

# Executive Summary

**“Each of us must come to care about everyone else’s children. We must recognize that the welfare of our children is intimately linked to the welfare of all other people’s children.”**

—Lilian Katz, PhD.



In FY 2007-08, the First 5 Commission of San Diego County (First 5 San Diego) supported a network of six interconnected initiatives to address the needs of children ages 0-5 years and their families, and key identified contractors to address strategic areas of importance. A number of initiatives (i.e., Oral Health, Preschool for All and Healthy Development Services) enhanced their services through new approaches or established clear pathways and protocols that improved the system of service delivery. Other initiatives (i.e., School Readiness and Healthcare Access) continued to refine their existing model; yet others (i.e., First 5 For Parents), implemented their first full year of direct services.

This report contains an analysis and synthesis of the data collected during FY 2007-08. It is a macro analysis of initiative and program successes, as well as the areas for further study and/or needed improvement. This executive summary is organized by the four Issue Areas of the Commission’s Strategic Plan:

- Children’s Health
- Children’s Learning and Social-Emotional Health
- Parent and Family Development and Resources
- System Improvement and Community Change

## Children’s Health

In the Issue Area of Children’s Health, Strategic Plan of First 5 San Diego targets the following Desired Results identified in the Commission’s Strategic Plan:

- + Children are born and stay healthy.
- + Children have access to preventive and comprehensive health care services.
- + Families have the knowledge skills and resources they need to promote their children’s optimal health.

The Commission funded health projects that focused on health insurance enrollment and retention, such as the appropriate use of health care resources, home visits to first time at-risk parents and families, and screenings, assessments and treatment for developmental speech, hearing, vision and behavioral services, as well as parent education, smoking cessation, and provider collaboration. The following is a brief summary of some of the key numbers served and results achieved in the Issue Area of Children’s Health.

## Results-Based Accountability

In an era of increasing public demands for responsible government and accountability, the Commission has structured its focus and funding upon a solid base:

- + The Commission's Strategic Plan targets needs identified from local data and special studies in order for the Commission to fund the efforts that will make a difference for children and families, while avoiding duplication of services.
- + Funded efforts target Strategic Plan priorities, as well as specific, measurable outcomes listed in its Evaluation Framework.
- + Each initiative incorporates direct services, community strengthening, provider capacity building, and systems change strategies.
- + Where possible, contractors are required to use evidence-based or promising practices.
- + Evaluation designs specify process and outcome data to provide feedback for program improvement, monitoring contractor performance and aggregating results to show county level impact and how the results intersect with First 5 efforts across the state.

### Numbers Served

- **First 5 for Parents:** An estimated 1,169 parents received education to support their child's health and promote healthy family behaviors.
- **Healthy Development Services (HDS):** Over one in seven children ages 0-5 years in San Diego County were served through HDS services. Some 32,912 individual children were served through the gateway services. The initiative provided over 8,000 newborn medical home visits, over 2,000 at-risk home visits, and over 13,000 developmental screenings. Over 16,000 hearing and vision screenings were performed. Additionally, a large component of this county-wide project includes screening, assessing, and treating children for developmental, and speech and language concerns. The initiative provided 16,032 screenings to identify developmental concerns and 8,926 screenings for speech and language delays. Approximately half of all children screened were identified as needing further assessment (47.3%).
- **Healthcare Access Initiative (HCA):** Contractors extended outreach to 130,426 families. Of the 13,366 children who received health insurance enrollment assistance, 70.0% were successfully enrolled.
- **Oral Health Initiative (OHI):** Contractors provided oral health screenings to 13,092 children ages 0-5 years and 1,935 pregnant women. In addition, 13,946 children ages 0-5 years and 1,878 pregnant women obtained routine dental treatment, and 680 children ages 0-5 years obtained specialty dental treatment.
- **School Readiness Initiative (SR):** This initiative pursues a "whole child" approach that includes certain health outcomes. As a part of these programs, School Readiness contractors provided 1,779 children with health screenings either by their own staff or by referring the child to other organizations for the screening.

## Key Children’s Health Results

Improving Children’s Health	
Desired Results	Highlights
Children are born and stay healthy	<ul style="list-style-type: none"> <li>■ The overall rates of breastfeeding at 6 weeks of age (76.7%) and 6 months of age (58.0%) for families receiving HDS newborn medical home visits and at-risk home visits met or surpassed the Healthy People 2010 goal.</li> <li>■ The number of pregnant women receiving OHI screenings decreased by 11.6%, but exams and treatment increased (20.6% and 34.1% respectively) from last fiscal year.</li> </ul>
Children have access to preventive and comprehensive health care services	<ul style="list-style-type: none"> <li>■ Due to HCA’s follow-up efforts, 94.7% of families were still enrolled in health insurance at 18 months, surpassing the state’s Medi-Cal and Health Families retention rate (62%).</li> <li>■ In an attempt to ensure that the dental health system of care is seamless, OHI providers increased care coordination efforts by 24.1% for children and 77.5% for pregnant women.</li> <li>■ Over 90% of children utilizing HDS services were insured, and nearly 100% had an appropriate medical home and had received an annual well child visit.</li> <li>■ Just under half (48.5%) of children receiving core School Readiness early care and education services were screened for developmental delays, including fine motor and gross motor skills. This was a significant decrease from last fiscal year (70.6%).</li> <li>■ 75.4% of children participating in PFA were screened for developmental delays using the PEDS, a large increase from last fiscal year (15.9%).</li> <li>■ The majority of children accessing HDS services who were tracked through the evaluation received the services they needed to address development, speech, and behavioral concerns (64.2% of children needing an assessment received services and 73.4% of children needing treatment received services).</li> <li>■ Over half of all children receiving HDS developmental and speech and language demonstrated gains as a result of services (57.1%). However, only a third (33.9%) of children receiving HDS behavioral services demonstrated gains as a result of the service, a dramatic decrease from last fiscal year (62.8%). The majority of children not showing gains in any service area remain in programs for further treatment or are being referred for additional services, either within HDS or to an outside agency.</li> </ul>

## Improving Children’s Health (continued)

Desired Results	Highlights
<p>Families have the knowledge skills and resources they need to promote their children’s optimal health.</p>	<ul style="list-style-type: none"> <li>As part of the follow-up process, HCA contractors provide education and support to families to ensure appropriate use of medical services. A total of over 99% of children visited the doctor within the year, a higher rate than County comparison data. In addition, 32.8% of children visited the dentist within the year, with 14.4% visiting the dentist in the past 6 months -- lower than county benchmark data 52.8% but similar to rates found in OHI.</li> </ul>
	<ul style="list-style-type: none"> <li>Most referrals within HDS Regional Networks (75.6%) resulted in successful initiation of additional services. In addition, 1,787 referrals were provided by HDS partners to other First 5 funded initiatives.</li> </ul>
	<ul style="list-style-type: none"> <li>Families accessing HCA services exhibited consistently lower usage of emergency room services (less than 7% at 12 months and 18 months) than county benchmark comparison data (21.8%).</li> </ul>
	<ul style="list-style-type: none"> <li>OHI provided pediatric dentistry education to 23,280 primary caregivers of children (parents, pregnant women, and child care providers) and 428 dental and health care providers.</li> </ul>
	<ul style="list-style-type: none"> <li>211 San Diego, a resource and referral hotline, provided information on community health resources to approximately 39,000 parents of children ages 0-5 years.</li> </ul>
	<ul style="list-style-type: none"> <li>65,207 Kits for New Parents containing valuable information about child health, development, well being and safety, and as well as how to access local resources were distributed to parents. This was the highest number ever distributed in San Diego County since the program’s inception in 2001. The Kits (in English and Spanish) were revamped and updated by First 5 California in FY 2007-08.</li> </ul>

## Children's Learning and Social-Emotional Health

In the second Issue Area, Children's Learning and Social-Emotional Health, the Commission's Strategic Plan targets the following Desired Results:

- + Children have access to quality services that promote their early learning.
- + Children are socially and emotionally healthy.
- + Children are cognitively developing appropriately.
- + Families have the knowledge and skills they need to support their children's learning and social-emotional health.

The Commission funded a variety of programs that promote children's early learning and social-emotional health including early care and education, parent development, early screenings and referrals to treatment, and provider collaboration. The following is a brief summary of some of the key numbers served and results achieved in the Issue Area of Children's Learning and Social-Emotional Health.

### Numbers Served

- **School Readiness Initiative (SR):** The main thrust of the School Readiness Initiative programs has been to provide high quality early education settings for young children. This year, 5,052 children, including 663 children with disabilities or other special needs received services. Further, 3,277 children participated in activities to ease their transition into kindergarten (also an increase from last fiscal year). Finally, 2,217 parents and caregivers participated in parenting activities to facilitate their child's learning and social-emotional health (all increases from last fiscal year).
- **Preschool for All (PFA):** The initiative provided 142 sessions in the six targeted communities, providing quality preschool experiences to 2,153 children.
- **Parent Education Initiative (PE):** An estimated 4,662 parents received education to support their child's early learning (an increase from last fiscal year).
- **Healthy Development Services (HDS):** The initiative provided 2,860 behavioral screenings. Approximately half of all children screened were identified as needing further assessment (47.3%).

## Key Children’s Learning and Social-Emotional Health Results

Improving Children’s Learning and Social-Emotional Health	
Desired Results	Highlights
Children have access to quality services to promote their early learning	<ul style="list-style-type: none"> <li>■ This year more PFA teachers were educated at or above the Bachelor’s level than last year (40.3% this fiscal year compared to last year’s 32.9%)</li> </ul>
	<ul style="list-style-type: none"> <li>■ The CARES program provides stipends to early education providers so they can further their education and ultimately improve the quality of early care environments. This fiscal year, 534 early care educators completed coursework and received a stipend from San Diego CARES (a decrease from last fiscal year).</li> </ul>
	<ul style="list-style-type: none"> <li>■ The majority of SR preschool teachers (88.0%) were educated at or past the Associate’s degree level (an increase from last fiscal year).</li> </ul>
Children are socially and emotionally healthy	<ul style="list-style-type: none"> <li>■ Children in both PFA and SR programs exhibited statistically significant improvement in the “personal and social competence” domain of the DRDP-R.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Children enrolled in school readiness programs exhibited gains overall in social and emotional competencies, with those enrolled in full time programs exhibiting higher developmental gains than those in part time programs.</li> </ul>
Children are cognitively developing appropriately	<ul style="list-style-type: none"> <li>■ Children in both PFA and SR programs exhibited statistically significant improvement in the “effective learning” domain of the DRDP-R.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Children enrolled in school readiness programs exhibited gains overall in cognitive competencies, with those enrolled in full time programs exhibiting higher developmental gains than those in part time programs.</li> </ul>
Families have the knowledge and skills they need to support their children’s learning and social-emotional health	<ul style="list-style-type: none"> <li>■ 65,207 Kits for New Parents were distributed to parents of children ages 0-5 years containing valuable information about how to support the learning and social-emotional development of their children and accessing resources. This was the highest number ever distributed in San Diego County, primarily due to updates to the Kit.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Parents participating in School Readiness parenting classes showed increases in each of the parenting practices areas (knowledge, confidence, ability and connection to their child and other families).</li> </ul>
	<ul style="list-style-type: none"> <li>■ After being involved in the PFA, parents rated themselves higher on all 12 items on the Parenting Survey. Parents who did not participate in parenting activities throughout the school year only showed improvement on five of the twelve items, suggesting that parental engagement in preschool activities may help parents become more effective in their role as parents</li> </ul>

## Parent and Family Development and Resources

In the Issue Area of Parent and Family Development and Resources, the Commission’s Strategic Plan targets the following Desired Result:

- + Families have the skills, comprehensive support, and resources they need to promote their children’s optimal development and school readiness.

Although only one initiative solely focuses on parent education (First 5 for Parents), all current Commission funded initiatives have parent education components that contribute to reaching the goal listed above. These projects strive to educate families about available resources and empower them to effectively access these services for their children. The following is a brief summary of families served and key results achieved in these areas.

### Numbers Served (direct service initiatives only):

- **First 5 for Parents:** In the first year of the initiative, 4,662 parents participated in parent education classes and workshops built on best or promising practices. In turn, nearly two children ages 0-5 years were reached for every parent that participated.
- **School Readiness:** SR provides a variety of parent and caregiver education courses, including single session, sequential session and Parent and Child Together (PACT) opportunities. Overall, 6,642 parents attended these types of programs.
- **Preschool for All:** PFA offers parents a number of engagement activities. During this fiscal year, 632 parents participated in engagement opportunities.

### Key Parent and Family Development and Resources Results

Improving Parent and Family Development and Resources	
Desired Results	Highlights
Families have the skills, comprehensive support and resources they need to promote their children’s optimal development and school readiness.	<ul style="list-style-type: none"> <li>■ First 5 for Parents parent education programs supported parents in learning positive parenting skills, enhancing their children’s early literacy, and improving child and family health behaviors.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Parents served by HCA programs are more likely than those in county comparison studies to keep their children enrolled in public insurance programs, to have a medical home and to take their children to the doctor annually, and less likely to use the emergency room. The positive outcomes of this initiative is a testament to its ability to link families to needed resources and to educate them about how to appropriately utilize health services.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Parents reported that they are benefiting from HDS programs to optimize their child’s health and development, including increased knowledge (98.4%), enhanced skills (98.5%), and becoming empowered to address the health and developmental needs of their children (98.5%).</li> </ul>
	<ul style="list-style-type: none"> <li>■ OHI contractors provided care coordination to 8,987 children (a 24.1% increase) and 2,665 pregnant women (a 77.5% increase) to ensure that the dental health system of care is seamless for children and pregnant women.</li> </ul>

## Improving Parent and Family Development and Resources (continued)

Desired Results	Highlights
<p>Families have the skills, comprehensive support and resources they need to promote their children’s optimal development and school readiness.</p>	<ul style="list-style-type: none"> <li>■ Parents participating in PFA activities rated themselves higher on all Parenting Survey items (such as knowledge, confidence, ability, and behavior) with the increases being statistically significant for all items (<math>p &lt; 0.001</math>).</li> </ul>
	<ul style="list-style-type: none"> <li>■ Parents participating in School Readiness based parenting classes showed a statically significant increase in each parenting practice area (knowledge, confidence, ability and connection at <math>p &lt; 0.001</math>). Parents participating in more intensive, long-term parenting classes (such as sequential parent and child together [PACT] classes) consistently showed the most change in their knowledge, confidence, ability and connection.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Families with children ages 0-5 years have access to a 24/7 information and referral line (211) to support their knowledge of, and access to, community health and human services.</li> </ul>
	<ul style="list-style-type: none"> <li>■ The Commission provided fiscal resources for fluoridating the water in the City of San Diego, providing a valuable health resource for the community.</li> </ul>
	<ul style="list-style-type: none"> <li>■ 47,360 Kits for New Parents were provided to families of children ages 0-5 years to support their knowledge of, and access to, services.</li> </ul>

## Systems Improvement and Community Change

The Commission’s fourth Issue Area strives to create a lasting legacy for young children and their families in San Diego County by changing the large systems that serve families of young children. The Desired Results identified in the Strategic Plan for System Improvement and Community Change include:

- + Communities have adequate service capacity that is effective, coordinated, integrated, and sustainable.
- + Families have access to culturally and linguistically responsive services.
- + Policymakers and the public understand the importance of children’s early years and support efforts to promote school readiness.
- + The work of the Commission and First 5 funded programs is enhanced by community-driven solutions to issues that affect children and families.

### Key Systems Improvement and Community Change Results

The aspects of the Commission’s initiatives and projects addressing Systems Improvement and Community Change focus on: enhanced service capacity; improved awareness and cooperation across local health, education and community service systems; coordinated systems of care, sustainable funding; responsive services; creation of public policies that support the 0-5 population; and community-driven solutions. The following provides a brief summary of some of the key findings in these areas.

Systems Improvement and Community Change	
Desired Results	Highlights
Communities have adequate service capacity that is effective, coordinated, integrated, and sustainable.	<ul style="list-style-type: none"> <li>■ Broad scale initiatives, such as Healthcare Access, Healthy Development Services, and the Oral Health Initiative seek to support, link, and, as needed, create a network to enhance the continuum of services needed to serve families. Contractors assist families from the initial contact through the completion of any treatment services so that families do not fall through the cracks. This requires coordinated and integrated service delivery. The hope is that such efforts will create provider relationships that are sustained beyond the life of the Commission’s funding.</li> </ul>
	<ul style="list-style-type: none"> <li>■ The regional structures characteristic of the Commission’s systems of care projects (HCA, OHI, HDS, PFA) have the potential to facilitate communication and streamline services among a network of subcontractors – maximizing resources and avoiding service duplication.</li> </ul>
Families have access to culturally and linguistically responsive services.	<ul style="list-style-type: none"> <li>■ The majority of families served were identified as Latino/Hispanic. For example, 85.0% of SR children accessing early care and education services and approximately 56.0% of HDS’s service contacts were Latino.</li> </ul>
	<ul style="list-style-type: none"> <li>■ Overall parent satisfaction with key initiatives is high. For example, 84.0% of School Readiness Initiative parents and 82.4% Preschool for All parents were “very satisfied” with the quality of the program. This includes both English and Spanish speaking parents.</li> </ul>

## Systems Improvement and Community Change (continued)

Desired Results	Highlights
Families have access to culturally and linguistically responsive services.	<ul style="list-style-type: none"> <li>Key stakeholders interviewed for this evaluation generally noted that First 5 funded services were culturally and linguistically responsive. However, a more concerted approach to understanding and assessing cultural and linguistically responsive services is needed.</li> </ul>
Policymakers and the public understand the importance of children's early years and support efforts to promote school readiness.	<ul style="list-style-type: none"> <li>Policymakers and key stakeholders are aware of First 5; however, they are not very familiar with the programs and results of the work of First 5 San Diego.</li> <li>The Commission developed a communication plan focused on increasing public awareness of the Commission's programs, appropriate child development practices and the importance of the first five years of life.</li> </ul>
The work of the Commission and First 5 funded programs is enhanced by community-driven solutions to issues that affect children and families.	<ul style="list-style-type: none"> <li>The Commission engages the community in planning through various leadership teams and advisory bodies.</li> <li>Key stakeholders offered mixed opinions of the Commission's role in engaging the community at large. Many stakeholders desired the Commission to be more involved with other funders and service provider collaboratives. They also suggested that the Commission engage more parents and communities in planning activities. If additional staffing resources were added, the Commission could pursue additional community planning and input strategies.</li> </ul>

## Conclusion

The First 5 Commission of San Diego has developed interlinking initiatives that address the needs of the whole child. This strategy is built upon a commitment to making multiyear investments in deep community change that produce measurable results for young children and their families. The initiative approach has also strengthened the quality and rigor of the Commission's evaluation program and enhanced its ability to identify, measure, and report on meaningful outcomes. As a result, the Commission has the information and the systems level perspective to address challenges in a more efficient and methodological manner, based upon a vision of the results it seeks to achieve and an ongoing assessment of the impact of its funding decisions.