



***December 7, 2022 COMMISSION MEETING
AGENDA PACKET ATTACHMENTS***

Attachments:

ITEM 4: Consent Agenda

a) October 26, 2022 Minutes (Draft)

ITEM 5: Memo and Draft Amendments: Shared Services Alliance

ITEM 6: Memo and Draft Amendment – Home Visiting Coordination

ITEM 8: Memo re: Commissioner Terms

ITEM 9: Memo re: Strategic Planning Process

**FIRST 5 SAN LUIS OBISPO COUNTY
CHILDREN AND FAMILIES COMMISSION**

COMMISSION MEETING MINUTES

October 26, 2022 (DRAFT)

Current Commissioners Present

Penny Borenstein, MD (Vice Chair)	SLO County Public Health Department
Linda Belch	SLO County Dept. of Social Services
Bruce Gibson	SLO County Board of Supervisors
Erica Ruvalcaba-Heredia, EdD	Community at Large
James Tedford, MD	Medical Representative (FAAP)
Alison Ventura, PhD	Community at Large
Bob Watt	Community at Large

Commissioners Absent/Excused

James Brescia, EdD (Chair)	SLO County Office of Education
Melinda Sokolowski	Child Care Planning Council

Staff Present

First 5 Staff: Wendy Wendt, Jason Wells, Misty Livengood
Commission Counsel: Natalie Frye-Laacke

Call to Order

Vice Chair Borenstein called the meeting to order at 3:03 p.m.

ITEM 1 – Commissioner Announcements and Updates

Commissioner Ruvalcaba-Heredia announced that the Promotores Collaborative now has a contract with SLOCOE for Mixteco language interpretation.

Commissioner Tedford announced that today is the memorial service for former Cal Poly President Warren Baker.

Commissioner Gibson announced that at the California State Association of Counties (CSAC) is expressing interest in potentially addressing the Legislature regarding First 5 sustainability.

Commissioner Ventura updated on several new studies related to infant feeding, and the related outreach to communities. She has shared findings of recent studies with partners at the

local WIC. She noted that she is available if there are groups that would benefit from learning about her work.

Commissioner Borenstein announced that she has been speaking out in favor of CA Proposition 31 – the flavor ban on tobacco products. She also commented on changes in motion with the County Public Health MCAH team – some retirements/resignations and new team members coming on board.

ITEM 3 - Public Comment – Items not on the agenda

None.

ITEM 4 (ACTION ITEM) - Consent Agenda

- a. Approve September 28, 2022 minutes
- b. Approve Q1 22-23 Financial Report

Public Comment: None

Commissioner Watt made a motion to approve the Consent Agenda. The motion was seconded by Commissioner Tedford and passed unanimously.

ITEM 5: Staff Reports

Misty Livengood, Communications and Outreach Officer, provided an update on the following activities:

- Hands on Heroes @ Work for the season are Carmel Naccasha LLC (October) and The Pad Climbing (November).
- The Atascadero Chamber of Commerce and SLO Chamber will be co-hosting a Family Friendly Workplace Practices workshop on November 15.
- SB 951 (expansion of Paid Family Leave benefits) was signed by Governor Newsom; law changes in 2025.
- First 5 messaging is currently focusing on Breast Cancer Awareness Month, Indigenous Peoples Day, Down Syndrome Awareness Month.
- First 5 CA has launched the “Dragon Song” – a bridge campaign before mobilizing the “Stronger Start” campaign in the coming year.
- First 5 SLO County has updated its Program Flyers in English and Spanish.
- Quality Counts Kick-off was recently held at the SLO Children’s Museum.
- Spotlitged First 5 Event Sponsorship – Downtown Association Halloween Parade (First 5 staffer Kris Roudebush presented the team as a costume contest judge).

Executive Director Wendy Wendt provided the following updates:

- Strategic Planning Season is on the horizon. The current Plan ends June 30, 2024.
- The We Are the Care Initiative is shifting administrative homes from First 5 to the Child Care Planning Council. The exception is the Cross Sector Collaboration Task Force, which will move into an advisory role with the SLO Chamber Family Friendly Workplace Program. First 5 staff will continue to stay involved, especially in advocacy activities.
- Commissioners have requested an update on County-allocations of ARPA funds toward child care. Staff and partners anticipate presenting on this and also the Public Sector Child Care Study at the December 7, 2022 Commission meeting.
- The First 5 CA Commission will be meeting tomorrow; one of the agenda items is recommendation to fund IMPACT for an additional four years under the program name IMPACT Legacy.
- First 5 Fresno County is lead agency on a regional grant from First 5 CA focused on funding for refugee families and their young children settling in California. SLO4Home, a new nonprofit in San Luis Obispo County, is a subcontractor on the initiative, and will use the funds to assist with several families from Afghanistan that they are assisting with resettlement on the Central Coast.
- The Help Me Grow Steering Committee is planning a second Pediatric Town Hall in early 2023; the focus will be on mental health in the context of early childhood.
- CA Proposition 31 – the Flavor Ban on tobacco products – if passed will negatively impact First 5 tobacco tax revenue. Updated revenue projections are expected in the coming weeks following the November 2022 election.

Discussion:

Commissioner Gibson commented that the \$3 million in ARPA funds for child care is insignificant in light of the long-term challenges within the sector. Now is the time to plan toward a more sustainable approach. Commissioner Watt underscored the importance of advocacy on this issue.

Ms. Wendt offered an example in the City of SLO whereby a pilot investment in start-up funds for new family child care businesses has now become an evergreen program. This is a good model of local public sector support set up in an ongoing way.

Public Comment: None

ITEM 5 (ACTION ITEM): Commission Review, Accept FY2021-22 Annual External Audit

Ms. Wendt introduced this item. First 5 SLO County has contracted for a third year with Moss Levy Hartzheim (MLH). A three-person team from MLH was on-site at First 5 for 1 ½ days. Firm partner Alex Hom was in attendance at the Commission meeting to make a brief report and answer questions. Ms. Wendt shared that the audit included no compliance findings and no internal controls findings.

She briefly summarized the agency's financial position at the end of FY 21-22, including an increase in revenue from the prior year largely due in part to continued underspending by several funded programs that were forced to delay launch, contract, alter or pause services in

the midst of COVID. In part this continued challenge has been associated with workforce shortages.

Mr. Hom concurred with Ms. Wendt's summary, and commented that the audit process was straightforward and clean. He commended Ms. Wendt and her staff for their thoroughness, helpfulness and overall accuracy.

Mr. Hom made note of several changes in this year's audit. There is new required language in the Opinion letter. The multi-year office lease now must be included as a long-term liability. An unusually dramatic dip in the global markets at the end of the fiscal year necessitated a discounting of the Commission fund balance by 3%. Net pension liability was lower than prior years because it was based on FY20-21, which was a good investment year. Next year's audit will show a swing back upward in pension liability, given the market drop of FY21-22.

No Discussion.

Public Comment: None.

Commissioner Gibson made a motion to accept the External Audit. The motion was seconded by Commissioner Ventura. Motion passed unanimously.

ITEM 6 (ACTION ITEM): Public Hearing: Commission Review and Approval of FY2021-22 Annual Report to First 5 California

Mr. Wells outlined programmatic and fiscal data to be submitted to First 5 CA by October 31, 2022 in compliance with state Annual Report requirements. He emphasized that the Report exercise gives us a chance to celebrate the work of the staff, families, children in our community. In addition, our numbers contribute to a state report, part of telling a statewide story.

He noted that the annual report information contributed to First 5 CA through this process is somewhat distinct from the evaluation work being performed by the local consultant team (Becca Carsel et al).

Commissioner Borenstein asked why reported figures show almost twice the number of 3-5 year olds reached as 0-3 year olds. Mr. Wells offered to review the raw data from the report and provide clarification at a later date.

Mr. Wells also summarized the County Highlights narrative submitted to First 5 CA as part of the report. Topics include the Child Care Study, ARPA funding, Family Friendly Workplaces Partnership with the SLO Chamber of Commerce, Basic Needs Support and findings from the MHSA funded 3 by 3 Developmental Screening Partnership.

Public Comment: None

Commissioner Tedford made a motion to approve First 5 SLO County's FY2021-22 State Annual Report submission. The motion was seconded by Commissioner Ruvalcaba-Heredia and passed unanimously.

ITEM 7: Partner Update – County Oral Health Program

Barb Morrow, Oral Health Program Manager with the County Public Health Department, provided an update on activities. She has been with the program for 4 ½ years, before which she worked as a dental hygienist. She summarized the following topics:

- Dental screenings – Several Oral Health program staff are also dental professionals. The team includes bilingual staff. Early childhood screening sites include preschools, WIC (pre-COVID). Last year the program screened 500 children.
- Oral Health Education and links to dental homes.
- Medi-Cal covers dental during pregnancy (just presented a SMILE CA video to WIC staff)
- Kindergarten Oral Health Assessment (KOHA) – The Oral Health Program staff provide a Handbook, presentations to school nurses, help school nurses to input data into a database. Templeton School District is an example of a district that is particularly motivated to get this work done.
- Give Kids a Smile (Central Coast Dental Society)– launched in 2003, provides low-income children with a free oral health care visit. Now every kid flagged at a Give Kids a Smile event gets referred to the Oral Health Program.
- During COVID, severe dental cases increased.
- CCDS is working with OHP to raise funds for family stipends.
- Dentistry at school – pilot project with Lucia Mar Unified School District; A Registered Dental Hygienist in Alternative Practice (RDHAP) uses mobile equipment. This project is reinvigorating the Virtual Dental Home concept.
- Community Outreach – Food Bank distributions, low-incoming housing sites, farmers markets. The Oral Health Program staff has teamed up with vaccine clinics for outreach.

Discussion:

- Commissioner Belch praised Ms. Morrow for the excellent presentation.
- Commission Gibson commented that it appears safe to say that every child in our county has at least one screening opportunity by kindergarten. For those challenged to get to a dental home, what is the hurdle? Answer: Parent education is the biggest – convincing parents to take their kid by “first tooth/first visit.” Provider shortage is also a factor. Since Ms. Morrow started in her current role four years ago, four new providers have joined the community, including a pediatric dentist, a general dentist who takes children, and 2 RDHAPs.
- Commissioner Tedford commended a great collaboration between the County Oral Health Program and the Tolosa Children's Dental Center. It is indeed a challenge attracting pediatric dentists to the area. He complimented Ms. Morrow personally for her stellar leadership.

- Commissioner Borenstein asked if the new Oral Health Program case management link to Give Kids a Smile a better option than in prior years? Answer – yes; this approach is more efficient than before. It is an example of modest First 5 investment yielding significant results.

Public Comment: NONE

ITEM 8: 3 x3 Evaluation Report – Lessons Learned and Next Steps

Ms. Wendt introduced this item. Evaluation Consultant Becca Carsel then presented her report summarizing lessons learned and next steps following the sunset of the MHSA-funded 3 by 3 Developmental Screening Partnership.

Lessons Learned fall into three categories:

- Screening Methods/Tools
- Clinic Adoption
- Referrals
- Parent Engagement

Next Steps focus on four areas:

- Communicating 3 by 3 findings and accomplishments
- Strengthening the new Help Me Grow Centralized Access Point
- Engaging Families and Early Education Providers
- Pursuing Policy and Systems Change Work

Questions

- Commissioner Belch asked whether there were pediatricians not performing screenings before the project? Answer – Many traditionally completed simple yes/no check lists without accompanying guidance. Some don't screen at all. Ms. Wendt acknowledged that comprehensive screenings are time-consuming, and providers need support designing expeditious/streamlined work flow options.
- Commissioner Gibson asked about the relationship between screening frequency and insurance reimbursement. Answer – MediCal reimburses more than private. Gibson suggested this might be an opportunity for increased advocacy at the state level, perhaps through the Insurance Commissioner's office?
- Commissioner Ruvalcaba-Heredia asked if all parents get guided support completing the ASQ? Answer – more at CHC with Health Educator than at the private clinic (Bravo Pediatrics).
- Commissioner Gibson commented that this work should be shared with the County Board of Supervisors; it could provide context/detail to inform development of its Legislative Platform.
- Commissioner Belch asked for clarification on whether there is use of a shared database. Answer – as part of the pilot, we were able to use Brookes Publishing ASQ online database to pool deidentified data. In general, HIPAA is naturally a deterrent.

- Commissioner Ruvalcaba-Heredia asked what the most common needs identified are in the screening process. Answer – speech and behavioral health.

Public Comment: None.

ITEM 9: MyChildCarePlan.org

Shana Paulson, Director of CAPSLO's Child Care Resource Connection, introduced the State child care resource website. This tool is designed as a consumer information website for families and child care businesses. It provides information on licensed programs – including hours of operation, ages, openings, program approach, access to Community Care Licensing status and reports. The State of CA is putting out messaging to raise awareness about the site.

Commissioner Watt pointed out that school parent-teacher conferences coming up. This would provide a good opportunity to advertise; or with Monday homework packets.

Commissioner Ruvalcaba-Heredia inquired if there will be a brochure with a QR code. Ms. Paulson responded that this is forthcoming.

Ms. Wendt asked what percentage of licensed providers are listed on the site. Answer: 95%. The task now is to build out program profiles.

Public Comment: None

ITEM 10: Future Agenda Items

ARPA funding
Subsidized Child Care

ITEM 11: Adjourn

5:32 p.m.

To: First 5 Commission

From: Staff

Date: December 7, 2022

Re: Item 5: Authorize First 5 SLO County to: 1. Enter into an Amended Agreement with First 5 California to Serve as Fiscal Lead for Shared Services Alliance (SSA) Pilot for Early Learning and Care Grant, and 2. Authorize a related amendment to the SSA Contract with CAPSLO.

Recommended Action

Staff recommends the Commission Authorize First 5 SLO County Executive Director to sign: 1. An Amended Agreement with First 5 California over three fiscal years (2021-22 through 2023-24), and 2. A related amendment to the Contract with Community Action Partnership of San Luis Obispo County (CAPSLO) for Coordination of SSA Services through June 2024.

Background

On August 19, 2020, The First 5 California (F5CA) Commission approved funding from IMPACT 2020 to support the startup of Shared Services Alliances (SSA) in strategic areas of the state to support state infrastructure development. F5CA defines SSA as “a leadership and support framework that includes both pedagogy and business operations, with the power to transform the workforce and the quality of services for children, particularly those for whom quality early learning and care (ELC) can narrow the achievement gap.”

Members of the SLO County Quality Counts Consortium teamed up to develop and submit a proposal in response to a Request for Applications, released by F5CA in summer 2021. On September 8, 2021, First 5 CA notified staff that it had been chosen for an award of \$250,000 and a contract would be forthcoming.

On September 23, 2021 the Commission Authorized First 5 SLO County Executive Director to Enter into an Agreement with First 5 California to Serve as Fiscal Lead for Shared Services Alliance Pilot for Early Learning and Care Grant. After a delay at the State, First 5 SLO County staff received and signed an SSA agreement with First 5 CA dated March 1, 2022. On March 23, 2022, the Commission approved a contract with Community Action Partnership of SLO County for Shared Services Alliance Coordination Services.

Because of the original delay getting contracts approved by First 5 CA, in August of 2022 the State offered SSA contractors a one-time no-cost one-year extension. The extension does not increase the budget but adds 12 months for implementation of services and supports. First 5 Staff and CAPSLO have agreed to accept the extension offer.



Amended Contract language is currently under development by F5 CA and is anticipated to be sent to First 5 SLO County in the coming weeks. Contingent upon receipt of the approved one-year extension contract from First 5 CA, First 5 SLO will amend the CAPSLO SSA contract to be extended by one year.

Fiscal Impact

The amended agreements with First 5 CA and CAPSLO extend each by one-year for completion by June 30, 2024. The total allocation of SSA funds to First 5 San Luis Obispo County is unchanged and remains \$250,000. \$14,054 of these funds will support First 5 SLO County staff involvement in the project. The remaining \$235,946 will be subcontracted to CAPSLO for program implementation.

First Amendment to Contract for Community Action Partnership of SLO County

This First AMENDMENT to Contract is entered into on December 7, 2022, by and between the Children and Families Commission of San Luis Obispo County, a political subdivision of the State of California, pursuant to Health and Safety Code section 130140.1 (“the Commission”), whose address is 3220 South Higuera Suite 232, San Luis Obispo, CA 93401 and Community Action Partnership of San Luis Obispo County, Inc., a California corporation, (“the Contractor”),

WHEREAS, the parties to this First Amendment entered into a Contract for Services on April 8, 2022 (hereinafter “Original Contract”) for Shared Services Alliance services; and

WHEREAS, the original contract is scheduled to end June 30, 2023; and

WHEREAS, upon mutual agreement of the Commission and Contractor, the parties wish to extend the term of the Original Contract by one year to end June 30, 2024; and

WHEREAS, this extension is subject to the same terms, services deliverables and conditions made under the original Contract;

NOW THEREFORE, the parties agree as follows:

- A. The total amount payable to Contractor shall not exceed \$235,946 for fiscal years 2022-2024, in accordance with Exhibit B-A1 attached hereto and incorporated herein by this reference.
- B. Exhibit B of the Original Contract is hereby deleted and replaced, in its entirety, with Exhibit B-A1 (Attached).
- C. All other terms and conditions of the Original Contract shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date first set forth above.

Concurred in by the Executive Director of the Children and Families Commission of San Luis Obispo County.

By: _____
Wendy Wendt, Executive Director Date

CHILDREN AND FAMILIES COMMISSION OF SAN LUIS OBISPO COUNTY

By: _____
James Brescia, Chairperson Date

Authorized by Commission Action on: _____.

APPROVED AS TO FORM AND LEGAL EFFECT BY LEGAL COUNSEL FOR THE COMMISSION:

APPROVED AS TO FORM AND LEGAL EFFECT BY LEGAL COUNSEL FOR THE COMMISSION:

Natalie Frye-Laacke

By: _____
Natalie Frye-Laacke, Counsel for Commission Date

CONTRACTOR:

By: _____
Elizabeth "Biz" Steinberg, Executive Director Date
Community Action Partnership of SLO County, Inc.

Exhibit “B-A1”

Budget

	Year 1	Year 2	Year 3	Total
I. PERSONNEL				
Salaries	\$16,872.73	\$49,471.00	\$47,995.00	\$114,338.73
Benefits (Taxes/Health Ins/WC)	\$4,099.82	\$13,630.00	\$13,279.97	\$31,009.79
Consultant		\$5,000.00		\$5,000.00
Subtotal	\$20,972.55	\$68,101.00	\$61,274.97	\$150,348.52
II. OPERATING				
Automated System		\$11,000.00	\$11,000.00	\$22,000.00
Enrollment		\$4,400.00	\$4,400.00	\$8,800.00
Program Supplies		\$2,500.00	\$3,000.00	\$5,500.00
Stipends		\$11,000.00	\$16,000.00	\$27,000.00
NAEYC Subscription		\$300.00		\$300.00
Job Board Costs				-
Rent & Utilities		\$1,500.00	\$1,620.00	\$3,120.00
Travel		\$700.00	\$700.00	\$1,400.00
Subtotal	\$0.00	\$31,400.00	\$36,720.00	\$68,120.00
III. INDIRECT				
Indirect @ 8%	\$1,677.80	\$7,960.08	\$7,839.60	\$17,477.48
Subtotal	\$1,677.80	\$7,960.08	\$7,839.60	\$17,477.48
Total	\$22,650.35	\$107,461.08	\$105,834.57	\$235,946.00

Budget Narrative

I. PERSONNEL

Children Services Manager/- 0.08 FTE

Management and supervision will coordinate and oversee contract administration, activities and personnel. This includes but is not limited to data collection and analysis, representation of SSA Network at local and state forums, coordination with SLO QC, outreach and retention, and the provision of system-level support for SSA Network, re-establishment of peer mentor program, job board and substitute pool development.

CCRC Specialist / Coach – 0.75 FTE

Bilingual / biliterate position recruits, works with programs to develop SSA Network Member Improvement Plans, trains, coaches, and supports participants. This position will be responsible for gathering baseline data, supporting aligned professional development with community partners, supporting reflective evaluation of participant progress toward goals, and distributing resources. Responsible for keeping manager/supervisor and stakeholders apprised of trends, needs, successes, challenges and opportunities with a focus on sustainability and meaningful support.

Fringe benefits include payroll taxes at a rate of 7.65%, health insurance which is allocated per hour each employee spends in the program based on CAPSLOs annual Employee Insurance. Includes Workers Compensation which is built in at CAPSLOs current rate per salary paid.

Consultant = \$5,000.00

Year 2 - \$5,000

Consultant: Specialized business training and coaching through the Mission Community Services Corporation, Women's Small Business Center.

II. OPERATING

Automated System: Reimbursement for costs of automated system to support enrollment, fee collection, expense tracking and revenue tracking. May include costs for an automated system to improve parent communication. Systems range from \$9 monthly per program to \$25 monthly per program. System selection will be made based on stakeholder input and SSA Network participant preferences.

Recruitment and Enrollment Support: Materials to support full program enrollment for participating SSA Network programs.

Program Supplies: Resources to support training and coaching.

Stipends: Stipends for SSA Network participating programs will align with SLO QC stipend formulas which are based on participant investment in professional development and improvement through training, coaching and networking. Stipends for peer mentors in support of SSA Network participants will align with a county-adopted stipend structure determined through stakeholder input.

Membership: NAEYC membership, estimated at \$30 annually per ELC professional, purchased to create participant access to broader ELC community and group insurance benefit plans.

Job Board and Substitute Pool Implementation and Marketing: Resources to build a job board and substitute pool accessible to local programs and ELC job seekers.

Rent: The office for CAPSLO – Child Care Resource Connection is located at 805A Fiero Lane, San Luis Obispo. The rent allocation is based on the square footage of office space used for the assigned staff.

Utilities: Cover the costs for the program’s office. Utilities include: gas, water, trash, and electricity.

Travel/Mileage: Local mileage to SSA Network programs for materials delivery and consultation as appropriate. Local mileage is reimbursed at the agency approved rate to all employees who must use their personal vehicle to conduct business (i.e., recruitment, attend meetings, training sessions, participating site program visits).

III. INDIRECT: Indirect: Community Action Partnership of San Luis Obispo County, Inc. (CAPSLO) charges are 8% of total expenditures based on our federally approved indirect cost rate.

To: First 5 Commission of San Luis Obispo County

From: First 5 Staff

Date: December 7, 2022

Re: Item 6: Approval: Contract Amendment with County of San Luis Obispo (Public Health Department) for Home Visiting Coordination

Recommended Action

It is recommended that the Commission approve an amended contract with County of San Luis Obispo Public Health Department (COSLOPHD) for Home Visiting Coordination.

Background

On Tuesday August 3, 2021, First 5 released a Request for Proposals (RFP) inviting child and family centered service providers to submit applications for funding to address one or more of the three focus areas in the First 5 FY 20-24 strategic plan: Child Health & Development, Early Learning, Resilient Families. The intent of this “First 5 Thrive” RFP was to solicit “big idea” proposals that create or expand significant value to the local system of helping young children and their families thrive.

A total of five proposals were received by the September 17, 2021 due date. A Proposal Review Committee agreed on a recommendation to fully fund the proposal for Home Visiting Coordination from County of San Luis Obispo Public Health Department.

On October 28, 2021, the Commission approved a contract for Home Visiting Coordination with County of San Luis Obispo Public Health Department for \$935,000.

The goal of this project is to create a unified coordinated, screening/assessment and referral system of care for home visiting programs in SLO County. A related goal is the strengthening of a coordinated Continuity of Care Model for families with children prenatal to five years old.

The first year (8 mos) of the project saw progress in the development of a strengthened and coordinated model of care. The Project Manager (PM) created and maintained a Home Visiting Coordination Team consisting of several partner HV agencies including First 5. Additionally, PM surveyed and interviewed nearly all agencies performing home visiting services for families with young children. Many of these agencies joined the newly formed Home Visiting Advisory Committee to further establish a coordinated system of care. COSLOPHD identified potential referral data systems (e.g., Client Track, Apricot, Persimmony, Unite Us) and had initial conversations with several of them.

Since the approval of the contract, several personnel changes within the program and department have shifted both the approach and personnel involved. These changes necessitate an amendment to the budget and an elaboration of the scope of work.

Amended Contract

During the first year of this program (Nov 2021-June 2022), COSLOPHD was able to use funds from a *First 5 CA* home visiting grant to cover all the personnel and operating expenses. Therefore, no First 5 SLO County funds were used for FY 21-22. Because of this First 5 Staff requested amended budget to adjust for the unspent funds.

In the original contract, the budget was \$935,000 through June 30, 2024. The amended budget is \$612,206. An overall reduction/savings in the budget of \$322,794.

The amended budget reduces funding for the proposed electronic database. COSLOPHD has selected a local database platform, Octavia, which does not require a licensing fee and will only require funding for training and implementation. Octavia is a critical piece of the County Health Agency's Whole Person Care Program and is being supported by the Health Agency's Health Access Division. Because it is being developed locally, Octavia has some features that are expected to be particularly useful to local home visiting staff. Octavia developers have created an electronic version of the local 815 Informed Consent document. This means that rather than relying on a physical informed consent document, home visitors will be able to complete the electronic equivalent of the 815 in the field with their clients, allowing clients to select which agencies have access to which information. It also means that any updates to the electronic 815 in the field by any provider with their client will be automatically saved into Octavia and will be accessible by other providers.

The amended budget continues to support personnel and operating costs. It adds funding to purchase laptops and Wi-Fi devices for COSLOPHD and CAPSLO home visiting staff, so they can integrate use of Octavia and the electronic informed consent form.

The revised budget also includes funding to support costs to attend HV Conference for PH, CAPSLO and other key community partners, a Quarterly Lunch and Learns for home visitors and community partners, and a local 1-Day Home Visiting Symposium.

The amended budget continues a subcontract with CAPSLO, a major county provider of home visiting services (Early Head Start, Family Preservation), to establish a deeper collaborative partnership in this endeavor through support for dedicated staff time, training and travel related to work on the project.

The elaborated goals for this revision are to:

- Build a strong and thriving network of family-centered home visiting providers across agencies who work closely together to meet the complex needs of home visiting clients;
- Use this network to improve families' experiences of home visiting services, reduce duplication of services, and improve outcomes for families;
- Identify best practices in the area of provider and family collaboration including collaborative case planning, data-sharing, and shared learning opportunities;
- Develop policies and procedures that will sustain collaborative home visiting over the long term; and
- Implement a shared database for enhancing family-centered practice and building sustainability into cross-agency collaboration.

First Amendment to Contract for Community Action Partnership of SLO County

This First AMENDMENT to Contract is entered into on December 7, 2022, by and between the Children and Families Commission of San Luis Obispo County, a political subdivision of the State of California, pursuant to Health and Safety Code section 130140.1 (“the Commission”), whose address is 3220 South Higuera Suite 232, San Luis Obispo, CA 93401 and County of San Luis Obispo (“the Contractor”), providing Universal Home Visiting services in San Luis Obispo County,

WHEREAS, the parties to this First Amendment entered into a Contract for Services on October 28, 2021 (hereinafter “Original Contract”) for Universal Home Visiting services; and

WHEREAS, upon mutual agreement of the Commission and Contractor, the parties wish to amend the terms of the Original Contract; and

WHEREAS, the Original Contract provided for up to \$935,000 in compensation to Contractor; and

WHEREAS, due to cost savings from a related home visiting grant from First 5 CA, the contractor did not use the First 5 SLO County funding allocated for FY 21-22 spending; and

WHEREAS, as a result of this underspending, Staff requested the Contractor submit an adjusted budget for the remaining two years of funding;

WHEREAS, the adjusted budget, Exhibit B-A1 shall not exceed \$647,206; and

WHEREAS, related additional narrative which elaborates on and clarifies the Scope of Work was submitted for greater understanding of services and deliverables; and

WHEREAS, this additional narrative is captured in Exhibit A-A1; and

WHEREAS, this amendment is subject to the same terms, services deliverables and conditions made under the original Contract;

NOW THEREFORE, the parties agree as follows:

- A. Exhibit A-A1(Attached) is hereby added and incorporated by reference.
- B. The total amount payable to Contractor shall not exceed \$612,206 for fiscal years 2022-2024, in accordance with Exhibit B-A1 attached hereto and incorporated herein by this reference.
- C. Exhibit B of the Original Contract is hereby deleted and replaced, in its entirety, with Exhibit B-A1.
- D. All other terms and conditions of the Original Contract shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date first set forth above.

Concurred in by the Executive Director of the Children and Families Commission of San Luis Obispo County.

By: _____
Wendy Wendt, Executive Director Date

CHILDREN AND FAMILIES COMISSION OF SAN LUIS OBISPO COUNTY

By: _____
James Brescia, Chairperson Date

Authorized by Commission Action on: _____.

APPROVED AS TO FORM AND LEGAL EFFECT BY LEGAL COUNSEL FOR THE COMISSION:

Natalie Frye-Laacke

By: _____
Natalie Frye-Laacke, Counsel for Commission Date

CONTRACTOR:

RITA NEAL
COUNTY COUNSEL

By: _____
County Counsel Date

COUNTY OF SAN LUIS OBISPO, A Public Entity in the State of California

By: _____
Chairperson, Board of Supervisors Date

ATTEST

By: _____
County Clerk and Ex-Officio Clerk
of the Board of Supervisors

Elaborated Understanding of Scope of Work for SLO Thrive Home Visiting Coordination Grant

The overarching theme for this revision is enhancing interagency relationships and coordinated practices so that families feel supported by home visitor collaboration rather than confused by having multiple interactions with providers who are disconnected from each other. Building a culture of collaboration and support amongst providers across home visiting programs and across agencies will require significant change management.

Budget Revision Goals

The goals for this revision of the SLO Thrive Home Visiting Coordination Grant are to:

- Build a strong and thriving network of family-centered home visiting providers across agencies who work closely together to meet the complex needs of home visiting clients;
- Use this network to improve families' experiences of home visiting services, reduce duplication of services, and improve outcomes for families;
- Identify best practices in the area of provider and family collaboration including collaborative case planning, data-sharing, and shared learning opportunities;
- Develop policies and procedures that will sustain collaborative home visiting over the long term; and
- Implement a shared database for enhancing family-centered practice and building sustainability into cross-agency collaboration.

Each of the proposed changes to the initial SLO Thrive Home Visiting Coordination Grant budget is intended to support the above stated goals. Listed below are the grant activities in the current contract with First 5 SLO followed by the requested revisions and the rationale for the requested changes.

Proposed Activities with Related Budget Items Noted

Notes in italics beside some activities indicate this activity has been revised for the purposes of this revision proposal.

- Activities to include but are not limited to:
 - Identify all first-time parents to receive at least one prenatal and one post-partum visit wherein they would receive the initial education about prenatal and early development and be connected to the most relevant community resources for their needs.
 - Create a subcontract with CAPSLO as a high-volume evidence-based home visiting program provider to enlist their cooperations and partnership in the development of this program.

Services and Supplies

- **Subcontract with CAPSLO**—Budget item 1 in Y2 and Y3
- Adopt a database for use by agencies that offer home visiting services to ensure that referred families receive appropriate services and that families know who they are working with as a team.

Services and Supplies

- **IT Support from Database Vendor**—Budget Item 2 in Y2 and Y3
- **Internet Access for Remote Devices for Home Visitors**—Budget Item 3 in Y2 and Y3

Fixed Assets and Equipment

- **Laptop/tablets to Support Database Usage in the Field by Home Visitors**--(Budget Item 1 in Y2)
- **Mifi/Hotspot Devices for Remote Internet Access** (Budget Item 2 in Y2)
- Develop standardized policies and procedures for collaborative case management. *This activity has been revised to reflect a change from a model using a primary case manager to a model using collaborative case management. The rationale for this change is noted in the next section.*
- Provide support for families to assess children's growth and development through the continuity of care and help with services needed.
- Avoid duplication of services by building a culture of home-visiting collaboration and support through a comprehensive system of universal processes, data-sharing, provider networking, and collaborative learning opportunities. Universal processes may include intake and referral procedures, collaborative case management practices, as well as common screenings/assessments where appropriate. *This activity has been revised to reflect a shift from assigning a primary case manager and program to building collaborative practices across all home visiting programs. The rationale for this change is discussed in the next section.*

Services and Supplies

- **Registration for HV Conference for PH, CAPSLO and Community Partners**--Budget Item 4 in Y2 and Y3
- **Quarterly Lunch and Learns for Home Visitors and Community Partners**—Budget Item 5 in Y2 and Y3
- **Outreach to Referral Sources**—Budget Item 6 in Y3

- **Printing for Outreach and Symposium Materials**—Budget Item 7 in Y3
 - **One-Day Symposium: Event Space**—Budget Item 8 in Y3
 - **One-Day Symposium: Keynote Speaker and Workshop Presenters, Travel and Stipends**—Budget Item 9 in Y3
- Create and maintain partnerships with supporting agencies. Build alliances with service providers (e.g., Martha’s Place, Community Action Partnership of SLO, Help Me Grow, Department of Social Services, Center for Family Strengthening, etc.) in the county.
- **Registration for HV Conference for PH, CAPSLO and Community Partners**--Budget Item 4 in Y2 and Y3
 - **Quarterly Lunch and Learns for Home Visitors and Community Partners**—Budget Item 5 in Y2 and Y3
 - **Outreach to Referral Sources**—Budget Item 6 in Y3
 - **Printing for Outreach and Symposium Materials**—Budget Item 7 in Y3
 - **One-Day Symposium: Event Space**—Budget Item 8 in Y3
 - **One-Day Symposium: Keynote Speaker and Workshop Presenters, Travel and Stipends**—Budget Item 9 in Y3

Rationale for Revision

Building a Culture of Home Visiting Collaboration Vs. Identifying Primary Case Managers

In the original grant, two grant activities involved identifying Primary Case Managers for families participating in home visiting programs. These were (as written in the original grant):

- Develop standardized policies and procedures for ***primary case manager assignment*** (emphasis added).
- Avoid duplication of services by having the client or family ***assigned to one program and having a case manager from that agency primarily*** (emphasis added). The universal referral system will help review referrals at an initial entry point for clients or families. They would be enrolled into the most appropriate agency or program and have one primary case manager to avoid duplication of services and confusion for the families.

This revision shifts the focus from having a primary case manager to building a culture of collaboration and support amongst all home visitors. The rationale for this shift is noted below.

Interviews with Public Health home-visiting nurses and staff from CAPSLO's various home visiting programs indicated that staff from both agencies experience similar barriers in working collaboratively:

- **Lack of shared knowledge amongst home visiting providers for what services and supports their home visiting colleagues in other programs provide.** Home visitor stated they don't have sufficient understanding of what the other home visiting programs provide. This leads to the potential for referral to programs that may be duplicative and may also result in the failure to refer to programs that could be helpful to families.
- **Lack of knowledge about the staff working for the partner agency.** Staff of both agencies reported not knowing the staff involved in the various home visiting programs which made reaching out difficult. Turnover in staff at both agencies has resulted in confusion about who to contact and an erosion of prior working relationships. There have been some one-off attempts at networking and collaboration, but they have not been sustained over time and have resulted in a limited increase in collaborative practices amongst a few home visitors rather than long-term shifts in interagency culture. Each of the home visitors who was interviewed indicated that regularly scheduled opportunities to meet other home visitors, share resources and information, and participate in training together would be helpful toward building collaborative working relationships with other home visitors.
- **Lack of common procedures for assessing client needs and making referrals. Home visiting programs have various intake processes and ways of deciding what services to provide and what referrals to make.** Home visitors said that they are not sure what intake and assessment tools other home visiting programs are using. This makes communicating about client needs and making collaborative plans for addressing those needs very difficult. Common intake, assessment, and referral procedures and policies as well as knowledge about program differences will help home visitors communicate about client needs and develop collaborative responses to address those needs.
- **Lack of common procedures for working collaboratively to address client needs and goals as well as support engagement across programs.** Home visitors reported they were unsure about the best way to approach staff of other programs about clients they have in common. Each responded positively to the idea of meeting with their clients and any other home visitors for collaborative planning sessions. Staff responded positively to plans for creating policies and procedures that will build collaboration amongst home visitors because of the need for clear direction, consistency and agency support.

Relationships are central to collaboration—relationships with families/clients and also with partner agencies and other home visitors. The development of mutual processes, data-sharing protocols, and the use of a common database can support and sustain collaborative communication; however, absent robust interpersonal and interagency relationships, collaborative practices will not be sustainable.

Creating a system in which all home visiting clients are assigned a primary case manager may be problematic in several ways:

- The needs of the family and the relationships they have with providers may change over time. For instance, if they are assigned a primary case manager but over time develop a more effective rapport with a different home visitor, does the case manager role then need to be reassigned?
- Staff turnover would result in having to reassign a primary case manager if the person assigned to that role is no longer working with that family.
- The staff time and energy to coordinate the assignment and maintenance of a primary case manager would be better spent on family-centered collaboration that is flexible and responsive to each family's specific needs.

Building a culture of collaboration and support amongst providers across home visiting programs and across agencies will require significant change management. Activities to accomplish this task include:

- Meetings for providers with opportunities for relationship building, program/agency updates, and presentations on program specifics and available resources for client.
- Development of policies and procedures regarding collaborating with other home visitors to share information about families in common and work together to create case plans that reflect a collaborative approach.
- Development of shared tools such as common intake, assessment, and referral processes
- Training and development opportunities for implementing collaborative practices and tools as well as building skills for home visiting best practices.

Contracting for Mixteco Speaking Home Visitor/Interpreter

In the original grant, one activity involved contracting with a Mixteco speaking home visitor or interpreter. The activity is noted below (as written in the original grant):

- Provide culturally responsive/sensitive services. Contract Mixteco speaking home visitor/interpreter.

Exhibit A-A1

The Health Agency's Health Equity Team has secured a contract with Herencia Indigena to provide Mixteco Interpretation for all Health Agency services. Staff for Public Health's Home Visitor Programs have full access to these services for any Mixteco speaking clients. An additional contract for these services is not needed.

Exhibit B-A1

Budget

First 5 Investment: Up to \$612,206 beginning on the effective date through June 30, 2024.

GRANT BUDGET TABLE - SAN LUIS OBISPO COUNTY HEALTH AGENCY - SLO THRIVE HOME VISITING GRANT				
PROPOSED BUDGET LINE ITEMS	Year 1 11/1/21- 6/30/22	Year 2 7/1/22-6/30/23	Year 3 7/1/23-6/30/24	Total
1. Salaries and Benefits	\$0	\$129,346	\$167,469	\$296,814
2. Services and Supplies	\$0	\$46,400	\$122,520	\$168,920
3. Indirect Costs / Administrative Overhead	\$0	\$19,402	\$25,120	\$44,522
4. Fixed Assets / Equipment	\$0	\$101,950	\$0	\$101,950
TOTAL GRANT REQUEST	\$0	\$297,098	\$315,109	\$612,206
TOTAL IN KIND MATCH	\$0	\$80,843	\$84,331	\$165,174
TOTAL PROGRAM COSTS	\$0	\$377,940	\$399,440	\$777,380

Grant Award	\$612,206
In-kind Match	\$165,174
Total	\$777,380
Percentage of Program Costs covered through In Kind	21.25%

Exhibit B-A1

Budget Detail- Year 1

SLO Thrive Home Visiting Grant Budget - San Luis Obispo County Budget Detail Worksheet							
GRANT YEAR 1 - November 1, 2021 - June 30, 2022							
1. Salaries & Benefits							
Position	Name	Annual Salary & Benefits	Level of Effort	Cost	Grant Funds	In-Kind Match	
1) Program Manager I - step 2-3 (8 months)	Karina Silva Garcia	0	0.50 FTE	\$0	\$0	\$0	\$0
2) Administrative Assistant III-step 5 (8 months)	Erka Torres-Contreras	\$0	0.20 FTE in-kind	\$0	\$0	\$0	\$0
3) Supervising Public Health Nurse - step 5 (8 months)	Cherie Fields	\$0	0.10 FTE in-kind	\$0	\$0	\$0	\$0
4) Senior Public Health Nurse-step 5 (8 months)	To Be Determined	\$0	0.30 FTE in-kind	\$0	\$0	\$0	\$0
5) Division Manager - Nursing - step 2 (8 months)	To Be Determined	\$0	0.10 FTE in-kind	\$0	\$0	\$0	\$0
				SALARIES & BENEFITS	\$0	\$0	\$0
Line Item Details:							
Note: No Activity was done on the grant in year one.							
2. Services and Supplies							
Description	Computation	Cost	Grant Funds	In-Kind Match			
1)		\$0	\$0	\$0			
		SERVICES & SUPPLIES	\$0	\$0	\$0		
Line Item Details:							
3. Indirect Costs							
Description	Salary & Benefits	Computation	Cost	Grant Funds	In-Kind Match		
1) 15% of requested salaries & benefits	\$0	x 15%	\$0	\$0	\$0		
			INDIRECT	\$0	\$0	\$0	
Line Item Details:							
4. Fixed Assets & Equipment							
Description	Computation	Cost	Grant Funds	In-Kind Match			
1) Laptop		\$0	\$0	\$0			
2) Desktop and Monitor		\$0	\$0	\$0			
3) Workstation & chair		\$0	\$0	\$0			
		FIXED ASSETS & EQUIPMENT	\$0	\$0	\$0		
Line Item Details:							

GRANT YEAR 1 BUDGET - SAN LUIS OBISPO COUNTY HEALTH AGENCY - SLO THRIVE HOME VISITING GRANT			
PROPOSED BUDGET LINE ITEMS	GRANT FUNDS	IN-KIND MATCH	TOTAL
1. Salaries and Benefits	\$0	\$0	\$0
2. Services and Supplies	\$0	\$0	\$0
3. Indirect Costs / Administrative Overhead	\$0	\$0	\$0
4. Fixed Assets / Equipment	\$0	\$0	\$0
TOTAL GRANT REQUEST	\$0	\$0	\$0

Exhibit B-A1

Budget Detail-Year 2

SLO Thrive Home Visiting Grant Budget - San Luis Obispo County						
Budget Detail Worksheet						
GRANT YEAR 2 - July 1, 2022 - June 30, 2023						
1. Salaries & Benefits						
Position	Name	Annual Salary & Benefits	Level of Effort	Cost	Grant Funds	In-Kind Match
1) Program Manager II - Step 6 (9.5 months)	Nancy Sutton	\$163,384	1.00 FTE	\$129,346	\$129,346	\$0
2) Administrative Assistant III - Step 5 / Step 6	Erika Torres-Contreras	\$102,409	0.20 FTE in-kind	\$20,482	\$0	\$20,482
3) Supervising Public Health Nurse - Step 5 / Step 6	Vacant	\$231,443	0.10 FTE in-kind	\$23,144	\$0	\$23,144
4) Division Manager - Nursing - Step 5	Sarah Lack	\$254,407	0.10 FTE in-kind	\$25,441	\$0	\$25,441
SALARIES & BENEFITS				\$198,413	\$129,346	\$69,067
34.81%						
Line Item Details:						
1) Program Manager duties will include develop and manage program, data collection, analysis, program evaluation and sustainability. Cost amount is based on 9.5 months at Step 6						
2) Administrative Asst will provide 8 hours a week intake and technical assistance for home visiting staff - will be provided in-kind						
3) Supervising Public Health Nurse will assist the Public Health Division Manager with collaborative planning and activities.						
4) Public Health Division Manager will provide oversight and management of program - will be provided in-kind match.						
Note: For unrepresented employees, Annual Salary & Benefits assumes a 2.5% across-the-board increase effective July 2023. The County is in negotiations to update the MOU between represented employees which is set to expire December 31, 2022. The County anticipates an across-the-board increase for all represented employees of 3% retroactive to the pay period including July 1, 2022; 3% effective the pay period including July 1, 2023; and 2.5% effective the pay period including July 1, 2024. The County has agreed to equity increases, however the total impact to these positions remains unknown at this time. A new 6th step was added to the salary range effective the pay period after the BOS adopts the MOU. Amounts in the Annual Salary & Benefit column include these pending changes.						
2. Services and Supplies						
Description	Computation			Cost	Grant Funds	In-Kind Match
1) Subcontract with CAPSLO	\$35,000/yr			\$17,500	\$17,500	\$0
2) IT Support from Database Vendor	50 hours @ \$100 per hour			\$5,000	\$5,000	\$0
3) Internet Access for Remote Devices for Home Visitors	PH: \$38 x 20 x 6 months=\$4600 CAPSLO: \$50 x 8 x 6 months=\$2,400			\$7,000	\$7,000	\$0
4) Registration for HV Conference for Home Visitors & Community Partners	Conference registration x 14 @ \$350			\$4,900	\$4,900	\$0
5) Quarterly Lunch and Learns for Home Visitors & Community Partners	70 attendees @ \$15/pp x 4, TBD space rental and audio-visual rental			\$7,000	\$7,000	\$0
6) Travel and Mileage Reimbursement	400 miles monthly @ \$0.625/mile plus episodic other travel			\$5,000	\$5,000	\$0
7) Office Supplies	\$25/mo 1 staff			\$300	\$0	\$300
8) Networked Services	\$72/mo x 1 staff			\$864	\$0	\$864
9) Voice Communication Services	\$21/mo x 1 staff			\$252	\$0	\$252
SERVICES & SUPPLIES				\$47,816	\$46,400	\$1,416
Line Item Details:						
1) Subcontract for assistance with collaboration activities						
2) Costs associated with the ongoing support of a database implementation including building dashboard(s) and reports and providing user training.						
3) Estimates based on information from PH and CAPSLO IT staff						
4) Conference attendees to include HV providers, supervisors/managers, and community partners.						
5) Lunches provided at allowable county cost of \$15 per lunch						
6) Local travel to attend meetings and project activities is set at the accepted county mileage reimbursement rate. TBD travel to include site visits to other counties/HV programs, state meetings, etc.						
7) General office supplies for Program Manager						
8) Networked services include cost for E-mail, Microsoft products, internet access, anti-virus, technical support, active directory services						
9) Voice communication includes phone billings, phone support and equipment, voice mail boxes						
3. Indirect Costs						
Description	Salary & Benefits	Computation		Cost	Grant Funds	In-Kind Match
1) 15% of requested salaries & benefits	\$198,413	x 15%		\$29,762	\$19,402	\$10,360
INDIRECT				\$29,762	\$19,402	\$10,360
Line Item Details:						
1) Indirect costs include the cost of various supportive services including Information Technology, Human Resource, Accounts Payable, Facility and Grounds, and Administration departments. The County is requesting an indirect rate of 15%, which is considerably lower than the county's actual calculation of indirect costs for SLO Public Health. This calculation is consistent with SLO County Auditor's Accounting Handbook which details acceptable indirect cost allocation methods.						
4. Fixed Assets & Equipment						
Description	Computation			Cost	Grant Funds	In-Kind Match
1) Laptops/Tablets to Support Database Usage in Field by Home Visitors	PH: 28 devices \$70,000, CAPSLO: 8 devices = \$22,000			\$92,000	\$92,000	\$0
2) Mifi Devices for Remote Internet Access	41 devices @ \$150 each			\$6,150	\$6,150	\$0
3) Desktop and Monitor	\$1,300 x 1 desktops & monitor			\$1,300	\$1,300	\$0
4) Workstation & Chair	\$2,500 x 1 workstation			\$2,500	\$2,500	\$0
FIXED ASSETS & EQUIPMENT				\$101,950	\$101,950	\$0
Line Item Details:						
1) Devices includes peripherals such as docking stations, monitors, and other misc. equipment. CAPSLO estimate from IT is higher per device than estimate from PH IT.						
2) Mifi devices for home visitors.						
3) Computer and monitor for new program staff. Pricing is based on standardized county purchase price.						
4) Work stations for new program staff. Pricing is based on standardized county purchase price.						
GRANT YEAR 2 BUDGET - SAN LUIS OBISPO COUNTY HEALTH AGENCY - SLO THRIVE HOME VISITING GRANT						
PROPOSED BUDGET LINE ITEMS	GRANT FUNDS	IN-KIND MATCH	TOTAL			
1. Salaries and Benefits	\$129,346	\$69,067	\$198,413			
2. Services and Supplies	\$46,400	\$1,416	\$47,816			
3. Indirect Costs / Administrative Overhead	\$19,402	\$10,360	\$29,762			
4. Fixed Assets / Equipment	\$101,950	\$0	\$101,950			
TOTAL GRANT REQUEST	\$297,098	\$80,843	\$377,940			

Exhibit B-A1

Budget Detail Year-3

SLO Thrive Home Visiting Grant Budget - San Luis Obispo County							
Budget Detail Worksheet							
GRANT YEAR 3 - July 1, 2023 - June 30, 2024							
1. Salaries & Benefits							
Position	Name	Annual Salary & Benefits	Level of Effort	Cost	Grant Funds	In-Kind Match	
1) Program Manager II - Step 6	Nancy Sutton	\$167,469	1.00 FTE	\$167,469	\$167,469	\$0	
2) Administrative Assistant III - Step 6	Erika Torres-Contreras	\$108,052	0.20 FTE in-kind	\$21,610	\$0	\$21,610	
3) Supervising Public Health Nurse - Step 6	Vacant	\$244,128	0.10 FTE in-kind	\$24,413	\$0	\$24,413	
4) Division Manager - Nursing - Step 6	Sarah Lack	\$260,767	0.10 FTE in-kind	\$26,077	\$0	\$26,077	
				SALARIES & BENEFITS	\$239,569	\$167,469	\$72,100
						30.10%	
Line Item Details:							
1) Program Manager duties will include develop and manage program, data collection, analysis, program evaluation and sustainability.							
2) Administrative Asst will provide 8 hours a week intake and technical assistance for home visiting staff - will be provided in-kind							
3) Supervising Public Health Nurse will assist the Public Health Division Manager with collaborative planning and activities.							
4) Public Health Division Manager will provide oversight and management of program - will be provided in-kind							
Note: For unrepresented employees, Annual Salary & Benefits assumes a 2.5% across-the-board increase effective July 2023. The County is in negotiations to update the MOU between represented employees which is set to expire December 31, 2022. The County anticipates an across-the-board increase for all represented employees of 3% retroactive to the pay period including July 1, 2022; 3% effective the pay period including July 1, 2023; and 2.5% effective the pay period including July 1, 2024. The County has agreed to equity increases, however the total impact to these positions remains unknown at this time. A new 6th step was added to the salary range effective the pay period after the BOS adopts the MOU. Amounts in the Annual Salary & Benefit column include these pending changes.							
2. Services and Supplies							
Description	Computation	Cost	Grant Funds	In-Kind Match			
1) Subcontract with CAPSLO	\$35,000/yr	\$17,500	\$17,500				
2) IT Support from Database Vendor	50 hours @ \$100 per hour	\$5,000	\$5,000	\$0			
3) Internet Access for Remote Devices for Home Visitors	PH: \$38 x 22 x 12 months=\$9120 CAPSLO: \$50 x 8 x 12 months=\$4800	\$13,920	\$13,920	\$0			
4) Registration for HV Conference for PH, CAPSLO and Community Partners	Conference registration x 14 @ \$350	\$4,900	\$4,900	\$0			
5) Quarterly Lunch and Learn for HV Providers	70 attendees @ \$15/pp x 4, TBD space rental and audio-visual rental	\$7,200	\$7,200	\$0			
6) Outreach to HV Referral Sources: physicians, hospital staff, partner agencies, etc.	TBD	\$8,000	\$8,000	\$0			
7) Printing for HV Outreach and Symposium Materials	Brochures and flyers for outreach to referral sources	\$5,000	\$5,000	\$0			
8) One Day Training Symposium: Event Space	Attendance 125. Space/AV rental & Food costs	\$16,000	\$16,000	\$0			
9) One Day Training Symposium: Keynote Speaker & Workshop Presenters	Speaker/presenter fees and stipends, travel, and CEUs	\$40,000	\$40,000	\$0			
10) Travel and Mileage Reimbursement for PH staff	400 miles monthly @ \$0.625/mile plus episodic other travel	\$5,000	\$5,000	\$0			
11) Office Supplies	\$25/mo x 1 staff	\$300	\$0	\$300			
12) Networked Services	\$72/mo x 1 staff	\$864	\$0	\$864			
13) Voice Communication Services	\$21/mo x 1 staff	\$252	\$0	\$252			
				SERVICES & SUPPLIES	\$123,936	\$122,520	\$1,416
Line Item Details:							
1) Subcontract for assistance with collaboration and coordination activities							
2) Costs associated with the ongoing support of a database implementation including building dashboard(s) and reports and providing user training.							
3) Estimates based on information from PH and CAPSLO IT staff							
4) Conference attendees to include HV providers, supervisors/managers, and community partners.							
5) Lunches provided at allowable county cost of \$15 per lunch. Free and low-cost space will be pursued.							
6) Outreach events may include an open house, HV Program Fair, or similar.							
7) Printing may include brochures, flyers or other materials. Includes outreach for referral engagement and for Training Symposium.							
8) Symposium for HV providers, community partners, local medical staff, etc. Includes use of conference app and contingency plan for virtual symposium with tech support & producer to assist should in-person not be possible.							
9) Anticipated national expert on HV or DEI issues for keynote and stipends and travel for workshop providers who may not be local. Costs for speakers includes providing CEUs for attendees.							
10) Travel to attend meetings and project activities is set at the accepted county travel and mileage reimbursement rates							
11) General office supplies for Program Manager							
12) Networked services include cost for E-mail, Microsoft products, internet access, anti-virus, technical support, active directory services							
13) Voice communication includes phone billings, phone support and equipment, voice mail boxes							
3. Indirect Costs							
Description	Salary & Benefits	Computation	Cost	Grant Funds	In-Kind Match		
1) 15% of requested salaries & benefits	\$239,569	x 15%	\$35,935	\$25,120	\$10,815		
				INDIRECT	\$35,935	\$25,120	\$10,815
Line Item Details:							
1) Indirect costs include the cost of various supportive services including Information Technology, Human Resource, Accounts Payable, Facility and Grounds, and Administration departments. The County is requesting an indirect rate of 15%, which is considerably lower than the county's actual calculation of indirect costs for SLO Public Health. This calculation is consistent with SLO County Auditor's Accounting Handbook which details acceptable indirect cost allocation methods.							
4. Fixed Assets & Equipment							
Description	Computation	Cost	Grant Funds	In-Kind Match			
N/A		\$0	\$0	\$0			
				FIXED ASSETS & EQUIPMENT	\$0	\$0	\$0
Line Item Details:							
GRANT YEAR 3 BUDGET - SAN LUIS OBISPO COUNTY HEALTH AGENCY - SLO THRIVE HOME VISITING GRANT							
PROPOSED BUDGET LINE ITEMS	GRANT FUNDS	IN-KIND MATCH	TOTAL				
1. Salaries and Benefits	\$167,469	\$72,100	\$239,569				
2. Services and Supplies	\$122,520	\$1,416	\$123,936				
3. Indirect Costs / Administrative Overhead	\$25,120	\$10,815	\$35,935				
4. Fixed Assets / Equipment	\$0	\$0	\$0				
TOTAL GRANT REQUEST	\$315,109	\$84,331	\$399,440				

To: First 5 Commission
From: Wendy Wendt
Date: December 7, 2022
Re: ITEM 8 – Commissioner Terms

Recommendation: Appoint Ad Hoc Committee to Develop Recommendations for Potential Update to Commissioner Terms and Selection Process

Background

First 5 staff is recommending a review and potential update to Commissioner Terms and Selection Process, based on three factors: 1) six of the nine Commission seats are nearing the end of their current terms; 2) both Commissioners and staff have identified several challenges associated with participating in/administering existing selection process for Community Representatives; and 3) First 5's commitment to building equity into its work, including expanding space evolving and emerging leadership opportunities for community members.

For reference and in anticipation of Commission discussion at the meeting, please review the following:

The makeup of the SLO County First 5 Commission is defined in its Bylaws (see attached), in accordance with County Ordinance and the CA Children and Families Act. Current seats, terms and methods of selection are as follows:

- Designated Reps with one-year terms (1)
 - **County Supervisor**– currently *Bruce Gibson
 - Board of Supervisors (BOS) appoints annually in January as part of BOS Committee Assignments
- Designated Reps with four-year terms (4)
 - **County Health Agency Director** (or delegate) – currently Penny Borenstein
 - **County Superintendent of Schools** (or delegate)– currently James Brescia
 - **County Director of Social Services** (or delegate) – currently Linda Belch
 - **Local Child Care Planning Council** – currently *Melinda Sokolowski
 - LCCPC selects a designee.
- Community Reps with 4-year terms (4)
 - **Medical Rep (1)** – currently *James Tedford, AAP Chapter 2
 - F5 advertises openings to local medical/dental groups, coordinates vetting. Commissioners vote.
 - **At-Large Reps (3)** – currently *Erica Ruvalcaba-Heredia, *Alison Ventura, *Bob Watt
 - F5 advertises openings to the general population, coordinates vetting. Commissioners vote. (Note: At-Large Reps must represent one or more groups identified in the Bylaws/County Ordinance)

Commissioner candidates in all nine seats are recommended by Commission vote to the Board of Supervisors, which officially ratifies the recommendation/s.

Existing Bylaws establish four-year terms for all but the Supervisorial seat, which is on a one-year term cycle. Currently no term limits are established.

Community Reps are selected through an application process. Currently, existing Reps interested in serving more than one term are required to reapply as part of the community-wide application/selection process.

**San Luis Obispo County
Children and Families Commission**

BYLAWS (as amended and approved March 27, 2019)

The following are the bylaws under which the San Luis Obispo County Children and Families Commission shall function:

Article I — Purpose

The Children and Families Commission (hereafter "Commission") was created by County Ordinance No. 2846 and amended by Ordinance No. 2886, which is codified in Section 8.70 of the San Luis Obispo County Code.

Section 8.70.070 of the County Code specifies the duties and powers of the commission, as follows:

The duty of the commission is to implement the provisions of the California Children and Families First Act of 1998 (Proposition 10, effective January 1, 1999) now codified as Section 7 to Article XIII A and Section 13, Article XIII B of the California Constitution, Division 108 of the Health and Safety Code, Article 3 of Chapter 2 of Part 13 of Division 2 of the Revenue and Taxation Code. To this end the commission shall among other things:

- A. Create and adopt an adequate strategic plan for early childhood development within the county that is consistent with, and in furtherance of the purposes of the California Children and Families First Act of 1998 and any guidelines adopted by the State Children and Families First Commission that are in effect at the time the plan is adopted, said strategic plan to include at least the following:
 - 1. A description of the goals and objectives proposed to be attained,
 - 2. A description of the desired outcomes,
 - 3. A description of how measurable outcomes will be determined,
 - 4. A description of how programs, services and projects relating to early childhood development will be integrated into a consumer oriented and easily accessible system;
- B. Review at least annually the county strategic plan and revise the plan as may be necessary or appropriate;
- C. Conduct at least one public hearing on the proposed plan before the plan is adopted;
- D. Submit the adopted strategic plan to the state commission,
- E. Provide a copy of the adopted strategic plan to the board of supervisors, and
- F. Adopt an annual audit and report in conformity with Health and Safety Code section 1030150 and conduct at least one public hearing prior to its adoption.

Article II — MEMBERSHIP

Section 8.70.020 of the County Code specifies the membership requirements of the commission, as follows:

Adopted: July 1999
Amended: December 1999
Amended: March 2011
Amended: May 2014
Amended March 2019

The commission shall consist of nine members appointed by the board of supervisors. Proposition 10 specifies that the persons appointed by the board of supervisors shall meet the following requirements.

- (a) Two members of the commission shall be appointed from the class of persons that consists of the following individuals:
 - (1) The county health officer;
 - (2) Managers of county children's services programs;
 - (3) Managers of county public health services;
 - (4) Managers of county behavioral health services
 - (5) Managers of county social services; and
 - (6) Managers of county tobacco and other substance abuse prevention and treatment services.

- (b) One member of the commission shall be a member of the board of supervisors.

- (c) The remaining members of the commission shall be appointed from the class of persons that consists of the following individuals:
 - (1) Persons described above in subsection (a);
 - (2) Recipients of project services included in the county strategic plan;
 - (3) Educators specializing in early childhood development;
 - (4) Representatives of local child care resource or referral agencies;
 - (5) Representatives of local child care coordinating groups;
 - (6) Representatives of local organizations for prevention of early intervention for families at risk;
 - (7) Representatives of community-based organizations that have the goal of promoting nurturing and early childhood development;
 - (8) Representatives of local school districts; and
 - (9) Representatives of local medical, pediatric, or obstetric associations or societies.

Adopted: July 1999
Amended: December 1999
Amended: March 2011
Amended: May 2014
Amended March 2019

Members shall serve without compensation and shall be reimbursed the actual amounts of their reasonable and necessary expenses incurred in attending meeting and in performing the duties of their offices, in accordance with the provisions of the commission's travel policy.

Consistent with the membership requirements prescribed by Proposition 10, the commission's membership shall be comprised as follows: One member of the Board of Supervisors; the Director of the County Health Agency, or his/her appointee who shall be from the class of persons identified in Section 8.70.020(1)(3)(4)(6); the Director of the County Department of Social Services, or his/her appointee who shall be from the class of persons identified in Section 8.70.020(5); a representative of the local Child Care Planning Council; a representative of medical, pediatric, or obstetric associations or societies; a representative of the Office of the County Superintendent of Schools; and three representatives at large, selected by the commission and appointed by the board of supervisors consistent with the requirements of Prop 10 and Section 8.70.020 of the County Code.

All voting members of the commission shall comply with the federal and state conflict of interest laws, including but not limited to the following, to the extent they are applicable:

- a) The California Political Reform Act of 1974, California Government Code Section 87100 et seq.;
- b) The prohibition of contractual conflicts of interest set forth in California Government Code Section 1090 et seq.;
- c) The prohibition of incompatible employment, activity or enterprise for compensation set forth in California Government Code Section 1126 et seq.;
- d) The common law rules against conflicts of interest.

Article III — TERMS OF APPOINTMENT

Section 8.70.030 of the County code specifies the terms of the members of the commission, as follows:

Each commission member shall hold office at the will and pleasure of the board of supervisors for one or more four-year terms, with the following exceptions:

- A. If no successor has been appointed at the expiration of the term, the commissioner shall serve until the appointment and qualifications of the member's successor;
- B. If any commissioner has three consecutive unexcused absences from regularly scheduled meetings, the board of supervisors shall appoint a new commissioner to serve the unexpired term;
- C. Of the initial appointees, four shall be appointed for a two-year term and five shall be appointed for a four-year term;

Adopted: July 1999
Amended: December 1999
Amended: March 2011
Amended: May 2014
Amended March 2019

D. Any vacancies shall be filled by the board of supervisors for the unexpired term;

ARTICLE IV — OFFICERS

Section 8.70.040 of the County Code requires that a chairperson and vice-chairperson be selected from among commission members.

Officers will serve one-year terms. An election of officers will take place at the first meeting of each calendar year.

ARTICLE V — MEETINGS

Section 8.70.050 of the County code requires that the commission shall meet at least six times per year.

The commission may elect to meet more frequently. All meetings shall be open to the public, and be held at a specified time and place with public notice provided as required by California Law (Brown Act).

- a) The commission can take no actions, unless a quorum is present. Section 8.70.060 of the County code specifies that a quorum shall consist of a simple majority of the number of members appointed;
- b) Minutes of each commission meeting will be recorded and distributed for review by each voting member. The commission shall approve the minutes of prior meetings and make them available for public review;
- c) Commission members are responsible for notifying the chairperson so that meetings will not be held when a quorum will not be present.

ARTICLE VI — SUBCOMMITTEES

Subcommittees shall be appointed, as needed, by the chairperson.

ARTICLE VII — BYLAWS

The commission shall adopt a set of bylaws. These bylaws may be amended or revised by a majority of the commissioners present provided that notice of the amendment or revision is given in writing to each member of the commission at least one (1) week prior to the meeting.

ARTICLE VIII — COMMISSION FUNDING

Section 8.70.090 of the County Code requires that all money received from the state commission to carry out the provisions of the California Children and Families First Act of 1998 will be placed in the Children and Families First Trust Fund, held by the county, for exclusive use by the commission. Additionally, all interest gained from the Trust Fund will be credited to the Trust Fund for use by the commission.

Adopted: July 1999
Amended: December 1999
Amended: March 2011
Amended: May 2014
Amended March 2019

To: First 5 Commission

From: Wendy Wendt

Date: December 7, 2022

Re: ITEM 9 – Strategic Plan 2024 Process Preview

Recommendation: Appoint Ad Hoc Committee on Strategic Plan Design

Background

California’s local First 5 Commissions are required by statute to conduct a recurring strategic planning process every several years, resulting in a Strategic Plan designed to guide decision-making, funding priorities, and related activities. First 5 SLO County’s current Strategic Plan spans four years from 2020-24.

The December 2022 Commission meeting formally launches the process toward development of the next Strategic Plan commencing July 1, 2024. Item 9 on the agenda is dedicated to an initial discussion regarding this process. This discussion will touch on 1) a review of the current 2016-2020 Plan as a “starting point” off which to build toward the next Strategic Plan, 2) identification of external factors and internal capacities that influence our potential for strategic impact, and 3) development of a strategic planning format and timeline that will maximize broad and equitable community stakeholder engagement.

Staff is recommending the creation of an ad hoc Strategic Planning Design Committee, to include at least two Commissioners and First 5 staff. This committee will present a recommendation to the full Commission for approval at its January 28, 2023 meeting.

In order to ensure a rich and informed strategic planning discussion, **Commissioners are encouraged to review the following:**

- 2020-24 Strategic Plan for San Luis Obispo County, available on the First 5 SLO County website: <https://www.first5slo.org/what-we-do.php>.
- The attached Theory of Change document, first presented to the Commission by the First 5 evaluation team at the June 22, 2022 meeting, and which offers a foundational framework for development of the next Strategic Plan.



FIRST 5 THEORY OF CHANGE

In order for San Luis Obispo County to have healthier communities, a strong local economy and improved quality of life for all, children need to thrive in equitable, nurturing, respectful environments where every child is healthy, developing to optimal potential, and ready to learn. First 5 San Luis Obispo County uses three key strategies to help reach this goal: Place-based Network Building, Direct Funding and Program Investment, and Policy, Advocacy and Systems Change.



THEORY OF CHANGE - OVERVIEW



PLACE-BASED NETWORK BUILDING:

Leveraging the collective power of our communities

Place-based network building refers to cross-sector efforts that engage community members and partners to address common issues by forging relationships that can be leveraged over time. San Luis Obispo County has the collective power to identify problems and work together to address them. By connecting with and listening to families, aligning with organizational partners and leading the charge on cross-sector collaboration, First 5 is creating innovative ways to deliver services and a more nimble, cohesive and sustainable approach to care and support for young children and families.

DIRECT FUNDING AND PROGRAM INVESTMENT:

Lifting up best practices and take them to scale

Throughout the County, parents and children under six are often unseen or unsupported during the most essential developmental time in a child's life. First 5 funds innovative programs and expands existing resources in order to equitably meet the needs of this key population.

POLICY, ADVOCACY AND SYSTEMS CHANGE:

Ensuring that equitable support for children and families is sustained over time

San Luis Obispo needs sound and equitable public policy and adequate public investment in systems that prioritize children 0-5 and nurture strong, resilient families. The County also needs those systems to be connected, coordinated and aligned in their goals and vision. First 5 supports positive long-term outcomes for communities by advocating for the policies and systems that children and families need. First 5 collaborates with partners in the County, as well as with other regions and statewide First 5 partners in its policy and systems change work.



COMMITMENT TO EQUITY

First 5 works to support all children, and some children and families need extra support – from access to additional resources for housing, transportation and nutrition to ways to address language and other barriers. First 5 is committed to centering equity in the way that it engages and supports diverse community organizations through funding processes. First 5 also works to ensure that the focus of its work addresses the most vulnerable members of the community, including marginalized populations and those who are most impacted by inequities.

HOW FIRST 5 WILL USE THE THEORY OF CHANGE

First 5's cross-sector work in and with communities supports the health and development of children and lays the groundwork for positive long-term outcomes. Investment in early childhood can lead to healthier communities, a more competitive workforce, lower healthcare costs, stronger economic growth and greater equality of opportunity. The Theory of Change is a planning tool to better understand how First 5's capacities and strategies speak to short, medium and longer term outcomes. Each of First 5's initiatives or programs should leverage the core strategies and speak to both short/medium term and longer term outcomes. The Theory of Change is designed to be a living document. As First 5 and its partners learn more about what works, strategies may change and new outcomes may be identified.

The Theory of Change will also guide First 5's ongoing evaluation work. Not all of the Theory of Change needs to be evaluated all at once, and First 5 will work with partners and the evaluation team to prioritize outcomes for evaluation work.

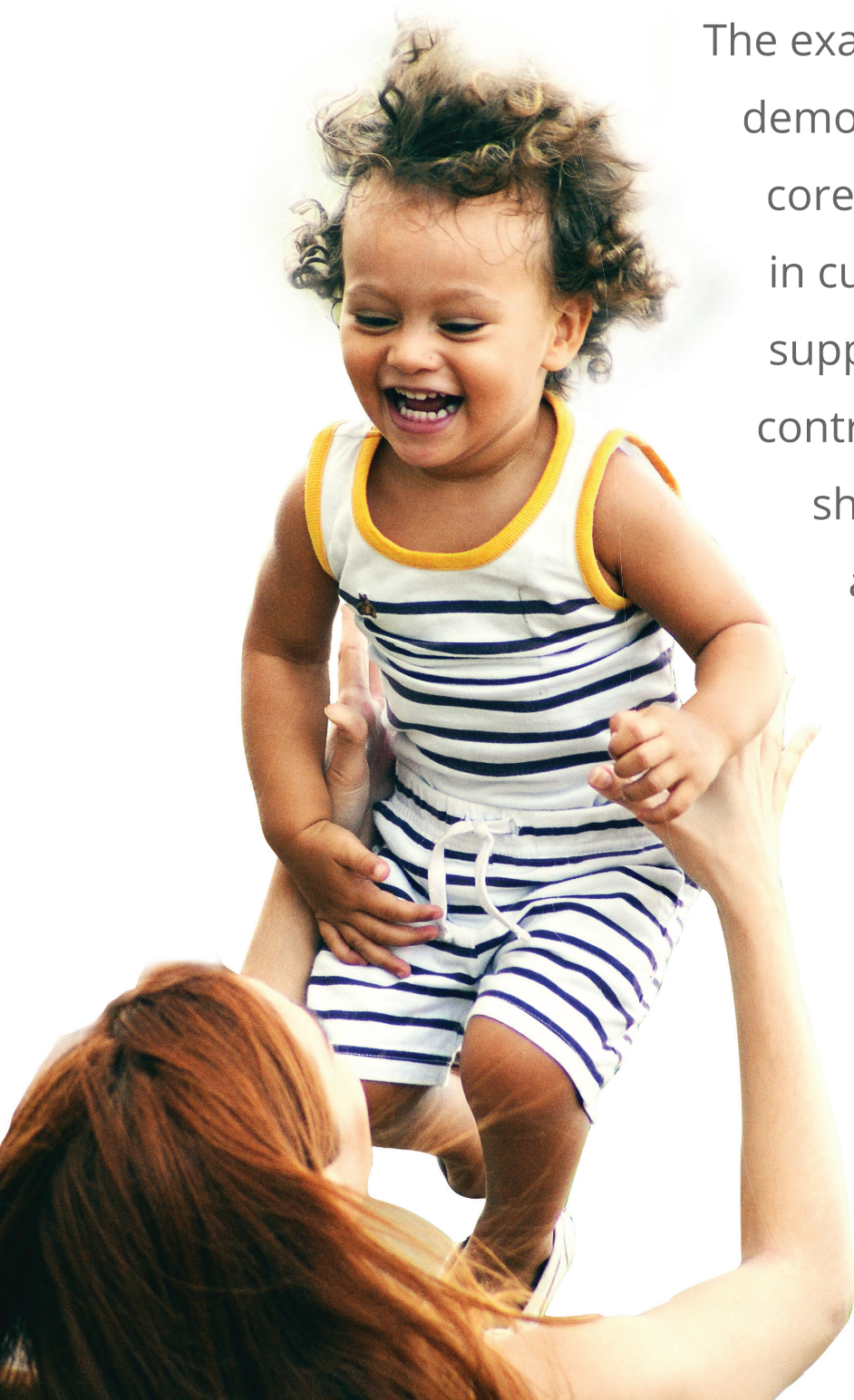
First 5's work supports positive long-term outcomes for our community that we can plan on and build on.



CAPACITIES	STRATEGIES	SHORT-TERM OUTCOMES	MEDIUM-TERM OUTCOMES	LONGER-TERM OUTCOMES	GOAL
<p>STAFF TIME, EXPERTISE & COMMUNITY LEADERSHIP: including direct engagement in convening, coordination, coalition building & strategic communications.</p>	<p>Place-Based network building</p> <p>Direct funding and program investment</p> <p>Policy, advocacy, and systems change</p>	<p>Stronger evidence base for needs, gaps, and solutions exists, and best practices are translated for the County in collaboration with partners and the community</p> <p>Proven programs deliver needed services to children 0-5 and their families equitably</p> <p>Emerging or under-addressed issues are identified, including those that emerge from crises</p> <p>Increased media coverage of priority needs, gaps and solutions leads to greater awareness among the community and cross-sector partners</p> <p>New partners are identified, existing partners are activated, and champions and influencers highlighted</p>	<p>Increased cross-sector alignment and awareness on needs and gaps</p> <p>Increased public will to call for action on priority issues</p> <p>Increased political will to take action on priority issues</p> <p>Changes in business practices support 0-5 children and their families</p> <p>Collectively the community and cross-sector partners are able to address emerging or under-addressed issues and crises</p> <p>Policy changes increasingly reflect community-wide 0-5 and their families</p> <p>Needed programs are sustainably supported by public or partner investment</p>	<p>Families' basic needs are met and fewer families face financial insecurity</p> <p>Local care and support systems are more equitable, coordinated and aligned on core functions, and able to provide improved support</p> <p>Equitable, stable, affordable, high-quality supports like child care are available</p> <p>Strong and empowered place-based cross-sector networks that prioritize children 0-5 and their families exist</p> <p>Community and cross-sector partners collectively prioritize and expect support for children 0-5 and their families (norms change)</p> <p>Children 0-5 experience less trauma and improved early education outcomes</p> <p>All employers offer comprehensive family friendly practices that support a healthy work life balance</p>	<p>Children thrive in equitable, nurturing, respectful environments, & every child is healthy, developing to optimal potential, & ready to learn</p>
					<p>LONG-TERM IMPACT</p> <p>Healthier communities, a more competitive workforce, lower healthcare costs, stronger economic growth and greater equality of opportunity</p>

THEORY OF CHANGE IN ACTION: EXAMPLES

The examples below demonstrate how the core strategies used in current programs support First 5's contribution to the short, medium and longer-term outcomes in the Theory of Change.



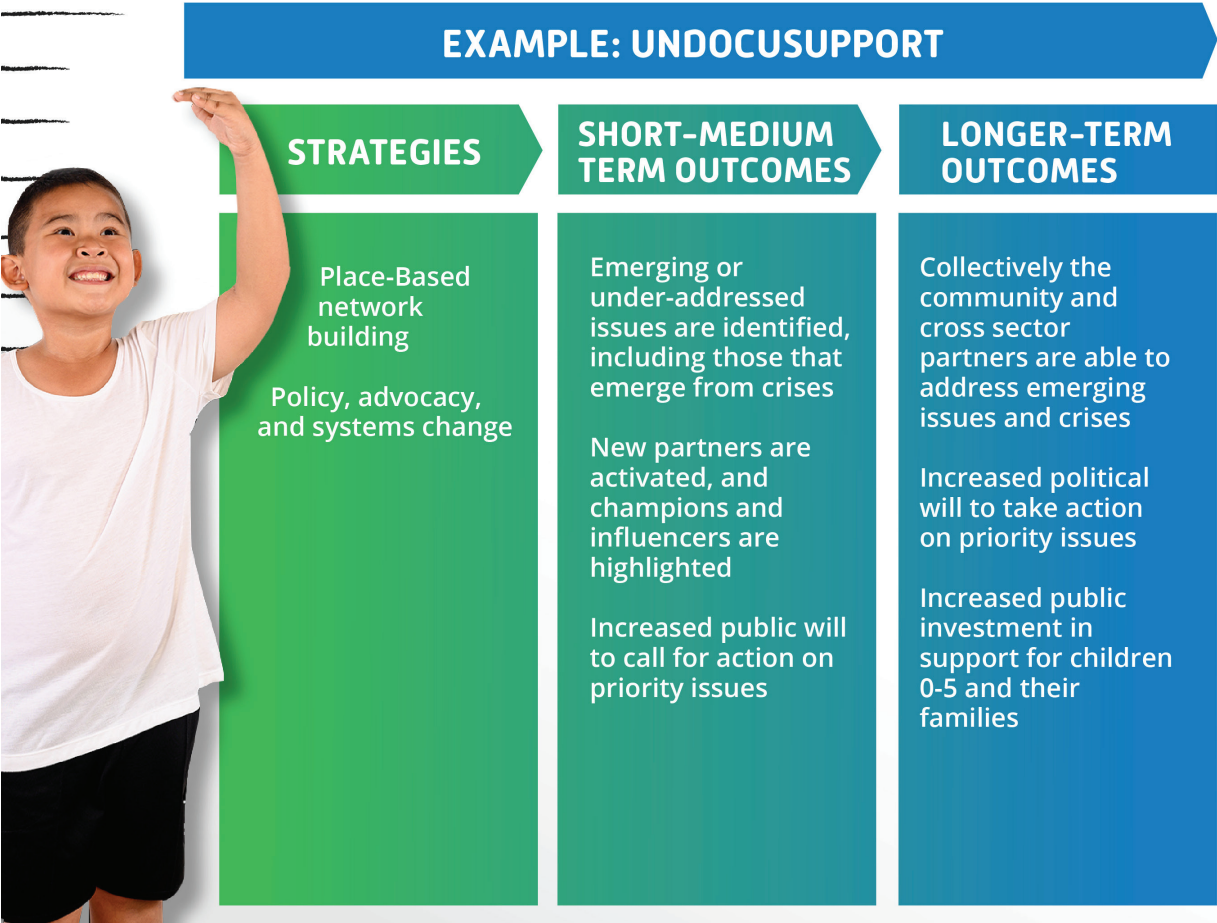
FAMILY-FRIENDLY WORKPLACES

To address the child care crisis in the County, First 5 brings community members and cross-sector partners together through the *We Are the Care* initiative to build support for change and to generate solutions. Thus far, the coalition’s focus on local cross-sector government engagement has successfully raised awareness of the child care crisis in the county as an economic issue and a business issue, as well as an issue for families. Activating practical tools like the Family-Friendly Workplace Toolkit has helped lay the groundwork for the development of the Family-Friendly Workplace Accelerator Program, an ongoing partnership between First 5, the County of SLO, and the SLO Chamber of Commerce to support working parents, families, businesses, and a strong local workforce. Initial funding has resulted in community and systems level outcomes, and has also generated new funded programs to help continue the work.



UNDOCUSUPPORT

In order to address the lack of federal pandemic relief dollars allocated to many of the County’s immigrant families, First 5 convened grassroots organizations, community members, and agencies to create a pathway to respond. UndocuSupport expanded SLO’s system-wide capacity to support families in crisis and brought together a new network of aligned community members and organizations ready to support action on immigrant issues.



ORAL HEALTH

In the early 2010s, an assessment by First 5 showed that the 0-5 oral health system in the County was struggling to meet community needs with equitable and quality care, including preventive services. After bringing together a summit of stakeholders at multiple levels to better understand needs and gaps, First 5 made the decision to prioritize oral health. First 5 funded direct services to meet immediate needs, which supported a core provider, Tolosa Children’s Dental, in expanding preventive care into the Central region of the County. Funding also supported work toward changing and improving the children’s oral health safety net system as a whole. A steering committee convened and facilitated the creation of a new strategic plan, informed by the County’s Oral Health Coalition of community leaders, providers and representatives from local agencies. As a result, a permanent oral health program manager was hired to support the County within the Public Health Department with a focus on changing and improving the system over time.

