FIRST 5 ALAMEDA COUNTY STRATEGIC PLANNING RETREAT

Friday, August 24, 2012

First 5 Alameda County
1100 San Leandro Blvd., Suite 120
San Leandro, CA 94577

9:00 AM – 1:00 PM

Conference Room A

Commissioners: *Vice Chair:* Helen Mendel, CMD, Alex Briscoe, Keith Carson, Ricky Choi, M.D., Renee Herzfeld, Deborah Roderick Stark, Albert Wang, M.D.

1. **Setting the Stage**

- Overview of the Day's Agenda and Desired Results

- Summary of Input
    - Community Survey
    - Key Informant Interviews
    - Staff
- County Setting
    - Basic Demographics
    - Collective Work on Early Childhood Outcomes
    - Existing Commitments to External Funders

- Public Comment

2. **Proposed Framework for the Plan**

   Results and Outcomes --- Strategies and Initiatives --- First 5 Role --- Funding

    - Review, Discuss
    - Public Comment to Take Place After Presentation and Before Decisions

3. **Key Elements and Decisions**

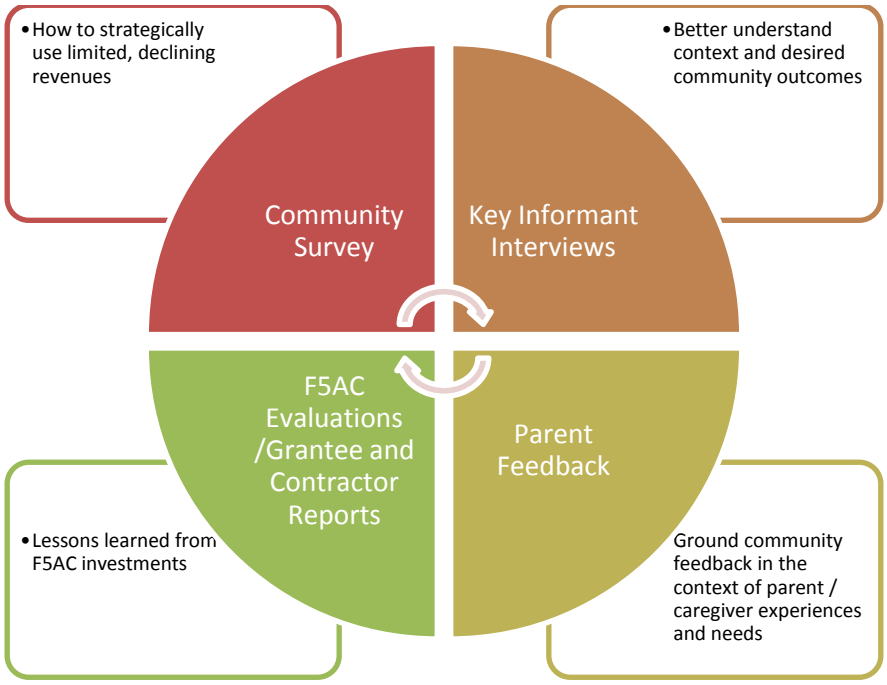
    - Public Comment to Take Place After Presentation and Before Decisions

4. **Wrap Up and Next Steps**

METHODOLOGY

An online community survey was opened from December 20, 2011 through January 12, 2012. The outreach was based on available email addresses from contacts in First 5 Alameda County's database, ECC Online. Individuals were welcome to share the survey with their personal contacts. So the outreach naturally selected individuals who have had some prior or current relationship with F5AC. A total of 560 respondents completed the survey.

Additional efforts to obtain community feedback will be conducted via upcoming key informant interviews, review of existing contractor reports and F5AC evaluation reports. Staff is reviewing parent feedback collected over time and determining what additional feedback should be obtained.

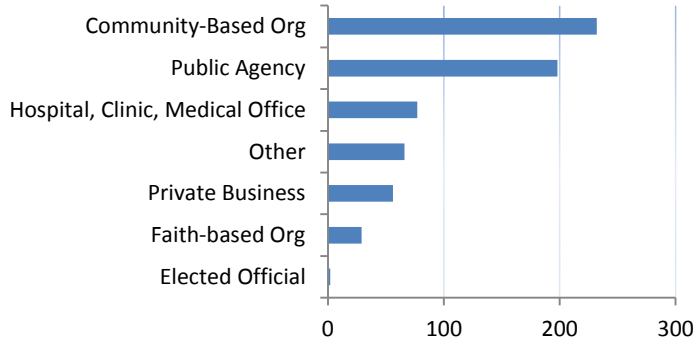


Closer to the end of the calendar year, a set of existing community meetings will be identified to vet a draft of strategic plan updates to date.

SUMMARY OF FINDINGS FROM COMMUNITY SURVEY

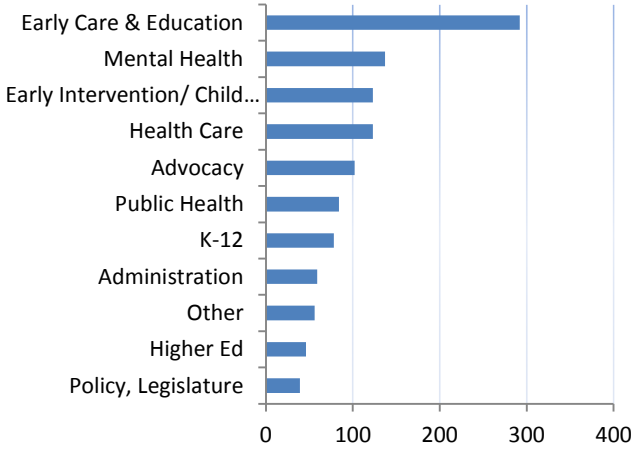
Who participated in the survey?

Number of Respondents by Org Type



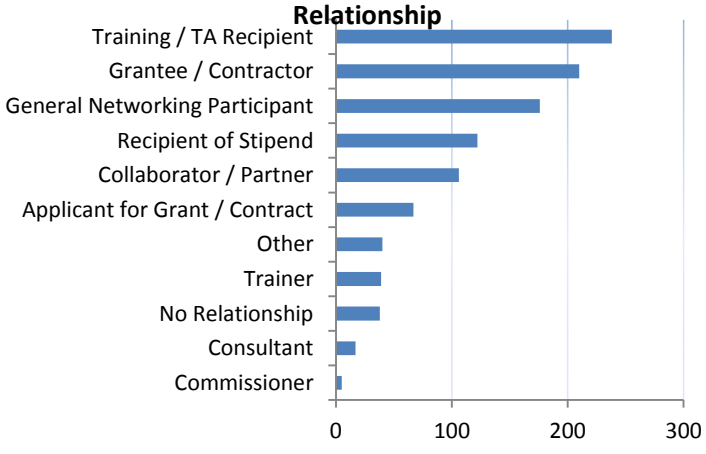
43% represented community-based organizations, 36% public agencies and 14% from a hospital, clinic or medical office.

Number of Respondents by Profession*



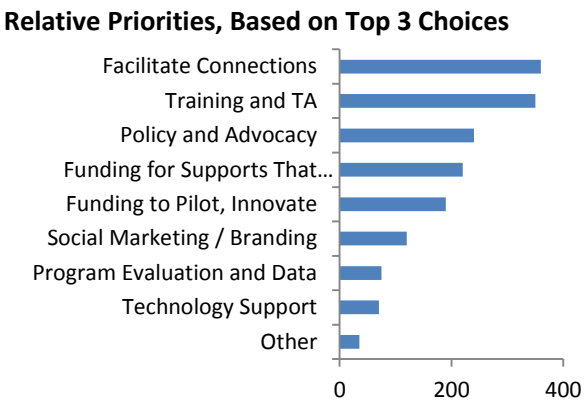
Over 53% were from early care and education, 22% each from mental health, health care and early intervention or child development agency. 15% to 18% were affiliated with advocacy, K-12 education, and public health organizations.

Number of Respondents by F5AC Relationship



43% of the respondents were past participants of a F5AC training and or technical assistance, 38% were past or current grantees or contractors, 32% participated in general networking opportunities facilitated by F5AC, and 22% received a stipend for participating in ECE professional development activities. 19% considered themselves collaborators or partners of F5AC. A smaller group represented individuals who applied for grants or contracts (12%) and those with no prior relationship to F5AC (7%).

What should First 5 Alameda County direct its resources towards?



Given a chance to rank items from a list of ways to use F5AC resources, the top three priorities that surfaced are:

- Facilitating connections between services / supports that serve young children
- Training and technical assistance in capacity building on early childhood topics, and
- Policy and advocacy

Recurring themes

It was clear the respondents were aware of the impact of declining tobacco tax revenues on F5AC's future services and direction. The majority of feedback validated the strategic focus on:

1. Policy, Advocacy and Communication: keep early childhood at the policy, program and budget development discussions, assist in developing funds for early childhood programs, communicate successes to broader community
2. Community and Provider Capacity Building: encourage best practices and ongoing professional development, build community's capacity to implement strong programs
3. Continuum of Care and Linkages to improve families' experiences in accessing supports they and their young children need: improve connections between providers and break down system silos, streamline, coordinate services , bring agencies to each other

Respondents also resonated with the need for F5AC to:

- Stay anchored in supporting parenting, beginning supports prenatally, and helping families with accessing basic needs
- Close gaps in services that other entities are not able to fill by helping identify gaps in supports and services and funding supports to close those gaps
- Build community "hubs" where caregivers and providers can go to for resources and information
- Support community's ability to advocate for their programs through research, data collection, testing innovative strategies, and bringing in funding sources

Concerns raised by respondents

When asked what F5AC should NOT fund respondents suggested that

- F5AC should not *waste* resources; it should choose investments that are beneficial to the community. For example,
  - F5AC should use evaluation data and communication / marketing more effectively, without the wasting resources on "slick" ads (some confusion between First 5 California media campaigns and F5AC materials). These types of investments should help build infrastructure and communication capacity in the community.

    - F5AC should not duplicate or compete with community organizations who have the capacity or who can build their capacity to deliver services. There is a perception that F5AC investments go toward self-preservation.
- Although some comments encouraged continued funding for direct services, a larger number of respondents recommended directing resources away from direct services, or away from using F5AC internal staff for direct services.
- F5AC should not become detached from families and the direct service sector. F5AC should invite local input, listen to the community, learn from practices on the ground.
- Although F5AC provided an effective safety net for children at high risk of developmental delay, some respondents would rather see renewed focus on early childhood and prevention, not just backfilling for essential services.
- F5AC should not spread investments too thinly, but be cautious about being overly narrow.
- F5AC programs have increased demand for services and supports that don't exist in the community, or whose funding is severely compromised or vulnerable.

Repeated themes highlight the desire to use funding for programs that:

1. Demonstrate positive outcomes
2. Build new partners and collaborations
3. Have working plans for sustainability or can leverage other funding
4. Are practical, realistic
5. Are helpful to the community
6. Meet identified community / family needs

CONTRASTING VIEWS ON THE SAME THEME

Differences of opinion were expressed regarding:

- Whether, and how, to balancing funding for innovation or non-traditional approaches with proven and evidence-based programs; between being prescriptive about standards of practice versus appreciating local approaches
- Equity in funding allocation; e.g., should investments target highly paid site directors versus poorly paid teachers / family providers, poor versus working class versus well-to-do families, small and medium organizations versus large agencies, populous neighborhoods versus countywide reach?
- Appropriate funding levels; e.g., below $75,000, which makes bringing programs to scale difficult, versus serving as the primary funder for programs that cannot continue after F5AC funding cycles end

In the follow-up with respondents who were willing to be interviewed, additional context and desired community outcomes can be explored with different stakeholders. Topics that could use deeper inquiry include:

1. How could F5AC strategies be more responsive to parents and provide more parenting supports?
2. Which community capacities does F5AC not know about, and can leverage?

3. What common outcomes could various county agencies get behind, and implement collaboratively?
4. Which "Community Benefits?" can F5AC impact, and how would they be measured?
5. How does F5AC decide whether to narrow versus broaden its reach or strategy?
    a. Strategy or outcome specific
    b. Disparity specific
    c. Fidelity to best practices
    d. End user (provider) specific: someone who sees a large number of families versus someone who serves a small number of families more intensively
6. What are various strategies for moving programs into the community?
7. What would a strong, resilient early childhood system of care look like?

Executive Summary

Key Informant Interviews to Inform

First 5 Alameda

County Strategic Planning

Prepared by:

Wendy Constantine
Research & Evaluation Systems

July 1, 2012

INTRODUCTION

On May 10, 2012, First 5 Alameda County (F5AC) selected Research & Evaluation Systems (RES) to conduct 20 interviews with key informants. These key informant interviews, together with other planning efforts, will ensure that F5ACôs goals, strategies, and funding allocations for fiscal years 2013-2017 will be appropriate for meeting the evolving needs of Alameda Countyôs children 0 to 5 years of age and their families.

METHODS

Approach to Developing the Key Informant Interview Schedule: Starting on May 16, the evaluator began a collaboration with F5AC staff on a rapid turnaround schedule to revise the initial and subsequent interview protocol drafts. After a pilot test interview with a key informant, some of the questions were re-ordered to improve question flow and other questions were revised to improve clarity and reduce interview length.

Setting up the Key Informant Interviews: The initial approach for requesting the interviews was made by letters sent by email. The letters were emailed to each potential key informant explaining why the interview was being requested, asking the person to participate, and saying to expect a phone call to set an appointment for the in-person interview. The letter also explained that a transcript of their interview responses will be shared with F5AC but their names would not be associated with their responses in any publications.

Conducting the Interviews: Between May 23 and June 14, a total of 22 (from the initial list of 27) key informant interviews were conducted, for a response rate of 81%. (See **Attachment A** for a table showing the initial list of 27 potential key informants by category of employment.)

Analyzing Results and Creating a Report: For each question in the interview schedule, a document was created on which a brief description of each key informantôs views was tabulated. As interviews were tabulated, the document reflected the extent of commonality and variation in responses across informants. Tables were created and are provided in the full report to provide information on the number of key informants holding each expressed view.

RESULTS

The interview schedule included nine questions. The results for each of the nine questions appear below.

Question 1

When asked to choose from four First 5 Alameda County outcome areas which one was their agency was most aligned:

- 9 chose identification and treatment of children with developmental and behavioral issues
- 9 chose kindergarten readiness
- 3 chose parenting support
- 1 chose parent/primary caregiver mental health

Question 1a

When asked what role F5AC should play in moving toward an early childhood system of care in their chosen outcome area, a total of 43 recommendations were received.

- Two thirds of these recommendations were that F5AC should assume what could be characterized as ñan intellectual leadershipò role.
- The remaining third of these recommendations were that F5AC should continue to support or expand specific partnerships or services.

Below are quotes from the interviews that illustrate the range of ñintellectual leadership rolesò that key informants suggested.

> *"F5AC is on the vantage point to have objectivity, set the vision, see connections, develop policy recommendations, and advocate."*
>
> *"Continue to serve as convener to develop a large systems effort in this area, including social services, early childhood education, and public health."*
>
> *"Lead in the use of common goals, tools and data collection."*

Question 1b

When asked to identify existing barriers to moving toward an early childhood system of care, the most frequent responses were:

- Difficulties in allocating scarce or limited resources, for example, balancing the need to spread resources to a large population vs. giving the resources in a more focused way to a specific population or geographical area
- Existing agencies and systems are fragmented, approaches and outcome measures are not unified
- Knowledge limitations: how to identify families needing services, agencies/services that are available, and how to connect them

Other barriers mentioned included: difficulties in determining and prioritizing, e.g., determining best practices, determining where to start, current organizational/administrative structures among agencies as well as their resistance to change, and a lack of community knowledge on the importance of the early years for development.

Question 1c

Would your agency participate in developing common outcomes and data collection efforts to measure success countywide?

- 19 key informants said ñyes.ò
- 2 key informants said ñit depends.ò

Including those saying ñit depends,ò concerns expressed by eight respondents included: we can share aggregate data only; we can find shared outcomes, however, each agency needed to report their own outcomes to funders; and the need to work for simplicity and ease of data collection.

Question 1d

What would you or your agency need from F5AC or others to participate in common outcome definition and measurement?

Of the 20 comments received, the responses of key informants included: leadership (5), funding (4), we are already working with F5AC (2), we need more information about F5AC (2), nothing (1). Seven responses included the need for a goal of designing a data system that does not overburden agencies, including: the system should not require us to duplicate entry for data we are already collecting and entering to meet other funder obligations; the need to identify measures already being collected that could be good measures for this system; and the need for an action plan to identify a few outcomes, and the tools to measure them.

Question 2

(In addition to a short list of systems initiatives that were shown to the key informants), in what other systems-focused initiatives do you believe First 5 Alameda County should be involved?
The many responses obtained are provided in the full report.

Question 3

What other key partners should F5AC be working with that are not currently involved in any systems initiatives as far as you know? The many responses obtained are provided in the full report.

Question 4

Key informants were asked what two roles F5AC should play in promoting a systems-focused initiative in the county. (Two responses per key informant). The roles together with the number of key informants suggesting them are listed below:

- Leadership in determine common outcomes and data specifications ð 10
- Leadership in resource development, e.g., grant writing ð 10
- Leadership in improving coordination between agencies, serve as convener or referral hub for a systems approach ð 9
- Technical assistance, training, and/or professional educationð 6
- Serve as a resource for conducting or disseminating researchð 5
- Provide advocacy and/or public awareness campaignð 3

Question 5

Other comments on the role First 5 should play to promote an early childhood system of care in the County included:

- Serve as a strong advocate/spokesperson for a family and child-centered system of care ð 5
- Continue to do the good work you are doing ï serve as convener, sit a multiple tables, supporting experts, staying abreast of current research, and planning for the futureð 4
- Continue to work with the school districtsð 3
- Focus on place-based, neighborhood initiatives of communities of greatest needð 3
- Seek funding opportunitiesð 2

Many other suggestions were made and are listed in the report.

The vast majority of key informants are enthusiastic about F5AC taking on this role. For example, one key informant said: ñThey are doing a great job now, have gotten all of the key stakeholders together, and stay abreast of current trends and research. That kind of research and convening is essential.ò

Question 6

Even while moving more into systems change efforts, what role should F5AC play in ensuring that families are able to care for and promote their children's optimal development?

The most frequently made recommendations:

- Educating parentsð 9
- Providing other parental supportð 9
- Continue to support direct services/include screening/support programs that have demonstrated positive outcomesð 5
- Adopt and advocate a framework for strengthening familiesð 4

Key informants had many comments regarding this question. A comment on parent education:

> *"Awareness, educating families. I think a lot of neglect issues can be avoided if parents or other caregivers know what issues to be aware of and get services for their children. I see child abuse and neglect has a public health components and educating and equipping parents and caregivers early When they leave the hospital, they should have info on how to contact the services of First 5. This is on the top of my list. System transformation from the ground up."*

Regarding other parental support, a key informant said:

> *"Providing parents with info or help with nutrition, healthy means, ways to cope when tired and the children want attention. Those kind of everyday things that families need to*

be healthy, preserve the mental health of parents. The families need to know how important those early years and not just park them in front of the TV with a cup of noodles. Provide information to parents on how to get it done in a way that is healthy for your family but does not take all of the time and money in the world. Build on the strengths of the family's resources, identify who can help with the family. If you have a dad who does not get along with the mom, figuring out how that dad can provide assistance to that family. Conflict resolution and so forth."

A vision was expressed by another key informant:

"I think promoting more peer support strategies; programs where we have families from specific communities supporting each other (for example, Latinos and Afghans). Organizing some community building to support parents in helping their children grow and develop. Need to empower people on how the systems work, e.g. schools, health care. People may turn to neighbors for advice--- encourage peer to peer, and make sure people know what they are talking about. Seed the community with real accurate information. In a recession, an opportunity: people are more willing to volunteer."

Question 7

What role should F5AC play in assuring that all providers working with children 0-5 have the knowledge, skills, and resources to provide quality services?

Sixteen separate comments were made that First 5 Alameda should continue to support and provide up-to-date training and coaching. Another frequently made comment (5) was that First 5 Alameda should identify whatôs working, identify outcomes, and monitor quality. Quotes provide some specific suggestions:

"Feeding back the data and the info on what's working. First 5 does a pretty good job on its annual report, but it's it s hard to read it cover to cover when received. More regular reports in a social media framework on what's working and invite taking action. Be strategic and selective."

"Valuable if they played a role in helping the state devise mandates that everyone should follow."

"Train on teacher intentionality, positive behavior management and parent involvement strategies. Teacher intentionality is the process by which teachers work with children with specific developmental goals in mind tailored to the individual child… to help them grow developmentally."

"Provide diverse training geared to the unique needs of the communities in which the providers serve, to be assured that the providers have the appropriate knowledge, skills, and resources."

Question 8

If we want to have a real impact, First 5 believes it must take effective interventions to scale. What approaches can F5AC use to influence city and county government, private foundations and the business community to make early childhood a priority and to commit funds to achieve outcomes?

Seven responses to this question focused on the need to increase contacts with stakeholders, agencies, and potential funders inform to what our system of care has done and clearly articulate common goals, and why it is a benefit to the community to invest in meeting the needs of young children.

Six additional responses focused on the need to partner other agencies, community organizations, and foundations to deliver the message, with three specifically mentioning the ICPC.

Orchestrating public awareness campaigns using multiple media about the importance of the early years -- citing findings from research -- was mentioned by six key informants. The need to develop common outcomes/data driven initiatives in collaboration with others was mentioned five key informants.

Many other suggestions of interest are included in the full report, and include:

- Present a clear strategic plan that shows where First 5 is investing, and how other funders and systems partners can leverage First 5 funding, and vice versaõ 3
- Be clear on priorities/common goals/not try to do everythingõ 3
- Have a skilled representative/cultivate community leaders/providers/families to attend pubic meetings and better advocate by telling their storiesõ 3
- Need more targeted data analysis, for example, of the E. Oakland Community, so we can better understand the scope of issues by neighborhoodõ 2
- Build a stronger stakeholder community with other agencies, including Childrenôs Hospital of Oakland and the school districts, community based organizations and medical providersõ 2

Key informants gave many ideas regarding how to maximize the effectiveness of contacts with stakeholders:

> *"A city council member said to us 'make the case for spending money in this service to have a positive impact in the community.' We need to make the case of how spending the money in early childhood prevention activities allows us to spend less money in police for child neglect and abuse investigations. Some cities' mayors are promoting efforts to get reading to grade level, to attract employers with an educated population. Need to think about the way to frame and make more explicit these kinds of messages. Any public entity has lots of competing programs, and need to frame it to appeal to the purpose and goals. There are some existing resources in the "National League of Cities" that are good examples; we don't have to invent them. Helping people look for opportunities in health care reform and Ca's budget realignment efforts."*

Engage a broad spectrum of leaders to serve as ambassadors to talk to other policy makers and community leaders about the importance of the mission. For example, when law enforcement comes to the table, the cross-sectional leadership will have a stronger impact in engaging other agencies or leadership to commit funds. Funders want to see effective collaboration in providing comprehensive care.

Another perspective was to engage local leaders through reports on local communities:

"They could produce community-specific reports, research and analysis narrowing down to a city or community level…would be helpful for local government support."

Regarding the need for a public awareness campaign, one key informant took looked at cultural change from a historical perspective:

"We need a culture change, similar to how we changed our response to drunk driving, littering, seat belts, and domestic violence. If you talked about these things 20 years ago, you will see the extent of change. Need to shift the culture to better understand and put to the forefront the importance of support to children during those early critical years. Reference, for example, brain development research."

Another key informant expressed a similar message:

"The most powerful form of advocacy is education around the importance of EC, using science-based, research-based info out there. For example, The Harvard Center for the Developing Child, and brain research that shows the importance of the early years."

Question 9

Is there anything else you would like to suggest for F5AC's future directions?

- Support for F5AC to take on a systems-oriented leadership roleð 4
- Donôt give up being innovators in service deliveryð 3
- We appreciate F5AC! ð 3 (This sentiment was expressed by many other key informants at various pointes in the interview)
- Donôt eliminate efforts with positive outcomes, if necessary, reduce funding insteadð 2
- Do we get to see the report you will write? ð 2

ATTACHMENT A

Sector	# in original list (N=27)	# inter-viewed (N=22)	# not inter-viewed (N=5)
Education/school districts 1. Barb DeBarger, San Lorenzo Unified School District 2. Suzanne Nelson, N. Region SELPA 3. Kent Rezowalli, Tri-Valley SELPA 4. Lisa Kleinbub, Regional Center of the East Bay	4	3	1
ECE 5. Vincent Cheng, R & Rs 6. Valerie Helgren-Lempesis, FIX 7. Angie Garling, Alameda County Child Care Planning Council 8. Edna Rodriggs, Chabot College	4	3	1
Clinics/Health Care 9. Deborah Workman (for Nance Rosencranz), LifeLong Administrative Offices 10. Hali Sherman, MD, La Clinica de La Raza 11. Ralph Silber, Alameda Health Care Consortium 12. Luella Penserga, Alameda Health Care Consortium 13. Ingrid Lamirault, Alameda Alliance	5	3	2
Community 14. Angela Louise Howard 15. Barbara McCullough, Brighter Beginnings 16. Sandy Taylor, Oakland Fund for Children & Youth 17. Iris Preece, City of Fremont	4	4	-
Public Agency Program Leadership 18. Andrea Youngdahl, Interagency Childrenôs Policy Council 19. Michelle Love, Alameda Couny Social Services 20. Wilma Chan, Board Of Supervisors 21. Nate Miley, Board Of Supervisors 22. Nancy OôMalley, County District Attorney 23. Rhonda Burgess, Presiding Judge Of Juvenile Law 24. Roger Chan, East Bay Childrenôs Law Offices	7	6	1
Neighborhood Services 25. Olis Simms, Youth Uprising 26. Scott Means, City of Oakland Office of Parks and Recreation 27. Scott Ferris, Berkeley Parks and Recreation	3	3	-
Total	27	22	5

KEY INFORMANTS' RECOMMENDATIONS REGARDING

FIRST 5 ALAMEDA COUNTY'S 2013-2017 STRATEGIC PLAN

Prepared by:

Wendy Constantine

Research & Evaluation Systems

July 1, 2012

INTRODUCTION

On May 10, 2012, First 5 Alameda County (F5AC) selected Research & Evaluation Systems (RES) to conduct 20 interviews with key informants. These key informant interviews, together with other planning efforts, will ensure that F5ACôs goals, strategies, and funding allocations for fiscal years 2013-2017 will be appropriate for meeting the evolving needs of Alameda Countyôs children 0 to 5 years of age and their families.

METHODS

Approach to Developing the Key Informant Interview Schedule: Starting on May 16, the evaluator began a collaboration on a rapid turnaround schedule with F5AC staff to revise initial and subsequent interview protocol drafts to improve wording. After an initial pilot test interview with a key informant, some of the questions were re-ordered to improve question flow and other questions were revised to improve clarity and reduce interview length. The interview schedule was then finalized for the remaining key informant interviews. A copy is attached **(see Attachment A).**

Setting up the Key Informant Interviews: Across many studies, the evaluator has found that the most effective initial approach for requesting an interview for this type of study is a letter sent by email. F5AC staff and the evaluator collaborated on letter drafts and the final versions appear as **Attachment B.** A list of 27 potential key informants was provided by F5AC staff, together with email addresses and phone numbers as available. After all email addresses were obtained (which in some instances required phone contacts with the offices of the potential informants), the letters were emailed to each potential key informant explaining why the interview was being requested, asking the person to participate, and saying to expect a phone call to set an appointment for the in-person interview. The letter also explained that a transcript of their interview responses will be shared with F5AC but their names would not be associated with their responses in any publications.

Conducting the Interviews: The evaluator read each question from her laptop and entered the responses by question. For two questions, a visual aid was used (a document containing two ñshow cards,ò which listed additional details of the question content to which the key informant was asked to respond. Following each interview, the transcripts were edited to remove typographical errors.

Between May 23 and June 14, a total of 22 (from the initial list of 27) key informant interviews were conducted, for a response rate of 81%. (See **Attachment C** for a table showing the initial list of 27 potential key informants by category of employment.) Two additional key informants indicated their willingness to be interviewed if the time frame for the interviews would have been extended for an additional week.

Analyzing Results and Creating a Report: For each question in the interview schedule, a document was created on which the content of the each informantôs answer was tabulated. As interviews were reviewed, the document reflected the extent of commonality and variation in responses across informants. Tables were created to provide information on the number of key informants holding each expressed view.

RESULTS

The interview schedule included nine questions. The results for each of the nine questions appear below.

Question 1

In the face of declining revenues from tobacco tax, F5AC is reexamining its priorities. To best use its resources and enhance the sustainability of First 5 services in the community, the Commission is strengthening its focus on systems development and capacity building. While direct services will continue to be supported through community partners, funding will be aligned with larger systems of care initiatives F5AC has identified as priority areas.
F5AC will continue to focus its work in the following outcome areas: (SHOW CARD A). With which of these F5AC outcomes is your agency most aligned? [ENTER LETTER]

CARD A

A. **Early identification of children with developmental and behavioral issues and linking families to early supports for development and social emotional, behavioral health.**
B. **Parent / primary caregiver mental health: Enhanced primary caregiver mental health, increased access for and utilization by primary caregivers of mental health services.**
C. **Parenting support: improved parent child attachment, reduced parenting stress, increased access to concrete basic needs economic support, enhanced parent knowledge of child development, increased optimal breastfeeding/nutrition and prenatal and postpartum health.**
D. **Kindergarten readiness: Improved readiness in basic building blocks, smoothed transition to K, enhanced access to quality preschool and other early learning experiences, improved child care quality.**

All respondents without exception initially either chose multiple areas or asked ñJust one? ò However, when asked to select just one category, the results shown in Table 1 were obtained. An equal number of key informants were from agencies most aligned with the early identification and treatment of children with developmental and behavioral issues or with kindergarten readiness, with some representation of key informants from the other two areas.

Table 1. Outcome areas in which the key Informant's agencies were most aligned

Category	Content	# of key informants selecting (N=22)
A	Identification and treatment of children with developmental and behavioral issues	9
D	Kindergarten readiness	9
C	Parenting support	3
B	Parent/primary caregiver mental health	1

Four follow-up questions were asked of each informant regarding the agency alignment category selected. These questions were:

- **As I mentioned earlier, F5AC plans to increasingly align its funding to support larger initiatives that provide systems of care. What role should F5AC play in moving toward an early childhood system of care in [THE OUTCOME AREA]?**
- **What are existing barriers?**
- **Would your agency participate in developing common outcomes and data collection efforts to measure success countywide?**
  - **IF YES: What would you or your agency need from F5AC or others to participate in this process?**

Results for each of the four areas are presented below by each of the four agency alignment categories A-D that were shown to the key informants.

Roles F5AC Should Play in Moving Toward an Early Childhood System of Care

Agency aligned with category A: Early identification of children with developmental and behavioral issues and linking families to early supports for development and social emotional, behavioral health.

This category was chosen by 9 key informants as the outcome with which their agency is most aligned.

Table 2. Themes in the responses of the 9 key early informants from agency alignment category A: Early identification and treatment of children with developmental and behavioral issues

Recommended role for First 5 Alameda County	Number of mentions of this role by the nine key informants
Lead/Convene/Identify	**12**
Create/continue to work toward an organized, easily assessable system of screening and referral and care that brings agencies together	4
Identify and help agencies with funding gaps and families not currently being served	4
First 5 is on the vantage point to have objectivity, set the vision, see connections, develop policy recommendations and advocate	3
Prevent duplication of effort across agencies	1
Increase support and/or collaboration with specific agency types and/or specific services	**9**
Solidify and expand existing early intervention programs; continue funding programs that work	3
Continue support of pregnancy and early support programs (including home visiting programs)	2
Expand partnership with social services agency	2
Collaborate with community health centers	1
Support parent education	1

As shown in Table 2 above, key informants whose agencies were most aligned with this area believed F5ACõs main roles should be: to provide leadership for bringing agencies together; provide vision; and have an overview of other agency resources, connections, gaps, and duplication of services. One of the more extensive comments on this theme is:

> *"With its expertise and funds, provide leadership in identifying multi-door systems of care for children and their families that are outcome driven…include coordinated systems of care across education, health care, social service, criminal justice, and mental health treatment for children who witnessed violence."*

Agency aligned with category B: Parent/primary caregiver mental health: Enhanced primary caregiver mental health, increased access for and utilization by primary caregivers of mental health services.

This category was chosen by one key informant as the priority area with which her agency was most aligned.

Her comments on First 5ôs roles in moving towards an early childhood system of care in this area included:

- Identification: Enhancing the identification of parents with mental health needs that will impact children
- Parent education and parental support: Increased parental access to mental health promotion by giving parents information on positive parenting, positive discipline, and increasing the capacity of adults
- Private sector insurance**:** More emphasis on services available through these systems

Agency aligned with category C: Parenting support: improved parent child attachment, reduced parenting stress, increased access to concrete basic needs economic support, enhanced parent knowledge of child development, increased optimal breastfeeding/nutrition and prenatal and postpartum health. This category was chosen by three key informants as the outcome with which their agency was most aligned.

Table 3. Themes in the responses of the three key informants from agency alignment Category C: Parenting support

Recommended role for First 5 Alameda County	**Number of mentions of this role by the three key informants**
Lead/convene/identify	**2**
Continue to serve as convener to develop a large systems effort in this area, include social services, ECE, and public health 5	1
Identify agencies that have experience and expertise doing the work and fund or assist them with funding, directly or indirectly 7.	1
Build on the work of others:	**2**
Build on the electronic tools now being developed to share patient health information between health centers 14	1
Use the research and curriculum developed by others, such as the Harlem Childrenôs Zone 14	1

As shown in Table 3 above, key informants whose agencies were most aligned with parenting support recommended that F5AC continue and strengthen its role in leadership and convening, utilizing its position as the agency with an overview. Other comments focused on building on the work of others in research, curriculum and tools for data sharing.

<u>Agencies aligned with category D</u>: Kindergarten readiness: Improved readiness in basic building blocks, smoothed transition to K, enhanced access to quality preschool and other early learning experiences, improved child care quality.

This category was chosen by nine of the key informants as the outcome with which their agency was most aligned.

As shown in Table 4, key informants whose agencies were most aligned with kindergarten readiness recommended that F5AC strengthen its role in leadership and convening, using its position as the agency with the greatest overview to be a hub for convening, referrals, and the identification of funding issues. Also recommended was that First 5continue to partner with other initiatives including school districts.

Table 4. Themes in the responses of the nine key informants from category D: kindergarten readiness

Recommended role for First 5 Alameda County	Number of mentions of this role by the nine key informants
Lead/convene/identify	**7**
Be stronger in communication, stakeholder convening, advocacy, and public policy	3
Identify agencies that provide services and serve as the centralized place for referral/convene to convince them to collaborate more	2
Lead in the use of common goals, tools, and data collection	1
Address separate funding streams as work for a system of care, connect with administrative or legislative remedies	1
Continue Partnerships	**3**
Continue to work and coordinate in quality rating and improvement system, including the school districts	2
Continue to support Help me Grow, and provide funds for it	1
Disseminate information/educate	**5**
Provide landscape analysis, data collection, literature review	2
Provide best practice model(s) on parent engagement, parent ed, preparing kids for kindergarten, and update as new research results come in	2
Provide TA for teachers and funding for college courses	1

<u>Summary of recommendations</u>: There was considerable convergence in the recommendations the 22 key informants made regarding the roles that First 5 Alameda should perform in creating early childhood systems of care. First and foremost, the key informants believed that First 5, with its funding not tied to providing specific services, could serve critically important leadership roles in convening the Countyôs agencies to work successfully toward the goal of creating systems of care. Such roles included helping to create a shared vision, developing policy recommendations, advocating on the importance of the early years, and leading in the use of common goals, tools, data collection and reporting. Other recommendations included continuing partnerships with other systems of care initiatives, creating and disseminating best practice models and the research of other organizations, and producing reports on the needs of local communities.

The Existing Barriers to a System of Care

The 22 key informants identified 40 issues they considered existing barriers to creating a comprehensive system of care for Alameda Countyôs children and families. As shown in Table 5 below, these centered on resource limitations, on the fragmentation of existing agencies and approaches, knowledge limitations, and determining priorities. Illustrating knowledge limitations, one respondent stated

> *"We need more education and awareness of First 5's existing programs. Our agency is appointed to represent every child in the foster care system in Alameda County Twenty-five percent of Alameda's children in foster care are aged 0-5."*

Table 5. Themes in the responses of the 22 key informants regarding existing barriers

Barriers to the creation of a system of care	Number of mentions by the 22 informants of a barrier within this theme
Difficulties in allocating scare resources/resource limitations	9
Existing agencies and systems are fragmented, not working together, approaches are not unified; there is a need for universal child care standards; it would be difficult to set up a common system of pre- and post assessments across different agencies	9
Knowledge limitations: there is much not known about how to identify all children and families in need of services, agencies/services that are available, and how to engage and connect families to services	6
Difficulties in determining and prioritizing: determining what are best practices, determining where to start first, balancing the need to spread resources to a large population vs. giving the resources in a more focused way to a specific population or geographical area	3
Organizational/administrative changes needed	3
A need for advocacy or a social campaign for healthy child development	2
Not all agencies are open to change	2
Parents need more information when and how to obtain services	2
Lack of transportation for parents and teachers	1

Would The Key Informant's Agency Participate in Developing Common Outcomes and Data Collection Efforts to Measure Success Countywide?

Almost all key informants responded ï most with enthusiasm ï that they would contribute, as shown below. Some concerns were expressed by five key informants, however, as shown below.

Table 6. Agency participation in developing common outcomes and data collection efforts to measure success countywide

Offer of assistance	Number of the 22 key informants who made this response
Yes, no other comment	9
Yes, and we have expertise and experience developing outcomes, collecting and analyzing data	3
Yes, and we could help facilitate agreement on shared outcomes	2
Yes, with contingencies:	
o We can share aggregate data only	2
o We can find shared outcomes, in addition to each agency needing to report their own outcomes to funders	1
o We cannot change what outcomes we report, but we could use help in better collecting and combining the data	1
o Yes, we need to work for simplicity and ease of data collection	1
Total Responding Yes	**19**
It depends; have existing data reporting mandates/resource constraints	2
Response missing	1

IF YES: What Would the Key Informants or Their Agencies Need From F5AC or Others to Participate in this Process?

As shown in Table 7, a variety of needs were expressed on what support would be needed to participate in common outcome definition and measurement, with the most frequent responses being that leadership is needed from First 5, and that funding would be needed (3 informants) or helpful (1 informant). Six of the informants expressed a concern that the data collection and entry for outcome measurement should be designed with the goal of not overburdening agencies, and in particular, not require data entry that was duplicative.

Table 7. Support needed from First 5 to participate in common outcome definition and measurement

Types of support	Number of the 22 key informants who made this response
Leadership from First 5	5
Funding	4
We are already working on with First 5 on this	2
Need more knowledge of First 5	2
Answer indicates need for a goal of designing a data system that does not overburden agencies	
o Need to have as a goal a system that does not require us to duplicate entry for data we are already collecting and entering to meet other funder obligations	2
o Need to identify measures already being collected that could be good measures for this system;	1
o Happy to participate; much depends on the outcome data needed	1
o We need an action plan to identify a few outcomes, and the tools to measure them	1
o Not overburdening our clinics	1
Nothing is needed	1

Question 2

F5AC is working with several systems-focused initiatives in partnership with others: (SHOW CARD B)

CARD B

- **Home Visiting/Family Support**
- **Help Me Grow/Early Connections (Early Identification, referral and treatment of developmental and social emotional issues)**
- **Race to the Top Early Learning Challenge Grant - Quality Improvement Rating System (Quality Early Care and Education)**
- **School Readiness/School Transition**
- **Hayward Promise Neighborhood**
- **East Oakland Building Healthy Communities**

In what other systems-focused initiatives do you believe First 5 Alameda County should be involved?

Key informants provided the names of 16 entities they considered systems initiatives, and provided descriptions of 14 others without the name specified.

Systems initiatives named

1. Alameda County Childcare Planning Council
2. Alameda County Family Justice Center
3. Alameda County Interagency Childrenôs Policy Council (ICPC) led by the board of supervisors
4. Alameda Health Consortium
5. Building Blocks Collaborative
6. Comprehensive Perinatal Services Program (CPSP), administered by Alameda County Public Health, part of Medi-Cal
7. Every One Home (Social Services program)
8. Fight Crime, Invest in Kids
9. Men and Boys of Color initiative
10. Oakland Fund for Children and Youth
11. Oakland Unified School district, particularly their parent group for kids with disabilities (CAC)
12. Project Launch, which may be a subcategory of the East Oakland Building Healthy Communities
13. Sustainable Neighborhood Initiatives (Bay Area LISC)
14. Task Force of the Oakland School District
15. Youth and Family Opportunity Hubs (Alameda County Health Care Services)
16. ñZero to Eight Convergenceò

Descriptions of systems initiatives without the name specified

1. Building community support for early childhood as recommended by the report ñTransition to Kindergarten: A Review of Current Research and Promising Practices to Involve Familiesò
2. Childrenôs Hospital of Oaklandôs initiative for 0-5
3. Community based health centers
4. Connect with city governments and their partners in the County
5. ñCradle to Careerò initiative in Oakland funded by the Kellogg Foundation
6. Food access and nutrition programs
7. Full service community schools
8. Initiatives to provide health insurance to all children
9. Job development, Cal Works training, this has a lot of impact on children

10. Mayorôs office with the school district has created an education policy group
11. Neighborhood based initiatives
12. Private health care (e.g., Kaiser, Palo Alto Medical Foundation) either directly or through foundations such as Robert Wood Johnson or the CA Endowment
13. Programs focusing on school retention, including school assistance of finding appropriate ways to help kids with social and behavioral issues instead of school suspension
14. School based health centers

Question 3

What other key partners should F5AC be working with that are not currently involved in any systems initiatives as far as you know? PROBE IF NECESSARY: These might be, for example, community-based organizations, public agencies, or foundations.

Key informants provided the names of 14 entities the recommended as key partners, and provided descriptions of 12 others without the name specified.

Programs named

1. Alameda County Office of Education
2. Blue Ribbon Commission of Alameda County
3. CA ECE Association
4. Casey Family Foundation
5. Children Now
6. District Attorneyôs Office
7. East Bay Community Foundation
8. Family Support Services of the Bay Area
9. Fight Crime/Invest in Kids
10. Head Start
11. Kidango
12. Lotus
13. Men and Boys of Color (2 interviewees mentioned)
14. Task Force of Oakland Unified School District

General program descriptions

1. Accrediting agencies
2. Continue to participate in Early Childhood Funders
3. Faith-based organizations
4. Farmersô markets
5. Grass-roots neighborhood driven initiatives
6. Health centers/plans, including commercial health plans (2 interviewees mentioned)
7. Libraries
8. Organizations working for community/economic development
9. Other local established and licensed preschools
10. Park districts
11. School districts within the county (3 interviewees mentioned)
12. Strengthen the effectiveness of existing relationships rather than forging new ones to overcome gaps in service

Question 4

There are a variety of roles First 5 Alameda County could play in promoting a systems-focused initiative in the county. Such roles might include providing leadership, writing grant applications, providing advocacy, developing data specifications and providing support for common outcome measurement, and so forth.
What do you believe would be the two most effective roles for First 5 Alameda County to assume in promoting a systems-focused initiative for children 0-5 in the county?

Many informants asked for the list of examples to be repeated before answering the question, although they were reassured that their answers were not to be limited to those provided. Key informantôs choices of roles they recommended for First 5 are shown in the table below.

Table 8. The two most effective roles First 5 Alameda could play in promoting a systems-focused initiative

The roles First 5 should play in promoting a systems-focused initiative	Number of the 22 key informants who made this response
Provide leadership in determining common outcomes and data specifications/data sharing between agencies and between First 5 and other agencies, evaluation	10
Leadership in grant writing, resource development; apply for funding in partnership with other organizations, or help other organizations in doing so to promote sustainability	10
Providing overall leadership, improve coordination and serve as convener and/or referral hub for a systems approach	9
Technical assistance, training, and/or professional education	6
Serve as a research resource	5
Provide advocacy and/or public awareness campaigns	3
Total number of roles suggested	**43**

The suggestions the six key informants provided on how First 5 could ñserve as a research resourceò include gathering or publicizing accurate data on the status of children/kids not being served; showing correlation between problems and negative outcomes to build evidence of need for First 5 and otherôs use in advocacy including city/area-specific reports like Children Now does for the state, gathering data on methods that work, and disseminating best practices for use in advocacy for the expansion of proven methods (rather than searching for new programs).

Question 5

What other comments do you have on the role F5AC should play to promote an early childhood system of care in Alameda County?

A range of suggestions was made. Those suggestions that were made by two or more key informants are shown in Table 9, with the remaining suggestions listed below the table.

Table 9: Other suggestions for promoting an early childhood system of care

Suggestion for promoting an early childhood system of care	Number of the 22 key informants who made this response
Serve as strong advocate/spokesperson for a family and child-centered system of care. Comments included: advocacy on the value of prevention services in the early years; make people aware of the consequences of not serving children 0-8 in those critical years; the public needs to understand the importance of ECE is the foundation of education, not just childcare; using public education campaigns; talk about investments and tax savings, etc. using findings; use evidence in the literature; and advocate for universal pre-K or play and learn groups.	5
Continue to do the good work they are doing: serve as a convener, sit at multiple tables (including 4-year institutions of higher learning), identifying and supporting experts, staying abreast of current research, and/or modeling examination of key priorities for the future.	4
Continue to work with the school districts, using the concepts of 3rd grade success as goals to promote early intervention and keep early childhood on the school districtsô agendas.	3
Focus support on place-based, neighborhood initiatives of communities in greatest need that build from the individual out to the community, focusing on root causes, primary prevention including food, parks, safety, youth development, early learning, schools up to age 8, build capacity. Empower the community.	3
Help with funding: identify other funding sources for others, and seek funding opportunities for F 5 that others are not eligible for or donôt have the capacity for, using community input to help decide if the opportunities are worthy.	2

Other suggestions included:

- Bring forward innovation and new thinking
- Continue or increase First 5ôs focus on school readiness and transitional kindergarten
- Help set up an automatic system in which all children 0-5 in foster care have an assessment to identify their developmental needs and connect them with services
- Expand its mission to support Help Me Grow in ñlooking atò all children in this age range
- Ask direct service providers funded by First 5 that provide effective services what is working, and collaborate to more holistically to raise our children

- Make sure that efforts to identify and refer children with developmental needs are met with adequate capacity of programs to serve them
- Increase communication and collaboration with health centers (including their administrative headquarters) serving low income people
- Increase focus on parent education

The vast majority of key informants are enthusiastic about F5AC taking on this role. For example, one key informant said: ñThey are doing a great job now, have gotten all of the key stakeholders together, and stay abreast of current trends and research. That kind of research and convening is essential.ò

Question 6

Even while moving more into systems change efforts, what role should F5AC play in ensuring that families are able to care for and promote their children's optimal development?

Key informants made the suggestions listed below.

Table 10. The recommendations made by key informants on the role First 5 should play with families

Helping families be able to care for and promote their children's optimal development	Number of the 22 key informants who made this response
Educating parents	9
Parental support	9
Continue to support direct service programs/include screening/that First 5 has shown to have positive outcomes	5
Adopting and advocating some of the framework for strengthening families, promoting language, theory and/or framework for family-centered policy and practice	4
Continue and promote the great work theyôve been doing in training.	2
Home visiting	2
Families should be at the table	2
Promote school readiness and transition	1

There was a wide range of ideas expressed by the nine informants suggesting ways for continued First 5 involvement in providing parental support:

- Help parents enroll in Medi-Cal if health reform is not overturned
- Create welfare-to-work programs that elevate their status and skills. Create some work re-entry programs for parents and caregivers that stayed home with heir kids.
- Support families through the school district child care centers; infuse their commitment and knowledge base.
- Include family strengthening in early care and education programs.
- Include nutrition, exercise, self care, etc. in a way that is accepted in different cultural and economic environments.

Quotes from key informants in answering this question for illustrate the passion many informants brought to the issue of family support.

Regarding educating families:

> *"Awareness, educating families. I think a lot of neglect issues can be avoided if parents or other caregivers know what issues to be aware of and get services for their children. I see child abuse and neglect has a public health components and educating and equipping parents and caregivers early When they leave the hospital, they should have info on how to contact the services of First 5. This is on the top of my list. System transformation from the ground up."*

Regarding parental support, a key informant said:

"Providing parents with info or help with nutrition, healthy means, ways to cope when tired and the children want attention. Those kind of everyday things that families need to be healthy, preserve the mental health of parents. The families need to know how important those early years and not just park them in front of the TV with a cup of noodles. Provide information to parents on how to get it done in a way that is healthy for your family but does not take all of the time and money in the world. Build on the strengths of the family's resources, identify who can help with the family. If you have a dad who does not get along with the mom, figuring out how that dad can provide assistance to that family. Conflict resolution and so forth."

A vision was expressed by another key informant:

"I think promoting more peer support strategies; programs where we have families from specific communities supporting each other (for example, Latinos and Afghans). Organizing some community building to support parents in helping their children grow and develop. Need to empower people on how the systems work, e.g. schools, health care. People may turn to neighbors for advice--- encourage peer to peer, and make sure people know what they are talking about. Seed the community with real accurate information. In a recession, an opportunity: people are more willing to volunteer."

Question 7

What role should F5AC play in assuring that all <u>providers</u> working with children 0-5 have the knowledge, skills, and resources to provide quality services?

Key informants enthusiastically underscored the need for F5AC to continue the work they have been performing in the area of provider training.

Table 11. Role F5AC should play in assuring quality provider services

Suggestions on F5AC role	Number of the 22 key informants who made this response
Continue to support and provide up-to-date training and coaching; highlight best practices, build capacity (four of these responses contained a specifically mention of the need to maintain the incentive program for child care providers to continue their professional development)	16
Identify whatôs working, identify shared outcomes, monitor quality and/or hold funded service providers accountable to meet the mission/outcomes	5
Look to enhance existing programs, rather than to replace or duplicate	1
Promote the development of a registry and the use of early childhood competencies throughout the county	1

The verbatim responses of key informants regarding provider training are worthy of note:

> *"Feeding back the data and the info on what's working. First 5 does a pretty good job on its annual report, but it's it s hard to read it cover to cover when received. More regular reports in a social media framework on what's working and invite taking action. Be strategic and selective."*

> *"Valuable if they played a role in helping the state devise mandates that everyone should follow."*

> *"In our domain, they could provide training through the Alameda Health Consortium. Train the trainers, come to the sites to train staff, support continuing ed and build some incentives for real changes in the use what is being taught."*

> *"Some of the in-service trainings they did have been really great and should be continued. A model for preschools for engaging parents in supporting child development, geared for teachers, got my staff really excited and motivated. Not all preschool teachers find working with parents a natural skill."*

> *"Train on teacher intentionality, positive behavior management and parent involvement strategies. Teacher intentionality is the process by which teachers work with children with specific developmental goals in mind tailored to the individual child… to help them grow developmentally."*

> *"Provide diverse training geared to the unique needs of the communities in which the providers serve, to be assured that the providers have the appropriate knowledge, skills, and resources."*

Question 8

If we want to have a real impact, First 5 believes it must take effective interventions to scale. What approaches can F5AC use to influence city and county government, private foundations and the business community to make early childhood a priority and to commit funds to achieve outcomes?

Table 12: How First 5 can take effective interventions to scale

Suggestions for taking interventions to scale by influencing government, foundations, and the business community.	**Number of the 22 key informants who made this response**
Show and have more contacts with stakeholders/agencies/potential funders/elected officials/politicians on a variety of levels what our system of care has done and clearly articulate common goals/why it is a benefit to the community for others to invest in meeting the needs of young children 7	7
Partnering with other agencies, community organizations, foundations to deliver the message, with three specifically mentioning continued participation in the ICPC	6
Orchestrating public awareness campaigns about the importance of early childhood years/early childhood intervention using research, using multiple media	6
Determine common outcomes/data driven initiatives in collaboration with others	5
Present a clear strategic plan that shows where First 5 is investing, and how other funders and systems partners can leverage First 5 funding, and vice versa.	3
Be clear on priorities/common goals/not try to do everything. 3	3
Have a skilled representative/cultivate community leaders/providers/families to attend pubic meetings and better advocate by telling their stories	3
Need more targeted data analysis, for example, of the E. Oakland Community, so we can better understand the scope of issues by neighborhood .	2
Build a stronger stakeholder community with other agencies, including CHO and the school districts, community based organizations and medical providers	2
Link these messages to the Common Core Standards	
Instead of advocacy, craft a service for which there is already a revenue source; donôt talk about new services, talk about improved services. Ask the government to pay for a better designed service.	
Need an explicit theory of change model that incorporates strengthening families, life course, early child development and behavioral health to encourage getting people out of silos and have a language to show we are all working together. Includes getting more congruence between the sectors on outcomes.	1

An example of how the value of common outcomes was recognized:

> *"We have tons of CBOs that get funding in the county, and right now they [report] different outcomes. We could eliminate duplicate effort with common outcomes and have a common RFP like San Francisco does."*

Key informants gave many ideas regarding how to maximize the effectiveness of contacts with stakeholders:

> *"A city council member said to us 'make the case for spending money in this service to have a positive impact in the community.' We need to make the case of how spending the money in early childhood prevention activities allows us to spend less money in police for child neglect and abuse investigations. Some cities' mayors are promoting efforts to get reading to grade level, to attract employers with an educated population. Need to think about the way to frame and make more explicit these kinds of messages. Any public entity has lots of competing programs, and need to frame it to appeal to the purpose and goals. There are some existing resources in the "National League of Cities" that are good examples; we don't have to invent them. Helping people look for opportunities in health care reform and Ca's budget realignment efforts."*

> *Engage a broad spectrum of leaders to serve as ambassadors to talk to other policy makers and community leaders about the importance of the mission. For example, when law enforcement comes to the table, the cross-sectional leadership will have a stronger impact in engaging other agencies or leadership to commit funds. Funders want to see effective collaboration in providing comprehensive care.*

Another perspective was to engage local leaders through reports on local communities:

> *"They could produce community-specific reports, research and analysis narrowing down to a city or community level…would be helpful for local government support."*

Regarding the need for a public awareness campaign, one key informant took looked at cultural change from a historical perspective:

> *"We need a culture change, similar to how we changed our response to drunk driving, littering, seat belts, and domestic violence. If you talked about these things 20 years ago, you will see the extent of change. Need to shift the culture to better understand and put to the forefront the importance of support to children during those early critical years. Reference, for example, brain development research."*

Another key informant expressed a similar message:

> *"The most powerful form of advocacy is education around the importance of EC, using science-based, research-based info out there. For example, The Harvard Center for the Developing Child, and brain research that shows the importance of the early years."*

Question 9

Is there anything else you would like to share with us regarding the future directions you'd like to recommend to the First 5 Alameda County?

Key informants made a number of other suggestions, which are shown below

Table 13. Other key informant suggestions by key informants

Table 13: Other suggestions for F5AC	Number of the 22 key informants who made this response
Support for First 5 to take on a systems-oriented leadership role: Work not to duplicate the efforts of others; We are happy to participate in dialogue and would like to have more of a partnership with First 5 to reduce fragmentation of services/clarify what needs to get done at different levels	4
Don't give up on being innovators in service delivery; First 5 is the only funding stream of dollars to do new things with/continue with the community grants initiative that allows creative programs to meet the needs of specific communities/First 5 does things faster than others.	3
Expression of appreciation for First 5	3
Don't eliminate efforts with positive outcomes; if necessary, reduce funding instead	2
Do we get to see the report?	2

Other suggestions and comments, each offered by single key respondents:

- Seek sustainable funding sources
- Continue to support EC teachers and program in the community
- Working on a systems focus may overlook the very poor (below 200% of the poverty level) who are not engaged in any system of care
- Serve as a training or capacity building entity, strongly recommending a model of diffusion/be the knowledge base
- Understanding of the difficulty of moving from a broad portfolio to more specific targeted efforts
- Those were good questions

A comment from a key informant about the need to take on a systems-oriented leadership role:

> *"Working with representatives from pubic education is important, and could prevent duplication of services, e.g., if parents enrolled their kids in preschool, we would not need 'summer camp.'"*

CONCLUSION

This project to interview key informants and report their comments was conducted on a compressed schedule, commencing on May 16, 2012 with protocol development and concluding on June 21 with a presentation to the First 5 Alameda Strategic Task Force. A total of 22 interviews with key informants were conducted. This report summarizes their extensive comments.

The vast majority of the key informants expressed enthusiasm for First 5ôs planned strategy to strengthen its focus on the development of larger systems of care of care during its fiscal years 2013-2017, and provided a wealth of input on how First 5 can best implement this strategy.

ATTACHMENT A

KEY INFORMANT INTERVIEW

In the face of declining revenues from tobacco tax, F5AC is reexamining its priorities. To best use its resources and enhance the sustainability of First 5 services in the community, the Commission is strengthening its focus on systems development and capacity building. While direct services will continue to be supported through community partners, funding will be aligned with larger systems of care initiatives F5AC has identified as priority areas.

F5AC will continue to focus its work in the following outcome areas: **(SHOW CARD A).**

E. **Early identification of children with developmental and behavioral issues and linking families** to early **support**s for development and social emotional, behavioral health.

F. **Parent / primary caregiver mental health**: Enhanced primary caregiver mental health, increased access for and utilization by primary caregivers of mental health services.

G. **Parenting support**: improved parent child attachment, reduced parenting stress, increased access to concrete basic needs economic support, enhanced parent knowledge of child development, increased optimal breastfeeding/nutrition and prenatal and postpartum health.

H. **Kindergarten readiness**: Improved readiness in basic building blocks, smoothed transition to K, enhanced access to quality preschool and other early learning experiences, improved child care quality.

1. With which of these F5AC outcomes is your agency most aligned? [ENTER LETTER] _____
IF THERE IS NOT ONE AREA IN WHICH THE AGENCY IS MOST ALIGNED, ASK THE RESPONDENT WHICH OF THESE AREAS IS OF THE MOST INTEREST TO HIM OR HER.

   a) As I mentioned earlier, F5AC plans to increasingly align its funding to support larger initiatives that provide systems of care. What role should F5AC play in moving toward an early childhood system of care in [THE OUTCOME AREA]?

   b) What are existing barriers?

   c) Would your agency participate in developing common outcomes and data collection efforts to measure success countywide?

      IF YES: d) What would you or your agency need from F5AC or others to participate in this process?

2. F5AC is working with several systems-focused initiatives in partnership with others: **(SHOW CARD B)**

- Home Visiting/Family Support
- Help Me Grow/Early Connections (Early Identification, referral and treatment of developmental and social emotional issues)
- Race to the Top Early Learning Challenge Grant - Quality Improvement Rating System (Quality Early Care and Education)
- School Readiness/School Transition
- Hayward Promise Neighborhood
- East Oakland Building Healthy Communities

In what other systems-focused initiatives do you believe First 5 Alameda County should be involved?

3. What other key partners should F5AC be working with that are not currently involved in any systems initiatives as far as you know? PROBE IF NECESSARY: These might be, for example, community-based organizations, public agencies, or foundations.

4. There are a variety of roles First 5 Alameda County could play in promoting a systems-focused initiative in the county. Such roles might include providing leadership, writing grant applications, providing advocacy, developing data specifications and providing support for common outcome measurement, and so forth.

   What do you believe would be the two most effective roles for First 5 Alameda County to assume in promoting a systems-focused initiative for children 0-5 in the county?

5. a) What other comments do you have on the role F5AC should play to promote an early childhood system of care in Alameda County?

   b) What role might your agency play in this?

6. Even while moving more into systems change efforts, what role should F5AC play in ensuring that families are able to care for and promote their children's optimal development?

7. What role should F5AC play in assuring that all providers working with children 0-5 have the knowledge, skills, and resources to provide quality services?

8. First 5AC believes that to have real impact, it must take effective interventions to scale. What approaches can F5 use to influence city and county government, private foundations and the business community to make early childhood a priority and to commit funds to achieve outcomes?

9. Is there anything else you would like to share with us regarding the future directions you'd like to recommend to the First 5 Alameda County?

ATTACHMENT B

1. Advance letter version e-mailed to the six potential key informants who had indicated on the prior Community Survey their willingness to participate in an in-depth interview.

Dear _____,

I am writing to request an interview with you at your office to obtain your views to help First 5 Alameda County (F5AC) determine its future directions in the fiscal years 2013-2017. Iôd like to introduce myself and let you know to expect a call from me to request a date and time to conduct the interview.

In the face of declining tobacco tax revenue, F5AC is reexamining its priorities. To best use its resources for sustained impact, the Commission is planning to reduce the funding of direct services and increase its support for the development of more integrated systems of care for the Countyôs children and families.

Among the 560 community members who recently completed an on-line survey, the majority of the feedback we received validated our planned future strategic focus that F5AC should play significant roles in developing and supporting a variety of systems efforts including:

- strengthening networking and other linkages between providers and organizations;
- community and provider training and other capacity building; and
- policy, advocacy and communication, including data collection and evaluation.

We are requesting an interview with you as a leader in the community to obtain your views of how First 5 Alameda County can best use these and other kinds of systems efforts to help children reach their developmental potential. We hope you can participate in the interview. Your answers will be confidential, that is, when I report the findings from the interviews to F5AC, your name will not be associated with your responses but you will be acknowledged as one of the stakeholders we interviewed.

I am an independent consultant with substantial experience conducting research projects concerning early childhood issues. I will call you within the next few days to ask for an appointment at a date and time convenient for you between Wednesday, May 30th and Tuesday June 12th. The interview will take about 40 minutes. I look forward to speaking with you.

Sincerely,

Wendy Constantine

2. Advance letter version e-mailed to the remaining twenty-one potential key informants.

Dear _____,

I am writing to request an interview with you at your office to obtain your views to help First 5 Alameda County (F5AC) determine its future directions in the fiscal years 2013-2017. Iôd like to introduce myself and let you know to expect a call from me to request a date and time to conduct the interview.

In the face of declining tobacco tax revenue, F5AC is reexamining its priorities. To best use its resources for sustained impact, the Commission is planning to reduce the funding of direct services and increase its support for the development of more integrated systems of care for the Countyôs children and families.

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Sincerely,

Wendy Constantine

ATTACHMENT C

Sector	# in original list (N=27)	# inter-viewed (N=22)	# not inter-viewed (N=5)
Education/school districts 1. Barb DeBarger, San Lorenzo Unified School District 2. Suzanne Nelson, N. Region SELPA 3. Kent Rezowalli, Tri-Valley SELPA 4. Lisa Kleinbub, Regional Center of the East Bay	4	3	1
ECE 5. Vincent Cheng, R & Rs 6. Valerie Helgren-Lempesis, FIX 7. Angie Garling, Alameda County Child Care Planning Council 8. Edna Rodriggs, Chabot College	4	3	1
Clinics/Health Care 9. Deborah Workman (for Nance Rosencranz), LifeLong Administrative Offices 10. Hali Sherman, MD, La Clinica de La Raza 11. Ralph Silber, Alameda Health Care Consortium 12. Luella Penserga, Alameda Health Care Consortium 13. Ingrid Lamirault, Alameda Alliance	5	3	2
Community 14. Angela Louise Howard 15. Barbara McCullough, Brighter Beginnings 16. Sandy Taylor, Oakland Fund for Children & Youth 17. Iris Preece, City of Fremont	4	4	-
Public Agency Program Leadership 18. Andrea Youngdahl, Interagency Childrenôs Policy Council 19. Michelle Love, Alameda Couny Social Services 20. Wilma Chan, Board Of Supervisors 21. Nate Miley, Board Of Supervisors 22. Nancy OôMalley, County District Attorney 23. Rhonda Burgess, Presiding Judge Of Juvenile Law 24. Roger Chan, East Bay Childrenôs Law Offices	7	6	1
Neighborhood Services 25. Olis Simms, Youth Uprising 26. Scott Means, City of Oakland Office of Parks and Recreation 27. Scott Ferris, Berkeley Parks and Recreation	3	3	-
Total	27	22	5

First 5 Alameda County 2013-17 Strategic Plan

Proposed Framework

August 24, 2012

Results and Outcomes

What we hope to achieve

Strategies & Initiatives

What we plan to do

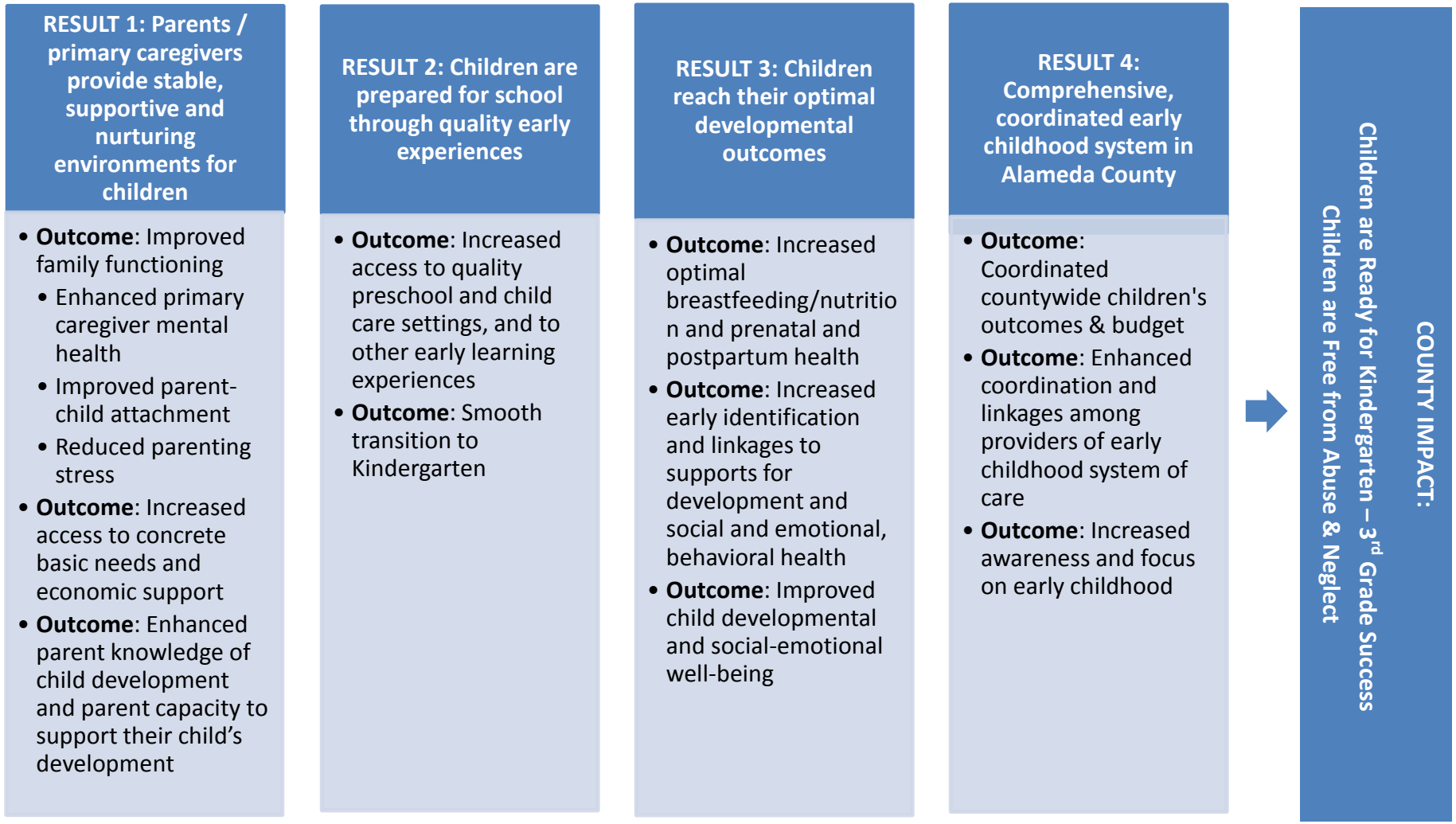
First 5 Role

Ways that we work

Funding

How we allocate our resources

Logic Model: What We Hope To Achieve



Logic Model: What We Plan to Do

COUNTY IMPACT: Children are Ready for Kindergarten – 3rd Grade Success
Children are Free from Abuse & Neglect

RESULT 2: CHILDREN ARE PREPARED FOR SCHOOL THROUGH QUALITY EARLY EXPERIENCES

OUTCOME: Increased access to quality ECE and other early learning experiences

OUTCOME: Smoothed transition to kindergarten

ACTIVITIES:

Broaden consumer education about quality ECE

Develop county ECE quality rating and improvement system

Train providers in early childhood mental health, CSEFEL, CLASS developmental screening, and other topics

ECE site-based coaching and consultation on implementing quality improvements, managing challenging behaviors, business planning / health & safety

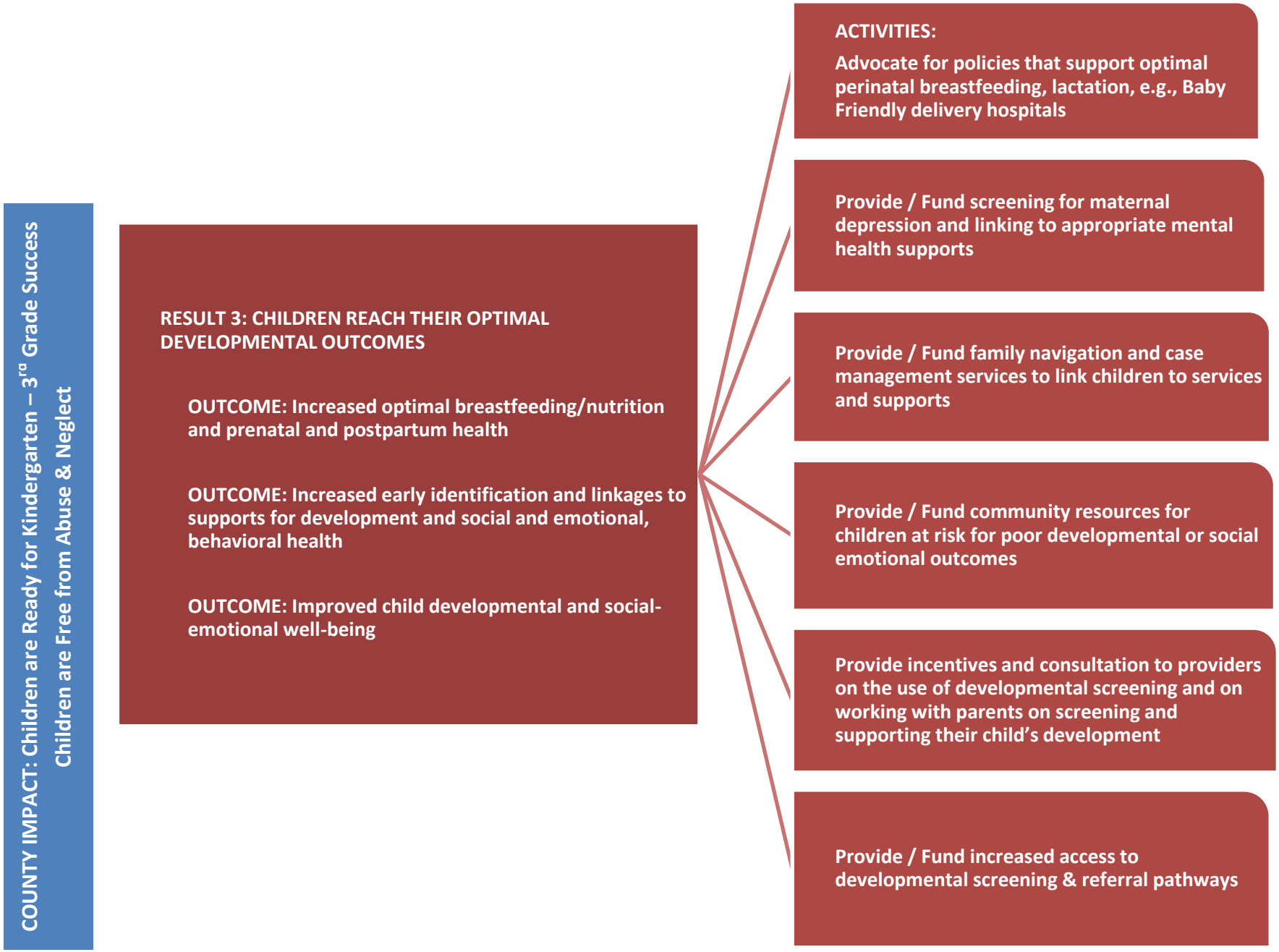
Provide / Fund community based training that supports early learning

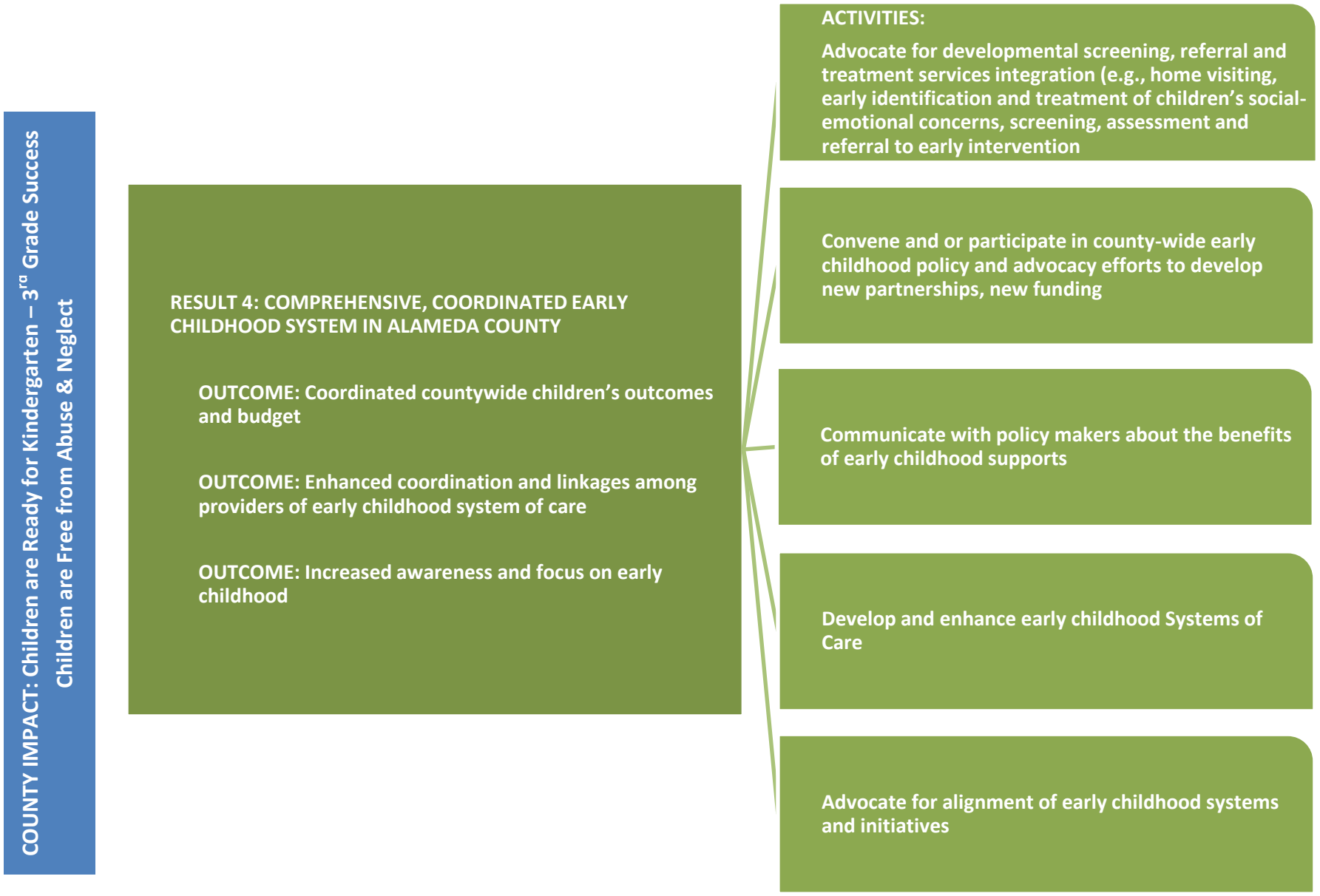
Consult on / advocate for aligning higher education and professional development with ECE quality competencies

Fund Summer Pre-K programs for children without formal preschool experiences

Provide technical assistance to school districts on sustaining transition to K programs

Fund opportunities for parent child activities


COUNTY IMPACT: Children are Ready for Kindergarten – 3rd Grade Success
Children are Free from Abuse & Neglect
RESULT 3: CHILDREN REACH THEIR OPTIMAL DEVELOPMENTAL OUTCOMES
OUTCOME: Increased optimal breastfeeding/nutrition and prenatal and postpartum health
OUTCOME: Increased early identification and linkages to supports for development and social and emotional, behavioral health
OUTCOME: Improved child developmental and social-emotional well-being
ACTIVITIES:
Advocate for policies that support optimal perinatal breastfeeding, lactation, e.g., Baby Friendly delivery hospitals
Provide / Fund screening for maternal depression and linking to appropriate mental health supports
Provide / Fund family navigation and case management services to link children to services and supports
Provide / Fund community resources for children at risk for poor developmental or social emotional outcomes
Provide incentives and consultation to providers on the use of developmental screening and on working with parents on screening and supporting their child's development
Provide / Fund increased access to developmental screening & referral pathways


COUNTY IMPACT: Children are Ready for Kindergarten – 3rd Grade Success
Children are Free from Abuse & Neglect
RESULT 4: COMPREHENSIVE, COORDINATED EARLY CHILDHOOD SYSTEM IN ALAMEDA COUNTY
OUTCOME: Coordinated countywide children's outcomes and budget
OUTCOME: Enhanced coordination and linkages among providers of early childhood system of care
OUTCOME: Increased awareness and focus on early childhood
ACTIVITIES:
Advocate for developmental screening, referral and treatment services integration (e.g., home visiting, early identification and treatment of children's social-emotional concerns, screening, assessment and referral to early intervention
Convene and or participate in county-wide early childhood policy and advocacy efforts to develop new partnerships, new funding
Communicate with policy makers about the benefits of early childhood supports
Develop and enhance early childhood Systems of Care
Advocate for alignment of early childhood systems and initiatives

First 5 Role: Ways that We Work

STRATEGIES & INITIATIVES	CATALYST	COLLABORATOR	FUNDER OF DIRECT SERVICES	TRAINER / CAPACITY BUILDER
County Home Visiting and Family Support		X	X	X
Help Me Grow	X	X	X	X
Early Connections Initiative	X	X		
Quality Early Care and Education ▪ ECE Higher Ed / Professional Development ▪ Quality Rating Improvement System (Race To the Top) Initiative	X	X		X
School Readiness Initiative ▪ Summer Pre-K (Long Foundation) ▪ Transition to K ▪ Ready Schools	X	X	X	X
Place-Based Initiatives: ▪ Project LAUNCH ▪ Hayward Promise Neighborhood ▪ Other Promise Neighborhoods	X	X	X	X
Grant Making (Community Grants)			X	X
Training & Capacity Building		X		X
Infrastructure (Evaluation, Technology, Communications)	X	X		X
Policy & Advocacy	X	X		

Role Definitions

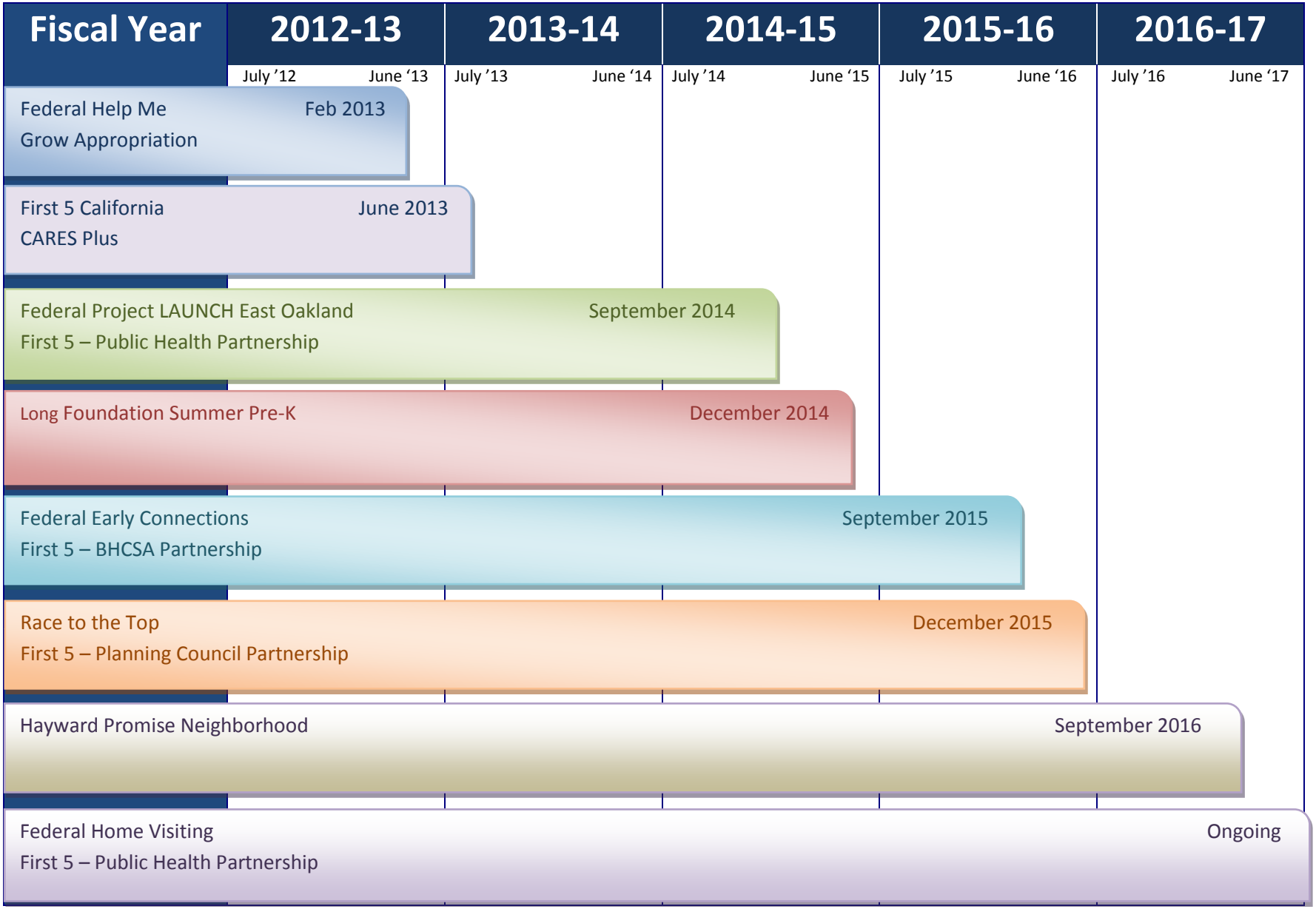
CATALYST: Starting initiatives, convening interested parties, advocating for funding and policy and systems change

COLLABORATOR: Working with public and community partners to advance services and systems change for young children

FUNDER OF DIRECT SERVICES TO CHILDREN: Funding contracts for and grants to partners who directly serve children and families or funding First 5 staff to provide direct services

TRAINER AND CAPACITY BUILDER: Funding for and provision of training, consultation, and technical assistance to increase knowledge, skills, and utilization of effective practices in early childhood work and providing evaluation & technology infrastructure services. Includes providing access to resources and information for communities and organizations to advocate for, develop or implement policies and best practices.

First 5 Alameda County Existing Funding Committments



First 5 Alameda County Strategic Planning Retreat
August 24, 2012

www.first5ecc.org

Retreat Agenda

1. Setting the Stage

2. Proposed Framework

3. Key Elements

4. Decision points

Setting the Stage

Input

1. Community Survey
2. Key Informant Interviews
3. Staff
4. Existing Commitments to External Funders

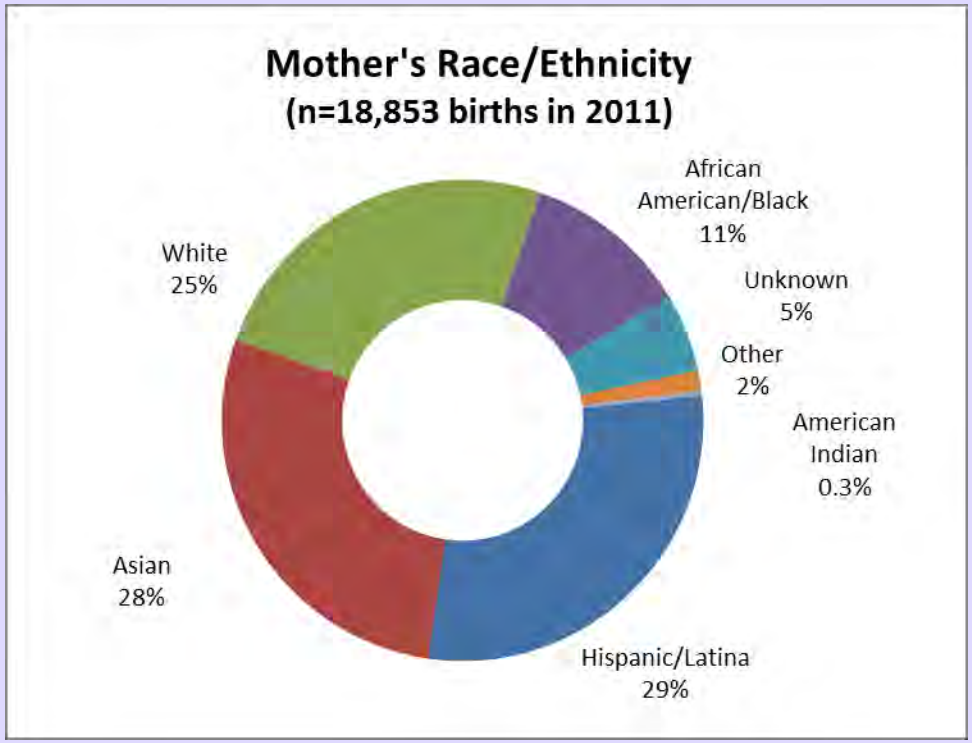
Survey Summary

- Be “Thought Leaders”
- Continue policy/advocacy, capacity building, building linkages, share resources
- Stay focused on children and families; include prevention, prenatal strategies
- Take advantage of flexible dollars
- Collaborate on shared countywide outcomes
- Be sensitive to impact of increasing demand for services; don’t compete

County Setting

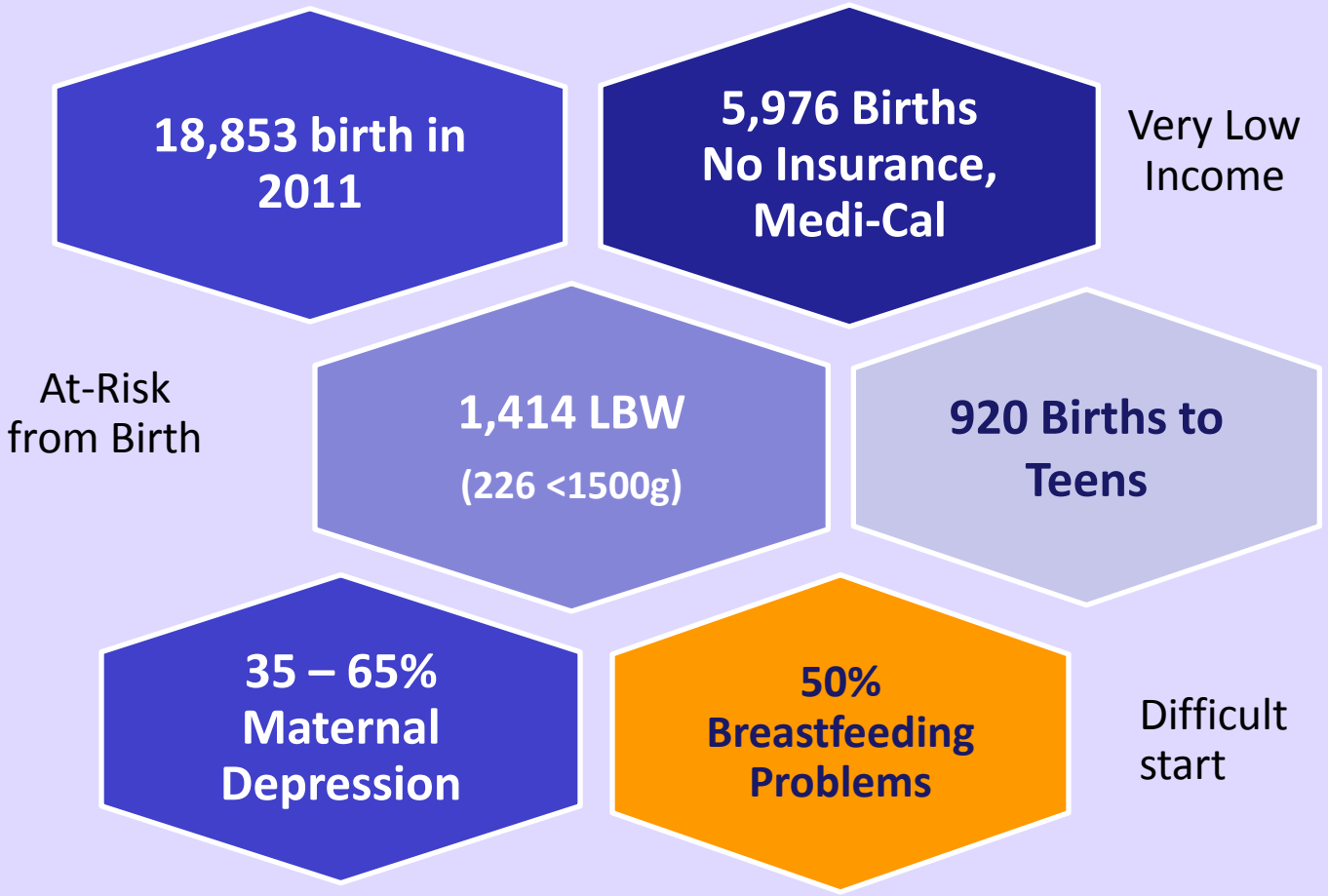
1. County Demographics
2. Current First 5 Alameda County Approach
3. Countywide Work on Early Childhood Outcomes

Diversity



Most popular home language of EL Kindergartners in 2011	% of all 50 Languages other than English
Spanish	59.2%
Cantonese	7.1%
Mandarin	5.7%
Vietnamese	4.5%
Filipino (includes Tagalog)	3.3%

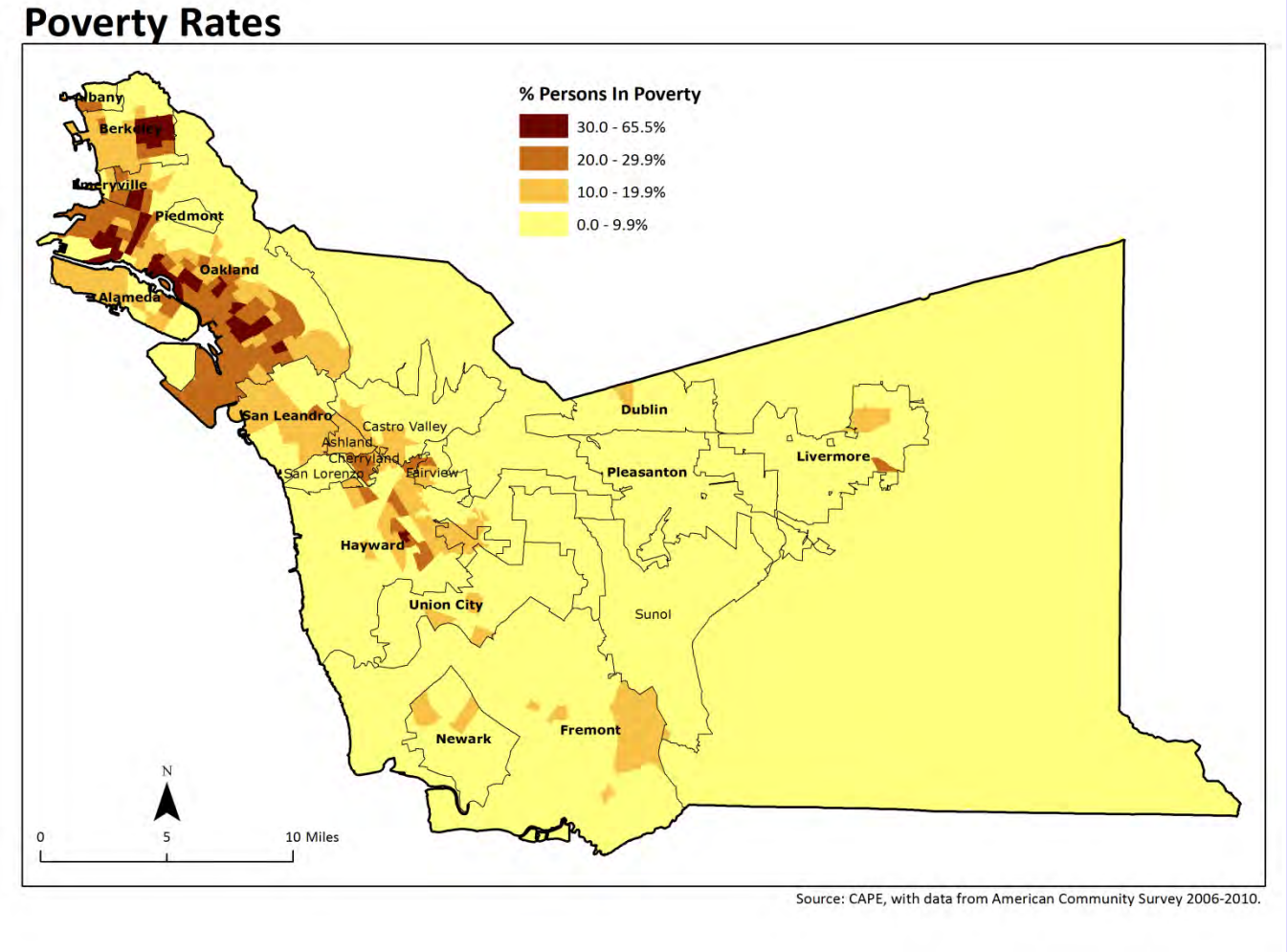
County Setting



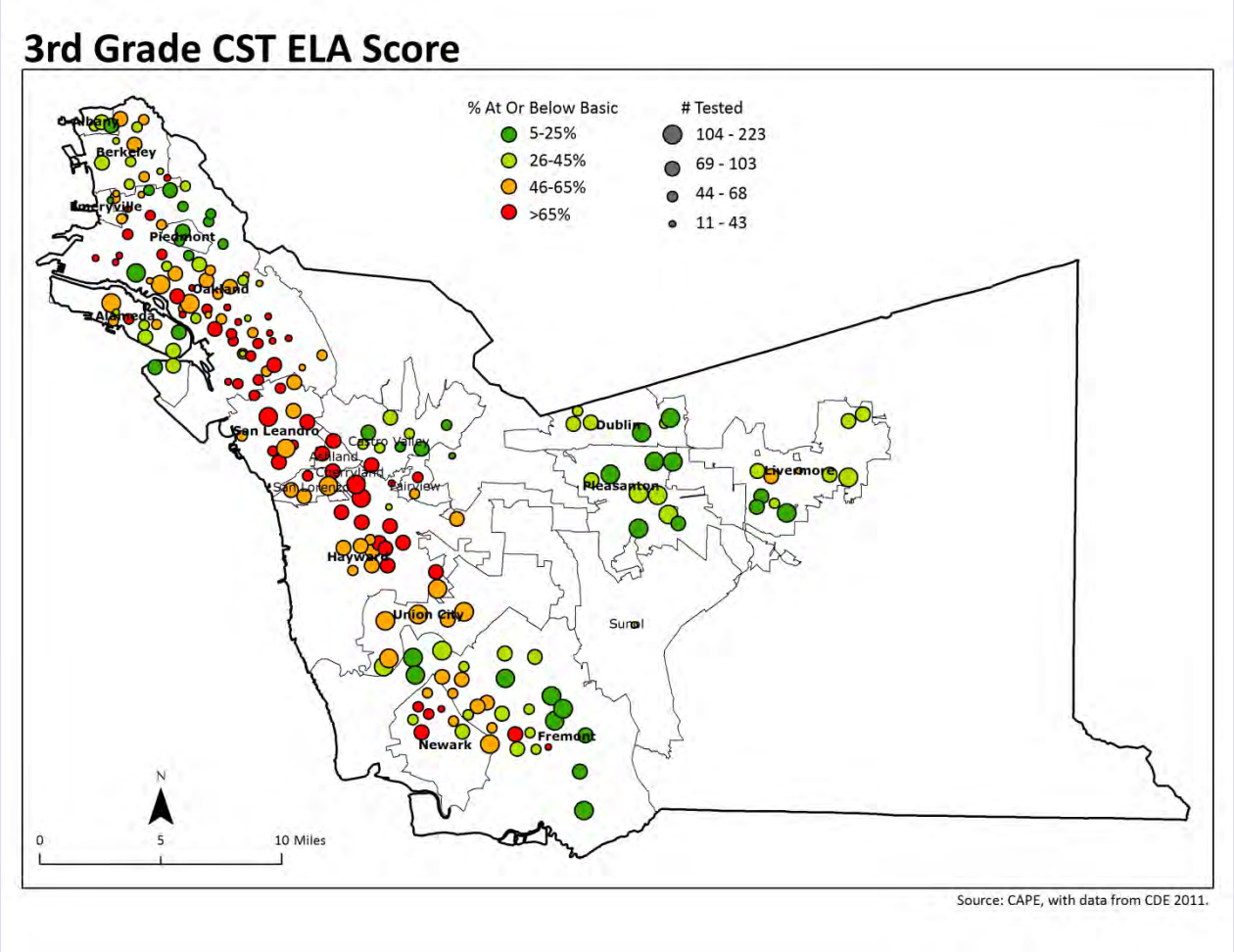
Disproportionate Risk

Population	Disparity
Race/ethnicity	More teen births, poorer birth outcomes, fewer breastfeeding and later prenatal care among Latina and African American mothers, higher entry into foster care among African American children; proportionately fewer Asian children are identified with special needs; more Hispanic children in poverty
Socioeconomic Status	Highest risk among teen parents, homeless adults with minor children living with them, linguistically isolated, Hispanic families
School Performance	Poor performance on CST/ELA and API concentrated in Hayward, San Leandro, San Lorenzo, Emery, Oakland and New Haven Unified School Districts
Preschool	Students with formal preschool experiences, including SPK, transition much more smoothly into K than those without any
Child Development	Children with special needs have poorest school readiness profiles. 2,709 3 to 5 year olds and 4,533 6 to 8 year olds enrolled in special ed.

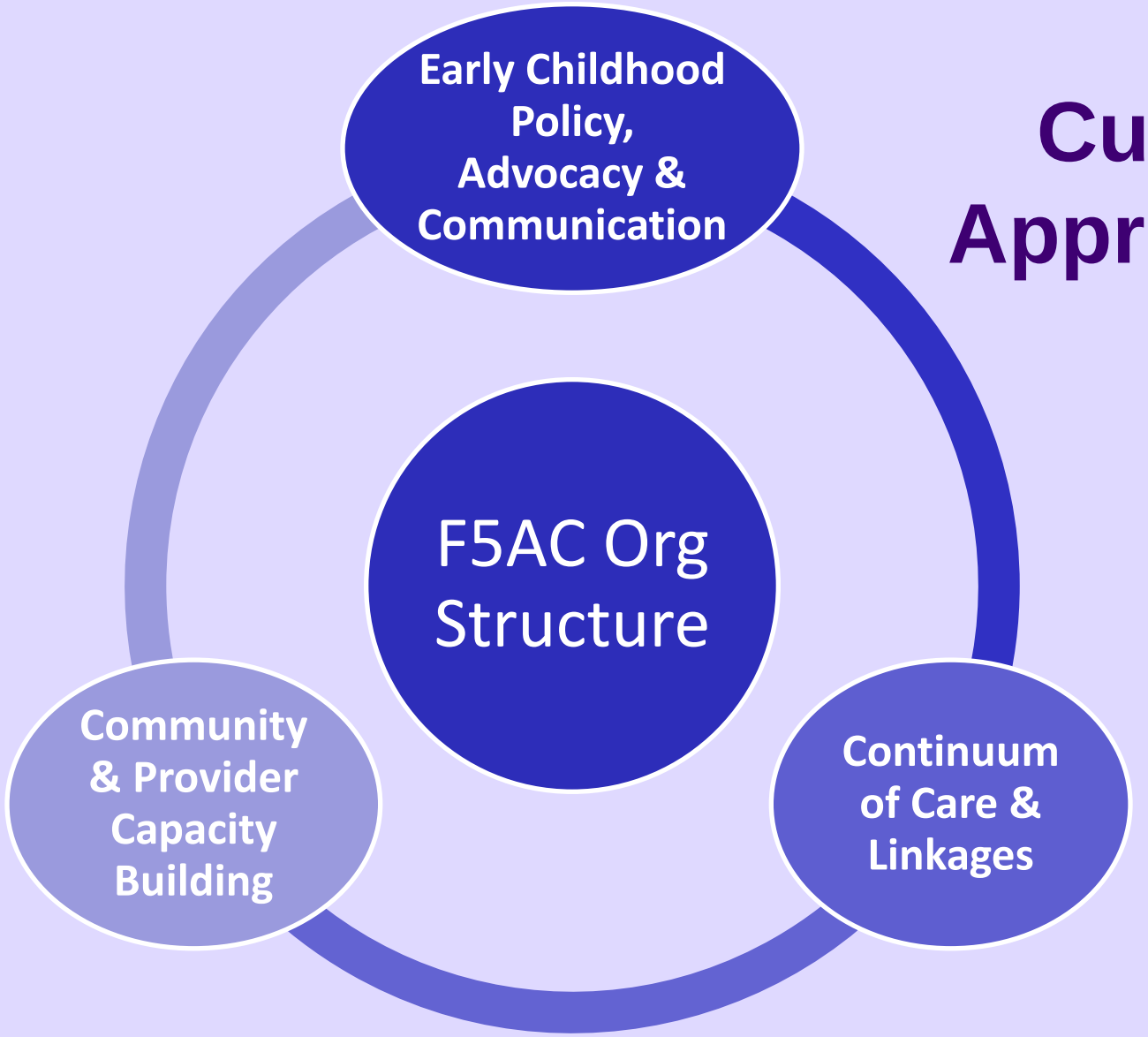
Targeting Risks



Targeting Risks



Current Approach



Early Childhood Efforts in Alameda County

(examples, not inclusive)

- AC Interagency Children's Policy Council (ICPC)
- AC 0-8 County Convergence Group
- AC Public Health Building Blocks
- AC Public Health Best Baby Zone
- Federal Promise Neighborhoods
  - Hayward (funded)
  - Oakland (4 proposals submitted)

Early Childhood Efforts in Alameda County

(examples, cont'd)

- East Oakland Building Healthy Communities –Cal Endowment
- Oakland Unified School District Full Service Schools
- Oakland Reads 2020-Rodgers Family Foundation
- AC Early Childhood Policy Committee (ACECPC)
- AC Special Needs Policy Committee

Proposed Framework

Strategic Plan Framework

Results & Outcomes: *What we hope to achieve, overall impact in county*

Strategies & Initiatives: *What we plan to do*

First 5 Role:
Ways that we work
Catalyst
Collaborator
Funder of Direct Services
Trainer & Capacity Builder

Funding: *How we allocate our resources*

Comments

Results and Outcomes

RESULT 1: PARENTS/PRIMARY CAREGIVERS PROVIDE STABLE, SUPPORTIVE AND NURTURING ENVIRONMENTS FOR CHILDREN

RESULT 2: CHILDREN ARE PREPARED FOR SCHOOL THROUGH QUALITY EARLY EXPERIENCES

IMPACT: Children are ready for kindergarten – 3rd grade
Children are free from abuse & negelct

RESULT 3: CHILDREN REACH THEIR OPTIMAL DEVELOPMENTAL OUTCOMES

RESULT 4: COMPREHENSIVE, COORDINATED EARLY CHILDHOOD SYSTEM IN ALAMEDA COUNTY

Strengthening Families Protective Factors

- Parental Resilience
- Social Connections
- Concrete Support in Times of Need
- Knowledge of Parenting and Child Development
- Social and Emotional Competence of Children

Results & Outcomes

RESULT 1: PARENTS/PRIMARY CAREGIVERS PROVIDE STABLE, SUPPORTIVE AND NURTURING ENVIRONMENTS FOR CHILDREN

OUTCOME: Improved family functioning: enhanced primary caregiver mental health, improved parent child attachment, reduced parenting stress (decreased social isolation / improved social supports)

OUTCOME: Increased access to concrete basic needs and economic support

OUTCOME: Enhanced parent knowledge of child development and parent capacity to support their child's development

Results & Outcomes

RESULT 2:
CHILDREN ARE PREPARED FOR SCHOOL THROUGH QUALITY EARLY EXPERIENCES

OUTCOME: Increased access to quality ECE and other early learning experiences

OUTCOME: Smoothed transition to kindergarten

Results & Outcomes

RESULT 3:
CHILDREN REACH THEIR OPTIMAL DEVELOPMENTAL OUTCOMES

OUTCOME: Increased optimal breastfeeding/nutrition and prenatal and postpartum health

OUTCOME: Improved child developmental and social-emotional well-being

OUTCOME: Increased early identification and linkages to supports for development and social and emotional, behavioral health

Results & Outcomes

RESULT 4: COMPREHENSIVE, COORDINATED EARLY CHILDHOOD SYSTEM IN ALAMEDA COUNTY

OUTCOME: Coordinated countywide children's outcomes and budget

OUTCOME: Increased awareness and focus on early childhood

OUTCOME: Enhanced coordination and linkages among providers of early childhood system of care

Comments

Results & Outcomes

Are these the results and outcomes we want to achieve?

Strategies / Initiatives
&
First 5 Role

Catalyst Collaborator Funder of Direct Services Trainer & Capacity Builder

Strategy / Initiative	Role
County Home Visiting and Family Support	Collaborator, Funder of Direct Services, Trainer & Capacity Builder
Help Me Grow	Catalyst, Collaborator, Funder of Direct Services, Trainer & Capacity Builder
Early Connections Initiative	Catalyst, Collaborator
Quality Early Care and Education	Catalyst, Collaborator, Trainer & Capacity Builder
School Readiness Initiative	Catalyst, Collaborator, Funder of Direct Services, Trainer & Capacity Builder

Catalyst Collaborator Funder of Direct Services Trainer & Capacity Builder

Strategy / Initiative	Role
Place-Based Initiatives	
Grant Making (community grants)	
Training & Capacity Building	
Infrastructure (evaluation, technology, communications)	
Policy & Advocacy	

Strategies & Initiatives

Are these the right strategies and initiatives to help us get to the desired results and outcomes?

Federal Appropriations
Help Me Grow Feb 2013

First 5 California
CARES Plus June 2013

Federal Project LAUNCH East Oakland
First 5 – Public Health Partnership September 2014

Long Foundation Summer Pre-K December 2014

Federal Early Connections September 2015
First 5 – BHCSA Partnership

Race to the Top
First 5 – Planning Council Partnership December 2015

Hayward Promise Neighborhood September 2016

Federal Home Visiting Ongoing
First 5 – Public Health Partnership

1. Should we continue participating in these initiatives?
2. Should we continue to use Prop 10 funds to sustain the work?
3. Where an initiative is focused on a specific geographic area, does it make sense that we continue to make our investments in targeted communities?

4. Are there initiatives that have a higher priority than others?
5. Are the proposed roles appropriate?
6. Do you see some roles that are more important or should take higher priority than others?

Comments

Funding

How should the budget reflect our priorities?

- By Results and Outcomes
- By Strategies / Initiatives
- By Role
- Other?

Comments

Next Steps

Commission Meeting	Date
Review of Draft Strategic Plan	September 27, 2012
Approval of Final Strategic Plan	December 13, 2012

Send questions and comments to

mark@first5ecc.org

Supporting documents available at www.first5ecc.org

www.first5ecc.org