



Bob Gardner
Commission Chair
Mono County Board of
Supervisors

2/21/19

Stacey Adler, PhD
Commission Vice-Chair
Mono County
Superintendent of Schools

Dear Commissioners,

I am grateful for the time you've set aside to participate in our Strategic Planning Retreat. Much of the updated draft is new, including community input on needs and suggestions about content from the Health Department. As you go through your packet and get ready for the retreat, I'd like to ask that you come prepared to share your thoughts on a few specifics:

Jeanne Sassin
Commission Secretary
Principal
Lee Vining Schools

1. What do you think the unmet needs are for children birth to five and their families in Mono County?
2. What are your ideas about how First 5 can sustain its infrastructure beyond the 5 years it will take to spend down the trust fund?
3. How can we better communicate our efforts with the public?

Dr. Tom Boo
Mono County Health
Officer

Dr. Kristin Collins
Pediatrician
Mammoth Hospital

The goals for our planning retreat are:

Bertha Jimenez
Case Manager III
Mono County Behavioral
Health

1. Identify potential indicators of success and outcomes
2. Prioritize strategies based on your identification of need, impact, and available infrastructure.

Patricia Robertson
Director
Mammoth Lakes Housing

Molly DesBaillets, MA
Executive Director First 5

I look forward to hearing your thoughts on the plan and am thankful to have so much time set aside to accommodate a discussion with our dedicated and experienced Commissioners.

Warmest of New Year's wishes,
Molly

Providing leadership in sustaining a network of support for all children, ages 0 through 5 years, and their families. Partnering with the community to improve outcomes in children's health, safety and learning.

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Special Meeting: Strategic Planning Retreat

AGENDA

February 21, 2019, 10:00 a.m. - 3:00 p.m.

The Westin Monache Resort

50 Hillside Drive, Gallery Conference Room, Mammoth Lakes

- 1. Public Comment** Members of the public are given the opportunity to address the Commission on items of interest and within the jurisdiction of the Commission as such items are discussed. This time is allowed for public input on any item not on the agenda. Time may be limited, depending on the number of speakers and items of business.
- 2. Review of Current Programs and Funding Levels** Staff will review the Quick Guide to Programs and Services Funded through First 5 Mono County. **(INFORMATION)**
- 3. Review Community Input** Commission will review input from: Interviews, written comments, the Community Meeting, Public Hearings, Invest In cards, and Focus Groups in Walker, Bridgeport, Mammoth Lakes (English and Spanish), and Crowley Lake. **(INFORMATION)**
- 4. Review Fiscal Plan** Commission will review updated 5 year fiscal plan and document comparing the current year to the 5 year forecast. **(INFORMATION)**
- 5. Commissioner Reports** Commissioners' opportunity to report on unmet community needs, suggestions for sustaining programs in the future, and other information pertaining to the Strategic Plan update. **(INFORMATION)**
- 6. Updated Draft 2019-2024 First 5 Mono Strategic Plan** Commission will direct staff on revisions to the Draft 2019-2024 Strategic Plan to be presented for a final Public Hearing at the next Commission meeting. **(ACTION)**
- 7. Director Report** This information may be reported elsewhere on agenda.

Next Meeting: March 28, 2019 2:30-4:30 p.m.

Mono County Office of Education Conference Room, Mammoth Lakes

Note: If you need disability modification or accommodation in order to participate in this meeting, please contact the Commission office at (760) 924-7626 at least 48 hours prior to the start of the meeting. Government Code Section 54954.2(a).



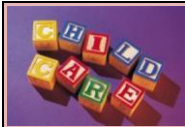
Programs and Services Funded by First 5 Mono FY 2018-19, Including 17-18 Outcomes

Health		
Organization	Services	Target Population
Operated by First 5 Mono \$169,830, with \$33,000 from CAPIT/CBCAP grant	<p>Welcome Baby! Program - Parent/Infant Home Visiting Home visits for all Mono County pregnant women, babies, and their families and include the following supports: breastfeeding assistance, developmental assessments, postpartum depression education and referrals, parenting education, connections to essential community and family services, Childbirth Education Courses in partnership with Mammoth Hospital</p> <p>Parenting Partners Home Visiting Program for families with children ages 1-5 years who have a parenting challenge</p>	Pregnant women and families with children ages 0 through 5
Operated by First 5 Mono \$4,370	<p>Tooth Tutor Program Helps families reduce the number of new and recurring dental cavities in children who have already experienced a high number of dental problems. Home visits by a bi-lingual health educator (the Tooth Tutor) who works directly with families to assess diet, teach proper oral hygiene, apply fluoride varnish, and provide dental supplies for the entire family.</p> <p>Oral Health Outreach and Education Dental education, topical fluoride varnish application, and free dental supplies provided to all preschoolers, countywide. Facilitation of countywide oral health partnerships to serve children 0-5, including training of professionals to provide services and supports.</p>	<p>Children 1-5 yrs who have a high number of dental caries</p> <p>Children 0-5 and their families</p>
Operated by First 5 Mono \$40,182, with \$40,000 from Prop 63 MCBH	<p>Peapod Program Parent/child playgroups are offered to provide parents an opportunity to enhance their child's social and emotional development through play. Postpartum depression education and awareness, with links to mental health services, including funding support for those with no other source of payment. Groups held in Lee Vining, Crowley, Walker, Bridgeport, Tri-Valley area, and Mammoth (groups in English and Spanish).</p>	Children 0-5 and their families
Mammoth Hospital & Mammoth Hospital Auxiliary	<p>Kit for New Parents & Breastfeeding Bags When new parents leave the hospital after birth, they receive a Breastfeeding Bag and a Kit for New Parents to support the family's ability to breastfeed and have information to use in caring for their newborn.</p>	Parents of Newborns
<p>INDICATORS:</p> <ul style="list-style-type: none"> A low percent of children at Kindergarten entry with untreated dental problems—no Percent of children ages 1 or older who receive annual dental screenings high or increasing—TBD Children regularly accessing preventive dental care high or increasing—TBD Percent of children in households where parents and other family members are receiving child-development and parenting education high or increasing—no, down2% from previous year <p>OUTCOMES:</p> <ul style="list-style-type: none"> Improved school readiness—insufficient data, less ready than kindergartners as a whole, more ready than kindergartners who did not participate in any locally funded early learning activities Improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health— achieved Improve screening and intervention for developmental delays, disabilities, and other special needs— achieved Improved access to healthcare services for children 0-5— achieved Increased breastfeeding rates—achieved 		



School Readiness

Organization	Services	Target Population/Investment
Operated by First 5 Mono *funding from the School Readiness budget	Reader's Theatre – Early literacy program.	Preschools, providers, teachers, and children.
Mono County Library System \$38,000 of F5 funding	Raising A Reader Early literacy program designed to foster healthy brain development, parent-child bonding and early literacy skills critical for school success by engaging parents in a routine of daily book cuddling with their children from birth to age five.	Children 0-5 and their families.
Elementary Schools \$18,47	Summer Bridge Program & Kindergarten Assessments Kindergarten Transition Program held each summer on school campus, taught by K Teachers. Designed to help prepare for Kindergarten all children, especially those who are not yet developmentally prepared to enter school in the fall.	Children who will enter Kindergarten or Transitional Kindergarten in the fall
Elementary Schools & First 5 Mono* \$29,857 *funding amount includes Readers' Theatre and Health & Safety Fairs	Kindergarten Round Up Kindergarten registration/information, K-readiness backpacks to every family, family outreach, linking teachers and administration with students and their families. Designed to provide a smooth transition to school.	Children who will enter Kindergarten or Transitional Kindergarten in the fall
Operated by First 5 Mono \$2,000	First Book Free age-appropriate children's books to ages 0-5 in the community	Children 0-5 and their families.
Operated by Mono County Office of Education	Footsteps2brilliance	
INDICATORS: <ul style="list-style-type: none"> Percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry increasing—insufficient data (baseline established in 2017-18) Percent of children receiving kindergarten transition support increasing or remaining high—no Percent of entering Kindergartners assessed for school readiness prior to entry increasing or remaining high—yes OUTCOMES: <ul style="list-style-type: none"> Improved school readiness—insufficient data, less ready than kindergartners as a whole, more ready than kindergartners who did not participate in any locally funded early learning activities 		



Child Care Quality

Item# 2
Mtg Date 2/21/19

Organization	Services	Target Population/Investment
Operated by First 5 Mono and Alpine Counties \$93,962 with \$88,962 from First 5 CA	Child Care Quality System-IMPACT—Mono & Alpine Counties <ul style="list-style-type: none"> Improve and Maximize Programs so All Children Thrive (IMPACT) has the goal of helping children ages 0 to 5 and their families thrive by increasing the number of high-quality early learning settings, including supporting and engaging families in the early learning process. 	Licensed Early Care and Education Providers
Operated by First 5 Mono \$15,625 from the California Department of Education	California State Preschool Program Block Grant—Mono & Alpine Counties <ul style="list-style-type: none"> For the support of local early learning Quality Rating and Improvement Systems (QRIS) that increase the number of low-income children in high-quality state preschool programs that prepare those children for success in school and life 	California State Preschool Programs
Operated by Mono, Inyo, and Alpine County First 5's, Inyo County Superintendent of Schools, Inyo Mono Advocates for Community Action, Cerro Coso Early Childhood Development Department, Choices for Children, & Alpine County Office of Education \$155,399 from First 5 CA	Training & Technical Assistance HUB—Mono, Alpine, and Inyo Counties <ul style="list-style-type: none"> First 5 Mono serves as the fiscal lead for the Regional Training and Technical Assistance Hub to support regional efficiencies in Childcare Quality work. Funds pay for travel to state and regional meetings, external Assessors for Spanish speaking Child Care sites, external coordination for the Hub from VIVA, the i-Pinwheel database to track sites' participation in regional childcare quality, and the Early Learning Needs Assessment Tool (ELNAT) database to analyze child data to determine needs. 	Licensed Early Care and Education Providers & Children 0-5 and their families.
INDICATORS <ul style="list-style-type: none"> Percent of children 6 months to 5 years old screened for developmental delays increasing—yes Percent of children served in licensed home childcare settings and childcare centers that exhibit moderate to high quality as measured by a quality index increasing—yes Percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix high or increasing—yes Percent of licensed center and family child care spaces per 100 children high or increasing—yes OUTCOMES <ul style="list-style-type: none"> Improved screening and intervention for developmental delays, disabilities, and other special needs—achieved Improved quality and availability of childcare providers—achieved Improved school readiness—not achieved 		

Organization	Services	Target Population/Investment
Coordinated by Mono County Office of Education (\$7,000)	Safe Kids California, Mono Partners <i>Group of agencies and organizations dedicated to child safety. Funding also provides free bike helmets and car seats.</i>	Children 0-5 and their families.
First 5 Mono *funding from the School Readiness budget	Health and Safety Fairs <i>Annual fairs in each community with an elementary school that include health & safety resources for families as well as playgroup activities.</i>	Children 0-5 and their families.
<p>INDICATOR</p> <ul style="list-style-type: none"> Are families county-wide informed about safety issues pertaining to young children and able to access Car Seat Safety Checks, Health and Safety Fairs, and Gun Safety Locks—yes <p>OUTCOME</p> <ul style="list-style-type: none"> Improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health— achieved 		

Research shows that a child's brain develops most dramatically in the first years of life and what parents and caregivers do during these years to support their child's growth will have a meaningful impact throughout life. Based on this research, California voters passed Proposition 10 in 1998, adding a 50 cents-per-pack tax on cigarettes to support programs for expectant parents and children ages 0 to 5.

Proposition 10 was designed to address the lack of public funding and support for early childhood development in the wake of a growing body of scientific evidence indicating that children's emotional, physical, social, and developmental environments have a profound impact on their ability to reach their greatest potential in school and to become productive members of society.

In 1999, the Mono County Board of Supervisors established the Mono County Children and Families Commission, also known as First 5 Mono County. The County receives \$350,000 each year in tax revenues and administrative augmentations. First 5 Mono County works with local organizations and individuals to improve family functioning, child development, and child health. For more information about the First 5 Mono County Commission, contact Molly DesBaillets at 760-924-7626.

The First 5 Mono County Commission is comprised of seven voting members:

Bob Gardner, Chair, Mono County Board of Supervisors
Stacey Adler, PhD, Secretary, Superintendent of Schools
Jeanne Sassin, School Principal
Kristin Collins, DO, Pediatrician
Bertha Jimenez, Mono County Behavioral Health Case Manager
Patricia Robertson, Mammoth Lakes Housing
Vacancy, Public Health Officer

First 5 Mono Staff:

Molly DesBaillets, MA, Executive Director
Kaylan Johnson, Administrative Assistant/Fiscal Specialist
Annaliesa Calhoun, Child Care Quality Coordinator, Welcome Baby! Home Visitor, & Crowley Peapod Leader
Elvira Felix de Cecena, Welcome Baby! Home Visitor & Child Care Provider Home Visitor
Lara Walker, CLEC, Welcome Baby! Home Visitor & Mammoth and Crowley Peapod Leader
Debbie Riffel, CLEC, Welcome Baby! Home Visitor
Jackie Miller, Mammoth & Crowley Peapod Leader
Teiya Gleason, Bridgeport Peapod Leader
Claudia Molina, Tooth Tutor

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**Walker Peapod Playgroup Focus Group
November 2, 2018**

Attending:

First 5: Molly, Leader Diana

Participants: 2 parents, 1 grandparent

Children: 4-ages 3, 5, 1.5, 2

1. What do you think about the First 5 program(s) you've participated in?

2. What do you like best about them?

- Parents have participated in Peapod, Home Visiting, and a Mommy and Me group elsewhere.
- Parent asks about what First 5 Home Visiting offers versus Early Start visits.
- My Home Visitor was helpful with sharing cognitive development information, breastfeeding, sleeping issues, and developmental assessments for my child.
- Socializing for the kids
- Nice to get out of the house and somewhere new, even if it's just us at the group.
- There's not a whole bunch of kids in Walker in this age group. So it is good to have some sort of socializing before entering school. Since he turns five in November, he isn't in school and there aren't kids his age. The school tried to get him to attend Head Start since he was the only one eligible for TK, but it wasn't worth the cost.
 - Molly: a Home Visitor could help advocate to the school so he can attend TK as it is a legal mandate to provide TK
- Peapod during the day offers something for the younger kids while the older kids are in school.

3. What is the biggest challenge about the program(s) for your family?

- Getting up and out of the house to come to Peapod.
- Same. First 5 makes it easy to attend.
- It's not hard to come to Peapod since I live right down the street.
- I think having something like this (Peapod) is big. Continuing outreach, getting the word out about something, getting consistency of attendance, letting parents know there is something available for younger kids in this rural area. Younger parents are more aware of what is going on than I am (grandma).
- Some moms I know go to work so it's hard for them to take the kids to Peapod, although they would like to attend. I don't know if the timing of Peapod matters since parents who are busy working tend to always be busy.

4. Can you tell us a memorable experience from the program?

-I took my child to the park and he was very impressed by Diana; he is shy but goes right up to her and Diana interacts with the kids very well.

-Last time I went when we just moved here, Chanden was hosting and it was nice to meet her with kids and she was pregnant too.

-My Home Visitor was amazing. It was helpful to be informed; she was willing to help for any little thing. It made our first year a lot easier.

5. Suppose you were in charge and could make one change that would make the program better, what would it be?

-Add a social media platform for Peapod. I never know what's going on because I don't have a child in school yet. I do get the First 5 email updates, but they are more generic for the county. It would be nice if there was a platform specifically for this area (also for events not hosted by First 5).

-Knowing what programs are available is hard in this rural area. My husband works for the county and that's how we found out about Home Visiting.

-First 5 did call me when I gave birth to my last child, but it wasn't my first kid so I declined at that time.

-I go to the Walker store bulletin board to find information, but often I will find out about things after they've happened [community wide activities, not just First 5].

6. What types of things are needed for families with kids b-5 in this area?

-Childcare options/daycare setting. The moms I know use relatives. It would be nice to have the option of a few hours of care, education, and fun play for my child. I like how Peapod does it where the kids are getting a learning/play combination instead of just being dropped off at someone's house.

Bridgeport Peapod Playgroup Focus Group

November 8, 2018

Attending:

First 5: Molly, Kaylan, Leader Teiya

Participants: 3 parents

Children: 3-ages 2.5, 2, 2

1. What do you think about the First 5 program(s) you've participated in?

2. What do you like best about them?

-I have only participated in the Peapod Playgroup, Story Time at the Bridgeport library, and the Health & Safety Fair - really enjoyed that with fingerprinting and bike helmet, seeing other kids and people. Playgroup is amazing, my child loves Teiya, asks to go to her house and says Teiya is her best friend. My child is better at interacting with children now after attending Peapod regularly and being an only child is hard. The Story Time gets her in the library more and we enjoy the fun craft.

-I have attended many Peapods, really enjoy Crowley Peapod activities and art project-the leader is great organizing and keeping the flow of peapod for children and adults. The communication and mental health support was the best in Mammoth. I think there could be more education for the leaders in Lee Vining and Bridgeport. I know the funding is geared towards mental health. Children are able to socialize with each other. Groups like this are very important to our community, but I would love to see more activities other than just story time or circle time, although the repetition is great. The furthered education like teaching balance, taking turns, coordination, fine and major motor skills, are very important and could easily be incorporated under the First 5 umbrella. The Crowley leader could train other leaders.

-I have attended a Peapod at Coleville and one at Bridgeport. I really liked the Coleville group because it was at a better time, at 10am, even though it was farther than Bridgeport. The leader did a story and I received pamphlets and info about the group; she told me lots of information about the group. I haven't made it back due to car and timing. The Bridgeport Peapod time is difficult because our naptime is after noon. At Coleville I learned about someone coming to your house [Home Visiting] to provide preschool activities. I like getting some education as well as play based learning. I plan to call and sign up.

-I like the free play at Peapod, because then we get structure with crafts on Wed at Story Time, although I haven't been to any other structured Peapod.

-We have lactation (thru first 5), you have Home Visiting for a new baby. First 5 is amazing in what it provides already, especially since it is not limited to low income families in Mono County, like in other areas. To be included is amazing.

3. What is the biggest challenge about the program(s) for your family?

-Getting out of the house, making the commitment to get out of the house and overcoming the uncertainty of how playgroup goes – will there be free play, circle time, or space for adults to talk?

-My child likes being with the other kids and running around. It's just myself and my child so it is not as difficult to come to Peapod.

-Getting here around naptimes

-Figuring out how to get big kids out of school while attending Peapod for little kids.

-Is there more consistency with attendance in other locations? In Bridgeport it is usually very few kids and not the same people every time except for Teiya and her boys. Are the playgroups supposed to be structured? At Story Time on Wednesdays, it is more structured with story and craft.

-Molly: Yes, other locations do have more consistent attendance. Groups have been tailored to leaders' strengths since they know their communities better than me because I don't live in the community. I have gone back and forth between requiring structure or not, because I want to listen to what the community wants. Bottom up not top down.

-During the structured time, there are always kids that don't participate and it doesn't work for everyone, which is cool that it is allowed. Everyone's eyes are protecting each other and the kids stay in a safe zone.

-Molly: When training Peapod Leaders, there is an ideal structure - beginning circle time, free play, end circle time with parachute - depending on attendance level, age of kids, and the dynamic of the group.

-I don't know if structure would make much of a difference in Bridgeport in people attending. If the leader has something planned every time and then no one attends, that is frustrating. I don't know if this is a Bridgeport specific thing or what, since people here are kind of like that.

-Molly: Specifically in Bridgeport, there are often new families, often CHP. I realized the hole in the focus groups data is the feedback from the people that are not coming to Peapod because they already can't come to Peapod in the first place, and the reasons remain unknown.

- The playgroup in Coleville - the 2 kids there got a chance to play together even though they are different age groups. In Bridgeport, it was a little chaotic and hard for the toddlers to play together because there were older kids running around, which sucked.

4. Can you tell us a memorable experience from the program?

-I had a broad experience with Ms. Amber in Mammoth Peapod – the group was the same every time, circle time with songs all in order helps the kids learn the songs. I also remember one mom who was having a hard time and it brought out other moms empathy and compassion to support each other, which what Peapod is supposed to be.

5. Suppose you were in charge and could make one change that would make the program better, what would it be?

- Timing, hold Bridgeport playgroup in the morning
- Peapod at 10 am wouldn't work for me since that is our naptime.
- Fridays in the morning would be cool, but I know the playgroup leader works at the school too.
- Having an activity - reading, art, singing, circle time. I haven't made it on time to playgroup so I haven't experienced the whole time. At Mommy and Me groups, we did an introduction with names, circle time, and guided play like ballet, gymnastics, then goodbye circle time with a song. It really connects kids and they get to know names while associating with an activity, more of a structured time connects the kids and adults. My child was in a preschool before we moved and we always sang the same song at the end.
- More big things - tumbling blocks, large items, mats, balance beam, and teeter totter/bridge, active kind of things.
 - Molly: Storage is an issue at the Memorial Hall, even though I agree with you. There is a lot of space to be utilized to store, but the County must allow it, and I can ask again.

6. What types of things are needed for families with kids b-5 in this area?

- I would love to offer ballet/dance classes, especially through first 5, or through another entity like Mono arts, MCBH - as a creative outlet for littles. If I do it on my own, it is an expense to parents, but if it's through First 5, it's a non-expense. There are very limited options for little ones around here.
- A lot of parents responded to interest in ballet classes when a mom made a facebook post about creating a group.
- It's hard to shell out money for something like ballet with such young kids, but starting in the first 5 years, they have a focus which peaks interest and desire to learn. It opens them up to a world that is different than what they already know. And then after that, I could open classes to big kids.
- Basic skills classes like ballet, art, swimming class for kids. I pay \$65 to take my child to Gardnerville swimming class but she did better when we were home. Maybe a place like a Rec center, not necessarily an organized activity though.
- First 5 should invest in children and art, talk about travel, college, the world. (Seconded by parent)
- Tinkergarten: Mom, dad, and kid meet up and do activities: go hiking, parachute, play in the mud, jump on the tree, but parents here do things like that anyway. Daycare can be pretty boring, so why not start something like a nature school, something physical, active, and together, but you do not have to commit every time.
- My friend started a Hike and Baby club – we did a couple hikes with kids this year, but it was just me and her. If we could open it up to everyone with more people together so it is safe and scheduled.
- In a larger group, you are more apt to show up. I don't know how to create more attendance other than social media and encourage people to come. It is so hard to get people to commit.

-In a small town, it gets into personality.

-Consistency is key. I really think it is a Bridgeport thing where people just don't attend regularly.

-I feel like we have a good influx of kids in town right now, but how to get them here?

-The Home Visitors are super helpful and so kind, like a friend you never knew you had. I was really depressed after every birth. Maybe the Home Visitor could promote Peapod more. I really needed someone to motivate me to get out and socialize.

-Molly: That's a great idea, we certainly do that, and we will keep promoting Peapod through Home Visits.

-Books, but there is a library, but I did hear with Home Visiting they can deliver books (RAR).

-Daycare or any sort of activities would be great, though I don't know what's in the scope of First 5.

-More mom and baby based activities to get out of the house during work hours. That's probably the most stressful thing, going stir-crazy. Activities like yoga, mommy and me ballet, with men too, gymnastics, workout program - Stroller Strides (women leaders who are trained to provide a workout regime with a stroller and kid, walking or running, and with a playgroup afterwards), although it is expensive for families.

-At Coleville, we got a calendar of events but I wasn't sure if that was first 5 funded. It was more family oriented.

-Molly: Yes, part of Peapod is to share information and MCBH is our partner and the ones hosting the programs on that calendar. [Wellness Center calendar]

-Summer time child care would be great, a First 5 half-day school hour child care, I think the preschool here is an 8 hour day and that is long for some kids. Children that would be needing care are ages 0-2 and it is nearly impossible to cover the costs of care as a provider. After giving it a shot, I figured the average amount here paid is \$3/hr. I'm also afraid of having childcare in my house due to the safety issues-the highway, the lake, fences. How do I get thru licensing?

-Molly: At the Bridgeport Preschool, it's not mandated that the child stay in preschool for 8 hrs, it can be a half day if the parent wants. They do have to be toilet-taught. Also, for providers, the alternative payment program pays for childcare for low income families. There are providers in Mammoth who make \$40k and up a year.

If a provider goes through the Trustline process, they are allowed to care for their own kids plus one other. To be licensed, you do have to have fencing, child safety gates, fire gates, etc. There is a \$500 scholarship to help with costs and the Mono County Childcare Council has funds to help get licensed too.

Other sites in Bridgeport for childcare - there was a church on Hwy 182 that used to have a preschool, and in the Memorial Hall which would be a County ask; there are the issues of education needed for non home based childcare and insurance costs. A way around the education requirements is parent co ops which are license exempt. Parents participating in the co op trade off watching the kids at a central location. I do have information on parent co ops that have tried to open in the area. It's still an application process to open become license-exempt.

Little Loopers in June Lake is opening a house with a live-in teacher instead of a center, making it a family childcare home - which does not require much education, but does require licensing. In a center, the teacher education is not that many units, but they have to be under a Director. In many communities, the Director of a center is loosely affiliated with the center.

-A parent co op kind of freaks me out, trusting other parents with my kids. There are lots of horrible things that can happen and I wouldn't know their background or education. You'd have to have a tight-knit group.

-I like the summer care idea - there are more residents in the summer.

**Mammoth English Peapod Playgroup Focus Group
October 18, 2018
Attending:**

**First 5: Molly, Kaylan, Leaders Jackie & Lara
Participants: 5 parents, 2 grandparents
Children: 8-ages 1, 2 (5), 3, 4 years**

1. What do you think about the First 5 program(s) you've participated in?

2. What do you like best about them?

-Early Start playgroup

-First 5 playgroups in Visalia

-Home Visiting

-My only child has learned much watching other kids [at Peapod], like climbing, developing gross motor skills at Peapod in Mammoth and Crowley. She didn't have this before.

-My older child is exposed to other kids [at Peapod]. He gets to improve and practice behavior and sharing, gives him something to look forward too since he doesn't go to preschool, the structure and ritual, and he can practice participating (circle, singing, play, parachute, etc).

- As a first time parent, I found it [Home Visiting] reassuring. I enjoyed the one on one interaction and advice from the home visitor.

-The drop in availability is nice; it's welcoming, not *having* to be regulars.

-I was new to the area, nice to develop connections with other people

-It offers resources to use and borrow - potty training book.

-Provides structure for my only child, exposure to other kids; my child was reserved at first and now feels comfortable around everyone.

-Makes it easy to find kids the same age and parents with kids of the same age.

-First 5 is great in CA, I have friends outside of CA who want programs like this.

3. What is the biggest challenge about the program(s) for your family?

-The timing of Peapod can be during our naptimes, but it makes for good practice in schedule changes and there's not much you can do about it since there's never a perfect time with kids.

-Naptime

-Morning time is better, evening is harder because of dinner and bedtime, and in winter

-Getting out of the house

4. Can you tell us a memorable experience from the program?

-At Crowley Peapod, there was cow poop everywhere at the park this summer. The Peapod leaders borrowed my [the parent's] shovel and removed the poop so kids could play, much applauded and appreciated.

5. Suppose you were in charge and could make one change that would make the program better, what would it be?

-A parent asks if there are any known changes down the line for First 5 programs. Molly responds saying nothing right now but funding always impacts programs.

6. What types of things are needed for families with kids b-5 in this area?

-Finding daycare and childcare providers with recommendations; IMACA offers information only

-Daycare is in short supply which is a big challenge for young families. Personally, I'm in need of daycare a few mornings a week.

-Finding care outside of home care is hard, like in preschools

- Mammoth Hospital is still talking about creating a drop-in center for employees

-Drop in care would be easier than scheduled daycare or preschools

-MMSA has a drop in daycare, but it is only for MMSA employees and is very pricey even with the discount.

-Bishop is easier finding a care/preschool spot, but only because my husband commutes to Bishop

-Molly: MCOE is trying to create a drop in daycare at skate rink location

-Lack of indoor space in winter time (a few parents said they use the library or ride the buses for entertainment)

-where to take kids when weather is bad (McDonalds playground is gone)

-go to Bishop in winter

-Nice to have a central resource area - if you need or want to donate items, to exchange kids' items (seasonal, bikes, clothing, strollers), it's hard to buy everything you need in Mono County

-where can people donate food & formula? IMACA & Salvation Army

-Thanks for the services you do.

Mammoth Spanish Peapod Playgroup Focus Group

October 17, 2018

Attending:

First 5: Molly, Leader Lara

Participant: 1 English speaking parent

Children: 2-ages 9 months & 3 years

1. What do you think about the First 5 program(s) you've participated in?

2. What do you like best about them?

- Home Visiting was very helpful with my first child. Debbie helped me a lot with breastfeeding and having someone to talk to was really great. I don't have any family here, and find that many other parents are in the same situation here, and it was nice to have someone to talk with and focus on my child. The program helped me take time to focus on my child.

-The programs really helped me have someone to talk to. Like I said, I don't have any family here and I could feel really isolated, but with the programs, I definitely had support and someone to talk with that was really helpful to me.

-I'm not sure what I liked best. We did get a book that we still read together all the time; it's a great book, The Rainbow Fish.

3. What is the biggest challenge about the program(s) for your family?

-I can't think of any challenges.

4. Can you tell us a memorable experience from the program?

-I can't think of any good stories.

5. Suppose you were in charge and could make one change that would make the program better, what would it be?

6. What types of things are needed for families with kids b-5 in this area?

-I know it was really hard for me the first year to find a space indoors for my child to play in. We tried Peapod when he was young, but I felt like I had to always be aware of what the other kids were doing to keep my child safe. We really liked going to Peapod when he got older, it was just hard when he was an infant. We did end up finding another Peapod that worked better for us when he was little in Crowley.

Crowley Peapod Playgroup Focus Group

October 26, 2018

Attending:

First 5: Molly, Kaylan, Leaders Jackie & Annaliesa

Participants: 4 parents, 3 grandparents

Children: 6-ages 9m, 2yr, ?

1. What do you think about the First 5 program(s) you've participated in?

2. What do you like best about them?

-We moved to Bishop and found Peapod after taking a ride on the gondola and the host [who is also a First 5 employee] recommended it. So I attend the Mammoth Peapod and then Crowley. I am new to the area; it's nice because of the set schedule, the chance to get people together, and socialization for my younger child.

- I found out about First 5 at the Mammoth Hospital Birthing Classes with Debbie & Lara. We signed up for Home Visiting which was a huge help with breastfeeding. The Home Visitor told us about Peapod. It has been hard to come because my child is always asleep at this time.

-Very good. We like being in the parks and inside at Peapod, well planned & executed, gets kids out of the house, versatility for kids and caregiver.

-We didn't do Home Visiting here, but would have appreciated breastfeeding help in the city where I gave birth before moving here.

-Home Visits were super helpful, prenatally & after birth, and the visit in the hospital. The Home Visitor was able to answer a lot of questions for dad too, keeping him involved. Appreciated the baby weight checks since my baby was super small. Peapod creates community, where other similar chances are few in Eastern Sierra; it's easy to feel separated from families and community here.

-Hospital visits right after birth and breastfeeding coaching was gigantic, it would have been very hard without the help and being on our own.

-People stay at the park after Peapod and socialize.

-I see how much my child likes seeing other children. Otherwise, I wouldn't push her to do social events.

3. What is the biggest challenge about the program(s) for your family?

-The 10:00 am time is always a nap issue for young ones, but I'd rather go with the nap than come to Peapod so my child can get sleep. Now my child is older so it is more doable.

-Naptime is not too much of an issue for me, my kids can nap on the drive to and from Peapod.

-I wish the group was longer since we commute to come here and we usually spend 2-3 hours at a park on our own because my older child is so active. He gets sad when it is time to put everything away at Peapod.

-We could probably go for longer, even though my child is still young.

4. Can you tell us a memorable experience from the program?

-Mammoth Peapod, it was really nice after just moving here. It was nice to acclimate my kids away after moving away from family. My son could go up to any adult and they made him feel comfortable, and eased the guilt for me as a parent. I could talk to adults at Peapod, making me feel more welcome to the area.

-The forum of Peapod helps connect caregivers: knowing where people live close by, where folks take walks in the neighborhood, creating community, connecting families, attending birthday parties after meeting people at Peapod.

5. Suppose you were in charge and could make one change that would make the program better, what would it be?

-If I hadn't been told about Peapod by the host at MMSA, I wouldn't have found it (parent lives in Bishop), even after searching on the internet. More advertising or online posting.

-Could add reading time to Peapod. My Home Visitor has been good about reading bilingual books, but we would enjoy and use a bilingual playgroup.

-Not sure, seems pretty well established to me.

6. What types of things are needed for families with kids b-5 in this area?

-I think back to how much help you need as a new parent and family. I'm not a new mom now, but how to find new mom groups locally, especially in a small town. Groups also create a way for kids to grow up together.

-How to find a responsible babysitter

-Could First 5 vet babysitters?

-Molly: The Commission has chosen not to fund babysitters in the past, but we could provide support to parents on how to convene babysitter groups.

-As a new parent, I ended up going south to family to find support and care since I couldn't find much in Mammoth. Having something for new moms once a month would be nice. I would have gone to the Cafe Mom Breastfeeding group but it didn't fit my schedule at the time. I teach prenatal yoga, and there are a lot of new first time moms, especially over 35 moms.

-Does First 5 have language development assistance or methodologies for helping kids learn to communicate? (Caregiver had taught 8m old baby sign language and it helped with communication frustration)

-Molly: Our Home Visitors and Peapod Leaders are trained in child development that encompasses language acquisition. We also do developmental screenings which can refer language delays to specialists and early intervention.

Interview with Leslie Chapman, County Administrative Officer, Mono County

What do you know about First 5?

Leslie: I know about the First 5 program itself, but as far as the local program I can't go into detail because I haven't been involved in it. I think First 5 is a great program; age 0-5 is an important time. I'm happy there are programs in Bridgeport, including the CDBG funded preschool. It solved some problems in the Bridgeport community. We're really pleased based on the feedback from that program, from Finance.

Any challenges with First 5 in the County or things you've heard from the community?

Leslie: I haven't heard any negative input at all.

Molly: Do you have any personal experience with First 5?

Leslie: No, I don't have children or grandchildren.

Molly: Have you heard from any County employees getting Home Visiting or going to Playgroups?

Leslie: No, that's going to be Kathy [Peterson].

Would you make any changes or suggestions for improvement?

Leslie: No.

What do you think kids birth to 5 and their families need?

Leslie: I think they need support, preschool education, childcare is big, and good nutrition.

Molly: Interesting you bring up childcare, it's been a priority for so many years in our County. Two of our Commissioners, BOS Bob Gardner and Mammoth Lakes Housing's Patricia Robertson, at our last meeting told me that childcare had dropped off as priorities for the County and the Town.

Leslie: I don't know if they've dropped off. But there is no apparent solution to the childcare situation right now; it depends on providers and it hasn't been a service that the County has provided. It would be a shift in figuring out what to do with it. I haven't met with Stacey [Adler] in awhile, but she was looking at possible childcare solutions and seeing if we could support that through CDBG or other funding. We recently did a state economic survey of the County, determining what a 'living wage' is in Mono County and how it compares to other places in the state, and it was interesting to see the cost and availability of childcare; it's just ridiculous. There are several line items and the one that really jumps out is childcare. It's a website; I'll email it to you.

Molly: The Economic Development survey results showed that lack of childcare was one thing that employers noticed as hard for employees to get to work. Stacey has been working on a solution to this; First 5 is in a back seat at this point, but the more input the better.

Leslie: I guess we have turned our focus a lot more to housing.

Molly: Housing planning can sometimes include childcare on site depending on what kind of housing.

Leslie: Yes, if you have no childcare, you still can't work here if you have children. It's all related.

Email from Sandra Pierce, Public Health Director, Mono County Public Health

What First 5 program(s) are you familiar with?

- Peapod Groups
- Welcome Baby! home visiting program
- Raising A Reader
- Kindergarten Roundup
- Bridge Program
- AB-212 Child Care Program
- Oral Health outreach via Tooth Tutor/Topical Fluoride Varnish

What do you like best about them?

- Peapod Groups: Opportunity for families with small children to meet, socialize, network, and receive information from partner agencies. This is a great program to build on the Strengthening Families key protective factors.
- Welcome Baby! home visiting program: Home visiting services for high risk families referred via Child Protective Services, Probation, or Court.
- Raising a Reader: A wonderful collection of books to promote reading for families, especially those who may not have a book collection at home, or be able to access the library during working hours.
- Kindergarten Roundup: Bringing together all the information parents need for their child to start kindergarten.
- Bridge Program: Prepare incoming kindergarteners for the start of school... getting used to the new environment, classmates, and teachers without all the older kids on campus (which can be overwhelming)
- AB-212 Child Care Program: Promoting increased education for child care providers, and higher quality child care facilities.
- Oral Health outreach via Tooth Tutor/Topical Fluoride Varnish: Teaching young children about healthy oral health habits and providing an oral health assessment. The assessment may lead to a dental referral for children who may not have otherwise visited the dentist.

What is the biggest challenge about the program(s) for your agency?

- Limitation of not being able to collaborate on community efforts for age groups outside of prenatal-5.

Can you tell us a memorable experience about First 5?

- The initial fear my daughter felt about going to kindergarten, and the comfort of getting to know the school facility, classmates, and teachers through the Bridge Program.

Suppose you were in charge and could make one change that would make First 5 Mono better, what would it be?

- Offering the Peapod program on weekends as well as weekdays so parents who work a 9-5 M-F can participate as well.

What types of things are needed for families with kids b-5 in Mono County?

- Increased slots for quality childcare
- Affordable and safe housing
- Access to health and support services without fear of deportation or family members becoming ineligible for citizenship
- Continued oral health education and linkage to care

Email comment from Kathy Peterson, Director, Mono County Department of Social Services

I talked with staff about what they view as priority needs. Here is the group list:

- Child Care for all populations, and all regions of the county
- Housing, including affordable housing
- Dental treatment, esp. the ability to access oral surgery within county, for low income populations
- Vision services, for adults and children, and especially for those who lack transportation
- Trauma-informed Play Therapy and Parent Child Interactive Therapy

In addition, Kathy shared the newly released Child and Family Services review County Self Assessment. Excerpts pertaining to First 5 are highlighted and included below.

California - Child and Family Services Review

County Self-Assessment



Rev. 12/2013

Introduction

The Mono County Department of Social Services (MCDSS) and the Mono County Probation Department (MCPD) have completed this County Self-Assessment (CSA) in accordance with the provision of the Child Welfare Outcome and Accountability System, referred to as the California Child and Family Services Review (C-CFSR). The Mono CSA is one piece of a larger continuous quality improvement process which relies on both qualitative and quantitative data to guide Social Services and Probation in planning for program enhancements. The C-CFSR was established by the California's Child Welfare System Improvement and Accountability Act (AB 636). As required by AB 636, Mono County must regularly analyze, in collaboration with key community stakeholders (e.g., parents, youth in foster care, public agency personnel, staff from community-based organizations, foster parents and relatives caring for youth in foster care) through a structured format its performance on specific child welfare and probation outcomes.

State and Federal outcomes are measured, for children involved in child welfare out of home placement, including those served by probation, using quantitative data collected by the statewide child welfare database Child Welfare Services / Case Management System (CWS/CMS). In addition to analyzing the outcome indicators the Department of Social Services and Probation must review systematic and community factors that correspond to the federal review. Areas needing improvement are incorporated into a five-year System Improvement Plan (SIP), which is also developed in partnership with community stakeholders and partners. The SIP must both be approved by the Mono County Board of Supervisors and submitted to the State.

In addition, the Mono County Self-Assessment includes plans for the expenditure of federal and state funds for the Promoting Safe and Stable Families (PSSF), Child Abuse Prevention, Intervention and Treatment (CAPIT) and Community Based Child Abuse Prevention (CBCAP). Mono County's last County Self-Assessment was completed in 2013 and was the basis

for the most recent SIP goals and strategies. Planning for the current CSA was built upon the progress that was made during the past five years and related to the SIP to improve collaboration and increase resources for families in our County despite limited resources and the challenges that face California small rural counties. The commitment of staff in both child welfare and probation and the support of our community partners has been vital to our progress and will continue to be the foundation of our capacity to protect children from abuse in Mono County and strengthen families.

A stakeholder meeting was conducted on May 17, 2018 from 9:00am to 12:00pm at the Snow Creek Athletic Club in Mammoth Lakes. Participants were given a presentation on the demographics and outcome data for Mono County and a brief overview of the day's event schedule. Small focus groups were conducted within the meeting on a range of pertinent topics: Permanency, Reentry, Well-Being and Transitional Age Youth, Recurrence of Maltreatment and a variety of global questions interrelated to child welfare.

Two sets of focus groups occurred over the course of two hours during the peer review on day one. One set of biological parents and X child welfare supervisors were interviewed in these two focus groups. Findings from the stakeholder event and focus groups have been summarized and summaries are placed throughout the report in relevant analyses of each of these topics.

- a **Probation Parents: 4; children's ages – 16 & 18**
- b **CWS Parents: 3; children's ages – 10months, 5, 6 and 24 years old**
- c **Foster Parents: 2; children's ages – 3 & 5 years old**

C-CFSR Planning Team & Core Representatives

Demographic Profile

GENERAL COUNTY DEMOGRAPHICS

Located in the east central portion of California, Mono County encompasses 3,048.98 square miles which includes National forests, such as Yosemite National Park, lakes for fishing, trails for hiking or biking and beautiful mountains. As of July 1, 2017, Mono County has a total estimated population of 14,168 individuals, with 19.1% of those individuals under age 18. The county has a population per square mile of 4.7. Racial and ethnic data breakdowns are provided in the tables below. The following tables illustrate these demographics based on U.S. Census data as of July 1, 2017 (V2017).¹

Mono County has a lower percentage of families living below the poverty line (compared to California averages). Mono County also has a relatively low unemployment rate. Limited family supports, and services is the main regional problem facing Mono County. In particular, services in outlying communities such as Coleville/Walker and Benton are very sparse. Complicating the sparsity of services is the very limited public transit system serving the eastern sierra. Access to specialized (or even the most basic) services requires long drives to more urban areas. Transportation issues are noted throughout the report (see pg. 62).

Table 1: Mono County Estimated Population, by Race, 2017

Race	Est. Number	Percent
White, alone	12,907	91.1%
Black African American, alone	113	0.8%
American Indian or Alaska Native, alone	411	0.3%
Asian, alone	255	0.2%
Native Hawaiian or Pacific Islander, alone	113	0.8%
Two or More Races	368	0.3%

¹ U.S. Census Bureau: State and County QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits. Accessed April 30, 2018 at <https://www.census.gov/quickfacts/fact/table/monocountycalifornia/PST045217#qf-headnote-a>

Hispanic or Latino	3,925	2.7%
White, not Hispanic or Latino	9,252	65.3%
Total	14,168	

Source: U.S. Census Bureau, State and County Quick Facts, July 1, 2017 (V2017).

According to the US Census in 2017 of the 14,168 residents of Mono County, approximately 5.0% are children under the age of 5 and 19.1% are children under the age of 18.

Table 2: Mono County Population under Age 20 by Race/Ethnicity, 2017²

Race/Ethnicity	Number	Percent
White, alone	1,593	48.6%
Hispanic or Latino	1,475	45.0%
Native American, alone	51	1.6%
Asian/Pacific Islander (P.I.), alone	33	1.0%
Black, alone	4	0.1%
Two or More Races, alone	120	3.7%
Total	3,276	100.0%

According to these US Census Bureau data, 25.9% of persons aged 5 years or older speak a language other than English at home. Additional data that stratify which languages are spoken by whom are not currently available. In reviewing ethnicity data between 2013 – 2017, it appears that the ethnic/racial composition of youth in Mono has remained fairly static. Therefore changes in CPS/Probation youth are not related to changes in Mono County's demographics.

Table 3: Additional County Demographic Information, 2016

Category	Information ³
Median Income ⁴	The latest available census data indicates that the median household income was \$58,937 in 2016; This dropped slightly from \$61,184 in 2010

²Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 4/30/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: <http://cssr.berkeley.edu/ucb_childwelfare>

³ All figures represented in the dollars of their listed years with no adjustments for inflation

⁴ U.S. Census Bureau: State and County QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State

Unemployment Data ⁵	The unemployment rate was 3.7% in February 2018, down approximately 43% from 2013 (8.6%)
Poverty Rate ⁴	As of 2016 census data, 11.5% of people in Mono County lived below the federal poverty line; There was only a 0.3% increase from the 2007-2011 poverty rate (11.2%)
Average Housing Costs ⁴	The median value of owner-occupied housing units in 2016 was \$286,100, with the median monthly mortgage payment at \$1,925 and the median gross rent at \$1,107
Homelessness Data ⁶	There were 92 homeless individuals in the Continuum of Care (CoC) which include Alpine, Inyo and Mono Counties (CA-530), based on the latest survey data (CoC HUD, 2017). 11 of these individuals were children under the age of 18. Homeless rates were not available in the last CSA cycle.
Federally Recognized Tribes	Mono County has two Federally recognized tribes, the Utu Utu Gwaitu Paiute Tribe of the Benton Paiute Reservation and the Bridgeport Indian Colony

Mono County has two federally recognized tribes: Bridgeport Indian Colony and the Utu Utu Gwaitu Paiute Tribe of the Benton Paiute Reservation. Social Services for these Reservations are handled by Toiyabe Indian Health Project (TIHP). Toiyabe Family Services provides professional therapeutic counseling combined with prevention strategies and counseling interventions with a strong emphasis on cultural and traditional activities. Other annual activities include Safe Talk Training, the Walk for Life suicide prevention event, and Pine Nut Camp. MCDSS works cooperatively with TIHP on a case by case basis to ensure coordination of services. Access to TIHP services for families on the Benton Paiute Reservation, in particular, can be challenging due to the 35-mile distance from the reservation to Bishop where TIHP is located. Public transportation is limited in this part of the county.

CHILD MALTREATMENT INDICATORS

and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits. Accessed April 30, 2018 at <https://www.census.gov/quickfacts/fact/table/monocountycalifornia/POP815216#viewtop6>

⁵ United States Department of Labor, Bureau of Labor Statistics: Local Areal Unemployment Statistics. Accessed April 30, 2018 at <https://data.bls.gov/map/MapToolServlet>

⁶ HUD Exchange. HUD 2016 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. Accessed April 30, 2018 at https://www.hudexchange.info/resource/reportmanagement/published/CoC_PopSub_CoC_CA-530-2017_CA_2017.pdf

The following tables provide demographic information on children who were the subjects of referrals (i.e. suspected child abuse reports. These data come from the California Department of Social Services quarterly reports available from the UC Berkeley Center for Social Services Research, <http://cssr.berkeley.edu/cwscmsreports> unless otherwise noted.

Table 4: Child Maltreatment Indicators

Category	Information
Number of Low-Birth Weight Newborns ⁷	LNE (Low Number Event) refers to data that have been suppressed because there were fewer than 20 low-birthweight births.
Number of Children Born to Teen Parents ⁸	LNE (Low Number Event) refers to data that have been suppressed because there were fewer than 20 teen births.
Family Structure ⁹	Female-Headed Households – LNE Male-Headed Households - LNE Married Couple (Opposite Sex) - LNE Unmarried Couple (Opposite Sex) - LNE Unmarried or Married Same-Sex Couple – LNE Other Households (includes children living alone or with nonrelatives) – LNE Note: LNE (Low Number Event) refers to estimates that have been suppressed because the margin of error was greater than 5 percentage points.
Housing Costs & Availability ¹⁰	The median value of owner-occupied housing units in 2016 was \$286,100,(a significant drop from 2007-2011 at \$428,600, following state- and nationwide trends during the last recession) with the median monthly mortgage payment at \$1,925 and the median gross rent at \$1,107. The owner-occupied rate is 55.2%. As of July 1, 2016, there were 14,053 housing units in Mono County.

2-1-1 Monthly Call Averages¹¹ Mono County does not have a 2-1-1 service.

⁷ Kidsdata.org, accessed April 30, 2018 at <http://www.kidsdata.org/topic/301/lowbirthweight/table#fmt=91&loc=352&tf=73&sortColumnId=0&sortType=asc>

⁸ Kidsdata.org, accessed April 30, 2018 at <http://www.kidsdata.org/topic/314/teenbirths/table#fmt=850&loc=352&tf=73&sortColumnId=0&sortType=asc>

⁹ Kidsdata.org, accessed April 30, 2018. <http://www.kidsdata.org/topic/301/lowbirthweight/table#fmt=91&loc=352&tf=73&sortColumnId=0&sortType=asc>

¹⁰ United States Census Bureau, QuickFacts, Mono County, California. Accessed April 30, 2018 at <https://www.census.gov/quickfacts/fact/table/monocountycalifornia/PST045216>

¹¹ 2-1-1. Accessed April 30, 2018 at <http://www.211.org/search?zip=&city=BRIDGEPORT&state=CA>

Substance Abuse Data ¹²	The reported rate of opioid overdose hospitalizations in 2016 was zero cases per 100,000 people (age-adjusted in 2016).
Mental Health Data ¹³	120 adults received Specialty Mental Health Services in FY 2015-2016 compared to 48 adults in FY 2012-2013.
Child Fatalities & Near Fatalities ¹⁴	There were no Child Fatalities or Near Fatalities resulting from Abuse and/or Neglect.
Children with Disabilities ¹⁵	52 kids or 1.8% of the children in Mono County have a major disability, compared with 3.1% for the state as a whole
Rate of Law Enforcement Calls for Domestic Violence ¹⁶	Mono County law enforcement received 118 calls for domestic violence, of which 11.8% (14) involved a weapon. Calls for domestic violence have significantly increased over the past 10 years (63.5%) with a low of 75 calls in 2007. However, calls involving a weapon have stayed relatively the same for the past 10 years (low of 4 in 2008 and high of 16 in 2009).
Rate of Emergency Room Visits for Child Victims of Avoidable Injuries ¹⁷	LNE (Low Number Event) refers to data that have been suppressed because there were fewer than

Explanatory Notes for Participation and Caseload Demographic Tables

UC Berkeley counts unduplicated numbers of children, so if a child is on multiple referrals during the year, they are only counted once during the year.

Table 5: Children with Maltreatment Referrals by Age, Mono County, January 1, 2017 to December 31, 2017¹⁸

Age Group	Children w/ Allegations	Total Child Population	Incidence per 1,000 Children
Under 1	24	135	177.8
1 -2	17	287	59.2

¹² California Opioid Overdose Surveillance Dashboard, Mono County Dashboard, retrieved 9-20-18 from <https://discovery.cdph.ca.gov/CDIC/ODdash/>

¹³ Performance Outcomes Adult Specialty Mental Health Services Report Date August, 2017. Accessed April 30, 2018 at [http://www.dhcs.ca.gov/services/MH/Documents/Performance%20Dashboard%20\(adult%20reports\)/2017_Adult_Reports_Non_ADA/POS_Adult_Report_Mono.pdf](http://www.dhcs.ca.gov/services/MH/Documents/Performance%20Dashboard%20(adult%20reports)/2017_Adult_Reports_Non_ADA/POS_Adult_Report_Mono.pdf)

¹⁴ <https://www.kidsdata.org/topic/660/childdeaths-age-cause/table>

¹⁵ Kidsdata.org, Children with Major Disabilities, by City, School District and County (Regions of 10,000 Residents or More). Accessed April 30, 2018 at <http://www.kidsdata.org/topic/770/special-needs-major-disabilities10/table#fmt=1178&loc=2,352&tf=94&sortColumnId=1&sortType=desc>

¹⁶ Open Justice, Domestic Violence Related Calls for Assistance, Mono County 2007-2016. Accessed April 30, 2018 at <https://openjustice.doj.ca.gov/crime-statistics/domestic-violence>

¹⁷

¹⁸ Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 4/30/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare

3 - 5	39	411	94.9
6 - 10	45	823	54.7
11 - 15	49	866	56.6
16-17	8	314	25.5
Total	182	2,836	64.2

Table 6: Children with Maltreatment Referrals by Ethnicity, Mono County, January 1, 2017-December 31, 2017¹⁹

Ethnic Group	Children with Referrals	Total Child Population	Rate per 1,000 Children
Black	2	2	1000.0
White	52	1,378	37.7
Latino	40	1,291	31.0
Asian/Pacific Islander	0	25	0.0
Native American	8	41	195.1
Missing / Multiracial	0	99	0.0
Total	182	2,836	64.2

¹⁹ Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 4/30/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: <http://cssr.berkeley.edu/ucb_childwelfare>

CHILD WELFARE AND PROBATION POPULATION

Mono County has seen a small increase in referrals and substantiations from 2012 to 2017 (see Table 9).

Table 9: Mono County Trends in Population, Referrals, Substantiations, Entrance and Rates of Out of Home Care

Category	2012	2012 Rate,1000	2017	2017 Rate/1,000	CA 2017 Rate/1,000
Child Population	2,931	-	2,836	-	-
# Children in referrals	150	51.2	182	64.2	54.1
# Children in Substantiated Referrals	15	5.1	24	8.1	7.5
Children Entering Out-of-Home Care	1	0.3	0	0	3.0
Children in Out-of-Home Care ²⁰	4	1.4	4	1.8	5.8

Table 10: Mono County Trends in Allegation Type

Allegation Type	2012 Count	2012 Percent	2017 Count	2017 Percent
Sexual Abuse	23	15.3%	12	6.6%
Physical Abuse	33	22.0%	54	29.7%
Severe Neglect	13	8.7%	2	1.1%
General Neglect	54	36.0%	80	44.0%
Exploitation	-	-	-	-
Emotional Abuse	22	14.7%	34	18.7%
Caretaker Absence/Incapacity	1	0.7%	-	-

²⁰ Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 4/30/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare. Point in Time July 1, 2012 and July 1, 2017.

At Risk, Sibling Abused	4	2.7%	-
Total	150	100%	182

Table 7: Children in Out-of-Home Care by Age, Mono County, on July 1, 2017²¹

Age Group	Count In Care*	Total Child Population
Under 1	0	135
1 - 2	1	287
3 - 5	2	411
6 - 10	1	823
11 - 15	0	866
16-17	0	314
Total	4	2,836

*Rates or percentages are not displayed due to counts being less than 10.

Table 8: Children in Out-of-Home Care by Race / Ethnicity, Mono County, As of July 1, 2017²²

Ethnic Group	Count In Care*	Total Child Population
Black	0	0
White	1	1,378
Hispanic	0	1,291
Asian/Pacific Islander	0	25
Native American	3	41
Multi-Race	0	99
Total	4	2,836

*Rates are not displayed due to counts being less than 10.

²¹ Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 4/30/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare.

²² Webster, D., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Wiegmann, W., Saika, G., Eyre, M., Chambers, J., Min, S., Randhawa, P., Sandoval, A., Yee, H., Tran, M., Benton, C., White, J., & Lee, H. (2018). *CCWIP reports*. Retrieved 4/30/2018, from University of California at Berkeley California Child Welfare Indicators Project website. URL: http://cssr.berkeley.edu/ucb_childwelfare.

Mono County's sample size of youth in out-of-home (foster) care is too small to extrapolate trends related to ethnic and/or cultural disparities of foster youth. Mono County consistently has well under 10 foster youth at any given time in out-of-home care. The entry of just one sibling set into foster care skews percentages in such a dramatic manner that it makes charts and graphs (which are based upon percentages) ineffective as a way to extrapolate trends. What is true is that youth of all ethnic populations (White, Latino, black, and Native American) have been represented in out-of-home placement, at one time or another, over the past decade, depending upon the year. Mono County will see one or two sibling sets from any given ethnic group in foster care at a time, or none, depending upon the year.

Data from referrals (i.e. suspected child abuse reports) is a somewhat improved source for extrapolating trends in Mono County's population impacted by child abuse and neglect. Mono County has a sample size of approximately 10 – 20 suspected child abuse reports per month. Reviewing data from child abuse investigations (over time) reveals trends that may be worth examination. For example, over a five-year period from 2013 to 2017, Native American and White youth experienced substantiated child abuse incidents at a somewhat higher rate than their overall population rate. Latino youth, on the other hand, consistently experienced a slightly lower rate of child abuse than their population rate. An exception to that was during the year of 2016 in which 0% of Native American youth were the subject of a substantiated child abuse report.

Toiyabe Indian Health Services, located in Bishop, California, serves Native American youth who reside in Benton, CA. This programs services all tribal members and their families within the Eastern Sierra.

Spanish. The population that Mono County Probation interacts with is primarily White/non-Hispanic and White/Hispanic. Therefore, having bilingual officers helps ease communication with non-English speakers

Mono County Probation is part of the International Union of Operating Engineers, Stationary Local 39 Deputy Probation Officers Unit (DPOU). There have been no issues that need to be addressed.

FINANCIAL/MATERIAL RESOURCES

The county's CWS budget is funded by both federal and state allocations, including but not limited to Title IV-E, Title XIX, and CWS Outcome and Improvement Project (CWSOIP). In addition, CBCAP funds, CAPIT funds, Children's Trust Funds, and PSSF funds are leveraged to increase available services. The county also uses several small state allocations associated with implementation of the statewide Continuum of Care (CCR) Reform. Under CCR, many functions related to foster care that were previously conducted by the state have shifted to the county, such as the licensing of foster care homes (now called Resource Family homes). The Foster Parent Recruitment, Retention and Support funds are one such allocation the county relies upon to help recruit additional Resource Family approved homes to ensure the availability of geographically and demographically diverse community-based care for at-risk youth.

Child Abuse Prevention, Intervention, and Treatment (CAPIT) funds are used to support the Parenting Partners Home Visiting Program for families with children aged zero through five, with an open child welfare case as well as at-risk families, through First 5 Mono County. CAPIT funds are also contracted to Wild Iris Family Crises and Counseling Center to provide Family Partner Services, Supervised Visitation, Respite Care, Mental Health services, and Advocacy/Public Awareness. With CAPIT funding, families in Mono County receive services which would not be available otherwise. These services assist families in resolving parenting issues and prevent further involvement in CWS.

Community Based Child Abuse Prevention Program (CBCAP) funds support a contract with the Mono County Office of Education for the coordination of the Mono County Child Abuse Prevention Council and child abuse prevention and awareness activities. A small portion

of CBCAP funds also goes to support the First 5 Home Visiting program for services to families without an open child welfare case. Mono County Social Services CWS staff use Promoting Safe and Stable Families (PSSF) funding for the Family Safety and Stability program, providing services in Family Preservation; Family Support; Time-Limited Family Reunification; and Adoption, Promotion and Support.

Mono County Social Services CWS staff use Promoting Safe and Stable Families (PSSF) funding for the Family Safety and Stability program, providing services in Family Preservation; Family Support; Time-Limited Family Reunification; and Adoption, Promotion and Support. County Children's Trust Funds are minimal but have been spent creatively on county-wide prevention efforts over the past five years. Expenditures are overseen by the Child Abuse Prevention Council (CAPC), which is also the County Children's Trust Fund Commission. Funds are collected from birth certificate fees and license plate fees. CBCAP funds are used to backfill the CCTF to the amount of \$20,000 annually, therefore, Mono County selects activities for the CCTF that are also simultaneously in compliance with CBCAP funding guidelines. Please see section on the Children's Trust Fund for more detailed information on services provided.

Independent Living Program funds are used for ILP services for CWS and Probation foster youth. Mono County provides monetary incentives of for youth who successfully complete identified goals and milestones, such as graduation, obtaining employment, and opening a savings account. ILP funds are also used for clothing and work-related expenses, on-line driver's license classes, and school related expenses. Mono County has underutilized ILP funding; this is an area for future development.

CHILD WELFARE/PROBATION OPERATED SERVICES

Juvenile Hall

There is no juvenile hall in Mono County. However, there is a contract in place with El Dorado Probation Department to use their facility in the event a youth needs to be detained. El Dorado Juvenile Hall provides an array of rehabilitative services to help the juvenile function acceptably in the community. The juvenile hall provides family reunification services in which a minor is committed to the juvenile hall for 120 days and the minor and their family participate in

to all children who meet the subclass requirements. Child and Family Team meetings are facilitated by a CWS social worker, with participation by the therapist, the child and family, foster family, other service providers, and informal support people. CWS meets regularly with BH staff to collaborate on Katie A. implementation and services and Wrap Program case management.

Often social workers will do a “warm hand off” with MCBH staff to ensure follow-through and minimize extra steps for clients to access services. MCBH are standing members of the MDT and meet routinely with CWS and Probation staff to ensure appropriate exchange of information and coordination of services.

Mono County Probation collaborates with the Behavioral Health Department to treat mutual clients for outpatient substance abuse issues. The Behavioral Health Department has two alcohol and drug counselors, and both have worked with probation youth to develop skills that will help keep juveniles sober.

Probation refers juveniles with mental health issues to the Mono County Behavioral Health Department. Juveniles receive services such as individual counseling, family counseling, among other services that the therapist deems appropriate. These services are local and located within the communities of the children and families being served, contributing to the Continuum of Care and reducing the gaps in service delivery for families.

Other Programs

Mono County Social Services, Behavioral Health and Probation collaborate to provide Wraparound services for youth at risk for out of home placement. The Wraparound program is intended to shift the service delivery focus to a needs-driven, strengths-based approach. It is a definable way of partnering with families to provide intensive services to children and families with complex needs using a team approach. It is intended as an alternative to residential (group home) care and will continue to be an important strategy under Continuum of Care Reform.

Mono County Wraparound provides services for youth and families such as counseling, case management, and services to meet student educational needs. The Wraparound team identifies needs of the family such as the need for a parent partner, respite care, supervised

visitation, parenting education and co-parenting education, and refers the family for these services as offered through Wild Iris and funded via CAPIT funds. The family may also be referred for home visiting through the First 5 Parenting Partners home visiting program, also funded, in part, by CAPIT and CBCAP funds. The Wraparound Team goes to great lengths identify and provide families with services needed.

One need identified by Probation is a need for AOD programs such as Alcoholics Anonymous, and a trauma counselor for youth.

State and Federally Mandated Child Welfare/Probation Initiatives

Mono County is a very large county geographically, but has a small population base and one of the smallest CWS and probation caseloads in California. As such, Mono County does not always have the staffing or population-base to implement all initiatives at a large scale. When it comes to mandatory initiatives, such as Continuum of Care Reform and Mono County is in-compliance. But with less than 5 children in foster care at most times, Mono County does not have enough demand to create and sustain certain specialized components of CCR. For example, there are no STRTP's or therapeutic foster homes in Mono County at this time, which means that youth who need a higher-level care are at higher risk of out-of-county placements. Another example is Independent Living Program services (ILP). While Mono County is in-compliance providing ILP, with only one or two eligible youth at any given time, there are not enough participants to justify the creation of a group-based ILP program or to dedicate a full-time staff to ILP, however, there is a staff person designated to provide individual ILP services for each participant. Or, with respect to Commercially and Sexually Exploited Children (CSEC) – Mono County has no CSEC youth on its caseload. While it would be inefficient to create an entire program for CSEC youth, Mono County is committed to the initiative and has “opted in” to create a prevention program with partner agencies so that the community is competent in identifying and responding to victims of CSEC.

In such a rural area, staff must be generalist practitioners and are trained in a wide breadth of programs. Social Workers are cross trained in programs that include Child Welfare,

Mono County, with a small population base of approximately 14,000, has very few youth in foster care; less than 10 at any given time and sometimes fewer than 5. The low rate is also attributed to Mono County's commitment to front-end, preventative interventions, such as SOP, CFT, voluntary family maintenance cases, and family findings. Engaging extended family and natural supports who may later become relative and/or NREFM placement options helps reduce the rate of placements in non-related foster/RFA homes.

Placement of Native American children is handled on an individual basis and in collaboration with the ICWA representative at the tribe and family. The ICWA representative is consulted on all placement issues concerning Native American children. In the case of the Benton Utu Utu Gwaitu Paiute Tribe, some youth on the reservation do not meet blood-quantum for tribal enrollment. In those cases, so long as the youth and family identify as part of the Native American culture, Mono County makes sure to engage tribal members who are connected to the children regardless of enrollment status. The ICWA representative, or other tribal representative connected to the family, is invited to Child and Family Team meetings, and may also be included in MDT's, when Native families are involved with, or at-risk of involvement with CWS. There are currently no Native American RFA homes. Recruitment efforts continue to be made. In late 2017, the first Native American family submitted an application for RFA.

The issue of facilitating timely adoptive or permanent placements for "waiting children" has not been an issue in Mono County. With so few youths in placement, there are no "waiting children." All youth in placement have viable concurrent plans and typically reach permanency within reasonable timelines following termination of parental rights.

STAFF, CAREGIVER AND SERVICE PROVIDER TRAINING

Child Welfare

Mono County Social Services receives Title IVE training, including core training for new social workers and supervisors from UC Davis, Northern California Training Academy. A common challenge faced by Mono County professionals is long distances between Mammoth Lakes and Bridgeport from training centers. Most training requires an almost six-hour drive for

staff, one way. In addition UC Davis has done a commendable job offering many trainings locally. Mono, Inyo, and Alpine Counties coordinate to hold regional trainings to include all eastern sierra county staff. Local community-based agencies, school staff, and partner agencies are routinely invited to trainings hosted by Mono County and the Northern Training Academy. This includes Mono County's two key subcontractors (Wild Iris and First 5 Mono County) who deliver services under the CBCAP and CAPIT funds. A staff analyst at Mono County DSS coordinates and tracks training for CWS staff. Ongoing staff training needs are routinely discussed during staff meetings. See Appendix 4 for 2016 – 2017 training records.

All new CWS social worker staff comply with Core training requirements. Mono County has four social worker positions. Due to the distance from UC Davis, completion of Core Phase II requirements has taken longer than expected for some staff; and online training modules has been helpful when in-person training was not feasible. Common Core 3.0 may be easier for social workers to complete as all trainings will be taught in specific modules with less customization. In fact, the most recently hired social worker recently completed the Core 3.0. The social worker supervisor serves as the field advisor for any staff enrolled in Core 3.0 training. All probation staff attended a Core Training and a PC 832 class within the first year of being hired. In addition to the regular probation core, the juvenile officer attends a placement core and the juvenile supervisor attends a supervisor core training. The juvenile officer and juvenile supervisor are required to have 40 hours of Standards and Training for Corrections (STC) training hours. The training that both the juvenile officer and juvenile supervisor attend is relevant to delinquency or dependency trends in the juvenile justice system. Mono County Probation relies on the Chief Probation Officers of California (CPOC) and any incoming ACL/ACN's to determine what training is relevant and necessary.

Social worker skill acquisition and development are measured internally by the supervisor through both weekly individual supervision and regular observation of social workers in the field. The CWS supervisor monitors social worker training needs by using SafeMeasures to track outcome measures and compliance and by direct-observation of social workers in the field. At all levels of the department (social workers, assistants, supervisors, and managers)

staff competency is monitored through county performance evaluations. Goals and objectives are generally set and reviewed annually; more routinely if necessary.

Peer education is a part of the CWS staff culture, where more experienced staff often join newer staff in the field and provide basic coaching. Group supervision using the Consultation Framework and SOP fundamentals provides a mechanism for all staff, new and experienced, to engage in ongoing peer-learning. And lastly, coaching has become an added layer of staff-education and ongoing skill development in recent years. The current CWS supervisor has received coaching training and ongoing refreshers from the Northern Training Academy's designated coach for Mono.

Trauma-informed education has become thematic throughout social worker education. The potential traumatic impacts of CWS intervention in addition to maltreatment in the home are themes commonly discussed in supervision, RED team staffing, and group supervision. Cultural issues are also addressed in a systematic way through RED teams; each new SCAR that is made to Mono County is assessed through the Consultation Framework which includes a section for cultural issues. Cultural themes may include race or ethnicity, geographical culture, behavioral culture, tribal affiliation and culture, military culture, and so much more. Lastly, CWS management staff has begun participating in the California Core Practice Model (CPM) regional Learning Sessions and Development Circles with leadership from other counties. The CPM is intended to integrate core practice behaviors throughout CWS systems (recruitment, training, supervision, quality improvement and outcomes tracking) such that systems reflect the same values that drive interventions with families and children.

Resource Families receive training primarily through "Foster Parent College," an online training resource. This tool has been a great asset in Mono County which lacks alternate training options for foster parents. RFA families are also invited to participate in trainings that are offered to social worker staff when the topics align with the RFA training needs. Additionally, Mono County has a small library of resources including DVD's and books that may be used for RFA families. Training for RFA families is guided by the RFA Written Directives and includes an onsite orientation to introduce RFA homes to local CWS practices. In recent years,

Foster Parent Recruitment, Retention and Support (FPRRS) funds were used to pay for Foster Parent College and other RFA training requirements such as First Aid/CPR.

The Mono County Child Abuse Prevention Council (CAPC) also supports service provider education by arranging community-based trainings and disseminating information to the public about community protective factors and child abuse prevention. A detailed list of CAPC activities is included in the Financial/Material Resources section earlier in the report. Additionally, CWS staff provide mandated reporter and RFA trainings and in-services to our community partners throughout the year. In 2016-2017 trainings were provided by CWS staff quarterly to Wild Iris, individual school districts, and the **First 5 Mono County Home Visiting program**.

Probation

Currently, probation does not provide training.

AGENCY COLLABORATION

Mono County Social Services and Probation collaborate with each other and other agencies to provide a comprehensive network of services and support for families and children in numerous ways, including, but not limited to: MDT, SB 163 Wraparound Services, CAPC, School Attendance Resource Board (SARB), Sexual Abuse Review Team (SART), the Foster Youth Services Coordinating Program (FYSCP) and the CCR Partnership Team. Stakeholder input is captured in meeting minutes for follow up between meetings.

Per the CSA Stakeholder meeting, Mono County Social Services has many strengths including a strong family-focused culture where family success is prioritized. Because the child welfare department has multiple cross-disciplinary responsibilities, their broad scope of knowledge is respected and valued. The county works well in collaboration with Public Health, **First 5 Mono County**, Behavioral Health, and law enforcement by including officers in RED teams and MDT. Family voices are included in decision-making during inter-agency collaboration, particularly with Behavioral Health. Stakeholders indicate that the most influential programs that lead to positive outcomes are the quality of relationships between all of the service programs as well as collaboration during CFT meetings.

Considering its small population and rural demographics, Mono County has a significant array of services and supports along the continuum of prevention. Mono County lacks highly specialized resources (such as clinicians who practice PCIT, or other specialized modalities), or resources that are particularly staff-intensive, such as group-homes and Intensive Services Foster Care. However, overall, there is a foundation of supports in place to address the most common types of problems associated with child maltreatment. During the Mono County Stakeholder meeting, stakeholders indicated the top strength of the county is its diversity of services despite its small size. They say the ratio of service providers to families is wonderful. The most prevalent theme regarding barriers to positive child outcomes such as wellbeing and reunification was transportation and access to services in rural areas.

Waitlists for services do not generally exist in Mono County. There are certain, highly specialized interventions (such as Wraparound) that have limited availability. The bigger problem for Mono County residents is the sheer lack of certain specialized services or the lack of access to services due to the rural demographics and limited public transit. The services that exist, however, do not generally have waitlists.

Mono County CWS prioritizes family preservation and family maintenance services, even though they are not mandatory. In other words, there are many occasions when safety threats may not rise to the level of detention and Juvenile Court intervention. But, there are enough risk factors in place and often patterns or repeated behaviors that are likely to culminate in serious harm if not mitigated. About 75% of Mono County's interventions are "front-end" before families enter into the Court Dependency system. In addition to facilitating assessments, Child and Family Teaming, and safety organized practices, social worker interventions often rely upon referrals to specialized services outside MCDSS. Examples include counseling, therapy, parenting and home-visiting services. Community providers include Wild Iris, MCBH, First 5 and Toiyabe Indian Health Services. These services are explained in more detail in the upcoming section. Service-providers must be equipped to meet the needs of Spanish-speaking families in Mono County who comprise approximately 28% of the population. Most agencies employ bilingual staff and interpretation services. In addition to language-needs, some Latino/Hispanic families face instability due to immigration status which can be a barrier to accessing services.

When youth are removed from home due to unmitigated safety threats, social workers rely upon these same community and agency services to link with families. When reunification is not possible, concurrent plans are relied upon and relatives, NREFM's or other RFA families are engaged around permanency plans. Even at this "back end" stage of permanency planning, long-term and permanent placements require support and interventions in order to successfully maintain youth in their homes. Below are descriptions of the services in Mono County that support prevention, family preservation, family reunification, and permanency for youth:

Child Abuse Prevention, Intervention, and Treatment (CAPIT) and Community Based Child Abuse Prevention (CBCAP) funding

As noted previously in this report, MCDSS awards contracts to three key community partners to deliver services to at-risk families and foster youth (First 5, Wild Iris and Mono County Office of Education). The First 5 Mono County Commission delivers a countywide home visiting program to families throughout Mono County with children ages prenatal through 6 identified as high risk. The program provides services in English and Spanish using research and evidenced-based interventions and materials that:

- Focus on implementing positive parenting practices;
- Works with families to address family specific issues;
- Provides information on child safety and identifies crisis issues, and
- Provides information, support, and community referral, in collaboration with the family, working to reduce family stressors, at risk behavior, and family crisis.

Stakeholders indicate that First 5 Services have challenges keeping families engaged, indicating that the fact that they are voluntary and not mandatory may play a factor in this challenge.

Wild Iris provides Parenting and Co-Parenting classes, Family Partner Services, supervised visitation, respite care, Mental Health Services referrals, and advocacy/public awareness of child abuse prevention. The parenting program provides culturally competent and appropriate services to address child behavior and discipline issues as well as to increase parental confidence. Group classes are typically structured in a six (6) week series using several evidence-based curricula, such as "Active Parenting Now" and "Triple P." The focus of Co-

Parenting classes is to reduce conflict between parents who are typically separated or divorced, thereby minimizing harm to children who are impacted by this conflict. The Co-Parenting Class typically consists of an eight (8) week series using the curriculum “Cooperative Parenting and Divorce.” Parenting education may also be conducted in the home to families in out-lying areas of the counties without means of transportation, or where there are not enough parents to form an official “class” or group. In this way, parenting is individualized and tailored to the unique family needs. Stakeholders also reflected upon the utility of Wild Iris, praising the program where support staff are provided for parent court visits, adequate peer programs, but also indicating that families must have a child enrolled in a local school to receive support. Stakeholders indicated Wild Iris and First 5 are just two of the most effective prevention services offered in Mono County.

The Mono County Office of Education provides coordination of the Child Abuse Prevention Council and a variety of other child abuse prevention services and supports mentioned previously in this report.

Mental Health Services

Wild Iris also allocates some CAPIT funds for the provision of mental health services when families have no other insurance or payment source to access necessary family therapy and counseling. Wild Iris services specifically meet the needs of the more underserved populations in Mono County. For example, they have a staff-person uniquely dedicated to reaching geographically isolated communities and doing prevention/outreach efforts. Finally, Wild Iris administers the use of CBCAP funds for public education campaigns related to child abuse prevention/awareness and mandated reporting including radio and newspaper advertising using.

Stakeholders indicate that there is a counseling center at the local high school that offers free counseling to both parents and children, which is particularly useful for probation youth.

Domestic Violence

Probation Data

There is no data for this measure for Mono County Probation

8A OUTCOMES FOR YOUTH EXITING FOSTER CARE AGE 18 OR OLDER

Child Welfare Data

There is no data for quarter 3 within the past five years for this measure.

Probation Data

There is no data for quarter 3 within the past five years for this measure.

The parenting and family partnering services funded by CAPIT have had a limited impact in the community. Implementation challenges include the inability to provide “tailored” interventions, such as parent partnering and other types of interventions such as home based services.. The County is in the process of expanding our capacity internally to provide parenting to child welfare-involved families including a “partnering” component for activities of daily living, in addition to a curriculum-based intervention.

The services provided through the First 5 Mono County Home Visiting program (funded by CAPIT/CBCAP) reach a large number of s families with children zero through five throughout the county and appear to have an impact on child abuse prevention through the delivery of early childhood development.

First 5 Mono County Evaluation Report for the Fiscal Year of 2016-17 indicates that the home visiting program has a positive impact on child abuse prevention. The report indicates that the program achieved outcomes through improved parental knowledge, understanding and engagement in promoting their children’s development, physical and mental health needs, increased access to healthcare services, as well as improved screening and intervention for developmental delays, disabilities and other special needs for children ages 0-5. As a result of the home visiting program, families have more information about parenting and child development. 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%).

According to the Parenting Partners Exit Survey, there was a demonstration of increased skill reported in the following areas:

- Ability to meet their child's emotional and social needs.
- Increase understanding of child development needs and parenting responses.
- Ability to use positive discipline for child.
- Ability to make home safe for child.
- Ability to deal with stresses of parenting and life in general.

First 5 services are home-based for children under the age of 5. These services will continue to be coordinated through social worker staff and First 5 staff through a referral process.

Summary of Findings

Mono County Child Welfare

Upon completion of the analysis conducted through the CSA process, Mono County Child Welfare gained a deeper insight as to program strengths and areas to strengthen, which will be developed in the five-year System Improvement Plan. Mono County Child Welfare focused on the area of Recurrence of Maltreatment (CFSR Measure S2), as they continue to place a high priority on front-end prevention and early intervention practices and wanted to identify strengths and challenges and to gain insight on how to decrease the rate of recurrence.

During this assessment process, a common theme related to the populations that were at greatest risk of maltreatment included a disproportionality of children residing in the outer most rural and impoverished areas of Mono County. As such, Native American children who predominantly reside in outlying parts of the county on the reservation, have more contact with the child welfare system. The reservation in Benton is particularly isolated from supportive services and its tribal leadership has experienced many changes in recent years. Because of the very small numbers of children involved in the child welfare system in Mono County, it is difficult to make assumptions about data trends or significance of the data.

Mono County Child Welfare has many strengths to build upon to continue to improve outcomes. Through the Peer Review process there were many strengths within the Child Welfare System that were recognized. In summary, there was consistent utilization of RED Team process to determine investigation priority and response strategies, as well as consistent use of Safety Organized Practice (SOP) tools at key decision points, case planning and family engagement. Another strength indicated was the implementation of the Child and Family Team (CFT) teaming process with families and collaborative partners to develop family-centered, needs-driven case plans and intervention. Staff have demonstrated their ability to engage with families, advocate for family needs and develop rapport. Mono County has a vertical case management approach in which the same social worker is generally assigned to the same family from start to finish (i.e. Investigation through permanency, or to the end of the investigation or case). The consistency of staff for children and families allows rapport and trust to be established which ultimately improves the quality of case-planning and follow-through. Finally, several systemic strengths were recognized including staff being well-trained, competent, able to engage families, culturally sensitive, and responsive to Native American and Hispanic families.

There are areas to strengthen and challenges to address regarding recurrence of maltreatment in the Mono County Child Welfare System. Some of the strategies that were identified in order to further reduce future maltreatment include:

- Consistent development of behavior-based case plans that are less service-driven and developed through the CFT process with the incorporation of the CANS assessment tool.
- Increasing the number of support network participants through family findings, and incorporate them into the family network within the CFT process to develop stronger safety supports and safety plans to increase safety and reduce risk of future harm.

- Build more accountability with families within the Voluntary Services case plan to prevent the social worker from “working harder than the parents” and ensure the family clearly understands the safety goal(s).
- Addressing the ongoing need to ensure language barriers are being addressed adequately and that interpretation options continue to be available. Given that 40% of the County’s age 20-and-under population are Latino, there is a need to ensure that there are services and bilingual capacity to engage families effectively.
- Address the unusually large breadth of responsibilities Mono County social workers have (APS, CPS, IHSS, and Conservatorship Case Management) and how that may impact overall quality of work. There are challenges to manage all the complexities of the diverse caseload and to ensure that social workers can effectively manage those complexities.
- Continue to collaborate within the Department and outside the Department with community partners to strengthen interventions with Native American communities, and rural/outlying communities.

The Outcome Data Measures and data trends referenced above indicated potential promising trends. From the data pull, there were no instances of recurrence that involved Severe Neglect, Physical Abuse, or Sexual Abuse. In the year prior to this data pull (2013-2014) three minors experienced two recurrences. Since then, no child has had more than one recurrence. In almost all Mono County’s recurrence situations, the Department’s intervention was promoted after the second substantiated investigation (i.e. from no intervention to an open case, from a VFM to a Court case, or from a FM case to a Detention).

Other trends from the Outcome Data measures from the 3-Year Period: April 1, 2014 – March 31, 2017, indicated that thirteen of the nineteen children that did experience recurrence of maltreatment were five years of age or younger. Of the recurrence cases that occurred, more than half were outside of the town of Mammoth Lakes in impoverish, isolated, rural areas. Social workers work from Mammoth Lakes and the outlying areas represented in these

cases of recurrence are as far as a two-hour drive from the office. Eighteen of these cases were substantiated either for neglect (12) or emotional abuse (8), and 12 of these 18 had domestic violence as one of the main presenting safety risks. Substance abuse was also a predominant complicating factor amongst these cases, as 12 of the 18 cases had some form of alcohol or other drug abuse associated with the family.

Mono County Child Welfare will incorporate the overall progress identified and lessons learned through the CSA process into the development of next steps and goals.

Goals/Next Steps:

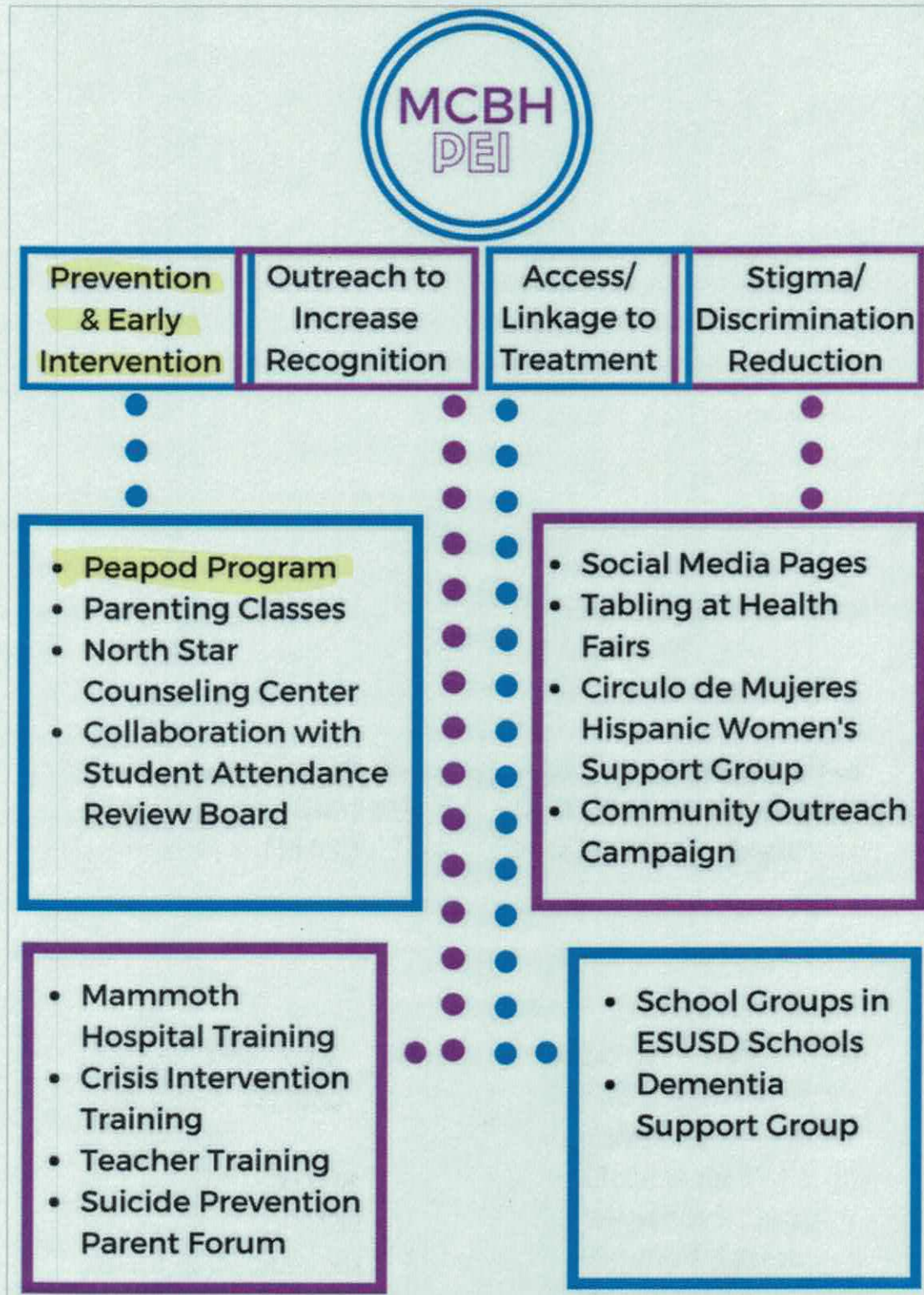
1. Prevent recurrence of maltreatment through stronger case-closure strategies by implementing procedures to incorporate the CFT process and SOP strategies that identify safety and belonging, and a natural support network at end of each case, with the consistent utilization of the SDM Risk Reassessment tool to assess the need to continue Family Maintenance services.
 - a. Increase family engagement related to natural support networks for children, even when parents are uncomfortable with extended supports (CFT, Family Findings).
2. Develop strategies to better serve and engage the outlying communities to address the disproportionality of recurrences of maltreatment in those areas.
 - a. Early identification of families that may have Native American Ancestry and incorporation of ICWA regulations through initiation of engagement of tribal representation and involvement early in the investigation process; yet doing so in a way which respects the needs of some Native American parents to protect their privacy and information within the context of very small tribal communities.
 - b. Continue to represent the Department during community socials and outreach events in outlying areas of the County to promote early and on-going



Mono County Behavioral Health
Mental Health Services Act (MHSA)
FY 2017-2020 Three-Year Program and Expenditure Plan



WELLNESS • RECOVERY • RESILIENCE



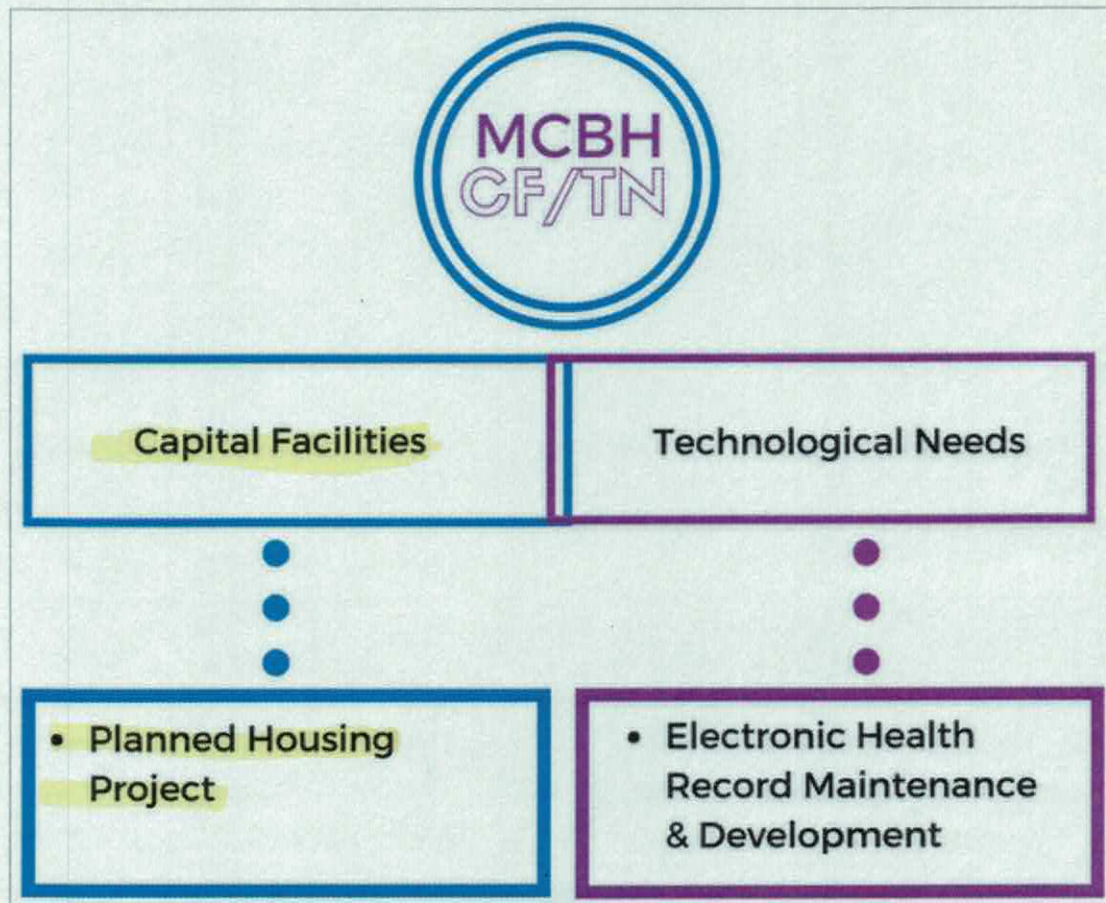


Table 1. Mono County Agencies

Agency	Purpose/Mission	Who is served?
Mono County Public Health	"The Public Health Department provides services that support the health and safety of Mono County residents including immunizations, HIV and other sexually transmitted diseases programs, communicable disease prevention and surveillance, tuberculosis program, health promotion, emergency preparedness, California Children's Services (CCS), Child Health and Disability Prevention Program (CHDP), Women Infant and Children (WIC), services for women and children, safety programs and much more."	Mono County residents
Social Services	"Our mission is to serve, aid, and protect needy and vulnerable children and adults residing in Mono County in ways that strengthen and preserve families, encourage personal responsibility, and foster independence."	Needy and vulnerable children and adults
Mono County Office of Education	<i>"Mono County Office of Education is committed to serving students, schools and communities by providing and supporting exemplary educational programs in a professional and fiscally-sound manner in order to foster healthy and productive individuals."</i>	Mono County students, schools, and communities
Mono County District Attorney	"The Mono County Office of the District Attorney promotes and protects the public peace and safety of Mono County, California."	Mono County community
Mono County Sheriff	"The Mono County Sheriff's Office is committed to providing the highest level of professional law enforcement services to enhance the quality of life for the citizens and visitors of Mono County."	Mono County residents and guests
Mammoth Lakes Police Department	"The Mammoth Lakes Police Department's mission is to provide quality law enforcement services, while building partnerships to prevent crime, maintain public trust and enhance the quality of life throughout town."	Mono County residents and guests
Mono County Probation	The mission of the Mono County Probation Department is to ensure the safety of the residents of Mono County by providing community-based supervision and rehabilitation through a multi-disciplinary approach to persons being convicted or adjudicated of a crime.	Mono County probationers and community
Eastern Sierra Unified School District (ESUSD)	"We as students, parents, community members and educators together will inspire and challenge each of our students to pursue personal excellence, to contribute positively to society, and to sustain a passion for learning."	Mono County students and parents/guardians
Mammoth Unified School District (MUSD)	"Mammoth Unified School District is committed to supporting students' individual needs and preparing them for the future by instilling them with confidence. Our school district encourages all students to push themselves to achieve and develop socially, emotionally, physically and academically. The parents and staff are very involved in our students' learning, recognizing their challenges and successes, while nurturing their individual talents and celebrating their diversity."	Mono County students and parents/guardians

Table 2. Mono County Community Partner Organizations and Coalitions

Organization/Coalition	Purpose/Mission	Who is served?
Multi-Agency Council	Works on youth violence and AOD prevention and policy enforcement issues.	Mono County community
SDRR Collaborative	Work group of the Multi-Agency Council that studies and addresses high risk behaviors in Mono County youth.	Mono County youth
Behavioral Health Advisory Committee	"Supporting individuals by promoting recovery, self-determination, and wellness in all aspects of life."	Mono County community, MCBH clients
Mammoth Hospital	"To promote the well-being and improve the health of our residents and guests."	Mono County residents and guests
Wild Iris Family Counseling and Crisis Center	"Wild Iris is dedicated to promoting a safer community by empowering and restoring the independence of those affected by domestic violence, sexual assault and child abuse. Our vision is for non-violent relationships based on dignity, respect, compassion, and equality."	Individuals affected by domestic violence, sexual assault, and child abuse
Student Attendance Review Board (SARB)	"The Board helps truant or recalcitrant students and their parents/guardians solve school attendance and behavior problems through the use of available school and community resources."	Truant or recalcitrant students and their parents/guardians
Mammoth Mountain Ski Area	Mammoth Mountain provides recreational opportunities for residents and guests. It also serves as a major employer of permanent and temporary (sometimes transient) employees in Mono County.	Mono County guests and residents (permanent and temporary)
First Five Commission	"First 5 Mono County will be a leader in a community-oriented and family-centered support network for children prenatal to age five and their families, and is charged with improving outcomes in children's health, safety, and learning."	Children pre-natal to age five and their families

COMMUNITY PROGRAM PLANNING

A critical step in the MHSA Three-Year plan is engaging community stakeholders so that they can provide input on the allocation of the county's MHSA funds. For this Three-Year plan, MCBH increased the formality of its Community Program Planning (CPP) process by conducting a community survey and holding several focus groups with key stakeholders. These engagement methods and a summary of the results are outlined below.

MHSA Community Survey

The MHSA Community Survey was developed and administered by the MHSA Coordinator and the Behavioral Health Advisory Board. Designed to target community members across our county, including clients and their families, allied agency staff, and other key partners, the survey was offered in English and Spanish.

The survey was administered via iPad to all clients and family members who agreed to take it in the MCBH waiting room with the goal of reaching out to clients with SMI, SED, and their families. It was also advertised through community flyers (English/Spanish) posted in Benton, Walker, Mammoth Lakes, Crowley Lake, and Bridgeport, as well as at all MCBH community events, such as the Foro Latino. This flyer was also posted in the MCBH waiting room, with the goal of reaching out to clients with SMI, SED, and their families. Finally, the survey was emailed to all staff and partners listed below:

• Behavioral Health Advisory Board (BHAB)	• Wild Iris Crisis and Counseling Center	• Mono County Public Health
• MCBH Staff	• Mono County Sheriff	• Walker Senior Center
• Mono County Social Services	• Mammoth Mountain Human Resources	• Mammoth Lakes Police Department
• First Five Staff	• Mammoth Hospital Staff	• School District Staff

Summary of Community Survey Results

- There were 137 survey responses submitted over the course of the two-month administration period in spring 2017.
- See Figure 1 below for a breakdown of participants' community roles.
- The sample included responses from most outlying areas in the county, including participants aged 16-60+. Additionally, 18 percent of participants identified as Hispanic/ Latino.
- Approximately 91% of participants opted to take the survey in English and 9% took it in Spanish.
- Although the sample is not statistically representative of Mono County, MCBH is proud of its efforts to reach out to outlying communities and the Hispanic/Latino community. The county nearly doubled its survey response goal of 70 responses.

The top six most important mental health issues in Mono County were:

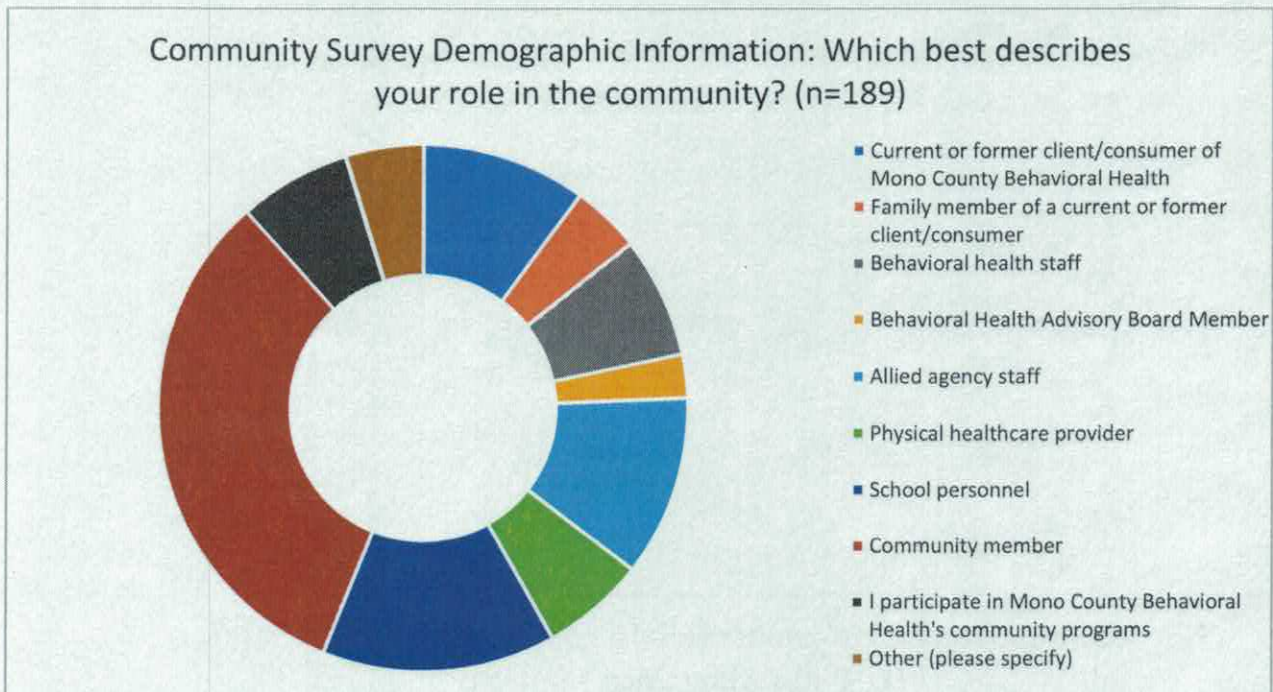
• Alcohol & Drugs	• Isolation & Lack of Social Involvement/Support	• Lack of Providers, Access, & Resources
• Lack of Housing & Sober Living Resources	• Lack of Stable Employment/Financial Instability	• Mental Health Stigma

The top seven most needed mental health programs/services in Mono County were:

• Alcohol & Drug Services	• Housing	• Psychiatry
• Mental Health Treatment & Counseling	• Places/Activities for Social Engagement	• Family Therapy • Parenting Classes

For a full break down of demographics, survey results, and analysis, see [MHSA Survey Results](#).

Figure 1.



The Prevention and Early Intervention (PEI) component of the MHSA includes five different funding categories: Prevention, Early Intervention, Outreach for Increasing Recognition of Early Signs of Mental Illness, Access and Linkage to Treatment, and Stigma and Discrimination Reduction. Please see Table 7 below for an overview of the programs and services offered within each of these service categories.

Table 7. PEI Service Categories & Programs/Services

Service Category	Prevention	Early Intervention	Outreach to Increase Recognition	Access/Linkage to Treatment	Stigma/Discrimination Reduction
Programs and Services	<ul style="list-style-type: none"> • Peapod Program • Parenting classes/Support Groups 	<ul style="list-style-type: none"> • North Star Counseling Center • Collaboration with SARB • Healthy IDEAS 	<ul style="list-style-type: none"> • Mammoth Hospital Training • Crisis Intervention Training • Teacher Training (family systems and ACEs) • Suicide Prevention Parent forum 	<ul style="list-style-type: none"> • School groups in ESUSD schools • Dementia support group 	<ul style="list-style-type: none"> • Social media pages • Tabling at health fairs • Circulo de Mujeres Women's support group • Community outreach campaign

Prevention

The Peapod Program targets children from birth to five years old and their parents in six communities throughout Mono County. Every year, there are 3-4 Peapod sessions in each location; each session consists of 10 weekly playgroups in which parents and children gather together. The program is peer-run (peer-leaders go through a training program) and consists of structured activities for parents and children to participate in together. This provides time for children and their parents to socialize in rural, geographically remote communities where it is easy for families to feel alone. It also provides parents with a forum to ask developmental questions about their children, discuss problems they are having at home, and seek out services with licensed professionals. In Mammoth Lakes, there is also a Peapod Group for Spanish-speaking parents.

The expected outcomes/objectives of this program include: decreasing isolation by providing parents and children an opportunity to socialize, de-stigmatizing seeking behavioral health services, linking families to community services, encourage school readiness skills, and encouraging early literacy. This program is a community-led and -driven activity that was created in response to a specific community-identified need. It is a unique form of outreach that provides services within the community that help increase access to services, while providing prevention and early intervention services. Moreover, it helps improve families' engagement in their own communities and with their peers.

In response to the Community Planning Process, which identified family relationships and parenting as key mental health challenges in Mono County, MCBH decided to increase funding the Peapod Program and to add funding for parenting classes to the 2017-2020 Three-Year Plan. For these parenting classes, MCBH will be partnering with Wild Iris Crisis and Counseling Center in Mammoth to fund the training of two new instructors. These individuals will be trained to teach the Positive Parenting Program (PPP) curriculum. Additionally, the director of Wild Iris will be attending an MCBH staff meeting to present on the classes and services that the non-profit offers and how to refer clients to those services.

Early Intervention

The first program funded by the Early Intervention category is the Mammoth North Star Counseling Center, which is a school-based counseling service that targets K-12 youth. The purpose of the North Star counseling center is to provide quality, culturally relevant, low cost counseling services to Mono County students and their families. This school-based counseling center focuses on prevention and early intervention strategies and treatments.

North Star's mission is to improve the lives of the clients we serve by providing tools and insights so clients can better recognize, confront and understand their challenges. All counseling services are confidential. North Star is focused on prevention and early identification of mental health issues for students in grades K-12. This program utilizes a framework of prevention and early intervention strategies that encourages the school and the community to implement programs and services that meet local needs.

Students are referred to the North Star program by teachers; students are then assessed by a therapist on the school campus. Some of the most critical issues that the therapist seeks to identify are early onset anxiety disorders, depression, and psychotic disorders. Youth in elementary school and youth who don't meet medical necessity for individual therapy are offered the opportunity to join peer support groups. These groups are designed to promote pro-social behavior and are also used to identify whether students have secondary needs.

Thanks to this referral and screening process, MCBH believes that fewer students "fall through the cracks." Additionally, North Star has helped reduce mental health stigma in the community and provided a safe place where students and their families can seek needed services. The program also aims to build resiliency among students and their families, and families are closely involved in setting treatment goals. North Star has also developed a strong and trusting relationship with Mammoth Unified School District and the Mono County Office of Education – therapists, teachers, and administrators often work collaboratively to refer students to the program and respond to crises.

In 2016, this program served approximately 60 students with an average age of 14. Of participating students, 75 percent were Hispanic and 25 percent were Caucasian. In terms of gender, approximately 40 percent were female and 60 percent were male. Presently, individual progress is tracked with the GAD-7 anxiety scale and the PHQ-9 depression scale. Additionally, MCBH is in the process of planning and implementing an evaluation of the program.

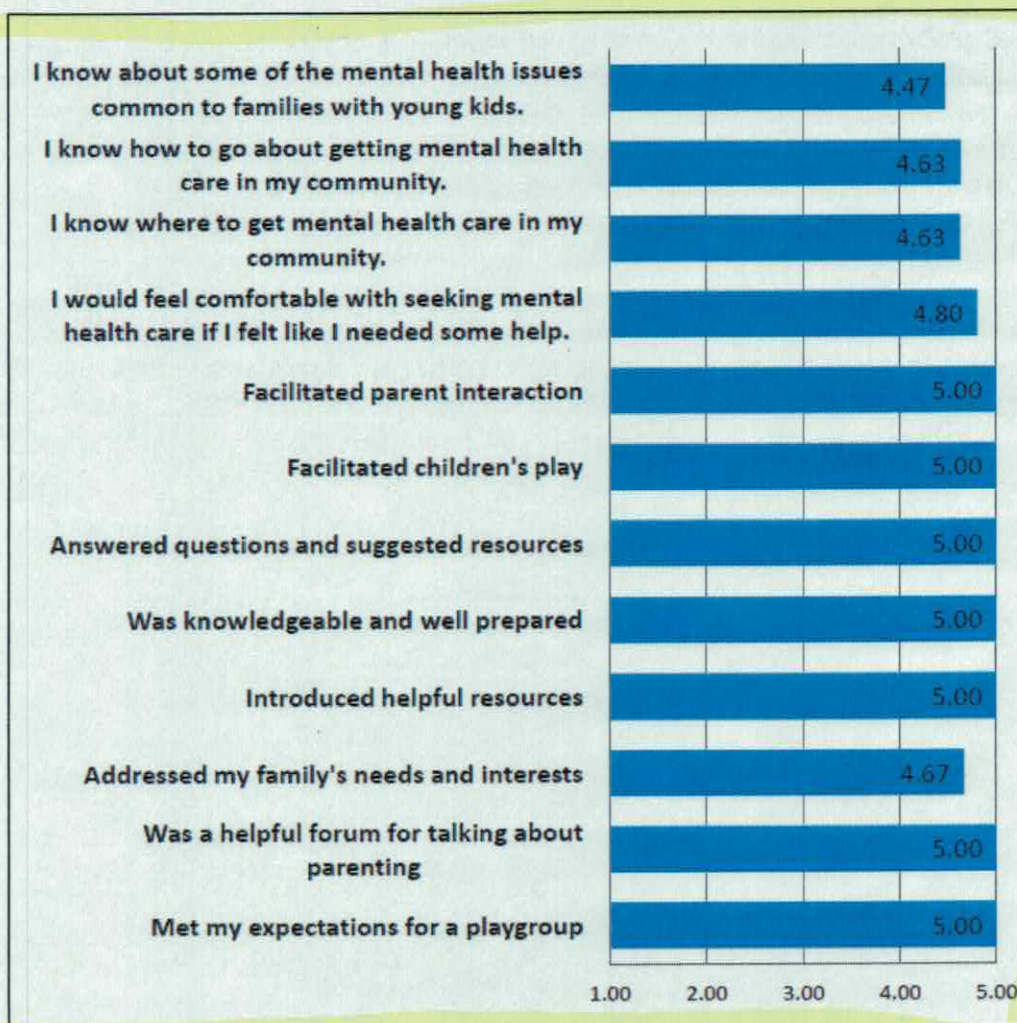
The second activity funded through the Early Intervention category is collaboration with SARB (the Student Attendance Review Board). Every month, youth with poor school attendance and their parents/guardians are asked to attend a SARB meeting. Behavioral Health staff regularly attend this meeting to ensure that any students/family members with mental health or behavioral problems are referred to MCBH for services. MCBH

PEI Achievements

During the 2016 school year, MCBH served even more young people through its North Star Counseling Center and staff started discussing an evaluation of that successful program. The department started building stronger relationships with teachers and administrators in Eastern Sierra Unified School District Schools in order to introduce school groups in these areas. MCBH launched a popular new support group for Spanish-speaking Hispanic women and increased its activity with the Student Attendance Review Board (SARB). In FY 2017-18, the department plans to formalize its relationship with SARB and develop a referral and follow-up tracking system.

Lastly, in FY 2015-16, the Peapod Program referred more families than ever to behavioral health services. Parents also reported high levels of satisfaction with playgroups and increased knowledge around mental health issues common to families with young kids. See Figure 3 below. In FY 2016-17, the Peapod Program also started collecting all the demographic information required for PEI programs.

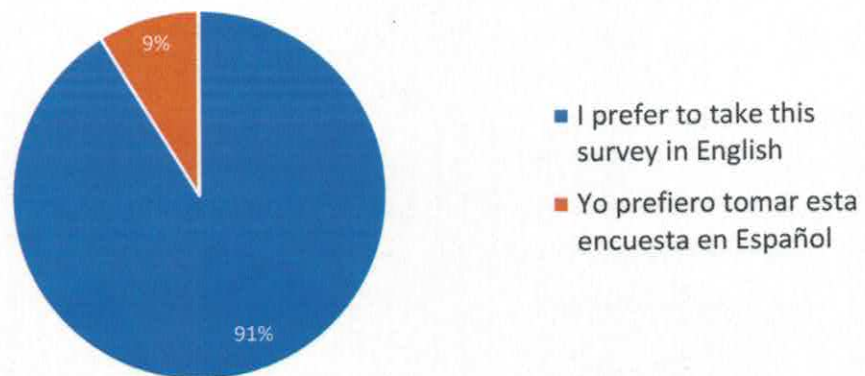
Figure 3. Peapod Program: All Parent Surveys FY 2015-16 (n=41)

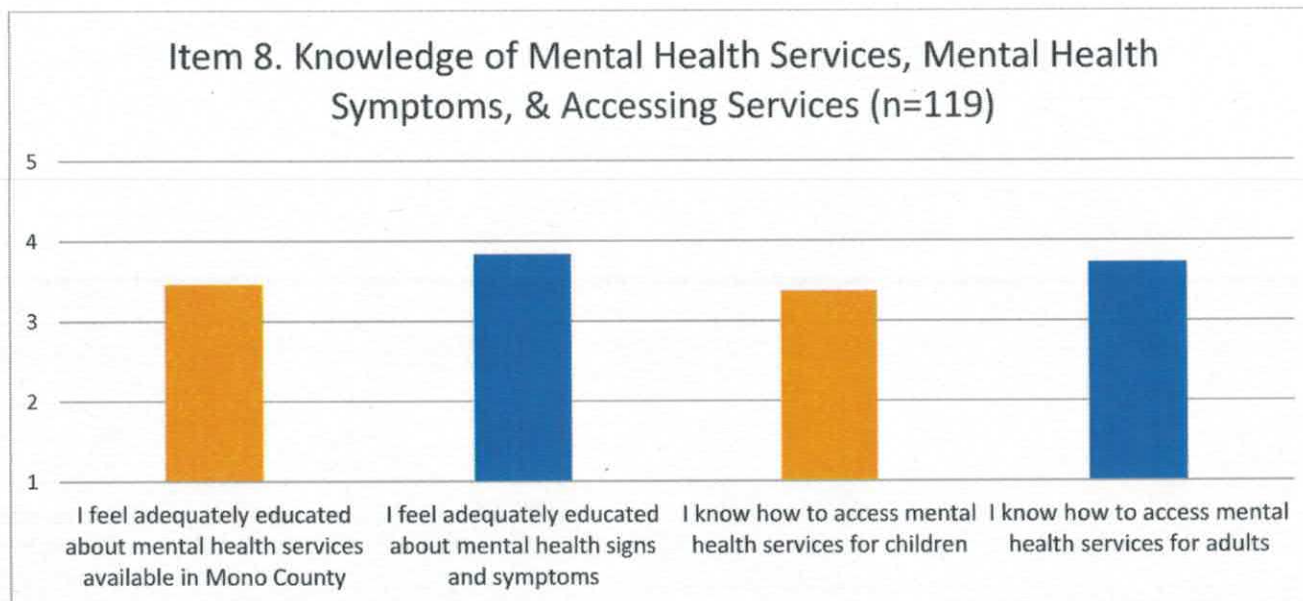


MHSA SURVEY RESULTS: SPRING 2017

Section1. Community Survey Demographic Information

Item 1. Lanugage Preference (n=137)



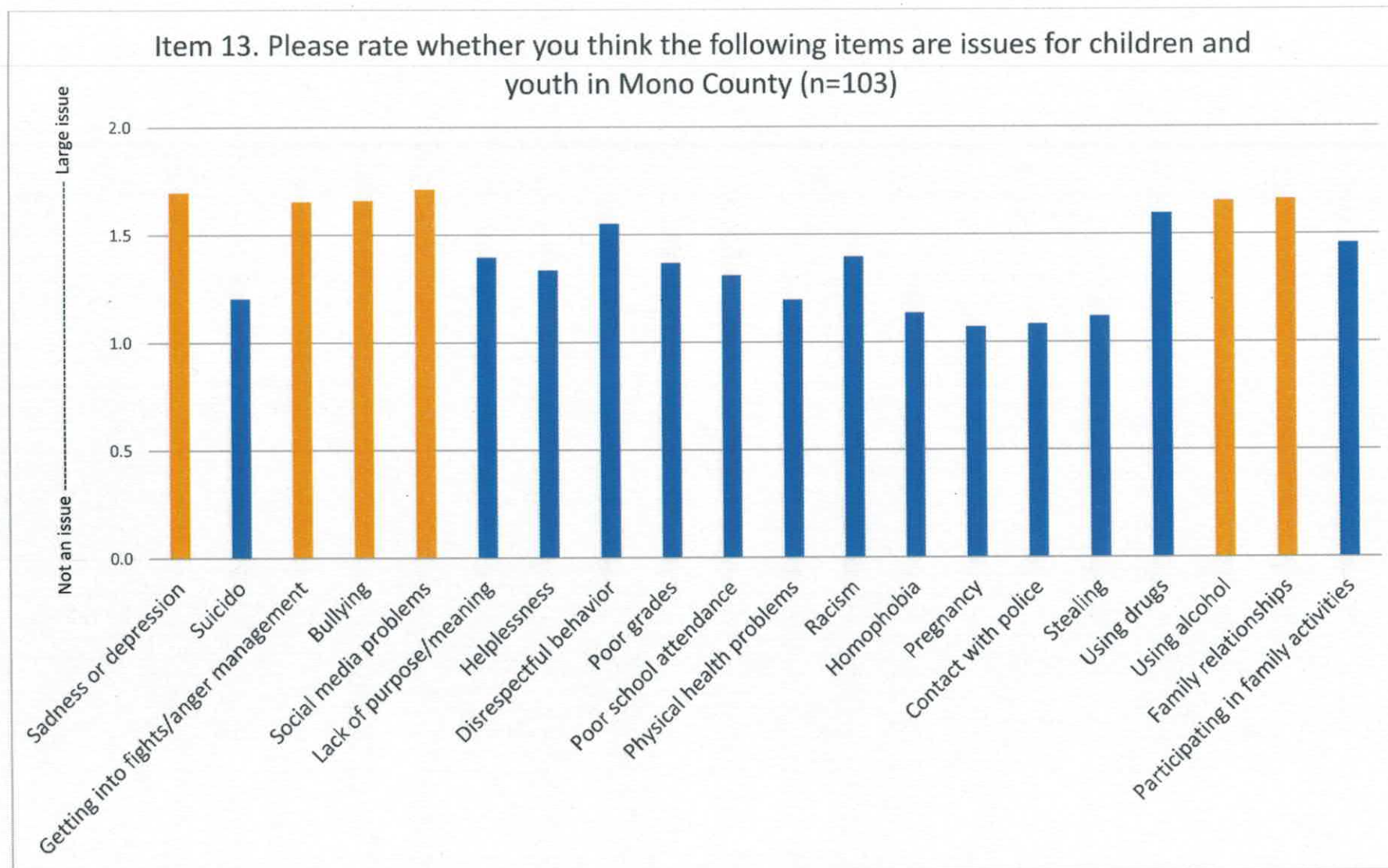


ANALYSIS: ITEM 8

The two lowest scoring items (highlighted in gold) related to knowledge of mental health services, mental health symptoms, and accessing services were “I feel adequately educated about mental health services available in Mono County” and “I know how to access mental health services for children.” Given the likelihood that some participants do not work with or have children, it is not particularly surprising that this item scored lower. Meanwhile, the lack of education around mental health services is connected to one of the most important strategies identified in Item 7, and ties into issues identified later in the survey.

Scale: 1 = Strongly Disagree...5 = Strongly Agree

Section 4. Community Challenges



ANALYSIS: ITEM 13

The most significant problems identified among children/youth in Mono County (highlighted in gold) were sadness or depression, getting into fights/anger management, bullying, social media problems, using alcohol, and family relationships. Considering the low scores around the knowledge of mental health services for children (Item 8) and the high scores related to sadness and depression, MCBH will ensure that information on depression services for youth are included in any outreach campaigns. Additionally, MCBH has plans to expand its school groups and offer more services in the northern part of the county.

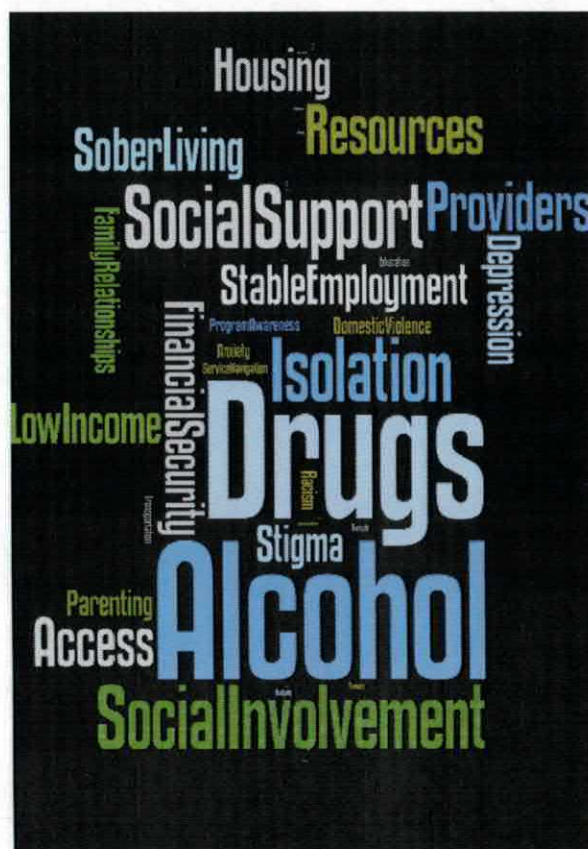
Getting into fights, bullying, and social media problems are all issues that are regularly discussed in MCBH's after-school program, Clubhouse Live. MCBH is also partnering with the Public Health Department and the tri-district school nurse to provide a social media module as part of an upcoming school outreach program.

As will be discussed later, family relationships were also identified not only in this question, but also as one of the top 10 mental health issues in Mono County (Item 15). Additionally, parenting classes or family support groups were identified as one of the most needed programs/services (Item 16). In response, MCBH has increased funding for the very popular Peapod Program, which is a parenting play group for parents of children five and under. MCBH is also constantly educating its providers on community resources for parents, including parenting classes at Wild Iris, workshops offered by First Five, etc.

Lastly, alcohol use was listed as a top concern for youth. As MHSA funds cannot be used directly for alcohol prevention or treatment programming unless associated with a co-occurring disorder, this problem will be addressed through MCBH's Alcohol and Other Drug Strategic Prevention Plan, which includes implementation of a school-based alcohol prevention program.

Scale: 0 = Not an issue...1 = Small Issue...2 = Large Issue

Item 15. In your opinion, what are the three most important issues related to mental health in Mono County?		
Top Issues Reported	Weighted Importance	Frequency of Mention
Alcohol and Drugs	117	51
Isolation and Lack of Social Involvement/Support	54	28
Lack of Providers, Access, and Resources	42	20
Lack of Housing and Sober Living Resources	37	17
Lack of Stable Employment/Financial Instability	34	17
Stigma	31	15

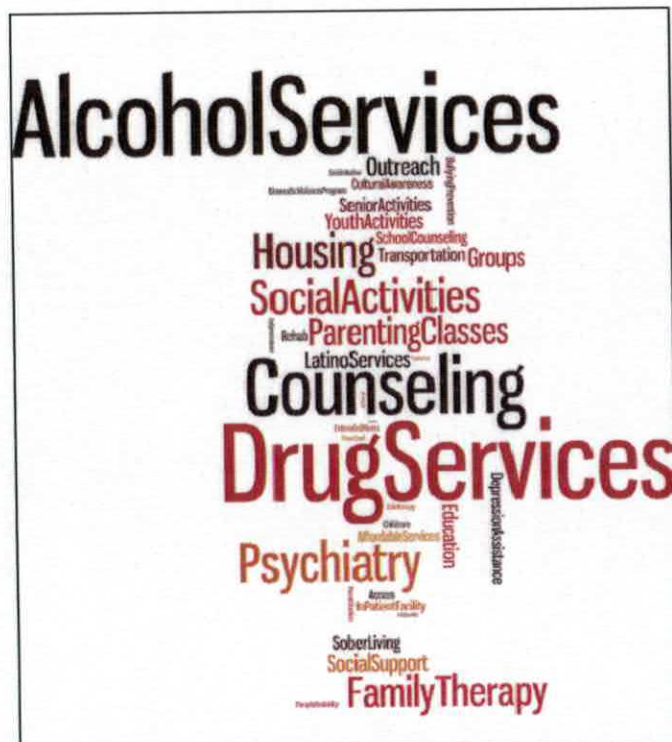


Left: Word Cloud Representing the Weighted Importance

Below: Word Cloud Representing Frequency of Mention



Item 16. In your opinion, what are the three most needed mental health programs/services in Mono County?		
Top Issues Reported	Weighted Importance	Frequency of Mention
Alcohol and Drug Services	37	16
Mental Health Treatment and Counseling	35	16
Psychiatry	24	11
Housing	21	10
Places/Activities for Social Engagement	21	11
Family Therapy	19	8
Parenting Classes	16	9



Left: Word Cloud Representing the Weighted Importance

Below: Word Cloud Representing Frequency of Mention



ANALYSIS: ITEMS 15-16

For Items 15 and 16, community survey participants were invited to write in the most important, second most important, and third most important issues related to mental health in Mono County and the most needed, second most needed, and third most needed mental health programs/services in Mono County. For each item, there are two word clouds that were generated. The vertical clouds on the left represent the weighted importance of each stated issue (i.e. any time an issue was listed “most important” it received a score of “3”; all item scores were then added). The horizontal clouds on the right represent how many times any given issue was mentioned. There are subtle differences between the two clouds, but they largely represent the same issues.

Overall, the answers to Items 15 and 16 not only support one another (i.e. alcohol and drugs are a top issue and alcohol and drug services are a top needed program), they also reinforce the answers provided in earlier portions of the survey. The top six most important mental health issues in Mono County were alcohol and drugs, isolation and lack of social involvement/support; lack of providers, access, and resources; lack of housing and sober living resources; lack of stable employment/financial instability; and mental health stigma. The top seven most needed mental health programs/services in Mono County were alcohol and drug services, mental health treatment and counseling, psychiatry, housing, places/activities for social engagement, family therapy, and parenting classes.

Despite the fact that alcohol and drugs were by far the top-rated issues and services needed, MHSA funding cannot be used to address these issues (unless they are programs for co-occurring mental health and substance use disorders). Programs to address these findings are being developed under other funding streams not addressed in this report.

Isolation was addressed in the previous item, but the responses to these two items highlight the importance of promoting social engagement/involvement and creating spaces and planning activities where such engagement can take place. Many of the suggestions for innovative programs below include ideas for social engagement and activities. MCBH plans to consider the feasibility of these suggestions, while simultaneously expanding services into some outlying communities and offering more wellness center activities.

ANALYSIS: ITEMS 15-16, CONTINUED

The results of the community survey suggest that the lack of providers, access, and resources (Item 15) is related to the need for programs/services as mental health treatment and counseling and psychiatry (Item 16). MCBH offers both mental health treatment and telepsychiatry; the department has not been able to hire an in-person psychiatrist. MCBH is working to its open positions, which would increase capacity and therefore access and resources. That said, it is likely that the lack of providers, access, and resources, as well as the identified need for psychiatry could be a lack of education around the services available. This hypothesis circles back to the findings from some of the first items on the survey (Items 7 and 8). For example, it is possible that many community members don't know that MCBH offers telepsychiatry. As noted above, MCBH plans to develop additional community outreach and education. This campaign will also be designed to reduce stigma – another mental health issue mentioned in Item 15. Lastly, MCBH is planning outreach and education at Mammoth Hospital to improve integration of physical and mental healthcare.

Lack of housing was another top mental health issue identified in the community survey – as noted in the analysis of Item 14, MCBH plans to open a permanent supportive housing facility within the next two years. Lack of stable employment/financial instability also aligned with earlier survey results. Again, MCBH will be coordinating with other agencies to identify ways to provide additional employment support for clients.

Finally, community survey participants identified family therapy and parenting classes as needed mental health programs/services in Mono County. These findings relate back to the top issues identified among children/youth in Mono County: family relationships. As noted in the analysis for Item 13, Mono County is expanding the Peapod Program and is examining other community partnerships that could help support Mono County families. Below, survey participants also identified several specific trainings or skillsets that they think would benefit Mono County families, such as parent-child interaction therapy and therapists with training specifically in post-partum depression.





Early childhood is a critical time for developing the skills that prepare kids for school and life.

The quality of a child's early care plays a major role in how social and learning skills develop. Sadly, few families have options for high-quality care. Only 14% of income-eligible infants and toddlers have access to subsidized care. Because of these inequities, we see income-based gaps in children's development and achievement levels before kids even start kindergarten.

In order to have quality child care for all, we must invest in early childhood workers.

Our early childhood providers are not babysitters: they are teachers. Yet nearly half of child care workers, and a third of preschool teachers, are paid so little they must use federal income support to make ends meet. Too often, child care providers have limited access to professional training opportunities.

First 5 supports AB 2292, which increases the reimbursement adjustment factor for infant-toddler child care, and creates start-up grants to rebuild infant-toddler care capacity lost during the Great Recession. **We also support AB 2626** for paid professional development days for child care staff.

By supporting higher wages and professional development, we give our early educators the respect they deserve. And we give ALL young kids a fair chance for a strong start.

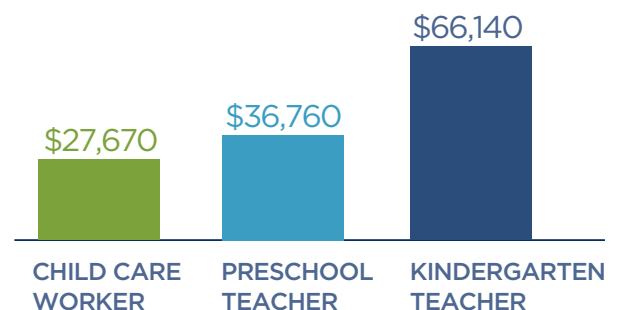


Kids who enroll in quality preschool are **75% more likely** to have skilled jobs or be enrolled in higher education as adults.



46% of child care workers rely on public assistance

The mean annual income for California child care workers is **less than half** of what a kindergarten teacher earns



What Happens in the First 5 Years Affects Us All

A child's experience

Participation in high-quality preschool

shapes the adult

Increased likelihood of high school graduation

and the rest of society

More skilled workforce



CHILD CARE QUALITY UP CLOSE: REBEKAH AND BENU'S STORIES



"We all work together to really provide structure and a foundation for the children... the next generation."

Rebekah

FIRST 5 MONTEREY

Like many families, Rebekah was faced with a tough decision when her children were young—stay home or return to work. Needing income yet unable to afford child care, she started caring for her niece and nephew to supplement her family's bottom line. It was during this time that she found her calling: caring for young children. Rebekah decided to follow her passion and turn it into a business; she started by enrolling in classes at Monterey Peninsula College. While there, she connected with Amber, an early education counselor with First 5 Monterey's Comprehensive Approaches to Raising Educational Standards program. Amber helped Rebekah create a long-term professional plan. "Amber showed me the general direction in which I should go, so that I wasn't misled or misdirected in getting to my goal as quickly as possible," Rebekah says. Rebekah sees her education as a gateway to improving her skills and approach as a child care provider. "I could give more to the children I was working with, more to the parents who were asking questions," she says. By focusing on professional practices, she says, she increased her understanding of how important families and communities are to raising healthy, happy children.

.....



"After attending each workshop, I felt more confident."

Benu

FIRST 5 CONTRA COSTA

A family child care provider for more than 20 years, Benu was among the first in Contra Costa County to volunteer for First 5's Quality Matters, a new quality rating and improvement system that incentivizes programs to offer the best early care and education possible. But she only earned a "2" out of "5" the first time she was rated, which meant she was not meeting quality benchmarks. While Benu earned high scores for teacher-child interactions, she wasn't using recommended tools to check the children's development and assess their learning, which lowered her score. She received a personal coach, who trained her on screening and assessment tools and age-appropriate instruction, and helped her create a more enriching physical environment. In her zeal to improve her child care facility, Benu also attended more than 80 hours of workshops—four times the Quality Matters requirement. Her work paid off: her second rating was a "5", which few child care programs in the state achieve. "With the screening and assessment tools, I'm able to make connections with parents and better understand each child, and offer activities to help them progress to the next level," said Benu.

MONO COUNTY CHILDREN AND FAMILIES COMMISSION Draft 5 Year Fiscal Plan FY 2017-18

 Item#4
 Mtg Date 2/21/19

Revenue	Current 2018-19	Forecast 2019-20	Forecast 2020-21	Forecast 2021-22	Forecast 2022-23	Total 5 year
Prop 10 tax revenue	85,191	81,800	81,826	77,783	77,783	404,383
Small County Augmentation	264,809	268,200	268,174	222,217	222,217	1,245,617
Surplus Money Investment Income (SMIF) estimate	65	97	81	89	85	417
Home Visiting Services: CAPIT Grant (Child Abuse Prevention)	33,000	33,000	33,000	33,000	33,000	165,000
Peapod Program (Partnership of F5M & Mono Behavioral Health)	40,000	40,000	40,000	40,000	40,000	200,000
Child Care Quality: IMPACT, CSPP Block Grant	104,587	89,227	72,000	73,000	73,000	411,814
Child Care Quality: IMPACT Region 6 Hub & Certification Grant	155,399	121,372	125,000	125,000	125,000	651,771
Community Development Block Grant: Childcare	241,279	269,399				510,678
Miscellaneous Income	1,000	140	140	140	140	1,560
Interest on First 5 Mono Fund Balance	8,995	6,126	5,848	5,204	3,846	30,020
Total Revenues	934,325	909,361	626,069	576,433	575,071	3,621,260
Expense	Current 2018-19	Forecast 2018-19	Forecast 2020-21	Forecast 2021-22	Forecast 2022-23	Total 5 year
Home Visiting Services: (WBI; B/F Promotion; CAPIT Grant)	170,430	160,500	165,500	170,000	170,000	836,430
School Readiness: ESUSD;MUSD;RAR;F5M Coordination	86,353	87,000	88,000	89,000	89,000	439,353
Peapod Program (Partnership of F5M & Mono Mental Health)	40,182	40,000	40,000	40,000	40,000	200,182
Child Care Quality: IMPACT, Block Grant, Hub & Certification Grant	264,986	229,482	209,000	210,167	210,167	1,123,801
Community Development Block Grant: Childcare	241,279	269,399				510,678
Oral Health Services	4,370	3,500	3,000	3,000	3,000	16,870
Safe Kids Partners	7,000	7,000	7,000	7,000	7,000	35,000
Evaluation/Assessments to identify gaps in services	1,500	1,350	500	500	500	4,350
<i>Commission Operations/Support -- Administration</i>	62,822	72,284	95,705	99,533	103,514	433,858
<i>Commission Operations/Support -- Program</i>	32,911	37,642	47,852	49,766	51,757	219,929
<i>Commission Operations/Support -- Evaluation</i>	10,970	12,547	15,951	16,589	17,252	73,310
Commission Operations/Support -- Total	109,703	125,473	159,508	165,888	172,524	733,096
Misc. Program Exp. including County Counsel, & Audit	14,663	10,050	10,050	10,050	10,050	54,863
Total Expenditures	940,466	933,754	682,558	695,605	702,241	3,954,623
Fiscal Year	2018-19	2019-20	2020-21	2021-22	2021-22	
Revenues less Expenses	-6,141	-24,392	-56,489	-119,172	-127,170	
Total Fund Balance (current estimate, & forecast)	537,410	513,018	456,529	337,358	210,188	

Discretion ary	Forecast	Strat Plan
33%	21%	34%
22%	11%	19%
0%	5%	7%
3%	28%	9%
0%	13%	
1%	0%	1%
2%	1%	2%
0%	0%	
22%	11%	16%
11%	6%	8%
4%	2%	3%
36%	19%	28%
3%	1%	2%

Assumptions: DOF 1/2018 projected Prop 10 revenues and birth rate through FY 2018-19; 9% annual salary and benefit increases. In August of 2008 the Commission established a policy to set a minimum fund balance of no less than one year's current base revenue, thus allowing the commission to sustain program operations or close them out, should it be necessary. This threshold is forecasted to be crossed in FY 2022-23.

First 5 Mono Strategic Plan 2019-2024

March 2019

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First 5 Mono Strategic Plan 2019-2024

Introduction

The Mono County Children and Families Commission (First 5 Mono) last revised its strategic plan in 2014 and decided to begin the revision process again in 2018 with the goal of creating a five year strategic plan for 2019 to 2024. This guiding document provides a plan to support and improve the lives of young children and their families. Together with community partners and families, we have the opportunity to create and enhance efforts to promote our children's optimal development.

Vision

All Mono County children will thrive in supportive, nurturing, and loving environments, enter school healthy and ready to learn, and be capable of reaching their full potential.

Mission

First 5 Mono County will be a leader in a community-oriented and family-centered support network for children prenatal to age five and their families, and is charged with improving outcomes in children's health, safety, and learning.

Goal

Enhance the network of support services for families with children ages 0 to 5 years.

Guiding Principals

1. Strive to serve all families in Mono County using strength based, family centered, and culturally relevant approaches.
2. Promote and fund high-quality programs that are flexible and creative.
3. Foster coordination and partnerships with service providers.
4. Be accountable to the public with effective fiscal management and evaluation.
5. Leverage funds to maximize community resources and program support.

About the Commission

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 a year from these funds, through annual allocations, augmentations for small population counties, and child care quality matching funds. To access these funds, the county must adopt a strategic plan that shows how it will use

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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.

Community Input

Input was gathered in multiple ways with the goal of hearing from parents and community members county-wide. Participants in the planning process were provided a draft 2019-2024 Strategic Plan and the 2014-19 Strategic Plan. Issues considered included:

1. Outcomes and continued community need for currently funded programs.
2. New priorities and opportunities.
3. Capacity for funding.

Focus Groups

Five Focus Groups were conducted in November and December at regularly scheduled Peapod Playgroups in the following locations:

- Walker
- Bridgeport
- Mammoth English
- Mammoth Spanish
- Crowley Lake

Notice was given to Peapod participants, and home visiting clients informing them a focus group was taking place in their community. Discussion was fostered by asking participants at each group the same list of questions.

Community Meeting

A community meeting was held November 8th, 2018 in Mammoth Lakes to elicit comments and suggestions from any interested community members unable to attend public hearings at commission meetings due to work. Notice was sent to

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our listserv, community partners, and the local newspapers: El Sol, The Sheet, and The Mammoth Times.

Public Hearings

The September and March Commission meetings included a public hearing, giving the public a chance to comment on potential revisions to the strategic plan. For the March meeting, notice was sent to our listserv, community partners, and the local newspapers: El Sol, The Sheet, and The Mammoth Times.

Interviews

Given the lack of input gathered from agency partner in the last strategic plan process, for this 5 year plan ~~we will seek to an~~ interview was conducted with the following ~~county department heads: Social Services, Public Health, and Behavioral Health as well as (TBD)~~ the County Chief Administrative Officer, several other department heads were not able to schedule or provided written comments (see below).

Written Comments

With the notice of public hearings and the focus groups, we will also invited the public to submit written comments to the executive director. Community partners were contacted via email and invited to provide input. "Invest In..." comment cards (index cards with a blank spot after the words "Invest In") were placed around Mammoth Lakes with a flyer describing the need for input in the Strategic Plan. Cards were placed in the following offices: First 5 Mono, Sierra Park Pediatrics, Women Infants and Children (WIC), Inyo Mono Community Advocates (IMACA), and Mono County: Health Department, Social Services, and Behavioral Health. Written comments were also provided by the Mono County Director of the Department of Social Services and the Public Health Director.

Planning Retreat

On January 17th, 2019, the Commission participated in a planning retreat to review public input, past accomplishments and investments, and current unmet needs with the goals of: 1) identifying potential indicators of success and outcomes; and 2) prioritization of strategies based on commissioners' identification of need, impact, and available infrastructure.

Evaluation Results

Annual evaluations results from Fiscal Years 2015-2016 and 2016-2017 were available at each focus group, community meeting, and public hearing, as well as

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posted on our website to help community members formulate suggestions for the strategic plan revision.

Public Hearing on the Revised Plan

At the March Commission meeting, there was a public hearing on the draft strategic plan and the commission gave direction for the final revision.

Accomplishments

Over the last 18 years, First 5 Mono has offered families home visiting, playgroups, Kindergarten Round Up, and Summer Bridge Programs; and child care providers training, quality improvement assessments, and oral health education for children in their care. First 5 Mono has continued to build partnerships with community agencies, child care providers, the hospital, and schools. Successes since the last Strategic Plan revision include:

- | | |
|---------------------------|--|
| Expanded Services | <ul style="list-style-type: none">• Annual Birth-to-5 Health and Safety Fair an Mammoth Lakes• Preschool services in Bridgeport and Benton• Foosteps2brilliance digital literacy application |
| Sustained Services | <ul style="list-style-type: none">• Oral health education & topical fluoride varnish in child care settings.• Raising a Reader• Childcare quality improvements and maintenance: Improve and Maximize Programs so all Children Thrive (IMPACT).• Readers' Theatre: educational productions for child care providers.• The Tooth Tutor program is able to provide home visits educating parents about optimal oral health.• Topical fluoride varnish provided to children in playgroups.• County-wide Peapod Playgroups.• Home Visiting.• Participation in a Childbirth Education Course at the hospital 2 times a year.• Free breastfeeding bags for all moms giving birth at Mammoth Hospital.• County-wide school Readiness activities including Kindergarten Round Up, Summer Bridge, and Kindergarten assessments.• Annual Birth-to-5 Health and Safety Fairs in Coleville, Bridgeport, Lee Vining and Benton. |

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- Distribution of free children's books to Mono County children through First Book.
- Distribution of free car seats through partnerships with Mammoth Lakes Fire and Police Departments and California Highway Patrol.
- Distribution of free bike helmets at Birth-to-5 Health and Safety Fairs.
- Funding for a Safe Kids California, Mono Partners coordinator.

Systems Building

- Mammoth Hospital began coordination of Childbirth classes twice a year.
- Supported Sierra Park Pediatrics to implement Ages and Stages Questionnaire (ASQ) developmental screenings.
- First 5 Executive Director became an ASQ trainer.
- First 5 and MCOE staff became certified CLASS observers.
- MCOE staff trained in Child Development Permit professional growth advising.
- Safe Kids coordinator became a Car Seat Technician.
- Mammoth Hospital Auxiliary contributed funds for breastfeeding bags for new moms.
- Created the Childcare Quality System to support coordination of local funding streams.
- Fiscal lead for regional coordination of the Region 6 T & TA Hub for the California Quality Counts work, known at the federal level as Quality Rating Improvement System (QRIS).
- Coordinated with Mono County and Eastern Sierra Unified to fund, open, and operate two new preschools.

Sustained Funding Partners

- \$40,000 contract with Mono County Behavioral Health to provide Peapod Playgroups (moved to a three-year contract instead of single year).
- \$29,000 a year for three years Child Abuse Prevention, Intervention, and Training grant from the Department of Social Services to provide high-needs home visits for children 0-6 years old.

New Funding

- \$409,112 four-year contract with First 5 California for the IMPACT Regional T & TA Hub
- \$9,625 California Department of Education (CDE) Regional Certification & Certification and Coordination Grants
- \$6,587 CDE Mono-Alpine Infant Toddler Block Grant

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- \$4,000 a year for three years Community Based Child Abuse Prevention (CBCAP) grant from the Department of Social Services to provide high-needs home visits for children 0-6 years old.
- \$1,000,000 Community Development Block Grants to operate two preschools for four years through Mono County.
- Proposition 56 funds for Oral health supplies through Mono County Public Health.

Programs and Objectives

First 5 Mono programs were developed to fill community needs. Needs were assessed through collaboration with community agencies, input from families, and ongoing evaluation activities. Nationally recognized strategies have also influenced decisions around program development and maintenance. Programming decisions are also guided by the availability of funding from outside sources.

FY 2018-19 Funded Programs

1. Home Visiting

Rationale: Home visiting is a nationally recognized strategy to improve outcomes for children and families. It 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 childbirth education--as no other agency has at this time the capacity to do so, and lactation services—as such services greatly enhance the will and ability for moms to sustain breastfeeding contributing to overall childhood health.

- a. **Welcome Baby!:** For all Mono County families with children age prenatal-12 months
Funded & Conducted by: First 5 Mono and Mono County Social Services
- b. **Parenting Partners:** For high needs Mono County families with children age 1-5 years old
Funded by: First 5 Mono and Mono County Social Services
Conducted by: First 5 Mono
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

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- Increase and support literacy activities
 - Link families to community services, and support access to services
 - Conduct developmental screenings and refer families to early intervention programs for assessment
 - Educate parents on parenting topics like: home safety, discipline, teething, introducing solids, immunizations, nutrition, oral health, and selecting a child care provider
 - Provide culturally competent services in Spanish and English
 - Facilitate optimal family functioning
 - Decrease child abuse and neglect
- c. **Café Mom:** Lactation support provided in a weekly group meeting as participation permits.
Funded by: First 5 Mono
Conducted by: First 5 Mono
Objectives:
- Provide research-based education about breastfeeding
 - Provide peer-support for breastfeeding
- d. **Childbirth Education:** Held at least two times a year for expectant parents
Funded by: First 5 Mono and Mammoth Hospital
Conducted by: First 5 Mono, Mammoth Hospital, and community partners
Objectives:
- Educate families about childbirth, breastfeeding and infant care
 - Prepare families for childbirth, breastfeeding, and infant care
 - Link families for community services available for young children

2. School Readiness

Rationale: A child's education begins very early. Since school-based educational systems don't begin until 3 -5 years of age, First 5 promotes programs that help children get ready for school in the early years. School readiness programs have expanded since the last strategic plan revision to include all the county's schools. The expansion of services is due to the programs' successes, based on both parent satisfaction surveys. Although First 5 California funding for school readiness activities ceased, the Commission has sustained services using its own funds.

- a. **Readers' Theatre:** Skits and book readings in child care facilities, preschools and at story time
Conducted by: First 5 Mono

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Objective:

- Promote early literacy

b. First Book: Free books for Mono County children birth to 5

Funded & conducted by: First 5 Mono

Objectives:

- Increase early literacy opportunities in home environments
- Facilitate positive parent-child interaction
- Increase literacy for young children

c. Raising a Reader:

Funded by: First 5 and Mono County Office of Education

Conducted by: Mono County Libraries

Objectives:

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

d. Kindergarten Round Up: Informational meeting held at all county elementary schools with parents of incoming kindergartners

Conducted in partnership with Eastern Sierra Unified School District (ESUSD) and Mammoth Unified School District (MUSD)

Objectives:

- Introduce families and children to the school, 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 pre-k assessments and or Summer Bridge

e. Kindergarten Assessments: School readiness assessments conducted by school staff.

Funded by: First 5 Mono

Conducted by: ESUSD & MUSD

Objectives:

- Assess incoming students' school readiness
- Identify children's skill development needs at the beginning of kindergarten

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- f. **Summer Bridge:** Two week kindergarten transition program held in the summer for incoming kindergartners.

Funded by: First 5 Mono

Conducted by: ESUSD & MUSD

Objectives:

- Increase school readiness skills
- Increase families' familiarity with the school campus and teachers

3. Child Care Quality

Rationale: 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 enables provision of programs that help improve and maintain high-quality child care.

- a. **IMPACT:** In-home and center-based child care provider training [& support](#)

Funded by: First 5 California and First 5 Mono

Run by: First 5 Mono

Objectives:

- Increase child care providers' understanding of child development
- Provide support to child care providers for better understanding and improving teacher child interactions
- Increase the quality of child care environments with supports that include coaching, developmental screenings, communities of practice, and professional development

- b. **QRIS Infant Toddler and California State Preschool Block Grants:** Child care provider quality improvement program.

Funded by: California Department of Education

Run by: First 5 Mono

Objectives:

- Assess state preschool sites for quality indicators
- Create an improvement plan for each site
- Track implementation of goals
- Support infant and toddler sites with coaching

- c. **IMPACT Training & Technical Assistance (T & TA) Hub and Certification & Coordination Grants**

Funded by: First 5 California & the CDE

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Run by: First 5 Mono with a contracted coordinator

Objectives:

- Coordinate a regional support system for child care quality
- Coordinate efforts to reduce duplication
- Identify and support regional efficiencies

4. Oral Health

Rationale: The 2009 Strategic Plan revision found 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.

Tooth Tutor, Oral Health Outreach and Education

Funded and Conducted by: First 5 Mono

Objectives:

- Provide semi-annual fluoride varnish application to all Mono County Children 1-5 not receiving services from a dentist
- Educate children and parents about oral health
- Provide free toothbrushes to families to help maintain good oral health
- Provide oral health checks at Kindergarten Round Up

5. Family Behavioral Health

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

Peapod Playgroups

Funded by: Mono County Behavioral Health with minimal First 5 funding

Conducted by: First 5

Objectives:

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

6. Child Safety

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Rationale: There were no agencies in the county focused specifically on child safety prior to the creation of Safe Kids California, Mono Partners. 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 a collaboration, the Commission decided to fund the coordination of a Safe Kids California, Mono Partners group. Now the coordinator's staff time is also supported with County Office of Education funds.

Safe Kids California, Mono Partners

Funded by: First 5 and Mono County Office of Education

Run by: Mono County Office of Education

Objectives:

- Educate families and care providers about child safety
- Provide car seats and bike helmets to families
- Provide county-wide safety events

Health and Safety Fairs

Funded by: First 5 Mono

Fun by: First 5 Mono

Objectives:

- Provide annual county-wide events in each community with an elementary school to help meet Safe Kids objectives

Lessons Learned and Progress Made ~~Unmet~~ Community Needs

Over the last 5 years, ~~we~~ First 5 Mono ~~were~~ was tasked ~~to~~ with impacting the following unmet needs: opportunities to gather, early literacy, and child care availability and quality. To address these needs we offered a new annual gathering, attended partnering agencies' events, supported initiatives with funding, and applied for grants.

To increase the opportunities to gather for families with young children, ~~we began offering~~ an annual Health & Safety Fair in Mammoth Lakes was begun. The event has been a big success with about 350 participants at each event. ~~We~~ First 5 staff also attended some of Behavioral Health's "Socials" (evening community gatherings) and the Foro Latino (an evening gathering for the Spanish-speaking community). First 5 Mono ~~The Commission~~ also continued to provide Peapod Playgroups across the County.

To address child care availability, First 5 Mono applied for CDBG funds through the County and through MCOE for State Preschool funds. Through these efforts and those

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of partner agencies (the County Office of Education, Eastern Sierra Unified School District, and Mono County) there are now three new preschool classrooms in Mono County. For child care quality, First 5 Mono created the Childcare Quality System to coordinate multiple funding streams and simplify participation for providers. First 5 also sought new funding streams to support local work and consolidation of funding by applying for the [California Department of Education Quality Rating and Improvement System \(QRIS\) Infant and Toddler](#) and [California State Preschool Program](#) Block Grants, for which funding was received.

For early literacy, the County Office of Education spearheaded the footsteps2brilliance literacy program (an app based learning program) with funding support from Mono County and First 5 to improve early literacy. The Commission also continued to invest in Raising a Reader and First Book and encourage literacy through Home Visiting, Peapod Playgroups and School Readiness investments.

Unmet Community Needs

[For this Strategic Planning process data was drawn from focus groups, a community meeting, comment cards, written responses and reports, the First 5 Association communication materials, and interviews. The themes that emerged about unmet needs are from parents, County representatives, and concerned community members. Across all data sources, childcare was the most common issue raised. Our County needs more high quality, affordable childcare slots. A second theme is for the provision of more activities: parent education, child activities, and an indoor space/resource center. A third theme is for increased coordination of and communication about services. The Mental Health Services Act FY 2017-2020 Three-Year Program and Expenditure Plan and the Department of Social Services Self Assessment also underline the need for housing, opportunities to gather to decrease isolation, and the need for greater family fiscal stability.](#)

Childcare

[Despite the opening of three new preschool rooms in the County, childcare is still the greatest stated need. Based on data from the Childcare Planning Council and “Invest in” comment cards, infant care is the highest unmet need. Discussions with clients and staff highlight some of deeper issues: affordability and quality. Through the strategic planning process, staff also identified a disconnect between slot availability and perception of availability. Currently all the licensed Spanish speaking providers in Mammoth Lakes have availability they are seeking to fill, but families and agencies seem unaware of the availability. This overlaps with comments about the need for greater communication about available services.](#)

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Many entities have worked to address the childcare issue over the last 15 years, yet the issue persists. Currently in Mammoth Lakes, the County Office of Education is spearheading an effort to build a childcare center to meet the needs of the community. That said, the barriers that exist are: funding and identification of an available space or land (the ice rink has long been the planned site, but factors related to the town's plans to move from that site have stalled the process).

Community Development Block Grant funding has been identified as a potential support the Town and County can access to construct and operate child care centers. The County has accessed those funds which are used to operate two preschool classrooms, but the Town has yet to choose to access the funds. While the County Office of Education plan will address many families' needs, without more funding support, the family cost to attend a program that costs more than \$40 a day will be prohibitive for families with low income. Children in families with low income are often those with the highest need of support. High-quality affordable childcare for low income families will likely have the greatest impact on First 5's School Readiness outcome, and can provide a solid foundation for children upon which to build, attain high school graduation, and financial stability in adulthood (both of which research demonstrate that School Readiness impacts).

Some greater policy issues around childcare in our Nation, State, and County are: provider pay, affordability for families, and provision of high-quality programs. Although First 5 works locally with providers to improve quality, and over 80% of providers in the County participate in quality improvement, provider salary is less than half of what a kindergarten teacher earns and 46% of providers in the state rely on public assistance¹. While providers struggle with low pay, the cost to families for childcare is parallel to the cost for housing². For the many families that struggle with financial stability, the cost for care is often not feasible, leading families to opt to leave their child with family, a friend, or neighbor who likely has few supports or education in early childhood that could contribute to high-quality care.

First 5 will continue to collaborate with community members and agencies to find solutions to the childcare and preschool needs of families in Mono County. First 5 will continue to try to identify and connect community members interested in becoming

¹ Ramey, Craig T & Ramey, Sharon L. "Early Learning and School Readiness: Can Early Intervention Make a Difference?" *Merrill-Palmer Quarterly*, vol. 50 no. 4, 2004, pp. 471-491. *Project MUSE*, doi:10.1353/mpq.2004.0034

² Kimberlin, Sara "Addressing Child Poverty: Recent Progress and Policy Options" California Budget and Policy Center *California Welfare Directors Association, Director's Workshop San Francisco December 6, 2018*

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licensed providers with Inyo Mono Advocates for Community Action (IMACA), the agency with funding to provide licensing support) as it has in the past.

Opportunities to Gather

First 5 Mono, with the help of funding from Mono County Behavioral Health, has continued to offer county-wide Peapod Playgroups to help fill this need. Mono County Behavioral Health's current Mental Health Services Act cited Peapod Playgroups as a strong prevention initiative and increased funding due to positive feedback. Combined with community input garnered through First 5 evaluation activities, the Commission remains committed to holding these groups.

Birth-to-5 Health and Safety Fairs, offered at all ESUSD sites, are additional First 5 events offered for families. Mono County Behavioral Health has also begun the Circolo de Mujeres with a child care component to support Spanish speaking mothers in Mammoth Lakes and the Foro Latino for Spanish speaking community members. While funding does not allow for expansion of First 5 services, work can be done to better leverage other community resources. First 5 will work with agency partners to seek to coordinate the expansion of opportunities for families to get together without increasing existing levels of First 5 funding, a theme also explored in the final unmet need: coordination and communication.

Coordination and Communication

From all data sources it is clear parents are seeking a better and easier way to get information about available resources and services. First 5 recognized this challenge several years ago and sought support from community partners for a 2-1-1 information line in Mono County that could serve this need with both a toll-free hotline and a thorough database all could access to identify services and resources. After fiscal projections determined a call cost of around \$100/call, the system was deemed too expensive. Since that time assembly bill 1212 was enacted mandating a State-wide 2-1-1 system. That said, implementation was scheduled for July 2017, and despite requests, there has been no support to Mono from 2-1-1 California for implementation. As we continue to wait for implementation of a Statewide 2-1-1, an annually updated resource guide was developed by the Child Abuse Prevention Council Coordinator. Beyond that, an implementable idea from the Community Meeting was to hold an annual resource meeting with agency representatives so that, at a minimum, all partners are aware of each other's resources. First 5 has also sought funding partners, due to our investment in programs rather than advertising, to better advertise our programs and has enjoyed support from IMACA and the Mono County Departments of Social Services, Probation, and Public Health. First 5 also maintains a very thorough

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[calendar on our website and regularly posts updates to our listserve which has about 500 subscribers.](#)

[In terms of coordination, First 5 has sought, with varying success, to coordinate services with agency partners. Willingness to coordinate has varied from complaints that First 5 is asking for things beyond the scope of funded contracts, to strong partnerships resulting in coordinated services. The First 5 Director is participating in a Network Leadership cohort offered by the First 5 Association to help refine skills to better be able to build networks of support for young children to better facilitate coordinated systems. First 5 efforts to foster coordination between agencies will continue to seek to address the issue of better coordination. Communication efforts will continue via partner-funded advertising and website and listserve posting.](#)

TBD

Results, Strategies, Indicators, and Outcomes

Definitions

Result Areas are the ultimate result and improvement the commission is striving for. The result areas identified by First 5 California are: improved family functioning improved child development, improved health and improved systems of care.

Strategies are activities and services that can be implemented to achieve desired outcomes.

Indicators are observable, measurable characteristics or changes that represent achievement of an outcome.

Outcomes are the impact, change or benefit that result from implementing certain activities or services.

Goal: Enhance the network of support services for families with children ages 0 to 5 years.

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

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Strategies:

Provide the following county-wide services:

- Home visiting
- Child care quality
- School readiness
- [Peapod Playgroups](#)
- [Childcare](#)

Indicators [& 2013-2017 Data](#):

- Number and percent of children in households where parents and other family members are receiving child-development and parenting education. (up over 5 years from 41% to 52%, data only includes participants in First 5 programs)
- Number and percent of children 6 months to 5 years old screened for developmental delays. (up over 5 years from 16% to 28%, data issues minimal)
- Number and percent of children [in licensed care](#) served in 1) home child care settings and 2) child care centers that exhibit moderate to high quality as measured by a quality index. (up over 4 years to from 0 to 8%, no data issues)
- Number and percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix. (static over 2 years at 0, data only available through sites' participation in First 5 Mono operated Quality Programs)
- Number and percent of licensed center and family child care spaces per 100 children. (down over 5 years from 53% to 30%, no data issues)
- Number and percent of children "ready for school" upon entering Kindergarten. (down over 5 years from 53% to 50%, no data issues)
- Number and percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry. (down over 5 years from 42% to 24%, data issue with very low sample size, addressed in 2017-18 with a kindergarten entry survey)
- Number and percent of children receiving Kindergarten transition support. (down over 5 years from 91% to 67%, no data issues)
- Number and percent of entering Kindergarteners assessed for school readiness prior to [or at](#) entry. (~~down over 5 years from 80% to 24%, but up over 5 years from 80%~~ to 100% ~~for kindergartners assessed at school entry,~~ no data issues ~~if amended to replace "prior" with "at"~~)

Outcomes:

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- Improved parental knowledge, understanding, and engagement in promoting their children's development. [Achieved](#)
- Improved screening and intervention for developmental delays, disabilities, and other special needs. [Achieved](#)
- Improved quality and availability of childcare providers. [Achieved](#)
- Improved school readiness. [Not achieved](#)

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

Strategies:

Provide the following county-wide services:

- Lactation education and support
- Home Visiting
- Oral health education and support
- School Readiness
- Child care quality
- [Peapod Playgroups](#)
- [Safe Kids](#)

Indicators:

- Number and percent of children where breastfeeding is successfully initiated and sustained. (up over 3 years from 89% to 91%, data dependant on Mammoth Hospital and only includes patients from Sierra Park Pediatrics)
- 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. (down over 2 years from 78% to 77%, data dependant on Mammoth Hospital and only includes patients from Sierra Park Pediatrics)
- ~~Number and percent of children who regularly access preventive dental care. (up from 15% to 20% over 5 years, data dependant on Mammoth Hospital and only includes patients from Sierra Park Dental)~~
- Number and percent of children at Kindergarten entry with untreated dental problems. (down over 5 years from 46% to 18%, data issue with low sample size, addressed in 2017-18 with support from MCOE to implement data entry into SCOHR by schools)
- Number and percent of prenatal women who receive dental hygiene education. (down over 5 years from 27% to 19%, data only includes participants in First 5 programs)
- Number and percent of children ages 1 or older who receive annual dental screenings. (static over 3 years at 17%, data dependant on Mammoth Hospital and only includes patients from Sierra Park Pediatrics)

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- Number and percent of children in families provided with information about appropriate community services. (up over 5 years from 41% to 46%, data only includes participants in First 5 programs)

Outcomes:

- Improved parental knowledge, understanding, and engagement in their children's physical and mental health. [Achieved](#)
- Improved access to health care services for children 0-5. [Achieved](#)
- Increased breastfeeding rates. [Achieved](#)

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Financial Plan

As of July 1, 2018, the First 5 Mono County Children and Families trust fund had an ending fund balance of \$860,755. All of these funds have already been assigned to programs and services for children and families in the fiscal year 2018-19 and beyond. The challenge becomes how to manage the remaining resources, and new funds allocated to Mono County through the Prop 10 system, in a way that allows the strategies described in this plan to be successfully implemented and sustained for long enough to allow measurable improvements in the well-being of young children.

The State Commission has been providing an annual augmentation to support small county operations, which has allowed the Commission to free up tax revenues for programs. The rationale for this allocation was to address the administrative burden on small counties, who must use a proportionately greater share of their tax revenues to provide basic operations, including administrative services, planning, outreach, and evaluation. Currently, First 5 Mono County receives a baseline Small County Augmentation that augments prop 10 funds to reach a baseline of \$350,000—an amount determined by a 3 year average of births to County residents. The State Commission has committed to continuing these augmentations, through FY 2020-2021 for eligible counties, which includes Mono County. The state commission is currently reexamining its Small County Augmentation calculation and commitment.

In August of 2008 the Commission established a policy to set a minimum fund balance of no less than one year's current revenue thus allowing the commission to sustain program operations or close them out, should it be necessary. Revenues continue to decrease due to an approximate 3% annual decline in tobacco tax revenue. Current annual revenue projections from tobacco tax and Small County Augmentations are: \$350,000. Using the current annual revenue (\$350,000), the threshold set in 2008 is predicted to be crossed late in FY 2021-22 assuming Small County Augmentations drop to \$300,000 in FY 2021-22 due to our County's declining birthrate.

To continue funding current programs, the Commission has actively sought--and succeeded--in forging fiscal partnerships with other local agencies. The Commission will prioritize funding programs that are able to leverage Commission funding to draw resources from other sources (such as local government, federal CDBG, the State Commission or other state funds). The Commission will encourage and assist programs in seeking funding from other sources to assure sustainability. Finally, the Commission will continue to seek funds from additional sources to sustain the activities in its strategic plan.

The Commission has made significant, successful investments in home visiting and school readiness services. Funds have been allocated below to refine and continue

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these existing strategies, as well as establish new services that address gaps identified through data gathered from the home visiting and school-linked service systems.

In compliance with state law, First 5 monies will be used only to supplement existing levels of service and/or create new services, and not to fund existing levels of service. No monies from the Children and Families Trust Fund will be used to supplant state or local General Fund money for any purpose. During the next five years (beginning in July 2019), the Commission will dedicate funds aligning with the objectives of this strategic plan, using the following estimated guidelines:

Strategic Objective	5-Year Investment TBD based on 2018-19 Fiscal Plan	Percent of 5-year Investment
1. Home visiting services	<u>\$836,430</u>	34% <u>21%</u>
2. School readiness services	<u>\$439,353</u>	19% <u>11%</u>
3. Child Care Quality	<u>\$1,123,801</u>	9% <u>28%</u>
<u>4. Childcare</u>	<u>\$510,678</u>	<u>13%</u>
4.5. Oral health services	<u>\$16,870</u>	1%
5.6. Family Behavioral Health	<u>\$200,182</u>	7% <u>5%</u>
6.7. Child Safety	<u>\$35,000</u>	2% <u>1%</u>
7.8. Commission Operations/Support* <ul style="list-style-type: none"> Administrative costs – not to exceed 20% of total operations budget Program – varies, approximately 7% annually Evaluation varies, approximately 3% annually Misc.(county counsel and audit) 	<u>\$792,309</u>	28% <u>20%</u>
<i>*Commission Operations/Support costs are categorized as Administrative, Program, and Evaluation Costs, consistent with the definition of these functions as defined in the First 5 Financial Management Guide. The percent of administrative costs that may be spent on administrative functions in a fiscal year shall be no more than 20% of the Mono Commission's total operating budget.</i>		
Total	<u>\$3,954,623</u>	

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Summary

Children and Families in Mono County have benefited from myriad services provided by First 5 Mono and collaborations including First 5 for 15 years. While multiple services are provided, and have been for many years, parents and community members feel a need for more: 1) childcare; 2) opportunities to gather; and 3) communication about and coordination of services. First 5 will continue to prioritize the services parents and community members want within the boundaries of its funding sources. First 5 will also seek to work with agency partners to better coordinate and communicate about the services available to families. The Commission prioritized its investments by program areas—which encompass strategies to address the most commented upon services during the planning process: 1) Home Visiting; 2) Family Behavioral Health; and 3) School Readiness.

As this strategic plan is implemented, First 5 will work with community agencies to improve the indicators in the Strategic Plan. Annual evaluation reports to the Commission at public hearings will provide data demonstrating First 5 Mono's effectiveness at improving indicators, providing services county-wide, and meeting its overarching goal of enhancing the network of support services for families with children ages 0 to 5 years. Evaluation results over the next five years will also help guide the next strategic planning process.

TBD

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Appendix 1: Summary of Community Input from the 2013 Strategic Plan Update Process

Minutes and correspondence from all public hearings, written comments, community meetings and Focus Groups are available by contacting the Commission office in Mammoth Lakes.

Compiled comments from all Focus Groups [\(21 participatns\)](#)

What participants like about First 5 programs:

[Peapod](#)

[Socialization with other kids \(11\)](#)
[Structure & Routine \(4\)](#)
[Gets us out of the house \(2\)](#)
[Parent socialization \(4\)](#)
[Pamphlets & information \(2\)](#)
[Free play](#)
[Mental health support](#)

[Drop-in availability](#)
[Book distribution](#)
[Organization of the leader](#)
[My child loves the leader](#)
[Education & play combo](#)
[Gross motor development](#)
[Story](#)

[Health & Safety Fair](#)

[Bike helmet](#)
[Fingerprinting](#)
[Socialization](#)

[Story Time](#)

[Exposure to library](#)
[Craft](#)

[Home Visiting](#)

[Breastfeeding \(4\)](#)
[One-on-one advice \(4\)](#)
[Hospital visit at birth \(2\)](#)
[Someone to talk to](#)

[Getting dad involved](#)
[Baby weight checks](#)
[Developmental assessments](#)
[Cognitive development information](#)

[All Programs](#)

[Universal service](#)

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First 5 fills a critical gap with the unique programs they offer & coordinate – Home Visiting, Peapod, Health & Safety Fairs.

First 5 provides a valuable service and there wouldn't be a substitute if services were eliminated.

The new preschools [Bridgeport & Benton] were a huge success.

Home Visiting & Peapod provide a sense of relief, safety, and confidence for high risk families; helps with isolation, builds relationships

First 5 provides reliable information on health status of high risk families

Participants' biggest challenges are:

Peapod

Interfering with naptime (5)

Leaving the house (3)

No challenge (3)

Not enough or uncertainty of structure (3)

Consistency in community attendance (2)

Wish group was longer (2)

Timing with older kids in school

Working parents' ability to attend

Mixing young babies with preschoolers

Kids older than five attending

Leaders' education (desires more)

Home Visiting

Not finding out about First 5 Mono services [from Sierra Park Pediatrics, or if birthing outside of Mono County]

Participants' memorable experiences in First 5 programs are:

Peapod

Friendliness and ease of the leader (2)

Leaders shoveling cow poop so kids could play

Meeting new kids and adults after moving here

Caregivers making connections with each other

Consistency of circle time & songs

Moms with empathy & compassion

Having a leader who was pregnant too

Home Visiting

My Home Visitor helped with every little thing.

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What would you change to make the programs better?

Peapod

More advertising/social media (5)

Change the time (2)

Add reading time

Bilingual group

Nothing

Add an activity (art, reading, singing, etc)

Large gross motor toys

Structured group for preschool age only

Home Visiting

Increased visits for high risk families

Other

Male staff, although staff does a great job already

More advertising & use of the logo by partners

Community needs participants feel families face are:

Childcare (daycare or preschool) (9)

Central resource area/event center (7)

Basic skills classes for kids (art, dance, music, swimming classes) (5)

Indoor space in winter (5)

Summer childcare (2)

Drop-in childcare (2)

Finding a babysitter (2)

Outdoor parent/child groups (2)

Mentoring program for youth, young or teen (2)

Mom and baby class

Other topics/ideas discussed:

Funding

Using marijuana tax revenue for early childhood investments

Cutting off the administrative costs charged by MCOE, and figuring out where that money needs to go instead

Can the strategic plan influence funding?

Childcare/Indoor play space

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Why hasn't there been movement with a childcare center in Mammoth?

Consolidate needs of indoor space and childcare into one solution

Finding private industry and community partners

Other

Eliminate program duplication across entities (4)

Annual resource training for all agencies (4)

Make a comprehensive document to tie in all community needs, not only First 5

"Invest In...." Cards (28 received, some cards had multiple comments)

Parent Opportunities/Education (14)

class on childrens' emotions

how to use baby wraps

handouts on child development (3)

help for single parents

parenting classes for Hispanic parents

parenting classes

carseat safety

baby massage

breastfeeding class

ages and stages

mommy and me yoga

arts and crafts

Childcare (10)

preschool organized by Mono County (2)

Childcare (2)

preschool at the elementary site (LeeVining)

keep preschool money in Mono County

funding for daycare providers

town preschool center/daycare (Mammoth)

help for childcare outside of IMACA

subsidized infant care for home providers instead of funding childcare centers

Extracurricular education / activities (8)

fine arts, dance: local & free

outdoor program: hiking, exploration

community activities

weekend programming

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- parks with shelter from snow
- activities outside of school
- new educational toys (2)

School Readiness (4)

- longer Transitional Kindergarten program (Lee Vining Elementary)
- lending library (Coleville area)
- RAR book bag for kids & parents
- teachers and technology for kids (Mammoth)

Playgroups (5)

- hold a group in June Lake
- playgroup equipment
- peapod
- bring in new kids
- more hours with more kids

Other

- spend more time with & motivate kids
- outreach
- CPR class
- For teens:
 - CPR classes
 - Babysitting skills
 - Baking/ cooking club
 - Chess club, after school program

Themes:

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Appendix 2: Description of Mono County

Mono County is located south of Lake Tahoe on the eastern side of the Sierra Nevada Mountains. With over 3,000 square miles and a population a bit over 14,000, it is rural in character. The county's only passes linking it to the other side of the mountains typically close through the winter, contributing to its geographic isolation.

While the Latino population increased consistently from 1995-2005, the percentage of Latino families currently remains at about 50% and is concentrated in communities whose economies are tourism-based (Mammoth Lakes, June Lake, and Lee Vining). There are three Paiute Tribes—one without federal recognition—and two American Indian Reservations (in Benton and Bridgeport).

Geographic isolation and limited career opportunities are challenges families in Mono County face. Other challenges include: access to medical specialists, high-quality child care, and preschool in the most rural communities (Benton and Bridgeport).

Collaboration between varied agencies, schools, service providers, businesses, the community and faith organizations is common. The small population facilitates easy communication between groups. Residents are quick to help one another and solve issues facing the community.

Mono County is a strikingly beautiful place. The Sierras offer hiking, fishing, hunting, climbing and skiing. Families have the opportunity to know their neighbors, and enjoy low crime rates.

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Appendix 3: Committees and Collaborations

Below is a list of coalitions, task forces and committees in which First 5 Mono participates that work to promote health and wellness for families in Mono County:

Breastfeeding Taskforce

Coordination: Mono County Women Infants and Children (WIC)

Purpose: Planning for breastfeeding support in Mono County

Members from the following agencies:

- First 5 Mono
- Mammoth Hospital Labor and Delivery
- Mono County Women Infants and Children (WIC)

Child Abuse Prevention Council

Coordination: Mono County Office of Education

Purpose: Provide a forum for interagency cooperation and coordination in the prevention, detection, treatment, and legal processing of child abuse cases.

Members from the following agencies:

- First 5 Mono
- Inyo Mono Advocates for Community Action
- Mono County Health and Social Services Departments
- Parent and Community Representatives
- Wild Iris

Child Care Planning Council

Coordination: Inyo Mono Advocates for Community Action (IMACA)

Purpose: Planning for improvement of child care options in Mono County

Members from the following agencies:

- First 5 Mono
- Mammoth Kids Corner
- Mono County Health Dept.
- Mono County Office of Education
- Mono County Social Services Dept.
- Parents/consumers of child care

Inter-agency Coordinating Council

Coordination: Mono County Office of Education

Purpose: Coordinates services for special needs children ages 0-3

Members from the following agencies:

- First 5 Mono
- IMACA
- Kern Regional Center
- Mammoth Hospital
- Mono County Health Dept.
- Mono County Behavioral Health Dept.
- Mono County Office of Education
- Mono County Social Services Dept.

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Oral Health Taskforce

Coordination: Mono County Health Department

Purpose: Planning for improvement of oral health in Mono County

Members from the following agencies:

- First 5 Mono
- IMACA
- Mammoth Hospital & Clinics
- MCOE School Nurse
- Mono County Health Department
- Mono County WIC
- Sierra Park Dental Clinic

Safe Kids California, Mono Partners

Coordination: Mono County Office of Education

Purpose: Planning for improvement of child safety in Mono County

Members from the following agencies:

- California Highway Patrol
- First 5 Mono
- Mammoth Hospital
- Mammoth Lakes Fire Department
- Mammoth Lakes Police Department
- Mammoth Mountain Ski Area
- Mono County Health Department
- Mono County Office of Education
- Mono County Sheriffs
- State Farm Insurance

First 5 Mono Children and Families Commission

Purpose: Oversee the distribution of First 5 funds to benefit children 0-5

Members from following agencies:

- Mammoth Lakes Housing
- Mono County Behavioral Health
- Mono County Board of Supervisors
- Lee Vining Schools
- Sierra Park Pediatrics
- Mono County Public Health
- Mono County Office of Education