

2019-2024 STRATEGIC PLAN

April 3, 2019

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ABOUT FIRST 5 ORANGE COUNTY

First 5 Orange County, which is also known as the Children and Families Commission of Orange County, is a public agency that was created by the passage of Proposition 10 in 1998, which added a 50-cent tax on tobacco products sold in California in order to fund programs and services expressly for children from prenatal through age five and their families. Since our inception 20 years ago, First 5 Orange County has become a leading convener, collaborator, and evaluator, as well as a valued capacity builder and funder of best practices. In these roles, we offer the community deep expertise on the importance of early childhood in human development and the conditions that children and families need to thrive. We cultivate strong relationships with our community partners and support innovative, research-based services that have been shown to improve outcomes. We are beginning to engage with communities to offer them the information and tools they need to become advocates for their young children. And finally, we promote a "system-level perspective" that recognizes the importance of seamless cross-agency coordination to improve the family experience and child outcomes.

OUR VISION All children reach their full potential.

OUR MISSION

We optimize the health and development of young children by promoting the importance of early childhood, encouraging innovation, and investing in systems of care.

WORKING TOGETHER TO IMPROVE THE **EARLY CHILDHOOD SYSTEM**

FIGURE 1: ILLUSTRATION OF EARLY CHILDHOOD SYSTEM

First 5 Orange County is one organization among many comprising Orange County's robust early childhood system. An early childhood system is the partnership among health, social service, family support and early childhood education agencies within a region that is working to develop a seamless network of care for children from birth to kindergarten entry. The graphic to the right illustrates a common conceptualization of the early childhood system, showing three overlapping sectors - early learning and development, health, and family leadership and support - which collectively support thriving children and families.

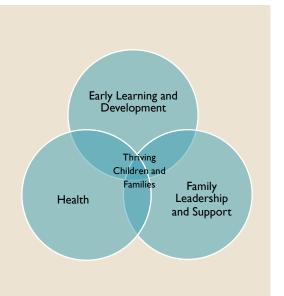
A well-functioning early childhood system has been described as a system that reaches families with the help they need, coordinates services and supports, promotes a climate of support for early childhood, and increases parent engagement and equity.² First 5 Orange County partners with many influencing Results that a Comprehensive Early Childhood **System Should Deliver:**

EARLY LEARNING AND DEVELOPMENT: Nurturing relationships, environments, and enriching experiences that foster learning and development.

HEALTH: Comprehensive services that promote children's physical, developmental, and mental health.

FAMILY LEADERSHIP AND SUPPORT: Resources, experiences, and relationships that strengthen families, engage them as leaders, and enhance their capacity to support children's well-being.

Source: Build Initiative, The Early Childhood Systems Working Group (www.buildinitative.org)



¹ Health Resources and Services Administration (HRSA), Early Childhood Comprehensive Systems (https://mchb.hrsa.gov/earlychildhoodcomprehensivesystems)

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² Center for the Study of Social Policy, EC-LINC System Performance Assessment Toolkit (forthcoming)

organizations to improve the ability of the early childhood system to function well. This work to improve system functioning is often referred to as "systems change," and it is a strategic priority for First 5 Orange County as a key means of maximizing the impact of our investments. Approaches to improving system functioning vary, but they are universally a collaborative effort among the various sectors within the system. For example, an early childhood system that is committed to universal developmental screening at recommended intervals may collaboratively take any of the following actions: evaluate service paths to identify gaps or issues; initiate a public awareness campaign related to the importance of developmental screening; advocate for increased reimbursement rates so pediatricians are incentivized to conduct and report validated screens; create a centralized developmental screening database where there isn't one; develop data sharing agreements between doctor's offices and agencies that provide early intervention to improve referrals and tracking; invest in program expansion; or many other possible interventions.

To improve system functioning and reach, First 5 Orange County looks forward to strengthening existing partnerships in the early childhood system and forging new ones with organizations that have not traditionally viewed early childhood as a part of their core mission. Working together, we can build, improve, and sustain an early childhood system that optimizes outcomes for all Orange County young children and their families.

How We Do Our Work

First 5 Orange County has identified five core values and a set of operating principles to help us fulfill our vision and mission.

CORE VALUES

Integrity: We ensure public trust through transparency in decision-making and commitment to the voters' intent.

Excellence: We are responsible for achieving positive outcomes for young children and consistently set high standards to advance our impact.

Collaboration: We work with community partners, sharing knowledge and striving for high-functioning, results-oriented systems.

Innovation: We continually challenge ourselves and our partners to advance creative solutions to benefit young children and their families.

Knowledge: We are committed to increasing public awareness about the importance of early childhood.

OPERATING PRINCIPLES

The following principles illustrate how we conduct our work:

- We develop common goals that focus on outcomes and results.
- We use best practices and data to inform our conversations.
- We examine all interpretations of the data and multiple options for resolving issues.
- We are thoughtful questioners and value all perspectives.
- We seek consensus whenever possible and support the implementation of that consensus.
- We assess fidelity to our values and operating principles regularly.

First 5 Orange County employs an organizational structure that uses resources efficiently and maximizes performance. First 5 Orange County is led by a small staff of experienced and dedicated personnel, which enables us to be flexible and responsive to issues and challenges as they arise and change overtime. To cost-effectively expand capacity, First 5 Orange County hires consultants to provide specialized technical expertise and assist with implementation of certain programs. Further, First 5 Orange County uses County of Orange administrative supports, such as human resources, risk management, purchasing, information technology, and fiscal services as needed.

About First 5 Orange County

CURRENT REALITIES AND LONG-TERM TRENDS

The future direction of First 5 Orange County is influenced by many current realities and long-term trends, which are detailed and sourced in Appendix A: Key County Trends. We are also influenced by ongoing research, best practices, and innovation within the field of early childhood, as well as by feedback from our community partners and stakeholders. The key influencing factors can be summarized as follows:

- **Declining revenue:** Tobacco tax revenues are declining statewide, which translates to declining revenue for all First 5s in California, including First 5 Orange County. This is placing pressure on First 5s statewide to consider a range of responses, including leveraging investments, targeting services, seeking policy changes to sustain critical services, transitioning F5 programs to other agencies, or discontinuing programs.
- Persistent disparities: Overall, kindergarten readiness is improving steadily; however, the data by neighborhood make it clear that all children do not have the same access to supports within their family or in their community. Consequently, not all Orange County children are entering school ready to achieve their full potential.
- System coordination needs: A growing body of research and practice shows that an
 early childhood system will produce optimal results when universally needed services (e.g.,
 developmental screening and well child checks) and identified services (e.g., early
 intervention and/or medical treatment) are both available and coordinated. Like many
 regional early childhood systems, Orange County's system has opportunities to improve
 coordination.
- **Evolving roles:** Our community sees our engagement in multiple sectors of the county's early childhood system as a natural platform to promote the wellbeing of young children and their families *across* the system. This has not been an area that First 5 Orange County has fully developed in the past.

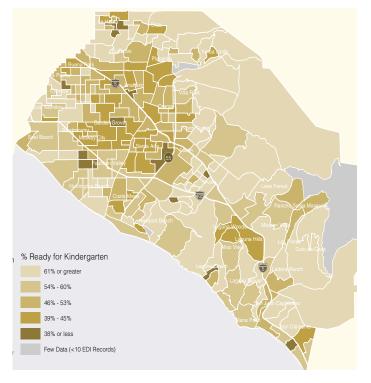
Additional notable countywide trends:

- **Fewer young children:** Demographic projections point to fewer children ages 0-5, largely as a function of a declining birth rate. In 2019, there were an estimated 225,840 children ages 0-5; by 2045, there will be an estimated 193,560.
- Continuing diversity: Over the past 20 years, Orange County has witnessed increasing diversity among young children; however, projections to 2045 anticipate similar racial and ethnic distributions as today, with 43 percent of young children identifying as Hispanic, 33 percent White, 16 percent Asian, six percent multi-racial, and two percent African

FIGURE 2: TOBACCO TAX REVENUE PROJECTION FOR FIRST 5
ORANGE COUNTY



FIGURE 3: CHILDREN READY FOR KINDERGARTEN BY NEIGHBORHOOD IN ORANGE COUNTY, 2018



American.

- **Insufficient supply of early care:** The supply of subsidized care for children 0-2 years falls significantly short, with 36,044 infants and toddlers unserved relative to those eligible. In addition, 19,580 preschool children remain unserved compared to the need for subsidized care.
- Family poverty: Among families with at least one child under age six, 18 percent are living in poverty, rising to 47 percent in families led by a single parent.
- Family homelessness: On average, each month between 40 or 50 families enter the Coordinated Entry System, a database that homeless service providers use to help homeless individuals and families find housing.

STRATEGIC POSITIONING IN RESPONSE TO CURRENT REALITIES AND LONG-TERM TRENDS

The strategic plan concretely identifies how First 5 Orange County will position itself to effectively respond to these trends and current realities. While we have identified some challenges, rather than focusing on what is being lost, we are embracing an intentional asset orientation, which enables us to consider how we can best invest our human and financial resources to have the greatest impact. First 5 Orange County is committed to continue to fund mission-driven direct services that help all Orange County children reach their full potential. However, to achieve greater impact in an era of declining revenue, First 5 Orange County recognizes that some children and families need more support than others to be successful. We also recognize that we must increasingly see ourselves as a catalyst, capacity builder, and strategic investor, deemphasizing direct service provision and more strongly embracing system-level impact.

These strategic positions can be summarized by the following broad, foundational position statements:

- Strategic: We will maximize our impact by investing strategically in programs and services that build and support a thriving early childhood system.
- Collaborative: We will develop and leverage community partnerships to drive change.
- Efficient: We will increasingly invest in strategies and partnerships that help the early childhood system work more effectively and efficiently.
- Focused: We will continue to improve outcomes for all children while focusing on children that need additional support to reach their full potential.
- Catalytic: We will support efforts to leverage other public resources and build capacity to sustain or expand the reach of critical programs and services.
- Leaders: We will embrace and enhance our role as a convener, resource, and leader in early childhood.

These foundational positions undergird all of the strategic plan goals and objectives, strategic directions, and implementation activities.

FIRST 5 ORANGE COUNTY STRATEGIC APPROACH

First 5 Orange County has a commitment and mandate to improve outcomes for Orange County's children prenatal through age five. To respond to that mandate and to remain accountable to the community, we have developed a strategic approach that identifies what we want to achieve, how we will achieve it, and how we will measure our progress. Specifically, the strategic framework contains:

- three broad, long-term goals (the outcomes we want to see in the community),
- nine population-level headline objectives (how we will measure progress on our goals and remain accountable to the community),
- five strategic directions (what we will do to achieve our goals), and
- fifteen agency- or system-level implementation objectives (how we will measure our successful implementation of our strategies).

The **three goals** depicted in the graphic on the following page capture the long-term vision of First 5 Orange County: Resilient Families, Quality Early Learning, and Comprehensive Health and Development. The goals also intentionally align with the Orange County Early Childhood Policy Framework (ECPF). The ECPF collaborative – known as Early Childhood OC – is a coalition of public, private, and nonprofit agencies and individuals that work on children's health, early learning, and family support. The collaborative developed the ECPF to leverage the work that its members are already doing to benefit young children by aligning policies and goals across all sectors, improving communication and coordination, identifying strengths, and addressing gaps. In aligning goals with the ECPF, First 5 Orange County signals its support for the collaborative's goal for the ECPF to be embedded in the policies, strategies, and activities of organizations across Orange County, such that every sector in Orange County will be an advocate for young children.

DEFINITIONS OF LEVELS OF ACCOUNTABILITY

Population-level: Measure of wellbeing for the whole population of young children, or their caregivers, or young children within a particular sub-area, such as all young children with special needs.

System-level: Measure of performance or achievement among sectors within the early childhood system.

Agency-level: Measure of First 5 Orange County performance or achievement.

The headline objectives selected for each goal (see next page) enable transparent tracking and reporting of population-level impact. The nine selected objectives (three for each goal) serve as proxies for measuring progress on the goal. They were selected because they represent important drivers for improving outcomes; they are relevant to priority initiatives for First 5 Orange County, as well as across the early childhood system, and; there are data available to enable tracking progress. Alternative objectives, which were in some cases preferred, were identified during the planning process; however, these objectives were not selected due to a lack of data for measurement. Instead, these objectives populate our Data Agenda and are listed in a sidebar in their relevant goal area

The strategic directions provide the strategies through which we will make progress on each goal. The five strategic directions, and their attendant implementation objectives, build and expand upon our foundational positions. Together, the First 5 Orange County foundational positions and strategic approach represent our theory of change, or how we believe we can best make an impact with the resources we have. Driven by our long-term goals of resilient families, quality early learning, and comprehensive health and development, we have identified strategies that we believe will help us achieve those goals. In adopting this new strategic approach, we recognize that making progress on our goals and headline objectives will require the concerted action of many different actors in addition to First 5 Orange County. We look forward to working within and across sectors to drive change.

Strategic Approach: Introduction

OUR GOALS AND SELECTED HEADLINE OBJECTIVES

Outcomes we want to achieve and the domains we will measure to hold ourselves accountable.







OUR STRATEGIC DIRECTIONS

Strategies that guide how we will work toward achieving our goals and headline objectives.

Committed Leadership	Build community leadership knowledge and action related to early childhood by developing an internal and external leadership voice.
Engaged Neighborhoods	•Use Early Development Index (EDI) results to increase awareness and engage neighborhoods in improving outcomes for their young children
Connected Systems	•Facilitate connected, high-functioning early childhood systems.
Aligned Investments	•Invest First 5 Orange County resources for greatest impact using data-informed, mission-driven decision making
Sustained Funding	•Work to increase access to new or repurposed sources of funding to sustain or grow early childhood services

Strategic Approach: Introduction

GOALS AND HEADLINE OBJECTIVES

As noted in the introduction to the strategic approach, First 5 Orange County's three goals reflect our long-term vision and align with the Early Childhood Policy Framework. They also align with the traditional domains of the early childhood system: family support, early learning, and health. Going forward, First 5 Orange County will continue to build cross-sector connections within the early childhood system, as well as engage with organizations outside of the traditional early childhood arena in pursuit of our core vision that all Orange County children reach their full potential.

RESILIENT FAMILIES

Cultivate parenting skills, promote economic stability, and enhance access to services.

The value of nurturing environments for young children to prevent many mental, behavioral, and emotional disorders has been well documented in the literature. Schools and the community are important nurturing environments, but a child's family is its first and most influential nurturing environment. The early childhood system works to provide access to quality services and supports for families to increase parental knowledge, improve parenting practices, and prevent harm. This kind of support can take many forms. First 5 Orange County will measure progress on our goal for family resilience in the domains of maternal mental health, family support services, and family homelessness.

QUALITY EARLY LEARNING

Ensure children have access to quality early learning experiences and environments.

Research studying long-term outcomes finds that children from low-income families who attend quality preschool are more likely than their peers who did not attend preschool or who attended low quality preschool to have, as adults, higher educational attainment and income, lower involvement with drugs or the criminal justice system, and better mental and physical health. When looking at cost-benefits, quality early childhood education (ECE) programs for low-income children ages 0-5 have been documented to produce a substantial return on investment. We will measure progress on this goal area by focusing on kindergarten readiness, ECE program quality, and early care availability.

COMPREHENSIVE HEALTH AND DEVELOPMENT

Promote the overall physical, social, emotional, and intellectual health of young children.

Decades of research support the benefits of early intervention for children with identified health, developmental, social, emotional, behavioral, speech, vision, and other special needs, yet some children are "missed" and enter kindergarten not having had their special need identified or treated. Developmental screening at recommended intervals with a validated tool is the gateway to critical early intervention services when needed. Physical health, including maintaining a healthy weight, is important for a child's long-term health and well-being. Obesity is associated with many negative health conditions, including Type II diabetes, heart disease, and depression. And we are learning that prevention is critical given the difficulty of lasting weight loss. Furthermore, dental decay is the most common childhood disease and it is preventable. Therefore, we will measure our progress on children's health and development by tracking early identification and intervention, obesity, and dental health.

In the following pages we describe in more detail the population-level objectives for each goal, provide baseline data (if available), and state our three-year target. As noted above, the headline objectives were selected because they are important drivers for improving outcomes, they are relevant to priority initiatives across the early childhood system, and data are available for tracking progress. The objectives are not intended to be exclusive or comprehensive; there are many additional drivers and alternative ways to measure progress on a goal. In some cases, lack of data prevented the selection of a preferred objective and indicator. Those metrics, which form our Data Agenda, are listed in side bars within their relevant goal area. We will work to develop these data over the five-year strategic planning

RESILIENT FAMILIES (RF)

RF I: Increase the rate of mothers receiving mental health services when needed.

To be measured by: RF Ia – Percentage of mothers indicating they went to see a doctor or mental health professional for emotional or mental health counseling or treatment when they felt they needed help according to the California Maternal and Infant Health Assessment (MIHA).

Baseline: 2018 data forthcoming from MIHA **3-year Target:** To be determined

Value of measure: Maternal depression has demonstrated negative impacts on the mother, child, and family overall. Addressing common barriers to care – including not getting screened, insufficient availability of providers, cost or lack of insurance coverage, and stigma around mental health – is a critical need for parents of young children. In selecting this metric, the intent is not to exclude paternal mental health; rather, the intent is to align the measure to available data and existing practices, which are typically focused on maternal depression due to the strong link to child outcomes.

RF 2: Increase the proportion of families receiving home visiting or family support services.

To be measured by: RF 2a – Count of families served by maternal and infant home visiting services countywide (First 5 Orange County and non-First 5 Orange County funded) compared to the number of potentially eligible families, as determined by the May 2018 Pritzker Children's Initiative Profile (numerator) and babies born in the 0-39th percentile of the California Smart Start Index (denominator). RF 2b – Count of families receiving family support services compared to the number of potentially eligible families (determined by same sources as RF 2a).

Baseline: RF 2a: 3,143 families provided home visiting (2017)/8,305 potentially eligible babies (2016)^x

RF 2b: 995 families provided family support services (2016)/8,305 potentially eligible babies (2016)^{xi}

3-year Target: 5% increase
5% increase

Value of measure: The ability to identify and support families in need is a key contribution an early childhood system can provide. High-quality home visiting services have been demonstrated to reduce incidences of child abuse and neglect, improve birth outcomes, improve school readiness for children, and have a high level of return on investment.* Since not all eligible families agree to home visiting services, this metric also measures access to other family support services, such as family specialist support within the pediatric primary care setting.

RF 3: Reduce the number of young children experiencing homelessness and increase the percentage of families that find permanent housing.

To be measured by: RF 3a – Count of families with at least one child age 0-5 experiencing homelessness (e.g., sheltered, unsheltered, or living in a motel) according to the Homeless Management Information System (HMIS). RF3b – Percentage of families with children age 0-5 experiencing homelessness that find permanent housing according to HMIS.

Baseline: RF 3a: 539 families (2018)

RF 3b: 246 permanently housed/539 (46%)

3-year Target: 512 or less (5% decrease)
60% permanently housed

Value of measure: Homelessness has documented negative impacts on children, including mental health, physical health, developmental status, and academic achievement. Stable housing for families with young children is a primary need for family resiliency.

Data Agenda

RF 4: Increase the percentage of pregnant and post-natal women who receive mental health screening and are linked to services when indicated.

RF 5: Reduce the percentage of children with adverse childhood experiences (ACE).

QUALITY EARLY LEARNING (QEL)

QEL I: Increase the percentage of children ready for kindergarten in focus communities.

To be measured by: QEL Ia – Percentage of children ready for kindergarten in lowest performing neighborhoods, as measured by neighborhood-level EDI subscores and overall scores.

Baseline: varies by neighborhood

3-year Target: 5% increase in selected neighborhoods

Value of measure: Kindergarten readiness is correlated with short- and long-term health, education, and economic outcomes.** The Early Development Index is a survey tool that kindergarten teachers complete on each student in their class. The results reveal at the neighborhood level what proportion of children were ready for kindergarten in five developmental areas and 16 sub-areas. The EDI is a powerful tool for engaging with communities and collaboratively identifying place-based strategies to improve readiness.

QEL 2: Increase ECE programs participating in quality assistance programs.

To be measured by: QEL 2a - Percentage of early care and education programs participating in Quality Start OC.

Baseline: 390/4,407, or 9% (2018) **3-year Target:** 12% rated overall

Value of measure: Research finds that children from low-income families who attend quality preschool are more likely than their peers who did not attend preschool or who attended low quality preschool to have higher educational attainment and income, lower involvement with drugs or the criminal justice system, and better mental and physical health.^{xv} Increasing quality among existing programs through participation in quality assistance programs can have lasting impact on children's long-term potential.

QEL 3: Increase alignment of child care supply and demand.

To be measured by: QEL 3a – Change in gap between the number of income eligible infants and toddlers, and the number of subsidized family child care home and center-based slots for infants and toddlers according to Orange County Child Care and Development Planning Council data. QEL 3b – Change in gap between the number of income eligible preschool age children, and the number of subsidized family child care home and center-based slots for preschool age children according to Orange County Child Care and Development Planning Council data.

Baseline: QEL 3a: 37,741 eligible infants/toddlers without slot (2018) **3-year Target:** 10% reduction in gap (0-2) QEL 3b: 19,580 eligible preschoolers without slot (2018) 5% reduction in gap (3-5)

Value of measure: The high cost of child care can press working families to choose care that they would not otherwise, including care that may be of lower quality. Increasing the availability of low-cost or subsidized care provides more, and potentially higher-quality, options for families.

Data Agenda

QEL 4: Reduce the percentage of children expelled from preschool for behavioral issues. (Baseline data available only.)

COMPREHENSIVE HEALTH AND DEVELOPMENT (CHD)

CHD 1: Lower the age of early identification of children with developmental, social, emotional, behavioral, speech, vision, and other special needs.

To be measured by: CHD Ia – Percentage of kindergartners whose teacher believes the child had a developmental delay or special need, but the child did not have an IEP (Individualized Education Program) and is not receiving special education services.³ CHD Ib – Percentage of Orange County children with Medi-Cal coverage who received six or more well-child visits in the first I5 months of life.

Baseline: CHD 1a: 33.3% (EDI, 2018)

CHD 1b: 48.1% (CalOptima, 2018)

3-year Target: CHD 1a: 25.0%

CHD 1b: 62.1% (National Medicaid 50th percentile)

Value of measure: This measure provides insight into how well the service system identifies and responds to children's developmental needs. Children's developmental delays can be addressed best when they are discovered early.** Identifying and addressing developmental needs prior to school entry leads to children being more likely to enter school ready to learn and succeed. Since teachers are not necessarily able to identify health needs, such as poor vision, the HEDIS measure regarding well-child checks serves as a proxy for health screening.

CHD 2: Reduce disparities in rates of obesity among children.

To be measured by: CHD 2a - Percentage of fifth grade students who have obesity, by race/ethnicity, according to California Department of Education

Baseline: 27% Hispanic, 10% Asian, 9% White, 7% Multi (2017) **3-year Target:** 2 percentage point reduction for Hispanic students

Value of measure: Access to healthy food, safe parks, and walkable neighborhoods can improve diet and activity levels, but not all children in Orange County have equal access to these amenities, which contributes to disparities. Given the link between obesity and many chronic diseases, prevention can improve children's overall mental and physical health as they grow into adulthood. (Data are unstable for several racial groups and therefore not included in baseline or targets.)

CHD 3: Increase the percentage of young children who have seen a dentist.

To be measured by: CHD 3a – Percentage of Medi-Cal eligible children ages 3-5 years who had a dental visit in the past year, according to the Orange County Oral Health Needs Assessment.

Baseline: 56.2% (2016) **3-year Target:** 60%

Value of measure: Building good oral health habits, including regularly visiting the dentist, can help prevent caries, the most common disease in children.

Data Agenda

CHD 4: Reduce the number of infants prenatally exposed to alcohol and other drugs.

CHD 5: All children receive developmental screens using a validated tool at intervals recommended by Bright Futures/American Academy of Pediatrics.

Strategic Approach: Goals and Headline Objectives

³ These data, sourced to the Early Development Index, reflect a teacher's impression of the child and not a formal assessment.

STRATEGIC DIRECTIONS AND IMPLEMENTATION OBJECTIVES

While our goals reflect the traditional domains of the early childhood system, our strategies to achieve them are intentionally cross-sector; we will deploy the strategies broadly to support all three goals. The strategies focus on systemic, ecological change versus direct service provision. First 5 Orange County funds many direct services and will continue to do so to achieve the impact we are seeking, but we embrace the pivot to systems-change as a promising strategy to improve the functioning and efficiency of services, and to increase resource allocation to the early childhood system. Our hypothesis is that by employing this approach we can help the system serve more families and with higher quality, and in the process build family resiliency, quality early learning, and comprehensive health and development.

Below we offer the value of each of the five strategic directions and why we selected these strategies.

COMMITTED LEADERSHIP

Build community leadership knowledge and action related to early childhood by developing an internal and external leadership voice.

One of the markers of a well-functioning early childhood system is that leaders throughout the community understand the importance of early childhood and are engaged in efforts to make the community more supportive of young children and their families. This support can translate directly into improved outcomes. Thus, cultivating this support is a key strategy for First 5 Orange County that builds on our foundational positions to strategically leverage community strengths and resources to the benefit of young children and their families.

ENGAGED NEIGHBORHOODS

Use the Early Development Index (EDI) to increase awareness and engage neighborhoods in improving outcomes for their young children.

An early childhood system can make an important contribution to ensuring that all young children and their families have what they need to be successful, recognizing that not everyone starts in the same place, has the same experiences, or has the same needs. A system can also improve services and outcomes when they engage parents in the early childhood system of care and better understand the needs and assets of the individuals they serve. This strategy uses a powerful tool – the Early Development Index (EDI) – to give communities information on how their young children are faring and couples it with cultivating community leaders and empowering them to act on behalf of their young children.

CONNECTED SYSTEMS

Facilitate connected, high-functioning early childhood systems.

This strategy recognizes the additional value a system provides over and above the contributions of a particular agency within a system. We seek to optimize Orange County's early childhood system by improving its ability to reach children and families with the services and supports they need and to coordinate to provide seamless services, improve quality, and avoid duplication.

ALIGNED INVESTMENTS

Invest First 5 Orange County resources for greatest impact using data-informed, mission-driven decision making.

As the First 5 Orange County budget declines, the organization must invest strategically. The objectives identified within this strategic direction aim to: use data to drive specific investments that will have the most impact on our goals and headline objectives; align direct service agreements with a systems-focused funding model and a new performance measurement system that is aligned with the strategic plan; and identify new ways to distribute system-building dollars.

SUSTAINED FUNDING

Work to increase access to new or repurposed sources of funding to sustain or grow early childhood services.

Statewide today we face declining First 5 revenues while simultaneously there is growing recognition of the value of investing in early childhood. This challenging reality requires creative strategies to maintain or grow critical early childhood services using alternative funding sources. The Sustained Funding strategy focuses First 5 Orange County preemptively on the challenge of declining revenue in advance of actual shortfalls expressly to avoid service gaps to every extent possible. This strategic direction is focused on revenue generation through a variety of alternative sources.



NAVIGATING THE STRATEGIC DIRECTIONS AND IMPLEMENTATION OBJECTIVES

In the following pages we describe in more detail the system- or agency-level objectives for each strategic direction, how we intend to measure the objective (i.e., the indicator), and the baseline data and our three-year target, if available. Unlike the population-level, or headline, objectives and indicators associated with the goal areas, these objectives are more focused on an internal level of accountability rather than an external level of accountability. However, like the population-level objectives and indicators, whenever possible, we have selected indicators that measure outcomes rather than outputs (e.g., the number of people changing behavior based on a presentation vs. the number of presentations given). The challenge is that system- or agency-level outcome data are often difficult or impossible to obtain. As a result, in some cases, we have selected output measures with the knowledge that these are proxies for more robust outcome measures and that the implementation activities will remain focused on changing outcomes, regardless of the limitations of the data.

When data are not currently available but can be developed, we have indicated that the baseline data and/or targets require data development during the first year of implementation and a target will be set after that baseline is determined. When baseline data are not possible to collect (e.g., the survey instrument is new and results are not available yet, or First 5 Orange County was not tracking these data to date), we have indicated "not available" for the baseline and either "to be determined" for the target, or we have set a target that assumes tracking begins July 2019.

COMMITTED LEADERSHIP (CL)

CL 1: Increase the First 5 Orange County voice and presence in the community to promote early childhood priorities.

To be measured by: CL Ia – Count of First 5 Orange County staff/consultant presentations on early childhood issues, including the Early Childhood Policy Framework, to non-First 5 Orange County-funded agencies and other critical institutional stakeholders in Orange County.

Baseline: Not available 3-year Target: 30 presentations

Value of the measure: This objective and indicator embodies our foundational position to amplify our leadership voice on behalf of young children and families in Orange County as a critical first step to achieving the policy changes and broad support for early childhood that we seek.

CL 2: Increase the number of traditional and non-traditional champions that advocate for and support early childhood.

To be measured by: CL 2a – Number of traditional and non-traditional organizations using Early Childhood Policy Framework in ways identified in the ECPF 2018-2019 Business Plan: Appendix G, or otherwise. (Note: *Traditional* organizations are those that provide services to young children or otherwise work within the early childhood system as a core part of their mission. *Non-traditional* organizations are those for which early childhood is not typically or historically considered a core part of their mission.)

Baseline: 3 3-year Target: 15 organizations

Value of the measure: Creating a child- and family-friendly community requires the investment of non-traditional actors into early childhood policies, in addition to the investments of traditional actors. The Early Childhood Policy Framework Business Plan lists promising individuals or organizations for outreach and possible pro-child or pro-family policies they could implement.

CL 3: Increase the number of local or statewide policies that support early childhood.

To be measured by: CL 3a – Number of organizations of any type (traditional or non-traditional, public or private, state or local) that have enacted policies that support early childhood, including laws, ordinances, internal policies, funding opportunities or others.

Baseline: Not available; to be developed **3-year Target:** 10 policies

Value of the measure: The true measure of success for our efforts to engage with non-traditional stakeholders and promote the importance of early childhood is whether diverse stakeholders take specific and concrete action on behalf of young children and their families through policy changes, new services and supports, or funding.

ENGAGED NEIGHBORHOODS (EN)

EN 1: Increase family and community knowledge about child development, early intervention, and Early Development Index.

To be measured by: EN Ia – Number of presentations or workshops conducted about child development, early intervention, and the Early Development Index (EDI) to community collaboratives or agencies.

Baseline: 70 presentations (2018)

3-year Target: 210 presentations over 3-year period

Value of the measure: Raising awareness about critical child development milestones, the importance of early intervention when needed, and how a community's young children are faring can change behavior. For example, research around parent knowledge of positive parenting practices and child development demonstrates the link between knowledge and behavior; parents with more knowledge are more likely to engage in positive parenting practices, whereas those with limited knowledge are at greater risk of negative parenting behaviors.^{xvii}

EN 2: Increase the number of communities that have or are working toward shared, measurable goals for early childhood based on Early Development Index and other data.

To be measured by: EN 2a – Number of collaboratives or agencies that have or are working toward plans that target improved kindergarten readiness through the alignment of resources to support early childhood.

Baseline: 3 (First 5 Orange County funded)

3-year Target: 12 communities

4 (First 5 Orange County technical assistance provided)

Value of the measure: First 5 Orange County seeks to turn the awareness of the importance of early childhood into concrete actions by building the capacity of communities that are motivated to improve outcomes for their young children. This measure enables First 5 Orange County to track whether our efforts are resulting in actionable plans to improve kindergarten readiness.

EN 3: Increase alignment of First 5 Orange County resources (funding, technical assistance, participation in collaboratives, or other) to identified neighborhood needs.

To be measured by: EN 3a – Assessment of neighborhood need based on community-level data and a neighborhood's self-identification of need compared to First 5 Orange County formal or informal resources or services dedicated to that neighborhood.

Baseline: Not available; to be developed through implementation

3-year Target: 10 neighborhoods assessed/aligned

Value of the measure: This measure tracks whether First 5 Orange County is responding to local needs by aligning its resources accordingly.

CONNECTED SYSTEMS (CS)

CS I: Increase our understanding of coordination gaps and assets within the Orange County systems that impact early childhood outcomes.

To be measured by: CS Ia – Completion of a self-assessment tool that measures the extent to which the system helps families get to the right place(s) where their needs can be met, and the extent to which the system works together when multiple service providers are involved with the same family.

Baseline: No assessment completed

3-year Target: Assessment completed

Value of the measure: To appropriately focus our system improvement efforts, First 5 Orange County must first understand the strengths and weaknesses of Orange County's early childhood system. This measure will enable First 5 Orange County to establish, in collaboration with system stakeholders, a baseline level of system performance overall and for specific sectors within the system. The self-assessment will also allow system stakeholders to set targets for improvement and identify specific system improvements to help reach those targets.

CS 2: Improve referrals and connections within and across early childhood systems of care.

To be measured by: CS 2a - Improvement in system coordination based on system reassessment three years after initial assessment (CS I).

Baseline: To be determined by CS I

3-year Target: To be set after baseline determined

Value of the measures: Since there are many different networks and pathways in the early childhood system, this objective uses a selection of measures to track performance on how well we are improving referrals and connections across several sectors. The self-assessment process to achieve objective CS I may identify additional indicators to track CS 2 performance.

CS 3: Increase the number of agencies serving young children that align or share data and measurements.

To be measured by: CS 3a – Total number of clients served by active interagency data-sharing agreements. CS 3b – Count of agencies that have aligned client data collection variables, such as uniform intake and referral forms.

Baseline: CS 3a – Not available

3-year Target: CS 3a – To be set after baseline determined CS 3b – To be set after baseline determined

CS 3b – Not available

Value of the measures: The ability to share client data within and across systems, with appropriate safeguards to protect confidential information, facilitates the system's ability to be better informed about a family's full range of strengths and needs, help families get to the right places to have their needs met, and work together more seamlessly.

ALIGNED INVESTMENTS (AI)

Al I: Employ a funding approach that uses data and is aligned with strategic plan objectives and system-building priorities.

To be measured by: Al Ia - Creation of a funding approach that takes into account EDI, evaluation results, and strategic plan priorities.

Baseline: No new funding model exists

3-year Target: Funding model exists, and data are available to evaluate investments

Value of the measure: Consistent and informed investment requires a standardized process by which all investments can be examined. The development of a funding approach that takes into account data, evaluation results, and strategic priorities will support an objective, strategic approach to funding allocation.

Al 2: Achieve alignment of First 5 Orange County agreements and performance measurement system with strategic plan.

To be measured by: Al 2a – Revision of performance management system to align with strategic plan and application of new performance management metrics to all new agreements.

Baseline: N/A

3-year Target: New performance measurement system deployed

Value of the measure: Critical to program accountability is having a performance measurement system aligned with strategic plan priorities. Doing so focuses the activities of funded partners on the outcomes and strategies that will help First 5 Orange County achieve its objectives.

Al 3: Increase system-building work through First 5 Orange County investments.

To be measured by: Al 3a – Development and deployment of a process that most effectively invests First 5 Orange County dollars in system-building work.

Baseline: No new process exists

3-year Target: New process exists and is deployed.

Value of the measure: Investing in system-building activities can have a multiplier effect by improving the ability of the early childhood system to work more effectively for more families. First 5 Orange County will develop a process that will help us invest our capacity-building dollars in a way that provides the greatest return on investment.

SUSTAINED FUNDING (SF)

SF 1: Increase prioritization of early childhood among state and federal funders to focus on primary prevention.

To be measured by: SF Ia – Change in state funding of home visiting. SF Ib – Change in child care slots allocated to infants and toddlers. SF Ic – Gap in families eligible for subsidy programs and not enrolled, including CalFresh, CalWORKs, and Medi-Cal.

Baseline: SFIa: \$2.25 million (CalWORKs Home Visiting Initiative) **3-year Target:** SFIa: 25% increase overall

SFIb: Not currently available; to be determined
SFIc: Not currently available; to be determined
SFIc: To be determined

Value of the measure: Investing in early childhood supports protective factors and prevents negative factors, as demonstrated in studies of return on investment for early care and education, home visiting, and early childhood services overall.** Through this measure, First 5 Orange County will document increased commitments to a protective and preventative model across sectors of health, education, and family support.

SF 2: Increase proportion of existing funding that is dedicated to early childhood by local agencies not directly affiliated with First 5 Orange County.

To be measured by: SF 2a – Tally of school district discretionary dollars dedicated to early childhood. SF2b – Tally of Mental Health Services Act dollars dedicated to early childhood.

Baseline: Not currently available; to be determined

3-year Target: Increase in redirected funds as of July 2019

Value of the measure: This measure will specifically track funding reallocations among local agencies and foundations to support a protective and prevention model.

SF 3: Increase fiscal independence among First 5 Orange County-funded partners through leveraged or alternative funding sources.

To be measured by: SF 3a - Change in leveraged dollars and/or non-First 5 Orange County funding for specific First 5 Orange County supported initiatives.

Baseline: To be determined during renewal process

3-year Target: To be determined during renewal process

Value of the measure: The sustainability of high-value First 5 Orange County funded programs is critically important to maintaining and improving our impact in the community. In light of declining revenue, this measure will enable us to track our success leveraging dollars or securing alternative funding sources, whether public or private, for identified high-value investments.

STRATEGIC PLAN IMPLEMENTATION

This section identifies the actions First 5 Orange County will take in the first two years of the five-year strategic plan to implement the strategic directions.

FIGURE 5: TIMELINE OF IMPLEMENTATION ACTIONS, JULY 2018-JUNE 2021

Strategic Directions	Immediate	Year I (July 2019-June 2020)				Y	ear 2 (July	2020-June 2021)
	Build relationships with countywide leaders (current and future) to increase representation of early childhood advocates in countywide leadership positions. (CL-A)							
Committed Leadership	Create communications materials to broadcast consistent messages to leaders, as well as targeted messages that are relevant to a sector's priorities. (CL-B)		0	r		Build relationships with local leaders (current and future) to increase representation of early childhood advocates in local leadership positions (e.g., chambers, city councils, and school districts). (CL-C)		
Engaged Neighborhoods	(LIN-73)							
Neighborhoods		Develop capacity to conduct commoutreach and elevate community lead (EN-B)	ndore	le appropriate supports for ident unications). (EN-C)	tified communit	ommunities (funding mechanism, technical assistance, outreach, city-specific		
Connected Systems		00 ,		aduct system coordination shared agend improvement		to formulate a a for system Research and deploy data alignment and sharing pilot and		
	Create funding approach that aligns investments with data, evaluation results, and strategic priorities. (Al-A) Align First 5 Orange County investments with funding approach through renewal processing approach through renewal process.				ewal processes. (Al-D)			
Aligned Investment	Revise performance measurement system to align with strategic plan. (Al-B) Revise all agreements to be aligned with new performance measurement metrics. (Al-E)							
	Develop process for investment in system building work. (Al-C) Deploy process for investment in system building work.				it in system-bui	ilding work. (Al-	F)	
	Develop 0-3 child care funding leveraging plan to identify dollars, assess availability, and work to obtain it. (SF-A)							
Sustained Funding	Develop strategies to increase use of entitled benefits in existing programs. (SF-B)					L		
	Develop a state home visiting funding leverage availability, and work to obtain it. (SF-C)					to identify dolla	rs, assess	
Data Agenda	Take advantage of opportunities to develop data as they arise within this planning period, while commencing dedicated data development activities in the subsequent 2-year implementation planning cycle. (DA-A)							

IMPLEMENTATION, MONITORING, AND ACCOUNTABILITY PLAN

The table below describes the overarching actions. For task accountability, the table identifies the timeframe for the work and a final reporting date. Weekly staff meetings provide additional opportunities for progress reporting. Detailed implementation plans for each action falling within the 2019/20 year are compiled in a separate document. These plans have progress milestones to guide reporting throughout implementation, prior to the final reporting date.

For objectives accountability, quarterly strategic plan progress report-outs, supported by a streamlined online performance management system (see objective AI 2), will enable regular tracking of progress on headline and implementation objectives. Additionally, First 5 Orange County will produce an annual report that summarizes key accomplishments towards the strategic plan objective. In compliance with Proposition 10 – The Children and Families Act of 1998 (H & S Code 130140), the strategic plan, including the implementation plan, will be reviewed annually and modified as needed to respond to current circumstances.

FIGURE 6: IMPLEMENTATION ACTIONS, JULY 2018-JUNE 2021

	irection: Committed Leadership unity leadership knowledge and action related to early childhood by developing an internal and external leadership voice.	Reporting Date
CL-A:	Starting in July 2019 and through June 2020, build relationships with countywide leaders (current and future) to increase representation of early childhood advocates in countywide leadership positions.	June 30, 2020
CL-B:	Starting in April 2019 and by December 2019, create countywide communications materials (by First 5 Orange County and with partners) to broadcast consistent messages to leaders, as well as targeted messages in language that is relevant to a sector's priorities.	December 15, 2019
CL-C:	Starting in July 2020 and by June 2021, build relationships with local leaders (current and future) to increase representation of early childhood advocates in local leadership positions (e.g., chambers, city councils, and school districts).	June 30, 2021
	irection: Engaged Neighborhoods evelopment Index (EDI) results to increase awareness and engage neighborhoods in improving outcomes for their en.	Reporting Date
EN-A:	Starting in April 2019 and by September 2019, develop a community identification process that considers data, assets, and readiness, and identify communities based on that process.	September 15, 2019
EN-B:	By December 2019, develop staff capacity to conduct community outreach and elevate community leaders.	December 31, 2019
EN-C:	Starting January 2020 and ongoing, provide appropriate supports for identified communities (funding mechanism, technical assistance, outreach, city-specific communications).	June 30, 2021

	rection: Connected Systems nected, high-functioning early childhood systems.	Reporting Date
CS-A:	By December 2019, identify system stakeholders and conduct outreach to engage in system assessment and quality improvement work.	December 20, 201
CS-B:	By May 2020, conduct system coordination assessment.	May 30, 201
CS-C:	Between June 2020 and December 2020 (tentative), convene system stakeholders to formulate a shared agenda for system improvements based on assessment results.	December 18, 202
CS-D:	Starting October 2020, research and deploy data alignment and sharing pilot; bring to scale.	June 30, 202
	rection: Aligned Investments	
vest First 5	Orange County resources for greatest impact using data-informed, mission-driven decision making	Reporting Date
vest First 5	Orange County resources for greatest impact using data-informed, mission-driven decision making By February 2020, create funding approach that aligns investments with data, evaluation results, and strategic priorities.	February 5, 202
vest First 5	Orange County resources for greatest impact using data-informed, mission-driven decision making By February 2020, create funding approach that aligns investments with data, evaluation results, and strategic	
vest First 5	Orange County resources for greatest impact using data-informed, mission-driven decision making By February 2020, create funding approach that aligns investments with data, evaluation results, and strategic priorities. Starting in February 2019 and completed by July 2019, revise performance measurement system to align with	February 5, 202
Al-A: Al-B:	Orange County resources for greatest impact using data-informed, mission-driven decision making By February 2020, create funding approach that aligns investments with data, evaluation results, and strategic priorities. Starting in February 2019 and completed by July 2019, revise performance measurement system to align with strategic plan.	February 5, 202
Al-A: Al-B: Al-C:	Orange County resources for greatest impact using data-informed, mission-driven decision making By February 2020, create funding approach that aligns investments with data, evaluation results, and strategic priorities. Starting in February 2019 and completed by July 2019, revise performance measurement system to align with strategic plan. Starting in April 2019 and completed by January 2020, develop process for investment in system-building work. Starting in March 2020 and ongoing, begin to align First 5 Orange County investments with funding approach through	July 31, 201

Strategic Dire Work to increas	Reporting Date	
SF-A:	Develop strategies to increase entitled benefits in existing programs.	July 1, 2020
SF-B:	Develop 0-3 child care funding leveraging plan to identify dollars, assess availability, and work to obtain it.	July 1, 2020
SF-C:	Develop state home visiting funding leveraging plan to identify dollars, assess availability, and work to obtain it.	December I, 2020
Data Agenda		Reporting Date
DA-A:	Take advantage of opportunities to develop data as they arise within this planning period, while commencing dedicated data development activities in the subsequent 2-year implementation planning cycle.	N/A

APPENDIX A: STRATEGIC PLANNING COMMUNITY INPUT

As a public agency, First 5 Orange County strives for transparency, responsiveness, and quality improvement by engaging with and listening to our community partners and the families we serve. The strategic planning process involved extensive community input:

- An open house with over 150 attendees, representing government, funders, non-profit organizations, academic researchers, and other stakeholders
- Two focus groups with key First 5 Orange County consultant partners
- A bilingual (English/Spanish) community-wide survey with 124 respondents, including non-profit staff and board members, government representatives, business leaders, academics, and parents and residents

KEY FINDINGS

Just under half (42 percent) of survey respondents said they were either "not at all" and "somewhat" familiar with First 5 Orange County, demonstrating the survey reached people outside of the immediate orbit of First 5 Orange County. However, 73 percent said First 5 Orange County's work was "very" or "extremely" relevant to their life and work.

Those that know about First 5 Orange County's work are very appreciative and laudatory of it, and almost everyone who viewed initial outlines of the strategic plan was positive about it.

The strategic approach of the plan received general validation from all groups. Open house attendees and survey respondents agreed that the goals and strategic directions were important, relevant for First 5 Orange County, and that First 5 Orange County was well positioned to address them. Most saw a place for their organization to partner on the plan, which was also a key theme that emerged from the open house. In addition to offering to start or continue partnering with First 5 Orange County, attendees identified new, less traditional partnerships worth exploring, including faith-based organizations, small and large businesses, individual child care centers, and Family Resource Centers. Many also suggested First 5 Orange County should start working more directly with families and residents, building on the work described in the "Engaged Neighborhood" strategic direction.

Safety was a frequent topic of feedback from the open house, with attendees pointing out that "sheltered" children were not always "safe" from domestic violence and crime in their neighborhoods and that school, preschool, and before and after care programs are often the places where children are the safest. First 5 Orange County's work to increase home visiting and family support services, as well as work engaging with neighborhood collaboratives, will help address these important considerations around child safety at home and in the neighborhood.

Feedback from the open house and survey demonstrated some disagreement about how First 5 Orange County resources should be distributed within the county. Some felt that services should be prioritized to focus on communities that have the greatest need, perhaps as indicated by EDI scores, or toward the most diverse communities. Others indicated that First 5 Orange County should not focus on any specific communities and should work countywide. In recognition of this debate, this plan lays out strategies that will allow First 5 Orange County to work across the county and on population-wide metrics while also recognizing that some communities may benefit greatly from a more focused and intensive approach in order to achieve the vision that all children reach their full potential.

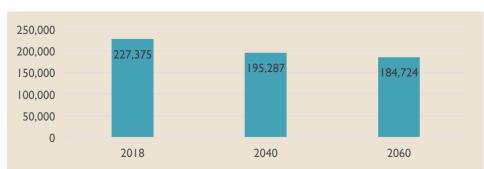
Feedback on potential mission and vision concepts has been incorporated in the final vision and mission statements. Finally, some people thought certain terms and phrases in the initial draft documents were unclear. Where possible, such feedback has been taken into consideration in this plan and language has been clarified.

APPENDIX B: KEY COUNTY TRENDS

DEMOGRAPHICS

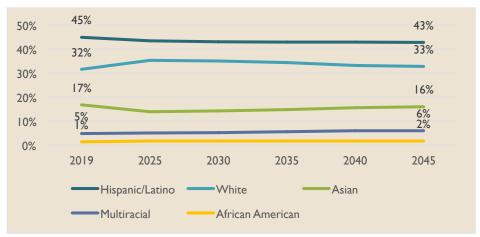
POPULATION

FIGURE 7: PROJECTION OF NUMBER OF CHILDREN AGES 0-5 IN ORANGE COUNTY, 2018, 2040 AND 2060



Source: California Department of Finance, Table P-2

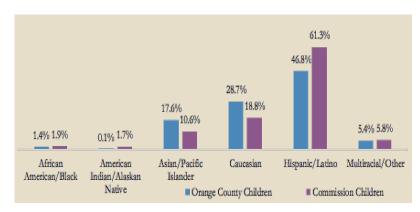
FIGURE 8: PROJECTIONS OF RACE/ETHNIC PROPORTIONS OF 0-5 POPULATION IN ORANGE COUNTY FROM 2019 TO 2045



Source: California Department of Finance, Table P-3

The overall population of children ages 0-5 is projected to decline in Orange County, falling 19 percent between 2018 and 2060. Meanwhile, the historic increase in racial and ethnic diversity is projected to stabilize. Latino children comprise the largest proportion of children from birth through age five (47 percent), followed by White, Non-Hispanic children (19 percent) and Asian/Pacific Islander children (11 percent). Six percent of children are multi-racial or some other race or ethnicity, while two percent of children birth through age five are African American/Black and two percent are Native American. These proportions are similar to projected proportions in 2045.

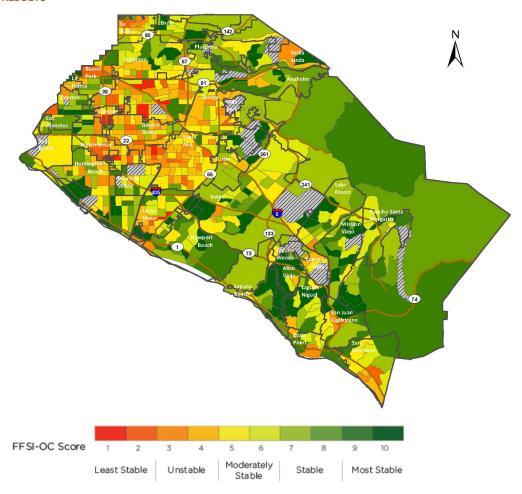
FIGURE 9: PERCENT OF CHILDREN AGES 0-5 IN ORANGE COUNTY BY RACE/ETHNICITY, 2017



FAMILY ECONOMIC AND HOUSING STABILITY

FAMILY FINANCIAL STABILITY INDEX

FIGURE 10: FAMILY FINANCIAL STABILITY INDEX – ORANGE COUNTY: 2016 NEIGHBORHOOD-LEVEL RESULTS

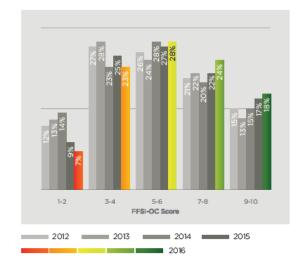


Source: Parsons Consulting, Inc. for Orange County United Way

In 2016, Family Financial Stability Index for Orange County (FFSI-OC) reveals that 30% of neighborhoods had low levels of family financial stability (scores of I, 2, 3, and 4). The FFSI-OC measures the financial stability of families with children under 18 by Orange County neighborhood and is a composite of three metrics: family income, employment status, and amount of household income spent on rent. The 2016 FFSI-OC score of 30% is an improvement since tracking began in 2012, when 39% of neighborhoods were unstable, compared to 41% in 2013, 37% in 2014, and 34% in 2015. The improvement in financial stability is driven by increasing employment among families, while the FFSI-OC sub-scores in income and rent burden have not shown any lasting improvement over the past five years.

FEWER NEIGHBORHOODS SCORE 1 OR 2, THE LEAST STABLE CONDITION

Percent of Orange County Neighborhoods by FFSI-OC Score, 2012-2016



POVERTY

FIGURE 11: PERCENTAGE OF FAMILIES WITH CHILDREN IN POVERTY IN ORANGE COUNTY, 2015-2017

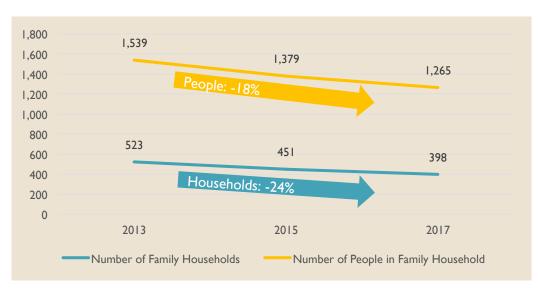


In Orange County, seven (7) percent of families with children under age five were in poverty and 18 percent of families with children under age five and children ages five to 17. The poverty rate for young families jumps up to 25 percent for households lead by a female with no partner present. For single mother-headed families with older children as well, the rate nearly doubles, to 47 percent. For context, the Federal Poverty Level for a family of four in 2018 was approximately \$25,100.

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates

HOMELESSNESS

FIGURE 12: NUMBER OF HOMELESS FAMILIES WITH CHILDREN IN ORANGE COUNTY AND NUMBER OF PEOPLE IN HOMELESS FAMILIES WITH CHILDREN IN ORANGE COUNTY, 2013-2017



Source: Orange County Continuum of Care, 2017 Homeless Count and Survey

Family homelessness is difficult to track. Unsheltered homeless families typically do not congregate with other homeless populations, their homelessness is often episodic and cyclical, and they may actively hide from counts because of an unwarranted fear that their children will be taken away. However, the Homeless Families Count conducted over a three-day period in 2017 by a consortium of public and private Orange County agencies, helped 131 homeless families connect with housing and helped another 36 families at-risk of homelessness prevent homelessness. The Family Solutions Collaborative reports that, on average, between 40 and 50 new families enter the Coordinated Entry System each

month.

Average number of homeless families entering the Coordinated Entry System each month:

40-50

Source: Family Solutions Collaborative K-12 students living unsheltered in 2017/18: **357**

Source: OC Dept of Education

CHILD OUTCOMES

KINDERGARTEN READINESS

FIGURE 13: CHILDREN READY FOR KINDERGARTEN BY NEIGHBORHOOD IN ORANGE COUNTY, 2018

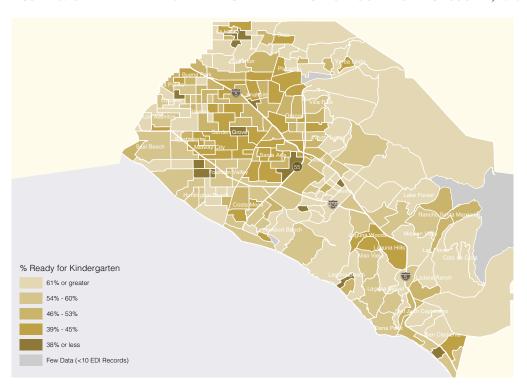


FIGURE 14: EARLY DEVELOPMENT INDEX (EDI) DISPARITIES IN KINDERGARTEN READINESS BY RACE/ETHNICITY, FAMILY INCOME, AND NEIGHBORHOOD IN ORANGE COUNTY, 2018



Overall, 53.2 percent of Orange County children entered kindergarten in 2018 developmentally ready to learn. This marks an increase from 2015, when 51.9 percent of children were ready.

Results vary considerably by neighborhood. The range spans from 81 percent ready in Dove Canyon/Coto de Caza to 25 percent ready in the Cypress/Sonora neighborhood of La Habra.

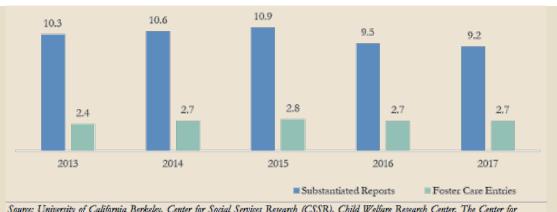
There is also variability by race or ethnicity and family income status, but less so than by neighborhood. Asian/Pacific Islander children are the most likely to enter kindergarten ready to learn (65 percent), followed by White, Non-Hispanic children (61 percent). Hispanic children were least likely to be developmentally ready for school (45 percent).

Children from low-income families (defined as families eligible for and enrolled in the Free or Reduced-Price Meals program) were less likely to be ready than their non-low-income peers (42 percent vs. 62 percent).

The EDI tracks a child's readiness in five developmental areas. Within these areas, children are most ready in gross and fine motor skills (52 percent) and overall social competence (47 percent). They are least ready in their communication skills and general knowledge (41 percent ready) and prosocial and helping behavior (42 percent ready).

ABUSE AND NEGLECT

FIGURE 15: SUBSTANTIATED REPORTS AND FOSTER CARE ENTRIES (RATE PER 1,000 CHILDREN UNDER AGE SIX) IN ORANGE COUNTY, 2013-2017

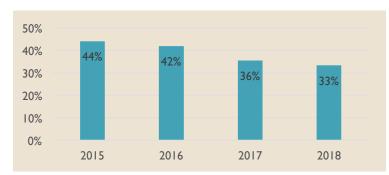


Source: University of California Berkeley, Center for Social Services Research (CSSR), Child Welfare Research Center. The Center for Social Services Research continually refines its data reporting, thus the figures presented in this chart do not necessarily align with the data presented in the 2015-16 Annual Report supplement.

Over the past five years, there has been a decrease of 10 percent in the rate of substantiated child abuse and neglect allegations among children under the age of six in Orange County. At the same time, entry to foster care among children ages 0-5 has remained steady over the past few years.

EARLY IDENTIFICATION

FIGURE 16: PERCENTAGE OF KINDERGARTNERS WITH A PRESUMED UNIDENTIFIED DEVELOPMENTAL DELAY IN ORANGE COUNTY, 2015-2018



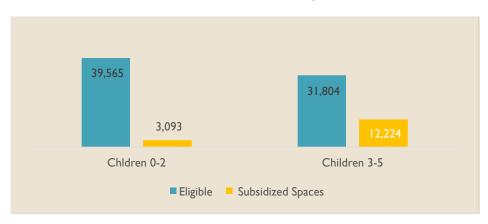
Source: Early Development Index, UCLA Center for Children, Families, and Communities and First 5 Orange County

In 2018, an estimated 33% of kindergartners may have had an unidentified delay. The percentage reflects the proportion of kindergartners whose teacher thought the child had a developmental delay or special need, but the child did not have an IEP (was not receiving special education services). This measure allows us to assess how well we, as a county, are doing identifying children with developmental needs at an early age. The declining percentage of kindergartners with unidentified delay witnessed between 2015 and 2018, and the steady percentage of children whose teacher believes they have a special need, suggests that the Orange County early childhood system has improved its ability to identify and serve children with developmental delays.

EARLY CARE AND EDUCATION

SUPPLY AND DEMAND

FIGURE 17: DEMAND AND AVAILABILITY OF SUBSIDIZED EARLY CHILDHOOD CARE AND EDUCATION IN ORANGE COUNTY FOR CHILDREN AGES 0-5, 2018



Orange County experiences a challenge in the availability of subsidized child care vouchers and space for children ages 0-5 years. This is particularly evident for infants and toddlers ages 0-2 years. The supply of subsidized care for children 0-2 years falls significantly short, with 36,472 infants and toddlers unserved relative to those eligible. In addition, 19,580 preschool children remain unserved compared to the need for subsidized care.

QUALITY

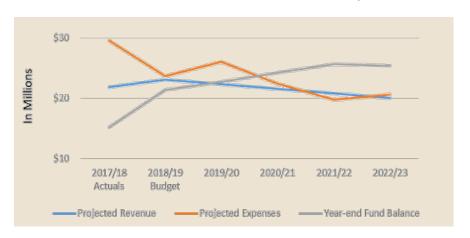
FIGURE 18: QUALITY START OC, 2017/18

	Rated High Quality	Not Rated high Quality	Not Rated
Child Care Sites	247	112	4,017

The number of Orange County ECE providers participating in Quality Start OC Quality Rating Improvement System (QRIS) is increasing; however, there are still many providers that are not participating, and therefore, not rated or receiving the professional development, training, and supports the program provides to improve quality.

LONG TERM FINANCIAL PLAN

FIGURE 19: FIRST 5 ORANGE COUNTY LONG-TERM FINANCIAL PLAN, FY 2017/18 - 2022/23



In Fiscal Year 2017/2018, actual First 5 Orange County tobacco tax revenue decreased 11.79%. Proposition 10 tobacco tax revenue is projected to continue to decline at an average annual rate of 3.5%. First 5 Orange County supplements the decline in annual revenue through annual withdrawals from our Long-Term Commitment account.



FIGURE 20: FIRST 5 ORANGE COUNTY REVENUE PROJECTION S, 2018/19-2021/22

APPENDIX C: STRATEGIC APPROACH (DETAILED)

OUR GOALS AND HEADLINE OBJECTIVES

Outcomes we want to achieve and the headline objectives we will use to hold ourselves accountable.

Resilient Families

Cultivate parenting skills, promote economic stability, and enhance access to services

RF I: Increase the rate of mothers receiving mental health services when indicated.

RF 2: Increase the proportion of families receiving family support services when needed.

RF 3: Reduce the number of children experiencing homelessness.

Quality Early Learning

Ensure children have access to quality early learning experiences and environments

QEL 1: Increase the percentage of children ready for kindergarten in focus communities.

QEL 2: Increase early childhood care and education programs participating in quality assistance programs.

QEL 3: Increase alignment of child care supply and demand.

Comprehensive Health and Development

Promote the overall physical, social, emotional, and intellectual health of young children

CHD 1: Lower the age of early identification of children with developmental, social, emotional, behavioral, speech, vision, and other special needs.

CHD 2: Reduce disparities in rates of overweight or obesity among children.

CHD 3: Increase the percentage of young children receiving dental care.

OUR STRATEGIC DIRECTIONS

Strategies that guide how we will work toward achieving our goals and headline objectives.

Committed Leadership

Build community leadership knowledge and action related to early childhood by developing an internal and external leadership voice.

CL 1: Increase the number of traditional and non-traditional champions that advocate for and support early childhood.

CL 2: Increase First 5 Orange County's voice and presence in the community to promote early childhood priorities.

CL 3: Increase the number of local policies that support early childhood

Engaged Neighborhoods

Use Early Development Index (EDI) results to increase awareness and engage neighborhoods in improving outcomes for their young children.

EN 1: Increase family and community knowledge about child development, early intervention and Early Development Index.

EN 2: Increase the number of communities that have or are working toward shared, measurable goals for early childhood based on Early Development Index and other data.

EN 3: Increase alignment of Commission resources (funding, technical assistance, participation in collaboratives, or other) to identified neighborhood needs.

Connected Systems

Facilitate connected, highfunctioning early childhood systems.

CS 1: Increase our understanding of coordination gaps and assets within the Orange County early childhood system.

CS 2: Improve referrals and connections within and across early childhood systems of care.

CS 3: Increase the number of agencies serving young children that align or share data and measurements.

Aligned Investments

Invest First 5 Orange County resources for greatest impact using data-informed, mission-driven decision making

Al I: Employ a funding approach that uses data and is aligned with strategic plan objectives and system-building priorities.

Al 2: Achieve alignment of First 5 Orange County agreements and performance measurement system with strategic plan

Al 3: Increase system-building work in our community through catalytic investment

Sustained Funding

Work to increase access to new or repurposed sources of funding to sustain or grow early childhood services.

SF 1: Increase prioritization of early childhhood among local, state, and federal funders, focusing on primary prevention.

SF 2: Increase investments in early childhood through the redirection of existing funding by non-Commission agencies.

SF 3: Increase fiscal independence among Commission-funded partners through leveraged or alternative funding sources.

OUR FOUNDATIONAL POSITIONS

Broad statements about our future direction and focus that are embedded into our strategies and actions.

Strategic: We will maximize our impact by investing strategically in programs and services that yield measurable

Collaborative:
We will develop
and leverage
community
partnerships to
drive change

Efficient: We will increasingly invest in strategies and partnerships that help the early childhood system work more effectively and efficiently

Focused: We will continue to mprove outcomes for all children while focusing on children that need additional support to reach their full potential.

efforts to leverage other public resources and build capacity to sustain or expand the reach of critical programs and services.

embrace and enhance our role as a convener resource, and leader in early childhood outcomes.

APPENDIX D: REFERENCES

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