

A G E N D A

FIRST 5 ORANGE COUNTY TECHNICAL ADVISORY COMMITTEE SPECIAL MEETING

Thursday, August 24, 2023

Big Brothers Big Sisters of Orange County
Training Room
1801 E Edinger Ave., Santa Ana, CA 92705

Vacant
Committee Chair

SUSAN MCCLINTIC
Committee Vice Chair

GAIL ARAUJO
Committee Member

MARIE JEANNIS, RN, MSN, CCM
Committee Member

SCOTT BURDICK
Committee Member

JADE JENKINS, PH.D.
Committee Member

MICHELE CHEUNG, MD
Committee Member

DAWN SMITH, LCSW
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. Except as otherwise provided by law, no action shall be taken on any item not appearing in the agenda.

****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) 834-2206 or First5OC@cfcoc.ocgov.com.**

Members of the public may address the Technical Advisory Committee regarding any item in two ways:

In-Person Comment

Members of the public may attend in-person and address the Technical Advisory Committee regarding any item on the agenda. Please complete a speaker's card and submit it to the Clerk (or notify the Clerk the item number on which you wish to speak). Speakers will be recognized by the Chairman at the time the agenda item is to be considered. A speaker's comments shall be limited to three minutes.

Written Comment

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 retained as part of the meeting record. If you wish to comment on a specific agenda item, please identify the item in your email. 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 9:00 a.m. on August 24, 2023.

1:00 P.M.

CONSENT ITEMS:

None

REGULAR ITEMS:

1. Welcome and Ice Breaker
2. Election of Committee Chair and Vice-Chair
3. Receive Summary of Technical Advisory Committee Reconfiguration
4. Discuss First 5 OC Issue Briefs for Well-Child Visits and Screens, Infant and Toddler Child Care, and Home Visiting
5. Plan for Community Summit to Build Support for System Improvements through Countywide Collaboratives

COMMITTEE MEMBER ROUNDTABLE COMMENTS

PUBLIC COMMENTS

ADJOURN

DATE: August 15, 2023

TO: First 5 Orange County

FROM: Kimberly Goll, President/CEO



ACTION: Welcome and Ice Breaker

SUMMARY:

At this first meeting of the Technical Advisory Committee (TAC) in 2023, we will welcome new member Jade Jenkins, and get reacquainted through an ice breaker.

DISCUSSION:

We spent several months working on a reconfiguration of the TAC to have a more effective meeting structure and defined roles for TAC members (see Agenda Item 3 for more details). Since approval of that reconfiguration in February 2023, the First 5 OC Board appointed a new TAC member, Jade Jenkins. Jade is an Associate Professor at UCI's School of Education and is also the chairperson of OC Head Start. We believe our systems improvement work in quality infant and toddler child care will benefit from her professional experience and educational background. She will serve as a liaison to the Child Care Cross-Sector Task Force. A brief biography for Jade is provided as Attachment 1.

For our ice breaker, we will have roundtable sharing to answer these questions:

- 1) What is the countywide collaborative you serve on or will serve on? (Detect & Connect OC, Home Visiting, Child Care, or Early Childhood Mental Health);
- 2) Within that collaborative and/or its work, what is one thing you are proud of? (if you haven't had a meeting(s) yet, skip to next question;
- 3) What is one dream you have for the collaborative in the future?

STRATEGIC PLAN & FISCAL SUMMARY:

There are no funding actions proposed for this item.

RECOMMENDED ACTION:

Welcome and discussion.

ATTACHMENTS:

1. Jade Jenkins Biography

CONTACT: Lisa Burke

Jade Jenkins, Ph.D

Jade Jenkins is an Associate Professor at the University of California, Irvine (UCI) School of Education studying early childhood development policy. Her work is multidisciplinary and focuses on issues that are amenable to policy intervention, using diverse research methods to evaluate programs and understand the mechanisms that promote child and family wellbeing. She also serves as Chairperson for OC Head Start, Inc.

In her current role at UCI, Jade has many projects in progress, including an analysis of kindergarten readiness and performance of children enrolled in Head Start in Baltimore (*Consequences of early learning program sequences: Evidence from Baltimore City*), a study of the relationship between competition and quality in the mixed-delivery Early Care and Education market in North Carolina (*A Rising Tide that Lifted All Boats? The Effects of Competition on Early Childhood Education Quality*), and an assessment of early intervention and the impact of the Early Head Start program (*The Long-Run Achievement Impacts of Early Head Start: Evidence from Program Roll-Out*).

Her recent publications include the following.

- Keeping Kids in Care: Reducing Administrative Burden in State CCDF Policy (2022, Journal of Public Administration Research and Theory)
- Did State Pre-Kindergarten Programs Affect the Head Start Enrollment of Children with Disabilities? A Quasi-Experimental Analysis (2022, Exceptional Children)
- The promise and the purpose of early care and education (2022, Child Development Perspectives)
- Standards, Curriculum, and Assessment in Early Childhood Education: A Comparison of States' Preschool Curricula Mandates and Quality Rating Systems (2022, Early Childhood Research Quarterly)

Jade grew up in New York and received her B.S. and M.S. degrees from the University of Florida in Family, Youth and Community Sciences. Her Master's focus was in community development and poverty reduction. After the M.S. program, she worked in Florida's early childhood care and education system, and this firsthand experience in policy implementation motivated Jade to pursue her Ph.D. in public policy. She specialized in early childhood development to learn how to evaluate and develop policies that provide support for families with young children and reduce poverty in the long-term.

DATE: August 16, 2023

TO: First 5 Orange County

FROM: Kimberly Goll, President/CEO



ACTION: Election of Committee Chair and Vice-Chair

SUMMARY:

This item requests the Technical Advisory Committee to elect two officers to serve as the Chair and Vice-Chair, beginning August 24, 2023 and continuing until the first TAC meeting of 2024.

DISCUSSION:

The Technical Advisory Committee by-laws require the election of a Chairperson and Vice-Chairperson at the first meeting of the calendar year by a majority vote of the TAC Members present. Committee Members Dr. Frank Donovan and Susan McClintic have most recently served as Chair and Vice Chair of the Committee. Dr. Donovan resigned his position as TAC member and Chair in May.

This item allows for the Technical Advisory Committee members to elect the Chair and Vice-Chair for a term beginning August 24, 2023 through the calendar year 2023. Elections for Chair and Vice-Chair for 2024 will occur at the TAC's first meeting of that year.

STRATEGIC PLAN & FISCAL SUMMARY:

There are no funding actions proposed for this item.


RECOMMENDED ACTION:

Elect the Technical Advisory Committee Chair and Vice-Chair for Calendar Year 2023.

ATTACHMENTS:

None

CONTACT: Lisa Burke

DATE: August 15, 2023**TO:** First 5 Orange County**FROM:** Kimberly Goll, President/CEO **ACTION:** Receive Summary of Technical Advisory Committee Reconfiguration

SUMMARY:

The First 5 OC Board approved a restructure of its Technical Advisory Committee (TAC). This item offers a summary of the restructure including TAC member roles, terms, and meetings.

DISCUSSION:

In February 2023, the First 5 OC Board approved a reconfiguration of its TAC. The TAC will continue its focus on improving systems of care for young children and families, with the following roles for TAC members:

- Serve on a countywide collaborative(s) that is working to improve systems that serve young children and families, in alignment with First 5 OC's Strategic Plan.
- Participate in TAC meetings including an annual early childhood community summit.
- Bring their related expertise and advice to First 5 staff on an ongoing basis, and to Board meetings as appropriate.

Existing countywide collaboratives that align with First 5's Strategic Plan include Detect & Connect OC which focuses on well-child visits and developmental screens; the Home Visiting Countywide Collaborative; and the Child Care System Collaborative. The table below shows TAC member participation on each of these collaboratives. Additionally, one of First 5 Orange County's priority areas is early childhood relational health. There are a few different convenings centered around young children's mental health such as the Prenatal to 5 workgroup of Be Well OC (result area 2 – prevent and act early), Early Childhood Mental Health Collaborative, and Start Well. The Mental Health Services Act leadership is also building greater support for early childhood. As these groups evolve, we anticipate having a TAC representative(s) serving on one or more of the Early Childhood Mental Health collaboratives.

In April 2023, in accordance with newly created bylaws, the F5 OC Board randomly assigned staggered terms for the existing TAC members. In addition to serving their staggered terms, all TAC members are eligible to be reappointed for a 3-year term. TAC member roles and terms are shown below.

Name	Organization	Countywide Collaborative	Term
Gail Araujo (or representative)	OC Social Services Agency	Home Visiting Collaborative	April 5, 2023 – April 4, 2026 (3 years)
Scott Burdick (representative)	OC Social Services Agency	Home Visiting Collaborative	April 5, 2023 – April 4, 2024 (1 year)
Michele Cheung	OC Health Care Agency	Home Visiting Collaborative Detect & Connect OC	April 5, 2023 – April 4, 2026 (3 years)

Marie Jeannis	CalOptima Health	Detect & Connect OC	April 5, 2023 – April 4, 2024 (1 year)
Jade Jenkins	University of California, Irvine	Child Care Cross-Sector Task Force	Aug 2, 2023 – Aug 1, 2026 (3 years)
Susan McClintic	F5 OC Board	Child Care Cross-Sector Task Force	April 5, 2023 – April 4, 2024 (1 year)
Dawn Smith	OC Health Care Agency	Early childhood Mental health (TBD)	April 5, 2023 – April 4, 2025 (2 years)

Prior to the restructure, the TAC met quarterly with staff bringing system-related items for discussion and to identify opportunities for unified messaging around common themes or topic, and intersection between programs/organizations that had similar desired outcomes. With the reconfiguration, the TAC will hold a minimum of two meetings a year, with one of these meetings being a community-facing event to share early childhood systems work including goals, accomplishments, and opportunities. We will be working on fleshing out the community-facing event for 2023 together (see agenda item 5).

STRATEGIC PLAN & FISCAL SUMMARY:

There are no funding actions proposed for this item.

RECOMMENDED ACTION:

Receive report.

ATTACHMENTS:

None

CONTACT:

Lisa Burke

DATE: August 17, 2023

TO: First 5 Orange County

FROM: Kimberly Goll, President/CEO



ACTION: Discuss First 5 OC Issue Briefs for Well-Child Visits and Screens, Infant and Toddler Child Care, and Home Visiting

SUMMARY:

First 5 Orange County staff developed issue briefs in three current areas of work to improve systems serving young children and families. This item seeks TAC input on the briefs and their potential use with system collaboratives.

DISCUSSION:

First 5 OC has been working to improve systems that serve young children and families. This “systems change” focuses on shifting the conditions that hold persistent barriers in place, and includes efforts towards policy change, practice change, and will building. Three systems change areas where First 5 is focusing our energy, in alignment with our Strategic Plan, include:

- 1) Well-child Visits, Screenings, and Linkage to Services;
- 2) Home Visiting; and
- 3) Quality Infant and Toddler Child Care.

Our Partnership and Government Affairs team developed issue briefs for each of these three areas, working closely with staff and consultants who are subject matter experts (see Attachments 1, 2 and 3). The purpose of the briefs is to increase awareness and build champions for early childhood around specific topics. They include information on why the issue is important, related Orange County facts and figures, and strategies and solutions that we have identified and are working on along with countywide partners.

This agenda item will include discussion by TAC members to identify how these issue briefs can be used to support and advance the work of the related system collaboratives, including reflections on the following questions:

- What about the briefs overall resonates with you?
- What opportunities do you see for use of the issue briefs with system collaboratives?
- Other reflections

STRATEGIC PLAN & FISCAL SUMMARY:

There are no funding actions proposed for this item.

RECOMMENDED ACTION:

Elect the Technical Advisory Committee Chair and Vice-Chair for Fiscal Year 2023-24.

ATTACHMENTS:

1. Well-child Visiting and Screening Issue Brief
2. Child Care Issue Brief
3. Home Visiting Issue Brief

CONTACT: Lisa Burke

Well-Child Visits & Developmental Screenings

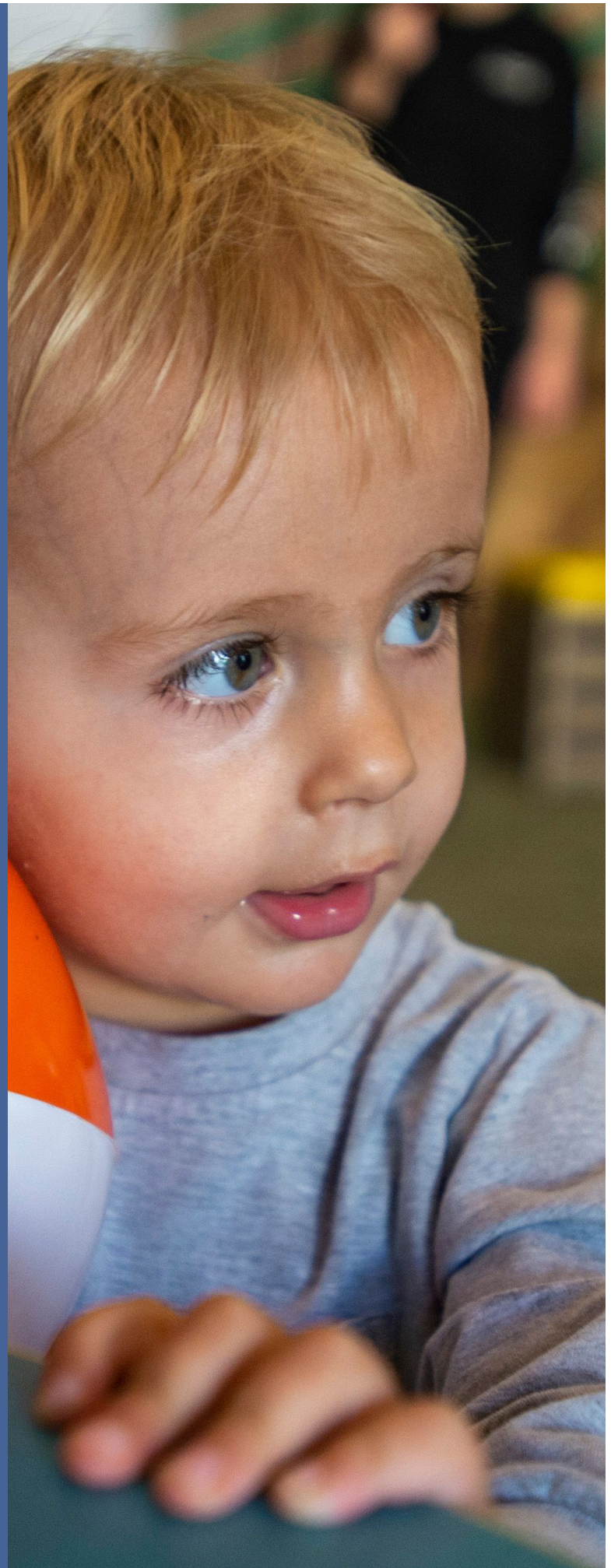
CHILDREN'S OUTCOMES ARE IMPROVED AND THE COSTS ARE LOWER FOR THE SYSTEM OF CARE WHEN DEVELOPMENTAL DELAYS ARE IDENTIFIED EARLY AND FAMILIES RECEIVE HELP.

Often when people think of well-child visits they think of shots, and while immunizations are an important part of preventative care, developmental screenings are also a critical part of certain well visits.

All children develop and grow differently, but there are certain milestones that help families know whether their child is on track or if they need some early intervention and supports to help with their development. When children get their well visits, they do better.



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THE FACTS

An estimated
1 in 6
children in the US have a developmental disability.¹
Yet, in California,
Only 3%
of infants and toddlers receive early intervention services.²

43%
Less than Half
of children in Orange County with Medi-Cal insurance received the recommended 6 or more well visits in the first 15 months of their life.

25%
1 in 4
children in Orange County with Medi-Cal insurance received a developmental screening in the first 3 years of life (25%).


1.Benjamin Zablotsky et al., "Prevalence and Trends of Developmental Disabilities Among Children in the United States: 2009–2017," Pediatrics 144, no. 4 (October 2019): <https://doi.org/10.1542/peds.2019-0811>.

2."IDEA Section 618 Data Products: Static Tables," US Department of Education (webpage), accessed September 19, 2022, <https://data.ed.gov/dataset/idea-section-618-data-products-static-tables-part-c-child-count-and-settings-table-1/resources>.

Well-Child Visits & Developmental Screenings in the First 30 Months:

The American Academy of Pediatrics recommends parents/caregivers bring their children in for 11 well visits between birth and 2½ years old. As part of those well visits, children should receive three developmental screenings at 9, 18 and 30 months. The use of a validated developmental screening tool is a great way for the parent/caregiver and healthcare provider to partner and monitor the child’s development, and to identify any areas of concern so they can be connected with needed resources as early as possible.




1,000,000
neural connections are made per second in a child’s brain during their first few years (Harvard Center on the Developing Child).

California's Investment in Developmental Screening

In the past, providers were not financially incentivized for conducting screenings even though they were required by Medi-Cal as part of well visits. Beginning in 2020, Proposition 56 enabled providers to receive supplemental incentive payments for developmental screenings using a standardized tool. Consequently, we saw significant improvement in the percentage of children receiving developmental screenings in Orange County. Funding for developmental screening incentive payments has since been moved to the state General Fund.

"As a primary care pediatrician, I consider early childhood developmental screening to be one of the most important aspects of routine well child visits. By identifying children who are at risk, we can connect them to services at a young age and allow them to grow to their full potential."

*Reshmi Basu, MD, FAAP President,
AAP-OC Chapter.*

THE NEED

Developmental or behavioral challenges, including speech delays, vision or hearing impairment, learning disabilities, and autism, are often not identified until children are already in school. This means several important years have passed without early intervention, resources, or family support.

System challenges impact families and healthcare providers in a number of ways. To increase the number of children that receive well-child visits, developmental screenings, and early intervention, families and providers need the following:

Families Need:



- Solutions that make it easier to get well visits (e.g., office hours expansion)
- Culturally competent healthcare providers
- Awareness that developmental screenings are part of the services they should receive in well visits
- Help with navigation and connection to services and resources tailored to their needs and insurance
- Greater availability of services without long wait lists

"One thing that would really help would be to allocate enough time with parents in well visits, especially when children are younger."

OC Parent

"Scheduling well visits has been a challenge. Our provider works for a big practice and there is a critical window for making appointments – it has to be at just the right time a few weeks in advance but not too far in advance or they can't schedule. If you wait too long to call, you end up getting the appointment late. And on top of that the times are difficult with work."

OC Parent

Healthcare Providers Need:



- Continued financial incentive to make it feasible for them to conduct developmental screenings as part of well visits
- Training on developmental screenings with a validated tool
- Places to refer children who they find have developmental delays
- Confirmation/validation that the resources they refer families to was successful

"When my oldest was three I was really concerned because he still wasn't talking and we never got help until he got to school. In school they gave him a test and he got an IEP and now has been in speech for three years and is doing better."

OC Parent

STRATEGIES AND SOLUTIONS



First 5 Orange County is working with partners to:

- Shared developmental screening goals for Orange County as well as timely data to help us know if we are making progress
- A well-coordinated system of care with adequate capacity for services and supports that families need
- System improvements that address what we hear families and providers need
- A shared messaging platform so that families and providers hear consistent messages about well visits and developmental screening



First 5 Orange County supports the following:

- Adequate financial compensation to providers for all elements of a well visit
- Continued expectations and incentives for Medi-Cal managed care plans to support well-child visits and developmental screenings
- Advocacy to ensure managed care plans place a priority on prevention and intervention for young children
- Investment in evidenced-based models that improve families' engagement in well-child visits (e.g. HealthySteps, DULCE)
- Ensure continuous Medi-Cal benefit for children ages 0 to 5

Infant and Toddler Child Care Access

ORANGE COUNTY IS FACING A SIGNIFICANT LACK OF CHILD CARE FOR CHILDREN IN THE FIRST THREE YEARS OF LIFE, WHAT IS AVAILABLE IS NOT AFFORDABLE FOR MOST FAMILIES.

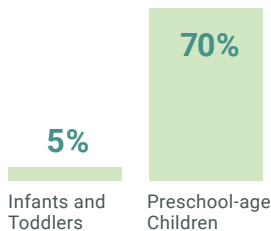
Child care impacts our local economy and parents' ability to work and provide for their families. The economics of offering infant and toddler care, particularly with the advent of universal transitional kindergarten, makes it difficult for Orange County child care providers to meet the need. It is possible to make the economics of providing infant and toddler care more sustainable, and in the process increase slots for infants and toddlers, make them more affordable, and retain family child care choice.



THE FACTS

Availability

Child Care Licensed Slots available in Orange County (a percentage of population)



A 2020 analysis of the Orange County Child Care Landscape reveals there are **only enough licensed slots for 5% of OC's population of infants and toddlers.** By comparison, **there are slots available for 70% of preschool-age children (3-4 years of age).**

* First 5 Orange County Child Care Landscape



21

infants and toddlers for every licensed care slot available in Orange County

Costs to Families (price of care)



\$15,650

Child care in the first three years of life is costly. **The average annual price of full-time, center-based care in Orange County for 1 infant/toddler is \$15,650.** For families that are just above the eligibility threshold for a subsidy, the burden is significant.



6%

of Orange County infants and toddlers eligible for child care subsidies receive them

Economic Realities for Child Care Businesses

The economics of providing child care for infants/toddlers are a challenge for child care businesses

- It costs more to serve infants and toddlers than preschool-age children due to higher provider-to-child ratios
- Providers can't charge the true cost of infant/toddler care because it is unaffordable for most families.
- Providers must enroll preschool-age children to subsidize the cost of providing infant/toddler care.
- As families shift their 4-year-old to no-cost public transitional kindergarten, private providers are increasingly struggling to balance the books while continuing to serve infants and toddler

Reimbursement from the state for subsidized care can help make care more affordable, but infant/toddler reimbursement rates are currently insufficient as calculated. Reimbursement rates are set at 75% of the regional market rate for care depending on the age of the child. Regional market rates are determined by measuring the prices charged by child care providers and paid by parents within a given child care market region. But because providers cannot charge families the true cost of providing infant/toddler care, the regional market rates for infant/toddler care are artificially low and therefore reimbursement rates are also unrealistically low for this age group.

For instance, required staff ratios are three times higher for infant/toddler care than for preschool-age care, but the reimbursement rate for infant/toddler care is only 1.4 times higher than for preschool-age care.



Provider-to-child ratio for center-based care for infants aged 0-2 years is 1:4 and 1:12 for children aged 2-6

THE IMPACT

On the Orange County Economy:

A 2021 economic analysis quantifies the impact of child care issues on the Orange County economy.



67,000 jobs
lost annually due to
disruptions or gaps
in child care



\$4.3 billion
annual productivity
and wages lost



\$372 million
annual tax
revenue lost

"Lack of adequate affordable child care is taking working parents out of the workforce talent pool. There is a gap with women leaving the workforce. Many working mothers are working to just pay the cost of child care."

City of Irvine Staff

* First 5 Orange County Child Care Landscape

On Orange County Families:

In 2021 First 5 Orange County conducted a survey of Orange County families that indicates that child care issues impact parents and guardians. More than 40% of Orange County parents and guardians report that the cost and/or lack of child care has prevented them from working at some point.

"Most of my income pays for childcare – it doesn't make much sense, but I am working so that when they are older and don't need childcare, I have a job".

OC Parent

1 in 5 parents arrive late to work due to gaps in child care.

1 in 6 parents have to leave work early on a regular basis.

1 in 10 parents chose to resign or lost their jobs due to child care challenges.

1 in 11 parents are forced to reduce their hours or can't take full-time positions.

As of January 2021, **4x as many women than men left the workforce**

Female labor force participation is declining, and was hit particularly hard by the pandemic.

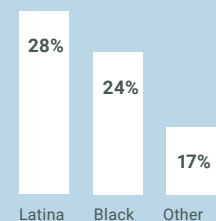
4 times
as many women as men left the workforce in January, 2021

1980
female labor force participation has fallen to its lowest point since the 1980s

*National Women's Law Center Feb 2021 Fact Sheet.

Women of color have been hit particularly hard

Women involuntarily working part-time
(As of January 2021)



On Orange County Providers:



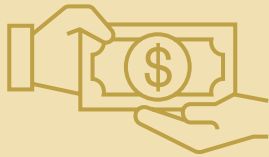
Private providers are struggling to stay in business in the current child care market. For center-based, faith-based, and family-home settings, offering care for infants and toddlers increasingly does not pencil out. This puts private child care providers out of business, reducing available slots and child care choices for families.

"We would like to be able to serve more infants and toddlers, but we can't because the costs for infants is toddlers is higher and our preschool-age children make it possible for us to serve the babies. If we lose preschool kids, it reduces our ability to serve infants and toddlers."

OC Child Care Provider

STRATEGIES AND SOLUTIONS

First 5 Orange County is working with partners to:



Expand access to affordable quality infant/toddler child care and education

- Increase funding and expand eligibility for subsidies through the California Alternative Payment Program (CAPP).



Increase Infant and Toddler Slots

- Expand subsidized care through the state General Child Care and Development (CCTR) programs
- Convert current preschool slots to infant and toddler care



Ensure Family Choice

- Help families better understand the choices available to them and how to navigate to what they need



Provide Business Assistance

- Fund technical assistance for child care businesses and entrepreneurs to support the opening, stability, viability, and expansion of quality child care



Advance Economic Viability

- Advocate for increased reimbursement rates for child care providers to help cover the high costs of infant and toddler care and pay for necessary renovations of facilities
- Ensure that private child care providers have access to funding on par with public providers/transitional kindergarten

For more information visit <https://first5oc.org/childcare/>

Home Visiting

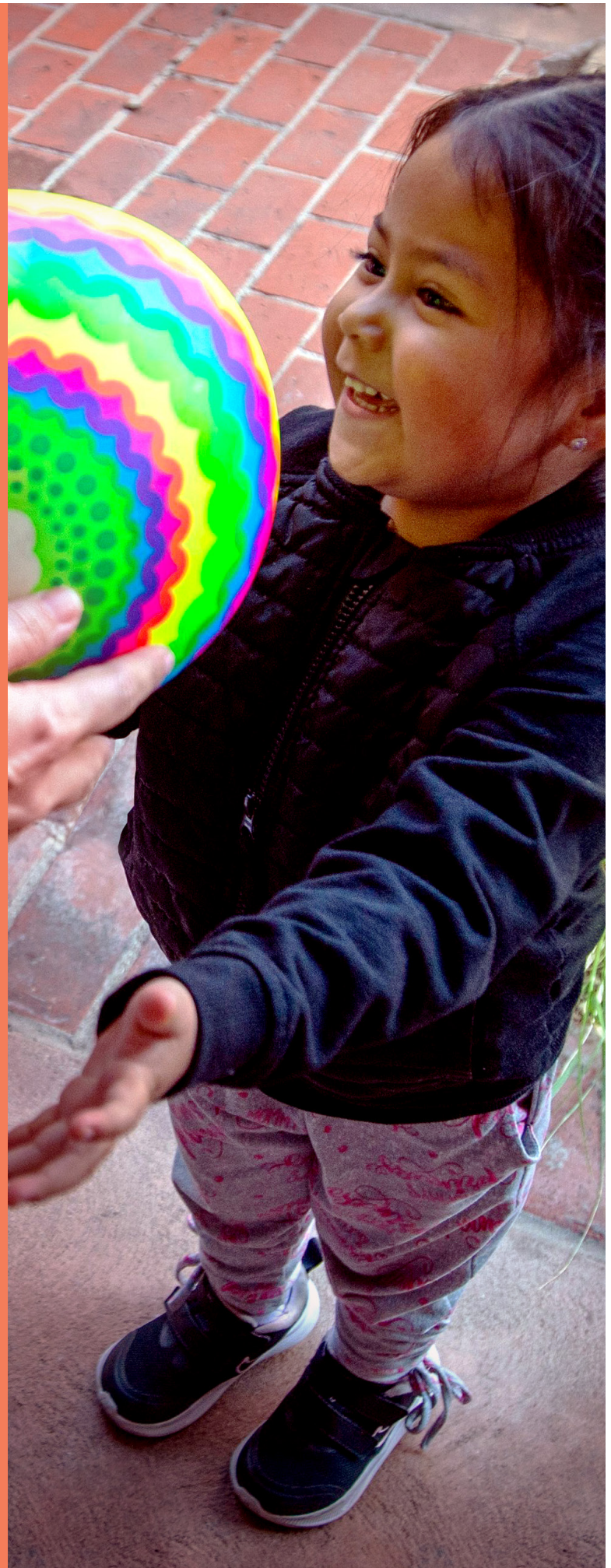
CHILDREN THRIVE WHEN THEY HAVE SECURE ATTACHMENTS WITH ADULTS, AND STABLE, LOVING INTERACTIONS.

Home Visiting is a powerful, evidence-based approach to promote family resilience and connection. Home visiting matches parents with trained professionals who provide tailored, one-on-one parenting and health care education along with connections to community resources.

Orange County's current home visiting system has the capacity to support one in three families with home visiting related services. The capacity of the home visiting system is insufficient. There is a gap of about 10,000 moderate to high need newborns annually in OC who could benefit from home visiting related services.



FIRST 5
ORANGE COUNTY



THE FACTS

Home visiting is designed to support families where they are and be responsive to the needs and challenges that the families identify as most important. As a result, home visiting programs have far-reaching benefits including:



Pregnant women are more likely to access prenatal care and carry their babies to term



Women are less likely to demonstrate symptoms of depression and report an improved mental outlook



Children show improved language development, school performance and attendance, and gross motor skills



Families have fewer Child Protective Services reports and show more positive parenting practices and interactions with their children

Home visiting has a return on investment of \$1.80 to \$5.70 for every dollar spent (Michalopoulos et al., 2017)

"Home visiting has helped me identify the stages of development, my child's needs, the changes that occur because each child is different and, lastly, how to deal with daily challenges. There can be instances when you experience different things and they [home visitors] are there to support, listen to you, and let you know that you are not alone."

OC Home Visiting Participant

"Orange County home visitors provide a lifeline into a whole world of resources that families don't know are available, building lasting connections and walking alongside each family on their unique journey."

OC Home Visiting Provider



California recognizes home visiting as a critical component of the state's comprehensive early childhood system.

Since 2019, California has expanded access to home visiting through creation of the CalWORKs Home Visiting Program, dedication of state general funds to match federal funding, and the inclusion of home visiting as one of the evidence-based models in the California Prevention Act, California's answer to the federal mandate under the Families First Prevention Services Act (FFPSA).

THE NEED

According to the Roadmap for Resilience, the best-supported interventions for improving child and family outcomes are high-quality, voluntary home visiting programs for new parents to ensure they have the community support and services they need during a significant time of transition. Even with the significant expansion in state and local funding, home visiting remains a challenge for some families.

30%
to
40%

of all births in OC are moderate to high risk when considering an array of social and economic factors

Source: 2021 Strong Start Index (based on 2019 data and available community data.)

Orange County's current home visiting system has the capacity
1 in 3 of those families with home visiting related services

Source: First 5 OC staff projection based on available data.

Home visiting provides pregnant women and families, particularly those considered at-risk, necessary resources and skills to raise children who are physically, socially, and emotionally healthy and ready to learn.

To reach more families with the services they need, home visiting programs must be coordinated and integrated into other child development and family support systems.

STRATEGIES AND SOLUTIONS

OC Home Visiting Provider

First 5 Orange County is working with partners to:



- Support shared messaging to increase recruitment and marketing activities to broaden awareness and access to home visiting
- Elevate the voice of families in communicating the value of home visiting
- Recruit, train, and retain a quality workforce
- Invest in workforce training and development to meet the diverse needs of Orange County families
- Promote coordination amongst home visiting providers to build a county-wide home visiting system that can match families to the program best suited to their needs and evaluate countywide impact

We need your support with the following:



- Renewal and continued funding of the CalWORKs Home Visiting Program
- Continued investment in home visiting across multiple state programs (e.g., California Home Visiting Program, CalWORKs, Mental Health Services Act, California Youth Behavioral Health Initiative, etc.)
- Expansion of eligibility criteria to reach families that cannot access services due to eligibility barriers (e.g., based on income, geography, age, and/or risk profile)



E. 17th Street, Suite 230, Santa Ana, CA 92705
Phone: (714) 834-5310
First5OC@cfcoc.ocgov.com

DATE: August 17, 2023**TO:** First 5 Orange County**FROM:** Kimberly Goll, President/CEO**ACTION:** Plan for Community Summit to Build Support for System Improvements through Countywide Collaboratives

SUMMARY:

This item requests the Technical Advisory Committee input on planning a community summit on systems improvement efforts.

DISCUSSION:

First 5 Orange County is planning for a community summit to highlight systems improvement efforts by us and collaborative partners in the three priority areas of Well-child Visits, Screenings, and Linkage to Services; Home Visiting; and Quality Infant and Toddler Child Care. As we have grown our knowledge and capacity in systems change work, we have identified three strategies key to advancing systems change which include:

1. Will Building
2. Practice Change
3. Policy Change

We believe the desired outcome for this summit is primarily will building, and the target audience is key leadership among the collaborative partners and other critical stakeholders that are not yet aware of or committed to these systems change efforts. Outreach for summit participants would be by the TAC and countywide collaborative participants to identify and invite two to three individuals in key leadership positions in their organizations.

The summit content would focus on the three priority areas described above, and we are seeking input from the TAC about the presentation of systems improvement work underway (e.g., a gallery walk? A panel of speakers? etc.); as well as the event timing and other logistics such as the pros and cons of including all three topics in one summit or having separate, single topic summits. In addition to showcasing the systems improvement work underway, we want to learn at the summit what additional support participants need to become stronger partners and champions.

STRATEGIC PLAN & FISCAL SUMMARY:

There are no funding actions proposed for this item.

RECOMMENDED ACTION:

Conduct planning for community summit.

ATTACHMENTS:

None

CONTACT: Lisa Burke