

ANNUAL REPORT TO THE CALIFORNIA CHILDREN AND FAMILIES COMMISSION

Fiscal Year 2017-2018



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Annual Report Form AR-1
Kern Revenue and Expenditure Summary
July 1, 2017 – June 30, 2018

Revenue Detail	
Category	Amount
Tobacco Tax Funds	\$7,983,240
First 5 Impact Funds	\$704,076
Small County Augmentation Funds	\$0
DLL Pilot Funds	\$0
Donations	\$2,000
Revenue From Interest Earned	\$240,983
Grants (Kaiser Permanente - Supports operating costs for the Medically Vulnerable Care Coordination Project of Kern County.)	\$40,000
Other Funds	\$0
Total Revenue	\$8,970,299

Improved Family Functioning						
Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
General Family Support	County Office of Education/ School District	• FRCs Core Support	3,773	7,038	129	\$1,501,306
General Family Support	CBO/Non-Profit	• 211 • FRCs Core Support	941	4,874	24	\$637,793
Intensive Family Support	County Office of Education/ School District	• Other	1,934	1,140	0	\$501,045
Intensive Family Support	CBO/Non-Profit	• Other	441	470	0	\$476,573
Total						\$3,116,717

Improved Child Development						
Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
Quality Early Learning Supports	County Office of Education/ School District	• Other	4,660	0	196	\$542,878
Early Learning Programs (Direct Costs)	County Office of Education/ School District	• First 5 funded Preschool	423	429	43	\$855,055
Early Learning Programs (Direct Costs)	CBO/Non-Profit	• Summer Programs • First 5 funded Preschool	658	118	9	\$509,599
Early Learning Programs (Direct Costs)	Other Public	• First 5 funded Preschool	302	325	0	\$209,875
					Total	\$2,117,407

Improved Child Health						
Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
General Health Education and Promotion	Hospital/Health Plan	• Health Access	1,158	8	0	\$357,120
General Health Education and Promotion	CBO/Non-Profit	• Health Access	62	64	0	\$203,177
General Health Education and Promotion	County Office of Education/ School District	• Nutrition • Other	212	185	0	\$117,611
General Health Education and Promotion	Other Public	• Other	515	71	0	\$34,916
General Health Education and Promotion	County Health & Human Services	• Health Access • Other	966	173	0	\$36,712
Prenatal and Infant Home Visiting	County Health & Human Services	• Nurse Family Partnership • Other	121	221	0	\$688,532

Improved Child Health						
Service	Grantee	Program(s)	Children	Caregivers	Providers	Amount
Oral Health Education and Treatment	County Office of Education/ School District	• Oral Health Screening and Varnish	2,954	292	13	\$992,956
Early Intervention	CBO/Non-Profit	• Other	79	65	0	\$226,236
Early Intervention	County Office of Education/ School District	• Other	196	136	0	\$199,097
Early Intervention	Other Private/ For Profit	• Other	49	0	0	\$108,000
					Total	\$2,964,357

Improved Systems of Care				
Service	Grantee	Providers	Amount	
Policy and Public Advocacy	Other Public	• Other	\$7,000	
Policy and Public Advocacy	CBO/Non-Profit	• Other	\$24,395	
Policy and Public Advocacy	Research/Consulting Firm	• Other	\$35,000	
Policy and Public Advocacy	Internal	• Other	\$997,929	
Programs and Systems Improvement Efforts	Other Private/For Profit	• Health Systems • Trauma-Informed Care/ACES	\$55,354	
			Total	\$1,119,678

Expenditure Details	
Category	Amount
Program Expenditures	\$9,318,159
Administrative Expenditures	\$578,764
Evaluation Expenditures	\$383,542
Total Expenditures	\$10,280,465
Excess (Deficiency) Of Revenues Over (Under) Expenses	(\$1,310,166)

Other Financing Details	
Category	Amount
Sale(s) of Capital Assets	\$0
Other	\$0
Total	\$0

Net Change in Fund Balance	
Category	Amount
Fund Balance – Beginning	\$19,240,520
Fund Balance – Ending	\$17,930,354
Net Change in Fund Balance	(\$1,310,166)

Fiscal Year Fund Balance	
Category	Amount
Nonspendable	\$4,713
Restricted	\$0
Committed	\$9,365,567
Assigned	\$0
Unassigned	\$8,560,074
Total Fund Balance	\$17,930,354

Expenditure Note

Contributions to agents decreased by \$27,454 in fiscal year 2017-18 from those of the prior year. This is attributable to a couple of factors. The Successful Application Program utilized leveraged funds received from Medi-Cal Administrative Activities (MAA) to offset operating costs normally funded by First 5 Kern. The second factor is generalized under spending by programs.

Small Population County Funding Augmentation

Category	Amount	Comment
Administration	\$0	
Evidence Based Programs	\$0	
Evidence Informed Programs	\$0	
Funded Programs	\$0	
Professional Development, Training and Technical Assistance	\$0	
Evaluation	\$0	
Other (Please Explain)	\$0	
Total	\$0	
If unspent funds occurred during the FY, please list amount and provide explanation.	\$0	

**Annual Report Form AR-2
Kern Demographic Worksheet
July 1, 2017 – June 30, 2018**

Population Served	
Category	Number
Children Less than 3 Years Old	6,805
Children from 3 rd to 6 th Birthday	12,503
Children Ages Unknown (birth to 6 th birthday)	136
Other Family Members (including siblings)	3,795
Providers	170
Primary Caregivers	11,813
Total Population Served	35,222

Primary Language Spoken in the Home		
Category	Number of Children	Number of Adults
English	9,612	5,247
Spanish	3,376	3,317
Cantonese	5	1
Mandarin	2	1
Vietnamese	2	1
Korean	8	1
Unknown	6,439	7,040
Total	19,444	15,608

Race/Ethnicity of Population Served		
Category	Number of Children	Number of Adults
Alaskan Native/American Indian	57	56
Asian	255	69

Race/Ethnicity of Population Served

Category	Number of Children	Number of Adults
Black/African American	999	733
Hispanic/Latino	7,902	6,070
Native Hawaiian or Other Pacific Islander	22	18
White	2,969	1,328
Two or More Races	483	155
Unknown	6,757	7,179
Total	19,444	15,608

Duplication Assessment

Category	Data
Degree of Duplication	10%
Confidence in Data	Moderately confident
Additional Details	<p>There are two data reporting program categories (1) aggregate and (2) client level. Aggregate programs do not submit identifying data. Client level reporting programs enter client data into Persimmony. Duplication within and across programs is monitored using the Client Duplicates report. Because aggregate reporting programs do not enter identifying information, we cannot compare the level of duplication across aggregate and client level programs.</p>

Annual Report Form AR-3
Kern County Evaluation & Improved Systems of Care
July 1, 2017 – June 30, 2018

Evaluation Activities Completed

Following a mission statement of the First 5 Kern Strategic Plan, evaluation activities were completed to gather extensive data on “how much has been done” and “how well did we do” at the program level. In addition, we conducted social network analyses and cost-benefit analyses to evaluate the local capacity building. Input from town hall meetings was analyzed for supporting future funding decisions per statutory stipulation to “use Outcome-Based Accountability to determine future expenditures” (Proposition 10, p. 4). These evaluation activities are summarized in five points:

1. Tracking descriptive data on service counts in Improved Child Health, Improved Family Functioning, and Improved Child Development:

Fifty-seven program staff completed confidentiality training prior to collection of individually-identifiable data. First 5 Kern-funded programs cover a total of 15 service categories of the state report glossary. In Child Health, six different services were delivered to 6,170 children, three educational programs were provided to 3,612 parents, and the Quality Health Systems Improvement initiative benefited 284 service providers for quality improvement. In Family Functioning, 2,600 children, 4,987 parents, and 284 service providers were identified as recipients of First 5 Kern support. In Child Development, 6,582 children, 585 parents, and 189 program providers benefited from local services due to Proposition 10 funding.

2. Analyzing evaluation data on the effectiveness of program support for young children and their families across local communities:

The last evaluation report showed analyses of (1) Ages and Stages Questionnaire (ASQ-3) data on child growth across 21 programs; (2) AAPI-2 data on parenting outcomes from six programs; (3) Child Assessment-Summer Bridge data on preschool learning from 12 programs; (4) Core Data Elements and Birth Survey data from 29 programs; (5) Family Stability Rubric data from 16 programs; (6) Desired Results Developmental Profile-2015 data from infants/toddlers, preschoolers, and children with disabilities in seven programs; (7) Parenting Survey data from Nurturing-Parenting workshops across six programs; and (8) Program-specific data from Eyberg, Sutter-Eyberg, Be Choosy, Be Healthy, North Carolina Family Assessment Scale for General Services, and Ready-to-Start Scorecard across focus areas.

3. Conducting social network analyses of the Integration Service Questionnaire data on program partnership building:

Partnership patterns were examined in terms of direct/indirect support, unilateral/reciprocal connection, and primary/minor collaboration. A literature-based 4C model was employed to assess the strength of service integration at Co-Existing, Collaboration, Coordination, and Creation levels.

4. Gathering trend data to track program cost-benefit ratios and fund leverage outcomes:

Data for cost-benefit analysis (CBA) were gathered across 39 programs. A CBA report was written to address five questions: (1) How many programs have reached a status to pay for themselves without

First 5 Kern funding? (2) What is the contribution of First 5 Kern, through partnership building, in improving the programs' financial conditions? (3) What programs would have been otherwise unavailable without First 5 Kern funding? (4) What programs became more sustainable, due to First 5 Kern's support for external fund leveraging, between the adjacent funding cycles? (5) What is the long-term return of First 5 Kern-funded programs and services?

5. Examining feedback from town hall meetings to provide in-depth analyses of community needs in the next funding cycle:

First 5 Kern's Technical Advisory Committee held three meetings in Fall of 2017 to review the input from 12 town hall meetings. The results were summarized with recommendations for First 5 Kern to make funding decisions to ensure children and their families are better off in the new funding cycle beginning 2020.

Evaluation Findings Reported

The evaluation activities have generated six reports in FY 2017-2018:

1. On October 4, 2017, evaluation results were presented at the county commission meeting to highlight Neighborhood Place Community Learning Center (NPCLC) and Lamont Vineland School Readiness Program (LVSRP). The NPCLC results showed (1) performance of 211 children significantly above the age-specific thresholds in ASQ-3 screening and (2) beliefs of 23 parents significantly improved against child maltreatment on the AAPI-2 scale. The LVSRP indicated an increase of the ASQ-3 screening from 96 children in the previous year to 134 children last year. Feedback from 10 Nurturing-Parenting workshops showed 92.3% of the 89 LVSRP participants with more confidence in handling child stress in positive ways.
2. On January 7, 2018, a CBA project was presented at the 16th Annual Hawaii International Conference on Education:

Wang, J., Sun, J., & Maier, R. (2018, January). *A cost-benefit analysis of Proposition 10 funding in early childhood development*. Paper presented at the 2018 Hawaii International Conference on Education, Honolulu, Hawaii (<http://hiceducation.org/wp-content/uploads/2017/12/2018-Final-Program.pdf>).

3. On March 10, 2018, another CBA presentation was made at the 2018 annual conference of the American Society of Public Administration (ASPA):

Sun, J., Wang, J., & Ives, K. (2018, March). *A cost-benefit analysis of early childhood education programs through Proposition 10 funding in California*. Paper presented at the 2018 annual meeting of the American Society for Public Administration (ASPA), Denver, CO (<http://www.aspanet.org/ASPADocs/Annual%20Conference/2018/2018ProgramBook-Small.pdf>).

4. On April 4, 2018, a comprehensive report was presented at the county commission meeting to address evaluation findings across 42 programs that received funding in FY 2016-2017. The report contains five chapters: Chapter 1 included an overview of First 5 Kern's vision, mission, and partnership building at the commission level. Chapter 2 was devoted to examination of service

outcomes in focus areas of Child Health, Family Functioning, and Child Development. Chapter 3 focused on social network analyses across programs to evaluate effectiveness of partnership building in the fourth focus area, Systems of Care. Chapter 4 highlighted improvement on common service indicators between adjacent years. The report ended with a “Conclusions and Future Directions” chapter to analyze current exemplary practices, review past recommendations, and adduce new recommendations for the next year. The report was peer-reviewed by the Education Resource Information Center (ERIC) of U.S. Department of Education (<https://files.eric.ed.gov/fulltext/ED582032.pdf>):

Wang, J. (2018). *First 5 Kern Annual Report, Fiscal Year 2016-17*. Washington, DC: Education Resource Information Center (ERIC Document Reproduction Service No. ED 582 032).

5. On June 6, 2018, the final CBA report was presented at the county commission meeting. It is also included in the ERIC research database (<https://files.eric.ed.gov/fulltext/ED584348.pdf>):

Wang, J., & Sun, J. (2018). *Cost benefit analysis of First 5 Kern-funded programs*. Washington, DC: Education Resource Information Center (ERIC Document Reproduction Service No. ED 584 384).

6. Members of the Technical Advisory Committee (TAC) are grouped into three subcommittees to examine the results of community needs assessments from 12 town hall meetings. TAC held a meeting on September 18, 2017 to report the findings in Improved Child Health, Improved Family Functioning, and Improved Child Development (see Item 7 at <http://www.first5kern.org/wp-content/uploads/2018/08/TAC-Minutes-09182017-finals.pdf>).

In summary, evaluation reports not only strengthened visibility of First 5 Kern as a local leader for partnership building in early childhood support, but also addressed the statutory requirement of Results-Based Accountability from Proposition 10.

Policy Impact of Evaluation Results

The policy impact of evaluation results is primarily reflected in four aspects:

1. Evaluation Results Communicated with the County Commission:
 - Program profiling of NPCLC and LVSRRP was grounded on full utilization of participant and outcome data at child and family levels;
 - Differences between actual and expected results were conveyed in a CBA report for the Commission on 6/6/2018;
 - Result comparisons were made on similar programs to support the funding decisions in anticipation for changes of the future state investment;
 - Recommendations for future improvement were made on 4/4/2018 to urge the Commission to align the annual report structure with the new state guideline;
 - First 5 Kern further expanded its communication channels on social media to strengthen program networking. The most recent annual report indicated generation of a five-star rating from 230 Facebook followers, 894 pins in Pinterest, 4,000 impressions through LinkedIn, 155 followers on Twitter, and 71 followers on Instagram.

2. Commission Decisions Based on Evaluation Findings:

- Evaluation findings have led to implementation of program action plans for three service providers;
- Additional needs were identified from evaluation to support creation of a function in Persimmony to alert due dates of program data collection;
- The commission maintained a mechanism of improvement planning in reaction to evaluation findings that showed unsatisfactory program performance;
- The addition of the Chief Evaluation/Program Officer position strengthened the Commission leadership on program oversight and evaluation services.

3. Evaluation Findings for Informing Strategic Planning:

- Needs assessments from 12 town hall meetings have been analyzed to support strategic planning;
- First 5 Kern addressed the needs by organizing and/or participating in 31 community meetings in FY 2017-2018;
- First 5 Kern partnered with community organizations in 23 unduplicated outreach initiatives to strengthen service integration.

4. Anticipated Changes of Funding Strategies to Enhance System Building:

- According to the TAC minutes at <http://www.first5kern.org/wp-content/uploads/2018/03/TAC-Minutes-121117.pdf>, the Executive Director explored “the possibility of creating an Immunization Coalition to address a systems of care option for the county’s immunization efforts” (p. 2);
- Ms. Michelle Krizo, Director of Child Health and Disability Prevention in Kern County Public Health Department (KCPHD), was invited to present on dental care coordination;
- Ms. Michelle Curioso, Director of Maternal, Child, and Adolescent Health of KCPHD, provided an overview of Child Health and Disability Prevention (CHDP) and CHDP dental programs;
- A Program Officer of First 5 Kern presented information on partnership grant support for the Dental Transformation Initiative Program.

These joint efforts through TAC offered guidance for anticipated changes of funding strategies.

Improved Systems of Care

Primary Audience

- Children 0-5 and their families
- Foster children from birth to five
- Community partners and stakeholders serving parents/guardians of children 0-5

Services Provided

- Educational and promotional materials on health and wellness and parenting techniques
- Public awareness: Kaitlyn’s Law Safe Sleep, and Safely Surrendered Baby campaigns

Intended Results and Community Impact

- Increase knowledge on child health, as well as access to medical and dental services for children and their families
- Increase early childhood education participation
- Increase community awareness of child abuse prevention, safe sleeping practices, and safely surrender