FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Memo

To: Commission Members

From: Alexander Khu

Date: Monday December 5, 2016

Re: December 5, 2016 Commission Meeting

Enclosed are the materials for the December 5, 2016 Commission meeting which will take place as follows:

Time: **6:00 PM**
Location: 1485 Civic Court Suite 1200, Concord, CA
925-771-7300

This year, we once again make available a bin from the Food Bank for food donations.
Please consider bringing in Non-Perishable cans or packaged Food Items to donate.
No Glass Jars Please.

The Food Bank's most needed items are as follows:

- Natural Peanut Butter, Whole Grain Cereals
- Hearty Low Sodium Soups, Low Sodium Canned Vegetables, Canned Tomato Products
- Beans and lentils (dry or canned), Brown Rice, Whole wheat / Grain Pasta
- Canned Tuna, Canned Chicken
- Canned Fruit in Juice
- Nonperishable Low Sodium Ready to Eat Meals (chili, ravioli, etc.)

A light dinner will be provided.

Please let me know if you have any questions.

Kind Regards,

Alexander Khu, Executive Assistant
First 5 Contra Costa
1485 Civic Court
Suite 1200
Concord, CA 94520
925-771-7342 Direct
925-771-6083 Fax

FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Commission Meeting Agenda

Monday, December 5, 2016, 6:00 pm
1485 Civic Court, Suite 1200
Large Conference Room
Concord, CA

1.0 Call to Order and Roll Call

2.0 Public Comment

The public may comment on any item of public interest within the jurisdiction of the First 5 Contra Costa Children and Families Commission. In accordance with the Brown Act, if a member of the public addresses an item not on the posted agenda, no response, discussion, or action on the item may occur.

3.0 Approval of Consent Calendar **Action**

A Commissioner or member of the public may ask that any of the following consent items be removed from the consent calendar for consideration under Item 4.

3.1 **Approve the minutes from the October 12, 2016 Commission Retreat meeting.**

3.2 **Accept the Executive Committee Report from the September 12, 2016 meeting.**

3.3 **Accept the FY 2016-17 First Quarter Financial Report**

3.4 **Consider approving the updated First 5 Contra Costa Employee Compensation and Benefits Resolution**

4.0 Consider for discussion any items removed from the consent calendar.

5.0 Consider accepting the Fiscal Year 2015-2016 Financial Audit. **Action**

5.1 (a) Public Hearing on First 5 Contra Costa's Annual Financial Audit for fiscal Year 2015-2016.
The Commission will receive public comment on the audit for Fiscal year 2015-2016.

(b) Accept the Annual Financial Audit for Fiscal Year 2015-2016

6.0 Recognize First 5 staff who have surpassed service milestones and appreciate the entire staff for their continuing dedication and accomplishment

7.0 Consider approving the Slate of Officers of the Commission for 2017: **Action**

Chair:	Kathy Gallagher
Vice-Chair:	Gareth Ashley
Secretary / Treasurer:	John Jones
Additional Non-Voting Member:	Marilyn Lucey

8.0 Presentation of the 2016 Year in Review

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9.0 Annual Report to First 5 California for Fiscal Year 2015-2016. **Action**

(a) Public Hearing on First 5 Contra Costa's Annual Report for Fiscal year 2015-2016.

(b) Adopt the Annual Report to First 5 California for Fiscal Year 2015-2016

10.0 Executive Director's Report Discussion

11.0 Communications Discussion

12.0 Commissioner F.Y.I. Updates Discussion

13.0 Adjourn

The First 5 Contra Costa Children and Families Commission will provide reasonable accommodations for persons with disabilities planning to participate in Commission meetings who contact the Commission's offices, at least 48 hours before the meeting, at (925) 771-7300.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the First 5 Contra Costa Children and Families Commission to a majority of members of the First 5 Contra Costa Children and Families Commission less than 96 hours prior to that meeting are available for public inspection at 1485 Civic Court, Suite 1200, Concord, CA 94520 during normal business hours.

In consideration of those who may suffer from chemical sensitivities or who may have allergic reactions to heavy scents, First 5 Contra Costa requests that staff and visitors refrain from wearing perfume, cologne, or the use of strongly scented products in the work place. We thank you for your consideration of others.

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FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Monday December 5, 2016

Agenda Item 3.1

Approve the minutes from the October 12, 2016 Commission Retreat.

SPECIAL MEETING: Commission Retreat
MINUTES

Wednesday October 12, 2016
9:30 am
Lafayette Veterans Memorial Building
3780 Mt. Diablo Blvd, @ The Independence Room
Lafayette CA 94549

1.0 Call to Order and Roll Call

The meeting was called to order at 9:45 am.

Commissioners in attendance were:
Vice-Chair Kathy Gallagher for PJ Shelton, Secretary-Treasurer Gareth Ashley, Maria Fort, John Jones, and Dr. William Walker.

Alternate Commissioners present were:
Marilyn Lucey, Matt Regan, Wanda Session and Katharine Mason.

Absent were: Federal Glover, Joan Miller, alternates Karen Mitchoff and Kathy Marsh.

2.0 Public Comment

There were no public comments.

3.0 Approval of Consent Calendar

A motion was made by Dr. Walker and seconded by Maria Fort to approve the consent calendar.

AYES: Kathy Gallagher, Gareth Ashley, Maria Fort, John Jones, William Walker
NOES: None
ABSTAIN: None

Motion was **APPROVED.**

5.0 Consider accepting the 2017 premium contribution rates for active employee health and dental benefits, and maintaining existing contribution rates for health and dental benefits for retirees.

Sean presented the 2017 premium contribution rates for active employees. The premiums for the majority of the plans will increase in 2017, by a range of 4.23% to 9.2%; premiums for two plans are decreasing by 2.56% and 4.24%.

Gareth Ashley made a motion and John Jones seconded to accept the 2017 premium contribution rates for active employee health and dental benefits, and maintaining existing contribution rates for health benefits for retirees.

AYES: Kathy Gallagher, Gareth Ashley, Maria Fort, John Jones, William Walker
NOES: None
ABSTAIN: None

Motion was **APPROVED.**

Commissioner PJ Shelton arrived to the meeting at this time.

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6.0 Commission Study Session Discussion

The Commission devoted the remainder of the retreat to a facilitated discussion of the Commission's role as an advocacy for policies that support children and families. Nicole Young, consultant for the Retreat facilitated the presentation. She began the session by outlining the purpose of the retreat:

- Further define First 5 Contra Costa's role in driving systems changes
- Discuss possible policy and advocacy issues to focus on
- Gauge the Commission's interest in developing an advocacy plan

Moira Kenny, Executive Director of the First 5 Association of California presented the Association's policy platform covering the areas of Family Strengthening, Early Identification and Intervention, Oral Health, Quality Early Learning, and System Sustainability and Reach.

She also presented how the association lends support to significant state policy efforts and how local First 5s have been influential in topics areas in which they have expertise, such as oral health. She also highlighted the Association's common advocacy activities, such as the annual Advocacy Day, legislator outreach and education, bill tracking and support, and working with state agencies on implementation of programs affecting young children and families.

In the session that followed, several community agency partners expressed appreciation of First 5's role as funder, convener, and leader. Each expressed how First 5 could lend support to advocacy efforts that partners are leading, as well as lead the change in areas where partners don't have the capacity or expertise to lead the advocacy efforts.

Nicole then led the Commission through several discussion activities that provided a sense the Commission's stance on its role as an agenda. Among the recorded points were the following:

Guiding Principles

- Focus on areas where we can lead the charge
- Build upon what has worked
- Deep impact, don't spread ourselves too thin (don't "boil the ocean")
- Bring our early childhood expertise to Local Control Accountability Plans (LCAPs) → "infiltrate"
- Leverage our other strengths (expertise, credibility)
- Prioritize young children in all policies
- Focus on upstream prevention
- Maintain a "constant" focus – e.g. not just one-off activities
- Ensure that any systems First 5 develops work with existing systems
- Continue in convener role

Ideas for Collaboration & Systems Building

- Build pro-family/pro-child political will (movement)
- Explore possibility of a dedicated Children's Fund – e.g. how could First 5

partner with others to make that happen?
- Keep an eye on mental health services
- Improve how resources are used
- Potential for collaboration/systems integration with Maternal Child Health (MCH) programs, Title V programs (e.g. California Children's Services redesign), WIC
- Train pediatricians to screen and refer to Early Start
- First 5 Centers – can be place for oral health screenings, assessment
- First 5's public awareness campaigns: look at ways to use existing public awareness strategies to increase awareness of the impact of poverty on children 0-5

How to Grow Our Advocacy Role & Impact
- Educate parents → turn into advocates
- Commissioner role – synthesize with professional roles
- Use convener role to expand partnerships with other agencies/collaborative, such as WIBs, WDBs, UW, etc
- Bring Bay Area First 5s together around advocacy and policy → look at what could be done together

Thoughts After Review of Advocacy Issues Post-Its Exercise
- Most of the Post-Its are in the upper right section of the matrix – e.g. focus advocacy efforts on policy changes made by decision makers
- All 4 areas are interdependent – e.g. When Early Intervention, Family Support, Early Childhood Education efforts are "done right," it has effect on Poverty and Social Determinants of health
- 20% of time available to hitch to new opportunities – lend our support/name to new issues that emerge
- Use First 5's name to "disrupt" where necessary
- As we develop new initiatives, when do we let them go? (i.e. plan for the move to self-sufficiency and eventual release)
- In ECE, F5's role as convener is important; need will not go away even as funding declines
- Apply community engagement model to LCAP and other issues
- Continue efforts related to parks, city councils
- First 5 has important role as "think tank" (i.e. developing and releasing new initiatives)
- Synthesizing all into systems change

Staff will follow up on this discussion, particularly on specific questions and issues identified, and bring a draft advocacy framework to the Commission, aiming for February 2017.

7.0 Adjourn

The meeting was adjourned at 2:10 PM.

Monday December 5, 2016

Agenda Item 3.2

Accept the Executive Committee Report from September 12, 2016 meeting.

Executive Committee
MINUTES

September 12, 2016
4:00 p.m.
Small Conference Room,
1485 Civic Court, Suite 1200, Concord, CA

1.0 Call to Order

The meeting was called to order at 4:15 PM. Commission members in attendance included Gareth Ashley and Katharine Mason. Staff included Sean Casey, Cally Martin and Marnie Huddleston. Commissioner Kathy Gallagher joined the meeting at 4:45.

2.0 Public Comment

There was none.

3.0 Staff Updates

Cally Martin provided the program update:

With the change in the fiscal year the federal Race to the Top – early Learning Challenge Grant has ended and the First 5 California IMPACT grant (Improve, Maximize so all Children Thrive) has begun and seamlessly continuing the quality improvement work we have steadily grown over the last five years, now known as Quality Matters. We have two websites now for the program, www.qualitychildcarematters.org
OR www.calidadimporta.org.

In our collaboration with the County Office of Education on the state Preschool Quality Improvement Block Grant, we will this month disburse $65,000.00 in mini-grants to 20 state preschool Tier 3classrooms. Funds are to be used towards quality improvement activities. The current Block Grant funding ends September 30th and the Office of Education is expecting a new contract from CDE for FY 16-17.

June also marked the end of California First 5 funding for CARES Plus, which supported much of our Professional Development Program (PDP), including all the stipends for teachers who are continuing their education. With IMPACT funding we are continuing our local PDP program in partnership with the County Office of Education which has additional professional development funds (AB 212) to blend with. So far, we have received approximately 80 PDP applications, and we expect to triple this number by the end of the calendar year.

Four years after assessing Detroit Avenue for its walkability and bike-ability for families with young children, the Central County Regional Group, the City of Concord and Monument HEAL Zone partners will celebrate the newly designed, safe route on Saturday, September 24th. The celebration caps a multi-year, Complete Streets project that included a community based assessment of the route, numerous community workshops, public meetings, and advocacy before City Council. With construction nearly complete, the event will highlight the route's $2.7 million improvements including green bicycle lanes, four protected crosswalks, a new sidewalk, curb extensions, ADA improvements, and increased lighting. The CCRG and First 5 Contra Costa were key partners in the project, organizing the primary community voice on behalf of young children and families.

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With funding from Kaiser Permanente, the Community Engagement program and the East County Regional Group launched a new walking and activities club – The Pittsburg PACE (Physical Activities and Community Engagement) Program - at De Anza park in Pittsburg on August 13. The club began four months after the inaugural celebration of a new play structure at De Anza park in an effort to reclaim the unsafe park and promote more park use by young children and families. The Pittsburg PACE program brings to De Anza a free weekly walking club, followed by alternating Zumba and yoga classes for families. To date, the Club has served **58 residents participants**.

The Family Economic Security Partnership (FESP) sponsored training by the Alliance for Justice on their ACT!*Quick* tool for 20 FESP members to explore the many ways agencies can engage in advocacy. FESP also launched its "deeper dive" project in a day-long meeting with SparkPoint and the Building Movement Project to explore how SparkPoint can incorporate greater policy and advocacy activities into their agency's work.

FESP will hold an elections forum on October 6 with the head of the League of Women Voters on relevant ballot initiatives that impact children and families and financial security and on successful voter registration and mobilization efforts

We are preparing to launch the Kindergarten Readiness Assessment process in three school districts in the fall. With our evaluation staff, ASR – our external evaluator - trained 21 kindergarten teachers in the use of the KOF (Kindergarten Observation Form). In all, the Assessment will comprise six randomly selected classrooms in the Pittsburg USD, seven in the Mt. Diablo USD, and 8 in the Antioch USD.

Sean also updated the Executive Committee on plans to restructure the agency Evaluation Department, re-titling it "Strategic Information and Planning" and recruiting a Strategic Information And Planning Manager to build out a broader and more robust program of developing information for First 5's growing education and advocacy efforts. Lyn Paleo will continue to coordinate First 5's program evaluation activities.

4.0 Commission Updates

Sean informed the Committee that he recently met with Lee Ross, a former school psychologist in the Oakley School District who is applying to join the Commission. We expect Supervisor Piepho to nominate him shortly for the District 3 Alternate seat.

5.0 Statewide Updates

Sean informed the Committee that the annual First 5 California Summit will be held November 8,9, and 10 this year in Sacramento. Commission members are encouraged to attend and First 5 will pay their registration and travel expenses as permitted in the by-laws.

6.0 Items for Consideration

6.1 Discuss nominations process for 2017 Commission officers

The Commission will be asked to approve the nominations committee at tonight's meeting. Wanda Session has agreed to chair the committee, joined by Marilyn Lucey and Matt Regan. Wanda will be checking in with the current Executive Committee members on their interest in continuing to serve on the Committee. The Committee reviewed the process for nominations, culminating in final approval at the December Commission meeting.

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6.2 Discuss plan and potential agenda for the October 12, 2016 Commission retreat
The Committee discussed the upcoming Commission retreat. The topic will be First 5's role as an advocate, the first time the Commission will explicitly explore this area. We will look at what we're doing already, where the strategic plan takes us, and consider potential and possible roles and activities in the future. Sean proposed bringing Moira Kenney, the Director of the First 5 Association to the retreat to learn more about the Association's advocacy activities as well as those of other First 5s.

7.0 Review agenda items for upcoming Commission meetings
In October there will be no regular Monday night meeting, as we will be holding the retreat instead on October 12. We will have two business items to address at the retreat, adoption of the FY 2015-16 audit and the 2017 health and dental benefits.

December will include our Year in Review, staff recognition, public hearing on the report to CA First 5, elect officers, and approve compensation and benefits for 2017.

8.0 Adjourn
The meeting adjourned at 5:30 PM.

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FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Monday December 5, 2016

Agenda Item 3.3

Accept the FY 2016-17 First Quarter Financial Report

Line #		FY16/17 Budget			FY16/17 First Quarter Revenue and Expenditures				
	FIRST 5 CONTRA COSTA CHILDREN AND FAMILIES COMMISSION	F5 Contra Costa Funds	Other Funds	Total Budget	F5 Contra Costa Funds	Other Funds	Total Revenue and Expense	% of Budget	
	REVENUE								
1	Prop 10 - Tax Apportionment	7,514,958		**7,514,958**	2,199,422		**2,199,422**	29%	
2	First 5 California IMPACT	-	733,569	**733,569**		88,836	**88,836**	12%	*1*
3	COE/Preschool QRIS Block Grant	-	366,631	**366,631**		69,592	**69,592**	19%	
4	COE Infant-Toddler QRIS Block Grant	-	381,527	**381,527**		149,233	**149,233**	39%	
5	Thomas J. Long Foundation Help Me Grow	-	1,290,000	**1,290,000**		-	**-**		
6	Interest Income	115,000		**115,000**	53,852		**53,852**	47%	
7	MHSA/Community Engagement Grants	-	93,250	**93,250**	30	28,566	**28,596**	31%	
	TOTAL REVENUE	7,629,958	2,864,977	**10,494,935**	2,253,304	336,227	**2,589,531**	25%	
8	Fund Balance	3,962,057	384,372	**4,346,429**	(5,734)	117,145	**111,411**	3%	*2*
	TOTAL REVENUES AND FUND BALANCE	**11,592,015**	**3,249,349**	**14,841,364**	**2,247,571**	**453,372**	**2,700,942**	**18%**	
	PROGRAM								
	Initiatives	**7,423,647**	**1,966,969**	**9,390,616**	**1,405,179**	**256,219**	**1,661,397**	**18%**	
9	**Early Care and Education Initiative**								
10	Professional Development	885,006	140,000	**1,025,006**	199,125		**199,125**	19%	*3*
11	Early Learning Quality	64,000	653,114	**717,114**		185,963	**185,963**	26%	*3*
12	Literacy	212,080	50,000	**262,080**	58,968		**58,968**	23%	*3*
13	**Total**	**1,161,086**	**843,114**	**2,004,200**	**258,093**	**185,963**	**444,056**	**22%**	
14	**Family Support**								
15	First 5 Centers	2,328,718		**2,328,718**	519,685		**519,685**	22%	*3*
16	Home Visiting	1,255,015		**1,255,015**	270,000		**270,000**	22%	*3*
17	Training and support	25,200		**25,200**	1,316		**1,316**	5%	
18	**Total**	**3,608,933**		**3,608,933**	**791,001**		**791,001**	**22%**	
19	**Early Intervention**								
20	Therapeutic Services	227,250	77,250	**304,500**	7,566	7,566	**15,131**	5%	
21	ECE Consultation	993,177		**993,177**	223,465		**223,465**	23%	*3*
22	Children's Developmental Needs	345,000	886,605	**1,231,605**		62,690	**62,690**	5%	*3*
23	Children Experiencing Stress/Trauma	397,294		**397,294**	31,748		**31,748**	8%	*3*
24	Training and Consultation	25,000		**25,000**	2,571		**2,571**	10%	
25	**Total**	**1,987,721**	**963,855**	**2,951,576**	**265,350**	**70,256**	**335,605**	**11%**	
26	**Community Information and Education**								
27	Public Information	520,157	160,000	**680,157**	57,505		**57,505**	8%	
28	Community Engagement	140,750		**140,750**	32,930		**32,930**	23%	
29	Family Economic Stability	5,000		**5,000**	300		**300**	6%	
30	**Total**	**665,907**	**160,000**	**825,907**	**90,735**		**90,735**	**11%**	
31	**Program Expenses**								
32	Program Salaries & Wages	1,116,390	602,658	**1,719,048**	282,413	115,827	**398,240**	23%	*4*
33	Program Employee Benefits	583,136	342,176	**925,312**	134,690	63,945	**198,635**	21%	*4*
34	Office Overhead and Other Expenses	356,370	39,900	**396,270**	46,750	270	**47,020**	12%	
35	**Total**	2,055,896	984,734	**3,040,630**	**463,853**	180,042	**643,895**	**21%**	
36	**TOTAL PROGRAM**	**9,479,543**	**2,951,703**	**12,431,246**	**1,869,032**	**436,261**	**2,305,292**	**19%**	
37	***EVALUATION***								
38	Evaluation Salaries & Wages	307,284	48,091	**355,375**	55,396	5,023	**60,419**	17%	*4*
39	Evaluation Employee Benefits	166,099	26,014	**192,113**	25,423		**25,423**	13%	
40	Professional Services	410,286	80,043	**490,329**	17,881		**17,881**	4%	
41	Office Overhead and Other Expenses	65,066		**65,066**	14,582		**14,582**	22%	
43	**TOTAL EVALUATION**	**948,735**	**154,148**	**1,102,883**	**113,282**	**5,023**	**118,305**	**11%**	
	ADMINISTRATION								
44	Administrative Salaries & Wages	521,209	94,726	**615,935**	139,343	12,088	**151,431**	25%	*4*
45	Administrative Employee Benefits	257,073	48,772	**305,845**	71,207		**71,207**	23%	
46	Professional Services	133,000		**133,000**	7,212		**7,212**	5%	
47	Purchased Services, Equip lease, supplies	182,645		**182,645**	33,123		**33,123**	18%	
48	Office Overhead	69,810		**69,810**	14,372		**14,372**	21%	
49	**TOTAL ADMINISTRATION**	**1,163,737**	**143,498**	**1,307,235**	**265,257**	**12,088**	**277,345**	**21%**	
50	**TOTAL EXPENDITURES**	**11,592,015**	**3,249,349**	**14,841,364**	**2,247,571**	**453,372**	**2,700,942**	**18%**	

Distribution of expenses by department:		
	Program	85%
	Evaluation	4%
	Administrative	10%
	Total	100%

Fund Balance as of 6/30/2016:	
Nonspendable	**346,795**
Prepaids and Deposits	132,795
Loans Receivable - Brighter Beginnings	214,000
Restricted	**549,405**
Long Foundation - Help Me Grow	549,405
Committed	**841,227**
Capital Assets	841,227
Assigned	**4,574,141**
Elimination of FY16/17 Budget Deficit	3,962,057
Leases	612,084
Unassigned Funds	**21,924,788**
Contingency Fund	**7,500,000**
Unassigned	**14,424,788**
Total Fund Balance	**28,236,356**

NOTES:

1 First year of F5 CA IMPACT grant (4 year grant)

2 Long Fdn Help Me Grow funds received prior year used for $117,145 HMG expenses

3 Contractors received first quarter payments

4 $196,883 staff salaries and benefits paid with grant funds

Monday December 5, 2016

Agenda Item 3.4

Consider approving the updated First 5 Contra Costa Employee Compensation and Benefits Resolution

FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Staff Report
December 5, 2016

ACTION: X
DISCUSSION: _____

TITLE: First 5 Staff Compensation and Benefits Resolution No. 2016/001

Introduction:

The Commission utilizes the County's payroll and benefits program for its employees. Since 2012, the Commission has maintained its own staff compensation and benefits resolution to clarify where Commission compensation and benefits policies diverge from those of the County.

This Resolution includes the following amendments and revisions:

Page 2: Vacation. Clarified language and inserted language that employees who work 20 hours or more per work week are entitled to observe a holiday (time off work) in proportion to their regular weekly schedule.

Page 5: Health/Dental premiums. Inserted the 2017 employer contributions to health and dental premiums approved by the Commission October 12, 2016. *Note*: Delta Care PMI Rates decreased from between $0.58 to $1.26 for employee or employee & 1 or more respectively. This was clarified by the County Benefits Dept. after the Commission approved the rates in October.

Page 6: Health Savings Account. Inserted HSA language; approved by the Commission October 12, 2016.

Page 7: Deleted the Computer Vision Care, and inserted the new Voluntary Vision Plan; approved by the Commission October 12, 2016.

Pages 9-11: Retirement. Clarified language or deleted unnecessary language.

Page 12: Deferred Compensation. Deleted unnecessary language.

Recommendation:

Staff recommends the Commission approve the Employee Compensation and Benefits Resolution No. 2016/001.

EMPLOYEE COMPENSATION AND BENEFITS RESOLUTION NO. 2016/001

Draft for Approval
December 5, 2016

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1. Compensation

It is the policy of the Commission to provide its employees with a fair and competitive compensation package. The policy for setting compensation is described in the Commission's Consolidated Financial Policies.

Executive Director: The approved salary range for the Executive Director is $110,000 to $160,000. The Executive Director's salary is set by the Commission.

Employees: Employees starting salaries fall within the following ranges according to classification.

Starting Annual Salary Ranges by Classification*

Directors	$92,232	-	$106,913
Managers, Program Officers	$73,785	-	$94,534
Specialists, Coordinators	$61,488	-	$76,077
Assistants II, Executive Assistant, Community Liaison	$46,866	-	$56,180
Assistants	$40,571	-	$49,158

*First 5 Contra Costa has a performance increase structure. Employees are eligible, but not guaranteed to receive up to five (5) annual salary (step) increases, based upon performance, thereafter employees are no longer eligible for annual salary (step) increases. Salary increases range from 0% for lowest performance to 5% for highest performance.

2. Employment Status – Definitions

Full-Time Employees are scheduled to work 40 hours per work week.

Part-Time Employees are scheduled to work 20 hours or more per work week.

Intermittent Employees work on an as needed, irregular basis. Intermittent employees are paid by the hour, and offered limited benefits specified in this Resolution.

Temporary Employees/Interns work for a limited period of time. Paid temporary employees/interns will be paid on an hourly basis, and offered limited benefits specified in this Resolution.

Non-exempt Employees are eligible to be paid for overtime work in accordance with the Federal Fair Labor Standards Act (FLSA).

Exempt Employees are exempt from earning overtime compensation under the provisions of the Federal Fair Labor Standards Act (FLSA).

3. Work Week Defined

Work Week Defined: The work week begins at 12:01 a.m. on Saturday and ends at 12:00 midnight on Friday.

4. Leaves With and Without Pay, and Related Benefits

Refer to the Benefits and Leaves of Absence Sections within the Employee Handbook to determine eligibility.

A. Holidays Observed: First 5 Contra Costa observes 10 ~~paid~~ holidays each year. The following holidays are observed for all employees and the office is officially closed on these days:

New Year's Day	Labor Day
Martin Luther King Jr. Day	Veterans' Day
Presidents' Day	Thanksgiving Day
Memorial Day	Day after Thanksgiving
Independence Day	Christmas Day

Full-time employees are entitled to observe a holiday (8 hours off work), without a reduction in pay, when a holiday is observed by First 5. Part-time employees who work 20 hours or more per work week are entitled to observe a holiday (time off work) in proportion to their regular weekly schedule, without a reduction in pay, when a holiday is observed by First 5.

~~Part-time employees and eligible~~ Eligible intermittent employees will receive holiday pay proportionate to the number of hours they are ~~regularly~~ scheduled to work on an observed holiday.

B. Personal Holiday Leave: Full-time employees are eligible to accrue two (2) hours of personal holiday leave each month. Personal holiday leave for part-time employees who work 20 or more but less than 40 hours per week will be prorated based upon the number of hours they work each week. No employee may accrue more than forty (40) hours of personal holiday leave. Intermittent and temporary employees/interns are not eligible to receive personal holiday leave.

Upon separation from First 5 Contra Costa, an employee will be paid for any unused accrued personal holiday leave at the employee's then current rate of pay.

C. Vacation: Full-time employees are eligible to accrue paid vacation each month according to years of service. Vacation for part-time and intermittent employees working more than one (1) but less than 40 hours per week will be prorated based upon the number of hours they work. Temporary employees/interns are not eligible to receive vacation benefits.

Vacation accrual rates and accrual maximums based upon years of service for full-time employees are reflected in the following table. No employee may accrue more than the designated maximum hours of vacation.

Length of Service	Monthly Accrual Hours	Maximum Cumulative Hours
Under 11 years	10	240
11 years	10 2/3	256
12 years	11 1/3	272
13 years	12	288
14 years	12 2/3	304
15 through 19 years	13 1/3	320

Comment [SG1]: Clarified language and inserted language that employees who work 20 hours or more per work week are entitled to observe a holiday (time off work) in proportion to their regular weekly schedule.

20 through 24 years	16 2/3	400
25 through 29 years	20	480
30 + years	23 1/3	560

Upon separation from First 5 Contra Costa, an employee will be paid for any unused accrued vacation at the employee's then current rate of pay.

D. Vacation Buy Back: Exempt employees may elect payment of up to one-third (1/3) of their annual vacation accrual, subject to the following conditions:

1. the choice can be made only once every twelve (12) months with eleven (11) full months between each election;
2. payment is based on an hourly rate determined by dividing the employee's monthly salary by 173.33; and
3. the maximum number of vacation hours that may be paid in any one sale is one-third (1/3) of the annual accrual.

E. Sick Leave: Full-time employees are eligible to accrue eight (8) hours of sick leave per month. Sick leave for part-time and intermittent employees working more than one (1) but less than 40 hours per week will be prorated based upon the number of hours they work. There is no cap on sick leave accruals.

On July 1 each fiscal year, temporary employees/interns will be credited with twenty-four (24) hours of sick leave. Temporary employees/interns hired during the fiscal year will receive 24 hours of sick leave regardless of when hired. Sick leave may be used 90 days from date of hire. Sick leave is non-accruable and all balances will be zeroed out each June 30.

There will be no payout of accrued sick leave upon separation from First 5 Contra Costa.

F. Administrative Leave: On January 1 each year, full-time exempt employees in an active paid status will be credited with sixty (60) hours of paid administrative leave. Part-time exempt employees receive an amount proportionate to their established work schedule. Non-exempt, intermittent and temporary employees/interns are not eligible to receive administrative leave.

Employees hired or promoted to exempt positions are eligible for administrative leave on the first day of the month following their appointment date and will receive administrative leave on a prorated basis for that first year.

Administrative leave is non-accruable and all balances will be zeroed out each December 31. There is no payout of administrative leave balances upon separation from First 5 Contra Costa.

G. Disability Insurance: First 5 Contra Costa provides short and long-term disability insurance for eligible employees. Eligibility is outlined below:

	Full-Time and Part-Time Employees who work at least 20 hours per week		**Part-Time Employees** who work less than 20 hours per week and **Intermittent Employees**		**Temporary Employees /Interns**
	Exempt	Non-exempt	Exempt	Non-exempt	Non-exempt

Long Term Disability Insurance*	Included with benefits	Provided by First 5	Not eligible	Not eligible	Not eligible
Short Term Disability* (CA State Disability Insurance-SDI)	Provided by First 5	SDI through payroll deduction	Not eligible	SDI through payroll deduction	SDI through payroll deduction

*The criteria for current coverage through Contra Costa County benefits are based upon exempt and non-exempt classification.

H. Disability Insurance for Partial Wage Replacement: First 5 Contra Costa will provide the same disability coverage for employees as provided through and administered by Contra Costa County:

1. Exempt employees participate in the Long-Term Disability Insurance program with a replacement limit of eighty-five (85%) of total monthly base earnings reduced by any deductible benefits.

2. Non-exempt, Intermittent and paid Temporary/Intern employees participate in California's State Disability Insurance program through payroll deductions as mandated by the California Unemployment Insurance Code and administered by the Employment Development Department.

I. Supplemental Disability Insurance: First 5 Contra Costa provides additional short and long-term disability insurance, at no cost to employees, for full-time and part-time employees working 20 hours or more per week. Part-time employees working less than 20 hours per work, intermittent employees, and temporary employees/interns are not eligible to receive supplemental disability insurance.

J. Paid Family Leave: Non-exempt employees who participate in California's State Disability Insurance program through payroll deductions may be eligible for up to six (6) weeks of the state's Paid Family Leave program, which provides partial wage replacement for absences related to care of a family member, or bonding with a new child. This program is coordinated through the State Employment Development Department (EDD).

5. Health, Dental, and Related Benefits for Active Employees

For a full description of plans, rates and benefits listed below, refer to the County Employee Benefits information online at www.co.contra-costa.ca.us.

A. Health Plan Coverages: First 5 Contra Costa will provide the same medical and dental ~~coverage~~ plans for employees and for their eligible family members, as provided through Contra Costa County and the following providers:

Comment [SG2]: Clarified language.

1. Contra Costa Health Plan
2. Kaiser Permanente
3. Health Net
4. Delta Dental Premier
5. Delta Care (PMI)

B. Monthly Premium Subsidy:

1. For each health plan, First 5 Contra Costa's monthly premium subsidy is a set

percentage of the premium charged by the plan.

First 5 Contra Costa will pay 80% of the monthly health plan premium for permanent full-time and part-time employees working at least 20 hours per week. Employees are required to pay 20% of the monthly premium.

2. For each dental plan, First 5 Contra Costa's monthly premium subsidy is the same rate as County unrepresented employees.

3. Intermittent employees are eligible to participate in the health and/or dental plans offered, and will pay the full premiums costs of the plan. Temporary employees/interns are not eligible to participate in the optional health and dental plans.

4. First 5 Contra Costa will pay the following monthly premium subsidies for permanent full-time and part-time employees working 20 hours or more per week ~~for the term of this resolution~~:

HEALTH PLANS	**2017 Employer Monthly Contribution**	
	PLAN A	**PLAN B**
Contra Costa Health Plan-Basic Plan		
Employee	$619.48	$686.70
Employee & 1 or more dependents	$1,475.92	$1,631.70
Kaiser Permanente-Basic Plan		
Employee	$627.77	$511.86
Employee & 1 or more dependents	$1463.51	$1,192.62
Kaiser Permanente-High Deductible Health Plan		
Employee	$413.24	-
Employee & 1 or more dependents	$962.85	-
Health Net HMO Plan-Basic Plan		
Employee	$1,107.51	$770.14
Employee & 1 or more dependents	$2,716.80	$1,889.23
Health Net CA & Out of Area PPO Plan-Basic Plan		
Employee	$1,417.13	$1,275.77
Employee & 1 or more dependents	$3,366.50	$3,030.66

DENTAL PLANS	**DELTA DENTAL**	**DELTA CARE (PMI)**
For CCHP Plans		
Employee	$41.17	$24.83
Family	$93.00	$53.65
For Health Net Plans		
Employee	$34.02	$20.73
Family	$76.77	$44.79
For Kaiser Permanente Plans		
Employee	$34.02	$20.73
Family	$76.77	$44.79
Without a Health Plan		
Employee	$43.35	$26.73

Comment [SG3]: Deleted/not needed

Comment [SG4]: Inserted: Approved by the Commission October 12, 2016

Comment [SG5]: 2017 Rates for Delta Care (PMI) decreased $0.58 for employees; and decreased $1.26 for employee & 1 or more.

This was clarified by County Benefits after the Commission approved the rates in October.

Family	$97.81	$57.77

5. In the event that First 5 Contra Costa's premium subsidy amounts are greater than one hundred percent (100%) of the applicable premium of any health or dental plan, for any plan year, First 5's contribution will not exceed one hundred percent (100%) of the applicable plan premium.

C. Health Plan Coverages and Provisions: The following provisions are applicable to First 5 Contra Costa Employee's Health and Dental Plan participation:

1. Employee Contribution Deficiencies: First 5 Contra Costa contributions to the Health Plan and/or Dental Plan premiums are payable for any month in which the employee is paid. If an employee's compensation in any month is not sufficient to pay the employee share of the premium, the employee must make up the difference by remitting the unpaid amount to the County Auditor Controller. The responsibility for this payment rests solely with the employee.

2. Leave of Absence: First 5 Contra Costa will continue to pay its shares of health and/or dental plan premiums for enrolled employees who are on an approved paid or unpaid leave of absence provided the employee's share of the premiums is paid by the employee.

3. Health Savings Account (HSA): Permanent full-time and part-time employees working at least 20 hours per week and who are enrolled in the Kaiser High Deductible Health Plan may elect to enroll in a Health Savings Account (HSA). Employees may contribute up to the maximum annual contribution rate for HSAs as set forth in the Internal Revenue Code. Funds contributed to the HSA are invested as directed by the employee. First 5 does not provide any recommendations or advice on investment or use of HSA funds. Employees are responsible for paying any HSA account management fees charged by the HSA administrator. First 5 does not manage or administer the HSA. The HSA is not available to temporary or intermittent employees.

Comment [SG6]: Inserted: Approved by the Commission October 12, 2016.

D. Family Member Eligibility Criteria: The following persons may be enrolled as the eligible Family Members of a medical and/or dental plan Subscriber:

1. Health Insurance
   a. Eligible Dependents:
      - Employee's legal spouse
      - Employee's qualified domestic partner (State registered domestic partnership or Contra Costa County non-registered domestic partnership)
      - Employee's child to age 26
      - Employee's disabled child who is over age 26, unmarried, and incapable of sustaining employment due to a physical or mental disability that existed prior to the child attainment of age 19.
   b. "Employee's child" includes natural child, step-child, adopted child, child of a qualified domestic partner, and a child specified in a Qualified Medical Child Support Order (QMCSO) or similar court order.

2. Dental Insurance
   a. Eligible Dependents:
      - Employee's legal spouse
      - Employee's qualified domestic partner (State registered domestic

partnership or Contra Costa County non-registered domestic partnership)

- Employee's unmarried child who is:
  - i. Under age 19; or
  - ii. Age 19 or above, but under age 24; and
    - (a) Resides with the employee for more than 50% of the year, excluding time living at school; and
    - (b) Receives at least 50% of their support from employee; and
    - (c) Is enrolled and attends school on a full-time basis, as defined by the school , unmarried and living with you (except when away at school)
  - iii. Employee's disabled child who is over age 19, unmarried, incapable of sustaining employment due to a physical or mental handicap that existed prior to the child's attainment of age 19 and is your dependent as defined by the Internal Revenue Service.

b. "Employee's child" includes natural child, step-child, adopted child, child of a qualified domestic partner, and a child specified in a Qualified Medical Child Support Order (QMCSO) or similar court order.

~~E. Computer Vision Care (CVC) Program: Employees are eligible to receive an annual CVC vision examination at First 5's expense provided that the employee regularly uses a video display terminal at least an average of two (2) hours per day as certified by their supervisor.~~

~~Employees must make their request through the County Benefits Department. Should prescription eyeglasses be prescribed for the employee following the examination, First 5 Contra Costa agrees to provide, at no cost, basic eye wear consisting of a fifty dollar ($50) frame and single, bifocal or trifocal lenses. Employees may use up to two (2) total hours of paid time for an exam and to obtain glasses.~~

~~Employees may solely at the employee's expense, include blended lenses and other care, services or materials not covered by the Plan.~~

Comment [SG7]: Deleted: Approved by the Commission October 12, 2016

E. Voluntary Vision Plan: Full-time, part-time, and intermittent employees are eligible to enroll in a voluntary vision plan. Employees will pay the full premium costs of the plan.

Comment [SG8]: Inserted: Approved by the Commission October 12, 2016

F. CalPERS Long-Term Care: Eligible employees may voluntarily elect to purchase long-term care at their expense through the CalPERS Long-Term Care Program.

G. Premium Conversion Plan: Employees may elect to participate in the Premium Conversion Plan designed to qualify for tax savings under Section 125 of the Internal Revenue Code, but tax savings are not guaranteed. The program allows employees to use pre-tax dollars to pay health and dental premiums.

6. Health, Dental and Related Benefits for Separated or Retired Employees

For a full description of plans, rates and benefits listed below, refer to the County Employee Benefits information online at www.co.contra-costa.ca.us.

A. Coverage Upon Separation: An employee who separates from First 5 Contra Costa is covered by his/her health and/or dental plan through the last day of the month in

which s/he separates. Employees who separate from First 5 Contra Costa employment may continue group health and/or dental plan coverage to the extent provided by the COBRA laws and regulations, at the same rates as Contra Costa County Cobra plans.

B. Coverage Upon Retirement: An employee who retires from First 5 Contra Costa may be eligible to continue his/her health and/or dental plan at the retiree rates as approved by the Commission. Refer to Section 10D for additional information.

7. Workers' Compensation

First 5 Contra Costa provides workers' compensation insurance to employees injured within the course and scope of their employment with medical and other benefits as prescribed in the California Labor Code.

8. Flexible Spending Accounts

Employees working 20 hours or more per week are eligible to participate in the following flexible spending accounts. Part-time employees working less than 20 hours per work, intermittent employees, and temporary employees/interns are not eligible to participate.

A. Health Care Spending Account: After six (6) months of continuous employment, employees working 20 hours or more per week may elect to participate in a Health Care Spending Account (HCSA) Program designated to qualify for tax savings under Section 125 of the Internal Revenue Code. Such savings are not guaranteed. This program allows employees to set aside a predetermined amount of before-tax dollars from their pay each calendar year for health care expenses that are not reimbursed by any other health benefit plans. HCSA dollars may be expended on any eligible medical expenses allowed by Internal Revenue Code Section 125. Any unused balance is forfeited and cannot be recovered by the employee.

B. Dependent Care Assistance Program: The Dependent Care Assistance Program (DCAP) is designed for employees to qualify for tax savings under Section 129 of the Internal Revenue Code. Such savings are not guaranteed. Any unused balance is forfeited and cannot be recovered by the employee.

9. Life Insurance

A. Life Insurance Benefit Under Health and Dental Plans: For employees who are enrolled in First 5 Contra Costa's program of medical or dental coverage as either the primary or the dependent, term life insurance in the amount of ten thousand dollars ($10,000) will be provided by First 5 Contra Costa.

B. Voluntary Supplemental Life Insurance: In addition to the life insurance benefits provided by this resolution, employees may subscribe voluntarily and at their own expense for supplemental life insurance. Employees may elect from $20,000 up to $500,000 of coverage as provided through and administered by Contra Costa County.

C. Non-exempt Employees: Non-exempt employees are covered by term life insurance, at First 5 Contra Costa's expense, in the amount of forty thousand dollars ($40,000) in addition to the insurance provided under Section 7.A.

D. Exempt Employees: Exempt employees are covered by term life insurance, at First 5 Contra Costa's expense, in the amount of fifty seven thousand dollars ($57,000) in

addition to the insurance provided under Section 7.A.

E. Executive Director: In lieu of the insurance provided under Section D, the Executive Director is covered by term life insurance, at First 5 Contra Costa's expense, in the amount of sixty thousand dollars ($60,000) in addition to the insurance provided under Section 7.A.

10. Retirement

The Contra Costa County Employees' Retirement Association (CCCERA) was established by the County of Contra Costa in 1945. CCCERA is governed by the County Employees' Retirement Law of 1937 (California Government Code Section 31450 et. seq), the California Public Employees' Pension Reform Act of 2013 (PEPRA), and the regulations, procedures, and policies adopted by CCCERA's Board of Retirement.

CCCERA is a cost-sharing multiple employer public employee retirement association whose main function is to provide service retirement, disability, death and survivor benefits to members employed by First 5 Contra Costa.

Eligible First 5 Contra Costa employees are General Members. General members hired prior to January 1, 2013, are eligible to retire once they attain the age of 70 regardless of service or at age 50 and have acquired 10 or more years of retirement service credit. A member with 30 years of service is eligible to retire regardless of age. General members who are first hired on or after January 1, 2013, are eligible to retire once they have attained the age of 70 regardless of service or at age 52, and have acquired five years of retirement service credit. Part-time employees working less than 20 hours per work, intermittent employees, and temporary employees/interns are not eligible to participate.

Comment [SG9]: Clarified language.

The retirement benefit is based upon age at retirement, final average compensation, years of retirement service credit and retirement plan and tier.

CCCERA may approve an annual cost-of-living benefit to all retirees. The cost-of-living adjustment, based upon the Consumer Price Index for the San Francisco-Oakland-San Jose Area, is capped at 3.0% for General Tier 1 and PEPRA General Tier 4. The plan also provides a post retirement lump sum death benefit of $5,000 to the member's beneficiary (§31789.5) paid from the Post Retirement Death Benefit Reserve.

The program is a defined benefit retirement plan and includes mandatory deductions, as determined by CCCERA.

A. Membership in the Contra Costa County Employees' Retirement Association (CCCERA). Full-time employees and part-time employees who work twenty (20) hours or more per week are members of the Contra Costa County Employees' Retirement Association (CCCERA). Participation is automatic and cannot be waived. Employees become members of CCCERA effective on the first full pay period after employment.

B. The member and employer contribution rates are split into two sets;

1. Employees with membership dates before January 1, 2013 are Legacy Members enrolled in Tier 1 Enhanced.

2. Employees with membership dates on or after January 1, 2013 are PEPRA Members enrolled in Tier 4.

PEPRA Members are governed by the California Public Employees' Pension Reform Act of 2013 (PEPRA) (Chapters 296 and 297, Statues of 2012). To the extent that this resolution conflicts with any provision of PEPRA, PEPRA governs.

Contribution rates for employers and employees are determined by the CCCERA Board of Directors. For more information about contribution rates contact CCCERA at 925-521-3960 or online at www.cccera.org.

C. Pre-Tax Payment of Retirement Contributions. First 5 Contra Costa follows Section 414(h) (2) of the Internal Revenue Code which allows the County Auditor-Controller to reduce the gross monthly pay of employees by an amount equal to the employee's total contribution to the County Retirement System before Federal and State income taxes are withheld, and forward that amount to the Retirement system. This program of deferred retirement contribution will be universal and non-voluntary as required by statute.

D. Health and Dental Benefit Participation Upon Retirement

For a full description of plans, rates and benefits listed below, refer to the County Employee Benefits information online at www.co.contra-costa.ca.us.

1. Upon retirement ~~and for the term of this resolution~~, eligible employees and their eligible family members may remain in their First 5 Contra Costa health/dental plan, but without First 5 Contra Costa-paid life insurance coverage, if immediately before their proposed retirement the employees and dependents are either active subscribers to one of the contracted health/dental plans or if while on authorized leave of absence without pay, they have retained continuous coverage during the leave period. First 5 Contra Costa will pay the health/dental plan monthly premium subsidies for eligible retirees and their eligible family members at the same rates as Contra Costa County retirement plans.

2. Employees Hired After December 31, 2006: All employees hired after December 31, 2006 are eligible for retiree health/dental coverage pursuant to subsections D.1 above and E. below, upon completion of fifteen (15) years of service as an employee of First 5 Contra Costa. For purposes of retiree health eligibility, one year of service is defined as one thousand (1,000) hours worked within one anniversary year. The existing method of crediting service while an employee is on an approved leave of absence will continue ~~for the duration of this Resolution~~. Upon retirement, employees (and their eligible family members) are eligible to receive a monthly premium subsidy for health and dental plans at the same rates as Contra Costa County retiree plans.

3. Employees Hired on or after January 1, 2009: Eligible employees who retire under the Contra Costa County Employees' Retirement Association (CCCERA), and their eligible family members, may retain continuous coverage of a health and/or dental plan, however no monthly premium subsidy will be paid by First 5 Contra Costa for any health or dental plan after they retire. They will receive continuous coverage of a health and/or dental plan, provided that (i) he or she begins to receive a monthly retirement allowance from CCCERA within 120 days of separation from First 5 Contra Costa employment and, (ii) he or she pays the full premium cost under the health and/or dental plan without any First

Comment [SG10]: Deleted/not needed.

Comment [SG11]: Clarified language.

Comment [SG12]: Deleted/not needed.

5 Contra Costa premium subsidy.

4. Any person who becomes age 65 on or after January 1, 2009 and who is eligible for Medicare must immediately enroll in Medicare Parts A and B.

E. Employees Who File For Deferred Retirement: Employees, who resign and file for a deferred retirement and their eligible family members, may continue in their First 5 Contra Costa group health and/or dental plan under the following conditions and limitations.

1. Health and dental coverage during the deferred retirement period is entirely at the expense of the employee, without any First 5 Contra Costa contributions.

2. Life insurance coverage is not included.

3. To continue health and dental coverage, the employee must:
   a. be qualified for a deferred retirement under the 1937 Retirement Act provisions;
   b. be an active member of a First 5 Contra Costa group health and/or dental plan at the time of filing their deferred retirement application and elect to continue plan benefits;
   c. be eligible for a monthly allowance from the Retirement System and direct receipt of a monthly allowance within twenty-four (24) months of application for deferred retirement; and
   d. file an election to defer retirement and to continue health benefits hereunder with the Benefits Division within thirty (30) days before separation from First 5 Contra Costa.

4. Deferred retirees who elect continued health benefits hereunder and their eligible family members may maintain continuous membership in their health and/or dental plan group during the period of deferred retirement by paying the full premium for health and dental coverage on or before the 10th of each month, to the Contra Costa County Auditor-Controller. When the deferred retirees begin to receive retirement benefits, they will qualify for the same health and/or dental coverage pursuant to subsection D.1 above, as similarly situated retirees who did not defer retirement.

Comment [SG13]: Clarified language.

5. Deferred retirees may elect retiree health benefits hereunder without electing to maintain participation in their First 5 Contra Costa health and/or dental plan during their deferred retirement period. When they begin to receive retirement benefits, they will qualify for the same health and/or dental coverage pursuant to subsection D.1 above, as similarly situated retirees who did not defer retirement, provided reinstatement to a Contra Costa group health and/or dental plan will only occur following a three (3) full calendar month waiting period after the month in which their retirement allowance commences.

Comment [SG14]: Clarified language.

6. Employees who elect deferred retirement will not be eligible in any event for First 5 Contra Costa health and/or dental plan subsidy unless the member draws a monthly retirement allowance within twenty-four (24) months after separation from First 5 Contra Costa.

7. Deferred retirees and their eligible family members are required to meet the same eligibility provisions for retiree health/dental coverage as similarly situated retirees who did not defer retirement.

F. For purposes of Section 10 only, “eligible family members” does not include Survivors of employees or retirees.

11. Deferred Compensation

Employees working 20 hours or more per week are eligible to participate in the Deferred Compensation plan. Part-time employees working less than 20 hours per work, intermittent employees, and temporary employees/interns are not eligible to participate.

Refer to the County Employee Benefits information online at www.co.contra-costa.ca.us.

A. Deferred Compensation Incentive: First 5 Contra Costa will contribute eighty-five dollars ($85) per month to each eligible employee who participates in the Deferred Compensation Plan. To be eligible for this Deferred Compensation Incentive, the employee must contribute to the deferred compensation plan as indicated below.

Employees with Current Monthly Salary of:	Qualifying Base Contribution Amount	Monthly Contribution Required to Maintain Incentive Program Eligibility
$2,500 and below	$250	$50
$2,501 – 3,334	$500	$50
$3,335 – 4,167	$750	$50
$4,168 – 5,000	$1,000	$50
$5,001 – 5,834	$1,500	$100
$5,835 – 6,667	$2,000	$100
$6,668 and above	$2,500	$100

Employees who discontinue contributions or who contribute less than the required amount per month for a period of one (1) month or more will no longer be eligible for the eighty-five dollar ($85) Deferred Compensation Incentive. To reestablish eligibility, employees must again make a Base Contribution Amount as set forth above based on current monthly salary. Employees with a break in deferred compensation contributions either because of an approved medical leave or an approved financial hardship withdrawal will not be required to reestablish eligibility. Further, employees who lose eligibility due to displacement by layoff, but maintain contributions at the required level and are later employed in an eligible position, will not be required to reestablish eligibility.

B. Maximum Annual Contribution: All of the employee and First 5 Contra Costa contributions ~~set forth in Subsection A.~~ will be added together to ensure that the annual maximum contribution to the employee’s deferred compensation account does not exceed the annual maximum contribution rate set forth in the United States Internal Revenue Code.

Comment [SG15]: Deleted/not needed.

C. Deferred Compensation Plan (IRC 457) Loan Provision: Employees who participate in the Deferred Compensation program are eligible to borrow funds from their Deferred Compensation account.

12. Professional Development and Training

A. Career Development Training Reimbursement: First 5 Contra Costa provides

educational assistance reimbursement to up to $500 per year for eligible employees, with Executive Director approval.

B. Management Development Policy: First 5 Contra Costa may elect to pay the cost of employees' attendance at professional conferences or trainings as they relate to an employee's job function, with Executive Director approval.

C. Memberships, Subscriptions, Dues: First 5 Contra Costa may elect to pay the cost of memberships, subscriptions, etc. as they relate to an employee's job function, with Executive Director approval.

D. Executive Director Memberships, Subscriptions, Dues: First 5 Contra Costa's Executive Director is eligible for up to $825 reimbursement, in each 2 year period, for memberships, subscriptions, etc.

13. Mileage Reimbursement

A. Mileage Reimbursement: First 5 Contra Costa will pay a mileage allowance for the use of personal vehicles on First 5 Contra Costa business at the rate allowed by the Internal Revenue Service (IRS) as a tax deductible expense, adjusted to reflect changes in this rate on the date it becomes effective or the first of the month following announcement of the changed rate by the IRS, whichever is later.

14. Executive Director Automobile Allowance

A. First 5 Contra Costa's Executive Director receives a $300 monthly car allowance.

FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Monday December 5, 2016

Agenda Item 6.0

Recognize First 5 staff who have surpassed service milestones and appreciate the entire staff for their continuing dedication and accomplishment

FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Staff Report
December 5, 2016

ACTION:	
DISCUSSION:	**X**

TITLE: Staff Appreciation and Service Milestones

Introduction:
The Commission has adopted the practice of annually appreciating First 5 staff and recognizing those who have surpassed service milestones this year.

Background:
The Commission recognizes staff who have achieved five-year increments of service with First 5.

This year, two staff members have surpassed their fifteen year anniversaries:
Monica Nevarez, Grants and Contracts Assistant II
Alejandra Plascencia, Community Liaison East County and Central County

One staff member has surpassed their ten year anniversary:
Vanessa Miller, Grants and Contracts Assistant II

And one staff member has surpassed their five year anniversary:
Walter Aab, Public Affairs Program Assistant II

Recommendation:
That the Commission recognize staff who have surpassed service milestones and appreciate the entire staff for their continuing dedication and accomplishment.

FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Monday December 5, 2016

Agenda Item 7.0

Consider approving the Slate of Officers of the Commission for 2017

FIRST 5 CONTRA COSTA
CHILDREN AND FAMILIES COMMISSION

Staff Report
December 5, 2016

ACTION: X
DISCUSSION: _____

TITLE: Consider approving the Slate of Officers for the Commission for 2017

The Nominations Committee met on October 12, 2016 and prepared a slate of officers for the election on December 05, 2016.

Commissioners were invited to serve as an officer (Chair, Vice-Chair or Secretary/Treasurer) and thereby on the Executive Committee – or if they want to propose another Commissioner for the Nominating Committee's consideration. Note that according to our Bylaws, only Commissioners may serve as officers of the Commission.

In addition, there is a non-voting seat on the Executive Committee that may be filled by either a Commissioner or Alternate Commissioner. This seat will also be on the slate prepared by the Nominating Committee.

In accordance with the Bylaws, the Nominating Committee sent out this Slate of Officers for election for 2017 to the entire Commission on November 15, 2016:

Chair:	Kathy Gallagher
Vice-Chair:	Gareth Ashley
Secretary / Treasurer:	John Jones
Additional Non-Voting Member:	Marilyn Lucey

Recommendation:
Approve the Slate of Officers for Calendar Year 2017.

Monday December 5, 2016

Agenda Item 9.0

Annual Report to First 5 California for Fiscal Year 2015-2016

Staff Report
December 5, 2016

ACTION: ___X___
DISCUSSION: _____

TITLE: Annual Report for Fiscal Year 2015-2016

By statute, the Commission is required to conduct a public hearing on its annual report to the California Children and Families Commission. The attached report meets the annual report requirements set by First 5 California.

Data presented here is drawn from Family Surveys, quarterly funded program reports, ongoing data collection activities, and special evaluation studies. All reports are based on services to parents, children, other family members, and early education care providers.

The First 5 California annual report framework aggregates demographic information and common key findings across 58 counties within "Services" and "Result Areas." These do not necessarily align with First 5 Contra Costa's Initiatives.

The attached documents were submitted to First 5 California on October 28, 2016:

- County Revenue and Expenditure Summary (AR 1) FY 2015/16
- Evaluation Summary Overview of selected funded activities (AR 3) FY 2015/16
- Two brief narratives of compelling service outcomes that address at least two of First 5 California's four Result Areas for Improved Health, Improved Family Functioning, and Improved Child Development based on evaluations. These include:
    - Highlight of Targeted Intensive Family Support Services
    - Highlight of Quality Early Childhood Care (ECE) Investments
- Three brief explanations of funds expended in the Result Area for Improved Systems of Care for each of three separate categories: Policy and Broad Systems Change Efforts, Public Education and Information, and Organizational Support. These include:
    - Service Highlight of Policy and Broad Systems Change Efforts - FESP
    - Service Highlight of Public Education and Information – Quality Matters
    - Service Highlight of Organizational Support – Database Management
- Demographic worksheets for each funded set of services as outlined by the First 5 California's Result and Service Areas.

Recommendation:
Adopt the Annual Report for Fiscal Year 2015-2016.

FY2015/16 First 5 California and First 5 Contra Costa Categories

This table aligns the First 5 California Result Areas and Service Categories with First 5 Contra Costa Initiatives and Programs.

First 5 Initiatives:
Early Childhood Education (ECE), Early Intervention (EI), Family Support (FS), Community Information and Engagement (CIE), Evaluation (Eval)

First 5 California Result Areas and Service Categories	Initiative	First 5 Contra Costa Programs
Result Area 1: Improved Family Functioning		
Community Resource and Referral	CIE	Crisis Center 211 Line
Distribution of Kit for New Parents	CIE	New Parent Kit and Baby Bag
Adult and Family Literacy Programs	ECE/FS	(ECE) Raising a Reader / Tandem (shift mid-year)
Targeted Intensive Family Support Services	EI	Mental Health Therapeutic Services and Next Steps (AOD) Triple P Through the Looking Glass Developmental Playgroups Mt Diablo Unified School District Crossroads High School Teen Parenting Program YMCA of the East Bay Teen Parenting Program Help Me Grow 211
General Parenting Education and Family Support Programs	FS CIE	The 5 First 5 Centers and Community Advisory Councils Community Engagement Program
Quality Family Functioning Systems Improvement	FS/Eval	First 5 Centers Facilities and Database Support
Result Area 2: Improved Child Development		
Preschool Programs for 3- and 4-Year-Olds	ECE	Preschool Makes a Difference Scholarships (Mt. Diablo Adult Education Literacy Preschools
Infants, Toddlers, and All-Age Early Learning Programs	EI	Shelters: Shelter, Inc. and GRIP
Early Education Provider Programs	ECE	Professional Development Program: Contra Costa College, Diablo Valley College, and Los Medanos College CARES Plus Stipends
Quality ECE Investments	ECE ECE/CIE	Child Care Council Quality Improvement (Coaching for QRIS) Contra Costa County Office of Education (QRIS Support) Quality Matters Public Awareness Campaign

Result Area 3: Improved Child Health		
Nutrition and Fitness	CIE	Sugar Bites Public Awareness Campaign Community Engagement Sports Classes
Maternal and Child Health Care	FS	Home Visiting: ASPIRAnet and Brighter Beginnings Alameda First 5 Hospital Outreach Coordinator at Alta Bates
Comprehensive Screening and Assessments	EI	Help Me Grow Systems Development
Targeted Intensive Intervention for Identified Special Needs	EI	Child Care Council Inclusion Program Child Care Solutions Program Care Parent Network
Quality Health Systems Improvement	FS EI CIE/EI	Home Visiting Training and Support Early Childhood Leadership Alliance (ECLA) Pediatric Outreach for Screening Support Help Me Grow Social Marketing
Result Area 4: Improved Systems of Care		
Policy and Broad Systems-Change Efforts	CIE	Family Economic Security Partnership (FESP)
Organizational Support	FS/Eval	Database Support
Public Education and Information	CIE	Public Information and Communications

Annual Report Form 1 (AR-1)
County Revenue and Expenditure Summary
For Fiscal Year July 1, 2015 - June 30, 2016

County: Contra Costa **Tuesday, November 15, 2016**

Revenue Detail	
Tobacco Tax Funds	$8,416,552
CARES Plus Program Funds, Round 2	$333,182
CSP, RFA 1 Extension	$0
CSP, RFA 3 Extension	$0
Small County Augmentation Funds	$0
IMPACT	$0
Other Funds	$1,312,283
Other Funds Description	Race to the Top $636,421 Preschool QRIS Block Grant $553,762 Infant Toddler QRIS Block Grant $47,100 Contra Costa County MHSA Grant $75,000
Grants	$678,550
Grants Description	Long Foundation Help Me Grow $640,000 Community Engagement Grants $17,550 Kaiser Foundation $21,000
Donations	$0
Revenue From Interest Earned	$176,638
Total Revenue	**$10,917,205**

Improved Family Functioning	
Community Resource and Referral	$131,158
Distribution of Kit For New Parents	$74,256
Adult and Family Literacy Programs	$156,000
Targeted Intesive Family Support Services	$787,207
General Parenting Education and Family Support Programs	$2,434,108
Quality Family Functioning Systems Improvement	$268,396
Total	**$3,851,125**

Annual Report Form 1 (AR-1)
County Revenue and Expenditure Summary
For Fiscal Year July 1, 2015 - June 30, 2016

Improved Child Development	
Preschool Programs for 3- and 4- Year Olds	$172,378
Infants, Toddlers, and All-Age Early Learning Programs	$286,416
Early Education Provider Programs	$1,178,322
Kindergarten Transition Services	$0
Quality ECE Investments	$1,461,004
Quality ECE Investments Description	
Total	**$3,098,120**

Improved Child Health	
Nutrition and Fitness	$133,976
Health Access	$0
Maternal and Child Health Care	$1,468,908
Oral Health	$0
Primary and Specialty Medical Services	$0
Comprehensive Screening and Assessments	$101,381
Targeted Intensive Intervention for Identified Special Needs	$1,249,067
Safety Education and Injury Prevention	$0
Tobacco Education and Outreach	$0
Quality Health Systems Improvement	$371,141
Quality Health Systems Improvement Description	
Total	**$3,324,473**

Improved Systems of Care	
Policy and Broad Systems-Change Efforts	$594,334
Organizational Support	$225,222
Public Education and Information	$343,825
Total	**$1,163,381**

Annual Report Form 1 (AR-1)
County Revenue and Expenditure Summary
For Fiscal Year July 1, 2015 - June 30, 2016

Expenditure Detail	
Program Expenditures	$11,437,099
Administrative Expenditures	$1,144,131
Evaluation Expenditures	$906,062
Total Expenditures	**$13,487,292**
Excess (Deficiency) of Revenues Over (Under) Expenses	**($2,570,087)**

Other Financing Sources	
Sale(s) of Capital Assets	$0
Other: Specify Source Below	$0
Other Description	
Total Other Financing Sources	**$0**

Net Change in Fund Balance	
Fund Balance - Beginning July 1	$30,806,443
Fund Balance - Ending June 30	$28,236,356
Net Change In Fund Balance	**($2,570,087)**

FY Fund Balance	
Nonspendable	$346,795
Restricted	$549,405
Committed	$841,227
Assigned	$4,574,141
Unassigned	$21,924,788
Total Fund Balance	**$28,236,356**

Annual Report Form 1 (AR-1)
County Revenue and Expenditure Summary
For Fiscal Year July 1, 2015 - June 30, 2016

Expenditure Notes

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 15/16
July 1, 2015-June 30, 2016

County: **Contra Costa**

Provide a description of the evaluation activities completed during the fiscal year

Key Evaluation Activities

- Participated in the preparation of the new four-year strategic plan with an emphasis on aligning efforts with outcomes and creating systems change.
- Prepared an Evaluation Framework for the new strategic plan with community indicators, measures of efforts and outcomes, possible evaluation studies, and evaluation support to staff/programs.
- Continued participation on the Bay Area WELS Data Utilization Workgroup and WELS meetings. Participated in the hiring of the Bay Area Regional Database Coordinator.
- Continued to refine data collection measures and procedures, rigorously monitor data quality, consolidate data storage, and streamline the reporting feedback loop to contractors.
- Worked closely with our database vendors to develop specialized and advanced queries and reports to support contractor use of data as well as continued support for contractor use of Excel and Access for data tracking.
- Continued to update the data dashboard for the agency website as needed.

Family and Provider Survey

All contractors collect First 5 Family, Child and/or Provider Surveys in English or Spanish for all new participants each year. The Family and Child Survey captures demographics, health information, consumption of sugary drinks, reading practices, maternal education, special needs or concerns regarding child development, and exposure to smoking. Most baseline data have been collected since 2002, with over 2500 Family Surveys collected in FY15-16 from 20 programs.

Additional Data Collection Activities

Various data collection measures across four initiatives include evidence-based tools to capture information regarding specific services, activities and outcomes.

- For universal screening, all child-focused programs implement the ASQ-3.
- Parents attending Triple P classes complete the ECBI, Parenting Scale, DASS 21, and Evaluation Form.
- Pregnant and parenting teens complete pre/post surveys, and staff sends enrollment data and rates of graduation.
- Funding for Wrap-around, clinical mental health and substance recovery services is winding down, but staff continue to complete the Child Behavioral Checklist (CBCL).
- Mental health consultation and inclusion facilitation services use an Excel database to track intake/discharge data, service activity data, exit surveys, and child placement information.
- Professional Development Program staff use an Access database to track professional development activities, advancement data on the child development permit matrix, degree requirements and attainment of college degrees. County office of Education and First 5 staff use the WELS database to collect site applications, assessments, and rating information about sites participating in the QRIS program.

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 15/16
July 1, 2015-June 30, 2016

County: **Contra Costa**

- Literacy preschools use a pre/post reading survey. Several early care sites participated in Tandem's 3-county survey sample.
- First 5 Centers (family resource sites) use ETO online database to track registration, class participation, developmental playgroups, assessments, and other service data.
- A hospital and 2 home visiting programs use ETO to track referrals and services, assessments on children, assessments on postpartum depression, the home environment, and other child and family outcomes for families with infants.

In addition, an outside evaluator periodically interviews participants in designated programs that receive intensive or specialized services. Questions are based on the Commissions' priority areas as identified in the Strategic Plan.

Reporting Activities

All funded programs submit quarterly updates online that include units of service, counts of population reached, and brief narratives regarding specific service activities, issues and innovations with providing services, training and support needs. Additionally, contractors routinely include vignettes that highlight the impact of services on families, children and providers.

Describe the evaluation findings reported during the fiscal year

In FY 2015-2016, 2153 families completed a new Family Survey at intake:

- 26% of families earn less than $15,000 annually; another 32% earn between $15,000 and $30,000.
- 31% of adults speak only Spanish in the home, and an additional 17% speak both Spanish and English.
- 87% of families read to their child at least weekly; with 48% reading between 5-7 times p/week. 29% read to their child every day.
- 29% of parents have a concern that their child is not developing like other children.
- 19% of children have been identified as having a developmental delay or disability.
- 12% of children have been exposed to second hand tobacco smoke at home.

Professional Development

- In 2015/16, three local community colleges provided support to 717 students. 101 students met the educational requirements for a Permit or higher level permit and 41 graduated or became eligible for graduation with an AS/AS-T in ECE.
- Of the 97 child care programs participating in Quality Rating and Improvement System (QRIS) in 15/16, 29 are family child care homes and 68 are centers, including 48 publicly funded programs. 95 QRIS sites have been rated; see separate Narrative.

MDAE- Literacy Preschools

MDAE adult participants reported significant increases in children's active involvement in literacy activities including turning pages of the book, asking questions about the story, and "reading" the story to the parent. Parents also reported having more books available in the home and noted increased enjoyment by the child in sharing books with them over the course of the year.

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 15/16
July 1, 2015-June 30, 2016

County: **Contra Costa**

Mental Health Consultation and Inclusion Services
Of the 287 children with exit information, 71% were able to remain in their child care setting. An additional 22% were moved to a setting considered more beneficial. At exit, teachers, parents and consultants report improvement in child behavior, and provider skills in care and management of difficult behavioral issues.

Teen Parenting Programs
73% either completed or continued their high school education. Overall, teen parents demonstrated an increase in parenting knowledge over the course of intensive services as measured at baseline, with significant improvement in knowledge of child nutrition, bedtime routines, how to handle a child's fever, and MediCal coverage.

Triple P
Data indicate Triple P classes positively impacted caregivers and children, and participation helped ameliorate problems, particularly among families who at class start indicated the greatest need for support. Additional information in separate Narrative.

Developmental Screening
Of the 1,783 children screened in FY2015-16, 22% scored in the monitoring zone, and 28% needed a referral based on their score in at least one domain. Of the children screened, 22% were rescreened at least one month after their initial ASQ.

First 5 Centers
Over the course of services, parents overall reported an increase in knowledge of parenting, child development, where to go to help meet their family's needs and get help in times of crisis.

Home Visiting Programs
An in-depth study of Home Visiting Programs found that Home Visitors helped participants: Gain parenting knowledge and skills, support their child's development, achieve parenting goals, cope more effectively with stress and adversity, socialize with other parents, and access additional resources in the community. For example, 82% of participants felt they knew 'a lot' about what it takes to parent effectively after exiting the program compared to 28% at program intake.

Shelters
Of the 78 families with children 0-5 years served by two homeless shelters, 65% transitioned to stable housing (permanent or transitional).

Regional Groups/Community Engagement
Three grassroots parents groups conducted assessments of 75 parks in 5 cities and received $2 million in funding to refurbish the most neglected parks. The Groups also garnered millions in federal grants to make streets safer for pedestrians on heavily trafficked streets in two cities.

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 15/16
July 1, 2015-June 30, 2016

County: **Contra Costa**

Describe the policy impact of the evaluation results

Developing the Help Me System

- The Help Me Grow Summit was held in September with 51 attendees from 37 county, non-profit, and education agencies to plan and coordinate services in the HMG system. 70% of attendees believe the HMG model is "very" helpful in their work supporting families and children.
- A marketing campaign will be enhanced in 16/17 with Thomas J. Long Foundation grant funds. The $5 million 4-year grant jointly to Alameda and Contra Costa enabled wide-scale buildout of the HMG system.
- The Crisis Center implemented the HMG-211 support and referral call center. It served 474 families, 72% of whom are low income. It is a dedicated unit within 211 with a separate caller tracking system for referrals and support.
- Developmental Playgroups were attended by 189 children and their parents in 8-week sessions lead by child development specialists for children with mild to moderate developmental delays. 94% of parents reported that they will use what they learned to do activities at home with their child, and 74% said their child's developmental skills improved a lot as a result of the playgroup. Alameda and Contra Costa are planning a joint evaluation of the Developmental Playgroups using evidence-based tools.
- Efforts towards Universal Developmental Screening continued through our contractors who conducted screenings for 1,783 children. An effort began to train staff at pediatric sites to conduct screenings and refer families to HMG-211 and other services. 13 of the 47 pediatric clinics in the county are screening and participating in HMG, with more in the pipeline.

Triple P Expansion

- F5CC is expanding access to Triple P beyond the scope of classes and seminars. 24 decision-makers from Public Health, Behavioral Health, and criminal justice (Superior Court, DA Office, and Probation), and 2 school districts attended a lecture luncheon with Dr. Matt Sanders, the creator of the Triple P program. Dr. Sanders also facilitated 2 Master Class trainings for 20 Triple P practitioners in the county. Further efforts to integrate positive parenting practices into health and educational systems will continue.

Trauma-Informed Practices

- First 5CC partners with Zero Tolerance for Domestic Violence and county Behavioral Health Services Department to promote trauma-informed practices to multi-sector providers. The highlight activity was a day-long seminar with Dr. Vincent Filetti, the pioneer of the Adverse Childhood Experiences Study (ACES). 182 participants from every sector of the county attended. 45% reported that they were "Very well ready" to implement what they learned about how to identify and work with clients with adverse childhood experiences, and 42% said they were "Somewhat ready".

New Strategic Plan

- The Commission adopted its new 4-year Strategic Plan that begins the pivot towards increased policy work and prioritized direct services funding as revenues continue to decline.

Highlights of Services for QRIS Program

Contra Costa County FY 2015/2016

Result Area 2: **Improved Child Development**
Service: **Quality ECE Investments**

Most Compelling Service Outcome 1,000 characters

Of rated QRIS sites, 15% are Tier 5, 63% Tier 4, 18% Tier 3, and 4% Tier 2.

55 sites had a second rating; 45% increased their Tier, 49% remained in the same Tier, and 5% moved to a lower Tier. Of those that remained in the same Tier, 58% increased their score, although not enough to rise to a higher Tier.

Contra Costa's focus on raising the quality of Family Child Care Homes has been successful. Family Child Care Homes (FCCS) represent 29% of QRIS sites with a rating. They are slightly more likely to be rated Tier 5 (18% of them compared to 15% of all sites). 54% are in Tier 4, 18% in Tier 3, and 11% in Tier 2. Furthermore, FCCs with two ratings were much more likely to rise to a higher Tier—13 of the 18 FCCs with two ratings did so.

The extensive work with publically-funded sites also has been successful. 11% of these are at Tier 5; 70% are at Tier 4 and 19% at Tier 3. Of those with two ratings, 25% moved to a higher tier, 70% remained in the same Tier, and one site (5%) moved to a lower one due to staff turnover.

Benchmark/Baseline Data 1,000 characters

108 sites participated in QRIS in 15/16, although 16 of these subsequently withdrew. In 15/16, 95 had a rating, of which 55 had a second rating.

Looking at just the first rating of the 55 sites with a re-rating, six sites were in Tier 2, 20 sites in Tier 3, 25 sites in Tier 4, and four sites in Tier 4, a substantial improvement.

All QRIS sites received extensive on-site professional coaching.

404 QRIS staff members attended a training or workshop sponsored by First 5/COE.

79 QRIS sites employed a participant in the College Advising Professional Development Program, and they collectively employed 387 PDP participants.

Further, 55 of these sites participated in Tandem's book bag sharing program. Compared to the other Bay Area counties in the Partnership, Contra Costa had a higher percentage of sites in Tier 5 (16% compared to 13%) and Tier 4 (61% compared to 30%). Similarly, the county had a higher percentage of FCCs in Tier 5 (11% compared to 5%) and Tier 4 (18% compared to 13%).

Outcome Measurement Tool 300 characters

The California Rating Matrix is the tool used to report these findings, supplemented by administrative data from Tandem and the College Advising database.

Highlights of Services for
Triple P Parenting Program

Contra Costa County FY 2015/2016

Result Area 1: **Improved Family Functioning**
Service: **Targeted Intensive Family Support Services**

Most Compelling Service Outcome 1,000 characters

Triple P evidence-based classes and seminars are offered to parents in Contra Costa.

72% of Triple P participants were in the clinical range on at least one of eight evidence-based sub-scales when they began a class. By the end, many of them were no longer in the clinical range.

People who started at risk on one or more of the assessment's sub-scales who are below clinical risk for the tool's sub-scales:

- Eyberg child behavior: 60%
- Parenting Scale: 49%
- DASS-21 psychosocial issues: 62%

Percent of participants no longer at risk on <u>any</u> subscale at the end of the class: 44%

Percent who marked "Excellent" on the Participant Evaluation Form:

- Triple P teacher/facilitator: 92%
- Overall program: 82%

Percent who said in the past week that parenting was:

- Extremely rewarding: 58%
- Extremely Demanding: 15%
- Extremely Stressful: 6%

Amount of confidence in their ability to handle problems with their child in the future:

- A lot: 57%
- Some: 37%

Benchmark/Baseline Data 1,000 characters

276 adults received support from Triple P, including 209 who took a Level 4 class, 19 a Stepping Stones class, and 82 a Seminar (some took more than one of these). 87% were women; 32% had income <$15,000; 43% spoke Spanish. Participants had a total of 240 children age 0-5.

Below are the mean Pre- and Post-class scores. A reduction in average between pre and post is a positive program outcome. Average scores moved in the positive direction on all scales used in this program.

Eyberg:

Problem Intensity Pre 109.1; Post 94

Number of Problems Pre 11.3; Post 6.1

Highlights of Services for
Triple P Parenting Program

Contra Costa County FY 2015/2016

Result Area 1: **Improved Family Functioning**
Service: **Targeted Intensive Family Support Services**

Parenting Scale

- Laxness Pre 3.4; Post 2.9
- Over Reactivity Pre 3.4; Post 2.7
- Hostility Pre 1.9; Post 1.5

DASS

- Depression Pre 6.0; Post 3.7
- Anxiety Pre 5.3; Post 3.5
- Stress Pre 12.8; Post 8.1

Outcome Measurement Tool 300 characters
Eyeberg Child Behavior Inventory: Child Behavior Intensity and Number of Behavioral Problems Parenting Scale: Laxness, Over reactivity, and Hostility toward child DASS-21: Parent Depression, Anxiety, and Stress Additional tool: Program Evaluation Form

Highlights of Policy and Systems Change Efforts (FESP)

Contra Costa County FY 2015/2016

Result Area 4: **Improved Systems of Care**
Service: **Policy and Broad Systems-Change Efforts**

Primary Target Audience

The Family Economic Security Partnership is a coalition of 40 nonprofit, public, and private agencies that collaborate to increase income and build assets of low-income families. FESP increases awareness about the root causes of poverty and increases the engagement of direct service providers in advocacy on needed structural and systemic change. FESP participates in coalitions including Ensuring Opportunity Campaign to End Poverty in Contra Costa County and the CalFresh Working Group.

Types of Services

- Organized presentations on topics related to poverty and economic stability.
- Provides information, resources and skill building opportunities for FESP members.
- Provides trainings on movement building and engaging staff and constituents in policy work.
- Informed members of impending policy and legislation impacting financial stability for families.
- Participates on relevant community coalitions and partnerships to represent the needs of direct service providers and their constituents.

Intended Result / Community Impact

- Educated over 100 FESP agency member staff and constituents that poverty is not inevitable and is a function of policy and systemic/structural choices.
- Raised awareness about policies (administrative, legislative, regulatory, etc.) that impact peoples' ability to get or stay out of poverty.
- Explored the capacity of direct service providers, staff and constituents, to engage in policy advocacy.
- Trained over 60 representatives from nonprofit agencies to assess their organization's advocacy capacity and provided information on legal tips for advocacy and lobbying.
- Secured funding to partner with SparkPoint and the Building Movement Project to explore the agency's advocacy capacity and interest and create an action plan for staff and constituent engagement.

Highlights of Public Education and Community Information Dissemination

Contra Costa County FY 2015/2016

Result Area 4: Improved Systems of Care
Service: **Public Education and Community Information Dissemination**

Primary Target Audience

The target audience for the ***Quality Matters*** campaign is low-income African-American and Latino parents with young children in three specific areas of Contra Costa County. The goals of the campaign are to create a brand and raise awareness of Contra Costa's quality rating and improvement system, now called *Quality Matters* and to educate parents about quality child care and why it is important to children's development.

Types of Services

The media strategy reached parents in a variety of settings--commuting to work, grocery shopping, or searching online for child care or parenting topics. It included a combination of transit (Bart stations, buses and transit shelters), supermarket carts, online ad buys, tri-fold brochures, 11"x17" posters, toddler t-shirts, baby onesies and window decals that child care programs participating in *Quality Matters* could display at their sites. The ad campaign ran for nearly five months in 15/16.

Intended Result / Community Impact

The campaign successfully created a brand and bilingual website, www.qualitychildcarematters.org. The website provides information about what is quality child care, why it's important and how it can be identified. It includes resources to help parents in their search for quality child care and help providers improve their quality of care. The site includes listings of all County programs participating in QRIS, including their ratings. Each QRIS site received customized rating reports designed for parents to easily understand.

The online banner ads were effective in targeting parents on websites, smart phone apps and blogs according to specified keywords and demographics aligned with our target audience, such as keyword searches for daycare, childcare, preschool, early education, child development, and diapers and were able to target by zip codes and demographics.

The combined media campaign resulted in more than 70 million impressions (the number of times people viewed the ads).

Highlights of Organizational Support

Contra Costa County FY 2015/2016

Result Area 4: **Improved Systems of Care**
Service: **Organizational Support**

Primary Target Audience

First 5 Contra Costa uses a variety of databases in support of its funded contractors, local community and regional partners, and First 5 staff. The primary focus of support for each database user is to ensure that data entry is timely, accurate and complete, and that data can be used to inform practice on service delivery and evaluation outcomes. Making data easy to enter and extract requires ongoing coordination between First 5 staff and funded programs, vendors, and other Bay Area First 5 counties.

Types of Services

First 5 Contra Costa provides:

- Development/support for ETO database for five First 5 Centers, two home visiting programs, a hospital outreach program, and a Community Engagement program.
- Development/ support for three different Excel databases for Triple P, Mental Health Consultation and Inclusion services.
- Development/support for two Access databases for three community colleges and a program for parents with children identified with special needs.
- County coordination of WELS database.

Intended Result / Community Impact

First 5-funded organizations have collected years of data and received ongoing technical assistance from staff at First 5 and its evaluation contractors for database development and quality assurance. These programs now have the ability to pull data, run reports, and use data to better understand their clientele, improve service delivery, and manage internal decisions. Because the databases are functioning well and the data are robust, First 5 staff members use the bases to make decisions.

- Data from ETO informed program changes later incorporated into the Home Visiting RFP.
- WELS is for all rating and assessment information. WELS data was used to inform state-level workgroups and recommendations for changes to the QRIS Matrix.
- The PDP database was expanded to enable entering the courses that students take; this will result in easier processing of stipends in 16/17 and increased ability to advise students on education plans.

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 13. Community Resource and Referral

Reporting Requirements

TOTAL

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	1781
Other family members	0
Providers	7
TOTAL	1788

Total Children: 0

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	24
Asian	0	54
Black/African-American	0	548
Hispanic/Latino	0	316
Pacific Islander	0	0
White	0	116
Multiracial	0	73
Other/Unknown	0	650
TOTAL	0	1781

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	0	1469
Spanish	0	120
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	192
TOTAL	0	1781

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 14. Distribution of Kit for New Parents

Reporting Requirements

TOTAL

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	6013
Other family members	0
Providers	48
TOTAL	6061

Total Children: 0

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	6013
TOTAL	0	6013

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	0	3821
Spanish	0	2107
Cantonese	0	0
Mandarin	0	85
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	6013

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 16. Adult and Family Literacy Programs

Reporting Requirements	TOTAL
Population Served	
Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	173
TOTAL	173

Total Children: 0

Ethnic Breakdown of Population Served (Children and Families)	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home (Children and Families)	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 17. Targeted Intensive Family Support Services

Reporting Requirements	TOTAL
Population Served	
Children less than 3	158
Children 3 to Five Years	125
Children - Ages Unknown(birth to five years)	63
Parents/Guardians/Primary Caregivers	1107
Other family members	0
Providers	27
TOTAL	1480

Total Children: 346

Ethnic Breakdown of Population Served (Children and Families)	Children	Parents/Guardians
Alaska Native/American Indian	0	6
Asian	15	49
Black/African-American	17	205
Hispanic/Latino	170	480
Pacific Islander	0	9
White	30	225
Multiracial	67	28
Other/Unknown	47	105
TOTAL	346	1107

Primary Language Spoken in the Home (Children and Families)	Children	Parents/Guardians
English	72	658
Spanish	165	352
Cantonese	1	2
Mandarin	0	1
Vietnamese	1	1
Korean	0	0
Other	7	24
Unknown	100	69
TOTAL	346	1107

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 18. General Parenting Education and Family Support Programs

Reporting Requirements	TOTAL
Population Served	
Children less than 3	1376
Children 3 to Five Years	573
Children - Ages Unknown(birth to five years)	175
Parents/Guardians/Primary Caregivers	2012
Other family members	325
Providers	64
TOTAL	4525

Total Children 2124

Ethnic Breakdown of Population Served (Children and Families)	Children	Parents/Guardians
Alaska Native/American Indian	11	7
Asian	164	213
Black/African-American	72	103
Hispanic/Latino	1244	1354
Pacific Islander	8	11
White	190	209
Multiracial	195	62
Other/Unknown	240	53
TOTAL	2124	2012

Primary Language Spoken in the Home (Children and Families)	Children	Parents/Guardians
English	458	441
Spanish	1021	1248
Cantonese	14	17
Mandarin	21	22
Vietnamese	4	8
Korean	4	3
Other	96	151
Unknown	506	122
TOTAL	2124	2012

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 2: Improved Child Development (Child Development Services)

Service Area: 21. Preschool Programs for 3 and 4 Year Olds

Reporting Requirements	TOTAL
Population Served	
Children less than 3	11
Children 3 to Five Years	91
Children - Ages Unknown(birth to five years)	12
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	114

Total Children 114

Ethnic Breakdown of Population Served (Children and Families)	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	17	0
Black/African-American	0	0
Hispanic/Latino	64	0
Pacific Islander	0	0
White	13	0
Multiracial	10	0
Other/Unknown	10	0
TOTAL	114	0

Primary Language Spoken in the Home (Children and Families)	Children	Parents/Guardians
English	2	0
Spanish	65	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	1	0
Korean	0	0
Other	36	0
Unknown	10	0
TOTAL	114	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 2: Improved Child Development (Child Development Services)

Service Area: 26. Infants, Toddlers, and All-Age Early Learning Programs

Reporting Requirements

TOTAL

Population Served

Children less than 3	32
Children 3 to Five Years	20
Children - Ages Unknown(birth to five years)	26
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	78

Total Children: 78

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	3	0
Black/African-American	21	0
Hispanic/Latino	6	0
Pacific Islander	0	0
White	10	0
Multiracial	18	0
Other/Unknown	20	0
TOTAL	78	0

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	42	0
Spanish	6	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	1	0
Unknown	29	0
TOTAL	78	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 2: Improved Child Development (Child Development Services)

Service Area: 27. Early Education Provider Programs

Reporting Requirements

TOTAL

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	673
TOTAL	673

Total Children: 0

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 2: Improved Child Development (Child Development Services)

Service Area: 29. Quality ECE Investments

Reporting Requirements

TOTAL

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	434
TOTAL	434

Total Children: 0

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 32. Nutrition and Fitness

Reporting Requirements

TOTAL

Population Served

Children less than 3	131
Children 3 to Five Years	708
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	839

Total Children: 839

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	839	0
TOTAL	839	0

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	839	0
TOTAL	839	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 35. Maternal and Child Health Care

Reporting Requirements	TOTAL
Population Served	
Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	790
Other family members	0
Providers	0
TOTAL	790

Total Children
0

Ethnic Breakdown of Population Served (Children and Families)	Children	Parents/Guardians
Alaska Native/American Indian	0	1
Asian	0	40
Black/African-American	0	161
Hispanic/Latino	0	459
Pacific Islander	0	2
White	0	49
Multiracial	0	21
Other/Unknown	0	57
TOTAL	0	790

Primary Language Spoken in the Home (Children and Families)	Children	Parents/Guardians
English	0	383
Spanish	0	360
Cantonese	0	0
Mandarin	0	2
Vietnamese	0	2
Korean	0	0
Other	0	39
Unknown	0	4
TOTAL	0	790

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 39. Comprehensive Screening and Assessments

Reporting Requirements	TOTAL
Population Served	
Children less than 3	1244
Children 3 to Five Years	633
Children - Ages Unknown(birth to five years)	78
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	1955

Total Children
1955

Ethnic Breakdown of Population Served (Children and Families)	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	1955	0
TOTAL	1955	0

Primary Language Spoken in the Home (Children and Families)	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	1955	0
TOTAL	1955	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 40. Targeted Intensive Intervention for Identified Special Needs

Reporting Requirements

TOTAL

Population Served

Children less than 3	215
Children 3 to Five Years	432
Children - Ages Unknown(birth to five years)	102
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	749

Total Children: 749

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	51	0
Black/African-American	78	0
Hispanic/Latino	227	0
Pacific Islander	2	0
White	189	0
Multiracial	50	0
Other/Unknown	152	0
TOTAL	749	0

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	408	0
Spanish	184	0
Cantonese	2	0
Mandarin	3	0
Vietnamese	1	0
Korean	0	0
Other	24	0
Unknown	127	0
TOTAL	749	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 44. Quality Health Systems Improvement

Reporting Requirements

TOTAL

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	347
TOTAL	347

Total Children: 0

Ethnic Breakdown of Population Served (Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home (Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

FIRST 5 CALIFORNIA

AR1/AR2 Summary Report

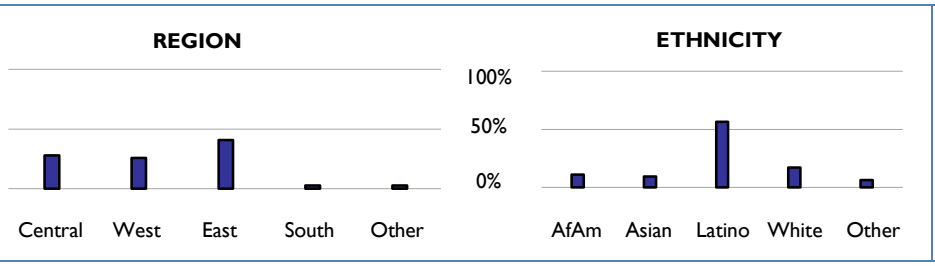
For Fiscal Year July 1, 2015 - June 30, 2016

County: Contra Costa **Wednesday, November 16,2016**

Result Area	Service	Status	Total Dollars Spent	Total Number of Children Served	Total Number of Parents/Other Family Members/Providers Served
Improved Family Functioning	Community Resource and Referral	Submitted	$131,158	0	1788
Improved Family Functioning	Distribution of Kit for New Parent	Submitted	$74,256	0	6061
Improved Family Functioning	Adult and Family Literacy Programs	Submitted	$156,000	0	173
Improved Family Functioning	Targeted Intensive Family Support Services	Submitted	$787,207	346	1134
Improved Family Functioning	General Parenting Education and Family Support Programs	Submitted	$2,434,108	2124	2401
Improved Child Development	Preschool Programs for 3 and 4 Year Olds	Submitted	$172,378	114	0
Improved Child Development	Infants, Toddlers, and All-Age Early Learning Programs	Submitted	$286,416	78	0
Improved Child Development	Early Education Provider Programs	Submitted	$1,178,322	0	673
Improved Child Development	Quality ECE Investments	Submitted	$1,461,004	0	434
Improved Child Health	Nutrition and Fitness	Submitted	$133,976	839	0
Improved Child Health	Maternal and Child Healthcare	Submitted	$1,468,908	0	790
Improved Child Health	Comprehensive Screening and Assessments	Submitted	$101,381	1783	0
Improved Child Health	Targeted Intensive Intervention for Identified Special Needs	Submitted	$1,249,067	749	0
Improved Child Health	Quality Health Systems Improvement	Submitted	$371,141	0	347
Improved Systems of Care	Policy and Broad Systems-Change Efforts	Submitted	$594,334	0	0
Improved Systems of Care	Organizational Support	Submitted	$225,222	0	0
Improved Systems of Care	Public Education and Information	Submitted	$343,825	0	0

First 5 Contra Costa
All Programs

Data Summary 2015-2016



Number Served:

8,345 children

20,247 adults

2,563 providers

Family Survey data provide a demographic snapshot of most new families participating in programs funded by First 5 Contra Costa. Across these programs, **2,172** new adults (mostly parents) representing **2,153** families completed a Family Survey at the time of program entry.

2015-2016 Survey results indicate:

- Twenty-six percent of parents earn less than $15,000 per year, while 33% earn between $15,000 and $30,000.
- Just over a quarter (27%) of mothers served did not have a high school diploma or GED, while 31% completed their formal education by earning a high school diploma or GED.
- Most participants (83%) identify their race/ethnicity as a person of color. Forty-six percent of families speak primarily Spanish in the home.
- Parents routinely read to their children. Eighty-eight percent of families read to their child at least weekly; with 71% reading between 3-7 times per week and 25% reading to their child every day.
- Parents are concerned about their child's development. Twenty-nine percent of parents have a concern that their child is not developing like other children, and 20% of parents said that their child had already been identified with a developmental delay or disability.
- Most children have health insurance. Sixty-seven percent of children have Medi-Cal coverage; while only 1% do not have health insurance. Ninety-five percent of children have a regular health care provider for well-child check-ups.
- Thirteen percent of children were exposed to secondhand tobacco smoke, with 1% of children exposed in the home.
- Over the fiscal year, 1,783 children were screened by First 5 Contractors. ASR received Summary ASQ-3 forms for 94% of these children, or **2,444** ASQ screenings for **1,678** children. Of these, 27% of children received a referral for an identified concern.

Data sources included in the report:

Survey Results Included in the Report	Counts
Family Surveys (New only)	Families: 2,153
	Adults: 2,172
	Children: 2,225
ASQ-3	Children: 1,678

PROFILE OF PROGRAM PARTICIPANTS

Unless otherwise indicated, the data derived from the Family Survey which is completed by new program participants only. Cumulative data are reported from 2005-15 and include 30,569 families, 30,606 adults, and 34,783 children. Survey counts for the Fiscal Year are reported in the data source chart on the previous page.

The survey response options of "don't know" and "prefer not to say" and those that are invalid or missing are not included in the percentages reported.

Fiscal Year survey questions with fewer than 95% valid responses are accompanied by an item response rate (IRR) located in the far left column indicating the percentage (%) who answered the question out of the total number of respondents eligible to answer that question.

Families/Adults

	Response	Cumulative	Fiscal Year
Location of Families by Region of County	Central	28%	28%
	West	31%	27%
	East	37%	39%
	South	2%	3%
	Other	2%	3%
Ethnicity of Adults IRR=94%	Asian/Pacific Islander	7%	10%
	African-American	12%	10%
	Hispanic/Latino	60%	58%
	White	16%	16%
	Other/More Than One	7%	6%
Primary Language Spoken by Families at Home IRR =94%	English	40%	44%
	Spanish	40%	31%
	English and Spanish	15%	17%
	English and Other	4%	5%
	Other Only	3%	4%
Income Level of Families The data for response options *$30,001 to $45,000* and *$45,001 to $60,000* were merged for 2005-14. IRR=54%	Less than $15,000	46%	26%
	$15,001 to $30,000	29%	32%
	$30,001 to $45,000	15%	16%
	$45,001 to $60,000		8%
	$60,001 to $75,000	3%	5%
	$75,001 and over	7%	11%
Education Level of Mothers Asked only of mothers IRR=85%	Less than high school	34%	27%
	High school degree or GED	30%	32%
	2-year college or vocational school	19%	20%
	Bachelor's degree	12%	15%
	Master's degree or higher	4%	6%
	Total number of mothers	14,953	1,390
Adult Has Been to a First 5 Center	Yes	56%	67%
Adult who Visited a First 5 Center Before Accessing Services IRR=89%.	Yes	25%	29%

	Response	Cumulative	Fiscal Year
Number of Children (0-5) in Household IRR=89%	0 (pregnant)	11%	6%
	1	52%	67%
	2	24%	22%
	3	5%	4%
	4	1%	1%
	5 or more	7%	<1%
Relationship of Children to Adults For 2005-10; the data for "Grandparent or other relative" reflects respondents choosing "Other relative" only. The response option was updated in 2010-2011 to include Grandparent.	Mother	90%	90%
	Father	4%	6%
	Foster parent/guardian	1%	1%
	Grandparent or other relative	2%	2%
	Multiple responses checked	3%	<1%
	Other	1%	1%
Mother First Received Prenatal Care Asked only of mothers IRR=91%	1st trimester	85%	86%
	2nd trimester	10%	9%
	3rd trimester	4%	4%
	Had not yet received prenatal care	1%	1%
	Total number of mothers	6,056	926

Children

	Response	Cumulative	Fiscal Year
Gender of Children	Male	54%	59%
	Female	46%	41%
Age of Children	Birth through 3 years	74%	80%
	4 and 5 year olds	26%	20%
Ethnicity of Children	Asian/Pacific Islander	6%	9%
	African-American	11%	10%
	Hispanic/Latino	57%	53%
	White	15%	17%
	Other/More Than One	12%	13%
Health Insurance Coverage for Children	Private	28%	31%
	Medi-Cal	62%	65%
	Healthy Families/CHIP	5%	1%
	Other	3%	2%
	Multiple responses checked	<1%	0%
	None	2%	1%
Tobacco Exposure of Children IRR=92%	Yes, inside the house	1%	1%
	Yes, outside of the house	15%	11%
	No	84%	88%
Regular Provider for Well Child Care	Yes	94%	95%
Adults Concerned About Physical Growth or Development of the Child IRR=94%	Yes	20%	29%
Children Previously Identified with a Disability/Delay	Yes	17%	19%

Beverage consumption of children

The number of times a child (6 months or older) drank the beverage the previous day.
This question has been included in the Family Survey since FY 2013-14.

	Response	Cumulative	Fiscal Year
Bottled Water IRR=85%	Did not drink	19%	16%
	1-3 times	47%	44%
	4-6 times	25%	28%
	7 times or more	9%	12%
	Total number of children	4,783	1,002
Faucet Water IRR=79%	Did not drink	57%	63%
	1-3 times	26%	20%
	4-6 times	12%	11%
	7 times or more	5%	7%
	Total number of children	4,356	931
Chocolate Milk IRR=78%	Did not drink	70%	76%
	1-3 times	28%	21%
	4-6 times	2%	2%
	7 times or more	1%	<1%
	Total number of children	4,462	915
Juice IRR=80%	Did not drink	33%	41%
	1-3 times	60%	55%
	4-6 times	6%	4%
	7 times or more	1%	1%
	Total number of children	4,641	948
Soda IRR=75%	Did not drink	91%	93%
	1-3 times	9%	7%
	4-6 times	<1%	<1%
	7 times or more	<1%	<1%
	Total number of children	4,217	888

Reading to children

These questions have been included since FY 2011-12.

	Response	Cumulative	Fiscal Year
Number of Days Children Were Read to in Past Week IRR=87%	7 days	28%	25%
	3-6 days	42%	45%
	1-2 days	19%	17%
	None	12%	13%
Number of Minutes Children Were Read to at Each Sitting IRR=75%	Under 10 minutes	26%	30%
	10-19 minutes	42%	43%
	20-39 minutes	29%	24%
	40-59 minutes	1%	2%
	60+ minutes	2%	2%

Developmental & disability status of children

Data derived from the Ages & Stages Questionnaire (ASQ-3). Programs include: Inclusion, Shelter Inc., YMCA, Crossroads, Welcome Home Baby, Hello Baby, MHCS, MHTS, Lynn Center-Next Steps, First 5 Centers & GRIP.

Note that referral data were available for all clients meeting the ASQ cutoff for referral in First 5 Centers and Home Visiting programs, but only 72% of clients meeting the ASQ cutoff for referral in other programs. Cumulative data shown in table from FY 2013-14 to 2015-16. An additional 5,066 screenings were conducted from FY2011-12 and 2012-13.

	Response	Cumulative	Fiscal Year
ASQ-3	Number of children screened	3,533	1,678
	Total number of screenings completed	5,066	2,444
	Average age at first screening (In months)	29	27
	Percent whose score indicate a need for referral	69%	27%
	Of these from First 5 Center and Home Visiting programs, percent referred to HMG-211 or a Developmental Playgroup (FY n=346)	NA	54%
	Of these from other programs, percent referred to a First 5 Developmental Play Group (FY n=105)	NA	36%
	Percent whose score indicate a need for monitoring (but no referral)	28%	22%
	Percent rescreened	21%	23%