

Memo

To: Commission Members
From: Alexander Khu
Date: Monday December 8, 2014
Re: December 8, 2014 Commission Meeting

Enclosed are the materials for the December 8, 2014 Commission meeting which will take place as follows:

Time: 6:00 pm
Location: 1485 Civic Court Suite 1200, Concord, CA
925-771-7300

Also, this year, we are making available two bins from the Food Bank for food donations.
Please bring Non Perishable cans or packaged Food Items to donate.

For everyone's safety, please, **NO GLASS CONTAINERS.**

The Food Bank's most needed items are as follows:

- Peanut Butter
- Whole Grain Cereals
- Hearty Soups
- Beans and Lentils (dry or canned)
- Canned Fruit
- Non Perishable Ready to Eat Meals
- Canned Vegetables in Water
- Brown Rice
- Whole Wheat Pasta
- Canned Tomatoes

A light dinner will be provided.

Please let me know if you have any questions.

Kind Regards,

Alexander Khu, Executive Assistant
First 5 Contra Costa
1485 Civic Court
Suite 1200
Concord, CA 94520
925-771-7342 Direct
925-771-6083 Fax



**COMMISSION MEETING
Agenda**

Monday, December 8, 2014, 6:00 pm
1485 Civic Court, Suite 1200
Large Conference Room
Concord, CA

1.0 Call to Order and Roll Call

2.0 Public Comment

The public may comment on any item of public interest within the jurisdiction of the First 5 Contra Costa Children and Families Commission. In accordance with the Brown Act, if a member of the public addresses an item not on the posted agenda, no response, discussion, or action on the item may occur.

3.0 Approval of Consent Calendar

ACTION

A Commissioner or member of the public may ask that any of the following consent items be removed from the consent calendar for consideration under Item 4.

3.1 Approve the minutes from the October 6, 2014 meeting.

3.2 Accept the Executive Committee Report from the October 6, 2014 meeting.

3.3 Accept the minutes of the Nominating Committee of November 3, 2014 meeting.

3.4 Approve the Contracts Docket

APPROVE and AUTHORIZE the Executive Director to execute a contract amendment with Better World Advertising, Inc. to increase the payment limit by \$125,500 (from \$49,500 to \$175,000) to support the third round of the Sugar Bites campaign to prevent childhood obesity by decreasing consumption of sugar sweetened beverages. Contractor is currently producing 4 Sugar Bites videos for First 5 Contra Costa, two 30-second spots (one in English and one in Spanish) and two 2-minute videos (in English and Spanish). The amendment will support paid media advertising for the 30-second spots, distribution of the 2-minute videos, production of promotional materials, and updates to the Sugar Bites website.

3.5 Accept the FY 2014-15 First Quarter Financial Report

4.0 Consider for discussion any items removed from the consent calendar.

5.0 Recognize First 5 staff who have surpassed service milestones and appreciate the entire staff for their continuing dedication and accomplishment

6.0 Presentation of the 2014 Year in Review

- 7.0 Annual Report to California First 5 for Fiscal Year 2012-2013.**
- 7.1 a. Public Hearing on First 5 Contra Costa's Annual Report for Fiscal year 2013-2014.
- b. Adopt the Annual Report for Fiscal Year 2013-2014 **ACTION**
- 8.0 Consider approving the Slate of Officers of the Commission for 2015: ACTION**
- Chair: PJ Shelton
- Vice Chair: Kathy Gallagher
- Secretary / Treasurer: Gareth Ashley
- Additional Non-Voting Member: Katharine Mason
- 9.0 Consider approving the 2015 Employee Compensation and Benefits Resolution for. ACTION**
- 10.0 Executive Director's Report Discussion**
- 13.0 Communications Discussion**
- 13.1 a. First 5 CA Association October 2014 Briefings
- b. A New Vision for Rumrill Boulevard
- 14.0 Commissioner F.Y.I. Updates Discussion**
- 15.0 Adjourn**

The First 5 Contra Costa Children and Families Commission will provide reasonable accommodations for persons with disabilities planning to participate in Commission meetings who contact the Commission's offices, at least 48 hours before the meeting, at (925) 771-7300.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the First 5 Contra Costa Children and Families Commission to a majority of members of the First 5 Contra Costa Children and Families Commission less than 96 hours prior to that meeting are available for public inspection at 1485 Enea Court, Suite 1200, Concord, CA 94520 during normal business hours.

In consideration of those who may suffer from chemical sensitivities or who may have allergic reactions to heavy scents, First 5 Contra Costa requests that staff and visitors refrain from wearing perfume, cologne, or the use of strongly scented products in the work place. We thank you for your consideration of others.



Monday December 8, 2014

Agenda Item 3.1

Approve the minutes from the October 6, 2014 meeting.



DRAFT Commission Meeting Minutes

Monday, October 6, 2014, 6:00 pm
1485 Civic Court, Suite 1200
Large Conference Room
Concord, CA

1.0 Call to Order and Roll Call

The meeting was called to order at 6:09 PM.

Commissioners in attendance were:

Chairwoman PJ Shelton, Secretary/Treasurer Maria Fort, Barbara Cappa, Gareth Ashley, John Jones, Supervisor Candace Andersen, Dr. William Walker, and Katharine Mason for Kathy Gallagher.

Alternates present were:

Matt Regan and Belinda Lucey.

Also present was County Counsel Keiko Kobayashi.

Absent: Supervisor Karen Mitchoff, Alternates Commissioners Joan Miller for CFS (Children and Families Services), Toni Robertson, and Mister Phillips.

2.0 Public Comment

Tim O'Keefe, Executive Director of Shelter Inc., reported that in the last 10 years since First 5 began funding the Mountainview Emergency Family Shelter, they had served 1,157 people including 659 children with a housing placement rate of 93%.

3.0 Approval of Consent Calendar

A motion was made by Supervisor Candace Andersen to approve the consent calendar.
Maria Fort seconded the motion.

AYES: PJ Shelton, Maria Fort, Barbara Cappa, Gareth Ashley, John Jones, Candace Andersen, Dr. William Walker, and Katharine Mason for Kathy Gallagher.

NOES: None

ABSTAIN: None

5.0 Consider accepting the Fiscal Year 2013-2014 Financial Audit

Chair PJ Shelton introduced Chad D. Rinde from Vavrinek, Trine, Day & Co., the Commission's independent auditors, who then summarized the audit report.

He pointed out that this year was particularly different for First 5 Contra Costa due to the addition of the Single Audit Report completed specifically for the federal Race to the Top grant awarded to First 5 Contra Costa. He reported that in both audits, standard and single, his team did not encounter any difficulty while conducting their work, and that there were no findings or concerns at the end of their work; overall "a clean" audit.

There were no questions from the Commissioners.

A motion was made by John Jones to accept the 2013-14 Financial Audit.
Barbara Cappa seconded the motion.

AYES: PJ Shelton, Maria Fort, Barbara Cappa, Gareth Ashley, John Jones, Candace Andersen, Dr. William Walker, and Katharine Mason for Kathy Gallagher.

NOES: None

ABSTAIN: None

6.0 Presentation on Commission's current and future fiscal status

Sean Casey presented to the Commission an update an update of the Commission's fiscal status, particularly the three principal areas of revenue: Proposition 10 tax funds, the Commission's fund balance, and other sources.

Proposition 10 funds continue to decline at approximately 3% each year due to the continuing decline in tobacco consumption. During the current strategic plan period, Prop 10 revenue has dipped from almost \$9 million at the outset, to approximately \$8 million by the end. In the next strategic planning period (2016-20) revenue is projected to drop another million, to \$7.1 million by 2020.

The Commission's fund balance consists of approximately \$1.5 million that are already dedicated to specific purposes, \$6.6 million assigned to fill the revenue-expenditure gap in the FY 2014-15 budget, \$7.5 million in the Commission's contingency fund, and \$18.2 million that is available for the Commission's discretion.

Over the last ten years, the Commission has received \$2-4 million each year in outside funds, primarily from First 5 California and the Thomas J. Long Foundation.

Overall, Sean projects that the Commission will have nearly \$68 million available over the next five years, including Prop. 10 revenue of nearly \$38 million, discretionary fund balance of approximately \$20 million, and projected other funding of \$10 million.

Gareth Ashley asked if there are any actions planned to spend any of the discretionary funds? Sean replied that ultimately it is the Commission's intention to spend down the discretionary portion of the fund balance, principally by filling the revenue-expenditure gap each year. Obtaining permanent sites for First 5 Centers has also been discussed by the Commission in previous years.

7.0 Consider approving an initial First 5 revenue allocation plan for the period FY 2015-16 to 2019-20.

Sean Casey put forward a recommendation that the Commission set a budget target of \$13 million for the 2015-16 fiscal year, leaving approximately \$55 million for the remainder of the 2016-20 strategic plan period. Doing so allows the Commission time to complete its strategic planning over the calendar year 2015.

Gareth Ashley made a motion to approve an initial First 5 revenue allocation plan of \$13 million for FY 2015-16. He clarified that he felt it was not necessary at this time to set an allocation for the 2016-20 period.

Barbara Cappa seconded the motion.

AYES: PJ Shelton, Maria Fort, Barbara Cappa, Gareth Ashley, John Jones, Candace Andersen, Dr. William Walker, and Katharine Mason for Kathy Gallagher.

NOES: None

ABSTAIN: None

8.0 Executive Director's Report

Sean Casey gave the Executive Director's Report:

Federal Preschool Expansion Grant

In just the last week, we have learned that the Bay Area QRIS region – BAQRIS – was selected as a sub-grantee on California's application for a \$140 million federal preschool expansion grant. If awarded, the six-county region would be one of 12 sub-grantees to receive funds to create new high-quality preschool slots, enhance existing slots, and increase access to high-quality preschool for children with IEPs. This would be a four-year grant, to start January 1, 2015. Only 4-year-old children, below 200% of poverty, would be eligible for these funds. We are working with our local partners – the Contra Costa Child Care Council, the Community Services Bureau, and the Local Planning Council – to determine our county's capacity to quickly increase and enhance slots to take full advantage of the funding. Contra Costa is the lead agency representing the region, which also includes Alameda, San Francisco, San Mateo, Santa Clara and Santa Cruz counties.

First 5 Summit

Ten of our staff were in South Lake Tahoe last week, for a two-day summit of county First 5s. It has been several years since we last convened, and there was a lot to talk about. Evaluation Manager Lyn Paleo presented on our data dashboard and its development. Staff participated in a number of program and administrative workshops. Executive Directors worked with our Association's Executive Committee on re-orienting the Association's activities toward moving forward a policy agenda for

the state. These gatherings are important opportunities to learn about innovative successful ideas in other counties. The Association is already looking into securing a location for the next Summit.

National Family Strengthening Conference

Our Family Support Program Officer Lisa Morrell made a presentation of our Family Support Program at this year's National Family Strengthening Conference in Chicago.

She participated on a panel discussing the subject "Integrating Strengthening Families protective factors into Family Resource & Support Programs."

FESP Convening – Ensuring Opportunity

Next Thursday, October 16, the Family Economic Security Partnership – FESP – is convening with its partners the kick-off of the Ensuring Opportunity Campaign to reduce poverty in Contra Costa. Over 100 participants have registered to learn more about what has been happening since the first convening in May, and get involved in some of the key areas.

First 5 California Executive Director Site Visit

On Monday, November 3, 2014, First 5 California's Executive Director, Camille Maben, will be visiting First 5 Contra Costa to meet with Commissioners, contractors, program officers and staff. Sean informs the Commission that they will soon be receiving an invitation to the morning coffee session.

9.0 Communications

None received.

10.0 Commissioner F.Y.I. Updates

There were no commissioner updates.

11.0 Adjourn

Chair PJ Shelton reminded the Commission that there will be no meeting in November.

John Jones made a motion to move the December 1, 2014 Commission Meeting to December 8, 2014 due to the Thanksgiving Holiday the week prior.

Barbara Cappa seconded.

AYES: PJ Shelton, Maria Fort, Barbara Cappa, Gareth Ashley, Candace Andersen, Dr. William Walker, Joan Miller from CFS, and Katharine Mason for Kathy Gallagher.

NOES: None

ABSTAIN: None

The meeting was adjourned at 7:30 PM.



Monday December 8, 2014

Agenda Item 3.2

Accept the Executive Committee Report from the October 6, 2014 meeting.



Executive Committee MINUTES

October 6, 2014

4:00 p.m.

Small Conference Room,
1485 Civic Court, Suite 1200, Concord, CA

1.0 Call to Order

PJ Shelton called the meeting to order at 4:10 PM. In attendance were Commissioners PJ Shelton, Dr. William Walker and Maria Forte; Alternate Commissioner Katharine Mason; staff Sean Casey, Cally Martin and Marnie Huddleston

2.0 Public Comment

There was none.

3.0 Staff Updates

Sean Casey presented the following program updates

A total of 100 preschools are participating in QRIS – 61 in Cohort I and 39 in Cohort II; 60 sites have completed initial ratings.

CARES Plus enrollment for the 2014-15 year is up; this year there are 252 ECE providers participating in professional development activities, last year the total enrollment was 243.

The six Bay Area QRIS counties have been accepted together as a sub-grantee in the CA Department of Education's application for a federal Preschool Expansion Grant. If successful, the grant will provide funding to create new high-quality preschool slots, augment existing slots, and support access for children with special needs. Contra Costa is the lead agency for the region. Awards will be announced in December.

First 5 Center CAC members gathered last month for a training to launch their individual annual community needs assessment, which will result in recommendations that will inform Center programming next fiscal year. Members learned about Strengthening Families and the five protective factors, the framework used to structure the needs assessment.

Family Support Program Officer Lisa Morrell attended the national Strengthening Families conference in Chicago in early October, participating in a panel on implementing the five protective factors in community settings.

We continue our work with the Trauma Awareness and Resiliency Collaborative to structure a leadership meeting held on October 3rd. This collaborative is supported by First 5 and Zero Tolerance for Domestic Violence and is an attempt to build understanding of the influence of life trauma on families and consider appropriate methods for agencies to respond.

The Family Economic Security Partnership (FESP) is planning a convening on October 16 showcasing activities of Ensuring Opportunity: The Campaign to Cut Poverty in Contra Costa County, with over 100 participants registered. The Ensuring Opportunity effort is gathering steam; Supervisor John Gioia has agreed to join the Ensuring Opportunity Leadership Team, and funders are lining up to support the campaigns ever-increasing activities.

*Executive Committee
Minutes
October 6, 2014
Page 1 of 2*



Many of our staff participated in the statewide First 5 Summit in South Lake Tahoe last week. The Summit agenda featured tracks for program, evaluation and administrative staff as well as sessions for Executive Directors. Evaluation Manager Lyn Paleo made a presentation for a joint evaluation and communications session on the development of Contra Costa's data dashboard.

4.0 Commission Updates

Sean reported that the Board of Supervisors has re-appointed PJ Shelton to another three year term.

5.0 Statewide Updates

Sean detailed the First 5 Summit session with Executive Directors. The First 5 Association is working on a policy agenda that will drive comprehensive policy efforts in four particular areas: universal developmental screening, early learning quality, oral and vision health, and family support. Each of these areas covers broadly the activities of a majority of county First 5s and includes demonstrable outcomes of investment in sound programs.

6.0 Items for Consideration

There were none.

7.0 Review agenda items for upcoming Commission meetings

The Committee reviewed the agenda items for the December meeting.

8.0 Adjourn

The meeting was adjourned at 5:13.



Monday December 8, 2014

Agenda Item 3.3

Accept the minutes of the Nominating Committee Meeting from the November 3, 2014.

**Nominating Committee
Minutes**

November 3, 2014

5:30 pm

1485 Civic Court, Suite 1200,
Small Conference Room,
Concord, CA 94520

- 1.0 Call to Order
The meeting was called to order at 5:25 PM. Present were Alternate Commissioners Belinda Lucey (Chair), Wanda Session, Matt Regan, Executive Director Sean Casey.
- 2.0 Public Comment
None given.
- 3.0 Discussion and Approval of nomination of Chair, Vice Chair, and Secretary/Treasurer for 2015.

Belinda Lucey presented the proposed slate:
Chair: PJ Shelton
Vice Chair: Kathy Gallagher
Secretary / Treasurer: Gareth Ashley

The Committee discussed the slate. A motion to approve the slate was made by Wanda Session and seconded by Matt Regan. The slate was approved unanimously.
- 4.0 Discussion and Approval of nomination of the additional non-voting member of the Executive Committee for 2015

Belinda Lucey announced that Katharine Mason was willing to be put forward again as the Additional Non-Voting Member to the Executive Committee. Matt Regan moved to approve Katharine Mason as the Additional Non-Voting Member to the Executive Committee and Wanda Session seconded the motion. The motion was carried unanimously.
- 5.0 Adjourn

The meeting was adjourned at 5:35 PM.



Monday December 8, 2014

Agenda Item 3.5

Accept the FY 2014-2015 First Quarter Financial Report

FY 14/15 Financial Report - 1st Quarter

		FY14/15 Budget			FY14/15 Actual Revenue and Expense				
		F5 Contra Costa Funds	Other Funds	Total Budget	F5 Contra Costa Funds	Other Funds	Total Revenue and Expense		% of Budget
Line #	REVENUE							Notes	
1	Prop 10 - Tax Apportionment	8,154,941		8,154,941	2,220,022		2,220,022	27.2%	
2	CAF5 - CARES Plus	-	300,000	300,000		1,692	1,692	0.6%	1
3	Race to the Top	-	737,664	737,664		154,020	154,020	20.9%	
4	Thomas J. Long Foundation	-	990,000	990,000		507,375	507,375	51.3%	2
5	Interest Income	120,000		120,000	24,354		24,354	20.3%	
6	MHSA Grant/Other misc income	-	81,050	81,050	1,003	15,380	16,383	20.2%	
7	Fund Balance	5,400,608	227,874	5,628,482	225,218	(263,717)	(38,499)	-0.7%	2
TOTAL REVENUE		13,675,549	2,336,588	16,012,137	2,470,597	414,750	2,885,346	18.0%	

PROGRAM EXPENSES								
Initiatives		9,193,664	2,164,556	11,358,220	1,477,904	385,824	1,863,727	16.4%
Early Care and Education Initiative								
8	Professional Development	919,800	300,000	1,219,800	200,029	1,692	201,721	16.5%
10	Early Learning Quality	275,494	1,783,506	2,059,000	15,377	375,300	390,677	19.0%
11	Literacy	256,080		256,080	57,618		57,618	22.5%
12	Total	1,451,374	2,083,506	3,534,880	273,024	376,992	650,016	18.4%
Family Support								
14	First 5 Centers	2,314,957	6,050	2,321,007	502,030		502,030	21.6%
15	Home Visiting	1,388,209		1,388,209	157,534		157,534	11.3%
16	Training and support	64,200		64,200	3,318		3,318	5.2%
17	Total	3,767,366	6,050	3,773,416	662,882		662,882	17.6%
Early Intervention								
18	Therapeutic Services	834,638	75,000	909,638	8,832	8,832	17,663	1.9%
19	ECE Consultation	993,177		993,177	223,465		223,465	22.5%
20	Children's Developmental Needs	663,733		663,733	100,382		100,382	15.1%
21	Children Experiencing Stress/Trauma	784,290		784,290	110,179		110,179	14.0%
22	Training and Consultation	25,000		25,000	1,373		1,373	5.5%
23	Total	3,300,838	75,000	3,375,838	444,231	8,832	453,062	13.4%
Community Information and Education								
24	Public Information	524,086		524,086	65,176		65,176	12.4%
25	Community Engagement	140,000		140,000	31,541		31,541	22.5%
26	Family Economic Stability	10,000		10,000	1,050		1,050	10.5%
27	Total	674,086		674,086	97,767		97,767	14.5%
Program Expenses								
28	Program Salaries & Wages	1,190,135	153,600	1,343,735	286,555	26,213	312,768	23.3%
29	Program Employee Benefits	799,334	18,432	817,766	177,573	2,713	180,286	22.0%
30	Office Overhead and Other Expenses	231,607		231,607	52,689		52,689	22.7%
31	Total	2,221,076	172,032	2,393,108	516,817	28,926	545,743	22.8%
32	TOTAL PROGRAM EXPENSES	11,414,740	2,336,588	13,751,328	1,994,721	414,750	2,409,470	17.5%

EVALUATION EXPENSES								
33	Evaluation Salaries & Wages	338,318		338,318	82,838		82,838	24.5%
34	Evaluation Employee Benefits	212,971		212,971	50,044		50,044	23.5%
35	Professional Services	306,000		306,000	60,035		60,035	19.6%
36	Office Overhead and Other Expenses	60,533		60,533	11,449		11,449	18.9%
37	TOTAL EVALUATION EXPENSES	917,822		917,822	204,366		204,366	22.3%

Line #	ADMINISTRATIVE EXPENSES							
38	Administrative Salaries & Wages	562,956		562,956	135,131		135,131	24.0%
39	Administrative Employee Benefits	351,677		351,677	81,194		81,194	23.1%
40	Professional Services	135,500		135,500	1,616		1,616	1.2%
41	Purchased Services, Equipment lease, supp	202,839		202,839	29,689		29,689	14.6%
42	Office Overhead	90,015		90,015	23,880		23,880	26.5%
43	TOTAL ADMINISTRATIVE EXPENSES	1,342,987		1,342,987	271,510		271,510	20.2%
44	TOTAL Expenses	13,675,549	2,336,588	16,012,137	2,470,597	414,750	2,885,346	18.0%

Distribution of expenses by department:	Program	83.5%
	Evaluation	7.1%
	Administrative	9.4%
	Total	100.0%

NOTES:

1. First 5 CA CARES Plus pays for childcare provider professional development at year end
2. TJ Long payment received; \$263,717 added to fund balance this quarter for future scholarships paid later this year
3. CC Mental Health contract payment will be made in second quarter

Fund Balance as of 6/30/2014:	
Nonspendable	390,013
Prepays and Deposits	69,013
Loans Receivable - Perinatal Council	321,000
Restricted	223,109
Long Foundation	223,109
Committed	841,227
Capital Assets	841,227
Assigned	6,599,270
Elimination of FY14/15 Budget Deficit	5,628,482
Leases	970,788
Unassigned Funds	25,721,879
Contingency Fund	7,500,000
Unassigned	18,221,879
Total Fund Balance	33,775,498



Monday December 8, 2014

Agenda Item 5.0

Recognize First 5 staff who have surpassed service milestones and appreciate the entire staff for their continuing dedication and accomplishment.



**Staff Report
December 8, 2014**

ACTION: XX
DISCUSSION: _____

TITLE: Staff Appreciation and Service Milestones

Introduction:

The Commission has adopted the practice of annually appreciating First 5 staff and recognizing those who have surpassed service milestones this year.

Background:

The Commission recognizes staff who have achieved five-year increments of service with First 5. This year, one staff member has surpassed a ten year anniversary:

Marianne Dumas, Finance Coordinator

And two staff members have surpassed their five year anniversaries:

Marnie Huddleston, Finance and Operations Director
Heather Van Rykn, Evaluation Assistant II

Recommendation:

That the Commission recognize staff who have surpassed service milestones and appreciate the entire staff for their continuing dedication and accomplishment.



Monday December 8, 2014

Agenda Item 7.0

Annual Report to California First 5 Fiscal Year 2013-2014



**Staff Report
December 8, 2014**

ACTION: X
DISCUSSION:

TITLE: Annual Report for Fiscal Year 2013-2014

By statute, the Commission is required to conduct a public hearing on its annual report to the California Children and Families Commission. The attached report meets the annual report requirements set by First 5 California.

Data presented here is drawn from Family Surveys, quarterly funded program reports, ongoing data collection activities, and special evaluation studies. All reports are based on services to parents, children, other family members, and early education care providers.

The First 5 California annual report framework aggregates demographic information and common key findings across 58 counties within "Services" and "Result Areas." These do not necessarily align with First 5 Contra Costa's Initiatives.

The attached documents were submitted to First 5 California on October 30, 2014:

- County Revenue and Expenditure Summary (AR 1) FY 2013/14
- Evaluation Summary Overview of selected funded activities (AR 3) FY 2013/14
- Three brief narratives of compelling service outcomes that address at least two of First 5 California's four Result Areas for Improved Health, Improved Family Functioning, and Improved Child Development based on evaluations. These include:
 - Highlight of General Parenting Education and Family Support Programs
 - Highlight of Comprehensive Screening and Assessments
 - Highlight of Nutrition and Fitness
- Three brief explanations of funds expended in the Result Area for Improved Systems of Care for each of three separate categories: Policy and Broad Systems Change Efforts, Public Education and Information, and Organizational Support. These include:
 - Service Highlight of Policy and Broad Systems Change Efforts
 - Service Highlight of Public Education and Information
 - Service Highlight of Organizational Support
- Demographic worksheets for each funded set of services as outlined by the First 5 California's Result and Service Areas.

Recommendation:

Adopt the Annual Report for Fiscal Year 2013-2014.



Annual Report Form 1 (AR-1)(Page 1 of 5)
County Revenue and Expenditure Summary
for Fiscal Year 2013-2014 (July 1, 2013 - June 30, 2014)

County: Contra Costa

Friday, October 31, 2014

Revenue Detail

Tobacco Tax Funds	\$	8,353,104
CARES Plus Program Funds, Round 2	\$	263,569
CSP, RFA 1	\$	0
CSP, RFA 2	\$	0
CSP, RFA 3	\$	0
Small County Augmentation Funds	\$	0
Other Funds (Specify Source Below)	\$	400,180
Overpayment on a PY contract \$364,541		
Health and Active B45 \$9,500		
Misc \$26,139		
Grants (Specify Source Below)	\$	1,716,538
Race to the Top \$364,436		
Long Foundation \$1,267,200		
Contra Costa County \$84,902		
Donations	\$	0
Revenue from Interest Earned	\$	103,467
Total Revenue	\$	10,836,858



Annual Report Form 1 (AR-1)(Page 2 of 5)
County Revenue and Expenditure Summary
for Fiscal Year 2013-2014 (July 1, 2013 - June 30, 2014)

County: Contra Costa

Friday, October 31, 2014

Results and Services - Expenditure Details

Result 1: Improved Family Functioning

Community Resource and Referral	\$	128,586
Distribution of Kit for New Parents	\$	72,800
Adult and Family Literacy Programs	\$	128,814
Targeted Intensive Family Support Services	\$	1,027,992
General Parenting Education and Family Support Programs	\$	2,472,065
Quality Family Functioning Systems Improvement (please describe below)	\$	240,958
Provider trainings,FRC facilities,database support		
Total	\$	4,071,215

Result 2: Improved Child Development

Preschool Programs for 3 and 4 Year Olds	\$	1,406,962
Infants, Toddlers, and All Age Early Learning Programs	\$	263,369
Early Education Provider Programs	\$	1,123,400
Kindergarten Transition Services	\$	0
Quality ECE Investments (please describe below)	\$	898,054
RTT/QRIS, TA, coaching, support for providers		
Total	\$	3,691,785



Annual Report Form 1 (AR-1)(Page 3 of 5)
County Revenue and Expenditure Summary
for Fiscal Year 2013-2014 (July 1, 2013 - June 30, 2014)

County: Contra Costa

Friday, October 31, 2014

Result 3: Improved Child Health

Nutrition and Fitness	\$	289,146
Health Access	\$	0
Maternal and Child Healthcare	\$	1,305,514
Oral Health	\$	0
Primary and Specialty Medical Services	\$	0
Comprehensive Screening and Assessments	\$	102,908
Targeted Intensive Intervention for Identified Special Needs	\$	1,211,456
Safety Education and Injury Prevention	\$	0
Tobacco Education and Outreach	\$	0
Quality Health Systems Improvement (please describe below)	\$	314,205
Database, training, system and staff support		
Total	\$	3,223,229

Result 4: Improved Systems of Care

Policy and Broad-Systems-Change Efforts	\$	307,324
Organizational Support	\$	202,576
Public Education and Information	\$	229,938
Total	\$	739,838



Annual Report Form 1 (AR-1)(Page 4 of 5)
County Revenue and Expenditure Summary
for Fiscal Year 2013-2014 (July 1, 2013 - June 30, 2014)

County: Contra Costa

Friday, October 31, 2014

Expenditure Detail

FY 2013-2014 Program Expenditures	\$	11,726,067
FY 2013-2014 Administrative Expenditures	\$	1,027,673
FY 2013-2014 Evaluation Expenditures	\$	815,695
Total Expenditures	\$	13,569,435
Excess (Deficiency) Of Revenues Over (Under) Expenses	\$	-2,732,577

Other Financing Sources

Sale(s) of Capital Assets	\$	0
Other: Specify Source Below	\$	0
Total Other Financing Sources	\$	0

Net Change in Fund Balance

Fund Balance - Beginning July 1, 2013	\$	36,508,075
Fund Balance - Ending June 30, -2014	\$	33,775,498
Net Change In Fund Balance	\$	-2,732,577

FY 2013-2014 Fund Balance

Nonspendable	\$	390,013
Restricted	\$	223,109
Committed	\$	841,227
Assigned	\$	6,599,270
Unassigned	\$	25,721,879
Total Fund Balance	\$	33,775,498



Annual Report Form 1 (AR-1)(Page 5 of 5)
County Revenue and Expenditure Summary
for Fiscal Year 2013-2014 (July 1, 2013 - June 30, 2014)

County: Contra Costa

Friday, October 31, 2014

Expenditure Notes: Please use this space to document any issues with the information provided in this system and to explain any significant variances from prior year's expenses that is not related to revenue growth. Please identify if any cell includes significant capital expenditures. If yes, identify the cell and the capital amount included.

I hereby certify the information submitted herein is accurate and complete to the best of my knowledge. I further certify that I have the authority to submit this information. I make these certifications via my name, phone number and e-mail address entered below. I acknowledge that the data in this submission may be subject to verification at a later date.

Name Marnie Huddleston
Phone 925-771-7330
Email mhuddleston@firstfivecc.org

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 13/14
July 1, 2013-June 30, 2014

County: **Contra Costa**

Provide a description of the evaluation activities completed during the fiscal year

Key Evaluation Activities

- Prepared a set of strategic reports for all outcome questions that match strategic planning goals, with comparisons from other institutions for many outcomes.
- Improved the data dashboard for the agency website.
- Continued to refine data collection measures and procedures, rigorously monitor data quality, consolidate data storage, and streamline the reporting feedback loop to contractors.
- Worked closely with one database vendor to develop specialized and advanced queries and reports to support contractor use of data as well as better data analysis of five family resource centers, two home visiting programs and community engagement activities.
- Worked with the 5 county Bay Area Regional QRIS Collaborative to adopt a common set of fields for sites participating in the Race to the Top initiative, using a robust database built by the WELS foundation.
- Finalized two studies to evaluate family engagement with preschool teachers (Home Learning Environment), and to measure the impact of program activities on pregnant and parenting teens in two high school parenting programs.

Family and Provider Survey

All contractors are required to collect First 5 Family, Child and/or Provider Surveys in English or Spanish on all new participants each year. The Family and Child Survey captures child and caregiver demographics, health information, consumption of sugary drinks, reading practices, maternal education, special needs or concerns regarding child development, and exposure to smoking. Most baseline data have been collected since 2002, with over 3,200 Family Surveys collected in FY13-14 from 24 programs.

Additional Data Collection Activities

Various data collection measures across four initiatives include evidence-based tools to capture information regarding specific services, activities and outcomes.

- For universal screening, all child-focused programs implement the ASQ3.
- Parents attending Triple P classes complete the ECBI, Parenting Scale, DASS 21, and Parenting Tasks Checklist.
- Pregnant and parenting teens use pre/post surveys, video interviews, enrollment data, and rates of graduation.
- Wrap-around, clinical mental health and substance recovery services use pre/post assessments for family functioning and parent-child interaction (CANS), and child behavioral assessments (CBCLs).
- Mental health consultation and inclusion facilitation services use an Excel database to track intake/discharge data, service activity data, exit surveys, and child placement information.
- Early care educators use an Access database to track professional development activities, advancement data on the child development permit matrix, degree requirements and attainment of college degrees. A WELS database will collect assessment and rating information about sites participating in the Bay Area Race to the Top initiative.
- Literacy preschools use a pre/post kindergarten readiness observation tool and pre/post

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 13/14
July 1, 2013-June 30, 2014

County: **Contra Costa**

RAR surveys.

- First 5 Centers (family resource sites) use ETO, an online database, to track registration, class participation, developmental playgroups, assessments, referrals, and family strengths.
- A hospital and 2 home visiting programs use ETO to track referrals and services, assessments on children, assessments on postpartum depression, the home environment, and other child and family outcomes for families with infants.

In addition, participants in designated programs that receive intensive or specialized services are periodically interviewed by an outside evaluator. Questions are based on the Commissions' priority areas as identified in the Strategic Plan.

Reporting Activities

All funded programs are required to submit online quarterly updates that include units of service, counts of population reached, and brief narratives regarding specific service activities, issues and innovations with providing services, training and support needs, lessons learned, and outreach plans for reaching their target population. Additionally, contractors routinely include vignettes that highlight the impact of services on families, children and providers.

Describe the evaluation findings reported during the fiscal year

In FY 2013-2014, results of the **3,255** completed new Family Surveys indicate at intake:

- 31% of families earn less than \$15,000 annually; another 32% earn between \$15,000 and \$30,000.
- 54% of families speak primarily Spanish in the home.
- 84% of parents identify their race/ethnicity as a person of color.
- 28% of mothers have less than a high school education; 31% earned only a high school diploma or GED.
- 94% of children have a regular health care provider for well child check-ups.
- 67% of children have Medi-Cal coverage (includes 4% with Healthy Families); 2% have no health insurance.
- 15% of children have been exposed to second hand tobacco smoke at home.
- 20% of children have been identified as having a developmental delay or disability.
- 26% of parents have a concern that their child is not developing like other children.
- Nearly all families read to their children at least weekly; with 78% reading between 3-7 times p/week.

Professional Development

- Since FY 09/10, three local community colleges provided to 3,705 students advising services and supports for ECE core course completion, achievement of an AA degree, transfer readiness, and advancement on the child development permit matrix.
- One hundred child care programs are participating in Quality Rating and Improvement System (QRIS).

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 13/14
July 1, 2013-June 30, 2014

County: **Contra Costa**

Preschool Makes a Difference (PMD)

Measures of child school readiness indicate that children in PMD programs made substantive gains in competency skills across all six domains: alphabet recognition, counts to 10, follows directions, expresses needs/wants, gross motor, and fine motor.

Kindergarten Readiness

Children's preparedness for kindergarten increased significantly between fall and spring. Factors associated with growth in overall kindergarten readiness skills included children turning the pages of the book when reading with their parents and children either quietly listening or discussing the book with their parents during reading.

Mental Health Therapeutic Services

As in prior years' findings, on average, children's problem severity (from CBCL scores) indicate 'medium to high clinical risk' at both pre/post measurements for Internalizing, Externalizing, and Total problems, as well as other subscales. However, participation in the program was associated with a significant decline in risk on every measure, indicating movement towards more normative behavior.

Mental Health Consultation Services

Top concerns identified at intake by providers were for behavioral /emotional issues, including aggression and defiance. 64% were able to remain in their child care setting. Of these, 31% naturally transitioned to Kindergarten. An additional 13% were moved to a setting considered more beneficial. Nearly 68% of the children were referred for further developmental assessment. At exit, teachers, parents and consultants report improvement in child behavior, and gaining skills in care and management of difficult behavioral issues.

Inclusion Facilitation Services

Top concerns identified by providers and parents at intake were for communication, sensory and motor issues. 63 of children were referred to other agencies for formal evaluations. Of these, 44% were formally identified with a developmental delay. 82% of children with exit information were retained in their classroom. An additional 9% were moved to a setting where the move was prompted by a need for a different type of care.

Triple P

Data indicate Triple P classes positively impacted caregivers and children, and participation helped ameliorate problems, particularly among families who at class start indicated the greatest need for support. The use of clinical cutoff scores identified between 8-17% of the population as high risk. Of these, between 40-60% were no longer identified as high risk at follow-up. Parents report that child behavior consistently shows improvement.

Teen Parenting Programs

91% either completed or continued their high school education. Teen parents demonstrated a significant increase in parenting knowledge over the course of intensive services as measured at baseline. From recent qualitative interviews, teens reported that the program helped them to be more confident, independent and empowered, better equipped to handle challenges, more optimistic and prepared about the future, and able to finish their education and pursue careers.

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 13/14
July 1, 2013-June 30, 2014

County: **Contra Costa**

Developmental Screening

Since 2011, over 5,000 children have been screened using the ASQ3. Approximately 11% of all children 0-5 years in low-income families in priority areas were screened by an agency supported by First 5. Of the children screened, 22% scored in the monitoring zone, and 19% needed a referral based on score in at least one domain. Of the referrals, the majority was sent to their primary care provider for medical assessment, and half of these were referred to the school district or the Regional Center.

First 5 Centers

Participation rates over the past 4 years show high completion rates with 60% of families enrolled in core classes completing at least 75% of the class days offered. Over the course of services, parents reported an increase in social supports, and were more likely to read to their children more frequently.

Describe the policy impact of the evaluation results

Developmental Screening and Developmental Playgroups

- Child development specialists conduct Developmental Playgroups at the First 5 Centers and provide much needed early intervention services for children whose developmental delays - while still significant - do not qualify for state-funded services. In the pilot, 205 children were referred to the playgroups based on results from developmental screenings they received at our First 5 Centers.
- Based on the pilot results, along with increasing demand for early intervention services like these, we invested \$115,000 FY13/14 to continue the playgroups.
- With a modest investment of \$220,000, one of our most significant accomplishments last year was continuing to build a system for early identification, referral, and care coordination for children with developmental delays or behavioral concerns. The system includes convening the Early Childhood Leadership Alliance, a collaborative of 50 children's agencies, increasing provider capacity to provide developmental screening, responding to children's identified needs through new developmental playgroups, and leading the effort to become a *Help Me Grow* affiliate in Contra Costa County to provide high-quality, coordinated services for all children in need.
- F5CC continued to conduct ASQ trainings for 279 individual providers representing 58 different organizations, including 95 Public Health Nurses.

Evidence Based Practices

- F5CC expanded access to evidence-based mental health services for children by partnering with a non-profit organization and County Mental Health to host Triple P in Contra Costa. 22 providers were certified as trainers in Levels 1-4 of Triple P, and 16 accredited in Level 4.
- F5CC extended the reach of Triple P in key locations throughout the county, including family resource centers, shelters, schools, and at mental health service locations.
- In FY 13/14, 232 parents participated in Triple P group classes. Data indicate that classes positively impacted caregivers and children, and participation helped ameliorate problems, particularly among families who at class start indicated the greatest need for support.

Annual Report Form / Evaluation Summary Overview

County Evaluation Summary for FY 13/14
July 1, 2013-June 30, 2014

County: **Contra Costa**

New QRIS Efforts

- F5CC is one of 16 counties receiving funds from the federal Race to the Top Early Learning Challenge grant to establish a Quality Rating and Improvement System (QRIS) in Contra Costa.
- The original RTT Early Learning Challenge grant was for \$1.4 million through December 2015. This may increase up to \$631,253 to fund additional sites in 2014-2015. Our original target was 90 sites; currently, we have 100 QRIS sites.
- F5CC prioritized the limited technical assistance and funding to teachers working in QRIS zip codes and expanded the geographical target areas.
- Child care programs will be rated and earn points for various elements of quality, such as teacher-child ratios, teacher qualifications, and teacher-child interactions using a regional tier system.
- Per the RTT grant, most of these programs serve high-need children, including infants and toddlers, dual language learners, children with special needs, and children eligible for state and federally subsidized programs.
- We are just now starting to rate our participating sites; ratings will be made public at the end of the grant period in December 2016.

Highlights of Regional Groups and Community Engagement

Contra Costa County FY 2013/2014

Result Area 1: Improved Family Functioning

Service: General Parenting Education and Family Support Programs

Most Compelling Service Outcome

Nearly 30 Regional Group members graduated from a 6-month training program on land use policy organized by F5CC and several other entities.

The Land Use Planning School was the first of its kind in the region to train community residents on important land use concepts and advocacy skills to promote healthier and safer communities. The school consisted of 6 sessions covering land use equity, zoning, pollution, food access, park planning, campaign development, and messaging/strategic communication. Each session incorporated expert guest speakers and dynamic learning exercises.

After assessing 60 locations, members found that improved safety, play equipment, and maintenance are particularly needed in parks located in low-income neighborhoods. They will share their findings and recommendations with various city park and recreation staff this fall.

The success of the school has also made it a model as the Health Services Dept. will train other organizations this fall using the group's curricula.

Benchmark/Baseline Data

Regional Group members are volunteer parents from targeted low-income communities. Data have been collected on member participation since the inception of the program in 2002 as part of the Civic Engagement Project funded by First 5 California. Currently, the vast majority of the active Regional Group members are low-income parents of color (95%) and 56% are monolingual Spanish speaking.

The parks assessment was conducted in 3 cities across East County (Bay Point, Pittsburg and Antioch) by Regional Group members, their children, and agency partners.

In Concord, 7 parks were assessed by Regional Group members, city staff, and agency partners, for seven different areas: maintenance, safety, play equipment, innovation, ADA accessibility, and parent and child experience.

Outcome Measurement Tool

- The survey assessment tool was drafted in collaboration with Regional Group members and project partners.
- 2 community workshops followed the assessment in which Regional Group members, city staff, and agency partners analyzed the data, identified themes and drafted recommendations.

Highlights of Developmental Screening

Contra Costa County FY 2013/2014

Result Area 1: **Improved Child Health**

Service: **Comprehensive Screening and Assessments**

Most Compelling Service Outcome

With a modest investment, a significant accomplishment was building a system for early identification, referral, and care coordination for children with developmental delays or behavioral concerns. F5CC convened a collaborative of 50 agencies, increased provider capacity to provide developmental screening, funded developmental playgroups, and lead the effort to become a *Help Me Grow* affiliate.

F5CC trained 280 children's providers from 58 agencies to implement the ASQ-3 screening tool. More than 4,400 children have been screened, with one-third flagged for possible delays. Children not eligible for state-funded services can participate in a developmental playgroup. At the conclusion of this 8 week program, many children received higher ASQ scores and no longer need services. A partnership with our local 211 provider will make it easier for parents to find developmental and behavioral services, an important step in centralizing referral services and becoming a *Help Me Grow* affiliate.

Benchmark/Baseline Data

To obtain percent of target children screened in F5CC priority areas, the unduplicated count of children screened in priority zip codes was compared with the number of low-income children age 0-5 years residing in priority areas over same time two year period. The results show that F5CC reached approximately 11% of low income children residing in target areas of the county.

The percent of children screened with scores in the monitoring and referral zones varied by year and program. Scores are based on item responses and categorized as either 'on schedule', 'needs monitoring', or 'needs referral' for each domain.

- 22% had at least one score in monitoring zone (children with no scores in referral zone)
- One-fifth scored in referral zone on one or more domains
- Of children re-screened, 80% were on-schedule in all domains at both the first and final screening
- Of children in referral or monitoring zones at first screening, 56% were on schedule by last screening
- Of those on-schedule at their initial screening, emerging issues were identified for 11% of children rescreened

Outcome Measurement Tool

- Ages and Stages Questionnaire developmental screening: Summary scores entered as white (on schedule), gray (needs monitoring), and black (needs referral).
- Actions Taken: Additional label is attached for tracking referral information.
- Developmental playgroup participant attendance is tracked.

Highlights of Campaign for Sugar Sweetened Beverages (Sugar Bites) Contra Costa County FY 2013/2014

Result Area 3: **Improved Child Health**
Service: **Nutrition and Fitness**

Most Compelling Service Outcome

In FY 12/13, F5CC and community partners launched a hard-hitting bilingual social marketing campaign to reduce children's consumption of sugary beverages and increase water consumption. Called "Sugar Bites", outdoor ads were placed in targeted communities on bus shelters, BART stations, and convenience stores. The cutsugarydrinks.org website was created and 40,000 brochures were distributed through Head Start and WIC.

In FY 13/14, the second cycle of our Sugar Bites campaign, F5CC focused primarily on sugary juice drinks, which many parents didn't know contain as much or more sugar than soda. In addition to round one strategies, round two placed billboards on major highways, expanded outreach to 133 dental offices, created 5000 grocery totes, and placed 22,500 residential door hangers.

Our Sugar Bites website won the Gold Award of Excellence in this year's Communicator Awards, the leading international awards program honoring excellence in marketing, advertising and communications.

Benchmark/Baseline Data

In the year prior to launching Sugar Bites, F5CC collected family survey data from all new families receiving services regarding which beverages they serve their children: "Yesterday, how many times did this child drink each of the following? (Water, chocolate milk, juice or fruit drink, soda). Based on two years of data, parents reported that three-quarters of children drank bottled water the previous day and 4 in 10 drank tap water. While parents reported that only 9% of kids drank soda, 63% drank juice or other sugary drinks and 31% drank chocolate milk.

A study conducted by Dr. Susan Babel at the UCLA Center for Health Policy Research, found a dramatic drop in the proportion of young children drinking sugary beverages daily over the seven-year period. Only 19 percent of 2- to 5-year-olds drink a sugary beverage daily, a 30 percent decline from the 2005-2007 reporting period. However, the article did not specify whether it classified juice as a sugary beverage.

Highlights of Campaign for Sugar Sweetened Beverages (Sugar Bites) Contra Costa County FY 2013/2014

Result Area 3: **Improved Child Health**
Service: **Nutrition and Fitness**

Outcome Measurement Tool

In addition to pre/post Family Surveys, we implemented intercept surveys in communities where Sugar Bites ads were placed to determine campaign effectiveness. We included media impressions, website analytics, and social media metrics in the final evaluation of phase two of the campaign.

Highlights of Policy and Systems Change Efforts (FESP)

Contra Costa County FY 2013/2014

Result Area 4: **Improved Systems of Care**
Service: **Policy and Broad Systems-Change Efforts**

Primary Target Audience

FESP (Family Economic Security Partnership):

Targets low to moderate-income families with children 0-5 eligible for refunds and earned income federal tax credits. F5CC provides staff support and chairs the coalition of over 30 agencies that collaborate to increase income and build assets of low-income families. FESP supports the annual Earn It! Keep It! Save It! campaign to help low-income families receive free tax help.

Types of Services

- Organized presentations on topics related to poverty and economic stability.
- Joined forces with county's Safety Net Task Force to create a countywide poverty report card.
- Implemented the new multi-county online Asset Building Resource Directory on how agencies can support and integrate direct service provision and community development/social change activities into daily practice.
- Informed members of impending policy and legislation impacting financial stability for families.

Intended Result / Community Impact

FESP, a public, private and nonprofit collaboration, initiated a new campaign to reduce poverty by raising awareness and building a network of committed agencies, constituents and community members to support programs and policies to accomplish this goal. A convening of over 200 individuals representing non-profits, public and private agencies, faith and business sector, funders, and policy decision makers, all met to share poverty data, explore policy solutions, and build a base of support.

In FY13/14, Contra Costa had 38 free tax assistance sites using 350 volunteers which served nearly 12,000 low to moderate-income families and individuals returning more than \$3.6 million in Earned Income Tax Credit and over \$12.3 million in total federal tax refunds.

Since 2004, FESP has helped file nearly 30,000 tax returns totaling over \$42 million in refunds and \$13.6 million in EITC. As a result of FESP organizing efforts, over 98 hours of financial education was offered to families with children 0-5 at F5CC Family Resource Centers.

Highlights of Public Education and Community Information Dissemination

Contra Costa County FY 2013/2014

Result Area 4: Improved Systems of Care

Service: **Public Education and Community Information Dissemination**

Primary Target Audience

F5CC hosted two community events targeting 500 mental health and early intervention specialists, early care educators, crisis intervention providers, First 5 funded contractors, pediatricians and health care providers.

F5CC continues to reach various target audiences (parents, elected officials, and community partners) through social media, online platforms (website and blog), traditional media outreach and press releases, bilingual collateral materials, and short, informative videos.

Types of Services

EVENTS: The two community day long events highlighted Dr. Bruce Perry ("Building Resilience Through Trauma-Informed Interventions), and Dr. Steve Robbins ("Recognizing Unintentional Intolerance - A Dialogue on Diversity").

SOCIAL MEDIA: F5CC updated a data dashboard with detailed data and outcomes, infographics, links to parent testimonials, and 5 new videos. F5CC also continued the blog, providing weekly posts about First 5 programs, policies affecting children, and parenting tips.

Intended Result / Community Impact

EVENTS: For the Dr. Bruce Perry event, 78% of participants reported that they would incorporate the information into their work. 95% of the audience reported that both presentations met or exceeded expectations.

SOCIAL MEDIA: Our engagement and reach remain high. Site visits and visitors to our blog continue to be significant. This increase is mirrored in increased traffic to our website this year. We also doubled the number of individuals and organizations following us on Facebook and Twitter.

The videos F5CC produced are very well received by parents and the organizations featured in them. One video on the benefit of developmental screening is now featured by Brookes Publishing (publisher of the ASQ) as a success story on its website and is our most viewed video on YouTube (over 1000 views). The family highlighted in the screening video was also featured in the local Contra Costa Times. The increase in visitors and "fans" is an indicator that First 5 Contra Costa is seen as an early childhood resource.

Highlights of Organizational Support

Contra Costa County FY 2013/2014

Result Area 4: **Improved Systems of Care**
Service: **Organizational Support**

Primary Target Audience

F5CC uses a variety of databases in support of F5CC funded contractors, local community and regional partners, and F5CC staff. The primary focus of support for each database user is to ensure that data entry is timely, accurate and complete, and that data can be used to inform practice on service delivery and evaluation outcomes. Making data easy to enter and extract requires ongoing coordination between F5CC staff and funded programs, vendors, and other Bay Area First 5 counties.

Types of Services

F5CC provides:

- Basic and advanced support for three Excel databases specifically developed for Triple P, Mental Health Consultation and Inclusion services.
- Basic and advanced ETO support for five First 5 Centers, three home visiting programs, and a Community Engagement program.
- Development and ongoing support for two Access databases for three community colleges and a program for parents with children identified with special needs.
- Coordination of new WELS database for ECE participants.

Intended Result / Community Impact

All F5CC funded organizations have collected years of data and received ongoing technical assistance from staff at F5CC for database development and quality assurance. Most of these programs now have the ability to pull data, create queries, and use data to better understand their clientele, improve service delivery, and manage internal decisions.

As a result of F5CC expertise, the Evaluation Manager has participated in the 5 county Bay Area Regional QRIS Collaborative, and encouraged the adoption of a common set of fields for sites participating in the Race to the Top initiative, using a robust database built by the WELS foundation to contain site and individual level data about participation in the Bay Area QRIS effort. Besides troubleshooting implementation issues, the evaluation department is overseeing a regional contract for a preliminary analysis of WELS data to ensure reliability of data across the five counties.

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 14. Community Resource and Referral

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	5253
Other family members	0
Providers	0
TOTAL	5253

Total Children	0
----------------	---

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	0
Asian	104
Black/African-American	2052
Hispanic/Latino	1127
Pacific Islander	0
White	928
Multiracial	230
Other/Unknown	812
TOTAL	5253

Children

Parents/Guardians

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	4566
Spanish	607
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	80
Unknown	0
TOTAL	5253

Children

Parents/Guardians

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 15. Distribution of Kit for New Parents

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	7250
Other family members	0
Providers	33
TOTAL	7283

Total Children	0
----------------	---

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	0
Asian	84
Black/African-American	0
Hispanic/Latino	2262
Pacific Islander	0
White	0
Multiracial	0
Other/Unknown	4904
TOTAL	7250

Children

Parents/Guardians

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	4904
Spanish	2262
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	84
Unknown	0
TOTAL	7250

Children

Parents/Guardians

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 17. Adult and Family Literacy Programs

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown (birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	164
TOTAL	164

Total Children	0
----------------	---

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	0
Asian	0
Black/African-American	0
Hispanic/Latino	0
Pacific Islander	0
White	0
Multiracial	0
Other/Unknown	0
TOTAL	0

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	0
Spanish	0
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	0
Unknown	0
TOTAL	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 18. Targeted Intensive Family Support Services

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	281
Children 3 to Five Years	105
Children - Ages Unknown (birth to five years)	573
Parents/Guardians/Primary Caregivers	1192
Other family members	0
Providers	65
TOTAL	2216

Total Children	959
----------------	-----

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	4
Asian	29
Black/African-American	52
Hispanic/Latino	326
Pacific Islander	0
White	0
Multiracial	90
Other/Unknown	68
TOTAL	643

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	94
Spanish	35
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	2
Unknown	828
TOTAL	959

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 19. General Parenting Ed & Family Support Services

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	1352
Children 3 to Five Years	652
Children - Ages Unknown (birth to five years)	0
Parents/Guardians/Primary Caregivers	2188
Other family members	135
Providers	0
TOTAL	4327

Total Children
2004

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
4	5
152	195
100	169
1219	1431
11	19
203	255
201	57
114	57
2004	2188

Alaska Native/American Indian	
Asian	
Black/African-American	
Hispanic/Latino	
Pacific Islander	
White	
Multiracial	
Other/Unknown	
TOTAL	

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
434	554
805	1307
20	21
20	18
2	5
2	2
92	142
629	139
2004	2188

English	
Spanish	
Cantonese	
Mandarin	
Vietnamese	
Korean	
Other	
Unknown	
TOTAL	

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 1: Improved Family Functioning (Family Support, Education and Services

Service Area: 20. Quality Family Functioning Systems Improvement

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown (birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	100
TOTAL	100

Total Children
0

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0

Alaska Native/American Indian	
Asian	
Black/African-American	
Hispanic/Latino	
Pacific Islander	
White	
Multiracial	
Other/Unknown	
TOTAL	

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0
0	0

English	
Spanish	
Cantonese	
Mandarin	
Vietnamese	
Korean	
Other	
Unknown	
TOTAL	

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area2: Improved Child Development (Child Development Services)

Service Area: 21. Preschool for 3 and 4 Year Olds

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	0
Children 3 to Five Years	362
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	56
TOTAL	418

Total Children	362
----------------	-----

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	0
Asian	0
Black/African-American	33
Hispanic/Latino	252
Pacific Islander	0
White	50
Multiracial	2
Other/Unknown	10
TOTAL	362

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	121
Spanish	227
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	14
Unknown	0
TOTAL	362

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area2: Improved Child Development (Child Development Services)

Service Area: 26. Early Education Programs for Children

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	42
Children 3 to Five Years	15
Children - Ages Unknown(birth to five years)	78
Parents/Guardians/Primary Caregivers	104
Other family members	0
Providers	0
TOTAL	239

Total Children	135
----------------	-----

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	0
Asian	2
Black/African-American	16
Hispanic/Latino	6
Pacific Islander	2
White	24
Multiracial	8
Other/Unknown	77
TOTAL	135

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	39
Spanish	3
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	1
Unknown	92
TOTAL	135

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 2: Improved Child Development (Child Development Services)

Service Area: 27. Early Education Provider Programs

Reporting Requirements		TOTAL
------------------------	--	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	627
TOTAL	627

Total Children	0
----------------	---

Ethnic Breakdown of Population Served
(Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home
(Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 2: Improved Child Development (Child Development Services)

Service Area: 29. Other Child Development (Quality ECE Investments)

Reporting Requirements		TOTAL
------------------------	--	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	336
TOTAL	336

Total Children	0
----------------	---

Ethnic Breakdown of Population Served
(Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home
(Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 32. Nutrition and Fitness

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	142
Children 3 to Five Years	615
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	757

Total Children
757

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	0
Asian	0
Black/African-American	0
Hispanic/Latino	0
Pacific Islander	0
White	0
Multiracial	0
Other/Unknown	0
TOTAL	757

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	0
Spanish	0
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	0
Unknown	757
TOTAL	757

English	0
Spanish	0
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	0
Unknown	0
TOTAL	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 35. Maternal and Child Health

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	761
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	787
Other family members	5
Providers	0
TOTAL	1553

Total Children
761

Ethnic Breakdown of Population Served
(Children and Families)

Children	Parents/Guardians
Alaska Native/American Indian	4
Asian	46
Black/African-American	187
Hispanic/Latino	406
Pacific Islander	6
White	54
Multiracial	45
Other/Unknown	39
TOTAL	787

Primary Language Spoken in the Home
(Children and Families)

Children	Parents/Guardians
English	92
Spanish	19
Cantonese	0
Mandarin	0
Vietnamese	0
Korean	0
Other	5
Unknown	645
TOTAL	761

English	453
Spanish	277
Cantonese	1
Mandarin	4
Vietnamese	3
Korean	0
Other	48
Unknown	1
TOTAL	787

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 39. Comprehensive Screening and Assessments

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	680
Children 3 to Five Years	452
Children - Ages Unknown(birth to five years)	189
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	0
TOTAL	1321

Total Children	1321
----------------	------

Ethnic Breakdown of Population Served
(Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	74	0
Black/African-American	116	0
Hispanic/Latino	568	0
Pacific Islander	0	0
White	157	0
Multiracial	137	0
Other/Unknown	269	0
TOTAL	1321	0

Primary Language Spoken in the Home
(Children and Families)

	Children	Parents/Guardians
English	490	0
Spanish	532	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	30	0
Unknown	269	0
TOTAL	1321	0

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 40. Targeted Intensive Intervention for Children Identified with Special Needs

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	273
Children 3 to Five Years	259
Children - Ages Unknown(birth to five years)	157
Parents/Guardians/Primary Caregivers	689
Other family members	0
Providers	318
TOTAL	1696

Total Children	689
----------------	-----

Ethnic Breakdown of Population Served
(Children and Families)

	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	46	41
Black/African-American	64	45
Hispanic/Latino	212	167
Pacific Islander	0	2
White	160	107
Multiracial	50	10
Other/Unknown	157	317
TOTAL	689	689

Primary Language Spoken in the Home
(Children and Families)

	Children	Parents/Guardians
English	383	262
Spanish	147	112
Cantonese	2	2
Mandarin	2	2
Vietnamese	0	0
Korean	0	0
Other	12	12
Unknown	143	299
TOTAL	689	689

County: ContraCosta First5 Results and Service Area Worksheet AR2

Result Area 3: Improved Health (Health Education and Services)

Service Area: 44. Quality Health Systems Improvement

Reporting Requirements	TOTAL
------------------------	-------

Population Served

Children less than 3	0
Children 3 to Five Years	0
Children - Ages Unknown(birth to five years)	0
Parents/Guardians/Primary Caregivers	0
Other family members	0
Providers	350
TOTAL	350

Total Children	0
----------------	---

Ethnic Breakdown of Population Served
(Children and Families)

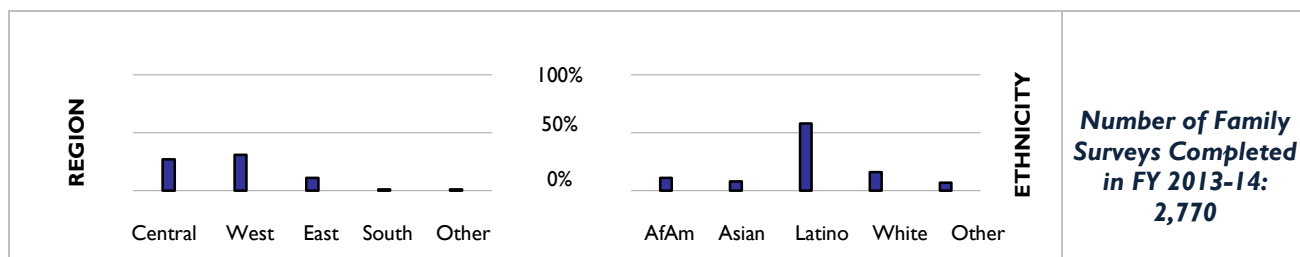
	Children	Parents/Guardians
Alaska Native/American Indian	0	0
Asian	0	0
Black/African-American	0	0
Hispanic/Latino	0	0
Pacific Islander	0	0
White	0	0
Multiracial	0	0
Other/Unknown	0	0
TOTAL	0	0

Primary Language Spoken in the Home
(Children and Families)

	Children	Parents/Guardians
English	0	0
Spanish	0	0
Cantonese	0	0
Mandarin	0	0
Vietnamese	0	0
Korean	0	0
Other	0	0
Unknown	0	0
TOTAL	0	0

First 5 Contra Costa Family Survey Data – All Programs

Data Summary 2013-2014



OVERVIEW OF SERVICES

In FY 2013-2014, results of the **2,770** completed new Family Surveys indicate at intake:

- 31% of families earn less than \$15,000 annually; another 32% earn between \$15,000 and \$30,000.
- 54% of families speak primarily Spanish in the home.
- 84% of parents identify their race/ethnicity as a person of color.
- 28% of mothers have less than a high school education; 31% earned only a high school diploma or GED.
- 94% of children have a regular health care provider for well child check-ups.
- 67% of children have Medi-Cal coverage (includes 4% with Healthy Families); 2% have no health insurance.
- 15% of children have been exposed to second hand tobacco smoke at home.
- 20% of children have been identified as having a developmental delay or disability.
- 26% of parents have a concern that their child is not developing like other children.
- Nearly all families read to their children at least weekly; with 78% reading between 3-7 times p/week.

FAMILY SURVEY

	Response	2005-2013 ¹	2013-2014 ²
Parent/Guardian Ethnicity (Item response rate for 2013-2014= 88%)	Asian/Pacific Islander	6%	8%
	African-American	12%	11%
	Hispanic/Latino	60%	58%
	White	15%	16%
	Other/More Than 1	7%	7%

¹ For 2005-13: The number of adults = 25,177, the number of children = 28,515.

² For 2013-14: The number of adults= 2,770, the number of children = 3,240.

	Response	2005-2013	2013-2014
Children's Ethnicity (IRR= 86%)	Asian/Pacific Islander	6%	7%
	African-American	11%	10%
	Hispanic/Latino	58%	54%
	White	14%	15%
	Other/More Than 1	11%	14%
Primary Language Spoken at Home (IRR= 93%)	English	39%	40%
	Spanish	41%	32%
	English and Spanish	14%	21%
	English and Other	3%	5%
	Other	3%	3%
Children's Age (IRR= 89%)	Birth through 3 years	74%	76%
	4 and 5 year olds	26%	24%
Children's Gender (IRR= 87%)	Male	53%	55%
Region of County (IRR= 82%)	Central	29%	27%
	West	31%	31%
	East and Far East	36%	40%
	South	2%	1%
	Other	2%	1%
Mother First Received Prenatal Care* (IRR= 60%)	1 st trimester	83%	85%
	2 nd trimester	12%	10%
	3 rd trimester	3%	5%
	Had not yet received prenatal care	2%	1%
Children's Health Insurance Coverage (IRR= 82%)	Private	28%	29%
	Medi-Cal	61%	63%
	Healthy Families/CHIP	6%	4%
	Other	3%	3%
	Multiple responses checked	1%	<1%
	None	2%	2%
Children's Tobacco Exposure (IRR= 87%)	Yes, inside the house	1%	1%
	Yes, outside of the house	15%	14%
	No	83%	85%
Children Have Well Child Care* (IRR= 82%)	Yes	94%	94%
Parents Concerned About Children's Development* (IRR= 77%)	Yes	18%	26%
Children Are Identified with a Disability (IRR= 82%)	Yes	16%	21%

	Response	2005-2013	2013-2014
Number of Times Children Had Bottled Water Yesterday* Of Children Older than 6 Months (IRR= 69%)	Did not drink	23%	25%
	1-3 times	49%	44%
	4-6 times	22%	22%
	7 times or more	6%	9%
		(n=932)	(n=2,221)
Number of Times Children Had Chocolate Milk Yesterday* Of Children Older than 6 Months (IRR= 64%)	Did not drink	61%	73%
	1-3 times	35%	25%
	4-6 times	3%	2%
	7 times or more	1%	1%
		(n=904)	(n=2,075)
Number of Times Children Had Juice Yesterday* Of Children Older than 6 Months (IRR=66%)	Did not drink	26%	41%
	1-3 times	64%	53%
	4-6 times	8%	4%
	7 times or more	2%	1%
		(n=913)	(n=2,144)
Number of Times Children Had Soda Yesterday* Of Children Older than 6 Months (IRR= 61%)	Did not drink	88%	92%
	1-3 times	12%	8%
	4-6 times	<1%	<1%
	7 times or more	<1%	<1%
		(n=789)	(n=1,990)
Number of Times Children Had Faucet Water Yesterday* Of Children Older than 6 Months (IRR= 63%)	Did not drink	44%	65%
	1-3 times	33%	20%
	4-6 times	17%	10%
	7 times or more	6%	5%
		(n=827)	(n=2,051)
Percent Enrolled in Preschool* Of Children Age 2-5 Years	Enrolled	72%	86%
		(n=6,298)	(n=357)
Reason Children Are Not Enrolled in Preschool*	On a wait list	26%	16%
	Will start later	36%	35%
	Not yet decided	24%	33%
	Do not intend to enroll	14%	16%
		(n=1,064)	(n=49)
Number of Days Children Were Read to in Past Week* (IRR= 84%)	7 days	28%	27%
	3-6 days	41%	44%
	1-2 days	18%	20%
	None	13%	10%
Number of Minutes Children Were Read to at Each Sitting* (IRR= 76%)	Under 10 minutes	28%	22%
	10-19 minutes	40%	48%
	20-39 minutes	30%	28%
	40-59 minutes	1%	2%
	60+ minutes	2%	1%

	Response	2005-2013	2013-2014
Level of Maternal Education (IRR= 75%)	Less than high school	35%	28%
	High school degree or GED	31%	31%
	2-year college or vocational school	19%	23%
	Bachelor's degree	12%	13%
	Master's degree or higher	4%	5%
Parent/Guardian has been to a First 5 Center ³ (IRR= 90%)	Yes	53%	72%
Parent/Guardian has been to a First 5 Center Of those who did not fill out a survey at a F5 Center (IRR= 39%)	Yes	24% (n=11,053)	35% (n=1,092)
Relationship to Children ⁴ (IRR= 93%)	Mother	89%	91%
	Father	4%	5%
	Foster parent/guardian	1%	2%
	Grandparent or other relative	2%	2%
	Other	<1%	<1%
	Multiple responses checked	4%	<1%
Number of Children (0-5) in Household (IRR= 85%)	0 (pregnant)	12%	3%
	1	50%	60%
	2	24%	29%
	3	5%	6%
	4	1%	1%
	5 or more	8%	<1%
Family Income ⁵ (IRR= 53%)	Less than \$15,000	50%	31%
	\$15,001 to \$30,000	28%	32%
	\$30,001 to \$45,000	13%	15%
	\$45,001 to \$60,000		9%
	\$60,001 to \$75,000	3%	5%
	\$75,001 and over	7%	9%

Notes Regarding the Family Survey Data –

- All responses are based on voluntary completion of the First 5 Family Survey by new program participants.
- Percentages may not total to 100 due to rounding and because for some of the questions, the response options of “don’t know” or “prefer not to say” are not displayed.
- The item response rate (IRR) is the percentage (%) of respondents who answered the question out of the total number of eligible respondents in the current FY. All IRRs are at least 95% unless reported otherwise.
- An asterisk (*) indicates that for the 2005-2013 cumulative data, this question was not asked every year or was asked only of certain individuals. For example, from 2005-10 the reading to your child question and from 2005-2012 the beverage questions were not asked, and only pregnant women were asked about entry into prenatal care.
- For questions, please contact kim@appliedsurveyresearch.org or evaluation@firstfivecc.org

³ Includes all participants even those who fill out a Family Survey at a F5 Center

⁴ For 2005-10; the data for “Grandparent or other relative” reflects respondents choosing “Other relative” only. The response option was updated in 2010-2011 to include Grandparent.

⁵ The data for response options \$30,001 to \$45,000 and \$45,001 to \$60,000 were merged for 2005-2013.



Monday December 8, 2014

Agenda Item 8.0

Consider approving the Slate of Officers of the Commission for 2015

Slate of Officers for Election

2015

Chair:	PJ Shelton
Vice Chair:	Kathy Gallagher
Secretary/Treasurer:	Gareth Ashley
Additional Non-Voting Member	Katharine Mason



Monday December 8, 2014

Agenda Item 9.0

Consider approving the 2015 Employee Compensation and Benefits Resolution.



**Staff Report
December 8, 2014**

ACTION: X
DISCUSSION:

TITLE: 2015 First 5 Staff Compensation and Benefits Resolution, No. 2014/002

Introduction:

The Commission utilizes the County's payroll and benefits program for its employees. Since 2012, the Commission has maintained its own staff compensation and benefits resolution to clarify where Commission compensation and benefits policies diverge from those of the County.

The 2015 Resolution includes the following amendments and revisions:

- 2015 employer contributions to health and dental premiums, previously approved by the Commission at the September 8, 2014 meeting.
- A change to the name of the eye examination benefit, consistent with the County's carrier.
- Clarifying language on employee eligibility for leave and disability insurance.
- Addition of a loan provision to the employee deferred compensation plan that permits employees who participate in the Deferred Compensation program to borrow funds from their account. All other County public agencies participating in the Mass Mutual deferred compensation plan have made this provision available to employees. There is no employer cost associated with this provision.

Recommendation:

Staff recommends the Commission approve the 2015 Employee Compensation and Benefits Resolution, No. 2014/002.



**EMPLOYEE COMPENSATION
AND
BENEFITS RESOLUTION
NO. 2014/002**

Draft for Approval
December 8, 2014

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1. Compensation

It is the policy of the Commission to provide its employees with a fair and competitive compensation package. The policy for setting compensation is described in the Commission's Consolidated Financial Policies.

Executive Director: The approved salary range for the Executive Director is \$110,000 to \$160,000. The Executive Director's salary is set by the Commission.

Employees: Employees starting salaries fall within the following ranges according to classification.

Starting Annual Salary Ranges by Classification*

Directors	\$86,937 - \$100,776
Managers, Program Officers	\$69,550 - \$89,107
Specialists, Coordinators	\$57,958 - \$71,710
Assistants II, Executive Assistant, Community Liaison	\$44,176 - \$52,955
Assistants	\$38,242 - \$46,336

*First 5 Contra Costa has a performance increase structure. Employees are eligible, but not guaranteed to receive up to five (5) annual salary (step) increases, based upon performance, thereafter employees are no longer eligible for annual salary (step) increases. Salary increases range from 0% for lowest performance to 5% for highest performance.

2. Employment Status – Definitions

Full-Time Employees are scheduled to work 40 hours per work week.

Part-Time Employees are scheduled to work 20 hours or more per work week.

Intermittent Employees work on an as needed, irregular basis. Intermittent employees are paid by the hour, and offered limited benefits specified in this Resolution.

Temporary Employees/Interns work for a limited period of time. Paid temporary employees/interns will be paid on an hourly basis, and offered limited benefits specified in this Resolution.

Non-exempt Employees are eligible to be paid for overtime work in accordance with the Federal Fair Labor Standards Act (FLSA).

Exempt Employees are exempt from earning overtime compensation under the provisions of the Federal Fair Labor Standards Act (FLSA).

3. Work Week Defined

Work Week Defined: The work week begins at 12:01 a.m. on Saturday and ends at 12:00 midnight on Friday.

4. Leaves With and Without Pay, and Related Benefits

Refer to the Benefits and Leaves of Absence Sections within the Employee Handbook to determine eligibility.

- A. Holidays Observed: First 5 Contra Costa observes 10 paid holidays each year. The following 10 holidays are observed for all employees and the office is officially closed on these days:

New Year's Day	Labor Day
Martin Luther King Jr. Day	Veterans' Day
Presidents' Day	Thanksgiving Day
Memorial Day	Day after Thanksgiving
Independence Day	Christmas Day

Part-time employees and eligible intermittent employees ^{SG1} will receive holiday pay proportionate to the number of hours they are regularly scheduled to work.

- B. Personal Holiday Leave: Full-time employees are eligible to accrue two (2) hours of personal holiday leave each month. Personal holiday leave for part-time employees who work 20 or more but less than 40 hours per week will be prorated based upon the number of hours they work each week. No employee may accrue more than forty (40) hours of personal holiday leave. Intermittent and temporary employees/interns are not eligible to receive personal holiday leave.

Upon separation from First 5 Contra Costa, an employee will be paid for any unused accrued personal holiday leave at the employee's then current rate of pay.

- C. Vacation: Full-time employees are eligible to accrue paid vacation each month according to years of service. Vacation for part-time and intermittent employees working more than one (1) but less than 40 hours per week will be prorated based upon the number of hours they work. Temporary employees/interns are not eligible to receive vacation benefits.

Vacation accrual rates and accrual maximums based upon years of service for full-time employees are reflected in the following table. No employee may accrue more than the designated maximum hours of vacation.

Length of Service	Monthly Accrual Hours	Maximum Cumulative Hours
Under 11 years	10	240
11 years	10 2/3	256
12 years	11 1/3	272
13 years	12	288
14 years	12 2/3	304
15 through 19 years	13 1/3	320
20 through 24 years	16 2/3	400
25 through 29 years	20	480
30 + years	23 1/3	560

Upon separation from First 5 Contra Costa, an employee will be paid for any unused

accrued vacation at the employee's then current rate of pay.

- D. Vacation Buy Back: Exempt employees may elect payment of up to one-third (1/3) of their annual vacation accrual, subject to the following conditions:

1. the choice can be made only once every twelve (12) months with eleven (11) full months between each election;
2. payment is based on an hourly rate determined by dividing the employee's monthly salary by 173.33; and
3. the maximum number of vacation hours that may be paid in any one sale is one-third (1/3) of the annual accrual.

- E. Sick Leave: Full-time employees are eligible to accrue eight (8) hours of sick leave per month. Sick leave for part-time and intermittent employees working more than one (1) but less than 40 hours per week will be prorated based upon the number of hours they work. Temporary employees/interns are not eligible to receive sick leave benefits.

There is no cap on sick leave accruals. There will be no payout of accrued sick leave upon separation from First 5 Contra Costa.

- F. Administrative Leave: On January 1 each year, full-time exempt employees in an active paid status will be credited with sixty (60) hours of paid administrative leave. Part-time exempt employees receive an amount proportionate to their established work schedule. Non-exempt, intermittent and temporary employees/interns are not eligible to receive administrative leave.

Employees hired or promoted to exempt positions are eligible for administrative leave on the first day of the month following their appointment date and will receive administrative leave on a prorated basis for that first year.

Administrative leave is non-accruable and all balances will be zeroed out each December 31. There is no payout of administrative leave balances upon separation from First 5 Contra Costa.

- G. Disability Insurance: First 5 Contra Costa provides short and long-term disability insurance for eligible employees. Eligibility is outlined below:

	Full-Time and Part-Time Employees who work at least 20 hours per week		Part-Time Employees who work less than 20 hours per week and Intermittent Employees		Temporary Employees /Interns
	Exempt	Non-exempt	Exempt	Non-exempt	Non-exempt [SG2]
Long Term Disability Insurance*	Included with benefits	Provided by First 5	Not eligible	Not eligible	Not eligible
Short Term Disability* (CA State Disability)	Provided by First 5	SDI through payroll deduction	Not eligible	SDI through payroll deduction	SDI through payroll deduction

Insurance-SDI)					
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*The criteria for current coverage through Contra Costa County benefits are based upon exempt and non-exempt classification.

- H. Disability Insurance for Partial Wage Replacement: First 5 Contra Costa will provide the same disability coverage for employees as provided through and administered by Contra Costa County:
1. Exempt employees participate in the Long-Term Disability Insurance program with a replacement limit of eighty-five (85%) of total monthly base earnings reduced by any deductible benefits.
 2. Non-exempt Intermittent and paid Temporary/Intern employees participate in California's State Disability Insurance program as mandated by the California Unemployment Insurance Code and administered by the Employment Development Department.
- I. Supplemental Disability Insurance: First 5 Contra Costa provides additional short and long-term disability insurance at no cost to employees for full-time and part-time employees working 20 hours or more per week. Part-time employees working less than 20 hours per work, intermittent employees, and temporary employees/interns are not eligible to receive supplemental disability insurance.
- J. Paid Family Leave: Non-exempt employees who participate in California's State Disability Insurance program through payroll deductions may be eligible for up to six (6) weeks of the state's Paid Family Leave program, which provides partial wage replacement for absences related to care of a family member, or bonding with a new child. This program is coordinated through the State Employment Development Department (EDD).

5. Health, Dental, and Related Benefits for Active Employees

- A. Health Plan Coverages: First 5 Contra Costa will provide the same medical and dental coverage for employees and for their eligible family members, as provided through Contra Costa County and the following providers:
1. Contra Costa Health Plans (CCHP)
 2. Kaiser Permanente Health Plan
 3. Health Net
 4. Delta Dental
 5. DeltaCare (PMI)
- B. Monthly Premium Subsidy:
1. For each health plan, First 5 Contra Costa's monthly premium subsidy is a set percentage of the premium charged by the plan.

First 5 Contra Costa will pay 80% of the monthly health plan premium for permanent full-time and part-time employees working at least 20 hours per week for the term of this resolution. Employees are required to pay 20% of the monthly premium.

2. For each dental plan, First 5 Contra Costa's monthly premium subsidy is the same rate as County unrepresented employees. Refer to County Employee Benefits information online at www.co.contra-costa.ca.us. Intermittent employees are eligible to participate in the optional health and dental plans offered, wholly at the intermittent employees' expense. Temporary employees/interns are not eligible to participate in the optional health and dental plans.

First 5 Contra Costa will pay the following monthly premium subsidies for permanent full-time and part-time employees working 20 hours or more per week for the term of this resolution:

<u>HEALTH PLANS</u>	2015 Employer Monthly Contribution	
	<u>PLAN A</u>	<u>PLAN B</u>
Contra Costa Health Plan		
Employee	\$523.56	\$580.37
Employee & 1 or more	\$1,247.40	\$1,379.06
Kaiser Permanente-Basic Plan		
Employee	\$649.07	\$510.04
Employee & 1 or more	\$1,513.16	\$1,188.39
Health Net HMO Plan-Basic Plan		
Employee	\$947.77	\$659.07
Employee & 1 or more	\$2,324.96	\$1,616.74
Health Net CA & Nat'l PPO Plan-Basic Plan		
Employee	\$1,216.05	\$1,094.75
Employee & 1 or more	\$2,888.82	\$2,600.64
<u>DENTAL PLANS</u>	<u>DELTA DENTAL</u>	<u>DELTA CARE (PMI)</u>
For CCHP Plans A & B		
Employee	\$41.17	\$25.41
Employee & 1 or more	\$93.00	\$54.91
For Health Net Plans A&B		
Employee	\$34.02	\$21.31
Employee & 1 or more	\$76.77	\$46.05
For Kaiser Permanente Plans A & B		
Employee	\$34.02	\$21.31
Employee & 1 or more	\$76.77	\$46.05
Without a Health Plan		
Employee	\$43.35	\$27.31
Employee & 1 or more	\$97.81	\$59.03

3. In the event that First 5 Contra Costa's premium subsidy amounts are greater

than one hundred percent (100%) of the applicable premium of any health or dental plan, for any plan year, First 5's contribution will not exceed one hundred percent (100%) of the applicable plan premium.

C. Health Plan Coverages and Provisions: The following provisions are applicable to First 5 Contra Costa Employee's Health and Dental Plan participation:

1. Employee Contribution Deficiencies: First 5 Contra Costa contributions to the Health Plan and/or Dental Plan premiums are payable for any month in which the employee is paid. If an employee's compensation in any month is not sufficient to pay the employee share of the premium, the employee must make up the difference by remitting the unpaid amount to the County Auditor Controller. The responsibility for this payment rests solely with the employee.
2. Leave of Absence: First 5 Contra Costa will continue to pay its shares of health and/or dental plan premiums for enrolled employees who are on an approved paid or unpaid leave of absence provided the employee's share of the premiums is paid by the employee.

D. Family Member Eligibility Criteria: The following persons may be enrolled as the eligible Family Members of a medical and/or dental plan Subscriber:

1. Health Insurance

a. Eligible Dependents:

- Legal spouse
 - Qualified domestic partner (State registered domestic partnership or Contra Costa County non-registered domestic partnership)
 - Child to age 26
 - Disabled child who is over age 26, unmarried, and incapable of sustaining employment due to a physical or mental disability that existed prior to the child attainment of age 19.
- b. "The definition of a dependent child includes natural child, step-child, adopted child, child of a qualified domestic partner and a child specified in a Qualified Medical Child Support Order (QMCSO) or similar court order.

2. Dental Insurance

a. Eligible Dependents:

- Legal spouse
- Qualified domestic partner (State registered domestic partnership or Contra Costa County non-registered domestic partnership)
- Unmarried children who are dependent on you, your spouse or qualified domestic partner for support who are:
 - (1) under age 19;
 - (2) age 19 to 24; who are full-time students, dependents upon you for at least 50% of their support, unmarried and living with you (except when away at school)
 - (3) Disabled child who is over age 19, unmarried, incapable of sustaining employment due to a physical or mental handicap that existed prior to the child's attainment of age 19 and is your dependent as defined by the Internal Revenue Service.

- b. "The definition of a dependent child includes natural child, step-child, adopted child, child of a qualified domestic partner, and a child specified in a Qualified Medical Child Support Order (QMCSO) or similar court order.

- E. Video Display Terminal (VDT) Users Eye Examination Computer Vision Care (CVC[SG3]) Program: Employees are eligible to receive an annual CVC vision examination at First 5's expense provided that the employee regularly uses a video display terminal at least an average of two (2) hours per day as certified by their supervisor.

Employees must make their request through the County Benefits Department. Should prescription eyeglasses be prescribed for the employee following the examination, First 5 Contra Costa agrees to provide, at no cost, basic eye wear consisting of a ten-fifty dollar (\$1050) frame and single, bifocal or trifocal lenses.

Employees may solely at the employee's expense, include blended lenses and other care, services or materials not covered by the Plan.

- F. CalPERS Long-Term Care: Eligible employees may voluntarily elect to purchase long-term care at their expense through the CalPERS Long-Term Care Program.
- G. Premium Conversion Plan: Employees may elect to participate in the Premium Conversion Plan designed to qualify for tax savings under Section 125 of the Internal Revenue Code, but tax savings are not guaranteed. The program allows employees to use pre-tax dollars to pay health and dental premiums.

6. Health, Dental and Related Benefits for Separated or Retired Employees

- A. Coverage Upon Separation: An employee who separates from First 5 Contra Costa is covered by his/her health and/or dental plan through the last day of the month in which s/he separates. Employees who separate from First 5 Contra Costa employment may continue group health and/or dental plan coverage to the extent provided by the COBRA laws and regulations, at the same rates as Contra Costa County Cobra plans. Refer to County Employee Benefits information online at www.co.contra-costa.ca.us.
- B. Coverage Upon Retirement: An employee who retires from First 5 Contra Costa may be eligible to continue his/her health and/or dental plan at the retiree rates as approved by the Commission. Refer to Section 10E for additional information.

7. Workers' Compensation

First 5 Contra Costa provides workers' compensation insurance to employees injured within the course and scope of their employment with medical and other benefits as prescribed in the California Labor Code.

8. Flexible Spending Accounts

Employees working 20 hours or more per week are eligible to participate in the following flexible spending accounts. Part-time employees working less than 20 hours per work,

intermittent employees, and temporary employees/interns are not eligible to participate.

- A. Health Care Spending Account: After six (6) months of continuous employment employees may elect to participate in a Health Care Spending Account (HCSA) Program designated to qualify for tax savings under Section 125 of the Internal Revenue Code. Such savings are not guaranteed. This program allows employees to set aside a predetermined amount of before-tax dollars from their pay each calendar year for health care expenses that are not reimbursed by any other health benefit plans. HCSA dollars may be expended on any eligible medical expenses allowed by Internal Revenue Code Section 125. Any unused balance is forfeited and cannot be recovered by the employee.
- B. Dependent Care Assistance Program: The Dependent Care Assistance Program (DCAP) is designed for employees to qualify for tax savings under Section 129 of the Internal Revenue Code. Such savings are not guaranteed. Any unused balance is forfeited and cannot be recovered by the employee.

9. Life Insurance

- A. Life Insurance Benefit Under Health and Dental Plans: For employees who are enrolled in First 5 Contra Costa's program of medical or dental coverage as either the primary or the dependent, term life insurance in the amount of ten thousand dollars (\$10,000) will be provided by First 5 Contra Costa.
- B. Voluntary Supplemental Life Insurance: In addition to the life insurance benefits provided by this resolution, employees may subscribe voluntarily and at their own expense for supplemental life insurance. Employees may elect from \$20,000 up to \$500,000 of coverage as provided through and administered by Contra Costa County.
- C. Non-exempt Employees: Non-exempt employees are covered by term life insurance, at First 5 Contra Costa's expense, in the amount of forty thousand dollars (\$40,000) in addition to the insurance provided under Section 7.A
- D. Exempt Employees: Exempt employees are covered by term life insurance, at First 5 Contra Costa's expense, in the amount of fifty seven thousand dollars (\$57,000) in addition to the insurance provided under Section 7.A
- E. Executive Director: In lieu of the insurance provided under Section D, the Executive Director is covered by term life insurance, at First 5 Contra Costa's expense, in the amount of sixty thousand dollars (\$60,000) in addition to the insurance provided under Section 7.A.

10. Retirement

- A. Membership in the Contra Costa County Employees' Retirement Association (CCCERA). Full-time employees and part-time employees who work twenty (20) hours or more per week will receive retirement benefits provided under the Contra Costa County Employees' Retirement Association (CCCERA). The program includes mandatory deductions, as determined by CCCERA. The program is a defined contribution plan.

- B. The member and employer contribution rates are split into three sets;
1. Members with membership dates before January 1, 2011 are enrolled in Tier 1 Enhanced
 2. Members with membership dates on or after January 1, 2011 are enrolled in Tier 1 Enhanced. For employees hired on or after January 1, 2011 certain terminal pay elements are no longer included in the determination of compensation for retirement purposes.
 3. Employees who become members on or after January 1, 2013 are enrolled in Tier 4, and are governed by the California Public Employees Pension Reform Act of 2013 (PEPRA) (Chapters 296 and 297, Statutes of 2012). To the extent that this resolution conflicts with any provision of PEPRA, PEPRA governs.

Contribution rates for both employers and employees are determined by the CCCERA Board of Directors. For more information about contribution rates contact CCCERA at 925-521-3960 or online at www.cccera.org.

- C. Subvention. Mandatory retirement contributions are split into employer and employee contributions. The employee portion is split into the basic rate and the COLA rate used for their COLA when retired.

Effective on January 1, 2013, employees are responsible for the payment of 100% of the employees' basic and COLA contributions. First 5 will pay only the employer contribution.

- D. Pre-Tax Payment of Retirement Contributions. First 5 Contra Costa follows Section 414(h) (2) of the Internal Revenue Code which allows the County Auditor-Controller to reduce the gross monthly pay of employees by an amount equal to the employee's total contribution to the County Retirement System before Federal and State income taxes are withheld, and forward that amount to the Retirement system. This program of deferred retirement contribution will be universal and non-voluntary as required by statute.

- E. Health and Dental Benefit Participation Upon Retirement

1. Employees Hired Prior to January 1, 2007: Upon retirement and for the term of this resolution, eligible employees hired prior to January 1, 2007 and their eligible family members may remain in their First 5 Contra Costa health/dental plan, but without First 5 Contra Costa-paid life insurance coverage, if immediately before their proposed retirement the employees and dependents are either active subscribers to one of the contracted health/dental plans or if while on authorized leave of absence without pay, they have retained continuous coverage during the leave period. First 5 Contra Costa will pay the health/dental plan monthly premium subsidies for eligible retirees and their eligible family members at the same rates as Contra Costa County retirement plans. Refer to County Employee Benefits information online at www.co.contra-costa.ca.us.

2. Employees Hired After December 31, 2006: All employees hired after December 31, 2006 are eligible for retiree health/dental coverage upon completion of fifteen (15) years of service as an employee of First 5 Contra Costa. For purposes of retiree health eligibility, one year of service is defined as one thousand (1,000) hours worked within one anniversary year. The existing method of crediting service while an employee is on an approved leave of absence will continue for the duration of this Resolution. Upon retirement, employees (and their eligible family members) are eligible to receive a monthly premium subsidy for health and dental plans at the same rates as Contra Costa County retirement plans. Refer to County Employee Benefits information online at www.co.contra-costa.ca.us.
 3. Employees Hired on or after January 1, 2009: Eligible employees who retire under the Contra Costa County Employees' Retirement Association (CCCERA) may retain continuous coverage of a health and/or dental plan, however no monthly premium subsidy will be paid by First 5 Contra Costa for any health or dental plan after they retire. They will receive continuous coverage of a health and/or dental plan, provided that (i) he or she begins to receive a monthly retirement allowance from CCCERA within 120 days of separation from First 5 Contra Costa employment and, (ii) he or she pays the full premium cost under the health and/or dental plan without any First 5 Contra Costa premium subsidy.
 4. Any person who becomes age 65 on or after January 1, 2009 and who is eligible for Medicare must immediately enroll in Medicare Parts A and B.
- F. Employees Who File For Deferred Retirement: Employees who resign and file for a deferred retirement and their eligible family members may continue in their First 5 Contra Costa group health and/or dental plan under the following conditions and limitations.
1. Health and dental coverage during the deferred retirement period is totally at the expense of the employee, without any First 5 Contra Costa contributions.
 2. Life insurance coverage is not included.
 3. To continue health and dental coverage, the employee must:
 - a. be qualified for a deferred retirement under the 1937 Retirement Act provisions;
 - b. be an active member of a First 5 Contra Costa group health and/or dental plan at the time of filing their deferred retirement application and elect to continue plan benefits;
 - c. be eligible for a monthly allowance from the Retirement System and direct receipt of a monthly allowance within twenty-four (24) months of application for deferred retirement; and
 - d. file an election to defer retirement and to continue health benefits hereunder with the Benefits Division within thirty (30) days before separation from First 5 Contra Costa service.
 4. Deferred retirees who elect continued health benefits hereunder and their

eligible family members may maintain continuous membership in their health and/or dental plan group during the period of deferred retirement by paying the full premium for health and dental coverage on or before the 10th of each month, to the Contra Costa County Auditor-Controller. When the deferred retirees begin to receive retirement benefits, they will qualify for the same health and/or dental coverage as similarly situated retirees who did not defer retirement.

5. Deferred retirees may elect retiree health benefits hereunder without electing to maintain participation in their First 5 Contra Costa health and/or dental plan during their deferred retirement period. When they begin to receive retirement benefits, they will qualify for the same health and/or dental coverage as similarly situated retirees who did not defer retirement, provided reinstatement to a Contra Costa group health and/or dental plan will only occur following a three (3) full calendar month waiting period after the month in which their retirement allowance commences.
 6. Employees who elect deferred retirement will not be eligible in any event for First 5 Contra Costa health and/or dental plan subsidy unless the member draws a monthly retirement allowance within twenty-four (24) months after separation from First 5 Contra Costa.
 7. Deferred retirees and their eligible family members are required to meet the same eligibility provisions for retiree health/dental coverage as similarly situated retirees who did not defer retirement.
- G. For purposes of Section 10 only, "eligible family members" does not include Survivors of employees or retirees.

11. Deferred Compensation

Employees working 20 hours or more per week are eligible to participate in the Deferred Compensation plan. Part-time employees working less than 20 hours per work, intermittent employees, and temporary employees/interns are not eligible to participate.

- A. Deferred Compensation Incentive: First 5 Contra Costa will contribute eighty-five dollars (\$85) per month to each eligible employee who participates in the Deferred Compensation Plan. To be eligible for this Deferred Compensation Incentive, the employee must contribute to the deferred compensation plan as indicated below.

Employees with Current Monthly Salary of:	Qualifying Base Contribution Amount	Monthly Contribution Required to Maintain Incentive Program Eligibility
\$2,500 and below	\$250	\$50
\$2,501 – 3,334	\$500	\$50
\$3,335 – 4,167	\$750	\$50
\$4,168 – 5,000	\$1,000	\$50
\$5,001 – 5,834	\$1,500	\$100
\$5,835 – 6,667	\$2,000	\$100
\$6,668 and above	\$2,500	\$100

Employees who discontinue contributions or who contribute less than the required amount per month for a period of one (1) month or more will no longer be eligible for the eighty-five dollar (\$85) Deferred Compensation Incentive. To reestablish eligibility, employees must again make a Base Contribution Amount as set forth above based on current monthly salary. Employees with a break in deferred compensation contributions either because of an approved medical leave or an approved financial hardship withdrawal will not be required to reestablish eligibility. Further, employees who lose eligibility due to displacement by layoff, but maintain contributions at the required level and are later employed in an eligible position, will not be required to reestablish eligibility.

- B. Maximum Annual Contribution: All of the employee and First 5 Contra Costa contributions set forth in Subsections A and B will be added together to ensure that the annual maximum contribution to the employee's deferred compensation account does not exceed the annual maximum contribution rate set forth in the United States Internal Revenue Code.

C. Deferred Compensation Plan (IRC 457) Loan Provision: Employees who participate in the Deferred Compensation program are eligible to borrow funds from their Deferred Compensation account. Refer to the County Employee Benefits information online at www.co.contra-costa.ca.us.

12. Professional Development and Training

- A. Career Development Training Reimbursement: First 5 Contra Costa provides educational assistance reimbursement to up to \$500 per year for eligible employees, with Executive Director approval.
- B. Management Development Policy: First 5 Contra Costa may elect to pay the cost of employees' attendance at professional conferences or trainings as they relate to an employee's job function, with Executive Director approval.
- C. Memberships, Subscriptions, Dues: First 5 Contra Costa may elect to pay the cost of memberships, subscriptions, etc. as they relate to an employee's job function, with Executive Director approval.
- D. Executive Director Memberships, Subscriptions, Dues: First 5 Contra Costa's Executive Director is eligible for up to \$825 reimbursement, in each 2 year period, for memberships, subscriptions, etc.

13. Mileage Reimbursement

- A. Mileage Reimbursement: First 5 Contra Costa will pay a mileage allowance for the use of personal vehicles on First 5 Contra Costa business at the rate allowed by the Internal Revenue Service (IRS) as a tax deductible expense, adjusted to reflect changes in this rate on the date it becomes effective or the first of the month following announcement of the changed rate by the IRS, whichever is later.

14. Executive Director Automobile Allowance

- A. First 5 Contra Costa's Executive Director receives a \$300 monthly car allowance.



Monday December 8, 2014

Agenda Item 13.0

Communications:

- a. First 5 CA Association October 2014 Briefings
- b. A New Vision for Rumrill Boulevard



First 5 Briefings October 2014

Association Meeting October 22, 2014

Moira Kenney and Association President John Sims welcomed new Interim Executive Director Sharon Baskett (Riverside).

Association Updates

Summit Feedback

Moira Kenney reported that 210 First 5 staff from 51 county commissions attended the Summit in Lake Tahoe. She noted that peer-to-peer networks around evaluation and fiscal topics are being re-engaged. There is also interest in potentially alternating between all-staff summits and convenings with evaluation and fiscal tracks every other year.

Updates from Executive Committee Meeting

John Sims reported that at their meeting on October 21, the EC discussed the commissioner meeting which is scheduled for Tuesday, February 10, 2015 from 12 – 5PM during the preconference day for the First 5 California Summit in Sacramento. There is interest in a 2015 advocacy day - Christina Altmayer and the Advocacy Committee will work with First 5 California to determine whether this could take place the morning of February 10.

The Association will also reapply for an AmeriCorps grant, and will reach out to county commissions to determine interest.

Lastly, John reported that the EC approved a \$30,000 contract with strategic communications consultant PR & Company. The focus will be on framing the Association's message for Sacramento and elected officials. The Association will engage the Communications Committee and Advocacy Committee in this work.

New Help Me Grow Consultant

Moira reported that the Association is working with First 5 California to support the development and potential expansion of Help Me Grow efforts, including policy and evaluation. Moira introduced Patsy Hampton, who will join the Association as a consultant focusing on developmental screening policy on November 1.

Dental Policy Agenda Setting

Moira Kenney introduced Jenny Kattlove of The Children's Partnership, which is a national child advocacy organization that works with partners to examine best practices and identify policy and program solutions.

Jenny provided an overview of opportunities to improve the oral health of young children in California, including funding for a State Dental Director, the Pediatric Oral Health Action Plan, and outreach to families of young children. Her PowerPoint presentation is available here: <http://first5association.org/wp-content/uploads/2014/10/JKattlove-Oral-Health-Policies-F5-Association-mtg-102214.pdf>.

Association members then engaged in discussion regarding oral health policy and partnership opportunities, and challenges faced by communities. Key opportunities for county commissions include the following:

- Provide TA to keep counties informed of what is happening around the state that counties can take advantage of.
- Facilitate peer-to-peer conversations to engage counties
- Collect better information regarding connections to other early interventions, i.e.

determine how many home visiting programs include oral health education.

- Message county commission investments and successes more effectively.
- Examine DentiCal utilization rates and expenditures per capita to then examine what the components of a successful, integrated county system.
- Educate providers to ensure consistent messaging.

Commissions reported on their current activities to find sustainability for their oral health partnerships:

- First 5 Humboldt is finalizing their oral strategic plan.
- Ventura's FQHCs have been successful in billing DentiCal.
- San Francisco is collaborating with public health nurses around oral health interventions.

Information about the Association's four policy areas, including oral health, can be found here:

<http://first5association.org/wp-content/uploads/2014/09/First-5-Association-Policy-Areas-092414.pdf>

Report from the State Commission

Camille Maben reported that planning for First 5 California's February summit is well underway. Confirmed keynote speakers include Neera Tanden, President of the Center for American Progress, and Dr. Nadine Burke Harris, founder and CEO of the Center for Youth Wellness. Workshops will focus on poverty, early trauma, and early brain development.

Camille and Sarah Neville-Morgan then engaged in conversation with county commissions regarding the Child Signature Program, noting that the current allocation is due to sunset in June of 2015. Counties raised the following key concerns that should be addressed in any future program:

- Commissions are eager to see First 5 CA focus on systems-improvement, rather than specific site-level investments that are not sustainable.
- The QRIS Matrix should be the guide for any new partnership.

- Family engagement and infant-toddler level supports remain under-supported, but commissions were not in agreement about how best to address these needs.
- Future investments need to be spread more equitably across counties.

First 5 California will continue to engage with county commissions regarding program elements, principles of engagement, and communications with executive directors.

California Poverty Measure

Sarah Bohn and Caroline Danielson of the Public Policy Institute of California presented an overview of the California Poverty Measure (CPM), which accounts for both family earnings and safety net resources and adjusts for work expenses and housing costs. Using the CPM, 25 percent of California's children are in poverty. An additional 26 percent of children live in households that are "near poor." Poverty rates, earnings, and the role of safety net resources vary by region, with LA and Orange counties containing larger shares of children in poverty. But most poor children live in "working poor" families, with one or more working adults. Association members engaged in discussion about the findings. Updated CPM data will be released annually; members noted that this is exciting since data about trends are more useful for policy makers than point-in-time studies.

The presentation is available here:

<http://first5association.org/wp-content/uploads/2014/10/PPIC-child-poverty-PPT-10-22-2014.pdf>

The PPIC report on Child Poverty and the Social Safety Net in California is available here:

http://www.ppic.org/main/publication_quick.asp?i=1114

State Commission Meeting October 23, 2014

Please note: all the materials from the State Commission meeting are available on the First 5 CA website at:

http://ccfc.ca.gov/commission/Meetings/meeting_handouts_2014-10.html

Commissioners Present:

George Halvorson, Chair
Conway Collis
Muntu Davis
Kathryn Icenhower
Casey McKeever
Ex Officio Member: Jim Suennen

Executive Director Report

Camille Maben provided the following updates to the State Commission:

- She has now visited 14 counties and continues to be inspired by the local work. She highlighted the joint Commission meeting with Alpine, Inyo and Mono; Santa Cruz's Baby Gateway program which has reduced ER visits; Del Norte's Wonder Bus; and Ventura's healthy choices for kids program with local restaurants.
- The State Commission has added four new staff since the April Commission meeting.
- California has submitted an application for the Federal Preschool Expansion Grants, which would bring in \$35M a year for four years for 3,700 new and improved spaces. First 5 CA would receive \$850K (total over four years) for parent engagement and teacher training.
- Camille also described the upcoming process for reaching out to counties for planning the future of the Child Signature Program as well as Evaluation efforts.
- Partnerships with First 5 CA continue to grow, especially in the area of shared policy interests. The meetings we co-hosted with ECE leaders during the budget negotiations led to greater clarity that our role as a voice for quality investments. Advocates and other partners are clearly noticing that First 5 has a clearer identity, and real unity around this issue of ensuring high-quality benchmarks for our investments, and that is changing the way First 5 is engaged at all levels.
- We are also partnering in conversations about the future of our shared investments in the Child Signature Project. Local commissions are committed to a co-funding approach. This planning together is perhaps more important than ever, as funds are over-committed, and strategic choices will be the order of the day in the years to come.
- The Association will be ramping up its strategic messaging work on our four policy areas.
- We will be convening our county Commissioners at the February Summit. This pre-conference convening will focus on the ways county commissioners are providing leadership on these four areas, and explore ways we can engage all Commissioners in this critical work on policy that will sustain and spread First 5 efforts as our funds decline.
- We are partnering with the David and Lucile Packard Foundation to study First 5 local investments in the family support field to ground the policy work. We are finalizing a first study that assesses the spread of our programs, the best practices in parent education and family engagement, and the connections between family support and early learning.

Commissioners expressed an interest in a presentation on our Family Support study.

Association Report

Maira Kenney reported on the following:

DHCS Request for Funding to Support Dental Outreach

Rene Mollow from the Department of Health Care Services presented the request for \$8M to support dental outreach to families aged 0-3 with a child who has not seen a dentist in the past year. The proposed campaign would include a mailer and other materials costing \$812K and would expect to generate \$16M in increased Denti-Cal usage.

Commissioners expressed their dismay that this request was included in the Governor's Budget. While these requests were at some level understandable in the years of state recession, the state should not be turning to First 5 when their funds are increasing, and ours are rapidly declining. Commissioners also agreed that these services are important, but encouraged the Department to look to other sources – such as the ACA outreach funds – to accomplish this same goal.

Moira Kenney, Karen Pautz, and Christina Altmayer all made comments encouraging the Department to work more closely with county commissions to understand the barriers to accessing care – including the availability of dental providers with the training needed to serve young children.

The Commissioners declined to make a motion on this item. As a result, funds will not be made available for this project.

Commission Meeting Calendar for 2015

The following dates were confirmed for 2015:

January 22, 2015 – Sacramento
 April 23, 2015 – Sacramento
 July 23, 2015 - Sacramento
 October 22, 2015 – Burbank

State Board of Equalization (BOE) Audit

Frank Furtek and Jennifer Clark presented a request for \$100,000 item on a private audit. Their presentation noted the 600% increase in administrative costs over the last 10 years and the failure of the BOE to provide adequate explanation of these expenditures. The staff also acknowledged the significant efforts of the Association and the

county commissions – particularly First 5 LA and the Children and Families Commission of Orange County – to pursue this matter.

Commissioner Collis noted that there have been conversations on this issue for more than eight years, and that it may well be time to create some friction. While he supports the legislative action to request information, he is concerned that there is a need for independent verification of the allocations and the hours being utilized by the various classifications.

Commissioner Halvorson raised concerns that the Commission does not have the standing to request an audit.

Commissioners then discussed the likelihood that the BOE would comply with the request, and the timing of such a request – either before or after the conclusion of the current process requested by the legislature.

Before the Commission voted, Commission Collis noted that it is clearly time to show that we are serious about “protecting the limited resources dedicated to children 0-5.” The Commission then voted to approve the funding.

Evaluation of Child Signature Program (CSP) 1

Sarah Neville-Morgan and David Dodds presented the Year One CSP evaluation, including the following highlights:

- CSP successfully targets children at high-risk of school failure in low API catchment areas.
- The racial and ethnic background of the children enrolled in CSP programs reflects the diversity of the state as a whole.
- Dual-language learners make up 55% of the CSP-enrolled children, with Spanish-speaking children making up more than 80% of these DLLs.
- Seven percent of CSP teachers hold graduate degrees, 37% have a bachelor's degree, and 25% have an associate's degree.

- Most classrooms meet the following criteria:
ERS global scores of 5 and CLASS domain scores of 5 for Emotional Support, 3 for Classroom Organization, and 2.75 for Instructional Support.
- DRDP results suggest that CSP children make significant gains in nearly all domains.
- Parents report high satisfaction with their children's program.

Alternative Sources for Additional Revenue

Frank Furtek and Jennifer Clark presented a report on possible additional revenue sources to augment the declines in Proposition 10 revenues.

- E-Cigarettes – redefining the statutory definition of tobacco products to include products that include nicotine.
- Marijuana – including early childhood programs in any proposition to legalize marijuana.
- Tobacco – increasing the tobacco tax from 87 cents.
- Specialized License Plates
- Voluntary Contributions on Income Tax Forms
- Requesting Donations in F5CA Advertisements
- Applying for Federal, State and Philanthropic Grants

Commissioners were most interested in the first three options, which are most likely to result in significant revenues. Staff was asked to come back in January with further research on the feasibility of these options and any information on the restrictions on either staff or Commissioners in engaging in conversations on these issues.

A New Vision for Rumrill

BY [ADMIN](#) ON OCTOBER 26, 2014 · [LEAVE A COMMENT](#)

By Tania Pulido

Biking and walking on Rumrill Blvd. is a risk many residents in Richmond and San Pablo take daily.

On October 9th, San Pablo and Richmond, in collaboration with community and county organizations, hosted the first Community Design Workshop for the Rumrill Blvd. and 13th St. corridor redesign. Rumrill, which turns into 13th St. is an unofficial thruway for many in the area.



Residents filled the room at the Lao Center in San Pablo ready and eager to voice their concerns.

But, before that happened, participants had the chance to tour the area.

The bus touring the northern end of the corridor departed from Dover St. Its first stop was the intersection between 13th St. and Esmond St.

The dangers to bicyclists quickly became part of the discussion amongst the group. Cynthia Armour from East Bay Bicycle Coalition who rode her bike from BART to the meeting suggested a lane reduction or a “road diet to slim the road” to make it “more inclusive.” Armour believes it would increase the amount of people who use it.

During the bus ride through the strip, San Pablo City Council member Genoveva Garcia pointed out the construction of three new soccer fields by the intersection of Rumrill Blvd. and Sutter Ave. Afterward, people returned to the center ready to eat and brainstorm a new vision for Rumrill Blvd. and 13th St.

Small tables were arranged around the room, complete with maps and markers for participants. Michelle Rodriguez, from San Pablo Development Services, welcomed everyone and began a PowerPoint presentation to highlight the benefits of healthier streets. The project to remodel the street was initiated in March of this year. Since then businesses, Contra Costa College, the San Pablo Youth Commission, and members of transit along with others have been reached out to.

Each table had the opportunity to present their maps with ideas and concerns. Priscilla Fernandez of San Pablo, works for the West County Regional Group. She said she’d like to establish a sustainable, aesthetically pleasing street. She recommended a three bin system for compost, recycle, and trash, solar powered street lights and a street reflective of the many cultures in Richmond and San Pablo. Fernandez said her goal is to create a better future for her kids and future generations.”



Marco Hernandez, a 17-year-old San Pablo resident and representative of the San Pablo Youth Commission, uses Rumrill Blvd on a daily basis.

“I have to risk my life sometimes just to cross over,” he said. He recommended installing crosswalks every four or five blocks.

Growing up in San Pablo Hernandez said he has experienced violence and the love of community. “I’m happy we’re coming together as a community to make it right,” he said.

The project is not expected to be implemented for years, but the fire has been ignited and the community has responded to the call.

Original article found at:

<http://richmondpulse.org/a-new-vision-for-rumrill/>