

AGENDA

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

Budget & Finance Committee Chair: Robert Byrd

**Thursday, September 14, 2017
1:30 PM**

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



ASPOSE

Your File Format APIs

1. **ACTION**
Call to Order / Roll Call
- **Sheila Kuehl, Commission Chair**

2. **ACTION**
Consent
- **John Wagner, Executive Vice President**
 - A. Approve Commission Meeting Transcript and Summary Action Minutes - July 13, 2017 3
 - B. Approve the Monthly Financial Statements Month Ending July 31, 2017 51
 - C. Contract: Approve One Contract Renewal and Authorize Staff to Complete Final Contract Execution Upon Approval from the Board 57

3. **INFORMATION**
Remarks by the Commission Chair of the Board
- **Sheila Kuehl, Commission Chair**

4. **INFORMATION** 59
Executive Director's Report
- **Kim Belshé, Executive Director**

5. **INFORMATION** 97
Document Destruction
- **Craig Steele, Legal Counsel**

COMMISSIONERS

Los Angeles County Supervisor	Judy Abdo	Summer McBride
Holly J. Mitchell	Robert Byrd, Psy.D	Maricela Ramirez
<i>Chair</i>	Astrid Heger, M.D.	Carol Sigala
Brandon Nichols	Yvette Martinez	
<i>Vice Chair</i>		

EX OFFICIO MEMBERS

Barbara Ferrer, Ph.D.,
M.P.H., M.Ed.
Jacquelyn McCroskey, DSW
Deanne Tilton

EXECUTIVE DIRECTOR

Karla Pleitéz Howell

EXECUTIVE VICE PRESIDENT

John A. Wagner

A PUBLIC ENTITY

- | | | |
|-----|---|------------|
| 6. | INFORMATION
July Board Meeting/Retreat Follow-up: Strategic Plan Report Out
- Christina Altmayer, VP of Programs | 121 |
| 7. | Break | |
| 8. | INFORMATION
Family Supports Outcome: Update on LA County and First 5 LA's
Response to the Board of
Supervisors' Home Visiting Motion
- Barbara Andrade Dubransky, Director, Family Supports
- Reena John, Senior Program Officer, Family Supports
- Linda Aragon, Director, Maternal, Child and Adolescent Health
Programs,
Department of Public Health | 135 |
| 9. | INFORMATION
Public Comment (for items not on the agenda) | |
| 10. | ACTION
Adjournment | |



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MEETING OF FIRST 5 BOARD OF COMMISSIONERS
THURSDAY, JULY 13, 2017
750 NORTH ALAMEDA STREET, FIRST FLOOR
LOS ANGELES, CALIFORNIA 90012

REPORTED BY:
HEATHERLYNN GONZALEZ
CSR #13646

1 THURSDAY, JULY 13, 2017; LOS ANGELES, CALIFORNIA

2 1:31 P.M.

3 -000-

4 SUPERVISOR KUEHL: GOOD AFTERNOON. I SAY AGAIN,
5 GOOD AFTERNOON. ONCE A THIRD GRADE TEACHER, ALWAYS A
6 THIRD GRADE TEACHER. YOU KNOW, I NEVER WAS A THIRD GRADE
7 TEACHER.

8 ANYBODY HERE SEEN THE PLAY HEISENBERG? I'M JUST
9 -- IT'S SO INDICATED -- SO TAKEN WITH THE WAY PART OF THE
10 PLAY IS ABOUT HOW YOU CAN SAY TWO THINGS THAT APPEAR TO BE
11 DIRECTLY IN CONFLICT AND THEY'RE BOTH TRUE. AT ONE POINT,
12 THE CHARACTER SAYS, I HAVE NO CHILDREN. AND ANOTHER POINT
13 SHE SAYS, MY SON ISN'T SPEAKING TO ME. AND IN A FUNNY WAY
14 THAT MEANS BOTH THINGS ARE TRUE. AND IT JUST MAKES YOU
15 THINK, RIGHT? I NEVER WAS A THIRD GRADE TEACHER.

16 I AM REALLY DELIGHTED TO WELCOME BACK A GENTLEMAN
17 WHO HAS SERVED ON THIS BOARD OF COMMISSIONERS AND NOW TOOK
18 A HIATUS AND WE WERE WELL SERVED BY OTHERS, BUT NOW HE'S
19 BACK. REPRESENTING LACOE JOE YBARRA. LET ME TELL YOU A
20 LITTLE BIT ABOUT HIM. HE JOINED THE LA COUNTY OFFICE OF
21 EDUCATION, FOR THOSE OF YOU WHO DON'T KNOW WHAT LACOE
22 STANDS FOR, IN AUGUST OF 2010 AS ASSISTANT SUPERINTENDENT
23 OF HUMAN RESOURCE SERVICES AND WAS PROMOTED TO THE POST OF
24 EXECUTIVE DEPUTY SUPERINTENDENT IN SEPTEMBER OF 2015. HIS
25 WIDE RANGING EXPERIENCE INCLUDES SIX YEARS AS LITTLE LAKE

1 CITY SCHOOL DISTRICT'S ASSISTANT SUPERINTENDENT OF
2 PERSONNEL SERVICE AND AN EARLIER ASSIGNMENT AS DIRECTOR OF
3 HUMAN RESOURCES FOR NEW PORT MESA UNIFIED SCHOOL DISTRICT
4 IN ORANGE COUNTY. PRIOR TO THAT, HE WAS A TEACHER,
5 ASSISTANT PRINCIPAL AND PRINCIPAL IN THE NORWALK-LA MIRADA
6 UNIFIED SCHOOL DISTRICT.

7 HE HOLDS A DOCTORATE IN URBAN EDUCATIONAL
8 ADMINISTRATION FROM CLAREMONT, A MASTER'S IN EDUCATIONAL
9 ADMINISTRATION FROM CAL STATE DOMINGUEZ HILLS, AND A
10 BACHELOR'S FROM CAL STATE FULLERTON.

11 SO WELCOME. WOULD YOU LIKE TO SAY A FEW WORDS
12 UPON YOUR RETURN?

13 COMMISSIONER YBARRA: THANK YOU VERY MUCH. IT'S
14 A PLEASURE TO BE HERE, BE BACK ON THE TEAM. I REALLY
15 APPRECIATE EVERYTHING THAT THE TEAM DOES. WE'RE HERE TO
16 WORK IN COLLABORATION AS WELL WITH OUR BIG HEAD START
17 PROGRAM THAT WE HAVE WITH LACOE. SO I WANT TO MAKE SURE
18 THAT WE'RE ALL MOVING IN THE RIGHT DIRECTION. THANK YOU
19 FOR HAVING ME.

20 SUPERVISOR KUEHL: WE'RE DELIGHTED THAT YOU'RE
21 HERE. AND I THINK THERE ARE SOME PEOPLE ON THE BOARD THAT
22 YOU HAVEN'T MET. SO PERHAPS WHEN WE TAKE OUR BREAK,
23 YOU'LL WANDER ABOUT THE HORSESHOE AND, YOU KNOW, SHAKE
24 HANDS. I'M SURE THEY'LL ALL BE VERY HAPPY TO TELL YOU
25 ENDLESSLY KIND OF WHAT THEY DO AND WHAT THEY THINK AND HOW

1 WE ARE. WE'RE ALL VERY EMPOWERED HERE, WHICH IS SO COOL.

2 OKAY. WE'RE THEN CALLED TO ORDER. CAN WE HAVE A
3 ROLE CALL, PLEASE, MADAM SECRETARY.

4 SECRETARY: JUDY ABDO.

5 COMMISSIONER ABDO: HERE.

6 SECRETARY: LINDA ARAGON.

7 COMMISSIONER ARAGON: HERE.

8 SECRETARY: JANE BOECKMANN.

9 COMMISSIONER BOECKMANN: HERE.

10 SECRETARY: YVETTE MARTINEZ.

11 COMMISSIONER MARTINEZ: HERE.

12 SECRETARY: BRANDON NICHOLS.

13 COMMISSIONER NICHOLS: HERE.

14 SECRETARY: JONATHAN SHERIN.

15 COMMISSIONER SHERIN: HERE.

16 SECRETARY: ROMALIS TAYLOR.

17 COMMISSIONER TAYLOR: HERE.

18 SECRETARY: MARLENE ZEPEDA.

19 COMMISSIONER ZEPEDA: HERE.

20 SECRETARY: CARLA PLEITEZ HOWELL.

21 COMMISSIONER HOWELL: HERE.

22 SECRETARY: WENDY SMITH.

23 COMMISSIONER SMITH: HERE.

24 SECRETARY: DEANNE TILTON.

25 COMMISSIONER TILTON: HERE.

1 SECRETARY: JOSEPH YBARRA.

2 COMMISSIONER YBARRA: HERE.

3 SECRETARY: QUORUM IS PRESENT.

4 SUPERVISOR KUEHL: DIDN'T CALL MY NAME.

5 SECRETARY: OH, SHEILA KUEHL.

6 SUPERVISOR KUEHL: HOW SOON THEY FORGET.

7 SECRETARY: SORRY, SUPERVISOR.

8 SUPERVISOR KUEHL: OKAY. A QUORUM IS STILL
9 PRESENT.

10 LET US MOVE THEN TO THE CONSENT CALENDAR. LET ME
11 ALSO SAY TO ALL PRESENT THAT, BECAUSE WE HAVE A WONDERFUL
12 AND EXCITING AND FRUITFUL EXERCISE TO ENGAGE IN TODAY, I
13 WANT AND ASK IF EVERYBODY COULD KEEP SLAVISHLY TO THEIR
14 TIME LIMITS AS SET OUT ON THE AGENDA. AND, ESPECIALLY, I
15 DO MEAN TO TAKE OUR BREAK AT 2:30 SO THAT WE CAN ALL BE IN
16 OUR ROOMS BY 2:40 TO START THE EXERCISE. SO GIVES US
17 PLENTY OF TIME I THINK. AND I'LL TURN IT OVER TO MR.
18 WAGNER.

19 MR. WAGNER: THANK YOU, MADAM CHAIR. GOOD
20 AFTERNOON, COMMISSIONERS.

21 ON THE ITEM ON CONSENT, THERE ARE TWO CONTRACTS
22 BEING BROUGHT FORWARD FOR YOUR CONSIDERATION. THE FIRST
23 IS A NEW AGREEMENT WITH MASTERS POLICY CONSULTING. THIS
24 IS A CONTRACT FOR A TOTAL OF \$270,000 OVER THE NEXT THREE
25 YEARS. AND THIS WORK IS REALLY TO ALLOW THE CONSULTANT TO

1 BEGIN TO MOVE INTO THE IMPLEMENTATION OF OUR POLICY AND
2 SYSTEMS CHANGE WORK, PROVIDING TECHNICAL ASSISTANCE AND
3 COACHING TO STAFF AS WE SHIFT INTO IMPLEMENTATION.

4 THE SECOND CONTRACT FOR YOUR CONSIDERATION IS
5 BLACKBAUD SOLUTIONS. AND THIS IS A BUSINESS LICENSE FOR
6 OUR FINANCIAL AND ACCOUNTING SYSTEM. HISTORICALLY, THE
7 BOARD HAS NOT SEEN THIS CONTRACT BECAUSE THE THRESHOLD FOR
8 BOARD-APPROVED CONTRACTS IS \$75,000, AND THIS
9 TRADITIONALLY IN AN ANNUAL BASIS FALLS BELOW THAT.

10 HOWEVER, AS YOU'VE HEARD AT PPC AND OTHER CONVERSATIONS,
11 WE'VE BEEN ENGAGED WITH BLACKBAUD ON THE REBUILDING OF THE
12 CHART OF ACCOUNTS AND THAT HAS ADDED SOME ADDITIONAL
13 CONSULTANT HOURS TO THIS CONTRACT RAISING IT TO \$103,922,
14 THUS REQUIRING YOUR APPROVAL.

15 AND THE FINAL POINT TO MAKE ON CONSENT IS SUBITEM
16 2D. YOU'LL SEE FOR YOUR REVIEW A STRATEGIC PARTNERSHIP
17 WITH UCLA FOR AN AMOUNT OF \$522,000. THIS ITEM WAS THE
18 TOPIC OF STAFF PRESENTATION TO THE PROGRAM AND PLANNING
19 COMMITTEE ON JUNE 22ND. YOUR APPROVAL OF THIS ITEM WOULD
20 AUTHORIZE STAFF TO EXECUTE A STRATEGIC PARTNERSHIP WITH
21 UCLA AND TO PROVIDE SUPPORT FOR IMPLEMENTATION OF THE
22 EARLY DEVELOPMENT INSTRUMENT OR EDI KINDERGARTEN
23 ASSESSMENT TOOL. UCLA IS THE ONLY AUTHORIZED TECHNICAL
24 ASSISTANCE/LICENSED PROVIDER OF THIS EDI TOOL. THIS
25 STRATEGIC PARTNERSHIP AND RESULTING CONTRACT WOULD ALLOW

1 US TO LEVERAGE THE MOMENTUM OF SEVERAL SCHOOL DISTRICTS
2 ACROSS THE COUNTY CURRENTLY USING EDI BY PROVIDING SUPPORT
3 TO COMMUNITIES AND ADDITIONAL SCHOOL DISTRICTS FOR THEIR
4 IMPLEMENTATION OF THIS KINDERGARTEN READINESS ASSESSMENT
5 TOOL.

6 SO BEFORE I TURN IT BACK OVER TO THE CHAIR, I'LL
7 ASK COUNSEL IF THERE ARE ANY CONFLICTS.

8 MR. STEELE: THANK YOU, CHAIR. WITH REGARD TO
9 ITEM 2D, THE RECORD SHOULD REFLECT THAT VICE CHAIR ABDO IS
10 ABSTAINING FROM THAT ITEM DUE TO THE POTENTIAL FOR A
11 CONFLICT OF INTEREST.

12 SUPERVISOR KUEHL: ALL RIGHT. THANK YOU. ARE
13 THERE ANY QUESTIONS ABOUT ANY OF THE THREE CONTRACTS?

14 SEEING NONE, I DO HAVE A MOTION TO ADOPT AND
15 APPROVE THE CONSENT CALENDAR?

16 COMMISSIONER BOECKMANN: SO MOVED.

17 SUPERVISOR KUEHL: IT'S MOVED AND --

18 COMMISSIONER TAYLOR: SECONDED.

19 SUPERVISOR KUEHL: -- SECONDED.

20 IS THERE ANY OBJECTION TO A UNANIMOUS VOTE
21 APPROVING THE CONSENT CALENDAR?

22 COMMISSIONER ABDO: EXCEPT FOR MY VOTE.

23 SUPERVISOR KUEHL: THAT WILL BE TAKEN INTO
24 ACCOUNT.

25 ALL RIGHT. GOOD EXCELLENT. THANK YOU VERY MUCH.

1 I THINK THE NEXT ITEM ON THE AGENDA IS A BRIEF
2 STATEMENT BY THE CHAIR. AND I WANT TO ADDRESS MYSELF TO
3 KIND OF THE RELATIONSHIP BETWEEN AND AMONG, AS I USUALLY
4 TRY TO DO, THE THINGS THAT WE'RE TRYING TO DO IN THE
5 COUNTY AND HOW WELL I THINK WE'RE WORKING WITH FIRST 5 AND
6 HOW THE COLLABORATION AND TO SOME EXTENT THE INTEGRATION
7 HAS BEEN SO USEFUL FOR -- FOR BOTH OF US.

8 BUT I WAS THINKING PARTICULARLY TODAY WHEN WE
9 TALK ABOUT OR WILL TALK ABOUT SYSTEMS CHANGE. THE
10 MATERIALS THAT WERE PROVIDED VERY HELPFUL TO HELP US
11 REMIND OURSELVES OR THINK FOR THE FIRST TIME ABOUT WHY THE
12 NOTION OF SYSTEMS CHANGE IS DIFFERENT FROM SIMPLY FUNDING
13 A PROGRAM, HAVING IT BE A PILOT, SCALING IT UP, THINKING
14 ABOUT ADDRESSING SORT OF ONE THING AT A TIME. IT TAKES
15 INTO ACCOUNT, REALLY, THE FACT THAT THERE ARE WHOLE
16 PROGRAMS THAT ADDRESS OUR POPULATION. AND THAT THEY --
17 THEY COME TOGETHER IN A SENSE IN OUR POPULATION. EACH OF
18 THEM, HOWEVER, THINKS OF THEMSELVES AS A SYSTEM.

19 MANY YEARS AGO WHEN I WAS WORKING WITH THE
20 BATTERED WOMEN'S MOVEMENT WE WERE TRYING TO WORK WITH THE
21 COURTS AND THE FACT THAT THEY DID NOT REALLY ACT IN A WAY
22 THAT HELPED BATTERED WOMEN GET THEIR ORDERS, EVEN BE
23 TREATED AS HUMAN BEINGS. IT WAS KIND OF LIKE, I'M A
24 COURT, I'M OPEN FROM 9:00 TO 3:00, YOU COME IN ON TUESDAY
25 BETWEEN 1:00 AND 2:00, GO TO THIS WINDOW AND GET A

1 RESTRAINING ORDER. AND SO SYSTEMS CHANGE WAS ESSENTIALLY
2 YOUR WHOLE SYSTEM IS NOT SERVING THE PEOPLE THAT YOU THINK
3 YOU'RE SERVING.

4 BUT THEN OF COURSE THERE WAS THE ATTORNEYS WHO
5 WERE DIFFERENT FROM THE COURT AND NEEDED TO BE SENSITIVE.
6 THERE WAS THE WHOLE MEDICAL ESTABLISHMENT WHO DIDN'T EVEN
7 LOOK ON THIS KIND OF TRAUMA AS A HEALTH ISSUE AT TIME,
8 EVEN THOUGH WOMEN WERE PRESENTING OFTEN IN THE EMERGENCY
9 ROOM ABOUT THIS THING.

10 SO I SPENT A COUPLE OF YEARS FLYING AROUND THE
11 COUNTRY HIRED TO TRAINED JUDGES AND ADVOCATES AND
12 ACADEMICS AND ANYBODY I COULD GET TO GIVE ME A CONTRACT.
13 AND I USED TO HAVE THEM ALL DO ONE OF THOSE TEAM EXERCISES
14 WHERE YOU BUILD SOMETHING TOGETHER WHERE I WOULD EITHER
15 GIVE THEM TINKER TOYS OR CONSTRUCTION PAPER -- OBVIOUSLY,
16 THIS IS THE OLD DAYS -- GLUE AND GLITTER STICKS AND
17 CRAYONS AND ANYTHING, WHATEVER, AND ASK THEM TO BUILD A
18 SYSTEM, THE CENTER OF WHICH WAS THE WOMAN HERSELF AND HER
19 FAMILY; THAT SHE WAS THE SYSTEM; THAT SHE WAS THE SYSTEM,
20 BUT NOT THAT SHE HAD TO CHANGE, BUT THAT WE HAD TO
21 RECOGNIZE HOW WE ALL WORK TOGETHER. AND SO WE COULDN'T
22 CHANGE INDIVIDUALLY EITHER. WE CAN'T SAY, WELL, DCFS YOU
23 DO SOMETHING, BUT DON'T TELL ALL THE REST OF US BECAUSE,
24 YOU KNOW, WE'RE BUSY MAKING OUR OWN CHANGE HERE IN MENTAL
25 HEALTH.

1 AND I THINK THE COUNTY IS NOT VERY FAR ALONG ON
2 DOING THIS, BUT CERTAINLY WE'RE RECOGNIZING MORE HOW OUR
3 DEPARTMENTS INTERACT AND WHAT IT MEANS TO BE CLIENT
4 FOCUSED; THAT THIS CLIENT IS A PERSON, NOT A MENTAL HEALTH
5 ISSUE, A SUBSTANCE ABUSE USER, A MOTHER, A WORKER, A --
6 YOU KNOW, PERSON LOCKED IN THEIR BATHROOM FOR A WEEK AND
7 STARVING, WHATEVER.

8 SO I THINK AS WE LOOK TO SYSTEMS CHANGE AND I
9 THINK WHAT WE'RE TALKING ABOUT TODAY HELPS SO MUCH WITH
10 THIS, I WANT US TO ALSO THINK ABOUT THE COLLABORATIVE
11 NATURE OF WHAT NEEDS TO GO TOGETHER. IT MAY BE ONE THING
12 TO TALK ABOUT OUR PARKS SYSTEM, YET ANOTHER THING TO TALK
13 ABOUT OUR TRANSIT SYSTEM. BUT IF THEY NEVER TALK TO EACH
14 OTHER, WHAT IS A WOMAN WITH A STROLLER SUPPOSED TO DO
15 GOING FROM THE EXPO LINE TO A PARK FOR INSTANCE.

16 SO I THINK THOSE ARE THE CHALLENGES. I REALLY
17 WELCOME THE OPPORTUNITY -- THIS IS SUCH A GOOD GROUP OF
18 THOUGHT PARTNERS THAT IT'S A PRIVILEGE FOR ME. I REALLY
19 LIKE BEING HERE BECAUSE, THOUGH I LOVE THE PEOPLE AT THE
20 COUNTY AND THEY ARE ALSO EXCELLENT THOUGHT PARTNERS -- I
21 MEAN, THEY REALLY ARE, MORE FUN THAN I'VE EVER HAD IN MY
22 WHOLE LIFE -- STILL THE FACT THAT WE GET TO SPEND A COUPLE
23 OF HOURS THIS AFTERNOON THINKING ABOUT THESE ISSUES AND
24 TALKING ABOUT THEM DOESN'T STOP WHEN WE WALK OUT THE DOOR
25 AT 4:30 AND IT REALLY I THINK INFORMS THE WORK THAT EACH

1 US DOES AND HOPES TO DO.

2 SO THANKS TO FIRST 5. THOSE ARE MY THOUGHTS FOR
3 THE DAY.

4 LET ME TURN IT OVER TO OUR CEO WHO IS REALLY
5 DRIVING A LOT OF THIS AND I'M GRATEFUL FOR THAT.

6 MS. BELSHE: THANK YOU SO MUCH, MADAM CHAIR.
7 THOSE ARE TERRIFIC COMMENTS, REALLY VERY, VERY HELPFUL IN
8 TEEING UP OUR TIME TODAY. AND I THINK TODAY'S WORKSHOP
9 FOLLOWS WELL ON OUR LAST BOARD MEETING WHERE THE BOARD
10 FIRST APPROVED THE BUDGET FOR FISCAL YEAR 2017-18, WHICH
11 AS COMMISSIONERS KNOW, INCLUDES A LOT OF INVESTMENTS, A
12 LOT OF RESOURCES TO SUPPORT THE STRATEGIES THAT REALLY
13 REFLECT OUR EVOLVING APPROACH AND FOCUS ON POLICY AND
14 SYSTEMS CHANGE IN PARTNERSHIP WITH OTHERS.

15 WE ALSO HEARD LAST WEEK FROM TWO OF OUR KEY
16 COUNTY PARTNERS: JUDGE MIKE NASH, THE HEAD OF OFFICE OF
17 CHILD PROTECTION, AND KATE ANDERSON, THE HEAD OF THE
18 CENTER FOR PUBLIC/PRIVATE STRATEGIC -- STRATEGIC
19 PUBLIC/PRIVATE PARTNERSHIP. THERE WE GO. AND THAT WAS A
20 TERRIFIC AND TIMELY PRESENTATION BECAUSE WE HEARD DIRECTLY
21 FROM COUNTY LEADERSHIP ABOUT DIFFERENT WAYS THAT FIRST 5
22 LA AND OTHER FUNDERS ARE PARTNERING WITH THE COUNTY TO
23 HELP SUPPORT SOME OF THE CHANGES IN THEIR SYSTEMS, THEIR
24 POLICIES, THEIR PRACTICES WITH A PARTICULAR FOCUS ON
25 PROMOTING PREVENTION.

1 SINCE THAT MEETING, THE OCP PREVENTION PLAN FOR
2 LA COUNTY HAS COME OUT. SO THAT IS NOW A FORMAL DOCUMENT
3 WHICH IN SO MANY WAYS I THINK IS REALLY FOUNDATIONAL FOR
4 CREATING A NEW PREVENTION SYSTEM FOR ALL FAMILIES IN LA
5 COUNTY. AND IT'S A SYSTEM -- AND THIS IS A SYSTEMS
6 BUILDING, SYSTEMS CHANGE EFFORT AS THE CHAIR JUST SPOKE TO
7 THAT REALLY DOES NEED TO PUT PARENTS AT THE CENTER OF THE
8 WORK THE COUNTY IS DOING AND THAT WE ARE DOING IN SUPPORT
9 OF THOSE COUNTY SYSTEMS CHANGE EFFORTS BECAUSE WE KNOW
10 THAT PARENTS DON'T EXPERIENCE LIFE IN SILOS IN TERMS OF
11 THE NATURE OF THEIR CHALLENGES ARE NOT UNIQUE AND DISCRETE
12 BUT THEY ARE MULTIFACETED AND COMPLEX. AND IT'S TOTALLY
13 FAIR AND APPROPRIATE FOR THEM TO EXPECT THE SERVICES AND
14 SUPPORTS UPON WHICH THEY RELY TO STRENGTHEN THEIR FAMILIES
15 AND PROVIDE THE BEST SUPPORT FOR THOSE CHILDREN THAT THOSE
16 SERVICES AND SYSTEMS BE INTEGRATED AND COORDINATED TO THE
17 BEST DEGREE POSSIBLE.

18 SO TODAY WE'RE GOING TO TALK ABOUT WHERE WE ARE,
19 HOW WE'RE DOING WITH IMPLEMENTATION OF THE STRATEGIC PLAN
20 FROM A SYSTEMS CHANGE FRAMEWORK. WE ARE THEN GOING TO GO
21 DEEPLY INTO THE BUILT ENVIRONMENT AND TRAUMA-INFORMED
22 CARE, WHICH ARE TWO VERY EMERGENT AREAS OF WORK FOR FIRST
23 5 LA.

24 AND AS WE DO SO, I WANT TO CALL OUT A FEW
25 IMPLICATIONS THAT I REALLY WANT TO INVITE YOU TO CONTINUE

1 TO THINK THROUGH WITH US, REALLY UNDERSCORING A NUMBER OF
2 THE POINTS THAT THE CHAIR JUST MADE BECAUSE DOING THIS
3 KIND OF WORK IS DIFFERENT FOR FIRST 5 LA. AND EVEN IF WE
4 HAD BEEN DOING IT A LONG TIME, WE'D PROBABLY STILL BE
5 TALKING ABOUT SIMILAR ISSUES BECAUSE AS THE SUPERVISOR
6 JUST NOTED, THIS IS CHALLENGING STUFF. THIS IS COMPLEX.
7 IT IS MULTIFACETED. IT IS EVER CHANGING. AND, YOU KNOW,
8 FRANKLY, IT'S A LOT EASIER TO DO FUNDING OF DIRECT
9 SERVICES. IT ABSOLUTELY IS.

10 SO I REALLY AM SO PROUD TO BE A PART OF THIS
11 ORGANIZATION THIS IS REALLY STEPPING UP AND SAYING, YEAH,
12 THIS IS HARD AND DIFFICULT AND CHALLENGING; YES, WE LOVE
13 OUR COUNTY AGENCY PARTNERS, BUT IT ALSO IS A LOT MESSIER
14 AND MORE CHALLENGING TO DO THIS KIND OF WORK WITH OUR
15 COUNTY AGENCIES AND PARTNERS.

16 SO A COUPLE OF THE IMPORTANT IMPLICATIONS FOR US
17 AS A FUNDER, AS A PARTNER, AS A LEADER THAT I WANT TO
18 ENCOURAGE US TO KEEP IN MIND: NUMBER ONE, IS THIS
19 IMPLICATIONS FOR OUR WORK WITH OTHERS. AND THAT REALLY IS
20 ABOUT PARTNERSHIP AND IT'S BEING CREATIVE, IT'S BEING
21 BOLD, IT'S BEING, YOU KNOW, OPEN TO FINDING PARTNERS THAT
22 PERHAPS WE HAVEN'T EVEN THOUGHT ABOUT PREVIOUSLY. AND
23 IT'S WORKING IN COLLABORATION AROUND ALIGNED PRIORITIES
24 AND GOALS. AND THE GOOD NEWS IS, THERE ARE A LOT OF FOLKS
25 WHO CARE A LOT ABOUT KIDS AND FAMILIES. SO IT'S UP TO US

1 TO REALLY LEAN INTO, IDENTIFY AND WORKING COLLABORATIVELY
2 AND STRATEGICALLY AROUND SHARED GOALS.

3 IMPLICATIONS FOR THE ROLE WE PLAY. THIS IS
4 PROBABLY AMONG THE BIGGEST SHIFTS AND REALLY WANT TO
5 INVITE COMMISSIONERS IN THE BREAKOUT GROUPS TO REALLY BE
6 THINKING WITH US ABOUT OUR ROLE. WE ARE EVOLVING FROM A
7 MORE TRADITIONAL, HISTORIC APPROACH ON FUNDING SERVICES TO
8 PLAY A DIFFERENT ROLE. YES, WE CONTINUE TO BE A FUNDER,
9 BUT WE'RE ALSO PLAYING A ROLE AS A CATALYST, AS A
10 CONVENER, AS A COLLABORATIVE, AS A THOUGHT PARTNER, AS A
11 SPOKESPERSON ON BEHALF OF YOUNG KIDS.

12 SO THIS ISSUE AROUND IMPLICATIONS FOR OUR ROLE IS
13 IMPORTANT; IMPLICATIONS FOR HOW WE DO OUR WORK INTERNALLY.
14 AND SHARED WITH YOU SOME OF THE EVOLUTIONS IF YOU WILL IN
15 TERMS OF HOW WE ARE WORKING IN OUR NEW STRUCTURE WITH NEW
16 STAFFING IN MUCH MORE COLLABORATIVE AND INTEGRATED WAYS,
17 BUT WE'VE GOT SOME WORK TO DO BECAUSE WORKING
18 COLLABORATIVELY AS AN ORGANIZATION IS CHALLENGING, JUST AS
19 WORKING COLLABORATIVELY WITH EXTERNAL PARTNERS IS
20 CHALLENGING.

21 IMPLICATIONS FOR HOW WE ENGAGE PARENTS IS
22 PARTICULARLY IMPORTANT BECAUSE, YOU KNOW, PARENTS ARE THE
23 ONES WHO ARE LIVING THEIR LIVES. AND SO THIS IS THE --
24 HOW DO WE BRING THE PARENT VOICE, HOW DO WE BRING THE
25 PARENT LIVED EXPERIENCE INTO THESE BROADER SYSTEMS CHANGE

1 CONVERSATIONS WHICH SOMETIMES CAN BE VERY ESOTERIC. AND
2 AS THE CHAIR SAID, WE REALLY NEED TO BE VERY INTENTIONAL
3 ABOUT ENSURING THAT WE'RE PUTTING PARENTS AT THE CENTER OF
4 THESE SYSTEMS AND ENSURING THAT THE WORK WE'RE DOING IS
5 NOT JUST FOR THEM TO THEM BUT REALLY WITH THEM AND
6 ADVANCING THEIR PARTICULAR PRIORITIES.

7 I AM -- SECOND-TO-LAST IMPLICATION, TIME. THIS
8 KIND OF WORK TAKES MORE TIME. IT JUST TAKES MORE TIME.
9 AND SO WHEN WE REFLECT UPON OUR OUTCOMES, WHEN WE REFLECT
10 UPON OUR PRIORITIES, WE TO OUR CREDIT AND TO THE COUNTY'S
11 CREDIT ARE I THINK APPROPRIATELY AMBITIOUS. AND WE SHOULD
12 BE AMBITIOUS. BUT WE ALSO NEED TO BE NOT ONLY LASER-LIKE
13 IN FOCUS IN TERMS OF THE OUTCOMES WE SEEK, AMBITIOUS
14 THOUGH THEY MAY BE. BUT WE ALSO NEED TO BE REALISTIC
15 ABOUT, SO WHAT'S THE KIND OF TIME THAT'S GOING TO BE
16 REQUIRED TO CONTRIBUTE WITH OUR PARTNERS TO MATERIAL AND
17 MEANINGFUL CHANGE.

18 FINALLY, THE IMPLICATION FOR IMPACT. THAT'S WHY
19 WE'RE DOING THIS. THE IMPLICATIONS, THE POTENTIAL FOR FAR
20 GREATER REACH IN TERMS OF SCALABLE, SUSTAINABLE CHANGE FOR
21 FAMILIES WITH YOUNG KIDS IS SO MUCH GREATER BY DOING THIS
22 KIND OF SYSTEMS WORK. SO, YES, IT'S COMPLEX, CHALLENGING,
23 HARD, UNCERTAIN, ALL THOSE KIND OF FUN, SOMEWHAT STRESSFUL
24 WORDS, BUT WE DO IT BECAUSE OF THE POTENTIAL AND THE
25 IMPORTANT IN THE POWER OF REALLY CONTRIBUTING TO

1 MEANINGFUL CHANGE AT SCALE FOR FAMILIES WITH YOUNG KIDS.

2 SO IN CLOSING, I WANT TO THANK ALL OF OUR STAFF.
3 EVERY SINGLE MEMBER OF FIRST 5 LA IS A PART OF THIS
4 EVOLUTION IN OUR WORK. AND I'M GRATEFUL FOR THE GOOD
5 PROGRESS WE'RE MAKING. IN PARTICULAR I WANT TO COMMEND
6 CHRISTINA, WHO IS OUR VICE PRESIDENT OF PROGRAMS, AND THE
7 FOUR OUTCOME OR DEPARTMENT DIRECTORS WHO ARE REALLY
8 LEADING THE ON-THE-GROUND PROGRAMMATIC WORK AND DOING SO
9 WITH A FAR MORE INTENTIONAL AND DELIBERATE FOCUS ON
10 SYSTEMS CHANGE AND POLICY CHANGE PERSPECTIVE.

11 SO LET US KNOW WHAT EXCITES YOU. LET US KNOW
12 WHAT OPPORTUNITIES YOU SEEK. AND IN PARTICULAR, THINK
13 CAREFULLY WITH US ABOUT WHAT OUR HIGHEST AND BEST USE IS,
14 WHAT OUR ROLE CAN AND REALLY SHOULD BE IN TERMS OF MAKING
15 A CONTRIBUTION IN THE TWO AREAS WE'RE GOING TO BE FOCUSING
16 ON TODAY.

17 OKAY. SO I WILL LEAVE THAT THERE. AND I'D LIKE
18 TO NOTE FOR THE RECORD, MADAM CHAIR, THAT WE'RE AHEAD OF
19 SCHEDULE.

20 SUPERVISOR KUEHL: SO FAR. SEE HOW CHRISTINA
21 DOES.

22 MS. ALTMAYER: I WILL KEEP THAT GUIDANCE IN MIND
23 AS I SPEAK.

24 SUPERVISOR KUEHL: BUT LET ME SAY A FEW THINGS
25 BEFORE, IF I MAY. JUST SORT OF RULES OF THE ROAD FOR

1 COMMISSIONERS AND FOR THOSE WHO ARE HERE FROM THE PUBLIC
2 AND OTHER STAFFS.

3 WE'RE GOING TO FINISH THIS PART OF THE
4 PRESENTATION ABOUT 2:30 AND WE'RE GOING TO GO INTO,
5 ESSENTIALLY, FOUR SESSIONS, TWO AT A TIME: ONE FROM 2:40
6 AND 3:20 AND ONE FROM 3:25 TO 4:05, IN WHICH WE WILL
7 DISCUSS IN ONE OF THE ROOMS TRAUMA-INFORMED CARE AND THE
8 OTHER BUILT ENVIRONMENT, TAKE A FIVE-MINUTE BREAK AND THEN
9 COMMISSIONERS WILL SWITCH. THEIR TEAM WILL THEN GO TO THE
10 OTHER ROOM.

11 PUBLIC ARE OF COURSE WELCOME. THESE ARE OPEN
12 MEETINGS. HOWEVER, I WOULD ASK THAT THE PUBLIC SAVE
13 PUBLIC COMMENT ON ANY OF THESE ISSUES TO THE END WHEN WE
14 WILL WELCOME IT SO THAT ALL THE COMMISSIONERS CAN HEAR AND
15 NOT JUST HALF, IF SOMEBODY WANTS TO MAKE A COMMENT IN ONE
16 ROOM OR ANOTHER.

17 ALSO, I WANT TO ASK IN EACH OF THE BREAKOUT
18 GROUPS THAT EACH GROUP IDENTIFY ONE COMMISSIONER TO REPORT
19 OUT FROM THEIR GROUP. SO THAT WILL BE FOUR ALTOGETHER OR
20 IT COULD BE THE SAME ONE FOR TWO IN A GROUP, THOUGH THAT'S
21 A LOT OF WORK, TO OUR SEPTEMBER BOARD MEETING. AND, OF
22 COURSE, WE WILL BE IN CONTACT WITH THE PERSON WHO'S
23 REPORTING OUT TO REMIND YOU AND WORK WITH YOU, BUT TO DO
24 WHAT WE DID LAST TIME WE HAD THIS EXERCISE WHICH HALF OF
25 YOU HAVEN'T BEEN THROUGH. BUT OKAY.

1 MS. BELSHE: AND STAFF WILL BE TAKING NOTES.

2 SUPERVISOR KUEHL: STAFF WILL TAKE NOTES. THE
3 COMMISSIONER TO REPORT OUT WILL NOT HAVE TO TAKE NOTES.
4 THERE WILL BE A FACILITATOR. BUT ONE OF OUR BOARD MEMBERS
5 WILL VOLUNTEER IN EACH GROUP TO BE THE PERSON WHO WILL
6 REPORT IN SEPTEMBER HAVING LOOKED AT THE NOTES, REVIEWED
7 THE NOTES, THOUGHT ABOUT YOUR OWN THING, TO BE THE PERSON
8 TO SPEAK FOR EACH THOSE FOUR GROUPS, AND THEN WE'LL HAVE A
9 FULL DISCUSSION IN SEPTEMBER.

10 WHAT HAPPENS TODAY, HOWEVER, IS THAT, WHEN WE
11 COME BACK AS A GROUP, I ASK EACH COMMISSIONER TO BE
12 PREPARED TO SHARE VERY BRIEFLY I THINK ONE SENTENCE A KIND
13 OF AHA THAT THEY HAD IN ONE OF THE SESSIONS OR SOME KIND
14 OF A REFLECTION. BUT THESE ARE NOT LONG SPEECHES ON OUR
15 PART. THESE ARE SORT OF POPUPS IN A WAY. THE THING THAT
16 CAUGHT YOUR FANCY, THE THING THAT MADE YOU THINK, THE
17 THING THAT YOU'RE GOING TO BE THINKING ABOUT FROM NOW
18 THROUGH THE NEXT MEETING IN SEPTEMBER.

19 SO I THINK, GIVEN THOSE RULES OF THE ROAD, ANY
20 QUESTIONS FROM COMMISSIONERS ABOUT RULES OF THE ROAD?

21 OKAY. SO WE'VE GOT THIS STRATEGIC PLAN. HOW WE
22 DOING?

23 MS. ALTMAYER: WE'RE DOING WELL. THANK YOU,
24 COMMISSIONERS. I'M GOING TO MAKE SOME BRIEF COMMENTS TO
25 DO SOME CONTEXT SETTING FOR THE DISCUSSIONS AS THE CHAIR

1 POINTED OUT WILL TAKE PLACE IN OUR BREAKOUT GROUPS. OUR
2 FOCUS TODAY AS YOU'VE HEARD IS REALLY ON SYSTEMS CHANGE
3 AND HOW FIRST 5 LA IS REALLY INTENTIONALLY FOCUSED ON
4 SYSTEMS CHANGE AS A DRIVER FOR OUR WORK AND HOW THIS WAS
5 REALLY AN INTENTIONAL CHANGE THAT THE BOARD ADOPTED WITH
6 THE NEW STRATEGIC PLAN. SO WE HOPE THAT THIS FRAMEWORK
7 WILL BE HELPFUL AS YOU TRANSITION INTO THE BREAKOUT GROUPS
8 AND PROVIDE SOME CONTEXT FOR THE DISCUSSIONS THAT WILL
9 TAKE PLACE.

10 SO WE REALLY WANT TO GROUND OUR DISCUSSION IN THE
11 CURRENT STRATEGIC PLAN AND FOCUS ON WHAT IMPLEMENTING A
12 SYSTEMS CHANGE PERSPECTIVE IN OUR WORK HAS REALLY MEANT
13 FOR FIRST 5 LA IN THE FIRST TWO YEARS OF OUR STRATEGIC
14 PLAN IMPLEMENTATION. SO WE START, OF COURSE, AT FIRST
15 WITH THE OVERALL RESULT THAT WE SEEK, WHICH IS THAT ALL
16 CHILDREN IN LA COUNTY -- AND THAT "ALL" IS A CRITICAL
17 COMPONENT OF OUR CHOICE TO BE FOCUSED ON SYSTEMS CHANGE
18 AND TO KINDERGARTEN READINESS TO SUCCEED IN SCHOOL AND IN
19 LIFE. SO IT'S OUR NORTH STAR AS IT'S REFERENCED IN OUR
20 STRATEGIC PLAN AND ALL OF OUR WORK IN OUR FOUR OUTCOME
21 AREAS IS REALLY DRIVEN TOWARDS THIS OVERALL RESULT THAT WE
22 SEEK.

23 THE STRATEGIC PLAN WAS EXPLICITLY FOCUSED ON A
24 SYSTEMS CHANGE APPROACH. THESE ARE DIRECT QUOTES FROM OUR
25 STRATEGIC PLAN. AND WE ARE INCREASINGLY APPRECIATIVE OF

1 THE IMPACT THAT THIS CHANGE HAS MADE TO US IN TERMS OF THE
2 STAFFING. YOU'RE FAMILIAR WITH THE REORGANIZATION THAT WE
3 WENT THROUGH IN THIS PAST YEAR, OUR CHANGE TO HOW E ARE
4 APPROACHING PARTNERSHIP, AND EVEN OUR CHANGE TO
5 EVALUATION. IT'S GROUNDED FIRST AND FOREMOST IN OUR
6 RECOGNITION OF WHAT IS A SYSTEM AND HOW SYSTEMS CHANGE IS
7 RECOGNIZING, AS KIM SAID EARLIER, THAT THIS IS A COMPLEX
8 PROCESS; THAT SYSTEMS ARE BY DEFINITION A GROUP OF
9 INTERACTING, INTERRELATED, INTERDEPENDENT COMPONENTS THAT
10 IDEALLY FORM A COMPLEX AND UNIFIED WHOLE; ALTHOUGH WE
11 RECOGNIZE FOR CHILDREN AND FAMILIES IN LA COUNTY,
12 ACCESSING THOSE SYSTEMS IS NOT ALWAYS PERCEIVED OR
13 REALIZED IN A UNIFIED OR -- UNIFIED WHOLE.

14 SO ONE OF THE THINGS THAT WE THOUGHT AND WE KNOW
15 THAT ALL OF YOU ARE EXPERIENCED IN THIS APPROACH OF
16 SYSTEMS CHANGE, BUT AS A WAY OF SORT OF BASELINING AND
17 GROUNDING US IN SOME COMMON TERMS IS REALLY HOW WE THINK
18 ABOUT SYSTEMS CHANGE. AND IT IS A BROAD -- WE ARE LOOKING
19 AT SYSTEMS CHANGE AS THAT BROAD CHANGE THAT IS MORE THAN
20 JUST THE POLICIES AND THE PROCEDURES, BUT COMPREHENSIVELY
21 RECOGNIZING THAT THERE ARE MANY FACTORS AT PLAY, NORMS,
22 RESOURCES, BEHAVIORS, CULTURE, DECISION MAKING, THAT'S
23 OPERATING AT A COMMUNITY LEVEL, ACTING AT A LOCAL LEVEL,
24 OPERATING AT A FAMILY LEVEL.

25 WE DISTINGUISH THAT, ALTHOUGH SOMETIMES THESE

1 TERMS ARE USED INTERCHANGEABLY, FROM POLICY CHANGE.
2 POLICY CHANGE ARE THOSE RULES THAT CAN BE SET BY BOTH
3 PUBLIC AND PRIVATE INSTITUTIONS; WHEREAS SYSTEMS CHANGE I
4 THINK REALLY REFLECTS THE BROADER INTERRELATED SET OF
5 THESE OPERATING FACTORS. AND PROBABLY THE BEST WAY TO
6 THINK ABOUT THIS IS AS WE THINK ABOUT EXAMPLES. SO ONE OF
7 THE CHANGES THAT WE'VE TALKED QUITE A BIT WITH YOU ABOUT
8 PARTICULARLY THIS SPRING IS FOCUS ON EARLY IDENTIFICATION
9 AND INCREASING ACCESS TO FAMILIES FOR DEVELOPMENTAL
10 SCREENING, FOR EARLY IDENTIFICATION, AND DEVELOPMENTAL
11 ACCESS FOR SUPPORTS.

12 AND WE KNOW THAT THERE'S CURRENTLY ALREADY A
13 POLICY THAT GIVES US THE GROUNDING IN THIS. CURRENT
14 MEDI-CAL POLICY INSURES THAT CHILDREN ARE ELIGIBLE TO
15 RECEIVE DEVELOPMENTAL SCREENING AS PART OF THEIR
16 WELL-CHILD VISITS. AND YET AT THE SAME TIME, WE KNOW THAT
17 LESS THAN 50 PERCENT OF CHILDREN -- IT'S PROBABLY CLOSER
18 TO 40 PERCENT OF CHILDREN IN LA COUNTY ARE RECEIVING THE
19 ELIGIBLE -- THOSE BENEFITS FOR WHICH THEY'RE ELIGIBLE TO
20 RECEIVE.

21 SO WHAT ARE THE SYSTEM IMPACTS THAT ARE REALLY
22 PREVENTING CHILDREN FROM RECEIVING THAT? GOOD TO THINK
23 ABOUT THIS BROADLY. IT'S THINGS LIKE THERE MAY NOT BE
24 PROVIDERS THAT ARE TRAINED ON HOW TO USE VALIDATED TOOLS.
25 WE KNOW THERE'S CONSTRAINTS IN THE PRACTICE THAT LIMIT THE

1 AMOUNT OF TIME THAT PROVIDERS HAVE TO SPEND WITH FAMILY
2 MEMBERS. PARENTS AND CAREGIVERS MAY NOT HAVE THE
3 KNOWLEDGE TO SAY, HEY, THIS IS A BENEFIT FOR WHICH I'M
4 ELIGIBLE FOR; DOCTOR, WHAT ARE WE DOING. THEY MAY NOT
5 HAVE THE INFORMATION TO EVEN ASK QUESTIONS APPROPRIATELY
6 TO REALLY UNDERSTAND HOW THEY CAN BEST SUPPORT THEIR
7 CHILD'S DEVELOPMENT.

8 AND WHAT ABOUT THE RESOURCES IF THERE ARE
9 IDENTIFIED NEEDS THAT THAT CHILD HAS? ARE THEY AVAILABLE?
10 ARE THEY ACCESSIBLE AND ARE THEY CULTURALLY APPROPRIATE.

11 SO WHEN WE BRING A SYSTEMS LENS TO THIS
12 PERSPECTIVE, WE'RE LOOKING NOT JUST AT THE POLICY AND THE
13 LEGAL REQUIREMENTS, BUT WE'RE THINKING ABOUT ALL THESE
14 DIMENSIONS: THE CULTURE, THE NORMS, THE PROCESSES, THE
15 PROGRAMS THAT ARE ALL OPERATING.

16 SO THESE SYSTEM CHANGE AND POLICY CHANGE IS
17 INTERWOVEN, BUT WE RECOGNIZE THAT WE'RE TAKING A MORE
18 BROAD AND ENCOMPASSING PERSPECTIVE TO THIS.

19 OUR SIX INVESTMENT GUIDELINES ARE REALLY DRIVING
20 OUR SYSTEM FOCUS. AND THESE ARE THE INVESTMENT GUIDELINES
21 THAT WERE INTENTIONALLY MADE AND APPROVED BY THE BOARD
22 WITH THE STRATEGIC PLAN. YOU'VE HEARD US TALK ALREADY
23 ABOUT THIS FOCUS ON SYSTEMS AND POLICY CHANGE. AND THE
24 REMAINING GUIDELINES DRIVE AND REINFORCE THIS FOCUS. AND
25 THESE WERE ALL INTENTIONAL CHOICES THAT THE BOARD MADE, AN

1 EXPLICIT FOCUS ON PREVENTION AS OPPOSED TO FOCUSING ON
2 DOWNSTREAM OR INTERVENTION SERVICES; THAT WE ARE REALLY
3 FOCUSING AT THE EARLIEST INTERVENTION TO ENGAGE PARTNERS
4 AT THE EARLIEST STAGE OF ACTIVITY, NOT AT THE POINT OF AN
5 INTERVENTION OR INITIATIVE OR STRATEGY BEING DEVELOPED, AT
6 THE POINT THAT'S EARLIEST IN THE PROCESS AND THAT WE
7 REALLY WANT TO PRIORITIZE INVESTMENTS THAT WILL HAVE OUR
8 BROADEST IMPACT AFFECTING THE LARGE NUMBERS OF CHILDREN
9 AND PEOPLE. THESE ARE ALL CHOICES THAT WE MADE DURING THE
10 STRATEGIC PLAN PROCESS TO REINFORCE OUR FOCUS ON SYSTEMS
11 CHANGE.

12 SO WHERE ARE WE IN THE PLAN IMPLEMENTATION?
13 WE'RE ABOUT TO ENTER YEAR THREE OF THIS CHANGE. AND I'D
14 SAY THAT OUR FIRST TWO YEARS WERE REALLY FOCUSED ON WHAT I
15 WOULD CALL SYSTEMS MAPPING AND PARTNERSHIP DEVELOPMENT.
16 SO WHAT -- AND YOU'LL SEE SOME EXAMPLES OF THIS IN JUST A
17 MOMENT. THIS IS REALLY ABOUT UNDERSTANDING THOSE SYSTEMS
18 COMPREHENSIVELY, THINKING ABOUT ALL THOSE DIMENSIONS THAT
19 I JUST MENTIONED: WHAT ARE THE KEY POLICIES AND SYSTEMS,
20 WHAT RESULTS ARE THE CURRENT SYSTEMS DESIGNED TO ACHIEVE,
21 AND WHAT ARE THE PARTNERSHIPS AND RELATIONSHIPS THAT ARE
22 CRITICAL TO IMPACTING A SYSTEMS CHANGE.

23 AND WE'VE ALSO BEEN OPPORTUNISTIC, LOOKING AT
24 WHERE WE CAN CAPITALIZE ON CHANGES THAT ARE OCCURRING
25 WITHIN LA COUNTY THAT WE BELIEVE ARE OPPORTUNITIES TO

1 ADVANCE A SYSTEMS CHANGE AGENDA. ONE EXAMPLE THAT WE'VE
2 TALKED QUITE A BIT ABOUT IS THE HOME VISITING MOTION THAT
3 THE BOARD PASSED IN DECEMBER THAT REALLY PROVIDED A WINDOW
4 FOR SOME NEW STRATEGIC CONVERSATIONS THAT WOULD CAPITALIZE
5 ON PRIOR WORK. BUT AS WE'LL HEAR IN THE CONVERSATIONS IN
6 THE BUILT ENVIRONMENT IN JUST A FEW MOMENTS, THERE'S NEW
7 OPPORTUNITIES THAT HAVE BEEN ADVANCED BY MEASURES THAT
8 HAVE PASSED WITHIN LA COUNTY THAT PROVIDE AN OPPORTUNITY
9 TO THINK ABOUT INVESTMENTS IN TRANSPORTATION AND
10 TRANSPORTATION SYSTEMS AND PARKS AND MAKE SURE THAT THOSE
11 INVESTMENTS ARE CONSIDERING THE NEEDS OF CHILDREN AND
12 YOUNG FAMILIES.

13 SO I WANT TO BACK UP FOR JUST A MOMENT AND SAY
14 THAT, AS WE'VE APPROACHED THIS WORK, WE HAVE BEEN INFORMED
15 AND HAVE INTENTIONALLY THOUGHT ABOUT WHAT WE CAN LEARN
16 FROM THE EXPERIENCES BOTH LOCALLY, NATIONALLY, AND WHAT
17 RESEARCH TELLS US ABOUT SYSTEMS CHANGE; THAT WE'RE NOT
18 PLUCKING AN APPROACH THIS EXISTS AND SAYING, THIS IS THE
19 WAY WE'LL DO IT, WE'LL MODEL AFTER THIS. BUT WE WANT TO
20 BE INFORMED BY THE RESEARCH AND THE BEST PRACTICES.

21 AS KIM SAID IN HER OPENING COMMENTS, WE KNOW THAT
22 THIS WORK IS SOMEWHAT MESSY. IT IS MULTIDIMENSIONAL. IT
23 IS DYNAMIC BECAUSE IT INVOLVES SO MANY DIFFERENT AGENTS
24 THAT ARE WORKING SIMULTANEOUSLY. AND WE HAVE TO
25 UNDERSTAND WHAT OUR ROLE IS AMIDST ALL THOSE PARTNERS.

1 AND THEN FINALLY, IT'S INTERDEPENDENT. AS YOU
2 SAW FROM THE EXAMPLE THAT I JUST TALKED ABOUT IN TERMS OF
3 DEVELOPMENTAL SCREENING, NO SINGLE ENTITY HAS
4 RESPONSIBILITY HERE TO MAKE THAT CHANGE TO MAKE IT
5 ACCESSIBLE FOR FAMILIES TO HAVE THEIR FAMILIES RECEIVE THE
6 DEVELOPMENTAL SCREENING FOR WHICH THEY'RE ELIGIBLE. IT
7 REQUIRES PARTNERSHIP ACROSS MANY DIFFERENT SECTORS. IT
8 REQUIRES LEADERSHIP AT A STATE, AT A LOCAL LEVEL. AND NO
9 SINGLE ENTITY CAN REALLY MAKE THE CHANGE THAT'S NECESSARY.
10 SO PARTNERSHIP IS FUNDAMENTAL.

11 ONE OF THE INFORMATION -- OR ONE OF THE RESOURCES
12 THAT WE'VE BEEN LOOKING CLOSELY AT AND WE BELIEVE IS
13 INFORMATIVE TO OUR THINKING IS THE FRAMEWORK FROM THE
14 BUILD. MANY OF YOU MAY BE FAMILIAR WITH THIS. THAT
15 REALLY SPEAKS ABOUT UNDERSTANDING DIMENSIONS OF SYSTEM
16 CHANGES INITIATIVE. I THINK THIS IS HELPFUL AS A WAY OF
17 FRAMING AND THINKING ABOUT OUR WORK, ALTHOUGH I WILL SAY
18 THAT IN REALITY ALL SYSTEMS CHANGE EFFORTS ARE PROBABLY
19 WORKING ON MULTIPLE DIMENSIONS. THERE IS OFTEN AN
20 EMPHASIS ON ONE DIMENSION, BUT IT'S NOT EXCLUSIVE.

21 SO THE WORK SPEAKS TO THE FACT THAT DIMENSIONS OF
22 SYSTEMS CHANGE INITIATIVES OFTEN FOCUS ON THE CONTEXT;
23 WHAT IS THE WORK WE'RE DOING TO IMPROVE AND CHANGE THE
24 POLITICAL ENVIRONMENT THAT WE'RE OPERATING WITHIN. AND
25 WE'LL GO THROUGH EXAMPLES OF HOW OUR WORK IS WORKING ON

1 ALL OF THESE DIFFERENT DIMENSIONS.

2 COMPONENTS. ESTABLISHING HIGH PERFORMANCE
3 PROGRAMS AND SERVICES THAT PRODUCE RESULTS. SO THERE ARE
4 ELEMENTS OF OUR SYSTEMS CHANGE WORK THAT IS REALLY FOCUSED
5 ON WHAT ARE WE DOING TO STRENGTHEN EXISTING PROGRAMS TO
6 MAKE THEM MORE EVIDENCE BASED, TO MAKE THEM MORE
7 IMPACTFUL, TO ENSURE THAT THOSE PROGRAMS ARE RECEIVING THE
8 INTENDED RESULTS. RELATEDLY, HOW DO WE THEN CREATE STRONG
9 LINKAGES ACROSS THESE PROGRAMS SO THEY ARE A SEAMLESS SET
10 OF SERVICES TO SUPPORT CHILDREN AND FAMILIES.

11 INFRASTRUCTURE. HOW -- THIS IS -- WE'LL TALK A
12 LITTLE BIT ABOUT THIS IN JUST A MOMENT ABOUT THE WORK THAT
13 WE'RE DOING IN THE ECE ARENA ALSO AROUND AND IN OUR
14 COMMUNITIES WORK, HOW ARE WE DEVELOPING SUPPORT SYSTEMS SO
15 THAT THOSE PROGRAMS AND THOSE SERVICES HAVE THE SUPPORTS
16 THAT THEY NEED TO BE EFFECTIVELY ADMINISTERED.

17 AND THEN FINALLY AND MOST IMPORTANTLY IS, WHAT
18 ARE WE DOING AS WE GO BACK TO THAT STATEMENT IN OUR NORTH
19 STAR ABOUT ALL CHILDREN. WHAT ARE WE DOING TO ENSURE THAT
20 THIS COMPREHENSIVE SYSTEM ONCE DEVELOPED IS AVAILABLE FOR
21 ALL CHILDREN AND FAMILIES HERE IN LA COUNTY.

22 SO THESE -- WE FELT THAT THIS IS REALLY HELPFUL
23 AS WE THINK ABOUT SYSTEMS CHANGE INITIATIVES, THAT OUR
24 WORK IS OFTEN HAPPENING ON MULTIPLE DIFFERENT DIMENSIONS,
25 NOT EXCLUSIVELY ON ONE, BUT WE'RE THINKING ABOUT ALL THESE

1 DIFFERENT DIMENSIONS AS WE MOVE FORWARD IN THIS WORK.

2 SO WHAT DOES THIS MEAN FOR FIRST 5 LA'S WORK? AS
3 WE -- AGAIN, AS WE THINK ABOUT THIS WORK WE HAVE TO BE
4 THINKING THROUGH ALL OF THESE DIMENSIONS. AND OUR WORK IS
5 FOCUSED ON THESE FOUR OUTCOMES AND THE TEN STRATEGIES.
6 BUT FOUNDATIONAL TO ALL THIS WORK IS OUR IMPORTANT
7 EMPHASIS ON BUILDING THE PARTNERSHIPS SO THAT THE CHANGES
8 THAT WE MAKE ARE BOTH SUSTAINABLE AND AT THE SCALE THAT
9 WE'RE INTERESTED FOR ALL CHILDREN.

10 SO JUST A COMMENT ABOUT OUR WORK ON PARTNERSHIP.
11 AND I THINK THE COMMENTS THAT THE CHAIR MADE, IF I CAN
12 JUST ECHO, REALLY SPEAK TO THIS FACT THAT FIRST 5 LA IS IN
13 A VERY UNIQUE POSITION. WE HAVE A ROLE BOTH STRONG
14 PARTNERSHIP WITH PHILANTHROPIC PARTNERS AND WE HAVE A
15 STRONG PARTNERSHIP WITH OUR COUNTY PARTNERS. AND I THINK
16 THAT PUTS US IN A POSITION BOTH WORKING AS A STAFF AND
17 ALSO UNDER THIS BOARD LEADERSHIP TO REALLY BRING UNIQUE
18 PARTNERSHIPS TO TOGETHER TO ADDRESS PROGRAMS AT THE SCALE
19 AND AT THE SUSTAINABILITY THAT WE DESIRE.

20 SO NO SINGLE AGENT WE KNOW HAS THE CAPACITY AND
21 THE JURISDICTION TO MAKE THE SYSTEM CHANGES. AND OUR
22 STRATEGIC PLAN REALLY RECOGNIZES THAT OUR PARTNERSHIP WORK
23 IS FOUNDATIONAL.

24 AS WE EXERCISE THIS ROLE, WE HAVE TO BE COGNIZANT
25 OF SOME OF THE CONSTRAINTS THAT WE HAVE. ONE, THAT WE ARE

1 A PUBLIC AGENCY WITH A DEFINED GOVERNANCE STRUCTURE. WE
2 HAVE TO BE FLEXIBLE TO RECOGNIZE THE DIFFERENT TYPES
3 PARTNERSHIPS DEPENDING ON THE INTENDED OUTCOMES THAT WE'RE
4 TRYING REACH, AND THEN, FUNDAMENTALLY, REALLY RECOGNIZE
5 THE IMPORTANCE THAT ALL OF THIS WORK HAS TO BE HAPPENING
6 IN PARALLEL WITH SUPPORTING THROUGH OUR COMMUNITY WORK THE
7 DEVELOPMENT OF COMMUNITY LEADERS THAT CAN REALLY BE OUR
8 ADVOCATES AND OUR STRONG PARTNERS IN SUSTAINING THIS WORK.
9 SO THAT FOCUS ON PARTNERSHIP IS NOT JUST WITH GOVERNMENT
10 INSTITUTIONS, IT'S NOT JUST WITH PRIVATE INSTITUTIONS OR
11 PHILANTHROPIC; IT'S MULTISECTORED AND MULTILEVELED.

12 SO I WANT TO QUICKLY JUST GO THROUGH A FEW
13 EXAMPLES ABOUT HOW WE'RE ADDRESSING THESE DIMENSIONS OF
14 WORK AND WHAT WE KNOW ABOUT THE SYSTEMS THAT WE'RE
15 OPERATING WITHIN IN OUR FOUR OUTCOMES AREA. SO WE SEE
16 THESE ARE VERY HIGH-LEVEL SYSTEMS MAPS TO UNDERSTAND THE
17 WORK THAT'S OCCURRING.

18 SO AS WE THINK ABOUT OUR FAMILIES OUTCOME AREA,
19 WE KNOW THAT WE HAVE INVESTED HEAVILY AND IT IS A
20 SIGNIFICANT FOCUS OF OUR WORK AS WE'VE TALKED ABOUT IN
21 EXPANDING HOME VISITING. WE RECOGNIZE THAT WE HAVE
22 SIGNIFICANT RESOURCE CONSTRAINTS AND SERVICE AVAILABILITY
23 CONSTRAINTS AS LESS THAN 20 PERCENT OF NEWBORNS AND THEIR
24 FAMILIES ARE SCREENED TO ACCESS HOME VISITING SERVICES IN
25 LA COUNTY. ONE OF THE DIMENSIONS THAT WE'RE REALLY

1 FOCUSING ON HERE IS CREATING STRONG AND EFFECTIVE
2 LINKAGES, THAT CONNECTION DIMENSION SO THAT THE PROGRAMS
3 THAT EXIST ARE CONNECTED TO RESOURCES THAT AND CAN BEST
4 BENEFIT THOSE FAMILIES SO THAT MOMS POSTPARTUM THAT WE
5 IDENTIFY THROUGH HOME VISITING HAVE ACCESS TO THE MENTAL
6 HEALTH SUPPORTS THAT THEY NEED, HAVE ACCESS TO THE
7 CONCRETE SUPPORTS, AND ARE LEVERAGING THOSE RESOURCES SO
8 THAT THEY CAN BE THE BEST PARENTS FOR THEIR CHILDREN.

9 SO LINKING COUNTY DEPARTMENTS TO HOME VISITING
10 MODELS IS REALLY A CRITICAL ELEMENT OF THE WORK THAT WE'RE
11 FOCUSES ON. UNIQUELY IN THIS FAMILIES AREA, WE'RE ALSO
12 FOCUSED NOT JUST ON LOCAL COUNTY POLICY, BUT STRONG
13 ADVOCACY WORK AT THE FEDERAL AND STATE LEVEL. RIGHT NOW,
14 THIS IS QUITE TIMELY. WE'RE IN THE MIDST OF THE MIECHV,
15 WHICH IS THE FEDERAL FUNDING FOR HOME VISITING, AND MAKING
16 A MAJOR PUSH TO SUPPORT THOSE EFFORTS AT THE NATIONAL
17 LEVEL.

18 IN OUR COMMUNITIES ONE EXAMPLE OF A DIMENSION
19 THAT WE'RE ADDRESSING IS REALLY ON INFRASTRUCTURE AND
20 DEVELOPING SUPPORT SYSTEMS REQUIRED FOR EFFECTIVENESS.
21 THIS IS OUR WORK BOTH IN TERMS OF THE BUILT ENVIRONMENT
22 THAT YOU WILL HEAR ABOUT SHORTLY IN THE BREAKOUT, BUT ALSO
23 A SIGNIFICANT FOCUS AROUND WHAT WE'VE CALLED COMMUNITY
24 RESOURCE NETWORKS AND HOW CAN WE STRENGTHEN THE
25 INFRASTRUCTURE SO THAT FAMILIES BETTER ARE ABLE TO

1 NAVIGATE THE SERVICES THAT THEY NEED AND IN RESPONSE THAT
2 THOSE SERVICES THAT ARE PROVIDED BY BOTH COUNTY
3 DEPARTMENTS AND AGENCIES ARE MORE RESPONSIVE TO PARENTS '
4 NEEDS AND TO FAMILY NEEDS. IT IS A TWO-DIMENSIONAL,
5 BIDIRECTIONAL EFFORT SO THAT THERE IS A CONNECTION AND
6 THAT FAMILIES, WHEN THEY'RE RECEIVING SERVICES AND WHEN
7 THEY ARE ACCESSING SERVICES, BELIEVE THAT THEY ARE DOING
8 THAT WITH A TRUSTED PARTNER THAT HAS THEIR BEST INTEREST.

9 SO AS WE THINK ABOUT THIS, IT'S A SUPPORT SYSTEM
10 AND WEAVING TOGETHER THE NETWORK OF SERVICES. AND YOU SEE
11 HERE THAT, AS WE THINK ABOUT CAPTURING THE DATA FROM OUR
12 BEST START COMMUNITY PARTNERS, WE KNOW THAT THERE'S WORK
13 TO BE DONE. WE ARE FOCUSED IN THIS AREA ON REALLY POLICY
14 AND ADVOCACY WORK AT BOTH THE COUNTY AND THE MUNICIPAL
15 LEVEL.

16 IN OUR ECE AREA, THIS IS AN AREA WHERE WE HAVE
17 BEEN EXTREMELY ACTIVE AT BOTH THE STATE AND LOCAL LEVEL ON
18 ADVOCATING FOR INCREASED SUPPORT FOR EARLY CARE AND
19 EDUCATION FUNDING. CHANGING THE POLITICAL LANDSCAPE IS A
20 FOCUS OF OUR ECE WORK. AND THAT HAS LED US TO SUPPORT THE
21 ECE BUDGET COALITION AT A STATE LEVEL, TO ADVOCACY WHICH
22 WE HEARD ABOUT THE RECENT PPC MEETING ON CREDENTIALING FOR
23 YOUNG CHILDREN, AND REALLY CONTINUING TO BUILD AN ECHO
24 CHAMBER THAT SAYS INVESTMENTS IN EARLY CARE AND EDUCATION
25 ARE CRITICAL AND IMPORTANT TO FAMILIES.

1 WHAT WE KNOW ABOUT THE SYSTEM FROM ALL THOSE
2 METRICS THAT ARE LISTED THERE -- I WON'T READ -- IS THAT
3 THE COST OF CARE IS A BURDEN FOR FAMILIES AND IT IS OUT OF
4 REACH FOR MANY OF THE FAMILIES HERE IN LA COUNTY.

5 AND FINALLY, AS WE TALK ABOUT HEALTH-RELATED
6 SYSTEMS, THIS IS AGAIN THIS ISSUE OF SCALE THAT I
7 REFERENCED EARLIER IN OUR WORK ON HELP ME GROW, IS THAT WE
8 KNOW THAT THE SERVICES FOR WHICH FAMILIES ARE ELIGIBLE AND
9 WHICH FAMILIES ARE SUPPOSED TO RECEIVE ARE NOT ALWAYS AT
10 THE SCALE AND DELIVERED IN A WAY WHICH WILL MAKE IT
11 ACCESSIBLE TO FAMILIES. YOU CAN SEE HERE, LESS THAN 50
12 PERCENT OF FAMILIES INDICATE THAT THEY HAD RECEIVED A
13 DEVELOPED -- COMPLETED A STANDARDIZED DEVELOPMENTAL
14 BEHAVIORAL SCREENING. SO WE KNOW THAT THERE'S A BENEFIT
15 BUT THERE'S A LOT OF BARRIERS TO FAMILIES ACCESSING THAT.

16 OUR WORK HERE IS TO REALLY EXPAND THE INITIAL
17 INVESTMENTS FROM FIRST 5 LA'S WORK ON FIRST CONNECTIONS TO
18 BUILD AN INTEGRATED SYSTEM OF SERVICES FOR CHILDREN AND
19 FAMILIES.

20 SO THESE ARE JUST VERY QUICKLY SOME EXAMPLES.
21 WE'RE GOING TO DIG MORE INTO THIS IN THE BREAKOUT SESSIONS
22 WITH OUR DISCUSSION ON TRAUMA-INFORMED CARE AND WITH OUR
23 WORK ON THE BUILT ENVIRONMENT. AS WE MOVE INTO THE YEAR
24 THREE OF OUR STRATEGIC PLAN IMPLEMENTATION, IT'S REALLY
25 CONTINUING TO BUILD THESE PARTNERSHIPS AND DIVING DEEPER

1 INTO THE QUESTIONS AROUND HOW DO YOU MEASURE POLICY AND
2 SYSTEMS CHANGE, HOW DO WE MONITOR THE CHANGING CONTEXT.
3 IT IS SO MUCH EASIER TO MEASURE IN SOME RESPECT DIRECT
4 SERVICES. IT'S EASIER TO EXECUTE A DIRECT SERVICES
5 STRATEGY AND TO CAPTURE THE IMPACT ON A PARTICIPANT LEVEL
6 AND ON A FAMILY LEVEL AND TO AGGREGATE THAT. AND WE'RE
7 CHALLENGING OURSELVES TO REALLY THINK ABOUT HOW DO WE
8 MEASURE THE IMPACT OF SYSTEMS AND POLICY CHANGE AS WELL AS
9 THE CHANGING CONTEXT.

10 SO FUTURE SESSIONS ARE COMING. MORE TO COME ON
11 THIS, AS WELL AS FOCUSING ON OUR SPECIFIC LEARNING AGENDAS
12 FOR OUR OUTCOME WORK. AND I KNOW WE'RE EAGERLY AWAITING T
13 TALK MORE WITH YOU ABOUT THE BEST START LEARNING AGENDA.

14 SO WITH THAT, WE'LL TRANSITION TO OUR BREAKOUT SO
15 I'M HAPPY TO TAKE ANY COMMENTS OR QUESTIONS.

16 SUPERVISOR KUEHL: I THINK THAT WAS REALLY GOOD.
17 REALLY DO. VERY, VERY COGENT AND ORGANIZED. MY FAVORITE
18 PART WERE THE SPECIFIC EXAMPLES I THINK BECAUSE JUST TO
19 GIVE YOU FEEDBACK FROM THE MACRO TO MICRO WORKS REALLY
20 WELL SO THAT WE UNDERSTAND NOT ONLY WHAT IS MEANT BUT HOW
21 IT PLAYS OUT AS THEY SAY IN REAL TIME.

22 COMMISSIONERS ANY SUCCINCT AND RELATED QUESTIONS?

23 DR. SMITH.

24 COMMISSIONER SMITH: WHEN YOU MENTION MONITORING
25 THE CHANGING CONTEXT, DO YOU MEAN DESIGNING SOME KIND OF

1 FRAMEWORK FOR EVALUATING THE EFFECTS OF THE SYSTEMS -- I
2 MEAN IS THAT AN ONGOING PIECE OF WORK?

3 MS. ALTMAYER: IT'S REFLECTIVE OF SORT OF TWO
4 FACTORS AT ONCE. ONE IS, WE DO WANT TO ABSOLUTELY MEASURE
5 THE IMPACT OF OUR WORK, BUT SINCE WE'RE DOING SYSTEMS
6 CHANGE, THE CHANGES TO THE SYSTEM OFTEN ARE -- WE CAN'T
7 CONTROL ALL THOSE, RIGHT? SO YOU ARE TRYING TO CHANGE THE
8 SYSTEM AND MEASURE THE IMPACT OF THE EFFORTS THAT YOU
9 TAKE, BUT RECOGNIZING THAT OTHER DYNAMICS ARE AT PLAY THAT
10 COULD BE CHANGING THE SYSTEM IN WAYS THAT WE EITHER WANT
11 OR DON'T WANT AT THE SAME TIME WE'RE DOING THIS.

12 SO AS WE THINK ABOUT A SYSTEMS CHANGE
13 PERSPECTIVE, WE HAVE TO BE COGNIZANT OF HOW DID THE
14 SYSTEMS CHANGE UNRELATED TO ANY EFFORTS THAT WE DID THAT
15 EITHER HAVE -- SO OUR SYSTEM CHANGE EFFORTS CAN ONLY BE
16 PREVENTING BAD THINGS FROM GOING WORSE OR SOMETIMES
17 CHANGING THE ACTUAL SYSTEM. SO IT'S REALLY THINKING ABOUT
18 HOW DO WE MEASURE BOTH OF THOSE DYNAMICS. AND I DON'T
19 HAVE AN ANSWER TO THE HOW YET.

20 SUPERVISOR KUEHL: ANY OTHER SUCCINCT AND
21 DIRECTED QUESTIONS?

22 DR. TAYLOR.

23 COMMISSIONER TAYLOR: SHE LOOKED AT ME LIKE THAT.
24 I GOT AFRAID.

25 SUPERVISOR KUEHL: I DID THE SAME THING TO WENDY.

1 IT'S ALL RIGHT. DON'T FEEL SINGLED OUT.

2 COMMISSIONER TAYLOR: I THINK IT'S VERY IMPORTANT
3 THAT, AS WE MOVE ALONG IN THIS WORK, THAT WE KEEP A MIND
4 OF THE AVAILABILITY OF REFERRAL RESOURCES THAT ARE
5 ACCESSIBLE AND CULTURALLY APPROPRIATE. AND THAT GOES INTO
6 THE EMPOWERMENT OF THE FAMILY BECAUSE UNDER THIS NEW MODEL
7 AND APPROACH, THE PARENT, THE FAMILY, THE COMMUNITY IS THE
8 KEY TO THIS CHANGE THAT CAN BE SUSTAINABLE BECAUSE WE HAVE
9 TO LOOK AT THE SUSTAINABILITY OF WHAT WE'RE DOING. IF YOU
10 DON'T CHANGE THE MIND OF THOSE THAT ARE RECEIVING THE
11 SERVICE TO EMPOWER THEM TO BE ADVOCATES FOR THEIR OWN
12 RESOURCE AND HAVE THAT RECOGNIZED BY AGENCIES, BECAUSE
13 AGENCIES RUN IN THE SILO THAT FOCUSES, AS THE SUPERVISOR
14 SAID, ON VERY NARROW PURPOSES: I'VE GOT TO DO THIS AND
15 THIS IS WHAT I DO. AND THEY DON'T LOOK AT ALL OF THE
16 OTHER IMPACTS THEY'RE DOING TO THE COMMUNITY WITHOUT
17 GETTING THE COMMUNITY'S INPUT. SO I THINK IT'S IMPORTANT.
18 JUST PUT THAT IN THERE.

19 SUPERVISOR KUEHL: THANK YOU. ANYBODY ELSE?

20 ALL RIGHT. SO HERE'S WHAT WE'LL DO. WHY DON'T
21 WE WARN THE PRESENTERS THAT WE MAY WANT TO START AT 2:30
22 INSTEAD OF 2:40, IF THAT IS ACCEPTABLE TO COMMISSIONERS.
23 I THINK THAT GIVES US ACTUALLY 13 MINUTES TO HAVE A BREAK,
24 HAVE A GOOD COOKIE BACK THERE. I THINK TAKING TIME TO
25 BREATHE A LITTLE BIT BEFORE WE GO INTO THESE SESSIONS AND I

1 THINK STAFF AND PRESENTERS AS WELL.

2 SO LET US GATHER IN THESE TWO SESSIONS. DO EACH
3 OF THE COMMISSIONERS --

4 MS. BELSHE: EACH OF THE COMMISSIONERS DOES HAVE
5 A BREAKOUT LIST OF GROUP ONE AND TWO. LINDA, WHICH ROOM
6 IS GROUP ONE AND WHICH GROUP -- ROOM IS GROUP TWO?

7 SECRETARY: GROUP ONE IS GOING TO BE IN THE
8 FAMILIES CONFERENCE ROOM AND GROUP TWO IS IN THE
9 COMMUNITIES CONFERENCE ROOM.

10 MS. BELSHE: OKAY. SO THE VERY FIRST CONFERENCE
11 ROOM.

12 SUPERVISOR KUEHL: GROUP TWO IN COMMUNITIES.
13 GROUP ONE IN FAMILIES.

14 SECRETARY: WE'LL BE OUTSIDE TO USHER.

15 MS. BELSHE: THERE WILL BE USHERS AWAITING
16 COMMISSIONERS.

17 SUPERVISOR KUEHL: DOES EVERYBODY HAVE A LIST SO
18 THEY KNOW WHICH GROUP THEY'RE IN? I SEE NODDING, NODDING,
19 NODDING, NODDING, NODDING.

20 OKAY. GOOD. SEE YOU -- GROUP ONE, I'M IN WITH
21 YOU GUYS AND I'LL SEE YOU AT 2:30. THANK YOU.

22 (A BRIEF BREAK.)

23 4:18 PM.

24 SUPERVISOR KUEHL: WE'RE RECONVENING. PLEASE SIT
25 DOWN. PLEASE END YOUR CONVERSATIONS. PLEASE REJOIN US,

1 COMMISSIONERS AND STAFF AND AUDIENCE.

2 WE HAVE ONE REQUEST FOR PUBLIC COMMENT, WHICH I
3 THINK WE'LL TAKE FIRST AND THEN WE'LL DO POPUP COMMENTS.
4 AND I'D LOVE TO END AT 4:30 SO WE HAVE 12 MINUTES WHICH IS
5 WHY I'M TAKING PUBLIC COMMENT FIRST.

6 IS KATHY SHRINER HERE? PLEASE COME FORWARD FOR
7 PUBLIC COMMENT. THANK YOU SO MUCH.

8 SPEAKER: MINE WON'T EVEN BE TWO MINUTES. I SAT
9 IN THE BUILT ENVIRONMENT DISCUSSION, AND YOU HAD MENTIONED
10 THAT IF PEOPLE FROM THE PUBLIC HAD COMMENTS THAT WE SHOULD
11 DO IT AT THIS PART OF THE MEETING.

12 WHAT I JUST WANTED TO POINT OUT, IT'S NOT TRUE
13 FOR ALL BEST START COMMUNITIES, BUT PANORAMA CITY AND
14 NEIGHBORS, WHICH INCLUDES VAN NUYS, PANORAMA CITY, AND
15 NORTH HILLS EAST, IS ALL WITHIN THE CITY OF LOS ANGELES.
16 SO IT MAKES ALL OF THESE EFFORTS SO MUCH MORE DIFFICULT
17 THAN THE PEOPLE WHO HAVE THE SMALL CITIES. AND JUDY WAS
18 SORT OF ALLUDING TO THAT, TOO; THAT SANTA MONICA COULD DO
19 SOMETHING DIFFERENT THAN THAT. AND WITH REGARD TO THINGS
20 LIKE THE SCHOOL SYSTEM, WE'RE ALL LAUSD, AND SO WE HAVE
21 THOSE CONSTRAINTS AS WELL.

22 SO I JUST WANTED TO BRING THAT TO YOUR ATTENTION
23 SO WHEN YOU THINK ABOUT SOME OF THESE SOLUTIONS. AND SO
24 FOR PARKS, JUDY AND I HAD ACTUALLY TALKED. SHE HAD TOLD
25 ME THAT STORY USING THE SCHOOLS FOR -- BECAUSE WE'RE LIKE

1 THE BRIGHTEST SPREAD IN TERMS OF THE NEED FOR PARKS, BUT
2 THERE'S NO UNDEVELOPED LAND THAT IS SIZABLE. SO HOW
3 THAT'S GOING TO BE ADDRESSED IS GOING TO TAKE A LOT OF
4 IMAGINATION. SO THAT WAS MY COMMENT.

5 SUPERVISOR KUEHL: THANK YOU VERY MUCH. THAT WAS
6 THE ONLY REQUEST FOR PUBLIC COMMENT, PEOPLE WHO ARE STILL
7 HERE.

8 SO LET ME THEN INVITE THE COMMISSIONERS. AND I
9 JUST SO YOU'RE WARNED, JANE, I'M GOING TO START WITH YOU
10 AND WE'RE GOING TO GO AROUND THE HORSESHOE. AND WHAT IT
11 IS, THIS IS JUST SORT OF A POPCORN OF THE THING THAT STOOD
12 OUT FOR YOU FROM ANY ONE OF THE SESSIONS AND NOT
13 NECESSARILY BOTH THAT YOU ATTENDED, THE THING THAT WAS AN
14 AHA MOMENT, THE THING THAT WAS A SURPRISE, THE THING THAT
15 YOU ARE TAKING WITH YOU TO THINK ABOUT. I MEAN, THERE'S A
16 LOT MORE THAN ONE THING. BUT PICK ONE THING, BECAUSE IN
17 SEPTEMBER WE'RE GOING TO HAVE A MUCH FULLER DISCUSSION
18 ABOUT THESE TWO SESSIONS WHEN WE HAVE THE REPORT BACKS
19 FROM OUR SECRETARIES.

20 SO LET US START -- JANE, IS IT ALL RIGHT TO START
21 WITH YOU?

22 COMMISSIONER BOECKMANN: OF COURSE, YES.

23 SUPERVISOR KUEHL: PLEASE.

24 COMMISSIONER BOECKMANN: I WAS VERY TOUCHED BY
25 THE ENTIRE PRESENTATION, BUT I WAS ESPECIALLY TOUCHED BY

1 THE MAN WHO TOLD US HE HAD BEEN HOMELESS AS A CHILD. THAT
2 HIT ME REALLY, REALLY HARD. I CAN'T EVEN IMAGINE. AND I
3 THINK -- SO WE LIVE IN THIS ENVIRONMENT WHERE WE THINK
4 EVERYONE HAS THE THINGS THAT THEY NEED. AND WHEN WE COME
5 IN CONTACT WITH SOMEONE WHO HAD SUCH AN EXPERIENCE AS A
6 CHILD, IT REALLY GOT TO ME. AND I'D LIKE TO DO EVERYTHING
7 THAT WE POSSIBLY COULD TO HELP.

8 SUPERVISOR KUEHL: RIGHT.

9 COMMISSIONER MARTINEZ: I ENJOYED THE BUILT
10 CONVERSATION. I THINK IT WAS FASCINATING TO SEE THE MAPS
11 AND THE OVERLAP OF TRAUMA AND HOT -- HEAT SPOTS OF ISSUES
12 THAT ARE TAKING PLACE IN LOS ANGELES COUNTY. AND I THINK
13 OUR APPROACH OF THINKING ABOUT THEM, SYSTEM --
14 SYSTEMATICALLY IS SMART BECAUSE IT CAN BE VERY
15 OVERWHELMING. YOU KNOW, WHERE DO WE -- HOW ARE WE GOING
16 TO MAKE A DENT IN ANY OF THESE COMMUNITIES. BUT I THINK
17 STARTING WHERE WE HAVE OUR BEST START COMMUNITIES, WHERE
18 WE HAVE ALREADY A COLLECTION OF COMMUNITY MEMBERS ENGAGED
19 IS IMPORTANT. AND ONE IDEA THAT WE HAD THAT I THOUGHT WAS
20 SORT OF INSPIRING AFTER ALL OF THE HARD THINGS WAS, YOU
21 KNOW, WHERE IS THE HOPE, YOU KNOW, IN ALL OF THIS AND, YOU
22 KNOW, MAYBE WE COULD BRING PEOPLE TOGETHER TO SEE THE HOPE
23 AND SEE THE LIGHT. YOU KNOW, WHAT ARE THE POSSIBILITIES?
24 WHAT IS SOMETHING POSITIVE THAT COULD COME OUT OF THIS
25 COLLECTIVE HARD WORK? AND IT'S SO DEEP IN OUR

1 COMMUNITIES. SO I -- YOU KNOW, I -- THERE'S SO MUCH TO
2 LEARN AND DO. AND I'M GRATEFUL TO BE A PART OF ALL OF
3 THIS.

4 SUPERVISOR KUEHL: BRANDON.

5 COMMISSIONER NICHOLS: THAT SORT OF STOLE MY
6 COMMENTS. BUT I DO THINK THAT THESE THINGS SOMETIMES SEEM
7 OVERWHELMING, TAKING ON ISSUES OF THIS SCOPE IN A COUNTY
8 OF THIS SIZE. IT ALMOST SEEMS SOMETIMES UNDOABLE. BUT
9 BOTH OF THE PRESENTATIONS MADE ME THINK THERE IS A
10 RATIONAL WAY TO APPROACH THESE PROBLEMS THAT WILL RESULT
11 IN SOME IMPACT. YOU KNOW, A COMMENT THAT YOU MADE WAS,
12 YOU KNOW, SOMETIMES GOVERNMENT SEEMS MONOLITHIC. WHAT IS
13 GOVERNMENT? IT'S JUST PEOPLE SITTING IN CHAIRS. WE'RE --
14 THEY'RE HUMANS. THEY CAN BE TOUCHED. THEY CAN MOVE
15 THINGS. IT DOES, IT GIVES ME A FEELING LIKE THESE ARE
16 STRATEGIES WHICH, IF WE DEVELOP, CAN RESULT IN REAL
17 CHANGES IN SYSTEMS THAT ARE SO HARD TO GET YOUR MIND
18 AROUND, SO HARD TO UNDERSTAND, SO COMPLEX. BUT THIS IS A
19 WAY TO DO THAT. AND SO I AM HOPEFUL.

20 COMMISSIONER ABDO: WELL, I WANTED TO JUST PUT AN
21 AHA MOMENT INTO THIS. I ENJOYED BOTH SESSIONS A LOT,
22 LEARNED A LOT. BUT THE AHA WAS THE WAY JOHN TALKED ABOUT
23 FEELING THAT YOU BELONG IN WHENEVER YOU ARE, IN YOUR HOME,
24 IN YOUR NEIGHBORHOOD, YOUR SCHOOL. DO YOU FEEL LIKE YOU
25 BELONG? IF YOU DON'T, LIFE IS VERY DIFFERENT FROM IF YOU

1 FEEL THAT YOU DO.

2 SUPERVISOR KUEHL: WENDY.

3 COMMISSIONER SMITH: I MEAN, THERE WERE REALLY
4 QUITE A FEW AHA MOMENTS, BUT I'LL JUST MENTION TWO AND
5 MAKE THEM SOUND LIKE ONE. THE FIRST IS IN KIND OF
6 ELUCIDATING SOME OF THE CHARACTERISTICS OF COMMUNITY
7 TRAUMA. IT GAVE ME REALLY A NEW UNDERSTANDING OF CERTAIN
8 COMMUNITY RESPONSES AS PTSD RESPONSES, AND THAT WAS VERY
9 HELPFUL. AND -- AND THE OTHER IS JUST THE OVERLAP OF --
10 AND THE INTERWOVENNESS OF THE BUILT ENVIRONMENT AND A
11 TRAUMA- AND RESILIENCE-INFORMED APPROACH TO HEALING AND
12 STRENGTHENING COMMUNITIES.

13 SUPERVISOR KUEHL: OKAY.

14 COMMISSIONER TAYLOR: WELL, MY AHA MOMENT IS THAT
15 I SEE UNIQUE OPPORTUNITY FOR FIRST 5 TO CONTINUE ITS GREAT
16 WORK IN BRINGING TOGETHER LEADERS TO HELP PULL TOGETHER A
17 DIFFERENT WAY OF LOOKING AT TRAUMA-INFORMED CARE AND THE
18 BUILT ENVIRONMENT IN OUR COMMUNITIES. AND THAT'S A UNIQUE
19 SKILL THAT THIS ORGANIZATION HAS DEVELOPED. I'M VERY
20 IMPRESSED BY IT AND I HOPE THAT WE USE THOSE SKILLS TO
21 BRING THE EXPERTISE TOGETHER TO HELP US ALL GET TO WHERE
22 WE WANT TO BE.

23 SUPERVISOR KUEHL: THANK YOU, DEANNE.

24 COMMISSIONER TILTON: MY AHA MOMENT WAS WHEN JOHN
25 WARNED THAT THERE CAN BE A DOWN SIDE TO THE ACE FACTORS IN

1 THAT, IF YOU HAVE A LOT OF ACES, THEN YOU'RE GOING TO LIVE
2 A SHORTER LIFE, YOU'RE GOING TO HAVE ALL THESE HEALTH
3 PROBLEMS. SO OUT OF THAT BECOMES THE INCREDIBLY IMPORTANT
4 TASK OF LEARNING HOW TO HELP BUILD RESILIENCY; OTHERWISE,
5 YOU'RE DOOMED. AND I THINK THAT WAS A BIG AHA MOMENT.

6 ANOTHER AHA MOMENT WAS WHEN JUDY JUST SAID
7 SOMETHING. SHE SAID THAT JOHN SAID SOMETHING. LET ME
8 COMMENT. YOU SAID THAT HE SAID THAT YOU NEED TO FEEL LIKE
9 YOU BELONG WHERE YOU ARE. AND I'M JUST THINKING OF ALL
10 THE KIDS IN THE SYSTEM AND HOW MANY DIFFERENT PLACES THEY
11 ARE AND HOW HARD IT IS FOR THEM TO EVER FEEL LIKE THEY
12 ACTUALLY BELONG ANYWHERE IN THEIR CHILDHOOD OR THEIR
13 LIVES.

14 COMMISSIONER YBARRA: MY AHA MOMENT IS WHEN
15 SOMEONE REFERRED TO THE METRO AS A MAGIC CARPET AND FOR,
16 WHEN YOU REALLY THINK ABOUT THAT, IF WE THINK OUTSIDE OF
17 THE BOX AS WE'RE DOING TODAY -- AND KIM BELSHE, THANK YOU
18 FOR THE OPPORTUNITY FOR AND YOU THE TEAM TO PULL THIS
19 TOGETHER. BECAUSE AS A COMMISSIONER AND POSSIBLY ALL THE
20 COMMISSIONERS BE TO ABLE TO ENGAGE IN THIS FASHION IS
21 RARE. AND I APPRECIATE THAT OPPORTUNITY, NUMBER ONE. BUT
22 NUMBER TWO, IS LET'S CONTINUE TO THINK OUTSIDE OF THE BOX
23 TO MEET THE NEEDS OF OUR STUDENTS, OUR KIDS, AND ALL OF
24 OUR CLIENTS THAT WE HAVE.

25 SUPERVISOR KUEHL: KIM.

1 MS. BELSHE: THANK YOU. SO MY AHA -- I'M NOT
2 SURE IF IT'S ENTIRELY AN AHA, BUT I'LL CALL IT MY AHA IS
3 SITTING IN THE TWO MEETINGS, MY AHA WAS, THIS IS A
4 CONVERSATION THE BOARD COULDN'T HAVE HAD A YEAR AGO. IT
5 CERTAINLY IS A CONVERSATION THE BOARD COULDN'T HAVE HAD
6 TWO YEARS AGO. IT'S A REFLECTION OF THE CONFIDENCE THE
7 BOARD KIND OF PUT IN THE PROCESS A NUMBER OF YEARS AGO.
8 GOING BACK TO CHRISTINA'S COMMENTS ABOUT WHAT THE NEW
9 STRATEGIC PLAN. WE'RE NOW DAY 13 OF THE YEAR THREE OF THE
10 NEW STRATEGIC PLAN. BUT I THINK FOR STAFF AND BOARD
11 ALIKE, IT DOES FEEL NEW BECAUSE WE'RE FINALLY GETTING TO
12 THE POINT OF ACTUALIZING THE VISION. SO MY AHA WAS JUST
13 FEELING INCREDIBLY PROUD OF STAFF AND BOARD AND OUR
14 PARTNERS TO BE ABLE TO WRESTLE WITH THIS MULTIDIMENSIONAL,
15 INTERDEPENDENT, MESSY DYNAMIC THING CALLED SYSTEMS IN SUCH
16 A THOUGHTFUL AND GROUNDED AND CURIOUS AND HOPEFUL WAY.

17 SO THAT'S MY AHA. THIS PLACE IS A REALLY
18 EXCITING AND DIFFERENT MOMENT IN TERMS OF -- IN THE BUILT
19 ENVIRONMENT, THEY TALK ABOUT TRANSFORMATION OF LA. I'M
20 JUST SO PROUD OF SEEING THE TRANSFORMATION OF THIS
21 ORGANIZATION TO REALLY THINK CAREFULLY AND CRITICALLY
22 ABOUT HOW WE CONTRIBUTE TO CHANGE IN A WAY THAT REALLY CAN
23 EXTEND THE REACH TO THOUSANDS AND THOUSANDS IF NOT EVERY
24 SINGLE CHILD WHICH REALLY IS OUR GOAL.

25 SUPERVISOR KUEHL: THANK YOU. I THINK MY AHA

1 TIME, IT WAS MORE THAN I MOMENT WAS -- AND I STILL HAVEN'T
2 QUITE FIGURED IT OUT -- IS THIS FEELING OF THE
3 RELATIONSHIP OF THE INDIVIDUAL TO THE GROUP, THE COMMUNITY
4 THE SYSTEM. WHEN I SAID, YOU KNOW, THERE'S NO SUCH THING
5 AS GOVERNMENT, IT'S JUST PEOPLE SITTING IN CHAIRS, YOU
6 KNOW, MY ELECTION IS CALLED A SEAT. I WAS ELECTED TO A
7 SEAT. REALLY. IN THE BUILT ENVIRONMENT, I SHOULD GET UP
8 AND WALK MORE I CAN TELL YOU THAT.

9 BUT THE NOTION OF TRAUMA, WHICH I MOSTLY THINK OF
10 AS BEING AN INDIVIDUAL THING. YOU'VE HAD SOMETHING IN
11 YOUR LIFE. IT TRAUMATIZED YOU. IT TRAUMATIZED ME. BUT I
12 KNOW MY FAMILY WAS TRAUMATIZED BY THEIR -- BY THEIR
13 IMMIGRANT HISTORY, FOR INSTANCE, WHAT THEY WENT THROUGH.
14 AND I WASN'T EVEN BORN YET, BUT I WAS TRAUMATIZED BY THEIR
15 STORIES OF IT AS -- IT'S IN AN AWFUL LOT OF FAMILIES AND
16 COMMUNITIES. YOU DON'T NECESSARILY ALWAYS SHARE THE
17 STORIES BUT YOU DO SHARE THE TRAUMA OF IT, AND IT KIND OF
18 BUILDS INTO A TRAUMATIZED SOCIETY.

19 AND IF THE ANSWER TO HURT IS HEALING, IT'S OFTEN
20 VERY DIFFICULT TO HAVE HEALING AS AN INDIVIDUAL. YOU DO
21 YOUR BEST. BUT MY EXPERIENCE IS IT TAKES YOUR COMMUNITY
22 OR YOUR FAMILY OR YOUR FRIENDS OR SOME FOUND OR, YOU KNOW,
23 GATHERED FAMILY. AND THE NOTION THEN OF RESILIENCY I
24 THINK IS THAT WE HONESTLY DO WORK OUR WAY THROUGH TRAUMA
25 TO RESILIENCY TOGETHER, AND THAT I THINK IS WHY WE HAVE AN

1 ORGANIZATION, WHY DO WE HAVE FIRST 5. YOU KNOW, FIRST 5
2 IS NOT AN INDIVIDUAL, BUT IT'S ABSOLUTE A COLLECTION OF
3 INDIVIDUALS. THERE'S NO WORK BEING DONE BY FIRST 5. WORK
4 IS DONE BY THE PEOPLE IN FIRST 5 OR THE PEOPLE IN THE
5 COUNTY BECAUSE THERE'S REALLY NO SUCH THING AS THE COUNTY.
6 IT CHANGES EVERY YEAR. SO I THINK MY REALIZATION IS THAT
7 WE CAN GET FROM TRAUMA TO RESILIENCY.

8 AND I THINK THE OTHER SECTION ON THE BUILT
9 ENVIRONMENT WAS ABOUT, WHAT IS IT ABOUT THINGS OUTSIDE
10 OURSELVES THAT HELP US GET THROUGH TO THAT AS WELL.

11 SO I THINK THIS WAS VERY VALUABLE. I THANK THE
12 STAFF SO MUCH AND THOSE WHO FACILITATED AND ALL THE
13 COMMISSIONERS WHO PARTICIPATED. IT'S REALLY GREAT TO GIVE
14 US THIS KIND OF EXPERIENCE. I CAN'T BELIEVE THEY PAY ME
15 TO DO THIS. IT'S REALLY KIND OF COOL.

16 SO ANY OTHER CLOSING REMARKS OR QUESTIONS? OR,
17 KIM, DO YOU NEED TO ADD ANYTHING? NO.

18 COMMISSIONER SMITH: CAN WE JUST SAY A COLLECTIVE
19 THANK YOU TO THE STAFF.

20 SUPERVISOR KUEHL: YES. A COLLECTIVE THANK YOU
21 TO THE STAFF.

22 (APPLAUSE.)

23 MS. BELSHE: NEXT MEETING IS IN SEPTEMBER.

24 SUPERVISOR KUEHL: THE NEXT MEETING IS IN
25 SEPTEMBER. SO HAVE A GREAT AUGUST. I KNOW YOU'RE ALL

1 GOING TO SEE EACH OTHER ANYWAY. BUT IF I DON'T SEE YOU
2 UNTIL SEPTEMBER, SEE YOU IN SEPTEMBER.

3 THANK YOU. AND WE ARE ADJOURNED.

4 (AT 4:33 PM, THE MEETING WAS ADJOURNED.)
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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 _____ DAY OF _____, 2017.

CERTIFIED SHORTHAND REPORTER
FOR THE STATE OF CALIFORNIA

SUMMARY ACTION MINUTES

**FIRST 5 LA
Board of Commissioners Meeting
July 13, 2017
1:30-4:30 pm**

COMMISSIONERS PRESENT:

Commissioners:

Judy Abdo (Vice Chair)
Linda Aragon (Alternate)
Jane Boeckmann
Sheila Kuehl (Chair)
Yvette Martinez
Brandon Nichols
Jon Sherin
Romalis Taylor

Ex-Officio Commissioners:

Wendy Smith
Deanne Tilton
Joseph Ybarra

COMMISSIONERS ABSENT:

Barbara Ferrer (EXCUSED)
Karla Pleitéz Howell (EXCUSED)
Marlene Zepeda (EXCUSED)

STAFF PRESENT:

Kim Belshé, Executive Director
Carl Gayden, Senior Director of Administration
Linda Vo, Commission Secretary
John Wagner, Executive Vice President

LEGAL COUNSEL:

Craig Steele, Attorney-at-Law

CALL TO ORDER / ROLL CALL / CONSENT: (Items 1-2)

1. Commission Chair Kuehl called the meeting to order at 1:34 pm. Quorum was present.
2. Consent
 - A. Approve Commission Meeting Summary Action Minutes and Transcript - Thursday, June 8, 2017
 - B. Approve the Monthly Financial Statements Month Ending May 31, 2017
 - C. Contract: Approve One New Agreement and One Amendment and Authorize Staff to Complete Final Contract Execution Upon Approval from the Board
 - D. Approve Strategic Partnership with UCLA for Implementation of the Early Development Instrument (KRA Tool)

Abstentions: Judy Abdo from 2D

**M/S (Jane Boeckmann/Romalis Taylor)
THE ITEM WAS APPROVED**

COMMISSION: (Items 3 – 6)

3. Remarks by the Commission Chair of the Board
4. Executive Director's Report
5. Strategic Plan Review

Ms. Altmayer gave a brief update on the current status of the implementation of our current strategic plan. In her update, she explained how Commissioners, (public

SUMMARY ACTION MINUTES

included) would be broken up into breakout sessions to discuss trauma informed care and built environment in more detail.

6. Public Comment (For items not on the agenda)

ADJOURNMENT:

The Commission adjourned at 4:30 pm.

NEXT MEETING:

The next Commission meeting will take place on September 14, 2017 at 1:30 pm.

First 5 LA
Multi-Purpose Room, First Floor
750 N. Alameda Street
Los Angeles, CA 90012

Meeting minutes were recorded by Linda Vo, Secretary, Board of Commissioners.

FIRST 5 LA

SUBJECT:
Monthly Financial Reports

RECOMMENDATION:
Approval of the monthly financial statements for the month ending July 31, 2017.

BACKGROUND:
Staff routinely provides monthly financial reports for the Commission's review and approval to ensure transparency of the financial status of First 5 LA.

DISCUSSION:

This report includes detailed financial information for the month ending July 31, 2017. The financial statements are unaudited and reported as a "soft close." We are currently in the process of closing the books and audited financial statements will be presented to the Commission in October 2017. For the FY 2016-17 year-end closing purposes, we converted from a cash basis to modified accrual basis and accounted for all assets and liabilities as of June 30, 2017. Beginning July 1, 2017, these statements revert to a cash basis and account for reversals of any accruals for either revenues or expenditures.

First 5 LA began the month with an unaudited cash balance of \$424.9 million. Tobacco Tax Revenue for May and June 2017 in the amount of \$8.2 million was booked as a receivable in FY 2016-17. We had \$80,382 in program expenditures and \$845,486 in operating expenditures. As a result, First 5 LA ended the month with a cash balance of \$424.0 million.

All materials in this packet and check registers are available online. Statements in this report include the following:

- Revenue and Expense Statement: Summarizes financial statements to highlight the starting cash balance, revenues received, program and operating expenses, and the ending cash balance for the month.
- Balance Sheet: Provides a "snapshot" view of the Commission's assets, liabilities and fund balance as of July 31, 2017.
- Detailed operating and program expenditures: Shows expenses against the FY 2016-17 Budget approved on June 08, 2017, concluding with a report of expenditures related to programs functioning as pass-through agreements.

**Los Angeles County Children and Family First -
Proposition 10 Commission (aka) First 5 LA
Revenue and Expense Statement
July 31, 2017, Unaudited**

	REVENUES AND EXPENDITURES	
Cash Balance as of June 30, 2017	\$ 424,941,825	
Revenue		
Monthly State Allotments	\$ -	(1)
Medi-Cal Administrative Activities (MAA)	-	
State Commission - Other Program Funds		
Interest Income - Unreserved	-	
Investment Income - Other	-	
Rental Revenue - La Petite	9,550	
ECE-LA County IMPACT	-	
Total Revenue	\$ 9,550	
Expenses		
Program Budget (Attachment A)		
2015-2020 Strategic Plan: Focusing For The Future	\$ 80,382	
Legacy Investments	-	
Total Initiative/Program Expenses	\$ 80,382	
Pass-Through (Attachment B)		
Medi-Cal Administrative Activities (MAA)	\$ -	
Total Pass-Through Expenses	\$ -	
Operation and Administration (Attachment C)		
Personnel	\$ 719,394	
General Operating	92,275	
Consultant Services	23,822	
Professional Services	6,750	
Travel Expenses	680	
Professional Development	2565	
Capital Improvements	-	
Total Operation and Administration	\$ 845,486	
Total Expenses	\$ 925,868	
Variance (Revenue - Expenses)	\$ (916,318)	
Cash Balance as of July 31, 2017	\$ 424,025,507	(2)

NOTE:

- 1) Tobacco Tax Revenue for May and June 2017 in the amount of \$8.2 Million was booked as a receivable in FY 2016-17.
- 2) Cash Balance excludes fixed assets and liabilities.

LOS ANGELES COUNTY CHILDREN AND FAMILY FIRST - PROPOSITION 10 COMMISSION (AKA FIRST 5 LA)
PROGRAM EXPENDITURES BY FY 2016-17 BUDGET
JULY 31, 2017, UNAUDITED

INITIATIVE/PROGRAM	FY 2017-18 BUDGET	JULY EXPENDITURES	FISCAL YTD EXPENDITURES	BALANCE REMAINING
2015-2020 STRATEGIC PLAN: FOCUSING FOR THE FUTURE				
Strategic Plan Priority Outcome Areas				
Families	29,526,000	-	-	29,526,000
Communities	18,893,000	5,882	5,882	18,887,118
Early Care & Education Systems	22,080,000	-	-	22,080,000
Health-Related Systems	4,118,000	74,500	74,500	4,043,500
Strategic Plan Investment Areas				
Policy Agenda/Advocacy	2,820,000	-	-	2,820,000
Communications & Marketing	6,044,000	-	-	6,044,000
Communications - Conference Funding	300,000	-	-	300,000
Strategic Partnership-Cross-Cutting Funder Partnership	660,000	-	-	660,000
Strategic Partnership-Grantmaking Memberships	42,000	-	-	42,000
Strategic Partnership-Organizational Capacity	200,000	-	-	200,000
Strategic Partnership-Partnership Development	250,000	-	-	250,000
Policy & Strategy - Emerging Opportunities	75,000	-	-	75,000
County Partnerships	50,000	-	-	50,000
Integration & Learning				
Data Development and Integration	1,050,000	-	-	1,050,000
Data Partnership with Funders	850,000	-	-	850,000
Program Evaluation	4,105,000	-	-	4,105,000
Learning Plan Development	100,000	-	-	100,000
Communities of Practice	51,000	-	-	51,000
Grantee Assessment	75,000	-	-	75,000
Organizational-Wide Investment	96,000	-	-	96,000
Integration & Learning - Emerging Opportunities	50,000	-	-	50,000
Subtotal 2015-2020 Strategic Plan	91,435,000	80,382	80,382	91,354,618
LEGACY INVESTMENTS				
At-Risk Fathers Investment	314,000	-	-	314,000
Baby Friendly Hospitals	457,000	-	-	457,000
Black Infant Health	2,006,000	-	-	2,006,000
Children's Dental Care	7,217,000	-	-	7,217,000
Children's Vision Care	252,000	-	-	252,000
Early Identification and Intervention - Autism and other Developmental Delays	884,000	-	-	884,000
Information Resource and Referral	1,240,000	-	-	1,240,000
Little by Little/One Step Ahead	3,979,000	-	-	3,979,000
Parent Child Interaction Therapy	3,943,000	-	-	3,943,000
Policy Advocacy Fund	310,000	-	-	310,000
Universal Assessment of Newborns	10,680,000	-	-	10,680,000
Workforce Development	542,000	-	-	542,000
Subtotal Legacy Investments	31,824,000	-	-	31,824,000
TOTAL	123,259,000	80,382	80,382	123,178,618

The FY 2017-18 Program Budget was approved by the Board of Commissioners on June 8, 2017.

NOTES -PROGRAM EXPENDITURES BY FY 2016-17 BUDGET:

Journal entries for FY 2016-17 accrued expenses were reversed in July 2017. The amounts reported are the actual program expenditures for July 2017.

LOS ANGELES COUNTY CHILDREN AND FAMILY FIRST - PROPOSITION 10 COMMISSION (AKA FIRST 5 LA)
 EXPENDITURES - PASS-THROUGH
 JULY 31, 2017, UNAUDITED

Attachment B

INITIATIVE/PROGRAM - PASS-THROUGH	JULY EXPENDITURES	YEAR TO DATE EXPENDITURES
Medi-Cal Administrative Activities (MAA) - LA County Charges	-	-
Medi-Cal Administrative Activities (MAA) - Participation Payment	-	-
TOTAL	-	-

**Los Angeles County Children and Family First -
Proposition 10 Commission (aka) First 5 LA
Operating & Administrative Budget Update
July 31, 2017, UNAUDITED**

OPERATION AND ADMINISTRATION EXPENSE	JULY ACTUAL	FISCAL YTD ACTUAL	FY 2017-18 BUDGET	FISCAL YTD VARIANCE
Personnel Services				
Salaries & Wages	508,517	508,517	13,204,391	12,695,874
Fringe Benefits	210,877	210,877	3,909,694	3,698,817
Total Personnel Services	719,394	719,394	17,114,085	16,394,691
General Operating Expenses				
ADP Payroll Charges	-	-	31,000	31,000
Workers Compensation Insurance	57,018	57,018	90,000	32,982
Utilities	15,053	15,053	165,000	149,947
Corporate Insurance	-	-	76,000	76,000
Mileage, Parking and Other Transportation	-	-	70,180	70,180
Telephones	-	-	70,000	70,000
Cell Phones & Mobile Devices	1,150	1,150	57,000	55,850
Outside Printing & Publishing	-	-	19,700	19,700
Other Supplies	-	-	20,250	20,250
Postage & Delivery	1,100	1,100	13,300	12,200
Educational Supplies	-	-	2,750	2,750
Office Supplies	2,785	2,785	95,360	92,575
Subscriptions & Publication	-	-	12,330	12,330
Equipment-Rents & Leases	150	150	118,200	118,050
Building Repair & Maintenance	13,609	13,609	180,000	166,391
Equipment Repair & Maintenance	500	500	24,000	23,500
Offsite Storage	910	910	33,900	32,990
Hardware & Software Maintenance	-	-	197,400	197,400
Miscellaneous/Contingency	-	-	75,000	75,000
Internal Meeting	-	-	107,600	107,600
Total General Operating Expenses	92,275	92,275	1,458,970	1,366,695
Consultant Services				
Consultant Fees	-	-	1,382,200	1,382,200
Other Professional Fees	23,822	23,822	300,000	276,178
External Reviewers	-	-	7,500	7,500
Total Consultant Services	23,822	23,822	1,689,700	1,665,878
Professional Services				
Audit	-	-	70,000	70,000
Legal Fees	-	-	125,000	125,000
Professional Dues	6,750	6,750	136,852	130,102
Staff Recruitment	-	-	25,000	25,000
Commission Stipends	-	-	34,000	34,000
Web-Based Services	-	-	81,500	81,500
Bank & Other Service Charges	-	-	12,000	12,000
Total Professional Services	6,750	6,750	484,352	477,602
Travel Expenses				
Airfare	-	-	124,080	124,080
Lodging	-	-	127,300	127,300
Per Diem	680	680	65,330	64,650
Total Travel	680	680	316,710	316,030
Professional Development				
Conference Registrations	2,565	2,565	477,400	474,835
Total Professional Development	2,565	2,565	477,400	474,835
Capital Improvements				
Capital Outlay (Equipment Purchases)	-	-	145,000	145,000
Total Capital Improvements	-	-	145,000	145,000
TOTAL OPERATING EXPENSES	845,486	845,486	21,686,217	20,840,731

NOTES - OPERATING & ADMINISTRATIVE BUDGET UPDATE:

The administrative expenses are within the maximum authorized under the Board policy.

The FY 2017-18 Operating Budget was approved by the Board of Commissioners on June 8, 2017.

**Los Angeles County Children and Families First -
Proposition 10 Commission
Statement of Net Assets
July 31, 2017 Unaudited**

Current Assets:

Cash	\$	4,414,892
Cash- Morlin Mgmt Corp		26,950
Investment:		
Operating and Allocated funds		411,444,864
Advance - LA Care Health Plan		7,983,209
Advance - LAUP		11,777,296
Interest Receivable		558,578
Other Receivables		6,866,279
Total Current Assets	\$	443,072,068

Fixed Assets:

Land	\$	2,039,000
Building & Improvements		12,076,512
Furniture & Fixtures		627,671
Computer, Software & Accessories		1,806,296
Office Equipment		331,033
Accumulated Depreciation		(5,570,239)
Total Fixed Assets	\$	11,310,273

Total Assets **\$** **454,382,341**

Liabilities and Net Assets

Current liabilities:

Other Liabilities	\$	18,725,884 (1)
Total Current Liabilities	\$	18,725,884

Net Assets:

Investment in capital assets	\$	11,310,276
Restricted		424,346,181
Total Net Assets	\$	435,656,457

Total Liabilities and Net Assets **\$** **454,382,341**

NOTES:

(1) Other Liabilities include accounts payable, security deposit from La Petite Academy and other related liabilities.

First 5 LA

SUBJECT:
Contracts for approval

RECOMMENDATION:
Approve one contract renewal and authorize staff to complete final execution of the agreement upon approval from the Board.

BACKGROUND:
First 5 LA's approved programmatic budget for FY 2017-18 totals \$123,259,000 and the approved operating budget totals \$21,614,104. Funding for the agreement in Attachment A was included in the budget presented to the board on May 11, 2017, and approved on June 8, 2017. For contracts that span fiscal years, the estimated spending amount for each fiscal year will be included in First 5 LA's annual budgets for approval. If the Commission does not appropriate funds for the contract in future fiscal years, First 5 LA may terminate the contract. Upon approval of the agreement presented below, staff will complete final execution.

There is **one renewal** with Public Health Foundation Enterprises, Inc. Since 2002, the Contractor has led the Women, Infants, and Children (WIC) Data Mining Research Partnership, a data partnership that pulls together and analyzes WIC administrative data for Los Angeles County and conducts a periodic survey of a random sample of WIC parents on a range of early childhood topics. In October 2015, the Commission approved an extension to the Strategic Partnership to extend the project for five (5) years beginning November 1, 2015. During Fiscal Year 2016-17, the Contractor had numerous accomplishments, which included reaching more than 3,000 WIC parent participants through the survey and providing critical administrative WIC data to evaluation partners for the Reducing Early Childhood Obesity evaluation. During the next contract period, the Contractor will accomplish the following: 1) Complete the data collection of the 2017 WIC survey; 2) Download State WIC administrative data for the Los Angeles County region for processing and analysis; 3) Completion of issue specific briefs to inform the program outcome areas; 4) Engage with First 5 LA via data workshops and meetings using the WIC survey data; 5) Share findings among WIC programs and external agencies serving children 0-5; and 6) Refresh recent WIC administrative and survey data on the WIC Data Mining website.

DISCUSSION:
Staff seeks the Commission's approval of the agreement summarized in Attachment A.

Attachment A
September 2017

RENEWALS											
DEPARTMENT	OUTCOME AREA / INITIATIVE/STRATEGY / PROGRAM	CONTRACT (PROJECT) INFORMATION	BOARD APPROVAL DATE	PROCUREMENT METHOD	PROJECT LENGTH	ESTIMATED TOTAL PROJECT COST	CONTRACT AMOUNT	ANTICIPATED CONTRACT START DATE	ANTICIPATED CONTRACT END DATE	ANTICIPATED PROJECT END DATE	*SATISFACTORY PROGRESS ACHIEVED BY CONTRACTOR?
Measurement, Learning & Evaluation	Data Development and Integration/WIC Data Mining Research Partnership	<p>PUBLIC HEALTH FOUNDATION ENTERPRISES, INC. (#07030) Since 2002, the Contractor has led the Women, Infants, and Children (WIC) Data Mining Research Partnership, a data partnership that pulls together and analyzes WIC administrative data for Los Angeles County and conducts a periodic survey of a random sample of WIC parents on a range of early childhood topics. In October 2015, the Commission approved an extension to the Strategic Partnership to extend the project for five (5) years beginning November 1, 2015. During Fiscal Year 2016-17, the Contractor had numerous accomplishments, which included reaching more than 3,000 WIC parent participants through the survey and providing critical administrative WIC data to evaluation partners for the Reducing Early Childhood Obesity evaluation. During the next contract period, the Contractor will accomplish the following: 1) Complete the data collection of the 2017 WIC survey; 2) Download State WIC administrative data for the Los Angeles County region for processing and analysis; 3) Complete issue specific briefs to inform the program outcome areas; 4) Engage with First 5 LA via data workshops and meetings using the WIC survey data; 5) Share findings among WIC programs and external agencies serving children 0-5; and 6) Refresh recent WIC administrative and survey data on the WIC Data Mining website.</p>	10/8/2015	Strategic Partnership	5 Years	\$2,407,393	\$330,757 Estimated FY 17-18 Spending \$247,453 Impact to FY 18-19 Budget \$83,304	10/1/2017	9/30/2018	9/30/2020	58 Yes

*Satisfactory progress is based on whether contractors and are making or will be expected to make satisfactory progress towards completion in the current agreement by the contract expiration date.

Memo

To: Board of Commissioners
From: Kim Belshé, Executive Director
Date: September 14, 2017
Subject: EXECUTIVE DIRECTOR'S REPORT

EXECUTIVE DIRECTOR'S HIGHLIGHTS

Hello, Commissioners! We look forward to reconnecting with you at the September Commission meeting and reengaging with you on a number of important subjects, including further Board discussion and feedback to staff regarding the two emerging areas of work that were the subjects of the July Board retreat – trauma informed care and the built environment. We're eager to share with you what we heard as some of the key themes and take-aways from the retreat break-out sessions and to discuss further with the Board First 5 LA's role and opportunities for us to work in partnership with others to advance systems change in these two critical issue areas.

Since we last came together, we continue to be reminded of the volatility of the environment within which we work – volatility that affects us as individuals, family and community members, and professionals. Over the past few weeks, we've seen examples of hatred and bigotry, such as in Charlottesville, and policy actions, such as the President's decision to end the Deferred Action for Childhood Arrivals (DACA) program, which are antithetical to our values and beliefs. These recent events and policy efforts are a jarring reminder that the values of respect, inclusion and diversity are not universally shared.

Recent events are also a powerful reminder of the importance and urgency of our work at First 5 LA. At the heart of who we are and what we do is opportunity and equity. We are here to contribute to early childhood development systems that support all children in LA County to be raised in a safe, loving and nurturing environment with opportunities to reach their full potential - with a particular focus on those who face significant risks and challenges. As a part of our vision for LA County's youngest children, we support and strengthen parents and the communities within which they live, work, and play. In these times of volatility and uncertainty, it is comforting to know that we are not alone. With many partners, we engage policymakers to elevate early childhood and disadvantaged communities as priorities. We have a voice that we must continue to exercise with others to prioritize young children, uplift our communities, and stand up against bigotry and injustice. Together, we will be heard.

This is a moment in time that challenges us to consider the work that we do, how we engage, the partners with whom we work, and how to direct our energy and resources on behalf of young children. Yes, recent events are gut checks on who we are as individuals, as professionals, and as a nation. And,

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Los Angeles County Supervisor Jane Boeckmann
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 Barbara Ferrer, Ph.D., M.P.H., M.Ed.
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Brandon Nichols
 Jonathan E. Sherin, M.D., Ph.D.
 Sylvia S. Swilley, M.D.
 Marlene Zepeda, Ph.D.

EX OFFICIO MEMBERS

Dayton Gilleland, Ed.D.
 Karla Pleitez Howell
 Wendy Smith
 Deanne Tilton

EXECUTIVE DIRECTOR

Kim Belshé

EXECUTIVE VICE PRESIDENT

John A. Wagner

A PUBLIC ENTITY

yes, recent events deepen my commitment and resolve to lead and partner with parents, residents, community leaders and policy makers to ensure that **every** child in our County has the opportunity to reach their full potential and thrive.

Our work is now more important than ever. While national events create volatility and uncertainty, they also have drawn attention to children. That's the opportunity and imperative. We need to stay focused and grounded in our mission and purpose, in our partnerships with parents and communities, in our policy and advocacy coalitions, and in our words as well as deeds. Working together, we can ensure that the voice of First 5 LA and our diverse partners is heard and our message understood: that kids are priority #1 and our policies, practices, attitudes must so reflect.

With the Board's support, First 5 LA has taken several steps in partnership with others to address the impact of immigration policies and related fears on young children. In the context of ongoing threats and concerns, we can and must continue to engage in efforts to support parents and their young children to live free from the threat of deportation and to understand their continued rights to receive services for their young children. We look forward to continuing to engage the Board and staff alike in these sensitive and enormously important efforts on behalf of young children in our County.

ORGANIZATION-WIDE ACTIVITY HIGHLIGHTS

I. FAMILY SUPPORTS

Centinela Hospital Medical Center receives Baby-Friendly Designation with Support from First 5 LA

Baby-Friendly USA, Inc. has designated Centinela Hospital Medical Center a Baby-Friendly Hospital. Located in Los Angeles County, the hospital reached designation with support of First 5 LA funds through the Baby-Friendly Hospital Project. In order to achieve "Baby-Friendly" designation, hospitals demonstrate their ability to offer mothers information, skills, and support needed to successfully initiate bonding and breastfeeding.

Baby-Friendly USA, Inc. is the US authority for the implementation of the Baby-Friendly Hospital Initiative ("BFHI"), a global program sponsored by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). The initiative encourages and recognizes hospitals and birthing centers that offer an optimal level of care for breastfeeding mothers and their babies. Based on the Ten Steps to Successful Breastfeeding, this prestigious international award recognizes birth facilities that offer breastfeeding mothers the information, confidence, and skills to successfully initiate and continue breastfeeding their babies.

\$10.5 Million was approved by the Commission in March of 2009 to support the Baby-Friendly Hospital Project. In January 2013, Commissioners approved the revision of the hospital criteria for Baby-Friendly funds with the intent of aligning the Baby-Friendly Initiative with Welcome Baby to strengthen the outcomes for both projects. To date, 17 hospitals funded by First 5 LA have received Baby-Friendly designation.

First 5 LA funded Baby-Friendly Hospitals in Los Angeles County (in order of designation):

1. Pomona Valley Hospital Medical Center, Pomona (March 2014)

2. Hollywood Presbyterian Medical Center, Los Angeles (April 2014)
3. San Gabriel Valley Medical Center, San Gabriel (June 2014)
4. St. Francis Medical Center, Lynwood (October 2014)
5. East Los Angeles Doctors Hospital, Los Angeles (December 2014)
6. Providence Little Company of Mary Medical Center, Torrance (February 2015)
7. St. Mary Medical Center Long Beach, Long Beach (March 2015)
8. Pacific Alliance Medical Center, Los Angeles (April 2015)
9. White Memorial Medical Center, Los Angeles (April 2015)
10. Providence St. Joseph Medical Center, Burbank (June 2015)
11. Greater El Monte Community Hospital, South El Monte (November 2015)
12. Valley Presbyterian Hospital, Van Nuys (November 2015)
13. Good Samaritan Hospital, Los Angeles (June 2016)
14. Beverly Hospital, Montebello (November 2016)
15. Northridge Hospital Medical Center, Northridge (November 2016)
16. Memorial of Gardena, Gardena (March 2017)
17. Centinela Hospital Medical Center (May 2017)

First 5 County Commissions Convene in Los Angeles to Discuss Home Visiting Sustainability

On August 3, 2017, representatives from approximately fifteen different First 5 County Commissions convened in a working session in Los Angeles to discuss home visiting sustainability from a statewide and local perspective. A major policy priority for First 5 Commissions statewide is ensuring sustainability of home visiting efforts, particularly against the backdrop of continued declining tobacco tax revenues. The different Commission representatives shared lessons learned from their efforts in blending and braiding funding, utilizing non-traditional funding sources to support home visiting, data-sharing and integration, optimizing referral pathways, and embedding home visiting in countywide systems design. Best practices and lessons learned from the convening inform First 5 LA's programmatic and sustainability efforts, as well as our work on the LA County Board of Supervisors home visiting motion response workgroup.

Staff Contact: Reena John (RJohn@first5la.org)

Update on Engaging Fathers

In August, Families Supports staff attended the Engaging Fathers Investment Quarterly Convening. The purpose of this meeting was to convene the three grantees and technical assistance provider to focus on a systems-wide approach to engaging fathers in a proactive manner by partnering with local stakeholders and county systems to create father friendly policies that can be adopted by county systems that are more inclusive of men who parent. The group is in the process of developing a strategic plan that will identify key partners such as the Probation Department, Child Protective Services, Child Support, Los Angeles County Office of Education and other potential stakeholders. A draft of the plan will be reviewed at the next quarterly meeting. Grantees of this work include: City of Long Beach, Children's Institute, Friends in Outside Los Angeles County, and Technical Assistance Provider: National Compadres Network

Staff Contact: Leticia Sanchez (lsanchez@first5la.org)

Update on Abriendo Puertas

In August, Family Supports staff attended the first of four Abriendo Puertas/Opening Doors (AP) Training Institutes. Each institute trains program facilitators to provide sessions to parents within their respective local communities. Twenty sites were selected to consider diversity of geography and site type. Selected sites include 9 schools, 3 school-community partnerships, and 8 non-school settings. Each site will receive training for four representatives to co-facilitate two cycle of programming. This

will result in 80 facilitators trained and a target of 800 parents and caretakers served. The goal of this strategic partnership is to gain knowledge related to family engagement program implementation practices, such as reflective facilitation practices to promote, tailor, and sustain local AP programs by identifying needs with local families and caretakers as they engage in AP programming.

Staff Contact: Christine Tran (ctran@first5la.org)

Child Welfare Roundtable

On August 4, 2017, Children Now hosted a Child Welfare Roundtable to discuss the role of home visiting in serving foster care children and placement families with Assembly and Senate staffers as well as Department of Finance staff. First 5 LA staff presented a summary of the LA County system, the need for various home visiting models, approaches to supporting families, and how the state can support these programs. Other presenters included the First 5 Association, Early Learning Institute of Sonoma County, First 5 Sacramento and Children Now.

Staff Contact: Charna Martin (cmartin@first5la.org)

Department of Finance Site Visit

First 5 LA staff participated in Department of Finance (DOF) site visit to the First 5 San Joaquin home visiting program staff. Along with representatives from First 5 Santa Clara, First 5 Butte and the First 5 Association, we spent the day discussing effective home visiting systems and advocating for embedding home visiting in the CalWORKs system as an effective delivery model. The DOF is increasingly interested in home visiting as tool for breaking the cycle of poverty and strengthening families. This year, AB 992 (Arambula) would have created the CalWORKs Baby Wellness and Family Support Home Visiting Program. While the bill is dead this legislative cycle, it will come up again next session.

Staff Contact: Charna Martin (cmartin@first5la.org)

Three Welcome Baby hospitals in the San Fernando Valley join forces in an event to highlight the success of the program and the importance of home visitation in LA County

On August 4, 2017, Dignity Health Northridge Hospital Medical Center hosted an event in partnership with First 5 LA, Valley Presbyterian Hospital and Providence Holy Cross Hospital to celebrate and raise awareness of the Welcome Baby Program . They were joined by Home Visitation partners from the region, El Nido Family Centers, Child Care Resource Center and Friends of the Family.

Linda Aragon, Director for the Los Angeles County Division of Maternal, Child, and Adolescent Health (MCAH), representing the Los Angeles County Department of Public Health and alternate Commissioner at First 5 LA, spoke at the event and highlighted Supervisors Kuehl and Hahn's home visiting motion and the Board of Supervisors' support for the federal Maternal, Infant, Early Childhood Home Visiting (MIECHV) program.

Over 60 people attended the event, including members from the Best Start Panorama City & Neighbors Community, representatives and deputies from the offices of elected officials and parents who participated in Welcome Baby in the three hospitals. Executive Director of First 5 LA, Kim Belshé shared some data on the success of the program to date and the importance of the agency's commitment to home visitation in support of children and families in LA County.

Additionally, the event was covered by local NPR station, KPCC reporter, Priska Neely who had the opportunity to speak to Kim Belshé, Linda Aragon, and others as she gathered insight for her coverage on home visitation in L.A. County.

The event concluded with three parents sharing touching stories about their experience with Welcome Baby at the three hospitals, stating that it provided invaluable support as they embarked on the important endeavor of raising their children. After sharing their stories, the parents were awarded certificates by First 5 LA Commissioners, Yvette Martinez, Romalis J. Taylor, and Linda Aragon.

Staff Contact: Maria Aquino (maquino@first5la.org)

II. COMMUNITIES

Best Start Leadership Summit: Planning for the implementation of the New Support Structure

More than 100 Best Start Communities Leaders attended the August 11, 2017 half-day Leadership Summit at Saint Sophia in the Metro community to receive an update on the Best Start Alignment process and receive information on community resources. The new support structure is targeted to be in place by June 2018. Providing the opening keynote address was L.A. City Councilmember of District 8, Marqueece Harris-Dawson. He spoke passionately about organizing systems - from transportation, to housing, to education - to be about people and making families stronger. The agenda for the day included: 1) Preparing for the New Structure; 2) Community Resource Guidelines; and, 3) Open Q&A Session. The Community Leaders were informed that members from the partnership would have a role in the selection process for the new support structure. The Summit provided community leaders with the time and opportunity to provide input for the upcoming Best Start Alignment implementation process, receive updates on the Community Resource Guidelines, and ask clarifying questions. Staff gave a presentation on Community Resources that provided information on Communications & Outreach and Training &TA funds for fiscal year 2017-2018. The next step will be to continue points of engagement for community leaders throughout the new structure selection process. The planning and preparation of the Leadership Summit was a collaborative effort involving staff from the three Communities Department strategy teams as well as staff from Community Relations. See "Communities September 2017 ED Update Attachment A" for a picture at the Leadership Summit.

Staff Contact: Alex Wade (awade@first5la.org); Antoinette Andrews, (aandrews@first5la.org)

III. EARLY CARE AND EDUCATION SYSTEMS

Cradle to Kindergarten Event

On September 13, 2017, First 5 LA and the California Community Foundation co-hosted an event with Ajay Chaudhry and Hirokazu Yoshikawa to discuss their recently published book, Cradle to Kindergarten, which highlights the importance of increasing access to early childhood programs like quality preschool to help combat inequality in America. The event included local early childhood leaders and advocates, and was part of a series of events throughout California discussing the book's recommendations and findings.

Staff Contact: Rebecca Patton (rpatton@first5la.org)

Staff Attend BUILD QRIS Think Tank 3.0 for CA-QRIS Hub Lead Agencies

In August, First 5 LA staff Katie Fallin Kenyon and Miriam Maya attended an all-day QRIS "Think Tank" co-hosted by First 5 California and the California Department of Education. The BUILD QRIS 3.0 Think Tank 2017 was an opportunity for CA-QRIS regional hub leads to share ideas, learn from one another, and identify opportunities for improvement. At the Think Tank, QRIS leaders from

across California came together to self-assess their own QRIS, using a new tool developed by BUILD, and identified one or two issues of high priority focus. First 5 LA staff identified several opportunities to improve our QRIS systems-building work in LA County and will be working with the QRIS Architects and Quality Start Los Angeles (QSLA) partners to implement those actions in the next few months.

Staff Contact: Katie Fallin Kenyon (KFallin@first5la.org)

Local School Districts Engagement Coalition: Azusa Unified School District

On August 1st, 2017, Azusa Unified School District's Board of Education unanimously passed a resolution recognizing the District's value for early childhood programs by formally identifying the District as a Preschool through 12th grade district. As part of this resolution changes will be made to the district website, communications, and marketing materials to reflect the Preschool through 12th grade identity. Additionally, Azusa Unified School District will indicate a "Low Grade" of "P" on the California's School's Directory listing to reflect the inclusion of preschool within its grade span. The effort with Azusa's Board of Education was led by Children Now with support from First 5 LA through First 5 LA's Local School District Engagement Coalition.

Staff Contact: Rebecca Patton (rpatton@first5la.org)

Speaker's Blue Ribbon Commission on Early Childhood Education

The Speaker's Blue Ribbon Commission on Early Childhood Education held its second hearing at Cerritos College on July 27, 2017. Speakers presented on the investment in early care and education programs in the recently passed California state budget. In addition, there was a presentation on the intersection between early brain development and the importance of quality early care and education settings. Staff from First 5 LA, First 5 Riverside, and First 5 San Bernardino was present. Senior Policy Strategist for Early Care and Education Becca Patton gave public comment reiterating the willingness of First 5s throughout the state to support and inform the work of the Blue Ribbon Commission; her comments were included in a local KPCC/NPR story.

As a follow-up, First 5 CA, the First 5 Association, and First 5 LA delivered a letter to the Assemblymembers and Commissioners outlining core principles to prioritize in early care and education. The letter can be found in Attachment-C.

Staff Contact: Rebecca Patton (rpatton@first5la.org)

Early Care and Education Policy and Advocacy Fund

First 5 LA launched the Early Care and Education Policy and Advocacy Fund (ECE PAF) with the selection of 6 grantees: Advancement Project California; a partnership of the Child Care Alliance of Los Angeles and its two largest members, Crystal Stairs and Child Care Resource Center; Children Now; Early Edge; LAUP; and Los Angeles Chamber of Commerce Foundation. The initial investment will help grantees' overall capacity to engage in long term policy and advocacy work, including analysis and policymaker education about the need to address persistent gaps in quality and access to subsidized care, and professionalize the early education workforce, especially in Los Angeles. As the intermediary, Community Partners will further support the field to focus on outcomes, capacity building at the organizational and field level, and partnership. The first convening of the ECE PAF grantees is scheduled for mid-October. See Attachment D.

Staff Contact: Rebecca Patton (rpatton@first5la.org)

California's ESSA State Plan Update

A coalition of early care and education advocates including First 5 LA drafted a letter to the State Board of Education and California Department of Education with recommendations on how to recognize California's earliest learners in the state's plan for the Every Student Succeeds Act (ESSA). The letter can be viewed in Attachment- B. In addition to the letter, several advocates testified at the July 12th State Board of Education hearing including a representative from our state advocate, California Strategies. As a result of this advocacy, the State Board of Education has recommended the following changes in the ESSA state plan:

- Change references to "K–12" in the State Plan to "P–12" where appropriate.
- Include information about the LCAP Addendum as it requires LEAs describe how they will support transitions of students from early education programs through postsecondary education.
- Provide examples of supports and guidance LEAs may receive that will help them to work with early education providers and support students to make successful transitions across grade levels.

If available, provide information about current and future plans for data sharing related to early education access and postsecondary transitions.

- California will develop tools, toolkits and guidance documents to support English learners, their teachers, parents, school administrators, and other school personnel, from preschool through grades 12.

The second draft of the plan will be submitted at the next State Board of Education meeting in late September with a final draft adopted soon thereafter.

Staff Contact: Rebecca Patton (rpatton@first5la.org)

IV. HEALTH-RELATED SYSTEMS

Emergency Child Care Pilot Program – Update

The Child Care Resource Center, Inc. (CCRC) officially launched the service provision portion of its Emergency Child Care Pilot Program in April 2017 after receiving approval from the Board of Supervisors in March to enter into a contract with DCFS. The pilot holds DCFS-funded child care slots in SPA 2 for children up to 5 years old to support emergent foster placements. Within 10 days of launching, all five child care slots were filled with children from three different families. The children are expected to transfer to a permanent subsidized child care program in September. In addition to direct child care, CCRC has prioritized trauma informed care training for family child care providers as an objective for the pilot. Between April and June, seventeen family child care providers received 15 hours of trauma informed care training with the Child Development Institute. Over the next 18 months, CCRC plans to continue the pilot integrating its evaluation with potential data generated by LA County and the state from the state's Emergency Child Care Bridge Program, which was appropriated through the general fund in the 2017-2018 state budget.

Staff Contact: Pegah Faed (pfaed@first5la.org)

V. POLICY, PARTNERSHIPS AND COMMUNICATIONS

L.A. Area Chamber of Commerce: Nonprofit Council

On July 20, 2017, First 5 LA Strategic Partnerships Department staff Jennifer Cowan and Gabe Dee attended the L.A. Area Chamber of Commerce's Non-Profit Council to hear from the banking industry about how they are supporting local nonprofits through a variety of grantmaking and partnership efforts. The panel, designed for the Chamber's nonprofit members seeking grant funding and sponsorship support, provided First 5 LA staff with insight on how different types of financial institutions approach partnerships with the nonprofit sector.

Speakers—including Jennifer Nickerson, Vice President, Corporate Citizenship, City National Bank; Byron Reed, Sr. Vice President & Director, Community Relations Group- Greater Los Angeles/Orange County Region, Wells Fargo Bank; and Millie Yamaki, Community Relations Manager, Enterprise Business & Community Engagement, Bank of America—encouraged nonprofits to identify clear alignment between their mission and the bank's priorities (e.g., affordable housing in a specific neighborhood where customers live) before initiating a partnership discussion. As many banks house their corporate giving and sponsorship activities within the Marketing Department, they are specifically looking for community partnerships that provide targeted access to current and/or future customers.

Staff learned of several possible connections that could support the efforts of First5LA such as, some bank branches (or network of branches) have their own small budgets to support community partners. Banks also offer significant in-kind support through volunteerism initiatives, ranging from associate volunteer days to placement on nonprofit boards. Volunteer engagement among bank employees has the potential to create champions and may lead to securing future financial support.

The Strategic Partnerships team continues to participate in relevant Chamber events and work with Chamber staff to explore partnership opportunities with the corporate sector.

Staff Contact: Jennifer Cowan (jcowan@first5la.org)

L.A. Partnerships for Early Childhood Investment: Education Panel

On July 25, 2017, First 5 LA staff from both the Programs and Policy and Strategy Divisions attended the panel presentation "English Language Learners: Stopping the Achievement Gap Before It Begins." Panelists included Lillian Maldonado French, Superintendent, Mountain View School District; Dr. Anya Hurwitz, Executive Director SEAL; the Sobrato Family Foundation; and Dr. Marlene Zepeda, Professor Emerita, Department of Child and Family Studies, California State University, Los Angeles, and First 5 LA Commissioner. David Rattray, Executive Vice President, Center for Education Excellence & Talent Development, L.A. Area Chamber of Commerce, served as Moderator.

Sixty percent of California's children from birth to age 5 are considered dual language learners. Dr. Zepeda explained why we all need to care about dual language children, including how "their destiny is our future," and the role high quality early childhood programs play in closing school readiness gaps.

Ms. Hurwitz provided an introduction to Sobrato Early Academic Language (SEAL), a preschool through third grade program of the Sobrato Family Foundation designed to build the capacity of schools "to powerfully develop the language and literacy skills of young English Learner children and to close the academic achievement gap by fourth grade." SEAL is being implemented in a number of California schools, including some in El Monte's Mountain View School District, which was featured in the panel presentation.

Bilingual education mostly disappeared in California 19 years ago with the passage of Proposition 227. Current efforts to expand dual language programs across the County are facing considerable challenges such as the small number of dual language teachers and the experts who can prepare them. Panelists encouraged philanthropy to support the effort through funding workforce development and capacity building, emphasizing the important role of families and offering supportive services. Panelists also encouraged the funders in the room to think beyond a single program and fund systems change efforts.

Staff Contact: Sharon Murphy (smurphy@first5la.org)

Immigration

In June 2017, the Strategic Partnerships Department, along with Rosie Arroyo from the California Community Foundation (CCF), presented to the Program and Planning Committee regarding the impact of current immigration policy and climate on First 5 LA's ability to reach systems change goals in the current Strategic Plan. To support immigrant families with young children in Los Angeles, staff presented the establishment of a Strategic Partnership with CCF for a total allocation of \$74,000 for 12 months. These funds were allocated to CCF to aid their Deportation Defense Fund, a grantmaking initiative of \$1.4 million that supports rapid response efforts at 19 nonprofit organizations working directly with communities to provide protection against the expected spike in deportation enforcement against vulnerable immigrant populations in Los Angeles County. The current list of organizations providing funding to the Deportation Defense Fund includes CCF, the Weingart Foundation, The California Endowment (TCE), the James Irvine Foundation, Los Angeles County, and the City of Los Angeles, among others. First 5 LA's contribution will provide additional funding for engagement of Early Childcare and Education (ECE) service providers and ensure that families with children 0 to 5 are receiving targeted outreach and content by the nonprofit organizations funded with First 5 LA dollars. Additionally, Kim Belshé, representing First 5 LA, joined 200 other funders across the country and signed the Grantmakers Concerned with Immigration and Refugees (GCIR) joint statement on immigration (<https://www.gcir.org/joint-foundation-statement-immigration#statement>). Signing the joint statement and these funds are part of First 5 LA's immediate response, and staff will return to the Board in subsequent months to update the Board on this investment and to explore a more comprehensive strategy in support of immigrant families.

To that end, Strategic Partnerships (SP) staff continues to have exploratory conversations with potential partners and other funders working in this space, in order to determine how best benefit immigrant families in the near term. First 5 LA was created to serve all of LA's young children and families, and immigration issues disproportionately touch LA's young children and families. As a systems-change funder that aims to ensure that our public systems better serve young children, it is especially important that families with young children understand their continued rights to access public benefits, and continue to engage with the public systems that exist to serve their health, educational, familial and caregiving needs. SP staff continues to have exploratory learning meetings with the CCF, Weingart Foundation, Liberty Hill Foundation, and TCE, among others, all of whom are funding work in immigration.

Additionally, a cross-departmental immigration workgroup at First 5 LA has been implemented to explore near-term opportunities and long term strategies, particularly within our Best Start and Communications departments. The workgroup is supporting the El Monte/South El Monte Best Start Partnership as they prepare to host a Guardianship Preparation meeting in September with the Coalition for Humane Immigrant Rights of Los Angeles (CHIRLA), who was connected to the Partnership by the Community Relations Department. The workgroup also continues to collect information from leading non-profit advocates that can inform the Communications Department on partnership opportunities regarding the use of social media and messaging campaigns. Staff have

also been working closely with First 5 CA and Sesame Street to help distribute their Care, Cope and Connect resource booklet to support immigrant families during this stressful and uncertain time. See Attachment E.

Staff Contact: Gabriel Dee (gdee@first5la.org)

Input for L.A. Community College District's Strategic Plan

Sharon Murphy attended a Los Angeles Community College District's (LACCD) "Strategic Plan Input Session." The session was led by Dr. Ryan Cornner, Vice Chancellor for Educational Programs and Institutional Effectiveness. Attendees included various representatives from academia, philanthropy, and the nonprofit sector.

LACCD includes 9 colleges that serve over 230,000 students annually. Approximately 25,000 or 11% of LACCD students have a 0-5 child. Many of the session's participants raised the need for "wraparound services" to support students and increase their academic success. A recent survey of students found that almost 1 in 5 students is experiencing homelessness during the year, and that nearly two-thirds of all students lack enough to eat to sustain an active, healthy lifestyle.

One of the draft goals of LACCD's proposed 2018-2023 Strategic Plan is to "increase college going for the Los Angeles region through enhanced outreach to community and educational partners and expanded access to academic programs that meet community and student needs." The potential impact on our goals could be around increasing workforce for various programs such as child care or home visitation, or increase services to college students with young children. First 5 LA staff will explore opportunities for partnership with individual LACCD colleges as well as at the District-level.

Staff Contact: Sharon Murphy (smurphy@first5la.org)

Federal Advocacy

First 5 Senior Policy Strategist for Health Systems and Family Support Charna Martin has continued to support the National Home Visiting Coalition efforts to reauthorize the Maternal Infant Early Childhood Home Visiting Program (MIECHV). The current MIECHV funding expires on September 30, 2017. Advocacy efforts have increased asking for long-term extension and expansion of funding. There are two House versions of reauthorization bills; H.R. 2824, The Evidence-Based Home Visiting Act, was introduced on June 13, 2017 and H.R. 3525, The Home Visiting Works Act of 2017, was introduced on July 28, 2017. No Senate version has been introduced yet. We have participated in several coalition meetings to develop position statements on the new bills as well as recognize members of our Los Angeles and California delegations for their support.

Staff Contact: Charna Martin (cmartin@first5la.org)

First 5 Policy Planning and Alignment

In August, First 5 LA, represented by Director of Public Policy and Government Affairs Peter Barth, coordinated a series of policy planning and alignment conversations with First 5 California, the First 5 Association, and California Strategies in Sacramento to prepare for the upcoming state budget and legislative session. Topics covered included early identification and intervention, home visiting, early care and education, and First 5 revenues. The purpose of the meetings was to support a more coordinated First 5 voice in state policy and advocacy activities in 2018.

Staff Contact: Peter Barth (pbarth@first5la.org)

Champions for Children Reception

On September 5, First 5 LA, in partnership with First 5 California, the First 5 Association, the Bay Area Council, and the Los Angeles Regional Chamber of Commerce, hosted the second annual Champions for Children event to thank legislators for making early childhood a priority in the 2017-18 budget. Vice President of Policy and Strategy Kim Pattillo Brownson served as the event master of ceremonies. In addition to thanking our legislative partners who helped secure early care and education wins in the budget, the event highlighted the need to invest in early childhood broadly. In addition to the event, First 5s created "Champions for Children" posters which were delivered to legislative offices and promoted "Talk. Read. Sing." social media with legislators.

Staff Contact: Peter Barth (pbarth@first5la.org)

VI. MONITORING, EVALUATION & LEARNING

Nothing to highlight for this month.

VII. LEGACY INVESTMENTS

Nothing to highlight for this month.

VIII. ADMINISTRATION & ORGANIZATIONAL DEVELOPMENT

Nothing to highlight for this month.

IX. ORGANIZATION-WIDE AND CROSS CUTTING RECENT CONFERENCES AND EVENTS

Nothing to highlight for this month.

X. UPCOMING EVENTS

Nothing to highlight for this month.

XI. CONTRACTS EXECUTED BETWEEN \$25K - \$75K

Procurement Update

Pursuant to the Procurement Policy adopted on February 13, 2014, "The Executive Director (or designee) may approve any contract less than \$75,000 in the aggregate in a fiscal year, and will establish appropriate internal policies and controls for those awards. Copies of contracts executed in the amount of \$25,000 or more and up to \$75,000 within a fiscal year will be provided to the Commission during the course of its normal business and be provided as informational items."

The following contracts were executed or amended between June 23, 2017 and August 24, 2017. Copies of the executed contracts can be found here: www.first5la.org/postfiles/files/Contracts%20-%20Septemer%202017%20ED%20Report.pdf

#09411 BUMPERCAR, INC. – Contract Amount: \$74,765

Contract Period: 7/1/2017– 6/30/2018

The Contractor provides media planning and buying services to support public education efforts of the Communications Department at First 5 LA.

#08402 CHILD CARE LAW CENTER – Contract Amount: \$65,668

Contract Period: 7/1/2017– 3/14/2018

The Contractor advocates to 1) streamline and simplify eligibility, enrollment and retention processes to help low-income families with children ages 0-5 obtain and retain child care subsidies; and 2) improve health and safety regulatory practices in licensed child care generally and specifically to target childhood obesity in child care settings. The Contractor will identify policy opportunities to establish uniform guidelines for contractors in delivering child care subsidies to low-income children.

#08398 COALITION FOR HUMANE IMMIGRANT RIGHTS OF LOS ANGELES – Contract Amount: \$47,777

Contract Period: 7/1/2017– 12/31/2017

The Contractor advocates to promote the health care enrollment of immigrant children and children of immigrants in Los Angeles County and to ease enrollment barriers faced by this demographic in Los Angeles and throughout California. In this way, the Contractor will help to address some of the primary obstacles facing 0-5 immigrant access to health care by seeking policy interventions that 1) ease barriers to enrollment; 2) include immigrant children in legislative reform that might deny them access; and 3) protect funding for the providers through which immigrant children receive access to care.

#09536 COMMUNITY PARTNERS – Contract Amount: \$65,668

Contract Period: 7/1/2017– 6/30/2018

The Contractor will provide a neutral home to house pooled funds, provide back-office services, and logistical and convening support to advance the goals of the Trauma-Informed Care Systems Change Initiative. The Initiative will bring together foundations, service delivery organizations and Los Angeles County departments around a shared priority to integrate trauma-informed principles and practices into systems that serve children and families in Los Angeles County. The pooled fund will support exploratory work such as convening a trauma-informed care systems change working group, conducting an environmental scan of trauma-informed care efforts and best practices in the county, and developing a county-wide action plan.

#08952 DEBORAH DARO TUGGLE – Contract Amount: \$45,712

Contract Period: 7/1/2017– 6/30/2018

The Consultant will provide assistance around program development and the Oversight Entity regarding ongoing quality assurance improvement for Welcome Baby. Welcome Baby provides Los Angeles County pregnant women and new moms with information, support and a trusted partner to help through the journey of pregnancy and early parenthood. The Consultant will deliver recommendations and appropriate measurement techniques on research questions and provide assistance to the development of available system linkages for extending Welcome Baby reach and impact. The Consultant will also will provide guidance to First 5 LA's Public Policy staff on strategic opportunities and guide the development, implementation, and oversight of planned, ongoing and current studies about our Family Strengthening programs.

#06740 HEALTHREACH – Contract Amount: \$48,900

Contract Period: 7/1/2017– 6/30/2018

The Consultant will provide First 5 LA with assistance in implementation of the Medi-Cal Administrative Activities (MAA) Program. MAA allows local governmental agencies to be eligible to receive federal reimbursement for the cost of performing administrative activities that directly support efforts to identify and enroll potential eligible individuals into Medi-Cal. Activities to be undertaken by the Consultant include MAA coordination and administration, claiming plan implementation, training for First 5 LA staff and grantees, and ongoing technical assistance.

#09398 JANE HAMMERSLOUGH – Contract Amount: \$68,400

Contract Period: 7/1/2017– 6/30/2018

The Contractor is a writer for the development of First 5 LA publications, including the quarterly Parenting Guide, online content, and other collateral print materials.

#09068 JULIA ANN JUSTUS DBA JUSTUS MCGINITY EXECUTIVE SEARCH – Contract Amount: \$74,400

Contract Period: 7/1/2017– 6/30/2018

The Consultant will conduct executive recruitment services for First 5 LA on an as needed basis throughout the 2015-2020 Strategic Plan period. The Consultant will complete the following for each recruitment: develop position description; develop marketing description and strategy for advertising position; conduct research and create prospect and source contact list; develop candidate dashboard; create and administer written assessment tool; create and administer oral presentation if needed; recommend final candidates; manage selection process; facilitate deliberation meeting; prepare reference report; and provide contract negotiation and onboarding recommendations.

#09408 SUSAN SMALLEY DBA SMALLEY CONSULTING GROUP – Contract Amount: \$65,000

Contract Period: 7/1/2017– 6/30/2018

#09328 TINA BARRY DBA BARRY CONSULTING GROUP – Contract Amount: \$65,000

Contract Period: 7/1/2017– 6/30/2018

First 5 LA launched an organization-wide training initiative for all its employees in 2016. The Consultants will provide organization-wide training to assist with professional development for the staff of First 5 LA. Smalley Consulting Group will conduct trainings on professional development, leadership development, and communication skills. Barry Consulting Group will conduct trainings on communication and business skills and leadership development. Staff anticipates that the training initiative will be carried out through June 30, 2020.

#09290 THE CENTER FOR THE STUDY OF SOCIAL POLICY – Contract Amount: \$50,875

Contract Period: 7/1/2017– 6/30/2018

Project DULCE (Developmental Understanding and Legal Collaboration for Everyone) incorporates the Strengthening Families intervention model into the pediatric health care setting in Los Angeles County. By providing various resources and support for new parents, the intervention will promote positive parenting and healthy development of children. The Contractor will continue to provide implementation guidance and coaching support at two Project DULCE sites.

#08396 THE WESTERN CENTER ON LAW AND POVERTY – Contract Amount: \$64,237

Contract Period: 7/1/2017– 3/18/2018

The Contractor advocates to strengthen CalWORKs and minimize the impact of proposals to reduce the CalWORKs program. CalWORKs is a public assistance program that provides cash aid and services to eligible families that have children in the home and is operated locally by county welfare departments. Qualifying families that apply receive money each month to help pay for housing, food, and other necessary expenses. In order to strengthen the CalWORKs program, the Contractor will work on behalf of mothers and children prenatal to five, living throughout Los Angeles County to reduce barriers, improve enrollment and expand access to home visits through this vital public assistance program.

#09579 TULSI CONSULTING – Contract Amount: \$69,600

Contract Period: 8/15/2017 – 12/8/2017

For the past seven years, First 5 LA has provided direct logistical and coordination support for the Best Start Community Partnerships, with the exception of the pilot community which was launched using a lead agency approach. First 5 LA selects, manages and pays all vendors, grantees, and contractors that provide support to the Best Start Community Partnerships. For that period, there have not been consistent business systems and processes to support that work. In order to address inefficiencies, increase productivity, and deliver higher quality support to the Partnerships and to the

broader Communities effort, the Communities Department is working to improve its business processes. The Consultant will work collaboratively with First 5 LA staff in the Communities Department to recommend which internal business processes and procedures require design or redesign and then undertake the redesign of the selected processes.

#09133 WHITCOMB W. HAYSLIP – Contract Amount: \$30,900

Contract Period: 2/24/2016– 12/31/2017

Help Me Grow (HMG) is a national framework intended to improve the early developmental delays and connect children to appropriate services as early as possible. First 5 LA adopted the HMG framework to achieve health-related system changes outcomes as outlined in the 2015-2020 Strategic Plan. The Consultant will provide technical assistance on the development of the Help Me Grow Los Angeles partnership and infrastructure related to the Early Care and Education sector.

Staff Contact: Junette Sheen (jsheen@first5la.org)

ATTACHMENT A



July 7, 2017

Dr. Michael Kirst, President
California State Board of Education
1430 N Street, Suite 5111
Sacramento, CA 95814

RE: Leveraging ESSA to integrate early learning into a clearly articulated P-12 system

Via email to sbe@cde.ca.gov

Dear President Kirst:

We write to offer our thanks and appreciation to the California State Board of Education (SBE) and the California Department of Education (CDE) in your efforts to develop our state’s plan for the Every Student Succeeds Act (ESSA). We also write to ask the Board to join us in recognizing the educational needs of our youngest children in California’s ESSA State Plan. Research is clear that a focus on early years is a catalyst for advancing the academic success of students and is associated with increased high school graduation and greater college and career readiness – positive results that benefit all. In this letter, we offer recommendations that would expand opportunities for early care and education (ECE) to play a more prominent role in the ESSA State Plan.

We appreciate how the current version of the State Plan recognizes the importance of school readiness and states that the state will “work to integrate early learning into a clearly articulated P-12 system” in its introduction. It is also encouraging to see that under Title 1, Part A: Access to Educators, School Conditions, and School Transitions, the State Plan recognizes the important work the state has done with the Preschool Learning Foundations and Curricular Frameworks, the Infant Toddler Learning and Development Foundations, and transitional kindergarten. We also agree with the references made to the important role of preschool in the migrant

services program, and the education of preschool-aged homeless children. Given the vital role early care and education plays in developing a strong foundation for educational success, we urge the state to embed ECE throughout the State Plan.

The current version of the federal ESSA provides a timely opportunity to optimize children's developmental and academic paths by supporting the alignment of the philosophies, goals and objectives of early learning and the K-12 system. Throughout the federal ESSA, 'preschool' or 'early learning' are referenced numerous times signifying its importance in achieving the goals of ESSA. This emphasis reflects current research on the strong significance of child development and learning during the early years as foundational for future success.ⁱ



Dual Language Learners (DLLs)/English Learners (ELs)ⁱⁱ make up 22% of California’s K-12 population, and represent 57% of children age zero to five.ⁱⁱⁱ Particularly for young DLLs whose development of their primary language is integral to their cognitive and socio-emotional development, the timing and appropriateness of instructional strategies have significant implications for their capacity to acquire English as a second language, their evolving sense of self, and their overall academic achievement.^{iv} With the recent passage of Proposition 58 that creates more opportunities for students to become bilingual and biliterate, ESSA presents an opportunity to strengthen the educational experiences of children who come from homes where English is not the primary language.

To ensure that the needs of our early learners, including DLLs, are met, we submit the following comments on the draft ESSA State Plan. These recommendations come from ideas and input that have been vetted by over 100 ECE stakeholders across the state and specifically show where ECE and DLLs can be incorporated into California's ESSA State Plan.

Across the State Plan

Building off the vision included in the introduction to “integrate early learning into a clearly articulated P-12 system”, we recommend including the specific “P-12” language across the State Plan, replacing the “K” in K-2, K-8, or K-12 with “P” to ensure consistency and affirm the state’s commitment to a robust and aligned “Preschool -12th grade” system. Integrating our youngest learners and ensuring they are elevated throughout the ESSA State Plan requires an intentional and systematic approach that begins with state and local data collection and reporting of preschool students.

Currently, California only collects data on kindergarten and transitional kindergarten (TK) enrollment within the California Basic Educational Data System (CBEDS). We recommend that the state articulates its plan for reporting the number and percent of preschool enrollments within CBEDS. ESSA requires that the State Educational Agency (SEA) report the number and percentage of students enrolled in all preschool programs, within the State report card.¹ Local educational agencies (LEAs) are also required to collect and report preschool enrollment data within their annual report card.² As the state and local communities continue to recognize the value of and expand access to high-quality early childhood supports, there is a critical need to establish systems that help identify existing gaps. By equipping LEAs with this key data point, districts will be better positioned to deploy resources in a manner that best meets student need and promotes their growth. We recommend that the state take steps to align local enrollment data practices with the previously mentioned CBEDS recommendation to capture the participation in district- or center-based early childhood programming within the district enrollment area.

¹ Sec 1111(h)(1)(C)(viii)(II)(aa)

² Sec 1111(h)(2)(C)

In Title I, Part A: Accountability

Section 1111, State Accountability: Collect and publicly report data on early learners, including chronic absenteeism and suspension rates, as soon as data are available.

Proposed Change: In Indicators (ESEA section 1111(c)(4)(B)), specifically (b) Indicator for Public Elementary and Secondary Schools that are Not High Schools (Other Academic Indicators) and (e) School Quality or Student Success Indicators, we recommend including clear references to early childhood education with regard to chronic absence and suspension rates and adding language about the need for early childhood indicators that are aligned to K-12.

The amended sections would read:

- (b) In the first paragraph, “Chronic absence will serve as an additional academic indicator for grades Preschool-8”, in place of K-8 in the current draft. In the second paragraph: “This indicator will be especially important for schools that only serve students in preschool, transitional kindergarten (TK), and kindergarten through 2nd grade (K-2)”, in place of grades K-2 in the current draft.
- (b) To add reference to ECE with regard to overall accountability, we recommend adding the following language: “California will explore the identification and inclusion of early childhood indicators in the state’s accountability plan that support, and are in alignment with, P-12 policies that support long-term student success.”
- (b) To support inclusion of ECE in the chronic absence section, we recommend adding the following rationale: “Studies reveal that chronic absence for 4-year-old students correlated with less kindergarten readiness, including lower letter recognition and pre-literacy scores, continued low attendance, increased grade retention by third grade, and on average had lower academic outcomes than peers with better attendance.^v Research shows that students who arrived at pre-K with the weakest reading skills and attended regularly saw the biggest gains.^{vii}”
- (e) We also recommend adding language on ECE with regard to suspension rates. The current draft shows that collection of this indicator exists only for elementary, middle, and high schools. Thus, this section would add the following language: “To ensure suspension rates are being addressed early, LEAs that operate ECE programs will also report on suspension rates for ECE programs.”

Rationale: In the current draft of the ESSA State Plan, there is no mention of indicators for our youngest learners in early childhood programs. We recommend that data be reported from “P-8,” particularly with regard to chronic absenteeism, to note the importance of enrollment in the early years and address achievement gaps that start from earlier on in the academic trajectory. Attending a high-quality early learning program has been shown to have important effects on students’ academic success in later years, from increased test scores in elementary school to reduced Special Education placement and higher graduation rates.^{vii} Signs that students will be chronically absent begin in the early grades,^{viii} making it all the more important to monitor chronic absence in the early years, when family engagement efforts tend to be most successful^{ix} and schools can prevent future disengagement.^x Suspension rates are also important to track for preschool students. The U.S. Department of Health and Human Services has issued a policy

statement for “preventing and severely limiting expulsion and suspension practices in early childhood settings,”^{xi} as research suggests preschool children are suspended and expelled at high rates^{xii} and this likely has a negative impact on academic attainment and other outcomes.^{xiii} Collecting and reporting data for LEA-based preschools could be a first step to reducing developmentally inappropriate school exclusion in the early years and aligning discipline policies for P-12.

In Title I, Part A: Assessments

Section 1111, Assessments: Ensure that preschool children are identified and assessed using authentic measures designed for those languages (rather than a direct translation of English assessments) that capture both first and second language development.

Proposed Change: In Native Language Assessments (ESEA section 1111(b)(2)(F) and 34 CFR § 200.6(f)(2)(ii)), we recommend inserting language to identify and assess English Learner students starting from preschool. Section (iii) provides space to indicate which assessments are not available and are needed. Following “In support of biliteracy” in the second paragraph of (iii), we recommend the following language, “Ensure that preschool students are identified and assessed using authentic formative and developmentally appropriate measures designed for those languages (rather than a direct translation of English assessments) that capture both first and second language development. Offer guidance on the flexibility LEAs have to partner with neighborhood early childhood providers to support articulation and alignment on assessments to support student transitions between early childhood and early elementary.”

Rationale: Research shows that children can learn multiple languages successfully and that the brain is most receptive to language learning in the earliest years of life.^{xiv} Sections (ii) and (iii) mention assessments for ELs in “grades three through eight and high school” without reference to early learners below grade three. As the State Plan aims to present an articulated “P-12 system,” we recommend explicit mention of assessments that are inclusive of students in preschool through grade 2. In section (ii), the State Plan states that “California is committed to providing reliable assessments in languages other than English based on the constructs being measured.” Ensuring that assessments are developmentally and linguistically appropriate is important particularly with regard to our DLLs/ELs: “It has been widely demonstrated that as a result of inadequate high stakes tests, emergent bilinguals experience more remedial instruction, greater probability of assignment to lower curriculum tracks, higher drop-out rates, poorer graduation rates, and disproportionate referral to special education classes.”^{xv} Moreover, assessments that capture “both first and second language development” is crucial as measuring language progress in the home language is important in the early years. For DLLs, their primary language is integral to their cognitive and socio-emotional development, and the timing and appropriateness of instructional strategies have significant implications for their capacity to acquire English as a second language, their evolving sense of self, and their overall academic achievement.^{xvi}

In Title I, Part A: Access to Educators, School Conditions, and School Transitions

Section 1111, School Conditions and School Transitions: Ensure integration of early learning into a clearly articulated system in school conditions and school transitions.

Proposed Change: In School Conditions (ESEA section 1111(g)(1)(C)), we recommend amending “K-8” to “P-8”. The section would read: “California’s strong commitment to the improvement of school conditions for student learning is further underscored by its selection of chronic absence as its additional P-8 academic measures under ESSA.”

Rationale: As mentioned above, addressing chronic absenteeism in early years is an important step towards addressing achievement gaps that start from early on in the academic trajectory. Signs that students will be chronically absent begin in the early grades,^{xvii} making it important to monitor chronic absence in preschool, when family engagement efforts tend to be most successful^{xviii} and schools can prevent future disengagement.^{xix} Chronic absenteeism in preschool has been correlated with lower school readiness and higher 3rd grade retention.^{xx} See rationale on page 3 for more research on this issue.

Explicitly acknowledge the importance of P-12 alignment by including preschool in the discussion of curriculum frameworks.

Proposed Change: In School Transitions (ESEA section 1111(g)(1)(D)), we recommend inserting consistent references to the importance of ECE and K-12 alignment. The amended section would read: “Curriculum frameworks include sections on content and pedagogy for each grade level, from preschool and transitional kindergarten through grade 12, to help LEAs develop or improve coherent educational programs between feeder and receiving schools.” As part of the description of what the state does to disseminate best practices, we recommend adding, “The state will also provide guidance and/or support LEAs and early childhood providers to build awareness on research-based pedagogical practice designed for our youngest learners, including dual language learners (DLLs), to support these transitions.”

Rationale: It is explicitly stated that the State will support LEAs receiving assistance under Title I, Part A “in meeting the needs of students at all levels of schooling”, which includes ECE. The second paragraph even explains the importance of California’s highly regarded ECE curriculum frameworks and how they are aligned with Common Core State Standards. Research shows that alignment of curricula is an important part of achieving the “successful transitions” from preschool to kindergarten highlighted in this section.^{xxi}

Identify articulation agreements between the preschools and transitional kindergarten as well as elementary, middle, and high schools.

Proposed Change: To ensure successful transitioning of students through their education continuum, we recommend including articulation agreements from earlier on in the academic trajectory. After the sentence, “The state is currently identifying articulation agreements that exist between our middle schools, high schools and colleges,” we recommend adding: “The state

will also identify articulation agreements between our preschools, transitional kindergartens, and elementary schools to ensure students have a strong educational foundation.” Moreover, we recommend clear guidance and support from the State regarding the use of funds to support alignment and articulation for P-12: “The state will incorporate clear guidance and/or prompts within the templates for the LEA Local Report Card, the Comprehensive Plan for Schoolwide Programs and the Local Control Accountability Plan (LCAP) to request information on how districts are investing federal (Title Funds, Head Start, etc.) and state (LCFF, State Preschool, etc.) dollars to more effectively integrate and align the early childhood and K-12 systems in their districts towards a P-12 system. This includes helping districts and schools more clearly articulate their plans to support, coordinate, and integrate early childhood programs that help promote the transition of students into local elementary school programs.”

Rationale: Articulation agreements between preschools and elementary schools are a hallmark of strong transition to kindergarten, which have been linked with higher test scores by first grade, teachers giving students more favorable ratings on social and emotional competencies, and faster skill development.^{xxii} Such articulation agreements can foster a common understanding of pedagogy in the early grades; identify opportunities for joint curriculum planning; and facilitate data sharing, such as kindergarten readiness assessment results.^{xxiii} LEAs receiving Title I funds are in fact *required* to develop agreements regarding these practices with Head Start programs.^{xxiv} For example, a Head Start program and an LEA might have a Memorandum of Understanding (MOU) that describes how it will align curriculum, define desired outcomes, and communicate about previous educational experience, such as participation in a dual language program.^{xxv} In order to facilitate successful transitions for *all* students, we recommend that the state encourage articulation agreements between elementary school and preschools.

Support school transitions through coordination and alignment of ECE and K-12 data systems and practices.

Proposed change: To promote a more coordinated approach to establishing high-quality early childhood systems, we recommend inserting the following language: “The state can lead the development of a model Memorandum of Understanding (MOU) and corresponding supports to meet the ESSA requirement for LEAs to develop agreements with Head Start agencies and other entities to carry out early childhood development programs.³ Specifically the state can address the development of systemic procedures for receiving and transferring records, establishing communication between schools staff and ECE counterparts including programs enrolled in California’s Quality Rating and Improvement System (QRIS), conducting meetings to discuss the developmental and other needs of individual children; organizing joint transition-related training, and linking educational services with services provided by local Head Start agencies. As transitional kindergarten (TK) sits at the intersection of early childhood education and early elementary, LEAs can leverage TK where possible to bring ECE and early elementary staff together to support alignment and transitions.”

³ Sec 1119(a-b)

We support the explicit language at the end of the section that highlights “successful student transitions from **pre-kindergarten** to postsecondary” and recommend inserting the following language at the end of the section: “The state will create a roadmap to guide LEAs in partnering with neighborhood preschool providers and provide examples of how LEAs can use district resources to increase access to early learning; extend professional development (PD) opportunities to early childhood educators for greater articulation and alignment with elementary teachers; provide PD for preschool and elementary educators focused on pedagogy and best practices in child development, supporting Dual Language Learners (DLLs) and parent and family engagement; and promote practices that supports students in the transition to kindergarten.”

Rationale: Purposeful transitions from preschool to kindergarten enhance linkages between families, preschools, and elementary schools during children’s early years of development. Emerging research suggests that strong transitions benefit children: from more favorable ratings from teachers on social competencies, faster skill development, to modest increases in academic achievement, with the largest benefits for children who are economically disadvantaged.^{xxvi} Keys part of successful transitions include aligned assessments, standards, and curriculum that are sequenced and coordinated between preschool and kindergarten; joint professional development between preschool and elementary staff; and strong communication between preschools and elementary schools, including data sharing.^{xxvii} Since LEAs and preschools often operate independently, LEAs would benefit from a roadmap that explains what is encouraged and required for their coordination with preschools. The state could facilitate the transfer of data such as preschool enrollment, chronic absenteeism, and suspension data, in addition to assessment results such as from the Desired Results Developmental Profile (DRDP).

We support the reference to coordination with preschools in the section on School Transitions.

Proposed change: We support how the State Plan explicitly notes the importance of alignment between California’s early education programs with the rest of the education system. To maintain the “P-12” language consistently across the plan that was used in the introduction, we recommend amending language to read, “California’s early education programs are administered by the CDE to ensure there is alignment across the P-12 system.”

Support: We support the mention of the nine domains of the “Preschool Learning Foundations” that closely align with the *California Infant/Toddler Learning and Development Foundations*, the California Content Standards, the Common Core State Standards, and the Head Start Child Development and Early Learning Framework. We also support how the mentioned publication will be used in Title I, Part A technical assistance to support LEAs in using these funds to “work with early education providers to support successful transitions from early childhood education to elementary school.” Finally, we applaud the explicit mention of “transitional kindergarten (TK)”, since TK can serve as the bridge between ECE and K-12.

In Title I, Part C: Education of Migratory Children

Section 1304, Education of Migratory Children: Supporting the needs of Migratory Children starting with early childhood education.

Support: In Supporting Needs of Migratory Children (ESEA section 1304(b)(1)), we support the explicit reference to “preschool migratory children” and “English learners” in the State Plan to ensure that the unique needs of our youngest migratory children are met.

Rationale: While ECE is important for all children, the benefits are greatest for low-income children and those who are DLLs.^{xxviii} Migrant youth are particularly likely to come from families that earn extremely low wages and are generally English Language Learners (ELL). What is more, they tend to live in substandard living conditions and are exposed to severe health risks.^{xxix} Ensuring that migratory children have access to high-quality ECE is all the more important.

In Title II, Part A: Supporting Effective Instruction

Section 2101, Supporting Effective Instruction: Provide state support for the development of bilingual teachers, including those who teach ECE, to align with the need created after passage of Proposition 58.

Proposed Change: In System of Certification and Licensing (ESEA section 2101(d)(2)(B)), we recommend inserting the following language to elaborate on the licensing and credential for the above listed teachers: “The state will encourage districts to use Title II funds for language certification of teachers to align with Proposition 58 workforce needs and to update and align certification and licensing standards for early childhood educators.”

Rationale: The passage of Proposition 58 in 2016 removed restrictions on bilingual education programs, allowing districts to more easily create or expand bilingual and immersion programs. Teachers in bilingual programs must be pedagogically skilled to support language acquisition and academic content mastery. The state currently faces bilingual teacher shortages, however, and few teacher preparation institutes offer bilingual authorization training programs.^{xxx} California authorizes fewer than half the number of new bilingual teachers than it did when bilingual education was at its peak in the mid-1990s.^{xxxi} Shortages of bilingual teachers are particularly important for ECE, since bilingual programs are often offered in the early grades, when children’s language development is occurring most rapidly. Neuroscience shows that the brain is most receptive to language learning in the earliest years of life and that a child’s home language is central to socio-emotional development, the development of English proficiency, and overall academic achievement.^{xxxii}

Provide joint-professional development among preschool and K-3rd grade educators and include center and school administrators to emphasize the social-emotional developmental and educational needs of early learners, including DLLs.

Proposed Change: In Improving Skills of Educators (ESEA section 2101(d)(2)(J)), we recommend including an explicit reference to the ECE workforce. The amended section would read:

“Successful implementation of standards requires strong instructional leadership in every school and well-prepared teachers in every classroom, including preschool classrooms.” In the section that outlines that Title II Part A funds are available to support the dissemination and implementation of SBE adopted standards using a variety of strategies, we recommended that these strategies include “Joint-professional development among preschool and K-3rd grade educators, including center and school administrators, to emphasize the social-emotional and educational needs of early learners, including DLLs.”

Rationale: Although ESSA explicitly allows for Title funding to be spent on ECE, California’s State Plan currently refers only to K-12 teachers and administrators. High quality professional learning is critical for ensuring quality teaching.^{xxxiii} Early learning educators, however, are often left out of professional development opportunities, even when located on the same campus as K-12 teachers. High quality teaching is critical to ensuring that preschool investments pay off,^{xxxiv} and investment in professional development is one way of ensuring this quality. Including early educators in elementary school professional development can ensure that children transition smoothly from preschool to kindergarten, one of the goals that the state sets forth in the plan. Collaboration between preschool and elementary school teachers is a hallmark of good transitions that has been linked with higher test scores by first grade, more favorable ratings of children’s social and emotional competencies, and faster skill development.^{xxxv} This cooperation might include kindergarten teachers visiting preschool classrooms, joint curriculum planning, and discussion of kindergarten readiness assessment results.^{xxxvi}

Encourage the use of Title II funds to develop both elementary school principals and ECE administrators’ understanding of effective teaching practices that support young children, including DLLs.

Proposed Change: Amend the section “Support for School Leaders” by adding the following underlined language: “Activities may include [...] engagement of K–12 principals, ECE program directors, and other school leaders, achieved through collegially selected topics of high interest (e.g., development of cultural competency, instructional support for early learners, and access to instructional resources) and professional learning opportunities; and strategies that establish and support distributed or shared leadership at the school site that include teacher leaders along with site administrators in communities of practice, supportive infrastructure, and adequate time for the work to unfold.”

Rationale: Although elementary school principals are often in charge of early learning programs, and are responsible for supporting and evaluating teachers in TK and state preschool, most have little training or professional development in ECE.^{xxxvii} Ensuring that these educators have an up-to-date understanding of child development and early language development is critical if they are to be effective instructional leaders for all children, including young children who arrive at school with little English. Joint PD would also be particularly helpful for ECE site directors who, like ECE teachers, too infrequently participate in school-site professional learning.

Ensure that professional development is culturally and linguistically responsive, particularly for staff that serve the families of ELLs and DLLs.

Proposed Change: We recommend encouraging professional development that is culturally and linguistically responsive for our DLLs and ELs by adding the following language to section 2101(d)(2)(J): “Encourage the use of funds for professional development for staff that advances parent and family engagement, particularly for families of DLLs, which should include research-based engagement practices, such as examining the best engagement practices related to family literacy models, family album and writing workshops of early childhood education providers.” _

Rationale: Positive family-program connections have been linked to greater academic motivation, grade promotion, and socio-emotional skills across all types of young children, including those from diverse ethnic and socioeconomic backgrounds. Research finds that high levels of family engagement often result from strong program-family partnerships characterized by trust, shared values, ongoing communication, mutual respect, and attention to the child’s well-being.^{xxxviii} Family engagement is a skill that educators can improve through professional development.

In Title III, Part A, Subpart 1: English Language Acquisition and Language Enhancement

Section 3111, English Language Acquisition and Language Enhancement: Identify and disseminate information to LEAs and preschool providers about models and approaches of best practices, including dual immersion programs and family and community engagement strategies that support DLLs from preschool through 3rd grade (P-3).

Proposed Change: In the section on Support for English Learner Progress (ESEA section 3113(b)(6)), we recommend inserting language to elaborate on the “systems of support” that would provide assistance to LEAs to ensure that students meet English language proficiency and academic standards. The amended section would include the following language:

- “Initiate new preschool classrooms at school sites with the highest percentage of ELs to develop models for supporting young DLLs.”;
- “Invest in both pre-service and in-service for P-3rd grade teacher education that advances the knowledge and pedagogical practice of DLLs.”;
- “Allot funds that specifically support the best practices for the transition of DLLs from preschool to elementary school. Also earmark a portion of funds to support the transition practices of preschool providers.”;
- “Identify and disseminate information to LEAs and preschool providers about models and approaches of best practices, including dual immersion programs, and family and community engagement strategies that support DLLs from prekindergarten level through 3rd grade (P-3)”; and
- “Create a toolkit to distribute to P-12 to support programs that outline messaging and strategies for families on the benefits and value of the home language, with clearly defined child outcomes. Also, to be included is an outline of existing language program approaches and differences to support family engagement and transition practices.” _

Rationale: It is important to include systems of support for DLLs/ELs from the beginning of their academic trajectory to close on achievement gaps. A vast body of research shows that children who attend high-quality preschool programs: perform better on standardized tests in reading and math; are less likely to be placed in special education or held back a grade; and are more likely to graduate from high school and attend college.^{xxix} Studies show that these outcomes can lead to substantial cost savings for school districts and that DLLs may benefit more relative to their monolingual peers as early learning addresses the educational opportunity gaps present prior to school entrance.^{xl} Research over the past two decades has shown that: the brain is most receptive to language learning in the earliest years of life; children are not confused by learning multiple languages, rather, the brain is wired to learn any language,^{xli} and home language is central to developing proficiency in English and other languages, as well as their cognitive and socio-emotional development, their evolving sense of self, and overall academic achievement.^{xlii} It is imperative that educators are supported to get caught up on the current research, pedagogy and best practices for effective instruction of DLLs/ELs, as well as ensuring instruction in bilingual classrooms supports bilingualism and biliteracy.

In Education for Homeless Children and Youth Program, McKinney-Vento Homeless Assistance Act, Title VII, Subtitle B

Section 722 of the McKinney-Vento Act Education for Homeless Children and Youth Program:
Supporting preschool aged students via coordinating with early childhood programs.

Support: We support inclusion of “preschool-age students” in the section for Support for School Personnel (722(g)(1)(D) of the McKinney-Vento Act) and repeated emphasis on the need to serve “preschool” children in the context of homelessness in Access to Services (722(g)(1)(F) of the McKinney-Vento Act). We support the explicit mention that CDE will continue to coordinate with Head Start and Early Head Start to meet the needs of “homeless preschoolers”.

Rationale: Homelessness is linked with a host of negative impacts for young children, including poor social and emotional development, academic performance, and health.^{xliii} Homeless children are also less likely than their peers to be enrolled in an ECE program.^{xliiv} Emphasizing the enrollment of preschool children in ECE is therefore an important step to ensuring that vulnerable young children have access to the nurturing environments they need to thrive.

California Practitioners Advisory Group (CPAG)

Ensure that ongoing changes to California’s accountability and continuous improvement system take into account the needs of early learners, including Dual Language Learners.

Recommendation: Add a member to the California Practitioners Advisory Group (CPAG) that represents early childhood education and Dual Language Learner education and understands the differing perspectives for early education and K-12.

Rationale: The final regulations on the ESSA Accountability and State Plan include a stipulation that early childhood educators are to be included in the list of mandatory stakeholders with

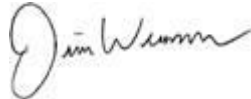
whom the state should consult regarding its plans. In section (iv)(b), the California Practitioners Advisory Group (CPAG) is mentioned as a group that CDE regularly meets to provide updates and receive feedback. Dual language learners/English learners are 22% of California's K-12 population and represent 57% of children age birth to five. A representative is needed that understands early childhood education and Dual Language Learner education.

Both ESSA and LCFF offer important opportunities to strengthen the alignment and integration of early childhood and the larger public school system and bring a much needed focus to best serving the large population of DLLs/ELs. We recommend that the State Plan takes these opportunities by explicitly including the above recommendations within the final version of the ESSA State Plan. This direction in the State Plan would maximize the gains and investments possible in the early childhood years and support the academic trajectory of our students with the result of increased high school graduation and college and career readiness for all California's students.

Respectfully,



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Director of Education Equity
Advancement Project California



Jim Wunderman
President & CEO
Bay Area Council



Christopher Maricle
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Tom Torlakson, State Superintendent of Public Instruction, CDE
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ⁱ Yoshikawa, H., Weiland, C., Brooks-Gunn, J., Burchinal, M., Espinosa, L., Gormley, W. T., Ludwig, J., Magnuson, K., Phillips, D., & Zaslow, M (October, 2013) *Investing in Our Future: The Evidence Base on Preschool*, Society for Research in Child Development, Washington, D.C.

ⁱⁱ **Dual Language Learners** (DLLs) are children learning two (or more) languages at the same time, as well as those learning a second language while continuing to develop their first (or home) language. **English Learners** (ELs) are children who are in the process of actively acquiring English and whose primary language is one other than English. Experts focused on child development from birth to five utilize the term DLL and the EL term is more commonly used in the K-12 system. These terms are used interchangeably in this document.

ⁱⁱⁱ First 5 CA. (2016). Dual language learner pilot. Sacramento, CA. Retrived from:
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August 22, 2017

CA Assembly Blue Ribbon Commission
on Early Childhood Education
State Capitol, Room 219
Sacramento, CA 95814

Dear Co-Chairs Garcia and McCarty:

On behalf of First 5, we are pleased to provide our recommendations to guide the California Assembly Blue Ribbon Commission on Early Childhood Education (BRC)'s work to improve the early learning system for California's youngest children and their families.

We are encouraged by the creation and convening of the BRC and the opportunity to lay out a long-term, holistic vision for a high-quality early care and education (ECE) system in California. We encourage this Commission to be bold and visionary in building a comprehensive ECE system that meets the diverse needs of our state's infants, preschoolers, and school-age children as well as working parents.

With this task before you, First 5 is ready to partner and support your work. In that spirit, we recommend a set of core principles that your Commission should consider when creating a concrete vision of a comprehensive child care and expanded learning system. These principles promote a child-centered approach to care that prioritizes three critical, fundamentally linked areas: access, affordability, and quality.

Core Principles:

Develop a family access vision that addresses California's diverse population:

- Design a scaffolded plan of action to achieve the goal of increased access.
- Protect and enhance a mixed delivery system that includes Local Educational Agencies (LEAs) and community-based providers to meet the needs of working families.

Address affordability issues for both families and providers:

- Provide a stable and meaningful level of per child funding tied to the market rate of care so it is affordable to families and providers can continue to stay in business. This is critical since child care providers are often small business owners. In addition, ECE programs provide critical economic value to the state by allowing parents to stay in the workforce and benefitting

employers because of reduced employee absenteeism.

Protect and encourage quality that maximizes the P-12 system potential:

- Create a system with a comprehensive age scope consisting of infants, toddlers, preschoolers, and school-age children. In line with this goal, the system should protect and maximize the Average Daily Attendance (ADA) funding generated by Transitional Kindergarten (TK) and Expanded Transitional Kindergarten (ETK).
- Recognize quality as a key pillar of ECE to address school readiness and the opportunity gaps that emerge in early childhood and utilize an educational equity lens to target the most vulnerable students.

Recognize the critical role of family engagement in child development:

- Encourage parent participation in all early learning environments. Provide opportunities for regular communication between child care providers and parents regarding a child’s developmental, social-emotional, and family strengthening needs.
- Align and link ECE programs with comprehensive child and family support systems, especially to Medi-Cal funded services essential to a child’s healthy development.
- Coordinate care and leverage existing child and family support services to ensure scarce resources for ECE are spent wisely and to meet the needs of the “whole-child”.

In line with the core principles, we identified the following model components of a high quality early learning system:

Expanded access to ensure a system that works efficiently for children, families and providers:

- Streamlined child care eligibility requirements across all ECE programs to simplify the process for families seeking care, with a “No Wrong Door System” for family intake.
- A statewide consumer education database that includes an integrated child care data system which links together the Centralized Eligibility List (CEL), child-level data, and quality of care information.
- Business tax incentives and other mechanisms to support small ECE business owners and to help reduce the cost burden on providers and families, especially since the majority of CA families, including working and middle-class, pay a high percentage of their take home pay on child care.

Build and develop the ECE workforce pipeline:

- ECE career pathways, professional development opportunities, and adequate compensation.
- Articulation and coordination between the ECE system and K-12 education.
- Streamlined quality standards incorporating Quality Rating Improvement System (QRIS) elements and a requirement for ECE programs, including TK, to offer age and developmentally appropriate activities.

Improve affordability for families and providers:

- Rate reform that provides adequate funding per child served. The rate reform proposal will also have embedded protections during economic downturns as well as funding growth tied to the cost of care, the unmet need for care, and the regional cost of living across California.
- Optimized public/private partnerships to lower costs and to afford families the flexibility to choose among a wide range of child care providers and services. This enables parents working non-traditional hours access to care.
- Financial incentives across ECE provider settings for participation in the QRIS and achieving and maintaining high QRIS ratings.

Address the needs of the whole child:

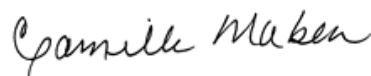
- Accountability measures to determine child learning outcomes.
- Adequate supports for the special needs of at-risk populations, including foster care youth, child welfare youth, and Dual Language Learners.
- Linkages between ECE programs and necessary health (developmental, mental, oral, and other health services) and family strengthening systems (home visiting, evidenced-based parent education, etc.).
- Continued trauma-informed training for child care professionals to support the diverse and complex needs of children and families.

We look forward to working with you as the BRC puts a plan forward for a long-term, holistic vision for a high-quality early learning and care system in California. We encourage your visionary leadership in this process to ensure that our youngest children and working families have access to quality, affordable early care and education opportunities.

Sincerely,



Kim Belshé
Executive Director
First 5 LA



Camille Maben
Executive Director
First 5 California



Moira Kenney, PhD
Executive Director
First 5 Association

Cc: Members, Blue Ribbon Commission on Early Childhood Education

Gail Gronert, Policy Consultant, Speaker's Office

Stacey Reardon, Policy Consultant, Speaker's Office



PR17-14

Embargoed Until Release
September 13, 2017

Contact: Marlene Fitzsimmons
(213) 482-7807

First 5 LA Invests In Key Early Care and Education Policy and Advocacy Partnerships

Five-Year, \$15 Million Investment Will Strengthen Existing Policy and Advocacy Efforts to Expand and Improve Early Learning Opportunities for L.A. County’s Children

LOS ANGELES – Expanding its leadership in advocacy efforts for young children, First 5 LA today announced the launch of its five-year, \$15 million Early Care and Education Policy and Advocacy Fund (PAF). The fund was created to strengthen existing advocacy efforts and help create new opportunities for collaboration among groups and organizations seeking policy and systems change with a goal of improving access to quality early care and education in Los Angeles County.

“The challenges parents face accessing quality early care and education is greater than any one organization alone can address,” said Kim Belshé, Executive Director of First 5 LA. “The First 5 LA Policy and Advocacy Fund is representative of our strategic shift focusing on changing policies and systems. We are leading with partnership to address these challenges. Our goal is to make a greater impact for all of L.A. County’s 650,000 young children and their families.”

A recently released [assessment](#) underscores the urgency of addressing this issue. L.A. County parents may pay nearly half their income in early care and education costs and many struggle with a shortage of infant and toddler care. In fact, licensed centers and family care homes in L.A. County only have the capacity to serve 13 percent of working parents with infants and toddlers, according to the assessment.

“Los Angeles is ground zero for both the achievement gap and the opportunity gap. Together with this diverse group of grantees – from the early learning and child care, civil rights and business sectors – we can build the policies and platform to ensure that LA’s kids get a fair shot at success,” said Kim Pattillo Brownson, Vice President of Policy & Strategy at First 5 LA.

Initial grantees from the fund are [Advancement Project California](#), a partnership of [the Child Care Alliance of Los Angeles](#) and its two largest members, [Crystal Stairs](#) and the [Child Care Resource Center](#), [Children Now](#), [Early Edge](#), [LAUP](#) and [Los Angeles Chamber of Commerce Foundation](#).

This investment will help expand grantees’ overall capacity to engage in long-term policy and advocacy work, including policy analysis and educating policy makers on the need to address persistent gaps in quality and access to subsidized care, and professionalizing the early education workforce.

“This investment is focused on building support on a ground level through persistent boots-on-the-ground advocacy work aimed at achieving long-lasting systems change to benefit today’s children and future generations,” continued Pattillo Brownson.

First 5 LA has selected Community Partners as an intermediary, to further support the focus on outcomes, capacity building at the organizational and field level, and partnership. First 5 LA is working with Community Partners to support and coordinate this fund. They will help organizations identify ways to align and complement policy agendas, share information and seize emerging opportunities.

(MORE)

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EXECUTIVE DIRECTOR

Kim Belshé

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First 5 LA Invests in Key Early Care and Education Policy and Advocacy Partnerships – page 2

“This Fund has the potential to be a catalyst that will strengthen and unify our advocacy efforts on behalf of working parents and their children,” said Cristina Alvarado, Executive Director at Child Care Alliance of Los Angeles. “First 5 LA’s contribution exemplifies the spirit of collaboration and commitment to advance our common mission to strengthen families and continue to raise the quality and access of child care and early learning programs across Los Angeles.”

For more information on the Early Care and Education Policy and Advocacy Fund and to learn more about the work of each grantee, visit <http://www.first5la.org/index.php?r=site/article&id=3067>.

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PR13-17

Embargoed Until Release
September 11, 2017

Contact: Marlene Fitzsimmons
(213) 482-7807

First 5 LA Addresses Impact of Immigration Fears on Young Children

Pledges to Work with Organizations to Help Parents Understand their Rights to Receive Services for Their Young Children

LOS ANGELES – Parents are pulling their kids out of preschool and refusing health services their children are legally eligible to receive, First 5 LA has learned from its network of early care and education providers, parent leaders and community groups. Parents’ fear of detention and deportation has been heightened by recent actions by the federal government and has become a priority issue affecting young children and their families throughout Los Angeles County.

“Against the backdrop of recent immigration announcements from Washington, we know that both parents and children are struggling and this impacts L.A. County’s kids and families. All families, including immigrant families, have a right to engage with the public systems that exist to serve their health, education and caregiving needs,” said Kim Belshé, Executive Director of First 5 LA. “Our commitment is to strengthen all families and improve outcomes for all children. That’s why we are taking several steps in partnership with others to help parents understand their continued rights to receive services for their young children. Here in Los Angeles, we stand up for kids.”

One in six California children has at least one parent residing in the U.S. unlawfully from either an expired visa or illegal border crossing, according to the Migration Policy Institute. And a [recent study](#) by the Center for American Progress estimates there are approximately 200,000 children who are U.S. citizens with parents who receive Deferred Action for Childhood Arrivals (DACA) protections.

“Children born in the U.S. are citizens eligible for access to early education programs and health care services,” said Sandra Gutierrez, Founder and National Director of Abriendo Puertas/Opening Doors. “What we have seen in L.A. County is parents choosing not to take their young children to school or use vital services because of immigration fears. It is disheartening to consider the long-term effects these fears will have on our children’s future, and it is important to address the impacts locally.”

According to The Children’s Partnership and California Immigration Policy Center, immigrant families already faced barriers to enrolling in programs and accessing services for their children before the Trump Administration’s actions. Parents often do not apply because they fear that enrolling a child in public programs could affect their application for legal status or could allow personal information to be shared with immigration authorities.

Recognizing the short and long-term effects on young children, today First 5 LA announced several steps it is taking to address the impact of immigration fears on young children, including:

- Joining 200 philanthropic institutions representing local, state, regional and national foundations from across the country by signing the bipartisan Grantmakers Concerned with Immigrants and Refugees (GCIR) [Joint Statement](#).

(MORE)

COMMISSIONERS

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Brandon Nichols Jonathan E. Sherin, M.D., Ph.D. Romalis J. Taylor Marlene Zepeda, Ph.D.
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First 5 LA Addresses Impact of Immigration Fears on Young Children – page 2

- Contributing to a project led by the California Community Foundation to ensure organizations serving young children and their families (early care and education providers, home visitors, WIC staff) have the necessary information to reassure clients about protection of their information and the importance of continuing to utilize the public resources available to their families.
- Joining First 5 Commissions across the state to distribute a helpful resource guide titled, “Care, Cope, Connect” developed by Sesame Street Workshop to help parents initiate conversations with their children about community stress and separation.
- Exploring, through its *Best Start Communities* effort, partnerships with trusted community-based organizations to help them better respond to the needs of the immigrant community with their existing resources. These organizations are not immigration rights or legal providers, but in their daily interaction with the immigrant community, these groups are often asked to provide additional resources and information.
- Examining what role First 5 LA can play in providing adequate outreach and response to support the upcoming 2020 Census. The data gathered by the Census is critical to First 5 LA’s current and future programming and planning efforts.

To read the Joint Foundation Statement on Immigration, visit www.gcir.org/joint-foundation-statement-immigration. To download the PDF version of the “Care, Cope, Connect” resource guide, visit <http://www.first5la.org/parenting/articles/immigration-resources/>.

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ABOUT FIRST 5 LA

First 5 LA is a leading early childhood advocacy and public grantmaking organization created by California voters to invest Proposition 10 tobacco tax revenues in Los Angeles County. In partnership with others, First 5 LA strengthens families, communities, and systems of services and supports so that all children in L.A. County enter kindergarten ready to succeed in school and life. Please visit www.first5la.org for more information.

MEMORANDUM

to: Honorable Chair and Members of the Board
cc: Kim Belshé, Executive Director
from: Craig A. Steele
date: September 14, 2017
subject: Request for Authorization to Destroy Records Pursuant to the First 5 LA's Records Retention Policy

State law requires local public agencies like First 5 LA to retain all records of the agency for a minimum of two years, and then permits the destruction of obsolete records pursuant to a written records retention schedule. In many cases certain specified records, such as the minutes and agendas of the agency, records relating to real property, financial audit records, contracts and personnel records, must be retained for longer periods, or even permanently. An efficient records retention and destruction system, in compliance with applicable law, is essential to the operation of the organization since records are expensive and cumbersome to maintain when they are past their useful life. While this has been an annual project for the staff in past years, for various reasons, First 5 LA has not undertaken a full records destruction since prior to 2012.

The Board has previously adopted a records retention schedule in compliance with applicable law. Prior to the destruction of any record, the policy and State law require the approval of Legal Counsel, the Executive Director and the Commission. Ms. Belshé and I have approved a records destruction request from John Carroll, Records Retention Manager. These records are obsolete, no longer needed for any First 5 LA business, and permitted to be destroyed by applicable law and the Board's Records Retention Policy. The records proposed to be destroyed are described on the attached spread sheet, listing specific files, dates, and the time period that the Records Retention Policy requires those records to be kept. All records proposed to be destroyed are past their required retention periods.

RECOMMENDATION

Staff recommends that the Board approve the destruction of the document files listed on the attached spreadsheet, which are no longer needed for current business or for historical records. If the Board concurs with this request, the appropriate motion would be to approve the destruction of the First 5 LA records listed in compliance with First 5 LA's Records Retention Policy.

Memo

To: Kim Belshé, Executive Director
Craig Steele, Esq.

From: John Carroll, CRM, CDIA+, Records Retention Manager

Date: September 1, 2017

Copies To:

Subject: **Request to Destroy Documents after Commission Approval**

Pursuant to California State Law and First 5 LA's Records Retention Policy (Approved November 12, 2015) I am requesting your approval of the following list of documents (please see attachment for list of documents) to be destroyed. Please sign in the space provided below authorizing the destruction.

APPROVED

Kim Belshé, Executive Director	Date	Craig Steele, Esq.	Date
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F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
1	FINANCE		EVALUATION REPORTS - LODESTAR, UNIVERSITY OF NORTH CAROLINA) (GRANTEES FINANCIAL AUDIT REPORTS		P	07/01/13	7 YEARS		OFFSITE STORAGE
			GRANTEES FINANCIAL AUDIT REPORTS						
			PROPOSALS: CHILD CARE CENTER, UNIVERSAL PRE-SCHOOL, *MIP ADVANTAGE (ACCOUNTING SYSTEM), *WARM LINE - AFSA DATA CORP.						
2	FINANCE		UNION STATION - PROPERTY PROJECT		P	07/01/13	7 YEARS		OFFSITE STORAGE
			BEAUDRY LEASE						
			GRANTEES ORIENTATION PACKAGE						
3	FINANCE		GENERAL LEDGER- INCEPTION TO 6/30/2000 PLUS FINANCIAL STATEMENTS		P	07/01/10	7 YEARS		OFFSITE STORAGE
			GENERAL LEDGER 7/1/2000 - 6/30/2001 PLUS FINANCIAL STATEMENTS						
			GENERAL LEDGER 7/01/2003 - 12/20/2003 PLUS FINANCIAL STATEMENTS						
4	FINANCE		COPIES OF CHECKS APRIL - JUNE 2006		P	07/01/13	7 YEARS		OFFSITE STORAGE
			BANK REGISTERS FY 05-06						
5	FINANCE		IMPREST FY 05-06		P	07/01/16	7 YEARS		OFFSITE STORAGE
			COPIES OF CHECKS JULY - DECEMBER 2006						
6	FINANCE		FY 05 -06 JOURNAL ENTRIES		P	07/01/16	7 YEARS		OFFSITE STORAGE
7	FINANCE		PR FY 05 - 06		P	07/01/16			OFFSITE STORAGE
8	FINANCE		FY 2005 - 2006 RECONCILIATION JUL 05-JUN 06		P	07/01/16	7 YEARS		OFFSITE STORAGE
			2005 -2006 FINANCIAL STATEMENTS (JUL - DEC 05)						
			2005 -2006 FINANCIAL STATEMENTS (JAN - JUN 06)						
			2004 - 2005 FAMILY LITERACY YEAR 3 BUDGET						
			2003 - 2004 FINANCIAL STATEMENTS & SCHEDULES						
			2005 - 2006 LAUP BUDGET FY 05-06						
			2005 - 2006 LAUP REPORT - 2005						
			2004 -2005 LAUP AGREEMENT - 2004						
			2005 - 2006 TENANT IMPROVEMENT CONTRACT COPY						
			2002 - 2003 FAMILY LITERACY YEAR 1 BUDGET						
			2003 - 2004 FAMILY LITERACY YEAR 2 BUDGET						
9	FINANCE		GENERAL LEDGER & FINANCIAL STATEMENTS FY03-04 OCTOBER-DECEMBER		P	07/01/14	7 YEARS		OFFSITE STORAGE
			GENERAL LEDGER & FINANCIAL STATEMENTS FY03-04 JULY-SEPT.						
			GENERAL LEDGER & FINANCIAL STATEMENTS FY03-04 JAN-MARCH						
10	FINANCE		AP FILES FY 06 -07 U-Z		P	07/01/17	7 YEARS		OFFSITE STORAGE
11	FINANCE		PR FY 04-05		P	07/01/17	7 YEARS		OFFSITE STORAGE
			PR JULY - SEPT 05						
12	FINANCE		FY 04-05 & 05-06:		P	07/01/16	7 YEARS		OFFSITE STORAGE
			NEXCARE						
			KAREN HILL-SCOTT						
13	FINANCE		KCET		P	07/01/17	7 YEARS		OFFSITE STORAGE
			A/P FILES FY 06/07 211 LA COUNTY - BAK						
14	FINANCE		A/P FILES - FY 04/05 & FY 05/06:		P	07/01/17	7 YEARS		OFFSITE STORAGE
			DREW CHILD DEVELOPMENT						
			LOS ANGELES GAY & LESBIAN COMMUNITY SVRS.						
			FY 04/05 HEALTHY BIRTH FINANCIAL STATEMENTS						
			FY 05/06 COUNTY REPORTS						
			FY 05/06 FAMILY LITERACY INITIATIVE EXPANSION						
	FY06/07 FAMILY LITERACY BUDGETS								

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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15	FINANCE		WORKING FILES FROM: ANOTHY BELLANCA, FINANCE DIRECTOR (A-BELLANES BOXES 11)		P	07/01/17	Hold to review Anothy Bellance Files		OFFSITE STORAGE
			FY 05/06 BUDGET						
			FY 06/07/ BUDGET						
16	FINANCE		FY 07/08 A/P FILES - BUSINESS PRODUCTS DISTRIBUTORS ONLY		P	07/01/17	7 YEARS		OFFSITE STORAGE
17		00515	INTERCOMMUNITY CHILD GUIDANCE CENTER	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00516	INTERNATIONAL INSTITUTE OF LOS ANGELES	07/01/07 - 06/30/08					
		00517	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00518	MOUNTAIN VIEW SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00519	PARA LOS NINOS	07/01/07 - 06/30/08					
18		00230	CATHOLIC HEALTHCARE WEST SOUTHERN CALIFORNIA (DBA CALIFORNIA HOSPITAL MEDICAL CENTER)	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00231	LAWNDALE ELEMENTARY SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00232	LENNOX SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00234	NORWALK-LA MIRADA UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00234	VAUGHN NEXT CENTURY LEARNING CENTER	07/01/07 - 06/30/08					
19		00241	CHILDREN'S BUREAU	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00517	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00518	MOUNTAIN VIEW SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00519	PARA LOS NINOS	07/01/08 - 06/30/09					
		00520	PARAMOUNT UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00522	POMONA UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00526	WESTSIDE CHILDREN'S CENTER	07/01/08 - 06/30/09					
20		00527	LAUSD - WILMINGTON PARK	07/01/08 - 06/30/09	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00690	LAUSD - LOCKE 90002	07/01/08 - 06/30/09					
		00502	LAUSD - TENTH STREET	07/01/07 - 06/30/08					
		00503	CHILDREN'S CENTER OF THE ANTELOPE VALLEY	07/01/07 - 06/30/08					
		00504	BELLFLOWER CHILDREN'S CENTER, INC.	07/01/07 - 06/30/08					
21		00505	BIENVENDIOS CHILDREN'S CENTER, INC.	07/01/07 - 06/30/08	P	07/01/13	4 YEARS		OFFSITE STORAGE
		00507	CHILD & FAMILY GUIDANCE CENTER	07/01/07 - 06/30/08					
		00508	CHILD CARE RESOURCE CENTER	07/01/07 - 06/30/08					
		00688	SPIRITT FAMILY SERVICES	07/01/08 - 06/30/09					
		00687	SHIELDS FOR FAMILIES	07/01/08 - 06/30/09					
		00686	SAINT JOHN'S CHILD & FAMILY DEV CENTER	07/01/08 - 06/30/09					
		00685	PARA LOS NINOS	07/01/08 - 06/30/09					
		00684	SOUTH BAY CENTER FOR COUNSELING	07/01/08 - 06/30/09					
		00683	THE CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	07/01/08 - 06/30/09					
		00682	BIENVENIDOS CHILDREN'S CENTER	07/01/08 - 06/30/09					
		00707	LONG BEACH DAY NURSERY	07/01/08 - 06/30/09					
		00708	MOTHER'S CLUB COMMUNITY CENTER	07/01/08 - 06/30/09					
		00709	PARA LOS NINOS	07/01/08 - 06/30/09					
		00710	WESTSIDE CHILDREN'S CENTER	07/01/08 - 06/30/09					
		00712	LA BEST BABIES NETWORK/CATHOLIC HEALTHCARE WEST	07/01/08 - 06/30/09					
		00713	LOS ANGELES GAY AND LESBIAN COMM SERVICES CENTER	07/01/08 - 06/30/09					
		00700	COMMUNITY HEALTH ALLIANCE	07/01/08 - 06/30/09					
		00701	BIENVENIDOS CHILDREN'S CENTER	07/01/08 - 06/30/09					
		00702	CATHOLIC HEALTHCARE WEST/CA HOSPITAL MED CTR	07/01/08 - 06/30/09					
		00703	CONNECTIONS FOR CHILDREN	07/01/08 - 06/30/09					
00704	FOOTHILL FAMILY SERVICES	07/01/08 - 06/30/09							
00705	FRIENDS OF THE FAMILY	07/01/08 - 06/30/09							
00706	INMED PARTNERSHIPS FOR CHILDREN	07/01/08 - 06/30/09							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
22		05531	CHILDREN'S PLANNING COUNCIL (PROGRESS REPORT)	2005 2006	P	07/01/12	4 YEARS		OFFSITE STORAGE
		05531	CHILDREN'S PLANNING COUNCIL (PROGRESS REPORT)	2005 2006					
		05531	CHILDREN'S PLANNING COUNCIL (PROGRESS REPORT)	2005 2006					
		05531	CHILDREN'S PLANNING COUNCIL (PROGRESS REPORT)	2005 2006					
23	FINANCE	06756	LOS ANGELES UNIVERSAL PRESCHOOL	09/13/04 - 06/30/06	P	06/30/16	4 YEARS		OFFSITE STORAGE
		06756	LOS ANGELES UNIVERSAL PRESCHOOL	07/01/06 - 06/30/07					
		06756	LOS ANGELES UNIVERSAL PRESCHOOL (QUARTERLY REPORTS - Q1, Q2, Q3)	07/01/06 - 06/30/07					
		06756	LOS ANGELES UNIVERSAL PRESCHOOL (QUARTERLY REPORTS - Q4)	07/01/06 - 06/30/07					
		06756	LOS ANGELES UNIVERSAL PRESCHOOL (PROGRAM AUDIT)	07/01/06 - 06/30/07					
		06756	LOS ANGELES UNIVERSAL PRESCHOOL (ANNUAL REPORT)	07/01/06 - 06/30/07					
		06756	LOS ANGELES UNIVERSAL PRESCHOOL (Q4 AND ANNUAL REPORT)	07/01/06 - 06/30/07					
		07056	LOS ANGELES UNIVERSAL PRESCHOOL - POP	11/01/05 - 06/30/06					
		07056	LOS ANGELES UNIVERSAL PRESCHOOL - POP	07/01/06 - 06/30/07					
		07056	LOS ANGELES UNIVERSAL PRESCHOOL - POP	07/01/06 - 06/30/08					
24		06768	CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION	01/01/05 - 01/31/06	P	06/30/16	4 YEARS		OFFSITE STORAGE
		06768	CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION (REPORTS)	2005 - 2006					
		06896	CECILIA SANDOVAL	08/08/05 - 12/31/05					
25		06860	CHILDREN AND FAMILY FUTURES	07/01/05 - 10/31/05	P	06/30/11	4 YEARS		OFFSITE STORAGE
		06704	CHILDREN'S HOSPITAL	01/01/03 - 06/30/06					
		06960	CHRISTINE ONG	01/01/03 - 06/30/06					
		06924	COMMUNITY TELEVISION OF SO. CA (KCET)	10/01/05 - 09/30/06					
		06924	COMMUNITY TELEVISION OF SO. CA (KCET) (TRAINER GUIDE)	10/01/05 - 09/30/06					
		06892	DEBORAH FRANCO	08/01/05 - 06/02/06					
		06991	ELIZABETH BROYLES	03/01/06 - 03/10/06					
		NO CONTRACT#	THE HELP GROUP	10/06/2010					
		06974	EVELYN ALEMAN	02/07/06 - 04/07/06					
		NO CONTRACT#	ICAN ASSOCIATES	10/06/2005					
		06767	THE REGENTS OF THE UNIVERSITY	09/01/05 - 06/30/06					
		06871	TAPPER & ASSOCIATES	09/01/05 - 06/30/06					
		05271	UNIVERSITY OF NORTH CAROLINA	08/01/02 - 01/31/06					
		06878	VALETTE GRAVES	07/20/05 - 12/30/05					
		06990	VIRLICIA THOMAS	03/01/06 - 03/10/06					
		04376	WARNER CONSTRUCTORS	09/14/05					
06711	THE URBAN INSTITUTE	05/01/05 - 04/30/06							
26		06905	JMPT CONSULTING	09/01/05 - 12/31/05	P	06/30/11	4 YEARS		OFFSITE STORAGE
		06804	JMPT CONSULTING	11/01/05 - 01/31/06					
		06835	JULIA ANN LOVE	05/23/05 - 12/31/05					
		06876	KH CONSULTATION	07/01/05 - 11/30/05					
		05521	LOS ANGELES COUNTY OFFICE OF EDUCATION (LACOE)	08/01/02 - 12/31/05					
		05521	LOS ANGELES COUNTY OFFICE OF EDUCATION (LACOE) REPORTS	2002-2005					
		06955	LOS ANGELES COUNTY OFFICE OF EDUCATION (LACOE)	01/01/06 - 06/30/06					
		00493	LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES	07/01/05 - 06/30/06					
		06923	MORLIN MANAGEMENT	09/01/05 - 11/18/05					
		06895	MORLIN MANAGEMENT	07/01/05 - 06/30/06					
		06861	NATIONAL HEALTH FOUNDATION	07/01/05 - 12/31/05					
		06861	NATIONAL HEALTH FOUNDATION	07/01/05 - 12/31/05					
		06736	NICOLE SINGER	07/01/04 - 06/30/05					
		05603	PHFE MANAGEMENT SOLUTIONS WIC	09/01/02 - 04/30/06					
		07037	SLADEN CONSULTING	06/29/06 - 06/30/06					

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
27	CONTRACTS	230	CATHOLIC HEALTHCARE WEST SOUTHERN	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
		231	LAWNDALE ELEMENTARY SCHOOL DISTRICT	07/01/05 - 06/30/06					
		232	LENNOX SCHOOL DISTRICT	07/01/05 - 06/30/06					
		234	VAUGHN NEXT CENTURY LEARNING CENTER	07/01/05 - 06/30/06					
		241	CHILDREN'S BUREAU	07/01/05 - 06/30/06					
		496	HATHAWAY - SYCAMORE CHILD & FAMILY CENTER	07/01/05 - 06/30/06					
		497	LAUSD - LOCKE	07/01/05 - 06/30/06					
		498	PEOPLE COORDINATED SERVICES	07/01/05 - 06/30/06					
		499	LAUSD - QUEEN ANNE	07/01/05 - 06/30/06					
		500	ROWLAND UNIFIED SCHOOL DISTRICT	07/01/05 - 06/30/06					
		501	SOUTH BAY CENTER FOR COUNSELING	07/01/05 - 06/30/06					
		505	BIENVENIDOS CHILDREN'S CENTER	07/01/05 - 06/30/06					
		506	CENTER FOR COMMUNITY & FAMILY COUNSELING	07/01/05 - 06/30/06					
		507	CHILD & FAMILY GUIDANCE CENTER	07/01/05 - 06/30/06					
		508	CHILD CARE RESOURCE CENTER	07/01/05 - 06/30/06					
		511	EL RANCHO UNIFIED SCHOOL DISTRICT	07/01/05 - 06/30/06					
		513	HUMAN SERVICES ASSOCIATION	07/01/05 - 06/30/06					
		514	LAUSD - HYDE PARK	07/01/05 - 06/30/06					
		515	INTERCOMMUNITY CHILD GUIDANCE CENTER	07/01/05 - 06/30/06					
		516	INTERNATIONAL INSTITUTE OF LOS ANGELES	07/01/05 - 06/30/06					
		517	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/05 - 06/30/06					
		518	MOUNTAIN VIEW SCHOOL DISTRICT	07/01/05 - 06/30/06					
		519	PARA LOS NINOS	07/01/05 - 06/30/06					
		520	PARAMOUNT UNIFIED SCHOOL DISTRICT	07/01/05 - 06/30/06					
		522	POMONA UNIFIED SCHOOL DISTRICT	07/01/05 - 06/30/06					
		523	ST. JOHN'S WELL CHILD & FAMILY SERVICES	07/01/05 - 06/30/06					
		524	URBAN EDUCATION PARTNERSHIP	07/01/05 - 06/30/06					
		525	VISTA DEL MAR CHILD & FAMILY SERVICES	07/01/05 - 06/30/06					
		526	WESTSIDE CHILDREN'S CENTER	07/01/05 - 06/30/06					
527	LAUSD - WILMINGTON PARK	07/01/05 - 06/30/06							
593	WESTSIDE CHILDREN'S CENTER	07/01/05 - 06/30/06							
28	CONTRACTS	00376	EXCEL FAMILY INTERVENTION PROGRAM	07/01/07 - 09/30/08	P	07/01/12	4 YEARS		OFFSITE STORAGE
		00217	HARBOR INTERFAITH FAMILY RESOURCE CENTER	07/01/06 - 09/30/07					
		00377	HARBOR INTERFAITH FAMILY RESOURCE CENTER - COPIES OF FILE (BLUE FOLDER)	07/01/07 - 06/30/08					
		00377	HARBOR INTERFAITH FAMILY RESOURCE CTR. (PROGRESS REPORTS) FISCAL YEAR	2003 - 2004					
		00217	HARBOR INTERFAITH FAMILY RESOURCE CENTER - COPIES OF FILE (BLUE FOLDER) FISCAL YEAR	2003 - 2004					
		00377	HARBOR INTERFAITH SERVICES - COPIES OF FILE (BLUE FOLDER) FISCAL YEAR	2006 - 2007					
		00217	HARBOR INTERFAITH FAMILY RESOURCE CENTER - COPIES OF FILE (BLUE FOLDER) FISCAL YEAR	2002 - 2003					
		00376	EXCEL FAMILY INTERVENTION PROGRAM - COPIES OF FILES (BLUE FOLDER) FISCAL YEAR	2006 - 2007					
		00376	EXCEL FAMILY INTERVENTION PROGRAM - COPIES OF FILES (BLUE FOLDER) FISCAL YEAR	2007 - 2008					
		00376	EXCEL FAMILY INTERVENTION PROGRAM (EVALUATION REPORT 2008 AND YEAR END REPORT 2008) FISCAL YEAR	2007 - 2008					

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
29	CONTRACTS	00697	THE CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	07/01/08 - 06/30/09	P	07/01/13	4 YEARS		OFFSITE STORAGE
		00698	THE CHILDREN'S COLLECTIVE	07/01/08 - 06/30/09					
		00693	THE CENTER FOR NON-VIOLENT EDUCATION AND PARENTING	07/01/08 - 06/30/09					
		00694	EL PROYECTO DEL BARRIO	07/01/08 - 06/30/09					
		00677	ST. ANNE'S MATERNITY HOME	07/01/08 - 06/30/09					
		00680	NEW HORIZONS FAMILY CENTER	07/01/08 - 06/30/09					
		00681	SOUTH CENTRAL LA MINISTRY PROJECT	07/01/08 - 06/30/09					
		00669	LACOE	07/01/08 - 06/30/09					
		00672	FAIRPLEX DEVELOPMENT CENTER	07/01/08 - 06/30/09					
		00673	GARFIELD COMMUNITY ADULT SCHOOL	07/01/08 - 06/30/09					
		00674	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00675	NORTH VALLEY CARING SERVICES	07/01/08 - 06/30/09					
		00676	ROWLAND UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00695	LONG BEACH CITY COLLEGE	07/01/08 - 06/30/09					
		00696	NORTH VALLEY CARING SERVICES	07/01/08 - 06/30/09					
		00661	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00662	MOTHER'S CLUB COMMUNITY CENTER, INC.	07/01/08 - 06/30/09					
		00664	RESEDA COMMUNITY ADULT SCHOOL LEMAY CHILDREN'S CENTER (LAUSD)	07/01/08 - 06/30/09					
		00665	ROWLAND UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00666	WESTSIDE COMMUNITY ADULT SCHOOL SHENANDOAH ELEMENTARY (LAUSD)	07/01/08 - 06/30/09					
		00657	HARBOR COMMUNITY ADULT SCHOOL/MEYLER LEARNING CENTER (LAUSD)	07/01/08 - 06/30/09					
		00658	HAWTHORNE SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00659	KEDREN COMMUNITY HEALTHCARE WEST DBA CA HOSPITAL MED CTR.	07/01/08 - 06/30/09					
		00660	LTSC COMMUNITY DEVELOPMENT CORP.	07/01/08 - 06/30/09					
		00653	CATHOLIC HEALTHCARE WEST/CA HOSPITAL MED CTR	07/01/08 - 06/30/09					
		00654	CHILDREN'S BUREAU	07/01/08 - 06/30/09					
00655	HUNTINGTON PARK-BELL COMMUNITY ADULT SCHOOL/ELIZABETH LEARNING CENTER (LAUSD)	07/01/08 - 06/30/09							
00656	HARBOR COMMUNITY ADULT SCHOOL/15TH STREET ADULT LEARNING CTR. (LAUSD)	07/01/08 - 06/30/09							
30	CONTRACTS	00691	ST. JOHN'S WELL CHILD & FAMILY CENTER - COMPTON	05/01/06 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00510	DREW CHILD DEVELOPMENT	07/01/05 - 06/30/06					
		00509	CHILDREN'S INSTITUTE, INC. (05-06 FILE)	07/01/05 - 06/30/06					
		00504	BELLFLOWER UNIFIED SCHOOL DISTRICT (05-06 FILE)	07/01/05 - 06/30/06					
31	CONTACTS	00497	LAUSD - LOCKE	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00498	PEOPLE COORDINATED SERVICES	07/01/07 - 06/30/08					
		00499	LAUSD - QUEEN ANNE	07/01/07 - 06/30/08					
		00500	ROWLAND UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00501	SOUTH BAY CENTER FOR COUNSELING	07/01/07 - 06/30/08					
32	CONTRACTS	00520	PARAMOUNT UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00522	POMONA UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00523	ST. JOHN'S WELL CHILD AND FAMILY CENTER	07/01/07 - 06/30/08					
		00524	URBAN EDUCATION PARTNERSHIP	07/01/07 - 06/30/08					
		00525	VISTA DEL MAR CHILD & FAMILY SERVICES	07/01/07 - 06/30/08					

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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33	CONTRACTS	00693	(FFN) THE CENTER FOR NON-VIOLENT EDUCATION AND PARENTING	07/01/09 - 06/30/10	P	07/01/14	4 YEARS		OFFSITE STORAGE
		00694	(FFN) EL PROYECTO DEL BARRIO	07/01/09 - 06/30/10					
		00696	(FFN) NORTH VALLEY CARING SERVICES	07/01/09 - 06/30/10					
		00697	(FFN) THE CHILDREN'S BUREAU OF SO. CALIFORNIA	07/01/09 - 06/30/10					
		00698	(FFN) THE CHILDREN'S COLLECTIVE, INC.	07/01/09 - 06/30/10					
		00740	(FFN) ST. MARY'S MEDICAL CENTER FOUNDATION	07/01/09 - 06/30/10					
		00669	(HB) ANTELOPE VALLEY PARTNERS FOR HEALTH	07/01/09 - 06/30/10					
		00715	(HB) CITRUS VALLEY HEALTH PARTNERS	07/01/09 - 06/30/10					
		00667	(HB) CITY OF LONG BEACH	07/01/09 - 06/30/10					
		00668	(HB) LA BIO-MED RESEARCH INST. @ HARBOR UCLA	07/01/09 - 06/30/10					
		00716	(HB) NORTHEAST VALLEY HEALTH CORPORATION	07/01/09 - 06/30/10					
		00717	(HB) ST. JOHN'S WELL CHILD & FAM CTR. (HEART OF THE CITY)	07/01/09 - 06/30/10					
		00670	(HB) ST. JOHN'S WELL CHILD & FAM CTR. (HARBOR CORRIDOR)	07/01/09 - 06/30/10					
		00718	(HSR) BOYS & GIRLS CLUB OF THE SOUTH BAY	07/01/09 - 06/30/10					
		00718	(HSR) BOYS & GIRLS CLUB OF THE SOUTH BAY PROPOSAL						
		00719	(HSR) LA CITY COLLEGE FOUNDATION	07/01/09 - 06/30/10					
		00719	(HSR) LA CITY COLLEGE FOUNDATION PROPOSAL						
00720	(HSR) LA VALLEY COLLEGE	07/01/09 - 06/30/10							
00720	(HSR) LA VALLEY COLLEGE PROPOSAL								
34	CONTRACTS	07516	LETRA NOVA COMMUNICATIONS	12/01/09 - 03/01/10	P	07/01/14	4 YEARS		OFFSITE STORAGE
		05277	MONSTER WORLDWIDE, INC.	07/01/09 - 06/30/10					
		06895	MORLIN MANAGEMENT	07/01/09 - 06/30/10					
		07584	PATRICIA LOZANO	06/02/10					
		07411	PARA LOS NINOS	07/01/09 - 06/30/10					
		07299	PUBLIC HEALTH FOUNDATION	05/27/08 - 09/30/09					
		07493	RIVERSIDE PUBLISHING	09/28/09 - 10/27/09					
		07508	ROBERT J. CHASLIN, PHD	11/19/09 - 11/20/09					
		07286	SOUTHERN CALIFORNIA GRANTMAKERS	08/01/08 - 01/31/09					
		07119	STATE NET	02/01/09 - 01/31/09					
		07429	TALEO CORPORATION	07/01/09 - 06/30/10					
		07354	TCC GROUP, INC.	09/15/08 - 08/15/09					
		07018	THE INSTITUTE OF CULTURAL AFFAIRS	09/01/08 - 08/31/09					
		06767	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA	07/01/08 - 10/14/09					
		07230	THE SANDOLVAL GROUP	02/01/08 - 12/31/09					
		07178	THOMPSON COBB BAZILLIO	07/01/08 - 09/30/09					
		07495	JULIE TUGEND	10/21/09 - 04/30/10					
		06711	THE URBAN INSTITUTE	05/01/07 - 11/30/09					
		07211	VICENTI, LLOYD & STUTZMAN, LLP	07/01/08 - 09/30/09					
		07517	VICKI CHO ESTRADA	12/01/09 - 02/28/10					
		07409	VPE PUBLIC RELATIONS	03/16/09 - 03/15/10					
		07223	WOLD & ASSOCIATES	01/15/08 - 12/31/09					
		07308	WORKPLACE ANSWERS, INC.	07/01/08 - 09/30/09					
07308	WORKPLACE ANSWERS, INC.	07/01/09 - 06/30/10							
07288	ZERO TO THREE	06/01/09 - 05/31/10							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
35	CONTRACTS	07340	FAMILIES IN SCHOOL	09/01/08 - 06/30/09	P	07/01/13	4 YEARS		OFFSITE STORAGE
		07389	HARDER + COMPANY COMMUNITY RESEARCH	12/15/08 - 06/30/09					
		06740	HEALTHREACH	07/01/08 - 06/30/09					
		07221	INK AND COLOR, INC.	01/07/08 - 01/06/09					
		07404	JANET S. COHEN	03/03/09 - 05/29/09					
		05616	L.A. COUNTY DEPT. OF HEALTH SERVICES (DHS)	10/01/04 - 10/31/08					
		06955	LOS ANGELES COUNTY OFFICE OF EDUCATION	07/01/08 - 06/30/09					
		07025	MACIAS, GINI & O'CONNELL, LLP	05/01/08 - 04/30/09					
		07110	MATHEMATICA POLICY RESEARCH	02/15/07 - 07/06/09					
		07324	MAY ROSS (ONE DAY CONTRACT)	08/01/08					
		06809	MICHAEL L. LOPEZ	09/01/08 - 11/06/09					
		06809	MICHAEL L. LOPEZ	09/01/07 - 08/31/08					
		06895	MORLIN MANAGEMENT	07/01/08 - 06/30/09					
		07370	MUCKENTHALER & ASSOCIATES	11/17/08 - 01/31/09					
		07404	NONPROFIT FINANCE FUND	04/15/09 - 05/04/09					
07411	PARA LOS NINOS	03/16/09 - 06/30/09							
07411	PARA LOS NINOS (2 FOLDERS WITH AB 109 REQUIRED DOCS)	03/16/09 - 06/30/09							
36	CONTRACTS	00250	LA BIO-MED RESEARCH INSTITUTE	07/01/07 - 02/29/08	P	07/01/13	4 YEARS		OFFSITE STORAGE
		00248	EL PROYECTO DEL BARRIO	07/01/07 - 02/29/08					
		00258	HEART TOUCH PROJECT	07/01/07 - 02/29/08					
		00369	1736 FAMILY CRISIS CENTER	07/01/07 - 02/29/08					
		00371	CHILD CARE INFORMATION SERVICE	07/01/07 - 02/29/08					
00372	CHILD EDUCATION CENTER, CALTECH/JPL COM.	07/01/07 - 02/29/08							
37	CONTRACTS	07405	ADAIR BUSINESS SYSTEMS, INC.	07/01/09 - 06/30/10	P	07/01/14	4 YEARS		OFFSITE STORAGE
		07096	AMERICAN INSTITUTES FOR RESEARCH	01/01/09 - 12/31/09					
		06963	ANDREW J. WONG	01/01/09 - 12/31/09					
		07205	CA HOSPITAL MED CTR FOUNDATION	12/01/07 - 02/28/10					
		07474	CAROLYN NICOLE FLORES	08/01/09 - 12/31/09					
		07177	CASA MARENGO ART & DESIGN	08/15/08 - 03/14/10					
		07018	CHET E ANDERSON	09/01/08 - 08/31/09					
		07365	CLAREMONT GRADUATE UNIVERSITY	09/12/08 - 11/30/09					
		07180	CONTEXTO CULTURAL	10/01/08 - 09/30/09					
		07281	COUNTY OF LOS ANGELES	08/01/08 - 07/31/09					
07379	CPS HUMAN RESOURCES SERVICES	12/10/08 - 08/10/09							
05533	EVALUATION, MANAGEMENT & TRAINING ASSOCIATES, INC.	09/01/02 - 10/09/09							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
38	CONTRACTS	00700	COMMUNITY HEALTH ALLIANCE	07/01/09 - 06/30/10	P	07/01/14	4 YEARS		OFFSITE STORAGE
		00701	BIENVENIDOS CHILDREN'S CENTER	07/01/09 - 06/30/10					
		00702	CATHOLIC HEALTHCARE WEST (HOPE)	07/01/09 - 06/30/10					
		00703	CONNECTIONS FOR CHILDREN	07/01/09 - 06/30/10					
		00704	FOOTHILL FAMILY SERVICES	07/01/09 - 06/30/10					
		00705	FRIENDS OF THE FAMILY	07/01/09 - 06/30/10					
		00706	INMED PARTNERSHIPS FOR CHILDREN	07/01/09 - 06/30/10					
		00707	LONG BEACH DAY NURSERY	07/01/09 - 06/30/10					
		00708	MOTHER'S CLUB COMMUNITY CENTER, INC.	07/01/09 - 06/30/10					
		00709	PARA LOS NINOS	07/01/09 - 06/30/10					
		00710	WESTSIDE CHILDREN'S CENTER	07/01/09 - 06/30/10					
		00711	CA CENTER FOR PUBLIC HEALTH ADVOCACY	07/01/09 - 06/30/10					
		00712	CATHOLIC HEALTH WEST - LABBN	07/01/09 - 06/30/10					
		00713	LA GAY & LESBIAN COMMUNITY SERVICES	07/01/09 - 06/30/10					
		00724	BREASTFEEDING TASK FORCE OF GREATER LA	07/01/09 - 06/30/10					
		00725	COMMUNITY COALITION FOR SUBSTANCE ABUSE PREVENTION AND TREATMENT	07/01/09 - 06/30/10					
		00726	MATERNAL AND CHILD HEALTH ACCESS	07/01/09 - 06/30/10					
		00727	CENTER FOR NON-VIOLENT EDUCATION & PARENTING	07/01/09 - 06/30/10					
		00728	CHILD CARE INFORMATION SERVICE	07/01/09 - 06/30/10					
		00729	COUNSELING4KIDS, INC.	07/01/09 - 06/30/10					
		00730	MILLER CHILDREN'S HOSPITAL	07/01/09 - 06/30/10					
		00731	MISSION CITY COMMUNITY NETWORK, INC. (MCCN)	07/01/09 - 06/30/10					
		00732	PATHWAYS LA	07/01/09 - 06/30/10					
00733	FRANCISCAN CLINICS, DBA QUEENS CARE FAMILY CLINICS	07/01/09 - 06/30/10							
00734	SOUTH CENTRAL L.A. REGIONAL CENTER	07/01/09 - 06/30/10							
00735	THE HELP GROUP CHILD AND FAMILY CENTER	07/01/09 - 06/30/10							
00736	THE VILLAGE FAMILY SERVICES	07/01/09 - 06/30/10							
00737	VENICE FAMILY CLINIC	07/01/09 - 06/30/10							
00738	WESTSIDE CHILDREN'S CENTER	07/01/09 - 06/30/10							
39	CONTRACTS	00386	BROADDOUS (LAUSD)	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00387	CANOGA PARK (LAUSD)	07/01/07 - 06/30/08					
		00494	CALIFORNIA STATE UNIVERSITY DOMINGUEZ HILLS	07/01/07 - 06/30/08					
		00495	LAAUSD - CUDAHY	07/01/07 - 06/30/08					
		00496	HATHAWAY -SYCAMORES CHILD AND FAMILY SERVICES	07/01/07 - 06/30/08					

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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40	CONTRACTS	00721	(HSR) RIO HONDO COMMUNITY COLLEGE DISTRICT	07/01/09 - 06/30/10	P	07/01/15	4 YEARS		OFFSITE STORAGE
		00721	(HSR) RIO HONDO COMMUNITY COLLEGE DISTRICT PROPOSAL						
		00722	(HSR) THE CHILDREN'S COLLECTIVE, INC.	07/01/09 - 06/31/10					
		00722	(HSR) THE CHILDREN'S COLLECTIVE, INC. PROPOSAL						
		00653	(FL) CATHOLIC HEALTHCARE WEST - HOPE ST.	07/01/09 - 06/30/10					
		00655	(FL) HUNTINGTON PARK-BELL COMMUNITY ADULT SCHOOL/ELIZABETH LEARNING CTR.	07/01/09 - 06/30/10					
		00656	(FL) HARBOR COMMUNITY ADULT SCHOOL/15TH STREET ADULT LEARNING CENTER (LAUSD)	07/01/09 - 06/30/10					
		00657	(FL) HARBOR COMMUNITY ADULT SCHOOL/MEYLER ADULT LEARNING CENTER (LAUSD)	07/01/09 - 06/30/10					
		00658	(FL) HAWTHORNE SCHOOL DISTRICT	07/01/09 - 06/30/10					
		00659	(FL) KEDREN COMMUNITY HEALTH CENTER, INC.	07/01/09 - 06/30/10					
		00660	(FL) LTSC COMMUNITY DEVELOPMENT CORPORATION	07/01/09 - 06/30/10					
		00659	(FL) KEDREN COMMUNITY HEALTH CENTER, INC.	07/01/09 - 06/30/10					
		00661	(FL) LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/09 - 06/30/10					
		00662	(FL) MOTHER'S CLUB COMMUNITY CENTER	07/01/09 - 06/30/10					
		00664	(FL) RESEDA COMMUNITY ADULT SCHOOL LEMAY CHILDREN'S CENTER (LAUSD)	07/01/09 - 06/30/10					
		00665	(FL) ROWLAND UNIFIED SCHOOL DISTRICT	07/01/09 - 06/30/10					
		00672	(FL) FAIRPLEX CHILD DEVELOPMENT CENTER	07/01/09 - 08/31/10					
		00666	(FL) WESTSIDE COMMUNITY ADULT SCHOOL SHENANDOAH ELEMENTARY (LAUSD)	07/01/09 - 06/30/10					
		00673	(FL) GARFIELD COMMUNITY ADULT SCHOOL (LAUSD)	07/01/09 - 06/30/10					
		00674	(FL) LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/09 - 06/30/10					
00675	(FL) NORTH VALLEY CARING SERVICES	07/01/09 - 08/31/10							
00676	(FL) ROWLAND UNIFIED SCHOOL DISTRICT	07/01/09 - 06/30/10							
00677	(FL) ST. ANNE'S MATERNITY HOME	07/01/09 - 08/31/10							
00680	(FL) NEW HORIZONS	07/01/09 - 06/30/10							
00681	(FL) SOUTH CENTRAL LA MINISTRY PROJECT (LAMP)	07/01/09 - 08/31/10							
00699	(FL) LOS ANGELES COUNTY OF EDUCATION	07/01/09 - 08/31/10							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
41	CONTRACTS	07405	ADAIR BUSINESS SYSTEMS, INC	02/27/09 - 06/30/09	P	07/01/13	4 YEARS		OFFSITE STORAGE
		07363	AJA M. HOWELL	10/22/08					
		07079	AMERICAN INSTITUTES FOR RESEARCH	09/01/08 - 06/30/09					
		07079	AMERICAN INSTITUTES FOR RESEARCH	07/01/07 - 08/31/08					
		07096	AMERICAN INSTITUTES FOR RESEARCH	07/01/07 - 09/20/08					
		06963	ANDREW J. WONG	01/01/08 - 12/31/08					
		07353	ANDRIA J FLETCHER	09/24/08					
		07391	ANDRIA J FLETCHER	01/06/09					
		07430	ANDRIA J FLETCHER	05/15/09					
		07353	THE BANK STREET COLLEGE OF EDUCATION	06/16/08 - 06/18/08					
		07402	BENEVON	04/21/09					
		07044	THE CALIFORNIA ENDOWMENT	10/08/08 - 01/12/09					
		07225	CENTER FOR THE STUDY OF SOCIAL POLICY, INC.	01/01/08 - 12/31/08					
		07387	CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	01/05/09 - 05/01/09					
		07310	CLAREMONT GRADUATE UNIVERSITY	06/01/08 - 06/30/09					
		07451	CLEVERBRIDGE, INC.	06/17/09 - 06/30/09					
		06909	COACHMAN-MOORE & ASSOCIATES	08/01/05 - 08/31/08					
		07180	CONTEXTO CULTURAL	08/24/07 - 06/30/08					
07330	CREATIVE FINANCIAL SERVICES OF LA	08/05/08 - 02/05/09							
07227	ECONOMIC ROUNDTABLE	01/22/08 - 01/21/09							
42	CONTRACTS	07375	PFM ASSET MANAGEMENT, LLC	12/15/08 - 06/30/09	P	07/01/13	4 YEARS		OFFSITE STORAGE
		07055	PUBLIC COUNSEL	09/01/06 - 08/31/08					
		N/A	(LA'S BEST, & TAKOUSHI SATJIAN (POSTOIAN PRESCHOOL)	05/15/06					
		N/A	DECLINED PROPOSAL (ECE WD): JULIE FRIEDMAN (GROWTH HEALTH PARTNERSHIPS)	05/18/06					
		N/A	DECLINED PROPOSAL (ECE WD): FILIBERTO GONZALEZ (STARGRANTS)	05/19/06					
		N/A	DECLINED PROPOSAL (ECE WD): CLARA HAYES	05/19/06					
		N/A	DECLINED PROPOSAL (ECE WD): MIRYAM JANNOL (WORKPLACE LITERACY ASSOCIATES)	05/17/06					
		N/A	DECLINED PROPOSAL (ECE WD): BEA ZAVALA (DIVISION OF ADULT AND CAREER EDUCATION)	05/19/06					
		N/A	DECLINED PROPOSAL (ECE WD): DR. FLORENCE NELSON (ZERO TO THREE)	05/19/06					
		07309	REMX FINANCIAL STAFFING	06/16/08 - 06/15/09					
		07331	REMX FINANCIAL STAFFING	08/05/08 - 02/05/09					
		07143	SIMPLE SEND, INC.	04/01/07 - 03/31/09					
		07119	STATE NET	02/01/07 - 03/31/09					
		07332	STEPHEN W. VANCE & ASSOCIATES	08/15/08 - 02/27/09					
		07090	THE ADVANCEMENT PROJECT	01/01/08 - 12/31/08					
		07465	THE GRANTMANSHIP CENTER	06/01/09 - 06/30/09					
		07369	UBUQUS REPORTING, INC.	11/17/08 - 09/30/09					
		05534	USC RESEARCH PARTNERSHIP (METAMORPHOSIS PROJECT)	10/01/04 - 09/30/08					
07282	WESTAT	04/30/08 - 02/27/09							
07288	ZERO TO THREE	06/01/08 - 05/31/09							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
43	CONTRACTS	07291	ALTMAER CONSULTING, INC.	04/01/08 - 06/30/08	P	07/01/12	4 YEARS		OFFSITE STORAGE
		07253	ALTMAER CONSULTING, INC.	03/31/08 - 04/10/08					
		07149	CASA MARENGO	04/223/07 - 08/31/07					
		07243	CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	02/15/08 - 05/15/08					
		07222	CHRISTINA CHRISTIE	01/02/08 - 04/30/08					
		07248	LITTLE TOKYO SERVICE CENTER	02/26/08 - 02/27/08					
		07025	MACIAS GINI & O'CONNELL, LLP	05/01/07 - 04/30/08					
		06809	MICHAEL LOPEZ	03/01/05 - 07/31/07					
		07206	TCC GROUP, INC.	11/15/07 - 01/31/08					
		06767	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA (PFF EVALUATION)	07/01/07 - 06/30/08					
		06767	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA (PFF EVALUATION)	07/01/06 - 06/30/07					
		06767	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA (PFF EVALUATION)	10/01/04 - 06/30/05					
		07072	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA (UCLA FELLOWSHIP)	07/01/06 - 06/30/07					
		06841	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA (LAUP EVALUATION BASELINE)	06/01/05 - 08/31/06					
		07178	THOMPSON COBB BAZILLIO & ASSOCIATES	12/01/07 - 06/30/08					
		07303	TURN THE PAGE PRES	06/24/08					
		07211	VICENTI, LLOYD & STUTZMAN, LLP	12/01/07 - 06/30/08					
06870	ZERO TO THREE	07/15/05 - 07/14/06							
07192	PROPOSAL: VIATRON SYSTEMS	04/25/07							
06741	BINDER: LA PETITE ACADEMY (MISC. INFORMATION)	2003 - 2008							
44	CONTRACTS	N/A	NORTHEAST VALLEY HEALTH CORPORATION (PROPOSAL)	03/28/08	P	07/01/12	4 YEARS		OFFSITE STORAGE
		N/A	SAINT JOHN'S WELL CHILD AND FAM CTR (PROPOSAL)	2005					
		00667	LONG BEACH DEPT. OF HEALTH & HUMAN SERVICES	2005					
		N/A	LONG BEACH DEPT. OF HEALTH & HUMAN SERVICES (PROPOSAL)	2005					
		N/A	LOS ANGELES BIOMEDICAL RESEARCH INSTITUTE AT HARBOR UCLA MED CTR (PROPOSAL)	2005					
		N/A	ANTELOPE VALLEY PARTNERS FOR HEALTH	2005					
		00668	LOS ANGELES BIOMEDICAL RESEARCH INSTITUTE AT HARBOR UCLA MED CTR (MID YEAR REPORT)	07/01/07 - 09/30/08					
N/A	ANTELOPE VALLEY PARTNERS FOR HEALTH (PROPOSAL)	2005							
45	CONTRACTS	00230	CATHOLIC HEALTHCARE WEST SOUTHERN CALIFORNIA (DBA CALIFORNIA HOSPITAL MEDICAL CENTER)	07/01/08 - 06/30/09	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00231	LAWNDALE ELEMENTARY SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00232	LENNOX SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00233	NORWALK LA MIRADA SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00234	VAUGHN NEXT CENTURY LEARNING CENTER	07/01/08 - 06/30/09					
		00386	BROADOUS (LAUSD)	07/01/08 - 06/30/09					
		00387	CANOGA PARK (LAUSD)	07/01/08 - 06/30/09					
		00495	LAUSD - CUDAHY	07/01/08 - 06/30/09					
00497	LAUSD - LOCKE	07/01/08 - 06/30/09							
46	CONTRACTS	00677	ST. ANNE'S MATERNITY HOME	07/01/07 - 06/30/08	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00676	ROWLAND USD	07/01/07 - 06/30/08					
		00675	NORTH VALLEY CARING SERVICES	07/01/07 - 06/30/08					
		00674	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00671	COVINA VALLEY USD	07/01/07 - 06/30/08					
		00673	GARFIELD COMMUNITY ADULT SCHOOL	07/01/07 - 06/30/08					
		00672	FAIRPLEX CHILD DEV. CENTER	07/01/07 - 06/30/08					
00698	THE CHILDREN'S COLLECTIVE	07/01/07 - 06/30/08							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
47	CONTRACTS	00665	ROWLAND UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00666	WESTSIDE COMMUNITY ADULT SCHOOL	07/01/07 - 06/30/08					
		00664	RESEDA LEARNING CENTER	07/01/07 - 06/30/08					
		00663	PUENTE LEARNING CENTER	07/01/07 - 06/30/08					
		00661	LONG BEACH UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00662	MOTHER'S CLUB COMMUNITY CENTER, INC.	07/01/07 - 06/30/08					
		00658	HAWTHORNE SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00660	LTSC COMMUNITY DEVELOPMENT CORP.	07/01/07 - 06/30/08					
48	CONTRACTS	00659	KEDREN COMMUNITY HEALTHCARE	07/01/07 - 06/30/08	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00678	THE CHILDREN'S CENTER FOR THE ANTELOPE VALLEY	07/01/06 - 06/30/07					
		00699	LOS ANGELES COUNTY OFFICE OF EDUCATION	10/01/07 - 06/30/08					
		00681	SOUTH CENTRALLOS ANGELES MINISTRY PROJECT	07/01/07 - 06/30/08					
		00680	NEW HORIZONS FAMILY CENTER	07/01/07 - 06/30/08					
		00653	CATHOLIC HEALTHCARE WEST	07/01/07 - 06/30/08					
		00655	HUNTINGTON PARK-BELL COMMUNITY	07/01/07 - 06/30/08					
		00656	HARBOR COMMUNITY ADULT SCHOOL	07/01/07 - 06/30/08					
49	CONTRACTS	00657	HARBOR COMMUNITY ADULT SCHOOL	07/01/07 - 06/30/08	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00217	HARBOR INTERFAITH SHELTER	07/01/06 - 08/01/07					
		00261	YMCA OF GREATER LONG BEACH	07/01/07 - 02/01/08					
		00697	THE CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	06/07 - 06/08					
		00696	NORTH VALLEY CARING SERVICES	06/07 - 06/08					
		00695	LONG BEACH CITY COLLEGE	06/07 - 06/08					
		00694	EL PROYECTO DEL BARRIO	06/07 - 06/08					
		00693	THE CENTER FOR NON-VIOLENT EDUCATION	06/07 - 06/08					
50	CONTRACTS	00247	CRYSTAL STAIRS	2005 - 2006	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00523	ST. JOHN'S WEL CHILD & FAMILY CTR.	2004 - 2005					
		00523	ST. JOHN'S WEL CHILD & FAMILY CTR.	2003 - 2004					
		00523	ST. JOHN'S WEL CHILD & FAMILY CTR.	2005 - 2006					
		00245	CHILDREN'S HOSPITAL LA	2004 - 2004					
		00244	CHILD & FAMILY GUIDANCE CENTER	2005 - 2006					
		00244	CHILD & FAMILY GUIDANCE CENTER	2004 - 2005					
		00510	DREW CHILD DEVELOPMENT	02/01/04 - 06/30/04					
51	CONTRACTS	00501	SOUTH BAY CENTER FOR COUNSELING	07/2005 - 06/2006	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00494	CALIFORNIA STATE UNIVERSITY DOMINGUEZ HILLS	07/2005 - 06/2006					
		00501	SOUTH BAY CENTER FOR COUNSELING	07/2004 - 06/2005					
		00251	KING DREW MEDICAL FOUNDATION	07/2004 - 06/2005					
		00251	KING DREW MEDICAL FOUNDATION	07/2005 - 07/2006					
52	CONTRACTS	00377	HARBOR INTERFAITH	07/01/06 - 06/30/07	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00101	MEMORIAL WOMEN'S HOSPITA	07/01/06 - 06/30/07					
		00605	CHILDREN'S LEARNING CENTER	04/01/05 - 04/01/06					
		00380	PASADENA PUBLIC HEALTH DEPT.	07/01/04 - 06/01/05					
		00381	ST. MARY MEDICAL CTR. FOUNDATION	07/01/04 - 06/01/05					

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
53	CONTRACTS	07079	AMERICAN INSTITUTES FOR RESEARCH	01/01/06 - 06/30/07	P	06/30/11	4 YEARS		OFFSITE STORAGE
		07096	AMERICAN INSTITUTES FOR RESEARCH	01/01/06 - 06/30/07					
		05597	AMERICAN INSTITUTES FOR RESEARCH	10/01/02 - 12/31/06					
		07065	AMY SCHWARTZ	09/26/06 - 01/31/07					
		06963	ANDREW J. WONG, INC.	02/01/06 - 12/31/06					
		06982	ARSHAD ALI	02/27/06 - 02/28/07					
		07067	BUTTE COUNT OFFICE OF EDUCATION	10/10/06 - 04/13/07					
		06768	CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION	01/01/06 - 12/31/06					
		06768	CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION (REPORTS)	01/01/06 - 12/31/05					
		07013	CECILIA SANDOVAL	04/05/06 - 07/05/06					
		05270	CHILD DEVELOPMENT MEDIA	07/01/05 - 10/31/06					
		00229	COMMUNITY PARTNERS	08/01/02 - 09/30/06					
		07082	CYNTHIA POLLARD COMMUNICATIONS, INC.	11/01/06 - 04/01/07					
06872	COMMUNITY PARTNERS (NSBN)	08/01/05 - 12/15/06							
54	CONTRACTS	00385	WATTS LABOR COMMUNITY ACTION COMM	2003 - 2004	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00249	FRANK D. LANTERMAN REGIONAL CENTER	2003 - 2004					
		00257	SOUTH CENTRAL L.A. MINISTRY PROJECT INC.	2003 - 2004					
		00257	SOUTH CENTRAL L.A. MINISTRY PROJECT INC.	2004 - 2005					
		00385	WATTS LABOR COMMUNITY ACTION COMM	2004 - 2005					
55	CONTRACTS	00385	WATTS LABOR COMMUNITY ACTION COMM	2005 - 2006	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00469	L.A.M.P.	03/01/08 - 08/31/08					
		00139	THE HEART TOUCH PROJECT	03/01/08 - 08/31/08					
		00084	TODDLIN TIME PRESCHOOL	03/01/03 - 02/28/04					
		00687	CITY OF LONG BEACH	10/01/05 - 06/30/06					
		00688	LOS ANGELES BIOMEDICAL RESEARCH	10/01/05 - 06/30/06					
		00670	ST. JOHN'S WELL CHILD & FAMILY	10/01/05 - 06/30/06					
56	CONTRACTS	00374	CONNECTIONS FOR CHILDREN	07/01/06 - 06/30/07	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00376	EXCEL FAMILY INTERVENTION	07/01/06 - 06/30/07					
		00247	CRYSTAL STAIRS, INC.	07/01/06 - 06/30/07					
		00246	CITRUS VALLEY HEALTH PARTNERS	07/01/06 - 06/30/07					
		00243	BUNDLE OF JOY HEALTH DAYCARE, INC.	07/01/06 - 06/30/07					
57	CONTRACTS	00224	THE H.E.L.P. GROUP	07/01/06 - 06/30/07	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00223	SHIELDS FOR FAMILIES PROJECT, INC.	07/01/06 - 06/30/07					
		00257	SOUTH CENTRAL LAMP	03/01/03 - 02/29/04					
		00249	FRANK D. LANTERMAN REGIONAL CENTER	07/01/04 - 06/30/05					
		00257	SOUTH CENTRAL LAMP	07/01/05 - 06/30/06					
58	CONTRACTS	00249	FRANK D. LANTERMAN REGIONAL CENTER	07/01/05 - 02/28/06	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00249	FRANK D. LANTERMAN REGIONAL CENTER	03/01/04 - 06/30/04					
		00382	ACCREDITATION FACILITATION PROJECT	07/01/06 - 06/30/07					
		00385	WATTS LABOR COMMUNITY ACTION	07/01/06 - 06/30/07					
		00679	UNIVERSITY OF SOUTHERN CALIFORNIA	07/01/06 - 06/30/07					
59	CONTRACTS	00258	HEART TOUCH PROJECT	07/01/06 - 06/30/07	P	10/31/12	4 YEARS		OFFSITE STORAGE
		00251	KING DREW MEDICAL FOUNDATION	07/01/06 - 06/30/07					
		00260	UNION STATION FOUNDATION	07/01/06 - 06/30/07					
		00687	CITY OF LONG BEACH	07/01/06 - 06/30/07					
		00678	CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION	01/01/07 - 12/08/07					
00678	CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION	01/01/06 - 12/31/06							
00214	CHILDREN'S HOSPITAL LOS ANGELES	07/01/06 - 08/31/07							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
60	CONTRACTS	07066	ELIZABETH BROYLES	09/29/06 - 01/31/07	p	06/30/11	4 YEARS		OFFSITE STORAGE
		07131	EVALUATION & TRAINING INSTITUTE	04/01/07 - 05/30/07					
		06740	HEALTHREACH ASSOCIATES	11/09/04 - 12/31/06					
		06986	HERSHEY ASSOCIATES	03/13/06 - 03/12/07					
		07116	JEAN MCINTOSH (GUEST SPEAKER - 02/27/2007)	02/27/07					
		07114	JUDY LANGFORD (GUEST SPEAKER - 02/27/2007)	02/27/07					
		07078	KARLYN FARRIS	11/01/06 - 01/31/07					
		06916	KATIE WINTERS	09/20/05 - 03/30/07					
		07137	LODESTAR MANAGEMENT/RESEARCH	04/06/07 - 06/30/07					
		07080	LODESTAR MANAGEMENT/RESEARCH	11/01/06 - 03/31/07					
		06955	LOS ANGELES COUNTY OFFICE OF EDUCATION	07/01/06 - 06/30/07					
		07025	MARCAS GINI & COMPANY, LLP	06/01/06 - 04/30/07					
		06993	MELANIE STEPHENS	03/28/06 - 12/31/06					
		07026	MIRIAM GALICIA DUARTE & ASOCIADOS	06/01/06 - 08/30/06					
		06895	MORLIN MANAGEMENT	07/01/06 - 06/30/07					
		07064	MUCKENTHALER & ASSOCIATES, INC.	09/29/06 - 01/31/07					
		07041	NANCY AGOSTO	07/17/06 - 12/31/06					
		06861	NATIONAL HEALTH FOUNDATION	01/01/06 - 12/31/06					
		07027	PANKOW BUILDERS	06/19/06 - 07/18/06					
		07027	PANKOW BUILDERS	08/14/06 - 10/06/06					
07105	PHFE MANAGEMENT SOLUTIONS	02/05/07 - 04/20/07							
07030	PHFE MANAGEMENT SOLUTIONS WIC PROGRAM	05/01/06 - 06/30/07							
06877	PURVA RAWAL	07/18/05 - 12/31/06							
06981	RAMON MARTINEZ	02/27/06 - 12/31/06							
	(NONE LISTED)	RODRIGUEZ, HORII & CHOI LLP (ENGAGEMENT LETTER - 10/13/06)	10/13/06						
61	CONTRACTS	07172	ABE CORPORATION	08/08/07 - 12/31/07	P	06/30/13	4 YEARS		OFFSITE STORAGE
		07189	ABE FURNITURE	09/26/07 - 06/30/08					
		07144	ACUPRINT	03/19/07 - 03/18/08					
		07193	AMY SCHWARTZ	10/15/07 - 02/15/08					
		06963	ANDREW J. WONG INCORPORATED	01/01/07 - 12/31/07					
		07165	BRANDERS.COM	07/01/07 - 06/30/08					
		07181	CALIFORNIA ASSOCIATION OF NONPROFITS	08/24/07 - 10/31/07					
		06768	CALIFORNIA HOSPITAL MEDICAL CENTER (INCLUDES 1ST, 2ND, 3RD QUARTER REPORTS)	01/01/07 - 02/29/08					
		07153	CASEY FAMILY PROGRAMS	05/15/07 - 06/30/08					
		07169	CECILIA SANDOVAL	07/24/07					
		07166	CITY OF LA RECREATION & PARKS	07/07/07					
		07158	CLAREMONT GRADUATE UNIVERSITY	06/01/07 - 12/31/07					
		07156	CORPORATE TRANSLATION SERVICES	06/28/07 - 07/09/07					
		07174	CONVERGINT TECHNOLOGIES	08/15/07 - 06/30/08					
		07197	COUNTY OF LOS ANGELES CEO - SERVICE INTEGRATION BRANCH	12/05/07 - 06/30/08					
		07226	GRANT D. POWER	01/15/08 - 06/15/08					
		06740	HEALTH ASSOCIATES, INC.	07/01/07 - 06/30/08					
		07017	HIGHWAY ONE CONSULTING, LLC	10/09/06 - 12/31/07					
		07190	KID DYNAMITE PRODUCTIONS	10/11/07					
		07209	KRISTIE BRANDT	11/21/07 - 11/30/07					

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
62	CONTRACTS	07085	IMAGISTIC	12/01/06 - 01/31/08	P	06/30/13	4 YEARS		OFFSITE STORAGE
		07134	L.A. CARE HEALTH PLAN	05/01/07 - 05/31/08					
		07191	MAINLINE INFORMATION SYSTEMS, INC.	10/10/07 - 12/31/07					
		06895	MORLIN ASSET MANAGEMENT, L.P.	07/01/07 - 06/30/08					
		07054	M.R. GRANT, CPA	08/01/06 - 11/30/07					
		07188	OUT OF CHAOS CONSULTING, INC.	10/01/07 - 01/31/08					
		07154	PANKOW SPECIAL PROJECTS, L.P.	05/01/07 - 06/30/08					
		07030	PUBLIC HEALTH FOUNDATION	07/01/07 - 06/30/08					
		07229	PUBLIC HEALTH FOUNDATION ENTERPRISES, INC.	01/18/08 - 02/29/08					
		07175	ROCKHURST UNIVERSITY	09/24/07 - 09/24/08					
		07173	TELLER ASSOCIATES	08/29/07 - 08/30/07					
		07090	THE ADVANCEMENT PROJECT	01/01/07 - 12/31/07					
		07133	THE COMPENSATION CENTER, LLC	04/16/07 - 11/30/07					
		07053	VASQUEZ & COMPANY, LLC	08/01/06 - 11/30/07					
		07053	VASQUEZ & COMPANY, LLC	12/01/07 - 06/30/08					
63	CONTRACTS	00680	SEMICS, LLC	09/01/03 - 02/28/07	P	06/30/11	4 YEARS		OFFSITE STORAGE
		07081	SIMPLESEND, INC.	12/01/06 - 03/31/07					
		07059	SLADEN CONSULTING, INC.	09/15/06 - 09/15/06					
		07049	SHIRLEY ASSOCIATES	08/01/06 - 10/31/06					
		07086	SHIRLEY ASSOCIATES	12/01/06 - 06/30/07					
		06680	SEMICS, LLC	09/01/03 - 08/31/06					
		07042	SUAREZ/FROMMER & ASSOCIATES, INC.	07/01/06 - 09/22/06					
		07107	SUSAN WILSON (ONE DAY - 02/28/07)	02/28/07					
		07087	THE ADVANCEMENT PROJECT	12/01/06 - 12/31/06					
		06692	THE CENTER TO PROMOTE HEALTHCARE ACCESS	04/01/06 - 01/31/07					
		07018	THE INSTITUTE OF CULTURAL AFFAIRS	04/01/06 - 03/31/07					
		06948	THE FINANCE PROJECT (PHASE 1)	12/01/05 - 11/30/06					
		06948	THE FINANCE PROJECT (PHASE 2)	04/18/06 - 11/30/06					
		06711	THE URBAN INSTITUTE	05/01/06 - 04/30/07					
		07017	VANCE HICKIN	04/10/06 - 10/06/06					
64	CONTRACTS	00502	F5 CA CYCLE 2 APP LAUSD 10TH STREET	2007 - 2011	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00503	F5 CA CYCLE 2 APP CHILDREN'S CTR OF AV	2007 - 2011					
		00504	F5 CA CYCLE 2 APP BELLFLOWER	2007 - 2011					
		00505	F5 CA CYCLE 2 APP BIENVENIDOS	2007 - 2011					
		00507	F5 CA CYCLE 2 APP CHILD AND FAMILY GUIDANCE CTR	2007 - 2011					
		00508	F5 CA CYCLE 2 APP CHILD CARE RESOURCE CTR	2007 - 2011					
		00509	F5 CA CYCLE 2 APP CHILDREN'S INSTITUTE INC.	2007 - 2011					
		00510	F5 CA CYCLE 2 APP DREW CDC	2007 - 2011					
		00511	F5 CA CYCLE 2 APP EL RANCHO USD	2007 - 2011					
00513	F5 CA CYCLE 2 APP HUMAN SVS. ASSN	2007 - 2011							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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65	CONTRACTS	00498	PEOPLE COORDINATED SERVICES	07/01/08 - 06/30/09	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00499	LAUSD - QUEEN ANNE	07/01/08 - 06/30/09					
		00500	ROWLAND UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00502	LAUSD - TENTH STREET	07/01/08 - 06/30/09					
		00503	CHILDREN'S CENTER OF THE ANTELOPE VALLEY	07/01/08 - 06/30/09					
		00504	BELLFLOWER UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00511	EL RANCHO UNIFIED SCHOOL DISTRICT	07/01/08 - 06/30/09					
		00512	ESTRADA COURTS RESIDENTS MANAGEMENT CORP.	07/01/08 - 06/30/09					
66	CONTRACTS		SRI CYCLE 1 (ROUND 2) RECONCILIATIONS	2002 - 2003	P	07/01/16	4 YEARS		OFFSITE STORAGE
			SRI CONFLICTS OF INTEREST FORMS	2002 - 2003					
			PHASE I SRI APPLICATIONS	2002 - 2003					
			SRI RFP REVIEW TOOLS	2002 - 2003					
			PHASE I SRI DECISION POINT LETTERS FROM CCFC	2002 - 2003					
			PHASE II SRI NOTICE OF INTENT	2002 - 2003					
			SRI CYCLE 1 - FORM 5 AND FORM 1B	2002 - 2003					
			SRI CYCLE 2 FORM 10S	2002 - 2003					
			SRI CYCLE 1 FORM 4A	2002 - 2003					
			SRI CYCLE 1 FORM 1 (REVISED 07/08)	2002 - 2003					
67	CONTRACTS	00526	WESTSIDE CHILDREN'S CENTER	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00527	LAUSD - WILMINGTON PARK	07/01/07 - 06/30/08					
		00593	WESTSIDE CHILDREN'S CENTER - SPECIAL NEEDS PROJECTS (SRI CYCLE IV A - YEAR 3)	07/01/07 - 06/30/08					
		00690	LAUSD - 90002	07/01/07 - 06/30/08					
		00691	ST. JOHN'S WELL CHILD & FAMILY CENTER - COMPTON	07/01/07 - 06/30/08					
68	CONTRACTS	00509	CHILDREN'S INSTITUTE, INC.	07/01/07 - 06/30/08	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00510	DREW CHILD DEVELOPMENT	07/01/07 - 06/30/08					
		00511	EL RANCHO UNIFIED SCHOOL DISTRICT	07/01/07 - 06/30/08					
		00513	HUMAN SERVICES ASSOCIATION	07/01/07 - 06/30/08					
		00514	LAUSD - HYDE PARK	07/01/07 - 06/30/08					
69	CONTRACTS	00231	LAWNDALE ELEMENTARY SCHOOL DISTRICT	2009 - 2010	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00234	VAUGHN NEXT CENTURY LEARNING CENTER	2009 - 2010					
		00233	NORWALK LA MIRADA USD	2009 - 2010					
		00241	CHILDREN'S BUREAU	2009 - 2010					
		00510	DREW CHILD DEVELOPMENT CENTER	2009 - 2010					
		00232	LENNOX SCHOOL DISTRICT	2009 - 2010					
70	CONTRACTS	00230	CHCW HOPE STREET	2009 - 2010	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00514	LAUSD HYDE PARK	2009 - 2010					
		00511	EL RANCHO UNIFIED SCHOOL DISTRICT	2009 - 2010					
		00518	MOUNTAIN VIEW SCHOOL DISTRICT	2009 - 2010					
		00520	PARAMOUNT UNIFIED SCHOOL DISTRICT	2009 - 2010					
		00690	LAUSD 90002	2009 - 2010					
		00522	POMONA UNIFIED SCHOOL DISTRICT	2009 - 2010					
00527	LAUSD WILMINGTON PARK	2009 - 2010							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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71	CONTRACTS	00386	BROADOUS LAUSD	2009 - 2010	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00387	CANOGA PARK LAUSD	2009 - 2010					
		00495	CUDAHY LAUSD	2009 - 2010					
		00497	LOCKE LAUSD	2009 - 2010					
		00499	QUEEN ANNE LAUSD	2009 - 2010					
		00500	ROWLAND USD	2009 - 2010					
		00504	BELLFLOWER USD	2009 - 2010					
		00502	TENTH STREET LAUSD	2009 - 2010					
72	CONTRACTS	00387	F5 CA CYCLE 2 APP LAUSD CANOGA PARK	2007 - 2011	P	07/08/05	4 YEARS		OFFSITE STORAGE
		00386	F5 CA CYCLE 2 APP LAUSD BROADUS	2007 - 2011					
		00241	F5 CA CYCLE 2 APP CHILDREN'S BUREAU	2007 - 2011					
		00949	F5 CA CYCLE 2 APP CSUDH	2007 - 2011					
		00495	F5 CA CYCLE 2 APP LAUSD CUDAHY	2007 - 2011					
		00496	F5 CA CYCLE 2 APP HATHAWAY SYCAMORE	2007 - 2011					
		00497	F5 CA CYCLE 2 APP LAUSD LOCKE	2007 - 2011					
		00499	F5 CA CYCLE 2 APP LAUSD QUEEN ANNE	2007 - 2011					
		00498	F5 CA CYCLE 2 APP PEOPLE COORDINATED SVS	2007 - 2011					
		00500	F5 CA CYCLE 2 APP ROWLAND USD	2007 - 2011					
73	CONTRACTS	00682	BIENVENIDOS CHILDREN'S CENTER, INC.	07/01/09 - 06/30/10	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00683	CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA	07/01/09 - 06/30/10					
		00684	SOUTH BAY CENTER FOR COUNSELING	07/01/09 - 06/30/10					
		00685	PARA LOS NINOS	07/01/09 - 06/30/10					
		00686	SAINT JOHN'S HOSPITAL	07/01/09 - 06/30/10					
		00687	SHIELDS FOR FAMILIES, INC.	07/01/09 - 06/30/10					
		00688	SPIRITT FAMILY SERVICES	07/01/09 - 06/30/10					
74	CONTRACTS		SRI SPECIAL NEEDS PROJECT (1ST DISBURSEMENT OF FUNDS)	2004 - 2009	P	07/01/16	4 YEARS		OFFSITE STORAGE
			SRI SPECIAL NEEDS PROJECT FISCAL FORMS	2004 - 2009					
			SRI SPECIAL NEEDS PROJECT FISCAL FORMS	2004 - 2009					
			SRI RFQ 2006	2004 - 2009					
			SRI CYCLE 2 PAYMENT NOTIFICATION	2004 - 2009					
75	CONTRACTS		ORGANIZATIONAL ASSESSMENT CONSULTANT RFQ	MAY - JUNE 2010	P	2014-2015	4 YEARS		OFFSITE STORAGE
			ORGANIZATIONAL ASSESSMENT CONSULTANT-INFO SESSION 2010	MAY - JUNE 2010					
			OAC-REVIEW PROCESS	MAY - JUNE 2010					
			OAC APPLICATION: (ALL APPLICANTS)	MAY - JUNE 2010					
			OAC APPLICATION: TCC GROUP	MAY - JUNE 2010					
			OAC RFQ INFO SESSION 2	MAY - JUNE 2010					
			OAC RFQ REVIEW	MAY - JUNE 2010					
			OAC RFQ SCORE SHEETS & DOCUMENTATION	MAY - JUNE 2010					
			OAC RFQ APPLICATION 2010	MAY - JUNE 2010					
			OAC RFQ APPLICATION 2010	MAY - JUNE 2010					
	OAC: RFQ RESPONDENTS 2010	MAY - JUNE 2010							
76	CONTRACTS	00521	PARENTS OF WATTS (OUT OF COMPLIANCE DOCUMENTATION)	2003 - 2005	P	07/01/16	4 YEARS		OFFSITE STORAGE
77	CONTRACTS	00510 - 00514	SRI - CYCLE IV A FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
78	CONTRACTS	00523 - 00526	SRI - CYCLE IV A FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
79	CONTRACTS	00235 - 00238	SRI SPECIAL PLANNING GRANTS	06/01/03 - 09/30/03	P	07/01/14	4 YEARS		OFFSITE STORAGE

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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80	CONTRACTS	00515 - 00518	SRI - CYCLE IV A FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED	02/01/04 - 06/30/04	P	07/01/14	4 YEARS		OFFSITE STORAGE
81	CONTRACTS	00515 - 00520	SRI - CYCLE IV A FY 2004 - 05	07/01/04 - 07/01/05	P	07/01/16	4 YEARS		OFFSITE STORAGE
82	CONTRACTS	00230 - 00234	SRI - CYCLE I FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
83	CONTRACTS	00501 - 00505	SRI - CYCLE III B AND CYCLE IV A FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/06	4 YEARS		OFFSITE STORAGE
84	CONTRACTS	00239 - 00240	SRI SPECIAL PLANNING GRANTS	06/01/03 - 09/30/03	P	07/01/16	4 YEARS		OFFSITE STORAGE
85	CONTRACTS	00510 - 00514	SRI - CYCLE IV A FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED	02/01/04 - 06/30/04	P		4 YEARS		OFFSITE STORAGE
86	CONTRACTS	00495 - 00498	SRI - CYCLE III B FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED	12/01/03 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
87	CONTRACTS	00527	SRI - CYCLE IV A FY 2005 - 2006	7/1/2005 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00593							
		00690							
		00691							
88	CONTRACTS	00344 - 00355	SRI SPECIAL PLANNING GRANTS	06/01/03 - 09/30/03	P	07/01/16	4 YEARS		OFFSITE STORAGE
89	CONTRACTS	00519 - 00521	SRI - CYCLE IV A FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED	02/01/04 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
90	CONTRACTS	00515 - 00518	SRI - CYCLE IV A FY 2004 - 2005 (#00521) FY 2005 - 2006	07/01/04 - 08/31/05 (#00521)	P	07/01/16	4 YEARS		OFFSITE STORAGE
				07/01/05 - 06/30/06 (#00519 - #00520, #00522)					
91	CONTRACTS	00506 - 00505	SRI - CYCLE IV A FY 2003 - 2004, FY 2004 - 2005, FY 2005 - 2006	02/01/04 - 06/30/04 (YR 1 - #00506)	P	07/01/16	4 YEARS		OFFSITE STORAGE
				07/01/04 - 06/30/05 (YR 2 - #00506)			4 YEARS		
				07/01/05 - 06/30/06 (#00508 - #00509)			4 YEARS		
92	CONTRACTS	00386 - 00387 00494 - 00497	SRI CYCLE III A & CYCLE III B FY 2004 - 05	07/01/04 - 07/01/05	P	07/01/16	4 YEARS		OFFSITE STORAGE
93	CONTRACTS	00233 - 00234	SRI CYCLE I FY 12/1/2002 - 11/30/2003 (YEAR 1/PHASE I)	12/01/02 - 11-30/03	P	07/01/16			OFFSITE STORAGE
94	CONTRACTS		SRI APPROVED PROPOSALS - BELLFLOWER, BIENVENIDOS, CSUDH, CCAFS, CCRC, CCAV, CII DREW, EL RANCHO		P	07/01/16	4 YEARS		OFFSITE STORAGE
95	CONTRACTS	00498 - 00503	SRI - CYCLE III B & CYCLE IV A FY 2004 - 05	07/01/04 - 07/01/05	P	07/01/16	4 YEARS		OFFSITE STORAGE
96	CONTRACTS	00230 - 00234	SRI - CYCLE I FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED	12/01/03 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
97	CONTRACTS	00230 - 00232	SRI - CYCLE I FY 12/01/2002 - 11/30/2003 (YEAR 1/PHASE I)	12/01/02 - 11/30/03	P	07/01/16	4 YEARS		OFFSITE STORAGE

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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98	CONTRACTS	00507 - 00508	SRI - CYCLE 2 YR 2006 - 2007	07/01/06 - 06/30/07	p	07/01/16	4 YEARS		OFFSITE STORAGE
		00511-00512							
		00514							
		00517							
99	CONTRACTS	00356 - 00357	SRI SPECIAL PLANNING GRANTS		P	07/01/16	4 YEARS		OFFSITE STORAGE
		00359 - 00365							
		00367							
100	CONTRACTS	00496 - 00500	SRI - CYCLE III B FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
101	CONTACTS		SRI APPROVED PROPOSALS - ESTRADA COURTS, HATHAWAY, LAUSD (5), MOUNTAIN VIEW, PARA LOS NINOS, PARAMOUNT		P	07/01/16			OFFSITE STORAGE
102	CONTRACTS	00230 - 00234	SRI - CYCLE 2 FY 2006 - 2007	07/01/06 - 06/30/07	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00386 - 00387							
103	CONTRACTS	00522 - 00527	SRI - CYCLE IV A FY 2003 - 2004	02/01/04 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
104	CONTRACTS	00495	SRI - CYCLE 2 YR 2006 - 2007	07/01/06 - 06/30/07	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00497							
		00499 - 00500							
		00502 - 00504							
105	CONTRACTS	00518	SRI - CYCLE 2 YR 2006 - 2007	07/01/06 - 06/30/07	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00520							
		00522							
		00527							
		00690							
106	CONTRACTS	209 - 211	FAMILY LITERACY EXPANSION & ENHANCEMENT YEAR 2	06/01/03 - 05/31/04	P	06/30/11	4 YEARS		OFFSITE STORAGE
107	CONTRACTS	00665	FAMILY LITERACY FY 2006 - 07	07/01/06 - 06/30/07	P	07/01/17	4 YEARS		OFFSITE STORAGE
		00666							
		00671 - 00674							
108	CONTRACTS	00204 - 00211	FAMILY LITERACY YEAR 3 FY 2004 - 05	06/01/04 -05/31/05	P	06/30/11	4 YEARS		OFFSITE STORAGE
109	CONTRACTS	00657 - 00658	FAMILY LITERACY FY 2006 - 07	07/01/06 - 06/30/07	P	07/01/13	4 YEARS		OFFSITE STORAGE
		00660 - 00664							
110	CONTRACTS	00653-00660	FAMILY LITERACY FY 2005 - 06	07/01/05 - 06/30/06	P	07/01/13	4 YEARS		OFFSITE STORAGE
111	CONTRACTS	00653	FAMILY LITERACY FY 2006 - 07	07/01/06 - 06/30/07	P	07/01/13	4 YEARS		OFFSITE STORAGE
		00655 - 00656							
		00659							
		00676 - 00677							
		00680 - 00681							
112	CONTRACTS	00515 - 00518	SRI - CYCLE IV A FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
113	CONTRACTS	00369 - 00374	CDI CYCLE III YR 2	10/01/03 - 09/30/08	P	?	4 YEARS		OFFSITE STORAGE
114	CONTRACTS	00222 - 00224	CDI CYCLE I YR 3 04 - 05	09/01/04 - 08/31/07	P	06/30/11	4 YEARS		OFFSITE STORAGE
		00226							
		00228							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

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115	CONTRACTS	00241	SRI - CYCLE II (# 00241), CYCLE III A (# 00386 - 00387), CYCLE III B (# 00494 - 00495), FY 2005 - 2006	07/01/05 - 06/30/06	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00386 - 00387							
		00494 - 00495							
116	CONTRACTS	00691	F5CA CYCLE 2 APP ST JOHN'S	2007 - 2011	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00690	F5CA CYCLE 2 APP LAUSD 90002	2007 - 2011					
		00526	F5CA CYCLE 2 APP WESTSIDE CC	2007 - 2011					
		00527	F5CA CYCLE 2 APP LAUSD WILMINGTON	2007 - 2011					
		00525	F5CA CYCLE 2 APP VISTA DEL MAR	2007 - 2011					
		00230	F5CA CYCLE 2 APP CMHC HOPE STREET	2007 - 2011					
		00231	F5CA CYCLE 2 APP LAWDALE	2007 - 2011					
		00232	F5CA CYCLE 2 APP LENNOX	2007 - 2011					
		00233	F5CA CYCLE 2 APP NLM USD	2007 - 2011					
00234	F5CA CYCLE 2 APP VAUGHN NCLC	2007 - 2011							
117	CONTRACTS	00688 - 00689	PARTNERSHIPS FOR FAMILIES FY 2006 - 07	07/01/06 - 06/30/07	P	06/30/11	4 YEARS		OFFSITE STORAGE
118	CONTRACTS	00213 - 00215	CDI - CYCLE I - YEAR 3 FISCAL YEAR 2004 - 05 (GRANT PERIOD: 09/01/02 - 08/31/05 & 08/31/07)	09/01/02 - 08/31/05 09/01/02 - 08/31/07	p		4 YEARS		OFFSITE STORAGE
		00217 - 00218							
		00220 - 00221							
119	CONTRACTS	00683 - 00684 00686	PARTNERSHIPS FOR FAMILIES FY 2006 - 07	07/01/06 - 06/30/07	P	07/01/14	4 YEARS		OFFSITE STORAGE
120	CONTRACTS	00241	SRI - CYCLE II, CYCLE III A, CYCLE III B FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED - START DATE, CYCLE II: 03/01/03 - 02/29/04; 03/01/04 - 06/30/04. START DATE, CYCLE III A: 09/01/03 - 06/30/04. START DATE CYCLE III B: 12/01/03 - 06/30/04	03/01/03 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00386 - 00387		09/01/03 - 06/30/04					
		00494		12/01/03 - 06/30/04					
121	CONTRACTS	00499 - 00502	SRI - CYCLE III B & CYCLE IV A FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED - STRAT DATE, CYCLE III B: 12/01/03 - 06/04, START DATE, CYCLE IV A (00503): 03/04/04 - 06/30/04	12/01/03 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00503		03/01/04 - 06/30/04					
122	CONTRACTS		SCHOOL READINESS INITIATIVE APPROVED PROPOSAL MATERIALS - NORWALK, PARENTS OF WATTS, PCS, SOUTH BAY, UEP, VISTA DEL MAR, WESTIDE CHILDREN'S CENTER		P	07/01/16	4 YEARS		OFFSITE STORAGE
123	CONTRACTS		SRI APPROVED PROPOSALS - ICGC IILA, LAWDALE, LENNOX, CHILDREN'S BUREAU, LONG BEACH USD		P	07/01/16	4 YEARS		OFFSITE STORAGE
124	CONTRACTS	00522 - 00527	SRI - CYCLE IV A FY 2004 - 05	07/01/04 - 07/01/05	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00593							
125	CONTRACTS	00504 - 00505	SRI - CYCLE IV A FY 2004 - 05	07/01/04 - 07/01/05	P	07/0/2016	4 YEARS		OFFSITE STORAGE
		00507 - 00509							
126	CONTRACTS	00714	CIFHS	2007 - 2010	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00494	CSU DOMINGUEZ HILLS	2007 - 2010					
127	CONTRACTS	00510 - 00514	SRI - CYCLE IV A FY 2004 - 05	07/01/04 - 07/01/05	P	07/01/16	4 YEARS		OFFSITE STORAGE
128	CONTRACTS	00667 - 00668	HEALTH BIRTHS FY 2006 - 07	07/01/06 - 06/30/07	P	07/06/05	4 YEARS		OFFSITE STORAGE
129	FINANCE		COUNTY REPORTS FY 06 - 07		P	07/01/17	7 YEARS		OFFSITE STORAGE
			FINANCIAL STATEMENTS / JE JULY 06 - JUNE 07						
			IMPREST REPLENISHMENT APRIL - JUNE 2007						
130	CONTRACTS		SRI REVIEW TOOLS (ALL GRANTEEES)	2005 - 2006	P	2016	4 YEARS		OFFSITE STORAGE
			SRI REVIEW TOOLS (TA PROVIDERS)	2005 - 2006					
131	CONTRACTS		SRI REVIEW TOOLS (ALL GRANTEEES)	2005 - 2006	P	2016	4 YEARS		OFFSITE STORAGE
			SRI REVIEW TOOLS (TA PROVIDERS)	2005 - 2006					
132	CONTRACTS	00504 - 00505	SRI - CYCLE IV A FY 2003 - 04 ORIGINAL PROPOSALS INCLUDED - 00506 ORIGINAL PROPOSAL ONLY	02/01/04 - 06/30/04	P	07/01/16	4 YEARS		OFFSITE STORAGE
		00506							
		00507 - 00509							

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
133 (FILE CABINET)	FINANCE		A/P FY 00-01 A-L		P	07/01/12	7 YEARS		OFFSITE STORAGE
			A/P FY 00-01 M-Z						
			A/P FY 00-01 COPIES OF CHECKS						
			A/P FY 00-01 COPIES OF CHECKS						
134 (FILE CABINET)	FINANCE		A/P FY 01-02 A-G		P	07/01/13	7 YEARS		OFFSITE STORAGE
			A/P FY 01-02 H-P						
			A/P FY 01-02 R-Z						
			FY 01-02 COPIES OF IMPREST CHECKS						
135 (FILE CABINET)	FINANCE		A/P FY 02-03 A-CHI		P	07/01/14	7 YEARS		OFFSITE STORAGE
			A/P FY 02-03 CHI-J						
			A/P FY 02-03 K -RI						
			A/P FY 02 - RI-Z						
136 (FILE CABINET)	FINANCE		COPIES OF IMPREST FY 02-03		P	07/01/14	7 YEARS		OFFSITE STORAGE
			PR RECON/IMPREST FY 02-03						
			A/P FY 03-04 A-COM						
			A/P FY 03-04 COM-K						
137 (FILE CABINET)	FINANCE		A/P FY 03-04 LA-RE		P	07/01/15	7 YEARS		OFFSITE STORAGE
			A/P FY 03-04 RI-Z						
			IMPREST FY 03-04						
			COPIES OF CHECKS/REPORTS						
138 (FILE CABINET)	FINANCE		IMPREST FY 03-04/ATTENDANCE LOG SHEETS		P	07/01/15	7 YEARS		OFFSITE STORAGE
			FY 03-04 ATTENDANCE LOG SHEETS						
			NORWALK LA MIRADA AUDIT FY 03-04						
139	CONTRACTS		DREW CHILD DEVELOPMENT COPR.	07/2004 - 06/2205	P	10/31/12	4 YEARS		OFFSITE STORAGE
			CHILD FAMILY GUIDANCE CENTER	07/2004 - 06/2005					
			LA GAY & LESBIAN CENTER	07/2006 - 06/2007					
			CHILDREN'S HOSPITAL	07/2004 - 06/2005					
140 (FILE CABINET)	FINANCE		A/P FY 04-05 A-CI		P	07/01/15	7 YEARS		OFFSITE STORAGE
			A/P FY 04-05 CI-IN						
			A/P FY 04-05 IS-PA						
			A/P FY 04-05 PC-Z						
141 (FILE CABINET)	FINANCE		IMPREST FY 04-05		P	07/01/15	7 YEARS		OFFSITE STORAGE
			IMPREST FY 04-05						
			CANCELLED CHECKS FY 03-04						
			IMPREST FY 04-05						
142 (FILE CABINET)	FINANCE		A/P FY 05-06 A-BI		P	07/01/16	7 YEARS		OFFSITE STORAGE
			A/P FY 05-06 CH-H						
			A/P FY 05-06 I-N						
			A/P FY 05-06 OT						
143 (FILE CABINET)	FINANCE		A/P FY 05-06 TR-Z		P	07/01/16	7 YEARS		OFFSITE STORAGE

F5LA RECORDS DESTRUCTION INVENTORY LIST - SEPTEMBER 2017

BOX / CABINET #	DEPARTMENT	CONTRACT#	(GRANT NAME) (CONTRACT) (DESCRIPTION)	CONTRACT PERIOD	MEDIA TYPE: P=PAPER	SCHEDULED DISPOSAL	RETENTION POLICY	DISPOSAL DATE	STORAGE LOCATION
144	CONTRACTS	00514	F5 CA CYCLE 2 APP LAUSD HYDE PARK	2007 - 2011	P	07/08/16	4 YEARS		OFFSITE STORAGE
		00515	F5 CA CYCLE 2 APP ICGC	2007 - 2011					
		00516	F5 CA CYCLE 2 APP IILA	2007 - 2011					
		00517	F5 CA CYCLE 2 APP LONG BEACH USD	2007 - 2011					
		00518	F5 CA CYCLE 2 APP MTN VIEW USD	2007 - 2011					
		00519	F5 CA CYCLE 2 APP PARA LOS NINOS	2007 - 2011					
		00520	F5 CA CYCLE 2 APP PARAMOUNT USD	2007 - 2011					
		00522	F5 CA CYCLE 2 APP POMONA USD	2007 - 2011					
		00523	F5 CA CYCLE 2 APP ST JOHNS HOOVER	2007 - 2011					
00524	F5 CA CYCLE 2 APP LAEP	2007 - 2011							
145	FINANCE		BEST START REQUEST FOR VENDORS, CYCLE 1	2010 - 2011	P	07/07/15	4 YEARS		OFFSITE STORAGE
			BEST START REQUEST FOR VENDORS REVIEW TOOLS	2010 - 2011					
			BEST START REQUEST FOR VENDORS, CYCLE 1	2011					
			FY 2009 - 2010 FORMS N & P (DISPOSAL 2016)	2007 - 2011					
						07/08/15			

FIRST 5 LA

SUBJECT:
Strategic Plan Implementation Update, Year 2

BACKGROUND:

First 5 LA began the official implementation of its newly adopted strategic plan on July 1, 2015. Similar to last year, the July 13th Commission meeting was dedicated to reviewing how First 5 LA is approaching the Strategic Plan implementation to achieve desired system and policy changes for children and families. The workshop included a presentation by staff on First 5 LA's approach to systems change, how systems change differs from policy change, and how this system change effort is driving our approach in the four outcome areas.

Following the brief presentation by staff, Commissioners participated in two breakout sessions related to our emerging work in the Health Systems Outcome, Trauma Informed Care Strategy, and the Communities Outcome, Built Environment Strategy. The breakout sessions provided an opportunity for Commissioners to: (1) hear directly from our partners in this work; (2) discuss emerging opportunities to advance this work from a systems change perspective; and (3) discuss the potential role for First 5 LA in advancing this work. .

KEY THEMES

The July 14 Commission meeting provided an important opportunity for Commission members to provide input on the Strategic Plan implementation and engage in a discussion on First 5 LA's role and contribution to achieve policy and systems change to support family and child outcomes.

Key themes that emerged from the discussion include:

- *Importance of clear and consistent terminology*– System change is complex and there are multiple definitions and perspectives on what system change means and how it is operationalized. It is critical for First 5 LA to be clear on what we mean by system change, how we view and understand our role in systems change, and how we are operationalizing our systems change work.
- *System change work is complex* – System change work is complex and reflects the work of multiple partners involved in multiple related work streams. The complexity of the work needs to be recognized, but not hamper or hinder efforts. Given this complexity, First 5 LA must be clear of its role and how it will contribute to system change efforts working with key partners.
- *Recognition that parents and families must be at the center of all system change efforts* – Our system change efforts must be focused on building and changing systems to address the needs and priorities of families and parents. Systems must be changed to be family-focused and centered and recognize the relationship and interrelatedness among the four outcomes to improve conditions for children.
- *Importance of the development of an approach to measure our impact* – Recognizing the complexity of systems change work, development of a plan to measure our impact that is tailored to the intended outcomes and is an important next step. Identifying metrics that can capture measurable progress of system change efforts has to consider the current broader context as well as markers of the intended change. This represents a significant change from the prior direct service evaluation approach employed by First 5 LA.

Attachment 1 provides a summary of the key themes that emerged in the two breakouts to support the Commissioner discussion at the September meeting. The key themes reflect high-level

summaries of Commissioners' feedback in terms of the opportunities, potential roles, and approaches that First 5 LA could pursue to advance systems change in implementing the Built Environment and Trauma Informed Care strategies.. Due to time constraints, Commissioners did not have an opportunity to reconvene, discuss the breakout sessions as a full Board, and provide any needed direction to staff. Time has been reserved at the September meeting for Commissioners to have this discussion and, as appropriate, provide direction to staff.

CONCLUSION:

Feedback from the July meeting has been documented and will provide guidance as staff continues to explore the role that First 5 LA can exercise in advancing systems change to improve outcomes for children and families. The September meeting will provide an opportunity for further discussion among Commissioners and to provide direction, as necessary, to staff.

First 5 LA Board of Commission Meeting
Trauma Informed Care: Breakout Session
Meeting Notes
July 13, 2017

Summary:

The Trauma Informed Care breakout session was facilitated by John Ott from the Center for Collective Wisdom. John highlighted challenges in addressing trauma in systems throughout the county and initiated a discussion of potential ways in which First 5 LA can advance this work. The following background/overview was provided:

- The popularization of Adverse Childhood Experiences (ACEs) could engender a defeatist mentality, that one cannot do anything about it. It is important to address both trauma and resilience to inspire hope and the capacity to heal.
- Most trauma informed care efforts have focused on evidence-based practices or the medical model approach to diagnose and treat individuals. Trauma, however, also transmits culturally, historically and throughout a community.
- Locally, efforts in LA County have not taken the step to connect systems change work to community change efforts to address both individual and community trauma.

Questions offered to help frame breakout conversation:

Question 1: How do we view First 5 LA's Trauma Informed Care strategy in helping advance First 5 LA's mission and targeted outcomes?

Question 2: What are the opportunities to advance this work at this time?

Question 3: What can First 5 LA do to advance this work and contribute to desired outcomes?

The following *themes* emerged from the breakout sessions:

Theme 1: Trauma informed care is linked to desired results - Trauma (root cause), not symptoms, must be addressed to achieve desired outcomes and sustainable results.

Theme 2: Self-care for staff that are engaged in working with traumatized communities is important. The Department of Child and Family Services (DCFS), for example, has hired a psychologist to support staff.

Theme 3: A trauma informed care approach is foundational and not something extra or in the moment (avoid the risk of initiative fatigue).

Theme 4: This is personal - individual stories are important to make trauma and resiliency real and make connections.

Theme 5: Given that this work will be a long term process for culture change, each system (DMH, DCFS, Probation, etc.) will have a different starting place to address trauma. First 5 LA must be strategic on where to start and it needs to be endorsed by the leadership team. DCFS, for example, is shifting away from enforcement to addressing vicarious and secondary trauma. A new protocol has been put into place at DCFS to mitigate problems. Addressing trauma is much bigger than First 5 LA, but this conversation is a good start. Systems/Government is the only entity that can address the scale of this problem.

Theme 6: In systems work, it is important to acknowledge the complexity of communities that have been abandoned and subject to intergenerational trauma. Important for staff to understand community context and not to blame individuals – ask people what happened to you vs. what’s wrong with you. How do we ask the right questions and bring people together? The ever-changing political climate also impacts community - the current anti-immigrant rhetoric induces trauma; people may not realize the fear they are experiencing is trauma.

Theme 7: Systems change work must be linked with community work: It is imperative to address both systems and community; county systems need to be more trauma and resiliency-informed and community capacity needs to be strengthened to address their trauma. Great services alone are not enough. This is an opportunity for First 5 LA to merge systems change with community change through Best Start.

Theme 8: What is First 5 LA’s role in language and definitions around trauma and resilience? Is it accessible to the community? Do we have the trust and expertise to speak about trauma in the community?

Theme 9: “Cosmic Dissonance” – exposure to trauma can be devastating and it changes the way you deal with the world. It is important to look at symptoms and signs (mental health) to bridge understanding.

Theme 10: Direct relevance to 0-5 population - early exposure to trauma impacts brain development. First 5 LA brings the perspective of families with children ages 0-5 and represents their unique needs.

Theme 11: Data is needed to guide decision making for investment. Identifying hotspots to address trauma and support resilience will best inform policies and programs.

First 5 LA Board of Commission Meeting
Built Environment: Breakout Session
Meeting Notes
July 13, 2017

Summary:

On July 13th the First 5 LA Board of Commissioners convened to learn more about two new strategies - Trauma Informed Care (TIC) and the Built Environment (BE) and how they each align with the current Strategic Plan.

The BE small group discussion was facilitated by Prevention Institute (PI) and provided an overview of the Built Environment and key issues for First 5 LA to consider moving forward, such as learning, how BE aligns with First 5 LA's Strategic Plan and how First 5 LA can position itself to support existing BE opportunities across Los Angeles County. The Prevention Institute addressed the following points:

- The relationship between healthy outcomes and the Built Environment.
- Opportunities for multi-sectorial collaboration.
- Transformational moments in Los Angeles with passage of Measures A and M.
- Issues of health equity via The Built Environment (e.g. high rates of obesity in park poor communities, food deserts and pedestrian injuries in low-income communities).

The Built Environment refers to the places where people live, work, play and pray. The BE is critically important to the development of children 0-5 and includes the physical conditions, resources, neighborhood spaces and local institutions that are (and are not) available to residents.

The following *themes* emerged from Breakout Sessions 1 and 2:

Question 1: What is First 5 LA's role in advancing a systems change and policy agenda in the Built Environment?

Theme 1: Recognize the relationship between the Built Environment and health outcomes for children and families (e.g. high rates of obesity in park poor communities, food deserts and pedestrian injuries in low-income communities).

Theme 2: Collaborate with parents and residents to have community buy-in and community ownership to sustain Built Environment efforts.

Theme 3: Engage parents and residents who need to know their communities are safe in order for them to utilize parks, transportation and other resources in their communities.

Question 2: What are the opportunities to advance this work at this time?

Theme 4: Explore opportunities to build partnerships and connect Built Environment advocacy groups to Best Start Communities (BSC) members to build their advocacy capacity on topics such as Transportation, Healthy Foods and Safe Park Access.

Theme 5: Explore opportunities for joint-use – the sharing of space between schools and communities (e.g. using school spaces on weekends) as a means to offset the lack of parks and recreational space and increase opportunities for children to be more physically active.

Theme 6: Research opportunities for parents and residents to experience healthy, livable communities (e.g. Sierra Club –“Awe in Nature” and TED talks) to inspire parents and residents to improve physical conditions that negatively impact their community.

Theme 7: Important to talk about infrastructure, because currently the infrastructure in the BSCs is crumbling and needs to be supported.

Theme 8: Being aware of gentrification by exploring ways to potentially work with stakeholders and community to ensure families are not displaced because of new development.

Theme 9: Assess the impact of equity across the BSCs as it pertains to access to parks, transportation/mobility and healthy food access.

Theme 10: Leverage opportunities with LA County Measures – A (Parks & Open Space) and M (Transportation) to connect families with young children to public input forums and resources to increase park development and active transportation (e.g. sidewalks, bike lanes, street lights) across BSCs.

Question 3: What can First 5 LA do to advance this work and contribute to desired outcomes?

Theme 11: Explore opportunities to work with non-traditional partners and across different sectors to advance a 0-5 agenda (e.g. working with Metro).

Theme 12: Challenge traditional thinking by thinking outside the box and utilizing resources differently (e.g. First 5 LA issuing Tap Cards to Families with children for them to use public transportation system to access museums/cultural centers open spaces, and other natural resources such as the beach).

Annual Review of Strategic Plan

September 14, 2017

1ST  LA
first 5 la
Giving kids the best start

Today's Objectives

- Recap of the July Strategic Plan Workshop
 - Provide an opportunity to highlight key themes
 - Engage Commissioners in a discussion of key themes related First 5 LA's emerging strategies: Built Environment and Trauma Informed Care
- Today's discussion will inform future discussions regarding strategies implementation at PPC and Board

2015-2020 Strategic Plan

- The Strategic Plan is embedded with a systems change and policy framework
 - “Reduced emphasis on funding discrete direct services with impact at the participant level”
 - “Increased emphasis on systems change, collaboration, and public policy”
- Driven by desire to maximize impact on all children and families
- Intentional effort on systems change, informed by research and best practices

Systems Change and Policy Change

“A group of interacting, interrelated, and interdependent components that form a complex and unified whole”*

- **System Change** - Change that encompasses a broad set of interrelated changes including the norms, resources, behaviors, learned habits, culture, authority/decision-making and patterns operating within the legal, regulatory, social and community environment. 130
- **Policy Change** - Changes to rules governing institutions, practices, and resource allocation. Policy can be set by both public institutions (e.g., government) and private institutions (e.g. hospitals or employers)

Systems Change is Complex and Long Term

- Multi-dimensional - Systems are the work of multiple agendas constantly interacting
- Dynamic – Reflects works of multiple agents that are constantly changing
- Interdependent – No single entity has the technical capacity, jurisdiction to make the change to achieve targeted outcomes

Summary Themes

- Importance of clear and consistent terminology
- Recognition that parents and families must be at the center of all system change efforts
- Interrelatedness of the work across all four outcomes
- Critical need to develop a plan for how we will measure and report out First 5 LA's contribution to system change and progress in our work

Upcoming Sessions for Fall 2017/ Winter 2018

- How will we measure systems and policy change?
 - How will we monitor the changing context?
 - What are priority metrics to understand our impact?
- Learning agenda for specific outcome work
 - e.g. Best Start Learning Agenda
- Strategy discussions at PPC regarding implementation of Trauma Informed Care and Built Environment

Breakout Group Reports

- The July Meeting included facilitated discussions about First 5 LA's emerging work in two strategies:
 - Communities Outcome: Built Environment
 - Health Systems Outcome: Trauma Informed Care

First 5 LA

SUBJECT

Family Supports: Board of Supervisors Home Visiting Motion Update

BACKGROUND

First 5 LA's 2015-2020 Strategic Plan brings greater focus and clarity to the organization's role and impact on the lives of LA County's children 0-5 and their families. Our strategic plan is driven by core principles of partnership-building, policy and systems change and sustainability of outcomes set against a backdrop of declining state tobacco tax revenues.

The application of these principles is particularly evident in our approach towards our significant and long-standing investment in home visiting. Today, First 5 LA is the single largest funder of home visiting in the County, and the only funder of universally-offered services. Moving these investments towards long-term sustainability, while addressing large unmet community needs, is one of the most pressing challenges facing our agency, as well as the network of home visiting programs in Los Angeles.

First 5 LA's agency goals are closely aligned to those of the County of Los Angeles as it relates to prevention for children and families. This is demonstrated by the partnership First 5 LA shares with the County relative to the Office of Child Protection Prevention Plan's focus on expanding families' access to voluntary home visiting programs and quality early care and education and the recent priority the Board placed on building an integrated system of home visiting. The Board of Supervisor's motion passed in December of 2016, requested Department of Public Health as the lead agency, along with a number of partners including First 5 LA, the LA County Perinatal and Early Childhood Home Visiting Consortium (LAPECHVC), Office of Child Protection, and several child and family-serving County departments, to come together to plan and build a coordinated system of home visiting supports for Los Angeles County families with children ages 0-5. In response, First 5 LA, along with this group of countywide partners, has been meeting on a bi-weekly basis since the beginning of 2017 to build out this vision and plan.

SUMMARY

At the September 14, 2017, Board of Commissioners meeting, staff will present an update on the evolving and continued partnership with County Departments and community partners to develop a plan in response to the December 2016 Board of Supervisors motion, which calls for a coordinated system of home visiting for families of children 0-5 in LA County. In June 2017, progress on this plan was submitted to the LA County Board of Supervisors in a report titled "Maximizing and Expanding Home Visiting Services for Families in LA County."

The presentation will be a summary of the report findings, which includes an initial gap analysis demonstrating significant community need for home visiting supports relative to currently available resources. The report compiles lessons learned from home visiting models and best practices across the nation, and offers recommendations in several key areas including: guiding principles for developing a coordinated system for the several home visiting programs operating in the County, strategies to address gaps in services for high-risk populations, data collection to inform shared outcomes, and maximizing revenue for sustainability. Finally, the presentation will include key developments and commitments by First 5 LA and our County and community partners to date in 2017.

Attachment:

Maximizing and Expanding Home Visiting Services for Families in Los Angeles County Update, June 21, 2017. Progress Report submitted to the LA County Board of Supervisors from Dr. Barbara Ferrer, Director, County of Los Angeles Department of Public Health.

Family Supports: Board of Supervisors Home Visiting Motion Update

F5LA Board of Commissioners Meeting

September 14, 2017

136



Presentation Objectives

- Provide an Update on:
 - Countywide Home Visiting Motion Planning Effort
 - Welcome Baby/Select Home Visiting Efforts
- Review Collaboration with County Departments to support:
 - System-Building
 - Policy & Advocacy
 - Sustainability/Fund Leveraging

137



Universal Voluntary Home Visiting

Building A Sustainable System

Policy and
Advocacy

Learning
Agenda

Program
Optimization

138
System
Building

Home Visiting Motion: Charge and Recommendations

Charge of Motion Response Workgroup led by Department of Public Health:

“Develop a plan to coordinate, enhance, expand and advocate for high quality home visiting programs to serve more expectant and parenting families.”

Recommendations:

- 1) Create a coordinated system for home visitation programs
- 2) Assess national models and best practices
- 3) Identify gaps in services and strategies to address gaps
- 4) Increase access for high risk families
- 5) Collect, share and analyze standardized data in a consistent manner to inform outcomes
- 6) Develop a framework to maximize resources to support expansion and sustainability

139

Home Visiting Motion: Vision Statement

Together, we aspire to achieve the following vision of high-quality home visiting supports for LA County families: A system of voluntary, culturally responsive home-based family strengthening services available to all Los Angeles families with children prenatal through age five that:

- Optimizes child development
- Enhances parenting skills and resilience
- Safeguards maternal and infant health
- Prevents costly crisis intervention
- Reduces adverse childhood experiences
- Demonstrates improved educational and life outcomes

140



Recommendation 1: Create a Coordinated System for Home Visitation Programs

Guiding Principles:

- Both Light-touch & Intensive Support Options are Necessary
 - No Wrong Door
 - Strong Data Tracking
 - Need for Improved Coordination
 - Fundamental Shortage of Resources Must be Addressed
- First 5 LA provides the only “universal” access in the county through Welcome Baby, which is at increased risk as First 5 LA funding declines

141



Recommendation 2: Assess National Models and Best Practices

- LA County Has a Strong Base of Quality Home Visiting Programs
- A Common Definition for Home Visiting is Critical
- Centralized Recruitment/Intake Should be Developed Based on Local Practice
- Cultural Competency Must be More Strongly Embedded in Program Implementation
- Quality/Effectiveness of Programs is Directly Related to Level of Training & Support

142



Recommendations 3 & 4: Strategies to Address Gaps in Services and Access

What We Have Learned:

- Considerable Gap in Community Need and Services Available
- Need Varies by Geography
- Communities Need More:
 - Universal **and** Higher Intensity Prevention Services
- Eligibility Criteria for Individual Programs are Limiting
- Need for Increased Coordination Relative to Prenatal Referrals
- Need for Long-Term and Flexible Funding to Ensure Sustainability

143

Examples of Key Efforts:

- Perinatal Mental Health Cross Training, Referral Coordination, Prevention and Early Intervention (Department of Mental Health)
- Improving Referral Bridges from County Departments, Medical Providers and other Community Touchpoints in to HV (Department of Public Social Services)

Welcome Baby and Select Home Visiting Data

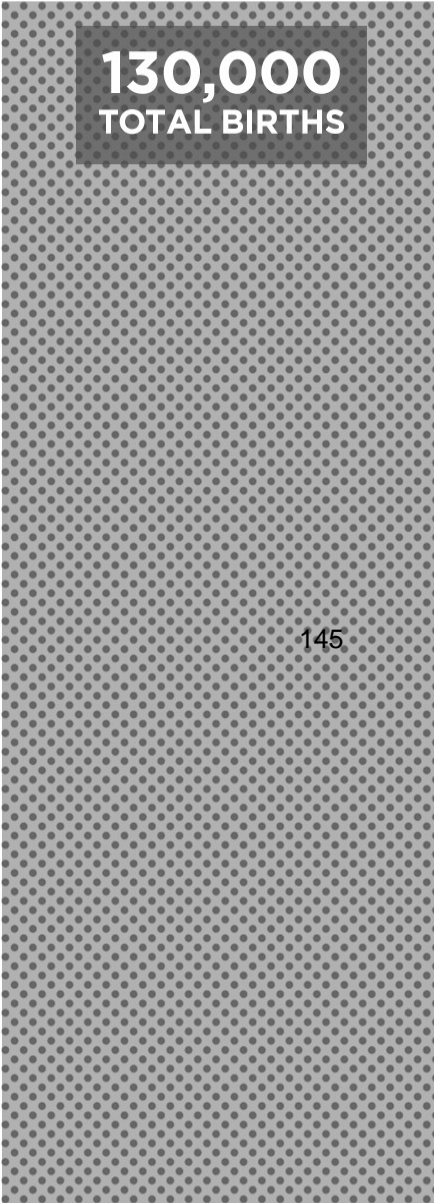
Program	FY 15-16 Families Served	FY 16-17 Families Served	Percent Change from Previous Fiscal Year
Welcome Baby	11,429	13,607*	19% increase
Select Home Visiting	936	918	2% decrease

144

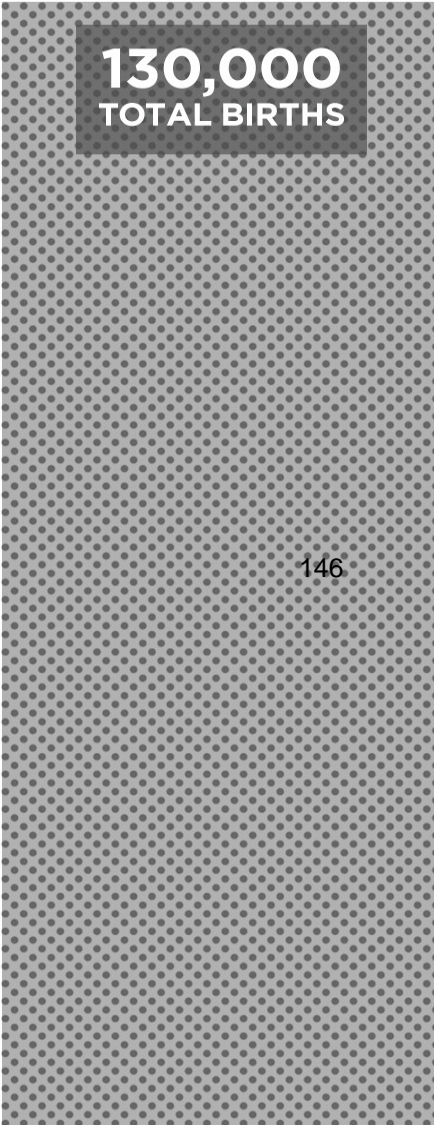
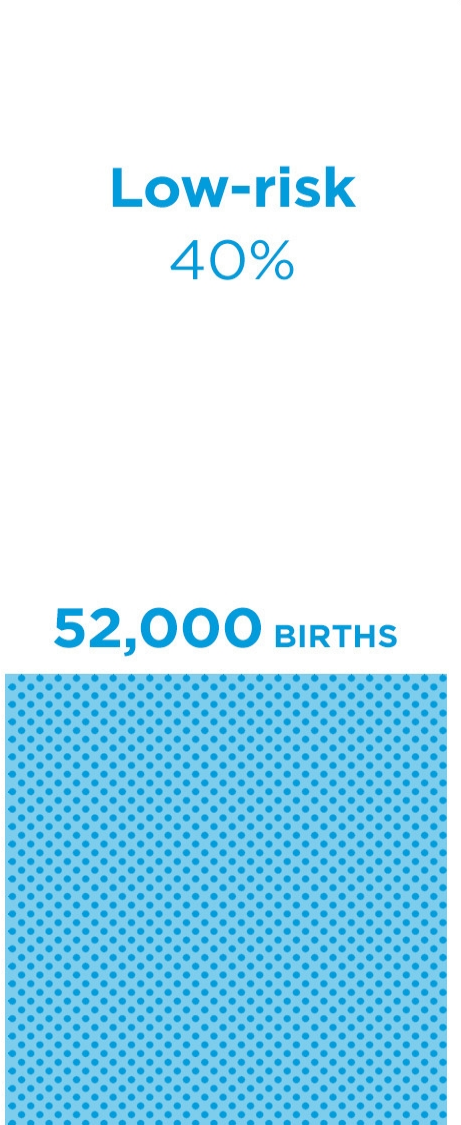
*In FY16-17, of those families served by Welcome Baby, 44% were Best Start families and 56% were non-Best Start. Non-Best Start families are eligible for a lower dosage of services than their Best Start counterparts. Also of note in FY16-17, of families identified as high risk, 60% were enrolled into Select Home Visiting services.



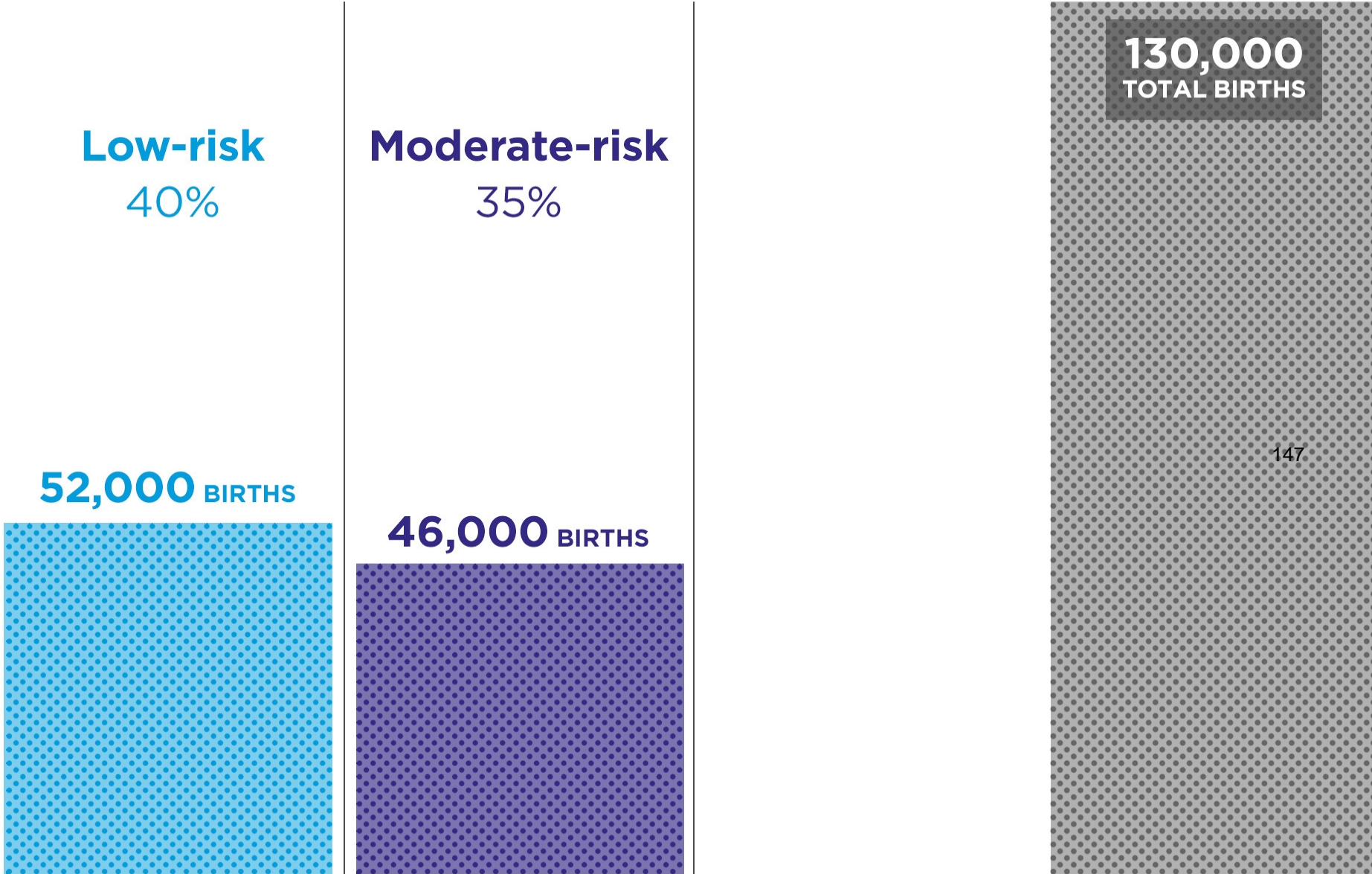
Meeting the Needs of L.A. County Births



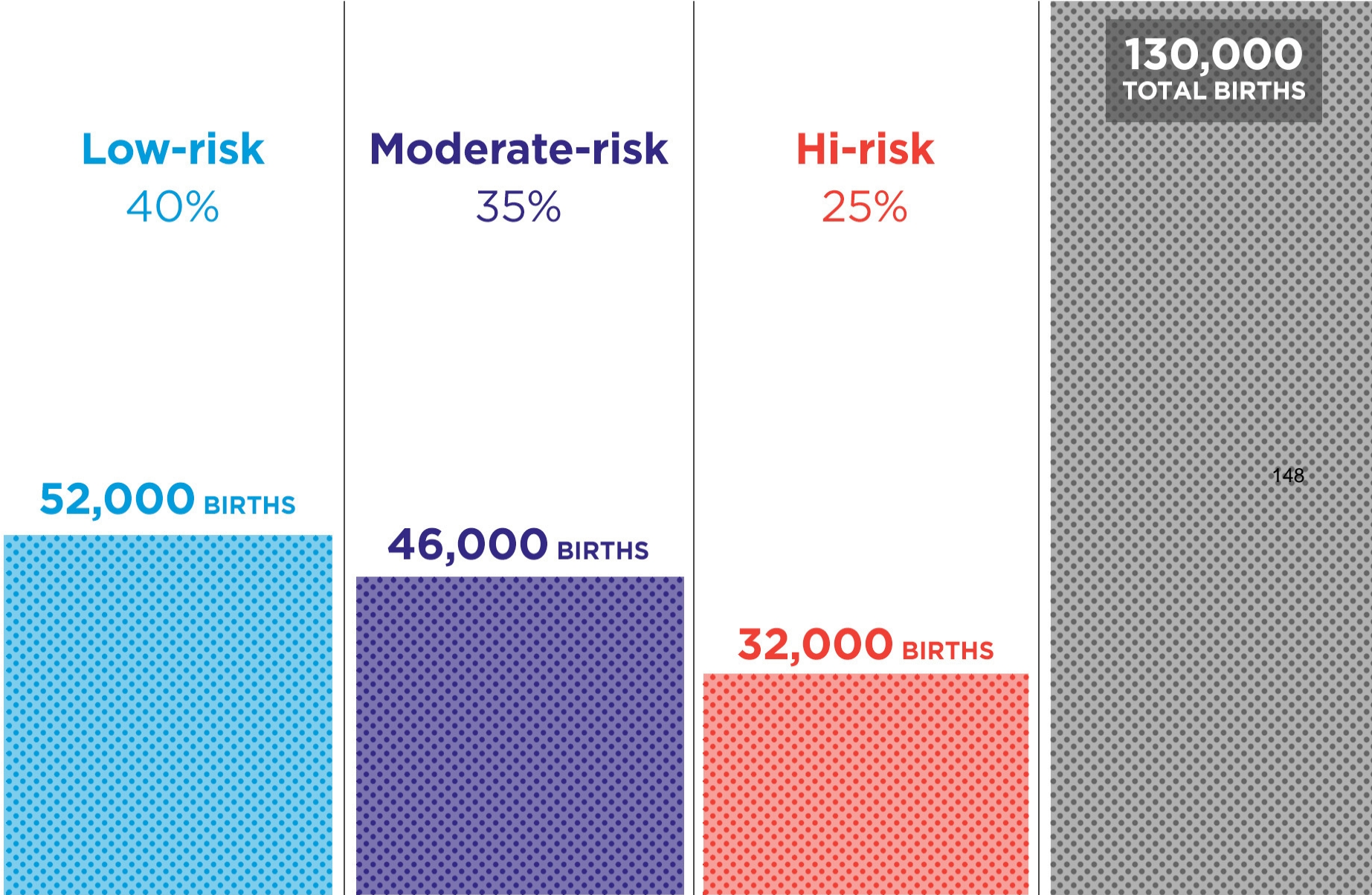
Meeting the Needs of L.A. County Births



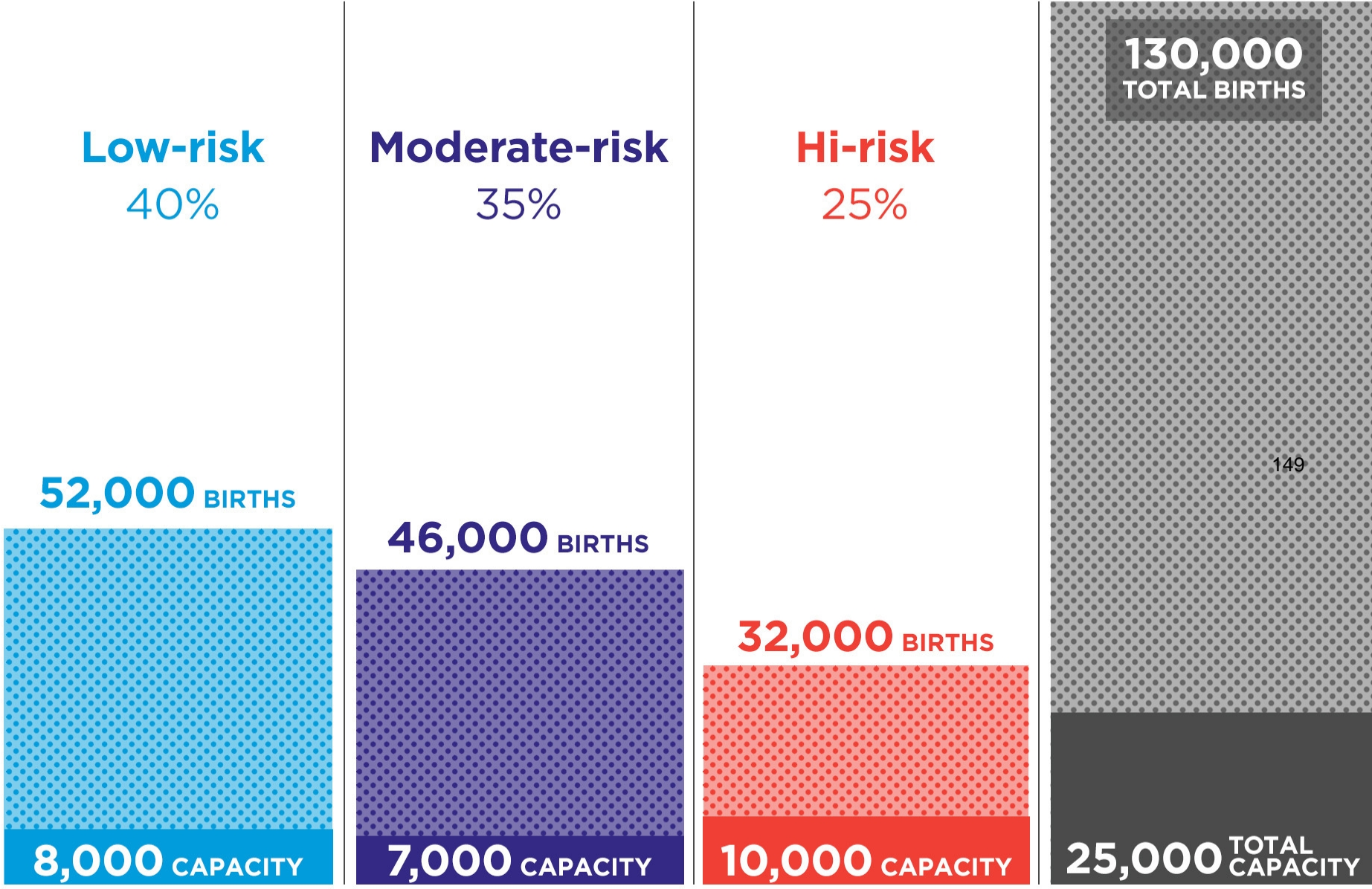
Meeting the Needs of L.A. County Births



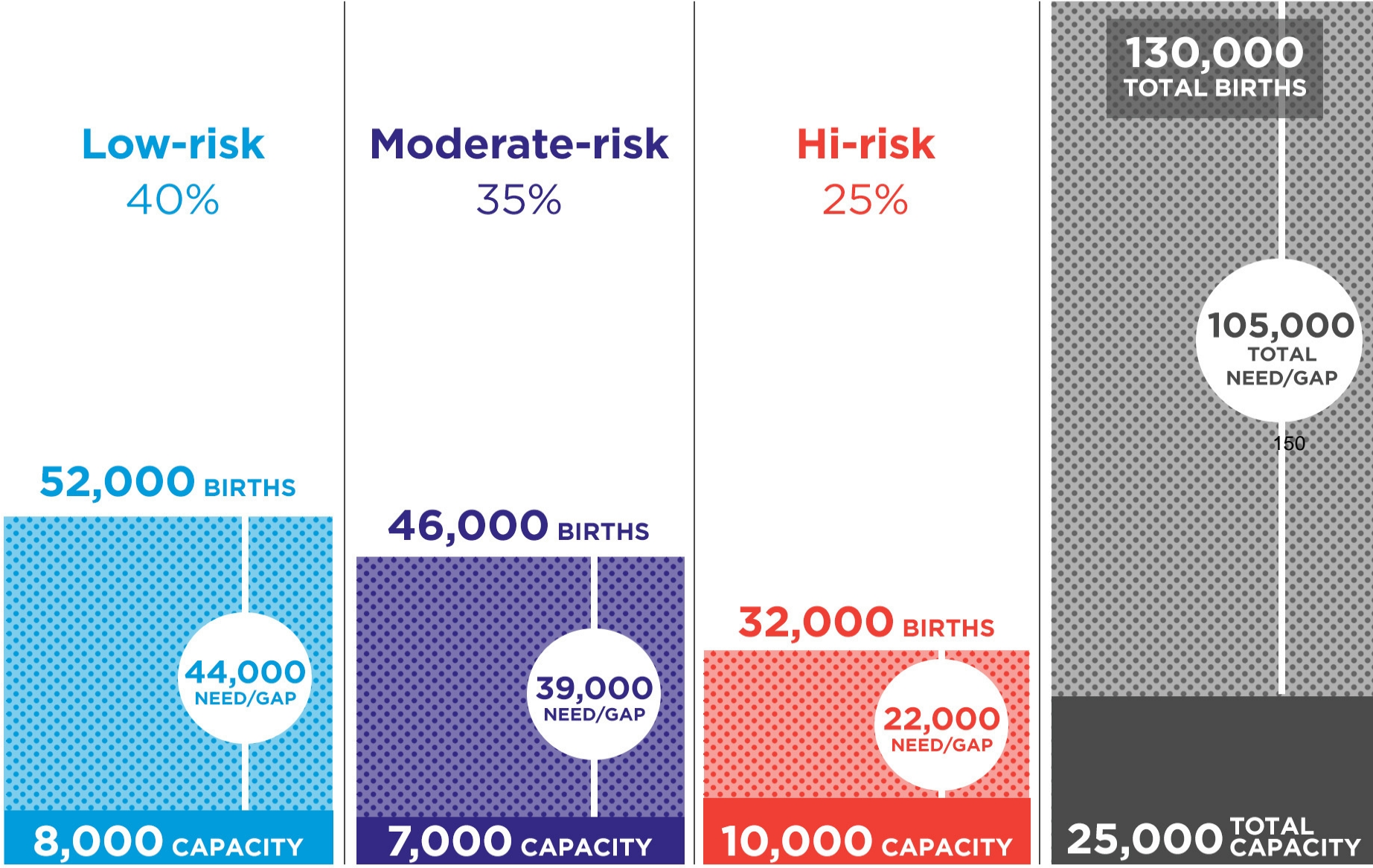
Meeting the Needs of L.A. County Births



Meeting the Needs of L.A. County Births



Meeting the Needs of L.A. County Births



Recommendation 5: Collect, Share and Analyze Standardized Data to Inform Outcomes

What We Have Learned:

- Consistent Countywide Data Collection and Tracking is an Important Goal
- Need to Identify Other HV-Comparable Family Prevention and Intervention Strategies

Example of Key Efforts:

- Strengthening Families Database (First 5 LA)
- Cross-Program Shared Indicators Effort (LA County Home Visiting Consortium)
- Data-Matching (Children's Data Network)

151



Recommendation 6: Develop a Framework to Maximize Resources to Support Expansion and Sustainability

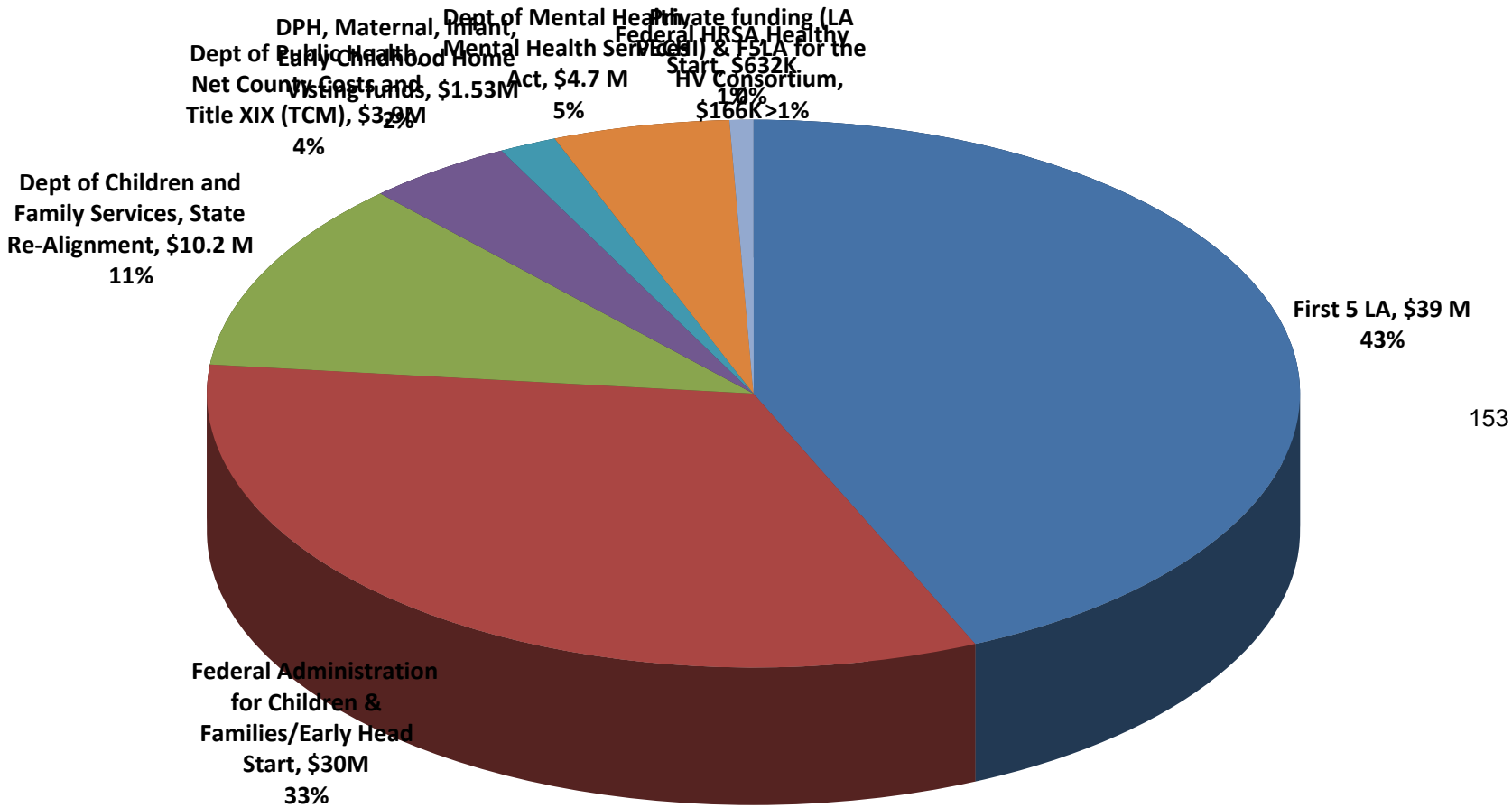
What We Have Learned:

- First 5 LA is the most significant funder in the County
- LA County is not maximizing federal revenue – “leaving money on the table”
- Short term investment could support long-term sustainability
- Strategies Include:
 - Blending/Braiding Funding Streams
 - Coordinating Countywide Home Visiting Funding
 - Exploring Role of Philanthropy
 - Engaging in Policy and Advocacy Efforts

152



Home Visiting Funding Estimates in LA County, FY16-17



Emerging Opportunities in Sustainability

Funding Type	Relevant LA County Department
Medicaid/Targeted Case Management (TCM)	Public Health
Temporary Assistance for Needy Families	Public Social Services
Prevention and Early Intervention Funds	Mental Health
Medicaid 1115 Waiver/Whole Person Care Pilot	Health Services
<i>Exploratory</i>	Probation

154



Developments, Commitments and Next Steps

- Developed a Common Vision and Guiding Principles
- Identified Common Data Collection Mechanisms
- Establishing Target System Scale and Cost
- Piloting New Referral Pathways (DMH, DPSS)
- Improving Perinatal Mental Health Resources
- Exploring Sustainable Funding Opportunities
- Engaging the Private Sector
- Cross-Departmental Collaboration

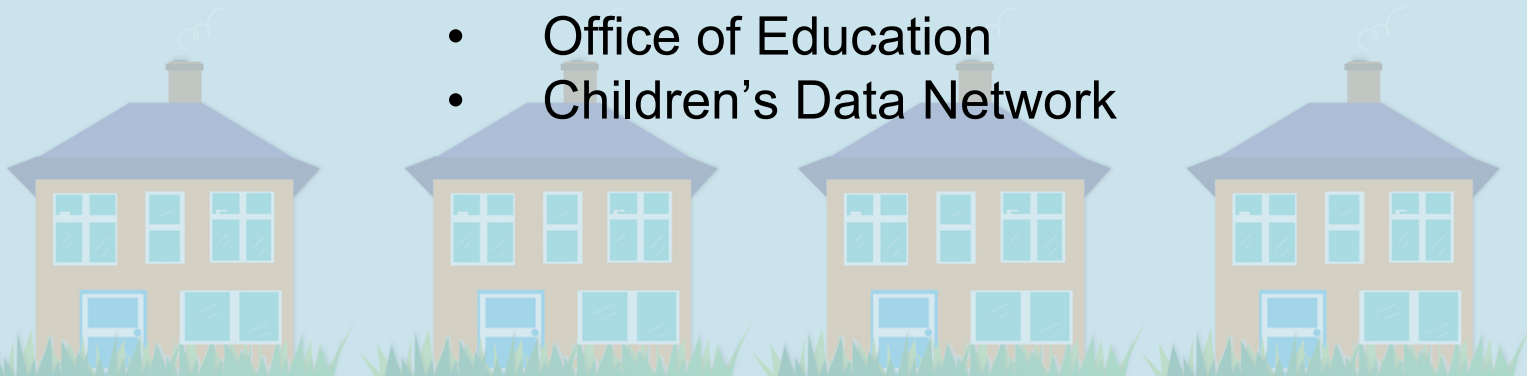
155



Los Angeles County Home Visiting Partners

- Public Health Department
- Office of Child Protection
- Home Visiting Consortium
- Children & Family Services Department
- Public Social Services Department
- Mental Health Department
- Health Services Department
- Probation Department
- Libraries
- Office of Education
- Children's Data Network

156



Questions





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June 21, 2017

TO: Each Supervisor

FROM: Barbara Ferrer, Ph.D., M.P.H., M.Ed.
Director *Barbara Ferrer*

SUBJECT: **MAXIMIZING AND EXPANDING HOME VISITING SERVICES FOR FAMILIES IN LOS ANGELES COUNTY UPDATE**

This is in response to the December 20, 2016 Board motion instructing the Department of Public Health (DPH), in collaboration with First 5 LA, the LA County Perinatal and Early Childhood Home Visitation Consortium, the Office of Child Protection (OCP), the Children’s Data Network, and the Departments of Health Services (DHS), Mental Health (DMH), Public Social Services (DPSS), Children and Family Services (DCFS), and the Probation Department (Probation), to develop a plan to coordinate, enhance, expand, and advocate for high quality home visiting programs to serve more expectant and parenting families so that children are healthy, safe and ready to learn. Specifically, your Board directed DPH to:

- I. Assess how national models and best practices, including those with a single entry portal, may inform or be adapted to improve outcomes for Los Angeles County.
- II. Create a coordinated system for home visitation programs that includes a streamlined referral pathway and outreach plan to ensure maximum program participation, especially in Los Angeles County’s highest risk communities. A single responsible department or organization may be identified to maintain the coordinated referral system.
- III. Identify gaps in services for high-risk populations based on review of effective national models, existing eligibility requirements, and cultural competencies. The plan should develop strategies to address these gaps.
- IV. Increase access to voluntary home visitation for families at high risk of involvement with the child welfare system, consistent with the recommendations of the Los Angeles Blue Ribbon Commission on Child Protection.
- V. Collect, share and analyze a standardized and consistent set of outcome data leveraging the Consortium’s Los Angeles County Common Indicators pilot project.
- VI. Include a framework to maximize resources by leveraging available funding, and, where possible, identify new and existing, but not maximized, revenue streams (through State and federal advocacy, and opportunities ~~for~~ local investments) to support home visiting expansion.

For purposes of this report, home visiting is defined as follows: Perinatal and early childhood home visiting is a multi-disciplinary, family-centered support and prevention strategy with services delivered by trained professionals in the home that: (1) is offered on a voluntary basis to pregnant women and/or families with children through the age of five; (2) provides a comprehensive array of holistic, strength-based services that promote parent and child physical and mental health, bonding and attachment, confidence and self-sufficiency, and optimizes infant/child development by building positive, empathetic, and supportive relationships with families and reinforcing nurturing relationships between parents and children; and (3) is designed to empower parent(s) to achieve specific outcomes which may include: healthy pregnancy, birth and infancy; optimal infant/child development; school readiness; self-sufficiency; and prevention of adverse childhood and life experiences

In preparing this response DPH convened a bi-weekly cross agency research and planning team (Planning Team). The Planning Team completed the requested national and local research, drafted Guiding Principles, a Collective Vision, and Focal Areas for a system of home visiting in Los Angeles County. In addition, the Planning Team engaged the other County departments and organizations listed in the Board motion as well as the business and philanthropic communities, and hosted structured opportunities to gather stakeholder input, identify barriers/opportunities, inform priorities, and build consensus. Below are highlights of specific engagement activities:

Hosted Home Visiting Providers Community Roundtable

The Planning Team hosted a Community Roundtable on March 17, 2017, in order to gather the input and expertise of local home visiting providers regarding community needs and opportunities for system improvement. Over 90 agency representatives participated and helped identify both countywide trends and needs specific to Service Planning Areas (SPAs). Appendix A, "Executive Summary of Home Visiting Roundtable," summarizes the results of the feedback gathered at this event. The most-cited opportunity to improve outcomes for families was the opportunity to better coordinate connections to ancillary services, particularly mental health services. Home visiting agencies expressed that the effectiveness of services could be enhanced by strengthening access to County supports for home visiting clients, especially for pregnant and new mothers suffering from perinatal mood and anxiety disorders. Other key points included: (a) confirmation by community leaders of the need for more flexible funding to make home visiting services available to all families in need, (b) interest in exploring medical billing options, (c) interest in investment in technology (to improve efficiency, outreach/engagement, referrals, billing, and outcome tracking), and (d) desire to strengthen ties with the medical community.

Convened County Leadership

The leadership of all County departments and organizations named in the December 20, 2016 motion convened for a series of four planning sessions (April 11, May 10, May 24, and June 7, 2017) to build a common vision for planning and collaboration, informed by the results of the Planning Team's research and the Community Roundtable. Participants included Directors, Deputy Directors, and other high-level leadership of DCFS, DPSS, DMH, DHS, Probation, OCP, the Children's Data Network, First 5 LA, and the Consortium. Through these convenings, County departments were able to establish a shared commitment to collaborating with provider agencies, community members, and one another in order to achieve an optimal and integrated system of quality home visiting support in Los Angeles County. The agreed upon Guiding Principles,

Collective Vision, and Focal Areas for future collaboration established through this process are outlined in section three of this report.

Engaged Business and Philanthropic Communities

Planning Team members engaged both the business and philanthropic communities, providing education on home visiting and opening up opportunities for both communities to provide supporting roles in upcoming home visiting system investment. DPH, DMH, and First 5 LA representatives presented a panel on home visiting in Los Angeles County and the associated Board motion at the Child Welfare Funders Collaborative meeting on February 15, 2017. A Home Visiting Ad-Hoc Funders Workgroup made up of foundation representatives who have agreed to be ambassadors for efforts in the philanthropic sector was formed to help develop and vet the proposals that come out of the County's planning efforts, such as requests for data infrastructure, capacity building of community-based organizations, support for new billing mechanisms, or outreach/marketing expertise. Planning Team members also met regularly with staff from the Los Angeles County Economic Development Corporation and the Los Angeles Area Chamber of Commerce to develop their support for home visiting initiatives.

This report summarizes progress on the six key elements outlined in the Board motion and proposes next steps for DPH, other County departments, the business and philanthropic communities, and other key stakeholders to advance a coordinated system of home visiting programs in Los Angeles County.

I. National Models and Best Practices

Analysis of national models and best practices, including interviews with leading researchers from Chapin Hall and University of Southern California, confirmed that the Los Angeles County has a strong base of quality home visiting programs established. It reaffirmed the value of many of the structures already in place and the direction of collaborative efforts already underway, including but not limited to chosen home visiting models, data tracking, best practice implementation, and intake systems.

Research regarding single-entry portals (or “centralized intake”) similarly reaffirmed local practices. While centralized intake has been implemented in other jurisdictions, the complexity and effectiveness of Los Angeles County’s established recruitment pathways indicate that a single-entry portal is likely not an optimal fit. Implementing a centralized recruitment and intake model in Los Angeles would likely decrease family engagement (by distancing recruitment from currently functioning, trusted referral sources), would require significant funding that may be better invested in other aspects of our home visiting system, and would require authority over programs that in some instances the County government does not control.

Research regarding cultural competency also pointed to the value of expanding existing Los Angeles County practices. Some models already in use in Los Angeles County have research demonstrating their effectiveness with specific minority populations (See Appendix B: Summary of Outcomes). More importantly, research underscored that the most important consideration in achieving culturally competent programs is not the structural model, but rather the integration of reflective practices into program implementation, training, and ongoing staff support. These revelations underscore the value of existing reflective practices and community feedback loops

that current home visiting programs are pursuing, and point to the value of ensuring that we support these practices in our countywide workforce efforts.

The quality and effectiveness of home visiting programs can be expected to be directly related to the level of training and support that provider organizations and their staff receive. Recognizing this fact, and the efforts already being led by the Consortium's Best Practices Workgroup, the Planning Team explored how First 5 LA and the County departments can best collaborate with the Consortium and the diversity of home visiting models within Los Angeles County to support excellence in training, supervision, cultural competence, and other best practice implementation. The philanthropic community has supported training efforts in other arenas and we will seek their support for these efforts here. In addition, First 5 LA and DMH plan to open their trainings to home visitors from all models, regardless of funding source.

II. Coordinated System for Home Visitation Programs

The leadership of each of the County departments and organizations named in the motion convened to develop a shared understanding of and commitment to building optimal home visitation systems in Los Angeles County. In keeping with the Los Angeles County 2016-2020 Strategic Plan, Objective I.1.6, "Support the leadership of First 5 LA, in partnership with the County, the Home Visitation Consortium and others to build a universal voluntary system of home visitation services through a streamlined system of referrals, and improved integration of services," a common framework was created to serve as the foundation for inter-departmental and cross-sector collaborative planning. The resulting definitions, outlined in this section, integrated the expertise of the departments with the knowledge of the current Los Angeles County family service landscape gained during the research and stakeholder engagement processes.

Vision

Together, we aspire to achieve the following vision of high-quality home visiting supports for Los Angeles County families:

A system of voluntary, culturally-responsive home-based family strengthening services available to all Los Angeles families with children prenatal through age five that:

- optimizes child development,
- enhances parenting skills and resilience,
- safeguards maternal and infant health,
- prevents costly crisis intervention,
- reduces adverse childhood experiences, and
- demonstrates improved educational and life outcomes.

Under this vision, all Los Angeles families with young children would have access to trusted professional support and coaching in their home, so that they and their children may thrive.

Guiding Principles:

1. Universal access to effective prenatal and early childhood support is beneficial for children's health and development, for maternal health, for family well-being and for our community as a whole.
2. Some families can also benefit from intensive home visiting support to address complex sets of challenges.
3. Home visiting is a highly effective perinatal support resource; it attains numerous family well-being and health outcomes, reduces the need for crisis intervention, and triages families to the appropriate level of additional resources and community activities.
4. Home visiting is not the only effective perinatal and early childhood resource and it is not the sole or optimal fit for all parents; however, for parents who voluntarily participate in home visiting services, research shows it is one of the most impactful.
5. No wrong door: Families will have the opportunity to access resources through multiple paths. To maximize families' access to home-based support, we commit to building and refining referral pathways:
 - a. that are attractive and easy to navigate from the family perspective (provided efficiently via trusted community providers),
 - b. that are effective in finding and attracting "at-risk" and prenatal families in particular, and
 - c. that are informed by process design principles, so that they work both for families and for staff in the departments involved.
6. Strong data tracking is essential to ensure highest quality services and optimal resource allocation.
7. Improving coordination can result in even better outcomes for our families and our community by ensuring (a) resources are maximized and (b) system connections are efficient and effective. Home visiting system coordination efforts should support, leverage, and be pursued in alignment with other change initiatives underway in Los Angeles County, including but not limited to the County Strategic Plan, Office of Child Protection's Prevention Plan, Help Me Grow, and other early childhood systems change initiatives.
8. There is a fundamental shortage of resources to meet the full potential need for home-based support in LA County. Expanded and more flexible financing is needed to meet community need. Adjustments should be made to current program recruitment and collaboration to ensure that existing funds are fully utilized, particularly for prenatal families.

Further exploration is underway to identify how additional infrastructure investments being underwritten by First 5 LA, County departments, the Consortium, and others may be expanded to support the teams and practices of all Los Angeles County home visiting models. In keeping with national research findings, this exploration will pay particular attention to cultural competency

and reflective practices. It will also include examination of investments required to meet the recruitment, career pathway, and training and education needs of the growing and evolving home visiting workforce. These efforts will also connect, leverage, and align with parallel County workforce development strategies.

III. Gaps in Services for High-Risk Populations and Strategies to Address Gaps

The Planning Team and the Los Angeles County Perinatal and Early Childhood Home Visitation Consortium (Consortium) collectively engaged in deep analysis of the Los Angeles County home visiting landscape in order to ground its planning in current local data and sound knowledge of nationwide best practices.

This analysis of current home visiting capacity and gaps revealed that Los Angeles County has a strong base of quality home visiting programs; however it also revealed a stark difference between the quantity of home visiting available and the full community need for such programs. This section summarizes those results (See Appendix C: Executive Summary - Home Visiting in Los Angeles County: Current State, Gaps & Opportunities for more detail on the findings of the gap research).

Current publicly-funded¹ home visiting programs in Los Angeles are funded through the contributions of five local governmental entities, plus numerous contracts awarded by the federal government to local non-profit organizations.

Funding Source	Models	Number & Type of Families Funding Can Serve
First 5 LA	Healthy Families America & Parents as Teachers; Welcome Baby	3,100 High-Risk Families/Yr 15,000 Families/Yr
Dept. of Public Health (MIECHV, TCM, MAA) Dept. of Mental Health (MHSA/PEI)	Nurse-Family Partnership Healthy Families America	1,210 High-Risk Families/Yr
Dept. of Children & Family Services (State Realignment)	Partnerships for Families	1,260 High- Risk Families/Yr
Federal Contracts (HRSA Healthy Start, Head Start)	Early Head Start Healthy Start	3,950 High-Risk Families/Yr

Collectively, these funding streams enable 55 local non-profit organizations to provide home visiting services to young Los Angeles County families, with the collective total capacity to help approximately 24,500 families per year, including the capacity to provide intensive services to approximately 9,500 high-risk families per year. Appendix D, “Home Visiting Providers in Los

¹ While the majority of home visiting programs in Los Angeles operate utilizing public funding, it is worth noting that there are additional smaller home visiting programs run by non-profit agencies utilizing philanthropic or grant dollars that are not included in the numbers herein. There are also additional family services provided in the home (such as home-based therapeutic interventions) that are not reflected here because they are either not preventative or not comprehensive.

Angeles County, By Program Model,” enumerates the local non-profit organizations providing home visiting services and indicates the models each offers.

Comparing this capacity to the full community need for family support among prenatal and young families reveals a substantial gap in services for both high-risk populations and the general Los Angeles County population. The 2014 DPH LAMB survey data reveals an estimated 78,500 families in Los Angeles County each year exhibit at least one high-risk factor;² an estimated 33,000 exhibit two or more. Comparing this community need to the 9,500 spots currently available for at-risk families in Los Angeles shows only 12-29 percent of high-risk families accessing home-based family support in Los Angeles County. Comparison of existing preventive home visiting services available to the general population (termed “universal” services) with the annual number of births in Los Angeles County (130,000) reveals a similar need to improve the system of supports by expanding funding, as current funding only provides sufficient capacity to serve 12 percent of the full population.

Analysis of eligibility criteria and geographic disparities further pointed toward the need to strive for increased funding flexibility. All general population services and most high-risk, high-intensity services are geographically restricted. The vast majority of high-need services also have restrictions based on child age and family income/risk criteria that further restrict access. There are vast numbers of families who are therefore not able to access home visiting services simply due to geographic and other eligibility requirements currently in place in Los Angeles County.

Gap analysis also revealed opportunities to improve family impact through increased coordination around prenatal referrals. Due to restrictions on current funding that require families to enroll in many existing programs at birth or prenatally, building additional prenatal referral pathways from medical providers and County departments into home visiting programs would enable better leveraging of existing funding streams.

Finally, the Home Visiting Providers Community Roundtable revealed a need for improved perinatal mental health services for prenatal and post-natal mothers suffering from depression, anxiety, or other mood disorders (a particular sensitive high-risk population). In response, DMH has committed to partnering with the Consortium, DCFS, and other home visiting networks to increase perinatal mental health cross-training and resource coordination. DMH will leverage its trauma-informed models, screening components, training modules, Regional Navigators, and field-capable, home-based services as tools in these efforts. This work will build and strengthen the bridges between these resources and home visiting networks in Los Angeles County. With this improved perinatal mental health training and referral support, home visitors will have stronger capacity to help prenatal and post-partum mothers who are experiencing depression or other perinatal mood and anxiety disorders. Through the enhanced capacity these efforts will build, home visiting programs will be better positioned to achieve the desired outcomes of reducing the risk of adverse childhood experiences, improving maternal health, and improving

² Risk factors included in the analysis were as follows: depressed while pregnant, teen mom, used illicit drugs while pregnant, physically abused while pregnant, entered prenatal care after 3 months, less than a high school education, and homeless while pregnant. Risk factors were chosen based on a combination of Children’s Data Network research regarding child abuse risk factors and the expertise of the Consortium Data Workgroup. Survey findings were extrapolated to the number of women who give birth every year in LA County for an estimate of population-level risk.

parental capacity to provide nurturing, developmental stimulation, and economic wellbeing to their families.

IV. Increase Access to Voluntary Home Visitation for High-Risk Families

Informed by research, home visiting provider agencies, and leadership of County departments, planning has already begun for increasing access to voluntary home visitation for families at high risk of involvement with the child welfare system, consistent with the recommendations of the Los Angeles Blue Ribbon Commission on Child Protection. Below are two examples of work already underway to increase access to voluntary home visitation for high-risk families:

County departments are working together to explore the process changes that would be required to create intentional referral pathways into home visiting programs, particularly for pregnant clients and high-risk clients. For example, the DPSS committed to developing a pilot in Region 5 (SPA 6) to refer pregnant applicants and Family Stabilization clients with children prenatal to five years old to home visiting supports (with financial support for the pilot underwritten by First 5 LA). DCFS has already collaborated with Early Head Start providers as part of its Early Education Partnership and built a “Head Start and Early Education Referral System” to connect DCFS clients to EHS services. They also already refer DCFS-supervised Pregnant and Parenting Teens (PPT) to home visiting services when applicable. DCFS is also interested in exploring the opportunity to also build linkages between Prevention and Aftercare and home visiting agencies (in line with the OCP Prevention Plan). Additional areas of interest among stakeholders include opportunities to increase referrals from medical providers and faith-based providers.

One of the key steps in refining these new pathways will be the leveraging, improving, and building out of electronic systems as needed to support effective referrals. DPH and the Planning Team intend to further engage the philanthropic community about opportunities to possibly underwrite his needed technological infrastructure. In addition, DPH will work closely with First 5 LA to explore whether adjustments might be made to existing program restrictions in order to expand the flexibility of entry into their programs.

DPH will continue to engage County departments, community members, Consortium workgroups, and home visiting provider agencies as may be appropriate to develop concrete implementation plans to move forward with these and new opportunities.

V. Collect, Share, and Analyze Standardized and Consistent Outcome Data

Substantial national and academic research has been performed validating the models chosen by Los Angeles County departments, as effective in improving child development, family safety, health, and other outcomes. Appendix B details the national research on outcomes affiliated with each model operating in Los Angeles County. In addition, current efforts led by the Consortium’s Data and Best Practices Workgroups both have already integrated the leading best practices from other states, national models, Maternal, Infant, Early Child Home Visiting (MIECHV), and Pew Charitable Trusts into their data collection and peer quality support work (See Appendix E: Consortium Best Practice Recommendations and Appendix F: Home Visiting Program Outcome Indicators).

Having quality capacity and outcome data is essential to ongoing gap assessment and program evaluation. Recognizing the leadership that the Consortium's Data Workgroup has already provided in developing common outcome indicators (based on MIECHV and Pew Charitable Trusts' Home Visiting Campaign) for home visiting programs in Los Angeles County, the County departments have begun exploring the viability of implementing the indicators in all County-funded home visiting programs. This supports the goal of countywide data tracking. County departments also have also examined additional outcome measurement opportunities, including for long-term, data matching, data warehousing, and outcome analysis.

County departments have identified an interest in gaining greater clarity regarding how home visiting compares and relates to other family prevention and intervention strategies with similar measurable goals. These data tracking and investigation efforts require an infusion of funding, as well as development of protocols and data sharing agreements. DPH and the Planning Team will continue to work with the other County departments and organizations named in the Board motion to develop a data collection plan and budget for consideration by the philanthropic community.

VI. Framework to Maximize Resources by Leveraging Available Funding and Identify New Revenue Streams

Sustainability is one of the most pressing challenges facing the network of home visiting programs in Los Angeles County. In addition to the challenge of the unmet community needs identified above, current funding sources are declining. First 5 LA is the single largest funder of home visiting in Los Angeles County, investing approximately \$38 million annually (based on FY16-17 budget). First 5 LA funding continues to decline with the loss of tobacco revenue, jeopardizing the long-term sustainability of existing service capacity in the system. In addition, DPH's FY 17/18 MIECHV funding for Nurse-Family Partnership and Healthy Families America has been reduced 45 percent.

Research regarding national funding trends revealed several key themes and opportunities for Los Angeles County. Potential funding streams include State Medicaid (e.g., Medicaid Waivers, Targeted Case Management and Medicaid Administrative Activities), Federal (e.g., Maternal, Infant and Early Childhood Home Visiting Program), mental health (Mental Health Services Act/Prevention and Early Intervention), child welfare (State re-alignment funds), and social services (Temporary Assistance for Needy Families) system (See Appendix G: Summary of Sustainability Research).

One of the most significant themes that emerged is the importance of pursuing and implementing multiple sustainability strategies simultaneously, in a blended and/or braided fashion, to achieve a truly universal system of home visiting. Targeted Case Management (TCM) and Temporary Assistance for Needy Families (TANF) were considered short-term opportunities to pursue in this initial assessment, with potential implementation of pilot work in FY17-18. Funding streams assessed as ripe for deeper exploration include Medicaid Administrative Activities (MAA), Mental Health Services Act-Prevention and Early Intervention (MHSA-PEI). Future Medicaid waivers were considered a long-term opportunity, given the level of planning, partnership and state-level buy-in required, though there may be opportunities to progress home visiting efforts through the current Los Angeles County waiver. Another strategy is MIECHV, a federal

allocation which will require continued advocacy with local, state, and national partners because funding is currently only authorized through September 2017.

A second important theme that emerged is the opportunity for Los Angeles County to maximize existing revenue streams, such as federal funds. The research done to date has identified various revenue sources that are not yet being fully maximized in the County, such as TCM, which is funded by a combination of local funds and federal Title XIX (Medicaid) funds. TCM services are the most commonly billed services by home visiting programs in the nation, but this strategy is not fully maximized in Los Angeles County. Expansion of this strategy is now being explored with DPH, the administering agency. Other funding where there may be potential for similar maximization include MAA and MHSA-PEI.

A third theme is the need to explore new sources of funding for home visiting. In 26 states across the nation, TANF is a partial source of funding for home visiting programs. This strategy has not been tapped into to date in Los Angeles County, but workgroup members are currently in planning discussions with DPSS on a pilot effort that will inform the viability of using TANF for home visiting in Los Angeles County.

All County departments and organizations named in the Board motion are committed to continuing to explore opportunities to bring additional resources to support Los Angeles County programs. Additionally, the philanthropic community stands ready to partner with the County to complement the public funding where its investment can be catalytic. In this initial assessment, TCM and TANF were considered short-term opportunities to pursue, with potential implementation of pilot work in FY17-18. Funding streams assessed as needing deeper exploration include MAA, MHSA-PEI and child welfare funds. Another strategy is MIECHV, a federal allocation which will require continued advocacy with local, state and national partners because funding is currently only authorized through September 2017. Finally, funding streams to be assessed in the next phase include Early Head Start, Healthy Start, Early Periodic Screening Diagnosis and Treatment (EPSDT), Probation and Homelessness/Housing.

DHS has identified the 1115 waiver's Whole Person Care program as an opportunity to expand home visitation in Los Angeles County over the next four years. In partnership with DPH, the program will serve as a mechanism to test a blend of programs in an evidence-informed effort to reach some of the most vulnerable pregnant and parenting families. This expansion of the DHS prenatal program "MAMAs Neighborhood" seeks to fill gaps in the existing home visitation landscape and serve as a demonstration which can inform future state plan amendment proposals to secure sustainable funding streams.

Further analysis is needed to identify opportunities for blending and braiding of funding streams such as those listed above, coordinating resources in a more intentional manner to maximize leveraging opportunities and meet the collective outcomes for the system. All named County Departments and organizations are committed to partnering with the Consortium to track local, State, and national opportunities for advocacy that could increase funding for Los Angeles County programs or could support the maintenance of high-quality home visiting programming in Los Angeles County.

Each Supervisor
June 21, 2017
Page 11

Moving forward, DPH and the Planning Team will invite new key stakeholders, including the Los Angeles County Office of Education (LACOE) to join in planning and advocacy efforts. In addition, future opportunities to advocate for federal funding, similar to the recent five-signature Board letter in support of MIECHV to Congress, will be identified to your Board as they develop.

DPH and the Planning Team recognize that sustainability will only be achieved and system changes will only be maintained if there is a clear long-term commitment by the County and others in the form of infrastructure and funding. One of the key outcomes that the Planning Team will seek to achieve during the next phase of work is the establishment of a strategy to support successful plan implementation, including infrastructure, leadership, and funding that County entities, First 5 LA, the Consortium, and others may be able to commit.

An update on progress will be provided to your Board by September 26, 2017. If you have questions or need additional information, please let me know.

BF:lma

Attachments

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors
Director of Mental Health
Director of Public Social Services
Director of Children and Family Services
Chief Probation Officer

Appendix A

HOME VISITING ROUNDTABLE, MARCH 17, 2017
EXECUTIVE SUMMARY OF COMMUNITY AGENCY INPUT

Countywide Trends

- Need for perinatal mental health services, including for post-partum depression.
- Changes to existing HV that would help:
 - Allowing earlier/later entry into HFA/PAT
 - Allowing enrollment in HFA/PAT outside geographic restrictions
 - Allowing enrollment in HFA/PAT through self-referral, not just through WB.
- Interest in learning billing options; training/TA needed; IT/billing system may be needed; some concern over how difficult and time-consuming process is.
- Interest and willingness to work to improve referrals; technological support desired, such as online database to lookup info, app, and/or feedback mechanism; desire in many SPAs for feedback loops to know whether referrals to HV peers were successful and to trouble-shoot if not.
- Need more education and partnership with pediatricians, ob-gyn, hospitals, HMOs/managed care.
- EHS in demand/full at current funding level; rise in minimum wage may prevent some families from accessing EHS. Additional non-federal funding would allow EHS to serve more low-income families above the 100% FPL federal eligibility restriction.
- Recent immigration related fears are causing clients to deny services; helping homeless families is a challenge in multiple SPAs.
- Interest in modernizing home visiting on multiple levels:
 - Advertising to younger parents
 - Electronic enrollment and referral processes, including non-traditional enrollment locations and client self-referral
 - Programs currently have varying levels of tech ability; interest in standardizing systems so that they can “talk” to each other
 - Apps for home visitors’ and clients’ use.
- HV staff, training, and program advertising should reflect the communities they serve and be presented in inclusive and non-stigmatizing ways; young and minority families are hard to reach because they don’t see themselves in the programs.

Roundtable Evaluation Results

Evaluation Category	Participant Ratings	
	Mean	Median
Explanation of purpose of Roundtable	4.51	5
Background information on LA County home visiting need, availability & gaps	4.51	5
Opportunity to give strategic input into County planning	4.55	5
Overall meeting facilitation	4.61	5
Quality of the handouts/materials	4.25	4
The Roundtable as a whole	4.67	5
Location of meeting	4.2	4
Food Provided at meeting	4.47	5
There was an appropriate amount of time for briefing on current home visiting availability, need and gaps.	4.32	5
There was an appropriate amount of time for small group discussion.	4.42	5
Our group discussed/ recommended at least on strategy that I can commit to work on.	4.28	5
There was an appropriate amount of time for the whole group to reflect together.	4.17	4

Qualitative responses were generally positive without many trends or repeat comments. One comment that was repeated was the desire for clients to be able to have a voice at some point in our process.



Mission:
To coordinate, measure and advocate for high quality home-based support to strengthen all expectant and parenting families so that the children of Los Angeles County are healthy, safe and ready to learn.

SUMMARY OF OUTCOMES: What Research Proves Home Visiting Impacts

Report as of June 4, 2017



Table of Contents

Summary of Outcomes Research	3
Details of Outcome Research by Impact Area and Model	4
Increases Cognitive & Social Development.....	4
Improves School Performance	5
Improves Maternal Health	6
Improves Child Health	7
Improves Mental Health	8
Improves Family Safety & Parenting	9
Improves Self-Sufficiency (includes Reducing Dependence on Public Assistance).....	11
Reduces Criminal Activity.....	11
Cost Savings of Home Visiting	12
Summary & Details of Research on Program Efficacy with Specific Subpopulations and Cultures.....	13
Works Cited.....	17

Summary of Outcomes Research

The following table shows the impact of home visiting models on specific outcome areas, based on existing research, by each model type currently in operation in Los Angeles: Early Head Start (“EHS”), Nurse-Family Partnership (“NFP”), Healthy Family America (“HFA”), Parents as Teachers (“PAT”), Welcome Baby, Partnerships for Families (“PFF”) and Healthy Start.

	EHS	NFP	HFA	PAT	Welcome Baby	PFF	Healthy Start
Increases Cognitive & Social Development	✓	✓	✓	✓	✓		
Improves School Performance		✓	✓	✓			
Improves Maternal Health		✓	✓	✓	✓		
Improves Child Health	✓	✓	✓	✓	✓		
Improves Mental Health	✓	✓			✓	✓	
Improves Family Safety & Parenting	✓	✓	✓	✓	✓	✓	
Increases Self-Sufficiency (Decreases use of Public Assistance; Increases Training or Employment)	✓	✓	✓				
Decreases Crime		✓					
Realizes Cost Savings		✓	✓	✓			

Details of Outcome Research by Impact Area and Model

The following tables outline the relevant existing research linking each applicable home visiting model in operation in Los Angeles with the individual impact areas listed above.

Increases Cognitive & Social Development	
EHS	<ul style="list-style-type: none"> ▪ EHS showed positive impact on children's cognitive development by 36 months (Roggman, 2009). ▪ After a year or more of services, compared with a randomly assigned control group, 2-year-old EHS children performed better on measures of cognitive, language and social emotional development (Commissioner's Office of Research and Evaluation and The Head Start Bureau, 2001). <ul style="list-style-type: none"> ○ EHS children scored 90.1 on the Bayley Scales of Infant Development Index, compared with 88.7 for the control group. ○ A smaller percentage of EHS children scored in the at-risk range of developmental functioning (33.6 percent versus 40.2 percent in the control group). ○ Children were reported by their parents to have larger vocabularies and to use more grammatically complex sentences. ▪ Three-year-old EHS children performed significantly better on a range of measures of cognitive, language and social-emotional development than a randomly assigned control group (Administration for Family and Children, 2006). EHS children: <ul style="list-style-type: none"> ○ Scored 91.4 on the Bayley Mental Development Index, compared with 89.9 for control group children. ○ Scored 83.3 on the Peabody Picture Vocabulary Test, compared with 81.1 for the control. ○ Were significantly less likely than control group children to score in the at-risk range of developmental functioning. ○ Engaged their parents more, were less negative towards their parents, and more attentive to objects during play. Furthermore, EHS parents rated their children as lower in aggressive behavior than control parents did (Administration for Family and Children, 2006). ▪ EHS children were less likely to have delays in cognition and language functioning (Administration for Children and Families (2002b), 2002).
NFP	<ul style="list-style-type: none"> ▪ NFP enrollees had higher cognitive and vocabulary scores at age 6 (Olds, et al., 2004).
HFA	<ul style="list-style-type: none"> ▪ Rigorous studies report improvements in children's cognitive development at one and two years, and fewer behavior problems that can interfere with learning at two and three years (Healthy Families America, September 30, 2015).
PAT	<ul style="list-style-type: none"> ▪ PAT children score higher on measures of achievement, language ability, social development, persistence in task mastery and other cognitive abilities (Drotar, Robinson, Jeavons, & Kirchner, 2009), (Pfannenstiel, 1989), (Pfannenstiel & Seltzer, New Parents as Teachers Project, 1985), (Pfannenstiel, Lambson, & Yarnell, 1991), (Wagner, Spiker, & Linn, 2002). ▪ 94% of children's language scores increased (Coalition, November 2016).
Welcome Baby	<ul style="list-style-type: none"> ▪ Welcome Baby was associated with higher scores for children's communication skills and social-emotional skills, as measured by the ASQ Social-Emotional assessment tool at 12 months and the BITSEA at 24 and 36 months (Sandstrom, June 2015).

Improves School Performance	
EHS	<ul style="list-style-type: none"> ▪ According to Health and Human Services’ systematic review of the research on home visiting, several different home visiting models, including Early Head Start, Healthy Families America, Nurse Family Partnership, and Parents as Teachers all had a positive impact on child development and school readiness (Paulsell, 2010).
NFP	<ul style="list-style-type: none"> ▪ NFP enrollees had higher grade point averages and test scores in math and reading at age nine (Olds et al., 2004 and 2007).
HFA	<ul style="list-style-type: none"> ▪ Children who participated in Healthy Families America were half as likely to repeat first grade (3.5% vs 7.1%) as those who did not participate (Children Now, 2014). ▪ Children in HFA were more likely to be in a gifted program, fewer were retained in first grade, and fewer received expensive special education services (Healthy Families America, September 30, 2015).
PAT	<ul style="list-style-type: none"> ▪ PAT children score higher on reading, math, and language in elementary grades (Drazen & Haust, 1995). ▪ Compared to non-PAT children, PAT children were shown to require half the rate of remedial and special education placements in third grade (Pfannensteil, Seitz, & Zigler, 2002) (Drazen & Haust, 1995). ▪ PAT parents are more likely to enroll their children in preschool, attend parent-teacher conferences, PTA/PTO meetings and school events, volunteer in the classroom, talk with their children’s teachers, and assist their children with homework (O'Brien, Garnett, & Proctor, 2002) (Pfannenstiel, 1989) (Pfannenstiel, Lambson, & Yarnell, 1996). ▪ Teachers rated PAT children significantly higher than non-PAT children on multiple developmental indicators of school readiness (O'Brien, Garnett, & Proctor, 2002). ▪ PAT children score higher on standardized measures of reading, math, and language in elementary grades (Pfannensteil, Seitz, & Zigler, 2002). ▪

Improves Maternal Health	
NFP	<ul style="list-style-type: none"> ▪ Several studies have shown that NFP increased the number of months between births. For example, Olds et al (1997) indicated a 28-month greater interval between birth of the first and second child (Kitzman H. O., 2000) (Olds D. K., 2004) (Olds D. K.-A., 2007) (Olds D. R., 2004). ▪ Several studies have shown that NFP helps reduce the number of children born to a mother (Kitzman H. O., 1997) (Olds D. K., 2004) (Olds & et al., Effects of Nurse Home-Visiting on Maternal Life Course and Child Development: Age 9 Follow-Up Results of Randomized Trial, 2007) (Olds D. R., 2002). One study showed 29% fewer subsequent live births (Kitzman H. O., 1997). Several studies have also shown that NFP reduces subsequent pregnancies (Kitzman H. O., 2000) (Kitzman H. O., 1997) (Olds D. K., 2004) (Olds D. R., 2002), including one study showed a 32% reduction in subsequent pregnancies (Kitzman H. O., 1997). ▪ One study demonstrated 7% fewer yeast infections among NFP mothers (Kitzman H. O., 1997). ▪ One study demonstrated 35% fewer cases of pregnancy-induced hypertension among NFP mothers (Kitzman H. O., 1997). ▪ One study demonstrated that NFP mothers had diets shown to be more in accordance with federal dietary recommendations versus the control group (Olds D. H., 1986). ▪ One study demonstrated a 44% reduction in maternal behavior problems due to substance abuse among low-income, unmarried NFP mothers (Olds D. K., 2010). ▪ One study showed the percentage of mothers dying from any cause was less among NFP participants than among a control group of mothers receiving only transport to prenatal appointments (Olds D. K., 2014). ▪ One study demonstrated a decrease in smoking among all NFP mothers who smoked at intake (Olds D. H., 1986). ▪ One study demonstrated a 79% reduction in preterm delivery in NFP mothers who smoked 5 or more cigarettes per day at registration (Olds D. H., 1986).
HFA	<ul style="list-style-type: none"> ▪ HFA was shown to improve expectant mothers' linkage to primary care providers before birth (Lee, et al., 2009). ▪ HFA moms had 22% fewer birth complications (Galano J., 1999b). ▪ More moms in HFA reduced their alcohol use (Healthy Families America, September 30, 2015). ▪ A study of HFA mothers in Arizona showed greater contraception use among HFA mothers compared to the control group (Davis, March 2016). ▪ Young mothers enrolled in HFA Massachusetts program were significantly less likely than the control group of mothers (25% vs 36%) to have engaged in risky behaviors, including substance use, fighting, and unprotected sex in the preceding month, after 28 months of participation in the program (Francine Jacobs, November 12, 2015).
PAT	<ul style="list-style-type: none"> ▪ A health literacy demonstration project conducted with Parents as Teachers programs in the boot-heel area of Missouri found significant improvements occurred in family planning (Carroll, Smith, & Thomson, 2015).
Welcome Baby	<ul style="list-style-type: none"> ▪ The WB rate of return for postpartum care within 21-56 days of delivery (the HEDIS guideline) was 87.5%: higher than LA County's Medi-Cal plans, higher than the national Medicaid population, and higher than for patients covered by private insurance (Careaga, 2012).

Improves Child Health	
EHS	<ul style="list-style-type: none"> ▪ EHS had small but statistically significant favorable impacts on the percentage of children who visited a doctor for treatment of illness (83% vs 80%), receipt of immunizations (99% vs 98%), and the likelihood of hospitalization for accident or injury (0.4% vs 1.6%), when compared to a control group (Administration for Children and Families, 2006, p. 1). ▪ EHS children were more likely than low-income children nationally to have health insurance (91% vs. 79%) (Administration for Children and Families, 2006, p. 2). ▪ EHS children were significantly more likely to receive Part C early intervention services due to higher rates of screening, referral and coordination with Part C partners (5.4% vs. 3.8%) (Administration for Children and Families (2002b), 2002, p. 1).
NFP	<ul style="list-style-type: none"> ▪ NFP was shown to decrease emergency room visit use rates for child enrollees (Avellar & Supplee, 2013). ▪ Children in NFP are significantly more likely to be up-to-date on immunizations at 6, 18, and 24 months (Thorland, Currie, Wiegand, Walsh, & Mader, 2017). ▪ NFP moms exhibited longer inter-birth intervals (Olds & et al., 2007). ▪ An analysis by the Center for American Progress demonstrated that scaling the Nurse Family Partnership program to all eligible women in CA could prevent 2,735 infant deaths and 54,695 preterm births over 10 years (Herzfeldt-Kamprath, November 2015).
HFA	<ul style="list-style-type: none"> ▪ Children in HFA had better access to health care, evidenced by rates of health insurance at ages one and two; connection with a primary care provider; and more completed Well-Baby visits (Healthy Families America, September 30, 2015) (Avellar & Supplee, 2013). ▪ HFA reduced the rate of low birth weight infants among women enrolled prenatally. Low birth weight is associated with higher infant mortality as well as substantial short- and long-term challenges to child health and development (Healthy Families America, September 30, 2015). A study of Healthy Families in New York demonstrated that women who receive home visiting services during pregnancy are nearly half as likely to deliver a low birth weight baby (Lee, et al., 2009). ▪ A study of HFA in Arizona showed that HFA mothers had higher rates of breastfeeding than the control group (Davis, March 2016).
PAT	<ul style="list-style-type: none"> ▪ Children participating in Parents as Teachers were more likely to be fully immunized for their given age (Wagner, Iida, & Spiker, 2001) (Paradis, Sandler, Todd Manley, & Valentine, 2013). ▪ Children in Parents as Teachers were less likely to be treated for an injury in the year following their participation in the program (Wagner, Iida, & Spiker, 2001). ▪ A health literacy demonstration project conducted with Parents as Teachers programs in the Boot-heel area of Missouri found significant improvements occurred in the following health care literacy indicators: use of information, use of prenatal care, child well care, child sick care, child dental care, and child immunizations (Carroll, Smith, & Thomson, 2015).
Welcome Baby	<ul style="list-style-type: none"> ▪ WB moms are 40%-60% more likely than a control group to exclusively breastfeed their babies at four months postpartum (Benatar & et al., 2012).

Improves Mental Health	
EHS	<ul style="list-style-type: none"> ▪ Positive impacts were found for parent-child interaction and children’s social-emotional development. Furthermore, among those families in which mothers were depressed at enrollment, EHS had even stronger favorable impacts on parent-child interaction (Administration for Children and Families, 2006, p. 1).
NFP	<ul style="list-style-type: none"> ▪ NFP shows a treatment impact on an outcome correlated with depression; mothers in the intervention group had higher personal sense of mastery scores for the period from child age six months to child age six (Kitzman H. O., 1997); the paraprofessional home visitors group reported a greater sense of mastery and better mental health at child age four (Olds D. K., 2004) (Olds D. K., 2010) (Olds D. K.-A., 2007).
HFA	<ul style="list-style-type: none"> ▪ A study of families enrolled in Healthy Families Arizona showed the Mental Health Index (which measures both psychological distress and psychological well-being) was higher in the Healthy Families group than in the control group (Davis, March 2016). ▪ In a study assessing the impact results from a randomized, controlled trial of Healthy Families Massachusetts, the only universal statewide home visiting program that specifically targets and wholly serves first-time young parents, it was found that HFA Massachusetts was successful in helping young, first-time mothers learn to control stress and in curbing externalizing and risky behaviors (Francine Jacobs, November 12, 2015).
Welcome Baby	<ul style="list-style-type: none"> ▪ An evaluation of LA County’s Welcome Baby program showed that moms had lower parenting stress and stronger maternal responsiveness at 36 months compared to the control (Urban Institute and University of California, Los Angeles).
PFF	<ul style="list-style-type: none"> ▪ Participation in the LA County PFF program had a significant impact on reducing parental depression, mood swings, and aggression/anger, especially for prenatally enrolled moms (Reuter, Melchior, & Brink, 2016).

Improves Family Safety & Parenting	
EHS	<ul style="list-style-type: none"> ▪ EHS was shown to reduce child welfare encounters between five to nine years of age, subsequent encounters, and substantiated reports of physical or sexual abuse (Green, et al., 2014). ▪ After a year or more of program services, when compared with a randomly assigned control group, the parents of EHS children scored significantly higher on many measures of the home environment, parenting behavior, and knowledge of infant-toddler development (Commissioner's Office of Research and Evaluation and The Head Start Bureau, 2001, p. iii). EHS parents: <ul style="list-style-type: none"> ○ engaged in important activities with their children more frequently than control group parents; for example, singing songs and nursery rhymes, dancing, and playing outside as well as creating a richer literacy environment for their children. ○ were more likely to read to children daily and at bedtime. ○ displayed more supportive parenting behaviors. ○ showed greater enjoyment, greater sensitivity, and less detachment, created more structure, and extended play to stimulate cognitive and language development. ○ were more emotionally responsive, displaying greater warmth, praise, and affection toward their children. ○ created more structure in their children's day by setting a regular bedtime. ○ were less likely to report having spanked their child in the past week than control group mothers. ○ were more likely to suggest using a positive discipline strategy when presented with hypothetical parent-child conflict situations, such as distracting the child or explaining to the child. In conflict situations, Early Head Start mothers were more likely to suggest only mild responses. ○ reported lower levels of family conflict and parenting stress (Commissioner's Office of Research and Evaluation and The Head Start Bureau, 2001, p. 6). ▪ Findings also suggest that EHS had reduced the stress of parenting (Commissioner's Office of Research and Evaluation and The Head Start Bureau, 2001, p. iii). ▪ EHS increased mothers' knowledge of infant-toddler development and developmental milestones (Commissioner's Office of Research and Evaluation and The Head Start Bureau, 2001, p. 6).
NFP	<ul style="list-style-type: none"> ▪ NFP had a positive impact on reducing child maltreatment (Paulsell et al., 2010); the Nurse-Family Partnership home visiting program has been shown to reduce child maltreatment by 48% (Children Now, 2014). ▪ Center for American Progress estimated that scaling NFP to all eligible women in CA could prevent 196,902 incidents of intimate partner violence over ten years (Coalition, November 2016).
HFA	<ul style="list-style-type: none"> ▪ According to Health and Human Services' systematic review of the research on home visiting, HFA had positive impacts on reducing child maltreatment (Paulsell, 2010). ▪ Five HFA studies show significant benefits in preventing adverse childhood experiences, including reduced child maltreatment, physical punishment, yelling, and improved use of non-violent discipline, based on parents' self-reports—a more comprehensive measure of child maltreatment than official cases (Healthy Families America, September 30, 2015). ▪ HFA has shown a reduction of domestic violence perpetrated by mothers (Healthy Families America, September 30, 2015). ▪ Results from a randomized trial found positive outcomes showing Healthy Families mothers read more frequently to their children, provided more developmentally supportive activities, and had less parenting stress than the control group (Greene, 2014).

Improves Family Safety & Parenting	
	<ul style="list-style-type: none"> ▪ A Massachusetts study found mothers enrolled in the Healthy Families program reported less parenting stress than control mothers (Easterbrooks, 2012). ▪ An Arizona study found positive results in comparison to the control condition on use of safety practices, parenting attitudes (e.g., inappropriate expectations), reading to children, use of resources, reduced alcohol use, and greater maternal education and training (Davis, March 2016). ▪ A study of teen mothers enrolled in HFA in Massachusetts showed that parents enrolled in the program reported less difficulty with their children and less parenting distress after 28 months of participation in the program than teen parents in the control group (Francine Jacobs, November 12, 2015). ▪ A study of families enrolled in HFA Arizona showed that at six months the Healthy Families group had implemented more safety practices in the home, used more resources to meet family needs, scored higher on mobilizing resources, had higher quality the home environment, more regular routines, reduced chaotic household and increased reading to their child than the control group (Davis, March 2016).
PAT	<ul style="list-style-type: none"> ▪ PAT families with very low income were more likely to read aloud to their children, tell stories, say nursery rhymes, and sing with their children (Wagner, Spiker, & Linn, The Effectiveness of the Parents as Teachers Program with Low-Income Parents and Children, 2002). ▪ Over 75% of PAT parents reported taking their child to the library regularly and modeling enjoyment of reading and writing (Pfannenstiel, Lambson, & Yarnell, 1996). ▪ PAT parents engage in more language activity and were more likely to promote reading in the home (Albritton, Klotz, & Roberson, 2004). ▪ PAT parents showed significant improvements over time in parenting knowledge, behavior, and attitudes (Owen & Mulvihill, 1994). ▪ PAT participation was related to 50% fewer cases of suspected child abuse and/or neglect (Drazen & Haust, 1993, August). ▪ Parents as Teachers had fewer documented cases of abuse and neglect compared to the state average in 37 diverse school districts across Missouri (Parents as Teachers National Center, Inc.). ▪ Short-term outcomes of PAT include: improved parenting practices; increased knowledge and practices of positive discipline techniques; more realistic expectations of age-appropriate developmental milestones; a home environment conducive to healthy child development; parent-child attachment; reduction of stress; fulfillment of basic needs; opportunities to interact with other parents; increased awareness and access to sources of information and support (Parents as Teachers National Center, Inc.). ▪ In another randomized trial, adolescent mothers in an urban community who participated in PAT scored lower on a child maltreatment precursor scale than mothers in the control group. These adolescent mothers showed greater improvement in knowledge of discipline, showed more positive involvement with children, and organized their home environment in a way more conducive to child development (Wagner, Iida, & Spiker, 2001).
Welcome Baby	<ul style="list-style-type: none"> ▪ Welcome Baby moms demonstrated stronger teaching skills and affection towards their children at 36 months compared to the control group (Urban Institute and University of California, Los Angeles).
PFF	<ul style="list-style-type: none"> ▪ PFF achieved reduced rates of re-referral to child protective services, substantiated allegations of maltreatment, DCFS case openings, and removal from the home over the length of the study (Brooks & et al., 2011).

Improves Self-Sufficiency (Includes Reducing Dependence on Public Assistance and Increasing Employment or Job Training)	
EHS	<ul style="list-style-type: none"> ▪ EHS has been shown to positively impact parents’ participation in education, job training activities, and employment (Admin. for Children and Families, 2006). ▪ After a year or more of program services, when compared with a randomly assigned control group, EHS parents were more likely to attend school or job training and to use employment-related services (The Commissioner’s Office of Research and Evaluation and The Head Start Bureau Administration on Children, Youth and Families Department of Health and Human Services, 2001, pp. 1, 7). ▪ Note: 2001 research on EHS failed to show any impact on the percentage of parents employed, hours per week employed in all jobs, receipt of welfare benefits, or family income during the first 15 months after their participation in EHS (The Commissioner’s Office of Research and Evaluation and The Head Start Bureau Administration on Children, Youth and Families Department of Health and Human Services, 2001, p. 7).
NFP	<ul style="list-style-type: none"> ▪ NFP moms had less use of welfare and food stamps and fewer subsequent births than control group moms (Olds & et al., 2007). ▪ At age 19, daughters of NFP enrollees had fewer children and less reliance on Medicaid than children of moms in the control group (Eckenrode & et al., 2010). ▪ 31% of parents who entered the program without a high school degree attained a high school diploma or GED by the time their child turned 12 months old (Nurse Family Partnership National Service Office, Oct. 2015).
HFA	<ul style="list-style-type: none"> ▪ HFA parents were five times more likely to enroll in school or training (LeCroy C. W., 2011). Most parents have not yet completed high school when they enroll in HFA, a critical step for future earning potential. HFA helps new moms find the motivation and resources to further their education, evidenced by three rigorous studies showing increased maternal education over one to three years in the program (Healthy Families America, September 30, 2015). ▪ A study of teen parents enrolled in HFA in Massachusetts showed that mothers enrolled in HFA were nearly twice as likely as control group mothers (17% vs 10%) to have finished at least one year of college (Francine Jacobs, November 12, 2015).
PFF	<ul style="list-style-type: none"> ▪ 71% of PFF families’ financial conditions improved while receiving services, as measured via initial and closing assessments using the Family Assessment Form (Brooks & et al., 2011).

Reduces Criminal Activity	
NFP	<ul style="list-style-type: none"> ▪ At age 19, daughters of NFP enrollees were less likely to have been arrested and convicted than daughters of the control group (Eckenrode & et al., 2010).

Cost Savings of Home Visiting	
NFP	<ul style="list-style-type: none"> ▪ A California-specific analysis of NFP estimated a net public savings of as much as \$39,129 per family, in the form of fewer infant deaths, reduced child maltreatment, and fewer youth crimes in the long term (Children Now, 2014). ▪ Home visiting programs like NFP have been found to yield returns of \$2.73 to \$5.70 for each dollar invested (Ibid). ▪ For California, the ten-year cost savings of scaling NFP was estimated at \$120,676,641 (Coalition, November 2016). ▪ If Medicaid were to fully fund the NFP program, the resulting savings per enrolled family to the federal and state governments would exceed the costs of providing the program to that family by the time the child turned 6 years old (Herzfeldt-Kamprath, November 2015).
HFA	<ul style="list-style-type: none"> ▪ Every low birthweight or preterm birth costs states between \$28,000 and \$40,000 in medical care and other related costs. In New York’s Healthy Families home visiting program, mothers who received home visits were half as likely to deliver low birthweight babies as mothers who were not enrolled (The PEW Center on the States, May 2010). ▪ In 2012, 33,655 babies (6.7% of all births) were born at a low birth weight in CA. Reducing this number by half could save the state as much as \$673 million (Children Now, 2014).
PAT	<ul style="list-style-type: none"> ▪ Parents As Teachers has an estimated benefit-cost ratio of \$3.39 per dollar invested (Washington State Institute for Public Policy, February 2015).
Home Visiting in General	<ul style="list-style-type: none"> ▪ For every dollar spent on home visiting efforts, at least \$2 in future spending is saved (The PEW Center on the States, May 2010).

Summary & Details of Research on Program Efficacy with Specific Subpopulations and Cultures

Disproportionate representation in the child welfare system among racial and cultural minority families in the US remains a serious social issue. In response, researchers, policymakers, and practitioners are increasingly including an examination of *culture* as an integral part in developing child maltreatment prevention and intervention efforts. While the field has attempted to make—and has made—advancements in understanding the disproportionality of minority groups in the child welfare system, these advancements have only served to highlight the complex and multifaceted nature of culture, as well as its interaction with social stratification by race, ethnicity, and socioeconomic status. While it may not be realistic to imagine that all programs can be designed and evaluated for relevance to all cultural groups, nor that there are even a finite number of cultural groups in the US, the necessity of capturing and examining the dynamic nature of culture in relation to child maltreatment is clear (Megan Finno-Velasquez, 2015).

The findings of home visiting programs may be substantially impacted by cultural and community norms, including those of the racial/ethnic populations served as well as those of the communities in which studies have been conducted (Azzi-Lessing, 2013). That said, not all of the home visiting models have directly examined differential impacts for various racial/ethnic groups, nor have most studies addressed or discussed the substantial cultural differences that may characterize the different communities in which various programs operate. In many studies, the outcome analyses control for race, a common statistical approach, but one that might serve to mask positive outcomes that occur only within a particular subgroup (Greene, 2014).

The chart and narrative below shows studies that have been conducted related to a particular sub-population that have demonstrated a statistically significant impact on that sub-population. If a check mark is not shown for a particular sub-population for a home visiting model, it does *not* indicate that research proves the program ineffective on that sub-population, but rather more frequently that research has not been conducted on the impact of the home visiting model on that sub-population to date.

	EHS	NFP	HFA	PAT	Welcome Baby	PFF	Healthy Start
African-American	✓	✓					
Latino		✓		✓		✓	
Asian-Pacific Islander							
Indigenous			✓	✓			
Teen	✓		✓	✓			
Mothers with less than a GED/high school degree					✓		

Early Head Start:

- EHS impacts were particularly large for African American families, and those with a moderate number of demographic risk factors. The program also had positive impacts on two groups that other studies have reported as difficult to serve and have an impact on: teen parents and parents who were depressed at baseline (Administration for Family and Children, 2006, p. 2).

Nurse-Family Partnership:

- Beginning in 1990, a randomized, controlled trial was conducted in Memphis, Tenn. to study the effects of Nurse-Family Partnership on low-income, primarily African-American mothers living in disadvantaged, urban neighborhoods. In July of 2014, JAMA Pediatrics published a study that found for participants in Nurse-Family Partnership there were lower rates of preventable child mortality and all causes of death among mothers (Kitzman H. O., 1997).

Healthy Families America:

- A small randomized trial was conducted with one Apache and three Navajo communities where paraprofessionals delivered the program prenatally. Program participants showed positive impacts on measures of parent knowledge and maternal involvement when compared with a control group (Barlow, 2006).
- In a large randomized study of the Healthy Families America home visiting program being conducted in Oregon (Healthy Families Oregon, HFO), it was found that the program impact on parenting behaviors was larger for non-depressed mothers (Greene, 2014).
- The same Healthy Families Oregon (HFO) study found stronger program impacts on both parenting stress and depressive symptomology for mothers with three or more risk factors; these effects were particularly pronounced for mothers with four or five or more risk factors. Additionally, these highest risk HFO mothers were significantly less likely to endorse the use of harsh physical punishment, compared to control mothers. This is a potentially important finding in that it suggests that the program is acting to buffer the influence of these risk factors on these important psychosocial and parenting outcomes (Greene, 2014).

Parents as Teachers:

- PAT teen mothers showed greater improvement in knowledge about discipline and organized their home environment in a more appropriate way (Wagner, Iida, & Spiker, 2001).
- Parents in tribal communities report that PAT helps:
 - Increase the amount of time they spend with their child;
 - Become more involved with their child's education;
 - More effectively interact with their child; and,
 - Increase their understanding of child development (Research & Training Associates, Inc., 2012).
- In a randomized trial in Northern California, results showed that participation in Parents as Teachers by Spanish-speaking Latino families benefited them significantly in the area of self-help development (Wagner & Clayton, 1999).

Welcome Baby:

- A study by First 5 LA of mothers in Los Angeles showed that among all Welcome Baby participants, less educated mothers appear to experience significantly larger gains than more educated mothers in:
 - their engagement in home learning activities;

- the quality of child behavior observed during parent-child play;
- reduction of parental stress; and
- in the demonstration of encouragement and affection toward their children (Sandstrom, June 2015).

Partnership for Families:

- A study by First 5 LA of over 3400 families in Los Angeles County illustrated that Latino children whose families were fully engaged in PFF had the lowest percentage of re-referrals to DCFS (36% vs 52%) and DCFS case openings (8% vs 16%) when compared to families receiving no services among all ethnic groups participating in the study (Devon Brooks, November 30, 2011).

Recognizing the reality of incomplete research on program effectiveness specific to ethnic and other sub-populations, and moreover recognizing the complex interplay between demographic and other cultural dynamics active in the diverse communities that make up Los Angeles County, we must look beyond these studies to answer important questions about the role culture plays within home visiting programs.

To continue efforts to reduce disparities and improve outcomes for *all* children and families in Los Angeles, below are recommendations for how we may best move the field forward, based on formative analysis published by Megan Finno-Velasquez:

- (1) **Recalibrate the Conceptualization of Culture:** The key is to continue instilling the notion that a family's culture is a product of experiences that cannot be categorized *monolithically* with easily visible shared characteristics and features such as racial or ethnic labels. The examination of the role of culture in child maltreatment and family well-being necessitates a close look at each family's heterogeneous experience, beliefs, and practices across multiple contexts that are uniquely relevant to each family's functioning, with the goal of addressing cultural processes involved in prevention and intervention efforts in a more nuanced manner (Megan Finno-Velasquez, 2015).
- (2) **Replace the Notion of Cultural Competence with Cultural Reciprocity:** To effectively serve diverse families, practicing cultural reciprocity or humility may be more appropriate than cultural competence as currently institutionalized. Cultural reciprocity places responsibility on the professional to engage in self-reflection and dialogue to consider their own and the families' cultural norms and participate in collaborative exchange to provide effective services (Megan Finno-Velasquez, 2015).
- (3) **Refine Child Maltreatment Research to Integrate Diverse Cultural Groups:** Continuing efforts are needed to define and measure child maltreatment for diverse racial or ethnic and cultural groups, as well as to better understand differences and similarities in the causes of maltreatment among many types of families. From a research perspective, scholars may help to advance this goal by carefully articulating the definitions and operationalization of maltreatment and well-being constructs included in studies, as well as assumptions about the cultural relevance of these constructs for the study population. We should move towards explicitly stating the strengths and limitations of the measures used to capture culture as a construct. Work is needed, both within and across cultural groups, to understand how contexts, neighborhoods, federal family and immigration laws, local child welfare policies and practices, and family characteristics interact with parents' culturally bound beliefs and behaviors in the US. Research would benefit from carefully defining child neglect so as to clearly distinguish it from family poverty. Despite the risk poverty creates—both for child development generally and for child neglect specifically—more focused research and clearer definitions of neglect and risks for neglect within culturally diverse groups could contribute substantially to the ability of

policymakers and practitioners to address these issues and promote child well-being (Megan Finno-Velasquez, 2015).

- (4) ***Enhance Intervention Design and Testing with Diverse Cultural Groups***: Existing interventions often rely on 20th century, European American, middle-class values. There may be a need to diversify the parenting styles and norms that are driving intervention development and normalization. Experts may wish to consider more rigorous and targeted testing of existing interventions with diverse cultural groups (Megan Finno-Velasquez, 2015).
- (5) ***The Use of More Holistic and Innovative Strategies***: Maltreatment prevention interventions should address multiple stressors typically clustered together within a specific racial or ethnic group or community context, including economic and cultural stressors (Megan Finno-Velasquez, 2015).
- (6) ***Diversify who is developing and evaluating such programs***: An intentional commitment to increasing the cultural and racial diversity of leading researchers, teachers, service providers, and policy makers in the field of child maltreatment and well-being may be critical to improving interventions and supporting the well-being of an increasingly diverse pool of families (Megan Finno-Velasquez, 2015).
- (7) ***Focus on participant experience***: Research could be strengthened by placing greater emphasis on the process and experiences of diverse families throughout the implementation of interventions. Such research might document perceptions of cultural relevance or resonance, shared understandings and worldviews among program participants and providers, experiences of discrimination or empowerment, and overall client satisfaction with providers and services. Perhaps more importantly, longitudinal data could be utilized to understand whether the effects of parenting interventions and prevention on culturally diverse groups hold in the long term. This information, along with more data about families' origins and cultural identities, could be collected and analyzed within the context of implementation trials to better understand the role of culture in response to intervention. Moreover, while evidence-based programs may be effective in promoting positive parenting outcomes for families with diverse cultural beliefs and backgrounds, alternatives could exist that work just as well. These alternatives might not require assimilation and adoption of culturally relative practices that may force suppression of divergent cultural values (Megan Finno-Velasquez, 2015).

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Executive Summary

Home Visiting in Los Angeles County: Current State, Gaps & Opportunities



Home visiting¹ is a form of family support that includes parent coaching and comprehensive resource referrals provided by trained professionals in the home and community environment. It has been proven through research to be effective in reducing child abuse and neglect, improving child development, reducing preterm births, improving maternal and child health, increasing school readiness, reducing reliance on public financial benefits, and reducing crime. It is an invaluable model for improving family outcomes, preventing expensive crisis-based intervention, and triaging families to appropriate and needed services.

The Los Angeles Partnership for Early Childhood Investment and First 5 Los Angeles engaged Big Orange Splot, LLC, on behalf of the Los Angeles Perinatal and Early Childhood Home Visitation Consortium (“LACPECHVC”), to perform a deep analysis of the current home visiting landscape in Los Angeles, including current models, capacity, gaps and maximization opportunities. The purpose of this analysis was to provide a solid foundation of data with which to ground future planning and advocacy. This executive summary provides an overview of the key findings from that research.

Acknowledgments

Many thanks to our funders, LA Partnership for Early Childhood Investment and First 5 LA, without whom this research would not have been possible, as well as to Michaela Ferrari (LACPECHVC Coordinator); LACPECHVC Data, Referrals and Advocacy Workgroups; LA Department of Public Health MCAH; Gina Airey Consulting; and LA Best Babies Network, for their respective data and design contributions.

What home visiting models do we have here in LA?

Los Angeles County has both “universal” & intensive home visiting models. **Universal home visiting models** are shorter-term, less frequent models that focus on perinatal well-being, including preventing adverse health, parenting, and developmental outcomes, and screening to identify individuals in need of more intensive support. They are offered to all expectant and new parents in a community, regardless of family risk attributes. In Los Angeles County, one “universal” program —Welcome Baby—is active, but it is currently only available to mothers delivering at 14 of the County’s hospitals.



Intensive models are longer term and more frequent. While the specific focus varies by program, intensive models typically include an emphasis on healthy child development, the prevention of child abuse or neglect, mental health, maternal health, and self-sufficiency. Intensive models are only available to parents who meet specific risk, income, geographic, and/or age criteria. The various intensive models have different curricula/methodology, staff requirements, frequency of client contact, length of services, entry requirements, intended outcomes, and actual outcomes as demonstrated through research. The LACPECHVC document “Program Details for LA County Home Visitation Programs” summarizes many of these differences.



¹ We define home visiting as follows: “Perinatal and early childhood home visiting is a multi-disciplinary, family-centered support and prevention strategy with services delivered by trained professionals in the home that: (1) is offered on a voluntary basis to pregnant women and/or families with children through the age of 5; (2) provides a comprehensive array of holistic, strength-based services that promote parent and child physical and mental health, bonding and attachment, confidence and self-sufficiency, and optimizes infant/child development by building positive, empathetic, and supportive relationships with families and reinforcing nurturing relationships between parents and children; and (3) is designed to empower parent(s) to achieve specific outcomes which may include: healthy pregnancy, birth and infancy; optimal infant/child development; school readiness; and prevention of adverse childhood and life experiences.”

What outcomes have the models available in LA been proven to achieve?



Volumes of research illustrate the impact that different home visiting models have achieved in

- improving family safety and parenting,
- decreasing criminal activity,
- increasing child and maternal health,
- improving mental health outcomes,
- improving child cognitive and social development, and
- decreasing reliance on public assistance.

The table below provides an overview of the impact of home visiting models on specific outcome areas, based on existing research, by each model type currently in operation in Los Angeles: Early Head Start (“EHS”), Nurse-Family Partnership (“NFP”), Healthy Family America (“HFA”), Parents as Teachers (“PAT”), Welcome Baby (“WB”), Partnerships for Families (“PFF”) and Healthy Start (“HS”). The accompanying report “What Research Proves about the Impact of Home Visiting Models Used In Los Angeles” provides an in-depth review of each program’s impacts.

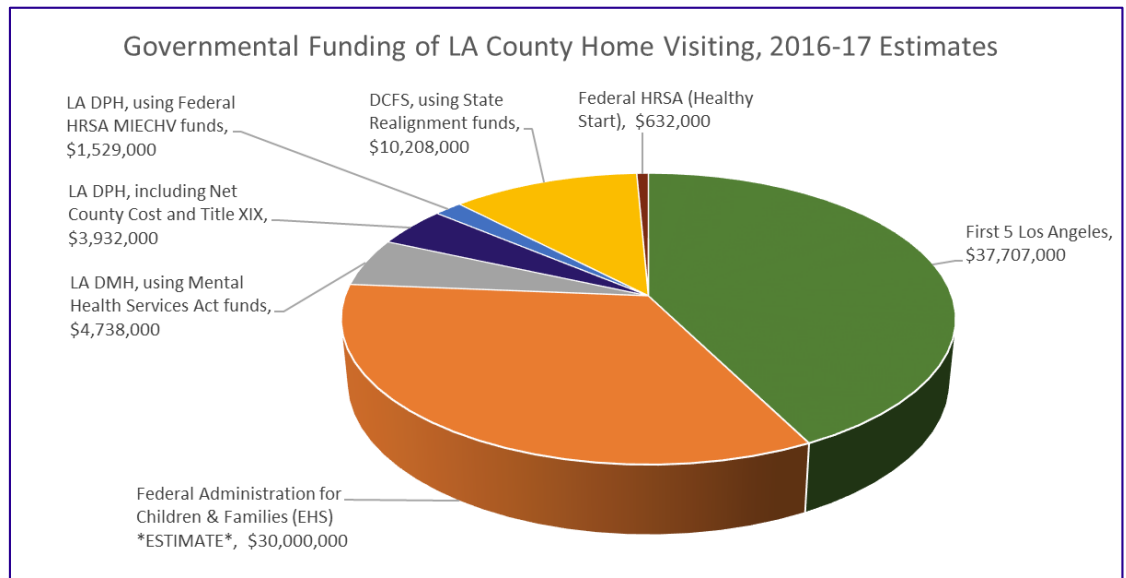
	EHS	NFP	HFA	PAT	WB	PFF	HS
Increases Cognitive & Social Development	✓	✓	✓	✓	✓		
Improves School Performance		✓	✓	✓			
Improves Maternal Health		✓	✓	✓	✓		
Improves Child Health	✓	✓	✓	✓	✓		
Improves Mental Health	✓	✓			✓	✓	
Improves Family Safety & Parenting	✓	✓	✓	✓	✓	✓	
Increases Self-Sufficiency (Decreases use of Public Assistance; Increases Training or Employment)	✓	✓	✓				
Decreases Crime		✓					

What is the current capacity of home visiting in Los Angeles?

Analysis of current home visiting capacity and gaps revealed that we have a strong base of quality home visiting programs established in Los Angeles. Current publicly-funded² home visiting programs in Los Angeles are funded through the contributions of five local governmental entities, plus numerous contracts awarded by the federal government to local non-profit organizations.

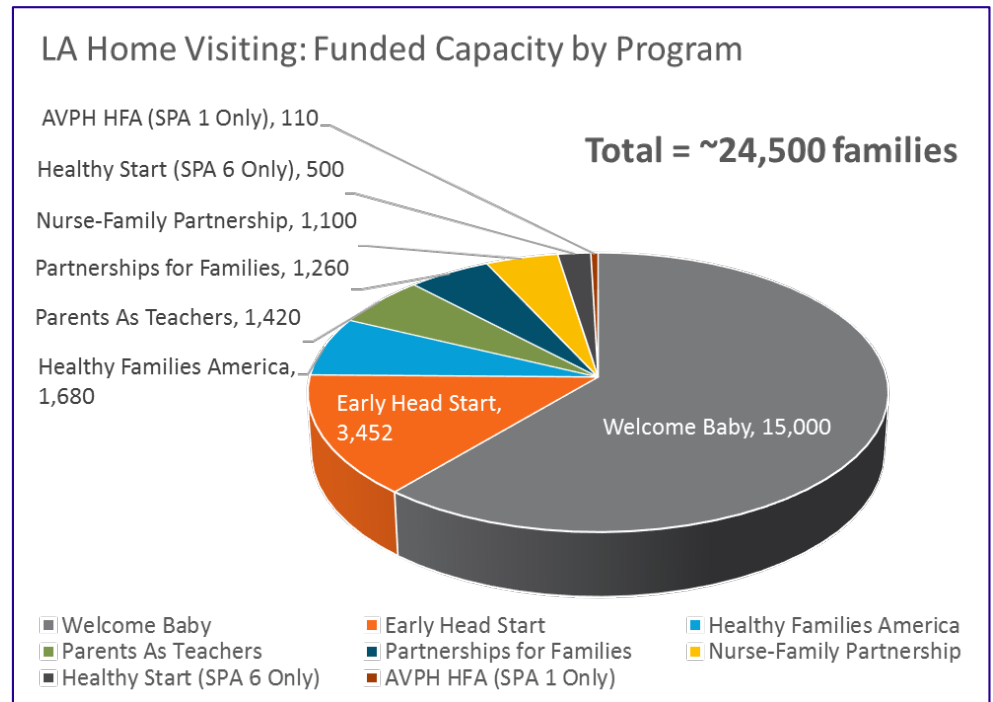
² While the majority of home visiting programs in Los Angeles utilize public funding, it is worth noting that there are additional smaller home visiting programs run by non-profit agencies utilizing philanthropic or grant dollars that are not included in the numbers herein. There are also additional family services provided in the home (such as home-based therapeutic interventions) that are not reflected here because they are either not preventative or not comprehensive.

Funding Source	Models	Families/Year
First 5 LA	Healthy Families America & Parents as Teachers; Welcome Baby	3,100 High-Risk 15,000 General
DPH (MIECHV, TCM, MAA)	Nurse-Family Partnership Healthy Families America	1,210 High-Risk
Dept. of Mental Health (MHSA, PEI)		
Dept. of Children & Family Services (State Realignment \$)	Partnerships for Families	1,260 High- Risk
Federal Contracts (HRSA Healthy Start, Head Start)	Early Head Start Healthy Start	3,950 High-Risk



* Note: Federal ACF (EHS) funding is estimated based on comparative volume and intensity of services. Obtaining exact EHS home-base funding for LA County is not possible due to EHS contract structures.

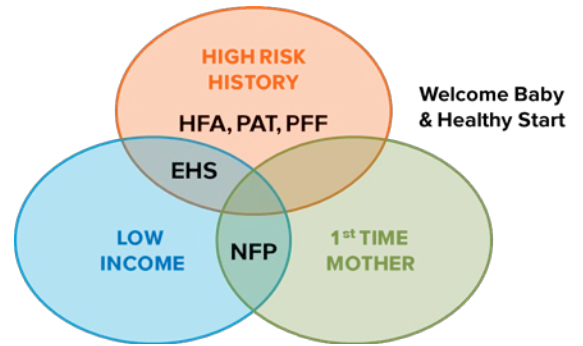
Collectively, these funding streams enable 55 local non-profit organizations to provide home visiting services to LA families, with the collective total capacity to help approximately 24,500 families per year, including approximately 15,000 families from the general population and 9,500 high-risk families, who receive intensive services, per year. The accompanying report to this Executive Summary, “Home Visiting Providers in Los Angeles County, By Program Model,” lists these local non-profit organizations and indicates the models each offers.



What eligibility restrictions currently limit access to home visiting?

Each Los Angeles-based home visiting model has different eligibility requirements including geography, age, income, and risk profile.

Geographic Restrictions: The programs that are restricted to a particular Service Planning Area (“SPA”) include Healthy Start and Antelope Valley Partners for Health’s Healthy Families America. Early Head Start is restricted by zip code. The programs restricted to Best Start Neighborhoods include Welcome Baby, Healthy Families America, and Parents as Teachers. Nurse-Family Partnership and Partnerships for Families are available to families who reside throughout Los Angeles.



Age Restrictions: Most intensive programs in Los Angeles require entry at or prior to birth. Nurse-Family Partnership is available for families entering before 28 weeks postpartum. Welcome Baby is available to families entering at or prior to birth. Healthy Family America and Parents as Teachers are only available to families entering at birth. Partnership for Families is available to general community members entering prenatally up to the child’s first year. Entry into Healthy Start extends from the prenatal period through age 2. Early Head Start is available from the prenatal period to age 3.

Income and Risk Profile: Welcome Baby and Healthy Start programs are available to families of all incomes and risk profiles. Healthy Families America, Parents as Teachers, and Partnerships for Families are available only to families that have a history of high risk. Early Head Start is available to families that have a high risk history and who are low income. Nurse-Family Partnership is available to low-income, first-time mothers.

It is worth noting that, because of the combination of these factors, no home visiting resources are currently available for families with children ages one to three outside of the zip codes served by EHS or for those families who do not meet the EHS need-based criteria. Below is a table that crosswalks all of the eligibility requirements by model.

Model	Age Restrictions for Enrollment	Geographic Restrictions	Risk-based Restrictions
Welcome Baby	Prenatal or at birth	Best Start Communities	N/A
Welcome Baby “Light”	At birth	Non-Best Start Communities	Assessed as high-risk via hospital screening
HFA & PAT	Entry at birth	Best Start Communities	Assessed as high-risk via hospital screening
Early Head Start (EHS)	0-3; some prenatal	By zip code	At risk or in poverty (100%FPL)
Nurse-Family Partnership	By 28 weeks pregnant	N/A	1 st time mom, 200% FPL or WIC/Medi-Cal eligible
Partnerships for Families	Prenatal to 12 mo., or referred by DCFS	N/A	History of domestic violence, mental health challenges, substance abuse, or an unsubstantiated closed DCFS referral
Healthy Start	Prenatal to 24 mo.	SPA 6 only	N/A
Antelope Valley HFA	Prenatal to 3 months	SPA 1 only	At risk

Are we currently maximizing our existing funded capacity?

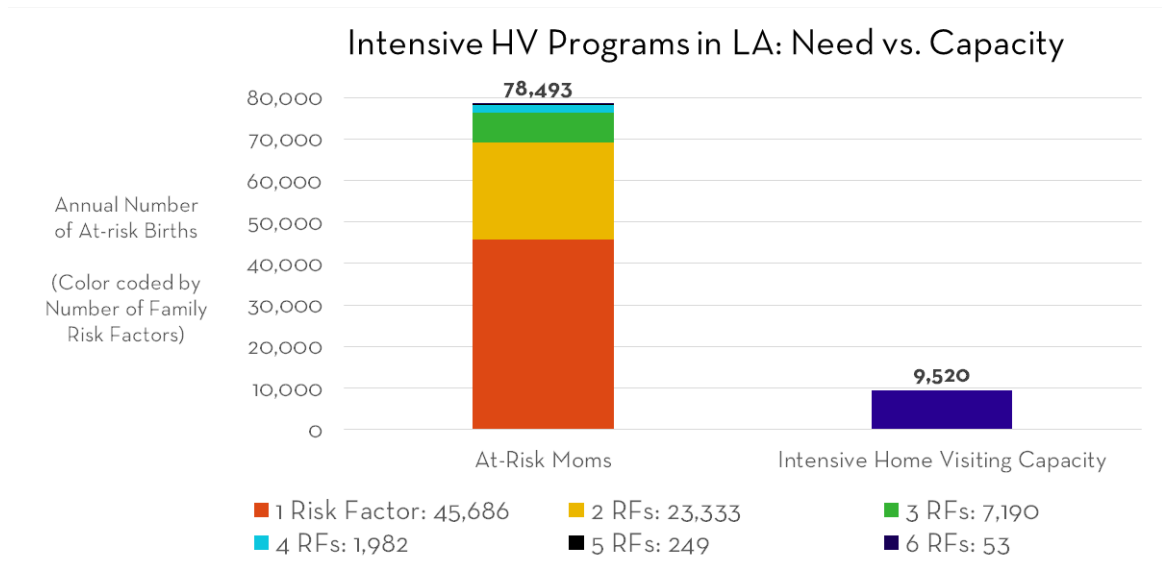
Data, research, and interviews with home visiting providers revealed that we are very close to maximizing our current capacity. EHS, PFF and Antelope Valley HFA are generally operating at capacity, although recent changes in funding allocations may temporarily open up new capacity in some SPAs for PFF. Most of the models with unfilled capacity require prenatal or birth enrollment; these models include: Welcome Baby, HFA, PAT, and NFP. HealthyStart also has some unfilled capacity, but is only available in SPA 6. Efforts to increase coordination around prenatal recruitment might be the most helpful way to realize the full impact of Welcome Baby, HFA, PAT, NFP, and HealthyStart.

How does our current capacity relate to full community need?

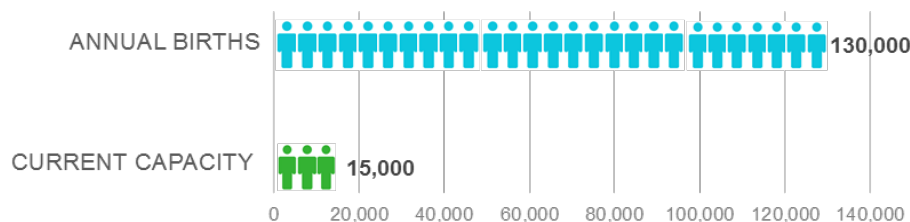
Comparing current home visiting capacity to the full community need for family support reveals a substantial gap in services for both high-risk populations and the general LA population.

The 2014 Department of Public Health LAMB data reveals an estimated 78,500 families giving birth in LA County each year exhibit at least one high-risk factor;³ an estimated 33,000 families exhibited two or more risk factors. Comparing this community need to the 9,500 spots currently available for at-risk families in Los Angeles documented above points to a current rate of

only 12-29% of high-risk families accessing home-based family support in Los Angeles. The graph to the right demonstrates the gap between the need for intensive services in Los Angeles County and the number of families who receive intensive services on an annual basis.

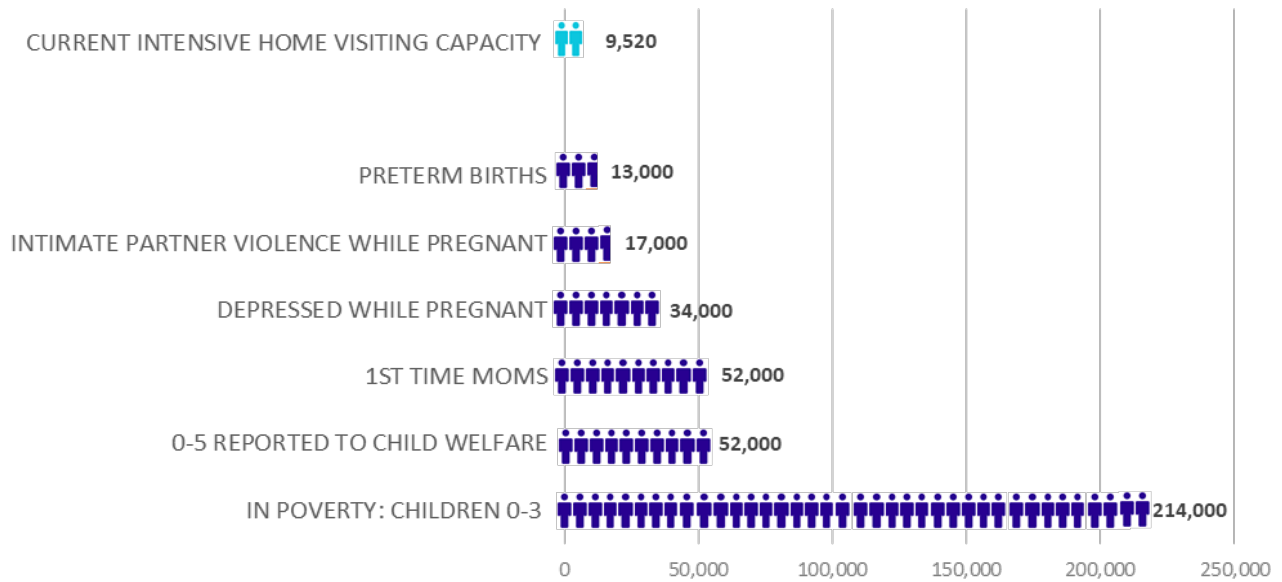


A comparison of the 15,000 families who receive “universal” preventative home visiting services with the 130,000 births annually in LA County reveals a similar need to improve our system of supports by expanding funding. Current funding provides sufficient capacity to serve 12% of the general population.



³ Risk factors included in our analysis were as follows: depressed while pregnant, teen mom, used illicit drugs while pregnant, physically abused while pregnant, entered prenatal care after 3 months, less than a high school education, and homeless while pregnant. Risk factors were chosen based on a combination of Children’s Data Network research regarding child abuse risk factors and the expertise of the LACPECHVC Data Workgroup. Findings from the LAMB survey were extrapolated to the number of women who give birth annually in LA for a population estimate.

The current capacity also falls short of the need for specific at-risk populations of interest. The current intensive home visiting capacity in Los Angeles County, as previously mentioned, is approximately 9,500 families per year, yet, each year in Los Angeles County there are 13,000 pre-term births, 17,000 mothers who experience intimate partner violence while pregnant, 34,000 mothers who are depressed while pregnant, 52,000 first time moms, 52,000 mothers who are reported to child welfare, and 214,000 children ages zero to three that are living in poverty. These figures show a stark contrast between need and capacity for the specific at-risk populations that LA home visiting programs seek to serve.



How well do our current programs meet the needs of our diverse LA community?

Research regarding cultural competency reaffirmed the value of already existing LA models. Some models operating in LA have research demonstrating their effectiveness with specific minority populations; the accompanying report “What Research Proves about the Impact of Home Visiting Models Used in Los Angeles” provides a summary of research relating to each program’s impacts on specific subpopulations. More importantly, research underscored that the most important consideration in achieving cultural competency within programs is not the structural model, but rather the integration of reflective practices into program implementation, training, and ongoing staff support. These revelations underscore the value of existing reflective practices and community feedback loops that current home visiting programs pursue, and point to the value of ensuring that we support these practices in our Countywide workforce efforts.

What are our best opportunities for system improvement in Los Angeles?

One of the most prominent opportunities to improve the system of home visiting in Los Angeles is the identification of new funding streams to expand capacity for both at-risk and general populations. With the looming threat of reduced MIECHV and First 5 funds on the horizon, identification of long-term, sustainable funding streams will be essential. In addition, our analysis revealed the need to strive for increased funding flexibility. All general population services and most high-risk, high-intensity services are geographically restricted. The vast majority of high-need services also have restrictions based on child age and family income/risk criteria that further restrict access. There are vast numbers of families who are therefore not able to access home visiting services simply due to geographic and other eligibility requirements currently in place in LA.

The gap analysis also revealed opportunities to improve family impact through increased coordination around prenatal referrals. Due to restrictions on current funding that require families to enroll in many existing programs at-birth or prenatally, building additional prenatal referral pathways from medical providers and County departments into home visiting programs would enable us to better leverage existing funding streams.

Appendix D

Home Visiting Providers in Los Angeles County, By Program Model

	EHS	NFP	HFA	PAT	Welcome Baby	PFF	Healthy Start
Antelope Valley Partners for Health			✓		✓ ¹		
Baldwin Park Unified School District	✓						
Child Care Resource Center (CCRC)	✓			✓ ²			
Child and Family Guidance Center			✓				
Children’s Bureau			✓				
Children's Institute, Inc. (CII)	✓		✓ ³			✓	
Citrus Valley Medical Center					✓ ⁴		
Department of Public Health		✓					
El Nido Family Center	✓			✓ ⁵			
Families in Good Health			✓				
Foothill Family Services	✓		✓				
Friends of the Family				✓			
Hope Street Family Center	✓						
Human Services Association	✓			✓			
Koreatown Youth and Community Center						✓	
Long Beach Unified School District	✓						
LA Biomed/South LA Health Projects			✓				
Los Angeles Child Guidance Clinic			✓				

¹ In partnership with Antelope Valley Partners for Health
² Multiple contracts: Lancaster/Palmdale, Pacoima/Panorama
³ Multiple contracts: Broadway/Manchester, Long Beach/Wilmington
⁴ In partnership with Citrus Valley Medical Center – Queen of the Valley Campus
⁵ Multiple contracts: Watts/Willowbrook, Pacoima/Panorama



	EHS	NFP	HFA	PAT	Welcome Baby	PFF	Healthy Start
Los Angeles Education Partnership (LAEP)	✓						
Maternal and Child Health Access					✓ 6		
Miller's Children's and Women's Hospital					✓ 7		
Mountain View School District	✓						
Northridge Hospital Medical Center					✓ 8		
Norwalk-La Mirada Unified School District	✓						
Options for Learning	✓						
Pacific Asian Consortium in Employment (PACE)	✓						
Pacific Asian Counseling Services			✓				
Palmdale School District	✓						
Para Los Niños						✓	
Pediatric Therapy Network	✓						
Penny Lane Centers						✓	
Plaza Community Services				✓			
Plaza de la Raza	✓						
Pomona Unified School District	✓						
Providence Holy Cross Medical Center					✓ 9		
Providence Little Company of Mary					✓ 10		
Providence Saint John's Child & Family Development Center						✓	

⁶ In partnership with California Hospital Medical Center

⁷ In partnership with Miller Children's and Women's Hospital

⁸ In partnership with Northridge Hospital Medical Center

⁹ In partnership with Providence Holy Cross Medical Center

¹⁰ In partnership with Providence Little Company of Mary Medical Center San Pedro

	EHS	NFP	HFA	PAT	Welcome Baby	PFF	Healthy Start
Richstone				✓			
Southern California Indian Center						✓	
St. Anne's	✓						
St. Mary Medical Center					✓ ¹¹		
Shields for Families			✓	✓	✓ ¹²	✓	✓
SPIRITT Family Services			✓			✓	
The Children's Clinic			✓				
The Help Group						✓	
The Whole Child				✓			
Torrance Memorial Medical Center					✓ ¹³		
Training and Research Foundation	✓						
UCLA	✓						
University of Southern California	✓						
Valley Presbyterian Hospital					✓ ¹⁴		
Vista del Mar Home-SAFE	✓						
Volunteers of America	✓						
Westside Children's Center	✓						
White Memorial Medical Center					✓ ¹⁵		
Total Agencies Offering Model	24	1	12	8	12	9	1

¹¹ In partnership with St. Mary Medical Center

¹² Multiple contracts. In partnership with Centinela Hospital Medical Center, Martin Luther King, Jr. Community Hospital, and St. Francis Medical Center

¹³ In partnership with Torrance Memorial Medical Center

¹⁴ In partnership with Valley Presbyterian Hospital

¹⁵ In partnership with White Memorial Medical Center



Los Angeles County Perinatal and Early Childhood Home Visitation Consortium Best Practices Workgroup

Quality Standards for Home Visiting Programs

These recommendations are intended to promote the adoption of quality standards among new and existing home visiting programs, potential funders, policymakers, legislators, and members of the Consortium. Meeting these standards will help maintain high quality home-based support to strengthen all expectant and parenting families so that the children of Los Angeles County are healthy, safe, and ready to learn.

Mission:
To coordinate, measure and advocate for high quality home-based support to strengthen all expectant and parenting families so that the children of Los Angeles County are healthy, safe and ready to learn.

Domain	Recommended Quality Standards
1. Program Design and Structure	The home visiting program uses a well-defined model design that specifies the program’s purpose, outcomes, duration, frequency of services, and curriculum.
2. Staff Qualifications and Training	Staff qualifications, program model, and curriculum training are clearly defined. An educational/training plan to meet any missing program model requirements is established, and ongoing professional development is required and monitored for home visiting staff, program supervisors, and directors.
3. Staff Supervision	An established structure is defined for program staff to implement reflective practice. The supervisor will be trained in reflective supervision. Staff receive individual and group “reflective supervision ⁱ ” at regularly specified time intervals to build skills, reduce vicarious trauma ⁱⁱ from working with high-need clients, and monitor services provided to clients. The program follows model’s standards with regard to supervisor-to-staff ratios and time intervals for regular supervision.
4. Fidelity to Model	Fidelity criteria are established and programs are monitored to document compliance with home visitation standards and fidelity criteria.
5. Monitoring, Evaluation, and Oversight	Performance monitoring and outcome evaluation methods and measures are clearly defined and implemented. Data are collected, evaluated, and shared with relevant audiences at regular intervals for program improvement and quality assurance purposes, as well as to demonstrate outcomes.



6. Cultural Sensitivity	<p>The program has clearly defined policies, procedures, and staff hiring and training practices that address inclusivity and are responsive to the ethnic, cultural, linguistic, gender, racial, and social diversity of the community being served by the program.</p>
7. Participant Recruitment and Enrollment	<p>The following are well defined: recruitment, outreach, eligibility and selection criteria, enrollment/disenrollment methods, and retention. Guidelines for establishing transition plans for participants exiting/ending the program are in place.</p>
8. Records and Auditing	<p>Agency records are maintained and audit-ready for fiscal/program accountability and quality improvement, and are audited at regular intervals via an appropriate channel. The program maintains and follows a confidentiality policy to protect participants' privacy.</p>
9. Community Linkage	<p>Program agreementsⁱⁱⁱ are in place and/or strong links with other home visiting programs and community-based services are demonstrated to address short- and long-term family needs.</p>
10. Family Engagement	<p>The program receives family/participant feedback on quality of services via specified methods at regular, defined intervals. Policies and procedures are in place to utilize findings to improve upon and continue meeting participant and family needs.</p>
11. Community Engagement	<p>The program receives community feedback via specified methods^{iv} at regular, defined intervals to assess community needs, relevance of program services, and program quality. Policies and procedures are in place to share data transparently and utilize findings to ensure continued responsiveness to community needs.</p>
12. Workforce Development	<p>To strengthen the existing home visiting workforce, ensure preparedness of the future workforce, and encourage professional investment in the field of home visiting, the program should form collaborative partnerships^v with universities, colleges, or other educational programs offering public health, social work, nursing, human services, early care and education, and mental health coursework.</p>



13. Collaboration	The program shares knowledge, data, and best practices with other programs and stakeholders in the field to support advocacy efforts for the mutual benefit of the perinatal and early childhood professional community and the families they serve.
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i Reflective supervision is defined as: “a collaborative relationship for professional growth that improves quality and practice by cherishing strengths and partnering around vulnerabilities to generate growth,” Rebecca Shahmoon-Shanok. The three central elements of Reflective Supervision are regularity, reflection and collaboration. Reflective Supervision has a mentoring and monitoring component to ensure staff development and quality outcomes. The Reflective Supervisor who is successful at mentoring and monitoring must merge qualities of an effective, efficient administrative supervisor with the qualities of a thoughtful, responsive reflective supervisor.

ii Vicarious Trauma is defined by the American Counseling Association as follows: “The term vicarious trauma (Perlman & Saakvitne, 1995), sometimes also called compassion fatigue, is the latest term that describes the phenomenon generally associated with the ‘cost of caring’ for others (Figley, 1982). Other terms used for compassion fatigue are: secondary traumatic stress (Stemm, 1995, 1997); secondary victimization (Figley, 1982). It is believed that counselors working with trauma survivors experience vicarious trauma because of the work they do. Vicarious trauma is the emotional residue of exposure that counselors have from working with people as they are hearing their trauma stories and become witnesses to the pain, fear, and terror that trauma survivors have endured.”

iii For example, a Memorandum of Understanding (MOU), Memorandum of Agreement (MOA), etc.

iv For example, parent and community advisory boards, local community needs assessments, confidential program participant and staff feedback, etc.

v For example, internships, career days, supplementary coursework, etc.



Los Angeles County Perinatal and Early Childhood Home Visitation Consortium Data Workgroup

Home Visiting Program Outcome Indicators

These indicators are intended to measure short term outcomes for clients of all major LA County home visiting programs. They are based on the intended outcomes of the programs, national data collection efforts such as MIECHV and the Pew Home Visiting Project, and health care quality measures such as HEDIS.

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1. **Breastfeeding**
 - a. Any breastfeeding and exclusive breastfeeding
 - b. Initiation and three-, six-, and twelve-month intervals
2. **Depression Screening**
 - a. Positive screens for depression
3. **Well-Child Care Visits**
4. **Timely Postpartum Follow-up Visits**
5. **Mother's Insurance Status**
6. **Child ED/ER Visits**
7. **Child Maltreatment**
8. **Child Development**
 - a. Screening, referral, and Regional Center assessment
9. **Adequate Prenatal Care**
10. **Postpartum Family Planning**



Summary of Sustainability Research

Background

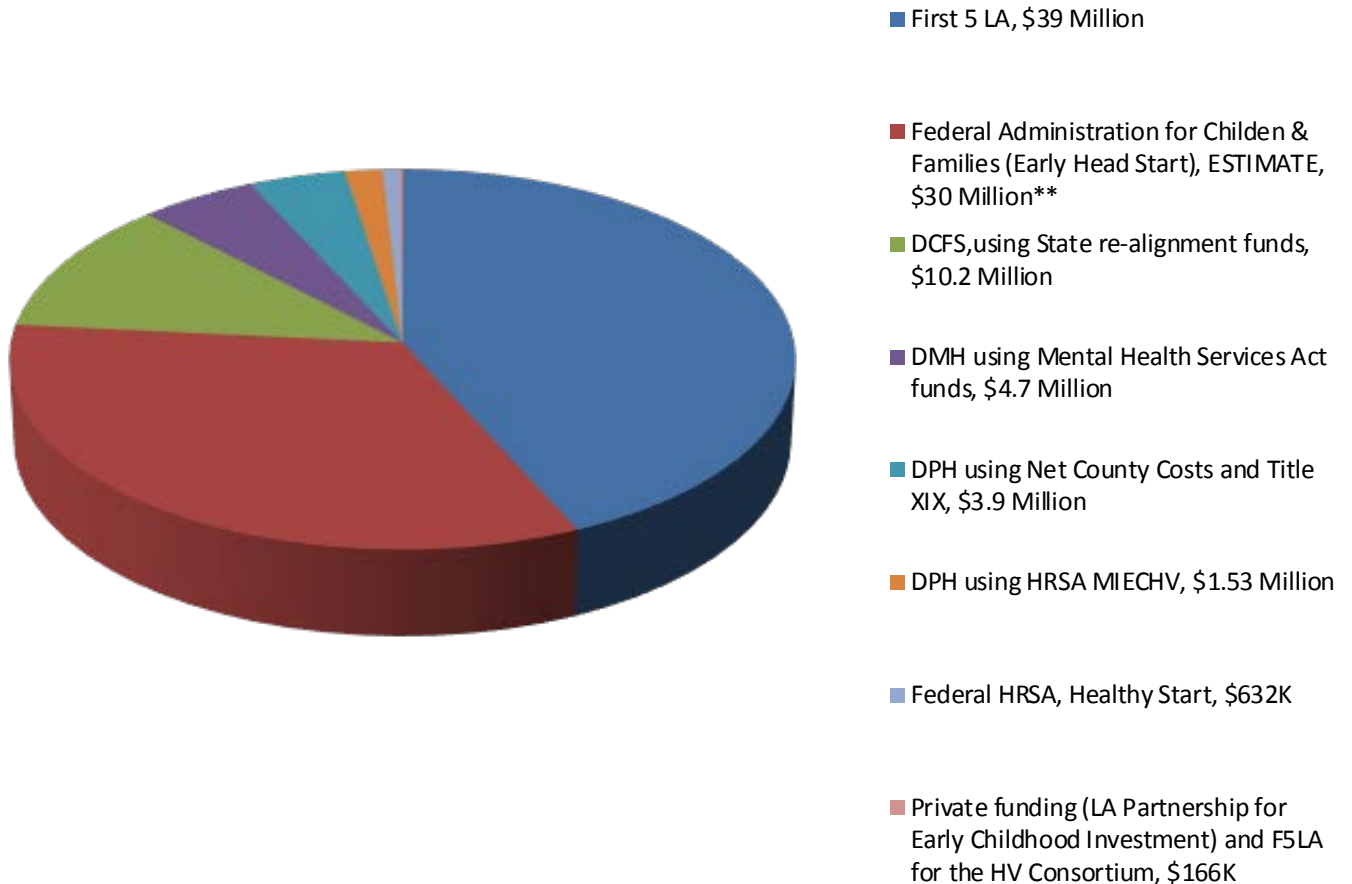
Sustainability is one of the most pressing challenges facing the network of home visiting programs in Los Angeles. In addition to the challenge of the unmet community needs identified in the report, current funds cannot be sustained sources of support as First 5 LA tobacco tax revenue declines. First 5 LA is the single largest funder of home visiting in LA County investing approximately \$39 million annually (based on FY 2016/17 budget). First 5 LA funding continues to decline with the loss of tobacco revenue, jeopardizing the long-term sustainability of the existing service capacity in the system.

The LA County Board of Supervisors motion on home visiting, passed in December 2016, states a number of priority recommendations, including a request for partners to, “Identify a framework to maximize resources by leveraging available funding and where possible identify new and existing but not maximized revenue streams.” To that end, the named County agencies and community partners have committed to explore opportunities to bring additional resources to support LA programs. To date, a range of financing strategies to support expansion and sustainability of the proposed universal home visitation system in LA County have been identified and assessed. The following is an initial assessment and prioritization of the sustainability strategies explored to date, as well as some general themes that are emerging from this aspect of the work.

Current LA County Funding Landscape, FY16-17

In Los Angeles, we have a spectrum of home visiting models supported through a variety of locally and federally funded programs. As shown in the table above, collectively these funds for home visiting flow through First 5 LA, the Departments of Public Health, Mental Health, Children and Family Services and Early Head Start. A large proportion of funding for home visiting comes from First 5 LA, along with significant portions from the federal government through Maternal, Infant, Early Childhood Home Visiting Program (MIECHV), Mental Health Services Act/Prevention and Early Intervention (MHSA/PEI), Child Welfare/State re-alignment funds, as well as Healthy Start and Early Head Start. Private philanthropy has also funded aspects of home visiting such as the Los Angeles County Perinatal and Early Childhood Home Visitation Consortium (the Consortium), a network of approximately 50 perinatal and early childhood home visitation programs, working together to support the County’s home visitation programs.

Home Visiting Funding in LA County, FY16-17 Estimates*



*DCFS-LA County Department of Children and Family Services, DMH-LA County Department of Mental Health, DPH-Department of Public Health, HRSA-Health Resources and Services Administration, MIECHV-Maternal, Infant and Early Childhood Home Visiting Program

**Head Start funds estimate based on the volume of families served and the approximate cost per family that other models experience. The caveat is that funds combine center based services and home based services into one financial package, so difficult to separate the home visiting from the child care.

Initial Assessment

To assess and prioritize sustainability strategies, current research and literature was reviewed as it relates to types of financing strategies used by home visitation efforts in other states and localities. Furthermore, information-gathering calls/interviews were conducted with key experts across the nation and in various jurisdictions [footnotes]. This information was assessed with an eye towards what may be applicable to and feasible in LA County.

One of the most critical overarching themes from the initial assessment of home visiting strategies in other states and localities is the importance of pursuing and implementing multiple sustainability strategies simultaneously, in a blended and/or braided fashion, to more fully meet the outcomes for a universal system of home visiting. Home visiting efforts in different states and localities have different intended outcomes and results, based on the specific needs of their target population. Programs are typically selected based on their ability and strengths in meeting those intended outcomes. For example, if an effort is aiming to meet the needs of families through primary care via the health system, funding for those programs may be more closely tied to Medicaid-related sources.

A related theme is that LA County entities should coordinate funding in a more intentional manner to maximize fund leveraging opportunities and meet the collective outcomes we seek through different models and for different target populations. In LA County currently, as depicted in the table above, home visiting efforts are funded by a diversity of sources through various sectors. While there are a number of significant and robust funding sources flowing through major systems in the County for home visiting, funding is not necessarily coordinated across those systems in a cohesive fashion. One example of statewide coordination on funding is in Washington State, where approximately five years ago, the state established a Home Visiting Savings Account (HVSA) in the Department of Early Learning, where the majority of home visiting funds for the state are received and administered, including MIECHV, TANF funds for HV, and private funding from the Gates Foundation. In this model, funds are coordinated and managed in a centralized manner.

Overall, another major theme is that Medicaid and other health system-related funding are natural, complementary funding streams for most home visiting efforts nationwide. While a number of states and jurisdictions, including LA County, already finance part of their home visiting programs using Medicaid, it remains a greatly underused option.¹ Strategies in this category include Medicaid waivers, Targeted Case Management, and Medicaid Administrative Activities. While they are all strategies to explore more in-depth, implementation “terms” will vary greatly across strategies. Pursuing a waiver for example, would be a long-term strategy because of the effort and partnership it will require, as well as buy-in at the state level, but it is one of the most sustainable strategies to pursue given potential impact.

There is currently an opportunity to partner with the Department of Health Services (DHS) to expand home visitation in LA County over the next four years through a Medicaid 1115 waiver, the Whole Person Care program. In partnership with the Department of Public Health's public health nurses, the program will serve as a mechanism to test a blend of programs in an evidence-informed effort to reach the most vulnerable pregnant and parenting families. This expansion of the DHS prenatal program "MAMAs Neighborhood" seeks to fill gaps in the existing home visitation landscape and serve as a demonstration which can inform future state plan amendment proposals to secure sustainable funding streams.

¹ Medicaid and Home Visiting, Best Practices from States, Center for American Progress, January 2017.

<https://www.americanprogress.org/issues/early-childhood/reports/2017/01/25/297160/medicaid-and-home-visiting/>

It is also important to note, particularly now, Medicaid and health system-related strategies are largely dependent on the federal policy environment. Should there be significant changes to Medicaid (ie. shift to a block grant structure, changes to pre-existing conditions provisions and/or Medicaid eligibility), the impact on these strategies in terms of their viability to support HV, may be compromised.

Another important theme that has emerged is that there is opportunity for LA County to further maximize existing revenues, such as federal funds. The research done to date has identified various existing revenue sources that are not being fully maximized in LA County, such as Targeted Case Management (TCM) – which is funded by a combination of local and federal Title IX (Medicaid) funds. TCM services are the most commonly billed services by home visiting programs in the nation. In the 42 states where Nurse-Family Partnership (NFP) operates, 26 states receive some funding through Medicaid; in the majority of these states, the Medicaid funding is a TCM service. It is also important to note that Medicaid reimbursement for TCM is higher in CA than in many other states. ²The TCM reimburses participating counties for the federal share of costs (up to 50%) for billable, case management services (ie. access to needed medical, social, educational or other services) provided to Medi-Cal beneficiaries in specific target populations.

Currently in LA County, only County employees (NFP providers and Public Health Nurses) can bill TCM. In order for CBOs to participate in the program, change in the current structure must occur. In LAC, DPH has discretion to make revisions to the structure as appropriate. As a direct result of the HV Board motion and planning group work, DPH and First 5 LA are currently engaged in planning efforts to strategize on a policy change within DPH to allow CBOs to participate in TCM billing, which could result in significant expansion of funding for home visiting services in LA County, particularly given the potential match rate on billable activities.

Other opportunities to maximize existing revenues include HV efforts and related supports through the Department of Mental Health/Prevention and Early Intervention (MHSA/PEI) and Department of Children and Family Services/State re-alignment funds). These County departments already fund HV services and there may be opportunities for expansion, with demonstrated impact. To this end, the motion planning group is currently examining, in partnership with these County departments, existing department resources and the potential eligibility of these funding sources to expand their support for home visiting.

Another important theme for LA County is to explore new sources of funding for home visiting outside of the streams of funding programs currently tapped. One example of a high priority strategy in this regard is the Temporary Assistance for Needy Families (TANF), temporary financial assistance for pregnant women and families with one or more dependent children,

² Medicaid Financing of Early Childhood Home Visiting Programs: Options, Opportunities and Challenges, Pew Center on the States, National Academy for State Health Policy, 2012.
http://www.pewtrusts.org/~media/assets/2012/07/pcs_nashp_hv_medicaid.pdf

which helps pay for food, shelter, utilities, and expenses other than medical. TANF is a fixed block grant to the state (California receives approximately \$5.3B per year), and funds can be used on a wide variety of activities. In 26 states across the nation, TANF is a partial source of funding for home visiting programs. This strategy has not been tapped into to date in LA County.

Locally, members of the motion planning group, including F5LA, have met with LA County Department of Public Social Services (DPSS) and Shields for Families, a Healthy Families America (HFA, a home visiting program) provider, to discuss a potential pilot opportunity where DPSS clients may be linked to this evidence-based home visiting program. In the proposed partnership, First 5 LA will support the expansion of HFA slots for these families through its existing efforts, for the pilot period, with the intent that DPSS would explore sustaining the services longer-term if measurable outcomes and improvements could be demonstrated.

Another important theme is that a given sustainability strategy is more viable when the outcomes of that strategy are aligned more closely to home visiting. For example, like TANF, home visiting is a proven two-generational support leading to young children's healthy development and family long-term success by connecting families to needed resources. Home visiting adds to a more holistic package of programs that can improve family economic self-sufficiency, a key outcome of the TANF program. Studies have found that more parents participating in home visiting programs work, are enrolled in education or training, and have higher monthly incomes. Home visiting complements the support provided by TANF caseworkers. Home visiting would allow families another source for referrals to much needed services and supports (such as child care), aiding in preparing the families for work-related activities, and ultimately, self-sufficiency.

It is also important to note that HV may be a model to help departments achieve their stated outcomes, thus elevating the value proposition of HV to those departments. For example, there are various efforts nationwide which point to the benefits of home visitation as it relates to prevention of criminal convictions and days spent in jail, for the mothers. Also noted are the benefits to the children who participated, in terms of their decreased future interactions with the criminal justice system. To this end, there is a value proposition of home visiting to County departments such as Probation.

Finally, advocacy is a critical component of long-term sustainability planning that should be implemented in parallel to the overall effort. The December 2016 home visiting board motion was an incredible milestone that continues to serve as a powerful statement of LA County's commitment to home visiting, and as a platform for advocacy for the collective effort at the state and federal levels. For example, the Maternal, Infant, and Early Childhood Home Visiting, or MIECHV, program, which represents the largest source of federal investment in home visiting, and a significant source of funding for LA County programs, is currently facing reauthorization in 2017. Over the course of the last several months, the HV Consortium, motion planning group members and advocates across the nation, have been working to advocate on behalf of reauthorization and doubling of funding over the next 5 years. As a demonstration of their support for MIECHV, on May 23, 2017, the LA County Board of Supervisors approved a

subsequent motion, introduced by Supervisors Kuehl and Hahn, to author a 5-signature letter in support of MIECHV to Congress.

To this end, the County Departments and organizations named in the motion are committed to bringing agency resources as it relates to policy/advocacy expertise, technical assistance and support, as well as contacts and connections to support this aspect of work. Also critical is continued partnership and engagement with the HV Consortium to support and strengthen the participating agencies' ability to stay abreast of and track local, state and national opportunities for advocacy that could increase funding for programs or could otherwise support the maintenance of high-quality home visiting programming in Los Angeles.

Methodology/Prioritization

Overall, a number of key factors, outlined below, have emerged as critical to assessing and prioritizing sustainability strategies. In particular, these factors relate to the entities/agencies either funding and/or implementing home visiting efforts:

- Leadership buy-in
- Capacity/infrastructure (ie. relevant electronic medical record/database system, staffing, equipment, physical space, etc.)
- Current participation in home visitation or related efforts
- Readiness and openness to change efforts
- Amount of effort and time required to implement the strategy
- Yield or return (monetary)
- Strong value proposition to the implementing agency or funder to support HV, ie. involvement would help progress the individual agency's vision and goals
- Supportive local, state or national policies impacting the strategy are in place or being considered through legislation
- Funding availability, ie. are the funds capped³ or uncapped? If capped, are they being fully leveraged?

Summary and Next Steps

Funding streams investigated during this research included those within Medicaid (waivers, Targeted Case Management-TCM and Medicaid Administrative Activities-MAA), the federal Maternal, Infant and Early Childhood Home Visiting Program (MIECHV), mental health (Mental Health Services Act/Prevention and Early Intervention-MHSA/PEI), child welfare (State re-alignment funds) and social services (Temporary Assistance for Needy Families-TANF) systems. One of the most significant themes is the importance of pursuing and implementing multiple sustainability strategies simultaneously, in a blended and/or braided fashion, to achieve

³ Capped funding means funds are limited in some way. For example, if federal funds are allocated to states through either a block grant or based on per capita spending, this would represent a limit to the amount of funds that each state is eligible to receive. Uncapped means there is no limit to how much of these funds can be leveraged.

a truly universal system of home visiting. In this spirit, TCM and TANF were considered short-term opportunities to pursue in this initial assessment, with potential implementation of pilot work in FY17-18. Funding streams assessed as needing deeper exploration include MAA, MHSA-PEI and Child Welfare/State re-alignment funds, though it is important to note programmatic partnership in these areas is progressing as a result of the HV motion. Some opportunities considered long-term include Medicaid waivers, given the level of planning, partnership and state-level buy-in required, though there may also be opportunities to progress home visiting efforts via a current LA County waiver. Another long-term strategy is MIECHV, a federal allocation which will require continued advocacy with local, state and national partners because funding is currently only authorized through September 2017. Finally, funding streams to be assessed in the next phase include Early Head Start, Healthy Start, Early Periodic Screening Diagnosis and Treatment (EPSDT), Probation and Homelessness/Housing.

It is important to note sustainability research is occurring on a parallel track to the overall programmatic effort (ie. development of vision, goals, outcomes, needs and gaps for a universal home visiting system) and financing strategies are largely dependent on the latter programmatic parameters. Therefore, as these parameters are further clarified, it will help shape our sustainability priorities/plan.