

Adams County

YOUTH AND COMMUNITY VIOLENCE PREVENTION ACTION PLAN

ACTION PLAN OVERVIEW

The Youth and Community Violence Prevention Action Team (VPAT) Action Plan Template is a tool for planning your approach to prevent youth and community violence over the next **1-2 years**. Its purpose is to provide a clear action plan, guide the project, and ensure that it stays focused on its objectives. Collaborate with your action team to create a comprehensive and achievable work plan using the template below.

Below you will find a list of instructions that correspond with elements within the VPAT Action Plan Template. We strongly recommend limiting your action team to a maximum of five objectives for feasibility. Your action team may add rows for additional activities that correspond with the objectives.

ACTION PLAN INSTRUCTIONS

See below a table of instructions for how to complete Part One of the VPAT Action Plan Template.

VPAT Action Plan: Part One Instructions	
Strategic Priority:	Broader strategies that guide how your action team hopes to accomplish related to youth and community violence prevention within the community.
Population of Focus:	Population that is intended to benefit from the objective. This can be the same for all objectives within the workplan or vary. Be as specific as possible. Consider if there are specific subpopulations for specific objectives and include that information.
Collective Impact Considerations:	Disproportionate rates of violence for certain groups of people demonstrate health inequity, therefore making it crucial to advance equity to integrate actions to achieve population and systems level change. Collective impact is a network of community partners who Consider the collective impact factors for violence prevention below (page 3) and provide a description for each objective with how <u>at least two</u> of the following collective impact key factors will be addressed through the proposed activities: (1) common agenda, (2) shared measurement, (3) mutually reinforcing activities, (4) continuous communication, and (5) strong backbone.
Strengths:	Organizational, community, or personal (of action team members) strengths relevant to this objective. How is your community well-situated to accomplish this objective?
Current Realities:	Elements defining the existing environment for violence prevention work within the community. Although there may be numerous benefits for success, there may be drawbacks to implementing certain strategies.
Performance Measures:	How will your action team know if they are making progress? Within this section, your action will determine short- and intermediate-term indicators for success.

Your action team’s strategic priorities and associated objectives will likely fall into three broad categories:

1. Evidence-Informed Programming,
2. Policy and Systems Change, and
3. Community and Partnership Engagement

Your team can choose on which areas you’d like to focus. Delete any objective boxes/sections that your team will not use. See the accompanying supplemental instruction guide for further detail of what to include within these sections.

VPAT Action Plan: Part Two Instructions	
Objective:	Consider using Specific, Measurable, Attainable, Relevant, Time-Based, Inclusive, and Equitable (SMARTIE) in writing your objectives. Write objectives that will help make progress on or fulfill your goals for the program.
Level(s) of Prevention:	It is important to include both upstream and downstream approaches to address youth and community violence prevention within your community with community-driven strategies. For each objective, identify the level of prevention (primary, secondary, or tertiary) that correlates with the outlined objective.
Risk & Protective Factors:	Youth and community violence is influenced by many factors at the individual, relationship, community, and societal levels . Thus, it is important to ensure the objectives address specific risk and protective factors. Highlight the shared risk and protective factors that each objective will address.
Partners:	Youth and community violence prevention strategies are intended to most benefit the population of focus. It is therefore critical to connect with community partners and community members to determine if strategies are having their intended impact and amplify impact. How do/will you ensure organizational and community partners participate in and inform your work? Please indicate both current partners and partners relevant to a specific action item that have yet to be engaged.
Activities:	Identify activities to accomplish the specified objective during the anticipated timeframe, person(s) responsible for completing each activity, and the timeline within which the activity will be completed.
Anticipated Challenges/Barriers:	Challenges and barriers that your action team faces in fulfilling the outlined objectives. What challenges to prevent youth and community violence have you experienced so far? Consider factors such as stigma, funding, staffing, politics, economic conditions, social/cultural context, and community readiness.

ACTION PLAN: PART ONE

STRATEGIC PRIORITIES
1. Build a path for ongoing, comprehensive, and holistic care for individuals and communities
2. Strengthen family and community engagement to empower them to take action in their communities and with their government leaders
3. Develop a multisector ecosystem focused on a sustained investment in violence prevention over the next 5 years
4. Strengthen supports to help youth and young adults <i>thrive</i> through leadership, educational attainment, and employment
POPULATION OF FOCUS: As of June 2024, population of focus has not been identified. We will begin in areas that have concrete plans (Northwest Aurora) but the plan will be to determine populations of focus during the initial data and information collecting period.

COLLECTIVE IMPACT CONSIDERATIONS:	
Collective Impact Key Factors	How it is Being Addressed
Mutually Reinforcing Activities: How do these different objectives in the plan connect with each other?	<i>All of the objectives are intertwined and will benefit each strategic priority/goal.</i>
Continuous Communication: What's the plan moving forward on connecting with each other on the progress of the action plan?	<i>We plan to meet at a minimum monthly as a team. There will be opportunities to work in-person and hybrid, and we can rotate in-person meeting locations. Work will be ongoing with regular check-ins as needed. Jamie will continue to be point-person and ensure support is provided for those leading objectives and activities, with added support from Lina Stanchev and a to-be-hired Substance Use and Violence Prevention Coordinator. Levon and Jamie will continue to meet regularly internally to evaluate activities and ensure the necessary partners are involved and consulted.</i>
Strong Backbone: Who are the core members from different organizations committed to this?	<i>The Adams County VPAT Team is composed of people who are interested and motivated to address violence in our communities. Denver Youth/GRASP is a strong, established organization with proven programs in Aurora and Denver in Violence Intervention and Youth Engagement. By supporting the expansion of their programs and activities into more areas of Adams County, we can ensure successful programming is available to our residents. Additionally, with the newly formed Adams County Health Department, we have the opportunity to be innovative in our approach to violence prevention. The partnerships we are creating with our criminal justice organizations (District Attorney, Sheriff, Diversion programs), human services organizations, community-based organizations, healthcare partners, and youth-led/focused initiatives (4-H, Community Health Promotion) we can work toward supporting solutions that work for the communities they are intended for. Aurora SAVES and Aurora Youth Violence Prevention Program are established entities within Aurora that have strong partnerships and data-informed strategic plans. By utilizing their expertise and experience, we can adapt their programming and methods to work for our other Adams County communities.</i>

CURRENT REALITIES:
Strengths

Interested and invested partners! We have a strong network of community-based organizations, government partners, and youth-involved organizations. There is desire to improve opportunities and outcomes for youth, improve safety of our communities, and a lot of great people doing the work. We have relationships with people who are motivated to partner up to adapt existing intervention and prevention activities and try new things!

Opportunities for Improvement

Bringing decision makers and funders into the work. Due to the fact there is not stable, consistent funding for this work we have to piecemeal grants and other funding sources. Ensuring we are at the table where decisions are being made and pursuing funding will be critical to success of projects and activities.

Benefits of Success

Improved opportunities for youth, improved community infrastructure, safer neighborhoods, upward mobility for residents, and happier people.

Unintended Consequences of Success

The feeling of "completeness" and work seizing. It's crucial to remember this work is ongoing and will need to adjust as milestones are met and objectives are accomplished. We will need to constantly evaluate work plans, objectives, and activities and ensure we are evolving as our communities evolve.

PERFORMANCE MEASURES:			
Objectives	Short Term Indicators	Source	Frequency
Objective 1	Resource list compiled and shared out with partners; Youth listening session held with at least 10 youth/young adults and results shared with core team	Resource map; GRASP	Once-June 2025
Objective 2	Population of focus identified; fact sheets developed and designed by community	ACHD/VPAT Action Plan	March 2025
Objective 3	# of partner survey responses (at least 15?)	VPAT Partner Survey	March 2025
Objective 4	Community Gathering methods identified/developed	VPAT Action Plan	February 2025
Objective 5	Core action team identified and monthly meetings scheduled	Action Plan	October 2024
Objective 6			
Objectives	Long Term Indicators	Source	Frequency
Objective 1	Partners and community request resource list/inclusion in resources; community partners provide REACH clinic clients x# different learning opportunities/resources (increasing annually)	Resource map; REACH Clinic	Annual beginning end of 2025
Objective 2	Action plan activities are tailored to identified population of focus; Data dashboard developed and regularly updated	Action Plan; Data dashboard	Quarterly beginning June 2025
Objective 3	Results from partner survey are shared out and mapped in dashboard	Partner Survey/Dashboard	Annual beginning June 2025
Objective 4	At least 4 justice involved youth gatherings held and results reported to action team	Action Plan	Annual beginning end of 2025
Objective 5	At least 90% of core team members attend 11 of 12 monthly meetings	Sign In Sheets/Attendance Logs	Annual beginning end of 2025
Objective 6			

1. EVIDENCE-INFORMED PROGRAMMING

OBJECTIVE #1: By October 2024, identify at least 3 potential partners per sector, by sector, with potential to provide services at a new drop-in center that works with youth and young adults to provide leadership, educational resources and support, and employment. Engage youth in violence prevention goals by providing a space for their voices to be heard. Ensure that identified partners and youth represent multiple community identities: BIPOC, LGBTQIA+, Spanish-speaking, and justice-involved youth. (Goals 1, 3, 4)				
LEVEL(S) OF PREVENTION: Primary, secondary, tertiary				
RISK & PROTECTIVE FACTORS: Risk: Low educational attainment; lack of social support; economic stress; neighborhood poverty; diminished economic opportunity; poor neighborhood support Protective: Connection to a caring adult; association with prosocial peers; connection/commitment to school; coordination or resources and services among community agencies				
PARTNERS:				
Activity	Target Date	Resources Required	Lead Person/ Organization	Progress Notes
Identify key sectors that need to be included and develop a list of known partners in those sectors (e.g. educational resources for young adults; GED classes; economic stability support; youth leadership courses; youth employment; civic engagement; etc.)	9/30/2024		Callie Preheim (ACHD) & Alfonso Lozano (Diversion)	
Compile and map a list of resources and partners identified. Identify ongoing schedule to review and update resource lists.	3/31/2025; ongoing	GIS map Resource List Translation of Documents	Gabriela Reyes/Jamie Rodriguez (ACHD)	
Identify youth, young adults, and youth organized groups in communities throughout AdCo to participate in a youth engagement and listening session to be facilitated by GRASP	9/30/2024		Johnny Williams, Ginny McCarthy (GRASP), Shana Shaw (Compound of Compassion)	
Develop intentions, goals, and desired outcomes of GRASP facilitated youth convening. Decide if convening will occur once or will be a series.	9/30/2024		Johnny Williams/Ginny McCarthy (GRASP)	
Hold initial youth convening facilitated by GRASP	10/31/2024	Time, Date, Location, Space Interpretation Needs Facilitators	Ginny McCarthy (GRASP)	8/24: Dr. Kingston (CU) has conversation guides developed-will share with us
Make a plan to disseminate resource lists to all participating organizations via	4/30/2025	List of organizations to share with/groups to	Jamie Rodriguez/Lina Stanchev	

youth leadership, existing youth serving organizations, etc.		share out via (e.g. schools contacts, health alliance, etc.); timeline for sharing (frequency)		
Identify existing spaces with ability to include safe physical space for youth, ensuring spaces with weekend, evening, and summer availability	12/30/2024		Rachel Juritsch (CSU Extension)	
Identify opportunities to utilize/support REACH clinic (in development) to provide services, resources, and education (e.g. economic, civic, job skills)	6/30/2025	REACH clinic space, providers, \$, support for staff and those using space	Johnnie Williams (GRASP)	
Identify existing meetings & coalitions that include youth and people working with youth & engage schools and other youth focused entities in sharing about available spaces (e.g. ACHD Schools webinars; Adams County Health Alliance quarterly meetings; 4-H meetings?)	12/30/2024		Lina Stanchev (ACHD)	

ANTICIPATED CHALLENGES & BARRIERS:		
Actions	Barriers	Methods for Overcoming Challenges & Barriers
<i>Youth Discussion Session</i>	<i>Youth may not want to participate because they may feel like their opinions aren't going to make a difference</i>	<i>Plan how we will continue to share out with youth, how their feedback is being used, ongoing ways to contribute to the work, etc. Need to ensure plan holds accountability mechanisms to ensure incorporation of youth voices</i>
<i>REACH Clinic</i>	<i>Services and resources aren't utilized by persons using REACH clinic; are service providers trusted, does community know they service providers have their best interest, are there other organizations or providers that are more trusted? Do we survey community to ensure the providers are trusted? What is the feedback mechanism to ensure trust is not broken?</i>	<i>Ensure providers build trust with community-post-visit anonymous surveys, surveying about trusted providers in community convenings</i>

OBJECTIVE #2: By March 2025, identify at least one population of focus by assessing which areas within Adams County have high(er) prevalence of violence and high social needs areas. Include demographics of identified population(s) so goals can be tailored to support unique needs of that specific population(s) (Goals 1, 2, 3, 4)

LEVEL(S) OF PREVENTION: Primary, Secondary

RISK & PROTECTIVE FACTORS:

Risk: Lack of access to healthcare, systemic barriers, environmental hazards, SDoH

Protective Factors: Existing healthcare initiatives, community-based organizations, community engagement

PARTNERS: Adams County Health Department, NACCHO, CDC, Adams County Health Alliance, CJCC (law enforcements, DA, etc.), Denver Youth Program, CBOs

ACHD: HESI, Health Data team, Environmental Justice Workgroup

Activity	Target Date	Resources Required	Lead Person/ Organization	Progress Notes
<p>Conduct Data Mapping and Identify Gaps in Data</p>	<p>10/31/2024</p>	<p>Software: GIS, SAS</p> <p>Data: Vital Records, Hospitalizations, SDoH, Crime data, social vulnerability index, etc.</p> <p>Data analysts: Health Data & GIS team (ACHD)</p>	<p>Gabriela Reyes ACHD</p>	
<p>Identify available data about schools, students, and their experiences and perspectives on safety</p>	<p>1/30/2025</p>	<p>Internal School Task Force</p> <p>School Surveys</p>	<p>Jamie Rodriguez/Lina Stanchev (ACHD)</p>	

Identify impacted areas as defined by community by obtaining partner and community feedback in objective #4	TBD based on resources and community gatherings	Data mapping Community feedback	Gabriela Reyes, Jamie Rodriguez ACHD	
Identify focus areas based on data	2/28/2025	Data mapping	Gabriel Reyes, Callie Preheim (ACHD)	
Engage with Environmental Justice Workgroup by sharing data maps created and aligning work and goals between workgroups	2/28/2025	Outreach Meeting space Workgroup feedback	Environmental Justice Workgroup ACHD; Jamie Rodriguez	*As of 7/2024 EJWG has not yet identified areas of priority. Continue to follow up with and engage with EPA grants through workgroup
Share information with community partners by creating fact sheets for specific areas of Adams County and sharing data maps (will align with objectives and support activities around community and partner engagement/community dinners)	Ongoing	Outreach Partnership agreements	Jamie Rodriguez (through Adams County Health Alliance?)	

ANTICIPATED CHALLENGES & BARRIERS:		
Actions	Barriers	Methods for Overcoming Challenges & Barriers
Conduct Data Mapping	Incomplete or outdated data	Use multiple data sources; build new partnerships with agencies collecting data; develop data sharing agreements
Identify high-need areas	Criteria for 'high need' areas	Identify 'high need' indicators related to violence with partner and community feedback
Engage with Environmental Justice Workgroup	Scheduling conflicts, limited engagements	Flexible meeting times with clear agendas
Engage with community partners	Scheduling conflicts, mistrust of external organizations	Build relationships through consistent and transparent communication

OBJECTIVE #3: By June 2025, identify, map, and share resources and assets for violence prevention work in Adams County and surrounding metro Denver areas. Information identified and resources developed within this objective will be shared out with communities, organizations, and coalitions identified during other activities (Goals 1, 2, 3, 4)				
LEVEL(S) OF PREVENTION: Primary, Secondary				
RISK & PROTECTIVE FACTORS:				
PARTNERS: ACHD, Aurora Youth Violence Prevention, Sheriff, DA, BOCC, BOH, Denver, Aurora, Arapahoe County				
Activity	Target Date	Resources Required	Lead Person/ Organization	Progress Notes
Meet with Porchlight team to discuss current and future data needs	7/2024		Jamie Rodriguez, Levon Hupfer, Callie Preheim, Gabriela Reyes (ACHD); Alfonso Lozano (Diversion)	Completed. Discussed using stats for neighboring communities, redline data, ACE's, alcohol outlet density, firearm retailers; find out if CSWB has any data with linkages to violence (e.g. does +code violations correlate to +violence); explore data sharing agreements with CBOs and other agencies; ensure capturing engagement data, trust indicators
Identify available data from surrounding counties/communities to include in reporting (Arapahoe, Denver, Aurora, Broomfield, etc.)	9/30/2024	Data sharing agreements Defined areas of data to include	Gabriela Reyes/Callie Preheim (ACHD)	
Identify individuals, organizations, workgroups, and other community partners that we could survey to assess upstream and downstream prevention efforts	October 2024	Community Partnership tracking tool (CPAS), Adams County Health Alliance partnerships, internal and external partnerships/relationships	Karen Schweih (DA)	

Develop and disseminate partner survey for Adams County partners to identify existing upstream and downstream prevention efforts	Develop: October 2024 Disseminate: through February 2025 Evaluate: March 2025	Survey tool, dissemination plan for survey (WHO, HOW)	Callie Preheim/Jamie Rodriguez (ACHD)	
Plan for sharing/disseminating data and information including surveyed partners, non-surveyed partners, etc.	June 2025	Can utilize prior work on data and information sharing	Lina Stanchev (ACHD)	

ANTICIPATED CHALLENGES & BARRIERS:		
Objectives	List of Challenges & Barriers	Methods for Overcoming Challenges & Barriers
<i>Survey</i>	<i>Low response rate</i>	<i>many methods of outreach (newsletters, social media, word of mouth, personal requests)</i>
<i>Data from surrounding areas</i>	<i>Data collection methods may not be the same across jurisdictions</i>	<i>Ensure data methods are as similar as possible, ensure notes when data is not the same across jurisdictions</i>
<i>Identify participants for survey</i>	<i>Outreach is narrow; outreach is limited to orgs we know are doing the work and we don't learn anything new</i>	<i>Utilize partners identified in other objectives/activities; utilize partnerships through Adams County Health Alliance and other workgroups; ask known partners if there are groups or orgs we are missing</i>

2. Community and Partner Engagement

OBJECTIVE #4: By June of 2025, establish intentional relationships with youth and community in existing spaces by identifying existing organizations and networks that convene youth, justice-involved youth, and disproportionately affected communities. Engage and convene youth and community members by utilizing community gathering models and provide ongoing bi-directional information and feedback and resources between health department and community. Finally, ensure a mechanism of providing feedback to, and obtaining feedback from, organizations that may provide services to affected communities (Goal: 2, 3)				
LEVEL(S) OF PREVENTION: Primary, Secondary				
RISK & PROTECTIVE FACTORS: RISK: lack of nonviolent social problem-solving skills, poor behavioral control, history of violent victimization, witnessing violence, psychological/mental health problems, substance use, family conflict, economic stress, poor parent-child relationships, social isolation, neighborhood poverty, community violence, poor neighborhood support/cohesion PROTECTIVE: Coordination of resources and services among community agencies, connection to a caring adult				
PARTNERS: Diversion, DA, ACHD				
Activity	Target Date	Resources Required	Lead Person/ Organization	Progress Notes
Identify and develop a list of existing community and youth gathering spaces, focusing on spaces that support disproportionately affected communities and justice-involved youth.	12/31/2024	Community outreach to orgs & events e.g. churches, community events, youth-serving spaces	Levon/Alfonso	
Meet with community organizers (Ruben, others?) to identify and discuss existing community gathering models. Determine if any existing models can be used as is or if further development of the model is needed to work for our communities.	1/31/2025	Meeting date/time	Jamie/Levon	
Develop intentions, goals, and desired outcomes of community gatherings, including who should be present (decision makers, resources, etc.).	1/31/2025		Jamie/Levon	
Identify and develop a list of existing board(s), workgroups, and agencies with decision makers and money to bring to community gatherings and fund work (ex. CJCC Youth Subcommittee, Aurora Youth Violence Prevention).	2/1/2025	Utilize fact sheets and data developed during objective #2 to share with orgs Possible groups to include: BOH, BOCC, CJCC, DA, Sheriff, Police Chiefs	Levon/Karen	
Engage communities throughout Adams County in community gatherings (dinners) to hear about their community safety concerns and provide community resources.	TBD based on resources and capacity	Utilize fact sheets developed during objective #2 to share during community gatherings	Jamie/Levon	
Report back to the community based on community gathering questions and outcomes. Ensure a closed loop process to build credibility and reliability with the community.	TBD based on resources and capacity		Jamie	

<p>Engage and listen to youth that are justice involved or have experience with youth and community violence during quarterly lunch sessions at youth detention in Adams County (What has their experience with violence been? What do they need to be safer? What do they want that would make them act safer?)</p>	<p>TBD based on resources and capacity- Ongoing through 2025 for now</p>	<p>Funding, diversion and detention permission, discuss topics, feedback mechanism Develop list of questions to guide discussions</p>	<p>Alfonso/Levon</p>	<p>7/24: Levon is ready to hold lunch spaces at youth detention.</p>
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<p>ANTICIPATED CHALLENGES & BARRIERS:</p>		
<p>Objectives</p>	<p>List of Challenges & Barriers</p>	<p>Methods for Overcoming Challenges & Barriers</p>
<p><i>Community Engagement</i></p>	<p><i>Time, \$, Space, Manpower</i></p>	<p><i>Engaging during back-to-school sessions, existing community gatherings/meetings, ensure consistent attendance from leaders, provide food, childcare, and resources for communities (make it worth THEIR time)</i></p>
<p><i>Justice Involved Youth Engagement</i></p>	<p><i>Lack of trust within government/persons in perceived positions of power- may not want to discuss their concerns and needs</i></p>	<p><i>Ensure a trusted relationship is available, be transparent about HOW we will use their experience and feedback, ensure anonymity</i></p>

3. COMMUNITY AND PARTNERSHIP ENGAGEMENT

OBJECTIVE #5: VPAT membership will include youth, young adults, and multisector representatives that will convene at least monthly to reach goals and objectives, and ensure long-term sustainability and growth of violence prevention activities. (Goals: 1, 2, 3, 4)				
LEVEL(S) OF PREVENTION: Primary				
RISK & PROTECTIVE FACTORS: Risk: economic stress; social isolation/lack of social support; neighborhood poverty; community violence; diminished economic opportunities; poor neighborhood support and cohesion Protective: Coordination of resources and services among community agencies; community support and connectedness; connection to a caring adult; association with prosocial peers				
PARTNERS: All VPAT members				
Activity	Target Date	Resources Required	Lead Person/ Organization	Progress Notes
Identify and invite youth and young adults leaders to join VPAT meetings as regular members	August 2024	Funding Space Time	Johnny, Ginny	
Add at least 2 school decision makers to core action team	August 2024	School outreach-need superintendent, board members, etc.	Levon	
Identify and invite missing sectors and community representatives for VPAT membership	12/31/2024/ ongoing	Funding Space Time	Karen	8/20/24: DA wants to be involved-requested being added to list
Identify and define VPAT roles-core members vs. peripheral members, participation expectations, etc.	10/31/24	Defined roles Defined members	Jamie/Levon	
Develop plan/timeline for reassessing projects, programs, and policies developed by team. Include timelines for reviewing and revisiting assessments, action planning, and objectives/goals	12/31/2024		Jamie/Levon	
Create calendar to include dates that boards meet, when appropriations decisions are made, when funding requests are due, etc. to ensure information (see next step) is shared before decisions are made	10/31/2024	Information from executive support for each board/leader	Jamie/Levon	
Develop plan for presenting recurring updates to health department and county leadership (HD Executive Leadership, District Attorney, Board of	10/31/2024	Timeline for sharing information and updates	Jamie/Lina	

Health, Board of County Commissioners, CJCC Board)		Format for updates (data, work being performed, outcomes, etc.)		
Explore feasibility and/or identify new permanent staff to take lead on Violence Prevention role at health department to lead VPAT work long term	January 2025	BOH/BOCC approval; Funding	Levon/Jamie (ACHD)	Substance Use Prevention Coordinator (in process of being hired) will be 10% minimum in violence prevention; Lina will commit to 8 hours weekly to this work, as will Jamie.
Preparation for each monthly meeting: e.g. facilitation guides, prep for this action plan, status updates, etc. Structure agenda of VPAT meeting to update team and get feedback/answer specific questions	August 2024 and ongoing	Time, location/meeting platform, ongoing/regularly scheduled meeting	Jamie	

ANTICIPATED CHALLENGES & BARRIERS:		
Objectives	List of Challenges & Barriers	Methods for Overcoming Challenges & Barriers
<i>VPAT membership</i>	<i>For youth and community membership, figuring out payment structure! Paying youth for their time is important to advancing economic mobility, ensuring equity</i>	<i>Request funding from county, explore grants and philanthropic opportunities for raising funds</i>
<i>VPAT meetings</i>	<i>Time-ensuring meeting time and place is equitable for youth and sector membership</i>	<i>Agreements that meeting times will occur when it is possible for youth and community to participate; moving locations for in-person meetings as necessary;</i>
<i>F/T Violence Prevention Staff</i>	<i>Dependent upon funding and approval of leadership, BOH, BOCC.</i>	<i>Explore potential sources of funding (short and long term), clarifying role responsibilities and expectations that show added value to health department</i>
<i>Plan for ongoing presentations/updates</i>	<i>Too many updates leaders will tune out, too few updates leaders will think work isn't being completed</i>	<i>*Important to establish credibility, show progress and outcomes. Will play into requests for funding, general funding, permanent positions/programming-develop a timeline and establish WHAT needs to be shared WHEN to ensure we are hitting just the right tone</i>