Building a Strong Foundation for Our Future

2011–2012

First 5 California Annual Report

FIRST 5 CALIFORNIA℠

First 5 California 2011–2012 Annual Report

health ■ education ● services ▲ support

FIRST 5 CALIFORNIA™

Building a Strong Foundation for Our Future

Message from the Executive Director

First 5 California envisions our state as a place where all children show up to kindergarten ready to learn at their highest potential.

Fourteen years ago, the voters of California made the sound decision to dedicate a steady stream of resources to invest in our youngest children. We are fortunate to live in a state that believes that as a matter of public policy we should invest in programs, systems and other solutions to provide every child a similar opportunity to arrive at the school house door intellectually, socially and developmentally equipped to learn.

Since the voters passed Proposition 10 in 1998, the State and county commissions have built a network of critical services to meet the needs of children ages 0 to 5 and their families—especially those most at risk. That network has mattered more than ever during the economic recession. Not only have the unemployment trends left more families without a wage-earning adult, but the seemingly irreparable state budget deficit has left many traditional safety net services unfunded. In these dire times, the strength, capacity and resourcefulness of the First 5 movement has become more relevant than ever in identifying and supporting children and families that might otherwise fall through the cracks.

Today, First 5 California's momentum is fueled by its Child, Parent and Teacher Signature Programs. Collectively, these programs are an investment in improving the home and early learning environments to improve each child's chances of success in school. Recognizing the inextricable connection between healthy young minds and bodies, the State and local commissions invest heavily in developmental screenings and services, as well as nutrition and child developmental education. Collectively, these efforts are strategically designed to increase family resiliency, especially in our most at-risk communities.

As these Signature Programs reach full implementation over the next year or so, the State Commission will be refreshing its strategic plan based on data designed to tell us what works, and with an honest assessment of the greatest challenges facing our young children today.

First 5 California is honored to be the steward of the resources dedicated under Proposition 10 and is dedicated to its mission to become the unequivocal voice for children ages 0 to 5. We look forward to our deepening partnership with the 58 county commissions as we press for quality early childhood education and family resources—to make sure that the youngest Californians among us thrive.

Reneé Webster-Hawkins
Interim Executive Director, First 5 California

> **California's unequivocal voice for children 0 to 5 to ensure greater equity in their readiness for school.**
>
> *— First 5 California Mission Statement*

Our Vision

All children in California enter school ready to achieve their greatest potential.

— First 5 California Vision Statement

Table of Contents

Getting California's Young Children Ready for School . . . 7

- Leadership: First 5 California . . . 7
- Structure: State and County . . . 7
- Partnerships: Working Together . . . 8
- Accountability: Funding and Audit Results . . . 8

Serving California's Young Children, Parents and Teachers . . . 11

Child Signature Program . . . 13

- Child Development Focus . . . 13
- Launching the Child Signature Program . . . 13
- Power of Preschool . . . 14
- School Readiness . . . 16
- Educare . . . 18
- Developmental Screenings and Services . . . 19

Teacher Signature Program . . . 21

- Child Development Focus . . . 21
- CARES Plus . . . 21

Parent Signature Program . . . 26

- Family Functioning and Child Health Focus . . . 26
- *Kit for New Parents* . . . 27
- Hands-On Health Express . . . 28
- Parent Education Website and Social Media . . . 29
- Smoking Cessation . . . 30

First 5 County Commission Program Result Areas . . . 33

- Family Functioning . . . 33
- Child Development . . . 36
- Child Health . . . 38
- Systems of Care . . . 40
- Summary . . . 41

Appendix A: First 5 California Result Areas and Services . . . 42

References . . . 44

California State Controller's Annual Report on Disk . . . 45

List of FY 2011/12 Exhibits

Exhibit 1: First 5 California Commission Members FY 2011/12 . . . 7

Exhibit 2: First 5 California Children and Families Commission Funds–Allocation of State Portion . . . 8

Exhibit 3: Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 Across Result Areas . . . 11

Exhibit 4: Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 2011/12 by Result Area . . . 12

Exhibit 5: Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 2011/12 by Provider . . . 12

Exhibit 6: California Smokers' Helpline–Education Level of Callers in FY 2011/12 . . . 30

Exhibit 7: California Smokers' Helpline–Race/Ethnicity of Callers in FY 2011/12 . . . 31

Exhibit 8: Family Functioning–Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 by Service . . . 33

Exhibit 9: Family Functioning–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Service . . . 34

Exhibit 10: Family Functioning–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Provider . . . 34

Exhibit 11: Child Development–Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 by Service . . . 36

Exhibit 12: Child Development–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Service . . . 37

Exhibit 13: Child Development–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Provider . . . 37

Exhibit 14: Child Health–Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 by Service . . . 38

Exhibit 15: Child Health–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Service . . . 39

Exhibit 16: Child Health–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Provider . . . 39

First 5 California supports parents as a child's first teacher. Parents who read to their toddler every day can help their child develop a lifelong love of learning.

Getting California's Young Children Ready for School

Leadership: First 5 California

In 1998, California voters passed Proposition 10—the California Children and Families Act (the Act)—and declared the importance of investing in a better future for California's youngest children. For the past 14 years, the First 5 California Children and Families Commission (First 5 California) has established quality standards and invested in the development of programs and services emphasizing improvement in early education, child care, social services, health care, research and community awareness.

The vision of First 5 California is for all children in our state to enter school ready to achieve their greatest potential, and the mission of First 5 California is to be recognized as California's unequivocal voice for children 0 to 5 to ensure greater equity in their readiness for school.

Structure: State and County

The Act established an independent seven-member state-level Commission appointed by the California Legislature and Governor, with the Secretary of the California Health and Human Services Agency serving as an ex-officio member. The Commission appoints the First 5 California Executive Director. As this annual report went to press, Reneé Webster-Hawkins was serving as Interim Executive Director. The Commission's new Executive Director, Camille Maben started in mid December.

The Act also authorized the establishment of 58 First 5 county commissions and required that each develop and update a local strategic plan based on the assessed needs of children and families in the county. The members of each First 5 county commission are appointed by the county board of supervisors. Each county commission includes two members selected from county health and local health-related service agencies, as well as one member of the appointing county board of supervisors. Members can also be selected from other child development organizations within the county.

First 5 California prepares guidelines to assist the county commissions in the update and execution of their strategic plans. First 5 California also collects and reviews each county commission's annual report, and includes county-level data in this state-level annual report.

EXHIBIT 1: First 5 California Commission Members FY 2011/12

Commission Members:

Jennifer Kent, Chair
Appointed by Governor

Patrick Duterte, Vice Chair
Appointed by Governor

Molly Munger, Vice Chair
Appointed by Speaker of the Assembly
(Term expired fall 2011)

Magdalena Carrasco
Appointed by Governor

Maria Minon, M.D.
Appointed by Governor
(Term expired fall 2011)

Conway Collis
Appointed by Speaker of the Assembly

Kathryn Icenhower
Appointed by Speaker of the Assembly

Joyce Iseri
Appointed by Senate Rules Committee

Casey McKeever
Appointed by Senate Rules Committee

Ex-Officio Member:

Diana Dooley
Secretary of the California Health and Human Services Agency

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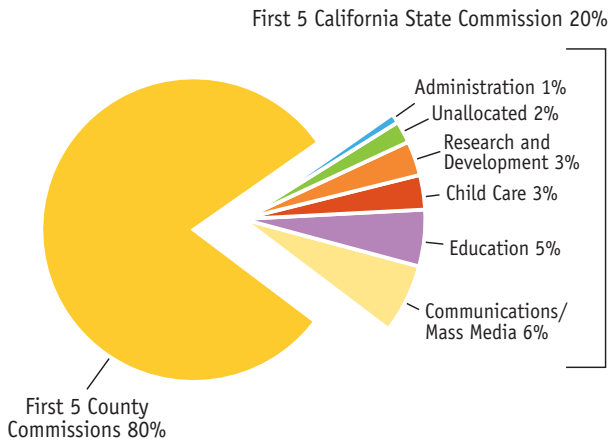
Partnerships: Working Together

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

In sum, while the Act directs the State and county commissions to achieve common goals and outcomes for children aged 0 to 5, it empowers each individual commission to develop its own strategic plan and programs to accomplish those goals according to the needs of local children and families. At the same time, as this report illustrates, First 5 California and the county commissions work as partners to implement the statewide Signature Programs and push for common policy goals.

EXHIBIT 2: First 5 California Children and Families Commission Funds—Allocation of State Portion



Source: Health and Safety Code Section 130105

Accountability: Funding and Audit Results

Under the Act, the State Board of Equalization collects an excise tax levied on all tobacco products and deposits the revenue into the California Children and Families Trust Fund, allocating 20 percent to First 5 California and 80 percent to county commissions. In FY 2011/12, First 5 California received $93.4 million.

The amount of funding allocated annually to each county commission is based on the annual number of births in the county relative to the total number

in the state. Each county must prepare an annual independent audit subject to guidelines prepared by the State Controller's Office. The counties invest their dollars in locally designed programs, as well as in First 5 California's statewide Signature Programs as match funding. First 5 county commissions use their funds to support local programs in four result areas:

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

First 5 California's Administrative Services Division, Contract and Procurement Division, and the Information Technology Office provide staff support for the following operations and systems:

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

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

The California Department of Finance, Office of State Audits and Evaluations, conducted an audit of the First 5 California financial records for FY 2011/12. Submitted in November 2012, this report on the California Children and Families Trust Fund was free of any negative findings.

The State Controller's Office conducts an annual review of the 58 county commissions' independent audits. In November 2012, the Controller published its review of the counties' audits for FY 2010/11, and that review summarized several findings contained in the local audits, but did not deem any of the findings significant enough to withhold funding. See the full audit on attached disk.

Partnerships and Leveraging:
Promote collaboration with public and private partners, building on existing systems.

— First 5 California Guiding Principle

Professionally trained early care providers create high-quality learning environments to stimulate children and support their readiness for kindergarten.

Serving California's Young Children, Parents and Teachers

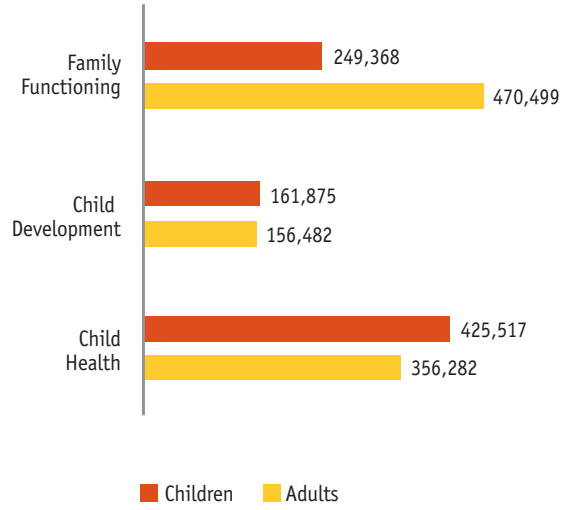
First 5 California tracks progress in four key result areas to support evidence-based funding decisions, program planning and policies:

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

These result areas comprise a framework for reporting and assessing early childhood outcome data. Appendix A includes a complete description of the result areas and services for First 5 California and the 58 county commissions. This data reporting framework provides a statewide overview of number, type and costs of services provided to children and adults for a particular fiscal year.

Stakeholders can use this information as one source to determine impact and resource allocation from First 5 statewide.* Exhibit 3 contains the total number of services provided to children ages 0 to 5 and adults in FY 2011/12 for the three result areas of Child Development, Child Health and Family Functioning.

EXHIBIT 3: Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 Across Result Areas



Source: County Demographic Worksheet, November 2012

Photo courtesy of First 5 LA and Hope Street Family Resource Center. ▶

* Data reported in the text and all exhibits does not include data from First 5 Shasta County.

The total expenditures ($460,410,265) for children ages 0 to 5 and adults receiving services in FY 2011/12 by result areas and providers are presented in Exhibits 4 and 5, respectively.

One result area, Systems of Care, differs from the others. It consists of programs and initiatives that support program providers in the other three result areas. In FY 2011/12, 33 percent of expenditures went toward community strengthening efforts; 38 percent toward service, outreach, planning, support and management; and, 30 percent toward provider capacity building, training and support.

> **Public Support: Build a foundation of support for a comprehensive, integrated and holistic early childhood development system.**
>
> *— First 5 California Guiding Principle*

EXHIBIT 4: Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 2011/12 by Result Area

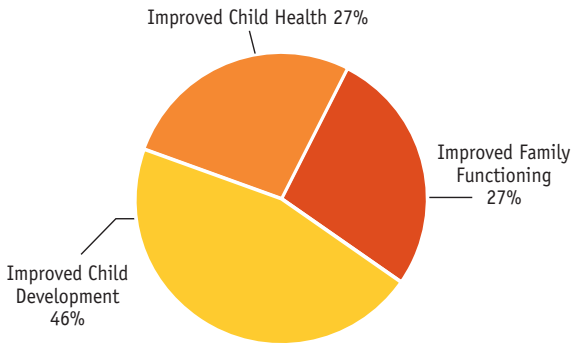
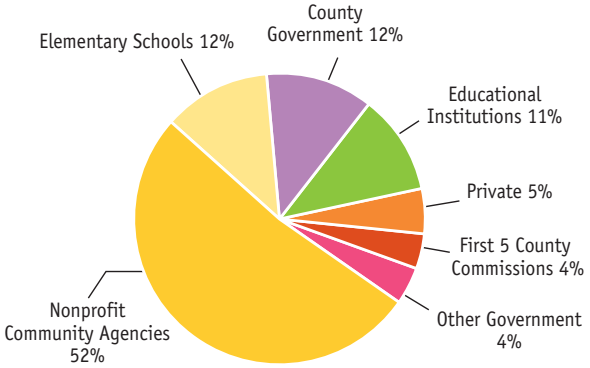


EXHIBIT 5: Total Expenditures for Children Ages 0 to 5 and Adults Receiving Services in FY 2011/12 by Provider



Source: County Revenue and Expenditure Summary, November 2012

Child Signature Program

Child Development Focus

The cornerstone of First 5 California's strategy is to invest in quality preschool programs. National research indicates that high-quality preschools have a significant and positive impact on early childhood outcomes for disadvantaged and at-risk children with regard to cognitive, language and social development.[1] Approximately 50 percent of California's disadvantaged and at-risk 3- and 4-year-old children do not attend preschool, and even fewer attend high-quality preschool.[2] High-quality preschools go beyond the basics to provide opportunities for evidence-based learning activities, along with the development of nurturing and supportive relationships with teachers and caregivers.

Scientific studies conclude that high-quality preschool programs improve school readiness and lead to better academic achievement in elementary school.[3] Cost-benefit and return on investment analyses demonstrate that investments in high-quality preschool generate substantial social and economic payoffs by reducing persistent social costs, such as unemployment, drug or alcohol abuse, and crime.[4]

Launching The Child Signature Program

In October 2011, First 5 California launched the Child Signature Program as a consolidation of the State Commission's previous early learning programs. The purpose of this three-year strategic investment is to increase the quality of early child education and learning centers across the state. FY 2011/2012 served as a time for program development to design a research-based early learning program focused on:

- Instructional strategies and teacher-child interactions
- Social-emotional development
- Parent involvement and support

In Spring 2012, First 5 California issued the first two of three requests for applications for counties to participate in this statewide program. Program implementation will begin and be reported on in FY 2012/2013.

Power of Preschool

Begun in 2003, First 5 California's Power of Preschool (PoP) program is a high-quality, free, voluntary, part-day preschool for 0 to 5 year olds, across eight California counties. These counties are Los Angeles, Merced, San Diego, San Francisco, San Joaquin, Santa Clara, Ventura and Yolo. PoP actively reduces the achievement gap and improves school readiness among disadvantaged and underserved communities.

Between 2005 and 2011, First 5 California invested $128 million in PoP demonstration programs. Data from all PoP sites in FY 2011/12 indicate that:

- Preschools are high quality: classroom environmental assessments rate an average of 5.8 out of a possible score of 7. Seven of the eight PoP counties reported average scores above 5 using the Early Childhood Environment Rating Scale instrument.
- Teachers are well qualified: 62 percent of Master Teachers have earned a bachelor's degree or higher.

PoP requires participating counties to use the Desired Results Developmental Profile 2010 (DRDP 2010)—a comprehensive assessment tool, to evaluate the progress of students. Ideally, the tool demonstrates that children progress through five

Power of Preschool actively reduces the achievement gap and improves school readiness among disadvantaged and underserved communities.

DRDP developmental levels, from lowest (Not Yet at First Level) to highest (Integrating). In FY 2011/12, PoP counties performed DRDP assessments during fall and spring for 22,252 of 26,381 children.

PoP in Yolo County included continued and increased participation in CSEFEL (Center on the Social Emotional Foundations for Early Learning). The implementation of CARES Plus—First 5 California's Teacher Signature Program—provided additional resources for teachers in Yolo County and increased opportunities for parent involvement. The teaching method promoted by PoP and CSEFEL plans for fewer and smoother transitions, and uses positive behavior support to replace disruptive behavior thus reducing classroom distractions. This led to happier, more content children and teachers who felt that they were making a real difference. Teachers utilizing this method had more efficient classrooms, more time to plan

their lessons, and more interaction and learning opportunities with students. Children with special needs were integrated into this method effortlessly. Rather than focusing on the individual child and what they may lack to function in the classroom, the CSEFEL model includes tools to integrate all children and helps identify where additional supports can be provided. This year, Yolo County was able to offer two separate CSEFEL Parent Training sessions which were well attended and appreciated by parents. As the year progressed, staff prepared the application and the plan to roll out the enhanced PoP Program, now known as the Child Signature Program. They collaborated with members of the community to reflect over the past seven years, and created a vision for the future of the program.

First 5 San Francisco's PoP program has used the Classroom Assessment Scoring System (CLASS™) to rate the quality of adult-child interactions in its preschool classrooms for several years now. It has been adopted as a cornerstone of the county's quality rating and improvement system because scientific research has shown that children attending classrooms that rate highly on the CLASS™ tool have higher academic achievement in school. In addition to helping fund assessments, PoP has funded professional development and coaching for teachers, including training specifically aimed at improving adult-child interactions. In FY 2011/12, as part of the county's local evaluation, classrooms were randomly assessed on the CLASS™, and the gains since 2008 were impressive. San Francisco's PoP programs improved on 9 out of the 10 CLASS™ dimensions—significantly outpacing state and national averages. Emotional support scores improved to 6.1 on a 7-point scale (5 percent increase) and classroom organization scores improved to 5.5 (4 percent increase). Most importantly, instructional support scores, which are typically quite low statewide and nationally but most correlated with student achievement, improved to 3.4 (28 percent increase). With continued focus on adult-child interactions in the county, as well as State support through the Child and Teacher Signature Programs, the county anticipates that CLASS™ scores will continue to improve in the coming years.

The success of PoP is widely recognized. In December 2011, the California Department of Education received $52 million as one of nine states awarded with a federal grant under the Race to the Top Early Learning Challenge. California's successful application highlighted programs such as First 5 California's Power of Preschool program and Teacher Signature Program to demonstrate that the state is already capable of implementing quality early learning programs.

School Readiness

School readiness encompasses the cognitive, social, physical, emotional and supportive elements internal and external to a child that facilitate that child's ability to enter kindergarten ready to learn. Equally important are the child's basic literacy and math skills, as it has been demonstrated that children who enter school with basic knowledge of math and language skills are more likely to experience academic success, attain higher levels of education and obtain employment.

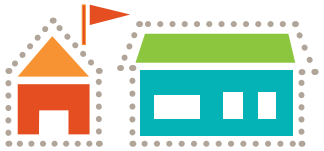
Kindergarteners who enter school without these skills are likely to remain behind as they move through the education system, making it imperative that school readiness and achievement gaps be addressed as early as possible.

First 5 California's School Readiness program ended in FY 2011/12, with the sunset of its funding authorization. After a decade of supporting local programs statewide in preparing children to be successful students, School Readiness phased out gradually during its last 2 to 3 years. The number of counties with funding allocations for School Readiness decreased from 38 in FY 2010/11 to 11 in FY 2011/12. This reduction in School Readiness programs accounts for the sizable decrease in number of services provided to children and adults reported in FY 2011/12.

It has been demonstrated that children who enter school with basic knowledge of math and language skills are more likely to experience academic success, attain higher levels of education and obtain employment.

With a focus on low-performing schools, First 5 California's School Readiness program has improved the ability of families, schools and communities to prepare children for kindergarten since 2001. School Readiness programs targeted early learning and kindergarten transition; parent education and family strengthening; health screenings and treatment; and communication between early care settings and elementary schools. Parents were expected to be highly involved in School Readiness programs, since parents are regarded as a child's first and most important teacher.

With the end of the School Readiness program, the best practices from that program are being drawn into and enhanced in the Child Signature Program.



Preschool attendance is correlated with improved kindergarten readiness, and kindergarten readiness is associated with long-term achievement.

Educare

Children in low-income families typically enter kindergarten 12 to 14 months behind the national average in pre-reading and language skills. In 2011, California was ranked 33rd in the nation for the percentage of children in poverty.[5] According to the Annie E. Casey Foundation, 48 percent of children live in households with incomes below 200 percent of the federal poverty level. Economically disadvantaged children often grow up in environments lacking in cognitive, social and emotional stimulation, and support.

The Educare model was first established in 2000 to reverse these trends. Educare promotes school readiness by implementing programs that reduce the achievement gap in children ages 0 to 5. Educare targets disadvantaged children and their families, including children from low socioeconomic backgrounds who are less likely to attend high-quality preschool programs, if they attend preschool at all. The Educare model aims to strengthen the abilities of parents to support their child's learning when they enter school. Currently, there are 17 Educare centers in 11 states and the District of Columbia.

> **Child Centered: Focus all programs and activities on the needs of California's children.**
>
> *— First 5 California Guiding Principle*

The Educare approach for early education is comprehensive and research-based. Evidence shows that children who experience Educare for a full five years arrive at school performing on par with average kindergarteners, regardless of their socioeconomic standing. Educare children have more extensive vocabularies and are better able to recognize letters, numbers and colors than their peers.[6]

First 5 California is part of a public-private partnership that is committed to establishing California's first Educare school in Santa Clara County, followed by a second site being developed in Los Angeles County.

Educare of California at Silicon Valley (ECSV) is a broad partnership of national and local philanthropists, First 5 Santa Clara, the Silicon Valley Leadership Group, the Santa Clara County Office of Education, the Franklin-McKinley School District, community-based organizations, public entities and public policy makers. First 5 California Commissioner Magdalena Carrasco is a member of the ECSV Governing Board. Scheduled to be fully operational in September 2014, ECSV will serve approximately 200 children ages 0 through 5. The school will also include a Family Resource Center with comprehensive services including housing, immigration, counseling, employment assistance, health services and other supports.

Developmental Screenings and Services

Large developmental disparities exist among children ages 0 to 5 across California. Such an early readiness gap threatens later learning, development and health. The Act was intended to create programs that support disadvantaged children in California and to overcome the socioeconomic barriers that limit children's opportunities for success.

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

During FY 2011/12, First 5 California contributed $50 million to the California Department of Developmental Services to fund new developmental screening and intervention services for 17,016 infants and toddlers ages 0 to 2 entering the Early Start Program. This funding supported early assessments and intervention services provided by each child's Individualized Family Service Plan (IFSP) team. For example, assistive technology; audiology; family training, counseling and home visits; occupational and physical therapy; speech and language services; and case management. These services are provided through 21 regional centers throughout California, many of which coordinate locally with First 5 county commissions.

Teachers and care providers with higher education levels and specialized training have higher quality interactions with children resulting in positive effects on learning.

Teacher Signature Program

Child Development Focus

Teacher quality is a powerful contributor to children's learning and success. Children are supported and developed through rich teacher-child interactions from educators with the knowledge and skills to identify and support the needs of specific groups of children, including English learners. Research shows that early care providers with higher education levels and specialized training have higher quality interactions with children resulting in positive effects on learning.[7] Teacher quality is so critical that a growing number of states and the federal Head Start program have mandated that early childhood educators attain more professional development and training in the field.

High-quality programs that train and retain qualified early care providers create learning environments that stimulate and support the child through formative developmental stages. One study indicates that only 13 percent of California's low-income children are in high-quality early learning programs that teach advanced thinking skills and language development.[8]

High-quality programs that train and retain qualified early care providers create learning environments that stimulate and support the child through formative developmental stages.

CARES Plus

The Comprehensive Approaches to Raising Educational Standards (CARES) Plus program is First 5 California's Teacher Signature Program. Launched in 2010, it is designed to increase the quality of early learning programs for children ages 0 to 5 by supporting the professional development of the early learning workforce. CARES Plus is an enhancement of the original CARES Program (2000–2008) that gained national recognition from Head Start, Zero to Three, and the Center for Law and Social Policy during its tenure.

CARES Plus offers professional development opportunities in both English and Spanish for early learning educators. These opportunities include community college courses, access to online best practice learning sessions, a video library and one-on-one coaching. The primary goals of CARES Plus are to:

- Improve the effectiveness of early educators.
- Positively impact the learning and developmental outcomes of young children.
- Reduce turnover among early educators.

Through CARES Plus, First 5 California has incorporated the ***CLASS™ (Classroom Assessment and Scoring System)***, a menu of validated professional development tools for early educators developed by the University of Virginia:

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

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

One of the strengths of the Comprehensive Approaches to Raising Educational Standards (CARES) Plus model is building on local collaborations with community colleges.

CARES Plus includes a research design that will compare the assessments of teachers who either take professional development courses, participate in higher education courses or participate in the coaching pilot (MTP). This past year, more than 4,200 teachers in 34 counties participated in CARES Plus, effectively reaching more than 80,000 children. In a survey conducted by First 5 California, more than 80 percent of the teachers who responded reported that the CARES Plus program enhanced their professional development options; would enable them to stay in the field of early childhood education; and that the program would have a positive impact on the children in their care.

In addition to professional development and coaching, program elements included stipends to encourage teacher retention.

Lake County—a low-population, rural but geographically large county—designed a specialized website for CARES Plus participants, similar to the platform used for an online class. This online dashboard allows Lake County staff to communicate actively with participants throughout the year, keeping them continuously engaged. All program information is constantly updated and always at their fingertips.

Participants' professional growth plans are stored on this website, as well as CARES Plus program CORE requirements and the local program requirements. Phase I planning funds were used to develop this online system and it has assisted Lake County in addressing many of the barriers to success in their county. Shelley Mascari, who leads the Lake County CARES Plus program said, "I bring an iPad to our participant meetings, and as I sit with each participant, I log in to our Steps to Quality system and together we update the individual Professional Growth (PG) plans live and online while discussing it. At the end of the meeting, PG plans are completely updated, and comments and ideas from our discussion are included in the comment section. I believe this online addition keeps the program current and vibrant."

Funded by First 5 Sacramento since 2007, the Preschool Bridging Model Plus (PBM Plus) is a natural enhancement to the CARES Plus program, both fiscally (the First 5 Sacramento funds provide the matching dollars for CARES Plus) and programmatically. PBM Plus supports continuous, on-site technical assistance to CARES Plus participants by providing 10 Early Care and Education (ECE) Specialists who meet weekly with 120 early educators. These relationship-based sessions offer the participants the opportunity to explore—within the context of their family child care homes or center classrooms—the new knowledge and skills learned during the online training and in-person sessions.

The ECE Specialists support the participants' engagement through cycles of classroom observation and reflection, thereby identifying opportunities and overcoming barriers to integrating intentional and effective teaching practices. Program supports include computer lab, group Webinar viewing, portable WiFi and laptop access, weeknight and Saturday Component schedules, a contracted ECE class at American River College, and a commitment to continuous improvement. Feedback is provided by participants, ECE Specialists, other program partners, First 5 California and First 5 Sacramento. The PBM Plus/CARES Plus program has resulted in less participant turnover, higher program completion rates, and stronger program outcomes, including improved CLASS™ scores and enriched teacher-child interactions.

> **Quality Standards:**
> **Incorporate the highest quality, evidence-based standards when assessing program effectiveness.**
>
> *— First 5 California Guiding Principle*

First 5 California's preschool programs are improving the lives of California's young children and preparing them for tomorrow's challenges.

Parent Signature Program

Family Functioning and Child Health Focus

A parent is a child's first teacher. The more information and support that parents have to strengthen their own family's success and resilience, the more likely that young children will learn the habits they need to be self-assured and ready to learn when they get to school. First 5 California assists families by offering information, support, guidance and referrals through its Parent Signature Program. The importance of child health to school readiness and early elementary success is well established. Children's overall health can make a difference in how well they will do in school. A child who is sick, has undiagnosed visual or hearing problems, developmental delays or neglected dental disease might miss class, struggle in school and even have learning problems. The alarming rise in childhood obesity is particularly severe in California—the Centers for Disease Control reports that 15 to 20 percent of low-income preschoolers in the state are obese.[9] The accompanying risk of current and chronic disease among at-risk young children further stunts their ability to achieve their highest potential in school. The Parent Signature Program strives to provide parents with the information, resources and advice that can help them raise healthier children.

> **Diversity: Ensure that families from all of California's diverse populations connect to services needed to succeed.**
>
> *— First 5 California Guiding Principle*

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

Kit for New Parents

First 5 California's award-winning *Kit for New Parents* is the flagship project of its Parent Signature Program. The *Kit* targets hard-to-reach and low-income populations, providing information and tips for first-time parents, grandparents and caregivers.

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

To date, 3.4 million *Kits* have been distributed throughout California since 2001, with 332,000 being distributed this fiscal year alone. In February 2011, the *Kit* was redesigned with streamlined content and environmentally-friendly packaging.

First 5 California assists families by offering information, support, guidance and referrals through its Parent Signature Program.

Hands-On Health Express

As part of its comprehensive outreach campaign that seeks to reach families in their homes and where they go, First 5 California takes its show on the road with its Hands-On Health Express—a colorful truck full of engaging activities that schedules appearances in all 58 counties. The Hands-On Health Express features "Edutainers" who seek to educate parents and entertain children in a traveling, interactive exhibit to teach families how to incorporate fresh foods and physical activity into their everyday lives. In FY 2011/12, the truck traveled to more than 100 schools, community festivals, county fairs and other family oriented events, making appearances in even the smallest rural communities and directly engaging with more than 62,000 families who leave with First 5 resources.

Parent Education Website and Social Media

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

According to a recent Public Policy Institute of California study, Californians of all ethnicities have dramatically increased their access to the Internet via a smart phone or cell phone.[10] The Parent Education Website has been designed for clear viewing on these devices, as well as on tablet computers.

Since its launch in 2009, the Parent Education Website (www.first5california.com/parents) has received more than three million visits. Relaunched in April 2012, the new site generated more than 1.1 million hits from April through September, representing an 89 percent increase from the same time period the previous year. The site covers health, education, literacy development, smoking cessation and more. The content and usefulness of the site is regularly tested with focus groups to ensure the most engaging and useful information for families. Parents can download information, view videos and cooking demonstrations, and even upload pictures of their children into a First 5 gallery. The most recent videos contain information on healthy beverages, nutrition, physical activity and language development that further drive hundreds of thousands of visitors to the website.

The First 5 California website also links to its social media tools, including Facebook and Twitter. The First 5 California Facebook page boasts more than 42,000 "likes" and generates nearly 243,000 unique visitors per week. First 5 California's Facebook page engages with more than 50 fans on an everyday basis. Its Twitter account has 7,500 followers who receive daily bits of information about early childhood development and wellness that parents, care providers and teachers can use to improve or inspire their relationship with young children.

Smoking Cessation

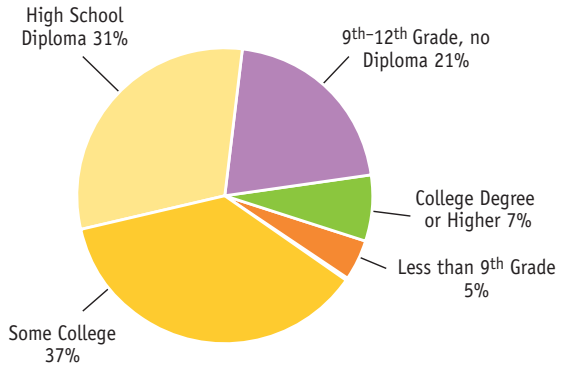
To protect young children and promote healthier families, First 5 California is committed to eliminating the illness and threat to early childhood development caused by exposure to tobacco smoke. From the prenatal stage to age five, children undergo a crucial development process and are particularly vulnerable to this serious health risk.

Parental smoking and secondhand smoke exposure have been linked to a range of ailments in babies and young children including, asthma, ear infections, pneumonia, bronchitis and Sudden Infant Death Syndrome (SIDS). To reduce the incidence of these health problems, and to help smokers quit, in FY 2011/12, First 5 California supported the California Smokers' Helpline with $1 million for tobacco cessation services for parents and caregivers of young children.

The toll-free Helpline (1-800-NO-BUTTS) provides one-on-one telephone counseling, self-help materials and referrals to local resources. Its counselors follow protocols that are scientifically proven to double the rate of successful long-term quitting. Counselors work with callers to help them develop a quit plan, then proactively follow up throughout the quitting process to help them stay on track. Services are provided in English, Spanish, Mandarin, Cantonese, Korean and Vietnamese.

In FY 2011/12, First 5 California's investment provided Helpline services for 364 pregnant smokers and 6,549 tobacco-using parents or caregivers of children ages 0-5 (including 144 who were both pregnant and had a child 0-5). Tobacco users

EXHIBIT 6: California Smokers' Helpline—Education Level of Callers in FY 2011/12

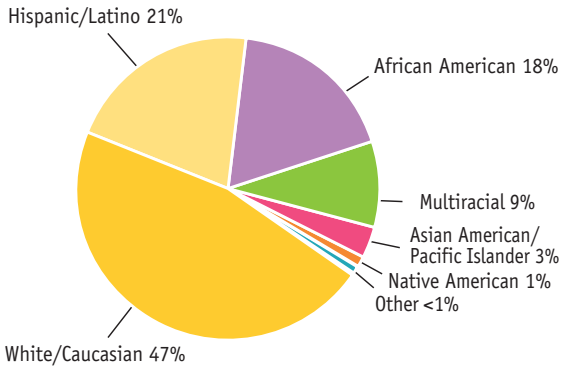


The percentages in this chart may not add to 100 due to rounding.
Source: County Revenue and Expenditure Summary, November 2012

of lower educational and/or ethnic minority backgrounds were well represented among Helpline callers. See Exhibits 6 and 7 for breakdowns by education and race/ethnicity, respectively.

A first-of-its-kind marketing campaign urging obstetric and pediatric providers to refer smokers to the Helpline generated an estimated 300,000 gross impressions throughout the state. Images for First 5 California's Helpline ads are shown on the right.

EXHIBIT 7: California Smokers' Helpline—Race/Ethnicity of Callers in FY 2011/12



The percentages in this chart may not add to 100 due to rounding.
Source: County Revenue and Expenditure Summary, November 2012

> **A first-of-its-kind marketing campaign urging obstetric and pediatric providers to refer smokers to the Helpline (1-800-NO-BUTTS) generated an estimated 300,000 gross impressions throughout the state.**

First 5 California and the Helpline also launched two online training modules for CARES Plus program participants. Entitled "Kids and Smoke Don't Mix" and "Los Niños y el Humo del Tabaco no se Mezclan," the modules give child care providers and pre-school teachers the knowledge and skills they need to encourage smoking parents to quit, refer them to the Helpline for counseling, and protect children from secondhand smoke. In FY 2011/12, 4,056 individuals completed this training, including 2,995 CARES Plus participants (2,706 English and 289 Spanish) and 1,061 non-CARES Plus participants (947 English and 114 Spanish).

Quality preschool and child care, along with parenting education programs and home visits, support a family's ability to achieve self-sufficiency.

First 5 County Commission Program Result Areas

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

Family Functioning

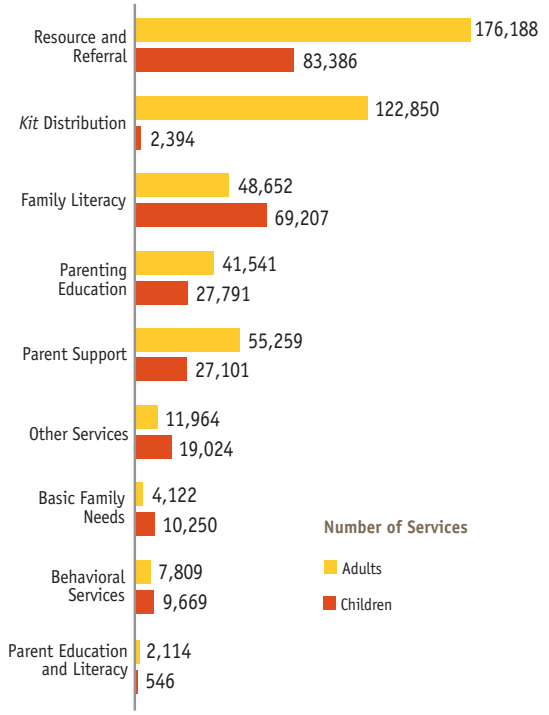
Family Functioning services provide parents, families and communities with timely, relevant and culturally appropriate information, services and support. Services include:

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

In FY 2011/12, First 5 California provided 249,368 services to improve family functioning to children ages 0 to 5 and 470,499 services to parents, guardians, primary caregivers, relatives and providers.

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

EXHIBIT 8: Family Functioning–Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 by Service

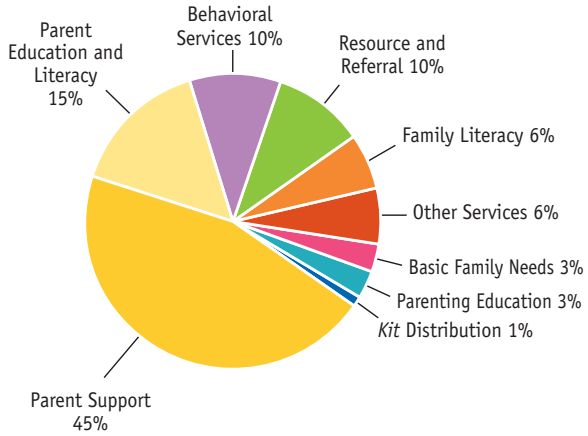


Source: County Demographic Worksheet, November 2012

While children and adults from all ethnic groups received services, for those reporting an ethnicity, Latinos were the largest recipient group (64 percent). For children reporting a primary language, services were provided to Spanish speakers 38 percent of the time and English speakers 59 percent of the time.

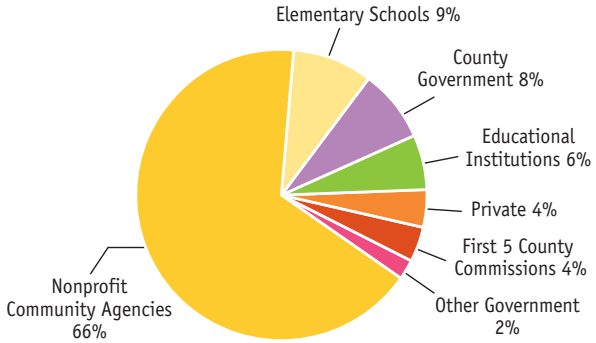
In FY 2011/12, county commissions expended $107 million to improve Family Functioning. Exhibit 9 shows the distribution of expenditures by service category. Schools and educational institutions,

EXHIBIT 9: Family Functioning–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Service



Source: County Revenue and Expenditure Summary, November 2012

EXHIBIT 10: Family Functioning–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Provider



Source: County Revenue and Expenditure Summary, November 2012

nonprofit community-based agencies, government agencies, private institutions and First 5 county commissions provided services to children and adults in order to improve Family Functioning. Exhibit 10 displays distribution of expenditures by provider type. Nonprofit community-based agencies received 66 percent of all Family Functioning expenditures in FY 2011/12.

First 5 county commissions provide a wide array of programs designed to meet the unique needs of their communities. Each county commission evaluates its programs to determine whether they

are making an impact on the population the county serves. For example, below you will find evaluation highlights for programs targeted to improve Family Functioning in First 5 Sierra and First 5 Solano.

Sierra County is a rural county in the Sierra Nevada mountains with a population of 3,113 (2011 estimate). First 5 Sierra funds the Sierra County Family Resource Center which supports low-income families with children ages 0 to 5. The Family Resource Center provides a variety of wrap-around services, including children's advocacy, a food pantry, parenting classes, counseling services, rental assistance, medical gas vouchers, car seats, bicycle helmets and a coat closet. First 5 Sierra collects data on service recipients and analyzes it to help improve service provision thereby maximizing access and impact. In FY 2011/12, participation across services provided by the Sierra County Family Resource Center increased by seven percent. First 5 Sierra continues to provide these critical safety-net services to assist low-income families with children ages 0 to 5 in Sierra County.

Solano County is situated midway between Sacramento and San Francisco with a population of 416,471 (2011 estimate). First 5 Solano's mission—*All Solano County children are loved, healthy, confident, eager to learn, nurtured by their families, caregivers and communities*—can only be realized if families have education, services and support. Home visitation is a targeted, intensive parent support service designed to increase knowledge and skills ultimately improving overall family functioning. In FY 2011/12, First 5 Solano conducted home visitation to 216 high-risk families grappling with multiple challenges including children with mental health issues. In addition, 92 percent of the visited families increased their scores in the Family Functioning domain as measured by the Family Development Matrix assessment.

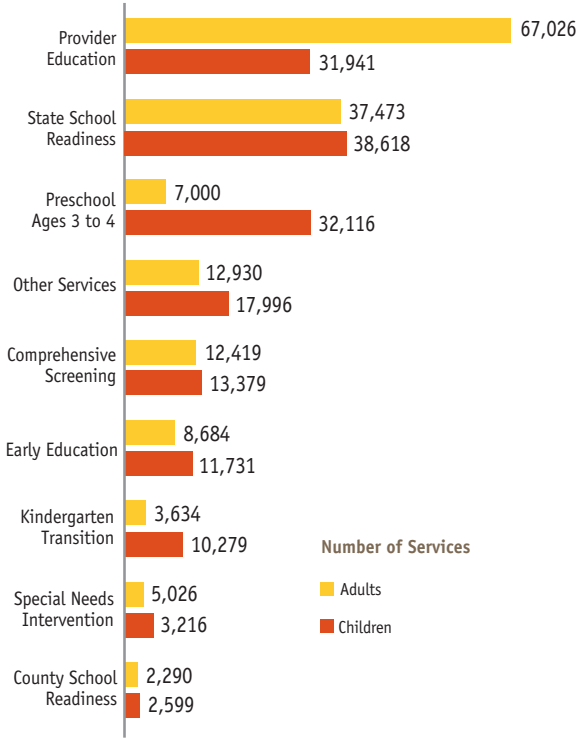
Family Focus: Support families as children's primary caregivers and first teachers.

— First 5 California Guiding Principle

Child Development

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

EXHIBIT 11: Child Development–Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 by Service



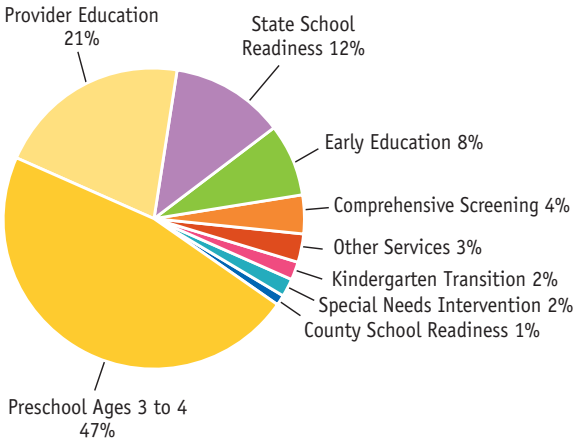
Source: County Demographic Worksheet, November 2012

In FY 2011/12, First 5 delivered 161,875 child development services to children ages 0 to 5 and 156,482 services to parents, guardians, primary caregivers, relatives and providers. Exhibit 11 shows the number of services provided to children ages 0 to 5 and adults in each child development service category. While children and adults from all ethnic groups received these services, for those reporting an ethnicity, services were delivered to Latinos most often (70 percent). For those children reporting a primary language, 49 percent of services were delivered to those speaking Spanish and 47 percent to those speaking English.

In FY 2011/12, county commissions expended $181 million to improve Child Development. Exhibit 12 shows the distribution of expenditures by service category. Schools and educational institutions, nonprofit community-based agencies, government agencies, private institutions, and First 5 county commissions provided services to children and adults in order to improve Child Development. Exhibit 13 shows distribution of expenditures by provider. In FY 2011/12, elementary schools received 18 percent of all expenditures to improve Child Development.

Each county commission implements and evaluates a variety of programs across all the result areas to increase the wellbeing of children ages 0 to 5

EXHIBIT 12: Child Development–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Service

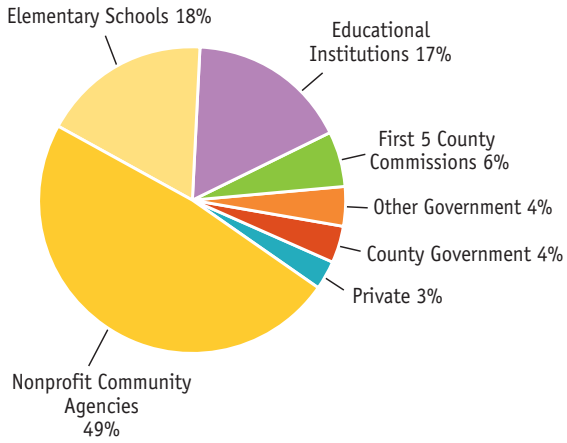


Source: County Revenue and Expenditure Summary, November 2012

and their families. What follows are evaluation highlights from Child Development programs implemented in First 5 Trinity and First 5 Tehama.

Trinity County is a rural county located in the northwestern region of California. It has a population of 13,723 (2011 estimate) and the county seat is Weaverville. First 5 Trinity supports the Weaverville Parent Nursery School which admits children ages 2 through 5. Parents are required to volunteer in the classroom and they learn how to incorporate the "6 Pillars of Character" (trustworthiness, respect, responsibility, fairness, caring and citizenship) into daily activities. Children are evaluated three times a year using the Trinity County Office of Education Content Standards, which is a standardized evaluation tool for 3- and 4-year-olds assessing kindergarten readiness in terms of social emotional, cognitive and developmental milestones. In June 2011, 98 percent of children made progress towards kindergarten readiness and in June 2012, 97 percent of children were able to self-regulate emotions, practice good citizenship and had developed age-appropriate academic skills.

EXHIBIT 13: Child Development–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Provider



Source: County Revenue and Expenditure Summary, November 2012

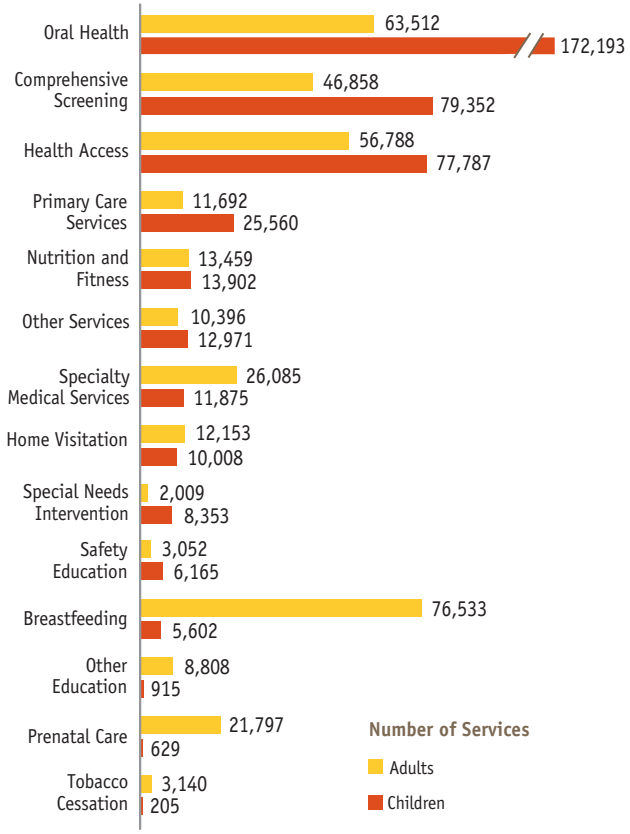
Particularly impressive was additional support that two struggling families received which resulted in their children improving their social skills and kindergarten readiness.

Tehama County is a north-central county with a population of 63,601 (2011 estimate). First 5 Tehama's School Readiness Project provides parenting classes, playgroups, screenings and home visits. In FY 2011/12, among families receiving home visits, all families had health insurance after six months of service compared to 97 percent at entry; 86 percent had preventive care for their child compared to 84 percent at entry; 94 percent had up-to-date preventive oral health care compared to 60 percent at entry; and, 95 percent of families read to their children at least three times a week compared to 77 percent at entry. Family literacy and child health help provide a strong foundation allowing children to enter school ready to learn.

Child Health

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

EXHIBIT 14: Child Health–Total Number of Services Provided to Children Ages 0 to 5 and Adults in FY 2011/12 by Service



Source: County Demographic Worksheet, November 2012

In FY 2011/12, First 5 provided 425,517 services designed to improve Child Health to children ages 0 to 5 and 356,282 services to parents, guardians, primary caregivers, relatives and providers.

EXHIBIT 15: Child Health–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Service

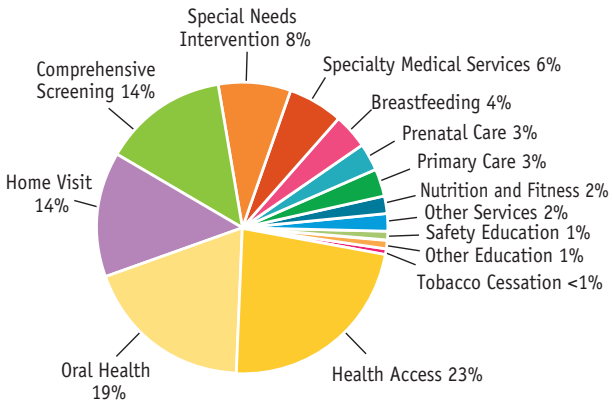
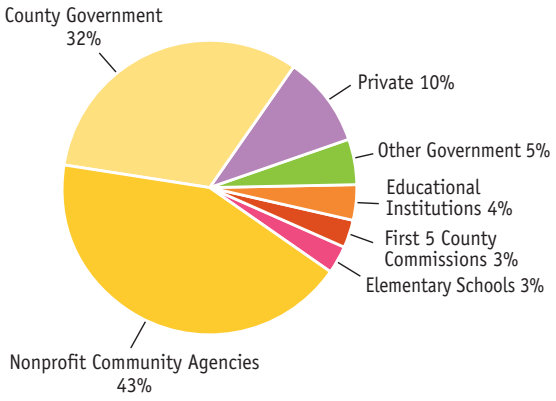


EXHIBIT 16: Child Health–Distribution of Expenditures for Children Ages 0 to 5 and Adults in FY 2011/12 by Provider



Source: County Revenue and Expenditure Summary, November 2012

Exhibit 14 shows the number of services provided to children ages 0 to 5 and adults for each Child Health service category. While children and adults from all ethnic groups received services, for those reporting an ethnicity, services were most commonly provided to Latinos (69 percent). For children who reported a primary language, services were delivered to those speaking Spanish 46 percent of the time and English 50 percent of the time.

In FY 2011/12, county commissions expended $104 million to improve Child Health. Exhibit 15 shows the distribution of expenditures by service category. Schools and educational institutions, nonprofit community-based agencies, government agencies, private institutions and First 5 county commissions provided services to children and adults in order to improve Child Health. Exhibit 16 shows distribution of expenditures by provider. Community-based agencies accounted for 43 percent of all expenditures to improve Child Health in FY 2011/12.

Mendocino County is a coastal county with a population of 87,553 (2011 estimate). First 5 Mendocino has embarked on a multi-faceted strategy to combat childhood obesity. Research has shown that breastfed infants are less likely to become obese. First 5 Mendocino uses social marketing to normalize breastfeeding and provide information on breastfeeding support for new mothers. Nutrition and exercise are promoted through programs such

as community gardens and SPARK (Sports, Play and Active Recreation for Kids), an innovative physical activity program that has been honored as an "Exemplary Program" by the U.S. Department of Education. The CalFresh program provides food stamps to low-income families to help ensure food security. First 5 Mendocino also offers healthy eating and cooking classes to teen parents. Through these initiatives and more, First 5 Mendocino is preventing and reducing childhood obesity in its communities.

First 5 county commissions seek to provide families most in need with services that prepare children to enter school ready to learn and thrive.

Stanislaus County is located in the heart of central California and has a population of 518,522 (2011 estimate). In an effort to increase parent education about safety and prevention of injuries First 5 Stanislaus facilitated the education of 7,772 parents about Shaken Baby Syndrome (SBS). As a result, in 2011 and 2012 there was only one documented SBS case in Stanislaus County.

First 5 Stanislaus also facilitated three community presentations designed to educate parents about the need to restrain young children in cars and the best means of restraint. This resulted in 96 car seats being inspected by certified technicians and 71 car seats were replaced during two follow-up events. These activities contributed to the reduction in avoidable injuries to Stanislaus County children ages 0 to 5.

Systems of Care

Systems of Care addresses system-wide structural supports which allow county commissions to effectively work towards achievement in the other three result areas of Family Functioning, Child Health and Development. For example, interagency collaboration allows coordinated wrap-around efforts from multiple organizations providing targeted services. Since this result area is at a systems level, counties do not report number of children and adults served. Expenditure data indicates that for FY 2011/12, county commissions expended $69 million to improve Systems of Care.

El Dorado County has a population of 180,938 (2011 estimate) and is located in the Sierra Nevada mountains and foothills of California. In an effort to improve its Systems of Care, First 5 El Dorado has implemented community-based leadership groups representing children ages 0 to 5 and their families. These community strengthening groups meet regularly

to discuss strategies for increasing awareness of and access to services. In FY 2011/12, the Western Slope Ready by 5 group met eight times with 23 partners to discuss multiple services focusing on safety and the promotion of healthy social and emotional development. The South Lake Tahoe Collaborative met 11 times with 28 partner agencies to discuss multiple topics including childcare, vaccinations, oral health, nutrition and mental health. The Divide Ready by 5 group met 10 times with 21 partners to discuss and promote school readiness, health insurance and the promotion of myriad services at community events. These efforts capture a county-wide collaborative effort to share information and resources to maximize access and impact of services targeted to children ages 0 to 5 and their families.

Tulare County is located in the Central Valley and has a population of 449,253 (2011 estimate). In an effort to bring awareness of child abuse and neglect to Tulare County, First 5 Tulare and the Child Abuse Prevention Council sponsored The Lisa Project. This project is a traveling, educational exhibit depicting scenes and stories of child abuse and neglect. The purpose is to raise awareness and empower the community to protect children and strengthen families. Over 200 volunteers worked in the exhibit, which drew approximately 5,661 people. Of those who attended, over 250 indicated an interest in becoming an advocate and over 100 indicated an interest in foster parenting. In FY 2011/12, The Lisa Project was featured in *0 to 5 in 30 Minutes!* a weekly, half hour television program sponsored by First 5 Tulare and First 5 Fresno, focusing on issues important to parents and caregivers of children from the prenatal stage to five years old.

Summary

First 5 California's comprehensive approach to early childhood education seeks to provide services for children, families and educators in the home and in the classroom to ensure children enter school ready to learn. Our current Child, Teacher and Parent Signature Programs were developed based on the most current research on childhood development and on the diverse needs of California families. The State and county commissions provide multiple services to families and their children ages 0 to 5 to ensure the family functions in a way that encourages healthy and lasting development inside the home, school and in the community. Our programs are continually evaluated for their effectiveness and updated to serve the needs of individual counties. Together, First 5 California and the county commissions seek to provide families most in need with services that prepare children to enter school ready to learn and thrive.

Appendix A: First 5 California Result Areas and Services

Result 1: Improved Family Functioning

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

Services

- **Behavioral, Substance Abuse, and Other Mental Health Services**
  Behavioral and mental health services, substance abuse services, treatment, and counseling and/or therapy for children or adult family members, including play, parent-child interaction approaches, child-abuse counseling and family therapy.
- **Adult Education and Literacy for Parents**
  Education, training, ESL classes, literacy and/or a General Equivalence Diploma (GED).
- **Community Resource and Referral**
  Programs that provide referrals or service information about various community resources, such as medical facilities, counseling programs, family resource centers and other supports for families; for instance, 211 services or community resource reporting.
- **Distribution of *Kit for New Parents***
  Programs that provide and/or augment the First 5 California *Kit for New Parents* to new and expectant parents (e.g., a hospital visitation program to new mothers), as well as caregivers of children 0 to 5.
- **Family Literacy Programs**
  Programs designed to increase the amount of reading that parents do with their children. Programs may include educating parents about the benefits of reading or looking through books (e.g., Even Start, Reach Out and Read, Raising a Reader).
- **Provision of Basic Family Needs (e.g., Food, Clothing, Housing)**
  Meals, groceries or clothing provided through programs such as food pantries and store certificates, emergency funding or household goods acquisition assistance, temporary or permanent housing acquisition assistance, and related case management.
- **Targeted Intensive Parent Support Services**
  Intensive and issue specific support services to families at risk including home visitation, long-term classes or groups, or other intensive support for parents or expectant parents to increase knowledge and skills related to parenting and improved family functioning.
- **General Parenting Education Programs**
  Short-term, non-intensive instruction on general positive parenting topics.

Result 2: Improved Child Development

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

Services

- **Preschool for 3- and 4-year-olds**
  Preschool for 3- and 4-year-olds distinct from a comprehensive school readiness program. Includes funding pre-existing spaces or spaces in programs with the intensity and quality similar to Power of Preschool criteria.
- **State School Readiness Programs and Local Match**
  State and local match-funded services under the State Commission's School Readiness Initiative, designed to improve children's readiness for school.
- **Local School Readiness (Mirror Programs)**
  County commission-based School Readiness programs funded solely by county commission dollars that are "mirror" programs to the State School Readiness Program.
- **Comprehensive Developmental Screening and Assessment**
  Screening and diagnostic services including behavioral, mental health, developmental and physical health. This includes screening programs that measure cognitive/intellectual functioning, language and communication skills, social and emotional development, and perceptual/motor functioning to identify children who show developmental delays. These services determine the nature and extent of a problem and recommend a course of treatment and care.
- **Targeted Intensive Intervention for Children Identified with Special Needs**
  Programs that identify children with special needs and provide intensive and specific services to those children. Children with disabilities and other special needs refers to those children who are between birth and 5 years of age and meet the definition of "special needs."
- **Early Education Programs for Children (other than School Readiness and Preschool for 3- and 4-year olds)**
  Quality intensive educational activities and experiences for children intended to foster social, emotional and intellectual growth, and prepare them for further formal learning.
- **Early Education Provider Programs**
  Training and educational services, supports and funding to improve the quality of care or facilities. This includes Comprehensive Approaches to Raising Educational Standards, facility grants, and supply grants to providers.
- **Kindergarten Transition Services**
  Classes, home visits, or other activities designed to help children be more comfortable and accustomed to the learning environment, expectations, activities and school personnel when they enter kindergarten. This category also includes individual child learning plans and school-wide transition plans.

Result 3: 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.

Services

- **Breastfeeding Assistance**
  Education related to the benefits of breastfeeding, including classes to women, families, employers and the community, as well as breastfeeding support services to women.
- **Nutrition and Fitness**
  Information and services about nutrition, fitness, and obesity prevention for the 0 to 5 population; this includes programs to teach the basic principles of healthy eating, food handling and preparation, and the prevention of illness.
- **Other Health Education**
  Information and services about health other than nutrition, fitness and obesity prevention.
- **Health Access**
  Health insurance, premium support and enrollment assistance programs that ensure use of health services, strategies to retain health insurance and insurance premium payments or subsidies.
- **Home Visitation for Newborns and Their Families**
  Home visitation services to promote and monitor development of children ages 0 to 2.
- **Oral Health**
  Dental screenings, checkups, cleanings, preventive and acute treatments, and education on preventive care. May include training for providers as well as for children and families.
- **Prenatal Care**
  Education, treatment and counseling to promote healthy pregnancies and deliveries.
- **Primary Care Services (e.g., Immunizations, Well Child Checkups)**
  Medical care services to children ages 0 to 5 including preventive, diagnostic and therapeutic care by a licensed healthcare professional.
- **Comprehensive Screening and Assessment**
  Screening and diagnostic services including behavioral, mental health, developmental and physical health. Includes screening programs that measure cognitive/intellectual functioning, language and communication skills, social and emotional development, and perceptual/motor functioning to identify children who show developmental delays. These services determine the nature and extent of a problem, and recommend a course of treatment and care.
- **Targeted Intensive Intervention for Children Identified with Special Needs**
  Programs that identify children with special needs and provide intensive and specific services to those children. Children with disabilities and other special needs refers to those children who are between birth and 5 years of age and meet the definition of "special needs."
- **Safety Education and Intentional and Unintentional Injury Prevention**
  Programs that disseminate information about child passenger and car safety, fire safety, water safety, home safety (childproofing) and the dangers of shaking babies. Includes education on when and how to dial 911, domestic violence prevention and intentional injury prevention. Referrals to community resources that focus on these issues may also be included.
- **Specialty Medical Services**
  Emergency and critical care services for children ages 0 to 5 who require specialty care or have an illness or injury that requires immediate, short-term intervention or other specialty care services including care for chronic childhood illnesses. This category also includes follow-up on medical conditions or concerns identified from health/developmental screenings, such as autism, vision or asthma.
- **Tobacco Cessation Education and Treatment**
  Education on tobacco-related issues and abstinence support for participants using tobacco products. Includes providing information on reducing young children's exposure to tobacco smoke.

Result 4: 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.

Services

- **Service Outreach, Planning, Support, and Management**
  General planning and coordination activities, program monitoring, technical assistance and support, support for interagency collaboration, support for services to diverse populations, contract administration, program database management, program support and oversight activities.
- **Provider Capacity Building, Training, and Support**
  Provider training and support to improve their capacity to participate and deliver services to families with young children. Includes business planning, grant writing workshops, sustainability workshops and large community conferences or forums.
- **Community Strengthening Efforts**
  Community awareness and educational events on a specific early childhood topic or promoting broad awareness of the importance of early childhood development.

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First 5 California 2011–2012 Annual Report

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The enclosed disk contains a full PDF version of this Annual Report and the *California State Controller's Annual Report to the First 5 California Commission*. In addition, view a PDF version of the *First 5 California 2011-2012 Annual Report* at *www.ccfc.ca.gov*.

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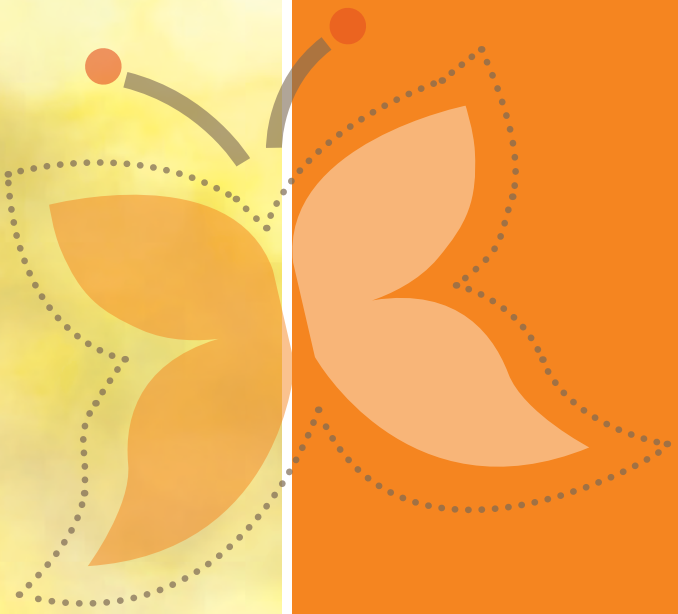

Our Vision

All children in California enter school ready to achieve their greatest potential.

— First 5 California Vision Statement

First 5 California

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