

AGENDA

MEETING OF THE BOARD OF COMMISSIONERS

Chair: Holly J. Mitchell

Thursday, September 14, 2023
1:30 PM – 4:30 PM

Meeting Location:

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

1. **ACTION**
Call to Order / Roll Call
2. **ACTION**
AB 2449 Request(s) to Participate Remotely Due to Emergency Circumstances and Notice(s) of Remote Participation for Just Cause
3. **ACTION**
Consent
 - A. Approve Special Commission Meeting Summary Action Minutes and Transcript - July 13, 2023 3
 - B. Contract: Approve Two (2) New Agreements and Authorize Staff to Complete Final Execution of the Agreements Upon Approval from the Board 129
 - C. Receive and file the Investment Portfolio Progress Report 132
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Strategic Plan
 - A. Proposed Goals, Indicators, Objectives and Strategies 149

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

**Presenters: Chrissie M. Castro, Chrissie M. Castro & Associates
and Rigoberto Rodriguez, Chrissie M. Castro & Associates**

B. Sustainability Framework

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**Presenters: Raoul Ortega, Director of Finance and JR Nino, Chief Operating
Officer**

Note: There will be a break halfway through this item.

7. **INFORMATION**
Public Comment (for items not on the agenda)
8. **ACTION**
Adjournment



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MEETING OF FIRST 5 BOARD OF COMMISSIONERS

Thursday, July 13, 2023

750 North Alameda Street, First Floor

Los Angeles, California 90012

STENOGRAPHICALLY REPORTED BY:
HEATHERLYNN GONZALEZ
CSR #13646

Thursday, July 13, 2023; Los Angeles, California

1:31 p.m.

-oOo-

SUPERVISOR MITCHELL: Good afternoon. I'm going to ask everybody to take their seats. Everyone is so happy to see each other. I've seen folks I haven't seen in years. New voices. CCRC.

Good afternoon, everyone. I'm going to go ahead and call the meeting to order and ask for roll call please.

MS. VO: Judy Abdo?

COMMISSIONER ABDO: Here.

MS. VO: Robert Byrd?

Yvette Martinez?

COMMISSIONER MARTINEZ: Here.

MS. VO: Summer McBride?

Brandon Nichols?

COMMISSIONER NICHOLS: Here.

MS. VO: Maricela Ramirez?

COMMISSIONER RAMIREZ: Here.

MS. VO: Wendy Wechsler?

COMMISSIONER WECHSLER: Here.

MS. VO: Deborah Allen?

COMMISSIONER ALLEN: Here.

MS. VO: Jacquelyn McCroskey?

1 COMMISSIONER McCROSKEY: Here.

2 MS. VO: Deanne Tilton?

3 COMMISSIONER TILTON: Here.

4 MS. VO: And Holly Mitchell?

5 SUPERVISOR MITCHELL: Here.

6 MS. VO: Quorum is present.

7 SUPERVISOR MITCHELL: And we've got a couple of
8 board members who are in transit. There's a possibility
9 of them joining us.

10 Good afternoons, Ms. Vo.

11 MS. VO: Good afternoon, Madam Chair.

12 SUPERVISOR MITCHELL: I see through the magic of
13 technology that we've got a couple of commissioners who
14 have apparently requested the Board's approval to remotely
15 participate in today's meeting due to physical or family
16 medical emergency that prevents them from being here. And
17 would you acknowledge who those are for us?

18 MS. VO: Yes, Madam Chair. Commissioners
19 Martinez and Abdo are joining us virtually due to the AB
20 2449.

21 COMMISSIONER MITCHELL: Thank you. And have
22 either of those commissioners participated remotely in the
23 commission's regular meetings under AB 2449 for either
24 just cause or because of emergency circumstances at least
25 twice this calendar year?

1 MS. VO: Confirming no for both commissioners.

2 SUPERVISOR MITCHELL: Excellent. So we're glad
3 that we have that option available to them and to us.

4 Welcome to you both. It's good to see you.

5 I'm going to ask for a motion to approve Martinez
6 and Abdo's request to participate remotely in today's
7 regular meeting? Is there a motion?

8 COMMISSIONER NICHOLS: I'll move --

9 ATTORNEY YOUNG: Chairman, if I could just
10 clarify that they're participating for just cause
11 purposes. And I believe for Commissioner Martinez, the
12 just cause rationale is a need to take care of childcare.
13 And then for Commissioner Abdo, I believe it's with
14 respect to an illness that she is participating remotely.

15 SUPERVISOR MITCHELL: Okay. And the bill
16 requires that we specify the just cause on record?

17 ATTORNEY YOUNG: Yes. So we have to specify the
18 rationale for the just cause. And we also have to
19 distinguish between whether it's just cause or emergency
20 circumstances.

21 SUPERVISOR MITCHELL: Okay. So both of these are
22 just cause?

23 ATTORNEY YOUNG: Both of these are just cause,
24 which does mean that the board does not have to approve
25 their participation for just cause.

1 SUPERVISOR MITCHELL: Beautiful.

2 Man, I wasn't there to vote on AB 2449. I would
3 have made a couple of changes to that. That seems a
4 little intrusive to see. But I am no longer a member of
5 the California legislature; so I'll just keep my opinion
6 to myself.

7 Thank you very much, Counsel. I appreciate you.

8 We're going to proceed with public comment on the
9 consent agenda, please.

10 MS. VO: Confirming that there are no public
11 comments on the consent agenda.

12 SUPERVISOR MITCHELL: All right. Before we call
13 for the role, any questions with regard to the consent
14 agenda? No one wishes to pull anything off? Excellent.

15 If we could call the roll.

16 MS. VO: Judy Abdo?

17 Yvette Martinez?

18 COMMISSIONER MARTINEZ: Here.

19 MS. VO: Judy did you vote "Yes"?

20 COMMISSIONER ABDO: Yes.

21 MS. VO: Thank you.

22 Brandon Nichols?

23 COMMISSIONER NICHOLS: Yes.

24 MS. VO: Maricela Ramirez?

25 COMMISSIONER RAMIREZ: Yes.

1 MS. VO: Wendy Wechsler?

2 COMMISSIONER WECHSLER: Yes.

3 MS. VO: And Holly Mitchell?

4 SUPERVISOR MITCHELL: Yes.

5 MS. VO: Motion is passed.

6 SUPERVISOR MITCHELL: Thank you very much.

7 We're going to transition on to Agenda Item
8 Number 4, which are remarks from me.

9 And I'd like to begin by thanking all of the
10 First 5 staff and board as we got through another budget
11 cycle and continue to work on our strategic plan reset.

12 As it relates to the reset, there's been a lot of
13 work and an endless numbers of hours that are being put in
14 as we continue to fine tune the reset. Which is really
15 critically important because we acknowledge the world
16 around us has changed since the plan was finalized.

17 I recognize this process can be tedious, as with
18 all planning endeavors, and lengthy. But it's important,
19 I believe, that we get it right because, as we all know,
20 LA County's children and their families are counting on us
21 to do so and they deserve it.

22 On today's agenda, we'll be presented with
23 updates on the strategic reset and landscape analysis, as
24 well as a presentation on Early Care and Education.

25 I have to share with you, the Power Point

1 presentation we had last meeting I have distributed to any
2 number of people, number of places. I've gone to former
3 colleagues of the legislature, others just thought it was
4 wonderful data, important data, timely data that
5 represents all of LA County. So I, for one, appreciated
6 the analysis and will continue to share that information.

7 So, Colleagues, you'll be asked about your vision
8 and where you hope to see the organization in the years to
9 come. As we prepare to provide that feedback, I ask
10 commissioners to continue to bring your individual
11 expertise to the table. But it's also important that we
12 all keep First 5's collective mission top of mind and
13 continue to use the North Star to guide our collective
14 work.

15 When we talk about every child in LA County
16 reaching their full developmental potential throughout the
17 critical years of prenatal to five, we have to ask
18 ourselves, what does that mean to us? And it's my
19 expectation as your colleague and chair that, as we answer
20 that question, we continue to keep our commitment to
21 racial justice and equity in mind, because it's only then
22 we can best serve the beautiful complexity and diversity
23 of the children that comprise LA County.

24 So with that, is there any public comment? Oh,
25 we did that at the beginning.

1 MS. VO: We did that for the previous item.

2 But confirming there are no public items for your
3 comments.

4 SUPERVISOR MITCHELL: No public comments for the
5 chair's report.

6 Colleagues, let's move on to Item 5, which is our
7 Executive Director's report.

8 Thank you, Karla.

9 MS. PLEITEZ HOWELL: Thank you so much,
10 Supervisor.

11 Welcome. It is really, really wonderful to see a
12 lot of the First 5 LA colleagues in the audience, getting
13 stuck in the elevators together because now there's rush
14 hour to get on the elevators.

15 Commissioners, we actually brought back staff
16 this week. This is the first week that we're implementing
17 our new hybrid policy. And it's been really phenomenal to
18 be in dialogue, in conversation, in community with many of
19 you.

20 This month also marks the start of First 5 LA's
21 fiscal year. And we are on the same fiscal year and time
22 line as the State. And earlier this week, the Governor
23 officially signed our new State budget \$310 billion.
24 Well, that sounds like a lot. The commission has heard
25 that this year was a little bit more complicated with

1 budget negotiations. We had a \$30 billion deficit at the
2 State, and we also pushed the time line to collect revenue
3 or income tax returns to October. So that made
4 negotiations a little complicated.

5 And what it meant is that we, especially our
6 partners in the audience, and others working towards
7 issues for children zero to five, that that message was
8 continuously elevated.

9 And I've got to say that historically in such a
10 time of volatility -- and our Chair would know this best
11 -- children and families are not always prioritized and
12 often are the first to be cut. And this budget is
13 historic in that we were at the table. Children and
14 families continued to be part of the conversations because
15 of the work that's being done by our partners.

16 So we know that California has a long way to go
17 to think about a children's budget and making sure that we
18 continue to center children and families. But I do want
19 to highlight some boosts in this budget and really show
20 appreciation for our OGAP team that worked in partnership
21 with many other folks. And really important wins in this
22 budget for the children and families we serve.

23 One is family fees and making sure that those
24 that cannot afford childcare -- yes. And the Chair worked
25 -- has done a lot of extensive historic work on that. And

1 the budget also authorized a \$2.8 billion fund to continue
2 to increase access for childcare and preschool.

3 In short, a healthy budget given the realities of
4 what we faced this year. Still, First 5 really wants to
5 work with you, the commission, in thinking about our
6 strategic plan and then how do we continue to bolster
7 this.

8 Proposition 10 makes our charter really, really
9 clear. We are here for the population of prenatal through
10 five. And that is the focus of our strategic plan and
11 making sure that we continue to lift up the needs of this
12 population. In the last few months the commission heard
13 really important information about the change of
14 circumstances and what our children are facing post
15 pandemic. You heard Los Angeles County has over half a
16 million children under the age of five. That's the
17 population we serve. There are over 243,000 households
18 with children under age six with insufficient means to
19 basic needs. And we discussed some of the basic needs and
20 you saw the access and lack of access to some of that.

21 And what we've discovered in our landscape is --
22 and what many of you knew in your gut and instinctively is
23 that our children are coming into a really, really
24 different world post pandemic. And what we hope to do --
25 and be in conversation -- partnership with all of you is

1 what are we going to do differently to make sure that
2 we're addressing those needs? And that's the conversation
3 today.

4 And I'm really excited to welcome Chrissie Castro
5 and Dr. Rigo Rodriguez. If you just waive to us. We will
6 be meeting them officially. Many of you know them
7 already, but they will help us go through the strategic
8 reset plan and we'll need those conversations. And we're
9 really lucky to have the two of you.

10 And lastly for some First 5 LA team updates, we
11 have shared with many of you that today is Charna's last
12 day. And I'm not sure if I see Charna in the audience.

13 But we wanted to congratulate Charna. She's had
14 the great opportunity of joining First 5 Riverside. And
15 in the interim, we are absolutely thrilled to have Ofelia
16 Medina -- who's sitting all the way in the back -- will be
17 serving an interim role on helping develop our policy
18 agenda and working on the good work that we have with you
19 all in the coming months.

20 And of course, I cannot conclude my comments
21 without really saying thank you to the First 5 LA team.
22 The last few months, the team has dedicated endless hours
23 to think about our landscape, to think about community
24 engagement, and to continue the really good work that
25 they're already doing. This week is the first week here

1 together we've shared doughnuts, coffee, lots of stories
2 about what the summer looks like. And I'm really excited
3 about that opportunity with our team to continue to build
4 that community connection amongst us as we do that
5 parallel with community folks that we will hear from
6 today.

7 And with that, Madam Chair, turning it back to
8 you.

9 SUPERVISOR MITCHELL: Excellent. Having
10 transitioned into a new gig, if you will, in the middle of
11 Covid, having had to hire staff and on-board staff and not
12 be share -- not share -- not being able to share space for
13 -- I think it was like three months for us, I can
14 understand how important it is to have the opportunity for
15 you to connect and for your team to connect with you
16 in-person. So I'm glad that we as a County-State are able
17 to make this transition. And congratulations on that.

18 Any questions board members have of our ED?

19 Public comment?

20 MS. VO: Confirming there are no public comments
21 on the ED's comments. And if I may add, Madam Chair,
22 before we move on to the next item, we have a request from
23 our virtual board member attendees for all speakers to
24 ensure that they are speaking into the mike to ensure that
25 they can hear coherently during this meeting.

1 SUPERVISOR MITCHELL: Thank you so much. Point
2 taken. Thank you.

3 Let's transition now to the meat of today's
4 meeting -- our Strategic Plan Reset, Using Parent and
5 Early Educators, Voices, and Data to Inform Our Systems
6 Change Approach for Early Care and Education.

7 Happy to hand it over to staff to lead us through
8 this exercise.

9 MR. WAGNER: Thank you, Madam Chair, and members
10 of public. We're excited to be presenting the next item
11 on the agenda which is focused on highlighting what we're
12 hearing from parents and early educators to inform our own
13 thinking and approach to systems change within the Early
14 Care and Education System.

15 I'll make a few very brief contextual remarks and
16 then turn it over to the panelists who will provide us
17 greater detail on the topic and findings from two new
18 reports or landscape analyses that focus on home-based
19 childcare.

20 But first a bit of context. As you know, since
21 February our -- of this year, staff have been engaged in
22 the Strategic Reset process. Back in February, the board
23 asked us to dig into our work and the larger ecosystem in
24 which we do our work to inform our Strategic Reset. I
25 think it was Commissioner McCroskey suggested we undertake

1 some case studies of our work and what we're learning,
2 which we did present as part of our landscape analysis.

3 We further heard from the board in March when we
4 undertook the breakout sessions and focused on some
5 questions related to the work systems that we're engaging
6 and the roles that First 5 LA has taken. And you provided
7 input on that. More recently, at our last board meeting
8 in June, we brought forward highlights from our landscape
9 analysis including data and demographics referenced by the
10 Chair and our Executive Director, and measures of child
11 and family well-being. Those data points were also
12 further examined in June's PPC meeting.

13 This landscape also included an analysis of
14 policy opportunities as well as an analysis of our seven
15 programmatic investment areas that represented the vast
16 majority of our annual expenditures, and in some cases
17 over a decade of First 5 LA's contributions to those
18 bodies of work.

19 In some ways, that conversation continues today
20 and into today's panel, during which we will share
21 highlights from our own landscape analysis focused more
22 specifically on the Early Care and Education system here
23 in Los Angeles County which began just over a year ago.
24 And fortunately, is able to inform our strategic reset.

25 So just to explicitly connect the two, our

1 specific landscape analysis on ECE started over a year
2 ago, and we're bringing it to inform our broader strategic
3 landscape analysis in forming Strategic Reset.

4 We also heard from the board a desire to bring
5 forward the important voices of community and parents
6 which will be highlighted as part of today's panel
7 presentation. So -- and those findings and highlights
8 will both be with the presentations that our own team will
9 be providing -- our ECE Team as well as our partners at UC
10 Berkeley Center for -- on childcare employment.

11 So with that, I'll turn it over to Gina who will
12 launch us into our panel presentation. Gina Rodriguez is
13 with our ECE team.

14 MS. RODRIGUEZ: Thank you, John. Good afternoon,
15 Commissioners, First 5 colleagues, and the public
16 listening in this afternoon. We're so very pleased to be
17 here to continue to learn and understand about home-based
18 childcare. As you can see, we're joined by a notable team
19 of practitioners and researchers and advocates. And as
20 you remember at the last PPC data on child and family
21 well-being illuminated the lack of access to early care;
22 so in our presentation today, we'll explore a part of the
23 ECE system that if strengthened and supported can improve
24 access to quality care, early care, and education for
25 families and children.

1 So the agenda for today will include a deeper
2 look into the landscape of home-based childcare in Los
3 Angeles County. We'll hear from our colleagues at the
4 CCRC researchers Susan Savage and Olivia Pillado, who will
5 share findings from the report titled, "Essential for
6 Families: Findings from a Landscape Analysis of LA's
7 Home-Based Childcare." And we'll also learn in more
8 detail about the Los Angeles context, demographics, and
9 the experience for families who have their children in
10 home-based settings and the early educators who provide
11 care.

12 You'll also hear from Lea Austin and Anna Powell
13 from the Center for the Study of Childcare Employment at
14 UC Berkeley who will share statewide-level data about
15 parents' reliance and preferences in family, friend,
16 neighbor, and nanny care as we hear about this common
17 choice and how parents deeply value home-based care. And
18 in between these presentations, we'll hear and learn
19 directly from early educators in a home-based setting,
20 Jenny Liao and Justine Flores who own and run family
21 childcare businesses. They are members of First 5 LA's
22 ECE advisory committee, what was formally known as a
23 Provider Advisory group.

24 And also our intention today is hearing from
25 these -- our intention today in hearing from these

1 speakers is to better understand the experience of family
2 and early educators to use these narratives and data to
3 inform our strategic plan reset.

4 So just want to provide a little history around
5 our home-based childcare strategy. In September of 2021,
6 the Board of Commissioners approved a strategic plan to
7 move forward with the landscape analysis to understand the
8 needs of family childcare and family, friend, and neighbor
9 care in Los Angeles County, and the families who access
10 them within the subsidy system.

11 The landscape launched in February of 2022. And
12 in 2023 at the PPC, we presented an update on some of the
13 landscape findings and a snapshot of the overall
14 recommendations. We are currently in the dissemination
15 phase and our contracted partners are the Childcare
16 Alliance of Los Angeles and the Childcare Resource Center.

17 Let me also remind you of some of the additional
18 context about providing care in a home-based setting. a
19 key component of California's childcare landscape is
20 home-based childcare, what we refer to as HBCC, which is
21 childcare offered in a provider's home or a child's home.
22 We have two broad categories: Family friend and neighbor
23 care, FFN, also known as licensed exempt; and family
24 childcare, FCCs.

25 FFN care can be paid or unpaid. If paid, they

1 can be paid by a parent or through vouchers from the State
2 via agencies like the R&Rs and the Alternative Payment
3 Agencies. FCCs who are licensed provide care in their
4 home and they are paid by parents or through vouchers from
5 the State.

6 In addition to being the most common form of
7 non-parental childcare for toddlers, HBCC is also used the
8 most by historically marginalized families. They are more
9 likely to encounter inequitable access to services and
10 discrimination within the systems. Marginalized families
11 include low-income families with parents working
12 nontraditional hours, immigrant families, families living
13 in rural areas -- communities, families of color, or
14 families of children with disabilities. Also, many of
15 these groups are more likely to live in licensed childcare
16 deserts. There's also a greater concentration of
17 dual-language learners in home-based childcare.

18 Home-based early educators are primarily women of
19 color. Black and Latina women are overrepresented in the
20 home-based care workforce. Most children receiving
21 subsidized care are in home-based settings; however,
22 state-funded quality supports have been largely designed
23 for center-based care like State preschools.

24 HBCC, early educators, and the children in their
25 care do not have a equitable access to the resources

1 necessary to provide and receive the highest quality of
2 care. The EC system is already shaped by local State and
3 Federal policies with deep roots in slavery, colonization,
4 racism, and sexism.

5 The home-based childcare workforce and the
6 children in their care are marginalized within this
7 already oppressive system; so it's important to recognize
8 how critical it is to address issues around home-based
9 childcare in order to strive for greater equity and
10 justice for children, families, and early educators.

11 So as you listen to the presentations today,
12 please consider these questions: What are the
13 opportunities for LA First 5 in home-based settings? What
14 do early educators need? How can they be supported? And
15 how can this presentation inform our thinking around the
16 strategic plan reset?

17 So with these questions in mind, I will hand it
18 off to Susan Savage and Olivia Pillado, researchers from
19 the CCRC to discuss the findings from the LA County HBCC
20 landscape analysis.

21 DR. SAVAGE: Thank you, Gina, for that thorough
22 and thoughtful review of this important work. And this
23 work could not have been accomplished without the
24 Childcare Alliance of Los Angeles and the associated R&R
25 and alternative payment organizations throughout LA

1 County.

2 Just a bit of an overview of this project. Data
3 collection occurred with the community; so we ensured that
4 the language groups were represented in tool design,
5 methodology, and review of the analysis to ensure that the
6 recommendations coming forward really truly represent the
7 lived experience of the community as opposed to, as Gina
8 was talking about before, reverting back into the
9 classist, racist, sexist systems built on colonization and
10 slavery. So hearing from the community and having them
11 drive this research was really key to ensuring that what
12 we come out of will benefit the community.

13 We were able to survey over 400 family friend and
14 neighbor providers, over 700 licensed family childcare
15 providers, and over 700 parents who use home-based care
16 across LA County. And, again, because of the reach of the
17 Childcare Alliance of Los Angeles, we were able to
18 represent all eight SPAS and we were able to ensure that
19 the language and ethnicity representation across the eight
20 SPAS really drove this research.

21 And we also conducted 30 interviews with family
22 friend and neighbor providers to dig into the stories and
23 elaborate on the quantitative data from the surveys. 12
24 focus groups with FCCs and parents, and 12 community
25 convenings, again, to bring the results back to the

1 community and have them help us understand the results and
2 drive the recommendations.

3 What you can see in this chart -- and the first
4 column is data from the Berkeley Center so that we can
5 have a bit of a comparison from their LA County data to
6 see if maybe we were reflecting some of their results.
7 And it is fairly similar. We were -- we pulled in our
8 surveys fewer white Caucasian providers, little more of
9 the Hispanic Latino provider.

10 You might notice also there isn't really a
11 comparison for the FFN provider or the parents, but we
12 intentionally did additional outreach to the African
13 American community. And we were able to increase the
14 percentage of the FFN side and the parent side to
15 represent that community.

16 The important aspect of this slide is to show
17 that these two communities -- the FCC and FFN -- are
18 distinct. Many programs come to the FFN and FCC community
19 treating them the same. And we can see from some of this
20 background data, they're distinct populations. And so
21 when we design programs we cannot create a
22 one-size-fits-all system.

23 You can see that nobody in this chart is well
24 resourced; so I'm going to put that out there first. But
25 the FFN group is even more disenfranchised and less

1 resourced than even some of our subsidized childcare
2 parents that use that type of care. You can see that
3 they're less likely than the FCCs to be living with a
4 partner. And we all know that if you are living with a
5 partner, then your income in the household is going to
6 increase.

7 Lower levels of education, lower levels of
8 income, lower levels of home ownership. And so again, we
9 need to really think about these two populations in very
10 distinct, different ways when we turn to serve them.

11 And now I'll turn it over to Olivia to really dig
12 into some of the data.

13 MS. PILLADO: Thank you, Susan. Yes. So in
14 order to -- so one of things that you'll see come up again
15 and again is how different the population of the FFN and
16 FCCs are.

17 So one item that we wanted to look at because
18 it's important to understand in order to be able to
19 provide support is their motivation for providing care.
20 And what you see here are what the providers told us their
21 motivation was for doing the work that they do. So if you
22 look at that first bar at the top, 75 percent of the FFNs
23 say they were in this work to help the parents of the
24 children they care for, their own families, their friends.
25 As opposed to the FCC group in this sec -- second bar that

1 you see, the 49 percent, the dark bar. That's the FCC
2 group. So for them, the greatest motivation for doing
3 this work was because it's a personal calling, not a
4 career.

5 So as you can imagine, this may be beneficial to
6 know in terms of the supports that we're providing, the
7 model of care. Where, for FFN, a family support model of
8 care might be more appropriate than a business model of
9 care, which may be more appropriate for the FCC.

10 When we -- just to give you a little bit of
11 context on who the FFNs were in this group, 92 percent of
12 the FFNs are related to the child they care for.

13 We also wanted to get an idea on who are the
14 children and -- that they're serving. And so this really
15 shows or illustrates one of the strengths of both FFN and
16 FCC providers in that if you look at all of the different
17 age groups -- so this is the age groups that the providers
18 serve, you can see that both FCC and FFN serve children of
19 different age groups from infants and toddlers to
20 preschoolers, school age.

21 But what I would like to draw your attention to
22 is the last two bars at the bottom that illustrate how or
23 what percentage of the providers serve more than one age
24 group. And this really illustrates the strength of the
25 FCC group, where 89 percent indicated that they serve more

1 than one age group. So they're serving multiple age
2 groups.

3 We suspect that the 47 percent or the less
4 percent of FFN serving multiple age groups has do with the
5 fact that FFNs are typically only serving children from
6 one family. So the range of children that they're serving
7 is less. And we saw this when we looked at the ethnic
8 groups of the children that the provider served, where 77
9 percent of FCC say they serve children of multiple ethnic
10 groups. 46 percent of FFNs indicated the same.

11 In trying to learn a little bit more about their
12 participation and support, we asked about professional
13 development participation in the prior 12 months. And
14 what's important to illustrate here -- and here we broke
15 this down by not only FCC and FFN, but by FCCs who have a
16 small license, FCCs who have a large license, and then the
17 FFN group. So that first column is the FCC group. And
18 then followed by the small license and large license
19 groups, and then the FFN group.

20 So overall, FCCs participated -- indicated
21 greater participation in professional development than the
22 FFN group, but what's interesting is that when we also
23 looked at license type, those with the small license have
24 less participation than those with the large license. And
25 what's particularly striking here is if you look at the

1 bottom row, the percent that indicated they have not
2 participated in professional development activities of the
3 prior 12 months was really high for FFN, with 72 percent
4 indicating this, as opposed to 23 percent of the whole FCC
5 group. Again, possibly sending us in the direction of
6 perhaps the current support models that are out there for
7 this are not the most appropriate for the FFN group.

8 We also wanted to understand who providers go to
9 for information. Who are their trusted source of
10 information? So when they are looking for information
11 related to childcare work, no surprise because they're so
12 connected to the family, for the FFN groups they were
13 likely to reach out to a family member, whereas the FCC
14 group were more likely to reach out to another childcare
15 provider.

16 We also asked -- we wanted to hear from the
17 providers, from their voice, what was -- or what is the
18 greatest challenge as an Early Care educator. And the top
19 three -- the top one is not a surprise. So the top three
20 challenges were not getting paid enough, worries about
21 being exposed to or infected by the Covid-19 virus, and
22 lack of health, dental, and/or other benefits.

23 I would like to remind you that the median
24 household income for this group of providers for FCC was
25 50- to 65,000 k -- thousand. And for FFNs, it was 15- to

1 25,000. So not surprising that this was the top
2 challenge. This is one that is rooted in a history of
3 systemic racism and inequities in a workforce comprised
4 predominantly of women of color, and it is severely
5 underpaid and undervalued, despite the critical role that
6 they play in children's and families lives.

7 To learn a little bit about the future, we asked
8 about how long they estimate -- they estimate to stay in
9 the field in their current position taking care of
10 children. So for 29 percent of the FCC, they don't see
11 themselves doing this past five years, and 49 percent of
12 the FFNs indicated this.

13 For the FFNs, a theme that we heard over and over
14 and over again is that they do this for the families. And
15 many of them were not able to give us a specified amount
16 of time. They were really -- their motivation was really
17 driven by as long as the family needs me, I will do this.
18 Or I will do this, because, you know, the next child is
19 going to school, and that's when I'll stop doing this. So
20 it was really rooted in what the family needed.

21 Out of those that are not -- do not see
22 themselves doing this past five years, for the FCC, 60
23 percent of those said that they plan on retiring and a
24 quarter of the FFNs -- and here's a silver lining in this
25 -- said they would like to be licensed. However, another

1 24 percent said I can't do this anymore because of the
2 lack of compensation and that is something that I am not
3 satisfied with.

4 So I'm going to pass it back to Susan.

5 DR. SAVAGE: Thank you, Olivia.

6 So the recommendations that came from the data
7 and the voice of the providers and the parents are
8 six-fold.

9 The first one is to involve the providers in the
10 planning and development of implementation of new policies
11 and programs. And, again, this will help us get out of
12 the systemic barriers that we have already created -- is
13 to follow the lead of the parents and the providers. And
14 First 5 LA has already started to move in that direction
15 with the Provider Advisory Committee.

16 We also need to ensure that we look at distinct
17 systems of support for FFN and FCC providers, and
18 understand the needs and assets that each group brings
19 differently to the table, and offer a menu of options to
20 support them in their assets and their needs as opposed
21 to, again, a one-size-fits-all.

22 We also need to really develop and implement new
23 ways of outreaching and connecting with providers. You
24 heard about the fact that FFN providers aren't deeply
25 connected with their families. If we're coming to them

1 from organizations they're not familiar with, they're not
2 going to jump on board.

3 FCCs are well connected both with their community
4 providers as well as R&R organizations and other
5 institutions; so we can connect with these two provider
6 groups very differently. We need to really think about
7 how to go about that practice and not to do the same old
8 same old.

9 Outreach is really expensive. This project was
10 well funded, and the outreach was many fold, many hands on
11 deck. That needs to be funded in order to ensure that
12 we're reaching all people and not just those who have a
13 computer, are in the right area of the community,
14 etcetera, speak English as a first language. That takes
15 money.

16 We need to ensure seamless, responsive, and
17 holistic providers. You've seen the many needs and assets
18 of these providers. How do we put together -- cobble
19 together multiple systems to be able to ensure that we're
20 supporting each level of their assets and their needs.

21 You heard Olivia talk about the fact that we
22 might need to be considering a family support model for
23 FFNs, because in our study and other studies, 92, some
24 research shows 75 percent of providers who are in the FFN
25 group are related to the child. So when we support the

1 FFN, we're supporting that family system, which is a very
2 different model from what we typically think of with the
3 FCC providers who are businesses. These are typically
4 women who own their own business in their home. And their
5 motivation, as you saw from the research, was personal
6 calling, career, want to work from home. Very different
7 from the FFN calling of I'm here for the family and the
8 children.

9 Supporting a mixed delivery model and a livable
10 wage, the State is moving towards supporting TK. And that
11 is incredible. We need that in our communities. We also
12 need to figure out how we're going to support those that
13 are outside of the school district and the school systems
14 and ensure that we're supporting both. Both and.

15 Ensuring a livable wage, as Karla mentioned, we
16 are moving in the right direction with rates in the State.
17 I hate to say it, but in 2005, I paid a 14-year-old
18 babysitter better than our State pays today. My cup of
19 coffee costs more than what we pay hourly to a provider.
20 Not okay. We need to develop strategic partnerships that
21 involve many entities at the table. We need government,
22 local and State. We need CBOs on the ground connecting.
23 We need philanthropy to come to the table. We need the
24 providers and the parents. It's going to be an all hands
25 on deck.

1 And I'm going Oh turn it back to Gina to
2 introduce our -- the voice of who we really should be
3 listening to, and that's the providers.

4 MS. RODRIGUEZ: Thank you so much for this deeper
5 look at provider and parent data on home-based childcare
6 in LA County. Now we're going to hear from our
7 practitioners and their lived experience of home-based
8 early education and their experience as they open their
9 homes up to children and families.

10 I'd like to invite to the podium Jenny Liao and
11 Justine Flores, please.

12 MS. LIAO: Dear commission members. Thank you
13 for having me here today. My name is Jenny Liao, and I
14 graduated from (non-English language) University in China
15 with a Bachelor Degree in Preschool Education.

16 And presently, I manage a large home-based
17 daycare in Diamond Bar, LA County, supported by a team of
18 three staff members in catering exclusively to 12 young
19 children from Chinese families.

20 Through my work, I have become aware that many
21 families are in search of quality childcare, but the
22 number of available options force (unintelligible) of the
23 parents' needs.

24 At the same time, I have encountered difficulties
25 in operating my home-based daycare. Personally, the

1 daycare operates for extensive hours, from 7:00 a.m. to
2 7:00 p.m. Besides, I have to spend an additional two to
3 four hours on various tedious tasks such as purchasing
4 food supplies, preparing meals, cleaning and disinfecting
5 materials, preparing for teaching and parents
6 communication. These responsibilities demand a
7 considerable amount of time, attention, and energy from
8 caregivers like myself.

9 And secondly, there is insufficient funding for
10 improving the daycare environment and operating the
11 quality of services. Periodic remodeling of the home
12 environment is necessary to comply with the home-based
13 daycare standards and provide a secure and safe space for
14 children's indoor and outdoor activities.

15 And thirdly, as a nonnative English speaker, I
16 face challenges in understanding the administrative
17 policies. Often, essential resources lack Chinese
18 translations. And there is a scarcity of Chinese-speaking
19 specialists available for consultation. And this makes
20 the job even more challenging for me as a provider whose
21 native language is Chinese.

22 And often, continuing education costs and
23 training programs tailored for Chinese daycare service
24 providers are significantly limited, hindering my ability
25 to achieve further professional growth in this field.

1 Lastly, family childcare providers face
2 difficulties in accessing benefits such as health
3 insurance, pensions, dental and vision coverage.
4 Providers do not have the ability for paid vacation, sick
5 leave, or personal leave. And these challenges resound
6 with myself and 82 other childcare providers within the
7 Chinese community.

8 However, I'm very proud and happy to be a member
9 of the ECE Advisory Committee. Throughout this year, I
10 have received a lot of help, support, and fresh insights
11 on behalf of childcare providers in the Chinese community.
12 And I actually enjoy working with peers from different
13 culture, backgrounds in the Early Childhood Education
14 industry. Through this advisory group, all of this has
15 made me feel more confident and determined in my career
16 development.

17 I sincerely thank First 5 LA for giving me this
18 opportunity to speak on behalf of Chinese childcare
19 providers who are seeking better understanding of the
20 essential work we do as well as increase fundings to
21 support training and language localization efforts. Thank
22 you very much.

23 MS. FLORES: My name is Justine Flores. I was a
24 licensed-exempt provider in LA County. I decided it would
25 be important and valuable for me to become a high quality

1 location, and proceeded to open up a home-based small
2 family childcare.

3 As of today, I have expanded to a large family
4 childcare where I serve up to 14 children from a variety
5 of cultures, religions, and exceptional needs.

6 I have been actively involved in First 5 ECE
7 Advisory Committee, Childcare Providers United, Community
8 Voices, Parent Voices, and many more organizations
9 throughout my community. The family childcare sector
10 throughout California and in Los Angeles in particular
11 needs help with ending the systemic injustice that has
12 plagued our industry for far too long.

13 Licensed family childcare is a career to many of
14 us, not a job. We deserve to receive support with our
15 college accredited education, right to select paid time
16 off at our own discretion without an agency or a State
17 funded program selecting for us. In addition, we deserve
18 health, dental, and other benefits when caring for
19 children of State-funded subsidies.

20 I am a proud member of the ECE Advisory Committee
21 and I urge you to come to speak and listen to the voices
22 directly so you can hear about the milestones we have
23 accomplished and the trials and tribulations our children
24 face and future generations will face if a long-term
25 investment is not created.

1 Thank you very much. Have a wonderful day.

2 MS. RODRIGUEZ: Thank you, Jenny and Justine, for
3 sharing your stories with us this afternoon. Not only
4 about your passion and commitment to children, but also
5 about some of the day in and day out realities you
6 encounter in your family childcare at home.

7 So with that, we will then hand it over to Lea
8 and Anna from the Center for the Study of Childcare
9 Employment at UC Berkeley.

10 MS. AUSTIN: Thank you.

11 MS. RODRIGUEZ: One moment, please. And I just
12 want to remind commissioners that we want to understand
13 how these narratives and data on home-based care can
14 continue to inform our strategic plan; so as you're
15 listening, focus on that, please.

16 MS. AUSTIN: Okay. Thank you so much. And thank
17 you, Karla and John and the team, for inviting us to
18 present today.

19 I do regret that we can't be there in person as
20 planned. I appreciate the accommodation for us to join
21 virtually.

22 Before we get into the presentation of our data,
23 I did just want to take a moment and just, I think,
24 appreciate the attention that the situation and your local
25 partners are giving to home-based providers inclusive of

1 the LA Friend and Neighbor providers.

2 There are costs. And we're hearing many of these
3 and you've sounds like heard them last month, and I'm
4 sure, many other times, that there are costs to the severe
5 underresourcing of Early Care and Education. You know,
6 and this is not -- this is all across California of
7 course. But many of those costs are born uniquely by the
8 Early Care and Education workforce.

9 As you've heard, and we see all the time in our
10 research and in people's lived experience, economic
11 insecurity is rampant amongst the workforce. And the
12 consequences we see are especially harsh for Black and
13 Latin women and immigrant women who are more likely to be
14 home-based providers in California, and who we know from
15 our research are also more likely to be paid less and
16 experience more economic insecurity than their peers.

17 You know, I've been in this sector myself now for
18 20 years. I actually started at First 5 Alameda County,
19 and it was actually my first job in ECE. But what I see
20 today, what I feel like we're witnessing is simultaneously
21 the most challenging conditions for Early Educators and
22 caregivers as they work amongst shortages and continue to
23 recover from the many impacts of the pandemic --
24 economical, mental, physical, and otherwise. But also
25 some of the most encouraging signs of change.

1 As a member myself of the State's rate and
2 Quality Reform Work Group last year, I can say I think
3 it's no small feat that we were able to create a guiding
4 policy document for the State that opens with an
5 acknowledgement of historical racism and harm that
6 undergirds current policies and funding strategies, but
7 also offers us a roadmap for change.

8 And I think a really key reason is that this was
9 an open and public process, that providers were part of
10 the stakeholder group, and also very active in
11 contributing to meetings. And voices were heard and
12 really taken seriously.

13 And we also see that the State, I think, is
14 catching up on its attention to the ECE workforce. And at
15 least -- or especially when it comes to home-based
16 providers. And it's -- you know, the work that they're
17 doing overall on rate reform and acknowledging the need to
18 fund at the actual cost of the care and education.

19 I think the work that's been undertaken locally
20 and the opportunities ahead to uplift home-based childcare
21 and education in LA County, you know as really critical
22 components of the ECE system, are just well aligned with
23 progress that's taking place in the State. In reality, I
24 would say from my perspective and observations, it's the
25 models and opportunities to innovate at the local level

1 that actually can serve as proof points and leadership to
2 the State as well. So just personally, I'm also very
3 eager and curious to see how your work in this area
4 unfolds going forward.

5 As for today, I'm really glad we have the
6 opportunity to present data from our family friend and
7 neighbor study in which we've surveyed parents and FFN
8 providers. We're going to present parent data today.

9 The study is still underway; so we're presenting
10 a phase of the data. We've gained some really valuable
11 insights about how parents not only utilize different
12 types of Early Care and Education, but what they say they
13 need and what they say they want. So Anna Powell, who has
14 been leading this project, is going to take you through
15 some of our key findings.

16 So Anna, I will turn it over to you.

17 MS. POWELL: Thank you, Lea.

18 And if someone could help me advance the slide,
19 that would be wonderful. Thank you so much.

20 So as Lea began to describe, what I'm sharing
21 with you today are survey results from parents, though we
22 were able to reach about 1,300 parents around the State,
23 including 270 who live in LA County. Of course, this is
24 not a random sample. We largely reached parents through
25 R&R networks, parent voices, PIQE, and other parent-facing

1 organizations.

2 But using our statistical magic, we have
3 attempted to weight the sample to really align with the
4 true population of California parents. But just always
5 good to remember that, you know, no survey is perfect and
6 ours is the same.

7 We've partnered with RAPID project at Stanford to
8 implement the study, and we offered the survey to parents
9 in both English and Spanish. And any parent with a child
10 under age six could participate in the study living in
11 California.

12 Next slide, please.

13 All right. So first chart I'm sharing with you
14 today is where parents told us they are currently
15 enrolling their child in care. The chart -- I'm going to
16 orient you to it briefly. The top half is what parents of
17 children under age three described as their care choices,
18 followed by parents with children three to five below
19 that. So infants and toddlers on the top half, preschool
20 age children on the bottom half.

21 And these are what parents are currently using.
22 I've highlighted in the red boxes the FFN piece, and the
23 LA specific piece for you so you can get a better sense of
24 how those are showing up in the data.

25 So statewide, we're seeing that about 26 percent

1 of parents said they were using FFN care either alone or
2 in combination for their infant toddler. And a similar
3 share, 29 percent of parents with preschool-age children
4 were also using FFN care. And I say alone or in
5 combination because you'll notice that the numbers in the
6 segments don't necessarily add up to 100 percent. That's
7 because of course we know many parents have combinations;
8 so they may have FFN as well as FCC or another
9 arrangement.

10 Now in LA County, which, of course, is one of our
11 five regions within the State that we examined, I want to
12 draw your attention to the top half, the parents of
13 children under three. And this increased usage of FFN
14 care for that age group. We know that FFN for infants and
15 toddlers are often paired up and we see that in particular
16 in LA County.

17 I did also want to mention at the -- about what's
18 not shown on this chart. We did in our report look at
19 what we observed different parents of different
20 backgrounds. So for example, we found that Black parents
21 were particularly likely to be using FFN care, especially
22 once again for this infant toddler category. So this is a
23 certainly a care choice that we are observing in this
24 population.

25 And similar to the landscape analysis that you

1 have heard about just before, we asked about who is this
2 FFN to you, are you related, and we similarly found that
3 the vast majority of parents are turning to a relation,
4 most often a grandparent. But we did find that in fact in
5 LA County, there is a healthy smattering of aunties and
6 uncles who are also in the mix, though grandparents
7 continue to be the most common share.

8 About half of the FFNs that parents are relying
9 upon were receiving some sort of compensation whether
10 subsidized or otherwise.

11 Next slide, please.

12 Next we asked parents about the factors in their
13 decision. And here I'm showing for those preschool aged
14 families which factors they consider to be very important,
15 which is the top of our scale.

16 And I broke it out into columns by the type of
17 care that the parents were using. So the dark blue --
18 this is the FFN or the nanny, really licensed-exempt care
19 group of families.

20 And as you see, there's some consensus. Health
21 and safety practices are considered very important pretty
22 much across the board, even among parents that are using
23 parental care only.

24 But most important, I want to draw your attention
25 to the red box -- personal connection, languages spoken,

1 and cultural background. These are areas in which we see
2 a greater percentage of parents that are in the blue, the
3 family friend and neighbor or nanny care. These are
4 parents who are more often to say this is very important
5 to my decision and what I value about this care relative
6 to licensed care.

7 So this really points to the strengths and some
8 of the most important aspects that FFNs bring to the
9 table. They have the clear path to providing this
10 important value to parents.

11 Next slide, please.

12 After we discussed in our survey learning from
13 parents what they're currently using and what they're
14 factoring in, we then asked parents to really go along
15 with us on an imaginary exercise of thinking through their
16 idea. We said, you know, set aside the constraints you
17 feel you have, set aside your concerns about Covid. And
18 the limitations in your choice right now, and think about
19 your ideal. And we're presenting here in the dark blue
20 what the ideal would be for children under three and three
21 to five.

22 And just looking across the chart, you'll notice
23 there's not one option that parents all agree is ideal.
24 But most of the options on this chart are a form of
25 home-based care. Right? Really apart from center-based

1 care, parental care only, and then "My arrangement is
2 already my ideal," that's a mix. But these really tell us
3 that there's no one right form of care for every family.
4 And our system needs to be supportive and flexible to
5 allow families to pursue the best arrangement for them.

6 And FFN care really holds its own among these
7 other options, especially in the infant and toddler
8 category. It is, in fact, about on par with the
9 preference for center-based care that we see for this age
10 group.

11 Now, this red box at the top -- my current
12 arrangement is already my ideal, I wanted to go a bit
13 deeper with this one; so next slide, please.

14 We're looking here at the share of parents who
15 said yes, my current arrangement is already my ideal. We
16 wondered which parents are telling us this. Is it
17 overwhelmingly one care arrangement that is considered
18 ideal? And, in fact, no. We find that especially for the
19 infants and toddlers, parents who are using FFN were
20 similarly likely as other categories to agree they already
21 had their ideal.

22 Amongst the age three to five year old, there was
23 a bit of a consensus or more likely to see that parents
24 using licensed care felt that that was their ideal for
25 their child. So we know that these group settings have

1 various salient value for that age group. But very
2 striking that for the under-three category, there's really
3 just not a lot of difference between the options
4 one-on-one.

5 Next slide, please.

6 I'm going to kind of bring us in through some,
7 you know, voices and snippets brought directly from the
8 parents. So our surveys included open-ended responses.
9 Additionally, we discussed the findings with our Parent
10 Advisory Group to really reinforce that we're lifting up
11 the appropriate themes. So here's some comments that came
12 from parents in our survey who use FFN care.

13 The first theme is about the best environment for
14 the child. So a parent from Fresno County told us that:
15 It seemed like the best option for my son. He may need
16 more time for personal growth prior to entering
17 kindergarten. Not all children are ready for kindergarten
18 at age five.

19 What's striking to me about this quote, it's a
20 parent talking about kindergarten readiness in context of
21 FSN being ideal for that purpose. I think oftentimes, we
22 hear this, you know, refrain that a school-like setting
23 might be the best way to prepare for going into
24 kindergarten. And we see that's not always true from the
25 eyes of the families. FFN, too, can look like the ideal

1 place for getting that readiness.

2 Then the next quote says: Only family can handle
3 the care of my autistic son. The local daycare mistreated
4 him when he previously attended.

5 So here we find another theme that does often
6 come up in research: The trust and support that a family
7 member, caregiver can provide is really unparalleled when
8 it comes to supporting children with disabilities. And
9 this is another strength that we know that FFN can offer.

10 Next slide, please.

11 Returning to this theme of culture and language,
12 here's some parents that are talking about license-exempt
13 care in this exact frame.

14 We first hear that a family from San Diego County
15 has a bilingual nanny. And we come from a bilingual
16 household. Exposure to cultures is important to our
17 family, since we come from a multiple cultural background.

18 And so this is a choice where the license-exempt
19 provider is amplifying and honoring that background, and
20 it's absolutely central in the case of this family to the
21 choice of care.

22 And then the final quote on here, a parent from
23 Solano county who says: My mother raised five children
24 including me. Her home is on the way to both my and my
25 husband's job, and I feel absolutely safe with my daughter

1 in her care. She is also the only child in her care, and
2 we share the same culture. My daughter is biracial -- my
3 husband is white and I am Black. And it was really
4 important for me to make sure that she is cared for by
5 someone who has a cultural connection to her.

6 So once again, a parent who's telling us that
7 this is perhaps one of the most valuable assets that her
8 care provider can provide.

9 And then next slide.

10 We're coming to an end here. Up here you will
11 find a QR code that will take you to the full report,
12 including some LA County specific tables, if you'd like to
13 dive in deeper. And thank you very much for having us,
14 commission members. And we look forward to being in touch
15 in the future with any questions you may have.

16 Back to Gina.

17 MS. RODRIGUEZ: Thank you Lea and Anna and your
18 rich insight about parent preferences for HBCC.

19 So we've heard a lot of information this
20 afternoon. And I just want to highlight some of what we
21 heard across the presentation and the themes that emerged.

22 Families have a reliance on and preference for
23 home-based care for their infants and toddlers. You heard
24 this from the researches at UC Berkeley, families select
25 home-based care for the personal connections, the

1 relationship between the family and provider, and the
2 relationship between the child and provider and the
3 languages spoken, the cultural connections among families
4 and early educators.

5 Parents felt that their children with
6 disabilities receive better care and attention in
7 home-based settings.

8 Early educators are not being paid for the true
9 cost of care. We heard this from all presenters today.

10 Families want access to quality. Childcare and
11 early educators want to provide quality childcare, and
12 both are experiencing barriers within systems.

13 Children and early educators have inequitable
14 experiences due to structural racism.

15 So this brings us to our discussion today. And
16 we'd like to return to our guiding questions. Just as a
17 reminder, what are the opportunities for First 5 LA and
18 partners to better support children in home-based
19 settings? What do early educators need? How can they be
20 supported? How can this presentation inform our strategic
21 plan reset?

22 And with that, I'll hand it over to Chair
23 Mitchell for discussion. Thank you.

24 SUPERVISOR MITCHELL: Thank you very much.

25 And just to clarify how we envision this time,

1 just going to go around and have commissioners raise
2 questions and answer the questions? Tell me how you
3 envision this.

4 MS. PLEITEZ HOWELL: Raise questions for this
5 one. The second one with our consultants will be slightly
6 different, but this one raise questions.

7 SUPERVISOR MITCHELL: Okay. So questions on both
8 presentations, the Berkeley survey as well as ours?
9 Commissioners?

10 COMMISSIONER McCROSKEY: Wonderful report. Thank
11 you all. And -- and I just feel so wonderful that we're
12 really focusing on home-based care now for our younger
13 children. And you came at it from a number of different
14 perspectives, all of which were really enlightening.

15 And so my pressing question is are there really
16 good models for the kind of support for FFN? You kind of
17 mentioned family support, Susan. Are there models we can
18 build on? This has been a challenge, I think, for a long
19 time in LA. And I just wonder if -- I'm sure there are
20 wonderful individual models here, but are there also
21 across the country or elsewhere models for kind of
22 more, like, public support for home-based childcare
23 providers?

24 DR. SAVAGE: Yes. Thank you for that question.

25 There are successful models. And it's a diverse

1 range of models; so there are some where it's a home
2 visitation model, because, again, they're home-based
3 providers.

4 And one quote that I heard from an FFN provider
5 really drove it home. She said, I'm grandma. What do you
6 mean you're going to train me to be grandma? And so, you
7 know, that's bringing the very middle class lens to a
8 provider as opposed to seeing her as an asset, which is
9 grandma. And so bringing resources to a provider in his
10 or her home is a very successful model in different states
11 localities.

12 The Direct Cash Transfer has been tested and
13 proven that providers will be able to raise their level of
14 economic stability with the Direct Cash Transfer. Home
15 Grown has shown some successful results with that, being
16 able to have a one-on-one connection.

17 First 5 LA funded a trip of ours to New York to
18 really learn about programs there. And some of those
19 successful models were one-on-one case management
20 navigation, whatever you want to call it, where you don't
21 come in and say: I'm going to teach you how to do it.
22 But just: Let's have a conversation.

23 And from those conversations, the provider will
24 say: I don't want to learn what you're trying to teach
25 me. I can't pay my rent. And so having that

1 individualized coaching model transferred into more of a
2 really one-on-one case management family-support model is
3 really key.

4 Also play-and-learn groups. There are -- we
5 learned from a number of the FFN providers that they
6 actually go to the schools where they drop the child off
7 and engage in a parent and me class -- class. But it
8 really is a play-and-learn class.

9 And so these play-and-learn models, some funded
10 by Packard here in California, are a lot more aligned with
11 what they want to do and what they want to learn and how
12 they want to learn and in the language that they speak.

13 Some don't have transportation; so yeah. Some
14 aren't interested in something online. But not everybody.
15 And so yes, there's different models from across the
16 nation that have been proven to be successful and engaging
17 and improving the quality of care.

18 SUPERVISOR MITCHELL: If I could follow up on
19 that last question. Because, you know, I'll be the first
20 to admit I've not been in the day-to-day operational game
21 of ECE for 13, 14 years now. However, as I sat and
22 listened to and looked at the data, I'm remembering things
23 that we did at the agency I had the pleasure of working at
24 for a number of years.

25 We had lending libraries where licensing

1 providers who didn't have the resources to have a sand and
2 water table or tricycle for a child who was differently
3 abled could come. We did the play-and-learn groups.

4 You know, Karen Hill Scott brilliantly said one
5 day, there is no grandmother who doesn't want to be the
6 best she can be for her child, and wants to have the
7 opportunity to have health and safety training and ECE
8 training to improve the experience of her child.

9 And we had to think creatively and differently to
10 provide that to that grandmother. And so, as I'm sitting
11 here thinking, well, we were doing those things. I'm also
12 thinking that, you know, many of them were pilots and
13 could not be maintained when, you know, our cyclical
14 funding experience from the State and feds, you know,
15 would happen. We were probably covered from our admin
16 cost, whatever the case. So making sure that there is --
17 it is valued and consistently funded. So R&Rs and pay
18 system agencies can provide it.

19 But I think there were examples and models right
20 here in LA County that may not continue to be -- be
21 provided because, you know, we hit tough economic times as
22 agencies.

23 I was struck by the -- couple things. The -- the
24 lack of participation in professional development. And in
25 who they reached out to for information. Because what I

1 didn't see up there reflected at all was First 5 or R&Rs
2 or AP agencies.

3 So then I thought, well, maybe, the FFNs who
4 participated weren't providing care to children who
5 receive a subsidy; therefore, they don't have a
6 relationship with an AP agency.

7 But I was just struck that these institutions
8 weren't reflected as someone they reach out to for
9 information.

10 MS. PILLADO: I can answer that one.

11 So I think there may be a little bit of
12 reflection in their responses for the FCC group. 34
13 percent of them said that they reached out to coaches
14 specialists, or other agency's staff. So it's possible
15 that they're -- they -- they -- that's n who they thought
16 of. They're grouped in that category.

17 However, for the FFN group, that's 8 percent. So
18 there's still a lot more outreach with FFN groups. And
19 what we found interesting in the FFN group -- and we saw
20 this even in our outreach for this and other programs --
21 is they need that more personal touch. So email's not
22 going to work with them. Phone call to say did you get
23 our email to participate in this is a lot more effective
24 than just that electronic communication out there.

25 SUPERVISOR MITCHELL: I get that. What was your

1 FFN group? Did they all -- were they all subsidized
2 providers or no?

3 MS. PILLADO: The majority of them were. They
4 were recruited through the subsidy program, through the
5 multiple R&Rs across the County. But we did have a subset
6 that they may have heard about this through social media
7 and were not receiving subsidies that did participate in
8 this.

9 SUPERVISOR MITCHELL: Last question for me, then
10 I'll open it up to others. The last line on your kind of
11 summary slide, the home-based childcare context. It said
12 HBCC early education don't have equitable access to the
13 resources necessary to provide the highest quality of
14 care.

15 Tell me what that means.

16 MS. RODRIGUEZ: I think the system has been
17 created to serve more center-based care.

18 SUPERVISOR MITCHELL: They certainly historically
19 have had higher reimbursement rates.

20 MS. RODRIGUEZ: Right. And I think home-based
21 childcare providers have kind of been, like, on a
22 periphery, especially FFN. So I wonder if there's another
23 way to work with FFN and family childcare providers that
24 is more, like Susan said, in the New York model, more
25 one-on-one. And it's maybe more grassroots oriented than

1 a family supports model, where they are -- and maybe we're
2 talking about staff networks where there's actually staff
3 working more intently with networks of FFN and SDCs to
4 really facilitate getting resources and helping them
5 through the system; so that the system is not so
6 cumbersome. And ideally we'd love for them to be able to
7 access resources at one entry point as opposed to having
8 to get lost in all the bureaucracy and all the paperwork.
9 So that's what is meant by that.

10 SUPERVISOR MITCHELL: Thank you.

11 COMMISSIONER TILTON: Thank you for this
12 presentation. And it was so enlightening in so many ways.

13 I have a couple of questions. I note that the
14 survey was done in Spanish and English, and I think a lot
15 of the focus has been on making sure we have bilingual
16 connections. And listening to the presentation by our
17 Chinese caregiver, how many languages do we have? Isn't
18 it over a hundred? And what a challenge that is.

19 I remember a tragic case that we had a few years
20 ago. Chinese child caretaker who was with a child who
21 became very ill, and she called for help, but she couldn't
22 find an emergency care provider who spoke her language.
23 And the child wasn't provided emergency care and died.
24 And that's something you just don't forget.

25 And one of the things that we realized was there

1 was a high demand for Chinese-speaking caretakers, and
2 very little support for that Chinese caretaker within that
3 culture.

4 So I just sometimes remember that there are
5 people who don't speak English. And we often think it's
6 Spanish that we need to -- as the language we need to
7 communicate with. But the Armenian population, all the
8 different Asian languages, just something to think about.

9 My other question is kind of a deep and broad
10 profound one. These are kids in the brain-development
11 age. And I'm wondering if we have been able to look at
12 what brain-stimulating environment they are in. I don't
13 get a feel from -- I see that we want them to be safe and
14 healthy and nourished. Have we looked at all at what is
15 the program that we recommend in order to promote the
16 brain development of these kids in a healthy way?

17 DR. SAVAGE: Those are great questions. I'll
18 address the language question with the survey first. The
19 survey and interviews and focus groups funded by First 5
20 LA were done in four languages -- English, Spanish,
21 Armenian, and Chinese. And we actually engaged providers
22 and staff with the Armenian and Chinese languages to help
23 us implement those so that we could get the voice of those
24 communities.

25 And you're right. We still did not scratch all

1 of the -- the threshold languages across. And resources
2 do need to be in all of those languages. And that's going
3 to be something that we need to consider in this strategic
4 plan going forward, how to reach all of the providers and
5 languages in LA County.

6 And in terms of brain-stimulating environments,
7 there is some work going on actually with the FFN group
8 out of the -- I think it's the Indigo Cultural Center
9 building an FFN called Curriculum, specifically geared
10 toward, you know, building brains and language
11 development, etcetera. And by Curriculum, it's very loose
12 way of describing curriculum.

13 And -- and you're right, we need to be thinking
14 about how we're building the brains of these children zero
15 to three. You know, First 5 California has your top three
16 things.

17 And back in the -- not that we want to go back
18 here. But back in the '50s and '60s, etcetera, where kids
19 were at home, they were building their brains in a
20 home-based environment. Granted, it was mom. I'm not
21 sure why we discount grandma other than racism, because
22 when I had my children with grandma, I was applauded. You
23 have your child with grandma. That's so wonderful.

24 Yet some of our parents who choose intentionally
25 family friend and neighbor, they're met with suspicion.

1 Why are you choosing family friend and neighbor when
2 there's licensed care? Do you know they're not as good of
3 quality? Whose version of quality are we talking about?

4 Obviously, you saw from Berkeley and our
5 presentation, the parents' version of quality -- is that
6 FFN care? Is that home-based environment? And any of
7 these children may have experienced trauma from racism.
8 Who's going to be best to nurture that and deal with that
9 trauma, but grandma, who may have also experienced racism
10 classism, sexism, and which builds the brain. Yeah.

11 SUPERVISOR MITCHELL: It's a great question. Let
12 me go to Commissioner Abdo. I saw your hand.

13 And I'll come back.

14 COMMISSIONER ABDO: Thank you. I feel like a
15 broken record here saying this, but I'm going to say it
16 again. And that is that the complicated way that the
17 State requires families to access both health and
18 childcare kinds of things, I'm sure other things as well,
19 it needs to change. And we've talked about this for years
20 and years and years, but imagine being a family speaking
21 some language that's not covered, trying to access
22 programs that they are actually eligible for but they're
23 not able to access them. And I don't think we're going to
24 see change there until we see a great deal of change in
25 thinking in Sacramento about what oversight of -- of

1 programs that have to do with young children really are
2 about. And, you know, I agree with everything about the
3 brains -- the brain development and all of that that other
4 people are saying.

5 But I just want to say that having -- having run
6 some State programs in my life, they were absolutely crazy
7 complicated to try to access. And for a family that's not
8 a professional early childhood person, it's much more
9 complicated. And I don't know how First 5 can make enough
10 of a -- of a change happen in Sacramento, but I think we
11 have to try.

12 SUPERVISOR MITCHELL: Okay. And -- and I agree
13 with you. And I think it's almost a bigger question about
14 -- and it's Federal and State. And it's this expectation
15 that if public funds are used, then there's this higher
16 responsibility to make sure they're used right or well.
17 However you define that. And so it spans all of our
18 support programs, our entitlement programs, make people
19 jump through hoops to make sure that they are eligible and
20 have maintained their eligibility.

21 And so I agree with you. It applies to Medi-Cal,
22 and CalWorks and CalFresh, and any -- any -- any program
23 where public resources are spent. There's this
24 expectation that the recipients can't be trusted, frankly.
25 And they have to prove ongoing value and worth. So I

1 agree with you.

2 Commissioner Wechsler.

3 COMMISSIONER WECHSLER: I want to go with
4 everyone else in complimenting everyone on their
5 presentations for me. I think it's -- I got a lot out of
6 it.

7 I'm trying to reconcile, though, everything
8 that's been said with what I also read is an increase in
9 the budget for Early Childhood Education in the Governor's
10 budget. I don't know if that's true. I know there were
11 lots of changes. But has there been an increase in the
12 amount devoted to both to either pay and/or the number of
13 slots in this budget? And to what extent, if that is the
14 case, are we addressing this? And does that change what
15 LA County's priorities should be?

16 DR. SAVAGE: Yes, there has been an increase in
17 funding for the ECE world in -- in this next budget. And
18 it's sort of a down payment. The way I see it is the rate
19 and quality work group has done a great deal of work and a
20 number of advocates around the State have advocated for
21 increased rates, increased slots.

22 And what we're needing to do at this point in
23 time -- and, again, it's a down payment, is get away from
24 keeping people in poverty by basing their reimbursement
25 rates on the market. In other words, what we've been

1 doing historically is we're going to survey what the
2 market pays. The parents can pay. Well, who are we
3 serving? We're serving poor parents. So if we survey
4 poor parents, then we set the reimbursement rates at such
5 ridiculously low levels that it doesn't cover the cost of
6 care at all.

7 And so in this next few years, this is the window
8 we have to be able to actually begin to price out the cost
9 of quality care as opposed to reimbursing the providers at
10 what poor parents could have paid already.

11 And so in these next few years, yes, we're going
12 to see shifts. There's -- and Mike Olenik back there can
13 probably cite the exact percentage off the top of his
14 head. The increase this year, I believe it's 10 or 12
15 percent in the rates this year. But then again, we're
16 going to be moving towards that true cost of quality care.

17 But -- big but here. That's only for those
18 priors who get reimbursed through the subsidy system.
19 That's not the private pay providers. Granted, a provider
20 might have some subsidy parents and some private pay
21 parents, and so the providers that have both in their
22 business can benefit. But providers who predominantly
23 have private pay parents, it's not going to benefit them.

24 I'm not sure if I'm really answering your
25 question.

1 COMMISSIONER WECHSLER: Well, it helps. I guess
2 my question is though then, you know, to what extent
3 should -- so you're arguing, then, that it should continue
4 be the focus. Despite the increase in the Governor's
5 budget, there's likely still to be an inadequate amount of
6 money to pay providers -- both FFN and FCC -- at a fair
7 rate to cover their cost

8 DR. SAVAGE: The true cost of care. Exactly.

9 COMMISSIONER WECHSLER: So it's an ongoing --

10 DR. SAVAGE: It is an ongoing -- and there is a
11 statewide work group working to design what that's going
12 to look like -- the cost of care model for reimbursement
13 for those who are subsidized by the State.

14 COMMISSIONER WECHSLER: Okay. Thank you.
15 Thanks.

16 COMMISSIONER NICHOLS: We're going to have
17 Commissioner Allen and then Commissioner Ramirez. But
18 first, I saw Dr. Lea put her hand up. I don't know if she
19 wanted to speak to respond to one of the questions?

20 MS. AUSTIN: Thank you. And Anna might as well.
21 She co-authored a blog related to some of the increases
22 for the State. But one thing, I wanted to just go back to
23 Commissioner Abdo's point about systems and some of the
24 complexity, and just offer that in San Francisco -- which,
25 of course, I know is a much smaller place than LA -- but

1 San Francisco had been experimenting over the last several
2 years -- and -- and I don't honestly know where they are
3 now. But it may be a model worth looking at on trying to
4 help centralize some of that complexity at the local
5 level.

6 So that they also have -- you know, they have
7 some local dollars going with the State subsidies and
8 things like that. But really trying to create these
9 interfaces so that families essentially would have one
10 place to go to help determine eligibility for different
11 types of childcare programs, helping them piece things
12 together so that they weren't doing all the things that
13 you were describing.

14 It wasn't always easing things for the programs
15 to administer, but it was helping to facilitate that for
16 families. So just full disclosure, I don't know exactly
17 the status of it. But it may be a model worth looking at
18 it and seeing what, at least, maybe they learned from
19 that.

20 And then just to the question of the State
21 budget, it is correct that the resources that are going in
22 are important but not enough; right? So in addition to
23 the subsidies being limited -- right? So there's many
24 people that qualify that don't have access to it, is kind
25 of one piece. And then you have other families that don't

1 meet the income eligibility limits but still would qualify
2 as needing -- most families would qualify as needing
3 support, because you just can't afford the full cost of
4 care even on a middle class income.

5 But the reimbursement rates have also been set at
6 levels that go back to 2016; so it's not even looking at a
7 current market. It's looking at what was the -- what were
8 rates, at this point, closer to a decade ago than anything
9 else.

10 So the -- the ways in which we're funding as a
11 State are really based on a depressed market for many
12 different reasons. And so the funding just doesn't quite
13 get us there. And when we look at the, you know, level of
14 resources and we're -- we're talking about a workforce
15 who, you know, that's the biggest expense in a program.
16 And right now, our Early Care and Education workforce, you
17 know, ranks among the lowest paid, you know, across all
18 communities.

19 So there really is a huge gap that has to be
20 closed. And the resources are significant. But quite
21 honestly, they -- they're putting a tiny dent in what
22 actually is the true -- the true cost of care.

23 And there are some estimates out there in
24 California -- there was a cost of quality study that has
25 been done. There are numbers. And I believe they look at

1 that on a regional level in the report. That I think
2 could help locally look at, like, where are the gaps;
3 right? What is the subsidy? How much are the estimates
4 based on the age of child and type of care. FFN is
5 included in that report as well as home-based childcare
6 and center-based as well.

7 So I just wanted to offer that up. And Anna, you
8 may have some more specificity on the most recent
9 investment.

10 MS. POWELL: Certainly. I think it's really
11 critical to recognize that the percent increase is against
12 that 2016 baseline and would actually fall short of
13 inflation between 2016 and today. So we're not even
14 treading water with 2016 levels with this increase. But
15 obviously, the increase is important nonetheless.

16 The budget also -- let's bear in mind the CCP
17 also concluded their negotiations, which includes money
18 for retirement and healthcare benefits which will be
19 fantastic for, you know, the subsidy-facing portion. But
20 as other folks have mentioned, the vast majority of
21 providers who may be serving people of all income,
22 including many low-income families, but are not a part of
23 the subsidy family, they would not be necessarily
24 benefiting from these changes. So there's always this big
25 piece of the system that needs that support.

1 I wanted to callout one thing related to FFN
2 that's in motion that's very exciting. So California is
3 going through this cost modeling process to figure out
4 what this reimbursement rate should be. And rethinking
5 even how to estimate the FFN one, it's a really exciting
6 part of that work. So in addition to, you know, surveying
7 providers, both FFN and FCC to learn about what are the
8 costs they're incurring and maybe make visible some of the
9 ways in which FFN are first unpaid and then giving of
10 themselves; right? Spending on supplies, spending on
11 food.

12 They're also going to be then rethinking what
13 would be the path to a living wage for FFN. And the
14 Department of Social Services, which has the task of
15 trying to help connect some of the dots here, they're
16 going to be doing a lot of forming interviews and
17 workgroups that are going to be FFN-specific perhaps this
18 fall, where they're really trying to come up with a
19 framework on how to talk about the true cost of FFN care.
20 Which is really kind of -- yeah. Like different than you
21 would think for center where you can look at rent very
22 clearly, the rent associated with the facility, whereas
23 with FFN, adding of these different pieces and how they
24 show up.

25 But that's going to be very important to keep an

1 eye on and potentially try to be engaging with this
2 conversations around tallying that up and knowing what
3 that will do, and will it feed into the new rate system
4 that we'll have.

5 But also, keep your eye on the ball with the rate
6 system. Even know we have the stated goal and plan to
7 work towards it, it's by no means a done deal. The State
8 could get distracted or drop the ball or kick the can down
9 the road and fail to follow through on those promises. So
10 that's also a super important piece for all of us
11 maintain.

12 SUPERVISOR MITCHELL: Thank you. We're going to
13 hear from Commissioners Allen, Ramirez, and McBride. And
14 in that order. Then we'll open it up for public comment
15 and then take our break.

16 Commissioner Allen?

17 COMMISSIONER ALLEN: Well, it's such a rich
18 discussion. It's hard to know where to start. A couple
19 things, and one that strikes me, is that part of the
20 discussion seems to be about scarcity. It's one of the
21 consequences of under payment of the workforce is people
22 don't want to go into that workforce. And -- and it's --
23 it seems to me that's a very important thing to take into
24 account while considering how to support the existing
25 workforce, is that the advocacy for payment is a really

1 critical benefit to families, because the underpayment
2 creates an under supply, which leads me to the first
3 question I have which is, it looks like a relatively small
4 percent of families say they're getting their ideal form
5 of care, particularly for younger kids. I think it's the
6 highest group is LatinX families -- Latino families that
7 say they're -- about 20 percent are able to find the kind
8 of care they want.

9 And I wondered if you -- what -- you talk
10 about the families who are choosing what's ideal to them.
11 What's the basis for their choices? But what is the
12 choice being driven by among the families who are not
13 getting what they really want?

14 MS. POWELL: Thank you. That's a very important
15 question in the open-ended responses that parents gave in
16 accompanying these survey results. We heard a number of
17 different themes, and one of them was really around what I
18 have. There's elements of it that I like, but my ideal
19 would be this care if it truly met my full needs -- right?
20 -- in some cases.

21 So if they're using FFN, if they're -- you know,
22 if grandma was available all day and all evening, that
23 would be ideal. Or if they could have a home-based
24 provider that, you know, could meet the needs of both
25 children, if they were available. Something along those

1 likes.

2 So it's not always the case that they would --
3 they would ideally have something radically different. So
4 we do know that that's sometimes the case. But we find
5 that, you know, some arrangements just sort of can't quite
6 deliver on the full scope of what a family would need.

7 Lea, did you want to add something?

8 MS. AUSTIN: So I just assume you'll say some of
9 the rationale on what people -- what their motivating
10 factors --

11 MS. POWELL: Go right ahead. Yeah.

12 MS. AUSTIN: Well, just to speak to, you know,
13 why people aren't accessing their ideal. Right? So cost,
14 of course, is up there as one of the reasons that -- you
15 know, that drives people decisions. That's one of the
16 main factors. I think when, Anna, you were just speaking
17 to which was just the availability. So people have to
18 choose based on the hours. And, you know, their ideal may
19 not be available all the hours that they need something
20 available. Location, those are things that, you know,
21 really are factoring in.

22 But cost is a through-line. You know, that
23 really was across family type. Not limited to one income
24 bracket or another. We see variation in where people
25 land. But that is a common -- common denominator in

1 people's choices.

2 COMMISSIONER ALLEN: It seems like it's critical
3 to think, then -- I'm struck by other countries and how
4 they handle this. It's an assumed entitlement, and that
5 you don't have to prove your deficit to be subsidized for
6 this -- this -- this sort of social good. And that in
7 addressing the failure of our thinking that it is that way
8 in the United States, we have to think both of the cost to
9 the family and the need of the providers simultaneously.
10 And -- and, you know, that whatever advocacy we're engaged
11 in needs to take both into account.

12 MS. AUSTIN: There's a saying from the Worthy
13 Wage campaign that was very active in the '90s. Parents
14 can't afford to pay; providers can't afford to stay. We
15 need a better way.

16 COMMISSIONER ALLEN: That sort of sums it up.

17 SUPERVISOR MITCHELL: Commissioner Ramirez?

18 COMMISSIONER RAMIREZ: Thank you. My question is
19 specific to the parent report highlights. I'm just
20 curious when you disaggregate by ethnicity or race, did
21 you find any significant differences or trends in the
22 data?

23 MS. POWELL: Certainly. On the current usage of
24 care, we did find that, for example, Black parents were
25 most likely to be using FFN care. So this was something

1 that stood out to us. As well as just increased, you
2 know, desire to be using home-based care, especially for
3 Black families, FDC also had a higher level of presence in
4 the ideal category for those families.

5 SUPERVISOR MITCHELL: Commissioner McBride.

6 COMMISSIONER McBRIDE: Thank you for this
7 presentation. As (unintelligible) I did review the
8 reports that were provided beforehand. It actually helped
9 me understand some of the experiences that I had growing
10 up. I was in -- my grandmother took care of me and about
11 14 other kids in Watts. And she did know best. You could
12 not tell her different. Until we found Crystal Stairs.
13 I'm a product of Crystal Stairs. And my mother was able
14 to get me into that program. And having had family
15 members take care of my children as well as a home-based
16 daycare, and then I have five. And so they've kind of all
17 been in different environments.

18 And having a deeper understanding as a parent now
19 -- and I think sometimes as parents when you're in it
20 you're not even really thinking about what all of your
21 options are. You're just going whatever is closest,
22 whatever is easiest. And -- yeah. And the time that you
23 need it. And the data reflects that.

24 And so it's obvious that in order to support both
25 the providers by increasing their -- their income that

1 they're able to make, we do need to address the income
2 inequalities that these families are facing.

3 And thinking more long term, it's not a short
4 term solution. And I appreciate all the recommendations
5 that you and your team are all coming up with. One of the
6 questions I have is about tapping into resources related
7 to CTE Pathways.

8 So Career Technical Education in public
9 education. There's more founding for it and we don't
10 often have a lot of programs that are funding or
11 encouraging young people to pursue early childhood
12 education as a viable career path, whether it's through an
13 FFN or FCC or a childcare facility. But it is something
14 that young people may be interested in if they see that it
15 is a legitimate career pathway, and they can serve their
16 communities.

17 And we can start, you know, as early as high
18 school students doing internships with, you know, partner
19 agencies within their school district so that they're
20 graduating with some early childhood credits.

21 And just looking at the age range of the
22 providers being around 49, 50, 54 years old, it makes
23 sense that they're ready to maybe leave the profession
24 after a few years. Because by that point, you know,
25 you're following around two- and three-years-olds who have

1 a lot of energy. And, you know, who better to match that
2 energy than young people who are coming out of high school
3 or coming out of college. But I think as a country we
4 really haven't really, like, legitimized early childhood
5 education the way -- we barely have legitimized K-12
6 educators.

7 But early childhood educators lay that foundation
8 and so I think there's an opportunity there to -- and in
9 one of the -- one of the slides, one of the data points
10 was that a lot of these providers are doing it out of the
11 goodness of their heart. And also maybe because they're
12 an entrepreneur and low on that scale was to earn more
13 money or to start, you know, on to another career pathway.

14 But I think we could bring that up to the higher
15 levels where they can see -- actually see an opportunity
16 to earn more money. And to maybe go into a different
17 career pathway if they start in early childhood education.

18 So that was just one thing that came to mind,
19 tapping into young people who are leaving high school
20 without a career pathway and may already have neighborhood
21 siblings or cousins or friends that they are babysitting
22 and taking care of and can actually see this as an
23 opportunity. And there are CTE funds and more of them
24 are, you know, being invested as high schools and public
25 education agencies see that not everyone is headed to

1 college.

2 The other thing that I thought about was the
3 outreach for the providers. Like, obviously yes. If you
4 came to my grandmother and said we're going to teach you,
5 she would have, God rest her soul, slammed the door in
6 your face. But I think if it had come through my mother
7 or any of my other relatives, and said, hey, there's some
8 incentives for both of us. Maybe we can incentivize the
9 professional development by reaching out to the families
10 who are relying on the FFNs and saying, you know, we can
11 benefit from this if you're willing to go to this
12 playgroup. Or if you're willing to sit and share with
13 someone what you've learned about childcare.

14 I think there's an opportunity there where I've
15 -- we all know that people are more willing to share what
16 they know rather than have you tell them what you think
17 you know. And so maybe we can make it more of a reaching
18 out like we'd like you to be a mentor, or we'd like to
19 learn what you're doing in your home to help others. And
20 then in the process, provide them with more resources or
21 allow them to see some incentives there.

22 And the only other question I have, actually,
23 Dr. Allen tapped into with wanting to know the 81 percent
24 and the 76 percent who did not find it ideal, and you
25 addressed that; so thank you.

1 MS. RODRIGUEZ: Well, thank you.

2 SUPERVISOR MITCHELL: Thank you, Commissioner
3 McBride. All -- everyone for your active listening and
4 your thoughtful questions. And I just keep going back to
5 the three discussion prompts on the screen. You know, how
6 can this presentation inform our strategic plan reset? So
7 I would just ask us all to really keep that in mind as we
8 continue to digest this rich data.

9 Public comment on Agenda Item 6?

10 MS. VO: Confirming there are no public comments
11 on Item 6.

12 SUPERVISOR MITCHELL: Thank you. We're going to
13 take a five-minute break. Staff said they were cool with
14 that. And so we'll be back at 3:25. And we'll move into
15 the Agenda Item 8, the SWOT analysis.

16 (A brief break.)

17 SUPERVISOR MITCHELL: All right. Thank you
18 everyone for coming back. Let's go on to Agenda Item 8,
19 which is your Strategic Plan Reset SWOT analysis. You've
20 got white boards here; so it looks like you're about to
21 put us to work.

22 MS. ANDREWS BUSH: Yes. Good afternoon. Really
23 great to see everyone today, and to the public and those
24 on Zoom. Really appreciate your time and attention today.

25 Since the beginning of the strategic plan reset,

1 we've been exploring how to increase commissioner
2 engagement within board meetings. So in March, we
3 facilitated small group discussion. And today, it's going
4 to be a different format, as you can see, we have two
5 white boards here. When you walked into the room, you may
6 have wondered why the chairs were set up in a very
7 different way.

8 So we want to kind of maximize viewing by having
9 most folks sit on this side of the room. But we do have
10 additional cameras so that viewers in the audience and the
11 overflow rooms and on Zoom are able to actually see what's
12 being written on the white board.

13 So as Karla mentioned, we do have our strategic
14 plan consultants, Chrissie Castro and Rigoberto Rodriguez
15 here today, who are going to facilitate our time together.
16 And they're going to introduce themselves during the
17 presentation. You also noticed that we're not seated; so
18 you'll see a lot of interaction today.

19 So before I hand it over to Chrissie and Rigo,
20 I'm just going to take a few moments to orient us to where
21 we've been.

22 So since March, we've been conducting a landscape
23 analysis, exploring the internal and external context in
24 which First 5 LA does it's work. We've reviewed data to
25 help us understand the conditions of children and

1 families. We looked at local State and Federal public
2 policy opportunities which have a direct impact on
3 children and families. But we looked inward, focused on
4 what we learned from our experience in implementing First
5 5 LA initiatives. Okay.

6 So we're looking at First 5 LA initiatives and
7 what we've learned there as well as what we've learned
8 from how we operate as an organization.

9 We also looked to the broader field, looking at
10 reports from other public agencies, from philanthropy,
11 from nonprofit organizations and researchers to gather
12 insights in their learning. And during last month's Board
13 of Commissioners, and Program and Planning committee
14 meetings, we shared what we've learned through this
15 exploration. And commissioners were invited to share your
16 perspectives on the landscape analysis. And our staff
17 were invited to do the same. And a synthesis of those
18 observations and insights is included in the board
19 materials for your review.

20 In addition, today, Commissioners had an
21 opportunity to learn more about parent and provider
22 perspectives and childcare home -- home-based childcare.

23 So for today's presentation, we're really
24 thinking about all of this information that we have been
25 receiving and digesting over the past several weeks, and

1 using that to inform our thinking about First 5 LA's
2 strengths, weaknesses, opportunities, and threats.

3 So today's presentations, Chrissie and Rigo, our
4 strategic plan consultants will engage commissioners in
5 the O of SWOT, the opportunities that First 5 LA is
6 uniquely positioned to seize. We'll also provide an
7 overview of the framework for the strategic plan reset
8 process and the planning calendar through November. Then
9 we'll close with reflections and next steps and answer any
10 commissioner questions.

11 So we're very eager to get started. So at this
12 time, I'm going to turn it over to Chrissie who will
13 begin. Thank you.

14 MS. CASTRO: Thank you so much, Antoinette. I
15 also wanted to really thank Jenny Liao and Justine Flores
16 and the little ones who are also were so patiently waiting
17 in the room. Much love to them. Thank you for being in
18 these conversations with us.

19 (Non-English language spoken.)

20 I am Chrissie Castro. I greet you in my Navajo
21 language to share who I am as a Navaho woman. I also want
22 to open by acknowledging that we're on the traditional
23 territories of the Tongva, Tataviam, and Chumash peoples,
24 and I want to take a moment to uplift and to honor their
25 peoples' past, present, and future.

1 I'm a social justice consultant working at the
2 intersections of systems, policy, and community change.
3 And, in fact, my first job out of grad school was at the
4 LA County Children's Planning Council -- some of you may
5 have heard of that before -- which was an initiative
6 heavily supported through partnership of First 5 LA and
7 the County of Los Angeles. And that's actually where I
8 met my colleague Rigo and many others in the room.

9 And although I've been in the realm of Early Care
10 and Education for quite some time, I recently have moved
11 from theory to practice in that I have an 11-month-old
12 baby boy. His name is Jason Natani (phonetic) and
13 yesterday we celebrated a milestone in that he took his
14 very first step.

15 So all of these issues are very near and dear to
16 my heart and also very humbling now, as an actual parent.
17 And with that, I want to invite my colleague Rigo to also
18 introduce himself.

19 MR. RODRIGUEZ: And I'll do it from over here.
20 Good afternoon, everyone. I want to say that I'm so
21 honored that Chrissie invited me to be a coconsultant with
22 her on this project. And I was also saying that there's a
23 double-edged notice to her son taking his first step.
24 Right? It means that now the whole house has to be baby
25 proofed.

1 So I want to say that this last conversation made
2 me realize that I really do need to share with you that
3 I'm the youngest of 13 of a Mexican immigrant family. And
4 I remember during the summers having my older sisters and
5 brothers drop off everyone at my mom's house -- the
6 grandmother. And so she was operating fully unlicensed
7 day care. Exempt? I don't know. But there was Ilda,
8 Nina, (unintelligible), Hector, and myself, and then the
9 nephews, Rafa, Chava, Jeannie, Cynthia, Junior. I think
10 we passed the 14 limit; so it had to have been
11 center-based care.

12 That's where I learned facilitation. I was told
13 by my mom (unintelligible) just listen. And, also, I'm
14 taking it out on the world now, I'm a professor at Cal
15 State Long Beach. I'm the chair of the Department of
16 Chicano Latino studies where I am focusing on LatinX and
17 ChicanX public policy, and where students have to hear me
18 for an hour and 15 minutes every day.

19 And lastly, I'm also a school board member in
20 Santa Ana where I have really been trying to apply a lot
21 of the theory and frameworks in actual practice around
22 results-based accountability. So it's a pleasure to be
23 here with you all.

24 MS. CASTRO: Thank you, Rigo.

25 So just a little bit of framing before we jump

1 into our major exercise in what we're doing here today, we
2 are very much focused on the O part of a SWOT analysis.
3 And that is because you all have, you know, received so
4 much information around the landscape analyses. And so we
5 are wanting to really drill into the opportunities --

6 Would you rather that I use this? All right. So
7 we're going to be -- can you hear me? Yes. Okay.

8 So we're going to be dropping into the
9 opportunities portion of the SWOT analysis to get to the
10 real core of the strategic reset framework, which is about
11 goals, objectives, and strategies in order to reach First
12 5's North Star.

13 Now, I think Antoinette did a really wonderful
14 job summarizing where we've been. But just to touch on a
15 few notes, you know, the strategic reset was really -- was
16 determined that that was necessary because of changing
17 conditions in the environmental landscape due to
18 Proposition 31, due to the lingering impacts of Covid-19
19 on families with young children; so this reset was really
20 initiated and led by staff who have conducted the
21 landscape analyses all of which you have heard, have been
22 digesting for the last several board meetings including
23 the Program and Planning meeting.

24 And today there's three core content pieces that
25 we're looking to -- to get into. One is that we want to

1 provide an overview of the philosophy and approach that
2 we're taking to strategic reset. Two, we're wanting to
3 make sure that you're, you know, understanding is steeped
4 in the planning calendar; so how we're going to get from
5 July to November for a final strategic reset plan. And
6 lastly, again, that SWOT analysis.

7 So we'll structure time in having three major
8 agenda items. The first more of in, you know,
9 introduction context setting. We'll share a little bit
10 more about who we are and our approach to the work. The
11 majority of our time will be spent on the SWOT exercise.
12 And then we'll move to closing and reflections.

13 So just a little bit more about who we are as the
14 strategic reset consultants. We are practitioners of
15 results-based leadership. So within that, there's two
16 pieces. One is results-based accountability, which Rigo
17 will go over in just a moment, and there's also
18 results-based facilitation. We're also the facilitators
19 of systems change processes; so Rigo and I have worked in
20 LA County systems-change efforts and child welfare and
21 mental health in school systems. And we're also social
22 change agents. So we see ourselves as instruments of
23 change. We have a point of view and a perspective on
24 social change.

25 MR. RODRIGUEZ: And that is anchored in our

1 approach and commitment to -- and our life's work, really,
2 around racial justice, community organizing, and power
3 building. So Chrissie mentioned, she started at the
4 Children Planning Council right after grad school or
5 during grad school.

6 I started organizing Mexican immigrant
7 communities in the deep south -- or what we call Orange
8 County. This is around Proposition 187, 1994. And so
9 since then, I've also been involved in a lot of systems
10 change. I -- I don't know if Commissioner Nichols will
11 remember the KDA Strategic Planning process back in the
12 day, and also a lot of the work with the Mental Health
13 Services Act. I know Dr. Byrd is involved in the
14 Department of Mental Health. Chair Mitchell, I was also
15 the facilitator for the Alternatives to Incarceration,
16 along with for Diana Zuniga (phonetic), Dr. Ross, and so
17 forth. And also the report for the closure of the Men's
18 Central Jail. So a lot of the work is really oriented
19 towards power building policy change.

20 And, by the way, my work at pales in comparison
21 to Chrissie, but I just wanted to drop that.

22 MS. CASTRO: Not true, Rigo.

23 He just wants to embarrass me.

24 The other point that we wanted to make is we're
25 very passionate about early childhood work. In a former

1 role, I was part of the National Strengthening Families
2 Team, with the Center for the Study of Social Policy,
3 which is deeply invested in the prevention and of ECE
4 work. And Rigo, as he shared, as a school board member in
5 Santa Ana is really -- has been committed to leveraging
6 his role in leadership to make sure that those systems are
7 more deeply invested in early childhood as well.

8 MR. RODRIGUEZ: So Chrissie and I started to
9 collaborate together about 20-plus years ago around the
10 Children's Planning Council. And so a lot of our work is
11 really, really -- and has been anchored around families
12 with young children. Because the focus on racial justice
13 and racial equity can focus on many, many things. But
14 over the years, Chrissie and I have kept that as a very
15 consistent anchor in our work.

16 And one of the things that we always emphasize
17 and have seen is that the systems level transformation is
18 so, so critical to achieve better results. And so we are,
19 I think, very aligned to what we've heard from this board
20 around the importance of focusing on systems, transforming
21 systems for better results at a larger scale than what
22 individual programs can achieve that focus on individual
23 level change.

24 Right?

25 And a lot of that -- Commissioner McCroskey, I

1 remember hearing from you many years ago when we talked
2 about also the setting up of the service planning areas,
3 the data systems, and all that system-level work that
4 needs to happen in order for policy makers and change
5 agents to be able to track changes over time.

6 Good to see you again.

7 All right. So what we'd like to do now is
8 provide you with a very, very high level definition of
9 results-based accountability just so that we demystify
10 that term a little bit. Because results-based
11 accountability is not a magic wand. Like, you use the
12 word and all of a sudden things transform. Right?

13 It's more like an orientation to the work. And
14 it comes from a lot of work that Mark Friedman has done
15 connected to the Center for the Study of Social Policy.
16 And it's basically a disciplined and common-sense way of
17 both thinking about the outcomes we want and taking
18 action. Right?

19 Disciplined in that there is a methodology, but
20 also common sense because boards like this -- and I sit
21 also on a board for a school district -- we have to figure
22 out how to make sure that we explain and -- and define and
23 describe our work to a broader public. Right? So that
24 could be the basis for a lot of the accountability; right?

25 And this work operates both at the large scale

1 for quality of life for communities, but also can be used
2 to gauge and focus performance of systems, organizations,
3 and service systems.

4 Commissioner Nichols, I remember the days when in
5 the KDA strategic plan, we had to go through each one of
6 those measures to be able to get out of the lawsuits;
7 right? The settlement.

8 And so it -- this is another way of -- this is
9 another -- this is the broader framework that we used for
10 that.

11 I sort of also want to apologize for making those
12 time frames really short. But anyway.

13 Results-based accountability, basically -- it
14 basically starts as a discipline -- it starts with the end
15 in mind first, and then we work backwards to the means --
16 in other words, the strategies. And sometimes we focus
17 first on the strategies and try to figure out what the end
18 is. Here, the ends can refer -- the ends refer to
19 conditions of well-being. In other words, a result or an
20 outcome is a condition of well-being that we want, either
21 for a population within a geography -- so in this case
22 your North Star is an example of a population-level
23 result, because you don't want one child or certain
24 children. You want every child -- right? -- to reach
25 their developmental potential throughout their critical

1 years of zero to five -- or prenatal to five; right? So
2 this is a population-level result.

3 But it can also work to articulate the ends if
4 you're looking at program participants. So you can also
5 scale it down to something like 80 percent of job training
6 participants obtain a well paying job within 12 months.
7 Right? That's a condition of well-being or an outcome
8 that we want. Right?

9 So the -- the way that we want to apply
10 results-based accountability is by using this approach to
11 help you articulate your goals, objectives, and
12 strategies. And so let me just walk through this mapping.

13 So from a results-based accountability
14 standpoint, what we want to do is make sure we're clear
15 along with you -- actually, that you're clear -- and I
16 think you are -- about the ends and then the means.
17 Right?

18 In terms of your ends, the North Star is your
19 population-level result. It's that big vision; right?
20 But we also know that it's pretty big; so we want to break
21 it into specific domains. So here you are, of course,
22 First 5 LA, driving this change. We want to be able to
23 break that vision into component parts. And that's what
24 the strategic reset process is going to help us do.

25 And for each of those areas we want to articulate

1 a goal statement; right? And for each of those goal
2 statements, we want to have very clear objectives that are
3 measurable; right?

4 So we're going to go through a process of making
5 sure that we are very clear about your ends; right? Your
6 North Star, your goals, and your objectives. So, for
7 example, the objective would be something like over the
8 next five years, decrease the number of X by this. So
9 we're very clear about the way you're going to measure
10 your change.

11 Is this making sense so far?

12 So that's going to take a while. We've been
13 doing this with the Santa Ana Unified School District for
14 a while, and across other organizations that I've worked
15 with. But it's out of that that we want to crystallize
16 what those ends are.

17 For each of those goals, we then want to make
18 sure we're clear about the strategies. The strategies are
19 always, always in relationship to your goals and your
20 objectives. And, of course, the strategies are crafted
21 around and take into consideration this external context.
22 And today we're going to start mapping out the
23 opportunities part of it; right?

24 So in dialogue with your ends and the context,
25 then we want to be able to be very clear about the

1 strategies. We've heard loud and clear through documents
2 that we've read, interviews that we've done, that this
3 group is very strongly committed to policy-change level
4 strategies, to systems-change strategies, and also to
5 community-driven strategies. Right? Not one or the other
6 but interconnected and co-generated. Right?

7 And then your tactics really are the ones that
8 are linked to these strategies. How you power them.
9 Right? And those tactics can be -- are more dynamic.
10 They change based on changing circumstances, whereas your
11 strategies shouldn't be changing much; right? Unless you
12 have proof that it's not working. And the way you find
13 the proof is by having something measurable that you can
14 look at so that if it's not working, you can
15 re-strategize; right?

16 Any questions so far? We're good so far?

17 I hesitated to ask that question given how many
18 questions you had in the last round. But I took a risk.
19 That's the first risk I just took. All right?

20 So the point here, as you see in the title, it's
21 what enables as collective efforts to build very powerful
22 strategies that can stand a chance at achieving the
23 results that you want.

24 What I'd like to do now is just -- and then for
25 the benefit of those who didn't -- for whom I went too

1 fast, too quickly, and all that stuff, the slides contain
2 all the details that I just shared; so that's where --
3 there was a benefit.

4 So okay. Let me touch upon the planning
5 calendar, and then I'll open it up for questions, again,
6 before we go into the exercise.

7 And, also, by the way, Chrissie, did you want to
8 add anything? No? Okay. All right.

9 So for the planning calendar, the very top row,
10 really, it represents the future meetings of this board.
11 With clarity that by November -- by the November meeting,
12 we want to make sure that you are in a position to approve
13 -- review and approve the plan. But it won't be the first
14 time that you see something, because as you can see,
15 there's little arrows for feedback loops every month so
16 you're on top of the information that's emerging.

17 That middle arrow represents all the internal
18 engagement work that we've already planned out.
19 Everything from the strategic reset team to the senior
20 leadership teamwork groups, the leadership team and
21 others. The point I want to make is that there's a lot of
22 feedback that's going to be happening internally.

23 And then lastly, we also want to underscore our
24 commitment throughout the process, figure out how to
25 honorably engage communities in this. We, as folks who

1 have been community organizers, this is a tight time frame
2 for deep community engagement. So we really want to build
3 upon all the work that the organization has already done.
4 All the tables that you sit at and all the wonderful
5 resources and assets and strength and knowledge and wisdom
6 that the staff have from all those years of engaging
7 community; so we want to leverage and harness that.

8 Chrissie, did you want to add anything else?

9 Any questions on the planning calendar, the RBA?
10 This is, like, the fastest presentation I've ever done on
11 RBA. So any questions? I'm going to wait a little bit
12 longer. All right. Okay.

13 So if there are no others, let me go ahead and
14 set that time, because when I start facilitating, I lose
15 sense of time and I know that your time is precious.

16 So can we get -- we were supposed to end this
17 part by 4:00. 4:25 is our limit; right? So if we do 25
18 minutes. All right. So 20 minutes will take us up to
19 4:11. All right? That will give me -- you're listening
20 to the internal dialogue of the facilitator. I should
21 have turned off the mike.

22 Okay. So as Chrissie mentioned today, we're
23 focusing on the opportunities part of the SWOT. And the
24 task again is this: We'd like to tap into your expertise,
25 your experience, particularly from your vantage point to

1 share what major opportunities you see in the external
2 environment, and then some potential pathways that we can
3 all start -- we can already start articulating for First 5
4 LA. And, again, all in relationship to the North Star
5 which I think you're all really familiar with.

6 Okay. So here's the table. So we -- when we
7 think environment, it's really broadly speaking social
8 environment, environmental, technological -- any kind of
9 changes that you see happening. For example, I heard
10 earlier in the presentation that there is an increase in
11 the -- potentially an increase in the Governor's budget.
12 Right? Those would be examples.

13 But what I'd really love for you to do is to
14 first think about your opportunities from your vantage
15 point. So, Dr. Byrd, since I know you're involved in the
16 Department of Mental Health, what might be some
17 opportunities there?

18 Commissioner Nichols, from your perspective?
19 Right? So I happen to know both of you, but I don't know
20 other. But from your vantage point, what might be
21 opportunities?

22 What will happen is that Chrissie is going to
23 start mapping those out as we speak. We'll spend about 20
24 or so minutes on this, and then once we have a mind map,
25 we're going to ask you to identify some connections;

1 right? What patterns do you see?

2 And then from those patterns, let's see if we can
3 provide some kind of idea on a pathway that might help the
4 -- the First 5 LA. Yeah? Okay.

5 So whenever anyone is ready to share one or two
6 things, just let me know. And then we'll -- we're going
7 to use peer pressure.

8 Commissioner Allen?

9 COMMISSIONER ALLEN: Hi. I'm from DPH.

10 MR. RODRIGUEZ: DPH? Dr. Ferrer -- I had a
11 chance to work with her a lot during the alternatives to
12 incarceration.

13 COMMISSIONER ALLEN: Well, there are a number of
14 funding streams that present opportunities to think about
15 so -- approaches to families based on changing social
16 determinants. So that includes funding streams available
17 for Medi-Cal, these are national and FPSA coming through
18 DCFS.

19 MR. RODRIGUEZ: So an increase in funding that
20 can support a social determinants of health --

21 COMMISSIONER ALLEN: Approach.

22 MR. RODRIGUEZ: -- approach.

23 COMMISSIONER ALLEN: Very focused on
24 supplementing the medical model or the social service
25 model with Family Supports.

1 MR. RODRIGUEZ: And so with the social
2 determinants -- and is this -- are these funds coming
3 through public health?

4 COMMISSIONER ALLEN: No. No. They're -- we hope
5 to take advantage of them in every possible way. No. But
6 they're Federal money that the State has applied for, and
7 then be made -- and then are coming to Counties.

8 MR. RODRIGUEZ: Okay. So increase in the Federal
9 funds that would come to States, then local, that you can
10 leverage through social determinants of health, which then
11 allows you -- you can leverage it and then help families
12 in different domains.

13 COMMISSIONER ALLEN: That's right. So, I mean,
14 the Medicaid one is CalAIM in California. And the social
15 service -- the child protective service one is the
16 Families First Preventative Services Act.

17 MR. RODRIGUEZ: Okay. So Child Protective -- so
18 if we can just put cps.

19 And the other one was linked to CalAIM?

20 COMMISSIONER ALLEN: Yes.

21 MR. RODRIGUEZ: Then we'll just put -- at any
22 point, Chrissie, just ask me what --

23 MS. CASTRO: Cal what?

24 MR. RODRIGUEZ: CalAIM. C-a-l dash -A-I-M.

25 I don't want to use the pressure of just staring

1 at Commissioner Byrd, but whoever wants to go next.

2 SUPERVISOR MITCHELL: Can I just piggy back?

3 MR. RODRIGUEZ: Go ahead.

4 SUPERVISOR MITCHELL: I'm going to say there is
5 also a new way of -- innovative way of how mental health
6 funding will roll down to the local level. So --

7 COMMISSIONER BYRD: I'm trying to read your mind,
8 but I don't think we're there yet.

9 SUPERVISOR MITCHELL: Well --

10 MR RODRIGUEZ: Why don't you -- what comes to
11 mind when you think about that?

12 SUPERVISOR MITCHELL: Well, just on the heels of
13 what Commissioner Allen said, you know, we are in a place
14 where innovations happening in government, which in my
15 history has been rare. And so with CalAIM we have new
16 ways in which federal --

17 (Overlapping voices)

18 MR. RODRIGUEZ: At the State level.

19 SUPERVISOR MITCHELL: -- Federal and State
20 funding can be used.

21 MR. RODRIGUEZ: Okay.

22 COMMISSIONER BYRD: Yeah.

23 SUPERVISOR MITCHELL: And it's my sense that the
24 mental health realm is a similar process. Either through
25 the State given its greater effect and flexibility on MHSA

1 dollars. But I also thought at the State level -- I can
2 really be making it up. Looking at your face, perhaps I
3 am.

4 COMMISSIONER BYRD: No. No.

5 SUPERVISOR MITCHELL: I thought there was a new
6 way in which, much like CalAIM, the County would be
7 reimbursed from the State level around mental health.

8 COMMISSIONER BYRD: So the Youth Behavioral
9 Health Initiative.

10 SUPERVISOR MITCHELL: What was that?

11 COMMISSIONER BYRD: The Youth Behavioral Health
12 Initiative. So tied to that is some creative ways to fund
13 services, not specialty mental health services, but mental
14 health services in schools. So using behavioral health
15 coaches, but there's also the community health worker and
16 peer specialist help funding that's coming.

17 MR. RODRIGUEZ: So can I add then, it's not just
18 new funding at all levels, but also there's greater
19 flexibility for innovation in the use of those dollars.
20 Is that -- can we say that?

21 COMMISSIONER BYRD: I think there's been greater
22 innovation at the State level for pushing forward a
23 platform for greater flexibility in how those funds are
24 used.

25 MR. RODRIGUEZ: So then, Chrissie, what we would

1 do is just create a link to that to so it would be new and
2 then flexible and then just a link on top of that for
3 State level.

4 And you might want to use a different marker.

5 MS. CASTRO: Got it.

6 MR. RODRIGUEZ: You all heard that?

7 So you're pointing that at the State level you're
8 seeing more of that?

9 COMMISSIONER BYRD: Yeah.

10 MR. RODRIGUEZ: In the -- in the making more
11 flexible the use of those dollars? Or how --

12 COMMISSIONER BYRD: Yeah. So I would say we're
13 going to go -- we're going to approach CMS -- Center for
14 Medicaid Services -- to get some flexibility around how
15 Medicaid funding is used here in California.

16 MR. RODRIGUEZ: So I would just abbreviate -- can
17 we get another -- so just next to State level put CMS,
18 slash flex, and then we'll -- that will be our code for
19 that.

20 COMMISSIONER BYRD: And I think a lot of the Cal
21 AIM -- I won't say a lot. So there's also through the
22 California Youth Behavioral Health Initiative more
23 attention to services being delivered in school-based
24 settings.

25 MR. RODRIGUEZ: Is that a new -- can we put that

1 as a new trend?

2 COMMISSIONER BYRD: Yeah.

3 MR. RODRIGUEZ: So that would be the Youth
4 Development or --

5 COMMISSIONER BYRD: Youth Behavioral Health
6 Initiative.

7 MR. RODRIGUEZ: Youth Behavioral Health
8 Initiative.

9 And?

10 COMMISSIONER BYRD: So greater flexibility there,
11 and I think an increased effort for managed care plans to
12 provide services on campuses where there are students. So
13 it speaks to the need for greater partnerships with
14 managed care plans.

15 MR. RODRIGUEZ: And so what I'm tracking is that
16 that Youth Behavioral Health work is happening in tandem
17 with greater efforts for managed care plans to be offered
18 at the school level? At the site level?

19 COMMISSIONER BYRD: Yes.

20 MR. RODRIGUEZ: At the school level. So the
21 opportunity there is to be able to leverage it at the
22 school site level -- deliver it there.

23 COMMISSIONER BYRD: Right. So through PreK all
24 the way through publicly funded colleges and universities.

25 MR. RODRIGUEZ: All the way there? So K-16?

1 PreK to 16?

2 COMMISSIONER BYRD: Which is a big extension.

3 MR. RODRIGUEZ: I have Commissioner McCroskey and
4 then we will come back to Commissioner Allen.

5 COMMISSIONER McCROSKEY: So as our chair just
6 said, all of these changes don't usually happen at the
7 same time, and they're pretty big ones. Each one of them
8 is a very significant set of providers and agencies and
9 communities and so forth. And to me, there's a really
10 important opportunity. There are two really important
11 opportunities. One is at the County level to get out
12 ahead of trying to align with these changes maybe. And I
13 know that departments are working on that.

14 But the second opportunity feels like to me is to
15 very purposefully engage community voices in thinking that
16 through.

17 MR. RODRIGUEZ: So can we put those as two other
18 streams --

19 COMMISSIONER McCROSKEY: Wherever you want.

20 MR. RODRIGUEZ: Let's keep them distinct.
21 Because I'm hearing it as they're all interconnected but
22 one is you underscored that, there's an opportunity for
23 the County to get ahead of all of these innovations so you
24 can leverage them -- harness them.

25 COMMISSIONER McCROSKEY: Right. There are

1 already, I think, some potential gaps we're seeing that,
2 given how each of these play out, we may not have the
3 opportunity, you know, for some of the kinds of supports
4 to children and families that have previously been
5 available unless we're purposeful about it.

6 MR. RODRIGUEZ: And so being purposeful, getting
7 ahead head of it now that we're seeing it.

8 And then the second one, also a new one, is to
9 engage community on the front end for that.

10 Yeah. Commissioner Allen?

11 COMMISSIONER ALLEN: I think sort of piggybacking
12 on the point about the greater availability of mental
13 health services is because of the pervasiveness of Covid's
14 impact and other social forces -- social media and so on,
15 impacting the mental health of youth, I think on the one
16 hand the need is dramatically increased. On the other
17 hand, I think there's somewhat less stigma about
18 implementing sort of primary and preventative mental
19 health services that have very strong components of social
20 engagement, positive youth development. So it's really
21 getting away from a mental illness mind set exclusively.
22 I mean that clearly is not a problem, but into a mental
23 wellness mindset that I think creates a lot of opportunity
24 to have a vision of how we want children to grow up.

25 MR. RODRIGUEZ: So that the opportunity is for us

1 to really use and advance the mental wellness framework.

2 COMMISSIONER ALLEN: And the destigmatization.

3 MR. RODRIGUEZ: Because it's destigmatized.
4 Right? So continue to destigmatize mental health or
5 mental illness or mental challenges through a mental
6 wellness approach that can address the increased need
7 particularly among youth.

8 COMMISSIONER ALLEN: Yeah.

9 MR. RODRIGUEZ: Okay.

10 Commissioner McBride, and then Commissioner
11 Ramirez, and then we'll come back to Commissioner Byrd.
12 So Commissioner McBride?

13 COMMISSIONER McBRIDE: I think another
14 opportunity is the -- is the doula coverage, because
15 that's a touch point, especially for families who are just
16 starting to grow their families and having children and
17 not realizing that it's never too early to think about
18 your child's development and growth beyond just, you know,
19 during your pregnancy or the first few months or adjusting
20 to a new child.

21 So I think having that has an opportunity to --

22 MR. RODRIGUEZ: Do you want to connect it to one
23 that's up there or a new one?

24 COMMISSIONER McBRIDE: I would say new.

25 COMMISSIONER BYRD: Yeah.

1 MR. RODRIGUEZ: Let's do a new -- it's --

2 COMMISSIONER McBRIDE: It's a new Medi-Cal
3 benefit.

4 MR. RODRIGUEZ: -- basically a doula supported
5 services are going to be funded or already funded?

6 COMMISSIONER McBRIDE: Through Medi-Cal.

7 MR. RODRIGUEZ: Through Medi-Cal; so that fact
8 creates an opportunity for --

9 COMMISSIONER McBRIDE: That touch point with
10 families so we can start informing them of opportunities
11 so they are prepared either even before their child are
12 born to know what services are available, especially when
13 it comes to early detection -- identification. And
14 children who are born and may not have the assessments
15 that they are, you know -- that they need early on.
16 Families can be made aware of that.

17 MR. RODRIGUEZ: So these early touch points where
18 we can already start providing support and information and
19 connections.

20 MR. RODRIGUEZ: Okay. Got it. So Commissioner
21 Ramirez, we'll come back to Commissioner Allen, and then
22 Commissioner Wechsler.

23 COMMISSIONER RAMIREZ: Thank you. So I have two
24 opportunities I'd like to discuss. And one is building a
25 little bit on what Commissioner Byrd said about schools as

1 the hubs for communities.

2 So the Community Schools Initiative is very well
3 resourced in California, can be new in some places, and
4 that can be an opportunity.

5 And second, of course, the UPK and the mixed
6 delivery services has also been a change in law and
7 resourced -- right? -- to provide education, you know, at
8 the K12 to the younger populations.

9 MR. RODRIGUEZ: So Commissioner Ramirez, let me
10 stay with you for a second. So one of them is the
11 community schools model that's being well resourced from
12 the State? So let's put that one as community schools --
13 do you want it as a new one?

14 COMMISSIONER RAMIREZ: I think so.

15 MR. RODRIGUEZ: So let's call it the Community
16 Schools model. And what can that Community Schools model
17 and the resourcing of that -- how is that an opportunity?

18 COMMISSIONER RAMIREZ: It's an opportunity
19 because resources are brought into communities. And
20 there's greater access for, you know, people who need it.

21 MR. RODRIGUEZ: So it can increase -- by bringing
22 resources to the community schools that are anchored in
23 the neighborhoods and communities, that can provide
24 greater access sooner?

25 COMMISSIONER RAMIREZ: Correct. And then it

1 engages the community as Commissioner McCroskey had
2 mentioned.

3 MR. RODRIGUEZ: And it's links to community
4 engagement. So it can also increase the capacity for
5 community engagement because that's one of the four -- one
6 of the pillars for community schools. The community
7 engagement.

8 COMMISSIONER RAMIREZ: Correct.

9 MR. RODRIGUEZ: And then you mentioned also the
10 mixed delivery model?

11 COMMISSIONER RAMIREZ: Yes. UPK is the mixed
12 delivery model. Head Start, Early Head Start, childcare
13 as well. All of those different programs working together
14 differently, you know, large initiative, large push in
15 California.

16 MR. RODRIGUEZ: And how is that an opportunity?

17 COMMISSIONER RAMIREZ: Well --

18 MR. RODRIGUEZ: And I know that this might be
19 obvious to everyone, but I want to call it out.

20 COMMISSIONER RAMIREZ: It's an opportunity
21 because there's funding to do that; so school districts
22 have to do that. And there's a lot of support and
23 technical assistance for people to do that. So again
24 broadening the access for people.

25 MR. RODRIGUEZ: So again, it's an example of

1 State level funding and opportunities that the County at
2 local level can get ahead and have leverage.

3 I know I had Dr. Byrd, yes. Dr. Byrd and then
4 yourself.

5 COMMISSIONER BYRD: So I thank you so much for
6 bringing up community school initiative. Because we are
7 using MHSA to fund a lot of those partnerships and
8 bringing resources onto campuses. And in some of the
9 sites we've visited, it has actually addressed the stigma
10 issue. Because we're -- we're providing resources not
11 only to students but their family members, who are also
12 then better understanding of what those services look
13 like, what those needs may be. And so its breaking down
14 walls of stigma intergenerationally.

15 And then to go back to your question about
16 MHSA flexibility, I think there is some flexibility coming
17 in the Governor's proposed behavioral health redesign. It
18 would carve out a large chunk of MHSA dollars for housing;
19 so it would increase at higher end services. But it could
20 have a less flexible approach for other services.

21 MR. RODRIGUEZ: So how is that an opportunity or
22 is that more of a clarification?

23 COMMISSIONER BYRD: I think it's an opportunity,
24 going back to the director's talk -- message this morning
25 around homelessness. Because I do think we are

1 experiencing a tremendous amount of homelessness in LA
2 County, especially among children and children of this age
3 range. So I think it's an opportunity for those people
4 who are experiencing homelessness, but it could affect
5 other --

6 MR. RODRIGUEZ: So for families experiencing
7 houselessness, the shift potentially in MHSA could be
8 bring greater family around the housing component,
9 especially for the very young.

10 COMMISSIONER BYRD: Yes.

11 MR. RODRIGUEZ: Commissioner Wechsler and then
12 the Chair.

13 COMMISSIONER WECHSLER: Yes. This may be
14 repetitive, but I just hear all the ideas together to me
15 capture the overall strategic focus of the board on
16 prevention. And just to have that word up on the board
17 because it just feels like that's sort of the umbrella
18 strategy for the County right now, to be focusing on
19 children as young as possible. And to be intervening
20 younger and, you know, with their parents before they have
21 children. I mean, everything is just based on research
22 and all of our practice. We need to be focusing on
23 prevention -- we are focusing more and more on prevention.
24 We have the prevention task force and so many other
25 initiatives, and so many funding initiatives with MHSA.

1 Our Families First are focused on prevention and mandated
2 supporting. And new DCFS initiative (unintelligible) all
3 of this, how can we be present preventing kids from
4 entering our systems.

5 MR. RODRIGUEZ: Commissioner Wechsler, I heard
6 two things. The theme you're already reading across, but
7 I also heard that there are already multiple efforts going
8 on around prevention?

9 COMMISSIONER WECHSLER: Yes. So --

10 R. RODRIGUEZ: In other words, the opportunity
11 here is we already have an infrastructure meeting -- doing
12 work around prevention as well.

13 COMMISSIONER WECHSLER: And First 5 is part of
14 that solution.

15 MR. RODRIGUEZ: With First 5.

16 So I have commissioner -- I have Chair Mitchell
17 and then Commissioner Allen.

18 SUPERVISOR MITCHELL: So I've gone way out of the
19 box. Just thought I'd put that out there. But I thought
20 about housing dollars and I just say housing dollars
21 across the board in recognizing the growing number of
22 houseless families as well as those who are housing
23 vulnerable.

24 MR. RODRIGUEZ: So the expansion in resources?

25 SUPERVISOR MITCHELL: For production.

1 MR. RODRIGUEZ: For production.

2 SUPERVISOR MITCHELL: Preservation.

3 MR. RODRIGUEZ: For both housed families and
4 housing vulnerable.

5 SUPERVISOR MITCHELL: Yes.

6 R. RODRIGUEZ: So to be able to cover a greater
7 spectrum of families experiencing houselessness. So also
8 that kind of prevention work as vulnerable.

9 SUPERVISOR MITCHELL: Critical prevention work.

10 MR. RODRIGUEZ: Okay.

11 SUPERVISOR MITCHELL: Secondly, the work that the
12 County is doing around poverty alleviation, and the effect
13 that that will have on families. Everything from our
14 guaranteed income pilot, to our entire new initiative
15 titled Poverty Alleviation.

16 MR. RODRIGUEZ: So the Poverty Alleviation
17 initiative, that has different strands to be something
18 else that could be harnessed --

19 SUPERVISOR MITCHELL: Absolutely.

20 MR. RODRIGUEZ: And I heard also in the
21 presentation earlier around the income issue -- right? --
22 and so that could also be connected.

23 SUPERVISOR MITCHELL: Uh-huh.

24 MR. RODRIGUEZ: Anything else?

25 SUPERVISOR MITCHELL: Last piece I'd add -- this

1 is way outside the box, but it's an opportunity.
2 Recognizing what potential leave behind for children zero
3 to five, we could expect or request, given the fact that
4 LA County is going to host FIFA, the Olympics, and
5 Paralympics. And all the planning and resources when they
6 talk about play and spaces for play and greening LA
7 County. All of the realities that those major events
8 coming to LA from the impact that it's going to have on
9 our public transit system, but the leave-behinds that
10 could benefit --

11 MR. RODRIGUEZ: So the major events that are
12 happening in LA County over the next number of years that
13 we can harness those to -- to institute -- to ensure that
14 we have some leave behind. And what I hear with leave
15 behind is some kind of infrastructure, whether that's
16 transportation infrastructure, open space, etcetera, so we
17 can actually see if we can mold systems by leveraging the
18 investments that are coming in?

19 SUPERVISOR MITCHELL: Because when you think
20 about the role LA 84 has played since the '84 Olympics in
21 paying for play --

22 MR. RODRIGUEZ: Particularly around play.

23 SUPERVISOR MITCHELL: Yes. That's what made me
24 connect those dots.

25 MR. RODRIGUEZ: So it is 4:14. I have

1 Commissioner Allen, and I also want it to make sure that
2 the commissioners that are on -- online also get a chance
3 to say something.

4 So let's go with Commissioner Allen and then
5 we'll open up the space for our online commissioners to
6 see if they want to add anything else.

7 COMMISSIONER ALLEN: If I were talking to any
8 other part of the country, I would say we have a very
9 progressive board, and I think very supportive of a lot of
10 initiatives around early -- around pregnancy, around early
11 childhood, family support, and it's a time-limited
12 opportunity.

13 SUPERVISOR MITCHELL: Got that right.

14 COMMISSIONER ALLEN: And so I think keep thinking
15 very hard about, you know, what we can do that really says
16 this is what the County stands for. It's time to do that.

17 MR. RODRIGUEZ: So the kind of progressive nature
18 of the board can give its stamp, you have a window of
19 opportunity.

20 COMMISSIONER ALLEN: That's right.

21 MR. RODRIGUEZ: All right.

22 So can commissioners who are online, then we'll
23 circle back to Commissioner Nichols. Any other
24 opportunity that you see? And then we'll get -- we're
25 going to create the links and themes and harness that.

1 COMMISSIONER MARTINEZ: I think you covered a
2 lot. I have no additional comments.

3 COMMISSIONER ABDO: Hi. I have the same. I'm
4 just blown away by the smart comments that have been made
5 already.

6 MR. RODRIGUEZ: Okay.

7 Vice Chair Nichols?

8 COMMISSIONER NICHOLS: Going again, people kind
9 of read my notes already, but if I may restate some of
10 them in a slightly different way. And I broke them into
11 categories when I wrote them down. In terms of funding
12 CalAIM and FFPSA, but I also think the change in our
13 revenue stream is an opportunity. We will have less
14 money, but I think there's a chance to be leaner and
15 meaner, to be more focused in order to be more impactful,
16 as we cutoff some of the things that weren't having the
17 impact that we were expecting.

18 And it's funny to say, but I think it is an
19 opportunity for us a little bit.

20 In terms of CalAIM, it is more than just a
21 funding change. I'm not a health expert on this board or
22 in the County, but it is going to bring an accountability
23 to managed care plans that has not been there before.

24 R. RODRIGUEZ: Greater accountability?

25 COMMISSIONER NICHOLS: It is. So in the past,

1 people were sort of on their own to seek out the care they
2 needed. Now the managed care plans themselves have
3 measures to engage and connect their clients to -- to
4 services. And so it's going to change the dynamic a
5 little bit. And in addition to that, it requires them to
6 collect and publish data about the times they are engaging
7 in their success in connecting them to services. And then
8 beyond that, the State will hold the managed care plans
9 accountable to certain goals in certain areas, and that
10 includes maternal health and infant health in a way that
11 hasn't been done before. There are benefits under CalAIM
12 in addition to just the money that comes once enhanced
13 case management. If you are a CalAIM participant, as I
14 understand it, you have an enhanced case management
15 benefit. You have a case manager ultimately assigned to
16 you to navigate health systems that you're entitled to.

17 Then, in terms of politics, we've covered a lot
18 of it, but this is a moment of opportunity that
19 California's being significantly restructured in major
20 ways around health and social services. These programs
21 are some, but I think there's more coming. We do have a
22 progressive governor, progressive legislature, and
23 progressive board. And I think not only are some things
24 on the table now but some things will continue to be put
25 on the table in a way that's never been done before.

1 Within the County, the things I'm most familiar
2 with, a couple of them have been touched. We have a
3 Prevention Task Force, we have Poverty Alleviation Group.
4 We also have an ARDI Initiative to address racial
5 disproportionality.

6 And that gets to my next bucket, which was sort
7 of social issues. I think there is a recognition and a
8 conversation going on right now about racial
9 disproportionality and equity that hasn't happened may
10 ever before, which presents us with opportunities to push
11 into areas and root causes where in the past I don't think
12 we've been able to go.

13 Additionally to that, I think the community
14 through Covid and through the Floyd, George, issues
15 organized in a way that will be beneficial to us. I think
16 we have partners out there that have stronger voices,
17 better resources, know how to engage in a way that they
18 haven't been able to engage before.

19 And then last thing just about our community,
20 particularly LA County is rich in terms of the partners we
21 have. We have -- you touched on a couple of them. We
22 have sports teams, we have entertainment, we have Disney
23 and Universal Studios -- are both within the County. And
24 we have a huge engagement with philanthropic partners that
25 just have, frankly, tons of money and an interest in

1 helping people. And I think that's an untapped resource
2 to some degree and a great opportunity for us.

3 MR. RODRIGUEZ: Thank you for outlining all that.

4 I know, Commissioner McBride, I just want to say
5 I wish we had the ability to add more time to our time.

6 So Commissioner McBride if you can --

7 (Overlapping voices.)

8 COMMISSIONER McBRIDE: -- and maybe you can help
9 bring all of this together artificial intelligence is a --

10 (Overlapping voices.)

11 MR. RODRIGUEZ: AI.

12 (Overlapping voices.)

13 COMMISSIONER McBRIDE: -- faster than many of us
14 can keep up with. To leverage that for --

15 MR. RODRIGUEZ: So AI as well leveraging. All
16 right.

17 So we only have, like, two or three minutes. And
18 then we have to close, and the closing is going to be very
19 quick. So just what are some connections that you see
20 here? What's -- just what is the connection that you
21 think -- go ahead.

22 COMMISSIONER TILTON: I think just an overriding
23 opportunity is just communication and public information.
24 So much information. I too am blown away by my fellow
25 commissioners' comments. But everybody doesn't know this

1 and certainly the communities and families don't know
2 this. But there are -- there are campaigns and
3 opportunities -- the No-Hit Campaign, the Safe Sleep
4 Campaign, focusing on newborn health. There's so many
5 opportunities where just having that information there for
6 that family can make a difference, without any kind of
7 direct intervention just in their heads being able to
8 understand what's available and how they can best promote
9 the development of their children.

10 MR. RODRIGUEZ: So one through-line here is --
11 that stands out to you is making sure on communication and
12 public information and we -- that will be critical to
13 leveraging all of this.

14 COMMISSIONER TILTON: Right.

15 MR. RODRIGUEZ: It already exists, but if we
16 don't have a way to use our communication platform and
17 public information, then it will stay hidden. Right?

18 All right. Anything else that stands out to you
19 here as a pathway?

20 So one pathway would be that clear public
21 information communication pathway. Anything else?

22 COMMISSIONER McBRIDE: Well, I appreciate being
23 in a space where this commission is -- First 5 LA is
24 undergoing a strategic reset. I don't know if other
25 commissions are having these exact kinds of conversation

1 where they're looking at opportunities. And so I think
2 communication with other commissions and County
3 departments is another through-line, because we can't
4 accomplish really any of this without that.

5 MR. RODRIGUEZ: So another pathway is to make
6 sure we have the active linkage to other commissions,
7 other County departments, and other sectors, as
8 Commissioner Nichols mentioned, the entertainment sector.
9 We have to figure out how this linkage is going to happen.

10 Commissioner Wechsler?

11 COMMISSIONER WECHSLER: And along the lines of
12 both of you have been saying and the AI point, you know,
13 with all these changing systems and changing funding
14 sources, it's all about navigation. And the role that
15 First 5 plays is a navigator. We have all of those
16 linkages with all that stuff. So the nav- -- the need
17 and, you know, create bodies for is give them to identify
18 resources for families for professionals in the field and
19 for providers.

20 MR. RODRIGUEZ: Yeah. So then the navigation
21 capacity and --

22 SUPERVISOR MITCHELL: Responsibility.

23 COMMISSIONER BYRD: Yeah.

24 So I was also thinking of it from end to user
25 navigation perspective. Like, how do we create this

1 information that is accessible for the people who need it
2 across different organizations, different agencies,
3 because, like, I know of some websites -- County websites
4 that are not the most easy to navigate.

5 SUPERVISOR MITCHELL: Can we say most?

6 COMMISSIONER BYRD: And I do think that we can.
7 So I do think to the extent that we can make things app
8 based -- because people are all about an app that will
9 make things much more accessible and available. I think
10 we should be considering that as well.

11 MR. RODRIGUEZ: Okay. So maybe time for two last
12 comments.

13 And then did you have another?

14 COMMISSIONER ALLEN: I've spoken a lot.

15 MR. RODRIGUEZ: Then we'll end with Chair
16 Mitchell.

17 COMMISSIONER ALLEN: Well, I think there is a lot
18 of very important conversation in the County about
19 Consumer Public Resident Engagement. I think we have to
20 think about how do that in the most meaningful way. So
21 it's very people being aware of it, but it's also a sense
22 of agency, and how can some of the money that's flowing in
23 these opportunities be directed towards autonomous
24 community leadership.

25 MR. RODRIGUEZ: Yes.

1 COMMISSIONER ALLEN: That has a voice of its own.
2 So when the board changes and isn't so progressive --

3 R. RODRIGUEZ: That's another leave behind.
4 And then Chair Mitchell.

5 SUPERVISOR MITCHELL: Thank you. Two quick
6 things. As we talk about navigation, let's not forget
7 what we learned during Covid that there are far too many
8 Angelenos who don't have access to the Internet. So we've
9 got websites that are difficult or even apps. We can't
10 build anything that requires a speedy -- or a device that
11 the people -- good number of the people we serve simply
12 don't have. So it may be old school, community health
13 focus in ways in which we gather, identifying trusted
14 sources to push that information and share. I just -- we
15 can't forget what we learned in terms of how people don't
16 have access to what has become very natural to some of us.

17 And another, I guess, opportunity is recognizing
18 -- I thought about it as we talked about, you know, the
19 current kind of elected body. We're in the middle of a
20 huge transformation in philanthropy. Three foundations
21 will have new presidents in this year, if not more. You
22 know, foundations that have long-term stable leadership,
23 and what that could mean in terms of the priorities
24 for giving in philanthropy across LA County, and where
25 zero to five will fall in that.

1 MR. RODRIGUEZ: Okay. So I'm going to summarize
2 the five interconnected pathways that you came up with and
3 then close.

4 And so one is communication and public
5 information is going to be critical. This linkages to the
6 sector so we can leverage those resources -- philanthropy,
7 those three sectors and so forth.

8 The third is this navigation. Making sure you
9 and others can navigate existing systems.

10 The fourth is accessibility. And not just AI but
11 old school. I used to facilitate 8-track tapes, but
12 that's at different old school.

13 SUPERVISOR MITCHELL: That is old school.

14 MR. RODRIGUEZ: No one understood. And then
15 lastly, the meaningful resident community engagement
16 piece. If we focus on forming those pathways, I think it
17 would take us on a good path.

18 The last thing, then, for today is next steps.
19 There are consultants collaborating with us. We'll be
20 interviewing you all individually; so you'll be hearing
21 that. And then lastly, we begin our strategic reset team
22 meeting tomorrow. And so we'll start working with the
23 internal stuff.

24 Thank you so much for your time.

25 Chrissie, anything else?

1 MS. CASTRO: Thank you, everybody.

2 SUPERVISOR MITCHELL: Thank you.

3 In what order were you in the 14 children?

4 MR. RODRIGUEZ: I'm sorry?

5 COMMISSIONER TILTON: Where did you fall in the
6 14?

7 MR. RODRIGUEZ: There was 13, but we later found
8 out there were 14. But anyway, that's totally a joke.
9 I'm the last one. I'm the youngest.

10 COMMISSIONER TILTON: The very youngest?

11 SUPERVISOR MITCHELL: I wouldn't have believed
12 that. I wouldn't have bet that he would be the youngest.

13 Thank you very much. Amazing experience.

14 You know, I'm -- I'm sorry that we're going to
15 have the individual interviews because I feel better
16 listening to other people and live riffing off what you
17 say. So when I've got nothing during the individual
18 interviews, you'll know why.

19 All right. Public comment on Agenda Item 18?

20 MS. VO: Confirming there is one public comment
21 virtually. And Carlos Arceo (phonetic), the floor is
22 yours. You have two minutes for your public comment.

23 Speaker: Thank you so much. Appreciate the
24 time. Thank you, Commissioners.

25 My name is Carlos Arceo, and I work with Para Los

1 Ninos, one of First 5s investments (unintelligible).

2 And I really appreciated the conversation just
3 happening, particularly with the framing around
4 results-based accountability.

5 And given the fact that this is our wheel house,
6 I really do believe in the points that folks shared about
7 (unintelligible) and authentic partnership with folks that
8 are most impacted.

9 So that we have a consistent finger on the pulse
10 of what's happening in the communities we're surveying and
11 quickly losing important data when that happens, I think
12 someone brought up the idea of how do we partner better
13 with residents and community members so that we're not
14 trying to channel their instinct here, and that we
15 actually hear directly from them.

16 We often hear from community members across our
17 region that while they appreciate that there are
18 capacities being built to navigate the mazes that lead to
19 resources and services, they wonder why the maze needs to
20 exist to begin with, and when that maze begins to be
21 dismantled.

22 So I -- again, I think about that in the spirit
23 of systems change and institutional change. And I fear,
24 again, in the spirit of results-based accountability, that
25 we'll attempt to respond to the adaptive problems with

1 technical responses.

2 And Supervisor Mitchell, you brought up public
3 community health workers, and they work with community
4 members who become community health workers. And I'll
5 share an example. Working with Children Hospital
6 Los Angeles, when they believed that an application -- a
7 phone application would resolve the issue of residents not
8 getting to much needed services and resources, and that
9 was scrapped pretty quickly when they realized -- and this
10 is one of the things that I appreciate about the
11 institution, that they were really, really willing to self
12 interrogate and say where are we in the problem? How are
13 we contributing to (unintelligible) not getting the much
14 needed resources and opportunities. And I'm happy to say
15 that it wasn't the app, but it was community health
16 workers that raised the rate of folks accessing resources
17 from 40 percent up to 82 percent.

18 So thank you so much.

19 SUPERVISOR MITCHELL: Thank you very much.
20 Appreciate your comment.

21 Any more?

22 MS. VO: No other public comments for this item.

23 SUPERVISOR MITCHELL: Thank you. I'll open it up
24 for general public comments for items not on today's
25 agenda.

1 MS. VO: Madam Chair, there are no public
2 comments on the items not on the agenda.

3 SUPERVISOR MITCHELL: Any business that we should
4 consider before we adjourn today's meeting?

5 Beautiful. Seeing none, thank you so much for
6 your active listening and your engagement. This was a
7 wonderful session.

8 We are dark in August?

9 MS. PLEITEZ HOWELL: Yes. Dark in August. Yes.
10 Dark in August and back in September.

11 SUPERVISOR MITCHELL: So everyone have a great
12 balance of your summer, and we look forward to reconvening
13 in September. We stand adjourned.

14 (At 4:31 p.m. 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 stenographically 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 27th day of July 2023.

DocuSigned by:

Heatherlynn Gonzalez

AE10E8980664405...

CERTIFIED SHORTHAND REPORTER

FOR THE STATE OF CALIFORNIA

SUMMARY ACTION MINUTES

FIRST 5 LA
July 13, 2023

Meeting of the Board of Commissioners
Hybrid of In-Person and Virtual
1:30-4:30 pm

COMMISSIONER PRESENT

Commissioners:

Judy Abdo (VIRTUAL)
Robert Byrd
Yvette Martinez (VIRTUAL)
Summer McBride
Holly Mitchell (Chair)
Brandon Nichols (Vice Chair)
Maricela Ramirez
Winnie Wechsler (Alternate)

Ex-Officio Commissioners:

Deborah Allen (Alternate)
Jacquelyn McCroskey
Deanne Tilton

COMMISSIONERS ABSENT:

Barbara Ferrer [Excused]
Astrid Heger [Excused]
Carol Sigala [Excused]

STAFF PRESENT:

Karla Pleitez Howell, Executive Director
Linda Vo, Board Relations Manager
John Wagner, Executive Vice President, Center for
Child and Family Impact

GENERAL COUNSEL:

Serita Young, Attorney-at-Law

CALL TO ORDER / ROLL CALL:

1. Commission Chair Holly Mitchell called the meeting to order at 1:31 pm. Quorum was present.
2. **AB 2449 Request(s) to Participate Remotely Due to Emergency Circumstances and Notice(s) of Remote Participation for Just Cause**

Commissioners Judy Abdo and Yvette Martinez joined the meeting virtually under AB 2449 under just cause; Commissioner Abdo due to an illness and Commissioner Martinez due to caring for a sick child. Legal Counsel made the clarification that the Board does not have to approve their remote participation for just cause.
3. **CONSENT**
 - A. Approve Special Commission Meeting Summary Action Minutes and Transcript – June 8, 2023
 - B. Approve the Monthly Financial Statements for the Month Ending May 31, 2023
 - C. Contract: Approve One (1) Amendment and Authorize Staff to Complete Final Execution of the Amendment Upon Approval from the Board

M/S (Brandon Nichols/Maricela Ramirez)

Roll Call:

Judy Abdo – Aye
Yvette Martinez – Aye
Holly Mitchell – Aye

SUMMARY ACTION MINUTES
MEETING OF THE BOARD OF COMMISSIONERS (HYBRID)

July 13, 2023
1:30-4:30 pm
Page 1 of 3

SUMMARY ACTION MINUTES

Brandon Nichols – Aye
Maricela Ramirez – Aye
Winnie Wechsler - Aye

THE ITEMS WERE APPROVED

COMMISSION: (Items 4 – 10)

4. Remarks by the Commission Chair

Remarks were given by Supervisor Holly Mitchell.

5. Executive Director's Report

A report out was given by Karla Pleitez Howell.

6. Strategic Plan Reset: Using Parent and Early Educators Voices and Data to Inform Our Systems Change Approach for Early Care and Education

First 5 LA staff members John Wagner and Gina Rodriguez were joined by a panel of ECE educators and researchers who presented data on home based child care in Los Angeles County as well as data on parents who use Family, Friend, and Neighbor care in California.

Mr. Wagner provided additional context setting and reminded the Board that back in February 2023, we started our journey in the Strategic Reset process. At that time, the Board asked us to dig into our work, and the larger ecosystem in which we do our work, to inform the reset. Since then, we have brought forward highlights from our own landscape analysis that include policy opportunities and an analysis of our 7 programmatic investment areas. This presentation connects our specific landscape analysis on ECE that started over a year ago, to our broader analysis and strategic reset.

Research and narratives presented at the meeting included:

- Essential for Families: Findings from a Landscape Analysis of L.A.'s Home-Based Child Care. The landscape analysis includes data from parents, family child care (FCC) homes and license exempt family, friend and neighbor (FFN) care.
- Early Educator perspectives and lived experience on providing care for children in a home-based setting.
- Parent Preferences in Family, Friend, Neighbor, and Nanny Care. *A Study of Family, Friend, Neighbor (FFN), and Nanny Care in California - Part One*. Statewide data on parent care choices and the value family, friend and neighbor care holds for California parents.

Ms. Rodriguez further explained that Home Based Child Care (HBCC) is the most common form of nonparental child care for infants and toddlers; HBCC is also used the most by historically marginalized families, with Black and Latina women being overrepresented in the HBCC workforce. Ms. Rodriguez also pointed out that while 80% of children receiving subsidized care are in home based settings, majority of state funded quality supports have been designed for center-based care, such as state preschools. Coupled with local, State and Federal policies with deep roots in slavery, colonization, racism, and sexism, HBCC early educators and the

SUMMARY ACTION MINUTES

families they support do not have equitable access to the resources necessary to provide and receive the highest quality of care.

Board members were asked to consider the following questions during the panel presentation:

1. What are the opportunities for First 5 LA and partners to better support children in home-based settings?
2. What do early educators need? How can they be supported?
3. How can this presentation inform our Strategic Plan reset?

Commissioners responded to these questions.

There was no further discussion.

7. **Break**

8. **Strategic Plan Reset: Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis**

This item was led by First 5 LA staff within the Office of Strategy and Learning and Strategic Planning consultants, Chrissie Castro and Rigo Rodriguez. The purpose of this item was to work with Commissioners to identify major opportunities in the external environment and potential pathways to inform First 5 LA's Goals, Objectives, and Strategies (GOS), so that 'Every child in Los Angeles County reaches their full developmental potential throughout the critical years of prenatal to age 5.' This meeting was formatted to be a brainstorming session where Commissioner responses were analyzed to see what patterns existed, if any, and how First 5 LA would be able to leverage these opportunities. Commissioners were also asked to consider the First 5 LA's commitment to racial justice & equity and its interest in systems and policy change as they identified these opportunities.

Some Commissioner identified opportunities included, but not limited to:

- Increase in federal funds
- Using Behavioral health coaches/Community health workers to increase availability of mental health services
- Increased effort and flexibility for managed care plans. e.g provide services on campuses where students are
- Engage community voices

Next steps will include one-on-one interviews with Commissioners and Strategic reset team sessions with select key staff. Then in September, Commissioners will be provided an update on everything that has happened since the July Board meeting up until the September Board meeting.

There was no further discussion.

9. **Public Comment (for items not on the agenda)**

10. **ADJOURNMENT:**

The Commission adjourned at 4:31pm.

SUMMARY ACTION MINUTES

NEXT MEETING:

The next Commission meeting will take place on Thursday, September 14, 2023, at 1:30 pm.

Meeting details will be posted per Brown Act Requirements

Meeting minutes were recorded by Jaimie Knowles, Board Relations Associate

First 5 LA

SUBJECT:

Contracts for approval

RECOMMENDATION:

Approve two (2) new agreements and authorize staff to complete final execution of the agreements upon approval from the Board.

BACKGROUND:

Pursuant to the Procurement Policy, adopted on September 9, 2021, all First 5 LA contracts and amendments over \$150,000 in the aggregate shall be presented to the Board of Commissioners as an item under Consent for approval prior to execution.

First 5 LA's programmatic budget for FY 2023-24 totals \$78,370,282 and the approved operating budget totals \$ 20,746,542 which was approved at the June 8, 2023, Board of Commissioners meeting.

Please see Attachment A for a description of the contractors' project scope of work and budget amount for FY 23-24. Upon approval of the agreements presented below, staff will complete the final execution of the agreements.

DISCUSSION:

Staff seeks the Commission's approval of the agreements summarized in Attachment A.

Attachment A
September 2023

	NEW									
	TEAM/OFFICE	TEAM/ INITIATIVE/STRATEGY / PROGRAM	CONTRACT (PROJECT) INFORMATION	PROCUREMENT METHOD	PROJECT LENGTH	ESTIMATED TOTAL PROJECT COST	CONTRACT AMOUNT	ANTICIPATED CONTRACT START DATE	ANTICIPATED CONTRACT END DATE	ANTICIPATED PROJECT END DATE
1	Early Care & Education Team	Early Care & Education /Qulaity Improvement System/QSLA Facilitation & Communications	<u>LAURA VALLES & ASSOCIATES, INCORPORATED (10408)</u> The Contractor will serve as a facilitator and consultant to Quality Start Los Angeles (QSLA). The Contractor will support QSLA in the achievement of three primary goals: support and improvement alignment and integration of QSLA with existing LA County early care and education quality support programs and systems; facilitate a human-centered design approach to creating a more sustainable and equitable system of supports that meets the needs of all QSLA providers; and strengthen QSLA partner dynamics, including their capacity to improve collective problem-solving approaches. Funding is included in the budget for FY 23-24, which was approved at the June 8, 2023, Board of Commissioners meeting.	RFP	4 years	\$1,600,000	\$310,000	10/1/2023	6/30/2024	6/30/2027 130

	NEW									
	TEAM/OFFICE	TEAM/ INITIATIVE/STRATEGY / PROGRAM	CONTRACT (PROJECT) INFORMATION	PROCUREMENT METHOD	PROJECT LENGTH	ESTIMATED TOTAL PROJECT COST	CONTRACT AMOUNT	ANTICIPATED CONTRACT START DATE	ANTICIPATED CONTRACT END DATE	ANTICIPATED PROJECT END DATE
2	Family Supports Team	Family Supports /Home Visiting/F5CA Home Visiting Coordination Project	<u>DIGNITY COMMUNITY CARE (10410)</u> The Contractor will oversee the development of the Data Lake Project in partnership with Los Angeles Best Babies Network with funding from First 5 California's Regional Technical Assistance for Home Visiting Coordination and Integration grant. The Data Lake Project will build a data lake as a repository of home visiting data across funding streams, databases, and multiple program models to facilitate the ability to compile and analyze data to inform countywide planning efforts. On May 4, 2023, the Board authorized First 5 LA to submit a grant application and approved Resolution No. 2023-01 to receive funds from First 5 California State Commission for the Home Visiting Regional Technical Assistance for Home Visiting Coordination and Integration Project. The funds to support the Data Lake Project were awarded to First 5 LA from First 5 California State Commission in the amount of \$1,454,689, a part of which will be regranted to the Contractor. Funding is included in the budget for FY 23-24, which was approved at the June 8, 2023, Board of Commissioners meeting.	N/A: Procurement is not required according to the Procurement Policy because the Contractor was named in First 5 LA's application for the Home Visiting Regional Technical Assistance for Home Visiting Coordination and Integration Project.	1 year, 9 months	\$834,026	\$313,797	10/1/2023	06/30/2024	6/30/2025 131

Memo

To: Board of Commissioners

From: Raoul Ortega, Director of Finance

Date: September 14, 2023

Copies To: Karla Pleitéz Howell, Executive Director
JR Nino, Chief Operating Officer

Subject: **INVESTMENT PORTFOLIO REPORT –
QUARTER ENDED JUNE 30, 2023**

RECOMMENDATION:

Receive and file the Investment Portfolio report as of June 30, 2023.

BACKGROUND:

First 5 LA has the ability to invest outside the Los Angeles County's Treasurer Surplus Investment Pool in Specifically Invested Portfolio per the adopted investment policy. A report on all investments including the Specifically Invested Portfolio must be presented to the Board quarterly.

During November 2022, First 5 LA, with approval from the Executive Committee, transferred \$134 million from the County's Treasurer Surplus Investment Pool to a 3-year Specific Investment. This investment has a 3.80% rate of return and an annualized estimated amount of \$5.4 million in interest over a 3-year period. This investment is reflected in our balance sheet effective November 2022.

DISCUSSION:

The earnings rate for the Treasurer Pooled Surplus Investment Portfolio for the month of June 2023 was 3.82% with an annualized rate from July 2022 to June 2023 of 2.89%. As of June 2023, First 5 LA had \$166.4 million invested in the Treasurer Pooled Surplus Investment.

The 3-Year Specific Investment has been earning approximately \$581,000 in monthly interest and a year-to-date interest totaling \$3.5 million from January through May 2023. As of the June 2023 report from the Treasurer's office, this investment had a market value of \$132.7 million.

COMMISSIONERS

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Chair

Brandon Nichols
Vice Chair

Judy Abdo
Robert Byrd, Psy.D.
Astrid Heger, M.D.
Yvette Martinez

Summer McBride
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M.P.H., M.Ed.
Jacquelyn McCroskey, DSW
Deanne Tilton

EXECUTIVE DIRECTOR

Karla Pleitéz Howell

EXECUTIVE VICE PRESIDENT

John A. Wagner

PUBLIC ENTITY



KEITH KNOX
TREASURER AND TAX COLLECTOR

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 462, Los Angeles, California 90012
Telephone: (213) 974-3385 Fax: (213) 626-1701
ttc.lacounty.gov and propertytax.lacounty.gov

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Third District
JANICE HAHN
Fourth District
KATHRYN BARGER
Fifth District

July 11, 2023

Raoul Ortega, Director of Finance
First 5 LA
750 N. Alameda St., Suite 300
Los Angeles, CA 90012

Email: ROrtega@first5la.org

Dear Raoul Ortega:

FIRST 5 LA MONTHLY INVESTMENT REPORTS

Enclosed are the First 5 LA Portfolio Income Report (Earnings Report), Custom Position Report and Purchase Detail Report for the month ended June 30, 2023, for your review and reference.

Should you have questions, you may contact Ms. Marivic Liwag, Assistant Operations Chief, of my staff at (213) 584-1252, or mliwag@ttc.lacounty.gov.

Very truly yours,

KEITH KNOX
Treasurer and Tax Collector



Jennifer Koai
Operations Chief

JK:ML:mp

Enclosures

Income Report - FIRST5LA

06/01/2023 - 06/30/2023

Specific Purpose Invest Agg (299402)

Dated: 07/01/2023

SPI

Original Lot ID	Detailed Description	CUSIP	Coupon Rate	PAR Value	Interest/Dividend Received	Accretion Income	Amortization Expense	Interest Income	Net Gain/Loss	Net Income
932316983	FHLBANKS 5.200 11/03/25 '23	3130ATS81	5.200	34,000,000.00	0.00	0.00	0.00	147,333.33	0.00	147,333.33
932316984	FHLBANKS 5.200 11/03/25 '23	3130ATS81	5.200	50,000,000.00	0.00	0.00	0.00	216,666.67	0.00	216,666.67
941898663	FREDDIE MAC 5.210 11/14/25 '23 MTN	3134GX6S8	5.210	50,000,000.00	0.00	0.00	0.00	217,083.33	0.00	217,083.33
---	---	---	5.204	134,000,000.00	0.00	0.00	0.00	581,083.33	0.00	581,083.33

* Grouped by: Aggregate Accounts. * Groups Sorted by: Aggregate Accounts. * Filtered By: LA Fund Number = "FIRST5LA". * Weighted by: Ending Market Value + Accrued. * Holdings Displayed by: Lots without MMF Collapse



Custom Position Report - FIRST5LA

As of 06/30/2023

Specific Purpose Invest Agg (299402)

Dated: 07/01/2023

SPI

Original Lot ID	Detailed Description	CUSIP	Coupon Rate	Final Maturity	Purchase Yield	PAR Value	Amortized Cost	Historical Cost	Net Accumulated Amortization/Accretion
932316984	FHLBANKS 5.200 11/03/25 '23	3130ATS81	5.200	11/03/2025	5.200	50,000,000.00	50,000,000.00	50,000,000.00	0.00
932316983	FHLBANKS 5.200 11/03/25 '23	3130ATS81	5.200	11/03/2025	5.200	34,000,000.00	34,000,000.00	34,000,000.00	0.00
941898663	FREDDIE MAC 5.210 11/14/25 '23 MTN	3134GX6S8	5.210	11/14/2025	5.210	50,000,000.00	50,000,000.00	50,000,000.00	0.00
---	---	---	5.204	11/07/2025	5.204	134,000,000.00	134,000,000.00	134,000,000.00	0.00

* Grouped by: Aggregate Accounts * Groups Sorted by: Aggregate Accounts * Filtered By: LA Fund Number = "FIRST5LA" * Weighted by: PAR Value * Holdings Displayed by: Lots without MMF Collapse.



Purchase Detail Report - First5LA

06/01/2023 - 06/30/2023

Specific Purpose Invest Agg (299402)

Dated: 07/01/2023

LA Fund Number	Original Lot ID	Description	Settle Date	Final Maturity	Coupon Rate	PAR Value	Principal	Purchased Accrued Income	Settlement Amount
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* Grouped by: Aggregate Accounts. * Groups Sorted by: Aggregate Accounts. * Filtered By: Settle Date ≥ 06/01/2023 and Settle Date ≤ 06/30/2023 and LA Fund Number = "FIRST5LA". * Weighted by: Ending Market Value + Accrued. * Holdings Displayed by: Lot.
* Purchased Accrued Income = -(Purchased Accrued Income), Summary Calculation: Sum. * Settlement Amount = (Ending Original Cost)+(Purchased Accrued Income), Summary Calculation: Sum.

LOS ANGELES COUNTY TREASURER
TREASURER PORTFOLIO COMPARED TO MARKET VALUE
FOR THE PERIOD: JUNE 1, 2023 TO JUNE 30, 2023
FUND: SPECIFIC PURPOSE INVESTMENTS
ATTACHMENT X

Security ID	CUSIP	Description	Maturity Date	Face Rate	PAR	Amortized Cost	Historical Cost	Market Value
AVCCD-ANTELOPE VALLEY CCD								
821801195 3130AJTQ2		FEDERAL HOME LOAN BANKS	07/27/2040	2.030	25,230,000.00	25,230,000.00	25,230,000.00	16,346,264.70
942605463 3130ATWDS		FEDERAL HOME LOAN BANKS	11/15/2023	4.625	1,200,000.00	1,200,000.00	1,200,000.00	1,195,195.00
FHLB TOTAL					26,430,000.00	26,430,000.00	26,430,000.00	17,542,460.70
AVCCD TOTAL					26,430,000.00	26,430,000.00	26,430,000.00	17,542,460.70
EL SEGUNDO UNIFIED SCHOOL DIST.								
821801197 3133EH4Z3		FEDERAL FARM CREDIT BANKS FUNDING CORP	12/27/2039	3.250	9,000,000.00	9,000,000.00	9,000,000.00	7,705,440.00
821801199 3133EH5A7		FEDERAL FARM CREDIT BANKS FUNDING CORP	12/26/2041	3.270	7,000,000.00	7,000,000.00	7,000,000.00	5,705,980.00
FFCB TOTAL					16,000,000.00	16,000,000.00	16,000,000.00	13,411,420.00
ESUSD TOTAL					16,000,000.00	16,000,000.00	16,000,000.00	13,411,420.00
FIRST6LA								
932316984 3130AT5B1		FEDERAL HOME LOAN BANKS	11/03/2025	5.200	50,000,000.00	50,000,000.00	50,000,000.00	49,553,500.00
932316983 3130AT5B1		FEDERAL HOME LOAN BANKS	11/03/2025	5.200	34,000,000.00	34,000,000.00	34,000,000.00	33,696,380.00
FHLB TOTAL					84,000,000.00	84,000,000.00	84,000,000.00	83,249,880.00
941898653 3134GX5S8		FEDERAL HOME LOAN MORTGAGE CORP	11/14/2025	5.210	50,000,000.00	50,000,000.00	50,000,000.00	49,410,000.00
FHLMC TOTAL					50,000,000.00	50,000,000.00	50,000,000.00	49,410,000.00
FIRST6LA TOTAL					134,000,000.00	134,000,000.00	134,000,000.00	132,659,880.00
GF-GENERAL FUND								
821801197 3527RPLVAC		RPV TAX ALLOCATION BOND 1997	12/02/2027	5.000	2,475,000.00	2,475,000.00	2,475,000.00	2,475,000.00
LONG TERM BDS TOTAL					2,475,000.00	2,475,000.00	2,475,000.00	2,475,000.00
GF TOTAL					2,475,000.00	2,475,000.00	2,475,000.00	2,475,000.00
PHHPA-PH HABITAT PRESERVATION AU								
821801198 3133EMW65		FEDERAL FARM CREDIT BANKS FUNDING CORP	07/29/2041	2.500	22,675,000.00	22,675,000.00	22,675,000.00	15,948,234.60
FFCB TOTAL					22,675,000.00	22,675,000.00	22,675,000.00	15,948,234.60
1038232492 313384PG8		FEDERAL HOME LOAN BANKS	11/15/2023	5.000	4,000,000.00	3,923,888.89	3,900,000.00	3,825,240.00
FHLB TOTAL					4,000,000.00	3,923,888.89	3,900,000.00	3,925,240.00
821801196 3134GWSD9		FEDERAL HOME LOAN MORTGAGE CORP	08/27/2043	2.000	9,500,000.00	9,500,000.00	9,500,000.00	5,813,240.00
FHLMC TOTAL					9,500,000.00	9,500,000.00	9,500,000.00	5,813,240.00
PHHPA TOTAL					36,175,000.00	36,098,888.89	36,075,000.00	25,686,714.50
SCP61 - SCAQMD - GENERAL FUND								
951495021 3133EN3M0		FEDERAL FARM CREDIT BANKS FUNDING CORP	12/05/2024	4.625	10,000,000.00	10,013,021.34	10,018,200.00	9,898,400.00
FFCB TOTAL					10,000,000.00	10,013,021.34	10,018,200.00	9,898,400.00
821692789 91282CEA5		UNITED STATES TREASURY	02/29/2024	1.500	10,000,000.00	9,985,172.59	9,956,250.00	9,744,100.00
UST NOTES TOTAL					10,000,000.00	9,985,172.59	9,956,250.00	9,744,100.00
SCP61 - SCAQMD TOTAL					20,000,000.00	19,998,193.93	19,974,450.00	19,642,500.00
SCP6G - SCAQMD - INVESTMENT								
821692793 91282CEA5		UNITED STATES TREASURY	02/29/2024	1.500	10,000,000.00	9,985,172.59	9,956,250.00	9,744,100.00
UST NOTES TOTAL					10,000,000.00	9,985,172.59	9,956,250.00	9,744,100.00
SCP6G - SCAQMD TOTAL					10,000,000.00	9,985,172.59	9,956,250.00	9,744,100.00
SCP9A - SCAQMD - FD 66 SPECIAL REVENUE FUND								
821692784 91282CEA5		UNITED STATES TREASURY	02/29/2024	1.500	20,000,000.00	19,970,345.19	19,912,500.00	19,488,200.00
UST NOTES TOTAL					20,000,000.00	19,970,345.19	19,912,500.00	19,488,200.00
SCP9A - SCAQMD TOTAL					20,000,000.00	19,970,345.19	19,912,500.00	19,488,200.00
SCAQMD-SOUTH COAST AIR QUALITY MF								
841762248 SOFCLAIFMMF	S OF C LAIF		12/31/2023		29,197.19	29,197.19	29,197.19	29,197.19
888240822 SOFCLAIFMMF	S OF C LAIF		12/31/2023		69,421.99	69,421.99	69,421.99	69,421.99
1019883116 SOFCLAIFMMF	S OF C LAIF		12/31/2023		252,547.20	252,547.20	252,547.20	252,547.20
821801181 SOFCLAIFMMF	S OF C LAIF		12/31/2023		37,051,054.03	37,051,054.03	37,051,054.03	37,051,054.03
928828368 SOFCLAIFMMF	S OF C LAIF		12/31/2023		126,406.68	126,406.68	126,406.68	126,406.68
974008792 SOFCLAIFMMF	S OF C LAIF		12/31/2023		194,729.00	194,729.00	194,729.00	194,729.00
MMFUND TOTAL					37,723,356.09	37,723,356.09	37,723,356.09	37,723,356.09
SCAQMD TOTAL					37,723,356.09	37,723,356.09	37,723,356.09	37,723,356.09
SLJM-SCHOOLS LINKED INSURANCE MG								
974008832 SOFCLAIFMMF	S OF C LAIF		12/31/2023		18,037.42	18,037.42	18,037.42	18,037.42
928828246 SOFCLAIFMMF	S OF C LAIF		12/31/2023		11,708.84	11,708.84	11,708.84	11,708.84
888240866 SOFCLAIFMMF	S OF C LAIF		12/31/2023		6,430.44	6,430.44	6,430.44	6,430.44
858252079 SOFCLAIFMMF	S OF C LAIF		12/31/2023		2,704.49	2,704.49	2,704.49	2,704.49
1019882651 SOFCLAIFMMF	S OF C LAIF		12/31/2023		23,393.02	23,393.02	23,393.02	23,393.02
821801178 SOFCLAIFMMF	S OF C LAIF		12/31/2023		3,431,976.40	3,431,976.40	3,431,976.40	3,431,976.40
MMFUND TOTAL					3,494,260.61	3,494,260.61	3,494,260.61	3,494,260.61
SLJM TOTAL					3,494,260.61	3,494,260.61	3,494,260.61	3,494,260.61
WASIA-WHITTIER AREA SCHOOLS INS								
821801182 SOFCLAIFMMF	S OF C LAIF		12/31/2023		41,459.88	41,459.88	41,459.88	41,459.88
888240807 SOFCLAIFMMF	S OF C LAIF		12/31/2023		77.68	77.68	77.68	77.68
928828020 SOFCLAIFMMF	S OF C LAIF		12/31/2023		141.45	141.45	141.45	141.45
841763124 SOFCLAIFMMF	S OF C LAIF		12/31/2023		32.67	32.67	32.67	32.67
974008805 SOFCLAIFMMF	S OF C LAIF		12/31/2023		217.90	217.90	217.90	217.90
1019883193 SOFCLAIFMMF	S OF C LAIF		12/31/2023		282.60	282.60	282.60	282.60
MMFUND TOTAL					42,212.18	42,212.18	42,212.18	42,212.18
WASIA TOTAL					42,212.18	42,212.18	42,212.18	42,212.18
GRAND TOTAL					305,339,818.88	305,217,419.48	305,083,018.88	281,910,094.08

Memo

To: Board of Commissioners

From: Karla Pleitéz Howell, Executive Director

Date: September 14, 2023

Subject: **EXECUTIVE DIRECTOR'S REPORT**

I. EXECUTIVE DIRECTOR'S HIGHLIGHTS

Welcome back from summer hiatus to Commissioners, First 5 LA colleagues and community members. I'd like to take a moment to reflect on the events that have occurred since we last convened as a commission.

As Angelenos, we braved unprecedented heatwaves, came together as a community in sadness as we witnessed the heartbreaking devastation and life-altering impact caused by the fires on Maui, and locally, Southern California weathered its first tropical storm since 1939, leaving in its wake flooding and mudslides. These and other environmental events have raised questions about global climate change and its impact on young children. Research shows that in the face of climate change, focusing on our youngest children and families, and leveraging the transformational power of policies and programs that focus on the early years of a child's life, are important avenues for ensuring an equitable, sustainable future for all.

Our work to ensure every child in L.A. County reaches their full developmental potential continues to be urgent. First 5 LA remains steadfast throughout our Strategic Plan process, making significant progress in sharpening our focus on the critical priorities and needs of L.A. County's young children and their families.

Since we last convened in July, our work has not slowed down. Earlier this summer, the California State Budget for FY 23-24 was finalized by the legislature and Governor Newsom which provides critical support for several First 5 LA early childhood priorities including rate increases for the early learning workforce, CalWORKS grant increases for families, and increases in Medi-Cal provider rates (see Item 5, Attachment A, State Budget Summary).

During the summer, the First 5 LA team made considerable progress toward our Strategic Plan. Grounded in the results-based accountability framework (RBA) and informed by our discussion during the July Board of Commissioners meeting on the analysis of First 5 LA's strengths, weakness opportunities and threats (SWOT), today we will present draft goals, objectives and strategies.

The Board of Commissioners will also receive initial recommendations on a sustainability framework. The purpose of the sustainability framework is to ensure both First 5 LA as an organization and our work for children and families can achieve long-lasting impact, stability, and

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flexibility by maximizing our fiscal and physical assets, developing a diversified funding environment, and exploring alternative revenue strategies.

In September, we look forward to engaging with the Board of Commissioners and other partners in convenings that will create the space to receive community input and feedback to help further inform our Strategic Plan. These and future engagement sessions afford us the opportunities to listen and learn to strengthen our approaches to ongoing community engagement.

I look forward to today's discussion on the proposed strategic plan goals, objectives and strategies, the upcoming community engagement opportunities to help inform our future work and continue to be energized by the dedication of the First 5 LA team focused on creating meaningful change for Los Angeles County's youngest children and their families.

II. UPDATES FROM THE TEAM – WHAT HAS FIRST 5 LA BEEN UP TO?

IMPACT Legacy funding from First 5 California awarded to support Quality Start Los Angeles (QSLA)

In June 2023, First 5 California's IMPACT Legacy funding, which supports the work of providing various quality improvement services across different early care and education settings, was sunset. First 5 LA worked with our Quality Start Los Angeles (QSLA) partners on submitting a funding application for First 5 California's next round of funding, IMPACT Legacy. Through IMPACT Legacy, First 5 LA was awarded a two-year grant in the amount of \$6,301,179 grant to continue implementation of QSLA programs and services to early learning and care providers, as well as to support quality improvement initiatives that have not been identified and will be informed by First 5 LA's Strategic Plan reset.

California Early Care and Education (ECE) Workforce Registry Continued Funding Update

Since 2013, First 5 LA has invested in the California Early Care and Education (ECE) Workforce Registry (Registry), which is managed and operated by the Child Care Alliance of Los Angeles (CCALA), and generates, maintains and disseminates data and information on the professional development, educational accomplishments, and employment of the ECE workforce in California. While First 5 LA's investment in the Registry sunset June 2023, First 5 CA has committed to continuing to fund the Registry for the next two years, through June 2025.

AAIMM Completes Strategic and Structural Planning Process

In June 2023, African American Infant and Maternal Mortality Prevention Initiative (AAIMM) marked an important milestone through the completion of a year-long planning process resulting in a 3-year strategic framework and structural plan. Through the articulation of 5 strategic priorities and goals, the plan reflects continued focus on centering equity and community engagement while increasing emphasis on data, sustainability, and expansion to drive AAIMM's future to ensure the transformative change it envisions as it evolves into a more fully formed, intentional and unified multisectoral collaborative. First 5 LA is a part of the AAIMM network established in 2018 to reduce the unacceptably high rates of Black infant and maternal mortality in LA County and participated in the planning process while also co-funding the effort with Los Angeles County Department of Public Health.

"Two Languages, Twice the Opportunities," Dual Language Learning L.A. County Public Education Campaign

More than 100,000,000 Los Angeles County residents recently received the message that helping young children learn and speak more than one language can help them now and in the future. The 3-month "Two Languages, Twice the Opportunities," public education campaign, concluded in August, and was the result of a collaborative effort between the Office of Communication, the Early Care and Education Team, and external partners Quality Start Los Angeles, L.A. County Office of

Education, UNITE LA and Early Edge California. Campaign messages and materials were translated in English, Spanish and Chinese, shared through social marketing strategies, and distributed to parents and caregivers by child care providers, home visitors and library partners. Although the campaign has concluded, First 5 LA and partners are exploring additional opportunities to scale campaign elements, potentially statewide. For more on the campaign, visit: <https://www.first5la.org/article/campaign-launch-encourages-dual-language-learning-across-l-a-county/>

Reflecting the Diversity of L.A. County's Children and Families, First 5 LA Photoshoots

The Office of Communications is building the organization's library of photographs to ensure that photos reflect the diverse L.A. County communities we serve, highlighting families with children 5 years of age and younger. Photos will be used on our website, social media and for various communications materials. The team has been and will continue throughout the year working with partners and providers to coordinate photoshoots with families in caregiving and health care settings, including Welcome Baby/Home Visitation parent coaches at T.H.E. Health Center and most recently at St. Francis Medical Center.

Amplifying Priorities for Children and Families Through First 5 LA's Early Childhood Matters Newsletter

The Office of Communications produces the monthly "Early Childhood Matters" newsletter, reaching 7,000 subscribers who are stakeholders, partners, policy and decision-makers from across the state. The summer issues in July and August, highlighted First 5 LA's policy and advocacy efforts to ensure the needs of children and their families were prioritized in the 2023-24 state budget, and amplified key findings, resources, and system-building recommendations from the L.A. County Home-Based Child Care Landscape Analysis to help inform strategies to create a more equitable ECE system. Links to each edition are included below. <https://mailchi.mp/10b741a2fac4/july-2023-ecm-2486272> <https://mailchi.mp/836a80af843b/august-2023-ecm-2486276>

The Hub Makes Childcare More Accessible in Long Beach

On August 28th, the Mayor's Fund for Education, a key Best Start network partner, launched The Long Beach Early Learning Hub (The Hub). The Hub is a one-stop-shop for families to connect to quality and affordable childcare and tuition assistance through a streamlined search feature, a universal application, and centralized enrollment system. Additionally, in Spring 2024, The Hub will partner with the Long Beach business community so employers can easily pay for employees childcare. First 5 LA has supported the Mayor's Fund since 2020 to strengthen partnerships between ECE and the business community, cultivating early childhood advocates among the business community. The Hub is a project of the Mayor's Fund for Education and is being developed in partnership with the Long Beach Unified School District and the Long Beach ECE Committee. The development was made possible by a \$900,000 investment by the City of Long Beach, as well as other funders.

Advancing First 5 LA's Policy Priorities and Building Relationships with Policymakers

The California State Budget for FY 23-24 was finalized by the legislature and the Governor which included several First 5 LA early childhood priorities including rate increases for the early learning workforce, CalWORKS grant increases for families, and increases in Medi-Cal provider rates (see Item 5, Attachment A, State Budget Summary). In addition, First 5 LA continued state advocacy efforts for policy priorities aligned with the Board-approved policy agenda, leading up to the legislative deadline (September 14) for bills to be passed and submitted to the Governor for review (see here, list of 2023 First 5 LA support positions <https://www.first5la.org/policy-agenda/first-5-advocacy-agenda-2023/>). The Community Opportunities Flexible Fund (COFF), a second pool of funding within the Early Childhood Policy Advocacy Fund (ECPAF), has received 14 applications and are currently being assessed by the contract intermediary, Community Partners. The COFF will distribute over \$2 million across multiple years in amounts of \$2,500 to \$85,000 for activities connected to changing systems that affect children prenatal to 5 and their families.

Centinela Hospital Labor-Delivery Unit Closure and Welcome Baby Impact

Centinela Hospital, a long-time Welcome Baby grantee, announced closure of its labor and delivery services in late October 2023. First 5 LA staff has worked with Centinela and its subcontractor, Shields for Families, to ensure continuity of Welcome Baby services for currently enrolled families through the fiscal year. Staff continue to engage in conversations with other Welcome Baby grantees, including Martin Luther King Jr. Community Hospital, to assess options and explore the regional impact.

III. CONTRACTS EXECUTED LEVERAGING EXECUTIVE DIRECTOR DELEGATION AUTHORITY

Pursuant to the Procurement Policy adopted on September 9, 2021, "The Executive Director (or designee) may approve any contract or amendment up to and including \$150,000 in the aggregate and will establish appropriate internal policies and controls for those awards. Contracts that are executed under the Executive Director (or designee) between \$10,000-\$150,000 will be presented as information at the next Board of Commissioners meeting."

The following agreements and amendments were executed between June 8, 2023, and August 15, 2023, by Executive Director Karla Pleitéz Howell and her designees.

#10387 Chrissie M. Castro & Associates, Inc. – Contract Amount: \$50,000

Contract Period: 6/19/2023 – 12/30/2023

The Contractor will support First 5 LA in 1) designing a process for the organizational restructure and providing project management support, 2) advising First 5 LA on the design and implementation of an organizational restructure and the corresponding staff roles and capabilities needed to support implementation, and 3) an approach to accountability that supports the new structure.

#10394 Laura Valles & Associates, Inc. – Contract Amount: \$100,000

Contract Period: 7/1/2023 – 6/30/2024

The Contractor will primarily serve to design, support, and facilitate the regular convening of the Early Care and Education ("ECE") Team's Provider Advisory Groups. The current Provider Advisory Group ("PAG") consists of the ECE Advisory Committee, a body of 10 family childcare owners, who serve as consistent thought partners for the ECE Team in the development of a Home-Based Child Care ("HBCC") strategy and in the sense-making of the HBCC landscape analysis data. The Contractor will be responsible for expanding the PAG to include a Family, Friend, and Neighbor branch. The Contractor will also provide guidance for the ECE team in effectively incorporating the two provider groups' feedback into programmatic strategy development in order to strengthen the home-based childcare landscape in LA County.

#10386 Crown Facility Solutions – Contract Amount: \$129,332

Contract Period: 7/1/2023 – 6/30/2024

The Contractor will perform janitorial services for the First 5 LA office building located on the Union Station campus in downtown Los Angeles at 750 N. Alameda Street, 90012.

#10385 American Global Security, Inc. – Contract Amount: \$96,330

Contract Period: 7/1/2023 – 6/30/2024

The Contractor will provide uniformed security guards to promote the safety of First 5 LA's personnel and property at 750 N. Alameda Street, Los Angeles, CA 90012, including the adjacent surface parking lot.

#10393 Spitfire Strategies, LLC – Contract Amount: \$85,000

Contract Period: 7/3/2023 – 12/20/2023

The Contractor will provide communications consultation and work closely with the Office of Communications to design a communications strategy to support the components of First 5 LA's

Strategic Plan Reset. Focused areas of work include: developing the organization's role and voice, drafting the final plan along with supplemental materials, crafting messaging to support organizational restructuring, providing consultation on mission, vision, and values statements, and collaborating with other Strategic Plan Reset consultants.

#10395 Westside Infant-Family Network – Contract Amount: \$40,000

Contract Period: 7/14/2023 – 12/31/2023

The Contractor will conduct listening sessions to learn from African American families who have utilized or attempted to utilize early identification and intervention (EII) services in Los Angeles County in order to better understand the unique experiences of Black/African American families in accessing and utilizing these services. The Contractor will collaborate with the Help Me Grow LA ("HMG LA") Equity Workgroup to develop a project plan and outreach materials, recruit parent/caregiver participants, hold 2-3 listening sessions with 30+ participants total, draft a summary report, share findings, and participate in strategy development discussions as appropriate. Findings will be used to inform (a) the First 5 LA strategic plan reset, and (b) development of a Help Me Grow LA equity strategy intended to better serve Black/African American families and to reduce systemic inequities.

#00813 El Nido Family Centers – Amendment Amount: \$117,149

Amendment Period: 07/1/2023- 06/30/2024

This amendment adds additional funds in the amount of \$117,149 for a total contract amount of \$1,403,876 to allow the Grantee to support the inclusion of licensed clinicians, equipment, and support for expanded outreach, mental health support and referral pathways within the Select Home Visitation program specific to the Prevention and Aftercare Networks with funding received from the Los Angeles County Department of Mental Health under the Department of Mental Health Prevention and Early Intervention.

#00815 Antelope Valley Partners for Health – Amendment Amount: \$122,200

Amendment Period: 07/1/2023- 06/30/2024

This amendment adds additional funds in the amount of \$122,200 for a total contract amount of \$1,669,556 to allow the Grantee to support the inclusion of licensed clinicians, equipment, and support for expanded outreach, mental health support and referral pathways within the Select Home Visitation program specific to the Prevention and Aftercare Networks with funding received from the Los Angeles County Department of Mental Health under the Department of Mental Health Prevention and Early Intervention.

#00822 Child and Family Guidance Center – Amendment Amount: \$113,819

Amendment Period: 07/1/2023- 06/30/2024

This amendment adds additional funds in the amount of \$113,819 for a total contract amount of \$725,850 to allow the Grantee to support the inclusion of licensed clinicians, equipment, and support for expanded outreach, mental health support and referral pathways within the Select Home Visitation program specific to the Prevention and Aftercare Networks with funding received from the Los Angeles County Department of Mental Health under the Department of Mental Health Prevention and Early Intervention.

#10250 Children's Bureau of Southern California – Amendment Amount: \$11,080

Amendment Period: 07/01/2022 – 12/31/2023

This amendment adds additional funds in the amount of \$11,080 for a total contract amount of \$281,078 to cover additional funding and support for collaborative agencies (subcontractors) supporting the Grantee for the Help Me Grow LA ("HMG LA") Pathways program to purchase and administer incentives for parent feedback surveys.

IV. RECENT AND UPCOMING EVENTS SPONSORED BY FIRST 5 LA

Name: Long Beach Mayor's Fund for Education: 6th Anniversary

Date: August 24, 2023

Amount: \$5,000

Best Start Region 4 colleagues attended this celebration commemorating the Mayor's Fund accomplishments, including First 5 LA's business sector engagement effort and the ECE network development.

Name: Special Needs Network's 18th Annual Back2School Community Health and Resource Fair

Date: August 26, 2023

Amount: \$1,000

First 5 LA invited regional network grantee, Rising Communities, to attend this event that served young children and families with free health and dental screenings, resources, and supplies.

Name: California Black Birth Equity Coalition Summit

Date: August 28 – 29, 2023

Amount: \$10,000

The Health Systems team co-sponsored this event with the LA County Department of Public Health and worked closely with the AAIMM steering committee to provide complimentary registrations to community members, including nine AAIMM community partners, and three WIC/CinnaMoms.

Memo

To: First 5 LA Leadership Team

From: Office of Government Affairs and Public Policy (OGAPP)

Date: July 18, 2023

Subject: **2023-2024 STATE BUDGET AGREEMENT**

Overview

On July 10, 2023, Governor Newsom signed the 2023-2024 California state budget into law, projecting a \$310.8 billion spending plan and utilizing \$226 billion in state General Funds. The finalized budget also features \$31.5 billion in total deficits and retains \$37.8 billion in reserves. As they have communicated through this year, both the Legislature and administration continued to emphasize “protecting the state’s core ongoing programs in education, health care, the human services safety net,” etc., as the state’s key overarching goal. Still, to balance the budget, spending reductions were made across a variety of policy areas, including funding for climate projects and K through 12 education, while the renewal of the Managed Care Organization (MCO) tax and leveraging cap-and-trade funds enabled investments in health care and public transit respectively, to be upheld.

Notably, the final budget included provisions that were central in First 5 LA’s advocacy priorities this year including investments in early childhood education reforms, strengthening the social safety net through improvements to the CalWORKs program, and identifying new revenue sources to continue expanding and improving Medi-Cal, the state’s Medicaid program.

Media reactions

Media coverage of the final budget, as with the May Revise, highlighted the \$32 billion deficit, noting that the budget constitutes the second largest spending package in California’s history. Coverage also noted that despite the deficit, state reserves remain intact, pointing to the anticipated revenue resulting from the renewal of the Managed Care Organization (MCO) tax. The MCO tax was highlighted across most articles and the intention to use these funds for increasing Medi-Cal provider reimbursement rates and bolstering hospitals at risk of failing. Several articles highlighted the elimination of family fees for state-subsidized child care, and the funding allocated towards raising reimbursement rates for child care providers.

Other discrete policy areas that were addressed included the preservation of funding for public transit agencies, funding for revitalizing San Quentin Prison, reductions to climate change program funding, and the Governor’s stymied attempt to expedite the Delta Tunnel infrastructure project. One article critiqued the diversion of Mental Health Services Act money from children’s mental health services and screenings towards housing homeless individuals experiencing mental illness and substance use disorders.

Partner reactions

Advocacy partners primarily reacted positively to the final budget, commending Governor Newsom for the inclusion of family fee reform for early learning child care and preschool services within the budget as well as progress towards provider child care provider rate reform. Advocacy

partners also highlighted the use of MCO funds to support Medi-Cal beneficiaries. One advocacy partner expressed dissatisfaction that the trigger for continuous Medi-Cal coverage for kids 0-5 remained, while also applauding the governor's approach to the economic downturn, contrasting it with the "devastating cuts" that followed the Great Recession.

Legislative reactions

The general tenor of legislative reactions has upheld the message of "protecting progress" while recognizing the challenging fiscal reality faced by California. Outgoing Senate President pro Tempore Toni G. Atkins highlighted the efforts to avoid cutting core programs. The Legislative Women's Caucus elevated the efforts of members and advocacy partners in securing early learning fee reform within the budget agreement and progress towards child care provider rate reform. Likewise, outgoing Speaker Anthony Rendon also emphasized these achievements, commending colleagues for achieving these measures while preserving budget reserves.

For a more complete list of media, partner and legislative reactions to the May Revise, including links to full articles and statements, see [here](#).

First 5 LA advocacy priorities

Early learning rate reform: Child care emerged as a key priority for the Legislature and was an important point of negotiation between the administration and lawmakers. Ultimately, the budget agreement provides up to \$2.83 billion in one-time funds for child care reimbursement rates and expressed the continued work to move California to a single rate reimbursement structure using an alternative methodology. The budget agreement also includes family fees reform and reduces child care and preschool family fees to 1 percent of total family monthly income for families making at least 75 percent of the state median income and removing fees altogether for those earning less. This new fee schedule would begin October 1, 2023. Rate reform was the most important First 5 LA advocacy priority throughout 2023.

Child care spaces: Releasing on time the expanded child care spaces that were committed in 2021-22 was a priority of First 5 LA as part of the ECE Coalition. The governor's initial budget proposal at the beginning of the year implicated that due to low enrollment, he would be delaying 20,000 spaces to 2024-25. Despite advocacy from early learning providers, advocates, and other stakeholders, the delay will move forward as planned, saving the state about \$136 million in General Funds.

CalWORKs grants: Among other key First 5 LA advocacy priorities, the approved state budget increases CalWORKs cash grants families receive through that program. Specifically, the budget provides \$500 million in on-going funds, starting in 2024-2025, to permanently increase grants by 10 percent. This temporary increase was subject to a budget "trigger" included in the 2022 California state budget, and action now ensures the Maximum Aid Payment through CalWORKs will not expire on September 30, 2024, as would have otherwise occurred. Furthermore, the budget provides an additional \$111.2 million in 2023-2024 to increase the maximum level of CalWORKs aid payments by 3.6 percent. Together, these efforts intend to support ensuring no family served by the CalWORKs program lives in deep poverty. This issue has been a priority of the Legislature since First 5 LA Board Chair, Supervisor Holly Mitchell began championing the issue as a member of the state Senate.

Continuous Medi-Cal eligibility: Not included in the final budget agreement was continuous Medi-Cal eligibility for young children. First 5 LA advocated to the Legislature for inclusion of this policy, and lawmakers in fact did feature it in their version of the budget. Following negotiation with the Governor, however, continuous eligibility is not funded in this budget. The “trigger” featured in last year’s state budget requires a decision on funding for continuous Medi-Cal eligibility for young children by September 2024, and this means lawmakers and the administration could still include it in next year’s budget.

Lawmakers and the administration also reached agreement on how to spend new funds from a proposed tax on Medi-Cal managed care organizations (MCO). Pending federal approval, the new MCO tax would be retroactively effective from April 1, 2023, and remain in place through December 31, 2026, bringing in an estimated \$19.4 billion in net benefits to the state. Unlike previous state MCO tax regimes, which sent all revenue to General Fund accounts, the current tax plan will provide money to specific health related accounts. For example, \$1.65 billion annually and a total of \$11.1 billion over the next decade will be allocated to the Medi-Cal Provider Payment Reserve Fund to provide rate increases to 87.5% of Medicare levels for primary care physicals; obstetricians and doulas; and non-specialty mental health care providers, starting on January 1, 2024. Local Medi-Cal health plan partners have regularly indicated to First 5 LA that rate increase for providers is a important priority. An additional \$8.3 billion raises will flow to the General Fund to support balancing the state’s budget in light of the \$31.5 billion deficit.

Overall, the final 2023-2024 state budget includes funding for the following First 5 LA priorities:

Expand access to affordable, quality early care and education.

The state budget includes:

- A set aside of \$2.8 billion (General Fund and Prop 98) from fiscal year (FY) 2022-23, 2023-24, and 2024-25 for any adjustments related to **reimbursement for child care and preschool providers**. This is subject to a ratified agreement between Child Care Providers United and the Administration.
- Investments to **continue waiving family fees**, including \$29.4 million for child care services and \$9.7 million (non-Proposition 98 and Proposition 98 General Fund) reallocated from the 2022 Budget Act for state preschool programs through September 2023.
- \$56 million to **reform the state’s family fee schedule** for early learning services, which, beginning October 1, 2023, will cap fees at 1 percent of a family’s total monthly income and no longer require fees for those earning less than 75 percent of the state’s median income (SMI). The Budget also dissolves any debt accrued from state preschool programs prior to October 1, 2023.
- \$112 million in available federal funds to go towards **temporary stipends for State Preschool Program employees**.
- \$22 million in General Fund to **extend “hold harmless”** from July 1, 2023, to September 30, 2023. This allows early learning providers to continue reimbursement based on enrollment rather than attendance.
- Intent language permitting the State Department of Social Services (DSS) in collaboration with the State Department of Education (CDE) to develop and conduct **an alternative methodology to set reimbursement rates for state-subsidized child care and development services**. Data collection and analysis for the development of the alternative methodology will begin July 1, 2023.

- \$357 million on-going Prop 98 for the first year of **implementation of transitional kindergarten** (TK) and \$283 million Prop 98 to support the first year of adding one certified or classified staff person to every TK classroom. Additionally, the budget provides \$597 million in on-going Prop 98 for the second year of TK and \$165 million (Prop 98) for a second year of adding one additional certificated or classified staff. Note, these are all reductions from the original set asides made in the 2022-23 budget due to lower enrollment than projected.
- Continued efforts to ensure that all **state preschool program providers serve at least 10 percent students with disabilities** in their classrooms. The final state budget has delayed this expansion by one fiscal year, so that full implementation will be in FY 2026-2027.

Improve systems to promote the optimal development of children through early identification and supports.

The state budget includes:

- \$1.65 billion annually through 2029 to **increase rates for Medi-Cal providers**, including pediatricians, doulas and obstetricians. This funding derives from a **new tax on Managed Care Organizations (MCO)**.
- \$10 million in one-time General Fund for the Department of Health Care Services (DHCS) **health navigator program**.
- Extends the time period for DHCS's **Doula implementation workgroup** from December 31, 2023 to June 30, 2025, and the deadline for DHCS to publish a report on utilization of doula services from July 1, 2024 to July 1, 2025. This will allow for additional time to support successful adoption and evaluation of the new doula Medi-Cal benefit.
- Modifies and reverts previous proposed delay to 2022 Health Care Workforce Investments; this includes a new appropriation of \$15 million from the General Fund towards **Community Health Workers Initiative Grants**.
- The expansion of provisional eligibility for Lanterman Developmental Disabilities Services Act (Lanterman Act) to **include children from birth through two years of age**, making provisional eligibility inclusive of all children four years of age or under.
- Creates the **Autism Services Branch** within Department of Developmental Services (DDS) and mandates annual reporting by DDS starting April 1, 2024 on usage and unmet needs.
- \$40 million to support the **California Advancing and Innovating Medi-Cal (CalAIM) Providing Access and Transforming Health (PATH)** program, including the Enhanced Care Management and Community Supports Medi-Cal benefit, which was launched for children and youth populations on July 1, 2023.

Promote a comprehensive system of family supports to advance positive outcomes for the whole child and whole family.

The state budget includes:

- \$500 million General Fund to make permanent a 10 percent increase in the **Maximum Aid Payment of grants provided through CalWORKs**. This appropriation fulfills a "trigger" investment made in last year's state budget that called on lawmakers to determine whether to provide resources for increasing the level of cash grants families can receive through the CalWORKs programs. Furthermore, the budget provides \$111.2 million in 2023-2024 to **increase CalWORKs grants by an additional 3.6 percent** effective October 1, 2023.

- The removal of the **Home Visiting Program (HVP) eligibility requirements** which limit the availability of the HVP to pregnant CalWORKs applicants who have not yet reached their second trimester.

Ensure communities have the resources and environment that supports optimal development of children prenatal to age 5.

The state budget includes:

- \$9.4 million in one-time funding to extend the **CalFresh Fruit & Vegetable Pilot** through 2026. This will provide up to \$60 per month in supplemental CalFresh benefits to participants shopping at 90 authorized pilot retailers.
- \$15 million for the **CalFresh Minimum Nutrition Benefit Pilot Program**, to raise monthly minimum food benefits to \$50 from the current minimum of \$23.
- \$1.1 billion for the **Homeless Housing, Assistance and Prevention Act**. Homelessness is a community-identified priority for Best Start Region 2 (Compton/East Compton).
- \$10.5 million of the combined one-time funds appropriated in the Budget Act of 2021 and the Budget Act of 2022 for the purposes of **the CalWORKs Housing Support Program, the Home Safe Program, the Bringing Families Home Program, and the Housing and Disability Income Advocacy Program**.
- The requirement for Medi-Cal providers participating in the **presumptive eligibility program** to report births of any newly eligible newborns to the **Newborn Gateway portal**, within 72 hours after birth or one business day after discharge.
- Maintenance of funding to expand full-scope **Medi-Cal eligibility** to all income-eligible Californians, **regardless of citizenship status**. This funding will ensure all income eligible Californians have access to health care through Medi-Cal.
- \$20 million Mental Health Services Fund to support DHCS implementation activities related to the Administration's **Behavioral Health Modernization** proposal. This includes \$200,000 for a study on **universal mental health screening of children and youth**.

The state budget going forward:

The Office of Government Affairs and Public Policy (OGAPP), in partnership with the Office of Communications (OOC), our state advocates in Sacramento, California Strategies Inc., statewide network of First 5s and other advocacy partners, will continue to monitor additional budget activity and the state's revenues in the Fall. First 5 LA's broad advocacy will focus on ensuring communities and families furthest from opportunities receive the supports that help them thrive.

First 5 LA

SUBJECT:

Strategic Plan: Draft Goals, Objectives, and Sustainability Overview

BACKGROUND:

During the March 2023 Board of Commissioners meeting, Commissioners provided their perspectives and insights to guide staff's review of the current strategic plan to address First 5 LA's fiscal reality and lingering effects of the pandemic on children and families. Subsequently, staff conducted a landscape analysis to understand shifts in the internal and external context in which First 5 LA does its work and presented findings to Board of Commissioners in June 2023. The landscape focused on five areas:

- **Conditions of Young Children and Their Families** to understand the post-pandemic conditions of children and families in LA County, where the most recent data is available.
- **Public Policy Opportunities** with particular emphasis those that have a direct impact on children prenatal to 5 in Los Angeles County that can benefit from F5LA unique vantage point.
- **Analysis of Seven First 5 LA Initiatives** to highlight what we have learned from implementation experience.
- **Analysis of First 5 LA Operations** to glean lessons learned from how we operate as an organization.
- **Insights and Lessons from the Field** to gather learning from other public agencies, philanthropy, nonprofit organizations, and researchers.

The landscape analysis findings persuaded First 5 LA to fundamentally rethink our existing strategic plan, not simply make refinements to it. We hired strategic plan consultants, Chrissie Castro and Associates, including Rigo Rodriguez, to help First 5 LA establish goals, objectives, and strategies. First 5 LA's strategic plan consultants facilitated a discussion during the July 2023 Board of Commissioners meeting to identify major opportunities at the national, state, and local levels that could be leveraged. Since then, staff have continued to review the landscape findings and Commissioner input to draft goals and objectives and develop a framework for sustainability to ensure First 5 LA can achieve long-lasting impact and stability.

DISCUSSION:

The September 2023 Board of Commissioners meeting will focus on two components of First 5 LA's strategic planning.

Proposed Goals, Indicators to inform Objectives and Strategies: Our strategic plan consultants will facilitate board discussion and gather Commissioner input on proposed goal and indicators to inform objectives and strategies. These proposed goals and indicators are based on findings from the landscape analysis, opportunities identified by Commissioners, and staff input from across the organization.

Sustainability Overview: Staff will provide initial thinking on a definition, framework, and strategies for sustainability to maximize First 5 LA's existing resources and generate alternative revenue to achieve our goals for children and families and promote organizational stability.

NEXT STEPS:

Commissioner input on draft goals, indicators to inform objectives and strategies, and sustainability framework will be synthesized to inform further development of the strategic plan. A draft strategic plan will be presented during the October 2023 Board of Commissioners meeting.

First 5 LA Strategic Plan:

GOALS, OBJECTIVES, STRATEGIES

150

First 5 LA Board Meeting
Chrissie M. Castro & Associates
September 14, 2023

PLANNING CALENDAR

JUNE

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

Landscape
Analyses +
Data Review

F5LA Board
SWOT
(7/13)

F5LA Board
No Meeting

F5LA Board
Review - **GO**
(9/14)

F5LA Board
Review - **GOS**
(10/12)

F5LA Board
Approval
(11/9)

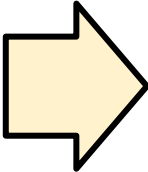
Document
Analysis + Staff
Interviews

INTERNAL ENGAGEMENT: Strategic Reset Team, Senior Leadership Team + Leadership Team
+ All Staff + Workgroups: *Critical Questions*

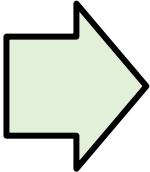
COMMUNITY ENGAGEMENT: Inventory &
Additional Points of Engagement

AGENDA

**BRIEF
RECAP**



**FEEDBACK &
INPUT**



CLOSING:
Reflections &
Next Steps

BRIEF RECAP

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F5LA BOARD OF COMMISSIONERS

SWOT Analysis: Opportunities

July 13, 2023

KEY OPPORTUNITIES

1	Federal and state resources with flexible funding for prevention that go beyond what is allowable under a more restrictive medical and social service model: Cal-AIM + CYBHI + FFPSA.
2	K-12 education system reaching and supporting more 3-to-4-year-olds through a ‘whole child’ approach that involves community partnerships and systems integration: UPK & Mixed Delivery System; Community Schools.
3	Los Angeles County increasingly redefining ‘basic needs’ for children and families from a prevention perspective: Housing resources to help a broader spectrum of families experiencing housing insecurity.
4	Array of initiatives that tackle the root causes of disparities (i.e., Social Determinants of Health), particularly very vulnerable families : ARDI + FFPS/A + PAI + GI Pilot.
5	Significant global-scale events leaving behind play spaces for children birth to 5: FIFA World Cup (2026) + Olympics and Paralympics (2028).
6	Community stakeholders committed to wellness and equity for families with children prenatal to age 5: Business Leaders + Philanthropy + Community Leaders
7	Strong policy alignment at the local and state level around prevention.

FIRST 5 LA: POTENTIAL STRATEGIES & ROLES

1	<i>Communication:</i> Communicate a prenatal-to-five perspective across various sectors (i.e., a Public Information role).
2	<i>Linkage:</i> Serve as a link between/among various Commissions and County departments to bring a prenatal-to-age 5 lens into their systems.
3	<i>Navigation:</i> Make it easier for families with children prenatal to age 5 to navigate services.
4	<i>Community Engagement:</i> Support meaningful community engagement.

FEEDBACK & INPUT

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DRAFT GOALS, OBJECTIVES, STRATEGIES

TASK

Generate **feedback** and **input** on on draft Goals, Objectives, and Strategies for First 5 LA's Strategic Plan.

Part 1

Draft GOALS and
INDICATORS



Part 2

STRATEGIES and ROLES
(Racial Equity/Justice)

Every child in Los Angeles County reaches their
full developmental potential throughout the
critical years of prenatal to age 5.

GOAL 1

Children P-5 and their families have their basic needs met.

BASIC NEEDS:

Physiological and Safety

GOAL 2

Children P-5 have nurturing relationships & environments.

PSYCHOLOGICAL NEEDS:

Esteem and Love & Belonging

GOAL 3

Children P-5 have a solid foundation for well-being, lifelong learning and success.

SELF-FULFILLMENT:

Self-Actualization

¹⁵⁸

SURVIVING



THRIVING

Every child in Los Angeles County reaches their
full developmental potential throughout the
critical years of prenatal to age 5.

GOAL 1

Children P-5 and their families have their basic needs met.

BASIC NEEDS:

Physiological and Safety

Poverty Alleviation Initiative
Guaranteed Income Pilot
Housing Resources
Cal-AIM

GOAL 2

Children P-5 have nurturing relationships & environments.

PSYCHOLOGICAL NEEDS:

Esteem and Love & Belonging

FFPSA Pilot Projects
UPK – Mixed Delivery System
FFPS/A Pilot Projects
Prevention Task Force

GOAL 3

Children P-5 have a solid foundation for well-being, lifelong learning and success.

SELF-FULFILLMENT:¹⁵⁹

Self-Actualization

UPK & Mixed Delivery System; CCSPP:
Community Engagement; Integrated Services;
Mental Health; Play Areas from Global-Scale
Events

OPPORTUNITIES

GOAL 1

Children P-5 and their families have their basic needs met.

AREAS	INDICATORS
Economic Security	Annual % of children birth through age 5 in LA County living in poverty.
Food Security	Annual % of households with children birth through age 5 in LA County who experience food insecurity.
Health Security	Annual # of deaths of children under 1 year old per 1,000 live births in LA County.
Health Security	Annual % of children birth through age 5 in LA County who access health care when needed.
Housing Security	Annual % of households with children birth through age 5 in LA County who experience housing insecurity.

GOAL 2

Children P-5 have nurturing relationships and environments.

AREAS	INDICATORS
Early Care & Education	Annual % of children birth through age 5 in LA County who have access to early care and education in a mixed-delivery system.
Healthy Food Access	Annual % of households with children birth through age 5 in LA County with access to sufficient choices for healthy foods.
Mental Health	Annual % of mothers in LA County who gave birth in the last year that displayed signs or symptoms of prenatal or postpartum depression.
Open Space	Annual % of households with children birth through age 5 in LA County that have access to parks and open space.
Social Cohesion	Annual % of household with children birth through age 5 in LA County living in community with social cohesion.

GOAL 3

Goal 3: Children P-5 have a solid foundation for well-being, lifelong learning and success.

AREAS	INDICATORS
Child Development	Annual % of children birth through age 5 in LA County with a developmental delay participating in early intervention programs.
Child Development	Annual % of children ages 2-5 in LA County with a Body Mass Index that falls within a healthy weight range.
Child Development	Annual % of children birth through age 5 in LA County who have received the recommended well-child visits for their current age.
Learning Foundation	Annual rate of LA County children birth to age 5 enrolled in a high quality ECE program.
Cultural Affirmation	- Annual % of children birth through age 5 in LA County receiving culturally affirming services and supports.

Draft Goals & Indicators

1.

What do you like about the draft Goals and potential Indicators?

2.

What questions do you have about the draft Goals and Indicators?

3.

What suggestions do you have about the draft Goals and Indicators?

Strategies & Key Roles

Strategies

1. What Strategies can help F5LA achieve the draft Goals?
2. How can these Strategies advance racial equity and justice?

Roles

1. What role(s) can F5LA play as a systems-change leader at a local, state, and federal level¹⁶⁴ to achieve these draft Goals, particularly in a way that advances racial equity and justice?

MEANS: STRATEGIES

ENDS: GOALS

GOAL 1

Children P-5 and their families have their basic needs met.

GOAL 2

Children P-5 have nurturing relationships & environments.

GOAL 3

Children P-5 have a solid foundation for lifelong learning, well-being, and success.

CLOSING

NEXT STEPS

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

BACKGROUND

COVID-19's devastating impact on families with children prenatal to age 5, especially from low-income and racialized communities, and the State's shrinking tobacco revenues call upon First 5 Los Angeles (F5LA) to rethink its current strategic plan to ensure that every child prenatal to age 5 in Los Angeles County reaches their full developmental potential.

On July 13, 2023, the F5LA Board of Commissioners identified core opportunities in the external environment to inform the development of Goals, Objectives, and Strategies¹ for F5LA's strategic plan. Informed by these opportunities and recent landscape analyses, F5LA staff developed draft Goals, Objectives, and Strategies to present to the F5LA Board for feedback on September 14, 2023.

The F5LA Board's feedback at the upcoming meeting will be used to refine F5LA's draft Goals, Objectives, and Strategies. From September 18 to 22, F5LA will share these Goals, Objectives, and Strategies with community stakeholders—residents and organizations alike—to identify alignment opportunities with their priorities and to inform the 'community engagement' strategy. The F5LA team will share the outcomes of these sessions with the F5LA Board in October 2023.

F5LA BOARD INPUT – SEVEN OPPORTUNITIES AND IMPLICATIONS

Opportunities in the Environment

On July 13, 2023, F5LA Board members identified seven overarching opportunities in the environment that have a bearing on its mission.

Opportunity 1: There are more federal and state resources with flexible funding for prevention that go beyond what is allowable under a more restrictive medical and social service model. Initiatives include:

- *California Advancing and Innovating Medi-Cal (Cal-AIM):* Medi-Cal is working to build a more coordinated, person-centered, and equitable health system that works for everyone. F5LA Board members mentioned funding for Doula services that can touch families much earlier; incentive payment programs; enhanced managed care; and greater accountability for health plans to report on population health results.
- *California Youth Behavioral Health Initiative (CYBHI):* CYBHI provides a broader range of preventative mental health services through school settings from preschool through college.
- *Family First Prevention Services Act (FFPSA):* FFPSA aims to enhance support services to families to help children and youth remain at home and reduce the use of congregate care placements. This includes Title IV-E reimbursements for evidence-based, trauma-informed prevention services, including Home Visiting Programs. (California added a block grant to support County implementation of FFPSA called FFPS.)

¹ Goals, Opportunities, Strategies, and Tactics (GOST) will be used to structure key components of F5LA's strategic plan.

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

Opportunity 2: The K-12 education system is reaching and supporting more 3-to-4 year-old children through a ‘whole child’ approach that involves community partnerships and systems integration:

- *Universal Preschool and Mixed Delivery System (UPK):* California launched UPK in the 2021–22 state budget by putting into action recommendations laid out in the California Master Plan for Early Learning and Care through a dramatic expansion of TK for all four-year-old children, with universal access to TK for all four-year-old children by the 2025–26 school year and expanded access to the California State Preschool Program for income-eligible three-year-old children and children with disabilities. By 2025–26, UPK will exist for all four-year-old children in California through a mixed delivery system that will bring together programs across early learning and K–12.
- *California Community Schools Partnership Program (CCSPP):* CCSPP supports school efforts to partner with community agencies and local government to align community resources to improve student outcomes. Partnerships provide an integrated focus on academics, health and social services, youth and community development, and community engagement. Community school strategies typically include four evidence-informed programmatic features: integrated support services; family and community engagement; extended learning time and opportunities; and collaborative leadership and practices for educators and administrators.

Opportunity 3: Los Angeles County is increasingly redefining ‘basic needs’ for children and families from a prevention perspective. An example of this trend can be found in the field of housing:

- More resources are becoming available to fund the preservation and production of affordable housing to help a broader spectrum of families with children prenatal to age 5, from families that are currently houseless to families that are housing insecure to prevent houselessness.

Opportunity 4: Los Angeles County has launched an array of initiatives that tackle the root causes of disparities (i.e., Social Determinants of Health), particularly very vulnerable families. Examples mentioned by F5LA Board members include:

- Poverty Alleviation Initiative
- Guaranteed Income Pilot
- FFPS/A Pilot Projects
- Anti-Racism, Diversity, and Inclusion (ARDI) Initiative

Opportunity 5: Significant events will be landing in Los Angeles County over the next five years that can leave behind a landscape of play spaces for children birth to age 5. Two global-scale events were mentioned:

- *FIFA World Cup (2026)*
- *Olympics and Paralympics (2028)*

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

Opportunity 6: Los Angeles County has a deep bench of community stakeholders committed to wellness and equity for families with children prenatal to age 5.

- *Business Leaders:* The entertainment industry, such as Disney and Universal Studios, among others, can be great advocates and supporters.
- *Philanthropy:* Los Angeles has many prominent philanthropic institutions committed to community well-being. Some of them are undergoing leadership transitions, thus opening up an opportunity to include children prenatal-to-5 issues into their agendas.
- *Community Leaders:* COVID-19 and racial justice movements formed in the aftermath of the murder of George Floyd have activated community members and expanded community networks to advance racial equity.

Opportunity 7: There is a strong alignment between the Governor, the State Legislature, and the Los Angeles County Board of Supervisors around a policy agenda to address root causes of social and economic disparities through a prevention approach.

- The current alignment among local and state policymakers is a window of opportunity for F5LA to play a galvanizing leadership role harnessing the aforementioned opportunities and resources to magnify its impact.

F5LA Implications: Potential Strategies and Roles

At the end of the brainstorming session, F5LA Board members highlighted additional considerations for strategies or roles that can help F5LA harness the opportunities in the external environment.

1. *Communication:* Communicate a prenatal-to-five perspective across various sectors (i.e., a public information role).
2. *Linkage:* Serve as a link between/among various Commissions and County departments to bring a prenatal-to-age 5 lens into their systems.
3. *Navigation:* Make it easier for families with children prenatal to age 5 to navigate services.
4. *Community Engagement:* Support meaningful community engagement.

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

DRAFT GOALS AND INDICATORS TO DEFINE OBJECTIVES

Informed by these key opportunities, recent landscape analyses, and internal staff engagement activities, F5LA staff developed draft Goals, Indicators, and Strategies using a Results-Based Accountability (RBA) framework.

- Goals and Objectives are the ends (i.e., desired results).
- Strategies and Tactics as the means to achieve the desired results.

More specifically, a Goal is a general (aspirational) statement that expresses a condition of well-being F5LA wants to achieve for children prenatal to age 5. An Objective refers to a concrete (measurable) level of change. For illustration purposes only (the numbers are not real), below is an example that shows the difference between a Goal and an Objective:

Goal 2	Children P-5 have nurturing relationships and environments.
Objective 2.1	Increase the annual percentage of households with children birth through age 5 in LA County with access to sufficient choices for healthy foods from <u>10% in 2023</u> (baseline year) to <u>30% in 2030</u> (target year).

In contrast to a Goal, an Objective stipulates a concrete level change in quantifiable terms (i.e., percentage of increase or decrease within a specified time horizon). The detailed nature of measurable Objectives will help F5LA in two critical ways for the strategic plan.

- Strategies, Tactics, Roles: Measurable Objectives help F5LA identify the specific Strategies and Tactics necessary to achieve the concrete change. For instance: What Strategies and Tactics are necessary to increase access to sufficient healthy food choices from 10% to 30% within seven years? What resources are needed to implement these Strategies and Tactics? What is F5LA's role in implementing these Strategies and Tactics?
- Learning, Adaptation, Accountability: During the implementation phase, as results are tracked, F5LA can determine the extent to which its Strategies and/or Tactics should continue, be modified, or changed entirely. In other words, the concrete results become the basis for F5LA's ongoing learning, adaptation, and (ultimately) accountability.

F5LA's Draft Goals and Indicators

At this point in the planning process, we want to gain agreement on the right set of Goals and, by extension, the indicators that will be turned into measurable Objectives. F5LA staff have developed draft Goals that encompass a continuum of results that help children prenatal to age 5 achieve their full developmental potential. This 'continuum of results for full developmental potential' aims to

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

ensure that F5LA’s Goals help children prenatal-to-5 to ‘thrive’ not merely to ‘survive.’² A Mental Model was developed that articulates a full developmental continuum for children prenatal-to-five to meet their basic needs (physiological and safety), their psychological needs (esteem and love and belonging), and their self-fulfillment needs (self-actualization).³ Table 1 illustrates the alignment between the draft Goals, the Mental Model, and the opportunities cited by the F5LA Board members.

Table 1: Goals, Mental Model, and Opportunities

Draft Goals	Mental Model	F5LA Board-Identified Opportunities
1. Children P-5 and their families have their basic needs met.	Basic Needs: Physiological; Safety	Poverty Alleviation Initiative; Guaranteed Income Pilot; Housing Resources; Cal-AIM;
2. Children P-5 have nurturing relationships and environments.	Psychological Needs: Esteem; Love & Belonging	FFPSA Pilot Projects; UPK – Mixed Delivery System; FFPS/A Pilot Projects; Prevention Task Force;
3. Children P-5 have a solid foundation for well-being, lifelong learning and success.	Self-Fulfillment Needs: Self-Actualization	UPK & Mixed Delivery System; CCSPP: Community Engagement; Integrated Services; Mental Health; ARDI: Cultural Competency/Affirmation; Play Areas from Global-Scale Events.

F5LA’s Draft Objectives: Turning Indicators into Objectives

Developing measurable Objectives for F5LA’s strategic plan entails selecting a set of indicators. These indicators will be turned into measurable Objectives. To illustrate, let’s say the F5LA Board selects the following indicator: *The annual percentage of households with children birth through age 5 in LA County with access to sufficient choices for healthy foods*. As mentioned earlier, a possible measurable Objective could be: *Increase the annual percentage of households with children birth through age 5 in LA County with access to sufficient choices for healthy foods from 10% in 2023 (baseline year) to 30% in 2030 (target year).*

F5LA staff have identified 15 potential indicators for the draft Goals. These indicators were chosen through a close examination of over 100 indicators contained in F5LA’s Impact Framework, Landscape Analyses, Best Start Data Narrative, LA County’s Countywide Prevention Metrics, and a list of 30-plus indicators from an All Staff Team meeting. Table 2 presents the Draft Goals and Potential Indicators. After the F5LA Board provides feedback on the draft Goals and Indicators on September 14th, F5LA staff will seek additional consultation from stakeholders and experts to identify a final set of indicators for each Goal.

² The importance of ‘thriving, not merely surviving’ was raised by F5LA All Staff and is implicit in the term ‘full developmental potential.’

³ This ‘Full Developmental Potential Mental Model’ follows Abraham Maslow’s Hierarchy of Needs.

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

Table 2: Draft Goals and Potential Indicators

Goal 1: Children P-5 and their families have their basic needs met.		Goal 2: Children P-5 have nurturing relationships and environments.		Goal 3: Children P-5 have a solid foundation for well-being, lifelong learning and success.	
Area s	Indicators	Area s	Indicators	Area s	Indicators
Economic Security	a. Annual % of children birth through age 5 in LA County living in poverty.	Early Care & Education	a. Annual % of children birth through age 5 in LA County who have access to early care and education in a mixed-delivery system.	Child Development	a. Annual % of children birth through age 5 in LA County with a developmental delay participating in early intervention programs.
Food Security	b. Annual % of households with children birth through age 5 in LA County who experience food insecurity.	Healthy Food Access	b. Annual % of households with children birth through age 5 in LA County with access to sufficient choices for healthy foods.	Child Development	b. Annual % of children ages 2-5 in LA County with a Body Mass Index that falls within a healthy weight range. 173
Health Security	c. Annual # of deaths of children under 1 year old per 1,000 live births in LA County.	Mental Health	c. Annual % of mothers in LA County who gave birth in the last year that displayed signs or symptoms of prenatal or postpartum depression.	Child Development	c. Annual % of children birth through age 5 in LA County who have received the recommended well-child visits for their current age.
Health Security	d. Annual % of children birth through age 5 in LA County who access health care when needed.	Open Space	d. Annual % of households with children birth through age 5 in LA County that have access to parks and open space.	Learning Foundation	d. Annual rate of LA County children birth to age 5 enrolled in a high quality ECE program.

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

Housing Security	e. Annual % of households with children birth through age 5 in LA County who experience housing insecurity.
Social Cohesion	e. Annual % of household with children birth through age 5 in LA County living in community with social cohesion.
Cultural Affirmation	e. Annual % of children birth through age 5 in LA County receiving culturally affirming services and supports.

FIRST 5 LOS ANGELES – BOARD OF COMMISSIONERS

Strategic Planning Process

F5LA BOARD OF COMMISSIONERS – FEEDBACK AND INPUT

At the September 14th meeting, we are seeking feedback from F5LA Board members on the draft Goals and potential Indicators and input on potential Strategies that can impact these Goals. Time permitting, we would also like to elicit reflections on how these Strategies advance racial equity and what these Strategies mean for F5LA's role(s).

1. **Feedback:** *Draft Goals and Potential Indicators*

- a. What do you like about the draft Goals and potential Indicators?
- b. What questions do you have about the draft Goals and Indicators?
- c. What suggestions do you have about the draft Goals and Indicators?

2. **Input:** *F5LA's Strategies*

- a. What Strategies can help F5LA achieve the draft Goals?
- b. How can these Strategies advance racial equity and justice?

3. **Input:** *F5LA's Key Role(s)*

- a. What role(s) can F5LA play as a systems-change leader at a local, state, and federal level to achieve these draft Goals, particularly in a way that advances racial equity and justice?



Sustainability Overview

Board of Commissioners Meeting

September 14, 2023

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First 5 LA's Sustainability Definition

Ensuring First 5 LA can achieve long-lasting impact, stability, and flexibility toward our mission.

Sustainability Framework

First 5 LA Role

First 5 LA Sustainability Efforts toward Our Mission

Maximize First 5 LA Assets

Operations

- Leasing portion of building
- Maximizing staff capabilities and current technology
- Cost efficiency
- Maximizing fund balance investments

Investment Strategy

- Maximizing current investments with a return-on-investment approach integrated with exit strategies or leveraging external funding streams (programs)

Alternative Revenue Strategies

Policy Advocacy

- Lead and support monitoring of local, state, and federal policies

Business Models

- Assessing use of different business models (e.g., fiscal intermediary, etc.)

Collective Impact

- Partnering with other organizations to pool funding

Maximizing Assets



Maximizing First 5 LA's Assets – Operations

Areas to maximize current fiscal and physical resources through ongoing business processes and ad hoc analysis:

- Our building: leasing of building space for additional revenue
- Our staff: maximizing capabilities to support the organization long term
- Our technology: right-sizing and taking full advantage of capabilities of current IT investments
- Our costs: analyzing to make sound, effective, value-based decisions on purchases and expenditures
- Our fund balance: investing our fund balance for greater returns

Maximizing First 5 LA's Assets – Investment Strategy

- Develop a return on investment (ROI) approach for prioritizing and making investment decisions
- ROI approach includes traditional financial ROI and measuring impact
- Exit strategies or external funding streams integrated with the ROI approach
- ROI approach is TBA

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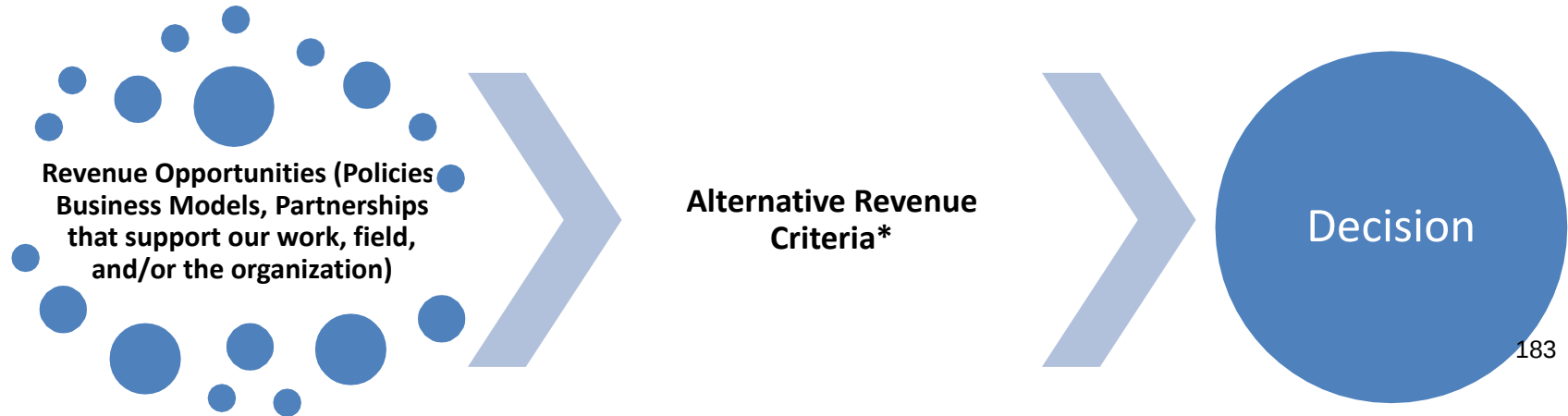
**In
Development**

Alternative Revenue Strategies



Alternative Revenue Strategies – Criteria

Criteria will be developed to identify and assess alternative revenue opportunities and inform decision making.



*See Appendix

Alternative Revenue – Policy Advocacy

- Always monitor and support opportunities aimed at improving child wellbeing and development at the local, state, and federal levels
- Monitor to ensure state and/or local funding are fully utilized and not returned
- Ensure funding is focused on P-5 population and their families

Alternative Revenue – Business Models

- Identify fiscal intermediary opportunities that:
 - Align with First 5 LA's role(s)
 - Leverage funding to support activities/efforts that advance First 5 LA goals and outcomes
 - Cover administrative costs
- Identify staff expertise/time reimbursement opportunities that:
 - Help lend capacity
 - Support coalition involvement

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**In
Development**

Alternative Revenue – Collective Impact

First 5 LA can continue to create partnerships to pool funding to have a greater collective impact. Below are examples of opportunities to explore:

- Philanthropic partnerships, e.g., Hilton Foundation, Center for Strategic Partnerships (CSP)
 - Less likely to fund direct services, especially long-term, but likely to fund innovations/improvements in infrastructure and proof of concept projects
- Partnerships with County Departments to leverage funding and/or staff resources to advance shared goals
 - Department of Public Health's Productivity Investment Fund grant

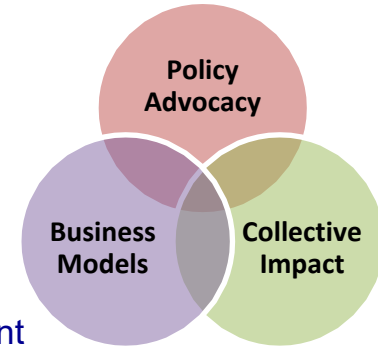
Alternative Revenue Strategies in Work



Alternative Revenue Examples

Below are current examples underway utilizing the alternative revenue strategies:

- Medi-Cal (California Medicaid) – exploring new opportunities:
 - New provider population: Community Health Workers
 - Enhanced Care Management for subset of population
 - Medi-Cal Managed Care Plans
- Family First Prevention Services Act (federal)/ Program (state):
 - Can reimburse for direct services and administrative costs
 - HFA and PAT, WB Motivational Interviewing direct services eligible for reimbursement
 - 50% match required (F5LA \$ potential)
 - FFPS State Block Grant
 - Piloting Community Pathway connections to HMG, community-based pilots, ECE
- DMH Mental Health Services Act (secured for SHV for FY 23-26)
- Children and Youth Behavioral Health Initiative (CYBHI):
 - One-time funding to expand or start up services, train providers



Next Steps

- Proceed with maximizing assets in our operations
- Develop and implement criteria to identify and assess alternative revenue opportunities
- Develop approach for seeking alternative revenue opportunities
- Develop an investment strategy ROI approach to further advance maximizing our assets towards sustainability

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Questions?



Appendix

Criteria Matrix

Below provides a potential example of how First 5 LA could weigh a given set of criteria to determine the organization's level of engagement with a given alternative revenue opportunity. The criteria could include, but are not limited to, the examples below:

Criteria	1	2	3	4	5
1. Strategic Alignment- Aligns with the goals and outcomes of the Strategic Plan					
2. Aligns Revenue top ECD Purposes- Yields additional revenue for either First 5 LA, programs and services that support children and families, or the First 5 network (particularly, support for programs without any other dedicated funding stream)					
3. Impact- Opportunity to reach deeper scope and larger scale impact Supports sufficient revenue to fund sizeable growth in programs, services, and policies that contribute to long-term systems change work in pursuit of First 5 LA's North Star					
4 Improves Equity- Funding prioritizes children and families facing inequities along racial/ethnic, socioeconomic, and geographic lines					
5 Likelihood of Success- The opportunity's likelihood of success, including favorable polling, broad based political support, no funded opposition, etc.					
6 Cost of Involvement- return on investment, increased public presence and organizational bandwidth					
7 Potential Reputational Risk- Possible risks to the reputation of First 5 LA and the First 5 network stemming from participation outweighed by reward					
8. Sustainability- The alternative revenue source will generate ongoing and reliable funding for programs, services and priorities that align with First 5 LA or fund First 5s in general					
9. Ripeness- The window of opportunity is open					