



**FY 2016-17**

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## **Evaluation Report**

**Our goal is to enhance the network of support services for families  
with children ages 0 to 5 years.**

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## **Introduction**

The California Children and Families Act (also known as Proposition 10 or “First 5”) was enacted in 1998, increasing taxes on tobacco products to provide funding for services to promote early childhood development from prenatal to age 5. Mono County currently receives approximately \$390,000 from annual allocations, the Small Population County Funding Augmentation, and child care quality funds. To access these funds, First 5 Mono adopts a strategic plan demonstrating the use of Proposition 10 funds to promote a comprehensive and integrated system of early childhood development services.

The Mono County Children and Families Commission, First 5 Mono, was created in 1999 by the Mono County Board of Supervisors to:

- Evaluate the current and projected needs of young children and their families.
- Develop a strategic plan describing how to address community needs.
- Determine how to expend local First 5 resources.
- Evaluate the effectiveness of funded programs and activities.

To fulfill the intent of the creation of First 5 Mono, meet state and local requirements, and evaluate the funded programs for the purposes of continuous quality improvement; First 5 Mono annually produces an evaluation report. This report has evolved over the last 5 years to include indicator data and more details about the investment areas in the First 5 Mono Strategic Plan. With new Small Population County Funding Agreement requirements, this year’s report includes logic models, research questions, findings, and conclusions that were not included in previous years. The new inclusions are intended to help First 5 Mono clarify how report data is used to drive funding decisions and continuous quality improvement. Since the report is in a presentation format, the research questions, findings, conclusions and evaluation for each investment area is included in the introduction in a narrative format.

## **Home Visiting**

(slides 8 & 9)

As the majority of the program-specific evaluation results indicate achievement of the desired outcomes, the commission will continue to fund the Home Visiting program. As part of the continuous quality improvement of the Home Visiting program, new protocols were developed to better collect and evaluate school readiness data. To determine if children whose parents participate in Home Visiting have higher rates of school readiness than the kindergartners as a whole, a kindergarten parent survey was developed. Also, the administration of kindergarten assessment timeline was shifted to assess as close to 100% of the incoming kindergarten class as possible.

Research questions:

Do parents participating in Home Visiting have improved parental knowledge, understanding, and engagement in promoting their children's development?

- Data Source: Home Visiting exit survey (slide 19-22) Finding: Yes Conclusion: The program is achieving this outcome

Does Home Visiting improve screening and intervention for developmental delays, disabilities, and other special needs?

- Data Source: screening data (slide 15) Finding: Yes Conclusion: The program is achieving this outcome

Does Home Visiting improve school readiness?

- Data Source: kindergarten assessments (slide 32) Finding: inconclusive
- Conclusion: While school readiness rates have improved over the last 3 years, the change in the percent of children assessed makes conclusions about these gains impossible. A new procedure to assess incoming kindergartners at kindergarten entry was adopted and moving forward will target achievement of 100% screening rates and thus gain more insight into school readiness trends over time. To help determine if children who were enrolled in Home Visiting have higher rates of school readiness than the whole kindergarten population, a kindergarten parent survey that developed and used with the incoming class kindergarten class of 2017. Results will be reported in the FY 2017-18 Evaluation Report.

Does Home Visiting improve parental knowledge, understanding, and engagement in their children's physical and mental health?

- Data Source: exit survey (slide 19-22) Findings: Yes Conclusion: The program is achieving this outcome

Does Home Visiting improve access to healthcare services for children 0-5?

- Data Source: referrals (slide 14) Findings: Yes Conclusion: The program is achieving this outcome

Do children whose mothers participate in Home Visiting have increased breastfeeding rates?

- Data Source: visit records (slide 16-17) Finding: Yes Conclusion: The program is achieving this outcome

## **School Readiness**

(slides 27 & 28)

As the majority of the program-specific evaluation results indicate achievement of the desired outcomes, the commission will continue to fund the same School Readiness activities. As part of the continuous quality improvement of the School Readiness activities, changes were made to the format of the Mammoth Elementary Kindergarten Round Up . The 2015 Round Up in



Mammoth experimented with a new format with two presentations, one in English and one in Spanish. The format was challenging due to the size of the presentation rooms and flow of parents dropping off children with childcare providers. To improve the event, First 5 worked with Elementary School staff to reformulate the format to match what is done in the other schools in the county—children and families participating together in presentations in each classroom with a Kindergarten teacher. Due to the success of the new format reported by staff and parents, we will continue to offer Round Up in Mammoth Lakes using this format and anticipate that it will lead to increases in participation over time.

#### Research questions:

Is the percent of children “ready for school” upon entering Kindergarten increasing?

- Data Source: Brigance kindergarten readiness assessments (slide 32)
- Finding: Readiness increased to 50% from 38% last year
- Conclusion: Although the percent of kindergarten ready students increased this year, we are cautious to draw the conclusion that this reflects an overall improvement due to the significant difference in the percent of students assessed, 99% this year compared to 66% the previous year. We are instead thinking of the 50% readiness as a baseline which will serve to gauge progress in the future.

Is the percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry increasing?

- Data Source: Summer Bridge Parent Survey (slide 35)
- Finding: Yes, attendance increased to 29% from 21% last year.
- Conclusion: about 30% of incoming kindergartners who attended the Summer Bridge program also attended a preschool program. In subsequent years, data will be drawn from Kindergarten parent surveys to capture a better picture of the kindergarten class as a whole as opposed to the subset that attends Summer Bridge.

Is the percent of children receiving Kindergarten transition support increasing or remaining high?

- Data Source: participation in transition to school activities (slide 30-31)
- Finding: No, down to 69% from 79% last year
- Conclusion: Primarily due to a decrease in participation in Kindergarten Round Up at the largest school in the county, Mammoth Elementary, transition to kindergarten participation decreased from last year. The decrease in attendance was likely due to a new format for the event that did not function as well as hoped. We think that challenges in the 2015 event were shared by word of mouth and may have led to less participation in 2016. We implemented changes in 2017 to improve the format of Round Up in Mammoth and have received preliminary feedback regarding the success of the changes. We hope the success will lead to increased participation in the years to come.

There is also low participation in the Summer Bridge programs in Lee Vining and Mammoth. First 5 Staff will meet with staff at those sites to support implementation of changes to enroll more students. If participation remains low, the Commission will analyze the data to make decisions about ongoing funding during the 2018-19 Strategic Planning process.

Is the percent of entering Kindergarteners assessed for school readiness prior to entry increasing or remaining high?

- Data Source: kindergarten readiness assessments (slide 32)
- Findings: 99% of all kindergartners were assessed compared to 66% the previous year.
- Conclusion: The new protocol to assess kindergartners at kindergarten entry had a positive impact on the percentage of students assessed. The research question needs to be refined in the strategic plan to reflect the change from “prior to entry” to read “at entry”.

## **Child Care Quality**

(slides 43 & 44)

As the child care quality initiative is making significant strides in rating sites, screening children for developmental delays, and impacting the number of available slots in the county, the Commission will continue to invest in this initiative.

As part of the continuous quality improvement of the child care quality investment, we continue to seek to develop coaching capacity so that site directors and family child care operators are able to have support around the areas of the rating matrix that are most pertinent to their site.

Research questions:

Is the percent of children 6 months to 5 years old screened for developmental delays increasing?

- Data Source: completed ASQs (slide 46)
- Finding: yes, 41% of children in participating sites were screened for a developmental delay, up from 0 the previous year.
- Conclusion: Due to implementation of the new IMPACT program which requires sites to provide ASQs to the families of children they serve, there was a 41% increase in children screened for developmental delays at participating sites from last year.
- Is the percent of children served in home childcare settings and childcare centers that exhibit moderate to high quality as measured by a quality index increasing?

Is the percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix high or increasing?

- Data Source: the number of child development permits issued to providers

- Finding: unknown
- Conclusion: Although we sought to access this data through the Child Development Department at the local community college, we were not able to access the data prior to publication of this report.

Is the percent of licensed center and family child care spaces per 100 children high or increasing?

- Data Source: Child Care Portfolio (slide 51)
- Findings: in 2015 17% of children 0-12 with parents in the workforce have a licensed childcare slot available, a decline from 20% in 2012.
- Conclusion: The number of slots available to children in Mono County has decreased dramatically from 56% in 2008. To help change the trend, First 5 partnered with Mono County, Eastern Sierra Unified School District, and the Mono County Office of Education to open two new preschools—one in Bridgeport and one in Benton. First 5 continues to actively participate in the Mono County Child Care Council and with Mammoth Hospital and the Mono County Office of Education to support initiatives to increase the number of child care spaces in Mono County.

## **Oral Health**

(slides 53 & 54)

The oral health needs of young children in Mono County continue to be high with few children accessing regular preventative care and annual screenings. The commission will continue to invest in this initiative to improve oral health for children 0-5.

As part of the continuous quality improvement of the oral health investment, we will target our oral health education to educate parents to access annual dental checkups and preventative care. Additionally we will continue to provide topical fluoride varnish as no community in the county has fluoridated water.

Is the percent of children who regularly access preventive dental care high or increasing?

- Data Source: Sierra Park Dental Data, 2014-16 (slide 78)
- Finding: 20% of patients 0-5 had more than one visit to the dentist in the year, down from 24% the previous year.
- Conclusion: Using the data of how many children went to the dentist more than one time on the year; we get a picture of how many are able to have work done in addition to annual cleaning and check-ups. Using this as a metric, we know 20% of children needed additional preventative care, but do not know how many of the children who needed additional care this includes. Thanks to new collaboration with the fiscal department at Mammoth Hospital, this year's data is stronger than it was in the past.

With continued support from Mammoth Hospital, we will be better able to track access to oral health care over time.

Is there a low percent of children at Kindergarten entry with untreated dental problems?

- Data Source: Kindergarten Round Up Oral Health Checks (slide 78)
- Finding: 18% of the oral health checks completed at kindergarten round up indicated the child had untreated caries (cavities), up from 5% last year
- Conclusion: While the percent of untreated caries at kindergarten entry increased, it is hard to draw conclusions based on the low reporting rate of 35%. First 5 is working with the Mono County Office of Education to ensure school district compliance with their reporting requirements for these forms to support more complete data.

Is the percent of children ages 1 or older who receive annual dental screenings high or increasing?

- Data Source: Sierra Park Dental Data, 2014-16 (slide 78)
- Finding: Finding: 17% of patients had an annual exam and cleaning, 49% had an exam and cleaning in 2 of three years and 34% had one exam and cleaning in 3 years.
- Conclusion: Only 17% Children 0-5 visit the dentist annually, but more than half (56%) are seen at least annually. First 5 will continue to work through our oral health education efforts to support higher percentages of children having at least one visit to the dentist a year.

## **Family Behavioral Health**

(slide 59)

Families have more information about parenting and child development as a result of the Family Behavioral health investment. The Commission will continue to invest in this initiative. As part of the continuous quality improvement of the Peapod program, outreach efforts to ensure as many families as possible participate will continue. We are also working to ensure that information about parenting and child-development is included in groups as a part of each 10 week session cycle.

Research question:

Is the percent of children in households where parents and other family members are receiving child-development and parenting education high or increasing?

- Data Source: number of children participating in playgroups (slide 61)
- Finding: 29% of children
- Conclusion: Due to participation in Peapod, children lived in households receiving child-development and parenting education.



## **Child Safety**

(slide 70)

Families have more information about child safety as a result of the Safe Kids investment. The commission will continue to invest in this initiative.

As part of the continuous quality improvement of the Safe Kids Mono Partners work, outreach efforts to ensure as many families as possible participate in Health & Safety Fairs will continue. The Safe Kids coordinator is working to leverage resources to encourage partners to invest in safety materials and apply for grants to provide to families in our county.

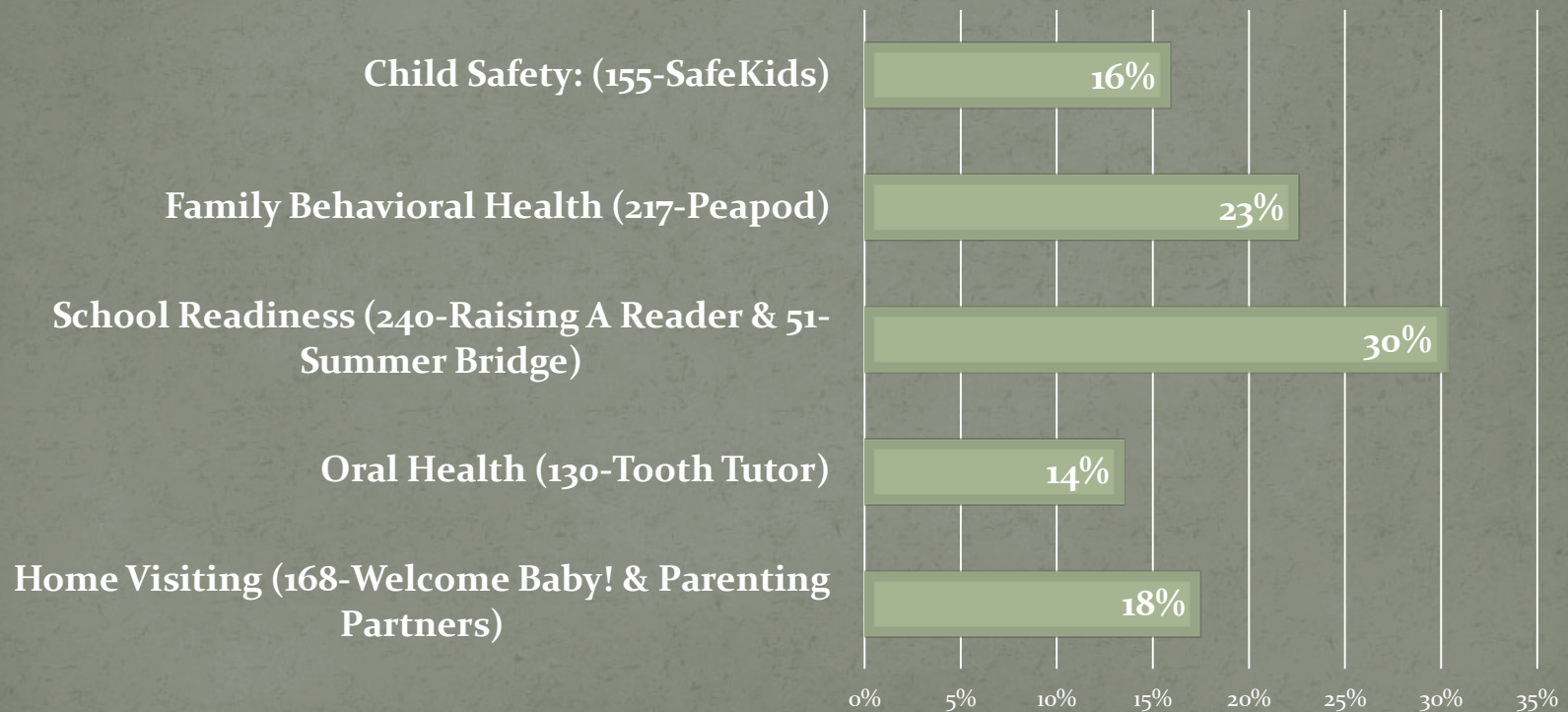
Research question:

- Are families county-wide are informed about safety issues pertaining to young children and accessing Car Seat Safety Checks, Health and Safety Fairs, and Gun Safety Locks?
  - Data Source: Health and Safety Fair Participants (slide 71)
  - Finding: 24% of the 0-5 population and a parent
  - Conclusion: Due to health and Safety fair events, families across the county were informed of safety issues and accessed safety materials.

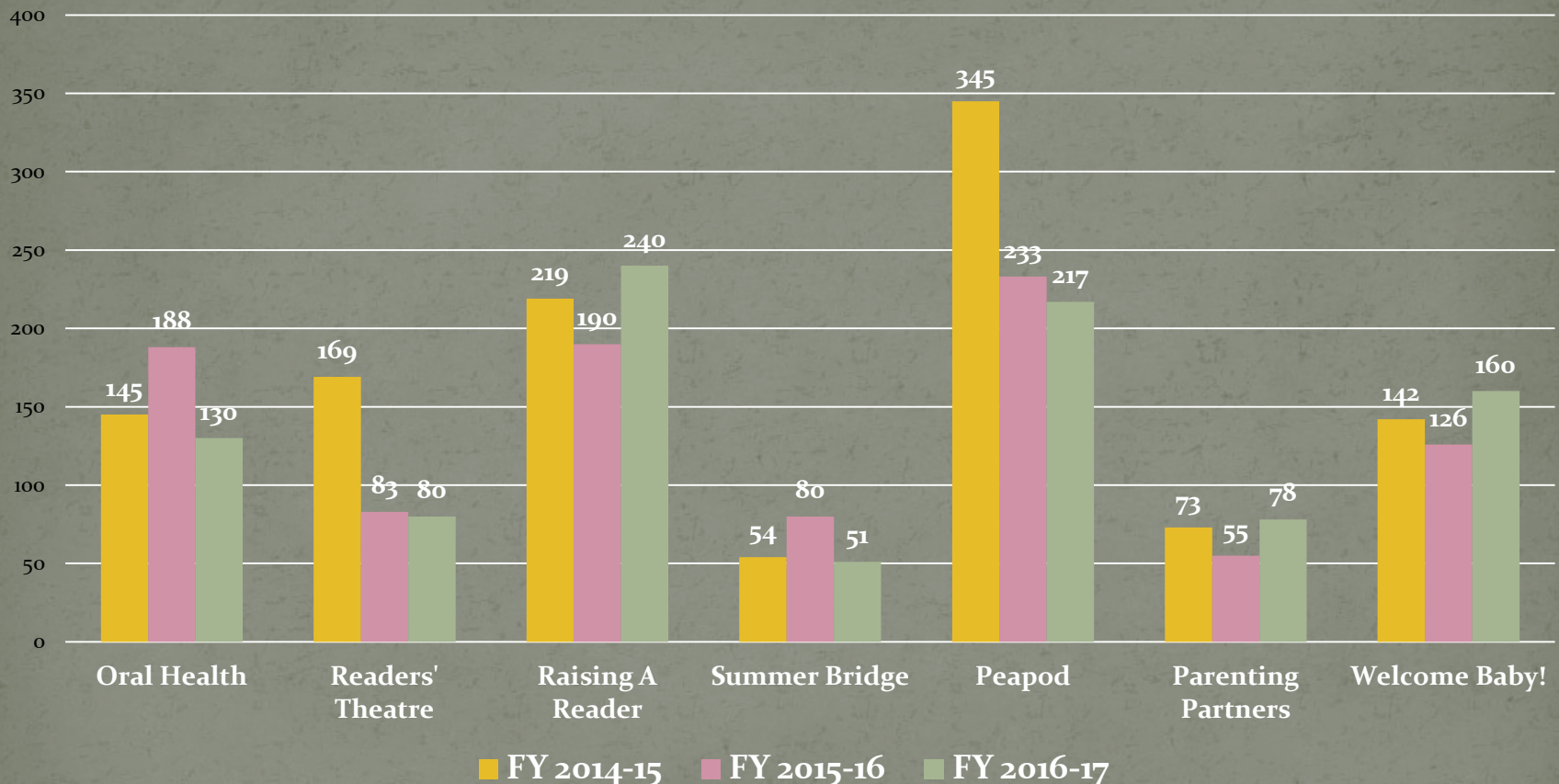
Using the evaluation, data, findings and conclusions above, First 5 Mono County will continue to fund its currently funded programs while implementing measures to continuously improve quality. First 5 Mono will also continue to work with community partners to leverage supports around the investment areas and the well-being of children birth to five and their families. The Commission will consider implementing changes to funding allocations with this data and that of subsequent years in the 2018-19 Strategic Plan revision process.

# Children's Participation in First 5 Mono Programs by Investment Area

949 children, potential duplicates



# Children's Participation in First 5 Mono Programs 2014-15 to 2016-17



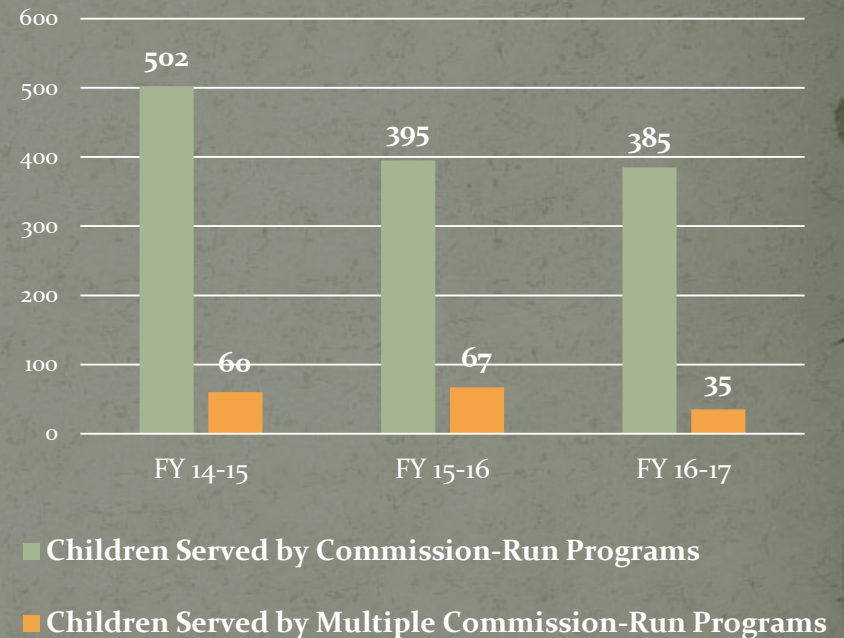
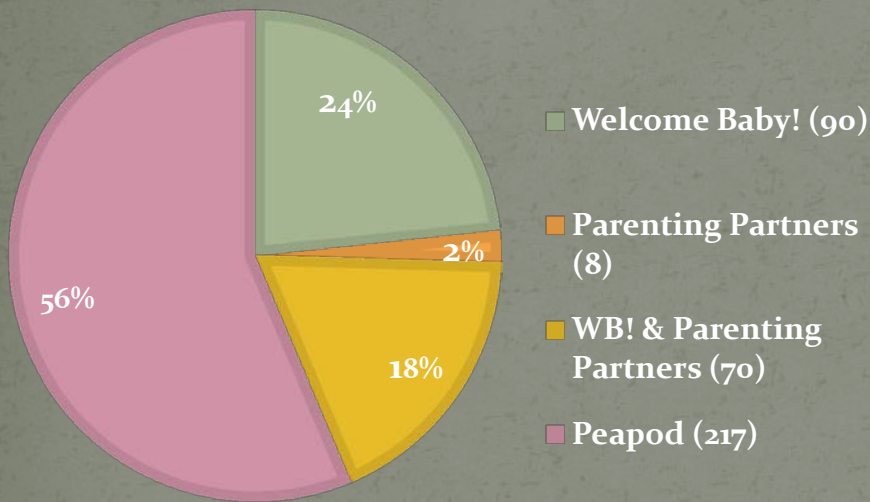
While program participation varies year to year, overall First 5 programs maintain service to a high percentage of our county's youngest children.



# Children's Participation in Commission-Run Programs

Total Children: 385

Children served by multiple programs: 35, 9%



Over the last three years, children's participation in First 5 programs varied by about 150 children—around 20% of the birth to 5 year old population. The highest percent of children were served through Peapod Playgroups, as was true for the previous three fiscal years.

# Home Visiting

**Investment: \$145,132**

## Welcome Baby!

Funded & conducted by First 5 Mono, funding support from:

- First 5 California, Small County Augmentation (\$115,097)
- Breast pump attachment fees (\$35)

## Parenting Partners

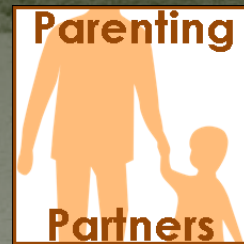
Conducted by First 5 Mono

Funding Partner: Mono County Department of Social Services, Child Abuse Prevention, Intervention, and Treatment (CAPIT) Grant (\$30,000)





# Rationale



Home Visiting is included in the First 5 Mono Strategic plan because it is a nationally recognized strategy to improve outcomes for children and families. Home Visiting is a strategy that has been demonstrated to improve family functioning, decrease child abuse, and improve school readiness and literacy.

In partnership with other community agencies, First 5 also provides lactation services through its Home Visiting efforts. Such services greatly enhance the will and ability for moms to sustain breastfeeding, positively contributing to overall childhood health.

Starting in FY 2016-17 our Home Visiting program began offering visits to Spanish speaking childcare providers using a Parents as Teachers curriculum specifically designed to be used with providers.

Supporting research based on the Parents as Teachers Curriculum used in First 5 Mono programs includes:

Promising Practice Local Model: Modified Parents as Teachers Evidence-based framework:  
Pfannenstiel, J. C., & Zigler, E. (2007). Prekindergarten experiences, school readiness and early elementary achievement. Unpublished report prepared for Parents as Teachers National Center.

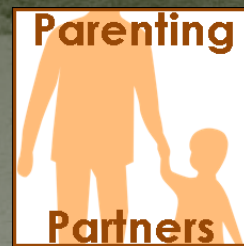
Snow, C.E., Burns, M., and Griffin, P. (Eds.). (1998). Preventing reading difficulties in young children. Washington, DC: National Academy Press.

Parents as Teachers has a long history of independent research demonstrating effectiveness. For more details, refer to the Parents as Teachers evaluation brochure or Web site, [www.parentsasteachers.org](http://www.parentsasteachers.org).



# Home Visiting

Parent Educator led parent-child activities using  
Parents as Teachers curriculum



## Activities:

- **Welcome Baby!:** Families with children prenatal to 12 months old. Nine, one-hour home visits—more as needed for families with high needs.
- **Parenting Partners:** Families with high needs with children 1-5 years old. Three, one-hour home visits—more as needed for families with high needs.
- **Spanish speaking Childcare Provider Visits:** At least three, one to one and a half hour visits in childcare homes with information on activities and how they relate to child development.

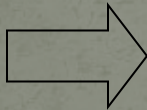
## Objectives:

- Facilitate parents' role as their child's first and most important teacher
- Provide information on typical child development
- Stimulate child development by providing age appropriate activities
- Increase and support breastfeeding and literacy activities
- Link families to community services and support access to services
- Conduct developmental screenings and refer families to early intervention programs for assessment
- Provide culturally competent services in Spanish and English
- Facilitate optimal family functioning
- Decrease child abuse and neglect

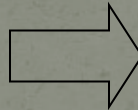


# Logic Model

Input:  
Funding of  
\$145,132

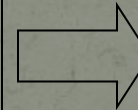


Activities:  
Home Visits  
with families  
and providers



## Outputs (process measures):

- Percent of children in households where parents and other family members are receiving child-development and parenting education.
- Percent of children 6 months to 5 years old screened for developmental delays.
- Percent of children where breastfeeding is successfully initiated and sustained.
- Number and percent of prenatal women who receive dental hygiene education.
- Number and percent of children in families provided with information about appropriate community services.



## Outcomes (outcome measures):

- Improved parental knowledge, understanding, and engagement in promoting their children's development.
- Improved screening and intervention for developmental delays, disabilities, and other special needs.
- Improved school readiness.
- Improved parental knowledge, understanding, and engagement in their children's physical and mental health.
- Improved access to healthcare services for children 0-5.
- Increased breastfeeding rates.





# Research questions, data sources, findings and conclusions

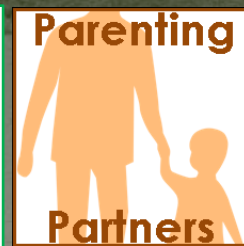
- Do parents participating in Home Visiting have improved parental knowledge, understanding, and engagement in promoting their children's development?
  - Data Source: Home Visiting exit survey (slide 19-22)    Finding: Yes    Conclusion: The program is achieving this outcome
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- Does Home Visiting improve school readiness?
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- Does Home Visiting improve access to healthcare services for children 0-5?
  - Data Source: referrals (slide 14)    Findings: Yes    Conclusion: The program is achieving this outcome
- Do children whose mothers participate in Home Visiting have increased breastfeeding rates?
  - Data Source: visit records (slide 16-17)    Finding: Yes    Conclusion: The program is achieving this outcome



# Evaluation Results

As the majority of the program-specific evaluation results indicate achievement of the desired outcomes, the commission will continue to fund the Home Visiting program. As part of the continuous quality improvement of the Home Visiting program, new protocols were developed to better collect and evaluate school readiness data. To determine if children whose parents participate in Home Visiting have higher rates of school readiness than the kindergartners as a whole, a kindergarten parent survey was developed. Also, the administration of kindergarten assessment timeline was shifted to assess as close to 100% of the incoming kindergarten class as possible.

# Home Visiting Referral Sources



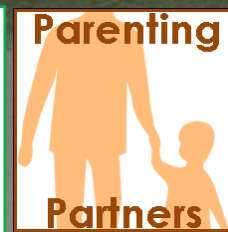
Referral Source	Number	Percent
Mammoth Hospital Labor & Delivery	29	42%
First 5 Home Visitors	8	12%
Childbirth Education Class	6	9%
Self	6	9%
Unknown	5	7%
Mono County Child Protection Services	2	3%
Mammoth Hospital Pediatrics	2	3%
Mammoth Hospital Women's Clinic	2	3%
Mono County Behavioral Health	1	1%
Mono County Public Health	1	1%
Childcare Quality System	1	1%
Early Start	1	1%
Mammoth Hospital Registered Dietitian	1	1%
<b>Total</b>	<b>69</b>	

The majority of referrals to Home Visiting came from Mammoth Hospital's Labor & Delivery Department (42%) and from First 5 Home Visitors' recruiting (12%).

First 5 provided 108 New Parent Kits to Mammoth Hospital Labor & Delivery, which were given to new parents.



# Visits Provided & Families Served



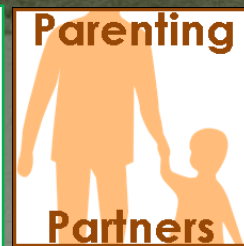
Visit Type	FY 2014-15	FY 2015-16	FY 2016-17
Prenatal Home Visits	34	16	25
Birth-5 Home Visits	655	708	627
<b>Total Visits</b>	<b>689</b>	<b>724</b>	<b>652</b>

	FY 2014-15	FY 2015-16	FY 2016-17
New Families Enrolled in WB!	86	83	69
Births to Mono County Residents*	149	143	135
Percent of Babies in WB!	58%	58%	51%
Families Receiving Only WB! Visits	122	85	84
Families Receiving Only Parenting Partners Visits	35	14	7
Families Receiving Both WB! & Parenting Partners Visits	20	41	50
<b>Total Families Served</b>	<b>177</b>	<b>140</b>	<b>141</b>

\*Source: California Department of Finance, actual for 2014, projected for 2015 & 16  
FY calculations use the calendar year projections of the year the FY begins (e.g.: 2014 for FY 2014-15)



# Demographics



Child's Race and Ethnicity			
Non-Hispanic	99	American Indian	6
		White	86
		Multi-race	7
Hispanic	69	Multi-race	49
		White	20

The demographics of children in Home Visiting closely parallel those of the general population with approximately 7% less Hispanic and 2% more American Indian children served in our program than are in the general child population. (data source: kidsdata.org-Mono County Child Population 2016)

## Families with High Needs\*

60, 43%

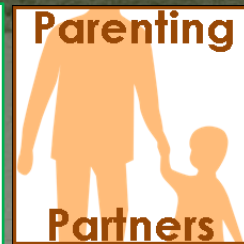
\* A family is considered High Needs using the national standards for Home Visiting if they fall into *more than one category* of: low income or education, child or parent with a disability, homeless, teen parent, substance abuse, foster parents, unstable housing, incarcerated parent, very low birth weight, domestic violence, recent immigrant, death in the immediate family, child abuse or neglect, or are an active military family.

## Number of Families Reporting:

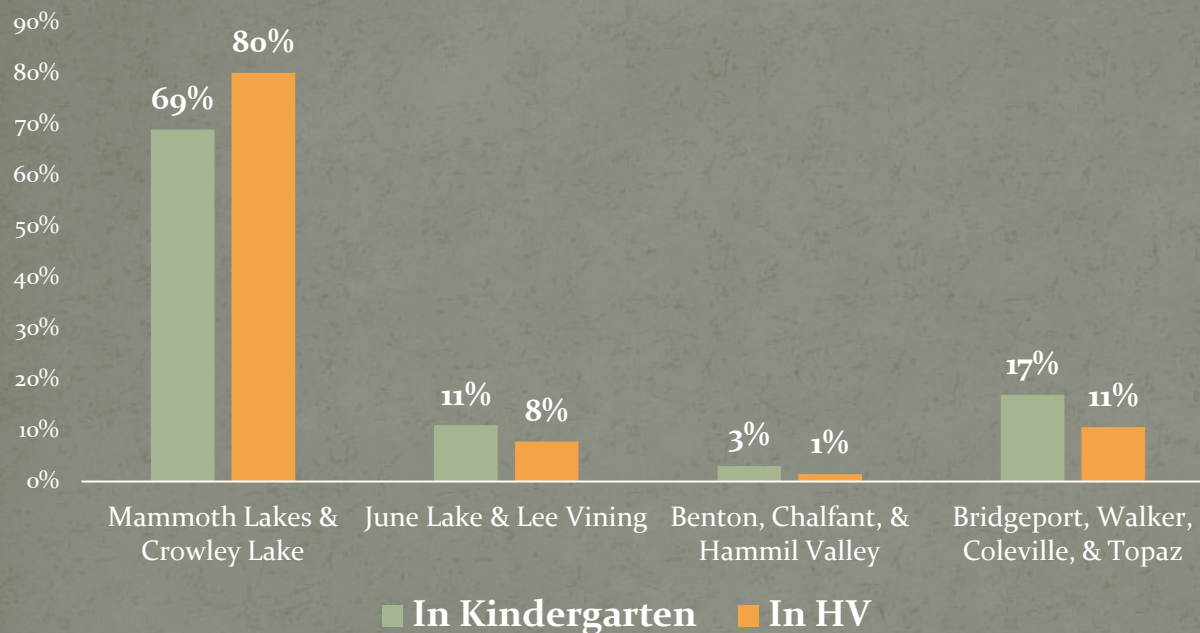
Low income	71
Low Education	29
Child with a Disability	18
Teen Parent	8

# Family's Town of Residence

N= 141



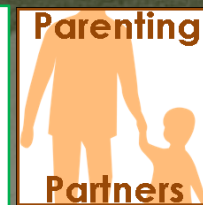
Percent of Kinders & Percent of Families in Home Visiting



Home Visiting serves families in proportional numbers in each area of the county as children enrolled in kindergarten.

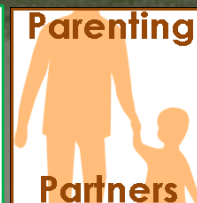


# Resource Referrals



	FY 2014-15		FY 2015-16		FY 2016-17	
Community Resource	Referred	Accessed	Referred	Accessed	Referred	Accessed
Adult Education/Job Training	5	1	9	4	8	1
Dental Services	2	1	6	2	1	0
Early Intervention	12	8	14	8	9	6
Early Education Setting & General Childcare/Preschool Information	9	4	14	7	8	3
Financial Resources	1	1	6	2	4	2
Food Resources (WIC, IMACA, DSS)	8	3	14	3	0	0
General Parenting Support, Community Participation, or Social Support Network (Parenting Partners, Peapod Playgroup, Health & Safety Fair)	56	18	41	17	41	11
Health Insurance	1	0	1	1	0	0
Language/Literacy Activities	44	22	15	6	6	1
Medical Services	20	10	13	10	7	2
Mental Health Services	9	5	19	7	9	5
Subsidy for Child Care/Preschool	5	3	4	1	1	0
Domestic Violence Services	-	-	1	1	1	1
Other (transportation services & online resources)	12	1	7	3	2	0
<b>Total</b>	<b>184</b>	<b>77</b>	<b>150</b>	<b>72</b>	<b>97</b>	<b>32</b>
<b>% Referrals Accessed</b>	<b>42%</b>		<b>48%</b>		<b>33%</b>	

# Developmental Screenings



Ages and Stages Questionnaire Screening Rate: 44% (75 of 171 children)	
Developmental Domain	Suspected Delays or concerns (n=44)
Communication	16 (36%)
Fine Motor	5 (11%)
Gross Motor	10 (23%)
Intellectual	7 (16%)
Personal/Social	6 (14%)

Home Visitors screened 75 children (44% of children enrolled in Home Visiting). Of the 75 children screened, 33 were identified as having a delay or concern (44%).

Most suspected delays were addressed by suggesting activities which parents completed with their children. Others were referred by home visitors and parents for formal assessments through early intervention services administered by Kern Regional Center or Mono County Office of Education. Of the 10 children who received a referral to early intervention, 6 received services, 8% of all children screened.

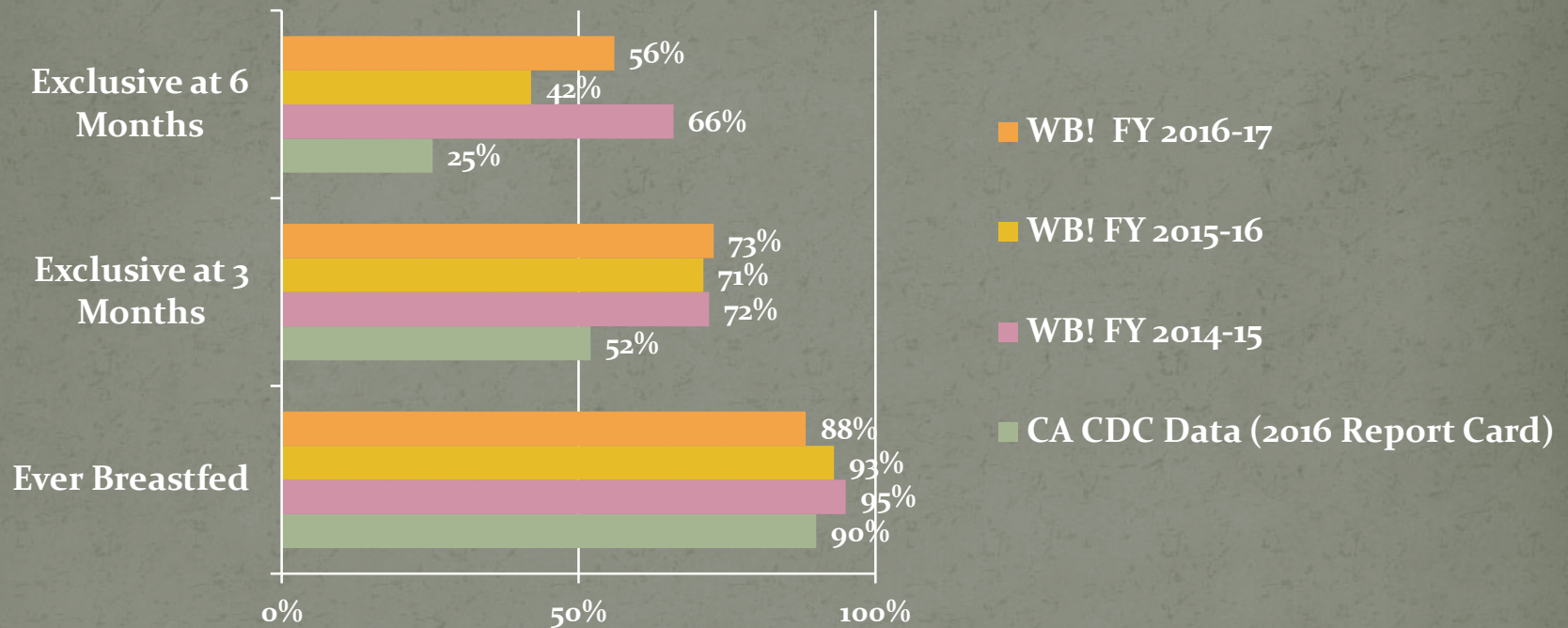
There were also 12 children served who already had an identified disability or condition and were not screened in the year since their development was already being assessed.



# Breastfeeding



CA and Mono County Breastfeeding Rates



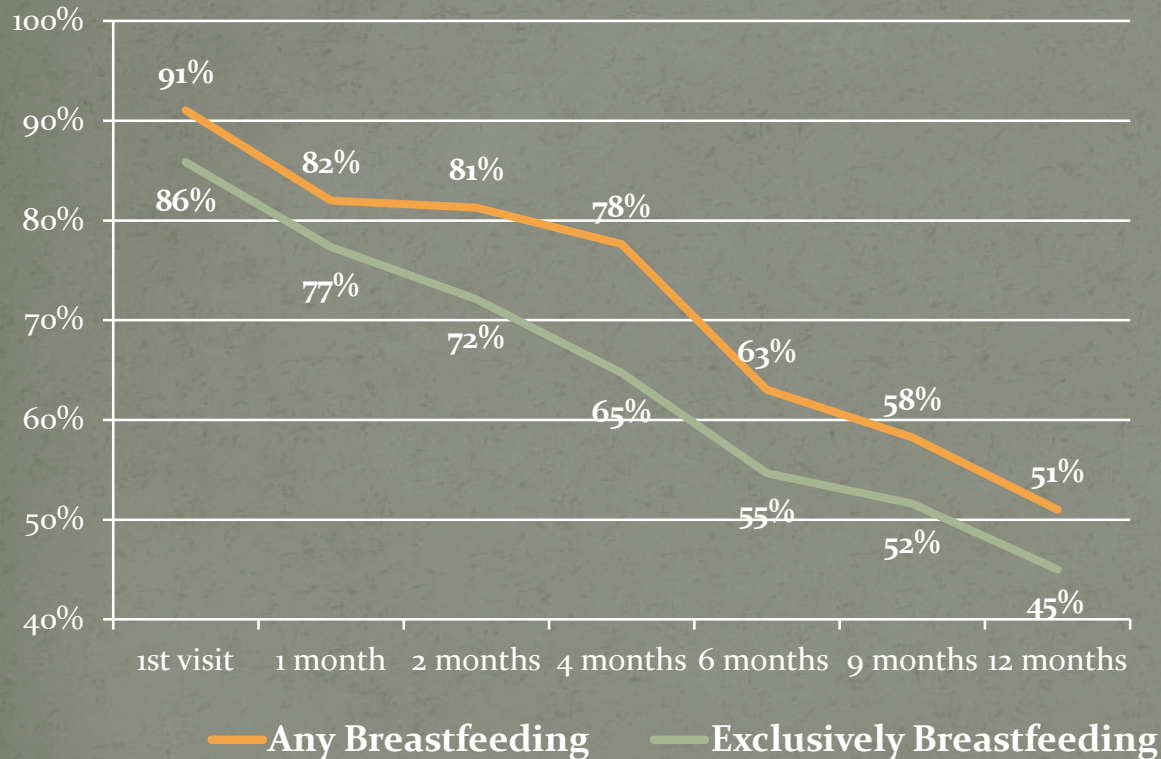
Mothers in First 5 Mono's Welcome Baby! program are more likely to continue to exclusively breastfeed than the general population in California.

Source: Centers for Disease Control, <https://www.cdc.gov/breastfeeding/pdf/2014breastfeedingreportcard.pdf> / and Welcome Baby! program data

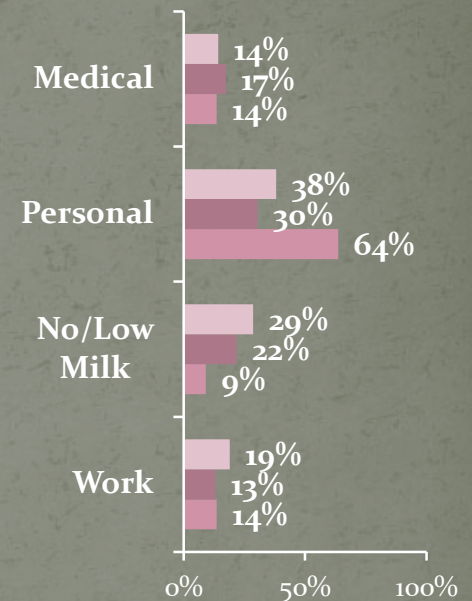
# Welcome Baby! Breastfed Babies



Average Breastfeeding Rates  
FY 2014-15 to FY 2016-17



Reasons for Stopping Breastfeeding



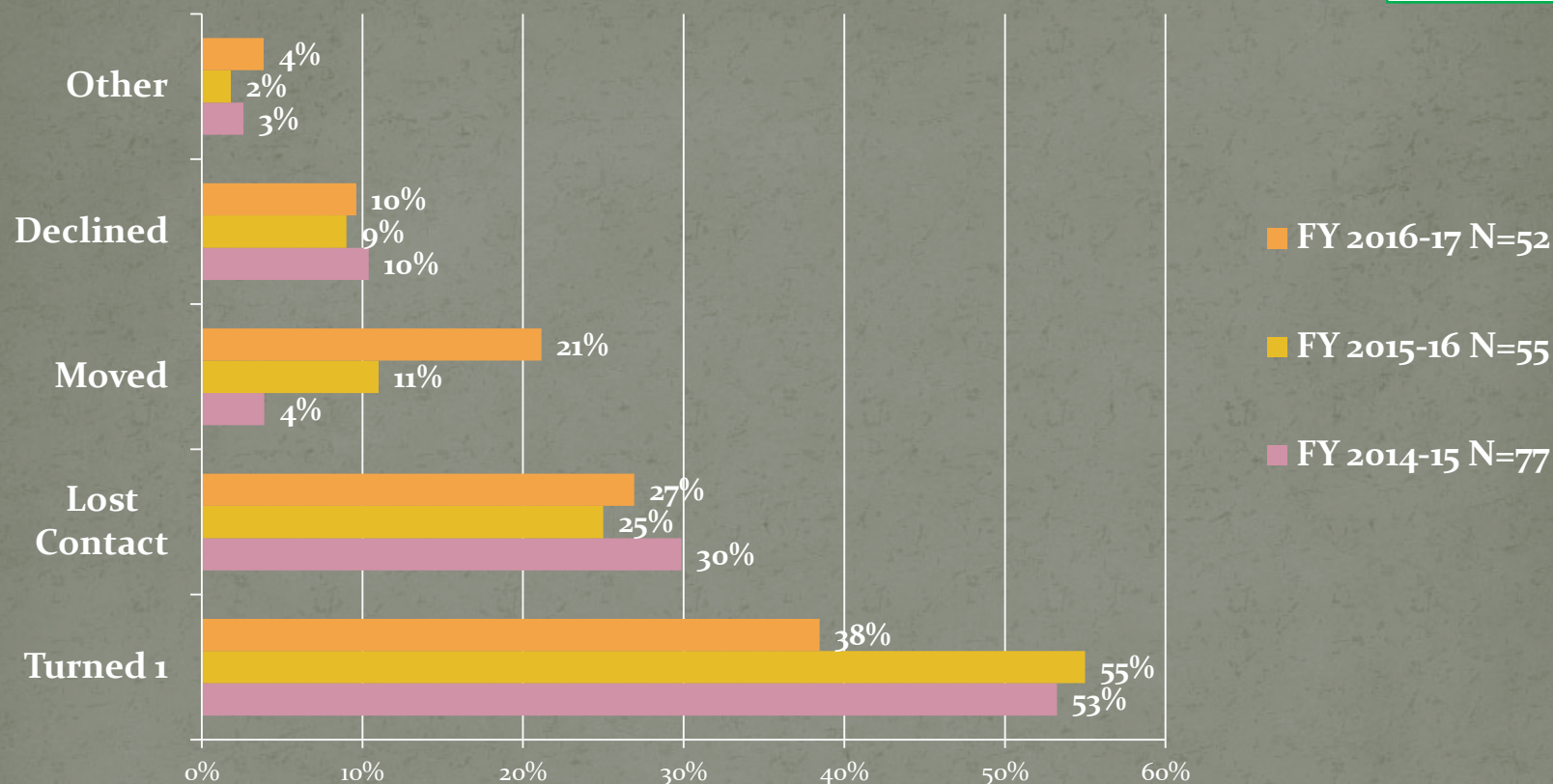
■ FY 2016-17 N=21  
■ FY 2015-16 N=23  
■ FY 2014-15 N=22

The three year average of mothers in Welcome Baby! who breastfed to 12 months was 51%.

\* Exclusive Breastfeeding is defined as a child whose only milk source is breast milk.



# Welcome Baby! Exit Reason



17% less families exited because the child turned one and 10% more families exited because they moved. Other reasons for exiting Welcome Baby! remains similar over the last three years.

# Welcome Baby! Exit Survey



Parents As Teachers Survey, N=26	Strongly Agree
I feel comfortable talking with my parent educator.	100%
My parent educator gives me handouts that help me continue learning about parenting and child development.	96%
This program increases my understanding of my child's development.	92%
My parent educator is genuinely interested in me and my child.	92%
Activities in the visits strengthen my relationship with my child.	88%
My parent educator encourages me to read books to my child.	88%
My parent educator and I partner to set goals for my child, myself, and my family.	88%
My parent educator helps me find useful resources in my community.	85%
I feel less stressed because of this program.	73%



# Welcome Baby! Exit Survey



## What about this program has been most helpful to you and your family?

- The brochures and topics covered. (translated)
- The motivation to read to my children more often. (translated)
- The whole program has been very useful, especially the counseling to develop mobility in the body of my daughter. (translated)
- The resources that our parent educator provided, the personal knowledge as a mom that she provided, her comfortableness around my daughter and the wisdom she provided, shared with me from her child education background.
- It gives you the ability to reach out to someone other than medical for support.
- Helping motivate me to alternative ways to parent my children based on their needs! And the encouragement to keep trying.
- The handouts are extremely helpful. My parent educator has helped me find other resources for my child's speech. She's constantly in touch to see how everything is going on with my children.
- A consistent and accurate source of info. I prefer not to search the web. Also having someone in your home that is usually checking out my child's development.
- Having home visits so I don't have to arrange appointments around nap time, meal times, work, etc
- Help with breastfeeding in the early months. Navigating discipline and how we wanted to approach it.

## What suggestions do you have to improve the Home Visiting program?

- In my opinion, I think anything and everything that was taught and advised served me well. (translated)
- I think the program was exceptional. I was extremely happy.
- Educators should provide more town/county information of all available programs, a lot of people have no idea about available resources (WIC, IMACA, etc)

## Additional Comments:

- Mono County needs more childcare options.
- Annaliesa is amazing, very nonjudgmental and encouraging.
- Thank you for the program. It has been a tremendous help to a first time mom.
- I like that Lara gives me advice and also the attention given to my daughter when she plays with her. (translated)
- Annaliesa has been amazing. I hated to move and lose her kindness and expertise. She was very knowledgeable and had a genuine concern for my baby girl and family.

# Parenting Partners Exit Survey

<b>Parents as Teachers Survey</b> N=4 scale of 1 (strongly disagree) to 5 (strongly agree)	Before Average	After Average	Total increase in skill
I know how to meet my child's social and emotional needs.	3.8	4.8	4
I understand my child's development and how it influences my parenting responses.	3.8	4.8	4
I regularly support my child's development through play, reading, and shared time together.	4.8	4.5	none
I establish routines and set reasonable limits and rules for my child.	4.8	4.8	none
I use positive discipline with my child.	4	4.3	1
I make my home safe for my child.	4.3	4.8	2
I am able to set and achieve goals.	3.5	4.3	3
I am able to deal with the stresses of parenting and life in general.	3.3	3.8	2
I feel supported as a parent.	2.8	4.3	6
<b>Total increase in skills</b>			<b>22</b>



# Parenting Partners Exit Survey

Parent Satisfaction using Parents as Teachers Survey N=4 scale of 1 (strongly disagree) to 5 (strongly agree)	Average
I am very satisfied with the program	4.8
How likely would you be to recommend PAT to another family?	4.8

N=7

## What about the program has been most helpful to you and your family?

- My parent educator helps me find other resources that can help my children with their development if they have scored low in a ASQ questionnaire. The brochures she brings are extremely helpful; they are a great guidance. If I ever have a question she always answers with great advice.
- The love and support. Having someone to talk to about our concerns with our son.
- Helped me create better communication with my daughter and understanding how to respond and set boundaries with her temperament.
- Lactation consultant at hospital and home visits – Deanna & Debbie were the best!

## What could be improved about this program?

- Nothing. I find it great the way it is. The kids get different books with each visit. And my parent educator brings me activities in handouts which are extremely helpful. [It] is a program that will definitely help them.
- I cannot think of anything to improve. It's a wonderful program and I hope it continues for many years.
- I would like less hand-outs, maybe an online site to access when questions arise.

## Additional Comments:

- I have an amazing parent educator! She is a life saver! I would highly recommend her.
- Molly is a very loving and caring person. I enjoyed our visits and feel like I understand my son's emotional needs better.
- I recommend this program for other parents and children. (translated)
- I like the program, it is very accessible for making appointments and helped me a lot. Elvira is very gentle and patient. Thank you. (translated)
- Thank you for this fabulous program.

# School Readiness

**Investment: \$86,194**

Funding support from First 5 California Small County Augmentation (\$85,036) and Mono County Probation, Health, & Social Services Departments (\$1158)

Kindergarten Round Up, Summer Bridge, & Kindergarten Assessments

Conducted by Eastern Sierra and Mammoth Unified School Districts

Funded by First 5 Mono

Raising A Reader

Conducted by Mono County Libraries & First 5 Home Visitors

Funding Partner: Mono County Libraries

Story Time conducted by First 5 in Bridgeport & Walker, with funding support from Prop 63, Mental Health Services Act

Readers' Theatre

Conducted & funded by First 5 Mono

First Book

Conducted & funded by First 5 Mono



# Rationale

A child's education begins very early. Since school-based educational systems do not begin until 3 -5 years of age, First 5 promotes programs that help children get ready for school in the early years.

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School Readiness programs include all Mono County schools, childcare and preschool centers, special needs programs, and the Mono County Library System.

Supporting research for Raising a Reader includes, in part, the following publications:

Organizational Research Services (2008);NPC Research (2008); Evaluation Solutions (2008); Thomas Keifer Consulting (2008); Harder & Co. Community Research (2008); Pacific Consulting Group (2007); Bentham and Associates (2007); Public Policy Research, Portland, OR and Oregon State University (2007);,CA State University Monterey Bay, Stanford University, Children's Health Council (2007)

Our other programs in this area are based on a high-quality local model based on participant survey data.



# Transition to School Activities

**Partners:** Mammoth and Eastern Sierra Unified School Districts

**Kindergarten Round Up:** Informational meeting held at all county elementary schools

- **Target:** All families with incoming Kindergartners
- **Objectives:**
  - Introduce families and children to the school, teachers, principal, and each other
  - Provide information on entering school and kindergarten readiness
  - Facilitate children and families' smooth transition into the education system
  - Enroll children in kindergarten
  - Sign children up for Summer Bridge

**Summer Bridge:** Two week Kindergarten transition program held in the summer for incoming kindergartners

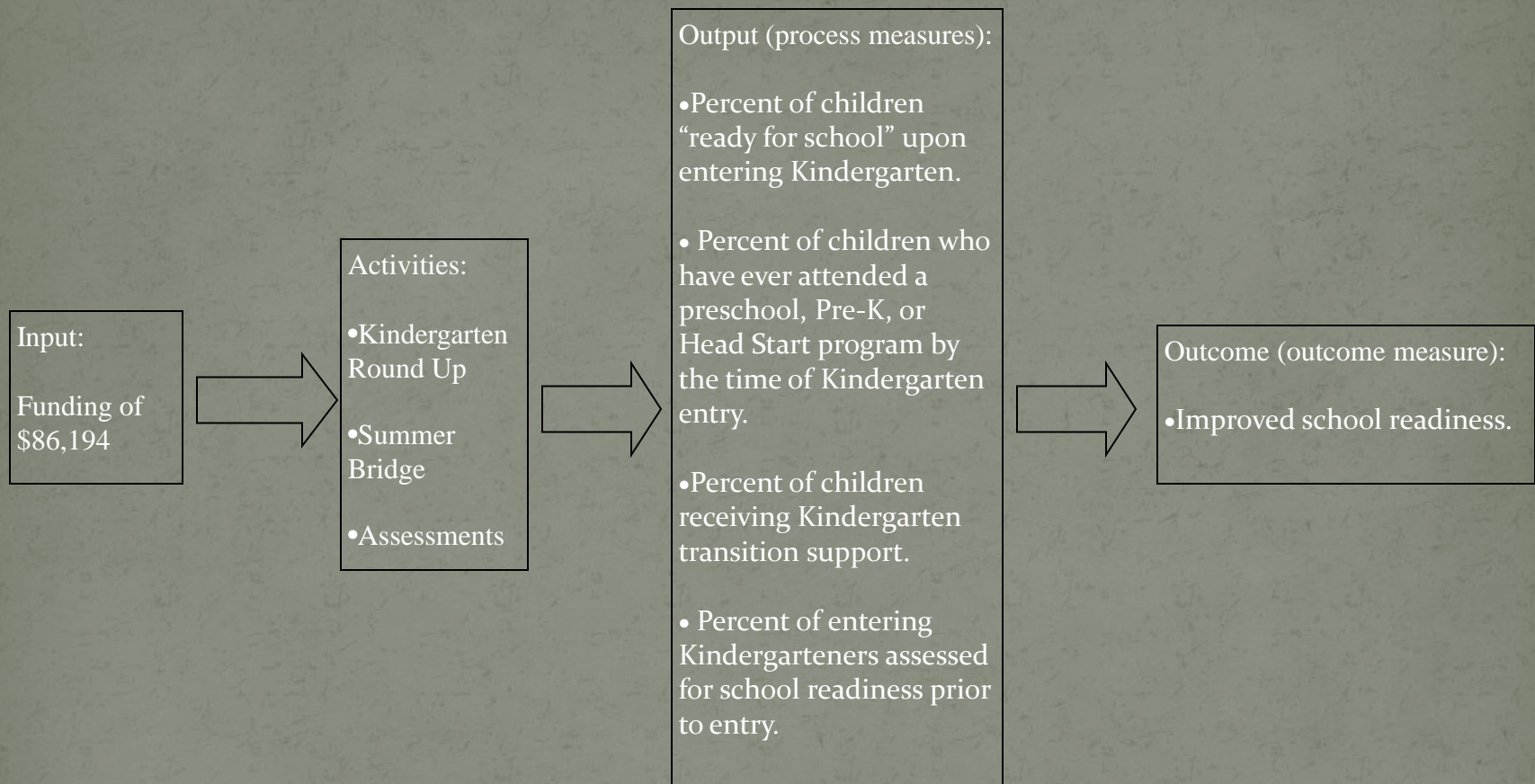
- **Target:** All incoming Kindergartners, as space provides
- **Objectives:**
  - Assess incoming students' school readiness
  - Identify children's skill development needs before school begins

**Kindergarten Assessment:** School readiness assessments conducted by teachers in the first month of school

- **Target:** All Kindergartners
- **Objectives:**
  - Assess students' school readiness
  - Identify children's skill development needs



# Logic Model





# Research questions, data sources, findings and conclusions

- Is the percent of children “ready for school” upon entering Kindergarten increasing?
  - Data Source: Brigance kindergarten readiness assessments (slide 32)
  - Finding: Readiness increased to 50% from 38% last year
  - Conclusion: Although the percent of kindergarten ready students increased this year, we are cautious to draw the conclusion that this reflects an overall improvement due to the significant difference in the percent of students assessed, 99% this year compared to 66% the previous year. We are instead thinking of the 50% readiness as a baseline which will serve to gauge progress in the future.
- Is the percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry increasing?
  - Data Source: Summer Bridge Parent Survey (slide 76)
  - Finding: No, attendance decreased to 24% from 61% last year.
  - Conclusion: about 30% of incoming kindergartners who attended the Summer Bridge program also attended a preschool program. In subsequent years, data will be drawn from Kindergarten parent surveys to capture a better picture of the kindergarten class as a whole as opposed to the subset that attends Summer Bridge.
- Is the percent of children receiving Kindergarten transition support increasing or remaining high?
  - Data Source: participation in transition to school activities (slide 30-31)
  - Finding: No, down to 69% from 79% last year
  - Conclusion: Primarily due to a decrease in participation in Kindergarten Round Up at the largest school in the county, Mammoth Elementary, transition to kindergarten participation decreased from last year. The decrease in attendance was likely due to a new format for the event that did not function as well as hoped. We think that challenges in the 2015 event were shared by word of mouth and may have led to less participation in 2016. We implemented changes in 2017 to improve the format of Round Up in Mammoth and have received preliminary feedback regarding the success of the changes. We hope the success will lead to increased participation in the years to come. There is also low participation in the Summer Bridge programs in Lee Vining and Mammoth. First 5 Staff will meet with staff at those sites to support implementation of changes to enroll more students. If participation remains low, the Commission will analyze the data to make decisions about ongoing funding during the 2018-19 Strategic Planning process.
- Is the percent of entering Kindergarteners assessed for school readiness prior to entry increasing or remaining high?
  - Data Source: kindergarten readiness assessments (slide 32)
  - Findings: 99% of all kindergartners were assessed compared to 66% the previous year.
  - Conclusion: The new protocol to assess kindergartners at kindergarten entry had a positive impact on the percentage of students assessed. The research question needs to be refined in the strategic plan to reflect the change from “prior to entry” to read “at entry”.



# Evaluation Results

As the majority of the program-specific evaluation results indicate achievement of the desired outcomes, the commission will continue to fund the same School Readiness activities. As part of the continuous quality improvement of the School Readiness activities, changes were made to the format of the Mammoth Elementary Kindergarten Round Up. The 2015 Round Up in Mammoth experimented with a new format with two presentations, one in English and one in Spanish. The format was challenging due to the size of the presentation rooms and flow of parents dropping off children with childcare providers. To improve the event, First 5 worked with Elementary School staff to reformulate the format to match what is done in the other schools in the county—children and families participating together in presentations in each classroom with a Kindergarten teacher. Due to the success of the new format reported by staff and parents, we will continue to offer Round Up in Mammoth Lakes using this format and anticipate that it will lead to increases in participation over time.



# Transition to School Reporting Cutoff

Transition to School activities, Round-Up, Assessments, and Summer Bridge are reported based on the fiscal year the cohort enters Kindergarten, even though some events take place in the prior fiscal year.

(FY 2016-17: data reported is for the class that entered Kindergarten in August of 2016)



# Kindergarten Round Up Attendance

Kindergartners who started school in August of 2016

Events took place in March 2016

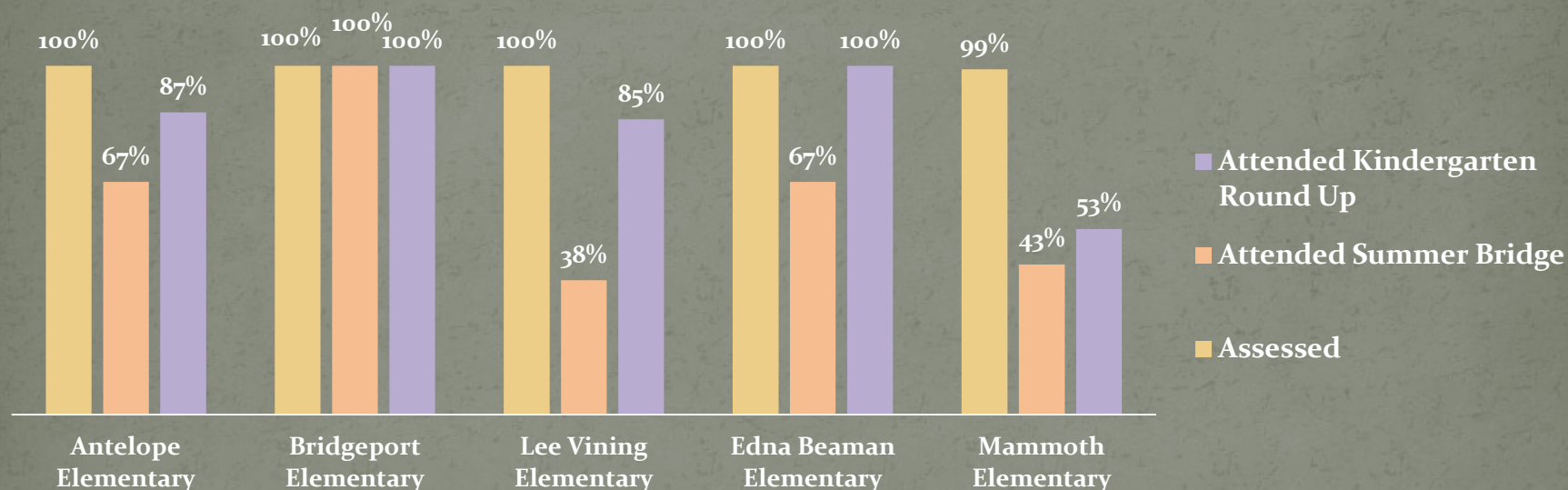
Kindergarten Round Up March of 2016			% of Kindergartners who received a backpack at Round Up		
Elementary School	Attendance (Kindergartners, parents, siblings, etc)	Backpacks Distributed to Kinders	2014 N=109	2015 N=119	2016 N=113
Antelope	31	13	58%	53%	86%
Bridgeport	13	5	100%	71%	167%
Edna Beaman	13	5	50%	100%	167%
Lee Vining	33	11	125%	73%	85%
Mammoth	140	42	89%	80%	53%
Total	230	76	84%	79%	67%

Backpacks include school readiness activities such as pencils, crayons, scissors, play-dough, a ruler, a puzzle, and writing and math exercises.

# Transition to School Participation

Kindergartners who started school in August of 2016

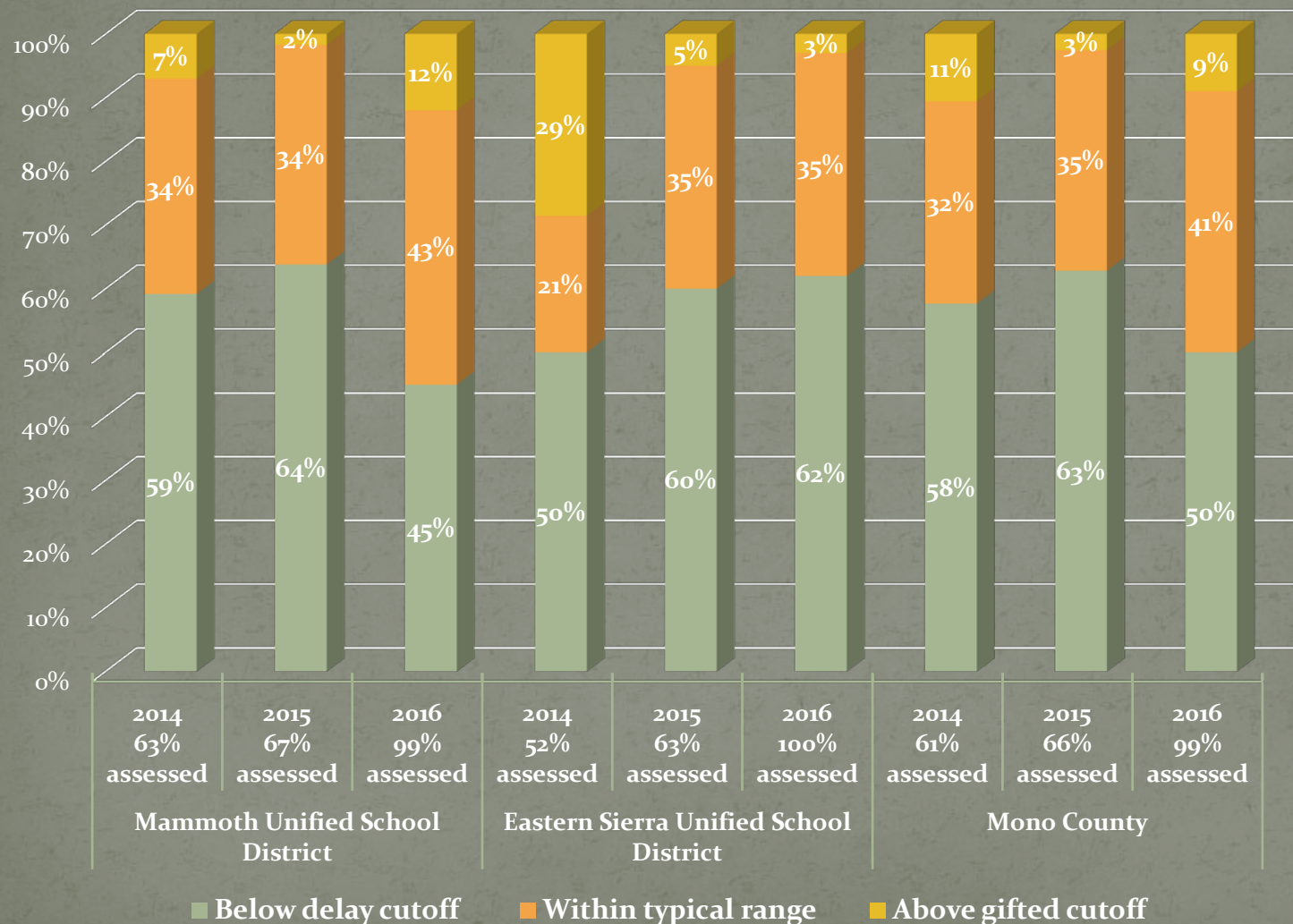
Events took place from March to August 2016



The focus for improvement in upcoming years will be on Summer Bridge and Round Up attendance at Mammoth Elementary School and Summer Bridge attendance at Lee Vining Elementary School due to the low percentages of students accessing those services in FY 2016-17.



# School Readiness 2014-2016



# Teacher Survey Comments

**What were the most important things the children in your class got out of the Summer Bridge Program?**

- Familiarity with the classroom/school
- Getting to know me and how to follow directions
- For me, it is the beginning steps to establish the routines we will be using during the school year and socializing with peers.
- Exposure to the school campus, the way class runs, and rules



# Parent Survey

In which ways do you feel Summer Bridge helped prepare your child for Kindergarten?

Classroom Skill	Percent of Parents N=38 (70% reporting)
Meeting the teachers	89%
Getting used to the classroom	87%
Adjusting to a group learning environment	71%
Learning how to follow directions	63%
Increased self-confidence	58%
Development of social skills	53%
Increased attention span	47%

## Does your child feel less anxious about starting school?

- We feel more confidence because we know the teachers. (translated)
- She was very shy and I see that she is already sure of herself. (translated)
- Yes, because my child spent time with other children; he loves school and related activities. (translated)
- He is now comfortable with the school campus and has friends he will know on the first day of school .
- She loves to learn new things and couldn't wait to start.
- She now knows that there is a routine to follow and some school mates.
- Getting to see and experience the inside of the classroom and knowing the teacher.

Parent survey results signify the value that Summer Bridge has in supporting children adapting to the kindergarten classroom, meeting the teachers, and adjusting to a group learning environment.

# Raising A Reader & Story Time

Raising A Reader

Book bags distributed through libraries, home visitors, child care providers, and preschools.

Partner: Mono County Libraries

Target: Families and child care providers with children birth to 5 years

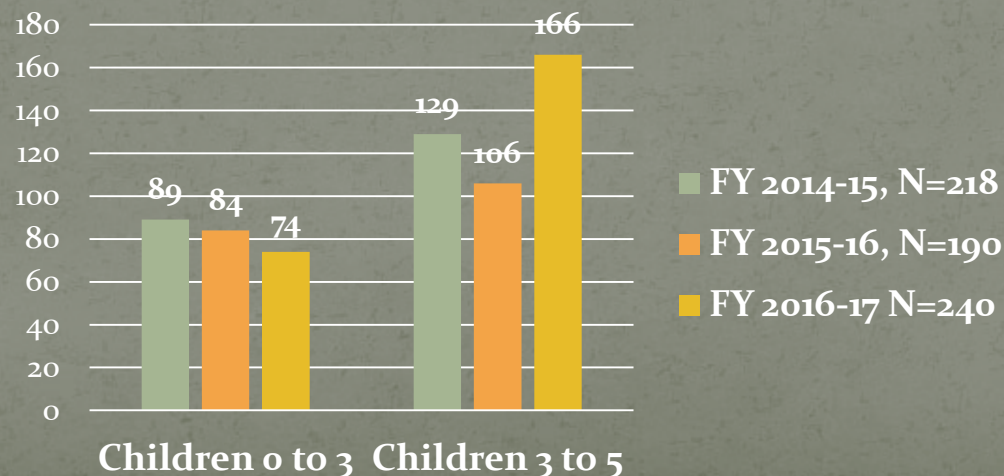
## Objectives:

- Improve early literacy
- Encourage use of the library system
- Increase parental and care-provider literacy activities

Participation: 240 children countywide

Peapod Leaders in Walker and Bridgeport conducted weekly Story Time.

Raising A Reader Participation by Age





# Raising A Reader Participant Comments

## What did you enjoy about the RAR Program?

- Spending time with my kids, seeing their smiles, enjoying reading. (translated)
- My child likes reading more. (translated)
- She tries to read to her little brother. (translated)
- My baby pays attention to the books. (translated)
- When reading, [my son] is very attentive and quiet. (translated)



Raising A Reader participation increased by 40 families this year.

Parent surveys indicate achievement of the objective to encouraging literacy activities in the home.



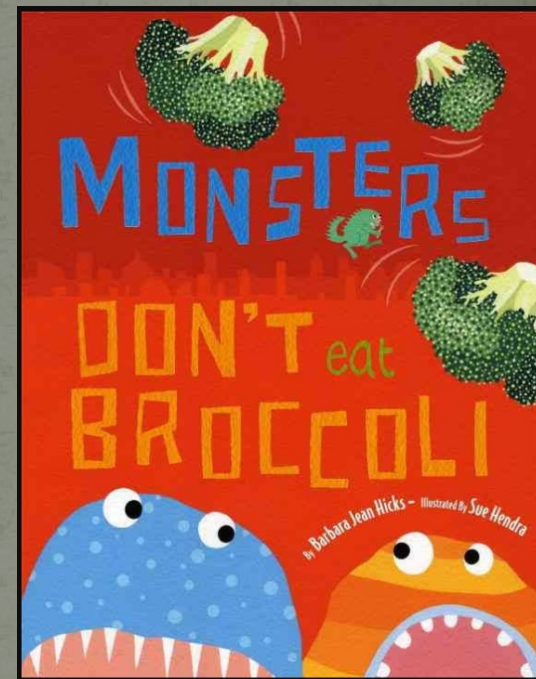
# Readers' Theatre

Activities and book readings in family child care facilities and preschools.

**Target:** Preschool-age children

**Objective:** Promote early literacy.

Location	FY 2014-15	FY 2015-16	FY 2016-17
Family Child Care Providers	68	-	4
Coleville State Preschool	-	15	12
Coleville Marine Base Childcare	23	15	13
Lee Vining Head Start Preschool	10	12	15
Lutheran Preschool	17	11	-
Kids Corner	20	10	15
Mammoth Head Start Preschool	22	20	21
Sierra Early Education Program	1	-	-
Total	169	83	80



First 5 Mono conducted Readers' Theatre in the Spring of 2017. Children listened to a reading of Monsters Don't Eat Broccoli, received fresh broccoli snacks, and were given a Potter the Otter book to read at home.



# First Book

Free high-quality children's books.

## Target: Children birth to 5

## Objectives:

- Increase early literacy in home environments & with childcare providers
- Facilitate positive parent-child interaction
- Increase literacy for young children

## Books distributed:

**833 books total (807 FY 15-16)**

## -400 Welcome Baby! & Parenting Partners

## -142 Peapod Playgroups

## -100 Women, Infants, Children

## -77 Health & Safety Fairs

## -52 IMPACT Providers

## -40 Raising A Reader

## -22 Early Intervention



**Distributing books to parents and providers builds their own libraries, strengthening the early learning system and contributing to improved school readiness.**



# Child Care Quality

**Investment: \$351,936**

Improve and Maximize Programs so All Children Thrive  
(IMPACT)

Serves Mono and Alpine Counties

Conducted by First 5 Mono

Funded by First 5 California (\$57,145) & First 5 Mono (\$17,053)

## Region 6 Training & Technical Assistance Hub

Serves Mono, Alpine, & Inyo Counties

Funded by First 5 California (\$26,968)

## Community Development Block Grant Childcare

Conducted by Eastern Sierra Unified School District

Funded by the California Community Development Block Grant  
through Mono County (\$250,771)



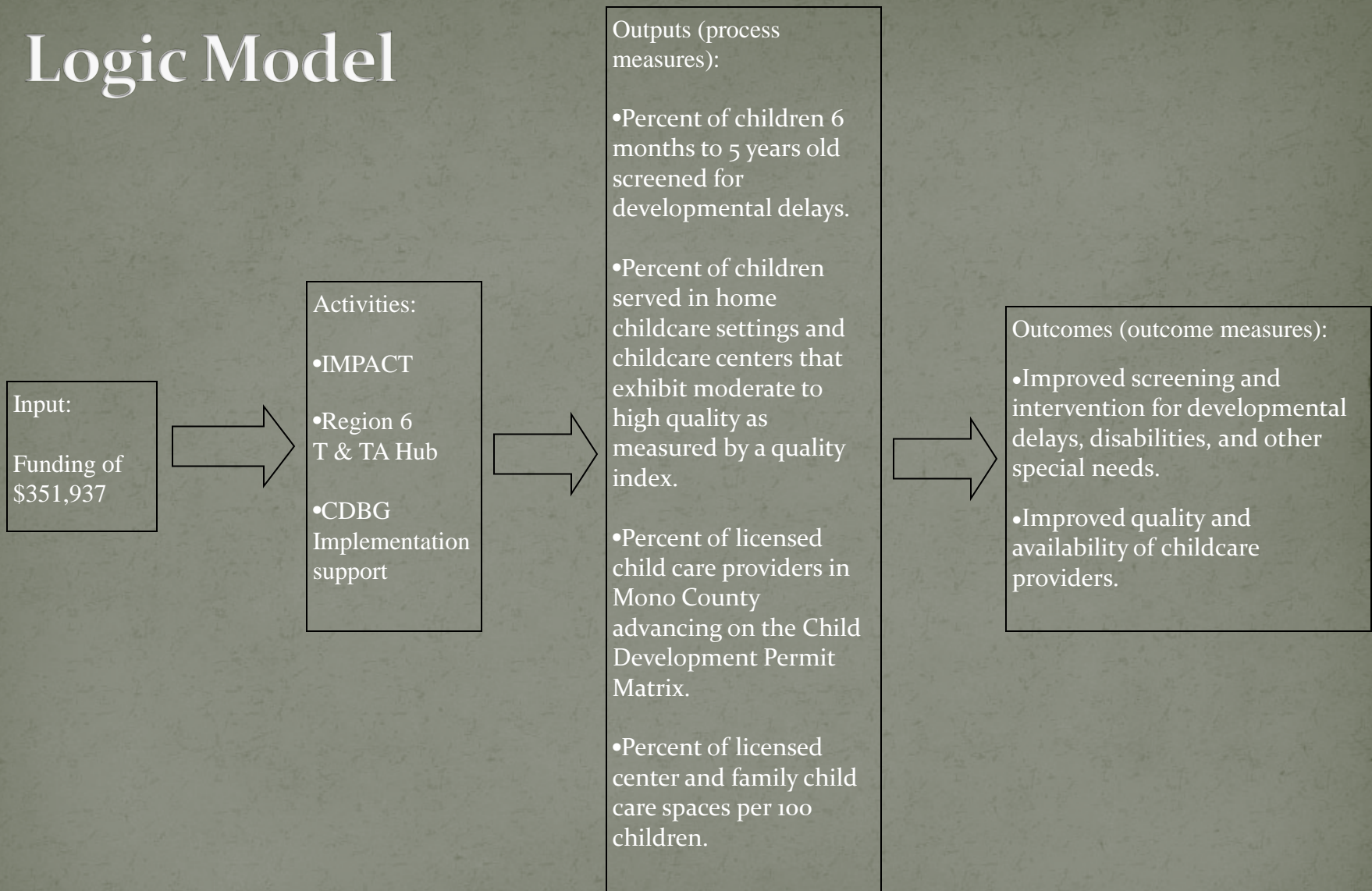
# Rationale

First 5 Mono includes Childcare Quality in the strategic plan as many children spend a significant amount of their early years with their childcare provider.

Educating child care providers on how to best meet the needs of children in their care helps ensure children will spend their formative years in optimal learning environments.

Financial support from First 5 California facilitates county provision for programs that help create and maintain high-quality child care.

# Logic Model





# Research questions, data sources, findings and conclusions

- Is the percent of children 6 months to 5 years old screened for developmental delays increasing?
  - Data Source: completed ASQs (slide 46)
  - Finding: yes, 41% of children in participating sites were screened for a developmental delay, up from 0 the previous year.
  - Conclusion: Due to implementation of the new IMPACT program which requires sites to provide ASQs to the families of children they serve, there was a 41% increase in children screened for developmental delays at participating sites from last year.
- Is the percent of children served in home childcare settings and childcare centers that exhibit moderate to high quality as measured by a quality index increasing?
  - Data Source: Quality Rating Improvement System Ratings
  - Finding: Yes, 62 children in Mono and Alpine counties attended a site with a high quality rating in the first year ratings were implemented in the county.
  - Conclusion: For the first time we rated sites using the state Quality Rating Matrix. Ratings for 4 classrooms were high quality, and two had higher quality than licensing standards.
- Is the percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix high or increasing?
  - Data Source: the number of child development permits issued to providers
  - Finding: unknown
  - Conclusion: Although we sought to access this data through the Child Development Department at the local community college, we were not able to access the data prior to publication of this report.
- Is the percent of licensed center and family child care spaces per 100 children high or increasing?
  - Data Source: Child Care Portfolio (slide 51)
  - Findings: In 2015, 17% of children 0-12 with parents in the workforce have a licensed childcare slot available, a decline from 20% in 2012.
  - Conclusion: The number of slots available to children in Mono County has decreased dramatically from 56% in 2008. To help change the trend, First 5 partnered with Mono County, Eastern Sierra Unified School District, and the Mono County Office of Education to open two new preschools—one in Bridgeport and one in Benton. First 5 continues to actively participate in the Mono County Child Care Council and with Mammoth Hospital and the Mono County Office of Education to support initiatives to increase the number of child care spaces in Mono County.



# Evaluation Results

As the child care quality initiative is making significant strides in rating sites, screening children for developmental delays, and impacting the number of available slots in the county, the Commission will continue to invest in this initiative.

As part of the continuous quality improvement of the child care quality investment, we continue to seek to develop coaching capacity so that site directors and family child care operators are able to have support around the areas of the rating matrix that are most pertinent to their site.



# IMPACT

## Improve and Maximize Programs so All Children Thrive

**Target:** Childcare providers, families, and children

**Objectives:**

- Provide site-specific professional development to childcare providers
- Support providers' implementation of developmental screenings and parent engagement activities
- Build public awareness and support for quality early care
- Build a Childcare Quality System that leverages funding and maximizes support for care providers

In FY 2016-17, fifty-six providers at nineteen Mono County sites participated in the Childcare Quality System. Three sites were served by the Inyo County Superintendent of Schools, efforts funded by the California Department of Education. Four sites “alternative sites”, Home Visiting and Peapod Playgroups, served 466 children—66% \*of the county’s birth to 5 population. Three sites in Alpine County were also served by the program.



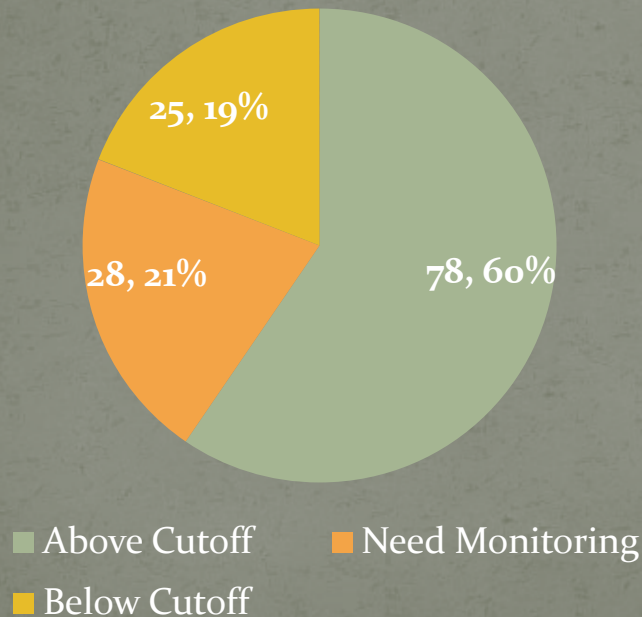
\*Number and percent include duplication



# Ages & Stages Questionnaire (ASQ)

The ASQ is a tool to screen children 1 month to 5 years old for developmental delays within 5 domains: Communication, Gross Motor, Fine Motor, Problem-Solving, and Personal-Social. Providers participating in IMPACT were trained to use the ASQ and provide referrals to children with suspected delays. Providers offered the screening to all families that they serve.

**Provider ASQ Results**  
N=131



ASQs were administered by child care providers and completed by parents. Results include the 22 sites participating quality improvement efforts. Of the 321 children served at those sites, 131 children were screened, a 41% screening rate.

Of the 131 screenings for which results were submitted, 25 children needed referrals for further evaluation (19%). Suggested referrals by domain were:

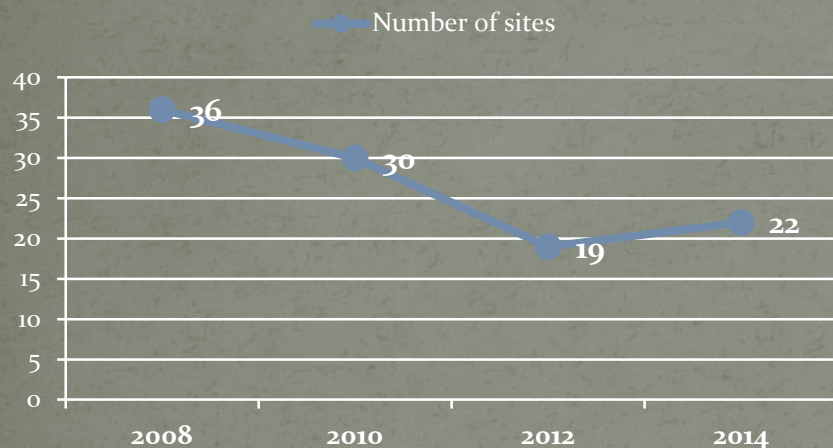
- Fine Motor: 4
- Problem Solving: 11
- Communication: 6
- Gross Motor: 3
- Personal Social: 5



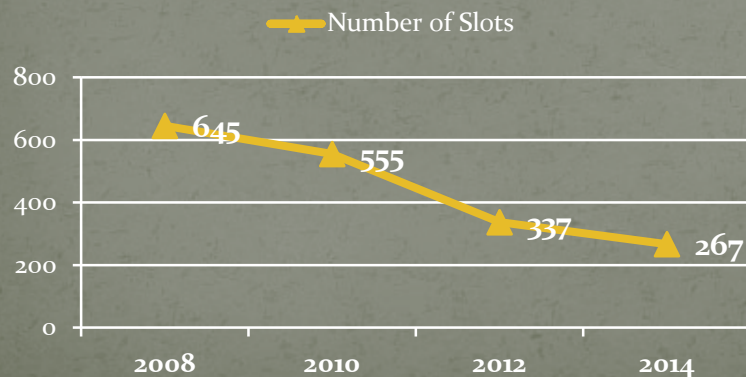
# Childcare Sites, Slots, and Need

Source: California Child Care Resource and Referral Network Child Care Portfolios 2009-2015

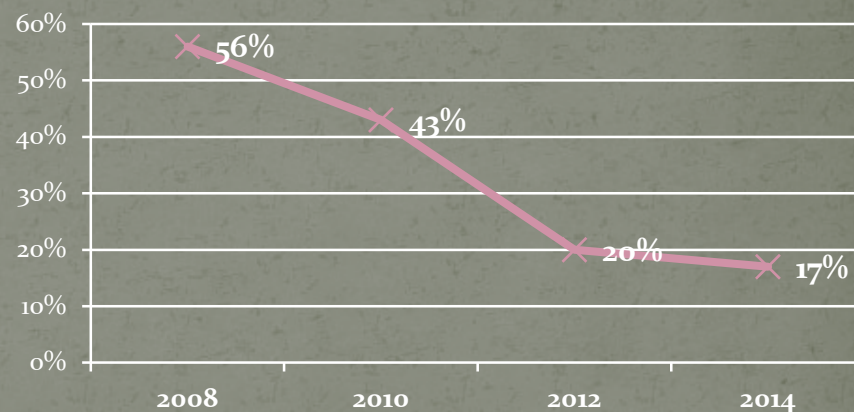
## Number of Sites



## Number of Slots



Children 0-12 with parents in the labor force for whom a licensed child care slot is available



# Training and Technical Assistance HUB

- First 5 Mono served as the fiscal lead for the Regional Training and Technical Assistance Hub funded by First 5 California to support regional efficiencies in Childcare Quality work.
- The Region consists of Alpine, Inyo and Mono Counties.
- Funds paid for:
  - Travel to state and regional meetings
  - External Assessors for Spanish speaking sites
  - External coordination for the Hub from Viva
  - i-Pinwheel database to track sites' participation in regional childcare quality
  - Early Learning Needs Assessment Tool (ELNAT) database to analyze child data to determine needs



# CDBG-Funded Childcare

- With funding through Mono County and operated by Eastern Sierra Unified School District, preschool child care centers were opened in Bridgeport and Benton.
- 27 children were served
- 4 new employees were hired, two teachers and two aides

# Oral Health

**Investment: \$4,764**

Oral health education, oral health checks, and fluoride varnish application.

Conducted & funded by First 5 Mono

Funding support from First 5 California Small County Augmentation (\$4,765)

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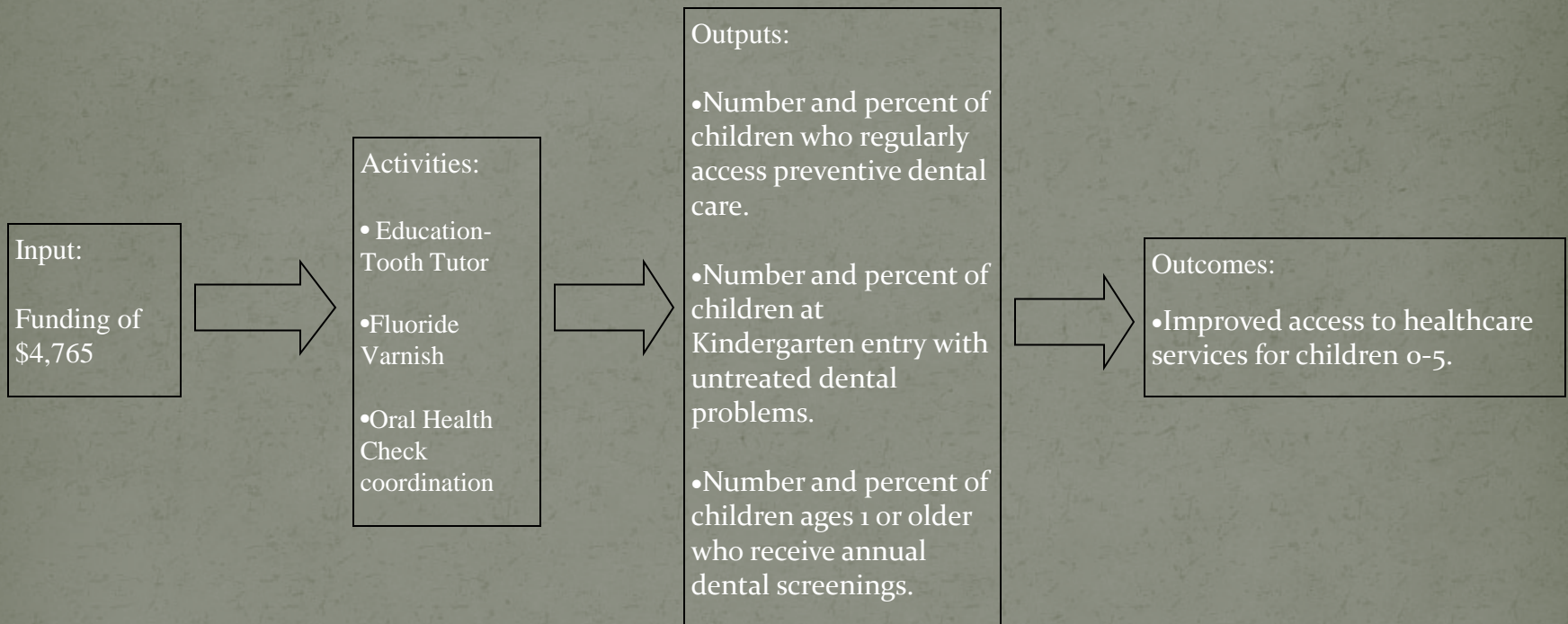
# Rationale

The 2009 First 5 Mono Strategic Plan identified a significant community need in the area of oral health. Pediatricians saw visible tooth decay and an opportunity to provide fluoride varnish and oral health education through paraprofessionals was developed.

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Pediatricians in the county continue to report significant needs for sustained efforts in oral health due to the high number of children with poor oral health.

# Logic Model





# Research questions, data sources, findings and conclusions

- Is the percent of children who regularly access preventive dental care high or increasing?
  - Data Source: Sierra Park Dental Data, 2014-16 (slide 78)
  - Finding: 20% of patients 0-5 had more than one visit to the dentist in the year, down from 24% the previous year.
  - Conclusion: Using the data of how many children went to the dentist more than one time on the year; we get a picture of how many are able to have work done in addition to annual cleaning and check-ups. Using this as a metric, we know 20% of children needed additional preventative care, but do not know how many of the children who needed additional care this includes. Thanks to new collaboration with the fiscal department at Mammoth Hospital, this year's data is stronger than it was in the past. With continued support from Mammoth Hospital, we will be better able to track access to oral health care over time.
- Is there a low percent of children at Kindergarten entry with untreated dental problems?
  - Data Source: Kindergarten Round Up Oral Health Checks (slide 78)
  - Finding: 18% of the oral health checks completed at kindergarten round up indicated the child had untreated caries (cavities), up from 5% last year
  - Conclusion: While the percent of untreated caries at kindergarten entry increased, it is hard to draw conclusions based on the low reporting rate of 35%. First 5 is working with the Mono County Office of Education to ensure school district compliance with their reporting requirements for these forms to support more complete data.
- Is the percent of children ages 1 or older who receive annual dental screenings high or increasing?
  - Data Source: Sierra Park Dental Data, 2014-16 (slide 78)
  - Finding: Finding: 17% of patients had an annual exam and cleaning, 49% had an exam and cleaning in 2 of three years and 34% had one exam and cleaning in 3 years.
  - Conclusion: Only 17% Children 0-5 visit the dentist annually, but more than half (56%) are seen at least annually. First 5 will continue to work through our oral health education efforts to support higher percentages of children having at least one visit to the dentist a year.



# Evaluation Results

The oral health needs of young children in Mono County continue to be high with few children accessing regular preventative care and annual screenings. The commission will continue to invest in this initiative to improve oral health for children 0-5.

As part of the continuous quality improvement of the oral health investment, we will target our oral health education to educate parents to access annual dental checkups and preventative care. Additionally, we will continue to provide topical fluoride varnish as no community in the county has fluoridated water.



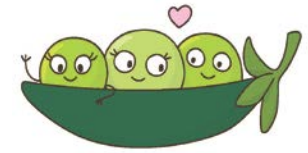
# Oral Health

**Target:** Preschool age children

**Objectives:** Provide application of fluoride varnish twice a year to all Mono County children age 1-5 who are not already receiving services from a dentist, and educate children and parents about oral health. The program provides free toothbrushes, toothpaste, and floss to families to help maintain oral health.

## Oral Health Visits

Location	Oral Health Checks	Oral Health Education	Fluoride Varnish	Total Services
Preschools/Family Child Care Homes	-	125	92	217
Mammoth Elementary Kindergarten Round Up	14	-	15	29
Eastern Sierra Unified School District Birth-to-5 Health & Safety Fairs	28	-	23	51
FY 2016-17 Totals	42	125	130	297
FY 2015-16 Totals	39	188	162	389



# Family Behavioral Health

**Investment: \$36,315**

Peapod Playgroups

Conducted by First 5 Mono

Funding Partner: Mono County Behavioral Health, Prop. 63 (\$35,000),  
First 5 Mono (\$1315)



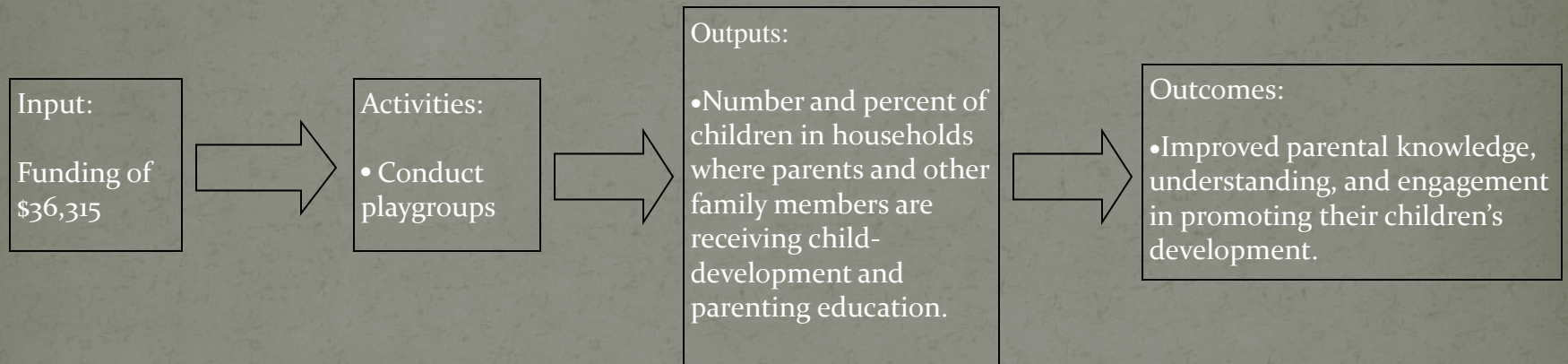
# Rationale

In such a rural and geographically isolated county, it is easy for families to feel alone. Opportunities for children and their parents are fewer than in more populated areas.

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To meet the social needs of parents and their children, a weekly playgroup program was developed.

# Logic Model





# Research questions, data sources, findings and conclusions

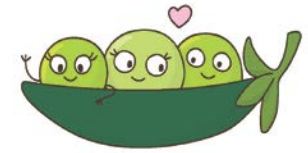
- Is the percent of children in households where parents and other family members are receiving child-development and parenting education high or increasing?
  - Data Source: number of children participating in playgroups (slide 61)
  - Finding: 29% of children
  - Conclusion: Due to participation in Peapod, children lived in households receiving child-development and parenting education.

## Evaluation Results

Families have more information about parenting and child development as a result of the Family Behavioral Health investment. The Commission will continue to invest in this initiative.

As part of the continuous quality improvement of the Peapod program, outreach efforts to ensure as many families as possible participate will continue. We are also working to ensure that information about parenting and child-development is included in groups as a part of each 10 week session cycle.





# Peapod Playgroups

Weekly group meetings for parents and children

Partner: Mono County Behavioral Health

**Target:** Parents and children birth to 5 years old. Playgroups meet for 10-week sessions. Three to four sessions are held per year in the following communities: Walker, Bridgeport, Lee Vining, Mammoth English, Crowley Lake, & Chalfant/Benton.

## Objectives:

- Decrease isolation by providing parents and children an opportunity to socialize
- Destigmatize seeking behavioral health services
- Link families to community services
- Encourage school readiness skills
- Encourage early literacy

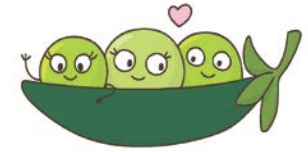


# Peapod Participation

Participation in Peapod remained steady in FY 2016-17 serving about the same number of children and families as last fiscal year. The number of groups offered fell, and thus the corresponding kids total attendance due to the following factors.

- Spanish Peapod was not held all year—we have been unable to hire a leader due to lack of qualified applicants.
- After only serving a couple families in Lee Vining for the entire 15-16 fiscal year, when the leader left her position, we decided to wait until the community expressed an interest in restarting that group.

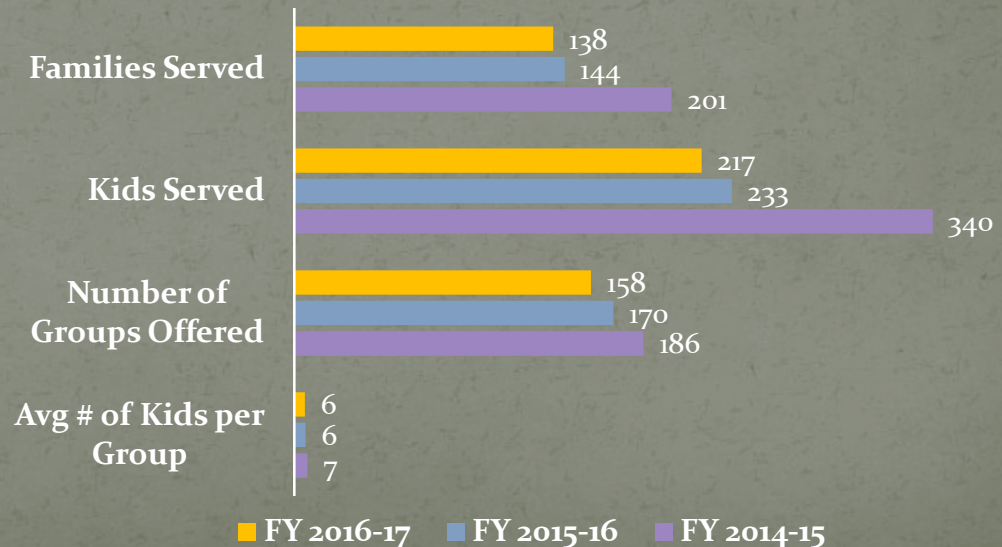
Peapod



## Families Served

Playgroup Location	FY 14-15	FY 15-16	FY 16-17
Benton/Chalfant	8	3	3
Bridgeport	17	13	15
Crowley Lake	43	41	32
Lee Vining	15	2	2
Mammoth English	59	46	74
Mammoth Spanish	30	15	0
Walker	29	24	12

## Overall Peapod Participation



# Counseling Referrals

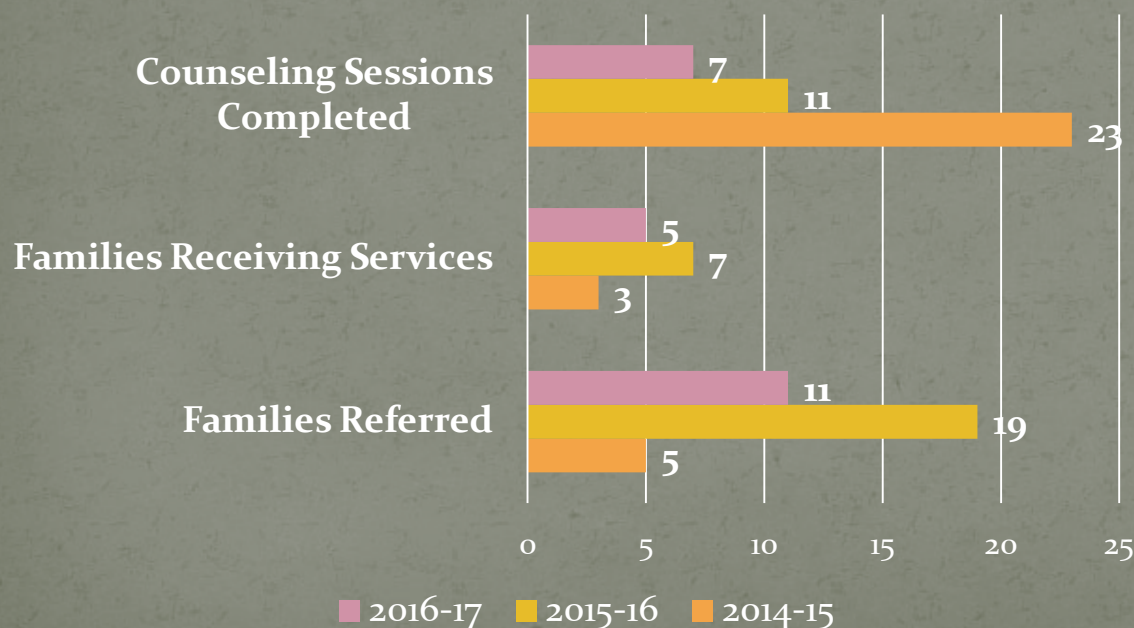
Referrals made during Home Visits and Peapod

The first \$500 of counseling services per family is paid by First 5 if no other insurance is available.

**Total families referred: 11**

**Families who accessed services: 5**

**Total Number of Counseling Sessions: 7** (Owens Valley Wellness & Mono County Behavioral Health)



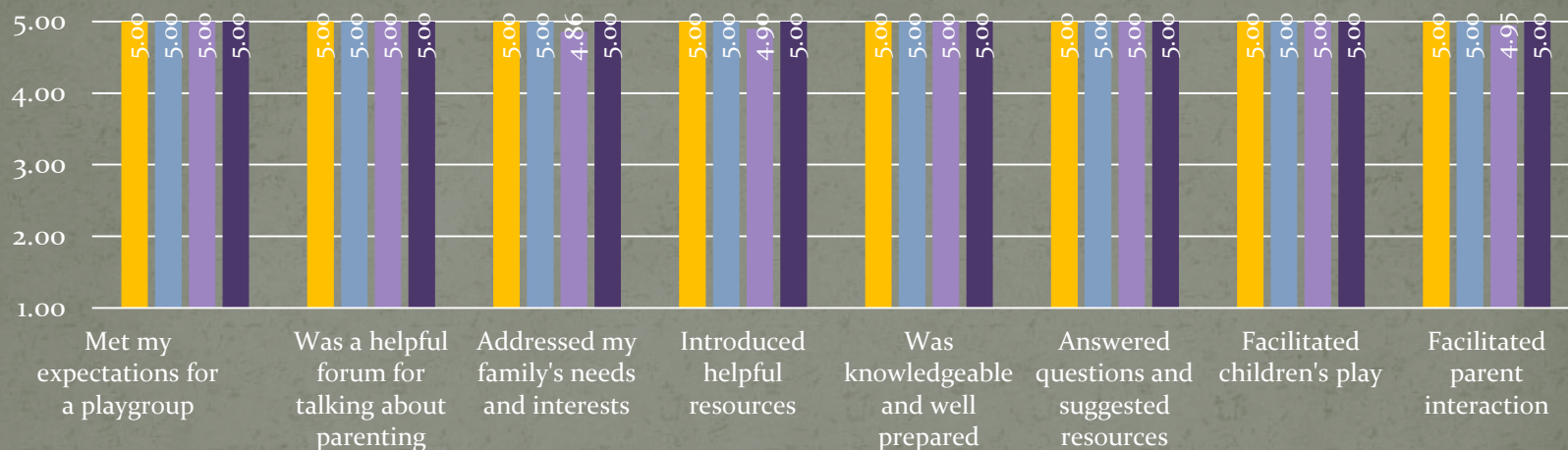
Percent of referred families who received counseling

2016-17	45%
2015-16	37%
2014-15	60%



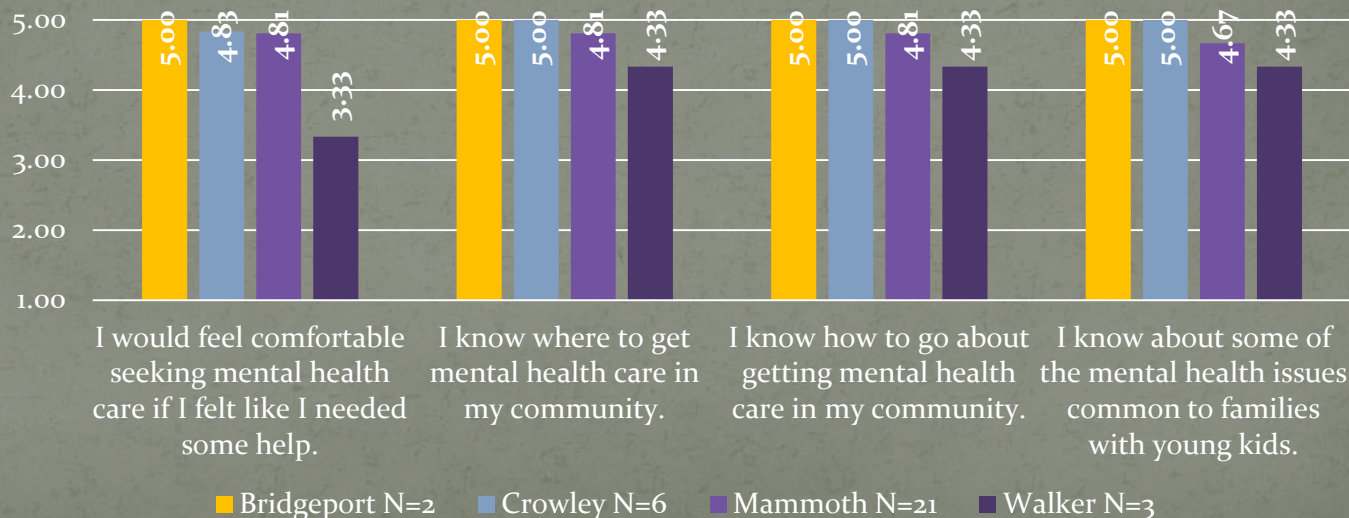


# Parent Surveys by Community



## Scale

- 1: Strongly Disagree
- 2: Disagree
- 3 Neither Agree nor Disagree
- 4: Moderately Agree
- 5 Strongly Agree

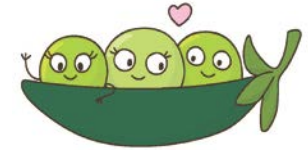


Bridgeport N=2 Crowley N=6 Mammoth N=21 Walker N=3

# Overall Parent Surveys

N=32

Peapod



## Scale

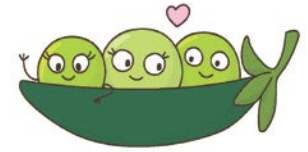
- 1: Strongly Disagree
- 2: Disagree
- 3 Neither Agree nor Disagree
- 4: Moderately Agree
- 5 Strongly Agree

Parent survey data yielded high levels of satisfaction with playgroups, playgroup leaders, and information received about mental health issues.



# Parent Survey Comments

Peapod



- Teiya does an amazing job with the kids. This program is excellent for our kids and community.
- Social and fresh air for the kiddies
- Both leaders have such good hearts and really show care and passion for a healthy environment for the kids.
- Fun leaders, great games/songs, fun interaction. Have been coming since [my child] was 18 months.
- We love song time and playing with the parachute. We have really enjoyed Peapod with Kim and Annaliesa.
- Lots of time for kids to play and interact. Song time and parachute. Building relationships with other parents and children.
- Beautiful setting at park meeting friends and having a safe place to play with other kids.
- Toys and play structures getting kids around others, having social skills very welcoming, a variety of activities for different ages, safe for independent play, love the songs and group activities.
- Nice variety of toys, games, crafts, fun songs, good location.
- Nice variety of toys and activities, good interaction for different aged children, convenient location.
- Fun, interactive and tires out my toddler.
- Friendly parents, children, and leader.
- Great age appropriate toys for kids.
- Kids playing nicely together. Lots of different activities available.
- Smaller children kept safe from larger children.
- Great location, nice mix of age groups, nice leaders, thank you.
- The songs. Miss Chanden is always positive and is great at bringing us all together.
- It's a lot of fun for me and my child. I really like the crafts and informational packets.

## Suggestions

- None, these are great.
- Water play
- Story or book during session?
- Games & crafts, we love crafts!
- More outdoor time.
- A craft or water time would be great.
- I'll likely try to find more similar ages, but I was aware of that prior.
- Moving back to 10am is great.
- More often.
- Maybe start at 10:00 instead of 9:30.



# Becoming an Emotion Coach Class

**Target:** Parents, guardians, and childcare providers with children ages 0-5

**Objectives:** Taught from the Parenting Counts Curriculum (product of Talaris Institute™), Emotion Coaching is a parenting technique that research has shown is effective in helping children understand their feelings. The class was taught by a First 5 Mono Home Visitor, held for 1.5 hours for three weeks, and covered Attachment & Parenting Styles, Emotion Coaching, and Praise, Discipline, & Temper Tantrums.

## Survey Results, N=10

### Do you feel more prepared as a parent/provider?

- Yes, I took away a few key points that I will try to implement
- Yes, Good discussion on setting limits. Coming up with rules for family.
- Yes, I feel like I learned specific helpful tools to use as a parent to deal with emotional situations. I learned about a lot of the research behind the theories.
- Yes, I have more tools when it comes to discipline as well as techniques on how to connect with my children.
- Yes, not done yet!
- Yes, my husband and I have discussed what we learned and I've been bringing topics up with our child and having good discussions.
- Yes, I learned new things that I will use for my children's education (translated).
- Yes, I learned new things that I can work with my children (translated).

### Comments or other suggestions:

- The 5 steps of emotion coaching are simple yet effective ways of connecting with ourselves and our kids. Thank you so much for offering this wonderful series of classes. Annaliesa is an amazing and knowledgeable presenter.
- Have more classes like these; very useful classes (translated).
- All was very well and was very interesting, I learned a lot (translated).
- A handout on sources/books. More simple slides & provided as hand outs. Fewer videos, more talking.
- More role playing of examples.
- Role plays? Bring kids for real coaching? The night with no visuals was ok, if not better!
- Would love more role play to practice techniques we learned.
- Give us more themes of guidance and education for our families (translated).



# Child Safety

**Investment: \$7,000**

Safe Kids California, Mono Partners

Funding partner: Mono County Office of Education

Coordinated by Mono County Office of Education

Funding support from First 5 California Small County  
Augmentations (\$7,000)

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# Rationale

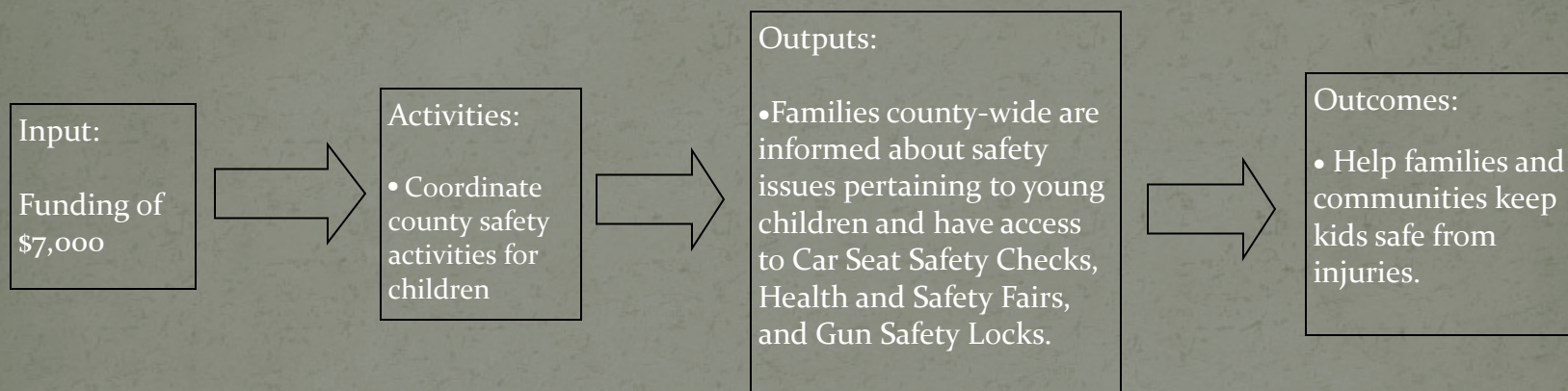
Prior to the formation of *Safe Kids California, Mono Partners*, there was no agency in the county specifically focusing on child safety. While many agencies conducted safety activities, there was no coordination of services.

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Initially spearheaded by Mammoth Hospital, multiple community agencies met to pursue the formation of a Safe Kids Coalition. No other participating agency had the necessary funding or staff time to conduct coordinating activities. Based on higher than average injury data for Mono & Inyo Counties, and after learning the benefits of such collaborations, the Commission decided to fund the coordination of a *Safe Kids California, Mono Partners* group.



# Logic Model





# Research questions, data sources, findings and conclusions

- Are families county-wide are informed about safety issues pertaining to young children and accessing Car Seat Safety Checks, Health and Safety Fairs, and Gun Safety Locks?
  - Data Source: Health and Safety Fair Participants (slide 71)
  - Finding: 24% of the 0-5 population and a parent
  - Conclusion: Due to health and Safety fair events, families across the county were informed of safety issues and accessed safety materials.

## Evaluation Results

Families have more information about child safety as a result of the Safe Kids investment. The commission will continue to invest in this initiative.

As part of the continuous quality improvement of the Safe Kids Mono Partners work, outreach efforts to ensure as many families as possible participate in Health & Safety Fairs will continue. The Safe Kids coordinator is working to leverage resources to encourage partners to invest in safety materials and apply for grants to provide safety resources to families in our county.



# Safe Kids California Mono Partners



Activities for Families and Children Birth to 5	Persons Served
Health and Safety Fairs (Eastern Sierra Unified School District, Mammoth Lakes, & Walker annual Fairs)	349
Child Passenger Car Seat Check or Replacement	22
Accident Prevention Supplies (door & cabinet latches, outlet protectors, CO detectors, TV tethers)	90
Bike Helmets	99

Safe Kids California Mono Partners provided multiple types of safety information and resources to children and families across the county at local events & through Public Service Announcements on the radio.

Risk Areas Addressed		
Car seat installation and use	TV and furniture tip-overs	Home safety
Carbon monoxide & smoke detectors	Wheeled sports	Preventing dog bites
E-cigarettes/liquid nicotine	Bullying	Water safety
Disaster/emergency preparedness	Medication & poison prevention	Summer heat awareness
Suffocation and sleep	Fire, burns, & scalds	

# Eastern Sierra Unified School District

## Birth-to-5 Health & Safety Fairs

Health & Safety  
Fairs

March 2017 Partners: Mono County Public Health & Behavioral Health and Sheriffs, CA Highway Patrol, Inyo Mono Advocates for Community Action, Eastern Sierra Unified School District, Mono County Libraries, Community Service Solutions, Safe Kids California Mono Partners, and the Lions Club

**Target:** Families with children birth to five years old

**Objective:** Bring services & resources to families in the remote parts of the county where there is a lack of access due to location or transportation.

Elementary School	Attendance (adults & kids)	Bike Helmets (Safe Kids)	Nutrition (CSS)	Fingerprints (Sheriff)	Vision Screening (Lions Club)	Total
Antelope	21	7	19	10	7	64
Bridgeport	35	7	10	6	-	58
Edna Beaman	18	6	6	10	6	46
Lee Vining	25	5	19	6	7	62
<b>Total</b>	<b>99</b>	<b>25</b>	<b>54</b>	<b>32</b>	<b>20</b>	<b>230</b>

Oral Health, Fluoride Varnish, and First Books were also provided at Health & Safety Fairs (see respective slides).

Car seat checks were offered by the Mammoth Lakes Police Dept or the CA Highway Patrol at all schools; however, no participants took part.



# Mammoth Lakes Health & Safety Fair

June 2017

Health & Safety  
Fairs

Activities & Resources Offered	People Reached	
	2016	2017
First 5 California School Readiness Activities	200	300
Poison Prevention Information	40	41
Car Seat Safety Checks	24	17
Nutrition Information	25	92
IMACA: Child Care Provider List & Preschool Application	25	16
Department of Social Services	25	31
Gun Safety Locks/Information	25	55
Kids' Bike Helmets	67	66
Health Department Information	30	32
Mono County Office of Education Programs	50	55
Home Safety Kits	-	41
Fruit & Hot Dogs	250	224
Fair Attendance	300	300

Other 2017 Activities: Free First Books, Bike Rodeo, Probation & Behavioral Health Info, Internet Safety, Pediatric Clinic Info, First 5 CA Health Express Bus & Video Music Hut, Raising A Reader, WIC, and more.



First 5 CA Express distributed 1285 items including books, new parent kits, and school readiness activity information.



# Results and Indicators

## **Result Areas:**

- Mono County children 0-5 are educated to their greatest potential.
  - All Mono County Children 0-5 are healthy.
-



**Result: Mono County children 0-5 are educated to their greatest potential.**

<b>Indicator</b>	<b>Investment area</b>	<b>2014-15</b>	<b>2015-16</b>	<b>2016-17</b>
1. Number and percent of children 6 months to 5 years old screened for developmental delays.	Home Visiting & Child Care Quality	26%	27%	206, 28%
2. Number and percent of children served in home childcare settings and childcare centers that exhibit moderate to high quality as measured by a quality index.	Child Care Quality	0	5%	59, 8%
3. Number and percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix.		0	0	unavailable
4. Number and percent of licensed center and family child care spaces per 100 children.		36%	35%	30, 30%

**Sources:**

1. Children in commission-run programs with developmental screening (75)& children in child care programs participating in quality programs who received a developmental screening (131) /children birth to five in Mono County, US Census 2015 population estimate, 739 (100% reporting rate)
2. Inyo County Superintendent of Schools Quality Rating Improvement System rated 3 sites—Inyo Mono Advocates for Community Action 's Preschools in Mammoth, Coleville and Lee Vining--all were rated as having high quality—4 on a scale of 1-5. First 5 Mono rated two In-home child cares—Vasquez Family Day Care and Cherubs Academy—that received a rating of higher than licensing standards; 2 on a scale of 1-5. Children served at the sites (59)/ US Census 2015 population estimate, 739 (100% reporting rate)
3. Child Development Training Consortium permit application submission—0 for FY 11-12, 13-14, and 14-15—1 in 12-13 (100% reporting rate)
4. Number of licensed child care spaces available to children birth-5 on the IMACA Resource and Referral list, 227/children birth to five in Mono County, US Census 2015 population estimate, 739 (100% reporting rate)

**Result: Mono County children 0-5 are educated to their greatest potential.**

Indicator	Investment area	2014-15	2015-16	2016-17
1. Number and percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry.	School Readiness	54%	61%	9, 24%
2. Number and percent of children “ready for school” upon entering Kindergarten.		56%	37%	55, 50%
3. Number and percent of children receiving Kindergarten transition support.		84%	79%	76, 67%
4. Number and percent of entering Kindergartners assessed for school readiness prior to entry.		69%	66%	9, 24%
5. Number and percent of children in households where parents and other family members are receiving child-development and parenting education.	Home Visiting & Behavioral Health	72%	56%	385, 52%

Sources:

1. 9 Summer Bridge Parent Surveys indicating enrollment in preschool or pre-K/38 surveys=24%  
38 surveys/112 kindergarten students=34% reporting rate
2. 55 in-kindergarten Brigance screens of students assessed as within the typical range and above the gifted cutoff/ 111 number of assessments=50%;  
111 assessed / 112 kindergarten students=99% reporting rate
3. 76 assessments, children participating in kindergarten Round Up, or Summer Bridge enrollment whichever is highest (Round Up for FY 2016-17)/ 112 number of children on the first day of kindergarten (100% reporting rate)
4. 9 Summer Bridge Parent Surveys indicating enrollment in preschool or pre-K that conducts readiness assessments/ 38 surveys=24%  
38 surveys/112 kindergarten students=34% reporting  
Previous years included First 5 sponsored pre-K assessments now conducted in kindergarten.
5. 385 Children in commission-run programs with child-development education components/ 739 children birth to five, 2015 Census projection only includes First 5 programs—46% reporting rate



**Result: All Mono County children 0-5 are healthy.**

Indicator	Investment Area	2014-15	2015-16	2016-17
1. Number and percent of children in families provided with information about appropriate community services.	Home Visiting & Behavioral Health	72%	56%	343, 46%
2. Number and percent of children where breastfeeding is successfully initiated and sustained.	Home Visiting	89%	84%	104, 91%
3. Number and percent of children 0 to 5 years of age who are in the expected range of weight for their height and age, or BMI.		Unavailable	78%	247, 77%
4. Number and percent of entering Kindergarteners assessed for school readiness prior to entry.	School Readiness	69%	66%	9, 24%

Sources:

- 343 Children in commission-run programs with resource referral components/739 0-5 population, US Census 2015 projection=46%  
46% reporting rate (same calculation as above)  
Only includes First 5 programs
- 104 Sierra Park Pediatrics number of children breastfed at 1 month in 2016/ 114 number children seen at 1 month=91%  
114 children seen at 1 month/ 135 children born in 2016 DOF projection= 84% reporting rate)  
Previous year used Welcome Baby! data.
- 247 Sierra Park Pediatrics number of 2-5 year olds seen 2016 within the typical BMI range/320 Sierra Park Pediatrics number of 2-5 year olds seen in 2016=77%  
320 2-5 year olds seen in 2016/ 739 US Census 2015 projection of 0-5 year olds=43% reporting rate  
Previous year utilized CDPH data from the Mono County Public Health Department.
- 9 Summer Bridge Parent Surveys for 2016 indicating enrollment in a program that assessed in childcare or preschool program/ 38 responses=24%  
38 responses/ 112 kindergartners—34% reporting rate  
For FYs 2014-15 & 2015-16 data is drawn from F5 pre-K assessments.  
For FY 2016-17 First 5 assessments were conducted in kindergarten and are therefore not counted.

**Result: All Mono County children 0-5 are healthy.**

Indicator	Investment Area	2014-15	2015-16	2016-17
1. Number and percent of children who regularly access preventive dental care.	Oral Health	13%	24%	145, 20%
2. Number and percent of children ages 1 or older who receive annual dental screenings.		17%	17%	129, 17%
3. Number and percent of children at Kindergarten entry with untreated dental problems.		11%	5%	7, 18%
4. Number and percent of prenatal women who receive dental hygiene education.		24%	10%	25, 19%

**Sources:**

1. Children 0-5 seen at Sierra Park Dental more than once a year. Data updated for all three years with analysis by Mammoth Hospital based on Sierra Park Dental information. n=740 (100% reporting rate based on the census estimate of 739 children 0-5 in the county for 2016)
2. Children 0-5 seen at Sierra Park Dental annually for a screening from 2014-2016. Data updated for all three years with analysis by Mammoth Hospital based on Sierra Park Dental information. n=740 (100% reporting rate based on the census estimate of 739 children 0-5 in the county for 2016)
3. 7 Kindergarten Round Up Oral Health Assessments indicate untreated dental problems/ 39 oral health assessments = 18%  
39 students receiving an oral health assessment at Kindergarten Round Up/112 kinders=35% reporting rate
4. 25 prenatal WB! Visits/ 135 California Department of Finance 2016 Projected number of births= 19%  
19% reporting rate (same calculation as above)



# Fiscal Overview

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# FY 2016-17 Revenue

Revenue Type	Actual
Prop. 10 Tax Revenue	\$95,670
Small County Augmentation	\$254,330
SMIF (Surplus Money Investment Fund)	\$78
CAPIT (Parenting Partners)	\$30,000
IMPACT	\$57,144
Region 6 T&TA Hub	\$26,276
ICSOS Coaching	\$414
CDBG Administration	\$6,458
CDBG	\$244,313
Peapod Program (Prop. 63 Funds)	\$35,000
Raising A Reader	\$1,842
Miscellaneous	\$1,908
Interest on Mono County First 5 Trust Fund	\$7,094
<b>Total Revenue</b>	<b>\$760,527</b>



# FY 2016-17 Expense

Expense	Actual	% of Expenditures	% of Discretionary Funds	5-year Strategic Plan
Home Visiting	\$145,132	19%	32%	34%
School Readiness	\$86,194	11%	23%	19%
Peapod	\$36,315	5%	-	7%
Child Care Quality (& Availability)	\$351,936	46%	5%	9%
Oral Health	\$4,764	1%	1%	1%
Safe Kids Coalition	\$7,000	1%	2%	2%
Operations/Support/Evaluation	\$131,359	17%	36%	28%
<b>Total Expenses</b>	<b>\$762,700</b>			
<b>Total Revenue</b>	<b>\$760,527</b>			
<b>Net Revenue</b>	<b>(\$2,173)</b>			