Nevada's Family Resource Centers

An Analysis of Strengths and Sustainability

July 2020

Nevada Department of Health and Human Services

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Executive Summary

Over the past 25 years, the network of Family Resource Centers (FRC) in Nevada has supported local communities by providing essential core services of information, referral, and case management. Nevada's FRCs have faced funding challenges with resiliency and developed innovative approaches to address emerging and continuing needs. They have leveraged opportunities to expand programs as families weathered recessions, unemployment, and natural disasters. Through it all, FRC staff have maintained the trust of their communities and the ability to adapt as circumstances change.

While service offerings differ from one FRC to another, the overall family-driven approach incorporates seven nationally recognized components to service delivery.[1]

1. Inclusion of a Diverse Population in Programs and Services
2. Strong Collaborative Relationships between Staff and Families
3. Strengths-Based Approach to Service Delivery
4. Focus on Prevention and Long-Term Growth
5. Involvement of Peers, Neighbors, and Communities
6. Coordination of Multiple Services
7. High-Quality Staff Training and Coaching

Nevada's FRCs have incorporated many of these components and some have expanded beyond them, incubating new evidenced-based programs and development of multi-county service delivery models. Some FRCs have instituted family-strengthening practices such as trauma-informed care and the impact of Adverse Childhood Experiences (ACEs) on well-being. Unfortunately, some FRCs have reported needing to focus primarily on keeping the doors open and the lights on.

This study of Nevada's FRCs reviewed sustainability and capacity-building needs, resulting in identified opportunities and 10 recommendations for strengthening the State's FRC network. The methodology included entrance interviews with FRC directors, completion of the Core Capacity Assessment Tool (CCAT), interviews with key contributors, and site visits to each of the 22 FRCs funded by the Nevada Department of Health and Human Services (DHHS).

Aggregate CCAT results demonstrated that six FRCs are currently in the life cycle stage of developing new programs while 12 see themselves at the impact expansion stage, trying to gain sufficient community support to cycle back to core program development. The remaining four are in the infrastructure stage, needing to build additional capacity to implement programming and strengthen organizational processes. Continuous cycling through the three lifecycle stages of core program development, infrastructure development, and impact expansion is a sign of a healthy organization.

[1] OMNI Institute, "Key Components of Family Resource Centers: A Review of the Literature". Accessed December 18, 2019 at https://www.nationalfamilysupportnetwork.org/family-support-programs.

Consistent with findings reported in the 2016 survey from the National Family Resource Center and the Robert Johnson Foundation, Nevada's network of FRCs is being left behind.[2] After the Great Recession in 2007-2009, many FRC programs have been reduced or eliminated. Previous funding streams have changed priorities, decreased, or withdrawn, often with little advance notice. The national FRC movement has shifted to new evidence-based family strengthening models, however many of Nevada's FRCs have struggled to maintain current staff and programs, with little opportunity to elevate their collective best practices to national standards.

Strengthening FRCs consistent with national standards is an opportunity to enhance services delivered to local communities, effectively break down access barriers, and most importantly, empower communities to participate in a trusted service delivery system that reaches the people who need it most.

Without renewed investment, the FRCs will be ill equipped to serve Nevadans as they work toward self-sufficiency. As social impacts such as rising rates of domestic violence, child neglect, and deepening poverty become more apparent, FRCs must be better positioned to assist families in accessing resources, treatment, and links to assist them in obtaining vital information and assistance.

This report provides findings and recommendations for the continued viability of FRC's in today's human services environment and ensure their sustainability over the long term.

[2] OMNI Institute. "Advancing the Family Support & Strengthening Field Project: Executive Summary of Survey Results". Accessed April 27. 2020 at https://8c49defa-92cd-4bf1-ac5b-91471683def4.filesusr.com/ugd/20e556_3ef71955807a4714a50217d6c17093a3.pdf

Introduction and Background

Nevada's Family Resource Centers (FRCs) were created by the State Legislature in 1995 as facilities within at-risk communities where families could obtain an assessment of their eligibility for social services and receive direct services or referrals to other social services agencies to meet the needs of their families. The Legislature appropriated $1.1 million annually to create the original network of FRCs located throughout the state, in both urban and rural communities.

2020 is the 25th anniversary of the creation of FRCs in Nevada, making it an opportune time to assess and review the status and impact of FRCs. Originally funded at $1,130,000 for their first year of operation (the equivalent with inflation of $1,918,019 in 2020 dollars), the FRC system received just under $1.4 million in their SFY19 state allocation. This represents a substantial drop in overall funding, while Nevada's population, and the FRC service population, has increased by more than one million people in the last 20 years.

Originally conceived as neighborhood-based centers offering resources for Nevadans of all ages, FRCs have developed into agencies offering diverse services, dependent upon local and state resources. An analysis of each FRCs' structure, funding stream, and programs was conducted, along with a review of the FRCs' challenges and opportunities. This analysis provides a framework for better understanding future resource, training, and professional development needs, and potential partnerships.

This report includes:

- A timeline of the evolution of Nevada's FRCs;
- An analysis of the similarities and differences seen amongst Nevada's 22 FRCs;
- A summary of the lifecycle stages, organizational capacity, and an analysis of the strengths and challenges of FRCs; and
- Recommendations to build capacity.

This report is designed to provide an understanding of the current and additional resource needs, and recommendations that will lead to enhanced coordination and collaboration that will strengthen the existing FRC network, and equip policymakers with information necessary to prepare Nevada's FRCs to assist their communities in the years ahead.

> ***Family Resource Centers are a hidden secret. We need to get the word out about how much they do to everyone – to school personnel, local community leaders, and to families.***
>
> — Key Contributor

Sustainability

The term "sustainability" is defined as ***the continuation of community health or quality of life benefits over time***.[3] Sustainability is a holistic concept – the ability to create lasting improvements for an extended period of time despite ongoing changes in funding sources, program models, service providers, community demographics, and other factors. A critical point to note about this definition is sustainability is not about indefinitely perpetuating current programs and services at current funding and staffing levels. As communities change over time, the demand for services may grow or diminish. New, more effective approaches or best practices for providing services may be identified and implemented. Changes are also certain to occur in sources of funding, public policies, and other forces that affect an organization. Long-term sustainability is focused on continuing the positive results that FRCs achieve for children and families, despite all the changes that occur in the environment in which the FRC is operating.

During each site visit, time was set aside to discuss sustainability challenges with FRC board and staff leadership teams. Accordingly, there was agreement this was an important topic to address and acknowledgement of the insufficiency of funding in providing for core staff and operational budgets. The FRC leaders shared the difficulty in completing strategic plans, writing grants, or designing capital campaigns in an unrelenting crisis environment.

Methodology and Limitations

Methodology

The methodology of the FRC Sustainability project included a variety of information gathering tactics to understand the history of FRCs in Nevada over the past 25 years, their current operations throughout the state, and ideas about strengthening their sustainability into the future.

Research from national sources on best practices of family support centers was collected along with a survey of historical sources within Nevada regarding the history and development of the state's FRC network. Key state staff who manage the FRC network provided a wealth of background documentation including current action plans for each FRC, funding allocations, and consultation on the development of interview questions for key contributors and FRC directors.

Key contributors were selected and interviewed during December 2019 and January 2020 and their insights have been incorporated into the *Findings and Recommendations* section of this report. The key contributors were asked standard questions for continuity, and also provided a wide range of solutions to expand and sustain Nevada's FRCs over the next 25 years. Additional key contributor follow-up interviews were conducted in February and March 2020 specific to information gaps.

[3] Center for Civic Partnerships, "Sustainability Toolkit: 10 Steps to Maintaining Your Community Improvements", page 8.

Formal telephonic entrance interviews with standardized questions were conducted with each of the 22 currently-funded FRCs in January 2020 to inform the report and prepare for subsequent on-site visits which were conducted in February and early March 2020. Based on this information and additional input from the FRCs, a profile was prepared for each FRC to tell its unique story, utilizing financial and programmatic data, quotes from staff and volunteers, and pictures of programs, people, and facilities.

In addition, each FRC completed a research-based self-assessment of their internal capacities administered by Social Entrepreneurs, Inc. (SEI) through the TCC Group's Core Capacity Assessment Tool (CCAT). During individual site visits, time was set aside to interpret each FRC's CCAT results and discuss opportunities for building organizational capacities at each site. The data from individual CCAT results was aggregated in this report to present a "point in time" view of internal capacities of the FRC network and identify shared strengths and opportunities for improvement.

Several matrices were developed based on data collected from monthly reports submitted by each FRC for State Fiscal Year (SFY) 2018-19. Organizational data was collected through entrance interviews and site visits, background information collected in the CCAT, financial information provided by the FRCs and the state, and census data. FRCs were aggregated by region within these matrices, which are presented throughout the report to summarize commonalities and differences among Nevada's FRCs to display the full breath of activities and programs offered by these unique entities that are bonded by a common purpose of assisting families of all types, ages, and incomes while being responsive to local needs and concerns.

The data collected was used to create individual profiles for each FRC, to demonstrate their reach and impact within their respective communities. A template, and more information on the generation of those profiles, in presented in Appendix A.

The onset of the 2020 COVID-19 pandemic occurred during the final stages of the project as this report was being generated. An addendum discusses the impact and implications of the pandemic on the FRCs and is included as Appendix F.

Limitations

- The majority of data utilized in this report was self-reported by the FRCs either to the State of Nevada or to the TCC Group for generation of the CCAT. Data was then provided to SEI by these sources, who compiled, aggregated, and disaggregated the data as presented. SEI did not perform a review of original source materials to validate data provided through the channels referenced above but did facilitate data validation by reviewing CCAT data during site visits and providing both the individual profiles and a draft of this report to all FRCs for validation before finalization.
- CCAT surveys required at least three respondents in order to score a question. In some smaller FRCs, this required participation from FRC staff or other staff adjacent to the FRC, such as the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) staff, in order

to complete the survey. Not all respondents may have had detailed information about the inner workings of an FRC.

- Related CCAT organizational and cohort-aggregated data was provided by the TCC Group at the mezzo and macro levels only. SEI and SagePine Strategies were not provided with individual questions and answers, either by FRC, subcapacity, or capacity. This limited SEI's ability to conduct micro level analysis, or to identify trends within particular question and answer sets by FRC, region, or cohort.
- Findings and recommendations are partially informed by data obtained directly from FRC staff, and in some cases board members, who may be limited in their ability to identify challenges as well as strengths. This limitation was mitigated by an authentic attitude of collaboration, especially during site visits when the research team was welcomed with sincerity and warmth.
- The FRC state-allocation funding formula for the last 25 years has not been well documented, which created variations when reconciling the SFY 2019 allocation.

Timeline and Evolution of Family Resource Centers

1995

Nevada Legislature approves Senate Bill 405 which established a system of FRCs to increase the accessibility of social services to families within key neighborhoods. $2,086,313 was appropriated for the SFY 1996-97 biennium ($1,043,156.50 per year).

1997

The Family to Family Connection (F2F) program is approved in the 1997 legislative session, with a goal to "help every family provide a healthy, secure, and stimulating environment for their child from the earliest days of life." (Governor Bob Miller, 1997)

1998

FRCs begin to co-locate with Family to Family Connections programs funded in the 1997 legislative session.

2005

Nevada Legislature passes Senate Bill 297 to provide definitions for an FRC Action Plan and an FRC Community Council and establish annual reporting requirements for each FRC.

2007

Nevada Legislature passes Assembly Bill 203 to provide an appropriation of $260,000 to purchase vehicles or improve facilities or information technology at Family Resource Centers.

2011

By 2011, 19 FRCs in the State are co-located with Family to Family Connection (F2F) programs, a collaboration that benefited both programs in terms of lowered operational costs and strengthened the communities served by FRCs by providing quality early childhood supports.

In the 2011 legislative session, F2F funding is eliminated due to recessionary pressures and budget cuts, representing a loss of braided funding. The total annual funding eliminated equaled $1,286,995 (based on the amount allocated in SFY2011). Details are available in Appendix G.

2014

In SFY 2013, General Funds to support the FRCs were replaced with tobacco settlement funding referred to as The Fund for a Healthy Nevada.

2015

AB 156 passed, requiring FRCs to obtain input from certain elected officials when creating an action plan, revising at-risk designation in FRC service area to include risk of homelessness, and detailing requirements of case plans, including certain data collection and analysis.

2019

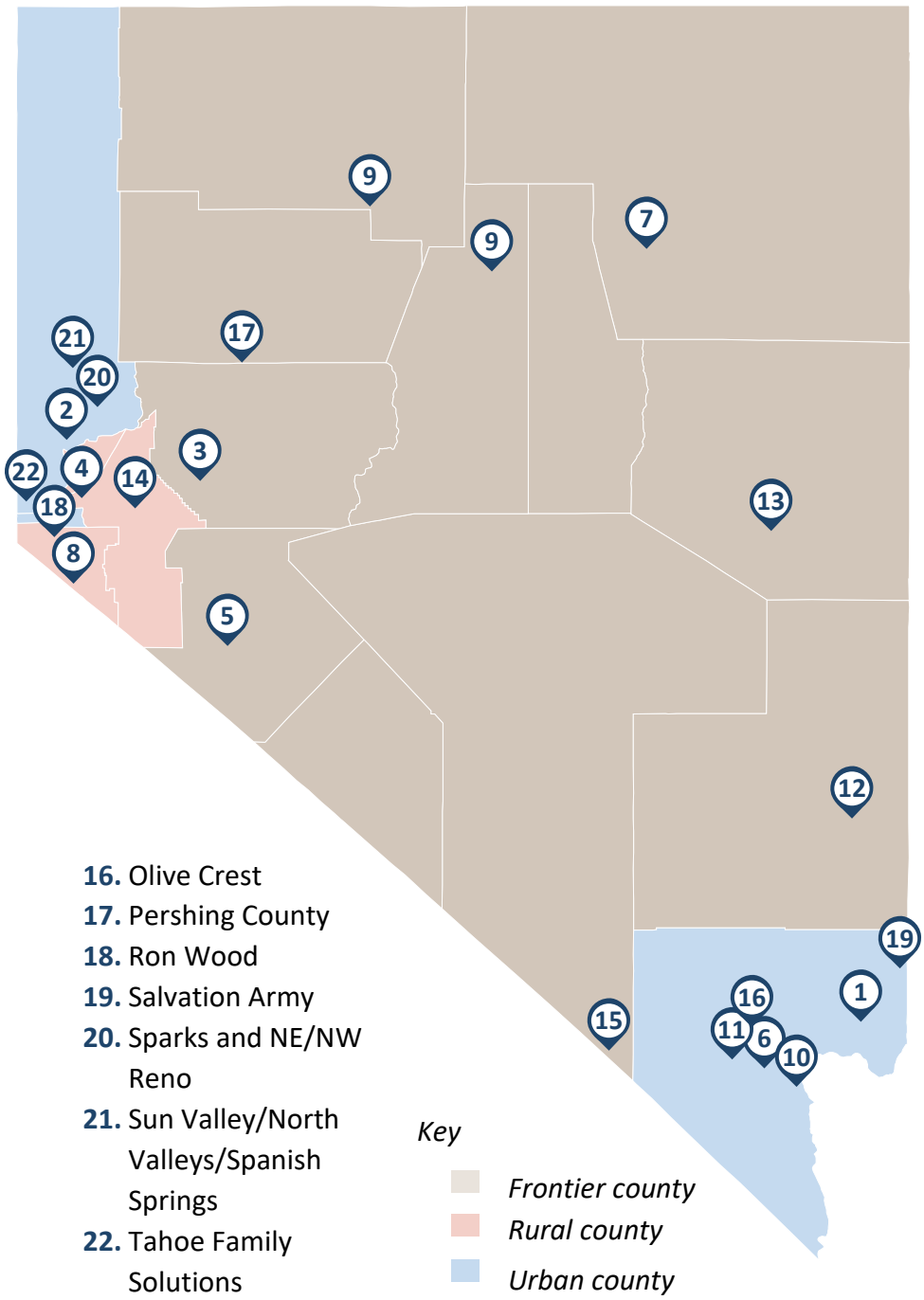
Multiple FRCs receive reduced Title IVB (Child Welfare Services) funding which results in reduction of staff and elimination of one FRC.

Statewide Overview of Family Resource Centers

Locations and Geographic Distribution

As of April 2020, there were 22 Family Resource Centers within Nevada. General location of all FRCs are illustrated on the map below. It should be noted that FRCs provide services throughout their communities and often the entire county they serve. A comprehensive list of all FRCs by service area, region and zip code is provided in Appendix B.

1. Cappalappa
2. Central/South Reno
3. Churchill County Social Services
4. Community Chest
5. Consolidated Agencies of Human Services
6. East Valley Family Services
7. Family Resource Center of Northeastern NV
8. Family Support Council
9. Frontier Community Action Agency (serves both Humboldt and Lander counties)
10. HopeLink of Southern NV
11. Lied Memorial Boys and Girls Club of Southern NV
12. Lincoln County Community Connection
13. Little People's Head Start
14. Lyon County Human Services
15. Nevada Outreach Training
16. Olive Crest
17. Pershing County
18. Ron Wood
19. Salvation Army
20. Sparks and NE/NW Reno
21. Sun Valley/North Valleys/Spanish Springs
22. Tahoe Family Solutions



FRCs operate in different environments and are subject to varying community conditions across Nevada. This report follows the classification adopted by the Nevada State Office of Rural Health and detailed in the Nevada Rural and Frontier Health Data Book, 9th edition, which "emphasizes the important distinctions between "rural" and "frontier" regions of the state." This classification does not rely simply on population density but utilizes a more sophisticated formula to incorporate remoteness "in terms of travel time and distance from the nearest population centers with more specialized medical care and facilities."[4]

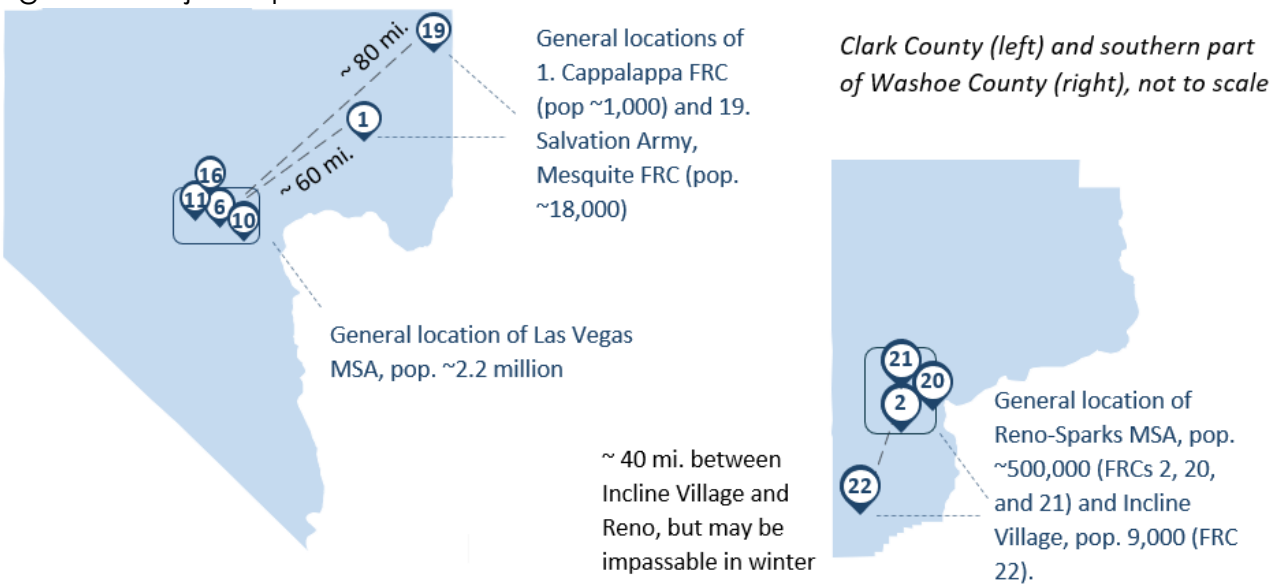
Utilizing this classification, Nevada has

- Three urban counties (Carson City, Clark County, and Washoe County)
- Three rural counties (Douglas, Lyon, and Storey counties)
- Eleven frontier counties (all other counties within Nevada)

These counties by type are illustrated on the map on the previous page.

The majority of Nevada's population (90.5%) is concentrated within the three urban counties, representing approximately 13% of the State's land mass, with the remaining 9.5% of the population spread across 87% of the state's land mass.[5] It should be noted, however, that urban counties may still comprise large areas of rural and geographically dispersed communities. For example, although Clark is considered an urban county, the Cappalappa FRC is located in an area with a population of approximately 1,000 people and is equidistant to major services in Las Vegas as is the Nevada Outreach Training Organization (NOTO) FRC located in Pahrump. The major population centers and locations of FRCs, within Nevada's two largest urban counties, are depicted below to illustrate the 'rural' setting of some FRCs within these counties.

Figure 1. Major Population Centers and FRC Locations in Clark and Washoe counties



[4] Nevada Rural and Frontier Health Data Book- Ninth Edition. January 2019. University of Nevada, Reno School of Medicine. Accessed at https://med.unr.edu/statewide/reports/data-book-2019
[5] Ibid.

It is also important to note that rural counties are usually closer to population centers and services than frontier counties. Within the frontier counties, outside the sizeable city of Elko, there are many small, even tiny, towns and outlying ranch communities that are isolated, with minimal public infrastructure and services. FRCs in these communities are sometimes the only access point for commodity food distribution, assistance with health or welfare applications, and donations of clothing, car seats, and other children's items. Many of Nevada's FRCs in these frontier communities are operating with minimal funding, and open one or two days a week with limited-to-no travel funds or staff time to provide outreach to surrounding areas.

Organizational Structure

FRCs utilize several different organizational structures, but all fall into one of the following categories:

1. Part of a **public organization** (e.g. a school district or county agency);
2. Part of a **larger private non-profit**; or
3. An **independent non-profit**.

Six of Nevada's FRCs fall into the first category, either **operating as part of a public organization** under the Washoe County School District, or under the counties of Churchill, Lyon, and Pershing. These FRCs receive the advantages of public organizations' salaries and benefits which help them attract and retain staff and enjoy the infrastructure a public organization can provide in terms of purchasing, technology, and equipment. They also face challenges, in terms of fundraising, grant-writing, and the lack of flexibility in some personnel or operating policies. While the FRCs may receive in-kind assistance in terms of space, utilities, or support personnel, their basic operations rely on funds they raise themselves. When a cost of living or benefit increase is approved for public employees, some of these FRCs must find the funds to pay for these increases as the funding for the increases is not available from the public entity. This creates budget challenges for the applicable FRCs who are impacted by the increases.

Eleven Family Resource Centers operate as part of a **larger private non-profit.** This structure offers advantages of economies of scale in terms of administration, purchasing, and operational support. However, this structure also creates challenges when the agency's larger mission may not completely align and potentially overwhelm the FRC operations. This can be observed in small ways, such as locked doors to FRC clients and staff in agencies that provide domestic violence victims with shelter and protection. Larger manifestations include effectively limiting services primarily to the clients of the host agency, such as Head Start families or those with children attending a Boys and Girls Club. These families undoubtedly need assistance, but others in the community may not even realize the FRC is available to serve other community members.

Even if not tasked with FRC work, all employees of FRCs that are part of a public agency or larger non-profit may contribute to the success of the FRC through knowledge sharing, co-location of services, as well as administrative and/or fundraising support. Similarly, organizational resources such as space, technology, and infrastructure may contribute to the day-to-day operations of FRC.

Finally, **five** FRCs operate under the structure of an **independent non-profit**, category three, with the primary mission of serving families through an FRC lens. Three of the FRCs in this category have expanded the FRC programming far beyond the core services of information, referral and case management with additional funding that helps to support FRC staff and operations. The other two FRCs are in this category are struggling with financial instability and long-term sustainability.

The structure of an FRC had no correlation with location as different structures were commonly found in urban, rural, and frontier communities. Staff supporting FRC activities as reported by the FRC are detailed in Table 1.

Table 1. Staff and Organizational Structure of Nevada's FRCs

FRCs in Frontier Counties	Number of Staff	Organizational Structure and Community Setting
Churchill County Social Services	14 FT | 3 PT	Public Agency
Consolidated Agencies of Human Services	5 FT	Larger Non-Profit
Family Resource Center of Northeastern NV	8 FT	Independent Non-Profit
Frontier Community Action Agency	2 FT | 4 PT	Larger Non-Profit
Lincoln County Community Connection	1 PT	Independent Non-Profit
Little People's Head Start	1 PT	Larger Non-Profit
Nevada Outreach Training Organization	2 FT	Larger Non-Profit
Pershing County	1 PT	Public Agency

FRCs in Rural Counties	Number of FRC Staff	Organizational Structure and Community Setting
Community Chest	28 FT | 18 PT	Larger Non-Profit
Family Support Council	3 PT	Larger Non-Profit
Lyon County Human Services	32 FT | 15 PT	Public Agency

FRCs in Urban Counties	Number of FRC Staff	Organizational Structure and Community Setting
Cappalappa	3 FT	Independent Non-Profit
Central/South Reno	2 PT	Public Agency
East Valley	16 FT | 6 PT	Independent Non-Profit
HopeLink of Southern Nevada	22 FT	Larger Non-Profit
Lied Memorial Boys and Girls Club of S. NV	7 FT	Larger Non-Profit
Olive Crest	1 FT | 2 PT	Larger Non-Profit

FRCs in Urban Counties	Number of FRC Staff	Organizational Structure and Community Setting
Ron Wood	17 FT | 6 PT	Independent Non-Profit
Salvation Army	2 FT	Larger Non-Profit
Sparks and Northeast/Northwest Reno	1 FT |1 PT	Public Agency
Sun Valley/North Valleys/Spanish Springs	3 PT	Public Agency
Tahoe Family Solutions	4 FT | 1 PT	Larger Non-Profit

Summary of Persons Served and Programmatic Activities

FRCs served nearly 37,000 unduplicated individuals in SFY 2018-19. Average totals of individuals served are reflective of the relative population densities within regions. FRCs located in urban counties served an average of 2,654 individuals per annum, substantially higher than the frontier average of 823 and rural average of 384. This lower average total served within rural counties compared to frontier counties may be due to proximity in services; within frontier communities, the FRC may be the sole source of support or resources, while in rural areas, the community has more access to resources and support located in neighboring higher population areas.

Table 2. Individuals Served in FY19

FRCs in Frontier Counties	Unduplicated Individuals Served	Adults Served	Children Served	Seniors Served
Churchill County Social Services	731	366	198	167
Consolidated Agencies of Human Services	302	125	168	9
Family Resource Center of Northeastern NV	501	263	176	62
Frontier Community Action Agency	2,625	1,244	1,037	344
Lincoln County Community Connection	43	28	9	6
Little People's Head Start	922	304	585	33
Nevada Outreach Training Organization	1,399	622	545	232
Pershing County	51	15	23	13

FRCs in Rural Counties	Unduplicated Individuals Served	Adults Served	Children Served	Seniors Served
Community Chest	729	327	286	116
Family Support Council	155	76	66	13
Lyon County Human Services	270	162	86	22

FRCs in Urban Counties	Unduplicated Individuals Served	Adults Served	Children Served	Seniors Served
Cappalappa	132	62	38	32
Central/South Reno	1,992	808	1,023	161
East Valley	6,857	2,407	2,222	2,228
HopeLink of Southern Nevada	4,885	1575	2095	1215
Lied Memorial Boys and Girls Club of S. NV	2,357	939	1,138	280
Olive Crest	1,170	488	602	80
Ron Wood	1,621	852	556	213
Salvation Army	6,270	2,528	2,381	1,361
Sparks and Northeast/Northwest Reno	2,319	921	1,184	214
Sun Valley/North Valleys/Spanish Springs	1,284	506	634	144
Tahoe Family Solutions	301	142	134	25

In addition to referral and application assistance, some FRCs provide services such as parenting and child development classes, managing donation centers and food banks, and offering employment search and application assistance. Quantitative data on the numbers of services provided in each of these categories is described in Table 3. Specific additional services provided by each FRC can be found in their individual profiles. More information on individual profiles, and their online location, is available in Appendix A.

Table 3. Programmatic Activities in FY19

FRCs in Frontier Counties	New Case Files Opened	# of Referrals Made	Application Assistance Provided	Value of Application Assistance[6]
Churchill County Social Services	1,072	959	901	$535,711
Consolidated Agencies of Human Services	11	317	31	$20,776
Family Resource Center of Northeastern NV	199	12,418	300	$247,328
Frontier Community Action Agency	1,072	3,957	2,298	$5,770,971
Lincoln County Community Connection	29	67	64	$188,398
Little People's Head Start	199	66	11	$4,362
Nevada Outreach Training Organization	607	701	146	$89,991
Pershing County	15	49	37	$75,532

FRCs in Rural Counties	New Case Files Opened	# of Referrals Made	Application Assistance Provided	Value of Application Assistance[9]
Community Chest	174	112	146	$340,151
Family Support Council	49	305	0	$ -
Lyon County Human Services	1,268	743	1,465	1,645,828

FRCs in Urban Counties	New Case Files Opened	# of Referrals Made	Application Assistance Provided	Value of Application Assistance[9]
Cappalappa	72	578	489	$1,371,822
Central/South Reno	593	1,761	138	$297,414
East Valley	3,659	59,678	3,795	$3,548,240
HopeLink of Southern Nevada	1,463	16,650	576	$497,524
Lied Memorial Boys and Girls Club of S. NV	751	5,020	478	$876,846
Olive Crest	356	2,758	99	$281,986
Ron Wood	846	58,179	84	$109,826
Salvation Army	2,072	1,952	2,586	$1,636,338

[6] Documentation for how the value of the application assistance program was calculated is available in Appendix A.

FRCs in Urban Counties	New Case Files Opened	# of Referrals Made	Application Assistance Provided	Value of Application Assistance[9]
Sparks and Northeast/Northwest Reno	689	2,245	375	$828,874
Sun Valley/North Valleys/Spanish Springs	378	728	204	$452,258
Tahoe Family Solutions	88	1,195	211	$471,936
			Total	**$19,292,112**

In total, FRCs facilitated over $19 million in potential aid to families across Nevada in SFY 2019 through their application assistance programs. For every $1 Nevada spends to fund FRCs, they generate up to $14 in economic benefit to families and the communities in which they live. A detailed description of the calculations used to determine this proxy value can be found in Appendix A.

Financial and Programmatic Comparison of the Nevada System to Other States

Services and Programming Offered

Nevada's FRCs, dependent on funding, provide basic Family Resource Center supports that have not evolved to match the national model of Family Support Centers. According to the National Family Support Network (NFSN), the Unites States' coordinating body for Family Strengthening and Support networks, Family Support organizations:

> work with families in a multi-generational, family-centered approach to enhance parenting skills, foster the healthy development and well-being of children, youth, and families, prevent child abuse, increase school readiness, connect families to resources, develop parent and community leadership, engage males and fathers, support healthy marital and couples relationships, and promote family economic success.[7]

The NFSN supports statewide networks of Family Strengthening and Support organizations, including FRCs, that utilize a collective impact framework to provide coordinated support for families. More information on the NFSN, their model and members states, is available at https://www.nationalfamilysupportnetwork.org/.

A number of states began their implementation of family support programs in the form of FRCs and some, including Nevada, may still refer to FRCs. However, in examining other states, the investigators for this report found that many states have evolved to a more comprehensive and holistic service array that matches national guidance on what family support centers can do to support vulnerable families in their communities.

[7] National Family Support Network. "About Us". Accessed June 1, 2020 at https://www.nationalfamilysupportnetwork.org/about-us.

Each state takes a different approach in how they provide family support services. For example, some states have a central network where a statewide association may assist their family support centers with research, evaluation, training and streamlined standards of quality. They also can promote peer learning, mutual support and best practices. Some also work to advocate at the state and county level for policy and systems change that benefit families.

Additionally, many states have developed priority areas which inform the services that are offered at their family support centers. It is important to note that it is common for each center within a state to tailor their approach to meet their community's needs, and as a result, not all services are available in every center. The table below provides a snapshot of the approach Nevada and five other states have taken in providing family support services. The table is not intended to be a comparison; rather to be a tool to learn more about how individual states have tailored their services in order to achieve their desired outcomes and how their statewide associations, where applicable, assist their member centers. In scanning research across the states and within the family support field, state efforts are working toward key outcomes of optimal child development, family self-sufficiency and strengthening, child abuse prevention, and reduction in social determinants of health including access to care, poverty, and education and employment.[8] The five states listed alongside Nevada in Table 4 each take a different approach to providing family support. They are provided to share examples of how other states have evolved their FRCs to adapt to changing conditions in their state and with the families they serve. The states reviewed were selected based on their programmatic similarities to Nevada's objectives for the FRCs.

[8] National Family Support Network. "Current Members". Accessed June 2, 2020 at https://www.nationalfamilysupportnetwork.org/membership

Table 4. Structure and Programmatic Activities of Nevada and Select other States

Structure	Nevada	Colorado	Massachusetts	New Hampshire	Pennsylvania	Utah
Statewide Network Mission	Not Applicable	Mission: To ensure that Family Resource Center Association Member Centers are strong and optimally equipped to serve Colorado families.	Mission: The Massachusetts Family Center Network connects Family Center programs across the Commonwealth to provide training and technical support, while also promoting peer learning, mutual support and best practices.	Mission: To bring together the diverse leadership from existing and newly forming family resource centers and family support programs within New Hampshire under the common vision of establishing a statewide network of family support and strengthening practice within New Hampshire.	Mission: The Pennsylvania Family Center Network collectively raises awareness and facilitates communication, advocacy, and best practices across all programs toward strengthening families, nurturing children, and building communities.	Mission: A network of programs, providing trauma informed universal services that increase Protective Factors in families while building stronger communities.
Priority Areas	• Family self-sufficiency • Information and referral • Case management • Eligibility assistance	• Help families set and achieve transformative goals and become more self-reliant • Information and referral • Case management • Family support programs	• Parenting skills • Support groups for youth, parents and grandparents • Information and referral	• Positive parenting • Promote health, wellbeing and self-sufficiency	• Parent education • Child development • Information and referral	• Child abuse prevention • Family support

Structure	Nevada	Colorado	Massachusetts	New Hampshire	Pennsylvania	Utah
Services	• Parenting support • Access to resources • Child development activities • Family economic success activities • Educational activities • Community development activities	• Parenting programs • Home visiting programs • Parent support groups • One-on-one family development programs • Financial literacy	• Career services • Child care services • Civic engagement opportunities • Early childhood programs • Educational opportunities • English as a second language services • Family support services • Financial literacy • Housing services • Legal services • LGBTQ specialty counseling services • Medical and mental health services identification • Peer support programs • School supports and resources • Special education resources • Substance abuse programs	• Kinship navigation program • Educational programs for parents • Family advocacy program	• Parents as teachers program • Parent support groups • Parenting skills programs • Child health and development screenings • Promoting responsible fatherhood program • Child care programs • Child abuse prevention • Language skills programs • Literacy programs • Adult education • Job training and placement • Family activities • Toy and book lending libraries • Summer activities and after-school activities	• Crisis nurseries • LifeStart Village • Clinical services • Education classes • Family mentor • Adoption respite

Structure	Nevada	Colorado	Massachusetts	New Hampshire	Pennsylvania	Utah
Statewide Network Support Areas		• Connecting members • Training/ Technical Assistance • Systems change/Policy or Advocacy • Pass-Through Funding to Members • Marketing/ Public Awareness Activities • Shared Data Management System • Liaison with the State Office of Early Childhood	• Connecting members • Training/ Technical Assistance • Systems change/Policy or Advocacy • Pass-Through Funding to Members • Marketing/ Public Awareness Activities • Shared Data Management System	• Connecting members • Training/ Technical Assistance • Systems change/Policy or Advocacy • Marketing/ Public Awareness Activities	• Connecting members • Systems change/Policy or Advocacy • Marketing/ Public Awareness Activities	• Connecting members • Training/ Technical Assistance • Systems change/ Policy or Advocacy • Pass-Through Funding to Members • Marketing/ Public Awareness Activities • Shared Data Management System

Funding Sources and Structures

Other States

Other states rely on a variety of funding mechanisms to support Family Resource/Family Support Center networks. The following five states were selected for comparison to provide examples of the different ways that state governments support and fund their Family Resource/Family Support Center networks. Some of these approaches may serve as appropriate models when considering how to financially strengthen Nevada's FRC network.

Colorado | Colorado's Family Resource Center Association provides capacity building and resource development to strengthen the state's FRC network. Of their approximately $4.5 million annual budget, $3,321,564 is provided to the FRCs to support core service delivery and the remainder is utilized to support the operating costs of the Association and provide training, technical assistance, and quality measures assistance to FRCs. The $3.3 million pass-through amount includes $750,000 in a state-allocation. FRCs in Colorado have varied structures and programmatic offerings, with some operating independently and others operating within a larger non-profit or public agency. As such, FRCs may receive additional block grant dollars directly to support specific programming, and many also seek other public and private dollars to support their operating budgets.

Massachusetts |Massachusetts's Family Resource Centers are supported by funding from the Massachusetts Department of Children and Families (DCF). In SFY19 the line item for the DCF Family Resource Center, designated for the support and maintenance of family resource centers throughout the commonwealth, was projected as $12,310, 496.[9] This amount increased to $16,500,000 for SFY20. As some FRCs in Massachusetts are located within larger organizations, they likely also leverage funding from other sources to support their programming.

New Hampshire | Prior to 2010, New Hampshire provided a state allocation to support their FRC network. This allocation was eliminated in 2010 due to recessionary budget pressures. Following this elimination, the statewide coalition of non-profit FRCs and family support programs (FSPs) received a private grant to engage in strategic planning and to investigate the process for FRCs to receive "Quality Designations." According to Family Support New Hampshire, "Family Resource Centers of Quality [FRC-Q] are distinguishable because of the scope and depth of the services they provide, their commitment to the Principles of Family Support and the Strengthening Families Framework, and are not defined by any one or even multiple funding sources."[10]

The coalition and State determined that supporting FRC-Q designations for the state's FRCs was an ideal way to raise professionalism in the programs and the field, inspire confidence in funders, and provide opportunities for additional funding streams. Therefore, the State now provides approximately $2 million annually to the New Hampshire Children's Trust to support training, application processing,

[9] Massachusetts Summary Budget website. "DCF Family Resource Centers". Accessed May 27, 2020 at https://budget.digital.mass.gov/summary/fy20/enacted/health-and-human-services/children-and-families/48000200.

[10] Family Support New Hampshire. "Family Resource Centers of Quality Designation". Accessed June 2, 2020 at http://www.fsnh.org/frc-q-designation.html.

technical assistance, and other administrative tasks associated with FRC-Q assessment, application, and award. FRCs can apply and compete for other State funding to support direct service provision, such as Healthy Families initiatives and comprehensive family support for home visiting but are mostly funded through private foundations and fundraising.

Pennsylvania | The Family Center network in Pennsylvania is managed by the Office of Child Development and Early Learning, which, among other responsibilities, helps to braid funding to support Family Centers (FCs). The 42 Family Centers across the state receive approximately $9.1 million per year in base funding to support administrative and direct service provision. Approximately $4.3 million of this base funding is a pass-through from the federal Safe and Stable Family funding, and the remaining $4.8 million comes from a state-allocation. Most FCs also apply directly for other public funds to support specific programming as well as engage in fundraising activities to develop their annual budgets.

Utah | Utah's Family Support Center (FSC) network utilizes several funding streams to support their work. A state allocation is provided directly to all FSCs via the Department of Human Services to support Crisis Respite Nursery activities, which is the uniform programming offered by all FSCs in Utah. Additional allocations are also made to FRCs offering Adoption Respite Care. Anticipated annual funding for these combined allocations totals $1,947,000 each year between SFY20 through SFY24.

Prior to SFY20, FSCs also received an allocation of TANF funds from the Department of Workforce Services. Beginning July 1, 2019, those funds are now provided directly to the Utah Association of Family Support Centers (UAFSC). A portion of funding is utilized by UAFSC to support the Executive Director and other infrastructure costs associated with the network when it is engaging in DWS/TANF approved activities; non-DWS/TANF association activities are supported by annual membership dues and fundraising activities. The remainder of the DWS/TANF allocation is distributed to FSCs based on a UAFSC-developed funding formula. FSCs also utilize funding from other sources to support their work, and for the last year this information was available, that funding was reported as approximately $1.25 million. For the same time period, the DWS/TANF funding was reported as approximately $1.5 million, for an estimated annual state investment of approximately $3.4 million.

Many of these states illustrate one of the most successful sustainability mechanisms for FRCs, which is "braided" funding whereby compatible funding streams are joined to support mutual goals. The braided funding allows programs serving similar populations to share administrative costs while providing a more comprehensive service array and improved outcomes.

Nevada

All FRCs in Nevada are supported by an annual state allocation of the Fund for a Healthy Nevada, which is determined during the biennium budgeting process, resulting in an overall block of funding that is proportionally distributed to each FRC. The formula used to calculate the SFY 2018-19 allocation is included in Table 4, and a historical record of annual block funding is presented in Table 5.

Table 5. Funding Formula Reported by the State to Determine SFY 2018-19 FRC State Allocation

Base Funding	Total Regional Population	Proportional Population of Children
Based on total population, with funding ranging from $15,000 to $20,000	50% of remaining funds are allocated proportionally based on the percentage of the total state population within the service area the FRC	50% of the remaining funds are distributed proportionally based on the percentage of the total state population under age 18 within the service area of the FRC

Base funding[11] | Each FRC receives a base level of funding, based on the population of the region they serve. For most FRCs, this region corresponds to the county in which they are located. The allocations for organizations located in larger counties with multiple FRCs are based on a more nuanced population analysis by zip code. In recent years base funding has ranged from $15,000 for an FRC serving a population up to 9,999 people to $20,000 for an FRC serving a population of over 100,000 people.

The remaining funds are then allocated based on two weighted factors:

Total regional population | 50% of the remaining funds are distributed proportionally based on the percentage of the total state population served by each FRC.

Regional population of children | 50% of the remaining funds are distributed proportionally based on the percentage of the total state population under age 18 that is served by each FRC.

The funding allocation prior to SFY 2019 included a Regional Populations Experiencing Poverty weighted factor. This factor was removed as services offered by FRCs are not limited to individuals and families experiencing poverty.

[11] 2017 US Census data was used to generate population data that informed the SFY 2018-19 financial distribution by FRC.

Table 6. Historical Family Resource Center State Allocations[12]

FY	FRC Legislatively Approved Authority	Population of Nevada[13]	Per Capita State FRC Investment Per Nevada Resident
1996	$ 1,130,000		
1997	$ 956,313		
1998	$ 1,331,819		
1999	$ 1,328,663		
2000	$ 1,320,792	2,066,831	0.64
2001	$ 1,320,792	2,132,498	0.62
2002	$ 1,302,722	2,206,022	0.59
2003	$ 1,301,445	2,296,566	0.57
2004	$ 1,315,143	2,410,768	0.55
2005	$ 1,314,392	2,518,869	0.52
2006	$ 1,254,551	2,623,050	0.48
2007	$ 1,544,299	2,718,337	0.57
2008	$ 1,306,799	2,738,733	0.48
2009	$ 1,306,799	2,711,206	0.48
2010	$ 1,379,176	2,724,634	0.51
2011	$ 1,272,470	2,721,794	0.47
2012	$ 1,289,062	2,750,217	0.47
2013	$ 1,289,062	2,800,967	0.46
2014	$ 1,300,000	2,843,301	0.46
2015	$ 1,300,000	2,897,584	0.45
2016	$ 1,437,334	2,953,375	0.49
2017	$ 1,437,334	2,986,656	0.48
2018	$ 1,365,000	3,057,582	0.45
2019	$ 1,365,000	3,112,937	0.44
2020	$ 1,700,000[14]		
2021	$ 1,700,000		

State funding has increased since the inception of the FRC model in SFY 1996, with an initial State investment of $1.1 million growing to $1.7 million in SFY 2020. However, as illustrated in Table 6, the amount of funding invested has not increased proportionally to the population growth experienced in

[12] Ibid.
[13] Certified Population Estimates of Nevada's Counties, Cities and Towns 2000 to 2019 Estimates from NV State Demographer, NV Department of Taxation. Accessed April 3, 2020 at https://tax.nv.gov/uploadedFiles/taxnvgov/Content/TaxLibrary/Final%20Certified%20Popul%20of%20Nevada's%20Counties%20and%20Incorp%20Cities%20and%20Unincorporated%20Towns%202019.pdf
[14] The increase in years 2020 and 2021 includes $300,000 to support a case management system to be implemented in the FRCs.

Nevada; the per capita investment per Nevada resident has decreased from $.64 in 2000 to $.44 in 2019 (the earliest and most recent dates population data was available). Additionally, inflation contributes to this decrease, as the $1.1 million allocated in 1995 is approximately the equivalent of $1,918,019 in 2020 dollars.[15]

The use of braided funding assisted FRCs in their initial implementation as many also became collocated with the Family to Family Connection program. As previously stated in the timeline, the Family to Family Connection program was eliminated due to recessionary pressures in 2011, (see Appendix G for more details).

The majority of Nevada's FRCs raise and utilize funding from other public and private sources to better serve their communities, as demonstrated in Table 7. Other funding may include funds that support efforts complementary to FRC activities, or those that support the larger organization as a whole.

Table 7. FRC Funding Sources

FRCs in Frontier Counties	FY19 State FRC Funding Received	Per Capita State Investment of Individuals Served	Other FY2019 Funding Utilized
Churchill County Social Services	$21,217	$29.02	$2,728,783
Consolidated Agencies of Human Services	$12,074	$39.98	$302,926
Family Resource Center of Northeastern NV	$32,383	$64.64	$503,398
Frontier Community Action Agency	$29,497	$11.24	$352,950
Lincoln County Community Connection	$11,711	$272.36	$23,878
Little People's Head Start	$27,365	$29.68	$0
Nevada Outreach Training Organization	$31,842	$22.76	$638,156
Pershing County FRC	$23,529	$461.36	$0

FRCs in Rural Counties	FY19 State FRC Funding Received	Per Capita State Investment of Individuals Served	Other FY2019 Funding Utilized
Community Chest	$10,879	$14.92	$1,989,121
Family Support Council	$28,644	$184.80	$1,273,413
Lyon County Human Services	$34,628	$128.25	$4,585,431

[15] Accessed March 2020 at https://www.usinflationcalculator.com/.

FRCs in Urban Counties	FY19 State FRC Funding Received	Per Capita State Investment of Individuals Served	Other FY2019 Funding Utilized
Cappalappa	$12,931	$97.96	$120,101
Central/South Reno	$43,302	$21.74	$68,329
East Valley	$318,119	$46.39	$974,142
HopeLink of Southern Nevada	$149,670	$30.64	$1,410,330
Lied Memorial Boys and Girls Club of S. NV	$198,455	$84.20	$9,101,545
Olive Crest	$182,177	$155.71	$45,000
Ron Wood	$34,753	$21.44	$1,289,043
Salvation Army	$16,995	$2.71	$179,453
Sparks and Northeast/Northwest Reno	$109,826	$47.36	$118,547
Sun Valley/North Valleys/Spanish Springs	$21,358	$16.63	$228,472
Tahoe Family Solutions	$13,644	$45.33	$866,356

> ***Family FRCs are well versed in doing everything with almost nothing. They are focused on helping families do what's best for themselves. They do a really good job of connecting families with other resources.***
>
> – Key Contributor

Family Resource Center Capacity Assessment

Social Entrepreneurs, Inc. and SagePine Strategies collaborated with the 22 Nevada-based FRCs in assessing their organizational capacity by administering the TCC Group's Core Capacity Assessment Tool (CCAT). Upon completing their CCAT, each organization participated in CCAT interpretation sessions. During these sessions, participants had the opportunity to discuss their organization's CCAT results and identify ways in which it might focus its capacity building efforts.

The following sections illustrate the quantitative aggregate results of the Nevada FRCs' CCAT.[16] Note that while 22 FRCs participated in this process, not all participants provided sufficient numbers of responses to each question, which limited the FRCs' ability to be scored within each capacity. This analysis of cohort-level data provides findings and insights on capacity needs across all participating organizations. Definitions for all subcategories included in this report are included in Appendix E.

Core Capacity Assessment Tool (CCAT)

The Core Capacity Assessment Tool (CCAT) is an online assessment instrument. The survey-based tool is designed to collect information from key decision-makers in an organization and create prioritized recommendations for building organizational capacity. Staff, board members, and organizational leadership score the organization across different capacity areas, and scores translate into assessment categories based on predetermined thresholds. A score above 230 indicates that the organization believes it has a high level of capacity within that category, a score between 190 to 230 indicates that the organization believes it has satisfactory levels of capacity, and a score of less than 190 indicates that this is a category the organization believes it needs to strengthen.

Figure 2. CCAT Score Categories

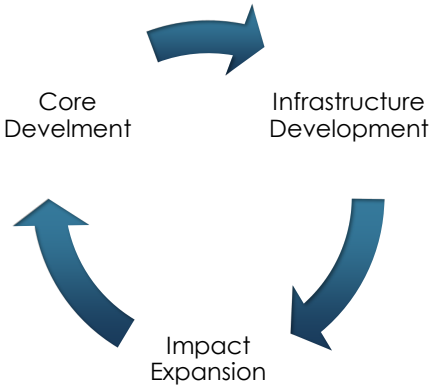
CCAT Score	Category	Meaning
Above 230	Strong	The organization believes it has a high level of capacity.
190 to 230	Satisfactory	The organization believes it has a satisfactory level of capacity.
Less than 190	Challenging	This is an area the organization feels it needs strengthen.

Lifecycle Stage Placement of the FRC Cohort

Each FRC's results were used to place them in one of three lifecycle stages. It is important to note that one stage is not better than the other, successful organizations are constantly moving through the

[16] All data presented in the following sections was compiled in the *Nevada Family Resource Centers CCAT Aggregate Analysis* (February 2020), and is attributable to the TCC Group.

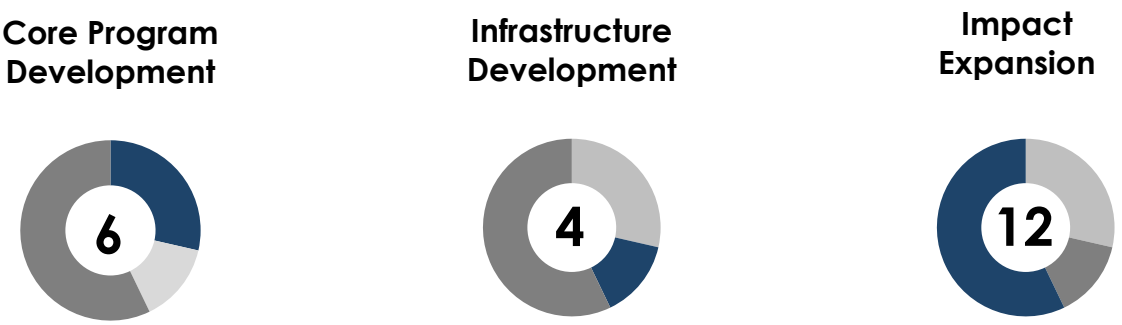
three lifecycle stages. It is critical to continuously build capacity in the lifecycle stage an organization is into move to the next lifecycle stage. For an FRC to be sustainable, they should be moving through each of the lifecycles, or they are at risk of stagnation.



The lifecycle stage of each organization is based on the level of capacity it has built in various areas of organizational development. Lifecycle stage determines how organizations should prioritize capacity building resources.

- **Core Program Development** means closely aligning an organization's programs with its mission and vision – and clarifying within the organization how these elements relate to each other. The **six** FRCs in this stage need to clearly articulate mission and vision and align these to program development. Established organizations want to ensure a strong connection between programs and mission/vision.
- **Infrastructure Development** means a focus on the systems needed for an organization to operate smoothly, including having policies in place, good communication between staff, and initial evaluation efforts in order to improve programs. The **four** FRCs in this stage need to build additional capacity to implement programming and strengthen organizational processes prior to expanding impact beyond their core program delivery.
- **Impact Expansion** means the organization is broadening its approach to achieving mission impact beyond its core programs. This may include strategic alliances, partnerships, policy/advocacy work or further outreach in its community. The **12** FRCs in this stage need to determine how best to achieve impact beyond core program delivery. This may involve strategic alliances, policy/ advocacy partnerships, and/or further outreach in the community.

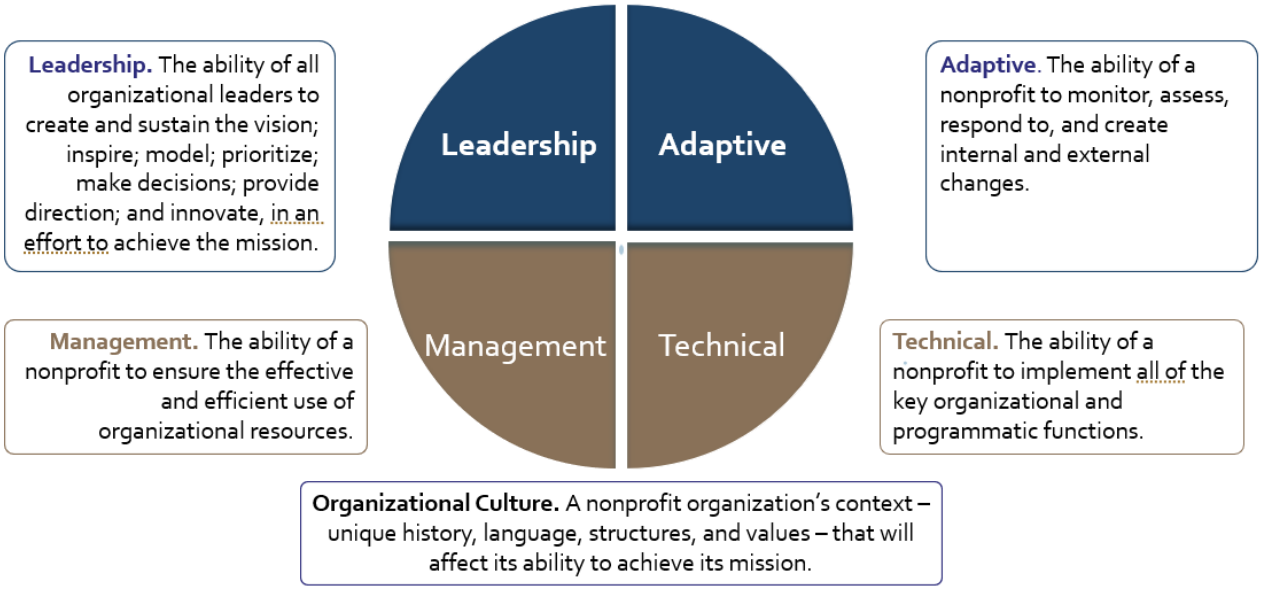
Figure 3. Number of Nevada FRCs within each Lifecycle Placement Category



Category Capacity

The CCAT measures organizational strengths across four Core Capacity categories (Adaptive, Leadership, Management, and Technical) as well as presenting relevant information within Organizational Culture.

Figure 4. Capacities Assessed by the CCAT Tool



> ***FRCs face political, economic, and geographic landscape challenges, both locally and as a statewide network. They are all similar, but they are all different too.***
>
> -- Key Contributor

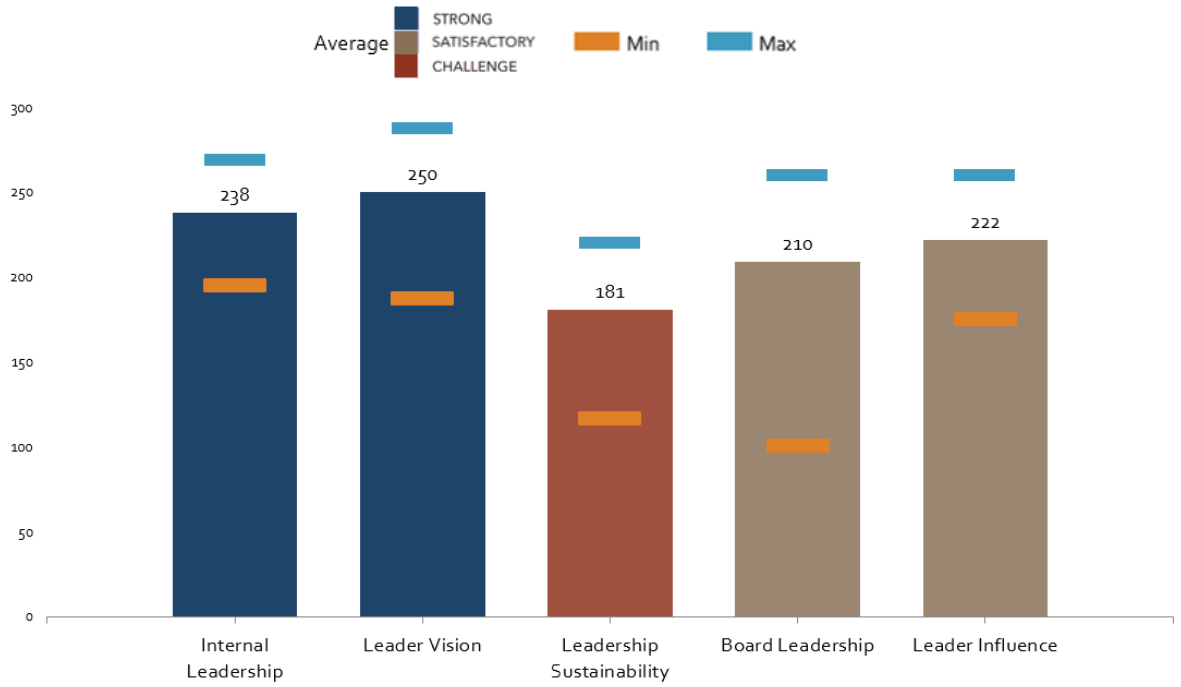
Leadership Capacity

Leadership Capacity (composed of five subcapacities), is the ability of the organization's leadership to create and sustain the vision, as well as provide direction and make decisions. This capacity pertains to the entirety of leadership including executive staff, high-level management staff, and board members.

SUBCAPACITIES OF LEADERSHIP		
INTERNAL LEADERSHIP	LEADER VISION	LEADERSHIP SUSTAINABILITY
BOARD LEADERSHIP	LEADER INFLUENCE	

On average, the FRC cohort has satisfactory capacity or higher in most Leadership categories, as demonstrated by the figure below. Leadership Sustainability is the only subcapacity with an average rating, placing the FRC Cohort within the "Challenge" range.

Figure 6. Average Score of the FRC Cohort in Leadership Subcapacities



Leadership Capacity: Strengths and Challenges

As a cohort, the FRCs show strength within the Leader Vision subcapacity, with 14 out of 20 responding organizations placing themselves within the Strength range. This strength indicates that organizational leaders formulate a clear vision and motivate others to pursue it. Internal Leadership also scored in the Strength category, indicating that organizational leaders apply a mission centered and inclusive approach to making decisions, and inspire and motivate others in support of the mission.

The cohort is challenged in the Leadership Sustainability subcapacity, which gauges how effectively an organization cultivates leaders, plans for leader succession, and avoids an over-reliance on one leader. It is worth noting that organizations that score themselves highly in Leader Vision, as the FRC cohort does, often encounter issues with succession planning and building a bench of qualified leaders.

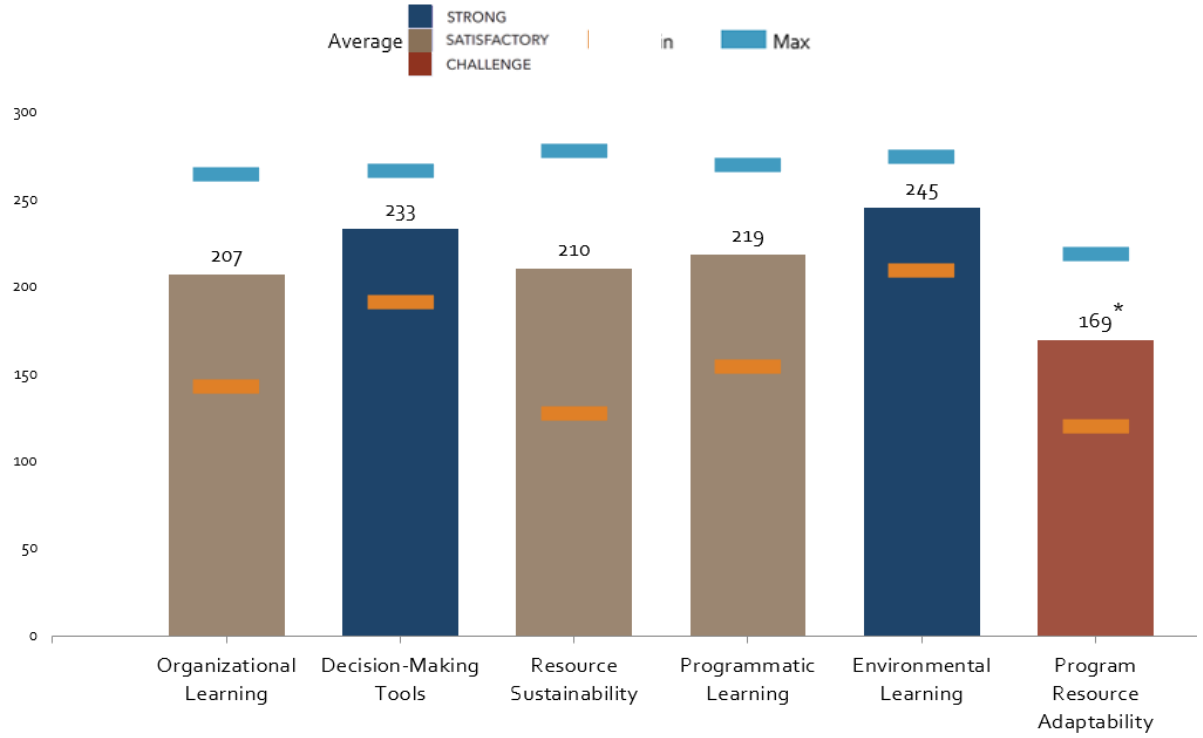
Adaptive Capacity

Adaptive Capacity is the ability of an organization to monitor, assess, create, and respond to change. It is composed of six subcapacities:

SUBCAPACITIES OF ADAPTIVE		
ORGANIZATIONAL LEARNING	DECISION-MAKING TOOLS	RESOURCE SUSTAINABILITY
PROGRAMMATIC LEARNING	ENVIRONMENTAL LEARNING	PROGRAM RESOURCE ADAPTABILITY

On average, the FRC cohort has satisfactory capacity or higher in most Adaptive categories, as demonstrated by the figure below. Program Resource Adaptability is the only subcapacity with an average rating placing the FRC Cohort within the "Challenge" category.

Figure 5. Average Score of the FRC Cohort in Adaptive Subcapacities



Adaptive Capacity: Strengths and Challenges

As a cohort, the FRCs show strength within the Environmental Learning subcapacity, with 15 out of 20 responding organizations placing themselves within the Strength range. This strength indicates that the FRC cohort is collectively using collaboration and networking to stay in tune with their community and stay current in the field. Decision-making tools also scored in the Strength range, indicating that the cohort is using important tools and resources, such as outside technical assistance, in-house data, client data, and staff input to make decisions.

The cohort is challenged in the Program Resource Adaptability subcategory. Organizations often average scores within the Challenge range for this subcategory as they rarely adapt their programming in real time as resources are reduced.

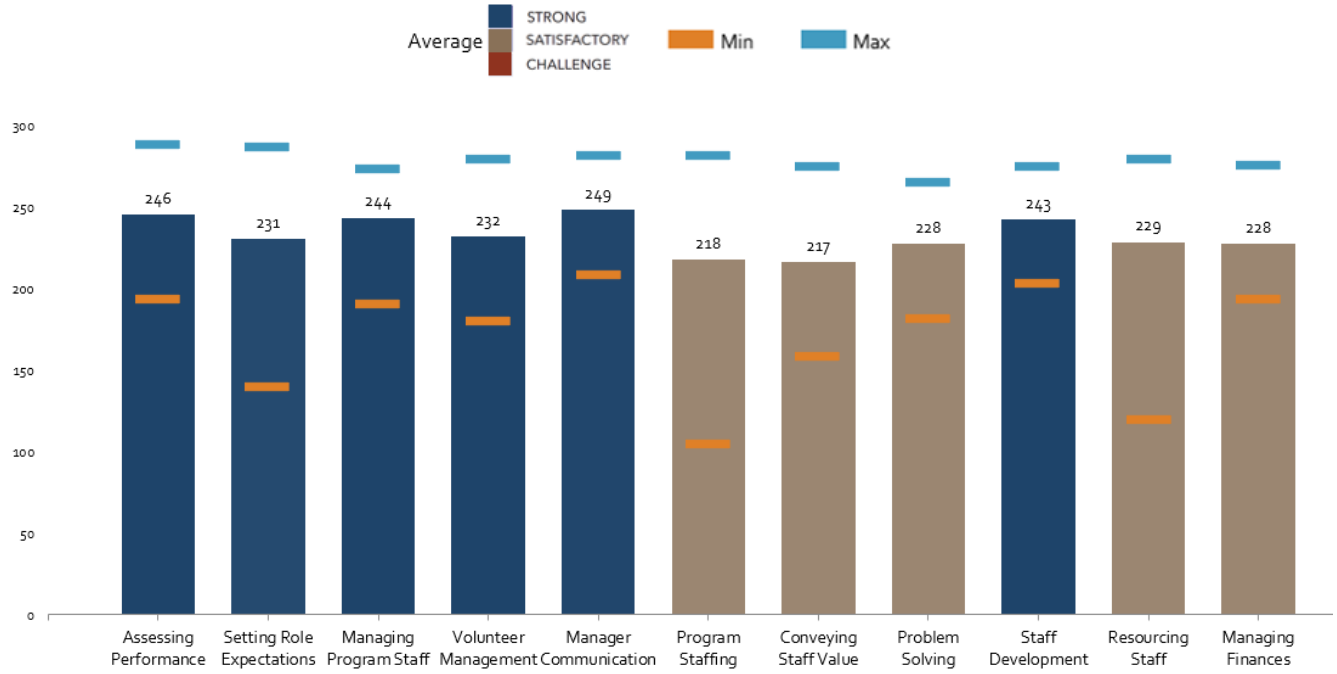
Management Capacity

Management Capacity, the capacity to efficiently and effectively use their resources, is composed of the following 11 subcapacities:

SUBCAPACITIES OF MANAGEMENT		
ASSESSING PERFORMANCE	SETTING ROLE EXPECTATIONS	MANAGING PROGRAM STAFF
VOLUNTEER MANAGEMENT	MANAGER COMMUNICATION	PROGRAM STAFFING
CONVEYING STAFF VALUE	PROBLEM SOLVING	STAFF DEVELOPMENT
RESOURCING STAFF	FINANCIAL MANAGEMENT	

On average, the FRC cohort has satisfactory capacity or higher in all Management subcapacities, as demonstrated by the figure below.

Figure 7. Average Score of the FRC Cohort in Management Subcapacities



Management Capacity: Strengths and Challenges

As a cohort, the FRCs show strength within six Management subcapacities, three fall within a Human Support category and the other three within a Systems Support category. This depicts an even distribution of strength between subcapacities associated with people and those linked with systems. Descriptions of these six categories can be referenced in Appendix E.

While the FRC cohort did not average a Challenge rating in any Management subcapacity, the CCAT analysis noted that only five of 21 responding organizations placed themselves in the Strength category for Conveying Staff Value. Given the importance of staff morale and retention to an organization's success, there may be the opportunity for management to prioritize providing positive feedback, rewards, and time for reflection to their staff.

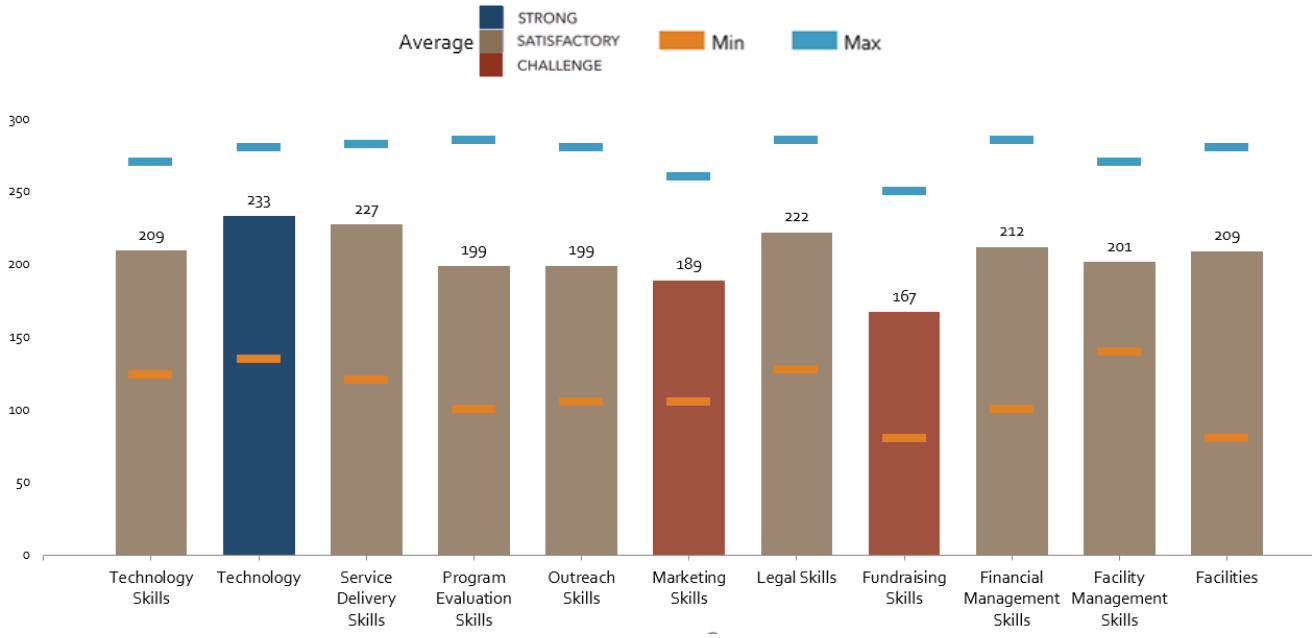
Technical Capacity

Technical Capacity, the ability to implement all key organizational and programmatic functions, is composed of the following 11 subcapacities:

SUBCAPACITIES OF TECHNICAL			
TECHNOLOGY SKILLS	TECHNOLOGY	SERVICE DELIVERY SKILLS	PROGRAM EVALUATION SKILLS
OUTREACH SKILLS	LEGAL SKILLS	MARKETING SKILLS	FUNDRAISING SKILLS
FINANCIAL MANAGEMENT SKILLS	FACILITIES	FACILITY MANAGEMENT SKILLS	

On average, the FRC cohort has satisfactory capacity or higher in most Technical subcapacities, as demonstrated by the figure below. Marketing Skills and Fundraising Skills are the only subcapacities with an average rating placing the FRC Cohort within the "Challenge" category.

Figure 8. Average Score of the FRC Cohort in Technical Subcapacities



Technical Capacity: Strengths and Challenges

As a cohort, the FRCs show strength within the Technology subcapacity, with 13 out of 20 responding organizations placing themselves within the Strength range. This strength indicates that the organization has the equipment, systems, and software, etc. to run efficient operations.

The cohort is challenged in both the Marketing Skills and Fundraising Skills subcapacities, which gauge an organization's ability to communicate effectively with internal and external stakeholders; and develop resources for efficient operations, including management of donor relations; respectively. Organizations identifying challenges in articulating their vision and mission to external stakeholders often score themselves low in the technical subcapacities related to fundraising, marketing, and conducting outreach. These scores often correspond, as they do within the FRC cohort, with low internal adaptability scores (because it is hard to articulate what you do not know).

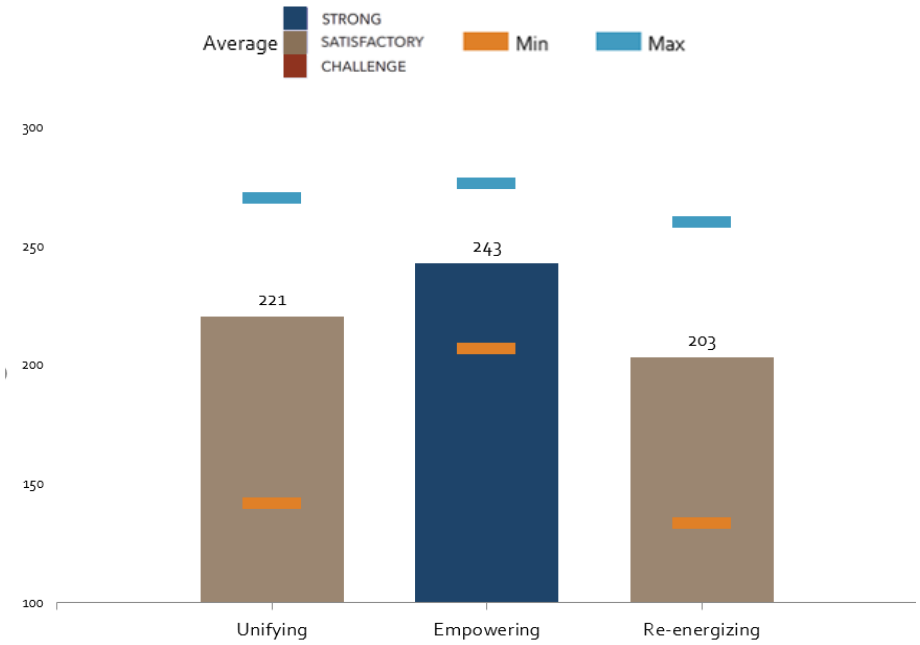
Organizational Culture

Organizational Culture, while not a Core Capacity, relates to history, values and beliefs of an organization, and comprises the context in which the core capacities operate. It is composed of the following three subcapacities:

SUBCAPACITIES OF ADAPTIVE		
EMPOWERING	RE-ENERGIZING	UNIFYING

On average, the FRC cohort has satisfactory capacity or higher in all Organizational Culture subcapacities, as demonstrated by the figure below.

Figure 9. Average Score of the FRC Cohort in Organizational Culture Subcapacities



Organizational Culture: Strengths and Challenges

All responding FRCs placed themselves in either the Satisfactory or Strong range for Empowering, indicating that their organizations promote a culture of learning, sharing, mutual respect, and a belief in the value and agency of staff and clients.

While both Unifying and Re-energizing averaged in the Satisfactory range, each had several organizations that placed themselves within the Challenge range for these subcapacities. This indicates that some FRCs do not believe there is time for staff to reflect on their work, socialize, and reconnect with why they are doing the work (Re-energizing) and/or that open and honest communication across all levels in the organization, leading to a sense of a cohesive group identity, is not being nurtured (Unifying).

FRC-Identified CCAT Focus Areas

During each site visit, FRC staff were asked to reflect on their specific organizational CCAT results and, as a group, agree on which areas they would like to focus on improving in the future. The most common responses are presented in table 8 below.[17]

Table 8. Top CCAT Subcapacities Prioritized by FRC Staff

CCAT Subcapacity	Number of FRC that Prioritized this Subcapacity
Organizational Learning	6
Board Leadership	5
Internal Leadership	5
Marketing Skills	4
Leadership Vision	3
Resource Sustainability	3

Organizational learning, an organization's ability to self-assess, use assessment data/ findings to conduct strategic planning, and follow through on strategic plans, were the most common self-identified focus area with six responses. **Board and Internal Leadership** each had five FRCs that identified a priority to focus improvement efforts in these areas, and descriptions of those subcapacities are provided below (descriptions of all subcapacities can be found in Appendix E).

- **Board Leadership**: The board provides fiduciary oversight, holds organizational leaders accountable for progress toward achieving the mission, and conducts outreach to garner resources and connect people with the mission.
- **Internal Leadership**: Organizational leaders apply a mission centered and inclusive approach to making decisions and inspire and motivate others in support of the mission.

[17] FRC staff responded with between one and four priority areas; a total of 45 focus areas were noted. Staff did not always reference a specific CCAT capacity or subcapacity. In those cases, SEI staff assigned a category based on the content and context of the response.

Situational Analysis

The situational analysis of Nevada's FRCs in 2020 is informed by telephonic entrance interviews with each FRC, physical site visits, electronic self-assessments through the CCAT process, and data analysis, all conducted in the first quarter of 2020. Identified strengths, challenges and opportunities are presented with a focus on strengthening sustainability of FRCs in the years ahead.

Strengths of the FRC System

Nevada's FRCs are part of a national family strengthening movement designed to provide families with prevention and intervention services to address their unique situations and improve community stability and resiliency. They help families solve problems by providing them with skills and tools to strengthen family systems. A 2019 Issues Brief from Casey Family Programs found that "…FRCs are distinct in that they are uniquely community-focused, are driven by family needs, and offer a multitude of programs and resources. Most aim to be one-stop shops for children and parents that address all five protective factors (Parental Resilience; Social Connections; Concrete Support in Times of Need; Knowledge of Parenting and Child Development; Social and Emotional Competence of Children).[18]

FRCs throughout Nevada utilize a variety of structural models based on the unique attributes of a given community, its location, and the relationships and resources each FRC has forged. Every FRC provides the core services of information, referral, case management and develops additional programmatic offerings guided by an FRC Advisory Board representing the interests of each community. While organizational structures vary, FRCs share certain strengths in service delivery and an authenticity that attracts local residents to seek services from prevention to crisis intervention.

Culture of FRCs

FRCs understand the distinct needs of their communities, whether they are in a multi-county frontier area, hundreds of miles from a major city, or an urban neighborhood with a high density of diverse, low-income populations, modeling internal and external collaboration. They are flexible, innovative and resourceful in patching together disparate funding, materials, and resources to cover funding gaps to produce seamless programming.

The collaborations are often very specific to the town or neighborhood where the FRC is located. For example, in Sparks, the FRC partners with Health Plan of Nevada (HPN), one of the Medicaid managed care organizations (MCOs), to develop joint case plans for families with complex medical needs, including transitional housing resources. East Valley Family Services collaborates with the Family Drug Court in Las Vegas to provide resources for struggling families who are working to regain custody of their children.

[18] Casey Family Programs. "Do place-based programs, such as Family Resource Centers, reduce risk of child maltreatment and entry into foster care?" Accessed April 27, 2020 at https://www.casey.org/family-resource-centers/.

In Mesquite, the FRC partners with a local bakery to distribute free bread to indigent populations. In Elko, the FRC collaborates with the Nevada Department of Wildlife (NDOW) to distribute ground venison from animals poached from public lands. The Lyon County FRC collaborates closely with private landlords who offer affordable housing, and in Carson City, the Ron Wood Family Resource Center trades items it cannot use with a local consignment store for clothing and furniture vouchers for FRC clients.

Throughout Nevada, FRCs partner with the Food Bank of Northern Nevada and Three Square in southern Nevada to distribute food resources. Many FRCs co-locate their services with the WIC program and work collaboratively to meet the needs of families with young children.

FRCs are constantly adapting to changes in local culture such as the widespread use of social media as a communications tool. As clients gravitate more towards Facebook, Twitter, and Instagram, FRCs have integrated these communication platforms, including the FRC of Northeastern Nevada which follows a sophisticated algorithm to ensure posts are timely and varied. Other social media innovations include HopeLink of Southern Nevada's use of social media as a fundraising mechanism and Cappalappa's tracking of community needs through various Facebook pages. In some frontier areas, clients use Facebook Messenger to request an appointment or communicate with a case manager.

Leveraging resources and relationships is second nature to FRCs. The FRCs that have a strong technology infrastructure almost always have a staff member, a spouse, friend of a staff member, or a committed volunteer who has helped them overhaul their system. One leader with a special interest in technology succeeded in acquiring a Google grant to build a sophisticated in-house system while other FRCs have staff who have leveraged their on-the-job technology training into a valuable agency resource, maintaining their Information Technology (IT) systems themselves.

Aggregated results from the CCAT revealed an overall strength in an empowering organizational culture in Nevada's FRC network. This empowering philosophy informs the direct client work performed by FRC staff who repeatedly state their mission is to provide a "hand up" not just a "hand out."

> ***We can't grow the FRC network with the dollars we have – everything costs more and yet the budget has been stagnant. They can't continue to do more or even sustain their services with the same amount of funding; they "shrink their touch" every time one closes or loses funding.***
>
> — Key Contributor

Attributes of Staff

FRC staff throughout the state share many attributes. During site visits, staff demonstrated passion and a commitment to helping children, families, and seniors to address their unique concerns. They are empathetic and deeply understanding that anyone can suddenly face a difficult situation and need assistance and expressed satisfaction when they effectively move a family in their community from crisis to stability.

Many FRC directors have held their positions for more than 10 years, and several for nearly 20. Through analysis, they have demonstrated to be skilled at working with people in crisis and excellent managers of their available resources and can adapt as needed. Leader Vision and Internal leadership were rated as strengths in the aggregated CCAT results, reflecting the ability of FRC Directors to establish a work atmosphere that is mission centered and motivational.

Especially in frontier Nevada, FRC staff have reported that they cannot depend on immediate assistance from outside the area and are quick to enlist other members of the community, including their own family members if needed, to address an emerging need or help a family in crisis.

Finally, FRC staff serve as key champions for their communities across the state and are a voice for many clients who are not able to publicly talk about their situations or are unable to advocate for themselves.

Trusted Community Resource

FRCs are a vital part of the communities they serve and trusted by people that might not access services any other way, offering a welcoming atmosphere to those in need. After 25years of service, they remain very relevant today as conduits of community-based services, looked to by their communities as a source of assistance.

FRCs are on the front line of every community crisis whether it be affordable housing, food insecurity, or unemployment in a depressed economy and are adept at looking at the complex situation they are confronted with to assist in finding a solution. Their expertise in case management is perhaps their biggest strength when combined with their empathetic approach. Successful FRCs forge community partnerships, building strong relationships with public and private resources to ensure their clients receive the services they need to carry out a case plan that will lead them toward stability.

> ***We treat everyone one with respect and are very customer service oriented. A lot of times people are embarrassed to come in here. You have to have a friendly face and give more than you take.***
>
> — FRC Staff Member

FRCs are experts in the core service of information and referral. If a FRC does not provide a needed service directly, the staff will know where to go to get it. The FRC has an active intake process and are skilled at encouraging clients to take the necessary steps toward assistance. One Director explained, "When we can offer our families a solution to an immediate need such as Christmas gifts or Halloween costumes, we can get them through the door and help them realize it's not scary and it's not a stigma and it's not a bad thing to take parenting classes."

Financial Resiliency

Despite flat base funding, and significant, decreases in funding from other sources, many of Nevada's FRCs have shown remarkable resiliency in sustaining programs and serving families. Although some FRCs have had to dramatically decrease hours or eliminate programs, the majority have utilized a variety of strategies to respond to community needs.

Diversified funding has enabled many FRCs to develop a buffer against economic uncertainty and sudden changes in funding streams. A diversified funding portfolio provides a cushion when an individual program's funding is suddenly downsized or eliminated, giving FRC directors more options to maintain core staffing and agency stability. For example, FRCs in Pahrump, Carson City and Virginia City each have more than 20 unique funding sources and effectively manage an intricate web of ever-changing finances within a private, non-profit framework. FRC finance staff employ creative solutions to funding challenges by maximizing opportunities to leverage public and private funding to cover holes in the budget while keeping a close eye on long-term sustainability.

Multi-county programming is another sustainability technique utilized by a surprising number of FRCs in rural areas. By developing expertise in specific program delivery areas, these FRCs accept contracts to serve multiple counties using mobile staff or employing staff at long distances from their home office. Examples of this strategy include: 1) the Grandparent Respite Program offered throughout northern Nevada by the Family Resource Center of Northeastern Nevada; 2) Nevada Families First, a home-visiting program operated by Community Chest in Virginia City; and 3) Jessie's Ranch, a person-centered program for adults living with developmental disabilities run by the Family Support Council in Douglas County. Several FRCs partner with each other, by sharing space or sub-contracting parts of larger grants to serve specific geographic areas or to provide specific services.

> ***The FRC funding is literally a jigsaw puzzle. Even the smallest change affects everything.***
>
> — FRC Staff Member

Owning facilities is a strategy four (4) FRCs have employed to increase financial stability and avoid constant rent increases. Examples include: 1) Cappalappa FRC purchased their building and now dedicates half of the space to a community Thrift Store which generates substantial income for the agency's operating budget 2) Hawthorne Consolidated Agencies of Human Services purchased a former auto body shop and transformed it into office space with a large food storage area to support their multi-county food distribution program; 3) Community Chest in Virginia City built a community center which now houses a childcare center, primary care facilities, recreational space, a library, as well as more traditional FRC programs; and 4) The Family Resource Center of Northeastern Nevada in Elko rents out part of the building they own in a downtown neighborhood to generate income to support its programming.

Community partnerships for in-kind buildings also provides stability and financial savings for Nevada's Family Resource Centers. There are many examples of substantial community contributions of space and utilities from public entities such as the Washoe County School District, Lyon, Pershing and Churchill counties, and the cities of Henderson, Battle Mountain and Carson City. Many non-profits have also adopted Family Resource Centers as part of their core programming, offering them space adjacent to Head Start classrooms in Ely and the Boys and Girls Clubs in Las Vegas.

Entrepreneurship is yet another mechanism used by FRCs to sustain themselves. Tahoe Family Solutions operates a large community Thrift Store which supports counseling services, a camp program and a homework club. HopeLink of Southern Nevada owns four neighborhood stabilization properties which can be sold when they start maturing in six (6) or seven (7) years. Many FRCs run annual special events, from galas to fun runs, and some target large donors within their community for contributions to specific programs. Fee for service income arrangements with local courts that order their clients to complete parenting classes or other programming also generate program revenue for FRCs.

> ***There is true collaboration happening in rural Nevada where innovations are breaking through. It's exciting to harness that energy.***
>
> — FRC Staff Member

Vignette – An Hour in A Nevada FRC

"I just thought I'd pop in this morning to see if you had any extra yarn," said an older woman as she walked through the door of the FRC on a Tuesday in February. "I want to finish the hats I'm making for the grandkids."

"Sure - take a look over in that corner," replied the FRC worker with a friendly smile, as she picked up the phone to answer a call about commodity food distribution. The worker kept the conversation going between more phone calls. "How are you guys doing for food out there?" she asked, explaining to a visitor that the woman lived with her family a few miles outside of the small rural town.

"Well, I wouldn't say no to some more if you have it to spare," she replied. When she walked out of the FRC a half hour later she had her yarn, a box of food, and a promise to return the next day with the documentation she needed to file for Supplemental Nutrition Assistance Program (SNAP) and Temporary Assistance for Needy Families (TANF) benefits, having finally agreed to seek public assistance to get her family past recent job loss and illness.

"I've been working with her for over a month now," said the relieved FRC worker. "They're very proud people and it's hard for them to ask for help." She pointed to a sheaf of papers on a clipboard, noting "There are jobs around here, but most of them are for hard physical labor. That's not going to work in her household." The job titles confirmed her words: Cattle Herder, Sheep Herder, Driller, Haul Truck Operator, Shovel and Drill Mechanic.

A younger man entered the crowded office looking for diapers and left with a bundle and some encouraging words. A woman came in to talk about getting her pregnant daughter on the WIC program and left with an appointment time and some food.

A middle-aged woman with mental health concerns came in for a chat. The FRC worker asked her about her meds in a straightforward manner and she admitted she was "out". A few calls later, she had an appointment with her mental health provider, albeit a few weeks down the road. She left with some food and a cheery 'see you tomorrow.' "She comes in every day," said the worker. "I like to keep tabs on her."

She walked outside with the visitor, pointing out an area for a community garden in the spring and a new shade structure built by the county to shield workers from the sun during commodity food distribution. She unlocked a large container shed full of donations of car seats, clothing, and household items. "These donations from people in town help so many families in outlying areas who are poor, unemployed, and struggling to make ends meet," she explained.

"We don't ask intrusive questions about how they got to the place they're in. We stay positive and plan for the future, and in the meantime, we try to provide some concrete assistance to get them through the day, whether that's food, winter clothing for the kids, diapers, or a kitchen table. We build a relationship with them so they'll keep coming back and we can work on the underlying issues."

As she padlocked the shed and walked back into the small building (provided free to the FRC by the county) she talked about the overwhelming needs in her community and the difficulty in meeting them with just one FRC staff, working part-time. But she didn't dwell on the organizational struggles, preferring to talk about the families she serves, "It breaks my heart some days to hear their troubles and see how they're living." And then she walked into the office to greet the next person coming through the door, with a big smile and words of welcome.

Challenges to Long-Term Sustainability for FRCs

FRCs were never intended to be fully funded by the State of Nevada. Instead, they were envisioned as a partnership between the state and local communities, building on the original model of "settlement houses" from the late 1800s that provided support to immigrant communities as they settled in the United States. Today, FRCs across the nation are facing sustainability challenges, documented by a 2016 survey submitted to the National Family Support Network and the Robert Wood Johnson Foundation: "Financial issues were the most frequently mentioned challenges of current Networks. Financial concerns include increased demand for services in a climate of stagnant or decreasing funding for programs and centers; state deficits; locating funding for the Family Support field; and insufficient resources to support Network-level coordination and administrative activities."[19]

Consequences of Unstable Funding for Core Services

In Nevada, especially in the last decade, financial challenges at macro and micro levels have resulted in the elimination of some FRCs and diminished services at others. Lack of funding was consistently cited as impeding the development and full realization of the role Family Resource Centers could play in helping families in Nevada. Urban areas eliminated many FRC sites, Washoe County, which had nine FRCs in the early 2000s, now has four. Clark County and surrounding rural areas once had nineteen FRCs and now have eight.

Rural and Frontier FRCs have also been affected by funding reductions, with some areas now operating on a budget of less than $15,000 a year leading to FRCs in Caliente, Ely, and Lovelock drastically reducing their operating hours.

FRCs that have survived are sometimes overwhelmed with the sheer number of families seeking help. For example, the Central/South Reno FRC reports that they are so busy, at times that they cannot see every family in crisis on a given day. This substantially affects staff time available for the intensive ongoing case management needed to resolve complicated situations.

Many FRCs report not being able to provide competitive wages for their employees, relying instead on their passionate commitment and willingness to work for less money than they could receive in other positions. In addition to low wages, many FRC employees do not have basic health insurance or retirement benefits, which leads to high staff turnover and increased staff burnout.

[19] OMNI Institute. "Advancing the Family Support & Strengthening Field Project: Executive Summary of Survey Results". Accessed April 27. 2020 at https://8c49defa-92cd-4bf1-ac5b-91471683def4.filesusr.com/ugd/20e556_3ef71955807a4714a50217d6c17093a3.pdf

> ***FRCs need more funding in order to grow and do more. We need data to show what they're doing and how they're doing it. FRCs are doing a lot for the amount of funding they have. But there's going to have to be a change eventually or they might all die out. Ideally, it should be a combination of funding from state and local communities.***
>
> – Key Contributor

Some FRCS have used creative approaches to address employee benefits offering a small health care stipend in lieu of a health plan, or as seen in Elko, the Board of Directors of the FRC of Northeastern Nevada recently purchased monthly memberships for their staff in a local Urgent Care, offering them a way to access health care with a minimal co-pay. Other FRCs offer generous personnel policies in terms of flex time, "bring your baby to work" programs, or altering schedules to enable employees to seek higher education.

Nevada's FRCs have attempted to address the lack of stable funding for core services in various ways, from grant writing to special events. Aggregated CCAT results reflect this ongoing struggle in busy Family Resource Centers as staff are more focused on addressing crises and ongoing needs of their community residents than developing marketing and fundraising skills which were rated as the top challenge areas for FRCs.

In urban Clark County, the zip code-based funding formula has created some difficulty in effectively serving clients. Due to zip code funding, FRCs will direct people who do not live in their funded zip codes to another FRC, even for those who live in close proximity. As stated previously, Washoe County has consolidated five of its FRCs into other locations; those in south Reno now must travel long distances to seek help which can overwhelm the FRC located in central Reno.

Perceived Value

It is difficult to measure the true value of FRCs in Nevada beyond counting the number of people served or case plans completed. Prevention at a neighborhood or community level is especially difficult to quantify. As one director asked, "How do you document the child abuse that didn't happen because an extremely frustrated parent was able to get the crisis intervention she needed?"

A review of the research literature conducted by Casey Family Programs in June 2019 found significant reductions in child abuse and neglect cases and use of foster care in some communities served by FRCs. In other communities with FRCs, research documented increased family self-sufficiency and

increased protective factors as well.[20] Table 6, found earlier in this report, provided insight into the economic value of the application assistance FRCs provide their communities and the state as a whole. Their value is both longitudinal and quantifiable.

Accountability

As a result of federal and state audits, the state has increased the level of grant compliance and reporting requirements, which has presented challenges for many of the smaller FRCs. Larger FRCs, with multiple funding streams, report having multiple data systems to report in (i.e. Housing and Urban Development, Community Service Block Grant systems); however, state policy requires paper files for all documentation, further hampering FRC efforts for electronic efficiencies.

At times FRCs can experience delays in reimbursement from state agencies. This may be due to slowed processing at the state agency or by the FRC needing to provide revisions in submitted documents. Any time there are delays in reimbursement it is a significant strain for many FRCs as they often do not maintain funding to cover overlapping months of expenses. It was reported in these situations an FRC may even divert unrestricted funds to pay for a line of credit in order to meet payroll; one FRC Director reported taking out a personal loan for the same purpose.

High turnover in the FRC program at the state level has impeded growth commensurate with other state's family resource programs, the analysis and determination to enhance the FRC network, and movement into evidence-based services seen in modern programs. FRCs report good relationships with state managers, however site visits occur infrequently which can reduce communication and collaboration.

A final challenge was identified by aggregate CCAT results regarding leadership sustainability as FRCs report an over-reliance on one leader, difficulty in cultivating future leaders, and a need for more detailed plans for leader succession.

Opportunities to Increase Sustainability within FRCs

There are many opportunities to strengthen and expand FRC's ability to assist families in crisis in the coming years. With strong leadership from state and local leaders, increased base funding, more attention to braided and blended funding sources, and increased training and technical assistance, the FRCs will be able to build their capacity to serve Nevadans in their communities.

Leadership and Support from the State and Community

Critical leadership opportunities exist at local and state levels to champion Family Resource Centers and re-envision their impact. Leadership is needed to leverage evidence-based research on Strengthening Families, Family Support Centers, and other best practices to reinvigorate Nevada's network of FRCs and support resources needed to implement new strategies and approaches.

[20] Casey Family Programs. "Do place-based programs, such as Family Resource Centers, reduce risk of child maltreatment and entry into foster care?" Accessed April 27, 2020 at https://www.casey.org/family-resource-centers/.

Investing in Nevada's Family Resource Center network is appropriate at all levels of government and can increase direct conduits of services to vulnerable populations.

- **State** leadership opportunities include support from policymakers in preparing the next biennial budget to increase baseline funding, evaluate other areas of funding and service delivery to local populations to identify potential blended or braided funding. Additionally, engaging elected officials and civic leaders to share the vital role FRCs play in community service delivery may generate attention from both public and private funding sources and assist to broadcast the availability of services to their constituencies.
- **Counties, cities, townships, and school districts** opportunities include policymaker review to blend or braid service delivery and spending plans, including co-location of services.
- **FRC Boards** also have a role to play in attracting resources for their individual Family Resource Centers, supporting staff, and developing their skills in fundraising. Training in board development is an opportunity that will generate untold support from business and civic leaders.

Finally, individual **community champions** of FRCs are needed as spokespersons for this model of service delivery. These champions are likely to understand firsthand the benefit and value of their local FRC and will be able to articulate their unique attributes as they advocate for supporting community-based services as families recover from health crises, unemployment, mental health anxiety, and general economic insecurity.

> ***On the short-term horizon it would be quicker to do things on my own, but you have to support staff development. This is the same for communities. Ultimately, this work will outlive all of us. How do we help communities reframe priorities?***

Fund Diversification and Development

Fund diversification and development of new funding sources is a key characteristic of the Family Resource Centers that have been able to maintain and even expand their programmatic offerings during difficult financial times. New funding sources should be sought along regional or programmatic lines and could involve multiple FRCs as circumstances allow.

The evaluation of state and local funding streams that are aligned with the mission and programs of FRCs in order to blend these additional resources with existing finances represents another opportunity for fund diversification. New federal funding streams, such as the Families First Prevention Services Act (FFPSA) can be analyzed for FRC utilization to deliver prevention services. Another

example is the potential use of Community Health Workers (CHWs) to deliver FRC services should these paraprofessionals become eligible for Medicaid reimbursement in Nevada.

Finally, increased outreach and marketing of Family Resource Centers is an opportunity to tell the FRC story and attract more support from all levels of government and the private sector as well. Elevating the profile of FRCs in policy discussions and strategic planning for service delivery at the community level will help attract more resources to help diversify and strengthen their financial base.

Consistently Address Local Needs at Community Level

There are opportunities to obtain information regarding the needs of communities through the work of the FRC network. FRCs are uniquely poised to identify trends in service needs and respond quickly. They understand their communities well and can provide informed feedback during state-sponsored strategic planning sessions and should be included in planning and implementation of new or expanded services whenever possible as it may yield detailed information about emerging needs and potential strategies to address those needs. This information can then be used to design methods of further devolving service delivery from governmental to FRC community-based service locations.

> ***We have our walls on wheels and we can morph the office on a moment's notice.***
>
> – FRC Staff Member

Support Development of the Field

Evident through the self-assessment tool and interactions with FRC staff, there is a demonstrated demand for professional development activities within and between FRCs in Nevada. Given their ability to adapt quickly to emerging needs FRCs are natural incubators for innovative solutions. The promotion of peer-to-peer learning and knowledge-sharing will assist Family Resource Centers in leveraging the many innovations that are occurring in isolation and provide support for replication around the state. Indeed, the opportunity to develop skills as innovators is one of the reasons many staff commit to working in FRCs.

Regular peer-to-peer sharing can be accomplished using internet-based technology as even frontier FRCs are set up with cameras and the ability to do on-line meetings, webinars, and other trainings. Video technology can be used for regular meetings of the FRC network as well as specialized trainings featuring FRC staff who are well versed in areas such as utilization of social media or staff motivation techniques.

> ***You come back from these conferences with lots of energy and then you're mowed down by the phone calls, the client in crisis, and the materials end up on a shelf.***
>
> — FRC Staff Member

Evidenced-based Practices

As the national FRC movement has shifted to new evidence-based family strengthening models, Nevada's FRCs have struggled to maintain the staff and programs they have, with little opportunity to elevate their collective best practices to national standards. One such opportunity for growth and professional development is through participation in the Strengthening Families National Network. The Network comprises national partner organizations and state leadership teams that are supporting implementation of the Strengthening Families Framework, a research-informed approach that increases family strength, enhances child development, and reduces the likelihood of child abuse and neglect. As of 2016, over 30 states had implemented Strengthening Families initiatives and joined the National Network, with 10 specifically noting the involvement of FRCs within their programming and partnerships.[21] Early adopters of Strengthening Families included New Hampshire, Illinois, and California.

Findings and Recommendations

Nevada's FRCs are full of promise and potential. During the last 25 years they have served our communities well.

However, without additional investments, sustainability strategies, and support from state and local governmental entities, many FRCs will face an overwhelming struggle to provide families with the information and referrals and intensive case management services they need to overcome the challenges of poverty, unemployment, and a soaring cost of living.

The report's Findings and Recommendations are informed by the situational analysis of Nevada's FRC Strengths, Challenges, and Opportunities identified during the process of self-assessments, entrance interviews, physical site visits, and key contributor interviews.

The recommendations were developed in response to the Report's findings in order to directly tie key concerns regarding FRC sustainability identified through this process to strategies for improving the long-term sustainability of FRCs in Nevada. The recommendations represent a strategic path forward

[21] The Strengthening Families National Network. Center for the Study of Social Policy. Accessed at https://cssp.org/our-work/projects/the-strengthening-families-national-network/.

to maximize the FRCs' ability to support and strengthen families during difficult periods in their lives and build a healthier Nevada for everyone.

Findings

1. Nevada's FRCs offer great value to their communities by providing universal access to family-driven services without regard to income, age, race, or ethnicity.
2. FRCs are expert collaborators, leveraging resources to provide comprehensive services using innovative approaches specific to their own communities.
3. FRC staff provide non-judgmental, respectful, and culturally competent services and offer superlative crisis intervention and practical solutions to the complex problems Nevada's families are experiencing.
4. Blending federal, state or local funding streams, such as Child Development Block Grant, Social Services Block Grant, Temporary Assistance for Needy Families (TANF) and the upcoming Families First funding with FRCs, is one of the best ways to enhance supports for families and sustain the Family Resource Center network. This is a proven approach based on the history of FRCs in Nevada and is seen in other states funding structures.
5. There has been gaps in knowledge transfer regarding the mission and purpose of the FRC, the potential and value of an FRC is not universally known by state and local leaders.
6. Baseline FRC funding from the state has not increased with population or inflation and does not support the core FRC operations. Other state and local funding sources are not stable to support core FRC operations.
7. Nevada's overall FRC allocation methodology is insufficient leaving many urban neighborhoods and isolated rural and frontier communities unserved. Over the years, FRCs have lost much of their community-based focus in urban areas, and FRCs in frontier and rural geographies have diminished capacity to conduct outreach to families living in isolated areas.
8. Decisions affecting FRC funding and programming decisions do not appear to have been driven by data or include the emerging needs of the neighborhoods and communities being served.
9. Nevada's FRCs do not have a state coordinated training or networking platform to strengthen their viability, implement best practices, and create lasting improvements over time.
10. A coordinated oversight body does not exist to resolve mutual issues of concern, act as key champions for an effective FRC initiative, ensure accountability, and provide ongoing recommendations for FRC network improvement.

Recommendations

1. Invest in the core functions of FRCs on multiple levels by substantially increasing baseline funding, channeling appropriate federal dollars through state agencies, and supporting implementation of evidence-based approaches such as the Strengthening Families Framework.
2. Establish an internal leadership team from all Divisions within the Department of Health and Human Services that rely on FRCs for eligibility and enrollment in their services to effectively champion Nevada's FRC network; and convene local partners to actively search for opportunities for blended and braided funding and technical assistance partnerships.
3. Develop a shared vision for Nevada's FRC network to guide the state's proactive approach to ensuring strong families through a collaborative process with FRCs and key partners from the public sector.
4. Revise the funding formula to consider economy of scale concerns in rural and frontier areas and the arbitrary assignment of clients by zip codes in urban areas.
5. Develop criteria for expanding the FRC network into unserved geographic locations, adding neighborhood-based locations in urban counties and unserved rural and frontier communities.
6. Create a results framework using technology and evidence-based tools to measure success in achieving family-determined goals and address community priority areas such as decreasing child abuse and neglect or increasing senior nutrition. Standardized electronic reporting of key data elements consistent with mandatory reporting requirements that are performance based with specific performance metrics.
7. Require evidence of broad-based community support in FRC reporting requirements to document volunteerism, donations, advocacy, and other forms of involvement, including the results of a community engagement process to incorporate the needs and services desired by the community.
8. Convene and support a peer network for Nevada's FRCs through regular teleconferencing and biennial face-to-face conferences akin to the model used to support Nevada's Specialty Courts, featuring national speakers of interest and panels of experts drawn from existing FRCs to speak on topics selected by conferees, further promoting peer leadership.
9. Facilitate state and local technical assistance to build capacity in FRCs in identified areas of need such as making available the services of a dedicated grant writer, strategic planning consultants, and marketing experts to assist FRCs in applying for funds individually or collectively, designing strategic plans, and creating effective marketing campaigns.
10. Establish a statewide FRC Council as an accountability mechanism, composed of representatives from FRC staff and boards, community and state partners, and families served. Task the Council with serving as key champions for FRCS, resolving issues of concern to the network such as reevaluation of FRC Advisory Council requirements, the development of

individual and statewide strategic planning processes, revision of the funding formula, and be consulted when reviewing improvements for the FRC network.

Appendix A. Individual FRC Impact Profile Template

ABOUT FRC

Space for the FRC to highlight their specific activities, partnerships, etc. that they are particularly proud of.

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Quote from participant or staff

"

Name of FRC: Impact Profile

City, Nevada

NEVADA'S FAMILY RESOURCE CENTERS

Established in 1995, Nevada's Family Resource Centers (FRCs) collaborate with local and state agencies and organizations to help individuals and families access needed services and support.

Name of FRC serves residents in the XX area by providing information, referrals, and case management services.

XX% of individuals, or XX people, in this region **are below the Federal Poverty Level**

XX% of the population, or XX, **are children**

In 2018-19, Name of FRC assisted

XX adults | XX children | XX seniors

NAME OF FRC | PROGRAMS AND COMMUNITY IMPACT

In FY2018-19, NAME OF FRC received $XX in State FRC funding to provide referrals, case management/family support services, application assistance, and community engagement efforts. Direct services were provided to XX unduplicated individuals, for a State investment of $XX.XX for each individual served.

$XX.XX
State investment per individual served

FRC engages in fundraising efforts to supplement their State allocation and better serve the community. **For every dollar received from the State, they have leveraged $X in other funding to comprise their total annual operating budget of $XXXXX.** Other services offered by FRC include operating LIST OF OTHER SERVICES PROVIDED.

STRENGTHENING FAMILIES

Case files were opened for **XX families** in 2018-19, providing the framework for families to receive targeted services and support.

FACILITATING CONNECTIONS

FRC staff provided **XX referrals** to local agencies such as LIST MOST COMMON REFERRAL TYPES.

ECONOMIC IMPACT

In 2018-19, FRC staff **helped families complete XX applications** for public assistance, facilitating access to much needed resources. The most common application types, and the annual estimated value they contribute to a family if approved, are summarized below.

		Total Estimated Value
XX	TANF	$XX
XX	Food Stamps (SNAP)	$XX
XX	NV Medicaid/NV Check-Up Applications	$XX
XX	Energy Assistance Applications	$XX

In total, the FRC application assistance program facilitated an estimated $XX to AREA community families in 2018-19.

For more information on the FRC visit xxxxxx.org or contact xxx.xxx.xxxx

Methodology for Creation of Individual Impact Profiles

Data for individual profiles was collected as follows:

Page 1

About the FRC | Narrative was generated from a combination of the FRC's website (if possible) and information gathered during the site visit.

Quote |Documented during the site visit

Service Area Demographics | % and # of population living below the FPL, and % and # of population that are children, was pulled from the *FRC Funding Formula SFY20* document (tab: State Population) provided by Lori Follett.

Number Served | Total number served and # of adults, children, and seniors, was taken from the *SFY19 FRC Monthly-Quarterly Report Spreadsheets FINAL* document (from each FRC tab) provided by Lori Follett.

Page 2

Financial Information | State allocation totals were extracted from the *FRC Funding Formula SFY20* document provided by Lori Follett. Total organizational budget totals were provided by each FRC either during their CCAT completion or via direct communication with SEI.

New Case Files and Referrals | Numbers reported are from the *SFY19 FRC Monthly-Quarterly Report Spreadsheets FINAL* document (from each FRC tab) provided by Lori Follett.

Application Assistance | Total counts of application assistance provided by each FRC (total and disaggregated by type) were taken from the *SFY19 FRC Monthly-Quarterly Report Spreadsheets FINAL* document (from each FRC tab) provided by Lori Follett. The rationale for determining proxy values for each application type is listed in the table below.

Application Type	Data Used to Calculate Proxy Value Per Application
TANF Application Value	Beginning in April 2018, the benefit to a family of three in Nevada is $386 per month. Figure retrieved from https://www.cbpp.org/blog/a-third-of-states-raise-tanf-benefits-in-2018-2019.
SNAP	Monthly average SNAP benefit per household is $224. Figure retrieved from https://www.cbpp.org/sites/default/files/atoms/files/snap_factsheet_nevada.pdf.
NV Medicaid Value/NV Check up	Kaiser Family Foundation stats from 2014 note state average spending in NV per enrollee (full and partial) is $3,620. This average was used for both NV Medicaid and NV Check Up as both are funded via Medicaid. Figure retrieved from https://www.kff.org/medicaid/state-indicator/medicaid-spending-per-enrollee/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22nevada%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D.

Application Type	Data Used to Calculate Proxy Value Per Application
Energy Assistance Value	March 2017 legislature session presentation noted an estimated $742 average annual benefit. Figure retrieved from http://dhhs.nv.gov/uploadedFiles/dhhsnvgov/content/About/Budget/FY_18-19/2018-2019%20Budget%20Presentation%20DWSS%20V9.1.pdf
Child Care Assistance Value	Per direct communication with Child Care Development Program staff: 10,518 children were served by the child care subsidy in SFY-19, and $52,754,949.41 was spent on subsidies during that year for an average annual benefit of $5,015.68.
Low Income Subsidy Value and Medicare Savings Value	Although assistance is provided for both low income subsidy and Medicare savings value applications, valid proxies to determine value were not available.

Validation and Distribution

Individual profiles were sent to each FRC for review, and data and content validation. Edits were made per the direction of the FRC staff, so final content may differ slightly from that found in the sources listed above. Each FRC received a final profile as a PDF. Profiles can be found at http://dhhs.nv.gov/Programs/Grants/Programs/FRC/Family_Resource_Center/.

Appendix B. Service Areas for Nevada's Family Resource Centers

FRCs in Frontier Counties	Service Area
Churchill County Social Services	CHURCHILL COUNTY Zip Codes: 89406, 89407, 89496
Consolidated Agencies of Human Services	MINERAL, ESMERALDA & NORTHERN NYE COUNTIES Zip Codes: 89010, 89013, 89022, 89045, 89047, 89049, 89314, 89409, 89415, 89420, 89422, 89427
Family Resource Center of Northeastern NV	ELKO COUNTY Zip Codes: 89801, 89802, 89803, 89815, 89822, 89823, 89824, 89825, 89826, 89828, 89830, 89831, 89832, 89833, 89834, 89835, 89883
Frontier Community Action Agency	HUMBOLDT COUNTY/WINNEMUCCA Zip Codes: 89404, 89414, 89421, 89425, 89426, 89438, 89445, 89446 LANDER COUNTY/ BATTLE MOUNTAIN Zip Codes: 89310, 89820
Lincoln County Community Connection	LINCOLN COUNTY Zip Codes: 89001, 89008, 89017, 89042, 89043
Little People's Head Start	WHITE PINE & EUREKA COUNTIES Zip Codes: 89301, 89311, 89315, 89316, 89317, 89318, 89319, 89821
Nevada Outreach Training Organization	SOUTHERN NYE COUNTY Zip Codes: 89003, 89020, 89023, 89041, 89048, 89060, 89061
Pershing County	PERSHING COUNTY Zip Codes: 89418, 89419

FRCs in Rural Counties	Service Area
Community Chest	STOREY COUNTY Zip Code: 89440
Family Support Council	DOUGLAS COUNTY Zip Codes: 89402, 89410, 89411, 89413, 89423, 89444, 89448, 89449, 89450, 89451, 89452
Lyon County Human Services	LYON COUNTY Zip Codes: 89403, 89408, 89428, 89429, 89430, 89444, 89447

FRCs in Urban Counties	Service Area
Cappalappa	NORTH RURAL CLARK COUNTY LOGANDALE/MOAPA/OVERTON Zip Codes: 89021, 89025, 89040
East Valley	SOUTH RURAL CLARK COUNTY JEAN/LAUGHLIN/SEARCHLIGHT Zip Codes: 89019, 89026, 89028, 89029, 89039, 89046 LAS VEGAS EAST AND CENTRAL 89032, 89101, 89102, 89104, 89106, 89107, 89108, 89109, 89110, 89119, 89120, 89121, 89142, 89169
HopeLink of Southern Nevada	LAS VEGAS SOUTH AND HENDERSON Zip Codes: 89002, 89005, 89011, 89012, 89014, 89015, 89044, 89052, 89074, 89122, 89123, 89183
Lied Memorial Boys and Girls Club of Southern NV	LAS VEGAS WEST Zip Codes: 89004, 89018, 89103, 89113, 89117, 89118, 89124, 89128, 89129, 89134, 89135, 89138, 89139, 89141, 89144, 89145, 89146, 89147, 89148, 89166, 89178, 89179
Olive Crest	URBAN CLARK COUNTY LAS VEGAS NORTH Zip Codes: 89030, 89031, 89033, 89036, 89081, 89084, 89085, 89086, 89087, 89115, 89130, 89131, 89143, 89149, 89156, 89191
Ron Wood	CARSON COUNTY Zip Codes: 89701, 89702, 89703, 89704, 89705, 89706, 89711, 89712, 89713, 89714, 89721
Salvation Army	NORTH RURAL CLARK COUNTY BUNKERVILLE/MESQUITE Zip Codes: 89007, 89024, 89027
Tahoe Family Solutions	INCLINE VILLAGE & CRYSTAL BAY Zip Codes: 89402, 89450, 89451, 89452
Washoe County • *Central/South Reno* • *Sparks and Northeast/Northwest Reno* • *Sun Valley/North Valleys/Spanish Springs*	WASHOE COUNTY Zip Codes: 89339, 89405, 89412, 89424, 89431, 89432, 89433, 89434, 89435, 89436, 89439, 89442, 89501, 89502, 89503, 89504, 89505, 89506, 89507, 89508, 89509, 89510, 89511, 89512, 89513, 89515, 89519, 89520, 89523, 89533, 89557, 89570, 89595, 89599

Appendix C. Key Contributor Interview Questions

1. Please tell me about yourself (current role, number of years in position). What has been your role or experience with Nevada's Family Resource Centers (FRCs)?
2. What are the strengths of Nevada's FRCs and what seems to be working well? [Which FRCs are you familiar with?]
3. What do you think are some of the most significant challenges facing FRCs in Nevada? [of the FRCs you are familiar with]
4. On a scale of 1 – 5, how well do you think Nevada's FRCs are accomplishing their mission to provide neighborhood-based low-barrier resources and referrals to services for Nevadans of all ages? (1 = not well, 2 = somewhat well, 3 = neutral, 4 = well, 5 = very well)

   Why did you give that rating?
5. On a scale of 1 – 5, how would you rank the importance of the following service components of Nevada's FRCs? (1 = not important, 2 = somewhat important, 3 = neutral, 4 = important, 5 = very important)
   a. Provide effective resource and referral information to local families in a welcoming community-based setting
   b. Provide an assessment of eligibility for social services
   c. Provide direct services to strengthen families such as parenting education
   d. Serve as an access point for other community providers such as WIC
   e. Collect and share information about community needs and their impact on families
   f. Respond to community crises by developing new resources for families
6. Are there any geographic differences you've noticed in how FRCs function in Nevada?
7. Are there sufficient FRCs in Nevada and are they appropriately located?

   Please explain your opinion.
8. What are your ideas about the sustainability of FRCs?
9. Do you see additional coordination or collaboration opportunities for Nevada's FRCs?
10. If you had a magic wand and could change one thing to strengthen Nevada's FRCs, what would it be?
11. Is there someone else we should talk to who would have a unique perspective on these issues?
12. What did I forget to ask, or is there anything else you would like to share?

Appendix D. Site Visit Interview Questions

1. Have you discussed ideas for sustainability of your FRC? If so, what has been discussed
2. Are you aware of any research or best practices for FRCs/Family Support Centers which you are interested in implementing or have implemented? Please describe.
3. What opportunities for coordination and collaboration do you see for your FRC?
4. If you had a magic wand and could change one thing to strengthen your FRC, what would it be?
5. In addition to I&R and case management, what other services or programs do you provide through the FRC? How are those funded?
6. What should we have talked about that would be important for us to understand that we haven't talked about?

Appendix E. Core Capacity Assessment Category Descriptions

Adaptive Capacity: The ability of an organization to monitor, assess, respond to, and create internal and external changes. Adaptive capacity subcapacities comprise:

- Environmental Learning: Using collaboration and networking with community leaders and funders to learn about what's going on in the community and stay current with what is going on in the field.
- Programmatic Learning: Assessing the needs of clients and using program evaluation as a learning tool.
- Organizational Learning: Self-assessing, using assessment data/ findings to conduct strategic planning, and following through on strategic plans.
- Decision-making Tools: Using important tools, resources and inputs to make decisions (i.e., Outside technical assistance, in-house data, staff input, client input, a written strategic plan).
- Resource Sustainability: Maintaining financial stability in order to adapt to changing environments.
- Program Resource Adaptability: Easily adapting to changes in program resources, including funding and staff.

Leadership Capacity: The ability of all organizational leaders to create and sustain the vision, inspire, model, prioritize, make decisions, provide direction, and innovate in an effort to achieve the mission. Leadership capacity subcapacities comprise:

- Leader Vision: Organizational leaders formulate a clear vision and motivate others to pursue it.
- Board Leadership: The board provides fiduciary oversight, holds organizational leaders accountable for progress toward achieving the mission, and conducts outreach to garner resources and connect people with the mission.
- Leadership Sustainability: The organization cultivates leaders, plans for leader succession, and avoids an over-reliance on one leader
- Internal Leadership: Organizational leaders apply a mission centered and inclusive approach to making decisions and inspire and motivate others in support of the mission.
- Leader Influence: Organizational leaders can persuade their board, staff, and community leaders to take action.

Management Capacity: The ability of an organization to ensure the effective and efficient use of organizational resources. Management capacity subcapacities comprise:

- Assessing Performance: Detailing clear roles and responsibilities and assessing staff performance against those roles and responsibilities.
- Volunteer Management: Recruiting, retaining, providing role clarity and direction, developing, valuing and rewarding volunteers.
- Problem Solving: Effectively, judiciously and consistently resolving human resource problems and interpersonal conflict in an inclusive manner.

- Staff Development: Coaching, mentoring, training, and empowering staff to improve their skills and innovate.
- Managing Finances: Ability to ensure efficient financial operations.
- Program Staffing: lmplementing staffing changes as needed to increase or improve programs and service delivery. (Please note that this sub-capacity score may be empty if no recent staff changes have occurred.)
- Manager Communication: Opening channels of communication between managers and staff.
- Resourcing Staff: Providing the technical resources, tools, systems, and skills people need to carry out their work.
- Managing Program Staff: Ensuring that program staff have the knowledge, skills, and cultural sensitivity effectively deliver services.
- Setting Role Expectations: Establishing dear and realistic expectations for staff.
- Conveying Staff Value: Providing positive feedback, rewards, and time for reflection.

Technical Capacity: The ability of an organization to implement all of the key organizational and programmatic functions. Technical capacity subcapacities comprise:

- Outreach: Ability to do outreach, organizing and advocacy.
- Facilities: The proper facilities (space, equipment, amenities, etc.) to run efficient operations.
- Technology: Equipment, systems, and software, etc. to run efficient operations.
- Fundraising Skills: Ability to develop resources for efficient operations, including management of donor relations.
- Service Delivery: Ability to deliver efficient and quality services.
- Marketing Skills: Ability to communicate effectively with internal and external stakeholders.
- Program Evaluation Skills: Ability to design and implement an effective evaluation.
- Facility Management: Ability to operate an efficient facility.
- Technology Skills: Ability to fully utilize technology to run efficient operations.
- Legal Skills: Ability to engage proper legal counsel.
- Financial Management Skills: Ability to ensure efficient financial operations.

Organizational Culture: An organization organization's context – unique history, language, structures, and values – that will affect its ability to achieve its mission. Organization culture subcapacities comprise:

- Re-energizing: Supporting time for staff to reflect on their work, socialize, and reconnect with why they are doing the work.
- Unifying: Nurturing open and honest communication across all levels in the organization, leading to a sense of a cohesive group identify.
- Empowering: Promoting a culture of learning, sharing, and mutual respect, and a belief in the value and agency of staff and clients.

Appendix F. Impact and Implications of Covid-19

In times of crisis, FRCs are at the front line in serving their communities. Never has this been more apparent than during the development of this report which occurred just as the COVID-19 pandemic began to envelop the nation. Nevadans were experiencing great disruption in their lives while facing the fear of illness and possible death. As Nevadans struggle to recover from the economic, health, and social impacts of the COVID-19 crisis, FRCs are poised to expand their reach. FRCs specialize in connecting families to the services they desperately need and are often the very first place where families seek help and guidance. During this unprecedented national crisis, families are turning to FRCs, seeking reassurance and assistance for what will more than likely be a long process of recovery.

During Governor Sisolak's shelter-in-place order, FRC staff complied with the order to stay home by responding to families via telephone, text, and email. Essential FRC staff reported to work, clothed in masks and gloves, to prepare and distribute food boxes, commodity foods, and emergency items such as diapers and cleaning supplies.

When Nevada begins to recover from the COVID-19 pandemic, the financial and emotional stress families face will undoubtedly increase in quantity and severity, making prevention and intervention services even more critical. Now, more than ever, Nevada needs its FRCs to assist in the front-line recovery response for families emerging from this economic and social upheaval. Many Nevadans are already experiencing severe financial difficulties and struggling to pay the rent. They will turn to FRCs as they have for the past 25 years for resources to meet their basic needs and advice on applications for financial relief. They will need programs to help their children make up the educational time they have lost, counseling to address emotional stress and changing family dynamics, and support from people they trust as they navigate a changed world.

FRCs are uniquely positioned to assist in the state and local government response to COVID-19 by promoting recovery through direct services to those most in need. Channeling emergency funds through the FRC network will enable families facing unimaginable hardships to quickly access the assistance they desperately need to recover.

Another opportunity lies in funding jobs at FRCs throughout the state to assist in COVID-19 recovery by enhancing information and referral, case management, and direct services such as commodity foods to sustain families as they build up their own resources.

> ***We need to make sure our families and our community feels our love and support. They need us now, more than ever.***
>
> - FRC Staff Member

Appendix G. State Fiscal Year 2011 FRC and Family to Family Connection Allocations[22]

County/ Service Area	Agency	Family to Family Connection Allocation	Family Resource Center Allocation
Washoe	Washoe County School District FRC Coalition	$163,803	$171,641
Washoe	The Children's Cabinet at Incline Village		$6,349
Douglas	Family Support Council of Douglas County	$32,726	$31,455
Storey	Community Chest Inc		$11,012
Carson City	Ron Wood FRC	$46,306	$29,986
Churchill	Churchill County School District FRIENDS FRC	$35,418	$28,391
Lyon	Lyon County Human Services	$43,366	$39,443
Humboldt	Frontier Community Action Agency (FCAA)	$17,738	$13,916
Lander	Battle Mountain Family Resource Center	$10,589	$8,816
Pershing	Pershing County School District FRC	$11,103	$9,623
Elko	FRC of Northeastern Nevada (FRCNEN)	$42,581	$37,092
White Pine/Eureka	Little People's Head Start	$32,238	$24,507
Esmeralda, Mineral, N. Nye	Consolidated Agencies for Human Services	$30,839	$23,057
S. Nye	Nevada Outreach Training, NO to Abuse	$39,327	$34,745
Lincoln	Lincoln County Community Connection	$27,106	$20,719
N. Rural Clark	Salvation Army of Mesquite	$18,258	$15,574
N. Rural Clark	Cappalappa Family Resource Center	$15,299	$11,347
S. Rural Clark	HopeLink - Family Resource Coalition	$28,191	$22,784
West LV	Boys and Girls Club of Las Vegas		$173,720
West LV	Family to Family Connection, ISD # 13	$145,082	
South LV	HopeLink		$127,677
South LV	St. Rose Dominican Hospital	$111,313	
East LV	East Valley Family Service	$136,818	$133,840
North LV	Olive Crest	$172,111	$188,711
Central LV	East Valley Family Service	$126,783	$124,657
	Total Allocation	**$1,286,995**	**$1,289,062**

[22] Presentation to the Joint Legislative Money Committees: DHHS Budget Support Documents. February 11, 2011. Accessed at https://www.leg.state.nv.us/Session/76th2011/Exhibits/Senate/FIN/SFIN132C.pdf.