



First 5 Napa County

2015-2016 Program Summary Report

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Table of Contents

Table of Contents	2
Introduction.....	4
Background.....	4
Investment	6
Quality Counts.....	8
Part I: Overview by Focus Areas.....	11
Access to Healthcare for Young Children.....	12
Infant, Family and Early Childhood Mental Health	14
Early Childhood Learning and Education.....	16
Early Detection, Intervention and Health Education.....	19
Part II: Program Evaluation	22
Focus Area: Access to Healthcare for Young Children.....	23
Community Health Initiative.....	24
The Children’s Health Insurance System of Napa Valley	24
Focus Area: Infant, Family and Early Childhood Mental Health	26
Mentis, Napa’s Center for Mental Health Services	27
The Family and Infant Mental Health Counseling Program	27
Napa County Health & Human Services Public Health Division.....	29
Therapeutic Child Care Center Project.....	29
Focus Area: Early Childhood Learning and Education.....	33
American Canyon Family Resource Center	34
Family Strengthening Project.....	34
Child Start, Inc.	39
Raising A Reader	39
Community Resources for Children.....	42
Active Minds, Toy Library & Early Learning Center.....	42
Community Resources for Children.....	48
CARES Plus (Comprehensive Approaches to Raising Educational Standards).....	48
On the Move.....	54
Latino Family Literacy Project.....	54
UpValley Family Centers	56
Parents as Educators	56
Focus Area: Early Detection, Intervention and Health Education.....	60
Community Resources for Children.....	61
Active Bodies & Children and Weight Coalition Support	61
Cope Family Center.....	66
Healthy Families Napa- Home Visitation.....	66
ParentsCAN.....	70

2015-2016 Program Summary Report

Healthcare Program 70
Queen of the Valley Medical Center Community Outreach.....73
 Mobile Dental Clinic 73
Part III: Sponsorships75
 Sponsorship Summaries 76
Part IV: Conclusion.....80

Introduction

Background

In November of 1998, California voters passed Proposition 10: The California Children and Families Act¹ which takes a 50-cent tax on tobacco products and distributes those funds to children 0-5 years old and their families throughout California. The Act funds crucial programs through comprehensive and integrated networks that provide needed health care, quality child care and provider and caregiver education to serve at-risk families and children prenatal through 5 years of age. The local First 5 Napa County Commission has been working to support children and families in Napa County through the role of convener, facilitator, and funder since 2000.

First 5 Napa funds local agencies through a strategic funding plan that is outlined in the First 5 Napa County 2011-16 Community

Plan. Children and families are served through programs and initiatives under the longstanding First 5 goals of (1) Early Childhood Learning and Education; (2) Early Childhood Health; and (3) Parent and Community Education. Since fiscal year 2012-13, First 5 Napa County has integrated four new focus areas and several strategies under the overarching goals into the community. These focus areas are

the culmination of a 2-year planning process, and through strategic funding have become the foundation for the investment and work to accomplish the mission and vision for children and families in Napa County.

<p>2011-16 Community Plan Goals & Focus Areas</p> <p>Goals:</p> <ol style="list-style-type: none"> 1) Early Childhood Learning and Education 2) Early Childhood Health 3) Parent and Community Education <p>Focus Areas:</p> <ol style="list-style-type: none"> 1) Access to Healthcare for Young Children 2) Infant, Family and Early Childhood Mental Health 3) Early Childhood Learning and Education 4) Early Detection, Intervention and Health Education
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¹ Excerpted from First 5 California website: http://www.first5california.com/about/about_first5.html

2015-2016 Program Summary Report

The four focus areas are: 1) *Access to Healthcare for Young Children* that increases access and utilization of health insurance; 2) *Infant, Family and Early Childhood Mental Health* that supports screening, referrals, treatment and education in early childhood mental health; 3) *Early Childhood Learning and Education* which aims to improve early childhood education through provider and family support and education; and (4) *Early Detection, Intervention and Health Education* that provides comprehensive perinatal services and various health topic services and education to families.

In this First 5 Napa County 2015-16 Program Summary Report, the 4 focus areas of *Access to Healthcare for Young Children, Infant, Family and Early Childhood Mental Health, Early Childhood Learning and Education* and *Early Detection, Intervention and Health Education* are presented through an outcomes-based evaluation summary. This report is a summary of all programs, activities and materials funded by First 5 Napa County in the 2015-16 funding year. Comprehensive descriptions of each program with outcomes and activities are included. Also included is how each program implemented strategies to fulfill the Commission's goals and focus areas outlined in the 2011-16 Community Plan.

Investment

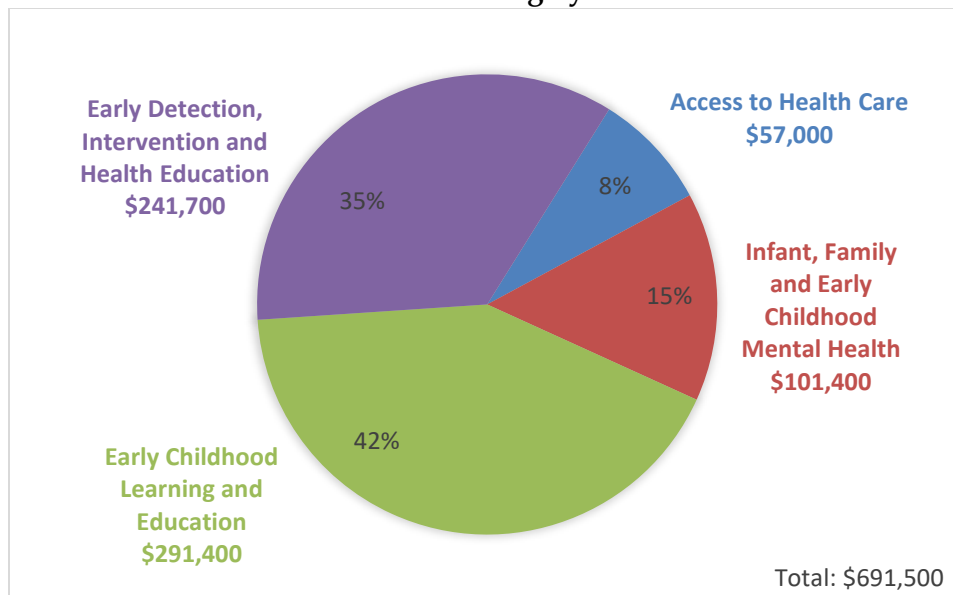
In this last year, First 5 Napa County distributed \$741,500 in total; \$691,500 in grants through a full fiscal year funding cycle and \$50,000 through sponsorship grants.

Funding discussions about fiscal year 2015-16 began in November 2014 with a review of the previous evaluation data in the program summary report for fiscal year 2014-15, and the 2011-16 Community Plan. In subsequent months, First 5 staff met with funded agencies to discuss the Commission plans for the funding process. Letters and requests for proposal (RFP) applications were sent to agencies in April 2015. Each agency applied under one of the four focus areas (Access to Healthcare for Young Children, Infant, Family and Early Childhood Mental Health, Early Childhood Learning and Education and Early Detection, Intervention and Health Education). The review committee was comprised of First 5 Napa staff and Commission members. The committee reviewed, scored and discussed RFP applications. The review committee provided the full First 5 Napa Commission with recommendations for funding in May 2015 for grants to begin July 1, 2015.

There were 13 programs² funded through the main grant process for a total of \$691,500.

Below in graph form are the funding amounts by focus area.

2015-16 Grant Funding by Focus Area



² CARES Plus is funded through match by First 5 California; \$50,000 from First 5 California and \$23,000 for the PCAN grant was funded through the First 5 California IMPACT grant. All funds are presented in this graph.

2015-2016 Program Summary Report

In the table below are investments by agency

2015-16 Investment by Focus Areas

Agency	Program	Funds
Access to Health Care		
Community Health Initiative	Children's Health Insurance System of Napa Valley	\$57,000
Total:		\$57,000
Infant, Family and Early Childhood Mental Health		
Mentis, Napa's Center for Mental Health Services	Family and Infant Mental Health Counseling Program	\$42,700
Napa County, Health and Human Services, PH Division	Therapeutic Child Care Center	\$58,700
Total:		\$101,400
Early Childhood Learning and Education		
American Canyon Family Resource Center	American Canyon Family Strengthening Project	\$43,600
Child Start Inc.	Raising A Reader	\$43,000
Community Resources for Children	Active Minds, Toy Library & Early Learning Center	\$65,500
Community Resources for Children	CARES Plus	\$100,000 ³
On the Move	Latino Family Literacy Project	\$12,000
UpValley Family Centers	Parents as Educators	\$27,300
Total:		\$291,400
Early Detection, Intervention and Health Education		
Community Resources for Children	Active Bodies/Children & Weight Coalition Support	\$55,400
Cope Family Center	Healthy Families Napa- Home Visitation	\$68,400
ParentsCAN	Healthcare Program	\$73,000 ⁴
Queen of the Valley Medical Center	Queen of the Valley Mobile Dental Clinic	\$44,900
Total:		\$241,700

³ Matching funds provided by First 5 California; \$50,000 by First 5 Napa and \$50,000 by First 5 CA.

⁴ For the ParentsCAN grant \$23,000 was funded through the IMPACT grant from First 5 California.

Quality Counts

Quality Counts Napa County *enhances early care and education of young children ages 0-5 years. Early learning provider participants receive support and recognition for implementing research-based practices to provide high-quality environments and experiences for our community's children.*

Overview

Quality Counts is the umbrella term that includes county-wide efforts aimed to improve the quality of early childhood experiences for children 0-5 years old. With funding by First 5 California, First 5 Napa County, and the California Department of Education, interested stakeholders from a wide cross-section of early childhood systems are working together to improve the quality of early learning for young children throughout Napa County.

In 2014-15, First 5 Napa County was awarded First 5 California's IMPACT Initiative (Improve and Maximize Programs so All Children Thrive) funds. IMPACT is First 5 California's \$190-million-dollar initiative over 5 years that aims to increase the number of high quality early learning settings through supporting a quality rating improvement system (QRIS). First 5 Napa was awarded \$153,582 each year beginning 2014-15. In the first year, efforts focused on planning and development of IMPACT in Napa County.

In 2015, the California Department of Education, Early Education and Support Division awarded First 5 Napa County \$127,926 for the Infant/Toddler Quality Rating and Improvement System (QRIS) Block Grant. These funds are meant to increase the number of low-income infants and toddlers in high quality early learning programs and to provide the necessary support and resources to help infant and toddler programs to meet a higher tier of quality in the QRIS. In addition, Napa County Office of Education was awarded approximately \$166,000 from California Department of Education, Early Education and Support Division for the California State Preschool Program (CSPP) Quality Rating and Improvement System (QRIS) Block Grant. Similar to the Infant Toddler Block Grant, these funds are to raise quality and access for state-funded preschool children.

Prior to the IMPACT grant, First 5 Napa County brought stakeholders together monthly to discuss the First 5 California and First 5 Napa County funded CARES Plus and Child Signature Programs. Realizing more funding and opportunities for quality improvement would soon be available, First 5 Napa expanded the meeting to include more stakeholders. In this last year, the meeting developed into the Quality Counts Consortium which met monthly to guide, develop and supervise Quality Counts work.

Progress

In 2015-16, planning and partnerships continued through the Quality Counts Consortium. A Quality Counts team was formed with staff from First 5 Napa County, the local resource and referral agency and Napa County Office of Education. The Quality Counts Consortium and team worked to develop a unified and seamless message for the early learning community about Quality Counts work. First 5 Napa County committed to data collection via an online database designed for data collection, analyzing and program management.

As a result of Quality Counts team members working in the community, a need was discovered for Napa Valley College students needing to complete their Associates of Science (AS) Degrees in Child and Families Studies. To earn their AS degree providers must student-teach in the early education program either on the campus of Napa Valley College or in the community at a mentor site. This has been impossible for many working students to accomplish. Students cannot afford to take the time from work, and the early learning centers they work for cannot afford to lose staff nine hours a week for an entire semester. Infant Toddler block grant funds were used as scholarships for student-providers, offsetting the costs for both student-provider and their employers.

In the summer of 2015, a local family resource center, ParentsCAN⁵, received funding from First 5 Napa County through the IMPACT Initiative. In this first year PCAN brought together community stakeholders and developed the Developmental Screener Collaborative. In this last year, the collaborative developed the screening project logic model with strategies aimed at creating protocols and procedures for increasing access to developmental screenings for all children in Napa County and ensuring comprehensive and consistent

⁵ For more about ParentsCAN please see the ParentsCAN section under Part II: Program Evaluation in this report.

methods for providing screenings, referrals and services. Focus has been on working with early learning providers as part of the Quality Counts Initiative.

In this coming year, the Quality Counts team will focus efforts on outreach, recruitment and retention of early childhood centers and family homes. Providers will be enrolled in the Quality Counts program and be offered: access to support and resources that will benefit them and their staff; new ideas to enhance learning environments and experiences for young children; no-cost workshops and trainings; a supportive network; materials and supplies; information on marketing their program; and, recognition from families, peers, and community members for participating in Quality Counts⁶.

⁶ Quality Counts, Napa County information brochure, 2016

Part I: Overview by Focus Areas

Part I provides funding amounts, counts of those served, and highlights of activities and outcomes for each of the four focus areas. The results in this section are not exhaustive, but illustrate progress in each area.

Focus areas and their strategies are provided to begin each summary, however please note the strategies are truncated; for full strategies under each focus area please see Part II: Program Evaluation.

Access to Healthcare for Young Children

Strategies:

- 1. Provide access to affordable health insurance and healthcare linkages, such as case management for utilization.**

- 1 agency was funded \$57,000 *under Access to Healthcare for Young Children.*
- An estimated 2,046 *children 0-5 years old* and 2,891 *parents* were provided case management services to enroll and maintain health insurance and health services.
- Approximately 12 *trainings* on the quickly changing health insurance landscape were given to Application Assistants in the community.
- An additional 25 *Application Assistants* were trained to enroll children and families in health insurance.

How do we know we've made progress?

- Children have increased access to affordable health insurance and health products.
 - ✓ 92 children 0-5 years old *acquired health insurance* and were newly enrolled.
 - ✓ 1,658 children were *screened for health insurance need*.
 - ✓ Approximately 83 children 0-5 years old *maintained health insurance enrollment*.
- Children have improved utilization of health insurance.
 - ✓ After one year of enrollment, 98% of families report they *have a medical home*, or a place they usually take their child when they are sick or need advice about their health, other than the emergency room.
 - ✓ Almost all (99%) of families report they were *able to access health services when needed*.

Infant, Family and Early Childhood Mental Health

Strategies:

1. Support the development of a community multidisciplinary collaborative and services. Description of possible components: universal screening tool and process, centralized referral system, multidisciplinary services, further assessment as needed, mental health treatment, support and education to families, and specialized services.
2. Provide training and education to increase the number of providers trained in strength-based relational models.

- 2 agencies were funded \$101,400 under *Infant, Family and Early Childhood Mental Health*
- An estimated 62 *children between 0-5 years old* received specialized and responsive therapeutic interventions.
- 18 *parents* were provided mental health services and support to become more effective caregivers to their children 0-5 years old.

How do we know we've made progress?

- Children and their caregivers have access to mental health and specialized services.
 - ✓ Mentis provided:
 - ✓ 18 families with children 0-5 years old with mental health services.
 - ✓ Therapeutic Child Care Center provided:
 - ✓ 44 children 0-5 years old received specialized health services.

- ✓ Children have access to developmental screenings.
 - ✓ Ages and Stages Questionnaire-3⁷ (ASQ-3) and/or the Ages and Stages Questionnaire: Social-Emotional (ASQ: SE).
 - ✓ 1 agency screened 18 children with the ASQ-3.
 - ✓ 2 agencies screened 28 children with the ASQ: SE.

- Children and families show improved mental health.
 - ✓ Parents that received services from Mentis *demonstrated improvements on measures of depression, Post Traumatic Stress Disorder and anxiety.*
 - ✓ Children that received services from the Therapeutic Child Care Center (TCCC) *maintained or demonstrated improvements in developmental and social-emotional milestones in developmental domains:*
 - ✓ 100% of children maintained or demonstrated improvements in *Communication.*
 - ✓ 94% of children maintained or demonstrated improvements in *Problem Solving.*
 - ✓ 94% of children maintained or demonstrated improvements in *Personal-Social Skills.*

⁷ For exhaustive explanations of the ASQ-3 and the ASQ: SE please see Part II of this report. Descriptions are throughout Part II but they can easily be found under Therapeutic Child Care Center Project evaluation.

Early Childhood Learning and Education

Strategies:

1. Support professional development and quality improvement of early learning and child care providers.
2. Support parents and children through education...and support linkages from early childhood education to kindergarten.

- 5 agencies with 6 programs were funded \$291,400 under *Early Childhood Learning and Education*.
- 91 *early learning professionals* were provided site visits, technical assistance, trainings and professional advising.
- 1,155 *parents* were provided services which included early learning materials, home visits and workshops on how to provide early learning and early literacy experiences at home.
- 1,232 *children* were provided high quality early learning experiences which included a parent participation component.

How do we know we've made progress?

- Providers are supported to provide quality early literacy experiences to children 0-5 years old.
 - ✓ 66 providers at 38 early learning sites received technical assistance and support to implement the Raising A Reader program.
 - ✓ Providers were able to *maintain parent engagement* through introduction to RAR (89%), maintaining high enrollment (94%) and book rotations (yearly basis 97% and weekly basis 100%).
 - ✓ Providers were able to *engage children* through reading RAR books with them (91%) and allowing children opportunities to share their experiences with RAR books (94%).

- Providers⁸ make progress in completing required coursework to earn a degree in field related to child development.
 - ✓ 1 provider earned their Bachelor of Science degree in Early Childhood Education.
 - ✓ 5 providers earned their Associate of Science degree in Child and Family Studies.
 - ✓ 25 providers, completed coursework toward degree attainment.

- Children show improvements on developmental domains.
 - ✓ Children participating in early learning experiences demonstrated gains by improving into development typical for their age.
 - ✓ 78% of children demonstrated typical development in *Communication*.
 - ✓ 96% of children demonstrated typical development in *Problem Solving*.
 - ✓ 83% of children demonstrated typical development in *Gross Motor Skills*.

⁸ These include AB212 funded providers.

- Parent have increased participation in early learning and early literacy opportunities.
 - ✓ 140 parents attended *play-based school readiness programs* throughout Napa County (30 in American Canyon, 23 in the city of Napa and 87 in Calistoga and St. Helena).
 - ✓ 34 Spanish speaking parents attended Latino Family Literacy or Abriedo Puertas classes that provided support on *how to provide early literacy experiences to their children at home.*

- Parents have increased confidence and ability to provide age-appropriate routines, and early learning and early literacy experiences at home.
 - ✓ Parents that participated in parent workshops and classes reported they provide early learning experiences at home for their child.
 - ✓ 93% of parents report *reading or sharing a book with their child at least 2 times a week.*
 - ✓ 85% of parent report *reading for at least 10 minutes at a time.*
 - ✓ 95% of parents report *supporting expanded learning through conversation at least once a week.*
 - ✓ 96% of parents report *providing early learning experiences at home (colors and shapes) at least once a week.*
 - ✓ Parents that participated in On the Move’s Latino Family Literacy Project increased the amount of early literacy opportunities they provide at home:
 - ✓ 93% of parents report *establishing a reading routine.*
 - ✓ 93% of parents report *reading to their children at least two times in the past week* and 83% report when they read, they do so for *more than 10 minutes as a time.*

Early Detection, Intervention and Health Education

Strategies:

1. Support prevention, education, outreach, screening, and early assessment and referral. Topics of emphasis include: nutrition, obesity, physical activity, oral health and family stability.
2. Provide comprehensive perinatal (prenatal and postpartum) services for families.

- 4 agencies were funded \$241,700 under *Early Detection, Intervention and Health Education*.
- 1,504 children received home visiting services; healthy eating and physical activity experiences; specialty case management support services; and specialty dental services.
- 434 parents received case management services; attended workshops on healthy eating and early childhood practices; and received home visiting services.
- 50 early childhood professionals received training and support to improve healthy eating and physical activity experiences in their child care centers and child care homes.
- 26 medical professionals received outreach, education and support materials to help them improve their services to children with special needs.

How do we know we've made progress?

- Improvement in early learning experiences for children 0-5 years in nutrition and health.
 - ✓ The Active Bodies program was implemented in child care centers and family child care homes that serve 334 children 0-5 years old. The early learning experiences for these children improved in nutrition and health.
 - ✓ Child care centers and family child care homes either maintained a high score or had an increase in *children receiving age-appropriate meals and increased nutritional value.*
 - ✓ Child care centers and family child care homes demonstrated an increase in *time and quality of physical activity* with children.

- Parents report knowledge of recommended preventative dental care practices.
 - ✓ 85% of existing clients, make sure their child *brushes their teeth twice a day.*

- Parents report they are comfortable advocating for their children and have the support and information they need to make informed decisions about needed treatment and services.
 - ✓ 95% agreed they have an *increased understanding of my child's disability/diagnosis.*
 - ✓ 95% agree they are *more familiar with local services and supports for their child.*
 - ✓ 96% agreed they feel *more confident working with a professional, and feel part of a collaborative team.*

- Parents report increased self-efficacy and family strengths.
 - ✓ Through Cope Family Center's home visiting program, parents demonstrated stability and improvements in self-efficacy and family strengths.
 - ✓ 53% of families either remained stable or demonstrated positive outcomes in their *ability to access social support*.
 - ✓ 38% of families either remained stable or demonstrated positive outcomes in their *satisfaction with being a parent*.

- Children are receiving wellness services.
 - ✓ 100% of children *have a medical home*, or a place they usually take their child when they are sick or need advice about their health, other than the emergency room.
 - ✓ 100% of children *have health insurance*.
 - ✓ Ages and Stages Questionnaire-3⁹ (ASQ-3) and/or the Ages and Stages Questionnaire: Social-Emotional (ASQ: SE).
 - ✓ 2 agencies *screened 150 children with the ASQ-3*.
 - ✓ 2 agencies *screened 92 children with the ASQ: SE*.

⁹ For exhaustive explanations of the ASQ-3 and the ASQ: SE please see Part II of this report. Descriptions are throughout Part II but they can easily be found under the ParentsCAN evaluation.

Part II: Program Evaluation

Part II consists of a comprehensive description of each program's activities and outcomes and a brief summation of First 5 Napa's fiscal investment. All program summary information was taken from the funded program's scope of work, the evaluation reports submitted during the contract period, and conversations with funded programs. All summaries have been reviewed by funded program staff.

Focus Area: Access to Healthcare for Young Children

Strategy:

- ❖ Provide access to affordable health insurance and healthcare linkages, such as case management for utilization.

Funded Agencies & Details

Agency	Program	First 5 Napa Goal	FY15-16 Funds
Community Health Initiative	Children’s Health Insurance System of Napa Valley	✓ Early Childhood Health	\$57,000

Community Health Initiative

The Children's Health Insurance System of Napa Valley

<i>Commission Goal Area:</i>	Early Childhood Health
<i>Focus Area:</i>	Access to Healthcare for Young Children
<i>Population Served:</i>	Children

Funding:

<i>Funded Committed in FY15-16:</i>	\$57,000
<i>Previous First 5 Napa Funding:</i>	\$932,467
<i>Total Funding:</i>	\$989,467

Program Description

The Community Health Initiative Napa County (CHI) provides health insurance related services that are responsive and up to date to the rapidly changing health insurance landscape. CHI continues to provide case management services to hard-to-reach families to enroll children in health insurance and keep them enrolled. CHI also provides vital education on how to fully use insurance benefits and the health care system. In addition, CHI trains the Application Assistants employed by several other local non-profits, maintain an on-going training program, and provides technical assistance countywide. This has been a vital component of CHI services as health insurance services change at a rapid pace as a result of the Affordable Care Act (ACA).

Activities & Outcomes

- **Children have increased access to affordable health insurance and health products.**
 - 92 children 0-5 years old *acquired health insurance* and were newly enrolled.
 - 1,658 children were *screened for health insurance need*. To find hard-to-reach families CHI attended 90 events and visited 42 community agencies throughout Napa County.
 - Approximately 83 children 0-5 years old and their families *maintained health insurance enrollment*. Families were given courtesy calls to ensure families are fully using their insurance and to support maintaining health insurance enrollment.
 - An average of 9 families each month were seen for Medi-Cal reasons by CHI staff at the county office.

- CHI conducted 12 trainings with an average attendance of 16 application assistants (AA). A total of 75 total attended from 42 partner agencies. An additional 25 AA’s were trained to provide services throughout the county.
- In May 2016, Medi-Cal expanded eligibility to include all children regardless of immigration status. In collaboration with community partners, CHI has worked hard to ensure no child is left without health insurance during this transition. CHI has assisted 100% of these members in their caseload which is over 80% of all Napa County children to ensure a smooth transition.

Outcomes

- Measure: Health Insurance Post-Enrollment Surveys aim to measure utilization of health insurance and satisfaction with health insurance.
 - The Post-Enrollment Surveys are administered by CHI staff at 2-months post-enrollment and on a yearly basis thereafter. Families are asked about their experiences during the previous 2-month or in the last year. CHI completed 389 Post-Enrollment Surveys at either 2-months or 1-year post enrollment.
- Outcome: **Children have improved utilization of health insurance.**
 - Almost all families *report they have a medical home* at 2-months (95%) and 1-year (98%), or a place they usually take their child when they are sick or need advice about their health, other than the emergency room.
 - Families reported *accessing health services when needed*. Of the 399 parents that reported their child needed care by a provider, just one percent were unable to access appropriate services.

Number¹⁰ of Cases Where *children needed to receive care* and the number that was *unable to do so*

Has your child had any reason...	Number of cases where child needed to receive care	Number that was unable to take their child	
	Frequency	Frequency	Percent
...to visit a doctor?	192	4	2.1%
...to visit an optometrist?	39	-	-
...to visit a dentist?	131	1	0.8%
...to visit a specialist?	32	-	-
...to visit a mental health provider?	5	-	-
Total	399	5	1.3%

¹⁰ These include cases from both the 2-month follow up and the annual follow up survey.

Focus Area: Infant, Family and Early Childhood Mental Health

Strategies:

- ❖ Support the development of a community multidisciplinary collaborative and services. Description of possible components: universal screening tool and process, centralized referral system, multidisciplinary services, further assessment as needed, mental health treatment, support and education to families, and specialized services.
- ❖ Provide training and education to increase the number of providers trained in strength-based relational models.

Funded Agencies & Details

Agency	Program	First 5 Napa Goal	FY15-16 Funds
Mentis, Napa’s Center for Mental Health Services	Family and Infant Mental Health Counseling Program	<ul style="list-style-type: none"> ✓ Early Childhood Health ✓ Parent and Community Education 	\$42,700
Napa County, Health and Human Services, PH Division	Therapeutic Child Care Center	<ul style="list-style-type: none"> ✓ Early Childhood Health 	\$58,700

Mentis, Napa’s Center for Mental Health Services¹¹

The Family and Infant Mental Health Counseling Program

<i>Commission Goal Area:</i>	Early Childhood Health & Parent and Community Education
<i>Focus Area:</i>	Infant, Family and Early Childhood Mental Health
<i>Population Served:</i>	Children; Parents

Funding:

<i>Funded Committed in FY14-15:</i>	\$42,700
<i>Previous First 5 Napa Funding:</i>	\$157,900
<i>Total Funding:</i>	\$200,600

Program Description

The nonprofit mental health agency, Mentis provides affordable mental health services and support to Napa County residents. The Family and Infant Mental Health Counseling Program aims to improve the mental health of families with children 0-5 years by helping parents and guardians become more effective caregivers. Through this program Mentis provides two primary critical mental health treatment services to uninsured and underserved families with children 0-5 years that address psychosocial needs; Mentis provides mental health treatment to parents, and when needed and appropriate, Mentis provides screening and assessment of children 0-5 years.

Activities & Outcomes

- Families with children 0-5 years old received mental health services that focused on parents’ emotional health.
 - Target: 18 families
 - Served: 18 families with 36 children
- Clients presented with a variety of diagnoses: 20% Anxiety Disorder; 50% Depressive Disorder; 30% Post Traumatic Stress Disorder. Of those clients 40% presented with Relational Problems as well.
- **Increased number of children who have access to developmental screenings.** In this last year, 10 children were screened using the Ages and Stages Questionnaire: Social-Emotional Screener (ASQ: SE). All children were found to be within normal ranges.

¹¹ Formerly known as Family Service of Napa Valley.

- Agencies in the community refer clients to Mentis. There were 18 referrals received from:
 - OLE Health Clinic (13), Napa Emergency Women’s Services (NEWS) (2) and UpValley Resource Centers (3).
- To support clients in accessing local services, Mentis refers clients to agencies in the community. There were 8 referrals made to:
 - OLE Health Clinic, Cope Family Center and Legal Aid.

Outcomes

- Measure: Post Traumatic Stress Disorder- Civilian Version (PCL-C), is a self-report, clinician-scored instrument used for screening, diagnosing, monitoring and measuring the severity of post-traumatic stress disorder symptoms. The frequency and severity of symptoms is measured with a 5-point Likert scale indicating symptoms are *not at all present* up to clients are *extremely* bothered by symptoms.
- Measure: The Patient Health Questionnaire (PHQ-9) is a self-report, clinician-scored instrument used for screening, diagnosing, monitoring and measuring the severity of depression. The frequency and severity of depression are measured with a score of 5 indicating *minimal symptoms* up to 20 or more indicating *severe major depression*.
- Measure: The Beck Anxiety Inventory (BAI) is a self-report, clinician-scored instrument used to measure the severity of anxiety. Severity of anxiety is measured with a score of up to 21 indicating *very low anxiety* up to 36 or more indicating *potential cause for concern*.
 - All 19 clients (individuals, couples and/or families) being served received: the PCL-C and either the PHQ-9 or the BAI.
- Outcome: **Families with kids 0-5 years old have improved mental health and therefore better able to support their children and be more effective parents.**
- PCL-C: indicate frequency and severity of post-traumatic stress symptoms:
 - Of the 5 individual clients, seen over 80% showed a reduction in symptoms of at least 5 points.
- PHQ-9: indicate frequency and severity of depression:
 - Of the 9 individual clients presenting with depression, over 90% showed a reduction in their depressive symptoms.
- BAI: indicate severity of anxiety:
 - Of the 4 individual clients presenting with anxiety, over 90% showed a reduction in their anxiety symptoms.

Napa County Health & Human Services Public Health Division
Therapeutic Child Care Center Project

Commission Goal Area: Early Childhood Health
Focus Area: Access to Healthcare for Young Children
Population Served: Children; Parents

Funding:

Funded Committed in FY14-15: \$58,700
Previous First 5 Napa Funding: \$967,051¹²
Total Funding: \$1,025,751

Program Description

First 5 Napa has provided funds to the Therapeutic Child Care Center (TCCC) since 2001, and was a focused funding initiative to the Infant-Parent Mental Health Project from 2005 - 2008. The Infant-Parent Mental Health Project was designed to enhance early childhood mental health services in Napa County.

First 5 funds are used to support staff within the TCCC to provide innovative prevention and early intervention services to high risk children birth to 36 months and their families. TCCC children are supported in meeting developmental and social milestones, mental health functioning, and in improving parent-child relationships. The stability of the TCCC experience has relational and therapeutic benefits that provide a context in which healthy development can thrive. The nurturing, consistent care and rich relational environment created at the TCCC by the therapeutic team and Early Head Start staff provides strong and secure secondary attachments with supportive and dependable adults that build resiliency and capacity in TCCC children.

To provide the specialized and skilled support needed, a multidisciplinary team of the Psychologist, Marriage Family Therapist and Occupational Therapist meet regularly with teachers in the classroom, individually and in case consultation/reflective supervision meetings. Meetings include mentoring, consultation, education and support for therapeutic interventions in the classroom. Children who enroll at the TCCC are considered to be at-risk for mental health, attachment and developmental disorders because of chronically stressful circumstances that impact their emotional and neurophysiological development.

¹² This total does not include \$355,000 funded through the Focused Funding Initiative from 2005-2008.

Activities & Outcomes

- **Children 0-5 years old and their families have access to specialized health services.**
First 5 funds allow an early childhood clinical psychologist to provide mental health assessments and clinical supervision. An occupational therapist is funded to perform evaluations, provide interventions and make recommendations that promote healthy physical development.
- **Children receive specialized health services.**
 - 44 children 0-5 years old *received specialized health services* during the reporting period. Enrollment is fluid; 24 children are currently enrolled. Since 2001, the TCCC has served 242 children from 191 families.

Number of children currently enrolled in TCCC

Current enrollment	Number of children 0-3 years old
Girls	10
Boys	14
Total	24

- **Children receive the appropriate interventions.**
 - 30 minutes a month are provided to each child by the child psychologist and 15 minutes a month for each child by the occupational therapist.
 - Teachers received up to 5 hours a week with the child psychologist and 6 hours a week with the occupational therapist.

Outcomes

- Measure: The Parent-Infant Relationship-Global Assessment Scale (PIR-GAS). The PIR-GAS assess the strength and quality of the parent (or caregiver) – child relationship.
- Measure: The Ages and Stages Questionnaire-3 (ASQ-3) and the Ages and Stages Questionnaire: Social-Emotional (ASQ: SE) are standardized screening tools used to assess whether a young child is displaying typical development for their age or if they are at risk of a developmental disorder or social-emotional problems.
- Data presented are for the 18 children enrolled at the TCCC who received both an initial assessment and a second assessment in June 2016.

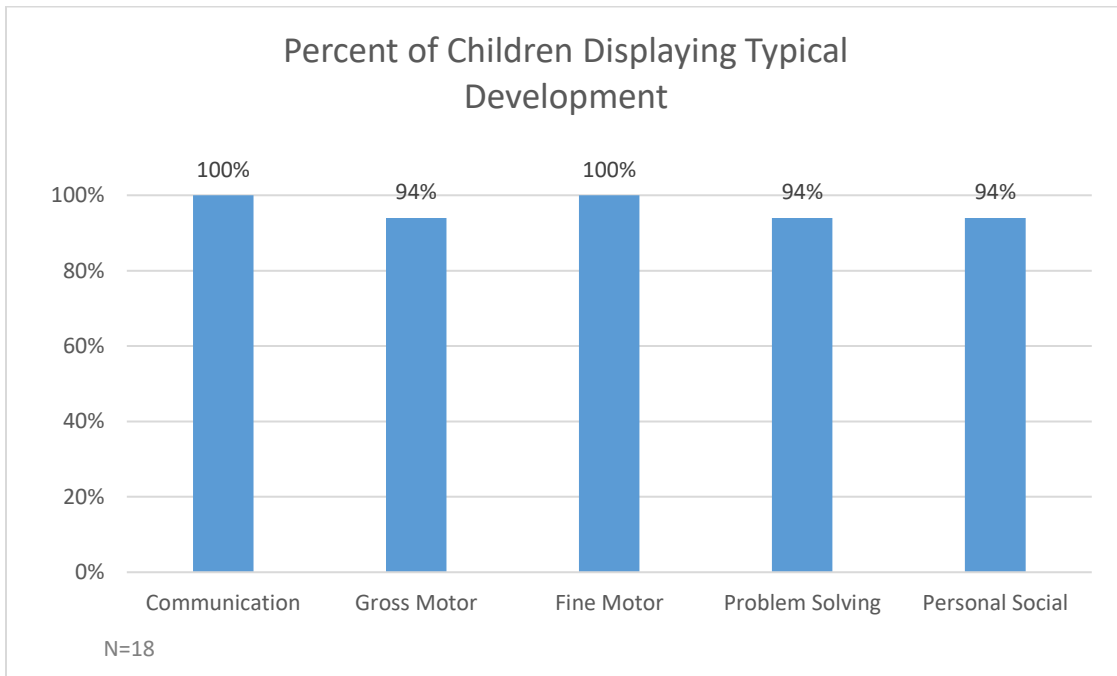
- Child risk profile: The children served through the TCCC are considered to be at-risk for mental health, attachment and developmental disorders because of chronically stressful circumstances that impact their emotional and neurophysiological development.
 - The children and families receiving services at the TCCC are working toward remaining stable or making positive gains in meeting developmental and social-emotional milestones.
 - Three out of four children (75%) have parents with a substance abuse history.
 - The majority (71%) of children at the TCCC have had at least one disruption to their caregiving experience. Examples of disruptions include a parent leaving the family or returning to the family, foster care placement or reunifications.
 - Well over half of children (63%) have been exposed to domestic violence and were exposed to drugs in utero (46%).
 - Half of the children (50%) have a psychiatric diagnosis. Diagnoses include: Post Traumatic Stress Disorder, Attention Deficit/Hyperactivity Disorder, Anxiety, Impulsive Regulatory Disorder, and other developmental disorders.

Risk Factor Profiles of Children Served by TCCC

Risk Factors (n=24)	Percent of Children
Have parent(s) with substance abuse history	75%
Disruptions in the caregiving experience	71%
Exposed to domestic violence	63%
Exposed to drugs in utero	63%
Incarcerated parents	54%
Family history with CPS ¹³ /Family Preservation/Foster care	50%
Currently with CPS/Family Preservation/foster care	29%
Have psychiatric diagnoses	50%

¹³ CPS: Child Protective Services

- Outcome: **Children show improvement on developmental and mental measures.**
 - The children and families receiving services at the TCCC are working toward remaining stable or making positive gains in meeting developmental and social-emotional milestones.
 - When the strength and quality of the relationship between the caregiver and the child was measured 44% *made gains or remained stable in the quality of their relationships with their primary caregiver.* (PIR-GAS)
 - 84% of children were determined to be *stable or improving in their ability to achieve social-emotional developmental milestones.* (ASQ: SE)
 - Children *demonstrated positive development by meeting age-typical developmental milestones* in developmental domains; communication (100%), gross motor (94%), fine motor (100%), problem solving (94%), and personal social (94%). (ASQ-3)



Of interest from data gathered is the comparison between ASQ screening scores and mental health estimates. Most children at the TCCC have developmental scores that fall Within Normal Limits (WNL) even though almost 75% of children have individual mental health, relational challenges and/or occupational therapy concerns.

Focus Area: Early Childhood Learning and Education

Strategies:

- ❖ Support professional development and quality improvement of early learning and child care providers (birth to 5 years) through professional learning communities, trainings, technical assistance and education.
- ❖ Support parents and children through education on parenting and early literacy. Support linkages from early childhood education to kindergarten and provide early childhood education experiences for those children with no prior experience.

Funded Agencies & Details

Agency	Program	First 5 Napa Goal	FY15-16 Funds
American Canyon Family Resource Center	American Canyon Family Strengthening Project	✓ Parent & Community Education	\$43,600
Child Start Inc.	Raising A Reader	✓ Early Childhood Learning & Education	\$43,000
Community Resources for Children	Active Minds, Toy Library & Early Learning Center	✓ Early Learning & Education ✓ Parent and Community Education	\$65,500
Community Resources for Children	CARES Plus	✓ Early Learning & Education	\$100,000 ¹⁴
On the Move	Latino Family Literacy Project	✓ Parent & Community Education	\$12,000
UpValley Family Centers	Parents as Educators	✓ Parent & Community Education	\$27,300

¹⁴ First 5 California provided \$50,000 and First 5 Napa County provided \$50,000.

American Canyon Family Resource Center

Family Strengthening Project

<i>Commission Goal Area:</i>	Parent and Community Education
<i>Focus Area:</i>	Early Childhood Learning and Education
<i>Population Served:</i>	Children; Parents

Funding:

<i>Funded Committed in FY14-15:</i>	\$43,600
<i>Previous First 5 Napa Funding:</i>	\$424,570
<i>Total Funding:</i>	\$468,170

Program Description

With First 5 Napa support American Canyon Family Resource Center (ACFRC) opened its doors in the fiscal year 2006-07 and has been working hard since to meet the needs of American Canyon's continually growing population. ACFRC aims to support families in bringing stability and basic needs to their families. ACFRC provides one on one case management to families and brings community based organizations and their services to isolated families in American Canyon. ACFRC serves young children and their caregivers through enhanced child and parent activities each week that focus on early literacy and early childhood development.

Activities & Outcomes

- ACFRC conducted outreach to American Canyon families. ACFRC attended/participated in 49 outreach activities that included: meeting with families at mobile home parks and low-income housing (6), tax clinics (9), city council meeting (1), AC Health Expo, Food Bank, Library story time, Halloween at the Plaza and other community events (33).
- 30 families received one on one support services on site at ACFRC.** Referrals included financial assistance, food assistance, health services and family activities.
- 30 new families received services from ACFRC.**
- 30 unduplicated children and their families attended child and parent activity groups and increased their involvement with their child's early care and education.**
- 3 sessions were provided with 8 classes per session. Two cycles were held at the American Canyon Library and one cycle was at a local mobile home park.

Outcomes

- Measure: The One-on-One survey was developed to measure parent understanding, knowledge and use of community resources and their service needs. The One-on-One survey asks parents to report on knowledge prior to participating and after participating, all after participating- retrospectively.
 - Surveys were completed by parents after receiving case management services from ACFRC. Of the 30 families that received case management services, 30 One-on-One surveys were completed by parents and grandparents from those families.
- Outcome: **Parents report increased stability, awareness and use of community resources.**
 - 100% of parents agree they *know more about community services*.
 - 100% of parents agree they can *identify more people and places that can assist them in crisis*.
 - 97% of parents agree they are *more aware of community resources to help with financial stability*.

2015-2016 Program Summary Report

- Measure: The Family Assessment measures family access to resources and basic needs, school engagement, parent-child interactions and other indicators of family success. Each family strength indicator is rated on a scale from 1-4, where 4 indicates the highest level of functioning.
 - Assessments were completed by ACFRC staff upon intake and then again at approximately 6-months follow up. The average time between intake and re-assessment was 5 months.
 - Of the 30 families that received case management services, 29 parents had the Family Assessment completed.

- Outcome: **Parents report increased stability, awareness and use of community resources.**
 - At intake over a quarter of families (29%) had limited resources to obtain nutritious food for their families; at follow-up all families (100%) had *sufficient resources to obtain and prepare food*.
 - At intake just about 1 in 8 families (3%) reported they had access to resources and support; at follow-up over 3 out of 4 families (77%) reported their *family can access resources with support or as needed*.
 - At intake about a quarter of families (27%) could financially meet their families' basic needs; at follow-up the vast majority of families (86%) *could financially meet those basic family needs*.
 - At intake about a quarter of families (24%) report they have knowledge of employment or educational resources; at follow-up the 94% families *have knowledge of employment or educational resources that can lead to a better paying job*.

Indicators of Family Success

	Intake Session		Follow-Up Session	
	Percent	N	Percent	N
Sufficient resources to obtain and prepare food	29%	14	100%	13
Family can access resources with support or as needed	13%	24	86%	22
Families can financially meet basic family needs.	27%	15	86%	14
Has knowledge of employment or educational resources that can lead to a better paying job.	24%	17	94%	17

2015-2016 Program Summary Report

- Measure: The Parenting Class Questionnaire measures parent knowledge, confidence and behaviors related to early learning experiences and transition activities.
 - Parents completed the Parenting Class survey at the beginning of the parent/child activity program and then again upon completion. Of the 30 parents who participated in the program 28 completed the first and last survey and are presented below.

- Outcome: **Parents are confident in their ability to provide age-appropriate routines, play and expectations of their child.**
 - *Read or share books with your child:* At the start of the program a little under half of parents (46%) reported they read or share books with their children at least 2 times a week; upon completion that increased to 100% of parent.
 - *Time spent reading with child:* At the start of the program only 46% of parents reported that on the days they did read to their child, they read for at least 10 minutes at a time; upon completion that increased to 100% of parents reading at least 10 minutes at a time with their children.
 - *Library Card:* By the end of the program 93% of parents report that they have a library card.

Parent Practices that Support Early Literacy Development

Read or share books with child	Percent of Parents (n=28)			
	First Class		Last Class	
2 times last week	46%	46%	21%	100%
3 or more times last week	-		79%	
Time spent reading				
10-20 minutes	46%	46%	32%	100%
20-30 minutes	-		68%	

2015-2016 Program Summary Report

- *Support expanded learning through conversation:* At the start of the program only 36% of parents reported supporting expanded learning for their child through conversation at least once a week; upon completion that increased to 100% of parents.
- *Provide early learning experiences at home (shapes and color):* At the start of the program just a quarter of parents (25%) reported providing early learning experiences at home at least once a week; upon completion that increased to all the of the parents (100%).

Parent Practices that Support Early Childhood Development

	Percent of Parents (n=28)			
Support expanded learning through conversation	First Class		Last Class	
At least once a week	29%	36%	32%	100%
Every day	7%		68%	
Provide early learning experiences at home (colors and shapes)				
At least once a week	14%	25%	18%	100%
Every day	11%		82%	

Child Start, Inc.***Raising A Reader***

Commission Goal Area: Early Childhood Learning and Education

Focus Area: Early Childhood Learning and Education

Population Served: Providers

Funding:

Funded Committed in FY15-16: \$43,000

Previous First 5 Napa Funding: \$719,712

Total Funding: \$762,712

Program Description

Raising A Reader (RAR) is an early literacy program designed to promote parents reading to their children. The RAR program has been evaluated and found to be effective at increasing the number of parents that share books with their children 3-5 times per week, and improving literacy scores for children attending Head Start¹⁵. First 5 Napa County funds support providers and supplies to assist early care and family support providers in offering the RAR program to the families they serve. This includes training, technical assistance, supplies (including age and language-appropriate books), and the facilitation of community connections for the families who participate. RAR provides resources and support to providers in linking enrolled families to school and community libraries. Annually, enrolled families receive library bags, information about summer reading programs and incentives to promote summer reading.

Activities & Outcomes

- This year RAR served 38 sites with 66 providers. Each site received an average of 3 visits.
- This year RAR focused on parent engagement strategies and divided sites¹⁶ based on their needs:
 - Parenting Literacy Group (29 sites and 47 providers): encouraged to offer a RAR workshop based on parent literacy training.
 - Literacy Modeling Group (5 sites and 9 providers): asked to use modeling techniques to encourage reading routines at home.

¹⁵ "Evaluating the Impact of the Raising A Reader Book Bag Program", United Way of South Hampton Roads, July 2004.

¹⁶ The provider counts do not include 5 providers that are librarians, therapists community members, and executive directors.

- Materials Focus (4 sites and 5 providers): provide parents with RAR DVD and use drop-off and pick-up times via handouts, take home calendars, etc. to communicate reading strategies.
- **Providers are supported and able to continue providing Raising A Reader.**
 Consultation and technical assistance was provided to staff on the utilization of RAR.
 - Based on the needs of the group the RAR coordinator provided visits to the sites: material and inventory visits (12), training and technical assistance (42), parent meeting (1), library adventure (34) and blue bags (38).

Outcomes

- Measure: The Raising A Reader Provider Survey was designed to assess provider experiences and perceptions of support provided to implement the RAR program. Providers are also asked to report on fidelity to RAR model.
 - In this last year 37 providers completed the RAR survey.
 - The majority of providers (92%) reported they have used RAR for at least 2 or more years.
 - The majority of providers were center-based programs with 78%, another 3% were from adult education classes, 14% were home-visiting programs and 5% family resource centers.
- Outcome: **Providers are supported and able to continue providing Raising A Reader.**
 - Providers overwhelmingly rate the RAR training and technical assistance as *excellent* or *good*. Support and materials to connect families to the library appears to be rated the highest with 100%.

Percent of Providers that Rate Support as *excellent* or *good*

Training/Technical Support	Percent <i>excellent</i> or <i>good</i>
Quality of books and book bags (n=36)	97%
Parent and classroom resources (n=35)	94%
Ongoing support and training to distribute red bags (n=35)	97%
Support and materials to connect families to library (n=37)	100%
Support to conduct parent workshops and family literacy events (n=34)	88%

- Outcome: **Providers are supported and able to provide Raising A Reader model to fidelity.** Providers were able to maintain fidelity to the RAR model.
 - Although not *easy* for all providers, they were able to *maintain parent engagement* through introductions to RAR (89%), enrollment (94%) and book rotations each week (100%).
 - For preschools, providing a parent literacy workshop was not always easy; however, the majority (66%) were able to do so.
 - Providers report being able to *engage children* in RAR by routinely reading RAR books with them (91%) and allowing opportunities for children to share their experiences with RAR books (94%).
 - The most difficult for providers to accomplish was *taking a trip to the school or public library*, yet 40% were able to and about 1 in 3 (32%) reported it was easy. Providers reported the easiest way to *increase library connections* was *organizing a visit from the librarian* (89%).

Percent of Providers Accomplished RAR Activities¹⁷

RAR Activity		Accomplished Activity		Did not accomplish
		Easy	Not at all Easy	
Parent & Child Engagement	Maintain a <i>high</i> parent enrollment	89%	5%	5%
	Maintain parent weekly rotation of book bags	81%	19%	-
	Maintain 6 months out of year rotation	97%	-	-
	Use RAR resources to introduce parents to RAR	89%	-	11%
	Parent literacy workshop ¹⁸	66%	-	31%
	Routinely read RAR books to children	86%	5%	5%
	Children are provided time to share RAR experiences	89%	5%	5%
Library Connections	Assist parents in filling out library card	38%	3%	30%
	Distribute blue library bags	62%	-	-
	Take trip to school or public library	32%	8%	32%
	Librarian visits children	89%	-	8%

¹⁷ Do not all add to 100% due to non-responses.

¹⁸ Only preschools were encouraged to offer a parent literacy workshop, so only preschools are included (n=29)

Community Resources for Children

Active Minds, Toy Library & Early Learning Center

Commission Goal Area: Early Childhood Learning and Education; Parent & Community Education

Focus Area: Early Childhood Learning and Education

Population Served: Children; Parents

Funding:

Funded Committed in FY15-16: \$65,500

Previous First 5 Napa Funding: \$540,167

Total Funding: \$605,667

Program Description

The Community Resources for Children’s (CRC) Toy Library & Early Learning Center (TL&ELC) has been serving families, since 1978. To enrich the lives of children age 0-5 years, educational and developmentally appropriate toys and materials are available to families and early childhood caregivers and providers. The Toy Library and Early Learning Center is open to all Napa County residents, but affords rare learning opportunities and support for families that have barriers to high quality daycare such as: low or fixed income families, families that homeschool, and families with the additional barrier of not speaking English at home.

The Active Minds program is a bilingual, play-based school readiness program that serves children ages 2 to 3 years old and their families. An early childhood specialist teacher and a bilingual teacher assistant work with parents and children two days a week for four and half month sessions. Parents are provided education, support and role-modeling on how to support their preschoolers in home-based early learning experiences and the transition to kindergarten. Children are provided education experiences in key dimensions of a child’s early learning: social/emotional growth and language and pre-literacy skill development.

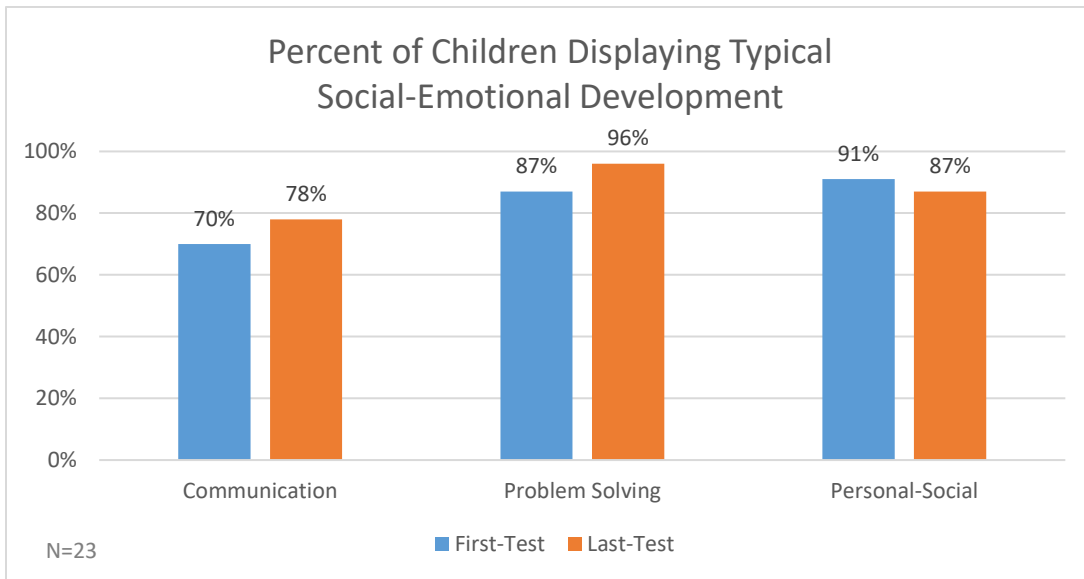
Activities & Outcomes

- **Children participate in early learning opportunities.**
 - The Toy Library & Early Learning Center (TL&ELC) was open 3 days a week and served 846 children 0-5 years old and 696 parent/caregivers.
- **Parents have increased involvement in early care and education programs.**
 - Active Minds was provided in 2-sessions that each lasted 4.5 months. Each session was 1.25 hours a day for 2-days a week. A total of 23 children and 23 parents attended the Active Minds program.
 - All 23 children received a Desired Results Developmental Profile (DRDP). The DRDP was established by the California Department of Education, Child Development Division and was used to structure curriculum around the needs of the individual children.

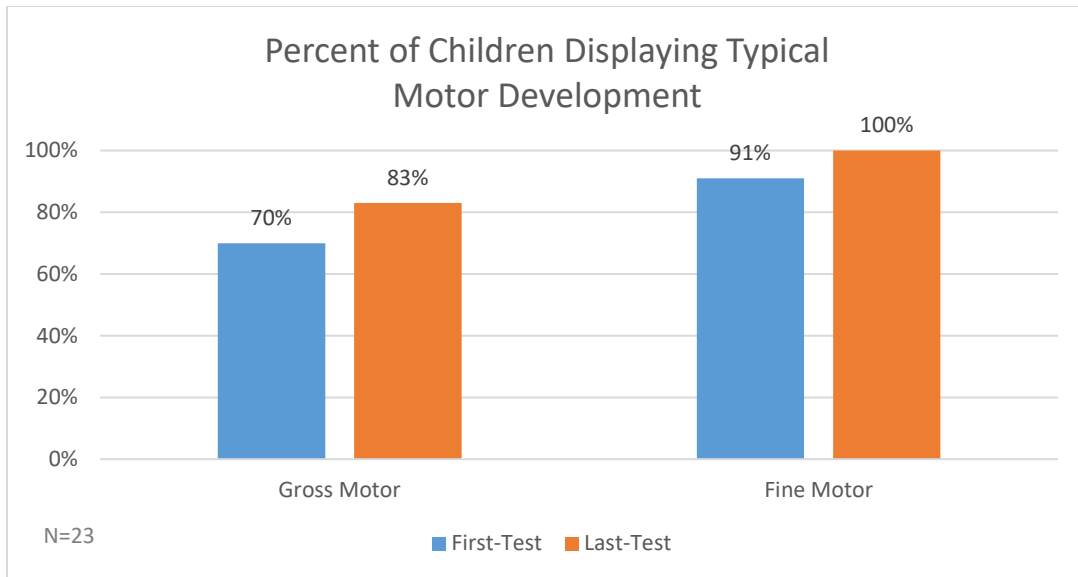
Outcomes

- **Measure:** The Ages and Stages Questionnaire-3 (ASQ-3) is a standardized screening tool that is backed by rigorous research. The ASQ-3 is used to assess whether a young child is displaying typical development for their age or if they are at risk of a developmental disorder.
 - The ASQ-3 consists of 30 developmental items that fall into 5 domains: communication; gross motor; fine motor; problem solving; and personal-social.
 - Based on the screening, children's scores for each developmental domain are categorized as *below cutoff*, *at cutoff* and "above cutoff". If a child's score in one or more domains falls *below cutoff*, it is recommended that the child be referred for further assessment and services. If a child's score falls *at cutoff* it is recommended the child be monitored, more frequently screened or referred. If a child's score is *above cutoff* it indicates this child is displaying typical development for their age within the developmental domain.
 - All 23 children who participated in the Active Minds program were screened using the ASQ-3 at the beginning of the program and then again 4.5 months later upon completion of the program. Scores were used to discuss a child's strengths and areas of concern with parents.

- Outcome: **Children show improvements on developmental domains.** Children showed improvements in social-emotional developmental domains. ASQ-3 results for all 23 children are presented below:
 - At the start of the program, 87% of children were displaying typical development in the *problem solving* domain; upon completion almost all (96%) children displayed typical development in the problem solving domain. The problem solving domain measures critical thinking skills.
 - At the start of the program, the fewest number of children were displaying typical development in the *communication* domain, with 70% of children above cutoff. By completion of the program that increased to 78% of children. The communication domain measures language skills that include what children can say and what they can understand.
 - At the start of the program, 91% of children were displaying typical development in *personal-social* development. Upon completion of the program that number reduced slightly to 87% of children demonstrating typical development in the personal-social domain. The personal-social domain measures a child’s sense of self and how they relate to the world.



- The Active Minds program partnered with another CRC program, the Active Bodies program, and includes a physical activity and nutrition component to the program. Large improvements were seen in children demonstrating typical gross and fine motor skills.
- At the start of the program 70% of children demonstrated typical development in the *gross motor* domain; upon completion, 83% were displaying typical gross motor development. Gross motor measures the ability to coordinate arms and legs when they move and play.
- At the start of the program 91% of children were displaying typical *fine motor* development. All (100%) Children demonstrated typical development in fine motor development upon completion. The fine motor domain measures small muscle use that includes the hands and wrist.



- Measure: The Active Minds parent survey measures parent knowledge, confidence and behaviors related to early learning experiences and transition activities.
 - Parents were given the Active Minds survey at the beginning of the program and then again 4.5 months later upon completion of the program. Of the 23 parents who participated in the Active Minds program 23 completed the first and last survey; one for each child. Presented below are results from those 23 survey.

- Outcome: **Parents have increased confidence in their ability to provide age-appropriate routines, play and expectations of their child.**
 - *Read or share books with your child:* At the start of the program 79% of parents reported they read or share books with their children at least 2 times a week; upon completion that increased to 92% of parents.
 - *Time spent reading with child:* At the start of the program only 66% of parents reported that on the days they did read to their child, they read for at least 10 minutes at a time; that leaves 1 out of 3 parents (34%) who read less than 10 minutes. Upon completion that increased to 69% of parents reading at least 10 minutes at a time with their children.
 - *Library Card:* By the end of the program 83% of parents report that they have a library card.

Parent Practices that Support Early Literacy Development

	Percent of Parents (n=23)			
Read or share books with child	First Class		Last Class	
2 times last week	9%	79%	22%	92%
3 or more times last week	70%		70%	
Time spent reading				
10-20 minutes	22%	66%	30%	69%
20-30 minutes	44%		39%	

- *Support expanded learning through conversation:* At the start of the program just 74% of parents reported supporting expanded learning for their child through conversation at least once a week, that leaves 1 out of 4 parents (26%) that do not. Upon completion of the program 95% of parents support expanded learning through conversation at least weekly.
- *Provide early learning experiences at home (shapes and color):* At the start of the program 100% of parents reported providing early learning experiences at home at least once a week; upon completion that remained stable with all (100%) parents. More interesting is the shift between parents who only provided those experiences once a week (17%) before the program who now provide those experiences every day.

Parent Practices that Support Early Childhood Development

	Percent of Parents (n=23)			
Support expanded learning through conversation	First Class		Last Class	
At least once a week	35%	74%	17%	95%
Every day	39%		78%	
Provide early learning experiences at home (colors and shapes)				
At least once a week	17%	100%	9%	100%
Every day	83%		91%	

- Measure: Toy Library & Early Learning Center (TL&ELC) survey measures provider use of the TL&ELC and its services and behaviors and confidence related to providing early learning experiences for children.
 - A sample of providers that use the TL&ELC are given the survey. Parents as well as early learning professionals bring children to the TL&ELC. This last year 79 providers completed the survey and the results are presented below.
- Outcome: **Parents have increased confidence in their ability to provide age-appropriate routines, play and expectations of their child.**
 - 66% of providers have been using the TL&ELC for at least 6 months; 1 in 5 of them (20%) have been using the TL&ELC for 3 or more years.
 - About half of providers (53%) reported their child spends at least 1 hour on a typical day playing with materials checked out of the TL&ELC.
 - 82% of providers agree: *I have increased (or plan to increase) the amount of time I spend playing with the children in my care.*
 - 84% of providers agree: *I have more confidence that I am providing appropriate activities for the children in my care.*

Community Resources for Children

CARES Plus (Comprehensive Approaches to Raising Educational Standards)

Commission Goal Area: Early Childhood Learning and Education

Focus Area: Early Childhood Learning and Education

Population Served: Providers

<u>Funding:</u>	<u>First 5 Napa County</u>	<u>First 5 California</u>	<u>Total Funding¹⁹</u>
<i>Funded Committed in FY15-16:</i>	\$50,000	\$50,000	\$100,000
<i>Previous Funding:</i>	\$274,210	\$224,488	\$489,698
<i>Total Funding:</i>	\$324,210	\$274,488	\$589,698

Program Description

First 5 California Signature Program: As a Signature Program, First 5 California offers matching funds to First 5 counties to implement CARES Plus. Since February of 2011 until FY15-16, First 5 California and First 5 Napa County have each invested at least \$50,000 each year. Although the CARES Plus program is ending this year FY2015-16 support of quality early learning care will continue through the IMPACT Initiative.

CARES Plus is a statewide professional development program for early educators designed to improve the quality of early learning programs by focusing on increasing the quality, effectiveness, and retention of early educators. The main objective is to improve both the quality of early learning programs and, ultimately to improve young children’s learning and development outcomes. CARES Plus Napa County provides stipends for college classes towards a degree and trainings, and support through technical assistance and advising. Main components of this year's program include: foundation of teacher-student /parent interaction education, professional goals, degree attainment, and early childhood education consortium maintenance.

Outreach, enrollment and program requirements are the same for all providers in the CARES Plus program, however funding sources are slightly different in stipend payment. For those providers working in State Subsidized child development centers, they are paid stipends through AB212 funds (contract from Department of Education administered by the Napa County Child Care and Development Planning Council/Napa County Office of Education) and the remaining providers in the community are paid through First 5 Napa County and matching First 5 California funds. For the early childhood providers, and remaining community the program is conducted seamlessly.

¹⁹Planning and development funds were expended between February 2011 and June 2011.

Activities & Outcomes

- In this last year a **total of 25 providers** (16 CARES Plus and 9 AB212) *completed all CARES Plus program requirements and received stipends*. Of the 25 providers there were 13 new providers²⁰ and 12 providers that have participated in CARES Plus in one of the last 4 years.
 - New participants: 13 providers
 - Return participants: 12 providers

**Number of Providers²¹ that Completed CARES Plus
Required Components and Received their Stipends by Fiscal Year**

	New Participants	Return Participant	Total
FY 2015-16: Completed all Requirements and Received Stipend	13	12	25
FY 2014-15: Completed all Requirements and Received Stipend	13	27	40
FY 2013-14: Completed all Requirements and Received Stipend	10	26	36
FY 2012-13: Completed all Requirements and Received Stipend			40
FY 2011-12: Completed all Requirements and Received Stipend			43 ²²

- Completion rates were lower this year than in past years.
- New CARES Plus participants: There were 28 new providers that completed the application and 13 providers²³ completed all the requirements.
 - Entering new CARES Plus: 28 providers
 - Completed CARES Plus: 13 providers
- Returning participants. There were 24 providers that previously participated in CARES Plus and returned; 12 of those providers completed all the requirements.
 - Returning CARES Plus: 24 providers
 - Completed CARES Plus: 12 providers

²⁰ This includes 2 providers who participated in CARES Plus in Solano County previously.

²¹ Reported are all providers that are enrolled in the CARES Plus program in a given year. Some participants may have been enrolled in several years, and therefore be reflected in several years.

²² This number does not include the Professional Development track providers from FY11-12. After FY11-12, that track was no longer offered through First 5 Napa County CARES Plus.

²³ This includes 2 providers who participated in CARES Plus Solano County previously. They were not required to complete Core requirements because they already completed those in Solano County.

- After applications have been completed, providers meet with a CARES Plus Professional Development Advisor. Advisors work with providers to co-create Professional Development Plans. These plans include educational and career attainment as well as short and long term goals.
 - 30 Professional Development Plans²⁴ were created (14 AB212 and 16 CARES Plus).
- There are 3 major CARES Plus requirements that newly entering providers must complete, in addition to the completion of degree-focused coursework for all participants:
- First requirement: "The Intro to CLASS" CLASS is the Classroom Assessment Scoring System; the on-line introduction to this tool familiarizes participants with the many uses of the tool and the importance of teacher-child interactions to the early learning process.
 - Entering new CARES Plus: 28 providers
 - Completed "The Intro to CLASS": 13 providers²⁵
- Second requirement: "Looking at Classrooms" (LAC) component moves from the utility and background of teacher-child interaction into an in-depth look at the concepts. Through a self-guided curriculum, providers learn to recognize effective teacher-child interactions that are beneficial to the early learning experience.
 - Entering new CARES Plus: 28 providers
 - Completed "Looking at Classrooms": 13 providers
- Third requirement: "second-hand smoke training" This is an on-line, self-guided program that introduces providers to the health risks of children exposed to second-hand smoke, and how to talk with parents who do smoke.
 - Entering new CARES Plus: 28 providers
 - Completed "second-hand smoke training": 13 providers
- Final requirement: Completion of 6 units of lower division 8-Core coursework, or Degree-focused coursework during the program. Coursework is determined through mutual professional development planning between participants and staff, within the constraints of the coursework available in the academic settings, as well as thoughtfulness to participant's educational needs.

²⁴ Professional Development Plans are completed with all applicants, including those who do not finish all requirements.

²⁵ Includes 2 providers who participated in Solano County previously and completed the Core requirements in Solano County. This is for all the following Core Requirements.

- Outcome: **Providers make progress in completing required coursework to earn degree in field related to child development.**
 - In this last year a **total of 25 providers** (16 CARES Plus and 9 AB212), completed the required 6 units or hours at adult school English as a Second Language pre-approved coursework during that time.

CARESPPlus Program Year ²⁶	Stipend Distribution Totals
2011-2012 ²⁷	\$89,900
2012-2013	\$74,750
2013-2014	\$64,350
2014-2015	\$71,600
2015-2016	\$68,700
Total	\$369,300

- This last year in total, \$68,700 in stipends were distributed.
- This year **6 providers earned degrees:**
 - 1 provider earned their **Bachelor of Science degree in Early Childhood Education** from Pacific Union College and received a bonus stipend of \$2,000.
 - 5 providers earned their **Associate of Science degree in Child and Family Studies** from Napa Valley College and received a bonus stipend of \$1,000.

Outcomes

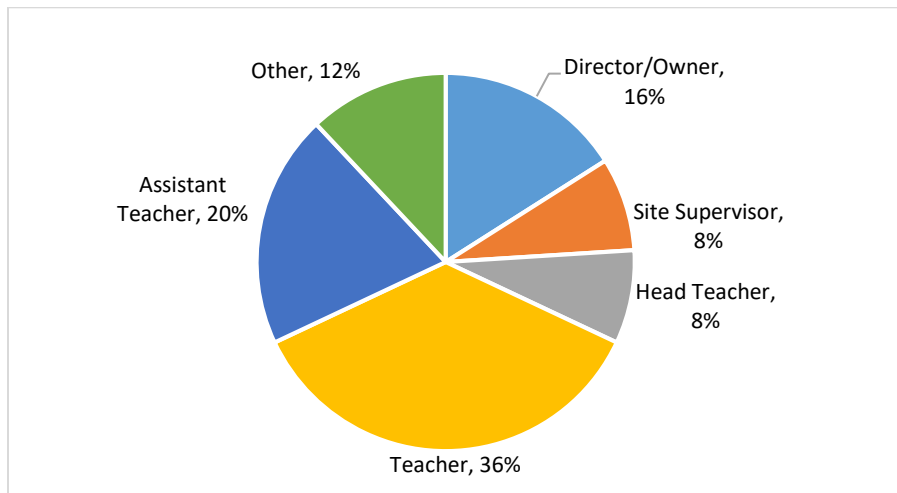
- Measure: The CARES Plus Participant Survey was developed to measure provider experiences within the CARES Plus program, and any barriers they may have to degree attainment. Surveys are provided to providers during their last meeting with CARES Plus staff and are completed during the meeting.
 - This last year, 25 providers (9 AB212 and 16 CARES Plus) completed all requirements and received a stipend. Of those providers, all 25 completed the Participant Survey and their data are presented below.

²⁶ This includes both the CARES Plus and AB212 funds.

²⁷ This includes stipends from the Professional Development track that is no longer offered.

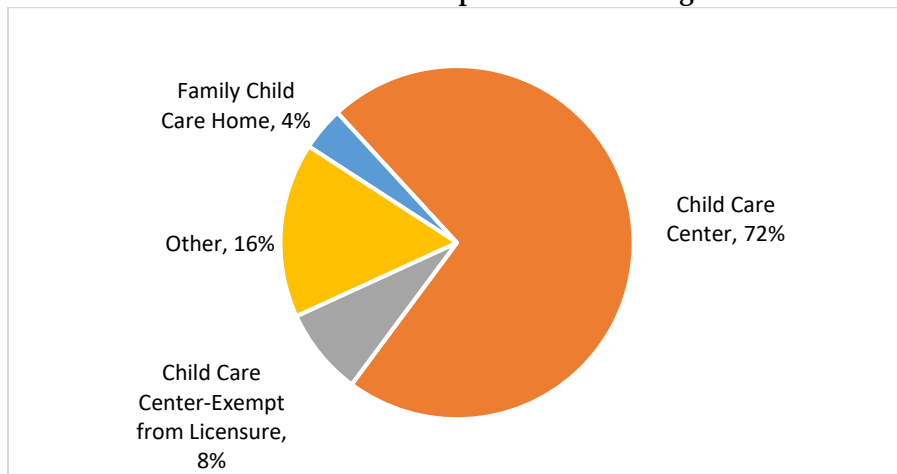
- CARES Plus provider profiles:
 - Just a little over a quarter of providers (28%) have worked in the child care field for 6 or less years, over half (60%) reported they have worked between 7 and 19 years and just 12% report having worked more than 20 years in the child care field.
 - All providers (100%) report they *plan on staying in the child care field in the next year*.
 - Only 12% report working with infants 0-17 months, 32% report working with toddlers 18-35 months, and 84% report working with preschool age 3-5 years. About a quarter (24%) report working with special needs children.
 - Over half of participants (56%) identified their position titles at work as either Assistant Teacher (20%) or Teacher (36%).

CARES Plus Providers Self-Identified Position Title at Work



- The majority of participants work at Child Care Centers (72%).

CARES Plus Participants Work Setting



- Outcome: **Providers develop knowledge and skills and report applying these to their work in early childhood settings.**
 - All providers (100%) agree *I have used new ideas and information in my current child care setting.*
 - Almost all providers (92%) agree *I have shared ideas to improve quality with my co-workers.*
 - Almost all providers (96%) agree *I can explain things to children in greater variety of ways.*
 - The vast majority of providers (92%) agree *I have included research based or best practices in my current child care setting.*

- In this last year a **total of 25 providers**, completed the required 6 units of college coursework, the equivalent hours at adult school English as a Second Language pre-approved coursework during that time. There were 6 participants that earned degrees in this last year: 1 B.A. degrees and 5 A.S. degrees.
 - The barrier reported by the most providers was that *classes were not held at a convenient time (24%) and they could not afford it (24%).*

On the Move

Latino Family Literacy Project

<i>Commission Goal Area:</i>	Parent and Community Education
<i>Focus Area:</i>	Early Childhood Learning and Education
<i>Population Served:</i>	Parents

Funding:

<i>Funded Committed in FY15-16:</i>	\$12,000
<i>Previous First 5 Napa Funding:</i>	\$43,330
<i>Total Funding:</i>	\$55,330

Program Description

On The Move’s Family Early Literacy Initiative provides a series of evidence based curriculums to promote parents reading to their children, establish other early literacy routines and orient families to the standards surrounding literacy within the Napa Valley Unified School District.

Activities & Outcomes

- There were 18 classes offered to parents at two school sites.
 - Abriedo Puertas: Aims to develop school readiness for Latino children through building parent capacity to be advocates in the lives of their children. Topics covered include: early literacy, bilingualism, health, socio-emotional wellness and parent leadership.
 - Latino Literacy: Aims to develop early literacy routines to support English as a second language children and families. Topics include: how to read books to children to promote literacy, letter recognition, numeracy, shapes, colors and songs.
 - School Developed Literacy Classes: Include classes on the school based reading system Read 180 as well as the DIBELS and CELDT tests which assess overall early literacy skills and English as a second language skills, respectively.

Number of children currently enrolled in TCCC

Class	Number of Classes	Number of Parents
Abriedo Puertas	3	18
Latino Literacy	3	16
School Developed and Focused Literacy Classes	12	179
Total	18	213

Outcomes

- Measure: The Family Latino Literacy Survey is designed to measure family early literacy practices that support their children’s early literacy skills. Parents complete the survey at the start of the LFLP and upon completion of the program.
 - Parents who attended Abriedo Puertas and Latino Literacy classes completed the Latino Literacy Survey. Of the 34 parents that attended the programs, 29 completed both the first survey and the last survey and are reported on below.
- Outcome: **Parents report establishing a regular reading routine and have increased the amount of time spent reading with their children.**
 - 93% of parents reported *establishing a reading routine*.
 - 93% of parents reported *reading to their children at least 2 times in the last week* and 83% reported when they read they do so for *more than 10 minutes at a time*.
 - 90% of parents reported *they have a library card (79%) or plan to get one (10%)*²⁸.

²⁸ Does not add to 90% due to rounding.

UpValley Family Centers

Parents as Educators

<i>Commission Goal Area:</i>	Parent and Community Education
<i>Focus Area:</i>	Early Childhood Learning and Education
<i>Population Served:</i>	Children; Parents

Funding:

<i>Funded Committed in FY15-16:</i>	\$27,300
<i>Previous First 5 Napa Funding:</i>	\$548,326
<i>Total Funding:</i>	\$575,626

Program Description

The UpValley Family Centers²⁹ (UVFC) provides a multitude of activities designed to provide parents with the tools to raise healthy children who will succeed in school and in life. The Parents as Educators provides parenting classes and a bilingual preschool activity hour for children and their caregivers. Parenting classes include 1-2-3 Magic and Triple P, the Positive Parenting Program.

Activities & Outcomes

- 10 classes in total were offered in St. Helena and Calistoga.
- **Increased involvement of parents in early care and education programs as indicated by participation in programs/classes.**
 - Target 30 parents;
 - *15 parents with 18 children attended 1-2-3 Magic classes with 62% attendance rate.*
 - *15 parents with 24 children attended Triple P Discussion Groups.*
 - *11 parents with 14 children attended Triple P Individual Consultations.*
 - Target 100 families;
 - *87 parents and 116 children attended Ninos Activos program with 66% attendance rate.*

²⁹ UVFC is the result of the Calistoga Family Center and the St. Helena Family Center merging in 2014.

Outcomes

- Measure: The Parenting Class Questionnaire for the 1-2-3 Magic parenting classes was developed to measure parenting practices, knowledge and understanding of early childhood development. Of the 15 parents that participated in 1-2-3 Magic class, 13 of them completed a survey at the start of the workshop and again at the end, and are presented below.
- Outcome: **Parents are confident in their ability to provide age-appropriate routines, play and expectations of their child, and they are confident in their understanding of how their child is growing and developing.**
 - 31% of parents reported that less than half the time they are struggling to *set limits for their children.*
 - 92% of parents reported that more than half the time they are able to *speak with their child in a calm voice to get them to obey.*
 - 92% of parents reported that more than half the time they are able to *talk with their child about why the behavior is not appropriate.*
 - All parents (100%) reported they *understand how my child is growing and developing.*
 - All parents (100%) reported they *understand what typical behavior is for my child at his/her age.*
 - All parents (100%) parents reported they are *confident in my parenting skills.*

- Measure: The Ninos Activos Survey was developed to measure parenting practices and understanding of early childhood development, and parent confidence in supporting their children in kindergarten transition. Of the 87 parents that participated in the Ninos Activos classes, 59 parents completed both the first and last class surveys.
- Outcome: **Parents are confident in their ability to provide age-appropriate routines, play and expectations of their child, and they are confident in their understanding of how their child is growing and developing.**
 - *Read or share books with your child:* At the start of the program 83% of parents reported reading to their child at least two times in the last week; upon completion that increased to 90% of parents. Further analysis shows that 20% of parents had an actual increase in the frequency they read to their child each week and 76% maintained.
 - *Time spent reading with child:* At the start of the program 58% of parents reported that on the days they did read to their child, they read for at least 10 minutes at a time; upon completion that increased to 84% of parents. Additionally, 31% of parents had actual increases in the time spent and 59% reported maintaining at least 10 minutes at a time spent reading with their children.
 - *Visit the library with your child:* At the start of the program 68% of parent reported visiting the library with their children at least one time a month; upon completion that increased to about 3 out of 4 parents (74%). Further analysis shows that 15% of parents increased the number of times they took their child to the library and an additional 80% reported maintaining the number of times they visit the library.
 - *Library Card:* By the end of the program 88% of parents report that they either have a library card or plan on getting one.

Parent Practices that Support Early Literacy Development

	Percent of Parents (n=59)			
Read or share books with child	First Class		Last Class	
2 times last week	27%	83%	24%	90%
3 or more times last week	56%		66%	
Time spent reading				
10-20 minutes	39%	58%	70%	84%
20-30 minutes	19%		14%	
Visit the library with your child				
at least 1 time last month	29%	68%	32%	74%
2 or more times last month	39%		42%	

- *Support expanded learning through conversation:* At the start of the program 78% of parents reported supporting expanded learning for their child through conversation at least once a week; upon completion that increased to 91% of parents. Further analysis shows that about a quarter of parents (27%) reported an increase the frequency they supported expanded learning through conversation with their child and an additional 66% maintained.
- *Provide early learning experiences at home (shapes and color):* At the start of the program 92% reported providing early learning experiences at home at least once a week; upon completion that increased to 95% of parents. Further analysis shows that about 14% reported an increase and 81% reported maintaining the frequency they provided early learning experiences at home.

Parent Practices that Support Early Childhood Development

	Percent of Parents (n=59)			
Support expanded learning through conversation	First Class		Last Class	
At least once a week	12%	78%	10%	91%
Every day	66%		81%	
Provide early learning experiences at home (colors and shapes)				
At least once a week	14%	92%	9%	95%
Every day	78%		86%	

Focus Area: Early Detection, Intervention and Health Education

Strategies:

- ❖ Support prevention, education, outreach, screening, and early assessment and referral. Topics of emphasis include: nutrition, obesity, physical activity, oral health and family stability.
- ❖ Provide comprehensive perinatal (prenatal and postpartum) services for families. Description of possible components: prenatal care and education, home visitation, breastfeeding, developmental assessments of newborns, parent education (including normal development, attachment and bonding), postpartum depression screening/referral/support/treatment, linkages to community support network and peer network.

Funded Agencies & Details

Agency	Program	First 5 Napa Goal	FY15-16 Funds
Community Resources for Children	Active Bodies/Children & Weight Coalition Support	✓ Early Childhood Health	\$55,400
Cope Family Center	Healthy Families Napa-Home Visitation	✓ Early Childhood Health	\$68,400
ParentsCAN	Healthcare Program	✓ Early Childhood Health	\$73,000
Queen of the Valley Medical Center	Queen of the Valley Mobile Dental Clinic	✓ Early Childhood Health	\$44,900

Community Resources for Children

Active Bodies & Children and Weight Coalition Support

<i>Commission Goal Area:</i>	Early Childhood Health
<i>Focus Area:</i>	Early Detection, Intervention and Health Education
<i>Population Served:</i>	Providers

Funding:

<i>Funded Committed in FY15-16:</i>	\$55,400
<i>Previous First 5 Napa Funding:</i>	\$452,281
<i>Total Funding:</i>	\$507,681

Program Description

The Active Bodies program serves early childhood providers to improve the quality of early childhood education in the area of nutrition and fitness. As a result of the immense success of the Active Bodies program in child care centers, and the demand from the family child care homes to be included, Active Bodies implemented the *Let's Move! Child Care* curriculum. *Let's Move! Child Care* curriculum is part of Michelle Obama's larger *Let's Move!* Initiative aimed to reduce childhood obesity within a generation. Using the foundation of the previous curriculum used by Active Bodies this new program expands the Active Bodies target from just child care centers to include family child care homes. Active Bodies staff provides onsite assessment, strategizing, and student and teacher instruction as part of the program. Based on the individual needs of each site, strategies for improvements to meet defined goals are outlined in the "Action Plans" for the year. The Children and Weight Coalition provides leadership for the Active Bodies program and the community, serving as a resource for evidence-based strategies that promote children's health through sound nutrition and physical activity.

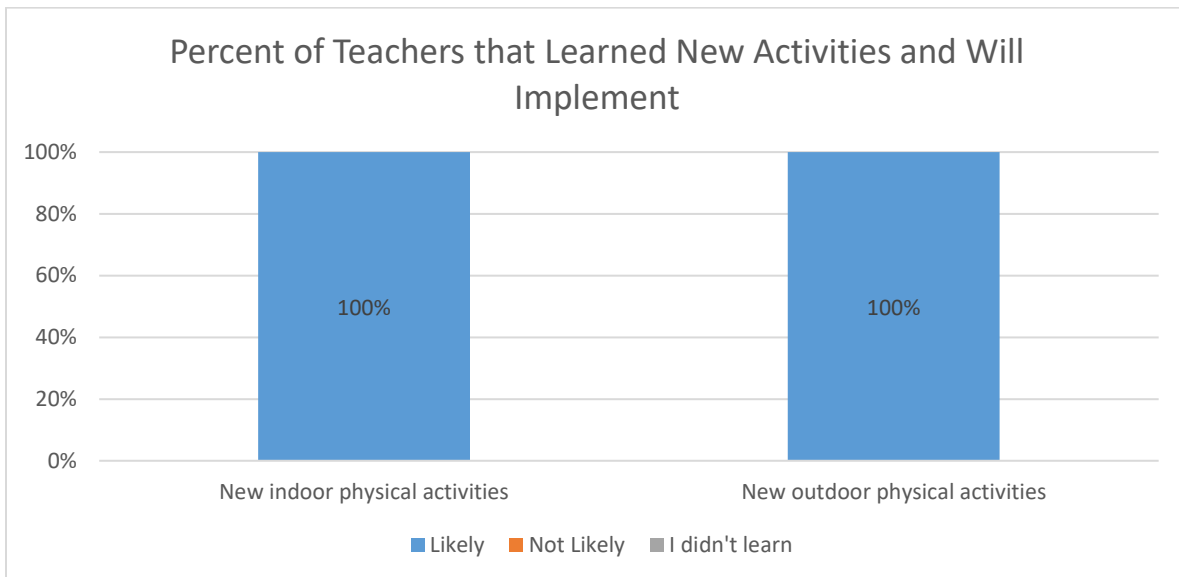
Activities & Outcomes

- 6 child care centers & 4 child care homes participated. These programs serve:
 - 334 children
- 25 goals were created and included in center and home Action Plans.
 - 23 goals were achieved
 - 2 goals had progress, but not fully achieved
- 4 on-site trainings per center/family home were completed by Active Bodies staff.
 - 39 child care providers were present.
- 6 off-site workshops were offered to Active Bodies providers and the community.
 - Children and Weight Coalition members provided 4 of these workshops.
 - 50 child care providers and 14 parents attended.
- Children and Weight Coalition attended 4 community events where 611 healthy eating and physical activity resources, books, handouts and other related items were provided to young children and families.

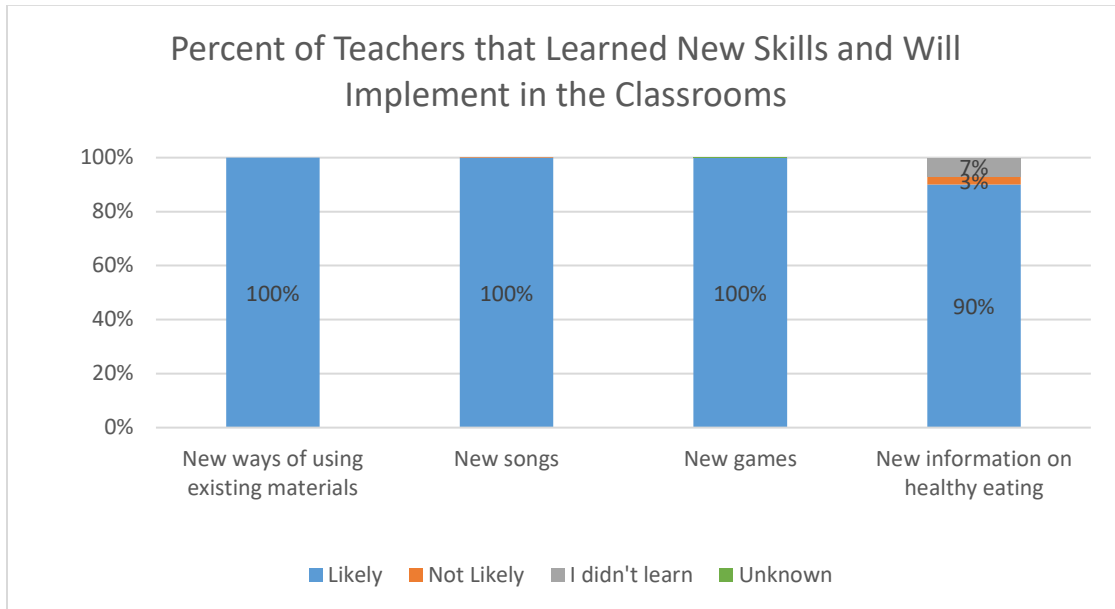
Outcomes

- Measure: The *Let's Move!* Child Care Checklist Quiz was developed for providers to self-assess their nutrition and physical activity practices and policies. The quiz was used by Active Bodies staff and center and home staff to create goals for the year in their Action Plans. Upon completion of the program, center and home staff completed the quiz for a second time to track progress in improving policies and practices.
 - The *Let's Move!* Child Care Checklist Quiz is comprised of 15 nutrition and physical activity best practices. Each item is scored on a 4-point Likert scale from *Yes, fully meeting this best practice* to *Unable to work on meeting this best practice right now*. Not all centers and homes answered all 15 items, as items are specific to centers/home serving different age groups- infants, toddlers and preschoolers.
 - Nutrition and physical activity subscales were created for each age group and are presented below. Some items may be overlapping as they pertain for two age groups. For example, toddler and preschool nutrition have 7 overlapping items.
 - All 10 participating centers and homes completed the quiz at the start of the program and again upon completion. With such a small number of completed quizzes these results should be interpreted with caution as small shifts can create large changes.
- Measure: The Active Bodies Teacher Survey was designed to better understand the participating teacher's prior experience with the Active Bodies program and their most recent experiences with learning new activities and ideas around how best to engage children in healthy nutrition and physical activities.

- There are 6 main items. Teachers are asked to report whether they engaged in the activity or learned the information provided to them. If they had, they are then asked how likely they are to integrate it into their classrooms.
- There were 29 teachers who completed the survey. Results for all 29 teachers are presented below.
- Only 11% of providers reported this was their first year caring for children at this site, leaving the vast majority (89%) having worked there over a year; the average amount of time was 9 years working at their current site.
- A little over half (56%) of teachers reported they participated in previous years.
- **Outcome: Providers report increased knowledge on how to promote healthy weight behaviors for children 0-5 years old.** The vast majority of providers report they learned new ideas and are likely to implement these ideas to promote healthy weight through:
 - new indoor physical activities (100%)
 - new outdoor physical activities (100%)



- new ways of using existing materials (100%)
- new songs (100%)
- new games (100%)
- new information on healthy eating (90%)



- Outcome: **Improvement in early learning experiences for children 0-5 years in nutrition and health.** There were 10 sites that completed the *Let's Move!* Child Care Checklist Quiz. With such a small number of completed quizzes these results should be interpreted with caution as small shifts can create large changes.
 - Centers/homes had an *increase in children receiving age-appropriate meals and increased nutritional value* in all age ranges.
 - Centers/homes demonstrated some *increased time and quality of physical activity with children* in all age ranges.

**Average Scores on Nutrition Subscales
at the Start of the Program and Upon Completion**

		Average Subscale Scores Nutrition	
Student Age (scale range)	N	Time-1	Time-2
Infant (0-3)	4 ³⁰	2	3
Toddler (0-21)	10	19	20
Preschool (0-24)	10	21	22

**Average Scores on Physical Activity Subscales
at the Start of the Program and Upon Completion**

		Average Subscale Scores Physical Activity	
Student Age (scale range)	N	Time-1	Time-2
Infant (0-6)	4 ³¹	5	6
Toddler (0-6)	6 ³²	5	6
Preschool (0-9)	10	7	8

³⁰ Three centers/homes answered for time-1 and four centers/homes answered for time-2; all are included in the averages.

³¹ Three centers/homes answered for time-1 and four centers/homes answered for time-2; all are included in the averages.

³² Three centers/homes answered for time-1 and six centers/homes answered for time-2; all are included in the averages.

Cope Family Center

Healthy Families Napa- Home Visitation

<i>Commission Goal Area:</i>	Early Childhood Health
<i>Focus Area:</i>	Early Detection, Intervention and Health Education
<i>Population Served:</i>	Children; Parents

Funding:

<i>Funded Committed in FY14-15:</i>	\$68,400
<i>Previous First 5 Napa Funding:</i>	\$232,800
<i>Total Funding:</i>	\$301,200

Program Description

Beginning in 2011 Cope Family Center (Cope) began implementing the Healthy Families America (HFA) Home Visiting Model. This is a nationally recognized evidence-based home visiting program designed to work with high-risk families to help prevent child maltreatment and strengthen and stabilize the family.

Voluntary participation in HFA services begin prenatally or shortly thereafter. Visits are intensive and slowly become less frequent throughout the 3-5-year duration. Case managers work with families to address the often transgenerational histories of trauma, intimate partner violence, mental health and substance abuse issues. Through this work the HFA model aims to see, "all children receive nurturing care from their family essential to leading a healthy and productive life"³³.

³³ http://www.healthyfamiliesamerica.org/about_us/

Activities & Outcomes

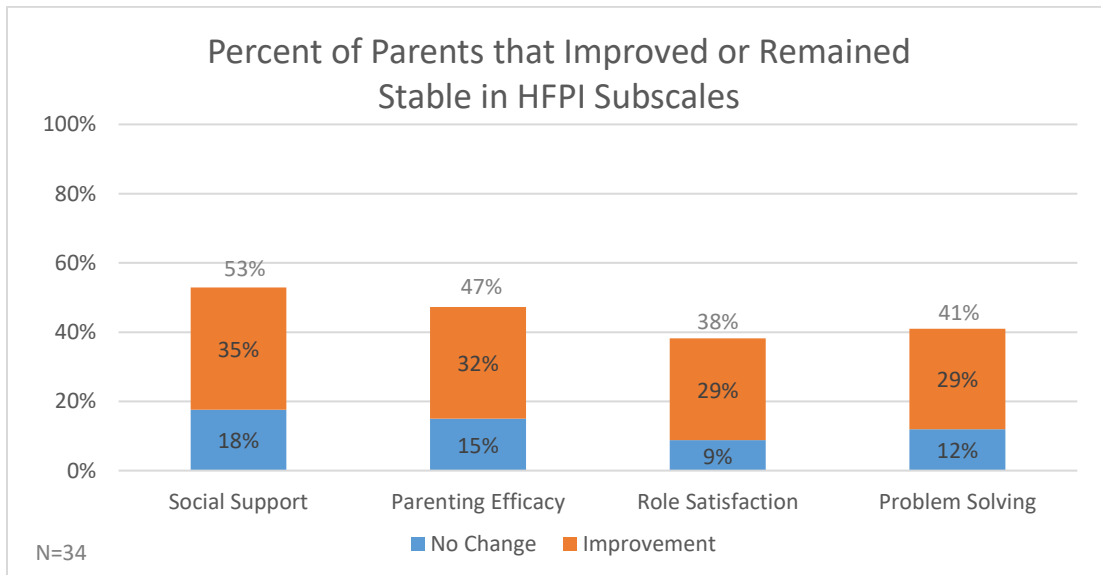
- In this last year, 62 Universal Screens were completed with pregnant women and families in the community. Screens are considered an intervention in themselves and determine eligibility through meeting a minimum number of risk criteria.
- Of those 62 Universal Screens, 37 families completed the Parent Survey to determine eligibility for HFA home visiting program.
- Of those, 25 families were determined to be “high risk” and eligible for enrollment.

Screening Process	Description	Number of Families
Universal Screens	completed in the community and at Cope Family Center	62
Parent Surveys	completed by Cope Family Center to determine eligibility	37
HFA Eligible	“high risk” families	25

- **High risk families receive HFA home visiting services.**
- 25 families met the eligibility criteria and 19 families were enrolled. Due to program capacity 1 family remains on the eligibility list (because their babies are not yet approximately 2.5 months old, at which time they become ineligible); there were 5 families that lost contact or declined services.
- *63 families have received HFA home visiting services this last year.* Of these families, 44 were continuing from last year, 19 were newly enrolled. There were 58 children and 6 children still in utero served.
- Families have worked with HFA home visitors to create 152 Family Goal Plans.
 - Despite the multiple stressors HFA families are experiencing, HFA home visitors have kept 85% of their conversations with families focused on their goals- this includes reviewing the goals, brainstorming on strategies to achieve those goals and measuring their progress.
 - HFA home visitors kept the vast majority (96%) of conversations focused on Parent Survey topics, such as: coping skills, family and community supports and stressors, as well as family strengths and reflection and insight into how past experiences may shape current life.
- *Families are receiving needed services* with 250 referrals provided to HFA families; such as: adult education, housing authority, food bank, and drug and alcohol services.

Outcomes

- Measure: Healthy Families Parenting Inventory (HFPI) is a home visitation instrument designed as an outcome tool that also tracks immediate progress for clinical use.
 - The HFPI is a 63-item instrument with 9 parenting subscales. For the purposes of this evaluation, subscale results for social support, problem solving, role satisfaction and parent efficacy were tracked and presented below.
 - Presented below are the results of HFPI measurements for 34 HFA families.
- Outcome: **Parents reported increased self- efficacy & family strengths.** HFA families have demonstrated stability and improvements in their ability to access social supports, their satisfaction with their role as a parent and also their problem solving skills.
- In the first year of the program, the first assessment³⁴ is conducted prenatally, the second at birth, at 6-months and then a year; in subsequent years families are assessed annually. There was an average of 10 months between the two assessments, with the least amount of time being 31 days between tests and the most approximately 25 months.
 - *Social Support* 53% of clients either remained stable or improved their ability to access social supports; 35% of clients actually improved.
 - *Parenting Efficacy* Overall 47% of clients either remained stable or improved their belief in being a competent parent; 32% of clients actually improved.
 - *Role Satisfaction* 38% of clients remained stable or improved their satisfaction with being a parent; 29% of clients actually improved.
 - *Problem Solving* Overall 41% of clients either remained stable or improved their skills in problem solving; 29% of clients actually improved.



³⁴ Families may be recruited up until the child’s second week of life and would not have the prenatal assessment. Only families with two assessments are included here.

- Measure: The Ages and Stages Questionnaire-3 (ASQ-3) and the Ages and Stages Questionnaire: Social-Emotional (ASQ: SE) are standardized screening tools that are backed by rigorous research. The ASQ-3 and ASQ: SE are used to assess whether a young child is displaying typical development for their age, or if they are at risk of a developmental disorder or social-emotional problems.
- Outcome: **Children are receiving wellness services.**
 - *Developmental Screens:* 48 children received ASQ-3 screens at regular intervals and 44 children received ASQ: SE screens at regular intervals. 3 screens indicated a need for referral.
 - 84% of children³⁵ are up to date on their *immunizations*.
 - 100% of children have a *medical home*, or a place they usually take their child when they are sick or need advice about their health, other than the emergency room.
 - 100% of children have *health insurance*.

³⁵ Only currently enrolled families are included. There has also been a delay in data entry.

ParentsCAN

Healthcare Program

<i>Commission Goal Area:</i>	Early Childhood Health
<i>Focus Area:</i>	Early Detection, Intervention and Health Education
<i>Population Served:</i>	Parents

Funding:

<i>Funded Committed in FY15-16:</i>	\$50,000
<i>Additional Funding in July 2015:</i>	\$23,000
<i>Previous First 5 Napa Funding:</i>	\$562,256
<i>Total Funding:</i>	\$635,256

Program Description

Using a parent to parent approach and medical home practices, ParentsCAN (PCAN) aims to increase access and utilization of appropriate health, developmental, social-emotional and social services available for newborns, infants and young children age birth to 5 years with special healthcare needs. PCAN provides interventions that aim to reach families as early as possible. Families receive outreach, education, referral, monitoring services and ongoing parent support and education. Understanding that medical providers have the first contact with families, PCAN conducts outreach and education to providers to minimize barriers for families to access supportive services. In this last year, PCAN included the development of a protocol with health providers to formalize developmental screenings and referral process. In addition, in July 2015 PCAN was awarded additional funds³⁶ to support the same development of protocols for early learning providers through the facilitation of the Developmental Screening Collaborative.

³⁶ These funds are from First 5 California's IMPACT grant awarded to First 5 Napa County in 2015.

Activities & Outcomes

- PCAN served 244 families with children 0-5 years; 170 were newly enrolled families and 74 were continuing families.
- **Develop strong linkages across agencies, so that children have access to the appropriate developmental and mental health services they need.**
 - 102 information consults and referrals were provided to families.
 - Agencies PCAN connected families to include:
Basic safety net community service providers, doctors, mental health therapists, North Bay Regional Center, Napa Infant Parent program, Community Resources for Children, Head Start and education service providers.
- PCAN provided 4 presentations to medical providers to assess readiness and needs to integrate routine developmental screening within their practices.
 - 26 medical providers were reached at Harvest Pediatrics, Kaiser Permanente, Napa Valley Pediatric and Ole Health.

Outcomes

- Outcome **Increase the number of children 0-5 years with access to specialized health services as needed.**
- **Increase the number of children screened for risk of health or developmental disabilities.** Measure: The Ages and Stages Questionnaire-3 (ASQ-3) and the Ages and Stages Questionnaire: Social-Emotional are standardized screening tools that are backed by rigorous research. The ASQ-3 and ASQ: SE are used to assess whether a young child is displaying typical development for their age or if they are at risk of a developmental disorder or social-emotional problems.
 - 150 ASQ-3 and ASQ: SE screens were completed.
 - ✓ 102 ASQ-3
 - ✓ 48 ASQ-SE
 - PCAN staff did 47 of those screens at the family's home.

- Measure: Parent survey distributed for all services provided at PCAN and was developed to measure parent knowledge of services, confidence and satisfaction with services.
 - 56 parents completed the parent survey and are presented below.
- Outcome: **Parents report they are comfortable advocating for their children and have the support and information they need to make informed decisions about needed treatment and services.**
 - 95% agreed they have an *increased understanding of my child's disability/diagnosis*.
 - 95% of parents agreed they are *more familiar with local services and supports for their child*.
 - 89% agreed they can *identify more people and places outside of their family they can go for support*.
 - 96% agreed they feel *more confident working with professionals, and feel part of a collaborative team*.
- Outcome **Developing strong and effective linkages across agencies, so that children have access to the appropriate developmental/mental health services they need.**
 - One MOU was created with Harvest Pediatrics to pilot protocols and procedures for providing screeners at the medical office; providing referrals for screenings; and supportive services for families.
 - 85 ASQ's were completed and scored by Harvest Pediatrics and returned to PCAN for follow-up with families.
 - 2 screening assessments were completed with Kaiser Permanente and Napa Valley Pediatrics Clinics to determine readiness and needs to begin steps toward implementing screening procedures and protocols.
- In July 2015, PCAN received \$23,000 in additional funding as part of the IMPACT Initiative. In this first year PCAN brought together community stakeholders and developed the Developmental Screener Collaborative.
- In this last year, the collaborative developed the screening project logic model with strategies aimed at creating protocols and procedures for increasing access to developmental screenings for all children in Napa County and ensuring comprehensive and consistent methods for providing screenings, referrals and services. Focus has been on working with early learning providers as part of the Quality Counts Initiative³⁷.

³⁷ The Quality Counts Initiative is a county wide initiative aimed at improving quality in early learning environments.

Queen of the Valley Medical Center Community Outreach
Mobile Dental Clinic

Commission Goal Area: Early Childhood Health
Focus Area: Early Detection, Intervention and Health Education
Population Served: Children; Parents

Funding:

Funded Committed in FY15-16: \$44,900
Previous First 5 Napa Funding: \$162,171
Total Funding: \$207,071

Program Description

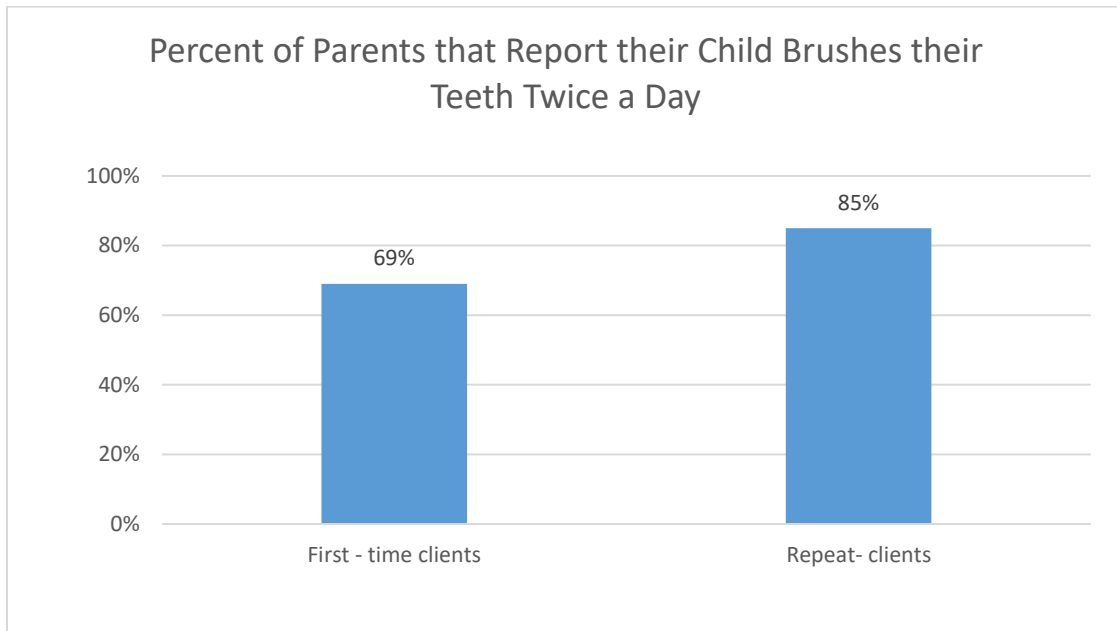
The Queen of the Valley Mobile Dental Clinic (QVMDC) aims to improve access to oral health services. This comprehensive oral health program serves low-income children 6 months to 5 years of age through on-site visits to preschools and kindergartens. Preventative dental care, oral health education services, and dental treatment services are provided in the mobile dental clinic.

Activities & Outcomes

- **Children are receiving appropriate and timely oral health visits.** Children, 6 months to 5 years old, received dental exams, x-rays, cleanings and sealants:
 - Target: 400 children
 - **Served: 863 children**
 - 97% of existing patients saw a dentist within 6 months to 1-year prior
 - 97% presented with improved oral health on the dentist-completed oral health status checklist.
 - 241 children received specialty services. Procedures performed include composite fillings, extractions, space maintainers, crowns, and root canals.

Outcomes

- Measure: The Parent Knowledge survey is a short 3 item survey designed to measure parent knowledge of recommended preventative dental care practices.
 - 113 parents completed the survey while their child was receiving dental services.
- A Mann-Whitney U test was conducted to determine if there were differences in the distribution between clients who had previously received services from the mobile van versus first time clients that report their child brushes their teeth twice a day. If the difference is large enough from what we would expect if there is no relationship, it can be concluded that it was not just due to chance. When the difference is large enough it is considered statistically significant.
- Outcome: **Parents report knowledge of recommended preventative dental care practices.**
 - Clients who have received services from the mobile van previously were significantly more likely to report *their child brushes their teeth twice a day* than new clients ($U = 1279, z = 2.078 p > .05$).
 - Of the 45 first time clients to the mobile van, 69% reported *their child brushes their teeth twice a day*; however, of the 68 existing clients 85% reported *their child brushes their teeth twice a day*.



Part III: Sponsorships

Part III is a brief summary of the activities, trainings and materials funded by First 5 Napa County Sponsorship funds in the fiscal year 2015-16. Last year these grants were short-term funding opportunities for amounts up to \$4,000.

Throughout the year, applicants submit a Request for Sponsorship Funds to the Commission. The request describes the project or activity, explains the need, and how the proposed project or activity furthers the goals of the Commission. Requests are submitted on an on-going basis until the budgeted Sponsorship funds are exhausted. For each submission a Sponsorship Review Request is completed which provides a systematic review of applications. Commission staff and the Executive Committee use the review process, and based on those reviews, the Executive Committee makes a recommendation to the full Commission.

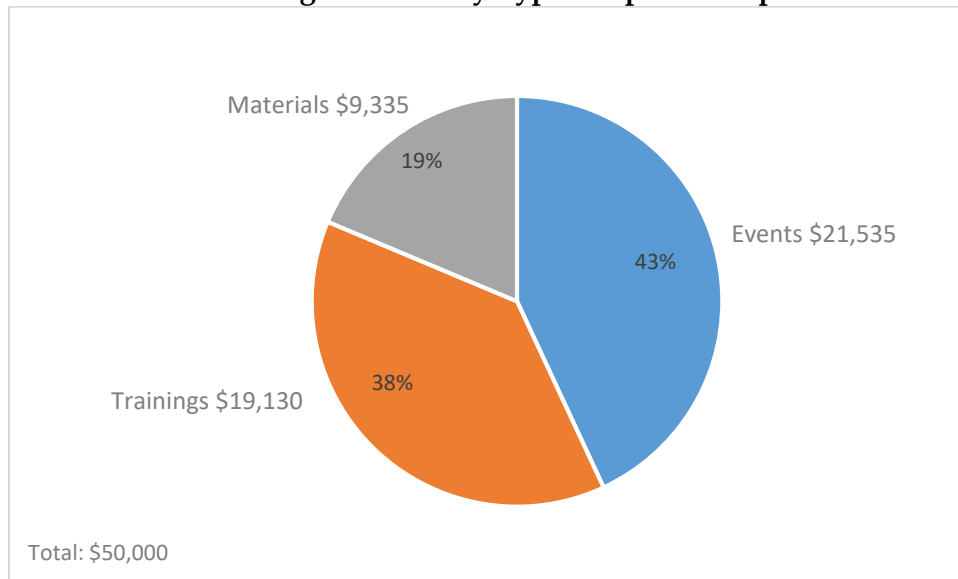
In addition to the Requests for Sponsorships Funds, the Commission began awarding Core Endorsement Sponsorships in fiscal year 2012-13. First 5 staff review the sponsorships awarded over several years and choose agencies to invite to apply at the beginning of the fiscal year. These suggestions are presented to the First 5 Commission to review. Core endorsements are by invitation at the beginning of the year, and are meant to provide agencies with funded amount knowledge at the beginning of the year to provide them with more planning time.

Sponsorship Summaries

Funding Summary			
Events	Training	Materials	Total First 5 Funding FY 2015-16
\$21,535	\$19,130	\$9,335	\$50,000

In fiscal year 2015-16 Sponsorship funds were used to meet the First 5 Napa Goal Area 1) Early Childhood Learning and Education, Goal Area 2) Early Childhood Health, and Goal Area 3) Parent and Community Education. Sponsorships provided funds for events, training and materials. The below graph shows the sponsorship funds distributed by the type of sponsorship.

Fiscal Year 2015-16 Sponsorship Funding Amounts by Type of Sponsorship



2015-2016 Program Summary Report

Sponsorships are outlined below by type of project, and a brief summation of services is provided.

Title	Description	Local Goal Area	Amount
Alternatives for Better Living	All Dad's Matter	Parent and Community Education	\$2,600
Community Health Initiative	10 th Anniversary Celebration	Early Childhood Health	\$4,000
Community Resources for Children	Tiki for Tots	Parent and Community Education	\$2,500
Cope Family Center	Blue Ribbon Campaign	Parent and Community Education	\$4,000
First Christian Preschool	Musical Instruments	Early Childhood Learning and Education	\$1,335
Le Petit Elephant Nursery and Preschool	Gross Motor Equipment	Early Childhood Learning and Education	\$4,000
Mentis, Napa's Center for Mental Health Services ³⁸	World of Wine Event	Parent and Community Education	\$2,500
Napa County Health and Human Services	Touchpoints Training	Parent and Community Education	\$4,000
Napa County Office of Education	Tuition for Reflective Supervision	Early Childhood Health	\$1,900
Napa County Office of Education- Napa Junction Preschool	Lawrence Hall of Science Visit to Preschool	Early Childhood Learning and Education	\$535
Napa Infant-Parent Mental Health Fellowship	2 Infant Parent Mental Health Sponsorships	Early Childhood Health	\$7,000
Napa Valley Community Housing	Housing Community Rooms Early Learning Materials	Early Childhood Learning and Education	\$4,000
NEWS	Domestic Violence and Sexual Assault Volunteer Training	Parent and Community Education	\$3,630
ParentsCAN	Grand Traditions Gala Event	Parent and Community Education	\$4,000
UpValley Family Centers	Back to School Event & 9 th Annual Dia de los Muertos Celebration	Early Childhood Learning and Education & Parent and Community Education	\$4,000
<i>Total</i>			<i>\$50,000</i>

³⁸ Formerly known as Family Service of Napa Valley.

Events

Title	Description	Local Goal Area	Amount
Community Health Initiative	10 th Anniversary Celebration	Early Childhood Health	\$4,000
Community Resources for Children	Tiki for Tots	Parent and Community Education	\$2,500
Cope Family Center	Blue Ribbon Campaign	Parent and Community Education	\$4,000
Mentis, Napa’s Center for Mental Health Services ³⁹	World of Wine Event	Parent and Community Education	\$2,500
Napa County Office of Education- Napa Junction Preschool	Lawrence Hall of Science Visit to Preschool	Early Childhood Learning and Education	\$535
ParentsCAN	Grand Traditions Gala Event	Parent and Community Education	\$4,000
UpValley Family Centers	Back to School Event & 9 th Annual Dia de los Muertos Celebration	Early Childhood Learning and Education & Parent and Community Education	\$4,000
<i>Total</i>			\$21,535

Seven **events** were held throughout Napa County with help by First 5 Napa County. Events were attended by service providers, community based organizations, community members and children and their families. Events included a community wide child abuse prevention campaign, information and orientation to school event and raising awareness of Napa County’s cultural diversity celebration. Four sponsorships were for fundraising events that raised essential unrestricted funds for agencies serving families of children with special needs, supporting providers and families with early childhood education needs, providing access to health insurance and providing mental health services to families with children 0-5 years old.

³⁹ Formerly known as Family Service of Napa Valley.

Materials

Title	Description	Local Goal Area	Amount
First Christian Preschool	Musical Instruments	Early Childhood Learning and Education	\$1,335
Le Petit Elephant Nursery and Preschool	Gross Motor Equipment	Early Childhood Learning and Education	\$4,000
Napa Valley Community Housing	Housing Community Rooms Early Learning Materials	Early Childhood Learning and Education	\$4,000
<i>Total</i>			\$9,335

Three sponsorships were provided for **materials** by First 5 Napa County. Materials included books, size appropriate furniture, electronic devices, outdoor and indoor gross motor equipment and other early learning materials.

Trainings

Title	Description	Local Goal Area	Amount
Alternatives for Better Living	All Dad’s Matter	Parent and Community Education	\$2,600
Napa County Health and Human Services	Touchpoints Training	Parent and Community Education	\$4,000
Napa County Office of Education	Tuition for Reflective Supervision	Early Childhood Health	\$1,900
Napa Infant-Parent Mental Health Fellowship	2 Infant Parent Mental Health Post-Graduate Certificate Program Sponsorships	Early Childhood Health	\$7,000
NEWS	Domestic Violence and Sexual Assault Volunteer Training	Parent and Community Education	\$3,630
<i>Total</i>			\$19,130

Five **training** related sponsorships were provided with help by First 5 Napa County. These trainings were attended by service providers, families and community residents working and living throughout Napa County.

Trainings included evidence and strengths based trainings on including fathers in their children’s lives, approaches to infant-parent relationships, neuro-relational and neuro-developmental models of working with young children, and evidence based methods on how to support victims of domestic violence and sexual assault. The two providers in the Infant Parent Mental Health Post-Graduate Certificate Program and the one provider in the reflective supervision training are all currently enrolled in the programs to be completed this spring.

Part IV: Conclusion

Conclusion:

Programs funded in fiscal year 2015-16 by First 5 Napa County addressed the overall goals and focus areas by implementing the strategies outlined in the 2011-2016 Community Plan. Each program clearly documented their activities and outcomes and participated in the data collection process to track their progress throughout the year. This report includes the summation of those efforts in detail.

Programs increased **access to healthcare for young children** through outreach and education to providers throughout Napa County and case management services that support families in becoming insured, staying insured and fully utilizing their insurance. Programs working toward improvements in **infant, family and early childhood mental health** provided services that included intensive and specialized mental health services to children 0-3 years old and their caregivers. Programs aimed to improve **early childhood learning and education** through provider and family support and education in areas such as early learning and early literacy practices. Progress was made in **early detection, intervention and health education** through comprehensive services to providers, parents and children in areas of family stability, healthy eating and physical activity, and specialized dental services. Similar to previous years, this last year's programs took strategic and multi-faceted approaches to improving outcomes for children 0-5 years in Napa County.

Progress was made with Quality Counts, the county-wide efforts aimed to improve the quality of early childhood experiences for children 0-5 years old. A Quality Counts team was formed and the Quality Counts Consortium met monthly to guide and oversee efforts. A seamless and unified message was created for the early learning community about Quality Counts work and participation. In this coming year, the Quality Counts team will focus efforts on outreach, recruitment and retention of early childhood centers and family homes. This last year, the 2011-2016 Community Plan came under revision. The Commission has reviewed the local funding strategies, goals and funding focus areas in consideration of Quality Counts work to align prop 10 funds to support the Quality Counts efforts. The Community Plan will be complete by year's end.