effect on low-income families. PG&E uses a tiered rate plan and sets the base rate for customers in the area by overall use as well as individual household use. This higher rate structure is evident when comparing utility costs of Bakersfield, Kern’s major metropolitan area, to Fresno and Stockton, the cities closest to Kern in geography and population in the PG&E service area. The average cost of utilities (electric, heating, water, and garbage) is more than twice as high in Bakersfield than the other two cities, as illustrated in the figure on the following page.

Figure 8: Average Monthly Utility Costs, 2015

Juvenile Crime

Crime rates for juveniles who were arrested for felonies is higher for Kern County when compared to the state. In 2013, 8.9% of youth in Kern County were arrested for felony offenses as compared to 7.5% for the state. Gang involvement can greatly increase the chance of youths committing violent crimes. According to the Kern County Superintendent of Schools, there are an estimated 267 gangs in Kern County with over 13,000 validated gang members (including those in prisons) in the county.

Part of the gang culture is to recruit young new members. According to the *California Healthy Kids Survey 2009-2011*, 8.4% of Kern County children in the 7th grade identified themselves as gang members. Of those children in high school, 9.0% of 9th grade and 8.2% of 11th-grade students identified themselves as gang members. Although only a small percentage of students identified themselves as gang members, gang involvement and influence pose a threat to Kern County's children. In fact, most violent crimes committed by youths are committed by those involved in gangs. Gang involvement is also disproportionate by race, as seen in the table on the following page, with African American/Black youths more than twice as likely as White youths to be gang involved.



Table 14: Youth Gang Involvement by Race

Race/Ethnicity	Percent
African American/Black	12.5%
Native Hawaiian/Pacific Islander	12.3%
American Indian/Alaska Native	10.8%
Multiracial	9.3%
Hispanic/Latino	9.2%
Other	8.9%
Asian	6.3%
White	5.8%

There are multiple reasons that youths join gangs. The Office of Juvenile Justice and Delinquency Prevention (OJJDP) cites the following as the most common reasons youths join gangs: protection, enjoyment, respect, money, and/or because a friend is in a gang. Strategies to prevent gang involvement should include building communities that strengthen families and schools, improve supervision, improve teacher and parent training to manage disruptive youths, and improve interpersonal skills for youths.

Appendix C: Comprehensive SWOT Analysis

Internal Strengths		
Community Development Division	<ul style="list-style-type: none"> • Staff diversity/experience. • Good relationships with division directors. • Strong understanding of community demographics and needs. 	<ul style="list-style-type: none"> • Good relationships with local media. • Effective at meeting goals and deadlines. • Perceived as a division that is knowledgeable and engaged as well as able to network.
Operations Division	<ul style="list-style-type: none"> • Adaptable to changes in funding regulations • Strong compliance mechanisms • Complete projects accurately. 	<ul style="list-style-type: none"> • Ability to identify risks and implement corrective action.
Health and Nutrition MCAP	<ul style="list-style-type: none"> • Adaptability to changing regulations, family needs, and staffing changes • Strong accountability mechanisms in place. • Extensive provider lists. 	<ul style="list-style-type: none"> • Well versed in regulations • Staff are provided significant training opportunities • Good internal communication strategies • Positive work culture: team oriented, open-minded, positive, strong customer service
Health and Nutrition East Kern FRC	<ul style="list-style-type: none"> • Dedicated staff • Collaborate and communicate well internally as well as with partner agencies 	<ul style="list-style-type: none"> • Engagement • Consistency • Follow-through
Health and Nutrition Food Bank	<ul style="list-style-type: none"> • Efficient warehouse operations • Flexible to respond to unscheduled tasks 	
Health and Nutrition HIV Testing	<ul style="list-style-type: none"> • Collaborations • Quality of services provided • Deep understanding of clients' needs 	<ul style="list-style-type: none"> • Connecting prevention education to other chronic issues in service provision.
Health and Nutrition WIC	<ul style="list-style-type: none"> • Service area – serves the rural areas which are the hardest to reach and which often have the fewest resources. • Staff are identified as experts in their field and the main source for breastfeeding support. • Work hours accommodate the needs of staff and clients. 	<ul style="list-style-type: none"> • Compliant with state regulations. • Integrate child development and parenting information in the education provided to parents. • Food vouchers allow clients to use educational information provided and support change. • Dedicated staff. • Use of a statewide database.
Health and Nutrition Central Kitchen	<ul style="list-style-type: none"> • Written, standardized procedures. • Excellent reviews from Environmental Health. • Support from HS/EHS programs • Consumer satisfaction with food. 	<ul style="list-style-type: none"> • Staff: Cross-trained, dedicated, good attitude. • Strong internal communication • Training opportunities.

Internal Strengths (Cont.)		
Community Services Division 211	<ul style="list-style-type: none"> • Service sufficiency <ul style="list-style-type: none"> - Ease of accessing resource (3 digit number is easy to remember) - Linking residents to community services - 24/7 availability 	<ul style="list-style-type: none"> • Centralized database of community resources • Ability to provide prenatal and children 0-5 follow-up
Community Services Division Energy	<ul style="list-style-type: none"> • Services are needed and beneficial to the community. <ul style="list-style-type: none"> - Homes are more energy efficient - Help residents avoid disconnection or get reconnected. 	
Community Services Division VITA	<ul style="list-style-type: none"> • Service Provision <ul style="list-style-type: none"> - Offer free tax preparation - Hours of operation responsive to client’s needs (late/weekends) - Serve outlying areas. 	<ul style="list-style-type: none"> • Good relationship with IRS (local/federal) • Recognized as a model site with the state and the IRS • Ability to use 211 to make appointments.
Head Start	<ul style="list-style-type: none"> • Commitment to quality through attention to outcomes, professional development, partnerships/alignment with schools • Good record keeping systems • Compliant monitoring reviews and audits • Policy Council Members are knowledgeable of their roles and responsibilities 	<ul style="list-style-type: none"> • Staffing: <ul style="list-style-type: none"> - Strong & creative leadership - Knowledgeable about policies/regulations - FSW’s know families can tell their story • Partnerships with other organizations to serve specific target populations. • Technology: web-based, access anytime, anywhere
Human Resources	<ul style="list-style-type: none"> • Good systems in place to reduce risk (of lawsuits) to the organization. • Strong use of and understanding of technology/software programs. • Provision of reports that are useful to other divisions. • Good relationships with employees of the organization. • Good systems for record keeping. 	<ul style="list-style-type: none"> • Staffing: <ul style="list-style-type: none"> - Highly qualified and knowledgeable about federal, state, county, city laws. - Commitment to employees, provision of good customer service. - Strong work ethic. - Strong teamwork, high morale
Governance	<ul style="list-style-type: none"> • Paperwork processes are strong. • Financial systems are strong. • Communication with the board is strong. • Delivery of high quality programs to clients. • Committed board membership. • Knowledgeable staff. 	<ul style="list-style-type: none"> • Positive relationship with funders. • Strong leadership in ED. • Willingness to look at a new way of doing things. • Facilities.

Internal Weaknesses

Community Development Division	<ul style="list-style-type: none"> • Lack of strategic focus (which leads to chasing dollars) • Divisions function in silos • Technology is outdated (?) 	<ul style="list-style-type: none"> • Lack of written policies and procedures. • Lack of innovation in program design. • No agency-wide data management system
Operations Division	<ul style="list-style-type: none"> • Communication efforts – need to develop a more proactive approach. • Long response time may lead other divisions to problem solve independently. 	<ul style="list-style-type: none"> • Low staffing levels <ul style="list-style-type: none"> - May impact quality of service delivery - Impacts response time to resolve issues.
Health and Nutrition MCAP	<ul style="list-style-type: none"> • Lack of sufficient funding: <ul style="list-style-type: none"> - Under-staffed for extended period of time. - Inadequate/outdated equipment - Inadequate software - Deferred training of line staff 	<ul style="list-style-type: none"> • Lack of interagency communication systems • Outdated regulations – income guidelines are not current • Service supports vary based on program (we don't offer client incentives). • Competing priorities due to lack of adequate staffing.
Health and Nutrition East Kern FRC	<ul style="list-style-type: none"> • Limited Staffing • HIPPA compliance • Unreliable technology 	
Health and Nutrition Food Bank	<ul style="list-style-type: none"> • Lack of flexible funding • Inexperienced workforce. • Fleet expense 	
Health and Nutrition HIV Testing	<ul style="list-style-type: none"> • Organizational capacity for testing – enhanced technologies needed. • Ability to track full scope of services provided. • Lack of a diversified funding stream/sustainability plan. 	<ul style="list-style-type: none"> • Targeting at-risk populations given that risk is not always obvious without engagement. • Program Collaboration & Service Integration short and long term plan. • Organization works in silos.
Health and Nutrition WIC	<ul style="list-style-type: none"> • Service population is dispersed over a large geographic area <ul style="list-style-type: none"> - Stretches staff and resources thin - Makes communication difficult - Supervision/oversight is difficult • Wait time in receiving IT assistance when system goes down • Lack of medical component within CAPK for WIC to partner with. 	<ul style="list-style-type: none"> • IT technology is difficult in rural areas • Lack of EBT technology • Staff retention – compensation and benefits structure makes this difficult. • Lack of communication, coordination, and integration with other CAPK programs/services. • Constant need to recruit clients.
Health and Nutrition Central Kitchen	<ul style="list-style-type: none"> • Lack of sufficient technology • Lack of service integration amongst CAPK programs. Working in silos. • Lack of communication throughout CAPK. • Need for updated equipment/vehicles/ staff compensation 	<ul style="list-style-type: none"> • Infrastructure – <ul style="list-style-type: none"> - Facility doesn't always support loading/unloading during bad weather. - Workflow not optimal due to facility. • Property is not secured.

Internal Weaknesses (Cont.)		
Community Services Division 211	<ul style="list-style-type: none"> • Lack of sufficient resources <ul style="list-style-type: none"> - For services - For staffing 	<ul style="list-style-type: none"> • Staff retention/turnover
Community Services Division Energy	<ul style="list-style-type: none"> • Need to have various licenses that are needed to perform weatherization work. 	<ul style="list-style-type: none"> • Staff retention- low wages. • Requirements restrict access.
Community Services Division VITA	<ul style="list-style-type: none"> • Lack of sufficient funding for staffing. • Reliance on volunteers/lack of sufficient volunteer pool. • Need to do more community outreach. 	<ul style="list-style-type: none"> • Need for enhanced technology, resources, locations, and internet accessibility to provide services.
Head Start	<ul style="list-style-type: none"> • Inadequate compensation for employees • Lacking a new employee orientation/training process • Lack of training facilities 	<ul style="list-style-type: none"> • Need to Increase outreach and education activities in low-income communities to increase knowledge and awareness of the benefits of HS/EHS programs and services
Human Resources	<ul style="list-style-type: none"> • Limited staff resources which results in: <ul style="list-style-type: none"> - Inability to be proactive - Lack of follow-up with employees - Work-related errors due to rushing - No time to conduct audits or participate in CQI processes - No time to train employees adequately - Inability to cross-train • Dependent on other divisions to process time-sensitive issues. • Lack of written procedures for the division. Need written procedures or updated procedures for the entire division. • Need to develop clear and accurate job descriptions throughout organization. Need to ensure job descriptions adequately document expectations of employee so that HR can recruit appropriately. • Inadequate talent management system throughout the organization (onboarding, training, recognition, rewards.) leading to turn-over. 	<ul style="list-style-type: none"> • Significant time spent providing assistance for issues that should be known by employees (how to complete time cards, benefits, FMLA, password retrieval.) • Need to develop an ongoing communication mechanism within the division to ensure everyone knows what is going on. • No document management system. Too many paper processes in the department. • Lack of sufficient work space. • Need to develop a time to plan appropriately to prioritize/organize workload. • Organization is not seizing opportunities to grow/expand. • Inadequate onboarding process which affects employee satisfaction/retention. • Management does not take training seriously which creates exposure to lawsuits and added expenses (legal fees, settlement fees, etc.).

Internal Weaknesses (Cont.)

<p>Governance</p>	<ul style="list-style-type: none"> • Need to identify the happy medium between process and effective service delivery. • Need to simplify our systems so they are not overly burdensome. • Need to break down program and division silos. 	<ul style="list-style-type: none"> • Head Start staffing compensation (real or perceived). • Organization is too paper driven. • Need to develop/adhere to budgets within divisions. Need budget training. • Need to improve our technology.
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External Opportunities

<p>Community Development Division</p>	<ul style="list-style-type: none"> • Efforts could be made stronger through additional partnerships. • Identify and engage resources to improve communication efforts. 	
<p>Health and Nutrition MCAP</p>	<ul style="list-style-type: none"> • Identification of alternative funding streams that could supplement our services (basic/essential needs) • Coordinate outreach efforts with other programs/partner agencies. 	<ul style="list-style-type: none"> • Expansion of our geographic area of services.
<p>Health and Nutrition East Kern FRC</p>	<ul style="list-style-type: none"> • Outreach • Social Media • Collaboration into networking 	
<p>Health and Nutrition Food Bank</p>	<ul style="list-style-type: none"> • Good distribution network. • Donations available from multiple sources. • Could develop local agricultural donors. 	
<p>Health and Nutrition HIV Testing</p>	<ul style="list-style-type: none"> • Building alignment between our services/goals and other providers in order to improve services, expand best practices and improve funding opportunities. 	<ul style="list-style-type: none"> • Positioning the organization as a capacity builder for service providers. • Leadership changes which may impact policies. • Access to data/reports available from state sources has improved.
<p>Health and Nutrition WIC</p>	<ul style="list-style-type: none"> • Opportunity to co-locate with community partners. 	<ul style="list-style-type: none"> • Opportunity to expand services to include breastfeeding and nutrition education if alternative funding were available
<p>Health and Nutrition Central Kitchen</p>	<ul style="list-style-type: none"> • Opportunity to use facility for other purposes during down times. • Market services to external vendors to enhance funding. 	

External Opportunities (Cont.)		
Community Services Division 211	<ul style="list-style-type: none"> • Expand Services: <ul style="list-style-type: none"> - Developmental Screenings - Case Management - Eligibility Determination 	<ul style="list-style-type: none"> • Collaborate with other providers to solicit joint funding opportunities.
Community Services Division Energy	<ul style="list-style-type: none"> • Drought Water Assistance Program helps residents with employment, water bills, and installation of temporary water tanks. 	
Head Start/Early Head Start	<ul style="list-style-type: none"> • Opportunity to develop monitoring and data collection compliance team • Open opportunity to convert Head Start slots to Early Head Start slots • Opportunity to decrease Head Start funded enrollment slots and use cost savings to improve program quality (staff salary increases) • Funding opportunities for expansion of services and Early Head Start partnerships 	<ul style="list-style-type: none"> • Community need for infant care • Expand Services: <ul style="list-style-type: none"> - Center-based, home-based, and family child care options - Locally established options - Expand geographic areas served • Local, state, federal, and private sector support/ resources for families raising young children and concerted effort toward improvement in the areas of education, health, and well-being.
Human Resources	<ul style="list-style-type: none"> • Use of technology to: <ul style="list-style-type: none"> - Provide training opportunities to staff - Promote online self-service options for employee benefits, etc. 	
Governance	<ul style="list-style-type: none"> • Can market our “product” to smaller agencies needing assistance. • We have many opportunities to capture additional outside contracts. • We have an opportunity to position ourselves as a leader in discussions around poverty and how to eradicate it. • Utilize our professional, certified 211 program, as a professional "call center" for small non-profits and government agencies to utilize. 	<ul style="list-style-type: none"> • Leverage our Energy weatherization program into contracts to assist other agencies (e.g., current water tank installation program). • Need to partner with other nonprofits to create efficiencies. • We could share our knowledge with other agencies. • Host a “summit” of local nonprofits to discuss ideas for collaboration and partnership.

External Threats		
Community Development Division	<ul style="list-style-type: none"> • Reduced public/private funding available • Increased competition for existing funds • Dependency on federal and grant funding (not diversified enough) 	<ul style="list-style-type: none"> • Local, state, and national politics and its impact on agency operations.
Operations Division	<ul style="list-style-type: none"> • Reduction in funding 	
Health and Nutrition MCAP	<ul style="list-style-type: none"> • Reduced services to families leading to reduction in outcomes. • Weather patterns affect our clientele • Low client participation at meetings/events • Transitory nature of clientele makes it hard to “earn” our contract. 	<ul style="list-style-type: none"> • Program name – external audience interprets the term “migrant” as meaning temporary, sub-par, and/or unstable (funding). • Staff safety is a concern in rural areas.
Health and Nutrition East Kern FRC	<ul style="list-style-type: none"> • Funding • Only resource center in town. 	<ul style="list-style-type: none"> • HIPPA violations could lead to losing clients, impacting the quality of work.
Health and Nutrition Food Bank	<ul style="list-style-type: none"> • Lack of community awareness – Who is the Food Bank? • End to DEFAP uncertain. 	<ul style="list-style-type: none"> • Uncertainty around grant funds • Increased operating costs with diminished funding.
Health and Nutrition HIV Testing	<ul style="list-style-type: none"> • Larger is better, one-stop service provision. • Lack of cultural competency in the community. 	<ul style="list-style-type: none"> • Working with other providers who may have organizational capacity concerns/needs impacting quality.
Health and Nutrition WIC	<ul style="list-style-type: none"> • Clients’ comparison of WIC voucher to SNAP (WIC more restrictive) leads to missed appointments. • Delay in state reimbursement. • State WIC policies increase difficulty and expense of providing services. • Tactics used by other provider affects our ability to keep clients. 	<ul style="list-style-type: none"> • Politics: <ul style="list-style-type: none"> - Some states are requiring WIC agencies to collect immigration info. - Support for WIC is dependent upon congressional support. • Unable to amend budget more than once per year.
Health and Nutrition Central Kitchen	<ul style="list-style-type: none"> • Unstable food costs. • Union • Lack of sufficient funding. 	
Community Services Division 211	<ul style="list-style-type: none"> • Lack of community resources hinders the program’s ability to connect individuals with services that meet their needs (homeless/housing assistance) <ul style="list-style-type: none"> - Wait times for HEAP 	<ul style="list-style-type: none"> • Lack of available funding • Competing help-line (Google) • Inability to keep up with technology (smart phones)

External Threats (Cont.)		
Community Services Division Energy	<ul style="list-style-type: none"> Competing providers drive workforce away due to fewer paperwork requirements and a higher rate of pay. 	<ul style="list-style-type: none"> May have to compete for funding in the future.
Head Start/Early Head Start	<ul style="list-style-type: none"> New regulations Competitors Landscape of the early childhood education field is changing in ways that directly impact Head Start services Impact of Transitional Kindergarten (TK) programs: affecting enrollment numbers for Head Start program Lack of facilities; upkeep of facilities Market demand: IT developments 	<ul style="list-style-type: none"> Workforce Concerns: <ul style="list-style-type: none"> Lack of qualified workforce Turnover/retention Competitive pay Environmental effects: Seasonal weather effects' Economy; Political effects, legislative effects Kern County struggles with high rates of unemployment and poverty, low educational attainment, language barriers, food insecurity, obesity and air quality.
Human Resources	<ul style="list-style-type: none"> Gap between the need for technology and the skills (related to technology) of our workforce. Workforce Issues: <ul style="list-style-type: none"> Cannot compete with other employer wages/benefits Limited pool of qualified applicants 	<ul style="list-style-type: none"> State and Federal regulations are constantly changing; difficult to stay abreast of those changes. Possible threats include noncompliance or audit findings and penalties. It can even lead to law suits. Increased costs of employee benefits. HR needs to stay current on what is happening in the industry.
Governance	<ul style="list-style-type: none"> Budget concerns at the state and federal level (budget cuts, budget restrictions) Reputation – the use of the term “war on poverty” may have an impact on our reputation if people perceive it as our responsibility to end poverty. 	<ul style="list-style-type: none"> Perception by the public that we can shift funding, when in reality our contracts don’t allow that.

Ideas		
Community Development Division	<ul style="list-style-type: none"> Develop division goals Develop internal/external communication plan Increase partnerships and collaboration with other agencies 	<ul style="list-style-type: none"> Develop programs that are innovative and at least partially self-sustaining.
Health and Nutrition MCAP	<ul style="list-style-type: none"> Getting involved in budget discussions Building relationships with other internal programs (WIC, 211, Food Bank) 	<ul style="list-style-type: none"> Increase staff training opportunities.

Ideas (Cont.)

Health and Nutrition Food Bank	<ul style="list-style-type: none"> • Increase fresh produce and fruit 	
Health and Nutrition HIV Testing	<ul style="list-style-type: none"> • Developing the capacity to track full scope of service provision to demonstrate the need for additional funding. 	
Health and Nutrition WIC	<ul style="list-style-type: none"> • Use text messaging as a mechanism to communicate with clients. • Use of online learning opportunities for staff. 	<ul style="list-style-type: none"> • Share similar tasks with other CAPK programs like outreach efforts.
Health and Nutrition Central Kitchen	<ul style="list-style-type: none"> • Use of Central Kitchen by other CAPK programs. 	
Community Services Division 211	<ul style="list-style-type: none"> • Expand use of technology to support service delivery – use of chat and texting functions. • Expand number of locations 	<ul style="list-style-type: none"> • Conduct community outreach
Human Resources	<ul style="list-style-type: none"> • With more staffing, would like to initiate: <ul style="list-style-type: none"> - Proactive assistance to employees - On-site services to staff - Training - Coaching/mentoring related to appropriate staff supervision and support. • Provision of onsite ADP training. 	<ul style="list-style-type: none"> • Ensure that we are being thoughtful and strategic in our policy development. Analyze whether each policy is fulfilling its ultimate goal (example: sick leave pay-out) • Conduct an analysis of our competitive positioning regarding employment. Communicate to staff the benefits of working at CAPK.
Governance	<ul style="list-style-type: none"> • Keep ahead of new technology for efficient and effective administrative processes. • Track service delivery trends. • Public outreach • More leadership training. • Greater education and awareness of how our organization is structured and funded. • Greater advocacy with State and Federal legislators on the importance of what we do 	<ul style="list-style-type: none"> • Need to establish a solitary vision within the organization – no more silos. One company, one mission. • Diversify our funding stream. • Rethink our brand/messaging. • Approach the state CAP organization to develop a resource pool to help other agencies and share successes and failures to learn from each other.

Appendix D: Burning Platform

In our great country, there are those that fall through the cracks and have difficulty accessing the “American Dream.” Our society is predicated on a system of fairness, opportunity and justice. Those that are successful must ensure the continuance of the system. This is accomplished through engagement and action in the community, while working towards a community that offers hope and opportunity to everyone.

Our community continues to be negatively impacted by harsh economic downturns, high levels of poverty, manifested by food insecurity, inadequate housing, poor health conditions, elevated crime rates, and low educational attainment.

According to American Fact Finder (U.S. Census), the poverty rate of Kern County residents was 24.5% in 2011. This means approximately 208,669 people live in poverty in Kern County; of which 73,660 are children. Despite the fact that we are one of the world’s most productive agricultural communities, Bakersfield ranks highest among major cities in the United States for food hardship, and over 162,000 individuals face food insecurity in Kern County. In addition, the adult obesity rate in Kern County is 29%, or 173,077 individuals, compared with a national rate of 25%. Diabetes in Kern County has a rate of 9%, or 70,200 individuals, as compared to a 7% rate nationally. During the 2010-2011 School year, 36,789 7th, 8th, and 9th graders completing the California Physical Fitness testing had unhealthy body composition base on Individual Body Mass Index. That is 49.5% of those tested were at an unhealthy level. In Kern County for 2011 there were 17,988 children reported for suspected child abuse, a rate of 70.8 children per 1,000, compared to the state rate of 51.2 per 1,000. For substantiated rates of child abuse Kern’s rate was 17.2 per 1,000 as compared to a rate of 9.1 for the state of California. In Kern County, 72.8% of adult residents have a high school diploma or equivalent and 14.8% have a four-year college degree or higher. This compares to state rates of 81.1% for high school diplomas and 30.3% for college degrees.

This is not acceptable. We can and must do better.

Our Food Bank staff have witnessed former volunteers, who had previously assisted in distributing food to those in need, show up on distribution days lines, seeking emergency food assistance for themselves and their families. It is a perilous line that many face between being self-sufficient today and being in need of assistance tomorrow due to a job loss, foreclosure, or illness in the family.

We are committed to alleviating the needs of our most vulnerable residents. We believe in providing services that will improve the quality of life and offer individuals opportunities for growth and self-sufficiency. Recent economic challenges have resulted in drastic budget reductions to many of the programs offered by CAPK and others. In order to continue our efforts, it is imperative that we review how we operate, re-examine our priorities and strategies, and be innovative in the use of our

resources and delivery of services. We must explore new opportunities within our core programs. We must call upon community leaders from the private sector, government, and philanthropy to take action and become engaged in solving our community issues together.

As an organization, CAPK is committed to refocusing our strategies so that we can continue to meet families and children at their point of need and provide them with the means and tools to move out of poverty. CAPK must change to embrace the new environment. This challenge is now upon all of us.

February 6, 2013