# AGENDA

## MEETING OF THE BOARD OF COMMISSIONERS

**Chair: Sheila Kuehl**

**Thursday, April 21, 2022**
**1:30 PM Click HERE for Public Zoom, YouTube, and Dial-in Info**

**Meeting Location:**
First 5 LA
750 N. Alameda Street
Los Angeles, CA 90012

(If you would like to speak to any item on the agenda, please complete a public comment form)




1. Call to Order/Roll Call
2. Review Program and Planning Committee Transcript from January 27, 2022 Meeting — 3

3. The Early Childhood Policy and Advocacy Fund: Advancing Integrated Advocacy Strategies — 96

   **Presenters: Jaime Kalenik, Program Officer, Early Care & Education; Andrew Olenick, Senior Policy Analyst**

4. Establish a Strategic Partnership with San Gabriel Pomona Regional Center in the Amount of $500,000 to Serve as the Unifying Agency (UA) for the Help Me Grow LA Pathways Collaborative to Strengthen Referral Pathways for Early Identification and Intervention Services and Supports in Community 2 (San Gabriel/Pomona) for the Period of Three Years — 131

   **Presenters: Tara Ficek, Director, Health Systems; Zully Jauregui, Senior Program Officer**








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5. Establish a Strategic Partnership with City of Long Beach, Department of Health and Human Services in the Amount of $500,000 to Serve as the Unifying Agency (UA) for the Help Me Grow LA Pathways Collaborative to Strengthen Referral Pathways for Early Identification and Intervention Services and Supports in Community 7 (Harbor) for the Period of Three Years 153

   Presenters: **Tara Ficek, Director, Health Systems; Zully Jauregui, Senior Program Officer**
6. Break
7. Board of Commissioners Diversity, Equity, and Inclusion Survey: A Review of Preliminary Results 175

   **Presenters: Antoinette Andrews Bush, Chief Transformation Officer; Ashley Griffith, Senior Strategist, Diversity, Equity, and Inclusion**

8. Public Comment (for items not on the agenda)
9. Adjournment







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**SUMMARY MEETING NOTES**

**FIRST 5 LA**
**January 27, 2022**
**Special Board/Program & Planning Committee Meeting (VIRTUAL)**
**1:30-4:00 pm**

**COMMITTEE MEMBERS PRESENT**
Robert Byrd (Alternate)
Astrid Heger
Jacquelyn McCroskey
Karla Pleitez Howell (Committee Vice Chair)
Romalis Taylor
Deanne Tilton
Keesha Woods

**NON-COMMITTEE MEMBERS PRESENT**
Judy Abdo
Linda Aragon (Alternate)
Yvette Martinez

**COMMITTEE MEMBERS ABSENT:**
Frank Ramos [Excused]
Jonathan Sherin [Excused]
Carol Sigala (Alternate) [Excused]

**STAFF PRESENT:**
Peter Barth, Chief of Staff
Kim Belshé, Executive Director
Linda Vo, Board Relations Manager
John Wagner, Executive Vice President

**1. Call to Order / Roll Call**

Committee Vice Chair Pleitez Howell called the meeting to order at 1:33 pm. Quorum was present.

**2. Review Program and Planning Committee Transcript from October 28, 2021 Meeting**

Notes were received and filed with no deletions/additions or changes.

**3. Strategic Priorities for 2022: A Center for Children and Families Impact Snapshot**

John W. discussed some of the work underway within the Center for Child and Family Impact (CCFI) and illustrated the approach they've taken as a Center and how they are working in new and different ways, with more intentionality on integrating the Center's work more broadly across the entire organization. He reminded the Board that the current structure of First 5 LA was established with the adoption of the current Strategic Plan 2020-2028 at the November 2020 Board meeting. Given his focus was on CCFI, John W. spoke about the four primary functional areas within this Center: ECE, Health Systems, Communities, and Family Support with a Center-wide support team, focused on areas of expertise like project management, County partnerships, and fiscal sustainability that apply across the entire Center and the organization more broadly.

The first panel highlighted how CCFI is seeking to better connect families to public systems serving families like ECE, health care delivery, child welfare services, and public health. As agents of systems change, connecting families to these systems and making them more accountable for serving families is critical to improving child and family outcomes.

The second panel then spoke to efforts underway to bring the community voice into these discussions, and more intentionally align community, First 5 LA, and County systems partner priorities.

Staff also spoke to how DEI is being embedded throughout First 5 LA's work. One example provided was staff are currently working to identify potential gaps in populations being served by home visiting where Family First Prevention Services Act (FFPSA) might allow services to expand.

Finally, the presentation concluded with First 5 LA's Chief Data Officer, Kim H., who gave a sneak preview on how First 5 LA plans to hold itself accountable and measure its progress concretely.

Some questions posed by Commissioners including one on sustainability of First 5 LA funded programs. In response to this question, staff spoke to how California has chosen ten evidence-based practices or EVPs in its proposed plan that it is negotiating with the federal government. Three of these EVPs are home visiting and are implemented in LA County. Two of which, HFA and PAT are funded by First 5. The third of which is NFP, which is also funded at the County level. Staff informed Commissioners that this is an opportunity to create a new revenue stream for home visiting, with potential for sustainability.

Broadly, Commissioner expressed the importance of paying attention to cultural competency and systems bias as staff look to incorporate DEI within a service such as HV. There was an emphasis on ensuring that community input from these different groups were included around how HV would incorporate and operationalize DEI within their processes.

Overall, there was excitement around the development of CCFI and the approach it's taking with its work.

There was no further discussion on this item.

**4. Public Comment (for items not on the agenda)**

There were no public comments.

**ADJOURNMENT:**

The meeting adjourned at 3:45 pm.

**NEXT MEETING:**

The next Special Board/Program & Planning Committee meeting will take place on Thursday, April 21, 2022 at 1:30 pm.

VIRTUAL COMMITTEE MEETING
Meeting details will be posted per Brown Act Requirements

Meeting minutes were recorded by Linda Vo, Board Relations Manager

MEETING OF FIRST 5 LOS ANGELES PROGRAM AND PLANNING

Thursday, January 27, 2022

Los Angeles, California 90012

STENOGRAPHICALLY REPORTED BY:
HEATHERLYNN GONZALEZ
CSR #13646

Thursday, January 27, 2022; Los Angeles, California

1:34 p.m.

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COMMISSIONER PLEITEZ HOWELL: Welcome, Commissioners. We have a really packed agenda with information that will be interesting for all of us and give us an overview of the impact that First 5 LA has had and the trajectory we're going. It's a really, really exciting agenda; so we're going to dive right in.

And Ms. Linda Vo, I will turn it to you for roll call.

THE SECRETARY: Thank you so much.

Judy Abdo? I see Judy waving.

Linda Aragon?

COMMISSIONER ARAGON: Here.

THE SECRETARY: Astrid Heger?

COMMISSIONER HEGER: Here.

THE SECRETARY: Yvette Martinez? And so she may not be on yet.

Frank Ramos?

Carol Sigala?

Romalis Taylor?

COMMISSIONER TAYLOR: Here.

THE SECRETARY: Keesha Woods?

COMMISSIONER WOODS: Here.

THE SECRETARY: Robert Byrd?

COMMISSIONER BYRD: Here.

THE SECRETARY: Jacquelyn McCroskey?

COMMISSIONER McCROSKEY: Here.

THE SECRETARY: Deanne Tilton?

COMMISSIONER TILTON: Here.

THE SECRETARY: And Karla Pleitez Howell?

COMMISSIONER PLEITEZ HOWELL: Here.

COMMISSIONER ABDO: This is Judy. I'm really here.

THE SECRETARY: I see you. Thank you, Judy.

And before we actually go on to the next agenda item, I wanted to go over the -- our approach for public comments.

So regarding public comments, there are two ways to submit public comments. And the first way is written public comments that must be submitted in advance of the meeting via e-mail to my e-mail which is LVO@First5LA.Org by 1:30 p.m. the day of the meeting in order for them to be read aloud during the meeting.

And as a reminder, public comments e-mailed should indicate the item number the comment corresponds with. And any public comments received after 1:30 p.m. via e-mail will become a part of the public records for today's meeting.

Now, during the meeting, public members can also use the Q and A chat function to express an interest in speaking to an item. It is important that these requests to speak be submitted via the Q and A chat box function before the item being commented on is presented.

And when submitting requests to speak, public members are asked to only provide his or her name and the item number the comment corresponds with. All public comments received during the meeting via the Q and A chat will be addressed in the order they're received. And so when you do hear your name called to provide public comments, you will be given the ability to speak during the meeting.

Now, if we don't hear you begin your comment upon your name being called, we will call your name one more time after that before moving on to the next public comment.

Two minutes will be allowed for each comment and once the two minutes have passed for each comment, we will move on to the next public comment.

And with that, I will hand this back over to Commissioner Pleitez Howell.

COMMISSIONER PLEITEZ HOWELL: Thank you, Linda. And for the commission, as we go through the agenda items, if folks have questions or comments, Linda and I will be

tag teaming. So there's a raise-hand function -- if we use that, we'll be monitoring in that way so that we're not going back and forth in text.

Next on the agenda, we have our review of the transcript meeting minutes from October 28th. It has been a minute. Happy New Year.

Any new comments from folks on -- or questions? Any discussion on the minutes? All right. Seeing none, I will now turn it over to -- I believe it is John.

We're going to start an overview on the strategy priorities. Please know that there is several discussions. In the middle of it, the team will let us know when we will get a break; so know we won't be going through all of this.

So John, turning it to you.

MR. WAGNER: Thank you so much, Madam Chair, and adding my wishes for a Happy New Year to all of you. And great to be with you staff, colleagues, and the public.

So I think Julie is going to help coordinate the power point which we'll be speaking from. If we could get that up. Thank you, Julie.

So it's really great to be back here kicking off the New Year with the Program and Planning Committee. During our time together in the next couple of hours, we'll be highlighting a few things.

First, one of the topics will be some of the work underway within the Center for Child and Family Impact, which I'll talk about in a minute. And given the establishment of the Center, we hope to illustrate the approach that we've taken and how we are working in new and exciting ways, both reflecting how we're working within the Center as well as how we're more strategically and intentionally looking for ways to integrate our work more broadly.

And importantly, our time today will give the board an opportunity for input. We're foreshadowing some things that will be coming back to you over the course of this upcoming year. And gaining your input today will help inform those future touch points.

We're also pleased to be doing this in collaboration with Kim Hall, who as you know, is head of our Office of Data for Action, and whom -- with whom we've been working very closely over the last few months; so you'll hear a bit more about that at the end of the panel presentations.

Julie, could you turn to the next slide, please.

This is our agenda for this afternoon. And we'll start with context, including some reminders about our structure which is aligned to the board's adoption of the 2020-2028 strategic plan. This structure was rolled out

back in November of 2020, and led to the establishment of the Center for Child and Family Impact at First 5 LA. We'll discuss implications for the Center and the organization as we move from strategy plan planning to implementation. And we'll share the process that the Center teams or departments have been undergoing to work together across our teams in order to advance our north star, that by 2028, all children enter kindergarten ready to succeed in school and life.

Our first example or panel of speakers focuses on the theme of how we're seeking to better connect families to the mainstream, public, family-serving systems. These are the systems like ECE or health care delivery, child welfare services, and public health, for example.

If we truly are agents of systems change, connecting families to these systems and making them more accountable for serving families is critical to improving child and family outcomes.

In our second panel, we'll build upon that theme by illustrating efforts underway to bring the community voice into these discussions, and more intentionally align community, First 5 LA, and County systems partner priorities.

And in each presentation, we've built in time for commissioners' questions and input.

Finally, we'll hear from our Chief Data Officer, Kim Hall, who will give us a sneak preview or look-ahead about how we plan to hold ourselves accountable and measure our progress in this work.

Now that I've given an overview of what we intend to cover, I want to be clear what this is not about. And this is not a comprehensive view of the Center or even the organization's work. It's not reflective of each and every one of our Center priorities. Rather, given the constraints on our time and intention, we wanted to lift up just a few examples or overarching themes which are the focus of today's agenda.

More opportunities, obviously, for updates and board engagement will certainly be available over the course of the upcoming year.

Julie, if we could move to the next slide.

This slide is an illustration of the organization current structuring. I need to say that this is not a formal or official org chart, but it's a visual of our structure aligning our staff and functions to the work adopted by the board in our 2020-2028 strategic plan. And you'll really see two centers. The Center for Operational Excellence, formally the admin division, and the Center for Child and Family Impact, which we'll dig into a little bit more in a minute.

There are five offices centered around some board-wide functions reporting to the Executive Director, including the Office of Communications, Office of Government Affairs and Public Policy, Office of Data for Action, and Office of Equity, Strategy, and Learning.

For the Center for Child and Family Impact, we have the four primary functional teams which, you'll recall from the previous structure, include ECE, Health Systems, Communities, and Family Support. Plus the addition of a Center-wide support team, focused on areas of expertise like project management, County partnerships, and fiscal sustainability that apply across the entire Center and the organization more broadly.

You'll hear more about the implementation of these functions in this work in the two panels coming up.

The next slide, please.

This is a -- just a high-level overview of the time frame. Around the same time we implemented the structure aligned to the strategic plan, First 5 LA was specifically focused on determining how best to move forward from strategic plan planning to implementation, as I mentioned earlier. And in this process, we identified three critical needs.

The first was the need to continue to focus and clarify our work so that we could better prioritize it;

The second was the need to better integrate our work across the Center, across the organizations, and with other like communities;

And the third was the need to look at the value of diversity, equity, and inclusion, and apply it to our work more intentionally, given this org-wide value.

Shortly after I had an opportunity to move into this new role within the Center for Child and Family Impact, which was around March of 2021, and build upon the initial great work of the Center while bringing a strong understanding and connection to the important functions of the Center as its previously working in, which is the Center for Operational Excellence.

Soon after joining the Center for Child and Family Impact, the Leadership Team, which is myself and the directors, engaged in a series of discussions in a retreat which identified those areas in which most of the work that we needed to do in order to advance our strategic plan -- those most critical pieces of work that were needed to be done over the next 12 to 18 months.

And it certainly bears acknowledging that the pandemic has impacted not only our work but our thinking during that time frame. And some of the presenters will be calling that out and the impact of that in their presentation.

Next slide, please.

Now, this is the slide on priorities. And you'll see the list of our Center-wide priorities identified through the process I just described.

As I mentioned earlier, I won't go into each and every one of these, but some will be called out during the course of the panel presentations.

Just to add a few final points related to these priorities. First, these are collectively owned and helped. And although they are broken up by a lead team or formerly what you would have called a department, we are a Center. And as a Center, are all vested in the success of each and every one of these priorities.

Second, we acknowledge the importance of integration. Not just across the Center and the teams within the Center, but across the entire organization. Alignment with the First 5 LA policy agenda led by our office of OGAP and adopted at your last board meeting, working with the Office of Data for Action on measuring our work, which you'll hear more about from Kim, are just a couple of the examples of how the Center is aligning our programmatic priorities with other org-wide priorities.

Next slide, please.

So next will be moving into these two separate but related panel conversations, as mentioned with time

for board input and a break.

But before we jump into the panels and the presentations under each theme, I just wanted to pause to see if any commissioners have clarifying questions or comments related to today's agenda, the process and approach within the Center for Child and Family Impact that we've undertaken to date that I've just described before we move forward; so this is a chance to clarify anything on the agenda of the process, and then we'll get into each of the panel conversations and there will be an opportunity for questions and input for each panel.

So I'll pause there.

COMMISSIONER PLEITEZ HOWELL: There's a question by Commissioner Taylor.

COMMISSIONER TAYLOR: Yes. John, I'm looking at the document. And I know that one of our issues last year -- and we raised it as a commission -- is the sustainability issue; so I just don't want to lose that as a part of this dynamic. So hopefully there will be some discussion on sustainability as it relates to how we're doing our work.

Thank you.

MR. WAGNER: Yeah. Just to underscore that there certainly will. And it's -- it's one of the functions I called out in the Center Support Team, which is applying

sustainability across the work of the Center and across the organization; so you'll hear examples in the panel, especially the second, where we are, you know, digging in into really interesting and exciting work around sustainability.

COMMISSIONER TAYLOR: And the only other question I have is how are we going to communicate our discussion to our general partners as we move along?

MR. WAGNER: Great question. You're actually queuing up Kim Hall; so --

COMMISSIONER TAYLOR: Okay. Then I'll hold it.

MR. WAGNER: You know, I think that's exactly what we intend to do when we have a look ahead with our measurements; so if you could just hold that Kim will be addressing that. We've been working very closely with ODFA to get into that very question.

COMMISSIONER TAYLOR: Okay. Thank you.

MR. WAGNER: Thank you.

Any other questions or clarifications before we move to the panels? Okay.

Okay. With that, I will turn it over to -- I believe Tara, are you kicking off the first panel?

MS. FICEK: I am. Thank you, John.

So yes. For this first panel, we are focusing on strengthening and integrating prevention-oriented

family-serving systems. I'm going to kick off with health systems, and then I'm going to pass it to family supports with colleague Diana Careaga, and then Anna Potere from our Center Support Team is going to close it out.

We can move to the next slide.

So our work in health systems, as you likely noted from the earlier priorities slides, does include our Early Identification and Intervention, or EII, efforts which consist of implementation of Help Me Grow LA and our legacy investment, First Connections.

Additionally, the help team leads our birth disparities work, which is more commonly known as the African-American Infant and Maternal Mortality Prevention Initiative or AAIMM. Quick reminder for the board, both Help Me Grow and AAIMM are being codesigned, co-implemented in partnership with LA County Department of Public Health. For the purposes of today's discussion, I am going to solely focus on Help Me Grow, although you will hear references to our AAIMM work that's going to be highlighted in our family support section of the panel.

So through Help Me Grow, we have prioritized improving the Medi-Cal health care delivery system, given its critical role, resources, responsibilities for children's early identification and intervention, and that health care systems has early and consistent access to

young children and their families through the Well Baby Child Appointment structure. Our timing on focusing on health care delivery is ideal, given major shifts happening at the State right now to transform and strengthen Medi-Cal focused on creating a more equitable, coordinated, and person-centered health care system that prioritizes prevention.

Opportunities exist for First 5 LA to leverage these improvement to Medi-Cal for both our Help Me Grow and home visiting work, and we are going to be coming back to the board in the spring on how this Medi-Cal transformation can support sustainability for our home visiting work.

Our Help Me Grow work focusing on health care delivery is centered around how can that system do better to not only screen earlier and connect families to appropriate services and support. And in order to do that, they need to coordinate and integrate with other prevention-oriented family-serving systems, including County departments such as Public Health, Early Learning in the K to 12 system, as well as developmental delays which includes the Regional Center System.

We know that the health care system alone cannot entirely meet the needs of children and families with developmental or behavioral delays, it must work closely

with the other family-serving systems.

Now, to really dig in and pivot to highlight some of our work around DEI, this last year, fueled by our DEI value and our strategic plan investment guideline of equity as well as our lead partner, LA County Department of Public Health commitment to advancing health equity, DEI was elevated throughout multiple components of Help Me Grow, driving key planning decisions.

So a few important examples are noted here, starting with our LA Care partnership, which is focused on strengthening clinic workloads and practices to embed developmental screening and referral to intervention services. As we begin to identify clinics to participate in that work, we worked with LA Care to pull and review disaggregated race data. And instead of focusing on clinics servicing the largest number of kids, which was the initial plan, we pivoted to prioritize clinics serving populations that are more likely to experience inequities, including Latinx, Black, African-American, and Asian Pacific Islander.

While this is serving fewer children, it is responsive to our DEI commitment and begins to address conditions that are potentially contributing to inequitable outcomes. We had a ton of support from our Office of Data for Action. Big shout out to Agnieszka

Rykaczewska who was with us daily figuring out unpacking the data, figuring out with the Health Systems Team how to influence and inform our decision-making in moving that forward.

Another example includes our implementation of Help Me Grow LA pathways, which is focused on building a community collaborative in a geographic region that is working to then strengthen referral coordination among a set number of partners representing diverse sectors -- health, mental health, the regional center, early learning, and so forth.

We divided the County into seven regions. These are informed by the regional service center areas. We released and RFP. Five of the seven regions responded and have begun building their community collaboratives. They recently completed their Year 1 planning, and are now moving into implementation.

So five of the seven communities were covered. That left two communities -- San Gabriel and Long Beach -- without a collaborative, as we didn't receive a response to the RFP from either community.

Staff regrouped, we surveyed key partners to better understand the nuances of each community, why the limited response. We also took a look at the demographics of each community, noting both serving high API

populations, and a key decision was made. We would not move forward with only five of seven communities participating. Of course, that eliminated the diversity and inclusion.

Staff time and effort was placed into securing partners that could fulfill the role of lead for each community, and these partnerships will be coming back to the board late spring, early summer for your review and approval moving forward with the entire County-wide coverage for our pathways work.

And then finally, as our co-lead in Help Me Grow, as I mentioned, LA County Department of Public Health and First 5 LA, identified additional expertise was needed to lead the team through DEI in our efforts.

Last month, we launched a series of facilitated sessions focused on establishing shared DEI definitions. And the approach out of this process, we expect to examine how disparities currently manifest in early identification and intervention in LA County, and how that connected for our role with Help Me Grow LA. Create -- we want to be creating together a Help Me Grow equity statement and plan that can then be used as a guide in our work going forward.

So I help these examples illustrate how we have prioritized DEI across our Help Me Grow LA work. And

before I pass it over to the next panelist, I wanted to briefly acknowledge how Covid -- as John mentioned, how Covid has influenced and impacted our work over the last, now, almost two years. So as we co-lead the work beginning in partnership with DPH, you can imagine the demands on that County department to meet the enormous needs of leading the County-wide Covid response efforts. Of course it resulted in staff reassignments.

Reassignments To Covid response resulted in decreased staff on Help Me Grow; so we worked closely with DPH to problem solve what work could be paused or reduced. We brought on consultants to backfill staff to keep critical pieces moving, and we are thrilled to see adjustments at the end of 2021. We have a full team again. We just had our full teem meeting this morning. We're all back. People were thrilled, ready to come together, keep the work moving, and see where we can prioritize to keep going.

So I'll leave it with that. And pass it over to my colleague Diana Careaga from our Family Supports Team.

MS. CAREAGA: Thank you, Tara.

So I will be discussing the Family Supports Team efforts, which has as one of its priorities strengthening and integrating prevention-oriented family-serving systems. So the family supports team oversees a portfolio

from various grants that span over 35 organizations. Additionally, we help lead and coordinate home visiting efforts in the County. We know home visiting is a critical strategy. It supports positive family child interaction, prevents child abuse, promotes school readiness, and it also plays a role in a system enhancer; so it connects families to other key systems as a way to better connect families.

Through the expansion of home visiting and potential revenue opportunities are bringing many key systems to the table in new ways, and of course it's important to note that in all of our home-visiting efforts, the Department of Public Health has been a critical system partner and we certainly could not do this without them.

So with the focus on integration, we continue to work extensively to build awareness and knowledge in home-visiting services within a process of prevention-oriented family serving systems. Again, there are a number of home-visiting models in the County, but that includes Welcome Baby, funded by First 5, Healthy Families America and Parents as Teachers funded by both First 5 and DPH, and Nurse Family Partnership which is funded by DPH, and a number of other models, including Momma's Neighborhood and Partnership with Families.

So before the expansion of home-visiting services in the County in 2018, referral pathways into home-visiting services was much more limited. The families could enter only if they delivered at a participating Welcome Baby hospital, and based on their need and residence within or outside of Best Start communities' boundaries that determined their eligibility to be referred to continue on in either Welcome Baby or another home-visiting path. And, of course, families that met an home-visiting partnership criteria would be referred or enrolled in those services.

The expansion of services in 2019 by DPH created much greater coordination with County partners and systems, particularly around the development of diverse referral apps (unintelligible).

So home visitors across all the program models and funding streams -- Welcome Baby, (unintelligible) -- really had to modify their outreach strategies and even scripting to ensure that staff were familiar enough with one another's program models so they could refer families to the program that was the best fit for their needs.

So this expansion included efforts with sites to hold meet and greets and hold relationship awareness of one another's staff, services, and programs. Integrating family systems and developing these referral pathways

between them is critical for connecting families to services. And as you can imagine, this has been made more difficult by the Covid pandemic. Outreach has been deeply impacted with in-person outreach opportunities at clinics, hospital tours, and community events being much more limited; so having these personal connection between staff of different programs and between systems is an essential component to reporting successful referral and hand-off during the pandemic.

So this same approach to connecting staff between programs in the systems is being used to establish connections to other systems, and I'll highlight a few examples. So we're working internally with the Health Fitness Team to build awareness and knowledge of the home-visiting services within Help Me Grow providers, with the goal of establishing bi-directional referral between home visiting and Help Me Grow.

You've already heard about Help Me Grow more broadly from Tara, but in a specific example of integration, we are working to leverage First 5 California Home-Visiting Coordination Project Fund to prepare consultants to support these Help Me Grow efforts that will work with home-visiting providers to pilot test the Help Me Grow central access point and referral process. This was also a response to the impact of Covid on

DPH resources and availability during their reassignment, the creative approach in how to leverage available funding to meet a need and integrate two very important systems. The lessons that will be learned from this will help inform scaling and implementation across the County with all home-visiting providers.

This effort has been -- has taken a focused coordination between family supports, health systems, and our DPH partners to identify that need and developed skilled (unintelligible) establishment of this referral pathway in use of a central access line.

We also know the work of doulas is complementary to home visiting services. Most strategies help enhance outcomes for one another, and the Family Support Team is working with the Health Systems Team alongside DPH which funds the (unintelligible), which Tara referenced earlier, to help connect home-visiting providers to the doula program, and ensure both understand one another's services and help establish (unintelligible) referrals.

Another example of integration is with the health system. So we have had recent discussion with the ICAN policy leaders, and the ICAN policy work group work has identified home visiting as a key prevention strategy in preventing child abuse and fatalities. Their work spans across 63 hospitals in the County and represents an

opportunity to link home-visiting providers in both Welcome Baby hospitals and new sites to really expand referral pathways and connect more families with needed home-visiting services.

You will hear about Anna -- from Anna next about the Family First Prevention Services Act, or FFPSA, but I'll highlight this is another effort of focused integration with the child welfare systems. So teams -- Staff and Family Supports and the Center Support Team are working together as part of a home-visiting work group that's led by DCFS to establish a community referral pathway. And this is really an exciting opportunity as it's brought partners to the table that had not been as deeply in home visiting beforehand, including DCFS and the Probation Department, and is helping to lead to focused conversation on how pathways can be developed into home visiting.

So integrating these systems is helping to breakdown silos so that families have a more seamless experience and are better connected to those needed services.

So I'm going to pivot to DEI which has been incorporated and influenced our work in improving outreach strategies to have a more diverse workforce in client enrollment, which is in alignment with our value

(unintelligible).

So we want to ensure that those that have been traditionally underrepresented in home-visiting programs, including African American and Asian families, have equitable access to home visiting services. We have shared with the board in the past that, in looking at First 5 enrollment historically, we know that we have a higher percentage of Latinx families enrolling, but overall a lower percentage of African American, which does not reflect the population demographics. So we have been working with key partners including the Home Visitation Consortium to identify best practices for outreach and enrollment of African American families.

In 2019, the home-visiting providers themselves identified as a need to better engage and serve African American families, they made a call to (unintelligible) work group for this issue. And this resulted in the development last year of a new African American engagement work group under the official umbrella of the Consortium, and the work of developing a Best Practices Hiring Guide for increasing African American home visiting staff from (unintelligible) home visiting providers.

And another example of embedding the DEI value, First 5 LA also released the solicitation recently to work with Black-led, focused organizations to lead learning

sessions to learn from providers and clients about more effective outreach and messaging to our African American communities.

And finally -- one final example, there's always ongoing advocacy regarding the use of disaggregated data to inform County-wide (unintelligible) efforts, as well as systems apps. So as part of the Los Angeles Home Visiting Action Plan which was developed in the 2018 (unintelligible), First 5 LA released a solicitation for a consultant to develop a needs-assessment tool to better understand family demographics and needs for the zero to five population and to explore the range of existing home-visiting models and assess for any needed model modifications, enhancements, or even new models to better meet the diverse needs (unintelligible). So this is an equity approach ensuring we have the most appropriate models available (unintelligible).

And with that, I'm happy to pass it on to Anna for a deeper drive into (unintelligible).

MS. POTERE: Thank you, Diana. And good afternoon Commissioners (unintelligible).

So as Diana mentioned, Family First Prevention Services Act, or FFPSA, which I'm going to dive into in greater detail as one of our key sustainability strategies for home-visiting programs and an example of integration,

both internally and with external partners.

FFPSA was signed into federal law as part of the 2018 Budget Act to reform the child welfare system, with the goal being to give states the option to shift child welfare dollars from intervention further upstream towards prevention for children who are identified as being at imminent risk of entering the foster care system. States can opt in or out of the implementation, and California chose to opt in.

California has chosen ten evidence-based practices or EVPs in its proposed plan that it is currently negotiating with the federal government. Three of these EVPs are home visiting and are implemented in LA County. Two of which, HFA and PAT are funded by First 5 LA. The third of which is NFP, which is also funded at the County level.

This is an opportunity to create a new revenue stream for home visiting, with potential for sustainability. However the strategy goes well beyond funding. The implementation of FFPSA has also created an incredibly valuable opportunity to elevate home visiting, including DCFS recognizing home visiting and the connections between home visiting and the goals of the child welfare system oriented towards prevention.

It also provides an opportunity to strengthen

existing partnerships and create new ones and to catalyze broader conversations about the value of services such as home visiting that families could be referred to before there is a need for the child welfare system to intervene.

As Diana mentioned, California is proposing implementing a community pathway as part of FFPSA, which would create a referral system for families which are considered at imminent risk of entering the child welfare system due to one or more factors but are not yet involved in the system.

Some examples of populations included in the community pathway are homeless children, trafficked children, substance-exposed newborns, and children exposed to domestic violence. Services offered through the community pathways such as home visiting are intended to keep these children out of the foster care system by providing supports to the family.

The community pathway is also an important opportunity to focus on DEI, recognizing that Black and Latino children are disproportionately represented in the foster care system in Los Angeles County, and referring them to services through this community pathway could help to mitigate this.

Another example of DEI being incorporated into this work is that we are planning to look across the

County to identify potential gaps in populations being served by home visiting where FFPSA might allow services to expand.

The County has established a number of advisory working groups to determine how best to implement FFPSA. As Diana mentioned, one of these is a cross-agency group laying out the desired implementation process for those three home-visiting evidence-based practices.

This group includes representation from First 5 LA, DPH, DCFS, Probation, LA BBN, home-visiting providers, Children's Data Network, OCP, and others. And I want to note that we are planning to bring in participant voice at a later stage.

I also want to recognize the leadership and partnership of several of you on the call today in this process, Commissioners Byrd, McCroskey, and Aragon, and thank you for bringing your expertise and excellent thinking to this process. It has been super valuable and very much appreciated.

I also want to note that while we have been wonderful providers participating in the group, due to Covid, particularly the recent surge and its impact on home-visiting staff, we've been very conscientious about when and how to solicit feedback from the broader home-visiting provider population. For example, we

recently solicited input from all HFA and PAT programs on draft requirements -- draft contracting -- excuse me -- requirements from DCFS, because the contracting piece is one of our key priorities right now. But on some other pieces, we have decided to wait until home visiting program staff are in a better place.

Speaking of key priorities, some of the other topics this group has identified to address include departmental goals and responsibilities, reimbursement rates for home visiting, braiding grant-based and fee-for-service funding --

FFPSA is a reimbursement-based program, and as Diana mentioned, our funding to home-visiting programs is grant based.

-- understanding data systems and considering alignment or interfaces between those, and communications to and feedback from providers.

It's important to note that while we are moving forward with implementation and planning in LA County on this exciting sustainability opportunity, we are still awaiting final guidance and decisions from the State and the federal government in order to inform, refine, and finalize our plans. We intend to bring more information back to the board later on this year.

And with that I'll pass it on to Tara for

questions and discussions. Thank you.

MS. FICEK: All right. Well, thank you, Anna and Diana. We can now open it up to the discussion. So we have the two questions here we are hoping to hear from you, Commissioners. But I believe I will pass it back to the chair to maybe facilitate or happy to do that as well.

COMMISSIONER PLEITEZ HOWELL: Let's tag team, Tara. I just wanted to point out Commissioner Taylor has his hand up.

COMMISSIONER TAYLOR: I want to thank you both for -- all of you for the hard work you're doing. But I think it's important that we not lose sight of the fact that for some reason we didn't get engagement from the Asian community on Help Me Grow. The fact that we have more people from the African American community and Latinx community that are not engaged in effectively; so we need to elevate that client voice in this process because it will speak to the issue of cultural competency and systems bias.

The bottom line is if the community doesn't trust you, it won't engage you. And so we need to really be clear about that. And you need to also find a way to connect to DCFS family support systems. They have a program, we used to call it Family Preservation Program. And this is another key program that keeps a lot of kids

out of the system. You don't have to detain them, you can have voluntary services for that family that give them the support and training and knowledge they don't have about child well-being. So that's very important. And then it is sustainable whether they're in the system or not in the system; so if people are struggling, they can come back and get help.

So I just wanted to kind of put that out there, because that's a big deal if we're not paying attention to cultural competency and systems bias. The system -- the people won't engage these systems and they'll continue to put it off. So having some kind of client grouping or voice or input around these processes will help you understand why they don't like it, why they're not engaging it, and why they aren't really gaining emphasis from it.

I know you put it off. At least that's what I'm hearing for now, but I think it's very important to go back and pick it up to find out what the possible clients are thinking and feeling about this. Especially communities that already have a difficult time trusting government systems.

Thank you.

COMMISSIONER PLEITEZ HOWELL: Thank you, Commissioner.

Diana did you want to respond?

COMMISSIONER TILTON: Yes. Thank you. I --

COMMISSIONER PLEITEZ HOWELL: Commissioner Tilton, I think Diana wanted to respond to --

COMMISSIONER TILTON: I'm sorry. That's the problem with our names. They're so similar.

COMMISSIONER PLEITEZ HOWELL: I think it was my fault. I mispronounced it, Commissioner Tilton.

MS. CAREAGA: It is a very good name.

I think, Commissioner Taylor, those are so important. And I think you're hitting on a need that really has been elevated nationally with home visiting which is where is the parent or client voice in informing all of this. And as part of the -- The Home Visitation Consortium in undergoing a strategic plan and kind of getting input from all its providers. There's over 60 organizations representing the home-visiting agencies. And this has come be up as a critical area that needs to be incorporated moving forward. Where is the family and participant voice and the racial equity?

So I think there's definite acknowledgement that this is an area to be worked on and developed. We're looking forward to learning more from these solicitations being released about more effective messaging and outreach and how we can better engage this under-representation or

access to home-visiting services.

And I think having said that, you mentioned some comments about how supporting families in DCFS -- and I don't know if Anna has any comments about that for the community referral pathway under FFPSA, but the exciting part of that is this is for families who may be at risk but are not even in the system yet. How do we get them to the supports and services they need? So I think there's a lot of great opportunities to continue to explore.

COMMISSIONER TAYLOR: Thank you for that, Diana. My thing is that we should know about those services so that if they don't want to engage us, they can engage those services. Some of them don't require you to be a part of the system. You get it, you can actually ask for that, and get it as help whether -- you know, whether you're in the system or not. Because of the -- one element of that family support does not require you to be a part of the system to get that help, and it's not as intense as being in the system.

It is actually an after-care support system that anyone can get -- and walk up and get is hardly known by the general public because it's not advertised. But it exists and we should know about it just in case they want to do that.

The other issue gets back -- and this is more for

Tara about Help Me Grow. This same voice needs to be brought up in Help Me Grow because it's an issue for many cultures -- is not engaging and understanding what we're trying to do, because we're not hearing their cultural perspective as well as why they are hesitant and what is the reasoning for that hesitancy so that we can get them to be on board. Some kind of like a mentor or parent-mentor program or something that cuts across all of these services so that if you come across it as a new person, they can see when someone looks like them, been there, done that, and can understand where they're coming from so that they can engage them in the services they need, they may be resisting.

So I'm just -- I just want to make sure that we have that in that process somewhere.

COMMISSIONER PLEITEZ HOWELL: And speaking of process, what we'll do is as Commissioners address, we'll turn it over to staff so that you all can respond so you don't have to raise your hand. So it looks like we have some responses. Some by staff. And then we'll turn it to Commissioner Tilton.

I think, Anna, you had your hand raised first?

MS. POTERE: Thank you.

Yes, Commissioner Taylor, you make a really good point. And one thing I did not address in my talking

points is that the community pathway will involve a variety of services. Home visiting is one example. It will also involve creating referral pathways through the healthcare system, through the school system, through the prevention and after-care networks, and those are all things that we are -- that this same advisory group is planning to think through. We've started with home visiting, and we actually hope that the work that we're doing around implementing the home visiting EVPs will also be applicable to some of those others.

So I just wanted to add that since I did not address it in my Power Point.

COMMISSIONER TAYLOR: Thank you, Anna.

MS. FICEK: I was also going to add thank you Commissioner Taylor -- agreed, that we're interested in what's going on, what contributed to the lack of response from select communities, and also understanding, you know, within select racial groups, why is there under-representation, lack of trust with early identification or the systems that support that work. And we have, as part of Help Me Grow, a Community Family Engagement Council, which includes parents who have experience in navigating, have the experience of a child that has been identified with the behavioral developmental delays. And so working to leverage that group for their

expertise and help us figure out how to best engage various populations to better understand what is contributing to the lack of trust and how we can shape our Help Me Grow efforts to be responsive to that.

COMMISSIONER TAYLOR: That's great. Thank you, Tara.

COMMISSIONER PLEITEZ HOWELL: John, did you have any comments?

MR. WAGNER: No. Tara mentioned what I was just going to call out; so thank you very much.

COMMISSIONER PLEITEZ HOWELL: Thank you.

Commissioner Tilton.

COMMISSIONER TILTON: Thank you.

First of all, thank you for the presentation. That's a lot of information. And it is even difficult for me to absorb it all, even though this is a key interest of mine.

But for the general public, I think we need to continue to share information about the importance of home visiting and how it can be accessed. And I want to thank John in particular, as well as Diana and Tara and the First 5 staff, for meeting with us because risk, of course, was the issue that I brought up at the last meeting where home visiting was discussed. And we made a connection with our hospital network people to First 5.

I just want to emphasize that there's no better place to not only identify risk but also make a difference, and I think engage willing participants in home visitation than in hospitals when the baby is born.

There are -- there's much documentation and we have video that shows the difference between a mother and father who are happy about the birth of the child, who are nervous about it, who are scared, who may or may not have a place to go. Maybe they're homeless. Maybe there's antipathy or violence between the parents. There's so much you can pick up at birth. And that's why I'm so excited about connecting our hospital network to the home-visiting effort.

The whole issue of trust -- I did want to comment on that. It is sadly ironic that the very population that's over-represented in the child welfare systems is the very population that's under-represented with home visitation. And that's a very tragic reality. And it does come down to trust.

And, in fact, if you don't trust the system -- the child welfare system, you're likely to carry over that lack of trust in accepting help from home visitors, because often the system is not well defined. So I'm really pleased with the whole -- with the concept of the community pathway where we identify these at-risk families

at a point before they -- they need to enter the child protection system.

And then emphasize, we need to identify those children whose lives are at stake. And we don't want to deny them the attention they need. And then review those cases of the children who do not survive.

I -- I, of course, say this a lot, but I need to emphasize, most children who are killed by a parent or caretaker are under one year of age. 75 percent under three years of age. So this -- this is so important in terms of identifying them. I emphasize the connection at the earliest possible time; hopefully, when they're born in the hospital. And -- and, hopefully, we can expand home visitation to the point where we can make it more universal.

Because if, in fact -- I'm sorry about that. If, in fact, home visiting means that we think that you might be a danger to your child, we're going to have resistance. There's not going to be trust. If home visitation is something everyone receives -- my neighbor was a home visiting nurse in England where they visit every newborn child. And they didn't -- I mean, the response was varied, but there was no question whether or not somebody was coming up to visit you.

So I -- I'm hoping we can move towards a

voluntary neonatal home visitation.

And thank you, John and staff, and we look forward to continuing our connection with you and expanding home visitation to assure that we do -- we do provide home visiting to all newborns and all children at risk. Right now, we're seeing a very few of those percentage-wise; so -- so thank you and we look forward to moving ahead with the expansion. So thanks.

COMMISSIONER PLEITEZ HOWELL: Before the next commissioner, are there any responses?

MS. CAREAGA: I would just say, Commissioner Tilton, very much agree that it's important to address the stigma of home visiting and it should be more of a universal for everyone, regardless of the risk. It's an important connection. And we're happy to be taking some of this exploration with you.

COMMISSIONER PLEITEZ HOWELL: Thank you.

Commissioner McCroskey.

COMMISSIONER McCROSKEY: First, I want to say I'm just so excited about this approach that the Center is taking now of really purposefully crosswalking the multiple priorities and the streams of work. And I think it's perfectly reflected in the questions and comments we're hearing today about some of the same issues are underlying -- right? -- whether your strategy -- your

primary strategy focuses on Help Me Grow or it's home visiting or child abuse prevention, some of the underlying questions are the same. So it's just a great discussion that gets us to recognize that and try to learn from each other.

And very much thank Commissioner Taylor for leading us with the question of trust because that's one of the things that definitely cuts across. If an individual parent or family has a good reason for wanting to go where they want to go for the information they're going to rely on, then we have to infuse that information and -- as well as making the services as responsive as possible.

It's the question of but how do people really get connected to these things? They get connected to them because a neighbor, a friend, somebody says this is something you should look into.

So at the same time we're trying to do the systems alignment work, which is incredibly important, the -- the -- this whole question of trust and where does your information come from and how do we engage people in -- in ways that are useful to them obviously is incredibly important.

And just one piece on that, one point I want to make about that -- about this: This opportunity that

California is giving us to establish a community pathway I think is really important and it's a big breakthrough.

And the vision for what we're hoping for is just what people have said before me, that your point of connection would be your point of connection to these services. In other words, just because we have schools who are engaged in this conversation, for example -- I'm particularly interested in connecting with the community schools -- that's where the family would get the connection. They don't have to go through DCFS. They don't have to be referred to DCFS -- a specific program. So if it's a community school or hospital or if it's a childcare program or if it's something else, that's where people could make these connections. And that will be, I think, a big breakthrough and really, really interesting for us to continue to monitor and -- and understand.

But mainly, thank you, guys, and your staff for all the work I know you're doing behind the scenes for all this.

COMMISSIONER PLEITEZ HOWELL: Responses?

MR. WAGNER: Just appreciate the reflections. And I think the comment about how we continue to build on those trusted relationships at the same time we're approaching the critical systems change at the higher level, I think is a good way of thinking of it. Because

First 5 LA has been committed to both and recognizes the importance of both; so how best to pursue both is really kind of magic sauce of a lot of this. So thank you for highlighting that.

COMMISSIONER PLEITEZ HOWELL: All right. And lastly we have Commissioner Heger.

COMMISSIONER HEGER: There we go. Finally, I appreciate all of that, I really do. And I am going to, again, make this appeal to everyone. I -- I don't think we're going to have a dramatic impact on how we deal with ethnic minorities and DCFS and child abuse and neglect, et cetera, until we all embrace the idea of correct diagnosis of the family dynamic. That includes a family's input, et cetera. And I'm all for that early intervention, et cetera.

And it has to include looking at fetal alcohol spectrum disorder. I've brought this up, now, for two and a half years. I really would like to see First 5 take that on as a major issue impacting children's readiness to go to school, but also their preventing them from being part of the foster care system, which is not a good system for kids. We have not done that. And I'm going to, again, try to -- to push that forward.

Sadly, and it's not in any way a racial comment or anything, but the African American family, because of

the circumstances that they live in and their isolation are over-represented in the FASD world. And until we recognize that and state that openly, we cannot address it as a core cause of much of the disadvantage that we tend to see them in.

We can't stop detaining African American or Hispanic or other minority kids just because we want the statistics to go down. We have to stop detaining them because we have, in fact, implemented a family support system and resources that makes it safe for them to remain at home. It's easy to change your data by just stopping the detaining of kids, but have you have to detain them appropriately, which means they have to have a diagnosis.

Finally, I would recommend again and again and again that we train our home visitors and -- and our schools and teachers and those involved with children to -- to entertain the diagnosis of FASD in the kids that have the most adverse behavioral problems, that enter the system and are dramatically represented in those children that we're seeing that are failing to remain in placements and placement's failing them.

And I think the hope in all of this -- FASD has always been seen as a hopeless diagnosis. We're working as hard as we can to implement interventions and treatments that will, in fact, keep the child in home and

make them less likely to enter the foster care or the justice system.

I don't think -- if First 5 can't do this or doesn't even investigate doing this, I'm -- I'm -- I would be very disappointed.

I'm done.

COMMISSIONER PLEITEZ HOWELL: Any thoughts on Commissioner Heger? Anything to add from staff?

MR. WAGNER: Maybe I'll jump into that a little bit and if anyone else wants to add anything they -- they can follow up.

But a couple thoughts. One is, you know, there is an interest in working with our policy advocates through our policy advocacy fund to dig into this a little bit more. And I think that one of the things you're raising is whether it be EE -- EII or home visiting, what are some of the root causes that are bringing folks into these systems and how are those systems equipped in dealing with those root causes. So we know there's a variety of reasons why children may be manifesting developmental delays with FASD and the specific contributions it can play in behavioral developmental issues, you know, later on. And looking at how are the systems looking at those root causes and dealing, making sure the services are aligned to what those root causes

are calling out or manifesting themselves.

You know, I cannot answer that directly today. But I think that is definitely the direction that we are trying to move these systems, getting FFPSA -- the Families First Prevention Services Act -- and DCFS working together to at least include more of the home-visiting models. And then as we bring families into these systems, working with those systems to identify root causes, again, whether it be home visiting, whether it be EII, I think is definitely a work ahead of us, and I think is aligned to what you're raising, Commissioner. And we don't have it all figured out right now. But it is -- it's moving in that direction -- our interest is moving in that direction.

COMMISSIONER PLEITEZ HOWELL: Thank you, John, for that.

Seeing no other comments at all, I'll just add two really short notes to that.

MS. BELSHE: Karla? I'm sorry. Commissioner Taylor had his hand up again.

COMMISSIONER PLEITEZ HOWELL: Thank you. I did not see that.

MS. BELSHE: Sorry to interrupt.

COMMISSIONER PLEITEZ HOWELL: Commissioner Taylor, go ahead.

COMMISSIONER TAYLOR: Yeah. I want to throw out that the bottom line for most of these communities is abject poverty. They live in poverty and they never get the resources or the understanding of what they don't know and how to educate them about parenting, all these other things which are not taught in school, which are never taught to them, and they don't know the rules, they don't know the understanding of what's going on; so we have to educate the community.

Second, we have to make sure that those treatments are effective. Like, for the African American community, EMDR is the most effective treatment for trauma because of the community, because of the culture, it's more to where they use the eyes and things of that nature. And for that community, this is more effective than other treatments of trauma.

But do you think the system has come forward and given that and highlighted that and elevated that issue for the African American community? I don't think so, even though I've talked many times to the DMH about it. So the idea is that you have to make sure that the treatment and the services are effective for the culture that you're trying to address.

I just want to put that out there because that's important, and I think what Dr. Heger is saying is key.

And so whatever we can do to pilot, conceptualize the issue she's trying to bring forward would be, even at (unintelligible) just to pilot something to make it relevant would be helpful so that we can have some data to say this works, that doesn't work, and this is what needs to be done.

Just a thought.

COMMISSIONER PLEITEZ HOWELL: Go ahead, Anna. I see your hand.

MS. POTERE: Thank you. And thank you, Commissioner Taylor. These are excellent talking points.

And another piece that I did not mention in my talking points about FFPSA is that parenting skills, which is what the home-visiting EVPs fall under is one category of the services. The other two are mental health and substance use. And there is a federal clearinghouse that is accepted -- is evaluating different evidence-based practices, and then kind of rating them on how well supported the evidence base is for them. And there's definitely a priority there around thinking about what works best for different types of populations, and elevating that information to the federal clearinghouse so that those evidence-based practices can hopefully become available and eligible for this funding stream.

So that's work in progress, certainly, but I just

want to say I hear you on that and I wanted to provide that information.

COMMISSIONER TAYLOR: Thank you, Anna.

COMMISSIONER PLEITEZ HOWELL: And now I don't see hands raised, Ms. Belshe.

So quick comment on the insight as you all talked -- I think for me, it gets really important to recognize the assets that exist in these communities. I -- I've had the privilege to do work in South LA and East Los Angeles. And often in our data there will be a story of all the odds against individuals in these areas.

But when in community, I've seen every single individual in those communities step up and offer proactive solutions. So when I hear the discussion on trust, I think about three things that are part of trust. One, if we find for individuals is the system reliable; two, is it being really sincere. Whatever the system is offering, is it authentically doing what it says it will do at all levels. And then three, the competency of the system to do what it actually is saying it wants to do.

So when we think about trust, it's not like this big terminology, but really thinking about what pieces is the community really -- might not be connecting when we're offering some of this. And I think what John mentioned in terms of the root cause -- it gives us a lot of that. And

those answers come from the community that has the assets.

So I will share as a parent, if I'm offered a parenting class, I assess everything else on my plate and I know I need parenting skills, but it might not be the priority on my list because there's other things that I'm focused on. And I think giving our communities that similar sort of request, respect in having these conversations will help us assess those components.

And then the last part I'll add about trust: I also think about are we trying to generate trust, are we trying to maintain trust, are we trying to repair trust. And often there might be a repair component with other folks we might be working with. But depending on the piece that we think is -- might not be giving us the input, it will require different strategies. So I just wanted to make sure that when we talk about trust in this work in particular, that there is an unpacking of what it means for our communities, especially during the times we're living in.

So with that, I know we are at 2:40. Team, do you all want to take a break now? Or John did you want to keep going to the next agenda item?

MR. WAGNER: I suggest, if you're okay with it, we take a break and then -- a brief break, and then go into the second panel.

COMMISSIONER PLEITEZ HOWELL: Okay. Perfect. You think five minutes? Ten minutes?

MR. WAGNER: Five minutes would be good. We're just a few minutes over. So this will get us back on schedule.

COMMISSIONER PLEITEZ HOWELL: Okay. Terrific.

So, folks, if we could come back at 2:47. Thank you.

(A brief break.)

COMMISSIONER PLEITEZ HOWELL: Welcome back. We're at 2:47.

And we'll pass it on to John.

MR. WAGNER: Thanks again, Commissioner. And we -- the next panel -- the theme is to focus on how we are aligning the systems, many of which we just talked about in the community priorities.

So with that, I'll turn it over to our second panel, starting with Lee.

MS. WERBEL: Good afternoon, Commissioners, staff, and guests. Becca, Reid, and I are happy to be here with you for our second panel organized around our overarching theme, (unintelligible), First 5 LA community priorities and county partners.

And before we begin talking about the community priorities themselves, I just want to share a little

context that helps me with this theme. And that is going back to your strategic plan and one of the strategic priorities -- advancing and building our community experience, which is about connecting, maximizing, and coordinating public resources and relationships and local access, and those relationships within the 14 Best Start geographies.

This is critical now as we look to align systems to community priorities and First 5 LA priorities to effect system (unintelligible) as we support and walk alongside community to align and promote community results.

So when we look at the next slide, the two priorities that we'll be talking about for communities are uplifting community voice and priorities and connecting to First 5 LA priorities, and strengthening the Best Start networks infrastructure and connecting regional network grantees and family partners. Communities are continually clarifying and refining regional community priorities to achieve results.

You can check the current list of priorities outlined in the attachment in your board packet today.

Lifting community voice and priorities has been and is a huge part of the First 5 LA investment. Communities are clear in getting -- always getting clearer

and clearer about the priorities they understand the priorities, and many of these priorities are, in many cases, in response to the Covid pandemic.

And what we're sharing today builds also on those in-depth Best Start regional presentations last spring with the board, where the regional teams and regional grantees shared their approaches.

So the priorities about positioning -- this priority, excuse me, is about positioning parents and residents to shape and lead networks dedicated to systems change and results to children and families in the regions.

And so, finally, I'd like to lift up a couple of examples. In Region 1 (unintelligible) regional network guarantee guided and supported a community process in response to the impact of the Covid pandemic and the perceived failure -- or at least way to slow and little of a systemic response by local government institutions.

Region 1 established a network of distribution hubs across the four Region 1 communities to respond to the most urgent needs. As a result, the Best Start Region 1 Driving Equity and Justice Community Bill of Rights was created in partnership with hundreds of residents and organizational partners and serves as a long-term advocacy and policy agenda which focuses on these ten community

priorities listed in the attachment.

Region 1 shared the Bill of Human Rights in a community-led town hall meeting last spring where they were joined by more than 500 community residents, community-based organizations, elected officials, and philanthropic leaders. This town hall (unintelligible) in partnership with the institutions responsible for creating current systemic conditions, and paved the way for avenues of communication between communities, advocacy campaigns, and policy makers, organizing the roadmap towards shared goals.

In Region 2, Community Health Councils, the regional network grantee created Staff LA Decides. This community-based grant-making initiative, based on the participatory budgeting process, builds on the successful work that each Best Start community in Region 2 has achieved. And this was designed to ensure that residents participate in all parts of the decision-making process.

$1.5 million was awarded through this process and more than 550 community members participated in the voting process to inform those regional and local issues to focus on. I just wanted to name the three top priorities that emerged were employment and fair wages, early childhood education, and food and security.

So what is our role and what are we doing? Our

role right now is First 5 LA and the Communities Team is to -- and the Center Team -- center itself is to intentionally connect and align our work with community priorities, with First 5 LA priorities, and County system priorities.

We're doing this in a couple of ways. We're actually mapping community priorities to our own First 5 LA priorities, and the CCFI -- or Center for Child and Family Impact -- priorities across regional teams and across the CCFI teams and priority areas. So this mapping is an important first step. We're also looking at ways of integrating the work across the CCFI teams.

More explicit integration and alignment of our work across the organization is needed to move the work forward. So you might ask, as some of us do, on whose ears do these voices and priorities fall? And that moves me to the second priority of strengthening the Best Start networks infrastructures and connecting regional network grantees with County partners.

The examples I mentioned before and the work throughout the regions are about strengthening the networks between organizations and people to influence systems in ways that reduce barriers to services and resources, including barriers that differentially impact certain demographic groups.

This is about residents, parents, community members, community-based organizations, built-environment advocates, funders, and other stakeholders coming together to coalesce around a community priority and together commit to effecting change or achieving results.

So I just want to give a couple examples of growing networks. In Region 3, Alliance United is a regional collaborative of organizations, residents, community members, and other stakeholders convened by the RNG (unintelligible) family services to develop a collective vision and streamline a process to identify and address issues that effect children and families in the region.

And in Region 5, the Antelope Valley Resource Infusion is a collaborative effort to improve the community safety net and maximize child and family well-being in the Antelope Valley.

The AVRI steering committee partners include The Children's Partners -- which is our regional network grantee -- Antelope Valley Partners for Health, DMH, DCFS, The Center for Strategic Partnership, First 5 LA, and six community members from throughout the region. Together, this coalition of residents, organizations, and community stakeholders are developing and will lead the implementation of strategies to strengthen that well-being

and safety for children in the Antelope Valley.

So these and growing -- other growing networks are important. But we also, First 5 LA, are making sure we're taking -- availing ourselves of the opportunities to connect with other existing networks in the system and bringing forward that P to 5 -- prenatal to age five -- perspective. So we are sitting at tables. We are taking our role as a connector seriously and supporting strengthening the Best Start network's infrastructure.

A couple of examples include staff has been working with LA Metro to address immediate mobility issues for families with young children such as delivering food and supplies. And definitely this is in response to Covid -- really escalated. And we are also an active member of The SELA Collaborative which is a network of organizations gathered to bring resources into the Southeast LA area to build a robust infrastructure of local nonprofits. And we currently have a leadership role on LA Funders Collaborative, which is a network of LA-based funders focused on improving building conditions.

Strengthening the networks in the regions and across the regions is critical. Again, groups, individuals, and residents, organizations, and other representatives coming together to coalesce on community priorities and needs and committing to work together to

make change -- changes and achieve results for families in the region is one of the "hows" that community voice and priorities will be lifted in real life.

So more and more now we are needing to -- are connecting with and aligning with County partners and priority -- and County systems partners, and so I am going to turn it over to Reid to talk about that.

MR. MEADOWS: Thank you so much. And, again, Reid Meadows with the Center Support Team.

And I'll just discuss how we're connecting some of these community priorities, broader, County-wide initiatives. And I think two areas where this is really exemplified. One is around prevention. Specifically preventing involvement in the child welfare system. And the other is around economic security, which emerged as a priority in South LA and the port cities Best Start regions.

So just starting with prevention and working with some system partners, including DCFS, DMH, Office of Child Protection, and others to integrate those Best Start voices into some initiatives aimed at transforming the child welfare system. And of course we mentioned the Antelope Valley Resource Infusion project, and I think it's just worth emphasizing again how government and community both aligned with the collective vision that

centered on family and child well being. And the effort took some time, but that time and effort has also built a sustainable infrastructure that places residents in positions of real power. And together, they've been able to inform the expansion of prevention services in the region. Our regional network grantee, Healthier Children's Bureau will soon be opening their Community Family Resource Center, centralizing County and community services under one roof. And that's really been guided by what we've learned from that AV Resource Infusion project.

And similarly, there's a County-wide initiative called Thriving Families, Safer Children which aims to learn from lived experience and cocreate a better system in partnership with communities. This is part of a federal technical assistance grant that LA County was selected for. And it's really been based on the infrastructure that we've build around prevention in the County.

Currently, the group is actually conducting nearly 50 visiting sessions across the County and Best Start partners and key stakeholders are taking part. And, of course, both these efforts offer really important insights that are critical for FFPSA implementation, which Anna was speaking to earlier. In short, it's about making sure that the prevention services that we expand through

the law better reflect the needs of families with young children.

And the second community priority I'll highlight is around economic stability. And this is a nascent area of work for us. But, you know, the pandemic really brought this issue to the forefront and it emerged as a major theme in many Best Start communities that have been struggling with the high cost of living in LA County. So we're actually partnering to help implement the County's guaranteed income pilot, which will give a thousand dollars per month to a thousand residents over three years. The South LA community actually elevated this idea early on in the pandemic, and now federal funding to local government is making it a reality. And specifically, we're joining several for-profit partners in supporting the program infrastructure and communications for the pilot. Guaranteed income is really about trusting people to make the best financial decisions for themselves and their families. And the community indications for this pilot can focus on changing long-held narratives in this country around poverty. And, of course, the stories and research that we gather from this pilot can also inform our state advocacy efforts.

And then we're also capitalizing on the recent federal child tax credit and California's young child tax

credit for families with children under six. This has opened critical economic relief to millions of families during the pandemic, and working as part of the County task force to maximize claiming and connecting efforts of sharing those resources throughout the Best Start communities as well.

And then finally, a big part of our work is just staying aware of what's happening across the County and making sure we're leveraging the best opportunities to generate investments in children and families. And we do this through membership in a number of County and federal collaboratives. But recently, I would say that the Center Support Team has been honing in on developing closer partnerships with the strategic initiatives in the County's Chief Executive Office. So this includes the Poverty Alleviation Initiative, the New Anti-racism Diversity and Inclusion initiative there. And, of course, the Center for Strategic Partnerships, which has been a long partner of ours, which helps us build those joint initiatives between both County and philanthropy.

And it's been this close engagement that provides us with really special insight into major County-wide investments. And one I'll highlight is the American Rescue Plan which represents, perhaps, the largest single infusion of public dollars into our communities.

The first allocation includes supplemental funding for home visiting and the ECE Team Works closely with the Board offices to secure important recovery grants for childcare providers. And now, the County is transitioning to begin rolling out that funding. Our Communities Team has offered really invaluable insight to ensure, one, that those dollars reach the communities and populations that need them most; and, two, lifting up the importance of contracting and compliance so a greater diversity of organizations have access to the funding and can focus on serving LA County families.

This input actually led to a philanthropic initiative to provide County-based or community-based organizations while vastly strengthening compliance support that will help mitigate the administrative burdens that often accompany public contracting.

And second installment of the AARP funding, about 975 million, will be coming later on this year, which will, of course, bring more investment opportunities for children and families in LA County.

So I'll hand it over to Becca who can expand further on our work in the ECE realm.

MS. PATTON: Thanks, Lee and Reid. I'm going to talk through some of the current work within ECE highlighting some recent changes and alignment to the work

of my colleagues.

So as the board knows both from this and previous presentations, First 5 LA has taken a deeper look and commitment to our organizational-wide value of diversity, equity, and inclusion. So this commitment is part of the reason for ECE's new strategy around home-based child care which the board heard about essentially last summer. However, DEI is also embedded in the other priorities of the ECE team; so both in our response to Covid and our work on the rollout of universal preschool.

So within our response to Covid, we, along with our partners, have focused on those communities most impacted; so those communities with high transmission rates and low vaccination rates. So this has changed our decisions around outreach, supply distribution, location of vaccine clinics, and our input, as Reid said, into the rollout of the County's American (unintelligible) rescue plan dollars.

So our response overall has centered on one objective: Ensuring the health and safety of children and childcare providers. We are also centering DEI in our work around the rollout of universal preschool. So the prospect of increasing access to four year olds is exciting. And we are working with others to ensure this increased access does not impact the current supply of

infant and toddler care, which would further exacerbate the crisis of access for families with infants and toddlers. We are just starting to embark on this work, and we're starting with key informant interviews by ECE and K through 12 partners, identify challenges, opportunities, and points of agreement and alignment, with the expansion of preschool.

So next I want to highlight how ECE priorities are reflected in and advancing community-led efforts. So with this new strategic plan, we identified the need to reshape our kindergarten readiness assessment strategy, and we're using this opportunity to see what connection, if any, there is to the work within communities. So as the commission will recall, First 5 LA began its KRA journey in 2017. Since then, we've worked with 12 different school districts and community partners to collect and share population-level data.

Historically, the strategy has focused mainly on data collection and subsequent utilization of the data has only been within the K through 12 system, used mostly to support children who are actually over the age of five. We decided that this strategy is only worth of our investment if we both collect and then utilize the data at the community-systems level, focusing on our target population of children zero to five.

So the ECE Team is working closely with the Communities Team and the regional network grantees to identify if and how our KRA data can support community-identified minorities.

Through the process so far, we've identified the following: One, in most communities, as I said, the strategy has been led by the school district. While districts have used the data to support school-level planning, teacher alignment, and parent engagement, the larger community has mostly been left out of data utilization. And if we were to actualize the strategy, we need to assess if we can engage more partners, especially our community-based partners to better share and utilize the data not in school.

We've also been sharing available data. We're having strategy conversations with health systems and ODFA to assess the extent to which KRA data supports our strategies as well.

Second, to support the strategy refinement, we've explored connections to our community partners and working closely with UCLA as our technical assistance partner and the Best Start Regional Network Grantees to identify if the data is needed or wanted and if there are effective ways we can share and utilize it.

Through this exploration, we've identified the

following: In Region 2, Community's Health Councils is interested in using KRA data to support their work in the California reparations task force, linking reparative justice and early childhood well-being. Community Health Councils is also meet regularly with UCLA to discuss how they will share available data with their community member delegates.

And in Region 4, the Long Beach Health Department, School District, and the regional network grantee are meeting to collaborate on how they were will use KRA data to support local planning efforts.

Covid, as you can imagine, has also impacted our implementation of this strategy. 2020 was anticipated to be a data collection year; however, with the emergence of the Covid-19 pandemic and the disruptions that came with it, only one district was able to collect. So this year, all districts are on track to collect the data or have already done so. However, the recent omicron surge has caused some districts to delay data collection due to staff shortages and limited capacities. But all districts still anticipate they will complete their collection by the end of the fiscal year.

So overall, as we've done this strategy refinement process and this exploration, has raised questions around both KRA's impact and costs. And as we

continue this exploration, they'll be answering the following questions: Does the strategy advance community-identified priorities and does that priority align to the First 5 LA intended outcome, either results for children and families or long-term system outcomes?

And finally, KRA's currently the largest cost driver within the ECE budget. Since we continue to strive to operate within our fiscal constraints, what is the ultimate cost of this strategy and what impact does that cost have in our ability to pursue other strategies.

So we will inform the Commission and solicit feedback as we continue to find answers to these questions.

So in addition to KRA, we are also working closely with our partners in communities as we begin to build out our provider advisory group for home-based childcare strategy that the commission has heard about previously. So we're utilizing their input and expertise in the community as we design this advisory group, and we'll provide the commission with more information as we build out the advisory group.

So with that, we're going to actually take questions around the panel; so we can go to the next slide. So after questions, I will hand it over to Kim Hall. But before that, we have some questions for the

board.

So as you heard from the three of us, what reflections or insights do you have and what potential areas of connections can you identify between the work in the communities, ECE, and the County?

So I'll hand it back to the chair.

COMMISSIONER PLEITEZ HOWELL: Thank you, Becca. And we see Commissioner Woods.

COMMISSIONER WOODS: Thank you, Madam Chair, and good afternoon everyone, board members, community. And Ms. Becca, thank you for this report.

Two things come to mind. And the first is around KRA. And I agree with you, most of the data is reflected on the age group that is not within our continuum. But I would be interested in knowing, because of the preschool development dollars that are coming out of the State and going into our Quality Start area. Maybe we could tie in some of that work that we're doing with transitions. As we're working with providers in the County around a system of transition from early learning to kindergarten, we can go back and measure those kids that have exposure to early learning in the school districts. So that's one.

And then the other one is around the universal preschool. And I think this is a very promising area. It's an exciting area to know that we are broadening the

number of children we're actually bringing in to the structured learning environment around ECE and preparing them for kindergarten.

Then there's also a lot of concerns, as you're aware, coming from the community around LEA's implementing transitional kindergarten. LACOE will be sending out a survey this week to all LEA's around their plan, around the State, planning guides that they have to do. And maybe we can partner in getting questions together and approaching the districts together, because the way that we are supporting LACOE is around this continuum of five and (unintelligible) only being one player in that field, not the only player, so that we can continue to support our community-based programs or early -- other early subsidized programs and build upon our infant/toddler program.

So just putting myself out there so that we can partner. And together, First 5 and LACOE Office of Advancement can pull this to the middle so that we are building capacity and not eliminating. Thank you.

MS. PATTON: Yeah, thank you. I mean, yeah. You're exactly right. And I think sort of with our key informant interviews, it's going to provide information so that -- and your role at LACOE, sort of the role you're playing, and sort of figuring out what makes the sense --

most sense for the role for First 5 LA to play to come in as a support role to LACOE as you all sort of help shape the County-wide plan.

COMMISSIONER PLEITEZ HOWELL: Thank you, Commissioner.

And next I see Commissioner McCroskey.

COMMISSIONER McCROSKEY: On the same point, the same two-year report, Becca, I was taken back a really long time ago to the first time I was on this commission, the first ten years. I can't tell you how many hours we spent in discussion of measuring kindergarten readiness. And I think the major thing we understood at that point in time was there's no perfect way to do it. And the way you do it depends on the use of the data.

And at that time, I think across First 5's, people were thinking more about kindergarten readiness was the key outcome of First 5's overall efforts. And that's what seemed so urgent. But then when you went to apply the same data measurements, strategy across all counties, you realized it just didn't work that way. And it didn't work effectively. And I won't bore everybody with all the technical stuff. But it's really, really hard.

So I just appreciate how difficult it is and really appreciate your focus on what are we -- what's the best use case for this data, because you've got to match

your method to your use case. And I certainly also very much support Keesha's ideas about there's use case for community, but there's also use case for our partner systems.

And so this conversation seems like it's quite -- you know, it's moving along and it's promising, which makes me happy. Because revisiting, like, 2001 and '2 about this data stuff was like, oh. But we're much further along now. It's good.

MS. PATTON: Yeah. Yeah. Definitely promising. I think the farther we get into these questions we answer, the more questions arise. But that's fine, and we're sort of willing to go on that journey, making sure we're sort of really diving deep and making sure we're answering the right questions so that we can have a refined strategy that is meeting our intended outcomes.

COMMISSIONER PLEITEZ HOWELL: Thank you, Becca.

Commissioner Taylor.

COMMISSIONER TAYLOR: Yes. I have questions for Lee, Reid, and Becca.

So my first question for Lee is how many community -- how does the community respond to the regional network's efforts? Are they responding positively? Do they feel something is happening or not?

MS. WERBEL: I would say that's a growing case,

Commissioner Taylor, as more and more regions are involving community and processes. Like I mentioned, two of them with Region 1 and the Bill of Human Rights and moving that work forward, and Region 2 the South LA (unintelligible), and Region 4 also implemented a participatory budgeting process. So as more and more community is involved, it's feeling like it's more and more responsive. So for the most part, I would say yes.

COMMISSIONER TAYLOR: Okay. So the community feels like something is happening and that they are vested in it?

MS. WERBEL: Yes?

COMMISSIONER TAYLOR: Okay.

MS. WERBEL: Yes.

COMMISSIONER TAYLOR: My second question for you, Lee, I'd like to see that mapping if we get a chance, because that sounds interesting.

MS. WERBEL: Okay.

COMMISSIONER TAYLOR: I'd like to see what that looks like and what it has as data.

Next, I'd like to talk to Reid.

Reid, how many families really know how to access the services and funding that you presented?

MR. MEADOWS: Are you referring to the American Rescue Plan funding? Or are you referring to the

guaranteed income?

COMMISSIONER TAYLOR: Everything. Because the most -- most of the problem for underserved and unserved communities: They don't know. So what are -- what are we doing to get them to know how to access these things?

MR. MEADOWS: You bring up a really good point. So around guaranteed income, actually -- and the County recognized this early on, that a lot of times it's the folks that have the best resources that often apply for these programs. So what they've done is they're doing, actually, small grants to about 30 different community-based organizations, focused specifically on communities and populations that are underserved. They're doing just small grants to help with outreach, to open up their doors so that folks can actually come in, use their computers, and apply for the guaranteed income program, fill out the application there. So that's a very conscientious effort to make sure that community-based organizations -- the ones that are working with those folks are actually connected to the effort and are receiving funding to support their outreach.

And then with the American Rescue Plan, you know, one of the things that I was talking about is this compliance and support effort. And one of the things that this philanthropic effort will try to focus on is trying

to open up the American Rescue Plan dollars to a greater diversity of organizations. In the past, I think, you know, the largest organizations are the ones that are most equipped to apply and receive that funding. And with the American Rescue Plan, they've really tried to bring in some smaller organizations that have trusted relationships in the communities. And, you know, this compliance and support effort will really try to help them on the back end to make sure that they're meeting all the federal funding requirements. They can focus on serving LA County families most. And they don't have to worry about, you know, audits later down the line or something like that.

So in both those cases, they've really tried to spread the funding around to a greater diversity of organizations and ensure that they're reaching populations that often are left out in these types of things. But you bring up a really good point.

COMMISSIONER TAYLOR: Because my issue is that these organizations, they're messaging to the community so they know that this is available in the type of messaging that is culturally relevant. So for our immigrant population, they think if they ask for this -- and they don't even know they're qualified to get it -- without any concern for whether they're a citizen or not, they don't apply, yet they're struggling with poverty. So the end

result is that that creates that chaos in that community.

So the messaging has to be key with these individuals; so advocate for that when you're talking to them about how we culturally, relevantly, you know, outreach to the communities so they will understand. And understand the issue of trust that says people won't ask for the money even though they are supposed to get it because of the trust issue.

So it's that kind of cultural relevance that we need to make sure that these entities who don't always think about this, understand these dynamics. And that goes for any immigrant or underserved community. So I just want to make sure that we're advocating around that issue of communications so that they know they can come in and not be afraid. You know what I'm saying?

MR. MEADOWS: Yes. Appreciate that.

COMMISSIONER TAYLOR: By the way, I think all of your presentations are good. I'm just asking questions that I want to kind of focus on. So just thank you so much, Reid. I think you're doing good work. And Lee you're excellent as usual.

So let me talk to Becca now.

Becca?

MS. PATTON: Hello.

COMMISSIONER TAYLOR: How are you doing? We have

not talked in a long time. I'm going to be quick. I hope you're being safe and well.

But my question gets to be about we know that not all the families, especially underserved populations, are going to go to preK because of their community dynamics. The issue gets to be, they can't access this great idea because it will not address their needs. The big need is about how do I send my son -- son or daughter to a school that only goes from 8:00 to 4:00 or 8:00 to 3:00 or 8:00 to 12:00, and then what do I do when I'm still at work?

So how do you meet those needs? Because not everybody is in a position to go ahead and access that. So this is where the underserved population, based on how this stuff is set up, does not get the benefits of it. And so the end result is the school district is thinking about their needs rather than how the community needs it to be set up. And so I'm very concerned that we keep advocating to make sure that there's something that says okay, you can go to the preschool, but you can go to a childcare group, and that there's a facilitation so that the parent that doesn't have the money working 9:00 to 5:00, so to speak, for little or no money, can have that sent over to the childcare groups that are in the network throughout the County.

So integrating that and helping that process

would be great for the underserved population. I am sure you're thinking about it, you're on target. But it's a question that I have.

MS. PATTON: Yeah. Yeah. We share similar concerns. So I think sort of two pieces here. One, sort of, we have a diversity of needs for our families across LA County; so I think that really sort of tips the scales on the need for it to be a mixed delivery system, that we're not just sort of delivering a preschool program only within the school district setting.

And then the second point -- and you're exactly right -- of how can we connect, sort of, our K through 12 system to our, sort of, childcare provider system. That we make those connections so that families are able to access both in the way that they need. And I think that this is a role where, sort of, LACOE, First 5, LA County Office of Advancement are well position to kind of bring -- bring those sort of two pieces of the same puzzle together in a way that hasn't happened before. It's not going to be easy. This is going to be a tricky nut to crack, but it is something we have our eye on and we're going to be paying attention to as we think about what expansion of preschool looks like for LA County.

COMMISSIONER TAYLOR: Well, while you're looking at the compound of it, that issue of trust is key, even in

this dynamic, because the community has its own fears and their own social dynamic that says is that system for me, or is this not? So winning them over to help them is going to be key.

Thank you.

COMMISSIONER PLEITEZ HOWELL: Thanks, Commissioner Taylor.

And then to the human on the call, Commissioner Abdo.

COMMISSIONER ABDO: Thank you for reading my T-shirt.

So I think all the issues and questions that have come before are really important. And I don't want to -- I don't want to go back over ground that we've already talked about, but I keep thinking about the school districts and the individual schools and how they're going to be able to pivot to do the kinds of early childhood services that families need.

And a huge issue from my perspective is the training for the teachers who are going to be working with younger children than they've ever worked with. And, you know, think about if you are a -- a 5th grade teacher, and all of a sudden you're teaching TK. What -- what do you need to know that you don't already know? And how do you know whether -- how does a school know whether somebody

knows that information or not?

And the -- the issues of after school and, you know, the childcare that goes with TK are huge, that have to do with are there rooms for -- for the children in the schools? Do the children have to go somewhere off campus, and how do they get there? And who is with them while -- during that transition?

And -- and then there's a -- the other huge issue, which is that there's a shortage of childcare workers at -- particularly at zero to five. But then even within school age children, and I -- you know, my -- my point, having been working in a school district and having been in charge of early childhood and before and after school for the years that I was, is that schools are just not ready for what we as a -- as a State are going to be expecting them to do.

And I -- I don't think this is just our State. I think it's -- it's really a -- a shift in how -- in how everyone approaches working with the -- with young children that we just have not seen in an institutional kind of setting, meaning an elementary school.

And, you know, when you think about working with five-year-olds and older, you -- you have a really different way of thinking than if you think about working with three- and four-year-olds or younger. So I just

wanted to put that into the conversation.

I know that you all know all of this and that we've been talking about it for a long time, but I just wonder what you're hearing out there and how the individual schools are going to be able to -- to get what they need to be ready.

MS. PATTON: Yeah. So I didn't mention this in the presentation, but sort of our two priorities in First 5 as we think about the expansion of school is, one, how do we do that? How do we make sure that a preschool experience, no matter the setting, is developmentally appropriate for the child? A lot of that includes how do we get elementary schools ready who traditionally have been just sort of, you know, maybe K through five, K through sixth grade, understanding and ready for children who are three and four to be sort of within their walls. And, you know, we don't have answers for that yet, but that's what we've identified as our two priorities as we think about the expansion of preschool.

COMMISSIONER ABDO: I forgot to mention that the principals of elementary schools think about their community in terms of kindergarten through whatever -- fifth or sixth or -- and in my experience, the -- the younger children are seen as somebody else's responsibility. In my case, it was child development

services. But, you know, it may be anybody, but not their thing. Their thing is the five-year-olds and on, or kindergartens and on.

And so working with individual principals is going to be a big issue. And, you know, we don't bring them all together very often, and so they don't think about themselves as needing training, necessarily; so I just want you to think about that.

COMMISSIONER PLEITEZ HOWELL: I see Commissioner Tilton -- your hand went up and down. I assume it's down?

COMMISSIONER TILTON: No, it's not. Its up.

COMMISSIONER PLEITEZ HOWELL: Its up. Okay.

COMMISSIONER TILTON: I just wanted to remind everyone of -- of the sad reality that the younger the child, the less the teacher is paid. And I'm acutely aware in consulting with Dr. Janet Fish that there currently is no doctorate program for early childhood education. There once was, which is how she achieved hers. But at this point in time, the respect that is given to early childhood education is reflected in the fact that the doctorate programs have been dropped. You can't imagine a college professor that wouldn't be able to achieve a Ph.D., but you can't do that if you're in early childhood education. That's it.

COMMISSIONER PLEITEZ HOWELL: Thank you,

Commissioner.

I have one quick question and a comment.

So, Lee, I absolutely love when you give us updates on Best Start communities. The evolution of this work is really, really tremendous.

And I'm very much struck by the fact that First 5 LA sets goal posts, we meet those goal posts. And I think we are now at a time with the Best Start community that we have to assess the goal post in a way that will prevent potential issues. And what I mean by that, we started as a funder, and that was our role. And we evolved to an agency of system change.

And as we look at what communities are lifting up, I hear very clearly we have plans. There's implementation plans, which is amazing that we've been able to work with our Best Start communities to get there. We have to figure out what our next role is going to be in this sort of system change, convener, catalyst, advocate.

And I heard a little bit of advocate in what you were lifting up, Lee. But I -- I do think we need clarity, because if there is a bunch of plans out there ready for implementation and there isn't the funding to do that, our communities are going to get frustrated and stuck. So we should also explore not being a funder again, but what potential convener role can we play to

bring in funding sources for those communities.

What advocate, convener role can we share some of the knowledge of what we've learned. But I think it is a identity that we're going to have to explore in the upcoming years; so -- and if that's happening, please share with us.

And then Reid, the work that is being done that you're leading and others, gives us County collaboration and is truly, authentically system thinking. And I really want to elevate the importance of that role in County, and First 5 LA constantly bringing up little ones in County discussions.

The idea of thinking of universal basic income and having First 5 LA really be involved in that, that is what we should be doing and reminding folks about families with little ones.

So I'll leave you with a question. In terms of as families get universal basic income, are there any consequences to their childcare payments? Those types of questions being asked by us, and making sure that it's being informed. So no need of response. Just really, really thrilled that we are in that space and lifting up the importance of children with that -- families with five-year-olds and under; so I appreciate it.

And I know we are running short on time, and we

all have been waiting for Kim Hall. So if there are no pauses, Becca, green light to turn it over to Kim?

MS. PATTON: You sure can.

COMMISSIONER PLEITEZ HOWELL: Turning it to you, Becca. Go ahead.

MS. PATTON: Just was going to thank the commission for their input and feedback. As the Chair said, to wrap up our presentation, I'm going to hand it over to our Chief Data Officer, dear colleague, Kim Hall. She's going to talk more about our story of progress and how we're ensuring success in our priorities.

Kim, it's all yours.

MS. HALL: Thank you, Becca. Good afternoon, commissioners, staff, and guests. I'm Kimberly Hall, the Chief Data Officer in the Office for Data for Action. And I do want to talk about sort of looking ahead in the story of progress we'd like to tell.

But before doing so, I really want to note how helpful it's been to really hear this overview of the priorities for our strategic plan. We know we have a very ambitious strategic plan (unintelligible) Center for Child and Family Impact about some of our priorities for the upcoming year and into the future, really helps to provide clarity about the focus of our work and how we're working towards integrating the work that we're doing across child

and family service systems.

And while this greater clarity about our priority is really important and critical strategically, it's also really important for driving and shaping the work of the Office for Data for Action. We collaborate with teams across the organizations to figure out how we're going to use data to tell the story. And the clearer that story is and we understand all the connections that we need to make, the better job we're able to do.

I would really love to go deep today to try to hear how ODFA is approaching our work, but given the vast information that was shared and the amount of discussion we've had, I'm going to be brief. But I would like to shift our attention to really looking ahead to how we're going to tell our story. How are we going to share, as Commissioner Taylor asked, with the public?

So you see on the slide here it has different questions that sort of speak to how we want to tell our story of progress. The first one really looks at what story do we want to tell? So in a nutshell, we want to tell the story of strategic plan implementation. What did we do? How do we realize our organizational values?

So you've heard a lot today about how we're centering our work in our diversity, equity, and inclusion values. And we want to come back to be able to tell you

how that played out and some of the issues that arose attempting to do that.

And we don't only want to tell you about what we did, we want to be able to speak to the impact of our systems-change work.

In telling our story of progress and really speaking about what progress we've made, we really want to talk about what's the short term progress that was made in systems? How do we see this advancing where we ultimately want to go? Sort of looking back to the long-term system outcomes that are laid out in our strategic plan about systems being quality, aligned, sustainable, and accessible, and connecting that to how we're really moving the needle on the results for children and families. We want to bring all of those things together; so having that clarity and having that focus is really important in being able to tell that story.

You may be wondering, well, okay. How are we going to measure our progress? We released an indicator report a couple of years ago. And it was, you know, chock-full of quantitative data.

But we know quantitative data is not enough. Given the nature of our systems-change work and goals, we're going to need call qualitative data. We need to describe what's happening. We need to be able to tell

stories. And so we anticipate a combination of qualitative and quantitative data, and not just from the perspective of staff or First 5 LA or County wide or State wide that we're able to get access to. We need to hear accounts from staff. What's happening on the ground. What is the role that they're playing at the various tables they're sitting at?

We also want to hear from our grantees. What's the experiences they're having? What are the effects that they're achieving and the challenges that they're encountering?

And we want to be able to rely on third-party data. Data on evaluation coming from consultants that are looking at, you know, outcomes for Welcome Baby and Help Me Grow and other programs. Importantly, we want to be able to lift up stories from the community, stories like (unintelligible) that really shine a light on where and how families are able to overcome challenges, and stories by (unintelligible) that really demonstrate what happens when we align First 5 LA community priorities.

So in other words, we really want to use and try to triangulate data from different methods, different sources, different perspectives to tell us comprehensive stories.

So the next question might be, okay. Well, that

sounds great, but when are we going to hear about this? How is the story going to unfold, and when will you come back to us. And really our plan is to tell the story throughout implementation. As we come to the board with requests and strategy questions, we're going to share with you what we're learning and what's happening.

And we're going to come in the fall with a comprehensive update where we're able to reflect back on all of the work that we've done in the fiscal year and talk about where did we make progress and where didn't we. What was the things that really worked, and what didn't work. What kind of course directions are we making and how is that informing the work that we're doing in the future.

And though it's not on the slide, I do want to speak to the question that Commissioner Taylor brought up, which is how are we going to share the impact that we're having with the public? And while we don't have a very specific plan in place, I do want to note two things. One, we will be updating the Pathway to Progress report.

So that report was released in the fall of 2022. And we talked about the conditions of children and families at that time. And we need to update that report. We are in the midst of a pandemic. We want to see how those conditions have changed, what do they look like now.

We're going to be bringing that information back to the commission. And because we are releasing a public report, that information will be available to the public. It's pretty dense. The report that is released -- that we released to the public is quite dense and full of data.

But we also want to be able to share the impact that we're making in more accessible ways. So the office will be partnering with our colleagues in the Center for Child and Family and the Office of Government Affairs and Public Policy, and the Office of Communities to say what story do we need to lift up? What stories do we need -- stories, findings, do we need to lift up to our systems partners so we can understand the progress we're making together. The stories we need to lift up to the public to advance public will. What stories and signs do we need to lift up to restore our advocacy efforts?

So those are some of the things that we have been thinking about and intend to do as we not only, you know, create the story and make the progress, but put ourselves in the position to share with other -- the progress that we're making.

So that is all I have for now. And I'm going to turn it back over to our Chair.

COMMISSIONER PLEITEZ HOWELL: Thank you. I am not seeing any hands raised.

Any questions for Kim?

Kim, we know there is more to come. But not seeing questions, now; so if there are no questions, we can move to public comments. I'm going to give it 30 seconds, though.

Kim, we're really, really thrilled about those stories we're going to tell and some of that base data; so thank you for that overview.

And, Linda, are there any folks for public comments?

SECRETARY: There are no public comments.

COMMISSIONER PLEITEZ HOWELL: All right. So we -- we are up for adjournment. But I do really just sincerely want to thank John Wagner for stepping up into the leadership role for the Center for Child and Family Impact. This presentation is deep, and it shows the connection and collaboration that the board has been asking for; so thank you, John, and team, for pulling all this information together.

With that, I believe we are adjourned. So thank you folks for all your time. Take care.

(At 3:45 p.m. the meeting was adjourned.)

# C E R T I F I C A T E

I, Heatherlynn Gonzalez, a Certified Shorthand Reporter for the State of California, License Number 13646, do hereby attest that:

The preceding is a true and accurate transcription of the meeting of the organization named herein;

The meeting was taken down stenographically and transcribed into English under my supervision and authority;

I have no interest, financial or otherwise, in any of the parties, issues, or individuals who are involved in this organization.

Attested to on this 25th day of February 2022.

DocuSigned by:
Heatherlynn Gonzalez
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CERTIFIED SHORTHAND REPORTER

FOR THE STATE OF CALIFORNIA

**Agenda Item: 3**
**Date: April 21, 2022**
**First 5 LA**

**SUBJECT: Information on the integration strategy for First 5 LA Policy and Advocacy Funds (PAF), and recommended Intermediary Organization contract for new Early Childhood Policy and Advocacy Fund.**

**RECOMMENDATION:** Staff is recommending that the Board approve a contract with Community Partners to serve as the Intermediary organization for the Early Childhood Policy and Advocacy Fund. This contract represents a 12-month initial agreement with the selected Intermediary organization for a not-to-exceed amount of $596,000 for administrative and operating costs, with an anticipated start date of May 12, 2022, subject to approval by the First 5 LA Board of Commissioners.

**BACKGROUND**
First 5 LA currently operates three separate Policy and Advocacy Funds (PAF), staffed independently by teams and offices across the organization. Each launched between 2017 and 2020, and the funds broadly intend to strengthen and amplify First 5 policy, advocacy and systems change work.

*Early Childhood Education Policy Advocacy Fund (ECE PAF)*
The overarching goal of ECE PAF has been to support advocacy for improved access to affordable, quality, sustainable ECE through greater public investment. Community Partners served as the Intermediary organization of ECE PAF, supporting design, implementation and oversight of the fund. The fund itself offered three types of grants:

- Partnership Funds of up to $350,000, to strengthen grantee organizational capacity for policy advocacy in LA County and Sacramento.
- Field-Building Funds of up to $75,000, for organizational capacity-building that allows funded organizations to more effectively participate in ECE advocacy efforts.
- Rapid Response Funds of up to $50,000, for discrete or otherwise time limited projects that address field-wide needs.

Results from the ECE PAF have included over 1,400 total legislative visits conducted by grantees, greater collaboration in pursuit of the "Billion Dollars for Babies" budget request during the 2018 legislative session, and increased self-reported stability and effectiveness within the ECE advocacy field resulting from strengthened relationships between grantees.

*Built Environment Policy Advocacy Fund (BEPAF)*
Expanding upon the experiences of ECE PAF, First 5 LA launched the Built-Environment Policy and Advocacy Fund (BEPAF) in October 2019. Grants ranged from $40,000 to $100,000, and were awarded to community-based organizations, policy advocacy organizations and coalitions that focus on improving neighborhood conditions for children and families. BEPAF's goals were to maximize advocacy toward improving child and family access to high-quality parks, open spaces, and recreation facilities; promoting safe and reliable transportation/ opportunities for mobility; and increasing food security. Prevention Institute served as the Intermediary organization of BEPAF, supporting design, implementation and oversight of the fund. The fund itself included two grant categories:

- Policy Advocacy Incubation Grants of up to $50,000, to support grantee advocacy planning efforts and build organizational advocacy capacity related to built-environment issues, including Best Start parent engagement.
- Policy Advocacy Implementation Grants of between $75,000 and $100,000, to support established policy advocacy organizations and networks with experience in impacting development or implementing built-environment policy and systems changes efforts.

Following the onset of the COVID-19 pandemic, BEPAF helped allocate a total of $85,000 in Strategic Response Funds to grantees as well.

BEPAF activities have included convenings with parents and residents in the Best Start geographic areas that have focused on how to conduct digital community engagement, and provided technical assistance to improve advocacy for public funding related to the built- environment areas impacting children and families.

*Early Child Health Policy Expansion fund*
In November 2019, First 5 LA's Board of Commissioners approved a Strategic Partnership for $600,000 over a 24-month period to launch pilot grants related to funding early childhood development priorities. As an expansion to the ECE PAF, pilot grants have supported advocacy for policies and practices that better ensure public systems provide maternal health services and early identification and intervention supports, inclusive of home visiting, as well as the expansion of family-centered practices, including trauma-informed approaches in systems that serve children and families. Grants for discrete projects, capacity-building and rapid response were available by invitation-only, in amounts between $10,000 and $75,000.

Overall, all three funds share major goals around building the capacity of funded organizations; developing shared problem statements and understandings of early childhood as a special population across assorted stakeholders; cultivating diverse groups of voices to advocate for early childhood; building third-party validators around the importance of prioritizing the needs of children and families; and generating progress toward achievement of various First 5 LA strategic plan goals and objectives.

*ECE PAF evaluation*
A final evaluation of ECE PAF will be completed in July 2022. Additionally, Community Partners and Ersoylu Consulting co-authored a whitepaper (Attachment A) about the project called *Funding a Field to Flower: Key Learning From the First 5 LA ECE Policy Advocacy Fund* (Community Partners and Ersoylu Consulting, December 2021). This paper highlights lessons learned about the funding approach and considerations for the philanthropic field. A distribution and publication plan for the document is currently being developed to ensure it helps move forward the larger early childhood policy and systems change funding conversation.

*BEPAF evaluation*
By July 2022, the Prevention Institute and Ersoylu Consulting will complete a final evaluation and learning report for BEPAF. The report will include lessons learned from working with grantees, and also help inform and steer the philanthropic field toward investment in the built environments where families and children live, work, and play.

*PAF integration*
Each of the existing PAFs will sunset by June 2022, making way for the next iteration of this work. Following directional approval from the Board in March 2021, First 5 LA began working to develop the next iteration of PAF, known as the Early Childhood Policy and Advocacy Fund (ECPAF). This will bring funding into alignment through a Whole Child/Whole Family framework, and support achievement of First 5 LA Strategic Plan and Policy Agenda goals and priorities.

The Whole Child/Whole Family framework recognizes the interconnection of the multiple domains of child development, especially during the first five years of life, including physical well-being/motor development, social emotional development, language and literacy development, and cognition. A whole child approach recognizes that a child cannot fully learn and develop without addressing and understanding the context in which the child lives, grows, and develops. The Whole Child/Whole Family framework also recognizes the overarching impact and pervasiveness of structural racism that disrupts children's health and well-being and family stability.

First 5 LA works at the intersection of policy change, systems change and advocacy, and the integrated PAF will incentivize grantees that work across multiple systems and hold expertise in multiple policy areas. ECPAF will also feature differing strategies but shared outcomes across those strategies, especially around prioritizing children ages prenatal to 5-years old as a special population; will bring together diverse advocacy voices whose work occurs and operates at the intersection of systems; and will reflect First 5 LA's commitment to diversity, equity and inclusion.

Diversity, Equity and Inclusion:

- ECPAF will seek to: promote inclusiveness around who receives funding, incorporate community priorities into grantmaking, and advance and build on community experience. It will also work to advance equitable allocation of resources to highest need communities, inclusive decision making amongst underrepresented populations, and practice and policy changes to advance racial justice.

Lobby compliance:

- ECPAF will incorporate legal requirements related to lobby compliance. Specifically, First 5 LA funds cannot be used for the purposes of grassroots lobbying, and as a result, grantees receiving funds from First 5 LA, whether provided directly by First 5 LA or indirectly through an Intermediary, will not be able to utilize those First 5 LA dollars to participate in "grassroots lobbying" activities.

Internally at First 5 LA, the Office of Government Affairs and Public Policy (OGAPP) will serve as the centralized access point for ECPAF. Such a structure will help improve advocacy related to PAF learnings, as this office is the organization's expert in policy and advocacy work. First 5 LA Center for Child and Family Impact (CCFI) staff will continue their engagement with PAF as well, especially utilizing their experience and expertise based on leading previous PAFs.

The integrated PAF will also seek to better support First 5 LA sustainability, keeping in mind declining revenues and fund balances going forward. Over a potential 3 to 5-year life cycle, the integrated PAF could include reductions in grants year-over-year, or offer smaller grants to funded organizations. Integration will also reduce redundancies internally, freeing up staff time for more efficient usages. In the context of ECPAF specifically, First 5 LA has defined sustainability as achieving lasting policy change, such as building and strengthening the intersections of family serving systems, further developing the early childhood advocacy field, ensuring children prenatal to 5-year are broadly acknowledged as a special population, and supporting movements that benefit children and families. The "intersections of systems" refers to how systems align and connect, especially related systems of Early Identification and Intervention, Early Childhood Education and Home Visting systems, including where there are overlaps between these systems, how they intersect, and how they could work together better to ensure families receive seamless supports.
seamlessly.

**UPDATE ON PAF DEVELOPMENT AND OVERVIEW OF ECPAF**

The development of ECPAF has been informed by learnings related to First 5 LA's previous PAF efforts. Overall, ECPAF will promote more aligned and holistic advocacy through a Whole Child and Whole Family lens, and feature differing strategies but shared outcomes across those strategies, especially around prioritizing children ages prenatal to 5-years old as a special population.

To support the actual design and implementation of the fund itself, First 5 LA has developed the following objectives and outcomes that together represent the overall goals of ECPAF.

- ECPAF includes the following **objectives**, or results it will seek to achieve within its life cycle, provided a given level of resources and funding:

- Strengthen the capacity of organizations to both incorporate and advocate for a Whole Child Whole Family framework, as well as First 5 LA Policy Agenda and Strategic Plan priorities.
- Catalyze policies that impact intersecting systems to the benefit of children and families, and also that advance greater integration of child- and family-serving systems.
- Close disparities, and guide resources to communities that would most benefit.
- Ensure participation of a diversity of organizations, including those that represent community priorities.
- Advance advocacy across multiple domains of policymaking, including administrative, legislative and budget platforms.

- ECPAF includes the following primary **outcomes**, or longer-term policy, practice and systems change effects and impacts that will result from ECPAF efforts, given achievement of the project's objectives:
  - Activating policy and practice changes at the local, state and federal levels that prioritize children ages prenatal to 5-years old as a special population, and facilitate alignment and promote integration across family-serving systems.
  - Strengthening public systems that impact the full spectrum of child health and development, including the ability of young children to receive early identification and intervention supports, access early learning resources, and grow up in safe and nurturing environments.
  - Promoting effective family engagement with public systems and ensuring delivery of services and supports to children and families.
  - Creating self-sustaining policy changes and supporting movements that benefit children and families beyond the life cycle of ECPAF grantmaking.

**FUND DESIGN AND INTERMEDIARY**

First 5 LA is recommending that an Intermediary organization support ECPAF by serving as the fund's primary implementor. First 5 LA has undertaken a competitive solicitation process to find an Intermediary for the ECPAF project. A Request for Proposal (RFP) for the Intermediary was shared publicly through First 5 LA's website, and notification of its release was shared with staff for distribution. Staff also emailed the notification to firms that First 5 LA has contracted with in the past. Following an initial financial and administrative review of proposing organizations, First 5 LA staff scored the submitted proposals and interview responses. Based on those levels of review, staff is recommending that Community Partners be awarded the ECPAF Intermediary contract. First 5 LA recommends entering an initial 12-month agreement with an anticipated start date of May 12, 2022 subject to approval by the Board of Commissioners. An initial agreement would be for a not-to-exceed amount of $596,000 for administrative and operating costs. The contract amount and start date are subject to change and will be determined based on successful contract negotiations. The contract may be renewed annually at First 5 LA's sole discretion for up to 5 years.

Specifically, the recommended Intermediary organization will have the following responsibilities:

- **Co-design and implementation**: The Intermediary will serve as a strategic thought partner to First 5 LA. This includes partnering with First 5 LA staff to refine initial thinking around the co-design and implementation of the components of ECPAF as well as further developing grant objectives, fund guidelines, timelines and evaluation and learning strategies.
- **Lobbying Compliance**: The Intermediary will ensure grantee compliance with all lobbying requirements, rules and regulations, and develop materials to ensure funded grantees understand and comply with lobbying guidelines.
- **Grant administration and monitoring**: The Intermediary will assume direct responsibility for the oversight of ECPAF grantees. This includes fiscal management, reporting, invoicing, subcontracting, re-granting and monitoring. The Intermediary will also hold responsibility for

ensuring public funds are properly monitored and distributed in a timely manner, and that grantee deliverables are being met.

- **Coordination and convening**: The Intermediary will work with First 5 LA to determine when and how often to convene grantees, provide recommendations for how best to facilitate meetings and how to measure the meetings' usefulness and success, including collection and analysis of grantee feedback, and other relevant metrics to determine meeting success, and implement of all meeting improvement measures.
- **Technical assistance, guidance and access to guidance and resources:** The Intermediary will be responsible for supporting ECPAF grantees in developing the capabilities necessary to successfully advocate for early childhood related policies and systems that impact children and families.

**DISCUSSION**

During the April 21 Special Board/Program and Planning Committee meeting, staff will provide an overview of First 5 LA's Policy and Advocacy priorities, review of Policy and Advocacy Fund integration efforts, and introduce Early Childhood Policy and Advocacy Fund (ECPAF) design principles. The objectives for the presentation/discussion are to:

- Highlight funding history and lessons learned from existing Policy and Advocacy Funds; and
- Introduce the plan for PAF integration through a Whole Child and Whole Family lens.
- Recommend approval of a contract with Community Partners to serve as ECPAF's Intermediary organization.

Staff hopes to gain additional insight and perspectives from Commissioners on how our Policy and Advocacy Funding can most effectively support the achievement of First 5 LA's North Star. Staff will be available to answer questions from Commissioners and seek input on the work, including:

- Given lessons learned from the previous First 5 LA Policy and Funds, in prioritizing system alignment and integration of systems, what key considerations should be elevated during the design process for the ECPAF?

**NEXT STEPS**

The contract for Community Partners to serve as the Intermediary organization for the Early Childhood Policy and Advocacy Fund will come to the Board of Commissioners for action at the May 12 Board of Commissioners meeting, on consent.

# The Early Childhood Policy and Advocacy Fund: Advancing Integrated Advocacy Strategies

Jaime Kalenik, Program Officer
Andrew Olenick, Senior Policy Analyst

April 21, 2022



FIRST 5 20 YEARS OUR KIDS OUR FUTURE

1ST LA first 5 la
Giving kids the best start

# Presentation Overview

- Review existing First 5 LA Policy and Advocacy (PAF) efforts.
- Provide principles for Policy and Advocacy Fund integration.
- Discuss current Early Childhood Policy and Advocacy Fund (ECPAF) fund objectives.
- Recommend approval of initial contract with Community Partners as the Intermediary organization for EC PAF at the May Board of Commissioners

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# Evolution of Policy and Advocacy Funds

| PAF 1.0 (2011) | PAF 2.0 (2016) | PAF 3.0 (2022) |
|---|---|---|
| • 2010-2015 Strategic Plan<br>• Direct Services | • 2015-2020 Strategic Plan<br>• Policy and Systems Change | • 2020-2028 Strategic Plan<br>• Integration |

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# Early Care & Education Policy and Advocacy Fund (ECE PAF)

**Fund**

- Supports advocacy for improved access to affordable, quality, sustainable early childhood education.
- Goals include both Policy and Field-Building Outcomes.
- Has provided almost $13 million in grants over six years.
- Partnership and Field-building Grants to 16 organizations; Rapid Response support for 25 projects.



**Results**

- Advocacy: early learning policy proposals.
- Legislative visits.
- Increased consensus in the field.

# Health Expansion pilot

**Fund**

- Pilot grants to support advocacy for policies and practices that better ensure public systems provide maternal health services and early identification and intervention services.
- Grants for discrete projects, capacity-building and rapid response provided by invitation-only, in amounts between $10,000 and $75,000.

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**Results**

- Analysis and advocacy: health initiatives and policies.

# Built Environment Policy and Advocacy Fund (BEPAF)

**Fund**

- Strengthens community-based organizations advocating for improved access to parks and open space, transportation and mobility, and food security for families and children in the Best Start communities.
- Goals include both Advocacy and Field-Building Outcomes.
- Implementation grants (between $75,000 and $100,000) and incubation grants (up to $50,000).

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**Results**

- Advocacy: parks, transportation, food security.
- Strengthened partnerships.

# Learnings to uplift that inform PAF integration

- Design funding strategies with **equity** at the forefront.
- **Convene** and **facilitate** grantees to more intentionally foster relationships and trust-building.
- Navigate **First 5 LA's dual roles**: advocate and funder of advocacy.
- **Integrate** current PAF efforts to maximize organizational assets and scale up policy and advocacy efforts.

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# Applying Lessons Learned

- Promote whole child and whole family advocacy.
- Incentivize partners to view their work through the lens of the whole child and family.
- Transform and advance the field toward a more holistic view of child and family advocacy.
- Strengthen alignment with the Newsom Administration, which embraces a pro-family "parent's agenda."

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# Early Childhood Policy and Advocacy Fund

Integrated fund: The Early Childhood Policy and Advocacy Fund (ECPAF).

Intends to:

- Promote more aligned and holistic advocacy through a Whole Child and Whole Family lens.
- Feature differing strategies but shared outcomes across those strategies.
- Bring together diverse advocacy voices whose work occurs and operates at the intersection of systems.[109]
- Support achievement of First 5 LA strategic priorities.

# Role of ECPAF Intermediary

- Co-designing and implementing the fund.
- Providing grant administration.
- Coordinating and convening grantees.
- Providing technical assistance and guidance.
- Achieving objectives and primary outcomes.
- Evaluating outcomes.

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Staff is recommending the Board approve a contract with **Community Partners** to serve as the Intermediary organization for the Early Childhood Policy and Advocacy Fund: A 12-month initial agreement ($596,000 for administrative and operating costs) with an anticipated start date in May 2022, subject to Board approval.

Primary objectives

Primary outcomes

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# ECPAF: Primary objectives

- Strengthen the capacity of organizations to incorporate and advocate for a **Whole Child and Whole Family** framework.
- Catalyze policies that impact **intersecting systems** and **advance greater integration** of child- and family-serving systems.
- **Close disparities** and guide resources to communities that would most benefit. 112
- Ensure participation of a **diversity of organizations**.
- Advance advocacy across **multiple domains of policymaking**.

# ECPAF: Primary outcomes

- Activating policy and practice changes that **prioritize children ages prenatal to 5-years old as a special population** and **facilitate alignment and promote integration** across family serving systems.
- Strengthening **public systems**.
- Promoting effective **family engagement** with public systems.
- Creating **self-sustaining policy changes** and supporting **movements**.

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# Centering Equity

The Integrated Policy and Advocacy fund will center equity throughout, including:

- The equitable allocation of resources to highest need communities.
- Inclusive decision making amongst underrepresented populations.
- Practice and policy changes to advance racial justice.

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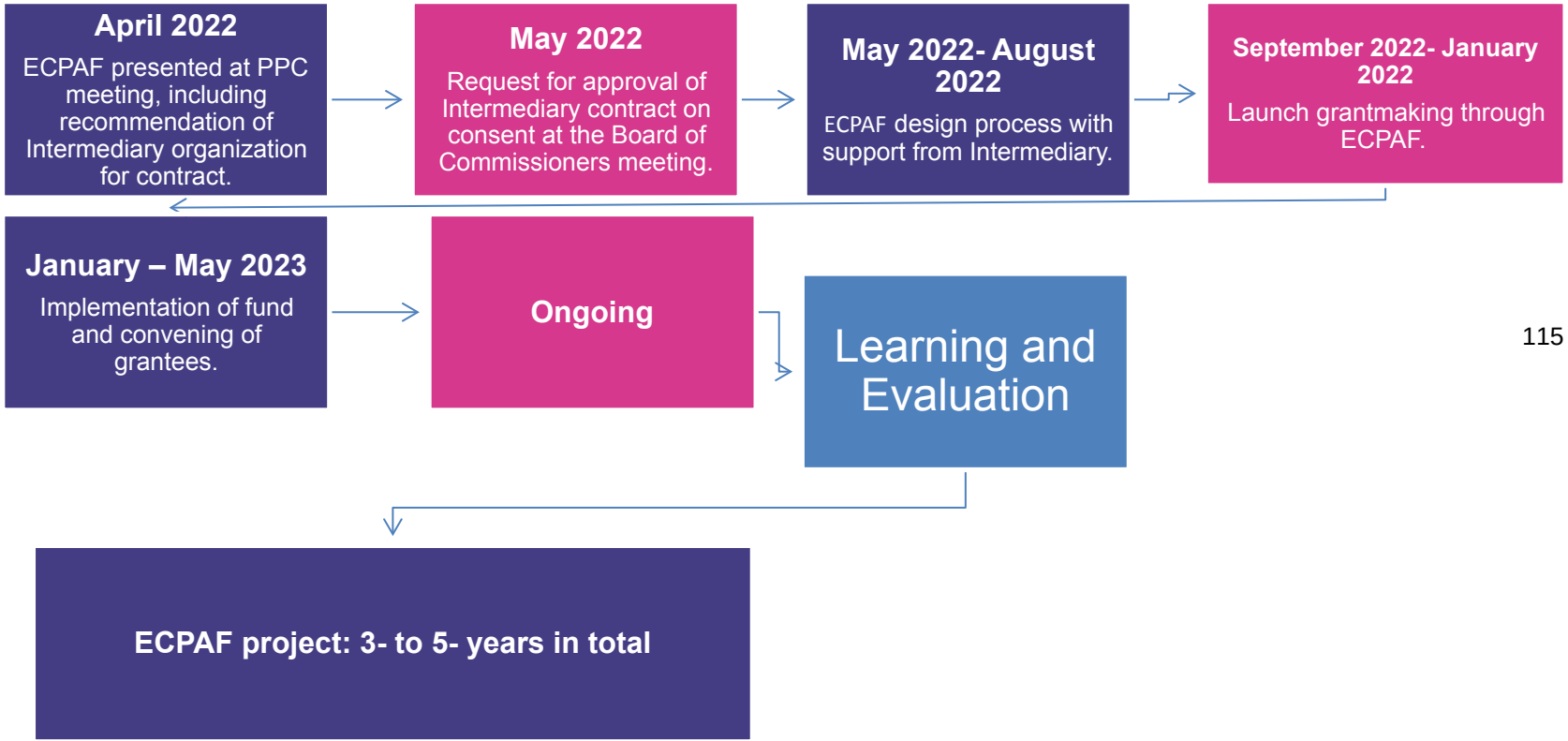
# ECPAF: Projected timeline

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# Next steps

- The contract for Community Partners to serve as the Intermediary organization for the Early Childhood Policy and Advocacy Fund: Item on consent at the May 12 Board of Commissioners meeting.

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# Questions for Commissioners

- Given lessons learned from the previous First 5 LA Policy and Funds, in prioritizing system alignment and integration of systems, what key considerations should be elevated during the design process for the ECPAF?

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# Questions?

# FUNDING A FIELD TO FLOWER: KEY LEARNINGS FROM THE FIRST 5 LA ECE POLICY ADVOCACY FUND

## EXECUTIVE SUMMARY:

This is the story of how a public funder – with all the scrutiny and accountability that comes with it – can be an **agent of policy change**. It's also the story of leading with **flexibility, trust, and relationships** instead of transactional wins and tactics – resulting in a durable ECE field that is well-respected in Sacramento and extremely effective, even during the most trying times. And it's a story about the importance of **inclusion**: not only of ECE advocates but also providers, administrators, parents, community, and business who come together to support children and families.

First 5 LA accomplished this with its Early Care and Education Policy and Advocacy Fund (ECE PAF). Through this **six-year, $17 million initiative** the organization supported the early care and education field in Los Angeles and statewide, advancing an issue in the ways the field deemed most effective. This paper provides the history and rationale for creating the ECE PAF, as well as an overview of its design and outcomes. It concludes with ideas for how to best support similar initiatives.

Informed by lessons learned from prior PAF initiatives, First 5 LA designed the structure of EC EPAF to be a multi-year, fluid, and focused (topically, ECE only) initiative that included not only funding but convening and tailored technical assistance. ECEPAF took a **cohort approach to funding**, which included three symbiotic funding elements. Unique to the design of the program was the nature of the relationship between F5LA and a **neutral intermediary organization** (as opposed to a subject-matter expert) that provided thought partnership to F5LA, co-designed and managed the grantmaking and reporting process, facilitated convenings responsive to grantee needs, and built in "slack" to be agile and available for special projects as needs arose. The intermediary's ability to absorb the bureaucratic, grant management burden from the funder and therefore reduce these requirements for grantees allowed the ECE PAF to look and feel more like private than public funding, and freed First 5 LA's expert staff to show up as peers at the advocacy table.

The unique structure and approach of the ECE PAF demonstrated that with flexibility and duration, grantees can not only build their individual organizational capacities over the years, but also increase relationships and collaboration across organizations and perspectives. Strengthening the bonds and alignment among players in the ECE field contributed to increasing the political pressure and will for ECE funding and policy change, which ultimately resulted in some of the largest ECE budgetary wins in the history of California, increasing slots and improving services for our youngest Californians and their families.

Through the story of F5LA's ECEPAF, we learned:

- ⇒ **Trust can indeed be built structurally, while still focusing on outcomes**
- ⇒ **Flexible, multi-year funding leads to intentional, targeted field development and power**
- ⇒ **Valuing – and acting on – grantee input builds trust and creates an engaged learning and relationship-building environment**
- ⇒ **Not using a racial justice lens in initiative design or policy and learning discussions early on is a missed opportunity to move the field forward more equitably**

Public funders looking to be social change agents by initiating similar programs should consider these elements as they move forward.

## INTRODUCTION:

Overall, ECE PAF is a story about taking a **cohort approach to funding** and using a **neutral intermediary organization** while doing so. It is also about how a public funder—with all the scrutiny and accountability that entails – can be a **social change agent** in the policymaking space. When a public funder chooses to leverage power differently, with a grantee-centered, field-building approach, there are multiple benefits: a stronger, more durable field emerges, as well as meaningful policy wins that support children and their families.

The Early Care and Education Policy and Advocacy Fund (ECE PAF) is a six-year, $17 million investment to strengthen existing advocacy efforts and help create new opportunities for collaboration among organizations working to improve access to quality early care and education in Los Angeles County. In addition to funding advocacy efforts, this investment expands grantees' overall capacity to engage in long-term policy and systems change work.

***"This investment is focused on building consistent boots-on-the-ground advocacy to achieve long-lasting systems change that benefits Los Angeles children."***

Unlike other initiatives that have funded and staffed coalitions or identified a specific policy change and "hired" grantees to implement it, ECE PAF was a strategic investment by a public funder to invest in an ***ecosystem of ECE advocates*** that could accomplish more by working together than they could each individually. The fund targeted a historically fragmented field that was struggling to elevate ECE as a priority in Sacramento; the initiative provided grantees a unique opportunity to deepen their relationships, ultimately strengthening their ability to not only pursue individual policy advocacy goals, but also strengthen the collaborative impact of the longstanding ECE Coalition, where a majority of grantees also have a seat.

This paper provides the history and rationale for creating the fund, as well as an overview of the design, key outcomes, and lessons learned. We hope others can benefit from this ECE journey of growth and collaboration.

## LEARNING FROM OUR HISTORY:

Beginning in 2008, First 5 LA began to direct a small portion of its grantmaking to have an **explicit systems and policy change focus** through the Community Opportunities Fund (COF) Policy & Advocacy cohorts. This commitment to policy advocacy was strengthened and deepened over the next 13 years through the transition to the Policy Advocacy Fund (PAF), cohorts I and II, which sunsetted in 2018. On the heels of the 10-year PAF investment, the next iteration focused exclusively on ECE. In 2016, the ECE PAF emerged from First 5 LA's history of policy advocacy work, both as a funder of advocacy and as a policy advocate for children and families.

Findings from the report, "*Strengthening Policy Advocacy: A Decade of Lessons Learned from the First 5 Los Angeles Policy Advocacy Fund 2008-2018*" (Ersoylu, November 2018), helped inform this more recent iteration with four key lessons:

- F5 LA can be a **strategic advocate** alongside its grantees

- Impactful advocacy funding **must be multi-year**
- Advocacy funding must be both **fluid** (responsive to context) and **focused** (it cannot target all issues)
- Technical assistance must be **tailored and dynamic** for the grantees

## ECE PAF DESIGN:

The overarching goal of the initiative was bold: "W*e must move the needle for kids*." From the outset, this fund was unique – it was designed to be **responsive and evolving.** This fluidity – for example by making initial grants based on qualifications rather than specific policy goals – allowed for a critical early disbursement of funds to grantees to hire and bolster staff immediately, who then developed their own goals based on expertise and experience in the field and with their constituencies.

***"I have to say when you make the collaboration the goal of an initiative, that is what you move towards – it's helpful in how we [grantees] show up on this project; we are keeping collaboration as the North Star."***

Because it was a **multi-year initiative**, sufficient planning and preparation time was built in to move at the speed of trust, co-designing the grant pools and guidelines with meaningful involvement of the funder, the intermediary, the learning team, prospective grantees, and other key stakeholders in the field.

Even the Theory of Change (below) was co-designed with input from the grantees early on. Unlike in most initiatives, ECE PAF grantees were intimately involved in shaping the TOC, providing input and ideas both before and after the first draft TOC was co-designed by the learning team, intermediary and First 5 LA staff. The TOC was designed with dual goals of impacting policy outcomes while at the same time, strengthening a field in need. The interactions and reinforcement between the policy and field outcomes were a central component of the ECE PAF design.

The neutral intermediary "smoothed out" the grantmaking experience for grantees by shouldering the bulk of the bureaucratic burden, as well as providing a broadly defined suite of technical assistance services that was grantee-driven and responsive to their dynamic requests. This relationship between the intermediary and the grantees was very much a thought partnership, evidenced through countless conversations and linkages to other key supports. The intermediary team was comprised of Community Partners staff, along with select consultants with expertise in niche areas that would best support the work, including Barbara Masters with expertise in philanthropy and advocacy and Ersoylu Consulting, focused on policy advocacy evaluation, as well as experts in communications, lobbying, and other areas.

The intermediary role was critical in implementing a key element of the initiative – the flexible funding – comprised of three different mechanisms to support the field: Partnership Grants, Field Building Grants and a Rapid Response Fund. Having three different funding streams to build the ECE field allowed the funder to support the more established "anchor" players, boost smaller organizations or those operating in a limited geography, and bring new voices into the field, as well as maintain sufficient slack in the system that could be deployed in targeted ways, based on shifting needs identified by grantees, advocates, and First 5 staff.

### INTERMEDIARY ORGANIZATION:

A key differentiator of this initiative was the intermediary structure and function; it was critical. *The support ended up looking more like thought partnership between peers than a formal grantee-funder*

*technical assistance rapport.* As noted above, the intermediary team built slack into the system to be available for projects and needs that weren't part of the initial scope of work, allowing them to provide as-needed support as the work evolved. For instance, the intermediary and learning team provided capacity building support to the ECE Coalition, facilitating conversations about structure and governance and the creation of governance documents and processes, and conducting surveys to identify gaps and opportunities. This work, over two years, ultimately improved trust among members of the ECE Coalition and increased its effectiveness. The intermediary also provided thought partnership for First 5 LA staff in updating their own internal grantmaking and contracting practices, and in identifying and vetting consultants for special projects. For First 5 LA to have a skilled intermediary team 'on tap,' available to support both the grantee field and First 5 LA directly, made the initiative highly responsive to opportunities that arose in the broader ecosystem. Having the intermediary manage grantmaking processes also provided some distance so First 5 LA staff could primarily show up as policy advocates alongside grantees.

## CONVENINGS:

Another primary function of the intermediary was to design and facilitate convenings: highly interactive, engaging meetings designed to facilitate relationship-building first and foremost, setting the context for the work – co-designing ground rules, clarifying that trust and relationship-building were paramount. These meetings were crafted with feedback from the initial site visits to understand exactly what grantees hoped to achieve through convenings. As such, it was decided there would be no icebreakers, convenings would be ¾ of a day (allowing Sacramento-based grantees to fly in and out in one day) and would let the room full of advocates truly draw on one another's vast experience. Too often, funders give lip-service conceptually to what grantees "need" from a meeting together, ignoring the sheer amount of intentionality, time, and effort required to be truly grantee-focused and not waste participants' time.

With the funder being on the ground in the advocacy mix, First 5 staff were also able to identify relationship gaps and leave it to the intermediary to create opportunities to nurture collaboration and trust over time. This meant convenings were not conventional—they were not a space where grantees focused on strategy or policy development or listened to guest speakers. Rather, the meetings were designed with opportunities for meaningful small group trust-building activities, with "walking breakout sessions" (out in nature, pre-COVID) intentionally planned for particular pairs or trios who were either: a) identified as strategically engaging in similar work but may not have collaborated, b) from organizations that have clashed and were in need of an opportunity to build trust, or c) based on a recommendation from First 5 LA staff that, "they should get to know one another." The intentionality behind what was seemingly a whimsical wellbeing-focused component of the convenings (Get outside! Take a hike!) was extremely powerful for the field building process.

***"I wouldn't have normally spoken to my walking partner [at the grantee convening] and now I know so much about their work and can call them when needed."***

This was followed by a large, dedicated swath of time for relationship-building in discussion groups (sans funders), dialogues in racial affinity groups, and as a whole group. Typically, meetings concluded with a combination of a 'professional gossip session' during which grantees could learn from one another to help them better navigate their advocacy field, as well as an interactive Q & A "real talk" session with First 5 LA staff, with the intermediary at times posing difficult or uncomfortable questions submitted anonymously by grantees.

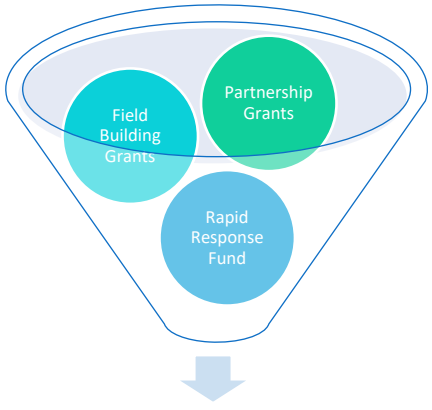
This structure was important to the field building because we know that there is a natural tension between advocates seeking tactical discussions about how to achieve their policy outcomes and taking the time to foster relationships, all while navigating the power differentials of the funder-grantee relationship. Here, the funder was able to take a "both-and" approach, supporting the grantee convenings where relationship and trust-building were paramount, but at the same time, participating in and funding the facilitation of a broader ECE Coalition[1], a separate table where the more policy-focused strategy discussions were taking place in the field.

## ACCOUNTABILITY & LEARNING PROCESSES:

The ability to remain agile was also key. Community Partners' ability to absorb the bureaucratic load from the funder (proof of insurances, certifications, monthly cost-reimbursement invoicing, etc.) and simplify application and reporting processes when regranting funds allowed the ECE PAF to look and feel more like private than public funding for the grantees. First 5 LA provided the intermediary and learning team with the basic framework necessary (due dates, periodic reporting to the Commission, year-end fiscal planning needs, etc.) and encouraged the intermediary team to interact with the grantees in a way that a) procured meaningful insights on grantee progress and b) met the accountability needs of First 5 LA.

This model allowed for First 5 LA to remain highly accountable as a public agency stewarding taxpayer funds and demonstrating positive outcomes, while limiting the burden on grantees. Furthermore, this permitted First 5 LA to show up in the field as an advocate, and less as a funder preoccupied with the apparatus of collecting reports, providing financial reporting guidelines, requesting documents, etc. This structure ultimately helped mitigate perceived conflicts with First 5 LA being both an advocate and a funder; keeping an arm's length between the grantees and the funder was one way to ensure that the policy agenda of First 5 LA did not drive the PAF grantees and their work.

## SYMBIOTIC FUNDING ELEMENTS:




**Strenghthen the ECE Field**

The diverse funding streams were important to the flexibility of the initiative. **Partnership Grants** were provided to larger organizations with a proven track record of policy change in Sacramento and Los Angeles; six groups (including one collaborative of three smaller organizations) received grants ranging from approximately $200-450k, renewable annually for five years based on progress toward outcomes identified by the grantees themselves.

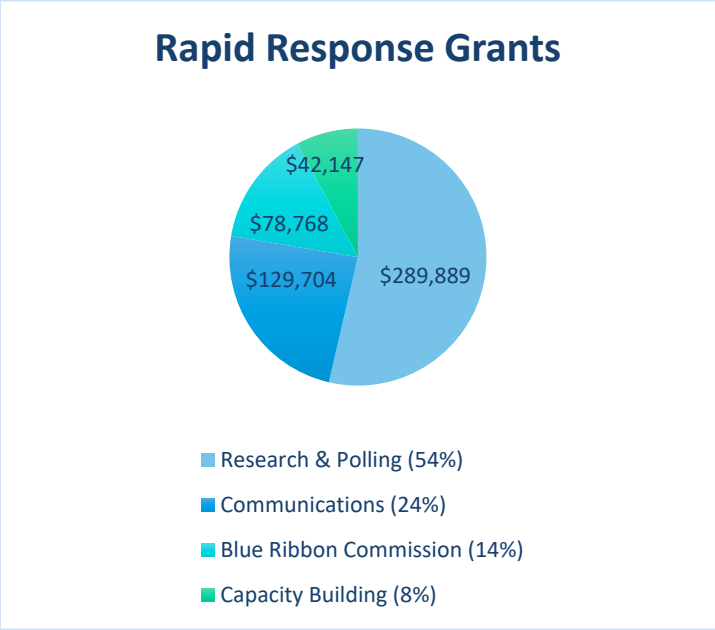
One year later, another subset of funding was added into the mix—**Field Building Grants**. These 8-10 organizations received approximately

[1] First 5 LA funds the facilitation of the ECE Coalition which advocates for state budget investments and policies that promote equity by serving the highest-need children first. The ECE Coalition's initiatives are informed by current research and led by the expertise of families and ECE professionals within 35 diverse member organizations, of which all Partnership grantees and the majority of Field Building grantees are members.

$75,000 each annually. These grants were given to smaller, more niche ECE-focused organizations and/or those whose work had a more limited geographical focus, as well as other successful multi-issue advocacy organizations newer to ECE work who were believed to add value to the overall ECE space—especially policy change and movement-building in Los Angeles.

One final design element that emerged from First 5 LA's commitment to dynamic learning and co-creation with the intermediary and grantee input: in addition to having a learning team support the initiative, regularly sharing their findings at the grantee convenings and providing technical support as requested, a final fund was created, the **Rapid Response Fund**. This was a way for grantees to learn from their environment and respond in time-sensitive, targeted ways.

Rapid Response funds averaged $50,000 and were used to fulfill needs that would benefit the field overall, such as research, polling, or communications. Overall, over $500,000 has been distributed to grantees and their key partners to engage in Rapid Response projects. Typically, funders – particularly government funders – cannot move quickly when a new idea emerges, and grantees and coalitions operate with a sense of scarcity rather than abundance about shared projects. This fund aimed to address both issues – again, with a field-level orientation – in real time.

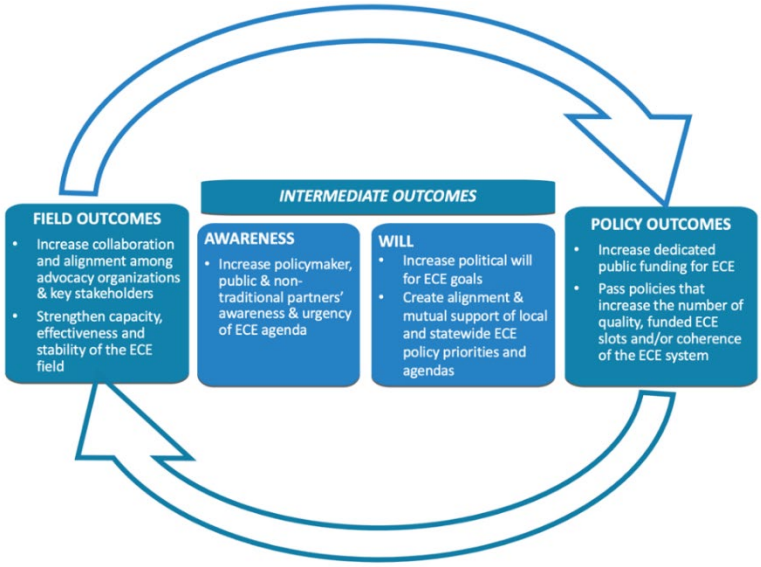



## IMPACT:

The Theory of Change (TOC) guided the work, outlining a plan to impact not only policy but also strengthen the broader ECE field. The field, intermediate, and policy outcomes interact to reinforce and strengthen one another. During the 6-year period, substantial impact was noted across outcome areas.

## FIELD

## ECE PAF THEORY OF CHANGE




## OUTCOMES

The field outcomes of PAF ECE are evident, as grantees continually share examples of collaboration on several levels: co-hosting site visits, communication in between grantee convenings, and more grantees advocating together for local and statewide policies. Of note, local Los Angeles work has been strengthened by the addition of not only the Field Building Grantees diversifying the field, but also through the strengthening of the Early Childhood Alliance (ECA), co-led by ECE PAF grantees Advancement Project and InnerCity Struggle. Over the past three years, substantial work has been done to strengthen the ECE Coalition's ability to impact the broader field. With the support and guidance of intermediary consultants funded primarily by ECE PAF, Coalition members created internal policies, procedures, and guiding bylaws to strengthen their internal workings; this internal work, combined with the effectiveness of the ECE Coalition in Sacramento, has created confidence on the part of the grantees, with **88% of grantees feeling extremely/very confident in the ability of the ECE Coalition to secure meaningful policy wins**.

Fragmentation in the field has declined steadily from a baseline of 75% of grantees believing that fragmentation in the field is an issue in 2017 to only 37.5% in 2021. Furthermore, compared to 2017, the ECE advocacy field today is more effective at making budgetary impacts (100% agree) and making policy change (88% agree). All grantees (100%) agree that, since 2017, there has been increased consensus in the ECE advocacy field around both a policy agenda as well as policy priorities. These findings of increased collaboration and decreased fragmentation have cleared the way for grantees to not only increase trust, but also to engage in numerous collaborative advocacy efforts that moved the field forward.

***"With one partner, our collaboration increased from a zero to a 7/8 of 10. We didn't know them at all before this grant."***

| Has collaboration with other PAF ECE grantees in the past year led to… | 2021 Partnership | 2021 Field Building |
|---|---|---|
| Prevention of cuts or negative changes to ECE policy | 100% | 100% |
| Adoption of ECE policy or administrative change at the state level | 100% | 88% |

| | | |
|---|---|---|
| Effective monitoring of ECE policy | 100% | 75% |
| Creation of an ECE policy proposal at the state level | 100% | 63% |
| Implementation of an enacted ECE policy | 88% | 50% |
| Creation of an ECE policy proposal at the local level | 88% | 38% |
| Adoption of an ECE policy or administrative change at the local level | 88% | 38% |

## INCREASED AWARENESS

The increase in awareness was evidenced by the over 2,400 visits (both in-person and virtual meetings) made to elected officials and their staff, by both the Partnership and the Field Building grantees during the initiative.

**97% of California legislators were visited by a PAF ECE Grantee.**

In addition, **68% of legislators were *visited by both*** Partnership & Field Building Grantees.

| Year | Number of grantee visits made to California legislators and/or staff |
|---|---|
| 2017-18 | 341 |
| 2018-19 | 1,062 |
| 2019-21 | 1,074 |

In addition, grantees engaged in various coalitions, networks, and non-traditional venues to share the vision and agenda of the broader ECE field. When surveyed, Field Building grantees increased collaboration with non-traditional partners and K-12 advocates. Parent engagement seems to have decreased across the grantees during the pandemic, as we would expect. For both grantee cohorts, collaboration with other ECE advocates increased, and for Partnership grantees, collaboration with ECE providers increased significantly (despite the pandemic). For Partnership and Field Building grantees, collaboration with business decreased, collaboration with school districts remained stable and collaborating with organized labor, although relatively low, did increase over time.

| Instances of collaboration with… | 2017 Partnership | 2019 Partnership | 2021 Partnership | 2018 Field Building | 2019 Field Building | 2021 Field Building |
|---|---|---|---|---|---|---|
| **ECE Advocates** | 51 | 57 | 60 | 62 | 71 | 66 |
| **ECE Providers** | 34 | 45 | 59 | 45 | 51 | 38 |
| **Business** | 28 | 28 | 22 | 26 | 34 | 21 |
| **Organized Labor** | 17 | 20 | 26 | 20 | 24 | 25 |
| **School Districts** | 23 | 21 | 21 | 16 | 26 | 15 |
| **Parents** | 30 | 30 | 23 | 44 | 53 | 34 |
| **Non-traditional Partners** | 22 | 27 | 19 | 32 | 35 | 39 |
| **K-12 Advocates** | 19 | 31 | 20 | 19 | 26 | 47 |

Grantees reported increased capacities in communications and participating in Rapid Response-funded projects focused on disseminating ECE information to both the broader public and thought leaders.

## POLICY & BUDGET OUTCOMES

From the table below, we can see that both Partnership and Field Building Grantees increased their collaboration on developing/co-sponsoring ECE legislation and disseminating and sharing relevant research. For Partnership Grantees, there was a significant increase seen in educating policymakers about ECE during joint legislative visits, while, for Field Building Grantees, there was a significant increase in mobilizing new advocates and champions and co-authoring ECE research. However, with COVID, many of the gains made from the inception of the fund to 2019 were decreased in the past two years.

| Instances of collaboration on… | 2017 Partnership (Baseline) | 2019 Partnership | 2021 Partnership | 2018 Field Building (Baseline) | 2019 Field Building | 2021 Field Building |
|---|---|---|---|---|---|---|
| **Develop or co-sponsor ECE legislation** | 12 | 25 | 21 | 16 | 25 | 18 |
| **Disseminate & share relevant research** | 28 | 40 | 33 | 25 | 46 | 33 |
| Educate policymakers about ECE during joint legislative visits | 32 | 43 | 33 | 39 | 40 | 32 |
| Identify, educate and/or mobilize new advocates & champions around ECE | 33 | 33 | 20 | 23 | 35 | 22 |
| Co-author ECE research | 13 | 13 | 12 | 6 | 16 | 14 |
| Media/communications strategy for ECE | 16 | 21 | 22 | 29 | 32 | 25 |
| Coordinate grassroots civic engagement for ECE | 26 | 23 | 21 | 32 | 30 | 19 |

For Field Building Grantees in particular, when they were asked (on a scale of 1 to 10) how much ECE advocacy has been a priority for their organization during the past year, the rates continually increased each year, demonstrating that these partners were increasingly aligning with the work of the ECE policy field.

| On a scale of 1-10, how much has ECE advocacy been a priority in the past year for your organization… | |
|---|---|
| **2018** | 5.2 |
| **2019** | 6.8 |
| **2021** | 9.1 |

## Since 2017, the ECE Coalition[2] has advocated for and won $7.8 billion[3].

Overall, one of the most noticeable outcomes was the sheer scale of the budgetary asks during the past six years. Beginning in the 2018-19 budget cycle, grantees collaborated on the unprecedented "Billions for Babies" budget request, a $1 billion investment, above and beyond previous years' commitments, which would improve access for approximately 100,000 children and increase the infant/toddler factor to provide the needed supports for providers to care for more infants and toddlers in need. This marked the first time the ECE Coalition had clear budgetary asks aligned to particular bills.


In addition, a $231 million expansion to childcare access was secured through the federal Child Care Development Funds (CCDBGF); the largest increase of federal funding ever seen. Here, the ECE Coalition came together to suggest ways to spend the funding that came to the state.

And we can see from the budget "ask" flier (to the right) from the ECE Coalition, the high level of coordination continued through the 2019-20 cycle. In the 2020-21 budget cycle, the focus remained quite similar, with continued pushes for access, rates and facilities.

After having grantees support and/or sponsor over three dozen pieces of ECE legislation during the six-year period, with nearly 20 of these supported by the ECE Coalition, five bills were signed into law, along with funding for nine of the budgetary requests for ECE funding within areas such as Childcare Bridge funding, CSU Childcare infrastructure, state infrastructure, Prop 64, Emergency Childcare vouchers and others. In addition to the bills supported by the full ECE Coalition, PAF grantees also collaborated on additional bills during this time; two recent successes came in 2019 with the passage of both AB48: Kinder-Community College Public Education Facilities Bond Act and AB1004: Developmental Screenings.

What is perhaps even more impressive is that the synergy among ECE advocates at the state level remained steadfast during the most pressing global pandemic of our times—COVID 19. During the past two years, these advocates have managed to come together to continue to make clear, unified asks of the federal relief dollars that have come into California.

[2] The ECE Coalition advocates for state budget investments and policies that promote equity. The ECE Coalition's initiatives are informed by current research and led by the expertise of families and ECE professionals within 35 diverse organizations; all Partnership grantees are members, as are a majority of the Field Building grantees.

[3] Of this amount, $4.63 billion is from the 2021-22 budget, primarily federal funds, and includes significant out-year spending. The number lumps together one-time and ongoing funding and does not include Transitional Kindergarten funding, which would increase this number.

| | BILL NUMBER/ TOPIC AREA |
|---|---|
| **2017** | AB60: Subsidized Childcare Eligibility Periods |
| **2018** | AB2292: Childcare Reimbursement Rates<br>**AB2626: Childcare Developmental Services Act**<br>**AB605: Daycare Center Licensing**<br>**AB2960: Childcare Online Portal** |
| **2019** | AB125: Reimbursement Rates<br>AB194: Childcare Developmental Services<br>AB324: ECE Workforce<br>**AB378: ECE Family Care Providers**<br>AB452: Childcare Facilities Grants<br>SB174: Reimbursement Rates<br>**SB234: Family Daycare Homes**<br>SB321: CalWORKS Supportive Services |
| **2020** | AB125: Reimbursement Rates<br>AB2546: Family Daycare Homes Licensee Duties<br>AB2883: Childcare Payment Program<br>SB174: Reimbursement Rates |
| **2021** | AB92: Preschool & Childcare Development Services- Family Fees<br>SB246: Reimbursement Rates |

For instance, the advocates worked closely with the legislature to quickly get family fees waived and direct money to providers at an unprecedented speed—no strings attached.

These newfound relationships have also been instrumental in PAF grantees now working together for federal level policy work; now that they are in relationships with one another, they are leveraging this strength at the federal level.

## LESSONS LEARNED:

**Trust can indeed be built structurally, while still focusing on outcomes.** In fairly short order, the ECE PAF's goals around facilitating more relationship-building became reality. Because politics is ultimately about personal relationships (e.g. you are less likely to negatively impact a colleague when you have a personal relationship with them), intentionally creating space to develop key relationships yielded clear results.

**Flexible, multi-year funding allows for the possibility of intentional, targeted field development.** Perhaps the most important element of ECE PAF was flexible, trust-based, multi-year funding so organizations could hire and retain key staff to do the work and participate in coalition efforts. Moreover, from the beginning, there was financial 'slack' built into the system that allowed for flexible support from the intermediary, learning team, and Rapid Response fund. The impact of multi-year funding cannot be underestimated. The funds covered staff time and space for grantees to engage in their work, build trust through convenings, learn from each other and the work of the learning team, and receive technical support and resources for field-wide projects on an ongoing basis.

**Valuing—and acting on—grantee input creates an engaged learning environment.** Early on, grantees were asked what they liked, hated, found useful or useless about funder convenings. They were clear in their responses to these and other invitations for feedback posed regularly throughout the six years; seeing their feedback reflected in how the initiative evolved – for example, having the grantee-developed ground rules literally written into every group's grant agreement, and then enforced – also contributed to increased trust.

**Centering racial equity in policy and learning discussions will be critical** moving forward. It has been helpful to experience the diversity training for the ECE Coalition and racial justice dialogues during ECE PAF convenings, but racial justice – including prioritizing the expertise of people directly impacted by ECE policy and practice – was not fully baked into the initiative upfront, and that was a lost opportunity.

## Epilogue: Pandemic Impacts on the ECE Work

It is important to note that the final two years of the six-year ECE PAF took place during a time of unprecedented upending of our social fabric. There are additional learnings that should also be noted, resulting from this context.

**The racial justice movement during the pandemic created space to engage with partners in new ways with more openness around racism and racial equity.** The pandemic has bolstered conversations about the need to expand and deepen work in ECE racial justice advocacy, including **naming more clearly that it is women of color and immigrant women who comprise the ECE workforce but white women who lead most advocacy efforts, with white men leading the largest advocacy organizations.**

**The pandemic has laid bare the fragility of childcare in our state** and caused economic and health emergencies. It has led to significant drops in enrollment and staffing for many providers, which made it difficult for them to make ends meet, and in some cases, to keep their doors open.

The pandemic also **highlighted the importance of partnership, information-sharing, relationship-building, and leveraging resources**. The COVID-19 pandemic forced many to **react very quickly to disseminate information** to the parents and providers in our communities. With the dynamic nature of the pandemic, it was clear that **regular communication with educators** is needed to assess how their programs were being impacted, what resources they needed, and whether and how they benefit from relief dollars and support provided by local, state, and federal entities.

Looking ahead, we know the status quo is no longer acceptable. **Every investment should be made with racial equity at the center**, specifically focused on answering the question: how will this investment advance equity goals, eradicate challenges and barriers, and center the children and communities most excluded from opportunity? To ensure that equity remains front and center in the work, several organizations are **engaged in Diversity, Equity & Inclusion (DEI)** trainings and/or will focus on developing an equity strategy.

## LOOKING AHEAD

Overall, PAF ECE has demonstrated the impact a public funder can have on policy outcomes by supporting, strengthening, and focusing on a field-based approach. The PAF theory of change that there is an iterative relationship between strengthening a field and achieving policy success played out in real time throughout the initiative. Through the story of First 5LA's ECE Policy Advocacy Fund, we have learned:

- **Trust can indeed be built structurally, while still focusing on outcomes**
- **Flexible, multi-year funding and convening leads to intentional, targeted field development and synergy**
- **Valuing—and acting on—grantee input creates an engaged learning environment**
- **Centering racial equity in initiative design and implementation from the beginning are critical**

Overall, the gamble paid off. What was lost in certainty, from allowing slack in the system and working in a fluid and responsive manner, was gained in innovation and truly building up a field where and when support was needed. Public and private funders looking to be a social change agent by initiating similar programs should consider elements from this approach as they move forward to target resources to the fields where they are most engaged.

**Agenda Item: 4**
**Date: April 21, 2022**

**FIRST 5 LA**

**SUBJECT:**
**Establish a Strategic Partnership with San Gabriel Pomona Regional Center in the Amount of $500,000 to Serve as the Unifying Agency (UA) for the Help Me Grow LA Pathways Collaborative to Strengthen Referral Pathways for Early Identification and Intervention Services and Supports in Community 2 (San Gabriel/Pomona) for the Period of Three Years.**

**RECOMMENDATION (PROVIDED AS INFORMATION):**
This memo is provided as information for the Board's consideration at the April 21, 2022 Program and Planning Committee (PPC) meeting. First 5 LA staff recommends that at the May 12, 2022 Commission meeting, the Board approve the establishment of a Strategic Partnership with San Gabriel Pomona Regional Center for an amount not to exceed $500,000 for the period of three years. Funds for FY 22-23 will be included in the First 5 LA Programmatic Budget under Help Me Grow, which will be presented to the Board of Commissioners for approval in June 2022. Final contract execution will be contingent on Board approval of the First 5 LA FY 22-23 programmatic budget. Beyond FY 22-23, funds will be pulled from the assigned fund balance which will be brought to the Board of Commissioners for approval in June of the corresponding fiscal year. At the time of budget approval, requested resources will shift from the Assigned resource category of the fund balance, dedicated for broad Strategic Plan purposes, to the Committed category, amounts dedicated for a more specified purpose via resolution.

**BACKGROUND:**

**Overview of the Help Me Grow LA Pathways Project**
According to the Centers for Disease Control and Prevention (CDC), children's brains are the most adaptable in the first three years of life. Intervening early when signs of developmental delays or disabilities are first identified can change a child's developmental trajectory and improve outcomes for children and families.[1] However, many families face substantial barriers to navigating early identification and intervention (EII) services such as a lack of coordination among providers, complex eligibility and referral processes, obstacles to data sharing, and many more. In L.A. County, it is estimated that as many as 30-40% of young children would benefit from prevention and early intervention services and supports by age 3.[2] However, many children do not receive such services until they reach kindergarten, if at all.[3]

Help Me Grow (HMG) is a national systems change model that promotes cross-sector coordination and integration at the local level to strengthen developmental and behavioral screening, assessment and linkage to early intervention supports through the following four core components: Child Health Care Provider Outreach (CHPO); Community & Family Engagement (CFE); Centralized Access Point (CAP); and Data Collection and Analysis (DCA). Through these components, HMG aims to strengthen the early identification and intervention continuum of care by increasing developmental screenings, strengthening awareness of and destigmatizing developmental health, linking children to services more efficiently, and collecting data for quality improvement and illustrating impact. Help Me Grow LA (HMG LA) is adapting and implementing the national HMG model for LA County families.

Beginning in 2016-2017, a variety of stakeholders with professional and personal experience with EII were convened in a series of planning work groups to inform the implementation of HMG LA. Recommendations from this work group were captured in the October 2017 report Promoting Young Children's Optimal Development. Among these recommendations were the need to:

- Test and refine strategies before scaling them countywide, and

[1] Centers for Disease Control and Prevention. Updated 2021. Why Act Early if You're Concerned about Development?. Available at https://www.cdc.gov/ncbddd/actearly/whyActEarly.html.
[2] First 5 LA. (2012). Early Developmental Screening and Intervention Initiative (EDSI): Lessons Learned.
[3] First 5 LA, 2012; Children Now, First 5 Association of California, & Help Me Grow California. (2014). Ensuring Children's Early Success: Promoting Developmental and Behavioral Screenings in California.

- Adopt a "centralized-decentralized" approach, combining countywide approaches (such as the CAP and large-scale media campaigns) with more localized (community-based) efforts. Including localized approaches is particularly important given the size and complexity of LA County, and since EII services, including screenings, case management, care coordination and intervention services, are delivered at the local level within existing systems and sectors.

The HMG LA Pathways investment was developed in response to these recommendations to strengthen referral pathways across EII systems at the local level, while testing innovative approaches to inform the larger HMG LA. Specifically, the Help Me Grow LA Pathways communities will plan and implement one or more innovative approaches designed to strengthen and expand EII referral pathways within a localized community setting to ensure all children identified with a delay or at risk of delay can effectively access appropriate timely services. Final approaches are selected by each community to align with local needs.

HMG LA Pathways work is led by a collaborative of agencies that provide early identification and intervention services and supports within a given geographic region. This collaborative is convened and supported by a Unifying Agency (primary grantee) and is expected to include both Collaborative Agencies (subcontractors that support implementation and learning) and Supporting Partners (non-funded partners who participate in Collaborative meetings and Pathways activities, but without deliverables and a formal subcontract) that will work together to plan and implement the work. This project is comprised of three phases: Convening and Planning; Implementing Innovative Approaches to Strengthen Referral Pathways; and Refinement of Approaches.

**Previous Procurement Efforts**
First 5 LA originally allocated funding for seven (7) HMG LA Pathways communities across the county to strengthen referral pathways between service sectors, reflecting the seven regional center catchment areas in L.A. County. Prior to pursuing this Strategic Partnership, First 5 LA released two waves of Request for Proposals (RFP) to solicit proposals from organizations interested in serving as the Unifying Agency, and conducted additional field research. These prior procurement efforts are summarized below.

- **First RFP (Wave 1):** The first RFP was released on September 25, 2019 with a total project term up to three (3) years and a budget up to $450,000 per community. This RFP resulted in the selection of Unifying Agencies for five of the seven communities, whose contracts began October 1, 2020. No proposals were submitted for two of the communities, ***Community 2 (San Gabriel/Pomona) and Community 7 (Harbor).*** A brief post survey was sent to informational webinar attendees and completed by 12 attendees. Responses indicated that barriers to applying included needing more clarity on scope and limited budget.
- **Second RFP (Wave 2):** The second RFP (Wave 2), released on April 5, 2021, specifically sought proposals from organizations interested in serving as the Unifying Agency for Communities 2 and 7. The RFP was revised based on survey findings to clarify project components, however, the decision was made not to increase the budget or project term in this RFP to ensure parity across the communities. An informational webinar was held on April 14, 2021 with 23 participants, however, only one proposal was submitted for Community 2 and none for Community 7. The sole applicant for Community 2—San Gabriel Pomona Regional Center—did not meet RFP requirements and thus the solicitation yielded no award of contracts.
- **Reevaluating and Adapting Procurement Approach:** As no proposers for Communities 2 and 7 were awarded during the first two waves of solicitation, First 5 LA launched field research to better understand community needs, the landscape of providers, and barriers preventing organizations from submitting a successful proposal. Based on this field research and lessons learned from Pathways Wave 1, the Pathways procurement approach was reevaluated and the following key adjustments were made:
    - Budget: Survey results from both RFPs indicated that the limited budget was a challenge for applicants given the scope. In response to these concerns, the three-year award was increased from $450,000 to $500,000 and budget limits for each phase were removed.
    - Scope of Work: Based on feedback from Wave 1 grantees, the scope of work was streamlined by consolidating and simplifying deliverables where possible. Additionally, in alignment with First 5 LA's values and taking into account recommendations from HMG

LA's Community and Family Engagement Council, a more explicit focus on equity was added to the Wave 2 scope to intentionally engage communities that have historically faced greater barriers to accessing EII services (including Asian American/Asian, Native Hawaiian/Other Pacific Islander, African American/Black, and Latino/a/e/x communities).[4]
    - Outreach: Outreach was prioritized to sectors that are currently under-represented across the current Pathways collaboratives (e.g. school districts, health departments) in addition to core EII service providers such as regional centers.
- **Exploratory Meetings with Potential Partners:** Through a combination of survey results and outreach across the Center for Child and Family Impact, organizations were identified as potential partners for Community 2. First 5 LA staff met with four organizations in Community 2 on an exploratory basis. Of the agencies staff met with, **San Gabriel Pomona Regional Center (SGPRC)** rose to the top as the ideal candidate to serve as Unifying Agency for Pathways in Community 2 based on their expertise, relevant experience, and existing relationships.

**Proposed Work of the Strategic Partner with Objectives & Outcomes**
Through the testing of innovative approaches, HMG LA Pathways intends to achieve the following:

- Improved communication and tracking on referral status between referring agency and referral source;
- Reduction in wait times between screening and assessment, and between assessment and prevention or intervention services;
- Decrease in the age at which children are referred to services and begin services;
- Increase in successful referrals (i.e., referrals appropriate based on screening results and families followed through on referrals) on first attempt;
- Increase in parent/caregiver satisfaction with referral process and linkage to services; and
- Deliberative community engagement with communities (e.g., Asian American/Asian, Native Hawaiian/Other Pacific Islander, African American/Black, and Hispanic/Latino/a/e/x) that have historically faced barriers to accessing early identification and intervention services.

As Unifying Agency, SGPRC will support a collaborative of agencies that provide early identification and intervention services and supports within a given geographic region to implement one or more strategies designed to strengthen referral pathways across agencies. The collaborative is expected to include both Collaborative Agencies (subcontractors that support implementation and learning) and Supporting Partners (partners who participate in Collaborative meetings and Pathways activities, but without deliverables and a formal subcontract). Projected activities include but are not limited to:

- **Administrative Oversight:** Including contract administration, compliance, fiscal administration, monitoring, invoicing, and developing and managing subcontracts with Collaborative Agencies
- **Multi-Level Community Coordination:** Regularly convene a collaborative of community agencies, ensure coordination and effective communication, foster consensus, monitor needs and activities, gather feedback, and coordinate and contribute to broader HMG LA rollout
- **Communications & Outreach:** Develop a communication strategy, leveraging HMG LA communications materials, to increase community and provider awareness of child development, EII, and other HMG-related topics
- **Regional Learning:** Collaborate with First 5 LA, the TA/Evaluation partner, collaborative agencies, and other Pathways communities to support ongoing learning, monitoring, data collection, analysis, and evaluation of HMG LA Pathways; participate in learning opportunities and coordinate with TA provider to identify & address technical assistance needs
- **Resource Mobilization:** Work with collaborative partners to attract and leverage resources (funding, staff, services, assets) to connect to the strategies of the HMG LA Pathways community, and develop a sustainability plan

[4] California Health Interview Survey (CHIS) data indicates Black children ages 1-5 had the lowest prevalence of accessing developmental screening across all racial/ethnic groups, with more than 20% fewer Black children receiving screening compared to white (2015-18 data, accessed at https://healthpolicy.ucla.edu/publications/Documents/PDF/2021/Developmental-Screening-Among-Children-policybrief-jun2021.pdf). First 5 LA's Year 1 Indicators report reports that Asian and Pacific Islander children ages 0-5 have the lowest rate of accessing early intervention services across all racial/ethnic groups, and the highest average age of enrollment in special education services, where earlier intervention is generally thought to have the greatest effectiveness (2018-19 data, accessed at https://www.first5la.org/wp-content/uploads/2020/09/First-5-LA-2020-Indicators-Report.pdf.

- **Pilot Collaborative-Identified Strategies:** Support the HMG LA Pathways community with ongoing planning, implementation, reflection and refinement of strategies selected to achieve desired EII change

While Community 2's specific Pathways approaches will be finalized in Year 1 with collaborative partners, SGPRC has proposed the following preliminary planned approaches:

- Formalizing existing agency partnerships and establishing new partnerships
- Planning, development, and piloting of a Community Outreach Promotor program to promote access to EII services, including in historically underserved communities
- Developing multi-agency electronic referral and consent forms
- An electronic referral portal, including customized resources for children assessed as ineligible for Regional Center services but still needing supports

Pursuant to the Procurement Policy, Strategic Partners greater than $150,000 must be presented to the Board for approval. Staff is requesting the establishment of a Strategic Partnership for an amount not to exceed $500,000 to comply with this policy.

**GOVERNANCE GUIDELINES #5 AND #6 (SUSTAINABILITY AND LEVERAGING):**

**Sustainability**

First 5 LA funds are intended to provide seed capital for the planning, buildout, and piloting of Pathways approaches. First 5 LA will work closely with SGPRC to develop a plan for sustaining these approaches long-term. With respect to the Community Outreach Promotor pilot (see "Proposed Work of the Strategic Partner"), promising potential funding avenues include the forthcoming Community Navigator funding[5] from the Department of Developmental Services (included in DDS FY21-22 budget), as well as the Medi-Cal Community Health Worker state plan amendment.[6] To support sustainability of this program, a vital component of Pathways will be to capture key program data and document lessons learned. With regards to infrastructure such as a web-based referral portal on the SGPRC website, Pathways will primarily cover the initial buildout costs, while SGPRC will be responsible for ongoing maintenance. Prior to initiating this Strategic Partnership, SGPRC was already in early stages of researching such a tool and has demonstrated interest in this approach as a way to support easier referral processes for families and partners.

**Leveraging**

All SGPRC staff time for the Pathways project will be contributed as in-kind support, while First 5 LA funds will be used for initial buildout of technology infrastructure and other core programmatic costs. SGPRC will also leverage their existing relationships with organizations such as SPIRITT Family Services and Parents' Place Family Resource & Empowerment Center to create an initial collaborative of partners and strengthen adoption of Pathways interventions across the San Gabriel/Pomona region. Lastly, SGPRC leverages prior funded grant work such as a DDS-funded disparities study and previous equity-focused grant projects to closely inform and support this work.

**JUSTIFICATION:**

A strategic partner is defined as having an existing infrastructure or substantial investment in a program or project that either cannot be duplicated or would be duplicated at the expense of First 5 LA, and has the demonstrated resources, ability, program reach, or level of expertise to support First 5 LA's systems change work. Strategic Partnerships also include entities that administer jointly funded programs or entities with key relationships when these are critical to advancing First 5 LA's Strategic Plan

**Overview of SGPRC's Experience and Qualifications**

[5] https://casetext.com/statute/california-codes/california-welfare-and-institutions-code/division-45-services-for-the-developmentally-disabled/chapter-16-general-provisions/section-45199-community-navigator-program
[6] https://www.dhcs.ca.gov/community-health-workers

SGPRC has over 35 years of experience delivering EII services in the San Gabriel/Pomona region, and 30 years of experience administering and implementing grants. As the regional center serving all of Community 2, SGPRC holds a unique and central role in the region's EII landscape, both as a service provider for Early Start and as a referring agency for a wide array of services for children with developmental delays and/or disabilities. Further illustrating their role in the community, multiple other partners contacted during field research recommended SGPRC as ideally suited to serve as Unifying Agency (UA). Lessons learned from Pathways Wave 1 indicate that, while regional centers do not necessarily need to serve as UA, their active participation is vital for Pathways' success.

SGPRC was unique among regional centers in choosing to stay open for in-person services throughout the COVID-19 pandemic, while maintaining strict safety protocols, after determining that virtual services would be insufficient for many community members. As a result of this, SGPRC has seen a recent increase in referrals which has reemphasized the need to strengthen referral pathways and improve system efficiency. At the same time, gaps in access remain for many communities across Community 2, leading SGPRC to also emphasize intentional, equity-focused community engagement.

Recent SGPRC work relevant to the Pathways project includes the following:

- **Hiring community outreach specialists** focused on supporting SGPRC's Asian communities (particularly Vietnamese, Mandarin Chinese, and Korean families)
- **Developmental Journey of Children in the African American Community project**, which sought to strengthen outreach to African American families in Community 2
- **Parent Mentor Initiative pilot**, in which SGPRC had the opportunity to first develop a parent mentor/promotor model. For the Pathways project, they plan to build on this expertise to launch the currently proposed Community Outreach Promotor pilot focused specifically on EII
- **Disparities study,** funded by DDS from 2018-2020 to investigate disparities in EII services utilization, identify underlying reasons for these disparities by different racial/ethnic groups, and identify potential system solutions
- **Phone Mass Notification System project**, demonstrating recent experience adopting and rolling out new technology. Driven by families' requests for more proactive information-sharing through text messages and social media, SGPRC developed a community engagement app enabling them to connect with families via cell phones and share information in multiple languages during emergencies
- **Multiple translation projects**, prioritizing the Community 2 threshold languages of Spanish, Mandarin Chinese, Korean, and Vietnamese

As a result of these and other projects, SGPRC brings a wealth of experience, resources, and existing relationships to support implementation of the Pathways project. In particular, SGPRC is well-suited to implement Pathways' expanded focus on equity, and has already done a great deal of groundwork to support strengthening access to EII services for communities which have historically been under-served by these systems. Equity has been a consistent priority elevated by the HMG LA Community and Family Engagement Council (CFEC), with both available local data and CFEC expertise recommending specific outreach to Black/African American, Asian, and Pacific Islander communities.

Altogether, SGPRC's unique role in the Community 2 EII landscape, existing relationships with EII providers and community based organizations throughout Community 2, and substantial direct service experience in the field of EII make SGPRC ideally positioned to serve in the central coordinating role of Unifying Agency for Community 2, and could not be duplicated by another agency.

**Market Research that Led to the Proposed Contractor**

A competitive solicitation has been released twice for this community with extensive outreach and no awards. Following these solicitations, field research was conducted to further explore the landscape of providers, community needs, and barriers to participation. First 5 LA staff then reached out to multiple agencies in Community 2 for exploratory meetings; however, no other organization indicated that they were prepared to serve as UA at this time, and some directly recommended SGPRC for this role.

SGPRC has demonstrated a history of strong and consistent investments that positions them well to achieve the goals of Pathways, and was the only organization to submit an application for Community 2 in response to the second solicitation released. While they did not initially meet RFP requirements due to misunderstanding the directions for budget submission with phase limits (disqualifying them per criteria of the solicitation), First 5 LA has subsequently made these limits by phase optional based on feedback from Wave 1 grantees and field research, and met with SGPRC to clarify the new budget requirements. SGPRC has confirmed that they remain interested and committed to serving as Unifying Agency (UA).

SGPRC's proposed Community Outreach Promotor strategy is unique among Pathways grantees and therefore offers the opportunity for innovative learnings about how to best engage families and improve access to EII services. This approach also supports the aim of Strengthening Peer and Community Support for EII, which has remained a consistent priority of the HMG LA Community and Family Engagement Council. SGPRC brings robust infrastructure to implement this approach for Pathways, with strong partnerships to subcontract the work, and a track record of implementing similar programs that can be adapted for this project. Additionally, this pilot is coming at a critical time as potential sustainable funding sources are emerging such as the Department of Developmental Services Community Navigator initiative and Medi-Cal Community Health Worker benefit.

**Establishment of Total Project Cost and Use of Funds**
Pathways Wave 1 UAs were initially funded up to $450,000 per community for three years to collectively plan, implement, and evaluate their approaches, in close coordination with their Collaboratives and supporting the rollout for HMG LA more broadly. During RFP development, the total project cost was estimated based on anticipated costs for the three phases of HMG LA Pathways: 1) Convening and Planning, 2) Implementing Innovative Approaches to Strengthen Referral Pathways, and 3) Refinement of Approaches. The scope of work template for all UAs also included minimum project activities (listed in the above "Proposed Work" section) that informed use of funds.

In spring 2022, all Wave 1 Pathways communities' total project budgets were expanded to $500,000 to address program implementation limitations due to budget size and delays of other HMG LA components that affected Pathways timelines. The proposed budget for Community 2 is equal to this new amount ($500,000 over three years) to ensure parity across all LA County HMG LA Pathways communities.

The proposed project funds will provide seed capital for the planning, buildout, and piloting of collaboratively identified Pathways approaches. SGPRC staff time will be entirely contributed as in-kind support. First 5 LA funds will be used to cover core program costs such as:

- Contract with community partners to design the Community Outreach Promotor pilot, develop and deliver a training curriculum, and pilot the program while determining long-term sustainable funding sources
- Complete initial buildout of web-based, multi-agency referral and consent forms on the SGPRC website
- Develop and translate parent-facing educational materials
- Stipends for community partners to attend and actively engage in Collaborative meetings

**Alignment with Strategic Plan**
The HMG LA Pathways Project is a systems-change initiative focused on strengthening EII service coordination and operationalizing the Help Me Grow model at the local level. Alignment with the First 5 LA 2020-2028 Strategic Plan includes the following:

- **Results for Children and Families:** Pathways closely supports results 1 – Families optimize their child's development, and 2 – Children receive early developmental supports and services by adopting new, innovative approaches to strengthening EII services coordination.
- **Strategic Priorities:** Pathways is closely aligned with Strategic Priority (SP) 1 – Strengthen public and community systems, through both infrastructure-building (e.g., electronic referral systems) and increased partnership-building and planning. Additionally, Pathways' flexibility in selecting approaches supports SP2 – Advance and build on community experience; and the evaluation component aligns with SP3 – Expand influence and impact with data.

- **Outcomes for Child- and Family-Centered Systems:** Pathways closely aligns with all four outcomes by supporting accessible, quality, aligned, and sustainable EII services and supports. A core focus of the Pathways project is to increase system accessibility. All Pathways grantees are required to take a collaborative (aligned) approach by convening a group of community partners to plan and implement the work. The Pathways project also includes multiple cycles of continuous learning and reflection to support quality implementation. Lastly, all UAs will focus on sustaining approaches from early on, working with First 5 LA staff to develop a sustainability plan.
- **Values:** The proposed scope of work has been updated to more directly reflect First 5 LA's value of Diversity, Equity, and Inclusion, by focusing on more intentional identification of and support for families that have historically faced barriers to EII services due to language, logistical barriers, systemic racism, and other factors.

**NEXT STEPS**

Staff anticipates returning to the Board for action at the May 2022 Board meeting to approve this Strategic Partnership with San Gabriel Pomona Regional Center (SGPRC) for an amount not to exceed $500,000 for the period of three years. If approved in May, staff will proceed with contract execution which is not subject to board approval since the contract amount will be under $150,000.

Help Me Grow LA

# Early Identification and Intervention: Help Me Grow LA Update

**Tara Ficek,** Director, Health Systems
**Zully Jauregui,** Senior Program Officer, Health Systems

**April 21, 2022**

# EARLY IDENTIFICATION & INTERVENTION (EII)




- **Overarching EII Objective:** Advocate for policies and transformative practices to ensure that public systems provide maternal health services as well as child early identification and intervention services.
- **Advances Result Area #2:** Children receive early developmental services and supports
- **Multiple efforts** contributing to strengthening EII with a focus on the health care delivery system.

# ABOUT HELP ME GROW LA (HMG LA)



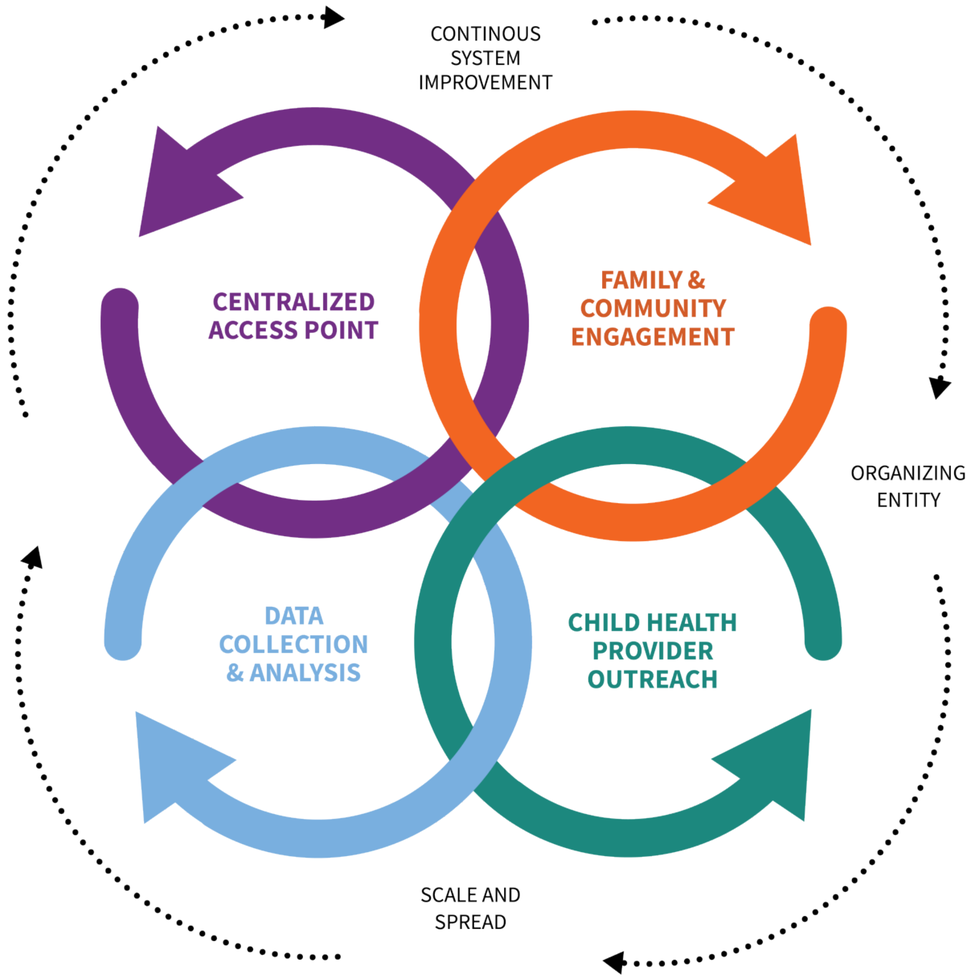
- A system that **promotes early identification** and **connects young children** at risk or with developmental/behavioral delays to intervention services
  - Promotes local cross-sector collaboration
  - Seeks to coordinate existing resources and systems
  - Adaptable, responsive to local context

- Launched in 2017, countywide planning process culminated in recommendation report.

- F5LA and LACDPH are co-implementing HMG LA, supported via a 5-year Strategic Partnership (2018-2023)

# HELP ME GROW LA: CORE COMPONENTS






**Build a Centralized Access Point** to help families and providers access needed resources and services.

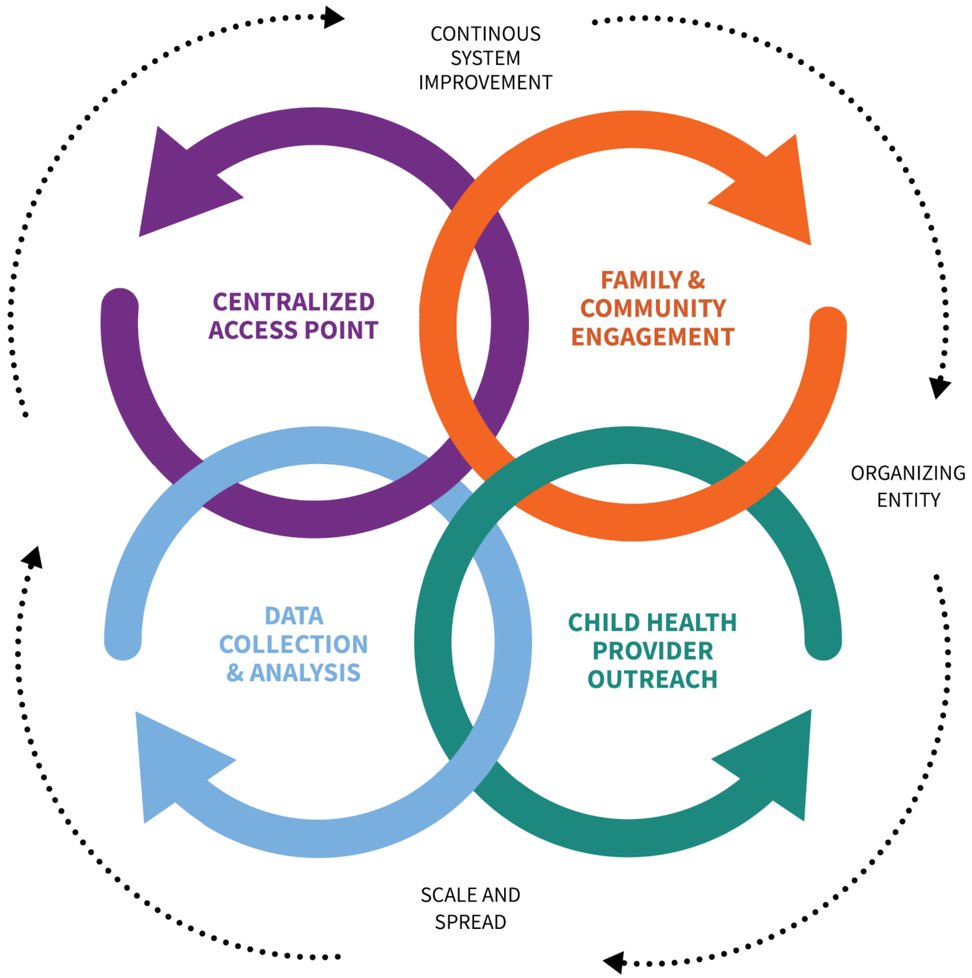
**Engage with Families and Communities** to support their child's development.

**Support Child Health Providers** to identify developmental concerns and connect families to resources.

**Collect and Analyze Data** to measure success and improve the coordination of programs and services in local communities.

# HELP ME GROW LA: CORE COMPONENTS






## Build a Centralized Access Point

- Website and Call Line led by LAC DPH

## Engage with Families and Communities

- Advisory Council and HMG LA Pathways

## Support Child Health Providers

- L.A. Care Partnership

## Collect and Analyze Data

- Data collection and evaluation efforts across all HMG LA programs

# HMG LA IMPLEMENTATION

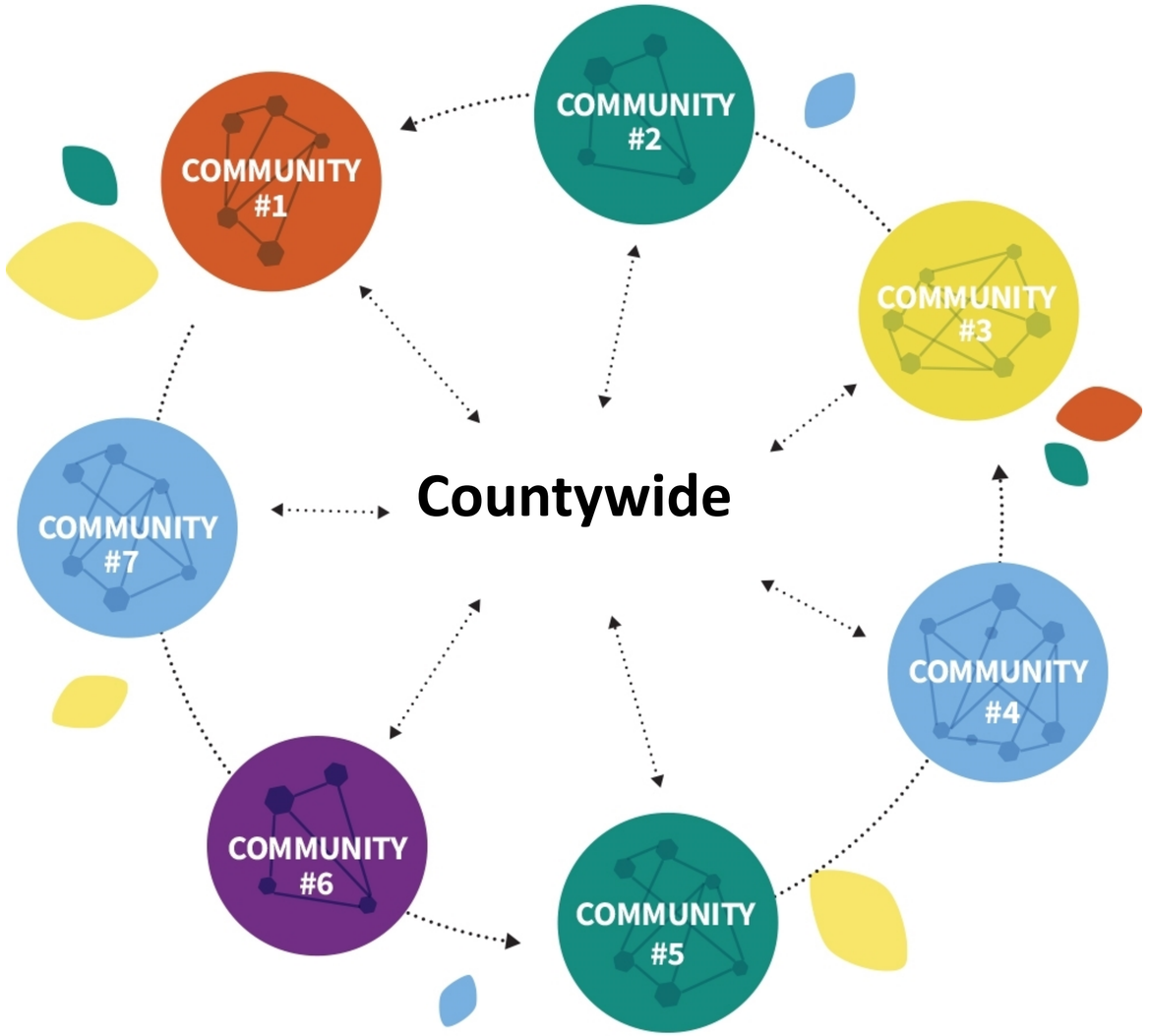


- **Initial Implementation:** Multiple factors contributed to delays: complex contract negotiations, partner capacity due to COVID, limited RFP response
- **Critical Milestone:** FY22-23 represents important progress for HMG LA with all components operational.
- **Sustainability:** Integrated in design for some HMG LA activities (Pathways) while yet to be determined for others (Centralized Access Point)
- **Shifting External Landscape:** Prop. 56 incentive payments, Medi-Cal reform and re-procurement

# HMG LA Pathways

Help Me Grow LA is a collaboration between First 5 LA and Los Angeles County Department of Public Health.
Visit HelpMeGrowLA.org for more information.

# COUNTYWIDE-COMMUNITY APPROACH




# HMG LA PATHWAYS OVERVIEW


- A three-year grant investment from F5LA
- The goal of Help Me Grow LA Pathways is to improve existing referral pathways regionally within LA County.
- F5LA is funding technology, infrastructure and practice components (staffing, software, equipment, etc.) to strengthen referral pathways within each collaborative.

# INTENDED OUTCOMES



1. **Improved communication and tracking** on referral status between referring agency and referral source
2. **Reduction in wait times** between screening and assessment, and between assessment and prevention or intervention services
3. **Decrease in the age at which children are referred** to services and begin services
4. **Increase in successful referrals** (i.e., referrals appropriate based on screening results and families followed through on referrals) on first attempt
5. **Increase in parent/caregiver satisfaction** with referral process and linkage to services

# PATHWAYS TIMELINE

- **Wave 1:**
  - Five communities began work in October 2020
  - No applicants for Communities 2 & 7
- **Wave 2:**
  - No applicants advance for Community 2
  - No applicants for Community 7

- **Reevaluation and Adaptation of Procurement Approach**
- **Field Research and Exploratory Meetings**

# PATHWAYS WAVE 2 – STRATEGIC PARTNERSHIPS



- **Community 2**
  - **Unifying Agency:** San Gabriel Pomona Regional Center
- **Community 7**
  - **Unifying Agency:** City of Long Beach, Department of Health and Human Services
- **Overview:**
  - Centering on DEI
  - Sustainability & Leveraging

# NEXT STEPS


## Board Approval

- **April:** Program and Planning Committee Meeting (Info)
- **May:** Board of Commissioners Meeting (Action)
- **May/June:** FY22-23 Budget represents EII areas of investment for year ahead

# Questions and Comments

# APPENDIX: PATHWAYS SELECTED APPROACHES



| Approach | Examples |
|---|---|
| **Adopting a web-based, interagency referral platforms** | • Replacing many excel, paper, disparate data sources with one shared regional portal to track & exchange referrals |
| **Expanding, strengthening, and formalizing partnerships** | • MOUs, data sharing agreements, subcontracts<br>• Relationship-building at collaborative meetings |
| **Establishing shared workflows, protocols, and processes** | • Portal-related workflows<br>• Consent protocols<br>• Warm handoff |
| **Family outreach & engagement** | • Trainings & webinars<br>• Communications<br>• Consent script to ensure understanding |
| **Healthcare provider outreach & engagement** | • Clinic & hospital outreach |
| **Routinely collecting and analyzing program data for CQI, including family feedback** | • Parent surveys<br>• Referral data<br>• Data sensemaking meetings |

**Agenda Item: 5**
**Date: April 21, 2022**

**FIRST 5 LA**

**SUBJECT:**
**Establish a Strategic Partnership with City of Long Beach, Department of Health and Human Services (LB DHHS) in the Amount of $500,000 to Serve as the Unifying Agency (UA) for the Help Me Grow LA Pathways Collaborative to Strengthen Referral Pathways for Early Identification and Intervention Services and Supports in Community 7 (Harbor) for the Period of Three Years**

**RECOMMENDATION (PROVIDED AS INFORMATION):**
This memo is provided as information for the Board's consideration at the April 21, 2022 Program and Planning Committee (PPC) meeting. First 5 LA staff recommends that at the May 12, 2022 Commission meeting, the Board approve the establishment of a Strategic Partnership with City of Long Beach, Department of Health and Human Services (LB DHHS) for an amount not to exceed $500,000 for the period of three years. Funds for FY 22-23 will be included in the First 5 LA Programmatic Budget under Help Me Grow, which will be presented to the Board of Commissioners for approval in June 2022. Final contract execution will be contingent on board approval of the First 5 LA FY 22-23 Programmatic budget. Beyond FY 22-23, funds will be pulled from the assigned fund balance which will be brought to the Board of Commissioners for approval in June of the corresponding fiscal year. At the time of budget approval, requested resources will shift from the Assigned resource category of the fund balance, dedicated for broad Strategic Plan purposes, to the Committed category, amounts dedicated for a more specified purpose via resolution.

**BACKGROUND:**

**Overview of the Help Me Grow LA Pathways Project**
According to the Centers for Disease Control and Prevention (CDC), children's brains are the most adaptable in the first three years of life. Intervening early when signs of developmental delays or disabilities are first identified can change a child's developmental trajectory and improve outcomes for children and families.[1] However, many families face substantial barriers to navigating Early Identification and Intervention (EII) services such as a lack of coordination among providers, complex eligibility and referral processes, obstacles to data sharing, and many more. In L.A. County, it is estimated that as many as 30-40% of young children would benefit from prevention and early intervention services and supports by age 3.[2] However, many children do not receive such services until they reach kindergarten, if at all.[3]

Help Me Grow (HMG) is a national systems change model that promotes cross-sector coordination and integration at the local level to strengthen developmental and behavioral screening, assessment and linkage to early intervention supports through the following four core components: Child Health Care Provider Outreach (CHPO); Community & Family Engagement (CFE); Centralized Access Point (CAP); and Data Collection and Analysis (DCA). Through these components, HMG aims to strengthen the early identification and intervention continuum of care by increasing developmental screenings, strengthening awareness of and destigmatizing developmental health, linking children to services more efficiently, and collecting data for quality improvement and illustrating impact. Help Me Grow LA (HMG LA) is adapting and implementing the national HMG model for families in L.A. County.

Beginning in 2016-2017, a variety of stakeholders with professional and personal experience with EII were convened in a series of planning work groups to inform the implementation of HMG LA. Recommendations from this work group were captured in the October 2017 report Promoting Young Children's Optimal Development. Among these recommendations were the need to:

[1] Centers for Disease Control and Prevention. Updated 2021. Why Act Early if You're Concerned about Development?. Available at https://www.cdc.gov/ncbddd/actearly/whyActEarly.html.
[2] First 5 LA. (2012). Early Developmental Screening and Intervention Initiative (EDSI): Lessons Learned.
[3] First 5 LA, 2012; Children Now, First 5 Association of California, & Help Me Grow California. (2014). Ensuring Children's Early Success: Promoting Developmental and Behavioral Screenings in California.

- Test and refine strategies before scaling them countywide, and
- Adopt a "centralized-decentralized" approach, combining countywide approaches (such as the CAP and large-scale media campaigns) with more localized (community-based) efforts. Including localized approaches is particularly important given the size and complexity of L.A. County, and since EII services, including screenings, case management, care coordination and intervention services, are delivered at the local level within existing systems and sectors.

The HMG LA Pathways investment was developed in response to these recommendations to strengthen referral pathways across EII systems at the local level, while testing innovative approaches to inform the larger HMG LA effort. Specifically, the Help Me Grow LA Pathways communities will plan and implement one or more innovative approaches designed to strengthen and expand EII referral pathways within a localized community setting to ensure all children identified with a delay or at risk of delay can effectively access appropriate timely services. Final approaches are selected by each community to align with local needs.

HMG LA Pathways work is led by a collaborative of agencies that provide early identification and intervention services and supports within a given geographic region. This collaborative is convened and supported by a Unifying Agency (primary grantee) and is expected to include both Collaborative Agencies (subcontractors that support implementation and learning) and Supporting Partners (non-funded partners who participate in Collaborative meetings and Pathways activities, but without deliverables and a formal subcontract) that will work together to plan and implement the work. This project is comprised of three phases: Convening and Planning; Implementing Innovative Approaches to Strengthen Referral Pathways; and Refinement of Approaches.

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- **Reevaluating and Adapting Procurement Approach:** As no candidates for Communities 2 and 7 were identified during the first two waves of solicitation, First 5 LA launched field research to better understand community needs, the landscape of providers, and barriers preventing organizations from submitting a successful proposal. Based on this field research and lessons learned from Pathways Wave 1, the Pathways procurement approach was reevaluated, and the following key adjustments were made:
    - Budget: Survey results from both RFPs indicated that the limited budget was a challenge for applicants given the scope. In response to these concerns, the three-year award was increased from $450,000 to $500,000 and budget limits for each phase were removed.

- Scope of Work: Based on feedback from Wave 1 grantees, the scope of work was streamlined by consolidating and simplifying deliverables where possible. Additionally, in alignment with First 5 LA's values and taking into account recommendations from HMG LA's Community and Family Engagement Council, a more explicit focus on equity was added to Wave 2 scope to intentionally engage communities that have historically faced greater barriers to accessing EII services (including Asian American/Asian, Native Hawaiian/Other Pacific Islander, African American/Black, and Latino/a/e/x communities).[4]
- Outreach: Outreach was prioritized to sectors that are currently underrepresented across the current Pathways collaboratives (e.g., school districts, health departments) in addition to core EII service providers such as regional centers.

- **Market Research that Led to the Preferred Contractor:** Through a combination of survey results and outreach across the Center for Child and Family Impact, organizations were identified as potential partners for Communities 7. First 5 LA staff met with three organizations in Community 7 on an exploratory basis. There was lack of capacity or experience among agencies except LB DHHS, who was identified as an entity that could achieve the prescribed scope of work at scale requested for the Unifying Agency; the **City of Long Beach, Department of Health and Human Services (LB DHHS)** rose to the top as the ideal candidate to serve as Unifying Agency for HMG LA Pathways in Community 7 based on their expertise, existing relationships, and capacity to serve as a lead agency in this effort.

**Proposed Work of the Strategic Partner with Objectives & Outcomes**
Through the testing of innovative approaches, HMG LA Pathways intends to achieve the following:

- Improved communication and tracking on referral status between referring agency and referral source;
- Reduction in wait times between screening and assessment, and between assessment and prevention or intervention services;
- Decrease in the age at which children are referred to services and begin services;
- Increase in successful referrals (i.e., referrals appropriate based on screening results and families followed through on referrals) on first attempt;
- Increase in parent/caregiver satisfaction with referral process and linkage to services; and
- Deliberative community engagement with communities (e.g., Asian American/Asian, Native Hawaiian/Other Pacific Islander, African American/Black, and Hispanic/Latino/a/e/x) that have historically faced barriers to accessing early identification and intervention services.

As Unifying Agency, LB DHHS will support a collaborative of agencies that provide early identification and intervention services and supports within a given geographic region to implement one or more strategies designed to strengthen referral pathways across agencies. The collaborative is expected to include both Collaborative Agencies (subcontractors that support implementation and learning) and Supporting Partners (partners who participate in Collaborative meetings and Pathways activities, but without deliverables and a formal subcontract). Projected activities of the Unifying Agency include but are not limited to:

- **Administrative Oversight:** Including contract administration, compliance, fiscal administration, monitoring, invoicing, and developing and managing subcontracts with Collaborative Agencies
- **Multi-Level Community Coordination:** Regularly convene a collaborative of community agencies, ensure coordination and effective communication, foster consensus, monitor needs and activities, gather feedback, and coordinate and contribute to broader HMG LA rollout
- **Communications & Outreach:** Develop a communication strategy, leveraging HMG LA communications materials, to increase community and provider awareness of child development, EII, and other HMG-related topics

[4] California Health Interview Survey (CHIS) data indicates Black children ages 1-5 had the lowest prevalence of accessing developmental screening across all racial/ethnic groups, with more than 20% fewer Black children receiving screening compared to white (2015-18 data, accessed at https://healthpolicy.ucla.edu/publications/Documents/PDF/2021/Developmental-Screening-Among-Children-policybrief-jun2021.pdf). First 5 LA's Year 1 Indicators report reports that Asian and Pacific Islander children ages 0-5 have the lowest rate of accessing early intervention services across all racial/ethnic groups, and the highest average age of enrollment in special education services, where earlier intervention is generally thought to have the greatest effectiveness (2018-19 data, accessed at https://www.first5la.org/wp-content/uploads/2020/09/First-5-LA-2020-Indicators-Report.pdf.

- **Regional Learning:** Collaborate with First 5 LA, the TA/Evaluation partner, collaborative agencies, and other Pathways communities to support ongoing learning, monitoring, data collection, analysis, and evaluation of HMG LA Pathways; participate in learning opportunities and coordinate with TA provider to identify & address technical assistance needs
- **Resource Mobilization:** Work with collaborative partners to attract and leverage resources (funding, staff, services, assets) to connect to the strategies of the HMG LA Pathways community, and develop a sustainability plan
- **Pilot Collaborative-Identified Strategies:** Support the HMG LA Pathways community with ongoing planning, implementation, reflection and refinement of strategies selected to achieve desired EII change

While Community 7's specific Pathways approaches will be finalized in Phase 1 with collaborative partners, LB DHHS has proposed the following preliminary planned approaches:

- Formalizing existing agency partnerships and establishing new partnerships
- Developing multi-agency electronic referral and consent forms
- Leveraging Unite Us, their LB Resource Line platform, to strengthen existing referral pathways for HMG LA Pathways

Pursuant to the Procurement Policy, Strategic Partners greater than $150,000 must be presented to the Board for approval. Staff is requesting the establishment of a Strategic Partnership for an amount not to exceed $500,000 to comply with this policy.

**GOVERNANCE GUIDELINES #5 AND #6 (SUSTAINABILITY AND LEVERAGING):**

**Sustainability**
First 5 LA funds are intended to provide seed capital for the planning, buildout, and piloting of Pathways approaches. Potential approaches and associated costs are pending collaborative consensus during Phase 1, convening and planning. First 5 LA will work closely with LB DHHS to develop a plan for sustaining these approaches long-term. Additionally, the proposed strategic partnership with LB DHHS aligns closely with First 5 LA's investment guidelines of Equity, Sustainability, Partnership, Systems Change, and Evidence and Innovation, as the objectives of the Pathways project are to establish a regional collaborative of partners to develop, implement, evaluate and sustain innovative approaches to strengthen EII referral pathways at the local level, and promote greater accessibility of EII services to communities which have historically experienced disparities in access.

**Leveraging**
LB DHHS will leverage Unite Us, their LB Resource Line platform, to strengthen existing referral pathways for HMG LA Pathways. The Unite Us Resource and Referral platform is currently being supported by federal American Rescue Plan funding until May 2023. LB DHHS is committed to maintaining this network. Funding streams to maintain Unite Us are still to be determined, with grants and California Advancing and Innovating Medi-Cal (CalAIM) reimbursements being potential options; the LB Resource Line work may be eligible for CalAIM reimbursements as community support services (resource navigation, housing navigation, etc.).

LB DHHS will cover the costs of the HMG coordinator and resident engagement costs to incentivize participation (refreshments, childcare, translation and interpretation), reflecting their investment in HMG LA Pathways. They will also leverage existing relationships with agency partners who are part of the Long Beach Early Childhood Education Committee, All Children Thrive Initiative, Best Start Central Long Beach Collaborative, the Long Beach Home Visitation Collaborative and other partners who are experts in EII to build out the collaborative.

**JUSTIFICATION:**

A strategic partner is defined as having an existing infrastructure or substantial investment in a program or project that either cannot be duplicated or would be duplicated at the expense of First 5 LA, and

has the demonstrated resources, ability, program reach, or level of expertise to support First 5 LA's systems change work. Strategic Partnerships also include entities that administer jointly funded programs or entities with key relationships when these are critical to advancing First 5 LA's Strategic Plan

**Overview of LB DHHS Experience and Qualifications**
The LB DHHS brings a wealth of experience, resources, and existing relationships to successfully implement HMG LA Pathways and support First 5 LA's systems change work in the Long Beach area. They have a long history of championing early identification and intervention (EII), with strengthening EII being a core part of their early childhood strategic plan.

During the COVID-19 pandemic, LB DHHS saw the tremendous need for a more effective referral platform and utilized the Unite Us Resource and Referral platform to create a specific database for Long Beach. They are currently using Unite Us as part of the LB Resource Line, which allows residents to speak with knowledgeable Resource Navigators who can connect them to various resources throughout the community. LB DHHS will utilize this existing infrastructure and investment to strengthen existing referral pathways for HMG LA Pathways in the EII space.

LB DHHS has the tools and mechanisms in place for convening, outreach, family engagement and data collection, all key HMG LA Pathways activities. In addition, LB DHHS prioritizes centering equity within their efforts and values parent experience and expertise, beliefs and practices also held by HMG LA. LB DHHS experience relevant to the HMG LA Pathways project includes:

- **Parent engagement:** LB DHHS is committed to parent engagement and understands the critical role it plays in outreach and services; they have the infrastructure in place to support community and family engagement related to EII, a core component of HMG. Their Parent Leadership Academy (PLAy), which is a partnership between the City of Long Beach and the Long Beach Early Childhood and Education Committee, is a 6-week program focused on empowering parents to be advocates. With this knowledge, they can become peer providers and be embedded in different spaces. Many of these parents have children with special needs; HMG LA Pathways can leverage this existing infrastructure to support HMG LA.
- **Addressing equity:** LB DHHS has recently established a Health Equity Team, which consists of five Equity Coordinators with lived experience to address disparities in communities that have historically faced challenges accessing EII services, such as Black, Cambodian and Filipino communities. This effort has the support of Robert Garcia, the City of Long Beach Mayor, who has prioritized the need to focus on early childhood to address disparities. With this prioritization, LB DHHS has the potential to leverage these equity investments for the HMG LA Pathways effort, outreaching to communities that have historically faced barriers to accessing early identification and intervention services. LB DHHS is also the backbone support for groups such as the Black Health Equity Council and Mi Vida Cuenta. As mentioned above, outreaching to underrepresented communities is an elevated priority for this project to address gaps in access and promote equity, one of First 5 LA's investment guidelines.
- **Early childhood expertise:** LB DHHS is a key partner in existing early childhood efforts such as home visiting and early childhood and education (ECE). In 2018, LB DHHS released the City's first comprehensive Strategic Plan centering the needs of children 0-8, their families, and the professionals who support them. They are active in the Home Visiting Collaborative in Long Beach and have led the implementation of the Early Development Home Instrument (EDI) to inform their early childhood efforts. HMG LA Pathways can be integrated with these other early childhood efforts of importance to First 5 LA.
- **Key relationships:** LB DHHS has relationships with childcare providers, stakeholders currently underrepresented in existing HMG LA Pathways collaboratives. They have demonstrated the ability to pull committed partners together successfully, such as with All Children Thrive, due to the trust building they have been doing in the community for the past 5 years. LB DHHS also has relationships with Harbor Regional Center and the Long Beach School District, which are the primary sources to refer to for developmental delays. Their roles, if any, are still to be determined. Current HMG LA Pathways collaboratives have experienced challenges in engaging school

districts; with these existing relationships, LB DHHS is well positioned to bridge connections with these key partners in the Harbor area.

Altogether, LB DHHS has the existing infrastructure and substantial investment in the referral network in Long Beach that can be leveraged for Pathways. They have the demonstrated resources, ability, program reach, and level of expertise to support First 5 LA's systems change work. With their unique role in the Community 7 EII landscape, existing relationships, and experience in the field of EII, LB DHHS is ideally positioned to serve in the central coordinating role of Unifying Agency for Community 7 which could not be duplicated by another agency.

**Market Research that Led to the Proposed Contractor**
With two waves of solicitations yielding no awards for a Unifying Agency in Community 7, First 5 LA embarked on exploratory discussions with three organizations in Community 7. It was found there was lack of capacity and experience among two of the three agencies to spearhead this effort. Based on their expertise, experience and existing relationships with key partners, LB DHHS was identified as the entity that could achieve the prescribed scope of work at scale desired for the Unifying Agency role.

As described above, LB DHHS has substantially invested time and resources into a referral network and key relationships in the Long Beach area that cannot be duplicated. As the local health jurisdiction (health department) for the City of Long Beach, they have the resources and expertise that no other organization in Community 7 has to successfully and expeditiously lead the HMG LA Pathways collaborative.

**Establishment of Total Project Cost and Use of Funds**
Pathways Wave 1 Unifying Agencies (UAs) were initially funded up to $450,000 per community for three years to collectively plan, implement, and evaluate their approaches, in close coordination with their collaboratives, and support the rollout for HMG LA more broadly. During RFP development, the total project cost was estimated based on anticipated costs for the three phases of HMG LA Pathways: 1) Convening and Planning, 2) Implementing Innovative Approaches to Strengthen Referral Pathways, and 3) Refinement of Approaches. The scope of work template for all UAs also included minimum project activities (listed in the above "Proposed Work" section) that informed use of funds.

In spring 2022, all Wave 1 Pathways communities' total project budgets were expanded to $500,000 to address program implementation limitations due to budget size and delays of other HMG LA components that affected Pathways timelines. The proposed budget for Community 2 is equal to this new amount ($500,000 over three years) to ensure parity across all L.A. County HMG LA Pathways communities.

The proposed project funds of $500,000 over three years will provide seed capital for the planning, buildout, and piloting of collaboratively identified HMG LA Pathways approaches. For Year 1, LB DHHS staff will be supported up to 5% time with First 5 LA funds, and LB DHHS will cover the costs of the HMG coordinator and resident engagement costs to incentivize participation (refreshments, childcare, translation and interpretation). First 5 LA funds will also be used to cover costs of vendors to facilitate collaborative meetings and provide needed professional development to improve the service delivery system in the network.

**Alignment with Strategic Plan**
The HMG LA Pathways Project is a systems-change initiative focused on strengthening EII services coordination and operationalizing the Help Me Grow model at the local level. Alignment with the First 5 LA 2020-2028 Strategic Plan includes the following:

- **Results for Children and Families:** Pathways closely supports results 1 – Families optimize their child's development, and 2 – Children receive early developmental supports and services by adopting new, innovative approaches to strengthening EII services coordination.
- **Strategic Priorities:** Pathways is closely aligned with Strategic Priority (SP) 1 – Strengthen public and community systems, through both infrastructure-building (e.g., electronic referral systems) and increased partnership-building and planning. Additionally, Pathways' flexibility in selecting

approaches supports SP2 – Advance and build on community experience; and the evaluation component aligns with SP3 – Expand influence and impact with data.

- **Outcomes for Child- and Family-Centered Systems:** Pathways closely aligns with all four outcomes by supporting accessible, quality, aligned, and sustainable EII services and supports. A core focus of the Pathways project is to increase system accessibility. All Pathways grantees are required to take a collaborative (aligned) approach by convening a group of community partners to plan and implement the work. The Pathways project also includes multiple cycles of continuous learning and reflection to support quality implementation. Lastly, all UAs will focus on sustaining approaches from early on, working with First 5 LA staff to develop a sustainability plan.
- **Values:** The proposed scope of work has been updated to more directly reflect First 5 LA's value of Diversity, Equity and Inclusion, by focusing on more intentional identification of and support for families that have historically faced barriers to EII services due to language, logistical barriers, systemic racism, and other factors.

**NEXT STEPS**

Staff anticipates returning to the Board for action at the May 2022 Board meeting to approve this Strategic Partnership with City of Long Beach, Department of Health and Human Services (LB DHHS) for an amount not to exceed $500,000 for the period of three years. If approved in May, staff will proceed with contract execution which is not subject to board approval since the contract amount will be under $150,000.

# Early Identification and Intervention: Help Me Grow LA Update

**Tara Ficek,** Director, Health Systems
**Zully Jauregui,** Senior Program Officer, Health Systems

**April 21, 2022**

Help Me Grow LA is a collaboration between First 5 LA and Los Angeles County Department of Public Health.
Visit HelpMeGrowLA.org for more information.

# EARLY IDENTIFICATION & INTERVENTION (EII)




- **Overarching EII Objective:** Advocate for policies and transformative practices to ensure that public systems provide maternal health services as well as child early identification and intervention services.
- **Advances Result Area #2:** Children receive early developmental services and supports
- **Multiple efforts** contributing to strengthening EII with a focus on the health care delivery system.

# ABOUT HELP ME GROW LA (HMG LA)



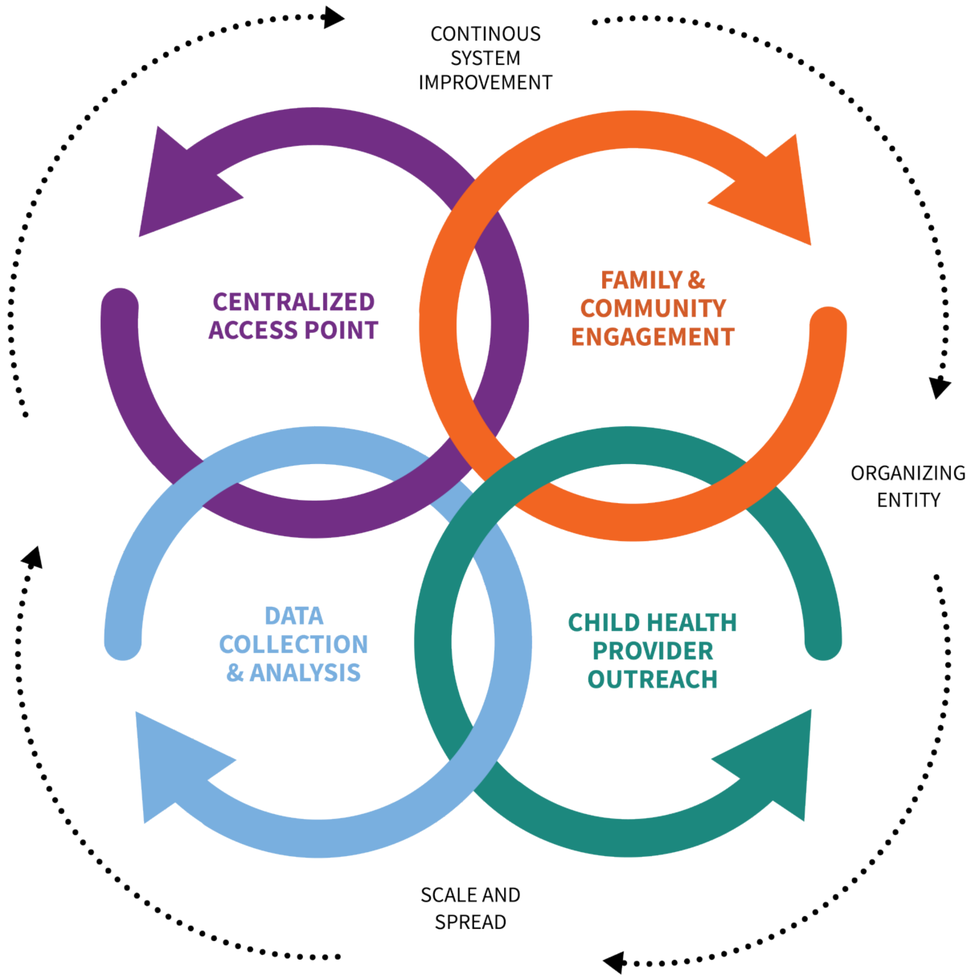
- A system that **promotes early identification** and **connects young children** at risk or with developmental/behavioral delays to intervention services
  - Promotes local cross-sector collaboration
  - Seeks to coordinate existing resources and systems
  - Adaptable, responsive to local context

- Launched in 2017, countywide planning process culminated in recommendation report.

- F5LA and LACDPH are co-implementing HMG LA, supported via a 5-year Strategic Partnership (2018-2023)

# HELP ME GROW LA: CORE COMPONENTS






**Build a Centralized Access Point** to help families and providers access needed resources and services.

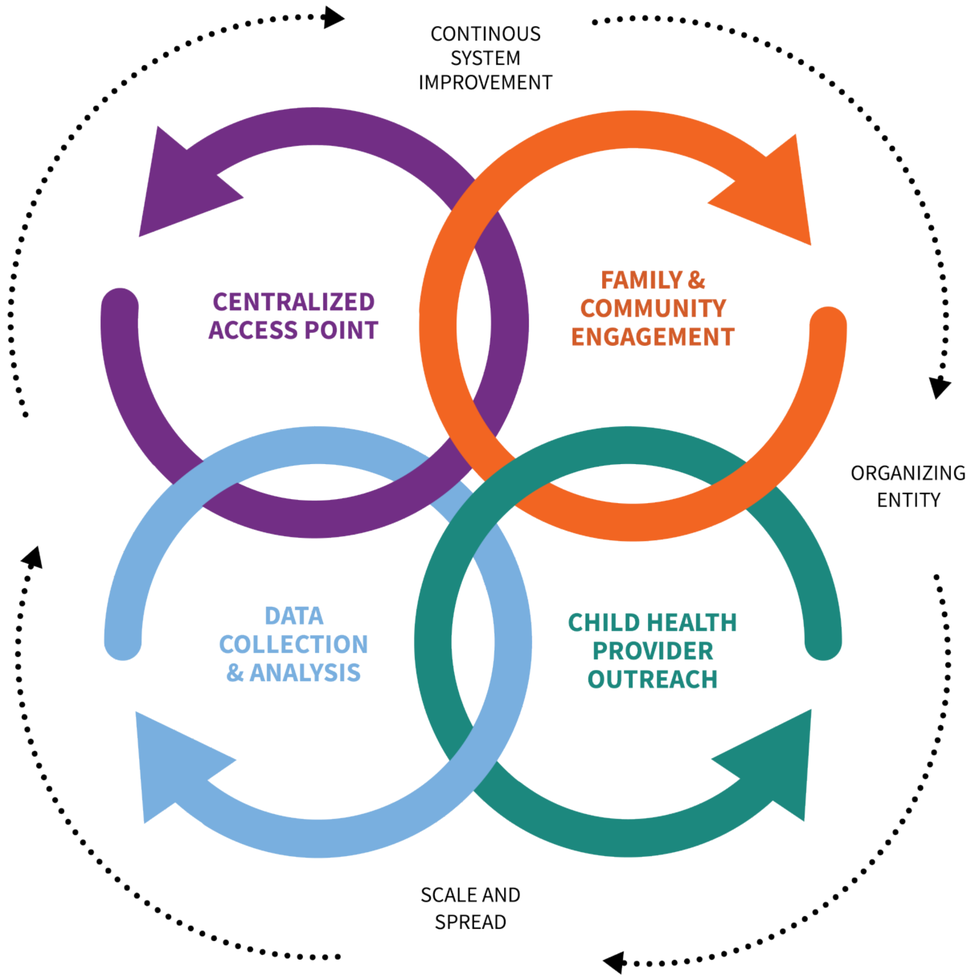
**Engage with Families and Communities** to support their child's development.

**Support Child Health Providers** to identify developmental concerns and connect families to resources.

**Collect and Analyze Data** to measure success and improve the coordination of programs and services in local communities.

# HELP ME GROW LA: CORE COMPONENTS






## Build a Centralized Access Point

- Website and Call Line led by LAC DPH

## Engage with Families and Communities

- Advisory Council and HMG LA Pathways

## Support Child Health Providers

- LA Care Partnership

## Collect and Analyze Data

- Data collection and evaluation efforts across all HMG LA programs

# HMG LA IMPLEMENTATION

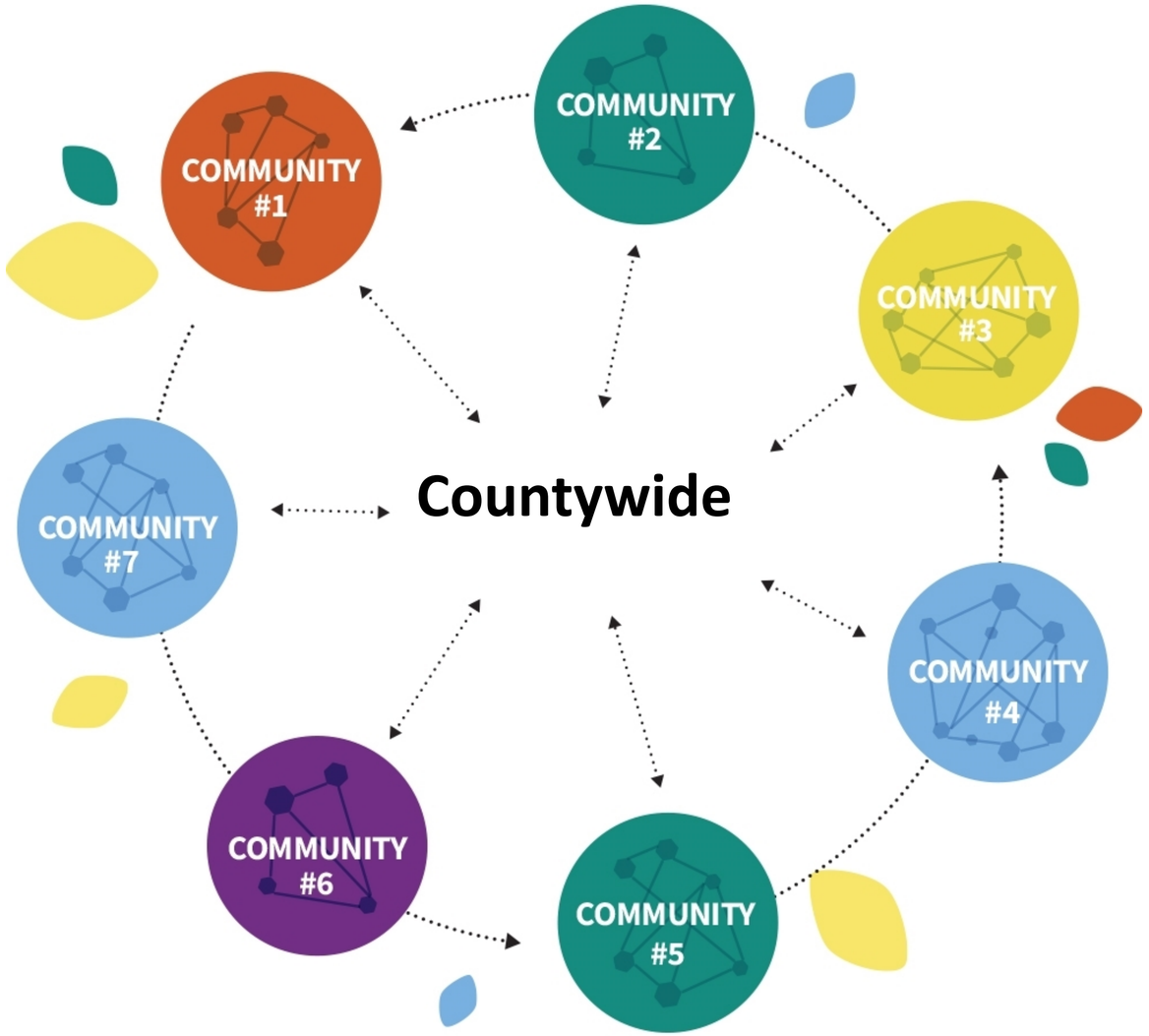


- **Initial Implementation:** Multiple factors contributed to delays: complex contract negotiations, partner capacity due to COVID, limited RFP response
- **Critical Milestone:** FY22-23 represents important progress for HMG LA with all components operational.
- **Sustainability:** Integrated in design for some HMG LA activities (Pathways) while yet to be determined for others (Centralized Access Point)
- **Shifting External Landscape:** Prop. 56 incentive payments, Medi-Cal reform and re-procurement

# HMG LA Pathways

Help Me Grow LA is a collaboration between First 5 LA and Los Angeles County Department of Public Health.
Visit HelpMeGrowLA.org for more information.

# COUNTYWIDE-COMMUNITY APPROACH




# HMG LA PATHWAYS OVERVIEW


- A three-year grant investment from F5LA
- The goal of Help Me Grow LA Pathways is to improve existing referral pathways regionally within LA County.
- F5LA is funding technology, infrastructure and practice components (staffing, software, equipment, etc.) to strengthen referral pathways within each collaborative.

# INTENDED OUTCOMES



1. **Improved communication and tracking** on referral status on referral status between referring agency and referral source
2. **Reduction in wait times** between screening and assessment, and between assessment and prevention or intervention services
3. **Decrease in the age at which children are referred** to services and begin services
4. **Increase in successful referrals** (i.e., referrals appropriate based on screening results and families followed through on referrals) on first attempt
5. **Increase in parent/caregiver satisfaction** with referral process and linkage to services

# PATHWAYS TIMELINE

- **Wave 1:**
  - Five communities began work in October 1, 2020
  - No applicants for Communities 2 & 7
- **Wave 2:**
  - No applicants advance for Community 2
  - No applicants for Community 7

- **Reevaluation and Adaptation of Procurement Approach**
- **Field Research and Exploratory Meetings**

# PATHWAYS WAVE 2 – STRATEGIC PARTNERSHIPS



- **Community 2**
  - **Unifying Agency:** San Gabriel Pomona Regional Center
- **Community 7**
  - **Unifying Agency:** City of Long Beach, Department of Health and Human Services
- **Overview:**
  - Centering on DEI
  - Sustainability & Leveraging

# NEXT STEPS



## Board Approval

- **April:** Program and Planning Committee Meeting (Info)
- **May:** Board of Commissioners Meeting (Action)
- **May/June:** FY22-23 Budget represents EII areas of investment for year ahead

# Questions and Comments

# APPENDIX: PATHWAYS SELECTED APPROACHES



| Approach | Examples |
|---|---|
| **Adopting a web-based, interagency referral platforms** | • Replacing many excel, paper, disparate data sources with one shared regional portal to track & exchange referrals |
| **Expanding, strengthening, and formalizing partnerships** | • MOUs, data sharing agreements, subcontracts<br>• Relationship-building at collaborative meetings |
| **Establishing shared workflows, protocols, and processes** | • Portal-related workflows<br>• Consent protocols<br>• Warm handoff |
| **Family outreach & engagement** | • Trainings & webinars<br>• Communications<br>• Consent script to ensure understanding |
| **Healthcare provider outreach & engagement** | • Clinic & hospital outreach |
| **Routinely collecting and analyzing program data for CQI, including family feedback** | • Parent surveys<br>• Referral data<br>• Data sensemaking meetings |

**Agenda Item: 7**
**Date: April 21, 2022**

**FIRST 5 LA**

**SUBJECT:**
Board of Commissioners Diversity, Equity, and Inclusion Survey: A Review of Preliminary Results

**BACKGROUND:**
The Board-approved 2020-2028 Strategic Plan uplifts Diversity, Equity, and Inclusion (DEI) as an organizational value and Equity as an investment guideline – each being a critical lens through which First 5 LA's culture and work (internally and externally) continues to be shaped and improved. The Board of Commissioners has championed First 5 LA's efforts to embrace DEI more fully, acknowledging that this is a long-term journey that supports organizational transformation. To deepen our knowledge and commitment to DEI, the Board approved a contract with the Seed Collaborative, LLC (Seed) to facilitate a staff-led process, grounded in data, to inform how we can best advance DEI in our organizational culture, internal policies, and practices.

Seed's scope of work includes Board and staff learning opportunities to strengthen knowledge and competencies that enable successful implementation of DEI strategies. In February 2022, Seed presented a training on Targeted Universalism (TU) to provide foundational understanding for terms such as diversity, equity, inclusion, and belonging. In April 2022, staff administered a brief survey to gauge Commissioners' understanding of other these terms along with other DEI concepts often used in the field (i.e., justice, anti-racism). The survey also provided an opportunity for Commissioners to share their thoughts about the Board's governance role, interest in learning topics, and experiences with DEI training. The Program and Planning Committee (PPC) meeting is an opportunity for Commissioners to reflect on preliminary survey data and provide additional insights and reflections that will inform First 5 LA's DEI report, Board and staff-level recommendations, and upcoming Board learning opportunities.

**DISCUSSION:**
A shared understanding of DEI concepts provides a solid foundation for First 5 LA's current and future work. Survey data reinforced the importance of cultivating shared understanding and collective commitments to DEI, particularly as Commissioners and staff navigate critical conversations about the impact we seek, our fiscal realities, and the norms and practices – at Board and staff levels – that shape our organizational culture.

During the PPC meeting, the presentation and discussion will focus on the following highlights and initial observations:

- Similar to First 5 LA staff, there are varying definitions and understanding of DEI concepts often used in the field (i.e., diversity, equity, inclusion, belonging, justice, anti-racism).
- *Anti-racism*, *justice*, and *equity* were noted as the concepts most important in helping Commissioners fulfill their governance role.
- *Diversity*, *equity*, *inclusion*, *belonging*, *anti-racism*, and *justice* were identified as equally important in helping First 5 LA to fulfill its role as an agent of systems change.
- There are varying perspectives on Board knowledge, culture, and relationships.

**NEXT STEPS:**
During the Spring/Summer 2022, staff will continue analysis of the survey data and analyze additional input from the Program and Planning Committee. Staff will explore Board-level DEI recommendations for Board considerations based on the data. To support the development of Board-level recommendations, the Seed Collaborative, LLC will provide a second Board learning opportunity building on survey results and reflections from the Program and Planning Committee. In the Fall 2022, staff anticipates sharing emerging Board and staff-level recommendations and producing First 5 LA's final DEI report.

# Board of Commissioners Diversity, Equity, and Inclusion Survey

## A Review of Preliminary Results

Special Meeting of the Board of Commissioners/Program and Planning Committee Meeting

April 21, 2022

Presenters:
Antoinette Andrews-Bush, Chief Transformation Officer
Ashley Griffith, Senior Strategist, Diversity, Equity, and Inclusion

# Presentative Objectives

- Share highlights and initial observations from the diversity, equity, and inclusion (DEI) survey
- Provide opportunities for additional input and reflections
- Provide brief progress update and roadmap
- Review next steps

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first 5 la
Giving kids the best start

# Purpose of the Survey

Provide an opportunity for the Board of Commissioners to share thoughts and experiences related to:

- Terms and Definitions
- Board's Governance Role
- Interest in Learning Topics
- Experiences with DEI Training

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The data and subsequent Board discussions will inform First 5 LA's DEI report, Board and staff-level recommendations, and upcoming Board learning opportunities.



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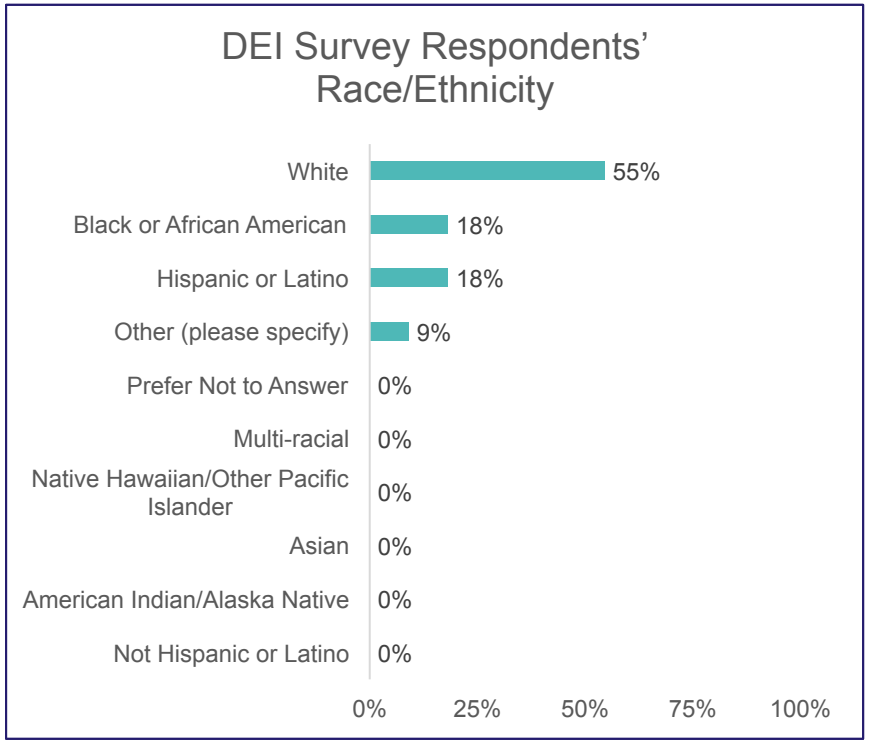
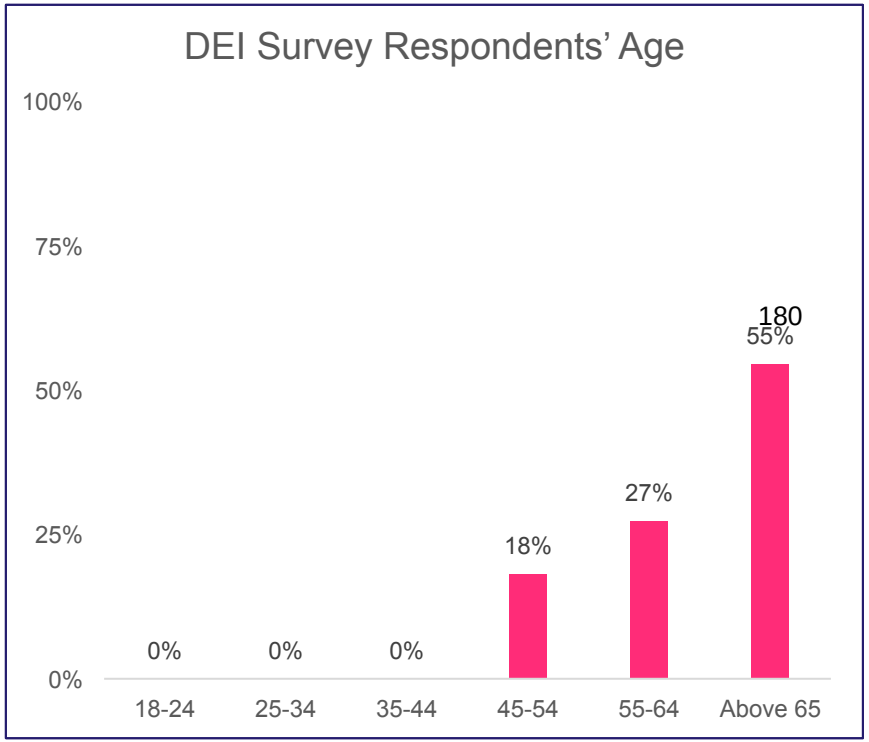
# Administering the Survey

- SurveyMonkey sent via email to 12 Board of Commissioners and eight alternates
- Survey open six days (April 4 – April 11, 2022)
- Eleven responses as of April 11, 2022

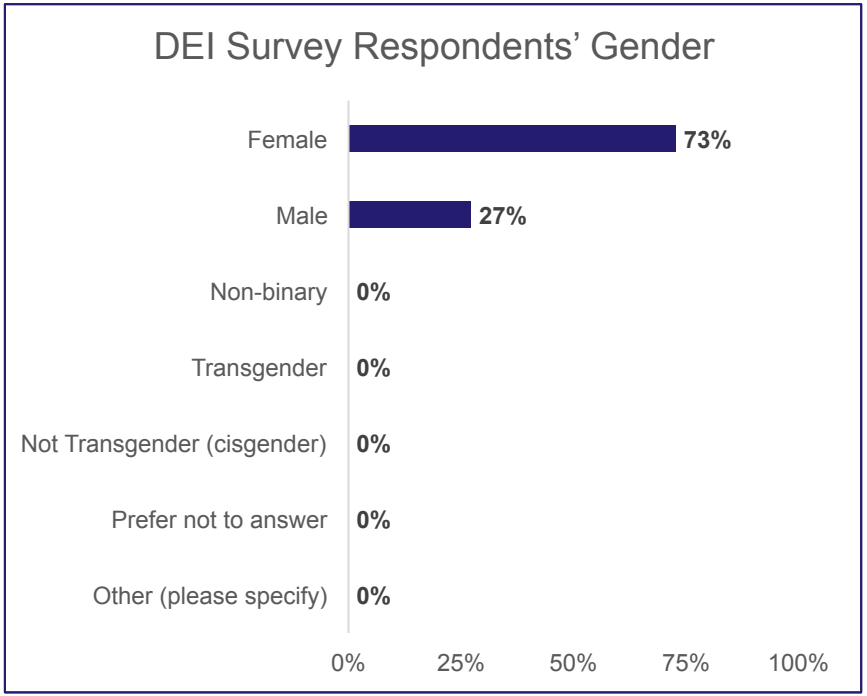

Note:
The survey did not include an option for respondents to identify themselves as a Commissioner or alternate.

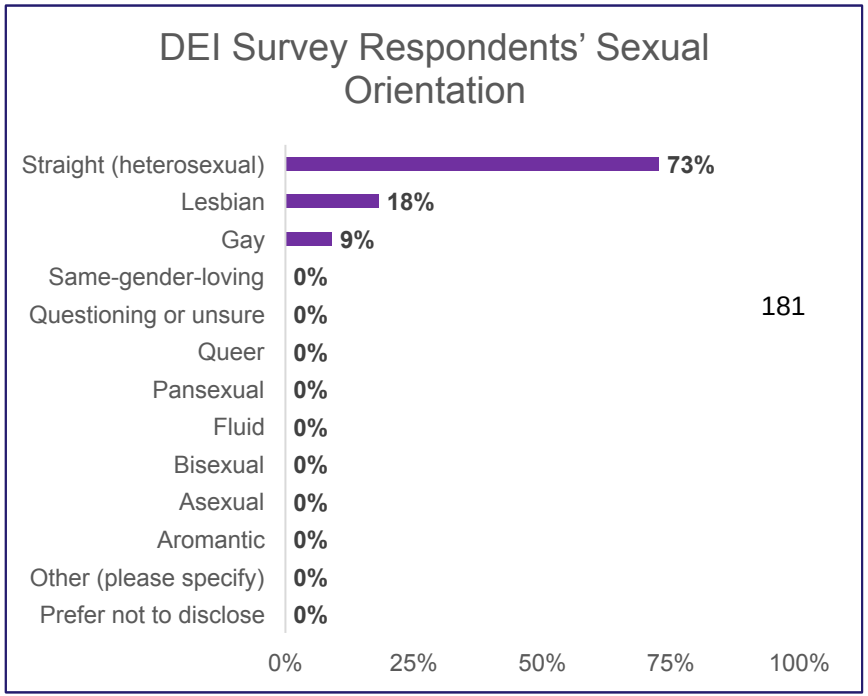
# Who did we hear from?



# Who did we hear from?



# Highlights and Initial Observations

- Similar to First 5 LA staff, there are **varying definitions and understanding of DEI concepts** often used in the field.
- **Anti-racism**, **justice**, and **equity** were noted as the concepts most important in helping Commissioners fulfill their governance role.
- **Diversity**, **equity**, **inclusion**, **belonging**, **anti-racism**, and **justice** were identified[182] as equally important in helping First 5 LA fulfill its role as an agent of systems change.
- There are varying perspectives on **Board knowledge, culture** and **relationships**.
- **Targeted Universalism**, **DEI in systems change**, and **implicit bias/micro-aggressions** identified as the top training topics to help Commissioners fulfill their governance role.

# Varying Definitions and Understanding of DEI Concepts

| Concept | Examples of Commissioner Responses |
|---|---|
| Diversity | • Inclusion of everyone<br>• Different people, cultures, views, approaches<br>• A group that includes people from different social/racial/ethnic backgrounds<br>• A great variety of racial and gender and national origin and language choices represented in every civil group and workplace |
| Equity | • Same opportunity regardless of status<br>• Equal outcomes for people of differing traits and abilities because society and those in power level the playing field<br>• That everyone has not only access (equality) to services, but that their access is to the best |
| Inclusion | • A state of being valued, respected and supported. It's about focusing on the needs of every individual and ensuring the right conditions are in place for each person to achieve full potential<br>• Purposeful effort to include a broad array of people<br>• Diverse viewpoints respected and valued |

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# Varying Definitions and Understanding of DEI Concepts

| Concept | Examples of Commissioner Responses |
|---|---|
| Belonging | • Diverse communities feeling included and respected in decision-making<br>• Creating bridges of connection so that all can see themselves reflected in others and feel both sameness and pride in difference<br>• A sense of being connected, feeling secure and part of the team…feeling comfortable being yourself within the team or group |
| Justice | • Fairness<br>• The view that everyone deserves equal economic, political and social rights and opportunities<br>• Equitable application of laws and rules that are fairly derived and fashioned for the common good in the broadest sense. |
| Anti-Racism | • Opposing bias, prejudice, or differential treatment because of race<br>• Working to make sure no one suffers diminishment of quality of life or outcomes based on racial identity chosen or perceived<br>• Leaders and organizations working consistently and fervently against racism |

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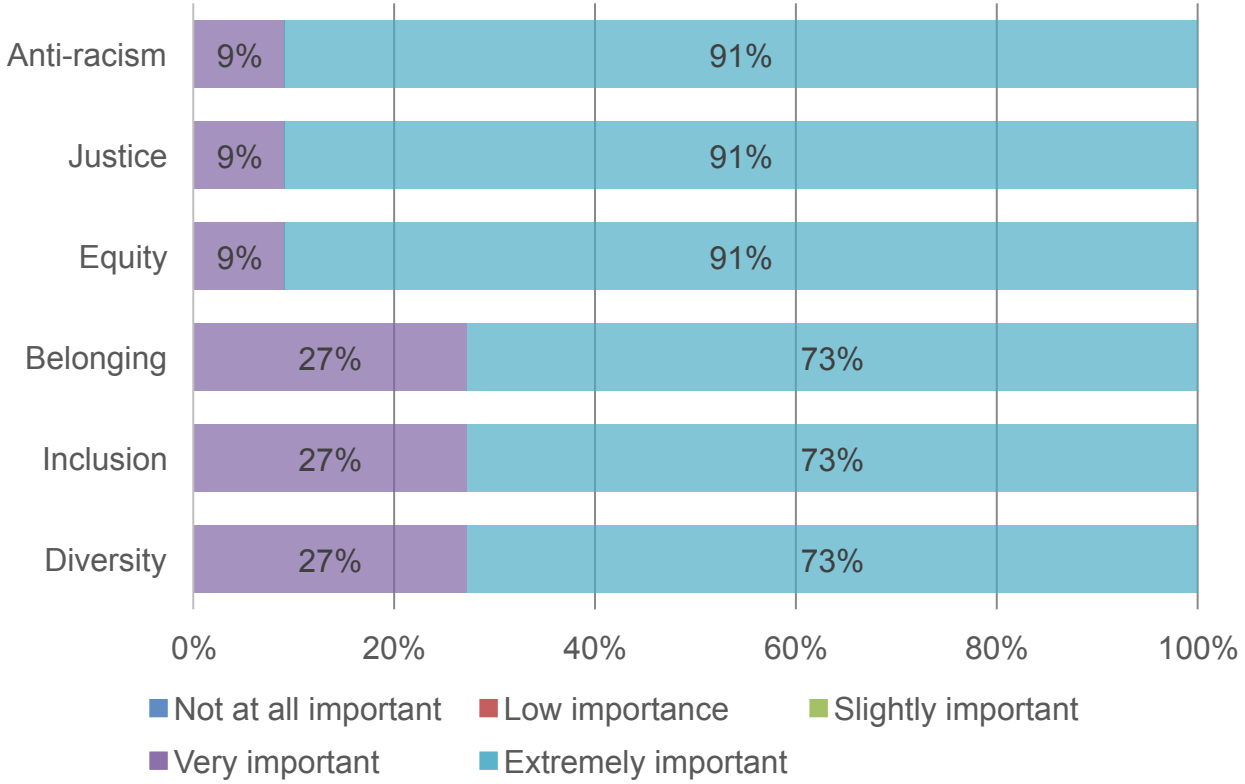
# Level of importance of concepts in helping Commissioners fulfill governance role

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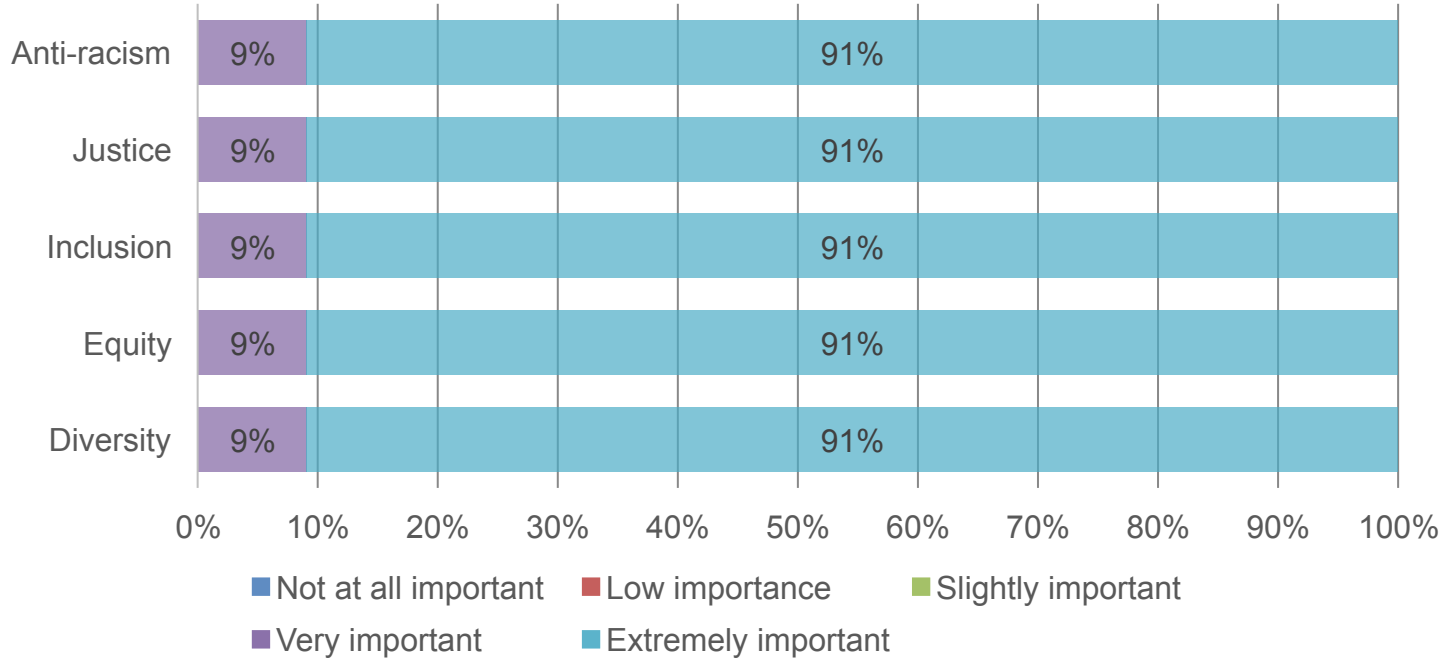
# Level of importance of concepts in helping First 5 LA fulfill its role as an agent of systems change

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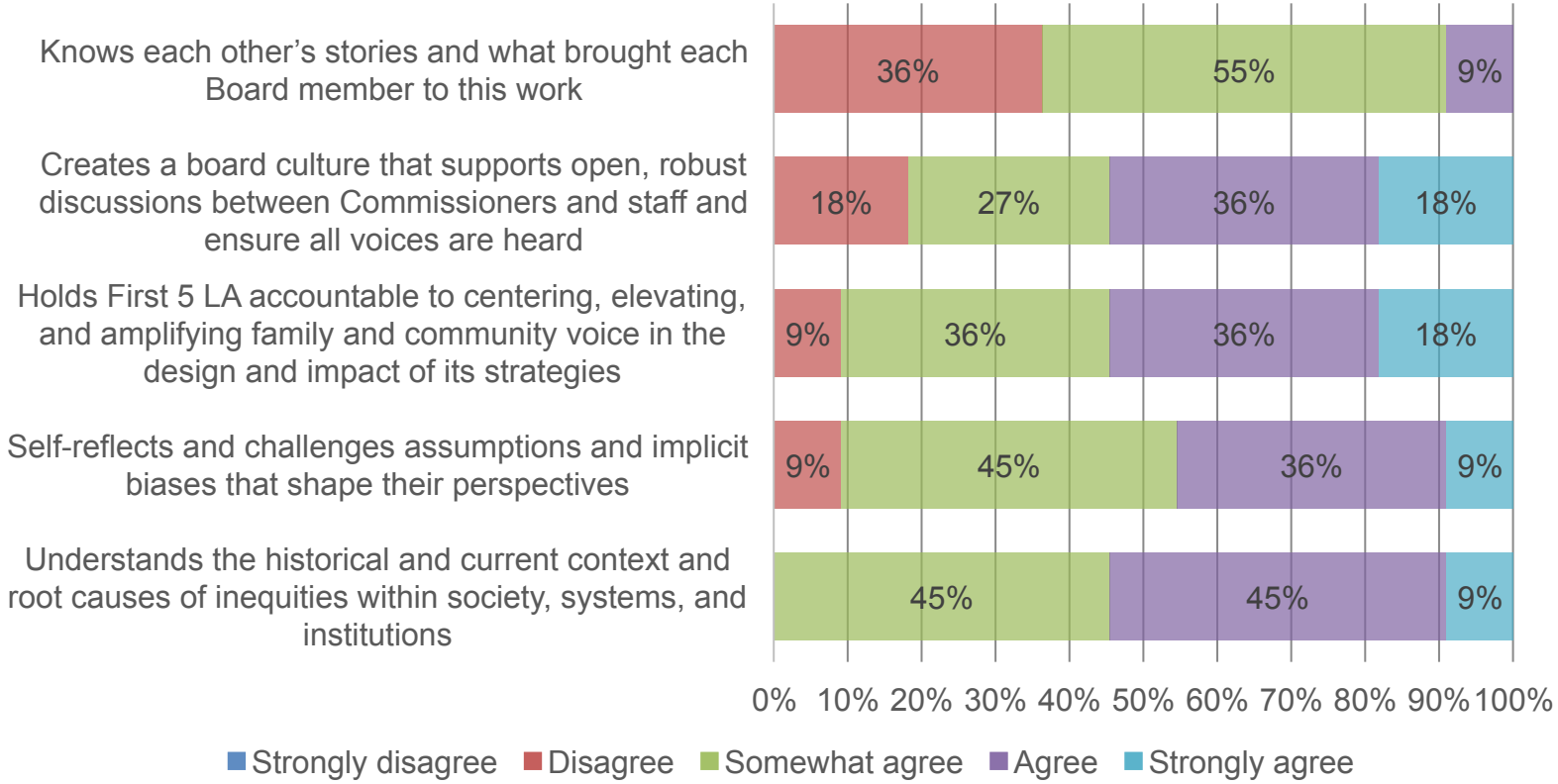
# Board Knowledge, Culture and Relationships

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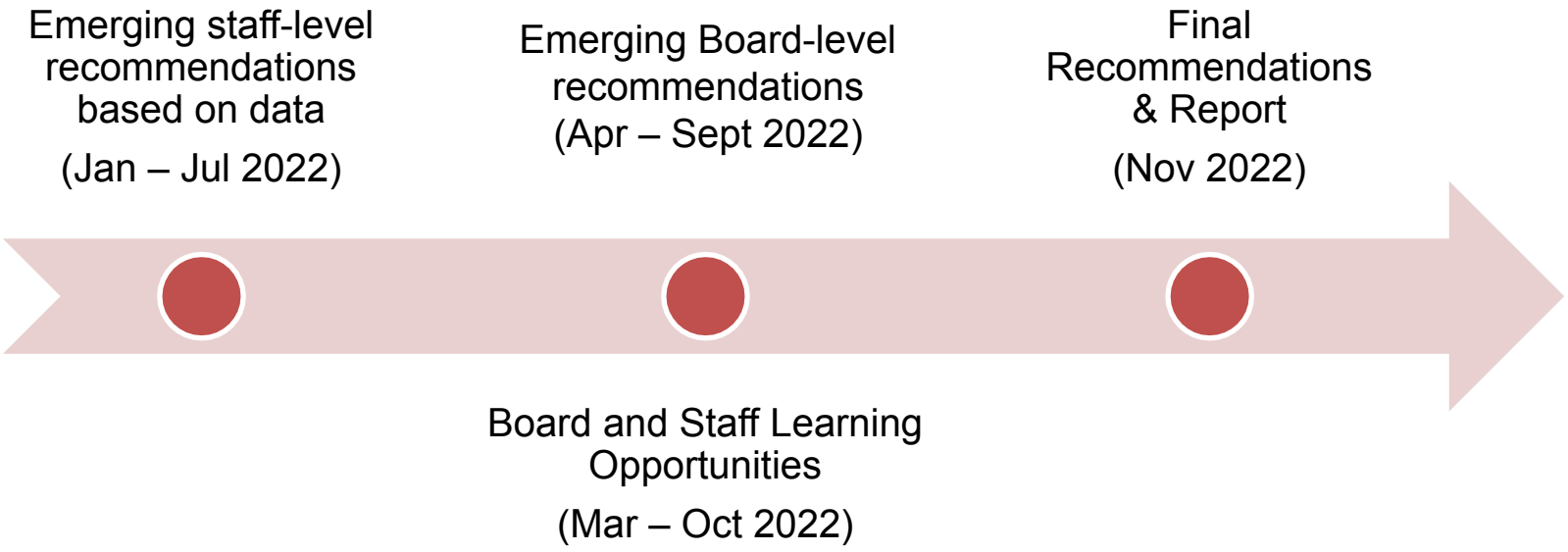
# Progress Update and Roadmap

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# Next Steps

- **Spring/Summer 2022:** Continue analysis of Board survey data and analyze additional input from Program and Planning Committee; explore Board-level recommendations for Board consideration based on the data
- **Summer/Fall 2022:** Provide 2nd Board learning opportunity building on survey results and reflections from the Program and Planning Committee
- **Fall 2022**: Share emerging Board and staff-level recommendations and produce final DEI report

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# Discussion

- What stood out for you?
- What resonated?
- What is your beginning thinking about Board-level recommendations to strengthen First 5 LA's DEI work?