

Building on the Momentum Surrounding Early Childhood Education

2013–14 | First 5 California Annual Report



Our Mission

CONVENE, PARTNER IN, SUPPORT, AND HELP LEAD THE MOVEMENT TO CREATE AND IMPLEMENT A COMPREHENSIVE, INTEGRATED, AND COORDINATED SYSTEM FOR CALIFORNIA'S CHILDREN PRENATAL THROUGH 5 AND THEIR FAMILIES. PROMOTE, SUPPORT, AND OPTIMIZE EARLY CHILDHOOD DEVELOPMENT.



Building on the Momentum Surrounding Early Childhood Education

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MESSAGE FROM THE EXECUTIVE DIRECTOR

California has long-recognized the importance of investing in the success of its youngest children. By passing Proposition 10 in 1998, Californians voiced their commitment to making this investment a high priority. First 5 California was established to improve the lives of newborns, infants, and toddlers. With its county partners, First 5 California's mission is to do everything in its power to advance the well-being of children ages 0 to 5.

This past year has seen unprecedented attention spotlighting the importance of early childhood education. The President, recognizing expanding access to high-quality early childhood education as "among the smartest investments that we can make," has earmarked millions of dollars to increase early education funding. Likewise, former Secretary of State Hillary Clinton co-chairs a

national organization whose mission is to improve the health and well-being of children ages 0 to 5 so that more of America's children will be prepared to succeed in the 21st century.

In its 2013–14 session, the California Legislature identified early education as one of its highest priority policy issues. Numerous bills were introduced to support and improve early childhood education opportunities in the state, including an ambitious attempt to expand the

State's transitional kindergarten program to all 4-year-olds.

The Governor took notice, passing a budget that included the biggest investment in early education in at least a decade. Among other things, the State's budget included a \$50 million investment for quality improvement, and a one-time \$25 million allocation for preschool and transitional kindergarten teacher training.

First 5 California is perfectly poised to build on this momentum. Our recently approved Strategic Plan directs us to work with our Federal, State, local, private, and stakeholder partners to maximize our resources to better serve our target



population. We also have been tasked with supporting and strengthening our statewide efforts and initiatives to facilitate the creation of a seamless system of integrated and comprehensive programs and services.

In the last year, First 5 California has been an active convener, partner, participant, and advocate on early childhood issues at the Federal and State levels and with various stakeholder groups within California. During this process, First 5 California continually has emphasized its commitment to foster the ongoing conversation on these issues so they remain fresh and relevant.

For example, First 5 California is hosting the first Child Health, Education, and Care Summit in 2015, which will bring together eight State agencies that provide support and assistance to our youngest children and their families, with the goal of building powerful partnerships to maximize cross-agency efforts and outcomes.

Finally, First 5 California's recent media activity has helped reinforce with California's parents and caregivers the need to work with children as early as possible to support healthy brain development. For the first time in years, we launched a television and radio campaign, with the slogan *Talk.Read.Sing.* Your Words have the Power to Shape Their World. This successful campaign culminated with First 5 California's radio spot receiving a 2014 Southern California Broadcasting Association Outstanding Achievement Award.

There has never been greater momentum than now for early education issues, and First 5 California looks forward to its continued and proactive involvement in this most noble crusade.

CAMILLE MABEN

EXECUTIVE DIRECTOR, FIRST 5 CALIFORNIA

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Support Healthy Development and School Readiness for Young Children

Leadership: First 5 California

In 1998, California voters passed Proposition 10—the California Children and Families Act (the Act)—and declared the importance of investing in a better future for California's youngest children. For the past 15 years, the 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. The vision of First 5 California is for all of the state's children to receive the best possible start in life and thrive.

Strategic Plan

The State Commission approved a new Strategic Plan for First 5 California in January 2014. The Strategic Plan serves as an important compass for the Commission's deliberations to decide how best to plan future work, investments, and partnerships over

the next five years. For more information about the Strategic Plan, please go to http://www.ccfc.ca.gov/pdf/commission/resources/F5CA Strategic Plan.pdf.

Structure: State and County

The Act established an independent sevenmember State-level Commission appointed by the California Legislature and Governor, with a designee from Secretary of the California Health and Human Services Agency serving as an ex-officio member. The Commission appoints the First 5 California Executive Director; the current Executive Director is Camille Maben.

The Act also 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 of children and families in the county. The members of each First 5 county commission 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. Members also can be selected from other child development organizations within the county.

First 5 California collects and reviews each county commission's annual report, and includes county-level data in this State-level annual report. First 5 California prepares guidelines to assist the county commissions in the preparation of their annual reports.

Part nerships: Working Together

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

In sum, while the Act directs the State and county commissions to achieve common goals and outcomes for children ages o to 5, it empowers each individual commission to develop its own strategic plan and programs to accomplish those goals according to the needs of local children and families. At the same time, as this report illustrates, First 5 California and the county commissions work as partners to implement the statewide Signature Programs and identify common policy goals.

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 FY 2013–14, First 5 California received \$86.1 million and county commissions received \$344.4 million.



Commission Members:

George Halvorson, Chair

Appointed by Governor

Joyce Iseri, Vice Chair Appointed by Senate Rules Committee

Casey McKeever

Appointed by Senate Rules Committee

Conway Collis

Appointed by Speaker of the Assembly

Kathryn Icenhower

Appointed by Speaker of the Assembly

Magdalena Carrasco

Appointed by Governor

Muntu Davis

Appointed by Governor

Ex-Officio Member:

Diana Dooley

Secretary of the California Health and Human Services Agency

Jim Suennen, Designee



The amount of funding allocated annually to each county commission is based on the annual number of births in the county relative to the total number in the state. Each county must prepare an annual independent audit subject to guidelines prepared by the State Controller's Office. The counties invest their dollars in locally designed programs, as well as in First 5 California's statewide Signature Programs as match funding. First 5 county commissions use their funds to support local programs in four result areas:

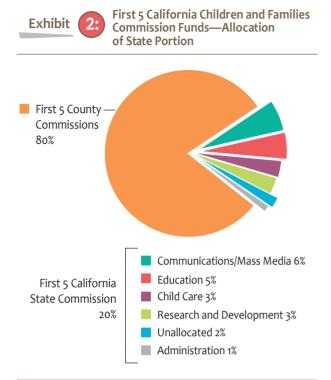
- Improved Family Functioning
- Improved Child Development
- Improved Child Health
- Improved Systems of Care

First 5 California's Administrative Services, Evaluation, Executive, and Program Management Divisions; and the Communications, Contracts and Procurement, and Information Technology Offices provide staff support for the following functions, operations, and systems:

- Fiscal management of the California Children and Families Trust Fund
- Tax revenue disbursements to county commissions
- Audits and annual fiscal reports
- Local agreement and program disbursement management
- Public education and outreach
- Evaluation of First 5 California programs
- Procurement and contract management
- Workforce recruitment and development
- Information technology
- Business services

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

The California Department of Finance, Office of State Audits and Evaluations, conducted an audit of the First 5 California financial records for FY 2013–14. Submitted in December 2014, this report on the California Children and Families Trust Fund was free of any negative findings.



Source: Health and Safety Code Section 130105

The State Controller's Office conducts an annual review of the 58 county commissions' independent audits. In October 2014, the Controller published its review of the counties' audits for FY 2012–13, summarizing several findings contained in the local audits, but did not deem any of them significant enough to withhold funding. The audit can be viewed on First 5 California's website at http://www.ccfc.ca.gov/commission/commission_annual_report.html.





Serving California's Young Children, Parents, and Teachers

Four Key Result Areas

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

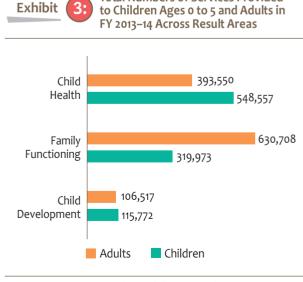
- 1. Improved Family Functioning
- 2. Improved Child Development
- 3. Improved Child Health
- 4. Improved Systems of Care

These result areas comprise a framework for reporting and assessing early childhood outcome data. Appendix A includes a complete description of the result areas and services for First 5 California and the 58 county commissions. 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 impact and resource allocation

from First 5 statewide. Exhibit 3 contains the total numbers of services provided to children ages 0 to 5 and adults in FY 2013–14 for Improved Family Functioning, Improved Child Development, and Improved Child Health.

Total Numbers of Services Provided



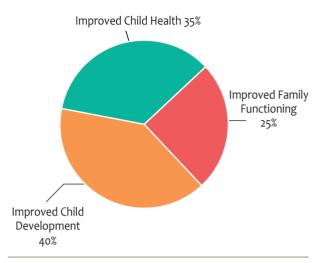
Source: County Demographic Worksheet, November 2014

The total expenditures (\$489,044,045) for children ages 0 to 5 and adults receiving services in FY 2013–14 by result areas and providers are presented in Exhibits 4 and 5, respectively.

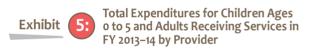
One result area, Improved Systems of Care, differs from the others; it consists of programs and initiatives that support program providers in the other three result areas. In FY 2013–14, 15 percent of expenditures went toward community strengthening efforts; 30 percent toward service, outreach, planning, support, and management; and 55 percent toward provider capacity building, training, and support.

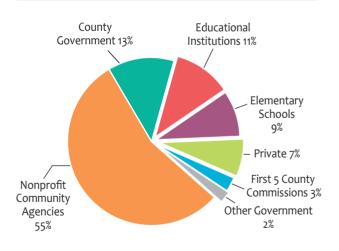


Total Expenditures for Children Ages o to 5 and Adults Receiving Services in FY 2013–14 by Result Area



Source: County Revenue and Expenditure Summary, November 2014





Source: County Revenue and Expenditure Summary, November 2014



Child Development Focus

The cornerstone of First 5 California's purpose is to invest in quality early learning programs. National research indicates high-quality early learning programs have a significant, positive impact on early childhood outcomes and at-risk children in cognitive, language, and social development.^{1,2} Decades of program evaluations show investments in high-quality early learning produce higher rates of return.

Effective early childhood programs generate benefits to society that far exceed program costs. Yet, nationally, many licensed facilities fail to meet or just barely meet the most basic guidelines for quality.

Approximately 50 percent of California's disadvantaged and at-risk 3- and 4-year-old children do not attend preschool, and even fewer attend high-quality preschools.³ High-quality early learning programs 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 high-quality early learning programs improve school readiness and lead to better academic achievement in elementary school. Cost-benefit and return on investment analyses demonstrate investments in high-quality early learning programs generate substantial social and economic payoffs by reducing persistent social costs, such as unemployment, drug or alcohol abuse, and crime.

Child Signature Program

In October 2011, First 5 California launched the Child Signature Program (CSP) as a consolidation of the State Commission's previous early learning programs. The purpose of this three-year strategic program investment is to increase the quality of early learning and development programs across the state.

CSP works to invest in high-quality early learning that enhances the quality of care and education for young children. A growing body of research confirms

the importance of quality early learning experiences to effectively prepare young children not only for school, but for life.

The design of CSP integrates proven elements of other First 5 California-funded programs, selected core components of Educare (see page 15 for description of Educare), and continues to align with the California Department of Education Infant/ Toddler and Preschool Learning Foundations and Frameworks. CSP was launched in three phases via three Requests for Application to First 5 county commissions.

Built primarily upon the prior success of Power of Preschool (PoP)⁶ program and First 5 California's current partnership with the Educare quality learning model, CSP was designed to increase the quality of early learning and development programs by implementing three research-based Program Elements:

- Instructional Strategies and Teacher-Child Interactions
- Social-Emotional Development
- Parent Involvement and Support

CSP classrooms implementing Quality
Enhancements in all three Program Elements are
referred to as Quality Enhancement (QE) classrooms.
Classrooms not implementing the new CSP Quality
Enhancements are referred to as Maintenance of
Effort (MOE) Classrooms.

Analyzed in summer 2014, FY 2012–13 program data shows that CSP 1 served children at risk of school failure, especially children of low income families. Almost 80 percent of classrooms are either State Preschool or Head Start classrooms, programs that enroll children based on incomeeligibility requirements. On average, classroom quality is high as evidenced by scores from the Environment Rating Scales (ERS) and Classroom Assessment Scoring System® (CLASS®) instruments. Most classrooms, whether QE or MOE, meet CSP program standards: ERS global scores of 5; and CLASS domain scores of 5 for Emotional Support, 3 for Classroom Organization, and 2.75 for Instructional Support, thresholds of quality that have been shown to impact child outcomes. Furthermore,

teachers in both QE and MOE classrooms report their children make developmental gains as assessed by the Desired Result Developmental Profile (DRDP 2010) observational tool. Teachers of children in QE classrooms report greater gains than teachers of children in MOE classrooms.

Launched in 2012, CSP 2 focuses on providing quality improvement support through training and technical assistance to centers and classrooms in an effort to bring them up to the quality levels of classrooms participating in CSP 1. In 2012–13, every center and classroom in the 34 CSP 2 counties completed a Readiness Assessment (RA) and collected baseline data to determine levels of strength and identify areas for improvement. The Early Learning Systems Specialist (ELSS), a required position funded through the CSP 2, is responsible for providing support to classrooms and sites in all aspects of the program.

In 2013–14, with assistance from the ELSSs, every classroom and some sites used the RA results to complete an Improvement Plan (IP). The IP identifies priority areas for program improvement efforts. The ELSSs assisted in the development of the IPs and the coordination and facilitation of training, technical assistance, and other support to classrooms and sites to facilitate quality improvements identified in the IPs.

Launched in spring 2013, CSP 3 allowed CSP 2 counties not currently participating in CSP 1 to apply for two years of Quality Enhancement funding for classrooms that met Teacher/Provider Qualifications at the First 5 Quality Level and CSP Baseline Criteria. All classrooms qualifying for CSP 3 became QE classrooms. The purpose of CSP 3 is similar to that of CSP 1 in terms of Quality Enhancements for qualifying classrooms. Thirty-three classrooms serving 705 children from Orange County and one classroom with 8 infants in San Mateo County were awarded funding for CSP 3. Both counties have found CSP is constantly evolving and improving with continuous support for staff, coordinated services for families and children, and strong local partnerships.

During FY 2013–14, CSP 1 and 3 included 1,289 classrooms serving nearly 25,000 children. These classrooms consisted of 3 percent children with

special needs, 1 percent infants, 3 percent toddlers, and 57 percent dual language learners.

Example Programs

A Child Signature Program 1 Example—Ventura County

First 5 Ventura County created a seamless Quality Rating and Improvement System (QRIS) initiative in partnership with the Ventura County Office of Education (VCOE). Ventura County's QRIS is anchored in a five-tier matrix and uses First 5 Ventura County, CSP, Comprehensive Approaches to Raising Educational Standards (CARES) Plus, AB212, and the federal Race to the Top-Early Learning Challenge (RTT-ELC) grant funding streams to support quality improvement. First 5 Ventura County, one of the original PoP counties, continued to increase quality in early learning programs by participating in CSP. Ventura has a total of 28 CSP classrooms, one QE classroom, and 27 MOE classrooms.

Two successful strategies for continuous program quality improvement in CSP have been on-site training and developmental screenings. On-site

training is provided for teaching teams or small groups of teachers, and is customized to meet their needs. In such a small group setting, classroom staff tends to be less inhibited and feels more comfortable asking questions or raising concerns. The second strategy has been to ensure developmental screenings are conducted in all classrooms with the support of *Help Me Grow*, a system that builds collaboration across sectors, including child health care, early care and education, and family support. The collaboration includes the Ventura County Public Health Department and the CSP-Funded Early Education Experts (EEEs)/Technical Assistance Specialists.

A main challenge for First 5 Ventura County CSP classrooms has been recruiting and retaining Bachelor of Arts/Bachelor of Science degree teachers. Site administrators have taken different approaches to incentivize teachers, including motivating teachers by providing stipends for completing course work with a grade "C" or better, and incentives for teachers who have higher degrees.



For example, one administrator who operates twelve CSP 1 classrooms provides stipends to teachers who complete course work related to child development or degree attainment in child development. In addition, 135 teachers have obtained an Associate of Arts or Bachelor of Arts degree through the CARES Plus/AB212 Stipend Project since degree attainment has become the focus. VCOE has implemented creative strategies for supporting students, including contracting with a math tutor to assist them if they are struggling with math.

First 5 Ventura County's integrated system of services has been built on a strong foundation of collaboration with county agencies/partners.

A Child Signature Program 2 Example—Tuolumne and Amador County Consortium

During FY 2013–14, the CSP 2 Tuolumne and Amador County Consortium experienced noteworthy accomplishments.

In March 2014, the twelve CSP 2 preschool and toddler classrooms were involved in a Head Start federal review. Results from the review revealed 100 percent of the nine preschool classrooms assessed improved significantly, raising CLASS® scores in the Instructional Support domain from an average score of 2 to 4.5. The overall CLASS scores were the highest for a Head Start federal review in Head Start Region IX (Arizona, California, Nevada, Hawaii and the Outer Pacific Islands) and in the top 10 percent in the nation.

This remarkable progress was accomplished through the combined efforts of strong leadership, engaged staff, high-quality teacher coaching and CLASS training supported by First 5 California's CARES Plus program. The CSP 2 ELSSs played a key role in leveraging and coordinating staff resources and materials. The ELSSs provided enhance math and science focused materials, instruction, training, and expanded coaching, which ultimately enhanced teacher effectiveness and raised CLASS scores.

A Child Signature Program 3 Example—Orange County

Another county that integrates CSP, CARES Plus, RTT-ELC grant, local First 5, and First 5 California funding is the Children and Families Commission of Orange County. The county commission applied

for CSP 3 and received funding for 33 qualifying classrooms—29 preschool and 4 infant/toddlers. All classrooms through the QRIS matrix have received either a four- or five- star quality rating. CSP 3 directors and teachers have developed and implemented a continuous quality improvement plan with the EEEs utilizing both the RTT-ELC Quality Continuum Framework-Hybrid Rating Matrix and Continuous Quality Improvement Pathways documents.

The Children and Families Commission of Orange County and community partners have developed CSP 3 to include a wide range of direct services, such as case management for children, parent education and coaching, home visitation, mental health resources, physical health, and nutritional support. CSP 3 will provide services to approximately 750 families and more than 70 early educators. Key partners include the Orange County Commission-funded Early Learning Specialists, School Readiness Nurses, the Orange County Department of Education, and the Center for Autism and Neurodevelopmental Programs.

The strength of the program is the additional support of CSP-funded staff, including mental health specialists, family support specialists, a nutrition/physical activity coach, and a dietician. Parent involvement in these classrooms is high. Parents are offered workshops, volunteer opportunities, and, at some sites, English-as-a-Second-Language and parenting classes. There is a strong collaboration with the K-12 classrooms. CSP preschool teachers work closely with the transitional kindergarten and kindergarten teachers.

The county's CSP has addressed the challenge of a lack of available qualified substitute preschool teachers. This has caused difficulty for coaches trying to schedule classroom visits with teachers. A solution has been to schedule lunch and afternoon appointments with teachers, and to offer teachers a stipend to meet with the coach after hours.

The Children and Families Commission of Orange County continues to partner with other county funding organizations to provide seed money that is leveraged through matching funds to produce a greater impact for their children ages 0 to 5 in programs such as CSP.

Early Education Effectiveness Exchange

First 5 California's Early Education Effectiveness Exchange (E4) serves as the primary statewide resource designed to facilitate quality improvement in early learning centers and classrooms participating in any of the three Child Signature Programs. First 5 California selected WestEd Center for Child and Family Studies to implement the E4 from July 1, 2013, through June 30, 2015. The E4 was created to provide quality enhancement training and technical assistance to CSP county, site, and classroom staff to implement the requirements of CSP.

In its first year of implementation, the E4 has assisted CSP 2-funded Early Learning System Specialists (ELSS) in the development of classroom and site Improvement Plans (IPs) based on their Readiness Assessment results. A web-based application developed by E4 tracks and monitors progress toward quality improvement goals. Based on the needs and goals of classrooms identified in the IPs, the E4 has provided ongoing training and technical assistance through a system of Training and Technical Assistance Coordinators (TTACs) assigned to each E4 region.

E4 also planned and facilitated quarterly regional meetings and a statewide annual meeting. The meetings provided CSP county staff with training by subject matter experts and opportunities for networking. The first annual CSP meeting was held in San Diego on February 26, 2014. Participants recorded high ratings in their evaluations of the meeting.

In addition, E4 created and continues to maintain an interactive website that includes a resource center, document library, calendar of events, CSP user community forum, partner information, and other resources. The website was launched at the first CSP annual meeting. The website was designed to provide CSP participants and other early childhood educators the ability to engage in topic-specific discussion, network with others, access customized teaching and learning resources, and more importantly, improve classroom experiences for children.

Educare

Ongoing research consistently demonstrates poverty and economic stress can threaten a child's cognitive development and ability to learn. California children in low-income families typically enter kindergarten 12 to 14 months behind the national average in pre-reading and language skills⁷, and in 2013, 25 percent of children age 0 to 5 were living in families with incomes below the federal poverty level.⁸ A study conducted by the Frank Porter Graham Child Development Institute at the University of North Carolina at Chapel Hill indicates low-income children (including children with limited proficiency in English) who enroll in an Educare program as infants or toddlers enter kindergarten with skills on par with their middle-income peers.⁹

Educare promotes school readiness by implementing programs designed to reduce the achievement gap for disadvantaged children ages o to 5 who are less likely to attend high-quality preschool programs, if they attend preschool at all. The Educare model also strengthens the abilities of parents to support their children's learning when they enter school. Nationally, the Educare Learning Network consists of 20 Educare centers in more than a dozen states as the result of a partnership that includes the Ounce of Prevention Fund and the Buffet Early Childhood Fund, along with other national philanthropic organizations and public-private groups.¹⁰

Based on the success of Educare, the State Commission approved First 5 California as a public partner in the public-private funding to implement an Educare Quality Early Learning Model in Santa Clara and Los Angeles counties, beginning Fiscal Year 2011–12. In January 2014, the State Commission approved an extension of the funds for an additional three years through June 2017.

On September 17, 2013, a partnership of business, education, and non-profit leaders, including First 5 Santa Clara, the Silicon Valley Leadership Group, the Santa Clara County Office of Education, the Franklin-McKinley School District, and the Health Trust, marked the beginning of an effort to raise the remaining \$3 million necessary to build the Educare

center at Santee Elementary School in San Jose. On June 5, 2014, a groundbreaking ceremony was held and construction of the 35,000 square foot Educare center began. When completed in spring 2015, the state-of-the-art facility will provide infant through preschool early learning services to families, as well as training for educators.¹¹

Educare is a research-based program that serves at-risk children ages 0 to 5 through a coast-to-coast network of state-of-the-art, full-day, year-round schools funded through an innovative partnership between the public and private sectors. Each Educare school embraces a community's most vulnerable children with programming and instructional support that develop early skills and nurture the strong parent-child relationships that create the foundation for successful learning and ensures the school readiness of children most at risk for academic failure.



Local Developmental Screenings and Services

Significant developmental disparities exist among children ages o to 5 across California. Such an early readiness gap threatens later learning, development, and health. The Act was intended to create programs that support disadvantaged children in California and to overcome the socioeconomic barriers that limit children's opportunities for success.

Since 1998, First 5 California and county commissions have actively promoted screenings and assessments that help identify critical issues for children with special needs. When identified and addressed early, these issues are less likely to hinder children's chances for success in school and beyond.

During FY 2013–14, First 5 California focused on screening by providing leadership at the State level

and support locally. First 5 California held a leadership role in the Statewide Screening Collaborative (SSC), a group consisting of multiple State agencies including Public Health and Developmental Services, and stakeholder organizations such as the American Academy of Pediatrics and Kaiser Permanente. First 5 California served on the planning team for SSC and led a work group focused on developmental screening and follow-up activities in the early learning field.

In addition, through First 5 California's role in implementing the RTT–ELC grant, support was provided to participating counties on screening and follow-up in early learning settings, specifically around use of the Ages and Stages Questionnaire, a valid and reliable screening tool for early childhood development.

Race to the Top-Early Learning Challenge

A robust body of research demonstrates that highquality early learning and development programs can improve young children's health, social, emotional, and cognitive outcomes; enhance school readiness; and help close the wide school readiness gap. Based on this research, the U.S. Departments of Education and Health and Human Services released the RTT-ELC application on August 23, 2011. A total of 37 RTT-ELC grant applications were submitted and California was one of nine winning states. California requested \$100 million and was awarded \$75 million with a grant period from January 1, 2012, to December 31, 2015. The Governor appointed the California Department of Education (CDE) as the lead fiscal agency. As a participating State agency and co-member with CDE of the RTT-ELC State Implementation Team, First 5 California provides leadership, technical assistance, evaluation, and administrative support for the RTT-ELC grant. Other participating State agencies include the California Departments of Developmental Services, Public Health, and Social Services, and the State Board of Education.

The objective of the RTT-ELC program is to improve the quality of early learning programs and close the achievement gap for children with high needs, defined in the federal application as: Children

from birth through kindergarten entry who are from low-income families or otherwise in need of special assistance and support, including children who have disabilities or developmental delays; who are English learners; who reside on "Indian lands" as that term is defined by section 8013(6) of the Elementary and Secondary Education Act; who are migrant, homeless, or in foster care; and other children as identified by the State.

To address this school readiness gap, the grant identified high priorities for both strengthening the quality of early learning and development programs and increasing access to them, especially for children with high needs. The RTT–ELC is organized around five key areas of reform:

- Successful State Systems
- 2. High-Quality, Accountable Programs
- Promoting Early Learning Development Outcomes for Children
- 4. A Great Early Childhood Education Workforce
- 5. Measuring Outcomes and Progress

California's RTT–ELC grant incorporates a unique approach that builds upon California's local and statewide successes to create sustainable capacity at the local level to meet the needs of our early learners (from birth to age five), with a focus on those of greatest need. Approximately 77 percent of California's RTT–ELC total grant funding is spent at the local level to support a voluntary network of early learning programs. Each county in the network, known as the Regional Leadership Consortia (Consortia), is led by an established organization already operating or developing a Tiered Quality Rating and Improvement System (TQRIS).

The original Consortia includes 17 members in 16 counties (Alameda, Contra Costa, El Dorado, Fresno, Los Angeles, Merced, Orange, Sacramento, San Diego, San Francisco, San Joaquin, Santa Barbara, Santa Clara, Santa Cruz, Ventura, and Yolo). In 2013, the Consortia served 1009 early learning sites and 39,601 children.

In 2014, California allocated supplemental federal funds to the Consortia to serve as mentors to new

counties in implementing the RTT–ELC TQRIS. Fourteen new counties were added, bringing the total number of counties participating in RTT–ELC to 30. These "mentee" counties are Imperial, Kern, Kings, Madera, Mariposa, Nevada, Placer, Riverside, San Bernardino, San Luis Obispo, San Mateo, Sierra, Stanislaus, and Tulare.

In addition, California is using a portion of the RTT–ELC grant funding to make several one-time investments in State capacity via ten projects, as well as an evaluation to validate the effectiveness of the Consortia TQRISs and the three common tiers across them. The end goal that unites the Consortia and the State's one-time investment activities is to ensure children in California have access to high-quality programs so they thrive in their early learning settings and succeed in kindergarten and beyond.

One of the State-level projects is focused on the development of an Assessor Management System (AMS) to support the implementation of the RTT-ELC TQRIS in each Consortium. CDE is contracting with First 5 California to build and manage the AMS to assist in increasing the cadre of site assessors and providing reliability checks to ensure each site is being assessed to the same rigor, both on a Consortia-wide and local level. The AMS will support the Consortia in maintaining an appropriate degree of rigor in their rating processes and ensure each consortium has a comprehensive system for rating and monitoring that meets a high standard for inter-rater reliability in relation to application of the common elements and utilization of common tools and resources.

The RTT–ELC Implementation Team is working together with the American Institutes for Research on an evaluation of the TQRIS. The researchers are working together with a sample of consortia to study how successfully the TQRIS measures early learning program quality, possible alternative rating approaches, and how TQRIS ratings predict child learning and development outcomes. Additionally, this evaluation will inform policymakers on a link between quality improvement strategies and changes in program or workforce quality, and describe RTT–ELC implementation processes. Evaluation results are due in 2015.



Parent Support Focus

A parent is a child's first teacher. The more information and support parents have to strengthen their own family's success and resilience, the more likely young children will learn the habits they need to be self-assured and ready to learn when they get to school. First 5 California assists families by offering information, support, guidance, and referrals through its Parent Signature Program.

The importance of child health for school readiness and early elementary success is well established. Children's overall health can make a difference in how well they will do in school. A child who is ill, has undiagnosed visual or hearing problems, developmental delays, or neglected dental disease might miss class, struggle in school, and even have learning problems. The alarming rate of childhood obesity is particularly severe in California—the Centers for Disease Control reports that 15 to 20 percent of low-income preschoolers in the state are obese. The accompanying risk of current and chronic disease among at-risk young children further stunts their ability to achieve their maximum potential in

school. The Parent Signature Program strives to provide parents with the information, resources, and advice that can help them raise healthier children.

The Parent Signature Program provides public education, information, and support to parents in both traditional and new ways, including print media, television and radio, social media, and other messaging in six languages, reflecting the rich diversity of California.

Hands-On Health Express

As part of its comprehensive outreach campaign that seeks to reach families in their homes and where they go, First 5 California takes its show on the road with its Hands-On Health Express—a colorful van filled with information and engaging activities. The Hands-On Health Express features "Edutainers" who educate parents and entertain children in a traveling interactive exhibit. "Edutainers" teach families how to incorporate fresh foods and physical activity, and

talking, reading, and singing into their everyday lives. In FY 2013–14, the exhibit traveled to more than 135 schools, community festivals, county fairs, and other family-oriented events, making appearances in even the smallest rural communities and directly engaging with more than 134,972 people who walked away with helpful First 5 resources.

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.

Since 2001, First 5 California has distributed the *Kit* free-of-charge to local hospitals, physicians, and community groups to reach new parents. The *Kits* are available in English, Spanish, Cantonese, Korean, Mandarin, and Vietnamese, and include a practical guide for the first five years, a health handbook, an early brain development tips card, and other important information on literacy and learning, child safety, developmental milestones, finding quality child care, and more. County commissions are encouraged to add local references and resources to the *Kit* to help steer parents to services in their own community.

To date, 4.5 million Kits have been distributed throughout California since 2001, with 210,645 being distributed this fiscal year alone.

Award-Winning Media Campaign: TALK.READ.SING.SM

In the wake of compelling research on the importance of early brain development for children ages o to 5, First 5 California launched its highly successful media campaign, *Talk.Read.Sing.* Min March of 2014. The campaign encourages parents and caregivers to talk, read, and sing to babies and toddlers from the day they are born to aid in brain development, build vocabulary, and help form the brain connections that will determine how they learn, think, and grow. The campaign was recognized by the Southern California Broadcasters Association, which awarded

First 5 California a 2014 "Outstanding Achievement in Radio Advertising Award;" this award is given to a radio campaign that exemplifies creative use of radio's digital platforms to reach an audience in a 24/7 environment. The *Talk.Read.Sing.* 5 campaign has resulted in hundreds of thousands of YouTube views. In the first four months following the launch, it brought in more than 36,000 new Facebook fans and nearly 73 million total impressions from content associated with the First 5 California Facebook page. Add to those 600 new Twitter followers and more than 608,000 total impressions from content associated with our Twitter page. The campaign continues to spread the First 5 California message and make a difference in thousands of young lives.

Parent Education Website

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

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.¹³



Since its launch in 2009, the Parent Education website (www.@rst5california.com/parents) has received more than three million visits. Relaunched with a new design in May 2014, the site has generated more than 1.4 million hits. The site covers health, education, literacy, and brain development, smoking cessation, and more. The content and usefulness of the site is tested regularly with focus groups to ensure the most engaging and useful information is available for families. Parents can download information and view videos and government public service announcements, as well as examples of brain development activities for parents and children. The most recent videos contain information on healthy beverages, nutrition, physical activity, and language development.

The website also links to its social media tools, including Facebook and Twitter. As of June 30, 2014, the First 5 California Facebook page had more than 212,500 "likes" and generated a total of 556,828 post likes, comments, and shares. Its Twitter account has more than 17,155 followers who receive daily bits of information about early childhood development and wellness that parents, care providers, and teachers can use to improve or inspire their relationship with young children. In March 2014, First 5 California

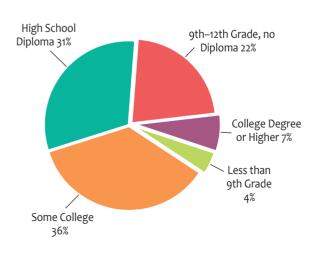
launched a hashtag campaign (#talkreadsing) that reached a potential 12.3 million people through Twitter and Instagram posts and re-posts.

Tobacco Cessation

Through First 5 California's investment in the California Smokers' Helpline, parents and caregivers are provided information and tools to help them quit smoking and the use of other tobacco products—especially around children or while pregnant. Parental smoking and secondhand smoke exposure have been linked to a range of ailments in babies and young children, including asthma, ear infections, pneumonia, bronchitis, and Sudden Infant Death Syndrome (SIDS). To reduce the incidence of these health problems, and to help smokers quit, in FY 2013-14, First 5 California supported the California Smokers' Helpline with \$1.4 million for tobacco cessation services for parents and caregivers of young children, as well as for the training of child care providers, pre-school teachers, and pediatric health care providers.

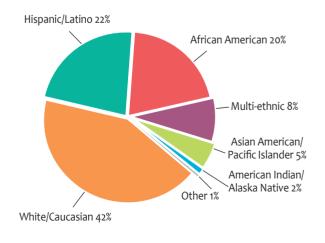
The toll-free Helpline (1-800-NO-BUTTS) provides one-on-one telephone counseling, self-help materials, and referrals to local resources. Its counselors follow

Exhibit 6: California Smokers' Helpline–Education Level of Callers in FY 2013–14



Source: First 5 California





Source: First 5 California



scientifically proven protocols to double the rate of successful long-term quitting. Counselors and callers work together to develop a plan to quit, and continued interaction during the quitting process increases the likelihood of long-term success. Services are provided in English, Spanish, Mandarin, Cantonese, Korean, and Vietnamese.

In FY 2013–14, First 5 California's investment provided Helpline services for a total of 6,531 participants, including 439 pregnant smokers and 6,269 tobacco-using parents or caregivers of children ages 0 to 5. (Note: 177 were both pregnant *and* had a child 0 to 5.) Tobacco users with less education or of ethnic minority background were well represented among Helpline callers. See Exhibits 6 and 7 for breakdowns by education and race/ethnicity, respectively.

The online tobacco training modules, "Kids and Smoke Don't Mix" and "Los Niños y el Humo no se Mezclan," continue to be used by First 5 California Signature Program participants. The modules give child care providers, preschool teachers, classroom staff, and others who work with children the knowledge and skills they need to encourage smoking parents and caregivers to quit, refer them to the Helpline for counseling, and protect children

from secondhand smoke. In FY 2013–14, a total of 4,377 individuals from 46 counties completed the online training.

Additionally this year, a new effort was supported by First 5 California—the Clinical Effort Against Secondhand Smoke Exposure (CEASE) California project. CEASE began training pediatric practices to screen patients for secondhand smoke exposure and help their smoking parents quit. In FY 2013–14, pediatric care providers at 41 clinic sites across the state were trained to identify and intervene with smoking parents, including prescribing quitting aids and referring them to the Helpline.

CEASE was met with overwhelming success as evidenced by the response from pediatric care providers. "Two days after the training, I was able to put my new skills to use. A mother of a child with asthma asked me what she could do to make her child's asthma better. Now, instead of just telling her to quit smoking, I was able to tell her, 'I can help you do this for your son and yourself.' I gave her instructions and a prescription for nicotine patches and the 1-800-NO-BUTTS to help walk her through it. Took only 2 minutes!" (Erin Fortune, MD, Pediatrician, Logan Heights Family Health Center, San Diego).



Teacher Effectiveness Focus

Teacher quality is a powerful contributor to children's learning and success. Children are supported and developed through rich teacher-child interactions with educators who have the knowledge and skills to identify and support the needs of specific groups of children, including dual language learners. Research shows early childhood educators with higher educational levels and specialized training have higher quality interactions with children and result in positive effects on learning. Teacher quality is so critical that a growing number of states and federal programs have mandated early childhood educators to attain more professional development and training in the field.

High-quality programs that train and retain qualified early learning educators create learning environments that stimulate and support children through formative developmental stages. One study indicates only 13 percent of California's low-income children are in high-quality early learning programs that support advanced thinking skills and language development.¹⁶

Comprehensive Approaches to Raising Educational Standards Plus

The Comprehensive Approaches to Raising Educational Standards (CARES) Plus program is First 5 California's Teacher Signature Program. Launched in 2010, it is designed to increase the quality of early learning programs for children ages 0 to 5 by supporting the professional development of the early learning workforce. CARES Plus is an enhancement of the original CARES program (2000–08) that gained national recognition during its tenure from Head Start, Zero to Three, and the Center for Law and Social Policy.

CARES Plus offers quality professional development opportunities in both English and Spanish for early childhood educators. Some support services are provided in other languages as well. These opportunities include access to community college courses, online best practice learning sessions, a video library, one-on-one coaching, and

at least two sessions with a professional growth advisor. The goals of CARES Plus are to:

- Improve the effectiveness of the early learning workforce
- Positively impact the learning and developmental outcomes of young children
- Reduce turnover among the early learning workforce
- Increase retention of the early learning workforce

Through CARES Plus, First 5 California has incorporated the Classroom Assessment Scoring System® (CLASS®). The following validated professional development tools and training, developed by the University of Virginia, are available to CARES Plus participants:

- The CLASS Observation Tool—an assessment that focuses on the effectiveness of classroom interactions among teachers and children, using a common language and lens to evaluate the quality and improvement of those interactions
- Introduction to the CLASS Tool—an online, twohour interactive course to gain an understanding of the CLASS framework
- Looking at CLASSrooms—a self-paced directed study using exemplar videos to focus on identifying and analyzing effective teacher-child interactions
- MyTeachingPartner™ (MTP™)—an evidencebased professional development tool focused on improving classroom interactions through intensive one-on-one coaching, classroom observation, and reflective analysis of teaching practice

In addition to the professional development tools and activities listed above, all CARES Plus participants are required to complete a one-hour online tobacco training module titled *Kids and Smoke Don't Mix: A Tobacco Training for Child Care Providers and Preschool Teachers.* Stipends are provided to participants who complete the professional development requirements to encourage workforce retention.

CARES Plus Evaluation Results

Evaluation of the CARES Plus program indicates the program is highly valued by teachers who participated in different program components and that training was associated with improved quality of teacher-child interactions. Among participants surveyed during FY 2013–14, 86 percent found the training to be very useful for their professional development, 77 percent felt the training very much helped them become better teachers, 81 percent thought the program would help them continue in early childhood education, and 90 percent believed their CARES Plus experience would have a very positive effect on children in their care. Analysis of CLASS® observation data for FY 2011–12 and FY 2012–13 showed participation in Components A and B was associated with improvements in the CLASS domains of Emotional Support and Classroom Organization, while Component D (MTP) was associated with improvements in the domains of Classroom Organization and Instructional Support.

Example Programs

CARES Plus County Example—San Bernardino

The San Bernardino County CARES Plus Program (SBCCPP) covers an area of over 20,000 square miles. San Bernardino is the largest county in the United States. SBCCPP uses teleconference calls and webinars to communicate with local community partners, CARES Plus participants, and stakeholders who are vital to the local program success. This approach is especially useful for CARES Plus participants living in Needles, a town located approximately four hours from the city of San Bernardino.

SBCCPP is participating in all CARES Plus Components (A, B, C, and D). The CARES Plus program falls under the purview of the Local Child Care Planning Council, which voted in FY 2012–13 to blend the CARES Plus and AB 212 programs for the three-year funding period. The required matching funds for SBCCPP are provided by First 5 San Bernardino, which has been supportive through auditing program compliance and attending

orientations, as well as extending an open invitation to use its services and staff support.

There are over 700 CARES Plus participants in San Bernardino County. The local program priority is to incentivize and motivate teachers to obtain their Bachelors of Arts Degree and/or obtain, renew, or upgrade their Child Development Teaching Permit.

The participants bring unique child development experiences, a broad spectrum of native languages, and a wide range of unique philosophies and curricula to diverse settings including, center-based, family child care homes, and private agencies.

The unifying force among these curricula is the CLASS. The county requires each participant to create a Professional Development Plan and choose at least two CLASS Dimensions/Behavior Markers as areas for a participant's improvement. Additionally, each participant is required to complete a "reflection" form, which is designed to encourage an introspective look at one's own teaching practices



and explore ways to infuse learned principles into daily classroom activities. All Component A and B participants must complete the form and share it with their Component C Advisor before implementation and then again (at least 30 days later) to discuss successes and challenges.

The SBCCPP is proud of the accomplishments of their participants.

A CARES Plus County Example—Mono and Alpine

Mono and Alpine counties formed a CARES Plus consortium to offer all child care providers in both counties access to the First 5 California-supported quality improvement program. Due to the rural nature of both counties, participants are eager to participate and consistently express their thanks for the support and access to scarce training opportunities. In FY 2013–14, the CARES Coordinator served as the advisor for all Mono County participants and personally supported each provider. The Coordinator worked closely with a local non-profit organization, Inyo Mono Advocates for Community Action (IMACA), which administers the AB 212 program to streamline training opportunities.

Approximately 50 percent of the licensed providers in Mono County are native Spanish speakers, so the Mono/Alpine CARES Plus program focuses on recruitment and retention of Spanish-speaking providers. The Mono/Alpine consortium successfully meets this need by hiring a Spanish-speaking CARES Coordinator who provides in-person training in Spanish to assist in the completion of the CARES Plus requirements. Many of the Spanish-speaking providers have participated in professional development for many years.

In partnership with IMACA and the Local Child Care Planning Council, the Mono/Alpine CARES Plus program provides an appreciation day at the end of the year that includes a motivational speaker and provides a meaningful opportunity to thank providers for the services they bring to families.



First 5 County Commission Program Result Areas

First 5 county commissions are required to report annual expenditure and service data on their programs to First 5 California. First 5 California adopted guidelines to standardize data collection. Counties report program service data under four result areas: Improved Family Functioning, Improved Child Development, Improved Child Health, and Improved Systems of Care (see Appendix A). These data are presented below and have been aggregated to the State level. Data reported are from programs that are funded by both local and State First 5 funds.

Improved Family Functioning

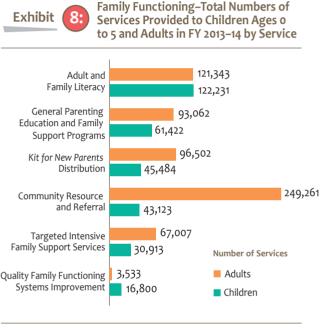
Family Functioning services provide parents, families, and communities with timely, relevant, and culturally appropriate information, services, and support. Services include:

- Increasing parent education and literacy
- Providing referrals to community resources
- Supplying basic needs such as food and clothing

In FY 2013–14, First 5 California provided 319,973 services to improve family functioning to children ages 0 to 5 and 630,708 services to parents, guardians, primary caregivers, relatives, and providers.

Exhibit 8 displays the numbers of services provided to children ages 0 to 5 and parents, guardians, primary caregivers, relatives, and providers.

While children and adults from all ethnic groups received services, for those reporting an ethnicity, Latinos were the largest recipient group (44 percent).



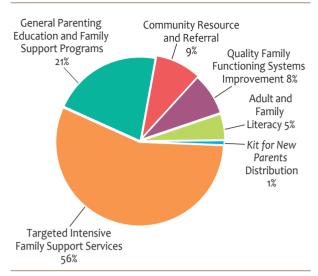
Source: County Demographic Worksheet, November 2014

For children reporting a primary language, services were provided to Spanish speakers 46 percent of the time and English speakers 30 percent of the time.

In FY 2013–14, county commissions expended almost \$122 million to improve Family Functioning. Exhibit 9 shows the distribution of expenditures by service category. Schools and educational institutions, nonprofit community-based agencies, government agencies, private institutions, and First 5 county commissions provided services to children and adults in order to improve Family Functioning. Exhibit 10 displays distribution of expenditures by provider type. Community-based agencies received 60 percent of all Family Functioning expenditures in FY 2013–14.

Exhibit

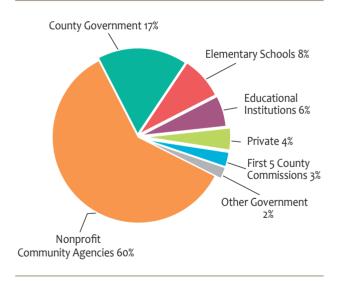
Family Functioning–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2013–14 by Service



Source: County Revenue and Expenditure Summary, November 2014

Exhibit 10

Family Functioning–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2013–14 by Provider



Source: County Revenue and Expenditure Summary, November 2014

Improved Child Development

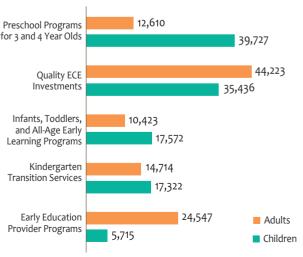
Child Development services increase access and quality of early education and learning. These services include free, high-quality preschool, special needs assessment and intervention, and school readiness programs.

In FY 2013–14, First 5 delivered 115,772 child development services to children ages 0 to 5 and 106,517 services to parents, guardians, primary caregivers, relatives, and providers. Exhibit 11 shows the numbers of services provided to children ages 0 to 5 and adults in each child development service category.

While children and adults from all ethnic groups received services, for those reporting an ethnicity, Latinos were the largest recipient group of services (59 percent). For those reporting a primary language, the largest recipient groups of services were those speaking Spanish (45 percent) and English (35 percent).

In FY 2013–14, county commissions expended \$197 million to improve Child Development. Exhibit 12 shows the distribution of expenditures by service category. Schools and educational institutions, nonprofit community-based agencies, government agencies, private institutions, and First 5 county commissions provided services to children and adults





Source: County Demographic Worksheet, November 2014

in order to improve Child Development. Exhibit 13 shows distribution of expenditures by provider. In FY 2013–14, elementary schools received 14 percent of all expenditures to improve Child Development.

Improved Child Health

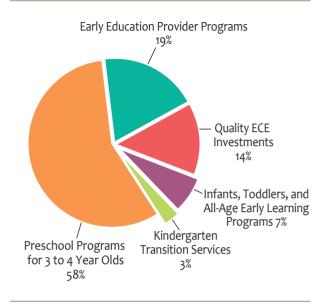
First 5 county commissions fund Child Health services that promote health through identification, treatment, and elimination of risks that threaten health, and cause developmental delays and disabilities. First 5 Child Health services are far ranging and include prenatal care, oral health, nutrition and fitness, tobacco cessation support, and intervention for children with special needs.

In FY 2013–14, First 5 provided 548,557 services designed to improve Child Health to children ages o to 5, and 393,550 services to parents, guardians, primary caregivers, relatives, and providers. Exhibit 14 shows the number of services provided to children ages o to 5 and adults for each Child Health service

While children and adults from all ethnic groups received services, for those reporting an ethnicity, Latinos were the largest recipient group of services (55 percent). For those reporting a primary language, the largest recipient groups of services were to those speaking English (41 percent) and Spanish (35 percent).

In FY 2013–14, county commissions expended \$170 million to improve Child Health. Exhibit 15 shows the distribution of expenditures by service category. Schools and educational institutions, nonprofit community-based agencies, government agencies, private institutions, and First 5 county commissions provided services to children and adults in order to improve Child Health. Exhibit 16 shows distribution of expenditures by provider. Community-based agencies accounted for 49 percent of all expenditures to improve Child Health in FY 2013-14.

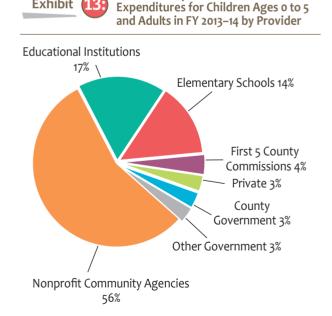




^{*}The percentages in this chart do not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2014

Exhibit

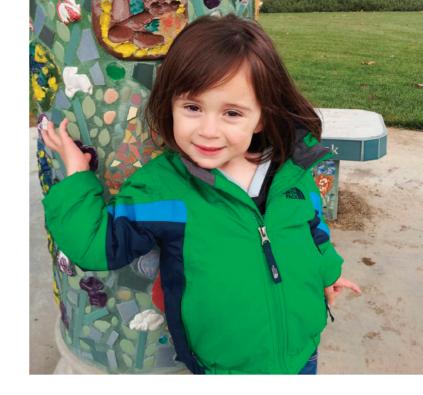
Child Development-Distribution of



Source: County Revenue and Expenditure Summary, November 2014

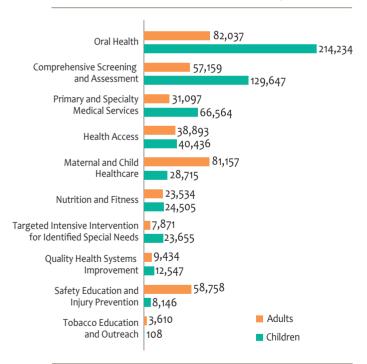
Improved Systems of Care

Systems of Care addresses system-wide structural supports which allow county commissions to effectively work towards achievement in the other three result areas of Family Functioning, Child Health, and Child Development. For example, interagency collaboration allows coordinated wrap-around efforts from multiple organizations providing targeted services. Since this result area is at a systems level, counties do not report number of children and adults served. Expenditure data indicates that for FY 2013–14, county commissions expended \$57 million to improve Systems of Care.



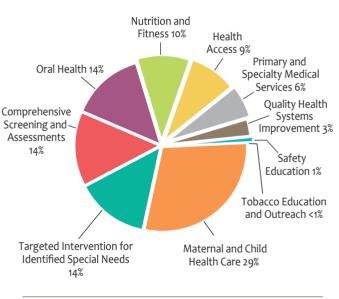


Child Health–Total Numbers of Services Provided to Children Ages 0 to 5 and Adults in FY 2013–14 by Service

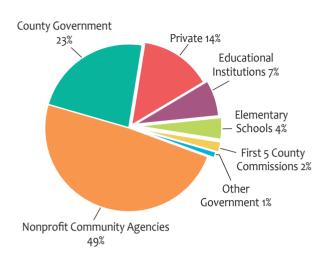


Source: County Demographic Worksheet, November 2014





*The percentages in this chart do not add to 100 due to rounding. Source: County Revenue and Expenditure Summary, November 2014



Source: County Revenue and Expenditure Summary, November 2014

Summary

First 5 California's comprehensive approach to early childhood education seeks to provide services for children, families, and educators in the home and in the classroom to ensure children enter school ready to learn. Our current Child, Teacher, and Parent Signature Programs were developed based on the most current research on childhood development and on the diverse needs of California families. The State and county commissions provide multiple services to families and their children ages o to 5 to ensure the family functions in a way that encourages healthy and lasting development inside the home, at school, and in the community. See our County Commission Highlights section, page 30 which includes highlights from First 5 county commissions. Programs are continually evaluated for their effectiveness and updated to serve the needs of individual counties. Together, First 5 California and the county commissions seek to provide families most in need with services that prepare children to enter school ready to learn and thrive.



First 5 County Commission Highlights

Alameda County

Through its investments, the goal of First 5 Alameda County is to ensure children are ready for kindergarten and third grade success, and free from abuse and neglect.

During FY 2013–14, one of the most significant accomplishments of First 5 Alameda was the completion of a countywide baseline school readiness assessment of entering kindergarteners. With an investment of \$96,000 jointly funded by First 5 Alameda, Alameda County Interagency Children's Policy Council, and the Long Foundation, 1,696 kindergarteners were assessed using Applied Survey Research's Kindergarten Observation Form. The four building blocks of school readiness include selfcare and motor skills, social-emotional development, self-regulation, and kindergarten academics. The results showed only 45 percent of children assessed were ready for kindergarten in all building blocks. These results, together with ongoing efforts to identify common outcome measures and establish a countywide children's budget, have energized the Alameda County Board of Supervisors to consider expanded funding of successful school readiness strategies funded by First 5. These include home visiting, quality early care and education, and Help Me Grow (HMG).

Other highlights during FY 2013–14 included:

• First 5 Alameda's HMG resource system investment in building the capacity of pediatricians and child care providers to use the Ages & Stages Questionnaires® (ASQ) screening tools and make referrals for children whose scores are of concern to the HMG Triage Phone Line. First 5 Alameda is expanding early identification efforts to include training providers at Women, Infants, and Children sites to use the Centers for Disease Control and Prevention's "Learn the Signs. Act Early." approach. First 5 Alameda

- also worked to strengthen technical assistance to pediatric practices to increase screening and improve referral rates of children identified with possible developmental delay. HMG rolled out the Developmental Screening Program which gives access for all parents in the county to web-based, periodic ASQ and ASQ: Social-Emotional screening tools.
- Project LAUNCH (Linking Actions for Unmet Needs in Children's Health), a Substance Abuse and Mental Health Services Association (SAMHSA) five-year grant, focused on the integration of mental health supports in child-serving agencies and programs, including mental health consultation in home visiting, early care and education, and kindergarten to second grade (SAMSHA served o to 8 years). This work led to the creation of three mental health specialist positions in Alameda County Public Health to serve home visiting programs.

Alpine County

Through its investments, the goal of First 5 Alpine County is to implement comprehensive, integrated, and accessible programs that will work toward the vision of First 5 Alpine: "All of Alpine's children will thrive from birth and are provided a foundation for life-long success."

During FY 2013–14, one of the most significant accomplishments of First 5 Alpine was the implementation of its center-based child development programs. First 5 Alpine partnered with the Alpine County Office of Education to help ensure school readiness for Alpine's children. The Early Learning Center (ELC), under the auspices of the Alpine County Office of Education, is the largest grantee and service provider for First 5 Alpine. The ELC preschool program serves as the framework for meeting the strategic goals of the First 5 Alpine Commission. Following standards set by the National Association for the Education of Young Children, highly qualified teachers implement developmentally appropriate activities throughout the day. The teachers in the preschool program complete ongoing developmental assessments while working with local kindergarten teachers to help provide successful kindergarten transitions. With the barriers that exist in Alpine County, accessibility is a challenge for its community members. Last year, local partners helped provide access for all children with oral health and well child examinations, immunization checks, developmental screenings, and the delivery of First 5 California's Kit for New Parents.

In the remote town of Bear Valley, First 5 Alpine funded a license-exempt drop-in child development program for children ages o to 5. This ski resort/ summer home village holds many challenges for the full-time residents who try to serve the varying population. This program has successfully served seasonal and year-round residents with a focus on all areas of social-emotional and cognitive development of early childhood. The program is staffed with professionals who emphasize cultural diversity. First 5 Alpine and the Bear Valley Parents Group continue to collaborate on sustainability of the program.

Amador County

Through its investments, the goal of First 5 Amador County is to ensure families with children ages 0 to 5 are well-equipped to help their children reach their optimal development and full potential.

Using the Strengthening Families Five Protective Factors (parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence), funded programs address the necessary support systems and community services needed to ensure:

- Children are raised in safe and supportive homes and communities.
- Families have access to necessary support systems and community services.
- Parents and caregivers have the opportunity to build networks of support as well as receive education on early childhood development.

With a funding investment of \$436,000, First 5 Amador provided essential services such as the Baby Welcome Wagon Universal Home Visiting offered to all families with newborns. The program is administered by Amador County Public Health and utilizes the First 5 California Kit for New Parents customized with local resources. Families are offered a minimum of one visit with high-risk families benefiting from ongoing Public Health Nursing services. More than 30 percent of families with newborns in FY 2013–14 received a minimum of one visit.

Providing services that are accessible to families was achieved through multiple systems. Two family resource centers received First 5 Amador funding to provide ongoing as well as short-term crisis case management. The Parent Education Profile (PEP) was utilized to measure the increase in family literacy activities, parents taking on the parent role, and support in the child's learning in formal educational settings. The most significant growth was observed in the parent taking on the parent role. Some of the ongoing programs offered at the centers included information and referral, depression screening, health and wellness workshops, Hispanic women's group, and emergency food distribution.

Other highlights from FY 2013–14 included:

 A total of 135 playgroups in four areas of the county were held with more than 160 unduplicated children, parents, and caregivers participating. Parents report learning about early childhood development, making social connections, and ideas to utilize at home to encourage early learning.

- The Bridge to Kindergarten
 program served 118 children in eight
 classrooms throughout the county.
 The three-week program, taught
 by kindergarten teachers and pre-K
 aides, provided a gentle transition
 and jump-start for children with little
 or no preschool experience. Parents
 received information on school
 readiness at Kick-off to Kindergarten
 events conducted at each school site
 in the county.
- A systems change approach for delivering preventive oral health services for children was established to address the lack of pediatric dental services in Amador County. The new system will provide an opportunity for more children to receive essential services in a medical setting on an ongoing basis.

Butte County

First 5 Butte County strives to improve the lives of children from the prenatal stage through age 5, and promote their optimal development by strategically investing in three initiatives focusing on health, oral health, and family strengthening.

During FY 2013–14, one of the most notable accomplishments of First 5 Butte was the implementation of a countywide Parent Café project. With a Strengthening Families Initiative investment of \$150,000, two community partners (Valley Oaks Children's Services and Youth for Change) were trained in the Be Strong Illinois Parent Café Model to provide Parent Cafés in four communities throughout Butte County. Several hundred parents and children attended a total of 17 Cafés, with many families returning for subsequent Cafés, which are planned and implemented by parents (both staff and volunteer) in collaboration with community partners. Held at locations that are inviting and preferred by families, Cafés offer families a chance to enjoy a nutritious dinner together, followed by supervised activities for the children and engaging, peer-led discussions for parents. Trained volunteer table hosts focus on creating an atmosphere that is inclusive and informative while



still maintaining the casual feel of dinner with friends. Carefully selected questions focused on the Five Protective Factors and designed to illuminate the inherent strengths of families are used to guide the conversations. Many parents have reported developing friendships as well as making changes in their parenting behaviors and priorities based on these rich discussions. The project's success is largely due to the specialized training for both staff and parent volunteers and the thoughtful and sustainable design of the Parent Café model. Created to be flexible and adaptable to the unique qualities of each community, the Butte County Parent Café project is proving to be an ideal way to engage families who experience isolation based on culture, language, or circumstance. Amid an atmosphere of creativity, safety, and empathy, parents are discovering and strengthening their own abilities to be leaders within both their families and their communities.

Other highlights during FY 2013–14 included:

 The Mothers' Well Project, which provides in-home counseling services to women experiencing prenatal and perinatal anxiety and/or depression.
 By partnering with Butte County
 Behavioral Health and Northern Valley Catholic Social Service to provide this service, additional Medi-Cal funding is available, thereby expanding fiscal resources and enabling more women to be served beyond the initial funding provided by First 5.

- Funding from First 5 Butte that enabled the Hmong Cultural Center of Butte County (HCCBC) to work with Strategies Northern Region in developing training materials for existing and future staff on the Strengthening Families framework and the Five Protective Factors. The primary focus is identifying where the Factors are embedded within the Hmong culture, how to strengthen those Factors, and how to build on Factors not yet apparent or practiced. The HCCBC is sharing it materials with those who request them and will provide training for First 5 Butte grantees who serve the Hmong community.
- A partnership with E-Center Head Start to provide a hygienist to provide parent education, classroom screenings, and fluoride varnish application as part of the Oral Health Initiative. Children requiring hospital dentistry are referred directly to First 5's hospital dentistry program by the hygienist. This saves parents the extra step of seeing a referring dentist and results in children have a shorter wait time for treatment.

Calaveras County

Through its investments, the goal of First 5 Calaveras County is to ensure that all children in the county will enter school safe, healthy, and ready to learn. Investments make a positive impact on strong family functioning, child health and safety, school preparedness, and system collaboration by focusing on direct services to children, parents, and educators.

During FY 2013–14, one of the most significant accomplishments of First 5 Calaveras was the Children's Dental Program. In collaboration with the Calaveras County Office of Education and a funding investment of \$88,853, this program provided on-site oral health education and a screening to over 250 low-income young children. Dental cleanings, topical fluoride treatments, and referrals were made available in preschool classrooms. A mobile dental van targeting isolated locations in this rural county delivered crucial preventive and/or restorative treatment.

Other highlights during FY 2013–14 included:

- Funding of \$50,000 and collaboration with The Resource Connection Food Bank provided the "Kids Farmers Market and Preventive Intervention Program." Nutrition education, hands-on cooking projects, healthy recipes, and having Head Start children take fresh produce and fruit home highlight this unique program. Puppets, games, and story times help teach children age-appropriate personal safety and appropriate expression of feelings.
- A funding investment of \$39,000 for a "Raising a Reader and Early Literacy Home Visiting Program" served over 200 Head Start and State Preschool children. In addition to early literacy activities, the 1.5 hour home visits twice a month to 22 remotely located families included developmental screenings for children, parent depression screenings, resource sharing, and community referrals.
- Support to early childhood professionals in their efforts to obtain college units toward their degree and for retention in their place of employment through a \$15,000 investment to the local Calaveras CARES Program.
- Forty safety seat assessments and thirty-four car seats distributed through the "Child Passenger Safety Program" funded by a \$2,000 investment.

In a successful collaboration with Behavioral Health Services and Mental Health Services Act funding, First 5 Calaveras provided 77 "Parent Education Workshops and Trainings for Educators." Topics centered on family skill building, nurturing skills, mindfulness, healthy eating, childhood trauma, brain development, and raising emotionally healthy children. Several sessions were provided for Spanish-speaking parents, and a series of workshops was made available for incarcerated fathers. A high point was partnering with several agencies, including First 5 Tuolumne, to bring Dr. Bruce D. Perry to the area for a full-day session, "Understanding Childhood Trauma: Creating a Trauma Informed Community."

Colusa County

Through its investments, the mission of First 5 Colusa County Children and Families Commission is to enhance the lives of all children, prenatal to age 5, and their families through a county-wide, comprehensive, integrated system of early childhood development.

During FY 2013–14, one of the most significant accomplishments of First 5 Colusa was the magnitude of services provided at its Family Resource Centers (FRCs). The FRCs are central hubs of services that offer various parent education classes, provisions of basic needs, application assistance, translation, and school readiness services. The FRCs are instrumental in ensuring basic needs of families and children birth through 5 are met, which is a critical factor in school readiness and child outcomes.

With a funding investment of \$211,462, the FRCs provided a total of 8,143 outreach and walk-in services to children and families in Colusa County. Services provided included food assistance (commodities, vouchers, distributions), various classes (parenting, health, nutrition, English-as-a-Second-Language, and General Education Diploma preparation), application assistance, referral services, and translation. In addition, a total of 36,940 pounds of food, including fresh produce, was distributed to families through programs at the FRCs.

Other First 5 Colusa investments and initiatives included:

Comprehensive Approaches to Raising Educational Standards Plus

- Child Passenger Safety Classes and Checkup Stations
- Growing Start (evidence-based parent/child playgroups)
- First 5 Service Corps/Americorps (child development screenings and assessments)
- Health Access (Covered California outreach, education, and enrollment)
- Raising a Reader Program
- Kindergarten Transition Programs (Kinder Camp and Backpack Program)
- Certified Lactation Counselor Training Scholarships

Contra Costa County

The goal of First 5 Contra Costa County is to support effective programs and more efficient systems that ensure Contra Costa County children grow up healthy, nurtured, and prepared for success in school.

With a relatively modest investment of \$220,000, one of its most significant accomplishments last year was to continue building a system for early identification, referral, and care coordination for children with developmental delays or behavioral concerns. The system includes convening the Early Childhood Leadership Alliance, a collaborative of 50 children's agencies, increasing provider capacity to provide developmental screening, responding to children's identified needs through new developmental playgroups, and leading the effort to become a Help Me Grow (HMG) affiliate in Contra Costa County to provide high-quality, coordinated services for all children in need.

Since 2011, First 5 Contra Costa has trained 280 children's service providers (including 95 public health nurses) from 58 agencies to implement the Ages & Stages Questionnaires® (ASQ) screening tool. More than 4,400 children have been screened, with one-third flagged for possible developmental concerns. Children not eligible for state-funded services, yet still experiencing concerning delays, can now participate in new developmental playgroups. At the conclusion of this eight-week program, many children received higher ASQ scores and no

longer needed services. Our new partnership with Contra Costa's 211 providers will make it easier for parents to find developmental and behavioral services for their children, an important step in centralizing referral services and becoming a HMG affiliate.

Other highlights from FY 2013–14 included:

- A newly designed, more intensive home visiting program serving families up to two years with case management, parenting support, and father engagement that promotes the Strengthening Families Five Protective Factors. Also formed was a new partnership with Early Head Start, which increased services. Last year, 250 families received more than 3,100 home visits.
- A Quality Rating and Improvement System (QRIS) was piloted to improve the quality of early care and education low-income children receive and to help parents easily identify high-quality programs. One hundred child care programs are participating, including family child care homes and child care centers, Head Start sites, and state preschool programs.

Del Norte County

First 5 Del Norte County's long-term goal is to build a true resource and referral hub through its Family Resource Center that highlights educational tools and easily accessible information about local and state resources that will support parents, grandparents, and caregivers in raising their young children to be healthy, safe, and ready to enter kindergarten and be successful in school and life.

During this past fiscal year, First 5
Del Norte's most significant challenge
was to reopen the doors of its Family
Resource Center after the nonprofit
entity operating the facility closed. With
a funding investment of over \$126,000,
this program provides access to safe,
neutral space for community partners
and families. The Family Resource Center
offers partners space to hold trainings,
parenting classes, childbirth education,

children's programs, wrap-around and counseling services, energy-assistance support for families, and a welcoming, nonjudgmental place for families in the child welfare system to visit and work on reunification.

Other highlights during FY 2013–14 included:

- Increased access to early literacy programs and books for young children through the Wonder Bus, a mobile lending library offering services throughout the county and Reach Out and Read (in partnership with medical clinics)
- The launch of a locally developed Comprehensive Approaches to Raising Educational Standards program that offered high-quality trainings and classes to preschool and family day care providers to encourage increased professional development of early educators and paid out stipends to all who met the training requirements. The program was well-attended and for the first time extended professional learning opportunities to family day care providers.
- Establishment of a strong, working partnership with the school district, local preschools, and Head Start programs based on investments by First 5 to assess kindergarten readiness over the past three years. The work focused on building bridges between kindergarten teachers and



early educators to jointly address the social-emotional, self-regulation, and kindergarten academic needs of Del Norte County children.

El Dorado County

First 5 El Dorado County Children and Families Commission promotes nurturing, stable, and loving family environments so that all children enter school physically and emotionally healthy and ready to learn. First 5 El Dorado supports school readiness through universal, countywide investments in newborn home visitation, health and dental access, developmental monitoring, early literacy, and high-quality early care and education programs.

In FY 2013–14, First 5 El Dorado invested \$1.4 million in school readiness initiatives. According to Kindergarten Student Entrance Profiles in fall 2013, 80 percent of all children entered kindergarten ready to learn. This marked a five percent increase over the last three years.

Commission initiatives offered early childhood and family support programs for 4,688 children ages 0 to 5 in FY 2013–14. Based on surveys of participants (n = 753):

- Thirty-three percent of families in which the youngest child was born in El Dorado County reported having a Best Beginnings home visit for their newborn.
- Ninety-five percent reported having a well-check for their children within the past 12 months. Ninety-four percent reported they had a regular doctor that their children see for well-child care. Ninety-six percent reported having health insurance for their child.
- Fifty-nine percent reported having a developmental screening for their children in the past 12 months.
- Twenty-nine percent of licensed early care and education programs in the county are engaged in quality improvement activities.
- Seventy-one percent of families reported reading to their children

- every day (six to seven days each week).
- A total of 134 collaborative partners were convened in three areas of the county for information sharing, promotion, referral, and outreach projects.

Fresno County

First 5 Fresno County wants all children to thrive. As an advocacy organization, First 5 Fresno invests in resources and supports efforts to improve the lives of children ages o to 5 and their families. Through its efforts, First 5 Fresno serves as a catalyst for creating an accessible and effective network of quality services promoting children's social, emotional, physical, and cognitive development need. Its 2013-20 strategic plan sets out a bold vision aimed at changing the odds for all children, with third grade reading proficiency rates as the primary, longrange desired outcome and indicator of a successful birth to age 5 system of care.

To this end, First 5 Fresno served nearly 5,670 children ages o to 5, parents, professionals, and other primary caregivers over FY 2013-14. Services included integration of systems to support early identification and intervention for young children with or at-risk for developmental delays and other special needs, investments to increase the capacity and quantity of high-quality early care and education programs, multi-disciplinary home visitation, child and family literacy programs and activities, public education partnerships focused on raising healthy, school-ready children, mentoring programs for at-risk parents, connecting families with tools and resources, and a variety of other efforts targeting countywide school readiness and thirdgrade-level reading.

Along with the launch of First 5
Fresno's new seven-year strategic plan,
FY 2013–14 marked the beginning of a
five-year longitudinal study following 3and 4-year-old children and their families
receiving First 5 Fresno-funded services
through third grade. The longitudinal
study will examine the link between early
childhood experiences and outcomes for

children and families, school readiness, and later school achievement. First-year data, collected from more than 500 parents, indicates First 5 Fresno continues to support children and families with the greatest needs and that the highest-need families are being connected to the greatest levels of support.

Glenn County

First 5 Glenn County invests in four results areas and respective goals: improved family functioning, improved child development, improved child health, and improved system functioning. First 5 Glenn started the Little Learners program using proven practices and curriculum designed to strengthen families and ensure children are ready to learn. First 5 Glenn has continued working collaboratively with public and nonprofit agencies in Glenn County and Butte County to leverage and extend resources to reach even more children and families. First 5 Glenn programs have achieved the following positive outcomes:

- numbers at post testing for those who scored in the "high-risk" category through the Nurturing Parenting Curriculum facilitated through the Little Learners and Parenting programs. Almost all parents initially identified with high-risk behaviors (based on a standardized assessment tool) had increased skills and knowledge as a result of program participation, and moved out of the high-risk category, as determined by the follow-up assessment.
- A total of 41 Devereux Early
 Childhood Assessments (DECA)
 were conducted on Little Learners'
 children (ages 4 weeks to 4 years) at
 the beginning of the program year.
 Parents and teachers supported
 these children at home and in the
 classroom. All 11 children who initially
 were identified with concerns were
 referred for additional services
 and supports. At the follow-up
 assessment; however, only three
 children were noted with concerns. In
 addition, 308 DECAs, separate from

- Little Learners, also were conducted on kindergartners in Glenn County.
- During FY 2013–14, as a result of the partnership with the Northern Valley Indian Health's Mobile Dental Clinic and First 5 staff's coordination and organization, 90 Glenn County children ages 0 to 5 had their oral health needs addressed.
- First 5 Glenn funded kindergarten and transitional kindergarten teachers to attend a state transitional kindergarten training in San Francisco. The training ensured that teachers had the appropriate skill set to work with the children entering their classroom. First 5 Glenn has remained a leading county in the area of transitional kindergarten.
- First 5 Glenn had six AmeriCorps members during this program year, which resulted in approximately 9,200 hours of direct service in the home, classroom, and Little Learner and community events.

Humboldt County

Together with its families and communities, the mission of First 5 Humboldt County is to promote comprehensive, integrated systems of services for early childhood development in order to foster secure, healthy, and loving children eager to learn and develop to their full potential. Beginning with the initial First 5 Humboldt strategic planning process in 1999, parents and providers alike repeatedly expressed the desire for "safe and family friendly" places in their communities that would enable families to get together for recreation and mutual support, and access opportunities for learning and services. First 5 Humboldt responded to this need and made parent and family support programs a priority for funding, including establishing playgroups that are accessible for as many families as possible throughout the 3,600 square miles of land in this rural county. Evaluations of the playgroups demonstrate they have had a positive impact for young children and their families in Humboldt County.

During FY 2013–14, a major accomplishment of First 5 Humboldt was providing 17 playgroups in virtually all areas of the county. During FY 2013-14, there were more than 11,046 parent/caregiver playgroup visits, 9,148 playgroup visits by children ages o to 2, and 4,320 playgroup visits by children ages 3 to 5 at 990 playgroup events. According to annual surveys (the Participant Survey, n=493, in 2013, and the Playgroup Survey, n=205, in 2014), these low-cost groups (ranging from less than \$2,000 per year to \$14,000 per year for the largest groups) provide a place where parents feel they learn more about parenting, get social support, and access needed help and services, and also provide a place for children to learn new things, including very important socialization skills. Additionally, the 2013 Participant Survey showed a statistically significant positive correlation between frequency of playgroup attendance and the frequency with which parents read to their children, and play music and sing with them.

During interviews, kindergarten teachers have said they feel First 5 Humboldt playgroups help prepare children for kindergarten and are pleased that children have access to playgroups throughout this rural county. In 2012 and again in 2013, what these teachers stated was reinforced by the results of Humboldt County Office of Education's Kindergarten Screening Tool (KST), which was used to screen almost 89 percent of all incoming kindergarteners. The KST measures children's readiness in four domains: language/ literacy, mathematics, social-emotional development, and self-portrait. The average countywide total score for those who attended a playgroup was 80 percent in 2013 and 77 percent in 2012. For those children who did not attend a playgroup, this figure was 72 percent in 2013 and 70 percent in 2012. Additionally, the Humboldt County Office of Education reported that for children who attended preschool, the average score was 77 percent, and for children who attended both preschool and a playgroup, the total score rose to 82 percent.

Imperial County

For FY 2013–14, First 5 Imperial County awarded approximately \$1.9 million in funding for 20 projects that worked to provide services targeting children ages o to 5, their parents, guardians and providers. Investments used to support these projects addressed strategic objectives by offering services that focused on health, family support, and early care and education. For instance, investments used to support families with young children included case management services for at-risk families, family resource fairs at low-performing school sites that included programs from up to 36 distinct agencies, and intensive parent education using the Systematic Training for Effective Parenting Program for more than 100 parents. Investments in health ranged from support to ensure



expectant mothers receive prenatal education and programs designed to increase breastfeeding rates, to intensive child asthma case management services, and nutrition and fitness activities.

Additionally, investments in early care and education included story time activities at more than 50 preschool centers with a book give-away program at each visit, as well as intensive preschool slots for children who have a mild disability or are at risk of developing a disability but do not qualify for special education services.

Perhaps one of the most meaningful successes during FY 2013–14 was the



developmental screening partnership established between First 5 Imperial, **Court Appointed Special Advocates** (CASA), and the Family Treehouse. First 5 Imperial awarded \$203,264 to the Family Treehouse to offer developmental screening services for children ages o to 5 through its family resource center. CASA was awarded another \$82,296 to provide advocacy and school readiness support for children ages o to 5 who are in the custody of the juvenile court dependency system. Through this partnership, 86 percent of CASA children participated in developmental screening and surveillance services facilitated by Family Treehouse staff, where all children assessed with a delay in their development were supported with court ordered follow-up referrals and evaluation. Additionally, more than 90 percent of CASA child cases that were closed resulted in placement in a permanent home, where the majority of children were reunified with their parents.

Other noteworthy accomplishments achieved by projects funded by First 5 Imperial for FY 2013–14 included:

- The involvement of more than 3,000 children from preschool centers in mobile library story time activities, with each child receiving three to five books to take home
- Participation of more than 987 children in fire/burn-prevention activities at more than 20 preschool centers, and the involvement of 30 child care providers involved in hands-on fire safety training
- The participation of parents of 100 children diagnosed with asthma or asthma symptoms in intensive case management, where more than 90 percent demonstrated confidence managing the condition and 80 percent learned to identify asthma triggers
- The funding of 16 slots for children with disabilities or who are "at risk" of developing a disability that does not qualify for special education services
- The promotion of nutrition and fitness through education, cooking classes, and active gardening at 12 preschool centers for 181 children
- The completion of a model 30-week home instruction program involving 89 children in which up to 88 percent of parents showed increases in confidence with respect to working with their children

Inyo County

First 5 Inyo County is committed to funding outcomes that promote early optimal development, shaping the trajectory of a child's life to yield ongoing benefits and rewards. It accomplishes this by investing in the Five Protective Factors in each Inyo County community to improve child health and development, strengthen families, and provide critical resources from before birth through kindergarten entry at age 5.

During FY 2013–14, one of the significant accomplishments of First 5 Inyo was its ability to extend evidence-based parenting education to a pilot class with inmates in the county jail, laying a foundation for continued support and involvement with First 5

programs after incarcerated parents are released, as well as putting First 5 Inyo in touch voluntarily with the families of incarcerated parents of children ages o to 5. With information and permission to directly contact families dealing with an incarcerated parent, First 5 Inyo was able to offer a wide range of resources to families with small children who are experiencing a dramatic shift in relationships, living arrangements, and financial resources at a point in time when their families often feels reluctant to engage with any agencies or systems due to perceived shame and a wariness that aid will somehow be used against the family unit. Costing only additional staff time, curriculum, and supplies, this was a successful example of how annexing existing programs to serve new client pools with identified needs can improve outcomes and strengthen more families countywide.

Other highlights from FY 2013-14 include the establishment of a Family Resource Center at the Bishop Paiute Head Start campus in Northern Inyo, a complement to the Southern Invo Family Resource Center in Lone Pine that offered more classes and events than ever for families with children ages o to 5; continued early oral health services and education; new bilingual story hours at three primary library branches throughout the county; and the completion of a six-month community needs assessment that culminated in a comprehensive strategic plan update for 2014-19.

Kern County

Through its investments, First 5
Kern County's goal is to strengthen and support the prenatal to age 5 children of Kern County and their families by empowering its providers through the integration of services, with an emphasis on health and wellness, parent education, and early childcare and education.

In FY 2013–14, First 5 Kern continued to dedicate its efforts in providing children with services by funding 40 programs in the three result areas: improved child health, improved child development, and improved family

functioning. The most significant accomplishments were demonstrated through compelling outcomes of three programs: Differential Response (improved family functioning), Supporting Parents and Children for School Readiness (improved child development), and Richardson Special Needs Collaborative (improved child health).

- With a funding investment of \$615,000, the Differential Response program provided case management services to 1,920 children. Differential Response ensures prompt attention to suspected reports of child abuse and neglect. Following Child Protective Services referrals, contact is made within 72 hours and clients are provided a home visit within 10 working days. Families exiting the program showed significant improvement in family functioning domains on the North Carolina Family Assessment Scale-General instrument.
- With a funding investment of \$457,000, the Supporting Parents and Children for School Readiness program provided Summer Bridge services to 144 children to enhance school readiness. The program also provided a broad scope of age-appropriate services, including home visitation, case management, and developmental assessment, as well as center-based learning for both parents and children. The program demonstrated significant improvements in the following domains: cognitive, communication, self-help, social-emotional development, and fine motor skills on the Child Assessment-Summer Bridge assessment.
- With an investment of \$246,000, the Richardson Special Needs
 Collaborative program provided
 72 children with prevention and intervention services to address
 special needs. The program also provided case management, home visitation, basic needs referral, parent education, and behavioral health
 support. The program demonstrated

significant improvements in meeting health needs for case-managed children by reducing unmet health needs to 0 by the twelfth month of service.

Kings County

Through its investments, the goal of First 5 Kings County is to ensure all families receive access to the tools, knowledge, and quality care necessary to encourage each child to develop to his or her fullest potential, including building life skills that will allow them to become successful members of the community.

During FY 2013–14, one of the most significant accomplishments of First 5 Kings was the locally funded Comprehensive Approaches to Raising Educational Standards (CARES) project. With a funding investment of \$158,461, this program provided mentoring, coaching, training, technical assistance, and materials to 39 preschool classrooms located in Kings County. The CARES project assisted preschool classrooms with completing the Early Childhood Environmental Rating Scale (ECERS), the Classroom Assessment Scoring System® (CLASS), and Desired Results Developmental Profile (DRDP). In addition, the local Kings County CARES project conducted the following for child care providers: a conference, 38 trainings, a monthly book club, a webinar series, and a teacher appreciation banquet.

Other highlights during FY 2013–14 included:

- Coordination of Linkages 2 Learning project transition teams at 12 kindergarten serving school sites in Kings County. This included two new school sites.
- Distribution of 1,502 school readiness backpacks to incoming kindergarteners through the Linkages 2 Learning project
- Linkages 2 Learning project-facilitated kindergarten orientations prior to the first day of school at all 12 participating school sites, serving 990 incoming kindergarteners

- A total of 215 developmental assessments of children with or at risk of developing special needs provided by the United Cerebral Palsy Special Needs project
- A total of 193 interventions and/or treatment plans provided to children with or at risk for developing special needs through the United Cerebral Palsy Special Needs Project
- Weekly center-based early childhood activities through the United Cerebral Palsy Parent & Me project that served 267 children ages 0 to 5 and 212 parents
- Parent education and/or early childhood education services provided through the Kings County Family Resource Centers serving 1,189 children ages 0 to 5 and 1,055 parents, siblings, and caregivers
- The launch of home visitation services through the Kettleman City Family Resource Center. A total of 255 home visits were made.

Lake County

The goal of First 5 Lake County, as stated in its strategic plan, is "to inspire and promote healthy, safe, happy, and family-centered experiences for children o to 5 through partnerships with local families and service providers." Through its investments, First 5 Lake works to achieve its long-term vision that "Lake County's children receive the best possible start in life and thrive."

FY 2013–14 marked the completion of the ninth year of the countywide Nurturing Parenting program in Lake County. Approximately 22 agencies and programs were directly involved in the Nurturing Parenting program's network this past year, funded through the Lake County Office of Education. This network is an example of what can be done when agencies align and coordinate their services. Cross-agency data collection also has been utilized as part of this funded program through use of the Nurturing Parenting online database. Three facilitators from First 5 Lake, Lake County Office of Education, and Lake County Child Welfare Services attended a "train

the trainers" event in Chico in January 2014. This is a giant leap for the program to have certified local trainers to be able to enhance the quality of the classes and ensure that Lake County facilitators have the latest training available to them. Eight new *Nurturing Parenting* facilitators were trained during this past year.

Several other programs also made a difference in the lives of Lake County families during FY 2013-14. The Mother-Wise program provided one-on-one and group services to a total of 176 mothers and 11 fathers, with support and access to mental health and other needed services for mothers experiencing postpartum depression. The Children's Oral Health program provided 943 children ages o to 5 with education, screening, and treatment funded through First 5 Lake, including nutrition and oral health lessons, a new storybook about brushing teeth and encouraging healthy bedtime routines, and dental screening at preschool/school sites, with 40 percent of the children screened as cavity free. In addition, the newly funded Family Signing training program offers two weekly classes along with a weekly video or web resource through a Facebook group. This year, 16 parents and children joined the classes, with the Facebook group growing to 76 members. Staff reports improvements in the signs and vocabulary of the children attending the classes, and parents have reported their children are using the sign language at home to communicate. The Easter Seals Health Line continued to be a point of access for developmental information and assistance, and linkages to referrals and resources. More than 475 calls were received from child care providers, parents, pediatricians, and others asking for information, resources, and technical assistance via the toll-free phone line. This included 78 percent repeat callers and 22 percent new callers from the county, indicating that outreach to new users is continuing to be effective, and that this is an important and trusted source of information for previous users of the Health Line.

Lassen County

Through its investments, the goal of First 5 Lassen County is to fund programs aimed at ensuring all children enter school healthy and ready to learn. First 5 Lassen has two primary areas of focus—oral health and home visiting—both serving high risk populations. Two programs, the Pathways to Child & Family Excellence program (commonly referred to as Pathways) and Children's Oral Health Program, also known as Smiles for Life, have been important investments of First 5 Lassen.

During FY 2013–14, one of the most significant accomplishments of First 5 Lassen was its home visiting program implemented by Pathways to Child & Family Excellence, Inc. With a funding investment of \$263,116, this program provided home visiting services to high risk families. It is designed to improve family functioning, child development, health, and systems of care. The primary services provided include weekly parent education and child development lessons using the Parents as Teachers (PAT) curriculum. Screenings and assessments are completed on both children and parents to determine an individualized approach to addressing child, parent, and family needs. Each child is screened for developmental progress using the Ages and Stages Questionnaires®; simple PAT health screenings are used for hearing and vision. The Life Skills Progression Tool is used with each family to gauge the strengths of the family and the areas that need attention. Based on this tool and weekly communication with the family, the home visitor is able to make targeted referrals. The Home Visiting Program served 103 children ages o to 5 and 110 parents and caregivers in 2013–14. Another 26 children (siblings 6 years or older) participated in the program, increasing the total number of children served during the year to 129. In 2013–14, the number of service units was 1,621.

In addition, the First 5 Lassen Children's Oral Health Program—implemented in the community by Smiles For Life, Inc.—serves Lassen County via different service delivery strategies including direct prevention, consultation services, assessment, health services, community health events, and resource and referral activities. During FY 2013–14, the program provided 345 children ages 0 to 5 with direct oral health services. This equates to 26 percent of the age 0 to 5 population of Lassen County.

Hospital-based oral health services for children, a local First 5-funded program started in 2003 and now sustained by Banner Lassen Hospital, continued to provide oral surgery services to children.

Los Angeles County

Through its investments, First 5 Los Angeles County (First 5 LA) seeks to ensure that babies are born healthy, children maintain a healthy weight, children are safe from abuse and neglect, and children are ready for kindergarten. To accomplish these goals in FY 2013-2014, First 5 LA spent almost \$190 million to fund 52 initiatives and their associated evaluations. Through about 250 grants and contracts, First 5 LA worked with almost 200 different organizations throughout Los Angeles County. Overall, First 5 LA directly served approximately 150,000 children, 165,000 parents, and 14,000 providers. In addition, more than 120 organizations were assisted in building their capacity to serve more than 96,000 children and their families. Through the communications work of its contractors and grantees, First 5 LA educated almost 400,000 people at community events, workshops, and other person-to-person venues. Through mass media efforts such as television, billboards, and radio, potentially millions of people received First 5 LA public education messages. First 5 LA also invested in systems change at the organization, community, county, state, and federal levels.

During FY 2013–14, one of the most significant accomplishments of First 5 LA was the expansion of its *Welcome Baby* program from 1 hospital to 13. With an investment of \$20.2 million this year, this program provided bedside screening and referrals to almost 6,000 new mothers during their hospital stays and home visits to about 3,600 women. Women

in Best Start communities (neighborhoods where First 5 LA is focusing its community building efforts) are eligible to receive up to nine "touch points:" two prenatal home visits, one prenatal phone call, a post-partum hospital visit, a post-partum at home nurse visit, and three post-partum home visits and one phone call from parent coaches. Women in Best Start communities who are found to be at high risk of poor outcomes during their hospital screening will be referred to an evidence-based home visitation program for more intensive and sustained support. When fully operational in 2016, it is anticipated that Welcome Baby will serve about 34,000 women a year—roughly 25 percent of all births in Los Angeles County.

The following are other highlights from FY 2013–14:

- Quality preschool slots were provided to 9,307 4-year-olds.
- Rental assistance and supportive services were provided to 877 children ages 5 and under and their families who were homeless or at risk of homelessness.
- Targeted intensive family support was provided to 1,402 children and their families at risk of child maltreatment.
- Access to substance abuse services was provided to 916 parents who were clients of the Department of Children and Families Services.
- Home visitation and early care and education were targeted as policy priorities by First 5 LA, contributing to greater outreach, education, and advocacy efforts in Los Angeles, Sacramento, and Washington, D.C.

Madera County

Through its investments, the goal of First 5 Madera County is to ensure that children are healthy, families are strong, and children are learning. It strives to serve the families of Madera County through the promotion of meaningful, lasting programs that greatly contribute to the betterment of the community.

During FY 2013–14, one of the most significant accomplishments of First 5

Madera was the Oral Health Initiative. With a funding investment of \$40,000, this program provided oral health screenings and referrals in a schoolfriendly setting, using the tooth fairy concept to entice children and counter some hesitations that many children have for the dentist. The program screened 458 children. Of these, 45 percent (n=209) were referred for services, meaning they needed services based on their screenings. The findings of the screenings demonstrated that 22 percent (n=45) did not have a dental home. A total of 78 percent (n=165) of families that indicated their children had a dental home demonstrated the need for services. Further data regarding the intensity of the need and population served is being reviewed. First 5 Madera is using this information to determine future policy and programming.

Early identification is key to prevention and treatment. In FY 2013–14, 185 first-time parents received case management via the First Parents Program. The program performed 1,140 screenings, including Denver II, Ages and Stages Questionnaires: Social-Emotional, NCAST Feeding and Teaching, and Life Skill Progression. Of the various screenings, two children were identified as having concerns.

In addition, 159 families received intensive multidisciplinary services via the Healthy Beginnings Program. Of the cases closed in 2013–14, as of September 2014, none of the families had any recurrence of maltreatment.

Marin County

Through its investments, the goal of First 5 Marin County is to build public support for children's health and school readiness, promote shared responsibility in support of children and families, build partnerships and increase resource leveraging, and create a community that puts children at the center of the agenda.

During FY 2013–14, one of the most significant accomplishments of First 5 Marin was the creation of the Marin Strong Start movement—a grassroots (and "grasstops") effort to improve

equity of opportunity for all children in Marin County. Marin Strong Start has proposed a ballot measure asking for a 1/4 cent sales tax to support underserved children. First 5 Marin supported the work to build a broad coalition of supporters, conduct extensive community engagement, and craft an expenditure plan.

The proposed measure would provide approximately \$10 million annually to:

- Increase the number of children attending preschool and prepare children for success in school
- Expand afterschool/summer learning programs for reading, writing, and math achievement
- Provide affordable child care for infants, toddlers, and young children
- Expand health care for underinsured children



Support early identification of physical, developmental, and emotional issues

Marin Strong Start has conducted professional polling and has worked with a campaign consulting team to help ensure the success of the ballot measure (tentatively slated for November 2016). It worked with the Board of Supervisors throughout and has secured the board's endorsement as well as financial support.

Other highlights during FY 2013–14 included:

The creation of The Marin
 Communications Forum. This
 program provides free monthly
 workshops to community partners
 to expand their skills and knowledge

in communications, outreach, and advocacy. These workshops have become extremely popular, with topics ranging from media and social media (Facebook, Twitter), to legislative advocacy and outreach to the Spanish-language community.

- Publication of multiple opinion editorials, in an effort to contribute regularly to the "thought leadership" for children's issues in Marin County.
- A countywide policy breakfast for 250 community leaders with a keynote address by Chris Hoenig from the California Budget Project (CBP). The keynote focused on the high cost of living in Marin County (based on CBP's online tool called "Making



Ends Meet: How Much Does it Cost to Raise a Family in California?" [http://cbp.org/MakingEndsMeet])

Mariposa County

The following accounts help share the work of First 5 Mariposa County. This year, First 5 Mariposa funded a Children's Dental Health Program for \$61,000; a School Readiness Program funding three preschools (Catheys Valley, Greeley Hill, and Lake Don Pedro) for \$162,384; three mini-grants for \$5,000 or less; and the Comprehensive Approaches to Raising Educational Standards (CARES) Plus grant with First 5 California. In addition, First 5 Mariposa was involved in the 15th anniversary of First 5, the Board of Supervisor's recognition of the Hero

Award recipients, the Safe-at-Home fairs in Coulterville and Mariposa Township, and the children's Fall Festival in October.

Children's Dental Health Program (Burney Stephens, Dental Hygienist): The Children's Dental Health Program provides dental education, screenings, referrals, and some financial assistance for dental services. Three local dentists provide a discount to assist with children who have serious dental concerns. The highlights of the program have been the dental screenings and the referrals to local dentists. Children who have been in pain with tooth decay have received services. This year, the hygienist provided dental screenings throughout the county and made more than 50 referrals to local dentists as a result of home visits as well as preschool and community screenings. This program is in only its third year of funding; however, the screenings and referrals have already been invaluable. During this year, 52 children and 72 parents were served. The program focuses largely on education and prevention. The dental hygienist visits all preschools, child care programs, and community fairs and events, providing toothbrushes and other materials as part of the program.

Transitional Kindergarten Aide:
First 5 Mariposa funded an instructional aide in the Transitional Kindergarten classroom at Mariposa Elementary School. Mariposa Elementary School is currently the only full service Transitional Kindergarten class in Mariposa County School District.

The instructional aide has made a positive difference in the Transitional Kindergarten classroom, with children receiving individualized attention and more one-on-one instructional time.

Sierra Foothill Charter School
Transitional Kindergarten Classroom
Materials: The listening center and
associated compact discs and books
are powerful learning tools. This
provides practice for essential reading
skills, including decoding, listening, and
comprehension. The station also has an
iPod that can be attached for music and

to record personal stories. In addition, three iPads were purchased with a match from a parent.

Transitional Kindergarten Special Education Classroom Equipment: This First 5 Mariposa mini-grant funded bicycle helmets. Children became aware of the need to wear a helmet while riding their tricycles. The tandem tricycles encourage cooperative play, sharing, and caring for others.

School Readiness Program (Catheys Valley, Greeley Hill, and Lake Don Pedro Preschools): The School Readiness Program has been invaluable by providing preschool to children throughout Mariposa County, along with transportation and services in the mountainous regions of Mariposa. As a result of the program, the children entering kindergarten are socially, academically, behaviorally, and emotionally ready for school. The program provides hands-on activities that are developmentally appropriate in a play-based atmosphere. The staff provided music, art, literacy, and centers with manipulatives and circle time that focused on school readiness, including kindergarten visits. Parents are encouraged to work in the classrooms and are involved in the home visitation/ literacy programs.

15 Year Anniversary Recognition and Proclamation by the Board of Supervisors: First 5 Mariposa received a proclamation by the Mariposa Board of Supervisors for serving Mariposa County for 15 years and making a difference in the lives of the children in Mariposa County.

Comprehensive Approaches to
Raising Educational Standards (CARES)
Plus Grant Training on Working with
Special Needs Children: First 5 Mariposa
held a training on Saturday, April 12,
2014, with the theme and focus that child
care providers can successfully include
children with disabilities or other special
needs in the program while promoting
belonging for all children. Nine CARES
Plus participants attended the workshop
on working with special needs with
presenter Susan Thomas from California
Preschool Instructional Network.

Mendocino County

Through its investments, the goal of First 5 Mendocino County is to improve parenting and decrease substance abuse among parents of children ages 0 to 5. In the 2013–14 program year, First 5 Mendocino adopted a new strategic plan focused on these dual priorities. Major accomplishments in addressing parenting and substance abuse prevention in 2013–14 included:

- Development of new initiatives in the amount of \$82,000 to reduce parental substance abuse, including funding and designing a pilot Recovery Parenting Program in collaboration with the Family Dependency Drug Court at the Mendocino County Superior Court, This innovative work led to recovery-focused Triple P Positive Parenting Program classes in both Ukiah and Fort Bragg. First 5 Mendocino also funded local detox residential drug treatment for pregnant women referred through the county's alcohol and drug treatment program when no other funding sources were available to women during the critical prenatal time period.
- Development of a Family Resource Center in southern Ukiah at the Alex Rorabaugh Recreation Center focusing on Spanish-speaking families. With funding from the county Health and Human Services Agency and First 5, the center offers a parenting "warm" line, community resource and referral, a Spanish parent/child playgroup, Triple P workshops and groups, health insurance and CalFresh application assistance, English- as-a-Second-Language conversation groups, a child safety program that offers professional installation and car/booster seats at a sliding scale, and Music Together sessions.
- Supporting Signs of Safety training for staff at Family Resource Centers and other public and private agencies as a strategy to reduce child abuse and neglect. (Signs of Safety is an evidence-based practice adopted by

- Mendocino County Child Welfare to keep at-risk children safer).
- Improved parenting, First 5 Mendocino supports a countywide Triple P parenting program including a "warm" line for referrals, workshops, classes, and support groups; the Imagination Library (in collaboration with the Dollywood Foundation, the Mendocino County Library, and other local donors) to provide a book a month to children from birth to age 5; social marketing to promote breastfeeding in conjunction with Mendocino County Women, Infants, and Children (WIC) peer counselors; and community collaborations with WIC, preschools, and the inter-agency Mendocino County Food Policy Council to improve nutrition and fitness for children ages o to 5 and their parents.

Merced County

Through its investments, the goal of First 5 Merced County is to:

- Improve parents' (especially new parents') relationships with their children to make them more nurturing and engaging
- Improve the quality of care provided in out-of-home settings (including center-based care, family child care, and nonlicensed environments)
- Improve the system for early screening, referral, assessment, and services for children with developmental, health, social, emotional, behavioral, and other special needs
- Improve community-level awareness and acknowledgment of the critical need to prioritize and support structured action for change benefitting our youngest children (ages o to 5 years)
- Advocate for improvement and preservation of systems serving children ages o to 5 years at the local and state levels

During FY 2013–14, one of the most significant accomplishments of First 5 Merced was increased quality among identified Child Signature Programs 1 and 2. With a funding investment match of \$525,125, this program maintained quality in identified Quality Enhanced classrooms and continued improvement across the Maintenance of Effort classrooms. Targets of family engagement and coaching for teachers were reached. Specialized training was offered reflective of classroom- and child-level work. A large number of reliable assessors for Early Childhood Environment Rating Scale (ECERS) and Classroom Assessment Scoring System® (CLASS) were trained. Training was offered with an emphasis on social, emotional, and developmental screening as well as individualized teaching strategies, which also were offered to neighboring counties and partnering agencies.

During FY 2013–14, First 5 Merced also:

- Provided support for a local Parent Leadership Training Institute event for over 450 parents
- Engaged in a new contract with UC Merced for a virtual resource center
- Increased overall reach through Facebook
- Completed a countywide breastfeeding survey and support for a Baby-Friendly hospital
- Maintained 11 Child Signature
 Program 1 Quality Enhanced class-rooms (morning and afternoon) and one "full-day" classroom

Modoc County

Through its investments, the goal of First 5 Modoc County is to ensure that each and every child in Modoc County is in an environment that is conducive to optimal development, and to ensure that the parents and families have the first option to be primary caregivers and teachers for their o to 5-year-old children

During FY 2013–14, one of the most significant accomplishments of First 5 Modoc was the Modoc County Public Health Healthy Beginnings program. With a funding investment of \$55,950, this program provided a home visiting program focused on strengthening and improving positive parent-infant

interaction, healthy infant development, and parental competencies. The total number of families served this year was 32. This is the seventh year of this program and it continues to grow, providing much needed support and services to Modoc County families.

Other accomplishments from FY 2013–14 included:

- The Modoc County Office of Education School Readiness in State Preschool program, with a funding investment of \$49,041, was able to provide preschool opportunities and family support for 10 additional children and families in Modoc County.
- The TEACH, Inc., Tulelake/Newell Family Resource Center, with a funding investment of \$27,538, was able to provide Family Resource Center services and activities to the families of Modoc and Siskiyou counties. This program also collaborates services with First 5 Siskiyou.
- Comprehensive Approaches to Raising Educational Standards (CARES) Plus, with a funding investment of \$38,456, was able to continue our professional development program for early educators designed to improve the quality of early learning programs by focusing on increasing the quality, effectiveness, and retention of early educators. Twelve CARES Plus participants completed their program requirements this year. This program is made possible with funding and support from First 5 California.

Mono County

First 5 Mono County's overarching goal is to enhance the network of support services for families with children ages 0 to 5. In FY 2013–14, investments were made in home visiting, school readiness, family behavioral health, oral health, child safety, and child care quality. The result areas for First 5 Mono are that Mono County children ages 0 to 5 are: 1) educated to their fullest potential, and 2) are healthy.

One of First 5 Mono's most significant accomplishments in FY 2013–14 was a

partnership with the county's only local hospital (Mammoth Hospital) to provide the course fees for labor and delivery nurses to become Certified Lactation Educator-Counselors (CLEC). The increase in hospital staff's knowledge, coupled with in-hospital lactation education provided by First 5 Mono's home visitation program staff (who also are CLECs), helped increase the percentage of exclusive breastfeeding at hospital discharge from 60 percent in 2010 to 81 percent in 2013. In this three-year span, First 5 Mono also partnered with Mammoth Hospital to provide new mothers with breastfeeding bags at hospital discharge instead of formula bags.

Some highlights from First 5 Mono's FY 2013–14 indicators are:

- Thirty-nine percent of children birth to 5 lived in households in which parents and other family members received: 1) child-development and parenting education, and 2) information about appropriate community services.
- Eighty-five percent of children received support transitioning to kindergarten.
- Eighty-six percent of moms in First 5
 Mono's home visiting program sustained breastfeeding to 12 months.

Monterey County

The mission of First 5 Monterey County is to serve as a catalyst to create sustainable change in systems, policies, and practices that enrich the development of children in their first five years of life. First 5 Monterey focuses on three vision areas:

Parenting Development: Programs that maintain relationships with parents to build knowledge, skills, and confidence in parenting

Child Care Quality: Programs that enhance child care provider and caregiver education, child care environment quality, child care workforce development, and parent-teacher interactions

Mental and Physical Health: Programs that provide a coordinated system of screening, referrals, and services for children with special needs, including emotional delays, and coordinated, flexible, and individualized support; and services for children who have experienced trauma or prenatal exposure to drugs or alcohol

Through its investment of \$7.2 million in FY 2013–14, First 5 Monterey provided services to more than 23,000 young children, parents, and providers. One of the most significant accomplishments of First 5 Monterey was support for the Early Childhood Development Initiative (ECDI). In the past year, ECDI has developed a strategic vision, road map, and action plan to help children from the prenatal stage through third grade reach their full potential. A collective impact framework is being used to bring together multiple sectors of the community. ECDI has received financial support from the Packard Foundation, Community Foundation for Monterey County, and the Monterey County Board of Supervisors.

Some additional highlights during FY 2013–14 included:

- Building leadership within the early educator community. Early educators who participate in technical assistance programs prepare presentations about their work to share with each other and other interested providers through seminars held several times a year, each drawing more than 150 early childhood development providers throughout the county.
- Sponsoring a highly acclaimed Infant-Family Early Childhood Mental Health training series designed to strengthen family-centered, relationship-based knowledge and skill among diverse professionals.

Napa County

Through its investments, the goal of First 5 Napa County is to support a comprehensive system of services that ensures children ages 0 to 5 will enter school healthy and ready to learn.

During FY 2013–14, First 5 Napa made a \$68,400 investment in a local family resource center's Healthy Families America (HFA), home visiting program. The HFA program served 27 "high-risk" families to prevent child maltreatment and strengthen and stabilize the family. Families are receiving needed services and 190 referrals were made.

"High-risk" families received services that improved family and parent strengths:

- Eighty percent of clients remained stable (36 percent) or improved their ability (44 percent) to access social supports.
- Sixty-eight percent of clients remained stable (28 percent) or improved (40 percent) their satisfaction with being a parent.
- Fifty-two percent of clients maintained (8 percent) or improved (44 percent) their problem-solving skills.
- Home visitors provided support, resources, and services to ensure children are receiving wellness services. In the last year:
- A total of 35 children received Ages & Stages Questionnaires® (ASQ), Third Edition, and ASQ:Social-Emotional screens at regular intervals.
- A total of 81 percent of children are up-to-date on immunizations.
- All children have a medical home and health insurance.

Nevada County

Through its investments, the goal of First 5 Nevada County is to—in partnership with the community—create, foster, and support programs that promote health, wellness, and child development for children ages o to 5 and their parents. Its current major investments are in family resource centers, home visiting, children's behavioral health services, school readiness programs, community collaboratives of family-service agencies, and a quality child care rating program.

During FY 2013–14, one of the most significant accomplishments was the Foothill/Truckee Healthy Babies (FTHB) program's achievement of accreditation with the evidence-based Healthy Families America (HFA) model. A national review team rated FTHB in all 117 of the HFA best practice standards. As part of

accreditation, FTHB will engage in continuous quality improvement, using data on program service delivery and outcomes to continually improve services. FTHB has been supported with First 5 funds for 15 years, initially serving 20 families; this investment has now been leveraged to serve 120 families with the addition of Federal Home Visiting dollars through the California Maternal, Infant, and Early Childhood Home Visiting Program. With a funding investment of \$83,000, this program provided intensive services to 27 of the total 170 families served by FTHB in FY 2013-14. Home visitors provide regular developmental screenings of children using Ages & Stages Questionnaires® (ASQ) and ASQ:Social-Emotional as well as regular screenings of mothers for perinatal mood disorders (Edinburgh) and relationship violence (Women's Experience with Battering Scale). Children and parents with identified needs are connected to services, often with a warm hand-off. Home visits follow curriculum on child development and building positive parent-child interactions to encourage the development of a secure attachment. Families identify goals they wish to work on. Among those served for three months or more in FY 2013-14, 81 percent had attained or made substantial progress on at least one goal they had set for the year. Home visitors assess health insurance status of mothers and children, making sure each has insurance, is connected to a medical home, and is receiving preventive medical care. In a county where less than 73 percent of entering kindergartners are fully immunized, 100 percent of FTHB-enrolled infants and toddlers are on target to be fully immunized.

Other accomplishments in FY 2013–14 included:

In the summer kindergarten preparation classes, teacher observation showed that, on average, children who had had no preschool showed growth in 8.33 areas on a modified Desired Results Development Profile, which was scored on 18 school-readiness-related areas.

- A total of 863 parents of 1,014 children ages 0 to 5 were served in four family resource centers; this is a growth in the number of children served of 7 percent from the prior year, though available funding was reduced at all centers.
- The STAR child care rating program
 has grown to include 12 centers, five
 large family child care homes, and
 four small family child care homes; 52
 percent achieved the highest rating
 by a professional after at least a year
 of self-study.

Orange County

First 5 Orange County serves as a convener, planner, and sponsor to implement programs in four goal areas—healthy children, early learning, strong families, and capacity building—to achieve the vision that all children are healthy and ready to learn.

In FY 2013–14, one of the most significant accomplishments was the expansion of autism services. Last year, First 5 Orange invested \$7 million that was matched by the Thompson Family Foundation. This year, The Center for Autism & Neurodevelopmental Disorders opened in a new 21,500-square-foot facility, increased the number of providers from 15 to 50, increased annual visits from 3,000 to 21,000, and now provides treatment in addition to evaluation and diagnosis. With the match funding, the center is now open to children from infancy to age 22. First 5 Orange continues to provide over \$1.5 million for annual operations and services for young children.



Other highlights included:

 Early Childhood Science, Technology, Engineering, and Math (STEM)
 Conference: First 5 Orange and its early learning manager THINK
 Together partnered with the Children's Center at Caltech in February 2014 for the first annual Orange County Early Childhood STEM
 Conference. The conference included a panel presentation with represen-



tatives from business and early and higher education to discuss the skills children need to develop for the 21st century workplace. More than 500 early educators and others interested in early STEM education attended the two-day conference. First 5 Orange funds 27 Early Learning Specialists in 25 school districts throughout Orange County. The conference was developed to respond to the Early Learning Specialists' request for professional development to better understand how to incorporate math and science into their curriculums.

Regional Common Data System:
 Four southern California First 5
 county commissions participated in a multi-commission application process this year for a joint database vendor to reduce costs, achieve efficiencies, and improve outcomes reporting by the southern California region. In Orange County, the new agreement

represents an annual savings of \$41,000 to \$63,000 depending on the number of participating counties. As tobacco tax revenue declines, these cost savings will be redirected to programs that serve children. The new system was operational in April 2014 and the collected data is used to inform local program improvements and renewal decisions, and provides the data reporting as required to First 5 California. The regional common data system is now being used by six southern California First 5 commissions and is expected to ensure joint planning in relation to developing common data for evaluation and communicating regional results.

Placer County

First 5 Placer County believes all children are its children, and works to create an environment that supports its children and their families in reaching their full potential. In order to achieve this vision, First 5 Placer focuses on early childhood development and supports and builds on existing collaborative efforts by bringing together diverse perspectives, communities, and resources to assure comprehensive, integrated strategies, and holistic, family-centered, sustainable approaches.

First 5 Placer began to implement a Strengthening Families and Community Protective Factor framework with its funded programs as of January 2011. The approach is described in the First 5 Placer Strategic Plan 2011-16. In FY 2013-14, First 5 Placer provided significant contributions toward strengthening families with children ages o to 5 and built community capacity to support parents, family members, and service providers. The funded programs' self-assessment, addressed through the results of an end-year organizational survey, indicated that agencies offer a range of services that support positive change across the protective factors, including strategies that support both family and community strengthening.

During FY 2013–14, one of the most significant accomplishments of First 5 Placer was the planning for and development of a children's early trauma treatment center. Placer County Health and Human Services Children's System of Care, in collaboration with Sacramento County, developed agreements for a shared, regional center for children and families to provide early care and education, including a range of wrapround and therapeutic services needed for children ages 3 to 5 years who have experienced trauma. The center will be operated by Children's Receiving Home of Sacramento (CRH) through a contract with the County of Placer.

Other highlights from the overall evaluation findings for FY 2013–14 indicate that through First 5 Placer investments:

- Parents increased their individual and family social connections; improved their knowledge of and connections to community resources; and enhanced their resilience.
- Parents improved their knowledge of parenting and child development, and their ability to nurture and support their children's development.
- Family and community strengthening messages were used in active community education.
- Service networks and systems were developed, used, and strengthened.
- Families and stakeholders
 were offered opportunities for
 participation in strengthening their
 community.

Plumas County

In FY 2013–14, First 5 Plumas County focused its resources on sustaining its ongoing, intensive home visitation for pregnant women and children through age 5. The program is modeled after the Healthy Families America model of home visitation. Desired outcomes include greater access to health and dental care, improved parenting skills, improved family literacy, father involvement, and creating home environments that are supportive of optimal child development.

In FY 2013–14, four home visiting programs worked toward shared outcomes, gathered information on standardized instruments to measure

changes in family functioning and health access, and used a single integrated database to record clients and services. First 5 Plumas developed Memoranda of Understanding between the agencies operating the Home Visiting Program, and created a common consent form which allowed for sharing information across programs to better serve clients. In its second year of operation, the program served 82 families in ongoing home visitation, conducted 1,244 home visits, and met its desired goals for improved health access and family functioning. In FY 2013–14, First 5 Plumas invested \$150,000 in the home visitation initiative.

Other accomplishments in FY 2013–14 included:

- Creation of a strong collaborative relationship with the California Department of Social Services, Child Welfare Services unit
- Collaboration with health department staff to ensure that children in foster care are assessed with the Ages and Stages Questionnaires® and that appropriate follow up takes place
- Shared training opportunities across programs so that staff from the various agencies had opportunities to share experiences and insights and learn new home visiting skills

Riverside County

Riverside County is invested in a range of early care and education and health services, with the goal of helping to ensure children's success in school and throughout their lives. The range of First 5 Riverside County investments includes promotion of parent and caregiver education to assist early learning everyday practices, increased access to quality child care and preschool services, early care and education workforce development; and improved quality health care services for asthma, breastfeeding support home visitation services, health access, nutrition and physical activity, oral health, special needs child care, and targeted home visitations for high-risk families.

During FY 2013–14, one of the most significant accomplishments of First 5 Riverside was the establishment of the University of California, Riverside (UCR), School of Medicine Pediatric Residency Program. With a funding investment of \$5,000,000 over four years, this program is designed to address the drastic shortage of pediatricians in Riverside County and help support building new primary care pediatric capacity in Riverside County. This program has four objectives: establish a primary and ambulatory care-oriented pediatrics residency at the UCR School of Medicine's Riverside County Affiliates; develop a health-outcomes research program to assist pediatric residents and program faculty in developing projects to assess the impact of public health interventions on children o through 5 years of age, including but not limited to First 5 initiatives now and in the future to measure their impact on our community; launch an innovative loan-to-scholarship program that provides an additional incentive for students who receive their medical doctorate at UCR School of Medicine to remain in Riverside County and practice primary care pediatrics; and develop and implement a prevention-oriented residency training curriculum that also incorporates the special health care needs of the patient population consisting of children o through 5 years of age, acceptable to the Accreditation Council for Graduate Medical Education.

Other highlights during FY 2013–14 included:

- A total of 991 children accessed quality child care services.
- More than 1,900 children were screened for asthma-related symptoms, and 159 environmental assessments were completed in child care facilities.
- Breastfeeding support services were delivered to over 10,000 mothers through the Helpline and Home Visitation Services.
- A total of 571 children were enrolled in health insurance.
- More than 15,000 children accessed oral health screenings, and 1,600

- received treatment with First 5 Riverside funds.
- More than 6,000 children received mental health screenings, and almost half of these children received treatment services.

Sacramento County

First 5 Sacramento County served approximately 70,130 children, parents, and providers in Sacramento County through the work of 38 contractors. Highlights included:

- E2 ective Parenting: The Birth & Beyond Program provided parent education, crisis intervention, and home visitation services through nine Family Resource Centers throughout Sacramento County. During FY 2013-14, the program served over 13,000 individuals (children and caregivers). A recently released cumulative study of referrals to Child Protective Services (CPS) for 1,943 families receiving home visitation for at least three months demonstrated that the rates of CPS reporting pre-, during, and post-program declined for both a cohort of families with prior CPS history and for families without prior referrals to CPS. Altogether, 48 percent of families enrolled without CPS history increased to 84 percent without referrals to CPS post-program. Among the 52 percent of Birth & Beyond families with a CPS history, only 16 percent had new referrals post program.
- Reduction of the Number of
 Disproportionate African American
 Child Deaths: First 5 Sacramento allocated \$3.4 million over an 18-month period focused on the reduction of perinatal condition deaths, infant sleep-related deaths, and child abuse and neglect homicides in the African American community. Efforts included educational campaigns and cultural broker programs to provide outreach, education, and support services. The efforts also included the opening of a new Family Resource Center.

- School Readiness: First 5 Sacramento is actively engaged in statewide Quality Rating and Improvement System efforts and funds preschool, playgroups, parent engagement, kindergarten transition programs, and comprehensive screenings in 37 highneeds school communities. During the 2013–14 school year, Sacramento school readiness programs served over 10,300 individuals.
- Oral Health: First 5 Sacramento continues to support five children's dental centers that offer free or low-cost dental services. Combined. the five centers served 2,200 children. Sacramento also funds the Smile Keepers Mobile Dental Van that provided dental screenings and fluoride varnishes to more than 7,400 children at schools and community events. Additionally, First 5 Sacramento provided leadership and staff support for the Medi-Cal Dental Advisory Committee. Efforts involved working with legislators, the Department of Health Care Services, and multiple community partners to implement policy and systems changes necessary to improve dental care for children with Medi-Cal.
- Media E2 orts: As of June 30, 2014, First 5 Sacramento had 2,264 followers on Facebook, 1,360 on Twitter, and 387 following 20 Pinterest boards. A two-month, multi-media campaign highlighting the Family Resource Centers generated a total of 1,436,550 impressions and 38,898 targeted text replies. Additionally, First 5 Sacramento took the lead in coordinating two regional media efforts: a 12-page English and Spanish publication titled "Bringing Home Baby," focusing on prenatal through the first year of a child's life; and a television campaign with Univision focusing on literacy, oral health, and safe sleeping.

San Benito County

Through its investments, the goal of First 5 San Benito County is to ensure that San Benito County's children

thrive and reach their full potential at home, in school, in the community, and throughout life. To support its goal, First 5 San Benito has intentionally shifted from funding grants for individual programs to investing in initiatives that address multiple priority areas through coordinated systems and services. This funding strategy has broadened the reach and impact of First 5 San Benito's investments.

During FY 2013-14, with a funding investment of \$260,000 and support from the David and Lucile Packard Foundation, First 5 San Benito implemented the Family Wellness Program, a countywide strategy that provides parent education and playgroup services for children ages o to 5 years and their families. Additionally, the agency established a Family Wellness Program network consisting of representatives from eight partnering sites, including schools and early education centers serving children and families. Services targeted families from priority populations such as rural, low income, children with special needs, migrant, and families with limited-English proficiency. The Family Wellness Program framework is aligned with emerging research and uses an approach to strengthening families by building evidence-based, protective factors around the youngest children through supporting their families. Research demonstrates that these protective factors can form a buffer of sorts around the family, which can reduce the incidence of child abuse, neglect, and poor developmental and academic outcomes. Protective factors related to adult family members include: 1) parental resilience; 2) an array of social connections; 3) adequate knowledge of parent and child development; 4) concrete support in times of need; and 5) access to quality early learning opportunities.

Parents who participated in parenting programs showed a statistically significant increase in the following areas:

 Confidence in helping their children grow and develop

- Family support with parents reporting that they could easily find someone to talk to when they needed advice about raising their children
- Knowledge of behaviors to use when talking with their children. A significant increase in parents who reported bending down to eye level when they talked to their children.
- At-home early literacy activities between the group at the beginning and end of the program. For example, half of parents reported having a routine for looking at books with their children in fall 2013, increasing to 61 percent in the spring of 2014. Children asked to look at books 3.9 times during the week prior to the survey in fall 2013. This increased to 4.4 times in spring 2014; the number of minutes they spent looking at books together rose from 18 minutes in fall 2013 to 21 minutes in the spring, a statistically significant increase.

San Bernardino County

First 5 San Bernardino County aims to promote, support, and enhance the health and early development of children prenatal through age five and their families and communities. This is accomplished through investments in the areas of health, family support, and early education, as well as support for systems improvement and capacity building efforts in the County of San Bernardino.

FY 2013–14 yielded many notable accomplishments and positive outcomes for our youngest residents and their families. One of the most significant investments was a comprehensive parenting education program utilizing the Nurturing Parenting curriculum. With a \$2.34 million investment, nine contracted agencies were able to provide 1,460 parents with education that evidence shows significantly decreases the likelihood of child maltreatment. Data collected before and after demonstrated that significant decreases in risk were achieved by participants.

Other highlights in FY 2013–14 included:

- A comprehensive year-round preschool experience for 1,146 children
- Oral health treatment and care coordination for 496 children
- Support for eight communities at various stages of obtaining or maintaining their designation by the Department of Public Health as a "healthy community"

San Diego County

The goal of First 5 San Diego County is that all children ages o through 5 are healthy, loved, nurtured, and enter school as active learners. First 5 San Diego invests in programs that strengthen relationships essential for the healthy development of young children in four key areas: health, learning, family, and community.

During FY 2013–14, one of the most significant accomplishments of First 5 San Diego was the launch of First 5 First Steps, its new, targeted home visiting initiative serving pregnant and parenting teens, as well as low-income, military, immigrant, and refugee families across the county. Starting in October of 2013, this initiative provided intensive home visitation services to more than 300 families beginning prenatally or within the first few weeks of a child's life.

Some additional highlights during FY 2013–14 included:

- A total of 90,000 children, parents, and caregivers were served by First 5 San Diego programs.
- A total of 20,102 children were screened for a developmental delay, and 6,477 received treatment for a developmental concern.
- A total of 6,235 children were screened for a behavioral delay, and 3,260 were treated for a behavioral concern.
- A total of 13,687 children received quality preschool in a school-based, community-based, or family child care setting.
- A total of 17,210 children and 4,344 pregnant women received dental exams.

- Care coordination services were given to 23,162 children and caregivers, and 5,269 parents participated in parent education services.
- The Good Start community awareness campaign achieved more than 70.5 million gross impressions.
- First 5 San Diego sponsored or participated in community events that reached nearly 141,000 San Diegans.

San Francisco

In FY 2013–14, First 5 San Francisco County invested \$32 million to ensure that all San Francisco's children will thrive in supportive, nurturing, and loving families and communities. As a result of these investments, approximately 20,000 residents were served through 200 community programs, including 147 preschools and 25 family resource centers.

First 5 San Francisco's Preschool for All (PFA) Initiative, jointly funded through San Francisco City's Public **Enrichment Funds and Proposition** 10 revenue, continued to expand in 2013-14 with the creation of 216 new preschool slots and a total of 3,445 four-year-olds served in 247 classrooms. Nearly three out of every four participants were low-income children whose preschool enrollment would have been vulnerable to loss or disruption without the PFA tuition enhancements. Evidence-based assessment tools show that nearly 90 percent of assessed PFA classrooms are meeting cut-off scores (five out of seven) for high-quality environments and social-emotional support of children; 97 percent of surveyed parents report that PFA has helped prepare their children for kindergarten.

The following provides additional highlights from funded family support, health, and early child development initiatives:

Approximately 9,000 parents and caregivers were served across the 25 First 5- funded Family Resource Centers; 1,045 participated in a curriculum-based parenting class



series and received before and after assessments of parenting practices. Results showed notable skill improvements for 82 percent of parents who had been above the problematic threshold at the start of the class series.

- First 5 San Francisco has joined the national Quality Rating Improvement System Race to the Top Initiative. In FY 2013–14, an independent consultant rated 130 PFA preschools. All sites received a score of three or higher on the five-tiered rating system; almost half, 41 percent, scored at the highest tiers four and five.
- In 2014 San Francisco became a Help Me Grow Affiliate County. Support for Families Family Resource Center oversees First 5 San Francisco's early identification and intervention system through a phone line; parent education, advocacy, and support; provider training; and site-based technical assistance. During FY 2013-14, information and referral was provided to nearly 1,000 parents, caregivers, and professionals with concerns or questions about a child's development. Over 500 providers were trained on child development, Ages and Stages Questionnaires®, and partnering with families. More in-depth and on-site technical assistance was given to 24 preschools.

Through contributions from public health nurse consultants, mental health consultants, trained early childhood education providers, and trained FRC staff, a total of 9,091 health and developmental screenings were conducted for children ages 0 to 5.



San Joaquin County

Through its investments, the goal of First 5 San Joaquin County is to ensure that all San Joaquin County children will thrive in supportive, nurturing, and loving environments; enter school healthy and ready to learn; and become productive, well-adjusted members of society.

During FY 2013–14, one of the most significant accomplishments of First 5 San Joaquin was the investment in the Preschool Initiative. With a funding investment of \$4.8 million, this initiative provided preschool spaces with comprehensive services for 886 3- and 4-year-olds. Seven school districts and community-based organizations received funding under this initiative. Data from the 2014 Preschool Newsletter demonstrates that programs serve diverse populations living in high priority communities with Academic Performance Index scores of 1-5 and selected school attendance areas designated eligible

under Title I of the Federal Education Act to improve academic achievement for the disadvantaged. First 5 San Joaquin County preschools provide services to children with high needs, including those who are homeless, living in poverty, those with severe behavior problems, mental health issues, and special needs. Over half the children who participated were dual language learners. To respond to the needs of children and families, First 5 San Joaquin preschool programs provide a range of services including:

- Parent engagement activities
- Developmental screening
- Behavioral specialists and intervention services
- Inclusion programs (collaboration with special education)
- Family support specialists
- Family literacy (Raising a Reader)
- Kindergarten transition programs
- Home visits
- Trainings and staff development opportunities for teachers and staff Additional highlights during FY
 2013–14 included:
- Approximately 16,500 children, parents, and expectant parents received services from First 5 San Joaquin.
- More than 3,000 families received a nutrition and physical activity program in their home, or at their child's preschool or child care.
- Approximately 890 children received vision and hearing screenings.
- Approximately 2,500 children received developmental screenings.
- Approximately 1,250 parents were reached with school readiness "Messages from the Pulpit" as part of the Faith-Based Community Initiative.

San Luis Obispo County

Through its investments, the goal of First 5 San Luis Obispo County is to ensure children thrive in nurturing, respectful environments and enter school healthy and ready to learn. First 5 San Luis Obispo allocates funds and advocates for quality programs and services, supporting children prenatal

to age 5, to ensure that every child is healthy and ready to learn in school.

During FY 2013–14, one of the most significant accomplishments of First 5 San Luis Obispo was the conclusion of a three-year community driven planning process, resulting in the expansion of children's oral health services in the central region of the county, the area with the least access to Denti-Cal provider dental homes. The process involved a collaborative effort among both public and private agencies including the San Luis Obispo County Children's Oral Health Coalition, the San Luis Obispo County Public Health Department (Oral Health Coordinator), the Partnership for the Children of San Luis Obispo County (Tolosa Children's Dental Center), the San Luis Obispo Noor Foundation, and First 5 San Luis Obispo. With a two-year funding investment of \$107,640 from First 5 San Luis Obispo, Tolosa Children's Dental Center will provide 368 annual preventive care appointments for approximately 175 unique children ages

First 5 San Luis Obispo also accomplished the following during FY 2013–14:

- Expanded peer breastfeeding support for lactating women through our Babes At Breast Education and Support (BABES) program, a collaborative project with the local Women, Infants, and Children program
- Sponsored the 2014 Children's Oral Health Summit and supported the Children's Oral Health Coalition's Strategic Planning Review by hosting a number of Oral Health Forums with the goal of advancing children's oral health in the county
- Funded a television and web media campaign promoting April as Child/ Child Abuse Prevention Month and the Children's Bill of Rights for San Luis Obispo County
- Advocated for and received a proclamation from the San Luis Obispo City
 County for the local Children's Bill of
 Rights, an aspirational framework
 spearheaded by First 5 San Luis
 Obispo as part of its strategic plan

- Celebrated the groundbreaking of the Uptown Family Park in Paso Robles, next to the school readiness site, on land that was purchased by First 5 San Luis Obispo
- Commemorated the 15th Anniversary of Proposition 10 as the San Luis Obispo County Board of Supervisors adopted a resolution marking the milestone
- Broadened First 5 San Luis Obispo advocacy efforts with a presence at a dozen farmers' markets, festivals, fairs, and other community events

San Mateo County

During FY 2013-14, First 5 San Mateo County maintained its multifaceted investments in programs supporting all aspects of a child's early years, including early learning, child health and development, family support and engagement, and communications and systems change. Supported by \$8.4 million in community investments, its funded partners provided 26,980 services to children, parents, and providers, and distributed 4,719 Kits for New Parents.

During the past fiscal year, one of the most significant accomplishments of First 5 San Mateo was driving a systems-level Children's Oral Health Workgroup. Along with partners including local health care districts, dental societies, and public dental clinics, this initiative examined oral health access and utilization data for children with public health insurance, one of the largest and most persistent inequities in the county. Only 45 percent of children ages 1 to 5 on Denti-Cal have visited a dentist in the past year, compared with 77 percent of all children ages 1 to 5. Parents of children on Denti-Cal cite long wait lists and a lack of providers as the primary reasons they are unable to take their children to the dentist. Based on this data, the Children's Oral Health Workgroup is embarking on a strategic planning process to further this work, with the goals of increasing the utilization rates for preventive dental care for young children on public insurance as well as increasing the capacity of dental

providers to accept more patients on Medi-Cal.

Other highlights from FY 2013–14 included:

- Analysis of First 5 San Mateo's 2013
 Parent Story Survey. This representative survey of parents with children ages 0 to 8 yielded these key findings:
 - High rates of parents reporting a sense of social isolation and challenges developing a parenting support network. This was particularly salient for mothers of infants and toddlers who did not have family nearby.
 - Low-income parents were much more likely than middle- to high-income parents to report relying on professionals and service systems for parenting support.
- Continued involvement in The Big Lift, a local collective impact initiative designed to improve rates of third-grade reading proficiency through four pillars of investment and community engagement:
 - High quality preschool for 3- and 4-year-olds
 - Inspiring summers for children in preschool through third grade
 - Reducing chronic absenteeism
 - Family engagement in their children's education
- Strategic planning process for 2015–
 20, resulting in a commitment to a
 more intentional focus on community
 partnerships that result in sustainable
 and meaningful improvements in
 policy and systems supporting the
 well-being of children ages 0 to 5 and
 their families

Santa Barbara County

Through its investments, the goal of First 5 Santa Barbara County is to devote its funding and organizational capacity in the following two primary areas:

- Family Support:
 - Parent education and support
 - Intensive case management, information, and referral/linkages to services with follow up
 - Child and maternal health access

- Early Care and Education:
 - Improving the quality of existing child care and preschool services
 - Creating new quality child care and preschool services and expanding access

First 5 Santa Barbara also has a focus on three secondary areas: capacity building and systems change; communications and health insurance; and access for children.

During FY 2013–14, one of the most significant accomplishments of First 5 Santa Barbara was its investment in family support. With a funding investment of \$691,000, this initiative, through its network of family resource centers, provides intensive case management, and resource and referral services as well as screenings of children for developmental delays and health issues. Of particular importance is this initiative's partnership with the county's Child Welfare Services and other agencies on reducing child abuse through the Differential Response/Front Porch Project. This effort has resulted in a dramatic decrease in the percent of Differential Response clients with child abuse referrals at one year after intake. In FY 2008-09, the county rate was 30 percent. In FY 2012–13, the last year with complete data, the rate had decreased to just 3 percent. The result is that children in Santa Barbara County are growing up in safer home environments as a result of First 5 Santa Barbara services and the partnerships with Child Welfare Services (lead agency), Community Action Commission, and Child Abuse Listening Mediation is embarking on a strategic planning process to further this work.

Other highlights for FY 2013–14 included:

- Twenty-four percent of licensed child care centers within the county are now accredited by the National Association for the Education of Young Children.
- All parents who had at least two assessments in the Family Development Matrix (FDM) had positively statistically significant improvements in all core FDM

- indicator areas. These included nurturing, parenting skills, family communications skills, basic needs, child health insurance, community resource knowledge, as well as other areas.
- Parents participating in the family support initiative report that their access to services went from 54.7 percent at "Safe/Self-Sufficient" after the first assessment to 88 percent after the second assessment.
- There was a statistically significant improvement in enrollment of children ages 0 to 5 in health insurance, from 82 percent at intake to 96 percent at follow-up (p<.001), and dental insurance, from 81 percent to 96 percent (X2 (p<.001).

Santa Clara

The goals of First 5 Santa Clara
County are to ensure that children are
born healthy and experience optimal
health and development; families provide safe, stable, loving, and stimulating
homes; children enter school fully
prepared to succeed academically, emotionally, and socially; neighborhoods and
communities are places where children
are safe, neighbors are connected, and
all cultures are respected; and systems
are responsive to the needs of children
and families.

During FY 2013–14, one of the most significant accomplishments of First 5 Santa Clara was progress made on the Universal Developmental Screening Project. First 5 invested a total of \$593,402 in the Project last fiscal year,



with \$120,065 of that total leveraged through county mental health department funding. First 5 leveraged the longstanding relationships with the leadership of county agencies and the Board of Supervisors to move toward the goal of Universal Developmental Screening. The aim of the Project is to ensure developmental screening with a standardized tool for children birth through age 5 is routinely conducted during well-baby and well-child checks in pediatric clinics and practices throughout Santa Clara County.

Other accomplishments in FY 2013–14 included:

- Development of a Collaborative Cross Systems Governance Structure. The Systems Workgroup focuses on system elements of this project, including policy enactment, integrating screening information with the County's Electronic Health Record system, and dissemination of information.
- Implementation of a Universal Developmental Screening pilot at three county pediatric clinics
- Integration of prenatal screening planning that uses a standardized screening tool into the Universal Developmental Screening project
- Screening of 5,336 children through three county pediatric clinics since January 2013. Approximately five percent of children screened showed some type of developmental or behavioral concern and were referred to the Early Start Program and/or the KidConnections Network of Providers.
- Investment in Gardner Family Health Network to implement computer-assisted screening at four pediatric health clinics. The number of children screened was 2,701; of those screened approximately 10 percent showed some type of developmental or behavioral concern and were referred to KidConnections Network of Providers for additional services.
- Approval of the use of the Ages and Stages Questionnaires® iPad application in the Santa Clara Valley Health &

- Hospital System by the County Chief Information Security Officer in June of 2014.
- Production of short video clips to accompany selected ASQ questions.
 The video clips will help eliminate the need for the time-intensive activity testing, improve efficiency, and further build language capacity and the option for caregivers to complete the ASQ independently of staff support.

Other significant highlights during FY 2013–14 included First 5 Santa Clara's investments in and full implementation of:

- A Health and Wellness Initiative
- An Early Learning Initiative
- Race to the Top Early Learning Challenge Grant
- Comprehensive Approaches to Raising Educational Standards Plus
- Child Signature Program 1 and 2

Santa Cruz

First 5 Santa Cruz County's mission is to help children succeed in school and in life by investing in their health, early learning, and family support. Through these investments, First 5 Santa Cruz helps ensure that all children enter school ready to achieve their greatest potential.

In FY 2013–14, one of First 5 Santa Cruz's most significant accomplishments was the ongoing implementation and success of its SEEDS of Early Literacy professional development program and the related Santa Cruz County Reading Corps. Through an investment of approximately \$451,000, First 5 Santa Cruz served 50 early educators, 12 Reading Corps tutors, and more than 550 children. The program saw an increase in the number of early education settings that provide high-quality support for language and literacy, as well as demonstrable gains in the preliteracy skills of children. Over the course of the program year, the percentage of participating classrooms demonstrating high-quality support for language and literacy increased from 18 percent to 100 percent.

In addition, the percentage of children at or above targets for letter naming in English (one of the key predictors of later reading success) increased from 20 percent to 60 percent for primarily English-speaking children and from 6 percent to 41 percent for primarily Spanish-speaking children.

Other key accomplishments in the past year included:

- First 5 Santa Cruz led a community effort to save the local Healthy Kids health insurance program. First 5 Santa Cruz convened community partners, rallied renewed support for the program, and developed a threeyear sustainability plan.
- Braiding Race to the Top Early Learning Challenge Grant and First 5 California Child Signature Program funding, First 5 coordinated the ongoing implementation of a local Quality Rating and Improvement System in Santa Cruz County, helping support and raise the quality of early care and education by providing professional development, assessment, rating, coaching, and technical assistance to 40 early care and education sites.
- Integrating local First 5 and Early and Periodic Screening, Diagnosis, and Treatment resources, First 5 Santa Cruz helped decrease the risk of child abuse and neglect by families referred to the Child Welfare System. More than 70 percent of participating families reduced their risk over the course of the program year. In addition, program participants that engaged in Triple P Positive Parenting Program services reported significant improvements in their parenting practices, their children's behaviors, and their levels of stress and anxiety.

Shasta County

Through its investments, First 5 Shasta County's vision is that all Shasta County young children are ensured optimal early development and are ready to enter school. First 5 Shasta uses its adopted strategic framework "Pathway to Children Ready for School and Succeeding at Third Grade" and five selected Pathway Goals to guide its investment in early childhood. These goals include: Healthy, Well-timed Births; Health and Development on Track; Supported and Supportive Families; High-Quality Child Care and Early Education; and Continuity in Early Childhood Experiences.

During FY 2013–14, one of First 5 Shasta's most significant accomplishments was the development and implementation of the county's first kindergarten readiness assessment, the Kindergarten Readiness Snapshot (KRS). Building a new partnership with the Shasta County Office of Education and a funding investment of approximately \$20,000 ultimately provided teachers with a guick and easy-to-use comprehensive assessment tool and provided the county with valuable school readiness data. Over 900 kindergarteners were assessed throughout the county. Beyond the creation of an assessment and the gathering of countywide kindergarten readiness data, this project has produced systems change, including:

- Alignment of pre-K and kindergarten curricula
- Countywide sharing of data (KRS results are linked to student information data and results from other countywide assessments)
- A countywide definition of kindergarten readiness (California Department of Education Preschool Learning Foundations at 60 months)

This year, the KRS has been turned into an application that automatically generates custom reports for teachers and parents.

Other highlights during FY 2013–14 included:

- Distribution of 19,163 children's books through a wide range of community partners and at a variety of community events
- Preschool Parent Partners Program: Funded parent partners at preschool sites to address family basic needs, provide Triple P Positive Parenting Program elements to address problem behaviors in children,

- improve family connections to preschool sites, and improve preschool attendance
- Shasta College: Partnered with the local community college to offer a community education course for child care providers on incorporating Triple P into their care settings and how to link families to Triple P services in Shasta County
- Bridges to Success: This program provides behavior management support and other evidence-based mental health services to parents and care providers of children at risk of being expelled from their preschool or child care settings.
- Bright Futures: This program includes an innovative English-as-a-Second Language (ESL) instruction component as a part of a broader parent education and support program. Through the loan of computers loaded with Rosetta Stone software, the program allows parents to learn English at times that are convenient for them. Having the computer in the home has led to spouses, children, and neighbors also accessing the ESL software to improve their language skills. As a result, participants have been able to better advocate for their children and to access new employment opportunities.

Sierra County

First 5 Sierra County piloted a new program during 2012–13 called Music Together. Due to its success, Music Together was added as an ongoing program in 2013–14, making it available to over 30 Sierra County children ages 2 to 5. Sierra County Health and Human Services provided a licensed marriage and family counselor with background working with preschoolers and a certificate of instruction from Music Together to conduct weekly music activities at a classroom in the Loyalton Elementary Public School. First 5 Sierra provided public relations and curriculum materials. The intent of the program is to create family interaction around a sophisticated and effective instructional

program in basic music. An ancillary but significant impact of the program is to immerse a qualified family counselor in an ongoing activity involving 3- to 5-year-old children, their parents, and the staff of the county's largest childcare center.

Music Together is a nationally recognized music training program for children that requires parent involvement, provides excellent take home materials and involves students in motion, singing, memorization, and musical basics like rhythm, harmony, melody and dance. The program is research based and has excellent evidence supporting outcomes consistent with First 5 Sierra's Strategic Plan.

The classroom is provided by Sierra Plumas Joint Unified School District free of charge, indicative of a mutual goal of increasing children's exposure to music appreciation and participation.

It was fortuitous that a member of Sierra County's Mental Health counseling team had background in Music Together and that a partnership could be forged that would support a great music program and place a counselor interactively with families potentially in need of special education services and behavioral intervention.

Three weekly sessions were offered during the school year. Children from three child care/preschool centers, children from the public school special education preschool, and children who attended with their parents were included in an annual average enrollment of more than 30 children.

Siskiyou County

First 5 Siskiyou County continues to invest in programs and services to improve lives for the youngest citizens of its frontier county. Nearly 80 percent of children from birth to age 5 and their families benefit from five Primary Initiatives:

 Oral Health Education and Prevention: A total of 436 children received oral health education, screening and as-needed treatment in 19 preschool events. In addition, 363 Oral Health Kits were distributed to

- 16 physicians to provide to pregnant mothers. These services resulted in the continued decreased rate of urgent care needs of preschoolers by 50 percent, as well as the acquisition of extensive knowledge about the importance of oral health by prenatal mothers.
- Early Literacy Education: In an effort to advocate for the equal access to higher levels of education through the building of home libraries (as proven to be an effective mechanism by various research studies), First 5 Siskiyou championed literacy-promotion education by distributing over 10,000 quality children's books, and facilitating the annual Read Across Siskiyou (RAS), which jump-starts the literacy promotion education. Over 40 RAS events occurred, with guest readers such as the Board of Supervisors and other elected officials, the city manager, early childhood advocates, and community leaders. Each year, these efforts provide children with equal accessibility with early education through books and daily reading with caregivers and parents.
- **Provider Capacity Building Trainings:** First 5 further aims to assure the well-being of children building the capacity of service providers through coordination of free, countywide, high-quality professional development trainings. This year, a total of more than 400 individuals attended nine countywide trainings. Of these participants, child-centered institutions like Court Appointed Special Advocates, Child Protective Services, early childhood educators, and Foster Family Agencies were represented. The merits of these trainings are not only manifested by the consistently high number of participants, but more importantly, attendees are vocal about the trainings' impact in showcasing the importance of empathy in dealing with their clients and increased knowledge about child development, the impact of trauma, and more.

- Parenting Education Classes: A total of 179 sessions of evidence-based parenting education series and workshops were offered throughout Siskiyou County in partnership with the Siskiyou Family Resource Centers, Community Services Council, and Collage of the Siskiyou Foster Family Program.
- Family Resource Centers (FRCs): Continued funding of the 10 FRCs assures First 5 services can be provided to the most rural of 5,000 square miles of this frontier county. The FRCs offer over 14,000 hours of drop-in services, including resource and referral, application assistance, life skills, nutrition and physical activity education and promotion, children's play groups, volunteer opportunities, and other family strengthening supports. More than 140 support groups and 119 family fun events and celebrations were offered during the current fiscal year.
- Comprehensive Approaches to Raising Educational Standards Plus: First 5 Siskiyou continues to collaborate with First 5 California to offer this important resource to early care and education providers throughout Siskiyou County. This resource has improved the quality of educational opportunities for the early childhood community.

Solano County

Through its investments, the mission of First 5 Solano County is to be a leader that fosters and sustains effective programs and partnerships with the community to promote, support, and improve the lives of young children, their families, and their community. Through its strategic framework, First 5 Solano funds services in the priority areas of: Health and Well Being; Early Learning and Development; Family Support and Parent Education; and First 5 Futures. First 5 Solano values these key criteria: evidence-based, focus on high risk/ high need, coordination, collaboration, leveraging, and increasing access.

During FY 2013–14, one of the most significant accomplishments of First 5 Solano was increasing attendance at pre-kindergarten academies, which doubled from the previous year. With an investment of \$160,000, nine providers served 426 children at 20 schools and child care sites. Nearly 3 out of 4 (73 percent) children had no prior pre-school experience. Overall, children gained in all components of the social-emotional and cognitive scales as measured by the Kindergarten Student Entrance Profile (KSEP). Pre-kindergarten Academies also included enrichment activities for children, such as, art and science, and parent engagement to increase familiarity and participation of the families in the school and classroom.

In FY 2013–14, First 5 Solano also accomplished the following:

- Became a Help Me Grow Affiliate County
- Collectively partnered with the community to participate in a Solano County Children and Families Policy Forum with elected officials and representatives from Congress, the State Assembly, Solano County Board of Supervisors, and local cities and school boards
- Screened nearly 1,000 children for developmental and behavioral delays
- Enrolled 611 children and 271 pregnant women in health insurance
- Assisted 74 homeless families with transitional housing funding and services to secure permanent housing.
 Nine out of ten (89 percent) of those assisted maintained their housing for at least a three-month period.
- Assessed 2,000 high-risk and/or at-risk families utilizing the Solano Family Development Matrix tool.
 A total of 378 families throughout Solano County were provided intensive case management services, with 94 percent of participants increasing their scores in the Family Functioning domain of the tool.

Sonoma County

One key First 5 Sonoma County 2011-20 Strategic Plan goal is to ensure that parents are supported and nurturing through the delivery of evidence-based programs proven to strengthen parenting capacity and family literacy skills. Programs in these two priorities include Nurse Family Partnership intensive home visiting; Triple P Positive Parenting Program training for providers working with parents of young children; Reach Out and Read within pediatric well-child visits at six federally qualified health centers; weekly Pasitos playgroups, and the AVANCE Parent-Child Education Program (PCEP).

During FY 2013–14, one of First 5 Sonoma's most significant accomplishments was the expansion of AVANCE PCEP to 10 classes in three high-need communities in Petaluma, Santa Rosa, and Sonoma Valley. With a funding investment of \$655,000, this program provided weekly, three-hour classes for 248 low-income, Spanish-speaking parents and their 272 children, birth to age three. Eight-two percent of these parents and 247 children completed the full nine-month program. Each community's graduation event celebrated this achievement with parent speeches and singing, and participant children received their own "Ticket to College," which promised them admission to Santa Rosa Junior College following their high school graduation. Over 90 percent of parents increased their knowledge of child development, parenting skills, and community resources, and learned to understand their role as their children's first and most important teachers. Ninety-five percent of parents reported reading to their children at least three times per week, and 88 percent plan to continue their own education. AVANCE National has recognized Sonoma County's program for meeting a standard of excellence in implementing the evidence-based model with fidelity. AVANCE PCEP has also achieved a Tier 1 designation in Sonoma County's Portfolio of Model Upstream Investments. Upstream is a local initiative emphasizing evidence-based prevention and early

intervention to achieve better outcomes for children and families and to reduce the community's "downstream" costs.

Additional First 5 Sonoma highlights from FY 2013–14 included:

- A survey of First 5 grantees and community members showed that grantees are overwhelmingly comfortable reaching out to First 5 staff with problems or questions, view staff as responsive, and feel that First 5 has treated their organizations fairly. These are three key predictors of strong funder-grantee relationships as identified by the Center for Effective Philanthropy.
- Sonoma County's Cradle to Career collective impact initiative selected early childhood as its first-year focus for action. This broad community coalition will now join First 5 over the next year to identify and implement strategies to ensure that every child enters kindergarten ready to succeed.
- First 5's leadership and Santa
 Rosa Chamber of Commerce's
 relationships with the private sector
 have resulted in the creation of a
 Funder's Roundtable to better align
 local business and foundation grantmaking around shared goals of early
 childhood, school readiness, and
 third-grade reading proficiency.

Stanislaus County

Through its investments in family support, child safety, health, and early learning, First 5 Stanislaus County promotes the development and well-being of children ages 0 to 5 and their families.

During FY 2013–14, one of the most significant accomplishments of First 5 Stanislaus was the operation of the Family Resource Center/Differential Response Program. With a funding investment of \$2,059,357 from First 5 Stanislaus and the Community Services Agency, this program provides intensive family support and child protection services to families when a child maltreatment report is filed. Since the start of the program in 2005, the rate of recurrence of additional maltreatment reports

within six months of the first report has remained below the rates existing prior to the program's initiation. And in two quarters and for the first time, the rate of recurrence of additional maltreatment reports within six months of the first report have been below the national goal of 5.4 percent.

Other highlights from FY 2013–14 included:

- Parents of 8,974 children received family support services through countywide Family Resource Centers and other programs.
- Caregivers of 1,636 children ages 0 to 5 were screened for depression and, of those, 387 children ages 0 to 5 had a caregiver referred for mental health services.
- Parents of 2,147 children received more intensive support services focused on improving child abuse factors.
- The parents of 2,592 children attended parenting classes to increase parenting skills and knowledge.
- A total of 418 children ages 0 to 5 and pregnant women who did not have access to health care received medical attention through an interim health care program.
- A total of 363 pregnant women and children ages o to 5 who did not have health insurance are now enrolled in a health coverage plan.
- A total of 210 infants were born healthy after their mothers participated in a healthy birth program and 90 percent of the moms giving birth (207/230) initiated breastfeeding.
- A total of 1,070 families increased the time spent reading with their children at home after receiving literacy services.
- A total of 127 children participated in the Kindergarten Readiness
 Program at school sites across the county that helped prepare them for kindergarten.
- A total of 1,377 children ages o to 5 were screened for educational developmental issues and 252 were

- referred for further assessment or services.
- The families of 5,902 children have increased knowledge and utilization of community resources.
- Proposition 10 funded programs brought in more than \$3 million from other funding sources during FY 2013–14, increasing the overall level of services for children and families.
- On average, Proposition 10-funded programs collaborate with four or more other Proposition 10-funded programs to decrease duplication and increase effectiveness of services.

Sutter County

Through its investments, the goal of First 5 Sutter County is to provide a comprehensive system of information, programs, and services that support all Sutter County children and families to ensure each child from 0 to 5 years of age is prepared to enter school healthy and ready to learn.

During FY 2013–14, one of First 5 Sutter's most successful programs was providing mobile dental services to the county's children ages o to 5 and pregnant/post-partum women, in response to a clearly defined need for a low/no cost dental provider for Sutter County's children and families. The Sutter Smiles program features a mobile dental clinic capable of providing full-service dentistry, including screening, cleaning, restorative treatment, and dental health education services. With a funding investment of \$172,625, the Sutter Smiles program served 1,711 individual children and provided nearly 10,000 dental procedures. In addition to the services provided inside the mobile dental clinic, 334 oral health assessments were conducted for the county's kindergarten students. A total of 77 percent of the students assessed required early treatment, and 12 percent required urgent care. Sutter Smiles is the result of an Oral Health Initiative approved by First 5 Sutter in January 2004.

Additional highlights during FY 2013–14 included:

- Project SAFE (Smoke-free And Familyfriendly Environment) provided on-site training, materials, and monthly technical support visits over a five-month period to Sutter County pediatric and prenatal providers to improve the efficacy of their efforts to assist pregnant women and family with children ages o to 5 to create a healthy tobacco-free environment for themselves and their children. The trainings incorporated the evidence based "Ask, Advise, Refer" protocol, which emphasized the following critical points: 1) medical providers and staff are in a respected and persuasive position to remind patients that tobacco dependence is a chronic health condition; and 2) multiple interventions by a clinician and/or front-line medical staff has been shown to contribute to success in tobacco cessation. Program evaluation demonstrates that 100 percent of respondents agree that Project SAFE increased the frequency with which staff talk to patients about tobacco use, and 70 percent of respondents agree their office will integrate to sustain routine cessation into patient visits.
- Music Making, Magic and Me! was a six-week therapeutic activity for children ages o to 5 with special needs and their parents and caregivers.
 The music therapist used musical experiences to create changes for children with special needs. The Skill Set Assessment demonstrated an average 13 percent functional behavior gain for the enrolled children.

Tehama County

First 5 Tehama County focuses resources on ensuring children are ready for school when they enter kindergarten. Three funded programs work toward this goal. The School Readiness Project, a multi-faceted program including home visits and group activities, is implemented in four school districts in the county. The Mobile Dental Clinic provides oral health care to pregnant women and

children ages1 through 5, targeting the school districts served by the School Readiness Project. The third program, the West Street Family Resource Center, serves low-income, primarily Spanish-speaking families in the community of Corning.

During FY 2013–14, with an investment of more than \$ 300,000, the School Readiness Project:

- Provided over 1,500 home visits and 295 case management services, screened 304 children for kindergarten readiness or developmental milestones, and identified 111 3- and 4-year-old children in need of formal early learning opportunities and referred them to preschool programs
- Conducted 73 playgroups, 31
 KinderCamp sessions, and four
 "READY! for Kindergarten" sessions
 for parents
- Improved health access and family literacy practices in families receiving home visitation: 98 percent had up-to-date preventive care for their children after six months compared to 73 percent at entry; 81 percent had up-to-date preventive oral health care for their children after six months compared to 58 percent at entry. Ninety-three percent of the families read to their children at least three times a week after six months compared to 71 percent at entry.

The School Readiness Project expanded into Red Bluff Elementary School District in 2013–14 with funding from the school district. The project uses AmeriCorps members as home visitors, expanding the reach of the program. A complementary, countywide, social marketing effort, "Read, Sing, and Play," encourages all parents to read, sing, and play with their children, and to take them to the doctor and dentist prior to entering school.

Trinity County

Through its investments, the goal of First 5 Trinity County is to improve the lives of children ages 0 to 5 and

their families. The poverty rate for children in Trinity County is 37 percent. Investments in early education and home visitation have provided important opportunities for these children and their families in isolated rural areas of the county.

Funding for FY 2013–14 and its uncertainty resulted in making difficult decisions about priority funding and where limited resources should be spent for the greatest impact. Five programs were funded, for a total \$132,142; of this total, \$62,500 funded School Readiness Programs at seven sites countywide. First 5 Trinity values early education and the School Readiness Program and understands the importance it plays in rural communities. The loss of \$225,000 in funding almost decimated this program.

First 5 Trinity's grantees have continued to provide quality programs for children and families on tight budgets and are highly commended for their work and creative investments.

Other highlights during FY 2013–14 included:

- The Trinity County Office of Education School Readiness Program provided quality early education programs at seven sites throughout the county and served 241 children and parents. Many of these programs are in isolated rural communities that are a three- to four-hour drive from other services.
- The Home Visitation/Welcome Baby program had a target of 15 families and served 35. Of these families, 82 percent were Child Protective Services referrals with a Family Reunification Plan; 64 percent successfully completed their Reunification Plan.
- The Children's Garden reported 1,272 visitors. Preschools, private day care providers, and parents with little ones are regular participants in this outstanding program. Children help plant the garden, follow it to harvest, and "put the garden to bed."

Tulare County

For the year ending June 30, 2014, First 5 Tulare County invested more than \$4.8 million in programs enhancing the health and school readiness of the county's youngest residents. First 5 Tulare has a long-standing commitment to improving children's health, and grants of Proposition 10 tobacco tax funds reflect this.

During the 2013–14 year, children's oral health was an area of significant achievement. More than 9,800 young children were screened and received fluoride varnish applications at sites throughout Tulare County. Those needing care from a dentist were referred for services. Children were seen at preschools, elementary schools, and at community events such as health fairs in both urban and rural communities. Since this initiative launched in 2008, there has been a 300 percent increase in the number of children seen. Program operators continually refine their scheduling practices, which allows them to see more children and to make second visits later in the year to reinforce children's learning from the first visit. Oral health screening and varnish costs for the year were \$141,428, or \$14.35 per child. This modest investment of slightly less than three percent of total program expenditures yielded tremendous benefits.

Other notable achievements during FY 2013–14 included:

- Court-appointed special advocates provided a variety of support services to foster children younger than six years of age, including ensuring they made their well-child visits, were current on vaccinations, and saw a dentist at least once a year. Approximately 320 of the most vulnerable young children benefited from this program.
- With the arrival of a new, highly motivated pediatrician, the Tulare Community Health Clinic implemented the evidence-based Reach Out and Read program to foster a love of reading in their young patients and their parents. A small grant from First 5 Tulare enabled them to purchase

- developmentally and age-appropriate books for children ages 6 months to 5 years.
- The Save the Children Federation produced a 40-minute video, "The Art of Home Visiting," with a grant from First 5 Tulare. The video emphasizes the value of positive early development for children, demonstrates practical home visiting techniques, and shows the Early Steps for School Success curriculum as it is delivered in people's homes.

Tuolumne County

Through its investments, the goal of First 5 Tuolumne County is to enhance the healthy development of young children through direct services and by enhancing the capacity of the adults who care for them. The biggest investments in Tuolumne County were targeted for intensive services for families with the most entrenched barriers to success. The overall funding investment for grants and programs in FY 2013–14 was \$429,419.

First 5 Tuolumne supported multiyear investments in five focus areas:

- Children's oral health through education, screening, and fluoride treatments
- 2) Nurse home visiting for at-risk newborns and young children
- Family learning and literacy to promote family stability and early learning
- 4) Parent education and support for parents at risk of child abuse and neglect
- 5) Social-emotional consultation to preschool teachers

In addition, First 5 Tuolumne partnered with First 5 California in Comprehensive Approaches to Raising Educational Standards Plus and Child Signature Program, supporting early childhood educators with coaching, professional development, and stipends.

Some measured outcomes from FY 2013–14 included:

 Parents improved their parenting skills, and knowledge, with those

- at highest risk making the most significant gains.
- Children improved early literacy skills and parents supported early literacy by reading more to their children.
- Teachers learned how to incorporate curriculum and practices to support children's social-emotional development in early childhood classroom environments, and learned how to better communicate with parents about children's behavior.
- Fewer young children had cavities or dental disease.
- Children served in programs targeting high-risk families received a developmental screening.
- Linkages between community programs, services, and systems continued to contribute to a more comprehensive approach to serving families.

Ventura County

At the heart of First 5 Ventura County are 11 Neighborhoods for Learning (NfLs), a community-based service system for early care and education. This nationally recognized place-based model provides parents with high quality, locally based resources to help them raise children who are healthy, nurtured, and prepared to meet their full potential. Each of the First 5 NfLs is governed by its community and decides how best to serve the area's health, early learning, and family support needs. NfL resources may include preschools or preschool scholarships, family resource centers (currently 25 throughout the county), and early learning activities for children ages o to 3. Through partnerships with the Ventura County Health Care Agency and other local organizations, First 5 Ventura also provides community-based access to health services, dental treatment, developmental check-ups, behavioral health services, and parent education through the local NfL, thereby increasing access to essential services for families with young children.

First 5 Ventura continues to expand quality preschool spaces. Through its Community Investment Loan Fund, the completion of two additional loans has resulted in a total of 255 new early care and education spaces, including 40 infant/toddler spaces, financed through public and private partnerships. Partnering with the Economic Development Collaborative of Ventura County, more than \$600,000 in First 5 Ventura loans have leveraged approximately \$243,000 in other public funding. Thirty-eight new jobs were created as a result of this expansion into high-need areas of Ventura County. Bolstered by support from federal Race to the Top – Early Learning Challenge grant funds and First 5 California's Child Signature Program, Ventura County has expanded its local quality rating and improvement initiative. Seventy-five early education sites located in seven school districts participated in Quality Rating Improvement System (QRIS), including 26 family child care homes. In FY 2014–15, QRIS will be expanded to 116 sites in 11 school districts, including 46 family child care homes. First 5 Ventura's investment in high-quality preschool is paying off. Of those participating in QRIS, 84 percent of programs countywide and 100 percent of First 5 Ventura funded programs are rated as "good" to "excellent" on the five-tiered QRIS matrix. More than 135 teachers, with the support of CARES Plus stipends, have attained an Associate's or Bachelor's degree over the course of the program.

First 5 Ventura has been a champion and convener of several communitywide initiatives for combating obesity. It is helping to build capacity to promote exclusive breastfeeding by providing trainings that have resulted in 80 new Certified Lactation Consultants; this also was achieved through the development of a hospital consortium of all six birthing hospitals building on best practices for increasing exclusive breastfeeding rates. The county's Good for Kids (GFK) restaurant program has realized the addition of several new GFK restaurants in a largely underserved area of Ventura, with local restaurants now offering healthy kids' meals and working with community partners to increase the availability of healthy foods.

Yolo County

FY 2013–14 marked the second year of First 5 Yolo County's enhanced strategic plan. As a result of the restoration of Assembly Bill 99 funds in 2012, First 5 Yolo expanded its strategic plan to include stronger family support services through a place-based family resource center model. This funding strategy enabled First 5 Yolo to address identified high needs of children ages 0 to 5 and their families, including:

- Resource and Referral: Helping families access services for which they are eligible
- Financial Literacy: Helping families maximize and manage their financial resources
- Early Childhood Education: Providing parents with interactive parent/ child workshops to increase skills and confidence in ability to be their children's first teacher
- Parent Education: Providing parents with education on a wide variety of parenting skills and nutrition education
- Quality Food: Increasing access to fresh produce in communities throughout the county
- Developmental Screenings: Providing developmental/mental health assessments to children ages 0 to 5, and ensuring referral and access to appropriate levels of treatment

A total of \$800,000 was allocated in FY 2013–14 to the Expanded Family Resource Center (EFRC) initiative. This year's accomplishments included:

- Connection to needed services for 1,476 eligible families
- Services to 180 families to increase financial management skills and to maximize their income through the Earned Income Tax Credit
- Over 300 parents receiving the knowledge, skills, and opportunities to engage in activities that support their child's social, emotional, physical, and cognitive development
- Almost 350 families receiving fresh fruits and vegetables every week

- through free produce distribution at the family resource centers
- The screening of 447 children for developmental issues and providing access to appropriate levels of treatment

In addition to the EFRC services, many activities continued through First 5 Yolo's programs funded under the Integrated Family Support Initiative (IFSI) including: oral health prevention and treatment for young children and pregnant women; early learning/child development programs for children in West Sacramento and rural Yolo County; family literacy programs; foster parent recruitment and retention efforts; home visiting using the Healthy Families America model; as well as health insurance outreach, enrollment, retention, and utilization.

Outstanding achievements through IFSI funding included:

- A total of 23 newly licensed foster homes, for a total of 89 countywide with a 70 percent increase in local placements over last year alone
- Intensive case management and home-visiting services for 80 families as part of the Step by Step/Paso a Paso program
- Increased dental access funding, allowing for more than 800 pregnant women and 2,026 children ages 0 to 5 to have dental visits, with an additional 2,334 children reached through the Smile Savers program
- A total of 749 children ages 0 to 5 obtaining and using their library cards with the support of family literacy programs

Yuba County

Through its investments, the goal of First 5 Yuba County is to significantly strengthen community resources and services designed to improve the lives of young children.

During FY 2013–14, one of the most significant accomplishments of First 5 Yuba was to formalize policies in order to establish three strategically coordinated community partnership programs. With a funding investment of \$575,000, these

tactical programs provided a variety of education, health, and family support resources and services. The programs not only supported First 5 Yuba's priority outcomes but also focused on areas designed to facilitate an integrated, comprehensive collaboration among local providers dedicated to improving the lives of young children. First 5 Yuba's commitment to expanding community partnerships has provided Yuba County children and families with an array of additional services that include the increase of safety net assistance programs for families in crisis, and early childhood enrichment opportunities throughout the community and in the classroom.

Other highlights from FY 2013–14 included:

- Increased countywide accessibility to early literacy programs through partnerships with Bring Me A Book and the Yuba County Library
- Continued school readiness services administered to children living in impoverished communities through the partnership with Marysville Unified School District
- Continued accessibility of physical activity programs to children and their families through partnerships with various community, city, and county entities
- Countywide continuation of parent support and early childhood education services to families through partnerships with Yuba County Office of Education and Yuba County Family Resource Center Network



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

a. Community Resource and Referral

Programs providing referrals or service information about various community resources, such as medical facilities, counseling programs, family resource centers, and other supports for families with young children. This includes 2-1-1 services or other general helplines and services that are designed as a broad strategy for linking families with community services.

b. Distribution of Kit for New Parents Programs providing and/or augmenting the

Programs providing and/or augmenting the First 5 California *Kit for New Parents* to new and expectant parents.

c. Adult and Family Literacy Programs

Programs designed to increase the amount of reading that parents do with their children, as well as educate parents about the benefits of reading or looking at books together (e.g., Even Start, Reach Out and Read, Raising a Reader). Family literacy may include adult education programs that provide English as a Second Language and literacy classes, and/or a General Equivalence Diploma.

d. Targeted Intensive Family Support Services

Programs providing intensive and/or clinical services by a paraprofessional and/or professional, as well as one-to-one services in family support settings.

Programs are generally evidence-based, and are designed to support at-risk expectant parents and families with young children to increase knowledge and skills related to parenting and improved family functioning (e.g., home visiting, counseling, family therapy, parent-child interaction approaches, and long-term classes or groups). This category also includes comprehensive and/or intensive services to homeless populations.

e. General Parenting Education and Family Support Programs

Programs providing short-term, non-intensive instruction on general parenting topics, and/or support for basic family needs and related case management (e.g., meals, groceries, clothing, emergency funding or household goods acquisition assistance, and temporary or permanent housing acquisition assistance). Fatherhood programs are also included here. In general, these programs are designed to provide less intense and shorter term ("lighter touch") support services and classes for families by non-clinical staff (e.g., Family Resource Centers).

f. Quality Family Functioning Systems Improvement

Family functioning system efforts are designed to support the implementation and integration of services primarily in Result Area 1. This may include use of the Family Strengthening approach, Protective Factors planning or implementation, service outreach, planning and management, interagency collaboration, support services to diverse populations, database management and development, technical assistance, and provider capacity building. Provider loan forgiveness programs for which child or provider counts are not measured are included in this category.

Result 2: Improved Child Development

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

Services

a. Preschool Programs for 3- and 4- Year-Olds

Programs providing preschool services, preschool spaces, and comprehensive preschool initiatives primarily targeting three and four year-olds. Child Signature Programs (CSP) 1 and 3 are included in this category, as well as county programs which mirror the quality and intensity of the CSP.

Infants, Toddlers, and All-Age Early Learning Programs

Programmatic investments in early learning programs for infants and toddlers,

as well as all-age programs. Examples of all-age programs that may be included here are child related early literacy and Science, Technology, Engineering, and Math (STEM) programs; programs for homeless children; migrant programs; and similar investments.

c. Early Education Provider Programs

Programs providing training and educational services, supports, and funding to improve the quality of care. This includes Comprehensive Approaches to Raising Education Standards (CARES) Plus and workforce development programs.

d. Kindergarten Transition Services

Programs of all types (e.g., classes, home visits, summer bridge programs) that are designed to support the kindergarten transition for children and families.

e. Quality Early Childhood Education Investments

Improvement efforts designed to support the implementation and integration of services primarily in Result Area 2. This may include Race to the Top – Early Learning Challenge and other Quality Rating and Improvement System investments. This category includes early literacy and STEM systems-building projects. This also could include interagency collaboration, facility grants and supply grants to providers, support services to diverse populations, and database management and development. CSP 2 is reported in this category.

Result 3: Improved Child Health

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

Services

a. Nutrition and Fitness

Programs providing strategies to promote children's healthy development through nutrition and fitness, including programs to teach the facts about healthy weight, basic principles of healthy eating, safe food handling and preparation, and tools to help organizations incorporate physical activity and nutrition. Recognized

strategies include "Let's Move" Campaign, MyPyramid for Preschoolers, and sugar-sweetened beverage initiatives.

b. Health Access

Programs designed to increase access to health/dental/vision insurance coverage and connection to services, such as health insurance enrollment and retention assistance, programs that ensure use of a health home, and investments in local "Children's Health Initiative" partnerships. Providers may be participating in Medi-Cal Administrative Activities to generate reimbursements.

c. Maternal and Child Health Care

Programs designed to improve the health and well-being of women to achieve healthy pregnancies and improve their child's life course. Voluntary strategies may include prenatal care/education to promote healthy pregnancies, breast-feeding assistance to ensure that the experience is positive, screening for maternal depression, and home visiting to promote and monitor the development of children from prenatal to two years of age. Providers may be participating in Medi-Cal Administrative Activities to generate reimbursements.

d. Oral Health

Programs providing an array of services that can include dental screening, assessment, cleaning and preventive care, treatment, fluoride varnish, and parent education on the importance of oral health care. This may include provider training and care coordination of services.

e. Primary and Specialty Medical Services

Programs designed to expand and enhance primary and specialty care in the community to ensure the capacity to serve children. Services include preventive, diagnostic, therapeutic, and specialty medical care provided by licensed healthcare professionals/ organizations. Services may include immunizations, well child check-ups, care coordination, asthma services, vision services, services for autism/ attention-deficit hyperactivity disorder, other neurodevelopmental disorders, and other specialty care.

f. Comprehensive Screening and Assessments

Programs providing screening, assessment, and diagnostic services, including developmental, behavioral, mental health, physical health, body mass index, and vision.

Screening may be performed in a medical, education, or community setting. These services determine the nature and extent of a problem and recommend a course of treatment and care. This may include strategies to connect children to services which promote health development, such as Help Me Grow.

g. Targeted Intensive Intervention for Identi® ed Special Needs

Programs providing early intervention or intensive services to children with disabilities and other special needs, or at-risk for special needs. May include strategies targeting language and communication skills, social and emotional development, developmental delays, and related parent education. Mental Health Consultations in ECE settings are included in this category. "Special Needs" refers to those children who are between birth and five years of age and meet the definition of "Special Needs."

h. Safety Education and Injury Prevention Programs disseminating information about child passenger and car safety; safe sleep; fire, water, home (childproofing) safety; and the dangers of shaking babies. Includes education on when and how to dial 9-1-1, domestic violence prevention, and intentional injury prevention. Referrals to community resources that specifically focus on these issues also may be included in this category.

i. Tobacco Education and Outreach

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

j. Quality Health Systems Improvement Efforts designed to support the implementation and integration of services primarily in Result Area 3. This may include service outreach, planning and management (general planning and coordination activities, interagency collaboration, support services to diverse populations, database management and development, technical assistance and support, contracts administration, and oversight

activities), and provider capacity building (provider training and support, contractor workshops, educational events, and large community conferences). Provider loan forgiveness programs for which child or provider counts are not measured are included here. Includes Baby Friendly Hospital investments, projects for cross-sector data integration, and designing a community-endorsed developmental screening framework.

Result 4: Improved Systems of Care

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

Services

a. Policy and Broad Systems – Change E[□] orts

Investments in broad systems-change efforts, including inter-agency collaboration, work with local and statewide stakeholders, policy development, and related efforts. This category includes county investment and work with The Children's Movement and/or on grassroots advocacy efforts.

b. Organizational Support

Training and support provided to organizations that does not apply to one of the three programmatic Result Areas, but instead has a more general impact. Other examples of organizational support include business planning, grant writing workshops, sustainability workshops, and assistance in planning and promoting large community conferences or forums. Database management and other crossagency systems evaluation support, and general First 5 program staff time are included in this category.

c. Public Education and Information

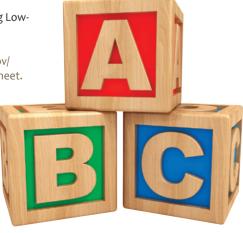
Investments in community awareness and educational events on a specific early childhood topic that does not apply to one of the three programmatic Result Areas, or promoting broad awareness of the importance of early childhood development.

References

- ¹ Heckman, James J. and Masterov, Dimitriy V. (2007). The Productivity Argument for Investing in Young Children. IZA Discussion Paper No. 2725. Retrieved December 18, 2014, from: http://ssrn.com/abstract=982117
- ² Sabol, T.J., S.L. Soliday Hong, R.C. Pianta, & M.R. Burchinal. (2013). Can Rating Pre-K Programs Predict Children's Learning? Science 341: 845-846. Retrieved December 18, 2014, from: http://www.sciencemag.org/ content/341/6148/845
- 3 RAND Corporation. (2009). Strategies for Advancing Preschool Adequacy and Efficiency in California. RAND Labor and Population Research Brief. Santa Monica, CA. Retrieved December 18, 2014, from: http://www.rand.org/content/dam/rand/pubs/ research_briefs/2009/RAND_RB9452. pdf
- 4 RAND Corporation. (2007). The Promise of Preschool for Narrowing Readiness and Achievement Gaps Among California Children. RAND Labor and Population Research Brief. Santa Monica, CA. Retrieved December 18, 2014, from: http://www.rand.org/content/dam/rand/pubs/ research_briefs/2007/RAND_RB9306. pdf
- Fees, N., Chai, J., & Anthony, D. (2012).
 Right in Principle and in Practice: A
 Review of the Social and Economic
 Returns on Investing in Children. United
 Nations Children's Fund (UNICEF) Social
 and Economic Policy Working Paper.
 New York, NY. Retrieved December
 18, 2014, from: http://www.unicef.org/
 socialpolicy/files/Investing_in_Children.
 pdf

- ⁶ First 5 California. Child Signature Program (CSP). Retrieved December 18, 2014, from: http://www.ccfc.ca.gov/ programs/programs csp.html#data
- Ohldren Now. Facts & Figures: Early Learning & Development. (nd) Retrieved December 18, 2014, from: http://www.childrennow.org/index. php/learn/facts_early_learning.
- 8 Annie E. Casey Foundation. Kids Count Data Center. National KIDS COUNT. Retrieved December 18, 2014, from: http://datacenter.kidscount.org/data/ tables/5650-children-in-poverty-by-agegroup
- 9 Demonstrating Results. Retrieved December 18, 2014, from: http://www. educareschools.org/about/pdfs/ Demonstrating-Results.pdf
- ¹⁰ Educare. The Educare Learning Network. Retrieved December 18, 2014, from: http://www.educareschools.org/ eln/index.php
- " Noguchhi, Sharon. (2013). InsideBayArea NEWS. Silicon Valley leaders kick off \$3 million campaign for early-childhood center in San Jose's Santee Neighborhood. Retrieved December 18, 2014, from: http://www. insidebayarea.com/news/ci_24116530/ silicon-valley-leaders-kick-off-3-millioncampaign
- ¹² Centers for Disease Control and Prevention. (n.d.). Obesity Among Low-Income Preschool Children. Atlanta, GA. Retrieved December 18, 2014, from: http://www.cdc.gov/ obesity/downloads/PedNSSFactSheet. pdf

- ¹³ Public Policy Institute of California. (June 22, 2011). More Californians Using Cell Phones to Go Online. Retrieved December 18, 2014, from: http://www. ppic.org/main/pressrelease.asp?p=1127
- ¹⁴ 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 December 18, 2014, from: http://www.pewtrusts.org/en/research-and-analysis/reports/0001/01/01/a-matter-of-degrees
- 15 Minervino, J. (2014). Lessons from Research and the Classroom: Implementing High-Quality Pre-K that Makes a Difference for Young Children. Bill and Melinda Gates Foundation. Retrieved December 22, 2014, from: https://docs.gatesfoundation.org/ documents/Lessons%20from%20 Research%20and%20the%20Classroom_ September%202014.pdf
- 16 Preschool California. Research Shows: (April 5, 2011). The Benefits of High-Quality Early Learning. Retrieved December 18, 2014, from: http://www. earlyedgecalifornia.org/resources/ research--studies/making-the-case.html



Our Vision

CALIFORNIA'S CHILDREN RECEIVE THE BEST POSSIBLE START IN LIFE AND THRIVE.



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