

*** PUBLIC HEARING MEETING NOTICE***
FIRST 5 SAN MATEO COUNTY (F5SMC)
COMMISSION MEETING

DATE: Monday, April 24, 2023

TIME: 4:00 PM – 6:00 PM

San Mateo County Office of Education
101 Twin Dolphin Drive, 1st Floor Conference Room,
Redwood City, CA 94065

Participate via Zoom for Public Members

<https://smcgov.zoom.us/j/99622266925>

Phone: +1 669 900 6833, Webinar ID: 996 2226 6925

PLEASE NOTE: This meeting will be held in a hybrid format with both in-person and Zoom participation options for members of the public; Commission members shall appear in person

This meeting of the First 5 San Mateo County Commission will be held at the address above in the Conference Room on the first floor at 101 Twin Dolphin Drive, Redwood City, CA 94065 and by teleconference pursuant to California Assembly Bill 2449 and the Ralph M. Brown Act, CA Gov't Code. Section 54950, et seq. **Members of the First 5 San Mateo County Commission are expected to attend the meeting in person.** For information on exceptions allowed by law please reach out to counsel for First 5, Jennifer Stalzer at jstalzer@smcgov.org. For information regarding how to participate in the meeting, either in person or remotely, please refer to the instructions at the end of the agenda.

AGENDA		
Call to Order and Preliminary Business		
1	Roll Call	4:00 PM
2	Public Comment	
3	Action to Set Agenda for April 24, 2023 Meeting and Approve Consent Agenda Items <i>(This item is to set the final consent and regular agenda, and for the approval of the items listed on the consent agenda. All items on the consent agenda are approved by one action.)</i>	
4	Commission Announcements	4:05 PM
5	Storytelling: First 5 Work/Impact: First 5 Association of California Advocacy Day by Kitty Lopez, Executive Director, First 5 San Mateo County	4:15 PM
Action Items		

6	Approval of Persimmony International, Inc Grants Management & Data System Agreement in the Amount of \$174,574 Contract Term Effective July 1, 2023, through June 30, 2025 <i>(See Attachment 6)</i>	4:20 PM
7	Approval of Amendment to Agreement with Institute of Development for the Trauma and Resiliency-Informed Systems Initiative Design Consultant and Cohort Facilitator to increase the total amount of the agreement by \$17,100 for a new total obligation not to exceed \$67,100 for the term from July 1, 2022 through June 30, 2023 <i>(See Attachment 7)</i>	4:25 PM
8	Annual Review of First 5 San Mateo County’s 2020-2025 Strategic Plan for FY2023 - 2024 in accordance to Proposition 10 Statutes, California Health and Safety Code 130140(a) (1) (C) (iii), 130140(a) (1) (E), and 130140(a) (1) (F) and San Mateo County First 5 Commission Ordinance 2.24.060 <i>(See Attachment 8)</i>	4:30 PM
Discussion Items		
9	Presentation: Friday CAFÉ Evaluation by Jenifer Clark, Research and Evaluation Specialist, First 5 San Mateo County	4:35 PM
Informational Items		
10	Report of the First 5 San Mateo County Staff Team <i>(See Attachment 10)</i>	4:55 PM
11	Committee Updates <i>(See Attachment 11)</i>	5:15 PM
12	Adjournment	6:00 PM

Public Participation:

The April 24, 2023, First 5 San Mateo County Commission meeting may be accessed through Zoom link at the top of this agenda. The April 24, 2023, First 5 San Mateo County Commission meeting may also be accessed via telephone by dialing 1 669 900 6833. Enter the webinar ID: Webinar ID: 996 2226 6925, then press #. (Find your local number: <https://smcgov.zoom.us/j/99622266925>). Members of the public can also attend this meeting physically in the **San Mateo County Office of Education, 101 Twin Dolphin Drive, 1st Floor Conference Room, Redwood City, CA 94065.**

*Written public comments may be emailed to ecruz@smcgov.org, and such written comments should indicate the specific agenda item on which you are commenting.

*Spoken public comments will be accepted during the meeting in person or remotely through Zoom at the option of the speaker. Public comments via Zoom will be taken first, followed by speakers in person.

***Please see instructions for written and spoken public comments at the end of this agenda.**

ADA Requests

Individuals who require special assistance or a disability related modification or accommodation to participate in this meeting, or who have a disability and wish to request an alternative format for the

meeting, should contact Myra Cruz, Operations Coordinator, as early as possible but no later than 10 a.m. on Friday, April 21, 2023 at ecruz@smcgov.org. Notification in advance of the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting, the materials related to it, and your ability to comment.

***Instructions for Public Comment During Hybrid Meetings**

During hybrid meetings of the First 5 San Mateo County Commission, members of the public may address the Members of the First 5 San Mateo County Commission as follows:

***Written Comments:**

Written public comments may be emailed in advance of the meeting. Please read the following instructions carefully:

1. Your written comment should be emailed to ecruz@smcgov.org
2. Your email should include the specific agenda item on which you are commenting or note that your comment concerns an item that is not on the agenda or is on the consent agenda.
3. Members of the public are limited to one comment per agenda item.
4. The length of the emailed comment should be commensurate with the two minutes customarily allowed for verbal comments, which is approximately 250-300 words.
5. If your emailed comment is received by 5:00 p.m. on Friday, April 21, 2023, it will be provided to the Members of the First 5 San Mateo County Commission and made publicly available on the agenda website under the specific item to which your comment pertains. If emailed comments are received after 5:00p.m. on Friday, April 21, 2023, the First 5 San Mateo County Staff will make every effort to either (i) provide such emailed comments to the First 5 San Mateo County and make such emails publicly available on the agenda website prior to the meeting, or (ii) read such emails during the meeting. Whether such emailed comments are forwarded and posted, or are read during the meeting, they will still be included in the administrative record.

***Spoken Comments**

In person Participation:

1. If you wish to speak to the First 5 San Mateo County Commission, please fill out a speaker's slip located at the front entrance table. If you have anything that you wish distributed to the First 5 San Mateo County Commission and included in the official record, please hand it to the First 5 San Mateo County who will distribute the information to the First 5 San Mateo County Commission members and staff.

Via Teleconference (Zoom):

1. The April 24, 2023 First 5 San Mateo County Commission meeting may be accessed through Zoom online at the links and telephone numbers listed above.
2. You may download the Zoom client or connect to the meeting using an internet browser. If using your browser, make sure you are using a current, up-to-date browser: Chrome 30+, Firefox 27+, Microsoft Edge 12+, Safari 7+. Certain functionality may be disabled in older browsers including Internet Explorer.

3. You will be asked to enter an email address and name. We request that you identify yourself by name as this will be visible online and will be used to notify you that it is your turn to speak.
4. When the First 5 San Mateo County Commission Chair calls for the item on which you wish to speak, click on “raise hand.” Speakers will be notified shortly before they are called to speak.

***Additional Information:**

For any questions or concerns regarding Zoom, including troubleshooting, privacy, or security settings, please contact Zoom directly.

Public records that relate to any item on the open session agenda for a regular First 5 San Mateo County Commission meeting are available for public inspection. Those records that are distributed less than 72 hours prior to the meeting are available for public inspection at the same time they are distributed to all members, or a majority of the members of the First 5 San Mateo County Commission.

First 5 San Mateo County Commission Meeting

CONSENT AGENDA

April 24, 2023

All items on the consent agenda are approved by one roll call motion unless a request is made at the beginning of the meeting that an item be withdrawn or transferred to the regular agenda. Any item on the regular agenda may be transferred to the consent agenda.

- 3.1 Approval of the March 27, 2023 Commission Meeting Minutes
(See Attachment 3.1)

**First 5 San Mateo County (F5SMC)
COMMISSION MEETING MINUTES
March 27, 2023
San Mateo County Office of Education
101 Twin Dolphin Drive, 1st Floor Conference Room
Redwood City, CA 94065**

Call to Order & Roll Call

1. Roll Call

Commission Members: Ken Cole, Noelia Corzo, Sylvia Espinoza, Rosanne Foust, Nkia Richardson*, Louise Rogers

Absent: Alexis Becerra, Nancy Magee, Naveen Mahmood
Valeria Chavez-Franco (Youth Commission)
Rikhav Shah (Youth Commission)

Staff: Kitty Lopez, Michelle Blakely, Khanh Chau, Emily Roberts, Myra Cruz

County Counsel: Jennifer Stalzer

**Not present during roll call.*

A quorum was present. Commissioner Foust called the meeting to order at 4:04 PM; roll call was taken. The meeting was held in a hybrid format where the public had the option to attend the meeting in person or virtually.

2. Public Comments: None

3. Action to Set Agenda for March 27, 2023 Meeting and Approve Consent Agenda Items

MOTION: ROGERS / SECOND: COLE
AYES: COLE, CORZO, FOUST, ESPINOZA, ROGERS
NOES: NONE
ABSTAIN: NONE
Motion approved

Public Comments: None

4. Commission Announcements

- Executive Director, Kitty Lopez, acknowledged F5SMC Staff Myra Cruz for coordinating the logistics of the first hybrid Commission Meeting.
- Commissioner Rogers shared the article she read in *The New York Times*, “America Is in a Disgraced Class of Its Own” by Matthew Desmond, and how the article is very relevant to our

work as it underlines poverty and some of the challenges we face in early childhood development. Kitty Lopez added that the article is included in the Commission Packet.

Public Comments: None

5. **Storytelling: First 5 Work/Impact:**

First 5 Work/Impact: Supervisor/Commissioner Noelia Corzo

Commissioner Corzo shared her experience as mother and the impact of having excellent child care on her life. She became a mother at 20 years of old and was a student at Canada College. She continued her education at San Francisco State University where they have child care center for students. She is looking forward to learning more about the work of First 5 and its impact.

Public Comment: None

6. **Presentation: Immigration Survey Result**

Jennifer Llamas, Immigrant Services Coordinator of Office of Community Affairs, Immigrant Services shared a briefing about the San Mateo County Immigration Inclusion Survey that was held last year. Llamas highlighted the following:

- Acknowledged F5SMC's Staff, Jenifer Clark, for her assistance for the education portion of the survey
- Background of developing the survey including a steering committee and 5 engagement teams as part of Gateways for Growth grant. Many communities also took part of the process.
- Over 2,700 immigrants representing all of SMC responded to a survey administered in 12 languages. The Gardner Center analyzed survey results.
- Sample of questions from the survey.
- Quotes from the respondents.
- Demographics – birth country, city/area of residence, age
 - Most have lived in U.S. for multiple years
 - Spanish is the most common language beside English
- Education opportunities and outcomes such as more than half (56%) reported having a child or children under age 22. 62% are in grades K-12.
- Economic development such as 70% of respondents reported being employed and 50% of respondents said they were not over qualified for their current job and factors preventing to job searches and support needs.
- Equitable access to services:
 - Most useful services top three answers were affordable housing, healthcare coverage, and food assistance.
- Most frequent barriers to accessing services answers include:
 - not sure if they qualify
 - do not understand English well
 - not aware services are free
 - not aware of services
- Community connectedness

- Safe communities
- Outreach

Commission asked questions and made comments.

Public Comments: None

The Power Point Presentation can be found on the F5SMC's website, [March 27, 2023 Commission Meeting Presentations](#).

7. Presentation: Review of First 5 California Annual Report

Jenifer Clark, F5SMC's Research and Evaluation Specialist, presented the First 5 California Annual Report and highlighted the following:

- It is a requirement of Prop 10 that each year's First 5 California Annual Report is reviewed in a public hearing by each First 5 County Commission
- The full report F5CA 2021 – 22 report can be accessed online at https://www.cffc.ca.gov/pdf/about/budget_perf/annual_report_pdfs/Annual-Report-21-22.pdf
- FY 2021 – 22, First 5 County Commissions invested \$277 million in Services and \$93 in Systems Change
- FY 2020 – 21, First 5 County Commissions provided 594,397 child services, 803,055 adult services, and distributed over 83,000 Kits for New Parents
- Quality Counts California & Impact 2020 such as over 9,100 sites participate across the state, and increase of 8% from the prior fiscal year and in total, 343,269 California children ages 0 to 5 benefitted from the quality improvement support provided by Quality Counts California.
- Funded the California's Emergency Child Care Bridge Program for Foster Children
- Dual Language Learner Program Expansion:
 - DLL program activities were expanded to 44 of the 58 California counties
 - Recommendations for Policy & Practice
- Social Media followers

Public Comments: None

The Power Point Presentation can be found on the F5SMC's website, [March 27, 2023 Commission Meeting Presentations](#).

8. F5SMC Staff Team Report

The F5SMC Staff Team's written report was included in the [March 27, 2023 Commission Meeting Packet](#). Kitty Lopez, highlighted the following:

- Board of Supervisors approved Measure K allocations for the FY 2023 – 24 Budget Cycle which includes \$500k funding for Build Up SMC to help hire staff and consultants to assist with onetime special projects.

- On March 10th, Thriving Families Symposium was held at Skyline College to craft community solutions for SMC's childcare crisis and review the data from the Child Care Needs Assessment 2022.
- SMC Board of Supervisors received a proclamation from Dr. Mariam Hashoush, co-chair of the SMC Oral Health Coalition, for Children's Dental Health Month.
- Friday CAFÉ participant survey result.
- First 5 SMC signed onto a letter to Governor Newsom and State Legislators urging them to address the child care crisis.
- Trauma-Informed Organizational Practices Assessment have been completed. The three participating agencies – Behavioral Health and Recovery Services, Child and Family Services and the San Mateo County Office of Education had high completion rates.
- Home Visiting Initiative Community Strategic Planning Meeting and First 5 California Home Visiting RFA Update.
- The First 5 Association of California Advocacy Day will be held virtually on April 19, 2023.

Public Comment: None

9. **Committee Updates**

Program, Operations and Planning Committee:

Commissioner Cole reported that the Committee did not meet for the month of March but will meet on April 3, 2023.

Finance and Administration Committee:

Commissioner Foust reported that the Committee did not meet for the month of March.

Early Childhood Evaluation Advisory Committee:

Commissioner Corzo reported that EVALCORP presented on the preliminary results of the Equity Indicators Project Key Informant Interview. The Committee Updates written report was included in the [March 27, 2023, Commission Meeting Packet](#).

10. Meeting Adjourned at 5:10 pm followed by Welcome Back Reception.

DATE: April 24, 2023
TO: First 5 San Mateo County Commission
FROM: Kitty Lopez, Executive Director
RE: Approval of Persimmony International, Inc Grants Management & Data System Agreement in the Amount of \$174,574 Contract Term Effective July 1, 2023, through June 30, 2025

ACTION REQUESTED

Approval of Persimmony International, Inc Grants Management & Data System Agreement in the amount of \$261,861, contract term effective July 1, 2023, through June 30, 2025.

BACKGROUND

First 5 San Mateo County's (F5SMCs) approved Strategic Plan and Strategic Plan Implementation Plan 2020-2025 sunsets June 30, 2025 and has been delivered in two phases of community investment funding cycles and focus area strategies: Phase 1 FYs 20-23 and Phase 2 FYs 23-25. The strategic plan focus areas are Resilient Families, Healthy Children, Quality Care and Education, and Policy, Advocacy and Communications (PAC). Since the current Phase 1 funding cycle ends June 30, 2023, staff are utilizing resource allocation rationales and considerations for strategies implementation and funding approach for the final 2 years of the Strategic Plan FY 23-25.

In February 2023, the Commission approved the continuation of F5SMC'S Strategic Plan Implementation Plan (SPIP) Strategies and Recommended Funding for FYs 23-25 and authorized staff to begin Scope of Work, Budget Development and or Procurement Process for Contract Negotiations with Current and New Grantees and Consultants for the final two years if the SPIP.

The recommendation today is for Persimmony International, Inc Grants Management & Data System, an online platform for aggregate data collection and grants management. This system enables activities such as invoicing, budget revisions, and monitoring programmatic progress and deliverables to be handled via a secure online portal. All F5SMC staff and each user at funded partner agencies have unique log-in credentials. Permission levels are specific to the grants and actions that each user needs to successfully administer the F5SMC grant portfolio. The unique log-in credentials and permission levels also enable electronic signatures, reducing paper usage and streamlining the invoicing submittal and approval process. The system also allows for secure entry and storage of both individual level and aggregated client data.

KEY SERVICES AND ACTIVITIES

- Authorized Licensing
- Support and Training
- Software Support
- Reasonable Database Customization
- Data Exports
- Hosting Server Accessibility and Uptime
- Performance

See **Attachment 6.1** For Exhibit A Scope of Work and Exhibit B Budget Payment.

ISSUES TO CONSIDER

- This recommendation is in accordance with the approved funding allocations of the Strategic Plan Implementation Plan (SPIP FY 23-25) and the Long-Term Financial Plan (LTFP).
- The Grants Management and Data System funds are drawn from the Strategic Plan Implementation Plan Data & Evaluation allocation of \$226,000 over two years as well as other systems allocations as appropriate.
- Persimmony has agreed to forgo an annual Cost of Living Adjustment for the term of the contract, resulting in savings.

FISCAL IMPACT

The proposed amount for the Persimmony Grants Management & Data System contract is \$174,574, or \$87,287 per year over the two-year term. This is in accordance with the approved funding allocations of the Strategic Plan Implementation Plan (SPIP) and the Long-Term Financial Plan (LTFP).

ACTION REQUESTED

Approval of Persimmony International, Inc Grants Management & Data System Agreement in the amount of \$174,574.00 contract term effective July 1, 2023 through June 30, 2025

PERSIMMONY FY 23-23

July 1, 2023-June 30, 2025

EXHIBIT A – SCOPE OF WORK

1. Scope of Work/Purpose

The Commission is contracting for use of an online software application. Use of the software allows the Commission to capture client-level and program-level information.

2. Specific Requirements for Service Delivery

The Contractor shall provide (A) limited and non-exclusive license to use contractor's Software, (B) hosting of the server necessary to run Software, (C) train-the-trainer training, software support, and online training videos, and (D) unlimited customization of reports, assessments, and field values as described in this Exhibit A.

2.1. PERSIMMONY POINT OF CONTACT

- 5.1.1. **Contact Information:** Persimmony International, Inc.
Attn: Michael Kogus
26895 Aliso Creek Rd, Suite B241
Aliso Viejo, CA 92656
Phone (949) 770-5551
Email: michael@persimmony.com

2.4. AUTHORIZED LICENSING PER NAMED USER

All access and use of Software by the Authorized Users is subject to the terms of the non-exclusive, non-transferable license for the purposes of processing by internal data related to program and contract planning, development, management, monitoring and evaluation.

- 2.4.1. Authorized Users may not use the Software for any purpose other than those expressly authorized hereunder. The uses that Authorized Users shall not make of the Software include, but are not limited to: (i) using the Software to provide data processing services to any third-party persons; (ii) making copies of the Software for distribution to third-parties; (iii) reverse-engineering or decompiling the Software for the purpose of designing, or developing a Software competitive with Contractor's Software.
- 2.4.2. Contractor shall provide software support, database access, and all other services described in this Agreement solely to "Authorized Users."
- 2.4.3. Commission bears the sole responsibility of ensuring that only Authorized Users access Software.
- 2.4.4. Commission shall be responsible for setting up new users and/or agencies (assigning passwords and creating shortcuts, etc.) and the ongoing addition/deletion of new/existing users and/or agencies.
- 2.4.5. Contractor shall guarantee that the License Fees for Authorized Named Users are inclusive of all fees for:
- 2.4.5.1. System Maintenance and Programming

- 2.4.5.2. ASP Operations
- 2.4.5.3. User Licenses
- 2.4.5.4. Software Customization Support
- 2.4.5.5. Server Software Licenses
- 2.4.5.6. Server Hosting
- 2.4.5.7. Server Maintenance
- 2.4.5.8. Database Administration and Backups

2.5. SUPPORT AND TRAINING

- 2.5.1. Contractor shall provide First (1st) Tier Admin Support and Second (2nd) Tier End-User Support to Commission. Contractor provides comprehensive 1st Tier Admin Support to the Commission's identified Software Administrator(s) and 2nd Tier Admin Support for all Authorized Users if the Commission's Software Administrator(s) is unable to troubleshoot the Users database problems.
- 2.5.1.1. **1st Tier Admin Support:** If the Commission's designated Administrator(s) has questions about the Software, they have unlimited access to their project manager(s) via phone and email and Contractor's technical support team via the creation of a support ticket at: support.persimmony.com from 8:00 AM to 5:00 PM Monday through Friday, excluding Commission holidays. Typical response times are within two-to-four hours of initial request. Emergency assistance is available seven (7) days a week, twenty-four (24) hours a day covering system failures or other emergency needs of the Commission.
- 2.5.1.2. **2nd Tier Support:** If an Authorized User has questions about the Software their first call is to the Commission's Administrator(s). Because the majority of questions from Authorized Users involve assessment inquiries or password re-sets and not 'how to use the system' Contractor is 2nd Tier Admin Support to these users. If the Commission's Administrator(s) is not able to answer or solve the Authorized User's question about the application, the Commission's Administrator(s) will initiate a support ticket through support.persimmony.com or contact the Contractor's Project Manager to help resolve the issue.
- 2.5.2. Contractor shall provide the following training options for the Commission's Administrator(s) and key Commission users:
- Train-The-Trainer and Technical Support:** Contractor's Project Manager(s) will train the Commission's Administrator(s) and key Commission staff and provide technical assistance and product training during the initial 'migration of data' phase and throughout the term of our Agreement. The Commission's Administrator(s) will be trained to use the Software's "Shadow Tools" to share the user's screen so they can see things first-hand (to actually see the users screen) and virtually apply hands-on technical assistance, if needed, to safely and securely manage the user's computer and applications. Additionally, when the Commission's Administrator(s) has questions about the system (adding new surveys, questionnaires, assessment,

reports, and any other customization of the existing fields within the system) they have unlimited access to the Software's technical support via phone, online or e-mail from 8:00 AM to 5:00 PM Monday through Friday, excluding Commission holidays as well as contacting assigned Contractor's Account Manager(s).

- 2.5.3. Contractor shall, provide the following training options for all authorized Commission users:

Just-In-Time Video Training: Contractor will provide all Authorized Users access to video training twenty-four (24) hours a day, seven (7) days a week that provides training "just in time" for the any of the data entry screens in the system. The SHOW ME videos provide step-by-step demonstrations on how to enter data, run reports and setup new fields; all at a pace that is comfortable for the user who can stop, repeat or get back to any portion of the video training at any time.

2.6. SOFTWARE SUPPORT

Contractor shall provide support in, and troubleshoot, system problems in accordance with the following specifications:

- 5.6.1. Online support requests made by the Commission's Administrator(s) ("Requestor" for the purposes of this support provision) received through via ticket submissions at support.persimmony.com will be responded to via the ticket system. If further communication outside of the ticket system is necessary to resolve the issue, Contractor's support team may use one of the three modes of communication: (1) telephone; (2) e-mail; or (3) remote desktop technology, depending on the nature of support request and discretion of Contractor for which support method it deems reasonable. Requestor will be solely responsible for all telephone, internet and other communication charges that Requestor incurs from any support related activities. If Contractor deems remote desktop support necessary, using the remote desktop technology, Requestor will be solely responsible to ensure that Requestor's network does not block access for use of such technology by Contractor.
- 5.6.2. The Commission's Administrator(s) can access free technical support via the ticket system at support.persimmony.com during Contractor's regular business hours of 8:00 AM to 5:00 PM Pacific Standard Time, Monday through Friday, excluding national holidays. Typical response times are within two-to-four hours of initial request. Contractor cannot be held liable for extended delays in technical support response times related to acts of God, third party communication systems failures and other unforeseeable events which may impact response times.

2.7. PERSIMMONY DATABASE CUSTOMIZATION

- 5.7.1. Contractor shall during the term of this Agreement provide **reasonable customization*** at no additional fee to all existing database functionality in order to meet the needs of Commission; including customization of the following modules and features within the Software:

- 5.7.1.1. Modifications and Customizations to the existing fields within the First 5 and Client Modules;

- 5.7.1.2. Unlimited number of assessments/surveys to assist authorized program users collect data on the clients they serve; and an
- 5.7.1.3. Unlimited number of customized point-and-click or export reports that pull data from the modules listed above.

** Reasonable customization includes modifications to any/all of the data fields currently within the database. If a request is made to make custom changes to fields not currently in the database or would require an undue amount of time and effort not anticipated at the time of entering into this agreement, then both parties would agree upon the scope of those changes and Contractor would provide an estimate of time and fees to complete that work.*

2.8. DATA EXPORTS

- 5.8.1. Contractor shall during the term of this Agreement provide data exports (in .txt or .xls formats that can be generated by the Commission Administrator(s) at any time) of all Commission-owned data within the database at no additional fee. Data export requests by authorized Commission staff may be requested throughout the term of this Agreement provided that these requests are made with reasonable notice and time for Contractor to export the data.

2.9. HOSTING SERVER ACCESSIBILITY AND UPTIME

- 5.9.1. Contractor agrees to host Software on its servers or government cloud for the term of this contract.
- 5.9.2. Contractor is not responsible for user's computer hardware or software failures which restrict the users' ability to access the software.
- 5.9.3. Contractor agrees to provide twenty-four (24) hour access to its server; server access may be unavailable in the event of routine maintenance (routine maintenance should be scheduled outside of Commission business hours 6:00 PM to 6:00 AM), unexpected hardware failure, malicious attacks such as denial of service attacks, or other unforeseeable events which restrict outside access to the server.
- 5.9.4. Contractor agrees to perform routine backups of all data and maintain these backups for a reasonable amount of time.
- 5.9.5. Commission agrees to reasonably maintain all client computers which access Contractor's server to be free of viruses, worms, or other malicious software.

2.10. PERFORMANCE

- 5.10.1. Contractor shall configure, support, and, allow access to and train users on its Software for Commission to enter data into the Contractor's software and allow Commission to query data, run reports and analyze data using the Software. Completion of the Tasks or Milestones contained within the Project Plan satisfies the Contractor's performance requirements of this Agreement.

EXHIBIT B – PAYMENT SCHEDULE

1. Compensation

Payment for these services described in Exhibit A - Statement of Work will be on a fixed price basis after Commission review and acceptance of original invoice in accordance with this Exhibit B - Payment Schedule.

2. Payments

The Commission will review each invoice before payment. Only invoices that include the information described in this Exhibit B– Payment Schedule shall be eligible for payment. Each invoice the Commission approves will be paid and shall constitute full payment for the deliverables for which the invoice was submitted.

3. Invoices

3.1 INVOICE SUBMISSION

3.1.1. Contractor shall submit invoice to the Commission by the 15th day after the end of the previous quarter.

FY2023-24

Component	Payment Schedule		Total Price
Licensing, Hosting, Maintenance, and Technical Support	Period	Amount	\$87,287.00
	07/01/23 – 09/30/23	\$21,821.75	
	10/01/23 – 12/31/23	\$21,821.75	
	01/01/24 – 03/31/24	\$21,821.75	
	04/01/24 – 06/30/24	\$21,821.75	
Maximum Amount Payable			\$87,287.00

FY2024-2025

Component	Payment Schedule		Total Price
Licensing, Hosting, Maintenance, and Technical Support	Period	Amount	\$87,287.00
	07/01/24 – 09/30/24	\$21,821.75	
	10/01/24 – 12/31/24	\$21,821.75	
	01/01/25 – 03/31/25	\$21,821.75	
	04/01/25 – 06/30/25	\$21,821.75	
Maximum Amount Payable			\$87,287.00

BUDGET
San Mateo County Children and Families Commission

Annual Costs		
Description	2023/2024	2024/2025
First5 Database (Site License)	\$87,287	\$87,287
System Maintenance	Included	Included
SaaS Operations	Included	Included
User Licenses	Included	Included
Database Support	Included	Included
Technical Assistance and Support		
Dedicated Data Coaching and Assistance	Included	Included
Technical Support (support.persimmony.com)		
Data Quality Assurance		
All Database Enhancements		
Annual Server Hosting and License	Included	Included
Care Module and Client Data		
Unlimited Assessments and Standard Reports		
Performance Measurement Module		
Fiscal Module, alerts, and Invoicing		
Contract Monitoring Module		
Insurance Module		
Client Alerts and Maintenance		
Standard and Site-Specific Customizations to Reports		
Security and Setup Module		
Agency Contact and Communication Module		
Client Referral		
Annual State Reporting Support		
Evaluator Support		
On-Demand Training Videos		
Sub-Total	\$87,287	\$87,287

Total Of All Costs		
Recurring Costs	\$87,287	\$87,287
One-time Costs		
*Additional Services	\$0	\$0
Grand Total Costs	\$87,287	\$87,287

*County may request additional services from Contractor throughout the term of this agreement. Contractor and County shall agree on the scope of work for additional services, and Contractor shall obtain County’s approval in writing before beginning any additional services at the rate of \$195 per hour or as agreed.

**Additional Modules may be added at any time. There is a per user fee for additional module functionality.

DATE: April 24, 2023
TO: First 5 San Mateo County Commission
FROM: Kitty Lopez, Executive Director
RE: Approval of Amendment to Agreement with Institute of Development for the Trauma and Resiliency-Informed Systems Initiative Design Consultant and Cohort Facilitator to increase the total amount of the agreement by \$17,100 for a new total obligation not to exceed \$67,100 for the term from July 1, 2022 through June 30, 2023

ACTION REQUESTED

Approval of Amendment to Agreement with Institute of Development for the Trauma and Resiliency-Informed Systems Initiative Design Consultant and Cohort Facilitator to increase the total amount of the agreement by \$17,100 for a new total obligation not to exceed \$67,100 for the term from July 1, 2022 through June 30, 2023

BACKGROUND

In January 2018, F5SMC launched a multi-sector initiative to transform service delivery for young children and their families to fulfill the intention the Early Mental Health Systems investment strategy. The Trauma- and Resiliency-Informed Systems Initiative (TRISI) is a countywide effort to integrate a comprehensive commitment to address trauma and promote resiliency into our programs, structures, and culture with a long-term goal of embedding trauma- and resiliency-informed policies and practices at every level of the system. The Initiative is in its second round of an assessment, cohort, and coaching model to promote trauma-informed organizational practices.

To support cohort facilitation in the second round of the TRISI Initiative (TRISI 2.0), F5SMC contracted with Institute of Development (IOD) beginning July 1, 2022 after releasing a Request for Qualifications (RFQ). IOD was awarded the contract for the Design Consultant and Cohort Facilitator. The original contract term was for July 1, 2022 through June 30, 2023 in the amount of \$50,000.

Recommendations

This recommended amendment includes the following:

- Augmented funding in an amount not to exceed \$17,100
- Adjustments to the Scope of Work and Budget, which primarily focuses on the addition of planning and facilitating the “bridging” between the cohort and coaching participants within each agency involved in TRISI 2.0

ISSUES TO CONSIDER

- This amendment will allow for continued support for current agency participants and continuity with the consultants currently serving these functions
- Funding for F5SMC budget allocation to support Mental Health Systems support is included in the FY22-23 Revised Budget and F5 TRISI SPIP FY2020-23. The \$17,100 budget amount for the amendment is included in the aforementioned.

FISCAL IMPACT

The recommended contract amendment to Institute of Development for consulting services for design and cohort facilitation for the Trauma- and Resiliency-Informed Systems Initiative requires an additional \$17,100 beyond what has previously been approved and expended. To fund the amendment, we will utilize up to \$17,100 of funding already earmarked from the F5SMC SPIP for Mental Health Systems to support this amendment.

RECOMMENDATION

Approval of Amendment to Agreement with Institute of Development for the Trauma and Resiliency-Informed Systems Initiative Design Consultant and Cohort Facilitator to increase the total amount of the agreement by \$17,100 for a new total obligation not to exceed \$67,100 for the term from July 1, 2022 through June 30, 2023

Detailed Amended Budget Request & Narrative – April 1, 2023 to June 30, 2023 (Revised April 1, 2023)

Original Contract Scope and Budget

Activity	Estimated Cost	Estimated Hours	Description
Monthly Cohort group meeting planning	\$14,000	93 hours	<ul style="list-style-type: none"> Planning and organization of cohort meeting agenda and monthly participant material. Documentation of meeting and participant interactions
Discovery and retroactive review of project	\$1,950	13 hours	<ul style="list-style-type: none"> Review of documents and other related information from previous year of project
Overall Cohort Structure and Material Planning	\$7,400	49 hours	<ul style="list-style-type: none"> Design, research, development of cohort process, system, and flow prior to the start of the cohort meetings. Including collaboration with design team and coaches. Creation of cohort survey for facilitator Other task related to overall planning and structuring of cohorts
Monthly Cohort meetings (3-4 Cohorts 8-12 people each, 2 hours each)	\$14,400	96 hours	<ul style="list-style-type: none"> Monthly cohort meetings over the course of the project. Estimated at 4 cohorts meetings once a month for 2 hours each.
Administrative Tasks and Meetings	\$6,250	42 hours	<ul style="list-style-type: none"> Core team meetings, work groups, agency leadership meetings, internal team meetings, cohort members, etc.
Creation and maintenance of individualized resources for cohort members	\$6,000	40 hours	<ul style="list-style-type: none"> Meeting agenda, notes, requested resources central location and maintenance
Estimated Total	\$50,000	333 hours	

Addendum Scope and Budget

Activity	Estimated Cost	Estimated Hours	Description
Bridging Cohort/Coaching Groups Planning	\$9,000	60	<ul style="list-style-type: none"> Design, research, development of bridging process, continued support for orgs post-TRISI system, and Collaboration with design team and coaches. Other tasks related to overall planning and structuring of Bridging
Bridging Cohort/Coaching Group Meetings	\$6,900	45	<ul style="list-style-type: none"> Co-development of action plans with organizations and coaches Facilitation of group process
Pseudo CFS Coaching Planning	\$1,200	8	<ul style="list-style-type: none"> To support pivot from T2 in coaching role
Estimated Total	\$17,100	114 hours	Institute of Development increased the hourly rate to \$175 in January 2023 but will continue the contract with First Five San Mateo County at \$150

DATE: April 24, 2023

TO: First 5 San Mateo County Commission

FROM: Kitty Lopez, Executive Director

RE: Annual Review of First 5 San Mateo County's 2020-2025 Strategic Plan for FY 2023-2024 in accordance with Proposition 10 Statutes, California Health and Safety Code 130140(a) (1) (C) (iii), 13140(a) (1) (E), and 130140(a) (1) (F) and San Mateo County First 5 Commission Ordinance 2.24.060

ACTION REQUESTED

Annual Review of First 5 San Mateo County's 2020-2025 Strategic Plan for FY 2023-2024 in accordance with Proposition 10 Statutes, California Health and Safety Code 130140(a) (1) (C) (iii), 13140(a) (1) (E), and 130140(a) (1) (F) and San Mateo County First 5 Commission Ordinance 2.24.060

BACKGROUND

In accordance with the California Health and Safety Code and San Mateo County First 5 Commission Ordinance referenced above, the First 5 County Commission shall, on at least an annual basis, review its strategic plan and revise the plan if necessary and is appropriate. Additionally, County Commissions are required to conduct a public hearing on the review of the strategic plan before any revisions are adopted, and to submit its strategic plan and any revisions to First 5 California.

2020-2025 Revised Strategic Plan: After a comprehensive strategic planning process, the 2020-2025 Revised Strategic Plan was developed and adopted by the F5SMC Commission on October 22, 2018. The community was engaged throughout the process with the Commission during a significant portion of the Commission meetings through table top discussions and audience participation (**See Attachment 8A, 2020 – 2025 Strategic Plan**). The approved Strategic Plan's approach inspired by social determinants of health and Bronfenbrenner's ecological model is relevant today given the current events affecting the physical health, emotional health, economic vitality and equanimity with systems supporting young children and families.

Strategic Plan Implementation Plan (SPIP): On October 28, 2019, the Commission approved the SPIP, strategies and funding allocations, for FY2020 through FY2023, supporting the implementation of the 2020-2025 Strategic Plan. For the duration of the 2020-2025 Strategic Plan, F5SMC will focus on three primary community roles: Strategic Financial Investor, Community Partner in aligned efforts, and as a Community Leader to advocate for the prioritization of young children and their families in decision making processes.

The Commission also approved the Long-Term Financial Plan (LTFP) for FY2020-2025, allocating funding to the Strategic Plan's Focus Areas: Healthy Children; Quality Care and Education; Resilient Families; and Policy, Advocacy, Evaluation and Communication.

July of 2020 marked the beginning of the first phase of the 5-year plan; a 3-year funding cycle of community investments. New contracts came to the Commission April – June for final approvals. Updates on the Strategic Plan Implementation have been provided to the Program, Operations and Planning Committee (POP), to the full Commission and public since 2019; updates will be ongoing.

This agenda item satisfies the requirement of an Annual Review of First 5 San Mateo County's 2020-2025 Strategic Plan; no changes to the 2020-2025 Revised Strategic Plan are recommended at this time; SPIP implementation began July 1, 2020.

RECOMMENDATION

Annual Review of First 5 San Mateo County's 2020-2025 Strategic Plan for FY2023-2024 in accordance with Proposition 10 Statutes, California Health and Safety Code 130140(a) (1) (C) (iii), 13140(a) (1) (E), and 130140(a) (1) (F) and San Mateo County First 5 Commission Ordinance 2.24.060



First 5 San Mateo County **Strategic Plan**

July 1, 2020 - June 30, 2025





Vision

Success for every child.

Mission

First 5 San Mateo County promotes positive outcomes for young children and their families through strategic investments, community leadership, and effective partnerships.

Desired Outcomes

The First 5 San Mateo County Commission (F5SMC) adopted the following desired outcomes to guide its efforts during the 2020-2025 Strategic Plan:

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 children's health and development

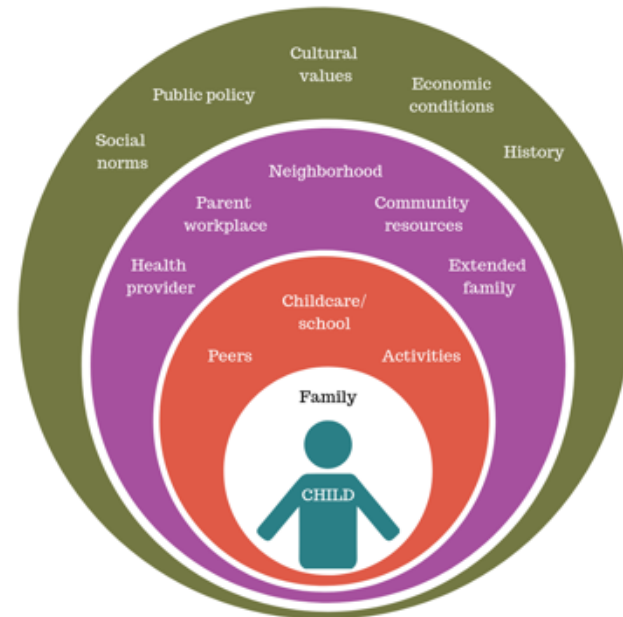
5 Children have healthy attachments to their parents and caregivers

6 Children have access to and are utilizing appropriate health care services to meet their health and developmental needs

Preparing Children for Lifelong Success

By the time children reach their sixth birthday, they should be poised to achieve their potential in all areas. This is frequently labeled “school readiness” and measured using standardized tests; however, the work of the First 5 San Mateo County Commission goes far beyond success in school settings. F5SMC’s vision is for children to succeed in all aspects of their lives.

The foundations for physical, emotional, cognitive, and behavioral health are laid during the first years of life. Children develop these capacities through interactions with responsive and loving caregivers in safe environments. Stable, nurturing relationships literally build children’s brains in ways that foster healthy emotional expression, self-regulation and impulse control, and social interactions. Parents and other caregivers are better able to build warm and consistent relationships with children if they themselves feel secure in their lives. Parents who are experiencing mental health issues, substance abuse, violence, social isolation, or the stress of being unable to meet their family’s basic needs face more barriers to providing a nurturing environment for their children.



Research has identified four major building blocks that contribute to a child’s likelihood of thriving in school and beyond: behavioral and emotional health, physical health, social skills, and academic skills. Children who arrive in elementary school well prepared in all four of these building blocks are over three times more likely to be reading at grade level in third grade than children who need additional support in all areas. In fact, healthy behavioral and emotional development at kindergarten entry is just as important as academic skills in predicting future success. Given our charge to foster optimal development for children prenatally through age 5, F5SMC can play a unique role in ensuring that communities prioritize the needs of young children and their families.

Our approach to supporting children’s success is aligned with Bronfenbrenner’s Ecological Systems Theory, which was first published in 1979. This theory emphasizes environmental factors as central context to development. In this approach, the child is at the center of what can be visualized as concentric circles including other systems and influences, such as family, community, and public policy.

Many of these systems and influences have been studied in research on social determinants of health, including physical environment, housing, employment opportunities, wages, education, community safety, and social connections. These factors influence the health, cognitive and social-emotional development, well-being, and long-term success of children and their caregivers. Each child’s development and opportunity to thrive is thus shaped by the distribution of and access to resources and power.¹ Understanding the complexity of achieving health and well-being, we strive to work broadly and proactively to create, support, and sustain the social, physical, and economic conditions for children’s success.

¹ World Health Organization (2018), *Social Determinants of Health*, Retrieved from www.who.int/social_determinants/en/

History of First 5 Children and Families Commissions

In November 1998, California voters passed the California Children and Families First Act (Prop 10). This groundbreaking legislation added a 50-cent tax on all tobacco products. The purpose of this funding is to create “an integrated, comprehensive, and collaborative system of information and services to enhance optimal early childhood development and to ensure that children are ready to enter school.”

The Act established the Children and Families Commissions, subsequently called First 5 Commissions, in each of the state’s 58 counties. It also created a State Children and Families Commission (First 5 California) that focuses on statewide initiatives, media communications, public education, and research and evaluation functions.

Funds from the Children and Families First Act are distributed to each county based upon the number of births in that county. County Commissions are responsible for developing strategic plans that guide funding decisions to meet local strategic priorities, consistent with the legislative intent of the Act.

For the last 20 years, First 5 County Commissions have funded a wide variety of programs and services that address the needs of children in the prenatal stage through age 5 and their families. Investments were made in the areas of early childhood development and education, health care, and parent education and support. Additionally, investments have been made to improve capacity and quality of services provided to young children and their families. These local efforts have been complemented by an array of investments by First 5 California.

In recent years, many Commissions have been faced with the issue of declining revenues. While First 5 dollars were never able to meet all of the need for children 0-5 and their families, the decrease in funding has resulted in five related trends in Commission investments:

1 Endorsing practices with evidence of effectiveness

2 Focusing on prevention and early identification

3 Targeting populations most at risk

4 Shifting the balance from funding primarily direct services to efforts that contribute to broader systems change

5 Considering the contextual landscape at the local, state, and federal level by examining the policy and budget landscape, partnership opportunities, and other funding and sustainability considerations

As outlined in its 2015-2020 Strategic Plan, F5SMC is prioritizing partnerships with entities that are achieving both direct impact and positive systemic change. This approach fosters sustainable improvement within agencies and systems, and allows families beyond the direct service reach to benefit. Many of our investments serve present needs as well as examining and improving the underlying systems.

About the First 5 San Mateo County Commission

The First 5 San Mateo County Commission was established in March 1999. It consists of nine Commissioners appointed by the San Mateo County Board of Supervisors. Since its inception, First 5 San Mateo County has invested more than \$150 million in local programs and has served nearly 100,000 children from birth through age five. Each year, more than 8,000 parents and primary caregivers receive F5SMC services.

Roles of the First 5 San Mateo County Commission

First 5 San Mateo County is fortunate to be a part of a community with a history of collaboration and partnership within and across our publicly funded service sectors and community-based organizations. In light of the Commission's declining revenues, as well as expanding opportunities for partnership, the First 5 San Mateo County Commission reaffirmed that its desired role in the community is to maximize positive impacts for children, families, and the community. For the duration of the 2020-2025 Strategic Plan, F5SMC will focus on three primary community roles: Strategic financial investor, community partner in aligned efforts, and systems leader to advocate for the prioritization of young children and their families in decision-making processes.

Strategic Financial Investor:

The Commission's role as an investor is to make positive movement toward its desired outcomes in critical areas of need for young children and their families. Specifically, these investments aim to make a unique contribution to specific family needs that are currently unable to be addressed by other entities. Strategic investments will also target quality improvement and enhancements within and across organizations and professionals serving children 0-5 and their families.

Community Partner:

The Commission's role as a community partner may be as a leader, initiating collaborative efforts aligned to its vision and mission; as a partner in existing efforts for which the leadership is provided or shared; or as a champion of community efforts, encouraging the efforts of others better resourced to make a positive impact. First 5 San Mateo County prioritizes partnerships that are results-driven, action-oriented, and likely to achieve measurable results and community impact.

Systems Leader:

As the County's only organization legislated exclusively to achieving positive outcomes for children 0-5 and their families, the Commission will vigorously advocate for their needs and priorities. Using appropriate and respectful channels, this leadership aims to ensure that the unique health and developmental needs of young children are known, discussed, and integrated into community solutions for families.





Prioritizing San Mateo County's Young Children Through Policy, Advocacy, and Building Awareness

Lasting improvements to the well-being of the County's youngest residents are possible when community organizations, policy makers, businesses, and residents understand the importance of supporting young children and their families, and work together to mobilize resources.

Voicing the need to prioritize young children and those who care for them is especially important in light of the stark inequalities of opportunity for the children of San Mateo County. While San Mateo County overall has some of the best health outcomes in the state,² these experiences are not shared equally. San Mateo County has greater income inequality than any other county in California, with the average income of the top 1% being nearly 50 times greater than the average income of the bottom 99%.³

This inequality manifests itself in the stress experienced by parents and caregivers, and the opportunities available for young children to reach their potential. Children living in low-income families are less likely to visit the dentist, attend preschool, be read to daily, and have access to enrichment activities, and they are more likely to be diagnosed with a developmental disability and to have a parent dealing with depression.

Children's health and development outcomes follow a social gradient: the further up the socioeconomic spectrum, the better the outcomes. Inequitable access to supports and services has the potential to maintain or increase inequities for children during their early years, because those families most in need of services are typically least able to access them. Reducing inequities during early childhood requires a multi-level, multi-faceted response.⁴

First 5 San Mateo County strives to create the conditions that will allow all young children to prosper socially, emotionally, and economically. Ensuring that all children can achieve their potential is a significant undertaking and will require a community solution that is not possible with funding alone. This effort will require common understanding, shared ownership, willingness to change, and commitment to providing equitable opportunities for all children.

An example of this work is the Early Childhood Policy Cabinet, which was convened as part of the strategic planning process in 2015-2020. The Cabinet consisted of a cross-section of large agencies in San Mateo County, including the County Office of Education, Human Services Agency, Probation, Housing, and others. The leadership of these agencies quickly identified opportunities for alignment and maximization of positive outcomes while better meeting family needs. This work will continue as part of First 5 San Mateo County's 2020-2025 Strategic Plan.

² University of Wisconsin Population Health Institute. (2018). *County Health Rankings & Roadmaps*. Retrieved from countyhealthrankings.org: <http://www.countyhealthrankings.org/app/california/2018/rankings/san-mateo/county/outcomes/overall/snapshot>

³ Price, E. S. (2018, July 19). epi.org. Retrieved from Economic Policy Institute: <https://www.epi.org/publication/the-new-gilded-age-income-inequality-in-the-u-s-by-state-metropolitan-area-and-county/>

⁴ Moore, T., McDonald, M. & McHugh-Dillon, H. (2014). *Early childhood development and the social determinants of health inequities: A review of the evidence*. Parkville, Victoria: Centre for Community Child Health at the Murdoch Children's Research Institute and the Royal Children's Hospital.

Additional activities to promote the prioritization of young children in San Mateo County are listed below:

Leadership on Early Childhood Advocacy & Policy Development:

Identify strategic partners and align leadership and resources to promote optimal child and family outcomes. Activities may include: convening high-level, multi-agency policy conversations that keep early childhood priorities and the impact of early childhood in the forefront of decision making; development and implementation of a Policy and Practices Platform that advances First 5 San Mateo County’s vision of Success for every child; and partnering with elected officials, community leaders, and other stakeholders to promote an early childhood agenda.

Community Partnership:

Foster cross-agency and multidisciplinary partnerships to better serve children 0-5 and their families. Activities may include: facilitation of partnerships and collaborative efforts that increase the capacity and quality of services to children 0-5 and those that care for them; and hosting facilitated opportunities for multidisciplinary cross-training and networking for both funded and unfunded partners.

Community Education:

Increase understanding about foundational early childhood topics such as early brain development. In coordination with other efforts, build public and political will to invest in the well-being and success of our young children. Activities may include: development and implementation of a Communications Plan highlighting the importance of a child’s early years, the needs and circumstances of families with young children in San Mateo County, and opportunities for stakeholders to act in ways that maximize positive outcomes for this population.

Early Childhood Research

The Children and Families First Act was based on research that a child’s brain develops more during the first five years than at any other time and that a child’s experiences and relationships during these years will impact a child for the rest of his or her life.

Since that time, a wealth of research has supported and expanded upon these earlier findings. This newer research provides First 5 Commissions additional information about types of early childhood programs and services that make the greatest difference, as well as demographic targets that will achieve the greatest benefit.

Among the primary findings are:

- The brain undergoes its most rapid development from the prenatal period through three years old. In the first few years of life, 700 new neural connections are formed every second.
- During these early sensitive periods of development, healthy emotional and cognitive development is shaped by responsive, dependable interaction with adults.
- Conversely, stress experienced early in life can result in physiological changes to the brain and have a cumulative toll on a child’s physical, emotional, and cognitive development.
- The more adverse experiences in childhood, the greater the likelihood of developmental delays and lifelong problems in learning, behavior, and physical and mental health.

The impact of experiences on brain development is greatest during the earliest years of a child’s life. It is easier and less costly to form strong brain circuits during the early years than it is to intervene later. However, it is important to remember that the brain remains flexible and capable of building new pathways throughout life. Therefore, while prevention of early childhood trauma is ideal, intervention after stressors have occurred can also be significantly beneficial to children.

Children and Families in San Mateo County

Located in the heart of the Silicon Valley, San Mateo County has a highly-educated population with a median family income of \$125,227. It is home to over 55,000 children age five and under. Latinx children are the majority population in the county at 33.9%, followed by Caucasian (31.9%) and Asian American (22.6%). Other ethnic populations include: Multiracial (11.1%), African American (1.8%), and Pacific Islander (1.7%).⁵

Median annual income for families in San Mateo County

\$125,227

San Mateo County is home to over

55,000

Children age five and under

Ethnic population

Latinx	33.9%
Caucasian	31.9%
Asian American	22.6%
Multiracial	11.1%
African American	1.8%
Pacific Islander	1.7%

Approximately 10% of all children 0-5 are living at or below federal poverty standards. Compared to the overall population of children 0-5 in the county, Latinx and African American children are much more likely to be living in poverty than all other children. In fact, 31% of all African American children 0-5 and 20% of all Latinx children 0-5 live in poverty.⁵

31%

of all African American children 0-5 live in poverty

20%

of all Latinx children 0-5 live in poverty

⁵ 2016 American Community Survey, 5-year estimates for San Mateo County.

While the median annual income for families in the county was \$125,227 in 2016, the Self-Sufficiency Standard for California estimates that a San Mateo County family of two adults and two children (one infant/toddler and one preschooler), would need an annual income of \$146,005 to make ends meet without assistance. Although a relatively small proportion of families in the county live below the Federal Poverty Line, 39% of families with children are below the Self-Sufficiency Standard.⁶ At the same time, high housing prices continue to make owning a home—or even finding affordable rentals—difficult for most families, as the median value of housing units is almost double that of the state.

According to the 2013 Silicon Valley Parent Story Project,⁷ approximately one-third of parents in San Mateo and Santa Clara Counties experienced depressive symptoms. Low-income parents reported higher frequency of depressive symptoms compared to middle-to-high income parents. The study also brought to light several other troubling disparities between low-income or Latinx parents and their middle-to-high income and non-Latinx peers. These included:

- Low-income parents reported lower levels of both personal and neighborhood support;
- Latinx preschool-age children were less likely to be enrolled in preschool and less likely to participate in enrichment activities outside of school;
- Low-income parents were more likely to encounter problems finding childcare and identified cost and inconvenient hours or locations as barriers to selecting child care options; and
- Low-income parents engaged in language development activities less frequently with their infants/toddlers than middle-to-high income parents.

The Parent Story Project also presented findings that illustrated strengths among low-income and Latinx parents. These included that they:

- Were more likely to help their children with homework;
- Were more likely to have family meals together than middle-to-high income parents; and
- Reported a greater ability to deal with stress compared to non-Latinx parents.

Core Values & Guiding Principles

The First 5 San Mateo County Commission has established the following Core Values and Principles to guide this Strategic Plan.

Core Values

We believe that our work must:

- 1 **Support the whole child within the whole family:** We understand that young children's social, emotional, physical, and cognitive development are interdependent, and that children grow and learn within their family relationships and the larger community.

⁶ Sources: 2016 American Community Survey, 5-year estimates for San Mateo County, and 2018 Self Sufficiency Standard for California, San Mateo County estimate.

⁷ Diaz, Rebeca & Rodriguez, Fernando & Boal, Ashley & Miller, Sarah. (2014). *The Silicon Valley Parent Story Project*.

- 2 **Build connections between the many systems that serve young children and their parents and caregivers:** We recognize the importance of smooth transitions for children and families as they grow from infancy through toddlerhood and preschool, and enter elementary school.
- 3 **Embrace the importance of fathers and male role models in the healthy development of children:** We expect intentional inclusion of fathers/male role models and consideration of their needs within the structure and delivery models of family services and supports.
- 4 **Promote positive development in infants and toddlers, and focus on prevention and early intervention:** We know that 75% of a child's brain develops before the third birthday, and that it is therefore critical to support pregnant women and to help mothers, fathers, and caregivers establish and maintain stable and loving relationships with their infants and toddlers.
- 5 **Include children of diverse abilities:** We support the right of all children to live, grow, and learn in their communities.
- 6 **Respect and engage parents and families:** We acknowledge the strength of individual familial structures and cultures, and respect the desire and ability of parents to nurture their children and act as their first teachers.
- 7 **Honor cultural, ethnic, and linguistic diversity:** We believe that all services should be delivered in a culturally and linguistically appropriate way.
- 8 **Appreciate strengths:** We build upon the positive qualities of children, families, and communities in the design and delivery of programs.
- 9 **Enlarge community capacity:** We invest in our community's understanding of and ability to support the healthy development of all children.

Guiding Principles

In our work on behalf of young children, we strive to:

- 1 **Create value:** Invest in approaches that add social and economic value to the landscape of supports for all children and families; and build upon, integrate, and collaborate with existing services to improve quality and provide efficient service delivery.
- 2 **Promote equity:** Ensure that all children, regardless of circumstance, have the opportunity to reach their full potential, and include families as partners in decisions that affect their service provision.
- 3 **Foster excellence:** Expect excellence and allow for innovation in the development and implementation of initiatives and programs.
- 4 **Demonstrate effectiveness:** Consider the existing evidence of impact when designing and supporting activities, and evaluate our investments to monitor results and inform continuous quality improvement.
- 5 **Achieve sustainable change:** Use Commission investments to effect long-term policy, institutional, funding, and systemic changes that extend the reach and impact of First 5 San Mateo County activities.

Developing the Strategic Plan - The Planning Process

In March 2018, the First 5 San Mateo County Commission began its strategic planning revision process to guide future community investments. The process included the following activities:

- A Community Forum for members of the public to share their experiences, perspectives and priorities
- A Partnership Breakfast with public agency systems partners to identify areas for collaboration
- An ad-hoc committee of F5SMC Commissioners that met regularly over seven months
- Two strategic planning sessions held as part of Commission meetings that included dialogue among Commissioners, community members, and First 5 San Mateo County staff.

Across the input processes, five themes emerged as central to F5SMC efforts moving forward.

- 1 **Convener and Collaborator:** Helping local funded and unfunded stakeholders tap into collaborative opportunities.
- 2 **Resource Maximization:** Leveraging, aligning, and blending funding as well as ensuring available public funds are maximized before F5SMC funding is utilized.
- 3 **Impact Investor:** Focus investments on prevention and target interventions to children with the very highest needs.
- 4 **Systems Catalyst:** Striking the right balance between program investments and systems improvements through cross-sector initiatives and effective partnership.
- 5 **Advocate and Champion:** Impacting local and regional decision makers, including community business leaders, to prioritize young children.

The information gathered from these discussions served as guidance for the strategic planning process and informed the Commission's deliberations and ultimate decisions on the Strategic Plan.

Framework for the 2020-2025 Strategic Plan

The 2020-2025 Strategic Plan is consistent with the focus and intent of the Children and Families Act, building on what has been learned and accomplished locally and providing a framework for the Commission and the community for how Proposition 10 funds will be strategically invested over the next five years.

Central to the success of these investments is a strong foundation that adequately prioritizes early childhood systems and services in San Mateo County. These foundational improvements will be furthered with investments in three core focus areas: Quality care and education, healthy children, and resilient families.



Focus Area: Quality Care and Education

Early learning settings—including infant and toddler care, family child care homes, and center-based preschool programs—play a critical role in nurturing children’s social, emotional, and cognitive development and are an essential component of any strategy to promote school readiness and success in all aspects of life. In San Mateo County, 69% of children ages 0-5 live in families where all parents work,⁸ and 81% of kindergartners attend preschool in the year before entering elementary school.⁹ The benefits of a continuum of high-quality early learning, beginning in infancy and with smooth transitions into toddler care, preschool, and elementary school, has been well researched and is a priority for the Commission.

69%

of children ages 0-5 in San Mateo County, live in families where all parents work

Quality matters when providing early care and education services. Programs that participate in continuous quality improvement efforts are more likely to prepare students for success in school and beyond. Children who participate in high-quality early childhood education programs show long-term impacts on their ability to learn and interact with the world around them, including increased language and math skills, positive peer relationships, decreased rates of grade repetition, fewer referrals to special education services, and higher levels of cognitive and social development.¹⁰

81%

of kindergartners attend preschool in the year before entering elementary school

Central to providing a quality early care and education experience for children is a well-compensated, well-educated, and well-respected workforce. Studies have found that teachers’ specialized knowledge about child development and instruction for young children is particularly important.¹¹ A highly skilled, educated, and compensated workforce is necessary for high-quality early education. Professionalizing the early care and education field reduces teacher vacancies and turnover.¹²

The long-term economic benefit of children attending high-quality preschool programs is well documented, particularly for children living in low-income households. These “return on investment” studies differ on level of return depending on the population served, length of the program, and quality enhancements. One of the most widely studied programs is The Perry Preschool Program, a high-quality, half-day preschool targeted to very low-income children. Evaluations of this program document that the program returned seven dollars for every dollar invested.¹³

⁸ American Community Survey, 2012-2016 5 year estimates. American Fact Finder, Retrieved from <https://factfinder.census.gov/>

⁹ 2012 San Mateo County School Readiness Assessment, June 2013, SRI International, <https://www.siliconvalleycf.org/sites/default/files/publications/2012-silicon-valley-school-readiness-assessment.pdf>

¹⁰ Reynolds, A.J. and Wolfe, B. (1997). School achievement, early intervention, and special education: New Evidence from the Chicago Longitudinal Study. Focus 19, 3, 25-28. Available online at: www.worldbank.org/children/why/18.htm

¹¹ Bueno, M., Darling-Hammond, L., and Gonzales, D. Preparing Teachers for Pre-K: What Policymakers Should Know and Be Able to Do (Washington, DC: Pre-K Now, 2008).

¹² San Mateo County Teacher Compensation Study, Davis Consulting 2017

¹³ National Institute for Early Education Research. Economic benefits of quality preschool education for America’s 3- and 4- year olds. <http://nieer.org/resources/facts/index.php?FastFactID=6>

Parents of children with special needs and parents of infants and toddlers consistently report difficulty finding appropriate child care settings for their children. According to the 2017 San Mateo County Child Care Needs Assessment conducted by the Child Care Partnership Council, only 60% of the demand for infant and toddler care can be met with the available supply, and only 13% of the need for subsidized infant/toddler care is met.¹⁴

60%

of the demand for infant and toddler care can be met with the available supply

The 2014 assessment estimated that the parents of 1,956 children ages 0-5 with identified special needs are looking for an early learning program that will enroll their child. While the 2017 report did not provide a numerical estimate of the number of children with special needs who are seeking child care, it noted that the overall numbers of children served through the Golden Gate Regional Center and school district special education programs is similar to what has been found in prior assessments.

13%

of the need for subsidized infant/toddler care is met

High-quality early learning programs can also provide an early identification process to assess young children for special needs. Early interventions for children at high risk can improve their social competence and cognitive abilities prior to school entry.^{15,16} These programs adapt to meet the needs and strengths of their students, to ensure that students with physical, sensory, or cognitive disabilities can learn some or all of the same lessons as other students.

In order to enroll their children in high-quality early learning programs, parents must be able to find understandable, user-friendly, reliable information about the quality of specific programs. Under the collaborative leadership of First 5 San Mateo County, San Mateo County Office of Education, and 4Cs of San Mateo County, San Mateo County began its Quality Rating and Improvement System (QRIS), which is called Quality Counts San Mateo County.

Quality Counts San Mateo County supports the quality improvement efforts of early learning programs to help make the care and education they provide even better. It is part of a state and national movement to raise early learning quality. Quality Counts rates early learning programs using statewide, evidence-based standards for high quality care and education. The ratings help programs identify where they want to improve; Quality Counts gives the programs helpful resources and training based on their ratings. Quality Counts also gives parents information to help find and select the best early learning program for their child.

The strategies for investments listed below link to and build upon the foundation of Quality Counts.

STRATEGIES FOR INVESTMENT

1

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 or who are 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 to creating and sustaining high-quality early learning programs.

¹⁴ San Mateo County Child Care and Preschool Needs Assessment. (2017) Retrieved from http://www.smcoe.org/assets/files/learning-and-leadership/child-care-partnershipcouncil/Needs%20Assessment%202017/CCPC_Full_Report_Needs_Assessment_11-17.pdf

¹⁵ Karoly, L., Greenwood, P.W., Everingham, S.S., Hoube, J., Kilburn, M.R., Rydell, C.P., Sanders, M. and Chiesa, J. (1998). *Investing in Our Children: What We Know and Don't Know about the Costs and Benefits of Early Childhood Education*. Santa Monica, CA: RAND Corporation. Available online at: www.rand.org/publications/MR/MR898.

¹⁶ Reynolds, A.J. and Wolfe, B. (1997). *School achievement, early intervention, and special education: New evidence from the Chicago Longitudinal Study*. Focus 19, 3, 25-28. Available online at: www.worldbank.org/children/why/18.htm

2

Expand Access to Early Learning Settings/Environments 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 to providers who enroll children with special needs, and/or policy approaches supporting inclusion.

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:

- 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

Participant-level Indicators:

These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:

- 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 overall rating on the QRIS matrix
- The percentage of families of children with special needs and of infants/toddlers reporting ability to access appropriate early care for their children

Focus Area:

Healthy Children

Children's optimal health and development is influenced by many factors, from the environments in which children live and are cared for to their access and utilization of preventive health services. F5SMC has a strong history of supporting collaborative health efforts, particularly those that focus on prevention and early intervention.

Preventive health care can help minimize threats to healthy development and provide early detection and intervention for problems that emerge.¹⁷ In San Mateo County, 98.5% of children are covered by health insurance (CHIS). Health coverage and utilization of preventive care benefits has been and continues to be an advocacy priority for the First 5 San Mateo County Commission.

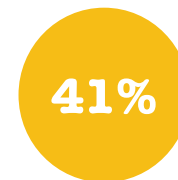
Given that there are limited resources to address the numerous important inputs that impact health, F5SMC is intentionally focusing on three areas that are not adequately supported in the current landscape of healthcare: oral health access and utilization, integrated systems for children with special needs and their families, and enhanced mental health systems.

¹⁷ Center on the Developing Child at Harvard University (2007). A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children. <http://www.developingchild.harvard.edu>

Oral Health Access and Utilization

Tooth decay is the most common chronic condition for children in the United States. Untreated decay can have negative implications for children's development, including problems with eating and speaking, as well as poor self-esteem. Additionally, dental problems are one of the leading causes of school absenteeism, which is associated with lower academic achievement.¹⁸ Preventive dental visits for children save 10 times the cost of more invasive dental treatment and help to avoid the negative physical, socio-emotional, and academic consequences of poor dental health.¹⁹

One-third of California children are low income and subsequently qualify for Denti-Cal. Children on Denti-Cal experience inadequate access to dental care. In 2016, the Little Hoover Commission issued a scathing report detailing the reasons for the poor utilization rates, including dismal reimbursement rates and the lack of providers willing to accept the state insurance provision.²⁰ According to 2017 data from the California Department of Health Care Services, only 41% of eligible children on Medi-Cal ages 1-20 in San Mateo County received an annual dental visit in the year prior. These rates differ significantly from those of children with private insurance.²¹ Denti-Cal reimbursement rates, administration of the Medi-Cal dental provision, and higher no-show rates are cited as significant barriers for dental providers to accept Medi-Cal patients.²²



of eligible children on Medi-Cal ages 1-20 in San Mateo County received an annual dental visit in the year prior

Integrated Systems for Children with Special Needs and Their Families

Early identification and treatment of special needs during the first five years of life is critical because this is the time when a child's brain, body, and behavior are most malleable. Early detection is critical for the 12 to 16 percent of all children in the U.S. who experience developmental or behavioral problems.²³ Although developmental delays pose risks for all children, delays that are prevalent among low-income children are more likely to be missed. Although the national average for all children to receive an autism diagnosis is four years of age, the average age of diagnosis for low-income children varies by race, with white low-income children diagnosed on average at six years of age, and their black and Latinx peers diagnosed at eight and nine years, respectively.²⁴ In California, 70% of children with developmental delays go undetected until kindergarten.²⁴ Undetected developmental problems in young children may cause delays in acquiring speech and language, inability to maintain relationships, and serious impediments to school learning.



of children with developmental delays go undetected until kindergarten

¹⁸ Research Brief. *Chronic Health Conditions and Academic Achievement*, 2017. Retrieved from https://www.cdc.gov/healthyschools/chronic_conditions/pdfs/2017_02_15-CHC-and-Academic-Achievement_Final_508.pdf

¹⁹ *Early Childhood Caries and the Impact of Current U.S. Medicaid Program: An Overview*. March 2012 Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3312229/>

²⁰ *Fixing Denti-Cal*, Report #230, April 2016. Little Hoover Commission Retrieved from <https://lhc.ca.gov/sites/lhc.ca.gov/files/Reports/230/Report230.pdf>

²¹ <http://healthpolicy.ucla.edu>.

²³ Boyle CA, Boulet S, Schieve LA, et al. *Trends in the prevalence of developmental disabilities in U.S. children, 1997-2008*. *Pediatrics* 2011;127:1034-42.

²⁴ Retrieved from <http://helpmegrowca.org/index.php/resources/resources-and-references/>

²⁵ Source for FY 2017: Part C Early Intervention Numbers and Percentages 2016. Retrieved from <https://www2.ed.gov/programs/osepidea/618-data/static-tables/2016-2017/part-c/child-countand-settings/1617-cchildcountandsettings-1.xlsx> Citation Source for Part B Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health, National Survey of Children with Special Health Care Needs (Dec. 2012). downloaded from Kids Data: Lucile Packard Foundation for Children's Health: www.kidsdata.org/topic/65/special-needs-special-education-participation

Screening for developmental delays using a validated tool has been shown to detect credible concerns that are otherwise missed by primary care physicians and other child-serving professionals who rely instead on surveillance methods. Although the American Academy of Pediatrics recommends that pediatricians implement universal screening for their patients three times before a child's third birthday, only 29% of children in California receive timely developmental screenings.²⁵ California ranks 30th among all 50 states for screening of infants and toddlers.²⁵ Early data in San Mateo County mirror the statewide data, indicating that each year 4,000 children under age six are not receiving critical early intervention services for which they may qualify.²⁵

Families and providers need support to understand and navigate the complex array of community-based services and supports available to promote children's optimal health and wellness.²⁶ However, California ranks 46th in the nation on effective care coordination for children with special health care needs, and families in our state are more likely than families in every other state to cut back or stop working due to their child's condition.²⁷

Enhanced Mental Health Systems

Trauma is increasingly recognized as a significant contributing factor to overall health and well-being. Trauma can affect individuals, families, and communities immediately and long term, even over generations. It can have particularly negative developmental impacts on young children.²⁸ When young children are exposed to trauma, they can experience feelings of helplessness, uncertainty about whether there is continued danger, and a general fear that extends beyond the traumatic event.²⁹

Trauma refers to the effects of an event, series of events, and/or ongoing circumstances that are experienced as physically or emotionally harmful. For children, this can include abuse and neglect, as well as living in a household affected by substance abuse, mental illness, domestic violence, or incarceration. These conditions are often also referred to as Adverse Childhood Experiences, or ACEs. ACE scores are highly correlated with future health outcomes and opportunities, including greater risk of nearly every major disease or condition. People with high ACE scores are more likely to die decades before their counterparts with lower ACE scores.³⁰

Given the increase of knowledge regarding the critical role that ACEs play in overall health and well-being, equal attention is also being paid to the importance of child- and family-facing services being mindful and attentive to trauma, a concept that has been coined "trauma-informed." Similarly, the recognition that systems that are intended to serve children and families in supportive ways can often unintentionally exacerbate the trauma of their clients has led to a new body of knowledge focused on promoting "trauma-informed organizations." This work encourages organizations to recognize the importance of trauma and its impacts, plan and implement trauma-informed practices at the organizational level, and adapt for the ongoing and evolving needs of those they serve.

²⁶ Hughes, D. (2015). *In their own words: Improving the care experience of families with children with special health care needs*. Lucile Packard Foundation for Children's Health & University of California, San Francisco. Retrieved from: <http://www.lpfch.org/publication/their-own-wordsimproving-care-experience-families-children-special-health-care-needs>

²⁷ Data source: *2009/10 National Survey of Children with Special Health Care Needs*. Data Resource Center for Child and Adolescent Health. www.childhealthdata.org

²⁸ Center for Collective Wisdom. *Trauma and Resiliency: A Systems Change Approach: Emerging Lessons and Potential Strategies from the Los Angeles County Trauma and Resiliency-Informed Systems Change Initiative*, 2017. <https://www.first5la.org/files/Trauma.pdf>.

²⁹ National Child Traumatic Stress Network, 2013. <http://www.nctsn.org/>

³⁰ "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults," published in the *American Journal of Preventive Medicine* in 1998, Volume 14, pages 245-258

STRATEGIES FOR INVESTMENT

1

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.

2

Integrated 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; and supporting linkages and timely access to care coordination, assessment, and services for children and families requiring additional assistance.

3

Early Mental Health Systems and Infrastructure Enhancements:

Partnerships to support trauma- and resiliency-informed practices and policies in child- and family-serving organizations.

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:

- The number and/or percentage of children ages 0-5 who live in areas of High Community Need, as defined by the Community Collaboration for Children's Success Project.
- 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 or percentage of pediatric health providers who provide access to developmental screening as a part of routine well-child visits

Participant-level Indicators:

These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:

- 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



Focus Area: Resilient Families

Secure, stable, and supportive relationships with caring adults significantly contribute to a child's healthy brain development.³¹ A loving and caring environment within the parent-child relationship is associated with many positive outcomes including higher self-esteem, increased communication, and fewer psychological and behavioral problems.³² Furthermore, lower levels of parenting stress may serve as a protective factor of the social-emotional health of their children. The early childhood field has gained tremendous knowledge in recent years about the ways in which families should be engaged in children's healthy development. Strength-based approaches that authentically affirm different cultures, languages, and family structures are accepted by the field as the best way to partner with families to achieve positive outcomes for children. Research on family engagement has repeatedly demonstrated that the majority of parents want the best for their children but may lack the knowledge and resources to promote development in the critical early years.

Data gathered from First 5 San Mateo County's research and evaluation efforts has identified social isolation, especially during the infant and toddler years, as a common struggle for parents. Between 2009 and 2015, more than one of every four parents participating in F5SMC services reported a lack of social support. This mirrors one of the key findings of the 2013 Silicon Valley Parent Story Project, which found that 37% of low-income families could not count on anyone in their neighborhood for help. Similarly, 24% of high-needs families reported they did not have friends to help them in their role as parents. Mothers' or fathers' groups can help parents network with other parents from similar backgrounds. Effective parent support groups are led by individuals who have similar life experiences and have a deep understanding of the socio-cultural backgrounds of the group participants.

Families in greatest need of support, for example, parents with mental health or substance abuse problems, parents experiencing domestic violence or incarceration, and especially those dealing with more than one serious issue benefit from focused services that are targeted to their particular source of stress. The cumulative effects of toxic stress can have damaging effects on learning, behavior, and health across the lifespan. Supporting families with multiple stressors diminishes the effects of trauma and promotes resilience by providing a more stable foundation for lifelong learning and success.

37%

of low-income families could not count on anyone in their neighborhood for help

24%

of high-needs families reported they did not have friends to help them in their role as parents

³¹ Schorr, L. B., & Marchand, V. (2007). "Pathway for Children Ready for School and Succeeding at Third Grade." Harvard University, Cambridge, MA.

³² Cox, M. Parent-child relationships. In M. Bornstein, L. Davidson, C. Keyes, and K. Moore (Eds.), *Well-being: positive development across the lifespan*. Hillsdale, NJ: Lawrence Erlbaum.

It is critical that parents and caregivers feel able to nurture their child's optimal development, because positive home learning environments contribute significantly to children's school achievement.³³ When parents act as their child's advocate and are involved in their child's education, it is more likely that their child will have increased school attendance and higher academic achievement.³⁴ Effectively partnering with parents in promoting their child's optimal development also results in better lifelong outcomes and reduces costs to society for special education, welfare, criminal justice, and health. By working with parents as equal partners in their child's healthy development, as well as acknowledging parents, schools, and communities as collectively responsible for the success of children, we promote reciprocal relationships that exponentially benefit children.

Authentic family engagement is the shared responsibility of families, providers, and communities to all collaborate in meaningful ways to support children's optimal development and learning. One barrier to family engagement for service providers and early childhood educators is a lack of knowledge and/or skills to effectively develop family engagement strategies. A key ingredient of effective family engagement is developing the capacity of providers through professional development.³⁵ A focus should be placed on building capacity of staff and families in four keys areas: Capabilities (skills and knowledge), Connections (networks), Cognition (beliefs, values), and Confidence (self-efficacy). Service sector leaders (i.e. executive directors, supervisors, and decision makers) must have a fundamental understanding of early brain development and the parent-child relationship, as well as an understanding of the importance of family engagement for child development. This is critical to guard against decision makers implementing practices/approaches/policies that unwittingly burden families and/or the family-serving system. Having a fundamental understanding of child development is key to positively impacting children. Without such knowledge and information, service providers will struggle to reach children in a positive light.³⁶

STRATEGIES FOR INVESTMENT

1

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.

³³ Duncan, G.J. and Magnuson, K. (2003). *Promoting health development of young children*. In Sawhill, I. [ed.], *One Percent for the Kids: New Policies, Brighter Futures for America's Children*. Washington, DC: Brookings Institution Press.

³⁴ Caspe, M., Traub, F., and Little, P. (2002). *Beyond the Head Count: Evaluating Family Involvement in Out-of-School Time*. Harvard Family Research Project. Cambridge, MA. <http://www.gse.harvard.edu/hfrp/projects/afterschool/resources/issuebrief4.html>

³⁵ Mapp and Kuttner. (2013) *Partners in Education: A Dual Capacity-Building Framework for Family-School Partnerships*. Retrieved from <https://www2.ed.gov/documents/family-community/partners-education.pdf>

³⁶ National Association for the Education of Young Children (NAEYC)

2

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.

3

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 CAFEs - Community and Family Engagement) to create a culture of awareness, learning and 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.

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:

- The percentage of children ages 0-5 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, sing, and/or count with their children ages 0-5
- Increase in percentage of parents who report feeling connected to a support network

Participant-level Indicators:

These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services:

- 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

Accountability and Evaluation

First 5 San Mateo County Commissioners are responsible for ensuring that First 5 funds are used as voters intended when the California Children and Families First Act (Proposition 10) was passed in 1998. Commissioners work with First 5 staff to create and implement internal policies and procedures in order to help guide decision-making that is both consistent with the law and that respects and honors families with young children. In addition, Commissioners serve on committees such as: Finance & Administration; Program, Operations, & Planning; and Evaluation. Committee work facilitates in-depth discussions on internal and external activities and responsibilities. Reports from committee meetings are a part of each Commission meeting.

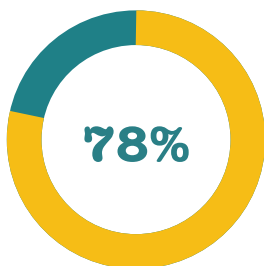
Organizations that receive First 5 San Mateo County funds report financial, program, and evaluation data in order to ensure contractual compliance. The fiscal reporting structure of the First 5 San Mateo County Commission was developed in accordance with the First 5 Financial Management Guide. This guide is a result of a cooperative project of the First 5 Association, First 5 California, and the Government Finance Officers Association of the United States and Canada (GFOA). Each year, F5SMC reports financial and program data to First 5 California for inclusion in the statewide Annual Report. In addition, F5SMC completes a comprehensive external audit annually. Together, these measures serve to ensure the public that Proposition 10 funds are being used as they were intended.

Evaluation

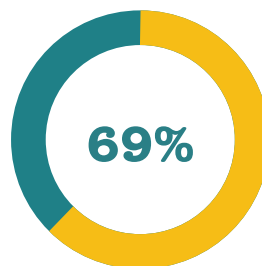
Starting in 2009, First 5 San Mateo County used a comprehensive evaluation approach to track its impact and identify effective strategies for achieving its desired outcomes using common indicators and data collection protocols across funded partners. The comprehensive evaluation has provided the Commission with a more complete picture of the families and providers we serve, and the benefits they gain from F5SMC-funded programs. For example, among families who received home visiting or care coordination services:



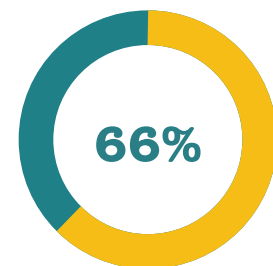
80% lived in households with annual incomes of less than \$30,000



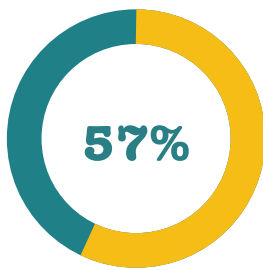
78%
were Latinx, and
70% spoke primarily
Spanish



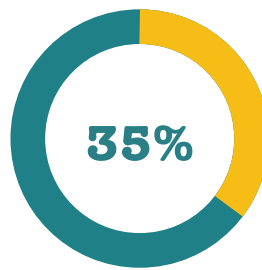
69%
of parents had a high
school education or less



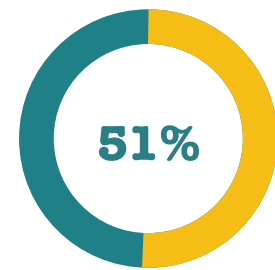
66%
of parents read to their
children at least 3 times
per week



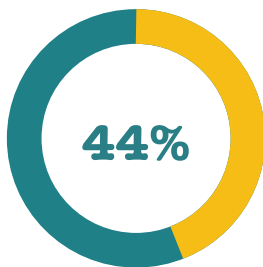
of children were
breastfed for at least
six months



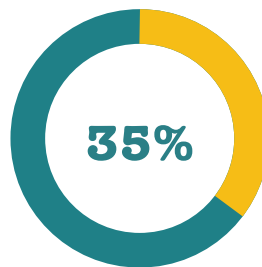
of the children had
developmental concerns
identified at screening,
and 12% had been
diagnosed with a
developmental disability



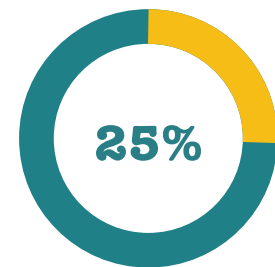
of parents worried
about inadequate
housing



of children ages 1-5 had
never been to the dentist



of children had two or
more hours of screen
time per day



of parents needed help
with their sadness or
depression

While F5SMC is continuing common data collection for clients who participate in intensive services through our funded programs, different types of data collection may be required as we shift towards partnership, policy, and systems-level interventions. Collective impact models of community change require common data collection and data sharing procedures. Such efforts require that all partners build deeper connections to align, share, and use the data we collect on behalf of the children and families we serve. Regional, statewide, or national efforts typically have their own data collection and evaluation requirements, which we must map onto our local efforts. Work conducted through cross-agency, cross-sector collaborations also 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.

Status of Young Children Countywide

In addition to evaluating the impact of its funded programs, F5SMC has an interest in tracking the overall status of the young children and families of San Mateo County. Partnering with local and regional funders to collect and analyze information about the status of young children allows all those who care about the wellbeing of our youngest residents to monitor trends, identify emerging issues, and inform program and policy development. To further these ends, the Commission will continue to partner with other funders in support of countywide research projects such as school readiness assessments, parent surveys, or service participation analyses.

Conclusion

It is with tremendous gratitude for our fellow investors, leaders, and partners that F5SMC celebrates its contribution to the increased well-being of children ages birth through five and their parents in our County. It is also satisfying that as Proposition 10's funding has decreased, the impact of First 5 continues to be significant.

F5SMC's pivot from primarily serving as a direct-service grant maker to a strategic investor, leader, and partner has set up its enduring relevance and the championing of young children for years to come. Now at its 20-year anniversary as an organization, the maturation of F5SMC, its leadership, and community partners facilitated the ability to rethink the strategies used to make the most impact. Rather than perceiving the funding decline as a fiscal cliff from which one should recoil, it was embraced as an opportunity to seek out new opportunities for leverage and significance. This creative and opportunity-based approach has yielded profound impact for young children and their families, and reinvigorated F5SMC as a community investor, partner, and leader.



First 5 San Mateo County Commissioners

Commissioners Who Adopted the Strategic Plan

Pam Frisella, Public Member, Commission Chair
 Louise Rogers, Chief, San Mateo County Health, Commission Vice-Chair
 Anne E. Campbell, County Superintendent of Schools
 David J. Canepa, Board of Supervisors
 Nicole Pollack, Director, San Mateo County Human Services Agency
 Michael Garb, Public Member
 Rosanne Foust, Public Member
 Neel Patel, M.D., Public Member
 Sandra Phillips-Sved, Public Member

2020 Current Commissioners

Louise Rogers, Chief, San Mateo County Health, Commission Chair
 Sandra Phillips-Sved, Public Member, Commission Vice-Chair
 Nancy Magee, County Superintendent of Schools
 David J. Canepa, Board of Supervisors
 Ken Cole, Director, San Mateo County Human Services Agency
 Alexis Becerra, Public Member
 Rosanne Foust, Public Member
 Pam Frisella, Public Member
 Neel Patel, M.D., Public Member

First 5 San Mateo County Staff

Kitty Lopez, Executive Director
 Michelle Blakely, MA, Program and Planning Director
 Khanh Chau, MBA, CPA, Fiscal Management Analyst
 Myra Cruz, Administrative Secretary III
 Jenifer Clark, Research and Evaluation Program Specialist
 Karen Pisani, Family Support Program Specialist
 Emily Roberts, MSW, MPH, Child Health and Development Program Specialist
 Mai Le, MPH, Program Associate III
 Mey Winata, Fiscal Office Specialist

Acknowledgements

The Commission would like to thank and acknowledge:

- Community members and leaders who took part in the strategic planning process. The time, expertise, and insight provided by our community partners were invaluable and played a significant role in shaping the focus and direction of the 2020-2025 Strategic Plan
- First 5 San Mateo County strategic planning ad-hoc members which includes the following Commissioners: Pam Frisella, Louise Rogers, Nicole Pollack, and Michael Garb
- First 5 San Mateo County staff for their thoughtful and tireless work, and dedication to San Mateo County's youngest children and families
- VIVA Strategy + Communications for their wise counsel and facilitation of the strategic planning.

**FIRST 5 SAN MATEO COUNTY (F5SMC)
FIRST 5 STAFF TEAM REPORT
APRIL 2023**

STRATEGIC INVESTMENT FOCUS AREAS – UPDATE

QUALITY CARE AND EDUCATION

San Mateo County Family Childcare Organization (SMCFCO) Housing Rights Talk

On April 19th, the SMC Family Child Care Organization’s monthly meeting featured a talk and focus on housing rights for family childcare provides. The Child Care Law Center provided information and discussion. The meeting was provided in Cantonese, English and Spanish. For more information on the SMCFCO, contact Liz Scully at fccasmc@yahoo.com or visit www.smcfamilychildcare.org

HEALTHY CHILDREN

Children and Youth Behavioral Health Initiative Grant Submission

First 5 SMC recently submitted a grant application to the CA Department of Health Care Services for the Children and Youth Behavioral Health Initiative, Round 2: Trauma-Informed Programs and Practices. The grant, which was submitted in partnership with SMC Health Behavioral Health and Recovery Services, would help to support a vision for a SMC Early Childhood Mental Health Network. The focus of this specific round of funding would be to support the launch of this network and to grow and train a network of local clinicians in the Child Parent Psychotherapy model with the support of the Child Trauma Research Project at UCSF. If funded, the grant would allow for training approximately 50 clinicians in the model over the next two years.

Help Me Grow Physician Testimonials

Help Me Grow recently released two parent-focused video testimonials featuring two local Help Me Grow Physician Champions, Dr. Neel Patel and Dr. Aaron Nayfack. Both videos aim to educate parents about the importance of developmental screening and to encourage parents to request a screening from their child’s healthcare provider or via Help Me Grow. The videos can be found on the Help Me Grow website here:

- [English Site, Families/Screenings page](#)
- [Spanish Site, Families/Screenings page](#)

These videos will also be available with Chinese and Portuguese subtitles.

RESILIENT FAMILIES

Child Abuse Prevention Council Updates

The Child Abuse Prevention Council (CAPC) this week welcomed Board of Supervisor Noelia Corzo as Board representative of CAPC and introduced members of the San Mateo County Cross Sector Team who are participating in HSA’s comprehensive prevention planning efforts for the Families First Prevention Services Act (FFPSA). The CAPC plays an important role as a strategic thought partner in the implementation and integration of effective services and supports throughout our community. In June 2023, the CAPC will be facilitated solely by HSA staff. Michelle Blakely is a member of the Cross-Sector Team.

POLICY & ADVOCACY UPDATES

SVCAN/SVCF Quarterly Meeting: Dr. Anna Powell, Center for the Study of Child Care Employment, UC Berkely provided on update on the latest research on the state of CA early care workforce and shared their newest resource - Solutions to the Early Educator Workforce Crisis: [How Legislators Can Make a Difference for Kids, Families, and Educators](#)

ACCOUNTABILITY, RESEARCH AND EVALUATION

Bay Area Regional Evaluators Quarterly Meeting

On Friday, April 7th Research & Evaluation Specialist Jenifer Clark attended the virtual Bay Area Regional Evaluators (BAREs) quarterly meeting. The group is reconvening after taking a pause during the pandemic disruption. Evaluation staff from multiple Bay Area First 5 County Commissions attended the meeting. The group shared updates on local evaluation activities and discussed the possibility of collaborating on regional efforts such as advocating for cross-sector data sharing and linkage projects, and working with Persimmony to develop additional functionality that may benefit multiple County Commissions.

FIRST 5 CALIFORNIA & FIRST 5 ASSOCIATION UPDATES

First 5 Association of California Advocacy Day

On April 19, 2023, Kitty Lopez and Michelle Blakely attended the First 5 Association Advocacy Day virtually. They met with legislators and staff from Assembly members Marc Berman and Diane Papan and Senators Scott Weiner and Josh Becker and among key issues that discussed were ECE Workforce, health care, infant and early childhood mental health, and home visiting programs. Kitty Lopez also joined the First 5 Association, in her role as the State Association's Board Chair, in several meetings with staff within Governor Gavin Newsom's Administration.

COMMUNITY AND STATEWIDE EVENTS & UPDATES

2023 Progress Seminar

On April 21 - 23, 2023, Kitty Lopez will be attending the Chamber of San Mateo County Progress Seminar that will be held in Santa Rosa. This year's theme is *Elevating San Mateo County – Lifting All*. The Co- Chairs of this event are San Mateo County Executive Officer Mike Callagy, President & Chief Executive Officer of SAMCEDA (and Chair of the First 5 Commission) Rosanne Foust, San Mateo Labor Council Executive Secretary-Treasurer Julie Lind, & San Mateo County Superintendent of Schools/First 5 Commissioner, Nancy Magee. The Seminar will be attended by local community leaders, city officials, policy makers, and legislators where local key issues will be presented and discussed.

Children's Day, Book Day!

On April 29, 2023, the San Bruno Park School District is hosting Children's Day, Book Day at the San Bruno City Park from 12 pm to 4:30 pm. There will book give away for children, face painting, arts and crafts, and many more fun filled activities. (See Attachment 10.1 for more details)

Trauma Informed Training for Providers (Spanish)

On May 12, 2023, Puente de la Costa Sur will be providing a trauma Informed training for providers working with children 0 – 5 years old in San Mateo County. The training is aimed to support parents/caregivers whose first language is Spanish so that they may authentically engage with the material. The training will be led by Program Director, Arlae Alston, and Education Director, Lizeth Hernandez. Space is limited. (See Attachment 10.2, for more information and to register).

COMMUNICATIONS

Social Media and Analytics Report (See Attachment 10.3)

Children's Day, Book Day

April 29, 2023

San Bruno City Park

12pm to 4:30pm

Hosted by

San Bruno Park School District

* Book Giveaway for Children * Piñatas *

* Face Painting * Arts and Crafts *

* Cultural Entertainment *

* Fire and police vehicles for children to explore *

Parking at El Crystal School - 201 Balboa Way

THANK YOU TO OUR SPONSORS!



**Sammut Family
Foundation**



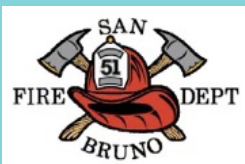
MARSHALL, INC.
REAL ESTATE & PROPERTY MANAGEMENT



**SAN BRUNO
ROTARY CLUB**



FIRST 5
SAN MATEO COUNTY



Your Party Rental Co.

Project Read



Learning for Life



**SAN BRUNO
PUBLIC LIBRARY**

PUENTE



TRAUMA INFORMED TRAINING

FOR PROVIDERS WORKING WITH CHILDREN 0-5 Y.O. SAN MATEO COUNTY

MAY 12, 2023

9AM -12:30PM



VIA ZOOM

TRAINING IN SPANISH

This training is aimed to support parents/caregivers whose first language is Spanish so that they may authentically engage with the material.

As parents/caregivers it's important to support children as they are, and this includes their trauma. By learning about trauma, how it originates, and the effects it has, we are better positioned to support children so they may thrive.

TO REGISTER:

VISIT:
**[HTTPS://TINYURL.COM/TRAU
MATRAINING2023](https://tinyurl.com/traumatraining2023)**

**FOR REGISTRATION QUESTIONS
CONTACT:**

**MYRA CRUZ
ECRUZ@SMCGOV.ORG**

PRESENTERS



ARLAE ALSTON

Program Director
Puente de la Costa Sur
Aalston@mypuente.org



LIZETH HERNANDEZ

Education Director
Puente de la Costa Sur
Lhernandez@mypuente.org

*for curriculum questions,
contact presenters*





ENTRENAMIENTO SOBRE COMO TRANSFORMAR EL TRAUMA

PARA PROVEEDORES QUE TRABAJAN
CON NIÑOS DE 0 A 5 AÑOS.
CONDADO DE SAN MATEO

ENTRENAMIENTO EN ESPAÑOL

12 MAYO, 2023

9AM -12:30PM



VIA ZOOM

Esta capacitación tiene como objetivo apoyar a los padres/cuidadores cuyo primer idioma es el español para que puedan interactuar auténticamente con el material.

Como padres/cuidadores, es importante apoyar a los niños tal como son, y esto incluye su trauma. Al aprender sobre el trauma, cómo se origina y los efectos que tiene, estamos mejor posicionados para apoyar a los niños para que puedan prosperar.

REGISTRO:

VISITA:
[HTTPS://TINYURL.COM/TRA
UMATRaining2023](https://tinyurl.com/traumatraining2023)

PARA PREGUNTAS DE
REGISTRO
CONTACTE A:

MYRA CRUZ
ECRUZ@SMCGOV.ORG



**ESPACIO
LIMITADO**

PRESENTADORAS



ARLAE ALSTON

Directora de Programas
Puente de la Costa Sur
Aalston@mypuente.org



LIZETH HERNANDEZ

Directora de Educacion
Puente de la Costa Sur
Lhernandez@mypuente.org

*para preguntas sobre el plan de estudios,
comuníquese con las presentadoras*



Digital Communications Analytics Report

March 1, 2023 - March 31, 2023

Strong content in the month of March focused on the Child Care Needs Assessment results. Social media, web content, and email all shared key findings and focused on how they will impact families, children, and the general public. Web content was relatively consistent. The large spike coincides with the first two days of one of our digital ads. This ad drove users to the home page of the website and encouraged new followers on Facebook and Instagram. It could be that some bot activity with new ads drove the spike on the first days, but delivery of results is often maximized early in the ad cycle as well. With the shift of the platforms to prioritize video, it's important to remember that video has the capacity to get a lot more reach, just because of the way it is presented on the platform. Because we did not have as much video content this month, the decrease in reach month-over-month makes sense, and these numbers are extremely strong for static content. This is clear in post engagement and the high number of new followers.

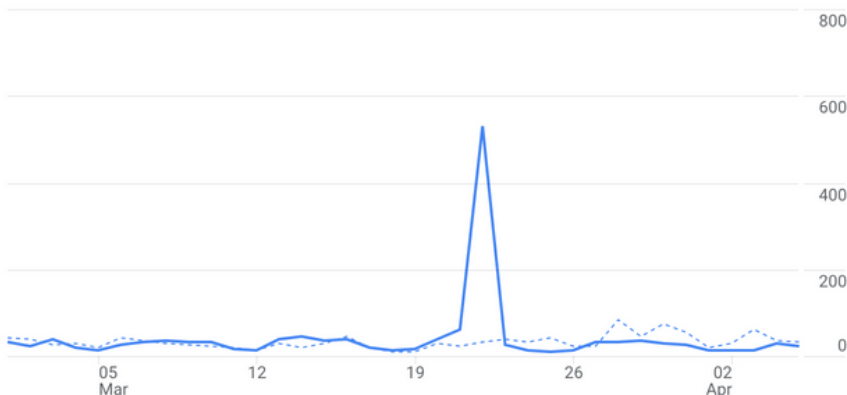
Twitter saw another month of a strong increase in profile visits, which likely shows that people are excited about the content they're seeing, and are looking to learn more! The engagement rate, the number of retweets, and the number of mentions all increased on Twitter. This strengthens our reach among leadership, policymakers, and other advocates, which is exciting leading up to Advocacy Day in April. LinkedIn saw a strong consistent performance in search appearances, profile visits, and new followers.

Emails continued to perform highly. Open rate and click rate both increased significantly compared to the previous 90 days and to the industry average. Currently, this audience is primarily other professionals in the early childhood space, and this audience is very engaged.

Website

Who is using your website?

Users	Sessions	Bounce Rate	Session Duration
1.3K	1.5K	78.87%	0m 50s
↑23.9%	↑23.3%	↑5.6%	↓43.4%



What pages do your users visit?

Page	Pageviews
/	592
/staff/	101
/about/	76
/commission/	75
/resources/	58
/resource/car-seat-checks	56
/who-we-are/	54
/es/los-tres-tipos-de-...res:arlo/	51
/commissioners/	47
/our-partners/	41

Meta: Facebook & Instagram

Facebook Page reach ⓘ

Instagram reach ⓘ

Paid reach ⓘ

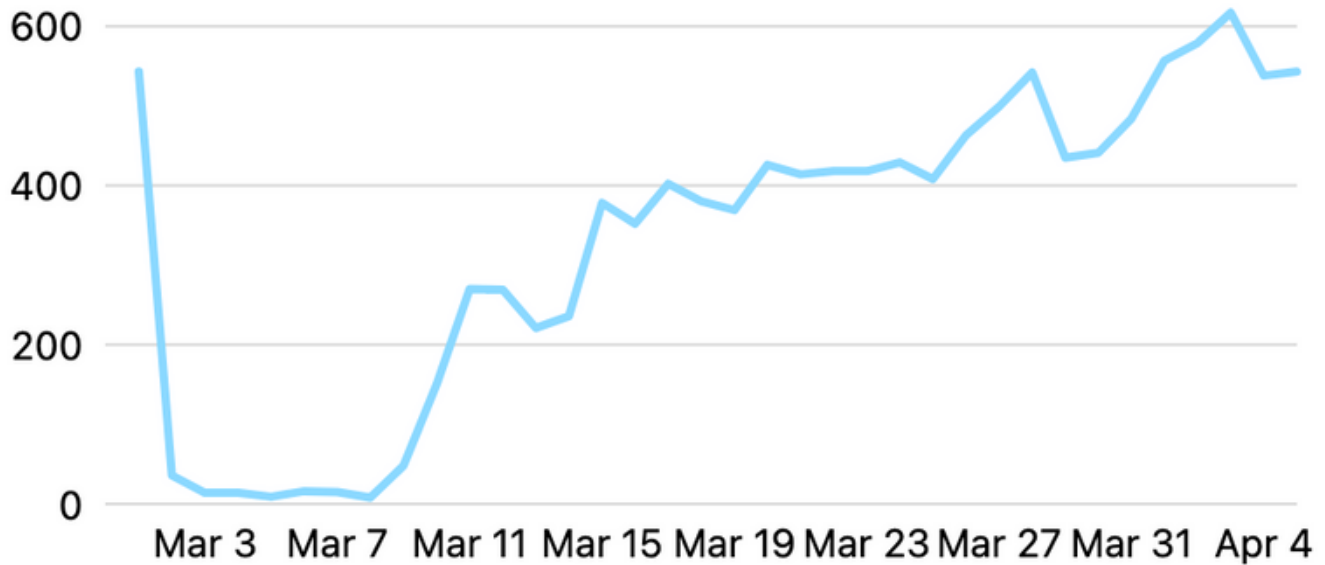
Paid impressions ⓘ

8,171 ↓ 36.5%







6,529 ↑ 42.6%

10,168 ↓ 16%

40,685 ↑ 91%



Top Content by Reach

Title	Reach ⓘ ↓	Likes and reactions ⓘ ↑↓
 New Engagement Ad First 5 San Mateo	3.6K Accounts Center acc...	32 Likes and reactions
 Every child needs a champion. That's w... first5sanmateo	181 Accounts Center acc...	14 Likes
 73% When we say that child care is an essential first5sanmateo	146 Accounts Center acc...	11 Likes
 In a letter to Gavin Newsom, First 5 San... first5sanmateo	103 Accounts Center acc...	5 Likes
 29% We sought out to understand what kin first5sanmateo	79 Accounts Center acc...	11 Likes
 "Despite providers' critical role in nurt first5sanmateo	70 Accounts Center acc...	6 Likes

Audience

Facebook Page likes

1,904

Facebook Page new likes

41 ↑ 720%

Instagram followers ↓

1,391

New Instagram followers

30 ↑ 11.1%

Twitter

Attachment 10.3

Tweet impressions
1,140 ↑141.5%



Profile visits
125 ↑64.5%



Mentions
2 ↓60.0%



Followers
670 ↓-3



Engagement rate
3.5%



Link clicks
7



On average, you earned 0 link clicks per day

Retweets without comments

12



February Mentions



Heidi Emberling @HeidiEmberling · Mar 10

#ThrivingFamilies Symposium Panel discussion about supporting childcare workforce: including Family Child Care Home providers and Friend, Family, Neighbor caregivers. #19years childcareprofessionals @SVCF, @SJPL @FIRST5SCC @first5sanmateo



February Retweets



Too Small to Fail Retweeted your Tweet

What is the most important thing a parent can do for brain development? This Harvard researcher explains that, along with how to build your child's brain. Keep tuning in for highlights, or catch the full master class here youtube.com/watch?v=fpiYNk... pic.twitter.com/9K863cMcmG

Top Tweets



First 5 San Mateo Co @first5sanmateo · Mar 28
Tomorrow, March 29th, San Mateo County Health is hosting the LAST county-sponsored free vaccination events! Visit East Palo Alto at the Los Robles-Ronald McNair Academy from 5:30 PM – 8:00 PM. Don't miss this opportunity! Stay safe and vaccinated against COVID-19. pic.twitter.com/7SudHPMRul

131

3

2.3%



First 5 San Mateo Co @first5sanmateo · Mar 29
SMC needs a \$207 million investment annually to bring all childcare providers & professionals compensation to a living wage. We can't underpay workforces by over \$200 million and expect that our children will receive high-quality education. #DatatoAction first5sanmateo.org/how-to-support...

129

6

4.7%



First 5 San Mateo Co @first5sanmateo · Mar 15
We sought out to understand what kind of child care our community needs and how much. What we found was that 29% of childcare needs went unmet. Get the whole picture with the Child Care Needs Assessment. #DatatoAction #ChildCareCrisis first5sanmateo.org/how-to-support...

121

11

9.1%

LinkedIn

Visitor highlights

46

Page views

24

Unique visitors

171

Total followers

6

New followers

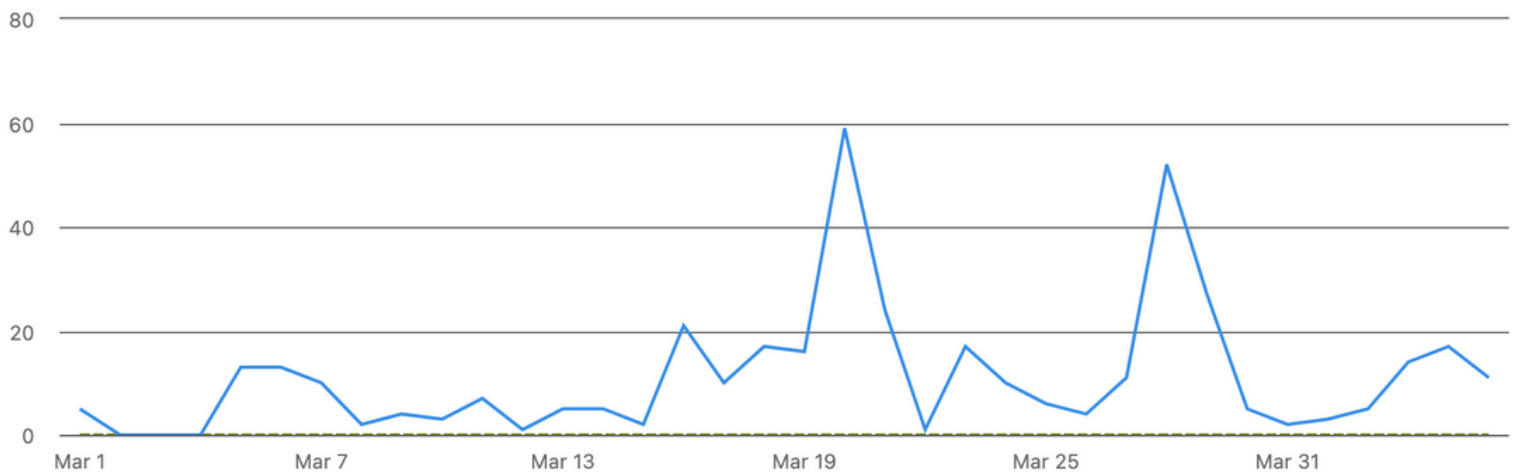
147

Search appearances
Last 7 days

373

Post impressions

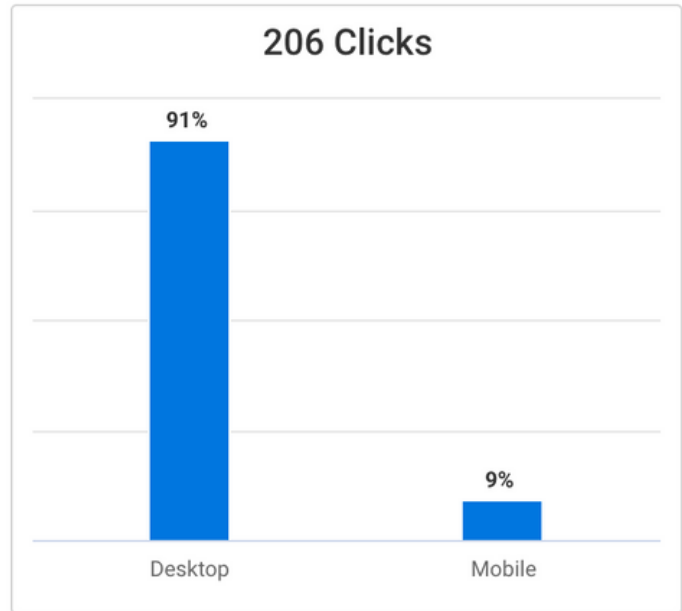
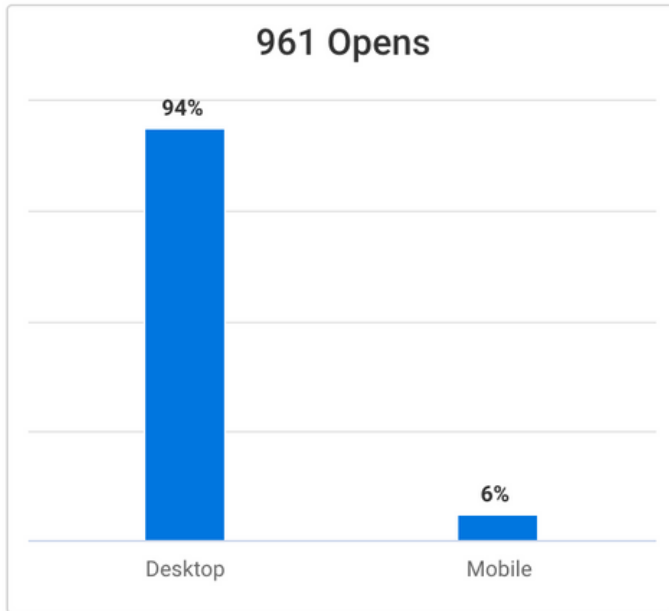
Impressions



LinkedIn Content

Post title	Post type	Audience	Impressions	Views	Clicks	CTR	Reactions	Comments	Reposts
<p>65% of families say that affordable childcare is difficult to find. It is not fair...</p> <p>Posted by Noa Elliott (she/her)</p> <p>3/20/2023</p> <p>Boost</p>	Image	All followers	67	-	8	11.94%	1	0	0
<p>Join this webinar to understand how to approach to ACE screening in a way tha...</p> <p>Posted by Noa Elliott (she/her)</p> <p>3/17/2023</p> <p>Boost</p>	Image	All followers	22	-	1	4.55%	0	0	0
<p>In a letter to Gavin Newsom, First 5 San Mateo's Executive Director, Kitty Lopez...</p> <p>Posted by Noa Elliott (she/her)</p> <p>3/17/2023</p> <p>Boost</p>	Video	All followers	45	32	5	11.11%	1	0	0

Email



Your open rate:	53%
vs. previous 90 days	+16%
vs. industry average	+13%

Your click rate:	11%
vs. previous 90 days	+4%
vs. industry average	+9%

Time Sent ↓	Campaign Name	Sends	Opens	Clicks
Tue, Mar 28, 2023, 10:03 AM	March Newsletter	447	175 44%	13 3%
Thu, Mar 23, 2023, 2:45 PM	First 5 SMC Commission Meeting Notification 3/27/23	380	172 51%	53 16%
Tue, Feb 28, 2023, 12:04 PM	Thriving Families Symposium: The Next Decade	447	144 36%	19 5%
Thu, Feb 23, 2023, 12:43 PM	First 5 SMC Commission Meeting Notification 2/27/23	381	231 69%	61 18%
Thu, Jan 19, 2023, 2:12 PM	First 5 SMC Commission Meeting Notification 1/23/23	378	239 71%	60 18%

DATE: April 24, 2023
TO: First 5 San Mateo County (F5SMC) Commission
FROM: Kitty Lopez, Executive Director
RE: Committee Updates

Program, Operations and Planning (POP) Committee Meeting – April 3, 2023

- Commissioners Present: Ken Cole (Chair), Nancy Magee, Nkia Richardson
- Public Member: Harvey Kaplan, Liz Scully
- Staff: Kitty Lopez, Michelle Blakely, Myra Cruz

1. Strategic Plan Implementation Plan (SPIP) FY 23 – 25 Recommendations Update

Michelle Blakely, F5SMC's Deputy Director, provided an update on the 2023 – 2025 Strategic Plan Implementation Plan recommendations process. She reminded the Committee that many of our funded grants will sunset on June 30, 2023. Many existing grantee contracts will be presented to the Commission for approval in April, May, and June Commission meetings for the last 2 years of the SPIP.

The staff is currently working on scopes of work and budgets, and leveraging funds for some strategies and services. One key challenge is better understanding the continuum of services for children & families and providers that support early mental health. Further, a landscape study of mental health is needed to explore the needs and gaps and how services to support families are occurring in the community. Discussion ensued.

Kitty Lopez, F5SMC's Executive Director added that after the last 2 years of SPIP, First 5 SMC have to do another Strategic Plan which usually is a 6 – 9 month process because we need to get input from the larger community and review the current landscape.

2. Program Updates

- **Child Care Partnership Strategic Plan: Focused Priority**
 The Child Care Partnership Council, which F5SMC is a voting member will be reviewing and researching methods to find additional funding streams to support early learning, child care and etc in SMC. This information will be for public education, collaboration, and advocacy.
- **Early Childhood Education (ECE) Career Navigation Pathways Pilot: Board of Supervisors Update**
 The Board of Supervisors approved the 2 year ECE Career Navigation Pathways Pilot intending to increase the staff and licensed childcare spaces for children 0 to 5. The position is to recruit and promote early care and education providers. The challenge is that wages for the workforce are still low in SMC and generally in the sector.

The funding sources of this pilot are from Measure K District Discretionary Fund: \$100,000, SMC Measure K Reserves: \$100,000, First 5 SMC: \$50,000, Silicon Valley Community Foundation: \$50,000 and SMC Office of Education: \$288,470.

Public Member, Liz Scully, shared her experience from the family child care center provider perspective.

- **Children Youth and Behavioral Health Initiative RFP Planning**

We are working with the Behavioral Health team and director at UCSF Parent-Infant Center for a joint proposal to recruit staff clinicians to participate in a 18-month child psychotherapy practice accreditation to support early mental health for children 0-5. We hope to find partners through this grant to grow a network and the project will provide agency incentives for participation in the accreditation training.

Meeting adjourned at 4:55 pm

The next meeting of POP Committee is scheduled on June 5, 2023.