AGENDA

SPECIAL JOINT MEETING OF THE BOARD OF COMMISSIONERS AND THE BUDGET & FINANCE AND EXECUTIVE COMMITTEES

Budget & Finance Committee Chair: Robert Byrd

Thursday, March 30, 2017
1:30 PM

Meeting Location:
First 5 LA
750 N. Alameda Street
Los Angeles, CA 90012

1. **ACTION**
   Call to Order / Roll Call
   - Marlene Zepeda, Committee Chair
2. **INFORMATION** **3**
   Review Program & Planning Committee Meeting Transcript – February 23, 2017
   - Marlene Zepeda, Committee Chair
3. **INFORMATION** **109**
   Review Draft Legislative Agenda 2017
   - Kim Pattillo Brownson, VP of Policy and Strategy
   - Peter Barth, Director, Public Policy & Government Affairs
   - Tessa Charnofsky, Government Affairs Manager
4. **INFORMATION** **135**
   Families Outcome: Welcome Baby – Learning Agenda
   - Barbara Andrade Dubransky, Director, Family Supports
   - Allison Wallin, Manager, Evaluation and Learning
5. Break
6. **INFORMATION** **170**
   Establish a Strategic Partnership with First 5 Association of California for Policy,
   Communications and Health Systems Supports

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- **Peter Barth, Director, Public Policy and Government Affairs**
- **Gabriel Sanchez, Director, Communications**

7. **INFORMATION**
   Public Comment (For items not on the agenda)

8. **ACTION**
   Adjournment

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MEETING OF FIRST 5 LOS ANGELES PROGRAM AND PLANNING

Thursday, February 23, 2017

750 North Alameda Street, First Floor

Los Angeles, California 90012

REPORTED BY:
HEATHERLYNN GONZALEZ
CSR #13646

Thursday, February 23, 2017; Los Angeles, California

1:36 p.m.

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COMMISSIONER ZEPEDA: I'm going to call the meeting to order. And we need a roll call.

MS. BELSHE: Do we?

SECRETARY: Could we go around the room and shout out who we are?

MS. BELSHE: We usually just go around and kind of shout who we are.

COMMISSIONER ZEPEDA: I'll start. I'm Marlene Zepeda, District 1 rep, chair of the P and P.

MS. BELSHE: The new chair of P and P.

COMMISSIONER ZEPEDA: And the new chair. I'm pleased and honored to take on this responsibility.

MS. BELSHE: We can see that. Certainty.

COMMISSIONER ABDO: And do we believe that.

COMMISSIONER MARTINEZ: I'm Yvette Martinez. I'm the new commissioner for District 4. I'm very excited to be here and I can't wait to get started and work with all of you.

MS. BELSHE: And next up is?

MS. FERRER: Barbara Ferrer.

MS. BELSHE: The new director --

MS. FERRER: Of public health. Pleased to be

here.

COMMISSIONER ABDO: I'm Judy Abdo.

MR. WAGNER: I'm John Wagner.

MR. GAYDEN: I'm Carl Gayden, senior director of administration of First 5.

MS. LEE: Mary Lee, Best Start West Athens.

MS. ANDREWS: Antoinette Andrews, director of communities.

MS. De SANTIAGO: Michelle De Santiago, program officer in communities.

MS. FICEK: Tara Ficek, director of health systems.

MS. ALTMAYER: Christina Altmayer, vice president of programs.

COMMISSIONER SHERIN: John Sherin, director of mental health.

COMMISSIONER TILTON: Hi. I'm Deanne Tilton, commissioner, representing (inaudible).

COMMISSIONER NICHOLS: Brandon Nichols, children and family services.

MS. BELSHE: Kim Belshe, First 5 LA.

SPEAKER: Child Care Alliance of Los Angeles.

SPEAKER: Hi. First 5 LA.

SPEAKER: Kathy Schreiner, Families Come Together Panorama City.

SPEAKER: Alex (inaudible), Best Start Compton-East Compton.

SPEAKER: I'm Freddy (inaudible), First 5 LA.

SPEAKER: Raoul Ortega, First 5 LA.

SPEAKER: (Inaudible).

SPEAKER: (Inaudible).

SPEAKER: Jessica Guerra with Crystal Stairs.

SPEAKER: (Inaudible).

SPEAKER: Marlene Fitzsimmons, First 5 LA.

SPEAKER: Rafael Gonzalez, First 5.

SPEAKER: (Inaudible), Sheila Kuehl's office.

SPEAKER: Susan Kaplan with Friends and Family and Panorama City and Best Starts.

SPEAKER: (Inaudible).

SPEAKER: (Inaudible) First 5 LA.

SPEAKER: Lee Worbell, communities First 5 LA.

SPEAKER: Katie Galin, First 5 LA.

SPEAKER: (inaudible).

SPEAKER: Linda Argon, First 5 LA.

SPEAKER: Gabriel Sanchez, First 5 LA.

SPEAKER: Armando Jimenez, First 5 LA.

SPEAKER: Karen Valencia, First 5 LA.

SPEAKER: Linda Vo, First 5 LA.

SECRETARY: Heatherlynn Gonzalez, stenographer.

COMMISSIONER ZEPEDA: Thank you everybody.

Welcome. Barbara --

SPEAKER: Barbara Dubranksi. First 5 LA.

COMMISSIONER ZEPEDA: Anybody else?

MS. BELSHE: Genie?

SPEAKER: Genie Chough, DCFS.

COMMISSIONER ZEPEDA: We're good.

Okay. So let's review the special meeting board notes. Are there any concerns or questions about that, if have you had a chance to review the notes? They're long.

Okay. I brought up the issue relative to the board notes since I wasn't here for that particular meeting, that there needs to be some review of the notes in terms of any kind of grammatical problems that might be in them because they are open to the public. I talked to Kim about that, and there's going to be some review just to make sure it's fine.

All right. If there's no discussion or questions about the notes, let's move on to Item 3, California Department of Education, California QRIS certification grant information.

MS. BELSHE: So we have the next two items, commissioners, that are written only. We do these typically when they're fairly straightforward items that will be coming to the full board for action on consent. We provide written material and make sure that there's

time here if there are any particular questions.

Christina, I don't know if you want to say a few words first about 3 and then 4, and see if there are any comments or questions from commissioners before moving on.

MS. ALTMAYER: Sure. So both of these are for us to receive grant awards, which is good news always. So the first is for a grant that is for the California Department -- from the, excuse me, California Department of Education to support training and technical assistance. We have not formally received a notice of this grant, so it's sort of an anticipatory action because we anticipate receiving the grant and we'll have to move on it relatively quickly. So it is to both accept the grant award and then enter into contracts to execute that for training and technical assistance.

The second item is also a grant award, and it's to receive a grant from the Center For the Study of Social Policy. It is year two of a three-year grant that really to our work on Project DULCE.

And happy to answer any questions.

MS. FERRER: I think the only thing I was a little bit confused about was, we're accepting funds from CSSP and then giving money back to CSSP. I'm brand new, so just bear with me. I wasn't sure if that was a historical relationship we have or if there's some reason

why we'd be accepting one and then recontracting with the very same people that came into us.

MS. ALTMAYER: The contract is to actually receive the grants, so -- but there is -- there is a related contract. We receive a two-year grant -- excuse me, a three-year grant. We're in year two of a three-year grant. We're also executing an agreement for the carryover funds because the funds of the first-year grant were not fully expended because we started late. So it will run from October -- from November through October with regard to starting late.

We are funding -- CSSP is funding one site and we're funding two additional sites for Project DULCE pilot implementation.

MS. FERRER: So some of the money goes back to CSSP to support their one site and we support the other two?

MS. ALTMAYER: Correct.

MS. FERRER: That makes a lot of sense.

COMMISSIONER ZEPEDA: Are there any other questions about Items 3 and 4? This is 3. Item 3 on Project DULCE or on QRIS?

MS. BELSHE: If not, then they will come back to the board for action on the March consent.

COMMISSIONER ZEPEDA: All right. Moving on.

Let's go to Item Number 4 -- 5? Update on Best Start alignment. We have -- this is an information item and we have Dr. Andrews, Michelle DeSantiago, and Mary Lee who are going to be presenting to us today.

MS. ALTMAYER: So as we've been meeting with the commission at both meetings and PPC meetings, this has been a process that we embarked in last summer to look at how we can strengthen and support the Best Start relationships as well as align our investment with our new strategic plan with full attention and focus on policy and systems change.

So over the next four meetings, this meeting and then next month's PPC meeting, we'll be digging into this issue in depth about the proposed transition. We want to provide ample opportunity for board comment and feedback. So we'll also be scheduled for the April and May board meetings. So we're trying to maximize the opportunities for us to engage in real robust conversations with commissioners given the complexity of this initiative and also the change.

So today you're going to hear an update as to where we are with this planning process. We want to share our current thinking, what are our reflections on this process, really show how we've had the opportunity to engage with community representatives in a really robust

and deep discussion about what are some of their concerns and how we can do our best to mitigate those concerns while also pivoting us to our important focus on policy and systems change.

So with that, I'd like to toss it over to Antoinette who's going to walk us through. Again, I appreciate the time that the commission is dedicating to this important topic.

MS. ANDREWS: Thank you, Christina.

Just as a little bit of background for new commissioners. In July of 2016, we had a really great conversation with commissioners that mirrored the last commission meeting where we had some workshops to talk about the strategic plan and each of the outcome areas.

For the communities outcome area, one of the things that we heard back from the board was that they wanted an opportunity to hear directly from community members about what their experiences are as we're continuing to make some important decisions about Best Start. So today I'm very pleased to say that Mary Lee has graciously accepted to be a copresenter with us today from Best Start West Athens. And you will hear from her a little later in the presentation.

I'm also very pleased to introduce Michelle DeSantiago, program officer in the communities department.

This is her first presentation to the board. And she will carry the bulk of the presentation today.

As Christina mentioned, we are going to review the process and the principles that have been guiding our work on the Best Start alignment process, which is really about looking at what are the outcomes for Best Start and how do we then align our implementation to achieve those outcomes. And although that is a really important thing today, we're not actually going to discuss outcomes or evaluation today. We understand this is a really important conversation that we are having internally that we will bring to the board. But today's conversation is really focused on where we are in our current thinking with the Best Start alignment.

This is also the fourth in a series of board engagement opportunities to discuss the shifts that we want to make and how we're supporting the Best Start communities partnerships. So we acknowledge on the front end as usually with Best Start presentations, there is a lot of information embedded in these -- in the PowerPoint and in the memo. And that is one reason why we are intentional about having multiple conversations with the board before we get to an actual board action which we anticipate will be in May of this year. So we do acknowledge that this is complex and there is a lot of

information. And we're going to start particularly for the benefit of our new commissioners just laying some ground work, the foundation of why -- what is Best Start and why we are doing this.

So we start with our vision, First 5 LA's vision, which is a very grand vision that throughout Los Angeles' diverse communities, and there are many as we well know, that children are born healthy, that they're raised in safe, in loving and nurturing environments, that they grow up healthy in mind, body and spirit and are eager to learn with opportunities to reach their full potential.

Although this is in our strategic plan, I'm actually reading the words so that we can all hear them and know that this is a vision that we share with many stakeholders, including community members throughout the Best Start communities.

For First 5 LA, we've made a commitment to do work in four outcome areas: Families, communities, health, and early care and education. And Best Start is a foundational component of the communities outcome area.

With the approval of the 2015-2020 strategic plan, First 5 LA affirmed its commitment to Best Start. Best Start actually started in 2009 and was a part of the 2009-2015 strategic plan. With the current strategic plan, the board reaffirmed its commitment. And it's

really a capacity building investment in 14 communities that emphasizes the important role of place in the healthy development of children.

The Best Start community partnerships are a central part of this capacity building strategy. So for the last six years, our investment has been in community partnerships that are a group of diverse stakeholders: Parents, residents, organizations, faith-based leaders. And for those who were back -- were around in 2009, you may remember this graphic, although the center said, take your seat at the table. And you can see that the intent of the partnership is for diverse stakeholders to come together around a shared vision to act collectively to drive policy and systems change.

And although the partnerships represent a collaboration among these various stakeholders, the partnership itself is not a legal entity. Nonetheless, the partnership is a key contributor to achieving outcomes for children and families and require infrastructure to support their operations and their community change work.

So this graphic -- and you may notice that we use a lot of colors in this PowerPoint to try to make it as engaging as possible. But in this graphic, the operations of the partnership really are around coordination and support. These stakeholders represent various entities.

So to come together as one entity to do work in the community requires coordination and support. It requires ongoing learning and information gathering, and it requires the use of local resources; First 5 LA being a major resource in communities, but it requires that -- the mobilization of resources.

So those are the operational things that partnerships need in order to drive the work which is the arrows in green around the community-identified projects that the board approved at various points throughout the last fiscal year with most notably during the November 2016 special commission meeting where the board approved 11 of 14 community-identified projects. That is the work of the community partnerships.

MS. BELSHE: 2015.

MS. ANDREWS: '15. Thank you very much.

MS. BELSHE: I didn't want everyone to think they missed that meeting.

MS. ANDREWS: 2015. So the work -- to that point, has been going on for some time. So it's not as if the partnerships come together and they just meet for the sake of meeting, but they're in the process of doing a lot of really great work within the communities.

Communications work. Elevating their visibility and communicating to the rest of the community about not

just the work of the partnership but what the resources are within communities and what are some of the things -- the information that parents need in order to provide their children with safe and nurturing environments.

Resident engagement is another area where in some partnerships they have done a great job of reaching out to the communities. We provide the resources for that. And in other -- the majority, quite frankly, of the partnerships, we have provided a particular model of resident engagement, but we want to move to the partnerships identifying what is the best way to engage residents within their communities.

And that ultimately leads to action from a community organizing and advocacy perspective as we think about the last board conversation about policy and advocacy, what's happening at the state and federal level, what's happening at the local level. And we heard very loud and clear that the board, staff, community members are all saying Best Start is so important to driving policy change from the local level even up to the federal level.

So these are the functions of the Best Start community partnership, and they do that work in order to achieve outcomes for kids because, ultimately, that's what this is all about.

Now, that foundational infrastructure that is required for them to fulfill those functions have led to First 5 LA actually operating two different models. One model is, when we first launched Best Start in 2009, we started with a lead agency model in Metro LA. We contracted with Para Los Ninos to be that lead agency for Metro. In the other 13 communities, we started with a collaborative process first instead of an RFP process. But that positioned First 5 LA as the driver of the community partnerships providing all of the operational supports that are required in order for them to do their work.

We've been operating both of these models since 2010. 2009, we started with Metro. 2010 is when the board approved 13 additional communities to be a part of the overall Best Start effort.

So since 2010, we have learned a lot and we've heard a lot from our community partners about how we're operating this initiative. And today we're going to talk about this pivot from the two models that you see today to one coordinated approach to help really help and support and bolster the community partnerships.

With that, I'm going to turn it over to Michelle.

MS. DESANTIAGO: Thank you. And so the reason that I'm the lucky one to sit in this seat is because I

drew the short straw, but also because I'm the one who's helping to kind of shepherd some of the design work internally and have been speaking directly to the members of the community through this process. So I got a pretty good knowledge of what's been happening.

As Antoinette shared, we had some other structures that kind of have worked in some ways and in other ways we know that they can be improved. And we know that the support that we can provide to partnerships to do the work can be improved, and the way that we're going to do this is to shift to a new structure that is really more organic, more local, more focused on building the capacity of local organizations, but also of making sure that it's a resident-led effort. And it allows for us to kind of take a different role, which we'll talk about a little bit later and continue supporting the work of making change in the community.

So there are some things that we'll share today and there's some things that we'll be sharing in the future meetings. We don't want to pack in too much. But I do want to give you sort of an overview of what the process has been in terms of the design of engagement, and then also kind of what the current thinking is on the emerging recommendation.

So the focus of this alignment work specifically,

as Antoinette mentioned, is how we will structure the support for community partnerships. So we're focused on this first phase of it, how do we transition the operation and the direct service to community partnerships to local entities. And you'll see that our target deadline is for the end of this year for us to transfer these operations to existing organizations. We're not doing anything new. And we do want to make sure these organizations have the capabilities, the values, and approach that's required to support a collaborative community change effort. So the values should be aligned with First 5 LA's values. It should be aligned with the community's values. And it should be a good partnership between partnership members, First 5 LA, and community.

So the other aspect to this particular side is that the deadline for this year, this is kind of based on our original estimates. It may need to change depending on additional engagement points, additional board decisions, other feedback. But we're committed to making sure that the process is a comprehensive meaningful one that takes into account everything -- everything we can think of and plan for. And because it's an important decision and it's important shift, but we know we're going in the right direction.

I know that we mentioned in the beginning, but

looks like we'll have time for questions, answers, discussions at the end.

So this is -- this is a wonderful little slide, and you're going to be quizzed on it at the end. But so in order to kind of go through this process, we take a few different steps. So five basic steps. So one is we gather data, and it's from -- including internal and external stakeholder perspectives. We analyze the data. And we used several different factors, a lot of different criteria. And we do some designing internally and then we share this information and it continues in this cycle. So that's the fifth step. We gather data, analyze it, design something, propose something, share it out, and go back again. And what you'll see in this path is that we've had several different engagement points, several different decision points to all come to this kind of emerging recommendation that we're landing on right now.

So the orange represent community inputs, which we have engaged with the transition team. They are representatives from each of the 14 communities since 2015. And they are an incredible group of very committed people who have wrestled with all these ideas with us throughout this process. And I'm happy to say that Mary is one of the members that has been with us on that transition team since the beginning. The other kind of

orange or community inputs have included the request for information, some input sessions with organizations, and also six feedback sessions with partnerships that gave them an opportunity to chime in on some of our original thinking but also some of the potential structures that we were looking at. And then there's been board presentations and then we've been narrowing down from four to approximately two to one kind of proposed, and here we are today.

It's -- it's been a very interesting and engaging process, and we've learned a lot. So it's been -- it's been fun to codesign this.

So one of the things we're doing internally is we have a design team. And it originally started with eight and we did a little (inaudible) -- eight and we moved over to Oceans 12, but it might be Oceans 13 tomorrow. As we move along with this design team, we realized that we -- when we move into implementation, we might need additional parties to really inform the implementation work, but for now this design team has worked to really look at criteria, to look at key considerations in this structure and this design and the implementation, but also look at the risks and how do we mitigate them and really assess everything against a set of criteria that includes the design parameters that are listed on the slides.

So we know that First 5 LA wants to be a partner. We know that the cost should be reasonable and effective, that we don't want to create a new entity because that's not sustainable. We know that the context for these decisions has to be made within our responsibility as public agency and our responsibility to children and families, of course, and that we can't do this work alone, so it has to be informed by different stakeholders and not only in close community partnerships, it's including best practices in the field, it's including thought partners who are leading these types of place-based and community change efforts and we've done literature reviews, and, of course, we've tapped into the internal resources and expertise of our staff to inform all of the decisions and all of the thinking on this. And, again, we're hoping that this transition, at least the key operational functions, by the end of this year.

So these are just a couple of the key inputs that I mentioned in the past and I'll just highlight again. We've talked to opinion leaders. We've looked at best practices. We've done literature reviews. We're extensively engaged with partnerships through the transition team directly, and we have kind of landed in a few different areas. And so this information isn't new, but based on the responses that we did receive from the

RFI last year, we kind of -- emerged four kind of different potential structures. So it includes two countywide options: Options one and four. Skip over to that. A regional option and a customized option. The difference really between the countywide ones is the first one really has kind of a fiscal agent role, and in the fourth one, it's a countywide agency that would provide staffing directly to the 14 different communities.

And we've solicited a lot of feedback on it. And I can share that -- Mary might have some additional information on this, but she'll speak in just a few more minutes. Generally, the feedback that we've received from our different stakeholders is that they didn't like countywide, especially the community partnerships didn't like countywide. They seem to prefer the customized approach because it seemed like it would be best fitting to their particular community. But they did have some good things to say and appreciate the benefits of the regional model and the regional approach.

Let's move on a little bit what this new support structure could look like. Anybody have a drum roll? But if you've read your packet already, you already know.

So regional with local customization. We are able to combine the benefits of two of the different approaches looking at both the manageability of it, but

also what's the best structure to support the work of the partnerships. And if we're looking at policy and systems change, we're thinking about, how do we capitalize on collective action, collective advocacy, collective learning that can happen across partnerships. So we're looking at the assets and the resources that communities have, bringing them all together to do this work, but also maintaining that individual identity for them to continue the work and the momentum that they're working on and the issues that are most important to them because, even though Panorama City and neighbors and Northeast Valley could be in one region, they may have different issues in their particular communities that they really want to focus on. And then they might have some issues that they want overlap and try to advocate for together.

So we did a lot of thinking and a lot of working on this. And this model really would help to build the capacity of local organizations instead of concentrating that capacity building work in, say, one organization that will then learn from this experience of supporting communities.

Move on to this other one. This is another set of reasons why we like the regional approach. It allows us to kind of leverage and mobilize resources. When you kind of combine the collective power of different

partnerships and the assets that different communities bring, you can really have stronger impact. So, for example, there may be one organization that works in different communities or there might be two organizations that work on providing services to parents in terms of education on disability rights. If you can pull these resources together, they can have a stronger impact in policy and systems change and educating people at the local level. But really it's looking at that power in numbers idea.

I've spoken about the policy and systems level outcomes that we're able to have and also the cross-community learning. We do have learning communities and we'll have other opportunities for all 14 communities to kind of come together to talk about and discuss different issues and build their capacity on those, but in a regional model, it really facilitates what that looks like.

So our thought about the regions. This is one of those key questions. So if we do a regional the model, what do the regions look like. And some of the different things that we considered were, how close they are together, are they in the same supervisorial district, are they in the same SPA district, do they have a shared infrastructure, what is the potential for cross-community

learning, is there -- is there one partnership that has great expertise in one area and another one that's looking to grow their expertise in that area where they can kind of partner together, do they have a shared history of working together on issues or a shared history beyond -- before First 5 LA came into the picture. And, of course, the community feedback.

So we presented some preliminary ideas of these regions at a January 27th leadership forum and then again on the 10th with the transition team. So we got some great feedback and we're still trying to work through what would be the best composition. But we do want to say that al of the regions should have more than one community that they should be -- it should be manageable to have -- to coordinate and then do the subcontracting necessary in these regions, and that it's very important to us that each community will receive the support that they need to continue their work so they're not losing the resources that they need at that local level.

So local aspect of it. They have direct support at the local levels so they would be local organizations who are familiar with the partnerships that would be providing the support in the functions or the areas that Antoinette had mentioned earlier. And I'll go through them again.

There's also potential for greater family and community level outcomes. So when you start to think about the individual community and even the larger community in a region, you can start to identify, what are the outcomes that we really want to achieve in this area: Do we really want to focus on early care and education. Do we want to focus on access to healthy food. Do we want to really think about park programming across the different areas. And how do we make sure that the -- the attention happen there.

This -- this model does allow for us to consider and to give the flexibility for community needs. So even if someone's in the same region, they won't have necessarily the same needs. And this model with regional and local customization allows for that flexibility. And, obviously, there's some fostering of network building that happens because of the way that we would structure the supports.

So these are kind of the basic elements that we've identified that the partnership needs in order to achieve their goals or their outcomes. And the supports that we anticipate will be provided both at regional level and at the local level. And if you see at the regional network coordinator, there are four different areas. And these four different areas are really with the intent of

helping to bring communities together, to convene them for information sharing, for best practice sharing, learning, resource mobilization for advocacy. But that's kind of their primary role. And we don't want them to be a lead in the sense that they control the effort. We want them really to be a collaborative partner supporting the work of the local partnerships and bringing them together on issues of importance to them.

And then at the local level, these are some of the functions that Antoinette had mentioned earlier. And, essentially, these are kind of the things that they need. so coordination and support. This includes a little bit of coaching. There's the local resource and mobilization -- united local resource management mobilization that's kind of forward facing and thinking about sustainability of the effort. There's learning opportunities that can be supported. There's elements of resident engagement. There's the community-identified projects, the community organizing and advocacy and communication. And all of this will happen and be supported at the local level. And the regional network coordinator will be subcontracting to provide these local supports.

So I realize that there's also some overlaps in the functions at the regional and the local level. And that's intentional because we know that there are some

support that happen at both levels that compliment each other.

So now Mary can share a little bit about what has been her perspective. And as I mentioned earlier, she's a transition team representative from West Athens and she's been with us from the beginning, and we are very honored to be able to share this podium, this microphone with you.

MS. LEE: Thank you. As she said, I'm part of Best Start West Athens. I'm on the leadership team as well as the transition team, and I'm happy to be here this afternoon. This is a new venue for me.

Anyway, what we and most of the transition team members decided is that the regional and customized process would probably work best for us. We are, of course, still working out exactly what that's going to look like. But for the most part, we've agreed that that's probably the best for us.

After almost two years of being a part of the transition team, we're looking at the fact that we've seen that there's greater transparency and honesty and commitment between First 5 and the partnership members. So we see that they're trying to hear what we have to say and to listen and incorporate our ideas into what they're going to be able to support us with.

We want to make sure that the partnership -- or

the transition process is cognizant of the voice and the consideration of our time being invested in trying to make this work for everybody. We need information from First 5 as early as possible so that, once an idea is presented, we can take it back to the partnership, get feedback from them so that we can bring the response back to First 5 so that we will not only be talking for ourselves, but we'll be representing our community and our membership.

We need to make sure that our voice is heard in choosing the vendors or support organizations we're going to get. We need to be insured equity and the determination and the distribution of funds. Additionally and more importantly, we need to make sure that accountability for quality support from this intermediary group will happen so that our particular partnerships will be definitely support it. We don't want to look and say, you know, we forgot to do this or we didn't do that or they're not doing for us what we need and, consequently, we're kind left up a tree without -- or up a creek without a paddle.

So, basically, we're pleased with what's happening. We're pleased with our voice being listened to. We would like to see a residential advisory group be set up of residents who will participate in what's going on with the transition, and their input will be more

directly given to the transition team members so that we can make sure that we're speaking on their behalf and that First 5 is hearing and feeling where we're coming from.

And, basically, that's it. We've still got a lot to do. We're in this together. And it is a partnership and we want that partnership to work just as much as First 5 does. So we're in it for the long haul.

MS. BELSHE: Well, said.

MS. ANDREWS: So we -- one of the things that we appreciate about the transition team and the partnerships is the passion that they bring to this work. And that passion comes in the form of appreciation for the process, but also an appreciation for making sure the community voice is heard when they feel that they aren't be heard. And as Michelle mentioned in terms of our time line, we're making some adjustments so that we can insure that whatever we bring to the board has been vetted by the communities. And at same time, the communities are well aware that our First 5 LA board of commissioners makes the ultimate decision on this.

And so as Mary's saying, there's a partnership in this. So what does that mean if First 5 LA is shifting from how it has done its work in the past to a new way of operating? What does it mean for our role in the partnership that we would have with community?

So I know we're running a little bit on time. We really want to get to questions. And this will not be the last time that you see this information. But if you just look very quickly at this slide. In terms of our current role, we're fulfilling four different key areas of work now with the bulk of our time being spent on partnership operations. And what we want to move to is a lot more work in these seven areas as you can see as she shift from a focus on the partnership operations to more policy and systems change for work.

So what might that look like? An example would be connecting back to our last commission meeting. A lot more work around policy and advocacy, and that we would use our communications and policy resources and relationships to amplify community voice. That's what we talked about a lot during the last commission meeting. But if we're focused on partnership operations, we miss opportunities to amplify that voice at a local, state, and national level. So we're shifting from how we're doing our work today to how we will do out work in the future.

So the benefit of this is that we, First 5 LA staff, would be focused a lot more on partnership and collaboration versus the management of contractors and vendors to provide direct operational supports. We believe this will also allow for an easier flow of

resources, which might seem actually contrary to what we're presenting because what we're presenting is First 5 LA to a regional network coordinator to local entities. But the easier flow comes in the flexibility that is afforded to communities once that structure is in place and they're able to utilize resources in a way that really reflects the work and being a lot more responsive to community needs versus, as an example, First 5 LA issuing an RFP every time a community identifies a project that they want to do. So that's what -- although it may seem like well, actually, no, we're adding more layers, we believe that this new structure would allow for easier flow of resources.

And, again, this is about strategically utilizing internal and external resources. We know that there are assets within communities that can be mobilized to support this work, and we want to do that as well as our own internal resources to support this work at a systems level.

So in terms of next steps, as Michelle mentioned, we've gone through a lot of work just in terms of the process itself. We're now moving into procurement strategy, meaning we're trying to think through, as Mary said, communities want to make sure that they are a part of the process of determining who these regional entities

would be. So before we actually get to a procurement -- like actual procurement process, we're now starting to think through what might it look like to support this work moving forward.

For the remainder of this month and into March, we will continue to have meetings related to the -- meetings with the transition team as we're thinking through some of the other elements. We will be returning to the board in March to talk more about costs and implementation considerations. We will continue to have transition team meetings throughout April. We will bring this conversation to the full board in April so that all commissioners have an opportunity to weigh in on what we're doing and to have the information needed in order to get to a possible board endorsement in May.

And with that, we will open it up to questions.

MS. BELSHE: Who's that, Antoinette?

MS. ANDREWS: I will say that for -- some commissioners may remember the story that I told in July about my mother going to DCFS thinking that she was going to help my cousin and ended up taking home a six-month old, a three-year old, and a five-year old with one -- one can of milk, two diapers a backpack of clothes, and a car seat.

Well, this is that six-month old. He has been

reunited with his mother. Our family has kind of rallied around to make sure that he's getting all the support -- he and his sisters are getting all the support that they need. So this was Christmas. We were at my mom's house, and I saw him. I couldn't believe it and I had to take a picture of him and share that with you because this work really does matter. This is one story, but if you think about that one story multiplied, that's why we're all here and that's why our communities are so passionate and why we're all so passionate about this work.

COMMISSIONER ZEPEDA: Thank you. Thank you for the presentations. I really appreciated it. I know there were a number of new commissioners on the board and Best Start is a complicated program. I'll still working to get my head around some of the issues with it and I know it's going to be redundant because we need to hear it a number of times. So before I raise my own questions, are there any questions from commissioners about the presentation?

Barbara.

MS. FERRER: Thank you. It was a great presentation and also I want to acknowledge the wonderful work that (inaudible). This is a tremendous initiative and really reaches the people in the community, and I love the focus on making sure that the community voice is front and center and that they're actually getting the resources

to be able to make the decisions that they need to make in order to strengthen the network that exists to support children and families.

I do have a few questions on sort of the changing role for First 5 LA. And I think it's just because I'm new and I'm not really clear how you're describing some of the areas where you are going to do work and some of the areas where I would imagine communities would want to make sure that First 5 was providing resources for them to do some of the work. So when I -- I love the list of what the future role is for First 5. But many of the things that are on here are also the future roles -- sorry -- for our community partners.

So communications, policy and advocacy, you know, we're all better off when people are able to advocate for themselves and communities are able to stand for themselves. So I just wanted to make sure that, when you were talking about the new structure, you were building in support that in the past it looks like this partnership level communication support is one area where I see that First 5 played a big role in that. And I just want to make sure that the transition doesn't neglect the importance -- the important role staff have played and need to continue to play and the resources that will be needed in communities for them to be able to do the work

they want to do in these areas. So I just needed to make sure I understand how that becomes explicit in this model.

MS. ANDREWS: Thank you for that question. So using communications as an example -- and we also have the director of communications here and we have had a lot of conversations about this. So we'll use that as an example.

So in the current role, what you see is partnership level communications support. That comes in the form of funds, but also in the -- in the form of First 5 LA staff. So we had staff that would actually go out to the communities and facilitate communications work group meetings and support the communities in the various communication activities that they want to do.

What we're saying in terms of a new role is that that task would be in the hands of community with support of local organizations to do that work. First 5 LA still provides the financial resources and whatever other resources the communities may need in order to build their capacity in that area.

So that's the shift. It may look the same, but it really is a different role for First 5 LA not to be hands on, on the ground, doing the work. And you may recall from an earlier slide one of the design parameters here is that First 5 LA wants to be a partner and not a

doer of the work. So in that partnership level communication support, we were heavily doers in that work. We want to move to being a partner and providing the resources that the communities need in order to do that work effectively.

MS. FERRER: So do the communities end up having access to more investment resources from First 5? You know, to replace the fact that there was a lot of work that was happening with the initial investments, but now we're actually going to be increasing the responsibilities and the roles that would be played by both community organizations and people in the communities. So I'm assuming that translates into an increase in the investments in these communities.

MS. ANDREWS: Exactly. And that's why one of the things that we're doing right now is a cost analysis; what it's costing us now to do this work and then what is it going to look like as we move to a new support model. But it's not the intention that we would say, well, now communications work has to be done in community with no resources from First 5 LA. It's just a different kind of resource from First 5 LA.

MS. FERRER: Makes a lot of sense.

MS. BELSHE: At this committee's meeting next month, that's when we're getting into more of the money

question.

COMMISSIONER MARTINEZ: First of all, thank you. That is was a great presentation. And many years ago, I was at the forefront helping Para Los Ninos with their initial kind of trial Best Start model. So that was really difficult work. And it's great to see it come along so far. So kudos to you all.

Is the regional coordinator based here at First 5 at this headquarters or are they placed in the community?

MS. ANDREWS: They would be in the community. So it would be an existing organization within a -- within the communities that have experience providing the kinds of functions that Michelle outlines.

COMMISSIONER MARTINEZ: That was my question. I didn't know if it was regionalized based here and then customized or -- so it's all based in the community.

MS. ANDREWS: Yes.

COMMISSIONER ZEPEDA: Okay. Jonathan.

COMMISSIONER SHERIN. Thank you. I think I'm (inaudible) some of what you're saying, Barbara, and it may be that I'm new and not knowing the process that you've engaged -- these are uninformed questions.

And I like the idea of delegating down to the most grassroots level possible which gets to my basic question, which is, you know, how much of the need that --

that's being targeted with this program involves the grassroots voice of the consumers so the consumer blends and also where is the opportunity for the consumer role in the work.

Those are questions that I have. That could be difficult because, you know, giving -- like lending a voice to folks who know what -- who really know the need because they're in it but don't have the -- the requisite knowledge they need to be educated. So it's a question that I had throughout your -- talking about community learning. We talk about partners. You talk about dialogue. My sense is that more of that was happening with the providers than with the consumers. And I don't know if that's accurate, but I think that's --

MS. BELSHE: Are you talking about parents and care givers, John, when you're talking about consumers?

COMMISSIONER SHERIN: Right. Yes.

MS. BELSHE: Residents.

COMMISSIONER SHERIN: I'm talking about the residents. Now, you --

MS. LEE: Some of -- some of what's happening for us at Best Start West Athens is that our capacity building has been facilitating classes on how to facilitate meetings, learning what your leadership skills are, how to hone in on those skills, conflict resolution. So we are

being trained on how to manage and handle what needs to happen in our community to help us be able to be self-sufficient eventually. So that has already started. And our capacity builder that's working with us on that is quite skilled and really doing a great job of making us feel comfortable stepping out and trying to take on some of these roles.

COMMISSIONER SHERIN: Yeah. And maybe again, just to clarify because I think some of it may be semantic. Is that dialogue happening at the level of the -- you know, obviously, children are a little early -- young to express themselves, but their families and the older children who have been there who ultimately really -- when you think about a statement of work, that actually needs to be defined by the people that are receiving the care, not the experts. The experts frame it. The experts educate. They elicit the information, but -- you know, I'm just really pressing for deep, deep stakeholder -- that being a core stakeholder and being one that's engaged in an enduring way throughout the process.

When I look here in May, December continued engagement of key stakeholders and partners, I would be worried about how much of that continues to be the voice of the families that are (inaudible.) And I think that -- and it's got -- for so many reasons, not just for getting

the right feed, but also for getting the buy-in that -- that's the network that you really, really want.

MS. ANDREWS: So I think you see a lot of heads nodding and smiles on this side because that really is what Best Start is about.

So that earlier graphic, take your seat at table, we really do want for there to be multiple stakeholders at the table. But the core stakeholders are the parents and residents of the community. So every community partnership is majority parents and residents.

Now, there are organizational representatives that are participating, but it's really the parents and residents that are driving the work. An example would be the community-identified projects. We did something very different here at First 5 LA in the sense that it was the parents and the residents and the providers that are part of those partnerships who really thought about -- they looked at all the data and they thought about what they wanted to focus on. They shared that information with us, and that was the basis upon which we developed an RFP, which is very different because, specifically, it's staff determining what's best and then we do an RFP based on that.

So this is really being driven by the parents and the residents. The issue for us has been how much of this

is really in the hands of community and how much of it is in the hands of First 5 LA. So we're trying to shift from First 5 LA staff being the ones that are doing all of these things and move it to the community-based agencies, but they have to, as Michelle mentioned, really have the philosophy and the values associated with real grassroots organizing and movement and making sure that parents remain at center of this.

The other thing that Mary alluded to, which we did not mention in this presentation, is that we also invest in capacity building supports to all of the community partnerships. So the capacity builder that Mary shared, we have capacity builders in each of the 14 partnerships, and those capacity builders are helping or coaching community members on doing this themselves because if -- you know, they need to be in the driver's seat. So, you know, it's like -- what we don't want is for organizations to come in and take over and then push the parents to the side.

So we're learning some things about the building stronger families framework grant -- the building stronger families grants, the grantees, the relationship between the grantees and the communities, what does that relationship look like, and the learnings from that in informing how we roll out this network -- regional network

coordinator and the subcontracts to local agencies. But, absolutely, the parents are at the center of the work that we're doing.

MS. DESANTIAGO: Two quick concrete examples is, for example, in the community that I've been working with South El Monte and Monte, in their bylaws, their governance structure has to be majority parents and they built it in this way. And then they've been facilitating all of their partnership meetings over the last year and a half, where previously it had been facilitators that we paid for to do that facilitation. So it varies by community, but that is the direction that we're going.

COMMISSIONER SHERIN: Great.

COMMISSIONER ZEPEDA: Commissioner Abdo had a question.

COMMISSIONER ABDO: I may be looking too far ahead, but -- and I like the idea that this is a transition time. So I get that.

What I'm wondering is where we're transitioning to ultimately. And each of these 14 areas will have their own entity and we're still providing the funding to do the things that they each decide to do. Let's say that one entity decides that they want to do some sort of major project that's different from what the others are doing and takes additional funding which they would seek from

other sources, say a foundation or state or something like that. How would that kind of funding get to the Best Start community when they're not actually becoming their own 501(c)3 or whatever, you know, structure they end up having? How would that work? Or is that just so far down the road that we don't have a plan?

MS. ANDREWS: No. And in fact there is a real time example of this Is Metro LA where the owner of the Clippers has invested a hundred thousand dollars because he was impressed at the parents from their evaluation work group actually went there to talk about the work that they're doing, the outcomes that they're achieving. And he was so impressed that he then provided a grant to Para Los Ninos for the continued work of Best Start Metro LA.

The challenge comes when First 5 LA is in the driver's seat. You're right, where does that -- who are they giving this money to. But as we transition to a new structure building upon the current organizations that exist within communities, now there's a lot more flexibility for them to take in additional resources to continue their work.

Having said that, in other place-based efforts, some community groups have decided to become their own 501(c)3, but that's not something that we're going to say to communities that's what they have to do. But we're

building this structure in a way that they're able to start to weave together various kinds of resources both financial resources and in-kind resources in order to do the work that they're doing within their communities.

At same time, we are legally mandated to focus our resources on children to the age of five. The issues within communities extend beyond that age group. So by shifting from First 5 LA to community-based organizations, it also allows the partnerships to get resources to do other work that allows them to now really support -- to provide a continuum of informal and formal support in their communities, but they're limited by just First 5 LA resource alone.

COMMISSIONER ZEPEDA: Deanne.

COMMISSIONER TILTON: Excellent presentations. And people have asked all the question that I have. But one of the questions I continue to have is that this is sort of (inaudible) perspective on community organizations. So it's kind of hard when you try to think about what exactly are they providing and what is the outcome and how are we showing the difference between -- from the time we are involved and are not involved. I had a question about, what does this mean to First 5 financially over time. Are we going to be -- continue to invest the same, more, less, given our declining

resources? How does this fit in?

So at some point I would like -- not today, but to have a discussion about what are they doing and what is the outcome and what are the families saying and -- to get a better sense of where is home visitation, you know, initiative, how much of that is making people aware. And, of course, my concern is how -- how well are we preventing harm to children and families? Are we affecting issues like domestic violence? Can we handle that with the kind of approach that we're taking or is that something somebody else has to deal with whereas sort of the parents support group -- envisioned as a parent support group when that should include safety.

So that's my question. At some point, if we can talk about what -- you know, what differences are we making.

I also noted that we're doing transition implementation in one month, and that's December, which seems like the worst month to try to do two major projects, both transitioning and implementing when we're going to be celebrating a holiday. You know, is this thought through -- something that we thought of or is this really something that November is --

MS. ANDREWS: Right. So our initial thought here would be that -- was that we would bring contracts to the

board for approval in November. And to start to have -- to start the transition process at that time. But as we mentioned in the presentation, you know, the -- as time passes, we began to do some reality checks about what's doable and appropriate given the level of engagement that we really want to have throughout this process. So we are looking at timeline and thinking through, you know, how the timeline may be able to be adjusted in order for us to really move in the way that we want to.

And to your other questions, these are things that we are still thinking through. In fact, we are looking now at BSF grants, the building stronger families grants, and saying, what are we learning from those. And we do have the intention to bring those learnings to the board in the coming months.

And the other questions we have definitely noted so that we can address those.

COMMISSIONER TILTON: Thank you.

COMMISSIONER ZEPEDA: Okay. We have another question from Commissioner Nichols.

COMMISSIONER NICHOLS: I'll move the mike so you don't have to jump up out of your chair.

I'm going to ask the same questions that other people have asked. So please, be patient with me, just in a different way. I have to hear the answers two or three

times before they really start to sink in.

Going back to Dr. Sherin's questions about the input of the actual consumer. You know, we have two levels to answer that question on: One is in the design of a system, sort of the building of a machine, which is what we're talking about now. And then one is in the ongoing work. Once we've built that system and the machine is turned on, how are the consumers impacted. So we talked a little bit about, once it's turned on, this is how the consumers will be involved, they'll convene their own meetings, they'll be -- input from them to the -- I can't remember the name -- regional network coordinator. But what about their input into the design of the machine, to the conversation we're having now.

I looked at slide 13 where we talked about how we've gotten to the place we're at today and the models we're discussing. And I didn't see on that slide -- and I don't mean that in a challenging way, but I didn't see input from the actual families, input from the consumers.

So I was wondering if you could just talk a little bit about what input we've received from them to sort of the blueprint for what we're talking about.

MS. DESANTIAGO: So the families are represented in the partnerships. So the partnerships are largely a majority of parents and residents or care givers who are

maybe grandparents who are taking care of their kids or grandparents who are helping with kids. So a lot of that perspective is represented there. And the transition teams representatives are supposed to be a bridge. So they hear the information from First 5 LA. They relay that information over to their leadership groups and their partnership groups. They get feedback and they bring it back to us. So that's been the current mechanism for doing it. Parents and families are also more than welcome to participate directly in the feedback sessions.

And then of course there is a network of community connection groups and neighborhood action councils that we do with resident engagement. And those are also families that are hearing about this process and are able to provide feedback.

Anything you want to add?

MS. ANDREWS: Yeah, in January, so January 27th, we actually convened a leadership group. So every community partnership has a leadership group, a body made up of parents and residents and organizations. As Michelle mentioned, 51 percent in a lot of the bylaws have to be parents and residents. So we convened over 150 people in January to share the presentation that you received today with, of course, some -- some tweaks. They actually received more information. Because we want to

make sure that they are involved and engaged at every point in this process. So they're -- they're definitely there.

COMMISSIONER NICHOLS: Great. Thank you.

And I want to talk a little bit about the regional network coordinator and this kind of, as I think of it, a hybrid model between regions and communities. First just to make sure I understand it, so we would be a grant awarder to the regional network coordinator who would then work within communities to convene them, set their priorities and provide them, as I think of it, sort of administrative assistance in achieving their goals. Is that roughly correct?

MS. DESANTIAGO: Exactly. So I'll go back to that slide, but the regional network coordinator is really just -- the role is to convene. They'll be subcontracting to local organizations and those local organizations will be providing support. So, for example, in one -- any given community, there might be organization ABC does the top three of the orange boxes, and then maybe there's another two organizations that help support the other four. There might be a group of three organizations that are local to the community that know the community. They'd already be part of the partnership who then provide those additional supports.

COMMISSIONER NICHOLS: So then do we expect a lot of variance between what the regional network coordinators look like and do and sort of their jurisdictions? And in part I'm interested in a comment Ms. Lee made about accountability. Will they be accountable back to us for achieving the goals and outcomes that both we're interested in achieving but also that the communities want to achieve? That all sort of falls on the shoulders of the regional network coordinator.

MS. DESANTIAGO: Yes. They will be accountable to us and we do want to have direct contact with the partnerships throughout the process and once it's implemented to make sure that they are able to share either, you know, thumbs up on quality or some uncertainties or concerns about the quality of the people providing the direct support. In addition, there will be -- there will be definitely some places where we have to figure out how that relationship works between the regional network coordinator and the local organizations.

COMMISSIONER NICHOLS: You know, I mentioned -- you were going to say something.

MS. ANDREWS: Well, your question is also pointing to our next phase of this work, our next step, which is to work out the details of what is -- what is the regional network coordinator really accountable for And

what are the local subcontractors accountable for, and who are they accountable to. So one question that we're asking ourselves is, what is the level of First 5 LA involvement in the selection process and management and oversight of the local subcontractors.

So we haven't -- we haven't answered those questions yet. We're right now near the end of, what does the structure look like. And then now specifically what does it mean for each of these various levels and how we're going to go forward with it.

So when we come back in March, we're going to talk about some of these implementation considerations.

MS. ALTMAYER: I was just going to say, one of the factors that we have to take into consideration is that the Best Start communities have often been under served and they may not have the significant number of organizations that are working within that community that maybe meet the complexity of sometimes contracting with a public agency. So one of the advantages that we hope is that, through this regional model, that we'll be able to engage very local community-based organizations that could do some of the functions that are identified here at the local level that can support communities, particularly if they've been heavily invested in that communities. But they may not have the sophistication that often as a

public agency we requires.

So we also see this as an opportunity to strengthen important very local community-based organizations.

COMMISSIONER NICHOLS: And that will be the role of the regional network coordinator I assume in addition to First 5. I mean, we have to share the vision with communities that don't understand sometimes what resources are available and what would be possible and how you work with a department and what they might need to bring.

And just in terms of setting the goals and outcomes, would that be the work of the communities in conjunction with the regional coordinator or would that be coming from us or some combination of the three parties?

MS. ANDREWS: It's really a combination of the three parties. One of the things that we have kind of -- what we've learned is, when we first started Best Start, we started with three big goals which were a part of our strategic plan at that time. And then we switched to the building stronger families framework that really looks at the protective factors, sort of have more of a narrow focus on the protective factors. We're now trying to find the sweet spot because, when we made it narrow, then that -- some of the things that communities wanted to do no longer fit into that narrow box. So we're looking back at

generally what are the outcomes that we want to see within communities. And to provide sort of like a bucket for communities, sort of the like the parameters for First 5 LA. Within that, what are the outcomes that you want to achieve, what are your priorities within those outcomes. And then we support those particular ones.

So those are the -- that's more of the work that we're still trying to do just based on lessons learned. That's not to say that we aren't seeking outcomes and we haven't been over the last six, seven years, but we've learned a lot about what it means to be overly broad and where we -- where we -- sort of like the pivot to being overly descriptive and we're trying to figure out what that right balance is.

COMMISSIONER NICHOLS: Thank you for that. That helps quite a bit for me.

I have one last question I promise, then I'm going to hand the mike over. You can cut me off. I have a question about the balancing of resources. I assume that we will be responsible and we're going to have at our next meeting some discussion of the fiscal side of this, but we will not responsible for balancing the awarding of money between regional coordinator and regional coordinator, but between community and community underneath the regional coordinator. Once the money

leaves us and goes to the coordinator, are we sort of out of that discussion and then the communities can negotiate amongst themselves nd the coordinator for allocation of resources or is that a role that we will continue to have some responsibility for?

MS. BELSHE: I might suggest in the interest of time, we're going to be spending more time at the next meeting getting into some of the dollars. So if you would be willing to --

COMMISSIONER NICHOLS: Absolutely.

MS. BELSHE: I know it will drive you back to PPC next month. But really good questions. All of these are really good questions. But I'm also mindful we want to hear from the chair and we also have a couple of community members who'd like to speak.

COMMISSIONER ZEPEDA: I want to assure the commissioners that the parents are at the heart of this activity. I have been out and visited a number of Best Start communities. I've sat with parents. I've seen the facilitators, the coaching that goes on for leadership.

I think that Mary's issue of an advisory committee for the transition is a good one. That's something I think we need to keep in mind. Also, in terms of equity and fairness -- I think that's what Commissioner Nichols was kind of alluding to right now -- and the

distribution of resources is going to be a big issue and we need to kind of be mindful of that. I know that there's a lot of implementation, but I think we've been transitioning for a while now. So I actually think we are in a period of transition. And I think that the commission has been done a really good job of talking to all the stakeholders, having systematic meetings with everybody to try to get input. So it is a complicated program. And so we're going to have a lot of time to talk more about this. So I won't take up any more time on this.

And thank you, Mary, for sharing your -- your experiences because it's really important to hear from who the people are on the ground as opposed to us over here.

So we have a couple of public comments.

SPEAKER: Should I stand or -- I don't know whether to stand or --

MS. BELSHE: You like to stand.

SPEAKER: You guys got me so nervous.

First of all, I want to say thank you everyone for being here today and allowing me some time to speak. I think the Best Start that we talked about in 2009-2010, is a whole different animal today. And I wouldn't say we're in transition. I say we're in the evolving phase of it. We're evolving, constantly changing, improving. I

would like to say that we're improving and there's some times we take two steps forward and we have to take a step back. But I'm happy to see that Mary sitting up here at the panel table, and I think -- I would like to think that that's because, you know, at the transition team meetings we have been constantly letting First 5 staff know that we needed a position up here, that we needed the community voice, that we needed the parents' voice. And I always felt that, you know -- and I hear from the questions from the commissioners that you want to hear the flavor of the parent, you want to hear the flavor of the consumer, you want to hear the flavor of what the residents are thinking.

As an older father, I have a child of 22 months in Compton. I recently bought a home in Compton. So I'm a homeowner. I have a big investment. That child is my investment and the community members that live in and come to our partnership, those parents that dedicated tens of thousands of hours since 2080 -- it's mind boggling to me if I try and tally up how many hours we spend on this project. And the reason we do it is because the resource that we're bringing to the table is our kids, the most valuable resource we have. The reason it continues and we don't give up on Best Start, we don't give up on First 5 is because our kids our valuable to us, you know.

We wouldn't have First 5 if we weren't out there collecting signatures for Prop 10, the tobacco tax. So it was the communities that were out there that were signing that we wanted that money to go to children zero to five. We did it. And the way we're going to make Best Start work in our communities is we do it together here sitting at the table at the same level playing field.

I believe the experts are not you guys. I think the experts are us parents living in the communities that we're trying to transform and change. I think you are the intellectuals and the political class that can help us achieve loftier goals through the political process and making systems change. But one of the reasons that we wanted Mary, one of the reasons that we want an advisory group is we can't be strong advocates if we can't advocate within the structure that has helped form us.

So we really need a seat at the table here. And just for us being here and being able to speak this way, be careful what you wish for because you're going to get it. And me speaking here, (inaudible) each and every one of you means that Best Start is working because this is what we're supposed to be doing. Those of you that were at the commission meeting last month when I brought a teen father that came to the program when he was just 15-years old and he came and was able to speak to the commissioners

and talked about how Best Start transformed his life and how now he understood his role and how his role impacts his child zero to five and how he wants to help other fathers, young fathers make that same change and that transformation in his life and the transformation in his community. You're doing the right things. We're doing the right things and we're headed in the right direction.

Thank you very much.

COMMISSIONER ZEPEDA: Thank you.

SPEAKER: I'm Kathy Schreiner. So I'm with Best Start Panorama City and Neighbors. And I won't try to follow that just to say that we do appreciate that First 5 has kind of slow downed this process enough to be able to let us have input and have these extra special meetings. So that's been very helpful. And also just to say that we'd like utilization with customization, but there's a lot of details to be worked out.

COMMISSIONER ZEPEDA: Thank you, Kathy.

I appreciate the comments. It's important to know that we do not walk in your shoes, so we need to know what the perspective is on these programs as we go forward. So thank you for that.

Let's move on to next item. We have a break. Okay. Ten minutes.

MS. BELSHE: We thank, Mary, again for joining

us. It's perfect timing to have the benefit of your insights. And at First 5 LA, it's a big ding-dang deal with people present for the first time, so we will want to give you a very special chocolate chip cookie to honor that. And, Michelle, to acknowledge your initial presentation and thank you for your steady and thoughtful and community-centered leadership throughout this process. And, of course, Antoinette, you've had many cookies.

MS. DESANTIAGO: Thank you for having me and I will be back.

COMMISSIONER ZEPEDA: So ten minutes. Thank you.

(A brief break.)

COMMISSIONER ZEPEDA: Can we get back together?

MS. BELSHE: Can you shut the door for us please? That's always a subtle way of letting people know.

COMMISSIONER ZEPEDA: So is Tara going to be presenting?

MS. BELSHE: Tara is going to tee things up. Oh, hello. Over here. Shiny object. Okay. Can we -- Lisa, everyone? Thank you. So much.

COMMISSIONER ZEPEDA: All right. We're moving on to Item Number 7, developmental screening update. And we have Tara Ficek and -- I'm so blind -- and Wendy are going to be presenting. Okay.

MS. BELSHE: Tara Ficek, take us away.

MS. FICEK: All right. So thank you. Good afternoon. So before we get started, I just want to say there is a lot of information here. We put -- everybody just had their break so they're ready and focused to dig into this. But we really wanted to provide kind of whole picture in order to kind of appropriately set the stage and really have you understand the work going forward.

So diving right into the presentation goals. We're going to first start with the current status of our work around early identification and we're going to start with an overview of the health systems outcome area. We're then going to share some detailed information on the latest efforts related to early identification and intervention. And that's going to include an update on our Help Me Grow LA implementation. And then finally, we're going to close with the latest on the LA Care pilot project opportunities that, of course, aligns with our work in Help Me Grow. And giving that update is going to be Wendy Schiffer from LA Care health plan.

All right. So as all of you know, our 2015-2020 strategic plan does include four outcome areas: Families, communities, early care and education, as well as health. So starting with that overview of our health outcome areas, it does include two strategies: Early identification and intervention, as well as

trauma-informed care. Both of those focused on systems change. And today's presentation is going to focus solely on early identification and intervention, but to offer you something on TI care. A quick reminder, our trauma-informed care work does aim to build provider capacity to deliver trauma-informed principles, policies, and practices to kids zero to five ultimately to improve how services are coordinated and delivered to young children and their families.

So we do expect to be coming back to the board soon with a more detailed update, including the information obtained from our recently completed countywide environmental scan that was just -- the draft was just submitted on Monday. So how that will then inform the actual plan around trauma-informed care we are going to be coming back on that. So stay tuned for a summer update on trauma-informed care to the board.

So language in our strategic plan does identify that for early identification and intervention, First 5 LA will focus on increasing the effectiveness and responsiveness of screening and early intervention across health, mental health, and substance abuse services systems. And our primary strategy within this is to then specifically advocate for policy and practice changes to support efforts to improve that coordination and

functioning of developmental screening assessment and early intervention programs. And in order to do that systems coordination improvement, we have committed to implementing Help Me Grow in LA county.

So before we get into the specifics of Help Me Grow and its ability to improve that system's coordination, let's begin with a problem that lies at the heart of early identification and intervention, which is in California one in four children are at risk for a developmental behavioral or social delay. And even though the American Association of Pediatrics recommends, of course, ongoing developmental monitoring which includes screening with a validated tool at nine months, 18 months, and 30 months well-child visits, screening at 18 and 24 months. But on top of that and despite the fact that developmental screening of course is a covered benefit as a result of the Affordable Care Act, many physicians still use a wait-and-see approach to developmental delays or informal discussions, observations, and their own quote/unquote experience to identify a child's delay.

So what does that result in? Many kids of course escaping early detection. On top of that to further the problem, even when needs are identified, getting families, of course, connected to those services is a challenge due to that fragmented and siloed systems of service.

So let's talk about that fragmented and siloed system of care. This is a visual of more or less the current early identification and intervention system in LA county. Across the top you're going to see the five kind of core steps or stages. Listed underneath are the key players performing specific activities to allow movement through the stages. So starting on the left side, you can see we begin with surveillance, which is not just that doctor -- in doctor's offices at well-child visits, but ideally does include multiple across ECE, home visitation programs, child welfare, health and mental health as well. And that's really -- surveillance is being defined as a process that does include eliciting parental concerns, documenting a developmental history, routine observation, identifying risk, and of course protective factors.

Then we move towards screening, linkages, and referrals, continuing to move across toward the right. It becomes clear then when systems such as regional centers or the school districts get involved and, of course, that's once a screening identifies a significant delay. And then of course how those systems continue with those children through services.

So if knowing this is the system or systems we're working with, you know, it's clear a lot of challenges when you involve this many players, but also a lot of

opportunities. So know that when we do add Help Me Grow to this, which, again, is a model or a framework that needs to coordinate and connect systems to better identify kids at risk, getting those kids early and then getting them connected to community based services. The visual then helps us see how Help Me Grow works across these systems to facilitate greater access and collaboration, how working across the stages building bridges where there are gaps and also creating connections among, again, a very diverse group of players.

So this next slide is really trying to help us better understand the population of LA in their kind of level of developmental needs. So it's certainly heavy jargon on this slide, but just to dig into it to have it kind of at its basic -- basic understanding of it. The bottom rung represents kind of a hundred percent of the general population. And knowing that ideal is kind of getting to that kind of hundred percent of surveillance or developmental monitoring in place again across parents, primary care, pediatricians, ECE providers, home visitors, et cetera.

Then within that 100 percent, up to 40 percent will require some form of secondary screening or assessment. And it's going to include a more formalized speech and language assessment. And then some of these

kids are then, of course, are moving onto the next stage, which gets to that 20 percent, again, requiring a greater level of assessment.

And finally getting to that top tier up to that six percent will require some sort of fuller level assessment and ongoing longer-term therapy in supports and services.

So when we often think about when it comes to early identification and intervention, it's often this top tier that we're talking about or thinking about. And when you think about the current system in LA county that we kind of went through on the previous slide, it is often focused just on identifying and serving that top tier.

Well, the needs of those kids in the lower tiers, often those with mild and moderate developmental delays, are not getting addressed. And that really is kind of at the heart of Help Me Grow in identifying those kids with mild and moderate delays.

So why is that? Why are these children in LA county falling through the cracks, those that are falling into the mild and moderate delay? What's happening? Why aren't they getting adequately screened and identified and therefore not being connected to services and supports. So we've dug into this a little bit and we certainly have identified themes that run across both families and

providers. And those essentially come down to lack of time and lack of knowledge. So you'll see starting with families, parents are often aware of the importance of screening. So don't know to ask for it or to push for it with their providers. And then, even when they do express a concern, it has been identified that providers don't perform the proper screen.

So you may be wondering why is that. And it's oftentimes comes down to a lack of training for those providers regarding assessment tools as well as a lack of understanding of the referral system and the process and the treatment for kids.

And also of no surprise we all know this, that providers are under an enormous amount of pressure to cover quite a bit in that well-child visit. Competing demands obviously limit providers' ability to complete a screening with a validated tool.

Okay. So now that we've captured the challenges, let's kind of pivot and think about where are the opportunities.

MS. FERRER: Can I ask one clarifying question about the tools? Because I don't see this as an issue that got raised around the cultural confidence and the (inaudible) confidence about being able to talk about this or ask about this. So I wanted this issue to come up --

that one of the gaps is that, you know, there's a difference in people's understanding, you know, the ability to give -- communicate well. A lot of the tools that --

MS. FICEK: -- are not available.

MS. FERRER: -- multiple languages and not necessarily culturally appropriate. So I just wanted to make sure that that wasn't an issue.

MS. FICEK: In this particular, it didn't stand out as a primary issue here. I don't know if Wendy may get into that a little bit in the gap analysis they did with providers at LA Care. But that's certainly an issue that has surfaced in our first connections work which is an investment we currently have around developmental screening and care coordination around language access and the lack of tools that are available in languages other than English and Spanish.

So let's now kind of dig into Help Me Grow. So back in 2015, staff did identify that the Help Me Grow framework or model is an ideal response to the many early identification challenges and issues we just shared with you. So starting with kind of a definition, Help Me Grow is a system. It is not a program or a set of services. But a system that promotes early identification and connects at-risk kids to community-based programs and

services that they need. So it was developed initially as a pilot program by Dr. Paul Dworkin in Connecticut. Help Me Grow is either county based. Here in California there are 18 counties currently implementing Help Me Grow or close to implementing Help Me Grow, which is pretty impressive considering just six years ago there were only three. And then or it also can be stated based such as with Connecticut or Florida. Currently there are 23 states employing it.

The Help Me Grow system does support both providers and families in order to promote early detection of delays by establishing developmental screenings of the appropriate times throughout a child's life. It also includes constant promotion of this optimal child development. And in addition to promoting screenings, Help Me Grow also provides a centralized access point -- this is key -- where providers and families working with children can get information on child development as well as referrals in connection to the community services.

And then, lastly, Help Me Grow does work to develop a well coordinated system of care and, again, supports that greater access, facilitation of access and collaboration throughout a county.

Digging in a little bit further, at the heart of Help Me Grow lies these kind of four central components

that are essential to its success. So the first component is outreach and education of health care providers. And this is really -- the purpose here is to educate and motivate physicians and other child health care providers to certainly conduct the developmental screening and that surveillance from birth to age five, also to use the centralized access points -- we'll talk a little more about -- and also to systematize developmental surveillance and screening and the use of Help Me Grow in their practices.

The second core component is community outreach. And this is where it's focused on promoting the use of Help Me Grow and provide networking opportunities among families and in communities. This is getting to the presentation we just heard from the communities department. This is the point and the kind of key point in Help Me Grow where families have their voice, families are a strong participant and connected to the work of Help Me Grow.

The third core component is data collection and analysis. This obviously is where identification and gaps in services and systems and barriers are identified so there's -- the focus here is around the collection of data that reflects system level issues, and that data can then be used to support policy and advocacy efforts to improve

on the systems. There are requirements around indicator -- national indicator data collection that, as a part of Help Me Grow, you commit to collecting. And then there's an agreement across the state to collect on certain data as well. So that's all coordinated and aligned.

And then the fourth is, again, that centralized access point. And that's, again, this kind of go-to resource for family members, child care providers, and also other professionals who are seeking this information, support, and referrals for children. And many Help Me Grows in California and nationally, it has been set up as a call center. However, as we know with the evolving use of technology and how parents and even providers use technology these days to communicate and connect, it's important to think about how parents access and resources and information is maybe not just through a phone call anymore. So given the different ways in which parents and providers are accessing information, a centralized access point in LA could utilize multiple modes of communication through either web-based, telephonic, and social media platforms.

In addition, there are three structural requirements. Quickly, the first one is the organizing entity that provides the administrative and fiscal support and oversight and often coordinates the work across the

four components. The second is the commitment to continuous quality improvement. And then the third is the structural requirement around expanding statewide and, as I already mentioned, 18 counties are on board in California. Our Help Me Grow affiliates or will-be-shortly Help Me Grow affiliates with the First 5 Association playing the coordinator role to promote sustainability and growth as well as data analysis, support, and also push for advocacy and policy activities.

So now that we have this understanding of the Help Me Grow model and we know it's the approach we're taking -- where are we at with implementation. So as I just reviewed, the four Help Me Grow components, they do serve as that core focus of Help Me Grow LA and we have established work groups that are then structured and focused on each of those areas and at the center guiding the early development and implementation process is our leadership counsel.

The exciting thing about Help Me Grow I would say is this level of participation and engagement across multiple sectors, in particular strong participation and commitment both from ECE and health. This is certainly one of those unique moments where the ECE world and the health world are both coming together to kind of tackle the problem around early identification and intervention

and collaborate on a solution. We've also set up a Web site to kind of track the latest and to share information as that comes up in the leadership council.

And just to give some highlights on the leadership council, we launched it early fall of last year. The work groups just started last month in January. The leadership council alone including over 30 agencies representing health, ECE, community-based organizations. Six of the seven regional centers are participating. It's an important highlight. This is a partnership we typically had strong participation with at First 5 LA. So it's exciting to see them get involved in varying ways committed to the work. We have strong health participation through the American Association of Pediatrics, the FQHCs, LAUSD, LACOE, the Child Care Resource Center Referral. Agencies are participating as well. There's been kind of a very diverse and consistent participation and exciting to see all of these entities coming together to tackle the challenge.

We meet on a regular basis. This is going to happen through September of this year. And we are responsible for developing the recommendations that will then lead to the implementation of Help Me Grow LA. And just to give you some ideas on some of the key questions or issues we're tackling as a group, we're asking about

how can we best leverage existing resources within the communities, build on what's already there versus creating something brand new out of the box. How can we introduce parent voice? How can we introduce parents' input and participation in the work groups in a meaningful way to help shape the design of Help Me Grow LA? How can we better integrate resources across the county? How comprehensive will our screening tools be? Are we going to focus solely on developmental screening? Do we want to open that up to trauma or other areas? The Help Me Grow model envisions one centralized access point. Is that realistic in a county as large and diverse as LA? How about a regional approach? What would that look like? Could we think what that would possibly be?

So just to give you an idea, this group is certainly taking on some of those challenging but important questions right out the gate and certainly being ready to tackle those and what that could be mean for implementation in LA.

So now that we have a sense of the what and the how, let's shine a light on when quickly. This is our timeline that was developed by the Help Me Grow team last year as we embarked on rolling out Help Me Grow. At the top, of course, is partnership building, which continues throughout the year as well. You'll also see on the left

is the official launch of Help Me Grow that we did back in May. And then moving into leadership council and work group meetings, again, which are taking place throughout the year and then ending this year with identification of the organizing entity.

Okay. So now, as hopefully it's clear to you, partnership building is an important guiding principle of our strategic plan and, hopefully, it's clear it's also crucial to the success of an effort like Help Me Grow. So joining me for the remainder of the presentation is Wendy Schiffer, senior director of strategic planning at LA Care health plan. And LA Care joined First 5 LA as a prominent partner in the early planning efforts of Help Me Grow. Their commitment remains as they continue to guide and participate in the rollout of the leadership council and also are cochairing the child health provider outreach work group with the LA County Department of Public Health. The child health provider outreach work group obviously is where their expertise and where they can contribute in a meaningful way to the work. So given LA Care's significant reach -- right? One in five LA county residents are enrolled with LA Care. They cover an estimated 38 percent of the county zero to five population. They have a pretty significant provider network of over 2,600 providers. So we see LA Care as an

important and of course uniquely positioned partner to achieve broader impact for countywide early identification and intervention efforts.

So considering their important role as our cochair and, again, playing an important role in our leadership council, I want to hand it over to Wendy to talk a little bit about the potential pilot project opportunities that can further inform and guide in the light with the work coming out of Help Me Grow LA.

MS. SCHIFFER: Sure. Thank you. I don't have to tell you who we are now. Thank you for that.

So, obviously, we have interest in Help Me Grow because we want to increase access to developmental screening and resources for our members. And it feels like the low-income population has more access problems and sort of aren't as oriented towards identification of problems. So it's very important to us to increase access for our membership. And we just provide -- our purchase patient provides a great opportunity because we contract with all of these doctors. And so, you know, we have that reach and ability to offer CMEs and there's a number of different ways that we can get our providers. And as Tara said, the head of the DPH's CHDP program and I cochair the provider work group. So it's like, between the two of us, we've got all the providers covered.

So we are embarking on a pilot project that I'm almost kind of viewing as a HMG, Help Me Grow, readiness program because we just -- we're doing it in conjunction with Help Me Grow. So we're very involved in Help Me Grow. But it's like, let's kind of start looking at what we can do with our providers to kind of prep the -- you know, the groundwork to get us ready for Help Me Grow.

So I'll talk a little bit about the pilot. So we're doing it -- so the goal of the pilot is to increase the providers use of providing developmental screening using validated screening tools and -- and so really the first phase -- we're doing it in three phases. And LA Care is going to fund the first phase, which I'm kind of calling the prediscovery phase, which is just -- we know a lot of stuff. We know what a lot of the barriers are. And we also know some successes too. But let's pull all that together. Let's do a deeper dive to kind of see how -- what really are the barriers to providers doing developmental screening using tools and how can -- so let's look at work flow and how can we -- how can we address this and what really is the appropriate venue for screenings and -- but also let's look at what's worse. So, for example, the first connections program did exactly that. And so we know some things that have worked. So let's take the learnings from that and let's incorporate

it to here to figure out like, you know, what are different models of -- that were in provider practices to increase use of screening.

So for the first phase is kind of doing that deep dive. And we did work -- we did hire a consultant, Dr. Greg Stevens from USC a while ago. And he did a preliminary gap analysis just to look at, are doctors doing screenings, are they using tools, why, why not. This would build upon that work. But also, as I said, bringing in a lot of things that we know, particularly first connections.

And I just want to emphasize that we're doing this in parallel to the development of Help Me Grow. So having the provider work group where this is kind of helping to inform what the pilot project should be. So we'll have the consultant. We'll also have the providers, some of which are doing screenings, some of which maybe are not doing screenings weighing in on also what would work and what wouldn't work, so we can build out what the pilot should look like and then we'll start with a small group of providers and then expand it from there. And I feel like by the time we are beyond the prediscovery phase and into implementation, Help Me Grow planning will be further along and we'll just be better poised to say, okay, let's try these three approaches or this one

approach and give it a go.

So I just do want to emphasize that it really is an integrated process and not just kind of the stand-alone pilot over here and Help Me Grow over here and First Connections over here. We're pulling it all together.

So questions about the pilot or?

MS. FICEK: So we will be back. Future conversations with the board around early identification and intervention are coming soon. So as I mentioned, Help Me Grow did begin in Connecticut under Dr. Paul Dworkin. And guess what? He is coming out here to talk to us about all the exciting lessons learned, not only through Connecticut but obviously plays an important role in national Help Me Grow and what they've learned nationally related to this work and how we can then, of course, use that learning to help further guide and support our Help Me Grow LA implementation. So that is going to be incredibly exciting. I'm looking forward to that.

And then of course moving forward, we would be bringing back for board approval the strategic partnership with LA Care health plan to implement the pilot project. And we plan to be coming back in the summer around board approval for that. So that's where we would offer to the board additional details, specifically on the activities that will be included within the pilot and, of course,

present the budget, the cost, and have the board review and approval of that.

And then we can open it up to questions. Before I go there, I do have to do a big enormous thank you to the entire Help Me Grow team. What did Michelle say? She drew the short straw? It takes a village to put on a program and planning committee meeting presentation. It's not a solo effort here. So I want to say thank you to the kind of past and current Help Me Grow team. So Rena in our family supports department as well as the current Help Me Grow team here which is Mercedes, Christina, Karen, and Janaya and also Ruel in our policy department.

COMMISSIONER ZEPEDA: And the children are part of your team.

MS. FICEK: My children, of course, yes. On the left are mine, Sammy and Mattie. Sitting on the steps of the Jefferson Memorial eating a Hershey chocolate bar. doesn't get any more American than that. And then Diego and Isabelle, which are Mercedes two children on the right.

COMMISSIONER ZEPEDA: Thank you very much. Questions. I think Commissioner Abdo has a question.

COMMISSIONER ABDO: Yes, I have comments. I guess I -- I have taken on the role of looking at language, and I'm concerned about the word surveillance.

MS. FICEK: I knew I should have preempted it. I agree. I don't like the word. It certainly isn't family or community friendly. It is the term that is used in the early identification and intervention field. We do not have to use it though. I tried to limit it as much as possible. Say developmental monitoring and screening.

MS. BELSHE: Okay.

MS. FICEK: -- military police reference to it.

COMMISSIONER ABDO: And now an ICE reference, which is even more difficult and that's -- that's the subject I want to bring into this.

We talk about trauma. And until four weeks ago, I think we were talking about domestic violence. We were talking about poverty that is affecting families in really horrendous ways, but now there's a new trauma. And in some ways it's really within the last 20 days I would guess of many, many families in fear about getting a knock on the door, about getting a knock on the door when kids are in school and what's going to happen when they're taken away. And this is new. It's -- it's new as a giant problem. It's been a problem for some families all along. But it is new and huge to use the word that I am borrowing.

And it seems to me we need to address it because it's really a different kind of trauma that is affecting

families and people of all ages, but it's going to be particularly -- you know, young children who are not going to understand it. But they're going to have families in fear of many, many things. Fear of asking for help. Fear of showing up at places. Fear of going outside. Fear -- fears that we haven't thought about for a long, long time.

So I -- I want to add that into the mix of the discussion here. And I think that Help Me Grow is a place where it will be really important to include that as a huge piece of what's going on.

MS. SCHIFFER: If I could just comment. At LA Care we are very aware of that because we -- all these SB75 kids that were undocumented that became eligible for MediCal from Health Kids. And sometimes families, they start to apply and then they're like, oh, wait, pull us out, we don't want to. And we are working with them to try to encourage them to avail themselves of the benefits that they actually are eligible for. We've started working with community groups to -- that are working on know your rights. And so it's very much -- we've started to feel the affects and we've heard our providers talk about what their experiences. It's very much on our mind. So I do feel like it needs to be incorporated into --

COMMISSIONER ABDO: And do you have to ask for immigration status before you provide services?

MS. SCHIFFER: I don't know al the -- because we're the health plan. So they apply in a more upstream like DPSS, but -- so I can't tell you everything that they look at there, but -- so by the time we get to them, they're already have been prescreened by DPSS.

MS. BELSHE: For the publicly funded.

MS. SCHIFFER: Right, yeah.

COMMISSIONER ZEPEDA: Other questions? Barbara.

MS. FERRER: Thank you. I think this is a great initiative and you've obviously done tremendous thinking on it, and I think it's so important.

I did want to go back to sort of the four components and just ask what the thinking was on focusing primarily on child health providers and not including early childhood educator providers and what family -- day care providers, you know, other places where young children always show up. And while they can't do the full screening tools that USPT mandates or that would happen in a medical office, to be honest, they spend a lot of time with children and they often are the first eyes on issues that should be of concern.

So I just wondered if there was any reason that you thought we could get to them a different way or because I -- you know, my experience -- they talk a lot to parents, almost every day some of them, and particularly

informal family day care providers. And they often really do -- because they have years and years of experience with children, they often pick up on issues well before other people do and can -- and often are in really deep communications with parents around --

MS. SCHIFFER: They are actually on our provider work group so they -- the more that we meet, the more I realize that having like this ideal that I have every doctor that treats a child is going to do a screening at the appropriate time is like, not what it's going to be for all the kinds of reasons. And so it really does have to be a variety of different types of providers at different touch points. So they're on our work group.

MS. FICEK: I would say there's also strong representation at the community outreach groups. So chairing -- cochairing our community outreach group is the FRC, Family Resource Center. So their voice is certainly represented and their perspective and input. And like I said, they're such a variety of ECE representation across really all of the work groups. So I do see us being able to capture that unique experience and that access that they have to kids.

MS. FERRER: And really supporting their own learning. They are providers. So I love that you look at them as providers.

MS. SCHIFFER: So then we just have think about coordination because we don't want to screen kids, you know, like they're being screened everywhere they go, so how do we coordinate that.

COMMISSIONER ZEPEDA: Any other questions? Deanne.

COMMISSIONER TILTON: This is excellent. Thank you so much. It's very encouraging and I -- I'm just sitting here thinking about what Judy had to say and how we have a really incorporated that because we're kind of on the edge of it and we're a little bit hesitant to get involved politically. But on the other hand, this is a reality. I see it, even in my own staff, young people fearing that their parents are going to be sent away. And so it's -- it's something I think we have to think about how we think about. We have to really decide what we can do and what we want to do and realize it's a reality. It's a huge one. So thank you for bringing that up.

I think it would be helpful -- I have a couple of questions. I think it would be helpful if we talk about what we're preventing because we talk about early intervention and prevention. And we really haven't said what we're preventing. So I think that would -- there are a lot of things we're trying to prevent. And so if somehow we can do that -- and I won't list them off with.

I notice we don't include anywhere the ACEs factors, the ACE predictors of outcomes that are -- that is very much a part of our thinking now in terms of intervention.

Also, I really just ask -- I should know this. Are the 12 community child prevention councils involved in this in any way?

MS. FICEK: I have to double check if they're -- I mean, ICAN is certainly participating in leadership and in our work groups, but those entities specifically, I don't know. I would need to check on that.

COMMISSIONER TILTON: They're very grassroots in dealing with the issues we're talking about with a focus on preventing harm; but on the other hand, they're very representative and unique as a group.

MS. FICEK: Okay.

COMMISSIONER TILTON: Okay. So I think they do --

MS. FICEK: I'll reach out and see --

COMMISSIONER ZEPEDA: Other questions? Judy.

COMMISSIONER ABDO: Just kind of building on what Deanne said, do you have -- do you have legal representatives or do you --

MS. FICEK: We have reached out to Children's Alliance and other legal entities to bring that voice and

perspective for both leadership and all the work groups.

COMMISSIONER SHERIN: I have a question. I'm assuming if this is national initiative that centralized access point is seen in many different phases. I'm wondering what that looks like here if you know whether, for example, 211 is one of the things that's being leveraged or considered.

MS. FICEK: It is something, yes, we're thinking about. 211 has certainly come up in conversations again. The focus of Help Me Grow is to build off and leverage existing services and not create something entirely from scratch. That's not recommended by Help Me Grow national. But getting an understanding, as I said, you know, in the county as large and diverse as LA county, what does that mean to have one centralized access point, how could that work. There's been strong interest in exploring regional approaches that surfaced in the centralized access work groups. So we're still on the early end of digging into what does that look like, what could that be.

Last week we had representatives from Help Me Grow Alameda and Orange County who spoke to what a centralized access look in those -- in their Help Me Grow organization work. But, no, at this point, it's still, here's what's going on in LA county, these are kind of the opportunities and challenges and knowing what that could

look like, what's worked in the past. We haven't gotten to that point. The recommendations will be coming much later with specifics and concrete on what that could look like.

COMMISSIONER ZEPEDA: Okay. Are there any other questions?

COMMISSIONER TILTON: I did have one. How long are we connected to Welcome Baby in -- very onset prevention and identification? How connected are we to Welcome Baby and are we utilizing that resource?

MS. FICEK: We are. So we have the technical assistance and training provider participating on leadership, LA BBN. They're participating in leadership and on the work groups. And, of course, we have the Welcome Baby home visitation. They're providing developmental screenings. So we're tracking and looking at where there are opportunities to better integrate and connect that work. So that's certainly a part of our conversation in thinking through what that would look like.

And getting back to your question around trauma, I mean, as I mentioned, it's something the leadership council is struggling with, you know, where -- where and what screening tools are we going to start with. Are we wanting to focus this on solely on developmental

screening, which is typically what Help Me Grow focuses on; or do we want to go bigger and want to incorporate more of a trauma screen into that.

So it's an issue we're struggling with and thinking through what it could look like.

MS. BELSHE: And if I could, Mary, Judy, and others, appreciate you raising it. This is not an issue you need to Help Me Grow and our work around developmental screening, obviously. It came up at our last board meeting in the context of talking about the federal, state, and local policy landscape, opportunities, and threats. We'll return to it at our next board meeting. We want to kind of share out some of out -- what we heard from you all. And it's something we need to be thinking about very purposefully.

There are policy and advocacy implications. There are programmatic implications. There are education communication implications. There are potential budgetary implications. So I really am grateful -- we are grateful to you giving voice to it because we are all wrestling with it. But it's certainly not just developmental screening, and I know we all recognize that.

We're looking to give you all some ideas and get some feedback in terms of where we need to lean into some of these issues pretty directly, where our programmatic

work maybe needs to be modified, where we have an opportunity to bring our voice, our understanding of facts to decision makers, but also how do we provide support to families who are wrestling with some hard issues right now. And it's not going to go away.

COMMISSIONER ZEPEDA: If there are no other questions, I'd like to thank Tara and Wendy. And I want to reiterate what Barbara brought up in terms of early childhood community, being a part of the discussion. And I look forward to the landscape or the discovery thread phase that you're talking about, Wendy, in hopes that we can answer some of Deanne's questions with regard to what are the issues that the children are be identified for. That would also help us get a better handle on how we go for next steps.

So thank you very much.

Christina, are you going to be speaking or are you leaving?

MS. BELSHE: We're pivoting to our left. We're going -- we're making an interesting turn in a PPC meeting to talk about a really exciting administrative project.

So John or Carl, who's going to tee this up?

MR. GAYDEN: I'm teeing it up.

MS. BELSHE: All right. Tee away. And Carl, is this your debut?

MR. GAYDEN: Yes, it is.

MS. BELSHE: Barbara, get a cookie ready.

MR. GAYDEN: Chocolate chip.

Well, good afternoon, commissioners and staff. I'm so excited to introduce to you the chart of accounts project. While this is a finance department led project under Raoul Ortega's leadership as director, we are engaging the entire organization as well as external stakeholders in order to ensure its success. In fact, the reason we are here discussing the chart of accounts project today with you is not only to inform you about it, but also get your feedback.

I would like to put the chart of accounts in a broader context for you. The chart of accounts project is a component of our financial reengineering effort. The rebuilding of the chart of accounts represents a huge opportunity for us to transform how we the organization leverages financial data to operate more efficiently and effectively to better serve our mission. Financial reengineering is an ongoing effort to improve our financial management and its practices, internal controls, operational processes, as well as potential upgrades to our financial systems and modules.

The first project under financial reengineering was to migrate our financial systems to the cloud. This

gave us a more modern, secure and stable solution and enhanced the potential for future integration with other systems. We also migrated to a new and centralized financial management system that is helping us improve internal controls, accurate reports on complex information and demonstrate accountability.

You will also notice we have a placeholder for future projects. This might include reviewing our current fiscal lifecycle, exploring additional modules to enhance financial and organizational efficiencies. And these models might include online web invoicing, purchase order tracking, advance budget management capabilities, online portals, as well as robust and interactive expense management and reimbursement systems.

Again, all of these represent future possibilities.

With this project we're trying to retrieve -- I'm sorry -- achieve progress on two levels. First is the project itself. You're going to hear about that in a minute. But on the other level we're operating on we're using this project as an opportunity to build organizational capacity around project management. As part of the project, we're implementing and operationalizing a number of tools and processes that are standard to the world of project management. Just like

other foundational projects we have undertaken under Kim and John's leadership, such as salary and compensation survey completed in 2014 which transformed the way that we matched pay to classification, we're approaching this project the same way, as foundational.

We have always kept the end in mind in terms of what data information reports do we want to have access to which has helped us identify potential future needs that will enable us to continuously learn how effective and efficient our programs and initiatives are.

On that note, I would like to introduce our manager -- our wonderful manager, operational excellence, as well as our project manager, Kaya -- I said that. I'm still learning. Kaya brings to us -- brings to this role five years of experience at First 5 LA programmatic experience and project management experience. In addition, First 5 has enlisted the support of Tulsi Consulting to build project management capacity and to introduce project management best practices and assist with both the strategy and implementation of this project.

And I just want to send a special shout out to the man next to me on my right, John Wagner, who is our project executive sponsor who has provided us with so much guidance and support and our link to our executive team.

So with that, I'm going to pass it to Kaya to

give us a little bit more background on this project.

MS. TITH: Thank you, Carl, and good afternoon, commissioners and staff and the public.

So we acknowledged we are the last item on the agenda and we are talking about internal administrative project, but we won't -- we'll try to open the project up, the charting of accounts project, in the hopes that you'll be excited about it as much as we are about it because it really is shifting how we do our work and improving how we do our work. So therefore we focus our research and energy in really making an impact in our children and families in LA county. So that's why we're sharing with you stay.

And we'll also have discussion portion to this presentation. We'll want to get your input to this project and then address any clarifying questions you may have about the project itself.

So, firstly, what are we talking about when we say chart of accounts? A chart of account is how we record, describe, and classify our accounting transaction into the general ledger. So I am not a finance person, so I do not know what I just said right there, what that actually meant.

So let me provide with you a concrete example of what we're actually talking about. So an example for

those who are noncounty employees, we provide a stipend and mileage reimbursement for your services as commissioners. Internally to process that reimbursement, these are the forms that we use. And then to track those expenses, we use the chart of accounts to do -- in order to do so into our financial system. And also when you hear about updates about our programs, any financial information that we are sharing, our chart of account is the behind the scene tool that we use to provide that information -- that financial information to you.

So therefore as Carl was saying, this chart of accounts is really foundational to help tell our story and how we do our work at First 5 LA. And that's why it's so important.

So why are we rebuilding the chart of the accounts? It's old. It has not been rebuilt since the inception of First 5 LA. So as we know, we have a new strategic plan, we are shifting in how we're doing our work and the story that we wish to tell. So this is a great opportunity right now and we're going as an agency to really leverage our financial information to better operate more efficiently and better serve our mission.

To do this what this project entails is that we're getting a broad range of input, both internally across the agency, but also externally, which is why we're

here today to get your input as commissioners. And we're also coming back on the March budget and finance committee.

Our goal is that we want to rebuild our chart of accounts by our new fiscal year, July 1st of 2017. So this here is how our chart of accounts looks like. In other words, this is how we currently code for all of our financial transactions. In this example here our current chart of accounts has three segments. The first segment is how we code for our revenue, which is right now from our tobacco tax. The second segment is how we code for the type expenses we have. And then the third segment is how we code for our initiative and/or department.

So this example you see before you is the code that we use when we're tracking expenses for our whole visiting initiative. So this is great. As commissioners, when we have presentations, you may want to know how much have we spent so far in our home visiting initiative. Behind the scenes work, we look -- put this code into our system and are able to pull that report easily because we've coded it and set up the chart of accounts at this level.

But as we know in our home visiting initiative, we have subcomponents. We have Welcome Baby program and we have select home visiting program. So this is where

there's an opportunity to rebuild the chart of accounts because in the back end what that means is that we wanted to know how much have we spent so far in Welcome Baby. Our staff has to put in this code in the system and then dump it into an Excel spreadsheet because it's going to give us all the expenses that related to our home visiting initiative. And we actually have to manually tease out what's associated with the Welcome Baby program.

And so as you can imagine, it's very labor intensive because it has not been set up in that level. But the program level, it requires a lot of manual work on our end to give you such reports.

So, therefore, there's an opportunity to update the chart of accounts and really think with the end in mind what kind of financial data analysis or reports do we really want to generate to better tell our story and to better serve our mission.

So what this slide shows you is the possibilities of what a new chart of account program could look like. This is not to say that this is how it will look like. It's just for illustrative purposes that, if we wanted to, we could really expand the segments of our current chart of accounts and really break down the cost of our initiative at outcome level, by initiative level, even by individual program or by the department level.

There's also opportunities for such information could lie in the system that utilize, but again, that -- that's part of the project is figuring out what is it that we want to capture and how do we want to code that to be able to pull such reports. So this is just an example of it could look like.

This next slide here shows again keeping the end in mind what are our future reports that we could potentially answer with the new chart of accounts that's meaning to what we do and how we do our work. So we could possibly be able to pull reports and automatically expenditures at the outcome level, at a strategy level, or even at a program level or by expense types. Again, this just gets a flavor of what the possibilities are.

So you've heard about this presentations, the benefits of a new chart of accounts for -- or how we do our work moving forward. These are the six areas that we've identified, again, by the -- able to enhance our learning and interpretation work and really helping to inform our programming and financial perspective to better form our strategic planning process as well as facilitate our analyses and the speed of reporting of our financial information. And in addition, enabling us to enable -- enhance our controls and streamline our fiscal close process.

This slide before her outlines the phases before of our project, the key milestones and the timeline. Again, our goal for the project is to have the new chart of accounts by July 1st. And this breaks down to the different phases that we're going through. So I won't go into detail of these phases, but I just want to call to your attention where we're at right now with the project, which our requirements fees, which is -- in other words, it's where we're gathering input from our stakeholders on, again, what are those financial data and reporting needs that we want to have in order to inform us in setting up the new chart of accounts.

And so kind of breaking out down further our input gathering process, this is what we are embarking on both internally, gathering information across the agency, our approach, as well as externally gathering our input from our external stakeholder. So internally we've been gathering input since January through multiple approaches, through via survey questionnaire and we're going to finish up with focus groups and interviews and getting understanding from staff perspective what are our reporting and data needs from a financial perspective. And we're utilizing today's meeting to get your input so as commissions to better tell our First 5 LA story what are those financial data reporting needs. And then we're

finishing up with our budget nd finance committee as well.

So this is the disclaimer part of the project. I hope everyone is excited as we are about the project right now. The project serves as a critical step in rebuilding our internal fiscal processes and structure. We want to acknowledge in the address some of our financial reporting and data needs, but it's not going to address all of our reporting needs as an organization or address all the external requests that we may need because it may not be within the scope of this project. So we're going to make that up front.

So that's the chart of accounts. We're going to go into discussion in the next slide. We have a couple of discussion questions to get your input. But we wanted to first pause here and get any clarifying questions we may have about the project before we move into our discussion.

COMMISSIONER ZEPEDA: I have a question, Kaya. Is this the only opportunity that the commissioners will have to provide input?

MS. TITH: This one and the budget and finance committee on March 7.

COMMISSIONER ZEPEDA: Because as it is the end of the -- our time and maybe we'll think about the questions as we're driving home. So I just wanted to check on that.

MS. BELSHE: Yeah. Absolutely.

COMMISSIONER ZEPEDA: Commissioner Abdo has a question.

COMMISSIONER ABDO: Yeah. I just wanted to say I've developed charts of account. And what I have experienced is that people process this kind of information in different ways and they often can't shift from the way somebody else is thinking about it into how they're thinking about it and how it's written down on a -- on a chart of accounts as a part of that problem and the reporting is part of that problem.

So it seems to me there's a training aspect to this that needs to go very deep and include us because we may have a vision about how information should be reported out that doesn't fit with what the organizational need is. And we just really need to know more about your needs and then express what we would like as well.

COMMISSIONER ZEPEDA: Are there any other questions? Barbara.

MS. FERRER: Sure. I think this is great and, you know, I think it gives a lot of really good information. It could be a little bit of a coding a nightmare right now trying to sort it out. But I think once you agree on something, it will really make it a lot easier to get information.

I do have a question about how you're

cross-walking from the current system to the new system because, you know, I'm assuming that this is the point in time when you're making the switch, but you've got contract that's are multiyear contracts and you've got data from the past that needs to somehow fit into your new structure. So I just wanted to -- I mean, you don't have to even answer that now.

MS. BELSHE: Yes. It keeps Carl awake at night.

MR. GAYDEN: It does, but the one good thing is the systems that we have -- that we're currently in and the one that we've upgraded to, it's the same system. It's just an upgraded module. So one of the decision points will be how far do we want to go back in terms of data and how long and how expensive will it be to fully map to a level of -- of that detail. So those will be decisions that we'll have to make when it comes to the design process of the actual accounts and how far we're going to go back with information.

I know that there is at least an initial kind of need to at least go back within the strategic planning period of this year. And we're shooting for that. However, how much further we can go back. It's all there. In terms of how we map it will be dependent on cost, time and how important it is to really go back.

MS. FERRER: Thank you.

COMMISSIONER ZEPEDA: Other questions from the commissioners?

MS. TITH: If there's no more questions, I will go into our discussion portion.

COMMISSIONER ZEPEDA: Sure.

MS. TITH: -- get your input -- so getting your input on what kind of financial reporting and analysis you recommend that we generate to advance our shared interest with our partners and stakeholders.

COMMISSIONER ZEPEDA: I'll jump in. The bottom line for the commissioners is that we're the fiduciary overseers, and so -- you'll hear it. And one of the themes is that we want to make sure that we're getting -- we're getting a bang for our buck. And so we want to know what specific programs, how much investment we have in certain programs, and then is not your bailiwick, but the outcomes or the evaluation side of it.

So the issue i going to be how fine grained do you want to get in what level -- what's going to be your finest unit of analysis. I know you had it broken down into the outcome areas, which is great. Having been on the budget committee, you break it down by specific actual grantees or contractors or what have you. So I would expect that that would be part of it at minimum, but I don't know if there might be some other factors to look

at.

COMMISSIONER MARTINEZ: For me, I think about0 demographics breakdown and I also think about geography. I would love to see what percentage is being spent in my district, District 4, versus District, you know, 2 or 3, and is there a disparity and where do we need to look for more grant opportunities and engagement of community.

COMMISSIONER ZEPEDA: Barbara has a question.

MS. FERRER: Mine's a similar comment about around the equity issue. I think there's lots of ways to slice that. But I think it's really important that we're able to use some of this data to do those assessments and make sure that we're reaching populations and communities in a way that, you know, is easily understood as an equitable distribution of the resources.

I was also going to say as important as it is to have all the granular data, it's really important that we're able to make sure this information is very accessible to all of our partners. And so that translation activity I think was going -- needs to be a part of this and can't just be a set of reports that, you know, would take -- it takes us a lot to figure out what they're really saying. I think it has to generate information in a really usable way, you know, again, back to the communities, our regional partners, the parents.

Because, you know, we have a responsibility to them as well, and this is a public dollars.

So I want to make sure that that translation is in how we figure out how to make sure that that can happen as well. I think that's part of the equity issue as well. So people who really understand where this money is going to and -- who and what its for.

COMMISSIONER ZEPEDA: Commissioner.

COMMISSIONER SHERIN: To echo the equity/disparity issue, no matter how you slice it. When would that come up for discussion? It's kind of decided upon -- a lot of ways to go about it. We don't want to have too many things to look at, but there's key ones and we need to make sure -- I would want to make sure they match up to the financial report (inaudible) deep questions and the issues are raising or coming up number.

COMMISSIONER ZEPEDA: Other questions, comments?

MS. TITH: Any other ideas that we should consider for this project?

COMMISSIONER ZEPEDA: Having been on the budget committee, and having taken the YouTube tutorials on how to read the actual spreadsheets, I don't know if there's another way to present it to the uninformed. So that's something I'm just throwing out there because it does take --like Barbara said, where you struggle to kind of figure

out what it means, let alone somebody from the outside. So just throwing it out there if that's even a possibility.

Other question or comments?

So if commissioners have any other bright ideas on the drive home, they can e-mail John with those ideas. And the budget committee will have another opportunity to provide input so -- and I don't think we have any more public comment.

MS. BELSHE: We don't but I think we have one more photograph of a beautiful child. Who's this Carl?

MR. GAYDEN: That's my son. Still in our demographic.

COMMISSIONER ZEPEDA: How old is he?

MR. GAYDEN: He'll be four in a couple of weeks.

COMMISSIONER ZEPEDA: Well, thank you, everybody. Appreciate it. And we'll see you at the next meeting. Thank you.

(At 4:10 p.m. the meeting was adjourned.)

C E R T I F I C A T E

I, Heatherlynn Gonzalez, a Certified Shorthand Reporter for the State of California, License Number 13646, do hereby attest that:

The preceding is a true and accurate transcription of the meeting of the organization named herein;

The meeting was taken down in shorthand and transcribed into English under my supervision and authority;

I have no interest, financial or otherwise, in any of the parties, issues, or individuals who are involved in this organization.

Attested to on this 8th day of March, 2017.

_____

CERTIFIED SHORTHAND REPORTER

FOR THE STATE OF CALIFORNIA

2017 Legislative Agenda

Kim Pattillo Brownson
Peter Barth
Tessa Charnofsky

March 30, 2017

first 5 la
Giving kids the best start

Discussion Overview

- Considerations for First 5 LA's engagement in legislation
- What the legislative agenda means for First 5 LA in practice
- Proposed 2017 agenda
- Next steps and plans for 2018

First 5 LA is Learning and Growing

- Engaging internal colleagues in policy conversations

- Deeper relationships with advocacy partners and tapping into their expertise

- Building relationships with elected officials early and often

- Strengthening our presence in local, state, and federal policy conversations

Criteria Guiding Policy Engagement

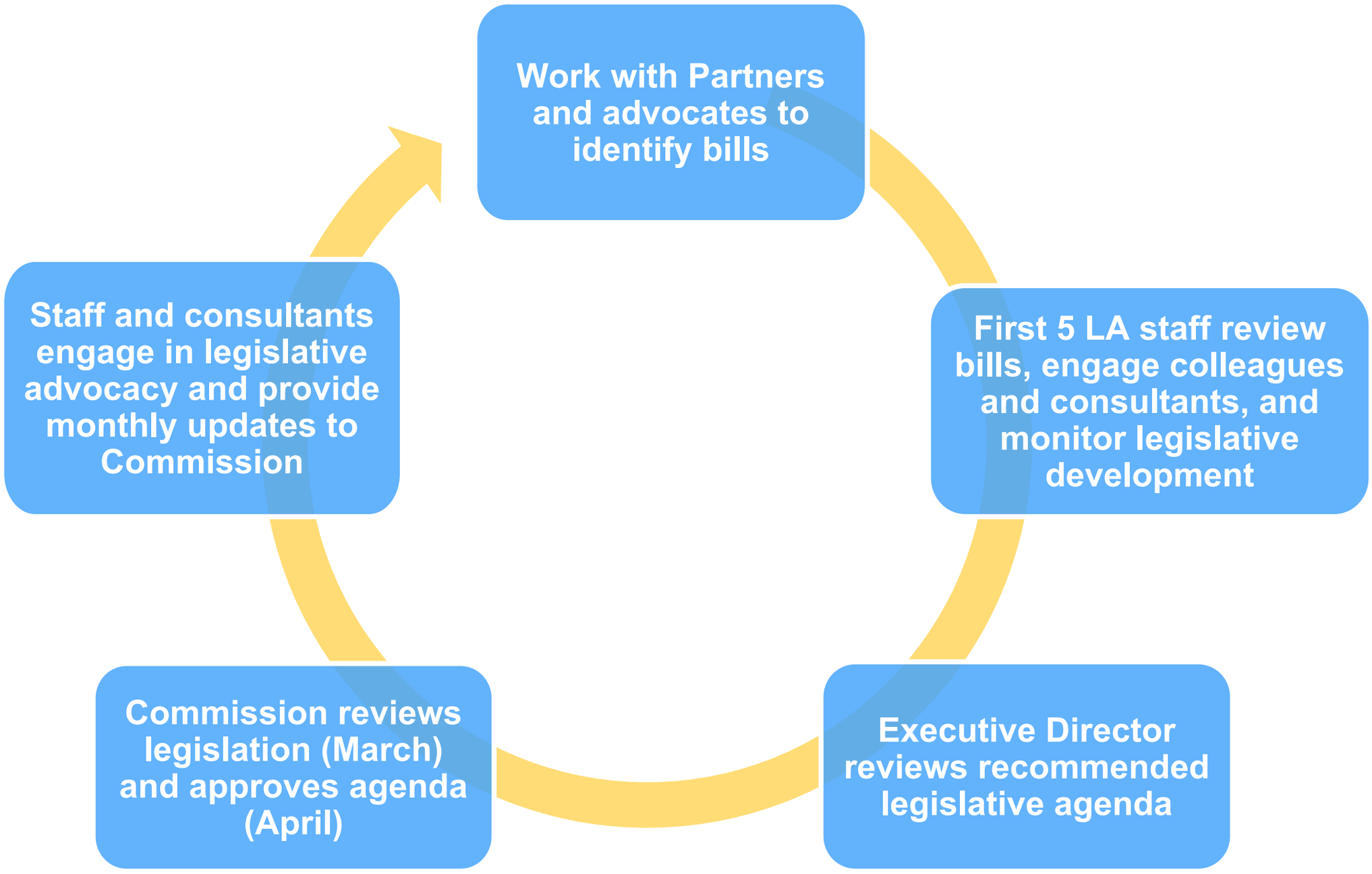
- Opportunities to advance First 5 LA strategic plan priorities: **early care and education**, **family support**, and **health systems**

- Opportunities that provide **sustainability** for First 5 LA's legacy investments (e.g. oral health, housing)

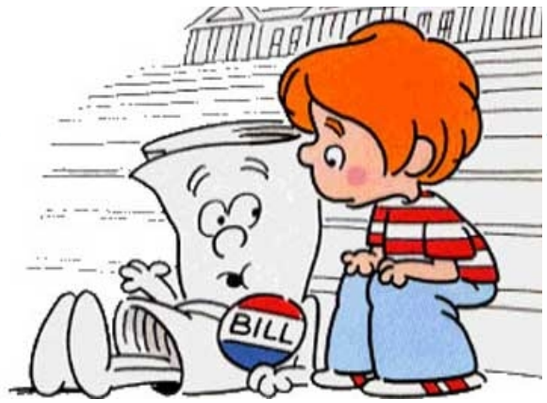
- Policies that **directly impact First 5 LA** including **revenues**

- First 5 LA's **potential to influence policy** and the **impact of our engagement** in policy issues as a public entity

Legislative Agenda Process



Advocacy Efforts



Support List Bills

- Letters of support
- Testimony at hearings
- Meetings with Legislators, bill sponsors, and advocacy partners

Watch List Bills

- Can be moved to a support/oppose position during the legislative session
- Opportunity to influence/shape legislation to better align with First 5 LA priorities
- Monitor legislative changes for further alignment

Note: *Budget and administrative advocacy is separate from our legislative agenda, but guided by the same criteria*

Proposed 2017 Legislative Agenda

AB 60 (Santiago and Gonzalez)

12 month eligibility for subsidized child care and development services

Requires that a family be considered to meet all eligibility requirements for child care services for not less than 12 months, receive those services for not less than **12 months before having its eligibility redetermined**, and not be required to report changes to income or other changes for at least 12 months.

AB 752 (Rubio)

Child care: expulsion

Prohibits a child care provider from expelling because of a child's behavior unless the contracting agency has explored and documented all reasonable steps to maintain the child's safe participation in the program and determines,[117] in consultation with the parents or legal guardians of the child, the child's teacher, and, if applicable, the agency responsible for implementing the Individuals with Disabilities Education Act, and that the child's continued enrollment would present a continued serious safety threat to the child or other enrolled children.

AB 1164 (Thurmond)

Child Care Bridge Funding for Foster Children

Authorizes county welfare departments to administer **the bridge program for foster children and distribute vouchers to children between birth and 4 years of age, placed with an approved resource family or the child of a young parent involved in the child welfare system**. County welfare departments provide a monthly voucher for child care for up to 6 months. Requires each child care resource and referral program to provide a child care navigator and trauma-informed training and coaching to providers working with children in the foster care system.

AB 24 (Maienschein) & AB 753 (Caballero)

AB 24: Denti-Cal program reimbursement rates
Requires the State Department of Health Care Services to **increase Denti-Cal provider reimbursement rates** for the 15 most common prevention, treatment, and oral evaluation services to the regional average commercial rates, effective January 1, 2018.

AB 753: Denti-Cal Improved Access
Would **appropriate $191 million to Denti-Cal services from Proposition 56 funding**. Funding would increase reimbursements rates for the 20 most common pediatric diagnostic and restorative services.

Photo Bomb!

AB 992 (Arambula)

CalWORKs: Baby Wellness and Family Support Home Visiting Program

As of January 1, 2018, establishes the Baby Wellness and Family Support Home Visiting Program that would require the State Department of Social Services to **award funds to counties for the purpose of implementing or contracting with specified early home visiting programs** to provide voluntary maternal, infant, and early childhood home visiting programs approved by the department and would authorize the funds to be used to coordinate early home visiting services with, among others, diaper bank services.

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AB 1520 (Burke) & SB 18 (Pan)

AB 1520: Lifting Children and Families Out of Poverty Act of 2017
States the intent of the Legislature to move toward reducing child poverty in this state by 50% over a 20-year period, commencing with the 2018–19 fiscal year and ending with the 2038–39 fiscal year.
States the intent of the Legislature **fund programs or services that have been proven to reduce child poverty in California** and to fund future innovations that are shown to achieve similar outcomes.

SB 18: Bill of Rights for Children and Youth in California
Declares the Legislature's support of a Bill of Rights for the Children and Youth of California that resolves to **invest in all children and youth in order to achieve specified goals** to create an optimal environment for their healthy development.

SB 63 (Jackson)

New Parent Leave Act

Would **prohibit an employer from refusing to allow an employee to take up to 12 weeks of parental leave to bond with a new child** within one year of the child's birth, adoption, or foster care placement. In addition, would require employer to maintain and pay for coverage under a group health plan. Applies to businesses with less than 20 employees.

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Next Steps

- **2017 Legislative Agenda**
  - April Commission Meeting
  - Legislative advocacy with monthly updates through October 2018

- **2018 Legislative Agenda**
  - Policy agenda development in fall 2017
  - Seek Commission approval to engage in legislative, budget, and administrative advocacy related to First 5 LA's policy agenda in fall 2017
  - Begin working with advocacy partners and elected officials on legislative priorities in December 2017

Questions?

Attachment A

First 5 LA
2017 State Legislative Agenda

Bill #	Author	Description	Bill Status	Est. Cost	Sponsor	Supporters
Early Childhood Education						
AB 60	Miguel Santiago and Lorena Gonzalez	**Subsidized child care and development services: eligibility periods** Requires that a family, upon establishing initial eligibility or ongoing eligibility for services under the act, be considered to meet all eligibility requirements for those services for not less than 12 months, receive those services for not less than 12 months before having its eligibility redetermined, and not be required to report changes to income or other changes for at least 12 months, except as provide	Passed Assembly Human Services Committee on 3/7	No estimate available at this time	Child Care Law Center, First 5 California	First 5 Association First 5 California LA Chamber of Commerce, Crystal Stairs
AB 752	Blanca Rubio	**Child care: expulsion** Prohibits a contracting agency from expelling or un-enrolling a child because of a child's behavior unless the contracting agency has explored and documented all possible steps to maintain the child's safe participation in the program. Determines, in consultation with the parents or legal guardians of the child, the child's teacher, and, if applicable, the local agency responsible for implementing the Individuals with Disabilities Education Act, and that the child's continued enrollment would present a continued serious safety threat to the child or other enrolled children. The bill would require, if a child is expelled or unenrolled, the contracting agency to facilitate the child's transition to a more appropriate placement	In Assembly Human Services Committee	No estimate available at this time		First 5 California
AB 1164	Tony Thurmond	**Child Care Bridge Funding for Foster Children** Establishes the Child Care Bridge Program for Foster Children and authorizes county welfare	Assembly Human Services Committee hearing on 4/4	No estimate available at this time	Children Now LA Chamber of Commerce CWDA	First 5 Association First 5 California

Attachment A

Bill #	Author	Description	Bill Status	Est. Cost	Sponsor	Supporters
		departments to administer the bridge program. The program would distribute vouchers to children between birth and 4 years of age, placed with an approved resource family or the child of a young parent involved in the child welfare system. County welfare departments determine eligibility for the bridge program and provide a monthly voucher for child care for up to 6 months following the child's initial placement. This bill also requires each child care resource and referral program to provide a child care navigator and trauma-informed training and coaching to child care providers working with children in the foster care system.				
Health Related Systems						
AB-15	Brian Maienschein	**Denti-Cal program: reimbursement rates.** Requires the Department of Health Care Services (DHCS) to increase Denti-Cal provider reimbursement rates for the 15 most common prevention, treatment, and oral evaluation services to the regional average commercial rates.	Passed Assembly Human Services Committee on 3/22	$401 million		First 5 Association, First 5 California, Children's Defense Fund, Western Center on Law & Poverty
AB 753	Ana Caballero	**Denti-Cal Improved Access** Requires DHCS to implement specified initiatives designed to improve access to dental services for adults and children in Medi-Cal, including a Dental Transformation Initiative for adults; an increase in reimbursement rates of qualified providers for the 20 most common pediatric diagnostic and restorative services; and access innovations, such as teledentistry.	Assembly Health Committee hearing on 4/4	$191 million		
Family Support						
AB 992	Joaquin Arambula	**CalWORKs: Baby Wellness and Family Support Home Visiting Program** Establishes the Baby Wellness and Family Support Home Visiting Program that would	Passed Assembly Human Services Committee on	No estimate available at this time	Western Center on Law and Poverty	First 5 Association, First 5 California, County Welfare Directors

Attachment A

Bill #	Author	Description	Bill Status	Est. Cost	Sponsor	Supporters
		require the State Department of Social Services to award funds to counties for the purpose of implementing or contracting with specified early home visiting programs to provide voluntary maternal, infant, and early childhood home visiting programs approved by the department and would authorize the funds to be used to coordinate early home visiting services with, among others, diaper bank services.	3/21			Association, Nurse Family Partnership
AB 1520	Autumn Burke	**Lifting Children and Families Out of Poverty Act of 2017** States the intent of the Legislature to use a specified framework for purposes of enacting future legislation to fund programs or services that have been proven to reduce child poverty in California, and to fund future innovations that achieve similar outcomes.	In Assembly Human Services Committee	No estimate available at this time	GRACE	First 5 California
SB-18	Richard Pan	**Bill of Rights for Children and Youth in California** Declares the Legislature's support of a Bill of Rights for the Children and Youth of California that resolves to invest in all children and youth in order to achieve specified goals to create an optimal environment for their healthy development.	Referred to Senate Rules	No estimate available at this time	Common Sense Kids Action	First 5 Association, First 5 California
SB 63	Hannah-Beth Jackson	**New Parent Leave Act** Prohibits an employer for refusing to allow an employee with more than 12 months of service and at least 1,250 hours of service during the previous 12-month period, to take up to 12 weeks of parental leave to bond with a new child within one year of the child's birth, adoption, or foster care placement. In addition, would require employer to maintain and pay for coverage under a group health plan.	Passed Senate Labor and Industrial Relations Committee on 3/22	No estimate available at this time	First 5 California California Employment Lawyers Association, Legal Aid at Work	First 5 Association, Children Now, Child Care Law Center Western Center on Law & Poverty

Attachment A

First 5 LA
2017 Watch List

Bill #	Author	Description	Bill Status	Est. Cost	Sponsor	Supporters	Notes
Early Childhood Education							
AB 11	Kevin McCarty	**Child care: Early Head Start** States the intent of the Legislature to enact legislation that would establish the Early Head Start-Child Care-Early Intervention Partnership, which would provide funding to establish classroom-based early intervention services to Early Head Start-Child Care programs.	Pending Referral	No estimate available at this time			
AB 43	Tony Thurmond	**State Incarceration Prevention Fund** Levies a tax on private companies that contract with the corrections industry to provide goods and services. Redirects the revenue received to a prevention fund that provide resources to programs that prevent incarceration, including programs that start early in life, such as preschool and anti-poverty measures. The bill also states that companies would not be able to increase their costs to offset the taxes imposed.	In Assembly Revenue & Taxation Committee	No estimate available at this time		First 5 Association	
AB 230	Rocky Chavez	**Child Care Tax Credits** Increases the Child and Dependent Care Expenses tax credit amount by modifying the amount of the applicable state credit percentage and the amount of the applicable adjusted gross income (AGI) cap.	In Assembly Committee on Revenue & Taxation	$140 million			California Alternative Payment Program Association
AB 273	Cecilia Aguiar-Curry	**Child care services: eligibility** Clarifies that engagement in English as a second language and high school or high school equivalency educational programs meets criteria for establishing eligibility for subsidized child care programs.	Passed Assembly Human Services Committee on 3/8	No estimate available at this time			First 5 Marin, Western Center on Law and Poverty, Crystal Stairs, Child Care Alliance of LA

Attachment A

Bill #	Author	Description	Bill Status	Est. Cost	Sponsor	Supporters	Notes
AB 312	Patrick O'Donnell	**School finance: special education funding** Requires the Superintendent of Public Instruction to phase-in equalization of Special Education Local Plan Area (SELPA) funding rates. The bill also states the intent of the Legislature to establish a state funding mechanism to provide all local educational agencies with the funding necessary to establish high-quality preschool programs for California's preschool-age children with disabilities.	In Assembly Education Committee	No estimate available at this time			
AB 540	Kevin Mullin	**Child Care and Developmental Services** States the intent of the Legislature to create legislation that would establish an optional statewide child care and education subsidy policy program to increase and encourage county and regional collaboration among subsidized early care and education programs and providers.	Introduced	No estimate available at this time			
Health Related Systems							
AB 340	Joaquin Arambula	**Early and Periodic Screening, Diagnosis, and Treatment Program: trauma screening** Requires, consistent with federal law, that screening services under the EPSDT program include screening for trauma. The bill also requires the Department of Healthcare Services, in consultation with the Dept. of Social Services and others, to adopt, employ, and develop, as appropriate, tools and protocols for screening children for trauma, and authorizes DHCS to implement, interpret, or make specific the screening tools and protocols by means of all-county letters, plan letters, or plan or provider bulletins.	Passed Assembly Health Committee on 3/22.	In the low millions per year (based on fiscal analysis of prior legislation)		Children Now, Children's Defense Fund, County Welfare Directors Association, The Children's Partnership, Western Center on Law and Poverty	130
SB 379	Toni Atkins	**Pupil health: oral health assessment** Adds *dental caries experience* to the data reported from school oral health assessments to the county office of education. The bill also facilitates on-campus assessments by allowing passive consent	Passed Senate Education Committee on 3/22	No estimate available at this time	Children Now, Children's Partnership	First 5 Sacramento, Delta Dental, Maternal & Child Health	

Attachment A

Bill #	Author	Description	Bill Status	Est. Cost	Sponsor	Supporters	Notes
		for screenings, and streamlines data analysis by directing schools to report data directly to the Dept. of Public Health.				Access	
Family Support							
SB 426	Richard Pan	**California Families & Children Home Visit Program: implementation plans** Amends an existing law that establishes the California Families and Children Home Visit Program, which provides that the Office of Child Abuse Prevention is responsible for award of implementation grants and continued operation of the program, which requires each participating county to develop and submit to a plan, and which requires each plan to include information on home visitation best practices. This bill requires particular focus on certain program models with regard to the criteria for awarding grants.	Senate Human Services Committee hearing on 4/4	No estimate available at this time			

February 2, 2017

The Honorable Holly Mitchell, Chair
Senate Budget Committee
State Capitol Building, Room 4203
Sacramento, CA 95814

The Honorable Phil Ting, Chair
Assembly Budget Committee
State Capitol Building, Room 6026
Sacramento, CA 95814

The ECE Coalition is a partnership of early childhood education advocacy and service organizations working together to secure access to high quality early learning and care for California's low-income children and families.

The Administration recently announced the largest spending plan in California history and yet reneges on critical commitments to our state's most vulnerable children and families. Leaders last year negotiated a multi-year plan to address the reimbursement rate crisis facing early learning providers and make steady progress toward the state's long-term goal of preschool access for all low-income children. The 2017-2018 budget proposal not only breaks this significant promise, but fails to recognize the urgent need to further stabilize and strengthen our early care and education system.

The California Budget and Policy Center reports that a typical single mother in California would have to spend two-thirds of her paycheck to cover child care costs. More than 1.2 million children eligible for subsidized child care and preschool do not receive services, yet state programs are still funded 20 percent below pre-recession levels. Making matters worse, two parents working full-time minimum-wage jobs now earn "too much" to qualify for child care assistance, despite staggering housing costs and other economic pressures.

New data indicates not investing in early care and learning may actually slow long-term economic growth in California. Researchers at the University of Southern California and the University of Chicago and Nobel Prize-winning economist James Heckman found that high-quality early childhood development programs support economic mobility for two generations by freeing working parents to increase wages over time, while their children develop a broad range of foundational skills for lifelong success.

By freezing the commitments made in last year's budget, as well as negating much needed additional investment, the budget proposal ignores well established research and strong public opinion on the value of early care and education. The ECE Coalition respectfully urges you to champion the following priorities in the coming months:

1. ***Ensure Access and Affordability***
    - Enact the 2016-2017 budget commitment to incrementally raise both the Regional Market Rate (RMR) and the Standard Reimbursement Rate (SRR) to keep pace with new minimum wage increases, including last year's full 10% increase to the SRR, and begin the regionalization of the SRR;

    - Adopt widely supported child care eligibility policies such as 12-month eligibility periods, income eligibility guidelines based on current State Median Income (SMI) data and increased exit eligibility levels; and

    - Increase funding for the General Child Care and Alternative Payment programs to ensure flexible child care spaces are available to more infants and toddlers, enact the prior commitment to expand the number of spaces in the State Preschool Program, and adopt minor policy changes to ensure new spaces are utilized and preserve parent choice in our mixed delivery system.

2. ***Strengthen Infrastructure to Support Quality and Efficiency***
    - Ensure more children and providers benefit from quality improvement and workforce development initiatives by expanding the QRIS block grant so communities have more resources and flexibility to address local needs; and

    - Fund the second phase of the California Resource & Referral Database, www.mychildCAreplan.org to allow automated data syncing across the state and ensure it is easy for families to use. These steps are a necessary cornerstone for a comprehensive early learning data system that integrates a workforce registry and Centralized Eligibility List (CEL).

    - Consider the Administration's policy changes closely once we review Budget Trailer Bill language to determine their potential impact and any modifications that may or may not be necessary.

Early care and education is critical to the current and long-term economic and education viability of California. Given the tremendous unmet need for child care among eligible families and the growing pressure on providers to meet minimum wage increases and the rising costs of quality care, now is not the time to assume lower than projected revenues and “pause” investments in the state’s early learning system. We look forward to partnering with you to ensure that that our youngest children and families are prioritized in this year’s budget.

Sincerely,
ECE Coalition

Cc: Chair, California Legislative Women’s Caucus

Agenda Item: 4
Date: March 30, 2017

FIRST 5 LA

SUBJECT:
Update on Welcome Baby Learning Agenda

BACKGROUND:
Families are at the center of First 5 LA's work. The 2015-2020 Strategic Plan prioritizes parent supports to assist parents in developing the skills and resources needed for their children's healthy development. Families are the most critical environments that impact a child's healthy and safe development and readiness for school. First 5 LA invests in services, systems change and policy efforts to enhance the parent-child bond, increase parent knowledge and skills, and assist families in navigating needed resources and supports. Home-based services provide a unique opportunity to support families in their own context and help families establish environments that promote optimal child development.

Since 2009, First 5 LA has supported the launch and expansion of home visiting services throughout Los Angeles County through two universal programs - Welcome Baby and Universal Assessment - as well as the expansion of more intensive services via Select Home Visitation. Evaluations of Welcome Baby have accompanied the programmatic efforts with the goals of informing program optimization and better understanding the benefits of Welcome Baby to children and families. The findings from prior evaluations have been presented to the Board as results have become available. Staff also provided updates to the Board about how the learnings from evaluation investments inform programmatic changes.

SUMMARY:
At the March 30, 2017, Program and Planning Commission meeting, staff will present an update on the evolving learning strategies being developed for First 5 LA's home visiting investments. The presentation provides contextual information about the learning and evaluation work previously completed; reviews processes that staff is actively engaged in to develop a Learning Agenda for Welcome Baby; and summarizes the results of a study of the Universal Assessment tool (i.e., Modified Bridges for Newborns) that was completed in January 2017.

Welcome Baby Learning Agenda Update

Program & Planning Committee Meeting

March 30, 2017

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Presentation Objectives

- To continue the conversation with the Board about what and how First 5 LA will learn about Welcome Baby
- To solicit Board feedback on the learning domains and input on which key external stakeholders to engage
- To provide the Board with an update about the findings from one of the Welcome Baby evaluations

Presentation Outline

1. Welcome Baby Learning Activities: Where Have We Been and Where Are We Going?

2. Welcome Baby Learning Agenda: Process and Priority Areas

3. Modified Bridges Psychometric Study: Key Take-Aways

Welcome Baby Learning Activities: Where Have We Been and Where Are We Going?

Universal Voluntary Home Visiting

Building A Sustainable System

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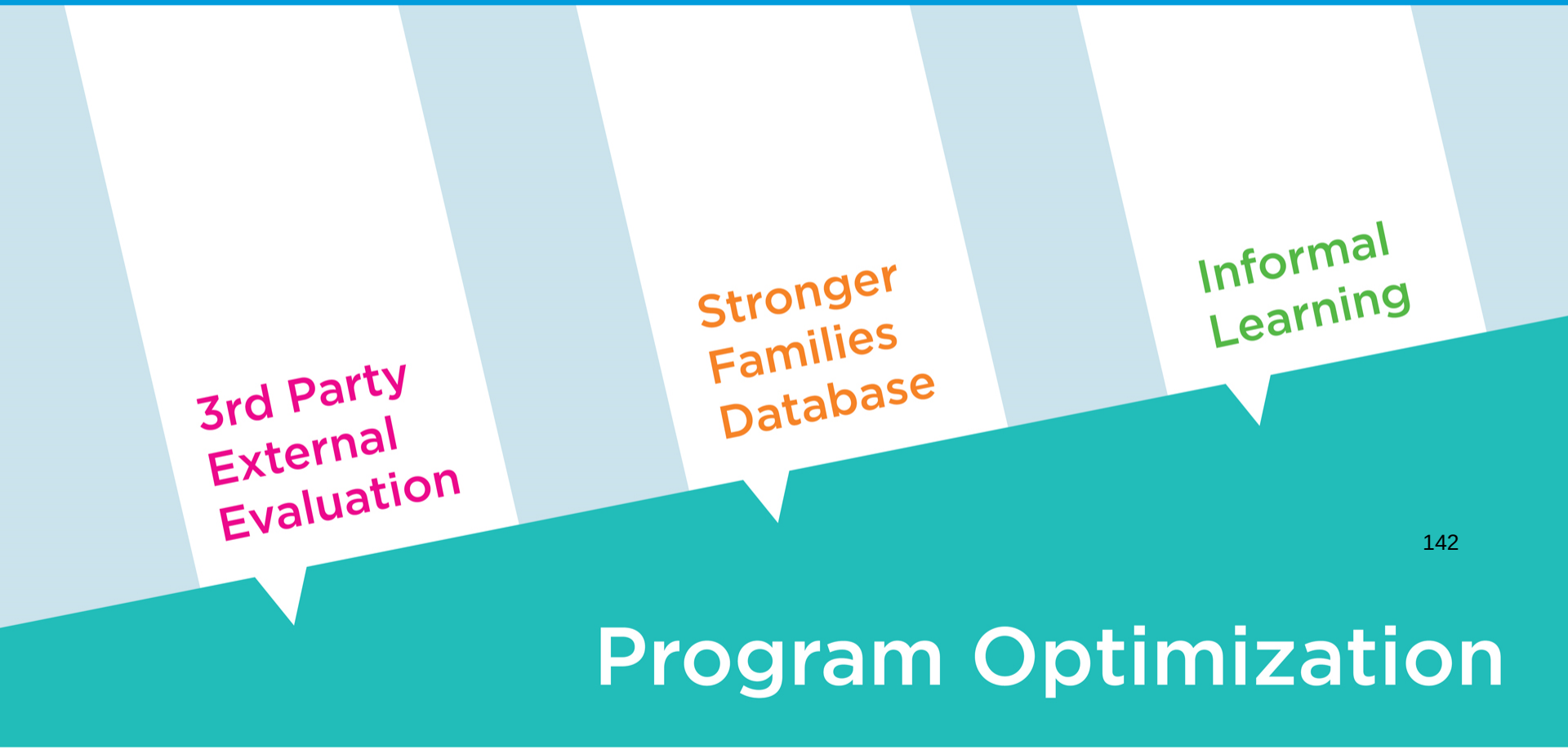
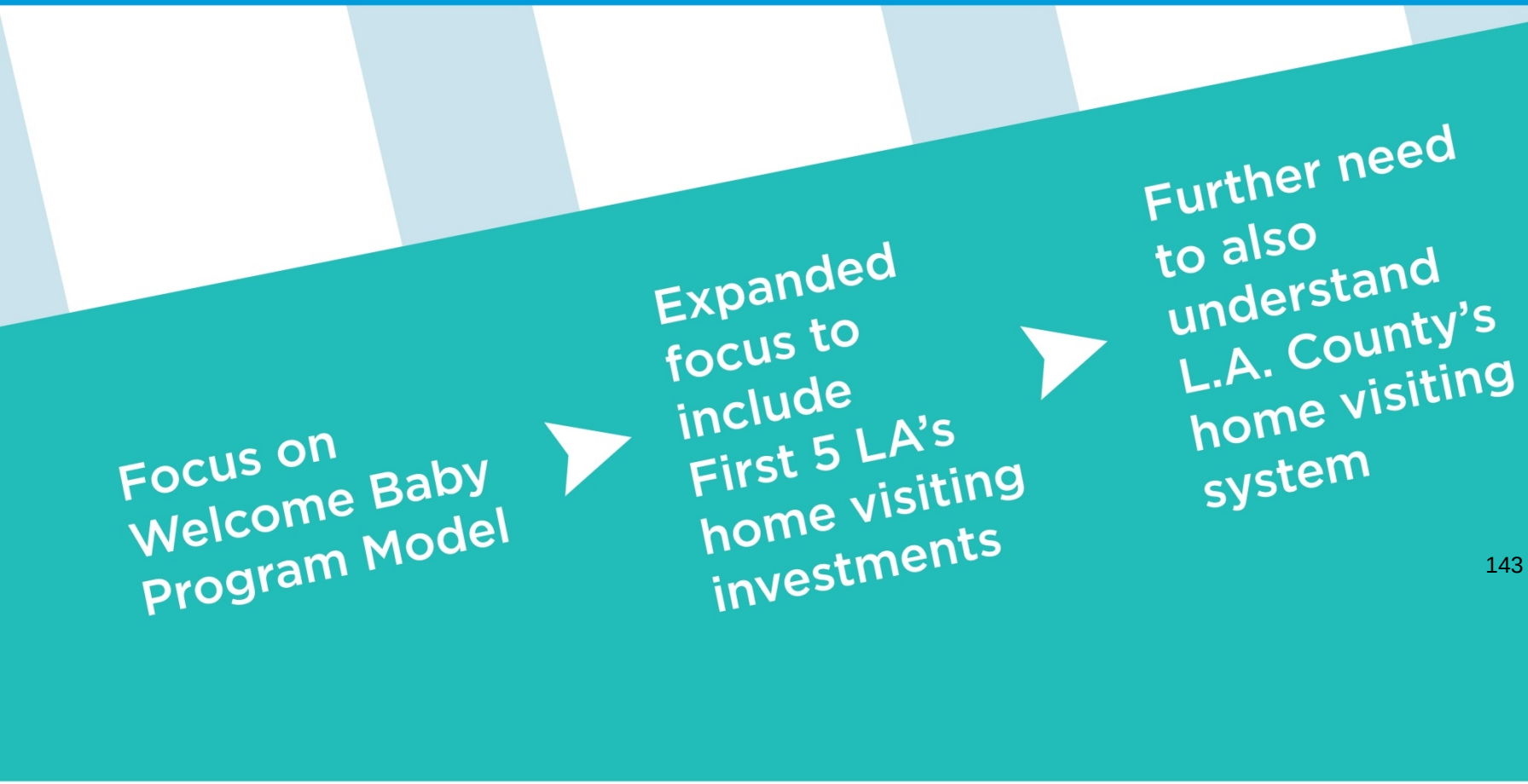
Context of Current Welcome Baby Learning Activities

Program Implementation	Evaluation
Welcome Baby pilot launched (2009)	➢ Interim findings from evaluation of Welcome Baby pilot site (July 2014) ➢ Final results from evaluation of Welcome Baby pilot site (September 2015)
Welcome Baby expansion to 13 more sites (2012-2015)	➢ Shared key lessons from early evaluation of the expansion (September 2014) 141 ➢ Shared further evaluation strategies for continued learning about the Welcome Baby expansion (February 2015)

Example of Applied Learning to Inform Program Improvement



Evolution of Learning Needs



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Welcome Baby Learning Agenda: Process and Priority Areas

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Welcome Baby Learning Agenda Process

- Gather learning questions
- Group and prioritize learning questions
- **Identify preferred strategies and methodologies for prioritized learning questions**
- Revise learning and evaluation portfolio

Welcome Baby Learning Agenda Domains

Domain	Sample Learning Questions	Method
Services Provided	Did mothers accept the home visiting services that were offered? Did they participate in the services that they accepted?	Program monitoring Data linking
Participants	What are the demographic characteristics of those who accept Welcome Baby services? What is the risk profile of those who accept Welcome Baby services?	Program monitoring
Program outcomes Maternal Health	Do mothers who accept Welcome Baby appropriately utilize County entitlement services? Do mothers receive needed postpartum care?	
Family Environment	Are family environments more supportive to positive child development? Are more children more likely to enroll in quality preschool or childcare?	Program monitoring Evaluation Data linking
Individual Child Health	Are children more likely to be screened for developmental delays? Regularly?	
Child Welfare	Are families less likely to be reported to child welfare agencies? Does the program increase positive parenting behaviors?	
Systems Change	Are families connected to and receiving eligible entitlements?	Program monitoring Data linking
Program Model	Do outcomes for mothers and children vary by dosage?	Program monitoring Evaluation Data linking

Next Steps for Learning Agenda

- Develop recommendations for methods to investigate the learning questions
- Decide on “learning lead” for each learning domain
- Continue to socialize priorities with key stakeholders and solicit input

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Modified Bridges Psychometric Study: Key Take-Aways

Modified Bridges for Newborns

- Tool used at Welcome Baby hospital visit to assess the amount of risk a mother is experiencing
- Modified Bridges score (along with place of residence) is used to determine which home visiting program a mother is offered
- Original tool initially validated in Orange County

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Home Visiting Programs: Best Fit for Families

	High Modified Bridges Score	Low Modified Bridges Score
Best Start Community	Select Home Visiting (HFA or PAT)	Welcome Baby (Up to 9 engagement points)
Non-Best Start Community	Welcome Baby (Up to 4 engagement points)	Welcome Baby (1 engagement)

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Modified Bridges Psychometric Study

Question: Can the Modified Bridges be used consistently across staff?

Answer: Hospital liaisons are able to score Modified Bridges consistently.

Modified Bridges Psychometric Study

Question: Does the Modified Bridges distinguish between mothers with lower and higher risk levels?

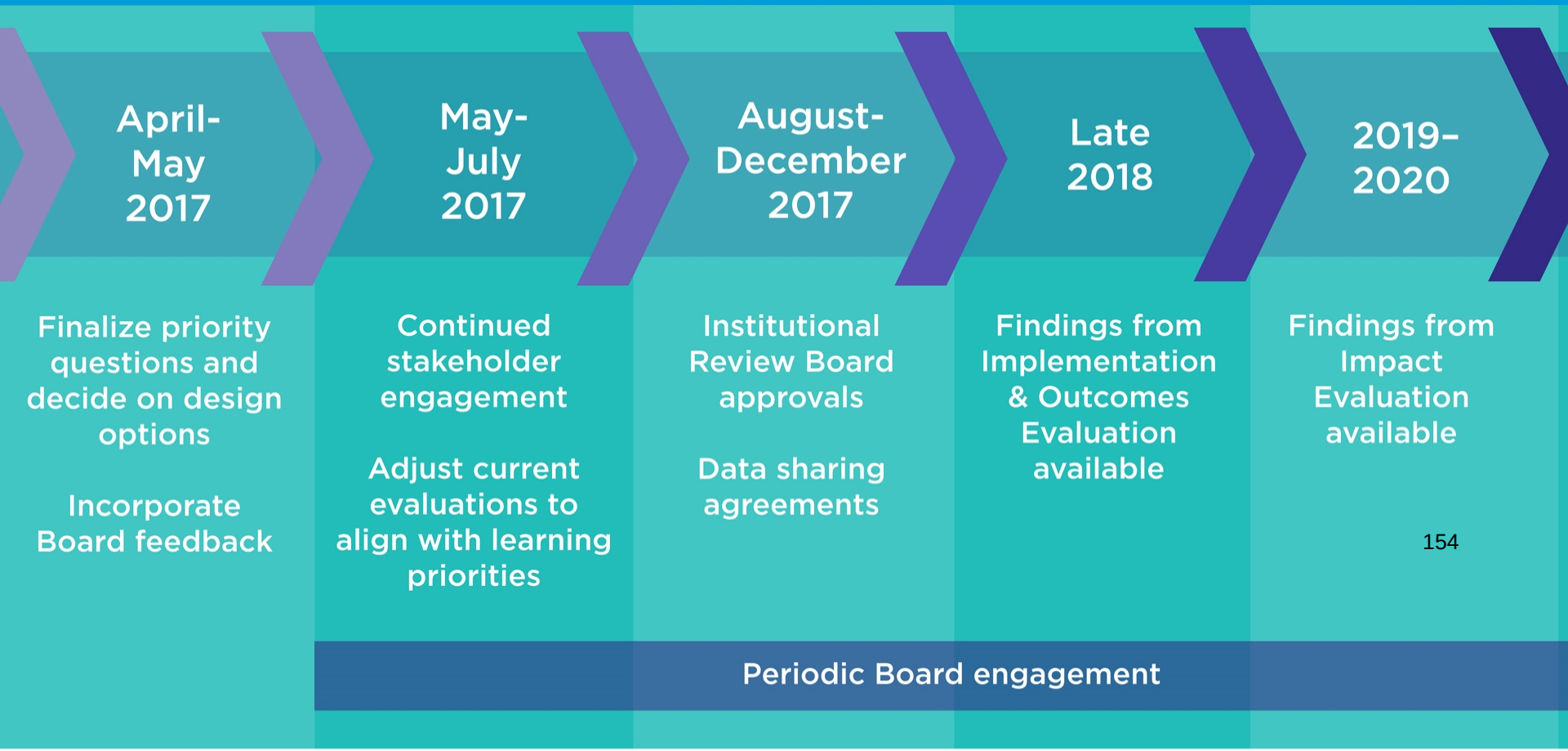
Answer: The Modified Bridges tool's ability to distinguish between mothers with lower and higher risk levels is lower than desired and can be improved.

Presentation Summary

- Evolving home visiting context required a reassessment of learning questions and evaluation portfolio

- Welcome Baby Learning Agenda will ensure that information gathered is relevant to program optimization, policy and advocacy, and system building

Next Steps



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Appendix A: Welcome Baby Pilot Evaluation: Overview and Results Summary

Update from September 2015

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Welcome Baby Pilot Evaluation

Purpose: To assess the outcomes associated with Welcome Baby participation with an initial set of clients in the Metro LA pilot community

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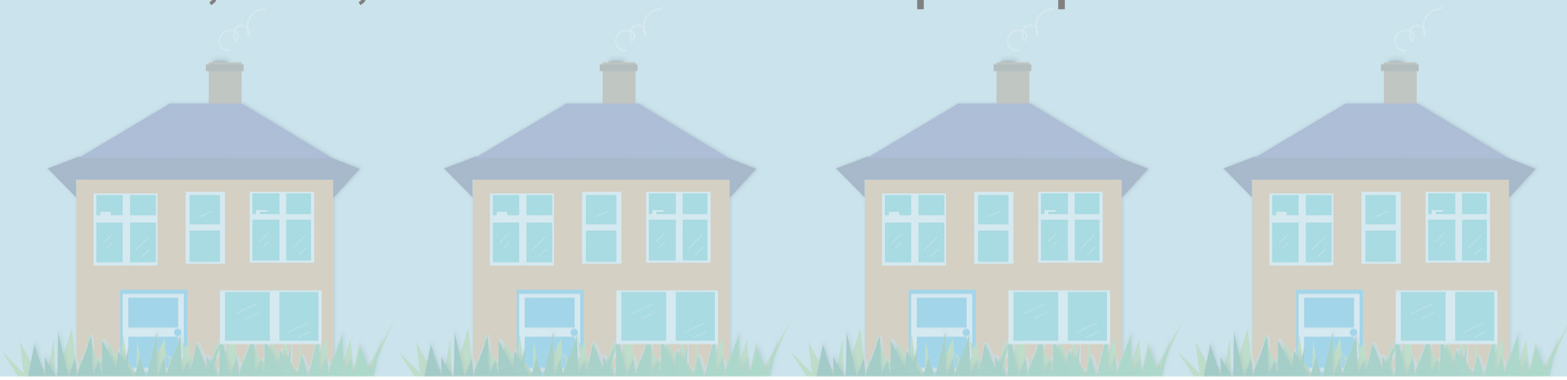
Pilot Evaluation Design

- Compared women who received Welcome Baby to a group of women who did not receive Welcome Baby

- Interviewed and observed mothers and children at 12-, 24-, and 36-months postpartum



Select Pilot Evaluation Findings: Breastfeeding

- Higher rates of ever attempted and exclusive breastfeeding at 4 months postpartum among Welcome Baby participants

- Participation in more Welcome Baby visits was associated with an increase in the number of months breastfeeding

Select Pilot Evaluation Findings: Positive Parenting Behaviors

- More positive parenting behaviors among Welcome Baby participants

- Mothers were:
  - More responsive (24- and 36-months postpartum)
  - More encouraging (24- and 36-months postpartum)
  - More affectionate (24- and 36-months postpartum)

Select Pilot Evaluation Findings: Stimulating Home Environments

- More home learning activities among Welcome Baby participants (12- and 24-months postpartum)

- Quality of the home environment was higher among families who participated in Welcome Baby (12- and 24-months postpartum)

Further Reading

Complete pilot evaluation findings can be found on First 5 LA's website:

- Effects of Welcome Baby: Findings from the 12-Month Child and Family Survey
- Effects of Welcome Baby Home Visiting: Findings from the 24-Month Child and Family Survey

- Findings from the 36-Month Child and Family Survey and 3-Year Longitudinal Results

Appendix B:
Modified Bridges Psychometric Study: Overview and Results Summary

March 2017

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Modified Bridges Psychometric Study: Reliability

Question:

Can the Modified Bridges be used consistently across staff?

Study Design:

31 hospital liaisons from 13 Welcome Baby sites

Scored 3 video vignettes based on Welcome Baby cases

Each hospital liaison scored each video twice (December 2015 and January

Modified Bridges Psychometric Study: Reliability Findings

Question	Findings
How comparable are risk scores across hospital liaisons (i.e., staff who administer the Modified Bridges)?	• High levels of score agreement across hospital liaisons
Do the risk scores of the hospital liaisons change over time?	• High correlations in the risk scores over time
What factors predict hospital liaison performance?	• Hospital liaisons with more experience performed better • Hospital liaisons who referred to the Modified Bridges scoring protocol performed better

Modified Bridges Psychometric Study: Tool Validity

Question:

Does the Modified Bridges identify a similar level of risk among women as other risk identification tools?

Study Design:

152 Welcome Baby mothers were screened at 2 Welcome Baby sites

Each mother was screened with the Modified Bridges and comparison tools from the Florida Department of Health

Modified Bridges Psychometric Study: Tool Validity Findings

Question	Findings
How similar are Modified Bridges and the Florida tools to one another?	• Modified Bridges and Florida tools are moderately correlated with one another • Modified Bridges measures content that is not measured in the Florida tools
Are similar numbers of families identified as high risk with the Modified Bridges and the Florida tools?	• No. The Modified Bridges identifies more women as high risk (49% of women are high risk) than the Florida tools (12% and 16% are high risk).

Modified Bridges Psychometric Study: Tool Reliability

Question:

Does the Modified Bridges distinguish between mothers with lower and higher risk levels?

Study Design:

12,166 completed Modified Bridges screens across 10 Welcome Baby sites

Modified Bridges screens were completed between January 2013 and December 2015

Results of the Modified Bridges screens were subject to statistical analysis and modeling

Modified Bridges Psychometric Study: Tool Reliability Findings

Question	Findings
Does the Modified Bridges have acceptable reliability?	• No. The Cronbach's alpha (0.65) is lower than desired. (A common threshold for minimum reliability is 0.70.)
Can the reliability of the Modified Bridges be improved?	• Yes. By altering the weighting of several items, the reliability could be increased to 0.73, which would achieve the minimum desired reliability.

Further Reading

A report of the complete study findings can be found on First 5 LA's website:

- A Psychometric Study of the Modified Bridges for Newborns Screening Tool

Agenda Item: 6
Date: March 30, 2017

FIRST 5 LA

SUBJECT:
Request to Establish a Strategic Partnership with the First 5 Association of California, Authorize First 5 LA Staff to Execute a Master Agreement Contract, and Delegate Authority to Amend Contracts to the Executive Director

RECOMMENDATION (PROVIDED AS INFORMATION):
This memo is provided as information for the Board's consideration at the March 30, 2017 Program and Planning Committee meeting. First 5 LA staff recommends that at the May 2017 Commission meeting, the Board:

1. Approve a Strategic Partnership with the First 5 Association of California through June 30, 2021 and authorize the Executive Director to execute a Master Agreement with the First 5 Association of California through June 30, 2018 for $458,000.

2. Authorize the Executive Director to amend or renew the Master Agreement, as needed, contingent upon Board-approved annual budgets and compliance with the Procurement policy.

BACKGROUND:
The First 5 Association of California was established in 2001 by the 58 county First 5 commissions to provide technical assistance, represent the interests of local commissions with key statewide partners, and promote policies that benefit local First 5 commissions and children 0-5 throughout California. First 5 LA is a founding member of the Association, pays annual dues to the Association, and is represented on various Association committees including the Executive, Advocacy, Communications, and Research committees.

The Association is funded by dues paid by all 58 county commissions that are set according to County size; more recently, voluntary contributions are made by local commissions to the Association's Policy and Communications Fund. In 2016, First 5 LA's dues were $70,000; in addition, First 5 LA contributed $135,000 to the Policy and Communications Fund, one of 34 local Commissions contributing to these efforts.

As First 5 LA increases its focus on partnership, policy and systems change, all First 5 LA divisions increasingly coordinate work with other local First 5 Commissions and the Association. In addition to providing technical assistance to local Commissions, the Association elevates and articulates a coordinated and consistent First 5 voice in California and partners with First 5 LA to advocate on behalf of common First 5 policy priorities.

In order to strengthen the Association's capabilities and capacities aligned with First 5 LA's strategic plan, First 5 LA staff recommends the Board approve a Strategic Partnership with the Association and execute a Master Agreement to fund various Association activities.

For FY 2017-18, staff recommends a total agreement of $458,000, broken down as follows:

- $300,000 from the Public Policy and Government Affairs Department to partially fund the salary and benefits of an Association Policy Director, partially fund the Association's contract with Open Impact to fund strategic planning activities, partially fund the Association's contract with Viva Strategy to coordinate policy alignment activities, and partially fund emerging opportunities to advance First 5 priority policies.
- $125,000 from the Communications Department to partially fund the salary and benefits of an Association Communications Director and partially fund additional communications activities.

- $33,000 from the Health Systems Department to partially fund the creation of Help Me Grow California, which includes contributions toward Association staff providing technical assistance to Help Me Grow counties and statewide policy coordination.

GOVERNANCE GUIDELINES #5 AND #6 (SUSTAINABILITY AND LEVERAGING):
First 5 LA's contributions to the Association are leveraged by all 58 local commissions, who contribute to the Association's policy, communications, and program activities. In addition, First 5 LA's investments in the Association are critical to protecting First 5 revenues. For example, the Association was critical to ensuring that a portion of new tobacco tax revenues approved by California voters in 2016 was directed toward First 5 commissions.

JUSTIFICATION:

This Strategic Partnership meets the criteria below:

☒ The Strategic Partnership can provide specific resources needed by First 5 LA to implement an approved program or initiative in a manner or on a scale that makes the Strategic Partnership more cost effective than resources provided through a competitive solicitation; or

☒ The Strategic Partnership can implement an approved program or initiative more expeditiously than resources provided though a competitive solicitation; or

☒ The Strategic Partnership can provide a demonstrated level of ability or expertise that is only available in the community through the proposed Strategic Partnership; or

☒ The Strategic Partnership provides an opportunity to leverage First 5 LA funds to produce additional funding for the program or initiative or service.

AND

☒ The proposed Strategic Partnership is aligned with the adopted Strategic Plan.

The First 5 Association is the sole entity responsible for representing the collective interests of all 58 county First 5 commissions in California, including First 5 LA.

The Association plays a critical role in bringing core investments to scale and helping leverage lessons learned from across the state for application in both LA County and state policy discussions.

The Association also plays a critical role in coordinating a single, collective First 5 advocacy voice in Sacramento and Washington, DC. Rather than having various local commissions engage in independent advocacy work around similar issues, the Association helps create coordinated policy agendas, aligned messaging, integrated partnerships with external organizations, and coordinated communications strategies to advance policy goals. By partnering with the Association, First 5 LA is able to:

- Leverage funds deployed by other local First 5 Commissions and First 5 California
- Support the only organization with the capacity and expertise to represent the unique perspectives of all local First 5 commissions in California, including First 5 LA
- Support the Association's leading effort to explore the development of a First 5 network strategy to unite and strengthen First 5s and inform the early childhood development field in California to advance more funding and greater impact
- Gain access to relationships and networks unique to the Association which directly benefit First 5 LA

- Support the Association's statewide policy and advocacy efforts that align with and reinforce First 5 LA's policy priorities

First 5 Association Strategic Partnership

Peter Barth
Gabriel Sanchez

March 30, 2017

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Discussion Overview

- About the First 5 Association
- Examples of Association leadership
- First 5 LA's partnership plans
- Next steps

About the First 5 Association

- Established in 2001 by all 58 local First 5 commissions

- On behalf of all local First 5 commissions:
  - Partners with statewide organizations
  - Advocates for policy and systems change
  - Coordinates policy, communications, and research activities
  - Provides program support and technical assistance

- Local First 5 leadership serve on coordinating and oversight committees

The Association in Action

- **Advocate:** Tobacco Tax Policies
- **Represent:** California Oral Health Plan Steering Committee
- **Communicate:** First 5 Fact Sheets, Policy Agenda
- **Coordinate:** Quality Rating and Improvement System Policy Development
- **Support:** Advocacy Trainings, Staff Summits
- **Innovate:** Annual Report Improvements

A Growing Partnership

- Build First 5 LA's brand and the reputation of First 5s statewide
- Engage decision makers, elevate awareness and create urgency
- Leverage best practices from and develop relationships with other local commissions
- Align policy, programs, research, and communications goals
- Move policies and change systems, including more funding for early childhood programs and First 5 commissions

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Strategic Partnership Criteria

- **The proposed Strategic Partnership is aligned with the adopted Strategic Plan.**

- The Strategic Partnership can provide specific resources needed by First 5 LA to implement an approved program or initiative in a manner or on a scale that makes the Strategic Partnership more cost effective than resources provided through a competitive solicitation

- The Strategic Partnership can implement an approved program or initiative more expeditiously than resources provided though a competitive solicitation

- The Strategic Partnership can provide a demonstrated level of ability or expertise that is only available in the community through the proposed Strategic Partnership

- The Strategic Partnership provides an opportunity to leverage First 5 LA funds to produce additional funding for the program or initiative or service.

Request for Board Action

1. Approve a Strategic Partnership with the First 5 Association of California through June 30, 2021 and authorize the Executive Director to execute a Master Agreement with the First 5 Association of California through June 30, 2018 for $458,000.

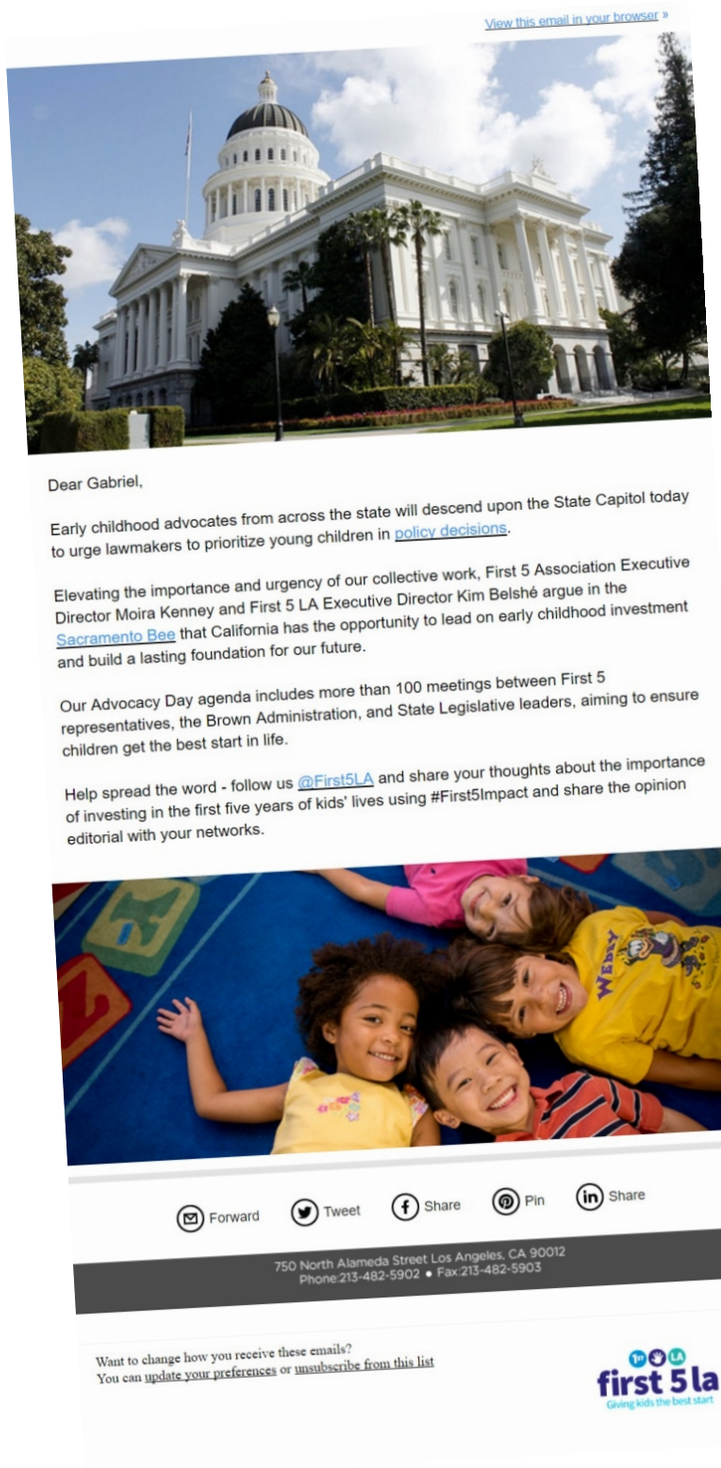
2. Authorize the Executive Director to amend or renew the Master Agreement, as needed, contingent upon Board-approved annual budgets and compliance with the Procurement policy.

Communications

- **Staffing:** Communications Director
- **Special Projects:** Statewide messaging and materials

- **Ongoing Efforts:** Coordinated public relations, op-eds, newsletters, policy briefs, research reports, social media
- **Total Request:** $125,000 for FY 17-18

Communications Example



View this email in your browser »

Dear Gabriel,

Early childhood advocates from across the state will descend upon the State Capitol today to urge lawmakers to prioritize young children in policy decisions.

Elevating the importance and urgency of our collective work, First 5 Association Executive Director Moira Kenney and First 5 LA Executive Director Kim Belshé argue in the Sacramento Bee that California has the opportunity to lead on early childhood investment and build a lasting foundation for our future.

Our Advocacy Day agenda includes more than 100 meetings between First 5 representatives, the Brown Administration, and State Legislative leaders, aiming to ensure children get the best start in life.

Help spread the word - follow us @First5LA and share your thoughts about the importance of investing in the first five years of kids' lives using #First5Impact and share the opinion editorial with your networks.

Forward Tweet Share Pin Share

750 North Alameda Street Los Angeles, CA 90012
Phone:213-482-5902 • Fax:213-482-5903

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Roberto Viramontes Retweeted

First 5 LA @First5LA · Jan 31

#First5LA's Executive Director, Kim Belshé, chats w/ @Rendon63rd at the First 5 Champions for Children Reception. #AdvocacyDay #First5Impact

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THE SACRAMENTO BEE

SACBEE.COM

State must make early education a top priority

In these volatile political times, one thing is clear to the majority of Americans: Early education is important.

Two polls conducted in 2016 show that voters prioritize early education opportunities. The First Five Years Fund found that 90 percent of Americans think government should work to make early education more accessible and affordable, and the Public Policy Institute of California found 67 percent of likely voters say California should fund voluntary preschool programs for all 4-year-olds in the state.

Beyond opinions, the evidence is clear: Early education is a smart investment. According to new research from USC and the University of Chicago, high-quality early childhood development programs support two generations – by supporting working parents to be more productive while providing their children lifelong skills. High-quality early childhood programs deliver a return of 13 percent per child per year, a better return than investing in the S&P 500.

Despite the research and the public support, California simply isn't investing enough in early education. More than 1.2 million eligible children still are not enrolled in subsidized child care because there isn't enough state funding. Sixty percent of our nation's 4-year-olds lack access to publicly funded preschool, according to the U.S. Department of Education. In California, 236,000 children and their families are priced out of high-quality, nonprofit preschool programs, and estimated waiting lists for working parents top more than 300,000. At the bottom, 40 percent of all 4-year-old Californians don't have an opportunity to learn and prepare for K-12.

Right now, California has an opportunity to ensure that families have access to affordable, quality child care that will prepare children for success in kindergarten and beyond. California slashed more than $1 billion in funding for early education during the recession, eliminating child care and preschool opportunities for more than 100,000 children and working families. State funding for early care and education is still 20 percent below pre-recession levels.

We need to do more. Gov. Jerry Brown made important progress last year with a budget deal that would add preschool slots, allow local preschools to support more livable wages for workers and preserve transitional kinder programs for 4-year-olds. But in his newly proposed 2017-18 budget, the governor opted to flatline funding for this year's expected preschool slots while removing wage increases for preschool workers. In 2017, we must recognize the importance of early education and make it a priority.

For every dollar spent today on early education, our state will see a future benefit of $6.30, based on reduced costs for crime, welfare and health care. Today in California – where market rates for private preschools are comparable to the cost of tuition at the University of California – too many youths, especially those from Latino and African American families, do not have access to quality programs that help put them on a level playing field with their more privileged counterparts.

Without adequate public support for preschool, cycles of inequality and inequity persist. We must address this critical issue in 2017 so that we do not spend future decades paying for our lack of foresight and investment.

While we face volatile times nationally, California has the opportunity to lead on early childhood investment and build a lasting foundation for our future.

BY KIM BELSHÉ AND MOIRA KENNEY
Special to The Bee

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first 5 la
Giving kids the best start

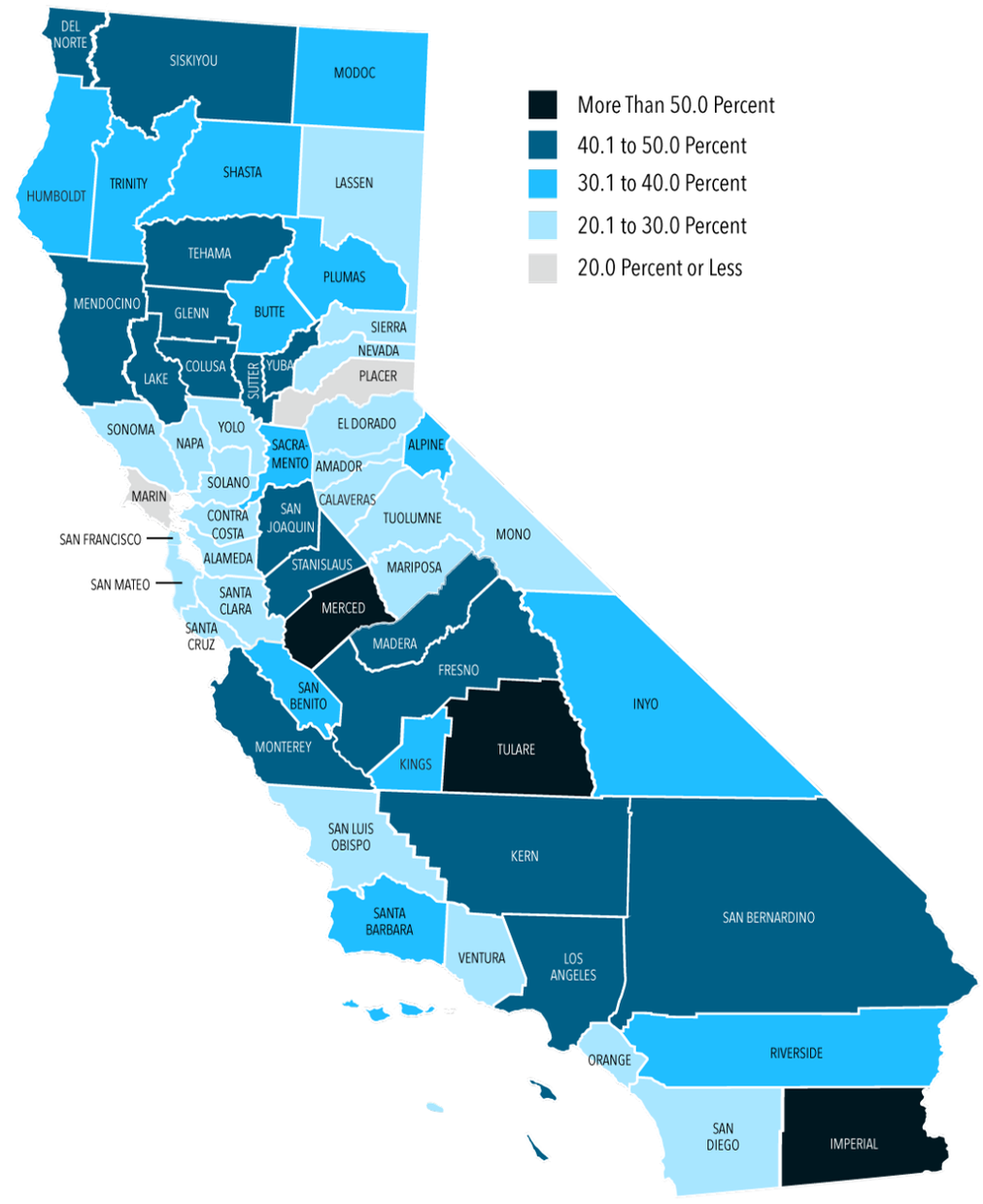
Policy and Advocacy

- **Staffing:** Policy Director
- **Special Projects:** Strategic planning, political asset mapping
- **Ongoing Efforts:** Policy agenda development, advocacy initiatives, policy coordination with other counties
- **Total Request:** $300,000 for the remainder of FY 16-17 and FY 17-18

Policy Example

The Share of Residents Enrolled in Medi-Cal Exceeds 40 Percent in 20 Out of 58 Counties

Medi-Cal Enrollees as a Percentage of the Population, January 2016



Note: For individual county percentages, see Scott Graves, "Medi-Cal Reaches Millions of People Across California, but Faces an Uncertain Future" (California Budget & Policy Center: November 2016) at http://bit.ly/2gmcEt8.
Source: Department of Finance and Department of Health Care Services

California Budget & Policy Center
Independent Analysis. Shared Prosperity.

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Programs – Help Me Grow

- **Staffing:** Health Systems Policy Coordinator and Help Me Grow (HMG) California Project Lead
- **Special Projects:** Establish HMG CA affiliate and network
- **Ongoing Efforts:** Provide support, coordination, technical assistance, and communications for HMG-implementing counties; state advocacy related to early identification and intervention
- **Request:** $100,000 over three years starting FY 17-18 (~$33,000 per year)

California Counties Adopting *HMG*

Affiliates

Alameda
Contra Costa
Fresno
Los Angeles
Orange
San Bernardino
San Francisco
San Joaquin
Santa Clara
Solano
Ventura
Yolo

Other Early Intervention Systems

San Diego

Learning Communities

Amador
Del Norte
El Dorado
Humboldt
Lassen
Mendocino
Merced
Napa
Nevada
Riverside
Sacramento
San Benito
San Mateo
Sonoma
Sutter
Yuba

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Next Steps

- Strategic Partnership and Master Agreement considered for action at the May Commission meeting

- Progress reports and updates throughout the year

- Annual budget requests for these and other Association-related projects each year

Questions?