



# 2009-2012 Strategic Plan

## **Acknowledgements**

Many individuals and organizations contributed greatly to the development of the updated Strategic Plan for First 5 Santa Cruz County.

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## **I. Background on Proposition 10**

In November 1998, the voters of California passed Proposition 10 establishing The California Children and Families Act. The statewide ballot initiative added a 50-cents-per-pack tax on cigarettes and tobacco products. The revenue must be used to fund education, health and child care programs that promote early childhood development from the prenatal period to age five. Proposition 10 created independent commissions in each California county to distribute funding to local community programs. Proposition 10 is now expected to generate over \$500 million statewide annually, which is distributed to each county based on the number of live births.

### **State Commission**

The California Children and Families Commission is responsible for state-level administration including developing program guidelines, reviewing county plans, and conducting annual program review and evaluation. The nine-member commission also spends twenty percent of the available revenues annually on mass media communications, parent and provider education, child care, research and administration.

### **County Commissions**

Eighty percent of the available revenues are allocated annually to county commissions. Each commission is responsible for developing a strategic plan to guide the expenditure of local Proposition 10 funds. Local planning efforts must be consistent with state guidelines and programs must be reviewed and evaluated annually.

## II. First 5 Santa Cruz County Vision, Mission and Values

### First 5 Santa Cruz County Vision

All Santa Cruz County children enter school ready to achieve to their greatest potential.

### Mission

To help children succeed in school and in life, First 5 Santa Cruz County invests in health, early learning and family support to promote optimal development of Santa Cruz County children.

### Values & Overarching Principles

First 5 Santa Cruz County invests in children and families by building on a foundation that:

**CREATES STRATEGIC IMPACT** by funding programs and activities that support the goals in the strategic plan, show evidence of effectiveness, and need Proposition 10 funding in order to meet those goals.

**LEVERAGES RESOURCES** by matching Proposition 10 funds with federal, state or private funds in cooperation with community-based organizations and public agencies; and by funding programs and activities that broaden the number and range of funding sources for children prenatal to age five and their families.

**MOVES TOWARD SERVICE INTEGRATION** by funding programs and activities that reduce fragmentation of existing services, make services more accessible and comprehensive, and support shared decision-making and resource allocations among partners who rely on one another to succeed.

**BUILDS ON STRENGTHS AND BUILDS CAPACITY** by funding programs and activities that identify and enhance existing community strengths and that influence meaningful changes in children's policy for the future.

**PROMOTES INCLUSION** by funding programs and activities that are responsive to, and reflective of, the needs of our diverse community and have been shaped by community participation and collaborative efforts.

Specifically, First 5 Santa Cruz County implements the Principles on Equity. The Principles include themes that apply to programs in each focus area:

- The program needs a clear mission, goals, target population, and outcomes. These need to be in writing and understood by staff.

- Staff need strong training and supervision, including initial training, support for ongoing professional development, one-on-one supervision, and regular performance reviews.
- The program needs to be accessible and culturally competent, including actively reaching out to diverse populations and recruiting staff and Board that reflect the community, including immigrants, non-English speakers, and children with special needs. (First 5 Equity Principle: Access to Services)
- The program empowers parents to be their child's best advocate, including involving parents in programmatic or organizational decision-making. (First 5 Equity Principle: Inclusive Governance and Participation)
- The program needs to track its services and client outcomes and use this information to improve the quality of program services. (First 5 Equity Principle: Results-Based Accountability)
- The program needs to train staff to understand and embrace the letter and spirit of laws that provide for civil rights, language access, and access for persons with disabilities. (First 5 Equity Principle: Legislative and Regulatory Mandates)

### III. Executive Summary

First 5 Santa Cruz County has the great privilege and responsibility to act as the steward of Proposition 10 (“tobacco tax”) resources for young children from prenatal to age 5 in Santa Cruz County. Since its inception, the Commission has overseen the investment of over \$27 million to benefit Santa Cruz County’s young children. Moreover, in accordance with Proposition 10, the Commission has worked to establish a “legacy” through building a coordinated and integrated system of care and support for children 0-5 and their families.

The First 5 Santa Cruz County Strategic Plan for 2009-2012 builds on and continues the direction set through the planning work completed by the Commission in 2005. It is the result of a four month process, that included an update to the Long Term Financial Plan, a community meeting, a review of the Commission’s impact as reflected in community indicators, and deliberations through 4 meetings of the Commission.

In this strategic plan update the Commission has refined the strategic framework it developed in 2005. Specific Results from this framework have been chosen to receive Commission investment between 2009 and 2012. These investments will occur through three funding approaches, Community Grants, Commission Initiatives, Leadership Projects, and will be supported by investments in Service System Support and Integration Projects. For each of the chosen Results, the Commission has defined its strategic approach and established an allocation of funding for the next 3 years.

The highlighted Results and funding levels for 2009 – 2012 are:

#### Healthy Children

- Increase insurance coverage
- Increase medical/dental homes
- Increase use of preventive health services

*Investment: \$2,700,000 over 3 years for Healthy Kids Initiative*

- Decrease childhood obesity

*Investment: \$517,500 over 3 years. Specific strategies to be defined through a community planning process in 2009*

- Increase the number of children reaching developmental milestones

*Investment: \$426,000 over 3 years for Community Grants & Leadership Projects*

#### Children Learning and Ready for School

- Increase parental involvement in children’s learning and development
- Increase participation in quality structured activities
- Increase use of quality child care practices

- Improve early literacy skills
- Increase use of Kindergarten transition practices

*Investment: \$3,315,000 over three years for School Readiness Initiative*

- Improve early literacy skills

*Investment: \$1,151,000 over three years for a Professional Development Initiative*

### Strong Families

- Decrease child abuse and neglect

*Investment: \$1,565,800 over three years for Differential Response Initiative*

- Improve parent and caregiver practices that support social and emotional development

*Investment: \$1,017,800 over three years for Community Grants & Leadership Projects*

The Strategic Plan is a “road map” to guide the Commission in aligning funding with specific priorities among the many areas of need for young children’s health, development, care and well-being. The Strategic Plan does not specify particular programs or partners that will receive funding. The Commission’s evaluation plan will be updated to align directly with this Strategic Plan through the definition of specific indicators to measure its impact on each of the chosen Results.

## **IV. Commission History and Impact**

First 5 Santa Cruz County (then known as the Santa Cruz County Children and Families Commission) was created by the Board of Supervisors in 1998 to locally distribute funds generated through a statewide tobacco tax established by the voter initiative referred to as "Prop 10." In its initial 6 years, the Commission gathered community input, developed, implemented and updated its Strategic Plan, built an organizational infrastructure, and made targeted investments in services and other activities designed to support the health, growth and development, safety and well-being of young children and their families

In 2005, First 5 Santa Cruz County engaged in an integrated planning effort, addressing both financial and strategic planning. The planning decisions before the Commission and community included how to: make a substantive positive difference for children 0-5, given the depth and breadth of need for young children's services; create a lasting impact and systemic change in services for families; help partners find ways to sustain effective programs and services; and manage a declining funding source.

The adoption of the Commission's Long Term Financial Plan (LTFP) in April, 2005, was an important first step in establishing the Commission's commitment to future investment in Santa Cruz County. The plan established the level of program investment that the Commission will make each year for 10 years. The plan also defined the Commission's funding framework to include Community Grants, Large Commission Initiatives and Service Support and Integration Projects and reaffirmed the Commission's commitment to investing roughly equal amounts in each of its three Focus Areas - Healthy Children, Children Learning and Ready for School and Strong Families.

In 2008, as it prepared to update this Strategic Plan, the Commission also updated its financial plan. The strategic decisions incorporated into this document reflect the Commission's intention to continue on the path it set in 2005: to make targeted investments in evidence-based programs that will have an impact on specific community Results.

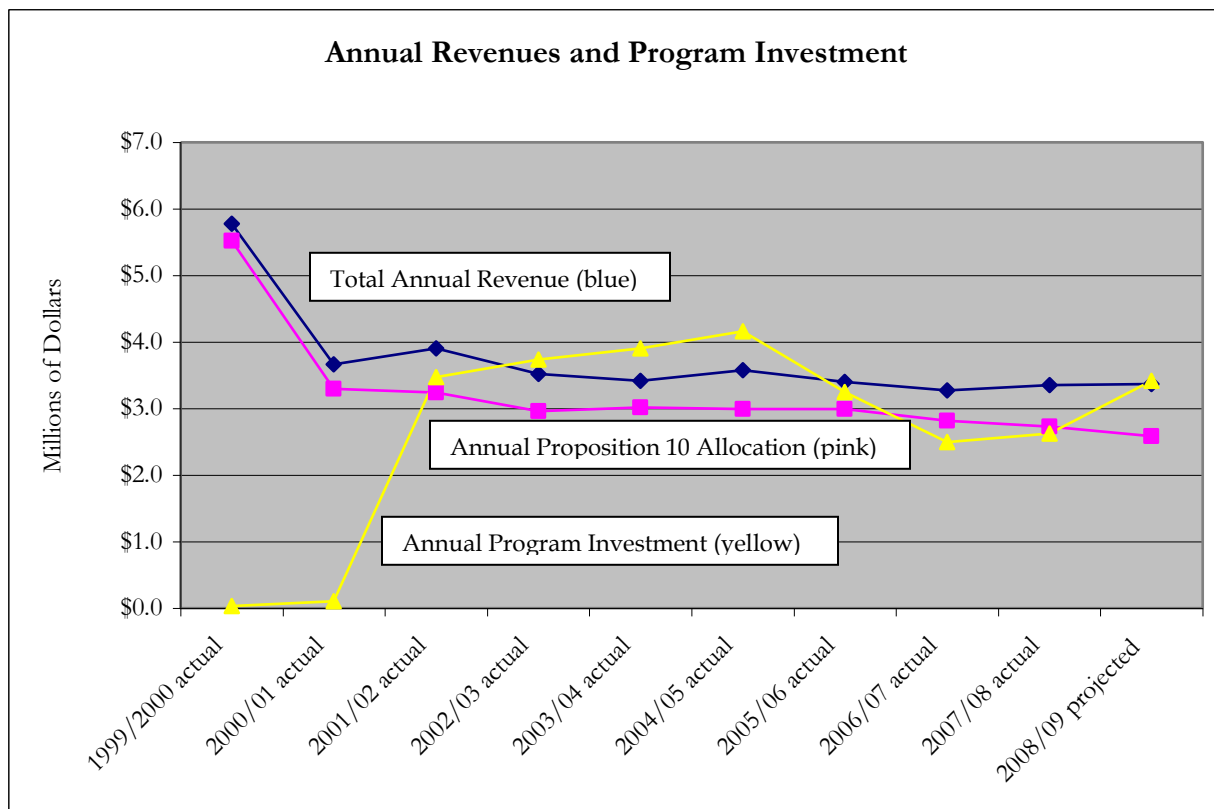
### **Annual Revenue**

The majority of Commission revenue is from the Proposition 10 allocation. The Commission's Prop 10 allocation was \$5.5 million in 1999-2000, dropped to \$3.3 million in 2000-2001 and has decreased to a projected \$2.5 million in 2008-09. The Commission is projected to have received a total of \$32.2 million in Prop 10 allocation by the end of 2008-2009. Based on First 5 California projections through 2009-2010, Prop 10 allocations to First 5 Santa Cruz County can be expected to continue decreasing at a rate of about 3.8 percent each year. Between its inception and the current fiscal year, the Commission

has received an additional \$5.1 million in revenue from other sources such as state program matching funds and external funders.

**Annual Program Investment**

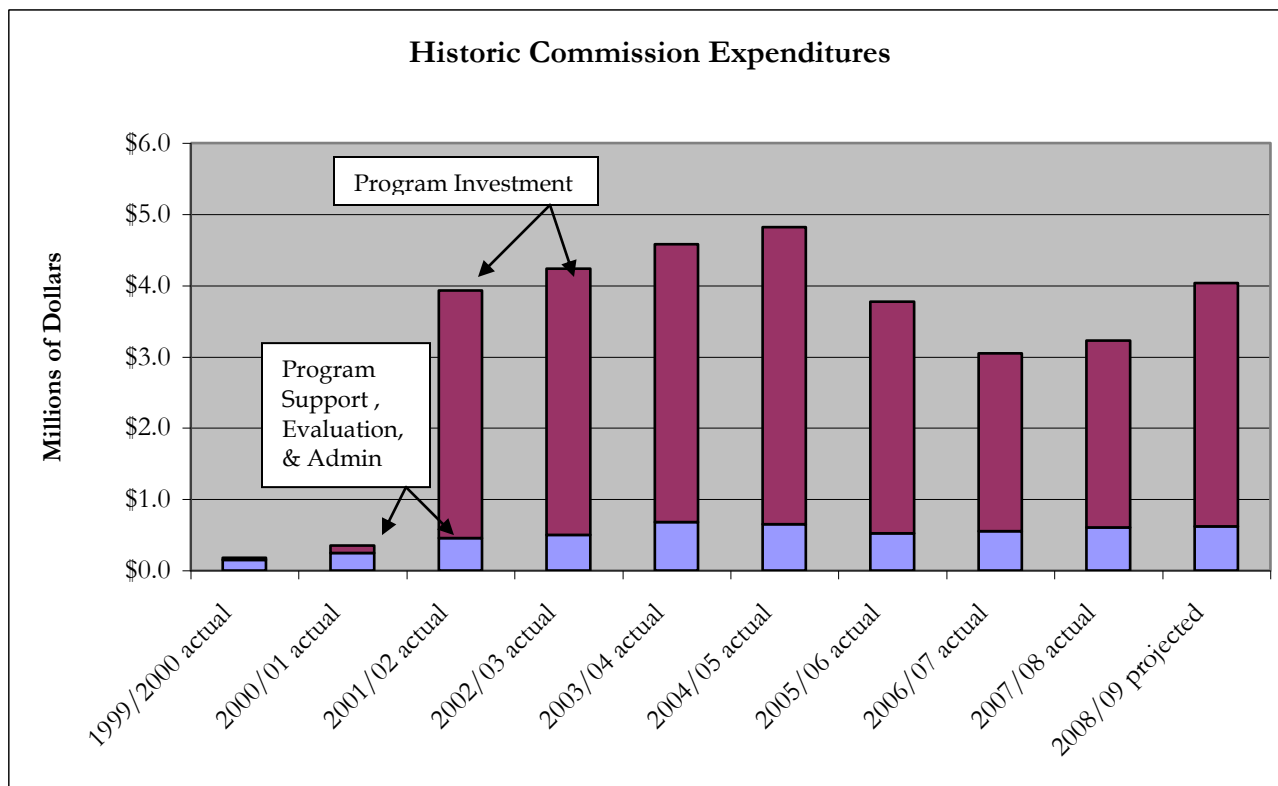
First 5 Santa Cruz County program investment rose each year through 2004-2005, when it peaked at \$4.2 million. In its 2005 Long Term Financial Plan (LTFP), the Commission committed to a transition year with total program investment for 2005-2006 of \$3.6 million (a decline of about \$500,000). Beginning in 2006/07, the Commission committed to consistent levels of real dollar new Program Investment for each of the subsequent 9 years. This new Program Investment was in addition to commitments that the Commission had already made at that point. Because of the timing of grant awards and the Commission’s decisions to draw in significant state program matching funds, the actual levels of Program Investment have varied somewhat from those in the 2005 LTFP. Total Program Investment between 2005-2006 and 2008-09 is projected to be \$300,000 more than was anticipated in the LTFP (\$11.8 million vs. \$11.5 million).



**Annual Expenditures on Program Investment and Program Support/Administration**

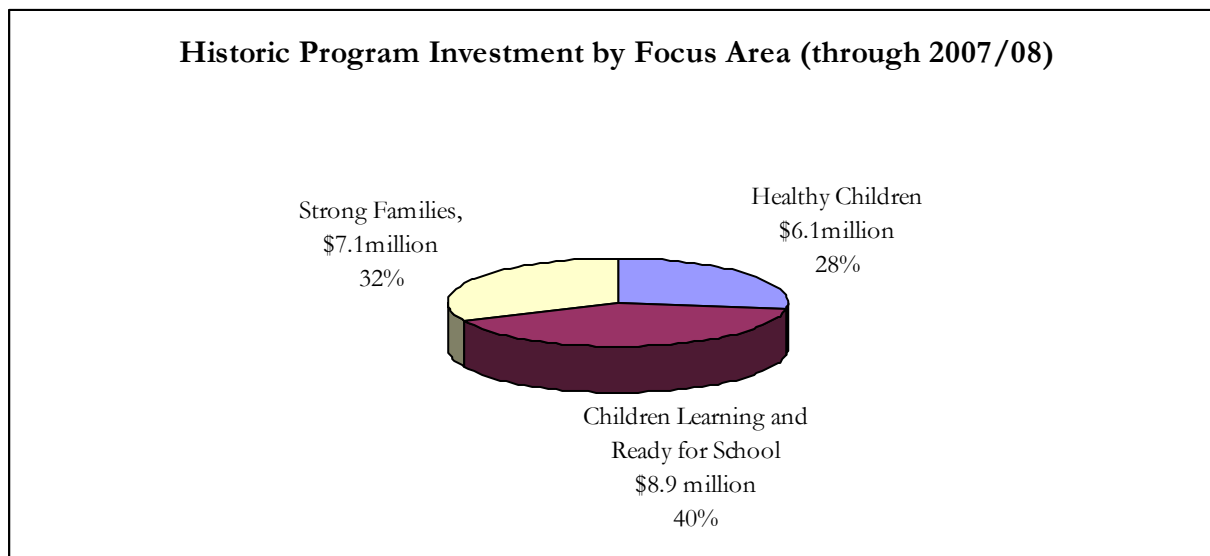
First 5 Santa Cruz County program support and administration expenditures began in 1999-2000, as the Commission was established and began to work with the community

to identify the needs and opportunities for children 0-5. The first significant program investment occurred in 2001-2002. Along with this jump in program investment, came an increase in expenditures for program support and administration. Program support and administration expenditures, including evaluation costs, have remained well below 20 percent of total Commission expenditures since the Commission began making significant Program Investments in 2001-2002. Total Program Investment from 1999-2000 through 2008-2009 is projected to be \$27.2 million.



**Program Investment by Focus Area**

Commission investments by Focus Area through 2007-2008 include expenditures of \$6.1 million for Healthy Children, \$8.9 million for Children Learning and Ready for School and \$7.1 million for Strong Families, resulting in a total of \$22.1 million invested across the three Focus Areas. An additional \$535,300 was spent through mini-grants before 2005 and \$1.5 million has been invested in System Integration efforts through 2007/08.



The Commission has committed to additional investments of \$5.5 million between 2008-2009 and 2013-2014 to support Healthy Children (through Healthy Kids), \$4.8 million between 2008-2009 and 2011-2012 to support Children Learning and Ready for School (through the School Readiness Initiative), and \$737,000 to support Strong Families in 2008-09. The following table summarizes funding by Focus Area, incorporating these commitments. Through the 2008 planning process, the Commission reiterated its intent to balance investments across all three of the Focus Areas.

Focus Area	Program Investment Through 2007 - 2008	Committed Investment 2008 - 2015	Total Historic and Committed Investment
Healthy Children	\$6.1 million	\$5.5 million	\$11.6 million
Children Learning and Ready for School	\$8.9 million	\$4.8 million	\$13.7 million
Strong Families	\$7.1 million	\$.7 million	\$7.8 million

### **Impact in the Community**

Applied Survey Research (ASR) has evaluated the impact of most of the investments funded by First 5 Santa Cruz County. Detailed information on evaluation findings can be found in summary evaluation reports that can be obtained by contacting the First 5 Santa Cruz County office. The evaluation has concentrated on identifying the number of unduplicated individuals served by First 5 programs and assessing the impact of funded programs. At this time, seven years of evaluation have been completed and a summary of findings from the 2006-2009 Strategic Plan investments is provided below. Additionally, several programs funded by First 5 were outside of the scope of ASR evaluation. For example, the first years of the CARES program, the Parent Information

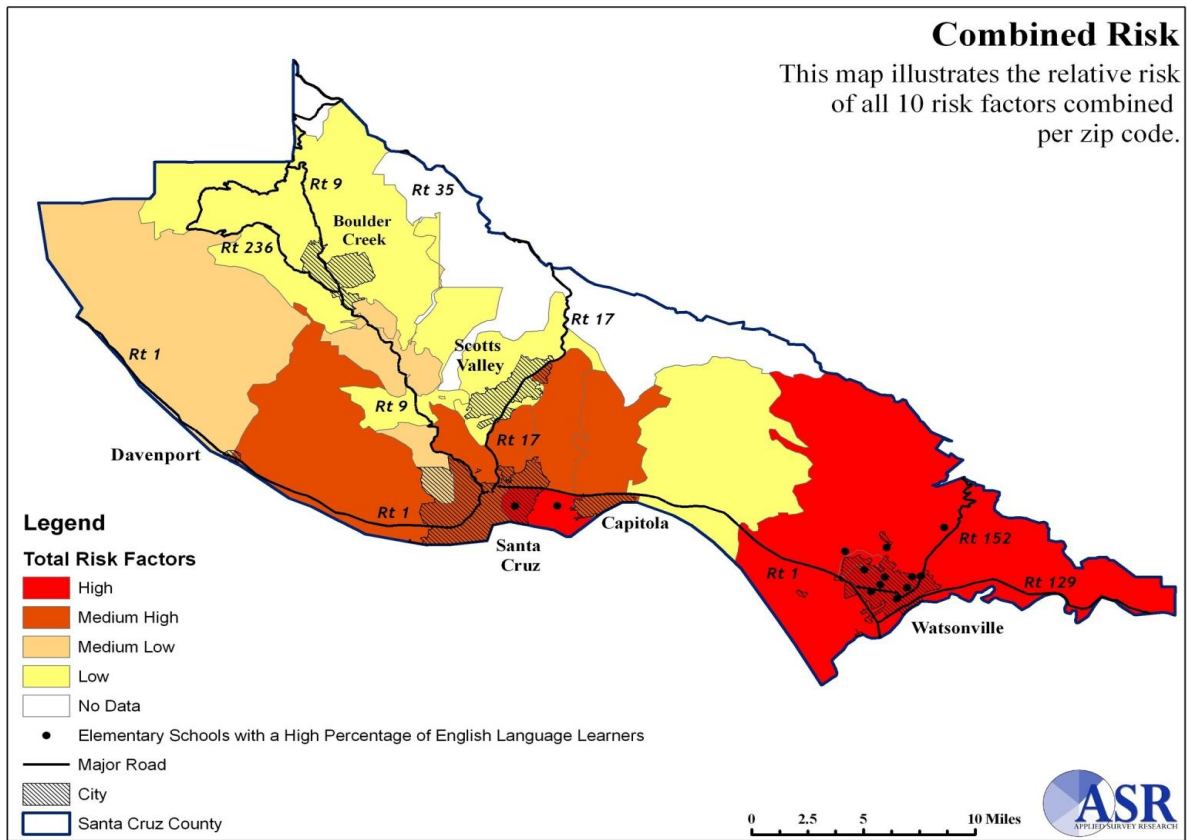
and Referral Warmline, Service Integration effort and Mini-grants are not included in the data below except where specifically noted.

### ***Recipients of Services***

Over seven years of funding (July 1, 2001 to June 30, 2008) there were 37,584 participants served by First 5 funded programs. Approximately 23,000 unique children ages 0 to 5 were served. In addition, over 12,000 unique parents and almost 2,000 early care and education professionals were served by First 5 partners in this period. Throughout First 5's history approximately three-quarters of all participants served were Latino and over two-thirds have reported that their primary language was Spanish. Over two-thirds of all participants resided in the South County area and three-quarters live below the federal poverty line.

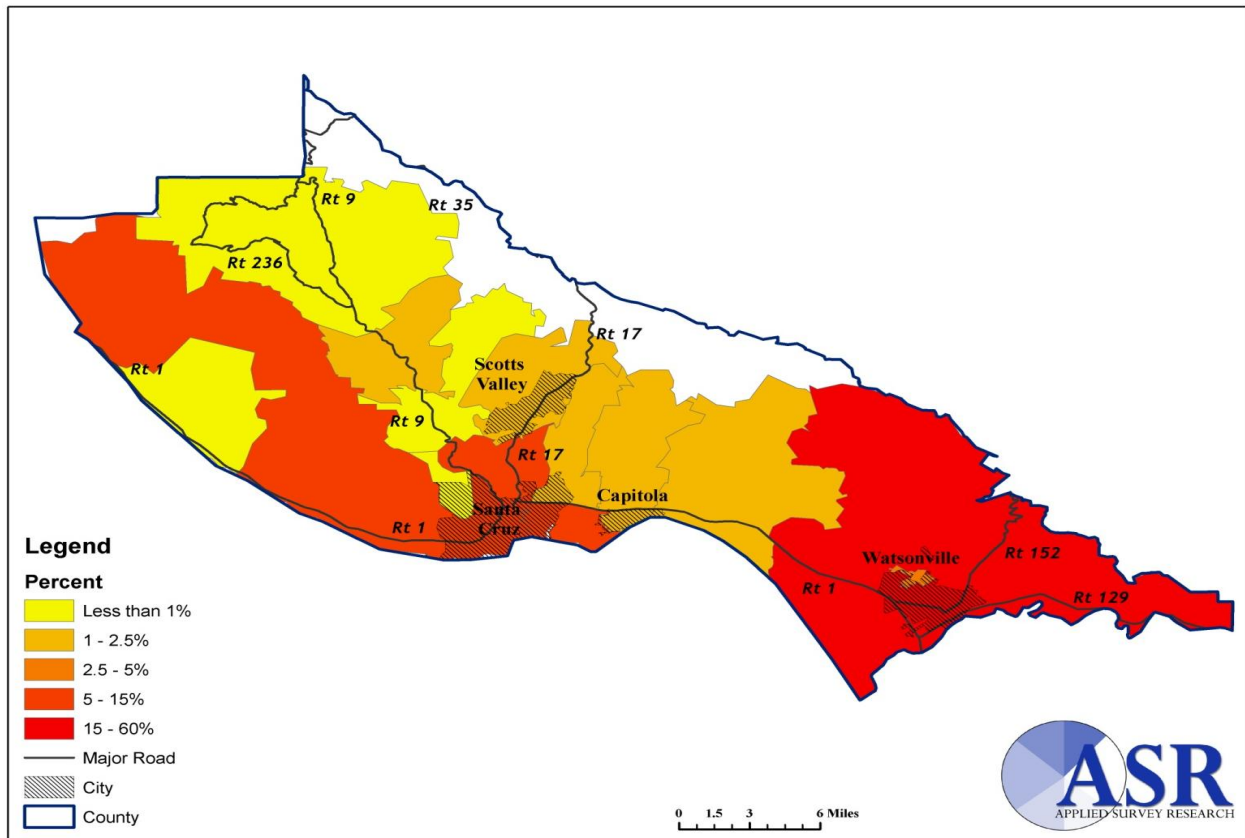
In the development of the 2006-2009 Strategic Plan, Applied Survey Research prepared a series of Geographical Information Systems (GIS) maps to support decision making regarding target populations and allocation of investments. Using the maps, the Commission directed grant making toward parts of the county where young children and their parents/guardians are most vulnerable to challenges in the areas of positive parenting techniques, child maltreatment and/or low literacy, with a specific focus on areas in the county with multiple risk factors.

### Levels of Children’s Vulnerability in Santa Cruz County, by ZIP code



Source: Applied Survey Research, *Geo-Mapping Children’s Vulnerability in Santa Cruz County*, Presentation to First 5 Santa Cruz County, 2005.

### Distribution of Santa Cruz County Children Ages 0-5 Served by Programs Funded by First 5, by ZIP Code (2007-08\*)



Source: SUN database/CCD data for July 1, 2007 – June 30, 2008.

Note: First 5 programs served 5,214 children. The charts above display data for the 4,308 children with known ZIP codes. Seven children with Post Office Box ZIP codes within the city of Santa Cruz were omitted, as the child's area of residence within Santa Cruz could not be determined. Two children with a Watsonville Post Office Box ZIP code (95077) were assigned to Watsonville's ZIP code (95076). 899 children had unknown ZIP codes.

\* These results do not change appreciably each year, and are, therefore, a good representation of the distribution of children served 2006-2008.

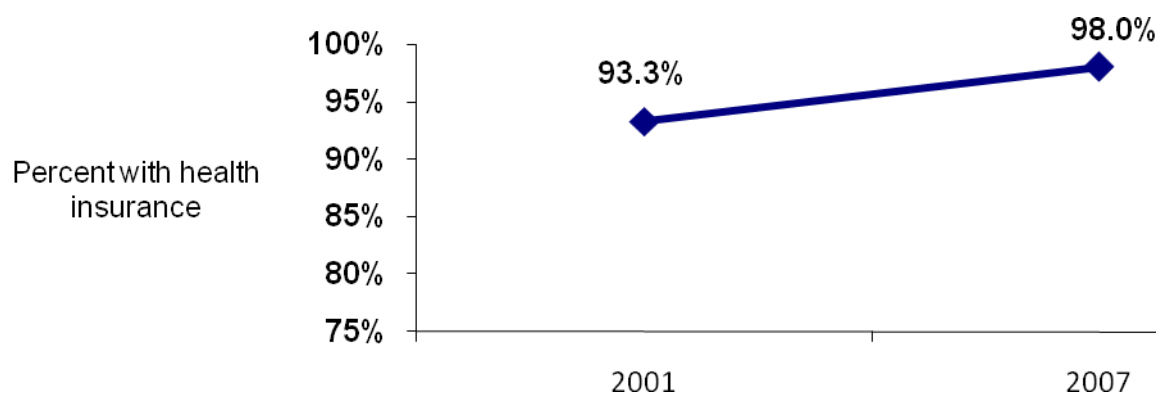
### *Results of the 2006-2009 Strategic Plan*

In December 2005, the First 5 Commission of Santa Cruz County adopted a new Strategic Plan for 2006-2009 with funding to achieve targeted outcomes beginning July 1, 2006. The following evaluation findings represent highlights of the results achieved by First 5 and its partners in improving the well-being of children and families living in Santa Cruz County.

## Healthy Children

*Santa Cruz County is the county with the second highest percentage of children with health insurance in California*

In 2007, data from the *Children Now* report showed that 98% of the 57,206 children ages 0-17 in Santa Cruz County had health insurance. This represents an increase since 2001, when CHIS data showed that 93% of children these ages had health insurance. Additionally, children enrolled in Healthy Kids Santa Cruz County met or exceeded national benchmarks for utilizing preventative care as measured by access to a primary care physician, dental visits and well child exams



Source: California Health Interview Survey, 2001. Estimated N=57,000. Children NOW, 2007 California County Data Book, 2007. N=57,206.

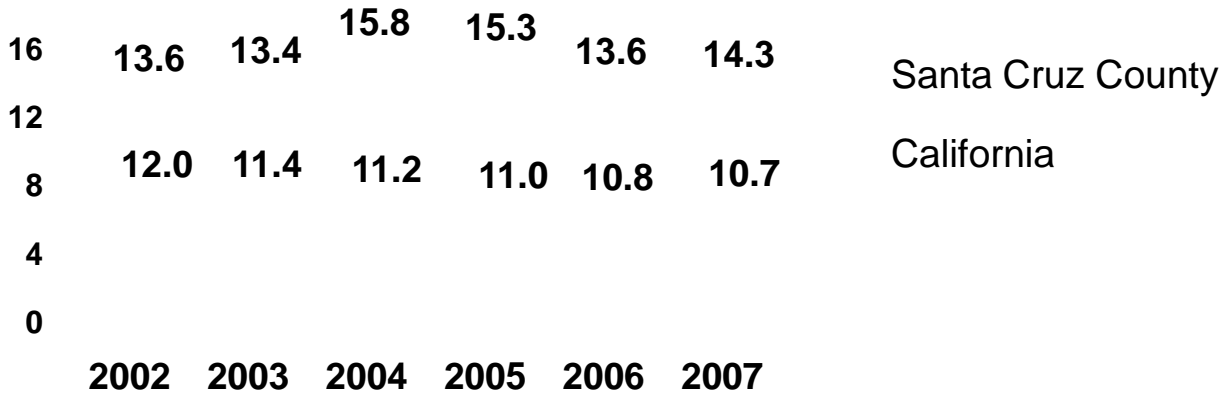
## Strong Families

*The rates of substantiated cases of child abuse are higher in Santa Cruz County than in California as a whole*

In 2007, the rate per 1,000 of substantiated cases of child abuse (children ages 0-17) in Santa Cruz County was 14 per 1,000, compared to 11 per 1,000 in California. Santa Cruz County has consistently had a higher rate than California since at least 2002.

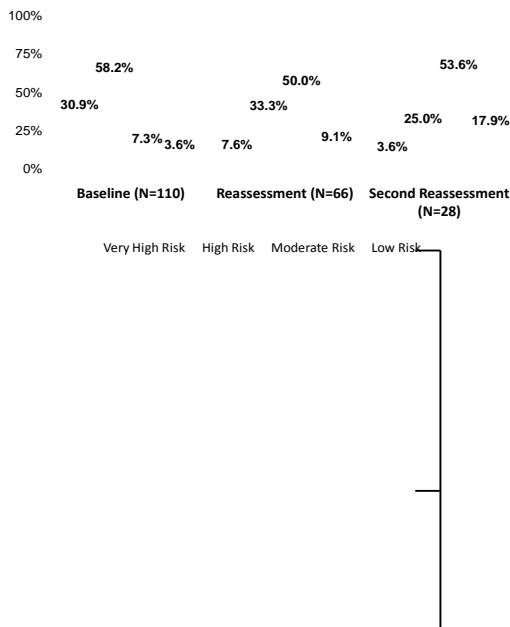
To decrease child maltreatment in Santa Cruz County, the Commission helped create and implement Families Together, a program providing an alternative way for Santa Cruz County to respond to reports of abuse and neglect received by Family and Children's Services (FCS). By assisting high risk families, Families Together intervenes early, before family difficulties escalate to the point of maltreatment, increasing child safety and successfully engaging families in decision-making. Families participating in the program are showing reductions in risk and subsequent safety for their children.

**Rates per 1,000 of Substantiated Cases of Child Abuse (Children ages 0-17)**



Source: University of California at Berkeley, Center for Social Services Research, 2008.

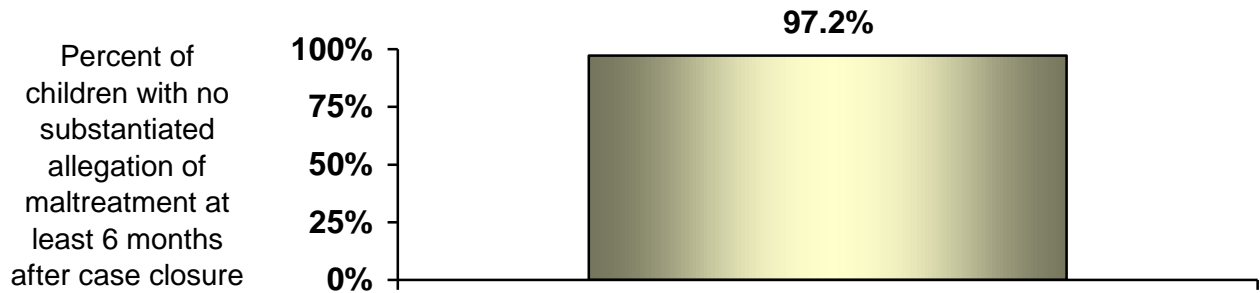
After participating in Families Together, parents' scores on a risk assessment indicate a decreasing level of risk



Source: SUN database, *Structured Decision Making: Family Prevention Services Screening Tool (SDM:FPSST)* data, 2008.

Note: Results are for parents receiving intensive services. Clients' length of time in the program and the number of SDM-FPSST assessments received varies.

After participating in Families Together, child abuse is less likely to occur



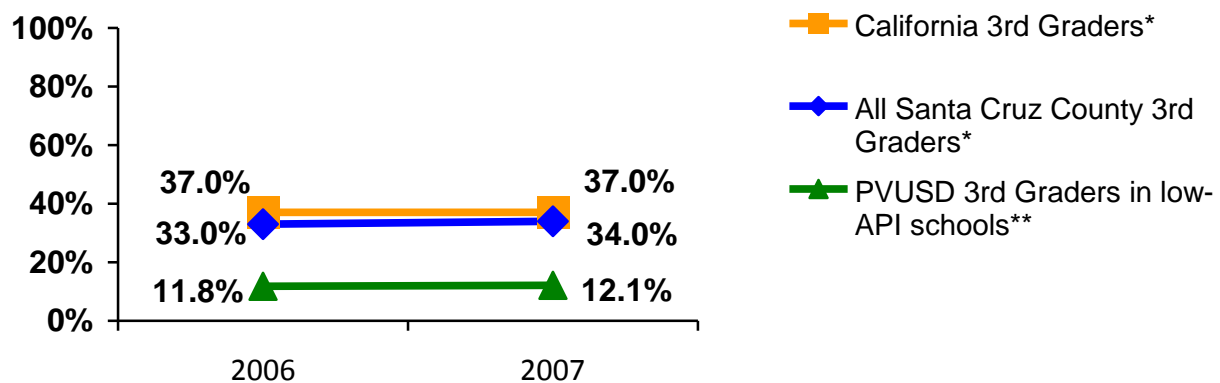
Source: County of Santa Cruz Human Resources Agency, 2008. N=144 children ages 0-17 in families that participated in Families Together that have had their cases closed for at least six months.

### Children Learning and Ready for School

*In Santa Cruz County, 3<sup>rd</sup> Grade students are not demonstrating adequate reading skills.*

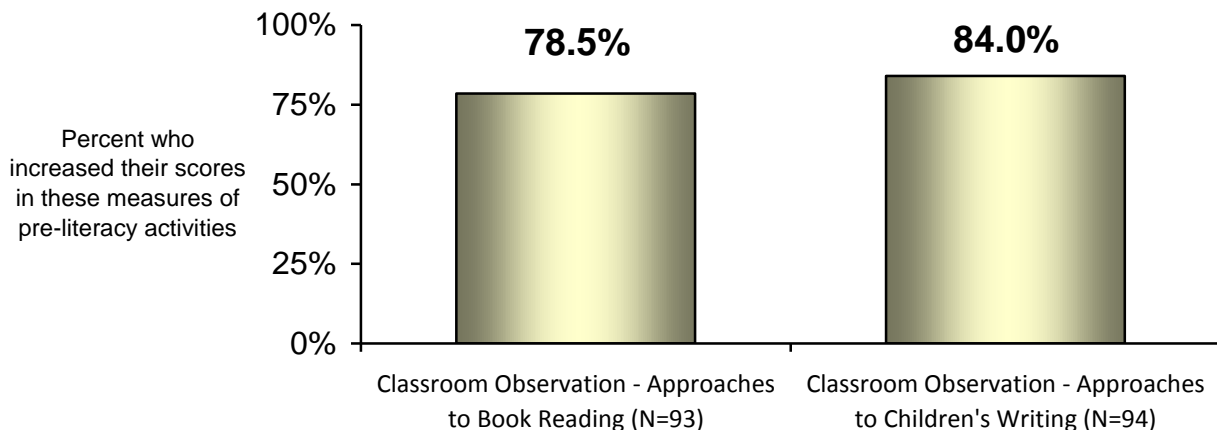
To increase later reading success, First 5 launched the Early Literacy Foundations Initiative. The program has certified coaches and trained family child care providers and teachers from the 60 state and federally subsidized programs in the county in the promotion of early literacy skills. Teachers/providers in these classes completed two assessments to determine the percentage who increased their knowledge of pre-K literacy activities.

Few 3<sup>rd</sup> Graders are scoring “proficient or above” in English Language Arts



Source: \*California Department of Education, *STAR District/School Summary Report*, 2006, 2007. \*\*California Department of Education, *Adequate Yearly Progress Report*, 2006, 2007.  
Low API = Schools with 2006 API State Ranks of 3 or below.

Teachers/providers in Cabrillo’s SEEDS of Early Literacy for Preschoolers classes are increasing their Pre-K literacy activities (2007-08)



Source: First 5 Santa Cruz County, *Early Language and Literacy Classroom Observation (ELLCO) tool*, 2008.

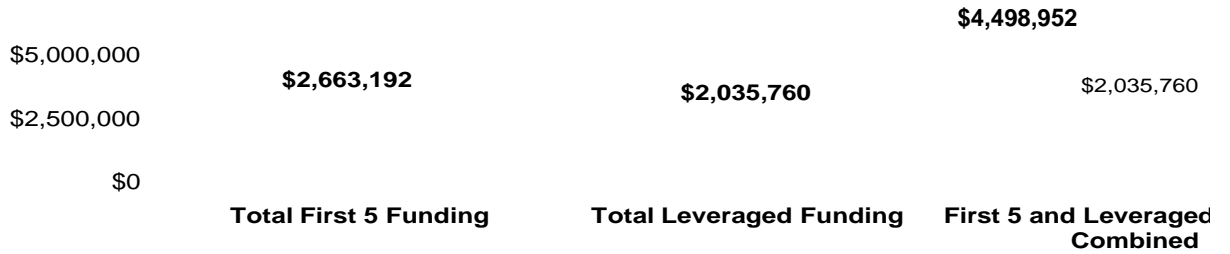
### Systems Change and Sustainability

Programs funded by First 5 are leveraging funding from additional sources.

SOURCE OF LEVERAGED FUNDING	LEVERAGED FUNDING AMOUNT
Medi-Cal Administrative Activities (MAA)	\$310,336
Early Periodic Screening Detection and Treatment (EPSDT)	\$154,000
Public agency - Federal	\$18,893
Public agency - State	\$242,165
Public agency - Local	\$770,190
Educational Institution	\$10,000
Private Foundation	\$472,117
Business or Individual	\$50,440
Other	\$7,619
<b>Total</b>	<b>\$2,035,760</b>

Source: First 5 Santa Cruz County and First 5 partner quarterly narratives, 2008.

The amount of additional funding leveraged from other sources is just over three-fourths the total amount of First 5 funding.



Source: First 5 Santa Cruz County, 2008.

## V. Commission Planning Tools and Process

As stewards of public funding, planning for the best use of Proposition 10 funds in Santa Cruz County is a key responsibility of the Commission. First 5 Santa Cruz County is using the results of its inclusive and deliberative planning processes to deploy its funding in support of meaningful change for children 0-5. The Commission uses five inter-related planning tools to support its investment of Proposition 10 resources. These tools and their relationship to one another are summarized in Appendix A. They include:

- Long Term Financial Plan
- Strategic Plan
- 3-Year Program Investment Plan
- Evaluation Framework
- Annual Budget

The Commission launched a comprehensive planning process in early 2005, beginning with the development of a Long Term Financial Plan (LTFP). The LTFP defines the level of program investment that the Commission plans to make each year through 2014/15. In addition, the LTFP articulates the Commission's intention to spread its program investment across its three Focus Areas (Healthy Children, Children Learning and Ready for School, and Strong Families) within a defined investment framework. As the foundation for this 2008 Strategic Plan Update, the Commission reviewed and updated its LTFP in the fall of 2008. These updates are described below.

Upon completion of its LTFP in April 2005, the Commission began working to update its Strategic Plan by defining a Strategic Framework and foci for program investment within that Framework, articulating specific program investment strategies and determining the related funding allocations. This 2008 Strategic Plan Update builds on the planning work completed in 2005. The Commission has updated the Strategic Framework to reflect current community needs. The Commission has also identified the Results in which it will invest over the next three years, defined target populations for each highlighted Result, and allocated funding to Commission Initiatives, Community Grants, and Leadership Projects to achieve the Results. These strategic choices are reflected in Sections VII and VIII of this plan.

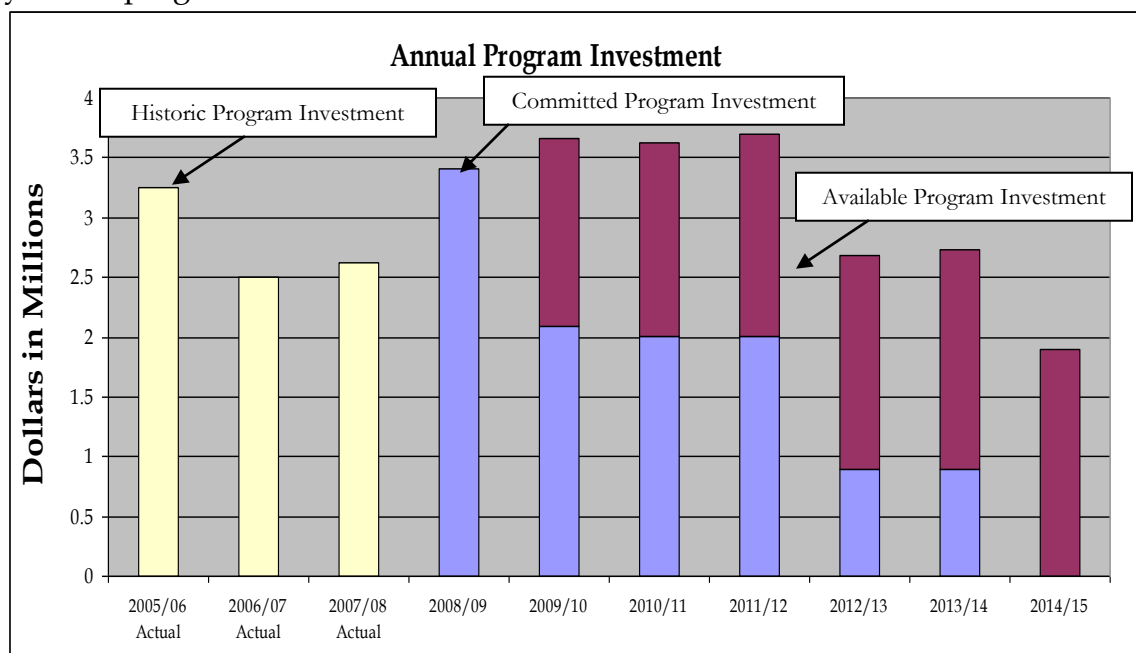
### **2008 Updates to the Long Term Financial Plan**

At its October 2008 planning retreat the Commission considered three questions to update its Long Term Financial Plan.

1. What level of annual program investment will F5SCC make over the next 6 years?
2. How will F5SCC allocate investment dollars to support change across its three Focus Areas?
3. What approaches will F5SCC use to make community investments?

**What level of annual program investment will F5SCC make over the next 6 years?**

The Commission reviewed revenue and program investment information for the first 4 years of its 10-year LTFP. The Commission has received more revenue than was projected when the plan was first developed, and as a result the Commission has a higher level of carry-over funds than was anticipated. Updated projections of available funds and revenues show that the Commission is anticipated to have a total of \$10.4 million in available (uncommitted) funds over the remaining 6 years of the LTFP. The Commission decided to adjust its planned Program Investment to include investment of all of the available dollars (carry-over and new revenues) over the next 6 years. The Commission re-affirmed its commitment to constant real-dollar (adjusted for inflation) levels of investment for currently uncommitted funds. The updated plan for the next 6 years of program investment is shown below.



**How will F5SCC allocate investment dollars to support change across its three Focus Areas?**

The Commission affirmed its intention to invest similar amounts in each of its Focus Areas over the 16 years from 1999/2000 through 2014/15. The Commission’s ability to accomplish this is affected by historic and currently committed investments. The availability of state matching funds to support significant investment in the School Readiness Initiative weights the Commission’s historic and committed investments toward Children Learning and Ready for School. The following table shows the way historic, committed and planned investments for 2009/10 – 2011/12 are allocated across the Focus Areas. The Long Term Financial Plan as updated at the October retreat projects total Program Investment of \$11.0 million for 2009/10 – 2011/12 and \$7.3 million for 2012/13 – 2014/15, including \$1.8 million committed to the Healthy Kids Initiative.

**Historic and Planned Investment Across Focus Areas**

Focus Area	Investment Through 2007/08	Committed Investment 2008/09 - 2014/15	Total Historic and Committed Investment	Planned Additional Investment 2009/10 - 2011/12	Total Historic, Committed, & Planned Investment	Projected Program Investment 2012/13 - 2014/15
Healthy Children	\$6.1 million	\$5.5 million	\$11.6 million	\$.9 million	\$12.6 million	\$1.8 mil committed (Healthy Children)  <b>\$5.5 mil available</b>  (\$7.3 million total)
Children Learning and Ready for School	\$8.9 million	\$4.8 million	\$13.7 million	\$1.2 million	\$14.9 million	
Strong Families	\$7.1 million	\$.7 million	\$7.8 million	\$2.6 million	\$10.4 million	
<b>TOTAL</b>	<b>\$22.1</b>	<b>\$11.0</b>	<b>\$33.1</b>	<b>\$4.7</b>	<b>\$37.9</b>	

***What approaches will F5SCC use to make community investments?***

Through its 2005 Long Term Financial Planning, the Commission defined three approaches to investment: Large Commission Initiatives, Community Grants, and Service System Support and Integration Projects. In 2008, the Commission updated its Investment Framework to include Leadership Projects to accurately reflect the full scope of Commission investments in the community. Each category of investment is defined in the table below.

Investment Approach	Definition
<b>Large Commission Initiatives</b>	<ul style="list-style-type: none"> <li>• Support at least one of the Commission’s highlighted Results through a long-term commitment of funds (3+ years)</li> <li>• Evidence-based, integrated approach to achieving desired Result(s) in the community</li> <li>• Focused to create “narrow and deep” impact for specific at-risk populations</li> </ul>
<b>Community Grants</b>	<ul style="list-style-type: none"> <li>• Support at least one of the Commission’s highlighted Results through 1-3 year funding commitments to address short-term opportunities for impact</li> <li>• May include a spectrum of coordinated large grants and mini-grants, contracted with community agencies</li> <li>• Tend not to be targeted by specific risk factors</li> </ul>
<b>Service System Support and Integration Projects</b>	<ul style="list-style-type: none"> <li>• Enable the Commission to leverage external funding in support of Commission values and guiding principles AND/OR</li> <li>• Strengthen service delivery system for children and families</li> <li>• May be used to address service system needs of specific at-risk populations</li> </ul>
<b>Leadership Projects</b>	<ul style="list-style-type: none"> <li>• Communicate the importance of the first 5 years</li> <li>• Convene stakeholders to implement new, evidenced based programs to address community needs</li> <li>• Support policy changes locally, statewide and nationally to improve the lives of children</li> </ul>

**The Role and Impact of Strategic Planning for First 5 Santa Cruz County**

The First 5 Santa Cruz County 2008 Strategic Plan Update is a living document, reflecting the Commission’s strategic intent and providing guidance both to the Commission and to the community. To be a living document, the Plan must be a daily part of the business of the Commission. The Plan has as its foundation the Commission’s LTFP, provides rationale and clarity to support the specific funding decisions that the Commission will make in 2009 - 2012, and serves as the starting point for evaluation design to define and measure the Commission’s impact in Santa Cruz County.

## **VI. Assessment: The Status of Children and Efforts to Serve Them**

During the Commission's initial planning process in 2000, significant effort was devoted to understanding the needs of and opportunities for children 0-5 and their families. The activities included gathering input from community residents and reviewing significant data on demographics, economic status, and well-being of Santa Cruz County's children and families. During the 2005 Strategic Planning process, the Commission deepened its understanding of community needs through review of primary and secondary data and extensive community input.

In 2008 the Commission planning process was informed by (1) its 2006 – 2008 evaluation results (summarized in Section IV above), (2) community input through a community forum (data gathered through the community forum are available in Appendix XX), (3) secondary data on the status of children in the Santa Cruz County, and (4) a brief summary of the significant planning efforts underway in the County.

### ***Secondary Data***

At its October, 2008 meeting, the Commission reviewed newly released data from the Children Now data book. With 57,206 children, ages 0-17, Santa Cruz County is home to less than 1% of California's child population. Compared to other counties in the state, Santa Cruz ranks as follows:

- 2<sup>nd</sup> out of 58 in the percentage of children with health insurance.
- 9<sup>th</sup> out of 58 in the percentage of children, ages 3 and 4, enrolled in preschool.
- 33<sup>rd</sup> out of 58 in the percentage of elementary school students meeting state targets in English Language Arts.
- 12<sup>th</sup> out of 58 in the percentage of children in low-income households.

### Relative Status of Santa Cruz County Children - Indicators of Health and Well-Being

(Source: Children Now *California County Data Book 2007*)<sup>1</sup>

Measure	Santa Cruz County	California	Healthy People 2010 Objective
Percent of Mothers receiving early Prenatal Care (2001-2003 average)	90%	83%	90%
Low Birth-Weight Infants (2001-2003 average)	6%	7%	5.0%
Children With Health Insurance (ages 0-17)	98%	93%	0.0%
Children With Dental Insurance (ages 2-11)	73%	79%	NA
Children Diagnosed With Asthma (ages 0-17) (2003)	12%	16%	NA
Teen Births (per 1,000 females 15-19 years old) (2003)	31	37	43
Substantiated Reports of Child Abuse (ages 0-17; rate per 1,000 children)*	14	11	10.3
Children Living in Poverty	15%	19.2%	NA
English Language Learner Students (K-12) (2004)	28%	25%	NA
Overweight Children	31%	33%	NA
Estimated Percentage of Children (3 and 4 years) Enrolled in Preschool	52%	42%	NA

#### ***Countywide Planning Efforts***

Several planning efforts to address mental health and child maltreatment provide an important context for the Commission's work to improve the lives of the County's youngest residents. Three of these efforts are particularly relevant to the current Strategic Plan.

*The Mental Health Services Act* has two components of special interest to the First 5 Commission.

1. The Workforce, Education and Training plan makes clear the lack of capacity in local mental health services to serve young children with evidenced-based interventions to promote early childhood mental health. First 5 Santa Cruz County, the Human Services Department and Cabrillo College's Human Service Department are working together to create coursework which addresses the need for in-service training for professionals working with traumatized children.
  
2. The Prevention and Early Intervention (PEI) planning process has acknowledged that children 0-5 are not accessing early childhood mental health supports.

<sup>1</sup> [cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

Planning is underway to support parents and caregivers to meet the needs of children in stressed families and/or children who have experienced trauma. The PEI budget across the lifespan is \$1.4 million with approximately \$800,000 allocated for the birth to 25 year old age group.

*The Child Welfare System Improvement Plan (SIP)* addresses the local need to improve several results that overlap with the Commission's work. Of the seventy approved strategies in the SIP, the following most closely tie to First 5 Santa Cruz County's work:

- Secure funding to expand Families Together (FT) to serve more families referred to CWS but that do not have open cases.
- Conduct a quality review of parent education services contracted by FCS and the parent education services families are referred to regularly. Specify the use of evidence informed models in CWS parent education contracts and create a protocol for referrals.
- Identify supervised visitation best practices and implement strategies for quality improvement in order to ensure visits are purposeful.
- Implement on-going training and supports to assist caregivers with concurrent planning.
- Pilot test FCS Social Workers performing developmental screenings for children (0-3) in CWS. Use results of screening to determine the number of children needing further assessment and treatment.
- Develop the program and funding plan for social-emotional and developmental assessment and treatment for young children (0-3). (If funded - contract for services).
- Educate providers and FCS social workers on screening and community services for post-partum depression.

## VII. Strategic Framework

The Commission's Strategic Framework communicates its Focus Areas, Community Goals and desired Results for the next three years. The 2008 Strategic Framework incorporates modifications to the 2005 Strategic Framework based on the Commission's understanding of current community needs and assets.

### **What is a Strategic Framework?**

This planning tool is an integrated, four-level flow diagram that moves from broad and general statements of Commission Focus Areas, to specific and measurable Indicators of success. Each level of the framework is linked to the other levels, and the relationships among these levels are clearly defined. Through this framework the Commission communicates its priorities and defines the change it hopes to achieve for children and families through its investments. Using a concise visual format, the framework makes clear the choices regarding the use of Commission resources and serves as a key point of interface with the evaluation.

Each of the four levels in the framework is defined below. The levels of the framework are connected logically. Each Focus Area has one or more Community Goal; each Community Goal is connected to one or more Result; and each Result can be measured using one or more Indicator. **The Strategic Framework expresses what is most important to the Commission and is not intended to describe all the possible improvements for families in the county.**

### ***Focus Areas – What are the most important areas for the Commission to address?***

The highest level of the strategic framework is the broadest. Focus Areas for First 5 Santa Cruz County were defined in the original Strategic Plan and have remained consistent through to this 2008 Strategic Plan Update. They help cluster the rest of the framework in easy-to-remember general categories.



### ***Community Goals – What do we want to achieve for all children and families?***

Community Goals identify the broad condition of well-being that the Commission would like to create. It is not expected that in the next three years the Community Goals will be achieved for all families, nor that the Commission could achieve these Community Goals solely through its investments.



### ***Results – What changes are needed to achieve the goal?***

Results specifically address the current and anticipated situation in Santa Cruz County. Together, these Results communicate the most important changes in knowledge, skills, attitude, conditions and behaviors that are needed in this County to achieve each Community Goal. Through the strategic planning process, the Commission identified a

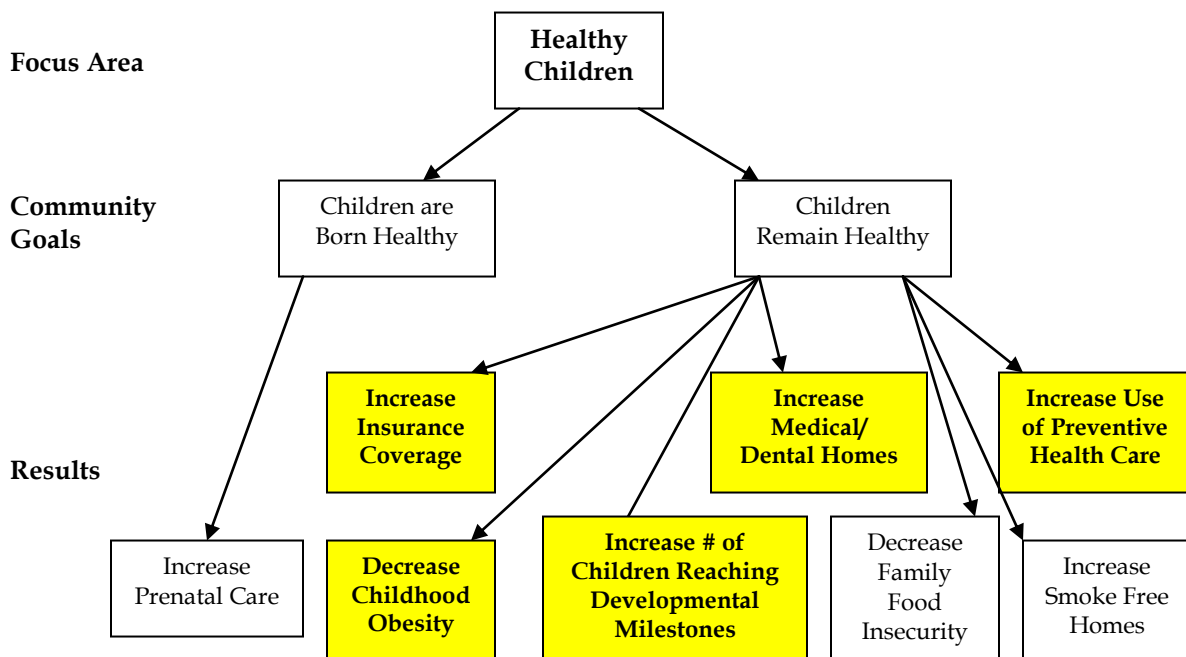
subset of Results that will be targeted for funding through Large Commission Initiatives, Community Grants and Leadership Projects.



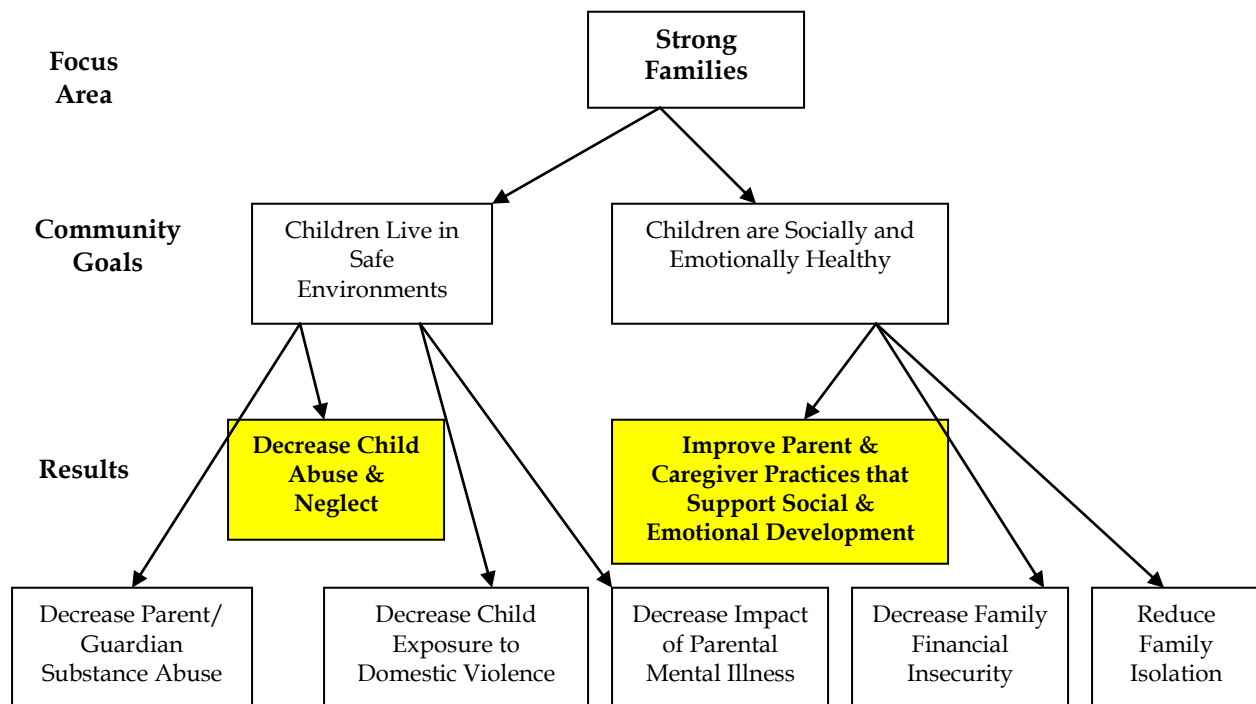
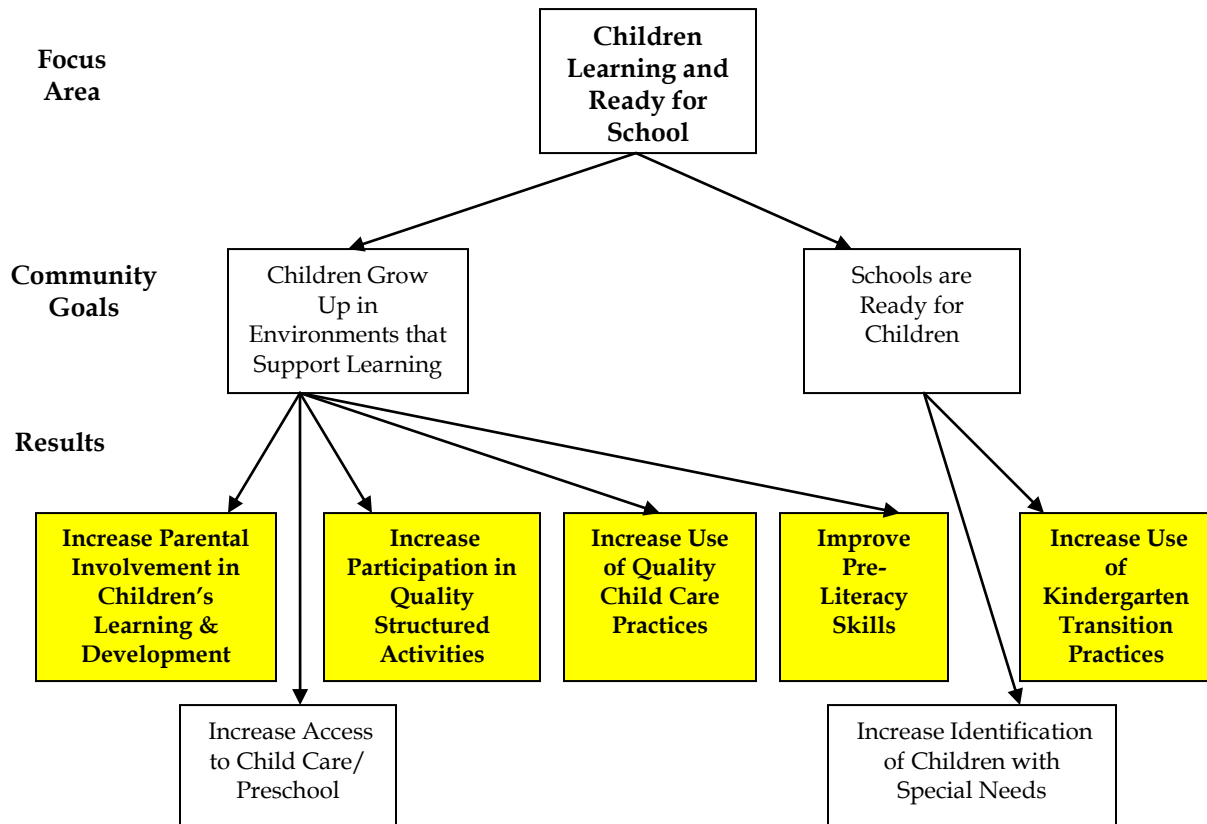
**Indicators – How will we measure our success?**

Indicators define how the Result will be measured. The Commission will identify specific areas of interest through the Indicators, including special populations and types of change desired. For each of the chosen Results, specific evaluation indicators will be articulated as the measures of whether the funded programs and initiatives are effectively implementing the chosen Commission strategies. Both program level indicators and community indicators will be used by the Commission to define its impact. The indicators will be defined in collaboration with the Commission’s evaluation consultant and will be the basis of annual evaluation results available to the Commission and community.

**First 5 Santa Cruz County Strategic Framework**



Note: Highlighted (bold) Results have been chosen to receive Commission funding in 2009/10 – 2011/12



Note: Highlighted (bold) Results have been chosen to receive Commission funding in 2009/10 – 2011/12

## VIII. Focus and Strategies for Investment 2009/10 – 2011/12

First 5 Santa Cruz County creates impact, in part, through its funding decisions. Through its 2005 Long Term Financial Plan, the Commission recognized that Prop 10 funding is decreasing and, as a result, the level of Commission investment that had been possible in early years was not sustainable. In order to ensure that Commission funds create lasting impact in the community, the Commission determined that it would focus its investment toward the achievement of a subset of the Results in the Strategic Framework. The Results that have been chosen for investment in 2009/10 – 2011/12 as well as the strategies that will be funded are described below.

### Healthy Children

Within the Focus Area of *Healthy Children*, the Commission has committed to continuing its investment in the Healthy Kids Initiative. This initiative supports achievement of three Commission Results associated with the Community Goal that “Children Remain Healthy” (These Results and those identified for Children Learning and Ready for School and Strong Families are highlighted in yellow in the graphic on pages 29-30):

- **Increase insurance coverage**
- **Increase medical/dental homes**
- **Increase use of preventive health services**

For 2009-2012, the Commission will expand its investment under the *Healthy Children* Community Goal of “Children Remain Healthy” to include 2 additional Results which are new to the Commission’s Strategic Framework:

- **Decrease childhood obesity**
- **Increase the number of children reaching developmental milestones**

“**Decrease childhood obesity**” replaces and clarifies the change the Commission would like to see from two Results in the 2006-2009 Framework, “Improve childhood nutrition” and “Improve physical activity.” During the first year of this Plan, the Commission will convene stakeholders to develop a targeted approach to reducing early childhood overweight. Research shows that reducing childhood obesity requires an integrated change in policies, practices, social supports and the physical environment for young children. Stakeholders, including the existing Go For Health! Collaborative, early care and education providers, and Parks and Recreation, will inform the development of the Commission strategy in the context of current research and County activities. Based on these discussions, the Commission will define its obesity prevention investment, which will be made through a Commission Initiative and/or Community Grants in the latter two years of the plan.

“**Increase the number of children reaching developmental milestones**” reflects the Commission’s interest in ensuring that healthcare providers are proactively assessing and addressing the developmental needs of young children. The American Academy of

Pediatrics (AAP), in the policy statement, *Identifying Infants and Young Children with Developmental Disorders in the Medical Home*, states, "Early identification of developmental disorders is critical to the well-being of children and their families. It is an integral function of the primary care medical home and an appropriate responsibility of all pediatric health care professionals...Current detection rates of developmental disorders are lower than their actual prevalence, which suggests that the challenges to early identification of children with developmental disorders have not been overcome." To address this Result, the Commission will provide technical assistance and ongoing training to pediatric and family practices to support implementation of the AAP's guidelines.

### **Children Learning and Ready for School**

In the Focus Area of *Children Learning and Ready for School*, the Commission has made a commitment to fund the School Readiness Initiative through 2011/12. Through this initiative, Commission investment is intended to have impact on 5 Results within selected low Academic Performance Index school communities. In support of the Community Goal that "Children Grow Up in Environments that Support Learning," the School Readiness Initiative focuses on the following Results:

- **Increase parental involvement in children's learning and development**
- **Increase participation in quality structured activities**
- **Increase use of quality child care practices**
- **Improve pre-literacy skills.**

The School Readiness Initiative also supports the Result "Increase use of Kindergarten transition practices," and the associated Community Goal "Schools are Ready for Children." The four year funding plan (2008-2012) for the School Readiness Initiative has been approved by First 5 California and meets the results identified by the Commission.

Also under "*Children Learning and Ready for School*," the Commission is committed to continuing additional, (non-school readiness initiative) investment in the Result "**Improve pre-literacy skills**," associated with the Community Goal "Children Grow Up in Environments that Support Learning." Continuing the success of the first years of the Early Literacy Foundations Initiative, the Commission will continue its investment in professional development and family engagement to support solid early literacy skills in young children. Increased attention to family child care providers, curriculum fidelity, child assessment and early care/K-12 alignment will be part of the next phase.

### **Strong Families**

Finally, in the *Strong Families* focus area, the Commission will focus its investment over the next three years on two Results. In support of the Community Goal that "Children Live in Safe Environments" the Commission will continue to highlight the result "**Decrease Child Abuse and Neglect**." The Commission will continue to support its differential response initiative, Families Together, to support this Result.

In support of the re-worded Community Goal “Children are Socially and Emotionally Healthy” the Commission will highlight a Result that has been re-worded as “**Improve parent and caregiver practices that support social and emotional development.**” This re-wording reflects the Commission’s desire to improve the practices of all caregivers in support of children’s social and emotional development. During 2009, the Commission will plan for a broad based, tiered family support program to meet the needs of families. Services will reach families through settings and leaders they trust for parenting support, such as neighborhood services, early care and education and schools, and pediatric and family physician offices and clinics.

By choosing to highlight specific Results, the Commission is using Proposition 10 funding to create a “narrow and deep” impact on specific areas of need for young children and their families. The Commission is committed to investing only in Commission Initiatives and Community Grants that directly address one of the highlighted Results, even though other proposals may address important community needs in an effective way.

### ***Service Integration***

First 5 works to ensure that the service delivery system is coordinated, responsive to families’ needs, easy to access, user-friendly and cost-effective.

The First 5 Santa Cruz County funding plan for 2009 – 2012 incorporates a portfolio of approaches to improving the lives of children in the county – from intense targeted efforts to reach high-risk children to broad community-wide efforts. Physical and mental health, age appropriate cognitive skills, and positive social, emotional and behavioral skills are factors essential for the healthy development of all children. Research clearly shows that children living in high risk environments are more likely to experience challenges in one or all of these areas of development. The geo-mapping conducted as part of the 2005 strategic planning process illustrated the cumulative exposure to risk factors in specific zip codes. For example, a child living in an API 1-3 school community is more likely to also be living under 300% of the federal poverty level and to be exposed to child maltreatment. The Commission identified the children and families in Santa Cruz County zip codes with multiple risk factors as having the most urgent need for integrated resources. Thus, the highest concentration of Commission investment will be delivered via the Healthy Kids Initiative, School Readiness Initiative and Differential Response Initiative in those communities. The Commission’s Focus Areas of Healthy Children, Children Learning and Ready for School, and Strong Families, are interrelated, and, as a result, the Commission has designated integrated strategies to achieve the desired results.

A summary of the Commission’s investment strategies, shown by highlighted Result(s) is provided in the table below.

<b>Healthy Children</b>	
<b>Community Goals and Results</b>	<b>Strategies</b>
<p><i>Children remain healthy</i></p> <ul style="list-style-type: none"> <li>• Increase insurance coverage</li> <li>• Increase medical/ dental homes</li> <li>• Increase use of preventive health services</li> </ul>	<p><i>Initiative:</i> Comprehensive insurance enrollment with “no wrong door” for enrollment</p> <p><i>Target Population:</i> children 0-5 living below 300% of Federal Poverty Level</p>
<p><i>Children remain healthy</i></p> <ul style="list-style-type: none"> <li>• Decrease childhood obesity</li> </ul>	<p><i>2009 Leadership Project:</i> Convene stakeholders to inform the development of an integrated strategy for Commission investment</p> <p><i>2010 – 2012 Commission Initiative and/or Community Grants</i></p>
<p><i>Children remain healthy</i></p> <ul style="list-style-type: none"> <li>• Increase number of children reaching developmental milestones</li> </ul>	<p><i>Leadership Projects &amp; Community Grants:</i> trainings and materials, launch a developmental assessment clinic, launch an early care and education consultation resource</p>
<b>Children Learning and Ready for School</b>	
<b>Community Goals and Results</b>	<b>Strategies</b>
<p><i>Children grow up in environments that support learning</i></p> <ul style="list-style-type: none"> <li>• Increase parental involvement in children’s learning and development</li> <li>• Increase participation in quality structured activities</li> <li>• Increase use of quality child care practices</li> <li>• Improve pre-literacy skills.</li> </ul> <p><i>Schools are ready for children</i></p> <ul style="list-style-type: none"> <li>• Increase use of Kindergarten transition practices</li> </ul>	<p><i>Initiative:</i> Comprehensive School Readiness Supports for children, families, providers and schools</p> <p><i>Target Population:</i> Communities with API scores 1-3 with special emphasis on Freedom and Radcliff attendance zones</p>
<p><i>Children grow up in environments that support learning</i></p> <ul style="list-style-type: none"> <li>• Improve pre-literacy skills</li> </ul>	<p><i>Initiative:</i> Professional development support for child care providers through multiple methods</p> <p><i>Target Population:</i> All child care providers with a special focus on those in subsidized programs, family childcare homes, and providers with less that 12 ECE units</p>

<b>Strong Families</b>	
<b>Community Goals</b>	<b>Strategy</b>
<p><i>Children live in safe environments</i></p> <ul style="list-style-type: none"> <li>• Decrease child abuse and neglect</li> </ul>	<p><i>Initiative:</i> Coordinated community approach to preventing abuse including comprehensive referrals, assessment and services</p> <p><i>Target Population:</i> Children identified as at-risk for maltreatment</p>
<p><i>Children are socially and emotionally healthy</i></p> <ul style="list-style-type: none"> <li>• Improve parent and caregiver practices that support social and emotional development</li> </ul>	<p><i>Community Grants:</i> tiered approach through direct services with multiple methods</p> <p><i>Target Population:</i> Countywide parents, caregivers and professionals serving children 0-5.</p>

## IX. Funding Plan

The Commission has adopted the following funding plan to support the Results highlighted for FY 2009/10 - FY 2011/12.

Focus Area	Result(s)	Investment Approach	Allocation			
			2009/10	2010/11	2011/12	Total
<b>Healthy Children</b>	Increase insurance coverage Increase medical/dental homes Increase Use of Preventive HC	Commission Initiative – Healthy Kids	\$900,000 (committed)	\$900,000 (committed)	\$900,000 (committed)	\$2,700,000
	Increase children reaching developmental milestones	Community Grants, Leadership Project & TA	\$155,000	\$162,800	\$108,200	\$426,000
	Decrease childhood obesity	Leadership Project and Community Grants	\$10,000	\$250,000	\$257,500	\$517,500
<b>Children Learning and Ready for School</b>	Increase parent involvement in learning and development Increase participation in quality activities Increase use of quality child care practices Improve early literacy skills Increase use of Kinder transition practices	Commission Initiative - School Readiness	\$1,105,000 (committed)	\$1,105,000 (committed)	\$1,105,000 (committed)	\$3,315,000
	Improve Early Literacy Skills	Commission Initiative - Professional Development	\$55,000 (committed) +\$350,000	\$367,500	\$378,500	\$1,151,000
<b>Strong Families</b>	Decrease Child Abuse and Neglect	Commission Initiative - Differential Response	\$500,000	\$525,000	\$540,800	\$1,565,800
	Improve Parent and Caregiver Practices that Support Social/Emotional Development	Community Grants and Leadership Project	\$325,000	\$341,300	\$351,500	1,017,800
<b>System Int.</b>			\$100,000	\$100,000	\$100,000	\$300,000
<b>TOTAL</b>			<b>\$3,500,000</b>	<b>\$3,751,600</b>	<b>\$3,741,500</b>	<b>\$10,993,100</b>