



ANNUAL EVALUATION REPORT

2023-24



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First 5 Mono Highlights 2023-24

Each year, First 5 Mono summarizes information on the progress of each investment and related indicators from our Strategic Plan (indicated by reference number “SP”). Highlights are included below.

Profile of Programs and Families



- **Investment:** In 2023-24, First 5 Mono invested \$1,324,722, including \$1,214,299 across nine programs and systems building efforts. This is a 20% increase from last year. (*Source: F5CA Annual Report-1*).
- **Reach:** First 5 Mono served 1075 individuals (duplicated), including 614 children, 409 parents and caregivers, and 46 providers. Child safety (n = 135), home visiting programs (n = 104) and Childcare Quality System (n = 112), reached 351 children, or 61% of the 575 children under five in the county.
- **Ethnic representation:** Amongst those children enrolled in Home Visiting 104 (70%) were non-Latiné and 45 (30%) were Latiné or two or more races, representing fewer Latiné as children countywide. (*Source: F5Mono Home Visiting Data, Department of Finance*).
- **Geographic representation:** Over 64% of participating children in the home visiting program came from Mammoth Lakes and Crowley Lake, proportionate to the number of kindergarten students living in these geographic locales. (*Source: F5Mono collected School District enrollment data and F5 Mono Home Visiting Data.*)

Improved Family Functioning



- **Home Visiting:**
 - First 5 Mono supported an evidence-based home visiting program: Welcome Baby! and Healthy Families. This program served 234 individuals, including 104 children and 130 parents, representing 19% of the county’s babies (SP#2), and 18% of county’s children five and under (SP#3).
 - Almost all (83%) of the 86 home visited children ages six months to five years received a developmental ASQ screening (SP#4a). Across the home visiting program and the Child Quality Care System Initiative, 181 children received ASQ screening, representing 31% of county children under five years (SP#4b).
 - In total, the parents of 159 (unduplicated) children engaged in First 5 Mono programs (Home Visiting and Peapod) to improve knowledge, understanding, and engagement in their children’s development and physical and mental health (SP#14b). This equates to 28% of the county’s children under five.
 - 65 newborns were reportedly being breastfed as of their first month check-up, representing 94% of all newborns seen at Sierra Park Pediatric Clinic (SP# 15).
 - 230 children, representing 77% of all 0-5 children seen at Sierra Park Pediatric Clinic, had good BMI (in expected range of weight, accounting for height and age; SP#16).

Improved Child Development



- **Quality Child Care:**
 - In terms of capacity, only 31% (177) of the county’s children had a licensed center or a family childcare space available to them (SP#7).
 - First 5 Mono’s Childcare Quality System Initiative served 35 licensed providers, and 112 children enrolled in those sites.
 - Within the Initiative, 35 licensed providers participated in Quality Improvement Initiatives (SP#6a), and five (14%) moved up on the Child Development Permit Matrix (SP#6b).
 - Additionally, amongst the 112 children enrolled in licensed care, 26% (n = 29) were cared for in a licensed setting that was ranked as *moderate-to-high* on the quality index (SP#5).

-
- Amongst children in licensed settings participating in the Initiative, 112 (100%) children were screened for developmental delays (SP#4). Amongst children in *all* types of settings in the Initiative which includes home visits and duplicates, 198 children (68%) were screened for developmental delays.
 - **Family Behavioral Health — Peapod Playgroups:**
 - Peapod Playgroups served 132 individuals, including 54 adults and 77 children, representing 13% of the county’s children under five (SP#19). All of the children’s parents (100%) received child-development and parenting education (SP#14c).
 - Of the 19 Peapod families who responded to the Parent Survey, 100% were satisfied with Peapod Playgroups (SP#1), including sessions meeting expectations, having knowledgeable facilitators, the presentation of helpful resources, and finding the program to be helpful as a parenting forum. Additionally, 100% would feel comfortable seeking mental health care if they felt like they needed it.

School Readiness: Raising a Reader, Kindergarten and TK Round Up

- According to the fall 2023 Kindergarten Readiness Assessment 47 children or 48% of all incoming kindergarteners had a formal early learning experience, including preschool, Pre-K, or a Head Start (SP#8).
- In terms of early literacy programs, 254 unduplicated children accessed early literacy activities through First 5 Mono programs, such as home visiting, Peapod, and Raising a Reader. This equates to 44% of the county population under five (SP#11b).
- Amongst the 254 children served, 95 children (37%) accessed early literacy activities through Raising a Reader (SP#11a).
- Most (85%) of incoming transitional kindergarten and new kindergarten children's parents engaged in the Kindergarten and TK Round Up Transition to School Activities (SP#10).
- In fall 2023, 101 children (94%) of incoming kindergarten students in Mono County were assessed for kindergarten readiness (SP#13). Of these, 52% were ready in *Kindergarten Academics*, 35% were ready in *Self-Regulation*, and 53% in *Social Expression* (SP#9) with an overall readiness rate of 26%.

Improved Child Health



- **Oral Health Screenings:**
 - With respect to dental screenings, 173 children received a dental screening, representing 89% of all children seen at the Sierra Park Dental Clinic (SP#17a), and 30% of the county population (SP#17b).
 - Based on the Kindergarten Oral Health Assessment, 4% of kindergarten students (n = 3 of 76) had untreated dental problems when they entered kindergarten (SP#18).
 - **Child Safety**
 - Bike helmets save lives. In partnership with Safe Kids California, First 5 Mono provided 135 children – 23% of the county population under five – with a bicycle helmet (SP#20).
-

First 5 Mono Dashboard 2023-24

The following presents a high-level overview of First 5 Mono's progress on their key strategic plan (SP) indicators. Progress is gauged based on whether the change from the previous year shows: a worsening of 5% or more = ●, no substantive change (within 0-4%) = ●, improvement by 5% or more = ●, or a sustained positive trend at or above 90% = ●.

Program	SP #	Strategic Plan Indicator	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	% Change	Status
Improved Family Functioning										
<div>Home Visiting</div> <div><div>– Welcome Baby</div><div>– Healthy Families</div></div>	2	Percentage of children prenatal to age one in Mono County whose parents accessed Home Visiting.	67%	38%	48%	37%	33%	19%	-42%	<div></div>
	3	Percentage of children prenatal to age five in Mono County whose parents accessed Home Visiting.	22%	30%	25%	23%	26%	18%	-30%	<div></div>
	4a	Percentage of Home Visiting participants’ children ages six months to five screened for developmental delays.	90%	89%	81%	92%	90%	83%	-8%	<div></div>
	4b	Percentage of children ages six months to five in Mono County screened for developmental delays.	35%	33%	23%	37%	39%	34%	-12%	<div></div>
	14b	Percentage of Mono County children whose parents received child development, parenting education through Home Visiting and Peapod Playgroups.	39%	44%	18%	33%	31%	28%	-9%	<div></div>
	15	Percentage of infants in Mono County with whom breastfeeding was initiated and sustained (<i>Sierra Park Pediatrics</i>).	86%	89%	85%	88%	88%	94%	+7%	<div></div>
	16b	Percentage of children ages 0-5 years in Mono County in the expected range of weight for their height and age (<i>BMI</i> ; <i>Sierra Park Pediatrics</i>).	81%	76%	76%	75%	78%	77%	-1%	<div></div>
Improved Child Development										
<div>Childcare Quality</div> <div><div>– Childcare Quality System</div></div>	7	Percentage of licensed Center and Family Childcare spaces per 100 Mono County children.	47%	46%	42%	47%	32%	31%	-5%	<div></div>
	5	Percentage of children served in home childcare settings and childcare centers that exhibited moderate-to-high- quality, as measured by a quality index.	91%	64%	67%	53%	85%	26%	-69%	<div></div>
	6a	Number of licensed childcare providers in Mono County participating in Quality Systems.	—	32	34	27	29	35	+20%	<div></div>
	6b	Percentage of licensed childcare providers in Mono County advancing on the Child Development Permit Matrix.	0%	0%	15%	30%	6.9%	14.3%	+107%	<div></div>
	4	Percentage of children in <i>licensed</i> early learning settings who were screened for developmental delays.	—	—	—	66%	89%	100%	+12%	<div></div>

Program	SP #	Strategic Plan Indicator	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	% Change	Status
		Percentage of children in <i>all</i> early learning settings who were screened for developmental delays.	—	—	—	48%	72%	68%	-6%	●
Family Beh. Health – Peapod Playgroups	19	Percentage of children ages prenatal to age five in Mono County served through Peapod playgroups.	18%	14%	3%	11%	12.7%	13.4%	+6%	●
	14c	Number of children in households where parents and other family members in Peapod Playgroups received child development and parenting education.	123	97	19	61	69	77	+12%	●
	1	Percentage of parents who reported that Peapod Playgroups met their expectations.	100%	100%	100%	100%	100%	100%	No Change	●
School Readiness – Early Literacy – Transition to School	12	Percentage of age-eligible children in Mono County for whom a preschool slot was available.	60%	50%	36%	41%	46%	38%	-18%	●
	8	Percentage of kindergarten students in Mono County who have ever attended a preschool, Pre-K, or Head Start program.	76%	87%	—	59%	50%	48%	-4%	●
	11a	Percentage of children ages birth to five in Mono County who accessed funded Early Literacy activities through Raising a Reader. ¹	36%	38%	33%	29%	27%	37%	+36%	●
	11b	Percentage of children ages birth to five in Mono County who accessed funded Early Literacy activities through First 5 Mono programs (HV, Peapod, Raising a Reader).	47%	48%	27%	46%	46%	44%	-3%	●
	10	Percentage of children in Mono County whose parents attended Transition to School activities (Kindergarten and TK Round Up).	73%	82%	57%	94%	89%	85%	-4.9%	●
	13	Percentage of children in Mono County assessed for school readiness at kindergarten entry.	98%	98%	—	99%	100%	94%	-6%	●
	9	Percentage of children in Mono County “ready for school” in <i>Kindergarten Academics</i> upon entering kindergarten.	51%	65%	—	52%	65%	52%	-19%	●
Improved Child Health										
Oral Health – Screenings	17a	Percentage of children ages one or older who received annual dental screenings (<i>Sierra Park Dental Clinic</i>).	91%	92%	98%	89%	92%	89%	-3%	●
	18	Percentage of children in Mono County who entered kindergarten with untreated dental problems.	33%	8%	30%	—	40%	4%	-90%	●
Child Safety – Bike Helmets	20	Percentage of children birth to five provided a safety helmet through Safe Kids.	31%	25%	5%	15%	17%	23%	+42%	●

¹ Denominator: Children in First 5 Mono early literacy programs.

Introduction



FIRST 5 MONO OVERVIEW

The California Children and Families Act (also known as Proposition 10 or “First 5”) was enacted in 1998, which increased tobacco product taxes to fund services promoting early childhood development from prenatal to age five. The Mono County Children and Families Commission (“First 5 Mono”) was created in 1999 as a County Commission by the Mono County Board of Supervisors to:

- Monitor 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

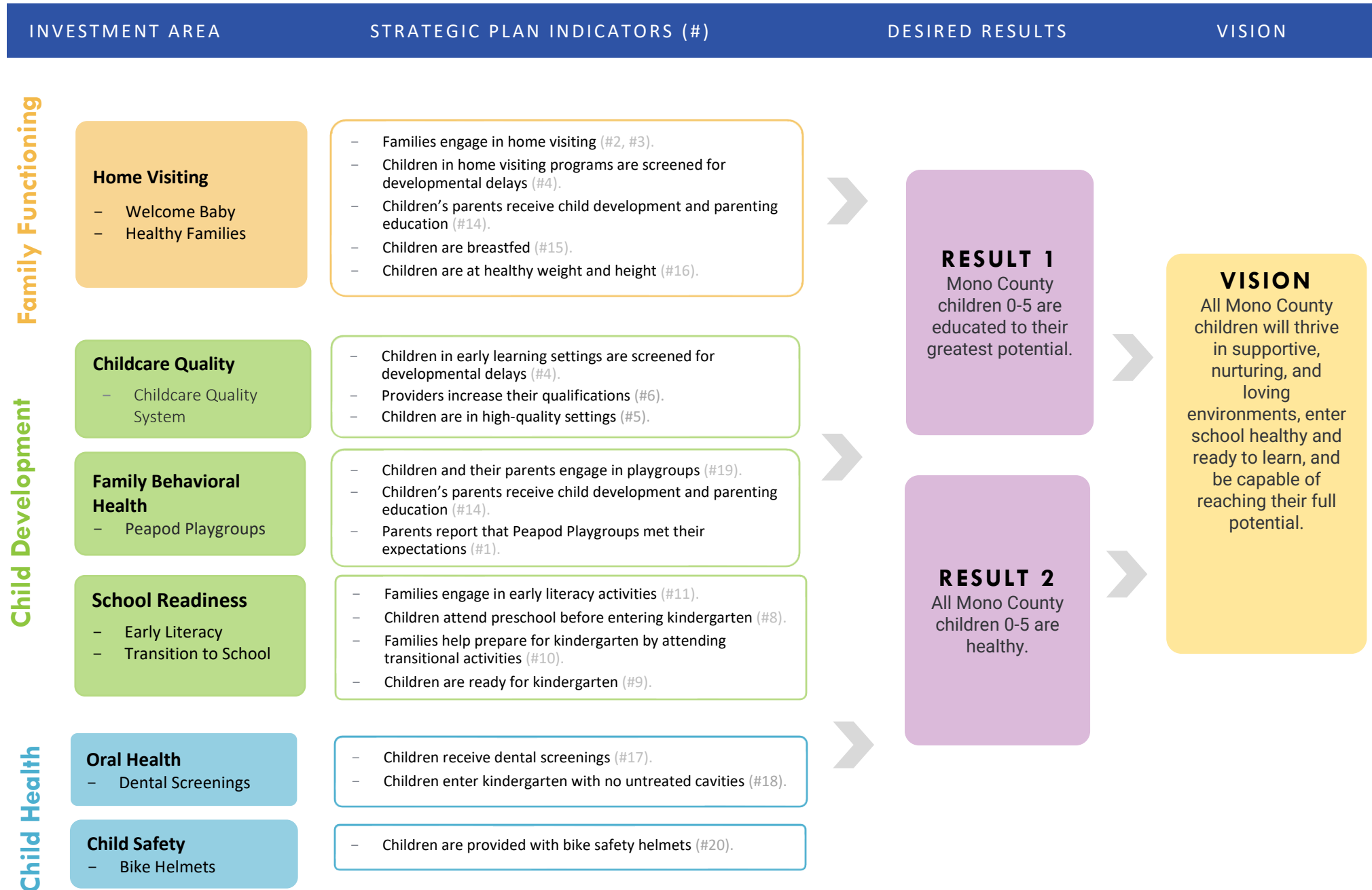
First 5 Mono’s vision for all children 0-5 and their families in the county is that *All Mono County children will thrive in supportive, nurturing, and loving environments; enter school healthy and ready to learn; and be capable of reaching their full potential.*



To promote that vision, First 5 Mono’s mission is that *First 5 Mono County will be a leader in a community-oriented and family-centered support network for children prenatal to age five and their families, and is charged with improving outcomes in children’s health, safety, and learning.* The 2019-2024 Strategic Plan guides Commission investments and helps meet statutory requirements by describing how Proposition 10-fund expenditures seek to promote a comprehensive and integrated system of early childhood development services. The Strategic Framework on the following page describes the efforts funded in order to promote the mission and vision.

In FY 2023-24, First 5 Mono received revenue from First 5 California in the amount of \$380,897 which included tobacco tax allocations and Small Population County Funding Augmentations (SPCFA). Partner agencies like First 5 California, the California Department of Education (CDE), California Department of Public Health, and Mono County contributed additional funding. The 2023-24 Evaluation Report meets state and local requirements and evaluates funded programs for the purposes of guiding quality improvement and fund allocation. Organized around First 5 California’s three investment areas, this report includes descriptions of each funded program, the status of the Strategic Plan 2019-2024 indicators, and conclusions.

FIRST 5 MONO STRATEGIC FRAMEWORK

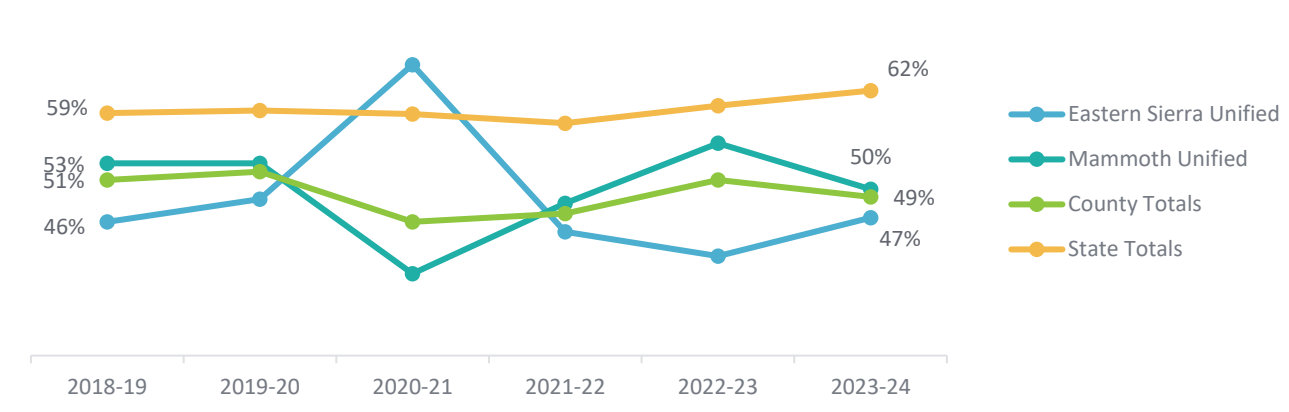


Countywide Profile

The US Census Bureau estimates for Mono County show that the county population of children under six was 575, up from 545 in 2022. First 5 Mono uses the population under five as its denominator rather than those under six because investments serve children under five.

Childhood Poverty. Data regarding childhood poverty is unstable for Mono County due to its small sample size. Therefore, as a proxy, this report presents data on the percentage of students who are eligible for free or reduced-price lunch.

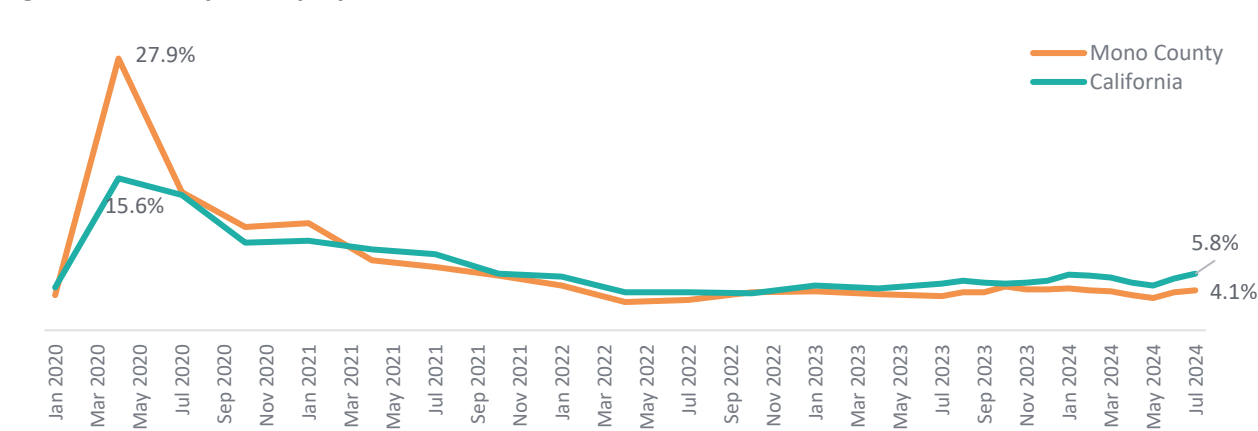
Figure 1. Percentage of Children Eligible for Free and Reduced Cost Lunch, 2018-2023



Source: California Department of Education, DataQuest, 2025.

Unemployment. The rate of unemployment in Mono County was 4.1%, slightly lower than the 5.8% statewide.

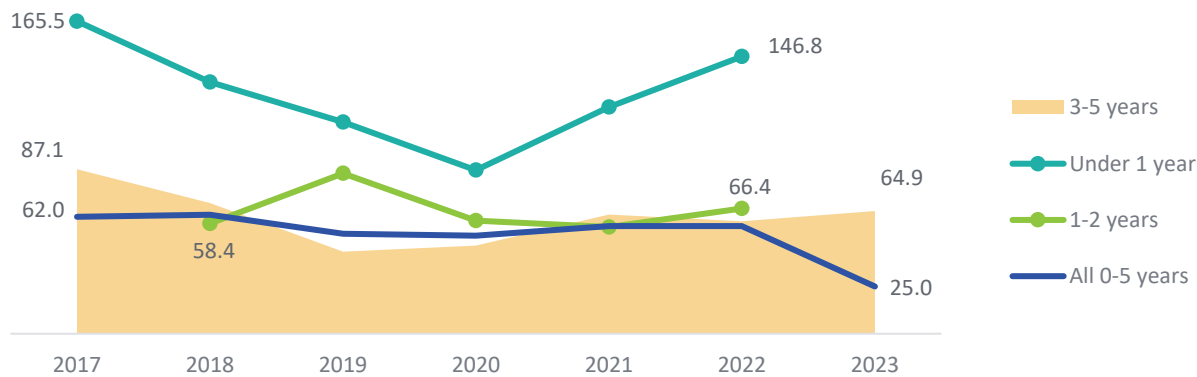
Figure 2. Monthly Unemployment Rates, 2020-2023



Source: Labor Market Information Resources and Data, California Employment Development Department. County Unemployment Rates, by Month, 2020, 2021, 2022, 2023, 2024.

Child Welfare. In 2023, there were 25 children ages 0-5 who were the subject of a child maltreatment allegation, less than half the 57 allegations the two previous years. However, the prevalence of maltreatment allegations is masked for children 0-1 and 1-2 so the total may not include all allegations for 2023, possibly due to small sample size.

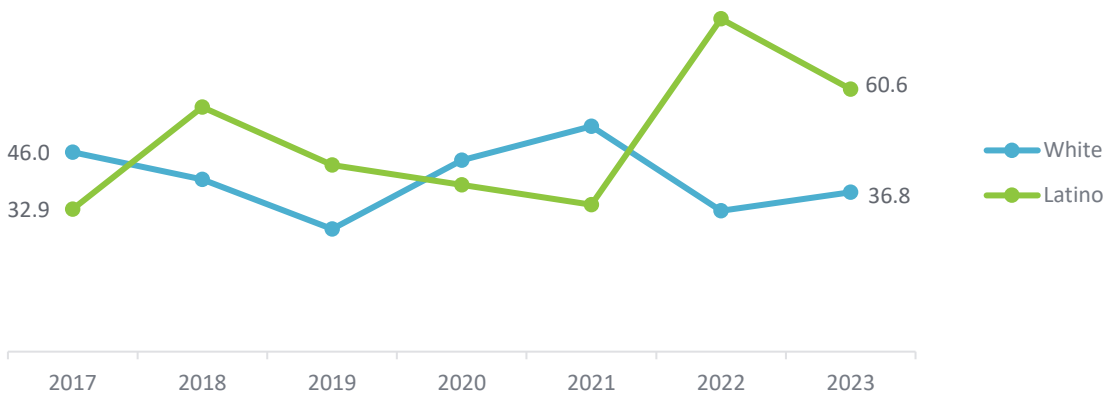
Figure 3. Incidence of Maltreatment Allegations per 1,000 County Children (0-5), by Age



Source: California Child Welfare Indicators Project (CCWIP). Child Maltreatment [Counts](#) and Allegation [Rates](#) by Age, 2017-2024. Data for children 0-1 in 2017 and 0-1 and 1-2 are unstable and are thus not shown. Population counts provided by CCWIP, from the Dept of Finance, and includes children 0-5 (under 6). Note: Historical counts update 6/18/2024.

In addition to the child’s age, the prevalence of child maltreatment allegations varies by child ethnicity. In 2017, non-Latiné children ages 0-17 were about 40% more likely to experience child maltreatment allegations than Latiné children. That trend reversed by 2018 and held through 2019, before reversing again in 2020-21. Currently, the allegations prevalence of 60.6 per 1,000 Latiné children is nearly 66% more than the rate for non-Latiné children (36.8).

Figure 4. Incidence of Maltreatment Allegations per 1,000 Children (0-17) in Mono County, by Ethnicity



Source: California Child Welfare Indicators Project (CCWI). Child Maltreatment [Allegation](#) Rates By Ethnicity, 2017-2024. Note: Historical counts update 6/18/2024.

Profile of First 5 Mono Programs and Clients

The Commission's vision is that all county children reach their full potential. The efforts toward this vision require support and promotion of equitable access to services. To this end, First 5 Mono staff continued to participate in Racial Equity, Diversity, and Inclusion work. As part of the nationwide and local movements to build systemic equity, First 5 Mono staff took part in trainings with the focus shifting from individual to agency and community levels. To evaluate progress toward equitable accessibility of First 5 Mono programs, this report highlights demographic characteristics of First 5 Mono program participants.

PROGRAM POPULATION SERVED AND EXPENDITURES

In FY 2023-24, First 5 Mono served 963 individuals (duplicated), including 614 children, 409 parents and caregivers, and 46 providers. The figure below presents a thumbnail of the number of children and adults served per First 5 Mono program, as well as the annual expenditures per program. Numbers for each program are unduplicated, but across programs, numbers include duplicates unless otherwise noted. Note that the programs are categorized differently in the annual report to First 5 California than they are locally.

Figure 5. Clients Served and Expenditures, by Result Area and Program

F5 MONO RESULT AREA / PROGRAM	CHILDREN	CAREGIVER	PROVIDER	TOTAL	INVESTMENT
Family Functioning	104	130		234	\$478,061
Home Visiting (Parents as Teachers)	104	130	—	234	\$478,061
Child Development	390	159	52	601	\$464,278
IMPACT/ Quality Counts California	112	—	35	147	\$308,150
Preschool/Childcare - Bridgeport	5	10	1	16	\$78,493
Peapod Playgroups	77	54	1	132	\$39,365
School Readiness: Raising a Reader	95	95	7	197	\$38,270
School Readiness: Kindergarten Assessment	101	—	8	109	
Child Health	120	120	—	240	\$15,054
Safety Education (Bike Helmets)	120	120	—	240	\$13,982
Oral Health	—	—	—	—	\$1,072
Strong Systems					\$256,906
Systems Building (Early Identification and Intervention, Family Resiliency, Health Systems, Place-Based)	—	—	—	—	\$256,906
TOTAL	614	409	46	1075	\$1,214,299

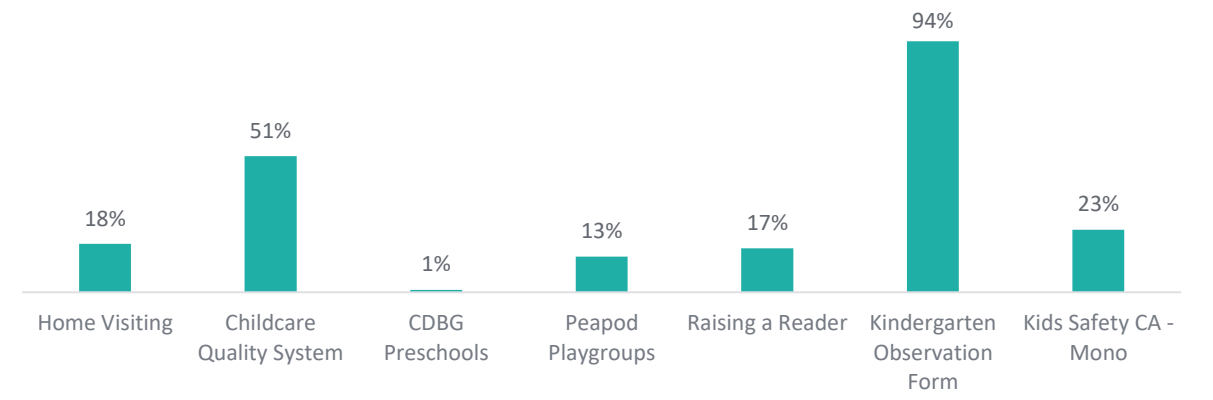
Source: First 5 Mono Annual Report to First 5 California (AR-1), FY 2023-24. Note that this table includes new data and may not match the state AR-1 report. Notes: *35 of the providers are licensed; ** Assumes 1 parent per child in Kinder Round up.

PROGRAM REACH

Among the Commission-funded First 5 Mono programs, evidence-based home visiting services served 18% of the population, and 51% were reached through Childcare Quality Systems, which included licensed childcare centers, Family Child Care Homes, and Family, Friend, Neighbor providers, home visiting, and Peapod

Playgroups. To support parent-child interactions, 13% of county children under five and their families engaged in developmental Peapod Playgroups. School readiness programs engaged almost half of Mono County families with children in this age group. Early literacy programs such as Raising a Reader, Peapod Playgroups and Home Visiting supported 44% of county children under the age of five years. In the area of health, Safe Kids reached 23% of Mono County families with children under five with bicycle helmets. and 30% of children ages 1-5 received dental screenings. Altogether, First 5 Mono reached at least 45% of the children in the county.

Figure 6. Percentage of County Children Under 5 Reached by Each First 5 Mono Program

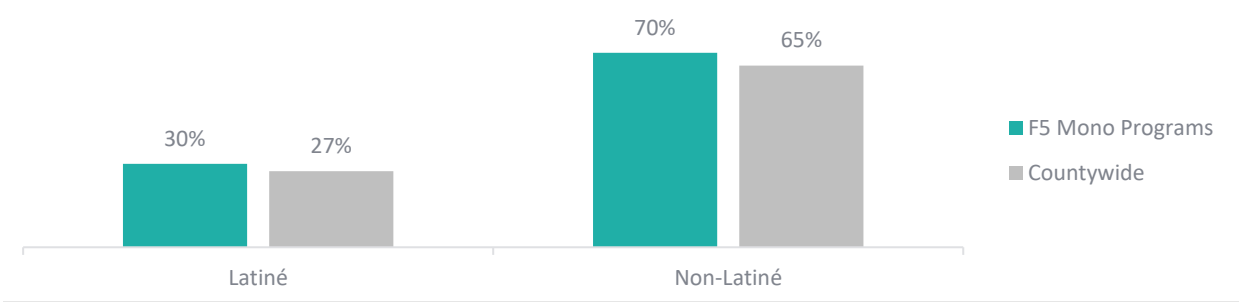


Sources: First 5 Mono programs participation records, FY 2023-24.
US Census Bureau Quickfacts: Population estimates for all residents (N = 13,066) and children under 5 (N = 575 or 4.4%) in Mono County, 2023. *Childcare Quality System includes Peapod Playgroups and Home Visiting, duplicated. Kindergarten Observation Form only includes children entering kindergarten (N = 107).

ETHNICITY AND LANGUAGE

In 2023-24, amongst children for whom ethnicity data were available, about one third of the children served by First 5 Mono were Hispanic (36%), and another half (50%) were White, with only about 2% of Native American descent and 10% were of two or more races. In comparison to countywide racial-ethnic distribution of families with young children, 74% spoke English and 26% spoke Spanish (2023-24 AR2 Report, excludes unknown language preferences).

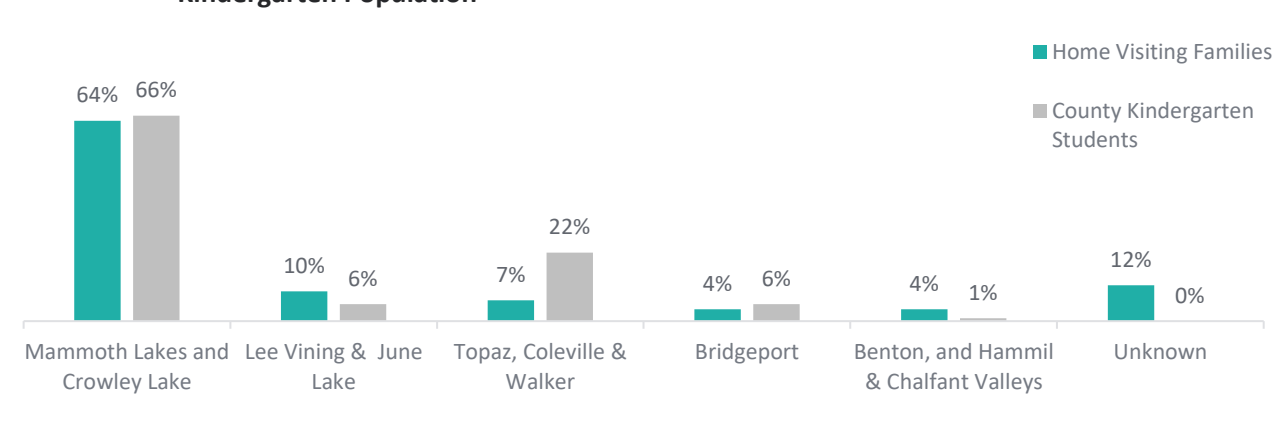
Figure 7. Percentage of County Children Under 5 Enrolled in Home Visiting, by Ethnicity



Sources: First 5 Mono Home Visiting Data. County data for children 0-4: California Department of Finance: Complete P-3 Race/Ethnicity and Sex by Age Projections for California and Counties State, 2023-24.

To better understand whether First 5 Mono programs are geographically equitable, the figure below compares the distribution of clients in home visiting services by location, compared to all publicly enrolled kindergarten students. This comparison reveals that home visiting services reached a higher percentage of families in Lee Vining, and June Lake, and a slightly lower percentage in all other areas. In general, the distribution of services matches the distribution of kindergarten students across the county.

Figure 8. Geographic Distribution of First 5 Mono Home Visited Families Compared to County Kindergarten Population



Sources: First 5 Mono home visiting programs participation records, FY 2023-24. Kindergarten enrollment: Dataquest enrollment by grade, FY 2023-24.



Improved Family Functioning

HOME VISITING

Program Overview

First 5 Mono funds home visiting services due to nationwide evidence demonstrating the ability of home visiting programs to improve outcomes for children and families in areas of family functioning, prevention of child maltreatment, increased early literacy, and improved school readiness. The home visiting program funded by the Commission was **Welcome Baby! & Healthy Families**. This program is a *Parents as Teachers* affiliate site, which provides an evidence-based model of service delivery. Through these services, families were offered between 12 and 24 visits per year, depending on families' needs, or until their child was enrolled in home visiting special needs services, preschool, transitional kindergarten, or kindergarten. Key curriculum activities targeting program goals were to:

- Provide culturally competent services in Spanish and English
- Facilitate parents' role as their child's first and most important teacher
- Conduct developmental screenings and refer families to early intervention programs
- 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
- Facilitate optimal family functioning
- Decrease child abuse and neglect

A Logic Model summarizing key activities and expected outcomes is as follows:

Inputs	Activities	Outputs	Expected Outcomes
<ul style="list-style-type: none">• Funding• Two part-time and three full-time home visitors• Program funding and administration• Community participation	<ul style="list-style-type: none">• Home visits with families and providers• Monthly staff meetings• Data collection and input• Recruiting and training	<ul style="list-style-type: none">• Number and percentage of children 0-1 and 0-5 accessing home visiting services (SP#2 and 3)• Number and percentage of home-visited and county children (six mo.-five years) screened for developmental delays (SP #4a, b)• Number and percentage of home-visited and county children (0-5) in households where parents and other family members are receiving child development and parenting education and information about appropriate community services (SP #14a, b)• Number and percentage of children where breastfeeding is successfully initiated and sustained at one mo. well-child check-up (SP#15)• Number and percentage of children with the expected BMI (SP#16a, b)	<ul style="list-style-type: none">• Improved access to early intervention services for families and children 0-5• Improved screening and intervention for developmental delays, disabilities, and other special needs in children 0-5• Improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health• Improved access to health care services and community resources for children 0-5 and their families• Increased infant breastfeeding rates• Improved physical health• Improved school readiness

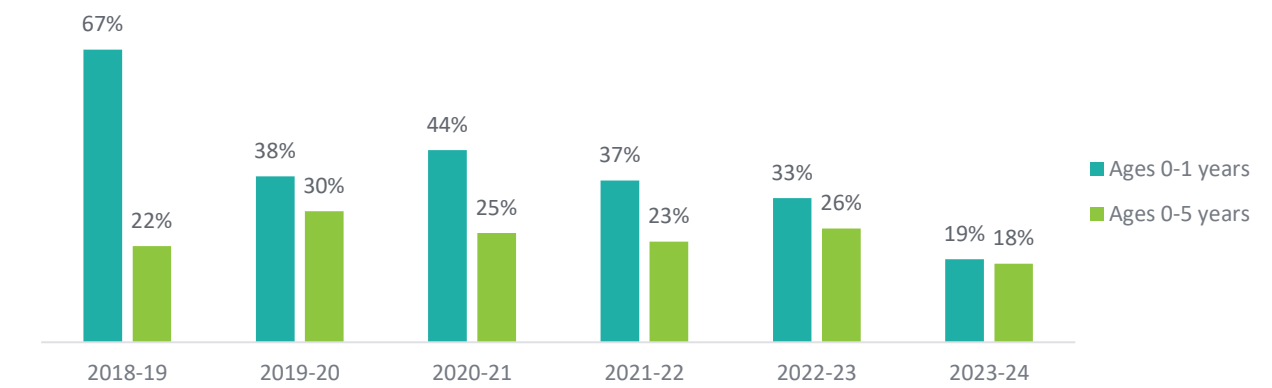
Child and Family Access To Home Visiting Services (SP#2 and 3)

Mono County families are referred to the First 5 Mono home visiting program through a variety of sources, such as childcare providers, Mammoth Hospital's Women's Clinic, and Northern Inyo Hospital's Labor and Delivery department. In 2020, First 5 Mono was awarded the Home Visiting Coordination Grant from First 5 California, which allowed the expansion of the existing community referral network. In 2023 funds were awarded through Mono County Health and Human Services funded by California Department of Public Health.

Status:
SP #2: Decreasing
SP #3: Decreasing

Status: In FY 2023-24, 226 individuals, including 104 children and 130 parents accessed evidence-based home visiting services. In terms of program reach in FY 2023-24, the enrollment rates for infants referred to home visiting dropped from 33% to 19%.

Figure 9. Percentage of Mono County Infants and Children Under 5 Enrolled in First 5 Mono Home Visiting Programs



Sources: First 5 Mono home visiting programs participation records, 2018-2024. Countywide population: US Census Bureau Quickfacts: Population estimates for children under 5 in Mono County, 2018-2024.

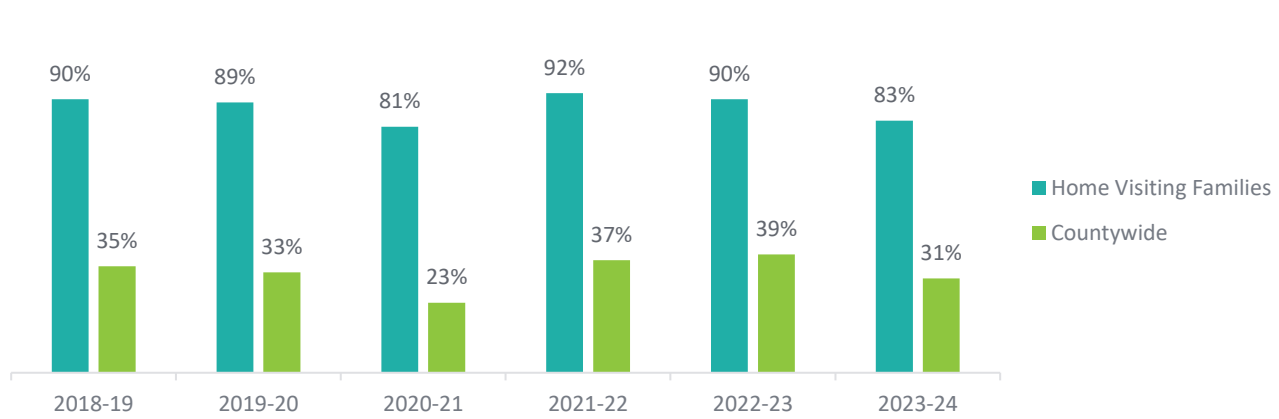
Children Screened for Developmental Delays (SP#4a and 4b)

One of the goals of First 5 Mono programs is the promotion of universal developmental screening of young children, recommended by the American Academy of Pediatrics (AAP). Early screening is essential for the prevention and early identification of potential developmental delays and disabilities, as well as linkage to early intervention services for young children, to improve long-term outcomes. Consequently, the Commission supported developmental ASQ (Ages and Stages) screening in the First 5 Mono home visiting program, as well as in licensed early learning settings. Participating children were screened if they were between six months and five years of age and were not already receiving special needs services.

Status:
SP #4a: Decreasing
SP #4b: Decreasing

Status: In FY 2023-24, 86 home-visited children (83% of all enrolled) received ASQ screening. All in all, the proportion of children who received a developmental screening as part of the home visiting services was relatively high. First 5 Mono was also successful in promoting universal developmental screenings among children in the Childcare Quality System. In 2023-24, 31% (n = 181) of all county children ages 0-5 years received a developmental screening either by or with support from First 5 Mono, which is an 18% decrease compared to last year.

Figure 10. Percentage of Home-Visited and Mono County Children (Six Months to Five Years) with ASQ Screens



Sources: Data for children screened in home-visiting programs: First 5 Mono home visiting programs participation records, 2018-2024. Data for children screened countywide: First 5 Mono home visiting program participation records and Childcare Quality System records, 2018-2024. Countywide population: US Census Bureau Quickfacts: Population estimates for children 0-5 in Mono County, 2018-2024.

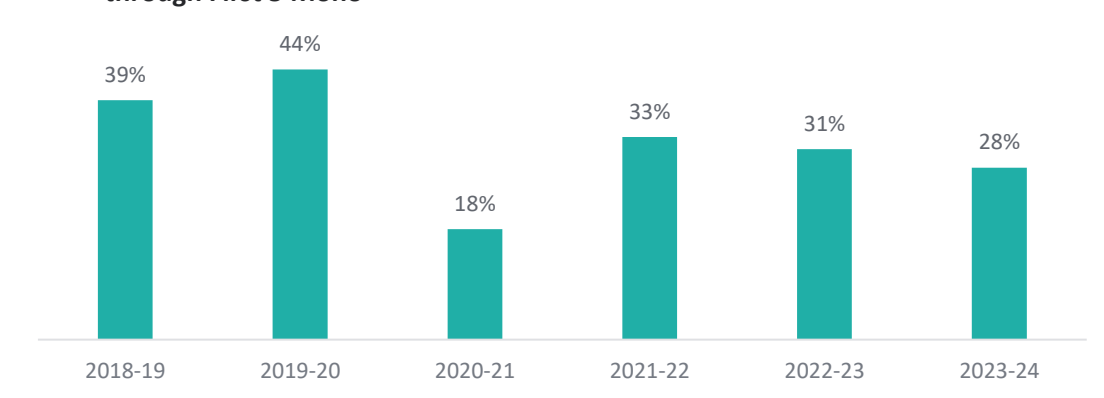
Caregiver Access to Child Development and Parenting Education (SP# 14b)

Among the Commission-funded First 5 Mono programs, two offer parenting education: Home visiting and Peapod Playgroup.

Status:
SP#14b: Stable

Status: In terms of the countywide trends, between 250 and 300 children were enrolled in home visiting or Peapod Playgroups programs in recent years, with 100% of participating parents receiving education on the topics of child development and parenting. In FY 2023-24, the parents of 104 children enrolled in home visiting services and 77 in Peapod playgroups accessed parenting education; accounting for duplication, the 159 children represented translates to 28% of the county population 0-5 years.

Figure 11. Percentage of Mono County Children Under 5 Whose Parents Received Parent Education through First 5 Mono



Sources: First 5 Mono home visiting programs participation records and Peapod playgroup program participation data, 2018-2024. Countywide population: US Census Bureau Quickfacts: Population estimates for children 0-5 in Mono County, 2018-2024.

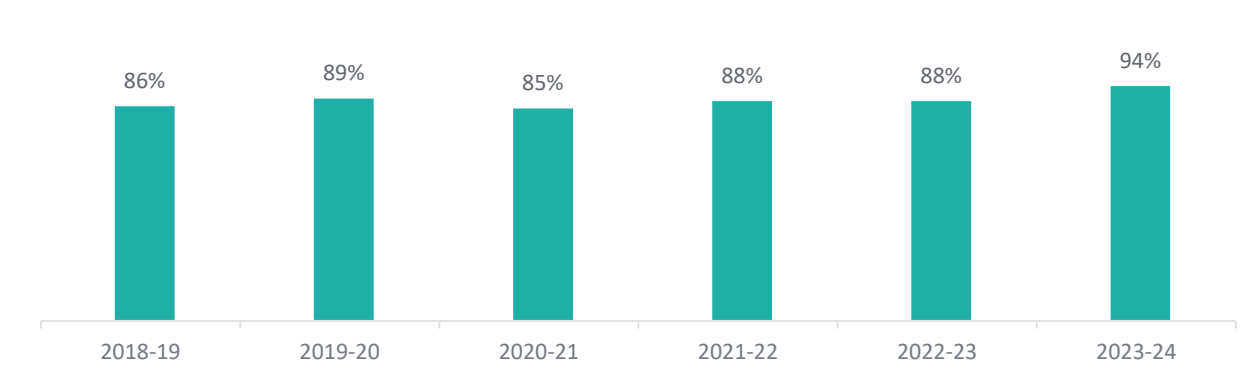
Breastfeeding Status of Infants in Mono County at One Month Post Delivery (SP#15)

The benefits of breastfeeding are widely known, ranging from boosting the infant's health to strengthening the caregiver-child bond. Therefore, encouraging breastfeeding was a steady goal of First 5 Mono programs over the past five years. The information on the initiation and continuation of breastfeeding was collected at Sierra Park Pediatrics during routine well-child check-ups when infants were around one month old.

Status:
SP#15: Increasing

Status: In FY 2023-24, 65 (94%) of all children seen at the clinic for their one-month check-up were breastfed. This is comparable to the generally high breastfeeding rates registered between 2018 and 2023, which ranged between 85% and 89%. Compared to last year, the rate of breastfeeding increased 7%. However, it's worth noting that the current prevalence of breastfeeding is already close to the maximum value of 100%, with little room for improvement.

Figure 12. Percentage of Infants at Sierra Park Pediatric Clinic Breastfed (First Month's Health Check-Up)



Source: Sierra Park Clinic, Pediatric Records, 2018-2024.

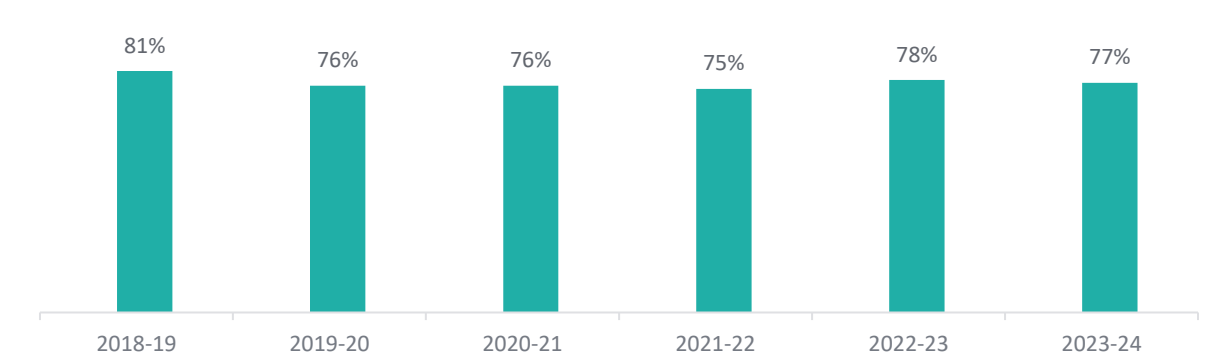
Physical Health and Development of Children (SP#16b)

Another indicator of child health is their Body Mass Index (BMI), which is an expression of the child's weight, accounting for their height and age. Sierra Park Pediatrics reported on children's BMI collected during their well-child check-ups.

Status:
SP#16b: Stable

Status: In FY 2023-24, 230 or 77% of all children seen at the clinic had a BMI in the expected range. This is similar to estimates across the past five years.

Figure 13. Percentage of Children (0-5) at Sierra Park Pediatric Clinic with the BMI in the Expected Range



Source: Sierra Park Clinic, Pediatric Records, 2018-2024.

Home Visiting Programs Progress Summary

In FY 2023-24, home visiting program's performance decreased from what we saw in the previous year.

- The percentage of children whose parents accessed home visiting decreased from 26% (2022-23) to 18% in 2023-24.
- There was a decrease in developmental screening for children aged six months to five years (from 39% down to 31%).
- Breastfeeding rates at one-month post-delivery continued to be very high (94%).
- The percentage of children with a healthy BMI decreased slightly from 78% to 77%.

The Commission will continue to fund Welcome Baby! and Healthy Families through fiscal year 2024-25, with the goal of continued improvement in the quality and frequency of services, as prescribed under the evidence-based home visiting service model. These efforts are made possible with the generous funding support of First 5 Mono partners:

- The Mono County Board of Supervisors through the Mono County taxpayers
- Department of Social Services
- First 5 California's Small Population County Augmentation grant
- California Department of Public Health



Improved Child Development

CHILDCARE QUALITY SYSTEM

Studies show that participation in early learning promotes physical activity, socialization, language skills, development of self-regulation, and early literacy in young children, which relate to greater school readiness and, later, to higher academic achievement. Moreover, for children from disadvantaged backgrounds, early learning settings play a protective role, improving their ability to relate to others and scaffolding their social-emotional and early academic skills. However, these positive links between childcare and early learning experiences, and later positive child outcomes, are predicated on the high quality of childcare settings.

Therefore, access to quality childcare and early childhood education remains a top priority for First 5 Mono. In particular, the Commission supports Quality Counts California (QCC)/Improve and Maximize Programs so All Children Thrive (IMPACT) initiative locally known as the Childcare Quality System, funded through First 5 California, California Department of Social Services (CDSS), CDE, and First 5 Mono. This initiative aims to provide coaching, stipends, professional development opportunities, and to support *childcare providers by*:

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

Next, to support *state preschool sites* and coaching, the QCC and the Department of Education Child State Preschool Programs (CSPP) QRIS Block Grants were used:

- To fund coaching for childcare providers
- To support provider understanding of the importance, requirements, and strategies, to deliver quality childcare and early childhood education (ECE)
- Provide stipends for coaches and participating start up sites.

Moreover, to improve the reach and tracking of sites participating in quality childcare and early learning initiatives, First 5 Mono supported the *Regional Training and Technical Assistance Hub*:

To support regional (Alpine, Inyo, and Mono Counties), collaboration, accessibility, and engagement of childcare providers in Childcare Quality Improvement initiatives

- To provide a medium for communication and coordination of Hub activities by contracting Viva
- To support tracking capabilities for sites' participation in quality-improvement initiatives by contracting with Hubbe database

Finally, to expand service capacity, the Federal Community Development Block Grant (CDBG) was used to fund childcare services provided by the Eastern Sierra Unified School District.

A detailed Logic Model summarizing key activities and expected outcomes presented in this section is as follows:

Inputs	Activities	Outputs	Expected Outcomes
<ul style="list-style-type: none"> Funding Staff time to plan and execute programs Program funding and administration Community participation 	<ul style="list-style-type: none"> IMPACT/ Quality Counts to support childcare providers QCC and CSPP QRIS Block Grants to support sites serving children ages 0-2 and 3-5 Training and Technical Assistance Hub, to support Region 6 and Spanish-speaking sites, and data tracking CDBG grant to support expansion of childcare capacity Data collection 	<ul style="list-style-type: none"> Number and percentage of county children 0-5 for whom childcare space is available (SP#7) Number and percentage of children accessing moderate-to high-quality childcare. (SP #5) Number of providers/ ECE educators participating in Childcare Quality System. (SP #6a) Number and percentage of providers/ ECE educators moving up on the Child Development Permit Matrix (SP#6b) Number and percentage of children in licensed Childcare Quality System settings receiving ASQ screening (SP#4) 	<ul style="list-style-type: none"> Increase in licensed childcare availability to county children 0-5 Improved access to quality childcare for children 0-5 Increase in childcare providers participating in Quality Improvement Initiatives Improved screening and intervention for developmental delays, disabilities, and other special needs at early learning sites

All in all, 35 providers, serving 293 children (duplicated counts including children enrolled in Peapod and Home Visiting) participated in the Childcare Quality System in FY 2023-24. The section below offers an overview of the overall availability of childcare spaces to Mono County children of preschool and childcare age; number of licensed childcare providers and ECE educators who participated in the Childcare Quality System, improved their rating, or obtained a Child Development Permit; and the proportion of county children who received an ASQ developmental screening at one of the licensed sites participating in the Childcare Quality System.

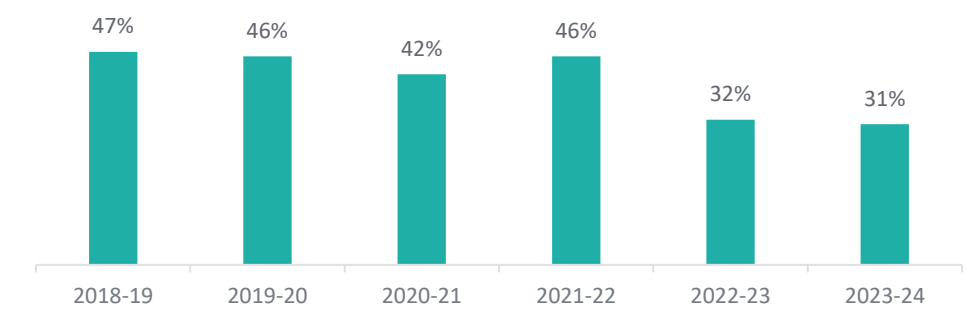
Availability of Licensed Center and Family Childcare Spaces to County Children (SP#7)

The childcare spaces reported in this section are in priority zip code areas and do not include spaces at the Mountain Warfare Training Center Child Development Center (MWTC-CDC) since the slots are only available to families in the military.

Status: In 2023-24, there were enough licensed Center or a Family Child Care Home spaces to serve 177 or 31% of all county children under the age of five. There was no change in spaces available compared to 2022-23.

Status:
SP#7: Decreasing

Figure 14. Percentage of Mono County Children Under 5 for Whom a Licensed Slot Is Available



Sources: Inyo Mono Advocates for Community Action (IMACA)/Mono County Office of Education Resource and Referral and Alternative Payment Programs and California Child Care Network. Child Care Portfolio Reports, 2018-2024.

Proportion of Children Served Through Licensed Child Care Centers and Family Child Care Homes Ranked as Moderate-To-High on the Quality Index (SP#5)

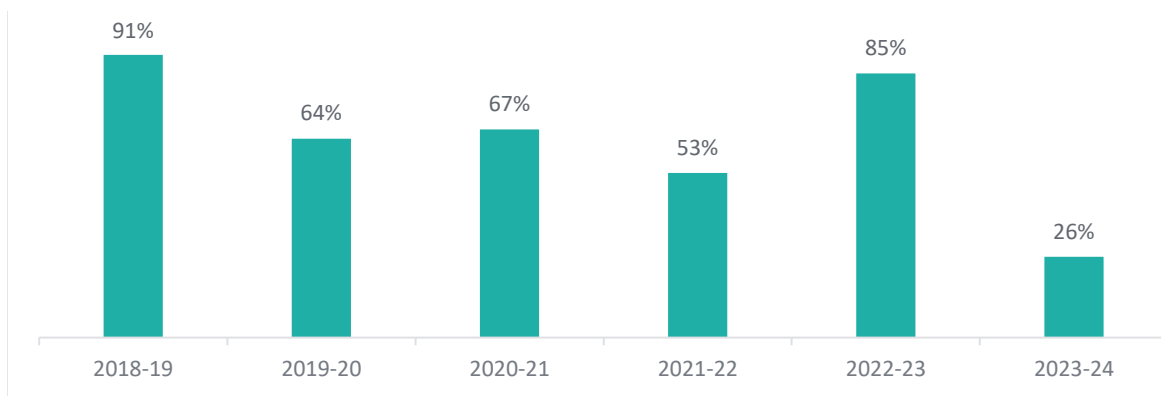
Status:
SP#5: Decreasing

Given the high priority that First 5 Mono placed on supporting quality initiatives, childcare and ECE sites participating in the Childcare Quality System were monitored for quality improvement. Only state preschool sites are offered ratings due to funding sources no longer allowing rating expenditures. Local licensed childcare centers were formally rated on the Quality Rating Index, where a rating at Tier 3 is considered **acceptable** (“achieving quality”), Tier 4 – **moderate** (“exceeding quality”), and Tier 5 – **excellent** quality of care (“highest quality”). California State Preschool Program (CSPP) standards are considered acceptable between Tiers 3 and 5.

	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

Status: In FY 2023-24, amongst the 112 children in licensed child care or early learning settings, 29 of them (26%) were in sites that were ranked between Tiers 3, 4, and 5 on the quality index. This is a 69% decrease compared with last year. This is because many sites are no longer rated due to contractual limitations to fund rating with IMPACT funds.

Figure 15. Percentage of Children Enrolled in Centers and Family Child Care Homes which are Ranked from Moderate to High (Tier 3-5) on the Quality Index



Sources: Site ratings and Childcare Quality System participation records, 2018-2024.

Countywide population: US Census Bureau Quickfacts: Population estimates for children 0-5 in Mono County, 2018-2024.

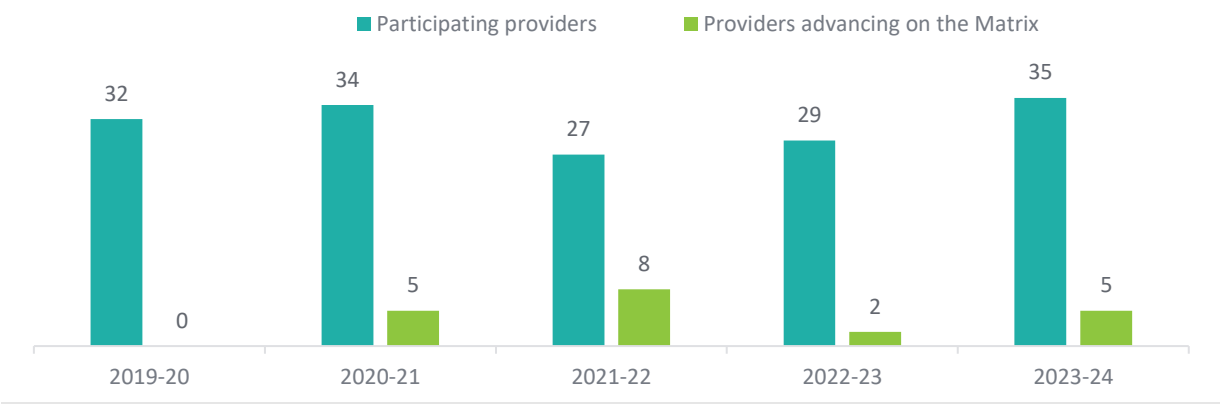
Licensed Child Care Providers and ECE Educators Who Participated in Childcare Quality System and Advanced on the Child Development Permit Matrix (SP#6a & 6b)

Providers participating in the Childcare Quality System and wishing to obtain a child development permit received support through the Workforce Development Grant, disbursed through the Mono County Office of Education.

Status:
SP# 6a / 6b:
Increasing

Status: In FY 2023-24, 35 licensed providers and ECE educators participated in Childcare Quality System, and five of them (14%) advanced on the Child Development Permit Matrix.

Figure 16. Number of Child Care Providers and ECE Educators Participating in Childcare Quality System and Advancing on the Child Development Permit Matrix



Source: Childcare Quality System participation records, 2019-2024.

Children in ECE settings who were screened for developmental delays (SP#4)

This indicator reports children who received ASQ screening in licensed and alternative early-learning settings, including children cared for by a friend, family, neighbor, and other non-licensed providers.

Status:
SP#4: Increasing

Status: In FY 2023-24, 112, or 100% of all children in licensed childcare and ECE settings received ASQ screening for developmental delays, up from 89% last year. Additionally, 198 children were screened across all Childcare Quality System sites, including alternative settings, compared to 210 children last year. This brings the total number of county children screened for developmental delays to 198, or 34% of the 575 children ages 0-5 in the county (see SP#4b).

Childcare Quality System Progress Summary

In FY 2023-24, First 5 continued to actively participate in Childcare Quality Improvement Initiatives through sustained collaboration with the Mono County Childcare Council. This year revealed some challenges as well as successes:

- The number of licensed childcare slots available to children in Mono County decreased compared to the previous year, mostly likely due to a change in how capacity is calculated (SP #7).
- To increase childcare quality, First 5 Mono staff continued to offer teacher-specific coaching based on classroom observations and quality ratings. The percentage of children who are in sites rated a Quality Tier 3, 4, or 5 decreased substantially (SP #5), but the percentage of providers who advanced on the permit matrix doubled (SP #6b).

- The percentage of children in early learning settings receiving a developmental screening has increased sharply (SP #4).

Given the overall success in leveraging First 5 California, CDSS, and CDE funds for promoting developmental screenings and collaborating with local providers to maintain and increase childcare quality. The Commission will continue to invest in the Childcare Quality System. These efforts are made possible with the generous funding and programmatic support of First 5 Mono partners:

- Mono County Office of Education’s Local Planning Council (the Mono County Childcare Council)
- Mono County Office of Education’s local Resource and Referral and Alternative Payment programs
- Cerro Coso’s Child Development Department and partners in Alpine and Inyo Counties



FAMILY BEHAVIORAL HEALTH — PEAPOD PLAYGROUPS

A critical goal of First 5 Mono is the support of the family behavioral health, which is an umbrella term that incorporates mental health and emotional well-being. Behavioral health also translates to healthy family dynamics and close parent-child relationships, which are key components to a positive home environment, supporting healthy growth and development in young children.

This goal is addressed through the First 5 Mono Peapod Playgroups program, which provides parents with education on child development and positive parenting strategies and fosters parent-child closeness by engaging parent-child dyads in joint family activities during playgroups. Playgroup sessions were held once a week for the duration of 10 weeks in the following communities: Walker, Bridgeport, Benton, June Lake, and Mammoth Lakes. However, if there was no participation for four weeks in a row, the remainder of the groups in the session were canceled. The main objectives of the Peapod Playgroups were to:

- Decrease isolation among rural families by providing parents and children an opportunity to socialize with other parents and children of similar ages
- Encourage parents to support early literacy and school readiness in their children
- Decrease stigmatization associated with seeking behavioral health services
- Link families to community services based on their needs and concerns

A detailed Logic Model summarizing key activities and expected outcomes is as follows:

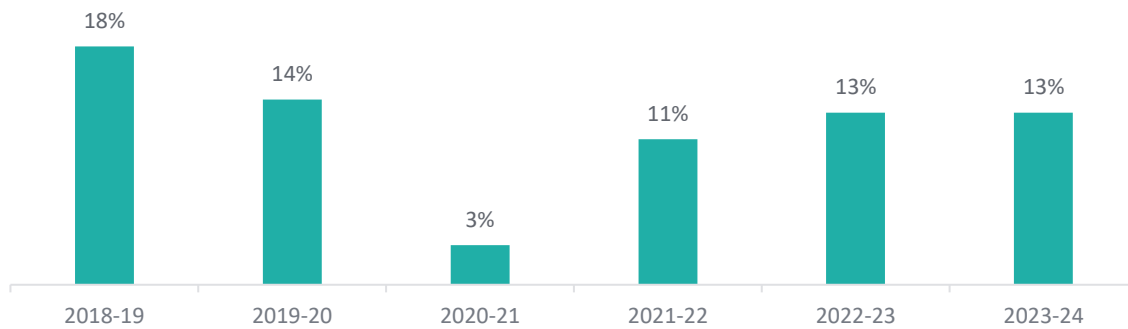
Inputs	Activities	Outputs	Expected Outcomes
<ul style="list-style-type: none"> • Funding • Playgroup leaders' time to plan and execute the program • Program funding and administration • Community participation 	<ul style="list-style-type: none"> • Conduct playgroups sessions • Provide parent education • Provide referrals to community mental health services • Data collection and input • Recruitment and training 	<ul style="list-style-type: none"> • Number and percentage of children served through Peapod Playgroups (SP#19). • Number and percentage of children in households where parents and other family members are receiving child-development and parenting education through Peapod Playgroups (SP #14c) • Percentage of parents satisfied with Peapod Playgroups' curriculum and delivery (SP #1) 	<ul style="list-style-type: none"> • Increased access to positive parent-child activities and parenting support • Improved parental knowledge, understanding, and engagement in promoting their children's development and physical and mental health • De-stigmatization of mental health and mental health care • Improved access to mental health care for families of children 0-5

Children (0-5) served through Peapod Playgroups (SP#19)

Status: The Peapod Playgroups served 77 children and 54 adults over the 2023-24 fiscal year. After a significant decline due to the pandemic in 2020-21 (3% participation rate), the program has rebounded to 13% participation for the last two years.

Status:
SP#19: Increasing

Figure 17. Percentage of Mono County Children Under 5 Served Through First 5 Mono Peapod Playgroups Program



Sources: First 5 Mono Peapod playgroups program participation records, 2018-2024.

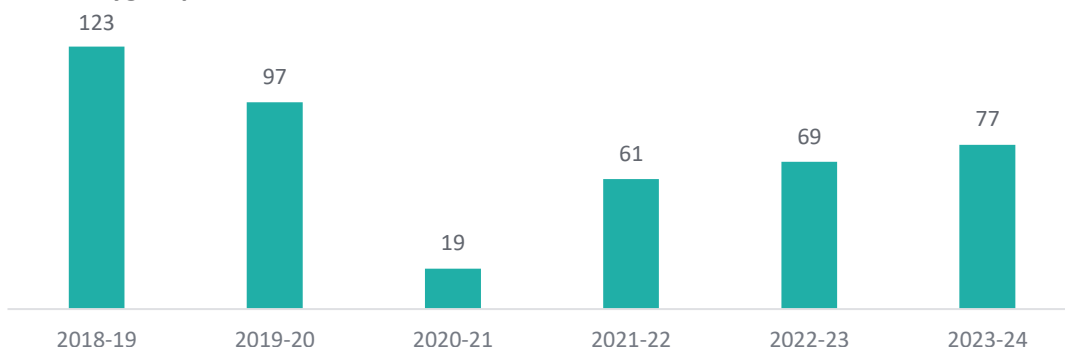
Countywide population: US Census Bureau Quickfacts: Population estimates for children under 5 in Mono County, 2018-2024.

Children in Households Where Parents Received Child Development and Parenting Education (SP#14c)

Status: In FY 2023-24, 54 parents of the 77 children enrolled in Peapod Playgroups received Child Development and Parenting Education. Some families who received parenting education through Peapod playgroups were also enrolled and received parenting education in First 5 Mono’s home-visiting programs. (n=22)

Status:
SP#14c: Increasing

Figure 18. Number of Children Under 5 Whose Parents Received Parent Education through Peapod Playgroups



Source: First 5 Mono Peapod playgroups program participation records, 2018-2024.

Program Satisfaction Among Parents whose children attended Peapod Playgroups was high (SP#1)

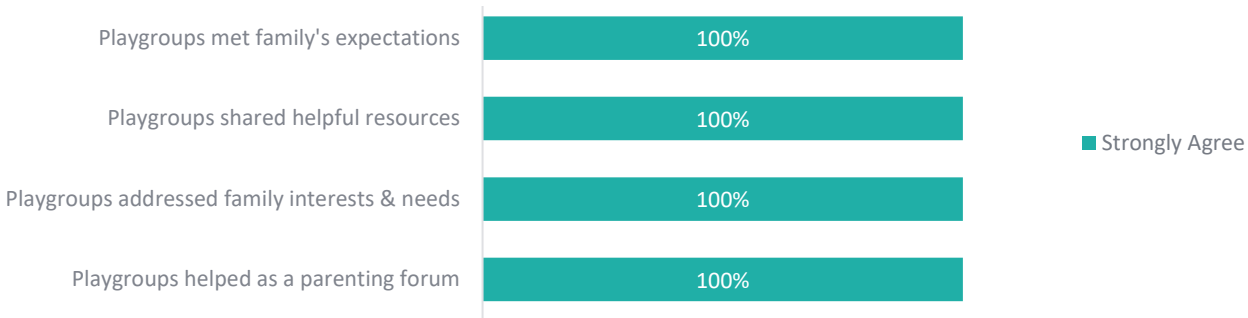
Additionally, parents of children enrolled in Peapod Playgroups were asked to complete a Parent Satisfaction Survey. In FY 2023-24, 19 parents responded to the survey, which is about two-thirds of the 31 families who completed the parent survey last year. Based on the survey responses, the playgroup sessions were attended by children of various ages, including four-year-olds (28%), three-year-olds (6%), two-year-olds (20%), one year-old (35%), and some infants under the age of one year (11%). About 5% of respondents did not answer this question.

Status:
SP#1: Stable

Status: All in all, 100% of parents reported that Peapod Playgroups *Met family expectations* (i.e., all parents chose “str

only agree” or “agree” when answering this question). All respondents also answered “strongly agree” with the statement that Peapod Playgroups *Shared helpful resources* they’ve found useful for themselves or their families. All families “strongly agreed” that the playgroups’ education topics and activities *Addressed their family’s interests and needs* and expressed a strong belief that playgroups *Helped as a parenting forum* to discuss the topics of child-rearing and parenting.

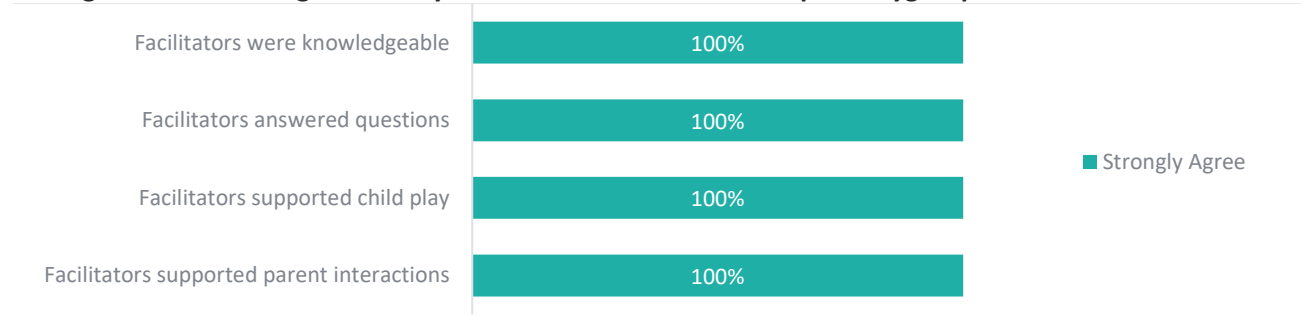
Figure 19. Percentage of Surveyed Parents Satisfied with First 5 Mono Peapod Playgroup Program



Source: First 5 Mono Peapod Playgroups Program Participation Records, FY 2023-24. N = 19. Note: None of the parents chose “Disagree” or “Strongly Disagree” for any of the questions, therefore, these options were omitted from the chart.

Peapod Playgroups Parent Survey asked several questions about playgroup leaders. As with program satisfaction, all parents were highly satisfied with how playgroups leaders were structured and delivered. More specifically, 100% of parents “strongly agreed” that playgroups’ leaders *Were knowledgeable* and well-prepared, 100% said that *Leaders answered questions* and suggested resources, and 100% said that leaders *Supported child play*. Additionally, 100% of parents “strongly agreed” that playgroup leaders also helped *Facilitate interactions among the participating parents*.

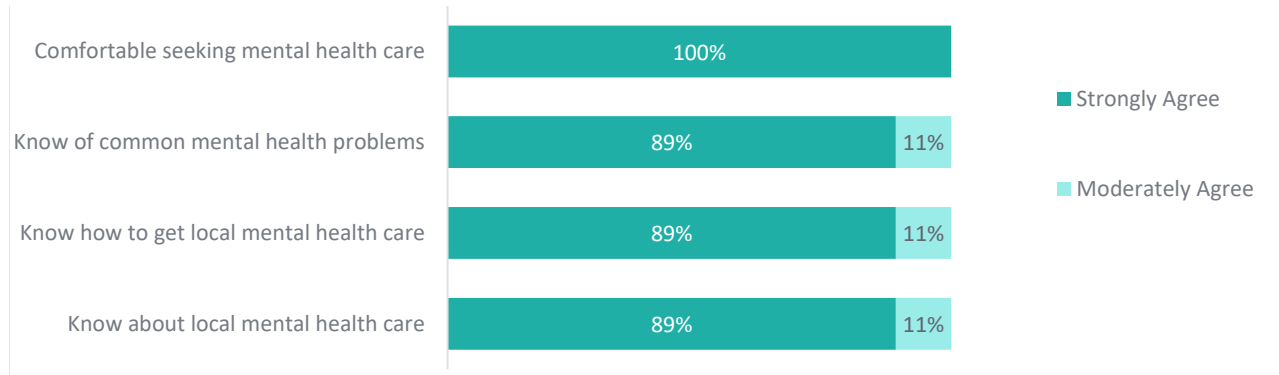
Figure 20. Percentage of Surveyed Parents Satisfied with Peapod Playgroup Leaders



Source: First 5 Mono Peapod playgroups program participation records, FY 2023-2024. N = 19. Note: None of the parents chose “Disagree” or “Strongly Disagree” for any of the questions, therefore, these options were omitted from the chart.

The last set of parent survey questions aimed to assess how well Peapod Playgroups addressed program objectives related to parental mental health and well-being. The overall findings were positive. Around 90% of caregivers “strongly agreed” they understood *Common mental health problems* for families with young children (up from 81% last year). About 90% of respondents said they “strongly agreed” they know *where to get mental health care* in their community (up from 84% last year). All (100%) of parents “strongly agreed” they felt *comfortable seeking mental health care* if they needed some help (up from 90% last year).

Figure 21. Percentage of Surveyed Parents Satisfied with Peapod Playgroups' Efforts to Increase Awareness of Mental Health and Share Local Mental Health Care Resources



Source: First 5 Mono Peapod playgroups program participation records, FY 2023-2024. N = 19. Note: None of the parents chose "Strongly Disagree" for any of the questions, therefore, these options were omitted from the chart.

Family Behavioral Health Programs Progress Summary

In FY 2020-21, the Peapod Playgroups suffered pandemic-related setbacks, including low in-person enrollment rates due to transitioning to virtual sessions; enrollment plummeted from 97 children in 2019-20 to just 19 in 2020-21. However, the program is making a comeback:

- By FY 2023-24, program reach largely returned to its pre-pandemic participation levels, with 77 children participating.
- About one-third of parents completed a satisfaction survey (n = 19), of the 54 parents participating in the program.
- The results of the survey were highly favorable, with 100% of parents noting that the Peapod Playgroups met their expectations, provided a forum to connect with other parents about common child-rearing issues (100%), and provided facilitated playtime for their children (100%).
- Most (90%) of parents said they had a better understanding of mental health, felt comfortable seeking help (100%), and knew where to get help through local resources (90%).

The favorable survey results, as well as the rebound in program participation, point to the program's critical role in meeting the parents' needs. Based on this year's results, the Commission will continue to invest in and seek funding partnerships for this initiative.

SCHOOL READINESS

Early school readiness is a known predictor of later academic achievement in elementary school and beyond, as well as a number of other positive child outcomes associated with school engagement, such as connectedness and belonging and positive relationships with peers and teachers. In turn, academic achievement serves as a stepping stone for success later in life, from college graduation rates to income, health, and professional occupation. Consequently, First 5 Mono monitors the effectiveness of early learning settings in preparing young children in Mono County for kindergarten. Additionally, the Commission supports a number of programs focused on improving early literacy, transition to school, and school readiness, such as Kindergarten Round Up and Raising a Reader.

School readiness programs engaged all Mono County elementary public schools, childcare and preschool centers, special needs programs, and the Mono County Library System.

A detailed Logic Model summarizing key activities and expected outcomes presented in this section is as follows:

Inputs	Activities	Outputs	Expected Outcomes
<ul style="list-style-type: none"> Funding Staff time to plan and execute programs Program funding and administration Community participation 	<ul style="list-style-type: none"> Monitor accessibility of early learning spaces Monitor attendance of early learning settings Literacy Activities via Raising a Reader and other First 5 Mono programs Transition to School Activities: Kindergarten and TK Round Up Program Data collection and input Recruiting and training 	<ul style="list-style-type: none"> Percentage of county children 3-4 years for whom preschool spaces were available (SP#12) Percentage of kindergarten students who have ever attended a licensed/state preschool program. (SP #8) Percentage of county children under 5 who accessed early literacy activities. (SP #11a, b) Percentage of kindergarten children whose parents attended Transition to School activities (SP#10) Percentage of kindergarten students assessed for school readiness and ready for school (SP#13, SP#9) 	<ul style="list-style-type: none"> Improved accessibility of early learning settings to county children Increased utilization of formal early learning programs by county children Increased accessibility of early literacy programs Improved school readiness

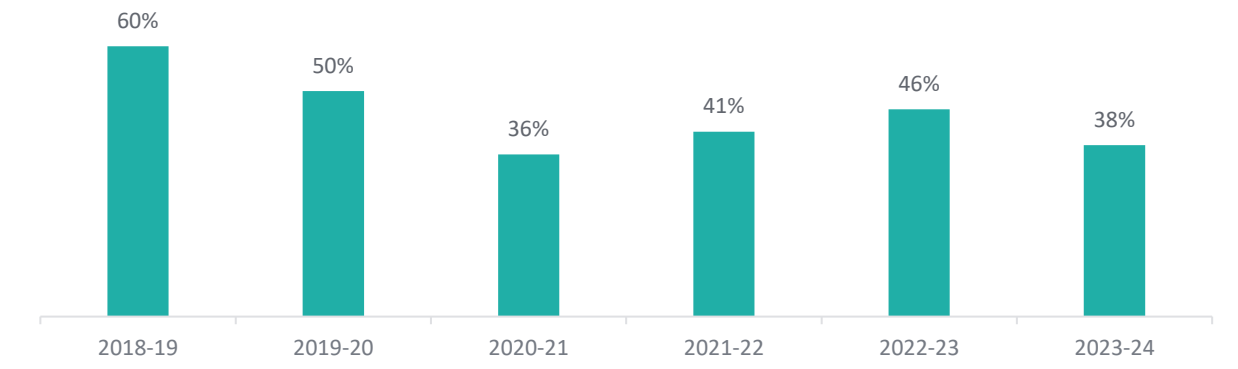
Percentage of Age-Eligible Children in Mono County For Whom A Preschool Slot Was Available (SP#12).

Access to quality early learning settings is a strong predictor of future academic performance, among other positive child outcomes.

Status: In FY 2023-24, 86 (38%) of the county's children ages 3-4 had a preschool slot available to them. Two preschool sites closed due to funding volatility, staffing changes, and the availability of state-funded transitional kindergarten expansion (TK). This led to an 18% decrease in the percentage of preschool-age children who could be accommodated in the local childcare / early learning system.

Status:
SP#12: Decreasing

Figure 22. Percentage of Mono County Children (3-4 Years) for Whom a Licensed Preschool Slot was Available



Sources: Department of Education data on licensed capacity of center-based care serving preschool-age children, 2019-2022 and Mono County Resource & Referral Network, Year 2018-19. Countywide population: DataQuest Enrollment Multi-Year Summary by Grade, 2018-2024

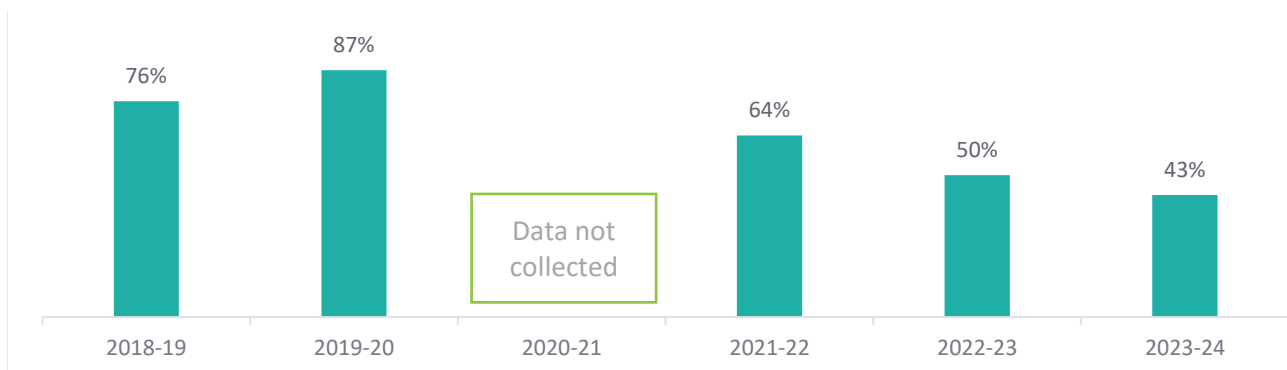
Percentage of Kindergarten Students In Mono County Who Had Ever Attended A Preschool, Pre-K, Or Head Start Program (SP#8)

To capture accessibility of the benefits of quality early learning to Mono County children, First 5 Mono monitors the number of children who had formal early learning experiences. Given that licensed and state-funded programs must abide by the early learning standards set forth by the state of California, attendance of a licensed preschool, Pre-K, or a Head Start program was considered indicative of a child's formal early learning experience.

Status:
SP#8: Stable

Status: Among the cohort of Mono County children starting kindergarten in FY 2018-20, 76-87% had some kind of formal early learning experience in a preschool or a licensed equivalent program in the year prior to kindergarten. For kindergarten students starting school after the pandemic, preschool exposure appears to have been impacted. In 2021-22, 64% of entering kindergarten students had prior preschool, in 2022-23 that percentage dropped to 50%. In 2023-24, almost half of children assessed on the Kindergarten Observation Form (43%) had some sort of early learning. This includes those who had ever attended a preschool, pre-K, or TK program by the time of kindergarten entry.

Figure 23. Percentage of Kindergarten Students Who Accessed Formal Early Learning in Licensed Care Settings



Percentage of Children Birth To Five In Mono County Who Accessed Early Literacy Activities, Such As Raising a Reader (SP#11a and 11b)

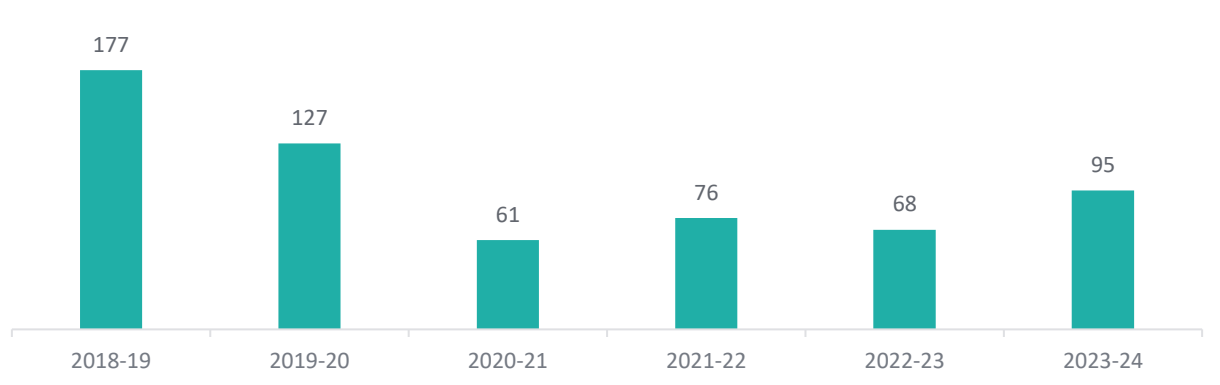
To promote early literacy and school readiness, local families with children ages 0-5 years were invited to participate in the First 5 Mono program, Raising a Reader. This program was conducted and partially funded by the Mono County Libraries, and distributed bags of books to participating children through libraries and early learning programs. Moreover, home visiting and Peapod Playgroup programs also had an early literacy component. The early literacy programs aimed to:

Status
SP#11a: Increasing
SP#11b: Stable

- Increase early literacy in young children residing in Mono County
- Encourage families' use of the library system
- Increase facilitation of literacy activities among parents and childcare/ECE providers and educators
- Facilitate positive parent-child interactions through family literacy activities

Status (SP#11a): In FY 2023-24, 95 children ages 0-5 years participated in the First 5 Mono Raising a Reader program. The number of children accessing early literacy activities through this program showed a downward trend, declining from 127 children in 2019-20 to just 61 during the pandemic year of 2020-21. This year the number has increased over last from 68 to 95 participants. The proportion of children in First 5 Mono programs with the early literacy component who engaged with Raising a Reader specifically increased significantly from 27% in 2022-23 to 37% in 2023-24 (36% increase).

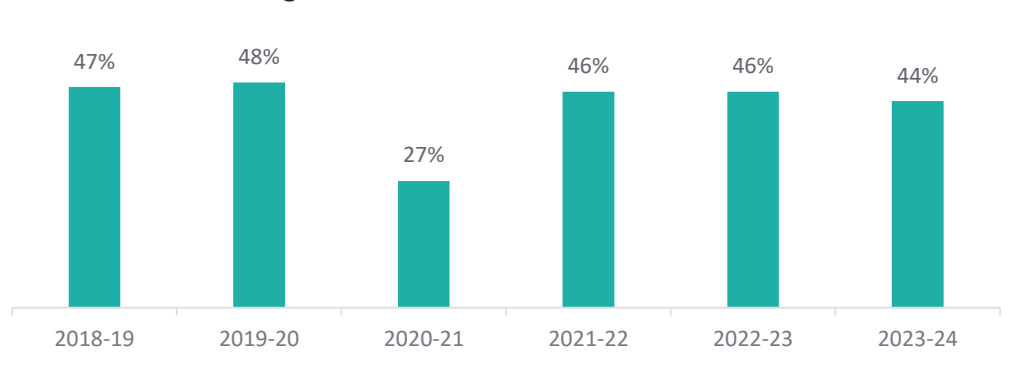
Figure 24. Number of First 5 Mono Participants Accessing Raising a Reader



Source: First 5 Mono Raising a Reader program participation records, 2018-2024.

Status (SP#11b): In FY 2023-24, a total of 254 children accessed early literacy activities across all First 5 Mono programs. The overall participation in First 5 Mono programs featuring an early literacy component followed a similar trend to enrollment rates of other First 5 Mono programs; pre-pandemic, early literacy programs reached nearly 50% of Mono County children under five, but during the pandemic, program reach fell below 30%. Post-pandemic, this downward trend has reversed and has stabilized, now reaching 44% of children under five in the last three years.

Figure 25. Percentage of Mono County Children under 5 Accessing Early Literacy Activities Across All First 5 Mono Programs



Sources: First 5 Mono home visiting, Raising a Reader, and Peapod playgroups programs participation records, 2018-2024. Countywide population: US Census Bureau Quickfacts: Population estimates for children 0-5 in Mono County, 2018-2024.

Percentage of Children in Mono County whose Parents Attended Transition-to-School Activities (Kindergarten and TK Round Up) (SP#10)

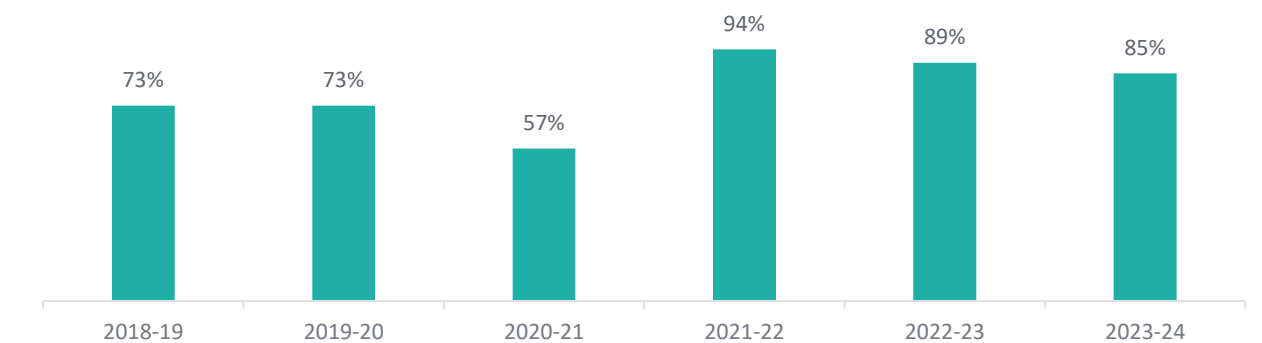
To ease children’s transition into public school systems and to provide instruction to parents on how they can best support their children through this transition, First 5 Mono offered families Transition to School activities. Specifically, Kindergarten and Transitional Kindergarten Round Up events were implemented by First 5 Mono in partnership with local schools. Events included an informational meeting held at all public schools in Mono County. Additionally, all incoming kindergarten students were assessed for school readiness. Assessments were conducted by teachers in the first month of school. School readiness programs pursued the following objectives:

Status:
SP#10: Decreasing

- Introduce families and children to the school, teachers, principals, and each other
- Provide families with information on entering school and kindergarten readiness
- Facilitate children and families’ smooth transition into the public education system
- Enroll eligible children in kindergarten and transitional kindergarten classrooms
- Assess academic/school readiness of incoming kindergarten students
- Identify existing skills/strengths and developmental needs of incoming kindergarten students, enabling linkage to targeted academic supports available within the school system on a case-by-case basis.

Status (SP#10): In FY 2023-24, parents of 90 incoming kindergarten or transitional kindergarten students participated in Transition to School Round Up activities. Traditionally, between 70% and 80% of parents of incoming kindergarten students participated in such activities. During the pandemic, this number fell to just below 60%, likely linked to school closures and restrictions on in-person activities. This year, 85% of children’s parents took advantage of the Transition to School activities offered by First 5 Mono partners. There has been a slight decrease (5%) each year since the record high of 94% participation in FY 2021-22.

Figure 26. Percentage of County TK and Kindergarten Students Whose Parents Attended Round Up Activities



Sources: First 5 Mono Round Up program participation records, 2018-2024. Kindergarten enrollment: School District records, 2018-2024.

Percentage of Children In Mono County Assessed For School Readiness; Percentage of Children “Ready For School” At Kindergarten Entry (SP#13, SP#9)

During FY 2018-21, kindergarten students in Mono County were assessed for school readiness using the BRIGANCE. The BRIGANCE Inventory measures progress in areas of gross motor skills, fine motor skills, pre-speech, speech and language, general knowledge, readiness, basic reading, manuscript writing, and basic math skills.¹

Earlier assessments using the BRIGANCE showed that over half of the students were considered “school ready” in fall 2018, and 66% were “school ready” in fall 2019. Assessments were suspended over FY 2020-21 due to the global pandemic.

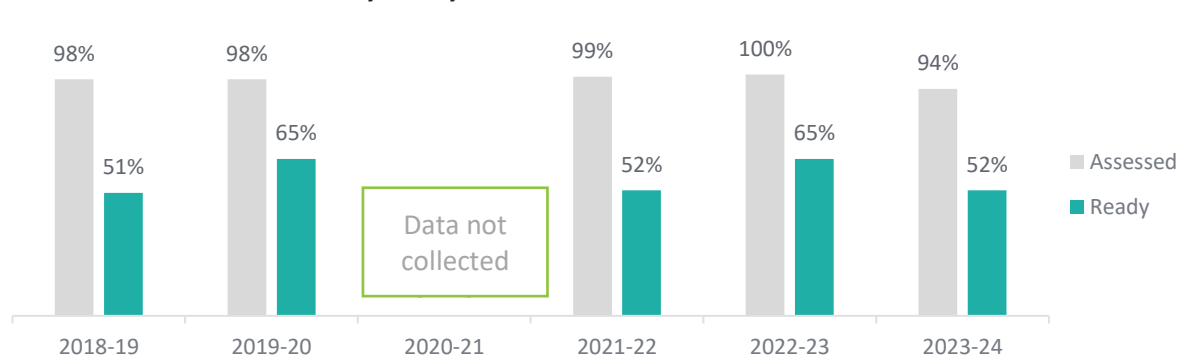
Status:
SP #13, 9:
Decreasing

When assessments resumed in 2021-22, teachers used the Kindergarten Observation Form (KOF). This form was developed by Applied Survey Research in 2001 to capture kindergarten readiness in three *Building Blocks: Self-Regulation, Social Expression, and Kindergarten Academics*. Studies show that social-emotional and regulatory abilities, including verbalization of needs, attention and focus, following directions, and understanding rules and expectations, contribute to positive relationships with peers and teachers, school engagement, and academic achievement. The KOF has been found in multiple longitudinal studies to predict students’ academic achievement in the third and fourth grades.

Status: In FY 2023-24, 101 or 94% of all incoming kindergarten students were screened for kindergarten readiness (SP #13) and 53 (52%) were found to be *Fully Ready* in kindergarten academics skills, meaning that their scores were above the cutoff found to be predictive of third-grade reading achievement (SP #9).

¹ [Kindergarten Data Sheet for the BRIGANCE P/K/1 Screen.](#)

Figure 27. Percentage of Mono County Kindergarten Students Assessed for Kindergarten Readiness and Identified as ‘Fully Ready’ on Academic Skills



Sources: Brigrance Inventory, 2018-2020, and Kindergarten Observation Form (KOF), Kindergarten Academics domain, FY 2021-24. Kindergarten enrollment: School District records, FY 2021-24. Note: In FY 2020-21 school readiness assessments were suspended due to the restrictions associated with the COVID-19 pandemic.

School Readiness Programs Progress Summary

In FY 2023-24, evaluation of the First 5 Mono programs and partnership initiatives largely showed positive outcomes:

- There was enough licensed capacity to accommodate 38% of preschool-age children in the county’s licensed early learning spaces (SP #12).
- 48% of entering kindergarten students had prior licensed early learning experience (SP #8).
- 44% of county children under five accessed First 5 Mono’s early literacy offerings (SP #11b).
- 85% of kindergarten students’ parents attended Transition to School activities (SP #10).
- 94% of kindergarten students were assessed (SP #13).
- 52% of kindergarten students were found to be *Fully Ready* in kindergarten academics skills, meaning that their scores were above the cutoff found to be predictive of third-grade reading achievement (SP #9).

Taking these positive outcomes into consideration, the Commission will continue to fund the same School Readiness activities in 2024-25.

Improved Child Health

ORAL HEALTH SCREENINGS

Preventive health care, such as annual dental screenings, is another indicator of the overall well-being of young children in Mono County, as well as the accessibility of health care services to families with young children. The 2009 First 5 Mono Strategic Plan identified a significant community need in the area of oral health. Pediatricians testified to a considerable proportion of county children affected by visible tooth decay, which spurred the development of a topical fluoride varnish application program. In the past five years, Mono County pediatricians continued to report high numbers of children with poor oral health, underscoring the ongoing community need for sustained efforts in the promotion of oral health. In FY 2023-24, the Mono County Health Department took over this program due to a state investment in oral health.

A detailed Logic Model summarizing key activities and expected outcomes presented in this section is as follows:

Inputs	Activities	Outputs	Expected Outcomes
<ul style="list-style-type: none">FundingStaff time to plan and execute programsProgram funding and administrationCommunity participation	<ul style="list-style-type: none">Coordination of education and data tracking with partnersProvision of necessary suppliesData collection and input	<ul style="list-style-type: none">Number and percentage of children 1-6 who regularly access preventive dental care, such as an annual dental screening (SP#17a)Number and percentage of children with untreated dental problems at kindergarten entry (SP#18)	<ul style="list-style-type: none">Improved access to oral health services for children 0-5Improved oral health among children 0-5

Percentage of Children Ages 1-6 In Mono County Who Regularly Accessed Preventive Dental Care And Received Annual Dental Screenings (SP#17a)

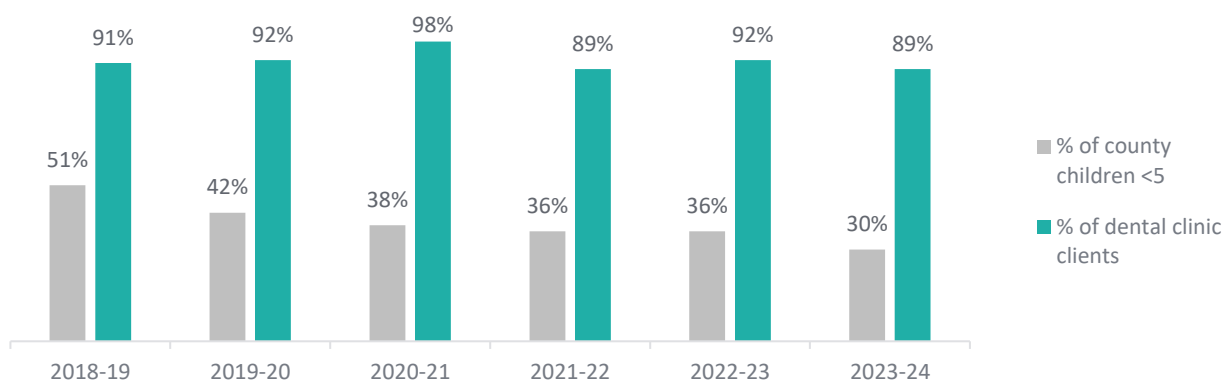
The data on the annual dental exam of children between the ages of one and six years came from the Sierra Park Dental Clinic, which sees between 200 and 350 Mono County children a year. Sierra Park Dental Clinic is the only provider supplying information on the use of preventive dental services in children ages 1-6 years.

Status:
SP#17a: Stable

Status: In FY 2023-24, the Sierra Park Dental Clinic saw 194 children between the ages of 1-6 years, of which 173 (89%) received an annual dental screening. Over the last five years, around 90% of children ages 1-6 years seen at the Sierra Park Dental Clinic have had their annual dental exam, and there was a slight decrease in the last year, down to 89%.

When looking at the proportion of children under five across the county who had dental screens at Sierra Park, the percentage has gradually declined, from over 50% in 2018-19 to 30% in 2023-24. This drop in saturation rates is likely due to decreases in the numerator; the number of children seen at Sierra Park Dental Clinic dropped from 391 in FY 2018-19 to 194 in FY 2023-24.

Figure 28. Percentage of Children (1-6) Who Received an Annual Dental Screening at Sierra Park Dental Clinic



Sources: Sierra Park pediatric clinic dental records, 2018-2024. Countywide population: US Census Bureau Quickfacts: Population estimates for children 0-5 in Mono County, 2018-2024.

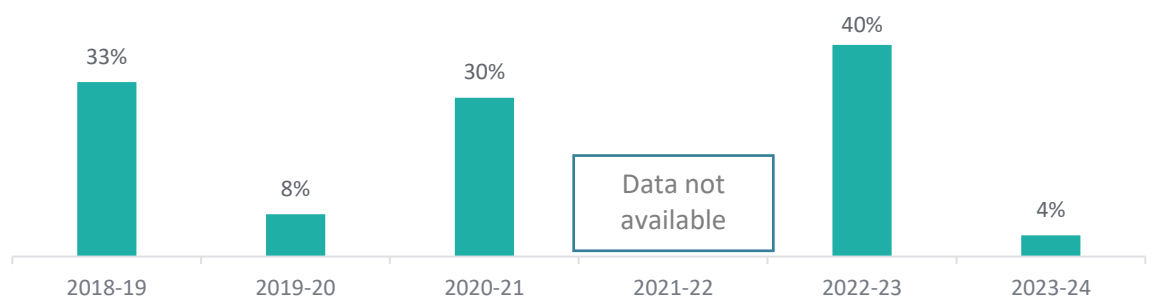
Percentage of Children in Mono County Who Entered Kindergarten With Untreated Dental Problems (SP#18).

Information on kindergarten students with untreated dental problems comes from the Kindergarten Oral Health Assessments (KOHA) turned in at kindergarten enrollment. These forms are completed by an oral health practitioner (dentist, hygienist, or registered dental assistant).

Status:
SP#18: Decreasing

Status: In FY 2022-23, dental assessments at kindergarten entry resumed after not being assessed during 2021-22 due to the pandemic. During 2023-24, 76 Kindergarten Oral Health Assessments were completed and entered in the database, and of these, only three (4%) kindergarten students were found to have untreated dental problems. This is a significant decrease from the 40% of kindergarteners with untreated dental problems in 2022-23. (Data for 2020-21 and 2022-23 has been updated since last year's report, per the health and human services department.)

Figure 29. Percentage of County Kindergarten Students with Untreated Dental Problems



Sources: California Department of Public Health, Office of Oral Health: [Kindergarten Oral Health Assessments \(KOHA\)](#), 2018-2024. Kindergarten enrollment: School District records, 2018-2024. Note: Kindergarten Oral Health Assessments were not conducted by districts during FY 2021-22 due to the COVID-19 pandemic restrictions.

Oral Health and Preventive Dental Care Initiatives Progress Summary

In FY 2023-24, First 5 Mono continued oral health education efforts to promote greater use of preventive dental services, but the need still persists:

- 89% of age-eligible children at Sierra Park Health Clinic has had an annual dental screening (SP #17a).
- The number of children screened translates to 30% of the county's population (SP #17b).
- 4% of entering kindergarten students had untreated dental needs.

Due to the health department supporting oral health of children 0-5, First 5 Mono continues to track oral health but is not implementing the program.



CHILD SAFETY: SAFE KIDS CALIFORNIA – MONO COUNTY PARTNERS

Prior to the launch of Safe Kids Mono, no agency in the County was dedicated to promoting child safety. While some agencies conducted safety activities, their services were not coordinated. At the initiative of the Mammoth Hospital, multiple community agencies began collaboration, which led to the initiation of Safe Kids Mono. Following the review of higher-than-average injury data for Mono and Inyo Counties, as well as the documented benefits of inter-agency collaboration on childhood safety, the Commission decided to fund the coordination of Safe Kids Mono. This decision was critical to the success of the program, as none of the participating agencies had the necessary funding to conduct coordinating activities, outside First 5 Mono. Currently, Safe Kids Mono is coordinated through the combined funding from First 5 California Small Population County Funding Augmentation (SPCFA) grant and the Mono County Office of Education. The program's objectives include:

- Prevention of childhood injury through safety education, resources, and services
- Hosting and participating in community education events, such as Car Seat Safety Checks and Health and Safety Fairs
- Distributing safety gear to families with young children, such as bicycle helmets and gun safety locks

A detailed Logic Model summarizing key activities and expected outcomes presented in this section is as follows:

Inputs	Activities	Outputs	Expected Outcomes
<ul style="list-style-type: none"> • Funding • Staff time to plan and execute programs • Program funding and administration • Community participation 	<ul style="list-style-type: none"> • Coordination of County educational activities on child safety for children and families, including Car Seat Safety Checks, Health and Safety Fairs, and Gun Safety Locks • Partner distribution of child safety equipment to county children 0-5 • Coordination of data tracking • Data collection and input 	<ul style="list-style-type: none"> • Families countywide are informed about safety issues pertaining to young children • Percentage of children who access safety equipment to prevent child injuries (SP#20) 	<ul style="list-style-type: none"> • Help families and communities keep kids 0-5 safe from injuries • Improve community access to safety equipment

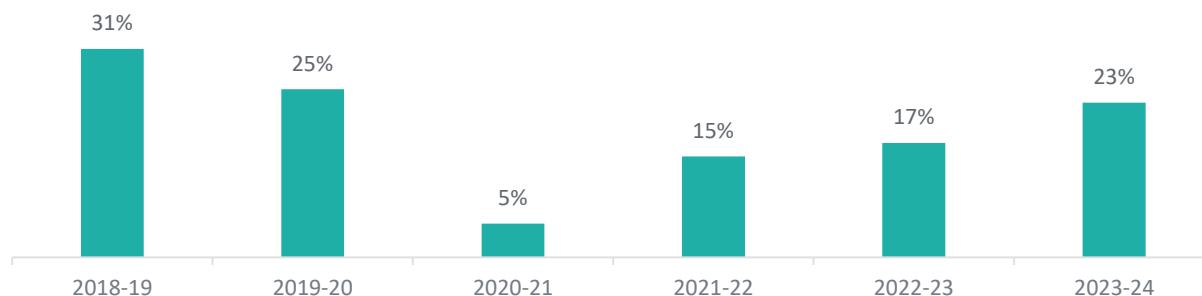
Percentage of Children Birth To Five Provided A Bicycle Safety Helmet Through Safe Kids Coalition (SP#20)

First 5 Mono partnered with Safe Kids Mono to promote the safety of children ages 0-5 years in local communities. Safe Kids Mono provides safety education, activities, and resources. As part of this outreach, children from birth to age five were provided with bicycle helmets. The annual distribution data was reported by the program coordinator.

Status:
SP#20: Increasing

Status: In FY 2023-24, bicycle safety helmets were distributed to 135 children, representing 23% of all county children under age five. Over the past five years, the reach of this community safety program has somewhat declined, from 31% in 2018-19 to just 5% in 2020-21 during the pandemic, but has since been rebounding. There was a 35% increase in saturation this year (23%) compared to last year (17%).

Figure 30. Percentage of Mono County Children Under Five Who Received a Bicycle Safety Helmet through Safe Kids Coalition



Source: Safe Kids California – Mono Partners coordinator report, 2018-2024. Countywide population: US Census Bureau Quickfacts: Population estimates for children 0-5 in Mono County, 2018-2024.

Child Safety Initiatives Progress Summary

In FY 2023-24, Safe Kids Mono enabled more families to access information on how to prevent injury in young children through community safety events, such as Car Seat Checks and Health & Safety Fairs. Moreover, more children and families received safety equipment, such as bicycle helmets and gun safety locks. In the upcoming year, the Commission will continue to invest in this community initiative. As part of the continuous quality improvement of the Safe Kids Mono, outreach efforts will continue to ensure as many families as possible participate in future Health & Safety Fairs.

