

# Community Plan

2017-2022

# Welcome

First 5 Napa County Commissioners and staff are excited to share the 2019 update to the 2017-2022 Community Plan with the Napa County community. This plan is updated each year to reflect the continual refinement of the Commissions' work.

Between 2017 and 2022, the Commission will be transitioning to focus on more intensively supporting and advocating for children 0-5 and their families across all systems of support. As a first step, this plan was created to share our intentions with the community and partners. In early 2019, we took the exciting step of initiating the inaugural First 5 Napa Network cohort. Through the First 5 Napa Network, we intend to engage our community's leaders in human centered design training and collaborative activities to better understand the systems that are in place, how they can be strengthened, and what may be holding our community back from best providing for young children and families. This network of diverse leaders will design and implement projects to strengthen those systems and build our collective capacity to improve the lives of children 0-5 and their families in our community.

During this transition, the commission will still be using its resources to act as a convener, a funder, an advocate and an educator with the continued intention of using the resources from Proposition 10 to create a seamless system of integrated and comprehensive quality programs and services to support the health and development of children prenatal to age 5 and their families. The commission also provides funding to Community Resources for Children to co-coordinate Quality Counts efforts – along with Napa County Office of Education and First 5 Napa County – to improve the quality of early education programs in Napa County.

The Commission is grateful for your commitment to children 0-5 and their families in Napa County.

Thank you.

--First 5 Napa, May 2019

# Part One: Who We Are

First 5 Napa County is responsible for distributing Proposition 10: The California Children and Families Act funds in the Napa County communities.

# **Proposition 10: The California Children and Families Act**

There is hereby created a program in the state for the purposes of promoting, supporting, and improving the early development of children from the prenatal stage to five years of age. These purposes shall be accomplished through the establishment, institution and coordination of appropriate standards, resources and integrated and comprehensive programs emphasizing community awareness, education, nurturing, child care, social services, health care and research.

It is the intent of this act to facilitate the creation and implementation of an integrated, comprehensive, and collaborative system of information and services to enhance optimal early childhood development. This system should function as a network that promotes accessibility to all information and services from any entry point into the system. It is further the intent of this act to emphasize local decision making, to provide for greater local flexibility in designing delivery systems, and to eliminate duplicative administrative systems.

The programs authorized by this act shall be administered by the California Children and Families First Commission and by county children and families first commissions. In administering this act, the state and county commissions shall use outcome-based accountability to determine future expenditures.

--Excerpt from the Text of Proposition 10

# **First 5 Napa County Commissioners**

To accomplish the work for First 5, the Napa County Board of Supervisors appoints community representatives to the Commission. As of May 2019, the following individuals are participating as commissioners.

#### Elba Gonzalez-Mares, Chair

Executive Director, Community Health Initiative Napa County

#### Laura Keller, Vice-Chair

Director of Public Health Nursing and Maternal Child and Adolescent Health Director, Napa County Health and Human Services

#### **Debbie Peralez, Chair**

Executive Director, Child Start, Inc.

#### Michele Grupe

Executive Director, Cope Family Center

#### **Andrea Knowlton**

Director of Early Childhood Services, Napa County Office of Education

## **Brad Wagenknecht**

Napa County Supervisor, District 1

#### Jenny Ocon

Executive Director, UpValley Family Centers

#### Jennifer Palmer

Project Manager, Napa County Health and Human Services

#### **Kecia Lind**

Deputy District Attorney, Napa County

# Vision, Mission and Principles

The vision, mission and principles have been reviewed, refined and updated by the commissioners to clarify the priorities of First 5 Napa County.

#### **Vision**

All Napa County children will have access to integrated and coordinated services and will thrive in a family and community that values and invests in early childhood.

#### Mission

We convene partners and facilitate community conversations to create an integrated and coordinated system of services for children prenatal through age 5 so all Napa County children enter school healthy and ready to learn.

# **Principles**

The following principles are intended to guide all of First 5 Napa's activities.

## **Prioritize Policy and Partnerships**

- Policy and system change efforts to support the healthy development and school readiness of all Napa County children will be a priority.
- Decisions will be made using community input to be sure resources are focused on current and relevant needs.
- Partnerships with systems and agencies that serve children 0-5 and their families will be pursued to
  extend the conversation about and advocacy for children and their families into the larger
  community. Working together toward common goals builds trust and is an effective long term
  strategy.
- Opportunities to secure and/or leverage funding from other community, state and federal resources will be encouraged.
- Multi-disciplinary and comprehensive services are most likely to achieve First 5 Napa County's goals and strategies.

#### **Focus on Equity**

- Children from diverse cultural and linguistic backgrounds, including those with special needs, may need special services.
- Children most at-risk and vulnerable to adverse experiences, disease, and inequalities may require special attention.

# **Promote Effective Supports for Families**

- Families are children's primary caregivers and first teachers.
- Preventative services and strategies are most effective.
- Program excellence is demonstrated by programs that serve the community by (1) using quality
  evidence-based or promising practices, (2) adequately and appropriately training staff and (3)
  focusing on outcomes, using results-based accountability.

# **Accountability**

Planning and accountability activities are part of an ongoing process to ensure that budget and funding decisions support the needs of children 0-5 and their families. The primary tools, the Community Plan and the Long-Term Financial Plan, are used together to make decisions about how to distribute funds in the community. Program Evaluation and Fiscal Accountability inform the updates of both the Community Plan and the Long-Term Financial Plan.

#### **Fiscal Controls**

First 5 Napa staff work with grantees to ensure the First 5 Napa funds are used appropriately and relevant fiscal records are maintained by all funded programs. First 5 Napa is responsible for reporting all fiscal information to First 5 California to verify to the state legislature that funds are being used to fund services and supports for children 0-5 in Napa County. As a result of revised fiscal auditing guidelines developed by First 5 California and the California State Controller's Office, First 5 Napa submits an Expanded Audit annually.

#### **Tobacco Prevention Policy**

The Commission acknowledges the hazards arising from the use of tobacco and the serious health risk associated with exposure to secondhand smoke. The Commission also supports the goal of Proposition 10 that tobacco taxes collected under the proposition will be used, in part, to reduce the harm caused by tobacco use, especially to pregnant women and children. To work toward that goal, First 5 Napa encourages a comprehensive tobacco policy for each agency, organization or business that applies for funding.

#### First 5 Napa's Statement on Supplantation

First 5 Napa funds shall be appropriated and expended only for the purposes expressed in the Children and Families First Act and shall be used only for new and innovative programs and services, or to supplement or expand existing levels of service. These funds cannot be used to support existing levels of service or be used to supplant state or local general fund money for any purpose.

## Part Two: Who We Serve

In order to allocate resources effectively, the commission tracks demographics of children 0-5 and their families in Napa County.

- Since 2010, the overall population growth in Napa County and California has closely mirrored each other; with four and five percent increases respectively.
- The population of children 0-5 in Napa County has decreased 8% since 2010, compared to a 1% decrease statewide.
- The language and ethnic diversity of young children has remained relatively stable with the majority of young children identifying as Hispanic.
- The percent of children living in poverty has also remained stable with about one in seven Napa County children.

# **Children and Families in Napa County**

## **Population Growth**

# **Population Changes by Community**

Since the inception of the Commission in 2000, significant demographic changes have occurred in the City of American Canyon. From 2000 to 2010 there was a 99% increase in the population in American Canyon; however, since 2010 the population growth in American Canyon has leveled out, and now more closely mirrors the growth rate in the state and in other cities in Napa County.

Population Growth in California, Napa County and Cities in Napa County – 2010 and 2016

	Total Population		Change 20	)10-2016
				Percent
State/County/City	2010	2016	Number	Change
California	37,253,956	39,255,883	2,001,927	5%
Napa County	136,484	142,028	5,544	4%
American Canyon	19,454	20,374	920	5%
Calistoga	5,155	5,180	25	0%
Napa	76,915	80,576	3,661	5%
St. Helena	5,814	6,004	190	3%
Yountville	2,933	2,987	54	2%

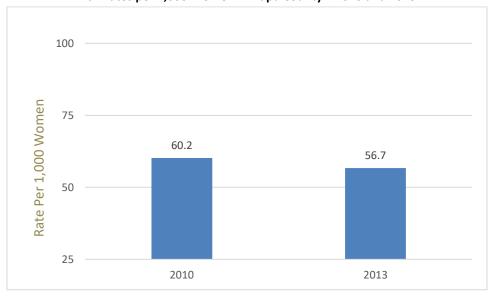
Since 2010, Napa County has seen a more dramatic reduction in the population of children 0-5 years old than the state of California. From 2010 to 2016 California had a one percent reduction in the 0-5 population and Napa County saw an eight percent reduction. Similarly, Napa County has also seen a reduction in birth rates.

Population Changes, Children 0-5

Population of Children 0 to 5 years old in California and Napa County – 2010 and 2015

	Population		Change 20	10-2015
				Percent
	2010	2015	Number	Change
California				
0-2 years old 3-5 years old	1,501,254	1,509,077	7,823	
3-3 years old	1,530,662	1,500,620	-30,042	
Total	3,031,916	3,009,697	-22,219	-1%
Napa County				
0-2 years old	4,746	4,438	-308	
3-5 years old	5,073	4,586	-487	
Total	9,819	9,024	-795	-8%

# Birth Rates per 1,000 Women in Napa County – 2010 and 2013 iv



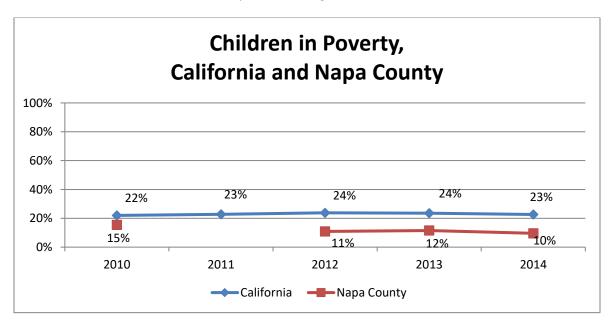
#### **Poverty**

Two measures are used to better understand poverty among families in Napa County. The Federal Poverty Standard is widely available. Additionally, the self-sufficiency standard is used to provide context for families living in Napa County.

## Federal Poverty Standards<sup>v</sup>

The federal poverty standard is used to estimate the "percentage of children ages 0-17 living in families with incomes below the Federal Poverty Level. The Federal Poverty Level was \$24,008 for a family of two adults and two children in 2014." Vi

In Napa County, the rate of children in poverty has declined slightly from 15% in 2010 to 10% in 2014. The statewide rate remained relatively stable during this same timeframe.



#### Self-Sufficiency Standardvii

The self-sufficiency standard adjusts the poverty guidelines to accommodate the cost of living in Napa County. In 2014, the self-sufficiency standard for two adults and two children 0-5 was \$63,979, much higher than the federal poverty level of \$24,008. The standard "measures the minimum income necessary to cover all of a non-elderly (under 65 years old) and non-disabled individual or family's basic expenses - housing, food, child care, health care, transportation, and taxes - without public or private assistance."

Using this estimate, the number of families with children living below the self-sufficiency standard is estimated to be 43%.

The average expenses for the hypothetical family and the change in expenses from 2011 to 2014 are shown in the table below. Childcare was the largest expense in both 2011 and 2014.

The commission continues to review the housing cost estimates in this data, and will include updates in this document as more information is obtained.

Self-Sufficiency Standard for Napa County, Two Adults and Two Children 0-5

Expense Type	2011 Cost	2014 Cost	Percent Change
Child Care	\$1,896	\$2,448	23%
Housing	\$1,410	\$1,414	0%
Taxes	\$1,244	\$1,409	12%
Food	\$723	\$746	3%
Miscellaneous	\$499	\$563	11%
Transportation	\$521	\$555	6%
Health Care	\$445	\$466	5%

## Language

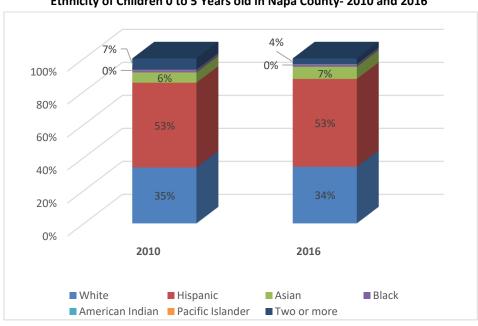
Ninety-seven percent of children entering kindergarten in Napa County speak English or Spanish. This has remained steady since the 2009-2010 school year.

Languages	Snokan k	w Children	in Kind	dorgarton	in Na	na County <sup>ix</sup>
Languages	Spoken t	ov Chilaren	ın Kınd	aergarten	ın ıva	ba County

		Percent of		Percent of
	Number	Enrollment	Number	Enrollment
Language	2009-10		201	15-16
Spanish	634	40%	665	40%
Filipino (Philipino or Tagalog)	13	1%	11	1%
Other Language	31	2%	24	1%
Total English Learners	678	43%	700	43%
English	891	57%	944	57%
Total Enrollment	1,569	100%	1,644	100%

# Race/Ethnicity

Since 2010 the ethnic diversity of children in Napa County has held relatively steady. In 2010 and 2016, the majority of children 0-5 identified as Hispanic (53%).



Ethnicity of Children 0 to 5 Years old in Napa County- 2010 and 2016<sup>x</sup>

#### **Immigration**

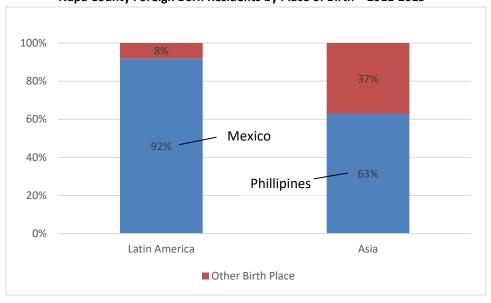
Almost a quarter (23%) of Napa County residents were born outside of the United States. Of those foreign born residents 88% were born in Latin America or Asia with the majority from Mexico and the Philippines.

Immigration Status of Napa County Residents – 2011-2015xi			
	Number	Percent	
Total Napa County Population	140,295		
Native Born	108,017	77%	
Foreign Born	32,278	23%	

The Place of Birth of Foreign Born Residents of Napa County – 2011-2015<sup>xii</sup>

	Number	Percent
Foreign Born Residents in Napa County	32,278	
Born in Latin America	21,778	67%
Mexico	20,083	
Born in Asia	6,929	21%
Philippines	4,353	
Born Elsewhere Outside of U.S.	3,571	11%

Napa County Foreign Born Residents by Place of Birth – 2011-2015<sup>xiii</sup>



# **Part Three: Our Response**

#### Our Role

## Convener, Advocate, Educator, Funder and Backbone Organization

To fulfill the vision of First 5 Napa County, the commissioners and staff work with community agencies and funders to make the systems that serve children and families accessible, integrated and coordinated.

In this work, First 5 Napa County has acted as a convener and a funder.

Over the past five years, additional roles have emerged. As the federal, state and local conversations turn to the 0-5 population, First 5 has emerged as an **advocate** for coordinated and integrated systems.

- In the context of First 5, this means being a voice that ensures First 5 Napa participates in efforts that address the strengths and needs of children 0-5 and their families.
- It also means being at the table with policy makers to enhance and refine the systems that serve these children and their families.

First 5 Napa will continue to take a role in advocating for building collaborations and blending resources to sustain the systems and supports over time.

As First 5 Napa's work has continued to include system level efforts, First 5 has also begun to expand its role as an **educator**.

- In the past, this has included workshops and trainings to support common interventions.
- First 5 Napa plans to collect and report on indicators annually to assist organizations to advocate for services and supports.
- First 5 Napa will educate community-based organizations and community members on federal and state policy changes that impact families of children 0-5.

First 5 Napa County aims to be a **backbone organization** for the First 5 Napa Network. As a backbone organization, First 5 Napa County intends to 1) facilitate effective communications across partners; 2) provide a strong network identity (e.g., shared language, logos, symbols); 3) drive long-term momentum and capacity building; 4) amplify current community initiatives; 5) support both the people and the projects that are part of the F5NN; and 6) provide seed funding where appropriate.

## **Five Year Goals**

In order to continue First 5 Napa County's work building an integrated system for children 0-5 and their families, the Commission is focused on (1) **supporting and advocating** across all systems of critical, community support services for children 0-5 and families, (2) **monitoring changes** in the political and funding landscape to remain responsive to changes, and (3) **learning more** about the sustainability of existing systems and supports.

Below are the goals the Commission will be working toward and hopes to achieve by 2022.

#### **Awareness**

- Increased visibility of the needs of children 0-5
- Increased awareness of the impacts of system-level influences (e.g., cultural biases, economy, housing, environment) on the development and health of children 0-5

#### **Advocacy**

- New advocates are working on behalf of children 0-5 outside of the traditional 0-5 programs
- First 5 Napa, First 5 Napa Network, and partners are advocating for and influencing local, state, and federal policies that promote equity and social inclusion and support marginalized populations of families and children 0-5.

#### **Focused Work**

- Funding has shifted from direct service to system work
- Convene three First 5 Napa Network (F5NN) leadership cohorts to facilitate system-level conversations among diverse groups of community leaders
- Integrated system or collective capacity initiatives with resources and measurable outcomes will result from F5NN to improve lives of children 0-5
- Commission resources are addressing core concerns for children and their families

#### **Impact**

- More people and larger systems are involved in supporting children 0-5 in Napa County
- Community-wide system work changes the experience of children, families and neighborhoods in Napa County
- The legacy of First 5 Napa is becoming apparent

#### **Goal Areas**

In previous Community Plans, the goal areas were discussed and considered separately with occasional instances when one or more would overlap. For the 2017-2022 Community Plan, the Commission's intent is to better understand how the current goal areas work together and to identify opportunities to support, enhance and create integrated systems that better serve children 0-5 and their families. Additionally, the Commission intends to affect system level change by building collective capacity in Napa County for collaboration, innovation, and greater impact throughout the spectrum of prevention for early childhood.



To reflect this refined intent, the commissioners have added two additional goal areas: **Collective Capacity and Integrated Systems.** The remaining goal areas align with the three previous goal areas: **Healthy Children, Quality Early Learning** and **Strong Families**.

This section includes indicator data to begin the discussion with the community and partners about needs and priorities for each goal area.

Napa County has collective capacity with a diverse leadership network for collaboration, innovation, and systems-level impact on early childhood development issues.

The intent of Proposition 10, The California Child and Families Act of 1998, is to support children from prenatal to age five by creating a comprehensive and integrated system of information and services to promote early childhood development and school readiness. In order for First 5 Napa County to go beyond program funding and address system implementation, integration and evaluation, we must build our collective capacity to do systems-level work, across the spectrum of prevention. For example, to have significant impact on the social determinants of health of young families, we must address local, state and federal policies that affect children and families. To do this, we must build our collective capacity to advocate for families and work with policy makers to craft appropriate legislation.

To begin to understand collective capacity, the Commission will design and implement a leadership/innovation/systems-change program — First 5 Napa Network — that builds upon the model designed for the statewide First 5 Network. The end result will be a greater ability for local Napa leaders to develop and execute local First 5 strategies, begin redesigning the local system of care, and create greater impact through innovation and collaboration.

Through this process, the Commission aims to develop and execute an evaluation plan that both informs and assesses the following systems-level outcomes:

- Increase connections between our community's leaders
- Increase leaders' capacity to become "system" leaders and to navigate diversity and complexity
- Increase leaders' networks and make them more diverse
- Increase leaders' capacity to use human centered design
- Develop new, innovative and effective systems-level projects and initiatives

#### Goal Area: Integrated Systems

Napa County has a seamless system of integrated and comprehensive quality programs and services to support the health and development of children prenatal to age 5 and their families.

Children prenatal through age 5 are prioritized by all decision-makers in Napa County.

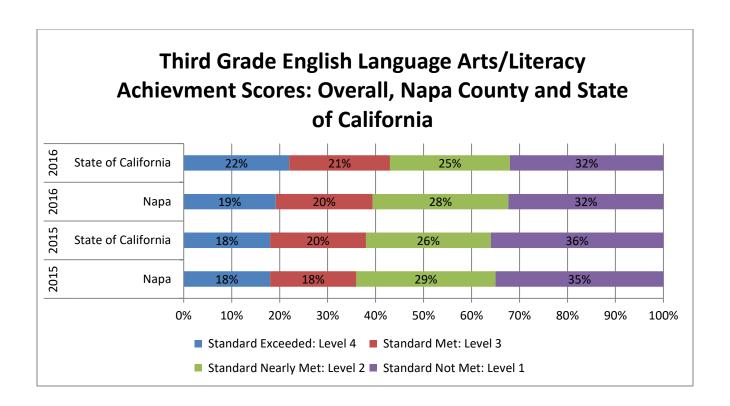
To begin to understand integrated systems, the commission is reviewing the trends in reading and math scores for 3<sup>rd</sup> grade students in Napa County as compared to the State of California. Aligning the indicators with other local, state and national initiatives increases the likelihood of creating a seamless system of integrated and comprehensive quality programs and services.

Over time, the commission has directed staff to track accessible data about the social determinants of health and Quality Counts in an effort to understand how the existing systems of services are supporting children and their families. Additional indicators for this area may be added after community and partner input.

# Third Grade English Language Arts/Literacy Achievement Scores xiv

The following graph shows the Third Grade English Language Arts/Literacy Achievement Scores for Napa County and California students during 2015 and 2016.

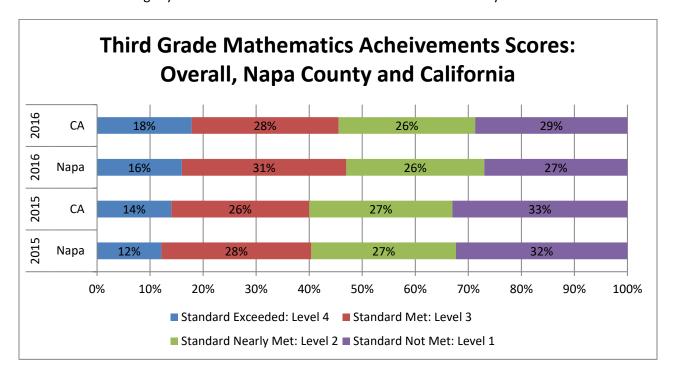
Generally, Napa County increased the percentage of students meeting the standard from 36% in 2015 to 39% in 2016. These rates are slightly lower than the rates for the State of California in each year (38% and 43% respectively).



#### Third Grade Mathematics Achievement Scores<sup>xv</sup>

The following graph shows the scores for Napa County and California during 2015 and 2016.

Napa County increased the percentage of students meeting the standard from 40% in 2015 to 47% in 2016. These rates slightly exceeded the rates for the State of California in each year.



Goal Area: Healthy Children

Children have access to preventative and primary care services.

Health and developmental needs are identified and treated early.

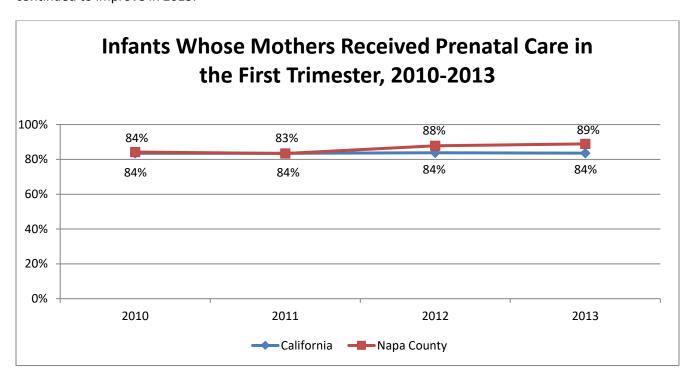
Children's health is vital to their readiness to achieve in school and in life. The commission continues to focus on preventing, identifying and treating health and development needs for all children 0-5. The indicator data for health is more robust than other areas and allows the commission a better view of where the needs are and how Napa County's children compare to the children across California.

The commission continues to review additional indicator data for this area and updates will be included in this document as more information is available.

#### **Prenatal Care**xvi

The commission is tracking the percentage of infants whose mothers receive prenatal care in the first trimester to better understand how the rate of care varies over time and how it compares to statewide averages.

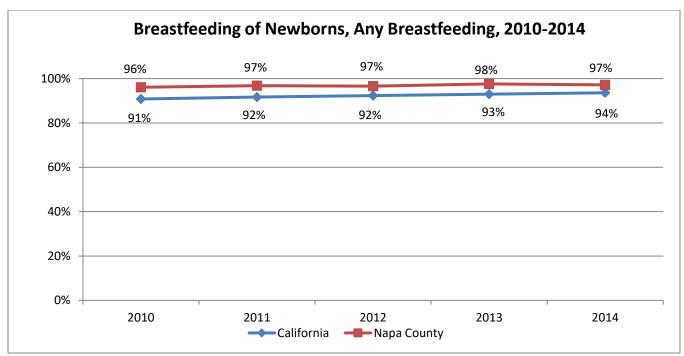
Beginning in 2012, Napa County's rate of prenatal care began to exceed the statewide average and continued to improve in 2013.

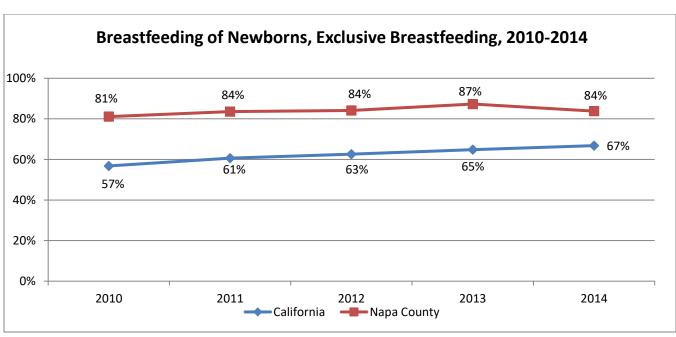


#### **Breastfeeding Rate**xvii

Two similar indicators are being monitored to understand the Breastfeeding Rate: "'Any Breastfeeding' which includes infants who breastfeed exclusively and those who breastfeed and receive formula. 'Exclusive Breastfeeding' includes those who only breastfeed."xviii Both of these indicators are collected when mothers are still at the hospital. Additional data about how breastfeeding is sustained will be added to this document as it becomes available.

On both indicators Napa County exceeds the statewide average. This is particularly evident in the rates of exclusive breastfeeding where the rate in 2014 exceeded the California rate by 17%. Although Napa County exceeded statewide rates of in hospital breastfeeding, ethnic disparities exist. In 2015, 87.6% of White women exclusively breastfed in the hospital compared to 83.6% of Hispanic women<sup>xix</sup>.



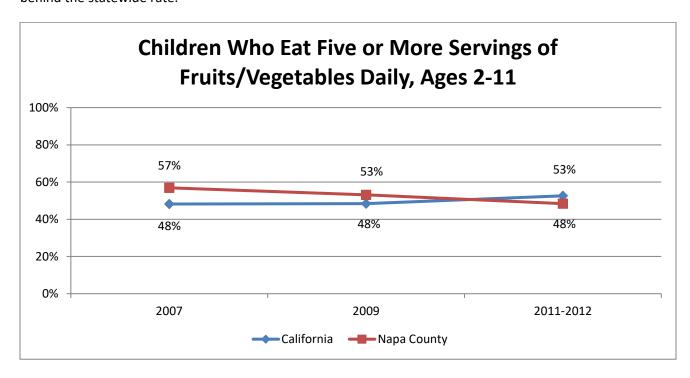


## Consumption of/Access to Fruits and Vegetables<sup>xx</sup>

Childhood nutrition and childhood obesity have been an interest and a funding focus for the commission at various points during the past 15 years. To better understand the impact of the efforts, the commission chose to monitor the percentage of children who are eating five or more servings of fruits and vegetables each day.

Note: This data is available for children age 2-11, and encompasses a larger population than the commissions' mandated focus on children 0-5.

Over the past five years, Napa County has shown a decline in the percentage of children who are participating in this healthy behavior. From 2009 to 2011-2012, the Napa County rate declined 5% to lag behind the statewide rate.

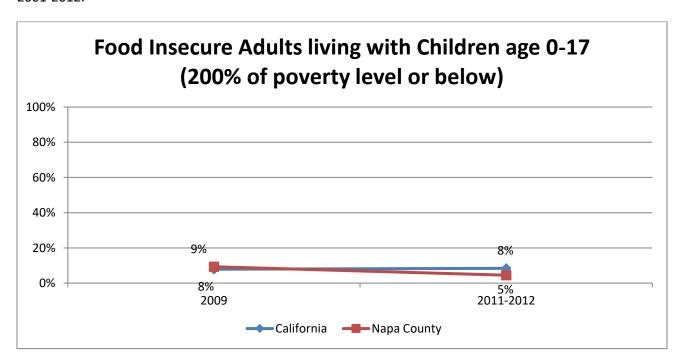


## Food Security<sup>xxi</sup>

The Health Policy Institute at UCLA tracks the percentage of "adults with children who had difficulty reliably putting food on the table in the past year. The question assumes that adults with children who are above 200% of the federal poverty level are food secure." xxiii

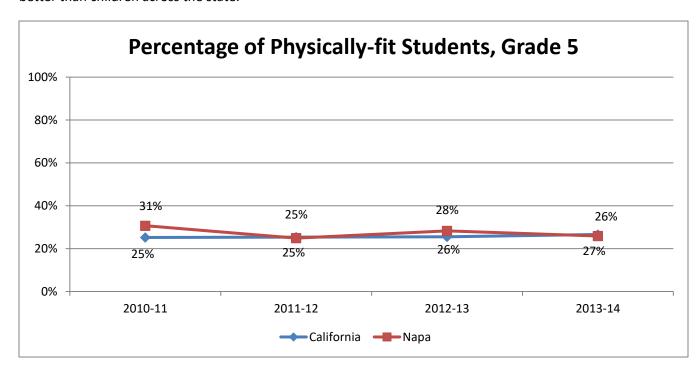
Note: This data is tracked for families with children 0-17 and encompasses a larger population than the commissions' mandated focus on children 0-5.

Food security improved slightly for families in the state of California and in Napa County from 2009 to 2011-2012. Conversely, 95% of Napa County families in this category did not report food insecurity in 2001-2012.



# **Childhood Fitness**xxiii

The indicator data available for this area is from the Fitness Gram test administered to students in 5<sup>th</sup> grade. Since 2010-2011, Napa County's fifth graders have generally performed as well as or slightly better than children across the state.



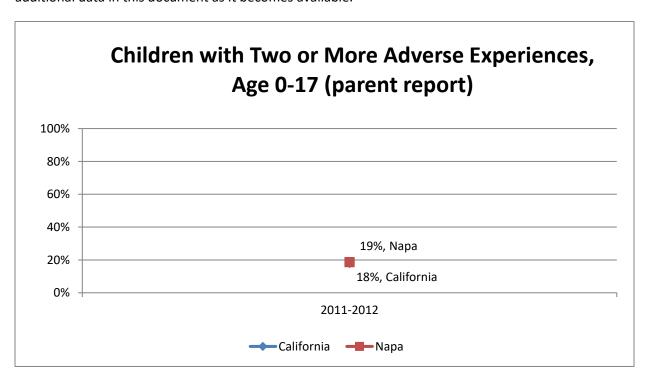
#### Adverse childhood experiences\*xiv

Adverse Childhood Experiences is a newly available indicator in response to the research that describes how profoundly these experiences negatively affect children's health and wellness over their lifetime. Adverse Childhood Experiences(ACEs) include the following:

- Socioeconomic hardship
- Divorce/separation of parent
- Death of parent
- Parent served time in jail
- Witness to domestic violence
- Victim of neighborhood violence
- Lived with someone who was mentally ill or suicidal
- Lived with someone with alcohol/drug problem
- Treated or judged unfairly due to race/ethnicity

Note: This data is tracked for families with children 0-17 and encompasses a larger population than the commissions' mandated focus on children 0-5.

The currently available data shows that parents in Napa County and in California are about equally likely to report their child has had two or more of the Adverse Experiences. Similarly adults in Napa County and California report having two or more Adverse Experiences at fairly equal rates, 42% and 40% respectively<sup>xxv</sup>. The commission is also interested in how ACEs impact parenting and will include additional data in this document as it becomes available.



Quality early care and education options are available for families with diverse needs.

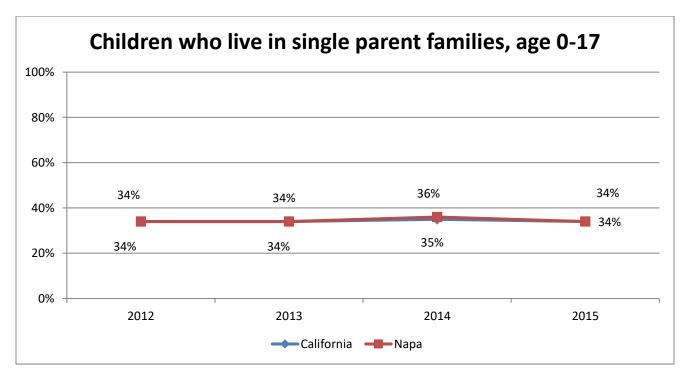
From its inception, First 5 Napa County has been an advocate for the availability of quality early care and education. It is at the foundation of preparing children for success in school and in life. The Commission has chosen two indicators to monitor to better understand the quality early learning environments and anticipates additional indicator data once the Quality Counts program is fully implemented.

# Percentage of children who live in single parent homes xxvi

The Commission recognizes that "children growing up in single-parent families typically do not have the same economic or human resources available as those growing up in two-parent families." As this situation has been shown to influence children's success in school, the indicator is included for consideration and discussion.

Note: This data is tracked for children 0-17 and encompasses a larger population than the commissions' mandated focus on children 0-5.

Since 2012, the percentage of Napa County children who live in single parent families had remained steady and almost identical to the statewide average.



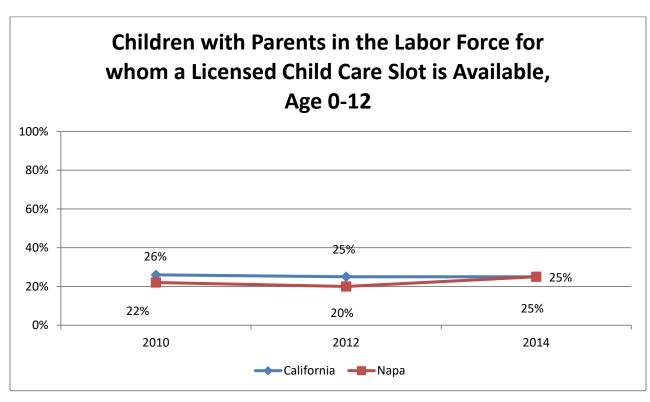
# Access to Child Care xxviii

Finding quality child care that is available during work hours is a struggle for many parents. Estimates about the supply of licensed child care shows that there is one slot available for every four children needing care.

The commission hopes to expand the indicator data in this area to include information on how parents pay for care and how poverty and access to child care are linked. Additional indicators and discussion will be added to this area as this data becomes available.

Note: This data is tracked for children 0-12 and encompasses a larger population than the commissions' mandated focus on children 0-5.

In 2010 and 2012, the availability of licensed care in Napa County dipped slightly below the statewide average. Though it was reported as on par with the overall state availability in 2014, the data indicates that overall there is a continued need for more availability.



# Goal Area: Strong Families

Parents understand, adequately support and advocate for their child's health and development.

The commission believes that parents are their children's first and most important teachers. Understanding how to best support parents in their role is often stymied by a lack of quality data to track over time.

The commission has decided it is best to further explore the best indicator data for this area and updates will be included in this document as more information is available.

#### **Action Plan 2019-2020**

The Commission's work is to understand the needs of children 0-5 and their families in Napa County and to develop an ongoing and evolving response. The commission is continually learning from the community and its partners and always working to act on what is most important to children 0-5 and their families.

As First 5 Napa County engages in efforts to build Collective Capacity and support Integrated Systems, the following implementation and evaluation activities are anticipated for 2019-2020.

- 1. First 5 Napa Network Implementation: First 5 Napa County along with With/In Consulting will host the F5NN pilot cohort program in Winter/Spring 2019. The cohort will convene a total of 8 days and will work in design teams to develop innovative projects that address 4-5 design challenges (system-level challenges identified by cohort participants that broadly impact children 0-5 and their families in our community). In 2019-2020, First 5 Napa County and With/In Consulting will prepare for, recruit leaders for, and implement the second F5NN program.
- 2. Connection Mapping: First 5 Napa County will conduct connection mapping between cohort members and a select group of identified community leaders, so we can track connection improvement across the next several years. A Connection Mapping Survey was conducted in January 2019 and those results will be shared with the First 5 Commission and First 5 California in Fall 2019. Connection Mapping surveys will be collected at least once a year and continue several years beyond the final cohort of the F5NN to see the long-term impact of the F5NN.
- 3. Pilot F5NN Participant Qualitative Interviews: First 5 Napa County will conduct qualitative interviews with a sample of the pilot leadership cohort participants. Through qualitative interviews, we will obtain an in-depth understanding of what community leaders gained from participating in the F5NN and how they plan on sharing that with the community. The results from these interviews will be shared with the First 5 Commission and First 5 California/Association in Fall 2019.
- **4.** Empathic Interviews: As part of each F5NN cohort's program, they will formulate design challenges, form design teams, and engage in empathic interviews with individuals that represent the population they hope to affect (e.g., immigrant residents, postpartum mothers, parents of children 0-5). These interviews will provide important qualitative information about the challenges these community members currently face in Napa County.
- **5.** Design Challenge Projects: First 5 Napa County will fund up to 5 design projects in 2019-2020 with Prop 10 funding. These design projects will be innovative projects to improve Napa County's community capacity and integrate the systems that affect children 0-5 and families. The projects will vary in scope and size depending on what is designed during the pilot F5NN program.

- **6.** Develop First 5 Napa County as the backbone organization to the First 5 Napa Network: First 5 Napa County will develop a framework for being a backbone organization and begin taking steps to: 1) redesign the First 5 Napa website to facilitate effective communications across partners; 2) provide a strong partnership identity (e.g., shared language, logos, symbols); 3) drive long-term momentum and capacity building; 4) amplify current community initiatives; and 5) support both the people and the projects that are part of the F5NN.
- **7.** Quality Counts Early Childhood Education Ratings: In anticipation of IMPACT 2.0, Quality Counts will rate 20 early childhood sites in 2019-2020 fiscal year.
- **8.** Quality Counts Provider Surveys: Each year, providers participating in the Quality Counts Program will participate in a survey that assesses the support they are receiving from coaches through the program. Surveys are provided in both English and Spanish and are available online or hard copy. These surveys also provide Quality Counts program staff and coaches with valuable information about what training, professional development, and support is desired by Quality Counts providers.

# **Conclusion**

Since its inception, First 5 Napa County's most successful efforts have been in partnership with the dynamic and committed individuals who serve children 0-5 in the community. The Commission is looking forward to the conversations that will take place with parents, with the community and with those who work with, advocate for and support children 0-5.

The Commission anticipates continued successes and progress in the creation of a seamless system support for the health and development of children prenatal to age 5 and their families.

This Community Plan is a continuation of that work and an invitation those who are also committed to the health and well-being of children 0-5 and their families. Over the next five years, the commission will begin conversations with additional partners and will develop opportunities to expand the number of individuals working on behalf of children 0-5 and their families.

We look forward to working with you.

- <sup>xi</sup> U.S. Census Bureau. (n.d.). *Place of Birth by Nativity and Citizenship Status, Napa County 2011-2015 American Factfinder, American Community Survey 5-year estimates*. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\_15\_5YR\_B05002&prodTy pe=table.
- xii U.S. Census Bureau. (n.d.). *Place of Birth for the Foreign-Born Population, Napa County 2011-2015 American Factfinder, American Community Survey 5-year estimates*. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\_15\_5YR\_B05006&prodTy pe=table.

xiv California Assessment for Student Performance and Progress (CAASPP) Results. Accessed at http://caaspp.cde.ca.gov/. Retrieved on January 30, 2017. *Note: The third grade reading and math scores are a new assessment that began in 2015. Scores are only available for 2015 and 2016 at this time.*xv lbid.

xvii California Dept. of Public Health, Newborn Screening Program, Breastfeeding Data (Apr. 2016). As cited on www.kidsdata.org, a program of the Lucile Packard Foundation for Children's Health. Retrieved on January 30, 2017.

<sup>&</sup>lt;sup>1</sup> US Census data, Redistricting Data, Table 1-Total Population Change: 2000 and 2010. Accessed at http://www.dof.ca.gov/research/demographic/state census data center/census 2010/view.php, 6/21/11.

<sup>&</sup>quot;State of California, Department of Finance, E-1 Population Estimates for Cities, Counties and the State with Annual Percent Change — January 1, 2015 and 2016. Sacramento, California, May 2016.

As cited on kidsdata.org, California Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 1990-1999, 2000-2010, 2010-2060 (Jun. 2015); U.S. Census Bureau, Current Population Estimates, Vintage 2014 (Jun. 2015).

iv California Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 1990-1999, 2000-2010, 2010-2060; California Dept. of Public Health, Center for Health Statistics, Birth Statistical Master Files; Centers for Disease Control & Prevention, Natality data on CDC WONDER; Martin, J. A., et al. (2015). Births: Final data for 2013. National Vital Statistics Reports, 64(1) (Mar. 2015). As cited on www.kidsdata.org, a program of the Lucile Packard Foundation for Children's Health. Retrieved on December 9, 2016.

<sup>&</sup>lt;sup>v</sup> Children in Poverty (Regions of 65,000 residents or More) U.S. Census Bureau, American Community Survey (Sept. 2015). As cited on www.kidsdata.org, a program of the Lucile Packard Foundation for Children's Health. Retrieved on January 30, 2017.

vilbid, from the data definition.

viiSelf-Sufficiency Standard Tool for California, Accessed at http://www.insightcced.org/tools-metrics/self-sufficiency-standard-tool-for-california/. Retrieved February 5, 2017.

ix DataQuest, (CA Department of Education), Napa County 2009-2010 and 2015-2016, accessed December 9, 2016.

<sup>\*</sup> State of California, Department of Finance. Report P-3 State and County Total Population Projections by Race/Ethnicity and Detailed Age – 2010 through 2060, Sacramento, California, July 2013.

xiii Ibid

xvi California Dept. of Public Health, Center for Health Statistics, Birth Statistical Master Files (Mar. 2015). As cited on www.kidsdata.org, a program of the Lucile Packard Foundation for Children's Health. Retrieved on January 30, 2017.

xviii Ibid, from the data definition.

xix Napa County Health and Human Services, Public Health, 2015.

<sup>&</sup>lt;sup>xx</sup> UCLA Center for Health Policy Research, California Health Interview Survey. Accessed at http://www.chis.ucla.edu/. As cited on www.kidsdata.org, a program of the Lucile Packard Foundation for Children's Health. Retrieved on January 30, 2017.

xxi UCLA Center for Health Policy Research, California Health Interview Survey. Accessed at http://www.chis.ucla.edu/. Retrieved on January 30, 2017.

- <sup>xxiii</sup> Let's Get Healthy California, "Percentage of Physically-fit Students (as Defined by Fitness-gram Test)", Accessed at https://letsgethealthy.ca.gov/goals/healthy-beginnings/increasing-childhood-fitness/. Retrieved on January 30,2017.
- xxiv Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health, Advancing data-in-action partnerships for children and children with special health care needs in California counties and cities using synthetic estimation from the 2011/12 National Survey of Children's Health and 2008-2012 American Community Survey (Jun. 2016). As cited on www.kidsdata.org, a program of the Lucile Packard Foundation for Children's Health. Retrieved on January 30, 2017.
- xxv Center for Youth Wellness, San Francisco, "A Hidden Crisis," November 2014.
- xxvi Population Reference Bureau, analysis of data from the U.S. Census Bureau, Census 2000 Supplementary Survey, 2001 Supplementary Survey and 2002 through 2015 American Community Survey (ACS). As cited by kidscount.org. Accessed at http://datacenter.kidscount.org/data/tables/106-children-in-single-parent-families#detailed/2/6/false/573,869,36,868,867/any/429,430/. Retrieved on January 30,2017. xxvii Ibid, from Indicator Context.
- xxviii California Child Care Resource and Referral Network, California Child Care Portfolio. As cited on kidsdata.org. Retrieved on January 30, 2017.

xxii Ibid, from data definition.