

**November 5, 2014**

**12:00 – 2:00 p.m.**

Center for Healthy Communities at The California Endowment  
1000 North Alameda Street, Catalina Room  
Los Angeles, CA 90012

**PROPOSED AGENDA**

- |       |                                                                                   |                    |                                             |
|-------|-----------------------------------------------------------------------------------|--------------------|---------------------------------------------|
| 1.    | Welcome and Introductions                                                         |                    | Richard Cohen, Chair                        |
| noon  | ▪ Opening Statement and Comments by the Chair                                     |                    |                                             |
| 2.    | Approval of Minutes                                                               | <b>Action Item</b> | Andrea Joseph                               |
| 12:10 | ▪ October 1, 2014                                                                 |                    |                                             |
| 3.    | Public Policy Update                                                              |                    | Lisa Wilkin                                 |
| 12:15 | ▪ Reauthorization of Child Care and Development Block Grant<br>Pending            |                    | Co-chair, Joint Committee<br>on Legislation |
| 4.    | Proposed Changes to Policies and Procedures                                       |                    | Ancelma Sanchez and<br>JoAnn Shalhoub-Mejia |
| 12:20 |                                                                                   | <b>Action Item</b> | Governance Work Group                       |
| 5.    | Home Visitation: Contributing to the Well-being of Children<br>and their Families |                    | Janice I. French                            |
| 12:30 | A. Practice and Policy Perspectives                                               |                    | LA Best Babies Network                      |
|       |                                                                                   |                    | Kate Anderson                               |
|       |                                                                                   |                    | Child Advocate                              |
| 12:55 | B. Small Work Group Discussions ( <i>flip page for guided<br/>questions</i> )     |                    |                                             |
|       | C. Work Group Reports                                                             |                    |                                             |
| 6.    | Announcements and Public Comment                                                  |                    | Andrea Joseph                               |
| 1:50  | ▪ CA Applies for Federal Preschool Development Grant                              |                    |                                             |
| 7.    | Call to Adjourn                                                                   |                    | Richard Cohen                               |

**Next Meeting**

Wednesday, December 3, 2014  
Los Angeles County Office of Education (LACOE) – Head Start  
10100 Pioneer Boulevard, Conference Rooms 110/111  
Santa Fe Springs, California 90012

**MISSION STATEMENT**

*The mission of the Child Care Planning Committee is to engage parents, child care providers, allied organizations, community, and public agencies in collaborative planning efforts to improve the overall child care infrastructure of Los Angeles County, including the quality and continuity, affordability, and accessibility of child care and development services for all families.*



### ***Small Work Group Discussion Questions:***

- What is it like to be a new parent? As a new parent, what do “I/we” need? What is readily available?
- What partnerships currently exist between early care and education (ECE) and home visitation programs? How are they working?
- What benefits may accrue to families simultaneously receiving home visitation and participating in ECE?
- What can we do to build and enhance the partnerships between ECE and home visitation?
- Identify potential alignments between your work group focus and home visitation. What is the common ground? Where are the opportunities for partnership?
  - **Quality** – How does home visitation fit with the quality rating and improvement system? How would a partnership with home visitation enhance the quality of the program and the services that reach children and their families?
  - **Access/Inclusion** – How can home visitation and ECE work together to facilitate families’ access to high quality ECE programs/participation in a home visitation program? How can ECE and home visitation partner to meet the needs of children at risk for or with disabilities and other needs (i.e. early identification and inclusion)?
  - **Workforce** – What are the core competencies needed by both the ECE workforce and home visitors? What opportunities exist for joint trainings?
- What more do we need to know? What are our next steps?

# COUNTY OF LOS ANGELES



POLICY • PLANNING • PRACTICE

Richard Cohen, Chair  
Andrea Joseph, Vice Chair

October 9, 2014

#### *Members*

Ofelia Aguilar  
Norma Amezcua  
Rocio Bach  
Darlene Cabrera  
Ana Campos  
Edilma Cavazos  
Debra Colman  
Teresa Figueras  
Mona Franco  
Edith Garcia  
Nora Garcia-Rosales  
La Tanga Gail Hardy  
Terri Johnson  
Jennifer Kuida  
Terri Lamb  
Ritu Mahajan  
Liliana Martinez  
Cyndi McCauley  
Flor Medrano  
Pat Mendoz  
Patricia Moreno Pascover  
Melissa Noriega  
Ann Oshiro  
Laurel Parker  
Rachelle Pastor Arizmendi  
Dianne Philiposian, Ph.D.  
Joyce Robinson  
Ancelma Sanchez  
Judy Sanchez  
Araceli Sandoval-Gonzalez  
Kathy Schreiner  
Janet Scully  
Sarah Soriano  
Fiona Stewart  
Andrea Sulsona  
Dean Tagawa  
Holli Tonyan  
Truyen Tran  
Jenny Trickey  
Wendy Tseng  
Kai-Ti Wang  
Lisa Wilkin  
Carolyn Wong

Ms. Kim Belshé, Executive Director and  
Board of Commissioners  
First 5 LA  
750 North Alameda Street, Suite 300  
Los Angeles, California 90012

### **Re: Comments to First 5 LA 2015-2020 Strategic Plan: Focusing for the Future**

Dear Ms. Belshé and Commissioners:

The Los Angeles County Child Care Planning Committee (“Planning Committee”) appreciates the opportunity to comment on First 5 LA’s 2015-2020 Strategic Plan: Focusing for the Future (“Draft Plan”). The mission of the Planning Committee is to engage parents, child care providers, allied organizations, community, and public agencies in collaborative planning efforts to improve the overall child care infrastructure of the County of Los Angeles, including the quality and continuity, affordability, and accessibility of child care and development services for all families. The Planning Committee is comprised of 50 members representing parent/consumers, child care providers, community representatives, public agency representatives, and discretionary members, including Board of Supervisor appointees.

The Planning Committee thanks First 5 LA staff and the Commission for all your hard work to pull together the Draft Plan that is expected to have the broadest possible impact on the well-being of young children and their families and the systems that directly and indirectly serve them. Overall, we support the stated vision, outcomes and priority areas as keys to assuring young children in Los Angeles County have a great start. The purpose of this letter is to provide you with recommendations for the Draft Plan with respect to the outcome area, “Early Care and Education: Increased access to quality early care and education”. In addition to the specific recommendations listed below, we recommend that, when appropriate and given First 5 LA’s diminishing financial resources, the Commission considers how direct services can fit into the Draft Plan or First 5 LA’s implementation of the Draft Plan.

#### *Staff*

Michele P. Sartell  
Interim Child Care Planning Coordinator



The remainder of this letter provides specific recommendations to the priority focus areas – access, quality and workforce – for the early care and education outcome.

**ACCESS:** Per a recent study funded by First 5 LA, Los Angeles County faces a significant challenge in meeting the need for high quality early care and education services for children from birth to five, particularly for infants and toddlers as well as full-day services for preschool age children. Thus, the Planning Committee commends First 5 LA for focusing on access issues. Our Access recommendations focus on language and a request for clarity.

***Recommendations:***

- Revise the Emerging Programmatic Strategy to exemplify the continuum of early learning that begins at birth rather than bifurcating infant/toddler care from preschool to ensure that the importance of the learning in the very early years of birth to three is acknowledged. As such, we suggest revising the language to read “Advocate for greater investments in quality early care and education for children zero to five.” We recommend a similar revision to the Priority Activity listed under Public Policy and Advocacy, refraining from creating a false distinction between infant/toddler care and preschool.
- Articulate a definition of “actual cost” and its basis.
- Revisit and expand upon the priority activity, “Support collective impact efforts to improve access to quality early care and education (e.g. the LA Compact and Campaign for Great Level Reading)” as it is vague and the examples provided are not readily familiar to the field of early care and education. We recommend adding examples of recognizable organizations that may contribute to the collective impact effort.
- Add a priority area in support of continuous eligibility for families with children enrolled in subsidized early care and education programs. Currently, parents are required to report all changes in family circumstances that may impact their eligibility, which may result in a disruption in the continuity/stability of the child and parent’s participation in the early care and education program.
- Clarify the relationship between access and implementing a kindergarten readiness assessment. We recommend a community wide assessment of kindergartners, such as the EDI currently being conducted in Santa Monica.

**QUALITY:** The Planning Committee applauds First 5 LA for developing a Priority Focus Area with an emphasis on improving the quality of early care and education services through a uniform quality rating and improvement system (QRIS). In addition, we are pleased with the Priority Areas that focus on information about quality and the QRIS to parents, early care and education programs, and the general public. Yet, we think the strategy could go further by augmenting the Programmatic Strategy or adding to the Priority Activities listed under the Investment Area.

***Recommendations:***

- Support efforts to implement a countywide QRIS that is accessible to a larger population of early care and education programs beyond the Best Start communities.
- Serve as a “convener” to support alignment of the different quality rating systems in Los Angeles and movement towards a statewide QRIS. Key organizations to include are the Los Angeles County Office of Child Care, Los Angeles Universal Preschool (LAUP) and the Child Care Resource and Referral Agencies.

- Commit funding to support implementation of a uniform, countywide QRIS.

**WORKFORCE:** The Planning Committee appreciates the Commission's revision to the Early Care and Education (ECE) Emerging Programmatic Strategy "Strengthen the professional development system for early care and education providers", recognizing the diversity of the ECE workforce and their entry and exit points for preparing to enter the field and enhancing their knowledge and practice. The Planning Committee is sensitive to your difficult decisions between building the capacity of systems that educate and train new and existing early educators (center-based staff, family child care providers and license-exempt providers, e.g. family, friend and neighbor) and ensuring that the people entrusted with caring for and educating our youngest children have the necessary knowledge and skills with ample opportunities for supervision to reflect on and improve their practices.

As such, the Planning Committee proposes for your consideration additions to the investment areas as follows:

- Promote a career pathways or lattice approach to professional development, understanding that early educators new to and working in the field of early care and education enter and exit the educational and professional development system at various points from the onset and throughout their careers. The system should address the needs of the existing workforce as well as those preparing to enter the field with access to opportunities for formal education that includes degree attainment and practicum experiences as well as ongoing training and include supports such as mentoring, coaching and reflective supervision.
- Support a system that develops and bolsters the skills of coaches and mentors who work directly with early educators.
- Partner with the Commission on Teacher Credentialing to update the child development permit requirements with the goal of establishing strong standards for qualified professionals.
- Identify and support existing models addressing professional development, such as the Los Angeles Early Care and Education Workforce Consortium.
- Advocate for increased funding to ensure that compensation is commensurate with education/degree attainment, training and years of experience.
- Address the ongoing professional development needs of ECE managers and administrators to build their skills as coaches and mentors and foster their engagement in reflective supervision with their staff.

In closing, again we thank you for the opportunity to comment and appreciate your consideration of our recommendations. Furthermore, we welcome the opportunity to serve as a partner as you transition from planning to implementation. Should you have specific questions or would like to discuss the recommendations further, please contact Michele Sartell, Interim Child Care Planning Coordinator, by e-mail at [msartell@ceo.lacounty.gov](mailto:msartell@ceo.lacounty.gov) or by telephone at (213) 974-5187.

Yours truly,



Richard Cohen, Ph.D.

Chair

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Champions For Our Children  
www.First5LA.org

November 3, 2014

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A public entity.

Richard Cohen, Ph.D.  
Chair  
County of Los Angeles  
Child Care Planning Committee  
222 South Hill Street, 5<sup>th</sup> Floor  
Los Angeles, CA 90012

Dear Dr. Cohen and Committee Members:

Thank you for the thoughtful letter you sent providing input and recommendations on First 5 LA's emerging strategies and activities for the 2015-2020 Strategic Plan. We are currently finalizing the plan for final approval by the Board on November 13, 2014. After the approval, we will begin developing the more detailed implementation plan, consistent with Board policy direction and First 5 LA's fiscal realities. Many of the recommendations in your letter dovetail nicely with the work in this next phase and we look forward to continuing to work with the Child Care Planning Committee (CCPC) in the coming months. In the meantime, we wanted to share our initial responses to the Committee's recommendations:

ACCESS

- Recommendation:** Revise the Emerging Programmatic Strategy to exemplify the continuum of early learning that begins at birth rather than bifurcating infant/toddler care from preschool to ensure that the importance of the learning in the very early years of birth to three is acknowledged. As such, we suggest revising the language to read "Advocate for greater investments in quality early care and education for children zero to five." We recommend a similar revision to the Priority Activity listed under Public Policy and Advocacy, refraining from creating a false distinction between infant/toddler care and preschool.

*We agree that early learning occurs on a continuum from birth to age five. Within the Early Care and Education outcome area, we intentionally separated infant/toddler care and preschool because of a tendency for preschool to be prioritized when the two are combined. Given the significant lack of access to infant/toddler care, we believe it is important to call infant/toddler care out as a specific focus of First 5 LA's efforts moving forward.*



2. **Recommendation:** Articulate a definition of “actual cost” and its basis.

*The language we used in the emerging activity came directly from the Early Care and Education (ECE) Landscape report conducted by the Advancement Project. Currently, the full cost of providing care is not covered by subsidy reimbursement. Through our advocacy work with the CCPC and others, First 5 LA seeks to increase reimbursements to cover the true costs required to provide quality care.*

3. **Recommendation:** Revisit and expand upon the priority activity, “Support collective impact efforts to improve access to quality early care and education (e.g., the LA Compact and Campaign for Grade Level Reading)” as it is vague and the examples provided are not readily familiar to the field of early care and education. We recommend adding examples of recognizable organizations that may contribute to the collective impact effort.

*Collective impact is an approach to large scale social change that emphasizes broad cross-sector coordination to advance specific agreed-upon goals through mutually-reinforcing actions. It represents a model for social change that is gaining momentum across the country and offers, we believe, considerable promise to advance ECE goals in Los Angeles County. First 5 LA is currently involved in two collective impact efforts that are related to Early Care and Education (LA Compact and Campaign for Grade Level Reading). As we move forward with these efforts, and potentially others, we will seek involvement from important stakeholders, including the CCPC, in their broader development and implementation.*

4. **Recommendation:** Add a priority area in support of continuous eligibility for families with children enrolled in subsidized early care and education programs. Currently, parents are required to report all changes in family circumstances that may impact their eligibility, which may result in a disruption in the continuity/stability of the child and parent’s participation in the early care and education program.

*We understand is that currently there is policy work at the state and national level that may also impact eligibility. As we refine our policy agenda during implementation planning, we will explore how First 5 LA can contribute. We look forward to working with the CCPC on this matter.*

5. **Recommendation:** Clarify the relationship between access and implementing a kindergarten readiness assessment. We recommend a community wide assessment of kindergartners, such as the EDI currently being conducted in Santa Monica.

*First 5 LA shares the CCPC’s view that data is a critical foundation for policy and advocacy. We agree that having data on kindergarten readiness will support efforts to advocate for greater public investment in early care and education. The EDI is one of several kindergarten readiness assessments that we intend to examine during implementation planning. As we continue to develop and refine this area of work, we will coordinate with key stakeholders, including the CCPC.*

## QUALITY

1. **Recommendation:** Support efforts to implement a countywide QRIS that is accessible to a larger population of early care and education programs beyond the Best Start Communities.

*We share the CCPC's support for a countywide QRIS as an important strategy for improving ECE quality and empowering parental decision-making. The importance of this work was noted in an October 2013 feasibility report by the Los Angeles County Chief Executive Office on a countywide child care rating system, which highlighted the importance of establishing a comprehensive QRIS in the county, educating parents about the quality of child care programs, and working on state legislation.<sup>1</sup> Additionally, the ECE Landscape Report conducted by Advancement Project highlighted QRIS as an opportunity for First 5 LA to have a greater impact on ECE quality.*

*Through this strategy, First 5 LA seeks to engage partners to expand the scope of QRIS implementation. While First 5 LA intends to focus its work in this area, for reasons noted below, we have modified the activity language to reflect the potential to reach beyond Best Start Communities: **“Partner with other funders to support implementation of a QRIS that is accessible and easily understood by parents, providers, and the public to drive broader systems and policy change, with a priority focus on Best Start Communities.”** We will continue to explore the scope of implementation, but the rationale for focusing on specific geographic areas is that it offers the opportunity to:*

- *test the feasibility of reaching saturation in a given community*
- *test strategies to motivate providers to participate*
- *test strategies to inform/empower parents*
- *look at the relationship between quality as captured by QRIS and kindergarten readiness as measured by a kindergarten readiness assessment*
- *link workforce registry with QRIS in a given community*

2. **Recommendation:** Serve as a “convener” to support alignment of the different quality rating systems in Los Angeles and movement towards a statewide QRIS. Key organizations to include are the Los Angeles County Office of Child Care, Los Angeles Universal Preschool (LAUP), and the Child Care Resource and Referral Agencies.

*We agree with your recommendation that First 5 LA serve as a “convener” to support alignment of the different quality rating systems in LA County and movement towards a statewide QRIS. We will explore how First 5 LA can fulfill this role through our implementation planning and look forward to the CCPC's continued input.*

3. **Recommendation:** Commit funding to support implementation of a uniform, countywide QRIS.

*In partnership with others, First 5 LA plans to commit funding to support the implementation of a uniform QRIS in LA County. The reality of our fiscal picture means*

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<sup>1</sup> County of Los Angeles (October 2013). Feasibility Report on a Countywide Child Care Rating System (available at <http://ceo.lacounty.gov/ccp/pdf/Child%20Care%20Rating%20System-1%20bm-10-18-13.pdf>)

*that we cannot solely support a QRIS on a large scale. We will continue to further refine how we will implement this strategy, but our initial thinking is that there may be value in prioritizing one or more Best Start communities for the reasons outlined above.*

## WORKFORCE

1. **Recommendation:** Promote a career pathways or lattice approach to professional development, understanding that early educators new to and working in the field of early care and education enter and exit the educational and professional development system at various points from the onset and throughout their careers. The system should address the needs of the existing workforce as well as those preparing to enter the field with access to opportunities for formal education that includes degree attainment and practicum experience as well as ongoing training and includes supports such as mentoring, coaching, and reflective supervision.

*First 5 LA views the “professional development system” as inclusive of both the institutes of higher education as well as other training providers. We agree that the system should address the needs of the existing workforce as well as those preparing to enter the field. As we continue to develop First 5 LA activities through implementation planning, we will outline work to impact the system and improve the quality of professional development provided through education and training for the ECE workforce. The CCPC’s continued engagement and input is appreciated.*

2. **Recommendation:** Support a system that develops and bolsters the skills of coaches and mentors who work directly with early educators.

*As we further refine the professional development strategy in the implementation planning phase, we will identify opportunities to improve the system that supports those who provide coaching and mentoring to early educators and look forward to the CCPC’s input as we move forward.*

3. **Recommendation:** Partner with the Commission on Teacher Credentialing to update the child development permit requirements with the goal of developing strong standards for qualified professionals.

*Informed by further analysis and input, we broadened the activity language to include both modifications to the child development permit requirements as well as the ECE teaching credential. We see the Commission on Teacher Credentialing as a key partner in this work. First 5 LA’s work in this area will be developed further during implementation planning.*

4. **Recommendation:** Identify and support existing models addressing professional development, such as the Los Angeles Early Care and Education Workforce Consortium.

*Consistent with Board direction, First 5 LA will emphasize strategies and activities that maximize impact through systems and policy change. To accomplish this, First 5 LA will build upon the relationships and momentum that have been established through many efforts across the county, including the Los Angeles Early Care and Education Workforce Consortium.*

5. **Recommendation:** Advocate for increased funding to ensure that compensation is commensurate with educations/degree attainment, training, years of experience.

*First 5 LA recognizes that compensation is a major issue that needs to be addressed within the ECE field. We also recognize that to be effective we have to have focus and develop strategies and activities that we believe are achievable within the 5 years of the 2015-20 plan. We will engage in policy and advocacy work to improve access to quality ECE. We will further explore the role compensation plays in improving access.*

6. **Recommendation:** Address the ongoing professional development needs of ECE managers and administrators to build their skills as coaches and mentors and foster their engagement in reflective supervision with their staff.

*Consistent with Board direction, First 5 LA will emphasize strategies and activities that maximize impact through systems and policy change. First 5 LA appreciates the importance of ECE managers' and administrators' skills to implement strong ECE programs. Given our focus on systems and policy change, we will not directly fund professional development services and supports outside of the QRIS strategy. We look forward to the CCPC's input as we move forward with implementation planning.*

We hope that these initial responses to your recommendations demonstrate our commitment to collaboration and learning. Should you have any questions or would like to discuss our responses further, please contact Jessica Kaczmarek, Director of the Office of Strategic Planning and Implementation, by email at [jkaczmarek@first5la.org](mailto:jkaczmarek@first5la.org) or (213) 482-7552. We look forward to continuing to work with the Child Care Planning Committee as we further develop and implement the 2015-2020 Strategic Plan.

Sincerely,



Kim Belshé  
Executive Director

KB:kf,ao

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## COUNTY OF LOS ANGELES



POLICY • PLANNING • PRACTICE

### **Meeting Minutes – October 1, 2014**

**Members in Attendance:** (30) Rocio Bach, Alicia Fernandez for Ana Campos, Edilma Cavazos, Richard Cohen, Kevin Dieterle for Debra Colman, Dania Molina for Mona Franco, Edith Garcia, Terri Johnson, Andrea Joseph, Jennifer Kuida, Terri Lamb, Ritu Mahajan, Liliana Martinez, Flor Medrano, Pat Mendoza, Melissa Noriega, Laurel Parker, Dianne Philiposian, Joyce Robinson, Ancelma Sanchez, Judy Sanchez, Kathy Schreiner, Janet Scully, Fiona Stewart, Dean Tagawa, Holli Tonyan, Truyen Tran, Jenny Trickey, JoAnn Shalhoub-Mejia, and Lisa Wilkin

**Guests and Alternates:** Carlos Agreda, Glenda Colon, Lynn Colvin, Eileen Friscia, Lupe Granados, Sharon Greene, Alexandra Izaguirre, Karla Pleitez Howell, Laura James, Pamela Kwok, Teresa Nuno, Aimee Loya Owens, Devon Minor, Leora Riley, Moises Roman, and Christine Wilson

**Staff:** Michele Sartell

#### **I. Welcome and Introductions**

Richard Cohen, Chair, opened the meeting at 12:07 p.m. He welcomed members and guests and requested self-introductions.

Richard commented that the meeting would provide an opportunity to build connections between the work of the Child Care Planning Committee (Planning Committee) work and efforts underway at First 5 LA to craft a new five year Strategic Plan. He noted that First 5 LA is looking to maximize its funding to best meet needs of children and families and contribute to their overall well-being. He then thanked the Los Angeles County Office of Education (LACOE) for hosting the meeting and read the opening statement. Following introductions, Richard reflected on the range of representation, which he anticipated would enrich the small group conversations later in the agenda.

#### **II. Approval of Minutes**

*The Chair called for a motion to approve the minutes from September 3, 2014. Lisa Wilkin made the motion to approve; the motion was seconded by Kathy Schreiner. The motion passed by the members present with three abstentions from Laurel Parker, Holli Tonyan and Truyen Tran.*

#### **III. Annual Self-Evaluation**

Ancelma Sanchez and JoAnn Shalhoub-Mejia, Co-chairs of the Governance Work Group, presented the self-evaluation to the membership for approval. The self-evaluation, reviewed and prepared by the Governance Work Group, is due to the California Department of Education/Early Education and Support Division by November 14, 2014.

*The Chair called for a motion to approve the self-evaluation. Lisa Wilkin made the motion to approve; the motion was seconded by Kathy Schreiner. The motion passed unanimously by the members present.*



#### **IV. First 5 LA Strategic Plan**

##### **A. Overview**

Karla Pleitez Howell, the Planning Committee's representative to the Policy Roundtable for Child Care and Development (Roundtable) and the Roundtable's representative to the First 5 LA Commission, introduced Teresa Nuno, Acting Chief of Programs and Planning at First 5 LA and Aimee Loya Owens, Program Office with Community Investments and a member of the Strategic Plan team. Karla provided an overview of the purpose and intended outcome for this agenda item and then gave an overview of where First 5 LA is in its strategic planning process to date. First 5 LA initiated strategic planning in the beginning of the year and plans to approve it by early November. To date, many high end decisions have been made, offering little room for comment. Community input is underway with First 5 LA seeking ideas on potential collaboration and partnerships for implementing the plan. Richard added that built into the meeting agenda is an opportunity for members and others to chew on Strategic Plan components specific to early care and education, develop recommendations, and consider participating in the upcoming community meetings.

Teresa Nuno relayed that she was stepping in for Jessica Kaczmarek who is lead staff on the development of the strategic plan, with Aimee Owens serving as her "right hand". Teresa directed members, alternates and guests to her PowerPoint, providing an overview of the process beginning with the timeline or roadmap. First 5 LA is in the last stretch with several activities and actions to occur in the near horizon. The Commission Board is expected to adopt their new mission statement and values at the October meeting and then the Strategic Plan at their November meeting. *(Author's note: the Board at their October meeting proposed some revisions to the mission statement, subsequently postponing approval of these items to their next meeting.)*

Teresa touched upon First 5 LA's experiences to date that are informing current planning, helping to clarify and sharpen their focus. First 5 LA has made difficult choices while staying committed to its framework for building stronger families and place-based work. Informing their work and conversations with the community is building awareness of First 5 LA's long term financial projection, which graphically illustrates diminishing revenues and the potential for their expenditures to quickly outpace revenue. In fact, in the early years First 5 LA was receiving \$164 million per year; revenues have declined to approximately \$90 million per year due to a reduction in smoking, rising sales of tobacco products on the black market, and declining birth rates. Consequently, First 5 LA is seriously looking at new, bigger impact opportunities and sustainability as they work on program goals.

The remainder of Teresa's presentation covered decisions made on: First 5 LA's Strategic Imperative; six levers for having the broadest impact on the well-being of children, families and communities; vision, outcomes, goals and ultimate impact; and priority focus areas (see PowerPoint for detail available at [http://cao.lacounty.gov/CCP/pdf/CCPC\\_MeetingMaterials\\_1Oct14.pdf](http://cao.lacounty.gov/CCP/pdf/CCPC_MeetingMaterials_1Oct14.pdf)). With respect to the outcome area for early care and education, informing the priority focus areas and emerging programmatic strategies – access, workforce and quality – is the ECE Landscape report that was conducted by the Advancement Project. She concluded her comments by encouraging members, alternates and guests to attend any one of the five community meetings.

Karla thanked Teresa and Aimee for the overview and then reviewed the instructions for the work group discussions that were included in the meeting packets. Additional reference materials include "First 5 LA Strategic Plan FY 2015-2020: Focusing for the Future – Emerging Programmatic Strategies, Priority and Supplementary Activities, and Role" pages related to the early care and education outcome area. Karla noted that October is the last month for the community to weigh in. She suggested that the Planning Committee is uniquely positioned to share expertise on policy and

systems issues relating to early care and education. As such, the break outs would focus on access, workforce and quality contained in the early care and education outcome areas. As next steps, Karla and Michele Sartell, staff to the Planning Committee will synthesize the recommendations into a letter to be submitted to Kim Belshé, Executive Director of First 5 LA with copies to Teresa and Jessica. Members interested in reviewing a draft of the letter were invited to make that known to Karla and/or Michele, understanding that the turnaround time for review would be brief. The goal is to send the letter by early in the week of October 6<sup>th</sup>.

## **B. Small Work Group Discussions**

Members, alternates and guests joined one of the three Planning Committee Work Groups – Access/Inclusion, Quality and Workforce – and had approximately 20 minutes to review and develop recommendations

## **C. Full Planning Committee Discussion**

The following is a brief summary of the work group reports as presented at the meeting. (*Author's note: A copy of the letter submitted to First 5 LA on October 9, 2014 reflecting each work group's recommendations was sent via e-mail to members and alternates and the notes from the discussions have been provided to the respective work group members.*)

### Quality –

- Support implementation of a uniform quality rating and improvement system (QRIS) – the current challenge is more than one system, each with benefits, however, not all early care and education programs are eligible to participate
- Involve key organizations to participate in aligning the system
- Information on the QRIS needs to reach parents

### Access –

- Support priority focus area; improved access to affordable, quality early care and education is critical
- Do not create a division between infant and toddler and preschool age services; rather focus on the continuum of early care and education for children from birth to five years
- Advocate for higher reimbursement rates, and define “actual cost”
- Clarify the connection between kindergarten assessment and access and use examples that are more familiar to the field

### Workforce –

- Improve practice through academia as well as more informal professional development opportunities
- Adopt a pathways or lattice approach to professional development that is sensitive to how persons new to and working in the field enter and exit educational and professional development system
- Support a system that is inclusive of training, coaching and mentoring
- Advocate for compensation commensurate with education and training
- Work with existing systems such as the Child Development Training Consortium and Commission for Teacher Credentialing to ensure relevance and build the capacity for a qualified workforce
- Encourage other funders to invest in the workforce

Karla reflected on a couple of themes she heard from the reports that will be noted in the letter. First is a level of frustration with First 5 LA in their direction away from funding direct services. Second, as expressed by the Workforce Work Group, is the challenge of separating direct service work from system improvement. Both Karla and Richard thanked members, alternates and guests for their work.

**V. Announcements and Public Comment**

- Devon Minor of the Advancement Project announced that the next quarterly water cooler meeting is scheduled for October 30<sup>th</sup> in Sacramento. Information has been forwarded via e-mail. Planning for the annual conference scheduled for March 23-24, 2015 is underway and also will be held in Sacramento.

**VI. Adjournment**

*The Chair called for a motion to adjourn. Lisa Wilkin made the motion; Jenny Kuida seconded the motion. The meeting was adjourned at 2:00 p.m.*



## **Child Care and Development Block Grant Act of 2014: Summary**

September 19, 2014

In September, the House and Senate reached a bipartisan agreement on a bill reauthorizing the Child Care and Development Block Grant and the House voted to approve it. The Senate is scheduled to vote on the measure on November 13 when they return from the recess. The bill, which would reauthorize the primary federal child care program for the first time since 1996, is aimed at ensuring the health and safety of children in child care, facilitating families' access to child care assistance, and improving the quality of child care for children, and for infants and toddlers in particular.

The legislation is largely similar to the bill that the Senate passed in March 2014, but differs in a few key respects. The bill to be voted on this week reserves a lower percentage of funding for quality improvement activities than the Senate bill in the fifth and subsequent years (although the percentage is still higher than the current set-aside); expands permissible methodologies for setting provider payment rates; adds inspection requirements for license-exempt child care providers; adds provisions encouraging states to reimburse providers when children are absent from child care and take steps to reduce the expulsion of children from child care programs; requires training for providers on business practices; and sets fixed funding levels for fiscal years FY 2015 to FY 2020 (in contrast to the authorization of "such sums as are necessary" to carry out the Senate bill). The authorization levels are: \$2.36 billion for FY 2015, \$2.48 billion for FY 2016, \$2.54 billion for FY 2017, \$2.60 billion for FY 2018, \$2.67 billion for FY 2019, and \$2.75 billion for FY 2020.

As modified by the House, the legislation:

- Improves the health and safety of children in child care settings by:
  - Requiring a pre-licensure inspection and an unannounced annual inspection for all regulated and licensed providers receiving CCDBG funds, and one annual inspection for license-exempt providers (except providers related to all children in their care) receiving CCDBG funds.
  - Requiring a sufficient number of licensing inspectors to enable states to conduct timely inspections.
  - Requiring states to make public the results of monitoring reports.
  - Requiring states to provide comprehensive consumer education on parents' child care options and the quality of child care as well as the availability of child care assistance and other early learning programs.
  - Requiring states to provide information about how families can obtain a developmental screening for their children.

- Requiring states to mandate training on health and safety for child care providers serving children receiving CCDBG assistance.
- Requiring child care providers serving children receiving CCDBG assistance to have pre-service and ongoing training in a number of areas, including safe sleep practices and preparation for emergencies and disasters.
- Requiring all employees of child care providers receiving CCDBG assistance to undergo comprehensive background checks prior to employment and to maintain employment. Providers who are related to all children in their care are not required to undergo these checks.
- Improves families' access to child care and to child care assistance and increases stability for children in child care by:
  - Establishing a minimum initial eligibility period of 12 months.
  - Requiring states to make efforts to ensure that the redetermination process does not unduly disrupt parents' work, education, or job training efforts.
  - Requiring states to demonstrate how processes for eligibility determination and redetermination take into account irregular fluctuations in earnings.
  - Requiring states to describe how they will increase the supply and improve the quality of care for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours.
  - Encouraging states to maintain child care assistance for at least three months when a family experiences a job loss to facilitate the parent's return to work.
  - Requiring states to use at least 70 percent of CCDBG funding for direct services.
  - Requiring states to certify that payment practices for child care providers serving children who receive CCDBG assistance reflect generally accepted payment practices for providers serving children who do not receive such assistance, and assure that, to the extent practicable, they will implement enrollment and eligibility policies that delink CCDBG provider reimbursement rates from an eligible child's occasional absences (due to, e.g., holidays or illness). The bill allows states to set maximum reimbursement rates using a market rate survey or an alternative methodology developed by the state's lead agency, such as a cost estimation model.
  - Requiring the Comptroller General to conduct a study of families on states' waiting lists for child care assistance every two years.

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- Strengthens the quality of child care by:
  - Increasing the total amount of CCDBG funding that states must spend on quality improvement activities by requiring states to set aside 7 percent of their CCDBG funds for quality improvement activities in the first and second fiscal years after the bill is enacted; 8 percent in the third and fourth fiscal years; and 9 percent in the fifth and subsequent fiscal years.
  - Requiring that at least 3 percent of a state’s funding be used for quality improvement activities for infants and toddlers (beginning with funds received in the second full fiscal year after the bill’s enactment).
  - Identifying a series of recommended quality improvement activities, from which states must choose at least one to expend set-aside funds. Specified activities include, for example, development of a tiered quality rating system and activities to enhance professional development for child care providers, such as training on behavior management strategies to reduce challenging behaviors (including reducing expulsions of preschool-aged children for such behaviors).
  - Requiring states to set training requirements that enable child care providers to promote the social, emotional, physical, and cognitive development of children.
  - Requiring that states’ training requirements are appropriate for different age groups, English learners, children with disabilities, and Native Americans.
  - Requiring states to develop a progression of professional development designed to improve the skills and knowledge of the workforce.
  - Requiring states to develop and implement strategies to strengthen the business practices of child care providers to expand the supply, and improve the quality of, child care services.
  - Reserving up to ½ of 1 percent of CCDBG funding for technical assistance, and up to an additional ½ of 1 percent to support research, demonstration and evaluation activities.
  
- Improves the coordination of early care and education by:
  - Requiring states to coordinate CCDBG with other early childhood programs to the extent practicable, including preschool programs and early childhood programs serving tribal communities, infants and toddlers with disabilities, homeless children, and children in foster care.

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## **POLICIES AND PROCEDURES**

### **I. Standard Operating Procedures**

Anything not covered by the following policies and procedures will revert to Robert's Rules of Order.

### **II. Membership**

#### **RECRUITMENT OF CHILD CARE PLANNING COMMITTEE MEMBERS**

The Governance Work Group of the Child Care Planning Committee (Planning Committee) will conduct recruitment in support of the recommending/appointing bodies, and in compliance with the membership categories defined in the *Education Code Sections 8499 - 8499.7*. To ensure optimal representation and access to this process, recruitment and outreach will be undertaken no less than three (3) months prior to the selection of members. Recruitment and selection will take into consideration geographic and ethnic representation, and will ensure that there will be at least one (1) member from each of the Service Planning Areas:

- Diversity within each category will be a primary consideration in the selection of members. For example, in the "Child Care Providers" category, every effort will be made to include representatives of programs operated under a variety of auspices (public, non-profit, for-profit, church-related, cooperatives, family child care, resource and referral/alternative payment programs, etc.).
- Appropriate nominating groups will be designated for each of the membership slots. Each of the five Board of Supervisors will name one member. The Superintendent of the County Office of Education will recruit members through local School District Superintendents.
- Prospective members will be asked to identify any family members serving on the Planning Committee. In the event that multiple family members are seeking to serve on the Planning Committee, the Governance Work Group will consider the Planning Committee's commitment to diversity, the skills of each member, and ability of each individual to contribute to the mission of the Planning Committee.
- The Governance Work Group will review the membership applications in consultation with the Child Care Planning Coordinator and recommend a membership slate to the Planning Committee for action. Any participant of the Governance Work Group who is being considered for membership cannot participate in the discussion of a membership roster or the final recommendations for membership that will be forwarded to the full Planning Committee. This includes alternates who have applied to become members and members whose first three year term is expiring and wish to extend their membership for another three year term.
- Nominees will be presented for appointment before September of each year.

## **ALTERNATES**

Each member will name an alternate to serve in his/her absence, and will give Planning Committee staff the alternate's name and contact information (address, telephone number, e-mail address, etc.). The member is responsible for maintaining communication with the alternate regarding the business of the Planning Committee and for ensuring that the alternate is available to attend meetings. Alternates are encouraged to attend and participate in discussions at all Planning Committee and Work Group meetings. In the absence of the member, the alternate will be entitled to vote.

If a member chooses to identify different persons to serve as his/her alternate for the Planning Committee and for a Work Group, it is the member's responsibility to provide Planning Committee staff the appropriate information on both alternates.

## **TERMS OF OFFICE**

Members will serve three-year terms, and may serve for up to two (2) consecutive three-year terms without a break. Former members will be eligible for re-nomination after a one (1) year hiatus.

An individual's term of membership may be terminated prior to the end of three (3) years due to: changes in employment or residence; conflict of interest issues; excessive absence (see II. Attendance and Participation); or other changes in status that affect the member's representation on the Planning Committee. When this occurs, the individual designated as the member's alternate will no longer serve in this capacity.

Members designated by a Board Office serve at the discretion of the Board members who designated them and may do so beyond the six year limit. A member designated by a Board office may be replaced under the following conditions: 1) the choice of the Supervisor; 2) the resignation or retirement of the Supervisor from the Board; or 3) the unsatisfactory participation of the designated member in which case the procedure described in Section III is implemented.

## **OFFICERS**

There are two (2) Officers of the Planning Committee: Chair and Vice Chair.

The term of the Chair will be two (2) years. If the Chair's membership term expires during his or her term as Chair, the membership term will be extended through the completion of term of office.

The Chair of the Planning Committee shall: 1) Chair the Planning Committee meetings; 2) help develop the agenda for each meeting; 3) sign all documents related to contracts with the California Department of Education, Board letters related to Planning Committee business, and other correspondence deemed appropriate; 4) serve as the Committee's representative to the Chief Executive Office on matters related to staff selection; and 5) represent the Planning Committee on the Policy Roundtable for Child Care and Development.

### **Election of Chair**

Every two years, or in any year in which the Chair position is vacant, at the time of new member recruitment, the nominating process will begin. Members will be given nomination forms describing the role, responsibilities, and qualifications for Chair. To qualify to be nominated for

Chair, a member must have served on the Planning Committee for at least one year within the last five (5) years and have been actively participating through attendance at both Planning Committee and Work Group meetings. Members may nominate themselves or other Planning Committee members.

Nominations will be open throughout the period of membership recruitment. All nominees will be contacted to ascertain their interest in serving as Chair. The names of all nominees who agree to have their names brought forward will be presented to the full membership prior to the meeting at which the membership slate is approved. The election of the Chair from among those nominated will take place at the same meeting as the approval of the membership slate.

### **Election of Vice Chair**

The term of office for the Vice Chair will be one (1) year with a one year renewable term upon election.

The Vice Chair shall chair the meetings in the absence of the Chair. In the event that the Chair cannot fulfill his/her term, the Vice Chair will step in to fulfill the role of Chair for the remainder of the Vice Chair's term. In his/her capacity as acting Chair, the Vice Chair may appoint, from among actively participating members, an interim Vice Chair for the remainder of the Vice Chair's term.

Every year, at the time of new member recruitment, members will be given nomination forms for the position of Vice Chair. To qualify to be nominated for Vice Chair, a member must have served on the Planning Committee for at least one year within the last five years and have been actively participating through attendance at both Planning Committee and Work Group meetings. Members may nominate themselves or other Planning Committee members.

Nominations will be open throughout the period of membership recruitment. All nominees will be contacted to ascertain their interest in serving as Vice Chair. The names of all nominees who agree to have their names brought forward will be presented to the full membership prior to the meeting at which the membership slate is approved. The election of the Vice Chair from among those nominated will take place at the same meeting as the approval of the membership slate.

### **III. Attendance and Participation**

Although a quorum is constituted by 50 percent of the current membership, members are expected to attend all Planning Committee meetings, or arrange for an alternate to attend. All member(s) and their alternate(s) must sign the attendance roster provided for each Planning Committee meeting and each Work Group meeting.

### **ABSENCES**

Members may be absent from no more than three (3) consecutive Planning Committee meetings or three (3) consecutive Work Group meetings. To be considered absent from a meeting, neither the member nor his/her alternate would be present. After the second consecutive absence, the Planning Committee staff may contact the absent member. After the third consecutive absence, a letter will be sent from staff to the appointee notifying him/her of his/her termination from the Planning Committee. Termination from the Planning Committee does not prohibit participation as a guest.

Exceptions to this termination process are members who have been specifically appointed by the Board of Supervisors or by the Los Angeles County Superintendent of Schools. In these cases, Planning Committee staff will contact staff of the Board Office or the Los Angeles County Superintendent of Schools to recommend termination and to consult with them.

## **WORK GROUP PARTICIPATION**

Participation in at least one (1) Work Group is required of all members. All members must choose their Work Group by the second Planning Committee meeting following the orientation of new members. Failure to attend any Work Group by the third Planning Committee meeting following the orientation meeting will be recorded as an absence. A member may change his/her Work Group by notifying the staff of the Planning Committee and the Chair(s) of the Work Group, which he/she is leaving.

In order to remain on the Planning Committee, a member or his/her alternate can miss no more than three (3) consecutive meetings of the Work Group. (Please see Absence provision.)

Work Group participation is open to any interested individuals regardless of membership status. However, the Governance Work Group is limited to only members and alternates.

## **IV. Voting**

### **QUORUM**

For the purposes of voting, a quorum will be deemed to be 50 percent of the current membership.

### **ACTION ITEMS**

Action Items are routine or extraordinary actions or decisions related to the functions and purposes of the Planning Committee that require a vote of approval from the Planning Committee. Approval of Planning Committee minutes are action items at each meeting. Changes to Planning Committee structure or to the Policies and Procedures are action items.

A vote must be taken by the Planning Committee on items that are child care policy positions, or are related to the mandated functions of the Planning Committee. The Planning Committee will take action on the following mandated functions: 1) service priorities for State-funded child development services; 2) Countywide Needs Assessment; 3) Centralized Eligibility List;<sup>1</sup> and 4) a comprehensive countywide plan for child care and development services.

All action items must be listed on the publicly posted agenda at least three (3) days prior to the scheduled meeting date (see Brown Act Provision). Action items initiated by Work Groups must be forwarded to staff at least two (2) weeks before the date of the meeting on which agenda the action item should appear.

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<sup>1</sup> Funding for countywide centralized waiting lists (CEL) was eliminated from the 2011-12 State budget. Nevertheless, references to the CEL remain in statute.

## **ROLE OF WORK GROUPS**

Work Groups are formed to conduct the business of the Planning Committee, implement the Strategic Plan for Child Care and Development, and fulfill other mandates for Local Planning Councils as stated in the Education Code. In the course of its efforts, a Work Group of the Planning Committee may develop a policy, make a recommendation, plan an event requiring Planning Committee resources, or seek to ensure Planning Committee representation in other groups. The full Planning Committee must be informed of the decisions and recommendations of each Work Group. The full Planning Committee may request that a particular policy statement or activity be presented to the Planning Committee for approval. The following types of action, including but not limited to recommendations for positions on legislation, for changes in the Policies and Procedures, and for activities requiring substantial expenditure of Planning Committee funds, will be brought before the full Planning Committee for a vote. This applies to both standing and ad hoc Work Groups.

## **CONFLICT OF INTEREST**

No member of the Planning Committee will participate in a vote if he/she has a proprietary interest in the outcome. For the purpose of this provision, a person with a proprietary interest is defined as one who may benefit financially from a decision of the Planning Committee; or who is employed by, acts as a paid consultant to, or functions in a decision-making capacity with any agency, which stands to gain directly and financially from an action of the Planning Committee. In case of a potential conflict, the member (or alternate) must refrain from participating in the discussion of the issue after they publicly identify their interest and must recuse themselves from any vote taken on the issue.

Before discussion and voting, members will be reminded of their responsibility to assess the potential for conflict of interest. Members are required to declare their affiliations on the membership application. In case of challenge, the membership applications will be reviewed.

## **VOTING ON MOTIONS**

Each member of the Planning Committee shall be entitled to one vote on each action item before the Planning Committee. If the member is absent, the alternate to the Planning Committee may vote in the place of the member. There will be no secret ballots or absentee voting on any Planning Committee action items, including election of officers. The Chair, or any other member, may request a roll call vote on specific motions. A record of roll call votes shall be kept by Planning Committee staff and be included in the minutes.

A motion will be considered as “passed” when a simple majority of the members present vote in the affirmative. Abstentions are not considered votes and are therefore not counted as support for the motion. A motion which results in a tie vote does not pass.

## **V. Staff Selection**

At the time that a new staff position opens or a current position becomes available in the Office of Child Care, and these positions work directly with the Planning Committee, a representative of the Planning Committee will be part of the interview panel for each position. Members of the Governance Work Group will serve as the pool from which members will be called upon to serve on interview panels. The Chair of the Planning Committee has the discretion to serve on

interview panels or can call for additional or alternate representation as needed from among active Planning Committee members.

## **VI. Complaint Procedure**

Any complaint by a member of the Planning Committee or any other person regarding any action, policy, or procedure of the Planning Committee may be addressed through the following steps:

- 1) The complaint/concern should be brought to the attention of the Planning Committee staff in writing. The staff will respond to the complaint and/or provide a response to the complaining party within 14 working days.
- 2) If the staff is unable to resolve the complaint, the written complaint will be forwarded to the Membership and Policies Work Group for review. The Work Group will review the complaint and may or may not, at the Work Group's discretion, meet with the complaining party. The Work Group will respond to the complaint within 30 calendar days from receipt of the written complaint.
- 3) If the Work Group's response is not satisfactory to the complaining party, he/she may submit the complaint to the Board of Supervisors and County Superintendent of Schools for a response.

## **VII. Amendments to the Policies and Procedures**

Amendments to this document can be considered at any time by members of the Planning Committee or as the result of periodic review by the Governance Work Group. Members of the Planning Committee may submit a written inquiry regarding the Policies and Procedures to the Co-chairs of the Governance Work Group at any time. The Work Group will review each written inquiry and issue a written response within thirty (30) days of receipt of the inquiry. All written inquiries and their disposition will be recorded in the Governance Work Group's report to the full Planning Committee.

The Governance Work Group will review the Policy and Procedures every two years to determine if clarification or changes are required. The Policy and Membership Work Group may develop an amendment or new policy language and bring it forward to the full Planning Committee as an action item at any time.

## **VIII. Compliance With Brown Act**

The Planning Committee will comply with the Brown Act. All Planning Committee meetings are open to the general public. Agendas for Planning Committee meetings will be posted publicly three (3) days prior to the meeting. No action item will be undertaken at any Planning Committee meeting unless it has been listed on the publicly posted agenda.

Adopted by the Committee:	July 1, 1998
Updated:	December 4, 2002
Updated:	April 4, 2003
Updated:	March 6, 2004
Updated:	March 11, 2005
Updated:	June 1, 2005
Updated:	May 3, 2006
Updated:	December 3, 2008
Updated:	December 1, 2010
Updated:	May 2, 2012
Updated:	November 5, 2014

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**Home Visitation: Contributing to the Well-Being of Children and Their Families**

Child Care Planning Committee  
November 5, 2014

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**What is Home Visitation?**

A program strategy with services delivered primarily in the home that:

(1) is offered on a **voluntary** basis to pregnant women and/or families with children up to the age of 5;

(2) provides a **comprehensive array of services** that promote parent and child health, parental attachment, competence and self-sufficiency, and optimize infant/child development by building positive relationships with families and optimizing nurturing relationships between parents and children; and

(3) is **designed to promote specific outcomes** which may include: healthy pregnancy, birth, and infancy; optimal infant/child development; school readiness; and to prevent of adverse childhood experiences

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**Attributes for Successful Programs**

- **Collaboration with families, rather than imposition of a defined program**
- **Establishment of relationships of trust and respect between staff and families**
- **Strengths-based**
- **Comprehensive & Family Centered-Responsive services**
- **Staff who are highly skilled, well-trained, well-supported and sensitive**
- **Welcoming climate**

Fenichel E. Zero to Three/ Nat'l Center for Clinical Infant Programs' Work Group on Supervision and Mentorship p. 33

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### Home Visitor Activities

- Outreach and Recruitment
- Engagement
- Assessments (Health, Nutritional, Behavioral Health, Reproductive plans, Social support, Infant/ Child development)
- Family goal planning
- Education & Health Promotion (Family planning, Healthy behaviors, Home Safety, BF)
- Early Learning and Infant Development
- Social Support (emotional & tangible)
- Linkage to Community Resources (Basic needs, education, employment, healthcare, social care)

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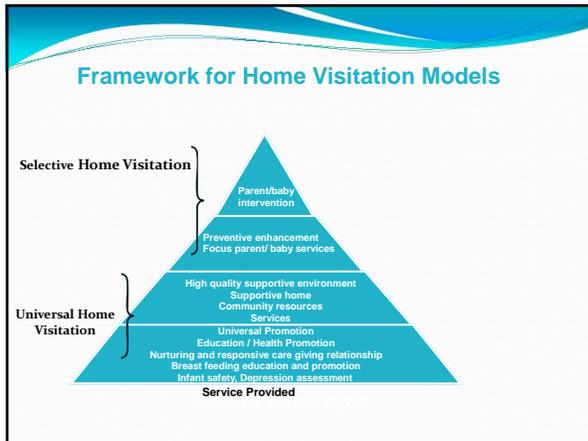
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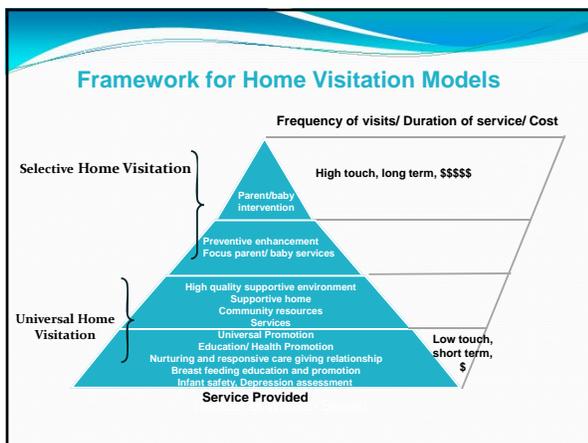
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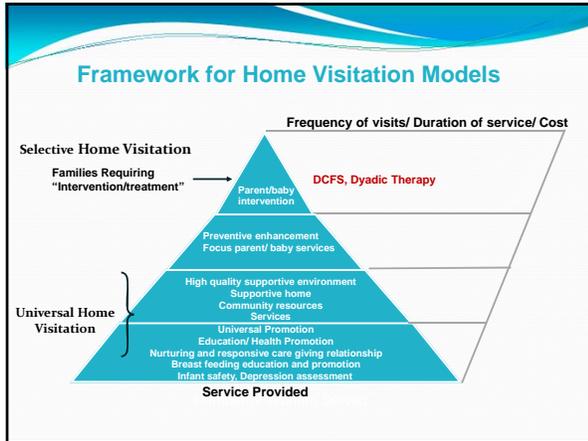
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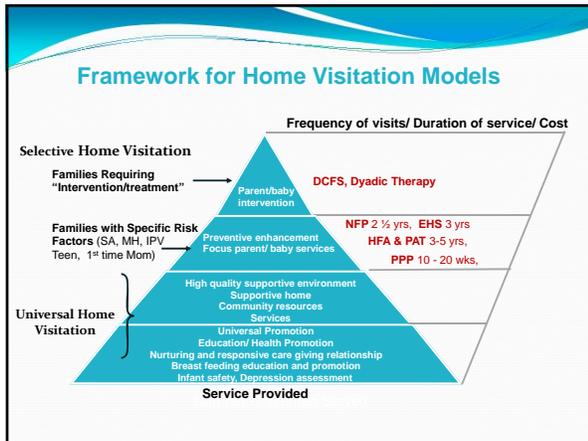
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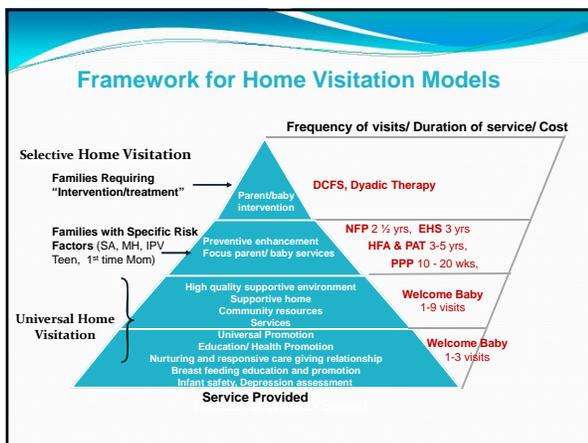
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### Los Angeles Home Visiting Programs

Select Home Visiting

- MIECHV (Affordable Care Act) & LAC-DPH
  - HFA in Antelope Valley
  - NFP county-wide: LAUSD and LAC-DPH & Long Beach DPHS
- First 5 LA Funding-Best Start Communities
  - HFA: 13 agencies across the county
  - PAT: 11 agencies across the county
  - PPP: 1 agency in San Fernando Valley

Treatment-Based Home Visitation Program

- DMH Funding for Triple P

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### Los Angeles Universal Home Visiting Program

- First 5 LA Funding-Welcome Baby
  - Best Start- Prenatal through age 9 months
  - Non-Best Start- Hospital through age 2 months



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### Home Visiting Capacity

- NFP ~ 1100 families
- First 5 LA HV Programs ~ 3,000 families
- Welcome Baby ~ 34,300 families



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**LOS ANGELES COUNTY PERINATAL  
AND EARLY CHILDHOOD  
HOME VISITATION CONSORTIUM**

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**LA PERINATAL AND EARLY CHILDHOOD  
HOME VISITATION CONSORTIUM**  
**VISION**  
All expectant and parenting families in Los Angeles County have access to quality in-home support delivered by well trained, culturally sensitive individuals to promote optimum health, safety, and child development, and strengthen family functioning, resiliency and self-sufficiency.

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**The Work**

- **Los Angeles County Home Visitation Policy Brief**
  - **7 Recommendations for a Sustainable Integrated Home Visitation System**
- **Perinatal Home Visitation Services: An Overview of the Landscape in Los Angeles County, June 2013**



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Questions?



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Thank You !



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## HOME VISITATION PROGRAMS IN LOS ANGELES COUNTY

	Early Head Start	Healthy Families America (HFA)	Parents As Teachers (PAT)	Positive Parenting Practices (PPP)	Nurse-Family Partnership (NFP)	Welcome Baby
<b>Description</b>	Evidence-based, nationally recognized, comprehensive early education program for low-income pregnant women and infants and toddlers from age's prenatal to three, including young children with disabilities.	Evidence-based, nationally recognized home visiting program model designed to work with overburdened families who are at-risk for child abuse and neglect and other adverse childhood experiences. It is the primary home visiting model designed to work with families who may have histories of trauma, intimate partner violence, and mental health and/or substance abuse issues. HFA services are voluntary, intensive and long-term (up to 3 to 5 years after the birth of the baby).	Evidence-based, nationally recognized home visiting and parents group program designed to: <ul style="list-style-type: none"> <li>▪ Increase parent knowledge of early childhood development and improving parenting practices</li> <li>▪ Provide early detection of developmental delays and health issues</li> <li>▪ Prevent child abuse and neglect</li> <li>▪ Increase children's school readiness and school success</li> </ul>	Evidence-based, nationally recognized program with differing levels of service based on families' needs and designed to: <ul style="list-style-type: none"> <li>▪ Promote the independence and health of families through enhancement of parents' knowledge, skills and confidence</li> <li>▪ Promote development of non-violent, protective, and nurturing environments for children</li> <li>▪ Promote development, growth, health and social competence of young children</li> <li>▪ Reduce the incidence of child maltreatment, behavioral and emotional problems in childhood and adolescence, delinquency, substance abuse, and academic failure</li> <li>▪ Enhance competence, resourcefulness, and self-sufficiency of parents in raising their children</li> </ul>	An evidence-based, nationally recognized community health program. Outcomes include long-term family improvements in health, education, and economic self-sufficiency. By helping to break the cycle of poverty, NFP plays an important role in helping to improve the lives of society's most vulnerable members, build stronger communities, and leave a positive impact on this and future generations.	Evidence informed, universal program to provide family support prenatally, in the hospital after birth, and postpartum. Families benefit in different ways, based on where they live and their needs. The goals of Welcome Baby are: <ul style="list-style-type: none"> <li>• Promote overall health and wellness during pregnancy and the first year of life</li> <li>• Enhance the capacity of parents to nurture and care for their very young children through greater understanding of their physical and emotional development</li> <li>• Increase exclusive breastfeeding</li> <li>• Ensuring that children have health care coverage and a medical home</li> <li>• Assisting new parents in achieving a safe and nurturing home environment</li> <li>• Enhancing existing community network of services and fostering community relationship.</li> </ul>
<b>Eligibility</b>	Family income below the federal poverty level (FPL) (\$19,790 for a family of three). Children in foster care, experiencing homelessness or with families receiving public assistance automatically eligible. May serve families up to 130% of FPL if space is available. Eligibility based on annual income.	Pregnant women or new parents within two weeks of birth.  <i>In LAC-Timing for enrollment varies with funding stream.</i>  Based on standardized risk assessment score, and location of residence.	Pregnant women and families with children up to kindergarten entry.  <i>In LAC- Timing for enrollment varies with funding stream.</i>  Based on standardized risk assessment score and location of residence.	Provides a variety of levels of services for families with children ages 0-16.  Triple P (Level 2): designed for parents of children with mild behavioral difficulties.  Primary Care Triple P (Level 3): for parents of children with mild to moderate behavioral difficulties.  Group Triple P (Level 4): for parents of children with moderate to severe behavioral/ emotional difficulties.	First time pregnant young women who are less than 18 weeks pregnant and of low-income are eligible to receive regular home visits from a nurse up until the baby is two years old.	Available to all Los Angeles County families at no cost who deliver, or plan to deliver, at one of 13 participating Welcome Baby hospitals regardless of income status. Families who reside in a Best Start Community and score high risk on a standardized assessment during the hospital visit are eligible for referral to either HFA, PAT, or PPP depending on their Best Start Community.

	Early Head Start	Healthy Families America (HFA)	Parents As Teachers (PAT)	Positive Parenting Practices (PPP)	Nurse-Family Partnership (NFP)	Welcome Baby
Eligibility (continued)				<p>Standard Triple P (Level 4): for parents with child(ren) with moderate to severe behavioral/emotional difficulties.</p> <p>Enhanced Triple P (Level 5): for families with other sources of distress (e.g. relationship conflict, depressed mood, high stress).</p> <p>Pathways Triple P (Level 5): for parents at risk of child maltreatment.</p>		
Scope of Services	<p>Services may be provided in the home of the family or in a licensed child development center or family child care home. Visits include 90 minute weekly visits plus bimonthly socializations (parent-child play and interaction meetings).</p> <p>Comprehensive early education services as well as other services including linking families with health, mental health, disability, nutrition and social services.</p> <p>Parent involvement component and services specifically designed for pregnant women.</p>	<p>Services are provided in the home, weekly for the first six months then tapers to quarterly home visits for up to three to five years.</p> <p>Services focus on supporting the parent and parent-child interaction, development, and early learning. Home visitors partner with families to set and meet family goals, conduct standard assessments, and provide links to health and social services as needed.</p>	<p>Services are provided in the home twice monthly and monthly group meetings then tapers to one a month and quarterly home visits for up to three to five years. Services focus on parent-child interaction, development-centered parenting, and family well-being.</p> <p>Home visitors partner with families to set and meet family goals, conduct standard assessments and provide links to health and social services as needed.</p>	<p>Selected Triple P (Level 2):</p> <ul style="list-style-type: none"> <li>▪ Seminar Format: two hours each for large groups of parents</li> </ul> <p>Primary Care Triple P (Level 3):</p> <ul style="list-style-type: none"> <li>▪ Up to three to four sessions, usually 15-30 minutes in duration</li> </ul> <p>Group Triple P (Level 4):</p> <ul style="list-style-type: none"> <li>▪ Involves five (2 hour) group sessions, three (15-30 minutes) individual phone consultations and conclude with another group session</li> </ul> <p>Standard Triple P (Level 4):</p> <ul style="list-style-type: none"> <li>▪ 10 individual consultation sessions (1-hour each)</li> </ul> <p>Enhanced Triple P (Level 5):</p> <ul style="list-style-type: none"> <li>▪ Up to 11 sessions</li> <li>▪ Three modules, each consisting of three sessions (60-90 minutes each) along with maintenance and closure session following conclusion of final module</li> </ul> <p>Pathways Triple P (Level 5):</p> <ul style="list-style-type: none"> <li>▪ Up to four individual sessions or four groups sessions (2 hours each)</li> </ul>	<p>The visit schedule varies according to times of transition and need and occur weekly for the first six weeks after enrollment and after birth; twice a month at other times during pregnancy and postpartum, tapering to monthly for the last three to four months of service. Nurses help with ensuring the young mother has access to prenatal care, preparing the home as a safe place for the baby to live and play, strengthening parenting skills, and making referrals to healthcare, child development services, job training and other support services available in the local community. In addition, improves the economic self-sufficiency of the family by helping parents develop a vision for their own future, plan future pregnancies, continue their education, and find work.</p>	<p>Free and voluntary program offers the following during pregnancy and throughout the baby's first nine months:</p> <ul style="list-style-type: none"> <li>▪ An <b>in-hospital visit</b> where parent will receive assistance with breastfeeding and information about bonding and attachment, taking care of their baby, a standardized strengths and needs assessment, and linkages to resources the family may need during transition into motherhood</li> <li>▪ A personal <b>Parent Coach</b> who meets with the mother and her family in the comfort and convenience of their home</li> <li>▪ <b>Information and support</b> on breastfeeding, home safety, infant and child development, developmental-centered parenting, early learning, maternal health and community resources</li> <li>▪ An <b>in-home appointment</b> with a nurse within the first few days after delivering at the hospital</li> <li>▪ <b>Referrals</b> to additional resources to help the mother and her baby</li> </ul>

	Early Head Start	Healthy Families America (HFA)	Parents As Teachers (PAT)	Positive Parenting Practices (PPP)	Nurse-Family Partnership (NFP)	Welcome Baby
Scope of Services (continued)						<ul style="list-style-type: none"> <li>Baby-and mom-friendly items such as thermometers, nursing pillows, toys and baby-proofing supplies for the home</li> </ul>
Outcomes	Design: RCT Significant, positive impacts on standardized measures of children's cognitive and language development; and favorable impacts on social-emotional development. Parents are more emotionally supportive, less detached from their children, support more language and learning opportunities, and use a wider range of discipline strategies.	Design: RCT Increased use of non-violent parenting practices. Reduce child abuse and neglect. Increased positive learning behaviors (works and plays cooperatively, follows directions and rules, completes work on time). Fewer children in special education, fewer retained in first grade, more children in gifted programs. Improved access and utilization of child health services completed well child visits, medical home, and immunizations.	Design: RCT Improved knowledge of parenting behaviors and attitudes; child development. Parents engaged in more language development activities and were more likely to read at home. Parents took active role in child's schooling. Children have higher scores on measures of achievement, language ability, social development, and other cognitive abilities. Teen mothers show increased knowledge about discipline, have organized home environment. Fewer cases of abuse and neglect.	Design: RCT Reduced problem behavior in children, improved parent's well-being and parenting skills. Parents less likely to use harsh discipline and parents are less stressed. Reduced rates of child abuse, reduced foster care placements and hospitalizations for child abuse injuries.	Design: RCT Improved prenatal health. Fewer childhood injuries. Fewer subsequent pregnancies. Increased time between births. Increased maternal employment. Improved school readiness.	Design: Community Comparison Group Increased exclusive breastfeeding through age four months. Increased infants with "up to date" immunizations. Families demonstrated higher quality in-home learning environments, more frequently engaged in home learning activities, and used non-violent parenting skills. Families were more likely to use "regulated" child care.
Cost	Free with funding provided by the U.S. Department of Health and Human Services, Administration for Children and Families	Free through Welcome Baby referral  Free through MIECHV funding in Antelope Valley;	Free through Welcome Baby referral	Free through Welcome Baby referral  Other funding streams	Free through LAC-DPH and LAUSD MIECHV and other grant funding	Free through First 5 LA funding
To refer	Call, toll-free, 1.877.773.5543 or visit <a href="http://www.PreKKid.org">www.PreKKid.org</a>	Antelope Valley Partners for Health 661-942-4719  For more information about the Stronger Families Network, call LA Best Babies Network 213-250-7273 x 111	Richstone Family Services 310-970-1921  For more information about the Stronger Families Network, call LA Best Babies Network 213-250-7273x111	Child Guidance Center (714) 793-9484 ext. 629  For more information about the Stronger Families Network, call LA Best Babies Network 213-250-7273 x111	For more information, call 213.639-6433 or 213.639.6434.	Visit <a href="http://www.first5la.org/Welcome-Baby">http://www.first5la.org/Welcome-Baby</a> for the list of participating hospitals  For more information about the Stronger Families Network, call LA Best Babies Network 213-250-7273 x111

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## Los Angeles County Home Visitation Policy Brief

### I. Introduction

Every year, more than 133,000 babies are born in Los Angeles County. Many of these children are born into low-income or single parent homes, to parents who face multiple challenges trying to meet their basic needs for shelter or safety let alone to provide nurturing parent-infant interactions. These children -- all children -- deserve to have optimal health at birth and a positive nurturing home environment with caregivers who make healthy lifestyle choices.

Considerable research shows that quality home visitation programs help make that possible. Home Visiting services match parents with trained providers who share information and offer support during pregnancy and throughout their child's earliest years. These services strengthen parent-child relationships, promote optimal child development, increase language development, literacy, and reduce child abuse and neglect. Studies show they reduce costly societal problems such as preterm and low-weight birth, emergency room visits, and involvement in the social welfare and juvenile justice system. And it makes sense.

We now know that a child's earliest years are the most formative time for brain development. A staggering 700 neurons are created a second in a baby's brain. A full 85% of their brain is developed by age 3. In other words, the brain architecture that will support this child for life is literally built in the early years. Home Visiting is the right intervention at the right time. When done well, it gives these children the right start in life, and saves society money, because it helps a family to build and sustain the nurturing and supportive environment that children need to thrive.

Here in Los Angeles County, we have many strong home visiting programs. Both the County of Los Angeles and First 5 LA invest heavily in high quality home visiting programs. Additionally, private philanthropy funds many others. But our system is fragmented, the funding is not sustainable, and programs are not working together as they should. Historically there has been little coordination or communication between agencies seeking to expand individual programs, or bring additional home visitation services to underserved communities. As a result, we as a community are not delivering services as effectively or as efficiently as we could, or should.

The Los Angeles County Perinatal and Early Childhood Home Visiting Consortium seeks to change that. The Consortium is a group of committed stakeholders dedicated to building a more comprehensive and cohesive system of Home Visiting in LA County. This group recognized that Los Angeles County could benefit from policies that establish county goals for a coordinated system of quality services for expectant and parenting families. The Consortium recognized that this was especially important because the federal landscape was changing; we have potential for significant increases in funding that will sustain our programs, but commensurate increases in

accountability that we will need to meet to access that funding. Accordingly, the Consortium, with assistance from the Pew Home Visiting Campaign, has begun that process. As a first step, it developed a set of seven high level policy recommendations.

This Policy Brief gives background on Home Visiting in LA County and the development of the Consortium and its recommendations. Next it explains each Recommendation in detail. Finally, it describes next steps. We are at the early stages of this exciting and unprecedented journey and welcome your input and involvement.

## **II. Background**

### **Home Visiting and the Federal Landscape**

Programs have been providing Home Visiting services for decades. Here in Los Angeles County, we have long served families with programs such as Early Head Start, the Nurse Family Partnership and Healthy Families America. But the funding for these and other programs has been erratic and the programs have operated independently of each other.

Three years ago, that began to change. In 2010, the President signed the Patient Protection and Affordable Care Act. Included in the Act was the Maternal, Infant, and Early Childhood Home Visiting program (MIECHV), which allocated \$1.5 billion towards home visitation programs. MIECHV was the first significant federal investment in Home Visiting Services and it created enormous opportunity for expanded, and potentially sustainable, funding throughout the country. Each state was invited to apply for funds.

California of course, decided to apply. Here in Los Angeles County, the Department of Public Health convened a Community Advisory Committee of Home Visiting stakeholders to assist with that application. California sought to expand the services of two well-known and proven programs, the Nurse Family Partnership and Healthy Families America. California's application was approved and Los Angeles County received significant increases in funding for these two programs.

As this was happening, First 5 LA was also expanding and changing its investments in Home Visiting. Its funding began to focus on Best Start Communities and First 5 LA decided to invest in a groundbreaking effort to provide universal "Welcome Baby" home visiting services to families giving birth in these communities. With Welcome Baby, every family giving birth in a designated hospital would receive "light touch" home visiting services. Those deemed to be at-risk would then be eligible to receive more intensive Home Visiting services from an evidence-based provider chosen by the Best Start Community. These services significantly expand the reach and availability of Home Visiting in Los Angeles County.

As states were preparing their applications and then implementing their MIECHV funded programs, the PEW Charitable Trust recognized that states would benefit from support and guidance to develop good policies and strong programs. It launched a state home visiting campaign to align state policies on home visitation funding, administration and

accountability to ensure that investments were made in quality home visiting services that achieve expected results.

### **Los Angeles County Perinatal and Early Childhood Home Visitation Consortium**

Los Angeles Home Visiting stakeholders recognized that if we wanted our Home Visiting funding to be sustained, and expanded, we needed to adopt best practices from other states and build a more cohesive system of Home Visiting in LA County. We knew this would take a broad-based and diverse coalition. We were also aware of Pew's work and knew what a benefit Pew could be in helping us achieve our potential.

Accordingly, in 2012 the Los Angeles County Department of Public Health – Maternal, Child and Adolescent Health Programs (MCAH) convened the group. It started with the Community Advisory Committee that had come together in 2010 to apply for MIECHV funds and then expanded that group to include additional perinatal stakeholders. It then partnered with LA Best Babies Network to co-chair the Los Angeles County Perinatal and Early Childhood Home Visitation Consortium was born.

The next step was to engage with Pew. The Los Angeles Partnership for Early Childhood Investment -- and specifically the Baby Futures Fund -- had been in conversations with the leaders at Pew as the Consortium was developing. Even though Pew's Home Visiting Campaign is housed in the "Pew Center on the States" and even though Pew had never worked with a county directly, Pew was intrigued. When it saw the strength and diversity of the Consortium, and realized the potential for real change and progress in a community as large as many states, Pew agreed to work with Los Angeles as its first (and only) County. With funding provided by the Baby Futures Fund, Children Now was chosen as the Pew partner for this campaign.

### **Policy Recommendations Developed**

On January 22, 2013, the Consortium held a brainstorming session followed by round table discussions to identify key issues related to the current state of home visitation services in Los Angeles County, and identify strategies that could strengthen and improve home visitation services provided across LA County. From this review, a unifying Vision was conceived and seven common themes were identified. The Consortium divided into subcommittees. A Policy Subcommittee worked on developing the vision and policy recommendations and an Operations Subcommittee is working on developing the operational nuts and bolts of a comprehensive Home Visiting system.

The Policy Subcommittee then took on the work of fine-tuning that Vision and turning the seven themes into Recommendations. It engaged in a deeply collaborative process, meeting monthly and discussing each proposed recommendation in turn. It also worked closely with the Operations Subcommittee. The Vision and proposed recommendations were then brought back to the full Guiding Coalition for approval in June of this year.

The Vision that this collaborative group of perinatal stakeholders and health leaders adopted is that:

***All expectant and parenting families in Los Angeles County have access to quality in-home support delivered by well trained, culturally sensitive individuals to promote optimum health, safety, and child development, and strengthen family functioning, resiliency and self-sufficiency.***

### **III. Recommendations**

The following recommendations were developed by the Policy Subcommittee for Los Angeles County to improve home visitation efficacy:

#### **1. Systematically assess and regularly report the need for and capacity of home visitation services that are focused on achieving the core outcomes for expectant and parenting families in Los Angeles County**

- Establish County baseline data indicators to be measured (i.e. area birth outcomes, FIMR, maternal mortality, WIC, etc.) in order to identify community service needs
- Create a report/brief on current data to assist in determining services gaps in Los Angeles County
- Develop a mechanism for regularly reporting on the demand for and capacity of perinatal and early childhood home visitation programs in Los Angeles County

This first recommendation from the Consortium focuses on having a systematic means by which to monitor need for home visitation services and capacity of organizations to meet the need. This recommendation further calls for home visitation services to be directed towards achieving certain core outcomes or goals for LA County families; these “core outcomes” are described further in recommendation 6 below. This recommendation addresses concerns raised by consortium members that programs often “work in isolation”, and therefore duplicate services might be provided to the same families. A second concern was that programs are often funded by “soft” funding streams so that their service capacity tends to “come and go”. Healthcare providers thus find themselves trying to make referrals to programs that are at capacity or no longer providing services.

The steps outlined to achieve this recommendation include (1) the identification and adoption of indicators that can track community needs that could be addressed through home visitation services; (2) development of a report template through which to communicate service needs and lastly, (3) a mechanism for regularly reporting the demand and capacity for home visitation services. Each of these steps requires the identification of champions and resources to complete the action steps.

#### **2. Establish quality standards for home visitation practices implemented in Los Angeles County and direct public funding to programs meeting quality standards**

- Identify and adopt quality standards for home visitation programs that build on evidence-based/promising practices and supports innovation for unique vulnerable populations
- Work in partnership with evidence-based/promising practice providers to help ensure that innovations/adaptations not disrupt the integrity of the curriculum
- Establish mechanisms to monitor continuous quality improvement (CQI) for programs to oversee implementation processes, and track short and long term outcomes
- Define CQI and performance measures that apply across home visitation agencies
- Allocate program funding for CQI activities

The second recommendation focuses on the need to ensure that families are receiving quality home visitation services and that public funds are allocated for services proven to achieve the expected results and family benefits. This recommendation is intended to address the following concerns raised by consortium members:

- Individual agencies may not implement an evidence-based model as it was intended, and therefore may not achieve the expected results;
- Evidence-based models may not be sufficiently flexible in their implementation to meet the needs of specific populations
- Locally developed home visitation programs, often do not have sufficiently rigorous evaluation data to demonstrate whether or not the program achieves its intended outcomes; program grants often do not provide sufficient funds to design and complete a robust program evaluation.
- Programs that have strong ties to communities and have some evidence of effectiveness should be provided with a mechanism by which they could become eligible for public funds
- Public funds should be directed to programs that demonstrate consistent benefits for families

The consortium aims to develop and promote a set of quality standards for Los Angeles County over the next 12 months.

### **3. Create a coordinated system of quality home visitation services for expectant and parenting families**

- Develop guidelines for matching families to home visitation programs and community support services

- Develop or identify an appropriate county-wide cloud-based system for making and tracking completion of referrals to home visitation programs
- Develop a systematic way to identify and recruit families in need into appropriate home visitation programs
- Identify adequate funding mechanisms to create and sustain the referral system
- Create an evaluation component for the referral system to understand actual use of services
- Promote an outreach and referral system to ensure home visitation programs are aware of County and community-based resources
- Identify and implement mechanisms to recognize and track perinatal and early childhood home visitation program referrals and completion in Los Angeles County

The third recommendation focuses on the need for a coordinated system of quality home visitation programs throughout LA County. This recommendation addresses concerns raised above by consortium members that programs often “work in isolation”, may duplicate services to the same families, may hold families on “wait lists” when other quality programs have openings, and that programs tend to “come and go”. . A centralized system for identifying available services would help address many of these issues. Each of these steps requires the identification of champions and resources to complete the action steps.

**4. Establish mechanisms to enable all perinatal and early childhood home visitation programs in Los Angeles County to meet quality standards**

- Establish a training curriculum and opportunities (technical assistance/coaching) to assist programs to achieve and sustain quality standards
- Identify funding mechanisms for training and technical assistance
- Define or adopt a process for existing programs to become classified as evidence-based/promising practices
- Establish mechanisms for funding evaluation of promising practices
- Incorporate technical assistance into an overall budget plan that can be used to provide support for agencies’ sustainability plans, if needed

The fourth recommendation focuses on establishing mechanisms that will support and enable perinatal and early childhood home visitation programs to meet the LA County quality standards. This recommendation addresses the interest of consortium members to provide mechanisms for programs to develop their capacity and meet quality standards as needed in order for local innovative programs to have a pathway to become recognized as EBP/PP and thereby have access to sustainable funding. This will involve developing consensus around the content of a training curriculum that will allow programs to meet the quality standards and the provision of training and technical assistance to programs. Each of these steps requires the identification of champions and resources to complete the action steps.

**5. Establish mechanisms to track spending and core outcomes for perinatal and early childhood home visitation programs in Los Angeles County**

- Track home visitation costs and program outcomes through a standardized mandated report
- Identify public and private funding mechanisms to sustain effective, quality home visitation programs
- Develop local data designed to capture information that can demonstrate the impact and potential return on investment from the community of home visitation programs

The fifth recommendation focuses on developing sustainable funding streams for quality home visitation services. Consortium members acknowledged that a key factor needed to generate funding is demonstrating the relationship between program costs and benefits to families and society. This requires tracking cost and outcome data.

Each of these steps requires the identification of champions and resources to complete the action steps.

**6. Monitor the impact on the community of perinatal and early childhood home visitation services in Los Angeles County**

- Determine core outcomes to be achieved through in-home services for expectant and parenting families in Los Angeles County
- Identify or develop data sources, data collection processes, and reporting mechanisms to systematically track and report the core outcomes defined above
- Develop processes for seamless data sharing across home visitation agencies
- Identify sufficient funding to create and sustain data systems for monitoring resources, demand, and outcomes for in home services in Los Angeles County
- Provide technical assistance/consultation for collecting and tracking data

The sixth recommendation outlines the steps needed to monitor the impact of the home visitation services that are so critical to several recommendations describe previously. Each of these steps requires the identification of champions and resources to complete the action steps.

**7. Develop a strategic plan to bring the community of home visitation services to scale for Los Angeles County**

- Conduct a county-wide assessment of agencies that are currently providing home visitation services or have the capacity to provide such services
- Develop a logic model and incremental work plan toward implementing and realizing the strategic plan

The seventh recommendation calls upon the leaders in Los Angeles County to develop a strategic plan that will address actions and a timeline to bring to scale perinatal and early childhood home visitation services throughout Los Angeles County so that the vision of the consortium can be realized.

#### **IV. Conclusion and Next Steps**

Consortium and subcommittee meetings throughout 2013-2014 will focus on identifying champions and developing work plans towards meeting these recommendations. Major challenges identified include communication mechanisms for data sharing across agencies, incentives for programs to become evidence-based models, staff training and program fidelity, real-time data, and defining the purpose and expected outcomes for home visitation systems. These factors have influenced and directed discussions at the Guiding Coalition meetings.

Members agreed that in order to create a sustainable environment for quality home visitation services, feedback is imperative from those who work in their communities, individuals who understand the operation of agencies, and key decision makers in the health care field.

In order for parents to create a safe, healthy and stimulating home environment for their children, we need to strengthen the economic and social self-sufficiency and stability of their families. Home visitation programs are designed to educate and encourage life-long skills that empower confidence in parents regardless of their socioeconomic status. Babies receiving home visitation services have a greater chance of achieving higher test scores in English and Math during elementary school, graduating from high school, and becoming productive members of society. Moreover, these children are less likely to participate in gangs, become career criminals, drug offenders, or domestic abusers.

Guiding Coalition and Policy Subcommittee members understand the impact of home visitation programs on society stems from individual families receiving quality perinatal and early childhood services. Members believe every child has the right to a healthy start, and strive to make this concept a reality through the policy and operational implementation of the suggested recommendations.

We are at an exciting time in our Country and our County on this issue. We have a national conversation about investing in the early years that is both unprecedented and gives rise to the potential for significant increases in funding for Home Visiting Services. And here at home we have, through the Consortium, Home Visiting stakeholders coming together like never before, putting aside their institutional hats and rolling up their sleeves to build a better system. With this confluence of factors, we have potential to change the lives of tens of thousands of families for the better, giving the children of those families the start in life that they deserve.

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