



## FY 2019-20 EVALUATION REPORT

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

# Table of Contents

<b>Overview.....</b>	<b>1</b>
<b>Programs and Evaluation</b>	
<b>Improved Family Functioning</b>	
Home Visiting.....	6
<b>Improved Child Development</b>	
School Readiness.....	16
Family Behavioral Health.....	21
Childcare Quality.....	23
<b>Child Health</b>	
Oral Health.....	28
Child Safety.....	30
<b>Appendices</b>	
<b>I, Home Visiting.....</b>	<b>32</b>
<b>II, Early Literacy.....</b>	<b>38</b>
<b>III, Peapod Playgroups.....</b>	<b>39</b>
<b>IV, Childcare Quality.....</b>	<b>41</b>
<b>VI, Child Health.....</b>	<b>43</b>
<b>VII, Results and Indicators.....</b>	<b>45</b>
<b>VIII, Fiscal Overview.....</b>	<b>48</b>
<b>IX, Mono County 2017 Child Care Portfolio.....</b>	<b>49</b>

# 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 fund services that promote early childhood development from prenatal to age 5. 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.

First 5 Mono currently receives an annual baseline revenue from First 5 California of \$350,000 which includes tobacco tax allocations and Small Population County Funding Augmentations (SPCFA). Additional Commission funds come from partner agencies like First 5 California, California Department of Education, and Mono County. To meeting funding requirements and guide Commission work, First 5 Mono adopted the 2019-2024 Strategic Plan which describes how Proposition 10 funds will promote a comprehensive and integrated system of early childhood development services.

The 2019-20 Evaluation Report helps fulfill the intended function of First 5 Mono, meet state and local requirements, and evaluate funded programs for the purposes of guiding quality improvement and fund allocation. The report includes data and analysis on the 18 indicators in the 2019-2024 Strategic Plan, logic models, findings, and conclusions. Guiding the format of the 2019-20 Evaluation Report are: Small Population County Funding Agreement requirements, example content from First 5 California, and First 5 California supported feedback from Child Trends on the 18-19 Evaluation Report.

## Demographics

The US Census estimates for Mono County<sup>1</sup> are as follows:

	Population	0-5 Population
2018	14,250	691, 5%
2019	14,444	693, 5%

Childhood poverty declined in Mono County between 2016 and 2018. The 2019 Childcare Portfolio for Mono County reports 7% of the 0-5 population was living in poverty, a decrease from 13% in 2016 (Appendix IX, Page 50). With the devastating economic impacts of COVID-19, the number of children living in poverty in Mono County shifted suddenly and dramatically after March

---

<sup>1</sup> <https://www.census.gov/quickfacts/monocountycalifornia>

2020. Our local economy, in Mammoth Lakes most predominantly, has a tourism-based economy. After hotels and restaurants closed, there was an estimated 85% unemployment rate in Mammoth Lakes. Families served through Home Visiting and Peapod Playgroups shared needs for rent support, utility payments, and diapers after job loss or reductions in hours after COVID-19 mandates shifted our world. First 5 met these needs through creation of an Emergency Fund which funded \$10,000 in rent support through Mammoth Lakes Housing, collaboration with IMACA to distribute PPE from First 5 California to childcare providers, and providing grocery cards and utility payments to families in need enrolled in home visiting.





Alongside nationwide and local movements to build systemic equity, some First 5 Mono Staff and a Commissioner chose to participate in a United Way 21 Day Equity Challenge to seek better understanding of personal, implicit, and systemic biases and to learn to apply cultural humility to Commission work while promoting equity for children and families. To that end, this report includes some shifts from prior years to seek to more clearly illuminate issues of equity through our work.





## Investment Areas, Programs, & Indicators

The tables below show the investment areas, programs and the percent of the 0-5 population served, and associated outcomes and their result for FY 2019-20. Numbers for each program are unduplicated, across programs numbers include duplicates.

Table 1: Investment Areas, Programs and Indicators

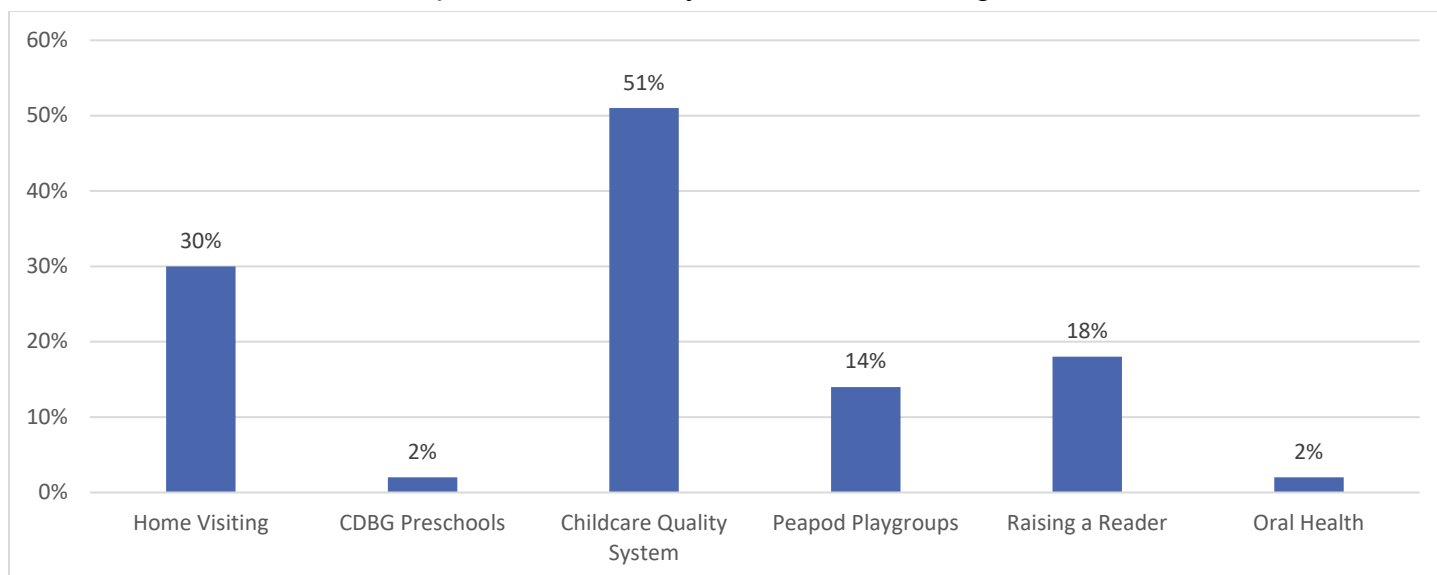
Indicator numbers refer to pages 45-48. \*reporting rate below 60%

Investment Area	Programs and % served	Indicators		
		Achieved  	Static 	Need improvement 
Improved Family Functioning	Home Visiting: Welcome Baby and Healthy Families 30%	9 School readiness rate 4 Developmental Screening rates 14 Parents get developmental and parenting education*	2 & 3, Higher participation rates: 0-1 no; 0-5, yes	15 Higher breastfeeding rates* 16 Expected BMI*
Improved Child Development	School Readiness: CDBG Preschool 2% Raising a Reader 18%	8 Preschool attendance by K entry* 9 School readiness rate 10 Families attended Round Up 11 Literacy programs accessed 13 Kindergarteners assessed for readiness		12 Preschool slot availability
	Family Behavioral Health: Peapod Playgroups 14%	1 Parents satisfied		14 High participation rates
	Childcare Quality 51% (omitting estimate 25% duplication)	4 Developmental screening rate	5 Children in high quality care (slight decrease from last year, but still a significant increase from 2 years ago)	6 Provider permit attainment rate 7 Childcare availability

Investment Area	Programs and % served	Indicators		
		Achieved  	Static 	Need improvement 
Child Health	Oral Health 2%	18 Low number of Children at K entry with untreated dental problems*	17 Annual dental screening rate*	
	Child Safety	Child safety information and materials shared with parents.		

\*Reporting rate below 60%

Table 2: Percent of the 0-5 Population Served by First 5 Funded Program

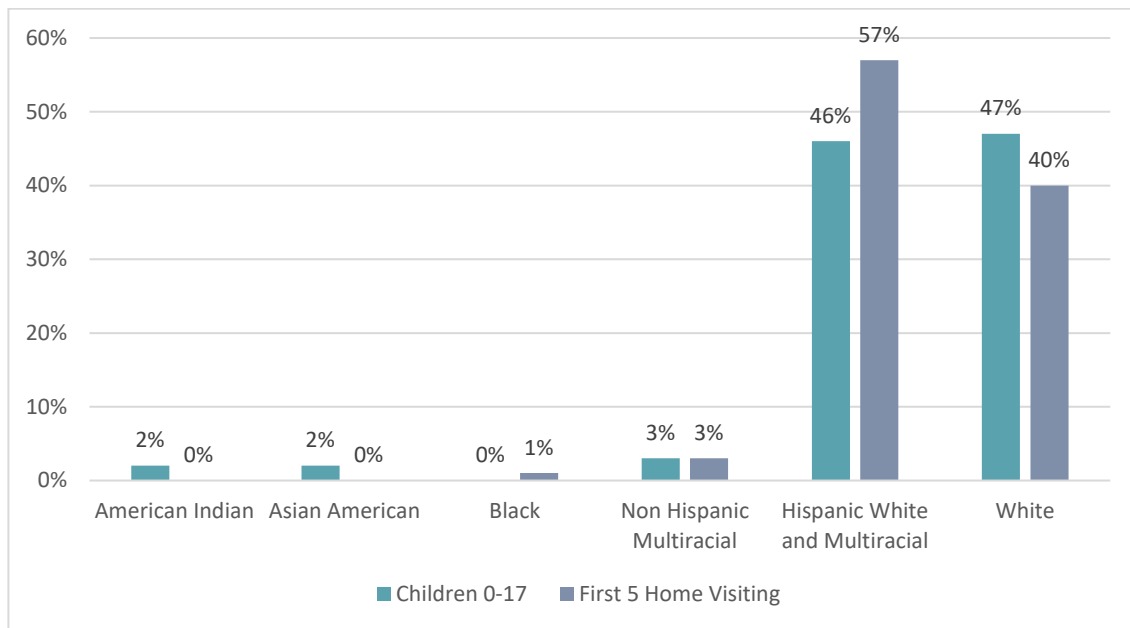


## Demographics

The most robust demographic data comes from Welcome Baby and Healthy Families, the First 5 Mono home visiting program. Other programs don't include an enrollment process that gathers ethnicity or area of residence, or, if the data is collected like for Raising a Reader, a data sharing agreement with First 5 Mono is not in place. Although this is the most robust data for participants, we do not have data for 100% of participants, and the database limits data compilation for these reasons the number of children in each data set (the n) varies.

To better understand if First 5 Mono programs serve proportional numbers of children by race and ethnicity, the following considers data from home visiting and the 0-17 population—see table 3 below. Compared to the percentage of children in the County, in FY 19-20 home visiting served more Hispanic children, but less American Indian, Asian American, and White children. The same percent of Non-Hispanic Multiracial children were served.

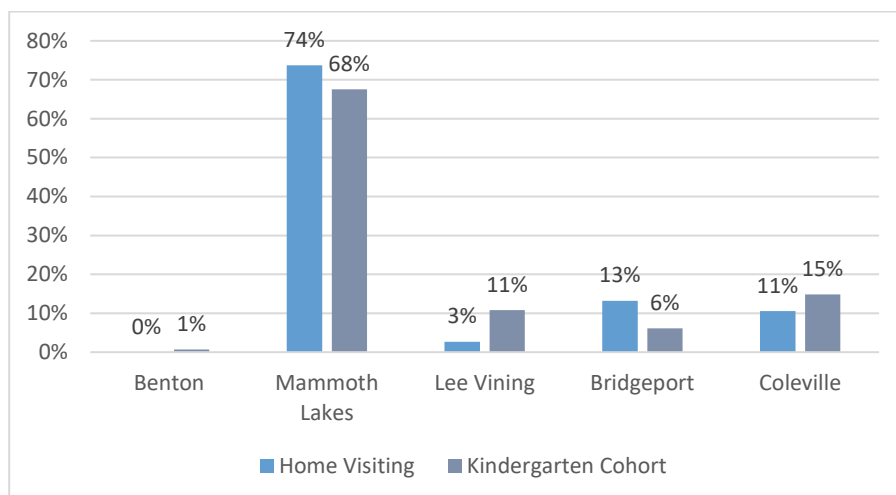
Table 3: Race Ethnicity Comparison: First 5 Mono Home Visiting (n=113) and the 0-17 population



Source: kidsdata.org for children 0-17 race/ethnicity and home visiting data

To understand better if First 5 Mono programs are serving a proportional number of children in the birth to five population in each community as the school systems served kindergartners, Table 3 compares them. Compared to the distribution of kindergarten students across the County's communities, home visiting served a higher percentage of families in Mammoth Lakes and Bridgeport, and lower percentages in Benton, Lee Vining, and Coleville.

Table 3: Area of Residence Comparison: New Families in Home Visiting (n=76) and the Kindergarten Cohort (n=120)



## Key Findings

- Home Visiting
  - Participating families have improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health.
  - Qualifying children<sup>2</sup> received developmental screenings (n=60), 59, 98%
  - A higher proportion of Hispanic families were served than the 0-17 population.
  - Services shifted to virtual with COVID 19 health department orders.
  - Participants received direct support of \$200 for two months if impacted by COVID 19.
- Oral Health
  - Children at kindergarten entry have a significantly lower percentage of carries than in the past, (n=120) 10%.
- Peapod Playgroups
  - Participating families are receiving child-development and parenting education. Services shifted to virtual with COVID 19 health department orders. Facebook Live participation was higher than Zoom.
- School Readiness
  - Funding for the Summer Bridge Program ended in spring of 2020 based on low participation and lack of desired results as reported in previous evaluation reports.
- Emergency Funds
  - In response to the COVID pandemic, the Commission created an Emergency Fund in 2020. Funds were used to support rental assistance through Mammoth Lakes Housing (\$10,000) and the Mammoth Lakes IMACA preschool which suddenly lost Head Start Funding (\$10,000).
- First 5 California Personal Protective Equipment (PPE)
  - In response to the COVID pandemic, First 5 California partnered with Inyo Mono Advocates for Community Action (IMACA) to provide PPE to childcare providers to support reopening and remaining open. 212 boxes of 40 gloves, 6 boxes of 50 masks, and 12 gallons of disinfectant were distributed.

Due to the data, findings, and conclusions herein, First 5 Mono County will continue to fund existing programs in FY 2020-21 while implementing measures to improve quality. First 5 Mono will seek to leverage supports around investment areas by working with community partners to support the well-being of children birth to five and their families. This evaluation examines program efficacy, participation, and partner agency activities for the purposes of allocating funding to the most impactful initiatives for Mono County.

---

<sup>2</sup> older than 4 months, not already receiving special needs services, and with at least 3 visits in the program year

# PROGRAMS AND EVALUATION

---

## IMPROVED FAMILY FUNCTIONING HOME VISITING

Home Visiting is included in the First 5 Mono Strategic Plan due to national recognition and strong data that Home Visiting is a strong strategy to improve outcomes for children and families. Home Visiting is an effective tool to: improve family functioning, decrease child abuse, and improve school readiness and literacy<sup>3</sup>. In 2019-20 the investment in Home Visiting increased to \$324,789. With a new contribution from Mono County, the program was able to become evidence-based. The new program, renamed **Welcome Baby and Healthy Families** uses the Parents as Teachers evidence-based model. Families are offered between 12 and 24 visits a year, depending on need, until their child is enrolled in preschool, Transitional Kindergarten, or Kindergarten.

First 5 Mono conducts the Home Visiting program with funding support from:

- Mono County: \$150,000
- First 5 California Small Population County Funding Augmentation (SPCFA): \$135,609
- Mono County Department of Social Services
  - Child Abuse Prevention, Intervention, and Treatment (CAPIT): \$32,271
  - CalWORKS Home Visiting Program (CWHVP): \$6,830

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

---

<sup>3</sup> Promising Practice Local Model: Modified Parents as Teachers Evidence-based framework: Pfannenstiel, J. C., & Zigler, E. (2007). Prekindergarten experiences, school readiness and early elementary achievement. Unpublished report prepared for Parents as Teachers National Center.

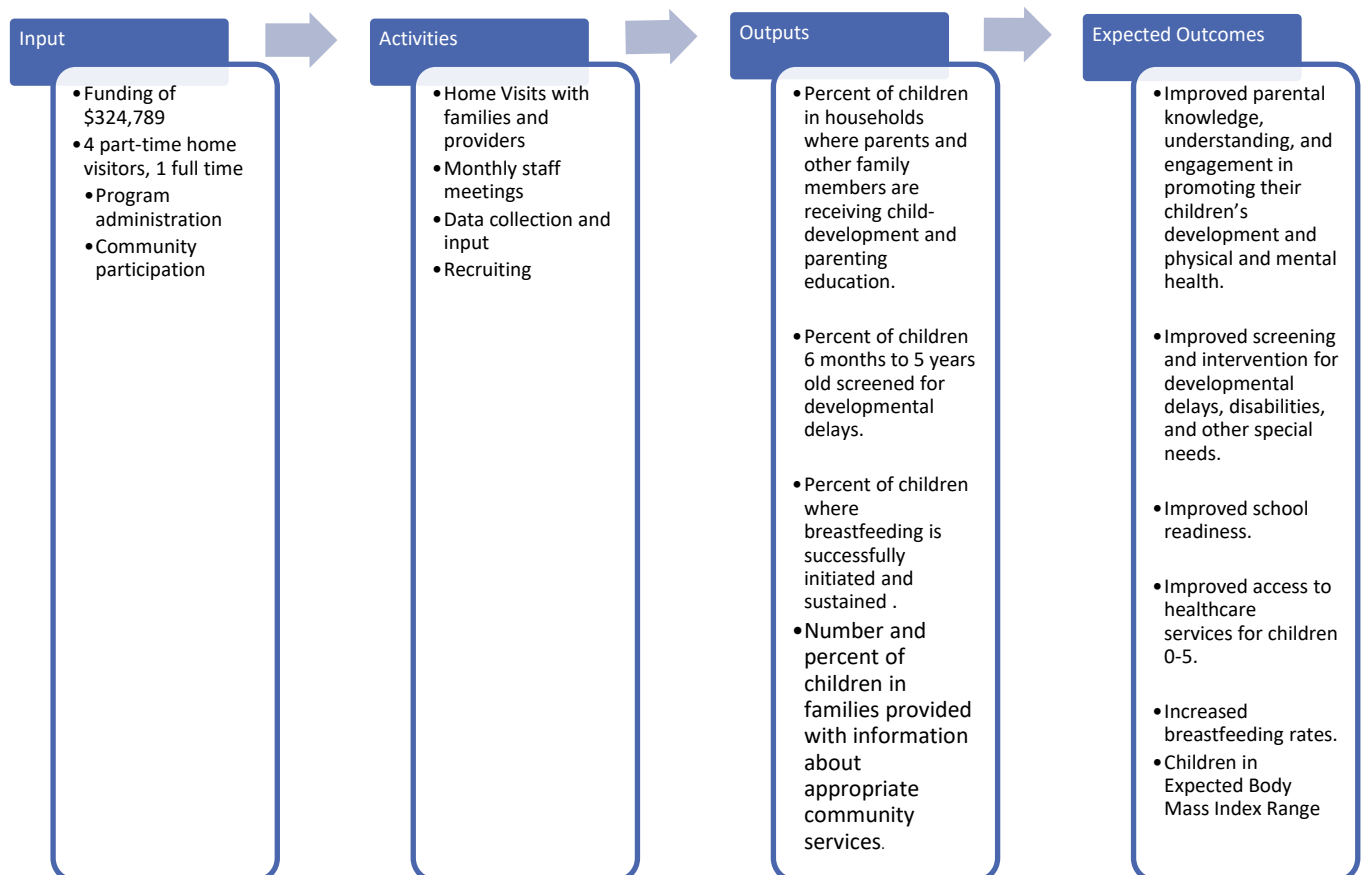
Snow, C.E., Burns, M., and Griffin, P. (Eds.). (1998). Preventing reading difficulties in young children. Washington, DC: National Academy Press.

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



- Provide culturally competent services in Spanish and English
- Facilitate optimal family functioning
- Decrease child abuse and neglect




## Logic Model



## Evaluation Findings and Conclusions

### Home Visiting Quick look:

Indicator numbers refer to pages 45-47 and analysis below

Percent of indicators	Indicator Achievement	Indicator
67%		4 Screening rates improved 9 School readiness improved 14 Parents get developmental and parenting education*
		2 & 3 Higher participation rates Infants: no Children: yes
33%		15 Higher breastfeeding rates* 16 Expected BMI*

\*Under 60% reporting rate

### 2. & 3. Is the number of parents participating high or increasing for the following age ranges: prenatal to 1 and prenatal to 5? No, and Yes

- Data Source: parents' participation in home visiting:
  - Prenatal -1 year old: 35%
  - Prenatal - 5 years old: 30%
- Finding: A lower percentage of infants were served this year than last. Conversely, a higher percentage of children prenatal-5 were served this year than last.
- Conclusion: In the last year a higher percent of children prenatal-5 were served and a lower percent of children 0-1 were served. Recruiting through Labor and Delivery changed significantly in March of 2020 when, due to COVID precautions, Home Visitors could only talk on the phone to new mothers to recruit rather than going into the hospital, supporting breastfeeding, and giving a new parent kit. As a result, the number of referrals through L&D—the main source of infant referrals—decreased on FY 19-20.

#### 4. Does Home Visiting improve screening and intervention for developmental delays, disabilities, and other special needs? For children enrolled in Home Visiting, yes

- Data Source: Ages and Stages Questionnaire (ASQ) screening data

Table 1: Home Visiting Ages and Stages Questionnaire Developmental Screenings

	<i>Number of children</i>	<i>Percent of qualifying children* n=60</i>
<i>Screenings Completed</i>	59	98%
<i>With one or more identified concern(s)</i>	14	24% of those screened
<i>Who received Early Intervention Services as a result of a screening</i>	1	2% of those screened

\*children without special needs services, who are over 4 months old, and had 3 or more visits, qualify for a screening.

- Finding: 98% of qualifying children (without an identified delay, older than 4 months, and with at least 3 visits) received a screening. Of those screened, 24% had a concern identified, and 2% of children screened received early intervention services because of a screening. The gap between the 24% of children with an identified concern and 2% of children with a screening who received services is attributed to the following:
  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.
  4. The services do not exist in our area
  5. The child was put on a waitlist for services
- Conclusion: The program is achieving this outcome. Looking at population-based screening rates however, there was a slight decline from last year.

#### 9. Does Home Visiting improve school readiness? Yes

- Data Source: Kindergartners Assessed as School Ready and Kindergarten School Readiness by Activity Participation (both below)

Table 1: Kindergartners Assessed as School Ready by District 2017-2019

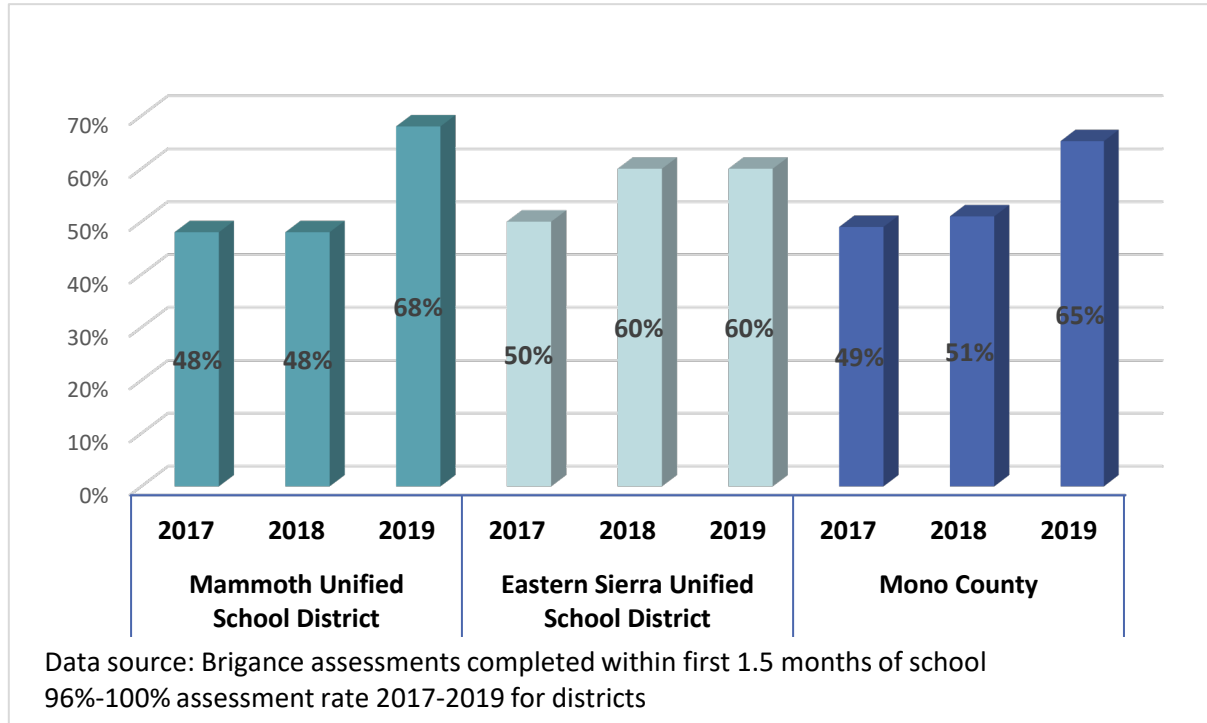
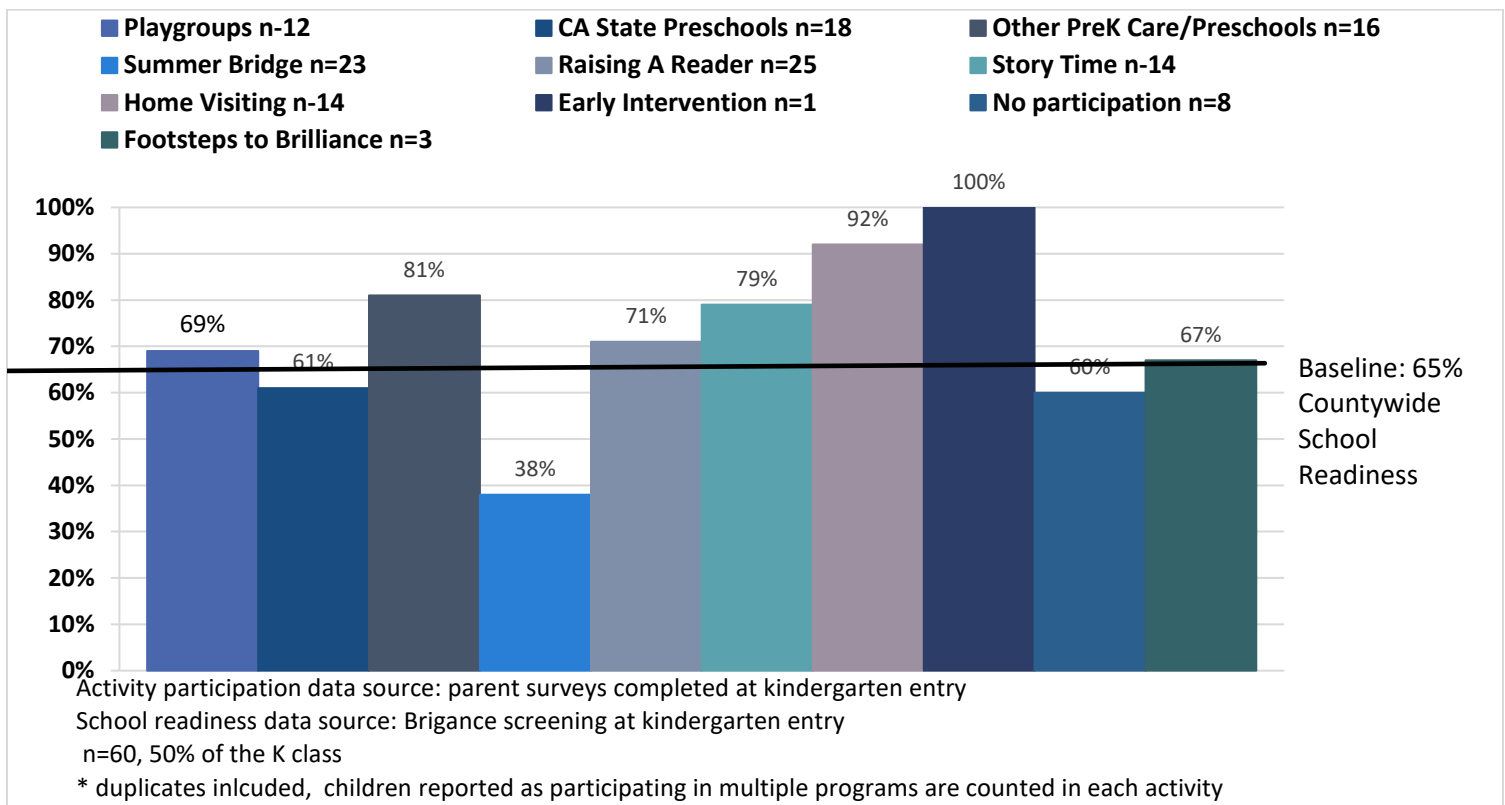


Table 2: 2019 Percent of Kindergartners Assessed as School Ready by Program Participation Compared to School Readiness Rate



- Findings: Compared to an overall increased school readiness rate of 65%, 92% of children who participated in Home Visiting were assessed as school ready. School readiness has been around 50% for the last 5 years, this is an exciting year to report a significant increase to a rate of 65%. Based on the data in the previous figures, children participating in First 5 funded programs are more likely to be school ready at kindergarten entry.
- Considerations: The use of the Brigance tool for assessment in Mono is being reevaluated due to discussions across the State about Racial Equity, Diversity, and Inclusion in Early Childhood which highlight the importance of assessing social-emotional readiness in assessments as it may better highlight culturally diverse students' strengths. As the Brigance tool, used through 2019 to determine readiness in Mono County, does not include a social emotional component, the Commission will consider recommendations for a new tool for School Readiness Assessments in 2020-21.
- Conclusion: Children who participate in Home Visiting are:
  - 32% more likely to be school ready than those who did not participate in early learning programs
  - 27% more school ready than the cohort as a whole

First 5 Mono does not have data on the kindergarteners' demographic characteristics, e.g., how many come from families with low income, low educational attainment, or other stressors. If the proportion of children experiencing stressors served through Home Visiting (43%) was higher than those of the kindergarten cohort as a whole, it would point to even more significant readiness gains for children enrolled in Home Visiting. At the February 2019 Strategic Planning Retreat, the Commission asked staff to seek additional funding for home visiting to expand to an evidence-based program which includes school readiness as a demonstrated outcome. To that end, Commissioner Gardner and Executive Director DesBaillets worked through the County budget process to successfully support inclusion of a \$150,000 annual contribution from the County general fund to raise the standard of home visiting in Mono County.

#### 14. Are parents participating in Home Visiting receiving child development and parenting education? Yes

- Data Source: Home Visiting exit surveys and resource referrals

Table 3: Exit Survey for children older than 1 year n=2

<i>Scale of 1 (Strongly disagree) to 5 (strongly agree)</i>	Before program average	After Program Average	Change
<i>I know how to meet my child's social and emotional needs</i>	4	5	1
<i>I understand my child's development and how it influences my parenting responses.</i>	4	5	1
<i>I regularly support my child's development through play, reading, and shared time together.</i>	4.5	5	0.5
<i>I establish routines and set reasonable limits and rules for my child.</i>	5	5	0
<i>I use positive discipline with my child.</i>	4	5	1
<i>I make my home safe for my child.</i>	5	5	0
<i>I am able to set and achieve goals.</i>	4	5	1
<i>I am able to deal with the stresses of parenting and life in general.</i>	3.5	5	1.5
<i>I feel supported as a parent.</i>	3.5	5	1.5
<b>Total</b>			7.5

Table 4: Exit Surveys

	Strongly Agree FY 19-20 N=4	Strongly Agreed FY 18-19 N=26
<i>I feel comfortable talking with my parent educator.</i>	95%	94%
<i>I would recommend this program to a friend.</i>	95%	94%
<i>My parent educator gives me handouts that help me continue learning about parenting and child development.</i>	95%	94%
<i>My parent educator is genuinely interested in me and my child.</i>	95%	94%
<i>My parent educator encourages me to read books to my child.</i>	95%	88%
<i>This program increases my understanding of child's development.</i>	95%	69%
<i>My parent educator helps me find useful resources in my community.</i>	100%	75%
<i>Activities in the visits strengthen my relationship with my child.</i>	95%	69%
<i>I feel less stressed because of this program.</i>	95%	50%

Table 5: Resource Referrals

<b>Community Resource</b>	<b>FY 2017-18</b>		<b>FY 2018-19</b>		<b>FY 2019-20</b>	
	Referred	Accessed	Referred	Accessed	Referred	Accessed
<i>Adult Education</i>	17	2	5	1	2	0
<i>Early Intervention</i>	10	5	16	4	8	1
<i>Early Education Care and Education Setting</i>	21	9	16	5	19	3
<i>Financial Resources</i>	13	1	4	0	35	5
<i>Nutrition Resources (WIC, IMACA, DSS, Lactation)</i>	6	2	8	1	22	2
<i>Parenting or Social Support, Community Participation</i>	102	33	104	21	58	11
<i>Language/Literacy Activities</i>	19	4	8	1	6	0
<i>Medical Services</i>	12	6	14	7	14	0
<i>Mental Health Services</i>	9	4	12	5	10	0
<i>Housing and utilities</i>					14	1
<i>Other (injury prevention, crisis intervention, transportation, employment and legal resources)</i>	18	2	16	2	20	2
<b>Total</b>	227	71	104	47	208	25
<b>% Referrals Accessed</b>	31%		45%		12%	

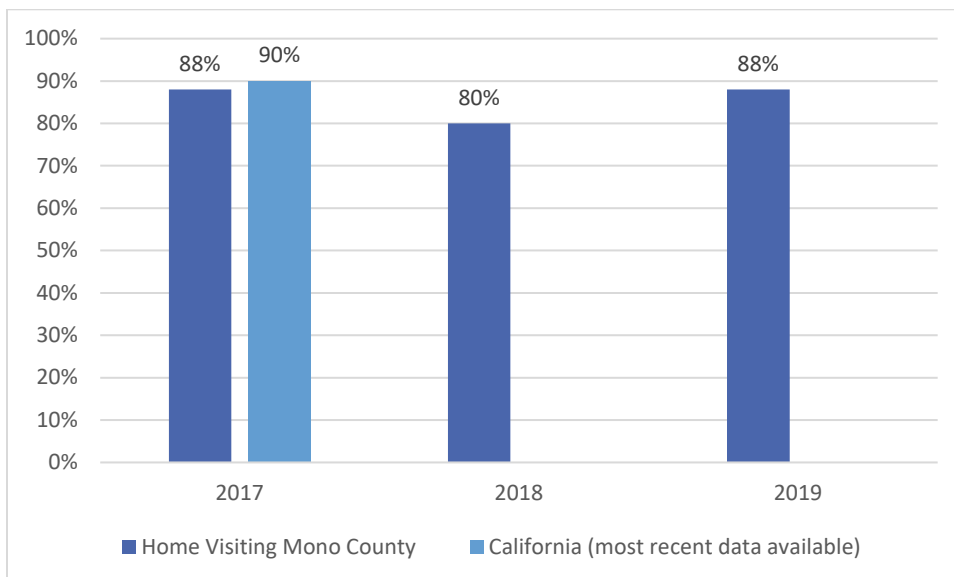
- Findings: Survey data yielded agreement of 95% or higher in measures pertaining to child development and parenting and an increase in activities related to child development after program participation. Referral data demonstrates parent engagement in accessing resources related to health and development and referrals to support families.  
Referral data reflect some COVID 19 related hardships: new referrals to housing and utilities and increased numbers for financial and nutrition resources. Although the percent of reported access to referrals accessed dropped significantly, the following impacted that data:
  - Evidence-based model implementation: as staff was focused on the many program changes, attention to some data became a challenge.
  - COVID 19: office staff did not have access to hard copy folders to verify and enter data at the end of the fiscal year.
- Conclusion: The program is achieving this outcome

## 15. Do children whose mothers participate in Home Visiting have increased breastfeeding rates? No

The rate of breastfeeding for infants whose mothers were enrolled in home visiting is high, although a bit lower than California as a whole. With the shift to an evidence-based program, breastfeeding data was only collected on 24 children (50% of children birth to one served). In future years, more training will be conducted with Home Visitors to support health evaluation data entry to better understand County breastfeeding rates for children enrolled in Home Visiting.

- Data Source: 2017-2020 Home Visiting Records

Table 6: Children ever Breastfed: Infants enrolled in First 5 Mono Home Visiting Compared to California 2017-18 to 2019-20<sup>4</sup>



- Finding: Mothers enrolled in Welcome Baby and Healthy Families who completed the health survey (50% of infants served) had static percentages of breastfeeding between 2017 and 2019.
- Conclusion: The program is not achieving this outcome and needs to improve data collection to ascertain the efficacy of the program at supporting breastfeeding.

<sup>4</sup> California data: <https://www.cdc.gov/breastfeeding/data/reportcard.htm>



**16. Is the percent of children 0-5 with the expected BMI high or increasing? No**

Data from Mammoth Hospital; Finding: 76%, a decrease from 81%; Conclusion: Continue to educate parents on healthy nutrition and seek to expand community opportunities for parents to expand learning.

**Conclusion**

The Commission will continue to fund Welcome Baby and Healthy Families as program-specific evaluation results indicate achievement of the desired outcomes. Thanks to funding allocated by the Mono County Board of Supervisors and funded by the taxpayers of Mono County, in 2019-20 home visiting expanded to become an evidence-based model. This was a significant shift from the previously funded locally-developed model. The expansion was quite a feat and led to growth for the First 5 Home Visitors and higher-quality services for clients.

# 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 and community partners offer programs to help prepare children for school in the early years. School readiness programs include all Mono County public elementary schools, childcare and preschool centers, special needs programs, and the Mono County Library System. The FY 2019-20 investment in school readiness was \$49,241 with funding support from First 5 SPCFA (\$21,846). For all incoming kindergartners planning to attend a public school, First 5 Mono funds transition to school support with Kindergarten Round Up (which First 5 also implements in partnership with the schools). Early literacy investments include: Raising A Reader and Story Time (conducted and partially funded by Mono County Libraries) and Readers' Theatre and First Book (conducted and funded by First 5 Mono).

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

**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:

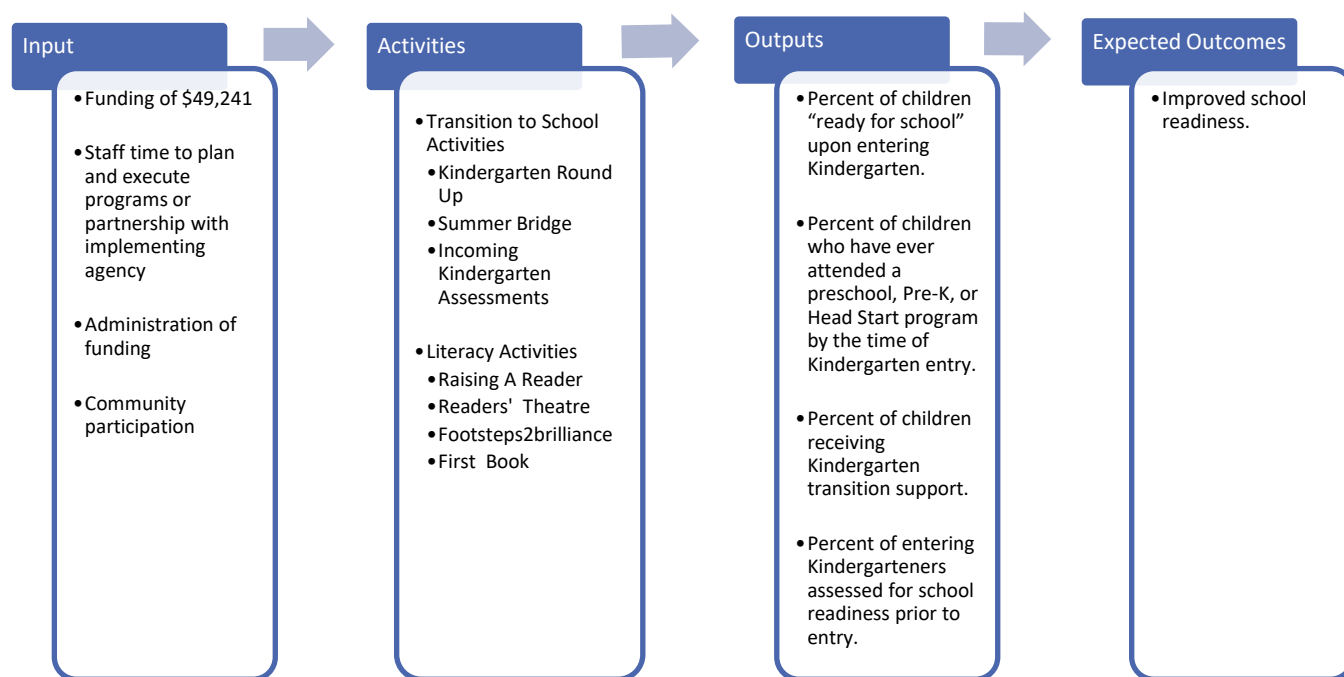
- Increase literacy for young children
- Increase care-provider literacy activities

**First Book:** free children's books

### Objectives:

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



## Logic Model



## Evaluation Findings and Conclusions

### School Readiness Quick look:

Indicator numbers refer to pages 45-47 and analysis below

Percent of Indicators	Indicator Achievement	Indicator
83%		8 Preschool attendance by K entry* 9 School readiness rate 10 Families attended Round Up 11 Literacy programs accessed 13 Kindergarteners assessed for readiness
17%		12 Preschool slot availability

\* Under 60% reporting rate

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

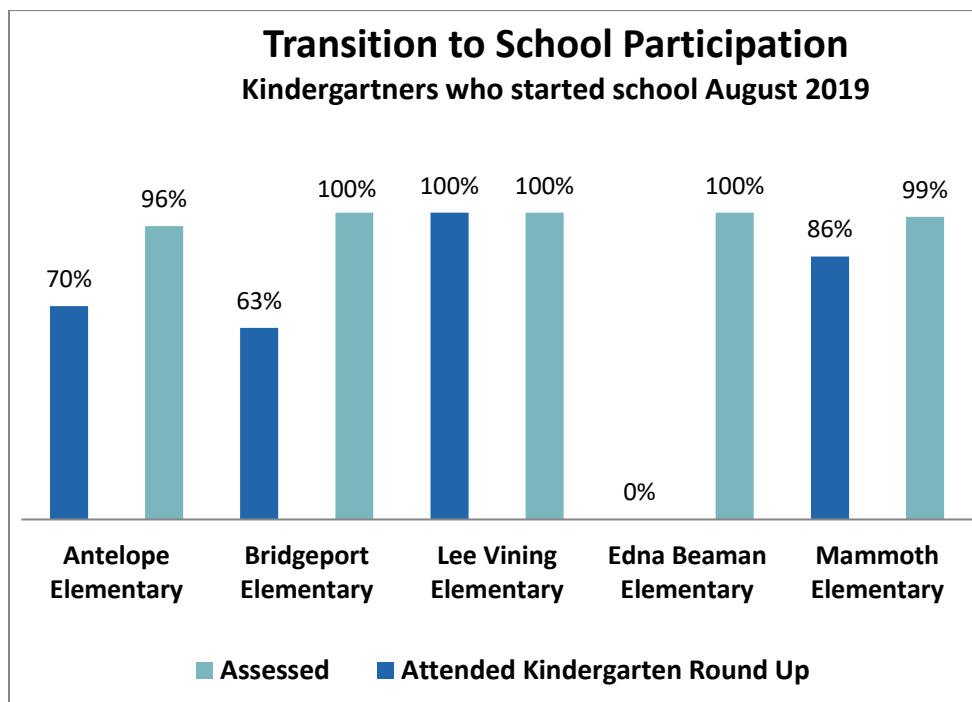
- Data Source: Incoming Kindergarten Parent Survey
- Finding: yes, 87% compared to 76% last year
- Conclusion: Efforts to maximize enrollment and increase the number of available slots coupled with the district-mandated Transitional Kindergarten program had a positive impact on the rate of preschool attendance.

**9. Is the percent of children “ready for school” upon entering kindergarten increasing? Yes**

- Data Source: Brigance Assessments (Figure 1, page 11)
- Finding: Readiness increased to 65% from 51% last year
- Conclusion: While school readiness has been a major investment for 19 years, only in the last 3 years was a standardized universal assessment used to measure school readiness. The Percent of Kindergartners Assessed as School Ready by Program Participation (Figure 2, page 11) demonstrates that funded programs support school readiness across the county. After many years of a rate of around 50%, the increase in FY 2019-20 is quite exciting! First 5 Mono will seek to sustain and continue to increase the rate of school readiness in Mono County.

**10. Is the percent of children whose parents attended Kindergarten and TK Round-Up increasing or remaining high? Yes**

- Data Source:
  - Table 7: Participation in Transition to School Activities



- Finding: Kindergarten Round Up participation increased to 82%, and has steadily increased from 54% in 2017-18.
- Conclusion: The program is achieving its goal.

**11. Is the percent of children birth to 5 accessing funded literacy activates high or increasing? Yes**

- Data Source: Participation in Raising a Reader and Home Visiting, includes duplicates.
- Findings: 48%, up from baseline of 47%
- Conclusion: First 5 does not have access to the Raising a Reader participant names so cannot provide unduplicated numbers. The number remained largely static since last year around 47%

**12. Is there a high or increasing percent of preschool slots for age-eligible children? No**

- Data Source: Number of slots licensed for a preschool age-specific classroom
- Finding: 43%, down from 51% last year. Note: last year's figure was revised due to an update in what slots are counted, now only age-specific classrooms.
- Conclusion: The decrease from 51% to 43% represents the closing of a site in 2019-20. Although there are preschool slots for only 43% of age-eligible children, some slots still remain unfilled. Reasons for underutilization are:
  - Slots are located in towns without enough age qualifying children to fill them
  - Children's families fall above income requirements (e.g., State Preschool, Head Start, or CDBG)
  - Lack of transportation
  - Lack of sufficient hours to be feasible for the family, many programs are only around 4 hours a day.
  - Federal employment requirements for parents (e.g., Mountain Warfare Training Facility Child Development Center).

**13. Is the percent of entering Kindergartners assessed for school readiness at entry increasing or remaining high? Yes**

- Data Source: Kindergarten readiness assessments (Figure 2 page 11)
- Findings: yes, 98% of kindergartners
- 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.

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 2012-21 as in 2019-20. The Commission ended Summer Bridge program funding earlier than planned—at the end of 2019-20 due to COVID. The decision to no longer fund Summer Bridge was based on low participation and lack of desired outcomes for over 5 years. Data in the evaluation report will continue to inform improvement and future investments.

## 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 for \$36,507. Playgroups and parent education are conducted by First 5 Mono.

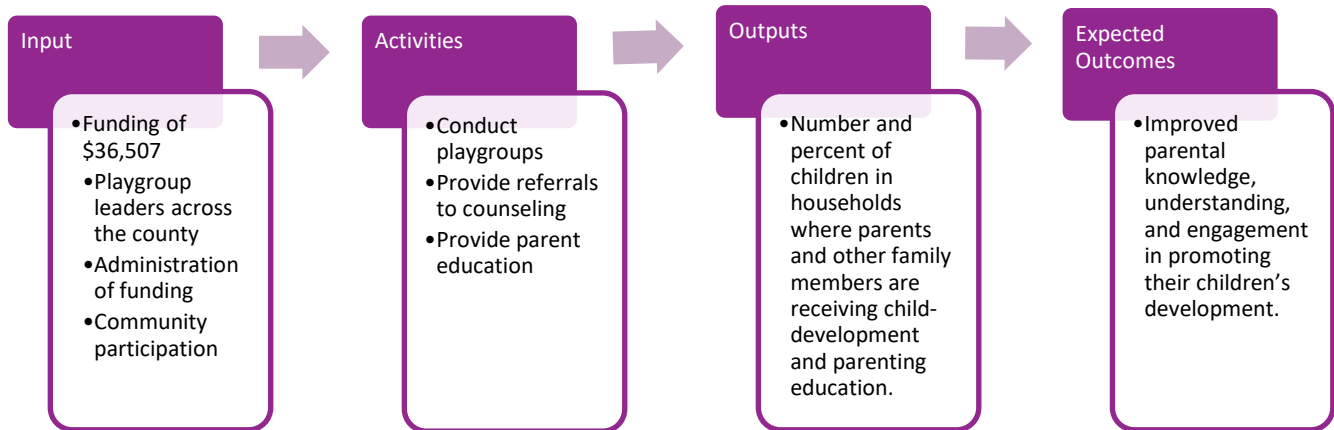
The objectives and a brief description for the program funded in this category is as follows:

**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.

### 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.



## Logic Model



## Evaluation Findings and Conclusions

### Peapod Playgroups Quick Look:

Indicator numbers refer to pages 45-47 and analysis below

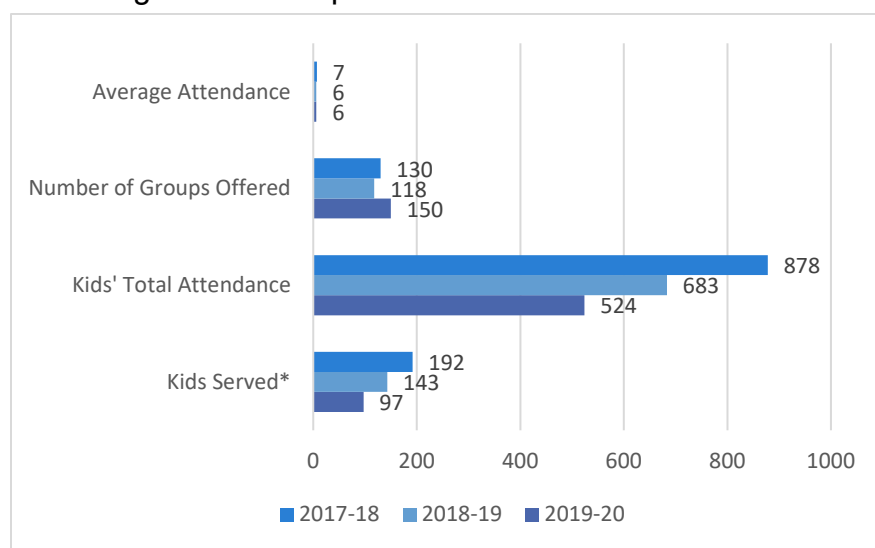
Percent of indicator	Indicator Achievement	Indicator
50%		1 Parents satisfied
50%		14 High participation rates

#### 1. Does Peapod survey data yield 100% satisfaction or an average of 4-5 on a scale of 1-5 that the playgroup met participant expectations. Yes

- Data Source: Peapod surveys
  - Figure 1: Participant Survey Results (appendix III Table 3, page 38)
- Finding: Yes
- Conclusion: Due to client satisfaction with the program, the program will continue to offer services as it has in the past.

#### 14. Is the percent of children in households where parents and other family members are receiving child-development and parenting education high or increasing? No

- Data Source: Number of children participating in playgroups.
  - Figure 1: Participation 2017-18 to 2019-20



\*Kids participating via Facebook live not counted



- Finding: Down to 14% from 21% 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. More groups were offered than in the past, and children participating on Facebook Live were not counted. Changes in staffing for the playgroups has contributed to the decline in participation over the last several years, all efforts will be made to support existing staff in rebuilding participation. COVID 19 significantly impacted the number of children who participated since in-person groups were not allowed after mid-March. Although there was a 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 because Peapod Playgroups, the First 5 Mono Family Behavioral Health investment. The Commission will continue to invest in and seek funding partnership for this initiative. Outreach efforts through COVID 19 have shifted online. In following with local and state health guidelines, groups shifted to a virtual platform in March of 2020. Groups were held first virtually on Zoom, than, as participation declined, on Facebook Live which received wider participation (albeit not interactive). Despite the pandemic, Peapod Playgroups still enjoy significant participation.

## 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. The initiative is fiscally supported by First 5 California, the California Department of Education, and a Federal Community Development Block Grant through Mono County. 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.

The Childcare Quality investment for FY 2019-20 was \$536,836 that 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 & First 5 California: \$102,290
- Region 6 Training and Technical Assistance Hub, funded by First 5 California: \$178,350
- California Department of Education (CDE) California State Preschool Program Block Grant (CSPP BG): \$18,013
- Certification and Coordination Grant (CDE): \$2,625
- Quality Rating and Improvement System (QRIS) Block Grant: \$9,119
- Equitable Learning Opportunities (CDE): \$23,134
- Childcare services provided by Eastern Sierra Unified School District funded by the Community Development Block Grant (CDBG) through Mono County: \$203,305.

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

**QRIS and CSPP QRIS Block Grants:** Support for state preschool sites and sites serving infants and toddlers.

**Objectives:**

- Provide site-specific professional development to child care providers
- Support provider understanding of quality care and education

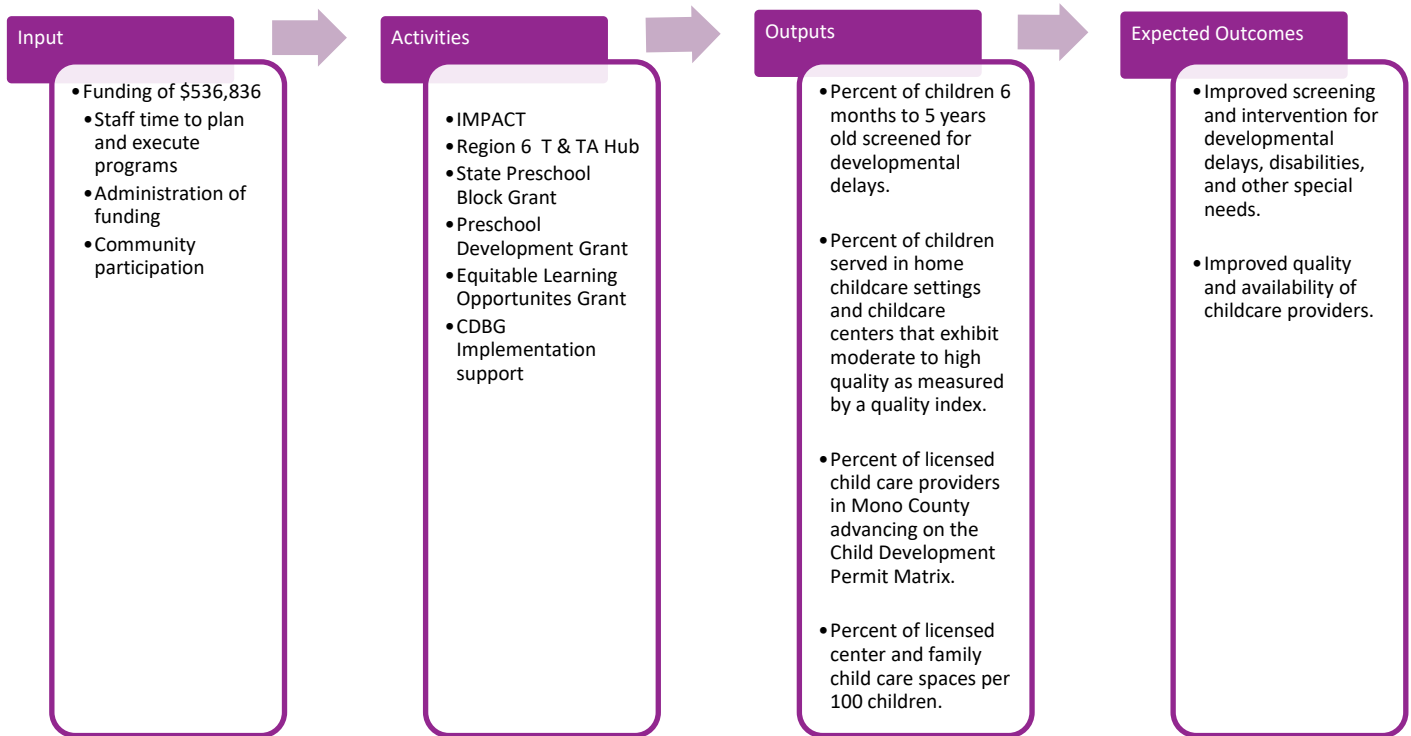
**Training and Technical Assistance Hub:** Support regional efficiencies in Childcare Quality work

**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

### Childcare Quality Quick Look:

Indicator numbers refer to pages 45-47 and analysis below

Percent of indicators	Indicator Achievement	Indicator
50%		4 Developmental screening rate
		5 Children in high quality care, slight decrease from last year, but still a significant increase from 2 years ago.
50%		6 Provider permit attainment rate 7 Childcare availability

**4. Is the percent of children 6 months to 5 years old screened for developmental delays increasing? Yes for the Childcare Quality System**

- Data Source: Childcare Quality System Completed ASQs
  - Table 1: Developmental Screening, ASQ, from Childcare Quality System Sites

<i>Fiscal Year</i>	<i>Number of Screenings</i>	<i>Percent of enrolled children screened</i>	<i>Number of children screened with an identified concern</i>	<i>Percent of children screened with an identified concern</i>
<b>2017-18</b>	130	60%	22	23%
<b>2018-19</b>	180	85%	33	18%
<b>2019-20 n=197</b>	173	88%	5	3%

- Finding: Yes, 88% of children enrolled at participating sites were screened for a developmental delay, up from 85% the previous year.
- Conclusion: More children were screened for developmental delays through their childcare provider this year.

**5. Is the percent of children served in home childcare and childcare centers that exhibit moderate to high quality as measured by a quality index increasing? 6. No, but still a significant increase over the last several years.**

- Data Sources: Site ratings and Childcare Quality System participation data
- Finding: 127 children in Mono County attended a site with a high quality rating, 91% of children enrolled in programs participating in the Childcare Quality System and 24% of all children in the County. Gains from last year were maintained, the decrease was due to two family childcare sites not wishing to maintain their rating.
- Conclusion: Although fewer sites were rated as having high quality this year, those that were rated achieved the highest ratings, 4 & 5 out of 5. Lee Vining Preschool was rated at a 5--highest quality, the first site in Mono County to achieve the highest rating! 7 sites were rated as 4—exceeding quality. Although less sites were rated in FY 19-20, all rated sites were rated as high quality and the number of sites rated as high quality has significantly increased over the last several years from 8% in 2016-17 to 25% in 2019-20.

**6. Is the percent of licensed childcare providers in Mono County advancing on the Child Development Permit Matrix high or increasing? No**

- Data Source: Childcare Quality System participation
- Finding: 0, down from 2 in 2017-18
- Conclusion: Although child development permits are an element of a high quality program, the incentive to improve quality is not enough to support providers in overcoming the barriers to attain a child development permit. Barriers include low pay regardless of permit achievement, no licensing requirement to have a permit, and the difficulty of gathering supporting documents and properly completing the permit application. Progress was made towards permit attainment through the AB 212 program administered by the Mono County Office of Education and gains are expected for FY 2020-21.

**7. Is the percent of licensed center and family childcare spaces per 100 children high or increasing? Almost the same, slight decrease**

- Data Source: IMACA Resource and Referral slot numbers and the Childcare Portfolio
- Findings: In September of 2019 there were slots for 46% of children birth to 5 in the County
- Conclusion: Although the number of slots available to children in Mono County decreased dramatically from 56% in 2008, the percent of available slots has increased over the years and is now 46%, a an increase over the last three years, albeit a loss of one percent from last year. First 5 Mono continues to actively participate in the Mono County Child Care Council to support initiatives seeking to increase the number of child care slots in Mono County. First 5 collaborates with the Mono County Office of Education, which has taken the lead on a coordinated effort to create more slots in Mammoth Lakes. First 5 also continues to apply for CDBG funds and partner with the County and Eastern Sierra Unfired School District to help fund the Bridgeport Elementary Preschool.

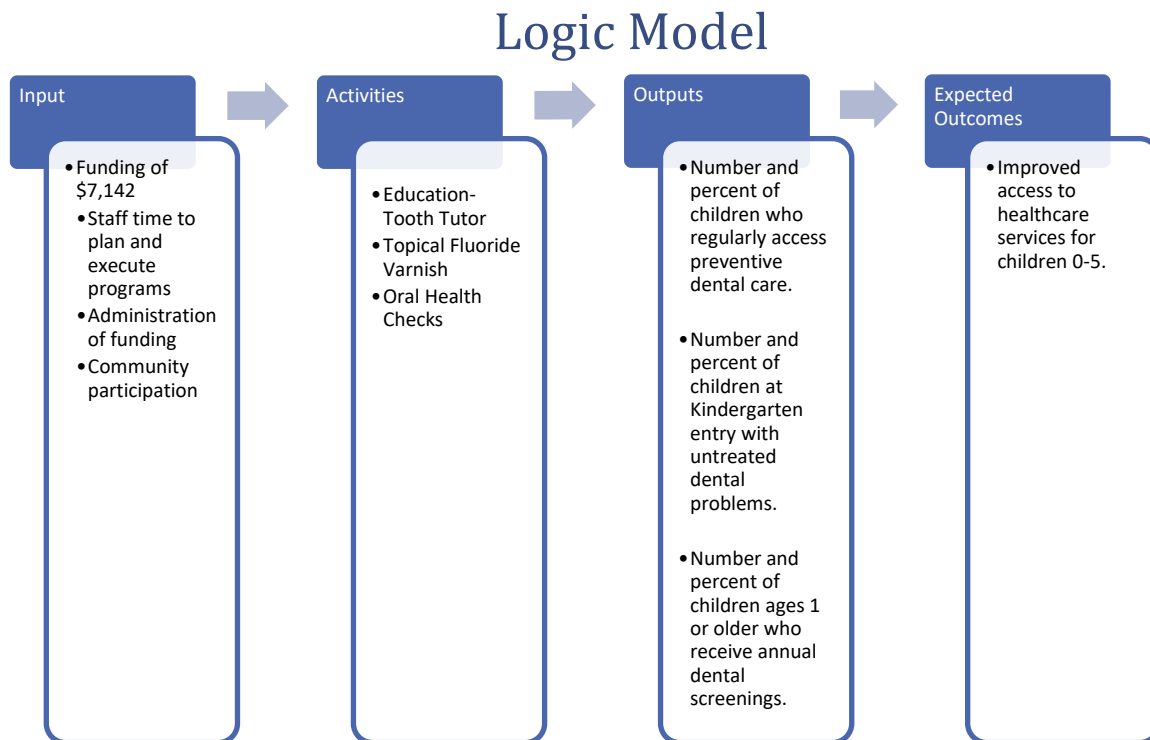
The Commission will continue to invest in Childcare Quality because of successes in leveraging First 5 California and California Department of Education funds, rating sites, supporting developmental screenings, and partnering with local providers to maintain and increase quality. Over the last several years, First 5 Mono has built significant capacity in this investment area. After completion of training and successful testing, First 5 Mono staff is able to provide teacher-specific coaching based on classroom observations, conduct observations, and rate sites. Childcare Quality System work is supported by the Mono County Office of Education's Local Planning Council (the Mono County Child Care Council) and Inyo Mono Advocates for Community Action's local Resource and Referral and Alternative Payment programs, as well as collaboration with Cerro Coso's Child Development Department and partners in Alpine and Inyo Counties.

# IMPROVED 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 spurred development of a topical fluoride varnish application program. Pediatricians in the County continue to report 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 \$7,142 for FY 2019-20. 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.



## Evaluation Findings and Conclusions

### Oral Health Quick Look:

Indicator numbers refer to pages 45-47 and analysis below

Percent of indicators	Indicators Achievement	Indicators
50%		18 Children at K entry with untreated dental problems*
50%		17 Annual dental screening rate*

\*Lower than 60% reporting rate

### 17. Is the percent of children ages 1 or older who receive annual dental screenings high or increasing? No

- Data Source: Sierra Park Dental Data, 2017-20
- Finding: 42% of children age 1-5 years old had an annual exam at Mammoth Hospital—, a drop from 51% the previous year. There was a corresponding drop in the reporting rate as the number of patients at Sierra Park Dental has declined by 134 individuals since 2017.
- Conclusion: First 5 will continue oral health education efforts to support higher percentages of children receiving an annual screening. A data challenge is that only one dental provider is included—Mammoth Hospital.

### 18. Is there a low percent of children at Kindergarten entry with untreated dental problems? Yes

- Data Source: Kindergarten Oral Health Checks
- Finding: 10% of the oral health checks turned in at kindergarten enrollment indicated the child had untreated caries (cavities), a significant decrease from the last 5 years which have been around 30%. Note the low reporting rate though, 42%.
- Conclusion: The percent of untreated caries at kindergarten significantly decreased to 10%.

Fewer children are being seen at Mammoth Hospital Dental Clinic--45%. The actual rate of annual screening reported herein of 42% is certainly higher as some children access care through a private provider and data is only from Mammoth Hospital. The Commission will continue to invest in this initiative and seek to sustain the 19-20 improvements in oral health for children 0-5. First 5 will continue to provide topical fluoride varnish and oral health checks for children between one and 5-

years-old served in Childcare sites participating in the Childcare Quality System as well as promote oral health through home visiting, playgroups, and school readiness.

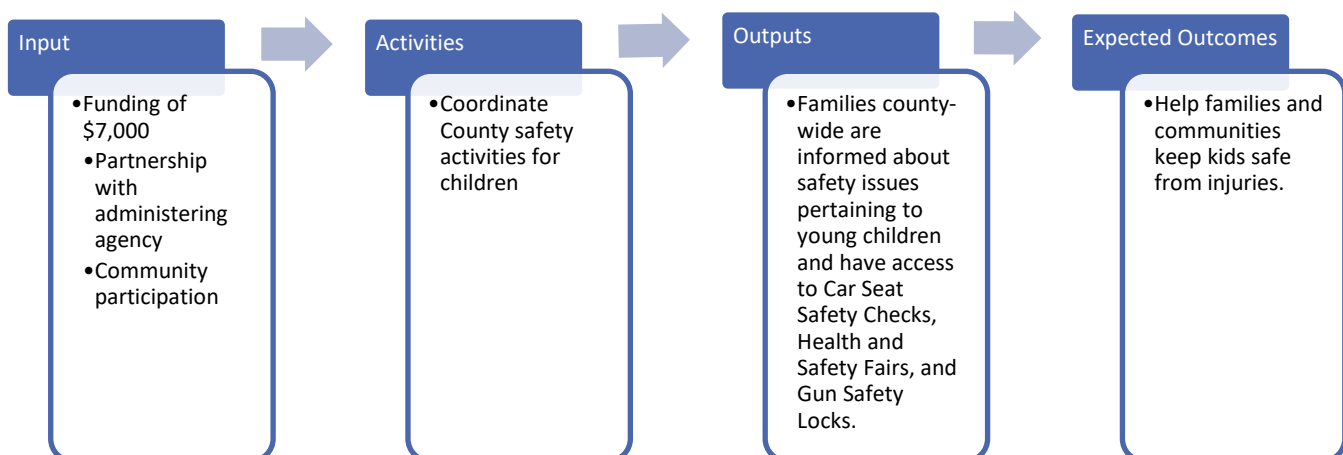
The 0-5 population's oral health needs decreased in 19-20 based on the rate of untreated carries at kindergarten entry-- 10%. The decrease may be linked to First 5 and partner agency oral health investments, but may also be attributable to the low reporting rate. Analysis in future years will help identify if the decrease from the multi-year average of 32% to 10% is indeed a trend. Once funded by First 5 California, First 5 Mono continues to allocate discretionary funds for the oral health initiative. Leveraging the First 5 Mono investments are supplies from the Mono County Health Department, and the pediatric office's application of topical fluoride varnish.

## CHILD SAFETY

Prior to the formation of *Safe Kids California, Mono Partners*, no agency 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

### Child Safety Quick Look:

#### Not included in Strategic Plan Indicators

Percent of indicators	Indicator Achievement	Indicators
100%		Child safety information and materials shared with parents.

#### Are families countywide 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

- Data Source: Coordinator report
- Finding: services were greatly reduced due to COVID 19
- Conclusion: As a result of investments, car seat checks, safety material distribution, and bike helmet distribution continued throughout the year at Mammoth Lakes Police Department, State Farm, and through First 5 Home Visiting.

Families had access to child safety equipment and car seat checks 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 future Health & Safety Fairs.

# APPENDICIES

## Appendix I, Home Visiting

Table 1: Referral Source

	Number	Percent
Mammoth Hospital Labor & Delivery	17	22%
Self	16	21%
Doctor, Pediatrician, or Hospital Staff	12	16%
Other, Family/Friends	6	8%
Childcare Quality System	5	6%
Peapod	4	5%
First 5 Home Visitors	3	4%
Early Start/ screening agency	3	18%
School	2	
Tribal Organization	1	
IMACA	1	
Childbirth Education Class	1	
Not recorded	6	
19-20 Total	77	
18-19 Total	104	
17-18 Total	70	

Table 2: Visits Provided

<i>Visit Type</i>	<i>FY 2017-18</i>	<i>FY 18-19</i>	<i>FY 19-20</i>
<i>Prenatal Home Visits</i>	63	65	32
<i>Birth-5 Home Visits</i>	561	527	584
<i>Total Visits</i>	624	592	616

Table 3: Families Served

	<i>FY</i> <i>17-18</i>	<i>FY</i> <i>18-19</i>	<i>FY</i> <i>19-20</i>
<i>New Babies Enrolled</i>	58	89	<b>48</b>
<i>Births to Mono County Residents*</i>	134	135	<b>137</b>
<i>Percent of Mono County Babies Enrolled</i>	43%	66%	<b>35%</b>
<b><i>Total Families Served</i></b>	125	136	<b>207</b>

\*Source: California Department of Finance January 2020, projections

FY calculations use the calendar year projections of the year the FY begins (e.g., 2018 for FY 2018-19)

Table 4: Child's Race & Ethnicity, N=113 children newly enrolled in the program year for whom data is available.

- Child Race/Ethnicity (n=113)
  - Non-Hispanic 47 (43%)
    - White: 43
    - Black or African American: 1
    - Multi-race: 3
  - Hispanic 66 (57%)
    - Multi-race: 58
    - White: 8

<b>Non-Hispanic</b>	<b>47, 43%</b>	Black or African American	1
		White	42
		Multi-race	3
<b>Hispanic</b>	<b>66, 57%</b>	Multi-race	53
		White	13

Table 5: Stressors

**Families with multiple stressors: 47, 43%** (of 113 families who received a visit in the program year)

Families with multiple stressors, previously called families with high needs, are determined using the national home visiting standard. If a family has *more than one of the following* stressors, they are considered as having multiple stressors and can access home visits twice a month, rather than monthly.

low income or education	foster parents	death in the immediate family
child or parent with a disability	incarcerated parent	child abuse or neglect
homeless or unstable housing	very low birth weight	active military family
young parent	domestic violence	
substance abuse	recent immigrant	

Stressors	Number of families
<i>Low income</i>	62
<i>High School Diploma or Equivalency not attained</i>	22
<i>Child with a Disability</i>	10
<i>Parent with a Disability</i>	9
<i>Young Parent (parenting under age of 21)</i>	7
<i>Housing Instability</i>	8
<i>Recent immigrant or refugee</i>	2
<i>Parent incarcerated during child's lifetime</i>	2
<i>Very low birthweight and preterm birth</i>	3
<i>Intimate Partner Violence</i>	1

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

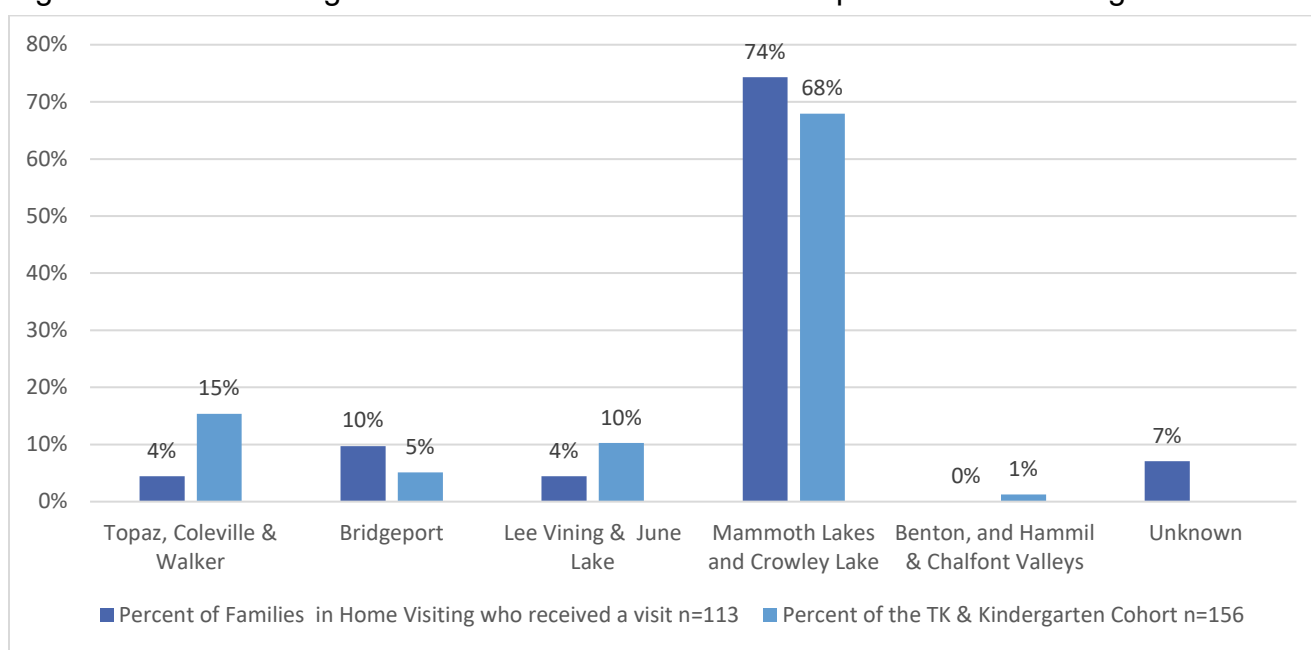


Table 6: Parenting Reflection exit Survey for families with children over 1

<i>N=4</i>	Before program average	After Program Average	Change
<i>Scale of 1 (Strongly disagree) to 5 (strongly agree)</i>			
<i>I know how to meet my child's social and emotional needs</i>	3.75	4.5	0.75
<i>I understand my child's development and how it influences my parenting responses.</i>	3.5	4.25	0.75
<i>I regularly support my child's development through play, reading, and shared time together.</i>	4.5	4.75	0.25
<i>I establish routines and set reasonable limits and rules for my child.</i>	4.5	4.75	0.25
<i>I use positive discipline with my child.</i>	4.25	4.25	0
<i>I make my home safe for my child.</i>	4.75	4.75	0
<i>I am able to set and achieve goals.</i>	3.75	4.5	0.75
<i>I am able to deal with the stresses of parenting and life in general.</i>	3.25	4	0.75
<i>I feel supported as a parent.</i>	3.5	4.5	1
<b>Total</b>			4.5

Table 7: Satisfaction exit survey

	Strongly Agree FY 19-20 N=10	Strongly Agree FY 18-19 N=26
<i>I feel comfortable talking with my parent educator.</i>	98%	94%
<i>I would recommend this program to a friend.</i>	98%	94%
<i>My parent educator gives me handouts that help me continue learning about parenting and child development.</i>	98%	94%
<i>My parent educator is genuinely interested in me and my child.</i>	98%	94%
<i>My parent educator encourages me to read books to my child.</i>	98%	88%
<i>This program increases my understanding of child's development.</i>	94%	69%
<i>My parent educator helps me find useful resources in my community.</i>	100%	75%
<i>Activities in the visits strengthen my relationship with my child.</i>	98%	69%
<i>I feel less stressed because of this program.</i>	88%	50%

**Survey comments:**

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

- Todo nos dan mucha informacion y nos explican paso a paso las cosas para mejorar toda la familia. (Everything gives us a lot of information and explains things step by step to improve the whole family.)
- Mejorar las metas que tengo para mis hijos (Improve the goals that I have for my children)
- The thing that really helped my son and myself was being able to practice new stuff, for example using scissors was one thing my son loved and I didn't know he was ready for that.
- Debbie was great! She was always very flexible with scheduling. I liked that she listened and was patient with my concerns. She always had good and productive suggestions.
- Everything, any other knowledge is helpful.
- The early help with breastfeeding was great.
- Reinforcement of milestones and helpful ways to achieve them.
- As a new mom, I didn't know what to expect. Debbie was very helpful and I always looked forward to our meetings. She provided a lot of useful information + made me feel comfortable.
- The breastfeeding support that I received helped me so much and I felt like I could count on Debbie to check in and follow up with me.
- I love that the parent educator came to our house it makes a lot easier with the little ones, and she was great giving alternative options on what to try to solve my problems.

**What could be improved about the program?**

- Que fueran mas las visitas a casa, en lugar dde 1 vez por mes. That there be more visits, instead of once a month.)
- Creo que nada todo es excelente (I think nothing, all is excellent)
- In my experience I feel like everything that was taught to my son was great and helpful. I don't have any suggestion to improvements. Just keep being an awesome program!!
- No Complains, This program is great!
- More visits
- Nothing
- Group sessions every few months
- I wish she came more frequently

**What changes have you made in your family or personal life as a result of Parents as teachers?**

- Todo nos motivan y nos dicen come hablar con los hijos. (Everything motivates us and tells us how to talk with our children.)

**Additional Comments:**

- Gracias por todo su apoyo. (Thank you for all your support.
- Debbie was incredible! She was patient, understanding, kind, and empathetic. She was a key person in helping facilitate my breastfeeding journey. I am forever grateful for this program and her support. Thank you!
- Excelente programa y excelente trabajador social mil Gracias Elvira.(Excellent program and excellent social worker Elvira)
- Thank you Elvira for making time for us, being available after my work hours. I (we) loved all the new activities and games and simply rearranging and accommodating my schedule. I feel like we both learned a lot of new things. Wish we could stay with you guys!! Thank you.
- Everything was fantastic, and this program is an asset to our community.

## Appendix II Early Literacy

Figure 1: Raising A Reader, Participation by Age 2017-18 to 2019-20

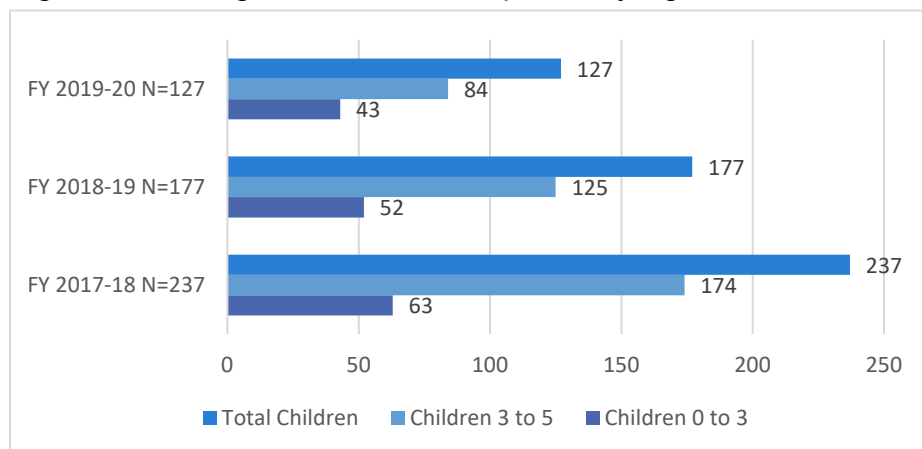


Table 1: First Book Distribution

<i><b>Program</b></i>	<i><b>Number of Books</b></i>
<i>Home Visiting &amp; Peapod</i>	600
<i>Health &amp; Safety Fairs</i>	168
<i><b>Total</b></i>	<b>768</b>

## Appendix III Peapod Playgroups

Table 1: Families Served by Location 2017-18 to 2019-20, includes duplicates between locations

<i><b>Playgroup Location</b></i>	<i><b>FY 17-18</b></i>	<i><b>FY 18-19</b></i>	<i><b>FY 19-20</b></i>
<i><b>Benton/Chalfant</b></i>	2	3	4
<i><b>Bridgeport</b></i>	12	21	12
<i><b>Crowley Lake</b></i>	45	38	10
<i><b>Lee Vining/ June Lake</b></i>	0	3	0
<i><b>Mammoth English</b></i>	55		
<i><b>Mammoth Spanish</b></i>	4	38 (bilingual)	42 (bilingual)
<i><b>Walker</b></i>	4	15	8
<i><b>Total</b></i>	122	118	76

Table 2: Surveys, n=13

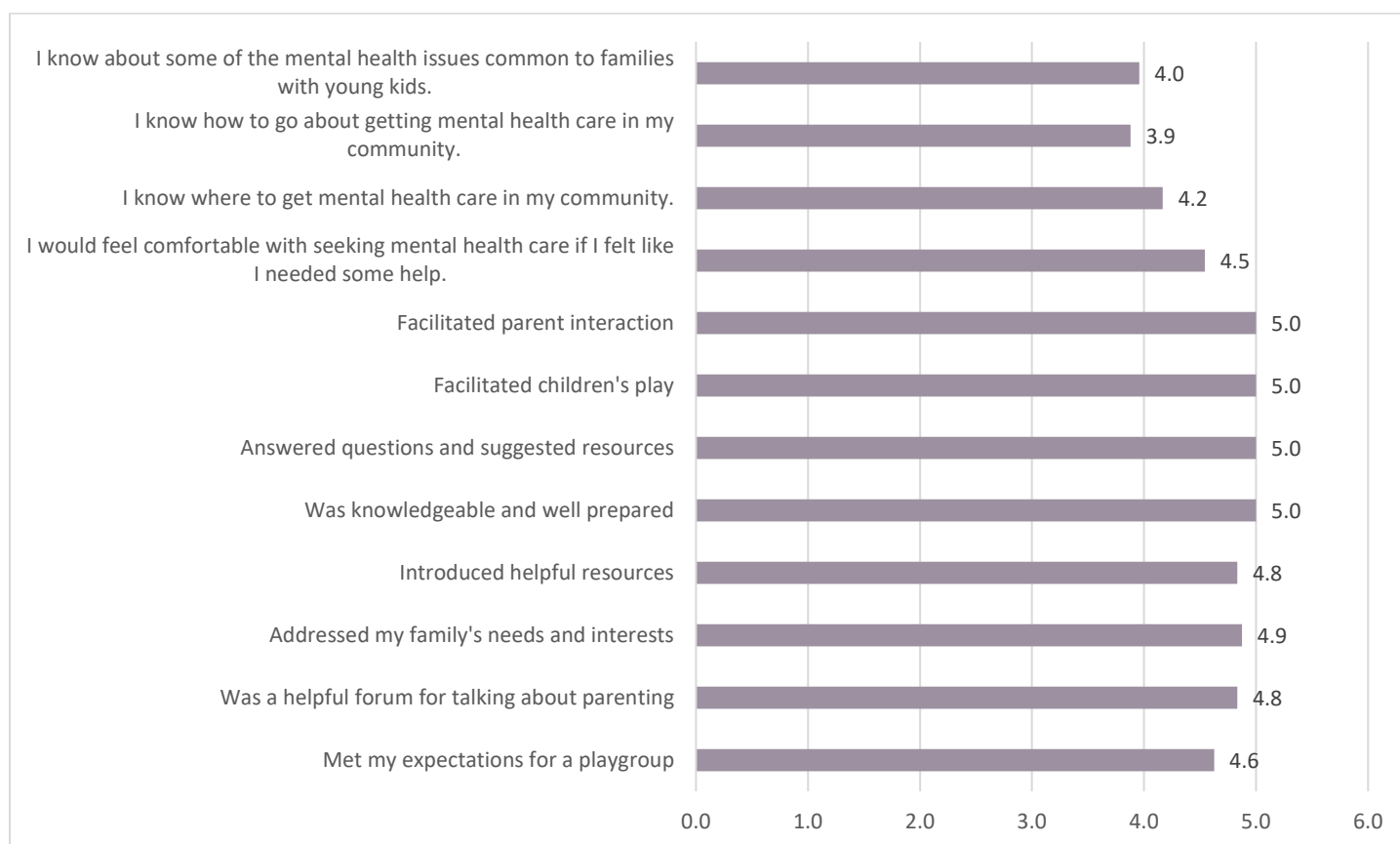




Table 3: Survey Demographics (numbers differ between categories as not all surveys answered all questions) n=13:

Race/ethnicity	White: 12 Hispanic: 1
Language	English 13 Spanish 1 (also checked English)
Age	16-25: 1 26-40: 9 41-59: 2 60+: 1
Sex	Female: 12 Male: 1

**Parent Survey Comments:**



- Playing and sharing
- Songs, Kids, Learning to play together, practice sharing, talking w/ parents, Spanish and parachute.
- Parent interactions, singing songs
- Social interactions for kids.
- Great interaction for kids with other kids. Great selection of play toys and learning activities.
- Great songs and parent time too.
- Parent and children interaction.
- Regular place to go with routine.
- Great Toys
- Free play, songs, safety
- Attendance, toys, free play
- Socialization for my daughter



**Parent Suggestions:**

- Peapods are great. We love coming to them.
- Keep going, year around
- Music
- None, we love Peapod
- More of the same. More baby signs.
- Maybe longer playgroups - 1 hour goes fast
- Musical tools for songs to spark interest.
- More outreach, bring in more children

## Appendix IV, Childcare Quality

- Interactions between teachers and children
- How teachers meet and support the developmental needs of children
- The health and safety of the classroom
- 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

2019-20 Mono Alpine Rated Childcare & Education Sites participating sites opting to be rated	
<p>Highest Quality</p> 	<ul style="list-style-type: none"> <li>• Lee Vining IMACA Head Start/ State Preschool</li> </ul>
<p>Exceeding Quality</p> 	<ul style="list-style-type: none"> <li>• Coleville IMACA State Preschool</li> <li>• Edna Beaman Elementary Preschool</li> <li>• Kindred Spirits</li> <li>• Mammoth IMACA Head Start/ State Preschool</li> <li>• Mammoth Lakes Lutheran Preschool</li> <li>• Mammoth Kids Corner</li> <li>• Mountain Warfare training Center Child Development Center</li> <li>• Alpine Early Learning Center (Alpine County)</li> </ul>
<p><b>TBD</b></p> <p>Ratings were not completed due to COVID 19 restrictions</p>	<ul style="list-style-type: none"> <li>• MCOE Inclusive Preschool</li> <li>• Maria Garcia Family Childcare</li> </ul>

## Appendix V Child Health

Table 1: Oral Health Services Provided





	<i>Oral Health Education</i>	<i>Fluoride Varnish</i>
<b><i>FY 2019-20 Total</i></b>	<b>12</b>	<b>9</b>
<i>FY 2018-19 Total</i>	114	114
<i>FY 2017-18 Total</i>	102	155

Table 2: Safe Kids Activities

**County-Wide Birth to 5 Health & Safety Fairs were cancelled due to COVID 19**  
**Car seat checks at Mammoth Lakes Police Department and Helmet distribution at State Farm**  
**continued.**

## Appendix VI Results and Indicators

Quick Look: 3 Year Trend (indicator numbers refer to pages 45-47)

% of indicators	Trend	Indicator
72%		<ul style="list-style-type: none"> <li>1 Peapod satisfaction</li> <li>3 Children in home visiting</li> <li>4 Children screened for developmental delay</li> <li>5 Children in high quality childcare</li> <li>7 Childcare spaces</li> <li>8 Incoming kindergartners who attended preschool*</li> <li>9 Children ready for school</li> <li>10 Families who attended kindergarten round up</li> <li>11 Literacy program participation</li> <li>13 Kindergartners assessed at entry</li> <li>14 Breastfeeding successful*</li> </ul>
		<ul style="list-style-type: none"> <li>18 Kindergartners with untreated dental problems *</li> </ul>
		<ul style="list-style-type: none"> <li>14 Parenting education participation*</li> </ul>
28%		<ul style="list-style-type: none"> <li>2 Infants in Home Visiting</li> <li>6 Childcare provider permit attainment</li> <li>12 Preschool slots</li> <li>16 Expected BMI*</li> <li>17 Annual dental screening*</li> </ul>

\*Less than 60% reporting rate

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

Indicator	Investment area	2017-18	2018-19	2019-20
<b>1. Peapod survey data yields 100% satisfaction or an average of 4-5 on a scale of 1-5 that the playgroup met participant expectations</b>	Family Behavioral Health		Yes	Yes
<b>2. Number and percent of children prenatal to age 1 whose parents accessed Home Visiting</b>	Home Visiting	New Indicators	66%	48, 35%
<b>3. Number and percent of children prenatal to age 5 whose parents accessed Home Visiting.</b>			22%	207, 30%
<b>4. Number and percent of children 6 months to 5 years old screened for developmental delays.</b>	Home Visiting & Childcare Quality	29%	35%	232, 33%
<b>5. 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.</b>		13%	28%	127, 25%
<b>6. Number and percent of licensed child care providers in Mono County advancing on the Child Development Permit Matrix.</b>	Childcare Quality	4%	0	0
<b>7. Number and percent of licensed center and family child care spaces per 100 children.</b>		37%	47%	322, 46%

Sources:

1. Peapod Program Parent Surveys
2. Home Visiting Participation 48/ 137 Department of Finance 2019 Birth projection from January 2020
3. Home Visiting Participation 207/ 693 US Census population estimate children 0-5 in Mono County
4. Children in commission-run programs who received a developmental screening—Home Visiting (59) & children in child care programs participating in quality programs (173) 232/ 693 US Census population estimate children 0-5 in Mono County (67% reporting rate as 466 of the 693 birth-5 population is enrolled in home visiting, playgroups, or with a provider who participates in the Childcare Quality System, includes duplication). Screened is defined as a completed evidence and research-based formal screening tool like the Ages and Stages Questionnaire. While overall population screening rates declined, Home Visiting and Childcare Quality both increased rates of screening.
5. Children served at sites with a rating of 3 or higher 127/ 693 US Census population estimate children 0-5 in Mono County (100% reporting rate)
6. Childcare Quality System data 0 of 32 participating providers (88% reporting rate, the percent of sites participating in the Childcare Quality System)
7. Number of licensed child care spaces available to Mono County children birth-5 on the IMACA Resource and Referral list, 322 /693 US Census population estimate children 0-5 in Mono County (100% reporting rate)

Result I continued: <i>Mono County children 0-5 are educated to their greatest potential.</i>				
Indicator	Investment area	2017-18	2018-19	2019-20
8. Number and percent of children who have ever attended a preschool, Pre-K, or Head Start program by the time of Kindergarten entry.		66%	76%	52, 87%*
9. Number and percent of children “ready for school” upon entering Kindergarten.		49%	51%	77, 65%
10. Number and percent of children whose parents attended Kindergarten and TK Round Up.	School Readiness	54%	73%	98, 82%
11. Number and percent of children birth to 5 accessing funded literacy activities.		New Indicators	47%	334, 48%
12. Number and percentage of age-eligible children for whom a preschool slot is available.			51%**	119, 43%
13. Number and percent of entering Kindergartners assessed for school readiness at entry.		100%	98%	117, 98%
14. 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	44%	40%	304, 44%*

\* Under 60% reporting rate

\*\*updated from last year to reflect the number of preschool specific slots rather than all possible slots for preschool aged children.

#### Sources:

- Incoming Kindergarten Parent Surveys indicating enrollment in preschool or pre-K--52/60 surveys. The reporting rate is 50%, 60/120 kindergarten students.
- In-kindergarten Brigance screens of students assessed as within the typical range and above the gifted cutoff 77/117 assessed. 98% reporting rate 117 /120 kindergarten students. Previous year's reporting rates: 2017, 100%; 2018, 98%.
- Children participating in Kindergarten and TK Round Up 87/120 number of children on the first day of kindergarten, school district data.
- Number of children enrolled in Raising a Reader (127) and or Home Visiting (207), includes duplicates 334/ 693 US Census population estimate children 0-5 in Mono County.
- The number of available preschool slots in the County based on the number of slots licensed to age-specific 3-4 year old classrooms 119/ 280-- Five-year Kinder and TK average (2014-2018) multiplied by 2 to get a projected number of 3 & 4 year olds. The decrease from 18/19-19/20 represents the closing of Edna Beaman Elementary Preschool.
- Number of Brigance screens completed by the school district 117/ 120 kindergarten students.
- Children in commission-run programs with child-development education components (Home Visiting 207 and Peapod 97) 304/ 693 US Census population estimate children 0-5 in Mono County. 44% reporting rate, as data is limited to commission run programs to ensure an unduplicated count.

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

Indicator	Investment Area	2017-18	2018-19	2019-20
15. Number and percent of children where breastfeeding is successfully initiated and sustained.	Home Visiting	Not available	86%	78, 89%*
16. 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.		Not available	81%	277, 76%*
17. Number and percent of children ages 1 or older who receive annual dental screenings.	Oral Health	59%	51%	294, 42%*
18. Number and percent of children at Kindergarten entry with untreated dental problems.		30%	33%	9, 10%*

\*Under 60% reporting rate. To move to population-based data for a higher reporting rate, research suggests would mean a shift to considering only prenatal indicators.

### Sources:

15. Sierra Park Pediatrics number of Mono County children still breastfed at visits to pediatrics up to 1 month of age. Children seen up to 1 month 78/ 90 patients. 57% reporting rate, 78/137 births in 2019 Department of Finance projection January 2020. 2017-18 data not able to be collected due to a change in record keeping at Mammoth Hospital.
16. Sierra Park Pediatrics number of Mono County 2-5 year olds seen in 2018-19 within the expected range of weight and height 277 of 366 patients. 53% reporting rate, 366 patients/693 US Census population estimate children 0-5 in Mono County. 2017-18 data not able to be collected due to a change in record keeping at the hospital.
17. Number of children 1 year to 5.99 years old seen annually for a screening in the Mammoth Hospital Dental Clinic 294/693 US Census population estimate children 0-5 in Mono County. 45% reporting rate, clients seen at Mammoth Hospital Dental Clinic 318/ 693 Census estimated children 0-5. Note: the number of patients in the age range declined by 134 clients (from 452 to 318) between FY 2017-18 and FY 2019-20.
18. Oral Health Assessments turned into the school indicating untreated dental problems 9/108 completed oral health assessments. 87% reporting rate from the SCOHR school reporting system oral health assessments 108/ 124.

## Appendix VII Fiscal Overview

Revenue		Amount		
Prop. 10 Tax Revenue		\$76,204		
Small County Augmentation		\$250,748		
Prop 56 apportionment		\$22,885		
Mono County Home Visiting		\$150,000		
CalWORKS HVI		\$6,830		
SMIF (Surplus Money Investment Fund)		\$343		
Mono County Social Services CAPIT (High Needs Home Visiting)		\$32,257		
IMPACT		\$83,799		
Region 6 T&TA Hub		\$178,351		
CDBG Administration		\$7,951		
CDBG		\$195,384		
CDE State Preschool Block Grant		\$17,039		
Equitable Learning Opportunities		\$23,217		
Mono County Behavioral Health Peapod Program		\$35,807		
Miscellaneous		\$26,016		
Interest on Mono County First 5 Trust Fund		\$12,257		
<b>Total Revenue</b>		<b>\$1,119,088</b>		
Expense	Amount	% of Expenditures	% of Discretionary Funds	5-year Strategic Plan % of Discretionary Funds
Home Visiting	\$324,789	30%	37%	33%
Childcare Quality	\$536,836	49%	1%	3%
Emergency Fund	\$25,850	2%	7%	-
Operations/Support/Evaluation	\$68,312	6%	19%	39%
Oral Health	\$7,412	1%	2%	1%
Peapod	\$36,507	3%	0%	0
Safe Kids Coalition	\$7,000	1%	2%	2%
School Readiness	\$49,241	5%	14%	22%
Systems Building	\$29,172	3%	8%	-
Total Expenses	\$1,085,119			
Total Revenue	\$1,119,088			
Net Revenue	\$33,969			
<b>Fund Balance</b>	<b>Amount</b>			
Fund Balance Beginning	\$557,717			
Fund Balance End	\$591,686			
Net Change in Fund Balance	\$33,969			



The 2019 California Child Care Portfolio, the 12th edition of a biennial report, presents a unique portrait of child care supply, demand, and cost statewide and county by county, as well as data regarding employment, poverty, and family budgets. The child care data in this report was gathered with the assistance of local child care resource and referral programs (R&Rs). R&Rs work daily to help parents find child care that best suits their family and economic needs. They also work to build and support the delivery of high-quality child care services in diverse settings throughout the state. To access the full report summary and county pages, go to our website at [www.rnnetwork.org](http://www.rnnetwork.org).

PEOPLE <sup>1</sup>	COUNTY			STATE		
	2016	2018	CHANGE	2016	2018	CHANGE
Total number of residents	13,785	13,887	1%	39,354,432	39,864,538	1%
Number of children 0-12	2,069	2,001	-3%	6,631,621	6,578,476	-1%
Under 2 years	287	274	-5%	982,688	941,215	-4%
2 years	149	133	-11%	498,782	489,567	-2%
3 years	126	152	21%	503,064	503,509	0.1%
4 years	138	150	9%	503,461	503,657	0.04%
5 years	144	133	-8%	518,282	506,494	-2%
6-10 years	861	807	-6%	2,596,934	2,576,958	-1%
11-12 years	364	352	-3%	1,028,410	1,057,076	3%

LABOR FORCE <sup>2*</sup>	COUNTY			STATE		
	2016	2018	CHANGE	2016	2018	CHANGE
Two-parent families, both parents in labor force	474	430	-9%	1,667,628	1,673,759	0.4%
Single-parent families, parent in labor force	280	176	-37%	966,506	957,871	-1%

\*Due to the availability of data in the U.S. Census Bureau's ACS, these numbers do not include unmarried two-parent families or families with same-sex parents

POVERTY <sup>2</sup>	COUNTY			STATE		
	2016	2018	CHANGE	2016	2018	CHANGE
Number of people living in poverty	684	1,378	101%	5,525,524	4,969,326	-10%
Children 0-5 living in poverty	95	114	20%	608,247	499,726	-18%
Children in subsidized care <sup>3</sup>	112	121	8%	315,100	337,264	7%

**FAMILIES IN POVERTY IN 2018<sup>2</sup>**

COUNTY	STATE
<b>7%</b>	<b>14%</b>

### CHILD CARE AND FAMILY BUDGETS<sup>4, 8</sup>

Income Eligible Family Without Subsidy <sup>5</sup>	Income Eligible Family With Subsidy <sup>5</sup>	Median Family Income <sup>2</sup>
<p><b>\$54,027 Annual Income</b></p> <p>29% 18% 22% 31%</p> <p>Housing Infant/toddler All other family needs Preschooler</p>	<p><b>\$54,027 Annual Income</b></p> <p>29% 10% 61%</p> <p>Housing Family Fee All other family needs</p>	<p><b>\$90,347 Annual Income</b></p> <p>17% 11% 13% 58%</p> <p>Housing Infant/toddler All other family needs Preschooler</p>

### AGE/TYPE

CHILD CARE SUPPLY <sup>6</sup>	LICENSED CHILD CARE CENTERS			LICENSED FAMILY CHILD CARE HOMES			CHILD CARE REQUESTS <sup>7</sup>	
	2017	2019	CHANGE	2017	2019	CHANGE		
Total number of spaces	234	234	0%	114	100	-12%	Under 2 years	27%
Under 2 years	36	36	0%				2-5 years	50%
2-5 years	198	198	0%				6 years and older	23%
6 years and older	0	0	0%					
Total number of sites	9	9	0%	12	11	-8%		

**25%**

Child care programs participating in the Child Care Food Program

**56%**

Child care centers with one or more federal/state/local contracts

### SCHEDULE AND COST

CHILD CARE SUPPLY	LICENSED CHILD CARE CENTERS	LICENSED FAMILY CHILD CARE HOMES	CHILD CARE REQUESTS	
Full-time and part-time spaces	100%	92%	AGES	FULL-TIME
Only full-time slots	0%	8%	Under 2 years	100%
Only part-time slots	0%	0%	2 years	0%
Sites offering evening, weekend or overnight care	22%	55%	3 years	100%
Annual full-time infant care <sup>8</sup>	\$13,231	\$12,028	4 years	100%
Annual full-time preschool care <sup>8</sup>	\$9,733	\$11,138	5 years	0%
MAJOR REASONS FAMILIES SEEK CHILD CARE <sup>9</sup>			REQUESTS FOR CARE DURING NONTRADITIONAL HOURS	
<b>95%</b> Employment	<b>9%</b> Parent seeking employment	<b>5%</b> Parent in school or training	Evening / weekend / overnight care	8%

### LANGUAGE

CENTERS WITH AT LEAST ONE STAFF SPEAKING THE FOLLOWING LANGUAGES <sup>9</sup>	LANGUAGE SPOKEN AT HOME
English 100%, Spanish 33%	English only 75%
FAMILY CHILD CARE PROVIDERS SPEAKING THE FOLLOWING LANGUAGES <sup>9</sup>	Spanish 22%
Spanish 64%, English 55%	Asian/Pacific Island language 2%
	Another language 2%

1. CA Department of Finance Population Projections 2018
2. American Community Survey 2018 1-year estimates. Poverty is defined using the federal poverty guidelines.
3. CA Department of Education CDD 801-A October 2018, CA Department of Social Services CW115, October 2018
4. U.S. Housing and Urban Development rent for 2-bedroom 50th percentile
5. 70% of 2018 State Median Income for a family of three
6. Resource and referral (R&R) databases 2019
7. R&R child care referrals April/May/June 2019
8. 2018 Regional Market Rate Survey, Network estimate
9. Percentages may exceed 100% when multiple options are chosen

**For more information about child care in MONO COUNTY:**

**IMACA Community Connections for Children**  
**800-317-4700**  
**www.imaca.net**