EVALUATION REPORT 2019
FISCAL SUSTAINABILITY & SYSTEMS CHANGE

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INDEPENDENT PROGRAM EVALUATORS
JUNE 2020
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EXECUTIVE DIRECTOR MESSAGE

For First 5 Humboldt, 2019 was a year of change. As we entered the final year of our current Strategic Plan, it was a year of assessment, to measure how close we have come to meeting our goals and looking at our community needs to see what work still needs to be done.

Since 2016, First 5 Humboldt has worked to achieve a fiscal balance between revenues and expenditures in an era of declining tobacco tax sales. The fiscal plan ensures that there will be a county-level voice for the needs of young children and their families into the future. By working strategically with partners, First 5 Humboldt demonstrated our commitment and secured outside funding to add new services for our local families, taking a shrinking fiscal outlook and creating new opportunities for our community.

2016 was also the first year that we partnered with Senator Mike McGuire to hold a community conversation on Adverse Childhood Experiences. Three years later, local children’s advocates and agency leaders have shifted the conversation and policy lens in Humboldt to prevention and compassion for the devastating effects of trauma and the key factors of resilience that our community can foster. In just a few years, Humboldt has achieved a stronger policy voice and recognition as a leading county in trauma and resilience work, as California’s Surgeon General Nadine Burke Harris stated in her November, 2019 address to more than 600 Humboldt residents.

By approving Proposition 10 in 1998, voters tasked county First 5’s with helping young children and their families reach their full potential through coordinated systems of support. There is still so much work to be done to achieve that goal, but 2019 saw some significant steps. I’m looking forward to what Humboldt will achieve by continuing our work together for our children and families.

Respectfully,

Mary Ann Hansen

Executive Director
First 5 Humboldt
INTRODUCTION

This report evaluates First 5 Humboldt’s efforts in calendar year 2019 to address Fiscal Sustainability and Systems Change, two of the four Focus Areas in First 5 Humboldt’s Strategic Plan. The structure of the report is guided by the Evaluation Framework found in Appendix A. The Evaluation Framework identifies the specific indicators used to evaluate progress in implementing the 2016-2020 First 5 Humboldt Strategic Plan. This report presents results for Focus Area 1 – Fiscal Sustainability and Focus Area 2 – Systems Change. A separate report on Focus Area 3 – Family, Professional and Community Capacity and Focus Area 4 – Health will be released in June 2020.

This report contains the results of First 5 Humboldt evaluation activities conducted during calendar year 2019. This period includes the last six months of Fiscal Year 2018-2019 (January–June 2019) and the first six months of Fiscal Year 2019-2020 (July–December 2019). Evaluation results are presented according to Focus Area, the Objectives under that Focus Area, the Actions associated with each Objective, and the Indicators related to each Action.

First 5 Humboldt (F5H) activities and funded programs that directly impact the indicators within Focus Areas 1 and 2 are presented in Figure 1. Data presented in this report is collected from various sources using different processes. For a description of data sources, data collection instruments and protocols, and data analysis procedures, please refer to the Methods section in Appendix B.

This report is presented to the Humboldt County Children and Families Commission and to the First 5 Humboldt Program Evaluation Team (PET). PET members use Local Evaluation Reports, individual program data and reports, their knowledge and experience, and information about the program’s administration and budget to make program recommendations to the Commission. The Commission will use the recommendations to:

- Acknowledge program leaders, partners, and communities for their achievements and support of First 5 Humboldt’s vision.
- Provide guidance for improvements to existing fiscal sustainability efforts, systems change activities, and programs.
- Identify requirements for continued funding of existing programs as needed.
- Determine funding allocations for existing activities and programs within the budget decision-making process.
Figure 1. First 5 Humboldt Strategic Plan Focus Areas

**Focus Area 1**  
Fiscal Sustainability

*Develop policies and strategies to ensure the fiscal sustainability of the Humboldt County Children and Families Commission*

*First 5 Humboldt activities that directly impact Focus Area 1 indicators*
- Activities related to stabilizing the Sustainability Fund
- Activities related to preserving and increasing funding dedicated to early childhood.

*First 5 Humboldt funded programs that directly impact Focus Area 1 indicators*
- Infant Family Early Childhood Mental Specialists
- 0-8 Mental Health Collaborative

**Focus Area 2**  
Systems Change

*Facilitate the inclusion of primary prevention principles in related public policy formation*

*First 5 Humboldt activities that directly impact Focus Area 2 indicators*
- Activities related to promoting strong, collaborative partnerships
- Activities related to work to help ensure policies support young children and families

*First 5 Humboldt funded programs that directly impact Focus Area 2 indicators*
- Humboldt County Department of Health and Human Services ACEs Collaborative Partnership
- Infant Family Early Childhood Mental Specialists
- 0-8 Mental Health Collaborative
- Library Partnership
- Playgroups
- First 5 Humboldt funded Family Resource Centers

**Focus Area 3**  
Family, Professional and Community Capacity

**Focus Area 4**  
Health
Objective 1.1: The Sustainability Fund will be stabilized at a balance of no less than $2 million and continue to be a resource for the work of First 5 Humboldt.

Action 1.1.A: Develop and implement a plan to reduce the drawdown of the Sustainability Fund

Indicator 1: An adopted budget where program expenses are matched to revenues and drawdown of the sustainability fund is limited to administration and evaluation costs.

Indicator 2: The Sustainability Fund maintains a balance of no less than $2 million.

During 2019, the First 5 Humboldt Children and Families Commission (F5H Commission) continued to follow the recommendations to guide reductions in program funding which were adopted in 2017. As of December 31, 2019, the Sustainability Fund balance was $3,303,416.54.

Additionally, First 5 Humboldt (F5H) Staff and Commission Members completed a number of activities focused on ensuring the fiscal sustainability of the F5H Commission. These activities included the following:

- Continued implementation of the 2016 Strategic Plan which has a focus area on fiscal sustainability
- Completion of the 2019 Program Evaluation Team review process which resulted in several recommendations to reduce funding awards to partner programs. These recommendations were accepted by the F5H Commission to reduce the program funding draw from the Sustainability Fund. Administrative costs were also reduced to bring the total reduction in drawdown from the sustainability fund by almost $127,000 from Fiscal Year 2016/2017 to Fiscal Year 2018/2019.
- Regular meetings of the Fiscal Subcommittee to develop funding reduction strategies to reach the F5H Commission’s goal of reducing more than $400,000 in Proposition 10 program funding and expenditures by 2020.
Objective 1.2: First 5 Humboldt will collaborate with community partners to advance opportunities to preserve and increase funding streams dedicated to early childhood.

Action 1.2.A: Pursue additional funding streams.

- **Indicator 1:** # of additional funding streams pursued and groups collaborated with if applicable
- **Indicator 2:** # of additional funding streams secured and groups collaborated with if applicable

Between January and December 2019, F5H pursued 9 funding streams. At the time of this report, 9 funding streams were secured totalling approximately $641,300 dollars. Appendix C lists all the funding streams pursued and secured by F5H.

Action 1.2.B: By 2019, a framework for decreased First 5 Humboldt funding and increased partner funding for priority programs will be adopted.

- **Indicator 1:** An approved framework for decreased First 5 funding of programs

A framework for decreasing First 5 Humboldt program funding (Appendix D) was adopted in 2017. F5H Staff and Commission continued to follow the framework throughout 2019.

- **Indicator 2:** Increase in the percentage of partner funding versus First 5 Humboldt funding
- **Indicator 3:** Increase in the percentage of funds from long-term sources, such as local tax levies

The proportion of partner funding has increased to replace funds formerly provided by F5H in the Humboldt County Department of Health and Human Services (DHHS), Public Health Branch, Nurse Family Partnership Program and St. Joseph Health Paso a Paso Program. Additionally, playgroup fiscal agents must now demonstrate matching funds to support playgroup activities.

The proportion of First 5 Humboldt revenues coming from sources other than Proposition 10 varies each year, but has increased steadily as shown in Table 1 below.

**Table 1. First 5 Humboldt Revenue Diversification Calculated from Annual Budgets**

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total Revenue</th>
<th>Proposition 10 Revenue (as % of total)</th>
<th>Other Revenue (as % of total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016-17</td>
<td>$1,087,947</td>
<td>98%</td>
<td>2%</td>
</tr>
<tr>
<td>2017-18</td>
<td>$1,232,688</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>2018-19</td>
<td>$1,481,026</td>
<td>64%</td>
<td>36%</td>
</tr>
<tr>
<td>2019-20</td>
<td>$2,128,701</td>
<td>43%</td>
<td>57%</td>
</tr>
</tbody>
</table>
First 5 Humboldt has successfully advocated for the County of Humboldt to dedicate significant ($400,000 annually in recent years) County General Fund dollars originally associated with the local Measure S Cannabis Tax towards early childhood investment through First 5 Humboldt and the Humboldt County Department of Health and Human Services.

**Action 1.2.C: Advocate/educate for preservation and augmentation of Proposition 10 funds.**

**Indicator 1: # of activities at which preservation and augmentation is discussed**

In 2019, F5H participated in numerous activities at the local and state level in order to advocate and educate for the preservation and augmentation of Proposition 10 funds. Unlike some years, there were no substantive State or legislative attempts to reallocate Proposition 10 funds away from First 5s in 2019. Activity highlights include the F5H Executive Director’s participation in the following:

- Presentation at the First 5 Small County Summit in Sacramento which included the topic of funding diversification for small counties, as well as how to work together to leverage the effects of small counties’ work.
- Ongoing work with the First 5 California Association including the following:
  - Regular meeting and workgroup participation
  - Workgroup facilitation
  - Presentation to the First 5 California Association regarding the addition of fiscal sustainability to the association’s policy agenda.
- Regular meetings with State Senator McGuire and his staff regarding the importance of protecting and augmenting Prop 10 funds. Regular meetings with State Assemblymember Wood and his staff regarding the importance of protecting and augmenting Prop 10 funds.
- Extensive work in Fall 2019 with the First 5 California Association (F5CA) state legislators, and California Department of Tax and Fee Administration (CDTFA) to resolve major delays and discrepancies in the amount and distribution of Proposition 10 funds.
FOCUS AREA 2: SYSTEMS CHANGE

*First 5 Humboldt will facilitate the inclusion of primary prevention principles in related public policy formulation*

**Objective 2.1:** First 5 Humboldt will promote strong, collaborative partnerships

**Action 2.1.A:** Collaborate with community organizations around primary prevention for children 0-5 and their families.

**Indicator 1:** # of ongoing collaborations and partnerships focused on primary prevention for children 0-5 and their families

During 2019, F5H had 36 partnerships and collaborations that focused on primary prevention for local children ages 0-5 and their families. Table 2 presents a list of the major partnerships and collaborations.

<table>
<thead>
<tr>
<th>Table 2. First 5 Humboldt’s Major Partnerships and Collaboration</th>
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<tbody>
<tr>
<td>• 0-8 Mental Health Collaborative</td>
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<tr>
<td>• Adverse Childhood Experiences (ACEs) Town Hall with Senator McGuire and Nadine Burke Harris</td>
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<tr>
<td>• Alliance for Infant Mental Health</td>
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<tr>
<td>• Changing Tides Family Services</td>
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<tr>
<td>• Child Abuse Prevention Coordinating Council</td>
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<tr>
<td>• Humboldt Community Health Trust</td>
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<tr>
<td>• Humboldt County Board of Supervisors</td>
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<tr>
<td>• Humboldt County Department of Health and Human Services (DHHS)</td>
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<tr>
<td>• Humboldt County Library</td>
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<tr>
<td>• Humboldt County Office of Education</td>
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<tr>
<td>• Humboldt County Family Wellness Court</td>
</tr>
<tr>
<td>• Humboldt Independent Practice Association</td>
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<tr>
<td>• Humboldt Network of Family Resource Centers</td>
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<tr>
<td>• Humboldt Open Door Community Health Centers</td>
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<tr>
<td>• Humboldt Rise Project</td>
</tr>
<tr>
<td>• Humboldt State University California Center for Rural Policy</td>
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<tr>
<td>• Humboldt State University Child Development Department</td>
</tr>
<tr>
<td>• Hoopa Family Wellness Court</td>
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<tr>
<td>• Hoopa Valley Tribal Education Association</td>
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<tr>
<td>• Jefferson Community Center</td>
</tr>
<tr>
<td>• KEET</td>
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<tr>
<td>• Live Well Humboldt</td>
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<tr>
<td>• Manila Family Resource Center</td>
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<tr>
<td>• Mattole Valley Resource Center</td>
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<tr>
<td>• McKinleyville Family Resource Center</td>
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<tr>
<td>• North Coast Grant Making Partnership</td>
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</table>
In its third year of existence, the F5H and DHHS ACEs Collaborative Partnership led to the implementation of new and continued primary prevention projects including:

- Further refinement and implementation of the DHHS and First 5 Humboldt Partnership ACEs grant program
- Ongoing augmentation of Early Childhood Mental Health Specialist support to outlying F5H Playgroups in Southern and Eastern Humboldt
- Continued implementation of an ACEs Primer Series and Speakers’ Bureau for requesting Humboldt County groups and organizations
- Continued Foster Parent Support through Individual Counseling with a Licensed Therapist
- Co-hosting the 2019 Counting on Community: Exploring Pathways for Child, Family, and Community Wellness Symposium. The 3-day symposium had at least 25 speakers and 290 participants.
- Implementation of Phase 2 of the community messaging campaign. In this phase, Spitfire Communications was contracted to develop a communications strategy and branding for the Humboldt County ACEs work.

Additional F5H collaborative partnerships in 2019 include the following:

- Working with DHHS Public Health Nursing, Women Infant Children Program (WIC), and the Humboldt Network of Family Resource Centers to locally roll out the SupplyBank.org and First 5 California diaper distribution program. This program involves monthly distribution of diapers and wipes through family resources centers at no cost to the counties for the supplies.
- Collaboration with the California Center for Rural Policy (CCRP) to develop a proposal for First 5 California regarding a report with recommendations to better prepare for and respond to the needs of young children and their families, related to disasters such as wildfires.
- Working with Yurok Social Services and other partners on developing and supporting Plans of Safe Care. The State of California has required that new mothers experiencing Substance Use Disorders must have a Plan of Safe Care in place with their infant. Since the state did not provide a standardized way to develop the plans or designate by whom it would be done, this effort was started by Yurok Social Services.
• Collaboration with the Community Information Exchange (CIE) group which is focusing on a system for connecting clinicians, county services, and community-based organizations.
• Co-sponsoring the community screening of the documentary Addicts Among Us with KEET and the Humboldt Community Health Trust. There was a panel discussion after the screening.

Objective 2.2: First 5 Humboldt will work with organizations and local and state governments to help ensure policies support young children and families.

Action 2.2.A: Create public awareness of the needs of young children

 Indicator 1: #/list of outreach efforts including media activities
 Indicator 2: A public awareness plan is developed, implemented, and revised as needed
 Indicator 3: #/list of presentations to boards, organizations and groups regarding the needs of young children and their families.

F5H staff and consultants completed a total of 26 presentations to boards, organizations and groups regarding the needs of young children and their families. Key presentations included the following:

• Executive Director presentation to representatives of the Humboldt Independent Practice Association and Partnership Health Plan about developmental and trauma screening
• Early Childhood Mental Health Specialist presentation to the Humboldt County Office of Education about the impact of ACEs on young children
• Early Childhood Mental Health Specialist with Humboldt Department of Health and Human Services Clinician and Southern Humboldt Representatives about mental health services expansion for children ages 0-5.
• 2019 Humboldt ACEs Town Hall with Nadine Burke Harris, California’s Surgeon General.
• Diaper Kit Kickoff with Supplybank.org and Assemblyman Jim Wood.

In 2019, F5H continued to follow the Public Awareness Plan adopted in 2018 (Appendix E). F5H’s public awareness activities resulted in 7 major media references to F5H or F5H Projects (Appendix F). Figures 2 and 3 below present excerpts from two key media references. Please see Appendix G and H for the complete articles.
Figure 2. Excerpts from North Coast Journal Article

_Hundreds Attend ACEs Town Hall Featuring California Surgeon General Nadine Burke Harris_

_By Iridian Casarez_

_No\vember 22, 2019_

The Sequoia Conference Center on Humboldt County Office of Education’s campus was at capacity, 448 people had landed a seat — while at least another 100 watched from a live stream in a separate room. The draw was a conversation among California’s first Surgeon General Nadine Burke Harris and a panel of locals spearheading Humboldt County’s efforts to alleviate the impacts of Adverse Childhood Experiences, also known as ACEs.

“Thank you for all the incredible work you are doing here in Humboldt, to all of you on the panel. For me, most (important) of all, is thanks to all of you for being here tonight, because this is how we break the inter-generational cycle (of ACEs),” Harris said. “We do it in community and we do it by showing up and having this conversation and talking about these challenges.”

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Humboldt County’s efforts started three years ago, when State Sen. Mike McGuire hosted the first town hall on ACEs. Yesterday's meeting informed community members and health officials on where Humboldt stands with its mission to prevent ACEs and toxic stress, build resilience and provide trauma-informed care through each of the organizations on the panel.

McGuire moderated the town hall, which included First 5 Humboldt Executive Director Mary Ann Hansen, Hoopa Valley Tribe Education Director Erika Chase, County Superintendent of Schools Chris Hartley, Department of Health and Human Services Director Connie Beck, Candy Stockton, medical director of Humboldt Independent Practice Association, and Dr. Harris.
Figure 3. KRCR News Broadcast

Diaper Kit Program expands to Humboldt, one of eight counties across California

By Lisa Librenjak

An incredible kick off to the Diaper Kit Program, aiming to help families ensure the health of their young children, happened at the Jefferson Center in Eureka Monday.

"One in three mothers in the United States experience diaper need," Executive Director of SupplyBank.Org Benito Delgado said. "But, that doesn't draw away from the fact that in poorer communities and often in rural communities that is an even larger number."

This Diaper Kit Program is designed to address the growing issue of "diaper need" and close the kindergarten readiness gap for children of low-income families.

SupplyBank.Org, a non-profit organization, is one of the several partnering organizations that made this program happen locally along with First Fire California, First 5 Humboldt and Kaiser Permanente.

Second District Assemblyman Jim Wood also made an appearance at Monday's Diaper Kickoff.

"Financially, for anyone who's on a tight budget, this is one of those unexpected expenses that you don't think about," Wood said. "People think all the time that rural counties it's always cheaper to live up there and so on, but the reality is something like a diaper actually may be more expensive in Humboldt County than it might be in San Francisco or Los Angeles because it costs more to transport things. So this is a big deal, and it's really important to the health of children here."

The event kicks off dozens of monthly distributions of diaper kits consisting of 100 diapers and 200 baby wipes for about one-third of the in-store cost. Diaper need creates barriers to childcare and employment and results in more than 40,000 visits to California hospitals annually, 80% of which are to the emergency room, according to First 5 Humboldt.
**Action 2.2.B:** Engage policy makers to ensure public policies support the optimal development of children and their families to meet their potential

**Indicator 1:** # of projects with public policy makers (e.g. County Board of Supervisors, State Senators)

In 2019, the F5H Executive Director and Early Childhood Mental Specialists were involved in at least 6 projects with public policy makers. These projects included, but are not limited to the following:

- The First 5 California Strategic Planning Meeting
- First 5 Advocacy Day in which the F5H Executive Director and a Humboldt Children and Families Commissioner met with Senator McGuire and Assemblymember Wood to discuss the Governor’s budget, child care, and child care provider wages
- Participation in the California Alliance for Infant Mental Health Board and Executive Committee Meetings.
- Trauma Screening Initiative work which included Executive Director discussions with UCSF representatives who are working with Nadine Burke Harris, California’s Surgeon General, and attendance at the Surgeon General’s second Trauma Informed Primary Care Advisory Committee
- Working with Senator McGuire’s office to coordinate the 2019 Humboldt ACEs Town Hall with Nadine Burke Harris, California’s Surgeon General. This project also included coordinating community leader meetings with the Senator and Surgeon General in order to discuss local ACEs related work, challenges, and future goals.
- F5H Executive Director’s participation in California Surgeon General’s ACEs Committee.

**Indicator 2:** # of public policies proposed and/or adopted which are supportive of young children and families and/or primary prevention

The Humboldt County Board of Supervisors has made the reduction of Adverse Childhood Experiences (ACEs) a priority goal in Fiscal Years 2017-2018, 2018-2019, and 2019-2020 and has allocated $400,000 annually in County General Fund money towards this goal. Half of these funds are offered as ACEs grants to community organizations through the County Department of Health and Human Services with F5H involvement, and half are expended directly by F5H.

F5H was actively involved in the following 4 policy proposals which were successfully signed into law.

- **AB 1004:** Developmental Screening – Clarifies that health care providers must use a validated tool and adhere to the Bright Futures best practices around developmental screenings.
- **SB 464:** California Dignity in Pregnancy and Childbirth Act – Reduces pregnancy-related preventable deaths and severe illnesses and associated health disparities by requiring perinatal health providers to undergo evidence-based implicit bias training.
- **SB 436:** Family Resource Center – Defines “Family Resource Center” (FRC) into the Welfare and Institutions code of state statute.
- **ACR 1:** Immigration: Public Charge – Condemns regulations recently adopted by the Department of Homeland Security to prescribe how a determination of a person who is not
a citizen or national is made based on the likelihood that the person will become a public charge. This measure would also urge the federal government to repeal the new regulations.

For additional information on these laws which are also supported by the First 5 California Association, please see **Appendix I**.

In addition to the preceding activities, the F5H Executive Director is involved with the following two committees which focus on continued policy work.

- **The Executive Committee**, as the Northwest representative, of the First 5 Association which advises legislators and supports a number of bills focused on the optimal development of children and their families. **Appendix J** contains the 2019 First 5 Association Bill Tracker.
- **The First 5 Center for Children’s Policy Board of Directors** (formerly the California Children and Families Foundation), as a Board officer. The Center works towards shifting California policy to better serve the needs of children prenataally through age three.

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**Coming Back Together to Help Our Kids**

**A Town Hall on Adverse Childhood Experiences**

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EVALUATION RECOMMENDATIONS

1. Revise and update the Evaluation Framework and its indicators annually to ensure consistency between actions and indicators and all funded programs/activities.
2. Continue to work with F5H’s staff and consultants on how best to evaluate F5H’s collaborative partnerships, including developing appropriate indicators to better measure partnership/collaboration and meet the focus areas of the strategic plan.
3. Continue to work with other community groups/agencies to develop appropriate methods to share relevant data.
APPENDIX A

Focus Area 1: Fiscal Sustainability
First 5 Humboldt will develop policies and strategies to ensure the fiscal sustainability of the Humboldt County Children and Families Commission

Objective 1.1: The Sustainability Fund will be stabilized at a balance of no less than $2 million and continue to be a resource for the work of First 5 Humboldt.

Action 1.1.A: Develop and implement a plan to reduce the drawdown of the Sustainability Fund

Indicator 1: An adopted budget where program expenses are matched to revenues and drawdown of the sustainability fund is limited to administration and evaluation costs. First 5 Humboldt (F5H)

Indicator 2: The Sustainability Fund maintains a balance of no less than $2 million. F5H

Objective 1.2: First 5 Humboldt will collaborate with community partners to advance opportunities to preserve and increase funding streams dedicated to early childhood.

Action 1.2.A: Pursue additional funding streams.

Indicator 1: # of additional funding streams pursued and groups collaborated with if applicable F5H

Indicator 2: # of additional funding streams secured and groups collaborated with if applicable F5H F5H

Action 1.2.B: By 2019, a framework for decreased First 5 Humboldt funding and increased partner funding for priority programs will be adopted.

Indicator 1: An approved framework for decreased First 5 funding of programs F5H

Indicator 2: Increase in the percentage of partner funding versus First 5 Humboldt funding F5H

Indicator 3: Increase in the percentage of funds from long-term sources, such as local tax levies F5H

Action 1.2.C: Advocate/educate for preservation and augmentation of Proposition 10 funds.

Indicator 1: # of activities at which preservation and augmentation is discussed F5H, Specialists, 0-8 MHC

Key: Programs named in orange type are programs receiving funding from First 5 Humboldt (F5H) that conduct activities that directly impact that indicator and may also be a source of data for that indicator. If a F5H funded program is listed in blue type that means the program or programs is/are collecting data for that indicator but might or might not be directly conducting activities that impact that indicator. Other non-First 5 Humboldt data sources are listed in purple type. Indicators for which F5H is directly collecting data will show F5H in green type after the indicator
Focus Area 2: Systems Change
First 5 Humboldt will facilitate the inclusion of primary prevention principles in related public policy formulation.

Objective 2.1: First 5 Humboldt will promote strong, collaborative partnerships

Action 2.1.A: Collaborate with community organizations around primary prevention for children 0-5 and their families.

Indicator 1: # of ongoing collaborations and partnerships focused on primary prevention for children 0-5 and their families.  F5H, Library Partnership (LP), 0-8MHC, Playgroup, FRCs, Measure S, ACEs 0-3

Objective 2.2: First 5 Humboldt will work with organizations and local and state governments to help ensure policies support young children and families.

Action 2.2.A: Create public awareness of the needs of young children

Indicator 1: #/list of outreach efforts including media activities F5H

Indicator 2: A public awareness plan is developed, implemented, and revised as needed F5H

Indicator 3: #/list of presentations to boards, organizations and groups regarding the needs of young children and their families. F5H, Specialists, 0-8 MHC

Action 2.2.B: Engage policy makers to ensure public policies support the optimal development of children and their families to meet their potential

Indicator 1: # of projects with public policy makers (e.g. County Board of Supervisors, State Senators) F5H, Specialists, 0-8 MHC

Indicator 2: # of public policies proposed and/or adopted which are supportive of young children and families and/or primary prevention F5H

Key: Programs named in orange type are programs receiving funding from First 5 Humboldt (F5H) that conduct activities that directly impact that indicator and may also be a source of data for that indicator. If a F5H funded program is listed in blue type that means the program or programs is/are collecting data for that indicator but might or might not be directly conducting activities that impact that indicator. Other non-First 5 Humboldt data sources are listed in purple type. Indicators for which F5H is directly collecting data will show F5H in green type after the indicator.
**Focus Area 3: Family, Professional & Community Capacity**
First 5 Humboldt will promote the optimal development of children with a focus on prevention, in partnership with families, caregivers, and the community.

**Objective 3.1:** First 5 Humboldt will promote a stable well-educated-workforce available to serve and advocate for developmentally-, culturally- and trauma-responsive practices.

**Action 3.1.A:** Promote and provide training and technical assistance opportunities to families and service providers.
- **Indicator 1:** # of trainings and TA opportunities addressing developmental-, cultural- and trauma-responsiveness 0-8 MHC, F5H trainings, Specialists, Impact, Measure S, QRIS
- **Indicator 2:** # of training attendees 0-8 MHC, Specialists, F5H trainings, Impact, QRIS

**Action 3.1.B:** Annually review available local and state child and family data to assess family and community needs.
- **Indicator 1:** List of data reviewed F5H

**Action 3.1.C:** Advocate for early childhood education workforce stability and appropriate compensation.
- **Indicator 1:** # of advocacy activities that support early childhood education workforce stability F5H, 0-8 MHC

**Action 3.1.D:** Provide opportunities for families and the workforce to develop advocacy skills.
- **Indicator 1:** # of activities related to advocacy education F5H, 0-8 MHC

**Objective 3.2:** Families have access to community supports that strengthen families’ capacity to promote children’s optimal development in safe and stable communities

**Action 3.2.A:** Support programs that promote the 5 protective factors and family strengthening principles (Center for the Study of Social Policy, 2016) and primary prevention
- **Indicator 1:** # of programs providing family-friendly services Playgroups, Specialists, LP, FRCs, Paso a Paso, NFP
- **Indicator 2:** # of programs promoting the 5 Protective Factors Playgroups, Specialists, LP, FRCs, Paso a Paso, Nurse Family Partnership (NFP)
- **Indicator 3:** % of families feeling more connected to other families Playgroups, Specialists, FRCs, Paso a Paso, NFP
- **Indicator 4:** % of parents reporting that they have someone they can talk to Playgroups, Specialists, FRCs, Paso a Paso, NFP, CHIS
- **Indicator 5:** % of parents who say they feel that they deal better with parenting issues Playgroups, Specialists, FRCs, Paso a Paso, NFP
- **Indicator 6:** # of child/caregiver visits to playgroups Playgroups
- **Indicator 7:** # of families interacting with Specialists at playgroups Playgroups, Specialists
- **Indicator 8:** Frequency with which caregivers read to/with children Playgroups, FRCs, Paso a Paso, NFP, LP, California Health Interview Survey (CHIS)
- **Indicator 9:** Frequency with which parents/caregivers play music/sing songs with their 0-5 age children Playgroups, FRCs, Paso a Paso, NFP, CHIS
- **Indicator 10:** % of children who are ready for school Playgroups, LP, KST (HCOE)
- **Indicator 11:** #/% parents/caregivers reporting the library is family friendly Playgroups, FRCs, Paso a Paso, NFP, LP

**Key:** Programs named in orange type are programs receiving funding from First 5 Humboldt (F5H) that conduct activities that directly impact that indicator and may also be a source of data for that indicator. If a F5H funded program is listed in blue type that means the program or programs is/are collecting data for that indicator but might or might not be directly conducting activities that impact that indicator. Other non-First 5 Humboldt data sources are listed in purple type. Indicators for which F5H is directly collecting data will show F5H in green type after the indicator.
Focus Area 4: Health
First 5 Humboldt will support the health and well-being of young children and their families through the promotion of prevention and early intervention activities.

Objective 4.1: First 5 Humboldt will encourage communities to facilitate the total wellness of children.

Action 4.1.A: Facilitate child and family referrals to appropriate programs and services.

Indicator 1: % of families and caregivers that know where they can get information about family services and activities
FRCs, Playgroups, Specialists, Paso a Paso, NFP

Indicator 2: # of programs that help participants learn about services and opportunities in the community
FRCs, NFP, Playgroups, Specialists, Paso a Paso, NFP, LP

Indicator 3: # of programs providing referrals to specialized services
FRCs, NFP, Specialists, NFP, LP, Paso a Paso

Objective 4.2: First 5 will encourage communities to offer developmentally appropriate services/activities.


Indicator 1: List of funded programs and collaborative efforts promoting developmental screenings
Playgroups, Specialists, NFP, Impact, Paso a Paso

Action 4.2.B: Promote access to developmentally appropriate services for children.

Indicator 1: List of funded programs promoting access to developmentally appropriate services
Playgroups, FRCs, NFP, Paso a Paso, Playgroups, Specialists, Impact

Objective 4.3: First 5 will encourage communities to promote family wellness for pregnant women and children 0-5.

Action 4.3.A: Work with community organizations and groups to promote healthy pregnancies and family wellness.

Indicator 1: List of funded programs and collaborative/community efforts promoting healthy pregnancies and family wellness
HAW, FRCs, NFP, Paso a Paso, Playgroups, Specialists

Key: Programs named in orange type are programs receiving funding from First 5 Humboldt (F5H) that conduct activities that directly impact that indicator and may also be a source of data for that indicator. If a F5H funded program is listed in blue type that means the program or programs is/are collecting data for that indicator but might or might not be directly conducting activities that impact that indicator. Other non-First 5 Humboldt data sources are listed in purple type. Indicators for which F5H is directly collecting data will show F5H in green type after the indicator.
METHODS

Data Collection

Data for the Local Evaluation Report 2019: Fiscal Sustainability and Systems Changes (Focus Areas 1 and 2) was collected through a variety of sources described below. As applicable, information on data collection implementation is included with the particular data source.

I. Strategic Plan Indicator Tracking Forms
First 5 Humboldt Program evaluators revised a Strategic Plan Indicator Tracking Form developed in 2017 to track indicator activities. First 5 Humboldt staff, including the Executive Director, program staff, and consultants updated their forms throughout the reporting period.

II. Reports
First 5 Humboldt funded programs submit Interim and Final progress reports to First 5 Humboldt. The reports include information on program or consultant activities. The Executive Director also presents a report of activities at every First 5 Humboldt Children and Families Commission Meeting. These reports are available for review at the First 5 Humboldt office.

III. Media Records
Throughout the reporting period, First 5 Humboldt collected media records in which First 5 Humboldt was cited. Records were used to measure progress towards meeting Strategic Plan Focus Area indicators.

Data Analysis

I. Data analyses completed include

- Frequency calculations
- Content analyses of qualitative data collected through reports and media record review

II. The following programs used for data analyses included

- Microsoft Excel
# First 5 Humboldt Funding Streams Pursued and Secured (2019)

<table>
<thead>
<tr>
<th>Date</th>
<th>Funding Stream Pursued</th>
<th>Amount</th>
<th>Source</th>
<th>Secured (Y/N)</th>
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<tbody>
<tr>
<td>1/2019</td>
<td>Care for the Poor Grant</td>
<td>$9,300</td>
<td>St. Joseph’s / Providence Health</td>
<td>Y</td>
</tr>
<tr>
<td>2/2019</td>
<td>Title IV-E Training Funds</td>
<td>Approximately $200,000</td>
<td>Humboldt County Dept. of Health and Human Services</td>
<td>Y (1/2020)</td>
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<tr>
<td>4/2019</td>
<td>First 5 CA Diaper Kit Program</td>
<td>$30,000</td>
<td>First 5 CA and Supplybank.org</td>
<td>Y</td>
</tr>
<tr>
<td>6/2019</td>
<td>Humboldt County ACES (Adverse Childhood Experiences) Support</td>
<td>$200,000</td>
<td>Humboldt County General Fund</td>
<td>Y</td>
</tr>
<tr>
<td>6/2019</td>
<td>Learning from California’s Wildfires - Planning for the Needs of Young Children.</td>
<td>$42,000</td>
<td>First 5 Association</td>
<td>Y</td>
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<tr>
<td>7/2019</td>
<td>Funding for F5H ACES/Resilience Project Coordinator and Counting on Communities Symposium</td>
<td>$80,000</td>
<td>Vesper Society</td>
<td>Y</td>
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<tr>
<td>7/2019</td>
<td>Mental Health Prevention and Early Intervention Grant for Families Thriving Together Program</td>
<td>$25,000</td>
<td>Humboldt County DHHS</td>
<td>Y</td>
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<tr>
<td>11/2019</td>
<td>St. Joseph’s Health donation to Infant Family Early Childhood Mental Health Cohort</td>
<td>$5,000</td>
<td>St. Joseph’s / Providence Health</td>
<td>Y</td>
</tr>
<tr>
<td>11/2019</td>
<td>Funding for Community Resilience Model Train the Trainer</td>
<td>$50,000</td>
<td>St. Joseph’s / Providence Health (Community Investment)</td>
<td>Y</td>
</tr>
</tbody>
</table>
APPENDIX D
Framework for Decreased First 5 Humboldt Funding of Programs

On September 21, 2017, the First 5 Humboldt Children and Families Commission approved the following framework for decreasing F5H funding of programs.

1. Accomplish reductions necessary to align expenditures with revenues by 2019-20.
2. Transition from on-going funding to primarily funding multi-year grants, with minimal on-going commitments. First 5 will develop a grant application which emphasizes the Strategic Plan goals. These grants should emphasize:
   a. Start-up funding/pilot projects, which emphasize systems changing work, ACES or resilience promotion,
   b. how proposed projects meet the Strategic Plan goals, how they will use matching funds, and applicants’ plans to sustain the project in the future without First 5 funds,
   c. Equitable funding, where consideration is given to a proposal’s unique characteristics,
   d. Clear benchmarks, measurable outcomes and expiration dates,
   e. Expectations for increasing matching funds over the term of the grant.
3. Build-in annual reduction in allocations to match declining revenue.
4. Continue to seek additional funding streams and encourage partners to do the same.
   a. Offer incentives to partners, particularly in the way of training, to engage in funding partnership opportunities
5. Engage in public communication to raise awareness of First 5 Humboldt’s work
   a. Outreach to businesses, service clubs, and schools/HCOE
First 5 Humboldt
Public Awareness Plan for Strategic Plan 2016-2020

**Objective 1:** Increase understanding of the needs of young children and their families and the power of primary prevention in fostering healthy individuals, families and communities

- Action: Present to policy makers at the state and county levels
- Action: Use social media platforms to share information and resources.
- Action: Engage with print media when appropriate.
- Action: Keep the website updated, responsive, navigable, and connected to social media.

**Objective 2:** Increase collaboration among partners who share the goals of First 5 Humboldt

- Action: Engage with allied organizations and initiatives
- Action: Communicate regularly with funded partners
- Action: Encourage funded partners to engage with First 5’s social media platforms and our website.
## APPENDIX F

<table>
<thead>
<tr>
<th>Date of Media Reference</th>
<th>Type of Media (i.e. Social Media, Print, TV, Radio)</th>
<th>Media Outlet (i.e. Facebook, Times-Standard, KIEM-TV)</th>
<th>Description of Media Reference (i.e. Playgroups, ACEs Collaborative Partnership Projects, ACEs, Early Childhood Education)</th>
</tr>
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</table>
California Surgeon General speaks about the impact of ACEs awareness at a town hall meeting Nov. 22.

The Sequoia Conference Center on Humboldt County Office of Education's campus was at capacity, 448 people had landed a seat — while at least another 100 watched from a live stream in a separate room. The draw was a conversation among California's first Surgeon General Nadine Burke Harris and a panel of locals spearheading Humboldt County's efforts to alleviate the impacts of Adverse Childhood Experiences, also known as ACEs.
ACEs are traumatic experiences (like violence, abuse, neglect and/or separation from a parent) individuals face as children. Each experience counts as one ACE. As Harris described it, these traumatic experiences activate our fight-or-flight response. While the response itself is a good thing we need to survive, when it is constantly stimulated it releases toxic stress, which can cause many health issues later in life. Humboldt and Mendocino counties have some of the highest rates of ACEs, according to a study by the Center for Youth Wellness, which found that 75 percent of residents have experienced one or more ACEs while more than 30 percent of residents have experienced more than four ACEs.

Humboldt County’s efforts started three years ago, when State Sen. Mike McGuire hosted the first town hall on ACEs. Yesterday’s meeting informed community members and health officials on where Humboldt stands with its mission to prevent ACEs and toxic stress, build resilience and provide trauma-informed care through each of the organizations on the panel.

McGuire moderated the town hall, which included First 5 Humboldt Executive Director Mary Ann Hansen, Hoopa Valley Tribe Education Director Erika Chase, County Superintendent of Schools Chris Hartley, Department of Health and Human Services Director Connie Beck, Candy Stockton, medical director of Humboldt Independent Practice Association, and Dr. Harris.

The discussion also featured a brief update on the funding available for ACEs intervention, both statewide and locally. The Humboldt County Board of Supervisors allocated $1.2 million toward ACEs prevention and promoting resilience “in the form of direct services” for the community. First 5 Humboldt has collected $460,000 in Health Foundation Support to coordinate community ACEs projects and host a three-day conference around trauma-informed practices. Humboldt County was also awarded a $1.7 million grant from California Department of Social Services’ Office of Child Abuse and Prevention to support pregnant women with Substance Abuse Disorder.
Gov. Gavin Newsom allocated $40 million to trauma screening for adults and children on Medi-Cal, and another $50 million to train health providers on trauma screening in California.

The meeting was followed by a Q&A session with the panel that brought up concerns from community members on how Humboldt County can do more to support other communities.

"Here in California ... We're setting some bold goals," Dr. Harris told the crowd. "I am being extremely ambitious but the ambition isn't for me, it's for our kids. We are going to cut ACEs and toxic stress in California in half in a generation."

Watch the full town hall below.
EUREKA, Calif. — An incredible kick off to the Diaper Kit Program, aiming to help families ensure the health of their young children, happened at the Jefferson Center in Eureka Monday.

"One in three mothers in the United States experience diaper need," Executive Director of SupplyBank.Org Benito Delgado said. "But, that doesn't draw away from the fact that in poorer communities and often in rural communities that is an even larger number."

This Diaper Kit Program is designed to address the growing issue of “diaper need” and close the kindergarten readiness gap for children of low-income families.

SupplyBank.Org, a non-profit organization, is one of the several partnering organizations that made this program happen locally along with First Fire California, First 5 Humboldt and Kaiser Permanente.

Second District Assemblyman Jim Wood also made an appearance at Monday’s Diaper Kickoff.

"Financially, for anyone who’s on a tight budget, this is one of those unexpected expenses that you don’t think about," Wood said. "People think all the time that rural counties it's always cheaper to live up there and so on, but the reality is something like a diaper actually may be more expensive in Humboldt County than it might be in San Francisco or Los Angeles because it costs more to transport things. So this is a big deal, and it's really important to the health of children here."

The event kicks off dozens of monthly distributions of diaper kits consisting of 100 diapers and 200 baby wipes for about one-third of the in-store cost. Diaper need creates barriers to childcare and employment and results in more than 40,000 visits to California hospitals annually, 80% of which are to the emergency room, according to First 5 Humboldt.

Go to SupplyBank.Org to find out how you can access supplies.
2019 Legislative Session Overview

The 2019 legislation session officially adjourned in September and the Governor signed or vetoed all pending bills a few weeks ago. Being his first legislative session, there were no shortage of bills and policy ideas introduced by members of the legislature. The below synopsis provides the status of the bills that the First 5 Association supported, along with other key early childhood development (ECD) that moved through the legislative process.

The Association's final bill tracker can be here. Please contact Margot with any questions: margot@first5association.org.

I. LEGISLATION SUPPORTED BY THE ASSOCIATION SIGNED INTO LAW

The below bills were signed into law and will take effect on January 1, 2020.

**AB 1004 (McCarty): Developmental Screening**
The Association, First 5 LA, and Children Now co-sponsored this bill to clarify that health care providers must use a validated tool and adhere to the Bright Futures best practices around developmental screenings. This bill also provides critical oversight to ensure DHCS collects better data on developmental screens. The state budget included $60 million towards incentive payments for Medi-Cal providers to conduct developmental screens. AB 1004 is complementary to the budget allocation in that it would ensure that quality developmental screening practices are taking place and help move providers away from the practice of surveillance.

The Association's press release on AB 1004 is available here and an EdSource article is available here.

**SB 464 (Mitchell): California Dignity in Pregnancy and Childbirth Act**
This bill aims to reduce pregnancy-related preventable deaths and severe illnesses and associated health disparities by requiring perinatal health providers to undergo evidence-based implicit bias training. Specifically, the bill requires all medical providers involved in perinatal services at hospitals and alternative birth centers to undergo evidence-based implicit bias training. The bill also aligns California death certificate formats with the federal standards, which specify whether the decedent was pregnant at death, within 1-42 days of death, or within 43-365 days of death. This allows the California Department of Public Health to resume collecting and publishing data on maternal mortality and severe morbidity that can be further assessed and researched.

An earlier op-ed by Senator Mitchell on Black Maternal Mortality and SB 464 is available here.

**SB 436 (Hurtado): Family Resource Center**
This bill defines "Family Resource Center" (FRC) into the Welfare and Institutions code of state statute. The First 5 Association worked with the CA Family Resource Center Association (CFRA) on the bill to ensure the definition reflected a broader family resiliency frame and encompassed more than just non-
profits that engage in this work. First 5 is recognized in intent language of the bill as a key systems builder of family resource centers. We greatly appreciated the collaboration with CFRA and the many First 5 commission that actively engaged on this bill. The state definition of an FRC is:

An entity providing family-centered and family-strengthening services that are embedded in communities, culturally sensitive, and include cross-system collaboration to assist in transforming families and communities through reciprocity and asset development based on impact-driven and evidence-informed approaches with the goal of preventing child abuse and neglect and strengthening children and families. A family resource center may be located in, or administered by, different entities, including, but not limited to, a local educational agency, a community resource center, or a neighborhood resource center.

ACR 1 (Bonta): Immigration: Public Charge
This resolution condemns regulations recently adopted by the Department of Homeland Security to prescribe how a determination of a person who is not a citizen or national is made based on the likelihood that the person will become a public charge. This measure would also urge the federal government to repeal the new regulations.

II. OTHER EARLY CHILDHOOD DEVELOPMENT BILLS SIGNED INTO LAW:
A few other key bills were signed into law this year by the Governor.

AB 48: School Facilities Bond
For the first time, a statewide school facilities bond will include preschool facilities in the bond measure. AB 48 (O'Donnell) was signed into law on Monday. The $15-billion-dollar bond will improve school facilities across preschool, K-12, and community colleges. It is important to note that there is not a specific dollar amount dedicated to preschool, but will be named in the ballot measure.

The school bond measure will appear before voters on the March 2020 ballot. Please also see the Governor’s press statement on the bill signing.

AB 378 (Limon): Collective Bargaining
The Governor signed AB 378 (Limon), legislation that will allow an estimated 40,000 child care workers who provide home-based care to collectively bargain. Specifically, the law applies to family child care and license-exempt providers who are caring for a child receiving a child care subsidy. The Governor’s 2019-20 budget also included $10 million for state agencies and departments to help oversee and create the infrastructure for care child workers to collectively bargain.

Sponsored by SEIU and AFSCME, AB 378 was supported by a handful of First 5 commissions. First 5 LA and First 5 Alameda were both represented at the bill signing ceremony. We will continue to keep commissions apprised of new developments and implementation details.

Additional information can also be found in the Governor’s press statement and First 5 LA's press statement.

SB 234 (Skinner) Family Child Care Homes
Currently, a small family child care home may provide care for up to 8 children and is still considered a residential use of property. Conversely, the permitting required for a large family child care home, defined as providing care for up to 14 children, is at the discretion of the local city or county. This law
standardizes the requirement and clarifies that large family child care homes are to be treated as a residential use of property. Doing so avoids costly and burdensome zoning and permitting requirements and will help ensure more children and families have access to care.

III.  BILLS VETOED BY THE GOV:

**AB 197 (Weber): Full-day kindergarten**
This bill would require school districts offering kindergarten and charter schools serving pupils in early primary grades to implement a full-day kindergarten program by the 2022–23 school year. The bill was vetoed by the Governor, citing cost pressures above the $300 million provided in the budget for school district to build or renovate kindergarten facilities. Veto Message is available [here](#).

IV.  TWO YEAR BILLS
The following bills stalled at various points during the 2019 legislative session. As we enter the second year of a two-year legislative session, we anticipate that these bills, or related measures, will continue to move during the upcoming 2020 Legislative Session:

**AB 898 (Wicks) EPSDT services: behavioral health**
Would require, by March 30, 2020, and monthly thereafter, the California Health and Human Services Agency, under the oversight of the Governor, to convene the Children’s Behavioral Health Action Team, which would consist of no fewer than 30 individuals, including the First 5 Association, to maximize the well-being of children in California who receive EPSDT services and health care through the Medi-Cal program. This bill was held in Senate Appropriations.

**AB 526 (Petrie-Norris): WIC Express Lane**
Currently, an estimated 120,000 kids, infants, and pregnant women are enrolled in WIC, but do not receive Medi-Cal benefits, despite eligibility. This bill will establish an expedited pathway for Medi-Cal enrollment based on existing information obtained through WIC. If a WIC applicant does not show Medi-Cal enrollment based on a query to the Medi-Cal database (MEDS), the applicant could initiate Express Lane Eligibility enrollment for Medi-Cal using the WIC eligibility findings. The bill was held in Senate Appropriations.

**AB 125 (McCarty) and SB 174 (Leyva): Child Care Rate Reform**
The two child care rate reform bills were not funded via the budget. These bills would have created a single reimbursement system for child care providers by aligning the Standard Reimbursement Rate (SRR) with the Regional Market Rate (RMR). The authors are currently in conversations with the administration on how rate reform intersects with the Master Plan on Early Learning and Care. Both bills are sponsored by First 5 CA.

**AB 324 (Augiar-Curry): AB 212 Professional Development Stipends**
This bill was adopted via budget trailer bill around the $195 million dedicated to early learning professional development funding. This bill would have applied to the existing AB 212 stipends. The bill was held in Senate Appropriations Committee.
**AB 1001 (Ting): Local Planning Councils**
This bill would have renamed and restructured Local Planning Councils (LPCs). The bill also allows, but does not require, LPCs and QRIS consortium to merge. While the Association did not take a position on this bill, many have inquired and the Association has been in discussions with CCSESA, the bill sponsor. After the bill was not funded in the budget, the author opted to make this a two-year effort.

**SB 135 (Jackson): Job-Protected Leave**
Current law prohibits an employer with 50 or more employees in a 75 - mile radius to refuse to grant an employee a request to take up to 12 weeks of unpaid leave for family care and medical leave if the employee worked 1,250 hours in the prior 12 months. Current law includes within “family care and medical leave” the birth, adoption, or foster care placement of a child and the serious health condition of the employee’s child, parent, or spouse. This bill would expand the scope of those provisions to instead prohibit an employer with 5 or more employees to refuse to grant an employee a request to take up to 12 weeks of unpaid leave for family care and medical leave if the employee had 180 days of service with the employer.
<table>
<thead>
<tr>
<th>Bill Number</th>
<th>Author</th>
<th>Description</th>
<th>Position</th>
<th>Status</th>
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<tbody>
<tr>
<td>SB 135</td>
<td>Jackson (D-Santa Barbara)</td>
<td><strong>Paid Family Leave</strong>&lt;br&gt;Current law prohibits an employer with 50 or more employees in a 75-mile radius to refuse to grant an employee a request to take up to 12 weeks of unpaid leave for family care and medical leave if the employee worked 1,250 hours in the prior 12 months. Current law includes within “family care and medical leave” the birth, adoption, or foster care placement of a child and the serious health condition of the employee’s child, parent, or spouse. This bill would expand the scope of those provisions to instead prohibit an employer with 5 or more employees to refuse to grant an employee a request to take up to 12 weeks of unpaid leave for family care and medical leave if the employee had 180 days of service with the employer. Sponsor by Legal Aid at Work, CA Work &amp; Family Coalition &amp; First 5 CA</td>
<td>Support</td>
<td>Held on Senate Floor</td>
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<tr>
<td>AB 1593</td>
<td>Reyes (D-San Bernardino)</td>
<td><strong>Personal Income Taxes: earned income credit</strong>&lt;br&gt;This bill would require the taxpayer and the qualifying child to have a social security number or a federal individual taxpayer identification number in order to be eligible for the earned income tax credit.</td>
<td>Support</td>
<td>Held in Senate Governance &amp; Finance</td>
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<tr>
<td>SB 436</td>
<td>Hurtado (D-Fresno)</td>
<td><strong>Family Resource Centers</strong>&lt;br&gt;This bill would also require the Office of Child Abuse and Prevention to coordinate and share best practices implemented by family resource centers. The bill would define a “family resource center” is into statute. First 5 commission are also named are critical partners in intent language.</td>
<td>Support</td>
<td>Signed by Governor</td>
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<tr>
<td>Bill</td>
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<td>Title</td>
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<tr>
<td>SB 464</td>
<td>Mitchell (D-LA)</td>
<td><strong>CA Dignity in Pregnancy &amp; Childbirth Act</strong></td>
<td>This bill would make legislative findings relating to implicit bias and racial disparities in maternal mortality rates. The bill would require a hospital that provides perinatal care, and an alternative birth center or a primary clinic that provides services as an alternative birth center, to implement an implicit bias program, as specified, for all health care providers involved in perinatal care of patients within those facilities. The bill would require the health care provider to complete initial basic training through the program and a refresher course every 2 years thereafter, or on a more frequent basis if deemed necessary by the facility. This bill contains other related provisions and other existing laws.</td>
<td>Support</td>
</tr>
<tr>
<td>ACR 1</td>
<td>Bonta (D-Alameda)</td>
<td><strong>Immigration: public charges</strong></td>
<td>This measure would condemn regulations proposed by the Department of Homeland Security to prescribe how a determination of an alien’s inadmissibility is made based on the likelihood that the alien will become a public charge. This measure would also urge the federal government to reconsider and roll back the proposed regulations.</td>
<td>Support</td>
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**Comprehensive Health & Development**

<table>
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<tr>
<th>Bill</th>
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<th>Title</th>
<th>Summary</th>
<th>Support; Co-Sponsor</th>
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<tbody>
<tr>
<td>AB 1004</td>
<td>McCarty (D–Sacramento)</td>
<td><strong>Medi-Cal: Developmental screenings</strong></td>
<td>Would require, consistent with federal law, that screening services provided as an EPSDT benefit include developmental screening services for individuals zero to 3 years of age, inclusive. The bill would require the department to ensure a Medi-Cal managed care plan’s ability and readiness to perform these developmental screening services, and would require the department to adjust a Medi-Cal managed care plan’s capitation rate, as specified. Until July 1, 2023, the bill would require an external quality review organization entity to annually review, survey, and report on managed care plan reporting and compliance with specified developmental screening tools and schedules.</td>
<td>Sponsored by First 5 Association, First 5 LA, Children Now</td>
<td>Signed by Governor</td>
</tr>
<tr>
<td>Bill Number</td>
<td>Sponsor (District)</td>
<td>Description</td>
<td>Support Status</td>
<td>Notes</td>
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<tr>
<td>AB 898</td>
<td>Wicks (D-Berkeley)</td>
<td>Early and Periodic Screening Diagnosis, and Treatment services: behavioral health. Currently, less than 5 percent of eligible children receive mental health services under the Medi-Cal program, and fewer than 3 percent receive ongoing clinical treatment. These estimates do not account for the children whose behavioral health needs diverge from strict diagnostic criteria required under EPSDT, many of which affect so many low-income children. This bill would create the Children's Behavioral Health Action Team to identify strategies and ways to connect children to critical behavioral health and EPSDT services. The First 5 Association or a designee is named as one of the 30 stakeholders in this group. <em>The bill is sponsored by the California Children's Trust.</em></td>
<td>Support</td>
<td>Held in Senate Appropriations, two-year bill</td>
<td></td>
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<tr>
<td>AB 526</td>
<td>Petrie-Norris (D-Laguna Beach)</td>
<td>Medi-Cal: California Special Supplemental Nutrition Program for Women, Infants, and Children. Currently, an estimated 120,000 kids, infants, and pregnant women are enrolled in WIC, but do not receive Medi-Cal benefits, despite eligibility. This bill will establish an expedited pathway for Medi-Cal enrollment based on existing information obtained through WIC. If a WIC applicant does not show Medi-Cal enrollment based on a query to the Medi-Cal database (MEDS), the applicant could initiate Express Lane Eligibility enrollment for Medi-Cal using the WIC eligibility findings. <em>The bill is co-sponsored by: Children Now, The Children's Partnership, Children's Defense Fund, and March of Dimes.</em></td>
<td>Support</td>
<td>Held in Senate Appropriations</td>
<td></td>
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**Quality Early Learning**

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<th>Description</th>
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<tr>
<td>AB 124</td>
<td>McCarty (D-Sacramento)</td>
<td>Childcare: local planning councils: This bill requires local childcare and development planning councils (LPCs) to provide information to cities and counties regarding facility needs for early childhood education.</td>
<td>Support in old form</td>
<td>This bill was gut and amended. The PreK facilities bond is part of the PreK-Community Colleges Facilities bond through AB 48, which was signed into law.</td>
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<td>Bill</td>
<td>Sponsor</td>
<td>Description</td>
<td>Supporting Info</td>
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| AB 125 | McCarty (D–Sacramento) | *Early Childhood Education: reimbursement rates*  
This bill would provide that it is the intent of the Legislature to enact legislation that would establish a single regionalized state reimbursement rate system for childcare, preschool, and early learning services that would achieve specified objectives.  
*Sponsored by First 5 CA, CCRC, and EveryChild CA* | Support | Senate Appropriations |
| AB 194 | Reyes (D-San Bernardino) | *Childcare and development services*  
Would state the intent of the Legislature to enact legislation to appropriate $1,000,000,000 to immediately improve access to alternative payment programs and general childcare and development programs | Support | Held in Asm Appropriations; Additional funding for child care slots working through budget process |
| AB 197 | Weber (D-San Diego) | *Full-day Kindergarten*  
Would require, commencing with the 2022–23 school year, schools in school districts offering kindergarten and charter schools serving pupils in early primary grades to implement a full-day kindergarten program, thereby imposing a state-mandated local program. The bill would provide that a minimum school day for full-day kindergarten is the same number of minutes per school day that is offered to pupils in 1st grade. | Support | Vetoed by Governor |
| AB 324 | Aguiar-Curry (D-Winters) | *Childcare services: state subsidized childcare: professional support stipends*  
The bill revamps the AB 212 stipend program for subsidized childcare professional development. This bill would require CDE to develop guidelines for the use of these professional support stipends, with the goal of creating guidelines that create a standardized, effective, and measurable funding program, while still allowing for local flexibility. AB 324 would also expand the availability of professional support stipends to all qualified child care providers who work directly with children who receive state-subsidized child care services.  
*This bill is sponsored by First 5 CA.* | Support | Held in Senate Appropriations |
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<th>Bill</th>
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<th>Description</th>
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<tbody>
<tr>
<td>AB 452</td>
<td>Mullin (D-South San Francisco)</td>
<td>Childcare, facilities: grants</td>
<td>Support</td>
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<tr>
<td>SB 174</td>
<td>Leyva (D-Chino)</td>
<td>Early Childhood Education: reimbursement rates</td>
<td>Support</td>
</tr>
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Current law requires that a local educational agency or a contracting agency using facilities purchased by the use of funds from the Child Care Facilities Revolving Fund be charged a leasing fee, as provided, over a 10-year period. Current law requires title to be transferred from the State of California to the local educational agency or contracting agency upon full repayment of the purchase and relocation costs. Current law requires the Superintendent to deposit all revenue derived from the lease payments or renovation or repair loan repayments into the Child Care Facilities Revolving Fund. This bill would repeal that loan program, except as provided, and would require all moneys in the Child Care Facilities Revolving Fund as of December 31, 2019, to be transferred to the California Childcare Facilities Grant Fund, which would be established by this bill to fund a grant program administered by the State Department of Education.

This bill would provide that it is the intent of the Legislature to enact legislation that would establish a single regionalized state reimbursement rate system for childcare, preschool, and early learning services that would achieve specified objectives.

*Sponsored by First 5 CA, CCRC, and EveryChild CA*