



FY 2017-18

Evaluation Report

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

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Overview

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

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

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

To fulfill the intent of the creation of First 5 Mono, meet state and local requirements, and evaluate the funded programs for the purposes of continuous quality improvement, First 5 Mono annually produces an evaluation report. This report has evolved over the last 5 years to include indicator data and more details about the investment areas in the First 5 Mono Strategic Plan. With new Small Population County Funding Agreement requirements and example content from First 5 California, this year’s format mirrors the state-developed example.

Throughout the year First 5 Mono collects participation and survey data from funded programs for the purposes of monitoring and evaluating the programs included in our strategic plan. Herein findings, conclusions, and recommendations based on the evaluation results will describe how evaluation data will be used to guide program improvements and decision making.

Using US Census American Fact Finder data, the overall population estimate for Mono County in 2017 is 14,158 and the 0-5 population is estimated at 717, 5% of the overall population. According to the 2017 Childcare Portfolio, 95 children 0-5 were living in poverty, 13% of the 0-5 population estimate (Appendix XI, Page 44).

First 5 Mono programs served the following number and percent of the 0-5 population (numbers for each program are unduplicated, but across programs numbers include duplicates):

- Improved Family Functioning
 - Home Visiting: 148, 21%
- Improved Child Development
 - CDBG Preschools: 12, 2%
 - Childcare Quality System: 465, 65%
 - Footsteps2brilliance 505, 70%
 - Peapod Playgroups: 192, 27%
 - Raising A Reader: 237, 33%
 - Summer Bridge 73, 10%
- Improved Child Health
 - Oral Health: 119, 17%
 - Safe Kids: 229, 30%

Demographics for families in our Home Visiting program, for which we have the most robust unduplicated data are as follows:

Child Race/Ethnicity

- Non-Hispanic
 - White: 75
 - American Indian: 1
 - Multi-race: 7
 - Native Hawaiian/Pacific Islander: 1
- Hispanic
 - Multi-race: 56
 - White: 8

Family Area of Residence

- Benton, Chalfant, Paradise: 4
- Mammoth Lakes, Crowley Lake, Sunny Slopes: 102
- June Lake, Lee Vining, Mono City: 10
- Bridgeport, Walker, Coleville, Walker, Topaz: 9

Key Findings:

- Home Visiting
 - Participating families have improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health.
 - Most enrolled children received developmental screenings, 54%
 - Mothers participating in First 5 Mono Home Visiting have increased breastfeeding rates compared to California mothers.
- Oral Health
 - Children at kindergarten entry have a high percentage of untreated carries, 30%.
- Peapod Playgroups
 - Participating families are receiving child-development and parenting education.

Due to the data, findings, and conclusions herein, First 5 Mono County will continue to fund its currently funded programs while implementing measures to improve quality. First 5 Mono will also continue to work with community partners to leverage supports around investment areas and the well-being of children birth to five and their families. The Commission will consider implementing changes to funding allocations with this data during the 2018-19 Strategic Planning process.

Programs and Evaluation

Improved Family Functioning

Home Visiting

Home Visiting is included in the First 5 Mono Strategic Plan because it is a nationally recognized strategy to improve outcomes for children and families. Home Visiting has been demonstrated to improve family functioning, decrease child abuse, and improve school readiness and literacy¹. In partnership with other community agencies, First 5 also provides lactation services through its Home Visiting efforts. Such services greatly enhance the will and ability for moms to sustain breastfeeding, positively contributing to overall childhood health. Starting in FY 2016-17, our Home Visiting program began offering visits to Spanish-speaking childcare providers using a Parents as Teachers curriculum specifically designed for providers.

The 2017-18 investment in Home Visiting was \$168,175 which includes three programs. Welcome Baby! offers 9 visits to all families in Mono County with a child prenatal to one year old with more frequent visits for families with multiple stressors. Parenting Partners is available to families with stressors and a child one year old to kindergarten entry. The duration and frequency of services is determined by family need. Visit frequency varies from 3 to 24 visits a year; for especially stressed families visits are two times per month. Both programs are funded and conducted by First 5 Mono with funding support from First 5 California Small Population County Funding Augmentation (SPCFA) (\$135,105) and Mono County Department of Social Services Community Based Child Abuse Prevention (CBCAP) and Child Abuse Prevention, Intervention, and Treatment (CAPIT) grants (\$33,000). The third Home Visiting program serves Spanish-speaking childcare providers in the county with 3 visits a year.

Program objectives include:

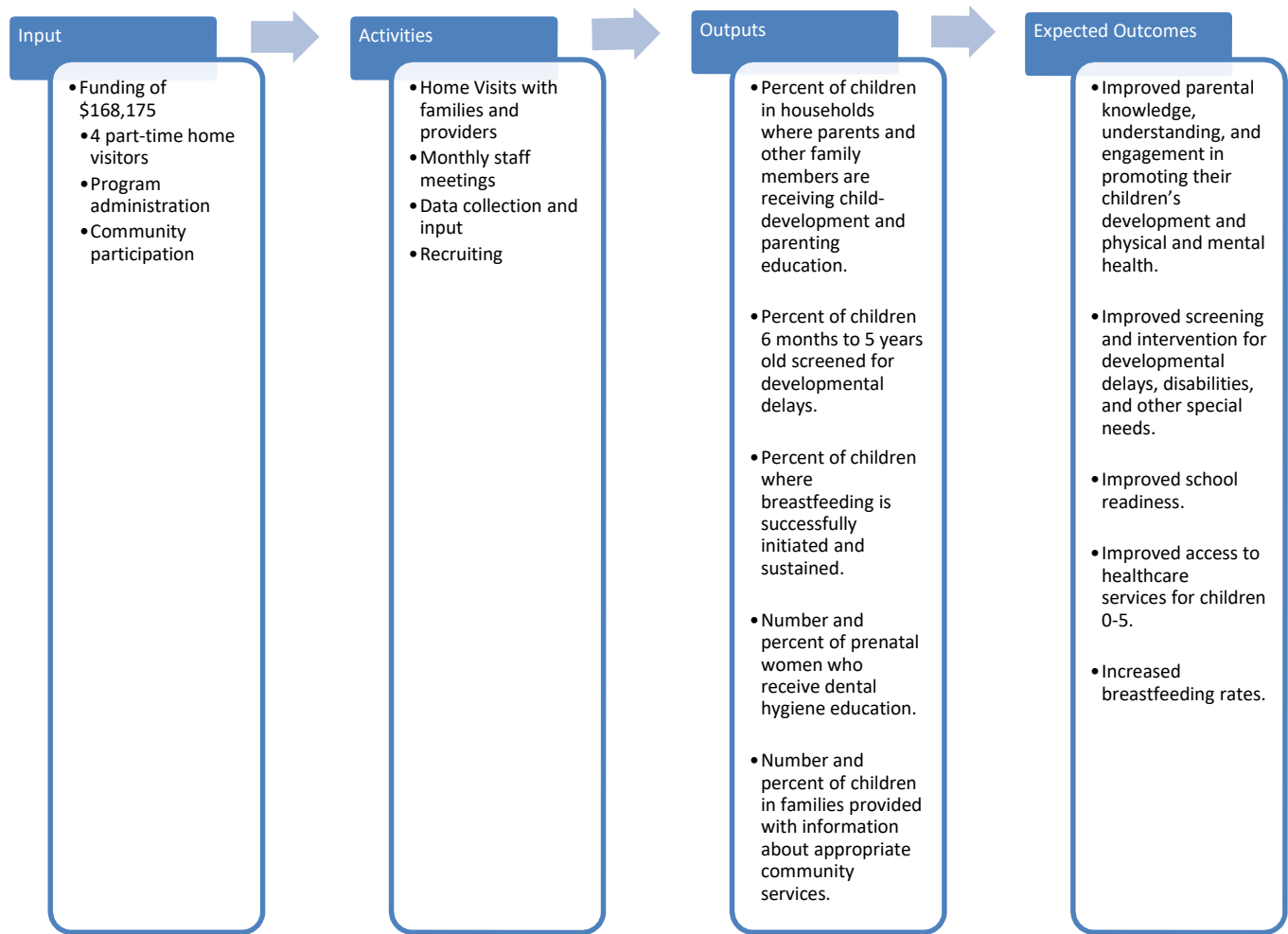
- Facilitate parents' role as their child's first and most important teacher
- Provide information on typical child development
- Stimulate child development by providing age-appropriate activities
- Increase and support breastfeeding and literacy activities
- Link families to community services and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

¹ Promising Practice Local Model: Modified Parents as Teachers Evidence-based framework: Pfannenstiel, J. C., & Zigler, E. (2007). Prekindergarten experiences, school readiness and early elementary achievement. Unpublished report prepared for Parents as Teachers National Center.

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

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

Logic Model



Evaluation, Findings, and Conclusions

- Do parents participating in Home Visiting have improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health?
 - Data Source: Home Visiting exit survey (Appendix I, Table 8-10, Page 22-24) and resource referrals (Appendix I, Table 6, Page 19)
 - Findings: Measures included in the survey data yielded agreement of 70% or higher or an increase in activities related to child development after program participation. Referral data demonstrates parent engagement in accessing resources related to development and physical and mental health and information shared with parents serving to improve knowledge and understanding of services.
 - Conclusion: The program is achieving this outcome
- Does Home Visiting improve screening and intervention for developmental delays, disabilities, and other special needs?
 - Data Source: Ages and Stages Questionnaire (ASQ) screening data (Appendix I, Table 7, Page 22)

- Finding: 54% of enrolled children who did not already have an identified developmental delay received a screening. Of those screened, 27% had a concern identified, and 8% of all children screened received early intervention services
- Conclusion: The program is achieving this outcome; however improvement can be made in the rate of screening. Only 8% of children with a screening received services compared to the 27% for whom a concern was identified for the following reasons: 1) concerns were addressed by providing activities to families that lead to growth to the extent that there was no longer a concern; 2) the parents refused a referral; 3) after assessment by early intervention specialists, the concern did not meet the threshold to qualify for early intervention services.
- Does Home Visiting improve school readiness?
 - Data Source: Incoming kindergarten school readiness assessments (Appendix II, Figure 3, page 28) and Incoming Kindergartner Parent Survey (Appendix II, Figure 3, Page 26)
 - Finding: Compared to an overall school readiness rate of 49%, only 43% of children who participated in Home Visiting were assessed as school ready. However, compared to the school readiness rate of 0 for children who did not participate in any early learning programs, 43% is a marked improvement.
 - Conclusion: Children who participate in Home Visiting are more likely to be school ready than those who did not participate in any early learning programs, but have lower school readiness rates than the cohort as a whole. Although we do not have data on the kindergarten cohort's characteristics (how many come from families with low income, low educational attainment, or other stressors), if the proportions of children served through Home Visiting experience these stressors at a higher rate than those of the kindergarten cohort as a whole, that could explain the lower percentage of school readiness for children who participated in Home Visiting. At the February 2019 Strategic Planning Retreat, the Commission asked staff to seek additional funding to offer home visiting to model fidelity as an outcome of home visiting, if it is provided to model fidelity, is higher school readiness rates.
- Does Home Visiting improve access to healthcare services for children 0-5?
 - Data Source: Referrals (Appendix I, Table 6, Page 21)
 - Findings: Children enrolled in the program were referred to and accessed the following healthcare services: dental services, medical services, and mental health services.
 - Conclusion: The program is achieving this outcome
- Do children whose mothers participate in Home Visiting have increased breastfeeding rates?
 - Data Source: Visit records (Appendix I, Figure 2, Page 22)
 - Finding: Mothers who were enrolled in Welcome Baby! exclusively breastfed at 3 and 6 months at a substantially higher rate than the state rate for the last 3 years.
 - Conclusion: The program is achieving this outcome.

As the majority of the program-specific evaluation results indicate achievement of the desired outcomes, the commission will continue to fund the current Home Visiting programs.

Improved Child Development

School Readiness

A child's education begins very early. Since school-based educational systems do not begin until 3-5 years of age, First 5 promotes programs that help prepare children for school in the early years. School readiness programs include all Mono County public schools, childcare and preschool centers, special needs programs, and the Mono County Library System. The FY 2017-18 investment in school readiness was \$100,359 with funding support from First 5 SPCFA (\$98,614) and Mono County Probation, Health, & Social Services Departments (\$1,745). For all incoming kindergartners planning to attend a public school, First 5 Mono offers transition to school support including Kindergarten Round Up, Summer Bridge, and incoming kindergarten assessments (Conducted by Eastern Sierra and Mammoth Unified School Districts). Early literacy investments include: Raising A Reader and Story Time (conducted and partially funded by Mono County Libraries), Readers' Theatre and First Book (conducted and funded by First 5 Mono), and Footsteps2brilliance (operated and primarily funded by Mono County Office of Education with funding support from First 5 Mono and Mono County) .

The objectives and a brief description for the programs funded in this category are as follows:

Transition to School Programs

Kindergarten Round Up: informational meeting held at all public elementary schools in the County

Objectives:

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

Summer Bridge: two week kindergarten transition program held in the summer for incoming kindergartners

Objectives:

- Identify children's skill development needs before school begins
- Improve school readiness

Incoming Kindergarten Assessments: school readiness assessments conducted by teachers in the first month of school

Objectives:

- Assess students' school readiness
- Identify children's skill development needs

Early Literacy Programs

Raising A Reader: book bags distributed by libraries and early learning programs

Objectives:

- Increase literacy for young children
- Encourage use of the library system

- Increase parental and care-provider literacy activities

Readers' Theatre: a literacy program provided to licensed childcares

Objectives:

- Increase literacy for young children
- Increase care-provider literacy activities

Footsteps2brilliance: a literacy application

Objective:

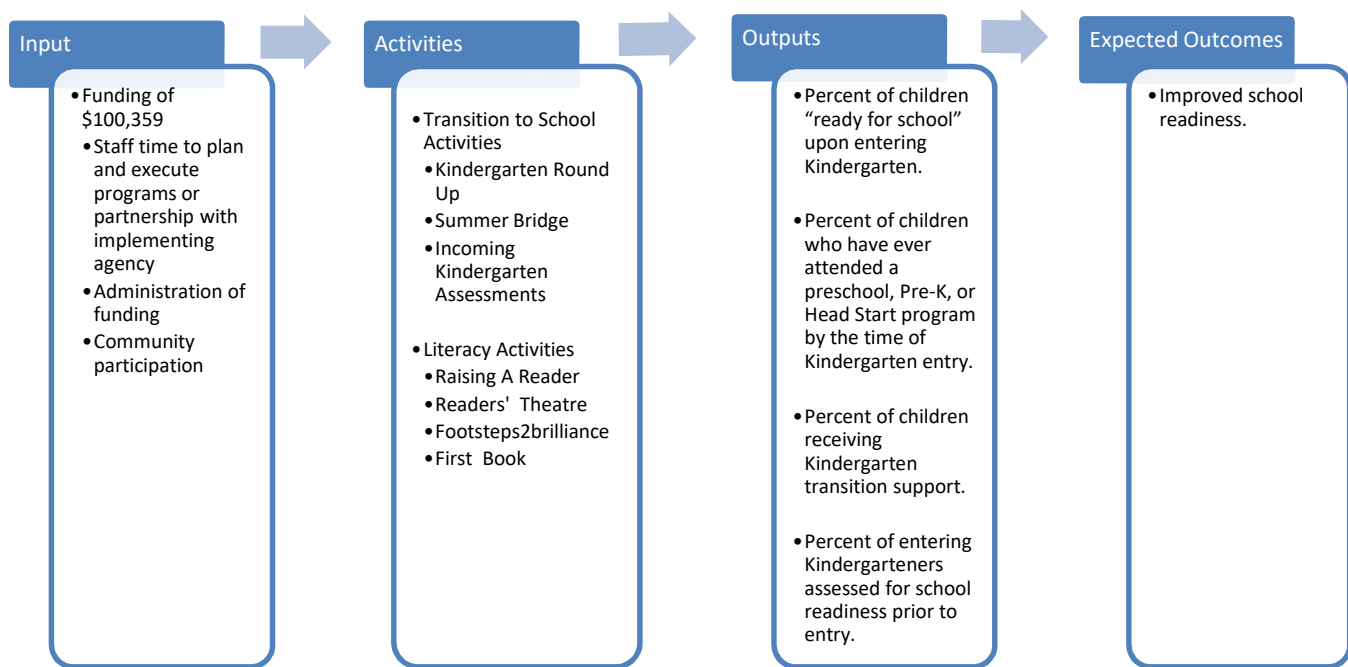
- Increase literacy for young children

First Book: free children's books

Objectives:

- Increase parental literacy activities
- Facilitate positive parent-child interaction

Logic Model



Evaluation, Findings, and Conclusions

- Is the percent of children "ready for school" upon entering Kindergarten increasing?
 - Data Source: Brigance assessments (Appendix II, Figure 2, Page 28)
 - Finding: Readiness decreased to 49% from 50% last year
 - Conclusion: While school readiness has been a major investment for the last 19 years, only recently was a standardized universal assessment used to determine how school-ready students are when they begin kindergarten. To hone in on the correlation between investments and school readiness, a survey for incoming kindergartener's parents was developed and administered. The Incoming Kindergarten Parent Survey (Appendix II, Figure 3, Page 28) demonstrates that although readiness is only achieved by 49% of the incoming kindergartners, children who were not school ready did not participate in any First 5 funded programs,

preschool, or special needs programs. Although the school readiness rate is low and improvement is a goal, without current investments in early learning our community school readiness rates would be much lower.

- Is the percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry increasing?
 - Data Source: Incoming Kindergarten Parent Survey (Appendix II, Figure 3, Page 28)
 - Finding: Inconclusive, 65%
 - Conclusion: In past years this data was drawn from the Summer Bridge Parent Survey, but that data only included a small percentage of the kindergarten cohort. To improve the data, in 2017 the Incoming Kindergarten Parent Survey was implemented which achieved a 100% screening rate. Since this was the first year of implementation, comparison data is not yet available. Next fiscal year a comparison of the rate of preschool attendance from 2017 to 2018 will be included in the Evaluation Report.
- Is the percent of children receiving kindergarten transition support increasing or remaining high?
 - Data Source: Participation in transition to school activities (Appendix II, Figure 1, Page 25)
 - Finding: No, down to 54% from 69% last year
 - Round Up Conclusion: There were decreases in Round Up participation across the county in 2017. The decrease in attendance may have had to do with not enough advertising and a multi-year impact of a poorly executed event in Mammoth Lakes in 2015. Changes were implemented in 2016 to improve the format of Round Up in Mammoth Lakes and feedback from parents, teachers, and support staff indicated the changes were successful; it just may take some time for word to get out.
 - To improve participation in years to come, funding partners will be sought to increase county-wide advertising. The event will be posted by Peapod Leaders and community partners across the county and kindergarten readiness backpack distribution will be limited to families who participate in a transition to school activity (Round Up or Summer Bridge).
 - Summer Bridge Conclusion: There was also continued low participation in the Summer Bridge programs in Lee Vining, Mammoth Lakes, and Edna Beaman (Benton).
 - To improve participation in years to come, First 5 Mono communicated with school staff at sites with continued low enrollment to support enrollment of more students. To encourage enrollment at Mammoth Elementary, a lead teacher position will be developed to contact families who applied and encourage enrollment. During the 2018-19 Strategic Planning process, the Commission will use evaluation data to decide if this program will continue to be funded.
- Is the percent of entering Kindergartners assessed for school readiness prior to entry increasing or remaining high?
 - Data Source: Kindergarten readiness assessments (Appendix II, Figure 1, page 27)
 - Findings: Yes, 100% of all kindergartners were assessed compared to 99% the previous year.
 - Conclusion: The new protocol to assess kindergartners at kindergarten entry (instead of prior to kindergarten) had a positive impact on the percentage of students assessed for the past two years

- The research question in the strategic plan needs to reflect the change in implementation to read kindergarten readiness assessments “at entry” instead of “prior to entry.”

As the majority of the program-specific evaluation results indicate achievement of the desired outcomes, the Commission will continue to fund the same School Readiness activities in 2018-19 that were funded in 2017-18.

Family Behavioral Health

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 weekly playgroup program was developed. Funding is primarily from Mono County Behavioral Health (\$40,000) with a small contribution from First 5 Mono (\$1,089) for a total investment of \$41,089. Playgroups and parent education are conducted by First 5 Mono.

The objectives and a brief description for the programs funded in this category are as follows:

Peapod Playgroups: For parents, caregivers, and children birth to 5 years old. Playgroups meet for 10-week sessions. Sessions were held in the following communities: Walker, Bridgeport, Mammoth Lakes, Crowley Lake, and Chalfant/Benton.

Objectives:

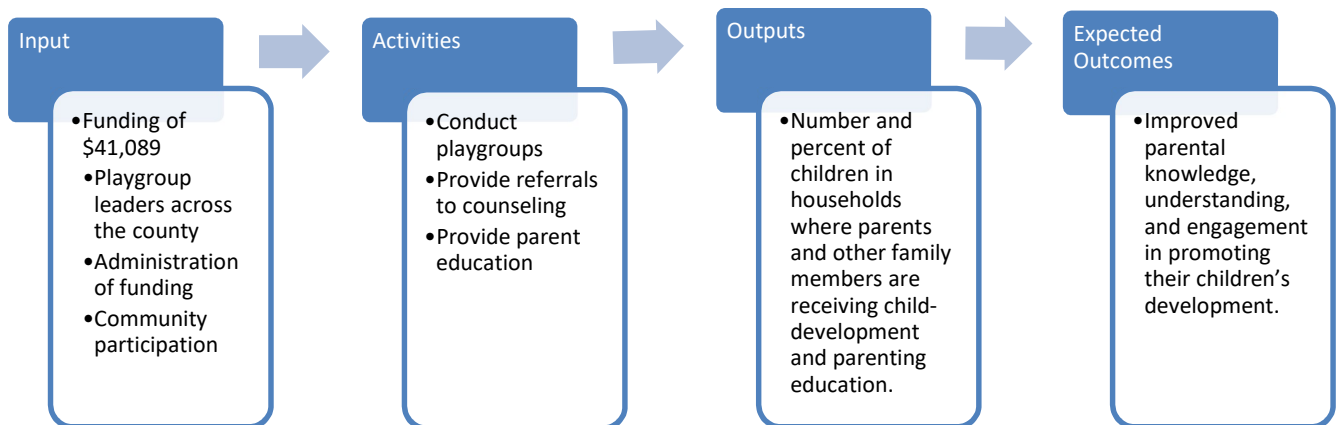
- Decrease isolation by providing parents and children an opportunity to socialize
- Destigmatize seeking behavioral health services
- Link families to community services
- Encourage school readiness and early literacy

Becoming an Emotion Coach: A class for parents, guardians, and childcare providers with children ages 0-5. Emotion Coaching is a parenting technique that research demonstrates is effective in helping children understand their feelings, and is based on the Parenting Counts Curriculum (a product of Talaris Institute™).

Objectives:

- Use a research-based technique to teach caregivers how to help children understand their feelings

Logic Model



Evaluation, Findings, and Conclusions

- Is the percent of children in households where parents and other family members are receiving child-development and parenting education high or increasing?
 - Data Source: Number of children participating in playgroups (Appendix IV, Figure 1, Page 32)
 - Finding: Down to 27% from 29% of children birth to 5 in the County last year
 - Conclusion: Due to participation in Peapod, children lived in households receiving child-development and parenting education. Although there was a slight decrease in the percent of children who participated this year, the program is still achieving its intended outcome.

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

Childcare Quality

First 5 Mono includes Childcare Quality in the strategic plan as many children spend a significant amount of their early years with their childcare provider. Educating child care providers on how to best meet the needs of children helps ensure children will spend their formative years in optimal learning environments. Financial support from First 5 California facilitates the provision of programs that help create and maintain high-quality child care.

The Childcare Quality investment for FY 2017-18 was \$438,355 which came from the following funding streams: Improve and Maximize Programs so All Children Thrive (IMPACT), conducted by First 5 Mono for Mono and Alpine Counties funded by First 5 Mono (\$6,648) & First 5 California (\$70,767); Region 6 Training and Technical Assistance Hub, First 5 Mono was the fiscal lead for Alpine, Inyo, and Mono Counties with funding from First 5 California (\$109,676); as the Regional Hub fiscal lead, First 5 Mono also qualified for and received California Department of Education (CDE)

Certification and Certification & Coordination Grants (\$8,934); also for the region from the CDE First 5 Mono received and administered the Infant/Toddler Quality Rating and Improvement System (I/T QRIS) Block Grant (\$6,587); and childcare services were provided by Eastern Sierra Unified School District funded by the Community Development Block Grant (CDBG) through Mono County (\$235,744).

The objectives and a brief description for the programs funded in this category are as follows:

IMPACT: Training, coaching, rating, stipends, and support for childcare providers for the provision of high-quality care for children and their families.

Objectives:

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

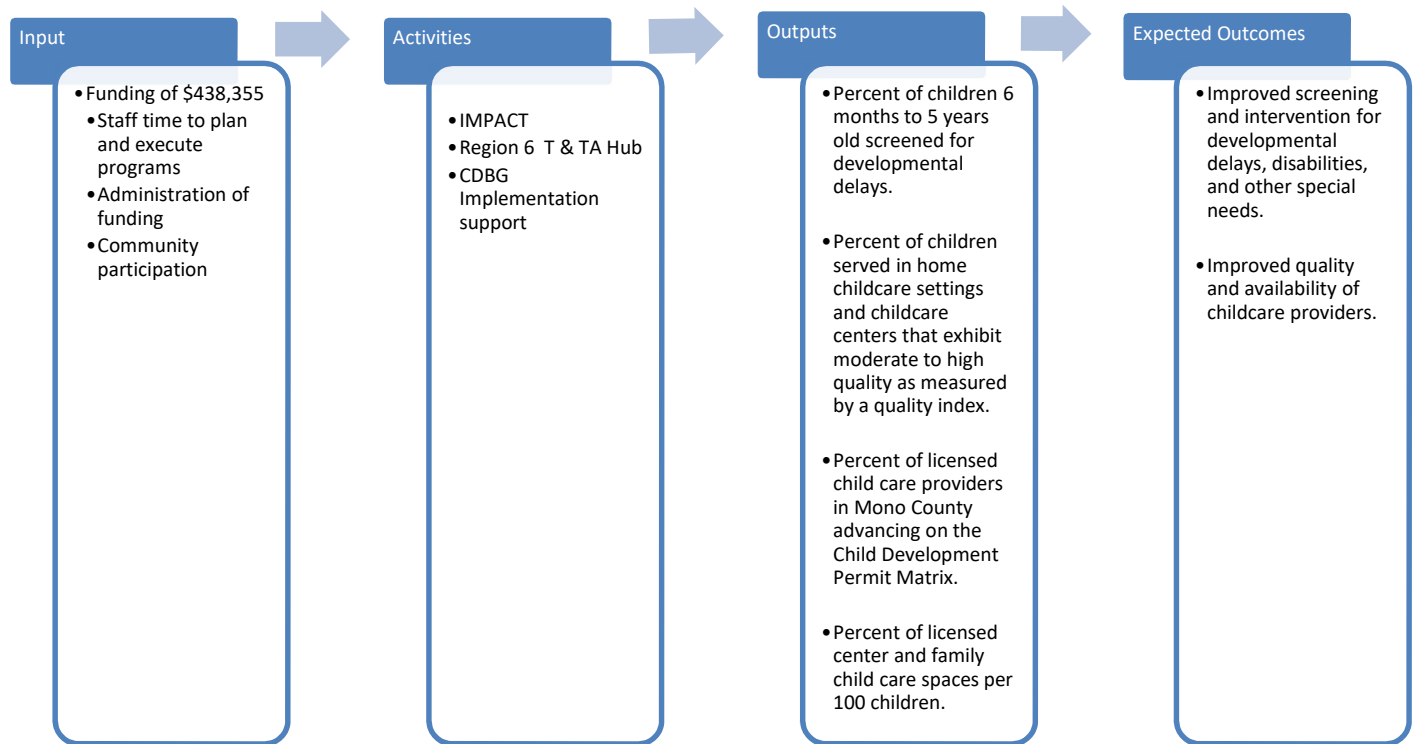
Training and Technical Assistance Hub: Support regional efficiencies in Childcare Quality work

Objectives:

- Provide assessors for Spanish speaking sites
- Contract with Viva for coordination for the Hub
- Contract with i-Pinwheel database to track sites' participation
- Contract with American Institute of Research for the Early Learning Needs Assessment Tool (ELNAT) database to analyze child data to determine needs

CDBG Childcare: Provide high-quality care to preschool age children in Bridgeport and Benton.

Logic Model



Evaluation, Findings, and Conclusions

- Is the percent of children 6 months to 5 years old screened for developmental delays increasing?
 - Data Source: Completed ASQs (Appendix V, Figure 1, Page 36)
 - Finding: Yes, 60% of children enrolled at participating sites were screened for a developmental delay, up from 41% the previous year.
 - Conclusion: More children are being screened for developmental delays through their child care provider.
- Is the percent of children served in home childcare settings and childcare centers that exhibit moderate to high quality as measured by a quality index increasing? (Appendix V, Table 1-6, Page 36-37)
 - Data Sources: Site ratings and Childcare Quality System participation data
 - Finding: Yes, 72 children in Mono County attended a site with a high quality rating, 44% of children enrolled in programs participating in the Childcare Quality System and 10% of all children in the county up from 62 last year (26% of children enrolled in sites participating in the CQS and 8% of all children in the county).
 - Conclusion: More sites were rated as having high quality this year, 5 classrooms were rated as 4—exceeding quality; and 3 sites were rated at 3—achieving quality. Due to more sites being rated as high quality, a higher percentage of children were served in sites with high quality as measured by a quality index.
 - As site ratings continue to be offered, in years to come more children will have the opportunity to be served by sites rated as high quality.
- Is the percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix high or increasing?

- Data Source: The number of child development permits issued to providers
- Finding: 2, up from 2015-16 data of 0
- Conclusion: With support from the County Office of Education, two preschool teachers received their child development permits for the first time.
- Is the percent of licensed center and family child care spaces per 100 children high or increasing?
 - Data Source: Child Care Portfolio (Appendix XI, Page 46; Appendix VI, Figure 3, Page 38)
 - Findings: In 2016, 24% of children 0-12 with parents in the workforce had a licensed childcare slot available, an increase from 17% in 2014.
 - Conclusion: Although the number of slots available to children in Mono County decreased dramatically from 56% in 2008, there was an increase from 2014 to 2016 of slots for children with parents in the workforce. First 5 partnered with Mono County, Eastern Sierra Unified School District, and the Mono County Office of Education to open two new preschools—one in Bridgeport and one in Benton which helped with the increase, but due to closures of family childcares there was still a net loss of slots in the county. The percent increase is due primarily to decreases in the 0-5 county population (data from the Childcare Portfolio, Appendix XI, Page 44) which is likely related to the lack of available child care. First 5 Mono continues to actively participate in the Mono County Child Care Council and collaborate with the Mono County Office of Education to support initiatives to increase the number of child care slots in Mono County.

As the child care quality initiative is making significant strides in rating sites, screening children for developmental delays, and impacting the number of available slots in the county, the Commission will continue to invest in this initiative. As part of the continuous quality improvement of the Childcare Quality investment, coaching and assessing capacity will be developed in FY 2018-19 so site directors and family child care operators will have access to support around site-specific needs. Increases in capacity will also address the ability to rate sites locally rather than contracting for services.

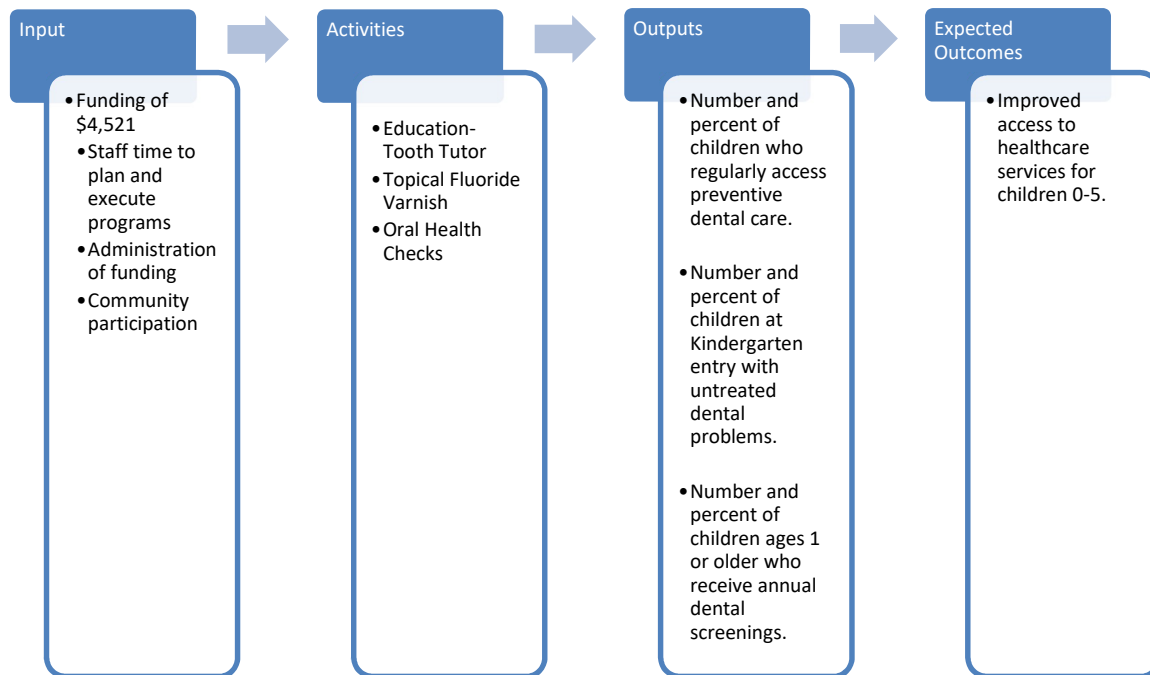
Child Health

Oral Health

The 2009 First 5 Mono Strategic Plan identified a significant community need in the area of oral health. Pediatricians saw visible tooth decay and an opportunity to provide topical fluoride varnish and oral health education through paraprofessionals was developed. Pediatricians in the county continue to report significant needs for sustained efforts in oral health due to high numbers of children with poor oral health. The Oral Health Program consists of education, oral health checks, and topical fluoride varnish application for children in childcare settings across the County. The program was funded and operated by First 5 Mono at a cost of \$4,521 for FY 2017-18. The program provides free toothbrushes, toothpaste, and floss to families to help maintain oral health.

Objective: Provide application of topical fluoride varnish twice a year to all Mono County children age 1-5 not already receiving services from a dentist, and educate children and parents about oral health.

Logic Model



Evaluation, Findings, and Conclusions

- Is the percent of children who regularly access preventive dental care high or increasing?
 - Data Source: Sierra Park Dental Data, 2014-15 (Appendix IX, Indicator 1, Page 44)
 - Finding: current data not available at time of report submission, 20% the previous year.
 - Conclusion: While the data was not available for this report, First5 is working with Mammoth Hospital to create easily reproducible reports to use in future years. With continued support from Mammoth Hospital, we will be better able to track access to oral health care over time.

- Is the percent of children ages 1 or older who receive annual dental screenings high or increasing?
 - Data Source: Sierra Park Dental Data, 2014-18 (Appendix IX, Indicator 2, Page 44)
 - Finding: 95% of patients age 0-5 years old had an annual exam at Mammoth Hospital—61% of the 0-5 population, a marked increase from 17% the previous two years
 - Conclusion: First 5 will continue to work through our oral health education efforts to support higher percentages of children having at least one visit to the dentist a year.
- Is there a low percent of children at Kindergarten entry with untreated dental problems?
 - Data Source: Kindergarten Oral Health Checks (Appendix IX, Page 42, Indicator 3)
 - Finding: 30% of the oral health checks turned in at kindergarten enrollment indicated the child had untreated caries (cavities), up from 18% last year.
 - Conclusion: The percent of untreated caries at kindergarten entry increased. First 5 worked with the Mono County Office of Education to ensure school district compliance with reporting requirements. Due to this collaboration, the reporting rate increased to 39% from 35%

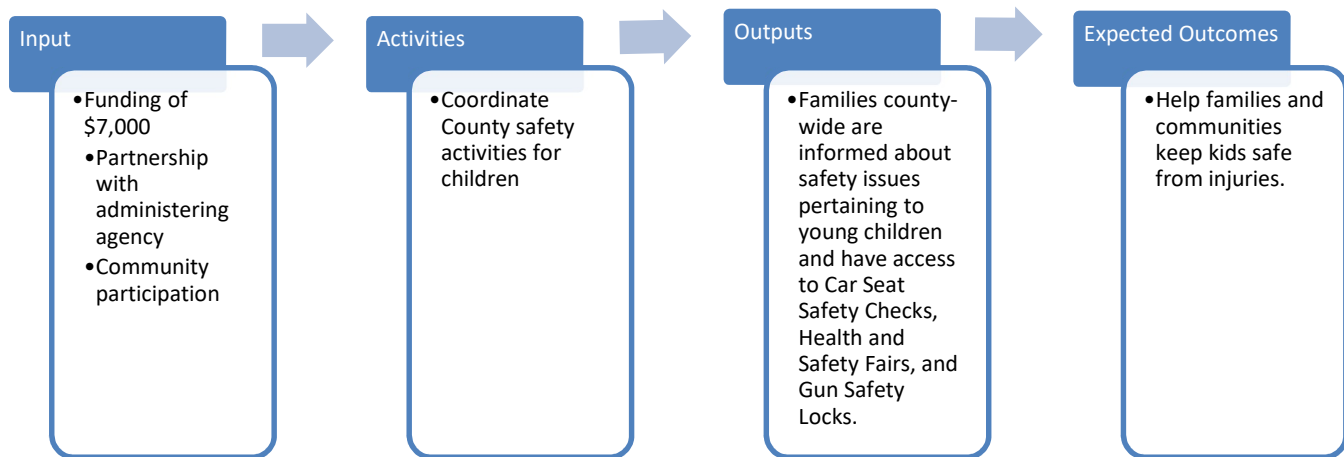
The oral health needs of young children in Mono County continue to be high with few children accessing regular preventative care and annual screenings. The Commission will continue to invest in this initiative to improve oral health for children 0-5. As part of the continuous quality improvement of the oral health investment, we will target education for parents to get annual dental checkups and preventative care for their children. Additionally, we will continue to provide topical fluoride varnish and oral health checks for children between one and 5-years-old.

Child Safety

Prior to the formation of *Safe Kids California, Mono Partners*, no one in the County specifically focused on child safety. While some agencies conducted safety activities, services were not coordinated. Initially spearheaded by Mammoth Hospital, multiple community agencies met to pursue the formation of a Safe Kids Coalition. Based on higher than average injury data for Mono & Inyo Counties, and after learning the benefits of such collaborations, the Commission decided to fund the coordination of *Safe Kids California, Mono Partners* as no other participating agencies had the necessary funding to conduct coordinating activities. With combined funding from SPCFA (\$7,000) and the Mono County Office of Education, the Mono County Office of Education coordinates Safe Kids California, Mono Partners.

Objective: Bring safety services & resources to families

Logic Model



Evaluation, Findings, and Conclusions

- 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?
 - Data Source: Health and Safety Fair Participants (Appendix VIII, Page 40)
 - Finding: 27% of the 0-5 population and a parent accessed resources, an increase from 24% last year
 - Conclusion: As a result of Health and Safety Fairs, families across the county were informed of safety issues and had increased access to safety materials.

Families have more information about child safety as a result of the Safe Kids investment, thus the Commission will continue to invest in this initiative. As part of the continuous quality improvement of the Safe Kids California, Mono Partners work, outreach efforts will continue to ensure as many families as possible participate in Health & Safety Fairs. The Safe Kids Coordinator is working to leverage resources for safety materials and apply for grants to provide safety resources to families in our Mono County.

Appendix I Home Visiting

Table 1: Referral Source

Referral Source	Number	Percent
Mammoth Hospital Labor & Delivery	25	36%
First 5 Home Visitors	10	14%
Childbirth Education Class	8	12%
Self	5	7%
Mono County Child Protection Services	4	6%
Mono County Public Health	3	4%
Childcare Quality System/Preschool	3	4%
Early Start	3	4%
Community Event	3	4%
Mammoth Hospital Women's Clinic	1	9%
Mammoth Hospital ER	1	
Northern Inyo Hospital	1	
Other, Family/Friends	1	
Out-of-state Hospital	1	
Peapod	1	
2017-18 Total Referrals	70	
2016-17 Total Referrals	69	

Appendix I Home Visiting

Table 2: Visits Provided

Visit Type	FY 2015-16	FY 2016-17	FY 2017-18
Prenatal Home Visits	16	25	16
Birth-5 Home Visits	708	627	543
Total Visits	724	652	607

Table 3: Families Served

	FY 2015-16	FY 2016-17	FY 2017-18
New Babies Enrolled in WB!	83	69	58
Births to Mono County Residents*	152	132	134
Percent of Babies born to Mono County Residents Enrolled	55%	52%	43%
Families Receiving Only WB! Visits	85	84	67
Families Receiving Only Parenting Partners Visits	14	7	40
Families Receiving Both WB! & Parenting Partners Visits	41	50	18
Total Families Served	140	141	125

*Source: California Department of Finance January 2018, estimates for 2015 & 2016, projected for 2017
FY calculations use the calendar year projections of the year the FY begins (e.g.: 2014 for FY 2014-15)

Table 4: Child's Race & Ethnicity, N=148

Non-Hispanic	84	American Indian	2
		White	75
		Multi-race	7
Hispanic	64	Multi-race	56
		White	8

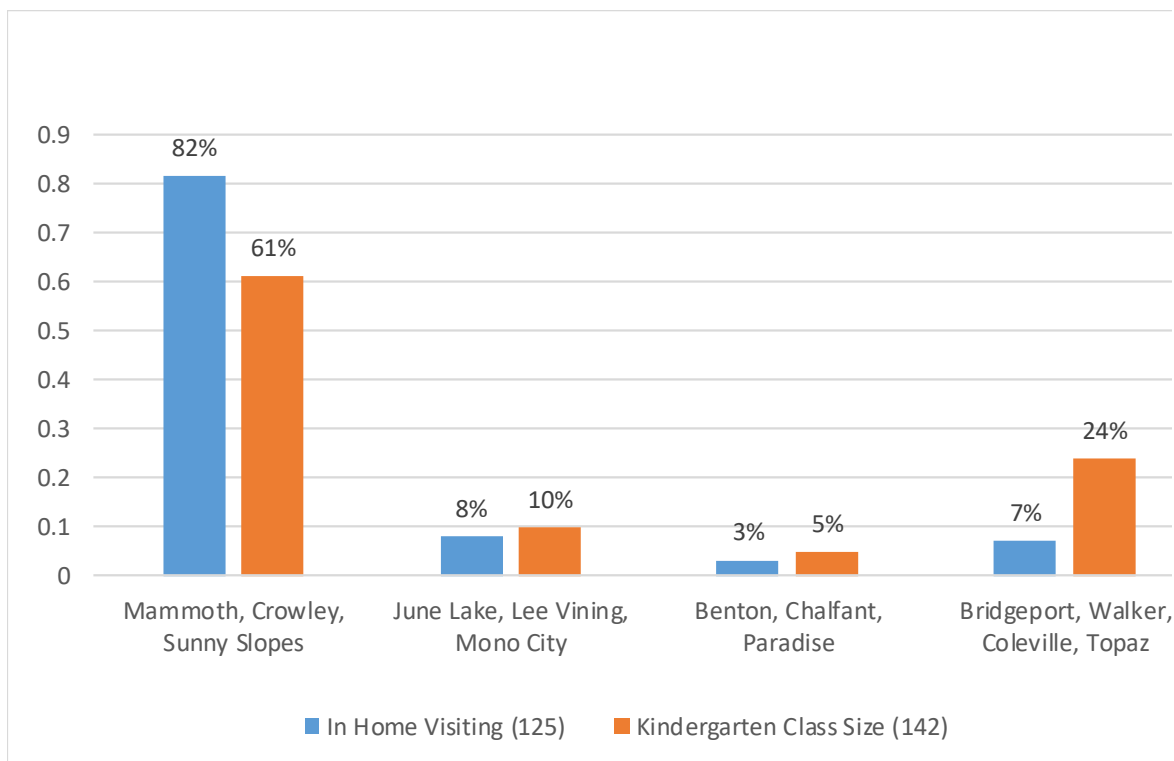
Appendix I Home Visiting

Table 5: High Needs

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

Families with High Needs	47, 37%
Low income	67
Low Education	27
Child with a Disability	17
Teen Parent	8

Figure 1: Home Visiting Families' Town of Residence compared to the Kindergarten Cohort



Appendix I Home Visiting

Table 6: Resource Referrals

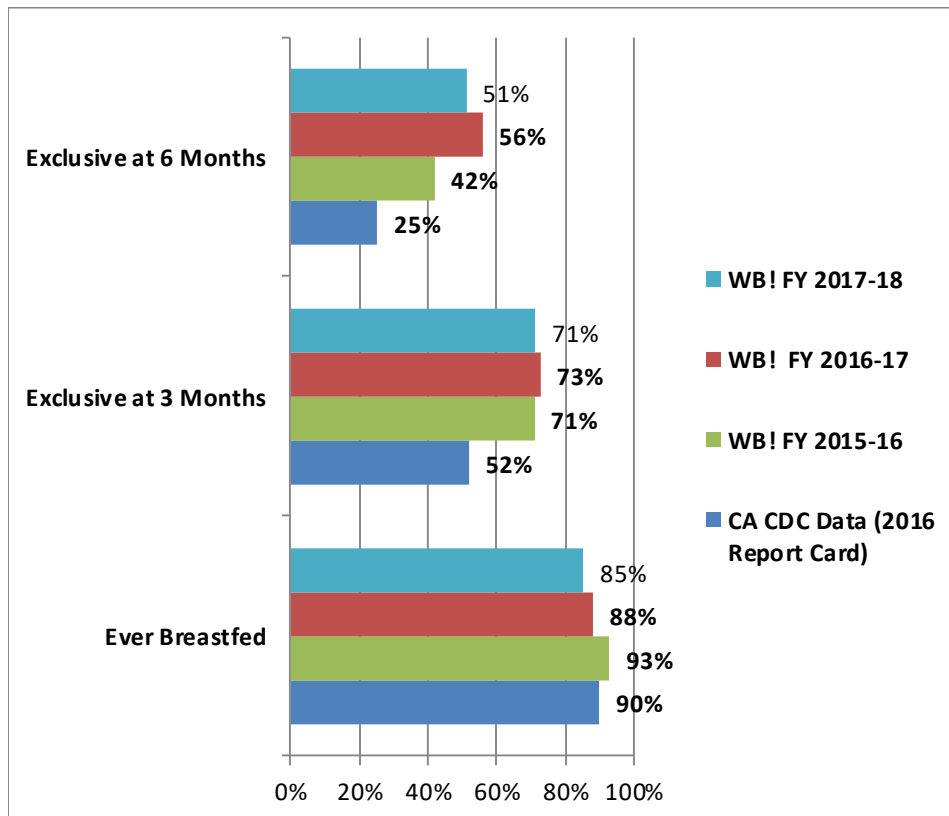
	FY 2015-16		FY 2016-17		FY 2017-18	
Community Resource	Referred	Accessed	Referred	Accessed	Referred	Accessed
Adult Education	9	4	8	1	17	2
Dental Services	6	2	1	0	2	1
Early Intervention	14	8	9	6	10	5
Early Education Setting & General Childcare/Preschool Information	14	7	8	3	21	9
Financial Resources	6	2	4	2	13	1
Food Resources (WIC, IMACA, DSS)	14	3	0	0	6	2
General Parenting or Social Support, Community Participation/Recreation	41	17	41	11	102	33
Health Insurance	1	1	-	-	-	-
Language/Literacy Activities	15	6	6	1	19	4
Medical Services	13	10	7	2	10	5
Mental Health Services	19	7	9	5	9	4
Subsidy for Child Care/Preschool	4	1	1	0	2	0
Domestic Violence Services	1	1	1	1	3	3
Other (injury prevention, crisis intervention, employment and legal resources)	7	3	2	0	13	2
Total	150	72	97	32	227	71
% Referrals Accessed	48%		33%		31%	

Appendix I Home Visiting

Table 7: Ages and Stages Questionnaire Developmental Screening

	Number of children	Percent of children
Screenings Completed	80	54% in Home Visiting
With one or more identified concern(s)	22	27% who were screened
Who received Early Intervention Services as a result of a screening	6	8% who were screened

Figure 2: Breastfeeding Rates for Moms Enrolled in First 5 Mono Home Visiting Compared to California 2015-16 to 2017-18



Appendix I Home Visiting

Figure 3: Reasons Moms Enrolled in Home Visiting Stopped Breastfeeding 2015-16 to 2017-18

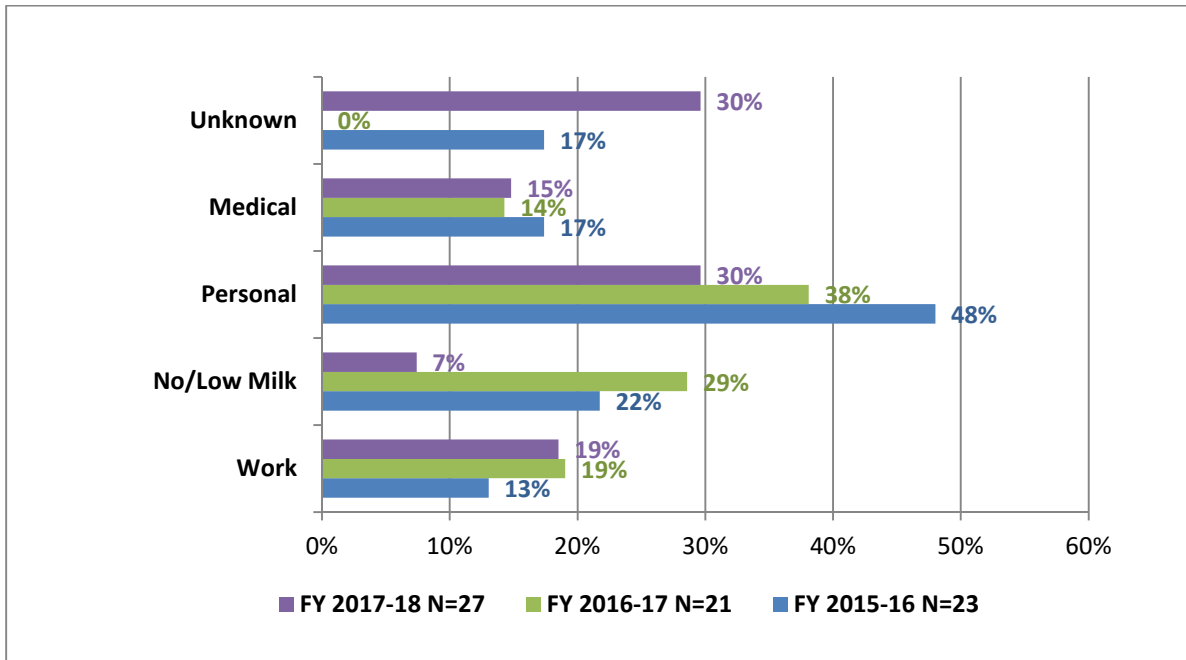
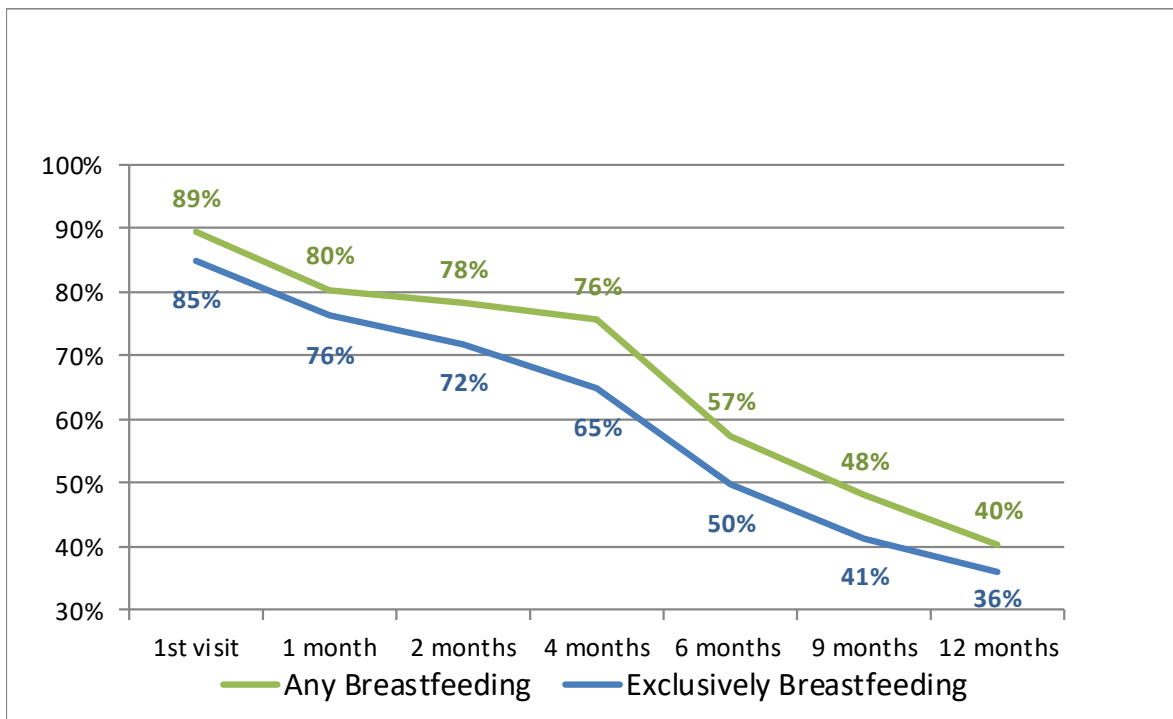


Figure 4: Average Breastfeeding Rates for Moms Enrolled in Home Visiting 2015-16 to 2017-18



Appendix I Home Visiting

Table 8: Welcome Baby! Exit Survey

N=26	Strongly Agree
I feel comfortable talking with my parent educator.	100%
I would recommend this program to a friend	100%
My parent educator gives me handouts that help me continue learning about parenting and child development.	93%
My parent educator is genuinely interested in me and my child.	93%
My parent educator encourages me to read books to my child.	93%
This program increases my understanding of my child's development.	87%
My parent educator helps me find useful resources in my community.	80%
Activities in the visits strengthen my relationship with my child.	73%
I feel less stressed because of this program.	73%

Welcome Baby! Exit Comments

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

- Lara is very motivating and helpful. If I have any questions she makes me feel comfortable and normal.
- Lara Walker was amazing! She's intelligent, kind, and patient. I loved how she directed many of the discussions toward my older children so that they felt involved in the process and learned about their little brother's development.
- Just having a 'mom' type support system, without having family nearby. Someone who listens and helps problem solve, without any judgment. Lactation consultant services saved me when I was close to giving up! (Thought the 2nd was supposed to be easier!)
- It was wonderful to have Debbie come over and give suggestions on breastfeeding, bottle feeding, sleeping, and having support as a new mom.
- Paperwork was helpful to know what to expect at certain ages.
- Having someone to talk to when you are home alone with a new baby, it can feel isolating.
- All the information and help with my first time breastfeeding journey. All the information they give me in general.
- Learning about brain development and developmental milestones.
- Debbie was so knowledgeable. We are first time parents, and she gave us resources and tools to become more confident.
- Everything seemed very useful because you can solve many questions that you have about the growth and development of children. This program is very good. (translated)
- It helped the children to concentrate in a task. They put more attention to what they are reading. (translated)

Appendix I Home Visiting

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

- It could extend the age to two.
- More hands on activities, less handouts.
- I absolutely loved this program. I personally wouldn't change a thing.
- I find the program perfect!
- For us, the program was great.
- Nothing
- For me it was very good. I have no comment to improve it because everything was good for me. (translated)

Additional Comments:

- Lara is an amazing asset to me, my family, and our community. Thank you for all First 5 does and for putting Lara in our lives.
- Love Debbie! Thank you!
- Debbie was incredibly helpful and lovely to work with. She was diligent and flexible with appointments and would always text to set up appointments. I loved knowing if I had any questions, I could call or text her.
- Lara is wonderful. She does a great job and really cares about our kids. I felt very alone as a new mom. I always would have liked a breast feeding support group or a new-mom support group/play group. Thank you for all you do.
- Thanks for everything!
- Thank you Lara. Much love from my family to you and yours. You've been super helpful to us and me.
- Amazing help for new moms and even I think not only first time moms, but specifically first time moms need this so so much. Lara Walker so amazing person, we love her so so much!
- Thank you so much, we truly appreciate this service. We will definitely recommend it to anyone we know who is having a baby in this area.
- Without Deb, I would have given up breastfeeding after the first week. She instilled confidence in me and provided useful tips. I would like to have more visits but my job does not allow me. Thanks to Lara for playing with my children and making them laugh. (translated)

Table 9: Parenting Partners Exit Survey

N=3 scale of 1 (strongly disagree) to 5 (strongly agree)	Before Program Average	After Program Average
I know how to meet my child's social and emotional needs.	4.7	5.0
I understand my child's development and how it influences my parenting responses.	4.0	4.7
I regularly support my child's development through play, reading, and shared time together.	4.3	4.7
I establish routines and set reasonable limits and rules for my child.	4.0	5.0
I use positive discipline with my child.	3.7	4.7
I make my home safe for my child.	4.3	5.0
I am able to set and achieve goals.	4.3	5.0
I am able to deal with the stresses of parenting and life in general.	3.7	4.3
I feel supported as a parent.	4.3	5.0

Appendix I Home Visiting

Table 10: Parenting Partners Exit Survey, Program Satisfaction

N=3	Average
This program motivates me to try new parenting strategies	5.0
My parent educator and I partner to set goals for my child, myself, and my family.	5.0
This program increases my understanding of my child's development.	5.0
I feel less stressed because of this program.	5.0
I would recommend this program to a friend.	5.0

Parenting Partners Exit Survey Comments

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

- Being supported as a parent.
- Having someone to talk to and help let me know I am doing everything right.

What could be improved about this program?

- More visits.
 - Can't think of anything.
-
- Very happy with Annaliesa, she is warm, knowledgeable, and sincere. [Children's names] were very comfortable and happy with her. I always felt relief when she came.
 - Molly is awesome and Debbie was great too.

Appendix II Transition to School Kindergartners who Started School in August of 2017

Figure 1: Participation in Transition to School Activities

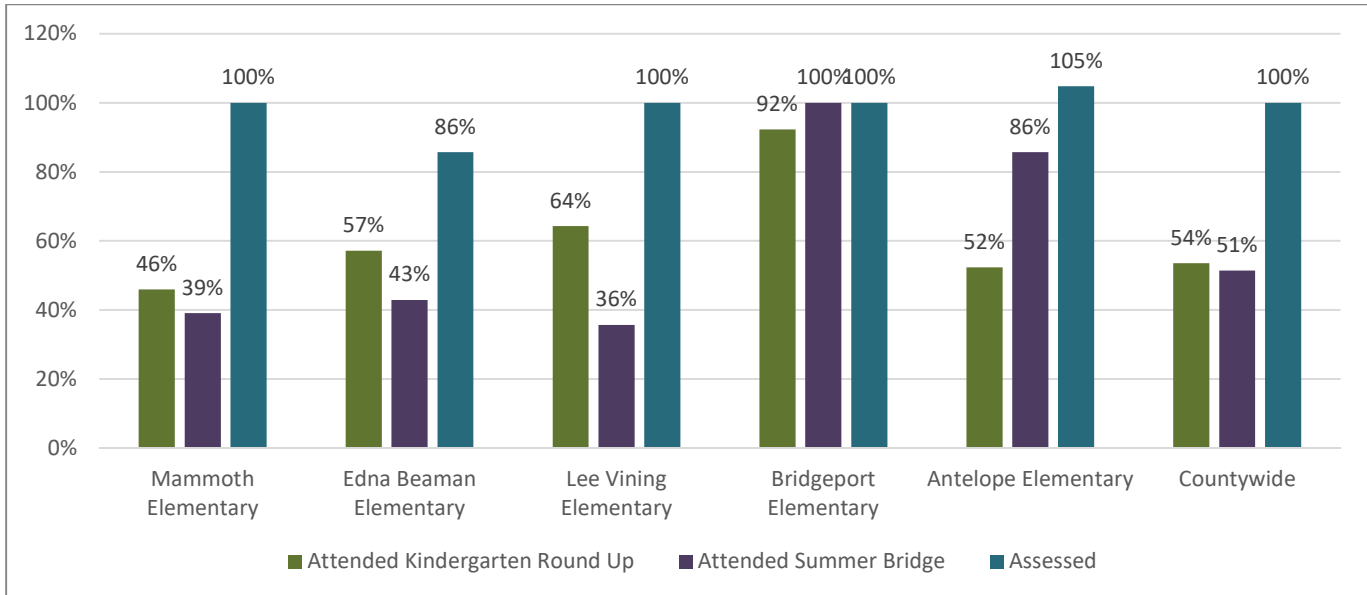


Table 1: Kindergarten Round Up Attendance Detail

Kindergarten Round Up			% of Kindergarteners who received a backpack at Round Up		
Elementary School	Attendance	Backpacks Distributed	2015 N=119	2016 N=113	2017 N=142
Mammoth	187	40	80%	53%	46%
Edna Beaman	16	4	100%	167%	57%
Lee Vining	25	9	73%	85%	64%
Bridgeport	35	12	71%	167%	92%
Antelope	21	11	53%	86%	52%
Total	284	76	79%	67%	54%

Appendix II Transition to School Kindergartners who Started School in August of 2017

Figure 2: Kindergartners Assessed as School Ready by District 2015-2017

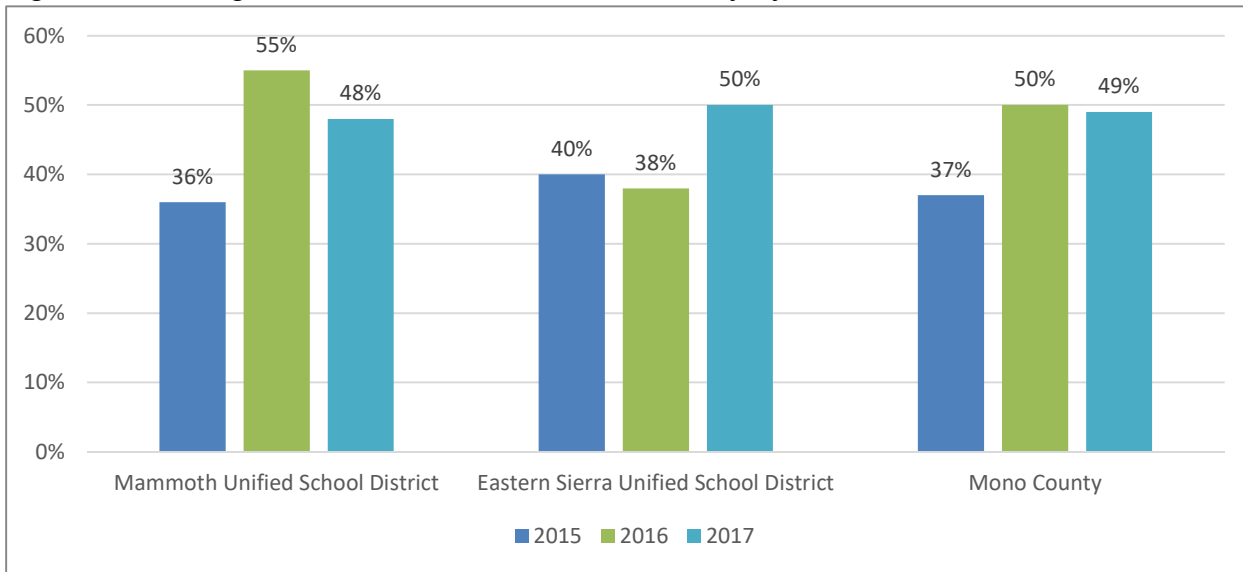


Figure 3: Percent of Kindergartners Assessed as School Ready by Program 2017

Percent of Kindergartners Assessed as School Ready N=135, 100% of the cohort		49%
Percent of children assessed as School Ready with complete Brigance and Survey data who participated in the following: N=87, 64% of the class*		
Licensed Care, except State Preschool		65%
Story Time		59%
Peapod		55%
Round Up or Summer Bridge		53%
Raising A Reader		52%
Home Visiting		43%
State Preschool		41%
Early Intervention		33%
Did not Participate in the above programs		0%

Appendix II Transition to School

Kindergartners who Started School in August of 2017

Table 2: Summer Bridge Parent Survey

In which ways do you feel Summer Bridge helped prepare your child for Kindergarten?	
Classroom Skill	Percent of Parents, N=50 (69% reporting)
Getting used to the classroom	88%
Meeting the teachers	73%
Development of social skills	70%
Adjusting to a group learning environment	68%
Increased self-confidence	55%
Learning how to follow directions	53%
Increased attention span	35%

Summer Bridge Parent Survey

Does your child feel less anxious about starting school?

- He got to do everything before it got too busy and crowded.
- She's excited and loves it now.
- Yes, because he met other kids his age.
- Getting used to routine.
- Familiarizing to the new doing so in a smaller group. Less intimidating than the first official day of school.
- Because he knows everyone well. (translated)
- Meeting the teacher and seeing the classroom.
- She usually needs to get used to new environments and people.
- Because he can get used to being in class, and follow directions.
- It just made her more excited to start. Since she didn't go to preschool it has helped her to be [ready].
- He was very excited to become a 'big kid' and be with a new teacher.
- He says he likes his teacher and is excited about going to school.
- He was very shy, but now it is a little less, although he keeps crying for a while. (translated)
- Meeting the teachers and spending time in the classroom.
- She is more comfortable with the learning space and familiar with drop-off procedure.
- I think it was about removing the 'unknown' and
- Because he needs to get his new routine. He is very shy. I feel like this was an introduction to school not being scary for him.
- My child asked how will the teachers treat me, good or bad? And now he tells me, "Mommy, the teachers are very good. I want to go to school every day." (translated)
-

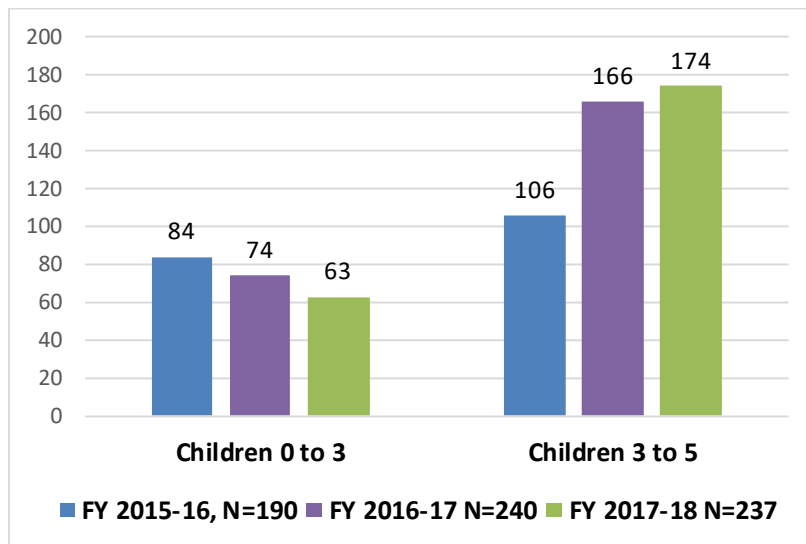
Summer Bridge Teacher Survey

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

- How to act at school (line up, sit on the rug, listen to a story, take turns, be kind)
- That school and teachers are fun, not scary
- Allowed kiddos to get to know each other and me (the teacher) on a very low key, laid-back way. Students had fun and were eager to start Kindergarten.
- My rules and expectations, zoophonics, meeting me, and school rules and layout.
- They have an idea of how school will be run and where things are in school.

Appendix III Early Literacy

Figure 1: Raising A Reader, Participation by Age 2015-16 to 2017-18



Raising A Reader Parent Survey

What did you enjoy about the RAR Program?

- I spend more time with my children, they enjoy reading, and I like to see the enthusiasm in their face when we read at home. (translated)
- We love getting our book bags and really enjoy the diverse selection provided. Ms Kacee is the best!
- I love the bilingual books. They're great for teaching Spanish. My daughter enjoyed Miss Kacee coming to read to her as well!
- I get to read every night with my kids. I like that I don't need to go to the library as much.
- Availability of books. (translated)
- Rotation of books, keeps children excited.
- I like the excitement of my son when he sees new books every week. (translated)
- Variety, selection, bilingual, cultural, and historical.
- I am able to spend more quality time with my son while he learns.
- Reading books we may not normally check out.

Appendix III Early Literacy

Table 1: Readers' Theater Participation by Location

Readers' Theater Location	FY 2015-16	FY 2016-17	FY 2017-18
Family Child Care Providers	-	4	-
Bridgeport Preschool	-	-	8
Coleville State Preschool	15	12	9
Coleville Marine Base Childcare	15	13	18
Lee Vining Head Start Preschool	12	15	7
Lutheran Preschool	11	-	9
Kids Corner	10	15	15
Mammoth Head Start Preschool	20	21	18
MCOE Preschool	-	-	9
Total	83	80	93

Table 2: First Book Distribution

Program	Number of Books
Home Visiting & Peapod	400
Health & Safety Fairs	152
Childcare Providers	115
Dept. of Social Services	56
Early Start	20
Toiyabe Indian Health	20
Total	763 (833 in FY 16-17)

Table 3: Footsteps2Brilliance Participation

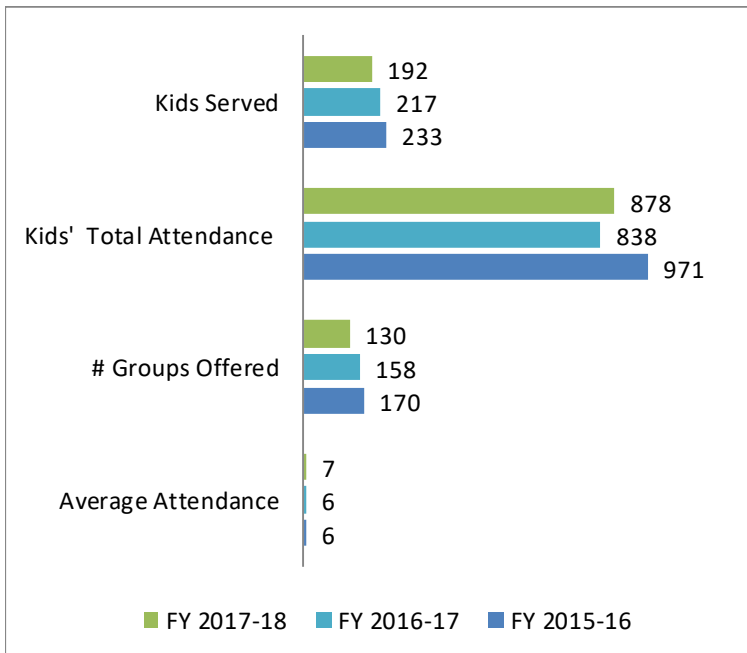
Number Participating	Percent of County Birth-5 Population
505	70%

Appendix IV Peapod Playgroups

Table 1: Families Served by Location 2015-16 to 2017-18

Playgroup Location	FY 15-16	FY 16-17	FY 17-18
Benton/Chalfant	3	3	2
Bridgeport	13	15	12
Crowley Lake	41	32	45
Lee Vining	2	2	0
Mammoth English	46	74	55
Mammoth Spanish	15	0	4
Walker	24	12	4
Total	144	138	122

Figure 1: Participation 2015-16 to 2017-18



Appendix IV Peapod Playgroups

Figure 2: Counseling Referrals 2015-16 to 2017-18

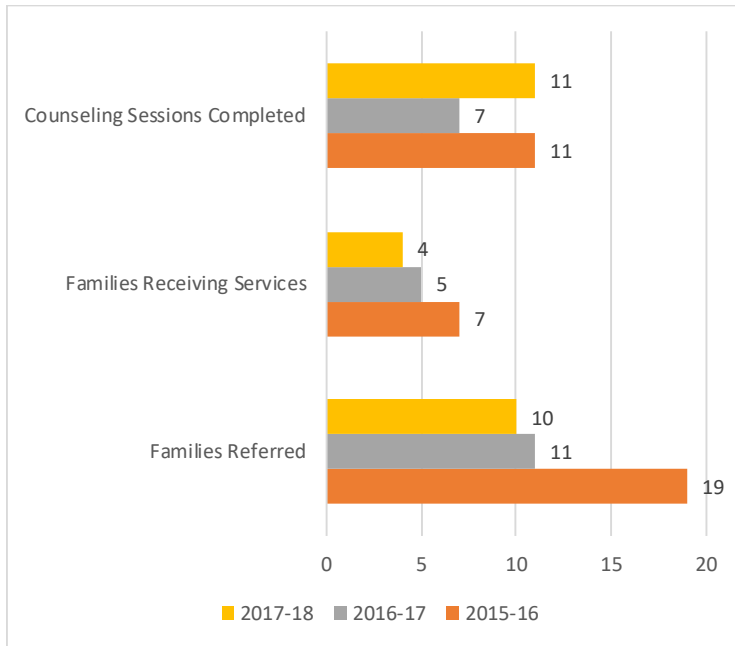
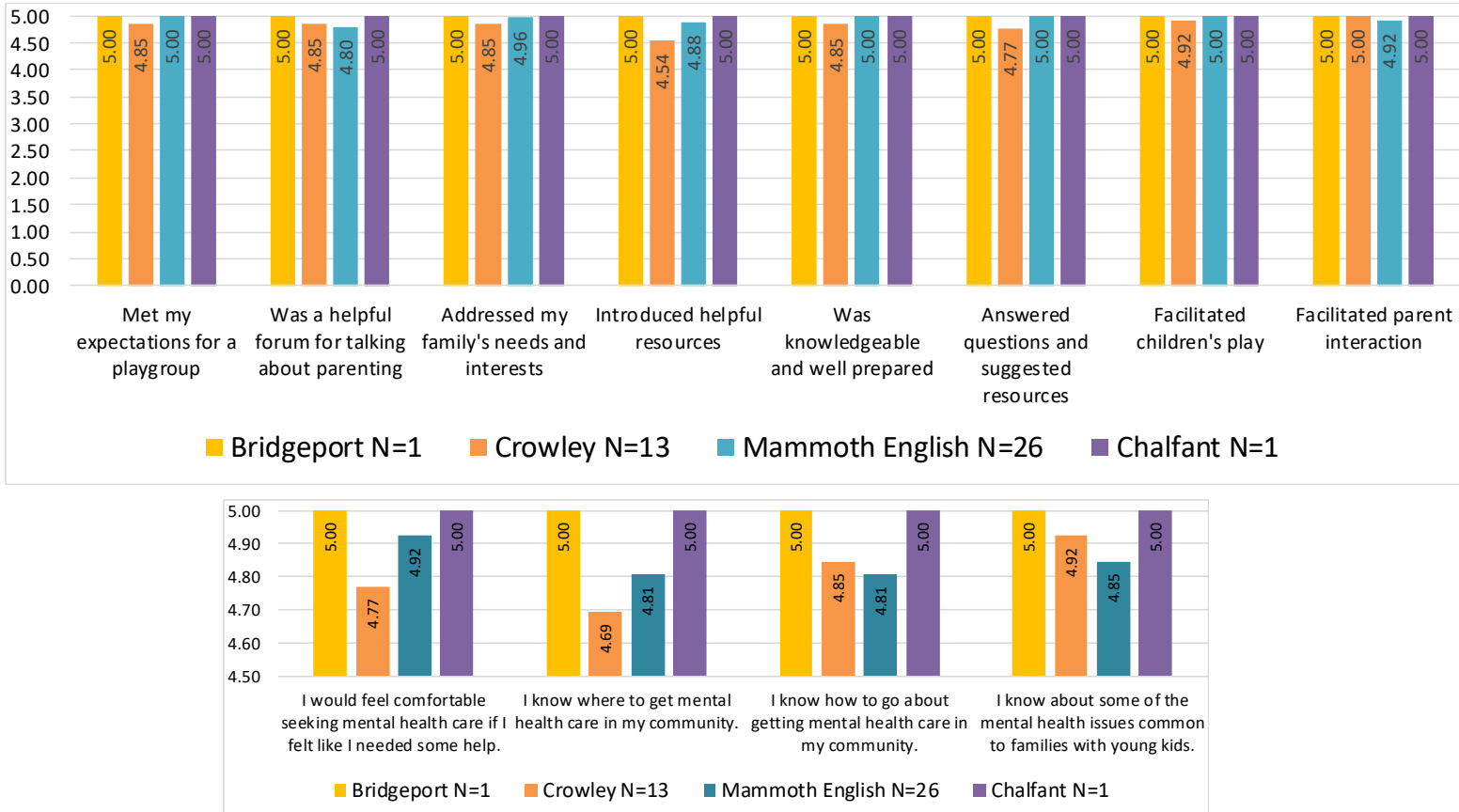


Figure 3: Participant Survey Results by Community

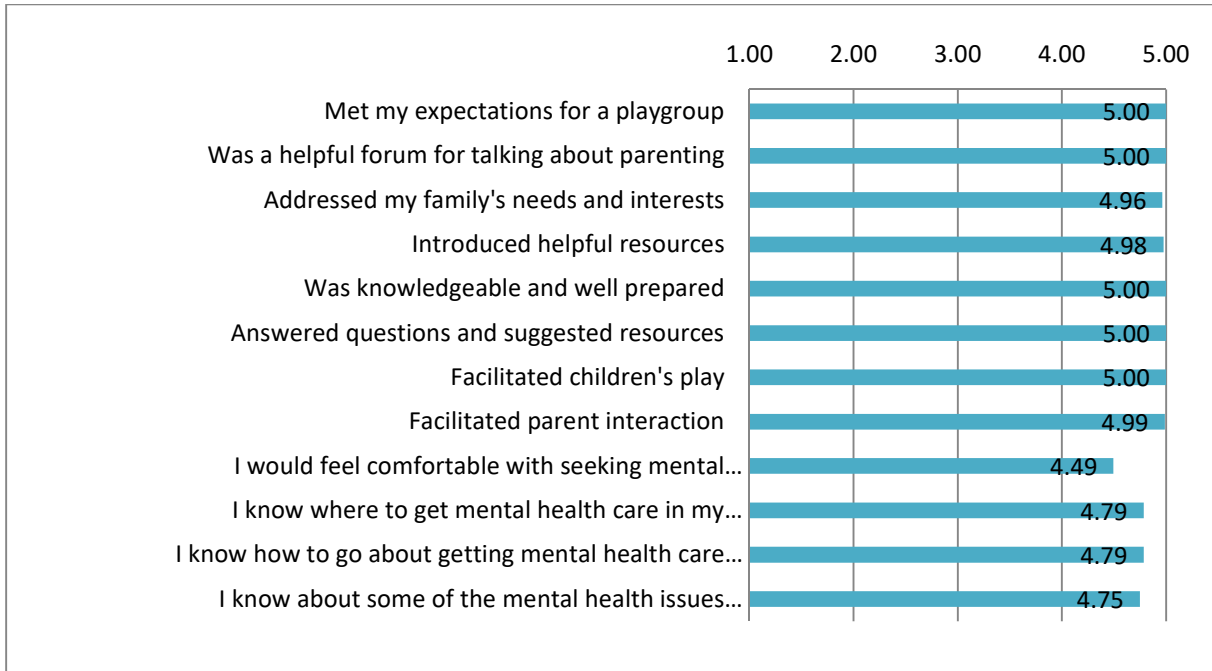
Scale of 0-5: 1 Strongly Disagree; 2 Disagree; 3 Neither Agree nor Disagree; 4 Moderately Agree; 5 Strongly Agree



Appendix IV Peapod Playgroups

Figure 4: Participant Survey Results County Average n=32

Scale of 0-5: 1 Strongly Disagree; 2 Disagree; 3 Neither Agree nor Disagree; 4 Moderately Agree; 5 Strongly Agree



Survey Comments:

- Very fun for the kids to be with other kids.
- Fun community gathering.
- Organized & fun community.
- Structured music time.
- Outside at parks.
- Fun environment.
- Safe environment.
- Being outside!
- Different toys to play with.
- Social interaction for mom & child.
- Children interaction, songs, toys.
- Leaders are fantastic.
- Interactive toys and plenty of space.
- Lots of great toys, song time.
- Fun and safe environment with nice people.
- Loved spending summer outside.
- Great location [Shady Rest] and activities for kids.
- Lots of kids same age get to play together.
- Free play with focus on safety.
- Socialization for kids with fun toys.
- Consistent activities week to week, open play.
- Very good interactions with kids and parents.
- Singing, playing, all the smiling faces.
- Hanging out with Moms and kids and fun activities and songs.
- Toddler interaction, nice songs and community building.
- So well prepared. Always interesting toys. So kind are leaders.
- Singing songs, helping with disagreements.
- Outside play, kids hanging out, moms chit chatting.
- Great leaders, nice locations for playgroup, good time of day for group.
- Nice variety of games, songs, education, kind group leaders, great location.
- Variety of learning toys, great leadership with songs and good child and parent socialization.
- Peapod with Eileen provided a fun and safe environment for my kids to interact with other children in their age group.

Appendix IV

Peapod Playgroups

Survey Comments Continued:

- More songs!
- Play dough, instruments.
- Snack and a few more games.
- Nada, it's perfect.
- Everything is great.
- Good job. No suggestions.
- Nothing, it's perfect.
- Maybe occasional music playing or musical instruments for kids to play.
- Maybe more music related activities such as instruments or music playing.
- More sensory toys, water, clay, making fun things- bird feeder, pine cone.
- No suggestions, it has been great as it is. Really enjoy it, my daughter has so much fun and has learned so much.

Becoming an Emotion Coach

Participants: 5 parents & 5 providers

Survey Results n=4

Do you feel more prepared as a parent/provider?

- Yes. This class was very valuable and helpful. I would recommend the class to other parents.
- Yes, I really liked the topics that were offered. (translated)
- Yes, now I recognize if I just follow my old habits and I am much more aware how I am responding with my son.
- Yes, great awesome wonderful class. Should be mandatory for all CPS families, foster families, and people birthing children.

Comments or other suggestions:

- It was an amazing course and very useful. Thank you so much.
- Watch more videos of the 4 parenting styles and solving each problem with emotion coaching.
- First few classes seemed like review. Last class could have been spread into two.

Appendix V Childcare Quality

Table 1: Participating Childcare Sites in Mono County

Site Type	Number of Sites Served	Percent of Qualifying Sites Served
Center	7	100%
Family Childcare	8	80%
Total	15	88%

Table 2: Children Served at Participating Childcare Sites in Mono County

Number of Children birth-5 Served	Percent of County birth-5 population Served
217	30%

Table 3: Alternative Sites Served Mono County

Site Type
Home Visiting 0-3
Home Visiting 3-5
Peapod North County
Peapod South County

Table 4: Participating Sites in Alpine County

Site Type	Number Served	Percent Served
Center	2	100%
Alternative Site--Playgroups	1	100%

Figure 1: Developmental Screening, ASQ, from Participating Sites

	Number of Children	Percent of Children
Screenings Completed	130	60% who were enrolled in participating childcares
With one or more identified concern(s)	22	23% who were screened

Appendix V Childcare Quality

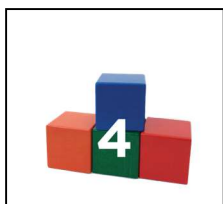
Table 5: Ratings

Rating is based on the following set of California state standards known to promote high-quality early learning for kids.

- Interactions between teachers and children
- The health and safety of the classroom
- How teachers meet and support the developmental needs of children
- Staff qualifications and training
- Group size, number of children per teacher

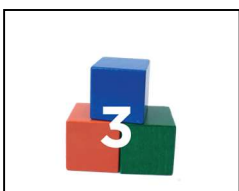
	COMMITTED TO QUALITY – participating in quality improvement efforts
	RAISING QUALITY – meeting some quality standards
	ACHIEVING QUALITY – meeting multiple quality standards
	EXCEEDING QUALITY – meeting quality standards in all areas
	HIGHEST QUALITY – exceeding quality standards in all areas

Table 6: Rated Sites—participating sites that opted to be rated



- Bridgeport Elementary Preschool*
- Lee Vining IMACA Head Start/ State Preschool*
- Mammoth IMACA Head Start/ State Preschool*
- Coleville IMACA State Preschool*
- Alpine Early Learning Center* (Alpine County)

*rated by Inyo County Supt. of Schools using their Quality Counts Matrix which includes additional elements of quality than the California Quality Counts Matrix



- Mountain Warfare Training Center Child Development Center
- Vasquez Family Day Care—Guillermina Vasquez
- Cherubs Academy—Etelvina Rios

Appendix VI Childcare Availability

Figures 1-3: Source-California Child Care Resource and Referral Network Child Care Portfolios
2009-2016 (https://www.rrnetwork.org/california_child_care_portfolio)

Figure 1:

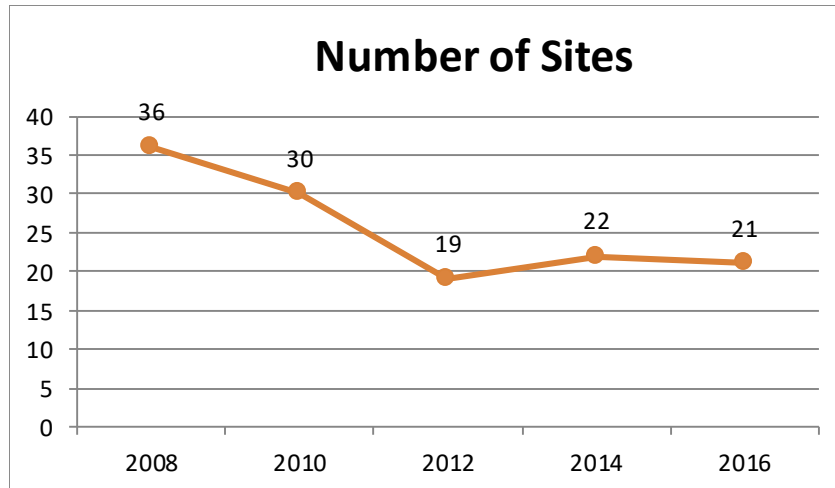


Figure 2:

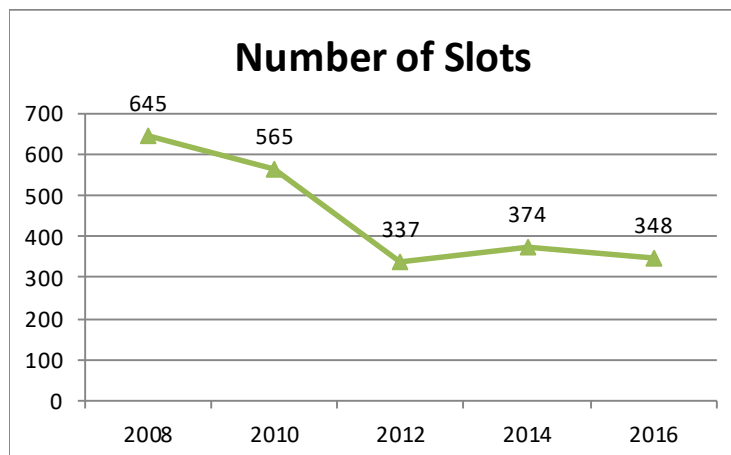
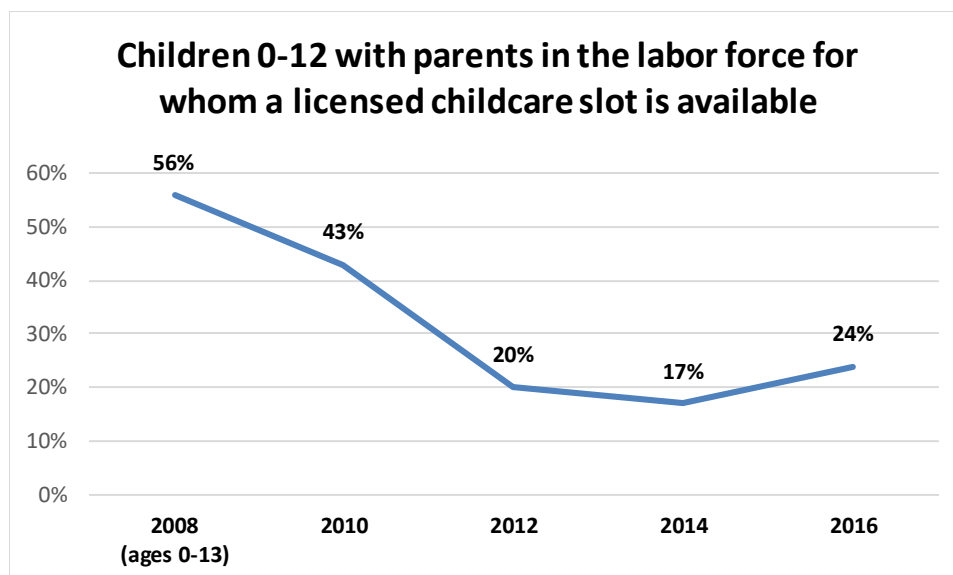


Figure 3:



Appendix VII Oral Health

Table 1: Oral Health Services Provided

Location	Oral Health Checks	Oral Health Education	Fluoride Varnish	Total Services
Preschools/Family Childcare Homes	-	102	152	254
Eastern Sierra Unified School District Birth-to-5 Health & Safety Fairs	2	-	3	5
FY 2017-18 Totals	2	102	155	259
FY 2016-17 Totals	42	125	130	297

Appendix VIII

Safe Kids California Mono Partners

Activities for Families and Children Birth to 5	Persons Served	Estimated Children Served	Estimated % of children Birth-5 served
Health and Safety Fairs	382	191	27%
Child Passenger Car Seat Check or Replacement	18	18	3%
Accident Prevention Supplies	146	146	20%
Bike Helmets	115	115	16%

Risk Areas Addressed

Car seat installation and use	TV and furniture tip-overs	Home safety
Carbon monoxide & smoke detectors	Bikes & Helmets	Preventing dog bites
Disaster/emergency preparedness	Medication & poison prevention	Water safety
Suffocation and sleep	Fire, burns, & scalds	Summer heat awareness

Mammoth Birth to 5 Health & Safety Fair

Activities & Resources Offered	People Reached 2017	People Reached 2018
First 5 California School Readiness Activities	300	n/a
Poison Prevention Information	41	80
Car Seat Safety Checks or Replacements	17	16
Nutrition Information	92	50
Applications for Childcare Providers & Preschools	16	50
Department of Social Services Information	31	50
Gun Safety Locks/Information	55	50
Kids' Bike Helmets	66	80
Health Department Information	32	50
Footsteps2Brilliance	55	n/a
Home Safety Kits	41	80
Fruit & Hot Dogs	224	238
Fair Attendance	300	263

Other 2018 Activities: First Books for ages 0-5, Kids' Bike Rodeo, Probation & Behavioral Health Info, Library & Raising A Reader programs, Town of Mammoth summer programs, Peapod Playgroup toys, face painting, & ambulance tour.

Appendix IX Results and Indicators

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

Indicator	Investment area	2015-16	2016-17	2017-18
1. Number and percent of children 6 months to 5 years old screened for developmental delays.	Home Visiting & Childcare Quality	27%	28%	210, 29%
2. Number and percent of children served in home childcare settings and childcare centers that exhibit moderate to high quality as measured by a quality index.	Childcare Quality	5%	8%	95, 13%
3. Number and percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix.		0	unavailable	2, 4%
4. Number and percent of licensed center and family child care spaces per 100 children.		35%	30%	37%

Sources:

1. Children in commission-run programs with developmental screening—Home Visiting (80) & children in child care programs participating in quality programs who received a developmental screening (130) /children birth to five in Mono County, US Census 2017 population estimate, 717 (100% reporting rate)
2. Inyo County Superintendent of Schools Quality Rating Improvement System rated 4 sites—Inyo Mono Advocates for Community Action 's Preschools in Mammoth, Coleville and Lee Vining and the Bridgeport Elementary Preschool--all were rated as having high quality—4 on a scale of 1-5. First 5 Mono rated two In-home child cares— Vasquez Family Day Care and Cherubs Academy and a center Mountain Warfare Training Center Child Development Center —that received a rating of higher than licensing standards; 3 on a scale of 1-5. Children served at the sites (95)/ US Census 2017 population estimate, 717 (100% reporting rate)
3. Data submitted as part of the Childcare Quality System, 2 received their permits of 48 providers in the County (100% reporting rate)
4. Number of licensed child care spaces available to Mono County children birth-5 on the IMACA Resource and Referral list, 262 /children birth to five in Mono County, US Census 2017 population estimate, 717 (100% reporting rate)

Appendix IX Results and Indicators

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

Indicator	Investment area	2015-16	2016-17	2017-18
1. Number and percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry.	School Readiness	61%	24%	75, 66%
2. Number and percent of children “ready for school” upon entering Kindergarten.		37%	50%	70, 49%
3. Number and percent of children receiving Kindergarten transition support.		79%	67%	76, 54%
4. Number and percent of entering Kindergartners assessed for school readiness prior to entry.		66%	24%	30, 27%
5. Number and percent of children in households where parents and other family members are receiving child-development and parenting education.	Home Visiting & Family Behavioral Health	56%	46%	317, 44%

Sources:

1. Incoming Kindergarten Parent Surveys indicating enrollment in preschool or pre-K--75/113 surveys=66%. 113 surveys/142 kindergarten students=80% reporting rate. Previous year's data was from the Summer Bridge Parent Survey with a much lower reporting rate.
2. In-kindergarten Brigance screens of students assessed as within the typical range and above the gifted cutoff 70/ 142 number of assessments=49%.142 assessed /142 kindergarten students=100% reporting rate. Previous year's reporting rates: 2015, 66%; 2016, 99%.
3. Children participating in Kindergarten Round Up or Summer Bridge, whichever is highest (Round Up for FY 2017-18) 76/142 number of children on the first day of kindergarten (100% reporting rate)
4. Incoming Kindergarten Parent Surveys indicating enrollment in preschool or pre-K that conducts readiness assessments/ 113 surveys=27%. 113 surveys/142 kindergarten students=80% reporting rate. Previous years included First 5 sponsored pre-K assessments now conducted in kindergarten.
5. Children in commission-run programs with child-development education components 317/ 717 children birth to five, 2017 Census population estimates. Only includes First 5 operated programs that gather identifying information so as to be able to omit duplicates—44% reporting rate, same calculation as above.

Appendix IX Results and Indicators

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

Indicator	Investment Area	2015-16	2016-17	2017-18
1. Number and percent of children in families provided with information about appropriate community services.	Home Visiting & Behavioral Health	56%	46%	317, 44%
2. Number and percent of children where breastfeeding is successfully initiated and sustained.	Home Visiting	84%	91%	Not available at time of report submission
3. Number and percent of children 0 to 5 years of age who are in the expected range of weight for their height and age, or BMI.		78%	77%	Not available at time of report submission

Sources:

1. Children in commission-run programs with resource referral components 317/ 717 0-5 population, US Census 2017 population estimate=44%. Only includes First 5 operated programs that gather identifying information so as to be able to omit duplicates—44% reporting rate, same calculation as above.
2. Sierra Park Pediatrics number of children breastfed at visits to pediatrics up to 1 month of age in FY 2017/18 not available at time of report submission, seeking to know the number and percent of children seen up to 1 month/ 134 births in 2017 Department of Finance projection. 2015-16 data was from Welcome Baby! and 2017-18 data from Mammoth Hospital to be included in the 2018-19 Evaluation Report.
3. Sierra Park Pediatrics number of 2-5 year olds seen in FY 2017/18 within the typical BMI range not available at time of report submission. 2015-16 data from children enrolled in CHDP from the Mono County Public Health Department. Data from Mammoth Hospital to be included in the 2018-19 Evaluation Report.

Appendix IX Results and Indicators

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

Indicator	Investment Area	2015-16	2016-17	2017-18
1. Number and percent of children who regularly access preventive dental care.	Oral Health	24%	20%	Not available at time of report submission
2. Number and percent of children ages 1 or older who receive annual dental screenings.		460, 64%	424, 60%	463, 65%
3. Number and percent of children at Kindergarten entry with untreated dental problems.		5%	18%	17, 30%
4. Number and percent of prenatal women who receive dental hygiene education.		10%	19%	16, 12%

Sources:

1. Children 0-5 seen at Sierra Park Dental more than once a year. Data from analysis by Mammoth Hospital based on Sierra Park Dental information. To be omitted in future years as per the draft 2019-20204 Strategic Plan
2. Children 0-5 seen at Sierra Park Dental annually for a screening from FY 2015-16 to FY 2017-2018. Data updated for all three years with new analysis by Mammoth Hospital based on Sierra Park Dental information of the number of children seen annually for a screening in the Mammoth Hospital Dental Clinic compared to the number of Children in the County, n=463 (100% reporting rate based on US Census 2017 population estimate of children 0-5 in the County, 717)
3. Oral Health Assessments turned into the school indicating untreated dental problems 17/ 56 completed oral health assessments = 18%. SCOHR system oral health assessment submissions including an oral health assessments 56 /142 kindergartners=39% reporting rate. 2016-17 data from assessments conducted at Kindergarten Round Up yielded a reporting rate of 35%.
4. 16 prenatal WBI Visits/ 134 California Department of Finance 2017 birth estimate= 19%. Reporting rate 19% (same calculation as above)

Appendix X Fiscal Overview

Revenue	Amount
Prop. 10 Tax Revenue	\$84,426
Small County Augmentation	\$265,574
SMIF (Surplus Money Investment Fund)	\$129
CBCAP/CAPIT (Parenting Partners)	\$33,000
IMPACT	\$70,767
Region 6 T&TA Hub	\$109,676
CDBG Administration	\$2,540
CDBG	\$233,203
CDE Certification Grant	\$6,285
CDE Certification & Coordination Grant	\$2,625
Infant Toddler Block Grant	\$6,587
Peapod Program (Prop. 63 Funds)	\$40,000
Raising A Reader	\$767
Miscellaneous	\$6,526
Interest on Mono County First 5 Trust Fund	\$10,018
Total Revenue	\$872,123

Expense	Amount	% of Expenditures	% of Discretionary Funds	5-year Strategic Plan
Home Visiting	\$168,175	19%	37%	34%
School Readiness	\$100,359	11%	28%	19%
Peapod	\$41,089	5%	<1%	7%
Childcare Quality	\$438,355	50%	2%	9%
Oral Health	\$4,521	1%	1%	1%
Safe Kids Coalition	\$7,001	1%	2%	2%
Operations/Support/Evaluation	\$117,527	13%	33%	28%
Total Expenses	\$877,027			
Total Revenue	\$872,123			
Net Revenue	(\$4,904)			
Fund Balance	Amount			
Fund Balance Beginning	\$548,455			
Fund Balance End	\$543,551			
Net Change in Fund Balance	(\$4,904)			