



*investing in the future*

FIRST 5 CALIFORNIA  
2010-2011  
ANNUAL REPORT

---



FIRST 5 CALIFORNIA 2010–2011 ANNUAL REPORT

health ■ education ● services ▲ support



# investing in the future:

## MESSAGE FROM THE EXECUTIVE DIRECTOR

First 5 California touches the lives of millions of children and their families every year. This 2010–2011 Annual Report tells that story with both *a state and local community voice*.

Children change rapidly in their earliest years—they seem to grow almost overnight. Their brains—in particular—expand at an astonishing rate. In fact, research shows that 90 percent of a child’s brain develops during the first five years.

Nurturing and protecting children at this critical developmental stage is the focus of First 5 California. By investing in cutting-edge statewide services and support, we work to ensure that more California young children are born healthy and can reach their full potential.

Along with the First 5 county commissions and numerous other partners, First 5 California offers innovative programs and services designed to help young children thrive and succeed in school and life. This early learning community has worked for a long time to create an integrated, high-quality early learning system. Since the passage of Proposition 10 in 1998, First 5 California has been a partner in creating this sustainable system for future generations.

As noted in this report, First 5 California currently is developing and implementing quality programs and resources that target three primary audiences: the *Child*, the *Parent*, and the *Teacher* in the focus areas of nutrition, early literacy and language development, and smoking cessation.

Public education and outreach efforts on these subjects deliver research-based messages to hard-to-reach and low-income populations. Focus groups have shown that First 5 California remains a trusted source for parents, and we strive to deliver quality information to parents and other caregivers in the best interest of their children.

Recently, First 5 California completed the goals of its five-year strategic plan, which relied heavily on leadership and investments to create evidence-based programs that result in quality. The strategic plan created a powerful blueprint for First 5 California programs and supportive services, many of which are fully detailed in this Annual Report—our *Child, Parent, and Teacher Signature Programs*.

While much has been accomplished, more work is ahead. The early learning community—including First 5 California—is more aligned than ever in our commitment to ensure young children succeed in early learning settings, kindergarten, and beyond.

Kris Perry  
Executive Director



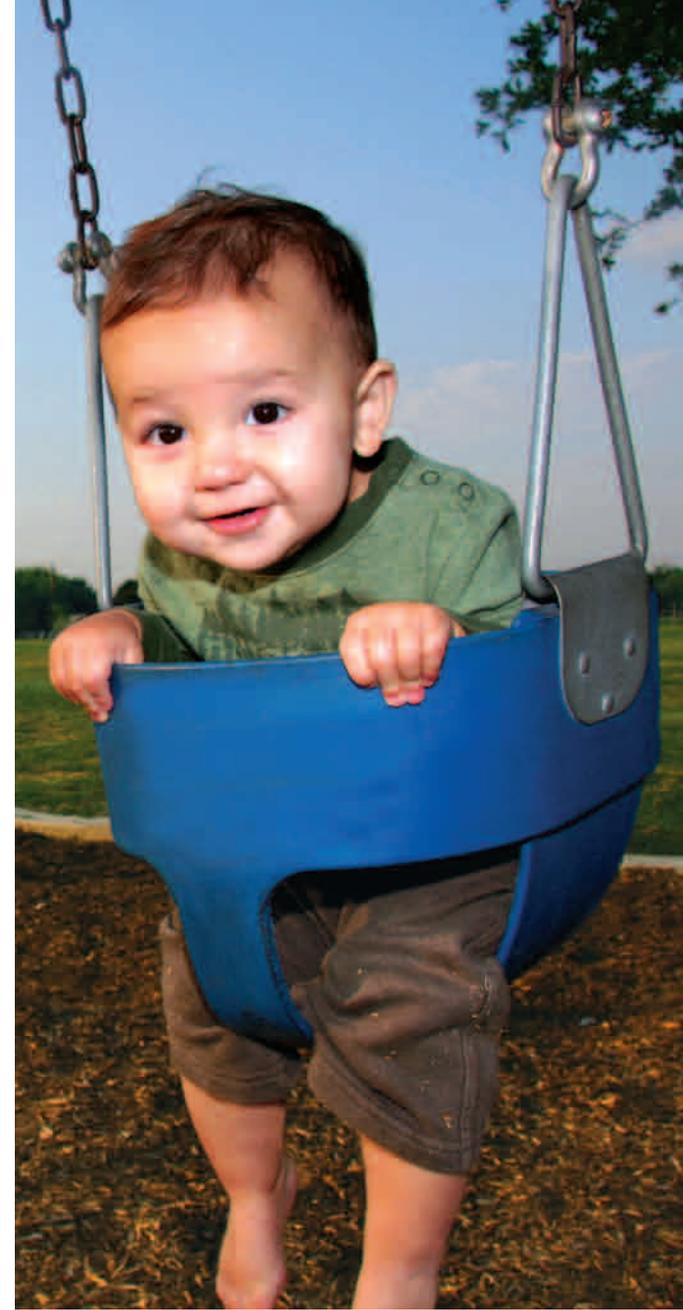
“Recent advances in brain research have provided great insight into how the brain . . . continues to grow and develop after birth. . . . Scientists now believe that [growth] is highly dependent upon the child’s experiences.”



*empowering families  
and communities*

# table of contents

California's Young Children Ready to Learn .....	7
Leadership: First 5 California .....	7
Structure: State and County .....	7
Accountability: Funding and Audit Results .....	8
Partnerships: Working Together .....	9
Serving California's Young Children, Parents, and Teachers .....	10
Child .....	12
Child Development Focus .....	12
Power of Preschool .....	12
Educare .....	18
School Readiness .....	20
Matching Fund Programs .....	21
Child Health Focus .....	25
Smoking Cessation .....	29
Parent .....	30
Family Functioning Focus .....	30
<i>Kit for New Parents</i> .....	30
Parent Education Website .....	31
Teacher .....	34
CARES Plus .....	34
Appendix A: First 5 California Result Areas and Services .....	38
Acknowledgements .....	40
References .....	40
California State Controller's Annual Report on Disk .....	41



# list of FY 2010/11 exhibits



providing support

<b>Exhibit 1:</b> First 5 California Commission Members FY 10/11 . . . . .	7
<b>Exhibit 2:</b> First 5 California Children and Families Commission Funds—Allocation of State Portion . . . . .	8
<b>Exhibit 3:</b> Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 10/11 Across Result Areas . . . . .	10
<b>Exhibit 4:</b> Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 10/11 by Result Area . . . . .	11
<b>Exhibit 5:</b> Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 10/11 by Provider . . . . .	11
<b>Exhibit 6:</b> Child Development—Total Number of Services Provided to Children Ages 0 to 5 in FY 10/11 by Service . . . . .	12
<b>Exhibit 7:</b> Power of Preschool—Integrating Level Changes in FY 10/11 . . . . .	13
<b>Exhibit 8:</b> Child Development—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Service . . . . .	20
<b>Exhibit 9:</b> Child Development—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Provider . . . . .	21
<b>Exhibit 10:</b> Child Health—Total Number of Services that Benefitted Children Ages 0 to 5 in FY 10/11 by Service . . . . .	25
<b>Exhibit 11:</b> California Smokers’ Helpline—Education Level of Callers in FY 10/11 . . . . .	28
<b>Exhibit 12:</b> California Smokers’ Helpline—Race/Ethnicity of Callers in FY 10/11 . . . . .	28
<b>Exhibit 13:</b> Child Health—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Service . . . . .	29
<b>Exhibit 14:</b> Child Health—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Provider . . . . .	29
<b>Exhibit 15:</b> Family Functioning—Total Number of Services Provided to Adults in FY 10/11 by Service . . . . .	30
<b>Exhibit 16:</b> Family Functioning—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Service . . . . .	31
<b>Exhibit 17:</b> Family Functioning—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Provider . . . . .	31



Child development



guidance  
and support



# California's Young Children Ready to Learn

## LEADERSHIP: FIRST 5 CALIFORNIA

With the passage of Proposition 10—the California Children and Families Act—in 1998, seeds for a better future for California's youngest children were firmly planted. For the past 13 years, the First 5 California Children and Families Commission (First 5 California) has established quality standards and invested in the development of programs and services emphasizing improvement in early education, child care, social services, health care, research, and community awareness.

## STRUCTURE: STATE AND COUNTY

First 5 California was created to promote and support early childhood development for children ages 0 to 5 within the provisions contained in the California Children and Families Act (the Act).

The Act authorized the establishment of 58 First 5 county commissions and required that each develop and update a local strategic plan

based on the assessed needs in the county. First 5 California prepares guidelines to assist the county commissions in the update and execution of their plans.

State leadership is provided by a seven-member Commission appointed by the California Legislature and Governor, with the Secretary of the California Health and Human Services Agency serving as an ex-officio member. The Commission hires the First 5 California Executive Director; Kris Perry has served in this capacity since July 2005.

**PUBLIC SUPPORT: Build a foundation of support for a comprehensive, integrated, and holistic early childhood development system.**

— *First 5 California Guiding Principle*

## EXHIBIT 1: First 5 California Commission Members FY 10/11

### COMMISSION MEMBERS:

**Jennifer Kent**

Chair

*Appointed by Governor*

**Molly Munger**

Vice Chair

*Appointed by Speaker of the Assembly*

**Maria Minon, M.D.**

*Appointed by Governor*

**Conway Collis**

*Appointed by Speaker of the Assembly*

**Patrick Duterte**

*Appointed by Governor*

**Casey McKeever**

*Appointed by Senate Rules Committee*

**Joyce Iseri**

*Appointed by Senate Rules Committee*

### EX-OFFICIO MEMBER:

**Diana Dooley**

*Secretary of the California Health and Human Services Agency*

# results

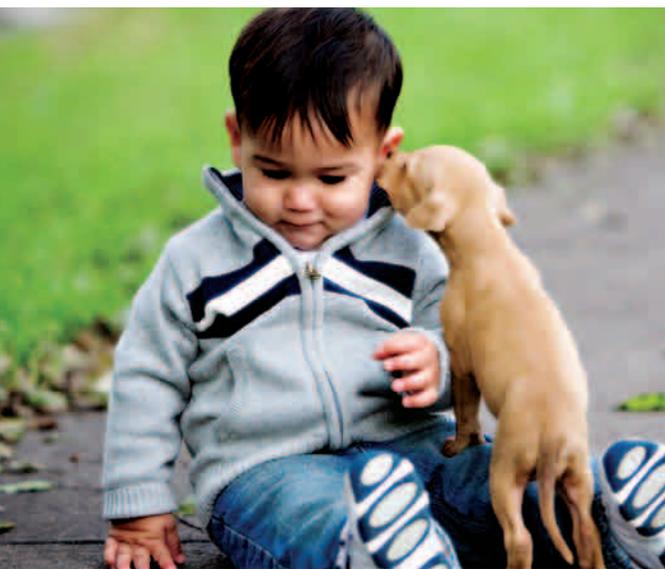
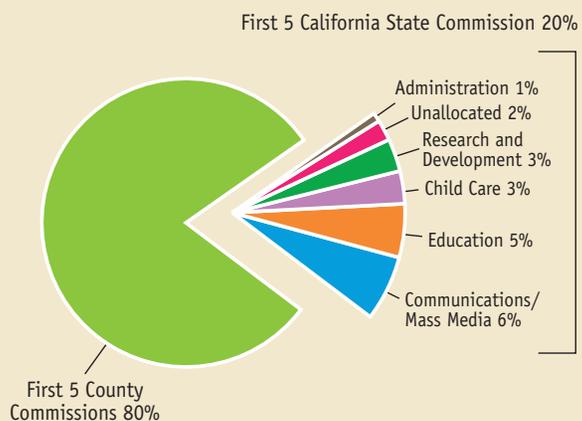


EXHIBIT 2: First 5 California Children and Families Commission Funds—Allocation of State Portion



Source: Health and Safety Code Section 130105

First 5 county commission members are appointed by the county board of supervisors. Each county commission includes two members selected from county health and local health-related service agencies, as well as one member of the appointing county board of supervisors.<sup>2</sup> Members also can be selected from other child development organizations within the county.

## ACCOUNTABILITY: FUNDING AND AUDIT RESULTS

Under the Act, the State Board of Equalization collects an excise tax levied on all tobacco products and deposits the revenue into the California Children and Families Trust Fund, allocating 20 percent to First 5 California and 80 percent to county commissions. In Fiscal Year (FY) 2010/11, First 5 California received \$94 million.

The amount of money allocated annually to each county commission is based on the number of births in the county relative to the total number in the state for the year.

First 5 county commissions use their funds to support local programs in four result areas:

- Child Development
- Child Health
- Family Functioning
- Systems of Care

The California Department of Finance, Office of State Audits and Evaluations, conducted an audit of the First 5 California financial records for FY 2010/11. Submitted in November 2011, this report on the California Children and Families Trust Fund was free of any negative findings.

First 5 California's Administrative Services Division, Contract and Procurement Division, and the Information Technology Office provide staff support for the following operations and systems:

- Fiscal management of the California Children and Families Trust Fund
- Tax revenue disbursements to county commissions
- Local agreement and program disbursement management

- Procurement and contract management
- Workforce recruitment and development
- Information technology
- Audits and annual fiscal reports
- Business services

The administration of these and other programs is consistent with all applicable state and federal laws, rules, and regulations.

During FY 2010/11, First 5 California contributed \$81.4 million to the Managed Risk Medical Insurance Board, addressing a gap in funding for the Healthy Families Program and averting the establishment of a children’s health coverage applicant waiting list. The funds were used to ensure health care services for more than 200,000 children ages 0 to 5 through June 2011.

Recognizing the importance of early intervention programs, First 5 California also provided \$50 million in FY 2010/11 to support regional center services provided to children ages 0 to 5 in the Early Start Program administered by the California Department of Developmental Services.

## PARTNERSHIPS: WORKING TOGETHER

The First 5 California Commission works with First 5 county commissions to further the goals of the Act. Partnerships focus on research design; implementation of Signature Programs for Child, Parent, and Teacher; data collection and evaluation for Signature Programs; and continuous program improvement. First 5 California provides technical assistance to First 5 county commissions in the areas of data collection, program implementation, and outreach.

**PARTNERSHIPS AND LEVERAGING:**  
**Promote collaboration with public and private partners, building on existing systems.**

— *First 5 California Guiding Principle*



outreach

# Serving California's Young Children, Parents, and Teachers



First 5 California tracks progress in four key result areas to support evidence-based funding decisions, program planning, and policies:

- Child Development
- Child Health
- Family Functioning
- Systems of Care

These result areas comprise a framework for reporting and assessing early childhood outcome data. Appendix A includes a complete description of the First 5 California result areas and services. This data reporting framework provides a statewide overview of number, type, and costs of services provided to children and adults for a particular fiscal year.

Stakeholders can use this information as one source to determine First 5 impact and resource allocation. Exhibit 3 contains the total number of services provided to children ages 0 to 5 and adults in FY 2010/11 for the three result areas of Child Development, Child Health, and Family Functioning.

The total expenditures for children ages 0 to 5 and adults receiving services in FY 2010/11 by result areas and providers are presented in Exhibits 4 and 5, respectively.

**QUALITY STANDARDS: Incorporate the highest quality, evidence-based standards when assessing program effectiveness.**

— *First 5 California Guiding Principle*

One result area, Systems of Care, differs from the others. It consists of programs and initiatives that support program providers in the other three result areas. In FY 2010/11, 22 percent of expenditures went toward community strengthening efforts; 32 percent toward service, outreach, planning, support, and management; and 46 percent toward provider capacity building, training, and support.

**EXHIBIT 3: Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 10/11 Across Result Areas**

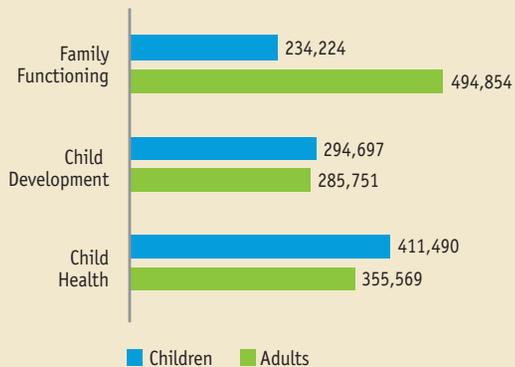




EXHIBIT 4: Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 10/11 by Result Area\*

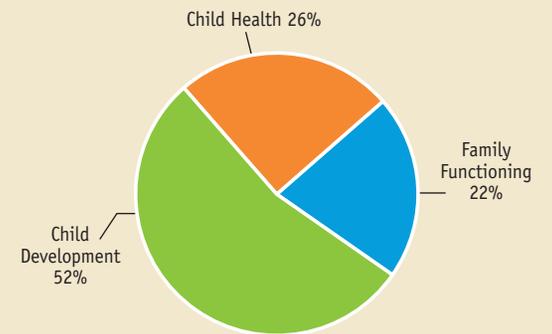
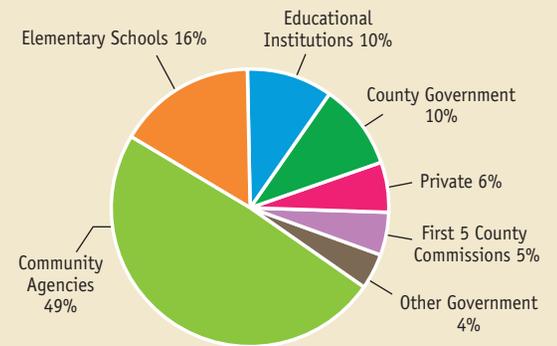


EXHIBIT 5: Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 10/11 by Provider\*



\*The percentages in this chart may not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2011

Photo courtesy of First 5 Humboldt.

# Child

## CHILD DEVELOPMENT FOCUS

Large developmental disparities exist among children ages 0 to 5 across California. Such an early readiness gap threatens later learning, development, and health. Programs that support disadvantaged children make it possible to overcome socioeconomic barriers that limit opportunities for success.

First 5 California and county commissions actively promote screening and assessment that help identify critical issues in children with special needs. When identified and addressed early, these issues will not delay children's chances for success in school and beyond. Descriptions of the eight services within the Child Development result area can be found in Appendix A. The number of child development services provided to children by service in FY 2010/11 can be found in Exhibit 6.

**CHILD CENTERED: Focus all programs and activities on the needs of California's children.**

— *First 5 California Guiding Principle*

## POWER OF PRESCHOOL

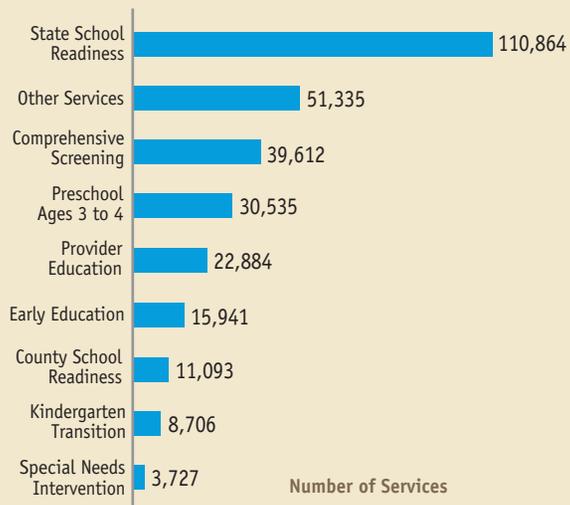
National research indicates that high-quality preschool has a significant and positive impact on early childhood outcomes, including cognitive, language, and social development.<sup>3</sup> This is particularly true for at-risk children. Approximately 50 percent of California's 3- and 4-year-old children do not attend preschool, and even fewer attend high-quality preschool.<sup>4</sup> High-quality preschools go beyond the basics to provide opportunities for evidence-based learning activities, along with the development of nurturing and supportive relationships with teachers and caregivers.

Scientific studies conclude that high-quality preschool programs improve school readiness and lead to better academic achievement in elementary school. In addition, a fiscal analysis of return on investment indicates that high-quality preschool generates approximately \$7 for every dollar invested, ultimately resulting in significant savings on welfare, education, and criminal justice.<sup>5</sup>

First 5 California's Power of Preschool (PoP) program is a high-quality, free, voluntary, part-day preschool for 0 to 5 year olds, across eight



**EXHIBIT 6: Child Development—Total Number of Services Provided to Children Ages 0 to 5 in FY 10/11 by Service**



**Power of Preschool actively reduces the achievement gap and improves school readiness among disadvantaged and underserved communities.**

California counties. These counties include Los Angeles, Merced, San Diego, San Francisco, San Joaquin, Santa Clara, Ventura, and Yolo. PoP actively reduces the achievement gap and improves school readiness among disadvantaged and underserved communities. Between 2005 and 2010, First 5 California invested \$109 million in PoP demonstration programs. Page 21 lists counties with PoP and other First 5 California Matching Fund Programs.

Data from all PoP sites in FY 2010/11 indicate that:

- Preschools are high quality: classroom environmental assessments rate an average of 5.4 out of a possible score of 7. (Five of the eight PoP counties reported this average score.)
- Teachers are well qualified: nearly 58% are Master Teachers with bachelor's or higher degrees in early childhood education.

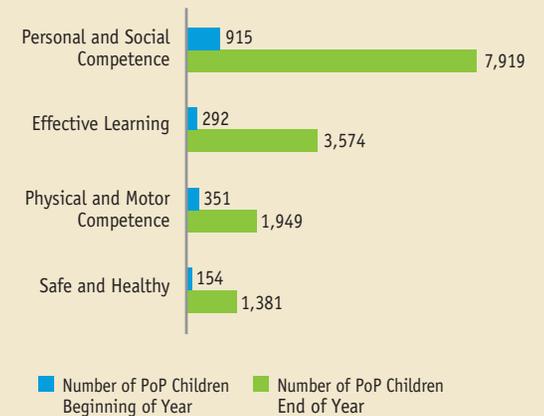
PoP requires participating counties to use the Desired Results Developmental Profile 2010 (DRDP 2010), a comprehensive assessment tool, to evaluate enrollees' progress. In FY 2010/11, PoP counties submitted DRDP data for children who had both fall and spring assessments (10,514 of 25,246 children). Children progress through five DRDP developmental levels, from lowest (Not Yet at First Level) to highest (Integrating). As depicted in Exhibit 7, pre- and post-program assessment data reflect the percentage increase at the Integrating developmental level for each Child Desired Result area:

- 765% for the measure Personal and Social Competence
- 1124% for the measure Effective Learning
- 455% for the measure Physical and Motor Competence
- 794% for the measure Safe and Healthy

PoP assists thousands of children to become competent and effective learners. An analysis of available PoP data reveals that PoP counties register strong school readiness levels and high-quality learning environments. The following stories reflect two counties with compelling results within their PoP programs.



**EXHIBIT 7: Power of Preschool—Integrating Level Changes in FY 10/11**



Source: Power of Preschool Evaluation Questions and Data Collection Form, November 2011



# quality preschools



## VOICE FROM A LOCAL COMMUNITY: FIRST 5 SAN FRANCISCO .....

### **PRESCHOOL FOR ALL: LOCAL-STATE PARTNERSHIP**

San Francisco's Preschool for All is a free, half-day preschool for all 4 year olds in San Francisco. First 5 San Francisco manages this state-, county-, and city-funded program. The purpose of Preschool for All is to provide high-quality preschool education to pre-kindergarten children.

San Francisco's Preschool for All is unique in that it is the only countywide program in California to offer preschool universally to all 4-year-old residents.<sup>6</sup> San Francisco also utilizes a mixed delivery system, with

preschool programs operated by the San Francisco Unified School District, Head Start, private nonprofit providers, corporate child care, and family child care homes.

In San Francisco, preschool attendance among 4-year-old children increased from 72 percent in 2007 to 83 percent in 2009, and this increase is due, in part, to First 5 San Francisco's investment in preschool facilities. Maximizing preschool attendance through multiple providers is important; preschool attendance is correlated with improved kindergarten readiness, and kindergarten readiness is associated with long-term achievement.<sup>7</sup>

In addition to many other agencies, Preschool for All works alongside the county's separately funded early care and education programs. This collaboration enables efficiency in teaching, nurturing, and preparing children for the future.

**First 5 California's Power of  
Preschool (PoP) program partners  
with local commissions  
to leverage resources for  
quality preschools.**

**Preschool attendance is correlated with improved kindergarten readiness, and kindergarten readiness is associated with long-term achievement.**

Preschool for All welcomes children of all income levels, needs, and cultural backgrounds.

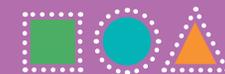
Currently, there are 121<sup>8</sup> preschools participating in Preschool for All, all of which provide quality education; are licensed and insured; follow employment regulations; demonstrate financial responsibility; and employ qualified teachers. In 2010/11, 2,870 4-year-old children were served in San Francisco.<sup>9</sup>

Preschool for All supports the professional development of its teachers by funding enhanced teacher training and increased compensation. In 2008, 178 Preschool for All teachers and assistants participated in the Comprehensive Approaches to Raising Educational Standards (CARES) program to enhance professional development and educational attainment.

According to an evaluation report on San Francisco's Preschool for All program conducted by the American Institutes for Research in 2010, teacher-child interactions are typically warm and emotionally supportive, with effective behavior and instructional management strategies that enhance children's learning. Findings further indicate that Preschool for All teachers received high scores for incorporating the life experiences and cultural backgrounds of children who are English learners.<sup>10</sup>



▲ Photo courtesy of First 5 San Francisco.



learn, grow,  
develop



## VOICE FROM A LOCAL COMMUNITY: FIRST 5 SAN JOAQUIN .....

### QUALITY PRESCHOOLS

In FY 2010/11, San Joaquin County preschool programs enrolled 864 children. First 5 San Joaquin supports quality preschool education through programs administered by the Charterhouse Center for Families; Child Abuse Prevention Council; and Tracy, Lodi, Manteca, Stockton, and Lincoln Unified School Districts. Literacy and language development are important focus areas of these programs. Highlighted below are a few examples:

- The “Building Literacy Together” program at the Tracy Unified School District provides free preschool services, health insurance and developmental screenings, and a two-week kindergarten bridge program. “Parenting for Academic Success” is offered to parents during the school year in Spanish and English.
- The “Rock, Roll, and Read” program in the Lodi Unified School District improves movement, music, and literacy skills of toddlers and preschoolers.
- At the Manteca Unified School District, activities include collaboration with the UC Davis Co-op Extension nutrition program, “Raising a Reader” program, monthly book time with the kindergarten teacher, and family involvement in the parent-teacher club.

**First 5 California’s Power of  
Preschool (PoP) program  
assists thousands of California  
children in eight counties to  
become effective learners.**

- Stockton Unified School District promotes various family literacy events. Presentations of the “Families Reading Together” program at the Stockton/San Joaquin Public Library inform parents of the importance of reading to children daily, while modeling appropriate reading techniques for parents.
- Lincoln Unified School District promotes a variety of kindergarten transition activities for preschool children to make them better prepared to enter kindergarten.

To ensure that preschool-aged children receive a quality education, First 5 San Joaquin requires preschool teachers to use an approved curriculum. All staff must have a child development permit. Both teacher-to-child ratios and teacher/staff

**High-quality preschool has a significant and positive impact on childhood outcomes...**

credentialing requirements are carefully monitored. The number of teachers earning a bachelor’s degree increased by 19 percent. Those earning a master’s or doctorate degree increased by 3 percent between 2007 and 2009. By the spring of 2009, the percentage of teachers with a child development program director permit had increased from 6 to 20 percent, reflecting the positive effect of workforce development support.<sup>11</sup>



California’s First 5 preschool programs are improving the lives of California’s young children and preparing them for tomorrow’s challenges.



research-  
based



## EDUCARE

Children in low-income families typically enter kindergarten 12 to 14 months behind the national average in pre-reading and language skills. California is ranked 30th in the nation for the percentage of children in poverty.<sup>12</sup> According to the National Center for Children in Poverty, 43 percent of children lived in low-income families, defined as an income below 200 percent of the federal poverty level, in 2009. Economically disadvantaged children often grow up in environments lacking in cognitive, social, and emotional stimulation and support.

The Educare model was first established in 2000. Currently, there are 13 Educare centers in 10 states. Educare promotes school readiness by implementing programs that reduce the achievement gap in children ages 0 to 5. Educare targets disadvantaged children and their families, including children from low socioeconomic backgrounds who are less likely to attend high-quality preschool programs.

The Educare approach for early education is comprehensive and research-based. First 5 California is part of a public-private partnership that has committed to establishing California's first Educare center in Silicon Valley, followed by a second site being developed in Los Angeles.

## VOICE FROM A LOCAL COMMUNITY: ..... FIRST 5 SANTA CLARA COUNTY

### PUBLIC-PRIVATE PARTNERSHIP

In April 2010, First 5 California approved an innovative public-private partnership that established the state's first Educare in Santa Clara County. Educare of California @ Silicon Valley (ECSV) is comprised of national and local philanthropists, foundations, public entities, business leaders, community-based organizations, public policy makers, Santa Clara County Office of Education Head Start and Early Head Start, State Preschool, East Side Union High School District CALSAFE, WestEd E3 Institute, and Franklin-McKinley School District.

**DIVERSITY: Ensure that families from all of California's diverse populations connect to services needed to succeed.**

— *First 5 California Guiding Principle*

The architects of ECSV understand that parents are key to early child development. Program features are designed to develop and strengthen the abilities of parents to support their child's learning when they enter school. Family support services are provided by full-time social workers and other community-based family service consultants.

ECSV is a collaborative effort with governance and oversight of First 5 Santa Clara County, Santa Clara County Office of Education, Franklin-McKinley School District, the Silicon Valley Leadership Group, First 5 California, Packard Foundation, Catholic Charities, East Side Union High School District, and the national Bounce Learning Network.

Currently, a 34,000-square-foot, state-of-the-art facility is being constructed in the Santee neighborhood of San Jose within the Franklin-McKinley School District, adjacent to the Santee Elementary School. The school district has 75 percent of its students as English learners and 90 percent as qualified for free or reduced lunch. The Santee neighborhood is an

impoverished community with Santee Elementary School performing in the bottom 20 percent of all schools statewide.<sup>13</sup>

Scheduled to be fully operational in fall 2014, ECSV will serve approximately 200 children, infants through 5 years of age, of low wage-earning families; teen parents and parents in job training are a priority to serve. The facility will include classrooms, classroom observation rooms, and spaces for community gatherings. The Family Resource Center will include housing, immigration, counseling, employment assistance, nutrition assistance, health services, community gardens, family-engagement educational opportunities, in-home support services, early literacy, Triple P Positive Parenting and Abriendo Puertas parent engagement support.

ECSV will leverage current evidence-based First 5 California programs, including Comprehensive Approaches to Raising Educational Standards (CARES) Plus and Power of Preschool (PoP), to implement a professional development institute for early educators, which will include training, coaching, reflective practice, and mentoring.



The Educare arch, placed at each of its centers, symbolizes the nationwide effort to build quality preschools.

Photo and artwork courtesy of Ounce of Prevention.

early learning

# school readiness



## SCHOOL READINESS

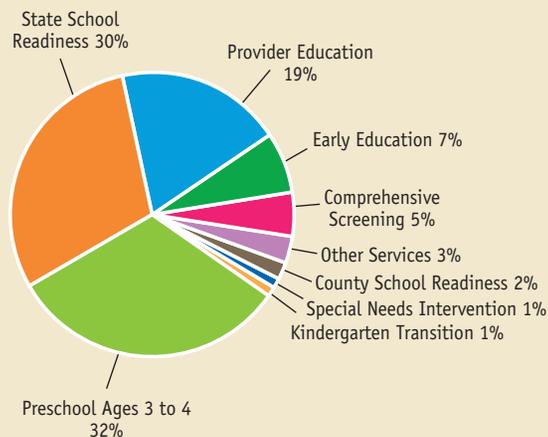
With a focus on low-performing schools, First 5 California's School Readiness program aims to improve the ability of families, schools, and communities to prepare children to enter school ready to learn. School Readiness programs target early learning and kindergarten transition; parenting education and family strengthening; health screenings and treatment; and communication between early care settings and elementary schools. Typically, parents are expected to be highly involved in School Readiness programs, as parents are regarded as a child's most important teacher.

Kindergartners who enter school without these skills are likely to remain behind as they move through the education system, making it imperative that school readiness and achievement gaps are addressed as early as possible.

First 5 California Matching Fund Programs, on page 21, contain the number of School Readiness programs per county. Featured on pages 22–24 are counties with compelling developments and results within their School Readiness programs.

The distribution of child development-related expenditures for children ages 0 to 5 and adults in FY 2010/11 by services and providers can be found in Exhibits 8 and 9, respectively.

**EXHIBIT 8: Child Development—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Service**



The percentages in this chart may not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2011

School readiness encompasses the cognitive, social, physical, emotional, and supportive elements internal and external to a child that facilitate that child's ability to enter kindergarten ready to learn. Equally important are the child's basic literacy and math skills, as it has been demonstrated that children who enter school with basic knowledge of math and language skills are more likely to experience academic success, attain higher levels of education, and obtain employment.

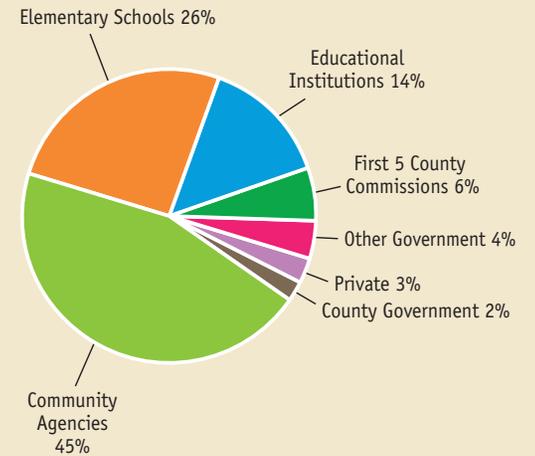
**Kindergartners who enter school without readiness skills are likely to remain behind as they move through the education system.**



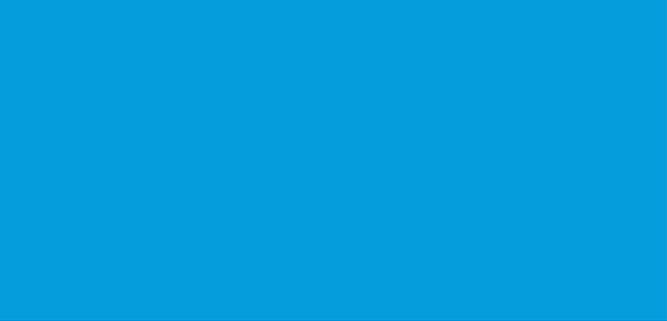
## FIRST 5 CALIFORNIA MATCHING FUND PROGRAMS

The First 5 California Commission partners with First 5 county commissions to focus on research design; implementation of Signature Programs for Child, Parent, and Teacher; data collection and evaluation for Signature Programs; and continuous program improvement.

EXHIBIT 9: Child Development—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Provider



The percentages in this chart may not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2011



## VOICE FROM A LOCAL COMMUNITY: FIRST 5 SANTA BARBARA COUNTY .....

### TOOL INFORMS ACADEMIC SUCCESS

Since its inception in 1998, First 5 Santa Barbara County has worked with its partners to ensure that children have the support they need to enter school ready to learn. An important part of creating school readiness is acquiring quality data for the purposes of gaining a deeper understanding of what works; assessing intervention effectiveness; and improving school readiness measurements and interventions.

The KSEP tool measures school readiness, that is, the degree to which children are ready to start kindergarten. The KSEP contains 16 items within school readiness domains of socio-emotional, physical, and cognitive abilities. This content is consistent with the essential school readiness indicators of the National

In 2003, First 5 Santa Barbara, UC Santa Barbara, and the Santa Maria Bonita School District developed the Kindergarten Student Entrance Profile (KSEP) tool to standardize the assessment of entering kindergarteners. The KSEP has drawn national attention as a universal screening measure and is currently being used by several school districts across the United States, as well as school districts throughout Santa Barbara County.

**The Kindergarten Student Entrance Profile (KSEP) has drawn national attention as a universal screening measure and is currently being used by several school districts...**

Association for the Education of Young Children and the California Desired Results Developmental Profile.

The KSEP is an observational rating scale completed by trained teachers who have observed children for three weeks in their natural classroom environments. Each item is rated on a 4-point scale:

- 1 = not yet
- 2 = emerging
- 3 = almost mastered
- 4 = mastered

Since 2005, First 5 Santa Barbara, UC Santa Barbara, and the Santa Maria Bonita School District have used the KSEP to assess school readiness and academic performance of thousands of children entering kindergarten.

Through this valuable collaboration, the organizations examined student academic performance from kindergarten through the third grade.

- KSEP scores significantly predicted mid-kindergarten phonological awareness and end-of-the-first-grade reading fluency.
- Students with higher California Standard Test scores at the end of the second grade had significantly higher KSEP ratings at kindergarten entry than students with lower California Standard Test scores.<sup>14</sup>



★ tools for  
success



## VOICE FROM A LOCAL COMMUNITY: FIRST 5 HUMBOLDT .....

### SOLID SUCCESS RATE

Children participating in the summer transition program of the Hoopa School Readiness program in Humboldt County have scored better in all result areas in five of the past seven years. During these years, the children improved on all 30 developmental themes of the Modified Desired Results Developmental Profile as compared to children not attending the program, even when controlling for preschool attendance. For the other two years, the summer transition program students scored better on 29 of 30 themes.

The School Readiness program in Hoopa has been working with children ages 0 to 5 and their families for more than eight years. School Readiness supports a variety of programs and services including a summer transition program, child and family literacy activities, family dinners, preschool orientation, parenting classes, baby sign language classes, and a dental health program.

In partnership with Humboldt County Department of Health and Human Services, a part-time public health nurse began working with the School Readiness program in the fall of 2009. The public health nurse works with early childhood education providers

to assist them in securing health insurance for children ages 0 to 5. The nurse also assists in vision and hearing screenings for preschool-age children and helped to create a training curriculum for children impacted by grief.

Survey data from parents and caregivers who participated in First 5 Humboldt-funded parent and family support projects in 2010 suggest high levels of satisfaction. Below is one parent's story.

Sarah\* is a 27-year-old Native American single mother of two boys, ages 2 and 4. She is a recovering addict, has successfully completed a rehab program, and is working full time. Sarah attends her recovery program meetings two nights a week, and her boys go with her, attending the School Readiness program. Sarah was introduced to opportunities to attend Incredible Years and Positive Indian Parenting. The School Readiness program visited Sarah's older son's preschool and suggested he attend transitional summer school and a weekly Buddy Reader program. Sarah's younger son had severe dental decay, and his needs were addressed with a visit to a pedodontist at Kíma:w Dental Clinic.

## CHILD HEALTH FOCUS

The importance of child health to school readiness and early elementary success is well established. Children’s overall health can make a difference in how they will do in school. A child who is sick, has undiagnosed visual or hearing problems, or neglected dental disease might miss class, struggle in school, and even have learning problems. First 5 California and county commissions promote optimal health through the identification, treatment, and elimination of risks that threaten children’s health. First 5 California’s investments support prevention, screening, and educational strategies beginning in the prenatal period.

Descriptions of the 13 services that benefitted children within the Child Health result area can be found in Appendix A. Exhibit 10 contains the number of child health services provided to children ages 0 to 5 in FY 2010/11 by service.

First 5 county commissions are important sources of support for children’s oral health services and programs in their counties, and many have allocated funds toward this purpose. More than half (55 percent) of commissions

reported that First 5 California’s four-year Oral Health Education and Training Initiative helped to support local First 5 efforts, such as improving rates of community water fluoridation, training providers, and opening community dental clinics.<sup>15</sup>

Collaboration by local commissions in the Initiative’s provider trainings, for instance, expanded access by increasing local dentists’ skill and comfort level in treating young children. At follow-up, many of these providers had begun to include more 1- to 5-year-old children in their practice as a result of the training.

**First 5 California’s investments support prevention, screening, and educational strategies beginning in the prenatal period.**

## child health



**EXHIBIT 10: Child Health—Total Number of Services that Benefitted Children Ages 0 to 5 in FY 10/11 by Service**



Source: County Demographic Worksheet, November 2011

improving lives



▲ Photo courtesy of First 5 Sacramento.

“I didn’t know to take my child to a dentist; I thought you wait for the baby teeth to fall out first.”

— Maria V., parent of a 5-year-old preschooler



## VOICE FROM A LOCAL COMMUNITY: FIRST 5 SACRAMENTO .....

### DENTAL OUTREACH SUPPORTS SCHOOL READINESS

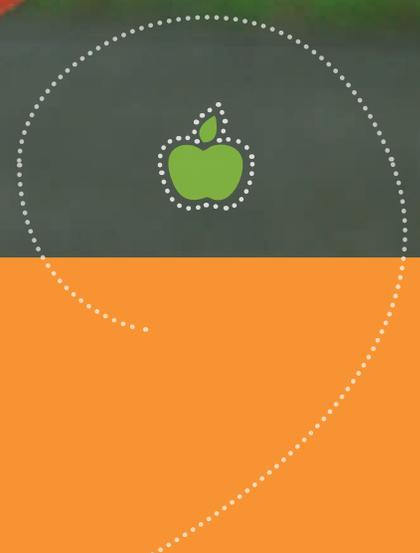
Children in Sacramento County face many obstacles to receiving dental care, especially those children without health insurance and with special needs. Partnering with Sacramento County’s Children’s Dental Task Force, First 5 Sacramento has made significant strides toward increasing dental services for local, low-income families.<sup>16</sup>

First 5 Sacramento supports Smile Keepers, a mobile dental van that provides oral health screenings, fluoride varnish applications, parental oral health education, and parent resource information and assistance. The program targets children ages 0 to 5 who attend state, Head Start, and Children’s Center preschools.

Last year, approximately 7,000 Sacramento preschoolers were served. Sacramento

County Dental Health Program staff, along with Smile Keepers’ dental van staff, attend school readiness events and health and resource fairs each year, thereby reaching even more children in the community.

Sacramento County is the only county in the state in which the majority of children with Medi-Cal are mandatorily enrolled in managed care dental plans for their dental services. First 5 Sacramento supported a 2010 study of this model of dental care to investigate to what degree this program was serving the best interests of children.<sup>17</sup> One key finding was that *fewer than one in five Medi-Cal children saw a dentist in the last year, even though they were covered by a dental plan*. One of the recommended strategies in the report was to establish more community resources for these enrolled children.



child health  
improvement

# intervention

EXHIBIT 11: California Smokers' Helpline—Education Level of Callers in FY 10/11\*

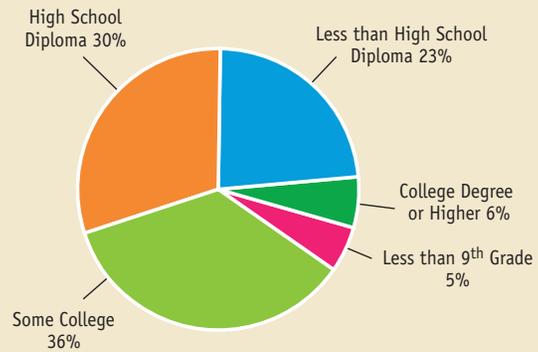
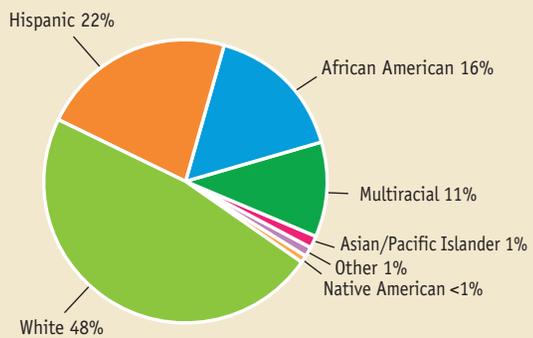


EXHIBIT 12: California Smokers' Helpline—Race/Ethnicity of Callers in FY 10/11\*



\*The percentages in this chart may not add to 100 due to rounding.  
Source: California Smokers' Helpline, University of California, San Diego, November 2011



## SMOKING CESSATION

First 5 California strives to promote the health of young children by targeting practices that pose serious risks to them at crucial developmental stages. A major health risk to children ages 0 to 5 (and beyond) is exposure to tobacco smoke. Nearly 1 million children in California under age 12 live in homes where smoking is allowed or live with an adult or adolescent smoker.<sup>18</sup>

Secondhand smoke is particularly dangerous for babies and young children whose lungs are still developing. Asthma, ear infections, pneumonia, bronchitis, and respiratory ailments are just some of the health problems that can result from exposure to secondhand smoke. Additionally, newborns exposed to secondhand smoke are at an elevated risk for Sudden Infant Death Syndrome (SIDS).

Tobacco use among pregnant women remains the number one preventable cause of infant mortality.<sup>19</sup> The California Health Interview Survey (CHIS), co-funded by First 5 California, found exposure to secondhand smoke varies across particular groups. African American children, children living in the Northern/Sierra and San Joaquin Valley regions, and children

living in lower income households are at higher risk for exposure to secondhand smoke.<sup>20</sup>

In an effort to reduce the likelihood that babies and young children will develop these health problems, and to help individuals and families quit smoking, First 5 California supports the California Smokers' Helpline. The toll-free Helpline (1-800-NO-BUTTS) provides one-on-one telephone counseling, self-help materials, and referrals to local resources.

Helpline counselors utilize scientifically validated protocols that have been shown to double the odds of callers quitting smoking successfully. Services provided by the Helpline are available in English, Spanish, Mandarin, Cantonese, Korean, and Vietnamese. In FY 2010/11, First 5 California provided \$1 million to support the Helpline. Nineteen percent of those who called the Helpline were pregnant or caring for a child between 0 to 5 years old.

The distribution of child health-related expenditures for children ages 0 to 5 and adults in FY 2010/11 by services and providers can be found in Exhibits 13 and 14 respectively.

EXHIBIT 13: Child Health—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Service\*

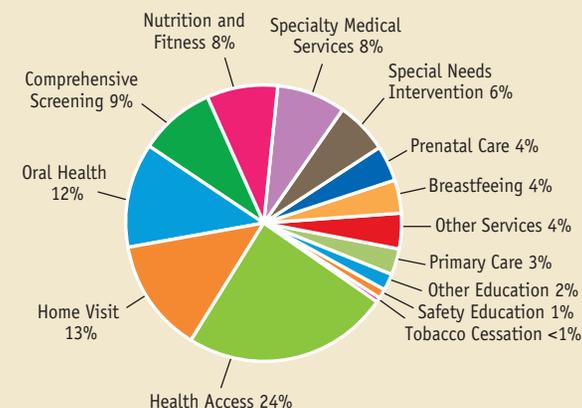
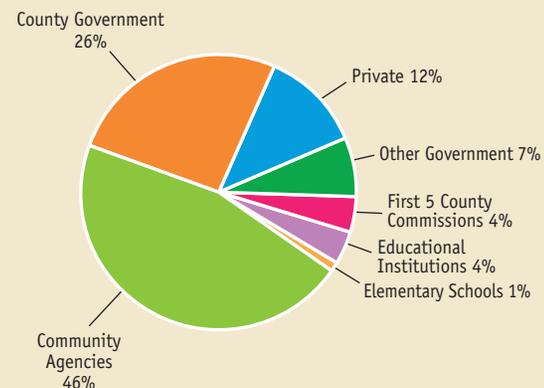


EXHIBIT 14: Child Health—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Provider\*



\*The percentages in this chart may not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2011

# Parent

## FAMILY FUNCTIONING FOCUS

A parent is a child's first teacher. First 5 California assists families by offering information, support, guidance, and referrals through its Parent Signature Program. County commissions provide eight service categories in the Family Functioning result area, as fully described in Appendix A.

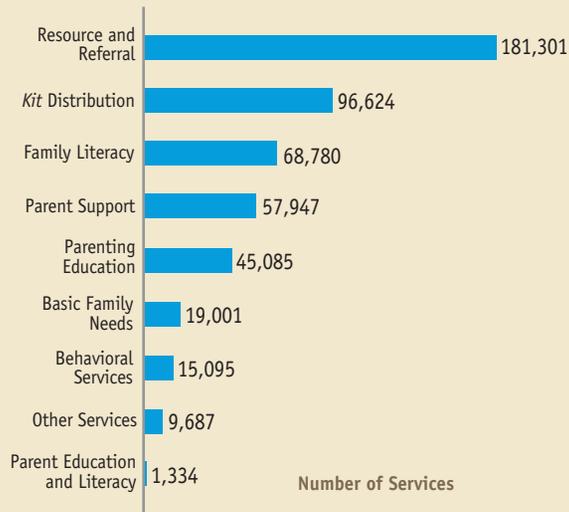
Exhibit 15 shows the number of Family Functioning services provided to adults by service category in FY 2010/11.

## KIT FOR NEW PARENTS

First 5 California's award-winning *Kit for New Parents* is the flagship project of its Parent Signature Program. The *Kit* targets hard-to-reach and low-income populations, providing information and tips for first-time parents, grandparents, and caregivers. For about a decade, First 5 California has distributed the *Kit* free-of-charge to local hospitals, physicians, and community groups to reach new parents. Contents include a practical guide for the first five years, a health handbook, and other important information on literacy and learning, child safety,



EXHIBIT 15: Family Functioning—Total Number of Services Provided to Adults in FY 10/11 by Service



First 5 California assists families by offering information, support, guidance, and referrals through its Parent Signature Program.



developmental milestones, finding quality child care, and more.

Three million *Kits* have been distributed throughout California since 2001. The *Kit* was redesigned with streamlined content and environmentally-friendly packaging in February 2011. The *Kit* is available in English, Spanish, Cantonese, Korean, Mandarin, and Vietnamese.



## PARENT EDUCATION WEBSITE

Another component of the Parent Signature Program is First 5 California's Parent Education Website. The site features practical advice for parents, with a focus on accessible information based on early childhood best practices and research.

Easily navigated and visually appealing, the site covers health, education, literacy development, smoking cessation, and more. Parents can download information, view videos, and easily link to First 5 California social media tools including Facebook and Twitter.

According to a recent Public Policy Institute of California study, Californians of all ethnicities have dramatically increased their access to the Internet via a smart phone or cell phone.<sup>21</sup> The Parent Education Website has been designed for clear viewing on these devices, as well as on tablet computers.

Since its launch in 2009, the Parent Education Website ([www.first5california.com/parents](http://www.first5california.com/parents)) has received more than three million visits.

In addition, counties have developed ways to assist parents and families, such as in the family resource center highlighted on page 32.

EXHIBIT 16: Family Functioning—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Service\*

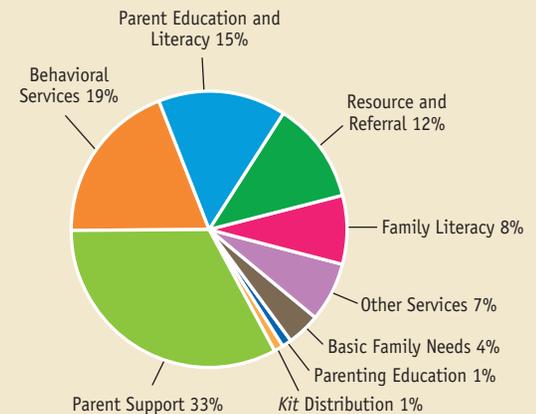
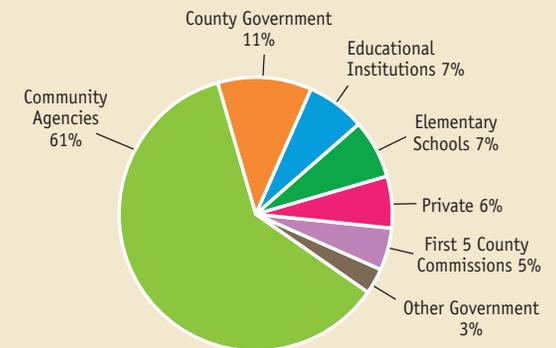


EXHIBIT 17: Family Functioning—Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 10/11 by Provider\*



\*The percentages in this chart may not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2011

## VOICE FROM A LOCAL COMMUNITY: FIRST 5 LOS ANGELES .....

### FAMILY CENTER SUPPORTS SELF-SUFFICIENCY

First 5 Los Angeles has partnered with the California Hospital Medical Center in developing the Hope Street Family Resource Center, a multiple-service center designed to provide assistance with school readiness, family literacy, and child health.

The Hope Street Family Resource Center supports both parents and children, enabling and teaching parents how to:

- Create healthier home environments
- Provide nutritious meals
- Improve family relationships
- Understand child behavior and development

Hope Street also resulted in numerous positive outcomes for parents. Parents attended an average of seven hours of parent education classes and received an average of seven home visits. About 16 fathers attended fatherhood program activities. Parents reported actively

promoting their children's language and literacy by developing home libraries, and almost half reported reading to their child three or more days a week using interactive reading strategies. Almost all parents reported knowing how to positively discipline their children and 90 percent indicated that they feel confident in their parenting skills.<sup>22</sup>

Parents reported that their child's enrollment in the School Readiness program made it easier to:

- Accept a job (62 percent)
- Keep a job (80 percent)
- Enroll in an educational or training program

Quality, full-day child care, along with parenting education programs and home visits, support a family's ability to achieve self-sufficiency. Parents report that better understanding of their child's development and strategies for promoting that development positively impacted their relationship with their families.



The Hope Street Family Resource Center is a multiple-service center designed to provide assistance with school readiness, family literacy, and child health.



**First 5 California supports parents as a child's first teacher. Parents who read to their toddler every day can help their child develop a lifelong love of learning.**

# Teacher



Teacher quality is a powerful contributor to children's learning and success. Children are supported and developed through rich teacher-child interactions from educators with the knowledge and skills to identify and support the needs of particular groups of children, including English learners. Teacher quality is so critical that a growing number of states and the federal Head Start program have mandated that early childhood educators attain more professional development and training in the field.

The most important influences on the social and emotional development of young children are parents, guardians, caregivers, and early care providers. Research shows that early care providers with higher education levels and specialized training have higher quality interactions with children resulting in positive effects on learning.<sup>23</sup>

High-quality programs with qualified early care providers create learning environments that stimulate and support the child through formative developmental stages. One study

indicates that only 13 percent of California's low-income children are in high-quality early learning programs that teach advanced thinking skills and language development.<sup>24</sup>

**High-quality programs with qualified early care providers create learning environments that stimulate and support the child...**

## CARES Plus

The Comprehensive Approaches to Raising Educational Standards (CARES) Plus Program is a First 5 California Signature Program. It is designed to increase the quality of early learning programs for children ages 0 to 5 by supporting the professional development of the

workforce. CARES Plus is an enhancement of the original CARES Program (2000-2008) that gained national recognition from Head Start, Zero to Three, and the Center for Law and Social Policy during its tenure.

CARES Plus offers professional development opportunities in both English and Spanish for early learning educators that include community college courses, access to online best practices learning sessions, video library, and personal coaching. The primary goals of CARES Plus are to:

1. Improve the effectiveness of early educators.
2. Positively impact the learning and developmental outcomes of young children.
3. Reduce turnover among early educators.

Through CARES Plus, First 5 California has introduced two validated tools for early educators developed by the University of Virginia:

- The CLASS Observation tool—an online, interactive, multimedia self-paced course.

- MyTeachingPartner (MTP)—an evidence-based professional development tool focused on improving classroom interactions through intensive coaching, classroom observation, and analysis of teaching practice.

CARES Plus includes a research design that will compare the assessments of teachers who take professional development courses, participate in higher education courses, or participate in the coaching pilot (MTP).

One of the strengths of the CARES Plus model is building on local collaborations with community colleges, as reflected in First 5 Contra Costa on page 36.

**One of the strengths of the CARES Plus model is building on local collaborations with community colleges...**



teacher  
quality



“Working as a Professional Growth Advisor (PGA) at Los Medanos College has been a wonderful experience because through this role I have been able to help and guide other colleagues to grow in so many areas professionally. Along my journey as a PGA I have been able to refine my leadership skills as well as to understand [that] leadership is an interactive way that pulls people together to become comfortable with the language of personal responsibility and commitment.”

– Maria A.

## VOICE FROM A LOCAL COMMUNITY: FIRST 5 CONTRA COSTA .....

### PEER SUPPORT FOR TEACHERS

First 5 Contra Costa administers the CARES Plus Classroom Assessment Scoring System (CLASS), called the Contra Costa CARES Plus CLASS Academy. The CLASS Academy builds upon First 5 Contra Costa’s Professional Development Program, which offers academic support for child care professionals at three local community colleges: Diablo Valley College, Contra Costa Community College, and Los Medanos College.

One notable accomplishment of the Professional Development Program is its inclusion of a diverse array of early learning educators. At Diablo Valley College, several Farsi-speaking family child care providers, encouraged by their peers, enrolled in an entry level English-as-a-Second Language (ESL) course in 2010.<sup>25</sup> Each student was provided with a scholarship for books and tuition. Early childhood education advisor Sue Handy stated that these were the most motivated students she had ever worked with and that “peer support has been just as influential in motivating them as the financial incentives.” Today, the vast majority of these original students have enrolled in more advanced childhood development courses on the path to upgrading their child development permits to the associate teacher level.

In July 2010, First 5 Contra Costa conducted a study of the Professional Development Program and its components. Ninety-five percent of early childhood professionals reported that learning workshops helped them build confidence in their abilities as leaders, while 83 percent took on new and challenging roles in the workplace as a result of being a mentor.

One focus group participant acknowledged the important role financial incentives play in developing a professional early care educator workforce, stating, “Providers come for the money and take classes and then they don’t want to stop, even if there is no money. They see how professional they are and their job is easier and they get respect from parents. With classes that we have taken, we family child care providers now get respect as teachers.”

**First 5 California’s CARES Plus aims to build quality and retention of early learning teachers.**



Photo courtesy of First 5 Contra Costa.

rich teacher-child  
interactions

# APPENDIX A: FIRST 5 CALIFORNIA RESULT AREAS AND SERVICES

## Result 1: Improved Family Functioning

Providing parents, families, and communities with relevant, timely, and culturally appropriate information, education, services, and support.

### Services:

- **Behavioral, Substance Abuse, and Other Mental Health Services**  
Behavioral and mental health services, substance abuse services, treatment, and counseling and/or therapy for children or adult family members, including play, parent-child interaction approaches, child-abuse counseling, and family therapy.
- **Adult Education and Literacy for Parents**  
Education, training, ESL classes, literacy, and/or a General Equivalence Diploma (GED).
- **Community Resource and Referral**  
Programs that provide referrals or service information about various community resources, such as medical facilities, counseling programs, family resource centers, and other supports for families; for instance, 211 services or community resource reporting.
- **Distribution of Kit for New Parents**  
Programs that provide and/or augment the First 5 California *Kit for New Parents* to new and expectant parents (e.g., a hospital visitation program to new mothers), as well as caregivers of children 0 to 5.
- **Family Literacy Programs**  
Programs designed to increase the amount of reading that parents do with their children. Programs may include educating parents about the benefits of reading or looking through books (e.g., Even Start, Reach Out and Read, Raising a Reader).

- **Provision of Basic Family Needs (e.g., Food, Clothing, Housing)**  
Meals, groceries, or clothing provided through programs such as food pantries and store certificates, emergency funding or household goods acquisition assistance, temporary or permanent housing acquisition assistance, and related case management.
- **Targeted Intensive Parent Support Services**  
Intensive and issue specific support services to families at risk including home visitation, long-term classes or groups, or other intensive support for parents or expectant parents to increase knowledge and skills related to parenting and improved family functioning.
- **General Parenting Education Programs**  
Short-term, non-intensive instruction on general positive parenting topics.

## Result 2: Improved Child Development

Increasing the quality of and access to early learning and education for young children.

### Services:

- **Preschool for 3- and 4-year-olds**  
Preschool for 3- and 4-year-olds distinct from a comprehensive school readiness program. Includes funding pre-existing spaces or spaces in programs with the intensity and quality similar to Power of Preschool criteria.
- **State School Readiness Programs and Local Match**  
State and local match-funded services under the State Commission's School Readiness Initiative, designed to improve children's readiness for school.
- **Local School Readiness (Mirror Programs)**  
County commission-based School Readiness programs funded solely by county commission dollars that are "mirror" programs to the State School Readiness Program.

- **Comprehensive Developmental Screening and Assessment**  
Screening and diagnostic services including behavioral, mental health, developmental, and physical health. This includes screening programs that measure cognitive/intellectual functioning, language and communication skills, social and emotional development, and perceptual/motor functioning to identify children who show developmental delays. These services determine the nature and extent of a problem and recommend a course of treatment and care.
- **Targeted Intensive Intervention for Children Identified with Special Needs**  
Programs that identify children with special needs and provide intensive and specific services to those children. Children with disabilities and other special needs refers to those children who are between birth and 5 years of age and meet the definition of "special needs."
- **Early Education Programs for Children (other than School Readiness and Preschool for 3- and 4-year olds)**  
Quality intensive educational activities and experiences for children intended to foster social, emotional, and intellectual growth, and prepare them for further formal learning.
- **Early Education Provider Programs**  
Training and educational services, supports, and funding to improve the quality of care or facilities. This includes Comprehensive Approaches to Raising Educational Standards, facility grants, and supply grants to providers.
- **Kindergarten Transition Services**  
Classes, home visits, or other activities designed to help children be more comfortable and accustomed to the learning environment, expectations, activities, and school personnel when they enter kindergarten. This category also includes individual child learning plans and school-wide transition plans.



### Result 3: Improved Child Health

Promoting optimal health through identification, treatment, and elimination of the risks that threaten children's health and lead to developmental delays and disabilities in young children.

#### Services:

- **Breastfeeding Assistance**  
Education related to the benefits of breastfeeding, including classes to women, families, employers, and the community, as well as breastfeeding support services to women.
- **Nutrition and Fitness**  
Information and services about nutrition, fitness, and obesity prevention for the 0 to 5 population; this includes programs to teach the basic principles of healthy eating, food handling and preparation, and the prevention of illness.
- **Other Health Education**  
Information and services about health other than nutrition, fitness, and obesity prevention.
- **Health Access**  
Health insurance, premium support, and enrollment assistance programs that ensure use of health services, strategies to retain health insurance, and insurance premium payments or subsidies.
- **Home Visitation for Newborns and Their Families**  
Home visitation services to promote and monitor development of children ages 0 to 2.
- **Oral Health**  
Dental screenings, checkups, cleanings, preventive and acute treatments, and education on preventive care. May include training for providers as well as for children and families.
- **Prenatal Care**  
Education, treatment, and counseling to promote healthy pregnancies and deliveries.

- **Primary Care Services (e.g., Immunizations, Well Child Checkups)**  
Medical care services to children ages 0 to 5 including preventive, diagnostic, and therapeutic care by a licensed healthcare professional.
- **Comprehensive Screening and Assessment**  
Screening and diagnostic services including behavioral, mental health, developmental, and physical health. Includes screening programs that measure cognitive/intellectual functioning, language and communication skills, social and emotional development, and perceptual/motor functioning to identify children who show developmental delays. These services determine the nature and extent of a problem and recommend a course of treatment and care.
- **Targeted Intensive Intervention for Children Identified with Special Needs**  
Programs that identify children with special needs and provide intensive and specific services to those children. Children with disabilities and other special needs refers to those children who are between birth and 5 years of age and meet the definition of "special needs."
- **Safety Education and Intentional and Unintentional Injury Prevention**  
Programs that disseminate information about child passenger and car safety, fire safety, water safety, home safety (childproofing), and the dangers of shaking babies. Includes education on when and how to dial 911, domestic violence prevention, and intentional injury prevention. Referrals to community resources that focus on these issues may also be included.
- **Specialty Medical Services**  
Emergency and critical care services for children ages 0 to 5 who require specialty care or have an illness or injury that requires immediate, short-term intervention or other specialty care services including care for chronic childhood illnesses. This category also includes follow-up on medical conditions or concerns identified from health/developmental screenings, such as autism, vision, or asthma.

- **Tobacco Cessation Education and Treatment**  
Education on tobacco-related issues and abstinence support for participants using tobacco products. Includes providing information on reducing young children's exposure to tobacco smoke.

### Result 4: Improved Systems of Care

Implementing integrated, comprehensive, inclusive, and culturally and linguistically appropriate services to achieve improvements in one or more of the other Focus Areas.

#### Services:

- **Service Outreach, Planning, Support, and Management**  
General planning and coordination activities, program monitoring, technical assistance and support, support for interagency collaboration, support for services to diverse populations, contract administration, program database management, and program support and oversight activities.
- **Provider Capacity Building, Training, and Support**  
Provider training and support to improve their capacity to participate and deliver services to families with young children. Includes business planning, grant writing workshops, sustainability workshops, and large community conferences or forums.
- **Community Strengthening Efforts**  
Community awareness and educational events on a specific early childhood topic or promoting broad awareness of the importance of early childhood development.

## ACKNOWLEDGEMENTS

First 5 California, the Institute for Social Research, and Academic Technology & Creative Services at California State University, Sacramento would like to acknowledge and thank the following First 5 County Commissions and staff for contributions to the First 5 California 2010–2011 Annual Report:

### First 5 Contra Costa–Page 36

Sean Casey, Executive Director  
Debra Silverman, Early Childhood Education Program Officer  
Tracy Irwin, Public Affairs Manager

### First 5 Humboldt–Page 24

Wendy Rowan, Executive Director  
Kim Puckett, Evaluator

### First 5 Los Angeles–Page 32

Evelyn V. Martinez, Chief Executive Officer  
Leila Espinosa, UCLA Center for Healthier Children, Families, and Communities  
Vickie Kropenske, Director, Hope Street Family Center at California Hospital Medical Center

### First 5 Sacramento–Page 26

Toni Moore, Executive Director  
Debra Payne, Program Planner, Health/Dental/Kit for New Parents  
Tanya Burgos, Dental Clinic Manager, The Effort

### First 5 San Francisco–Page 14

Laurel Kloomok, Executive Director  
Wei-min Wang, Program Officer, Preschool for All

### First 5 San Joaquin–Page 16

Lani Schiff-Ross, Executive Director  
Billi Jo Zopfi, Contracts Analyst

### First 5 Santa Barbara County–Page 22

Patricia Wheatley, Executive Director  
Pedro Paz, Manager of Program and Evaluation

### First 5 Santa Clara County–Page 18

Jolene Smith, Chief Executive Officer  
Tiffany Ton, Executive Assistant  
Tyson Jue, Chief of Policy and Communications  
David Brody, Chief Program Officer  
Judith Calvo, Associate Director  
Sahar Ghafari, Research/Evaluation Coordinator  
FIRST 5 WestED/E3 Institute

## REFERENCES

### EXECUTIVE DIRECTOR'S MESSAGE

<sup>1</sup>Hawley T., Gunner M. (2000). Starting Smart: How Early Experiences Affect Brain Development. (2<sup>nd</sup> ed.). Zero to Three and The Ounce of Prevention Fund. Retrieved October 5, 2011, from <http://www.zerotothree.org/site/DocServer/startingsmart.pdf?docID=2422>

### STRUCTURE: STATE AND COUNTY

<sup>2</sup>First 5 California. (2011). Proposition 10: Full text of the proposed law. Retrieved October 5, 2011 from <http://www.cfc.ca.gov/PDF/cfcact.pdf>

### CHILD

<sup>3</sup>Gormley, W. T., Jr., Gayer, T., Phillips D., & Dawson, B. (2005). The Effects of Universal Pre-K on Cognitive Development. *Developmental Psychology*. 41(6) 872-884.

<sup>4</sup>RAND Corporation. (2009). Strategies for Advancing Preschool Adequacy and Efficiency in California. RAND Labor and Population Research Brief. Santa Monica, CA. Retrieved October 5, 2011, from [http://www.rand.org/pubs/research\\_briefs/RB9452.html](http://www.rand.org/pubs/research_briefs/RB9452.html)

<sup>5</sup>CHILDREN NOW. (2011). California Report Card 2011-12: Setting the Agenda for Children. Retrieved October 5, 2011 from [http://www.childrennow.org/uploads/documents/reportcard\\_2011.pdf](http://www.childrennow.org/uploads/documents/reportcard_2011.pdf)

<sup>6</sup>First 5 California. (2008). First 5 San Francisco–PoP Program Profile. Retrieved November 4, 2011, from <http://www.plan4preschool.org/documents/pop-08-san-francisco.pdf>

<sup>7</sup>Applied Survey Research. (2010). *Portrait of School Readiness 2009-10: San Francisco Unified School District, Executive Summary*. Retrieved November 4, 2011, from [http://www.first5sf.org/downloads/SFUSD\\_readiness09\\_execsum.pdf](http://www.first5sf.org/downloads/SFUSD_readiness09_execsum.pdf)

<sup>8</sup>First 5 San Francisco. (2011). First 5 San Francisco Provider Directory. Retrieved November 4, 2011, from <http://www.batchgeo.com/map/1bb5f7a4c70628c4d7b2300e4df8391>

<sup>9</sup>First 5 San Francisco Children and Families Commission Fact Sheet. *Preschool for All At a Glance*.

<sup>10</sup>American Institutes for Research. (2010). *Evaluation of Preschool for All (PFA) Implementation in San Francisco County: Year 5 Report*.

<sup>11</sup>Harder and Company. (2010, July). First 5 San Joaquin. *Evaluation Report 2008-2010: Improving the Lives of Children 0-5 and Their Families*. Retrieved November 4, 2011, from [http://www.sjckids.org/base/documents/20101022\\_085958.pdf?CFID=48250&CFTOKEN=12393343](http://www.sjckids.org/base/documents/20101022_085958.pdf?CFID=48250&CFTOKEN=12393343)

<sup>12</sup>The Annie E. Casey Foundation. (2010). Kids count data center: Data across states. Retrieved October 2, 2011 from <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=v&order=a&ind=43&dtm=322&tf=133>

<sup>13</sup>Silicon Valley Leadership Group. Educare. (n.d.). Retrieved November 4, 2011, from [http://svlg.org/docs/Educare\\_F5.PDF](http://svlg.org/docs/Educare_F5.PDF)

<sup>14</sup>Quirk, M., Furlong, M. J., Lilles, E., Felix, E., & Chin, J. (2011). Preliminary Development of Kindergarten School Readiness Assessment for Latinos. *Journal of Applied School Psychology*, 27, 77–102. Retrieved November 4, 2011, from [http://web.me.com/michaelfurlong/KSEP/Kindergarten\\_Student\\_Entrance\\_Profile\\_files/JASP\\_KSEP\\_2011.pdf](http://web.me.com/michaelfurlong/KSEP/Kindergarten_Student_Entrance_Profile_files/JASP_KSEP_2011.pdf)

<sup>15</sup>Aved, B.M., Meyers, L.S., & Burmas, E.L. (2008). *First 5 California Oral Health Education and Training Project*. Final Evaluation Report. Barbara Aved Associates, Sacramento, CA.

<sup>16</sup>Wofford K, Meehan D. (2008, December). Embracing an Oral Health Agenda for Sacramento County's Youngest and Most Vulnerable Residents. A Report for the Sacramento Children's Dental Task Force. Retrieved November 4, 2011, from [http://www.cdafoundation.org/library/docs/embracing\\_oral\\_health\\_agenda.pdf](http://www.cdafoundation.org/library/docs/embracing_oral_health_agenda.pdf)

<sup>17</sup>Barbara Aved Associates. (2010, June). *Sacramento Children Deserve Better: A Study of Geographic Managed Care Dental Services*. Retrieved November 4, 2011, from [http://www.f5ac.org/files/GMC%20Study%20Sac\\_022976.pdf](http://www.f5ac.org/files/GMC%20Study%20Sac_022976.pdf)

<sup>18</sup>Holtby, S., Zahnd, E., Grant, D., & Park, R. (2011, October). Health Policy Brief. *Children's Exposure to Secondhand Smoke: Nearly One Million Affected in California*. UCLA Center for Health Policy Research. Retrieved November 4, 2011, from <http://www.healthpolicy.ucla.edu/pubs/files/SmokePBREVISED11-2-11.pdf>

<sup>19</sup>First 5 California. 2010. *Helping Parents Quit Smoking*. Smoking Fact Sheet 2a. Retrieved July 29, 2011 from <http://www.cfc.ca.gov/pdf/press/fact%20sheets/SMOKING%20Fact%20Sheet%20revised%202-10-09.pdf>

<sup>20</sup>Holtby, S., et al. Retrieved November 4, 2011, from <http://www.healthpolicy.ucla.edu/pubs/files/SmokePBREVISED11-2-11.pdf>

### PARENT

<sup>21</sup>Public Policy Institute of California. (June 22, 2011). More Californians Using Cell Phones to Go Online. Retrieved October 4, 2011 from <http://www.ppic.org/main/pressrelease.asp?p=1127>

<sup>22</sup>First 5 Los Angeles. (2011, August). *First 5 LA School Readiness Initiative Cycle I Through Cycle IVB: Year-End Report: Part II Evaluation*. Hope Street Part II 00230 YE Report FY 10-11.

### TEACHER

<sup>23</sup>Bueno, M., Darling-Hammond, L., & Gonzales, D. (March 2010). A Matter of Degrees: Preparing Teachers for the Pre-K Classroom. The Pew Center on the States, Pre-K Now. Retrieved October 5, 2011, from [http://www.preknow.org/documents/teacherquality\\_march2010.pdf](http://www.preknow.org/documents/teacherquality_march2010.pdf)

<sup>24</sup>Preschool California. Research Shows: (April 5, 2011). The Benefits of High-Quality Early Learning. Retrieved October 5, 2011, from <http://www.preschoolcalifornia.org/resources/resource-files/outreach-packet/preschool-california-research.pdf>

<sup>25</sup>First 5 Contra Costa. (2007, September). On-line Newsletter. Spotlight: Farsi-Speaking Child Care Providers Benefiting from the PDP. Retrieved November 4, 2011, from [http://www.firstfivecc.org/uploads/press/news/09\\_07/news.htm](http://www.firstfivecc.org/uploads/press/news/09_07/news.htm)

The enclosed disk contains a full PDF version of this Annual Report and the *California State Controller's Annual Report to the First 5 California Commission*. In addition, view a PDF version of the *First 5 California 2010-2011 Annual Report* at [www.cffc.ca.gov](http://www.cffc.ca.gov).

---



This annual report was prepared in conjunction with the Institute for Social Research, California State University, Sacramento.





FIRST 5 CALIFORNIA

CALIFORNIA CHILDREN & FAMILIES COMMISSION

2389 GATEWAY OAKS DRIVE, SUITE 260

SACRAMENTO, CA 95833

P: (916)263-1050 F: (916)263-1360

[www.ccfc.ca.gov](http://www.ccfc.ca.gov)



30% post-consumer waste