

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

916



FROM: Department of Public Social Services/Riverside County
Children and Families Commission

SUBMITTAL DATE:
May 15, 2012

SUBJECT: Annual Review of the Strategic Plan and Adoption of the First Amendment to the Strategic Plan of the Riverside County Children and Families Commission covering Fiscal Years July 1, 2011-June 30, 2016

RECOMMENDED MOTION: That the Board of Supervisors receive and file the First Amendment covering Fiscal Years July 1, 2011-June 30, 2016 Strategic Plan of the Riverside County Children and Families Commission

BACKGROUND: The Riverside County Children and Families Commission (RCCFC) was established by this Board with the adoption of Ordinance No. 784, enacted on January 22, 1999, and reorganized by this Board with the adoption of Ordinance No. 784.9 enacted on June 9, 2009. The RCCFC implements the provisions of Proposition 10, which provides tobacco tax funds 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.

(Continued)

Susan Loew

Susan Loew, Director
Department of Public Social Services

FORM APPROVED COUNTY COUNSEL
BY: PATRICIA MUNROE
 DATE: 5/14/12
 Departmental Concurrence

FINANCIAL DATA	Current F.Y. Total Cost:	\$	In Current Year Budget:	
	Current F.Y. Net County Cost:	\$	Budget Adjustment:	N/A
	Annual Net County Cost:	\$	For Fiscal Year:	N/A

SOURCE OF FUNDS:	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION: **APPROVE**

BY: *Debra Cournoyer*
Debra Cournoyer

County Executive Office Signature

- Consent
- Policy
- Consent
- Policy

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Tavaglione, seconded by Supervisor Buster and duly carried by unanimous vote, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Buster, Tavaglione, Stone, Benoit and Ashley
 Nays: None
 Absent: None
 Date: June 5, 2012
 xc: DPSS

Kecia Harper-Ihem
 Clerk of the Board
 By: *[Signature]*
 Deputy

Prev. Agn. Ref.: | District: ALL | Agenda Number:
 ATTACHMENTS FILED WITH THE CLERK OF THE BOARD

2.11

Dep't Recomm.:
 Per Exec. Ofc.:

Subject: Annual Review of the Strategic Plan and Adoption of the First Amendment to the Strategic Plan of the Riverside County Children and Families Commission covering Fiscal Years July 1, 2011-June 30, 2016

BACKGROUND: (continued)

Section 130140 (1) (C) of the Health and Safety Code requires that each local commission adopt an adequate and complete strategic plan for the support and improvement of early childhood development within the county. This section further requires local commissions to conduct, at least annually, a review of its county strategic plan and to revise the plan as may be necessary or appropriate. Revisions are implemented through a public hearing.

Following a comprehensive facilitated planning process to guide future community investments, the most recent strategic plan was adopted by the Commission on May 11, 2011. The plan covers fiscal years 2011/12 through 2015/16. As part of this process, there was an extensive review of the Commission's investments, financial plan, community data, and outcomes from previously funded efforts.

The RCCFC selected strategies to focus investments in three areas: 1) Early Care and Education, 2) Health, and 3) Systems Change and Capacity Building. Serving children with special needs was identified as a priority population to be served within all of the strategy areas. The strategic plan also recognizes the importance of developing sustainable programs and services as well as leveraging other resources to the extent possible.

During recent discussions regarding the allocation of funding, the Commission concluded that in order to ensure services for special needs children were adequately addressed, the strategic plan should be amended to add this as a stand-alone strategy. On April 11, 2012, the RCCFC Commission conducted its annual review of the strategic plan and conducted a public hearing to add a specific Early Care and Education strategy focusing on services for special needs children.

In conjunction with this action, the Commission reallocated funds that became available through the legal challenge of AB 99 to fund this new strategy, and added funds to other existing strategies.

In accordance with Ordinance No. 784, the Strategic Plan and subsequent amendments are hereby submitted to the Board of Supervisors for review and comment and with your approval, will then be submitted to the State Commission.

FINANCIAL DATA: N/A

ATTACHMENTS:

Action Item 12-10: Annual Review of the Strategic Plan and Adoption of the First Amendment to the Strategic Plan of the Riverside County Children and Families Commission covering Fiscal Years July 1, 2011-June 30, 2016 and Setting a Public Hearing.

First 5 Riverside

Strategic Plan

July 1, 2011 to June 30, 2016

Amended April 11, 2012
Action Item: 12-10
Adopted May 11, 2011
Reso: 11-15

First 5 Riverside Strategic Plan

July 1, 2011 – June 30, 2016

Overview of Proposition 10

In November 1998, California voters passed Proposition 10, the California Children and Families Act, which added a 50-cent tax on all tobacco products to fund health and early childhood development services that help establish a strong foundation for children's success in school and throughout their lives.

Funds from Proposition 10 are distributed to each of the 58 counties based on the number of births in that county. These funds are overseen by a local county commission that is responsible for developing a strategic plan to guide funding decisions that are consistent with the intent of Proposition 10.

Proposition 10 is based on a research which shows that the prenatal period and first 5 years of life is an exceptionally critical period for children's future development. During infancy and early childhood, children are flooded with new experiences that impact their brain development. The first 5 years of a child's life offer parents and caregivers a critically important opportunity to positively shape their child's growth and development.

First 5 Riverside

First 5 Riverside, also known as the Riverside County Children & Families Commission, was created by the passage of Proposition 10. In 2009, First 5 Riverside became a division of the Department of Public Social Services. It is led by Commissioners, who are appointed by the Riverside County Board of Supervisors. The Commission decides how to use Riverside County's share of tobacco tax revenues received through Proposition 10 to prepare our youngest children and their families for success. Since inception, First 5 Riverside has invested more than \$200 million in local programs serving young children and their families.

Vision, Mission, and Guiding Principles

Vision

All children in Riverside County are healthy and thrive in supportive, nurturing, and loving environments and enter school ready to learn and embrace lifelong learning.

Mission

First 5 Riverside invests in partnerships that deliver results in these areas: physical health, social-emotional health, cognitive development, a stable home environment, and schools that are prepared to nourish the development of entering kindergarteners.

Guiding Principles

The work of the Commission is shaped by the following principles:

- Respect the social, cultural, and ethnic diversity of families and communities.
- Support access to services for all families in an environment of support and respect.
- Support and encourage outreach to geographically and socially isolated families.
- Support families to meet the developmental needs of their children.
- Provide appropriate services and support to children with disabilities and other special needs and their families.
- Support and encourage collaboration and leveraging opportunities among grantees.
- Support promising practices and evidenced-based models.
- Recognize and promote services and support for children ages 0 through 5 as the foundation for a lifetime of growth and success.

The Strategic Planning Process

The Commission's existing Strategic Plan expires June 30, 2011. In August 2010, First 5 Riverside began a comprehensive strategic planning process to guide future community investments. As part of this process, there was an extensive review of the Commission's investments, financial plan, community data, and outcomes from previously funded efforts.

In addition to extensive Commission discussions, four public events were hosted for members of the public to provide input into First 5 Riverside's strategic planning process. These events were offered in the cities of Riverside and Cathedral City, with a total attendance of 173 participants representing more than 16 cities. This included parents and caregivers of children 0-5, service providers, and other members of the public.

In addition, 72 providers serving young children and their families completed a strategic planning anonymous online survey.

Upon a comprehensive review of all available materials, First 5 Riverside selected strategies to focus its investments in three areas: 1) Early Care and Education, 2) Health, and 3) Systems Change and Capacity Building. Serving children with special needs is a priority for the Commission across focus areas and implementation efforts specific to this population will be incorporated into all strategies.

Accountability & Evaluation

Accountability

First 5 Riverside is a responsible steward of public dollars. Organizations that receive First 5 funds report financial, program, and evaluation data in order to ensure compliance within their contractual guidelines. The fiscal reporting structure of the Commission complies with the structure developed by the Government Finance Officers Association of the United States and Canada (GFOA). First 5 Riverside

also has an extensive audit completed annually by an outside entity, which is reviewed and approved in a public hearing.

Evaluation Approach

First 5 Riverside is committed to fund strategies that will make positive strides toward achieving the seven long-term objectives listed below. Progress is measured using the indicators listed in each focus area. This outcome-based funding approach enhances the Commission's ability to measure the impact of its program investments and make adjustments as needed.

Long-Term Objectives:

1. Increase access, affordability and quality of family and center-based early care and education.
2. Increase access, affordability and utilization of primary healthcare services for children 0-5.
3. Ensure that parents are utilizing age appropriate health and development information in their parenting practices.
4. Increase optimal birth outcomes (i.e. full term live births, normal birthweight).
5. Identify and treat children with special health and developmental needs as early as possible.
6. Ensure that parents and caregivers are knowledgeable about available community resources and programs.
7. Improve the safety and stability of children's home environments.

Indicators to Measure Progress:

The Commission will monitor and evaluate progress made toward the seven long-term objectives using a set of indicators found in each of the focus areas. Whenever possible, the Commission will use research-based indicators that evaluate how families served in First 5 Riverside programs are doing in comparison with available indicator data at a local, statewide, and national level.

Focus Areas: Early Care & Education, Health, and Systems Change & Capacity Building

EARLY CARE & EDUCATION

First 5 Riverside will focus its investments in early care and education strategies that emphasize the importance of parents ability to locate, afford, and utilize high quality child care as well as to educate parents and caregivers on ways they can promote optimal early childhood development in everyday practices. The Commission's investment approach focuses on two primary benefits for early care and education. First, research shows that high quality child care and preschool prepares children for success in school. Second, access to affordable early care and education allows parents to participate in the workforce and to further their own education.

Rationale:

A child's brain is 80% the size of an adult's brain at age three and 90% at age five.ⁱ Early experiences determine whether a child's developing brain architecture provides a strong or weak foundation for all future learning, behavior, and health.ⁱⁱ Participation in high quality early childhood programs can help

children prepare for school and is associated with better school performance.ⁱⁱⁱ The quality of early childhood programs makes a difference in child outcomes. Programs with high-qualified staff and low staff turnover are associated with positive results for children. This effect is particularly strong in lower socio-economic environments and helps to close the well documented "school readiness gap", which describes the gap in readiness when comparing lower income children to other children upon kindergarten entry.

Early Care and Education Strategies for Investment:

I. The Commission's Primary Emphasis for Early Care and Education investments include:

Quality Workforce: Promote quality in early care and education settings by providing incentives to early care providers (0-5) for college level units achieved toward progress on AA, BA, MA degree attainment in child development or other closely related field, as well as other First 5 approved professional development coursework or workshops; early care mentorships and reflective practice groups; training that improves the interactions of providers with children including competencies such as social-emotional, cognitive development and overall school readiness.

Quality Availability: Provide quality enhancement operational support to part and full day early care settings serving children 0-5 focused on raising the quality of the program and integrating health, parent education, developmental screenings, and linkages with the community collaborative. *This funding would not provide support for base level licensed care, rather the "quality-added."*

II. The Commission's Secondary Emphasis for Early Care and Education investments include:

Early Care Scholarships: Early care scholarships to families based upon a sliding scale structure with the top limit at 300% Federal Poverty Level (mirroring Healthy Kids insurance), in quality family or center-based programs.

Quality Physical Settings: Provide capital support for center and family based early care settings (0-5) to improve the physical environment promoting health, safety, and overall quality. This strategy will utilize standardized environmental rating scales of indoor and outdoor areas to guide investments and focus on areas in most need. This funding is intended for licensed providers already meeting basic health and safety standards.

Parent Education: Evidence-based child development based parent education series.

III. Investments which may be implemented as pilot projects or with specific targets include:

Comprehensive Early Care Services and Supports to Families in Crisis: Support the provision of high quality early care and education for children 0-5 and comprehensive wrap around services including respite care. Targeted to children who are living in shelters for the homeless, including displacement due to domestic violence; grandparents raising grandchildren; pregnant and parenting teenagers; and families living in crisis.

Evidence Based Home Visiting: School readiness home visitation targeted to low performing elementary school zones and geographically isolated families.

Quality Care for Children with Special Needs: Support the provision of quality care for families with children who have special health, developmental, or social-emotional needs.

Indicators to Measure Progress of Commission Strategies:

- Number of children benefiting from high quality early care with First 5 scholarship support
- Percent of children ages 3-4 who attend a preschool program at least 10 hours per week
- Number of early care providers receiving First 5 workforce incentives who earn an Associates, Bachelors, or Masters degree in child development
- Percent of teenaged parents who graduate high school or complete their G.E.D. while participating in First 5 funded programs
- Number of children attending early care settings that are participating in quality enhancements
- Number of providers participating in formal education and professional growth opportunities funded by First 5 Riverside
- Early care and education settings that receive a score of 5 or above on an independently administered early childhood environmental rating assessment
- Number of Riverside County child care centers accredited by the National Association for the Education of Young Children
- Number of Riverside County child care homes accredited by the National Association for the Family and Child Care
- Percent of children who are read to regularly by family members
- Percent of children who have family members regularly play music or sing songs with them
- Number of children screened for developmental delays and behavioral needs

HEALTH

First 5 Riverside will focus the majority of its health investments by increasing access to and appropriate utilization of health services, early intervention, and promoting optimal health through a combination of parent and caregiver education.

Rationale:

A child's health is fundamental to their ability to be successful in school. The basic principles of neuroscience illustrate that providing favorable conditions for healthy development in early childhood is likely to be more effective than treating problems at a later age.^{iv} Well-baby and well-child health focus on prevention and promote child health by reducing the incidence of illnesses and general health problems. Providing access to affordable health services, including mental health services, is one of the most effective policies available for reducing perinatal and early childhood health impairments.^v

Health Strategies for Investment:

- I. The Commission's Primary Emphasis for Health investments include:*

Health Access: Fund enrollment and Healthy Kids health insurance premiums for children 0-5.

Health Optimization: Support strategies that increase the efficient and appropriate utilization of health care (have insurance, get immunized, medical home, well child check-ups, etc.) with emphasis on prevention and early intervention.

Oral Health: Child, parent and caregiver education focused on prevention of oral health disease; screening and treatment including establishing a dental home for uninsured and underinsured children 0-5.

Mental Health: Services for parents and caregivers of children 0-5 include: family counseling; evidence based education and skill development that promotes positive social and emotional health; post-partum depression services; and referrals and linkages to existing services. Services to children ages 0-5 include: screening, assessment and treatment services for children with, or at high risk for developing, behavioral and other mental health disorders.

II. *The Commission's Secondary Emphasis for Health investments include:*

Asthma Management: Parent and caregiver education aimed at identifying the signs of an asthma episode, reducing asthma triggers, asthma medication management, and treatment utilizing primary physicians.

Nutrition: Breastfeeding education and support; parent and caregiver education; advocacy for policies and practices that promote optimal nutrition for children 0-5 and their families.

Physical Activity: Advocate for physical environments that promote age appropriate physical activity for children 0-5; civic, parent and caregiver education, curricula and related resources.

III. *Investments which may be implemented as pilot projects or with specific targets include:*

Targeted Home Visitation: Evidence-based programs to support optimal birth outcomes and improve maternal and child health development. These programs will also include screenings to identify special needs, post partum depression, and home safety.

Special Needs: Programs and services for those with greatly increased risk for special health or developmental needs such as babies born prematurely, with low birthweight, or alcohol/drug exposed. Prevention based services such as preconception and prenatal health education.

Indicators to Measure Progress of Commission Strategies:

- Percent of children 0-5 with health insurance
- Percent of children, by age, who have received the American Academy of Pediatrics (AAP) recommended schedule of well child exams
- Percent of children 2-5 who have received oral health exam in the past year
- Percent of children receiving immunizations per the AAP recommended schedule
- Percent of children receiving developmental and social-emotional screenings per the AAP recommended schedule
- Children receiving developmental and/or behavioral health support services as a result of a referral from a screening
- Percent of babies exclusively breastfed at hospital discharge
- Percent of parents reporting their children are in good or excellent health
- Percent of women receiving early prenatal care
- Percent of babies born with low birthweight
- Percent of pre-term births

- Rate of asthma hospitalizations for children 0-4
- Time spent by children ages 1-5 on an average weekday watching television or videos
- Percent of children 2-5 who eat 5 or more servings of fruit or vegetables every day
- Number of visits from 0-5 children to Emergency Departments and Urgent Care Clinics needing nebulizer treatments
- Number of parents receiving psycho-social screenings for depression, substance abuse, and other risk factors, who are referred for treatment for depression and other family risk factors

SYSTEMS CHANGE & CAPACITY BUILDING

First 5 Riverside is dedicating effort and resources towards making long-term and sustainable change in Riverside County that supports the healthy development of young children and their families. This includes an emphasis on leveraging other funds, improving the sustainability of programs and organizations serving young children, and other partnerships with public and private entities serving young children and their families regardless of whether that entity is currently funded by First 5 Riverside.

Rationale:

The Commission's commitment to systems change and capacity building is based on two long-term benefits to the community. First, as Proposition 10 funds continue to decline over time, it is important for the Commission's efforts on behalf of children be maintained by service providers with the capacity to develop and implement an effective and diversely funded sustainability plan. Additionally, one of the primary written goals of Proposition 10 is to create a comprehensive and integrated service system for young children and their families. First 5 Riverside is committed to achieving this goal to the greatest degree possible through a strategic use of funds and resources.

Systems Change and Capacity Building Goals and Strategies for Investment

The goals and strategies listed below include expectations for the Commission's own internal workings as well as strategies aimed to benefit all families with young children residing in Riverside County. The Commission will dedicate and direct resources to ensure that progress toward systems change and capacity building goals are well-planned, realistic, and are responsive to the needs of young children and families in Riverside County.

The Commission is committed to ensuring the following internal goals are achieved:

- **Integration** – The Commission will ensure that efforts across strategic plan focus areas are coordinated to prevent duplication and maximize resources.
- **Accountability & Evaluation** – The Commission is committed to transparent conduct of business and to abide by relevant and appropriate financial, business and operational practices, policies and regulations in the conduct of its business. The Commission will measure the impact of First 5 investments and communicate these outcomes to the public.
- **Education** – The Commission will integrate knowledge of early childhood research and best practices within all First 5 efforts. Among other topics, this includes furthering knowledge of the dangers of tobacco on the health and development of young children.

The Commission will serve as a catalyst, convener, and funder to work in partnership with others to:

Coordinated Service Delivery: Promote cross-agency coordination and communication among grantees and other providers of service of children 0-5 and their families. Encourage co-location of services when expedient, coordinated case management as appropriate, and a follow up of referrals to ensure that families are getting connected to needed services.

Early Childhood Advocacy: Support early childhood policies and practices that promote overall optimal school readiness. For example, the Commission will work to ensure that the needs of young children and their families are incorporated into county, city, and regional planning efforts such as the development of master plans.

Sustainability: Promote fund development including public funds leveraging by those that serve children 0-5 in Riverside County.

Awareness of Services: Ensure that families with young children are knowledgeable about existing services and supports.

Training and Technical Assistance: Provide capacity building support aimed at increasing quality of services delivered to young children and their families as well as raising the capacity of those organizations to deliver and sustain services.

Public Education: Raise awareness about the critical nature of the first 5 years of life and deliver public education directly tied to strategic plan strategies.

The goals and strategies in the Systems Change and Capacity Building focus area will be directly addressed by the Commission. The Commission may chose to enter into professional service or other contracts to support the Commission and its staff to accomplish these goals.

Indicators to Measure Progress of Commission Strategies:

- Percent of funded agencies that are leveraging public funding
- Number of funded agencies providing co-located services
- Number of funded agencies with expanded service hours or with flexible schedules
- Number of agencies participating in First 5 Riverside sponsored trainings/workshops designed to enhance community services
- Community members are knowledgeable about importance of a child's first five years
- Parents report that they are aware of existing services and programs for children 0-5
- Policies and practices have been adopted which promote early childhood health and development

Conclusion

The First 5 Riverside 2011-2016 Strategic Plan will be used to guide all policies, investments, and activities of the Commission and its staff. It will be evaluated annually to assess whether progress is being made toward the seven long-term objectives using the progress indicators. The plan reflects the needs identified by the stakeholders participating in public meetings, the community needs assessment,

and literature review of best practices. First 5 Riverside recognizes partnership with other entities in the community is critical toward achieving success for children 0-5 and those that care for them.

ⁱ Zero to Three: National Center for Infants, Toddlers and Families. Washington, DC <http://www.zerotothree.org>

ⁱⁱ Center on the Developing Child at Harvard University (2007). *A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children*.
<http://www.developingchild.harvard.edu>

ⁱⁱⁱ Schorr, L., and Marchand, V. (2007). "Pathway for Children Ready for School and Succeeding at Third Grade." Harvard University. Cambridge, MA.

^{iv} Center on the Developing Child at Harvard University (2007). *A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children*.
<http://www.developingchild.harvard.edu>

^v 19 Carroli, G., Villar, J., Piaggio, G., Khan-Neelofur, D., Gülmezoglu, M. Mugford, M., et al. (2001). WHO systematic review of randomised controlled trials of routine antenatal care. *The Lancet*, 357(9268), 1565-1570.