FY2013-14 Partnerships for Change: Funded Partner Reporting Summary

Submitted: September 2014

Prepared for:
Amy Reisch, Executive Director
First 5 Marin
Children and Families Commission
1101 5th Ave., Ste. 215
San Rafael, CA 94901

Contact:
Jara Dean-Coffey, Principal
jara@jdcPartnerships.com

jdcPartnerships integrating information for impact
# Table of Contents

Report Structure ............................................................................................................. 3

EXECUTIVE SUMMARY ............................................................................................... 4

BACKGROUND & OVERVIEW ....................................................................................... 5
  Priority Results .............................................................................................................. 5
  Priority Outcomes ........................................................................................................ 5
  Strategies .................................................................................................................... 5
  Data Sources ................................................................................................................ 6

SYSTEM-WIDE DATA ................................................................................................... 7
  Aggregate View ............................................................................................................ 7
  Client Demographics .................................................................................................. 7
  Service Geographic Description .................................................................................... 9
  Service Delivery Description ....................................................................................... 10
  Fiscal Analysis ............................................................................................................. 11

FUNDED PARTNER REPORTING HIGHLIGHTS .............................................................. 13
  Partnerships for Change ............................................................................................... 13
  RESULT AREA 1. Marin Promotes and Protects the Health and Well-Being of All Children ......................................................................................................................... 14
  Children's Health Initiative (CHI) ................................................................................ 14
  Early Childhood Mental Health Consultation (ECMH) .................................................. 15
  RESULT AREA 2. Marin Children Are Ready for School and Schools Are Ready for All Children ......................................................................................................................... 16
  Aprendiendo Juntos ..................................................................................................... 16
  FLAGship ..................................................................................................................... 17
  Pickleweed Preschool .................................................................................................... 18
  Novato School Readiness (NSR) .................................................................................. 19
  San geronimo Valley School Readiness ....................................................................... 20
  Summer Bridge ............................................................................................................ 21
  RESULT AREA 3. Marin Values And Invests in All Children ...................................... 22
  MarinKids ..................................................................................................................... 22
  Healthy Kids From Day 1 ............................................................................................ 24
  Small grants .................................................................................................................. 25

APPENDIX .................................................................................................................... 29
  Priority Results ............................................................................................................ 29
  Priority Outcomes ....................................................................................................... 29
REPORT STRUCTURE

This report summarizes information from partners that are primarily associated with:

Strategy 2. Partnerships for Change, and
- Result Area 1. Marin Protects and Promotes the Health and Well-Being of All Children
- Result Area 2. Marin Children are Ready for School and Schools Are Ready for All Children
- Result Area 3. Marin Values and Invests in All Children

Section 1 – Executive Summary
This section has selected highlights from the full report.

Section 2 – Background & Overview
Section 2 outlines Core elements of First 5 Marin Children and Families Commission’s strategic plan and provides an orientation to the report structure and data sources.

Section 3 - System-wide Data
Client demographic and service delivery information is aggregated across funded projects in Section 3. Additionally, geographic distribution of funding and client types is provided.

Section 4 – Funded Partner Reporting Highlights
First 5 Marin’s priority results guide Funded Partners about how best to affect the lives of children ages 0-5 and their families. Section 4 has a summary of highlights, both quantitative and qualitative, from reporting partners with a focus on the performance measures identified in evaluation plans. Quotes or stories, as well as the identified challenges, are also included.
Executive Summary

This report presents a summary of First 5 Marin’s funded partner reporting for FY2013-14. This information is used to inform programmatic and policy actions, evaluation refinements, the Commission’s ongoing reflection, and Strategic Plan implementation. Following are select highlights from the full report.

**COMMISSION RESULT AREA 1**

**Marin Protects and Promotes the Health and Well-Being of all Children**

- 2800 families were successfully transitioned from Healthy Families to Medi-Cal as part of ACA implementation.
- 100% of children receiving mental health services were retained in child care settings.

**COMMISSION RESULT AREA 2**

**Marin Children are Ready for School and Schools Are ready for All Children**

- Summer Bridge, a 5-week transition program for incoming Kindergarten students with little or no preschool experience, in which participants have consistently demonstrated statistically significant gains in skills associated with readiness for school, continued to operate in five communities.

**COMMISSION RESULT AREA 3**

**Marin Values and invests in all Children**

- While not placed on the 2014 ballot, progress toward a children’s fund for Marin to fund universal access to preschool, health insurance for uninsured children, and other key levers of change in Marin moved forward with support from community members and key influencers. A 2016 ballot measure is anticipated.

**SYSTEM-WIDE DATA**

- *Almost 5,000 clients were reached* through First 5 Marin’s initiatives, programs, and efforts. Of those, 34% were parent/caregivers and 66% were children 0-5 years old.

- *Approximately 71% of clients served* are Latino, 12% White, 3% African American, and 2% Asian.

- *Clients are located throughout Marin with the following distribution*: 34% from the Canal neighborhood, 30% from Central Marin, 20% from North Marin, 9% in South Marin, and 5% in West Marin and 2% from other areas.
Background & Overview

Since its initial strategic plan in 2004, First 5 Marin has articulated a commitment to the health and well-being of children ages 0-5 and their families in Marin County. As a consequence, its priorities and strategies reflect a combination of focus on the most marginalized in Marin County, as well as improving the overall quality and accessibility of information and services for providers, parents, families, and others involved in the systems of care which support children ages 0-5. A set of priority results and priority outcomes serve as the frameworks for implementation, accountability, and evaluation. Additional information about the frameworks that describe First 5 Marin’s purpose and implementation are provided in the Appendix beginning on page 24.

PRIORITY RESULTS

1. Marin Protects and Promotes the Health and Well-Being of All Children
2. Marin Children are Ready for School and Schools Are Ready for All Children
3. Marin Values and Invests in All Children

PRIORITY OUTCOMES

1. Children have Optimal Health and Well-Being
2. Children are Ready for School
3. Public Policies Support Children

STRATEGIES

To achieve these outcomes, First 5 Marin’s current Strategic Plan identifies four core strategies.

1. Public Education
2. Partnerships for Change
3. Grassroots Capacity Building
4. Public Policy/Advocacy
DATA SOURCES

Quantitative and qualitative data sources were reviewed in compiling this report. Following is a summary of the purpose and the information provided by each data source:

- **Quarterly Reporting Forms** — The data from this form, which includes client demographic and service unit data, is submitted quarterly by funded projects. It is used to compile a segment of First 5 Marin’s annual report submission to First 5 California Children and Families Commission. All projects submit data quarterly as part of contract compliance. This data is entered quarterly into Persimmony, a web-based data system.

- **Project Performance Measures** — Most projects have performance measures (process and outcome) incorporated into their contracts for which they are held accountable. These measures link a project’s efforts to the broader Commission goals and priority outcomes. They are also entered into the Persimmony system. First 5 Marin staff review data entered into Persimmony on a regular basis and discuss it with funded partners.

- **Year-End Evaluation Reports** — This report includes narrative questions focused on project progress towards objectives and performance measures — as well as highlights and challenges. The annual report also includes a story guided by a series of questions aligning strategies, outcomes, and changes to the system.
System-Wide Data

**AGGREGATE VIEW**

The data presented in this section includes an overview of client demographics, service delivery, and financial distributions.

### MARIN COUNTY DEMOGRAPHICS 2013

<table>
<thead>
<tr>
<th>Population: 258,365</th>
<th>Approx Population Under 5 years: 12,918</th>
</tr>
</thead>
<tbody>
<tr>
<td>White, non-Hispanic: 73%</td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latino: 16%</td>
<td></td>
</tr>
<tr>
<td>Asian: 6%</td>
<td></td>
</tr>
<tr>
<td>Black: 3%</td>
<td></td>
</tr>
<tr>
<td>Alaska Native/Native American: 1%</td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander: &lt;1%</td>
<td></td>
</tr>
<tr>
<td>Multi-Racial: 4%</td>
<td></td>
</tr>
</tbody>
</table>

### CLIENT DEMOGRAPHICS

*Funded partners served a total of 4499 clients in FY 2013-14.*

Just over one-third of clients were parents/caregivers, including pre-natal parents (39%). Among the remaining 61% of clients who were children ages 0-5, approximately 13% were infants, 20% were ages 3-5 years, and exact ages were not reported for an additional 26%.

*Figure 1. Total Number of Clients Served by Client Type: FY2013-14*

---

Of those served, the majority (72%) of clients are Hispanic/Latino, followed by White (12%), African American (3%) and Asian (2%). Approximately 12% of participants were of other ethnicities (6%), multiracial (1%), or were individuals for whom this information was not available (5%). Spanish is the reported primary language for approximately three-fourths (71%) of clients.

Table 1. Total Number of Clients Served by Ethnicity: FY 2013-14

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Ethnicity</th>
<th>AFRICAN AMERICAN</th>
<th>ALASKA NATIVE/AMERICAN INDIAN</th>
<th>ASIAN</th>
<th>PACIFIC ISLANDER</th>
<th>HISPANIC</th>
<th>WHITE</th>
<th>MULTI-RACIAL</th>
<th>OTHER</th>
<th>UNKNOWN</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-14</td>
<td></td>
<td>132</td>
<td>0</td>
<td>95</td>
<td>523</td>
<td>2</td>
<td>3,242</td>
<td>41</td>
<td>246</td>
<td>218</td>
<td>4,499</td>
</tr>
</tbody>
</table>

Table 2. Total Number of Clients Served by Language: FY 2013-14

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Language</th>
<th>CANTONESE</th>
<th>ENGLISH</th>
<th>SPANISH</th>
<th>VIETNAMESE</th>
<th>OTHER LANGUAGE</th>
<th>UNKNOWN</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-14</td>
<td></td>
<td>3</td>
<td>774</td>
<td>3,215</td>
<td>1</td>
<td>207</td>
<td>299</td>
<td>4,499</td>
</tr>
</tbody>
</table>
SERVICE GEOGRAPHIC DESCRIPTION

In 2013-14, just over one-third of clients served were from the Canal Neighborhood (34%), followed by Central (30%) and North Marin (20%). For several years, Canal Neighborhood and North Marin made up the majority of those served; however, the percentage of clients from Central Marin has continued to grow.

*Figure 2. Clients Served by Funded Partners by Geographic Location*
SERVICE DELIVERY DESCRIPTION

Funded Partners were asked to identify the primary services they delivered. The primary activities reflect First 5 Marin’s priority outcomes and successful integration of programs in communities and cross-agency coordination, reflected here in resources and referrals, developmental screening and assessment, and health insurance enrollment.

Figure 3. Direct Service Contacts by Type of Funded Partner Activity
FISCAL ANALYSIS²

A total of $906,033.29 was dispersed in FY2013-2014 to projects funded as part of First 5 Marin’s Partnerships for Change (PFC), Grassroots Capacity Building (GCB), Public Policy Advocacy (PPA) and Public Education (PE) Strategies. While not reflective of all Commission expenditures, Table 3 presents the annual reimbursements per funded project within these strategies (noted in parenthesis for each project) and result areas.

Table 3. Funded Projects and FY2013 – 2014 Reimbursements

<table>
<thead>
<tr>
<th>Project Names</th>
<th>Agency Housing/ Coordinating Project</th>
<th>Result Area Totals</th>
<th>Individual Contracts Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Result 2. Ready For School</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pickleweed Preschool Expansion: childcare center in Canal (PFC)</td>
<td>City of San Rafael</td>
<td>$277,572.55</td>
<td>$85,040.00</td>
</tr>
<tr>
<td>Aprendiendo Juntos: playgroup (PFC)</td>
<td>Parent Services Project</td>
<td></td>
<td>$20,585.00</td>
</tr>
<tr>
<td>San Rafael School Readiness: Summer Bridge (PFC)</td>
<td>Marin HeadStart</td>
<td></td>
<td>$35,989.00</td>
</tr>
<tr>
<td>Marin City/Sausalito School Readiness: Summer Bridge / playgroup (PFC)</td>
<td>Marin HeadStart</td>
<td></td>
<td>$8,601.00</td>
</tr>
<tr>
<td>Novato School Readiness: playgroup, Summer Bridge (PFC)</td>
<td>Novato Youth Center</td>
<td></td>
<td>$27,337.00</td>
</tr>
<tr>
<td>San Geronimo Valley School Readiness: Playgroup (PFC)</td>
<td>San Geronimo Community Center</td>
<td></td>
<td>$22,000.07</td>
</tr>
<tr>
<td>FLAGship: Mobile family literacy (PFC)</td>
<td>Marin County Free Library</td>
<td></td>
<td>$50,000.00</td>
</tr>
<tr>
<td>Child Signature Program: Preschool quality enhancement (PFC)</td>
<td>Marin County Office of Education</td>
<td></td>
<td>$28,020.48</td>
</tr>
<tr>
<td><strong>Result 1. Children Are Healthy</strong></td>
<td></td>
<td>$223,341.02</td>
<td></td>
</tr>
<tr>
<td>Health Insurance Access: one-stop for all products; retention and utilization outreach (PFC)</td>
<td>Department of Health &amp; Human Services</td>
<td></td>
<td>$145,000.00</td>
</tr>
<tr>
<td>Early Childhood Mental Health Project: Social/emotional/behavioral assessments in child care settings; short-term counseling and support to providers (PFC)</td>
<td>Jewish Family and Children’s Services</td>
<td></td>
<td>$50,000.00</td>
</tr>
</tbody>
</table>

² The Commission uses fund-based, or cost center, budgeting. The program areas, or cost centers, to which revenue and expenses are allocated, reflect the Strategic Priorities outlined in its Strategic Plan and activities (in a separate cost center) related to evaluation of these efforts. Staff time is allocated to each of the program areas based on actual time spent in implementing these programs. Indirect costs are also allocated to each program area based upon the percentage of the total annual budgeted expenditures that the direct program and contract activities represent. All costs that meet the definition for administrative expenses outlined above are reflected in the fund/cost center labeled “General Operations”.
<table>
<thead>
<tr>
<th>Project Names</th>
<th>Agency Housing/Coordinating Project</th>
<th>Result Area Totals</th>
<th>Individual Contracts Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Premiums:</strong> Healthy Kids Health Premiums (PFC)</td>
<td>Partnership Health Plan</td>
<td></td>
<td>$28,341.02</td>
</tr>
<tr>
<td><strong>Result 3. Marin Values and Invests in All Children</strong></td>
<td></td>
<td>$405,119.72</td>
<td></td>
</tr>
<tr>
<td>MarinKids: Advocating for the general welfare of all children and youth in Marin (PPA, PE)</td>
<td>MarinKids</td>
<td></td>
<td>$125,000.00</td>
</tr>
<tr>
<td>Healthy Kids From Day 1: Early childhood obesity prevention (PFC)</td>
<td>LIFT-Levántate / Marin Child Care Council</td>
<td></td>
<td>$78,945.02</td>
</tr>
<tr>
<td>Commission Projects: Matching funds for Stinson Beach Preschool and Subsidized Child Care Centers. (PFC)</td>
<td>Multiple agencies</td>
<td></td>
<td>$19,219.00</td>
</tr>
<tr>
<td>Small Grants: Supporting technical assistance and capacity building for engagement in public advocacy and education related to priority outcomes. (PFC, GCB)</td>
<td>Multiple agencies</td>
<td></td>
<td>$126,134.95</td>
</tr>
<tr>
<td>Training and Technical Assistance and support for Evaluation and Data Collection (GCB)</td>
<td>Multiple agencies</td>
<td></td>
<td>$10,214.01</td>
</tr>
<tr>
<td>Other Commission Sponsored Activities: Forums, media, advocacy, convenings, and annual breakfast. (PPA, PE)</td>
<td>Multiple agencies</td>
<td></td>
<td>$45,606.74</td>
</tr>
<tr>
<td><strong>Total Reimbursements FY13-14</strong></td>
<td></td>
<td></td>
<td>$906,033.29</td>
</tr>
</tbody>
</table>

3 Projects in this result area are funded through the following First 5 Marin Strategy Areas: Public Education (MarinKids), Partnerships for Change (MarinKids, Healthy Kids from Day 1), and Public Policy/Advocacy (MarinKids, Parent Voices).
Funded Partner Reporting Highlights

In fiscal year 2013-14, First 5 Marin Children and Families Commission funded 13 projects, 12 of which fell within its Partnerships for Change strategy and one of which were funded as part of its Public Policy/Advocacy and Public Education strategies. An additional 13 projects were funded through First 5 Marin’s small grants, which funded technical assistance and capacity building, falling within its Grassroots Capacity Building and Partnerships for Change strategies. Following are highlights from project reporting with regard to select measures from project contracts and evaluation plans and stories of impact shared by partners.

PARTNERSHIPS FOR CHANGE

The highlights that follow reflect implementation of First 5 Marin’s Partnerships for Change strategy in service of Result Area 1. Marin Promotes and Protects the Health and Well-Being of All Children, Result Area 2. Marin Children Are Ready for School and Schools Are Ready for All Children, and Result Area 3. Marin Values and Invests in All Children. Project highlights are organized by result area.

---

4 For additional information about Summer Bridge programs included in Result Area 2, see the most recent evaluation report available at http://first5marin.org/evaluation.html

5 One project, MarinKids, was funded under three strategies: Public Education, Partnerships for Change, and Public Policy/Advocacy.
RESULT AREA 1. MARIN PROMOTES AND PROTECTS THE HEALTH AND WELL-BEING OF ALL CHILDREN

CHILDREN’S HEALTH INITIATIVE (CHI)

Outreach, Enrollment, Retention and Utilization, and Insurance Premiums for Children Ages 0-5

First 5 Marin funds the County-wide outreach, enrollment, and utilization effort, including positions in the County of Marin Department of Health & Human Services, which have created a “one-stop” enrollment structure for children and their families. Additionally, premiums for insurance coverage for 0-5 year-olds who do not qualify for existing publicly funded programs are also funded. The goal of Children’s Health Initiative (CHI) is to ensure children in low-income families have access to health insurance.

The Affordable Care Act (ACA) was implemented for the first year, January 2014. A CHI staff person was designated to enroll eligible families in ACA. All CHI staff have fielded a large volume of calls and walk-in from parents during the last six months due to both the Healthy Families transition as well as the implementation of ACA.

As part of the Affordable Care Act, Statewide Healthy Families (HF) program began transitioning members to Medi-Cal in January of 2013.

- Marin CHI supported the transition of 2800 children from Healthy Families to Medi-Cal, majority of families were able to remain with their primary care provider

Healthy Kids is an insurance product managed by Partnership Health Plan of California (PHC)

- Plan are in process to transition the 781 children from Healthy Kids to Kaiser Child Health Plan by June 30, 2015

<table>
<thead>
<tr>
<th>CHI Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marin School Nurses</td>
</tr>
<tr>
<td>Marin Community Clinic</td>
</tr>
<tr>
<td>Marin City Health and Wellness Center Clinic</td>
</tr>
<tr>
<td>College of Marin Single Stop</td>
</tr>
<tr>
<td>Venetia Valley School</td>
</tr>
<tr>
<td>Novato Human Needs</td>
</tr>
<tr>
<td>Novato Unified School District DELAC</td>
</tr>
<tr>
<td>Marin Employment Youth Council</td>
</tr>
</tbody>
</table>
EARLY CHILDHOOD MENTAL HEALTH CONSULTATION (ECMH)

Retaining Children in Child Care Settings
Consultation and support to child care providers and families are provided to buoy inclusion of children with identified social, emotional, or behavioral concerns in natural settings. ECMH works closely with its partners to provide comprehensive services and support to children 0-5 and their families through an active system of referral and case management.

Table 4. Early Childhood Mental Health Consultation Performance Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Target</th>
<th>Actual</th>
<th>Met</th>
<th>Exceeded</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of families of identified children who complete the Parent Questionnaire and report increased knowledge of issues and behaviors</td>
<td>85</td>
<td>100</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>% of children retained in child care program</td>
<td>100</td>
<td>100</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>% of families of identified children who complete the Parent Questionnaire and report increased understanding of their child’s experience in childcare</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Topics included in parent workshops

- Kindergarten Transition
- Power of Positive Parenting (Triple P)
- Raising Confident, Competent Children (Triple P)
- Raising Resilient Children (Triple P)

Coordinating Engagement with Families, Childcare Providers, and Specialists

Consultation began 6 months after Louis entered the infant program at a local child care center. The teachers reported that he was always bumping into other children, jumping and falling on top of children, hugging children and squeezing until they cried out, hitting himself on the head and running around the room most of the day. He also did not accept comfort, even when hurt. Other children were beginning to be afraid of him. Louis’s mom and grandma wanted help particularly for his constant need for activity and stimulation.

The consultants’ involvement with the classroom staff focused on a) supporting Louis’s initiative for social engagement, b) supporting his attachment to staff, c) creating small group activities with opportunities for focused attention and success, d) understand the meaning of his hitting himself, and e) continued education regarding sensory integration needs. With family, the consultant focused on a) gathering early history, b) thinking together about the impact on Louis of his parents’ separation, c) increasing their understanding of sensory processing, and d) providing them with activities that could meet his need for stimulation.

The Occupational Therapist (OT), who is an active member of our ECMH team on a part-time basis, was definitely an asset with this family and childcare center. The consultants have learned from the OT how best to recognize sensory needs that could be driving a child’s behavior. The OT observed Louis in his classroom, confirmed the consultant’s initial observations and created a plan of activities to meet his needs, which the consultant reinforced in staff and parent meetings.

When it came time for Louis to transition to a preschool classroom, Louis’s primary caregiver in the infant/toddler classroom transitioned to the preschool team, contributing to a smooth transition for Louis. Two months into his preschool time he began to have difficulty separating from his mom at morning drop off and his sensory issues began to escalate; however, consistent consultancy support allowed ongoing support through meetings with staff and parents, co-creating a good-bye ritual, and reinforcing with the preschool staff all that had helped in the past.
RESULT AREA 2. MARIN CHILDREN ARE READY FOR SCHOOL AND SCHOOLS ARE READY FOR ALL CHILDREN

APRENDIENDO JUNTOS

Parents and Children Learning Together

Aprendiendo Juntos (“Learning Together”) provides child development services to young children without access to preschool as well as education and support services for parents through a free, drop-in weekly playgroup to families in the Canal Neighborhood in Marin. The playgroup includes developmentally appropriate parent/child activities in English and Spanish and coordinated parent programming developed in discussion with a group of parent advisors. Partnerships with local government agencies, service providers, and volunteers are leveraged to connect families to additional resources, such as nutrition information and snacks and early literacy supports. This group was initially started by a group of parents who identified a lack of activities for young children and their families, and spoke with Parent Services Project about the need.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Target</th>
<th>Actual</th>
<th>Met</th>
<th>Exceeded</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of parents report increased knowledge of community resources</td>
<td>75</td>
<td>88</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>% of parents report increased connection with other parents</td>
<td>75</td>
<td>74</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of parents report increase in child’s school readiness</td>
<td>75</td>
<td>83</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Continued Demand**

- In FY 2013-14, participation in Aprendiendo Juntos continued to reflect growing demand with more than 400 children and family members participating.
FLAGSHIP

Bringing Literacy and Community Health Information to Isolated Communities

This project is a traveling preschool and library that offers school readiness activities, as well as community health and resource information and education for parents, families, and daycare providers. The FLAGship project is particularly vital in providing family literacy and health information to isolated families and daycare providers in rural communities. It is on the road 28.5 hours per week and has nine regular stops.

Table 6. FLAGship Performance Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Target</th>
<th>Actual</th>
<th>Met</th>
<th>Exceeded</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td># sites receiving FLAGship services</td>
<td>12</td>
<td>14</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td># participants receive read-aloud skills</td>
<td>200</td>
<td>1175</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>% parents/caregivers duplicate and report hands-on activities in the home</td>
<td>40</td>
<td>60</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>% families report five new nutritional snacks regularly offered to children</td>
<td>50</td>
<td>72</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Reaching Families in...

- Point Reyes Station
- Giacomini Ranch
- Chileno Valley
- Tomales
- Marin City
- San Rafael
- Novato
- San Geronimo Valley
- Fairfax
PICKLEWEED PRESCHOOL

Expanding Preschool Opportunity
This venue provides an additional 20 slots for children ages 3-5 in the Canal neighborhood with a curriculum that prepares them for a successful entry into kindergarten. Other projects currently or previously funded by First 5 in the area work closely with Pickleweed to connect children and families with other services and supports.

Table 7. Pickleweed Preschool Performance Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Target</th>
<th>Actual</th>
<th>Met</th>
<th>Exceeded</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>% parents from the preschool class who will have volunteered in the classroom</td>
<td>60</td>
<td>71</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% children who will use and respond to basic English phrases</td>
<td>100</td>
<td>100</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% children who will successfully join in teacher-directed activities and exhibit ability to take turns and socialize</td>
<td>100</td>
<td>90</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% parents attending education events report increased knowledge in one or more areas</td>
<td>75</td>
<td>100</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Linking Families to:
- Community Mental Health
- Elementary School Family Centers
- San Rafael School District Intervention Services
- Parent Services Project
- Al Boro Community Center
- Pickleweed Library
NOVATO SCHOOL READINESS (NSR)

Supporting Families and Children’s Readiness for School

This project includes: Kinder Academy, a Summer Bridge transition program for entering Kindergarten students, with a focus on those with no or limited preschool experience, and a weekly playgroup. Staff focus on engaging and collaborating with families, the school district, individual schools, and service providers; and they work hard to reach those families who are isolated and unconnected to any particular groups.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Target</th>
<th>Actual</th>
<th>Met</th>
<th>Exceeded</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td># families engaged in bilingual socialization and learning opportunities</td>
<td>20-25</td>
<td>37</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td># families per year provided 5-week intensive pre-K transition program for children with little or no preschool experience</td>
<td>80-100</td>
<td>80</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Sustaining and Institutionalizing Critical Programs

• Continued collaboration with Novato Unified School District has sustained two additional (MCF funded) Kinder Academy classrooms.

Leveraging Community Connections

In Latino communities throughout Marin County, it is very common to hear that housing providers treat tenants with discrimination based on race and national origin by setting different terms, conditions, and privileges for housing and/or not making the necessary repairs.

In the month of November, a playgroup mommy name Ms. Juarez approached the NSR staff with a look of frustration. For six months the family had made multiple requests to their apartment manager to repair or replace a defective gas stove. When the family used the stove, the flames were inconsistent. At times the flames barely came out and without any warning; the flames would dangerously shoot out a foot tall. At one point, almost burning Ms. Juarez in the face. Their requests for attention were ignored.

Staff assessing the situation recognized that there were two options. First option, connect with Fair Housing of Marin and allow them to help with the legal process. However, they needed immediate help and going that direction would have taken longer than the family would like. Second option, connect with the local fire department and allow them to do the proper investigation to assess how dangerous the situation really was. Since the circumstances seemed hazardous, the NSR staff called Novato Fire Department. The fire department’s Information Officer was sent to the home and declared the stove to be completely unsafe, and followed up with property management to ensure immediate attention.

NSR can proudly say that the situation was resolved in a quick fashion, the old stove was replaced, and the family now lives in a safer environment. Fair Housing of Marin was also contacted to notify them of the situation and they will continue advocating for the family.
SAN GERONIMO VALLEY SCHOOL READINESS

Supporting Families and Children’s Readiness for School

In a twice weekly play group, staff focus on engaging and collaborating with families, local schools, and service providers. Located in an area where families can be geographically isolated, they work hard to reach and establish connection with and among those families.

Table 8. Novato School Readiness Performance Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Target</th>
<th>Actual</th>
<th>Met</th>
<th>Exceeded</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td># families will participate in enrichment activities and events offered by the community center</td>
<td>25</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% families report new knowledge about community resources</td>
<td>75</td>
<td>100</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td># families will learn about the Lagunitas School District kindergarten</td>
<td>20</td>
<td>22</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Partnerships to Support Children’s Healthy Development

- San Geronimo’s Playgroup included a 9-week program with students from Dominican University’s Occupational Therapy Program.
SUMMER BRIDGE⁶

Supporting Families and Children’s Readiness for School in Five Communities

Summer Bridge is a transition program for entering Kindergarten students, with a focus on those with no or limited preschool experience. Summer Bridge began in the summer of 2003 with three classrooms in the San Rafael Canal community. It continued to expand and in Summer 2005, a standardized curriculum was developed through funding from a Federal Early Learning Opportunities Act grant. Most recently, during the summer of 2013, 11 Summer Bridge classrooms ran Countywide and serving approximately 200 children and families in three communities.

<table>
<thead>
<tr>
<th>Reaching Families in...</th>
</tr>
</thead>
<tbody>
<tr>
<td>• San Rafael (Canal)</td>
</tr>
<tr>
<td>• Novato</td>
</tr>
<tr>
<td>• Marin City / Sausalito</td>
</tr>
</tbody>
</table>

The Summer Bridge curriculum was designed to ensure consistent and high-quality instruction across all classrooms. The curriculum centers around four developmental areas: Social-Emotional Development, Physical Development, Cognitive Development, and Language Development. Summer Bridge students have continuously demonstrated statistically significant gains within each domain, often showing the greatest growth in Social-Emotional Development.⁷

In keeping with First 5 Marin’s efforts to support collaborative systems-level changes that are community-based, families are connected to the Summer Bridge program through multiple points of entry. These include: upon registration for kindergarten, through outreach during the year by family advocates/Promotores in the community, referrals from the FLAGship (mobile literacy/parent education/health outreach van funded by First 5 Marin), and referrals from the Marin Community Clinics. Beyond their participation in this five-week program, families are connected with other resources/agencies within their communities, such as ESL classes, health and dental care providers, family counseling, developmental screening and intervention services, and basic needs providers.

⁶ For additional information about Summer Bridge programs included in Result Area 2, see the most recent evaluation report available at http://first5marin.org/evaluation.html

⁷ After 5 years of consistent findings regarding the effectiveness of Summer Bridge, it was determined that continued annual evaluation of the Summer Bridge program was no longer necessary. Sites continue to have access to and use the associated evaluation and assessment tools to support individual students and for their own performance monitoring.
RESULT AREA 3. MARIN VALUES AND INVESTS IN ALL CHILDREN

MARINKIDS

Advocating for All Children and Youth in Marin

The overarching aim of MarinKids is to build a community that has at its heart a belief that caring for all the children is our collective responsibility, and that acts to realize that belief. Through its presence and resources online as well as active engagement of a leadership committee, MarinKids, is a gathering place for the community that informs and energizes the action of individuals, organizations, voters, and policymakers.

The work of MarinKids throughout this fiscal year centered on driving the Children’s Investment Initiative, now Marin Strong Start. The timeline below highlights key activities, understanding gained, and progress achieved in FY 13-14.

Table 10. MarinKids Marin Strong Start Activities and Highlights of Progress

<table>
<thead>
<tr>
<th>Key Activities</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retained Godbe Research to conduct a formal community survey. focused on four types of high impact children’s services that might be funded.</td>
<td>• Survey results indicated that roughly 67 percent of voters were likely to approve a one-half percent special sales tax.</td>
</tr>
<tr>
<td>1) health care, 2) affordable childcare, 3) preschool education, and 4) extended learning/afterschool programs.</td>
<td></td>
</tr>
<tr>
<td>Coalition met with the Board of Supervisors briefing them on the results and made a presentation to the Board.</td>
<td>• Originating coalition moves forward with a strategy to put a ballot measure on the November 2014 ballot</td>
</tr>
<tr>
<td>Coalition members began conducting outreach to community members and potential consumers, key community groups, business leaders, city councils and school boards, and engaging additional partners around the public planning process for a dedicated children’s fund.</td>
<td>• Coalition significantly expanded its base of support to include dozens of parents, community members, leaders and organizations.</td>
</tr>
<tr>
<td>March 2014, upon the recommendation of the Marin County Board of Supervisors, a Marin Strong Start Expenditure Committee was selected to draft a proposed Expenditure Plan.</td>
<td>• The Expenditure Committee met to develop the plan, holding full committee meetings and meetings of four workgroups charged with bringing program priorities and expenditure recommendations to the full Committee. The workgroups included Expenditure Committee members as well as additional experts and members of the community</td>
</tr>
<tr>
<td>The Expenditure Committee sought input from the Marin Strong Start Coalition members on guiding principles for developing the plan and the subsequent draft plan</td>
<td>• Guiding principles proposed by the Coalition included equity of opportunity for all children, targeting resources toward children where family economics reduce opportunities, building upon and leveraging existing structures and resources, integrating systems, and building for accountability, durability and flexibility over time to meet changing circumstances such as availability of state or federal funds for some program elements.</td>
</tr>
</tbody>
</table>

8 http://www.marinkids.org/about/
MarinKids contracted with Godbe Research on behalf of the Expenditure Committee to conduct a series of three focus groups with residents from a range of jurisdictions, ages and political affiliations.

- All areas of the measure, preschool, healthcare, childcare and afterschool/extended education were seen as important with preschool and healthcare most often highlighted.
- A strong majority of the participants agreed that funds should expand resources for children from poor to lower-moderate income families - children with the greatest need.
- In an informal survey of participants, a strong majority (72%) agreed they would support a publicly funded measure with these priorities.

June 2014, the Coalition presented the Expenditure Plan to the Board of Supervisors.

- The plan met with high marks from the Supervisors.

An additional tracking poll was conducted shortly after the June elections.

- While Marin Start could win with a good campaign, placement on the ballot with MIRA would result in a loss by both measures. These findings were presented to the BOS. When the Board placed MERA on the ballot, the Coalition withdrew their request.
- Work will continue for the November 2016 ballot.
HEALTHY KIDS FROM DAY 1

Addressing Early Childhood Obesity

The Early Childhood Wellness Collaborative is composed of a diverse group of experienced experts in the fields of community health, nutrition, physical activity, medicine, and child development, as well as businesses and funders, who have come together with a shared vision to address the issue of early childhood obesity. The goal of this project is to address health, wellness, risk of overweight, obesity, and chronic disease in children from birth to age 5 and their families and caregivers by creating real, measureable, and sustainable change in early education and care settings. This project, called Healthy Kids from Day 1, includes the active involvement of public and private partners in order to form a multi-pronged intervention to impact the epidemic of early childhood obesity in Marin.

The first year of this project included the development of the collaborative mission and principles and the launch of a pilot program—including design and development of mission, principles, processes, materials, and evaluation—with five (5) pilot childcare sites in Marin County. These sites include family- and center-based sites and are located in west, central, south, and north Marin.

Having completed an asset analysis and work-plan in the pilot’s first year, in 2013-14, pilot sites were engaged in coaching, technical assistance, and professional development activities (including family engagement sessions) to support and sustain policy, practices, environment, and education associated with the prevention of early childhood obesity.

In addition to work with 5 pilot sites, the program provided trainings to the child care community at-large. The Marin Child Care Council took over fiscal sponsorship for the project in 2013 and houses a page on its website with resources for providers in all areas of child wellness and continues conversations about the sustainability of the project.

Impact of HKFD1’s support for adoption and implementation of policies and practices in focus areas reported by Pilot Sites: All 5 Sites reported:

- They now have policies, practices, and environments that support the health and well-being of children, families, and staff.
- Families in their programs have gained knowledge, skills, and resources to support healthy changes at home.
- Children in their programs have learned healthy habits in a fun environment.

Focus Areas for Childcare Center Policy, Practices, Environment, and Education

- Movement & Physical Activity
- Food & Beverages
- Nap & Rest Time
- Screen Time
- Breast Feeding
- Gardens
- Staff Wellness
SMALL GRANTS

Supporting and Leveraging Partner Engagement in Public Policy and Advocacy and Public Education

Small grant funding focuses on community capacity building, advocacy, and community development. There is no minimum amount. The intent of the Small Grants process is to support one-time innovative and creative community-driven projects. The funds are not intended to support on-going or general operations.

Of the 13 grants made in FY13-14:

6 focused on enhancing and expand advocacy & public education
   5 - completed or progressing as described
   1 - did not occur (funds not disbursed)
4 featured family engagement projects w/ parent advocacy/leadership capacity building
   3 - completed as described
   1 - completed with some adjustment in scope
3 supported Feasibility studies / planning projects to increase 0-5 services / access
   2 - completed as described
   1 - delayed, but anticipated for FY14-15

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Purpose</th>
<th>Progress</th>
</tr>
</thead>
</table>
| BOLINAS-STINSON UNION SCHOOL DISTRICT $25,000 | Feasibility study for the development of a universal preschool program for children living Within the boundaries of the Bolinas-Stinson Union School District | Study completed with final report that includes: three proposed options regarding district involvement in providing early education services. Recommendations as follows:
   1) Develop resources and personnel specifically to strengthen and expand alignment between preschool and K-2 support personnel
   2) Actively maintain current supply of licensable preschool space for young children (actual classroom or land to house preschool – i.e. portable), with clear agreements and expectations
   3) Require annual report re: state of preschool services in community. |
<p>| VENETIA VALLEY FAMILY CENTER LEADERSHIP DEVELOPMENT $25,000 | Develop a PreK-K Family Leadership Project to recruit and support family leaders, targeting families with children ages 0-5, families with no preschool access, and other historically under-represented parent groups. | The First 5 Marin capacity-building grant included an intensive 4-week workshop that moved parents from 1) social engagement and establishing parent-to-parent networks to 2) school readiness orientations to learn how to navigate the school system and included 3) introductory technical training to support classroom volunteering and development of supporting home activities to develop literacy and math skills. Participating families are full partners in helping meet WV mission, enhancing family engagement at Venetia Valley and broadening the number of families who are taking active roles early in their child’s education. |</p>
<table>
<thead>
<tr>
<th>Grantee</th>
<th>Purpose</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHORELINE DUAL-IMMERSION TASK FORCE STUDY</td>
<td>Feasibility Study for Dual Immersion Program in Shoreline USD. The dual immersion framework will include a 10-year multi-year plan or roadmap for the growth of the DI program, including establishing The Seal of Biliteracy that gives graduates college credit for their language abilities.</td>
<td>Feasibility study completed and dual immersion being offered K-1 in Shoreline USD.</td>
</tr>
<tr>
<td>YOUNG MOMS OF MARIN STRUCTURAL CAPACITY</td>
<td>Build capacity within a group of teen/young families through targeted technical assistance, including capacity to conduct a survey, gathering information to guide services, resources, officials, and us, by identifying the real needs and concerns of this invisible population.</td>
<td>Of 14 group members, 13 participated in at least one training and 5 participated in 5 of 7 trainings. Trainings were provided by experts and related to children’s health and wellbeing, and community based research methods. With the granting of an extension until the end of the FY, the group successfully conducted a survey of young moms to identify needs and concerns. They have produced a video and presented findings of the survey to the community in three separate community convenings. While attendance at community meetings was less than hoped, YMM will continue to reach out to existing meetings throughout this year and email our information to city administrators and funders.</td>
</tr>
<tr>
<td>CANAL WELCOME CENTER CULTURAL CAFÉ ADVOCACY PROJECT</td>
<td>Mobilize the marginalized immigrant parent community to advocate effectively for the needs of children – 5 and ensure that all children have access to resources and opportunities to promote their healthy development in San Rafael’s Canal neighborhood.</td>
<td>A small group of committed parents identified need and desire to provide quality care for their children. Leveraging additional funds, a cooperative child care program was piloted, “Cooperativa Infantil Cempasuchitl.” To sustain the program, parents have engaged in fundraising trainings and organized fundraising events. As of January 2014, Parents secured space for a twice-weekly group.</td>
</tr>
<tr>
<td>BREASTFEEDING FRIENDLY PHYSICIAN OFFICE INITIATIVE</td>
<td>Increase capacity of physicians’ offices to promote and support breastfeeding by establishing and implementing a written office policy and providing training, technical assistance, and tools to office staff.</td>
<td>Project experienced early challenges to implementation, specifically that scheduling trainings required education in and of itself and time available with physicians officers required trainings be scheduled for the Spring, rather than fall/winter as initially anticipated. As of last report, trainings were being scheduled. Currently no additional information regarding extent or impact of these trainings is available.</td>
</tr>
</tbody>
</table>
### ROUND 1
(December 2013 completion)

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Purpose</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASIAN ADVOCACY SALON PROJECT</td>
<td>Community outreach and advocacy to promote policies and practices to better protect nail technicians from harmful chemical exposure.</td>
<td>Materials have been distributed to more than 50 nail salons. With active involvement of F5 funded Promotores, who have participated in countywide trainings, 13 salons of 15 salons reached participated in trainings to learn how to reduce / eliminate chemical agents in nail products. The project continues working closely with the government sector to reward or to recognize those nail salons that voluntarily switch to products that contain less toxic chemicals and provide more safe procedures in the workplace. The Project has applied to the Marin Community Foundation for grant renewal through 2015 to continue the Campaign.</td>
</tr>
</tbody>
</table>

### ROUND 2
(June 2014 completion)

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Purpose</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>VIVIENDO VERDES</td>
<td>Expanding and enhancing work of Promotores especially with respect to awareness on toxicity of plastics, reduction of waste, and engaging governmental and institutional systems as part of community movements.</td>
<td>Promotoras participated in trainings re: plastics and toxicities; green and sustainability principles and practices; and civic engagement and policy creation. Promotoras have engaged in outreach via events (binational health week, promotoras summit) and street education at Marin County Food Banks.</td>
</tr>
<tr>
<td>ABRIENDO PUERTAS: IMPLEMENTATION OF EVIDENCE-BASED PARENTING PROGRAM (NOVATO YOUTH CENTER)</td>
<td>Foster parent leaders by providing training through the Abriendo Puertas curriculum, a school-readiness curriculum that strengthens the leadership and advocacy skill of parents with children 0-5, so that more children enter school ready to learn and achieve academic success, decreasing Marin County’s academic achievement gap.</td>
<td>Family engagement component at the Novato Youth Center strengthened through a program via weekly participation in the 10-week program. 100% of the 15 participant families strongly agreed that they learned new skills for advocating for their children and will be using the information learned in the future.</td>
</tr>
<tr>
<td>SAFE SLEEP CAMPAIGN (MARIN CHILD CARE COUNCIL)</td>
<td>Marin Child Care Council intends to launch a safe sleep campaign; our goal is to create a new energy around safe sleep in all of our childcare programs and change policy and practice to increase the safety of infants in childcare. We will also implement a county wide safe sleep campaign targeting parents.</td>
<td>Safe Sleep Toolkit and training curriculum for providers developed. 91 CC providers trained via four workshops. All licensed child care sites received site visits, which included review of the toolkit, safety checks, and discussions of how to integrate safe sleep policy, including example written policy. Overall, safe sleep awareness has been incorporated into MCC’s resources and TA for providers and parents.</td>
</tr>
<tr>
<td>Grantee</td>
<td>Purpose</td>
<td>Progress</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>MARIN CITY COMMUNITY SERVICES DISTRICT COMMUNITY-WIDE STRATEGIC PLANNING FOR SERVICES FOR CHILDREN 0-5</td>
<td>Develop a strategic plan for serving children 0-5 and their families in Marin City.</td>
<td>In FY13-14, MCCSD prepared for strategic planning process, which includes, but extends beyond 0-5. With funds from MCF and the County now in place, this project will officially launch in fall 2014.</td>
</tr>
<tr>
<td>SAUSALITO MARIN CITY SCHOOL DISTRICT SOCIAL MEDIA OUTREACH PROJECT</td>
<td>Develop and implement social media outreach strategy for SMCS, including engagement and outreach to birth-five families and programs.</td>
<td>New Superintendent. Despite ongoing attempts to contact and establish status, funds were not disbursed.</td>
</tr>
<tr>
<td>COMMUNITY ACTION MARIN: EMERGING LEADERS ADVOCACY TRAINING PROJECT</td>
<td>Provide advocacy training to ECE professionals, specifically supporting teachers of color and male teachers participating in CAM’s Emerging Leaders community of practice</td>
<td>Participants have engaged in workshops to enhance their understanding of advocacy and its potential use. Workshops have included opportunities to learn from others engaged in local (Bay Area) efforts that are explicit in the connections between culture, leadership, and advocacy. Emerging leaders were supported in pursuing opportunities to deepen and apply what they learned in support of their interests, engaging in advocacy at the state (re: preschool affordability), county (worthy wage for child development workers) and local (activities in their own communities/child care site) level. With continued commitment of these emerging leaders, CAM is seeking funding from multiple agencies to support the project.</td>
</tr>
</tbody>
</table>
APPENDIX

Since its initial strategic plan in 2004, First 5 Marin has articulated a commitment to the health and well-being of children ages 0-5 and their families in Marin County. As a consequence, its priorities and strategies reflect a combination of focus on the most marginalized in Marin County, as well as improving the overall quality and accessibility of information and services for providers, parents, families, and others involved in the systems of care which support children ages 0-5. A set of priority results and priority outcomes serve as the frameworks for implementation, accountability, and evaluation.

PRIORITY RESULTS

1. Marin Protects and Promotes the Health and Well-Being of All Children
2. Marin Children are Ready for School and Schools Are Ready for All Children
3. Marin Values and Invests in All Children

PRIORITY OUTCOMES

1. Children have Optimal Health and Well-Being
2. Children are Ready for School
3. Public Policies Support Children

The Commission’s 2012-2016 strategic plan both affirmed a strategic direction as well as explicitly grounded its role and focus. With the Theory of Change serving as foundational framework, First 5 Marin articulated a Theory of Action that served to more formally and intentionally place their public education, advocacy and public policy work as a primary area of focus. Grantmaking and capacity building sit with this framework by both informing the work of First 5 Marin and serving as effective strategies for strengthening the ability of the community (in the broadest sense) to engage in dialogue and debate. The community also makes decisions regarding public policies that best support the health and well-being of children and families.

*Figures 1A and 2A* illustrate how these various elements are designed to work together and reflect the Commission’s re-affirmation of the Marin Values priority result.
THEORY OF Change

6. STRATEGIES
a. Children’s Health Initiative
b. Comprehensive Health Insurance Coverage
c. Health Insurance Infrastructure
d. Preventative Dental Services
e. Health Advocates/Health Literacy Services
f. Mental Health/Child Safety/Special Needs Consultation
g. School Readiness initiatives “Preschool for All”
h. Early Education Workforce Development
i. New Parent Education
j. Healthy Lifestyles and Child Friendly Communities Promotion
k. Policy Development, Public Education and Advocacy
l. Emerging Issues and Special Projects

1. ISSUES ADDRESSED
a. Children’s health
b. Parenting skills and available resources
c. Children’s ability to learn

5. CONTEXTUAL FACTORS
a. Other funding and planning efforts in the County
b. Strong community interest and involvement
c. Proposition 10 legislative mandate
d. Federal, State and local policies and budgets

2. GUIDING VALUES “We believe...”
a. that families have the primary responsibility for their children’s physical, intellectual, mental, social and moral development
b. that the entire community shares the responsibility with families to ensure that every child thrives
c. that what we do to in create the potential of less advantaged children improves the potential for all children
d. we respect and value the diversity of families, races and cultures in Marin
e. that our resources must be directed toward catalyzing sustainable improvements in the health and well-being and development of all children in Marin
f. our highest and best use is working to prevent problems before they begin

3. EVIDENCE SUPPORTING STRATEGIES
a. Initial and recent strategic planning process
b. Data collected through CHS Survey, Healthy Marin Partnerships and other sources
c. Community engagement processes
d. Research findings on early childhood development and family support
e. Research and evaluation findings on community empowerment and engagement strategies and results

4. EXPECTED CHANGE
a. Children have optimal health and well-being
   - Children have access to affordable comprehensive health insurance
   - Families and caregivers have access to information and support to protect and promote the health, safety and well-being of their children
   - Children have access to preventive oral health, mental health and specialty medical services
b. Children are ready for school
   - Children with social/emotional issues and special needs are identified early and receive support
   - Families have access to information, quality early education opportunities, and support to protect and promote the social/emotional development and school readiness of their children
   - Schools are prepared for children and linked with the community
c. Public policies support children
   - Public policies promote the optimal social/emotional development and school readiness of all children
   - Public policies support the development of quality early education and child-ready school environments that promote success in life
   - Public policies promote the optimal health, safety and well-being of all children
Complementing the Implementation Framework is a Sustainable Community Structural Change (SCSC) model developed during FY2008-2009 as part of the pre-work for the Strategic Planning process. SCSC was developed based on extensive literature and the guiding values, operating principles, and the implicit and explicit intentions of First 5 Marin to support the development of a more integrated, inclusive, and adaptive system of services and support for children ages 0-5 (Marin Values and Invests in All Children).

The SCSC framework describes key factors (referred to as “levers”) affecting change within systems (comprised of people, organizations, and communities). Its applicability to the work of First 5 Marin was tested and validated through interviews, focus groups, and qualitative analysis of funded partners’ reports.

---

9 Originally titled the Sustainable Community System Change model, it was renamed in 2012 after reflection and acknowledgment that the framework was designed to change the rules and practices that create and sustain systems and thus worked at a deeper structural level.
Figure 3A below is a graphical application of the SCSC framework referenced in later sections of this report as a way to visualize the status of various efforts. Additionally, a working definition of Sustainable Community Structural Change emerged:10

Human and community service systems include multiple organizations that may or may not be connected to one another. Meaningful sustainable change within these systems requires:

A clear and shared vision of overall purpose and related goals

Intentional fostering of linkages and relationships

Organizations working in concert—leveraging resources to build knowledge, partnership, and processes

Figure 3A. Sustainable Community Structural Change Model – Stages and Levers of Change: The Continuum

---

10 Sustainable Community Structural Change, First 5 Marin, jdcPartnerships 2008.
In FY2011-12 First 5 Marin engaged in strategic planning that articulated the strategic focus of the Commission’s leadership and resources to build and support institutional and grassroots policy and advocacy infrastructures\(^\text{11}\). While Figure 3A describes the stages and levers of change for structural change, writ-large, Figure 4A below more explicitly identifies the role of First 5 Marin in advancing this change. Adopted in FY2011-12 as part of First 5 Marin’s strategic planning, this theory of action makes explicit the actions that F5M will engage in to influence policy and partnerships that promote sustained changes in children’s access to affordable health care, opportunity for success in school, and lives lived in families and communities that provide for their optimal health, safety, and well-being.

\[\text{Figure 4A. First 5 Marin Theory of Action}\]

---

\(^\text{11}\) [Link to strategic plan](http://first5marin.org/pdfs/strategic_plan/F5M_StrategicPlan2012Summary_FINAL.pdf)