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.
OUR KIDS OUR FUTURE: INVESTING IN THE FIRST FIVE YEARS OF CALIFORNIA’S CHILDREN

2017–18 | First 5 California Annual Report

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Ex-Officio Member:
Michael Wilkening
Secretary of the California Health and Human Services Agency

Jim Suennen, Ex-Officio Designee
MESSAGE FROM THE EXECUTIVE DIRECTOR

In 1998, California voters approved Proposition 10, leading to the formation of the California Children and Families Commission (First 5 California). Its intent was to facilitate the creation and implementation of an integrated, comprehensive, and collaborative system of information and services to enhance optimal early childhood development, and to ensure that children are ready to enter school and reach their full potential.

Over the last 20 years, First 5 California has provided continuous support to young children and their families to ensure all of California’s children receive the best possible start in life and thrive. At both the state and county levels, the First 5 Network (i.e., First 5 California and all 58 First 5 county commissions) continues to be a committed partner across the state in providing information, advocacy, resources, and services in health and early child development for our state’s youngest children and their families.

The 2017–18 Annual Report summarizes the past year’s accomplishments at both the state and local levels. Highlights include:

• The planning and development of First 5 California’s 2018 Child Health, Education, and Care Summit last April. Over 700 early education and care professionals attended the three-day event.
• The essential, ongoing services provided at local levels across the state for children and families. First 5 county commissions provided nearly 185,000 services to improve family functioning for children ages 0 to 5.
• The successful continuation of First 5 California’s Talk. Read. Sing.® public education and outreach campaign. This effort is designed to inform parents and the public about the importance of early brain development in young children in their earliest months and years through positive verbal engagement. It continues to reach millions of Californians through television, radio, social and digital media, the First 5 California Parent Website, and First 5 California’s Kit for New Parents.
• The First 5 Express, a mobile outreach tour that traveled to all 58 counties reaching out and providing information to families and caregivers of children ages 0 to 5. More than 39,000 Express visitors walked away with helpful resources and other creative items developed for both children and their parents.
• The continued commitment by First 5 county commissions in developmental screenings and services, leading the state in these important health investments.

Since its inception, the charge of the First 5 Network has been to serve our state’s youngest children, a pledge that has only strengthened over time. Looking ahead, First 5 California is poised and ready to work with the governor, the legislature, First 5 county commissions, and other state and local stakeholders with renewed optimism and a steadfast commitment to this important charge. California’s children deserve nothing less.

CAMILLE MABEN
EXECUTIVE DIRECTOR, FIRST 5 CALIFORNIA
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PROPOSITION 10 AND THE LEGACY OF 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 nearly two decades, the California Children and Families Commission (First 5 California) has established standards of quality child care and invested in the development of programs and services emphasizing improvement in early education, child care, child health and development, research, and community awareness.

STRATEGIC PLAN

First 5 California’s Strategic Plan serves as an important compass for the Commission’s deliberations on how best to plan future work, investments, and partnerships. The Strategic Plan establishes a vision, mission, and values for the agency, along with strategic priority areas and goals for how First 5 California will act as a leader in its field. The vision of First 5 California is for all of the state’s children to receive the best possible start in life and thrive. The agency seeks to realize this vision by working on behalf of California’s children prenatal through age 5 and their families to create a comprehensive, integrated, culturally competent, and coordinated system that optimizes early childhood development. First 5 California’s mission is to serve as a convener and partner that both supports and leads the movement to create and implement this system.

The agency’s work is driven by its values, including, but not limited to, its commitment to collaboration, civic engagement, accountability, and sustainability. The agency’s efforts are focused within the Plan on four strategic priority areas: creating child- and family-centered systems; providing leadership across networks and from a systems-approach; developing organizational capacity through strong internal systems and team members; and engaging the general public, and state and federal government to build public will and investment around its vision and mission.

The current Strategic Plan was revised by the Commission in April 2017, and will guide and focus First 5 California’s endeavors over five years from 2014 to 2019. For more information about the Strategic Plan, please go to http://www.ccfc.ca.gov/pdf/about/budget_perf/F5CA_Strategic_Plan_2017.pdf.

BUILDING PUBLIC WILL AND INVESTMENT

First 5 California’s Children’s State Policy Agenda guides the agency’s efforts to advocate before the state Legislature for a comprehensive, integrated, culturally competent, and coordinated system to support California’s youngest children. The Commission’s 2017–18 Policy Agenda reflects First 5 California’s commitment in its Strategic Plan to participate and lead in the area of civic engagement, and the recognition of the Commission’s responsibility to the people of California to ensure the wise and effective use of public funds.
In its Strategic Plan, First 5 California commits to engage and lead in building public will and investment to support the optimal wellbeing and development of children prenatal through age 5, their families, and communities. The Strategic Plan also recognizes that in order to advocate and influence policy change, First 5 California must engage in partnerships with First 5 county commissions, stakeholders, and other allies from local to federal levels in order to be successful in institutionalizing efforts to advance child-centered policies and increase these crucial investments.

First 5 California seeks to serve as a convener and partner in state policy conversations, working with First 5 county commissions, state agencies, stakeholders, and other advocates to convene, align, collaborate on, support, and strengthen statewide advocacy efforts to realize shared goals. First 5 California continued to expand its policy and advocacy engagement in 2017, guided by its Policy Agenda which focused on the following four areas the Commission identified as its top state policy priorities, including targeted goals within each priority area to achieve a seamless statewide system of integrated and comprehensive programs for children and families:

**Strong and Engaged Families and Communities**

- Support evidence-based parent education and engagement, including parent engagement on child brain development and Talk. Read. Sing.®
- Support sustainability of family resource centers and other community hubs for integrated services for children and families
- Increase supports for breastfeeding, family leave, and baby-friendly policies in all settings
- Expand voluntary home visit programs

**Child Health**

- Protect children and families’ access to health care, and support coordination across the health care system to ensure every pregnant mother and child age 0 to 5 has affordable and comprehensive health insurance coverage
- Support and promote universal developmental screenings, assessment, referral, and treatment

**Early Learning**

- Expand access to quality early care and education programs for children ages 0 to 3
- Support implementation of high-quality universal preschool access for all low-income four-year-old children, and high-quality transitional kindergarten and kindergarten statewide
- Support a high-quality early learning workforce through strengthened qualifications, compensation, stability, diversity, and robust professional development systems
- Promote statewide access to and participation in successful Quality Rating and Improvement Systems

**First 5 Revenue**

- Promote inclusion of funding for children ages 0 to 5 and their families in existing and new revenue policy discussions
• Promote regulation of tobacco-related products, including electronic cigarettes, and sustainability of licensing and enforcement programs

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 2017–18, First 5 California received $70.2 million and county commissions received $280.8 million.

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 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 Program Management Division and Administrative Services, Evaluation, Executive, Communications, External and Governmental Affairs, Fiscal Services, 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

The administration of these and other programs is consistent with all applicable State and Federal laws, rules, and regulations. The State Controller’s Office conducts an annual review of the 58 county commissions’ independent audits. In October 2017, the Controller published its review of the counties’ audits for FY 2015–16, summarizing several findings contained in the local audits, but did not deem any of them significant enough to withhold funding. Audits can be viewed on First 5 California’s website at http://www.ccfc.ca.gov/about/budget.html#fiscal.

FIRST 5 SUMMIT

As part of its commitment to convene, align, collaborate, and support statewide efforts and initiatives to improve outcomes for children, First 5 California had its most recent Summit in April 2018.

Approximately 700 early care and education professionals attended the 3-day event, which included a variety of breakout sessions, keynote addresses, and two evening receptions featuring

• Workforce recruitment and development
• Information technology
• Business services
• Legislative advocacy efforts
for the first time in over a decade. First 5 California co-sponsored AB 60 (Santiago and Gonzalez-Fletcher) with Parent Voices and the Child Care Law Center, which was implemented and fully funded through the 2017-18 Budget Act. The policy provisions of AB 60 adopted in the Budget Act modernize how working parents become eligible for child care subsidies by updating eligibility criteria to 70 percent of the current state median income (SMI) for all child care programs, taking into account the increasing state minimum wage and cost of living in California, and creating a graduated exit threshold of 85 percent of the modern SMI. Prior to this year’s Budget Act, the State Budget had frozen the eligibility threshold for state subsidized child care at 70 percent of the 2005 SMI. In addition, the policy also ensures families receive a minimum of 12 months of continuous care, even if they experience minor pay changes, so they will not be forced to decline a raise in order to retain care for their children. These historic changes to family eligibility will help put more families within reach of California’s limited state-subsidized child care programs.

NEW LEGISLATION

First 5 California also co-sponsored the New Parent Leave Act—SB 63 (Jackson)—with the California Employment Lawyers Association and Legal Aid at Work, which was signed into law on October 12, 2017. SB 63 provides up to 12 weeks of job-protected maternity and paternity leave for more California employees. Prior to the passage of SB 63, only those who worked for an employer of 50 or more employees were eligible for job-protected parental leave to bond with a newborn or newly adopted child. SB 63 extends these protections to those who work for an employer with 20–49 employees. Consistent with First 5 California’s Talk. Read. Sing.® campaign, SB 63 is based on the social equity imperative that every parent needs and deserves the facts about early brain science and must understand their crucial role in nurturing their young children. Parents who talk, read, and sing to their children are developing their children’s brain capacity and thus, their futures. SB 63 helps more parents take this pivotal action.

In addition to the historic legislative wins the early care and education (ECE) field experienced in 2017, the year also provided significant budget wins for the state’s youngest children and their families, which were achieved through shared advocacy efforts between First 5 California and its early childhood education recipients of the Talk. Read. Sing® Award and the First 5 California Service Award.

The Summit highlighted a special strand focusing on the implementation of Quality Counts California, the Quality Rating and Improvement System, across all types of early childhood settings. The program also included a father track showcasing the importance and role of fathers in children’s lives.

According to one Summit attendee, “This was one of the most informational summits I have ever attended. The quality of the presenters and keynote speakers were top-notch. I was so excited by the information, I didn’t want to leave.”

First 5 California will host the next Child Health, Education, and Care Summit in February 2020.

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NEW LEGISLATION

First 5 California continued to garner awareness of the importance of First 5-funded programs and significant state-level support for its Children’s Policy Agenda goals from policymakers, advocacy partners, and other stakeholders during the 2017–18 state legislative and budget session. By expanding the reach of First 5 California’s policy education efforts, deepening its advocacy partnerships, and continuing its commitment to shared priorities with its partners and leaders in the Legislature, significant gains were made in each priority area.

2017 was an active year for policies impacting young children, and First 5 California sponsored legislation
and care partners and leaders in the Legislature. First 5 California and the ECE Coalition were successful in advocating to restore the “paused” multi-year budget agreement to increase reimbursement rates and preschool slots, resulting in almost a quarter of a billion dollars in increased funds for per-child funding rates for all child care programs.

First 5 California is committed to building on its 2017 advocacy achievements by continuing to strengthen its partnerships with stakeholders and its efforts to build policymakers’ knowledge base, will, and investment in shared priorities. Capitalizing on the momentum and commitment to early childhood education and care in the Legislature, First 5 California staff and partners pledge to work with the Legislative Women’s Caucus and the Assembly Speaker’s Blue Ribbon Commission on a road map for building a stronger, more comprehensive, high-quality early learning system for all California’s children, and on how to best invest scarce resources in this crucial foundation for lifelong success. In doing so, the agency will continue to build on this year’s successes and continue working toward the underlying Strategic Plan goal to ensure all children prenatal through age 5 have the resources, foundation, and systems of support they need to thrive.

PARTNERSHIPS AND COLLABORATIVE EFFORTS

California Essentials for Childhood Initiative

First 5 California participated in the California Essentials for Childhood Initiative with other state agencies and organizations (e.g., ACEs Connection, CA Coalition to Counter Child Adversity). Under a competitive five-year grant from the Centers for Disease Control and Prevention, the California Department of Public Health co-leads the initiative with the California Department of Social Services, Office of Child Abuse Prevention. Using a collective impact model to address child maltreatment as a public health issue, the project focuses on: 1) raising awareness and commitment to promote safe, stable, nurturing relationships and environments; 2) creating the context for healthy children and families by changing social norms, programs, and policies; and 3) using data to inform actions. The Shared Data and Outcomes Workgroup identified three sources of data about adverse childhood experiences (ACEs) and resilience as well as key life course indicators for most California counties and conducted trainings on translating data into action for local partners. The information is located on the Lucile Packard Foundation for Children’s Health website (kidsdata.org).
FOUR RESULT AREAS

First 5 California tracks progress in four result areas to inform funding decisions, program planning, and policies:
- Improved Family Functioning
- Improved Child Development
- Improved Child Health
- Improved Systems of Care

As a framework for reporting early childhood investments, these result areas support a statewide overview of the number, type, and costs of services provided to children and adults for a particular fiscal year. The public can use this information as one source to determine resource allocation and impact by First 5 county commissions statewide.

Exhibit 1 contains the total numbers of services provided to children ages 0 to 5 and adults in FY 2017–18 for Improved Family Functioning, Improved Child Development, and Improved Child Health. Exhibit 2 shows the distribution of expenditures in these three result areas, totaling $341 million for children ages 0 to 5 and adults, including primary caregivers and providers, who received services in FY 2017–18.

The result area, Improved Systems of Care, with expenditures of $67 million, differs from the others. It consists of programs and initiatives that support program providers in the other three result areas. The four result areas combined have total expenditures of $408 million.

*Totals for Adults include both Primary Caregiver and Provider counts

Source: County Revenue and Expenditure Summary, November 2018
First 5 county commissions are required to report to First 5 California their annual expenditure and service data. In collaboration with the First 5 Association, First 5 California developed and adopted guidelines to standardize data collection. For this report, county commissions provide program service data under the four result areas and data are aggregated to the state level. Data reported are from programs funded by both local and state commission First 5 funds (Appendix A) using specific definitions for each result area (Appendix B).

**IMPROVED FAMILY FUNCTIONING**

Family Functioning includes the categories General Family Support and Targeted Intensive Family Support. Services include instruction on general parenting topics, support for basic family needs and case management, parent education and literacy, referrals to community resources, and assistance for parents and families.

In FY 2017–18, First 5 county commissions provided 184,904 services to improve family functioning for children ages 0 to 5, and 323,839 services to parents, guardians, primary caregivers, relatives, and providers. Exhibit 3 displays the numbers of services provided.

In FY 2017–18, county commissions expended $93 million to improve Family Functioning. Exhibit 4 shows the distribution of expenditures by service category. First 5 commissions provided support to schools and educational institutions, nonprofit community-based agencies, government agencies, and private institutions.
IMPROVED CHILD DEVELOPMENT

Child Development includes the categories Quality Early Learning Supports and Early Learning Programs. Programs include professional development for educators, high-quality preschool, services for diverse populations, and school readiness.

In FY 2017–18, First 5 county commissions delivered 234,040 child development services to children ages 0 to 5 and 128,575 services to parents, guardians, primary caregivers, relatives, and providers. Exhibit 5 displays the numbers of services provided. In FY 2017–18, county commissions expended $112 million to improve Child Development. Exhibit 6 shows the distribution of expenditures by service category.

IMPROVED CHILD HEALTH

Child Health includes the categories General Health Education and Promotion, Prenatal and Infant Home Visiting, Oral Health Education and Treatment, and Early Intervention. First 5 county commissions fund a variety of services that promote health identification, treatment, and elimination of risks that threaten health and cause developmental delays and disabilities.

In FY 2017–18, First 5 county commissions provided 328,555 services designed to improve Child Health to children ages 0 to 5, and 264,582 services to parents, guardians, primary caregivers, relatives, and providers. Exhibit 7 displays the numbers of services provided. In FY 2017–18, county commissions expended $135 million to improve Child Health. Exhibit 8 shows the distribution of expenditures by service category.

IMPROVED SYSTEMS OF CARE

Systems of Care addresses system-wide structural supports as county commissions effectively work toward achievement in the 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 numbers of children and adults served. Expenditure data indicate that for FY 2017–18, county commissions expended $67 million to improve Systems of Care (Exhibit 9), with 76 percent of expenditures toward Program and Systems Improvement Efforts, and 24 percent toward Policy and Public Advocacy.

POPULATIONS SERVED

Statewide, 37 percent of children served were under 3 years old, 49 percent were ages 3 to 5 years old, and 14 percent were of unknown age. Adults included primary caregivers and parents (85 percent), other family (8 percent), and providers (7 percent). With respect to primary language of children served, services were provided to English speakers 56 percent of the time and to Spanish speakers 38 percent of the time. While children and adults from all racial/ethnic groups received services, for those with a reported race/ethnicity, the largest recipient group was Latino (58 percent) followed by White (18 percent).
Exhibit 7: Child Health—Total Number of Services Provided to Children Ages 0 to 5 and Adults* in FY 2017–18 by Service

<table>
<thead>
<tr>
<th>Service</th>
<th>Children</th>
<th>Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Intervention</td>
<td>64,068</td>
<td>100,678</td>
</tr>
<tr>
<td>Oral Health Education and Treatment</td>
<td>64,186</td>
<td>140,400</td>
</tr>
<tr>
<td>Prenatal and Infant Home Visiting</td>
<td>59,493</td>
<td>40,601</td>
</tr>
<tr>
<td>General Health Education and Promotion</td>
<td>46,876</td>
<td>76,835</td>
</tr>
</tbody>
</table>

*Totals for Adults include both Primary Caregiver and Provider counts

Exhibit 8: Child Health—Distribution of Expenditures for Children Ages 0 to 5 and Adults* in FY 2017–18 by Service

- Early Intervention: 35%
- Oral Health Education and Treatment: 13%
- Prenatal and Infant Home Visiting: 44%
- General Health Education and Promotion: 8%

*Totals for Adults include both Primary Caregiver and Provider Expenditures

Source: County Revenue and Expenditure Summary, November 2018

Exhibit 9: Systems of Care—Distribution of Expenditures in FY 2017–18 by Service

- Program and Systems Improvement Efforts: 76%
- Policy and Public Advocacy: 24%

Source: County Revenue and Expenditure Summary, November 2018
FIRST 5 IMPACT

First 5 California completed the third year of First 5 IMPACT (Improve and Maximize Programs so All Children Thrive), a five-year, $190 million investment that provides funding for the implementation of local quality rating and improvement systems (QRIS). Specifically, First 5 IMPACT supports the improvement of quality early learning and care settings across the entire continuum—from alternative settings and family, friend, and neighbor care, to family child care homes, centers, and preschools. Building on the previous success of California’s Race to the Top-Early Learning Challenge grant, First 5 IMPACT supports a network of local quality improvement efforts, forges partnerships with all 58 counties via 48 consortia, builds on past First 5 California programs, and aligns with and leverages federal, state, and local investments.

For FY 2017–18, local consortia participating in First 5 IMPACT reported many implementation accomplishments and lessons learned. Over 5,600 sites, or approximately 83 percent of all sites participating in QRIS, were supported in full or in part with First 5 IMPACT funding.

Regional Coordination and Training and Technical Assistance Hubs (Hubs) continue to be a central source of support for consortia. Funded through First 5 IMPACT, Hubs support efficiencies in data collection and data systems, assessor management for rating and assessment tools, and provide training and technical assistance to maximize investments by focusing on the needs within a geographic region.

Hubs meet regularly with consortia representatives in their region to address regional efficiencies and provide regionalized support for QRIS implementation.

In FY 2017–18, Hub fiscal lead agencies reported Hub funding was key to the development of an infrastructure that not only increased the capacity to reach more sites/providers, but also to bring previously unattainable professional development, technical assistance, consortia building supports, and shared resources that have reduced redundancies and increased efficiencies. The most frequently reported supports include:

- Coaching and training for participating QRIS sites as well as local implementation staff on topics such as family engagement, early learning environments, and effective adult-child interaction
- Training and certification in specific tools such as Strengthening Families’ Five Protective Factors, Teaching Pyramid, Classroom Assessment Scoring System (CLASS), Program for Infant and Toddler Care (PITC), and Making the Most of Classroom Interactions (MMCI)
- Regional and county assessment and observation alignments, protocol support, efficiencies, and other forms of technical assistance
- Communities of practice and professional learning communities focused on training content, strategies, and other systemic supports
Hub lead agencies also widely reported using various needs assessment tools and strategies to determine how existing supports are being used by participating Consortia, and how to ensure the needs of Consortia are met.

In addition to regional Hubs and First 5 California staff, ongoing support for the implementation of First 5 IMPACT is provided through a contract with the WestEd Center for Child and Family Studies. In FY 2017–18, contract work focused on systems building and alignment, support for the work of the Hubs, developing a QRIS website and communications plan, and revising the rating matrix used to assess quality in participating early learning settings.

QUALITY COUNTS CALIFORNIA

California’s statewide QRIS, Quality Counts California (QCC), is funded in large part by First 5 IMPACT, in addition to state and federal funding administered by the California Department of Education (CDE). QCC is a statewide system of locally-implemented QRISs to provide resources and support to early learning and care providers so they can create nourishing and effective experiences that will help children grow and thrive. The QCC movement also has created a partnership between state and local entities through the QCC Consortium. The QCC Consortium includes lead agencies that locally administer QRIS funds from First 5 IMPACT and the CDE’s QRIS Block Grants, and staff representing First 5 California and the CDE. Through this partnership, state and local leaders are able to come together twice annually to discuss topics and issues related to local QRIS implementation, as well as co-create a vision for ongoing sustainability of California’s early learning quality improvement system.

All sites participating in QCC, whether funded by First 5 IMPACT and/or the QRIS Block Grants, are reported using the statewide common data file, one data file inclusive of all of the state’s QRIS funding streams. This data provides First 5 California and the CDE an efficient and collaborative method for receiving information about each county participating in QRIS. As of June 30, 2018, there were over 6,800 participating QRIS sites across the state, an increase of nearly 1,000 sites from the previous fiscal year. Of the total, 56 percent were centers, 36 percent were family child care homes, and 8 percent were alternative sites such as libraries, home visiting programs, family resource centers, and family, friend, and neighbor providers (57 of 58 counties reporting).

Throughout FY 2017–18, one of the major tasks of QCC was to develop recommendations for revising the rating matrix that is used to assess quality of all rated sites. First 5 California and the CDE convened a QCC Rating Matrix Workgroup, a group of more than 20 stakeholders and content experts from across California, to revise the rating matrix to make it more cost effective, scalable, reliable, and more strongly associated with improved teacher and child outcomes. The state provided the group with some direction around the Rating Matrix revisions to improve cost effectiveness and reliability, and to decrease the burden of quality rating data collection of programs. Using these parameters, the workgroup developed two rating matrices that will go to the Consortium for vote later in 2018.

To round out FY 2017–18, the QCC Consortium finalized the development and approval of its communications brand, which included the adoption of a name, tagline, and logo: Quality Counts California: Raising the Quality of Early Learning and Care. Additionally, a QCC-specific website was developed that provides formal messaging around the importance of quality early learning, as well as...
information regarding local QRIS efforts to support early learning providers, and connections to local resource and referral agencies for parents and families looking for quality child care. Local consortia reported QCC has provided a statewide common effort and unified vision for improving the quality of early learning sites in the state.

In addition to First 5 IMPACT and CDE Block Grant sources of funding, about half of the consortia reported new or leveraged funding sources identified to support QCC. Those included county sales tax ballot measures, city/county funds, higher education partners, private foundations/philanthropy organizations, and other federal funding sources (leveraged Head Start, Early Head Start-Child Care Partnership Grant, and others).

In the upcoming fiscal year, the QCC Consortium will be looking to increase their implementation capacity in order to include additional local providers into QRIS, increase efforts to message locally and statewide about the importance of high-quality early learning and care programs, and refine other aspects of the system to maximize available funding and create efficiencies statewide.

For more information on QCC, visit the website at https://qualitycountsca.net/.

**SMALL COUNTY AUGMENTATION**

In the Small Population County Funding Augmentation (SPCFA) program, First 5 California provides supplemental funding above the legislated allocation of annual tax revenues to First 5 commissions in 20 counties with the smallest proportion of statewide births.

Initiated in FY 1999–2000, the First 5 California Commission provided funding of up to $200,000 to small population counties to help ensure the implementation of the California Children and Families Act (Proposition 10) as a statewide effort. On January 26, 2017, the State Commission approved an annual investment of up to $8.625 million in additional funding over four years (July 1, 2017–June 30, 2021) for 20 small population county commissions to ensure core operations and services for children and families in these communities. For FY 2017–18, 16 of the 20 small counties expended approximately $3.9 million.

In order to participate in SPCFA, counties agree to terms outlined in a Local Assistance Agreement framework to implement successful local systems, measure outcomes, monitor progress, and demonstrate quality improvement in three focused investment areas of Child Health, Family Support and Strengthening, and Early Learning and Development.

During FY 2017–18, approximately 22,445 children and 29,282 adults received services across the 20 SPCFA counties. SPCFA-funded programs were required to focus on one of three investment areas. From most to least common, the percent of counties focusing on these areas was Family Support and Strengthening (43%), Early Learning and Development (34%), and Child Health (23%).

Of the 81 programs implemented with SPCFA funds, 32 percent were evidence-based, 43 percent were evidence-informed, 9 percent were health-focused, and 16 percent were described as “other.” All SPCFA counties funded at least one evidence-based or evidence-informed program. Programs were either fully (64%) or partially (36%) funded by SPCFA funding.
Key evidence-based programs included the Nurturing Parents Home Visiting Program, Raising a Reader, School Readiness, Parents as Teachers, and Positive Parenting Program (Triple P).

EDUCARE

The Educare Quality Early Learning Model provides the comprehensive early learning services beginning at birth that early brain science shows are necessary to narrow the achievement gap for at-risk children so they have the foundation they need to thrive in school and beyond. Research on early brain development demonstrates poverty and toxic stress can negatively impact a child's cognitive development and ability to learn.¹

California children from low-income families typically enter kindergarten 12 to 14 months behind the national average in pre-reading and language skills.² ³ 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 who are dual language learners) who enroll in Educare as infants or toddlers enter kindergarten with the same skills as their middle-income peers.⁴ The Educare model also focuses on intensive family engagement to foster strong parent-child relationships, family well-being, and ongoing learning and development for both parents and children.

In 2010, the First 5 California State Commission voted to become one of several public funders in bringing the public-private Educare Quality Early Learning Model to California. The Commission has now dedicated $6 million to support the launch, operation, and evaluation of the first California Educare centers in Santa Clara and Los Angeles counties. First 5 California’s investment in California’s two Educare sites specifically supports the costs of high-quality elements in the classroom in order to meet the Educare Core Features program requirements that have been proven to increase the quality of early learning programs through improved teacher-child interactions.

Through funding from First 5 California and other national, state, and local public and private partners, Educare California at Silicon Valley opened its doors and began serving Santa Clara County-area children and families in the 2015–16 school year. The center is co-located with Santee Elementary School, and operates in partnership with First 5 Santa Clara, the Santa Clara County Office of Education Early/Head Start and State Preschool programs, and the East Side Union High School Child Development Program.⁵

Educare of Los Angeles at Long Beach, a public-private partnership lead by Long Beach Unified School District and the Los Angeles Chamber of Commerce, is currently in the planning, fundraising, and construction phase of its stand-alone facility located on the Barton Elementary School campus in the Long Beach Unified School District. The Educare of Los Angeles at Long Beach site soft-launched the 2017–18 school year in its temporary facility for preschool students. A full site launch at the new facility is anticipated for the 2018–19 school year.⁶

Funded Research

First 5 California continued funding the California Health Interview Survey (CHIS), conducted by the UCLA Center for Health Policy Research, under a two-year $1.7 million contract approved by the commission in July 2017. First 5 California supports the CHIS Child Questionnaire to collect information from parents on many topics, including child care and preschool participation and perception, positive parenting activities (parents or caregivers reading, singing, going out to play with child), knowledge of the Talk. Read. Sing.® campaign, breastfeeding practices, health status and conditions, child oral health, developmental screening and referrals, languages spoken at home and English proficiency of parent, and receipt and use of First 5 California’s Kit for New Parents. The
contract supports online dissemination of CHIS data and findings through the AskCHIS query tool (ask.chis.ucla.edu), the AskCHIS Neighborhood Edition mapping tool (askchisne.ucla.edu), and published research reports (healthpolicy.ucla.edu/chis/). As one example of statewide data collected by the survey, 88 percent of parents reported they saw or heard a message about the Talk. Read. Sing.® campaign (CHIS 2016). Among these parents, 49 percent reported they talked more to their child, 44 percent reported they read more to their child, and 43 percent reported they sang more to their child. Under the current contract, researchers are developing a new policy brief on factors related to parents’ reading and singing with children, and exposure to the Talk. Read. Sing.® campaign.

**DUAL LANGUAGE LEARNER PILOT**

First 5 California’s Dual Language Learner (DLL) Pilot Study is examining culturally and linguistically responsive and effective intentional teaching, family engagement, and professional development strategies for DLLs. The DLL Pilot Study also will examine how to optimize home language and promote dual language acquisition of DLL children ages birth to age five in early learning settings. Unlike a traditional pilot where an investment is made in new programs, which are then evaluated, this pilot is studying existing strategies implemented in early learning settings with young DLLs and their families, and the conditions under which they are effective. The DLL Pilot Study is designed to fill gaps in existing research by intentionally including early learning and care settings serving infants and toddlers (as well as preschoolers), unlicensed community-based settings (as well as licensed early learning and care settings), and a variety of languages spoken across California with an eye toward strategies that can be scaled and implemented statewide.

The DLL Pilot Study is being conducted by the American Institutes for Research (AIR) and its partners, and is driven by stakeholder input and F5CA’s Strategic Plan. The Study will be implemented in three phases:

- **Phase 1**—Background information gathered through interviews with leaders in 16 counties selected based on the counties’ diversity, and a survey of recommended and randomly selected early learning settings about their DLL practices.
- **Phase 2**—In-depth study of DLL strategies (family engagement, professional development, and teaching strategies) through site and classroom observations, teacher surveys, parent interviews, and child assessments.
- **Phase 3**—Replicate effective strategies identified in Phase 2 in other setting types and age groups.

Findings from First 5 California’s DLL Pilot study will inform early childhood education preparation programs, quality improvement and rating in Quality Counts California, and state and local policy makers. Study findings also will be used to increase early educators’, families’, and the general public’s awareness about the benefits of bilingualism and home language. First 5 California’s investment in the DLL Pilot is approximately $20 million over five years: $7.5 million for AIR’s evaluation and $12.5 million to support the counties and regions chosen to participate in the evaluation (FY 2017–18 through 2020–21).
PARENT WEBSITE

While first5california.com has historically served as the main portal for health, education, literacy, and smoking cessation, it has expanded to incorporate more information about early brain development, including activities, downloadable resources, and links to organizations that support families. In early 2017, new content was integrated into the site to support the launch of the “Smarter Birds” campaign, including tips, information, Talk. Read. Sing.® and an array of new activities for babies, toddlers, and preschoolers. In FY 2017–18, the parent site had more than 361,314 visits. Now, in 2018, with a new campaign underway, the parent website will be transforming its look and usability. It will contain more information for parents and caregivers. Additionally, it will join the technology revolution by becoming mobile friendly.

SOCIAL MEDIA

The parent website also links to multiple social media channels, including Facebook, Instagram, Pinterest, and YouTube. Across most platforms, followers receive regular posts that highlight simple, actionable tips and ideas surrounding early brain development and beyond—everything from reading tips to words of encouragement. As of June 2018, First 5 California’s Facebook page has nearly 213,000 followers. Our Instagram and Pinterest platforms continue to grow every year.

KIT FOR NEW PARENTS

The award-winning Kit for New Parents 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, Chinese, Korean, and Vietnamese, and include a health handbook, an early brain development brochure and tip card, and other important information on literacy and learning.

In 2018, First 5 California changed the Kit’s packaging from a box to a colorful, reusable bag containing a health handbook, an early brain development brochure and tip card, a poison control brochure and magnet, and other important information on paid family leave, and literacy and learning. This redesigned Kit also includes the Parent Guide, a new resource written in collaboration with UC Berkeley’s Health Research for Action. The Guide includes tips for parents on keeping their children healthy and safe, developmental milestones, handling emotional and behavioral challenges, finding quality childcare, and much more.

First 5 county commissions are encouraged to add local references and resources to the Kit to help inform parents about services in their own communities.

To date, over 5 million Kits have been distributed throughout California since 2001, with 165,000 distributed this fiscal year alone.
FIRST 5 EXPRESS

Since 2006, First 5 California’s mobile outreach tour has traveled to every corner of the state, reaching out to families and caregivers of children ages 0 to 5 in all 58 counties. This interactive exhibit called the First 5 Express features “Edutainers” who educate parents and caregivers, and entertain children. The Express teaches families about a wide variety of topics, including nutrition, physical activity, oral health, literacy, and most recently, early brain development. In FY 2017–18, the exhibit traveled to 182 schools, libraries, resource centers, community festivals, county fairs, and other family oriented events. The Edutainers directly engaged with more than 39,272 people who walked away with helpful First 5 resources. Over 164,845 newly designed resources were distributed, including a branded hand puppet to give parents and caregivers a tool to spark conversation with their young children; bilingual storybooks to help make reading a regular routine; a healthy portions plate to encourage a balanced diet; and age-appropriate musical instruments to bring out the joy of song. Together with the already established Kit for New Parents; “Fast, Fresh, and Fun Food from First 5” cookbooks; brain development information; and our newest First 5 California branded bilingual book, Three Brainy Birds, families were provided resources to reinforce the healthy behaviors they experienced.

- 44% of events took place in low-income communities.
- 52% of events occurred in communities with diverse populations.
- 43% of events occurred in rural communities.

TOBACCO CESSATION

Through First 5 California’s investment in the California Smokers’ Helpline, parents and caregivers receive information and tools to help them quit smoking and using 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). There also has been a rise in reports of young children accidentally ingesting the nicotine-containing e-liquid used in electronic cigarettes (vapes). To reduce the incidence of these health problems, and to help smokers quit, in FY 2017–18, First 5 California supported the California Smokers’ Helpline with $1.4 million for tobacco cessation services for parents and caregivers of young children. Participants are provided with telephone counseling and also receive free nicotine patches sent directly to their homes. Training also was provided for pediatric care providers to screen for secondhand smoke exposure.

The toll-free Helpline (1-800-NO-BUTTS) provides one-on-one telephone counseling, self-help materials, and referrals to local resources. Helpline counselors follow protocols that were scientifically proven to double the rate of successful long-term quitting. Counselors and callers work together to develop a plan to quit, and continue interaction during the quitting process which increases the likelihood of long-term success. These services are provided in English, Spanish, Chinese (Mandarin and Cantonese), Korean, and Vietnamese. Participants also receive free nicotine patches, sent directly to their homes. (If contraindicated [may not be advisable based on the health status of the caller] as with pregnant smokers, the Helpline first obtains medical approval before dispensing.)

Nationally, there has been a steady decrease over the last 5 years in the number of smokers calling state quit lines, a trend that has been true for the California Smokers’ Helpline as well. As a result, increased efforts are being made to proactively reach out to smokers and connect healthcare systems to the Helpline through automated referrals. The electronic medical record is used to send patient contact information to the Helpline, which then is used to call each smoker and encourage them to enroll in services. In FY 2017–18, 332 First 5-targeted smokers (pregnant, parents or caregivers of children 0 to 5) enrolled in services as a result of being referred directly by healthcare providers. First 5 California’s investment provided Helpline services for a total of 3,301 participants, including 173 pregnant smokers and 3,128 tobacco-using parents or caregivers of children ages 0 to 5 (note: 62 were both pregnant and had a child ages 0 to 5). See Exhibits 10 and 11 for breakdowns of Helpline callers by education and race/ethnicity, respectively.

In addition to supporting direct services to tobacco users, First 5 California also supports training of early...
learning and care providers about the importance of quitting smoking and protecting children from exposure to secondhand smoke. Although no longer a requirement of First 5 California-funded programs, the online tobacco training modules, “Kids and Smoke Don’t Mix” and “Los Niños y el Humo no se Mezclan,” available on the California Smokers’ Helpline website, continue to be used. For the year, a total of 188 individuals completed the online training.

In this fiscal year, First 5 California continued to support the Clinical Effort Against Secondhand Smoke Exposure (CEASE) California project. CEASE trains pediatric practices to screen patients for secondhand smoke exposure and to help smoking parents quit. CEASE has champions at five University of California Medical centers (UC San Diego, UC Davis, UC Los Angeles, UC San Francisco, and UCSF’s Benioff Childrens’ Hospital in Oakland). These champions oversee ongoing training for pediatric residents to identify and intervene with smoking parents, including prescribing quitting aids and referring to the Helpline. In FY 2017–18, four newborn nurseries, two obstetrics practices, and seven outpatient clinics were recruited to participate in CEASE. The CEASE California project generated 389 Helpline referrals for the fiscal year.

One of the trained pediatricians (from the Children’s Health Center, Zuckerberg San Francisco General Hospital) who participates in CEASE talked about the positive impact of the training. “I saw a 5-month-old for a well visit today whose grandmother had been approached about CEASE materials when this infant presented with an upper respiratory infection in urgent care last month. Since then, her grandmother has reduced from one pack daily to one cigarette every other day, is using nicotine replacement, and has been connected with the quit line. This kiddo’s sensitive skin is already better, and no ear infections or upper respiratory infections since the grandmother quit.”

In FY 2017–18, 12.5% of First 5 California Helpline participants stated that they use e-cigarettes. This year, the Helpline has been pilot testing a counseling protocol for e-cigarette users who want to quit smoking. So far, 43 e-cigarette users have been counseled. In addition, recognizing the potential health consequences of exposing young children to these products, First 5 California has supported the Helpline’s development of fact sheets on E-liquid and Children and Quitting E-cigarettes. This fiscal year, two additional fact sheets were added. These were titled: Secondhand E-cigarette Aerosol, and Children and Juul and Suorin (new vaping devices popular among youth). They are available on the Helpline website at www.nobutts.org.
In addition to parents and families, teachers and early childhood caregivers play an essential role in ensuring children are healthy and safe, equipping them with the skills to succeed as children mature physically, cognitively, emotionally, and socially. One of First 5 California’s goals is to ensure all young children in all types of settings are cared for by a highly qualified, well-trained teacher/caregiver.

TRANSFORMING THE WORKFORCE FOR CHILDREN BIRTH THROUGH AGE 8

In 2016, First 5 California and the California Department of Education Early Learning and Care Division (CDE-ELCD) brought together a team of experts and leaders from across California to create an implementation plan (IP) to prepare and support the early childhood workforce throughout their careers. This IP draws on extensive research and is rooted in the recommendations from the Institute of Medicine (IOM) and the National Research Council (NRC) 2015 report, Transforming the Workforce for Children Birth Through Age 8: A Unifying Foundation (TWB8 Report). The report offers extensive research about early childhood development, and the competencies and supports professionals working with young children need.

The IP calls for a system where professionals working with young children have the knowledge, skills, and abilities needed to support each child’s learning and development. The system supports professionals to access and complete training, higher education programs, and ongoing professional development opportunities that enable them to progress along career pathways such as education, childcare, and health. The IP identified three overarching recommendations:

- Permitting and Credentialing—Developing appropriate permitting and credentialing standards, establishing a statewide professional development system, and strengthening preparation programs to help candidates meet certification standards.

- Professional Pathways—Creating a career lattice for the early childhood workforce, identifying challenges and solutions to career advancement, and increasing use of the California ECE Workforce Registry to more effectively track progress and answer key questions about the workforce.

- Higher Education—Identifying needs and ways to support degree-granting institutions, and promoting faculty and administrators to develop and revise coursework to include more practice-based content.

The following progress has been made in addressing the IP recommendations:

- In July 2017, First 5 California awarded a contract to the Child Care Alliance of Los Angeles to expand the Workforce Registry to serve all early childhood educators in early learning settings participating in Quality Counts California, and
Qualified Workforce, which outlines a framework for a funding strategy that will provide reliable, accessible high-quality early care and education for young children from birth to kindergarten entry. This report emphasizes the importance of a highly qualified and adequately compensated workforce that is consistent with the vision outlined in the 2015 TWB8 Report.

**TRAINING AND TECHNICAL ASSISTANCE**

Building a high-quality, effective early childhood workforce relies upon clear standards for a statewide delivery system that ensures all training and coaching meets those standards. In 2017, First 5 California awarded a $12 million contract (through June 2020) to WestEd to partner with state and national experts (University of Florida, University of Washington, Zero to Three, i3 Institute) to create and implement statewide infrastructure and resources for workforce development, quality improvement, and rating that:

- Promote evidence-based practices across California and within consortia implementing continuous quality improvement
- Are responsive to the geographic, cultural, and linguistic diversity of early childhood educators across California
- Ensure sustainability within the long-term vision of California’s early learning system

Task teams comprised of regional representatives, and state and national experts are well-underway developing:

- Pathways for statewide coaching training and certification that build on existing resources and incorporate practice-based coaching processes and demonstration of cultural competence
- Standards for high-quality training grounded in adult learning science, and a statewide process to certify trainer and training quality
- Communities of Practice at the state, regional, and local levels to strengthen collaboration and leadership, and foster a culture of continuous quality improvement
- A family engagement toolkit of resources to promote caregiver-parent relationships that improve child and family outcomes, and help

A Stewardship Group comprised of leaders from First 5 California, CDE-ELCD, California Commission on Teacher Credentialing, and Department of Social Services Community Care Licensing Division provides guidance, coordination, direction, and oversight to the effort. The Stewardship Group also is considering recommendations from the 2018 report, Financing Early Care and Education with a Highly Qualified Workforce.
educators build support for families’ protective factors into their everyday practice

- Resources to help faculty, trainers, coaches, and implementers understand and communicate about Quality Counts California
- Assessor and rating guidelines and supports that enable early learning settings across California to be assessed and rated using consistent standards

SUPPORT FOR EFFECTIVE INTERACTIONS

Quality teacher-child interactions lead to better social and learning outcomes for children. Children are supported and developed through meaningful 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 greater quality interactions with children that result in positive effects on learning. Building on the success of the former Comprehensive Approaches to Raising Educational Standards (CARES) Plus program, First 5 California continued its partnership with Teachstone to help regions build local capacity to offer training on the Classroom Assessment Scoring System™ (CLASS™) tool. More than 300 new CLASS observers became certified to assess quality of interactions using the infant, toddler, and PreK CLASS tools, and 54 educators were certified to provide in-person training to groups of teachers, preparing them to identify, understand, and apply stronger CLASS interactions in their classrooms.

In 2017–18, the CLASS-Based Coaching (CBC) program entered its second year, engaging 52 coaches from across the state to focus on effective adult-child interactions, using CLASS as their coaching lens and language. The year-long CBC program is designed to help coaches increase their competency to support center-based teachers and administrators, family child care providers, and other coaches through individualized facilitation by a Teachstone Specialist, practice-embedded exercises on effective interactions, and group calls and training. This dedicated cadre of coaches joined together around one goal: to ensure children have access to high-quality adult interactions. More than 90 percent of coaches reported the CBC program helped increase their confidence and competency as a coach.
First 5 Alameda County (F5AC) uses Results Based Accountability to measure its contribution to two population level results, namely, children enter kindergarten ready to learn, and children are free from abuse and neglect. F5AC is focused on creating a more user-friendly early childhood system that leverages parent leadership and supports capacity building for providers. F5AC is making strategic investments that recognize the interplay between equity, place, adult health, and child well-being.

- Four Neighborhoods Ready for School grants of $470,000 were awarded to community organizations in West Oakland, San Antonio, Deep East Oakland, and Union City.
- 1,845 referrals were made for home visiting and other early childhood and family supports by Perinatal Hospital Outreach Coordinators stationed at major birthing hospitals.
- 1,444 kindergartners from 13 school districts participated in the latest school readiness study resulting in the first county-wide representative sample.
- 270 childcare centers, 80 family childcare programs, and 119 alternative programs, serving 10,264 children, participated in Quality Counts quality improvement programs. All subsidized early learning programs are now participating.
- The most recent Kindergarten Readiness Study shows that low-income children who attended a high quality ECE program (as rated by Quality Counts) were just as ready for kindergarten as their more affluent peers.
- 21,928 child development screenings were conducted in pediatric practices (65 practices), early care and education settings, and community organizations.
- 2,834 calls for support were received by the Help Me Grow phone line.
- 2,155 providers trained from 80 different agencies with nearly 20,000 hours of training received. Providers reported: 85 percent improved knowledge, 81 percent improved skills, 75 percent implement best or promising practices as a result of training.
- 113 male providers from 80 different agencies have participated in the Fathers Corps Learning Community as of 2018.

First 5 Alpine County Children and Families Commission invests in a variety of services aimed at supporting children prenatal through age 5 and their families. Primary investments include:

- Alpine Early Learning Center: The Alpine Early Learning Center is the only licensed child care center serving Alpine families. It provides early care and education to children as young as 8 weeks old, and continues to serve them until they enter transitional or traditional kindergarten. In FY 17–18, the program served 15 children ages 0 through 5, and 8 primary caregivers.
- Busy Bears Playschool: The Busy Bears Playschool is a non-licensed early care and education program serving children as young as 3 months old through kindergarten. The program offers childcare to working families as well as preschool education to young children to prepare them for successful kindergarten entry. In FY 17–18, the program served 15 children ages 0 through 5. Choices for Children Parent Education Project: The Choices for Children Parent Education Project provides learner-centered education to parents and caregivers. Workshops center on increasing the knowledge amongst parents and caregivers about research-based child rearing and child development practices. In FY 17–18, the program served 22 children ages 0 through 5, 16 primary caregivers, 7 other family members, and 5 early care and education provider. In FY 18–19, the Commission is expanding its evaluation efforts to move beyond process measures and focus on outcomes. It looks forward to utilizing the Protective Factors Framework, developmental screenings, and kindergarten readiness assessments to support these efforts.

Amador County

In order to sustain lasting improvements in the lives of Amador’s youngest residents, First 5 partners with local and state organizations, private and public agencies, and families to...
improve systems and provide access to information, resources, and services.

First 5 Amador oversees the Amador-Calaveras Perinatal Wellness Coalition by coordinating outreach, education, and direct services for families experiencing perinatal mood and anxiety disorders. This initiative has been extremely successful in addressing a topic that, for too long, was not acknowledged.

First 5 Amador spearheads Amador Quality for Kids; an initiative that provides ongoing training opportunities and quality improvement support for community-based organizations, family childcare providers, and home visitors. A primary objective of Amador Quality for Kids is establishing a sustainable system that supports family engagement and early identification utilizing a parent-led developmental screening tool. Amador Quality for Kids continues to encourage participation by licensed providers and community-based programs in ongoing early care and education quality improvement strategies.

To ensure First 5 Amador reaches families countywide, the commission continues to support universal newborn home visiting and family resource centers located in unincorporated areas.

Butte County

First 5 Butte is proud to provide leadership and funding to Butte Thrives, the Butte County coalition addressing Adverse Childhood Experiences (ACEs). The coalition has been in place since 2015, and First 5 has dedicated staff time to provide facilitation and backbone support to meetings and activities, as well as funds for outreach and education, training, travel, media, and marketing. During FY 2017–18, Butte Thrives has accomplished many important activities. Leadership developed a standardized slide-deck for any member to customize and use to provide outreach and training about ACEs science. Dozens of trainings to hundreds of stakeholders were conducted throughout the county in a variety of sectors. A community awareness campaign was launched, utilizing bus tails, billboards, and social media. With the support of California State University Chico Tehama Group Communications students, Butte Thrives members developed several “Faces of Aces,” short videos of local Thrives members who tell their own stories about ACEs and resilience. The videos have been very popular, and have helped continue to expand the conversation and destigmatize childhood trauma. The videos can be viewed on the Tehama Group YouTube channel. First 5 staff was instrumental in facilitating a KQED News story about a local mother’s ACEs and resilience, including how she has been supported by First 5. The story can be viewed at https://www.kqed.org/news/11687798. Leadership and consistency are critical elements of any successful collective impact endeavor. First 5 Butte County recognizes the importance of supporting community coalitions and systems change efforts through contributions of leadership and staff engagement as well as funding.

Calaveras County

First 5 Calaveras successfully continues to facilitate partnerships and fund strategies that strengthen families and support them in raising healthy young children. Local trauma-informed community efforts continued through partnerships with Prevent Child Abuse Calaveras and Behavioral Health Services (Mental Health Services Act–Prop 63 funding). Ages and Stage Questionnaire developmental screenings were provided to assess the impact of trauma on children in the child welfare system with referrals made. Staff participated in 87 Child Family Team Meetings with families in the child welfare system. Over 70 training sessions for 445 adults were provided for parents, educators, and family service professionals on topics centered on resilient and healthy families and trauma-informed practices. Over 150 hours of counseling was provided to 27 parents to assist with their child’s emotional/behavioral development. Raising A Reader Home Visiting expanded access to quality early education and provided developmental assessments for 32 children that had preschool enrollment barriers.

As active members of the Calaveras Oral Task Force, First 5 Calaveras helps expand access to dental services through the Children’s Dental Project which provides screenings, cleanings, fluoride treatments, and oral health education to over 320 children.

Building Healthy Kids was added to help sustain healthy eating habits by providing early learning sites with nutrition curriculum and building of children’s gardens. This complements the Kids Farmers Market which provides hands-on cooking experiences, healthy recipes, and gives children fresh produce to take home to their families. Talk Read Sing Calaveras added the Little Leapers Early Literacy Program which engages libraries in providing early learning Science, Technology, Engineering, and Mathematics kits as well as sharing Talk. Read. Sing. messaging and information. An additional five Little Free Libraries were placed in rural areas, and over 1,700 new books were distributed to young children.

Contra Costa County

During FY 2017–18, First 5 (F5) Contra Costa led a number of important efforts to strengthen the systems that serve children and families, and raised awareness about the ongoing needs Contra Costa County children face.

- F5 Contra Costa led the development of a trauma-informed curriculum and training for organizations serving young children and their families. The curriculum was designed to assist agencies who serve children ages 0 to 5 to understand the impact of trauma and traumatic stress on children’s development and learning, and how to develop a trauma-sensitive behavior plan. Over 120 professionals attended
the trainings in FY 2017–18.

- F5 Contra Costa’s Community Engagement initiative supported and organized under-represented communities in advocating for local park improvements. As a result, local governments in Antioch, Concord, Pittsburg, and San Pablo have invested over $2.5 million in park improvements, including play structures, beautification, and more.

- F5 Contra Costa’s Early Childhood Education program is steadily improving quality of childcare delivery in the county as demonstrated by the program’s rating system. Nearly 70 percent of rated sites are rated as a level 4 or 5.

- Following a careful assessment of family needs, F5 Contra Costa purchased a large facility in Pittsburg for a new family resource center targeted to families with young children, which will open in early 2019. In addition, First 5 Contra Costa’s Antioch Center was relocated to a larger, more central location.

- F5 Contra Costa released its Kindergarten Readiness Assessment, which showed low rates of children having the necessary skills to be successful in certain areas of the county.

To highlight the report and build partnerships, F5 Contra Costa held a policy breakfast in May. The event convened over 100 local leaders and partners to discuss the report, including policy recommendations targeted at key stakeholders.

**Del Norte County**

First 5 Del Norte (F5DN) works to support children age 0 to 5 and their families on the far northern corner of California. In 2017–18, F5DN focused significant attention on childhood trauma and resilience through community collaboration and new program supports. The Family Resource Center of the Redwoods, F5DN’s largest grantee, started offering monthly Parent Cafes throughout the county. Parent Cafes teach the Strengthening Families protective factors, building resilience in parents and families. F5DN also funded a trauma-informed play group at a domestic violence shelter and a fully-inclusive play group through a mini-grant program. In collaboration with Del Norte Child Abuse Prevention Council, F5DN provided presentations about the science of adverse childhood experiences and resilience to the County Board of Supervisors, the Chamber of Commerce, staff at the Department of Health and Human Services, child welfare staff, preschool teachers, parents, high school and middle school students, and other community groups.

Many of these presentations were paired with the Brain Architecture Game to provide a hands-on experience of how a child’s experiences affect brain development.

In addition to the focus on trauma, F5DN continued to work to support parents and families in other ways. F5DN worked with the Department of Mental Health to prepare a proposal for Mental Health Services Act Innovation funding to expand the texting program, Ready4K, to include local resources and mental health supports. The FRC of the Redwoods, working with the local Community Food Council (F5DN is their fiscal sponsor), secured $240,000 in funding through a Community Development Block Grant to open a choice food pantry that served over 800 households in the first three months. F5DN is proud to host this concrete support for local income families in Del Norte County.

**El Dorado County**

The First 5 El Dorado Children and Families Commission has invested in areas of practice that support parents as their children’s first teacher. These investments include: 1) Ready to Read at Your Library, an early literacy program operated by local libraries; 2) Together We Grow, a program directed at providing families with structured activities to support their child’s optimal development; 3) High 5 for Quality, a program focused on ensuring early care and education providers have the support needed to increase their quality of care; and 4) Children’s Health, a program that utilizes health advocates to support access to health and dental care for children and families. Each of these programs are required to operate within the structure of Community Hubs and to provide services which are aligned with the Strengthening Families Protective Factors framework. During 2017–2018, a total of 4,678 (duplicated across programs) individuals were provided with First 5-funded services, resulting in the following accomplishments:

- Families are using positive strategies to guide and teach their children. Seventy-eight percent (78%) of parents served who completed a family survey reported they or another family member reads with their child each day.

- Children are receiving preventive health care. Ninety-seven percent (97%) of parents served who completed a family survey reported their children birth through 5 had received timely well child visits.

- Children are being screened for developmental delays. A total of 612 children received either an ASQ or ASQ:SE developmental screening.

Providers are focused on quality early care and education service provision.
The High 5 for Quality program supported more early care and education providers this year than last, and of those that participated, 16 sites realized an improvement in their QRIS rankings.

**Fresno County**

First 5 Fresno County (F5FC) works tirelessly to lift up young children to their full potential. During the past fiscal year, some of the most significant accomplishments include: Help Me Grow (HMG); Being a member of the HMG Fresno County Leadership Team, FSFC works together with cross-sector partners to enhance a comprehensive, systems-level approach to support the success of young children by connecting them to timely services and supports. This year, the HMG Fresno County Leadership Team participated in strategic planning with the intended outcome of developing a guide for implementation. The process helped to develop a plan: 1) to increase clarity across partners; 2) to establish measurable priorities and outcomes; and 3) of financial sustainability of the HMG model for Fresno County. Upon the competition of the strategic planning, a Request for Quotations was released, and Fresno County Superintendent of Schools was selected to serve as the organizing entity responsible for providing administrative and fiscal oversight and facilitation of planning and implementation of the HMG system.

Public Education Campaign: This was the first year of implementation for the Every Milestone Matters Public Education Campaign aimed to increase public education and awareness of early childhood development and share the importance of positive parent and adult interaction in a child’s first five years of life. The multi-media campaign is firmly grounded in people, events, and services primarily targeting multicultural parents, between the ages 18–44, of children ages 0 to 5 in Fresno County, including those fluent in English, Spanish, and Hmong.

Alignment of Early Childhood Services in Rural Fresno County: In early 2017, FSFC commissioned a Rural Community Needs Assessment report for the communities of Huron and Mendota within Fresno County.

The report identified challenges, barriers, gaps, and strategies to focus on in order to improve the system of care for families with young children in those two rural communities. As a result, F5FC plans to implement the recommendations and released funding opportunities in the summer of 2018 to identify an agency or agencies to lead and implement the coordination and execution of the goals identified by community stakeholders set to enhance and support the early childhood service system in rural Fresno County.

**Humboldt County**

Humboldt County, along with Mendocino, has the highest percentage of residents with four or more Adverse Childhood Experiences (ACEs) which puts the county at high risk for negative physical and mental health outcomes. In 2017, the Humboldt County Board of Supervisors voted to use a portion of local marijuana tax monies to fund activities focused on the mental health and well-being of young children and their families during FY 2017–18, through the First 5 Humboldt and Humboldt County Department of Health and Human Services ACEs Collaborative Partnership. The Partnership consists of two major parts.

1. First 5 Humboldt projects and activities focused on strengthening Humboldt County’s capacity to address and prevent ACEs as well as promote resilience among children ages 0 to 5 and their families.
2. Humboldt County Department Health and Human Services/First 5 Humboldt ACEs Collaborative Partnership grantees projects focused on serving pregnant women and youth, ages 0 to 8 and their families to help prevent ACEs, increase the awareness of ACEs, and mitigate the impacts of ACEs in Humboldt County. Projects enhanced and provided new community services focused on young children and families through the 2017–2018 ACEs Collaborative Partnership. In their fiscal year 2018–2019 budget, the Humboldt County Board of Supervisors committed to on-going funding of the partnership. First 5 Humboldt funds Early Childhood Mental Health Specialists to provide direct support to families at Humboldt County playgroups, in part, as a way to help prevent ACEs and promote resilience. At playgroup, specialists answer questions caregivers have about their child’s development and behavior, provide parent education, provide resource and referral assistance, and support developmental screening. More intensive support is provided to families on an as-needed basis via office and/or home visits. The support can include providing assessments, infant massage, addressing sleep issues, and more individualized support. The 2017 Playgroup Survey data show that parents had statistically significant positive outcomes (results range from p=0.02 to p=1.59 x 10^-30). Parents who talked with a specialist at playgroup had, among other things: Learned more about behaviors typical for their child’s age, dealt better with parenting issues, felt more supported as a parent, felt less stress, knew more about where to access services, and were more likely to have someone to talk with about concerns/frustrations than parents who hadn’t talked with a specialist.

**Imperial County**

First 5 Imperial continues to sustain programs committed to improving the lives of children ages 0 to 5 and their families: programs that ranged from direct support to strengthen families, to increased investments in early care and education settings, to funding to improve child health. One example of a significant impact is demonstrated...
by over a decade of investments to develop programs designed to increase services to children suffering from asthma/asthma-like symptoms. Asthma rates are significantly higher in Imperial County compared to the rest of the state, though the immediate concern is the extraordinarily high hospitalization rates. The Child Asthma Project offered case management, environmental assessment, and treatment services to address this issue with 87 families. The significant benefits of these interventions included substantial decreases in children that experienced emergency room visits, and/or hospitalizations, and reported missing days of instruction due to the condition, in addition to noteworthy increases in the proportion of parents that were administering asthma medications as prescribed and that reported feeling confident in managing their child’s condition. Other meaningful accomplishments for FY 2017–18 include extensive support for 84 children in foster care, preschool inclusion services for 18 children with special needs, mobile library storyline activities that provided 3 to 5 books to over 3,000 children attending preschool programs, 30 weeks of home instruction support to 77 children cared for by a parent or exempt care provider, investments to increase lactation rates through progress on the local hospitals adopting Baby Friendly® standards, 10 preschool nutrition/fitness programs to address childhood overweight, planning and development for 2 new Family Place Libraries, continuous quality improvement for 65 childcare sites, and parenting programs for over 200 families.

Inyo County

First 5 Inyo County focuses on strategies to improve early child health and family strengthening, using evidence-based programs and evaluation tools to implement services countywide. Activities to improve early child health focused on Ages and Stages universal developmental screenings and efforts to support family strengthening focused on implementing Triple P (Positive Parenting Program). In FY 2017–18, First 5 Inyo County served 621 children and 216 parents in all their programming, including positive parenting, developmental screenings, newborn support, literacy outreach, childcare advocacy, and other community outreaches.

Kings County

During this past fiscal year, one of the most significant accomplishments of First 5 Kings County was the First 5 Kings County Family Resource Centers. With a funding investment of $718,931, the Kings County Family Resource Centers provide Early Childhood Education, Home Visitation, Developmental Screening, Parent Education and Referral services. During FY 2017–18, 1062 children ages 0 to 5 and 1,159 parents, siblings and caregivers who live in Kings County visited an FRC. The total number of services delivered by the 5 funded FRCs during FY 2017–18 was 27,306.

Other highlights that took place during FY 2017–18 included the following:
- The Linkages 2 Learning project had 2,472 school readiness services. This includes a spring orientation and a fall orientation, and receiving a children’s school readiness backpacks.
- The Kings County CARES About Quality (KCCAQ) project provided support, ranking, technical assistance, and materials to 92 preschool and childcare sites. That is a 48 percent increase over FY 2016–17.
- The local CARES project provided training and professional growth advising to 297 professionals working in the early childhood education field.
Lake County

In 2017–18, First 5 Lake invested in programs serving 2,677 children ages 0 to 5 which equates to 59 percent of all Lake County children in this age group. These are some of the highlights detailing how these children and their families benefitted from First 5 Lake’s investment: 194 parents completed Nurturing Parenting classes and 17 new facilitators were trained to keep the program in operation and help it expand. A total of 21,209 children’s books were distributed through Imagination Library. Three hundred Lake County adults accessed a new website, www.lakebloom.org, and its related Facebook page with information about activities, games, resources, and more to promote children’s kindergarten readiness. “Bloom into Kindergarten” booklets were created with the help of local kindergarten and preschool teachers and distributed to families. Over 70 families received transportation assistance to access health care services. Six homeless pregnant/parenting youth received housing and intensive support services, including parenting education. Nearly 300 preschool children received Second Step lessons from AmeriCorps members to build their social, emotional, and interpersonal skills. Two Early Learning Centers provided a space for parents to play with their children and assess their development. Twenty early care and education (ECE) sites participated in the local QRIS coaching and improvement program and 70 ECE providers participated in the Quality Care Counts conference. Over 400 children ages 2 to 5 were screened for dental issues, and oral health and nutrition education was provided to 341 children and 56 parents in local preschools. Nearly 300 children ages 0 to 5 were screened for developmental issues, of which 32 percent were identified with developmental needs requiring follow-up. First 5 Lake also began the process of drafting a new five-year strategic plan by hosting a convening of over 30 members of the community to provide insight into the most pressing issues facing young children and their families in the county.

Lassen County

Through its investments, the goal of First 5 Lassen is to fund programs aimed at ensuring that all children enter school healthy and ready to learn. During FY 2017–18, the most significant accomplishment of First 5 Lassen was its home visiting program implemented by Pathways to Child & Family Excellence, Inc. With a funding investment of $265,000, this program provided home visiting services to high risk families. The program is designed to improve family support and strengthening as well as improvement in child development, health, and systems of care. Weekly parent education and child development lessons using the Parents as Teachers (PAT) curriculum are provided. Screenings and assessments are completed on both children and parents to determine an individualized approach to addressing child, parent and family needs. The Home Visiting Program served 97 children aged 0 to 5, and 97 parents and caregivers in FY 2017–18. Another 37 children (siblings 6 years or older) participated in the program, increasing the total number of children served during the year to 134. The number of service units provided was 1,947. Home visits occurred on a weekly basis, using the PAT curriculum. Home visiting is having a positive impact on family functioning and child development. The Life Skills Progression tool is used by home visitors to develop a profile of family strengths and needs. Children receive developmental screenings as well as Ages and Stages Questionnaire (ASQ) and ASQ Social-Emotional screenings. All results are showing improvement in the families and children being served. Parent surveys show an overall 99% satisfaction rate with services received. Pathways collaborates with multiple agencies, makes referrals, and connects families to specialized services as needs are identified.

Madera County

First 5 Madera County aims to ensure that all children in the county are healthy, grow up in a strong family environment, and are continuously learning. It is the goal of the local county commission to fund meaningful and sustainable programs that will have a lasting positive impact on the community. The Madera Unified Parent Education Program provides preventative strategies to the parents of preschool children towards bridging the gap between parent involvement at home and in classroom settings. Parents are offered monthly opportunities to attend educational workshops where they learn parent involvement strategies that can be utilized both at home and in the classroom. Parent and Child Time (PACT) is an opportunity for parents to implement the newly learned strategies in the classroom with their child. The success of the Parent Education Program is highly driven by staff dedication to identifying the needs of the parents and delivering services throughout the year in response. The Parent Education Program utilizes specific evidence-based assessment tools to measure program progress and outcomes such as the Desired Results Developmental Profile-15 (DRDP-15), Center on Social Emotional Foundations for Early Learning (CSEFEL), and the Ages and Stages Questionnaire (ASQ-3...
and ASQSE-2). During FY 2016–17, a total of 909 preschool parents and 563 students received services. A total of 31 children received a developmental and/or behavior intervention referral by teaching staff throughout the year. Intervention services were successfully provided to 27% (n=8) of these students. Parents were offered 84 opportunities to attend learning workshops. A total of 10 PACT activities were offered with a cumulative total of 2,126 parents attending throughout the year. The outcomes of this program include: 1) increased parent involvement; 2) noteworthy DRDP scores in targeted developmental domains; and 3) enhanced understanding of parental needs. The Parent Education Program continues to be a significant contributor to improving parental involvement in the classroom and home environment.

Marin County

First 5 Marin has taken “community outreach” to a new level—they formalized “convenings” by scheduling monthly public policy forums that are offered to all community partners. Participants attend at no cost, and even get a little breakfast. The event series is called the “Marin Communications Forum.”

With just two employees, First 5 Marin has found an efficient and cost-effective way of offering educational presentations, trainings, professional development opportunities, and community interest events to their colleagues. They select important “First 5 topics” and trending issues, identify speakers, and draft an agenda for a 2 to 3 hour workshop. A local hotel handles most of the on-site logistics. Events are announced on Facebook and invitations are made on Constant Contact (which also manages the registrations).

The forums offer important networking opportunities; First 5 Marin connects with their community partners, and colleagues connect with one another.

Topics range from issues directly related to First 5 (The Pre-K to K-12 Transition) to broad policy discussions like racial disparities. In the last year, there also were sessions on children and technology (with Common Sense Media), childhood poverty and the safety net (with the Public Policy Institute of California), Latino civic engagement; affordable housing, low-cost legal services, childhood mental health, cannabis, and financial literacy.

The Marin Communications Forum is now well-known enough that partners ask First 5 Marin to schedule an event for their project or topic of interest. Most recently, First 5 Marin partnered with their county Health and Human Services staff, the local food bank, and others to host an event about hunger, food insecurity and reducing “missing meals.” The forums are now a key component of many countywide collaborative efforts.

Mariposa County

During this past year, one of the most significant accomplishments of First 5 Mariposa was the School Readiness Program, funded for $223,542. The School Readiness Program serves two preschools—Catheys Valley and Lake Don Pedro. The preschools provide an outstanding play-based preschool program that prepares the children for kindergarten. The facilities, curriculum, and activities are creative, educational, and focus on developmentally appropriate activities. This year there was a continued focus on Science, Engineering, Technology, and Math (STEM). In addition, the staff worked closely with the parents and shared Desired Results Developmental Profile (DRDP) and Classroom Assessment Scoring System (CLASS) assessments, highlights of growth/accomplishments and developmental strategies during the parent conference sessions.

Another funded program that was highly successful was the Children’s Dental Health Program. The program was funded for $30,000 for FY 2017–2018. This program provided additional dental screenings by the Dental Hygienist, dental services for children with severe dental problems, and referrals for dental screenings treatment. Three local dentists provided reduced cost dental services to families who were in crisis and without resources.

Another funded program that was highly successful was the instructional aide hired to work in the Mariposa Elementary School Transitional Kindergarten classroom. The program was funded for $16,882 for FY 2017–2018. The instructional aide worked with the reading program/assessments, and she provided extra assistance to children who were having difficulty. Having the aide in the classroom also provided time for the teacher to work with the children individually. The class had 25 Transitional Kindergarten students who ranged in ages of 4 to 6 years. Having an aide made it possible for the students to work on enrichment projects and technology.

First 5 Mariposa appreciated the First 5 Express Van coming to Lake Don Pedro Preschool and Mariposa County. The activities and presentations were well received, and the families enjoyed participating with their children. The First 5 Express is a bilingual children’s activity center that travels across California to inspire families to understand the importance of a child’s earliest years and the positive impact they can have on brain development through talking, reading, and singing.

The last exciting event that First 5 Mariposa would like to highlight is the Hero Award. This is a long-standing honor for First 5 Mariposa—celebrating volunteers and folks who enjoy working with children and making a difference in the community. This year First 5 Mariposa honored Carol Bozsik (Lake Don Pedro Preschool and Mariposa County).
ACE Overcomers, which provides Sierra Vista Child and Family tribal members. With many of their staff in-house childcare for their staff and family friendly workplace by providing Cahto Tribe to help them build a more Mendocino was approached by the teachers, social workers, hospital staff, and Triple P Transitions and Triple P Lifestyles. Transitions is a group that helps parents/families cope with changes or “transitions” in their lives (e.g., divorce, foster parenting, etc.), while Lifestyles takes the traditional Triple P group and adds a component on health and nutrition. First 5 Mendocino received a proclamation from the Mendocino County Board of Supervisors and launched Triple P Transitions and Triple P Lifestyles. Transitions is a group that helps parents/families cope with changes or “transitions” in their lives (e.g., divorce, foster parenting, etc.), while Lifestyles takes the traditional Triple P group and adds a component on health and nutrition. First 5 Mendocino continued to hold trainings for community resiliency skills from the Trauma Resource Institute. Trainings were expanded out to the coastal regions. Follow-up support was provided to local facilitators that were trained to offer skills in the community. These skills proved to be incredibly instrumental, as Mendocino County faced devastating fires multiple years in a row. In June, First 5 Mendocino held a one-day conference: Understanding Your Trauma Through the Science of Resiliency. Dr. Linda Chamberlain spoke on health issues related to trauma and the implications for brain development. During the conference, Graphic Recorder Maria Pappas, captured the material in a visual representation to reinforce learning and to speak to those that are visual learners. Attendees at this free conference included preschool teachers, social workers, hospital staff, and home visitors. Additionally, First 5 Mendocino was approached by the Cahto Tribe to help them build a more family friendly workplace by providing in-house childcare for their staff and tribal members. With many of their staff recently having children, the Cahto Tribe wanted to give the family members returning to work some support, and with childcare centers being scarce in their rural area, they felt it was in the best interest for everyone to set up a daycare center on site.

Mendocino County

During the past fiscal year, First 5 Mendocino continued to help build the professional skills of those who work with Mendocino County’s youngest and most vulnerable. This was done through a conference, Triple P trainings, and Community Resiliency Model® trainings, all targeted to decrease the negative effects on a child’s brain from trauma. January 2018 was Mendocino County’s first ever Positive Parenting Awareness Month. First 5 Mendocino received a proclamation from the Mendocino County Board of Supervisors and launched Triple P Transitions and Triple P Lifestyles. Transitions is a group that helps parents/families cope with changes or “transitions” in their lives (e.g., divorce, foster parenting, etc.), while Lifestyles takes the traditional Triple P group and adds a component on health and nutrition. First 5 Mendocino continued to hold trainings for community resiliency skills from the Trauma Resource Institute. Trainings were expanded out to the coastal regions. Follow-up support was provided to local facilitators that were trained to offer skills in the community. These skills proved to be incredibly instrumental, as Mendocino County faced devastating fires multiple years in a row. In June, First 5 Mendocino held a one-day conference: Understanding Your Trauma Through the Science of Resiliency. Dr. Linda Chamberlain spoke on health issues related to trauma and the implications for brain development. During the conference, Graphic Recorder Maria Pappas, captured the material in a visual representation to reinforce learning and to speak to those that are visual learners. Attendees at this free conference included preschool teachers, social workers, hospital staff, and home visitors. Additionally, First 5 Mendocino was approached by the Cahto Tribe to help them build a more family friendly workplace by providing in-house childcare for their staff and tribal members. With many of their staff recently having children, the Cahto Tribe wanted to give the family members returning to work some support, and with childcare centers being scarce in their rural area, they felt it was in the best interest for everyone to set up a daycare center on site.

Merced County

First 5 Merced County (F5MC) spent approximately $1.8 million to support services for more than 8,800 children, caregivers, and providers to build and enhance the five protective factors that promote optimal development and enhance the system of effective family support/strengthening programs. Examples of funded family-strengthening programs include:

- ACE Overcomers, which provides comprehensive services to at-risk families to help them overcome adverse childhood experiences
- Sierra Vista Child and Family Services, which provides a continuum of community-based mental health services children and families
- Project Prevention’s Hmong Culture Camp, which supports Hmong-English dual-language learning for preschool-aged children

Further, F5MC shifted its focus from direct services reliant on F5MC funding to leveraged and sustainable direct services and systems change efforts. These new efforts are innovative, quality interventions for family support that result in long-term change to an organization’s culture, professional norms, policies, procedures, or increase systems efficiencies that impact young children and their families. One example of a systems-focused program funded by F5MC is Afra Maternal/Child Church-based Health Network. The Network addresses health disparities in Merced County by connecting women of color who are pregnant or mothers of young children with existing community services. Broader activities, including the Children’s Summit, Early Educator’s Institute, the Week of the Young Child event, local program/event sponsorships, and Hands on Heroes, aim to increase awareness and advocacy for early childhood, while also increasing access to high-quality environments for families.

Modoc County

First 5 Modoc continues to ensure the optimal health, development, and well-being of children ages 0 to 5 and their families by continually investing in programs that enable families to be primary caregivers and teachers to their children. Highlights from First 5 Modoc investments during FY 2017–18 include: The School Readiness and Strong Start programs, an investment of $123,160 that funded two separate early education programs, both providing high-quality educational experiences for 20 children throughout Modoc County. The Tulelake/Newell Family Resource Center, an investment of $20,337, strengthened families and promoted self-sufficiency through services and activities. The FRC provided parenting classes, resource and referral, case management, playgroups, health and nutrition benefit access, and safety education to serve a total of 72 children and 61 adults. The Healthy Beginnings program, an investment of $31,380, is a collaborative project between Public Health and Behavioral Health. This program provided families with access to positive parenting education, case management, and nutrition and health related topics. Forty-four children and 64 adults were served. The Dollywood Imagination Library, an investment of $4,729, provided age appropriate books at no-cost to participating families each month until the age of five years old. The program is designed to inspire a love of reading and it encourages family participation.
Over 230 children were enrolled this year. The BABIES (Bathrooms Accessible in Every Situation) project, an investment of $536, implemented improvements to systems of care with equal access to public restroom facilities on a year-round basis to families with children ages 0 to 5. Thanks to strong community partnerships and collaborative efforts, First 5 Modoc’s investments are successful and continue to provide much needed support and services to Modoc County.

**Mono County**

First 5 Mono County’s goal is to enhance the network of support services for families with children ages 0 to 5 years. To this end, the commission invested in and leveraged funding for: Child Development: school readiness, preschool, and child care quality; Family Functioning: family behavioral health and home visiting; and Child Health: oral health and child safety. Without the First 5 California Small Population County Funding Augmentations the majority of our programs could not be sustained. Home Visiting using the Parents as Teachers curriculum supported parents in myriad of ways and continues to be the commission’s largest investment. Transition to Kindergarten activities supported families with Kindergarten Round Up, Summer Bridge (a two-week classroom-based program for incoming kindergartners), and school readiness assessments. Early literacy was supported with free book distribution from First Book and the Raising a Reader program. Peapod Playgroups served 23 percent of children ages 0 to 5 in the county, provided an opportunity to socialize, and supported child development. Topical fluoride varnish application was provided twice in early learning settings to support oral health. Health and Safety Fairs provided families connections to resources. Child safety was improved through Safe Kids California, Mono Partners, with free car seat and bike helmet distribution. Ages and Stages developmental screenings were administered through Improve and Maximize Programs So All Children Thrive, and Home Visiting. A half million dollars in federal funding for childcare was accessed by a successful Community Development Block Brant application completed by First 5 in partnership with the County and Eastern Sierra Unified School District to operate two centers for two years.

**Monterey County**

First 5 Monterey County (F5MC) invested $5.19 million in FY 2017–18, providing services to about 21,400 young children, parents, and providers. This was the first year of a new strategic plan where F5MC focused its time and resources to establish a new way of supporting the system of care for families in the county. F5MC’s strategies include (a) policy and advocacy, (b) funding Integrated Service Collaboratives, (c) building capacity for the Collaboratives, service providers, and students pursuing careers in early childhood, (d) increasing funding available for early childhood in the county, and (e) evaluating the impact of the work. In FY 2017–18, five multi-year grants began for Integrated Service Collaboratives enabling local networks of local agencies serving young children and their families to offer screening, referrals, and care coordination to improve family access to cohesive services. Other system-oriented efforts facilitated local policy and legislative shifts. F5MC worked to insert early childhood policies into city general plans. The City of Gonzales adopted policies that include providing city childcare subsidies, creating a childcare task force, and supporting professional development opportunities for childcare providers. Also, F5MC and early childhood advocates in Monterey, Santa Cruz, and San Benito helped create the Central Coast Early Childhood Policy Network. With 60 participants representing 30 different organizations throughout the participating counties, the Network used the First 5 Association of California platform as a basis to create a unique, joint regional policy platform. F5MC actively participated in county community efforts around the allocation of cannabis revenue. Activities included community listening sessions in each supervisorial district, phone surveys, and an online poll. Thanks in part to years of F5MC consciousness raising, early learning and preschools were identified as top priorities.

**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 of Napa County will enter school healthy and ready to learn. During FY 2017–18, First 5 Napa County made a $132,000 investment in programs aimed at building strong families. ParentsCAN received $50,000 of that investment to implement an integrated protocol with
health care providers to screen children and provide consultation and referrals to families, so children have access to the appropriate developmental and mental health services they need.

In 2017–18, ParentsCAN coordinated the screening of 234 children using the Ages and Stages Questionnaire, ASQ and ASQ Social Emotional:
- 130 screenings were completed at health care provider visits.
- 104 screenings were conducted by ParentsCAN.

Based on the screening results, ParentsCAN conducted informational consults with families in need and made referrals to treatment and services when necessary (e.g., basic safety net services, community service providers, health care providers).
- 188 informational consults were conducted with families.
- 62 referrals were made for treatment and services.

Parents reported that they feel more comfortable advocating for their children and have more support and information needed to make informed decisions about treatment and services for their children.
- 95% had an increased understanding of their child’s disability/diagnosis.
- 95% were more familiar with local services and supports for their child.
- 85% felt more confident working with health and social service professionals.

**Nevada County**

To uphold their vision that Nevada County children will thrive, First 5 Nevada County (FSNC) fosters and supports programs that promote health, wellness, and child development for children ages 0 to 5 and their parents through four initiatives: early learning, family strengthening, communication and outreach, and capacity building and systems change.

In October 2017, FSNC received a grant from Nevada County Public Health to provide Parent Cafés focused on developing the five protective factors, growing parent leadership, and creating connections among parents. FSNC rolled out the café program by hosting Partner Cafés which were attended by 26 family service agency providers and 24 child care providers, giving them an understanding of and enthusiasm for the Parent Café model so that they could more effectively tell parents about the cafés. Through June 30, 2018, FSNC hosted 20 cafés attended by 46 parents (unduplicated). Four parents have been trained as table hosts, a leadership position crucial to the functioning of the cafés for which they receive a stipend. FSNC collaborated with two non-profits, one of which provided the space for the cafés and one of which added the cafés to a monthly home-visiting client socialization gathering.

A focus group held with café participants by an outside evaluator showed parents value the cafés and feel that they have increased the amount of support in their lives, their self-care, and their understanding of parenting and child development. Parents said:
- “Reaching out to other people is hard. It [the Family Cafés] makes me reach out more.”
- “Talking about challenges together feels really, really, really good. It’s validating; you feel connected, and you don’t feel as alone.” “It’s totally brought my stress level down.”
- “Here we have a deeper facet of non-judgment. You can talk about how hard it is.”

**Orange County**

The Children and Families Commission of Orange County is strengthening the early childhood infrastructure through systems-level impacts that lead to better integration and coordination among agencies that serve young children and their families. To that end, two successful examples include the Intergovernmental Transfer (IGT) funding transactions and the Early Development Index (EDI) school readiness assessment tool. The Commission partners with the county’s managed care organization, CalOptima, and has completed three transactions drawing down close to $4 million of federal Medicaid funding for reimbursement of uncompensated care for Medi-Cal beneficiaries. These transactions have leveraged federal funding that support investments in children’s health and alleviate program funding demands on the Commission’s declining budget. The Commission funds MOMS Orange County to improve rates of early prenatal care and birth outcomes and Help Me Grow Orange County’s developmental screening program to improve early identification and intervention strategies for young children with behavioral and developmental concerns and connect children with appropriated services. The EDI has been fully implemented at 379 schools with a kindergarten population to assess kindergarten student’s readiness for school in five key developmental areas. With 28,717 valid EDI records completed this year, Orange County is the only county in the nation with 100 percent EDI participation of its public schools and with a countywide dataset tracking the school readiness of incoming kindergarten students. The EDI data are used by nonprofit, government, and business organizations to monitor populations of children over time, report on populations of children in different communities, predict how groups of children will do in elementary school, and inform policies concerning young children and their families.

**Plumas County**

First 5 Plumas County Children and Families Commission’s primary strategy in realizing its vision and fulfilling its mission is through the support of home-visiting services. Currently, the Commission funds four direct service grants that provide home visiting services to families (including foster parents) who have children ages 0 to 5. All programs utilize the Strengthening Families™ Protective Factors framework to support and measure success. During
FY 2017–18, First 5 Plumas County investments in home visiting resulted in the following accomplishments:

• Families are engaged in home-visiting services
  - A total of 106 families were provided with home visiting services, 31 of which received integrated care.
  - A total of 852 service contacts were made by home visitors in which 4,237 services were provided.
  - Over half of the children were screened using the Ages and Stages Questionnaire, while two were screened using the Social Emotional version of this tool.
• Families are stronger as a result of home-visiting services
  - All of the home-visiting programs identify outcomes achievements related to each of the five Strengthening Families™ Protective Factors. In each of the protective factors, there was an increase in parental perception of skills, supports, and knowledge after having received home-visiting services.
  - Over 90 percent of parents agreed that the program has helped them improve their parenting skills.
  - Over 80 percent of parents agreed that the program has helped them reduce the stress in their lives. Families accessing services report a high level of satisfaction. An overwhelming majority of parents who completed the questions related to client satisfaction at the end of the Protective Factors survey were very satisfied with the home-visiting program.
  - Over 95 percent of parents agreed that their overall satisfaction with services was very good and that their ideas and opinions are welcomed and included in the program.

**Riverside County**

Strategic partnerships have been the focus in Riverside County to address sustainability in many investments. Emphasis has been placed on areas that enhance increased access to quality early learning environments for children and strengthening the professional development system for early care and education providers, promoting early identification and intervention throughout First 5 Riverside-funded programs, supporting team-based interventions in behavioral health to ensure a holistic and comprehensive approach in assessing needs, expanding home visitation capacity to increase family resilience and decrease child abuse and neglect, and diversifying funding to provide innovative solutions for children and families. Outstanding results have been achieved through Quality Start Riverside County (QSRC) resulting in almost 2,300 early education instructors benefiting from technical assistance and professional development to increase quality in their classrooms and curriculum as well as enhancing child-teacher engagement. This comprises 430 licensed sites participating in QSRC and 1,115 children provided with access to child care. Ongoing investments that have expanded pediatric healthcare have come to fruition, with University of California, Riverside (UCR) School of Medicine graduating 5 pediatric residents, who are now practicing in Riverside. Significant accomplishments include regional partnerships with First 5 San Bernardino and Loma Linda Children’s Hospital to begin planning the launch of Help Me Grow to leverage resources and develop a comprehensive systems-level approach to support the success of young children and to connect them readily to developmental services. Other highlights included: breastfeeding support services delivered to over 6,705 mothers, more than 3,500 children received mental health screenings and 823 received treatment services, and 631 children received water safety classes/swim lessons.

**Sacramento County**

In anticipation of fewer resources to invest in direct services, the First 5 Sacramento Commission activated efforts to impact children’s services on a larger systemic scale. The Commission allocated staffing directed toward policy, advocacy, and sustainability, and has integrated sustainability planning into its strategic direction.

The Commission: 1) Established a Sustainability Committee as a subcommittee to support and advise staff and the Commission on furthering policy, advocacy, and sustainability efforts; 2) Created Policy Priorities that provide parameters to track proposals and legislation, and coordinates with local and statewide advocacy groups to improve outcomes for children; and 3) Created a Policy and Advocacy Protocol to guide how First 5 Sacramento will take positions on federal, state, and local policy matters related to the Policy Priorities.

During FY 2017–18, First 5 Sacramento developed a Sustainability Plan with the goal of sustaining children’s health, development, and family empowerment outcomes, and the systems that promote them.
Commission identified strategies related to public awareness and action, policy change, and financial resources to be implemented over the next three years. Most notably, the Commission turned its focus to the sustainability of funded agencies by launching the “Certified Sustainable Initiative.” Through Certified Sustainable, partners receive capacity building, coaching, and technical assistance in the development of an agency-specific Sustainability Plan to safeguard core services to families as First 5 funding declines.

**San Benito County**

In FY 2017–18, First 5 San Benito provided services, supports, and resources to children, families, and providers that addressed the First 5 California four result areas: Improved Family Functioning, Improved Child Development, Improved Child Health, and Improved Systems of Care. Outcome highlights related to these results are summarized below. According to pre-post survey results, parents participating in Family Wellness Court parenting classes demonstrated significant improvement in family functioning, particularly in family members’ ability to express their needs and feelings to one another. Parents as Teachers home visiting participants said that the program greatly improved their knowledge of child development and how to meet children’s social and emotional needs. Participants in Raising a Reader reported a significant increase over time in their child’s reading engagement (such as asking questions about the book), and 99% of participants in Story Time at the public library said this program gave them ideas about how to make reading fun at home. To address Improved Child Development, First 5 San Benito enrolled 26 Early Childhood Education providers in the Quality Rating and Improvement System program, who created professional development plans and completed at least 30 hours of professional development. Child health was addressed through the inspection of 38 car seats for safe and appropriate installation, and the distribution of 37 new car seats. Finally, to contribute to Improved Systems of Care, 17 service providers were offered a series of trainings designed to improve the capacity of professionals in the county to provide trauma-informed care. They showed statistically significant improvements in their knowledge of the topics covered, including trauma, stress, resilience, and emotion regulation.

**San Diego County**

First 5 San Diego’s public education campaign recently earned national recognition. First 5 San Diego was recognized with three Edward L. Bernays Mark of Excellence Awards from the Public Relations Society of America for its Annual Report, “Talk, Read, Sing” public service announcement (PSA), and website. First 5 San Diego’s PSAs also earned Emmy® nominations from The National Academy of Television Arts & Sciences this summer in the Community/Public Service–Single Spot/ Campaign and the Writer-Short Form categories. San Diego was one of three counties featured in The David and Lucile Packard Foundation’s Early Identification and Intervention Systems in California report. The report highlighted San Diego’s cross-sector collaboration and long-term partnerships through First 5 San Diego’s Healthy Development Services initiative. It also explores the experiences of Alameda and Santa Clara counties in an effort to learn more about early childhood development identification and intervention systems. Prevent Child Abuse America revised the Healthy Families America (HFA) 2018-2021 Best Practice Standards to include practices developed by First 5 First Steps. First 5 San Diego’s First 5 First Steps provides home visitation for pregnant and parenting teens, military, refugee/immigrant, and low-income families. Although First 5 First Steps had been following the HFA model since the program’s inception in 2013, it developed additional practices to better serve the needs of its families. Some of these practices include the development of a Family Service Plan and the use of the Ages and States Questionnaire Social Emotional-2.

**San Francisco County**

First 5 San Francisco works to ensure that all children birth to age five will thrive in supportive, nurturing, and loving families and communities by advancing systems of support for quality early childhood education, family well-being, and early intervention. Investments in the Quality Connections Quality Rating and Improvement System now extend to all city-funded early education centers, reaching a total of 9,364 children in 411 participating programs. Nearly 2,000 providers received Quality Connections professional development, including over 10,000 hours of in-depth coaching instruction. As a result, percentages of programs meeting quality benchmarks continue to rise in the areas of instruction (62% meeting quality cut-off scores), environments (91% meeting quality cut-off scores), and adult/child interactions (98% meeting quality cut-off scores). San Francisco’s network of 26 Family Resource Centers are now in their ninth year of operations and with approximately 12,000 parents and children served annually, they are dedicated to ensuring that San Francisco families are connected to city resources and thriving. Across all services, 96% of participants surveyed in 2017–18 agreed that they were provided valuable family supports. Data from more intensive services show that 67% of case management participants had progressed and were no longer at-risk in one or more of five areas aligning with Protective Factors for child abuse and neglect.

San Francisco’s Help Me Grow Initiative continued to expand early
identification and intervention efforts in 2017–18 with just under 6,000 children receiving a developmental screen. A total of 1,194 children were referred to a Help Me Grow Family Resource Specialist due to developmental concerns or special needs; 93% received the support they needed from the call-center or were successfully connected to a service.

**San Joaquin County**

First 5 San Joaquin (F5SJ) has been focusing on leveraging additional resources and partnerships in order to bring services related to systems change to the community. Two initiatives will be highlighted in this report. The first one is the Weed Free Baby campaign. The alarming rise in pregnant and new moms smoking marijuana led F5SJ to launch an awareness campaign to help protect babies. The campaign, lasting only two months in its first phase of implementation, showed the following successes: The campaign generated 14 stories on newspaper, television, and radio according to data compiled by NewsTrak. The stories totaled nearly 10 minutes of on-air coverage, viewed by a television audience of 295,224 and 76,700 radio listeners. Convenience store posters resulted in 4,340,000 impressions. Ads ran on one local radio station resulted in over 1.5 million impressions (listenership). Display banners, geo-fencing, and audio streaming resulted in a total of over 1.4 million impressions (how many times it was seen/heard). The overall click through rate (CTR), people who clicked an ad versus how many saw the ad, resulted in .39%. The highest combined CTR came from the banner ads with a total .49% CTR. The healthcare industry benchmark for digital ads is 0.09%, showing the high performance of this campaign. Campaign ads ran on Facebook resulted in nearly 1,000 “clicks to site” (weedfreebaby.com) and over 179,000 impressions. An overall goal was to elevate conversations with mothers and providers on this issue. The second initiative is San Joaquin Treatment & Education for Everyone on Teeth & Health (SJ TEETH). Nearly 32,000 local children will receive oral health services over 3.5 years, including fluoride varnish, screening for cavities, referrals to dentists, and other critical oral health services as part of a $3.5 million grant awarded to the San Joaquin County community by the California Department of Health Care Services. SJ TEETH, a coalition of three dozen local health, education, and nonprofit organizations, collaborated to develop the successful grant proposal to participate in the statewide Local Dental Pilot Program (LDPP) aimed at improving access to dental care for income-eligible children. Some findings from the first year include: In SJ TEETH’s first six months, care coordinators served 238 children; according to care coordinators’ records, of the 238 children served, 54% received dental care in 2017 after enrolling in SJ TEETH care coordination. The majority of these children (82%) received dental cleanings, and 15% received dental screenings. Parents who responded to a phone survey following their child’s preventive dental visit spoke positively of care coordinators’ ability to connect them with dental services.

**San Luis Obispo County**

First 5 San Luis Obispo County (First 5 SLO County) continued its work in four Priority Areas: Perinatal Readiness, Child Health and Development, Early Learning, and Family Strengthening. Nearly $3 million in multiyear contracts were finalized for a range of services benefitting young children, families, and caregivers. Two new program investments expanded support for strong families – a partnership with the United Way for Born Learning Academy bilingual parent groups, and expansion of early childhood family advocacy into Atascadero and Nipomo through a contract with the local child abuse prevention council. A blended funding model was enacted by First 5 and California State Preschool Program, allowing for maximum service capacity and enrollment of families who were financially challenged but minimally over the income eligibility threshold. First 5 SLO County has continued in its role as funder and facilitator of ongoing collaboration among partner agencies in the SLO County Quality Counts Consortium. Planning toward a Help Me Grow system gained momentum this year, including a large stakeholder convening, identification of pediatrician champions, launch of a developmental screening pilot at a local Federally Qualified Health Center, and a proposal for funding from the Mental Health Services Act Innovation program to support a developmental screening partnership between parents and pediatricians. The 2018 Advocacy Agenda included eight goals that align with First 5’s strategic plan. One goal – increased culture of family-friendly workplaces – gained traction through the process of updating the SLO County Chamber of Commerce Economic Vision Statement to include language and priorities related to young children and families. Public-awareness building has
remained core to First 5 SLO County’s work, including a second successful year of monthly Hands-on Hero promotions aligned with the Children’s Bill of Rights, and a frequent visual presence at local family festivals, social media posts, ongoing local Talk.Read.Sing.® promotion, event sponsorships, and an upgraded agency website.

**Santa Barbara County**

First 5 Santa Barbara County (First 5 SB) devotes its funding and organizational capacity in the following two primary areas: Family Strengthening (FS) and Early Care and Education (ECE). This past fiscal year within ECE, First 5 SB achieved several noteworthy results in improving the quality of childcare setting for children: In FY 2017–18, 149 sites participated in the Santa Barbara County Quality Rating and Improvement System, which included 67 childcare centers and 25 family childcare homes. Baseline and post-assessment information was available for 62 of the participating centers and 18 of the participating family childcare homes. For both, there was a statistically significant improvement in the overall quality of the program over time (i.e., from baseline to latest post-assessment), t(90) = -26.72, p < .001 for centers and t(25) = -18.04, p < .001 for family childcare homes. In FY 2017–18, the FS focus area achieved the following: Programs made 2,439 referrals for children and families for additional support services. The majority of referrals (84%) addressed the area of concrete support (basic needs, childcare, education, job training, financial assistance, or health and wellness). At follow-up, the vast majority of the referrals made were successful (73%) or services were in progress (14%). Evidence-based parenting programs showed statistically significant improvements (n=159) in social support, concrete support, nurturing/attachment, and certain indicators of parenting knowledge. FS partners monitored the growth of case managed families across several important family functioning domains using the evidence-based Family Development Matrix (FDM). Parents who had at least two quarterly assessments on the FDM (n = 100) during FY 2017–18 showed statistically significant improvements in the following areas: access to services, parenting, basic needs, and emotional health.

**Santa Clara County**

The aim of the Universal Developmental Screening Initiative (UDS) is to ensure that developmental and behavioral screening with a standardized tool for children ages 0 to 5 is routinely conducted during well-baby/well-child checks in pediatric clinics and practices throughout Santa Clara County. This Initiative uses the Ages and Stages Questionnaire, 3rd Edition, (ASQ-3) and the Ages and Stages Questionnaire: Social Emotional Edition, (ASQ-SE) as the standardized screening tools for its pilot program. Due to the success of this pilot program, the Santa Clara County Health and Hospital System invested in 7.0 FTE Licensed Vocational Nurses who conduct developmental screenings each of their eight county operated pediatric clinics. In addition, First 5 Santa Clara invests in staff who conduct developmental screenings at four community health clinics to expand UDS to all community health clinics in the county. In an effort to promote healthy development during the prenatal period, First 5 Santa Clara partners with the Santa Clara County Public Health Department to implement the Universal Perinatal Screening Pilot program in four OB/GYN clinics throughout the county. Pregnant women are screened with the 4Ps Plus, a validated screening instrument specifically designed to identify pregnant women at risk for use of tobacco, alcohol, or illicit drugs. This tool also screens for intimate partner violence, depression, and anxiety. Through UDS, pregnant women and children who are identified with a concern are connected to early intervention services. Pregnant women receive home visitation from a Public Health Nurse. In addition of the 19,000 children screened, approximately 1,700 were connected to Help Me Grow/KidConnections (KCN) for further assessment, home visitation, and therapeutic services. Last fiscal year, 121 pregnant mothers received a 4Ps Plus screening and 90 received home visitation services. Children and their families served by KCN experienced the following positive outcomes: Overall, the percentage of children who had one or more flagged domains on the ASQ-3 reduced from 55 percent at baseline to 40 percent at follow up. Families, as measured by the Child and Adolescent Needs and Strengths–Early Childhood (CANS-EC) showed 78 percent improvement in parent-child interactions. As demonstrated by Keys to Interactive Parenting Scale, 44 percent of parents improved their parenting skills.

**Santa Cruz County**

In 2017, the Santa Cruz County Board of Supervisors approved Supervisor Ryan Coonerty’s request to establish the Thrive by Three Early Childhood Fund, dedicated to improving a range of health, family support, and early care and learning outcomes for Santa Cruz County’s youngest and most vulnerable children. Building on a system of care approach that First 5 Santa Cruz County helped develop, the County of Santa Cruz engaged First 5 in FY 2017–18 to coordinate the initiative, build capacity of the system, and facilitate its evaluation.

In its first year of operation, Thrive by Three has established an Advisory Committee under the First 5 Commission, increased home visitation capacity in the county through enhancements to the Families Together and Nurse Family Partnership programs, launched the Early Learning Scholarship Pilot designed to help infant and toddler care providers close the gap
between the cost of high-quality infant/toddler care and available subsidies, conducted a “Child Care Developer Fee Study” that resulted in county staff recommending a graduated fee increase over the next three fiscal years that will increase revenue for child care facilities by 80%, supported the county office of education’s efforts to submit to the California Department of Education an “Individualized Child Care Subsidy Pilot Plan” for Santa Cruz County, and established a Thrive by Three Evaluation Plan as well as the first Preliminary Evaluation Report of the initiative in May 2018.

In FY 2018–19, First 5 Santa Cruz continues to provide backbone support to the initiative by convening the Thrive by Three Advisory Committee, continued implementation of a coordinated entry system and the Early Learning Scholarship program, and ongoing coordination and evaluation of the initiative.

Shasta County
First 5 Shasta’s investment in early childhood is guided by its strategic framework and five Pathway Goals: Healthy, Well-timed Births; Health and Development on Track; Supported and Supportive Families; High-quality Childcare and Early Education, and Continuity in Early Childhood Experiences. FY 2017–18 highlights included:

- Continued work with community partners around Adverse Childhood Experiences education, prevention and intervention.
- Provide Neonatal Intensive Care Unit families with books to read to their infants. Reading aloud provides exposure to language and opportunities for attachment in a noisy, stressful, and intimidating environment.
- Supporting the Healthy Babies Program, which provides mental health services for pregnant women and mothers of children ages 0 to 2 experiencing depression or anxiety brought on or exacerbated by pregnancy or during the postpartum period.
- Support of Bridges to Success, a Shasta County Office of Education program that serves parents and care providers of children at risk of preschool/child care expulsion. The program offers Second Step, in-class behavior management support, and evidence-based mental health services.
- Training for providers and parents through First 5 Institute. Activities include professional development, library story times, and the management of a calendar of parent-child activities and professional trainings in the community.
- Coordination of 44 parent-child events and community activities serving 2,219 children ages 0 to 5 during the annual Week of the Young Child.
- Distribution of over 17,000 children’s books through a wide range of community partners and at a variety of community events.

Sierra County
The vision of First 5 Sierra is to ensure a continuum of appropriate and integrated health, education, and recreational support services from prenatal to old age for a balanced and sustainable Sierra County community. First 5 Sierra focuses investments on accessible, high-quality early learning opportunities for families, family support programs, maternal prenatal health, dental health screenings, child safety, and family literacy. First 5 Sierra’s strongest and most successful program continues to be its preschool tuition subsidy which supports working families, most of whom would not be able to send their children to preschool without tuition assistance. Sierra County continues to have an extremely high rate of preschool attendance, with over 90% of students having attended high-quality preschool prior to entering kindergarten. First 5 Sierra strengthened its commitment to supporting families through the development of new programs, including Mommy & Me, focused on support and education for new mothers and Parent Cafes, a collaboration with Public Health, Family Resource Center, and Resource and Referral, offering families parenting education and social support. The message of the importance of parents’ influence on their child’s brain development is one that First 5 Sierra seeks to inculcate throughout the community. This year, First 5 Sierra launched Dolly Parton’s Imagination Library—free books mailed monthly to children under the age of 5—a program whose importance in boosting early literacy is even greater in Sierra County as it is one of the only California counties without a library system. First 5 Sierra’s Provider Network program continued its successful professional development training series for its preschool teachers and childcare providers, focusing on the foundations of positive behavior in children and understanding and managing challenging behaviors.

Siskiyou County
First 5 Siskiyou’s primary focus is to build public will and sustainable, systemic investments to help parents raise children who thrive. Being a rural, sparsely populated county, the only way to stretch First 5 funding to its fullest potential is through systems collaboration. First 5 Siskiyou, therefore, helps support several county-wide collaboratives, such as the Siskiyou Professional Development Partnership, Siskiyou Family Resource Center Network, Siskiyou Home Visitation Systems Coordination, Help Me Grow Siskiyou, and Siskiyou Strengthening Families Collaborative (parent education).

Highlights of First 5 Siskiyou investments in FY 2017–18 include:
• First 5 Siskiyou doubled its impact in the county, in that it leveraged over 100 percent in additional funds above its base allocation.

• Standardized county-wide kindergarten readiness assessment showed the impact of First 5 Siskiyou: Data showed former First 5 participants were more likely to be read to by their parents, visit the library, and had more kindergarten preparation activities. Additionally, nearly half of former First 5 Siskiyou participants were fully ready for kindergarten, compared to 34 percent of children who had not engaged with First 5 Siskiyou.

• Family/Community Resource Centers (FRC) continued to be the hub for First 5 Siskiyou efforts. Located in seven communities throughout the county, FRCs served 1,617 children and 1,614 caregivers with drop-in services, resources, referrals, free books, screenings, playgroups, CalFresh application assistance, Harvest of the Month activities, and parenting education.

• Over 20,000 books were given children: First 5 championed several causes to create more literacy rich homes, including the 10th Annual Read Across Siskiyou 2017 (5,000, 51 events), and Dolly Parton Imagination Library (769 children received monthly books, and 8,842 books were mailed). Another 13,000 books have been provided to families at family fun events, fairs, hospitals, preschools, FRCs, play groups, story time events, and Reach Out and Read.

• Medical provided partnerships.

• Parenting education helped parents be their children’s best first teacher: First 5 Siskiyou coordinated the Siskiyou Strengthening Families Collaborative to offer over 224 sessions of evidence-based parenting education series and workshops.

• Help Me Grow created a coordinated system of screening and support. Over 500 children received vision, dental, and hearing screenings from KHSI, and staffing and service protocols are being developed for developmental screenings.

• Professional development trainings created the shared knowledge and commitment needed to sustain our systems. First 5 Siskiyou’s Professional Development Partnership held eight different trainings, reaching 351 attendees. Trainings covered topics related to sensory processing disorders, building resiliency in children and adults, Strengthening Families 5 Protective Factors, supporting families impacted by abuse of alcohol and other drugs, stress management, and training of trainers for ASQ/ASQ-SE and Nurturing Program.

Solano County

First 5 Solano continued to implement its high-quality programs in the priority areas of Health and Well-Being, Early Childhood Learning and Development, and Family Support and Parent Education. Highlights of services that took place during FY 2017–18 include:

• 8,215 Solano residents were served by First 5 Solano.

• Help Me Grow Solano served 1,660 individuals, connecting them to resources in the community. In addition, Help Me Grow Solano established new partnerships with 24 child healthcare providers.

• Enrolled 61 early care and education sites in QRIS, exceeding the target by five sites.

• Provided 771 children and families with case management, including connection to basic needs, financial literacy skills, and parent education. 100 percent of 119 children receiving assessments from a child welfare social worker remained safely in their homes.

• Secured health insurance for 691 expectant mothers and children.

• Screened 324 high-risk children for developmental and social-emotional concerns.

• Provided 297 children with mental health treatment.

• Provided 435 children, who had no prior preschool experience or were high-risk, a Pre-Kindergarten Academy to prepare them transition to kindergarten. Nearly 80 percent of the children were “ready to go” or “nearly ready to go” to kindergarten at the end of the four-week program.

In addition, First 5 Solano implemented the second year of its Systems Change Action Plan with the goals of strengthening, expanding, integrating, and sustaining early childhood systems in Solano. Highlights of activities in the second year include:

• 26 nonprofit leaders attended the four-month UC Berkeley Extension Fundraising and Volunteer Management Program.

• Completed a nonprofit capacity assessment to inform future capacity building efforts.

• Conducted screenings and community discussions of the film Resilience: The Biology of Stress & the Science of Hope. Began development of a countywide Resiliency Strategic Plan.

• Began development of a multi-agency Release of Information between county departments to facilitate sharing of information.

Sonoma County

In FY 2017–18, First 5 Sonoma County supported the recovery and resilience of families and providers impacted by the October 2017 wildfires. Families experienced housing loss (5,300 homes burned, 2,200 renters displaced), employment loss (590 businesses destroyed/damaged), childcare loss (16 sites lost), increased mental health needs, and...
undocumented families faced additional barriers in accessing FEMA due to deportation fears.

The First 5 Sonoma County Commission drew on its strategic plan, a long-range view, and partnerships in response to this disaster. Fire impacts that compounded existing issues, such as childcare shortages, were prioritized and application processes were streamlined. Grants were awarded to rebuild childcare sites, support trauma-informed childcare, and create new home-based and employer-supported childcare sites. In addition, the Commission funded mental health supports for families, community resource networks, and the distribution of coping resources for families.

Following best practices in disaster grant making, the Commission set aside funds to plan for mid- and long-term recovery needs. In addition, a capacity-building cohort was established to increase the sustainability of local nonprofits, a need that was heightened as many donors diverted their annual charitable contributions to disaster funds in 2017–18. Finally, the First 5 Executive Director participated in the grants selection committees of other funders to help distribute $4 million in fire-recovery funds and ensure children’s 0 to 5 needs was represented and efforts were aligned. The First 5 Sonoma County Commission recognizes that recovery will be ongoing and is monitoring emerging needs and opportunities to support the continued resiliency of the community and well-being of its young children.

Stanislaus County

The work of First 5 Stanislaus continued to be powered by deep community partnerships in FY 2017–2018. First 5 Stanislaus maintained an emphasis on helping families to be supported and safe, having children grow to be eager and ready learners, having children born healthy and staying healthy, and working to see sustained and coordinated systems of care in the local community.

This past year, nearly 29,000 children, parents, and caregivers were reached through the work of a network of community services supported by First 5 Stanislaus. The network of 10 funded community Family Resource Centers continues to be an important element of the work of First 5 Stanislaus. It is here where tremendous work is done using leveraged funding to reach thousands of people in the community through nearly three dozen services. The resource centers are especially important through a partnership with the Community Services Agency for differential response work which helps to provide intervention services to those in need. Other highlights of the work of First 5 Stanislaus included the following:

- Parents of 2,811 children received parent education and support.
- Families of 1,386 children participated in literacy services.
- Families of 6,758 children increased their knowledge and use of community resources.
- More than $7.8 million from non-Proposition 10 sources was leveraged.
- Of the 1,514 children ages 0 to 5 whose caregivers were screened for depression, 441 children ages 0 to 5 had a caregiver referred for mental health services as a result.

It was an important year as the Stanislaus County Children and Families Commission adopted our new name of First 5 Stanislaus.

Sutter County

The Sutter County Children & Families Commission is committed to programs that support the vision that all children in Sutter County will have optimal health, be nurtured, and prepared to succeed. Major highlights of the Commission’s work in FY 2017–18 include investments over $930,000 in efforts with the goal of improving systems of care for families. A major highlight in programming this past fiscal year is the progress that was made in the Keys to Quality program. Keys to Quality, the local Quality Counts California initiative in Sutter County that is coordinated by the Child Care Planning Council of Yuba and Sutter Counties, strengthened regional collaborations to serve 85 sites engaged in improved adult-child interactions, family engagement, site ratings, and continuous quality improvement activities. These sites included a partnership with the local resource and referral agency, Children’s Home Society of California, to serve a strong base of family childcare providers. In addition, family, friend, and neighbor caregivers began participation in Caregiver Cafés through partnerships between the Sutter County Children & Families Commission, Sutter County Maternal, Child and Adolescent Health program, the Sutter County Memorial Museum, and the Child Care Planning Council of Yuba & Sutter Counties. Held monthly, the Caregiver Cafés support
First 5 Trinity continues to focus on building the capacity within its small communities to address the needs of children and families and help them further succeed in school and beyond. First 5 Trinity served as a convener, funder, and partner to four community investments during FY 2017–18. They include School Readiness and the Parent Nursery School, an investment of nearly $159,000 that funded two separate early education programs.

- The pre-K School Readiness Program offered structured playgroups using a nationally recognized curriculum aimed at preparing kids for the academic, social and emotional rigors of kindergarten.
- The Parent Nursery School Program offered education to young children to prepare them for successful kindergarten entry. The program focuses on developing children into happy, healthy and emotionally equipped individuals. The program partners with parents to provide engaging, fun, interactive activities. It also

**Tehama County**

First 5 Tehama maintained its focus on programmatic investments in school readiness, a family resource center, and the Strengthening Families initiative during FY 2017–18, while completing innovative implementation plans to ensure that children ages 0 to 5 are healthy, thriving, and enter school ready to learn. A systems-level project, the Pregnancy to Preschool Partnership (P2P), was developed to streamline the referral and engagement of Tehama County families in early learning, pre-school, and family support. Involving First 5 Tehama, multiple county agencies, and community-based organizations, P2P revised the way in which families are referred, how they receive support while waiting for program enrollment, and how data is shared. This system change is producing a stable countywide prevention platform that aligns new funding streams to expand First 5 Tehama’s ability to serve the county’s most vulnerable families. Secondly, the commission endorsed an evaluation approach that focuses on real changes in the lives and circumstances of the children and families it serves. For example, research with the county’s T-K and Kindergarten teachers resulted in a Kindergarten Readiness Checklist including five social-emotional, seven behavioral/procedural, and four cognitive/academic motor skills essential to teachers’ abilities to implement a program of instruction without disruption or undue distraction. Pre- and post-test administration of this checklist demonstrated that just over half to about three-quarters (depending on the skill) of the 55 children attending KinderCamp achieved positive gains over its abbreviated period of instruction (19–25 days). Moving from descriptive to outcome evaluation is enabling First 5 Tehama to quantify the benefits and take credit for the success of its Parent as Teachers home visiting program, Parent Cafés, Play Groups, and early developmental screenings as it proceeds in FY 2018–19.

**Tulare County**

The mission of First 5 Tulare County is to support effective programs to improve the development of all Tulare County children ages 0 to 5, healthy pregnancies, the empowerment of families, and the strengthening of communities. In FY 17–18, programs have continued to provide Tulare County with essential programming; all programs have demonstrated positive outcomes. Here are a few highlights from our programs, 1) Family Resource Centers, 2) School Readiness sites, and 3) breastfeeding programs.

- The four Family Resource Centers (FRC’s) have become an integral part of the community. The FRC’s provide services to four remote and distinct areas in Tulare County. In FY 17–18, Tulare County combined the FRC’s and provided case management to 621 families and 2,441 home visits. Over 500 children were linked to oral health services, and nearly 600 children were linked to a medical care provider. Of the five School Readiness sites, all demonstrated positive outcomes based on their Desired Results Developmental Profile fall and spring observations. The sites served 526 children. The Sierra View Medical Center Breastfeeding Program has achieved unusually impressive rates of exclusive breastfeeding durations of 48% exclusively breastfeeding at six months, with little reported attrition of breastfeeding between three and six months.
provides support services, such as parent workshops, to support the entire family. Both programs provide high-quality educational experiences for 78 children in many sites throughout the county.

- The Welcome Baby Program, an investment of $33,000, offered new parents a lifeline to support, information, and community resources necessary to raise healthy and happy children. The program serviced 19 children and 26 caregiver/parents.

The Children's Garden Project, an investment of nearly $7,000, is a collaborative project between Public Health and the Resource Conservation District. The project aimed to teach young children ages 0 to 5 the fundamentals of gardening, as well as provide basic guidance on healthy nutrition and an appreciation of where their food comes from. The growing partnerships in the community are the reason for the successes of First 5 Trinity's investments.

**Tuolumne County**

Tuolumne County invested $571,431 in grants and programs to support direct services for children, parents, and teachers. Six focus areas were supported:

1. Parent Education and Support for parents at risk of child abuse and neglect
2. Social-Emotional Consultation to preschool teachers and direct help for children struggling in preschool settings
3. Children's Oral Health through education, screening, and fluoride treatments
4. Family Learning and Literacy to promote family stability and early learning
5. Public Health Nurse outreach
6. Coaching and professional development support for Early Childhood Educators

In addition, First 5 Tuolumne actively engaged in Quality Counts California, supporting 98 early childhood educators and daycare providers with professional development and coaching.

Outcomes measured in FY 2017–18 included:

- Parents at high risk for child neglect and abuse improved their parenting skills and knowledge.
- Teachers learned how to support children's social-emotional development in their preschool classrooms and how to better communicate with parents.
- Fewer young children had cavities or dental disease.
- More children received developmental screening and their parents learned about appropriate developmental expectations.
- Children with behavioral issues were helped to succeed in their preschool setting.

Linkages made between community programs, services, and systems continued to contribute to a more comprehensive approach to serving families.

**Ventura County**

In FY 2017–18, the Commission implemented the second funding year of its five-year strategic plan that was adopted in June 2015. The plan builds on the significant accomplishments realized for young children and their families in Ventura County and addresses declining resources in future years. For funding years one through three, investments in strategies and programs largely remain the same as the Commission utilizes its Sustainability Fund to maintain current funding levels. For subsequent years, strategic investments will shift toward advocacy and capacity building efforts to support and build the overall early childhood system of services that promote parent engagement, build best practices and quality standards, engage partners in cross-system governance, and increase the alignment of resources for improved outcomes for young children. Over this five-year strategic plan spanning a funding period of July 1, 2016, through June 30, 2021, the Commission anticipates its local investment to total over $46 million dollars.

The Neighborhoods for Learning (NFL) initiative, a nationally recognized, community-based service delivery model and the Commission's largest programmatic investment, represents 11 place-based NFL programs, with a total of 25 family resource centers throughout the county, bringing together early learning, health, and family support resources to families in their neighborhoods. Programs funded under Countywide Specialized Strategies played a critical role in the delivery of regional-based family strengthening and health-focused programming.

In preparation for the transition to years four and five of the current strategic plan, the Commission embarked on a comprehensive planning process to determine the key investment strategies for the last two years of the five-year strategic plan. After an in-depth review of current investments, services, outcomes, and stakeholder survey responses, the Commission adopted an implementation plan for years four and five that will continue a substantial investment in the county's
early childhood system. The plan allocates $2.9 million annually for place-based services focused on Parent and Child

Together programs (PACT) and family support services through a redesigned NFL Initiative and allocates funds based upon a formula that considers current needs in relation to population, poverty, and school readiness. The plan also maintains an annual investment of $1 million in preschool for a two-year transitional period. The remainder of funds will be invested in countywide linkage to resources and early identification/intervention, systems change, results-based accountability, program management, and administration. The vision is to capitalize on existing partnerships as well as new opportunities and synergies, thereby maximizing impact and resources.

**Yolo County**

FY 17–18 was a year of significant advancement to the next phase of action and tactical planning for First 5 Yolo. Personnel reorganization and operational cost savings were fully implemented to prepare for the changing needs of First 5 Yolo for the next 20 years. The Commission concluded strategic planning, adopting a new Plan in June 2018. The Commission’s new Strategic Plan budget reflects expenditures in alignment with revenues, consistent across the next three years, and targeted to higher impact activities and programs for families in highest need. Programs are more coordinated, as the Commission anticipates further refinement in subsequent years. In the interest of building effective programs and services, time and attention was invested in First 5 Yolo’s local “Thrive by Five” initiative, advocating for the dedication of new revenues to very early childhood prevention and intervention efforts. Thus far, this has resulted in leading edge policies in (currently) one city and at the county, which included early childhood as one of four items listed in the ballot question language for a new cannabis tax. With the city, First 5 Yolo is a vehicle and a funding partner for “community benefit dollars” to be invested in a new pilot project for highest risk families prenatal to three years in FY 18–19.

**Yuba County**

For FY 2017–18, First 5 Yuba highlights focus on the goal of all children maintain optimal health.

At program entry, parents and caregivers were asked to indicate the child’s access to medical care, dental care, and health and developmental screenings. Almost half of children received a hearing screening, 44 percent received a vision screening, and 28 percent received a developmental screening. These figures represent an improvement from FY 2016–17, when approximately one-third of children received a hearing or vision screening at intake, but only 19 percent received a developmental screening.

Two of First 5 Yuba’s programs are Marysville Joint Unified School District’s (MJUSD) partnership with Peachtree Health for a mobile dental clinic—the Happy Toothmobile—and the partnership with Yuba County Office of Education (YCOE) for a Child Development Behavioral Consultation program (CDBC).

MJUSD and Peach Tree Health offer mobile dental services, including extractions, fillings, fluoride varnish, and sealants, to children who might not otherwise receive dental care. The most interesting highlight from the year for the Happy Toothmobile is, among parents surveyed, approximately 66 percent said their child would not have received dental care if the dental van were not available.

The YCOE provided brief and intensive behavioral services in the CDBC program, and two series of parent education classes on positive discipline and child development (Positive Discipline and BEST). YCOE also offered community workshops in English and in Spanish on several parenting and child development topics, including brain development, the impact of stress on the brain, and positive parenting strategies.

The positive impact of the program on one child’s transition to kindergarten is summarized in comments from the child’s caregiver:

- “I write to you with the utmost gratitude for hearing, seeing, and caring for our son and family with your service. Our son was struggling, and so were we as a family trying to connect and partner with our school. Your guidance and expertise applied for our son and family has generated a pivot in our relationship with the school that supported our son’s success in learning. Our son received a Scholar Award last week and is confident and even more excited to learn.”

The following were some additional essential services and supports provided to the community in FY 2017–18:

- Free swimming lessons, free open swim, and dental services were offered to many children who would not otherwise have access to such recreational programs and oral health services.
- Parents and caregivers participating in parenting classes demonstrated improvement in their knowledge of child development and positive parenting practices.
- Participants in programs at the library increased parents’ engagement in literacy activities with their children.

The results illustrate how First 5 Yuba programs make an important contribution to the health, well-being, and school readiness of Yuba County’s youngest children.
### Appendix A: Number of Services and Expenditures by Result Area and Service Type, FY 2017–18

<table>
<thead>
<tr>
<th>Result Area and Service Type</th>
<th>Children Providers</th>
<th>Primary Caregivers</th>
<th>Total Primary Caregivers and Providers</th>
<th>Total Number of Services</th>
<th>Percent of Total Number of Services</th>
<th>Percent of Total Expenditures</th>
<th>Percent of Expenditures in Result Area</th>
<th>Percent of Expenditures 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved Family Functioning</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>General Family Support</td>
<td>158,427</td>
<td>286,737</td>
<td>5,740</td>
<td>292,477</td>
<td>450,904</td>
<td>89%</td>
<td>$49,296,932</td>
<td>53%</td>
</tr>
<tr>
<td>Targeted Intensive Family Support</td>
<td>26,477</td>
<td>29,970</td>
<td>1,392</td>
<td>31,362</td>
<td>57,839</td>
<td>11%</td>
<td>$44,108,588</td>
<td>47%</td>
</tr>
<tr>
<td>Total Improved Family Functioning</td>
<td>184,904</td>
<td>316,707</td>
<td>7,132</td>
<td>323,839</td>
<td>508,743</td>
<td>100%</td>
<td>$93,405,520</td>
<td>100%</td>
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<tr>
<td>Improved Child Development</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Quality Early Learning Supports</td>
<td>149,140</td>
<td>30,204</td>
<td>31,801</td>
<td>211,145</td>
<td>62,005</td>
<td>58%</td>
<td>$73,922,382</td>
<td>66%</td>
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<tr>
<td>Early Learning Programs</td>
<td>84,900</td>
<td>65,132</td>
<td>1,438</td>
<td>151,470</td>
<td>66,570</td>
<td>42%</td>
<td>$37,845,170</td>
<td>34%</td>
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<tr>
<td>Total Improved Child Development</td>
<td>234,040</td>
<td>95,336</td>
<td>33,239</td>
<td>328,555</td>
<td>362,615</td>
<td>100%</td>
<td>$111,767,552</td>
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<tr>
<td>Improved Child Health</td>
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<tr>
<td>General Health Education and Promotion</td>
<td>46,876</td>
<td>75,160</td>
<td>1,675</td>
<td>76,835</td>
<td>123,711</td>
<td>21%</td>
<td>$10,392,960</td>
<td>8%</td>
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<tr>
<td>Prenatal and Infant Home Visiting</td>
<td>40,601</td>
<td>59,073</td>
<td>420</td>
<td>59,493</td>
<td>100,094</td>
<td>17%</td>
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<td>44%</td>
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<tr>
<td>Oral Health Education and Treatment</td>
<td>140,400</td>
<td>62,048</td>
<td>2,138</td>
<td>64,186</td>
<td>204,586</td>
<td>34%</td>
<td>$17,391,788</td>
<td>13%</td>
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<tr>
<td>Early Intervention</td>
<td>100,678</td>
<td>52,342</td>
<td>11,726</td>
<td>64,068</td>
<td>164,746</td>
<td>28%</td>
<td>$47,483,447</td>
<td>35%</td>
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<tr>
<td>Total Improved Child Health</td>
<td>328,555</td>
<td>248,623</td>
<td>15,959</td>
<td>328,555</td>
<td>593,137</td>
<td>100%</td>
<td>$135,330,691</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td>747,499</td>
<td>660,666</td>
<td>56,330</td>
<td>716,996</td>
<td>1,464,495</td>
<td>100%</td>
<td>$134,503,763</td>
<td>100%</td>
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<tr>
<td>Improved Systems of Care</td>
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<tr>
<td>Policy and Public Advocacy</td>
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<tr>
<td>Program and Systems Improvement Efforts</td>
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<tr>
<td>Total Improved Systems of Care</td>
<td>Grand Total</td>
<td></td>
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</tbody>
</table>

1 San Benito county not included.

2 Totals may not equal 100 percent due to rounding.
Appendix B: First 5 California Result Areas and Services

Result 1: Improved Family Functioning
Provisioning 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 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 includes 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.

g. Comprehensive Approaches to Raising Development
Programs designed 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 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.

b. 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. 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, breastfeeding 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 health care 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 Identified 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 Efforts
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 cross-agency 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


5 Educare California at Silicon Valley. http://educaresv.org/

Our Vision

California’s children receive the best possible start in life and thrive.