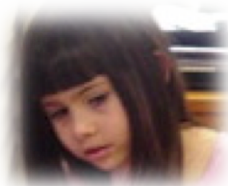


Children and Families Commission  
of San Luis Obispo County

**AND, HOW ARE THE CHILDREN?**

FIRST 5 SAN LUIS OBISPO COUNTY  
OUTCOME EVALUATION REPORT 2017



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*And, how are the children?  
Masai Greeting*

## **The Strategic Plan**

First 5 San Luis Obispo (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 four years, 2016/17 to 2019/20, for advocacy and funded activities in four key Priority Areas:

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

We are also partnering with First 5 California 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 2017* summarizes the data collected during 2016/17. 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 2017*.

*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 2017* 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 This Year?

- First 5 SLO County altered its *Hands-On Heroes* campaign in 2016/17. Rather than focusing on a few heroes at an annual event, the ongoing public relations campaign featured a monthly hero, chosen in partnership with local organizations. Each hero represented one of the rights in the Children's Bill of Rights. The campaign began in January, and featured videos and print stories that were disseminated through the SLO County Office of Education's cable television channel, the *SLO Journal Plus*, the First 5 website, social media, and other media platforms.

### Talk. Read. Sing.

#### What Did We Accomplish This Year?

- First 5 SLO County's *Talk. Read. Sing.* campaign built on statewide advertising and materials. The CA State Commission's First 5 Express is a bilingual children's activity center that travels across California to inspire families to understand the importance of a child's earliest years and the positive impacts that parental engagement can have on brain development. During 2016/17 the First 5 Express spent two days in SLO County on two separate occasions.
- *Talk. Read. Sing.* messages aired on local broadcast media. Signage was placed on buses and billboards, and ads ran at local movie houses. A *Talk. Read. Sing.* night was held at the local semi-pro Blues baseball game, and First 5 SLO County sponsored the children's playground at games during the season. Other outreach included baby-changing stations and materials such as parent and educator toolkits and classes, books, musical toys, and baby clothes.

## Priority Areas

### Perinatal Readiness Priority Area

#### What Did We Accomplish This Year?

#### Expanded Family Leave Opportunities for New Parents

- Increased Commission and community awareness of family-friendly workplace practices and policies.
- Advocated for SB63 (Jackson) – unpaid family leave.

#### Expanded Options for Early Parent Education/Support

- Established membership in the Central Coast Breastfeeding Coalition, and cosponsored their Donor Breast-milk Drive.
- Began initial conversations with local experts on home visitation in order to identify potential systems improvements.

*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 who 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 Priority Area

### What Did We Accomplish This Year?

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

- Began planning for a SLO County *Help Me Grow* initiative by identifying key stakeholders, and scheduling an initial planning meeting for August 2017.
- Held planning meetings with the local Federally Qualified Health Center (Community Health Centers of the Central Coast) about a pilot project to integrate developmental screening into well-child visits.

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

- Helped secure state grant funds to expand capacity for local preventive oral health activities.
- Co-sponsored training on Motivational Interviewing for oral healthcare and other providers.

#### Increased Attention to the Effects of Climate Change on Young Children

- The Commission established a new advocacy goal by approving a statement on climate change as a public health concern for young children, becoming the first First 5 county commission to do so.

## Early Learning Priority Area

### What Did We Accomplish This Year?

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

- Integrated an early literacy program into WIC (Women, Infants, and Children), a Public Health Department program for parents of newborns, infants, and young children.

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

- Explored possible options to build childcare partnerships with local employers.
- Reinforced countywide priority on enhancing quality in early learning through lead role on the Quality Counts Consortium.
- Redesigned the First 5 Preschool Project as a pilot program to develop a seamless system of preschools for all children in SLO County.

## Family Strengthening Priority Area

### What Did We Accomplish This Year?

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

- Advocated for the importance of affordable housing to young families at the SLO Chamber of Commerce forum, sessions of the Legislative Action Committee, and SLO County Housing Summit.

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

- Began conversations with local businesses about family-friendly workplace practices and policies.

#### Increased Public Awareness and Action Related to the Traumatic Effects of New Immigration Policies on Children Living in Undocumented Families

- Established new advocacy goal through a series of Community Forums on the impacts of new policies on young children and their families, and the ways in which providers might offer support.

## Funded Activities

### Perinatal Readiness Priority Area

First 5 SLO County funded three programs/activities under this Priority Area in 2016/17.

- **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 six WIC clinics throughout SLO County: 1) certified lactation consultation; and 2) peer counseling (PC).
- **Baby's First Breath:** the Public Health Department provided tobacco cessation 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 built capacity throughout the county and provided direct services for parents who were encountering mood disorders during or after pregnancy.

*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 factors 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 families 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, while others need help in all areas. The important thing is that the family (whether a single mother and her first child or a multi-generational extended family) is ready to help the child get the best start in life possible.

## BABES (Babes at Breast Education and Support)

### What Did We Accomplish This Year?

#### DATA NUGGETS:

- Women who received peer counseling were 36% MORE LIKELY to report EXCLUSIVE breastfeeding at six months than women without PC and 19% MORE LIKELY to report ANY breastfeeding.
- The lactation consultants made 716 contacts with 444 women about 1,233 issues at 216 clinic days for a mean of 2.8 issues/woman.

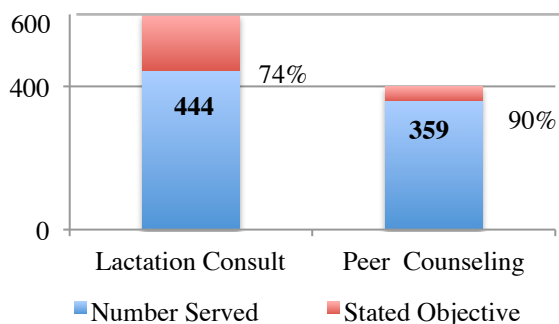
**Objective 1:** By June 30, 2018 to provide breastfeeding education and support for at least 600 unduplicated breastfeeding mothers, annually, at six satellite WIC clinics.

2016/17  
**444 women counseled – 74% of objective**

**Objective 2A:** By June 30, 2018 to provide individual mother-to-mother peer support at WIC clinics for at least 400 unduplicated pregnant and breastfeeding women annually.

2016/17  
**359 women received peer support  
 90% of objective**

**Number of Women Receiving Breastfeeding Support, Served & Objective, 2016/17**



**Objective 2B:** By June 30, 2018 annual reports will show at least 50% of participating women are breast-feeding at six months post birth.

2016/17  
**59% ANY breastfeeding @ 6 mos  
 117% of objective**  
**42% EXCLUSIVE breastfeeding @ 6 mos  
 85% of objective**

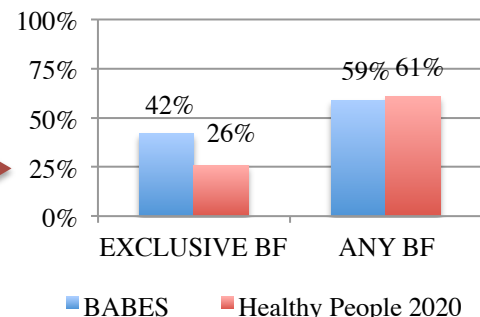
BABES PC breastfeeding rates compare favorably to the objectives set by Healthy People 2020 (see figure to the right). The EXCLUSIVE breast-feeding rate is 166% of the objective, and the ANY breastfeeding rate is 97% of the objective.

### 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 protect against a host of illnesses and diseases. Breastfeeding benefits mothers, too, in the form of reduced risk of 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, 2016/17**



## Baby's First Breath

### What Did We Accomplish This Year?

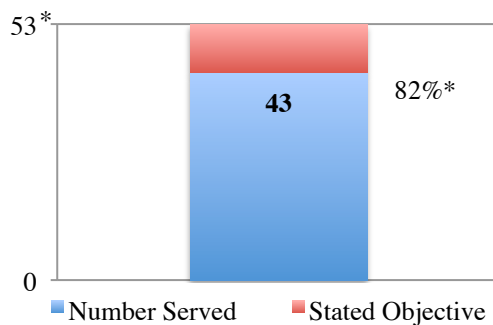
#### DATA NUGGETS:

- There was staff turnover in BFB in 2016/17 with the previous Cessation Counselor leaving before the start of the fiscal year, and the replacement not starting until the second quarter.
- Forty-three persons participated in cessation counseling in 2016/17.

**Objective 1A:** By June 30, 2018 to provide tobacco cessation services to at least 70 pregnant women and/or parents & family members of children, 0-5, annually.

2016/17  
**43 received cessation counseling**  
**82% of objective\***

**Number of Pregnant Women, Parents, and Other Family Members in Tobacco Cessation, Served & Objective, 2016/17**



During 2016/17:

- Seventy-two percent of those in counseling received Nicotine Replacement Therapy in support of their cessation.
- A total of 53 referrals were reported during 2016/17. With 43 individuals in cessation, the rate of successful sign-ups was 81%. Most of the referrals came from Drug & Alcohol Services' Perinatal Outpatient Extended Groups (56%) with local OB/GYNs accounting for 25%. The rest, ranging from 1% to 6%, were from other sources.

**Objective 1B:** By June 30, 2018 to achieve at least a 25% tobacco quit rate at six months after cessation program enrollment.

2016/17

Follow-up sampling rates were quite low, partially due to staff turnover. They ranged from 56% for 3-month follow-up to 35% for six-months to 12% for 12 months. These low rates render the resultant quit rates to be less than reliable. Therefore, no quit rates are reported for 2016/17.

#### Why Is This Important?

Children are particularly susceptible to the harmful effects of environmental tobacco smoke (ETS) during pregnancy and after birth. Before and at birth ETS is associated with preterm birth, intrauterine growth retardation, and perinatal mortality. After birth ETS has been linked to respiratory illness (e.g., 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.

\* Prorated for 3 quarters due to hiring of new Cessation Counselor



## Perinatal Mental Health Support Services

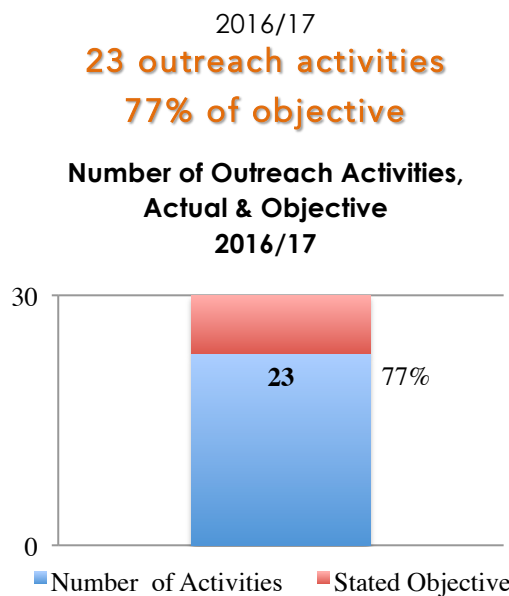
### What Did We Accomplish This Year?

#### DATA NUGGETS:

- The Postpartum Depression Support Services Program was reorganized into Perinatal Mental Health Support Services. They are working with a larger County Public Health-led initiative, Perinatal Mood and Anxiety Disorders, to raise awareness and enhance systems alignment.
- Forty-three of the 246 parent callers (17%) to the Postpartum Depression Support Line received support on the phone (13), or were referred to counseling (30).
- Twenty-six parents received in-person counseling supported by the program.

**Objective 1:** By June 30, 2018 to provide at least 30 outreach activities, annually, to promote awareness of Perinatal Mental Health issues (i.e., depression, anxiety, etc.) and to encourage utilization of local resources.

Twenty-three outreach activities were reported. Twenty of them (87%) were public outreach at community events, and three of them (13%) were for service providers.

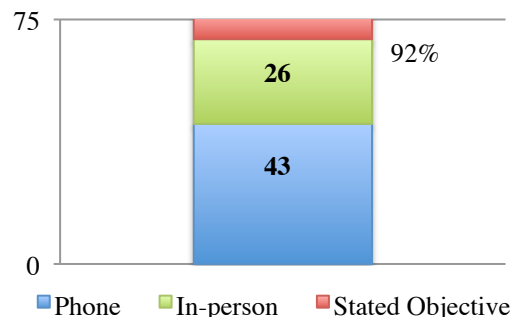


**Objective 2:** By June 30, 2018 to provide support services to at least 75 parents, annually, for perinatal mood disorders and anxiety.

2016/17  
**69 parents received support**  
**92% of objective**

There were 259 calls to the Support Line. Thirty (12%) were referred for counseling. Thirteen (5%) received support on the phone. Ten callers (4%) were from other providers. Twenty-six individuals (11%) attended in-person counseling.

#### Parents Receiving Mental Health Support Services, Served & Objective, 2016/17



#### 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.**

## Child Health & Development Priority Area

First 5 SLO County funded six programs/activities under this Priority Area in 2016/17.

- **BEST PALS (Behavior Education Screening Parenting And Life Skills):** Pediatric Physical Therapy And Services, Inc. operated BEST PALS, a program of developmental and behavioral assessments and short-term treatment for children with minor-to-moderate delays who do not qualify for services elsewhere.
- **County Oral Health Program Manager:** the Public Health Department provided: 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 Trainers:** the Carsel Group provided wide-ranging health-related professional-development and in-service trainings to anyone who works with children, 0-5, and their families.
- **Tolosa Children's Dental Center Central Region Dental Access:** operated a children's dental clinic in San Luis Obispo to provide a dental home for low-income children. First 5 SLO County funded support preventive treatment.
- **Vision Screening:** Gary Englund, O.D. and his associates operated a program to screen children, 3-5, for vision problems, and then refer them for treatment, if indicated.
- **WIC Oral Health Program:** the Public Health Department scheduled classes for pregnant women and new mothers and caregivers in maximizing the oral health of themselves and their children.

*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 social-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.

So, needs range from healthcare access to prevention, from capacity building to screening and treatment for delays in development, and from education to treatment.

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 in life.

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

### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 33 of the 40 children who ended their association with BEST PALS in 2016/17 either successfully completed treatment (8), or were determined to be eligible for and referred for treatment at Tri Counties Regional Center (20), the schools (2), or County Behavioral Health (3). Nine were still in treatment at the end of the year.

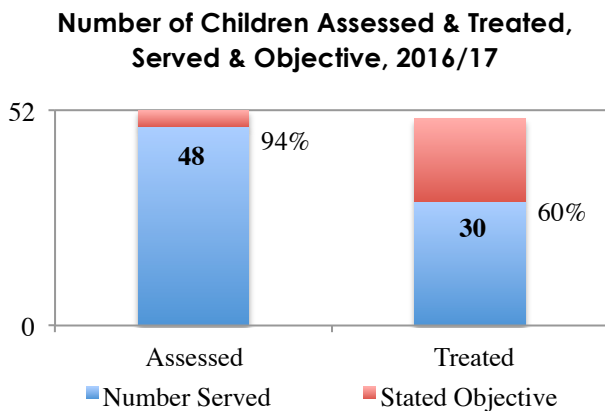
**83% of BEST PALS children had a positive outcome**

**Objective 1:** By June 30, 2018 to provide developmental assessments to at least 52 children, 0-5, annually, with possible mild developmental and/or behavioral delays.

2016/17  
**49 children assessed – 94% of objective**

**Objective 2A:** By June 30, 2018 to provide treatment for mild delays to at least 50 children, 0-5, (and/or their parents), annually.

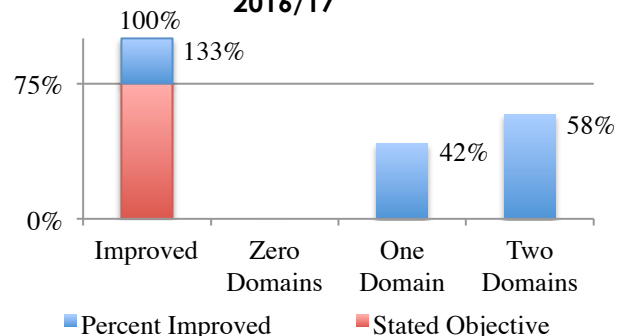
2016/17  
**30 children treated – 60% of objective**



**Objective 2B:** By June 30, 2018 at least 75% of children completing a minimum of 6 interventions will demonstrate improvement of at least one level in relevant domain(s) on the DAYC.

2016/17  
**100% of children improved**  
**133% of objective**

**Percent of Children Improved on DAYC, and Number of Domains of Improvement, 2016/17**



#### 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 further and further 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.**

## County Oral Health Program Manager

### What Did We Accomplish This Year?

#### DATA NUGGETS:

- Working with other stakeholders countywide the Oral Health Program Manager (OHPM) successfully secured a grant from the State's Dental Transformation Initiative for two activities aimed at children, ages 1-20: 1) incentives to increase continuity of care for Medi-Cal beneficiaries; and 2) establishing alternative oral healthcare strategies (i.e., virtual dental home) in SLO County.
- 1,103 children were screened with 97% of them receiving oral health preventive care. 141 pregnant women received oral health preventive care, along with 17 children, ages 6 and older.
- 1,217 parents received education about oral health in their children.

**Objective 1:** By June 30, 2018 to implement at least 3-5 policies/system-change strategies from the goals identified in the SLO County Children's Oral Health Strategic Plan related to Prevention and Treatment Access.

2016/17

### 2 systems changes – 67% of objective

Two activities funded to expand access were intended to change the oral health system in the county by: 1) expanding the number of dentists accepting Denti-Cal reimbursement for children; and 2) using alternative oral healthcare strategies through the use of teledentistry.

The Oral Health Coalition met 6 times with a mean attendance of 14. The OHPM targeted three areas: Access to Oral Disease Prevention Programming (4 meetings); Access to Oral Health Care (32 meetings); and Access to Specialty Dental Care (i.e., care for pregnant mothers – 3 meetings).

**Objective 2A:** By June 30, 2018 to provide preventive oral health services to at least 1,100 low-income children, 0-5, annually.

**Objective 2B:** By June 30, 2018 to provide education about children's preventive dental care to at least 1,350 parents of children, 0-5, annually.

2016/17

### 1,103 children screened – 100% of objective

### 1,217 parents educated – 90% of objective

#### Why Is This Important?

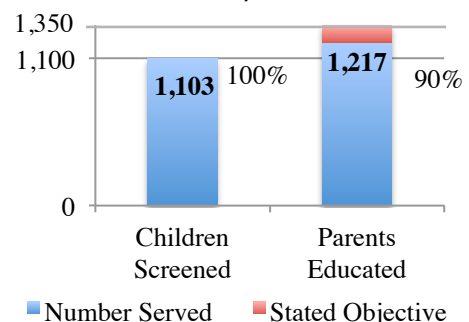
Good oral health is important for children, so they need access to a dental home.

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**.

**Number of Children with Preventive Oral Health Services and Number of Parents Being Educated Served & Objective, 2016/17**



## Health Access Trainers

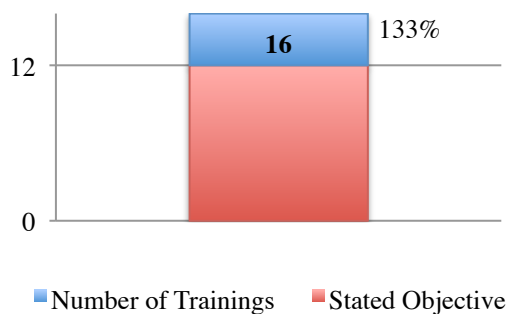
### What Did We Accomplish This Year?

#### DATA NUGGETS:

- The Health Access Trainers provided 16 professional development opportunities to 288 (duplicated) child-serving professionals in 2016/17.
- One of the issues on which the HAT focused this year was identifying and reducing barriers to enrollment in CalFresh. SLO County ranks near the bottom nationally in the percentage of eligible families who are enrolled. As a result of the HAT's advocacy, same-day enrollment in Cal Fresh was instituted by the Department of Social Services.
- Responding to an emerging issue, the HAT held three community forums for child-serving professionals on *Caring for Immigrant Families in Turbulent Times*.

**Objective 1:** By June 30, 2018 to provide at least 12 professional development activities, annually, to increase capacity in SLO County to connect children, 0-5, with available healthcare services.

2016/17  
**16 trainings offered – 133% of objective**  
**Number of Health-related Professional Development Trainings, Actual & Objective, 2016/17**



The following trainings were offered:

- *Parent Conversations Regarding Developmental Concerns* was offered 6 times for 87 participants.
- *Resources to Support Early Development* was offered 5 times for 89 participants.
- *Special Needs Forums* were offered 2 times for 78 participants.
- *Caring for Immigrant Families in Turbulent Times* was offered 3 times for 98 participants.

The HAT published 5 newsletters, and distributed them to a list of 370 providers, organizations, and agencies.

To assist and advocate for healthcare access the HAT met with healthcare professionals 29 times.

The SLOHealthAccess website was kept updated with local resources and information, including updates on immigration and the 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**.

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

### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 119 children received preventive dental care in 2016/17. Of the 53 new children, 33 (62%) were making their first visit to a dentist at the SLO clinic.
- 235 children, 0-5, in total received dental care in 2016/17, 116 of them (49%) for restorative treatment.
- Tolosa is serving high-need clients in its SLO location. 43% of the children have previous decay experience, contrasted with the 12% estimate countywide for low-income children.
- The plurality of the children at the clinic come from SLO (42%), but a majority come from elsewhere: South County - 31%; and Coastal Region - 28%), reflecting a lack of capacity for dental care in other areas of the county.
- The clinic simply does not have the capacity to serve the number of children in need. In fact, the clinic was closed to new patients during the first quarter and most of the second quarter.

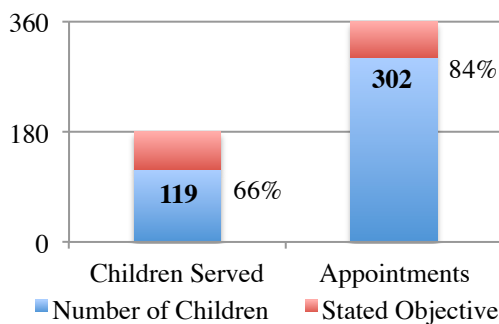
**Objective 1:** By June 30, 2018 to contribute to providing a dental home to at least 180 children, 0-5, annually, in the Central Coast Region through up to 360 preventive dental care appointments.

2016/17

**119 children treated – 66% of objective**

**302 appointments – 84% of objective**

**Number of Children Treated & Number of Appointments, Actual & Objective, 2016/17**



#### 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.

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

## Vision Screening

### What Did We Accomplish This Year?

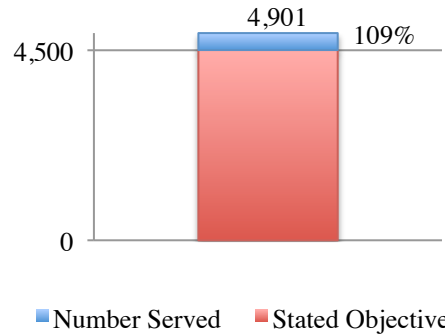
#### DATA NUGGETS:

- 288 children (5% of those screened) were identified as having vision problems.
- 230 other children (5%) were rated borderline, and advised to undergo screening again within the next year.
- 84% of the children identified as having a vision problem were successfully linked with vision treatment.

**Objective 1:** By June 30, 2018 to provide vision screening to at least 4,500 children, 2-5, annually.

2016/17  
**4,901 children screened – 109% of objective**

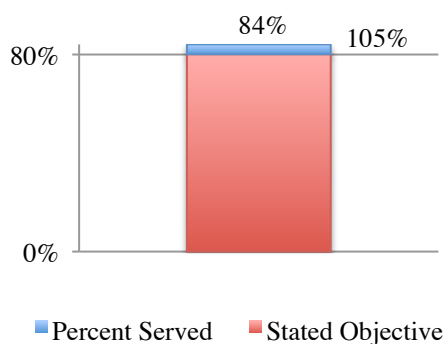
**Number of Children Screened for Vision Problems, Served & Objective, 2016/17**



**Objective 2:** By June 30, 2018 to refer screened children with vision disorders such that at least 80% of them connect with needed treatment.

2016/17  
**84% children treated – 105% of objective**

**Number of Children Linked to Treatment for Vision Problems, Served & Objective, 2016/17**



#### 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**.

## WIC Oral Health Education

### What Did We Accomplish This Year?

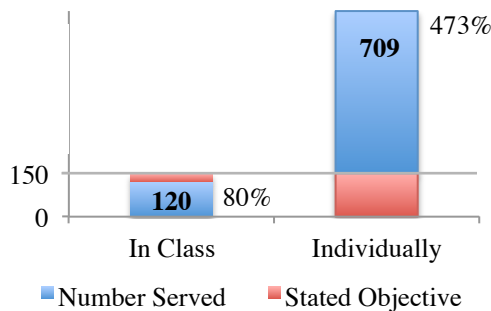
#### DATA NUGGETS:

- Dental health education classes were held at WIC sites during April and May of 2017. Fifty-five 20-minute classes were scheduled, but 14 (25%) were not held due to a lack of attendance or inability to book the class. The 41 classes were attended by 120 parents/caregivers, a mean of 2.9 per class.
- An additional 709 families received one-on-one education during their WIC appointments.
- The classes were taught in English and Spanish by a Registered Dietician. The theme this year was *Healthy Drinks for Healthy Smiles*. The content emphasized the type of beverage, timing of the beverage, and the exposure time of the beverage on the teeth, all of which influence tooth health.
- In addition to the oral health content the WIC program devoted time to “creating a new bedtime habit,” which incorporated *Talk. Read. Sing.* messaging during bedtime routines, such as tooth brushing and putting the child down to bed. All group class attendees were offered a young toddler book *Who Needs Teeth?* in either English or Spanish and the *Ways to Read* bookmarker that was developed by the IMPACT SLO Early Literacy Coordinator.

**Objective 1:** By June 30, 2018 to provide dental health educational classes to at least 150 unduplicated WIC parents and caregivers, annually, with children, 0-5.

2016/17  
**829 parents and caregivers educated**  
**553% of objective**

**Number of Parents & Caregivers Educated, in Classes & Individually, Served & Objective, 2016/17**



#### Why Is This Important?

Promoting oral health in children rests largely in the hands of parents and caregivers. Oral hygiene practices in young children must be monitored and supported by them. And understanding the importance of oral healthcare, as well as the methods for achieving it, is critical in helping them do so.

WIC is in a unique position to provide education to parents and caregivers of young children, 0-5.

Oral health education for parents and caregivers in order to improve a child's oral health is a **Promising Practice**.



## Early Learning Priority Area

First 5 SLO County funded four programs/activities under this Priority Area in 2016/17.

- **ELFA (Early Learning for All):** the SLO County Office of Education’s ELFA program offered professional development opportunities for ECE providers throughout SLO County, as well as serving as an advocate for early childhood education and development.
- **Extended-day Preschool:** in order to meet the needs of low-income working parents the Extended-day Program offered full-day care at three California State Preschools in low-income communities, two of which had been involved for over ten years in the First 5 SLO County School Readiness Initiative: Georgia Brown Elementary in Paso Robles and Oceano Elementary in Oceano. The third program operated in Grover Beach. The programs were contracted to operate for one final year (2016/17).
- **First 5 Preschools:** located at the two School Readiness Sites the preschools offered high-quality early education to children, ages three to five. The preschools operated on a Gold Standard developed to ensure the highest quality learning experience.
- **School Readiness Site Coordinators:** employed by their school districts the Coordinators are responsible for monitoring all SR activities. They work closely with SR partners, and regularly coordinate with the school principals, teachers, and staff. They also offer programming themselves, including transition programs, family literacy, and parent education and support, as well as 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 5 a child's brain is 90% 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)

### What Did We Accomplish This Year?

#### DATA NUGGETS:

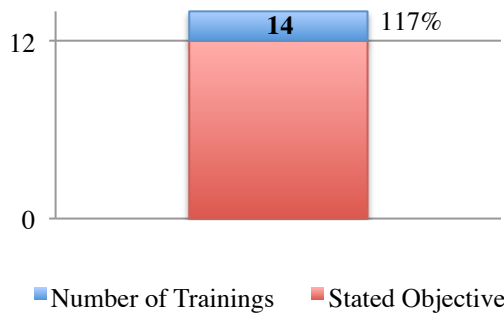
- ELFA successfully made the transition to a new staff member as the new Early Learning Systems Specialist began in the second quarter.
- 14 professional development activities were conducted, attended by 298 (duplicated) ECE professionals.
- Providing translation for Spanish speakers in ELFA activities proved to be a continuing challenge. A success in this regard occurred during the *Hop on the Bus* Tour of high-quality ECE programs when simultaneous translation was included for the many Spanish-speaking participants. Feedback showed a high level of appreciation by the Spanish-speaking monolingual participants.

**Objective 1:** By June 30, 2018 to provide at least 12 professional development activities, annually, in Early Childhood Education.

2016/17

**14 professional development activities provided  
117% of objective**

**Number of Professional Development Activities,  
Actual & Objective, 2016/17**



#### Why Is This Important?

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

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

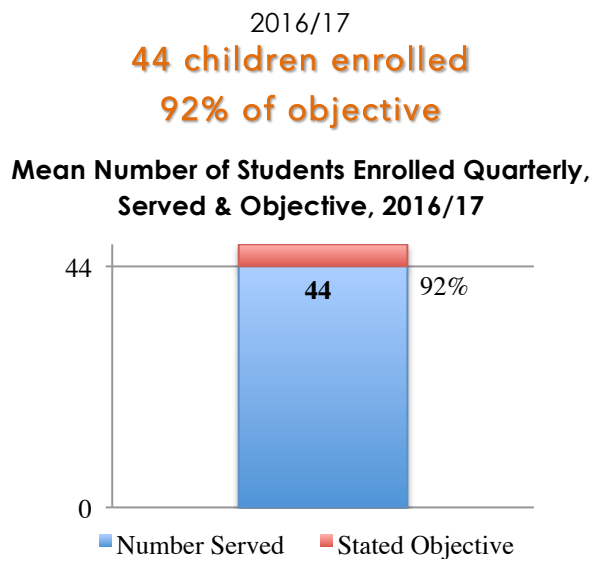
## Extended-day Preschool

### What Did We Accomplish This Year?

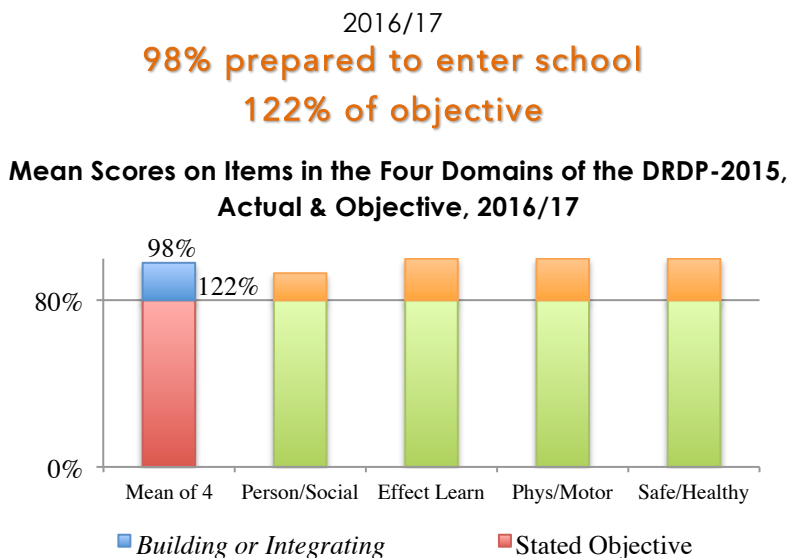
#### DATA NUGGETS:

- 44 students were enrolled (quarterly mean). Enrollment figures by site were: Georgia Brown - 14; Grover Beach - 16; and Oceano - 14. The program was funded for one year, 2016/17.
- 98% of the students achieved *Building or Integrating* on average on the DRDP-2015.

**Objective 1A:** By June 30, 2017 to provide full-day programming for at least 48 children, ages 3-5, annually, at: Georgia Brown Elementary/First 5 Early Learning Center, Grover Beach Elementary, and Oceano Elementary.



**Objective 1B:** By June 30, 2017 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 getting children ready for school. But, at best, preschool days last 3 to 4 hours. Working families are faced with dilemmas. How do they get their child from preschool to childcare? And, what happens to continuity of care when the child switches from one place to another?

Extended-day Preschool provides an answer by adding quality childcare to quality preschool in the same classroom, offering a full day of care.

Quality childcare is an **Evidence-Based Practice.**

## First 5 Preschool

### What Did We Accomplish This Year?

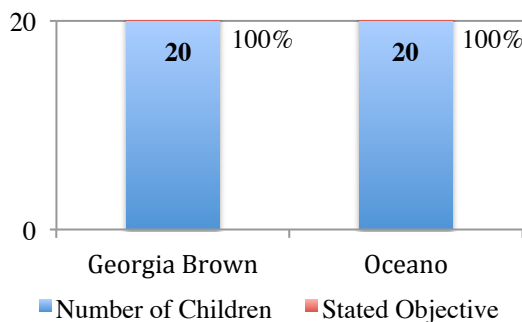
#### DATA NUGGETS:

- 40 students were enrolled (quarterly mean). Enrollment figures by site were: Georgia Brown - 20; and Oceano - 20.
- 96% of the students achieved *Building or Integrating* on average on the DRDP-2015.

**Objective 1A:** By June 30, 2018 to provide three-and-a-half-hour programming for at least 40 children, ages 3-5, annually, at the two School Readiness (SR) sites: Georgia Brown and Oceano.

2016/17  
**40 children enrolled**  
**(20 at each site)**  
**100% of objective**

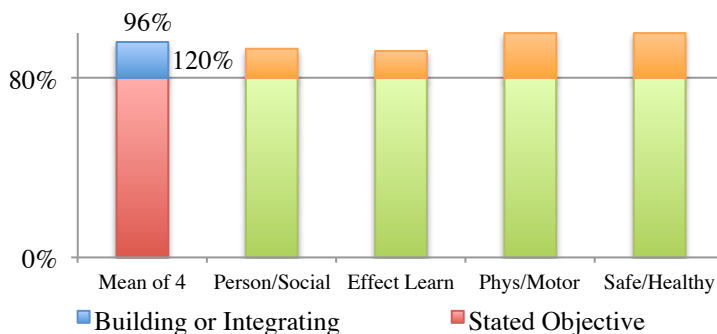
**Mean Number of Students Enrolled Quarterly at Each Site, Served & Objective, 2016/17**



**Objective 1B:** By June 30, 2018 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).

2016/17  
**96% prepared to enter school**  
**120% of objective**

**Mean Item Scores Overall & in the Four Domains of the DRDP-2015, Actual & Objective, 2016/17**



#### Why Is This Important?

Preschools help prepare children for school. They provide many children with their first experiences in a structured social environment where children learn to share and follow instructions. They promote social-emotional development. Preschools foster curiosity, self-reliance, decision making, and motor skills.

Children in preschool learn important lessons in language, pre-literacy, math, science, and problem solving. And, they get ready for school.

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

## School Readiness Site Coordinators

### Family Support

#### What Did We Accomplish This Year?

##### DATA NUGGETS:

- 103 families were served as a single-point-of-contact by the Georgia Brown Site Coordinator in 2016/17, involving 340 contacts with or about these families, for a mean of 3.3 contacts per family.
- School transition was addressed in half of the Georgia Brown contacts (51%, or 136), early childcare and preschool accounted for 23% (136) of the contacts, while family-support and family-literacy contacts were 19% (114). Translation and transportation were 6% (34), and health contacts were 5% (28) of all contacts.
- 111 families were served as a single-point-of-contact by the Oceano Site Coordinator in 2016/17, involving 455 contacts with or about these families, for a mean of 4.1 contacts per family.
- Family-support and literacy contacts made up 51% (133) of the Oceano contacts with families. School transition was an issue for 25% (65). Childcare and preschool totaled 12% (31), as did translation (30). Health contacts were 9% (23).

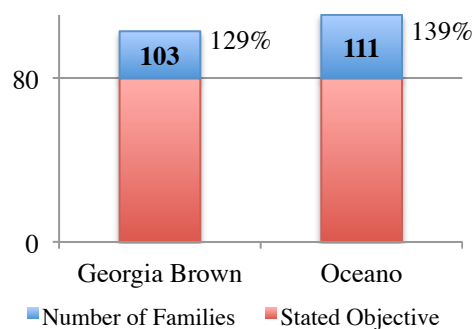
**Objective 1:** By June 30, 2018 to serve as a single-point-of-contact for at least 80 unduplicated families, annually, in the Georgia Brown/Oceano school-communities.

2016/17

**Georgia Brown:**  
**103 families served as a single-point-of-contact**  
**129% of objective**

**Oceano:**  
**111 families served as a single-point-of-contact**  
**139% of objective**

**Mean Number of Families Contacted and/or Referred,  
 Served & Objective, 2016/17**



#### Why Is This Important?

The School Readiness Site Coordinators act as a bridge between children, 0-5, and their families, local community resources, and the elementary school.

The coordinators as a single-point-of-contact, interacting with families through the activities they conduct, as well as at school and community events.

They build relationships with and recruit and engage families, connecting them with needed resources and referrals.

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

## School Readiness Site Coordinators

### Early Education and Literacy

#### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 75 *Literatura para la Familia* groups were facilitated by the Georgia Brown Site Coordinator in 2016/17 for 127 unduplicated children and 96 unduplicated parents.
- Results from parent pre-post 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* than before.
- Results from the parent surveys at Georgia Brown indicated that reading behavior improved after participating as far as: children asking questions about the book (279% more compared to before); parents asking their children questions about the book (241% more); and children listening quietly (150% more).
- 31 *Hora de Literatura* groups were facilitated by the Oceano Site Coordinator in 2016/17 for 33 unduplicated children and 21 unduplicated parents. A change in staffing during the second quarter and the resultant delay in replacement caused a drop in the number of families participating and a lack of parent surveys.

**Objective 2:** By June 30, 2018 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).

2016/17

#### Georgia Brown:

75 early literacy groups held – 94% of objective

96 families participated – 140% of objective

#### Oceano:

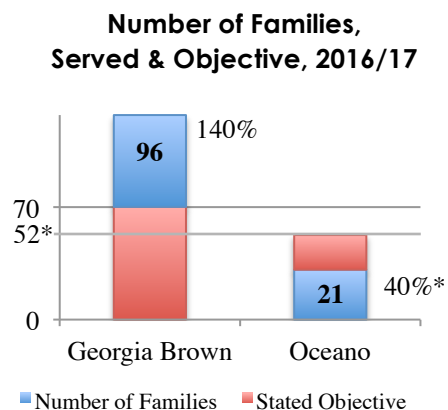
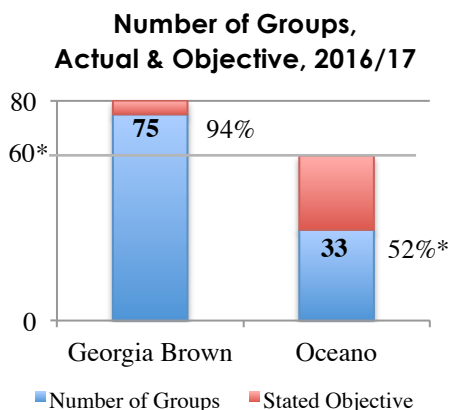
31 early literacy groups held – 52% of objective\*

21 families participated – 40% of objective\*

#### 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 **Evidence-Informed Practices**.



\* Prorated for 3 quarters due to hiring of new Oceano SR Coordinator

## School Readiness Site Coordinators

### Parent Education

#### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 36 *Cuentos Familiares* groups were facilitated by the Georgia Brown Site Coordinator in 2016/17 for 31 unduplicated parents.
- Results from pre-post parent surveys at Georgia Brown indicated that the groups were helpful to parents in a number of ways. Parents generally felt they learned something in the groups, with 79% saying *A Lot*. Almost all parents reported they learned something about parenting (93%) and about ways they could help their child be ready for school (92%). Almost all also reported feeling helped and/or supported by other parents in the group. While only about one-half (54%) reported feeling that they had helped and/or supported *other* parents at the end of the groups, this was a 62% increase over the 33% who said that on the pre-survey.
- 18 sessions of *First 5 Fridays* were facilitated by the Oceano Site Coordinator in 2016/17 for 17 unduplicated parents. A change in staffing during the second quarter and the resultant delay in replacement caused a drop in the number of families participating and a lack of parent surveys.

**Objective 3:** By June 30, 2018 to provide at least 30 groups in parent education/support, annually, to at least 35 unduplicated parents.

2016/17

#### Georgia Brown:

**36 parent education groups held – 120% of objective**

**31 families participated – 89% of objective**

#### Oceano:

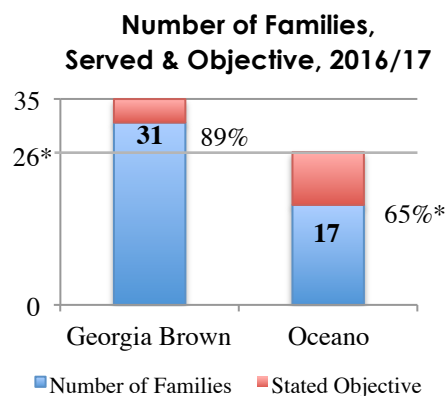
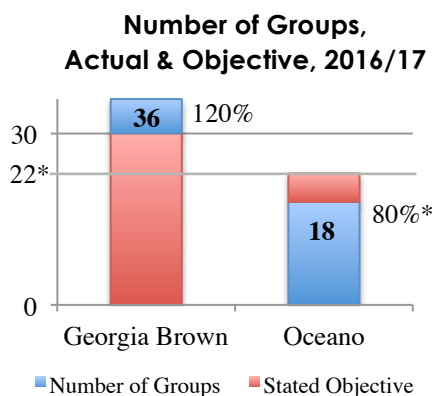
**18 parent education groups held – 80% of objective\***

**17 families participated – 65% of objective\***

#### Why Is This Important?

The Site Coordinators also facilitated weekly parent groups. 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 a 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 education and support groups are **Evidence-Informed Practices**.



\* Prorated for 3 quarters due to hiring of new Oceano SR Coordinator

## School Readiness Site Coordinators

### Kindergarten Transition

#### What Did We Accomplish This Year?

#### DATA NUGGETS:

- Neither SR Site Coordinator organized transition activities, though they did participate in activities organized by others. The Georgia Brown Site Coordinator helped with registration at four school-organized events. The Oceano Site Coordinator participated in two activities organized by the First 5 Preschool, one involving children visiting a kindergarten classroom, and another involving parents meeting with kindergarten teachers.
- 50% (79) of the incoming students attended 4 classes of Summer Pre-K Camp at Georgia Brown.
- 55% (40) of the incoming students attended 2 classes of Summer Pre-K Camp at Oceano.
- 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%).

**Objective 4A:** By June 30, 2018 to provide at least 8-10 activities, annually, that assist children (and/or their parents) in their transition into PreK/TK/K.

2016/17

#### Georgia Brown & Oceano:

**0 activities organized – 0% of objective**

**Objective 4B:** By June 30, 2018 to provide annual Summer Pre-K Camps for at least 75% of incoming kindergarten students.

2016/17

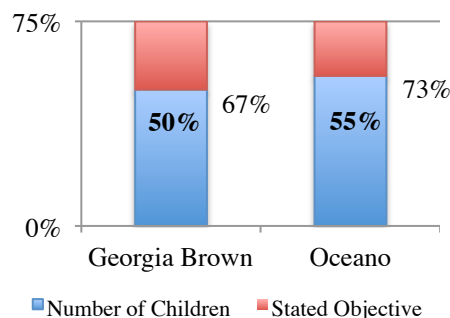
#### Georgia Brown:

**50% of incoming students at camp – 67% of objective**

#### Oceano:

**55% of incoming students at camp – 73% of objective**

**Percent of Incoming Students at Summer Pre-K Camp, Served & Objective, 2016/17**



#### 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 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 three programs/activities under this Priority Area in 2016/17.

- Family Advocates (School Readiness Neighborhoods):** the SR Family Advocates (FAs) performed a number of tasks. Their primary activity was to provide case management services for families of children, 0-5, assessing needs and linking families to resources and referrals. Advocates also supported the work of the Site Coordinators in terms of family literacy, parent education and support, school transitions, and summer camps. In these interactions, they may have also acted as a single-point-of-contact, providing information or referring families to local resources. The FA in the Georgia Brown school-community has also provided a parent education/support group.
- Family Support Counseling (School Readiness Neighborhoods):** offered therapeutic interventions to families in need at both SR sites. Families were referred through the SR Family Advocates. Providing individual and family counseling to parents, young children, and older siblings the counselor intervened in and helped the families resolve crises that threatened their wellbeing.
- Parents Helping Parents:** operated three Family Resource Centers (FRC) in SLO County that were specifically aimed at families with children with special needs: one in San Luis Obispo, one in Atascadero, and one in Grover Beach. The FRCs included libraries stocked with resources to help parents learn about their child's needs and how to address them. Trainings were offered to parents in autism, Down's Syndrome, and other special needs. And, parents were 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

## Family Advocates (School Readiness Neighborhoods)

### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 21 families received case management at Georgia Brown in 3 quarters of 2016/17.
- 18 families received case management at Oceano in 2016/17.
- 128 families were served as a single-point-of-contact by the Georgia Brown Family Advocate in 3 quarters of 2016/17.
- 158 families were served as a single-point-of-contact by the Oceano Family Advocate in 2016/17.

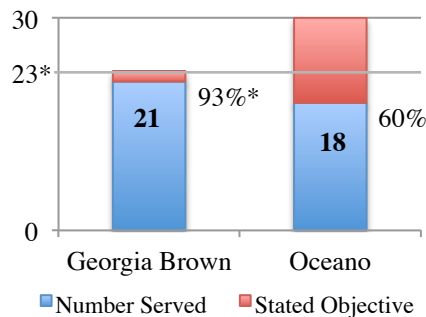
**Objective 1:** By June 30, 2018 to provide family advocacy/case management for at least 30 unduplicated families with children, 0-5, annually, in the Georgia Brown and Oceano school-communities.

2016/17

**Georgia Brown:**  
**21 families case managed – 93% of objective\***

**Oceano:**  
**18 families case managed – 60% of objective**

**Number of Families Receiving Case Management Served & Objective, 2016/17**



**Objective 2:** By June 30, 2018 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.

2016/17

**Georgia Brown:**  
**128 families served – 256% of objective**

**Oceano:**  
**158 families served – 316% of objective**

**Objective 3:** By June 30, 2018 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.

2016/17

**5 groups – 22% of objective\***  
**30 families – 120% of objective**

#### Why Is This Important?

Family Advocates 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.**

\* Prorated for 3 quarters due to hiring of new Georgia Brown SR Family Advocate

## Family Support Counselor (School Readiness Neighborhoods)

### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 22 families were seen by the Family Support Counselor in counseling at Georgia Brown, which translates to a mean quarterly caseload of 8.4 clients.
- 15 families were seen by the Family Support Counselor in counseling at Oceano, which translates to a mean quarterly caseload of 7.1 clients.

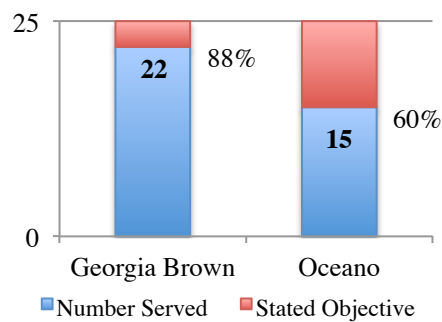
**Objective 1:** By June 30, 2018 to provide Family Support Counseling services for at least 25 families, annually, while maintaining an on-going caseload of 8 families in each of the Georgia Brown and Oceano school-communities.

2016/17

**Georgia Brown:**  
**22 families counseled – 88% of objective**  
**8.4 client caseload – 110% of objective**

**Oceano:**  
**15 families counseled – 60% of objective**  
**7.1 client caseload – 90% of objective**

**Number of Families Receiving Counseling Served & Objective, 2016/17**



#### 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**.

## Parents Helping Parents

### What Did We Accomplish This Year?

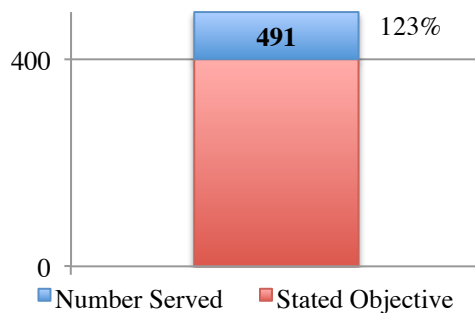
#### DATA NUGGETS:

- 491 unduplicated families received support, information, and/or referrals in 2016/17.
- Support activities 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 *Self Regulation* and *Discipline*. Five of the trainings were in Spanish in 2016/17. They also facilitate *Parent-2-Parent Matches*, in which they connected parents whose children face similar challenges in order to build social-support systems.

**Objective 1:** By June 30, 2018 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.

2016/17  
**491 families served – 123% of objective**

**Number of Families Receiving Resources & Services Served & Objective, 2016/17**



#### 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

Along with funding from First 5 CA, First 5 SLO County funded the key IMPACT (Improve and Maximize Programs so that All Children Thrive) activities along with three Supplemental Activities in 2016/17. There are three levels in IMPACT: QI – a site working on improving quality in at least one element of quality; QIS – a site working on improving quality in four elements; and QRIS - an ECE site working on improving quality in all elements, plus being rated based on specific criteria. IMPACT targets ECE providers, as well as Alternative Sites (i.e., other child-serving organizations such as Family Resource Centers, home visitation programs, libraries, etc.)

- **ECE Provider Quality Support:** the Community Action Partnership of SLO County (CAPSLO) coordinated the Quality Counts Consortium, and offered quality support activities to center-based and family childcare ECE providers.
- **Eclectic Professional Development (EPD) & Social-Emotional Foundations of Early Learning (SEFEL) Training:** SLOCOE offered two kinds of trainings: 1) EPD, defined as going beyond traditional professional development (e.g., focuses on special populations, is designed locally to meet local needs, and serves Alternative Sites as well as ECE providers); and 2) SEFEL, which teaches skills to promote positive social-emotional development.
- **Early Literacy/Raising a Reader (RAR):** SLOCOE worked to expand RAR into private ECE sites and Alternative Sites, as well as to promote other innovative early literacy programming.

### IMPACT Project-level Outcomes (State Evaluation)

The First 5 CA IMPACT Evaluation Framework listed four phases: local context; design & implementation; local & site outcomes; and impact of First 5 IMPACT (child & family outcomes). The first three phases have been designed and implemented. The final phase concerning child & family outcomes was originally to begin in January 2017 with the selection of an external evaluator. The Evaluation Workgroup first met in October 2016, and the timeline for the release of the RFA for the external evaluator was moved to spring 2017. Under a reorganization in September 2017 the workgroup was disbanded, and the State Consortium recommended the development of an Evaluation Task Group to develop an evaluation RFA by spring 2018.

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

George Santayana

### Why Is This Important?

In the U.S. 93% of men and 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: ECE Provider Quality Support

### Quality Counts & Center-based Sites

#### What Did We Accomplish This Year?

#### DATA NUGGETS:

- In *Quality Counts* the Child Care Planning Council has built and maintained a collaborative partnership to support ECE providers in quality-improvement activities.
- 18 center-based ECE providers participated in IMPACT SLO during 2016/17, with 17 of them (94%) completing their provisional ratings. Four of them were private preschools, with one of those being an employer-run site at a local business.

**Objective 1:** By June 30, 2016 and annually thereafter to coordinate SLO County Quality Counts Consortium.

2016/17

**6 meetings of Consortium – 100% of objective**

**Objective 2A:** By June 30 of each year for the following numbers of eligible center-based sites to complete the QRIS provisional rating: 15 in 2017, 24 in 2018.

2016/17

**17 center-based sites completed provisional rating  
113% of objective**

**Objective 2B:** By June 30 of each year for the following numbers of eligible center-based sites to complete the entire QRIS process (Step 3: provisional rating; development and implementation of an initial quality commitment plan; and baseline rating): 15 in 2017; 14 in 2018 (and, projecting beyond this contract: 5 in 2019; and 5 in 2020).

2016/17

**13 center-based sites completed baseline rating  
87% of objective**

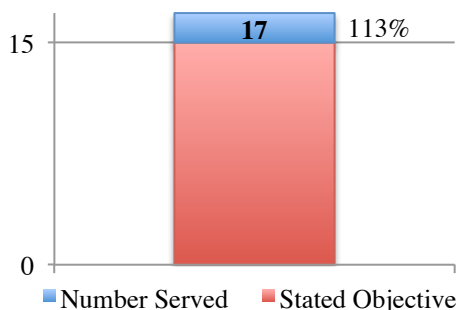
#### Why Is This Important?

Ensuring high quality diverse ECE programming is the paramount purpose of IMPACT SLO. QRIS provides a systematic approach to measuring and improving ECE.

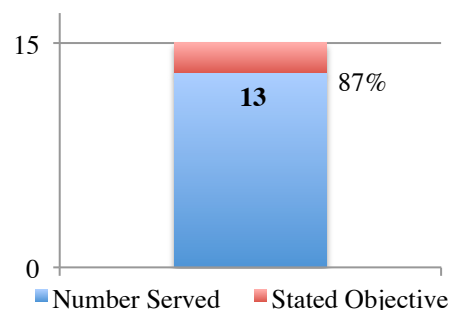
Publically-funded center-based sites in SLO County are supported through three grant programs: CA State Preschool; Infant/Toddler; and IMPACT. IMPACT can also support private sites. The rating system involves all seven elements in the QRIS Rating Matrix.

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

**Number of Center-based Sites Completing Provisional Rating, Served & Objective, 2016/17**



**Number of Center-based Sites Completing Baseline Rating, Served & Objective, 2016/17**



## IMPACT SLO: ECE Provider Quality Support

### Family Childcare Sites

#### What Did We Accomplish This Year?

##### DATA NUGGETS:

- 35 FCCs participated in IMPACT SLO during 2016/17, with 31 of them (89%) completing their provisional ratings.
- 32 of the FCCs (91%) were Spanish-speakers.
- 12 Spanish-speakers providers expressed a desire to work toward attaining their Child Development Credential.

**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 2017; and 21 in 2018.

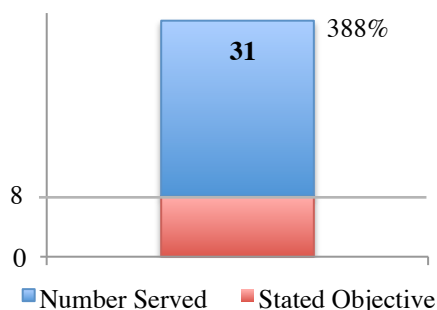
2016/17  
**31 FCC sites completed provisional rating**  
**388% of objective**

The number of FCCs demonstrating interest was beyond all expectations, and, rather than making them wait, the decision was made to accommodate all interested providers. This put a strain on the infrastructure, but adjustments were made. Individual onsite coaching was eliminated. Providers formed study groups instead, and worked together in group learning.

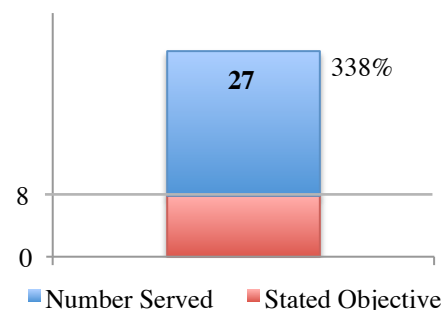
**Objective 3B:** By June 30 of each year for the following numbers of eligible family childcare sites to complete the entire QRIS process (Step 3: provisional rating; development and implementation of a quality improvement plan; and baseline rating): 8 in 2017; 10 in 2018 (and, projecting beyond this contract: 6 in 2019; and 5 in 2020).

2016/17  
**27 FCC sites completed baseline rating**  
**338% of objective**

**Number of Family Childcare Sites Completing Provisional Rating, Served & Objective, 2016/17**



**Number of Family Childcare Sites Completing Baseline Rating, Served & Objective, 2016/17**



#### Why Is This Important?

Family childcare (FCC) 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 First 5 CA 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

#### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 12 professional development trainings were attended by 116 (duplicated) ECE professionals from IMPACT SLO sites. There was staff turnover during the first two quarters that accounts for the lower number than anticipated.
- 3 of the trainings (25%) were SEFEL trainings, which were attended by 36 IMPACT SLO providers.
- 6 of the trainings (50%) were for four Alternative Sites (e.g., SLO City/County Library; First 5 SR Site - Georgia Brown; First 5 SR Site - Oceano; and Oceano Boys & Girls Club), and were attended by 36 (duplicated) participants.

**Objective 1:** By June 30, 2018 to provide at least 15 professional development activities, annually, in Early Childhood Education for IMPACT SLO participants.

2016/17  
**12 professional development trainings**  
**80% of objective**  
**3 SEFEL trainings provided for ECE providers**

#### Why Is This Important?

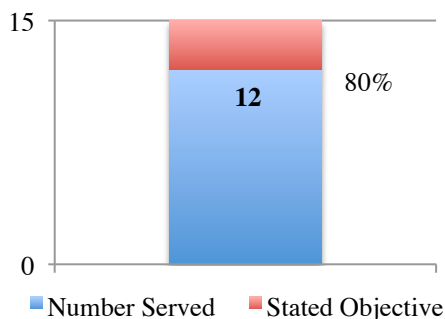
These two Supplemental Activities are part of SLO County's interpretation of IMPACT. They are intended to support both ECE providers and Alternative Sites.

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

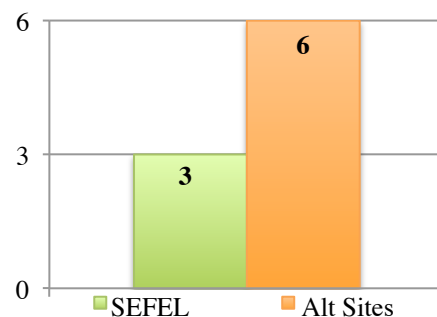
SEFEL is a locally-modified version of a training on the importance of social-emotional development to successful early learning.

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

**Number of Total Trainings, Actual & Objective, 2016/17**



**Number of SEFEL Trainings & Alternative Site Trainings 2016/17**





## IMPACT SLO: Supplemental Activities

### Early Literacy/Raising a Reader

#### What Did We Accomplish This Year?

#### DATA NUGGETS:

- 724 families of young children received a special bookmark and encouragement to talk, read, and sing with their children in a partnership between IMPACT SLO and the Public Health Department's Women Infants and Children Program.
- 4 family childcare providers began Raising a Reader programs.

**Objective 1A:** By June 30, 2018 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 Early Literacy Coordinator worked with WIC to establish an early literacy project within that public health program. Based on *Talk. Read. Sing.*, the project involved WIC staff stressing the importance of talking, reading, and singing between caregivers and children, and providing parents with a special bookmark, *3 Ways to Read*, developed by the Coordinator.

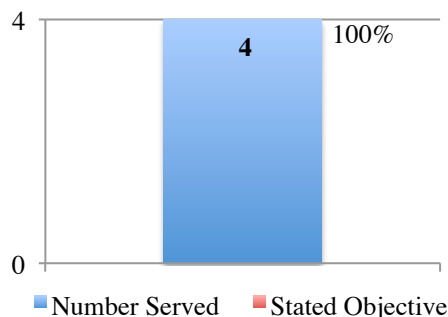
**Objective 1B:** By June 30, 2018 to establish Raising a Reader programs in at least 2 center-based ECE sites, 4 family-childcare sites, and 4 Alternative Sites that are participants in IMPACT SLO.

2016/17

**4 family childcare sites began RAR**

**100% of objective for FCC involvement**

**Number of Family Childcare Sites Establishing Raising a Reader Programs, Served & Objective, 2016/17**



#### 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**.

# Distribution of Kits for New Parents

## What Did We Accomplish This Year?

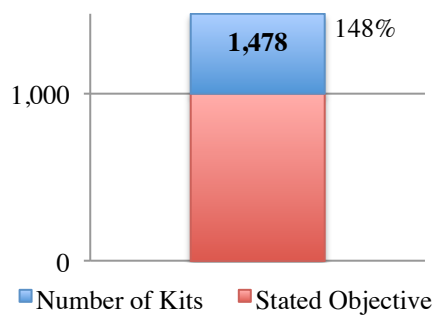
### DATA NUGGETS:

- 1,478 kits were distributed by First 5 SLO County to six different providers in 2016/17.
- 9% 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.

2016/17  
**1,478 kits distributed – 148% of objective**

**Number of Kits for New Parents Distributed  
 Actual & Objective, 2016/17**



### 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. They also contain information about resources to help parents learn 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.**