



Strategic Plan
Fiscal Year 2007-2008 through 2011-2012



**Public Hearing & Commission Adoption of Revised Plan
April 6, 2007**

APPOINTED COMMISSIONERS - JANUARY 2007

*Jeanne Boyce, Chair	Calaveras County Health Services Agency
Kathy Yarbrough, Vice Chair	Rural Health Design Network
Michael Chimente	Bret Harte Union High School District
Janet Orvis Cook	Human Resources Council, Inc.
*Mary Sawicki	Calaveras Works and Human Services
Erin Strange	Parent & Community Representative
*Steve Wilensky	Calaveras Board of Supervisors, District 2
Dorothy Smith, Alternate	UC Extension Nutrition, Family & Consumer Science

*These appointments by the Calaveras County Board of Supervisors meet the California Children & Families First Initiative – Proposition 10 mandated representation requirement of a County Supervisor, Director of Public Health, and Director or Social Services or their designee.

All commissioners are appointed by the Calaveras County Board of Supervisors in accordance with State mandate and First 5 Calaveras Bylaws designating potential areas of representation and terms.

First 5 Calaveras Staff

Karen Pekarcik	Executive Director
Catherine McKinney	Office Technician
Joyce Peek	School Readiness Program Coordinator
Sharon Romano	Office Technician, Extra Hire through 06-30-2006

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Introduction

With the passage of Proposition 10 in 1998, California voters elected to dedicate a portion of taxes on tobacco products to support the needs of very young children and their families. The California Children and Families First Initiative established a source of funding dedicated to enhancing the first five years of a child's life; a time identified through current brain research and collective wisdom of families, educators and health professionals as the most important for young children's brain development and success in school.

Proposition 10 requires that monies from the tobacco tax be spent on children zero (*pre-birth*) to five years old for health and wellness, early care and development, and parent education and support. Children and Families First funds may also be used for smoking cessation activities.

Proposition 10 also requires that each county commission create and adopt a strategic plan supporting "*...the creation and implementation of an integrated, comprehensive, and collaborative system of information and services to enhance optimal early childhood development.*" (California Health and Safety Code Section 103100) The strategic plan must be reviewed by a County's Commission on at least an annual basis to revise the plan "as may be necessary or appropriate." Commission funding decisions must be in alignment with the established strategic plan priorities, and reflected in long term financial planning and sustainability efforts.

First 5 Calaveras Proposition 10 tax disbursements received in 2005-06 were just over \$280,000, an amount which is expected to decline as smoking cessation efforts and population changes impact state tax revenues. First 5 California anticipates Calaveras County annual disbursements to level-out somewhere under \$240,000 after 2011. In addition to the county allocation, First 5 California supplements Calaveras' small county operations with operation and travel augmentation funds. These funds may not be used to support local grants and programs. First 5 Calaveras has received an annual augmentation of \$113,317. The augmentation level is determined by a formula which is currently under First 5 California review. Augmentations are expected in 2007-08. While it is anticipated that this funding will continue, augmentations are currently under review by a state level workgroup. State augmentations could change or be eliminated after 2007-08.

Since established in 1999, First 5 Calaveras related efforts have leveraged \$25,000 from California Endowment for *Our Children, Our Community* (OCOC) planning and implementation, \$1,000,000 in First 5 California School Readiness Cycle 1 and Cycle 2 dollars, and nearly \$250,000 in First 5 California CARES early childcare provider retention and professional development funds. First 5 Calaveras grantees have been able to use First 5 Calaveras funds to leverage dollars and resources that would not have been available otherwise.

First 5 Calaveras has provided nearly \$2,000,000 to support the health and wellbeing of Calaveras' very young children since Prop 10 was established. State law requires the funding be distributed in accordance with the county's adopted strategic plan, which has been reviewed in public hearing. This review and revision of the First 5 Calaveras Strategic Plan Commission was accomplished by the First 5 Calaveras Commission in public meetings and hearings between February and April, 2007.

First 5 Calaveras Strategic Plan Review 2006-07

Calaveras County Children and Families Commission's Strategic Plan was adopted on September 15, 2000 after a lengthy process of assessment and input, including a community survey, focus groups, a forum, Board of Supervisors review, and a public hearing. The plan was purposefully developed with many varied strategies as possibilities for the utilization of Proposition 10 monies. This was done in order to provide maximum flexibility for the first funding process, as well as to allow broad participation, creativity and best utilization of community assets. The initial plan was reviewed in 2001, and the revised version was adopted on December 14, 2001.

First 5 Calaveras' 2006-07 strategic plan review occurred in a half-day strategic thinking session announced to the public and included the participation of public partners, and public hearings. The meetings, attended by commissioners and community partners, resulted in strategic thinking and review of the First 5 Calaveras Vision, Mission and strategic Plan priority goals and objectives. The meeting resulted in informal revisions which were refined for introduction by First 5 Calaveras in public meetings on March 2 and March 12, 2007. Formal adoption of the revision was accomplished in Public Hearing on April 6, 2007.

Commission review of the Strategic Plan continues to reinforce that original conclusions related to community needs remain true. As a small county with very limited revenues, it is essential that First 5 Calaveras adopt and focus on a small number of priorities with a very specific set of strategies addressing service integration and measurable change. In this way, the very limited First 5 Calaveras resources are more likely to be allocated for an adequate length of time to ensure community capacity building and achievement of desired results. Simply funding a wide variety of unrelated activities will not result in lasting systems change or local capacity building to ensure every child enters school safe, healthy and ready to learn.

As a result of First 5 Calaveras' needs assessment and strategic planning efforts, *Our Children, Our Community (OCOC)* was established to integrate with other community partners addressing community and family issues impacting all children, aged birth to eighteen, in Calaveras County. This effort resulted in development of a comprehensive *Ten Year Master Plan for Children and Youth*. Recognizing the comprehensive and integrated nature of the OCOC and community efforts, First 5 Calaveras Commissioners have used the *Ten Year Master Plan* as a foundation for the 2006-07 Strategic Plan review, revisions and alignment of priorities. First 5 Calaveras' long term funding priorities are also aligned to address the strategic goals of First 5 Calaveras and its impact on the outcomes identified in the *Ten Year Master Plan for Children and Youth*.

The new 2007-12 Strategic Plan identifies commission priorities, funding and evaluation intentions for fiscal year 2007-08, and long term financial planning to ensure fiscal responsiveness through June 2012. Lessons learned from grantees, community, State and other County Commissions guide First 5 Calaveras to use these limited resources to leverage even greater support ensuring that services and activities for children and families achieve meaningful results through enhanced quality and collaboration.

Accountability

First 5 Calaveras operates in accordance with Brown Act and other laws regulating public agencies and ensuring open meetings and public disclosure. Commission decisions are made in accordance with adopted Bylaws.

Financial disclosure is reflected in the publishing of an annual independent audit. First 5 Calaveras funds are managed through a designated Calaveras County Auditor-Controller trust fund account. The Commission does not invest funds in any manner other than grants and local initiatives on behalf of children and families in accordance with the Strategic Plan.

New state legislation addressing the operations of county commissions adopted in 2005 affected First 5 operations statewide beginning in Fiscal Year 2006-07. Passage of AB109 and SB35 require that county commissions adopt policies on salary and benefits, conflict of interest, procurement and establish limits on administrative costs. In addition, legislation addresses new expectations for evaluation, audit, strategic planning and public reporting of outcomes.

First 5 Calaveras operates as a county agency with the commission having independent authority for the strategic planning priorities and grant funding decisions in accordance with state mandates. As a county agency, First 5 Calaveras formally adopted Calaveras County salary and benefit, procurement and conflict of interest policies. The commission also adopted an administrative cost limit of 15% of the annual operating budget.

The First 5 Calaveras Evaluation Plan and Long Term Financial Plan are included as components of this Strategic Plan, and reflect adherence to new legislated requirements, commission priorities and commitments, and the commitment to the state mandate for California Children and Families First activity to establish an *“integrated, comprehensive and collaborative system of information and services to enhance optimal early childhood development.”*

All First 5 Calaveras funded awards and activities must meet the mandate to ensure non-supplanting of existing funds and services. Grant and initiative proposals are expected to enhance or expand existing expertise to address gaps in local services, promote quality of service, avoid duplication and leverage resources to promote and achieve sustainability.

First 5 Calaveras

Vision, Mission, Goals & Guiding Principles

Vision Statement *(revision adopted 04.06.07)*

All Calaveras County children will
enter school safe, healthy, and ready to learn.

Mission Statement *(revision adopted 04.06.07)*

To promote, encourage and support families
in raising healthy children by providing leadership, facilitation, and funding.

Goals

- Promote collaboration between community members, organizations and institutions to ensure that resources are available, sensitive and accessible to all families in Calaveras County.
- Support optimal parenting, social-emotional health and economic self-sufficiency of families.
- Improve the development and school readiness of young children from birth to age five.
- Improve the overall physical and mental health of young children.

Guiding Principles

- A healthy family is a collection of people related by birth, marriage, adoption or personal ties who take responsibility for the child and provide support in a loving, nurturing environment.
- Strong families are crucial to a child's healthy development.
- Family responsibility should be encouraged and supported.
- A child's developmental potential is influenced prenatally, in infancy and in early childhood and may significantly impact the level of adult achievement.
- Healthy childhood development benefits the community and therefore should be a priority of the community.
- The Commission's work will engage all of our communities, including all income levels, geographic regions, ethnic and cultural backgrounds and those with special needs.
- Existing and potential resources should be maximized through coordination/integration of services and creative/innovative use of available funding sources.
- Commission supported programs and services will demonstrate measurable results.

2007-2012 Strategic Priorities

“...The foundation laid in the first five years of life can be sturdy or fragile and can be influenced by many factors...In too many communities children cannot rely on a coherent system of supports to aid their development. Child care, health care and other family supports and services are rarely coordinated and are too frequently divided by where families live, how rich or poor they are, and who they know...Building comprehensive systems for young children requires new ways of doing business. Local communities in particular play an important role in building and managing an early childhood system...Community based initiatives present opportunities to extend beyond traditional public services...highlighting best practices can help communities progressively increase their implementation of programs...What is needed now is...models of community collaborations to improve services for young children, and examin(ation) of how to continue and spread their successes.”

Excerpt from: “In Our Own Backyards: Local Initiatives that Change Young Children’s Lives,” Barbara Gebhard, Project Director, State Policy Initiatives, ZERO TO THREE National Center for Infants, Toddlers, and Families. Published in the July 2006 issue of Zero to Three

The First 5 Calaveras Commission Priority Goals continue to address the following four strategic categories impacting the ability for all Calaveras County children to enter school safe, healthy and ready to learn:

GOAL 1 - Systems Integration and Collaboration

The goal of Systems Integration and Collaboration to “*Promote collaboration between community members, organizations and institutions to ensure that resources are available, culturally sensitive and accessible to all families,*” remains supported by the Commission’s needs assessment, strategic thinking session and the input of community partners. First 5 Calaveras funds will be invested to enhance the coordination or capacity of organizations to improve systems of care for children up to age five and their families leading to increased:

- a. Service integration;
- b. Improved community access (i.e., access to services, especially in underserved areas, and to populations with identified barriers to access and/or indicators of poor family health and functioning)
- c. Cultural competence in service provision;
- d. Service capacity building through collaboration and leveraging of resources to promote sustainability and quality service delivery.

Indicators of success toward Systems Integration and Collaboration outcomes will be chosen to fit funded programs and will include documentation of changes in service coordination, capacity or integration for enhanced access, leveraged funding and resource development leading to services.

Systems Integration and Collaboration Priority

Systems integration and collaboration will be the foundational priority for all First 5 Calaveras funded activities. All First 5 Calaveras grantees will be required to develop strategies in support of this component.

The two primary **Systems Integration Initiative Projects** for 2007-2012 are:

School Readiness Coordination

The First 5 Calaveras School Readiness Coordinator identifies evidence-based best practices and promising practices addressing local needs of children, families and early and education partners in preparing children to enter school safe, healthy and ready to learn. The coordinator convenes and facilitate partners to strategically implement these best practices, engage partners to ensure service acquisition streamlining across agency lines, and establishes planning relationships to ensure communities, agencies and professionals are prepared for the transition of children and families from one service to another. The School Readiness Coordinator is working with early care and education partners, Kindergarten and Special Education professionals, English as Second Language, Adult Literacy and other community partners to ensure service delivery outcomes are identified and measured. Partners review data collection and outcomes to identify global and population specific planning, resource coordination and enhanced service delivery opportunities.

Children's Services Coordination

First 5 Calaveras and community partners have identified coordination for implementation of the OCOG *Ten Year Master Plan for Children and Youth in Calaveras County* as a priority. First 5 Calaveras will take the lead to establish program coordination to engage partners in fiscal and resource leveraging in support of the goal to promote systematic community and agency planning and service delivery. Modeled after the success of First 5 Calaveras School Readiness Coordination, First 5 Calaveras Children's Services Coordination will convene and facilitate partnerships among County children's services agencies and community service partners, identify systems integration strategies and facilitate implementation of collaborative services; engage community leaders toward establishment of a *Children and Families Element* in the Calaveras County General Plan, facilitate systems scans and efforts toward shared data and outcomes measures resulting in comprehensive service planning and delivery, and achieve leveraging of resources and funds to impact and sustain program quality, access and service delivery.

GOAL 2 – Strong Families

The goal of Strong Families to, “*Support optimal parenting, social-emotional health and economic self-sufficiency of families,*” remains a priority of First 5 Calaveras. As strategic thinking and community needs assessment have indicated, parents are best supported to raise children who are safe, healthy and ready to learn if they are able to access quality services that are designed and delivered with community input and provided locally. First 5 Calaveras will promote and support efforts representing Family Resource Center best practices as defined below.

<p>Family Resource Center (FRC) Definition</p> <p>Ref: SH Cowell Foundation, 2006 <i>Vision of Family Resource Centers</i></p>	<p><i>FRCs are a strategy that a community employs to improve the lives of families, especially overburdened families who struggle with poverty and social isolation. FRCs are designed to provide a variety of early intervention and prevention services focused on helping families:</i></p> <ul style="list-style-type: none"> • <i>Become safe and stable</i> • <i>Access medical and dental services</i> • <i>Support their children’s success in school</i> • <i>Achieve economic success.</i>
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Commission supported outcomes for Strong Families will be achieved as a result of resident engagement, public-private partnerships and accessible comprehensive, integrated support for improved family functioning in the areas of:

- a. Family self-sufficiency and ability to meet basic needs
- b. Improvement of skills and knowledge about parenting, child development
- c. Home environments supportive of cognitive development
- d. Improvement in behavioral, mental health and well-being of young children and their families
- e. Reduction of trauma, crisis and intentional injury

Indicators of success toward Strong Families outcomes will be chosen to fit funded programs and will include service level indicators identifying participation/persistence of parents in services, and outcome level indicators showing observed or measured changes in family stability or skills, self-reported gains in specific areas, pre-post tests, validated scales, etc.

First 5 Calaveras commission **funding priority for Strong Families for 2007-12** is designated to continue support of the Mother-Infant-Child Harvest Initiative and the School Readiness Initiative Mental Health component.

GOAL 3 – Children Learning and Ready for School

The goal of Children Learning and Ready for School to, *“Improve the development and school readiness of young children from birth to age five in partnership with families and community,”* remains a priority for First 5 Calaveras Commission efforts to ensure children enter school safe, healthy and ready to learn. The Commission’s School Readiness and CARES Initiative are both grounded in this goal.

Commission supported outcomes for Children Learning and Ready for School will be achieved as a result of strategies to enhance coordination, increase capacity and quality of existing services, and promote improved child development outcomes through:

- a. Parent and community involvement with early care and education
- b. Quality early care and education services
- c. Education stipends and compensation incentives for retention of qualified early care and education professionals
- d. Capacity building training and professional development for early care and education professionals

Indicators of success toward Children Learning and Ready for School outcomes will be chosen to fit funded programs and will include service level indicators and will include participation of providers in educational opportunities or capacity building opportunities and outcome-level indicators which could be represented by more licensed child care slots or more accessibility to fill existing slots by shifting slots to areas of need; participation of children with special needs in ECE settings who had not been previously enrolled/retained, self-reporting by parents and professionals of skills learned and implemented in developmentally appropriate environments; increased screening, identification and referrals to address special needs; increased retention and completion of ECE program by children at risk of expulsion; increased culturally and linguistically appropriate ECE services.

First 5 Calaveras priority funding for 2007-2012 Children Learning and Ready for School strategies will be achieved through the CARES, School Readiness.

GOAL 4 – Healthy Children

The commission's Healthy Children goal to, "*Improve the overall physical and mental health of children ages pre-birth to five through increased access to health care,*" remains a priority toward ensuring children enter school safe, healthy and ready to learn. First 5 Calaveras funds will be used to address service gaps, enhance coordination of capacity of existing and new services which promote improved health for pregnant women and for children ages pre-birth to five years old through:

- a. Elimination of children's exposure to second hand smoke;
- b. Access to preventive health, mental health and primary health care through reduction of barriers or by strengthening systems of care;
- c. Access to preventive dental and oral health care services through reduction of barriers or by strengthening systems of care;
- d. Access to prenatal services and care to ensure children are born healthy;
- e. Improved nutrition and physical activity

Indicators of success toward Healthy Children outcomes will be chosen to fit funded programs and will include service level indicators, including participation of children and parents in services, and outcome-level indicators which will include service access data and other outcome data such as observed or self-reported skill gains or behavior changes.

First 5 Calaveras Healthy Children Priority

Elimination of Second Hand Smoke in a Child's Environment

Children's physical health and wellbeing are enhanced as children are free from smoking related illness. All First 5 Calaveras Commission funded grants will be required to address this component, including grantee participation with the Calaveras Alcohol-Substance Abuse Prevention (ASAP) Coalition to ensure strategic integration of local tobacco cessation efforts in funded activity.

First 5 Calaveras funding priority for 2007-12 in support of Healthy Children is designated to the School Readiness Initiative support of the Calaveras Children's Dental Project to ensure children under age five receive oral health screening, treatment and families receive oral health education.

Following a logic model, First 5 Calaveras Goals are supported by proposed Objectives, potential Strategies, Expected Measurable Outcomes, and Indicators of success. Specific outcomes and tools for measuring success vary based on the actual strategy and activity employed, and in consideration of the population served. School Readiness and CARES Initiative indicators are designated and approved

within a state funding framework and the *First 5 California Dictionary of Statewide Evaluation Indicators*. Local initiative indicators are established by the commission. In all initiatives, grantees are able to identify specific strategies, activities, indicators and tools for measuring results as a Scope of Work is established. These are aligned for systems integration with First 5 California, *OCOC Ten Year Master Plan for Children and Youth in Calaveras County*, and community and agency partnerships to ensure progress toward development of the commission's primary goal of "*integrated, comprehensive and collaborative system of information and services to enhance optimal early childhood development.*"

GOAL 1: Service Integration and Collaboration

Promote collaboration between community members, organizations and institutions to ensure that resources are available, culturally sensitive and accessible to all families.

OBJECTIVE	A. Support implementation of the OCOC <i>Ten Year Master Plan for Children and Youth in Calaveras County</i> as a foundation for the development and implementation of a community-based integrated service system for children and families.
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STRATEGIES	<p>1. Capacity Building and Fiscal Sustainability</p> <p><i>Establish a leadership position to engage and coordinate community and agency collaboration and systems integration through a Children’s Policy Council to:</i></p> <ul style="list-style-type: none"> a. Establish program partners to actively reduce duplication and identify cost savings through collaboration. b. Advocate for policy change in collaboration with other agencies. c. Develop a shared accountability system across agencies. <p>2. Leverage funding, services and resources</p> <p><i>Engage community partners, service providers, decision-makers and funders to intentionally and strategically align resources toward integrated, sustainable, and measurable quality and best-practice outcomes for children and families.</i></p> <ul style="list-style-type: none"> a. Address sustainability through a funding plan for the current year and for up to four years into the future. b. Develop formal plans to leverage First 5 California and/or other funding source dollars. c. Identify strategies to plan for reduced First 5 Calaveras funding as project moves from planning and implementation to operational service. <p>3. Establish a <i>Children & Family Element</i> of the Calaveras County General Plan</p> <p><i>Ensure the future needs of children and families are addressed in all components of county planning and development.</i></p> <ul style="list-style-type: none"> a. Establish comprehensive services (a combination of health, educational, social or emotional support services) accessible to the community. b. Facilitate joint planning and decision-making among multiple agencies to achieve shared goals of service sustainability. c. Facilitate joint planning to address increased or improved service provision for underserved, special needs or isolated populations
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	<p>through strategies which may include:</p> <ol style="list-style-type: none"> (1) Increased number of service locations (2) Provision of co-located services (3) Provision of conveniently located services (4) Provision of home-based services (5) Provision of transportation to services (6) Expansion of service hours or flexible scheduling (7) Increased outreach and public awareness of services (8) Identification and review of shared outcome measures, data and planning <p>4. Improve school readiness service delivery systems</p> <p><i>Collaborate to ensure children's services systems integration between schools, school readiness activities, and early care and education community:</i></p> <ol style="list-style-type: none"> a. Develop partnerships with elementary schools to promote formal linkages to preschools, Head Start/Early Head Start and State Preschool programs, child-care centers, home visiting programs, community, health and human service resources. b. Develop partnerships with preschools to promote formal linkages to public and private elementary schools, child-care centers, home visiting programs, community, health and human service resources.
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EXPECTED OUTCOMES	Demonstrate measurable outcomes in the areas of county and community service integration, leveraging of funds and resources to support sustainability of services, improved community access and/or service capacity building, and cultural competence in service provision.
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INDICATORS	<p>Specific indicators will be developed with the grantee and may include :</p> <ul style="list-style-type: none"> • <i>Service level indicators (participation/persistence of parents in services)</i> • <i>Outcome level indicators (observed or measured changes in family stability or skills, self-reported skill gains in specific areas, pre-and post-tests, validated scales, etc.)</i> <p>Indicating:</p> <ul style="list-style-type: none"> • Reduced duplication and experience of cost savings through collaboration. • Adoption of Family Element components in the Calaveras County General Plan. • Shared accountability system using common measures to assess
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	<p>results and joint examination of findings; use of shared data to inform program planning and future program funding.</p> <ul style="list-style-type: none"> • Program is sustainable for up to four years. • First 5 California and/or other funding source dollars are leveraged to support program operation. • First 5 Calaveras funding decreases or is eliminated as project moves from planning and implementation to ongoing operational service. • Comprehensive services (a combination of health, educational, social or emotional support services) are operating and accessible to the community. • Family/child participation and achievement of service outcomes occurs as a result of joint planning and decision-making among multiple partners. • Increased and/or improved service provision and service outcomes for underserved, special needs or isolated populations. • Improved linkages to preschools, Head Start/Early Head Start and State Preschool programs, child-care centers, home visiting programs, community, health and human service resources as evidenced by formal transition plans, Memorandum of Understanding, Interagency Agreements, shared resources, staffing and/or planning. • Improved formal linkages to public and private elementary schools, child-care centers, home visiting programs, community, health and human service resources. as evidenced by formal transition plans, Memorandum of Understanding, Interagency Agreements, shared resources, staffing and planning, etc.
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Alignment of First 5 Calaveras Goal 1 - Systems Integration	
First 5 California Result Area & Statewide Evaluation Indicator (SEI)	Ten Year Master Plan for Children & Youth OCOC Goals
Improved Systems of Care	Leadership
SEI #17 Increased accessibility of services/activities	L.1 Leadership and decision makers throughout the county will work to achieve the vision of OCOC.
SEI #18 Improved service delivery	L.3 An effective operational structure to manage and sustain the OCOC effort will be created and maintained.
SEI #19 Increased cultural competence	
SEI #20 Increased service integration	Facilities & Activities
SEI #21 Increased accountability of results	F.2 Sustainable, coordinated funding for children's and youth programs, services and activities will be secured.
SEI #22 Increased civic engagement of program participants	
SEI #23 Increased sustainability of First 5 California funded programs	Family Friendly Services
SEI #24 Improvements in school readiness service systems	S.1 An integrated and coordinated information and referral (I&R) system for children, youth and families will be implemented.
	S.2 An integrated and coordinated service delivery system for children, youth and families that supports working families with special needs will be implemented.
	Planned Growth & Development
	G.1 Coordinated community development practices and policies in support of children and families will be in place to address affordable housing, transportation and infrastructure.

GOAL 2: Strong Families

Support optimal parenting, social-emotional health and economic self-sufficiency of families.

OBJECTIVE	A. Meet the community expectation for accessible services expressed in the OCOC <i>Ten Year Master Plan for Children & Youth in Calaveras County</i> by strengthening and/or launching five family resource centers aligned with a <i>Children & Family Element</i> of the Calaveras County General Plan.
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<p>STRATEGIES</p> <p>Ref: SH Cowell Foundation, 2006 <i>Vision of Family Resource Centers</i></p>	<p><i>FRCs have three interrelated features to ensure best practice and quality community service. It is not expected that grantees undertake activities in all of the FRC interrelated areas; however each proposal is reviewed in relation to how it achieves positive outcomes through strategies integrating each feature.</i></p> <ol style="list-style-type: none"> 1. Resident Engagement The FRC belongs to the community. Residents/families take advantage of the resources and activities offered at the FRC, participate in governing bodies, provide support to peers, offer classes and workshops, co-lead support groups and organize community or cultural events. 2. Public-Private Partnerships: <ol style="list-style-type: none"> a. FRCs are the “glue” and linkage to all of the services that a family needs. FRCs work with a wide variety of public and private community partners to develop systems to ensure residents can easily access the services they need to lead healthy and productive lives, including county departments such as public health, social services, mental health, human services, and employment; faith-based organizations, child care agencies, domestic violence programs, food and clothing distribution program, schools and colleges, hospitals, law enforcement, civic groups, businesses, community organizers and political leaders. b. Comprehensive integrated services such as <ol style="list-style-type: none"> (1) Employment and family income supports (2) Case management (3) Family health and wellness (4) Family literacy and education support (5) Child abuse and neglect treatment services (6) Substance abuse prevention and treatment services (7) Cultural, community development & organizing activities 3. Accessible, Comprehensive, Integrated Family Support FRC staff work together with family members in a manner that is mutually respectful; helping families identify and use their strengths and skills to solve problems and create opportunities for growth and self-sufficiency. FRCs also affirm and strengthen
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	<p>families' cultural, racial, and linguistic identities and enhance their ability to function in a multicultural society. FRCs embrace families holistically and are organized to respond to their multiple needs. FRC services often include:</p> <ol style="list-style-type: none"> (1) Parent education (2) Child development (3) Resource and referrals (4) Drop-in availability (5) Peer-to-peer supports (6) Life skills and advocacy
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EXPECTED OUTCOMES	<p>Outcomes will be achieved as a result of resident engagement, public-private partnerships and accessible comprehensive, integrated support for improved family functioning in the areas of:</p> <ol style="list-style-type: none"> a. Family self-sufficiency and ability to meet basic needs b. Improvement of skills and knowledge about parenting and early childhood development, including family and early literacy c. Home environments supportive of cognitive development d. Improvement in behavioral, mental health and well-being of young children and their families e. Reduction of trauma, crisis and intentional injury
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INDICATORS	<p>Specific indicators will be chosen with the grantee to fit the funded program and may include:</p> <ul style="list-style-type: none"> • <i>Service level indicators (participation/persistence of parents in services)</i> • <i>Outcome level indicators (observed or measured changes in family stability or skills, self-reported skill gains in specific areas, pre-and post-tests, validated scales, etc.)</i> <p>Indicating:</p> <ul style="list-style-type: none"> • Children and families are engaged in early family literacy activities • Families are engaged in program development, governance and operations through active public input • Increased family accessibility of services and activities is achieved • Improved service delivery to children and families is achieved • Increased cultural competence of providers is achieved. • Children live in home environments supportive of optimal cognitive development • Children are safe from intentional injuries in their homes and communities • Families are self-sufficient • Parents provide nurturing and positive emotional support to their children
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Alignment of First 5 Calaveras Goal 2 – Strong Families

First 5 California Result Area & Statewide Evaluation Indicator (SEI)	Ten Year Master Plan for Children & Youth OCOC Goals
Improved Family Functioning	Facilities & Activities
SEI #11 Children live in home environments supportive of optimal cognitive development SEI #12 Children are safe from intentional injuries in their homes and communities SEI #13 Fewer teenagers give birth, and more teenage parents delay subsequent pregnancies SEI #14 Families are self-sufficient SEI #15 Parents provide nurturing and positive emotional support to their children SEI #16 Children achieve permanency SEI #17 Increased accessibility of services/activities	F.1 Community centers will be developed and/or expanded in each of the county's communities. F.3. An effective mechanism for linking community centers with one another, volunteer resources with community needs, and community members with needed information about facilities and activities will be developed.
Improved Systems of Care	Leadership
SEI #17 Increased accessibility of services/activities SEI #18 Improved service delivery SEI #19 Increased cultural competence SEI #20 Increased service integration SEI #21 Increased accountability of results SEI #22 Increased civic engagement of program participants	L.2 Leaders will be developed, mentored, and supported throughout the county.
	Family Friendly Services
	S.1 An integrated and coordinated information and referral (I&R) system for children, youth and families will be implemented.
	S.2 An integrated and coordinated service delivery system for children, youth and families that supports working families with special needs will be implemented.
	Planned Growth & Development
	G.2 New employment and job opportunities for Calaveras residents will be developed.
	Education & Employability
E.1 A continuous system of in-county education that includes vocational, technical, adult and collegiate opportunities will be developed.	
E.2 Parents and families will have literacy, tutoring and other educational supports necessary to develop, model and transfer life skills to children and youth.	

GOAL 3: Children Learning and Ready for School

Improve the development and school readiness of young children from birth to age five through partnership with families and community.

OBJECTIVE	A. Improve child development and ensure school readiness through support of high quality childcare and early care and education services.
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<p>STRATEGIES</p> <p><i>May include any combination of items listed</i></p>	<ol style="list-style-type: none"> 1. Parent and community involvement with early care and education <ol style="list-style-type: none"> (a) Through partnerships, promote public awareness and involvement in early care and education needs and issues. 2. Quality early care and education services <ol style="list-style-type: none"> (a) Promote collaboration between agencies and private providers to enhance and expand quality, evidence based best practices in early care and educational services for children ages 0-5. 3. Education stipends and compensation incentives for retention of qualified early care and education professionals <ol style="list-style-type: none"> (a) Provide Calaveras CARES financial stipends to qualified early care and education professionals, both center and home-based caregivers to encourage community care licensing, accreditation, college education and continued employment in the field. 4. Capacity building training and professional development for early care and education professionals <ol style="list-style-type: none"> (a) Partner with Calaveras Childcare Planning Council (CCPC) to integrate CARES training, retention stipends, capacity building and School Readiness Initiative activities with CCPC efforts. (b) Partner with local, regional and state California Preschool Instruction Network (CPIN) to support local integration of research and evidence-based best practices in early care and education countywide. (c) Partner with local early care and education professionals to support integration of inclusive education strategies developed through the Amador-Calaveras Children’s Inclusive Care Council, <i>All of Us Together</i> and <i>Special Quest</i> plans. (d) Partner with local early care and education professionals to support the needs of local culturally and linguistically diverse populations. (e) Establish transition and cross-discipline networks between early care and education, kindergarten and early elementary education, special education and early intervention professionals.
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EXPECTED OUTCOMES	<p>Children will be learning and ready for school through access to quality early care and education services through</p> <ul style="list-style-type: none"> (a) Parents and community understanding the importance of and engagement in early care and education activities. (b) Increased access to licensed, legally licensed exempt and accredited care meeting parent’s identified needs such as quality, location, time availability and age specific need. (c) Children’s readiness for school will be increased through access to qualified early care and education professionals providing healthy, safe and high quality care environments. (d) Increased capacity to serve children with special needs. (e) Increased capacity to serve non-English speaking children and culturally diverse populations.
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INDICATORS	<p>Indicators will be chosen to fit funded programs and will include:</p> <ul style="list-style-type: none"> • Service-level indicators (participation of parents, children and providers in educational opportunities or capacity building opportunities). • Outcome-level indicators (service access data, observed or self-reported skill gains and observed or self-reported behavior changes; increased capacity for childcare; increased participation of children with special needs, culturally or linguistically diverse populations, self-reported ECE professional skill development and implementation; retention of children through completion of program, etc.) <p>Indicating</p> <ul style="list-style-type: none"> • Increased families reporting understanding the importance of and supporting their child’s school readiness in the home • Increased enrollment in ECE programs • Increased child attendance and completion in ECE programs • Increased slots or ECE capacity in targeted areas • Increased collaboration for transition planning • Increased number of children participating in school-linked transition practices • Children receiving developmental screening and referral for early intervention of special needs. • Increased number of children entering kindergarten ready for school as determined by teacher and parent assessments of cognitive, social, emotional, language, approaches to learning and health/physical development • Increased inclusion of children with special needs in regular ECE and transition to regular Kindergarten classrooms • Increased ECE professional qualifications • Increased licensing of family childcare providers • Increased ECE providers implementing evidence based best practices with children and families
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Alignment of First 5 Calaveras Goal 3 - Children Learning and Ready for School

First 5 California Result Area & Statewide Evaluation Indicator (SEI)	Ten Year Master Plan for Children & Youth OCOC Goals
<p align="center">Improved Child Development</p>	<p align="center">Education & Employability</p>
<p>SEI #7 Children have access to high-quality early care and education</p> <p>SEI #8 Children participate in early childhood education programs</p> <p>SEI #9 Children receive early screening and intervention for developmental delays and other special needs.</p> <p>SEI #10 Children enter kindergarten “ready for school”</p>	<p>E.1 A continuous system of in-county education that includes vocational, technical, adult and collegiate opportunities will be developed.</p> <p>E.2 Parents and families will have literacy, tutoring and other educational supports necessary to develop, model and transfer life skills to children and youth.</p> <p>E.3 Children will leave school with demonstrated abilities in life skills.</p>
<p align="center">Improved Systems of Care</p>	<p align="center">Leadership</p>
<p>SEI #17 Increased accessibility of services/activities</p> <p>SEI #18 Improved service delivery</p> <p>SEI #19 Increased cultural competence</p> <p>SEI #20 Increased service integration</p> <p>SEI #21 Increased accountability of results</p> <p>SEI #22 Increased civic engagement of program participants</p> <p>SEI #24 Improvements in school readiness service system</p>	<p>L.2 Leaders will be developed, mentored, and supported throughout the county.</p>

GOAL 4: Healthy Children

Improve the overall physical and mental health of children ages pre-birth to five through increased access to health care.

OBJECTIVE	A. Increase access to community wellness resources, health care and utilization of services for children ages 0-5 (includes prenatal period).
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STRATEGIES <i>May include any combination of items listed</i>	<ol style="list-style-type: none"> 1. Increase the health and safety of children through elimination of second hand smoke in children’s environments. <ol style="list-style-type: none"> (a) All First 5 Calaveras Grantees will partner with Calaveras ASAP for coordinated outreach to families and increased family access to anti-tobacco information and intervention resources. 2. Increase the health and safety of children through strategies including: <ol style="list-style-type: none"> (a) Direct treatment (b) Health advocacy and education (c) Insurance outreach, enrollment, retention, utilization (d) Access and utilization of health services (e) Violence prevention (f) Nutrition and physical fitness (g) Safety prevention, education and intervention (h) Early and family mental health and wellness
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EXPECTED OUTCOMES	<p>Outcomes will be achieved through enhanced coordination of existing service capacity to promote improved health for pregnant women and for children up to age five, and as service gaps are addressed through:</p> <ul style="list-style-type: none"> • Elimination of children’s exposure to second hand smoke; • Access to preventive health, mental health and primary health care through reduction of barriers or by strengthening systems of care; • Access to preventive dental and oral health care services through reduction of barriers or by strengthening systems of care; • Access to prenatal services and care to ensure children are born healthy • Improved nutrition and physical activity
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INDICATORS	<p>Indicators will be chosen to fit funded programs and will include:</p> <ul style="list-style-type: none"> • Service-level indicators (participation of parents and children in services) • Outcome-level indicators (service access data, observed or self-
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	<p>reported skill gains and observed or self-reported behavior changes)</p> <p>Indicating</p> <ul style="list-style-type: none"> • Engagement in healthy nutrition and/or physical fitness <ul style="list-style-type: none"> - Decreased childhood obesity • Improved outreach, enrollment, retention, utilization of health, oral health and mental health insurance coverage • Improved access to health, oral health, and mental health resources • Children’s health, oral health and mental health status is improved • Families engage in practices to ensure children’s health and well-being, including <ul style="list-style-type: none"> - Unintentional injury and accident prevention - Intentional injury prevention - Increased breastfeeding - Providing age appropriate nutrition and physical fitness - Providing children with stable and nurturing environments and attachment promoting care
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Alignment of First 5 Calaveras Goal 4 - Healthy Children	
First 5 California Result Area & Statewide Evaluation Indicator (SEI)	Ten Year Master Plan for Children & Youth OCOG Goals
Improved Health	Child & Youth Health
SEI #1 Children are born healthy SEI #2 Children receive preventive and ongoing regular health care SEI #3 Children are in healthy and safe environments SEI #4 Children are healthy and well nourished SEI #5 Children have good oral health SEI #6 Children are free of smoking-related illness	H.1 Every child in Calaveras County will have health care coverage for medical, dental and mental health services.
Improved Systems of Care	Facilities & Activities
SEI #17 Increased accessibility of services/activities SEI #18 Improved service delivery SEI #19 Increased cultural competence SEI #20 Increased service integration SEI #21 Increased accountability of results SEI #22 Increased civic engagement of program participants SEI #24 Improvements in school readiness service system	F.3 An effective mechanism for linking community centers with one another, volunteer resources with community needs, and community members with needed information about facilities and activities will be developed.

Funding Categories and Mechanisms

The First 5 Calaveras Commission has established mechanisms for award of grant funding during the period covered by this Strategic Plan. Funding mechanisms and categories are designated to address strategic priorities promoting the intents of the state mandate and respond to local needs. Grants awarded will be funded from a variety of revenues, including State Commission School Readiness funds, State Commission CARES (Comprehensive Approaches to Raising Education Standards) funding for early care professional development and retention; and local Commission tobacco tax revenues disbursed as program coordination funds, local grants, or matched to other funding sources.

First 5 Calaveras may allocate funds through a variety of mechanisms, including:

- *Single or multi-year locally funded grants*
- *Sponsorship funds limited to \$2500 per year*
- *Targeted Initiatives with State Matching Funds, such as School Readiness and CARES*
- *Commission designated local initiatives, including special projects to respond to critical gaps in services needed to improve early childhood development*
- *Commission coordination in support of targeted or local initiatives*
- *Support for operations such as administration, contract management and other program related activities, evaluation, planning and outreach*



The following funding priorities are established by First 5 Calaveras for the Fiscal Year 2007-08 and are anticipated to remain in effect until 2012. These priorities may change as evaluation of outcomes and local needs are reviewed by the commission on at least an annual basis.

1.A. SERVICE INTEGRATION AND COLLABORATION – Children’s Services Program Coordination

Local Commission funding priority through 2010-12

Justification: Identified as top priority in Commission Guiding Principles and Strategic Plan in support of service integration and collaboration as well as implementation of community prioritized OCOC goals and objectives.

Intent: To meet the implementation goals and objectives prioritized by the greater community in the OCOC *Ten Year Master Plan for Children and Youth in Calaveras County*, First 5 Calaveras supports establishing a Children’s Services Program Coordination in partnership with other county agencies and services.

4.A HEALTHY CHILDREN – NUTRITION -Mother-Infant-Child Harvest (MICH)

Local Grant funding priority through 2007-08

Justification: Supports local families during implementation of national systems change strategy for WIC supplemental nutrition package. Improves families’ understanding of early nutrition, and children’s health so that children enter school healthy and ready to learn.

Intention: Funding the local Vouchers and Visits program to distribute MICH vouchers, and provide nutrition education through 2007-08 supports the needs of children by ensuring appropriate nutrition and minimizing child health and obesity issues during early childhood.

Systems improvement impacting the WIC food supplement program is modeled after the First 5 Calaveras funded MICH Vouchers, and is anticipated to achieve national implementation in 2008.

3.A CALAVERAS CARES: Comprehensive Approaches to Raising Educational Standards -

CARES Component funded through 2006-08

Justification: Provides 2:1, local:state match to address local priority of systems integration, leveraging of funds, and capacity improvement through licensing, education and retention incentives to early care and education professionals, including family childcare.

Intention: Increase capacity building, professional development and retention of ECE professionals through enhanced early literacy, ECE/K collaboration, enhanced inclusion of children with special needs, and service to children experiencing diversity in culture/languages. Provides an opportunity for fiscal and resource leveraging. Professional training and capacity building for quality services, inclusion and transition are also integrated components of school readiness strategies.

	First 5 Calaveras School Readiness Initiative Leverages 1:1 State Funding Match
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Grantee activities designated below are in anticipation of First 5 California Cycle 2 School Readiness Application approval for Fiscal Year 2007-11 state match funds.

Justification: Priorities established were determined through Cycle 1 program evaluation and needs assessments. School Readiness Initiative will enhance or expand quality through services and activities shown to be effective in Cycle 1. Initiative activities meet State requirements for expected outcomes and match funding. Letters of Intent and Request for Proposals for 2007-2011 grantee activity will be announced in Spring 2007, following First 5 California approval of Cycle 2 Grant Application.

1.A SCHOOL READINESS COORDINATION

First 5 Calaveras School Readiness Coordinator funded through 2010-11

Intention: Continue coordination of countywide School Readiness strategy implementation and evidence-based program enhancements to ensure responsiveness to special needs, diversity and collaboration between early care and education partners.

2.A FAMILY LITERACY – Raising a Reader and School Readiness Activities

School Readiness Component funded through 2010-11

Intention: Improves family and early literacy support, engagement and understanding of child development/school readiness opportunities for young children and schools' readiness for children. Enhance and expand family literacy through *Raising a Reader* family literacy activities, English as a Second Language and adult literacy activities.

2.A MENTAL HEALTH - School Readiness Mental Health Initiative

School Readiness Component priority funding through 2010-11

Intention: Improve children's mental health and well-being through direct service and case management. Improve family and caregiver understanding of the importance of child and family early mental health, wellness, and development of school readiness behaviors in order to ensure children reach kindergarten ready to learn. Integration opportunities with school readiness partners and CARES initiative.

3.A UNIVERSAL HOME VISITING

School Readiness Component priority funding through 2010-11

Intention: Improve children's development through age and developmentally appropriate activities and early developmental screening. Improve parents understanding of the importance of attachment and early development through home visits, playgroup participation, screening of mothers for depression, referral and case management to increase access to services and resources in order to ensure children reach kindergarten ready to learn.

4.A *DENTAL HEALTH AND EDUCATION - Calaveras Children's Dental Project*
School Readiness Component priority funding through 2010-11

Intention: Improves children's oral health, parent awareness of oral health issues. Supports family and caregiver understanding of oral health needs in order to ensure children reach kindergarten ready to learn.

3.A *SCHOOL READINESS COORDINATION ACTIVITIES – Kindergarten Transition and Bridge Activities*

School Readiness State Coordination priority funding through 2010-11

(no local 1:1 match required)

Intention: Provide systems opportunities through planned outreach, screening and services to identify the needs of children transitioning from preschool to kindergarten and enhance schools' readiness for transitioning children.

**FIRST 5 CALAVERAS
2007-12 Evaluation Plan for
Results-Based Accountability**

First 5 Calaveras is committed to making a difference for young children and families by ensuring the best and most appropriate allocation of funding as a valuable and effective community resource.

A. Identify activity aligned with Strategic Plan Goals, purpose of funded activity, expected outcome, baseline population data, and intended target population.	
<i>Review each funded activity for outcomes relative to each First 5 Calaveras Strategic Goal</i>	<i>Evaluation activities will identify and report to the Grant Review Committee at least twice each year, and the commission at least annually:</i>
1. Develop a written Evaluation Plan for all grantee funded programs.	a. See attached First 5 Calaveras Grantee Evaluation Plan, Form #4 attached
2. Identify, Collect and Report Descriptive Data	a. Who was served by the funded activity? <ol style="list-style-type: none"> 1. Children 0-3 2. Children 3-5 3. Parents 4. Professionals 5. General community supporting 0-5. 6. Ethnicity 7. Home Language 8. Qualifying Special Needs b. How many were served? c. How many First 5 Calaveras, state match and in-kind dollars were spent, on what, and by whom?
3. Identify and Report Outcome Data	a. What evidence will show if children and families are better off as a result of the activity? b. What primary indicators and data sources will measure success? c. What outcomes are identified through data sources and measures? d. Was service delivered well? e. Were any secondary indicators identified and outcomes noted?
4. Review collected data against Evidence-Based Best Practices	a. Describe how achieved outcomes compare to expectations of evidence-based best practices. b. Are new practices, measures or indicators necessary to exceed baseline and improve outcomes?
5. Annual review and modification of First 5 Calaveras administration, funding priorities, grant management, program strategies and evaluation criteria	a. Were opportunities for system integration and improvement identified and accessed? b. Who are the partners who can help us do better? How will we engage them? c. Are any changes necessary to encourage program sustainability and community/system integration? d. What do we propose to do next ? (Examples: Possible revisions to organizational practices, strategic plan objectives, expected grant outcomes, and/or modified funding priorities or strategies)

**FIRST 5 CALAVERAS
DEMOGRAPHIC REPORTING
DATA ELEMENTS**

TOTAL POPULATION SERVED (Unduplicated Counts)	NEW New people served for the FIRST TIME this reporting period	RETURNING People served this period who have been served previously
Children 0 to 3		
Children ages 3 to 5		
Children under age 5 - ages unknown		
Parents/Guardians/Primary Home Caregivers		
Other family members		
Providers/Professionals		
TOTAL		
Children under age 3 with Special Needs (IFSP)		
Children 3-5 with Special Needs (IEP)		
Unknown		

Population Served Definitions

Children: Children ages 0-5 who have not yet had their sixth birthday and receive direct services from a Commission funded program. In addition, children may be reported here when their Parents/Guardians receive services that will directly impact the children such as education or intensive services that promote children's health or development

Children 0 to 3: from birth to the third birthday, includes prenatal.

Children 3-5: from third birthday to sixth birthday

Parents/Guardians/Primary Home Caregivers: Parents/guardians and other adults acting as the primary caregiver for a child age 0-5 and receiving direct services from a commission funded program. Parents, legal guardians, foster parents, grandparents or other family members who serve as the primary caregiver of a child 0-5 are included in this category.

Other Family Members: Other family members include siblings age 6 or older, and adults (other than providers) who are not primary caregivers, but who participate with children in First 5 Calaveras funded activities.

Providers/Professionals: Childcare, early care and education, health, social service, elementary education, or other providers of services to children, pregnant women and/or parents of children ages 0-5, who participate in First 5 Calaveras funded training or activities in order to strengthen their capacity to better serve Calaveras County children ages 0-5 and their families.

Children with Special Needs: Children ages 0-5 with qualifying special needs as designated under the Individuals with Disabilities Education Act.

ETHNIC DESCRIPTION

NEW Population Only

ETHNICITY	Children 0-3	Children 3-5	Parents, Guardians	Providers, Professionals
Asian				
Black/African-American				
Hispanic/Latino				
Pacific Islander				
White				
Multiracial				
Other/Unknown				

Primary Language Spoken in the Home

NEW Population Only

LANGUAGE	Children 0-3	Children 3-5	Parents, Guardians	Providers, Professionals
English				
Spanish				
Cantonese				
Mandarin				
Vietnamese				
Korean				
Other (Specify)				
Unknown				

First 5 Calaveras Grants - Form #4

GRANTEE EVALUATION PLAN

(To be completed by Proposal Applicant in collaboration with First 5 Calaveras Staff)

Grantee Name		Total First 5 Calaveras Funds Requested:		
Contact Person		Contact Phone:		
Project Name				
Primary First 5 Calaveras Strategic Plan Objective Addressed		Funding Source		
<input type="checkbox"/> Systems Integration and Collaboration <input type="checkbox"/> Strong Families <input type="checkbox"/> Children Learning and Ready for School <input type="checkbox"/> Healthy Children		<input type="checkbox"/> First 5 Calaveras Local Initiative <input type="checkbox"/> School Readiness State <input type="checkbox"/> School Readiness Local <input type="checkbox"/> CARES State <input type="checkbox"/> CARES Local		
Outcome Objectives	Performance Indicators	Result Indicators	Data Collection	Frequency & Method of Data Review and Report
List at least one for each strategy identified in the Scope of Work. <i>What should the project achieve toward reaching the target?</i> <i>What is the evidence--based best practice link to the expected outcome?</i>	<i>What measures will be used to show progress is made toward goals?</i>	<i>What measures will be used to show the program outcomes were achieved?</i>	<i>Methods & tools used to measure progress</i>	First 5 Calaveras Grantee Requirements: <i>Scope of Work Achievements & Milestones and Child/Family data elements due quarterly</i>



Six Year Financial Plan

Best Estimates Effective 02-01-2007

		FY 06-07	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12	
<i>Starting fund balance</i>		\$ 790,728	\$ 635,079	\$ 519,209	\$ 482,309	\$ 431,114	\$ 364,348	
Strategic Plan Priority #	Revenues							
1,2,3,4	State Prop 10 Disbursements 02-06 Projections	\$ 255,000	\$ 246,075	\$ 237,462	\$ 229,151	\$ 221,131	\$ 213,391	F5CA yearly proj decrease 3.5%
1,2,3,4	State School Readiness Program Funds	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	
1,2,3,4	State School Readiness Coordination Funds	\$ -	\$ 25,000	\$ 25,000	\$ 25,000	\$ 25,000	\$ 25,000	
1,3	State CARES Funds	\$ 46,666	\$ 46,666	\$ 833	\$ -	\$ -	\$ -	
1,2,3,4	State SMIF Interest	\$ 408	\$ 394	\$ 380	\$ 367	\$ 354	\$ 341	
1	State Small County Augmentation (no program \$)	\$ 113,000	\$ 113,000	\$ 113,000	\$ 113,000	\$ 113,000	\$ 113,000	
1,2,3,4	Calaveras County Account Interest	\$ 20,000	\$ 13,972	\$ 10,384	\$ 9,646	\$ 8,622	\$ 7,287	Assumes interest rate of 2%
1,2,3,4	Undesignated Unreserved Funds from 2005-06	\$ -						
Total Anticipated Revenue		\$ 535,074	\$ 545,106	\$ 487,059	\$ 477,164	\$ 468,107	\$ 459,020	
	Expenditures							
1	Admin Personnel Costs (ED/Off Tech *.45)	\$ 57,082	\$ 53,173	\$ 55,300	\$ 57,512	\$ 59,812	\$ 62,205	Assumes annual increase of 4%
1	Admin Services/Supplies	\$ 33,085	\$ 33,747	\$ 34,422	\$ 35,110	\$ 35,812	\$ 35,812	2%
1	A87 County Admin Costs	\$ 16,000	\$ 16,320	\$ 16,646	\$ 16,979	\$ 17,319	\$ 17,319	2%
1	Evaluation Personnel Costs (ED/Off Tech *.20)	\$ 24,448	\$ 23,632	\$ 24,577	\$ 25,560	\$ 26,583	\$ 26,583	4%
1	Evaluation Services/Supplies	\$ 4,540	\$ 4,631	\$ 4,723	\$ 4,818	\$ 4,914	\$ 4,914	2%
1	Evaluation Contract	\$ 10,000	\$ 10,500	\$ 11,025	\$ 11,576	\$ 12,155	\$ 12,155	5%
1,2,3,4	Local Program Personnel Costs(ED/Off Tech *.35)	\$ 40,100	\$ 41,357	\$ 42,598	\$ 43,876	\$ 45,192	\$ 45,192	3%
1,2,3,4	First 5 Calaveras Program Services/Supplies	\$ 7,470	\$ 7,619	\$ 7,772	\$ 7,927	\$ 8,086	\$ 8,086	2%
1,3	Program - CARES State Contribution	\$ 46,666	\$ 46,666	\$ 833	\$ -	\$ -	\$ -	
1,3	Program - CARES Local Match	\$ 93,332	\$ 93,332	\$ 1,063	\$ -	\$ -	\$ -	
1,2,3,4	Program - State School Readiness Coord	\$ 25,000	\$ 25,000	\$ 25,000	\$ 25,000	\$ 25,000	\$ 25,000	
1,2,3,4	Program - State School Readiness Program	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	
1,2,3,4	Program - Local School Readiness Program	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	
1	Program - Local Grants Children's Services Coord	\$ -	\$ 25,000	\$ 50,000	\$ 50,000	\$ 50,000	\$ 50,000	
2	Program - Local Grants-MICH Vouchers	\$ -	\$ 75,000	\$ -	\$ -	\$ -	\$ -	
1,2,3,4	Program - Local Grants (Large/Mini/Sponsorships)	\$ 133,000	\$ 5,000	\$ -	\$ -	\$ -	\$ -	
	<i>New Granting</i>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
	<i>Designated Reserve for Future Initiative Match</i>	\$ -	\$ -	\$ 50,000	\$ 50,000	\$ 50,000	\$ 50,000	
Total Anticipated Expense		\$ 690,723	\$ 660,977	\$ 523,959	\$ 528,359	\$ 534,873	\$ 577,266	
Strategic Plan Priorities	Fund Balance	\$ 635,079	\$ 519,209	\$ 482,309	\$ 431,114	\$ 364,348	\$ 246,102	Goal is 300,000
	Contingency Funds	\$ 100,000	\$ -	\$ -	\$ 25,000	\$ -	\$ -	if 3 years unspent, allocate to programs/initiatives
Fund Balance with Contingency Expended		\$ 535,079						
<i>(Administrative Costs/Operating Budget 2006-07 Cap 15%)</i>		15%	16%	20%	21%	21%	20%	
<i>Program Costs</i>		79%	79%	62%	62%	61%	64%	

NOTES:

- (1) Personnel/Benefit Costs for 2006-07 includes adjustment for 2005-06 retro pay/benefits increases.
- (2) State/Local School Readiness program funding includes SR Coordinator Personnel Costs at 100% program activity allocation.
- (3) Admin Cost percentages for 2009-2011 will decrease to approved limits if contingency funds redesignated to program and adjustments to annual expenses.
- (4) Office Tech at .50 FTE

Revenue Assumptions

- (1) School Readiness funding awarded for Cycle 2 2007-11
- (2) School Readiness proposed Cycle 3 approved & awarded
- (3) CARES Cycle 3 funds have not yet been mentioned
- (4) Small County Augmentations continue with no change/interruption
- (5) County growth could stabilize state monthly revenue projections

APPENDIX A

Background – Community Assessment Update 03-2007

Following ongoing review of 2006 updates to community needs assessments First 5 Calaveras recognizes the continued need to support children ages pre-birth to five years and their families with high quality, coordinated, integrated early childhood health and education best practices reflective of community needs. A range of strategies building on community strengths for improvement and innovation, targeted services to meet the needs of distinct populations and countywide implementation of services continue to be identified as priorities among community partners.

Birthrates in Calaveras County are expected to slowly increase over the next few years, just as First 5 California projected tax disbursements are expected to decrease. First 5 California birth projections for Calaveras County are:

Year	Projected Number of Births
2006	341
2007	352
2008	362

The US Census estimated 2005 population for Calaveras County was 46,871. The US Census reports Calaveras County births decreased to 291 in 2005, while California census reports 2005 births at 335 and Calaveras County Public Health reported 315 births. These reports follow the Federal Census report of 323 in 2004. In 2004, approximately 2021 children were under five years old.

At least 22% of the county population in 2004 was under 18 years old, with nearly 12% of those children living in poverty. As new development of single family homes increases and new residents move to the area, this percentage may change to reflect an increase in families representing a “working poor” classification.

The county covers over 1000 square miles of rugged, rural terrain extending from the foothills to the crest of the Sierras. Communities are generally small and distinct, with large distances between them. Residents live in homes ranging from upscale, mini-mansions in resort style developments, to tents and camping for those experiencing transient homelessness.

The Valley Springs and Jenny Lind communities are increasing in growth, and represent significant family flight from the Central Valley. Many of these families will represent income levels not qualifying for their children for healthcare or childcare subsidies. The community is poised for further development of single family homes, with little to no infrastructure development offered to offset the demands of increased population.

As a result of in-depth evaluation in 2005 of First 5 Calaveras funded School Readiness activities, the commission determined that future activities would target the key communities of:

- Jenny Lind-Valley Springs
- West Point-Railroad Flat
- Angels Camp*

*(*includes the community of Murphys for strategies and outreach to Latino & Spanish speaking families)*

The population of the Jenny Lind and the greater Valley Springs area is approximately one third of the county population. The area is increasing in commuting working parents, however continues to have a fair population of families with one parent, generally the mother, at home. Jenny Lind Elementary is a rural school serving between 700-800 children per year. No services or resources exist in the area around the Jenny Lind School. Jenny Lind families have mailing addresses of Valley Springs, however the Jenny Lind elementary area consists of single family housing expanding over an approximately 10 mile radius. Jenny Lind area has no parks, stores, or services of any kind. Families generally drive to access services in the Valley Springs community center which is approximately six miles from Jenny Lind. Enrollment impacts to the Valley Springs and Jenny Lind schools may result in children attending a school out of their identified neighborhood. The town center of Valley Springs includes two small grocers, a drug store, post office, bank, gas station/mini-marts, fast food, church and physicians. Downtown Valley Springs also has two trailer parks and several small apartment buildings which are in walking distance to Valley Springs Elementary School, Valley Springs Public Library, the Valley Springs site for Calaveras Head Start/State Preschool and the services mentioned above.

Diversity, culture and equity issues in Calaveras County are considered by many community members and partners to transcend discussions of race, ethnicity and language. Within Calaveras County, diversity includes understanding the profound effects of poverty on families of any ethnic background, as well as understanding the distinct issues of rural culture, including both geographic and intentional isolation. For children with special needs, issues affecting inclusion and access are often compounded by the addition of rural and poverty issues.

Diversity in Calaveras County continues to increase, yet is very low as compared to California in general. Valley Springs experiences concentrated pockets of Spanish speaking families. According to the 2000 Census, the total population of Hispanic individuals in Calaveras County was 7%. This has increased, and according to projections from the California Governor's Office, is expected to double by the year 2020. The Head Start/State Preschool program experiences isolated enrollment of Spanish speaking students, primarily in Valley Springs and Angels Camp. Community partners universally express challenges with identifying resources and funding translators and interpreters. Nevertheless, all are committed to supporting increasing Latino population and of children and families speaking Spanish.

Preschools and kindergartens in Valley Springs and Angels Camp continue to experience a slow increase in enrollment of children speaking Spanish as their primary language. In Valley Springs, a core group of families with children under 5 are accessing ESL classes and participating in a First 5 Calaveras funded playgroup.

West Point-Railroad Flat communities are small, isolated rural communities with little to no services or economic activity following the wake of wholesale lumber industry closures. These

communities experience the lowest median income within Calaveras County. Over 34% of children in WP-RF are born in households with incomes below the Federal poverty level; and 84% of children in the community are eligible for school lunch support. While the communities have small elementary schools and a core population of very active committed individuals, the traditional problems of rural isolation, poverty and access to services are constant influences on children's early health and wellbeing. Transportation is challenging or non-existent for some families. Services are limited to a "mom and pop" grocer in Railroad Flat, and a small market, library branch and basic or itinerant services in downtown West Point.

The West Point Healthy Start funded parent co-operative preschool is scheduled to stop providing services in June 2006. Unless new services are offered, families in West Point who do not qualify for Calaveras Head Start/State Preschool services will need to drive down the mountain to Railroad Flat for parent co-op preschool activities.

West Point is home to an isolated Native American population which comprises about 12% of the area population, the highest concentration of Native Americans in the county. Representing the Miwok tribe and heritage, these families do not participate in the benefits of a Rancheria and casino active in the neighboring county. Many families experience significant effects of limited employment opportunities, poverty and social isolation impacting much of the West Point-Railroad Flat area. The Mariposa, Amador, Calaveras and Tuolumne (MACT) Native American Mental Health Services has established an office in the downtown West Point area to support the needs of this community.

The County Supervisor for West Point-Railroad Flat is also a First 5 Calaveras Commissioner. As Supervisor, and has been active in establishing a County Methamphetamine Task Force to review strategies for effective collaboration and intervention with regard to methamphetamine manufacturing, use and rehabilitation. Residents from the West Point-Railroad Flat community are actively engaged in supporting efforts to minimize the impacts of this countywide hazard on their local community and children.

West Point has recently benefited from an economic development committee established in the area, which experiences the benefit of local Tribal Council involvement. Projects resulting from the committee include the development of local work and industry projects, job training, and the establishment of a new "one-stop-shop" community resource center, bringing governmental agency staff to the area to provide outreach and direct service within the community.

Angels Camp is the only incorporated city in Calaveras County. While golf courses and high-end housing are being built in surrounding areas, the central community of Angels Camp serves as the location for housing and services addressing some of the needs of low-income and at-risk families. Mark Twain Elementary School is located within a mile of downtown Angels Camp. Mark Twain Elementary School is experiencing small but increasing enrollment of children from homes where Spanish is the primary language.

The target communities of Jenny Lind-Valley Springs, West Point-Railroad Flat and Angels Camp have been identified as strategic communities where specific and intentional school readiness interventions would be appropriate to minimize the effects of isolation, poverty, and challenged access to services and resources. While the county as a whole has experienced a downward K-12 enrollment, Kindergarten enrollment has increased countywide over the past

three years. In 2001-02, Kindergarten enrollment for the county was at 391 students. Enrollment increased by 8% for 2002-03 to 423, and has continued to increase over the past two years (California Dept of Education, <http://www.ed-data.k12.ca.us>). Elementary school principals in Calaveras County are planning the spring registration of 2007-08 Kindergarteners at approximately 360 students countywide, and anticipate that this number will increase as the school year begins.

Evaluation of the California Department of Education *2006 Accountability Progress Report* showed elementary schools in the county making adequate yearly progress with regard to Academic performance Index (API) related proficiencies. Nevertheless, risk factors exist that seriously impact individual children and family’s abilities to enter Kindergarten healthy and ready to learn. API scores for elementary schools countywide in 2006 are ranked as follows:

School	2006 API Score	2006 Statewide Rank	2006 Similar Schools Rank	2007-08 School Readiness Target
Mokelumne Hill Elementary	855*	9	NA	No
Albert A. Michaelson Elementary	832	8	2	Yes – non-English Population
Jenny Lind Elementary	802	7	3	Yes – Original SR Target School
Copperopolis Elementary	795	7	4	No
Hazel Fischer Elementary	794	7	2	No
Valley Springs Elementary	794	7	2	Yes – non-English Population
Railroad Flat Elementary	763*	6	NA	Yes
San Andreas Elementary	755	5	1	No
Mark Twain Elementary	751	5	2	Yes – non-English Population
West Point Elementary	731	4	4	Yes

- *Small School API calculation – less reliable and should be interpreted with caution*

Jenny Lind was the original school targeted for school readiness support in 2002. This school’s API scores have stabilized, however, Jenny Lind remains served by school readiness support along with Valley Springs Elementary due to risk factors such as increased family isolation, increased population growth of working poor families with limited health insurance and support resources, and enrollment of non-English speaking children. Mark Twain Elementary School scored 6 for 2005 API. West Point Elementary School scored 3, with the identification that the score was calculated for a small school, which makes the score less reliable than other schools. No Calaveras County schools in the 2005 API report were identified as “low performing” schools. San Andreas Elementary School is emerging as a concern. The community’s children and families will likely benefit from increased access to school readiness and family support activities.

According to Calaveras County Public Health, few Spanish language outreach materials and resources exist for bilingual and Spanish speaking/reading families. Other public health and community wellness issues reported by community partners include:

- Infant death rate in Calaveras County is slightly higher than the state average
- 82% of expectant moms started prenatal care, fewer than that completed it

- Of 315 births to Calaveras County residents in 2004, only 90 deliveries occurred in county. The balance of deliveries were spread over 20 counties. Deliveries to Hispanic parents increased by 10% last year totaling 14% of county births.
- Lifestyle diseases—coronary heart disease and cancer, obesity, are the major cause of death in the county. Only 44% of adults in the county had a healthy weight.
- Oral health continues to be challenged by lack of resources and education. In 2004-05, 300 Head Start children received dental screenings and cleanings by the Calaveras Children’s Dental Project. Of those, 70 required dental treatment.
- Calls to the Calaveras Women’s Crisis Center increased by 56% in 2004 to 993 calls.
- While the number of children in the county under age 18 is dropping, reports of child abuse are increasing, with 49 more reports and 10 more investigations in 2005, than in 2004.
- Of 813 reports of child abuse, 463 concerned neglect, 171 physical abuse, 133 sexual abuse or exploitation, and 89 emotional abuse.
- 81 reports dealt with children considered “at-risk” due to abuse of a sibling.
- 60 reports concerned caretaker absence or abandonment.
- Most reports came from Valley Springs/Jenny Lind (182), followed by San Andreas (183), Angels Camp (98), West Point (62), Copperopolis (59), Arnold (56), Mountain Ranch (32), Murphys (28), Glenco/Mokelumne Hill (25), Burson/Wallace (18), Railroad Flat (16), Dorrington (12), Vallecito (11).
- Suspected abuse reports from Calaveras Head Start/State Preschool staff doubled in 2004-05.
- Children’s Services reports the majority of cases investigated included substance abuse—alcohol, methamphetamine and marijuana.
- Calaveras County had the 55th worst ranking of 58 counties in deaths due to motor vehicle crashes during 2001-03. California Highway Patrol Data indicates an average of 74 children per year were injured in motor vehicle crashes during 2001-2004.
- 2005 SELPA data identified 12 children under age 3 with IFSP’s, only one of whom is diagnosed as solely low incidence and not receiving joint regional center services.
- Valley Mountain Regional Center (VMRC) reports approximately 26 clients in Calaveras County receiving Early Start services—15 living in Valley Springs or San Andreas.
- Approximately 13 three to five year olds are receiving Valley Mountain Regional Center services. They are represented fairly evenly across the county.
- VMRC reports a lack of available surrogates to represent children in the Individual Education and Individual Family Service Plan (IEP and IFSP) processes when parents are not available to do so.
- VMRC reports an expectation of increasing diagnosis of autism, and continued growth among other populations of disability as the county grows.
- VMRC reports concerns regarding the limited pool of respite, and in-home service providers (occupational, physical and speech therapists, IDS providers).
- School Readiness community partners in Head Start, Child Care, and Education are participating in “Special Quest” to improve inclusion opportunities and service coordination for infants and toddlers in Calaveras County.
- Calaveras Food Bank reports 2400 individuals and 819 families each month are at risk of going to bed hungry.

- In May, 2005, Food Bank reported between 850-900 families accessing emergency food services each month. This is an increase of 50-100 families per month since July 2004. 77 families from Head Start/State Preschool were referred to Community Services and received food assistance during the 2004-05 school year.
- The 2006 Hunger Study update for Calaveras County indicates an increase in the number of families identified as “working poor”, and increased numbers of families reporting severe hunger in their homes.
- Of families reporting severe hunger, 75 percent include children in the home.
- 6 percent of households surveyed reported regularly reducing serving sizes of children’s meals due to not having enough food
- 52 percent of households needing food suffered recent job loss
- 16 percent of households needing food have no transportation
- 20 percent of households needing food have no money for gas
- 40 percent of those receiving emergency food in Calaveras County are under age 18

The Our Children, Our Communities (OCOC) *Ten Year Master Plan for Children and Youth in Calaveras County* continues to be a guide for systems change, integration and planning for children of all ages in Calaveras County. In October 2006, the OCOC Steering Committee presented a Children’s Summit where over 100 parents, professionals, business and community leaders gathered to review progress toward Master Plan goals. The community input continued to identify needs in all areas of the Strategic Plan Focus Areas for OCOC. Establishing a Children and Family Element in the revision of the Calaveras County General Plan was seen by participants as a priority foundation for county-wide planning and collaboration to address the long term, systemic needs of children and families.