

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

DATE: Monday, June 22, 2026

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/91317809806>

Phone: +1 669 900 6833, Webinar ID: 913 1780 9806

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 San Mateo County Office of Education located at 101 Twin Dolphin Drive, 1st Floor Conference Room, 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, Candice Saadian at csaadian@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 June 22, 2026, 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: Shared by Commissioner Marco Chavez	4:10 PM
Action Items		
6	Presentation and Approval of F5SMC Long Term Financial Plan (LTFP) from FY 2025 – 2030 (FY 25/26 Update) Shared by Kitty Lopez, Executive Director, First 5 San Mateo County <i>(See Attachment 6)</i>	4:15 PM
7	Approval of Amendment to the Contract Agreement with Adage Consultancy Group for TRISI- Facilitation of County Leadership Group and Resource Hub Design to increase the total amount of the agreement by \$99,500.00 for a new total obligation not to exceed \$149,500.00 and to extend the term from August 1, 2025 through June 30, 2028 Shared by Emily Roberts, Strategic Initiatives Project Manager, First 5 San Mateo County <i>(See Attachment 7)</i>	4:35 PM
Discussion Item		
8	Annual Review of the First 5 San Mateo County Strategic Plan: Conduct a public hearing to receive a staff presentation and public comment regarding the annual review of the Commission’s Strategic Plan, including progress toward strategic goals, implementation priorities, outcomes, and potential amendments or direction for Fiscal Year 2026–27. Shared by Kitty Lopez, Executive Director, First 5 San Mateo County <i>(See Attachment 8)</i> 1. Open Public Hearing 2. Close Public Hearing 3. Review, Accept and Approve Commission’s Strategic Plan for Fiscal Years 2026-2027	4:45 PM
Informational Items		
9	Report of the First 5 San Mateo County Staff Team Shared by Kitty Lopez, Executive Director, First 5 San Mateo County <i>(See Attachment 9)</i>	5:05 PM
10	Committee Updates <i>(See Attachment 10)</i>	5:35 PM
11	Adjournment	6:00 PM

Public Participation: The June 22, 2026, First 5 San Mateo County Commission meeting may be accessed through Zoom link at the top of this agenda. The June 22, 2026, 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 located at 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 Thursday, June 18, 2026, 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 Thursday, June 18, 2026, 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 Thursday, June 18, 2026, 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 read aloud 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 June 22, 2026 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 application 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 when 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

June 22, 2026

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 May 18, 2026 Commission Meeting Minutes
(See Attachment 3.1)

First 5 San Mateo County (F5SMC)
COMMISSION MEETING MINUTES
May 18, 2026

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: Marco Chavez, Claire Cunningham,
Colleen Chawla, Nkia Richardson, Jackie Speier,
Hanish Rathod

Adele Ryono (YC)

Absent: Carla Boragno, Sylvia Espinoza, Naveen Mahmood,
Rikhav Shah (YC)

Staff: Kitty Lopez, Michelle Blakely, Khanh Chau, Emily Roberts,
Mai Le, Jenifer Clark, Myra Cruz

County Attorney: Candice Saadian

Commission Chair Cunningham called the meeting order at 4:00 PM; roll call was taken. The meeting was held in-person for all Commissioners and in a hybrid format where the public had the option to attend the meeting in person or virtually.

2. Public Comments:

- Lizeth Hernandez of Puente de la Costa Sur thanked First 5 San Mateo County Commission for sponsoring the Dia de Los Ninos Festival held on April 24, 2026. The event had 332 attendees and 14% of the attendees were zero to 5 ages and 35% were zero to 18 years old.

3. Action to Set Agenda for May 18, 2026, Meeting and Approve Consent Agenda Items:

Roll Call Vote:

MOTION: SPEIER / SECOND: RICHARDSON

AYES: CHAVEZ, CUNNINGHAM, CHAWLA, RICHARDSON, SPEIER, RATHOD
RYONO (YC)

NOES: NONE
ABSTAIN: NONE

Motion approved.

Public Comments: None

4. Commission Announcements:

- Commissioner Cunningham congratulated Commissioner Rathod for becoming a new parent and presented him with F5SMC's Kit for New Parents. Commissioner Rathod expressed appreciation for the thoughtful recognition and thanked the Commission for their support.

Public Comments: None

5. Storytelling: First 5 Work/Impact:: Intergenerational Story Time Project

Youth Commissioner Adele Ryono shared the background and approach of the project. Two events held at the Half Moon Bay Library and North Fair Oaks Library. Over 80 children, parents/caregivers and older adults attended. There were small group reading, build-a-house challenge, lantern making, coloring, snacks and book raffle. Storytime Connections created a lively sense of energy and community by bringing parents, older adults, and children together. Through arts and crafts, participants build and create side by side, while conversation starters encourage meaningful interactions and shared experiences across generations. The events foster connection, creativity, and a strong sense of belonging. Ryono thanked the Commission for their support.

Commission made comments such as suggesting a potential partnership opportunity next year with the San Mateo Health's Aging and Disability Division as they are focusing on social connection.

The PowerPoint Presentation can be found on the F5SMC's website, [May 18, 2026 Commission Meeting Presentations.](#)

6. Presentation: Play and Learn

Emily Roberts, F5SMC's Strategic Initiative Project Manager, shared a brief background and introduced the presenters, Martha Carcamo Family & Healthcare Outreach Manager, Pahola Villalta Suarez Play & Learn Coordinator, and Carol Elliott, Director, Children and Family Programs Administration from AbilityPath. The presenters highlighted the following:

- Staffed by Help Me Grow San Mateo County, the Play & Learn program, a library-based, weekly, one-hour, drop-in developmental playgroup offered at four sites in San Mateo County (San Bruno Library, Daly City Serramonte Library, North Fair Oaks Library and East Palo Alto Library).
- Play and Learn is designed to support child development, strengthen parenting knowledge and caregiver-child relationships, increase social connections, promote developmental awareness, and connect families with resources through Help Me Grow staff presence.
- Timeline, program's structure, learning circle, example of an activity, and community partnerships.
- FY26 Q3 Play & Learn survey data conducted at 3 sites show high satisfaction from participants
- Attendance data and demographics.
- Family feedback on what family enjoy most about Play and Learn.

Commission comments and questions such as:

How libraries were selected and whether the program could expand. The presenter said sites were chosen by reviewing library offerings, focusing outreach on libraries with fewer bilingual Storytimes and family activities, while also ensuring representation across North, Central, and South County. The presenter said expansion is of strong interest, but the program is currently prioritizing development of its parent leadership component before scaling further. They added that the program is open to partnerships, sharing curriculum, and replication, noting that a Pacifica partner has already implemented a shorter version.

Commissioner Speir said she was very impressed and recommended broader expansion, including adding STEM materials and offering services on the Coastside. She also raised questions about relatively low participation among Caucasian families and suggested exploring the reasons for that gap. In addition, she proposed partnering with child care providers, PTAs, and other community groups to increase awareness and support, noting that child care providers are often well positioned to identify developmental concerns early.

Public comments: none

The PowerPoint Presentation can be found on the F5SMC's website, [May 18, 2026 Commission Meeting Presentations.](#)

7. **Presentation: Proposition 10 Statute and Commission Responsibilities**

Kitty Lopez, F5SMC's Executive Director presented the statutory origin of Proposition 10, tobacco-tax funding for early childhood programs, statewide and county fund distribution,

strategic initiative areas, the statutory role of the First 5 Network, county commission responsibilities, and governance requirements including transparency, accountability, strategic planning, and compliance with Proposition 10 and the Brown Act. Lopez also highlighted the following key points:

- Proposition 10 was approved by California voters in November 1998.
- Tobacco tax revenue supports early childhood development programs.
- Funding distribution is 80% to county commissions and 20% to the state commission.
- Strategic priorities include health and development, early education, family resilience, and systems improvement.
- County commissions serve as local implementers, advocates, and contributors to broader First 5 strategy.
- Statutory mandates include development and adoption of strategic plan, conduct annual review and at least one public hearing of the review before adopting revisions and submit the adopted strategic plan and any revisions to the State commissions
- Governance obligations include strategic planning, accountability, transparency, integrated service delivery, and non-supplantation.
- Core financial responsibilities of Executive Directors.

Public Comments: None

The PowerPoint Presentation can be found on the F5SMC's website, [May 18, 2026 Commission Meeting Presentations](#).

8. Presentation: Approval of First 5 San Mateo County Policies and Bylaws for FY 2026 – 2027

Kitty Lopez shared that policies and bylaws were reviewed by Finance Committee on their May 11 committee meeting and endorsed its approval to the Commission.

MOTION: RICHARDSON / SECOND: RATHOD
 AYES: CHAVEZ, CUNNINGHAM, CHAWLA, RICHARDSON, SPEIER, RATHOD
 RYONO (YC)
 NOES: NONE
 ABSTAIN: NONE

Public Comments: None

9. Presentation: Approval of First 5 San Mateo County FY 2026 – 2027 Draft Budget and the Use of Ending Fund Balance (Reserves*) to Fund First 5 San Mateo County's FY

2026 – 2027 Adopted Budget

Kitty Lopez presented this agenda item and highlighted the following:

- The Finance Committee reviewed the FY 2026 – 27 Draft Budget on their May 11 meeting and endorsed its approval.
- FY 26 – 27 Draft Budget key take aways include:
 - Revenues:
 - \$3.590 M from Interest and Tobacco Tax Revenue.
 - \$3.000 M from Other Grant Revenues (\$1.282M Non-Baby Bonus and \$1.717M Baby Bonus grants)
 - Appropriations
 - Execute \$2.821 M strategic plan SPIP FY 2025-28 (\$2.637M SPIP & \$185K carry-over fund)
 - Execute \$2.901 M Other Grants (including \$1.717M Baby Bonus Program)
 - Draw down \$1.475M from Fund Balance/Reserves
 - to support the implementation of the new strategic plan SPIP FY 2025-28,
 - to leverage additional funding sources.
- Summarized key revenue assumptions, grant funding, appropriations, and projected ending fund balance/reserve classifications.
- FY 26-27 Budget Revision in February 2027
- Requested Commission approval of the FY 2026–27 Draft Budget and approval of the use of \$1.475 million from ending fund balance/reserves to fund the FY 2026-27 adopted budget.

MOTION: RICHARDSON / SECOND: RATHOD

AYES: CHAVEZ, CUNNINGHAM, CHAWLA, RICHARDSON, SPEIER, RATHOD
RYONO (YC)

NOES: NONE

ABSTAIN: NONE

Public Comments: None

The PowerPoint Presentation can be found on the F5SMC's website, [May 18, 2026 Commission Meeting Presentations.](#)

10. Presentation: Review of First 5 California Annual Report

Jenifer Clark, F5SMC's Research and Evaluation Specialist, shared the following:

- It is a requirement of Prop 10 that each year's First 5 California Annual Report is reviewed in public hearing by each First 5 County Commission.

- The full First 5 California Annual Report can be accessed online at https://www.cafc.ca.gov/pdf/about/budget_perf/annual_report_pdfs/F5CA_AnnualReport_2025_D6.pdf
- In FY 24 – 25, First 5 County Commissions invested \$297.9 million in services and \$82.7 million in systems change.
- In FY 24 – 25, First 5 County Commissions provided 641,015 child services and 511,241 adult services.
- Child demographics
- Quality Counts California & Impact Legacy data
- First 5 California has entered into a three-year, \$2.7 million contract with the California Health Interview Survey (CHIS), which surveys approximately 20,000 California households annually to inform public health priorities statewide.
 - CHIS developed a childcare policy analysis focused on disparities in access and affordability and the effects on parental stress, employment, and child development.
 - Future research will examine father involvement, child mental health, and the role of systems in supporting child and family well-being.
- Stronger Starts Media Campaign

Public Comments: None

The PowerPoint Presentation can be found on the F5SMC's website, [May 18, 2026 Commission Meeting Presentations](#).

11. Report of the First 5 San Mateo County Staff Team

Kitty Lopez, F5SMC's Executive Director, shared that the F5SMC Team Report is in the packet and highlighted the following:

- East Bay Agency for Children Contract Amendment
- First 5 San Mateo County and First 5 Center's for Children's Policy contract.
- News article from *ABC7News* regarding free diapers to newborns before they leave participating hospitals in California.
- Exploring opportunities to increase Medi-Cal revenue through a pilot project within a cohort of seven other First 5 commissions. First 5 San Mateo County is evaluating a potential sole source agreement with Sellers Dorsey, a consulting firm with expertise in Medicaid financing and revenue maximization, to pursue compliant, performance-based Medi-Cal revenue opportunities that could strengthen funding for prioritized maternal and child health initiatives and improve health outcomes. This was discussed at the Finance Committee, and further conversations will follow if it appears to be a viable option for First 5

SMC. Commissioner Chawla shared additional information as she is familiar working with Sellers Dorsey. Discussion ensued.

Commission made comments and asked questions.

Public Comment:

- Lizeth Hernandez made a comment about the potential revenue enhancement saying that it may be a similar effort that that county mental health services is doing with Sellers Dorsey and shared the challenges of eligibility requirements for participants.

12. Committee Updates

Finance and Administration Committee Meeting: Commissioner Cunningham shared that the Committee met on May 11, 2026, and they reviewed and discussed the items that were presented today.

Public Comments: None

13. Adjournment The meeting was adjourned at 5:28 pm

DATE: June 22, 2026
TO: First 5 San Mateo County Commission
FROM: Kitty Lopez, Executive Director
RE: Approval of F5SMC's Long-Term Financial Plan (LTFP) FY 2025-30 (FY25/26 Update)

ACTION REQUESTED

Approval of F5SMC's Long-Term Financial Plan (LTFP) FY 2025-30 (FY25/26 Update)

BACKGROUND

Current state of all First 5 County Commission Funding:

- **Long-Term Commitment to Community:** First 5 fund balances (excluding Fund Balance of Other Grants awarded by outside funders) are committed to offer vital community services in a predictable and meaningful manner to children and families. These services include, early childhood mental health consultation and services, system navigation and support for families, developmental screening and referrals, quality early education and child care infrastructure for providers and children, to name a few, plus countless partnerships that support local policy and systems change.
- **Statutory Requirements:** The authors of Proposition 10, and the enabling state statute, are clear – due to First 5s declining revenue source, adopting long-term financial plans and maintaining appropriate fund balances are required to carry out the goals of the program.
- **Investing Now and for the Future:** First 5 counties' fund balances continue to decrease as all First 5s spend down their funding to meet community needs and maintain services.
- **Fund Balances Continue to Decline**
Fund Balance have followed a downward trend and decreased by 12% and 23% in FY 2026-27 and FY 2029-30 respectively, due to the negative impact of Prop 31- Flavor Ban* (see Glossary / References, page 6); projected 6% average declining rate over period FY 2025-30. This illustrates that First 5 Commission continue to draw down from their Fund Balances year-after-year demonstrating a significant commitment to investing at reasonable but reduced levels of services as revenues continue to decline
- **Diversification of Revenue Sources**
First 5 County Commissions Fund Balances** (see Glossary / References, page 6 and page 7) may also include funding from non-Proposition 10 sources, e.g. local sales tax, local philanthropy, or other state and federal grants to reduce dependency on Tobacco Tax Revenue while bringing additional revenues sources for higher community investment.
- Finance and Administration Committee met, reviewed, and endorsed the approval of F5SMC's Long-Term Financial Plan (LTFP) FY 2025-30 (FY25/26 Update) at its Finance and Administration Committee meeting on Monday June 8, 2026.

KEY MESSAGES

- Long-Term Financial Plan (LTFP) is a snapshot in time with financial information that continues to change and evolve. The Commission has the opportunity to review and approve an updated LTFP every year.

- F5SMC's LTFP FY 2025-30 (FY25/26 Update) provides 5-year financial planning for continuation and implementation of the F5SMC strategic plan FY 2025-30 in parallel with the execution of Other Grants funding; the investments of Other Grant fundings are complementary to the F5SMC strategic plan SPIP FY 2025-30.
- Please read the LTFP FY2025-30 (FY25/26 Update) Memo and Narrative (**Attachment 6**) in conjunction with LTFP Table and Graphs (**Attachments 6A, 6B, 6C**).
- **Revenues**
 - ✓ Tobacco Tax Revenues are 62% average fiscal revenue for the period FY 2025-30; that represents 20% decrease financial dependency on F5CA Tobacco Tax Revenues, from 82% of fiscal revenue for the period FY 2020-25
 - ✓ Other Grant Revenues (including non-Baby Bous Grants and Baby Bonus Grants) are 38% average fiscal revenue for the period FY 2025-30; that represents 20% increase compared to 18% average fiscal revenue for the period FY 2020-25.
 - ✓ \$1M Mental Health Services Act (MHSA), one-year grant funding Revenue FY 2025-26 will end 6.30.2026.
- **Appropriations:**
 - ✓ Average 15% reduction in SPIP funding FY 2025-30 (average \$2.600 M/year) compared to SPIP FY 2020-25 actual spending (average \$3.052 M/year)
 - ✓ Continuation implementation of Other Grants (non-Baby Bonus Program), which complements the implementation of the new strategic plan SPIP FY2025-30.
 - ✓ Continue implementation of the Baby Bonus Program FY 2025-30.

FISCAL IMPACT

- Admin Cost Rate:
 - ✓ FY 2025-28: projected 10%-12%;
 - ✓ FY 2028-30: projected 15%-17%, the increase is associated with conservative projections of Other Grant Appropriations, which are projected \$1 M / year average or 65% lower than Other Grant Appropriations projections of \$2.970 M / year average for the period FY 2025-28.
 - ✓ 5-year average: projected 13%
- Budget Deficit:
 - ✓ FY 2025-30: Total Budget Deficit of \$8.566 M or \$1.713 M/year average as agency continues to withdraw dollars from Fund Balance (Reserves*) to support and fund its strategic investments and leverage new funding opportunities.
- Ending Fund Balance
 - ✓ At the end of FY2029-30, projected Ending Fund Balance (after Pension Liabilities and Operational Reserves) is \$2.614 M, which is approximate 4.4 months of Total Appropriations of FY 2029-30.
- At this time, we project from FY 2030 forward, Total Appropriations would be in line with Total Fiscal Revenues.

RECOMMENDATION

Approval of F5SMC's Long-Term Financial Plan (LTFP) from FY 2025-30 (FY25/26 Update)

LTFP FY 2025-30 (FY25/26 Update) - NARRATIVES

Please read the LTFP FY2025-30 (FY25/26 Update) Memo (**Attachment 6**) in conjunction with the LTFP Table and Graphs (**Attachments 6A, 6B, and 6C**) and/or follow below:

LTFP FY2025-30 (FY25/26 Update) are updated with the following:

- (1) F5CA Tobacco Tax Revenue Projections FY2025-30 dated January 23, 2026.
- (2) Other Grant Revenues including new grant award Sequoia Healthcare District FY2025-28; pending grant award First 5 San Benito Impact Legacy grant FY 2026-27.
- (3) FY 2024-25 Audited Financial Information.
- (4) FY 2025-26 Revised Budget and FY 2026-27 Adopted Budget
- (5) Funding Allocations of the new Strategic Plan Implementation Plan (SPIP) FY 2025-28, which was approved by the Commission during the strategic planning process in 2024.
- (6) Continue executing \$800K SPIP FY2023-25 Carry Over Fund in coordination within 3-year time frame of the SPIP FY 2025-28, per previous Commission approval.

I. TOTAL REVENUES

- FY 2025-30: Total Revenue \$28.339 M or \$5.668 M / year average

CATEGORY	CYCLE 5					FY 2025-30 Total	Average per year
	Y1 FY25-26 Revised Budget	Y2 FY26-27 Budget	Y3 FY27-28 Projection	Y4 FY28-29 Projection	Y5 FY29-30 Projection		
BEGINNING FUND BALANCE (Beginning Reserves*)	13,396	12,459	10,983	8,642	6,755	52,235	10,447
A. Interest Revenue	402	374	220	173	135	1,304	261
B. Tobacco Tax Revenue	3,413	3,216	3,074	2,954	2,828	15,485	3,097
C. Other Grant Revenues	3,742	2,999	2,541	1,440	827	11,550	2,310
C1. Other Grants - Non Baby Bonus	2,470	1,282	749	500	500	5,501	1,100
C2. Other Grants - Baby Bonus	1,272	1,717	1,792	940	327	6,049	1,210
TOTAL REVENUES	7,557	6,589	5,835	4,568	3,790	28,339	5,668
TOTAL AVAILABLE FUND (Total Sources*)	20,953	19,048	16,818	13,209	10,545	80,574	16,115

A. Interest Revenue:

- Interest Revenue is projected 2.5% Interest Earning Rate on the Beginning Fund Balance, as conservative approach to revenue projections.
- FY 2025-30: Total Interest Revenue \$1.304 M or \$261K / year average

B. Tobacco Tax Revenue:

- Tobacco Tax Revenue Projections FY 2025-30 with projected average annual declining rate of 6%, per First 5 California Tobacco Tax Revenue projections FY 2025-30 released January 23, 2026.

- FY 2025-30: Total Tobacco Tax Revenue \$15.485 M or \$3.097 M/year average.

C. Other Grant Revenues:

- Other Grant Revenue projected increase is 38% fiscal revenue compared to 18% fiscal revenue of the last ten years, as agency has won various new Other Grants through competitive grant application processes. .
- FY 2025-30: Total \$11.550 M Other Grant Revenue or \$2.310 M /year average, including Other Grant Revenue (non-Baby Bonus Program) and Baby Bonus Program.

C.1 Other Grant Revenue (Non- Baby Bonus Program): Total \$5.501 M or \$1.100 M / year average.

- ✓ FY 2025-28: Total \$4.501 M or \$1.500 M /year average as agency has won various new Other Grant awards, including:
 - (1) one-time Mental Health Services Act (MHSA) grant award FY 2025-26;
 - (2) on-going Impact Legacy grant FY 2025-26 and pending grant renewal FY 2026-27;
 - (3) on-going Integrated System for Children with Special Needs grant FY 2025-28;
 - (4) on-going Early Childhood Mental Health Initiatives grant FY 2025-28; and
 - (5) on-going Children Youth Behavior Health Initiatives grant FY 2024-27.
- ✓ FY 2028-30: projected Total \$1.000 M or \$500K / year average for Other Grant Revenue (Non-Baby Bonus Program). This represents a conservative estimate and approach of revenue projections. This projection is also based on historical trend, F5SMC's credibility and leadership, trusted relationships with existing funders, and leverage funding opportunities with within the Strategic Plan.

C.2 Other Grant Revenue – Baby Bonus Program

- ✓ FY 2025-30: Total \$6.049 M Baby Bonus Program or \$1.210M /year average.

II. TOTAL APPROPRIATIONS

- ✓ FY 2025-30: Total \$36.905 M Total Appropriations or \$7.301M / year average.

D . PROGRAM APPROPRIATIONS

- ✓ FY 2025-30: Total \$32.202 M Program Appropriations or \$6.440 M /year average.

D1. Strategic Plan Investment SPIP FY 2025-30

- ✓ FY 2025-30: Total \$13.000M or \$2.600M /year average per Commission approved funding allocations of the new Strategic Plan Implementation Plan (SPIP) FY 2025-30.

D2. SPIP FY 2023-25 Carry-Over:

- ✓ FY2025-28: Total \$800K SPIP FY 2023-25 Carry-Over dollars in coordination within 3-year time frame of SPIP FY 2025-28.

D3. Other Grants Appropriations

- ✓ FY2025-30: Total Other Grant Appropriations of \$10.980 M or \$2.196M/year average.

CATEGORY	CYCLE 5						FY 2025-30 Total	Average per year
	Y1	Y2	Y3	Y4	Y5			
	FY25-26 Revised Budget	FY26-27 Budget	FY27-28 Projection	FY28-29 Projection	FY29-30 Projection			
D. PROGRAM APPROPRIATIONS (D1+D2+D3+D4)	7,432	7,161	7,197	5,485	4,926	32,202	6,440	
D1. Strategic Plan Investment SPIP	1,842	2,637	3,321	2,600	2,600	13,000	2,600	
D2. SPIP Carry Over	616	184				800	160	
D3. Other Grants	3,620	2,901	2,391	1,340	727	10,980	2,196	
Other Grants - Non Baby Bonus	2,348	1,184	599	400	400	4,931	986	
Other Grants - Baby Bonus	1,272	1,717	1,792	940	327	6,049	1,210	
D4. Program Operations	1,354	1,439	1,484	1,545	1,599	7,421	1,484	
Shared Operating Budget	210	231	231	231	231	1,134	227	
Program Staff & Shared Admin S&B	1,144	1,208	1,253	1,314	1,368	6,287	1,257	
E. ADMIN APPROPRIATIONS (E1+E2)	847	904	979	969	1,005	4,703	941	
E1. Shared Operating Budget	210	231	231	231	231	1,134	227	
E2. Admin Staff S&B	637	673	748	738	774	3,569	714	
TOTAL APPROPRIATIONS	8,279	8,065	8,176	6,454	5,931	36,905	7,381	
Surplus / (Deficit) (Total Revenues - Total Appropriations)	(721)	(1,476)	(2,341)	(1,887)	(2,141)	(8,566)	(1,713)	
Admin Cost Rate	10%	11%	12%	15%	17%		13%	
ENDING FUND BALANCE before Pension Liability and Operational Reserves	12,675	10,983	8,642	6,755	4,614	43,669	8,734	
Pension Liability & 6 months Operational Reserves	2,000	2,000	2,000	2,000	2,000	10,000	2,000	
ENDING FUND BALANCE after Pension Liability and Operational Reserves	10,675	8,983	6,642	4,755	2,614	33,669	6,734	

- Other Grants – Non-Baby Bonus Program:

- ✓ FY 2025-30: Total \$4.931M or \$986K /year average Other Grant Appropriations, including the Mental Health Services Act (MHSA) grant FY 2025-26, Impact Legacy grant FY 2025-26, Integrated System for Children with Special Needs grant FY 2025-28, Early Childhood Mental Health Initiatives grant FY 2025-28.

For FY 2028-30, Staff project execution of \$1M new Other Grant Appropriations or \$500K/year average. This represents a conservative approach to revenue projections; based on conservative estimates of historical trend, F5SMC's credibility and leadership, trusted relationships with existing funders, and leverage funding opportunities within the Strategic Plan.

- Other Grants – Baby Bonus Program:

- ✓ FY 2025-30: execute Total \$6.049 M or \$1.210M /year average of the Baby Bonus Program Appropriations.

D4. Program Operations:

- ✓ FY 2025-30: projected Total \$7.421 M or \$1.484 M /year average Program Operations.

- ✓ For consistent presentation and clarity across F5SMC's Budget and F5SMC's LTFP, Program Operations includes:
 - 50% shared Operating Budget
 - Program and Evaluation Staff Salaries and Benefits.
 - 27% shared Admin Staff Time working on Program- related activities.

E. ADMIN APPROPRIATIONS

- ✓ FY 2025-30: projected Total \$4.703 M or \$941K /year average Admin Operations.

E1. Shared Operating Budget: 50% allocation rate of agency Operating Budget.

E2. Admin Staff Salaries and Benefits: 73% Total Admin Salaries and Benefits

III. RESTRICTED FUND FOR PENSION LIABILITIES AND OPERATIONAL RESERVES

- ✓ Commission has approved in previous LTFPs Total \$2M Restricted Funds for \$1M Pension Liabilities and \$1M for 6-month Operational Reserves. The Restricted Funds are set aside for its intended restricted uses.

IV. ENDING FUND BALANCE

- ✓ At the end of FY 2029-30, Projected Ending Fund Balance after Pension Liabilities and Operational Reserves is \$2.614 M which is approximate to 4.4 months of FY 2029-30 Total Operations.

V. GLOSSARY / REFERENCES

1. The Proposition 56 taxes reduce tax-paid tobacco purchases (hereafter, "consumption"), resulting in lower revenue for other tobacco tax funds. In the first revenue allocation step, some Proposition 56 revenues replace—or "backfill"—these revenue losses.
<https://lao.ca.gov/Publications/Report/3939>
2. Prop 31 – Flavor Ban on all Tobacco Products was passed in November 2022; The law is effective immediately in January 2023. Prop 31 causes larger negative decline rate of Tobacco Tax Revenue Projections from current 3% to 11% of Tobacco Tax Revenue Projections in 2023 and 2024, then levels off to 6% negative decline rate from 2025 onward.
3. FUND BALANCE (NOTE 10 –F5SMC audit report for the year ending 6.30.2025, page 33)
 - As prescribed by **GASB Statement No. 54**, governmental funds report fund balance in classifications based primarily on the extent to which First 5 is bound to honor constraints on the specific purposes for which amounts in the funds can be spent. First 5's fund balances were comprised of the following:
 - **Restricted Fund Balance** – includes amounts that can be spent only for **specific purposes** stipulated by **external resources providers**, constitutionally or through enabling legislation. Restrictions may effectively be changed or lifted only with the consent of the resource provider.
 - **Committed Fund Balance** – includes amounts that can only be used for **specific purposes** determined by a formal action of **First 5's highest level decision-making authority, the**

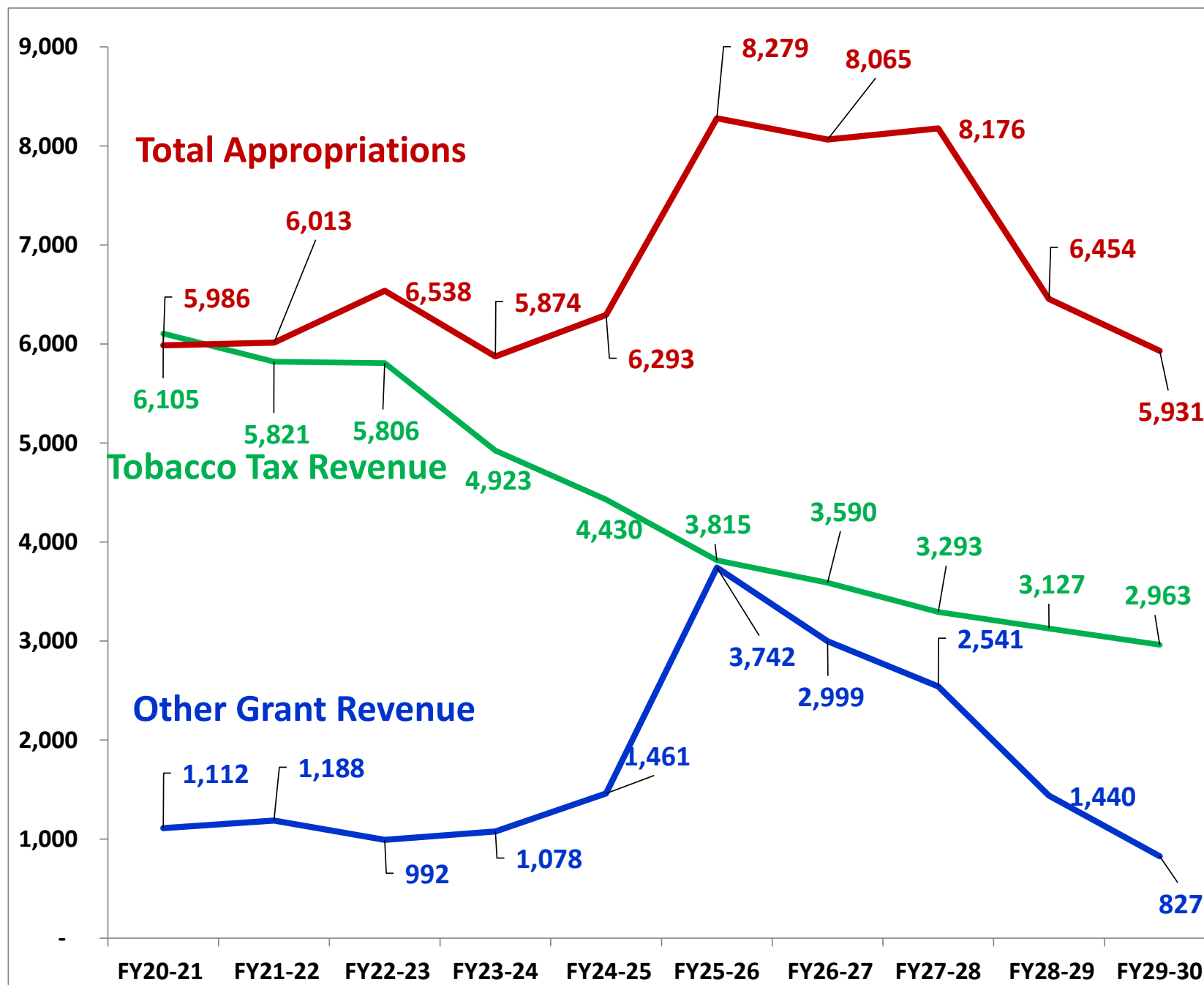
First 5 Board of Commissioners. Commitments may be changed or lifted only by First 5 taking the same formal action that originally imposed the constraint.

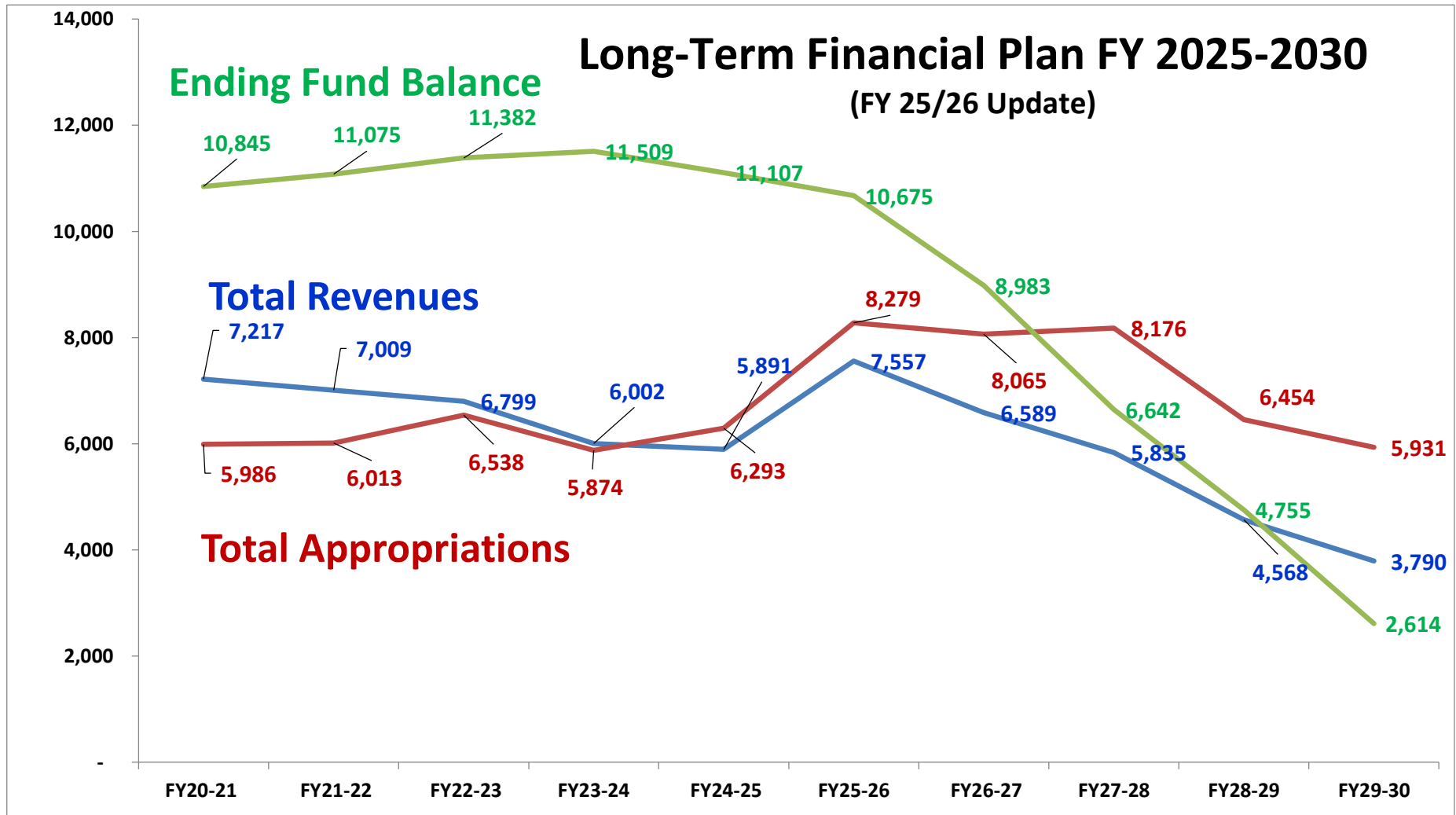
- **Assigned Fund Balance** – comprises amounts intended to be used by First 5 for **specific purposes** that are neither restricted nor committed. Intent is expressed by (1) First 5's Board of Commissioners or (2) a body (for example, a budget or finance committee) or official to which First 5's Board of Commissioners has delegated the authority to assign amounts to be used for specific purposes.

In circumstances when an expenditure is made for a purpose for which amounts are available in multiple fund balance classifications, fund balance is depleted in the order of restricted, committed, and assigned.

FIRST 5 SAN MATEO COUNTY - LTFP FY2025-2030 (FY 25/26 Update)

CATEGORY	CYCLE 5						FY 2025-30 Total	Average per year
	Y1	Y2	Y3	Y4	Y5			
	FY25-26 Revised Budget	FY26-27 Budget	FY27-28 Projection	FY28-29 Projection	FY29-30 Projection			
BEGINNING FUND BALANCE (Beginning Reserves*)	13,396	12,459	10,983	8,642	6,755	52,235	10,447	
A. Interest Revenue	402	374	220	173	135	1,304	261	
B. Tobacco Tax Revenue	3,413	3,216	3,074	2,954	2,828	15,485	3,097	
C. Other Grant Revenues	3,742	2,999	2,541	1,440	827	11,550	2,310	
C1. Other Grants - Non Baby Bonus	2,470	1,282	749	500	500	5,501	1,100	
C2. Other Grants - Baby Bonus	1,272	1,717	1,792	940	327	6,049	1,210	
TOTAL REVENUES	7,557	6,589	5,835	4,568	3,790	28,339	5,668	
TOTAL AVAILABLE FUND (Total Sources*)	20,953	19,048	16,818	13,209	10,545	80,574	16,115	
D. PROGRAM APPROPRIATIONS (D1+D2+D3+D4)	7,432	7,161	7,197	5,485	4,926	32,202	6,440	
D1. Strategic Plan Investment SPIP	1,842	2,637	3,321	2,600	2,600	13,000	2,600	
D2. SPIP Carry Over	616	184				800	160	
D3. Other Grants	3,620	2,901	2,391	1,340	727	10,980	2,196	
Other Grants - Non Baby Bonus	2,348	1,184	599	400	400	4,931	986	
Other Grants - Baby Bonus	1,272	1,717	1,792	940	327	6,049	1,210	
D4. Program Operations	1,354	1,439	1,484	1,545	1,599	7,421	1,484	
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DATE: June 22, 2026
TO: First 5 San Mateo County Commission
FROM: Kitty Lopez, Executive Director
RE: Approval of Amendment to the Contract Agreement with Adage Consultancy Group for TRISI- Facilitation of County Leadership Group and Resource Hub Design to increase the total amount of the agreement by \$99,500.00 for a new total obligation not to exceed \$149,500.00 and to extend the term from August 1, 2025 through June 30, 2028

ACTION REQUESTED

Approval of Amendment to the Contract Agreement with Adage Consultancy Group for TRISI- Facilitation of County Leadership Group and Resource Hub Design to increase the total amount of the agreement by \$99,500.00 for a new total obligation not to exceed \$149,500.00 and to extend the term from August 1, 2025 through June 30, 2028

BACKGROUND

The Trauma- and Resiliency-Informed Systems Initiative (TRISI) is a countywide effort to understand and operationalize a shared commitment to addressing trauma and promoting resiliency in local programs, structures, and culture with a long-term goal of embedding trauma- and resiliency-informed policies and practices at every level of the system, from organizations, to providers, to families.

The initiative focus up to this point primarily centered on training and support for child- and family-serving organizations to embed trauma-informed practices in their internal operations. Now in the sixth year of the project, the TRISI work has continued and evolved. Three of the largest child- and family-serving county agencies are currently active participants of the Initiative and have remained committed to their pursuit of a more trauma-informed and healing-centered system of care.

One of the core activities of this work is to bring agency leaders together routinely in a cross-agency TRISI Leadership Group to help align priorities, and to codify and outline the structure for their collective commitment to this work. Additionally, in order to support the ongoing prioritization of healing-centered practices for participating agencies and organizations, First 5 SMC is investing in the redesign of a TRISI Resource Hub.

This past year, Adage Consulting was selected through a competitive procurement process to facilitate the TRISI Leadership Group and design the Resource Hub. For the upcoming two years, these two activities remain high priorities for First 5 SMC and the agency partners. Extending the contract term of Adage Consulting to hold the ongoing facilitation, engagement, and activation for the TRISI County Leadership Group and the design and curation of the TRISI Resource Hub will help to embed and sustain the investments in this work over the long term.

The proposed amendment of \$99,500 to the current contract will support two additional years of funding for these priority areas at \$49,750 per year.

KEY SERVICES TO BE PERFORMED

The amended scope and budget for this project include activities in the following areas, which are detailed in the attached Scope of Work and Budget document:

- System Alignment and Activation
- Cross System Learning and Engagement
- Hub Activation and Community Engagement
- Leadership Consultation

These activities build upon the foundational engagement and design work this past year and in prior years.

FISCAL IMPACT

The funding for the current \$50,000.00 contract with Adage Consulting includes \$40,000.00 in Mental Health Services Act (MHSA) funding and \$10,000.00 in Sequoia Healthcare District funds. The remaining \$99,500.00 approved through this amendment includes \$49,750.00 from Prop 10 funding as approved in the 2025-28 First 5 SMC Strategic Plan Implementation Plan, and \$49,750 via an MOU with Sequoia Healthcare District.

RECOMMENDATION

Approval of Amendment to the Contract Agreement with Adage Consultancy Group for TRISI- Facilitation of County Leadership Group and Resource Hub Design to increase the total amount of the agreement by \$99,500.00 for a new total obligation not to exceed \$149,500.00 and to extend the term from August 1, 2025 through June 30, 2028



Organization: Adage Consultancy Group
Project Lead: Shawan M. Worsley, PhD, LMFT, LPCC
Project: F5SMC TRISI Consultation Services
Total Budget: \$99,500
Additional Funding Term: July 1, 2026 – June 30, 2028

Goal	Activities	Deliverables	Consultant	Hours/ Rate	Cost
System Alignment & Activation	Cross System Meetings CYSOC Leadership Meetings & Consultations Alignment Strategy Development Logistics, Coordination & Documentation	Participation in 4 Cross-System Meetings Facilitated Mtgs and 1:1 with Stakeholders Alignment Activation Recommendations	Shawan	70 hrs @ \$325/ hr	\$22,750
Cross System Learning & Engagement	Design & Facilitation of TRISI Learning Experiences Planning and implementation of Cross-System Learning Exchange Logistics, Coordination & Facilitation	2 TRISI Learning Experiences 1 Cross System Learning Exchange Learning Tools & Facilitation Resources	Shawan	70 hrs @ \$325/ hr	\$22,750
Hub Activation & Community Engagement	Attend & Translate TRISI Cross System Activities to Hub Content Hub Strategy & Content Development Testing & User Engagement Adage Team Meetings	Hub Documentation of Identified Cross-System Practices Featured Collaboration Stories and Learning Highlights	Damali	140 hrs @ \$200/ hr	\$28,000
Leadership Consultation	Quarterly Leadership Meetings F5 & 1:1 Meetings Logistics & Coordination Adage Team Meetings	4 Quarterly Leadership Meetings Implementation Updates and Recommendations	Shawan	80 hrs @ \$325/ hr	\$26,000
Totals				360 hrs	\$99,500

DATE: June 22, 2026

TO: First 5 San Mateo County Commission

FROM: Kitty Lopez, Executive Director

RE: Annual Review of the First 5 San Mateo County Strategic Plan: Conduct a public hearing to receive a staff presentation and public comment regarding the annual review of the Commission’s Strategic Plan, including progress toward strategic goals, implementation priorities, outcomes, and potential amendments or direction for Fiscal Year 2026–27.

ACTION REQUESTED

Annual Review of the First 5 San Mateo County Strategic Plan: Conduct a public hearing to receive a staff presentation and public comment regarding the annual review of the Commission’s Strategic Plan, including progress toward strategic goals, implementation priorities, outcomes, and potential amendments or direction for Fiscal Year 2026–27.

BACKGROUND

Annual Review of First 5 San Mateo County’s 2025-2030 Strategic Plan for FY 2024-2025 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

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.

2025 – 2030 Strategic Plan: After a comprehensive strategic planning process, the 2025 – 2030 Strategic Plan was developed and adopted by the F5SMC Commission on December 16, 2024 (**See Attachment 8A, 2025 – 2030 Strategic Plan**). The strategic planning process involved a comprehensive review of data from multiple F5SMC-funded workstreams, including family interviews, focus groups, surveys, and community-level evaluations. Key input was gathered through a Community Forum with local partners, a System Leader Convening with public and philanthropic leaders, and an Ad-hoc committee of Commissioners that met over five months. Additionally, dozens of staff meetings and four strategic planning sessions occurred during Commission meetings, along with facilitated meaningful dialogue among Commissioners, staff, and community members to guide priorities and planning. These processes shaped the 2025 – 2030 Strategic Plan framework which includes desired outcomes, strategies, F5SMC’s core domains and outcome indicators.

Strategic Plan Implementation Plan (SPIP): On January 27, 2025, the Commission approved the SPIP, strategies and funding allocations for FY 2025 through FY2028, supporting the implementation of the 2025-2030 Strategic Plan. For the duration of the 2025-2030 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 FY2025-2030, allocating funding to the Strategic Plan's Focus Areas: Healthy Children; Quality Care and Education; Resilient Families; and Systems Change. The LTFP updates and approval for FY 26-27 will be presented at the June 22, 2026 Commission meeting.

July 1, 2025 marked the beginning of the first phase of the 5-year plan; a 3-year funding cycle of community investments. New contracts have come to the Commission April, May, June and also in July for final approvals. Updates on the Strategic Plan Implementation have been provided to the Program, Operations and Planning Committee (POP) and to the full Commission and public since 2024; new updates will be ongoing.

This agenda item satisfies the requirement of an Annual Review of First 5 San Mateo County's 2025-2030 Strategic Plan; no changes to the 2025-2030 Strategic Plan are recommended at this time; SPIP implementation began July 1, 2025.

RECOMMENDATION

Annual Review of the First 5 San Mateo County Strategic Plan:

Conduct a public hearing to receive a staff presentation and public comment regarding the annual review of the Commission's Strategic Plan, including progress toward strategic goals, implementation priorities, outcomes, and potential amendments or direction for Fiscal Year 2026–27.



First 5 San Mateo County 2025-2030 Strategic Plan

July 1, 2025 - June 30, 2030



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Term

July 1, 2025 - June 30, 2030

Mission

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

Vision

Success for Every Child.

San Mateo County: Where everyone belongs and children lead the way.

Who We Are and What We Do

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 25 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 addition to the First 5 Association Network, an advocacy organization solely dedicated to children prenatal to age 5 across all 58 counties in the state.

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 promising practices or practices with evidence of effectiveness
2. Focusing on prevention and early identification
3. Targeting populations most at risk and/or those facing the largest inequities
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 2025-2030 Strategic Plan, First 5 San Mateo County 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 \$182 million in local programs and has served nearly 117,000 children from birth through age five. Each year, more than 3,000 parents and primary caregivers receive First 5 San Mateo County-funded services.

Roles of the First 5 San Mateo County Commission

As children and families live whole and integrated lives, First 5 San Mateo County recognizes that efforts to make a positive impact for young children and their families are inherently interwoven and often intersect. Over the past twenty-five years serving children and families, the First 5 San Mateo County Commission has successfully woven the roles of *Strategic Financial Investor*, *Community Partner*, and *Systems Leader* within and across its various strategies and domains.





First 5 San Mateo County (F5SMC) 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 2025-2030 Strategic Plan, F5SMC will continue to weave together its 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.

F5SMC's Primary Roles:

- **Systems Leader:** As the County's only organization legislated exclusively to achieving positive outcomes for children 0-5 and their families, the Commission will set and drive a child-centered agenda and 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.

As a systems leader, F5SMC identifies strategic partners and aligns leadership and resources to promote optimal child and family outcomes; convenes high-level, multi-agency policy conversations that keep early childhood priorities and the impact of early childhood in the forefront of decision making; develops and implements a Policy and Practices Platform that advances F5SMC's vision of success for every child; and partners with elected officials, community leaders, and other stakeholders to promote an early childhood agenda. F5SMC continues to maintain strategic partnerships with state-level groups such as First 5 California, the First 5 California Association, and other early childhood advocacy-focused organizations.

- **Community Partner:** The Commission's role as a community partner may be as a leader, initiating cross-agency and multidisciplinary partnerships and 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. F5SMC prioritizes partnerships that are results-driven, action-oriented, and likely to achieve measurable results and community impact.
- **Strategic 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.

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.
- 2. Re-envision systems that serve young children and their families to ensure equitable access and a seamless experience.** We recognize the importance of smooth transitions for children and families as they grow from infancy through toddlerhood and the preschool years, and enter elementary school.
- 3. Embrace the importance of all caregivers in the healthy development of children.** We believe all services should be inclusive of all types of families and caregivers in a child's life.
- 4. Support the right of all children to live, grow, and learn in their communities.**
- 5. Uplift cultural, ethnic, and linguistic diversity.** We believe all services should be designed, planned, and delivered to meet the needs of our county residents, in a culturally and linguistically responsive way.
- 6. Believe in the strengths and resiliency of all families and cultures.** We respect the desire and ability of families to nurture their children and act as their first teachers. We build upon the positive qualities of children, families, and communities in the design and delivery of programs.
- 7. Expand our collective understanding of the critical importance of supporting and meeting the need for 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 value to the landscape of supports for all children and families; and, evaluate our strategies to ensure excellence.
- 2. Advance equity.** Ensure all children, regardless of circumstance, have the opportunity to reach their full potential, and families are included as partners in decisions about their children.
- 3. Drive progress on prevention & early intervention.** Promote positive social-emotional, mental, and physical development in infants and toddlers, and focus on prevention and early intervention.
- 4. Promote healing.** Uplift the capacity of providers, partners, and systems to be trauma-informed and promote the healing and restoration of children, families, and communities that have experienced harm.
- 5. Achieve sustainability.** Use Commission investments to effect long-term policy, institutional, funding, and systemic changes that extend the reach and impact of F5SMC activities.
- 6. Cultivate collaboration & learning.** Build upon and integrate with existing services to improve quality and provide efficient service delivery.



Preparing Children for Lifelong Success: Guiding Frameworks & Research

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 F5SMC Commission goes far beyond success in school settings. F5SMC’s vision is for children to succeed in all aspects of their lives.

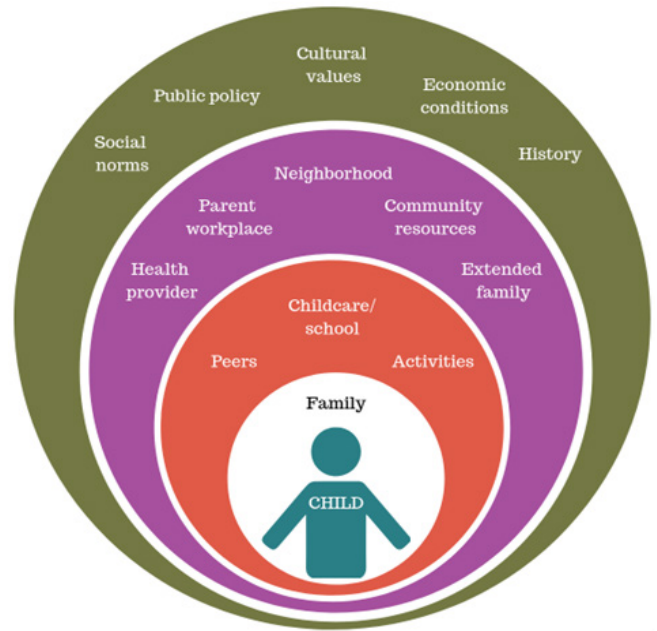
The foundations for physical, emotional, cognitive, and behavioral health are laid during the first years of life. Children develop these capacities through interactions with responsive and loving caregivers in safe environments. Stable, nurturing relationships literally build children’s brains in ways 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. Caregivers 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 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.

To be successful in this role, we must be thoughtful and intentional about how we approach all that we do. The following are the frameworks and philosophies that guide our work and have informed the strategies outlined in this plan.

Guiding Framework: Ecological Systems Theory

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.



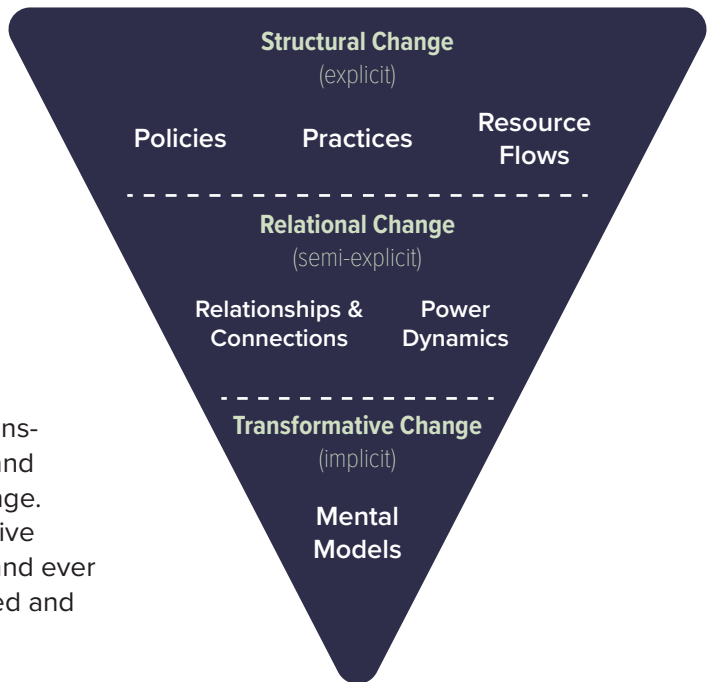
Guiding Framework: Social Determinants of Health

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 Through intentional focus on social determinants of health, F5SMC seeks to address health inequities that disproportionately impact children of color and children from low-income families in San Mateo County, limiting their ability to fully thrive.

Guiding Framework: Water of Systems Change

Recognizing the profound role that systems play in a child’s development, F5SMC acknowledges that to effectively support children’s success, it must have a role in transformational systems change. F5SMC’s approach to systems change is guided by FSG’s Water of Systems Change, which outlines six conditions that influence how systems operate and function (Kania, Kramer, Senge, 2018). These conditions are organized into three levels of systems change. The first level is structural change, which happens through shifting policies, practices, and resource flows. The second level is relational change, which requires fundamentally altering relationships, connections, and power dynamics. The final level is transformative change, which requires changing mental models.² With an eye towards transformational systems change, F5SMC prioritizes strategies and approaches that address at least one level of systems change. It is important to note that systems change and transformative change take time, and that because systems are dynamic and ever evolving, related efforts will need to constantly be monitored and iterated upon.

Six Conditions of Systems Change



F5SMC defines a **‘system’** as multiple parts that are intertwined and interrelated, working together to produce an outcome.³

With limited resources, F5SMC is maintaining a strategic focus on efforts that have the potential to change systems and lead to transformative change.

Building upon FSG’s Water of Systems Change framework, F5SMC defines **‘systems change’** as “shifting the conditions that are holding the problem in place,” and **‘transformative change’** as occurring when we shift mental models, as these are more likely to uphold explicit conditions such as policies, practices, and resources.



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.

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.
- A caring and nurturing relationship with at least one primary caregiver helps children feel safe and secure, and supports their learning and social-emotional development. A loving bond with a caregiver can offset adverse experiences.

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, early intervention after stressors have occurred can also be significantly beneficial to young children and can help prevent negative outcomes later in life.

Developing the 2025-2030 Strategic Plan

Children and Families in San Mateo County

Located in the heart of the Silicon Valley, San Mateo County has a diverse population. It is home to over 47,000 children aged five and under.⁴ White children, under the age of 17, are the largest population in the county at 35.3%, followed by Latinx (31.4%) and Asian American (22.7%). Other ethnic populations include: Multiracial (7.1%), African American (1.8%), and Pacific Islander (1.4%).⁵

Amidst the tremendous wealth in San Mateo County, there exists a glaring disparity between “the haves” and “the have nots,” which was only further exacerbated by the COVID-19 pandemic in 2020. This disparity is best captured in the fact that there are over 3,000 children ages 0-5 that are living in poverty in San Mateo County, a county which has ranked third in the state for median income.^{6,7}

The high cost of living in the county has made it challenging for many families to not only stay in the area, but to do so without some level of financial stress. While the median annual income for households in the county is approximately \$186,600⁸ in 2024, the Self-Sufficiency Standard for California estimates that a San Mateo County family of two adults and two children under the age of 5 would need an annual income of \$206,427⁹ to make ends meet without assistance.¹⁰

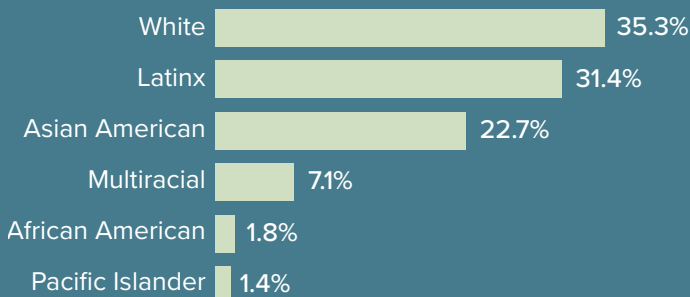
\$206,427

Annual income needed for family of four to meet the Self-Sufficiency Standard in San Mateo County, 2024

\$186,600

Area Median Income for San Mateo County for a family of four, 2024

Population of children under the age of 17 in San Mateo County



3,196

Children ages 0-5 living in poverty in San Mateo County



These income disparities become greater when factoring in race and ethnicity. Though the county's overall median income in 2022 was \$149,907, this drops dramatically for Hispanic/Latino households (estimated at \$99,162) and Black/African American households (estimated at \$97,411).^{11, 12} For white households, the median income in 2022 was estimated at \$166,608.¹³

One of the most commonly noted challenges in the county is the high cost of housing, as renters need to earn at least 3.7 times the minimum wage to afford the average asking rent in San Mateo County.¹⁴ In fact, 84% percent of extremely low-income households with young children in San Mateo County are paying more than half their income on housing costs. Coupled with housing costs, families with young children also struggle with finding affordable high-quality child care in the county.

As can be imagined, the high cost of living compounded by the collective trauma and social isolation of the COVID-19 pandemic, has had ripple effects on the mental and behavioral health of young children and families in our county. Interviews conducted with San Mateo County families in 2021 by the Silicon Valley Community Foundation helped to articulate the profoundly stressful and traumatic reality that many families faced during this time. These families reported having to juggle school, child care, and other responsibilities all while not being able to work from home. They experienced fear, isolation, and financial insecurity and continue to deal with the lingering effects of this toll on their mental health. The stories of these lived experiences have been validated in local data from child and family-serving organizations. For example, Family Connections, a San Mateo County organization that works with families of young children, reported a 41% increase in families needing mental health services.¹⁵

For families that do not qualify for subsidized services, but also do not make enough income to cover the high costs of living in the county, finding support and relief for these and any other emerging challenges they face can be difficult to near impossible.

The 2025-2030 Plan Refresh Process

In 2024, F5SMC celebrated 25 years as a Systems Leader, Community Partner, and Strategic Investor for young children in San Mateo County. Through deep reflection of the past 25 years, F5SMC reaffirmed its belief that effectively planning for the future requires deep listening and learning from community partners and the lived experiences of the families it seeks to serve.

In May of 2024, the F5SMC Commission began its strategic planning revision process to guide future community investments. The process was designed in partnership with VIVA Social Impact Partners to leverage existing efforts, uplift diverse voices, center lived experiences, and strengthen community collaboration.



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.

The plan refresh process included the following activities:

- Reviewing data from projects and programs funded by F5SMC, which included family interviews, family focus groups, surveys, and other evaluation and community-level data.
- A Community Forum for community partners to share their feedback, perspectives and priorities.
- A System Leader Convening with public agency systems partners and philanthropic leaders to identify areas for collaboration and alignment.
- An Ad-hoc committee of F5SMC Commissioners that met regularly over five months.
- Dozens of meetings with F5SMC Staff.
- Four strategic planning sessions held as part of Commission meetings that included dialogue among Commissioners, community members, and F5SMC staff.

Across the input processes, we learned that:

1. Families of young children are struggling with accessible quality early care and education, accessible mental and behavioral health supports, and basic needs (e.g., housing, diapers, food).
2. Families often face barriers around awareness of what services are available, how to navigate complex systems and access services, meeting eligibility criteria to receive services, and being placed on waitlists.
3. The most common barrier faced when trying to address child and family needs are a shortage of available service providers, including having enough providers that can meet linguistic and cultural affinity needs of families. These workforce challenges are compounded by a lack of coordination of partners and systems, a lack of sustainable funding, and complex systems that providers must navigate.
4. Despite the significant challenges that families face, many families are finding ways to be resourceful and have inherent strengths that should be applauded and reinforced.

The following themes emerged as central to F5SMC's efforts moving forward.

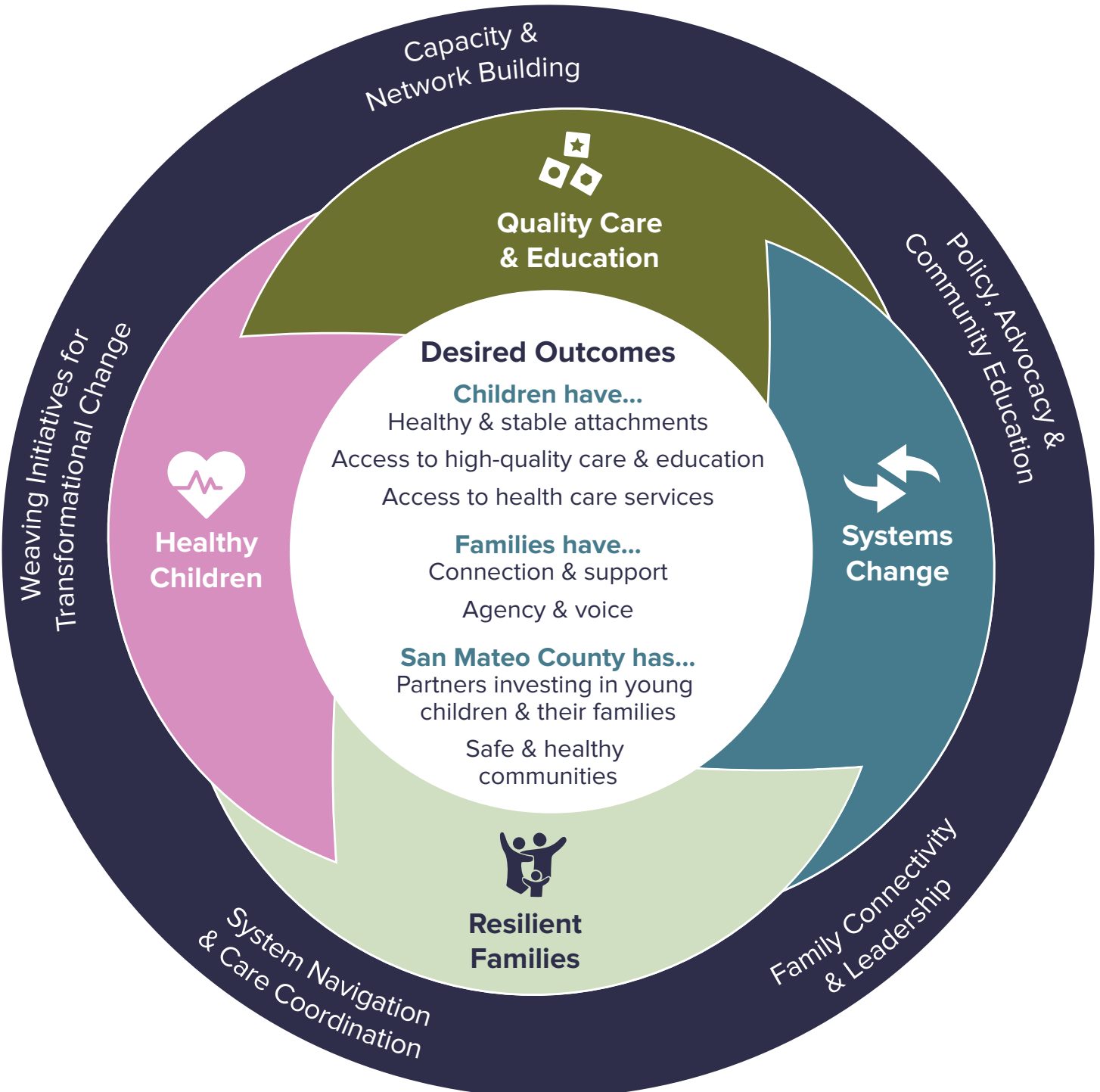
1. **Weaver:** Building bridges and connecting dots to cultivate strategic partnerships and cross-sector collaboration, help local funded and unfunded stakeholders tap into opportunities to strategize together in support of common goals, and transform mindsets.
2. **Change Agent:** Impacting local, regional, and state decision makers, including community business leaders, to prioritize young children in policy and practice.
3. **Resource Maximization:** Leveraging, aligning, and blending funding as well as ensuring available public funds are maximized before F5SMC funding is utilized.
4. **Impact Investor:** Prioritize investments that focus on prevention, upstream interventions, and transformational change to promote long-lasting equitable outcomes.
5. **Systems Catalyst:** Striking the right balance between program investments and systems improvements through bold, cross-sector initiatives and effective partnership.



FRAMEWORK FOR THE 2025-2030 STRATEGIC PLAN

Our strategic plan guides our actions and our areas of focus. At the center of our framework and the central drivers of our efforts are our desired outcomes for children, families, and the county. We will work to achieve these outcomes by focusing on four intersecting core domains. Changes in these domains can have a direct impact on our desired outcomes. How we focus on the domains will be guided by our five strategies. These strategies inform our investments and actions within and across the domains.

Pages 15-27 of this plan share details about our desired outcomes, core domains, and strategies.





Desired Outcomes

The First 5 San Mateo County Commission (F5SMC) adopted the following desired outcomes to guide its efforts during the 2025-2030 Strategic Plan:

- 1 San Mateo County leaders and partners fully invest in young children and their families.**
- 2 Communities provide a safe and healthy environment for young children.**
- 3 Children have timely and affordable 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 relationships and stable attachments to their primary caregivers.**
- 6 Children have access to and are utilizing appropriate health care services to meet their health and developmental needs.**
- 7 Families have agency and voice to direct policies and systems that impact their children.**



Strategies

To achieve our desired outcomes, F5SMC has identified the following five strategies with the goal of impacting children and families across our four core domains. To maximize our resources and the expertise that exists in our county, these strategies will be implemented in collaboration and coordination with other funding partners, systems, and community organizations, as F5SMC has done for 25 years.

Guided by our understanding of the interdependencies and interrelatedness of early childhood systems, F5SMC recognizes that these strategies may directly impact and/or have ripple effects beyond one singular domain area.

1. System Navigation and Care Coordination for Families:

To support families with equitable access to the services they need to support their child's positive and healthy development, F5SMC will advance system building efforts that help families navigate systems, resources, and services, and promote stronger service coordination, care coordination, and case management for families with complex needs. This will be done in coordination with other funding partners and systems to achieve the highest impact.

2. Capacity and Network Building for Child-Serving Systems and Providers:

To strengthen child- and family-serving systems to deliver high-quality services to children and families, F5SMC will drive efforts that build and strengthen organizational and workforce capacity, promote workforce retention, break down silos, and increase cross-collaboration. This will be done in coordination with other funding partners and systems to achieve the highest impact.

3. Weaving Partnerships and Innovative Initiatives for Transformational Change:

To fundamentally change the systems that impact the wellbeing and lifelong trajectories of children prenatal to five, F5SMC will lead efforts that weave together cross-sector partnerships, amplify family voices, transform mental models, and practice the vision of the future that we are seeking to build for our county's youngest children. This will be done in coordination with other funding partners and systems to achieve the highest impact.

4. Family Connectivity and Leadership:

To strengthen the connections, relationships, and power that make up a supportive and holistic ecosystem of care for families of young children, F5SMC will support parent connection and community-building efforts that reduce social isolation of families and empower caregivers with the relationships, knowledge, leadership skills, and tools to support their child's positive and healthy development and to advocate for their child. These parent connectivity and leadership efforts may focus on positive mental health of caregivers of young children prenatal to five, positive caregiving, quality early learning, healthy development, family advocacy and leadership building, or protective factors for children. This will be done in coordination with other funding partners and systems to achieve the highest impact.



5. Policy, Advocacy, and Community Education:

To cultivate a child-centered culture where children lead the way in San Mateo County, F5SMC will lead strategic policy, advocacy, communications, and research and knowledge development to build public and political will to invest in the well-being and success of our young children, and give stakeholders the information they need to change the systemic conditions for children and families. This includes developing and implementing a new Communications Plan that supports increasing understanding about foundational early childhood topics such as early brain development. This will be done in coordination with other partners and leaders to achieve the highest impact.

In addition to leading and investing in these overarching strategies, as a Community Partner, F5SMC will participate, champion, and/or stay informed of other concurrent initiatives and efforts happening in the County to ensure that when and where there is an opportunity to uplift the voices of children 0-5 and their families F5SMC can do so effectively.

*Note: Future procurement processes will provide more specific detail and information about the implementation of the above strategies.

F5SMC's Core Domains & Indicators

The 2025-2030 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, leadership, and partnerships that target four core domains:

- Healthy Children
- Resilient Families
- Quality Care and Education
- Systems Change

Within each of these core domains are a set of indicators at the population level, systems level, and participant level that will be monitored by the F5SMC Staff and Commission and that will support F5SMC in evaluating and adapting its implementation of the strategic plan.

- **Population-Level Indicators:** These indicators have community baseline data and are impacted by many efforts and agencies. The Commission will monitor these indicators to inform its ongoing work as a systems leader and community partner.
- **Systems-Level indicators:** These indicators will be monitored by First 5 San Mateo County to inform its systems-level efforts and investments.
- **Participant-Level Indicators:** These indicators will be measured by First 5 San Mateo County grantees, as applicable, for participants in services.

The following outlines the critical importance of each of these domains for children and families in San Mateo County, and the indicators that will be monitored for each 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.¹⁶ Because the social determinants of health intersect with numerous systems, addressing health inequity for children requires cross collaboration and an intentional focus on systems change efforts. F5SMC has a strong history of supporting collaborative health efforts, particularly those that focus on prevention and early intervention.

In San Mateo County, 98% of children are covered by health insurance.¹⁷ Health coverage and utilization of preventive care benefits has been and continues to be an advocacy priority for the Commission. As California continues to roll out enhancements for Medi-Cal Transformation, there are numerous opportunities on the horizon to strengthen children’s access and utilization of preventive and early intervention services. However, many children in San Mateo County are privately insured,¹⁸ and others may still face barriers to accessing timely and needed health care services, such as language issues, availability of specialized service providers, waitlists, lack of formal diagnosis required to receive services, and out-of-pocket costs.¹⁹

Access to Preventive Oral Health Care

Preventive health care can help minimize threats to healthy development and provide early detection and intervention for problems that emerge.²⁰ For children in the United States, tooth decay is the most common chronic condition. 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.²¹ 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.²² However, in 2020, only 30% of children 0-5 from low-income families had visited a dentist in the last year.²³



Access to Early Identification

Another important element of preventive care for children during the first five years of life is the early identification and treatment of developmental concerns, because this is the time when a child's brain, body, and behavior are most malleable. Early detection is critical for the 16.9% percent of all children ages 0-5 in California who have special health care needs.²⁴ However, in 2021, only 45% of children with Medi-Cal in San Mateo County received an annual preventive checkup.²⁵

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. The American Academy of Pediatrics recommends that pediatricians implement universal screening for their patients three times before a child's third birthday. In San Mateo County, 64.8% of children receive timely developmental screenings, suggesting that there are still many children who may not be identified early enough.²⁶ Although developmental delays pose risks for all children, delays that are prevalent among low-income children are more likely to be missed.

Access to Early Intervention Services

Once a health or developmental concern has been identified, 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.²⁷ Navigating numerous and sometimes disconnected systems to access vital health care services can be challenging for any family, but especially for working families, families with limited English proficiency, and families from marginalized and disenfranchised communities.

When families are supported through coordinated care, case management, system navigation, and warm hand-offs, they may be able to more easily access health services that their children need to develop and lead healthy lives. However, California ranks 43rd in the nation on effective care coordination for children with special health care needs.²⁸ In 2024, F5SMC gathered qualitative and survey data from families through a number of initiatives. Across these insight gathering efforts, systems navigation and care coordination consistently rose to the surface as a key need.²⁹

Access to Early Childhood Mental Health

Intervening early to impact children's health outcomes is inherently an upstream strategy that can mitigate longer-term health challenges and inequitable health outcomes. Creating greater access to quality early childhood mental health and family behavioral health services in San Mateo County is crucial to support the healthy development of our youngest residents.

We know that the groundwork for positive emotional health is laid during pregnancy. After birth, this continues to be developed through caring and safe relationships with a child's caregivers. Positive mental and emotional health enables children to thrive in all aspects of their life, including their health. However, when children struggle with

emotional, mental, and behavioral health concerns, it can lead to more significant health symptoms such as chronic eating, difficulty sleeping, toilet training issues, and dangerous or risky behaviors.³⁰ According to Zero to Three, between 10-16% of young children in the United States experience mental health conditions, and for babies in poverty this number increases to 22%.³¹

The causes of mental health issues in young children can be due to a number of factors such as environment, trauma, biology, and other adverse childhood experiences (ACEs).³² 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.³³



In San Mateo County, we are seeing families facing challenges navigating and accessing the early childhood mental health system, due to a number of barriers. According to the San Mateo County Early Childhood Mental Health Landscape Scan conducted in 2024, these barriers range from eligibility restrictions, to logistical challenges and language access, to high staff turnover that disrupts continuity of care for families. Furthermore, challenges with insurance create another set of limitations for families of young children. Most children in San Mateo County are privately insured. Some private insurance plans do not cover services until high deductibles or out-of-pocket maximums are met, and out-of-pocket costs can be difficult for families to afford and may not be reimbursable. Additionally, providers may be hesitant to share the information required by private insurance companies and are reluctant to contract with them due to concerns over extensive documentation requests and the risk of payment denials or clawbacks. These issues further limit access to quality mental health services for children and families.³⁴

Population-Level Indicators

- 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 percentage of children enrolled in Medi-Cal managed care who had 6 or more well-child visits during the first 15 months of life.
- The number of children and families enrolled in home visiting.
- The percentage of children ages 1-5 who have seen the dentist for a routine check-up in the past year.
- The number of children ages 0-5 who live in High Community Need areas, as defined by the Health Equity Index from San Mateo County All Together Better.
- The number or percentage of children receiving Early Start services in San Mateo County.
- The percentage of children ages 0-5 in priority school districts and childcare settings that are receiving oral health screenings and/or services.

System-Level Indicators

- The number or percentage of pediatric health providers who provide access to developmental screening as a part of routine well-child visits.
- The number or capacity of dental providers who serve children ages 0-5 on public insurance.
- The percentage of providers reporting confidence and capacity to refer families to Help Me Grow services.
- Progress made by agencies participating in the Trauma and Resiliency-Informed Systems Initiative towards becoming Healing Organizations
- The number and strength of partnerships established with key organizations to support Baby Bonus program implementation and community health worker (CHW) engagement.

Participant-Level Indicators

- The percentage of children with the appropriate number of well-child visits for their age in the past 12 months.
- The percentage of parents reporting difficulty accessing services for their child's mental, developmental, and/or behavioral health.
- The percentage of Help Me Grow (HMG) referrals that result in families feeling that their needs have been met.
- The number of children ages 1-5 who received a dental visit in the past year.

► Resilient Families

Secure, stable, and supportive relationships with caring adults significantly contribute to a child's healthy brain development.³⁵ 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.³⁶ 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. The Strengthening Families Protective Factors Framework articulates five elements that can support child development and reduce the likelihood of abuse and neglect through engaging families in a strengths-based approach.³⁷ These factors include: parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence of children. In order to cultivate these protective factors in families, there needs to be concerted strengths-based efforts to build parent partnerships, create avenues for social connection, mutual support, and inclusion, promote engagement, and support parents as decision-makers and leaders.



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. 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.³⁸ 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.³⁹ 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.



As a result of the COVID-19 pandemic and its many aftereffects, many families continue to struggle in San Mateo County with stress and social isolation. This stress, which is primarily due to economic inequality in the county and social isolation, is particularly profound for families that face low annual household incomes, or middle-income families that may not be able to qualify for certain resources. Preliminary findings from a 2024 survey conducted with 69 parents of children with Medi-Cal eligible children in the County revealed that 34% face housing insecurity, 31% report financial concerns, and 31% experience food insecurity, which are critical stressors for families. Additionally, 24% of parents reported feeling socially isolated.⁴⁰ These stressors have ripple effects on children's mental and emotional well-being. Through the 2024 San Mateo County Early Childhood Mental Health Landscape Scan, data reveals a rise in anxiety among young children, particularly since COVID-19. The rise in anxiety is often misinterpreted as misbehavior, when in reality, these behaviors stem from underlying trauma.⁴¹

Population-Level Indicators

- The percentage of families of young children experiencing housing insecurity.
- The percentage of parents who regularly read, sing, and/or count with their children ages 0-5.
- Median earnings of families by race and ethnicity.
- The number of families with children living at or below 250% of the federal poverty line in the County.
- 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.

System-Level Indicators

- Core resource centers are consistently stocked with essential supplies (e.g., diapers, wipes, formula) to meet community demand.
- The percentage of parents reporting that they are able to access the services their family needs.

Participant-Level Indicators

- The number and/or severity of risk factors reported by parents receiving intensive services, such as inadequate food, inadequate housing, depression, domestic violence, and substance abuse.
- 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 report feeling confident in their ability to advocate for their child.
- The percentage of parents who regularly read, sing, and/or count with their children ages 0-5.
- The percentage of parents reporting increased confidence and capacity to engage in leadership roles and influence systemic change.

► 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 children’s lives. In San Mateo County, 71% of children ages 0-5 live in families with working parents,⁴² but in 2021 there were only enough licensed childcare spaces available for 33% of these children.⁴³ Overall, the county faces a shortage of about 6,897 child care spaces for children 0-5. While statewide efforts, such as the expansion of Universal Transitional Kindergarten, may offset some of these shortages for preschool age children, access for younger children continues to be a significant challenge.

Benefits of Quality Care and Education

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.⁴⁴ Children with preschool



experience are generally more developmentally prepared for kindergarten, setting them on the path for grade-level reading proficiency by the third grade, which research shows can increase the likelihood of high school graduation and future success.⁴⁵

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.⁴⁶

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.^{47,48} 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.

Improving Quality Through Workforce Support

Critical to high-quality early learning settings are safe, accessible, and developmentally appropriate facilities, and a well-trained and well-supported workforce. Studies have found that teachers’ specialized knowledge about child development and instruction for young children is particularly important for quality early learning.⁴⁹ In order to develop and retain a well-qualified workforce, especially in a county with a high cost of living, teachers must be well-compensated, well-educated, and well-respected. Professionalizing the early care and education field reduces teacher vacancies and turnover.⁵⁰

While the vast majority of early educators feel their work makes a difference, only 43% of center teachers and 65% of family child care (FCC) providers in San Mateo County feel respected in their roles.⁵¹ Low wages in early care and education affect educators’ economic well-being, leading to food insecurity and reliance on public assistance, which contributes to high-stress. About one in three early educators in San Mateo County use public assistance, with 44% of center assistants relying on it. Furthermore, staff recruitment challenges are widespread, with 82% of family child care providers and 93% of center directors reporting difficulties in finding qualified candidates. Retention is equally concerning; only one-third of center teachers and assistants are likely to remain at their current sites for at least three more years.⁵² Low pay and financial concerns frequently drive educators to leave their positions. Addressing and improving these factors will not only alleviate stress among educators but also foster an environment where they can better support quality education in the classroom.



Promoting Equitable Access to Quality Care and Education in San Mateo County

The First 5 San Mateo County Commission is committed to serving as a leader, partner, and investor in efforts that promote equitable access to quality care and education in San Mateo County. The Commission will continue to serve as an advocate, pushing for policies that improve conditions for the workforce and create more equitable access to quality care and education for children and families, including for dual language learners, children of color, and children with cognitive and physical disabilities. F5SMC will also continue to partner with local, regional, and statewide collaborative efforts that support access to, and the quality improvement of, early learning settings for all children 0-5. Through strong partnerships, and strategic collaboration, F5SMC believes a more equitable early learning system for children, their families, and their teachers is possible.

Population-Level Indicators

- The available supply of infant and toddler care relative to the need.
- The percentage of children ages 3-5 who are enrolled in Preschool (UPK) before Transitional Kindergarten/Kindergarten entry.
- The percentage of all early learning programs participating in Quality Improvement activities.
- The percentage of third-grade students reading at or above grade level.
- The percentage of children entering kindergarten ready to thrive.

System-Level Indicators

- The number of early learning facilities maintained, expanded, or in the pipeline.
- Number and/or percentage of publicly-funded child care settings receiving Early Childhood Mental Health Consultation services

Participant-Level Indicators

- The number of children ages 3-5 who are enrolled in programs participating in Quality Counts.
- The percentage of home-based and alternative setting early learning programs that are participating in Quality Counts.
- Of children who attend early learning programs that are participating in Quality Counts, the percentage of those that are dual language learners and children of color, and special needs.



► Systems Change

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,⁵³ these experiences are not shared equally. San Mateo County, along with Santa Clara county as part of the Silicon Valley region, has a staggering degree of wealth inequality. In fact, the top 1% of households in Silicon Valley hold 48 times the wealth of the bottom 50%, compared to the national gap where 1% of households hold 23 times the wealth.⁵⁴

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.

F5SMC 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.



Population-Level Indicators

- The status of continuous Medi-Cal enrollment for children 0-5.
- California's ranking in the U.S. for parents reporting their ability to access mental health services for their child.

System-Level Indicators

- The number and characteristics of partnerships among the organizations that comprise the early childhood ecosystem in San Mateo County.
- The number of child and/or family-serving providers that express having the capacity to participate in systems-level efforts.
- The number of child and/or family-serving providers that express feeling connected to a network and supported.
- The percentage of agencies successfully accessing and utilizing Medi-Cal funding streams to support services for eligible populations.
- The percentage of providers across sectors reporting adequate resources and manageable levels of stress related to participating in systems-level meetings and gatherings.
- The percentage of target audiences that report positive perception, trust, and/or value of the topics that F5SMC communicates about.
- Experiences with San Mateo County early childhood systems, as measured qualitatively through partner and family stories.
- Number of local and statewide advocacy efforts F5SMC has participated in.
- The number of in-person community outreach participated in, including but not limited to local discussion panels and tabling events.
- The number of local jurisdictions adopting strategies to increase the quality and/or availability of childcare.
- Number of providers trained in early childhood mental health modalities and/or foundational practices.

Other measures that matter

In addition to the indicators outlined above, there are numerous measures that would be meaningful to monitor, if and when the data becomes available, to inform F5SMC's partnerships, investments, advocacy, and leadership efforts. These include the following measures:

- The percentage of mental health clinicians reporting confidence and capacity to serve young children and their families effectively.
- The total amount of funding per year dedicated to early childhood, such as child care, early childhood mental health, home visiting, etc.
- The rate of early childhood mental health concerns reported from families and child-serving providers.

Accountability

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

First 5 San Mateo County uses a variety of evaluation methods to stay informed about the needs of local families, track its impact, and identify effective strategies for achieving its desired outcomes. These methods include qualitative approaches such as interviews and focus groups with parents and service providers, as well as quantitative analysis of survey results. For example, as part of a recent qualitative needs assessment, substantial proportions of Medi-Cal eligible families identified challenges meeting the following needs for their families:

- Child care: 83%
- Basic needs: 61%
- System navigation: 61%
- Cost of living: 57%
- Parenting education: 35%
- Mental health services: 30%
- Social and emotional support: 26%

Additionally, among a sample of families who received home visiting or care coordination services:

- 35% reported housing insecurity
- 31% often did not have enough money to meet their families' needs
- 24% were socially isolated
- 24% needed help with their sadness or depression
- 7% expressed concerns about domestic violence
- 7% expressed concerns about substance use by someone in their household



While F5SMC is continuing to collect survey data from families 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. For example, the Baby Bonus project is fielding an intensive, multipartner data collection and sharing effort as part of a randomized controlled trial to evaluate the program. 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 25-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.



Acknowledgements

The Commission would like to thank and acknowledge:

- Community members, families, and leaders who took part in and contributed to the strategic planning process. The time, expertise, and insight provided by our community partners and families were invaluable and played a significant role in shaping the focus and direction of the 2025-2030 Strategic Plan;
- First 5 San Mateo County strategic planning ad-hoc members which includes the following Commissioners: Carla Boragno, Louise Rogers, and Nancy Magee.
- First 5 San Mateo County staff for their thoughtful and tireless work, and dedication to San Mateo County's youngest children and families; and
- Iris Elent, MSW, VIVA Social Impact Partners for their wise counsel and facilitation of the strategic planning process.

First 5 San Mateo County Commissioners:

Nkia Richardson, Executive Director, CASA San Mateo County, Commission Chair

Nancy Magee, County Superintendent of Schools, Commission Vice-Chair

Louise Rogers, Chief, San Mateo County Health

Claire Cunningham, Director of San Mateo County Human Services Agency

Carla Boragno, Former Chair, Genentech Foundation, Public Member

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**FIRST 5 SAN MATEO COUNTY (F5SMC)
FIRST 5 STAFF TEAM REPORT
JUNE 2026**

STRATEGIC INVESTMENT FOCUS AREAS – UPDATE

QUALITY CARE AND EDUCATION

San Mateo County Board of Supervisors Approves \$10 Million Investment in Child Care

On June 9, 2026, at the San Mateo County Board of Supervisors meeting, the Board approved a resolution allocating \$10 million to support two child care pilot programs: a one-stop child care navigation portal to help parents find providers, apply for services, and determine subsidy eligibility (\$1.5Mil) and a Tri-Share program, a partnership among the County, employers, and parents designed to assist working families who earn above the subsidy threshold but still cannot afford child care (\$8.5 Mil). The resolution is sponsored by Supervisors Jackie Speier and Lisa Gauthier. (See Attachment 9.1)

Child Care Partnership Council

On June 15, 2026, the Childcare Partnership Council (CCPC) and workgroups met for their bi-monthly meeting held in the evening to support childcare providers attending. The agenda included discussion and presentations on: (1) Catalyst Jobs First Regional Group activation plan landscape and research focusing on childcare resource and referral, navigation (tech & persons) and best practices (San Mateo, Contra Costa, Santa Clara and Alameda are participating counties). F5SMC and Health Plan of San Mateo (HPSM) staff were key informants for this research; (2) 4Cs- Child Care Coordinating Council recently launched upgraded and expanded My Childcare Plan/Connects, a navigation portal that supports subsidized and nonsubsidised childcare and free marketing for child care providers; (3) CA May 2026 Revise on child care and CCPC planning for the Workforce Committee, Pilots and Innovations Committee, Advocacy Committee, and Research, Evaluation & Partnerships Committee all supporting the work of CCPC and The Child Care Blueprint.

HEALTHY CHILDREN

Immigration Institute of the Bay Area Contract

First 5 SMC recently contracted with the Immigration Institute of the Bay Area (IIBA) to provide up to 12 legal consultations for families of young children with questions about their immigration situation. The contract covers up to 12 hours of time for immigration attorneys to provide their consultation services, with part of that time dedicated to an in-person event recently co-hosted with the Daly City Partnership. This small grant of \$2,000 was approved internally and is funded through June 30, 2026 with dollars from the Mental Health Services Act (MHSA).

F5SMC Early Childhood Mental Health (ECMH) Grantee Sustainability Learning Community

On June 8, 2026, First 5 San Mateo County hosted the first session of five of a learning community for F5SMC grantees who provide early childhood mental health services. The series is designed to provide ECMH providers with information about sustainable funding streams that can be used to support ECMH or ECMH-adjacent activities along with technical assistance. The learning community is expected to run from June through October 2026 and includes presentations and expertise from the First 5 Center for Children's Policy, Health Plan of San Mateo, Behavioral Health and Recovery Services, and San Mateo County Office of Education. The series is partially funded with Mental Health Services Act (MHSA) dollars.

RESILIENT FAMILIES

Community of Practice

On May 26, 2026, Jenifer Clark attended the first in-person cross-agency, cross-sector Community of Practice (CoP) for Family Support Professionals, hosted and facilitated by staff from Sellers, Dorsey & Associates. Attendees included staff from health, family support, and early learning organizations working to support families as they navigate the systems to find the resources they need for their children to thrive. The goals of the CoP series include:

- Strengthening Connection & Support Among Professionals
- Fostering Cross-Sector Collaboration
- Advancing Whole-Family, Equitable Outcomes
- Concrete Problem Solving & Resource Sharing

Sellers Dorsey will be facilitating Community of Practice (CoP) meetings every other month, alternating between virtual and in-person formats. Direct service providers who work with young children and their families are invited to participate in the new program. Sessions will be interactive, collaborative, and focused on practical support for providers. Our next session will be held virtually on Tuesday, July 28th from 2-3:30pm. For more information or to receive a registration link, please contact Olivia Brown from Sellers Dorsey (obrown@sellersdorsey.com) or Jenifer Clark from F5SMC (jdclark@smcgov.org). We hope to see you there!

POLICY & ADVOCACY UPDATES

First 5 San Mateo County supports the following bills discussed at the First 5 Association's Policy Committee:

- [AB 2756](#) - Strengthening Medi-Cal Vision Services Act. This bill requires the development and implementation of vision care metrics and benchmarks within Medi-Cal.

Letter of Support: Budget Request to Ensure Young Children Retain Access to Preventative Mental Healthcare

On May 19, 2026, First 5 San Mateo County sent a letter to Senator Josh Becker and Assembly Member Diane Papan expressing strong support for First 5 Association's request to the legislative Budget Committee for these actions for preventative mental healthcare:

1. Increase appropriations for the Population-Based Prevention Fund by \$20 million to offset the loss of infant and early childhood prevention funding at the county level;
2. Clarify statutory eligibility to explicitly designate county First 5s as eligible applicants for CDPH BHSA Population-Based Prevention Funds; and,
3. Establish a funding set-aside for children ages 0–5 within the CDPH BHSA Population-Based Prevention Fund, ensuring this critical window of development is not overlooked.

(See Attachment 9.2)

Letter of Support: Youth in State Housing Bond

On June 3, 2026, First 5 San Mateo County signed onto a letter from Children Now addressed to Governor Newsom, Pro Tem Limon and Speaker Rivas urging them to include youth in state housing bond “which will increase the availability and accessibility of youth housing to help prevent the pipeline of youth homelessness to chronic adult homelessness.”

(See Attachment 9.3)

Letter of Support: SB 331 (Menjivar) – Let California Kids Hear Act

On June 16, 2026, First 5 San Mateo County submitted a letter of support to Honorable Mia Bonta, Chair of Assembly Health Committee, on SB 331 – Let California Kids Hear Act, which would require large-group health plans to cover pediatric hearing aids and related services for children. *(See Attachment 9.4)*

FIRST 5 CALIFORNIA & FIRST 5 ASSOCIATION UPDATES**First 5 Association Co-Sponsors Bill Focused on Ending Child Poverty**

“Child poverty in California rose from a historic low of 7.5% in 2021 to 18.6% in 2024 after pandemic-era supports ended but reversing that trajectory is within reach. First 5 Association of California proudly co-sponsors AB 1996 by Assemblymember Mia Bonta, which would establish a California Child Poverty Reduction Advisory Council with a mandate to cut child poverty in half over the next decade. First 5's inclusion on the council ensures the plan is grounded in early childhood expertise and shaped by local implementation experience across every county”.

Read the Press Release » [First 5 Association Co-Sponsors Bill Focused on Ending Child Poverty – First 5 Association](#)

COMMUNITY AND STATEWIDE EVENTS & UPDATES**All Five – Open House**

First 5 San Mateo County is sponsoring an open house hosted by All Five on July 11, 2026 from 10 am – 12 noon. The open house is open to public; there will be games, carnival snacks, arts and crafts, and much more! *See Attachment 9.5 for more info and to register.* All Five is a non-profit organization and a socio-economically diverse early learning program located in eastern Menlo Park, serving children and families with a play-based, nature-centered curriculum that fosters joy, curiosity, and community.

COMMUNICATIONS**Quarterly Newsletter**

On June 9, 2026, First 5 San Mateo County released its quarterly newsletter highlighting Pride month, oral health, and summer activities. Read the newsletter in the link below:

[Celebrating Pride Month, Summer Reading, Healthy Smiles, and Getting Ready for Kindergarten](#)

Social Media and Analytics Reports (See Attachment 9.6)



County Executive's Office

County Executive's Office

San Mateo County Board of Supervisors Approves \$10 Million Investment in Child Care

June 10, 2026

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REDWOOD CITY – The San Mateo Board of Supervisors yesterday unanimously [approved a resolution](#), sponsored by Supervisors Jackie Speier and Lisa Gauthier, dedicating \$10 million in

funding for two child care pilots.

The first pilot is a one-stop child care navigation portal that will allow parents to easily find providers, apply, and assess subsidy eligibility. The second pilot is a Tri-Share program that is a partnership among the County, employers, and parents. It's designed for working families making above the subsidy threshold, but not enough to afford child care.

"I am so excited and proud that San Mateo County is making a firm statement with this substantial investment: children count," Sup. Speier said. "Lack of affordable, accessible child care is hurting San Mateo County in ways we can no longer ignore. Working families are being crushed by costs that can easily exceed \$30,000 a year per child. Providers are struggling to connect with families due to fragmented, inefficient systems. And businesses are losing their workforce as the cost of care begins to outweigh the value of wages. These two pilot programs will help counter an estimated \$775 million loss in productivity a year and help more than 1,000 families reduce their child care cost."

"This initiative is a direct response to what we have consistently heard from our community," Sup. Gauthier said. "Families want quality childcare that is accessible, affordable, and meets their needs. By making it easier to find care and helping working families manage the cost, we are creating opportunities for parents to thrive, children to succeed, and our communities to remain strong."

"Affordable child care is essential infrastructure for a thriving community," County Executive Mike Callagy said. "These pilot programs will help families navigate a complex system, reduce financial burdens on working parents, and strengthen our local economy. I appreciate the Board's leadership in advancing solutions that support children, families, providers, and employers across San Mateo County."

Sup. Speier pointed out that neighboring counties have already made investments in child care and that it is time for San Mateo County to catch up. San Francisco passed a commercial rent tax in 2018 raising about \$146 million a year. Alameda County passed a half-cent sales tax in 2020 raising about \$150 million year. Sonoma County passed a quarter-cent sales tax in 2024 raising about \$30 million a year. And Santa Cruz passed a two-cent sales tax on sugary drinks that raises about \$1.3 million a year.

Leading up to the vote on June 9, Supervisor Speier and Gauthier held four town halls across the county to hear from parents and providers. The County Executive's Office started with a Request for Information to survey the landscape of available solutions, followed by a competitive Request for Proposals, evaluated by a panel of subject matter experts. They engaged with child care stakeholders, providers, and community partners to ensure the programs were designed to meet the real needs of San Mateo County families. Ultimately, staff recommended the tech company Tootris to administer both programs. The portal is scheduled to launch in the fall of 2026 and Tri-Share in January 2027.

Media Contacts

Katrina Rill
Office of Supervisor Jackie Speier
650-380-1951

Chris Hunter
Office of Supervisor Lisa Gauthier
650-363-4570



500 County Center
Redwood City, CA 94063
(650) 363-4000

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May 19, 2026

Senator Josh Becker
1021 O Street, Suite 6520
Sacramento, CA 95814

Assemblymember Diane Papan
1021 O Street, Suite 4220
P.O. Box 942849
Sacramento, CA 94249-0021

RE: Budget Request to Ensure Young Children Retain Access to Preventative Mental Healthcare

Dear Senator Becker and Assemblymember Papan,

On behalf of **First 5 San Mateo County**, I write to express our strong support for First 5 Association's request that the legislative Budget Committees take three actions:

1. Increase appropriations for the Population-Based Prevention Fund by \$20 million to offset the loss of infant and early childhood prevention funding at the county level;
2. Clarify statutory eligibility to explicitly designate county First 5s as eligible applicants for CDPH BHSA Population-Based Prevention Funds; and,
3. Establish a funding set-aside for children ages 0–5 within the CDPH BHSA Population-Based Prevention Fund, ensuring this critical window of development is not overlooked.

The **First 5 San Mateo County** operates in County of San Mateo as a Local Public Entity created by Proposition 10 in 1998. For more than 25 years, we have been committed to creating opportunities for all children in San Mateo County. To help ensure all families have what they need to thrive, we work broadly and proactively to create, support, and sustain the social, physical, and economic conditions needed for children's success.

First 5 San Mateo County has a strong history as a leader in co-funding infant and early childhood mental health (IECMH) services and supporting our network of infant and early childhood mental health providers locally. Currently, First 5 SMC receives \$1 million annually in Mental Health Services Act dollars to fund an array of services for young children, families, and providers in the early childhood mental health space. With the transition to the Behavioral Health Services Act, we anticipate losing this critical resource, despite continued advocacy at the local level.

The Behavioral Health Services Act (BHSA) separated the prevention and early intervention services previously combined under the Mental Health Services Act (MHSA). Under BHSA, early intervention services remain county-administered, while prevention funding moves to the new state-level population-based prevention fund administered by the California Department of Public Health (CDPH). This transition threatens to eliminate millions of dollars in prevention and early intervention funding currently supporting infant and early childhood mental health services statewide. Children ages 0–5 are particularly at risk: changes to BHSA priority population definitions mean that early

intervention funding for this age group will decrease, making access to prevention funding even more critical.

Prevention and Early Intervention (PEI) funding has supported group-based, community programs rather than individual clinical services. These programs are uniquely effective at reaching families from historically marginalized communities, including immigrant and low-income families of color. At-risk programs include:

- **Early Childhood Mental Health Consultation:** Pairs mental health consultants with child care providers and other adults who work with infants and young children.
- **Parent coaching and education models** (e.g., Triple P – Positive Parenting Program): Equips parents with strategies to promote social competence and self-regulation in children.
- **Developmental playgroups:** Specialist-led sessions for parents and children that promote development and social interactions.

These programs cannot be reimbursed through Medi-Cal, making BHSA prevention funding their only viable source of support.

The BHSA transition compounds several simultaneous funding losses: steep declines in county First 5 commission revenues, which have historically supplemented prevention and early intervention mental health programming, and the conclusion of California's Children and Youth Behavioral Health Initiative (CYBHI) grants in 2026. Together, these overlapping gaps create a perfect storm that threatens to dismantle essential early childhood mental health infrastructure across the state.

CDPH's final guidance states that prevention funds will be distributed to community-based organizations (CBOs) and tribes through competitive grants, which means local First 5s, as governmental agencies, will not be eligible to apply. First 5s have historically provided these services directly or through partnerships with CBOs. In smaller and rural counties, county First 5s are often the only agencies with the expertise and administrative capacity to respond to state RFPs, manage evaluations, and meet reporting requirements. Excluding First 5s from eligibility risks leaving rural communities without the organizational infrastructure needed to compete for these funds.

A general fund increase, combined with eligibility clarification and a targeted set-aside for ages 0–5, will protect local service infrastructure and ensure that upstream prevention and early intervention programs continue to reach California's youngest children and their families. Without action, gaps in funding will cause irreversible damage to the local systems built to serve them.

Sincerely,



Kitty Lopez
Executive Director



June 3, 2026

SUBJECT: Support for Including Youth in State Housing Bond

Dear Governor Newsom, Pro Tem Limón and Speaker Rivas,

We, the undersigned organizations, urge you to include youth in a state housing bond to combat homelessness and housing instability for California’s most vulnerable youth. By prioritizing building housing and supporting capital expenditures for acquiring and rehabilitating housing for youth, California will increase the availability and accessibility of youth housing to help stem the pipeline of youth homelessness to chronic adult homelessness.

Housing instability and homelessness significantly hinder the pursuit of higher education, meaningful employment, and self-sufficiency for transition aged youth. The California Budget and Policy Center reports: “Lack of stable housing seriously disrupts individuals’ ability to keep a job or get a job or to make sure that children are able to attend and focus on school. Homelessness exposes individuals to serious health risks and makes it difficult to take care of one’s health and access health care, and therefore homelessness can exacerbate chronic or acute health conditions.” These issues are even more acute for youth who are currently or formerly in foster care, youth experiencing homelessness, and youth under probation supervision as they transition to adulthood.

We must build a system rooted in healing — one that gives young people the support, stability, and opportunity they need to escape homelessness for good. Without meaningful action, we are effectively creating a permanent pipeline from systems of care and youth homelessness into chronic homelessness later in life.

The evidence is undeniable. Research shows that nearly half of people experiencing chronic homelessness first became homeless when they were young. Recent reports found that in San Francisco, 49% of adults experiencing homelessness first lost stable housing before the age of 25. In Los Angeles County, that number is 45%.

These numbers are more than statistics — they are a warning. When we fail to intervene early with trauma-informed and developmentally appropriate care, housing stability, and long-term support, we allow temporary crises in youth to become lifelong cycles of homelessness. Investing in healing-centered systems today is not only compassionate; it is essential to preventing chronic homelessness tomorrow.

Including youth in a state housing bond, which will increase the availability and accessibility of youth housing to help prevent the pipeline of youth homelessness to chronic adult homelessness. This must include allowing community-based non-profit organizations to be eligible for these funds so they can provide the necessary support to individuals who are homeless or at risk of homelessness through targeted and developmentally appropriate services. Invested in improving communities, these organizations are experts in identifying specific housing needs and gaps and coordinating efforts to support transition-aged youth as they transition to stable housing.

Our systems are failing to protect our young people and failing to set them up for success after they age out of the foster care system. Including youth in the state housing bond will address the ongoing need to develop housing to support current and former foster youth and youth experiencing or at risk of homelessness. We must increase housing stability and enhance the impact of California's investments in housing for youth by creating a dedicated funding source to combat youth homelessness. Funds will be used to develop housing specifically for youth experiencing homelessness.

Every community believes in supporting its children. We rally behind school programs, youth sports, and opportunities that help young people thrive. But we must also ask ourselves whether we are doing enough for the most vulnerable youth — those who do not have the safety, stability, and support of a caring family.

Today, far too many young people are surviving without a safe place to call home. They are sleeping in cars, in abandoned buildings, or moving from couch to couch with strangers. Others cycle through shelters designed for adults decades older than they are. These youth deserve more than survival; they deserve the stability, care, and opportunity to build a future with dignity and hope.

For these reasons, we urge you to prioritize youth in the state housing bond that allows public agencies and nonprofit community-based organizations with specific youth expertise to apply for the youth bond funds.

Sincerely,
The Undersigned Organizations



June 16, 2026

The Honorable Mia Bonta
Chair, Assembly Health Committee
1020 N Street, Room 390
Sacramento, CA 95814

RE: SB 331 (Menjivar) — Let California Kids Hear Act — SUPPORT

Dear Chair Bonta:

On behalf of **First 5 San Mateo County**, we are proud to support SB 331 (Menjivar), the Let California Kids Hear Act, which would require large-group health plans to cover pediatric hearing aids and related services for children.

California screens nearly every newborn for hearing loss, yet approximately 90% of private health plans still do not cover pediatric hearing aids. Families are often forced to pay thousands of dollars out of pocket during critical years of child development, delaying treatment or going without care altogether. This is a major gap in children's health insurance coverage that policymakers can address through SB 331.

Hearing loss in children is a developmental emergency. Early access to sound is essential for speech, language, literacy, educational success, social development, and long-term health outcomes.

The **First 5 San Mateo County** operates in the County of San Mateo as a Local Public Entity created by Proposition 10 in 1998. For more than 25 years, we have been committed to creating opportunities for all children in San Mateo County. We help ensure all families have what they need to thrive and we work broadly and proactively to create, support, and sustain the social, physical, and economic conditions needed for children's success. **First 5 San Mateo County believes that access to hearing aids should never depend on income or insurance status.**

SB 331 addresses concerns raised with prior proposals by limiting coverage to the large-group commercial insurance market. This targeted approach would help more children access care through their existing insurance coverage while reducing reliance on a state-funded workaround program that has struggled to reach families.

Currently 35 states already require some level of pediatric hearing aid coverage. California should not continue to lag behind while children lose critical developmental time.

For these reasons, we respectfully urge your SUPPORT of SB 331.

Sincerely,

A handwritten signature in blue ink that reads "Kitty Lopez". The signature is written in a cursive, flowing style.

Kitty Lopez
Executive Director
First 5 San Mateo County

cc: Members, Assembly Health Committee

Event sponsorship
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Five

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- RINCÓN DE CUENTOS
- MÚSICA

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REPORT FOR MAY 1, 2026 - MAY 31, 2026
FIRST 5 SAN MATEO COUNTY

MAY 2026 ANALYTICS OVERVIEW

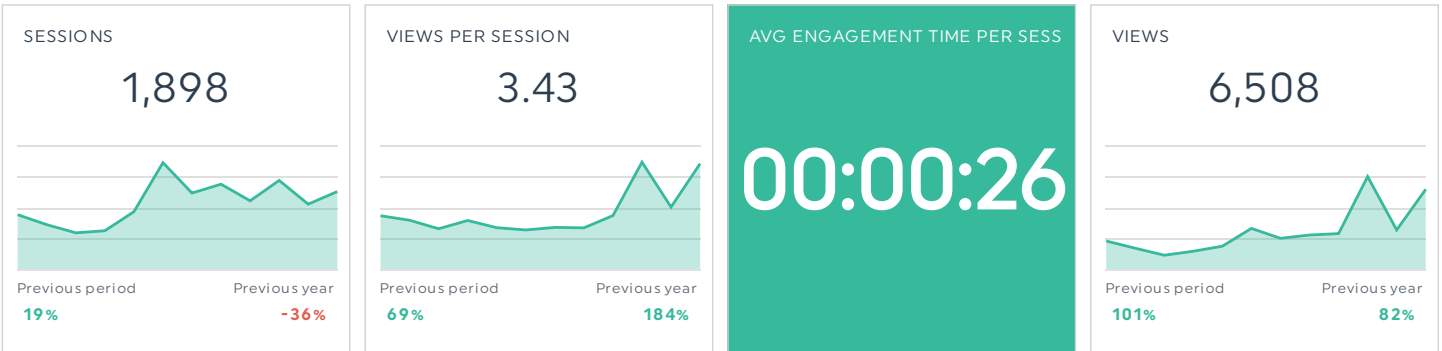
In May, First 5 San Mateo County's website saw significant growth from April, with views jumping 101% and visitors viewing more pages per visit (up 69%). We launched a refreshed homepage mid-month on May 20, likely contributing to increased traffic. The homepage was most popular with 784 views, followed by Baby Bonus (176 views), Staff (129 views), and the Spanish "Protective Factors" page (95 views).

Mental Health Awareness Month was a key content focus this month, with posts about caregiver well-being and child development getting strong reactions. On Facebook, a post about mental well-being received 400 impressions, the highest of the month. Instagram had a quieter month with impressions down 27% from April. LinkedIn saw impressive growth with 1,732 views (up 320% from April), especially for posts about community partnerships and the Executive Director opening.

Keep prioritizing:

- Timely content tied to awareness months and community events, which consistently drives engagement

WEBSITE ANALYTICS



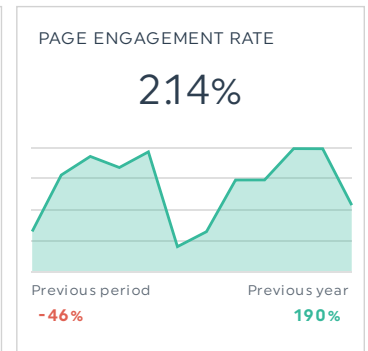
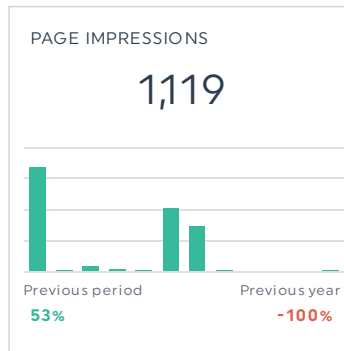
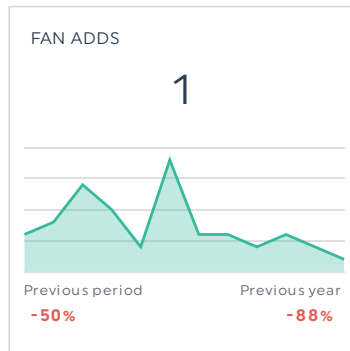
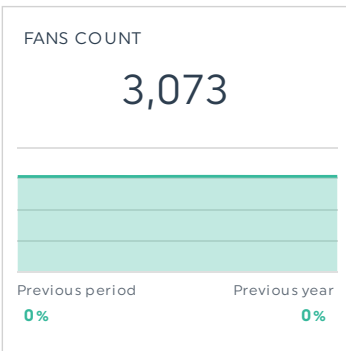
TOP VIEWS BY PAGE

Page Address	Views
/	784
/baby-bonus/	176
/staff/	129
/es/Los-5-factores-de-protección-por-los-que-importan-los-primeros-cinco-años/	95
/who-we-are/	89
/commission/	73
/funding-opportunities/	71
/resources/	65
/contact/	57
/our-work/	52
/news-updates/	52
/past-commission-meetings/	51
/list-of-support-services/	50
/baby-bonus-parent-guide/	48
/for-parents-families/	42
/home-update-2026/	41
/supporting-smc-families/	39







EVENT COUNT	
Event Name	Event Count
page_view	6,508
user_engagement	3,048
session_start	1,907
first_visit	1,473
scroll	990
click	129
file_download	101
view_search_results	16
video_progress	5
video_start	2

TOP TRAFFIC SOURCES	
Session Default Channel Grouping	Sessions
Direct	988
Organic Search	772
Referral	95
Organic Social	26
Unassigned	17
Email	1

FACEBOOK INSIGHTS



TOP POSTS BY ENGAGEMENT TYPE (WITH IMAGE)

Post With Image	Post Comments	Post Shares	Total Reactions
 <p>Happy Mother's Day from First 5 San Mateo County! Your love, dedication, and nurturing spirit make a world of difference in the lives of our youngest community members. First 5 San Mateo County is proud to be your partner in...</p>	0	0	2
 <p>May is Mental Health Awareness Month! What does mental health mean for young children? Mental health is not just for adults. From birth, babies and young children are building the social and emotional foundations that shape their...</p>	0	1	1
 <p>@San Mateo County Libraries has a great collection of AANHPI children's books to explore with your little one this month! The list features 12 titles including "Any Day With You," "Eyes That Kiss in the Corners," "When You Trap a Tiger," and...</p>	0	0	1
 <p>As parents and caregivers, prioritizing your own mental health is not just self-care. It's an essential part of supporting your family. When you're well, your children thrive. Find insights and resources to help you navigate your mental...</p>	0	1	1
 <p>Happy AANHPI Heritage Month! Celebrate the history and culture of Asian Americans, Native Hawaiians, and Pacific Islanders with your little one through stories and play. @PBS Kids has a free collection of videos celebrating AANHPI...</p>	0	0	0
 <p>True or false: A parent's mental health has no effect on their young child's development. False! A caregiver's emotional well-being directly shapes a child's social and emotional development. When parents and caregivers are supported,...</p>	0	0	0

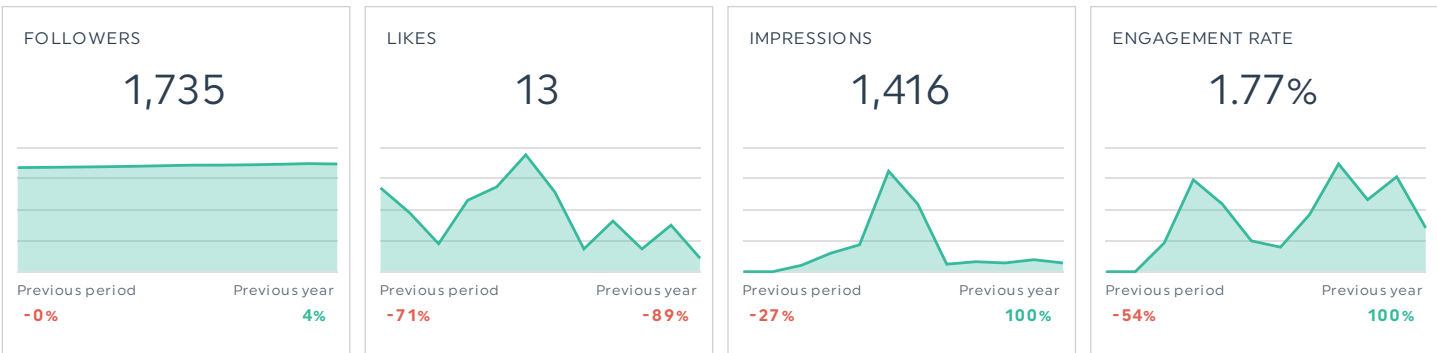
TOP POSTS BY ENGAGEMENT

Post	Engagement
Caring for your mental well-being plays a vital role in yo...	4
☒ We need YOUR input! Our partners at Family Resource...	2
As parents and caregivers, prioritizing your own mental ...	2
@San Mateo County Libraries has a great collection of A...	2
Happy Mother's Day from First 5 San Mateo County! You...	2
May is Mental Health Awareness Month! What does ment...	2
Happy AANHPI Heritage Month! Celebrate the history an...	1
True or false: A parent's mental health has no effect on ...	0

TOP POSTS BY IMPRESSIONS

Post	Post Impressions
Caring for your mental well-being plays a vita...	400
As parents and caregivers, prioritizing your ow...	211
Happy Mother's Day from First 5 San Mateo C...	97
@San Mateo County Libraries has a great coll...	66
May is Mental Health Awareness Month! What ...	58
Happy AANHPI Heritage Month! Celebrate the...	38
True or false: A parent's mental health has no...	34
☒ We need YOUR input! Our partners at Famil...	19

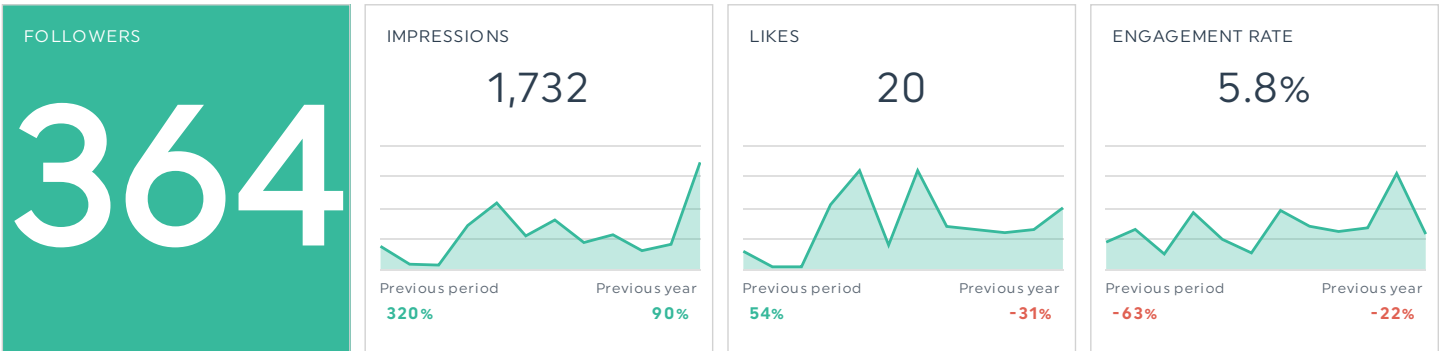
INSTAGRAM INSIGHTS



ENGAGEMENT BY POST (WITH IMAGE)

Post With Image	Likes	Comments	Engagement
Caring for your mental well-being plays a vital role in your child's growth and resilience. Whether you're navigating stress, anxiety, or just the everyday challenges of parenting, you don't have to do it alone. Visit the link in bio for resources to support your mental health journey.	4	0	4
May is Mental Health Awareness Month! What does mental health mean for young children? Mental health is not just for adults. From birth, babies and young children are building the social and emotional foundations that shape their development for life. Visit the link in bio to learn what	3	0	4
True or false: A parent's mental health has no effect on their young child's development. False! A caregiver's emotional well-being directly shapes a child's social and emotional development. When parents and caregivers are supported, children are better able to build the secure attachments they	3	0	3
As parents and caregivers, prioritizing your own mental health is not just self-care. It's an essential part of supporting your family. When you're well, your children thrive. Visit the link in bio for insights and resources to help you navigate your mental health journey. #MentalHealthMonth	2	0	2
@smclibraries has a great collection of AANHPI children's books to explore with your little one this month! The list features 12 titles including "Any Day With You," "Eyes That Kiss in the Corners," "When You Trap a Tiger," and more. All available to borrow for free at your local library. Find the	1	0	1
Happy Mother's Day from First 5 San Mateo County! Your love, dedication, and nurturing spirit make a world of difference in the lives of our youngest community members. First 5 San Mateo County is proud to be your partner in parenting! Thank you for everything you do for the next	0	0	0

LINKEDIN INSIGHTS



TOP POSTS BY ENGAGEMENT RATE

Post with image	Engagement Rate	Likes	Clicks
 <p>Are you a direct service professional working with children and families in San Mateo County? This one's for you. ☑️🗨️ Community Matters: Solving Systems Challenges Through Small Steps At our first CoP, you told us you want space to dig into real, systems-level challenges—and that's exactly what we'll do. Together, we will: → Map key challenges across the system → Build</p>	10.6%	8	19
 <p>At First 5 San Mateo County, we're proud to support our partners at Family Resource Center, San Mateo County \([AbilityPath](urn:li:organization:37265)\) as they plan their upcoming training programs and parent support groups. They're seeking input from families, providers, and professionals to make sure their programs truly reflect community needs. The survey is</p>	6.1%	5	2
 <p>First 5 San Mateo County is seeking its next Executive Director, a seasoned leader with a deep commitment to early childhood systems, community partnerships, and equitable outcomes for children and families. This is a meaningful opportunity to lead a well-established organization at the intersection of policy, community investment, and direct impact for</p>	5.1%	16	70



DATE: June 22, 2026
TO: First 5 San Mateo County (F5SMC) Commission
FROM: Kitty Lopez, Executive Director
RE: Committee Updates

Finance and Administration Committee Meeting – June 8, 2026

Commissioners: Claire Cunningham, Carla Boragno, Sylvia Espinoza, Hanish Rathod

Staff: Kitty Lopez, Khanh Chau, Emily Roberts

1. Review and Recommend Approval of F5SMC’s Long-Term Financial Plan (LTFP) FY2025-30 (FY25-26 Update)

Kitty Lopez provided background of Long-Term Financial Plan (LTFP) as a snapshot in time with financial information that continues to change and evolve; the Commission has the opportunity to review and approve an updated LTFP every year for State compliance requirement.

Kitty Lopez cited that F5SMC’s LTFP FY 2025-30 (FY25/26 Update) provides 5-year financial planning for the new strategic plan implementation SPIP FY 2025-30, Other Grant and Baby Bonus Grant acquisitions and executions. Kitty Lopez provided summary and key highlights including Tobacco Tax Revenue projections 62% of fiscal revenue with average 6% declining rate annually; while Other Grant Revenue increases to 38% of fiscal revenue compared to 10% of fiscal revenue in the previous 10 years. As for Appropriations, agency has projected 15% reductions in strategic planning implementation plan (SPIP) investments during period FY2025-30 compared to SPIP FY2020-25 actual spending (average \$3.052 M / year). Kitty also referred to the \$2M Reserves*, which includes \$1M Pension Liability Reserves and \$1M of 6-months Operational Reserves. These Reserves were approved by the Commission for the previous 9 years and has been set aside for its restricted uses. Admin Cost Rates are projected in the ranges of 10%-12% during period FY 2025-28 and increases to 15% -17% during period FY2028-30 due to conservative projections in Other Grants Revenue, which are projected \$1 M / year average or 65% lower than Other Grant Appropriations projections of \$2.970 M / year average for the period FY 2025-28. Kitty Lopez cited at the end of FY 2029-30, Ending Fund Balance after Restricted Fund will be \$2.514 M equal to 4.4 months of FY 2029-30 Total Operations.

Committee members reviewed LTFP, asked questions about the Measure K inclusion in revenue, and how the Fund Balance is spent down. Kitty Lopez responded that F5SMC is non-general fund department and the only Measure K revenue is funding from a few of the Supervisors’ discretionary funds to the Baby Bonus Program, therefore F5SMC is not impacted by the 5% spending cut of county measure K funding; F5SMC Fund Balance is committed for community investment

as per Commission approved strategic plan and to support strategic operations in leveraging new funding; whereas other Grant Fund Balance is a restricted fund balance as stipulated by outside funders. Committee members also asked what the COLA increases would be in the salaries and benefits projections. Staff responded that 5% COLA is projected annually in the updated LTFP. Committee members suggested the inclusion of major changes in the LTFP and reasons for changes.

Committee members reviewed and endorsed the approval of LTFP.

Next Finance and Administration Committee Meeting is on Monday October 19, 2026