

DRAFT

Children and Families Commission  
of San Luis Obispo County

**AND, HOW ARE THE CHILDREN?**

FIRST 5 SAN LUIS OBISPO COUNTY

OUTCOME EVALUATION REPORT 2019



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# Table of Contents

	Page
<b>Introduction</b>	1
<b>Advocacy Agenda</b>	2
<b>Funded Programs</b>	4
<b>Perinatal Readiness Priority Area</b>	4
BABES (Babes At Breast Education and Support)	5
Baby's First Breath	6
Perinatal Parental Mental Health Support Services	7
<b>Child Health &amp; Development Priority Area</b>	8
BEST PALS (Behavior Education Screening Parenting And Life Skills)	9
County Oral Health Program Manager	10
Health Access Trainer	11
Tolosa Children's Dental Center	
Central Region Dental Access	12
Vision Screening Program	13
<b>Early Learning Priority Area</b>	14
Early Learning for All	15
First 5/California State Preschools Program	16
School Readiness Site Coordinators	17
<b>Family Strengthening Priority Area</b>	21
Early Childhood Family Advocate Services	24
Family Advocates (School Readiness Neighborhoods)	25
Family Support Counselors (School Readiness Neighborhoods)	26
Parent Café Parent Group Pilot Project	27
Parents Helping Parents	28
<b>IMPACT SLO</b>	29
QRIS (Quality Rating and Improvement System)	29
QRIS: Center-based Sites	30
QRIS: Family Childcare Sites	31
Supplemental Activities:	
Eclectic Professional Development & SEFEL Trainings	32
Raising a Reader	33
<b>Distribution of Kits for New Parents</b>	34
<b>Appendix: Evaluation Data Supplement 2019</b>	35

*And, how are the children?*  
Masai Greeting

## **The Strategic Plan**

First 5 SLO County finished its most recent strategic planning process with the publication of its Strategic Plan 2016-2020, *And, How Are the Children?* The Plan outlines the paths the Commission intends to take in continuing its legacy of investment and leadership in reinforcing the all-important beginning years of life for the youngest members of our community.

The Commission approved nearly \$9 million during the next four years for advocacy and funded programs in four key Priority Areas:

- **Perinatal Readiness**
- **Child Health and Development**
- **Early Learning**
- **Family Strengthening**

We are also partnering with the CA State Commission in a five-year effort to ensure quality in early childhood services:

- **IMPACT SLO**

In all of our work we rely on many community partners to help young children get the optimal start in life. We want to ensure that the answer in SLO County to the question *And, how are the children?* is always *The children are well.*

## Introduction

Program evaluation was mandated by the California Children's and Families First Act as an integral part of First 5's work. The Act required the State and County Commissions to *use outcome-based accountability to determine future expenditures.*

The State Commission's current role in evaluation is to review county annual reports and to collect and compile data to measure activities statewide. The County Commissions' roles in evaluation are:

- Adopt strategic plans with measurable outcomes
- Conduct local evaluation activities to document program activities and assess program results
- Prepare an annual audit and report covering implementation, progress toward program goals and objectives, and the measurement of specific outcomes

The data collected through the evaluation serve a number of purposes. They document the development and implementation of activities that are intended to benefit young children and their families. The data often provide feedback about how those activities might be improved or strengthened. And, the data demonstrate the results of the Commission's activities in improving the lives of the county's young children and their families.

The *First 5 SLO County Outcome Evaluation Report 2019* summarizes the data collected during 2018/19. It is organized by the two major sets of activities:

- 1) Advocacy Agenda
- 2) Funded Activities

These, in turn, are structured through the Commission's four Priority Areas: Perinatal Readiness; Child Health & Development; Early Learning; and Family Strengthening, along with IMPACT SLO, SLO County's implementation of the State's IMPACT initiative. For more detailed data and discussion, please see the Appendix to this report, *Evaluation Data Supplement 2019.*

*Too often we give our children answers to remember rather than problems to solve.*

Roger Lewin

## Levels of Efficacy

Evaluation has played an increasingly important role in health, education, and social service programs. One result of this has been a growing body of literature supporting certain practices as having been proven to be effective. Due to the complex nature of this research, there are three such categories of efficacy that are generally thought to support the use of any given practice:

- **Evidence-based:** outcomes are proven through documented scientific research involving comparison and/or control groups
- **Evidence-informed:** based on a clearly articulated theory of change along with some outcome evaluation in multiple settings
- **Promising practice:** based on a clearly articulated theory of change with either some fidelity to an evidence-based practice or a general acceptance in the field as to its outcomes

The *Evaluation Plan 2019* seeks, when possible, to identify data that further validate the effectiveness of local activities.

# Advocacy Agenda

## The Children's Bill of Rights & General Advocacy

### What Did We Accomplish?

- First 5 SLO County selected 12 *Hands-On Heroes*, one for each of the Rights, during 2018/19. The campaign featured videos about each of the heroes that were disseminated through SLOCOE's cable television channel, the First 5 website, social media, and other media platforms.
- The heroes were: Linda Rawlings (SLO Children's Museum) - Jessica George (Arts Obispo) - Rebecca Britton (Boys & Girls Club of South SLO County) - Amy Kardel (Rotary Club of San Luis de Tolosa) - Nate Potter (4-H Development Program) - Spencer Claxton (The Community Foundation of SLO County) - Sam Crouse (ECHO Homeless Shelter) - Deanna Smaw (County of SLO WIC Program) - Yecenia Silvas (Oceano School Readiness Neighborhood) - Jean Tolman (Stand Strong) - Lauren Bray and Lauren Skaar (Kennedy Club Fitness, Paso Robles) - and Dan Hile (Optometric Care Associates).

### Talk. Read. Sing.

### What Did We Accomplish?

- First 5 SLO County's *Talk. Read. Sing.* builds on statewide advertising and materials. In December 2018 the first *Talk.Read.Sing. Time Friday* streamed into local homes. Every Friday since then Jason Wells, Associate Director has delighted children with a live 20-minute Facebook show full of stories, songs, and general fun. Other activities included: two visits of the CA State Commission's First 5 Express; and a *Talk. Read. Sing.* night at the local semi-pro Blues baseball game.

## Priority Areas

### Perinatal Readiness Advocacy

### What Did We Accomplish?

#### Expanded Home Visiting Options for New Families

- Convened meetings of a Home Visiting Collaborative with representatives from First 5, Public Health, CAPSLO, and DSS.
- Encouraged submission of a successful state grant proposal by DSS to secure Home Visiting funds to support work with CalWorks families.

#### Increased Awareness about Health Impacts of Marijuana Use on Young Children and Their Families

- Attended a state convening of First 5 and public health leaders, held at First 5 LA, regarding marijuana use and maternal child health.
- Hosted a kick-off convening of a joint Public Health/First 5 conversation on communication and messaging related to cannabis risks and maternal child health.

*If you bungle raising your children, I don't think whatever else you do well matters very much.*  
Jacqueline Kennedy Onassis

### Why Is This Important?

Children's futures depend to a large degree on the decisions that adults make on their behalf. Parents do their best, but it is policy and decision makers that allocate resources for specific activities that impact health, education, and social-service programs that serve young children and their families.

First 5 SLO County works hard to serve children, but resources are simply insufficient, and the Commission must make difficult choices as to which needs are prioritized and to what extent they are addressed.

As part of a balanced approach, First 5 SLO County has identified Advocacy themes that are aligned with the priorities identified in the Strategic Plan. The Commission has also supported specific activities that meet their two-pronged definition of Advocacy. By raising awareness in the broader community and by working to support specific policies and systems changes, First 5 SLO County hopes to bring more resources to bear in ensuring that young children and their families are supported in reaching their maximum potential.

## Child Health & Development Advocacy

### What Did We Accomplish?

#### Stronger Alignment of Systems that Track and Address Developmental Milestones in Young Children

- Convened a Pediatric Town Hall attended by over 70 people, including 20 pediatricians and multiple resource/referral representatives. Included three speakers (Dr. Ed Curry, past president AAP Chapter Two; Dr. Nisha Abdul Cader; Dr. Sun Moon Lee, Ventura-based pediatrician). Co-hosted by AAP Chapter Two; sponsors included CenCal, SLO Medical Education and Research Foundation. Focus on pediatricians' role in developmental screening and referral and the current status of SLO County's *Help Me Grow* initiative.
- Mental Health Services Act 3 by 3 proposal submitted to Mental Health Services Act Innovations Project. Grant awarded to implement developmental screening practices in CHC and a private pediatric clinic. First 5 SLO County to serve as fiscal lead. Four-year project; total of \$800,000 from state MHSA Oversight and Accountability Commission.

#### Increased Access to Pediatric Oral Health Care and Disease Prevention

- Celebrated opening of new Virtual Dental Home program in South County, supported with state Dental Transformation Initiative funds, and managed through the Public Health's County Oral Health Program Manager's office.

## Early Learning Advocacy

### What Did We Accomplish?

#### Increased Parent Engagement as a Child's First Teacher

- Consulted with Community Foundation staff on the development of the Foundation's strategic plan; specifically the inclusion of early literacy as a focus area.

#### Community Investment in Quality and Affordable Access to Early Childhood Education

- Convened a Town Hall, *Where's The Care: Tackling Our Local Child Care Challenge*, that brought together approximately 150 people from business, education, government, and parents/caregivers. Speakers included: Global Family Services Director from Patagonia Inc.; City Manager from Gonzales; and Camille Maben, F5 CA Executive Director.
- As a Result of the Town Hall First 5 SLO County led the launch of a major advocacy campaign, *We Are the Care*; a community effort to promote affordable early childhood education and fostering increased valuing of the childcare profession.

## Family Strengthening Advocacy

### What Did We Accomplish?

#### Increased Access to Safe and Affordable Housing for Families with Young Children

- Linked advocacy on affordable childcare with advocacy on affordable housing, participating in SLO City Major City Goals workshop, Developers' Roundtable, and Healthy Communities Workgroup.

#### Increased Culture of Family Friendly Workplaces that Support Young Families

- Promoted family-friendly workplaces with the SLO Chamber of Commerce in a number of venues, including: Chamber Breakfast, CEO Roundtable, Grant Affairs Committee, and Business Council.

## Funded Programs

### Perinatal Readiness Priority Area

First 5 SLO County funded three programs/activities under this Priority Area in 2018/19.

- **BABES (Babes at Breast Education and Support):** the Public Health Department provided two support services to help women successfully breastfeed their children. Both were offered at WIC clinics throughout SLO County: 1) certified lactation consultation; and 2) peer counseling.
- **Baby's First Breath:** the Public Health Department provided tobacco cessation services for pregnant women and parents and other family members of children, 0-5, in order to prevent the children's exposure to environmental tobacco smoke.
- **Perinatal Mental Health Support Services:** the Center for Family Strengthening provided direct services for parents who are encountering mood disorders during or after pregnancy, including support groups, individual counseling, and a telephone Support Line.

*A person's a person, no  
matter how small.*

Dr. Seuss

#### Why Is This Important?

Getting ready for a baby doesn't happen on the way home from the hospital. The perinatal period begins the moment a woman realizes she is pregnant and continues through the first six months of the child's life.

Many things go into Perinatal Readiness, ranging from the mother's health to home safety, from the parents'/caregivers' relationship to finances.

A number of different services can help prepare for a new child, including: obstetrical care, dental care, health coverage, pediatric care, healthcare navigation, home visitation, tobacco cessation counseling, parenting education, nutritional counseling and fitness support, counseling and mental health services, financial support, early literacy, father involvement, and lactation education and support. Some families need help in a few areas, some need help in all areas.

The important thing is that the family (whether a single mother and her first child to a multi-generational extended family) is ready to help the child get the best start possible.



## BABES (Babes at Breast Education and Support)

Annual Funding \$179,370

### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- The lactation consultant made 716 contacts with 378 women about 1,030 issues at 180 clinic days for a mean of 2.7 issues/woman.
- The peer counselor made 1,316 contacts with 325 women for a mean of 4.0 contacts/woman.
- Women who received peer support were 43% MORE LIKELY to report EXCLUSIVE breastfeeding at six months than women without peer support, and 35% MORE LIKELY to report ANY breastfeeding.

**Objective 1:** Through June 30, 2020 to provide lactation consulting services to at least 400 unduplicated breastfeeding mothers, annually, at five satellite WIC clinics.

2018/19

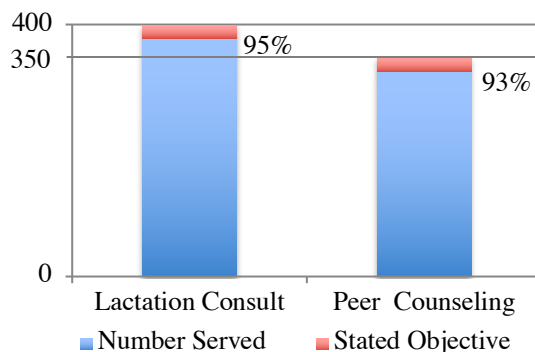
**378 women counseled – 95% of objective**

**Objective 2A:** Through June 30, 2020 to provide individual mother-to-mother peer support at WIC clinics for at least 350 unduplicated pregnant and breastfeeding women annually.

2018/19

**325 women received peer support – 93% of objective**

**Number of Women Receiving Breastfeeding Support, Served & Objective, 2018/19**



**Objective 2B:** By June 30, 2019 & 2020 annual reports will show: at least 60.6% of women participating in peer counseling are breastfeeding at 6 months; and 2) at least 25.5% of women participating in peer counseling are EXCLUSIVELY breastfeeding at 6 months.

2018/19

**67% ANY breastfeeding @ 6 mos – 111% of objective**

**44% EXCLUSIVE breastfeeding @ 6 mos – 172% of objective**

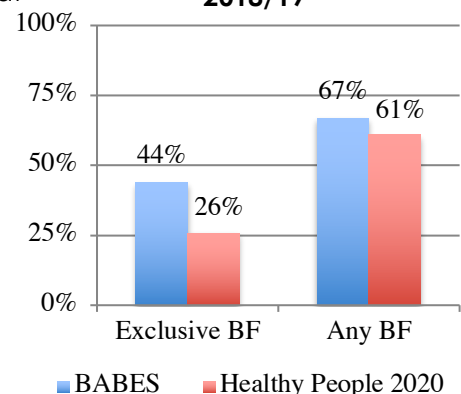
BABES PC breastfeeding rates compare favorably to the objectives set by Healthy People 2020. The EXCLUSIVE breastfeeding rate is 172% of the objective, and the ANY breastfeeding rate is 111% of the objective.

### Why Is This Important?

The health effects of breastfeeding are well recognized. Breast milk is uniquely suited to the human infant's nutritional needs, and is a live substance with unparalleled immunological and anti-inflammatory properties that protects against a host of illnesses and diseases. Breastfeeding benefits mothers, too, in the form of reduced risk for certain diseases, easier recovery from pregnancy-related weight gain, and facilitated bonding with their child.

Both lactation consultation and peer support are **Evidence-based Practices.**

**Percent BABES PC Women Breastfeeding at 6 Months vs Healthy People 2020 Objectives, 2018/19**



## Baby's First Breath (Tobacco Cessation)

Annual Funding \$55,000

### What Did We Accomplish?

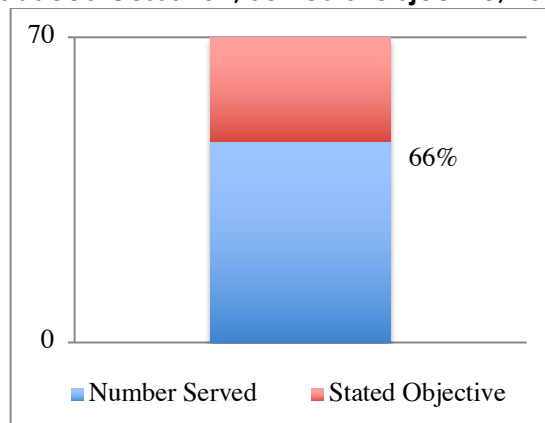
#### DATA HIGHLIGHTS:

- 46 persons participated in cessation counseling in 2018/19: 73% parents & other family members and 27% pregnant women.
- Referrals continued to drop: from  $\bar{x}$  = 75 in 2013/14 to 2016/17 to  $\bar{x}$  = 47 in 2016/17 & 2017/18 to 37 this year.
- Other challenges faced this year included inconsistent commitment to the program by the Perinatal Outreach Extended Groups (POEG) sites (only 2 of the 3 sites participated most of the year), and reduced availability due to the maternity leave for the Program Coordinator.

**Objective 1A:** Through June 30, 2020 to provide tobacco cessation services to at least 70 pregnant women and/or parents & family members of children, 0-5, annually.

2018/19  
**46 received cessation counseling**  
**66% of objective**

**Number of Pregnant Women, Parents, and Other Family Members in Tobacco Cessation, Served & Objective, 2018/19**



During 2018/19:

- Fifty-four percent (55%) of those in counseling received Nicotine Replacement Therapy in support of their cessation.
- The majority of participants were POEG clients (60%).

**Objective 1B:** By June 30, 2019 & 2020 annual reports will show at least a 25% tobacco quit rate at six months after cessation program enrollment.

2018/19

Follow-up sampling rates were quite low. The rate at six months was 24% (14 of 49 clients from last year), rendering the resultant quit rate to be less than reliable. Therefore, no quit rates are reported for 2018/19, nor have they been in the last three years.

### Why Is This Important?

Children are particularly susceptible to the harmful effects of environmental tobacco smoke (ETS) during pregnancy and after birth. Before birth ETS is associated with preterm birth, intrauterine growth retardation, and perinatal mortality. After birth ETS has been linked to respiratory illness, including asthma, middle ear infections, neurobehavioral problems, and poor performance in school.

Tobacco cessation counseling has been researched, and is an **Evidence-Based Adjunct** to California's population-based cessation strategies.



## Perinatal Mental Health Support Services

Annual Funding \$6,767

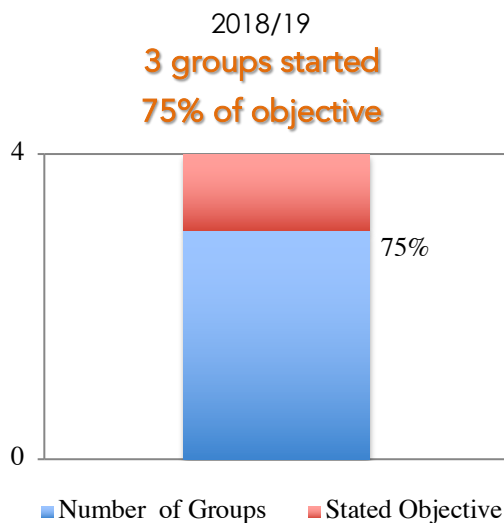
### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- The Perinatal Mental Health Support Services Program was reorganized from primarily a capacity-building activity to one aimed at direct services through semi-monthly peer support groups, individual crisis counseling, and a telephone Support Line.

**Objective 1:** Through June 30, 2020 to provide at least 4 semi-monthly co-facilitated peer support groups, annually, for parents experiencing perinatal mental health issues.

Groups were started in 3 communities during 2018/19: Nipomo, San Miguel, and SLO. The Nipomo group met twice (2x) in the fall with 4 mothers, and was restarted during the spring with 7 mothers. The SLO group began in October with 7 mothers, but met only 1 time. The San Miguel group began in the third quarter as a weekly group with 12 mothers, but became a monthly group in the fourth quarter.



#### Why Is This Important?

Birth can be a stressful experience, and having a new baby in the household can be equally difficult. New parents can experience mood disorders that can add to the challenges they face in parenting their baby and in relating to each other. Parents need all their strength, teamwork, and concentration to effectively raise their new child. Identifying mood disorders early and helping parents find qualified support can prevent serious issues from ever happening.

Both capacity building and the Support Line are **Promising Practices.**

**Objective 2:** Through June 30, 2020 to provide 5 sessions of immediate professional counseling for parents, annually, who are experiencing perinatal mood and anxiety disorders.

2018/19

**13 counseling sessions provided**  
**260% of objective**

12 parents received 13 sessions of counseling. 170 parents received information about perinatal mood and anxiety disorders.

## Child Health & Development Priority Area

First 5 SLO County funded five programs/activities under this Priority Area in 2018/19.

- **BEST PALS (Behavior Education Screening Parenting and Life Skills):** Pediatric Physical Therapy And Services, Inc. operates BEST PALS, a program of developmental and behavioral assessments and short-term treatment for children with mild-to-moderate delays who do not qualify for services elsewhere.
- **County Oral Health Program Manager:** the Public Health Department provides: 1) coordination of and support for the Oral Health Coalition; 2) preventive services to children (e.g., screening, fluoride varnish treatments, and referrals to a dental home); and 3) oral health education for parents and caregivers.
- **Health Access Trainer:** the Carsel Consulting Group provides wide-ranging health-related professional-development and in-service trainings for anyone who works with children, 0-5, and their families.
- **Tolosa Children's Dental Center Central Region Dental Access:** operates a children's dental clinic in San Luis Obispo to provide a dental home for low-income children. First 5 SLO County funds support preventive treatment.
- **Vision Screening:** Optometric Care Associates operates a program to screen children, 3-5, for vision problems, and then refers them for treatment, if indicated.

*Children are the hands by which we take hold of heaven.*

Henry Ward Beecher

### Why Is This Important?

It may be obvious that a young child's health and development are important. Growth, learning, and development are maximized when there is strong general health, good oral health, and regular achievement of milestones, physical, behavioral and emotional. Issues with health and development in a child can impede learning and growth, and can have long-lasting effects.

Health insurance may be available to all children in California, but coverage does not ensure access. In SLO County obtaining healthcare for children on Medi-Cal can be challenging, as systems can be complex and difficult to navigate.

Children undergo development in areas ranging from social-emotional growth to physical growth. Any delays, if not addressed, can also have lasting consequences.

Activities that support early health and development, as well as those that seek early identification of those who need care, are critical to helping families ensure that their children get the best possible start.

## BEST PALS (Behavior Education Screening Parenting and Life Skills)

### What Did We Accomplish?

Annual Funding \$22,500

#### DATA HIGHLIGHTS:

- Of the 38 children with closed cases this year 9 (24%) completed treatment. 23 (60%) were connected with a safety-net provider, either at intake (2, or 5%) or at end of treatment with BEST PALS (21, or 55%).

**84% of BEST PALS children received the treatment they needed**

**Objective 1:** Through June 30, 2020 to provide developmental assessments to at least 52 children, 0-5, annually, with possible mild developmental and/or behavioral delays.

2018/19

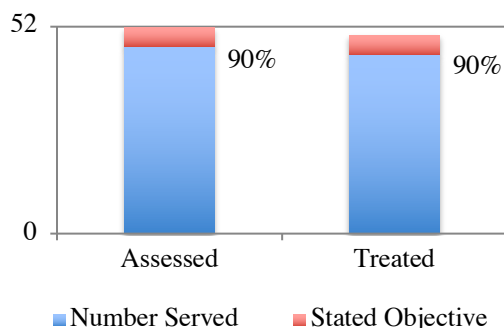
**47 children assessed – 90% of objective**

**Objective 2A:** Through June 30, 2020 to provide treatment for mild delays to at least 50 children, 0-5, (and/or their parents), annually.

2018/19

**45 children treated – 90% of objective**

**Number of Children Assessed & Treated,  
Served & Objective, 2018/19**



#### Why Is This Important?

Children with mild developmental delays and/or behavior problems can be ineligible for treatment in the safety net, and can easily fall through the cracks in the system. Small delays can escalate over time as children fall farther and farther behind their peers. Early assessment and intervention can have two positive outcomes: the child catches up; or the child is determined to be eligible for treatment at a safety-net provider.

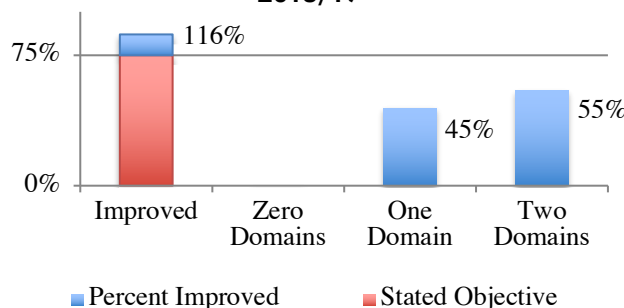
BEST PALS has not been subjected to scientific analysis, so it is considered **Evidence-Informed.**

**Objective 2B:** Through June 30, 2020 at least 75% of children completing a minimum of 6 interventions will demonstrate improvement of at least one level in relevant a domain(s) on the Developmental Assessment of Young Children (DAYC).

2018/19

**87% of children treated and closed improved – 116% of objective**

**Percent of Children Improved on DAYC, and Number of Domains of Improvement  
2018/19**



## Health Access Trainer

Annual Funding \$34,260

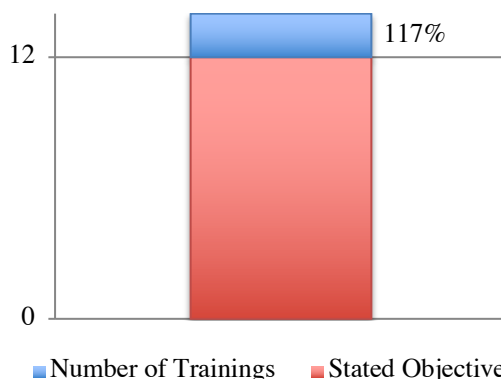
### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- The Health Access Trainer provided 14 professional development opportunities to 361 child-serving professionals in 2018/19.
- One of the issues on which the HAT focused this year was proposed changes to the Federal Government's policies regarding the use of public services (e.g., healthcare, food stamps, etc.) in regards to immigration status. 8 work-shops (attended by 139 participants) were held prior to the close of public-comment. The purposes of the workshops were: 1) to help service organizations to encourage immigrants to continue to use public services for which they are eligible; and 2) to provide the SLO community with messaging for public comment.

**Objective 1:** Through June 30, 2020 to provide at least 12 professional development activities, annually, to increase capacity in SLO County to connect children, 0-5, with available healthcare services.

2018/19  
**14 trainings offered – 117% of objective**  
**Number of Health-related Professional Development Trainings,  
 Actual & Objective, 2018/19**



The following other trainings were offered:

- Successful Practices for Speech & Behavior in Early Education & Care* was offered 1 time for 35 participants.
- Promoting Social/Emotional Development* was offered 1 time for 13 participants.
- How to Advocate for Health Access* was held 1 time for 11 participants.
- Executive Functioning in Young Children* was offered 1 time for 24 participants.
- Special Needs Forum* was offered 1 time for 44 participants.
- Supporting Immigrant Families in Troubled Times* was offered 1 time for 95 participants.

The HAT met with partners 8 times. In addition, the HAT had 34 other contacts with providers, and had 321 meetings and contacts with other groups.

The HAT published 7 newsletters, and distributed them to a list of 445 providers, and the SLOHealthAccess website was kept updated with local resources and information, including updates on immigration and Affordable Care Act, an updated directory of Family Resource Centers, and upcoming training announcements.

#### Why Is This Important?

While all children, 0-5, in California are eligible for health coverage, accessing healthcare can still pose a challenge to many families. Language, poverty, and transportation can all be barriers.

The system can be daunting to families who are unfamiliar with its policies and procedures. Forms can be challenging, and waiting lists can be long. Cultural norms may suggest that families see doctors only when sick.

The HAT has not been researched, and so it is considered to be a **Promising Practice.**

## County Oral Health Program Manager

Annual Funding \$40,000

### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- Progress was made on one of the most intractable issues in children's oral health, the lack of dental providers accepting Denti-Cal. 4 new providers agreed to provide care to children under the state reimbursement program
- 774 children were screened with 92% of them receiving oral health preventive care in the form of fluoride varnishes.
- 422 parents received education about oral health in their children.

**Objective 1:** Through June 30, 2020 to implement at least 3-5 policy/system-changes strategies from the goals identified in the SLO County Children's Oral Health Strategic Plan related to Prevention and Treatment Access.

2018/19

#### 2 systems changes – 67% of objective

Added 4 new dental providers willing to accept Medi-Cal reimbursement, including 2 pediatric providers.

Provided training for 2 dental assistants to enable them to become Registered Dental Assistants.

The Oral Health Coalition met 6 times with a mean attendance of 16. The COHPM targeted three areas: Access to Oral Disease Prevention Programming (15 meetings); Access to Oral Health Care (44 meetings); and Outreach (67 meetings).

#### Why Is This Important?

Good oral health is important for children, so they need access to a dental home.

As early childhood caries is an entirely preventable disease, children's oral health services must focus on primary and secondary prevention strategies.

Children should be screened early (at least by their first birthday), and high-risk children should be treated with fluoride varnishes regularly.

Oral health screening and preventive services range from **Evidence-Informed** to **Evidence-based Practices**.

**Objective 2A:** Through June 30, 2020 to provide preventive oral health services to at least 1,100 low-income children, 0-5, annually.

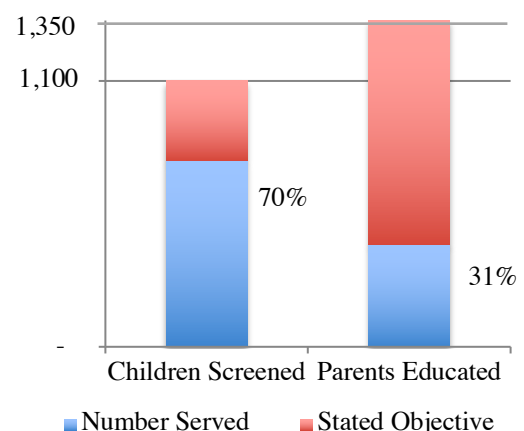
**Objective 2B:** Through June 30, 2020 to provide education about children's preventive dental care to at least 1,350 parents of children, 0-5, annually.

2018/19

774 children screened – 70% of objective

422 parents educated – 31% of objective

**Number of Children with Preventive Oral Health Services and Number of Parents Being Educated Served & Objective, 2018/19**



## Tolosa Children's Dental Center Central Region Dental Access

### What Did We Accomplish?

Annual Funding \$29,500

#### DATA HIGHLIGHTS:

- Tolosa moved into a new clinic space during the last quarter of the year. A shortage of dentists and assistants kept them from immediately expanding their hours of service.
- 125 children, 0-5, received preventive dental care in 2018/19. Of the 43 new children, 35 (81%) were making their first visit to a dentist at the SLO clinic.
- 315 children, 0-5, had dental appointments in 2018/19, 64 of them (20%) for restorative treatment.
- The plurality of the children at the clinic come from SLO (43%), but a majority come from elsewhere: South County - 29%; and Coastal Region - 25%), reflecting a lack of capacity for dental care in other areas of the county.

#### Why Is This Important?

In a study into the capacity in SLO County to deliver oral health services to low-income children, the Central Region was one of the most underserved areas.

As stated earlier, oral disease in low-income children can exact serious consequences that can affect the children for life. Providing a dental home that can help prevent disease is critical in ensuring that children are healthy and ready to learn in school.

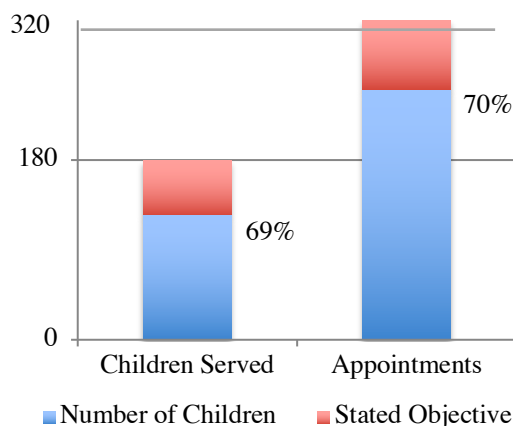
**Objective 1:** Through June 30, 2020 to contribute to providing a dental home to at least 180 children, 0-5, annually in the Central Coast Region through up to 320 preventive dental care appointments.

2018/19

**125 children treated – 69% of objective**

**251 appointments – 70% of objective**

**Number of Children Treated & Number of Appointments, Served & Objective, 2018/19**



Oral health preventive services are an **Evidence-based Practice**.



## Vision Screening

Annual Funding \$30,000

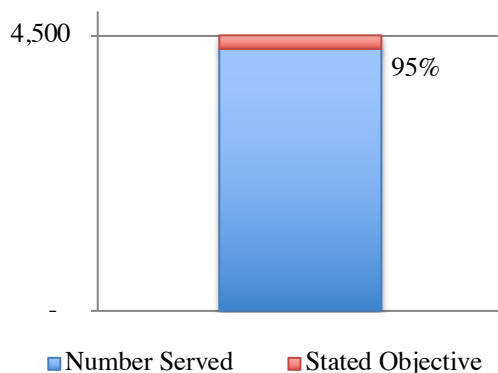
### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- 354 children were identified as having vision problems (8% of those screened). Another 322 children (8%) were rated borderline, and advised to undergo screening again within the next year.
- 76% of the children identified as having a vision problem were successfully linked with vision treatment.

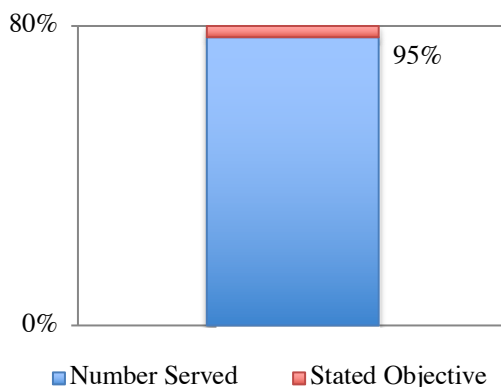
**Objective 1:** Through June 30, 2020 to provide vision screening to at least 4,500 children, 2-5, annually.

2018/19  
**4,288 children screened – 95% of objective**  
 Number of Children Screened for Vision Problems,  
 Served & Objective, 2018/19



**Objective 2:** Through June 30, 2020 to refer screened children with vision disorders such that at least 80% of them connect with needed treatment.

2018/19  
**76% children treated – 95% of objective**  
 Number of Children Linked to Treatment for Vision Problems,  
 Served & Objective, 2018/19



#### Why Is This Important?

Vision is a key component of development and early learning. Equal input from both eyes is important to building the brain's vision centers. If a child's eyes cannot send clear images to the brain, the resulting deficits can be permanent and untreatable.

The American Association of Ophthalmology recommends screenings at birth, infancy, preschool, and elementary school. Early identification is key to proper treatment, certainly before a child enters school. Vision screening for children 3 years old or older is an **Evidence-Based Practice**.

## Early Learning Priority Area

First 5 SLO County funded three programs/activities under this Priority Area in 2018/19.

- **Early Learning for All (ELFA):** the SLO County Office of Education's ELFA program offers professional development opportunities for ECE providers throughout SLO County, as well as serving as an advocate for early childhood education and development.

### **First 5/California State Preschools (CSPP) Program:**

CSPPs are located at eight sites throughout the county. Their ten classrooms offer high-quality preschool to families who can meet the income requirements. Under this program First 5 SLO County subsidizes families who are above the CSPP threshold. This allows full enrollment at the sites, and serves families who might not otherwise be able to afford preschool for their children.

- **SR Site Coordinators:** employed by their school districts, they are responsible for monitoring all SR activities, as well as directly offering a number of them. They work closely with SR partners and regularly coordinate with the school principals, teachers, and staff. The programming they offer includes transition programs, parent education and support, and acting as single-points-of-contact for families.

*Children must be taught how to think, not what to think.*

Margaret Mead

### Why Is This Important?

Children are born with all of the brain cells they are ever going to have. It's the connections between the cells that grow and develop over time, and it's what those cells and connections learn to do that determines all that a person will become.

Research is discovering the immense importance of early learning. By age 3 a child's brain is 80% developed. From birth talking, reading, singing, hugging, rocking, and dancing with a child all help her brain develop.

The number of words a young child hears is directly related to how well he will read in school. The more words, the better.

But, there are other aspects of development that are also critical to a child's readiness for school. The experience, management, and expression of emotions and the ability to form positive and rewarding relationships with others are even better predictors of success in school than a child's cognitive skills and family background. High-quality early care and education set the stage for school. And, preschools and schools need to be ready for children, too.

## ELFA (Early Learning for All)

Annual Funding \$44,409

### What Did We Accomplish?

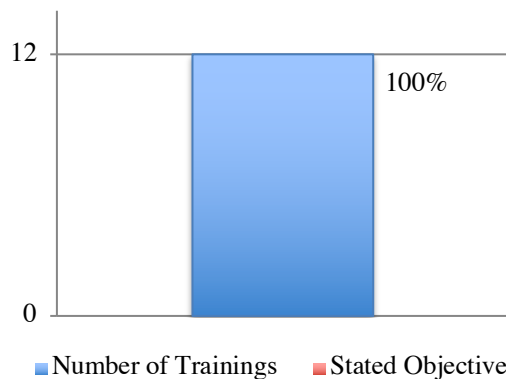
#### DATA HIGHLIGHTS:

- 12 professional development activities were conducted in 2018/19. They were attended by 196 (duplicated) ECE professionals.
- Two (2) SEFEL (Social-Emotional Foundations of Learning) trainings were provided for 16 ECE providers. One was a Leadership Academy (9 attendees), and the other was a three-session SEFEL Institute for 12 providers. Other trainings included: Mantle of Leadership (2x - one for 10 past participants on Family Engagement, and one for 12 new providers); a STEM training for 16 providers; a Pyjama Drama training for 16 providers; and 4 CPIN (California Preschool Instructional Network) trainings: Physical Sciences (32 attendees); Social-Emotional Development (29); STEM (54); Drama (46); and Family Partnerships and Culture (20).

**Objective 1:** Through June 30, 2020 to provide at least 12 professional development activities, annually, in Early Childhood Education (ECE).

2018/19  
**12 professional development activities provided**  
**100% of objective**

**Number of Professional Development Activities,  
Actual & Objective, 2018/19**



#### Why Is This Important?

Teachers don't stop learning once they obtain their credentials. Quality childcare and education requires continual professional development. But, many teachers and childcare workers can't attend classes at colleges or universities because of scheduling, cost, and/or language. Low-to-no-cost professional development during evening hours in Spanish that addresses issues that matter locally is the answer for many ECE professionals.

Professional development is considered an **Evidence-Based Practice**.

## First 5/California State Preschools Program

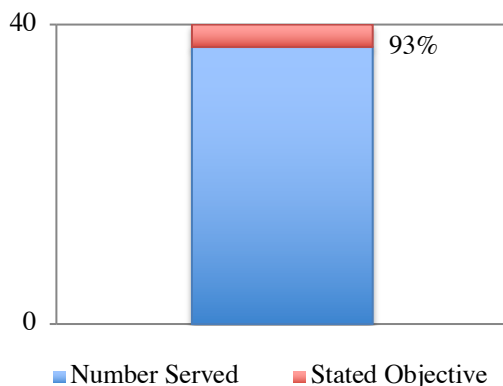
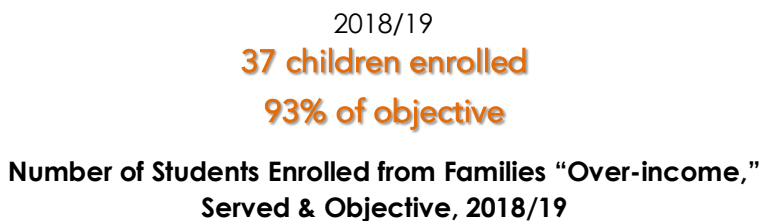
Annual Funding \$192,104

### What Did We Accomplish?

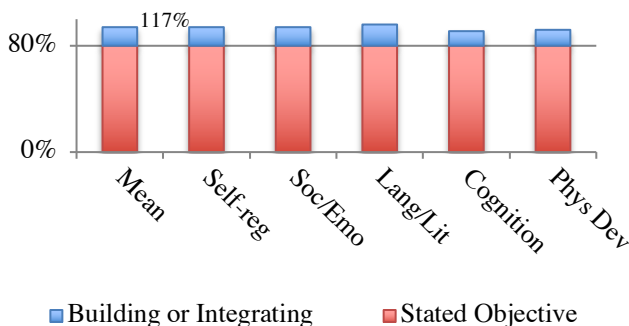
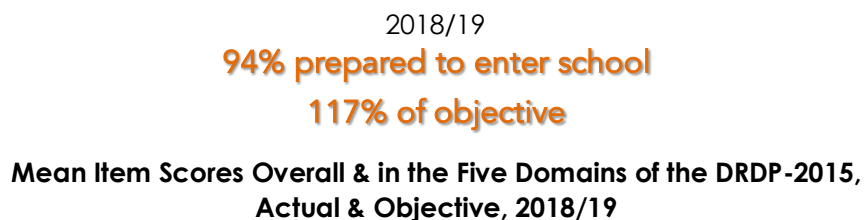
#### DATA HIGHLIGHTS:

- 37 students whose parents were “over income” were enrolled at 9 of the 10 California State Preschool Program (CSPP) classrooms. The 10 classrooms averaged 65% of capacity.
- 96% of the students achieved *Building or Integrating* on average on the DRDP-2015.

**Objective 1A:** Through June 30, 2020 to provide three-hour preschool programming at ten CSPP sites for up to 40 children, ages 3-5, annually, whose parents are above the CSPP income-eligibility rate.



**Objective 1B:** By June 30, 2019 & 2020 at least 80% of participating four-year-olds will be prepared to enter kindergarten as measured by the Desired Results Development Profile-2015 (DRDP-2015).



#### Why Is This Important?

Quality preschools are proven to be effective in helping children get ready for success in school. The California State Preschool Program offers high-quality ECE for families who are low income. But, not all classes are full, and an empty seat is a missed opportunity.

The First 5/CSPP Program subsidizes children whose families are above CSPP's income requirements, which have not kept pace with the rising cost of living. The children get an education, and the CSPP classes are more fully utilized.

Quality preschool is considered an **Evidence-Based Practice**.

## School Readiness Site Coordinators

Annual Funding \$104,381 (GB) - \$97,585 (Oc)

### Family Support

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- The Georgia Brown Site Coordinator reported working as a single-point-of-contact with 200 families in 2018/19, reporting 581 contacts with or about these families, for a mean of 2.9 contacts per family.
- School transition was covered in just under half of the Georgia Brown contacts (45%), early childcare and preschool accounted for 27% of the contacts, while family-support and family-literacy contacts were 20%. Translation and transportation were 9%, and health contacts were 3% of all contacts.
- The Oceano Site Coordinator reported working as a single-point-of-contact with 250 families in 2018/19, reporting 648 contacts with or about these families, for a mean of 2.6 contacts per family.
- Family-support and literacy contacts made up 38% of the Oceano contacts with families. Childcare and preschool totaled 28%. School transition was an issue for 23%. Health contacts were 7%. Translation and transportation were less than 1%.

**Objective 1:** Through June 30, 2020 to serve as a single-point-of-contact for at least 80 unduplicated families, annually, in the Georgia Brown/Oceano school-communities.

2018/19

#### Georgia Brown:

200 families served as a single-point-of-contact

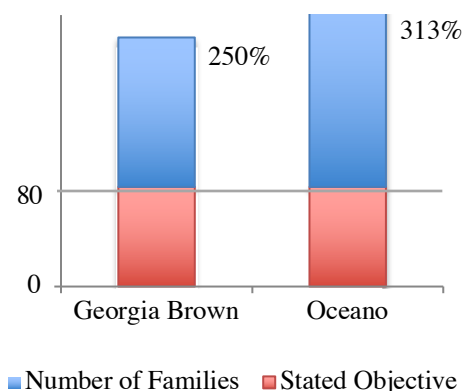
250% of objective

#### Oceano

250 families served as a single-point-of-contact

313% of objective

Mean Number of Families Contacted and/or Referred,  
Served & Objective, 2018/19



#### Why Is This Important?

The SR Site Coordinator at each site acts as a bridge between children, 0-5, and their families, local community resources, and the elementary school.

Acting as a single-point-of-contact the coordinators interact with families through the activities they conduct as well as at school and community activities. They build relationships with and recruit and engage families, connecting them with the needed resources and referrals.

SR Site Coordinators are considered an **Evidence-Based Practice**.

## School Readiness Site Coordinators

Annual Funding \$104,381 (GB) - \$97,585 (Oc)

### Early Education and Literacy

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- The Georgia Brown Site Coordinator reported 74 *Literatura de la Familia* groups in 2018/19, for 151 unduplicated children and 105 unduplicated parents.
- Results from parent surveys at Georgia Brown indicated that 23% more parents read to their children at home 4 or more times per week after participating in *Literatura de la Familia* than before.
- Results from parent surveys at Georgia Brown indicated that reading behavior improved after participating as far as: parents asking their children questions about the book (87% compared to before); and children listening quietly (75% more).
- The Oceano Site Coordinator reported 56 *Hora de Literatura* groups in 2018/19, for 76 unduplicated children and 61 unduplicated parents.

#### Why Is This Important?

The Site Coordinators conduct early-learning, family-literacy and parent-engagement activities. Reading, storytelling, singing, playing with shapes and colors, and other early learning activities are structured to encourage parent-child connection and parent involvement in early learning and literacy. At Georgia Brown the group is called *Literatura de la Familia*, (Literature for the Family) and at Oceano it's *Hora de Literatura* (Literature Hour).

The early literacy/parent engagement activities are considered **Evidence-Informed Practices**.

**Objective 2:** Through 30, 2020 to provide at least 80 groups in early learning/family literacy/parent engagement, annually, to at least 70 unduplicated families (children, 0-5, and parents).

2018/19

#### Georgia Brown:

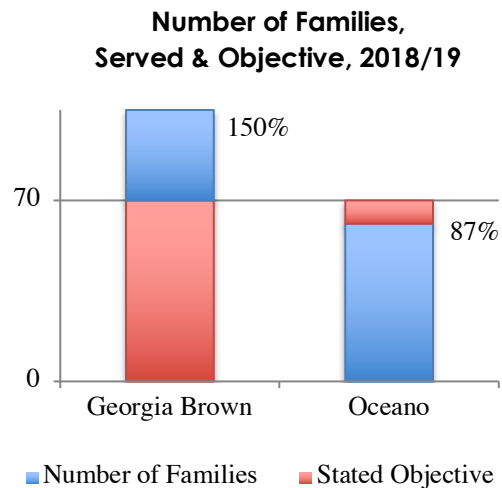
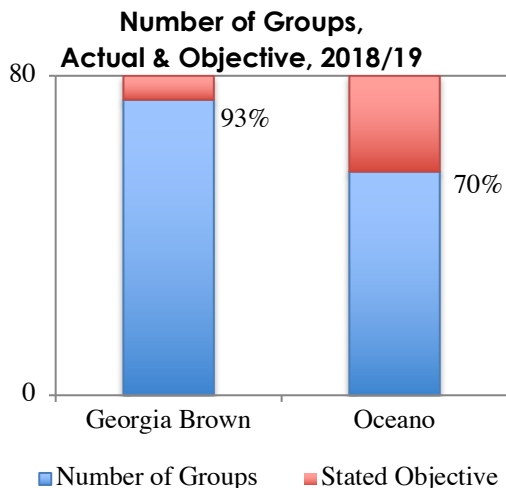
74 early literacy groups held – 93% of objective

105 families participated – 150% of objective

#### Oceano

56 early literacy groups held – 70% of objective\*

61 families participated – 87% of objective\*





## School Readiness Site Coordinators

Annual Funding \$104,381 (GB) - \$97,585 (Oc)

### Parent Education

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- The Georgia Brown Site Coordinator reported 31 sessions of *Cuentos Familiares* groups in 2018/19, for 48 unduplicated parents.
- The Oceano Site Coordinator reported 35 sessions of *First 5 Fridays* in 2018/19, for 36 unduplicated parents.

**Objective 3:** Through June 30, 2020 to provide at least 30 groups in parent education/support, annually, to at least 35 unduplicated parents.

2018/19

#### Georgia Brown:

**31 parent education groups held – 103% of objective**

**48 families participated – 140% of objective**

#### Oceano

**35 early literacy groups held – 117% of objective\***

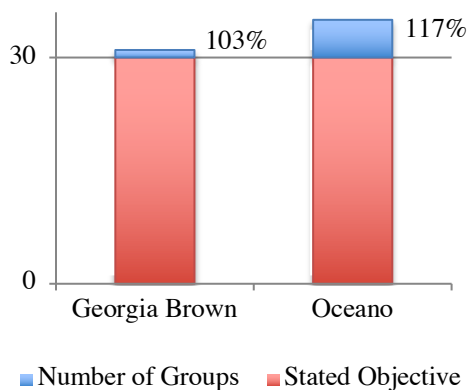
**36 families participated – 103% of objective\***

#### Why Is This Important?

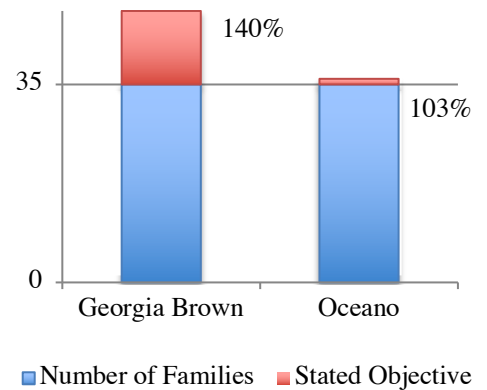
The Site Coordinators also facilitated parent groups that meet weekly. Georgia Brown's *Cuentos Familiares* (Family Stories) and Oceano's *First 5 Fridays* offer support and education in issues facing parents and families. Sometimes the group involves presentation by an expert from a program that both educates and builds connections between families and local resources. The groups also offer an opportunity for parents to meet, support, and learn from each other.

The parent groups are considered **Evidence-Informed Practices**.

Number of Groups,  
Actual & Objective, 2018/19



Number of Families,  
Served & Objective, 2018/19



## School Readiness Site Coordinators

Annual Funding \$104,381 (GB) - \$97,585 (Oc)

### Kindergarten Transition

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- Georgia Brown held 4 classes at their Summer Pre-K Camps for 98 of their incoming students (57%), with 115 parents.
- Data from parent surveys were available from Georgia Brown. They indicated that almost all children benefited from camp (e.g., met more children (98%), enjoyed it (97%), felt more comfortable in the classroom (97%), and learned about the school (93%). Parents reported feeling more comfortable with the school (94%), meeting other parents (91%), and meeting school personnel (91%). Fewer parents learned how to volunteer at the school (69%) or learned about parent groups that might involve them in the school (51%).
- Oceano held 2 classes for 40 of their incoming students (62%), with 43 parents.

• **Objective 4:** Through June 30, 2020 to provide annual Summer Pre-K Camps for at least 75% of incoming kindergarten students.

2018/19

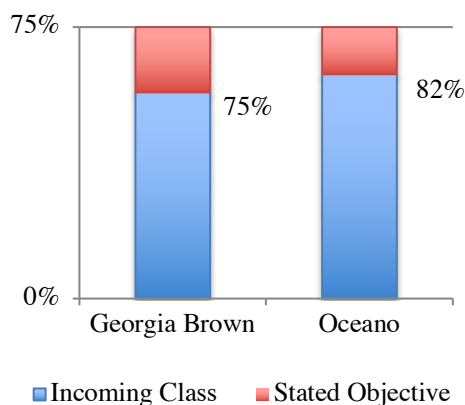
#### Georgia Brown:

57% of incoming students at camp – 75% of objective

#### Oceano

62% of incoming students at camp – 82% of objective

Percent of Incoming Students at Summer Pre-K Camp,  
Served & Objective, 2018/19



#### Why Is This Important?

Even for children who have been in preschool the first day of kindergarten can be scary. Spending a few weeks on a school campus in a classroom before school starts can be of tremendous help.

The two-week camps bring children into the classroom with kindergarten teachers for lessons, lunch, play, and more. Parents are involved, too, as they attend parent meetings during the camp's first week.

Research on the effectiveness of transition summer camps range from **Evidence-Informed** to **Evidence-Based Practices**.

## Family Strengthening Priority Area

First 5 SLO County funded six programs/activities under this Priority Area in 2018/19.

- **Early Childhood Family Advocacy Services:** the Center for Family Strengthening provides Family Advocates (FAs) in three different communities in SLO County: Atascadero/Paso Robles, San Luis Obispo, and Nipomo. Their primary activity is to provide case management services for families of children, 0-5. They also provide brief contacts to assist families who do not require intensive support.
- **Family Advocates (School Readiness Neighborhoods):** the SR FAs perform a number of tasks. Case management is the primary activity, but they also support the work of the Site Coordinators.
- **Family Support Counseling:** a part-time provider offers therapeutic interventions to families in need in the two SR school-communities. Families are referred through the Family Advocates. Providing individual and family counseling to parents, young children, and older siblings the counselors intervene in and help the family resolve crises that threaten their wellbeing. The counselor returned to this program in May 2019.
- **Parent Education/Support Pilot Projects:** 1) the Parent Café pilot project uses peer facilitators to lead parents in discussions that promote the building of the five Strengthening Families Protective Factors; and 2) the Born Learning pilot project fuses the United Way's six-session curriculum with six general support groups to help Spanish-speaking parents to engage in their children's education and learn effective parenting skills – no groups were held in 2018/19.
- **Parents Helping Parents:** operates three Family Resource Centers (FRC), in San Luis Obispo, Atascadero, and Grover Beach. The FRCs include libraries that are stocked with resources to help parents learn about their child's needs and how to address them. Trainings are offered to parents in autism, Down's Syndrome, and other special needs. And, parents are connected with each other to promote peer support.

*The family is one of nature's masterpieces.*

George Santayana

### Why Is This Important?

Children don't grow up in isolation. They grow up in families. Even children living away from their parents grow up in a group of some kind.

Early social interaction is key to early development - not only brain development, but person development. Involved, loving, and supportive parents or caregivers are crucial to full human development. Families instill values, promote social and emotional development, and foster responsibility and resilience.

Families are where children learn to give and take, to communicate effectively, to resolve conflicts, and to solve problems. Strong family relationships teach children to develop, recognize, and appreciate strong relationships outside of the family.

Research has identified five Protective Factors that contribute to family strength:

- Parental resilience
- Social connections
- Knowledge of parent and child development
- Concrete support in times of need
- Social and emotional competence of children

## Early Childhood Family Advocacy Services

Annual Funding \$88,000

### What Did We Accomplish?

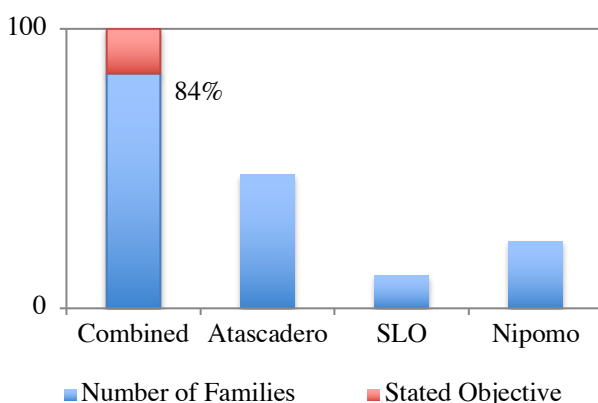
#### DATA HIGHLIGHTS:

- The Family Advocates provided case management to the following numbers of families: 48 at the LINK in Atascadero; 12 at the Child Development Resource Center in SLO; and 24 in Nipomo.
- The FAs also made brief contacts with: 61 families at the LINK in Atascadero; 7 families at the Child Development Resource Center in SLO; and 3 families in Nipomo.

**Objective 1:** Through June 30, 2020 to provide family advocacy/case management for at least 100 unduplicated parents and primary caregivers of children, 0-5, as well as pregnant women and their partners at three locations, annually.

2018/19  
84 families case managed – 84% of objective

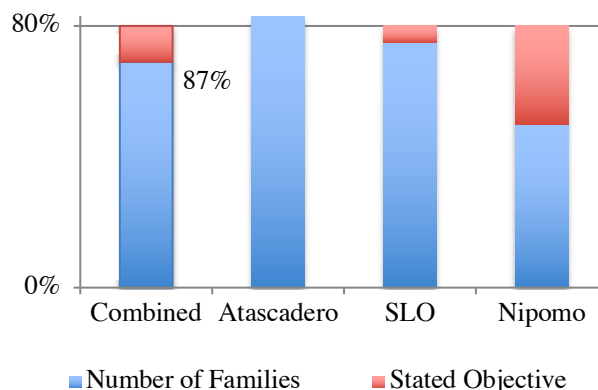
Number of Families Receiving Case Management Served & Objective, 2018/19



**Objective 2:** By June 30, 2019 & 2020 for at least 80% of families with at least 3 contacts to demonstrate improvement in at least one area of the Apricot Client Assessment.

2018/19  
69% of families showed improvement  
87% of objective

Percentage of Case-managed Families Improving on 90-day Assessment, 2018/19



### Why Is This Important?

Family Advocates (FAs) are knowledgeable about the needs of the families they serve, and they are familiar with the available resources in their communities. They apply a systems-of-care approach that is community based, family focused, and culturally competent. FAs are easily accessed, and collaborate with providers to offer consistent strength-based supports that are individualized to the needs of each family.

Family Advocacy in this context is considered an **Evidence-Informed Practice**.

## Family Advocates (School Readiness Neighborhoods)

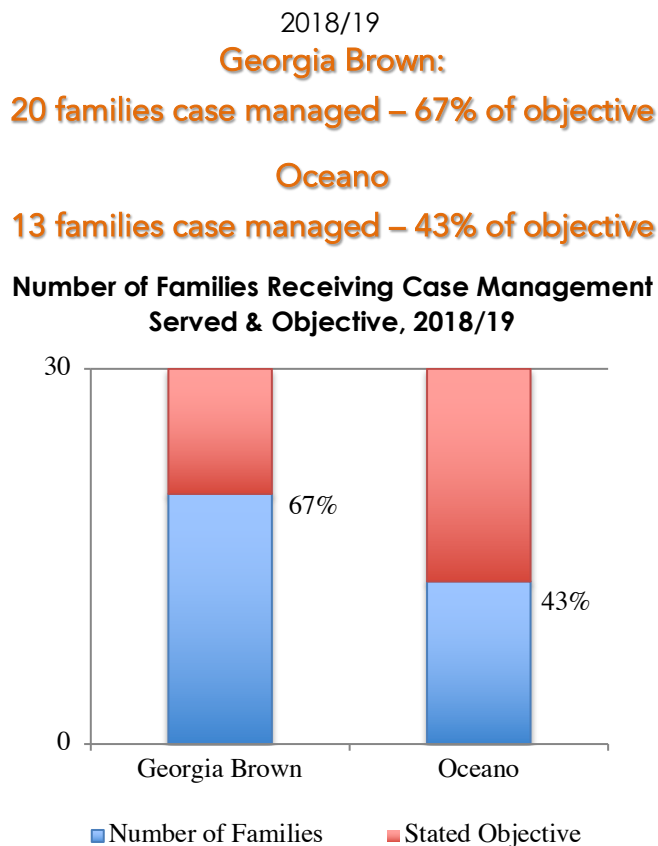
### What Did We Accomplish?

Annual Funding \$44,000 (GB) - \$44,000 (Oc)

#### DATA HIGHLIGHTS:

- The Georgia Brown Family Advocate provided case management to 20 families in 2018/19, and the Oceano FA case managed 13 families.
- The Georgia Brown Family Advocate acted as a single-point-of-contact for 271 families in 2018/19, and the Oceano FA was a single-point-of-contact for 125 families.

**Objective 1:** Through June 30, 2020 to provide family advocacy/case management for at least 30 unduplicated families with children, 0-5, annually, in the Georgia Brown and Oceano school-communities.



#### Why Is This Important?

Family Advocates (FAs) are knowledgeable about the needs of the families they serve, and they are familiar with the available resources in their communities. They apply a systems-of-care approach that is community based, family focused, and culturally competent. FAs are easily accessed, and collaborate with providers to offer consistent strength-based supports that are individualized to the needs of each family.

Family Advocacy in this context is considered an **Evidence-Informed Practice**.

**Objective 2:** Through June 30, 2020 to serve as a single-point-of-contact for at least 50 unduplicated families with children, 0-5, annually, in the Georgia Brown and Oceano school-communities.

2018/19

**Georgia Brown:**  
271 families served – 542% of objective

**Oceano**  
125 families served – 250% of objective

**Objective 3:** Through June 30, 2020 to provide at least 30 groups in parent education/support, annually, to at least 25 unduplicated parents of children, 0-5, in the Georgia Brown school-community.

2018/19

28 groups – 93% of objective\*

47 families – 188% of objective

## Family Support Counselor (School Readiness Neighborhoods)

### What Did We Accomplish?

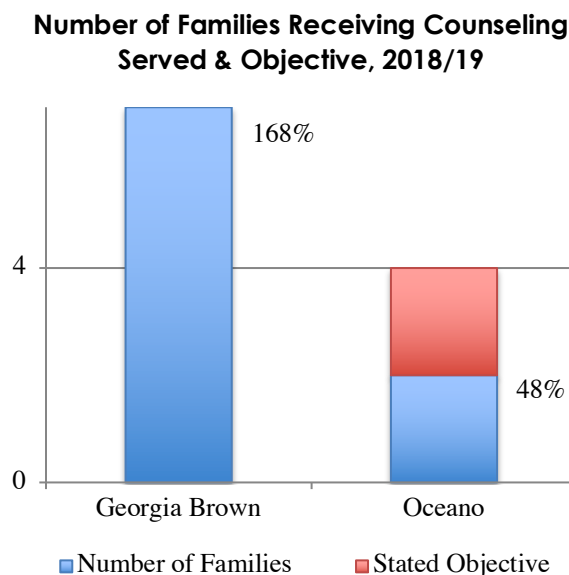
Annual Funding \$10,000

#### DATA HIGHLIGHTS:

- The Family Support Counselor saw 7 families in counseling at Georgia Brown during the last two months of 2018/19.
- At Oceano the Family Support Counselor saw 2 families in counseling during the last two months of 2018/19.

**Objective 1:** Through June 30, 2020 to provide Family Support Counseling services for at least 25 families, annually, while maintaining an on-going caseload of 8 families in each of the Georgia Brown and Oceano school-communities.

2018/19  
**Georgia Brown:**  
**7 families counseled – 168% of objective\***  
**Oceano**  
**2 families counseled – 48% of objective**



\* Prorated for two months of the year

#### Why Is This Important?

Stressors on families can have direct and indirect impacts on children, 0-5, even though the stress itself may have nothing to do with them.

Parental conflicts, struggling with basic needs, acting out by an older (or younger) sibling can all impact a child.

Family Support Counseling offers short-term individual and family counseling to overcome specific problems and alleviate the family's stress.

Family Support Counseling is considered an **Evidence-Based Practice**.



## Parent Café Parent Group Pilot Project

Annual Funding \$15,568

### What Did We Accomplish?

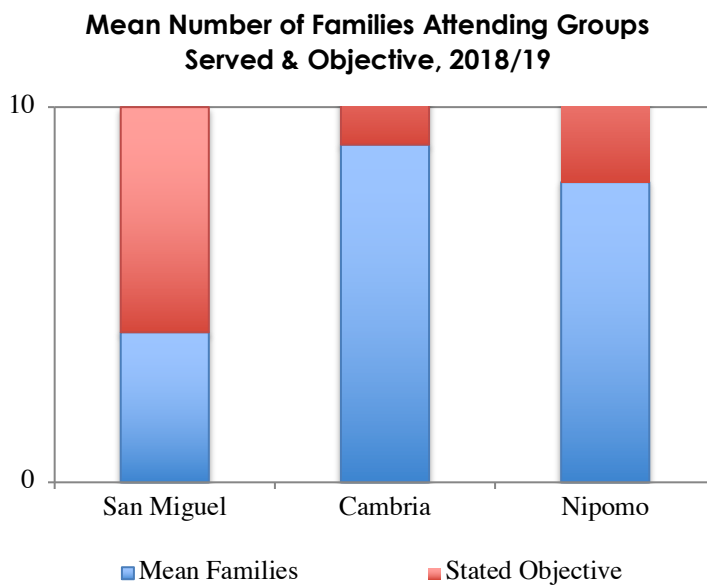
#### DATA HIGHLIGHTS:

- 3 Parent Café series were offered in 2018/19; 1 full six-session series in San Miguel; 1 full six-session series in Cambria; and four sessions of a series in Nipomo.
- Attendance has fluctuated. San Miguel began with 14 parents from 10 families, but fell to a mean of 3 parents for the rest of the sessions. Cambria began with 15 parents from 12 families, but fell to a mean of 8.6 parents from 8 families for the rest of the sessions. Nipomo began with 12 parents from 11 families, and averaged 7.8 parents from 7 families for the next three sessions.

**Objective 1:** Through June 30, 2020 to provide six series of parent groups (bilingual as needed) for at least 60 families (estimated up to 2 parents per family) of children, 0-3, as measured by documentation of program activities.

2018/19  
**3 series of parent groups offered – 100% of objective\***

**21 families served on average – 70% of objective\***



\* Prorated for six months of the year

#### Why Is This Important?

Parents of young children are often learning the job of parenting on the fly. They do this while also dealing with life's many other challenges.

The experiences, lessons, and support of other parents can help speed up the learning process. Parent Cafés are structured and facilitated conversations that provide parents the opportunity to learn from and support each other in becoming the best parents they can be.

Parent Cafés are considered an **Evidence-Informed Practice**.

## Parents Helping Parents

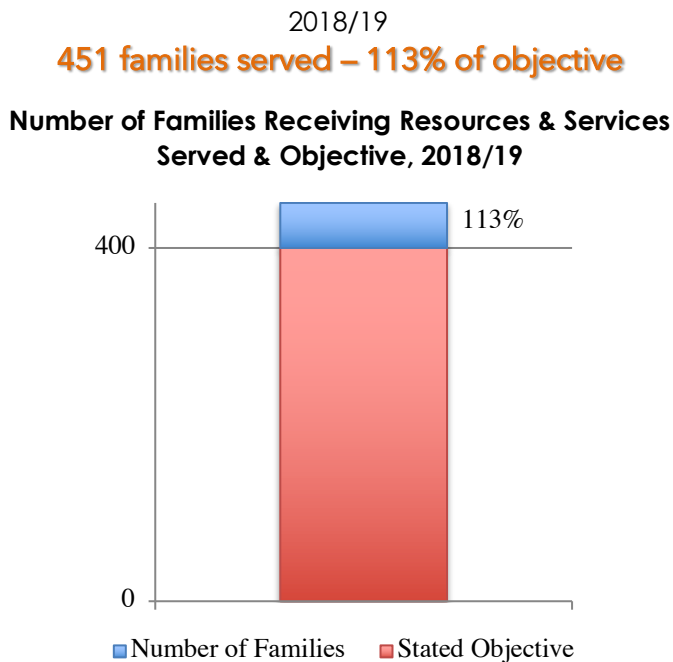
Annual Funding \$41,566

### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- Parents Helping Parents provided services to 451 unduplicated families in 2018/19.
- There were 36 support activities, which included: Get Connected meetings, which are held at the three resources libraries, and allow parents to meet and connect with other parents; Autism Meet-Ups to develop social support systems for parents; Down's Syndrome Support Groups; and trainings such as *Toilet Training* and *Organizing Records*.

**Objective 1:** Through June 30, 2020 to provide access to various PHP resources and services to at least 400 families, annually, who include children, 0-5, with special needs or who are at risk for delays.



#### Why Is This Important?

Parents of children with special needs often feel lost, confused, and alone in raising their children.

Parents Helping Parents operates three Family Resource Centers that provide information and support to help parents understand and begin to cope. Targeted training, help in learning to navigate the system, a readily available library of books, videos, and other resources, and support from other parents all can help ease isolation.

Family Resource Centers are considered an **Evidence-Based Practice.**

## IMPACT SLO

IMPACT (Improve and Maximize Programs to that All Children Thrive) is a five-year statewide project of First 5 CA. Its overarching purpose is to support quality in early learning settings through a network of partners in each county.

In partnership with the California Department of Education, First 5 has adopted QRIS (Quality Rating and Improvement System) as the general structure for IMPACT. QRIS is a systematic approach that utilizes three categories of activities: 1) Assessment of identified elements of quality through an array of rating tools; 2) Enhancement of quality through specific pathways that address the elements used in the ratings; and 3) Communication to the broader community to promote an understanding of the importance of quality ECE.

IMPACT programs work on select elements of the core areas of quality that are of interest to them (Steps 1 and 2), or they can work on all of the elements of QRIS (Step 3). Whereas QRIS is focused on ECE sites (e.g., Center-based Preschools and Family Childcare Centers, or FCCs), IMPACT includes Alternative Sites, which are child-serving entities that are not necessarily focused on education. Thus, a family resource center or library, or home-visitation program might work to incorporate quality early-learning activities into their work.

IMPACT SLO calls its QRIS work *Quality Counts*. It expands on QRIS by adding four Supplemental Activities to the list of quality-improvement tools: • Raising a Reader; • Eclectic Professional Development; • Social/Emotional Foundations of Early Learning (SEFEL); and • Parenting Support/Education.

## IMPACT SLO: QRIS

### Quality Counts

Annual Funding \$16,500 (First 5 CA Grant)

**Objective 1:** Through June 30, 2020 to coordinate the SLO County *Quality Counts* Consortium.

- The SLO County Child Care Planning Council has incorporated *Quality Counts*, and, therefore, IMPACT SLO into the ongoing business of the Council itself. While brief reports on *Quality Counts* are made at each meeting, *Quality Counts* was a significant agenda item at 5 of the 6 (83%) Council meetings in 2018/19.

*A child educated only in school is an uneducated child.*

George Santayana

### Why Is This Important?

In the U.S. 70% of women with children under 18 participate in the labor force. So, many of our young children spend a significant amount of time in non-parental care arrangements.

Many children, especially low-income and other high-need children, face an achievement gap as they start school. Some never make up the deficit. Quality early childhood education (ECE) programs can improve health, social-emotional development, and school readiness, especially for high-need children. This can help children bridge the achievement gap, thereby avoiding a lifetime of consequences for a slow start in school.

Researchers have been studying ECE providers to identify the characteristics that make up high-quality programming. Three factors make IMPACT unique in efforts to support ECE quality: 1) it allows for maximum flexibility in a provider's approach to quality; 2) it recognizes that almost any youth-serving organization can contribute to ECE; and 3) it recognizes that parent engagement is crucial to successful ECE.

## IMPACT SLO: QRIS

Annual Funding \$184,875 (First 5 CA Grant)

### Center-based Sites

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- 33 center-based sites participated at Step 3 in IMPACT SLO during 2018/19. 7 centers were new in 2018/19, and 8 were moved from QRIS into IMPACT. 1 site dropped out of IMPACT and 2 sites were moved out of IMPACT, but remained in QRIS.
- Of the 33 centers 24 were publicly funded, 8 were private, and 1 was employer-run.

**Objective 2A:** By June 30 of each year for the following numbers of eligible center-based sites to complete the QRIS baseline rating: 15 in 2016/17, 24 in 2017/18, 8 in 2018/19, & 7 in 2019/20.

2016/17 to 2018/19

**23 center-based sites completed provisional rating**

**49% of objective**

**Objective 2B:** By June 30 of each year for the following numbers of eligible center-based sites to complete the initial Step 3 QRIS assessment process: 15 on 2016/17; 14 in 2017/18; 6 in 2018/19 & 7 in 2019/20.

2016/17 to 2018/19

**22 center-based sites completed assessment process**

**63% of objective**

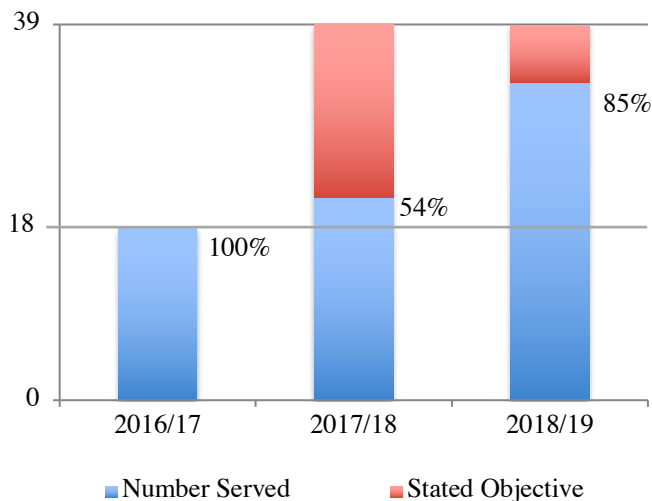
**Objective 2C:** By June 30 of each year for at least 80% of Step 3 center-based sites to remain in the QRIS process.

2017/18 & 2018/19

**20 of 21 center-based sites remained in QRIS**

**119% of objective**

**Number of Center-based Sites Participating in IMPACT, Served & Objective, 2016/17, 2017/18, & 2018/19**



#### Why Is This Important?

*Quality Counts* first assesses a center's status on the seven elements of the QRIS Rating Matrix. This is the baseline rating.

The next step is to assemble a portfolio that documents a center's current operations. The assessment process is completed with the development of a Quality Improvement Plan.

Then a center begins to implement their plan. They are rated every two years to track progress.

QRIS is a **Promising Practice**, as research into its effectiveness has been inconclusive to this point.

## IMPACT SLO: QRIS

### Family Childcare Sites

Annual Funding \$101,055 (First 5 CA Grant)

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- 41 FCCs participated in IMPACT SLO during 2018/19. 4 were new sites, and 2 sites dropped out.
- 36 sites (88%) were Spanish-speaking providers.

**Objective 3A:** By June 30 of each year for the following numbers of eligible family childcare sites to complete the QRIS provisional rating: 8 in 2016/17, 10 in 2017/18, 3 in 2018/19, & 3 in 2019/20.

2016/17 to 2018/19

**41 FCC sites completed provisional rating**

**195% of objective**

**Objective 2B:** By June 30 of each year for the following numbers of eligible family childcare sites to complete the entire QRIS process (Step 3: provisional rating; development and implementation of a quality improvement plan; and baseline rating): 8 in 2016/17, 10 in 2017/18, 2 in 2018/19, & 4 in 2019/20.

2016/17 to 2018/19

**33 FCC sites completed assessment process**

**165% of objective**

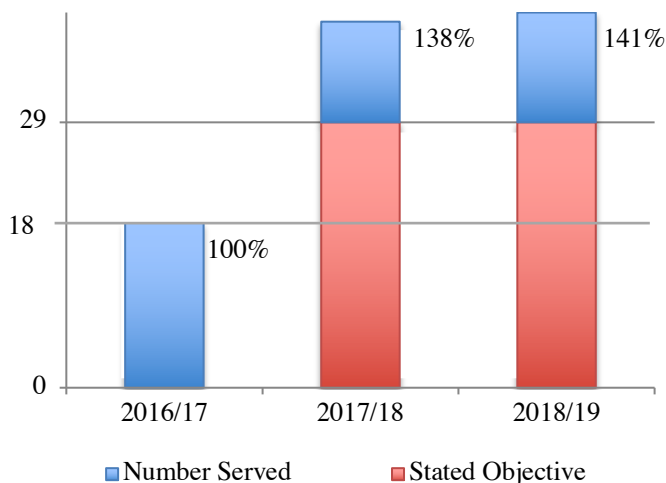
**Objective 2C:** By June 30 of each year for at least 80% of Step 3 FCC sites to remain in the QRIS process.

2017/18 & 2018/19

**37 FCC sites remained in QRIS**

**116% of objective**

**Number of Family Childcare Sites Participating in IMPACT, Served & Objective, 2016/17, 2017/18, & 2018/19**



#### Why Is This Important?

Family childcare (FCCs) providers serve 34% of the children in ECE in SLO County, yet receive little in the way of support. Professional development is held at times they are working, can be unaffordable, and is not offered in Spanish. Previous statewide QI programs excluded FCCs entirely.

IMPACT includes FCCs and IMPACT SLO specifically targets Spanish-speakers. The rating system involves five of the elements in the QRIS Rating Matrix.

QRIS (Race to the Top) activities are a **Promising Practice**.

## IMPACT SLO: Supplemental Activities

### Eclectic Professional Development & SEFEL Training

Annual Funding \$85,045

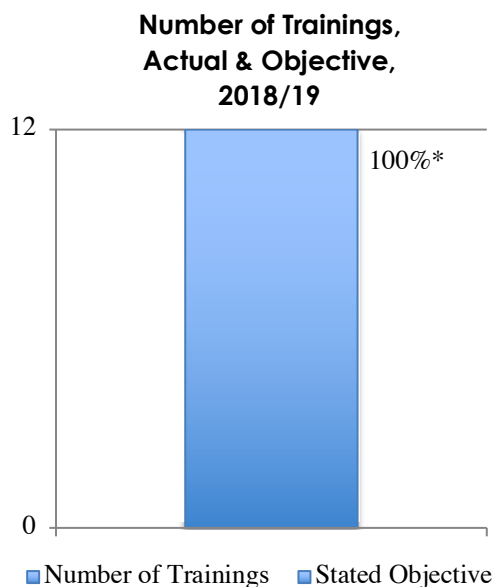
#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- 12 professional development trainings were attended by 100 (duplicated) ECE professionals from IMPACT SLO sites. The Early Learning Specialist was on maternity leave during the fourth quarter.
- 0 trainings were provided for Alternative Sites.
- 5 of the trainings (42%) were SEFEL trainings, which were attended by 43 IMPACT SLO providers. Additionally, there were 8 SEFEL coaching sessions (not counted in total trainings) for 30 participants.

**Objective 1:** Through June 30, 2020 to provide at least 15 professional development activities, annually, in Early Childhood Education for IMPACT SLO participants.

2018/19  
**12 professional development trainings**  
**100% of objective\***  
**5 SEFEL trainings provided for ECE providers**  
**0 trainings were held for Alternative Sites**



\* Prorated for nine months of the year

#### Why Is This Important?

These two Supplemental Activities are part of SLO County's Implementation of IMPACT. They are intended to support both ECE providers and Alternative Sites.

The goal of Eclectic Professional Development is to provide wide-ranging educational opportunities for diverse ECE programs.

SEFEL is a locally-modified version of a training on the importance of social/emotional development to successful early learning.

Both Professional Development and SEFEL are **Evidence Based**.



## IMPACT SLO: Supplemental Activities

### Raising a Reader

Annual Funding \$47,519

#### What Did We Accomplish?

#### DATA HIGHLIGHTS:

- Literacy activities continued from previous years include reading programs at Woods Humane Society, ECHO and 40 Prado Homeless Shelters, and Little Free Libraries.
- Raising a Reader was bolstered by the creation of the Oceano RAR Lending Library, an instance of a center-based preschool serving as an Alternative Site to support RAR at 6 Family Childcare Centers in the neighborhood.

**Objective 1A:** Through June 30, 2020 to coordinate literacy efforts for children, 0-5, and their families, and to support the integration of literacy development in the programming of IMPACT SLO participants.

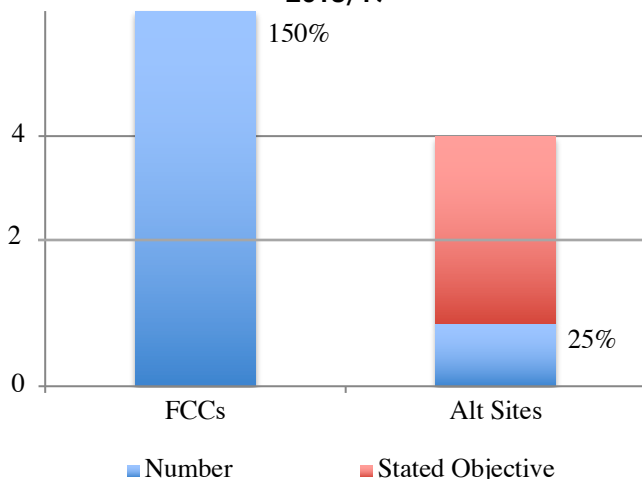
The Literacy Coordinator initiated a literacy training for 14 ECE students at Cuesta College in promoting family literacy. She enhanced family literacy activities at two sites (Oceano Community Center's Month of the Child event and Trust Children's Center's Open House). She and the Early Learning Education Specialist also provided a training for Migrant Education Home-based providers.

**Objective 1B:** Through June 30, 2020 to establish Raising a Reader (and/ or other analogous early family-literacy) programs in at least 2 center-based ECE sites, 4 family-childcare sites, and 4 Alternative Sites that are participants in IMPACT SLO.

2018/19  
**6 family childcare sites began RAR**  
**150% of objective**  
**1 Alternative Site began a Reading Program**  
**25% of objective**

The Literacy Coordinator began a reading program at the Sierra Vista Hospital Pediatric Unit. Called *Reading is the Best Medicine*, it provides book bags for families of children, 0-5, who are patients at the hospital.

**Number of Family Childcare Sites with Raising a Reader Programs**  
**Actual & Objective,**  
**2018/19**



#### Why Is This Important?

Early literacy and other parent-child interactions are critically important for early brain development. And, the number of words a child hears is directly related to school success.

Raising a Reader (RAR) involves a series of rotating book bags, coupled with educating parents about how to read/tell stories to their children.

As part of IMPACT SLO RAR and other similar literacy programming have expanded to private ECE sites (both center-based and FCC sites) as well as to Alternative Sites.

RAR is **Evidence Based**.

## Kits for New Parents Distribution

### What Did We Accomplish?

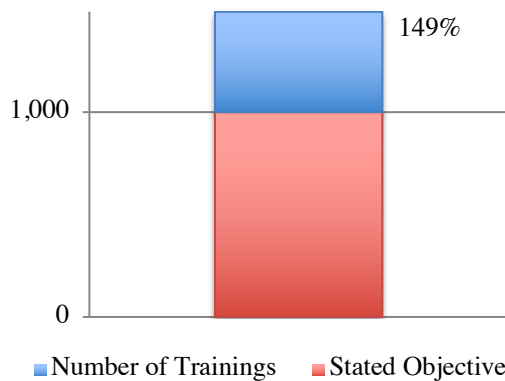
#### DATA HIGHLIGHTS:

- First 5 SLO County distributed 1,490 kits to 6 different providers in 2018/19.
- 15% of the kits were in Spanish.

**Objective 1:** By June 30, 2018 to provide educational and support kits to at least 1,000 parents of children, ages 0-5, annually.

2018/19  
**1,490 kits distributed – 149% of objective**

**Number of Kits for New Parents Distributed  
Served & Objective, 2018/19**



#### Why Is This Important?

Babies don't come with instruction manuals. So, First 5 CA created the *Kits for New Parents* in 2001.

All new parents have questions, and the Kits are designed to provide some answers as well as resources to help parents find more, and First 5 SLO County inserts local information into the kits.

A research study by UCLA found that a high percentage of parents used the Kits, and felt that the information improved their knowledge.

Kits are considered to be a **Promising Practice**.