

A G E N D A

CHILDREN & FAMILIES COMMISSION OF ORANGE COUNTY TECHNICAL ADVISORY COMMITTEE

Wednesday, June 9, 2021

Orange County Transportation Authority Conference Center
550 South Main Street, Orange, CA 92868
(This meeting will be held via Zoom, link listed below)

FRANK DONAVAN, Ed.D.
Committee Chair

SUSAN MCCLINTIC
Committee Vice Chair

EDWIN POON, PhD
Committee Member

CHRISTINE OLMSTEAD, Ed.D.
Committee Member

KEN MCFARLAND
Committee Member

CHRISTINE SNAPPER
Committee Member

DAVID NÚÑEZ, MD
Committee Member

KIMBERLY GOLL
Committee Member Ex-Officio

The First 5 Orange County Children and Families Commission, Technical Advisory Committee welcomes you to this meeting. This agenda contains a brief general description of each item to be presented. The Technical Advisory Committee encourages your participation. If you wish to speak on an item contained in the agenda, or wish to address the Committee on items not listed on this agenda that are of interest to the public and are within the subject matter jurisdiction, you may do so during the Public Comment period at the close of the meeting.

Except as otherwise provided by law, no action shall be taken on any item not appearing in the agenda. When addressing the Committee, please state your name for the record prior to providing your comments.

****In compliance with the Americans with Disabilities Act, those requiring accommodation for this meeting should notify the First 5 Orange County Children & Families Commission Office 72 hours prior to the meeting at (714) 834-5310****

GUIDANCE FOR PUBLIC ACCESS TO REDUCE RISK OF COVID-19: On March 12, 2020 and March 18, 2020, Governor Gavin Newsom enacted Executive Orders N-25-20 and N-29-20 authorizing a local legislative body to hold public meetings via teleconferencing and make public meetings accessible telephonically or electronically to all members of the public to promote social distancing due to the state and local State of Emergency resulting from the threat of Novel Coronavirus (COVID-19). In accordance with Executive Order N-29-20, and in order to ensure the safety of the Committee Members and staff and for the purposes of limiting the risk of COVID-19, in-person public participation at this meeting of the Technical Advisory Committee will not be permitted. This meeting will be held via Zoom. Members of the public can listen to the live meeting by accessing the following:

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/85942126456?pwd=eDVwZFhYUz4QThVaEd1d0Z5OVFmdz09>

Webinar ID: 859 4212 6456

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The Technical Advisory Committee is accepting public comments to be submitted by emailing them to First5OC@cfcoc.ocgov.com. The comments will be distributed to all of the Committee Members and read into the record. If you wish to comment on a specific agenda item, please identify the item in your email. General public comments will be addressed during the general public comment item on the agenda. In order to ensure that staff has the ability to provide comments to the Committee Members in a timely manner, please submit your comments by 12:00 p.m. on June 8, 2021.

Any member of the public requiring a reasonable accommodation to participate in this meeting should contact First 5 Orange County Children and Families Commission at least 48 hours prior to the meeting at First5OC@cfcoc.ocgov.com or (714) 834-2206.

10:00 A.M.

PRESENTATIONS

None

CONSENT CALENDAR (None)

All matters are approved by one motion unless pulled by a Committee Member for discussion or separate action. At this time, any member of the public may ask the Committee to be heard on any item on the Consent Calendar.

REGULAR ITEMS: (Items 1-3)

1. Welcome and Roundtable Activity
2. Presentation and Discussion of Technical Advisory Committee Member Interviews and Key Findings: Orange County Health Care Agency and Fountain Valley Regional Hospital and Medical Center
3. Discussion of Technical Advisory Committee Work to support First 5 Orange County's Strategic Plan

PUBLIC HEARING (None)

At this time members of the public may address the Committee on any matter not on the agenda but within the jurisdiction of the Committee. The Committee or Chair may limit the length of time each individual may have to address the Committee.

COMMITTEE MEMBER ROUNDTABLE COMMENTS

PUBLIC COMMENTS

ADJOURN



**TAC Agenda Item 1
June 9, 2021**

DATE: June 1, 2021

TO: Technical Advisory Committee Members

FROM: Kimberly Goll, President/CEO

ACTION: Receive Welcome and Conduct Community-Building Roundtable Activity

The Chair will provide opening remarks followed by a roundtable discussion of the following question to allow Technical Advisory Committee members get to know each other better.

Question: What is your favorite tool or strategy for brainstorming new ideas or problem solving?

RECOMMENDED ACTION:

Receive welcome and conduct community-building roundtable activity

ATTACHMENTS: None

CONTACT: Lisa Burke

Technical Advisory Committee Members:



TAC Agenda Item 2
June 9, 2021

DATE: May 27, 2021

TO: Technical Advisory Committee Members

FROM: Kimberly Goll, President/CEO

ACTION: Presentation and Discussion of Technical Advisory Committee Member Interviews and Key Findings: Orange County Health Care Agency and Fountain Valley Regional Hospital and Medical Center

DISCUSSION:

At today's meeting, two TAC member agencies will provide an overview of programs they are involved with in the Prenatal to Three space: OC Health Care Agency staff will share about their Nurse Family Partnership program; and Kenn McFarland and/or Fountain Valley Regional Hospital staff will share about their Baby Friendly program and designation.

In preparation, First 5 Orange County staff met with TAC members and their staff, using the system framework (attached) to gain a better understanding of the services provided, how information about the services is shared with families as well as program coordination and evaluation. The presentations include a summary of the selected programs, any immediate actions that came out of the meeting, and opportunities to coordinate and leverage across programs/agencies.

RECOMMENDED ACTION:

Discuss Technical Advisory Committee Member Interviews and Key Findings

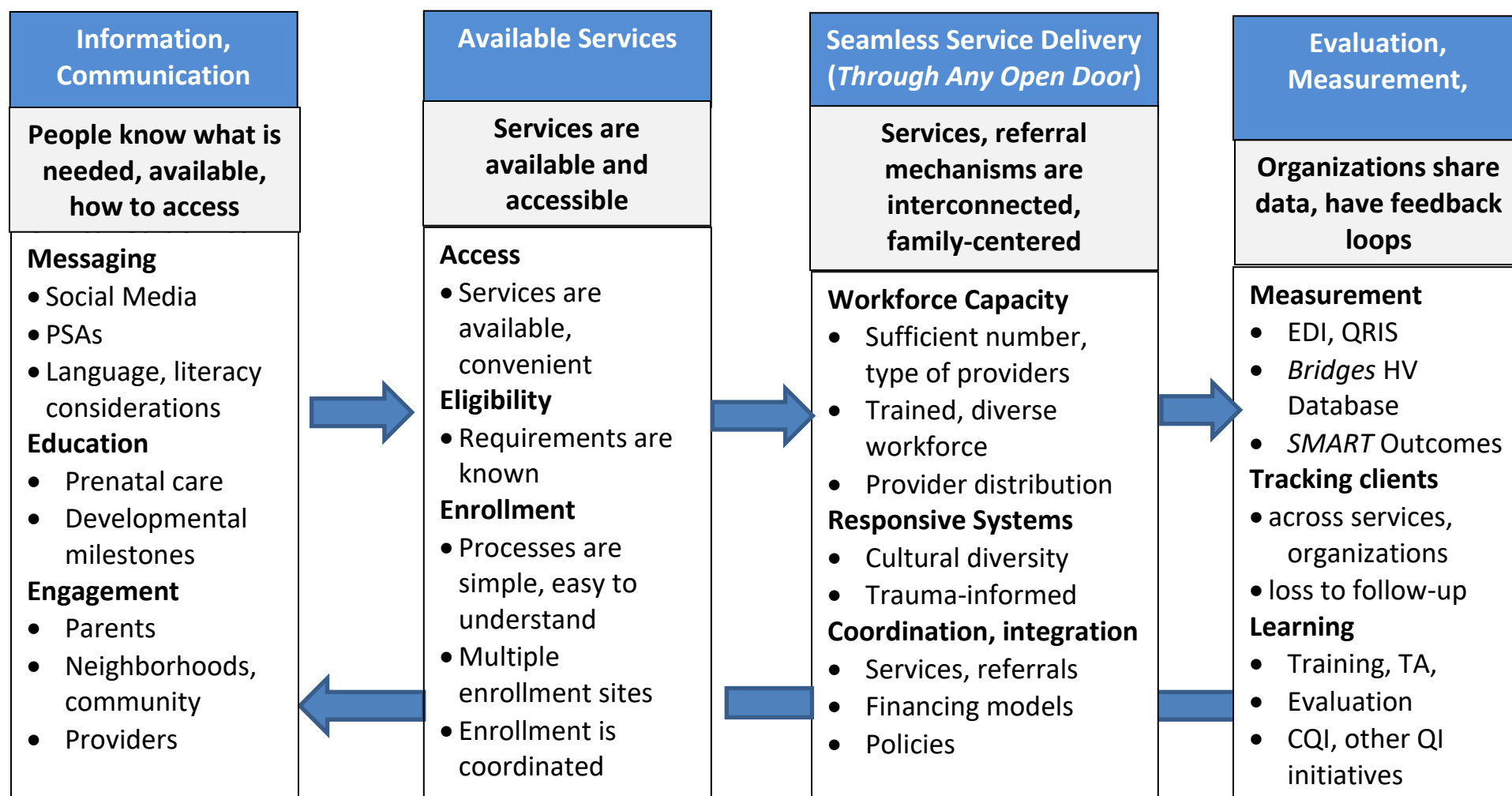
ATTACHMENTS:

1. PN3 System Framework
2. PowerPoint summary of OC Health Care Agency's Nurse Family Partnership program and Fountain Valley Regional Hospital and Medical Center's Baby Friendly designation

CONTACT: Lisa Burke

Technical Advisory Committee Members:

PN3 System Framework



First 5 Technical Advisory Committee

Agenda Item 2
TAC Member Presentations

June 9, 2021



ORANGE COUNTY HEALTH CARE AGENCY



Nurse Family Partnership (NFP)

- A national evidence-based nurse home visiting program for low income, first-time parents and their children
 - Mothers are partnered with a registered nurse early in pregnancy and receive ongoing home visits that continue through the child's second birthday

Nurse Family Partnership Goals

- **Improve pregnancy outcomes**
 - Help women engage in good preventive health practices, including prenatal care from their healthcare providers, healthy diet, and reduction in the use of cigarettes, alcohol and illegal substances
- **Improve child health and development**
 - Help parents provide responsible and competent care
- **Improve family economic self-sufficiency**
 - Help parents develop a vision for their family



Opportunities

- **Pillar 1: Information/Communication**
 - Expand messaging to targeted populations about NFP and information on accessing services (social media, other)
- **Pillar 2: Available Services**
 - Link to CalOptima, OBGYN providers, FQHC's as referral sources into NFP
- **Pillar 3: Seamless Service Delivery**
 - Since focus has shifted from teenage parents, NFP is working to determine if workforce capacity meets community needs



FOUNTAIN VALLEY REGIONAL HOSPITAL AND MEDICAL CENTER



“Baby Friendly” Hospital Designation

Designation from Baby-Friendly USA for adhering to the highest standards of care for breastfeeding mothers and their babies

- Rigorous 10-step standards that designees must meet in this evidence-based practice for optimal infant feeding support in the first days of a newborn’s life.
- Goal is for hospitals to create a supportive environment and provide optimal infant feeding care for every mother and baby while respecting the right of mothers to choose what is best for her and her baby



Mother/Baby Bonding & Breastfeeding

- Baby-Friendly designated facilities create an environment that is conducive to successful breastfeeding by offering an optimal level of care for infant feeding and mother/baby bonding
- Immediate and uninterrupted skin-to-skin contact and initiation of breastfeeding within the first hour after birth are important to establish breastfeeding, and for neonatal and child survival and development

Fountain Valley Hospital went from 14% breastfeeding rate to 49.2% breastfeeding rate after the designation was received

Opportunities

- **Pillar 1: Information/Communication**
 - Work with medical providers to encourage mothers to continue breastfeeding during post-natal and well child visits
- **Pillar 3: Seamless Service Delivery**
 - Prenatal education and outreach to targeted populations in the community about the importance and benefits of breastfeeding
 - Support groups for specific groups of mothers, e.g., NICU, children on the spectrum, etc.



**TAC Agenda Item 3**
June 9, 2021**DATE:** June 1, 2021**TO:** Technical Advisory Committee Members**FROM:** Kimberly Goll, President/CEO**ACTION:** Update on First 5 Orange County's Strategic Plan and Discussion of Next Steps for Technical Advisory Committee Work

DISCUSSION:

In April, First 5 Orange County approved its Strategic Plan for Fiscal Year 2021/22 through Fiscal Year 2025/26. At the June 2nd Commission meeting, the board reviewed an action plan that provides greater detail about the work to be conducted in the first 24 months of the Strategic Plan (Attachment 1). The board also approved stakeholder engagement strategies related to the Strategic Plan, including having the TAC continue its focus in the Prenatal to Three (PN3) space, with a particular emphasis on home visiting.

As you know, for the past several months, TAC members have been sharing and discussing programs within their agency purview related to PN3, using a systems framework, and identifying opportunities across the four system pillars described below:

1. Information and Communication (*people know what is needed, available, how to access*)
2. Available Services (*services are available and accessible*)
3. Seamless Service Delivery (*services, referral mechanisms are interconnected, family-centered*)
4. Evaluation, Measurement (*organizations share data, have feedback loops*)

The presentation attached to this agenda item (Attachment 2) shows the linkage between First 5 Orange County's Strategic Plan goals, the action of strengthening Orange County's home visiting system, and the system framework. It outlines aspirations for building a coordinated, countywide home visiting system within the four pillars of the system framework described above and offers recommendations for how the TAC can support these aspirations for member discussion. One proposed next step is for the TAC to receive a presentation at its next meeting from Health Management Associates (HMA), the consulting firm that is supporting First 5 including the TAC for home visiting system coordination work.

RECOMMENDED ACTION:

Receive update on First 5 Orange County's Strategic Plan and discuss the TAC's role in supporting strengthening of the countywide home visiting system.

ATTACHMENTS:

1. Action Plan for the First 5 Orange County Strategic Plan
2. PowerPoint Presentation

CONTACT: Lisa Burke**Technical Advisory Committee Members:**

First 5 Orange County Strategic Plan Action Plan for 2021/22 and 2022/21

Help families get the most out of well-child visits and screenings

1. Leverage data to prioritize needs, set community targets for the Medi-Cal population

- Leverage Detect & Connect OC and its committees to:
 - Explore baseline data from CalOptima, health networks and Federally Qualified Health Centers on well-child visits/screenings among the Medi-Cal population to understand and leverage what is already being done
 - Integrate First 5 and other partner data as appropriate, for example, Early Development Index, school district, OC Children's Screening Registry, Early Head Start, Strong Start Index, etc. to help determine a shared goal for and barriers to increased well-child visits and developmental screens
 - Ensure consistency across Detect & Connect partners and F5 funded programs when discussing well-child visits and screenings

2. Ensure well-child visits, linkage to health homes, and screenings are included in some form in all First 5-funded partner scopes

3. Integrate parent voice and empower them to participate in discussion and decision-making about well-child visits, screenings, and interventions

- Conduct focus groups with parents to understand the barriers they experience to attending well-child visits
- Periodically reconvene focus groups to evaluate actions taken by Detect & Connect OC/funded partners to improve well-child visits and screenings
- Empower parents to help design and implement the communications campaign below
- Incorporate tools for families to feel successful once they reach all well-child visits and screening

4. Develop comprehensive messaging and outreach

- Develop communications campaign about why parents should keep well-child visits and addressing identified barriers. Focus on first 15 months of life.
 - Leverage partnership with Detect & Connect and First 5 OC funded partners to expand outreach and system alignment
 - Build a parent-to-parent communications campaign
 - Develop mechanism for parents to provide feedback loop on effectiveness of campaign

5. Continue to advocate for continuous enrollment for children through their 5th birthday

Promote services that support Protective Factors for children and families

- 1. Connect with community efforts to increase access to financial supports (e.g., CalFresh, WIC, CalWORKs, child care, etc.)**
 - Engage in conversations with community partners about the unique ways that F50C can assist in identifying barriers and alleviating those barriers, for example, streamlining application process, expanding outreach/application efforts to include early points of intervention such as home visiting, homeless shelters, and child care
 - Contribute data to support targeted outreach including Early Development Index, Disparity Index, and Strong Start
 - Bring Engaged Neighborhood collaboratives into the discussion to help co-design solutions to barriers to accessing concrete benefits
 - Bring the Technical Advisory Committee into the discussion for ideas for system alignment, promotion, support
- 2. Develop an educational outreach campaign about what are the Protective Factors and why they are important**
 - Work with parents, partners, and community collaboratives to develop and disseminate messaging
 - Provide trainings on protective factors for Engaged Neighborhoods parents
 - Determine what messages resonate with Orange County providers and parents
 - Leverage partnerships to expand outreach and system alignment
 - Build a parent-to-parent communications campaign
 - Develop mechanism for parents to provide feedback loop on effectiveness of campaign
- 3. Implement a parent engagement plan that helps inform program design and provides infrastructure to connect with, strengthen, and support parents, community leaders, public agencies, and community organizations to co-create and advocate for solutions**
 - Refine and continue the strategy of parent engagement in each Engaged Neighborhood
 - Support Engaged Neighborhood Collaboratives with their new Scopes of Work with specific focus on parent engagement
 - Explore relationship with and funding for Stanton as new Engaged Neighborhood, including sharing Early Development Index data
 - In partnership with a set of Engaged Neighborhood fathers and providers, co-create a Father Engagement strategy and cultivate support to implement the strategy by year 2.
 - Support funded programs to build out parent participation/parent voice

Promote services that support Protective Factors for children and families (cont.)

4. Expand programmatic offerings to build resilient families

- Perinatal Mood and Anxiety Disorders (PMADs): Increase prevention, identification, and treatment of Perinatal Mood and Anxiety Disorders (PMADs)
 - Increase awareness of PMADs among parents by developing and disseminating parent-to-parent PMAD materials throughout Engaged Neighborhood communities and to other partners
 - Deploy updated provider resources to support education, identification, referral, and treatment
- Mothers with perinatal substance use and infants with prenatal substance exposure: Strengthen the system of care services for mothers with perinatal substance use and infants with prenatal substance exposure
 - Design/ implement an Intergovernmental Transfer project in partnership with CalOptima, OC Social Services Agency, and CHOC Children's to expand evidence-based, family-centered/dyadic services for infants with neonatal abstinence syndrome and their families to decrease the number of infants in out-of-home care
 - Expand follow-up services and monitoring which could include a resource specialist dedicated to connecting these families with community resources, improving continuity of care for families; connection and data-sharing with pediatricians and other members of the care team.
 - Engage with OC Social Services Agency to leverage opportunities under the Family First Prevention Services Act to support families at risk of disruption through mental health, substance use disorder, and in-home supports
 - Participate in countywide collaboratives to explore additional systemic approaches to improving the system of care including the Child Welfare System Improvement Plan Partnership (CSWIP), the SUD Leadership Group of Be Well, and the County Touchpoints Learning Collaborative
- Home Visiting System: Strengthen the home visiting system through alignment with need, working with partners, and expansion
 - Elevate learnings to partners about current resources and systems gaps (i.e., special populations as identified in CalAIM)
 - Engage partners and cultivate their interest in building and integrating system of supports to increase uptake and coordination of home visiting services
 - Increase referral pathways between clinic services (e.g., Healthy Steps, DULCE) and home visiting
 - Integrate parents into systems-building work
 - Implement a strategy to build public will around the need for Home Visitation
 - Use Bridges data to conduct an equity audit on program offerings and where gaps may exist. Build a more diverse program offering and share findings with partners
 - Identify advocacy and funding opportunities to sustain home visiting efforts as part of a larger countywide effort
 - Increase prenatal engagement of families in home visiting services families where they are

Promote services that support Protective Factors for children and families (cont.)

- Medical Legal Partnership Boston: Implement the Medical Legal Partnership Boston (MLPB) program to equip early childhood communities with legal education and problem-solving insight
 - Leverage Engaged Neighborhood Collaboratives
 - Disseminate needs assessment
 - Specify local early childhood cohort up to 25 participants
 - Engage 4-6 ambassadors in MLPB's Content Advisory Committee
 - Ensure sustainability through Trainer of Trainer model
- Family Homelessness Prevention: Prevent families from becoming homeless by supporting Family Solutions Collaborative in their implementation of Diversion work through amendment to Housing Navigator Program
- Community Collaboratives: Elevate emphasis on prevention and advocate for a focus on children 0-5 and their caregivers within community collaboratives and planning processes whose aims are to improve the health of all residents, e.g., Be Well and its committees, Trauma-Informed Network of Care and committees, ACEs Aware, MHSA community planning, CWSIP

Increase availability and accessibility of quality infant and toddler child care

1. Implement Communications Plan for Child Care Landscape to capitalize on the momentum from Phases I and II and build public will

- Conduct webinars and presentations and other outreach to parents, stakeholders, and partners to identify potential solutions and champions
- Provide technical assistance for local businesses to become champions and part of solutions by sharing how child care challenges impact the workforce and developing actions tailored to business and having specific ways they can help – "Asks"
- Advocate to legislators to become champions and support legislative solutions
- Illuminate best practices currently happening in OC and /assist interested organizations in pursuing best practices to increase the number of quality child care sites in OC

2. Establish infant/toddler child care task force

- Work through the Local Planning Council to set vision and community target for increased amount of child care and/or subsidy dollars coming into OC for infant/toddler care, shared measurements, and strategy for action.
 - Identify local strategies for expansion that don't require state/federal funding
 - Create more linkages among early childhood education service providers
 - Create new partnerships specifically to address 0-3 service expansion and system alignment
 - Include strategies for increased quality in infant/toddler child care.
 - Use EDI/Disparity Index data to target local investment

Increase availability and accessibility of quality infant and toddler child care (cont.)

3. Align systems to prioritize special populations to access child care

- Invest in Early Learning Liaisons with a focus on linking home visiting clients and families experiencing or at risk of homelessness

4. Build the capacity of family, friend, and neighbor providers

- Enhance the connection between family, friend and neighbor providers and the community college early childhood education (ECE) infrastructure for expansion and quality improvement
- Provide technical assistance to build the capacity of high quality, culturally and linguistically appropriate child care providers to become leaders and trainers

First 5 Technical Advisory Committee

Agenda Item 3

Support for First 5 Strategic Plan
2021-2023 Action Plan

June 9, 2021



Setting the Stage

First 5 Orange County Strategic Plan

Priority Goals 2021/22 to 2025/26

1. Well-child visits, screenings, and linkage to services
2. Services that support Protective Factors for children and families 
3. Quality infant and toddler care

What are the Protective Factors?

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children





Services that support Protective Factors for children and families

Four activities are key to Goal 2

- Connect with community efforts to increase access to financial supports
- Develop an outreach campaign about what are the Protective Factors and why they are important
- Implement a parent engagement plan that helps inform program design and provides infrastructure to connect with, strengthen, and support parents, community leaders, public agencies, and community organizations to co-create and advocate for solutions
- **Expand programmatic offerings to build resilient families** ★

Expand programmatic offerings to build resilient families

- Perinatal Mood and Anxiety Disorders
- Mothers with perinatal substance use and infants with prenatal substance exposure
- Home Visiting System ★
- Medical Legal Partnership Boston
- Family Homelessness Prevention
- Community Collaboratives

Home Visiting Background

Background

- There is broadening support at the state and federal level for home visiting
- Home visiting plays an important role in increasing Protective Factors for families
- Home visiting will also support families in the recovery from the pandemic
- First 5 OC received home visiting coordination funds. We've contracted with HMA to help support this work.





TAC Connections

- Home Visiting Services

- Social Services Agency – CalWORKs Home Visiting
- Health Care Agency – Nurse Family Partnership
- CalOptima – Bright Steps

- Referral Pathways

- Hospitals
- Child Care, Schools, School Districts
- Family Shelters

Building a Coordinated Home Visiting System

Pillar 1: Information, Communication *(people know what is needed, available, how to access)*

- Develop and implement a strategy to build public will around the need for Home Visitation
- Address and better understand barriers for engagement and participation
- Integrate parents into home visiting systems-building work
- Destigmatize receiving home visiting services

Building a Coordinated Home Visiting System

Pillar 2: Available Services *(services are available and accessible)*

- Identify specific gaps in services
- Include parents and providers in the co-creation of a coordinated system
- Identify need and implement home visiting for special populations
- Use data to conduct an equity audit on program offerings and where gaps may exist. Share findings with partners and build a more diverse program offering
- Identify advocacy and funding opportunities to sustain home visiting efforts as part of a larger countywide effort

Building a Coordinated Home Visiting System

Pillar 3: Seamless Service Delivery *(services, referral mechanisms are interconnected, family-centered)*

- Elevate learnings to partners about current resources and systems gaps
- Increase and strengthen bi-directional referrals between home visiting and other community access points (schools, clinics, shelters, etc.)
- Conduct coordinated workforce development
- Increase prenatal engagement of families in home visiting services where families are

Pillar 4: Evaluation, Measurement *(organizations share data, have feedback loops)*

- Build common vision, shared outcomes, and system measurements to track progress and support ongoing improvement

Next Steps

HMA's Support

- Elevate learnings about gaps and needs in the home visiting system
- Serve as facilitator and issue expert
- Data analysis
- Identify expansion opportunities
- Act as partner to TAC





Technical Advisory Committee Role

- Inform bidirectional pathways to and from home visiting
- Act as “think tank” about special populations – are we getting home visiting resources to the right people?
- Support parent engagement efforts in home visiting design, services
- Help think about data/evaluation

Discussion

Discussion

- Reflections on the presentation
- What other information/inputs do you need?
- Next TAC meeting
 - Presentation by HMA outlining their work, findings

