



Early Childhood Evaluation Advisory Subcommittee Meeting

October 15, 2018
3:30-4:30 p.m.

First 5 San Mateo County
1700 S. El Camino Real, #405
San Mateo, CA 94402

Committee Members/F5SMC Commissioners: David Canepa, Neel Patel, Louise Rogers

Grantee Representatives: Heather Cleary, Peninsula Family Service; Tracey Fecher, Community Gatepath

Staff: Kitty Lopez, Michelle Blakely, Jenifer Clark

Minutes: Jenifer Clark

AGENDA

	Item	Presenter
1.	Agenda Review & Announcements	Clark/All
2.	Approval of the August 20, 2018 Early Childhood Evaluation Advisory Subcommittee Meeting Minutes (Attachment 2)	Rogers/All
3.	Recommend Approval of the FY 2017-18 F5SMC Annual Report to First 5 California (Attachment 3A-C)	Clark
4.	Discussion: Outcomes and Indicators for the 2020-25 Strategic Plan (Attachment 4)	Clark
5.	Next Steps	Rogers/All
6.	Adjourn	Rogers
Next Meeting Date(s): <i>February 2019</i>		

FIRST 5 SAN MATEO COUNTY

Early Childhood Evaluation Advisory Subcommittee

Meeting Minutes

August 20, 2018

Commissioners Present: Neel Patel, Louise Rogers
Commissioners Absent: David Canepa
Grantee Representative(s): Heather Cleary, Tracey Fecher
Staff: Michelle Blakely, Jenifer Clark

1. Agenda Review & Announcements

The agenda was approved with no changes.

2. Approval of the June 2018 Early Childhood Evaluation Advisory Subcommittee Minutes

Minutes were approved with no changes.

3. Updates: Ongoing Evaluation Activities

- Census 2020 Outreach: F5SMC staff are meeting with County Manager's Office (CMO) staff later this week to learn about local outreach efforts and identify ways in which our agency can support the complete and accurate count of children ages 0-5, a hard-to-count population. Undercounting of young children can have budgetary impacts on Federal funding for programs such as Head Start. Staff will also bring up the issue of the "citizenship question" with an eye towards defining shared language to talk with residents about their concerns. Subcommittee members suggested that obtaining legal opinions
- Network Analysis and Systems Change Survey: After learning more about the new PARTNER tool for network analysis, staff decided to split the Systems Change Survey into two separate components: the Network Analysis and the Systems Survey. This will reduce the length of any given survey, minimize duplication across surveys for those respondents who participate in more than one collaborative, and allow for the Network Analysis to be tightly focused on collaboratives that have a shared understanding of the issues they address and their desired outcomes. The initial network analysis pilot will be with the Watch Me Grow Roundtable. Jenifer has reached out to Nancy Sugajski and Anne DeBattista about this, and will work with them to move the process forward. The higher-level systems survey about access to and quality of different types of services, barriers to care, etc. will be administered via online survey to our funded portfolio. Jenifer has begun to build the online survey, and plans to distribute it as soon as it is built and tested. The committee expressed interest in disseminating the survey to other (non-funded) partners as well, which would allow for a richer picture of the service array as well as barriers to services.

- Study on Access to Child Care for Children with Special Needs and/or Challenging Behaviors: Key informant interviews have been completed and sent out for transcription; Jenifer Clark is working with funded partners to set up focus groups with parents and providers.

4. Discussion: Outcomes and Indicators for the 2020-25 Strategic Plan

Committee members discussed the indicators included in the current (2015-2020) Strategic Plan, and how they might be maintained or revised for the upcoming 2020-2025 Strategic Plan. Considerations included: the availability of data sources; the stability and quality of the data; the utility of the data; and whether the indicators mapped to F5SMC activities.

5. Next Steps:

- There will be a discussion at the upcoming Commission meeting regarding revisions to the indicators for the 2020-25 Strategic Plan.
- Jenifer will attend an upcoming WMG Roundtable to present the Network Analysis project to members and get feedback on the process and research questions that are of interest to the group.
- Next Scheduled Meeting: October 15, 2018, from 3:30-4:30pm, at the F5SMC Offices.



Annual Report AR-1
San Mateo Revenue and Expenditure Summary
July 1, 2017 - June 30, 2018

Revenue Detail

Category	Amount
Tobacco Tax Funds	\$5,262,166
First 5 Impact Funds	\$650,221
Small County Augmentation Funds	\$0
DLL Pilot Funds	\$0
Donations	\$0
Revenue From Interest Earned	\$208,234
Grants	\$41,146
Other Funds	\$0
Total Revenue	\$6,161,767

Improved Family Functioning

Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
General Family Support	Internal	<ul style="list-style-type: none"> • Other 	0	2832	0	\$41,000
General Family Support	County Office of Education/School District	<ul style="list-style-type: none"> • Other 	0	0	110	\$267,015
General Family Support	CBO/Non-Profit	<ul style="list-style-type: none"> • Benefits enrollment (CalFresh) • Other 	795	1469	293	\$168,546
Intensive Family Support	CBO/Non-Profit	<ul style="list-style-type: none"> • Parents as Teachers • Other • Parental Stress Index 	802	745	68	\$1,790,493
Total						\$2,267,054

Improved Child Development

Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
Quality Early Learning Supports	County Office of Education/School District	<ul style="list-style-type: none"> • CLASS • CSEFEL • DRDP • ERS • Facility Grants • PITC • Other 	0	0	482	\$1,610,463
Quality Early Learning Supports	Higher Education	<ul style="list-style-type: none"> • Business Supports • Other 	0	0	1678	\$149,680
Quality Early Learning Supports	CBO/Non-Profit	<ul style="list-style-type: none"> • Other 	71	91	142	\$360,996
Quality Early Learning Supports	Research/Consulting Firm	<ul style="list-style-type: none"> • DRDP • PITC 	0	0	19	\$13,386
Quality Early Learning Supports	R & R (COE or Non-Profit)	<ul style="list-style-type: none"> • Business Supports • CLASS • DRDP • ERS • Other 	60	36	100	\$346,275
Quality Early Learning Supports	Other Private/For Profit	<ul style="list-style-type: none"> • Other 	0	1058	143	\$131,599
Total						\$2,612,399

Improved Child Health

Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
General Health Education and Promotion	CBO/Non-Profit	<ul style="list-style-type: none"> • Other 	0	91	0	\$72,084
Oral Health Education and Treatment	CBO/Non-Profit	<ul style="list-style-type: none"> • Other 	656	0	0	\$278,633
Early Intervention	R & R (COE or Non-Profit)	<ul style="list-style-type: none"> • Other 	56	6	0	\$3,816
Early Intervention	County Health & Human Services	<ul style="list-style-type: none"> • Other 	120	66	8	\$13,981
Early Intervention	Hospital/Health Plan	<ul style="list-style-type: none"> • Other 	324	0	42	\$344,285
Early Intervention	CBO/Non-Profit	<ul style="list-style-type: none"> • Other • Group Therapy • Mental Health Services 	756	929	347	\$704,137
					Total	\$1,416,936

Improved Systems Of Care

Service	Grantee	Program(s)	Amount
Policy and Public Advocacy	Other Private/For Profit	<ul style="list-style-type: none"> Other 	\$15,000
Policy and Public Advocacy	Research/Consulting Firm	<ul style="list-style-type: none"> Other 	\$383,458
Policy and Public Advocacy	Internal	<ul style="list-style-type: none"> Other 	\$134,238
Programs and Systems Improvement Efforts	Research/Consulting Firm	<ul style="list-style-type: none"> Health Systems Trauma-Informed Care/ACES 	\$67,697
Programs and Systems Improvement Efforts	County Health & Human Services	<ul style="list-style-type: none"> Health Systems Other 	\$50,000
Programs and Systems Improvement Efforts	Other Private/For Profit	<ul style="list-style-type: none"> Other 	\$220,363
Programs and Systems Improvement Efforts	CBO/Non-Profit	<ul style="list-style-type: none"> Family Strengthening Systems 	\$20,160
Programs and Systems Improvement Efforts	County Office of Education/School District	<ul style="list-style-type: none"> Other 	\$27,236
Programs and Systems Improvement Efforts	Internal	<ul style="list-style-type: none"> Other 	\$203,007
Total			\$1,121,159

Expenditure Details

Category	Amount
Program Expenditures	\$7,417,548
Administrative Expenditures	\$1,136,560
Evaluation Expenditures	\$264,918
Total Expenditures	\$8,819,026
Excess (Deficiency) Of Revenues Over (Under) Expenses	(\$2,657,259)

Other Financing Details

Category	Amount
Sale(s) of Capital Assets	\$0
Other	\$0
Total Other Financing Sources	\$0

Net Change in Fund Balance

Category	Amount
Fund Balance - Beginning	\$14,922,527
Fund Balance - Ending	\$12,265,268
Net Change In Fund Balance	(\$2,657,259)

Fiscal Year Fund Balance

Category	Amount
Nonspendable	\$0
Restricted	\$0
Committed	\$10,835,881
Assigned	\$1,403,087
Unassigned	\$0
Total Fund Balance	\$12,238,968

Expenditure Note

No data entered for this section as of 10/11/2018 5:14:51 PM.

Small Population County Funding Augmentation

Category	Amount	Comment
Administration	\$0	
Evidence Based Programs	\$0	
Evidence Informed Programs	\$0	
Funded Programs	\$0	
Professional Development, Training and Technical Assistance	\$0	
Evaluation	\$0	
Other (Please Explain)	\$0	
Total	\$0	
If unspent funds occurred during the FY, please list amount and provide explanation.	\$0	



Annual Report AR-2
San Mateo Demographic Worksheet
July 1, 2017 - June 30, 2018

Population Served

Category	Number
Providers	2,593
Children Less than 3 Years Old	988
Children from 3rd to 6th Birthday	1,413
Children – Ages Unknown (birth to 6th Birthday)	766
Primary Caregivers	4,118
Total Population Served	9,878

Primary Languages Spoken in the Home

Category	Number of Children	Number of Adults
English	785	686
Spanish	1,451	2,612
Cantonese	22	38
Mandarin	27	40
Vietnamese	1	0
Korean	0	2
Unknown	881	740
Totals	3,167	4,118

Race/Ethnicity of Population Served

Category	Number of Children	Number of Adults
Alaska Native/American Indian	0	6
Asian	198	221
Black/African-American	22	22
Hispanic/Latino	1,812	2,899
Native Hawaiian or Other Pacific Islander	31	25
White	120	149
Two or more races	143	145
Unknown	841	651
Totals	3,167	4,118

Duplication Assessment

Category	Data
Degree of Duplication	5%
Confidence in Data	Somewhat confident
Additional Details (Optional)	<p>I did not include our Kit for New Parents numbers in the AR2, as there is no way to verify whether families who received a Kit also received other services. In programs where clients went through an intake and triage process that resulted in different services or service intensities, I used numbers from intake/triage or the least-intensive service level and did not include data reported for intensively-served clients. Past duplication assessments have found rates from 2-11%.</p>

First 5 San Mateo County
Evaluation Summary FY 2017-18

A. Description of Evaluation Activities:

In FY 2017-18, First 5 San Mateo County (F5SMC) supported various research and evaluation activities, and re-instituted detailed individual-level data collection for clients participating in intensive services such as home visiting, care-coordination, and two-generation interventions at early learning centers. Activities included:

- **Client Data Collection:** During this fiscal year, all grantees reported aggregated service numbers for different service modalities by child age, and by child and parent race/ethnicity, and language. In addition, programs providing intensive services (e.g. home visiting, care coordination, two-generation wrap-around services at early learning centers) collected detailed individual-level data on socioeconomic indicators, risk factors, child development, and parenting self-confidence at intake and at six-month intervals thereafter.
- **The Early Childhood Education Teacher Compensation Study:** In partnership with the County Office of Education and our Local Planning Council, F5SMC supported a detailed study of wages and benefits for the early learning workforce in San Mateo County. Well-qualified and compensated staff are a critical component of high quality early learning environments; in fact, 1 out of every 3 early learning programs that would like to expand in San Mateo County cite a lack of available staff as a barrier to achieving this goal. Findings from the ECE Teacher Compensation Study are discussed below.
- **Qualitative Study of Access to Early Learning Opportunities for Children with Special Needs:** Enrolling and maintaining children with special needs in appropriate early learning environments can be a struggle for both parents and providers. The Inclusion Specialist at our local child care resource & referral agency often calls 50 providers in order to identify 5 that are willing to even consider enrolling a child, and only 10% of children served are successfully placed. F5SMC has begun a qualitative study to get a better understanding of local barriers to access and possible solutions to this problem. The study will include key informant interviews, focus groups with parents and with providers, and a literature review.
- **Network Analysis of Collaborative Efforts:** Work conducted through cross-agency, cross-sector collaborations requires specialized evaluation to assess the changing nature of relationships between organizations and how those relationships improve systems' abilities to support high-quality service delivery as well as client outcomes. Network Analysis is a method of examining collaborative ventures by looking at the characteristics of the relationships between the various participating organizations. By operationalizing collaboration in this way, we can examine questions such as:
 - What are the quantity and quality of relationships in the collaborative?
 - Do gaps, vulnerabilities, and inefficiencies exist among partnerships?
 - How do collaborations function when partner organizations cross multiple sectors?
 - Which aspects of collaborations are considered most valuable in supporting the partnership and driving outcomes?

This year, F5SMC began exploring a network analysis tool called PARTNER. F5SMC is interested in using PARTNER with several of the collaboratives we support, and are initially piloting the tool with our Watch Me Grow Roundtable. A medical-legal collaboration for case-management

of children with complex needs, the Roundtable is a long-standing and tightly-focused efforts of this type and thus a good choice for piloting network analysis.

B. Selected Evaluation Findings

Results of local Quality Rating and Improvement System (QRIS)

Over 1,300 early learning providers and preschool teachers were funded by F5SMC to participate in our local QRIS program, receiving services including program assessments and ratings, consultation and coaching, training/workshops and technical assistance, and unit-bearing coursework.

Provider Characteristics:

Asian: 19%

Black/African-American: 2%

Hispanic/Latino: 46%

Pacific Islander: 1%

White: 14%

Multiracial: 3%

Other: 5%

Unknown: 10%

English: 33%

Spanish: 35%

Cantonese: 1%

Mandarin: 4%

Vietnamese: 1%

Tagalog/Filipino: 4%

Other: 17%

Unknown: 5%

As of July 2018, 105 San Mateo County early learning programs (including licensed center-based care, licensed family child-care homes, and license exempt migrant programs and parent co-ops) are participating in the Bay Area Quality Counts QRIS initiative. Each year since the inception of QRIS in our county, F5SMC has successfully increased the percentage of early learning programs participating in this critical work. Out of the approximately 930 licensed and license-exempt programs in San Mateo County in 2018, 11.3% participated in QRIS. This is an increase from 5.9% of programs participating in 2015.

One-hundred and two (102) programs have received an initial rating. At this baseline, programs fell into the following QRIS Tiers:

Programs in Each QRIS Rating Tier at Baseline (n=102):

Highest Rating	Tier 5: 7 (7%)
	Tier 4: 47 (46%)
	Tier 3: 32 (31%)
	Tier 2: 16 (16%)
	Tier 1: 0 (0%)

Seventy-five (75) programs have received a second rating, conducted after two years of quality improvement activities including coaching, technical assistance, professional development, and peer learning communities. In FY 17-18, early learning providers received 3,742 hours of coaching and 268 professional development trainings. Teacher-Child Interaction and the CLASS tool was by far the most frequently-covered topic, with 52% of all quality support services addressing this area. The next two most common topics were Program Environment/ERS (18% of all services) and Child Observations/DRDP (9% of services). After participating in quality support services and receiving a second rating, programs achieved the following QRIS tiers:

Programs in Each QRIS Rating Tier at Second Rating (n=75):

Highest Rating	Tier 5: 15 (20%)
	Tier 4: 41 (55%)
	Tier 3: 14 (19%)
	Tier 2: 5 (7%)
	Tier 1: 0 (0%)

The proportion of programs in the highest tiers of quality (4 and 5) increased to 75% at the second rating, from a starting point of 53%. Between FY 14-15 and FY 17-18, this represents an increase of more than 1,500 children who spend hours every day in early learning environments that support their optimal cognitive and social-emotional development.

Results of the ECE Teacher Compensation Study:

Average Wages (hourly/annual full-time)

- Aides: \$15.47/ \$32,177
- Asst/Assoc Teachers: \$17.35/\$36,088
- Lead Teachers: \$22.07/\$45,906
- Supervisors/Directors: \$27.11/\$56,389

According to the 2018 California Self-Sufficiency Standard (Insight CCED), the income required for a single adult to attain self-sufficiency in San Mateo County is \$29.43 hourly/\$62,147 annually.

Percentage of ECE Employers that offer Benefits (full-time/part-time)

- Paid sick days: 93%/82%
- Paid vacation: 91%/49%
- Partially paid health insurance: 60%/21%
- Employee-financed retirement plan: 40%/26%

The study found high turnover among the workforce, with effective replacement rates of 12-24% depending on the position.

Additional interesting findings from the study include:

- ECE programs that participate in QRIS have turnover rates that are 4-13 percentage points lower than non-QRIS sites.
- ECE teachers who belong to unions make 16-25% more per hour than non-represented teachers, and have replacement rates that are 11-18 percentage points lower.

C. Policy Impact of Research & Evaluation Activities

During the past several years, F5SMC has supported research and evaluation activities touching on topics such as the early learning facilities shortage, compensation for child care and preschool teachers, family stressors (such as social isolation, depression, substandard housing, food insecurity, domestic violence, and substance use), trauma, developmental screening and surveillance practices in pediatric settings, and the challenge of enrolling and maintaining children with special needs in appropriate early learning settings. The accumulation of evidence from all of these studies has enabled F5SMC to play an important role in emerging cross-sector efforts at creating wide-scale change for children and families at risk due to low income or lack of opportunity.

For example, while F5SMC has always been a driver of local efforts to increase access to quality early learning environments, until fairly recently those conversations have been held among partners in the early childhood sector. Now, however, we are in discussions that locate this issue within the larger context of the living wage, housing affordability, and transportation crises in our region. We are working with city planning councils, developers, and affordable housing advocates to identify and implement solutions that jointly address these intertwined issues.

Similarly, in the past we have funded discrete service delivery models such as home visiting, developmental screening, care coordination, or parent education. While we maintain this funding approach when appropriate for pilot projects or distinct geographies, we are now focusing on multi-system, cross-sector initiatives that put the needs of children and families first and create partnerships between agencies that might have traditionally envisioned themselves as having disparate missions. For example, we support the incorporation of oral health services, mental health services, parent education and support, and home visiting into early learning environments, and partner with county health clinics and non-profits to co-locate secondary developmental screenings, resource and referral, and intensive care coordination in pediatric settings. We are working with the County Manager's Office and the non-profit sector to ensure that all children ages 0-5 are counted as a part of Census 2020.

As F5SMC grows into our role as community partner, children's champion, and agent of change, we believe that this work will deepen and expand. Our goal is for the best interests of young children and the families and communities that nurture them to be at the forefront of discussions around policy, resource allocation, and our societal values.

D. Improved Systems of Care Narrative

Who is the primary audience for this service?

Some activities in the Policy & Public Advocacy area target local and state-level policymakers, and others aim to educate the general public about early brain development and build widespread support for investing in early childhood. Targets in the Systems Improvements area include the Mental Health System, Oral Health System, and preschools and early-elementary grades in districts with low rates of 3rd grade reading proficiency.

What were the types of services provided?

Activities in the Policy & Advocacy area included: an Early Learning Workforce Survey; the Choose Children Campaign to educate gubernatorial candidates on the importance of prioritizing young children and families; and advocacy on QRIS and Early Learning Facilities projects. Systems Improvement services included: a needs assessment and planning process around trauma-

informed mental health systems; efforts at PreK-3rd grade articulation and alignment in school districts; and staffing for the County's Oral Health Strategic Plan.

What was the intended result of the service? What was the community impact of the service?

While there were various intended results and impacts of the many services discussed above, the Choose Children Campaign was perhaps the most public activity undertaken this year. This advocacy work focused on several of the most plausible candidates for Governor of California. In an effort to inform the candidates about the importance of investing in early childhood and secure their public commitment to do so, F5SMC partnered with other funders to support town hall meetings, debates, white papers, and policy discussions during the run-up to the June primaries. The impact of this work has been widely recognized, as candidates made campaign promises and ran television ads touting their commitment to investing in California's children, explicitly mentioning prenatal care and support for infants and toddlers as central to their policy goals. These developments have fostered a sense of hope and momentum among early childhood stakeholders as we plan for the next administration.

Outcomes and Indicators from the F5SMC 2020-2025 Strategic Plan

Desired Outcomes:

The First 5 San Mateo County Commission (F5SMC) has adopted the following desired outcomes:

1. San Mateo County will give priority to young children and their families;
2. Communities provide a safe and healthy environment for young children;
3. Children have access to high-quality early care and education settings;
4. Families feel connected to and supported by their community and able to nurture their child's health and development;
5. Children have healthy attachments to their parents and caregivers; and
6. Children have access to and are utilizing appropriate health care services to meet their health and developmental needs.

	Strategies for SP 2020-2025	Proposed SP 2020-2025 Indicators
Early Learning	<p>Quality Improvement: In partnership with existing community efforts, support formal quality improvement frameworks in early learning environments, and provide the services required to help providers and programs improve their quality as measured by these frameworks. Such services may include: coaching/consultation, including reflective practice and consultation to support children with social-emotional needs and at risk for expulsion and/or reduced hours, peer mentoring, program quality assessments, facility enhancements, early learning provider training, and technical assistance. Recruiting, retaining, and educating the early learning workforce is vital in creating and sustaining high-quality early learning programs.</p> <p>Expand Access to Early Learning Settings for Children with Special Needs: Support families’ ability to access appropriate early learning experiences for their children with special needs. Such efforts may include: enhanced referrals matching children with appropriate placements, training and technical assistance for providers regarding supporting children with special needs or who exhibit challenging behaviors, and/or policy approaches supporting inclusion.</p>	<p>Population-level Indicators: These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor the following indicators to inform its work:</p> <ul style="list-style-type: none"> • The percentage of children ages 3-5 who are enrolled in preschool prior to Transitional Kindergarten/Kindergarten entry • The available supply of infant and toddler care relative to the need • The number/percent of early learning programs that enroll and maintain children 0-5 with special needs • The percentage of all early learning programs participating in the QRIS <p>Participant-level Indicators: These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:</p> <ul style="list-style-type: none"> • The percentage of children ages 3-5 who are enrolled in quality preschool prior to Transitional Kindergarten/ Kindergarten entry (Note: availability of information on the quality of programs is limited) • The percentage of early learning programs that improve their rating on the QRIS scale • The percentage of families of children with special needs and of infants/toddlers reporting the ability to access appropriate early care for their children

	Proposed Strategies for SP 2020-2025	SP 2015-2020 Indicators
<p>Child Health & Development</p>	<p>Oral Health Access and Utilization: Partnerships to improve young children’s utilization of preventive oral health care and advocating for policies and practices that increases dental utilization for children on Medi-Cal.</p> <p>Early Mental Health Systems and Infrastructure Enhancements: Partnerships to support trauma and resiliency-informed practices and policies in child- and family-serving organizations</p> <p>Integrate Systems for Children with Special Needs and their Families: Bolster the continuum of care to identify and treat children with special needs, and the ongoing efforts to address systemic issues that impact access to and quality of these services. Activities may include: promoting universal social-emotional and developmental screening services for children 0-5; embedding screenings, assessments, and care coordination into pediatric clinics, early learning settings, or family support services; supporting linkages and timely access to care coordination, assessment, and services for children and families requiring additional assistance.</p>	<p>Population-level Indicators: These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor the following indicators to inform its work:</p> <ul style="list-style-type: none"> ● The percentage of children ages 0-5 exposed to high levels of community violence, who live in neighborhoods that are safe for walking and bicycling, and who have access to fresh, affordable, and healthy food ● Participation by early learning programs in efforts to improve the nutritional and physical activity offerings for the children they serve ● Maintenance of universal or near-universal health insurance rates for children ages 0-5 (at or above 98.5% of children 0-5 insured) ● The number or capacity of dental providers who serve children on public insurance ● The number of pediatric health providers who provide access to developmental screening as a part of routine well-child visits <p>Participant-level Indicators: These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:</p> <ul style="list-style-type: none"> ● The percentage of children with the appropriate number of well-child visits for their age in the past 12 months, calculated using the Academy of Pediatrics schedule ● The percentage of children ages 1-5 who have seen the dentist for a routine check-up in the past year ● The percentage of parents reporting difficulty accessing services for mental health, developmental, or behavioral concerns

	Proposed Strategies for SP 2020-2025	SP 2015-2020 Indicators
Family Engagement	<p>Intensive Support for Families with Multiple Risk Factors: Provide ongoing, individualized, professional support to children and parents in families experiencing multiple challenges, such as: homelessness, low income, domestic violence, incarceration, mental illness or substance abuse. Activities may include: home visiting, care coordination, case management, family needs assessments, social-emotional screening, and therapeutic services, as well as wrap around services such as parent support /parent education groups.</p> <p>Parent Connectivity: Support informal or semi-formal social networks to promote parental resilience and reduce social isolation. Activities may include: mothers’ or fathers’ groups; paraprofessional- or peer-led support groups; social media networking opportunities; father involvement efforts; family cafés, father cafés, developmental playgroups; and partnering with parents to identify parent leaders who understand and share knowledge about attachment and early child development among their peers.</p> <p>Family Engagement Capacity Building: Increase the understanding of early brain development, the parent-child relationship and culturally responsive practices among service providers from sectors whose decisions affect family functioning, and to promote the appropriate application of that knowledge within their work. Activities may include: training and learning communities (Friday Cafés) to create a culture of awareness, learning & sharing building the capacity of both service sector leaders and direct service staff on early childhood development, adverse early childhood experiences, the 5 Protective Factors and related subjects, systematized data sharing, and promotion of family-centric practices. Target service sectors include: child and family serving organizations</p>	<p>Population-level Indicators: These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor the following indicators to inform its work:</p> <ul style="list-style-type: none"> • The percentage of children reunified with their families within 12 months of entering out of home care • The percentage of children ages 0-5 re-entering the child welfare system • The percentage of parents who regularly read and/or sing with their children ages 0-5 • The percentage of parents who report feeling connected to a support network <p>Participant-level Indicators: These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:</p> <ul style="list-style-type: none"> • The number and/or severity of risk factors reported by parents, such as inadequate food, inadequate housing, depression, domestic violence, and substance abuse • The percentage of parents reporting that they are able to access the services their family needs • The percentage of parents who report feeling connected to a support network • The percentage of parents reporting confidence in their ability to nurture their children and support their development • The percentage of parents who regularly read, sing, and/or count with their children ages 0-5