

**FIRST FIVE YUBA
COMMISSION**

**2009-2011
STRATEGIC PLAN**



APPROVED BY COMMISSION JUNE 25, 2009

**FIRST FIVE YUBA COMMISSION
COMMISSIONERS**

Esperanza Arellano

(Appointed: October 14, 2008; Term expires: April 29, 2011)

Elementary School Teacher
1114 Yuba Street, Suite 121
Marysville, CA 95901
(530) 743-4704; esperanzarellano@gmail.com

Joseph W. Cassady, D.O., Treasurer/Secretary

(Appointed: December 1, 1998; Term expires: when replaced)

Public Health Officer, Yuba County Health and Human Services Department
5730 Packard Avenue
Marysville, CA 95901
(530) 749-6781; (530) 741-6397 Fax; joecassady@co.yuba.ca.us

Matthew John Floe, Chair

(Reappointed: April 24, 2007; Term expires: April 26, 2010)

Resource Specialist/Parent Educator, Sutter-Yuba Mental Health
1965 Live Oak Blvd.
Yuba City, CA 95991
(530) 682-3631; jfloe@co.sutter.ca.us

Mary Jane Griego

(Appointed: January 21, 2003; Term expires: when replaced)

Supervisor, District 3, Yuba County
915 Eighth Street
Marysville, CA 95901
(530) 749-7510 or 749-1557; (530) 742-3864 Fax

Suzanne Nobles, Vice-Chair

(Appointed: January 28, 2003; Term expires: when replaced)

Director, Yuba County Health and Human Services Department
5730 Packard Avenue
Marysville, CA 95901
(530) 749-6271; (530) 749-6281 Fax; snobles@co.yuba.ca.us

Ricardo Samayoa

(Appointed: May 12, 2009; Term expires: April 26, 2010)

Program Analyst, E Center Head Start Programs
1128 Yuba Street
Marysville, CA 95901
(530) 741-2995x133; rsamayoa@ecenter.org

Barbara Warren

(Reappointed: May 6, 2008; Term expires: April 28, 2011)

Retired Educator
1114 Yuba Street, Suite 121
Marysville, CA 95901
(530)749-4877; first5@co.yuba.ca.us

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I. INTRODUCTION

Yuba County is one of California's original 27 counties. Founded on February 18, 1850, it is known as the gateway to California's historic Mother Lode Country. Yuba County and its largest city, Marysville, have a history that dates back to the early Gold Rush Era. Commercial, agricultural, recreational, educational, and industrial activities center in Marysville. A new community, Plumas Lake, in the south part of the County is just beginning to emerge and thrive.

The First Five Yuba (FFY) Commission (formerly Yuba County Children and Families Commission [YCCFC]) was formed in January 1999 to implement the 1998 Proposition 10, California Children and Families Act. Since its inception, FFY has been committed to improving the status of Yuba County's children aged zero to five years old and their families. In the spring of 2006, the Commission hired a new Executive Director, Office Assistant, and Administrative Analyst. Major accomplishments since that time are:

- Built a professional staff including bilingual support, accounting expertise and excellent customer relations.
- Implemented Healthy Kids, Healthy Future.
- Improved School Readiness Programs.
- Instituted contract monitoring.
- Inaugurated a letter-of-intent RFP process.
- Streamlined the Committee system.
- Reported FFY accomplishments to County Supervisors and to State Federal legislative staffs.
- Staffed public outreach events for School Readiness and Healthy Kids, Healthy Future.
- Promoted FFY branding and awareness with a website, pamphlet and unpaid media, utilizing a PR firm provided by First 5 California.
- Developed long-term saving and spending plans.
- Recovered small county augmentation (monetary supplement).

The Commission developed a reserve fund of ten percent per month to act as an endowment and to provide for future long-term program sustainability.

This document presents the 2007 revisions to the Strategic Plan in accordance with California Health and Safety Code Section 130140(a)(1)(C). The Commission intends this to be an evolving document.

II. VISION, MISSION AND PURPOSES

During the FFY formation years of FY 1999-2000, and FY 2000-2001, the Vision Statement, the Mission Statement, and the statement of Purpose were developed and adopted, along with the original Strategic Plan.

Vision:

All Yuba County children age prenatal through five (5) years old will thrive in strong, supportive, nurturing, and loving family environments; enter school healthy; and ready to learn and become productive, well-adjusted members of society.

Mission:

Early childhood development is especially critical to the overall growth, development, and well-being of our children. Our mission is to enhance the early childhood development of Yuba County children. Increases in parenting skills, nurturing, and health care will assist in providing the means for Yuba County's children to enter school in good health, ready and able to learn, and emotionally well developed.

FFY will create and implement an integrated, comprehensive, and collaborative system of services and information to enhance optimal early child development. This system will function as a network that promotes accessibility to all services and information from any entry point into the system. The Commission uses local decision-making based on a diverse community, to provide for greater local flexibility and sensitivity in designing delivery systems.

Purposes:

1. To provide local leadership in attaining the statewide goals of First 5 California.
2. To administer the FFY tobacco tax.
3. To ensure that FFY revenues are spent on behalf of children aged 0 to 5 and their families.
4. To ensure that FFY revenues are spent to attain the broad strategic outcomes specified in the state statute and in policies published by the State Commission as follows:
 - a. Improved Systems of Care.
 - b. Improved Family Functioning.
 - c. Improved Child Development.
 - d. Improved Child Health.
5. To ensure that FFY programs address First 5 California focus areas:
 - a. Parent Education and Support Services.
 - b. Child Care and Early Education.
 - c. Child Health and Wellness.
6. To ensure that all community services to children 0 to 5 and their families are integrated coordinated, accessible, and culturally relevant.

7. To promote broad community input, including input from those most affected (i.e., parents of children 0 to 5), to the planning, development, and implementation of FFY programs.
8. To promote the development of parents as leaders and advocates, and to promote an asset-based approach to the development of neighborhoods and communities.
9. To ensure that program outcomes are measured.
10. To contribute to the body of knowledge concerning effective programs to promote strong families, child readiness for school, and child health.

III. STRATEGIC PLANS AND ACTIVITIES

Following a lengthy period of research and community assessment during 1999 and 2000, the FFY Commission published the original Yuba County Children and Families Commission Strategic Plan in July of 2000. The original strategic plan has been revised and updated six times.

During the Commission Retreat in June 2006, the Commission developed updated strategies for new projects based on a review of the needs of children age 0-5 and their families in Yuba County. A summary of these identified needs is given below. The Commission also established a system for the RFP and Mini Grant processes and procedures. In addition, this plan emphasizes compliance with new requirements of AB 109.

Outcomes are categorized in the table below in the four result areas as defined by First 5 California and are related closely to the outcome areas defined by First Five Yuba in its 2009 Strategic Plan.

First Five Yuba 2009 Strategic Plan Outcome Areas	First 5 California New Outcome Areas
<ul style="list-style-type: none"> • Improved Systems for Families 	Improved Systems of Care
<ul style="list-style-type: none"> • Improved Family Functioning: Strong Families 	Improved Family Functioning
<ul style="list-style-type: none"> • Improved Child Development: Children Learning and Ready for School, and • Improved School Readiness: Children Ready to Enter Kindergarten, added by California First 5 in 2001 	Improved Child Development
<ul style="list-style-type: none"> • Improved Child Health: Children are Healthy 	Improved Child Health

IV. OUTCOME AREAS AND STRATEGIES

FFY conducted a daylong retreat June 1, 2006 and developed priority strategies for use in developing a New Projects Request for Proposals (RFP) for the 2006-07 funding year. The Commission has committed to continuing its cooperation with five other counties in providing health insurance for children 0-5 whose parents earn less than 300 percent of the poverty level. This program is known as Healthy Kids, Healthy Future. The Commission is also committed to the School Readiness programs in partnerships with First 5 California.

Outcome Area #1: Improved Systems of Care

Strategies:

- Improve the communication and collaboration between agencies/programs and child care providers/teachers that will lead to comprehensive early child development services reaching families across the county.
- Improve the congruity with surrounding counties, especially Sutter County.
- Strengthen the Family Resource Center (FRC) systems by filling in the gaps in geographically underserved areas.
- Improve the sustainability of agencies and programs.
- Increase the community awareness of programs and activities for children 0-5 years of age and their families.
- Support community efforts that individualized services to children 0-5 with disabilities.
- Promote, expand, and support access to information about resources that reach members of our richly diverse community, accounting for language and cultural needs.
- Promote, expand, and support access to transportation in coordination with other community entities.

Indicators:

- Increase the accountability for results.
- Increase the geographic accessibility of services.
- Improve the capacity for agencies to provide services.
- Increase the cultural competence in the service delivery system.
- Increase the collaboration and service integration between and among providers serving children 0-5.
- Increase the collaboration across counties to utilize regional approach.
- Increase accessibility to services and programs for children and or their family members with disabilities.
- Improve media campaign, website, and outreach and awareness efforts.
- Increase access and support to transportation.

Statistics/Information:

- There are six FRC's in Yuba County, including one operated by the Yuba County Office of Education for Yuba County families who have young children with special needs. From July 2007 through June 2008, the FRC's located in Linda and Olivehurst served through home visitation and center-based services 300 families totaling 1,050 family members of which 351 were between the ages 0-5.¹
- Children's Home Society of California offers a comprehensive series of programs in both Yuba and Sutter counties to assist low-income parents in achieving self-sufficiency, promote quality by providing resources and training to child care providers, and to provide education and resources to parents.²
- The Children's Council, Children's Home Society of California, Child Care Planning Council of Yuba and Sutter Counties, and Bi-County Mental Health provide services to children 0 to 5.
- During the 2008-09 program years, 369 Yuba County children were served by Head Start. Of the 369 children, 94 were infants and toddlers enrolled in the Early Head Start program.³
- WIC (Woman, Infant and Children) is a Supplemental Nutrition Program for low-income pregnant, breastfeeding, and postpartum woman, and children under age five.⁴

Outcome Area #2: Improved Family Functioning

Strategies:

- Provide access to adult education and literacy programs to improve parent participation in all areas of family support.
- Increase access to parent education, whole family, and fatherhood support services throughout the community.
- Increase availability of substance abuse treatment and mental health services.
- Increase access to children and parenting literacy resources throughout the community.
- Increase availability of family friendly activities and events throughout the community.

¹ Grace Source, Inc. Management Information System 2008.

² Children's Home Society of California 2009.

³ E Center Head Start 2008-2009.

⁴ California Department of Public Health 2009 - www.cdph.ca.gov.

Indicators:

- Increase family reading/storytelling.
- Increase the percentage of teen parents receiving GED, high school diploma, higher education, or job training.
- Decrease the recurrence rates of child abuse/neglect in families served.
- Decrease the number of children 0-5, and their families living with food insecurity.
- Decrease the teenage birthrates.
- Decrease the need for foster care placement.
- Increase the number of family friendly activities and events throughout the community.

Statistics/Information:

- Sixty-one per 1,000 births to mothers age 15-19 compared with the California rate of 37 per 1,000.⁵
- There were 857 referred and substantiated cases of child maltreatment in the county (2007). Children younger than five accounted for 40 percent of these cases in the county.⁶
- In Yuba County the rate of food insecurity among adults in low income households (200% below Federal Poverty Level) is at 32% compared with 30% for California.⁷
- In Yuba County there are a total of 104 children currently placed in Foster Care, of those 51 are 0-5.⁸

Outcome Area #3: Improved Child Development

Strategies:

- Increase the availability and access to treatment for children at risk of school failure due to behavioral issues.
- Increase the quality, access and capacity of early care and education programs.
- Increase access to pre-k readiness programs.
- Increase access to 0-3 years of age educational programs.

⁵ Kids Count Census Data 2005 - www.kidscount.org.

⁶ Child Welfare Dynamic Report System 2007 - www.cssr.berkeley.edu/CWSCMSreports.

⁷ California Food Policy Advocates 2007.

⁸ Child Welfare Dynamic Report System 2007 - www.cssr.berkeley.edu/CWSCMSreports.

Indicators:

- Increase the linkages between early care and education programs and community-based programs to assist with providing information and resources to families.
- Increase parenting education programs and services for behavioral referrals.
- Increase the number of early care and education providers continuing their education.
- Increase the number of early care and education providers who become accredited.
- Increase the collaboration with local community college to offer a variety of course work and support services.

Statistics/Information:

- In Yuba County, there are an estimated 8,156 children ages 0-13 with parents in the labor force and 1,639 licensed child care slots.⁹
- Licensed child care is available for 20 percent of children with parents in the labor force. Some families choose friends and relatives (license-exempt caregivers) to care for their children, and programs for school age children are often not licensed by the state.¹⁰
- Yuba County's average cost of full-time care for one child (2-5 yrs.) in a licensed center is \$6,720 annually or \$560/month which is 17 percent of medium family income and 40 percent of a family making minimum wage.¹¹
- On March 31, 2009, 443 Yuba County children are on a waiting list (Centralized Eligibility List) for subsidized child care.¹²
- As of March 2009, 571 children from 317 families were receiving subsidized child care services through Children's Home Society's Alternative Payment and CalWORKs (California Work Opportunity and Responsibility to Kids) Child Care subsidy program with 443 on the waiting list.¹³
- In FY 2006-2007, 478 State Preschool slots and 179 full day, general child care slots were funded in Yuba County.¹⁴
- Forty-one percent of children entering public kindergarten in California during the 2007-2008 school year were classified as English language learners.¹⁵

⁹ California Child Care Resource & Referral Network 2006 - www.rrnetwork.org.

¹⁰ California Child Care Resource & Referral Network 2006 - www.rrnetwork.org.

¹¹ Census 2007 & Children's Home Society of California 2009.

¹² Children's Home Society of California's CEL - Centralized Eligibility List March 31, 2009.

¹³ Children's Home Society of California's CEL (Centralized Eligibility List), Alternative Payment Program and CalWORKs Programs

¹⁴ California Department of Education, Child Development Division.

- Thirty-six percent of children were Spanish speaking and 9 percent were Hmong speaking at the 2007 School Readiness KinderCamp sites.¹⁶
- There were 2,983 English Language Learners in Yuba County for the 2007-2008 school year.¹⁷
- Twelve percent of licensed providers have received non-credit training, and only seven percent have completed college course work in this area.¹⁸
- Given the documented relationship between turnover and program quality, the persistence of high turnover in the ECE field, often linked with poor compensation, is of serious concern.¹⁹
- Given the documented relationship between staffing stability and program quality (Helburn, 1995), the persistence of high turnover in California's ECE workforce is of serious concern. The earnings gap between kindergarten and ECE teachers, in particular, is likely to continue to fuel such turnover, particularly among those who have made the greatest investment in education and training.²⁰
- Center staff stability has been linked to overall program quality, the ability of a program to improve its quality, and children's social and verbal development.²¹
- Inadequate compensation constrains efforts to build a more skilled workforce.²²
- Inequities in access to quality care and education are likely to perpetuate inequities in school readiness not only between children of low-income and higher-income families, but within the most disadvantaged group of children in our society, based on the type of care they receive.²³

¹⁵ Education Data Partnership 2008 - www.ed-data.k12.ca.us.

¹⁶ Marysville Joint Unified School District School Readiness Annual Report 2007/08.

¹⁷ Education Data Partnership 2008 - www.ed-data.k12.ca.us.

¹⁸ Center for the Study of Child Care Employment (Disparities in California's Child Care Subsidy System: A Look at Teacher Education, Stability and Diversity) 2007 - www.irle.berkeley.edu/cscce/index.html.

¹⁹ Center for the Study of Child Care Employment (Disparities in California's Child Care Subsidy System: A Look at Teacher Education, Stability and Diversity) 2007 - www.irle.berkeley.edu/cscce/index/html.

²⁰ Center for the Study of Child Care Employment (California Early Care and Education Workforce Study: Licensed Child Care Centers and Family Child Care Providers) 2006 - www.irle.berkeley.edu/cscce/index.html.

²¹ Center for the Study of Child Care Employment (Disparities in California's Child Care Subsidy System: A Look at Teacher Education, Stability and Diversity) 2007 - www.irle.berkeley.edu/cscce/index.html.

²² Center for the Study of Child Care Employment (Raising Teacher Education and Training Standards For Universal Preschool in California) 2004 - www.irle.berkeley.edu/cscce/index.html.

²³ Center for the Study of Child Care Employment (Disparities in California's Child Care Subsidy System: A Look at Teacher Education, Stability and Diversity) 2007 - www.irle.berkeley.edu/cscce/index.html.

Outcome Area #4: Improved Child Health

Strategies:

- Increase the access to prenatal and postpartum services to ensure that pregnant women will receive at least two trimesters of prenatal care.
- Increase the access to home visiting prenatal and infant care program and services.
- Increase exclusive breastfeeding to six months of age as per American Academy of Pediatrics guidelines.
- Increase the access to more mid-level health providers including midwives, nurse practitioners, and physician assistants.
- Increase the access to regular dental care (screenings, check-ups, and sealants).
- Improve the access to fluoride.
- Increase the access to health, developmental screenings, and well child exams.
- Increase nutrition education and physical fitness awareness to reduce obesity in families with children 0-5 years of age.
- Increase the access to safe neighborhood parks and age appropriate playgrounds.
- Increase sun safety practices.

Indicators:

- Increase the number of pregnant women receiving adequate prenatal care.
- Increase the number of children 0-5 receiving timely well baby check ups and preschool physicals as scheduled.
- Increase the number of children 0-5 with a regular medical home.
- Increase the number of children 0-5 with health insurance coverage.
- Increase the rate of breastfeeding (participant and population based).
- Increase the number of children receiving annual dental exams beginning by age two.
- Increase the number of children 0-5 with dental insurance.
- Increase the number of children 0-5 who receive developmental screenings (participant and population based).
- Increase the number of parents knowledgeable about nutrition, physical fitness and its impact on school readiness, learning, and children's healthy development.
- Decrease the infant mortality.
- Decrease the number of newborns with low birth weight.
- Decrease the number of 0-5 children weighing at the 95th percentile.
- Increase the number of parks that have family friendly restrooms that are accessible and ADA compliance.
- Increase the number of parks with 0-5 years of age with accessible playground equipment.

Statistics/Information:

- Sixty-five percent of pregnant women receive early prenatal care (during the 1st trimester); the Healthy People 2010 goal is ninety percent. Yuba County has a low ranking of 56 out of 58 counties.²⁴
- Seven (7) percent of live births in the county are of low birth weight, compared with HP 2010 goal of five percent.²⁵
- Neonatal death rates (birth to 28 days) are high in the county at 5 per 1,000, compared with HP 2010 goal of 2.9 per 1,000 live births.²⁶
- Infant mortality rates are high at eight (7) per 1,000 live births in Yuba County, compared with the California rate of 5.3 and Healthy People 2010 goal of 4.5. Risk factors for infant death rates include: teen parents, substance abuse, alcohol use, or smoking during pregnancy, premature birth, domestic violence, nutritional health, and inadequate prenatal care.²⁷
- Sixty-one per 1,000 births to mothers age 15-19 compared with the California rate of 42 per 1,000.²⁸
- Eighty-two percent of birth mothers initiate breastfeeding during early postpartum, compared with 86.6 percent in California. However, we lack data on the number of mothers continuing breastfeeding.²⁹
- Eighty-eight percent of children are fully immunized at kindergarten entry, compared with Healthy People 2010 goal of 90 percent and the California average of 92 percent.³⁰
- Yuba County's profile of hunger and food assistance indicates a relatively high percentage in need. Around 58 percent of Yuba County children receive free or reduced school lunch.³¹

²⁴ Children Now 2007 - www.childrennow.org & California Department of Public Health 2008 - www.cdph.ca.gov.

²⁵ California Department of Public Health 2006 - www.cdph.ca.gov & Healthy People 2010 - www.healthypeople.gov.

²⁶ California Department of Public Health 2006 - www.cdph.ca.gov.

²⁷ California Department of Public Health 2006 - www.cdph.ca.gov.

²⁸ Kids Count Census Data 2005 - www.kidscount.org & California Department of Public Health 2006 - www.cdph.ca.gov.

²⁹ California Department of Public Health 2007 - www.cdph.ca.gov.

³⁰ California Department of Public Health 2007 - www.cdph.ca.gov & Healthy People 2010 - www.healthypeople.gov.

³¹ Education Data Partnership 2008 - www.ed-data.k12.ca.us.

- Thirty-two percent of Yuba County children, 0-5 years of age are overweight.³²
- In Yuba County 29 percent of children 0-5 years of age are physically fit and 74 percent never exercise.³³
- Fifty-nine percent of adults (18 and older) were overweight or obese with Body Mass Index (BMI) of 25 or over.³⁴
- Ninety-six percent children age 0-5 have health insurance in Yuba County.³⁵
- There are no private dentists and only two clinics in the county accept pediatric Medi-Cal patients. Sedated dental care requires a trip out of the Yuba and Sutter area.³⁶
- In 2007-08 the California Department of Education required all kindergarten children have a dental screening prior to enrollment.³⁷

V. CONCLUSION

In 2009-11, First Five Yuba plans to:

- A. continue to fund and implement its major initiatives including Healthy Kids, Healthy Future and School Readiness,
- B. continue to conduct a Request for Proposal (RFP) process to undertake new projects in this funding year based on the outcome areas, and
- C. continue to develop and refine local evaluation efforts.

³² Children Now 2007 - www.childrennow.org.

³³ Children Now 2007 - www.childrennow.org.

³⁴ Centers for Disease Control and Prevention 2006 - www.cdc.gov.

³⁵ Children Now 2007 - www.childrennow.org.

³⁶ Yuba County Health Department 2009.

³⁷ California Department of Education 2009 - www.cde.ca.gov.