

MEETING IN PERSON ADDRESS: 1303 JEFFERSON ST #100A NAPA CA 94559

AGENDA
May 22, 2023
3:00 PM-5:00 PM



Agenda Item	Facilitator	
1) Call to Order	J. Ocon	
2) Public Comment	J. Ocon	
3) Approval of Commission Meeting Notes <i>April 24, 2023</i>	J. Ocon	*ACTION
4) Commission Business a) Strategic plan update	J. Ocon	
5) Staff Updates a) Executive Director b) Programs Presentation of Rainbow Family League 2022-23 Season Presentation of Florecer Cohort 1	L. Duran	
6) Compliance Item: Review and possible approval of First 5 CA Annual Report	J. Ocon	*ACTION
7) Discussion and possible approval of First 5 Napa County Employee Handbook Updates	J. Ocon	*ACTION
8) Discussion and possible approval of Parental Leave Policy	J. Ocon	*ACTION
9) Draft Budget Review FY 2023-2024 a) <i>Staff Review</i> b) <i>Open Public Hearing</i> c) <i>Receive Testimony</i> d) <i>Close Public Hearing</i> e) <i>Adopt FY 2022-2023 Budget</i>	J. Ocon	*ACTION
10) Review and possible approval of 2023-2024 Staff COLAs and Wage & Compensation Package	J. Ocon	*ACTION
11) Items for next commission meeting	J. Ocon	

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J. Ocon

12) Announcements

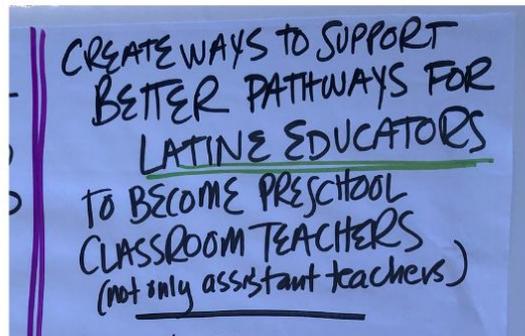


Project Review

F5NN Design Challenge

Jan-July 2022:

Create ways to support better pathways for Latine educators to become preschool classroom teachers. (Take the step from assistant teachers.)



Project Review - Pilot Program

October 2022 - April 2023



Participants:

7 Mentors

9 Mentees

- Juniors and Seniors in High school
- High schools: Napa, New Tech, Vintage, Camille Creek, American Canyon

Group Convenings:

Orientation Meetings for Mentors and Mentees

1 Site Visit Day

6 Floreecer Dinners

Additional participant time:

Shadowing at mentor sites

Reflective journaling

Phone/Zoom calls between mentors and mentees



Mentor Selection

BIPOC/Latine Mentors
Immigrant voices
Know quality
Represent a variety of ECE paths

Owner Private Preschool	Simone Findlay (Seasons of Wonder)
Owner Private Preschool	Milli Pintácsi (Le Petit Elephant)
Preschool Physical Therapist	Larisa Kuchta (NCOE)
Preschool Speech Language Pathologist	Aura Lopez (NCOE)
Manager of Parent and Caregiver Engagement Programs	Steph Shieh (CRC)
Family Child Care Home	Gabriela Narvaez
Center Director	Araceli Soto (Child Start)

Mentors

Participated in group dinners and discussions

Hosted a 20 minute site tour for mentees

Delivered "Passion Talk" on their journey into the field

Allow mentees 3 shadowing hours on site and 1 reflective hour per month



Mentees

Participated in group dinners

Attended a site tour day for mentees

Participated in shadowing hours and reflective hours with mentors.

Made time to reflect/Journal

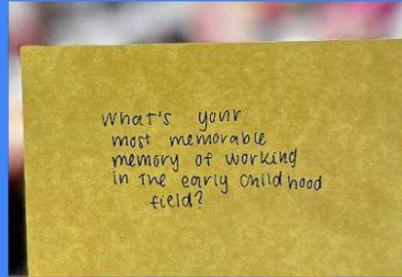


Outcomes

Participants will complete a survey at the beginning (Oct) and end of program (April)

Mentees will develop career and education goals with Mentor support

Mentees will be connected to Child and Family Studies department of Napa Valley College



Feedback Summary

Feedback gathered
through:

It was helpful to meet EC professionals that looked like me and shared similar lived experience

78% of Participants responded very or extremely helpful

Group discussion

The mentorship network helped me understand career opportunities in the early childhood field

78% of Participants responded very or extremely helpful

Pre-Post Program
Survey

It was helpful to have hands on experiences at mentor sites and see presentations from community organizations

78% of Participants responded very or extremely helpful

Program attributes
activity

The mentorship network helped me connect with resources

85% of Participants responded very or extremely helpful

The mentorship network helped me feel part of a community

92% of Participants responded very or extremely helpful



Feedback Summary

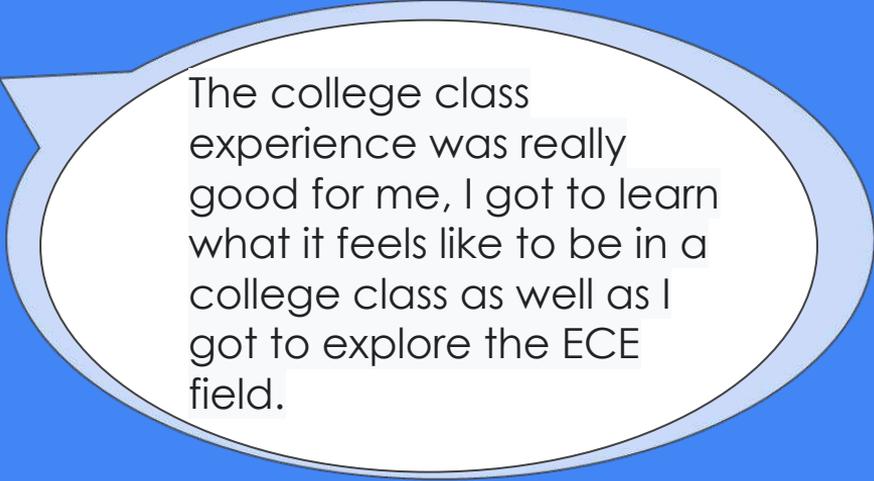
8/9 mentees signed up for the CFSE Cohort experience with Napa Valley College

ALL mentees are considering employment opportunities in Early Childhood Field based on mentorship experience

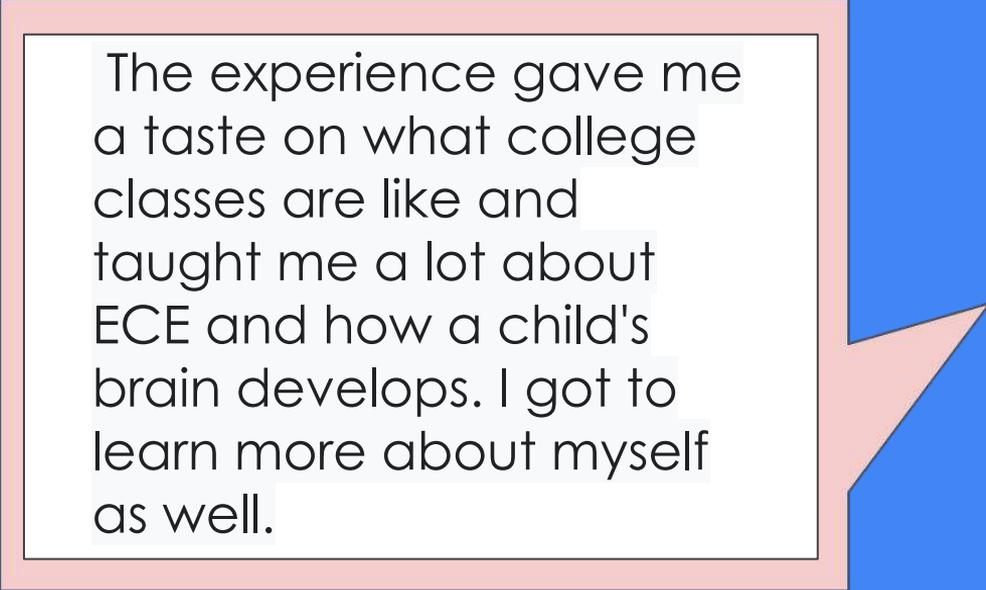
ALL mentors and mentees have made a plan to stay connected after this experience



Feedback Summary



The college class experience was really good for me, I got to learn what it feels like to be in a college class as well as I got to explore the ECE field.



The experience gave me a taste on what college classes are like and taught me a lot about ECE and how a child's brain develops. I got to learn more about myself as well.



Feedback Summary



Mentors and Mentees feel connected to resources supporting higher education goals

(October: 59% of participants felt connected)

April: 73% of participants feel connected)

Mentors and Mentees feel connected to early childhood professionals

(October: 24% felt connected)

April: 79% feel connected)

Feedback Summary



The program attributes mentors and mentees enjoyed the most:

- Being shown a variety of roles in the early childhood field
- Monthly in person gatherings
- The Napa Valley College cohort experience
- Community Building

My personal take away was that the process to getting where you want to be isn't always linear. Also, that having someone who is in the same field you wanna go into is extremely helpful.

I enjoyed being a part of Florecer and I got to know more about Early Childhood education. Initially I just believed that early childhood education was just preschool and daycare, but I learned that it's more than that. Programs to help children, caretakers, teachers and more.

I really enjoyed being given the opportunity to experience what Florecer is all about. I like that fact that all the mentors were people like the mentees (background, ethnicity, upbringing, etc). But also getting to learn about all the different careers under ECE. The only thing I wish was different was timing wise, I would of liked having be and internship through the schools or during the summer.

Mentee Takeaways

Mentor Takeaways

This experience has helped me reflect and confirm why I love what I do. My hope for the future is to see more young people go into this field and receive better pay.

I was able to learn more about other community partners and connect with other ECE professionals in the field. It was also very fulfilling to be able to have a mentee as I really enjoy mentoring young people and also want to give back to the community in the same way other educators have mentored me throughout my career. Attending the gatherings was a very positive experience as being able to reflect on why I do the work that I do and my journey into the field helped me to feel grounded in my purpose and rejuvenated!

It's so important to help guide, support and lead the new generations of ECE professionals- it can make all the difference for this field, especially in such a small town like Napa

Areas to explore in future iterations

School supported student internship so shadowing hours can happen during school day

Expansion beyond Mariposa

Transportation support

Monthly gatherings on weekday evenings

NVC Classes on early release days

Pathway beyond first 12 units





RAINBOW FAMILY LEAGUE

Season 2



Describe Rainbow Family League in one sentence

RFL is an ongoing learning experience as well as a growing community that is committed to diversity, inclusion, open dialogue and continuous self reflection.

A group of like-minded, yet diverse families aiming to make our community as inclusive and welcoming as possible by supporting one another and engendering a spirit of activism in the next generation

A program that educates and helps families facilitate conversations about diversity (race/culture/ability/gender/sexuality etc.) and inclusion and provides opportunities to meet with other families working to raise open-minded, empathetic children.

A delightful family learning adventure that embraces diversity and builds inclusive community.

Program Review

Participants:

21 Families

- Family locations: City of Napa, Angwin, American Canyon
- 3 Families: Dad represented family in practice sessions
- 2 Families with LGBTQ identifying children
-

Group Convenings:

2 Pre-Season Virtual Meetings

5 Virtual Meetings (Oct-Feb)

1 In Person Meeting (Mar)

Additional participant time:

7 Equipment bags delivered to participants

294 Diverse and inclusive children's books distributed

RFL playdate with Season 1 Families - March



Feedback Summary

Feedback was collected through survey, group discussion, and program attributes activity

90% of families engaged a moderate amount/a lot with the RFL books
80% of families completed 5 activities or more throughout the season

Because of their participation in Rainbow Family League:

90% Feel a sense of belonging in their community

80% Feel more civically engaged



Feedback Summary - Grown Up Impact

ALL Grown Ups saw growth in confidence in:

- Talking about diverse families with their child
- Talking about race/racism with their child
- Talking about race/racism with other adults
- Speaking up against unfairness and discrimination

ALL Grown Ups felt they have fewer biases around race after RFL

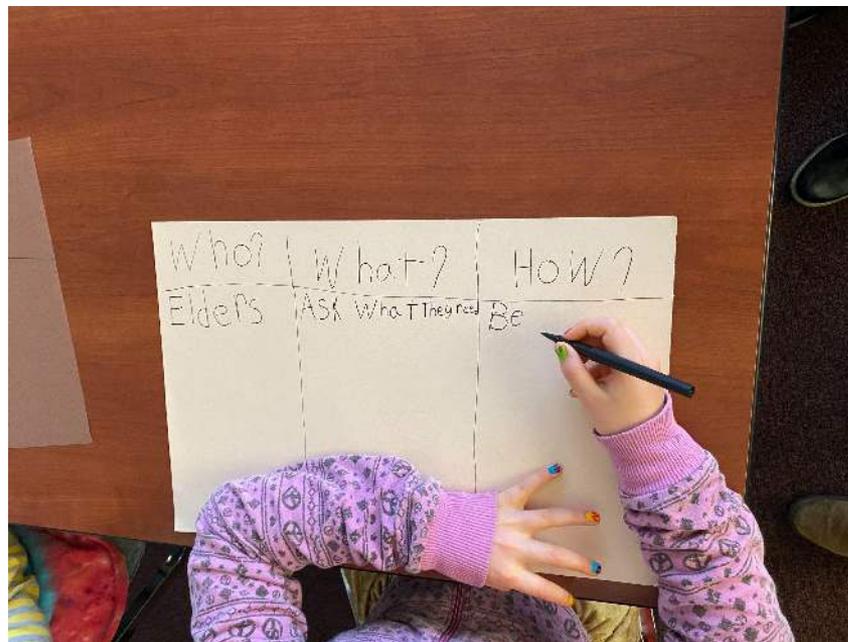
90% of Grown Ups reported a growth in their own knowledge around race/racism and understanding of LGBTQ and gender diverse children & adults.



Feedback Summary - Child Impact

88% of Families report after participating in RFL their child is:

- More empathetic
- Using accurate language to describe human differences
- Recognizing unfairness and has language to describe it
- Able to stand up for others in the face of discrimination



Let's Talk About It!

How do you talk about diversity with your child?

We share how everyone is unique and different and that those differences can be big or small, like the way we look, the food we like, the language we speak, our abilities, traditions, etc. We talk about how these differences make us all unique and that asking respectful questions, learning more about different cultures, etc is a good way to support and celebrate our differences.

How do you talk about race with your child?

We define race as physical characteristics that are common to people with shared ancestry- skin/hair color, hair texture, facial features, etc. we also touch on how these shared features lead to shared experiences.

How do you talk about skin color with your child?

Skin color is just due to the melanin content in skin. Emme and I liked the idea that people who have darker skin have "busy melanin." Skin color and melanin business are determined from where your ancestors/family came from and their needs in that region.

How do you talk about racism with your child?

We have had conversations about how often times people can be treated badly/unfairly for their differences (race and ethnicity) and how often times it comes from a place of fear. We use a lot of books to expose C to age appropriate examples of racism to help facilitate conversations at home. Since C is autistic, we have to be mindful of how we share certain information, as they can become deeply emotional and sensitive to injustice.

The program attributes participants enjoyed the most

- Grown Up Homework (Videos, Articles, and Journaling Prompts)
- Delivery of Equipment Bags
- Team practice sessions with Dr. Lori A. Watson
- 6 Month Long Season

Grown Up Takeaways

To not avoid conversations about race and racism with youth or anyone. No one is too young. I liked that the lessons learned from the children's books and activities are just as valuable to the adults as they are to the children because they brought "challenging" topics down to the basics. Concepts were often easier for the children because they have had less time in a racist world. The adults have more unpacking privilege/bias/trauma and healing to do. The learning and unlearning will never be finished.

I loved the activity bags with the discussion prompts taped into the books. It was SO helpful to have guided questions to bring further and deeper discussions with Emme on the topics covered. They can be shared with other friends and I would like to also bring into Emme's classroom where I volunteer one day a week

I really appreciated the openness and honesty that being in this group brought out. These topics are hard. I have so many questions that I'm fearful of delving into because it might offend someone or be shut down and it was great to hear real honest answers even when there weren't clear pathways. I understand that all of our growth as individuals and as a community is a process that will continue on as long as we're willing to be open to the work. Acknowledging that we all make mistakes while working on these topics was really important for me.

Loved working through my own discovery while growing with my child - ensuring they aren't as blinded and comfortable in their privilege.

Something else I have REALLY appreciated is learning about local activism/multicultural events through RFL announcements. My family has enjoyed attending some and would not have heard about them otherwise.

Areas to explore in future iterations

- Books focused on differently abled characters
- More in person meetings
- Meetings on weekdays
- Increased diversity among participating families



FIRST 5 NAPA COUNTY

EMPLOYEE HANDBOOK

REVISED 05/05/2023

Welcome to First 5 Napa County!

You are now a member of an organization dedicated to supporting Napa County's children aged zero through five, their families, and providers. The success of our vision is driven by having high quality people like you and your fellow colleagues.

We're committed to helping you do your best work. Our promise is to champion diversity, build a culture that celebrates inclusion and belonging, and do our part to create a more equitable world for our staff and the community members we serve.

I am pleased to share this employee handbook which outlines the personnel policies and procedures of our organization as well as our organization's mission, vision, values, and goals. It is our intention to assure all First 5 Napa County staff of fair and equal treatment. Please use this handbook as a reference as you pursue your career with First 5 Napa County.

In community,

Lilea Durán

Executive Director, First 5 Napa County

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FIRST 5 NAPA COUNTY ORGANIZATION CHART

FIRST 5 NAPA COUNTY VISION, MISSION, AND ORGANIZATIONAL VALUES

Mission: First 5 Napa County convenes and mobilizes the community to use systems- and design-thinking to center and lift up our community's young children, their families, and the providers who serve them.

OUR STORY

In November 1998, California voters passed a statewide ballot initiative to add a tax on tobacco products, with funds going to support a comprehensive, integrated system of early childhood development services. The following year, the Napa County Board of Supervisors established the Napa County Children and Families Commission (now First 5 Napa County) to distribute funding from California's Proposition 10 and provide resources to support a comprehensive system of services that ensures children ages 0-5 in Napa County enter school health and ready to learn. Since its inception, First 5 Napa County has invested more than \$22 million in the community.

We accomplish our work by building the capacity of the community to use authentic collaborative relationships and human-centered design to create the family and community environments necessary for the optimal health and development of young children.

First 5 Napa is centering equity in all of our work and embracing the values of marginalized communities (e.g., immigrant, Latine, Black, LGBTQ) to heal the many issues that face Napa County's children and families.

FIRST 5 NAPA COUNTY MANIFESTO

SYSTEMS LEVEL PREVENTION

When children and families flourish, so do entire communities. We work with all systems (government, business, education, healthcare, etc.) to build supportive home and community environments for children living in Napa County.

EMPATHY

Empathy is essential if we are to realize our interdependence and step into a different future together. We work to create spaces in Napa that prioritize human connection, truth telling, and learning from each other.

JUSTICE FOR ALL

All families and children deserve equal economic, political and educational opportunities. We work to create just systems of care -- education, health and early childhood - and rebuild better systems so that Black, Indigenous, Latine and LGBTQ children and families can thrive.

CREATIVITY

Solving intractable community challenges demands and deserves bold ingenuity. We work to be innovative and unconventional while we lean into what is possible for our community.

EQUITY BY DESIGN

Those most impacted by the inequities of systems must be on the frontline of redesigning them. We work to engage and amplify the voices of Black, Latine, BIPOC, and LGBTQ community members in an effort to make early childhood systems equitable for all Napa County families.

STRONG RELATIONSHIPS + COLLABORATION

Strong relationships build trust and open the door to meaningful change. We are committed to building and growing strong relationships in Napa County across sectors, races, genders, life experience, sexual orientations, ages, and faiths.

EDUCATION

Children who start kindergarten ready to learn thrive later in life. A successful start for ALL children requires access to quality early childhood education and strong family supports (beginning prenatally) - particularly for Black, Latine, and LGBTQ families.

EMPOWERED FAMILIES

Parents/guardians and other caregivers are our children's first teachers and advocates. We work to educate and empower families to support their children's physical, social, and emotional development; to have conversations about inclusion and diversity; and to seek opportunities to advocate for their families with our community leaders.

Personnel Policies Of First 5 Napa County Children and Families Commission

About these policies

Executive Director: The Executive Director shall serve at the pleasure of the Commission.

Commission Staff: Staff are considered "at will" employees and serve at the pleasure of the Executive Director. It is expressly understood that each employee has the right to terminate their employment at any time for any reason; and the Commission retains the right to exercise its discretion to terminate any employee at will, at any time, and with or without cause or advance notice.

Staff Classification: The Commission shall provide a classification of its employees for the sole purposes of salary and benefit determination. Because the Commission employs a small staff, it is difficult to identify an entity or organization staffed by persons with fully comparable duties. Staff is generally classified based on duties performed by Napa County employees, and employees of other First 5 Children and Families Commissions. This comparison, in no way, implies that Commission employees are employees of Napa County for any purpose. The Executive Committee will review the job descriptions of the Executive Director and other staff positions at least annually and recommend modifications of the job descriptions to the Commission as needed.

COMPENSATION

The Commission shall determine the total compensation for each staff position by resolution. The individual employee's wages and any approved benefits represent the total compensation in every form except for overtime compensation, if any.

Wages. The Executive Director and staff salaries shall be reviewed every two years by the Commission and adjusted, as necessary, based on the most recent data from organizations and entities that are similarly situated to the Commission in purpose, funding, and size.

General Wage increases will be based on funding and financial status of the Commission. Salary and benefits adjustments for employees are at the sole discretion of the Commission.

Salary Increases: The Executive Director shall make recommendations to the Commission concerning salary increases of Commission employees. Cost of Living (COLA) increases, if given, will take effect at the beginning of the fiscal year. A merit-based increase, if given, necessitates a performance evaluation with a satisfactory summary rating, and will take effect on the employee's salary anniversary date. The Executive Committee shall make recommendations to the Commission concerning salary increases of the Executive Director.

Benefits Each employee shall receive a cash allowance "in lieu of benefits." This cash allowance is taxable income. The amount paid to each employee "in lieu of benefits" shall be based on an annual survey of Kaiser Platinum Health Plan, Delta Dental and VSP Vision Plan. The Commission will revisit cash in lieu allocation annually toward end of calendar year when health care rates are published.

In addition, each employee shall be paid a car allowance for in-county travel; and cell phone allowance based on job description, both as determined by Commission resolution.

The Executive Director shall receive a match to be determined by the Commission annually to a 457 Plan administered by Napa County.

Performance Appraisals: Commission employees' performance will be appraised at least annually on or about the employee's salary anniversary date. New hires will have a probationary period of six months. Continuing status and annual review cycle/schedule will be determined at this time. The review of Commission employees will include both a self-assessment and an assessment conducted by the immediate Reviewing Authority (RA). For the Executive Director the RA is the Commission. Please see the attached organizational chart for other staff roles and immediate RA roles. Employees will be evaluated based on their progress toward or related to their performance goals established by the Executive Director and the employee, including progress toward Commission goal attainment, and other evaluative measures such as processes and behaviors. The evaluation of the Executive Director will be carried out by the Executive Committee, with input from the entire

Commission. The evaluation of the Executive Director will be based on performance goals set by the Executive Director and the Commission annually.

Salary Anniversary Date: "Salary Anniversary Date" means the effective date of appointment, promotion, demotion, or reclassification if such is the first working day of a biweekly pay period. If the appointment is effective on a date other than the first working day of a biweekly pay period, the salary anniversary date shall be the first day of the biweekly pay period following such appointment.

Personnel Files: Upon request, an employee may inspect documents within their personnel file with the exception of material that is obtained from other employers and agencies at the time the employee was hired. The Executive Director will make the personnel file available for inspection within a reasonable time after the request. No employee shall alter or remove any documents from their personnel file at any time. No employee shall access, alter or remove any documents contained in any other employee's personnel file without the written consent of the Executive Director.

ATTENDANCE

Hours of Work: The standard workweek for employees occupying full time positions consists of forty hours, unless otherwise specified by the Commission. The Executive Director shall fix the hours of work with due regard for the convenience of the public and the laws of the State and the County. Employees occupying part time positions shall work such hours and schedules, as the Executive Director shall prescribe.

Meal Breaks: A minimum of one-half hour period to a maximum of one hour, generally in the middle of the workday, during which an employee is free to eat a meal or do personal errands. Employees are not paid for this time and are free to leave the workplace.

Rest Breaks. Employees may take a fifteen (15) minute rest break during each four hours of work. This time will be paid for by the Commission as part of the workday.

Rest period time does not accumulate, shall not be used to come in late or to leave early.

Time Sheets: Complete time sheets shall be maintained for all employees. Employees are required to review, sign and turn in their times weekly.

OVERTIME AND MANAGEMENT LEAVE

Overtime and Management Leave: Employees other than the Executive Director will be paid in accordance with state and federal overtime requirements. For all hours worked in excess of eight hours in one day or 40 hours in one week, or for the first eight hours on the seventh consecutive day in the same work week, the employee will be paid at one and one-half times your regular rate of pay. The employee will be paid double-time for hours worked in excess of 12 in any workday or in excess of eight on the seventh day of work in a workweek. There may be exceptions to these standards where allowed by law.

The Executive Director will have five (5) days of management leave credited at the beginning of each **calendar** year and shall be used **during the calendar year** in which it is credited." Such leave will have no cash value. The Executive Director shall not be compensated for overtime worked.

Any overtime work must have the prior written authorization of the Executive Director. In cases of emergency where it is not practicable or reasonable to obtain prior written authorization, the Executive Director may retroactively approve such overtime. An employee is required to report overtime worked at the time of reporting other hours worked in a pay period.

TIME OFF BENEFITS

HOLIDAYS

All employees observe the following thirteen (13) designated holidays per calendar year with payment of compensation (may change year to year, based upon the County of Napa holiday schedule). Please see County of Napa holiday schedule for dates specific to this calendar year.

DESIGNATED HOLIDAYS:

New Years Day

Dr. Martin Luther King Jr.'s Birthday

Washington's Birthday

Cesar Chavez's Birthday

Memorial Day

Juneteenth

Independence Day

Labor Day

Armistice Day

Thanksgiving Day

The day following Thanksgiving Day

Winter Holiday (December 24)

Winter Holiday (December 25)

In the event any of the above holidays fall upon a Sunday, the Monday following is a holiday in lieu thereof. In the event any of the above holidays fall upon a Saturday, the Friday preceding is a holiday in lieu thereof.

During the first pay period of the **calendar** year, full-time employees who have been working for the Commission for at least six months shall be granted 16 hours or personal leave in lieu of Admissions Day and Columbus Day holidays. Employees shall also be granted an additional (3) hours of personal leave. An employee may accumulate a maximum of 19 hours and may not earn any further personal leave while the earned, unused personal leave remains at this maximum. Part-time employees shall accrue personal leave on a pro rata basis. All personal leave must be

taken during the year in which it is given. Part-time employees shall accrue personal leave on a prorated basis. The time at which personal leave is taken shall be at the discretion of the Executive Director.

To be eligible to receive compensation for a holiday, an employee must work or be in a paid status previously approved by the Executive Director, at least four (4) hours the workday immediately before, and four (4) hours the first workday immediately after that holiday. Part-time employees whose work schedule conflicts with the foregoing are exempt, provided they work or are in an approved paid status according to their schedule immediately before and after such holiday.

Employees shall be entitled to four (4) hours paid leave on the afternoon before Christmas Day or New Year's Day, except that no such paid leave shall be granted when Christmas Day or New Year's Day falls on a Saturday, Sunday, or Monday.

An employee who is scheduled to work on a paid holiday, but for medical reasons is unable to do so, shall receive equivalent straight time compensatory leave. Such compensatory leave may be taken only with prior approval from the Executive Director and must be taken within the fiscal year in which it is received.

Permanent part-time employees shall be entitled to holiday time on a pro rata basis according to their regularly scheduled hours.

VACATION

Except as provided below, all employees shall accrue credit in accordance with their years of service as provided below. The time shall be prorated for part-time employees.

Years of Commission service	Hours of Vacation Accrued per Pay Period	Annual Vacation Time in Days
0-2 years	3.69	12
3 - 5 years	4.92	16
6-9 years	6.15	20
10+years	8	26

The time at which employees shall be granted vacations shall be at the discretion of the Executive Director. Length of service and seniority of employees shall be given consideration in scheduling vacations and in giving preference as to vacation time. The needs of the Commission shall govern.

No employee will be allowed to carry an accumulation of more than 180 hours vacation accrual at any one time. No additional vacation hours are earned until the accrual falls below 180 hours.

No use of vacation time will be permitted prior to the employee completing six (6) full months of continuous service in any status unless approved by the Executive Director.

When an employee is separated from Commission employment, their remaining vacation allowance shall be paid at the employee's rate of base pay at the time of separation. Payment for vacation shall be at the base pay of the employee.

SICK LEAVE

All regular full-time employees are eligible for paid sick leave. Sick leave time for regular full-time will accumulate at the rate of 12 days per year and will accumulate from year to year. Sick leave time for part-time employees will be pro-rated. Eligible employees will receive payment for sick time at their normal base rate of pay. Sick pay may be used for the employee's own illness, and up to 50% of annually accrued sick leave may be used for the employee to attend to the illness of the employee's child, parent, spouse, or domestic partner.

If sick leave continues for three or more business days, a certificate from your medical practitioner must be presented to the Executive Director (or Commission) stating that the leave was necessitated by an illness or injury, including a release to return to work, and setting forth any restrictions or limitations on job performance. If sick leave for three or more business days is taken to attend to the illness of a child, parent, spouse, or domestic partner, a certificate from your child, parent or spouse's medical practitioner must be presented to the Executive Director (or Commission) stating leave was necessitated by the parent or spouse's illness.

An employee may not convert unused sick leave to cash during their employment or upon termination.

FAMILY MEDICAL LEAVE; PREGNANCY DISABILITY LEAVE; PARENTAL LEAVE

The purpose of this section is to clarify how the Commission will implement the Family and Medical Leave Act of 1993 (FMLA), the California Family Rights Act of 1991 (CFRA) and Pregnancy Disability Leave afforded under California Fair Employment and Housing Act of 1980 (CFEHA). This section will also set forth the Commission's Parental Leave Policy.

- Family Medical Leave

Under the FMLA and the CFRA if an employee has worked for the Commission at least 1,250 hours during the last 12 months and has more than 12 months of service with the Commission, the employee may have a right to take unpaid family care and medical leave of up to 12 work weeks in any 12-month period (CFRA leave and FMLA leave).

FMLA leave and CFRA leave may be taken for the following reasons:

- The birth of a child of the employee, placement of a child with the employee in connection with an adoption or foster care, or care for a child of the employee who has a serious health condition;
- Care for parent or spouse of the employee who has a serious health condition; or
- The employee's own serious health condition that make the employee unable to perform the functions of his or her position.

When medically necessary, FMLA and CFRA leave may be taken in intermittent periods, provided that the total leave taken does not exceed 12 work weeks in any 12-month period. The twelve-month period will begin on the first day the employee leaves work. Leave taken for the birth, adoption or foster care placement of a child of the employee must be concluded within one year of the birth or placement and the basic minimum duration of the leave is two weeks.

- Pregnancy Disability Leave.

Even if ineligible for CFRA leave, if disabled by pregnancy, childbirth or related medical conditions, a female employee may have a right to take pregnancy disability leave under the California Fair Employment and Housing Act of 1980 (CFEHA). Female employees may take up to four months of pregnancy disability leave, depending upon the periods of the employee's actual disability. When medically necessary, pregnancy disability may be taken in intermittent periods, provided that the total leave taken does not exceed four months. Pregnancy disability leave runs concurrently with FMLA leave taken for disability arising from pregnancy, childbirth or related medical conditions. If a female employee also is eligible for CFRA leave, the employee may be entitled to take both FMLA and pregnancy disability leave which runs concurrently with FMLA leave, and a CFRA leave for reason of the birth.

- Parental Leave

Parental leave is available for an employee to bond with a new child, including birth and adopted children. Twelve (12) weeks of paid leave is available during the twelve (12) month period following birth or adoption under the following conditions:

- The employee has worked for First 5 for at least twelve (12) months prior to the beginning of the leave.
- The scheduling of the leave receives approval by the executive director.
- The employee provides written documentation to the executive director that they have applied for Paid Family Leave benefits from the State of California. Upon receiving written documentation of the award or denial of Paid Family Leave benefits, First 5 will pay the difference, if any, between the amount of benefits received from the State of California and the employee's full compensation for the twelve (12) week period. For example, if an employee qualifies for 8 weeks at 60% compensation through Paid Family Leave, First 5 will provide 40% compensation for those 8 weeks and 100% compensation for an additional 4 weeks.
- The twelve (12) weeks of paid leave available under this policy is inclusive of any leave awarded under the State of California's Paid Family Leave program.

Procedures Applicable to Leaves

If the Commission grants an employee's request for FMLA leave, CFRA leave and/or pregnancy disability leave, the employee is guaranteed reinstatement upon the termination of the leave to their original position or to a position with the same or comparable duties and pay and at the same or comparable geographic location and with no loss of seniority or longevity.

If possible, the employee must provide 30-day advance notice of the need to take FMLA when the need is foreseeable and practicable. Otherwise, the employee must provide reasonable advance notice of the need for the leave, and, for planned medical treatments or supervision, the employee must make reasonable efforts to schedule the leave to avoid disrupting the Commission operations. Failure to comply with these notice rules is grounds for, and may result in, deferral of the requested leave until the employee complies with the notice policy.

The Commission may require an employee requesting leave to submit a medical certification from his or her health care provider or the health care provider of the employee's spouse or parent, as applicable, to support the request for leave. As a condition of reinstatement following an employee's leave taken because of the employee's own serious health condition, the Commission may require the employee to submit a medical certification from his or her health care provider stating the employee is able to resume work. The Executive Director may require the employee to obtain, at the Commission expense, a second opinion regarding the employee's ability to resume work. If the second opinion differs from the first, the Executive Director may require a third opinion from a mutually agreed health care provider.

The Commission may require the employee to exhaust all their accrued vacation time, personal leave, management, or administrative leave and, for leave relating to the employee's own serious health condition the employee also must use their accrued sick leave, concurrently with the designated FMLA and CFRA leave to the extent permitted by law.

There are certain exceptions to eligibility for family care and medical leave under the FMLA and CFRA, and the Commission is legally permitted to deny a request for leave under certain circumstances. In particular, the Commission has a right to deny any request for family care and medical leave due to the small size of the Commission's work force. However, this exception does not apply to pregnancy disability leave under the CFEHA, and the Commission may not deny requests for pregnancy disability leave due to the small size of the Commission's work force.

PERSONAL LEAVES OF ABSENCE

Personal leave of absence without pay may be granted under certain circumstances to full-time employees who have been employed for over one year. A personal leave of absence may be considered when the employee has a need for a leave that is not covered by other leaves of absence given by the Commission.

A written request for a personal leave of absence must be presented to the Executive Director at least 30 days before the leave is to begin, or as soon as is practicable. The request will be considered based on a variety of factors, including the compelling nature of the reason given, the length of time requested, the requirements of the Commission, length of service and performance record. In any event, a personal leave of absence shall not exceed four months in duration. Unless specifically provided in these policies or by law, all leaves of absence are available only on an unpaid basis.

If a holiday falls within the period an employee is on personal leave, the employee will not receive holiday pay.

Failure to return to work on your leave's expiration will be deemed a voluntary resignation of your employment with the Commission.

Upon an employee's return from a personal leave of absence, the Commission may, in its discretion, transfer the employee to a comparable position for which the employee is qualified or refuse to reinstate the employee at all.

If during personal leave, an employee accepts employment with any other employer without prior notification to the Commission, the employee will be deemed to have resigned from employment with the Commission.

STATE DISABILITY INSURANCE

Contributions for State Disability Insurance (SDI) shall be deducted from the salary of each employee. Contributions for SDI shall be made solely by the employee. The rate of contribution is set by the State annually.

An employee shall apply for SDI benefits as soon as they are eligible to receive them and at the same time they shall notify the Executive Director. If an employee who is eligible to receive SDI benefits chooses not to apply for them, they shall notify the Executive Director of the fact in writing, otherwise deductions shall automatically be made from their salary in the amount they would receive in SDI benefits.

An employee who receives SDI benefits shall use their accrued sick leave, if any, with SDI benefits. When their sick leave, if any, is exhausted, an employee may use their accrued vacation or compensatory time off, if any, in conjunction with SDI benefits subject to the provisions of Section 9.8. The employee must promptly notify the Executive Director in writing if they wish to use vacation or compensatory time off with SDI benefits. Accrued sick leave benefits will be used to supplement SDI

benefits only to the extent necessary to provide a combination of sick leave or vacation or compensatory time off and SDI benefits equal to the employee's straight-time compensation immediately before the beginning of the illness or disability.

The Commission shall continue to pay cash allowance in lieu of employee benefit plan to an employee receiving SDI benefits if they are in a payroll status. An employee is in a payroll status if they are using accrued sick leave, vacations, or compensatory time off with SDI benefits.

Absence from work by an employee who is receiving SDI benefits, but who is not in payroll status shall be deemed an approved leave without pay, not to exceed thirty (30) working days without further approval of the Commission. Absence from work by an employee who is receiving SDI benefits, but who is in a payroll status with the Commission, shall be deemed an approved leave without pay in the same ratio as the ratio between SDI benefits received by the employee and their full gross salary.

The eligibility of the employee for seniority and other Commission benefits shall be the same as any other employee on approved leave without pay.

No employee shall receive his or her full salary from the Commission while at the same time receiving SDI benefits,

JURY DUTY/COURT APPEARANCE AS WITNESS MILITARY DUTY AND BEREAVEMENT LEAVE

Jury Duty / Court Appearance as Witness: An employee summoned for jury duty or for court appearance as a witness will immediately notify the Executive Director. While serving on a jury or as a witness, they will be given a paid leave of absence for a maximum of 5 days contingent upon: (1) the employee returning to work upon dismissal each day to complete their remaining normal work day and (2) the employee submitting all fees received as a juror or witness to the Commission, not including any travel allowance received.

Military Leave: Every employee of the Commission shall be entitled to such leaves of absence with pay and other benefits as are provided in Division 2, Part 1, Chapter 7 of the California Military and Veteran's Code.

Bereavement Leave: An employee will be given paid leave of absence of up to five (5) days for the preparation or attendance at the funeral of an immediate family member. For purposes of this section, immediate family means parent, spouse, domestic partner, child, sibling, stepparent, stepchildren, parent-in-law, grandparents, or grandchildren. Balances of bereavement leave may not be carried over from one fiscal year to the next. Bereavement leave must be completed within three months of the date of death of the family member.

GENERAL RULES OF CONDUCT

Certain specific rules of conduct are observed by the Commission and violations of these rules may lead to disciplinary action up to and including discharge. The following are examples of some, but not necessarily all, types of intolerable misconduct:

- Any act of dishonesty.
- Engaging in, threatening, or provoking any act of violence; or damaging the Commission property or the property of another.
- Any act of insubordination or refusal to perform work as required.
- Possession, use or sale of, or offering alcohol or drugs on the Commission premises during work time; reporting for work while under the influence of drugs or alcohol. Although alcohol may be consumed at special events outside of work hours, the use of controlled substances is never permitted. If you have questions regarding the appropriate consumption of alcohol at special events, you should contact your supervisor before consuming the alcohol.
- Possession of weapons of any kind.
- Misuse of or removal of Commission property from the premises without express authorization.
- Falsifying and/or altering business records.
- Excessive absenteeism or tardiness.

- Falsifying or altering the time records.
- Disregard or violation of the Commission policies.
- Unsatisfactory work performance.

The Commission will address violations of these rules of conduct and any other violations of the Commission policy on an individual basis. Pursuant to the Commission's at-will employment policy, the Commission has complete discretion to impose whatever form of discipline it chooses, or none at all, in a particular instance. Disciplinary action may include oral or written warnings, suspension, demotion, probation or involuntary termination. Nothing in these should be construed as a promise of specific treatment in each situation. Nothing in this section shall be interpreted as a requirement that the Commission or Executive Director have cause to terminate an employee.

Discipline may be initiated for various reasons, including but not limited to violations of the Commission's work rules, insubordination, or poor job performance. The severity of the action generally depends on the nature of the offense and the employee's work record and may range from verbal counseling up to and including dismissal. While discipline may normally be rendered in progressive steps, circumstances may dictate action up to and including termination. Discipline less than termination may follow the following steps:

- **Step I Verbal Warning**, documented in writing with copies to the employee and supervisor. The warning will be considered valid for six months and will be destroyed if there is no additional violation of the same or similar policy of infraction within six months of the original infraction.
- **Step II Written Warning**, in memo form that notifies the employee of the infraction. The memo will also describe the behavior required and the consequences to the employee for failure to make the required behavior or performance improvements. This will remain in the employee's personnel file for one year and will be subsequently purged should there be no additional violation of the same or similar infraction.
- **Step III Suspension/Termination**, the employee is again notified in writing of the infraction and the required behavior or performance improvements and may be given up to five days off work without pay as a final step prior to termination. At the discretion of Commission Management, the employee may also be immediately terminated.

EMPLOYEE GRIEVANCE

The Commission recognizes that disagreements can arise between individuals who work for a common objective. To this end, employees are to follow the following steps:

- **Step I: The** aggrieved employee should make an honest attempt to positively resolve the disagreement directly with their supervisor or the individual with whom they have a disagreement.
- **Step II: Should** Step I prove unsatisfactory; the aggrieved employee should prepare a written statement of their grievance with a proposed solution to their supervisor. The supervisor will have up to 10 working days from acknowledged receipt to investigate and respond. Should the grievance be with the Commission Executive Director, the statement should go to the Chair of the Commission.
- **Step III:** Should Step II prove unsatisfactory and the Commission Executive Director is the arbiter, the employee may take their grievance to the Chair of the Commission who will have 10 working days from acknowledged receipt to review and respond. The decision of the Chair of the Commission shall be final and binding.

EMPLOYMENT POLICIES

ANTI - HARASSMENT POLICY

The Commission does not tolerate harassment of job applicants or employees by another employee, supervisor, or any vendor or customer. Harassment of third

parties by our employees is also prohibited. Any form of harassment based on race, color, sex, religion, disability, marital status, sexual preference, medical condition, or any category protected by federal, state, or local law is a violation of this policy and will be treated as a disciplinary matter. While it is not easy to define precisely what harassment is, it includes slurs, jokes, teasing and other uninvited verbal, graphic or physical conduct by one individual toward another. The Commission has a zero tolerance for harassment and is committed to a workplace free of any harassment.

Harassment is unwelcome verbal, visual or physical conduct creating an intimidating, offensive, or hostile work environment that interferes with work performance. Examples of harassment include verbal (including slurs, jokes, insults, epithets, gestures, or teasing), graphic (including offensive posters, symbols, cartoons, drawings, computer displays, or e-mails) or physical conduct (including physically threatening another, blocking someone's way, etc.) that denigrates or shows hostility or aversion towards an individual because of any protected characteristic. Such conduct constitutes harassment when: (1) it has the purpose or effect of creating an intimidating, hostile, or offensive working environment; or (2) it has the purpose or effect of unreasonably interfering with an individual's work performance; or (3) it otherwise adversely affects an individual's employment opportunities.

Sexual Harassment Defined

Sexual harassment can include all of the above actions as well as other unwelcome conduct such as unwelcome or unsolicited sexual advances, requests for sexual favors, conversations regarding sexual activities and other verbal or physical conduct of a sexual nature when: (1) submission to such conduct is made, either explicitly or implicitly, a term or condition of an individual's employment; or (2) submission to or rejection of such conduct by an individual is used as a basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of substantially or unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive environment. Examples of sexual harassment include:

- Unwelcome sexual advances, flirtations, advances, leering, whistling, touching, pinching, assault, blocking normal movement
- requests for sexual favors or demands for sexual favors in exchange for favorable treatment
- obscene or vulgar gestures, posters or comments
- sexual jokes or comments about a person's body, sexual prowess or sexual deficiencies
- propositions, suggestive or insulting comments of a sexual nature
- visual harassment such as derogatory cartoons, posters and drawings

- sexually explicit e-mail, or voice mail
- uninvited touching of a sexual nature
- unwelcome sexually related comments
- conversation about one's own or someone else's sex life,
- conduct or comments consistently targeted at only one gender, even if the content is not sexual
- teasing or other conduct directed toward a person because of his or her gender

Harassing conduct is unacceptable in the workplace or in any work-related settings such as business trips and business-related social functions.

Reporting

Employees should promptly report any incident of harassment, whether by an employee or a non-employee, to their supervisor or to any other supervisor with whom the employee feels comfortable, including the Executive Director. If an employee is unsure of to whom to raise an issue of harassment, or if an employee has not received a satisfactory response within five (5) business days after reporting any incident which the employee perceives to be harassment, please immediately contact the Executive Director. They will ensure that an investigation is immediately conducted. Every report of harassment will be fully investigated, and corrective action will be taken where appropriate.

Every supervisor who learns of any employee's concern about harassment, whether in a formal complaint or informally, must *immediately* report the issues raised to the Executive Director.

No Retaliation

First 5 Napa County prohibits any form of retaliation against individuals who report unwelcome conduct or who cooperate in the investigation of such reports. In accordance with this policy, First 5 Napa County will take appropriate disciplinary action for any such retaliation, up to and including discharge.

DRUG, ALCOHOL AND TOBACCO FREE WORKPLACE POLICY

The Commission is concerned about improving the safety of its services operation and providing all its employees with a safe working environment. The Commission

absolutely prohibits any use, sale, purchase, transfer, or possession of any illegal drugs by its employees while at work. In addition, the Commission strictly prohibits employees from using and being under the influence of alcohol and/or illegal drugs while at work. The Commission will not permit any employee to work while impaired because of the use of drugs or alcohol.

Due to the acknowledged hazards, both to adult nonsmokers and especially to young children arising from exposure to environmental tobacco smoke, it shall be the policy to provide a smoke free environment for staff, grantees, and any of our community partners.

- There will be no smoking in or around the First 5 Napa County office. There are designated smoking areas at Jefferson Office Centre.
- There will be no smoking in personal vehicles when transporting persons on agency/program business
- Tobacco free policy shall apply to all off-site activities and functions related to First 5 Napa County

The Commission will accommodate, in accordance with applicable state and federal law, employees who request a leave of absence in order to attend an alcohol or drug rehabilitation program.

COMPUTER USE POLICY

Computers, computer files, the e-mail system and software furnished to employees are the Commission's property intended for business use only. Use of the Commission's equipment for personal or commercial use is not allowed. Conduct that violates this policy includes, but is not limited to, unauthorized use of computer for Internet access, installing programs for personal use, violating terms of applicable software licensing agreement or copyright laws, violating copyright laws and their fair use provisions through inappropriate reproduction or dissemination of copyrighted

text, images etc, using Commission resources for private or commercial activity, using electronic mail to harass or threaten others, including sending repeated unwanted email to another user, unauthorized mass mailings, and transmitting any materials that are volatile of the Commission policy against harassment. Violations of this policy may result in disciplinary action, up to and including dismissal.

ELECTRONIC MAIL

The Commission may make electronic mail (e-mail) available for Commission business as well as Internet access. E-mail is not confidential, and employees have no expectation of privacy in email communications. E-mail and Internet access will be provided for Commission business only and are not to be used for personal communications or business. The Commission may monitor email and Internet usage at any time and without the prior knowledge of the employee.

USE OF SOCIAL MEDIA

Web applications that facilitate information sharing and collaboration include web-based communities, social-networking sites, video-sharing sites, wikis, blogs and countless others are known as "social media." As the popularity and integration of social media continues to increase in society, a number of new issues and questions are raised about proper use. This policy is intended to assist First 5 Napa County employees and volunteers to effectively and responsibly navigate issues unique to social media.

This Policy applies to all employees and volunteers without regard to whether the conduct occurs during working or non-working time. Similarly, the Guidelines apply regardless of whether First 5 equipment is used. If, at any time, you are uncertain about how to apply this Policy or have any question about your participation in social media, you should seek the guidance of your supervisor.

Social media is in a state of constant change and the First 5 recognizes that there will likely be events or issues that are not addressed by this Policy. Therefore, the

responsibility falls to each individual to use good judgment and, when in doubt, to ask for clarification or authorization before engaging in any questionable conduct online.

First 5 Napa County respects the right of any employee to maintain a blog or web page or to participate in a social networking, Twitter or similar site, including but not limited to Facebook and LinkedIn. Employees and volunteers are required to consider the following when posting or reviewing materials on-line:

1. Information becomes public the moment it is published on the Internet. First 5 Napa County employees and volunteers should be mindful of the public nature of the Internet when engaging in conduct online. Further, employees and volunteers should expect that other First 5 Napa County employees, including senior management, and volunteers will see anything that you post online.

2. Unless given written consent, you may not represent in any way that you are speaking on behalf of First 5 Napa County. The organization has designated the Executive Director and Commission Chair as the sole spokespersons in all media statements to ensure consistent messaging.

3. All postings on social media must comply with our confidentiality and disclosure of proprietary information policies. Any information that cannot be disclosed through a conversation, a note or an e-mail also cannot be disclosed in a blog, web page or social networking site. Preserve the confidentiality of client information, including the identity of current, former, and prospective clients, unless a written release is on file. Do not identify or reference agency clients, donors, or vendors without express permission. If you are unsure about the confidential or proprietary nature of information you are considering posting, consult with your supervisor.

4. Do not link to our website without written permission from the Executive Director. Do not use First 5's or others' trademarks on a social media site or reproduce the agency's or others' material without first obtaining permission.

5. If you are posting something on your own blog, web page, social networking, Twitter or similar site or on someone else's, and you mention First 5 Napa County and

also express either a political opinion or an opinion regarding the organization's actions that constitutes an actual or perceived conflict of interest with First 5 Napa County, you must include a disclaimer. You must specifically state that the opinion expressed is your personal opinion and not the organization's position. This is necessary to preserve First 5 Napa County's good will in the community. Whether the opinion constitutes an actual or perceived conflict of interest is within the sole discretion of the Executive Director.

6. Demonstrate respect for the dignity of First 5, its staff, its clients, its volunteers, and its vendors. Avoid inappropriate comments. Remember, you are responsible for what you write or present on social media..

7. Our handbook describes various complaint resolution procedures that can be used for this purpose. Follow these procedures to address any workplace concerns rather than social media.

8. All organizational policies that regulate off-duty conduct apply to social media activity including, but not limited to, policies related to illegal harassment, code of conduct, nondiscrimination, and protecting confidential and/or proprietary information.

9. Employees and volunteers may not use First 5 Napa County equipment for non-work-related activities without permission. Additionally, our Electronic Media policy applies to social media use at work, including our policy that personal use of our computers, including personal social media activities, should not interfere with your duties at work. We monitor our facilities and equipment to ensure compliance with this restriction.

10. Employees must use their best judgment. Employees with any questions should review this policy and/or consult with their supervisor. Failure to follow this guidelines policy result in discipline, up to and including termination of employment.

VEHICLE AND TRAVEL POLICY

Where the position requires driving any automobile, the employee must have a valid current driver's license, proof of insurance, and a good driving record and is expected to drive the car safely. There must be a copy of the current Driver's License and current proof of insurance on file. Employees will receive a car allowance to reimburse travel expenses within Napa County as set forth in the resolution establishing wages and benefits. Any employee who uses their vehicle outside Napa County will be reimbursed at IRS-approved rate (e.g., 65.5 cents per mile in 2023).

Any employee who demonstrates to the satisfaction of the Executive Director that their regular duties require them to incur travel and/or meal expenses shall be reimbursed for the actual expense of the meal up to a maximum of \$40 per day for meals, excluding alcohol. Reimbursement shall be based upon an itemized receipt for expenses incurred. Reimbursement report should include a memo describing the expenses, and event agenda or promotional flyers as applicable. Reimbursements for travel and/or meal expenses are wages subject to state and federal income tax pursuant to IRS regulations.

Reimbursement shall be based upon a receipt for meals, travel and/or lodging. Any claim for actual and necessary expenses must be submitted within sixty (60) days from the date of expenditure.

EQUAL EMPLOYMENT OPPORTUNITY

The Commission is committed to a policy of equal employment opportunity for applicants and employees. Each qualified applicant and employee is recruited, employed, evaluated, and considered for promotion without regard to any lawfully protected characteristic, such as race, color, sex, sexual orientation, religion, national origin, physical or mental disability, or age.

DISABILITY ACCOMMODATION

The Commission is committed to complying with the Americans with Disabilities Act (ADA) and the California Fair Employment and Housing Act and all regulations properly issued thereunder to protect the rights of qualified disabled persons. It is the Commission policy that no program or activity administered by the Commission shall exclude from participation, deny benefits to or subject to discrimination any individual solely by reason of their disability. Equal employment opportunity will be extended to qualified disabled persons in all aspects of the employer-employee relationship, including recruitment, hiring, upgrading, training, promotion, transfer, discipline, layoff, recall and termination. When necessary, the Commission will provide reasonable accommodation to the known physical or mental limitations of an otherwise qualified disabled employee or applicant.

The Commission adopted the Reasonable Accommodation Policy below on March 27, 2023 in accordance with Government Code Section 54953(g)

Reasonable Accommodation Policy

Commission Brown Act Meetings

Purpose

This Policy is adopted to comply with Government Code Section 54953(g) which requires the Commission to have and implement a written procedure for receiving and swiftly resolving reasonable accommodation requests for individuals with disabilities, consistent with the federal Disabilities Act of 1990 (42 U.S.C. Sec. 12132) and resolving any doubt in favor of accessibility.

Procedure for Making a Request

Individuals with visual impairment, hearing impairment, or mobility impairments, or have any other disability, may request accommodation of the Executive Director by electronic mail at lilea@first5napa.org. Please submit a request for such accommodation as soon as practicable, at least 48 hours prior to the meeting or time when services are needed. The request may be made by the person needing the accommodation or someone can make it on that person's behalf.

Information included with Request

A request for accommodation must include:

- the type of accommodation that is sought. It is not necessary to disclose the particular disability, instead a general statement or explanation will suffice.
- Current contact information (mailing address, an email address, or telephone number)
- The date of the specific meeting, or for all or series of meetings

Response of Commission Staff

The Executive Director will promptly respond to the request in writing and in a timely manner prior to the start of the specific meeting for which the accommodation was requested. If timeliness dictates, an oral response will be provided. Responses will identify whether the accommodation is granted or granted in the alternative, and any instructions necessary to access the accommodation. If denied, the response will identify the grounds for denial. The law requires that all doubt be resolved in favor of accommodation.

LACTATION BREAKS

First 5 Napa County supports the legal right and necessity of employees who choose to express milk in the workplace. This policy establishes guidelines for promoting a breastfeeding-friendly work environment and supporting lactating employees for as long as they desire to express breastmilk.

The organization will provide a reasonable amount of break time for employees who wish to express breast milk for their infant child each time the employee has a need to express milk, in accordance with applicable local, state and federal law. If possible, the break time must run concurrently with rest and meal periods already provided. If break time cannot run concurrently with rest and meal periods, it will be unpaid, to the extent permitted by applicable law.

The organization will provide breastfeeding employees with space, in close proximity to their work area, that is shielded from view and free from intrusion from co-workers and the public. The room or location may include the place where the employee normally works if it otherwise meets the requirements of the lactation space. Restrooms are prohibited from being used for lactation purposes.

Employees who need a lactation accommodation should submit a request for possible accommodation via email to the Executive Director. Upon receiving an accommodation request, the organization will respond to the employee within five (5) business days. The organization and the employee shall engage in an interactive process to determine the appropriate accommodations.

The organization may not be able to provide an accommodation if doing so would impose an undue hardship by causing significant difficulty or expense when considered in relation to the size, financial resources, nature or structure of the business. If the organization is unable to provide an accommodation because doing so would impose an undue hardship, the organization will provide the employee with a written response that identifies the basis for denying the request for accommodation.

California law expressly prohibits discrimination or retaliation against lactating employees for exercising their rights granted by the ordinance. This includes those who request time to express breast milk at work and/or who lodge a complaint related to the right to lactation accommodations.

Employees have the right to file a complaint with the Labor Commissioner for any violation of the rights underlying this policy.

Please consult the Executive Director with questions regarding this policy.

DISCLAIMER

These policies are not intended to create a civil service system of employment or an employment contract of any kind. Employment with the Commission is at-will and is terminable by the employee or the Commission at any time, with or without cause, and with or without prior notice. The policies and practices of the Commission are not intended to and do not create any express or implied contractual or legal obligations on the part of the Commission. The Commission reserves the right to amend these policies whenever it deems appropriate and to conform to state and federal laws, rules, and regulations.

ACKNOWLEDGEMENT OF RECEIPT OF PERSONNEL POLICIES

This is to acknowledge that I have received a copy of the First 5 Napa County Commission and Families Commission Personnel Policies and understand that it contains essential information on the Commission personnel practices.

I acknowledge that I am expected to read, understand, and adhere to Commission policies and will familiarize myself with the material in these policies.

I understand that I am governed by the contents of these policies and the Commission may change, rescind, or add to any policies, benefits or practices described in these policies from time to time in its sole and absolute discretion with or without prior notice to the employees. The Commission will advise employees of material changes within a reasonable time.

Date:

EMPLOYEE'S SIGNATURE

EMPLOYEE'S NAME (TYPED OR PRINTED)

FIRST 5 NAPA COUNTY

Organizational Chart
FY 23-24



FIRST 5 CALIFORNIA

2021-22 Annual Report





Our Mission

Convene, partner in, support, and help lead the movement to create and implement a comprehensive, integrated, and coordinated system for California's children prenatal through 5 and their families. Promote, support, and optimize early childhood development.

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FIRST 5 CALIFORNIA COMMISSION MEMBERS

Giannina Perez, Chair

Appointed by the Governor

Shana Hazan, Vice Chair

Appointed by the Senate Rules Committee

Mayra Alvarez

Appointed by the Governor

Elsa Mendoza Jimenez

Appointed by the Governor

Jackie Majors

Appointed by the Speaker of the Assembly

Lori Risso

Appointed by the Senate Rules committee

EX-OFFICIO MEMBER:

Mark Ghaly

Secretary of the California Health and Human Services Agency

Marko Mijic, Designee

Undersecretary of the California Health and Human Services Agency

MEMBERS WHOSE TERMS ENDED IN FISCAL YEAR 2021-22:

Dr. Nadine Burke Harris, Chair (Member until May 2022)

Appointed by the Governor

Monica Fitzgerald (Member until December 2021)

Appointed by the Senate Rules Committee

Kris Perry (Member until May 2022)

MEMBER WHOSE TERM ENDED IN FISCAL YEAR 2022-23:

Molly Munger (Member until October 2022)

Appointed by the Speaker of the Assembly



Message from First 5 California

As we continue to move through the challenges of the past few years, we're deeply inspired by the progress made to create meaningful impact in the lives of our state's youngest children and their families. This progress came to fruition through the hard work of California's communities, children and their families, as well as the unwavering commitment and support of the Governor, the Legislature, local First 5 county commissions, and partners.

In addition to support from key stakeholders, strong collaboration, especially between state agencies is an essential aspect of our work. Working with agency partners we have deepened our resolve and commitment to implementing our 2019-24 Strategic Plan and are reinvigorated by the clarity of the newly adopted North Star Statement and Audacious Goal. This clarity and cross agency collaborations will help us create the conditions for more trauma-informed, healing-centered, and culturally responsive systems to support the needs of our diverse children, families, and communities.

First 5 California's 2021-22 Annual Report highlights some of these collaborations and our accomplishments at both the state and local levels to help us continue to lay foundational investments that help children thrive.

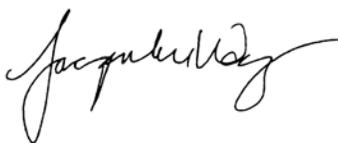
New investments include:

- \$3 million to support refugee families with young children ages 0 to 5 resettling in counties across the state
- \$4.5 million to support the F5CA's Strategic Plan, North Star, and Children's Policy Agenda in the areas of advocacy and policymaker education capacity, strategic partnerships and coalitions, policy development, and public policy research and education
- \$18 million to launch an early literacy program to provide ongoing support for book distribution and literacy programs for California's youngest children, their families and communities

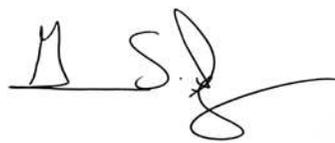
In addition to new investments approved in FY 2021-22, several investments approved in FY 2020-21 continued to be implemented this year:

- IMPACT 2020 continued expanding innovative approaches to quality improvement and professional development systems for early learning and care providers. Funding supported access to Quality Counts California services and supports for a record 9,139 sites across the state
- F5CA's Dual Language Learner Pilot (DLL), a historic \$20 million investment to identify effective, scalable, and sustainable DLL practices in diverse early learning and care settings, sunset at the end of this fiscal year. The pilot uplifted bright spots and exemplary strategies to support DLLs and their families
- Two efforts to promote effective home visiting expansion and coordination continued with the conclusion of the Home Visiting Workforce Study and subsequent findings and policy recommendations, as well as continued county coordination and technical assistance to 50 counties to achieve coordination goals
- Two additional rounds of emergency supplies distribution across the state to children and families who have been negatively and financially impacted by COVID-19, including adult face masks, disposable gloves, disinfectant cleaner, diapers, and baby wipes
- F5CA kicked off its new media campaign. Building on the success of *Talk. Read. Sing.*[®], our public education campaign will be focused on Adverse Childhood Experiences and ways to mitigate its impact on early childhood development

Finally, it is with deep pride and appreciation that we honor the work of former Chair Nadine Burke Harris M.D., outgoing First 5 California Executive Director Camille Maben, and long-time Commissioner Molly Munger, all phenomenal leaders who dedicated their entire careers to improving the lives of others. Their unrelenting fight for children over the last several decades continues to lay the foundation for our future. It is in this spirit that First 5 California will continue to ensure that the voices of our youngest children are top of mind and that we hold space to address systemic inequity with a deepened commitment to Race, Equity, Diversity and Inclusion in all that we do.



JACKIE THU-HUONG WONG
EXECUTIVE DIRECTOR, FIRST 5 CALIFORNIA



GIANNINA PEREZ
CHAIR, CALIFORNIA CHILDREN AND FAMILIES COMMISSION



Ensuring California Children Receive the Best Start in Life

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 over two decades, the California Children and Families Commission (First 5 California) has invested in the development of programs, services, and systems emphasizing improvement in early care and education, child health and development, family resiliency, research, and community awareness.

BUILDING PUBLIC WILL AND INVESTMENT

First 5 California’s Children’s State Policy Agenda guides the agency’s efforts to advocate for the strong start all children deserve, with an emphasis on optimizing early childhood development and reducing childhood poverty for children prenatal through age 5 and their families. The 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 2019–2024 Strategic Plan, First 5 California continues its commitment to engage and lead in building public will and investment to support the optimal wellbeing and development of children prenatal through age 5, and their families and communities. The Strategic Plan also recognizes 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 that

advance child-centered policies and increase these crucial investments.

First 5 California serves as a leader and partner in state policy conversations, collaborating with First 5 county commissions, state agencies, stakeholders, and other advocates to convene, align, support, and strengthen statewide advocacy efforts to realize shared goals. First 5 California continued to expand its policy and advocacy engagement in fiscal year 2021–22, guided by its Policy Agenda. The Policy Agenda is 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:

Resilient Families and Communities

- Support multi-generational economic security and inter-generational wealth building policies including paid family leave, tax credits and incentives, fee and fine elimination, universal basic income, children’s savings accounts, banking and lending access, and home ownership pathways
- Support effective parent education and engagement, including parent engagement on child brain development, early literacy, and safe, stable, nurturing relationships and environments
- Expand access to family strengthening supports including voluntary home visiting programs, doula services, breastfeeding resources, and a fair work week
- Support sustainability of Family Resource Centers and other comprehensive community hubs for integrated services for children and families

- Ensure digital equity for all families across family serving systems

Child Health

- Expand children and families' access to health care, including mental and behavioral health, and support coordination across health systems to ensure affordable and comprehensive health insurance coverage and services for every child and mother, prenatal through age 5
- Support and promote universal health, developmental, behavioral, and adverse childhood experiences (ACEs) screenings, linkages to appropriate, evidence-based interventions and services, and seamless coordination across systems to improve outcomes for children and families

Early Learning

- Expand access to safe, quality early care and education programs for children ages 0 to 3
- Support implementation of safe, high-quality mixed-delivery preschool and care for all low-income three- and four-year-old children that meets families' diverse needs, and a safe, high-quality transition to kindergarten statewide
- Support a healthy, safe, and high-quality early learning workforce through professional compensation, stability, diversity, health and safety policies and supports, and robust professional development systems
- Promote statewide access to and participation in quality improvement systems that serve provider and parent needs
- Define, measure, and achieve school readiness for all California children



Revenue

- Promote inclusion of funding that provides targeted universal access to key child- and family-serving programs
- Promote inclusion of funding for children prenatal to age 5 and their families in existing and new revenue policy proposals and new tax funding structures
- Promote regulation of tobacco-related products, including electronic cigarettes, and sustainability of licensing and enforcement programs

ACCOUNTABILITY: FUNDING AND AUDIT RESULTS

Under the California Children and Families Act, the California Department of Tax and Fee Administration 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 2021–22, First 5 California received \$77.3 million, and county commissions received \$306.2 million. This amount includes Proposition 10, Proposition 56 Backfill, and interest earned on the California Children and Families Trust Fund. 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 of births in the state. Each county must prepare an independent annual 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
- Workforce recruitment and development
- Information technology
- Business services
- Legislative advocacy efforts

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 November 2022, the Controller published its review of the counties' audits for FY 2020–21, 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 <https://www.cfcf.ca.gov/about/budget.html>.

LEGISLATIVE AND BUDGET ENGAGEMENT

As First 5 California embarked in advocating for trauma-informed, healing-centered, and culturally responsive systems that promote the safe, stable, nurturing relationships and environments necessary to eliminate inequities and ensure health development for all children, it provided an opportunity to solidify and establish new partnerships in First 5 California's public policy engagement around the following four policy categories:

- Resilient families and communities
- Child health
- Early learning
- Revenues

The 2022 administrative, budget, and legislative season provided historic investments to support the needs of children and families centered on economic stability and health access necessary to combat the continued effects of the COVID-19 pandemic. Through a robust advocacy campaign and strong partnerships, significant state funding support was included in the 2022 State Budget Act focused on whole child, whole family initiatives aimed at addressing rising inflation costs impacting disadvantaged communities. Successes included the expansion of the Young Child Tax Credit and the extension

of both the Foster Youth Tax Credit and California Earned Income Tax Credit. Additionally, there were investments to child and youth behavioral health support and prenatal/postpartum programs supporting the use of doulas and community health workers. Other investments impacted the early learning mixed-delivery system and included:

- Phased-in implementation of new preschool and transitional kindergarten classes
- One-year waiver of family fees for child care and state preschool programs
- Establishment of Baby Bonds through the Hope for Children Act

On the legislative front, First 5 California co-sponsored and partnered with over 450 organizations on SB 951 authored by California State Senator Durazo, to increase wage replacement rates for paid family leave (PFL) and state disability program (SDI) to 90% for lower wage earners by January 1, 2025. On September 30, 2022, Governor Gavin Newsom signed SB 951 into law, a significant achievement that will resonate throughout California's lower-income families.

First 5 California was active in federal advocacy efforts in addition to State advocacy efforts by supporting the authorization of extending the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) via the Continuing Resolution, and avoiding a funding lapse.

Lastly, First 5 California engaged with California's Congressional leaders to educate them on the State's pressing need to stabilize funding supports for whole child, whole family, whole community efforts in child care; early learning workforce and infrastructure; behavioral health funding; and maternal and child health.





Vision: California's children receive the best possible start in life and thrive.

2022 CHILDREN'S POLICY AGENDA

First 5 California will advocate for the trauma-informed, healing-centered, and culturally responsive systems that promote the safe, stable, nurturing relationships and environments necessary to eliminate inequities and ensure healthy development for all children.

RESILIENT FAMILIES AND COMMUNITIES

<p>Support multi-generational economic security and inter-generational wealth building policies including paid family leave, tax credits and incentives, fee and fine elimination, universal basic income, children's savings accounts, banking and lending access, and home ownership pathways.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Expand the existing Young Child Tax Credit and Foster Youth Tax Credit (2022–23 Budget). Support establishment of CalKIDS Program to open college savings accounts for all California newborns and provides extra funding for low-income first graders and provide information through F5CA communication systems (2022–23 Budget). Enactment of SB 951 by Senator Durazo to support increase wage replacement rates for PFL and SDI to 90% of lower wage workers by January 1, 2025. Enactment of AB 2300 by Assemblymember Kalra to add PFL benefits to those benefits included as disability-based unearned income for the California Work Opportunity and Responsibility to Kids (CalWORKs) program and exempts a recipient receiving PFL from CalWORKs aid time limits.
<p>Support effective parent education and engagement, including parent engagement on child brain development, early literacy, and safe, stable, nurturing relationships and environments.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Provide \$10 million to the Department of Public Health and First 5 California to provide books for low-income children, to be encumbered or expended until June 30, 2025 (2022–23 Budget).
<p>Expand access to family strengthening supports including voluntary home visiting programs, doula services, breastfeeding resources, and a fair work week.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Provide funding support for doula services in Medi-Cal, \$25 million annually to expand the California's Home Visiting Program, and \$960.6 million in Women, Infants, and Children (WIC) Program support nutrition services and food assistance for pregnant women and mothers of young children up to their 5th birthday (2022–23 Budget). Coordinate with Department of Public Health and U.S. Department of Agriculture on strategies to lift and cross-promote F5CA parent resources and WIC resources/services.
<p>Support sustainability of Family Resource Centers and other comprehensive community hubs for integrated services for children and families.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Reappropriate funds for Family Resource Centers (2022–23 Budget).
<p>Ensure digital equity for all families across family serving systems.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Provide \$550 million to support the middle mile broadband network (2022–23 Budget).

CHILD HEALTH

<p>Expand children and families' access to health care, including mental and behavioral health, and support coordination across health systems to ensure affordable and comprehensive health insurance coverage and services for every child and mother, prenatal through age 5.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Provide authority for continuous Medi-Cal coverage for children up to age 5 (2022–23 Budget). Participate as a key stakeholder of the Child Youth Behavioral Health Initiative Advisory Council and facilitator of the Equity Framework Committee as part of the Child Youth Behavioral Health Initiative.
<p>Support and promote universal health, developmental, behavioral, and ACEs screenings, linkages to appropriate, evidence-based interventions and services, and seamless coordination across systems to improve outcomes for children and families.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> Reappropriate \$25 million to support an ACEs and Trauma-Informed Training for Educators. Also included was \$35 million to expand the Emergency Child Care Bridge (2022–23 Budget). Collaborate with California Vaccine All 58 Campaign to promote awareness and credible information to parents and caregivers of young children.

EARLY LEARNING

<p>Expand access to safe, quality early care and education programs for children ages 0 to 3.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Provide funding for new child care slots and facility renovation and repair funding (2022–23 Budget). • Provide one-year waiver for family fees for childcare and state preschool, and hold harmless policies (2022–23 Budget). • Provide federal funds to implement child care stipends (2022–23 Budget).
<p>Support implementation of safe, high-quality mixed-delivery preschool and care for all low-income three- and four-year old children that meets families' diverse needs, and provides a safe, high-quality transitional kindergarten statewide.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Provide first year of a 3-year process for Universal Preschool Planning Grants (2022–23 Budget). • Expand eligibility for transitional kindergarten and reduce student-to-adult ratios; and funding for Pre-Kindergarten Planning and Implementation Grants and programs (2022–23 Budget). • Require California Department of Education to convene statewide interest holder workgroup to provide recommendation on best practices for increasing access to high-quality universal preschool programs for 3- and 4-year-old children offered through a mixed delivery model. The workgroup, which includes First 5 California, is to be convened in consultation with Director of the Department of Social Services (DSS) and Executive Director of State Board of Education (2022-23 Budget).
<p>Support a healthy, safe, and high-quality early learning workforce through professional compensation, stability, diversity, health and safety policies and supports, and robust professional development systems.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Provide child care workforce health and retirement benefits (2022–23 Budget). • Provide professional development as part of the Pre-Kindergarten Planning and Implementation Grant Program (2022–23 Budget).
<p>Promote statewide access to and participation in quality improvement systems that serve provider and parent needs.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Require the California Department of Education (CDE) to convene and recommend preschool standards (2022–23 Budget).
<p>Define, measure, and achieve school readiness for all California children.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Provide early literacy funding under the Dolly Parton Imagination Library, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and additional funding to assist educators in reading supports and literacy instruction (2022–23 Budget).

REVENUE

<p>Promote inclusion of funding that provides targeted universal access to key child- and family-serving programs.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Enactment of AB 2832 by Assemblymember R. Rivas will establish the End Racial and Economic Inequities in Childcare in California Initiative, which requires the Department of Social Services (DSS) and Department of Education (CDE) to develop the Whole Child Equity Framework and Whole Child Community Equity Screening Tool.
<p>Promote inclusion of funding for children prenatal to age 5 and their families in existing and new revenue policy proposals and new tax funding structures.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Provide tax refunds based on an income threshold sliding scale to support families experiencing effects on rising inflation (2022–23 Budget).
<p>Promote regulation of tobacco-related products, including electronic cigarettes, and sustainability of licensing and enforcement programs.</p>	<p>Progress made:</p> <ul style="list-style-type: none"> • Support policies that educate families, educators, and providers of the impacts of tobacco products and drug substances.

COVID-19 EMERGENCY SUPPLIES PROGRAM

In April 2020, the First 5 California Commission took action to address the pandemic and approved \$4 million to provide emergency support to local communities around the state grappling with COVID-19. The Commission subsequently approved an additional \$1 million during May 2020. This effort supplemented other supply acquisition efforts around the state and was coordinated to maximize the various funding sources to support the purchase of emergency supplies and not duplicate efforts. The goal was to identify and support priority populations, including child care providers serving children of essential workers and identified high needs families in local First 5 communities.

To that end, First 5 California began the development of a contract with SupplyBank.org, a 501(c)(3) non-profit organization and systems change agency operating similar to a food bank, but for basic needs. In partnership with SupplyBank.org and the First 5 Association, First 5 California conducted several assessments to further quantify the needs of child care providers remaining open for the children of essential personnel and the broader community.

In February 2021, the Commission approved a new \$2 million investment in order to continue supporting the local mitigation efforts to address COVID-19. The Commission asked local First 5 county commissions to prioritize the distribution of resources to the most vulnerable communities based on data from the Healthy Places Index (HPI).

Through December 2021, SupplyBank.org worked directly with each First 5 county commission to execute county-specific distribution, storage, and delivery plans that included distribution to several local partner agencies.

Local partner types included:

- Family Resource Centers
- Women, Infants, and Children Program
- Homeless and domestic violence shelters
- Local First 5-run centers
- Child care providers
- Other nonprofit and agency partners

Through the efforts of this program, SupplyBank.org and local partners were able to leverage additional emergency supplies through donations and other support to maximize on the original investment from First 5 California. SupplyBank.org and the First 5 Association gathered statewide data to illustrate the full scope of this distribution network. Through fiscal year 2021–22, First 5

California, via SupplyBank.org, distributed the following emergency supplies to every county throughout the state:

- 64,896 Bottles of Hard Surface Disinfectant (32 oz.)
- 5,563,200 Children's 3-Ply Masks
- 15,671,200 Disinfectant Wipes
- 6,639,000 Hand Gloves
- 4,614,794 Diapers
- 11,526,200 Baby Wipes
- 65,496 Bottles of Hand Sanitizer (32 oz.)
- 500,160 Adult 3-ply masks
- 395,640 N95 Masks
- 61,680 Isolation Gowns
- 21,00 Cloth Masks (FEMA)
- 1,000 KN95 Masks

Following the final distribution of resources, SupplyBank.org collected survey responses from 47 county commissions. Respondents categorized the distribution of resources by the number of families or childcare providers served in each zip code. To highlight the prioritization of communities living in zip codes with a lower HPI score, the data was broken into four quartiles based on their HPI score.

These survey results demonstrate the effort county commissions made to ensure that essential supplies were provided to the children, families, and childcare providers who needed them the most during the pandemic. The most disadvantaged families and childcare providers received the bulk of supplies: 65% of families and 69% of providers were in HPI quartiles 1 and 2.





First 5 County Commission Result Areas

FOUR RESULT AREAS

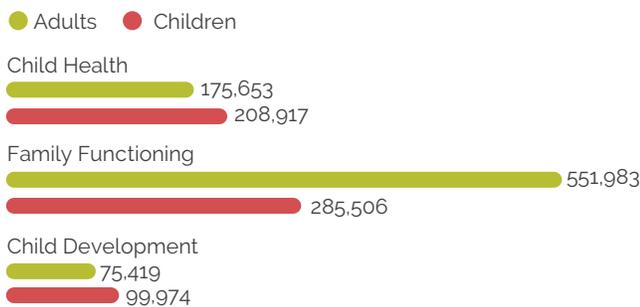
For annual reporting, First 5 California and First 5 county commissions track progress in four result areas to inform evidence-based funding decisions, program planning, and policies:

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

These result areas comprise a framework for reporting early childhood investments and provide an overview of the number, type, and cost of services to children and adults. Stakeholders can use this information to assess statewide resource allocation and impact of First 5 county commissions.

Exhibit 1 contains the total numbers of services provided to children ages birth to 5 and adults (including primary caregivers and providers) for Improved Family Functioning, Improved Child Development, and Improved Child Health. During FY 2021–22, First 5 county commissions provided a total of 594,397 child services and 803,055 adult services. The distribution of expenditures in these three result areas totals \$277 million.

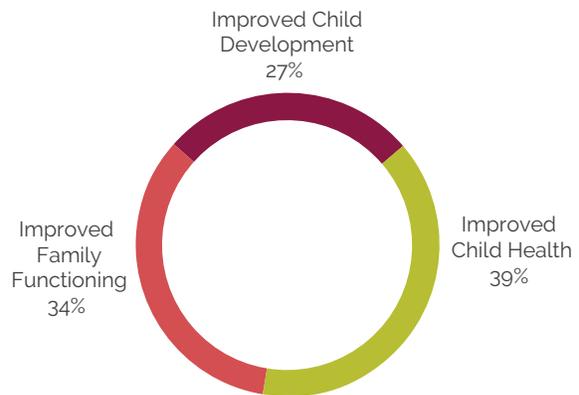
Exhibit 1: Total Number of Services Provided to Children Ages 0 to 5 and Adults* in FY 2021–22 Across Result Areas



*Totals for Adults include both Primary Caregiver and Provider counts

The result area, Improved Systems of Care, with expenditures of \$93 million, differs from the others. It consists of programs and initiatives for system-wide structural supports for efforts within the other three result areas. The four result areas combined show total expenditures of \$370 million.

Exhibit 2: Total Expenditures for Children Ages 0 to 5 and Adults* in FY 2021–22 by Result Area



*Adults include both Primary Caregivers and Providers
Source: County Revenue and Expenditure Summary, December 2022

First 5 county commissions are required to report to First 5 California revenues, expenditures, and fund balances. In collaboration with the First 5 Association, First 5 California annually develops and adopts annual reporting guidelines to standardize data collection. County commission revenues are reported in Appendix A1. For expenditures, county commission fiscal and service data are aggregated to the statewide level under four result areas (Appendix A2) using specific definitions for each result area with service category detail (Appendix B). The four result areas are listed below.

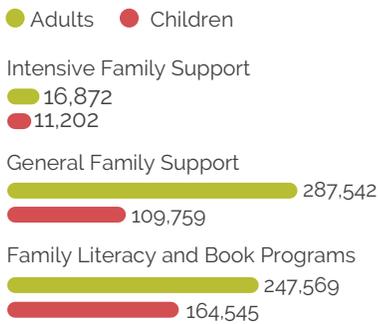
IMPROVED FAMILY FUNCTIONING

Family Functioning includes the categories Family Literacy and Book Programs, General Family Support, and 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, assistance for parents and families, and support to schools and educational institutions, nonprofit community-based agencies, government agencies, and private institutions.

In FY 2021–22, First 5 county commissions provided a total of 285,506 services to improve family functioning for children ages birth to 5, with 164,545 child services in Family Literacy and Book Programs, 109,759 child services in General Family Support and 11,202 child services in Intensive Family Support.

First 5 county commissions provided a total of 551,983 services to adults (parents, guardians, primary caregivers, relatives, and providers), with 247,569 adult services in Family Literacy and Book Programs, 287,542 adult services in General Family Support and 16,872 adult services in Intensive Family Support. Exhibit 3 displays the numbers of services provided.

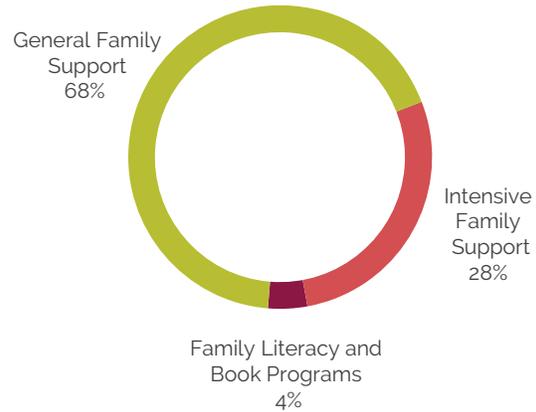
Exhibit 3: Family Functioning—Total Numbers of Services Provided to Children Ages 0 to 5 and Adults* in FY 2021–22 by Service



*Totals for Adults include both Primary Caregiver and Provider counts

First 5 county commissions expended \$95 million to improve Family Functioning, with 4 percent of expenditures in Family Literacy and Book Programs, 68 percent of expenditures in General Family Support, and 28 percent of expenditures in Intensive Family Support. Exhibit 4 shows the distribution of expenditures by service category.

Exhibit 4: Family Functioning—Distribution of Expenditures for Children Ages 0 to 5 and Adults* in FY 2021–22 by Service



*Adults include both Primary Caregivers and Providers
Source: County Revenue and Expenditure Summary, December 2022

IMPROVED CHILD DEVELOPMENT

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

In FY 2021–22, First 5 county commissions delivered 99,974 child development services to children ages birth to 5, with 26,084 child services in Early Learning Program Direct Costs and 73,890 child services in Quality Early Learning Supports.

First 5 county commissions provided 75,419 services to adults (parents, guardians, primary caregivers, relatives, and providers), with 8,165 adult services in Early Learning Program Direct Costs and 67,254 adult services in Quality Early Learning Supports. Exhibit 5 displays the numbers of services provided.

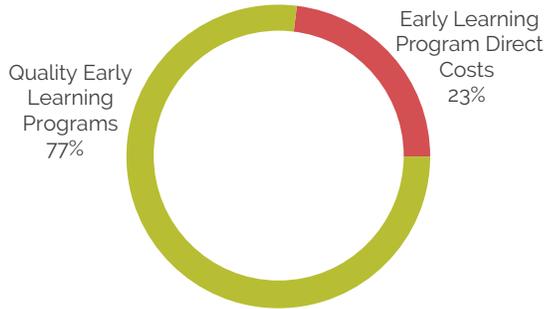
Exhibit 5: Child Development—Total Number of Services Provided to Children Ages 0 to 5 and Adults* in FY 2021–22 By Service



*Totals for Adults include both Primary Caregiver and Provider Counts

In FY 2021–22, county commissions expended \$74 million to improve Child Development, with 23 percent of expenditures in Early Learning Program Direct Costs and 77 percent of expenditures in Quality Early Learning Supports.

Exhibit 6: Child Development—Distribution of Expenditures for Children Ages 0 to 5 and Adults* in FY 2021–22 by Service

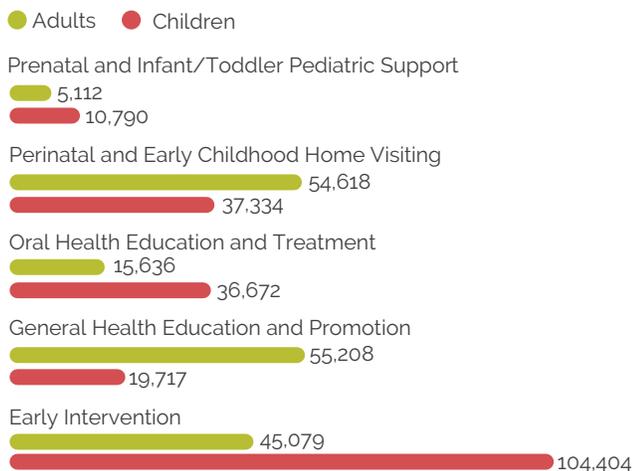


*Adults include both Primary Caregivers and Providers
Source: County Revenue and Expenditure Summary, December 2022

IMPROVED CHILD HEALTH

First 5 county commissions fund a variety of Child Health services promoting identification, treatment, and elimination of risks that threaten health and may cause developmental delays and disabilities. First 5 Child Health services are far-ranging and include the categories Early Intervention, General Health Education and Promotion, Oral Health Education and Treatment, Perinatal and Early Childhood Home Visiting, and Prenatal and Infant/Toddler Pediatric Support.

Exhibit 7: Child Health—Total Number of Services Provided to Children Ages 0 to 5 and Adults* in FY 2021–22 By Service

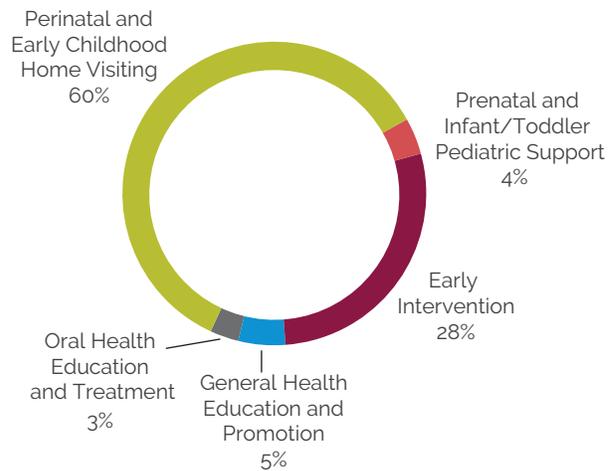


*Totals for Adults include both Primary Caregiver and Provider counts

In FY 2021–22, First 5 county commissions provided a total of 208,917 services to children ages birth to 5, with 104,404 child services in Early Intervention, 19,717 child services in General Health Education and Promotion, 36,672 child services in Oral Health Education and Treatment, 37,334 child services in Perinatal and Early Childhood Home Visiting, and 10,790 child services in Prenatal and Infant/Toddler Pediatric Support.

First 5 county commissions provided 175,653 services to adults (parents, guardians, primary caregivers, relatives, and providers), with 45,079 adult services in Early Intervention, 55,208 adult services in General Health Education and Promotion, 15,636 adult services in Oral Health Education and Treatment, 54,618 adult services in Perinatal and Early Childhood Home Visiting, and 5,112 adult services in Prenatal and Infant/Toddler Pediatric Support.

Exhibit 8: Child Health— Distribution of Expenditures for Children Ages 0 to 5 and Adults* in FY 2021–22 by Service



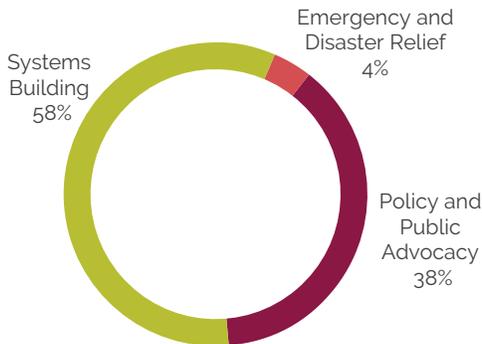
*Adults include both Primary Caregivers and Providers
Source: County Revenue and Expenditure Summary, December 2022

In FY 2021–22, county commissions expended \$108 million to improve Child Health, with 28 percent of expenditures in Early Intervention, 5 percent of expenditures in General Health Education and Promotion, 3 percent of expenditures in Oral Health Education and Treatment, 60 percent of expenditures in Perinatal and Early Childhood Home Visiting, and 4 percent of expenditures in Prenatal and Infant/Toddler Pediatric Support.

IMPROVED SYSTEMS OF CARE

Systems of Care addresses system-wide structural supports as county commissions focus efforts within the result areas of Family Functioning, Child Development, and Child Health. For example, interagency collaboration allows coordinated wrap-around efforts from multiple organizations providing focused client services. Since this result is at a systems level, counties do not report numbers of children and adults served. Expenditure data indicate that for FY 2021–22, county commissions expended \$93 million to improve Systems of Care, with 4 percent focused on Emergency and Disaster Relief, 37 percent on Policy and Public Advocacy, and 58 percent of expenditures toward Systems Building.

Exhibit 9: Systems of Care—Distribution of Expenditures in FY 2021–22 by Service



Source: County Revenue and Expenditure Summary, December 2022

POPULATIONS SERVED

County commissions served a diversity of populations by age, race/ethnicity, and language (Appendix C). Statewide, 575,816 children were served by county commission programs. The total of 783,186 adults served included primary caregivers such as parents and other family members (683,069) and service providers (100,117).

By age, 31 percent of children served were under 3 years old, 32 percent were ages 3 through 5 years old, and 37 percent were of unknown age.

By race/ethnicity, children served included Hispanic or Latino as the largest group (38 percent), followed by White (11 percent), Asian (6 percent), Black or African American (4 percent), Other (4 percent), Two or More Races (2 percent), Alaska Native or American Indian (less than 1 percent), Native Hawaiian or Pacific Islander (less than 1 percent) and unknown race/ethnicity (35 percent).

With respect to primary language of children served, the two largest groups served were speakers of English (40 percent) and Spanish (21 percent), followed by speakers of Asian languages (Vietnamese, Cantonese, Mandarin, Korean, 2 percent) and language unknown (35 percent).





Priority Area: Child Health

KIT FOR NEW PARENTS

The award-winning *Kit for New Parents* targets hard-to-reach and low-income families, providing key information and resources for first-time parents, grandparents, and caregivers. The *Kit* is a foundational resource to support parents with the most important job anyone can have: parenting.

Since 2001, over 5 million *Kits* have been distributed throughout California, with 83,000 distributed in Fiscal Year 2021–22 alone. First 5 California has distributed the *Kit* free-of-charge to local hospitals, physicians, and community groups to reach new parents. *Kits* are available in English, Spanish, Chinese, Korean, and Vietnamese.

The *Kit* includes a health handbook; a baby board book; a Women, Infants, and Parentage Opportunity Program flyer; a poison control brochure and magnet; and other important information on paid family leave, literacy, and early learning.

The *Kit* also features the *California Parent Guide*. Written in collaboration with UC Berkeley's Health Research for Action, the *Guide* contains tips for parents on:

- Keeping children healthy and safe (includes COVID-19 safety information)
- Tracking developmental milestones
- Handling emotional and behavioral challenges
- Finding quality child care

Parents can also access the *Guide* online at:

- <https://parentguide.first5california.com/en-US> (English)
- <https://parentguide.first5california.com/es-MX> (Spanish)

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.

Parents can order the *Kit* directly by visiting First 5 California's ordering portal at <https://first5parentingkits.com>.

SMOKING AND VAPING CESSATION

A major health risk to young children is exposure to tobacco, which often comes in the form of cigarette smoke and vape aerosol.¹ Prenatal smoking dramatically increases the risk of preterm birth, low birth weight, birth defects, and damage to a developing baby's brain and lungs. Young children exposed to secondhand smoke are more likely to have ear infections, breathing problems, and learning disabilities. Use of e-cigarettes is problematic since vaping while pregnant and being around secondhand vape aerosol after birth can expose a developing child to nicotine and other toxins. Despite smoking prevalence going down in the state overall (from 16.5% in 2003 to 6.2% in 2021), smoking in California remains more than twice as high among low-income families, widening health disparities and posing risks to the most vulnerable children.² To approach health equity, smoking and vaping cessation services must reach low-income populations with free, convenient, culturally appropriate, and effective intervention.

First 5 California has funded the California Smokers' Helpline since 2001 to help parents and caregivers of young children quit smoking and vaping, educate the public about the harms of tobacco use, and reduce the likelihood babies and young children will develop tobacco-related health problems. Recognizing the need for a more inclusive name that extends to vape users and non-tobacco using proxies, in the fall of 2021, the California Smokers' Helpline was rebranded to Kick It California. This name change more accurately reflects the fact that, although telephone-based smoking cessation remains the core service, the use of tobacco has evolved beyond smoking, and changes in the way people seek help now requires more expansive forms of intervention services.

Helpline Services

Kick It California provides one-on-one telephone counseling for smokers, vapers, and for non-tobacco using proxies (i.e., family members or friends calling on behalf of smokers or vape users). Services are available in English (1-800-300-8686) and Spanish (1-800-600-8191) and through the Asian Smokers' Quitline (<https://www.asiansmokersquitline.org/>) in Chinese (Cantonese & Mandarin) (1-800-838-8917), Korean (1-800-556-5564), and Vietnamese (1-800-778-8440). For those who might not be ready to work one-on-one with a counselor, Kick It California services also include live chat, mobile apps, online videos, and most recently, an automated text program targeted toward smokers who are pregnant or have a young child in the home. Kick It California also has an interactive and user-friendly website (www.kickitca.org) designed to appeal to tobacco users, those who want to help others quit, and tobacco control advocates interested in fact sheets, promotional items, and county-level data on enrollee demographics.

In FY 2021–22, 3,163 tobacco users who were either pregnant, or parents or caregivers of children ages birth to five enrolled in Kick It California. Of those, 802 vaped, although most were dual users of cigarettes and vapes; 277 were seeking help for vaping exclusively. Kick It California also provided coaching services to 141 non-tobacco-using proxies.

Kick It California enrollees are ethnically diverse (almost 70% identify as other than white) and primarily low income (i.e., over 80% are Medicaid recipients). Over 80% have not obtained a college degree, and nearly 60% report one or more of the following mental health conditions—anxiety, depression, bipolar, schizophrenia, or drug/alcohol addiction.

Exhibit 10: Ethnicity

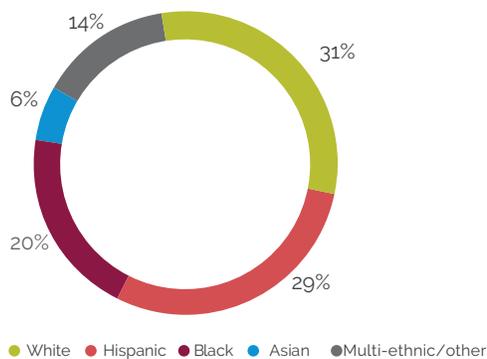


Exhibit 11: Insurance Coverage

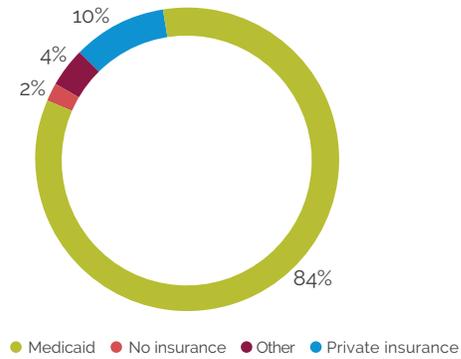


Exhibit 12: Education

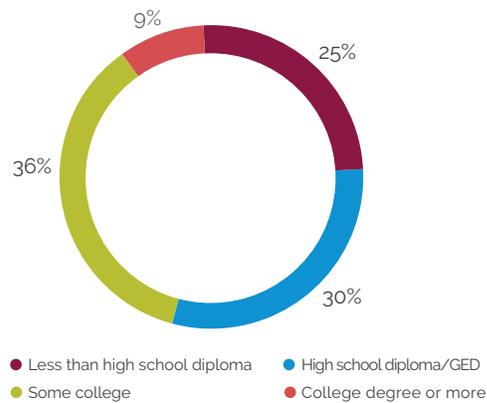
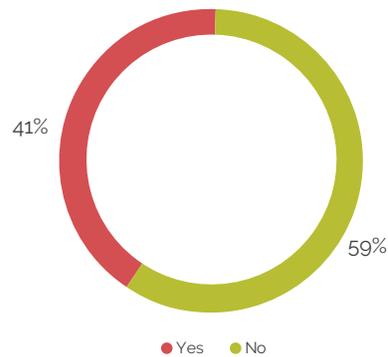


Exhibit 13: Mental Health Condition*



*At least one of the following: anxiety, depression, bipolar, schizophrenia, drug or alcohol addiction

Health Disparities

Smoking is increasingly concentrated among the socioeconomically disadvantaged² and is a primary cause of health disparities.³ Quitting smoking is hard and struggling to meet basic needs makes it even more difficult. Kick It California has been an important safety net resource for tobacco users across socioeconomic status, race/ethnicity, and mental health status. In FY 2021–22, Kick It California partnered with 211 Information

and Referral call centers to proactively reach out to low-income tobacco users, rather than waiting for them to call in for service. Most tobacco users who call 211s are seeking help with meeting basic needs such as help paying utility bills and rent, not seeking help with quitting. In this partnership, 211 staff ask callers about tobacco use and exposure and proactively refer callers who are interested in cessation services. Kick It California staff then calls those who are referred and enrolls them in service. In FY 2021–22, over 1,100 people who were pregnant, or parents or caregivers of children 0 to 5 years old received service through this partnership. Helping them and thereby preventing their children from the damaging consequences of exposure to tobacco is critical in the fight for health equity.

HOME VISITING

Home visiting is a primary prevention strategy for inter-generational support for pregnant women and families with children in the first few years of life. During the past decade, the home visiting landscape in California has become more complex as federal, state, and local funding is invested in home visiting services. Many First 5 county commissions support and fund home visiting. The California Department of Public Health implemented the California Home Visiting Program following passage of the Patient Protection and Affordable Care Act of 2010 that established the federal Maternal, Infant and Early Childhood Home Visiting Program with funds for evidence-based home visiting in every state. Additionally, the California Legislature passed Assembly Bill 1811 (Chapter 35, Statutes of 2018), appropriating funding for implementation of the California Home Visiting Program under the CalWORKs program, effective January 1, 2019.

Research shows intervening as early as possible to mitigate the impacts of poverty has the greatest likelihood of improving child outcomes. Early childhood home visiting and out-of-home prenatal/pediatric supports have proven to help vulnerable children and families overcome barriers to health and well-being. Yet, in California, not all families who are eligible and interested have access to voluntary home visiting or prenatal/pediatric support services. Only 10 to 20 percent of at-risk families who would likely benefit from home visiting receive these services.

Recognizing effective home visiting expansion requires an infrastructure to recruit and retain a well-qualified workforce and coordination across home visiting programs. In 2019, the First 5 California Commission authorized two investments to promote effective home visiting expansion and coordination:

1. Home Visiting Workforce Study. Effectiveness of home visiting relies upon a well-qualified, culturally responsive workforce. In July 2019, the Commission authorized \$2 million through January 2022 for a study to understand the demographics, training, retention, and well-being of the existing California home visiting workforce, map the workforce to the demographics of vulnerable families, and provide policy recommendations for workforce infrastructure and policy. In fiscal year (FY) 2020–21, Child Trends conducted interviews with over 80 home visiting staff and received survey responses from more than 900 home visitors representing 171 programs in 48 counties, and launched a home visiting supply and demand map to inform policymakers and stakeholders about service levels and gaps. Child Trends published their findings in March 2021, including analysis of how the COVID-19 pandemic impacted home visiting programs, staff, and service delivery, which were shared in F5CA's 2020–21 Annual Report.

The Home Visiting Workforce Study continued during FY 2021–22 with additional interviews and data collection, and concluded in January 2022. Child Trends released findings and policy recommendations from the Study on January 19, 2022. Recommendations include, but are not limited to:

- Increasing awareness of home visiting as a profession
- Increasing home visitors' access to trainings on diversity, equity, and inclusion as well as supporting the mental health and well-being of the workforce
- Adopting a core set of cross-model home visiting competencies for home visitors and supervisors
- Promoting cross-service coordination for systems integration through shared training, integrating the home visiting workforce into the career lattice and workforce registry, and other opportunities

First 5 California staff continue working with the First 5 Association of California, leaders from the California Department of Social Services and the California Department of Public Health, and other partners to move these recommendations forward.

2. Home Visiting Coordination Funding. Most California counties are implementing at least one home visiting program through First 5 county commission investments, Maternal Infant and Early

Childhood Home Visiting, or CalWORKS (Home Visiting Program) funding. Although most counties offer home visiting to families, counties report being at different stages of service coordination. For most, home visiting programs operate as separate and distinct programs even while sharing similar goals, principles, and desired outcomes. In October 2019, the Commission authorized \$24 million through June 2025 to promote home visiting coordination at the local level. The funding was to be implemented in two stages:

- Stage one included approximately \$9.5 million through June 2022 to support county coordination and technical assistance to 50 counties to achieve coordination goals. However, one of the effects of COVID-19 was an inability for some counties to convene local leaders and/or carry out planned home visiting coordination activities, disrupting most counties' ability to fully expend their contracts by June 2022. Most counties participating in the home visiting coordination funding opportunity chose to extend their contracts with F5CA for an additional year (through June 2023) to continue collaborating with home visiting and family support partners to coordinate intake and referral, data collection, and other activities, and embed home visiting into other child-and family-serving systems.
- Utilizing the remaining \$14.5 million, stage two continues and expands on stage one work with a focus on regional coordination and will begin in July 2023 after an extended Request for Applications timeline to allow more time for regions to develop their applications. Stage two will be implemented between FYs 2023–24 and 2024–25.

In June 2022, contractors from James Bell Associates and Johns Hopkins University, who provided technical assistance to counties engaged in home visiting coordination efforts, released policy recommendations for moving toward a coordinated home visiting infrastructure in California. Culminating recommendations are a result of data collected from several surveys of county commissions and other local home visiting program implementers, notes from technical assistance sessions, interviews with policy leaders, and other data gathering opportunities.

The recommendations focus on specific ways California can improve interagency coordination at the state level to support local county implementation, reduce duplication of effort, and remove barriers to families across programs and systems. Recommendations include:

1. Creating a state-level interagency steering committee to advance coordination and home visiting within the early childhood system of care.
2. Defining home visiting and its role within the early childhood system of care and creating state-level vision and goals.
3. Developing infrastructure to support parent leadership.
4. Creating a state-level fiscal map for home visiting and identifying opportunities to leverage funding.
5. Developing common home visiting data collection and reporting requirements.
6. Creating state-level infrastructure to support data integration.
7. Developing a state-level communication strategy for home visiting and a central location for sharing publicly funded assessments and evaluations.
8. Publishing an annual state-level home visiting scan to inform future funding and policy recommendations.

The home visiting workforce study and coordination activities are being implemented in collaboration with leaders from the California Department of Social Services, California Department of Public Health, First 5 Los Angeles, and the First 5 Association of California.





Priority Area: Child Development

IMPACT 2020

First 5 California completed the third year of IMPACT 2020, a \$103 million investment to support local and regional Quality Improvement System infrastructure implemented statewide through Quality Counts California (QCC). This represented a continued commitment to the innovative First 5 IMPACT approach to quality improvement and professional development systems for early learning and care (ELC) providers. IMPACT 2020 is designed to address the needs of the whole child and builds upon the initial effort of First 5 IMPACT, which was launched in 2015 and sunset on June 30, 2020. The implementation of IMPACT 2020 takes place at a local consortium level, supported by the Regional Coordination and Training and Technical Assistance Hubs (T&TA Hubs). IMPACT 2020 is funded from July 1, 2020, through June 30, 2023. It was included in a joint request for application (RFA) titled the Quality Counts California Local Consortia and Partnership Grants. QCC is administered statewide in coordination with the California Department of Education (CDE) and the California Department of Social Services.

IMPACT 2020 works in cooperation with all other ELC quality improvement efforts and investments in California to support the implementation of the QCC Quality Continuum Framework. IMPACT 2020 is specifically designed to fund quality improvement expansion and support providers serving high-impact communities and populations not already receiving support. QCC participation focuses on expansion of access to high-quality ELC in private centers and family child care (FCC) homes; with family, friend, and neighbor caregivers; and in alternative settings such as home visiting programs and libraries. For fiscal year (FY) 2021–22, local consortia participating in IMPACT 2020 reported that of the 9,139 sites participating in QCC, over two-thirds (5,236) were supported in full or in part with IMPACT 2020 funding.

Regional Coordination and Training and Technical Assistance Hubs

Training and Technical Assistance (T&TA) Hubs continued to be a vital source of support for consortia. Funded through IMPACT 2020 dollars, Hubs streamlined the collection of data and management of expensive data systems, saving substantial administrative dollars. T&TA Hubs provided trainings, facilitated communication, shared best practices, and promoted consistency in supports available to coaches, trainers, and administrators. Regional T&TA Hub support was deemed particularly beneficial by small and rural consortia that would not have been able to access certain training or have the critical mass needed for Communities of Practice (CoP) and other professional learning opportunities.

In FY 2021–22, Hubs identified taking steps toward increased equity as a major area of success. Regions hosted numerous professional development opportunities focused on training on equity, anti-bias, and anti-racism, including an equity conference, an ongoing, statewide Equity CoP, and reported that equity was brought to the forefront in decision making.

Support During the COVID-19 Pandemic

Due to the effects of the COVID-19 pandemic, consortia and T&TA Hubs have continued to show flexibility and responsiveness to the needs of ELC settings and the children and families they serve. While the pandemic brought closures to sites and delayed classroom observations, ratings, and delivery of planned professional development services, QCC administrators were able to adjust to meet new priorities such as emerging health and safety needs, and COVID-19 prevention practices and resources. QCC partners have found innovative ways to strengthen family support and focus on child social-emotional needs, training, and resources on a variety of critical topics, including trauma-informed practice, adverse childhood experiences, implicit bias, equity, and strategies to best serve multi-lingual learners and communities. IMPACT 2020 lead agencies continued

to provide quality improvement supports such as professional development training, coaching, and check-ins with providers and programs using various platforms to provide dedicated virtual quality support.

Shared Services Alliance Networks

Funded through IMPACT 2020, the Shared Services Alliance Networks (SSA) pilot began in FY 2021–22 to support private, licensed ELC providers and tribal child care settings, with priority given to FCC homes and other small and underserved providers. These SSA Networks leverage regional partnerships to streamline local operations, such as billing, enrollment, fund management, and reporting, which will allow for increased service capacity within the Network. The seven implementing counties have begun recruitment and implementation of shared services and will operate under the First 5 California funding through June 30, 2024.

State-Level Support

WestEd and First 5 California continue working together to deliver technical assistance and foster partnerships between QCC state agency partners, regions, and local consortia. This work includes building relationships with institutions of higher education and developing common definitions and shared quality standards across many professional development types. Alignment of quality standards is also being improved through the upcoming roll-out of the Coach Certification program.

The Coach Certification program was one of the biggest infrastructure development projects of FY 2021–22. In partnership with CDE, and with support from the Preschool Development Grant-Renewal (PDG-R), First 5 California worked on cross agency coordinated contracts to deliver three primary areas of work related to coaching development and services: Professional Development, Coaching Services, and Coach Certification. WestEd staff oversees content development, coordinates advisor engagement, and serves as liaison with internal and external partners.

Professional development activities included:

- Develop and implement six webinars based on previous professional development sessions, including two additional requested sessions
- Develop content for online and in-person adult learning and coaching modules based on California Early Childhood Education (CA ECE) Competencies and CA Coaching Rubric
- Develop online coach certification/orientation module

- Plan, coordinate, and implement virtual professional development and in-person professional development opportunities statewide in coordination with support team
- Support the delivery of 3,000 hours of professional development online to coaches, coach supervisors and trainers, expanding to site directors as appropriate
- Develop and facilitate professional development activities, including learning communities for coaches and trainers

Coaching Services included:

- Inform development of and implement virtual coaching system for 1,000 ECE providers
- Facilitate training for virtual coaching team
- Recruit, train, and coordinate with coaches statewide
- Develop and implement virtual training system for ECE trainers
- Develop training for virtual training team
- Recruit, train, and coordinate with trainers statewide

Coach Certification System Development:

- Further refine and develop coach certification process for use by 300 coaches
- Train and support certification review team
- Develop and support virtual and on-site certification orientations statewide multiple times per year
- Develop and distribute certification communications materials



- Liaison with various coaching entities, coaches, and other ECE providers
- Develop and facilitate online and in-person professional development to coaches statewide as needed

F5CA continues to explore options for long-term sustainability and management as well as expansion of CA ECE Competencies for Adult Learning and Coaching Course.

QUALITY COUNTS CALIFORNIA

Quality Counts California (QCC) is a statewide system of locally implemented Quality Rating and Improvement Systems (QRIS) that provide resources and support to early learning and care (ELC) providers so they can create engaging and effective experiences that help children grow and thrive. QCC was funded by IMPACT 2020, and state and federal funding administered by the California Department of Education and the California Department of Social Services.

All ELC participant sites in QCC are reported in the statewide common data file, which is inclusive of all the state's QRIS funding streams. This data provides the state an efficient and coordinated method for receiving information about each county participating in QRIS. As of June 30, 2022, there were 9,139 participant QCC sites across the state, including 3,283 family child care homes, 4,181 centers, 1,098 family, friend, and neighbor providers, and 577 additional alternative settings. In total, 343,269 children ages 0 to 5 benefitted from the quality improvement support provided by QCC.

Growth in QCC participation increased by 8 percent statewide from last fiscal year. Through the QCC Annual Performance Report, Consortia reported that 94% of QCC participant sites remained open during the COVID-19 pandemic. Ninety-two percent of QCC consortia indicated participation and support in QCC was as a major

factor in sites remaining open. This is especially encouraging considering as of January 2021, the California Department of Social Services reported 8,330 licensed sites, or 11% of licensed programs statewide, were closed due to COVID-19.

During FY 2021–22, QCC Consortia continued to respond to the changing ELC field and emerging priorities. While the needs are unique to different counties and their communities, QCC partners remain trusted messengers and further fostered responsive relationships with the field. Many counties reported success in the following:

- Strength-based, culturally responsive support
- Expanded access to high-quality training
- Provision of robust coaching supports
- Expanded outreach and participation of home-based settings
- Trauma-informed care, resiliency, and healing focused supports and resources
- Strengthened direct financial stipends and other incentives to ELC programs and providers
- Expanded support to multilingual and non-English monolingual learning programs and families
- New and expanded communities of practice
- Improved local governance structures

While many themes emerged from county QCC reports, several counties reported powerful, unique examples of meeting community needs. Some examples include:

- Orange County provided "Be Brave-Be Safe" training for all participating QCC programs and local homeless shelters serving families experiencing housing insecurity. Content was delivered to staff, parents, and children. Workshops focused on empowering children to develop their own safety plan and other child protection topics.
- First 5 San Joaquin expanded their local participation of family, friend, and neighbor providers from 60 to over 300. This outreach work was done by five community-based organizations focusing on the underserved Latinx, African American, and Southeast Asian communities.
- The Tribal Child Care Association of California reported developing a Tribal Workforce Pathways Program to help navigate and support higher education goals toward degrees, certifications, or professional development. For example, TCCAC developed culturally relevant professional development pathways including "The Journey Toward Healing." This pathway focuses on healing



and resiliency by addressing topics around trauma faced by children, families, providers, and communities. “The Journey Toward Healing” conversations, videos, and materials were created through a partnership with Brazelton Touchpoints Center.

Throughout FY 2021–22, the F5CA-funded QCC website was under review for updating content and layout to add additional resources and accuracy of information. These updates will expand content and resources for the parents and families and providers pages specifically. The website updates are anticipated to be implemented during FY 2022–23. For more information on QCC, visit the website at <https://qualitycountsca.net/>.

SMALL POPULATION COUNTY FUNDING AUGMENTATION

The Small Population County Funding Augmentation (SPCFA) grant was voted and created by the Commission consistently since the implementation of Proposition 10 in 1999. The Commission recognized shortly after implementation of the Act that the statutory proportional funding formula based on birth rate didn’t provide adequate funds to operate effective First 5 programs for counties with low birth rates because the formula did not set a base funding level for all counties.

Through this grant, small population counties have received base funding to support county commission activities needed to fulfill the statutory requirements and for Proposition 10 to be a statewide effort that promotes, supports, and improves the early development of children ages 0 to 5.

The new 3.25-year grant funding term (April 1, 2021, through June 30, 2024) focuses on evaluation activities related to systems change efforts, their intended and actual impacts, as well as exploring the potential for pooled services for the purpose of improved efficiencies. This new grant saw an increase (from 20 to 21) in SPCFA counties, due to the increased number of counties with 1,000 or fewer annual births between FYs 2017–18 and 2018–19, which is the set eligibility criteria for the grant. During FY 2021–22, \$4,592,796 was budgeted by small population counties (SPC) to administer their First 5 county commission and fund programs.

During FY 2020–21, SPCs completed the initial version of a systems change tool – Telling the Story of Systems Change. In FY 2021–22, a revised tool, the Systems Change Data Map, was developed to build on the First 5 Association’s Race, Equity, Diversity, and Inclusion (REDI) focus. This Data Map Tool (DMT) has a more explicit focus on equity and the data SPCs use to help demonstrate



the reach and impacts of their systems change activities. Development of the DMT included SPC’s participation in focus groups to gather feedback about key components of their systems change work. To help prepare SPCs in the completion of the tool, a webinar was held to train them on the use of the DMT, review examples of its completion, and answer questions prior to the October 2022 submission. The submission highlights SPC’s specific systems change activities that foster cross-sector collaboration in an effort to improve outcomes for children and families.

First 5 California continued to partner with Child Trends to identify options for a pooled services pilot. To build on prior work, four states who have implemented pooled services were interviewed to gain an understanding of lessons learned, and focus groups were held with 20 of the 21 SPCs to explore their experiences, preferences, and priorities for pooled service options. The two identified priority areas by SPCs for pooled services were virtual trainings and shared marketing materials. The information gathered will be used to determine whether and how best to implement pooled services for SPCs.

DUAL LANGUAGE LEARNER PILOT

Research is clear that learning multiple languages is an asset, young children show natural tendency for learning multiple languages, and there are multiple benefits of being a dual language learner (DLL), including cognitive skills, academic outcomes, and long-term health and economic gains. Nearly 60% of children ages 0 to 5 years in California are DLLs whose home language is a language other than English.

In 2016, First 5 California was authorized a \$20 million investment for the DLL Pilot by the State Commission. The DLL Pilot was implemented between 2017–2022 in 16 California counties. This investment coincided with the passage of Proposition 58 in 2016, which repealed English-only laws. The DLL Pilot study was designed to examine effective culturally and linguistically responsive strategies in instruction, professional development, and family engagement in early learning and care settings, and the conditions in which they are effective, sustainable, and scalable.

The DLL Pilot study was implemented in three phases: background, in-depth, and expansion. Each of the three phases built on one another to further the goal of California's DLLs to thrive, develop multilingual ability, be ready for kindergarten, and succeed in school and beyond.

In the background phase, 16 counties were identified to implement the DLL Pilot and the American Institutes for Research (AIR) was selected as the evaluation contractor. Initial findings in this phase revealed that overall beliefs about bilingualism and policies to support DLLs are in place, but there are still systemic challenges that limit implementation of high-quality instruction for DLLs.

In the in-depth phase, AIR collected data around the instructional, family engagement, and professional development strategies associated with positive child and family outcomes, and how they vary in the context of children's age group and setting type. AIR modified the study design due to the challenges presented by COVID-19 to collect additional data about experiences of families during this health emergency.

During the expansion phase (fall 2020–summer 2022), the DLL Pilot counties included an additional 28 counties with a regional approach, expanding the pilot activities to 44 of the 58 California counties. Counties offered over 90 professional development training sessions to nearly 2,400 providers. Over 80,000 books in multiple languages have been distributed to over 12,500 families. Expansion phase services and activities reached children and families whose home language is a language other than English, with a total of 27 different languages.

The pilot counties and their partners participated in monthly communities of practice (CoP) sessions. Through the CoPs, counties worked together around DLL best practices related to implementing, expanding, and sustaining their DLL expansion projects, made policy recommendations to better support DLLs, and highlighted resources that should be developed and translated to support high-quality practices. The CoPs were implemented in partnership with the Advancement Project of California, Early Edge California, California

Department of Education—Opportunities for All Branch, and the American Institutes for Research (AIR). The CoPs were facilitated by the Glenn Price Group through a grant funded by the Emerging Bilingual Collaborative.

Study Findings

The DLL Pilot study evaluation was conducted by AIR. AIR published over twenty reports highlighting key issues, challenges, and recommendations for policy and practice, which provided a deeper understanding of multi-lingual language learners, their families, how early childhood education systems and local county systems support their needs.

Highlights of the findings include:

- Partnering with families is critical: When families' home language and culture are supported in school and at home, children show better outcomes.
- Multilingualism is an asset: Multilingualism improves cognitive abilities and changes brain architecture to promote short- and long-term success.
- Caregivers need to understand how to work with DLL populations, which requires a systematic approach.

Recommendations for Policy and Practice

To best support DLLs in early learning settings throughout California's mixed delivery system:

- Widely disseminate key messages about the benefits of bilingualism and the value of home language use to encourage families, programs, and communities to prioritize children's bilingual development.
- Include knowledge of language development and best practices for supporting DLLs from birth through age 5 in educator competencies.
- Enact policies to broaden the language diversity of the early learning and care workforce and encourage multilingual educators to use the home language in early learning classrooms.
- Expand access to and support early educators to participate in professional development focused on working with DLLs and their families.
- Provide early learning programs with books and materials in children's home languages to share with young DLLs and their families.
- Support the development and use of culturally and linguistically responsive tools and assessments to identify DLLs upon enrollment and monitor their learning and development in English as well as in the home language.

- Encourage two-way communication with families:
 - Gathering information about families' language, culture, and learning goals to inform instruction
 - Providing information and engagement opportunities that are culturally and linguistically responsive.

The DLL Pilot investment provided a better understanding of what it takes to offer culturally and linguistically responsive supports to multilingual children and their families and ensure their care providers are prepared to serve their needs. It also illuminates areas to focus on to continue First 5 California's commitment and scale up multilingual supports statewide.

FUNDED RESEARCH: CALIFORNIA EMERGENCY CHILD CARE BRIDGE PROGRAM

During 2022, the Child Care Resource Center released the *Strengthening California's Emergency Child Care Bridge Final Study Report*. First 5 California co-funded the evaluation with the Heising-Simons Foundation and First 5 San Bernardino. The purpose of the evaluation was to identify outcomes and guide continuous improvement for the recently implemented statewide emergency child care program for children in foster care.

The Emergency Child Care Bridge Program for Foster Children (Bridge Program) was enacted by the State Legislature in 2017 to provide kinship caregivers, or other caregivers, emergency child care. Overseen by the California Department of Social Services, the Bridge Program works to connect child welfare agencies and early learning and care systems in each county across the state. Foster parent caregivers can receive emergency child care vouchers with child care navigator support to help them find care appropriate for their family, while child care providers receive trauma-informed care training and coaching. The report identified statewide successes and challenges faced by families and staff during implementation of the Bridge Program. The following outcomes were identified:

- The Bridge Program decreased economic and emotional stress of caregivers
- 90% of providers stated trauma-informed care training and coaching helped them better support the foster children in their care

- Bridge administrators expressed the importance of collaboration, networking, and establishing a strong working relationship and consistent communication between partner agencies were necessary to the successful implementation of the Bridge Program across all counties

In order to continue the success of this program and ensure that California's most vulnerable children have access to quality child care, the study includes the following recommendations:

- Keep implementation process changes made in response to the pandemic to maintain accessibility and increase convenience for foster families and child care providers
- Extend the length of the Bridge voucher and allow children and families to continue accessing subsidies after reunification or adoption
- Increase program funding to allow for expanded eligibility and out-of-county placements
- Provide additional support in marketing, outreach, and advertising trauma-informed care training and coaching





Priority Area: Family Functioning

FIRST 5 CALIFORNIA PARENT WEBSITE: [FIRST5CALIFORNIA.COM](https://first5california.com)

First5California.com is the main resource for parent engagement on child health, education, literacy, child development, and smoking cessation. In recent years, the website has expanded to incorporate additional information on early brain development, including activities, downloadable resources, and links to organizations that support family functioning strategies. In 2021, First 5 California's Parent Site was updated with new content and resources centered around family engagement and toxic stress response in both English and Spanish. Content for the site was informed by educators and researchers in the field of child development. The site provides enhanced levels of functionality, enabling parents to create an account and personalize their visit by inputting their child's age, allowing them to access resources, tips, and activities specific to their interests. Parents and caregivers visiting First5California.com can browse by their child's age group—Newborn, Baby, Toddler, or Preschool—to check developmental benchmarks and instantly access a wide variety of parenting tips, articles, instructional videos, and developmentally appropriate activities geared specifically for that age group. The First 5 California Parent Site serves as a resource tool for families seeking up-to-date information, services, and programs.

SOCIAL MEDIA

The First 5 California Parent Site links to the organization's multiple social media channels, including Facebook, Instagram, Pinterest, and YouTube. Across most platforms, followers receive regular posts that highlight simple, actionable tips, and ideas related to early brain development, nutrition, family engagement, and healthy development. First 5 California's Facebook audience includes 213,000 followers. Instagram has 13,200 followers, Pinterest has 2,000 followers, and Twitter has

19,400 followers. During fiscal year 2021–22, engagement continued to increase as families were still spending time at home and logging onto social media to find activities to engage their children and to look for information about staying healthy and the latest on COVID-19. Throughout 2021 and 2022, First 5 California broadcast numerous Facebook bilingual book readings for families. Throughout 2021–22, First 5 California strengthened our partnership with the California Department of Public Health (CDPH) to share timely information about the importance and availability of family and child vaccinations through all our social media platforms.

MEDIA CAMPAIGN

In 2021, First 5 California engaged a new media firm to expand on the success of the *Talk. Read. Sing.*® Campaign and support First 5 California's North Star and Audacious Goal. The new media campaigns will provide messaging that supports parents and caregivers in developing safe, stable, nurturing relationships and environments to buffer against toxic stress response and ensure young children can thrive.



First 5 County Highlights

Alameda

In FY 2021–22, First 5 Alameda County focused on building and enhancing a local early childhood system that supports community and family conditions for children's kindergarten readiness. First 5 Alameda conducted a strategic planning process that engaged staff, community partners, and parents/caregivers that reinforced its whole community, family, and child approach which reflects their Place-People-Policy framework to guide investments. This system-building approach requires leveraging public funding to scale programs and strategies seeded by Proposition 10 that have proven impactful—expanding the infrastructure required to support that scale. Some of First 5 Alameda's major accomplishments in FY 2021–22 include:

- **Managed Care Partnership:** Received \$1.4 million grant from the Alameda Alliance for Health to support pediatric outreach and care coordination through Help Me Grow
- **Readying for Local Early Childhood Education (ECE) Ballot Measures:** As the named administrator for Alameda County's Measure C and the recommended implementation partner for Oakland's Measure AA, First 5 Alameda invested in the ECE system through a needs assessment, workforce development taskforce, and facilities needs assessment, and received \$1 million from Alameda County Social Services to build a Centralized Eligibility List; Readied Agency infrastructure, staff, governance, and policies were prepared to administer
- **Kindergarten Readiness Assessment:** Conducted a participatory research process, surveying 3,000 people in Alameda County—parents/caregivers, ECE providers, and transitional kindergarten/kindergarten teachers to document the impacts of the pandemic on kindergarten readiness, and provide recommendations in the environments that influence readiness, such as communities, families, and schools
- **Lifted system building efforts,** blended funding of the ECE Apprenticeship and Diaper Evaluation, and were invited to present at statewide conferences
- **Enhancement of the Parent Partnership efforts,** including hosting a Fatherhood Summit, and planned investments in Black Maternal Child Health efforts

Alpine

First 5 Alpine County focuses most of its investments on child development programs and parent education.

- The Alpine Early Learning Center is the only licensed child care center serving Alpine families as young as 6 weeks old and continues to serve them until they enter kindergarten.
- The Catalyst Community Parent Education Project provides learner-centered workshops to parents, caregivers, and providers. A key accomplishment in FY 2021–22 involved coordination of a Kindergarten Round-up event to better prepare children, families, and the school system for the 2022–23 school year. Eight of the nine students (88 percent) anticipated to enter kindergarten were served by this event. This represents an increase over the previous year's early registration of 11 out of 15 (73 percent) students. The results of the event included:
 - » Improved service coordination and connection to care: Kindergarten Round-up was a coordinated effort to register families for kindergarten and connect them to services and supports. The Alpine Early Learning Center helped recruit and engage families as well as hosted the event; school district built new relationships with families, and educated families on options for transitional kindergarten and kindergarten; and First 5 Alpine conducted outreach to families outside of the Alpine Early Learning Center and provided supplies. During this event, partners conceptualized additional means to support families; while not fully implemented in FY 2021–22, new efforts planned include the development of an Early Childhood Literacy Group, where parents and caregivers will be engaged over multiple sessions to support children's literacy skills, and a Meet and Greet event designed to support transitional kindergarten and kindergarten families at the start of the school year.
 - » Facilitating use of data across early childhood systems: School readiness data gathered by the kindergarten teacher can be used to customize learning opportunities for incoming students. It can also be used by First 5 Alpine to better understand what services may be most useful in preparing children for kindergarten in the future.

Amador

First 5 Amador County continued to invest in areas that support parents as their children's first teacher. Staff and community partners transitioned back to in-person service delivery which was extremely well-received by families. More than 175 children have participated in the newly established Messy Morning program launched in the spring of 2022. This weekly event provides an opportunity for children and caregivers to participate in child-led outdoor messy play focused on science, engineering, art, and math (gardening, painting, and building). This has become one of First 5 Amador's most popular programs and serves 25 to 40 children per event. Adults in attendance include mothers, fathers, grandparents and other family, friends, and neighbor caregivers. Families report building relationships with others and are the best marketers of this program by wearing their T-shirts to the events, stores, schools, etc. Through this family engagement activity, staff has introduced the online assessment system, social/emotional services, and concrete support such as fuel, diapers, and food provided through leveraged funding. First 5 Amador maximized opportunities to engage families utilizing the on-site Indoor/Outdoor Learning Labs and on-site programs. First 5 Amador's universal home visiting (Welcome Baby) is now administered in-house and has provided a seamless cross-referral to First 5 Amador and partner family strengthening services. A significant increase in participation in the Imagination Library family literacy program has been realized during FY 2021–22. First 5 Amador attributes the high participation rates to staff's successful referrals and new partnerships for utilization of its facility with the Women, Infants, and Children Program and its county resource and referral agency. First 5 Amador continued to spearhead efforts such as the Perinatal Wellness Coalition and holds the Amador Child Abuse Prevention Council and Resilient Amador under its umbrella to support the whole child and family.

Butte

First 5 Butte County Children and Families Commission envisions that every child will have the opportunity for a resilient, thriving future through a nurturing, supportive network of families, caregivers, and their community. In FY 2021–22, First 5 Butte County continued to support priorities in all areas of its strategic plan. In order to support the expansion of the Help Me Grow Butte (HMGB) initiative, and strengthen its commitment as a system's leader, First 5 Butte County established a staff position to provide system

coordination and navigation services to families. This was remarkable because it marked the first time First 5 Butte County had staffed a direct-service position, sending a strong message to partners and the community about the commission's long-term commitment to ensuring that families with young children are able to access the services they request that supports their optimal development. Bringing the program internally enabled First 5 Butte County to deepen its relationships with county entities such as Child Welfare, Public Health, and Butte County Office of Education, and to leverage those relationships to conduct more effective outreach to community providers. Because it takes a village to raise a child, First 5 Butte County was proud to convene local home visiting providers and develop strategies to ensure that home visiting programs are successfully reaching the families who will benefit most from their support. Through their existing HMGB structure, and together with their partners, First 5 Butte County developed The Village, a coordinated system that provides a referral solution for all community providers. Families and referrers can submit an inquiry about home visiting, and a care coordinator will assist families in understanding program models and eligibility requirements, thereby empowering family choice when selecting a home visiting program.

Calaveras

In FY 2021–22, First 5 Calaveras County invested in prevention activities, early literacy promotion, and parent education. Grantees were able to start providing services in-person after a long period of pandemic-related remote services. Local First 5 funds were braided with disbursements from First 5 California, California Department of Education, and the local Mental Health Services Act and Prevention that provided a variety of services to families, caregivers, and teachers.

Parent support, and education and family literacy programs included an intensive home visiting program, virtual-based parent education offerings, and a variety of community-level Talk. Read. Sing.[®] approaches, including programs in remote mountainous areas of the county. The Court Appointed Special Advocate program was strengthened with local First 5 resources. Where intensive services were provided, parents reported positive learning outcomes and strong engagement in the learning process. The early learning and care system in Calaveras County was supported through Strong Start Calaveras, which motivates sites and teachers to meet quality improvement goals (through a stipend program) and provided a wide variety of coaching and mentoring to local providers.

The First 5 California Dual Language Learner Pilot program provided resources and training to cohorts of early childhood educators in Murphys and Valley Springs. Early learning and care professionals continue to participate in the program, demonstrating engagement during a difficult year as schools continued to deal with COVID-19 protocols and family frustrations.

Child Health was supported through preschool-based nutrition and safety programs, which were welcomed back for on-site activities. Teachers reported that children were fully engaged in the activities and that the lessons were incorporated into on-going curriculum. Collaborative planning and strategizing continue to be critical components in building a comprehensive service approach for young children.

Colusa

In FY 2021–22, First 5 Colusa County focused on supporting children, families, and providers as the communities rebounded from the effects of the COVID-19 pandemic. Working with local and state partners, First 5 Colusa was able to leverage over \$225,000 in funding to provide additional support services to families in areas of parental resilience, social connections, and concrete supports in times of need.

First 5 Colusa's Family Resource Centers (FRCs) expanded essential services to families experiencing financial and emotional hardships as a result of the pandemic. Additional funding was secured to expand the Health Navigator project, address food insecurities, and coordinate systems of care. The FRCs distributed more than 498,895 pounds of food to families experiencing food insecurities. In coordination with county partners, frequency of food distributions was increased, and the development of on-site food banks were established. In addition, the FRCs secured vital resources to families such as personal hygiene products, diapers, COVID-19 test kits, and personal protective equipment.

In FY 2021–22, First 5 Colusa also focused on the expansion of its Help Me Grow (HMG) program and focused on the recruitment and enrollment of family child care (FCC) providers into the HMG screening network. With a large population of children ages 0 to 5 in FCC homes, providers were essential in ensuring access to developmental screeners. Forty-five percent of FCC providers participated in First 5 Colusa's HMG screening network. First 5 Colusa continues to work with its partners to create a systematic approach that focuses on ensuring children birth through age 5 and their families thrive. Investing in Colusa County's youngest citizens today yields long lasting results for future generations.

Contra Costa

First 5 Contra Costa County continued the whole child, whole family approach by ensuring services and systems are integrated, equitable, inclusive, and trauma-informed.

- **Resource Connections:** In FY 2021–22, First 5 Contra Costa served 3,687 families through services/programs including over 500 classes through the First 5 Centers. As families continued to face challenges, First 5 Contra Costa distributed 208,144 diapers; 2,340 baby wipes; 2,160 COVID-19 test kits, sanitizers, and children's masks.
- **Building Capacity:** Our Ready Kids East County initiative continues to gain momentum with parent cafes events that leverage partner resources to rally around Black/African American families to build school readiness and knowledge of community services. Through our Adverse Childhood Experiences Aware (ACEs) grant, First 5 Contra Costa took a holistic view of addressing ACEs structured and trauma-informed systems of care. Training, coaching, and technical assistance opportunities were provided to combine effective ACE screenings (2,474 ACE screenings for children), close loop referrals, and wellness activities.
- **Stakeholder Engagement:** To support quality-learning environments, First 5 Contra Costa served 1,817 providers through training and coaching. Also highlighted was the culmination of a 17-year partnership with community colleges—since 2005, First 5 Contra Costa has reached over 10,000 students with college advising, stipends, cohorts and study groups, leadership development, and quality improvement.
- **Policy Advocacy:** After 14 months of community engagement and advocacy by the Central County Regional Group and partners, the Concord City Council passed an anti-harassment policy protecting renters, keeping children in their homes. In East County, the Regional Group released the Antioch CHANGE report summarizing the experiences of more than 1,000 Antioch residents with recommendations for housing stability. In partnership with the Early Learning Leadership Group, a collaboration of county leaders, First 5 Contra Costa secured \$6 million in ongoing funding for teacher stipends, child care slots, and disability services through Measure X, a sales tax initiative in Contra Costa County.

Del Norte

During FY 2021–22, First 5 Del Norte County expanded its reach of Dolly Parton's Imagination Library throughout the year with registration forms handed out to every preschool class, kindergarten class, child care provider, community baby shower participant, partner program participant in programs such as Toddler Time and Happy Toes, and a new parent kit registration in the county. Enrollment continues to increase, and feedback from families has been positive.

In FY 2021–22, First 5 Del Norte continued providing and developing culturally appropriate content of the parent-support texting program Ready4K. Working with ParentPowered, First 5 Del Norte is adapting their existing texting program, Ready4K, to provide connections to local programs and resources, encourage community connections, and boost mental health and protective factors messaging. The goals of the project are to increase parent capacity to support a child's social-emotional development and school readiness; increase parental resilience, self-care, and access to mental health services; and connect parents to their community and community resources.

In FY 2021–22, First 5 Del Norte focused heavily on parental and child resiliency through these trying times. They also continued leading the way in Del Norte County for early literacy efforts through their 3READ23 And Beyond collaboration. First 5 Del Norte re-engaged its families by re-interviewing them using the Human Centered Designed Empathy Interviews. First 5 Del Norte took the pulse of where the community is and what kind of supports are needed to continue early literacy efforts. Many of the support needs have been or are being rolled into the home visiting collaborative work in Del Norte County. First 5 Del Norte has been working hard to bring a universal referral system to Del Norte County and has been engaging community partners as stakeholders.

El Dorado

First 5 El Dorado County is the collective impact lead in a systems-change effort to increase access to services and supports for children, families, and individuals in their community referred to as Community Hubs. Hubs were established to connect families and individuals with services, offer preventive screenings, and walk with them toward resiliency. When COVID-19 persisted in FY 2021–22, Hub leadership noted an increased demand for basic needs support, including food, housing, health insurance, bills, and behavioral health interventions. In response, Hubs were reimagined with a focus on navigating families to existing services that met their needs. When the Caldor Wildfire erupted in August 2021, Hub staff were deployed for crisis

response and engaged in a multi-agency effort to evaluate and support the health and wellness needs of El Dorado County residents. This flexibility demonstrated the effectiveness of the model to evolve and meet community needs.

During FY 2021–22, a total of 1,968 individuals were provided with Community Hub services. Key elements of the model include:

- Local libraries serving as community resource centers with bilingual navigators to walk with families
- Navigators connecting families and individuals with supports and services that addressed their unique situations both in the libraries and the community
- Community advisories with local voices identifying service gaps and barriers, learning why they exist, and developing equity-based approaches
- Integrating continuous quality improvement strategies such as Plan-Do-Study-Act cycles, improvement coaching, and staff rounding

First 5 El Dorado reaffirmed its commitment to the Hub model within its FY 2021–23 Amended Strategic Plan.

Fresno

First 5 Fresno County partners with its community to create a seamless system of quality, accessible services that support the well-being of every child and family. The following are two examples of partnerships with community-based organizations (CBOs):

- **Building Black Program:** African American-led CBOs are trusted sources of vital medical, behavioral, and social supports and interventions for African American families within Fresno County, yet unrestricted net assets of Black-led organizations are 76 percent smaller than their white-led counterparts. It was clear to First 5 Fresno County that there stood a need for funders to support organizational capacity-building opportunities that promote the sustained excellence of CBO leaders through racial healing and connections, while positioning these organizations for future investments. First 5 Fresno County partnered with United Way of Fresno and Madera Counties to launch the Building Black Program with topics, including executive coaching, grant reporting, organizational advancement, and resiliency. This investment aligns with First 5 Fresno County's larger commitment to the prevention of infant mortality in the African American community.
- **Thriving Families Support Network:** In the fall of 2018, First 5 Fresno County engaged more than 600 parents/caregivers and community members to learn about the most

pressing challenges facing families in Fresno County. Through First 5 Fresno County's Thriving Families funding opportunity, CBOs proposed program models addressing these key challenges, uniquely tailored to the communities they serve. FY 2021–22 marked the second year of partnership with 8 organizations providing a range of direct services across the county. Examples include parenting skill building with incarcerated/out-of-custody young parents; support groups with parents of deaf and hard of hearing children; family literacy activities focused on recent arrivals and refugees; and child socialization groups in rural Fresno County.

Glenn

First 5 Glenn County's highlights of the FY 2021–22 program year include 12 families directly served through First 5 Glenn's programming specified in the FY 2019–22 Strategic Plan. Following is a snapshot of the experience of the 12 families who participated in Nurturing Parenting classes. (Due to the small number of families for which these data are available, these results should not be generalized to a larger population):

- Increases in protective factor domains. All families for which pre- and post-data were available demonstrated growth in at least one protective factor domain after services; nine families demonstrated growth in the Family Functioning and Resilience domain; eight in the Social Supports domain; and six in the Nurturing and Attachment domain.
- Experienced inconsistent results in the maintenance or increase of family habits that support child development. While some families reported maintaining or increasing the frequency with which they engage in activities that support child development, such as reading, counting, or playing with their child(ren), other families reported decreases in these same metrics.
- Reported high rates of satisfaction with the program. One-hundred percent of respondents to a survey offered at the end of the program, indicated they were satisfied with the services offered through the Nurturing Parenting classes.

Families, child care providers, and schools were provided with resources through supply distribution activities. First 5 Glenn staff distributed approximately 25,000 individual baby, educational, cleaning, hygiene, and personal protective equipment supplies in FY 2021–22 to children, families, daycare center staff, and schools.

Humboldt

First 5 Humboldt County continues to focus on work that is responsive to community-identified needs and incorporates community-driven practices. These partnerships aim to build upon the strengths and assets that already exist within the organizations and agencies that serve children and families in the county, and to "de-silo" efforts by bringing diverse partners together in new and innovative ways. The Road to Resilience (RtR) Program is a partnership between First 5 Humboldt and United Indian Health Services (UIHS) that provides intensive services and support to pregnant and newly parenting people who are impacted by Substance Use Disorder. RtR supports Perinatal Healthcare Navigators at UIHS that work closely with families to help them access physical and mental health care, parenting support, and other services during this critical time for child development and family bonding. This allows for services that meet families where they are and centers service plans directly around a family's communicated needs. Families are also supported in connecting/reconnecting with traditional birthing and parenting practices. For example, in 2022, First 5 Humboldt worked with a local weaver to make baby rattles for program participants using materials that are significant to local Tribal communities. First 5 Humboldt also supported UIHS staff to complete an Indigenous Breastfeeding training. An Indigenous doula training is also planned. In addition, First 5 Humboldt approved grants in the spring of 2022 for two playgroups which infuse Indigenous languages (Hupa and Yurok) and cultural practices specific to two of First 5 Humboldt's local Tribes. First 5 Humboldt also has expanded weekend and evening playgroups and playgroups offered in Spanish. First 5 Humboldt continues to look for ways to be supportive of local children and families in ways that honor and respect the needs, practices, and approaches valued by the First 5 Humboldt community.

Imperial

In FY 2021–22, several services designed to support the healthy development of children were realized through strong local partnerships and funding allocations. These services focused on strategies and activities that ranged from strengthening support for children in foster care to robust home visitation programs and child literacy services. One of the notable commitments of First 5 Imperial is the continual support for quality improvement in all early care and education (ECE) settings with the objective to positively impact the health and academic development of a child. Because of sustained investments, collaboration, and pooling of resources with the County Office of Education,

institutions of higher education, Migrant Head Start, Social Services, and a significant number of child care sites throughout the county, meaningful gains and quality improvements have been realized. Some of these efforts include increasing scholarships/stipends offered for educational attainment, increased opportunities for professional development, direct one-on-one coaching with a strong emphasis on family child care, and establishing support for early childhood mental health. An assessment of the ECE workforce supports the impact that these investments have had locally. For example, over 46% of the workforce has at least an Associate of Arts degree, and 26% has a Bachelor of Arts degree or higher, with the greatest increase for family child care homes. Another 38% have obtained college-level units, with a potential identified for targeting center-based assistants to increase their education which would support promotion and retention. Furthermore, professional development for the ECE workforce has contributed to building capacity for working with special needs children (43%) and English Language Learner children (47%), in addition to meaningful increases in all ECE sites that use Classroom Assessment Scoring System®, the Desired Results Development Profile, and offer developmental screenings.

Inyo

First 5 Inyo County was a catalyst for positive change in FY 2021–22, serving families and agencies while on the recovery road from the COVID-19 pandemic. In Systems Building, First 5 Inyo County facilitated the Perinatal Taskforce, defining a vision and mission to ensure services are strategic, and implemented a maternal mental health survey to uplift the voices of birth parents and their experiences. In the Triple P Network, First 5 Inyo County instigated a countywide outcomes project to tell the story of the collective impact of participating agencies in reaching families with positive parenting support. This storytelling project illuminated the story that families served increased by 26% from the previous year. This story of more families accessing services held true across First 5 Inyo County Resilient Families programs like Triple P Positive Parenting, You & Me Home Visiting, and literacy programs Reach Out and Read, and Dolly Parton's Imagination Library. Families expressed gratitude to Triple P practitioners and home visitors for the support and connection as services resumed in-person. First 5 Inyo County also provided programs like Community Grants to help decrease the challenges of recovering from the pandemic, including assisting child care sites in hiring additional staff to keep class sizes small and purchasing additional learning supplies

to increase outside play. Despite this and many other examples of support, many child care sites closed over the program year. Inyo County lost 115 child care slots representing 20% of licensed family child care homes and 23% of center-based care available. Through partnerships with the Inyo County Local Child Care Planning Council and the Quality Counts California Region 6 Hub, First 5 Inyo County is working to bring awareness to the child care crisis, including the need to pay child care providers a living wage and ensure all children have access to high-quality early learning opportunities.

Kern

During FY 2021–22, First 5 Kern County funded programs to put forth great effort in reaching families struggling through the public health crisis. First 5 Kern has found strength in creating strong partnerships and bringing agencies together to support serving children and families. Among its collaborative efforts, First 5 Kern embarked on a year-long planning grant from Adverse Childhood Experiences (ACEs) Aware, which brought together hundreds of local service providers. The grant culminated with an ACEs conference in spring 2022. The full-day event was held virtually and was an excellent opportunity to highlight a pilot project with Omni Family Health, a local Federally Qualified Health Center, on incorporating ACEs screenings in clinical settings. First 5 Kern, with its original initiative, Resilient Kern, has strengthened its position as a local leader in trauma-informed care practices and training with ACEs Aware Kern County.

In FY 2021–22, First 5 Kern also supported the culmination of an 18-month-long Kern County home visiting project. The diverse group of funded programs included Nurse Family Partnership, Black Infant Health, Family Resource Centers, and other community partners. The project collected data and hosted collaborative learning sessions on program models, the populations that are served, and geographical areas covered. First 5 Kern staff also participated in the establishment of the Black Infant and Maternal Health Initiative of Kern County. Known as BIMHI, the committee set a multi-year strategic plan for reducing health disparities in the local African American community, specifically pertaining to newborns, pregnant women, and childbirth. Additionally, recognizing a continuing need for families in the community for diapers, FY 2021–22 included the delivery of over 200,000 cases of diapers. An initial supply from First 5 California of 25 pallets, and another 9 pallets later in the year provided by First 5 Kern, were distributed throughout the Family Resource Center network, health and wellness programs, and child care centers.

Kings

The Kings County Children and Families Commission continued to support local initiatives related to quality early child care and education, parent education and support, children's health and systems integration and alignment. The local Family Resource Centers collectively served 522 children and 471 primary caregivers, ensuring that these families and children had access to a variety of services. Our local C.A.R.E.S. program provided professional development and training/technical assistance to the early care and education field through coaching and training to enhance the skills and knowledge of 185 providers. School readiness skills and training for professionals who work with children with special needs was the focus of another locally supported program, catering to 161 primary caregivers, 59 providers, and 327 children. The Referral Exchange System took on the challenge to create a county-wide referral system utilizing a new technology platform, onboarding providers from a variety of services including, but not limited to, health, social services, and early care and education.

First 5 Kings staff also engaged the funded programs with other community partnerships/initiatives, including Home Visiting Coordination, ACEs Aware, a regional collaboration for the Refugee Family Support, Managed Care Plans, Court Appointed Special Advocates, Child Support Services, City Recreation Department, and local activities related to formulation of our County's Comprehensive Prevention Plan in accordance with the Families First Prevention Services Act. Lastly, one of our funded partners, Kings County Office of Education was recognized as the organization that had the Greatest Contribution to Parent Support, at an annual county-wide Prevention Awards.

Lake

First 5 Lake collaborated within the county and across the region to support families and providers.

- Between September 2021 and February 2022, First 5 Lake was focused on recruiting and onboarding a new Executive Director, who joined First 5 Lake in January 2022. This time was used to organize for a seamless transition. The new Executive Director brought attention to the need for child care in the county and set a timeline for strategic planning, beginning with a community assessment in July 2023.
- First 5 Lake hosted a virtual meeting for First 5 commissions and agency staff from across California to learn more about the Families Together program and if it might be a good fit for their communities.
- The Smart Start Eligibility Wizard was discussed at the January

12, 2022, statewide First 5 Small Counties meeting, with several First 5 commissions reaching out to inquire about replicating it in their communities.

- First 5 Lake issued a survey to parents about their needs and interests in programming, collecting information on family habits that support school readiness and the time spent within the family unit to nurture child development. This information was gathered so that First 5 Lake programming and other community services could be designed to be responsive to the interests of parents with young children.
- The First 5 Association formed a Racial Equity, Diversity, and Inclusion Leadership Cohort, an opportunity for leaders from across the state to get together and develop the "next generation of equity-centered First 5 Leadership." The First 5 Lake Executive Director participated in this cohort.

In December 2022, the Board of Supervisors approved a proposal submitted by First 5 Lake to utilize American Rescue Plan Act funding as part of the county's Recovery and Revitalization Plan. The funds will support the development of a grants management, reporting, service coordination database, and additional home-visiting services. This will increase capacity to provide evidence-informed home-visiting to Lake County families with young children.

Lassen

During FY 2021–22, First 5 Lassen invested in the Pathways Home Visiting Program as its primary strategy for achieving its vision that "all Lassen County children will thrive in supportive, nurturing, and loving environments; enter school healthy and ready to learn; and become productive, well-adjusted members of society." As Lassen County continued to recover from the impacts of COVID-19, Pathways Home Visiting Program was able to resume in-person home visits. Virtual home visits were offered when families had concerns pertaining to COVID-19. While the impacts of COVID-19 were not as severe as the prior fiscal year, there continued to be some impact on staffing for Pathways Home Visiting Program and other county service providers. The supplies given to First 5 Lassen from First 5 California were shared among the child care providers who needed them.

The beginning of the fiscal year proved to have additional challenges on families due to the Dixie Fire. For the families that were displaced and unable to go to the emergency shelters, First 5 Lassen delivered up to 50 hot dinners in partnership with Mercy Chefs. In collaboration with the partners of Lassen Links, a resource guide was created to

help families with additional needs that were caused by the Dixie Fire that did not fall under the emergency services. To further the collaboration among local providers, First 5 Lassen continued to work on Lassen Links, the Home Visiting Coordination Funding (HVC) project funded through the First 5 California HVC grant. This collaboration was able to create lassenlinks.org, begin the process of placing the Lassen County Resource Guide on the new website, continue working on a referral and referral follow-up system, and develop plans to onboard additional local partners to create a countywide referral network.

Los Angeles

In FY 2021–22, over half of First 5 Los Angeles' (First 5 LA) 102 contracts supported organizations that carried out systems of care work in Los Angeles County (LAC). Key accomplishments include the implementation of strategies to advance equity, empower communities, and improve systems through data use.

- Equity: First 5 LA grantees supported providers to implement strategies to advance equitable access to quality care by providing trainings and facilitating discussions. One grantee trained more than 400 home visiting providers on Navigating Race, Power, and Privilege to Advance Racial Equity in Family Care Systems. Given the disparities in maternal and infant mortality rates for Black population, the Cherished Futures for Black Moms & Babies program implemented systems-level strategies, including updated hypertension management protocols to improve the safety and experience of black moms/birthing people during childbirth.
- Community Power: First 5 LA is investing in Best Start Communities (BSC) to develop and clarify community change priorities, engage in capacity strengthening activities, and provide opportunities for community members to participate in networks by engaging in advocacy, policy, systems, and environmental change. In some BSCs, Participatory Budgeting has been used as a process for community members to decide together how to allocate and prioritize public funding based on community needs.
- Data Use for Improving Systems: Select areas of LAC implemented the Early Development Index (EDI) to assess children's readiness for kindergarten. In Pomona, EDI data has been incorporated into the citywide planning process to set policy and spending on youth programming. In addition, First 5 LA commissioned a survey to better understand the impact of COVID-19 on families with

young children. Early childhood development professionals saw the findings as a useful tool in modifying programs, developing more effective strategies, and bolstering systems of support for families in the wake of the pandemic.

Madera

During FY 2021–22, First 5 Madera County invested in programs and services aligned to the 2020–24 Strategic Plan. In partnership with the Tzu Chi Mobile Vision, the First 5 Special Project team offered vision screenings to preschool children in Madera County. The program begins with an initial vision screening conducted by school nurses or the Tzu Chi Mobile Vision team. Children identified with concerns are then referred for a comprehensive eye exam to the vision mobile, in partnership with a local volunteer optometrist. Vision screenings were completed on 225 children ages 3 to 5. After completing the eye exam, 38 children needed glasses. The uniqueness of the Mobil Vision is two-fold—once the eye exam is completed, children select their frames and receive eyeglasses on the spot, within an hour. This rewarding service reflects an investment of a little over \$8,000. It is immeasurable seeing the smiles the project has brought to both the children’s and parent’s faces.

This year, the Commission had the opportunity to examine current operational and programmatic processes that safeguard the effective use of funds and resources. Staff embarked on a year-long review of these processes. This review resulted in revamping the grants management guidelines and the creation of a Funded Partner Handbook. Additionally, the Commission engaged in a strategic plan review that informed two procurements released this year. In conjunction with the work dedicated to the grants management policy and handbook, investments were made to support the implementation of two Triple P programs and a Raising a Reader project.

Marin

First 5 Marin County worked closely with the Marin Child Care Council to secure funds (\$525,000) from the American Rescue Plan Act to invest in four child care initiatives. First 5 Marin will serve as the fiscal agent for these funds, and partners will operate/execute the programming. The initiatives include:

- Help Me Grow Developmental Supports and Safety-net Navigation (existing program, see above): Support additional Help Me Grow projects including development of data-sharing agreements; journey mapping of family experience interacting with child-serving systems, and a plan to address identified system barriers; development of Help Me Grow

outreach plan; and development of Help Me Grow sustainability plan.

- Early Childhood Mental Health (existing program, see above): Continue to provide mental health supports to young children in child care settings. Serve additional children and/or child care sites. Provide parent education about early childhood mental health.
- Child Care Initiative Project (existing program): Recruit new family child care providers. Provide training and technical for family child care providers to increase capacity for child care in Marin County
- Teacher Investment Pilot (new program): Provide stipends and other resources for participating child care workers to encourage entry, promotion, and retention in the early childhood workforce.

These projects will be complemented by an investment (up to \$500,000 across two years) from the Marin Community Foundation to support long-term child care planning for Marin County.

Mariposa

During FY 2021–22, First 5 Mariposa’s most significant accomplishment was the School Readiness Program which serves two preschools (Cathays Valley and Lake Don Pedro) located in remote areas of Mariposa County. These two preschools provide an outstanding play-based program that prepares children for kindergarten. The facilities, curriculum, and activities are creative, educational, and focus on developmentally appropriate activities using Science, Engineering, Technology, and Math. This program is free of charge to children who live in Mariposa.

Another highly successful funded program was the instructional aide hired to work in the Mariposa Elementary School Transitional Kindergarten classroom. 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 children individually. The class had 25 transitional kindergarten students who ranged in ages from 4 to 5 years. Having an aide in the classroom made it possible for the students to work on enrichment projects.

Mendocino

In FY 2021–22, First 5 Mendocino County continued to build the professional skills of those who work with the county’s youngest and most vulnerable children. This was done through the local county annual State of the Child Conference (hosted by First 5 Mendocino) and a variety of Positive Parenting Program and Community Resiliency Model® trainings, all targeted to decrease the negative effects of Adverse Childhood Experiences and

to further build resiliency. January 2022 celebrated Mendocino County’s annual Positive Parenting Awareness Month with a proclamation from the County Board of Supervisors. In the effort to align with First 5 Mendocino’s new strategic plan and mission, the First 5 Mendocino logo and website was rebranded. The new mission to promote optimal health and development, narrow disparities, and improve the lives of children through education, support, and advocacy was further operationalized through the continuing efforts of the Home Visiting Consortium.

During FY 2021–22, a Family Support Home Visiting Environmental Scan was created and disseminated. The purpose of this scan was to provide a snapshot of the current conditions to examine the supports needed for improved coordination and collaboration. The Home Visiting Consortium continues to identify programmatic needs to further increase enrollment and build family resilience. First 5 Mendocino acts as the community pathway for the program and hosts the referral form used for program participation. Along with updating its strategic plan and mission, First 5 Mendocino adopted an equity statement to ensure that families, children, and communities are protected against racism, oppression, and inequality. It was identified that we must listen and learn from individuals in our community about how to better meet their needs and protect their rights. By doing this, First 5 Mendocino has increased Native American program participation from 5 to 23 percent. First 5 Mendocino is committed to quality improvement and conducting assessments to address needs in the community.

Merced

First 5 Merced implemented the second year of its 2020–25 strategic plan in FY 2021–22. The following are notable successes:

- Investing approximately \$2,740,998 million to support services for 8,375 children, caregivers, other family members, and providers to enhance the five protective factors that promote optimal development and enhance the system for effective family support.
- Funding culturally responsive programming and reached diverse children and families—including over 1,200 English and 1,300 Spanish-speaking children and families.
- Adapting approaches as the COVID-19 pandemic contributed to delays in First 5 Merced County programming. First 5 Merced moved forward with supporting the implementation of direct services and offering capacity building efforts.
- Offering capacity building for the implementation of 2-1-1. This

investment aims to boost access to referrals to services that support the physical and mental health of children and their families. 2-1-1 is operating 24 hours a day, seven days a week with all phone calls between 8 a.m.–5 p.m. answered locally.

- Launching and implementing the Dolly Parton Imagination Library book distribution program. This initiative that is meant to increase children and families' access to books to support daily reading. A total of 15,698 books have been mailed out to 1,347 children from July 1, 2021 to June 30, 2022.
- Launching of the Merced County Office of Education Empower Parents, Help Me Grow, and the Local Aces Coalition. These initiatives support key First 5 Merced County outcomes including enhancing protective factors, reducing adverse childhood experiences, and increasing the number of children enrolled in high-quality early learning settings.
- Hosting The Week of the Young Child with the support of over 40 agencies. In total there were 486 adults, 367 zero- to five-year-old children, and 238 six- to eighteen-year-old children attending the celebration. Of attendees that completed a satisfaction survey 97 percent found the event valuable.

Modoc

In FY 2021–22, First 5 Modoc County continued to focus on collaborative, systems change efforts to bring 0 to 5 program awareness and recognition to the forefront. Efforts specifically focused on bridging system gaps and implementing collaborative systems of care to promote cross-sector sustainability. Collaborative partnerships were built with 6 funded programs serving 451 children and 355 primary caregivers. Efforts included the Tulelake/Newell Family Resource Center which promoted self-sufficiency through service coordination, case management, playgroups, benefits access, and parenting classes. Modoc Harvest Sprouts campaign provided local food education and nutrition to early learning and care settings through expanded classroom and community learning and developmental activities. Modoc County 4-H Cloverbuds offered an experiential program engaging children and families in agriculture and life-skills learning. Dollywood Imagination Library provided monthly age-appropriate books at no cost to families with over 1,450 books. Budding Tree Preschool provided high-quality early education to families not eligible for subsidized programs. Early Mental Health Services provided families with intensive family support through home-based psychotherapy and increased access to therapy for families experiencing crisis.

In addition, the First 5 Modoc Early Learning & Resource HUB helped programs and families connect to systems of support through community outreach and pop-up events at libraries, farmers markets, and health fairs. The HUB helped connect 347 children and 385 caregivers to cross-sector systems, services, and resources within the Modoc region and the state. Services included early education and care connection, health services connection, parenting education, essential needs, and home visiting coordination.

Additionally, First 5 Modoc acted as the county lead and provided direct coaching support to early learning sites and classrooms using the California Center on the Social Emotional Foundations in Early Learning Teaching Pyramid framework for regional professional development.

Mono

In FY 2021–22, First 5 Mono County's two largest investment areas, Home Visiting and the Childcare Quality System, continued to partner with providers and families as an integral component of a comprehensive support system for children ages 0 to 5 in Mono County.

The Home Visiting Program: Welcome Baby and Healthy Families, a Parents as Teachers Evidence-Based Program, deepened partnerships with other family supporting agencies through the Home Visiting Coordination project funded by First 5 California. Activities strengthened relationships resulting in a significant increase in referrals from Mammoth Hospital's Women's Clinic and Northern Inyo Hospital's Labor and Delivery Department. As a result, more families were provided a strong linkage between their healthcare service provider and First 5 Mono's Home Visiting Program.

The Childcare Quality System maintained partnerships and worked towards higher levels of quality with over 70 percent of child care sites in Mono and Alpine Counties and provided over \$30,000 in stipends to 13 sites. First 5 Mono also continued investments in oral health, school readiness, and a safe kids coalition.

Monterey

Throughout FY 2021–22, First 5 Monterey County served 19,250 children, primary caregivers, and providers by directing time and resources to meet the needs of families while advocating for systems change to address long-term inequities. For many years, First 5 Monterey County has included indigenous languages of Mexico such as Triqui, Mixteco, and Zapotec on intake forms. In FY 2021–22, First 5 Monterey County served families from an even wider range of home language backgrounds through the Dual Language Learner project and through a partnership with Quality Matters. First 5 Monterey County continued to invest resources for emergency response and

collaborated with Bright Beginnings, the health department, and others to distribute needed supplies (diapers, wipes, hand sanitizer, face masks, and COVID-19 tests) to families and providers. First 5 Monterey County also continued reflective practice groups for diverse providers/educators that began during the pandemic. These groups enhanced providers sense of connection, protected individuals from secondary traumatization, and promoted program quality. Additionally, First 5 Monterey County provided reflective practice facilitation as part of the Monterey Children's Council meetings to support reflective leadership skills and to build common understandings related to mental health information. First 5 Monterey County also participated in a Building Healthy Communities Monterey County equity cohort. First 5 Monterey County's cohort focused on developing First 5 Monterey County's 2023–2029 strategic priorities. First 5 Monterey County, local community organizations, and local parent advocates participated in this year-long cohort. Parent advocates also served on an action team dedicated to gathering more input from a wider group of Monterey County parents and community members. First 5 Monterey County was also able to expand funding to support the children and families in the county. In FY 2021–22, almost 40 percent of First 5 Monterey County's revenue came from sources other than Proposition 10 funds and included collaborations with local and statewide foundations, philanthropists, and county and state entities.

Napa

In FY 2021–22, First 5 Napa County served as the lead agency for the Home Visitation Coordination grant funded by First 5 California. The grant funding supported the planning phase for organizations working toward a more coordinated and integrated early learning and care system for young children and their families. Partner agencies included Cope Family Center, UpValley Family Centers, Community Resources for Children, ParentsCAN, Child Start, MomSquad, Ole Health, Napa County Public Health, and Partnership HealthPlan of California.

The Family Support and Home Visiting Collaborative reconvened and worked to develop a common mission and vision, developed a comprehensive action plan, and participated in data collection in support of the goals of the planning phase and to prepare the collaborative for future funding opportunities. The Family Support and Home Visiting Collaborative also participated in a professional learning series, Centering Relationships & Trust through Dialog. This three-part virtual dialog series introduced the art of dialog that created an opportunity to share lived

experiences while practicing the skills of cultivating curiosity, empathetic listening, and leading with inquiry.

Through an innovative framework called Liberatory Design, the group revisited values, created new goals, and began to build infrastructure that supports ongoing dialog with stakeholders and advocating for more equitable practices in early childhood leadership. The overall goal of the series was to develop an understanding of the group's different communication styles and complex identities. With a strong connection to anti-bias practices in early learning and care, the group spent time building trust and relationships and its commitment to planning long-term solutions for the challenges they collectively prioritize. The Family Support and Home Visiting Collaborative is prepared to collaborate on future funding opportunities, including anticipated additional investments from First 5 California and local Mental Health Services Act funding.

Nevada

FY 2021–22 was an exciting year for First 5 Nevada County with the launch of a new strategic plan, new contracts, and the implementation of the Persimmony database for client-level and program reporting. The First 5 Nevada County Commission selected two new programs to fund (in addition to several previously funded). With support from the First 5 Nevada County Commission, the KidZone Museum in Truckee continued its good work with families with young children through socialization events, developmentally appropriate activities, and providing valuable local resources to families. Through the Sierra Nevada Memorial Hospital Foundation, the Read Me a Story Program partners with local pediatricians and health clinics to provide books and information to families with young children during each well-child visit. Other contractors continued the good work for which they were funded during previous cycles. Partners in the Tahoe/Truckee area increased in-person services this year, resulting in great enthusiasm from parents and children who had experienced feelings of isolation during COVID-19. These in-person offerings included resuming field trips to the KidZone museum, getting families signed up for library cards, and resuming the Family Room activities that are so beloved by the children. There are some aspects of virtual service delivery that programs have decided to maintain. The parenting workshops in the western part of our county have proven to be successful in person and virtually, and programs enjoy offering take-home activity boxes that families can check out. These boxes promote positive parenting and creative thinking. Internally, commission staff have been actively involved in the Families First Prevention Services Act

Comprehensive Prevention Planning effort. This has been a great opportunity to deepen county-wide collaborative efforts and focus on systems change efforts that will positively support Nevada County's highest-need families.

Orange

A focus area of First 5 Orange County's Strategic Plan is improving systems of care to help families get the most out of well-child visits, developmental screenings, and linkage to services.

- In FY 2021–22, First 5 Orange implemented HealthySteps at three federally qualified health centers, which integrates a child development specialist into the primary care team to promote healthy relationships, foster positive parenting, strengthen early social and emotional development, and ensure access to services that families need, with an emphasis on families in low-income communities. Currently serving nearly 4,000 children at these three federally qualified health centers, First 5 Orange is adding two more clinics serving an additional 3,000 kids in FY 2022–23.
- First 5 Orange also supported a team of Quality Improvement Advisors at Children's Health of Orange County (CHOC) Health Alliance to work with 130 practices to incorporate developmental screening with a validated tool into their workflow and to use the Orange County Children's Screening Registry. The Quality Improvement Advisors effort has resulted in a significant increase in the number of practices doing screening with validated tools, resulting in more children being screened. The percent of practices that were not screening saw a huge improvement, from nearly one out of two practices not using any validated tools to only one out of ten.
- To build a true system approach to developmental screening in Orange County, First 5 Orange worked with partners to form a cross-sector collaborative group that is championing developmental screening and interventions throughout Orange County. Detect & Connect Orange County is comprised of decision makers in organizations such as our managed care plan, Social Services Agency, Health Care Agency, CHOC Children's, American Academy of Pediatrics - Orange County, Help Me Grow, and others.
- In FY 2021–22, Detect & Connect Orange County launched a communications campaign to parents about well-child visits and developmental screens, with a focus on safety during the pandemic. The collaborative also developed

messaging and distributed outreach tools to walk-in clinics and pediatric practices.

Placer

During FY 2021–22, in response to the harmful impact of COVID-19 on children, families, and community-based agencies, First 5 Placer launched two efforts to strengthen systems.

- First 5 Placer applied for and received funding through the California Family Resource Association to support seven local agencies that provide critical services to families and providers who were adversely impacted by COVID-19 and its restrictions. This grant recognized the critical role of Family Resource Centers to address the needs of vulnerable children and families across the state, especially those most impacted by the pandemic. The COVID-19 Family Resource Center Relief Funds addressed family needs and maintained continuity of services and operations during the COVID-19 crisis.
- COVID-19 hit local community-based organizations hard; fundraising efforts were stalled and staff turnover was common. Organizations expressed a need to rethink and refresh their practices. First 5 Placer partnered with the Placer Community Foundation to contract with the Impact Foundry to offer its Certified Sustainable Program to non-profits in Placer County. Critical support agencies, including those that serve families, victims of violence, children in the welfare system, and Native Americans, were provided access to two years of training and support to help strengthen their organizational capacity. As part of the process, key components of successful non-profits were examined. This included Revenue Structure, Operational Framework, Nonprofit Brand & Community Engagement, Cultural Responsiveness, and Change Management. Over the next year, organizations will develop sustainability plans and work toward their goals.

Plumas

First 5 Plumas County works closely with county agencies and community-based partners, leveraging local resources to increase the value of its investments. Primary investments of the commission include home visiting services, behavioral health for families with young children, and support for a county-wide network of family service providers. Highlights of accomplishments that occurred in FY 2021–22 include:

- A total of 64 families were provided with home visiting services. A

total of 428 home-visiting service encounters took place of which a total of 2,797 services were provided. The top services provided to families included parent support, listening and guidance, child development activities, and parent instruction and modeling.

- Seven families received mental health services which included children prenatal through age five, parents, and caregivers, as well as other family members. A total of 100 mental health service encounters took place involving services such as play therapy, therapeutic counseling for both children and adults, and parent support and guidance, as well as couples counseling. For families in which outcomes data was available, all families experienced decreased risk in the areas of safety and risks to self and others, as well as needs and disabilities.
- The Family Strengthening Coalition made progress on several of its priorities. The Family Strengthening Coalition hosted a county-wide summit to share information about programming, established a website to serve as a central hub for family and provider information, developed an online referral mechanism to support greater access to services, created social media messaging to address issues most important to families, and identified a number of funding opportunities to fill critical service gaps.

Last, but certainly not least, First 5 Plumas invested in the development of a new database that will offer it the ability to more comprehensively understand the impact of its services on families in the future.

Riverside

First 5 Riverside County is the fastest growing county in California where all children receive high-quality early learning experiences that prepare them for school and life. Proposition 10-funded Child Care Facilities Landscape Scan Report (2021) finds that Riverside County needs to invest in constructing, expanding, and modernizing more than 2,220 child care facilities to meet the need. First 5 Riverside has historically invested in child care renovation and expansion while supporting the professional development of the early care and education workforce. Building upon Proposition 10 investments, the County Board of Supervisors allocated \$9 million of federal funds for the early care and education workforce retention and recruitment. To align with the State's work on rate reform, First 5 Riverside provided wage enhancements to over 3,100 employees working in more than 1,000 child care sites. Child care facilities

investments of Proposition 10 funds (\$5 million) and federal funds (\$5 million) will increase licensed child care facilities and spaces for infants and toddlers.

Proposition 10 investments in home visiting, behavioral health, Help Me Grow, Family Resource Centers, and HealthySteps promoted an integrated system of prevention and early intervention services in diverse settings. First 5 Riverside's HealthySteps pilot embeds specialists in pediatric primary care teams during the most critical period of brain development. Participating sites reached almost 10,000 children with 40 percent of children requiring referrals for early intervention, mental health, and other family services. First 5 Riverside's engagement with Health Management Associates supports integration of HealthySteps in health plans and supports participating agencies plan for sustainability, thereby influencing strategic positioning of healthcare to maximize return on investments and leverage funds. Riverside County envisions a system that leverages investments to provide families with multiple entry points to care, and equitable access to quality child care.

Sacramento

In FY 2021–22, First 5 Sacramento County funded a Racial Equity Snapshot to support a cross-systems approach to addressing and decreasing racial disparities in Sacramento County by synthesizing key findings from several community organizations working to increase racial equity. To improve these systems, it is imperative to review data on where disproportionate outcomes occur and to identify promising practices which appear to be dismantling barriers. This Snapshot aligned with the Sacramento County Board of Supervisors' goal of dismantling racism and their resolution that racism is a public health crisis; provided a template to highlight promising practices, common obstacles, and strategies to evaluate their progress towards racial equity; and empowered and further built the capacity of the County's child and family initiatives.

The Snapshot includes a "roadmap to racial equity" based on the summary of program accomplishments, future goals and plans, and lessons learned. The recommendations include:

- Community voice in program planning and development and decision-making processes
- Implement culturally responsive programming that is customized to specific client needs
- Monitor population-level data on race and ethnicity to guide current and future needs and to compare to agency/organization-specific outcome data
- Share data about what works in a way that is accessible to a wide range

of stakeholders and community members

- Form multi-sector collaboratives with experts from different systems to create long-lasting systems change
- Utilize the knowledge and experience gleaned from other initiatives, including promising practices, common challenges, and lessons learned
- Establish relationships with policymakers and/or advocates to share organization-level outcomes and "scale up" successful pilots to systemic policy

These recommendations provided actionable insights, which, combined with targeted resources and a shared vision, begin to impact meaningful and long-lasting systems change.

San Benito

In FY 2021–22, First 5 San Benito County and the Family Impact Center continued to provide services and supports to children, families, and providers that addressed the ongoing effects of the coronavirus. For example, through a partnership with nearly 40 other agencies, families and child care providers received weekly deliveries of food and essential items, such as cleaning supplies, diapers, and formula. Families receiving these emergency supplies were also referred to case management or home visiting services if they needed additional support. According to pre-post surveys, families who chose to participate in the case management and home visiting programs demonstrated significant improvement in family functioning, knowledge of parenting and child development, positive parenting practices, feelings of social support, access to concrete supports, and the parent-child relationship. Children in the program also demonstrated improved resilience, as measured by their ability to stay calm and in control when faced with a challenge.

In addition to direct services, First 5 San Benito sponsored and facilitated a multisector collaborative of local leaders. The objectives of the collaborative included improving the capacity of local agencies to understand the impact of Adverse Childhood Experiences on families, and to provide culturally sensitive, trauma-informed care; address complex problems by breaking down silos and promoting communication, collaboration, and alignment within and across service sectors; and provide multiple entry points to the service system with warm handoffs and a collaborative treatment approach to address fragmentation.

The collaborative supported the implementation of the Apricot 360 database to enable a systemwide effective way to track and collect participation, outcome, and referral data. Staff members received training and ongoing support on how to use the system and were able to

effectively utilize the database to record their constituents' participation and progress.

San Bernardino

With the COVID-19 vaccine becoming readily available, families are steadily venturing into the community and seeking resource support. First 5 San Bernardino resumed in-person community events.

During FY 2021–22, the Community Engagement team participated in 39 events throughout the County of San Bernardino. The regular community events were set up with friendly play zones for children ages 0 to 5, providing school supplies, safety kits, Potter the Otter books, and other resources to over 16,000 families, and promoting healthy development and quality early learning.

The Family Community Support Partnership-Expansion, which includes six agencies under the intensive family support initiative to reduce child abuse rates in San Bernardino County implementing Nurturing Family Parenting curriculum in conjunction with structural case management of Family Development Matric, have formed a collaborative – Family and Community of Inland Empire. Over the past three years, the Family and Community of Inland Empire's goal of sustainability and scale worked collectively, applied for funding through outside sources, and received over \$1.3 million to enhance Family Community Support Partnership-Expansion work of reducing child abuse in San Bernardino County.

San Diego

After a challenging year and a half of shut down and consequent shift to virtual or hybrid services because of the COVID-19 pandemic, many First 5 San Diego providers returned to offering in-person services during FY 2021–22. The evaluation of First 5 San Diego programs adapted during the height of COVID-19 to document and understand the challenges providers and families were facing in giving and receiving services virtually, while navigating unprecedented day-to-day life challenges.

During FY 2021–22, amidst ongoing COVID-19 challenges and record high inflation, First 5 San Diego providers also contended with stagnant funding levels, increased costs to serve the same children, and staffing and workforce retention issues across many funded providers.

During FY 2021–22, in an effort to reach the broadest segment of the San Diego County population, First 5 San Diego participated in three joint media campaigns with the County of San Diego Public Health Department. These campaigns included:

- *Talk. Read. Sing.*[®], which promoted early childhood literacy and encouraged parents and caregivers

to talk, read, sing, and be active with their children. This campaign achieved more than 77 million gross impressions.

- San Diego Swim Safer campaign, which promoted public education geared toward increasing knowledge of the dangers of unsafe swimming, drowning prevention methods, and where to access swimming lessons. The campaign achieved more than 31 million gross impressions.
- Hooray! for Reading campaign, which promoted early childhood literacy and resiliency, and encouraged parents to make reading a part of their daily routine. This campaign achieved 28 million gross impressions.

San Francisco

For over two decades, First 5 San Francisco County has invested in the county's youngest children, their families, and the providers who work on their behalf with a mission that all children will thrive and start school ready to learn.

Investments in the Quality Connections Quality Rating and Improvement System serve approximately 6,000 children in more than 400 participating early care and education sites. Centers and families experienced acute disruptions in their ability to provide and utilize care as a result of the COVID-19 pandemic.

San Francisco was able to add \$10 million in child care funding, equating to approximately 700 enrollment slots, to help decrease the cost of care for families returning to the workforce and address the city's significant capacity constraints in the face of social distancing requirements. Financial and operating supports were also provided to early care and education sites so that they could remain open in the face of fluctuating and unpredictable enrollment numbers.

The Family Resource Center Initiative pivoted all services to remote and virtual modalities, and throughout the year they continued to provide a multitude of opportunities for social connection and vital basic needs assistance by distributing food, diapers, and household supplies. Prevention and intervention services such as parent education, parent/child playgroups, and case management reached approximately 7,500 children and parents; thousands more families received basic needs assistance. San Francisco's Help Me Grow initiative and partners were able to resume developmental screening supports, resulting in over 3,000 children receiving a developmental screen in their child care setting, pediatric office, or family resource center. On-site inclusion supports and care coordination were provided to 248 children who had some level of risk identified as a result of their screening.

San Joaquin

First 5 San Joaquin County responded to the needs of the pandemic by expanding home visitation and other support services. With increases in multigenerational households, First 5 San Joaquin recognized grandparents offered child care to many families.

In FY 2021–22, the IMPACT Family, Friend, and Neighbor initiative trained 242 grandparent Family, Friend, and Neighbors who cared for 295 children (62 percent toddlers/infants). Roughly 60 percent of Family, Friend, and Neighbors spoke a language other than English. Family, Friend, and Neighbors reported increased knowledge and engagement with their grandchild—87 percent had a deeper understanding of child development, and 84 percent were more knowledgeable of support services. Additionally, First 5 San Joaquin started the FamilyWORKs home visitation program in 2019 and initiated the JourneyWORKs substance abuse prevention program and HousingWORKs housing support program in 2020.

WORKs programs target different facets of a family's life—parenting/child development, employment, substance use, mental/behavioral health, housing—to help CalWORKs parents achieve self-sufficiency. From 2019–21, 781 families participated in a WORKs program. FamilyWORKs participants demonstrated gains in job search and readiness skills—98 percent felt more confident in knowledge about their child's development and more connected to support services, and 90 percent felt less stressed. Of the 213 families who participated in HousingWORKs between January 2020 and December 2021, 39 percent found housing, and 80 families received support services. Ninety-one families participated in more than one WORKs program. Families participating in more than one program were more likely to be housed. Another area of concern impacted by the pandemic was access to dental care. San Joaquin TEETH played a critical role in care coordination, helping families find a dentist to meet children's needs.

In FY 2021–22, 480 children received dental services or oral health care coordination. First 5 San Joaquin also leveraged resources with Public Health Services Oral Health Program to expand social media campaigns and develop educational materials, including oral health provider kits.

San Luis Obispo

In a continued effort to alleviate child care challenges on the Central Coast, First 5 San Luis Obispo County partnered with community stakeholders on a collaborative study to examine options for local government to be an actor in building quality child care capacity in San Luis

Obispo County. As a result of advocacy work through the "We are the Care Initiative," more than \$3 million in American Rescue Plan Act dollars were allocated to child care providers/business owners, child care support to families, and/or the overall child care system in San Luis Obispo County.

In partnership with the County of San Luis Obispo and the San Luis Obispo Chamber of Commerce, First 5 San Luis Obispo County established a Family-Friendly Workplaces Program to help businesses hire and retain employees, support working parents, and bolster the economic vitality of the local communities. First 5 San Luis Obispo amplified this piece of the child care puzzle by way of its monthly "Hands-on Hero @Work" award honoring family-friendly employers, highlighting their positive practices and policies, and encouraging other private and public sector organizations to follow suit.

On the pandemic recovery front, First 5 San Luis Obispo funded two Basic Needs Direct Support initiatives through local nonprofits – Community Action Partnership of San Luis Obispo County and the Link Family Resource Center, who collectively helped ease the burden of nearly 400 already-struggling families who faced extreme inflation with gas, food, and rent. Similarly, the Mental Health Services Act-funded 3 by 3 Developmental Screening Partnership supported two local pediatric practices in their work to increase developmental screening and referral rates, and to build increased family/provider awareness of social-emotional needs in young children, many of whom are experiencing higher levels of distress due to COVID-19 impacts. The project also sparked more conversations with pediatricians and families about the family mental health in the context of early childhood, and the importance of building cohesive early intervention support systems.

San Mateo

During FY 2021–22, First 5 San Mateo County maintained its multi-faceted investments in programs supporting all aspects of a child's early years, including Quality Early Learning; Healthy Development; Resilient Families; and Policy, Advocacy, and Communications. Supported by \$4.6 million in community investments, funded partners served over 10,750 children, parents, and providers. Highlights include:

Securing \$4.1 million in American Rescue Plan Act funding for grants to support child care programs, and \$2.5 million for Out-of-School care. These grants were approved by the Board of Supervisors to shore up the early learning sector as COVID-19-related challenges continue to impact staff and families.

Recruiting three critical County agencies—Child Welfare Services, the San

Mateo County Office of Education, and Behavioral Health and Recovery Services—to participate in the second wave of First 5 San Mateo's Trauma and Resiliency Informed Systems Initiative involving a Trauma-Informed Organizational Practices Assessment, organizational coaching, and cross-agency training cohorts. Collectively, these agencies employ approximately 1,000 staff and serve many of San Mateo's most vulnerable families with young children.

Completing the Home Visiting Landscape Scan and Needs Assessment, generating information about the myriad programs offering home visiting services in San Mateo County, their eligibility requirements, populations of focus, service models, and opportunities for increased collaboration and coordination to enhance these services.

Initiating an evaluation of the Family Engagement Systems Building efforts, which includes a survey of Family and Community Engagement practitioners, focus groups with thought leaders and practitioners to further develop insights into the strengths of this sector and opportunities for growth, and a network analysis to build understanding of the relationships between the varied organizations doing this work.

Santa Barbara

In FY 2021–22, First 5 Santa Barbara County invested \$3,808,206 in programs and services for 8,072 children, 884 primary caregivers/family members, and 1,479 providers/professionals. Investment strategies included Early Learning Initiatives to local school districts, Family Literacy and Book programs, the Dual Language Learner Pilot Study, family support programs, communications and policy development, as well as systems change, innovation, and capacity-building grants. Two of the most notable achievements this year were:

Early Learning Initiatives: First 5 Santa Barbara and its University of California, Santa Barbara Evaluation Team worked with nine local school districts on the development and/or implementation of their Early Learning Initiatives that aim to improve continuity between the early care and education and K–12 systems and reduce income-based opportunity gaps among young, at-risk children. The goal of all Early Learning Initiatives is to expand efforts to improve children's social-emotional and cognitive development and thus promote kindergarten readiness and early elementary school success. School districts participating in this project administered the Kindergarten Student Entrance Profile to incoming kindergarten students and results from the FY 2021–22 school year showed that 25 percent of students screened in the county were "Ready to Go" for school.

Help Me Grow Santa Barbara County: In July 2021, a four-year development plan for implementation of the National Help Me Grow model began in Santa Barbara County under the direction of Alpha Resource Center. Through Help Me Grow Santa Barbara County, children will benefit from an organized system of community resources to help them thrive, including early screenings to ensure early identification of developmental challenges, parent education and support, quality learning experiences and systems navigation. Families and providers will receive follow-up to ensure families access resources and support when and where they need it. The first pilot will begin in early 2023 in the Guadalupe community, followed by implementation in Lompoc.

Santa Clara

In March 2020, First 5 Santa Clara County launched a COVID-19 Relief effort leveraging existing funds and systems to support communities using their network of partners. First 5 Santa Clara has leveraged \$11,845,786 for COVID-19 relief efforts. The Family Strengthening and Support Initiative tracked their safety net support efforts using the Needs Tracker (<https://first5kids.org/safety-net-supports/>) across family resource centers. Over 16,200 total needs were recorded since March 2020 with the top needs mentioned by families being food (4,654), followed by diapers (3,438), activities for children (2,825), and toiletries (2,370).

First 5 Santa Clara organized curbside distributions at over 24 community sites where families could pick up food, calming kits, resource guides (provided in English, Spanish, and Vietnamese), diapers, formula, and personal protective equipment. A total of 4,656,960 diapers and 35,232 formula cans were distributed to families. Financial, housing, and child care were also commonly described needs.

To support the stabilization of child care for the community, the Early Learning Initiative launched the Family Child Care Stabilization program which awarded more than \$5.2 million to 528 Family Child Care Home projects. In addition, using these funds, full year scholarships were awarded to 40 families who were residing in the City of San Jose, and 17 subsidized classrooms expanded their care ultimately serving over 200 families. The Health and Wellness Initiative oversaw and distributed 659 calming kits to parents and providers to promote coping and calming. In addition, 21,497 personal protective equipment was provided, and 51,229 period products were distributed to families.

In conclusion, First 5 Santa Clara was able to respond quickly to support the needs of the children, families, and communities they serve and leveraged funds in order to provide a wide net of support. Findings of these efforts were

presented at the Santa Clara County Children's Summit as well as the 2021 American Public Health Association Conference.

Santa Cruz

The Baby Gateway Newborn Enrollment Program supports mothers and their newborns at all three Santa Cruz County hospitals by providing Medi-Cal enrollment assistance, linking newborns to a medical home, and offering First 5 California's *Kit for New Parents*, all during a visit from a Newborn Enrollment Coordinator before leaving the hospital. The program also expanded partnerships with key agencies to offer additional supports to families.

Connection to medical care: In FY 2021–22, 98 percent of all mothers had a newborn visit, and 97 percent received a *Kit for New Parents*. Of all mothers with Medi-Cal births, 98 percent were assisted with completing an application for their new baby, and 99 percent chose a primary care provider for their child.

County programs: First 5 continued assisting with two county programs, which the Newborn Enrollment Coordinators incorporated into their visits: the state-wide Student Identification number created for newborns by the County Office of Education, used to support the social, emotional, and academic development of children from birth through 12th grade; and Ventures' Semillitas savings account program for newborns, with incentives throughout childhood to save money to be used for college or vocational education after high school.

Access to food: The COVID-19 pandemic has many families in the community struggling with access to food. The Newborn Enrollment Coordinators provided families with resources to apply for the CalFresh and Women, Infants, and Children programs.

Lowered emergency department use: This program may have an effect on the use of the emergency department for very young infants, and particularly those covered by Medi-Cal. Since the launch of this program at Watsonville Community Hospital, the number of infants on Medi-Cal who visited the emergency department dropped 69 percent by 2021.

Summary: Through these efforts, the program is helping increase access to affordable quality health care for newborns and improve overall maternal, child, and infant health.

Shasta

First 5 Shasta County worked with partner organizations in the Network of Care around Adverse Childhood Experiences (ACEs) education, screening, and intervention.

Completed ACEs Aware Planning grant and expanded Pediatric ACEs and Related

Life-events Screener to over 300 parents and families.

Expanded ACEs screening to additional departments in Shasta Community Health Center and increased the number of referrals to support services to mitigate the effects of toxic stress.

Leveraged and expanded existing infrastructure within the Network of Care to serve more members of the community.

Families can work with a highly trained Parent Partner and engage in programs like Parent Cafes where they receive parenting education and are supported in building social connections with other families, which is critical to building resilience. Additionally, First 5 Shasta was able to identify children with developmental delays because they were referred to a Parent Partner and given the Ages & Stages Questionnaires®, Third Edition and/or Ages & Stages Questionnaires®: Social-Emotional through Help Me Grow Shasta. Help Me Grow Shasta completed 556 developmental screenings for children ages 0 to 5 and provided referrals and case coordination services to over 1,800 children and families. To date, Help Me Grow Shasta has served more than 2,800 children ages 0 to 8 and their families. The Help Me Grow collaborative organized and presented the Champions for Children event, reaching more than 1,000 parents/caregivers and children ages 0 to 8.

First 5 Institute presents the highest quality trainings and resources to providers of services to children ages 0 to 5 and their families. First 5 Institute also provides access to high-quality early literacy programs and material by funding community "Storytimes," which provide young children and their families access to high-quality early literacy material and an opportunity for social connections. First 5 Institute funded four Storytime sites which directly served 771 children ages 0 to 5. First 5 Institute presented six trainings, including a well-attended Implicit Bias training, and 12 Smart Starts & Smart Lunches.

Sierra

In 2021–22, the First 5 Sierra professional development program was a great success. There was 100 percent participation where all of Sierra county's early childhood educators took part in a minimum of 21 hours of continuing education and early childhood education courses, including Trauma Informed Care training. Participants reported improved professional skills, tools, and motivation which has positively impacted the quality of Sierra County's early education system. Because of the uniquely small population in Sierra County, there is no federally funded Head Start program or state-funded preschool. That is why the First 5 Sierra preschool tuition subsidy program continues to be the most successful

achievement. This program supports working families, most of whom would not be able to send their children to preschool without tuition assistance. Investing in a program where all children living in rural communities can attend preschool ensures that Sierra County children will start school with the best preparation and with the least disparity.

First 5 Sierra provided backpacks, schools supplies, and bilingual (Spanish/English) materials to all children in preschool and those entering Transitional Kindergarten or Kindergarten, which was highly appreciated by schools, parents, and children. The crisis brought by the pandemic affected the normal functioning of all caregivers and child care providers. First 5 Sierra was the first public agency in Sierra County that distributed COVID-19 rapid test to families when it was needed the most. Child care providers received additional funding to cover closures and lost wages for COVID-19 relief. As a result, all child care providers remained open for business. These efforts addressed the highest need of Sierra County's 0- to 5-year-old children and their families, which is accessible, consistent, high-quality child care/preschool.

Siskiyou

First 5 Siskiyou County is the fifth largest county in California, geographically. Families from remote areas have had limited internet access, and making trips out to town to access services on narrow roads can be daunting for those without reliable transportation, especially in the snowy and icy conditions of winter.

To bring services to families, First 5 Siskiyou adopted Ready4K, an evidence-based, trauma-informed parenting education program. This text-based program seeks to reduce disparities by promoting access to parenting information and connecting parents to local resources in their part of the county. The co-funded Mental Health Services Act Ready4K launch was a true cross-systems collaboration, with family resource centers, schools, libraries, health care providers, and county agencies helping promote enrollment, and create resource updates for families.

In FY 2021–22, Ready4K reached 458 parents representing 378 children ages 0 to 5. Families living in 19 ZIP Codes, including sparsely populated areas of Forks of Salmon, Somes Bar, and Scott Bar, received 29,719 texts with community resources. Families have given overwhelming positive feedback, with 90 percent of families surveyed (n=82) reporting they felt more connected to their communities and are grateful to be linked to concrete supports, such as food and emergency supplies. Ready4K has also met a community need for parenting resources. Families of children ages 4

and 5 (58 percent) and ages 2 and 3 (38 percent) received 22,503 Ready4K texts with parenting tips and activities. Over 90 percent of parents said they better understood their child's emotions and behavior, and 86 percent felt better equipped to help their children learn coping skills.

First 5 Siskiyou's Ready4K program braided with local family resource centers is based on principles of equity and systems change and bridging connections with extremely remote communities. In counties such as Siskiyou, with weaker technological and physical infrastructure, Ready4K has proven to be a success in helping reduce isolation and enhance parents' protective factors.

Solano

The new Fairfield First 5 Center, in partnership with the City of Fairfield and First 5 Solano County, is launching a second First 5 Center which is slated to open in July 2024. Based on the success of the Vallejo First 5 Center, Assemblymember Jim Frazier successfully advocated for \$2 million from FY 2021–22 California State Budget to support this project for First 5 Solano.

In May 2022, the City of Fairfield entered a Memorandum of Understanding with the First 5 Solano Children and Families Commission for the establishment of a Fairfield First 5 Center at the new Fairfield North Texas Recreation Facility. This facility is located adjacent to the census tracts in the City of Fairfield with the highest levels of child poverty. The facility will include a full-service park, sports fields, open spaces, and an inclusive playground for the community. First 5 Solano provided the \$2 million dollar allotment that was received from the state budget to go towards this building project. These funds will offset the costs of building a new community center which will be provided for use by First 5 Solano as the Fairfield First 5 Center. First 5 Solano will lease the property for no greater than the cost of operating the building (e.g. utilities, maintenance, etc.).

Sonoma

FY 2021–22 included many great achievements for First 5 Sonoma County. The year started with the new strategic plan implementation period 2021–2025 and was filled with transitions and strong systems building efforts. Some funded programs were new and just beginning implementation, while other programs held a long-standing history in the community. A few notable highlights include hosting the Positive Parenting Program trainings in Spanish for the first time, convening a successful culturally responsive advisory group for the curriculum development of New Parent TLC (Talk, Link, Confirm), and significant planning in the Home Visiting Coordination grant from First 5 California.

Staff and partners initiated over 355 Child College Savings Accounts before the fiscal year ended. The team and funded partners supported extensive professional development opportunities for local child care providers, specifically in the area of dual language learner support, trauma informed care, and equity and inclusion. *Teachers Acquiring Language Learner Knowledge* project scaled its efforts to provide professional development in supporting dual language learners by working with their first cohort of ten coaches across six local agencies. The Dual Language pilot project was successfully completed. The project contained systems-level strategies, including a communications campaign and strategies to support early learning providers as well as professional development and coaching on evidence-informed strategies and the home language interview, and strategies to support families, including book campaigns, books at well-child visits, and the implementation of the Abriendo Puertas Program.

Partners navigated through the ongoing pandemic and worked to continue to offer high-quality impactful professional development opportunities. A total of 59 professional development opportunities were offered to 331 participants, totaling over 2,000 hours of professional development. Through the year, the majority of First 5 Sonoma partners were able to return to in-person services and meet the needs of the community.

Stanislaus

It is the mission of First 5 Stanislaus to be a catalyst to help give children and families the best start. This commitment remained ever important when met with the lingering impacts of the COVID-19 pandemic during this past year.

First 5 Stanislaus partner organizations reach thousands of the most vulnerable members of the community each year. In FY 2021–22, First 5 Stanislaus continued to work with its funded partners to ensure services would be delivered to the community in safe ways that allowed children and families to remain connected to their support systems and basic needs when they were most needed. Partners continued to offer services by phone, virtually, drive-through formats, and in-person when safe.

Through its partnership with a network of 12 local family resource centers, First 5 Stanislaus invested \$120,000 of emergency funding into the local community for basic human needs and support in response to the COVID-19 pandemic. Over 4,100 individuals impacted by the pandemic received assistance such as housing and utility payment relief, grocery assistance, cleaning supplies, or other basic needs. Even in the face of the persisting COVID-19 pandemic restrictions and resulting challenges, First 5 Stanislaus funded

partners were able to make a significant impact with the children and families they served. The parents of 6,846 children received family support services through countywide family resource centers or other programs. The caregivers of 1,051 children attended parenting classes and increased their parenting skills and knowledge. Seventy-seven percent of families of children ages 0 to 5 (1,155/1,507) increased the time spent reading with their children at home after receiving literacy services. Over 1,500 children ages 0 to 5 who received literacy services received a book to build upon the skills they and their families learned.

Sutter

Sutter County Children & Families Commission received Adverse Childhood Experiences (ACEs) Aware planning grant in 2020, used to build and strengthen a Network of Care to counter the effects of toxic stress on families and children. Following a needs assessments conducted in the prior year, the remaining funds were used to build a local FindHelp online platform to support countywide awareness to available resources and bidirectional hub for referrals to services. To continue the achievements gained in the prior year, First 5 Sutter also added ACEs screenings to events and initiated a community crisis response program—"Handle with Care." To increase ACEs education/resources, Peach Tree Health and Feather River Tribal Health facilitated access to provider training and trauma-informed care materials. An ACEs screening booth was added to Help Me Grow events. Families now complete ACEs and Pediatric ACEs and Related Life-events Screener (PEARLs) assessments and receive referrals online via a Peach Tree Health secure dashboard for therapists and clients.

First 5 Sutter also partnered with law enforcement, educators, and mental health providers to lay the groundwork for the trauma-informed community crisis response initiative, "Handle with Care." The program supports children exposed to traumatic events requiring police involvement. It aims to ensure cross-context continuity of care through real-time, police-school communication and staff training.

In sum, First 5 Sutter partnerships made substantial contributions toward community resilience, investing in systems of care for families and children.

Tehama

First 5 Tehama continued to expand services focusing on trauma-informed care, increasing resilience through protective factors, and early literacy. The most notable and impactful theme was connection. System wide efforts resulted in two new program pilots: early in the strategic planning process, a barrier in accessing parenting courses timely

and efficiently for families was noted; in response, First 5 Tehama secured external funding to launch Positive Parenting Program, an eight-week evidence-based parenting course. Historically, community members have reported "this is too expensive for us" or "Positive Parenting Program isn't made for small rural counties." Dismantling this narrative, First 5 Tehama successfully supported five Positive Parenting Program trainers (three bi-cultural, bilingual).

Tehama funds the School Readiness Home Visitation and Help Me Grow program to ensure that there is no barrier for entry point for any child. Notably, families have improved both family functioning and child health, and increased social connections.

Regarding medical health, 98 percent of children participating in home visiting had medical services. To better understand the impact, the Parenting Interactions with Children Checklist of Observations Linked to Outcomes was adopted showing the positive impact on families. The difference between the pre- and post-tests were statistically significant for all domains, including Teaching, Responsiveness, Encouragement, Affection.

Through a partnership with the local department of education and cradle-to-career collaborative, First 5 Tehama facilitated eight Health and Wellness webinar series, attended by 183 community educators learning about timely topics, such as resilience, equity, social emotional wellbeing, and flow. Two of these eight webinars were offered in Spanish and focused on mind and body strategies for resilience. One participant shared, "As a home visitor, I have been to many amazing trainings, and this was the first time it felt like it was just for me. I almost cried when I realized it was in Spanish."

Trinity

The First 5 Trinity County Children and Families Commission invests in a variety of services aimed at supporting children prenatal through age five and their families. Primary investments include School Readiness Playgroups. The Trinity County Office of Education provides pre-Kindergarten programs at various locations throughout the county. The pre-Kindergarten school readiness program offers structured playgroups using a nationally recognized curriculum aimed at preparing children for the academic, social, and emotional rigors of kindergarten. The school readiness program also provides health-related supports to ensure that children are healthy upon kindergarten entry. Lastly, the program offers parenting and family literacy activities to support parents and caregivers as their child's first teacher.

Tulare

First 5 Tulare County's vision is that all Tulare County children will thrive in supportive, safe, loving homes and neighborhoods and will enter school healthy and ready to learn. In FY 2021–22, all funded programs served 23,954 parents and children. A highlight for First 5 Tulare was the Goshen Family Resource Center. Needs continue to grow in Tulare County. This year, First 5 Tulare was fortunate to add another family resource center in the community of Goshen via its partnership with Family Services of Tulare County. The community of Goshen is a hard-to-reach area due to proximity and lack of services. The Goshen Family Resource Center aims to help families build on their strengths and capacities, serve as a hub for the community, and offer help without stigma. The Goshen Family Resource Center has been successful in securing grant funding for diapers for families, and this has served as an anchor to enhance services they offer to their community. The diapers were also utilized to hold diaper drives for families and thus securing a robust engagement. First 5 Tulare County funds were utilized to expand services, and the Goshen Family Resource Center is now flourishing with partners ready to serve the community.

In FY 2021–22, the Goshen Family Resource Center served 98 families with case management services, exceeding their target goal for their first year of programming. In addition, they linked 587 families to food services, 43 to dental services, and 55 to medical services; and 43 families were screened using the Adverse Childhood Experiences screening. The Goshen Family Resource Center is now a staple in the community, and their energy for engaging families is contagious.

Tuolumne

First 5 Tuolumne County provides leadership and support for programs to achieve the vision that all children are healthy and ready to learn.

First 5 Tuolumne invested \$729,998 in the FY 2021–22, providing services to roughly 1,800 young children, parents, and providers. Although First 5 Tuolumne faced significant challenges due to COVID-19, programs and staff adapted and found creative and innovative ways to stay connected to local families, many of which have permanently improved the systems of delivery. First 5 Tuolumne's main focus areas are:

Improved Family Functioning: Staff at First 5 Tuolumne Family Learning Center responded to the needs of families by delivering a total of 106 cases of diapers and 33 cases of wipes to families in need.

Improved Child Health: First 5 Tuolumne's Smile Keepers Oral Health program provided oral health screening and education to 252 children and 353 parents. This year, First 5 Tuolumne offered the Ages & Stages Questionnaires® online

and made it available across the county.

Child Development: Tuolumne County invested \$258,000 to improve the quality of early care and education providers and sites. This was done by investing in professional development stipends for providers who participate in continuing education and/or coaching.

Improved Systems of Care: First 5 Tuolumne is excited to have built the foundation for starting Help Me Grow in Tuolumne. That program began in fall 2022.

This was the fourth year First 5 Tuolumne invested in the Imagination Library, and there are 700 children currently enrolled. Since 90 percent of a child's brain develops before the age of five, it is vital to invest in families and encourage them to talk, read, and sing to their children every day. We are confident the Imagination Library will help.

Ventura

First 5 Ventura County's FY 2021–22 investments continued to be directed towards designated direct services and systems integration, advocacy, and building organizational capacity in order to strengthen the overall early childhood system of care. The investments in direct services include the continuation of the Neighborhoods for Learning initiative and programs that provide linkage to resources and early intervention countywide. In FY 2021–22, the First 5 Ventura commission began in-house implementation of the Neighborhoods for Learning, rather than contracting out the services. The Neighborhoods for Learning is a place-based service model whereby service sites are located in high-need neighborhoods so that families can access services more easily. Services include:

Parent and Child Together programs, primarily for families with children ages prenatal to three.

Family support services targeting the broader group of ages prenatal to five. First 5 Ventura launched a Shared Services Alliance two-year pilot to strengthen the fragile business model of family child care providers through access to an online child care business management system "Wonderschool," enhanced business advisement, and technology stipends.

First 5 Ventura actively partnered with the Ventura County Human Services Agency, Children and Family Services on the development of the Ventura County Prevention Plan and, as a result, the Neighborhoods for Learning initiative has been identified as a building block for creating a countywide wellness system for children and their families. First 5 Ventura continued to refine the in-house implementation of Help Me Grow and launched a new www.HelpMeGrow.org website, making it easier to navigate, allowing parents, providers, and the community to access relevant information, including online developmental screenings.

Significant strides were also made with the Commission's parent engagement strategy, which is built upon a national model, in collaboration with the Center for the Study of Social Policy's Early Childhood Learning and Innovation Network for Communities.

Yolo

In FY 2021–22, First 5 Yolo expanded its focus on prevention and more complex systems transformation to address COVID-19 impacts. Achievements included improving maternal and child health, helping families avoid the need to enter Child Welfare Services, building family resiliency, screening and support for early childhood mental health, stabilizing underserved child care providers, and continuing public health support with vaccine education and clinics, and concrete supports to families and providers.

Together with direct service providers and funding partnerships, First 5 Yolo expanded its largest systems initiative. The CHILD Project: Road to Resilience focused on high-risk perinatal families and inclusive of behavioral health and parenting supports. Road to Resilience fuses medical and social services with in-clinic/in-home navigation and, at a time when local and statewide data indicated significant pandemic-related backslides in maternal and child health, supported critical health markers (child immunizations, pre/postnatal and well child visits) at rates greater than 30 percent higher than those not served by the program.

Building on the infrastructure of Road to Resilience, First 5 Yolo received American Rescue Plan funding to add

Welcome Baby, an effort opening access to postpartum nurse and Community Health Worker visits to all MediCal families and expanding intensive Road to Resilience home visiting. Welcome Baby launched in March 2021 and quickly reached an 85 percent enrollment rate, with families themselves identifying services as needed and wanted. Welcome Baby is planned for three years of American Rescue Plan funding, while First 5 Yolo seeks sustainability with new Community Health Worker MediCal benefits and CalWORKS Home Visiting, among other sources. Welcome Baby and Road to Resilience connects all families to First 5 Yolo's Help Me Grow program, a key component of Adverse Childhood Experiences Aware work in Yolo County. In FY 2022–23, First 5 Yolo will implement a Childcare Recovery Package with American Rescue Plan funding, leveraged with First 5 Yolo's Improve and Maximize Programs so All Children Thrive work to provide infrastructure and support grants to child care providers.

Yuba

In FY 2021–22, First 5 Yuba County invested in local family serving agencies to strategically build agency capacity and grow infrastructures to create a more sustainable workforce. Braiding resources, First 5 Yuba spearheaded several professional growth opportunities that center learning, engagement, staff wellness, equity, and a trauma-informed approach. Key to this work was ensuring participants benefiting from these opportunities were those directly

working with families (i.e., home visitors, child care providers, early educators, and counselors). In depth learning experiences were provided both in person and virtually and included professional learning communities, workshops, group coaching, and conference sessions.

Learning communities provided brief education for front-line staff on a variety of topics, including motivational interviewing, home visiting safety, self-care, and substance abuse, in addition to a space for connection and comradery among other professionals. Coaching sessions provided more detailed practices centered on child development, wellness, and trauma-centered approaches. Full day, in-person conferences brought subject matter experts from across the nation to discuss neuroscience and human development. Cross-sector partners (i.e., social services, home visitors, education, probation, and behavioral health) were brought together and engaged to better understand neuro plasticity, co-regulation, and specific tools to support families and rewire their nervous system for safety and connection. Testimonials from participants, leaders, and staff confirmed that these capacity-building opportunities were highly valued, effective, and essential to growing the next generation of early educators and those serving families with young children. First 5 Yuba is devoted to ongoing investments in the wellness and professional advancement of staff to continue growing and retaining a productive and diverse workforce and build sustainable systems that ensure young children thrive.



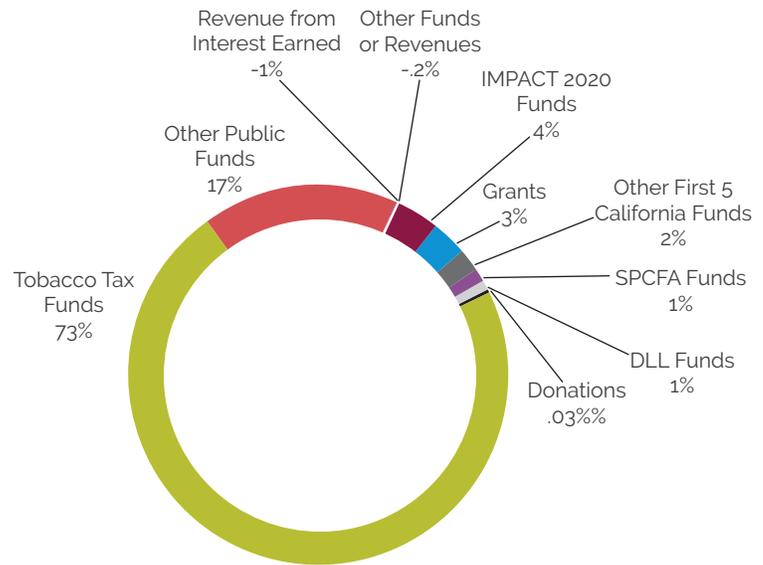
APPENDIX A: NUMBER OF SERVICES AND EXPENDITURES BY RESULT AREA AND SERVICE TYPE, FY 2021–22

IMPROVED FAMILY FUNCTIONING										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Family Literacy and Book Programs	164,545	246,375	1,194	247,569	412,114	49%	29%	\$4,122,638	4%	1%
General Family Support	109,759	248,402	39,140	287,542	397,301	47%	28%	\$64,810,161	68%	18%
Intensive Family Support	11,202	14,916	1,956	16,872	28,074	3%	2%	\$26,366,654	28%	7%
Total Improved Family Functioning	285,506	509,693	42,290	551,983	837,489	100%	60%	\$95,299,453	100%	26%
IMPROVED CHILD DEVELOPMENT										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Early Learning Program Direct Costs	26,084	4,461	3,704	8,165	34,249	20%	2%	\$17,028,637	23%	5%
Quality Early Learning Supports	73,890	21,235	46,019	67,254	141,144	80%	10%	\$56,688,100	77%	15%
Total Improved Child Development	99,974	25,696	49,723	75,419	175,393	100%	13%	\$73,716,737	100%	20%
IMPROVED CHILD HEALTH										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Early Intervention	104,404	37,761	7,318	45,079	149,483	39%	11%	\$30,603,221	28%	8%
General Health Education and Promotion	19,717	50,495	4,713	55,208	74,925	19%	5%	\$5,374,510	5%	1%
Oral Health Education and Treatment	36,672	15,243	393	15,636	52,308	14%	4%	\$3,055,190	3%	1%
Perinatal and Early Childhood Home Visiting	37,334	54,457	161	54,618	91,952	24%	7%	\$64,870,191	60%	18%
Prenatal and Infant/Toddler Pediatric Support	10,790	4,988	124	5,112	15,902	4%	1%	\$3,989,301	4%	1%
Total Improved Child Health	208,917	162,944	12,709	175,653	384,570	100%	28%	\$107,892,413	100%	29%
Total Client Service Counts	594,397	698,333	104,722	803,055	1,397,452					
IMPROVED SYSTEMS OF CARE										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Emergency and Disaster Relief								\$3,981,537	4%	1%
Policy and Public Advocacy								\$34,947,075	37%	9%
Systems Building								\$54,472,437	58%	15%
Total Improved Systems of Care								\$93,401,049	100%	25%
Grand Total								\$370,309,652		

2 Totals may not equal 100 percent due to rounding.

APPENDIX A1: REVENUES BY SOURCE, FY 2021-22

Tobacco Tax Funds ⁽¹⁾	\$304,486,852
IMPACT 2020 Funds ⁽²⁾	\$17,257,060
SPCFA Funds ⁽³⁾	\$4,328,837
DLL Pilot Funds ⁽⁴⁾	\$3,849,849
Other First 5 California Funds ⁽⁵⁾	\$8,974,524
Other Public Funds ⁽⁶⁾	\$70,530,072
Donations ⁽⁷⁾	\$114,219
Revenue From Interest Earned ⁽⁸⁾⁽¹¹⁾	\$(5,656,612)
Grants ⁽⁹⁾	\$14,557,872
Other Funds or Revenues ⁽¹⁰⁾⁽¹²⁾	\$(840,090)
Total Revenue	\$417,602,583



This table represents revenue for all county commissions, with the exception of Mendocino.

⁽¹⁾ Total Proposition 10 and Proposition 56 tobacco tax revenue

⁽²⁾ Improve and Maximize Programs so All Children Thrive (IMPACT 2020) consortia or regional hub funds received from First 5 California

⁽³⁾ Small Population County Funding Augmentation (SPCFA) funds received from First 5 California

⁽⁴⁾ Dual Language Learner (DLL) Pilot funds received from First 5 California

⁽⁵⁾ Other funds received from First 5 California

⁽⁶⁾ Other federal, state or public funds received

⁽⁷⁾ Donations received by the county commission

⁽⁸⁾ Interest earned in all Children and Families Trust Fund revenue accounts by the county commission

⁽⁹⁾ Grants received by the county commission

⁽¹⁰⁾ Other funds or revenues received, may include rental income or revenue from services provided. FY 2021-22 statewide totals reflect a negative value due to investment losses and uncollectable account receivable circumstances.

⁽¹¹⁾ FY 2021-22 statewide totals reflect a negative value due to investment losses and updates to GASB reporting standards around leased property.

⁽¹²⁾ FY 2021-22 statewide totals reflect a negative value due to investment losses and uncollectable account receivable circumstances.

APPENDIX A2: NUMBER OF SERVICES AND EXPENDITURES BY RESULT AREA AND SERVICE TYPE, FY 2021–22 (2)

IMPROVED FAMILY FUNCTIONING										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Family Literacy and Book Programs	164,545	246,375	1,194	247,569	412,114	49%	29%	\$4,122,638	4%	1%
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Intensive Family Support	11,202	14,916	1,956	16,872	28,074	3%	2%	\$26,366,654	28%	7%
Total Improved Family Functioning	285,506	509,693	42,290	551,983	837,489	100%	60%	\$95,299,453	100%	26%
IMPROVED CHILD DEVELOPMENT										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
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Quality Early Learning Supports	73,890	21,235	46,019	67,254	141,144	80%	10%	\$56,688,100	77%	15%
Total Improved Child Development	99,974	25,696	49,723	75,419	175,393	100%	13%	\$73,716,737	100%	20%
IMPROVED CHILD HEALTH										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Early Intervention	104,404	37,761	7,318	45,079	149,483	39%	11%	\$30,603,221	28%	8%
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Perinatal and Early Childhood Home Visiting	37,334	54,457	161	54,618	91,952	24%	7%	\$64,870,191	60%	18%
Prenatal and Infant/Toddler Pediatric Support	10,790	4,988	124	5,112	15,902	4%	1%	\$3,989,301	4%	1%
Total Improved Child Health	208,917	162,944	12,709	175,653	384,570	100%	28%	\$107,892,413	100%	29%
Total Client Service Counts	594,397	698,333	104,722	803,055	1,397,452					
IMPROVED SYSTEMS OF CARE										
Result Area and Service Type	Children	Primary Caregivers	Providers	Total Primary Caregivers and Providers	Total Number of Services	Percent of Services in Result Area (1)	Percent of Total Number of Services (1)	Total Expenditures for Services	Percent of Service Expenditures in Result Area (1)	Percent of Total Expenditures (1)
Emergency and Disaster Relief								\$3,981,537	4%	1%
Policy and Public Advocacy								\$34,947,075	37%	9%
Systems Building								\$54,472,437	58%	15%
Total Improved Systems of Care								\$93,401,049	100%	25%
Grand Total								\$370,309,652		

(1) Totals may not equal 100 percent due to rounding.

(2) Data includes all county commissions, with the exception of Mendocino.

APPENDIX B: RESULT AREA AND SERVICE TYPE DEFINITIONS

Result Area: Improved Family Functioning

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

Family Literacy and Book Programs

Programs promoting family literacy, parent-child book sharing, or book ownership for families with children ages birth to 5. The *Kit for New Parents* and *Talk. Read. Sing.*® may be included if these statewide efforts are locally modified to promote literacy, for example, by adding a children's book to the *Kit*, or using *Talk. Read. Sing.*® as a message for distributing books. Program models or initiatives include Bookmobile, Dolly Parton's Imagination Library, Habla Conmigo, *Kit for New Parents*, Little by Little, Potter the Otter, Raising a Reader, Reach Out and Read, Story Cycles, *Talk. Read. Sing.*® and other Local Models.

General Family Support

Programs providing short-term, non-intensive instruction on general parenting topics, and/or support for basic family needs and related case management, including meals, groceries, clothing, and temporary or permanent housing acquisition assistance. General family support may include general playgroup programs that provide parents/caregivers with opportunities to engage, learn, and play with their children. Playgroups are structured, intentional opportunities for parents and/or caregivers and their young children to support the optimal development of the child, the social-emotional needs of the family, and increase social connectedness. General family support may also include referrals to family services such as Family Resource Centers (FRCs) and other community resources. Core Operating Support includes staff, facilities, materials, and other general operating costs associated with an organization's day-to-day functioning. Fatherhood

programs and other operational and support for family support agencies and/or networks are included.

In general, these programs are designed to provide less intense and shorter term ("lighter touch") support services and classes for families by paraprofessional staff (e.g., FRCs). Program models or initiatives include Abriendo Puertas, Avance, Core Operating Support, Playgroups, Triple P Levels 2-3, and Five Protective Factors.

Intensive Family Support

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 designed to support at risk parents and families prenatally or with young children to increase knowledge and skills related to parenting and improved family functioning (e.g., counseling, family therapy, parent-child interaction approaches, and long-term classes or groups). This also is the category for comprehensive and/or intensive services for special populations (i.e., homeless, teen parents, foster children, special needs). Program models or initiatives include Incredible Years, Nurturing Parenting Program, and Triple P Levels 4-5.

Result Area: Improved Child Development

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

Early Learning Program Direct Costs

Early learning programs for children ages 0 to 5 years old may include preschool programs, kindergarten transition services, and early learning programs for all ages. Programs may include child related early literacy and Science, Technology, Engineering, and Math programs; programs for homeless children; migrant programs; and similar investments. Extra supports in early learning settings for homeless children, Federal

Migrant or Tribal Child Care programs, and children receiving Alternative Payment vouchers for childcare should be included here. Program models or initiatives include Facility Grants, First 5-funded Preschool/Childcare Reimbursement, and Summer Bridge Programs.

Quality Early Learning Supports

Programs designed to enhance early learning programs such as professional development for early educators, or implementation and integration of services. This service category may include quality rating and improvement system investments as part of Improve and Maximize Programs so All Children Thrive 2020 and Quality Counts California. This service category covers early learning and care (ELC) settings work, most commonly by licensed care providers, but is also inclusive of alternative settings such as FRCs; Family, Friend, and Neighbor Care; Boys and Girls Clubs; and libraries. This service category may include interagency collaboration, quality improvement supports, support services to diverse populations, and database management and development. Program models or initiatives include Quality Counts California.

Result Area: Improved Child Health

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

Early Intervention

Programs providing screening, assessment, and diagnostic services, including referrals or follow-up to needed services. Programs including early intervention or intensive services to children with disabilities and other special needs, or at-risk for special needs, should be included here. May include strategies targeting language and communication skills, social and emotional development,

developmental delays, and related parent education. Developmental playgroups are specifically intended for children who have been identified as at-risk for developmental delays. Additionally, the playgroup staff are trained to support each child's specific early intervention goals. Mental Health Consultations in early learning and care (ELC) settings are included here. Program models or initiatives include Care Coordination and Linkage, Developmental Playgroups and Mild-to-Moderate Supports.

General Health Education and Promotion

Programs promoting children's healthy development, including nutrition, fitness, access to insurance (health, dental, vision) and health services. Programs also may focus on increased awareness of information about child safety seats, fire, safe sleep, and substances education (drugs, alcohol, tobacco). Program models or initiatives include Nutrition/Breastfeeding, Safety Education, and Smoking or Tobacco Cessation.

Oral Health Education and Treatment

Programs providing an array of services including dental screening, assessment, cleaning and preventive care, treatment, fluoride varnish, and parent education on the importance of oral health care. Category may include provider training and care coordination of services. Program models or initiatives are Local Models.

Perinatal and Early Childhood Home Visiting

Home visiting is the primary service delivery strategy for inter-generational family-centered supports. Home visiting services are provided in the home by qualified professionals with parents, prenatally and/or with children birth to age three. These voluntary programs tailor services to meet the needs of individual families and offer information, guidance, and support directly in the home environment. While home visiting programs vary in goals and content of services, in general, they combine parenting and health care education, early intervention, and early learning supports for young children and their families. Their visits focus on

linking pregnant women with prenatal care, promoting strong parent-child attachment, and coaching parents on learning activities that foster their child's development and supporting families during the pivotal window of pregnancy through early childhood. Program models or initiatives include Early Head Start, Healthy Families America, Healthy Steps, Home Instruction for Parents of Preschool Youngsters, Nurse Family Partnership, Parents as Teachers, Other Maternal, Infant, and Early Childhood Home Visiting Approved, Welcome Baby, and other Local Models.

Prenatal and Infant/Toddler Pediatric Support

Out-of-home programs include prenatal care and follow-up for healthy development-related services during the first three years of a child's life. These programs are designed to improve the health and well-being of women during and after pregnancy, and the infant or young child by a paraprofessional and/or professional outside of the family home, including, but not limited, to pediatric or clinical environments. Programs may provide comprehensive support, including parenting education, health information, developmental assessments, providing referrals, and promoting early learning. Program models or initiatives include Developmental Understanding and Legal Collaboration for Everyone, Healthy Steps, and other Local Models.

Result Area: Improved Systems of Care

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

Emergency and Disaster Relief

Unplanned expenditures made in response to a community disruption resulting from local, regional, or statewide events such as fires, earthquakes, floods, widespread illness (epidemic, pandemic), or riots. Direct materials or support may include addressing immediate needs

of individuals or communities for items such as diapers, clothing, food, shelter, transportation, childcare, and lost wages. Also includes coalition building funding used in concert with other philanthropic, government, and business partners to support broader emergency response systems efforts. Program models or initiatives include Direct Material Support and Coalition Building.

Policy and Public Advocacy

Services include community awareness, public outreach and education on issues related to children ages 0 to 5 years old and their families. This also includes work focused on policy change, work with local and statewide stakeholders, Town Halls, policy development, and related efforts. Program models or initiatives include Resilient Families and Communities, Child Health, Early Learning, and Revenue Sustainability.

Systems Building

Efforts to improve service quality, connections between programs, infrastructure support, and professional development. This category includes activities such as strategic planning, business planning, grant writing workshops, sustainability workshops, and assistance in planning and promoting large community conferences or forums. These improvement efforts should result in improved outcomes for children ages 0 to 5 years old. Improvements could be geared toward creating a well-trained workforce with shared professional standards and competencies, creating strong and effective linkages across system components, or leveraging funding to sustain the system of care. Database management and other cross-agency systems evaluation are also reported here. Program models or initiatives include Early Identification and Intervention (e.g., Help Me Grow), Family Resiliency, Health Systems, Place-Based, and Trauma Informed Care/Adverse Childhood Experiences.

APPENDIX C: DEMOGRAPHICS OF POPULATIONS SERVED FY 2021-22

AGE CATEGORY	INDIVIDUALS SERVED
Children Less than 3 Years Old	179,364
Children from 3rd to 6th Birthday	182,633
Children—Ages Unknown (birth to 6th birthday)	213,819
Primary Caregivers	683,069
Providers	100,117
Total Children 0-5	575,816
Total Primary Caregivers	683,069
Total Children, Caregivers, and Providers	1,359,002

RACE/ETHNICITY CATEGORY	CHILDREN 0-5	PRIMARY CAREGIVERS	TOTAL (1)
Alaska Native/American Indian	2,856	1,722	4,578
Asian	34,810	53,361	88,171
Black/African-American	23,771	17,162	40,933
Hispanic/Latino	218,003	196,921	414,924
Native Hawaiian or Other Pacific Islander	1,695	1,641	3,336
Other	20,634	28,837	49,471
Two or more races	14,145	20,422	34,567
White	62,842	38,141	100,983
Unknown	199,080	325,124	524,204
Total	577,836	683,331	1,261,167

LANGUAGE CATEGORY	CHILDREN 0-5	PRIMARY CAREGIVERS	TOTAL (1)
English	229,211	184,839	414,050
Spanish	122,700	127,971	250,671
Vietnamese	10,743	35,675	46,418
Other	10,632	14,145	24,777
Cantonese	1,932	1,370	3,302
Mandarin	721	749	1,470
Korean	162	212	374
Unknown	199,715	318,108	517,823
Total	575,816	683,069	1,258,885

Demographic counts represent all county commissions, with the exception of Mendocino.

(1) Column does not include provider counts for race/ethnicity and language. This data is not collected for the provider population.

REFERENCES

¹World Health Organization (2021). Tobacco control to improve child health and development: Thematic Brief. <https://www.who.int/publications/i/item/9789240022218/>. Accessed October 25, 2022.

²UCLA Center for Health Policy Research. Ask CHIS 2003–2021. Current Smoking Status—Adults. <https://ask.chis.ucla.edu/>. Accessed October 25, 2022.

³Marbin, Jyothi, et al. "Health disparities in tobacco use and exposure: a structural competency approach." *Pediatrics* 147.1 (2021).



First 5 Napa County									
Budget Projection for FY 2022-23 through 2025-26									
(See detail in tab)									
	2020-21	2021-22	2022-23	2023-24	Notes	2023-24	2024-25	2025-26	
	Audited	Audited	Projected	Projected		Projected	Projected	Projected	
	Actuals	Actuals	Actuals	Budget		Budget	Budget	Budget	
Revenues									
45100	Interest Income	\$8,083	\$5,210	\$5,710	\$ 5,000	County estimate	\$5,000	\$5,000	\$5,000
43605	State: Prop 10 - Children & Families First	663,284	668,435	621,051	706,007		706,007	679,230	685,731
43790	State: Prop 56	199,928	224,173	196,382	-		-	-	-
43790	State: Impact Grant	93,010	240,447	157,332	168,599	IMPACT includes Local \$283,199 Total 2 year allocation and \$54000 2 year allocation for Fiscal Lead Agency (FLA) role Funding from July 1, 2023-June 30, 2024	168599	168599	168599
43790	State: QCC QRIS Grant	13,169	74,621	68,068	43,153	Grant ended Dec 2022	-	-	-
43790	State PDG-R Grant	-	17,625	7,589	-		-	-	-
43790	State: ELO Grant	22,809	-	-	-		-	-	-
43790	State: HV Coordination	-	88,573	-	56,926	\$134139 Total 2 year allocation. Local HV (RSG) and Regional Work	56,926	-	-
43950	Other Governmental Agencies (HUB)	-	289,751	402,685	-	HUB Funds will be rolled into IMPACT	-	-	-
45300	Rent - Bldg/Land	4,900	-	-	-		-	-	-
47150	Other Grants	38,103	5,425	8,949	5,000	\$15000 Total 3 year allocation from NCOE for Floreecer	5,000	5,000	0
47500	Donations and Contributions	11,044	3,535	-	-		-	-	-
Total Revenues		\$1,054,330	\$1,617,795	\$1,467,766	\$ 984,685		\$963,132	\$893,202	\$840,731
Expenditures									
51100	Salaries and Employee Benefits	\$427,660	\$421,932	\$380,997	\$ 520,507	Includes budget for 5 staff (3 new hires)	\$526,253	\$545,724	\$565,915
52125	Accounting and Auditing Services	24,569	26,597	25,000	30,000		25,000	25,000	25,000
52140	Legal Services	750	1,688	-	2,000		2,000	2,000	2,000
52305	Training Services	-1,704	72,057	10,850	10,850	F5NN Training (Room rentals, food) Program; MSH; Hele/Kumu; L/Watson; NVC cohorts, Design work coaches	-	-	-
52310	Consulting Services	76,385	341,751	323,360	100,000		100,000	100,000	100,000
52320	Translation/Interpreting Services	4,777	4,820	500	5,000		5,000	5,000	5,000
52345	Janitorial Services	3,425	3,600	3,900	3,600		3,600	3,600	3,600
52490	Other Professional Services	19,732	176,169	168,000	30,000	IT; Camaleo (website redesign); Handyperson; Xtra help	25,000	25,000	25,000
52600	Rents/Leases - Equipment	3,745	4,401	3,754	4,056	Kyocera and TIAA	4,000	4,000	4,000
52605	Rents/Leases - Building & Improvements	49,693	53,843	55,478	55,278	1303 Jefferson plus storage unit	57,000	59,000	62,000
52705	Insurance - Premiums	9,197	11,795	12,699	9,270		9,270	9,270	9,270
52800	Communications	4,582	4,601	4,436	4,500	Comcast internet and Ring Central program marketing/recruit	4,500	4,500	4,500
52810	Advertising/Marketing	154	320	2,000	2,000		300	300	300
52830	Publications/Legal Notices	-	-	-	250		250	250	250
52900	Training/Conference Expenses	826	3,600	8,500	5,000	All F5 Assoc/CA/F5LN conferences; staff training	10,000	10,000	10,000
52905	Transportation & Travel	-	-	200	3,500		3,500	3,500	3,500
53100	Office Expense	4,042	2,650	1,200	5,000	office supplies	2,000	2,000	2,000
53105	Office Expenses-Furn & Fixture	3,033	1,223	500	2,000		500	500	500
53110	Freight/Postage	-	39	100	250		100	100	100
53115	Books/Media/Periodicals/Subscriptions	75	58	-	60		60	60	60
53120	Memberships/Certifications	4,865	4,995	7,775	4,975	F5 Assoc member dues; policy work; NAEYC hardware replacement - New Computers	5,000	5,000	5,000
53410	Computer Equipment/Accessories	-	614	-	5,000	renewals, software and platform purchases	1,000	1,000	1,000
# 53415	Computer Software/Licensing	2,263	6,984	7,420	4,119	Supplies: Rainbow Kits, RFL.	4500	4500	4500
53600	Special Department Expense	3,033	1,223	500	14,750		15000	15000	15000
53635	Staff and Volunteer Relations	675	-	-	1,000		1,000	1,000	1,000
53650	Business Related Meals & Supplies	814	4,298	2,000	3,000	53650 - Program food, not staff/travel	3,000	3,000	3,000
54805	Prop 10 Grant	187,085	180,221	107,600	100,000	Community Grants, Event Sponsorship	100,000	100,000	100,000
54805	IMPACT/QCC Grants	208,338	148,838	146,985	135,400	CRC - Local QC, IMPACT Work	135,000	135,000	135,000
54805	HUB expenditures	-	-	141,722	-	Note: 54805 - Use for all pass through funds	0	0	0
54805	HV Expenditures	-	-	-	75,000	COPE - Ready Set Grow	75000	-	-
54810	Sponsorship Grants	\$1,000	-	-	-		-	-	-
58100	Contingency	-	-	-	-		-	0	-
Total Expenditures		\$1,035,981	\$1,477,094	\$1,426,976	\$ 1,136,005		\$1,117,833	\$799,644	\$1,087,495
	FY21 deferred revenues received in FY22	\$ -	\$ -	\$ 2,205	\$ -		\$ -	\$ -	\$ -
Net Surplus (Deficit)		\$18,349	\$140,701	\$42,996	\$ (151,320)		(\$154,701)	\$93,558	(\$246,764)
	Beginning Fund Balance (Est)	\$746,860	\$765,209	\$905,910	\$ 948,906		\$810,395	\$ 745,694	\$ 839,252
	Surplus (Deficit)	18,349	140,701	42,996	(151,320)		-154,701	93,558	-246,764
	Ending Fund Balance	\$765,209	\$905,910	\$948,906	\$ 797,586	Prudent reserve should not go below \$150,000 based on Prop 10 guide, Napa County Auditor Controller Recommendation \$500,000	\$ 745,694	\$ 839,252	\$ 592,488
						Fund balance includes \$285,000 safety net as First 5 California/Association explore sustainable revenue plan.			

Projected Budget for FY 2023-24

	Prop 10		Quality Counts			Total
	Prog/Eval 2023-24 Budget	Admin 2023-24 Budget	State Impact 2023-24 Budget	QCC Block Grt 2023-24 Budget	HUB Reimbursement 2023-24 Budget	2023-24 Budget
Revenues						
45100 Interest Income	\$ -	\$5,000	\$ -	\$ -	\$ -	\$5,000
43605 State: Prop 10 Children & Families First	551,422	154,585	-	-	-	706,007
43790 State: Prop 56	0	-	-	-	-	-
43790 State: Impact Grant	-	-	168,599	-	-	168,599
43790 State: QCC Block Grant	-	-	-	43,153	-	43,153
43790 State: PDG-R	-	-	-	0	-	0
43790 State: ELO Grant	-	-	-	-	-	0
43790 State: HV Coordination	-	-	-	56,926	-	56,926
47150 Other Governmental (HUB)	-	-	-	-	-	0
47150 Other Grants	-	-	8,949	-	5000	13,949
47500 Donations	-	-	-	-	-	-
Total Revenues	\$551,422	\$159,585	\$186,497	\$100,079	5000	\$1,002,583
Expenditures						
51100 Salaries/Benefits	\$348,740	\$171,767	\$ -	\$ -	\$ -	520,507.00
52125 Accounting and Auditing Services	-	30,000	-	-	-	30,000
52140 Legal Services	-	2,000	-	-	-	2,000
52305 Training Services	10,850	-	-	-	-	10,850
52310 Consulting Services	100,000	-	-	-	-	100,000
52320 Interpreting Services	5,000	-	-	-	-	5,000
52345 Janitorial Services	2,625	975	-	-	-	3,600
52490 Other Professional Services	26,000	4,000	-	-	-	30,000
52600 Rents/Leases - Equipment	2,817	1,239	-	-	-	4,056
52605 Rents/Leases - Building & Improvements	36,970	18,308	-	-	-	55,278
52705 Insurance - Premiums	5,079	4,191	-	-	-	9,270
52800 Communications	3,391	1,109	-	-	-	4,500
52810 Advertising/Marketing	1,780	220	-	-	-	2,000
52830 Publications/Legal Notices	250	-	-	-	-	250
52900 Training/Conference Expenses	5,000	1275	-	-	-	6,275
52905 Transportation & Travel	3,500	66	-	-	-	3,566
53100 Office Expense	4,250	750	-	-	-	5,000
53105 Office Expenses-Furn & Fixture	2,000	125	-	-	-	2,125
53110 Freight/Postage	217	33	-	-	-	250
53115 Books/Media/Periodicals/Subscriptions	60	-	-	-	-	60
53120 Memberships/Certifications	3,809	1,166	-	-	-	4,975
53410 Computer Equipment/Accessories	5,000	-	-	-	-	5,000
53415 Computer Software/Licensing	3,006	1,113	-	-	-	4,119
53635 Staff and Volunteer Relations	1,000	-	-	-	-	1,000
53650 Business Related Meals & Supplies	3,000	0	-	-	-	3,000
54805 Prop 10 Grant	100,000	-	-	-	-	100,000
54805 Quality Counts (Impact & QRIS) Grants	-	-	114,814	32,171	-	146,985
54805 HUB Expenditures	-	-	-	-	0	0
54805 HV Stipends	-	-	-	-	-	0
54810 Sponsorship Grants	-	-	-	-	-	0
58100 Contingency	-	-	-	-	-	-
Indirect Cost Allocation	-	-	-	-	-	0
Total Expenditures	674,344.21	\$238,337	\$114,814	\$32,171	\$0 #	1,059,666.00
Net Surplus (Deficit)	(\$122,922)	(\$40,443)	\$71,683	\$67,908	\$5,000 #	(\$57,083)
Beginning Fund Balance	\$749,636	\$199,270	0	0	0	\$948,906
Surplus/(Deficit) current Year	(\$122,922)	(\$40,443)	\$71,683	\$67,908	\$5,000	(\$57,083)
Ending Fund Balance	\$626,714	\$158,827	\$71,683	\$67,908	\$5,000	\$891,823
Total Admin	238,337					
Total Expenditures	1,059,666					
Percentage of admin	22%					

Account Code (Funding Source)	Type	Budget Roll Up Code	Project Code	Activity	Budgeted Amount	Notes	Total Project Budget	Revenue Notes
43790			Active Programs (F5AP)	Florecer	\$10,000	Florecer - Mentor Stipends - 10 Mentors// \$1000 each	Florecer Mentorship Program	\$39532 from Prop 10
43790		53650	Active Programs (F5AP)	Florecer	\$3,000	Florecer - Food Budget - 6 Convenings// \$500 each	\$44,532	\$5000 from NCOE (OJJDP Enhancing School Capacity to Address Youth Violence Grant)
43790		53600	Active Programs (F5AP)	Florecer	\$2,000	Florecer - Supplies		
43790		52310	Active Programs (F5AP)	Florecer	\$19,688	Florecer - NVC Contract -Cohort 1 Courses - 2EA at \$9844 each		
43790		52310	Active Programs (F5AP)	Florecer	\$9,844	Florecer - NVC Contract - Cohort 2 Course - 1EA at \$9844		
43790		52310	Active Programs (F5AP)	RFL	\$11,300	RFL - Dr. Lori A Watson Contract	Rainbow Family League	\$18,800 from IMPACT
43790		52310	Active Programs (F5AP)	RFL	\$5,000	RFL - Dalila Hernandez - Faciliator Contract	\$18,800	
43790		53600	Active Programs (F5AP)	RFL	\$7,000	RFL - Books and Materials - 20 Families// \$350 each		
43790		52810	Active Programs (F5AP)	RFL	\$500	RFL - Marketing		
43790		53600	Active Programs (F5AP)	RBK	\$6,000	Rainbow Kit - Materials - 15 Kits// \$400 each (NVC to reimburse)	Rainbow Kits	\$750 from Prop 10
43790		53600	Active Programs (F5AP)	RBK	\$750	Rainbow Kit - Materials - 15 "Mini Kits"// \$50 each	\$6,750	\$6000 from NVC reimbursement
Pass through Funds								
43790		54810			\$100,000	Applications for Community Connections Grants (Awards up to \$5000 for community members). Total of \$40,000 Available per year for Community Connections Grants// Applications for Sponsorship (Awards up to \$10,000 for local events, trainings, and activities). Total of \$60,000 Available per year for Sponsorship	Funding Opportunities	\$100000 From Prop 10
43790		54805	Quality Counts (QCIMPACT, QCBG)	QCPROG, QCEVAL, QCCONTRACTUAL	\$40,000	Quality Counts - (Contract with CRC)	Quality Counts	Quality Counts \$40,000 REVENUE
43790		54805	IMPACT	IMPROG, IMEVAL, IMCONTRACTUAL	\$95,040	IMPACT Implementation (Details TBD based on regional decisions on areas of focus)		IMPACT
43790		54805	Home Visitation (HVCG, HVPDGR)	HVEVAL, HVPROG, HVCONTRACTUAL	\$75,000	Home Visitation - Ready Set Grow (Contract with COPE)	Home Visitation	Home Visitation \$58,972 REVENUE HV \$16028 from Prop 10
							\$75,000	

As of 4/12/23

		2022-23	2022-23	2022-23
		Final Budget	Actual YTD (rounded)	Projected Year End Actuals
43605	State - Prop 10	808,323	368,057	621,051
43790	State-Other Funding			
	-prop 56	-	196,382	196,382
	-Impact	157,332	49,677	157,332
	-QCC Block Grant/QRIS	52,589	63,689	68,068
	-HV Coordination Grant	-	-	-
	-HUB reimbursement	402,685	110,891	402,685
	-PDGR Grant	-	7,589	7,589
45100	Interest	5,000	2,855	5,710
47150	Other Grants	8,600	8,949	8,949
47500	Donations and Contributions	-	-	-
47900	Miscellaneous	-	-	-
	Total Revenues	1,434,529	808,089	1,467,766
Expenses				
51100	Salaries and Wages	457,639	257,966	302,621
51105	Extended Hours	-	-	-
51110	Extra Help	-	1,116	1,116
51130	Vacation Payout	-	8,365	8,365
51200	401A Employer Contribution	-	1,000	1,000
51205	Cell Phone Allowance	-	3,345	4,320
51300	Medicare	-	4,311	5,065
51305	FICA	-	17,767	20,998
51400	Employee Insurance-Premiums	-	28,566	35,040
51405	Workers Compensation	-	1,581	1,851
	Total for: Salaries and Benefits	457,639	324,483	380,997
52125	Accounting/Auditing Services	25,000	19,879	25,000
52140	Legal Services	2,000	-	-
52305	Training Services	10,850	119	10,850
52310	Consulting Services	323,360	157,403	323,360
52320	Interpreting Services	4,200	56	500
52345	Janitorial Services	3,600	2,850	3,900
52490	Other Professional Services	168,000	73,000	168,000
52600	Rents and Leases - Equipment	4,056	2,820	3,754
52605	Rents and Leases - Bldg/Land	55,478	50,806	55,478
52705	Insurance - Premiums	9,270	12,699	12,699
52800	Communications/Telephone	4,500	4,084	4,436
52810	Advertising/Marketing	2,000	1,630	2,000
52830	Publications & Legal Notices	250	-	-
52900	Training/Conference Expenses	5,000	7,107	8,500
52905	Business Travel/Mileage	3,500	-	200
53100	Office Supplies	29,210	1,024	1,200
53105	Office Supplies-Furn & Fixture	2,000	57	500
53110	Freight/Postage	250	9	100
53115	Books/Media/Periodicals/Subscr	60	-	-
53120	Memberships/Certifications	4,975	7,775	7,775
53410	Computer Equipment/Accessories	2,000	-	-
53415	Computer Software/Licensing Fe	4,119	6,162	7,420
53600	Special Dept Expense	-	8,741	12,000
53635	Service Awards	1,000	-	-
53650	Business Related Meal/Supplies	2,000	712	2,000
	Total for: Services and Supplies	666,678	356,933	649,672
54805	Community Grants	-	-	-
	-prop10	107,600	59,184	107,600
	-Impact and QRIS	146,985	73,329	146,985
	-Hub	141,722	27,655	141,722
	-HV Stipends	-	-	-
54810	Sponsorship Grants	-	-	-
	Total for: Other Expenses	396,307	160,168	396,307
	FY22 deferred revenues received in FY23	-	2,205	2,205
	Total Expenditures	1,520,624	841,584	1,426,976
	Net Surplus (Deficit)	-86,095	-31,290	42,996
	33100 - Available Fund Balance plus imprest cash		905,910	905,910
	Net Surplus (Deficit)		-31,290	42,996

Staff	Hourly Rate 2020-21	Increase	Hourly Rate 2023-24	Hrs per week	Weeks per year	Hours worked per year	FTE	Gross Wage	401	Health in Lieu	Annual	Car Allowa nce (Month ly)	Annual	Cell Allowan ce (Monthl y)	Annual	Taxes/ Workers Comp/ Unemploy ment	Total Annual Compensa tion	Notes				
LH	new postion		60.08	40	52	2080	1	124966.40	4000	\$353.40	8481.60	150	1800	100	1200	14325.70	154773.70	Includes 8.7% COLA				
SSP	new postion		31.05	40	52	2080	1	64584.00		\$325.88	7821.12	150	1800	100	1200	7691.32	83096.44	Includes 8.7% COLA previous year's wage, \$5,000 for new position				
IA - Progs Coord			36.06	40	52	2080	1	75000.00		\$313.05	7513.20	150	1800	100	1200	8722.35	94235.55					
NEW HIRE - Progs Coord			36.06	40	52	2080	1	75000.00		\$353.40	8481.60	150	1800	100	1200	8821.12	95302.72	Estimates for M-S				
NEW HIRE - Exec Asst			35.09	40	52	2080	1	73,000.00		\$353.40	8481.60	150	1800	100	1200	8617.12	93098.72	Estimates for M-S				
																	520507.13					